SCHOOL LEADERSHIP AND MENTAL HEALTH

Prepared for AASA, The School Superintendents Association

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HANOVER RESEARCH

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INTRODUCTION

Addressing mental health issues in school districts is a key challenge for district leaders. Mental health has been a longstanding concern for students, staff, and leaders themselves, and these challenges have only increased in the wake of the COVID-19 pandemic. Indeed, a 2021 survey of district and charter network superintendents identifies student, teacher, and principal mental health as the three most common concerns of district leaders.[1]

To support ASSA, The School Superintendents Association (AASA) members in addressing mental health challenges, Hanover Research (Hanover) has prepared the following report examining strategies district superintendents and other leaders can use to safeguard their own mental health and support mental health for all constituents in their districts. This report draws on the available secondary literature examining mental health in school settings, as well as research across sectors examining mental health for organizational leaders that may be relevant to district superintendents. This report includes the following sections:

- **Section I** reviews strategies superintendents can use to safeguard their own mental health, including strategies to promote self-awareness of mental health needs and strategies to build resilience for coping with stress related to leadership roles.

- **Section II** discusses strategies superintendents can use to promote mental health for students and staff, including personal leadership to support mental health for direct reports and policy supports that can enhance school climate and access to mental health care.

PRACTICAL APPLICATIONS

Based on our findings, Hanover presents the following practical applications for superintendents:

- Superintendents should monitor their own mental health and wellbeing and develop a self-care plan that includes strategies to support mental health such as a healthy diet, sleep hygiene, and authentic personal connections. Regular self-care helps leaders build the resilience needed to cope with workplace stress, including secondary traumatic stress.

- Superintendents should exercise resonant leadership that renews their resilience through mindfulness, hope, and compassion. Leaders across sectors who use these practices to support wellbeing for themselves and team members mobilize teams for sustained achievement and build resilience for the stresses of a leadership role.

- Leaders at all district levels must establish open lines of communication and check in frequently with direct reports regarding mental health concerns and needs. If employees identify mental health needs, their managers should work with them to identify appropriate adjustments to job duties and work routines that support their mental health and refer them to appropriate mental health services as needed.

- Superintendents should survey students, staff, family members, and other members of the community to assess the degree to which school climate and organizational culture currently promote positive mental health for students and staff and identify any unmet mental health support needs. Developing and implementing a mental health plan requires the ongoing collection of data to inform the design of mental health supports and continuous improvement of mental health initiatives.

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[1] Diliberti, M.K. and H.L. Schwartz. "District Leaders' Concerns About Mental Health and Political Polarization in Schools: Selected Findings from the Fourth American School District Panel Survey." RAND Corporation, February 8, 2022. https://www.rand.org/pubs/research_reports/RRA956-8.html

KEY FINDINGS

School and district leaders must be aware of warning signs for secondary traumatic stress in themselves and their direct reports. Education professionals face an elevated risk of secondary traumatic stress, which can negatively impact their mental health, due to their work with children who may have been exposed to trauma. Leaders should periodically conduct a self-assessment for warning signs of secondary traumatic stress and plan specific strategies for self-care if they experience secondary traumatic stress.

School districts need formal policies in place to support mental health for both students and teachers. Both students and teachers benefit from a multi-tiered system of supports (MTSS) that combines universal supports for mental health and training to recognize peers who may need targeted interventions. Mental health policies should include strategies to provide students and teachers with access to mental health services and promote awareness of available resources.

A strong social and emotional learning (SEL) program is an essential element of a schoolwide approach to mental health. Schoolwide SEL for both students and adults improves mental health outcomes by supporting teachers in building positive relationships with students, providing students with skills needed to cope with stress and life challenges, and reducing student behavioral challenges that contribute to teacher stress. District leaders should ensure all teachers have opportunities to participate in professional development focused on supporting their SEL skills and enabling them to provide effective SEL supports to students.

The most effective SEL strategies integrate direct SEL support with efforts to promote a positive school climate. A school climate characterized by engagement, safety, cultural competence, cultural responsiveness, and challenge and high expectations facilitates the development of positive, respectful, and supportive relationships among adults in the school. Research finds that positive school climates build resilience for students and address common sources of stress for teachers such as increasing job demands, work resources that limit teachers' autonomy, and the social and emotional skills teachers need to manage stress and support students.

Ongoing data collection is essential to the success of school mental health policies. Districts begin the process of developing a mental health plan by collecting data to identify needs, including data on outcomes related to mental health and data from existing or new surveys of staff, students, and families. Districts continue to collect data on the impacts of mental health programs, such as survey data on mental health indicators and school climate and workforce indicators such as absenteeism, to support continuous improvement and program evaluation.

SECTION I: SAFEGUARDING LEADERS' MENTAL HEALTH

In this section, Hanover discusses strategies school and district leaders can use to safeguard their own mental health. This section begins with a review of awareness of mental health needs before discussing strategies leaders can use to build resilience, including the use of a resonant leadership approach to support organizational improvement while protecting leaders' mental health.

AWARENESS OF MENTAL HEALTH NEEDS

The stresses inherent in leadership roles can have negative effects on superintendents' mental and physical health.[2] Addressing mental health is particularly important as schools recover from the COVID-19 pandemic. Research conducted during the pandemic finds that many educators have experienced secondary traumatic stress from the pandemic's impacts on their students.[3] The **National Child Traumatic Stress Network** (NCTSN) defines secondary traumatic stress as "the emotional duress that results when an individual hears about the firsthand trauma experiences of another," and notes that child-serving professionals including educators and district leaders are at higher risk of secondary traumatic stress due to their responsibilities supporting children who have experienced trauma.[4]

Superintendents may also have experienced first-hand trauma, including trauma related to COVID-19, that impacts their mental health, or experience mental health challenges not directly related to trauma.[5] The **National Institute of Mental Health** (NIMH) estimates 21 percent of adults in the United States met the diagnostic criteria for a mental health disorder in 2020, suggesting that many superintendents and other leaders will experience mental health challenges.[6]

School and district leaders should be aware of the warning signs for secondary traumatic stress or vicarious trauma listed in Figure 1.1. The National Center for Safe Supportive Learning Environment has developed a **Secondary Traumatic Stress and Self-Care Packet** with a self-assessment tool leaders can use to periodically assess these warning signs and their implementation of self-care practices. The packet also includes a planning tool leaders can use to commit to specific strategies for self-care.[7]

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[2] Kafele, B.K. "The Mental Balancing Act for School Leaders." *Educational Leadership*, December 1, 2020. https://www.ascd.org/el/articles/the-mental-balancing-act-for-school-leaders

[3] Panlilio, C. and C. Tirrell-Corbin. "Our Research Shows Educators Are Experiencing Trauma During the Pandemic. Here's How We Can Reduce the Burden." EdSurge, March 2, 2021. https://www.edsurge.com/news/2021-03-02-our-research-shows-educators-are-experiencing-trauma-during-the-pandemic-here-s-how-we-can-reduce-the-burden

[4] Peterson, S. "Secondary Traumatic Stress." Text. The National Child Traumatic Stress Network, January 30, 2018. https://www.nctsn.org/trauma-informed-care/secondary-traumatic-stress

[5] Lonsdorf, K. "People Are Developing Trauma-like Symptoms as the Pandemic Wears on." National Public Radio, April 7, 2022. https://www.npr.org/2022/04/07/1087195915/covid-pandemic-trauma-mentalhealth

[6] "Mental Illness." National Institute of Mental Health. https://www.nimh.nih.gov/health/statistics/mental-illness

[7] "Secondary Traumatic Stress and Self-Care Packet." National Center on Safe Supportive Learning Environments. pp. 6–9. https://safesupportivelearning.ed.gov/sites/default/files/Building_TSS_Handout_2secondary_trauma.pdf

Figure 1.1: Warning Signs for Secondary Traumatic Stress

Hypervigilance	• Excessive alertness for potential threats or dangers
Poor Boundaries	• Taking on too much work, taking work personally, or having difficulty separating work and personal time
Avoidance	• Disconnecting from other people
Inability to Empathize/Numbing	• Emotionally disconnecting from work
Addictions	• Attaching to distractions from work and/or personal life
Chronic Exhaustion/Physical Ailments	• Unexplained fatigue or physical pain beyond what would be expected from typical exertions
Minimizing	• Comparing the current situation to another situation regarded as more severe in order to trivialize its effects
Anger and Cynicism	• Using misplaced cynicism or anger as a coping strategy for other feelings
Feelings of Professional Inadequacy	• Second-guessing or insecurity about professional competence

Source: National Center on Safe Supportive Learning Environments[8]

Superintendents experiencing these warning signs may experience challenges across aspects of their daily lives, including their job performance. In many cases, secondary traumatic stress leads to negative beliefs about one's effectiveness, one's colleagues, and one's work. Superintendents who identify one or more of the warning signs listed in Figure 1.1 and believe these symptoms are impacting their work or personal wellbeing should increase their use of self-care strategies and consider seeking support from a counselor or psychologist.[9] The Southern Regional Children's Advocacy Center has developed a **resource guide** to support child-serving professionals in coping with secondary traumatic stress and embedding support for secondary traumatic stress into their organizations.[10]

BUILDING RESILIENCE

Psychologists refer to an individual's ability to adapt to and cope with trauma or other sources of stress as resilience. Resilience consists of behaviors and thoughts that any individual can learn to build their ability to cope with stress.[11] Leaders can develop resilience by building positive relationships with staff and maintaining an appropriate work-life balance.[12] The NCTSN recommends that individuals adopt the resilience strategies listed in Figure 1.2 to cope with secondary traumatic stress.

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[8] Chart contents adapted from: Ibid., p. 3.

[9] Ibid.

[10] "Reflect. Refuel. Reset." Southern Regional Children's Advocacy Center. https://www.srcac.org/reflect-refuel-reset/

[11] "Building Your Resilience." American Psychological Association. https://www.apa.org/topics/resilience/building-your-resilience

[12] Kafele, Op. cit.

Figure 1.2: Individual Resilience Strategies for Secondary Traumatic Stress

Use supervision to address secondary traumatic stress	Increase self-awareness of secondary traumatic stress	Maintain healthy work-life balance	Exercise and good nutrition
Practice self-care	Stay connected	Develop and implement plans to increase personal wellness and resilience	Continue individual training on risk reduction and self-care
	Use Employee Assistance Programs or counseling services as needed	Participate in a self-care accountability buddy system	

Source: National Child Traumatic Stress Network[13]

Self-care strategies are particularly important for building leaders' resilience to stress in the workplace, including secondary traumatic stress. As part of the self-assessment process, leaders should review the frequency with which they engage in self-care practices and identify one or two self-care strategies they can adopt to build resilience.[14] The most effective self-care strategies for individual leaders vary depending on personal context and needs, but the National Center on Safe Supportive Learning Environments identifies the strategies listed in Figure 1.3 as generally effective.[15]

Figure 1.3: Effective Self-Care Strategies

Build authentic personal connections with friends, mentors, and counselors or spiritual leaders
Practice sleep hygiene to ensure adequate and restful sleep
Exercise regularly
Eat a health diet, including green vegetables, lean proteins, high-fiber furits, and complex carbohydrates
Participate in creative, low-pressure hobbies

Source: National Center on Safe Supportive Learning Environments[16]

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[13] Chart contents taken verbatim from: Peterson, S. "Introduction to Secondary Traumatic Stress." Text. The National Child Traumatic Stress Network, February 1, 2018. https://www.nctsn.org/trauma-informed-care/secondary-traumatic-stress/introduction

[14] "Secondary Traumatic Stress and Self-Care Packet," Op. cit., p. 6.
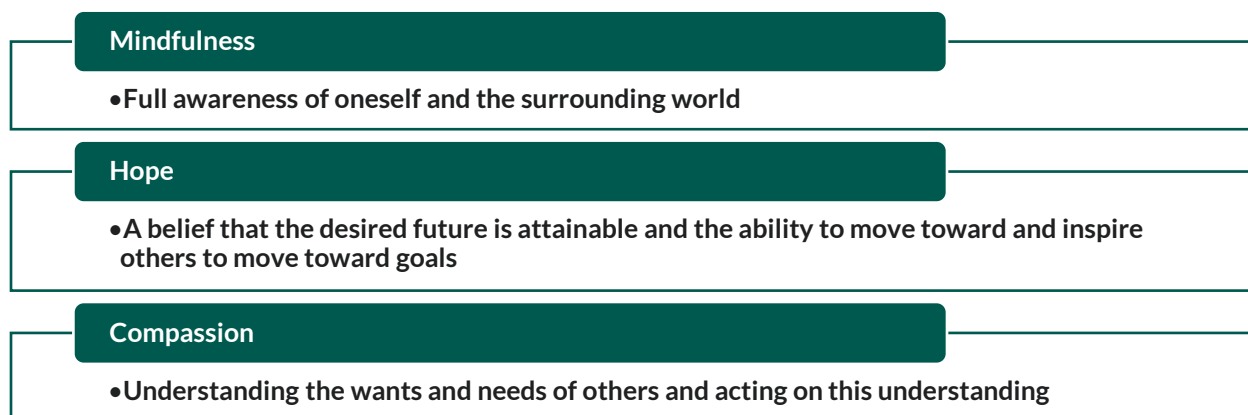
[15] "Building Student Resilience Toolkit: Self-Care Guide for All Staff." National Center on Safe Supportive Learning Environments. p. 14. https://safesupportivelearning.ed.gov/sites/default/files/BuildResilToolkit-Mod-3-508.pdf

[16] Chart contents adapted from: Ibid.

RESONANT LEADERSHIP

Research on resilience in school contexts suggests that leaders promote resilience for both themselves and their organizations by exercising resonant leadership.[17] Resonant leaders use trusting and engaged relationships with team members to build a sense of shared purpose and commitment.[18] These leaders support their own wellbeing and the wellbeing of team members, mobilizing teams for sustained achievement and building resilience for the stresses of a leadership role. Resonant leaders respond to the stresses of the leadership role through a process of renewal that includes the three elements listed in Figure 1.4.[19]

Figure 1.4: Elements of Renewal for Resonant Leaders

Mindfulness
- Full awareness of oneself and the surrounding world

Hope
- A belief that the desired future is attainable and the ability to move toward and inspire others to move toward goals

Compassion
- Understanding the wants and needs of others and acting on this understanding

Source: *Resonant Leadership: Renewing Yourself and Connecting with Others Through Mindfulness, Hope, and Compassion*[20]

Resonant leadership requires strong emotional intelligence on the part of leaders.[21] The developers of the concept of resonant leadership identify 12 emotional intelligence competencies grouped into four domains, as shown in Figure 1.5.[22] A study drawing on in-depth interviews with 26 school-level administrators in which participants were asked how they would respond to challenging scenarios finds the leadership strategies reported by school leaders align with these domains.[23] A 2022 study drawing on a survey of administrators in Montana finds emotional intelligence competencies predict the length of leaders' tenure in their position, although the effect is stronger for principals and assistant principals than for superintendents. Conflict management and maintaining a positive outlook are the individual leadership competencies with the strongest effects on time in position for superintendents.[24]

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[17] Turk, E.W. and Z.M. Wolfe. "Principal's Perceived Relationship between Emotional Intelligence, Resilience, and Resonant Leadership throughout Their Career." *International Journal of Educational Leadership Preparation*, 14:1, 2019. p. 150.

[18] Boyatzis, R.E. "The Resonant Team Leader." *Harvard Business Review*, April 13, 2012. https://hbr.org/2012/04/the-resonant-team-leader

[19] Boyatzis, R. and A. McKee. *Resonant Leadership: Renewing Yourself and Connecting with Others Through Mindfulness, Hope, and Compassion*. Harvard Business Press, 2005. Accessed via Google Books

[20] Chart contents adapted from: Ibid., p. 9.

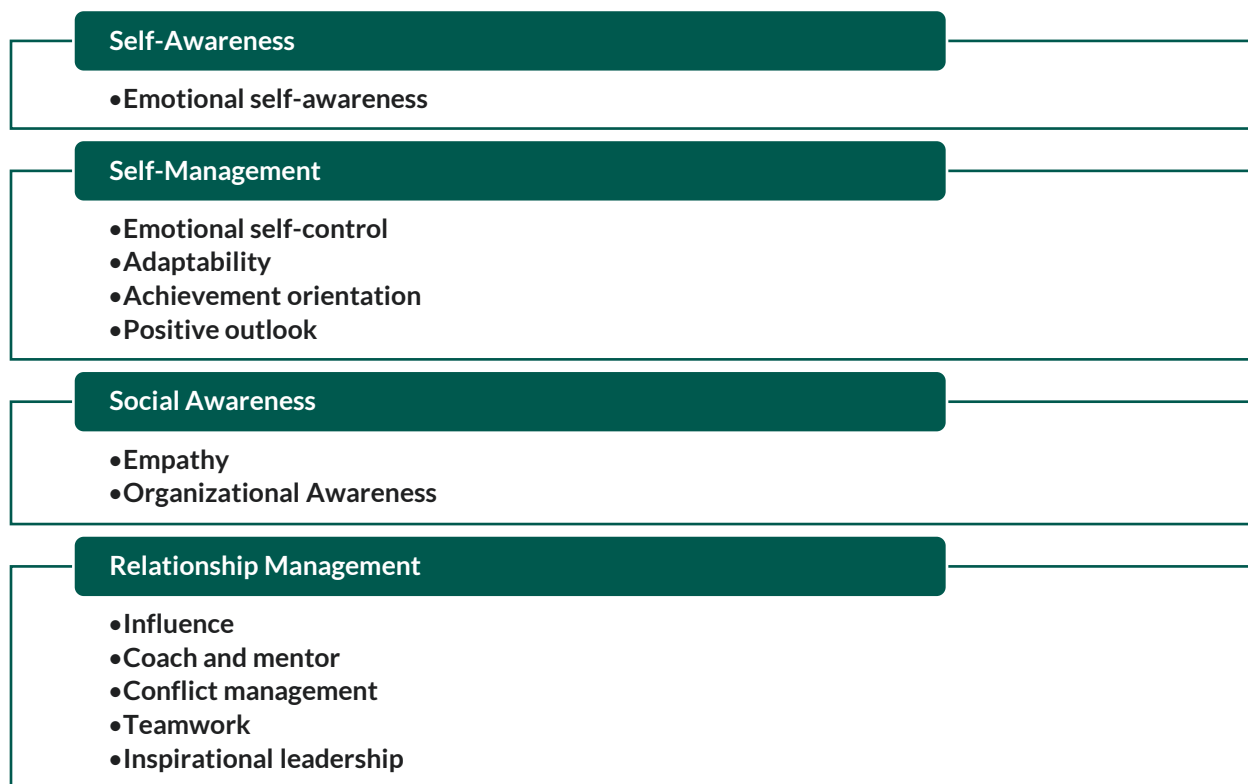[21] Turk and Wolfe, Op. cit., p. 150.

[22] Goleman, D. and R. Boyatzis. "Emotional Intelligence Has 12 Elements. Which Do You Need to Work On?" *Harvard Business Review*, February 6, 2017. https://hbr.org/2017/02/emotional-intelligence-has-12-elements-which-do-you-need-to-work-on

[23] Turk and Wolfe, Op. cit., pp. 154–156.

[24] Allen, E.L. "The Relationship between Longevity and a Leader's Emotional Intelligence and Resilience." *Journal of Education and Learning*, 11:1, 2022. p. 106.

Figure 1.5: Emotional Intelligence Domains and Competencies

Self-Awareness

- Emotional self-awareness

Self-Management

- Emotional self-control
- Adaptability
- Achievement orientation
- Positive outlook

Social Awareness

- Empathy
- Organizational Awareness

Relationship Management

- Influence
- Coach and mentor
- Conflict management
- Teamwork
- Inspirational leadership

Source: *Harvard Business Review*[25]

Strong leaders develop balanced strengths across each domain and assess their emotional intelligence to identify growth areas. Leaders can use a standardized self-assessment tool to examine their emotional intelligence or participate in a 360-degree evaluation that combines self-assessment with input from colleagues and other constituents, such as the **Emotional and Social Competency Inventory**. [26] After receiving the results of a self-assessment or 360-degree evaluation, leaders can participate in professional learning focused on developing emotional intelligence skills. [27] Professional learning for superintendents' emotional intelligence commonly addresses the focus areas listed in Figure 1.6.

Figure 1.6: Common Focus Areas for Professional Learning Related to Emotional Intelligence

Recognizing and Labeling Emotions	Understanding Emotions	Expressing Emotions	Regulating Emotions

Source: *Educational Leadership*[28]

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[25] Chart contents taken verbatim from: Goleman and Boyatzis, Op. cit.
[26] Ibid.
[27] Patti, J. et al. "Leading With Emotional Intelligence." *Educational Leadership*, June 1, 2018.
    https://www.ascd.org/el/articles/leading-with-emotional-intelligence
[28] Chart contents taken verbatim from: Ibid.

SECTION II: LEADERSHIP TO SUPPORT MENTAL HEALTH

In this section, Hanover discusses strategies school and district leaders can use to promote mental health in constituents, including district staff and students. This section begins with a review of personal leadership strategies that build an organizational culture conducive to mental health before reviewing policy supports leaders can implement to improve mental health outcomes.

PERSONAL LEADERSHIP FOR MENTAL HEALTH

Visible support from senior leadership is essential to developing an organizational culture supportive of mental health. A 2019 report on workplace mental health commissioned by the American Heart Association recommends organizational leaders signal their support for workplace mental health by visibly engaging in actions to promote mental health throughout the organization.[29] The NCTSN identifies the specific leadership competencies needed for addressing secondary traumatic stress listed in Figure 2.1.

Figure 2.1: Leadership Competencies to Address Secondary Traumatic Stress

Knowledge of the signs, symptoms, and risk factors of secondary traumatic stress and its impact on employees; Knowledge of agency support options, referral process for employee assistance, or external support resources for supervisees who are experiencing symptoms of secondary traumatic stress.
Knowledge and capacity to self-assess, monitor, and address the supervisor's personal secondary traumatic stress.
Knowledge of how to encourage employees in sharing the emotional experience of doing trauma work in a safe and supportive manner.
Skills to assist the employee in emotional re-regulation after difficult encounters; capacity to assess the effectiveness of intervention, monitor progress and make appropriate referrals, if necessary.
Knowledge of basic Psychological First Aid (PFA) or other supportive approaches to assist staff after an emergency or crisis event.
Ability to both model—and coach supervisees in—using a trauma lens to guide case conceptualization and service delivery.
Knowledge of resiliency factors and ability to structure resilience-building into individual and group supervisory activities.
Ability to distinguish between expected changes in supervisee perspectives and cognitive distortions related to indirect trauma exposure.
Ability to use appropriate self-disclosure in supervisory sessions to enhance the supervisees ability to recognize, acknowledge, and respond to the impact of indirect trauma.

Source: National Child Traumatic Stress Network[30]

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[29] "Mental Health - A Workforce Crisis." American Heart Association, March 25, 2019. p. 12. https://ceoroundtable.heart.org/wp-content/uploads/2018/12/Mental-Health-Full-Report-March-25-2019.pdf

[30] Chart contents taken verbatim from: "Using the Secondary Traumatic Stress Core Competencies in Trauma-Informed Supervision." National Child Traumatic Stress Network. p. 2. https://www.nctsn.org/sites/default/files/resources/fact-sheet/using_the_secondary_traumatic_stress_core_competencies_in_trauma-informed_supervision.pdf

Leaders at all levels of an organization are responsible for being aware of the mental health needs of their direct reports and referring employees to appropriate supports. Effective leaders establish open lines of communication and check in frequently with direct reports regarding mental health concerns and needs. If employees identify mental health needs, their managers should work with them to identify appropriate adjustments to job duties and work routines that support their mental health.[31] Senior leaders such as district superintendents should ensure all staff members with management roles receive training to support their direct reports' mental health.[32] A 2020 article published by the *Harvard Business Review* recommends that organizational leaders use the personal leadership strategies presented in Figure 2.2 to support employee mental health.

Figure 2.2: Personal Leadership Strategies to Support Employee Mental Health

Openly discuss personal stresses and challenges	Model self-care and appropriate boundaries	Regularly check in with direct reports	Proactively offer flexible work arrangements
Communicate frequently	Prioritize professional learning focused on mental health	Modify policies to reduce stress	Use surveys to measure staff stressors and needs

Source: *Harvard Business Review*[33]

POLICY SUPPORTS FOR MENTAL HEALTH

District leaders improve mental health outcomes for employees, students, and other constituents by using their leadership to prioritize mental health at the district level. In the private sector, CEOs of companies with strong employee support often lead cross-functional teams to develop and implement wellbeing strategies.[34] The American Heart Association recommends organizational leaders integrate constituent input into the development of an organizational mental health plan which includes the pillars presented in Figure 2.3. These pillars align with the Center for Disease Control and Prevention's (CDC) **Workplace Health Model**, a framework for promoting mental and physical health in the workplace which includes a systematic approach to implementation.[35]

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[31] "How to Support Staff Who Are Experiencing a Mental Health Problem." Mind. pp. 4–6. https://www.mind.org.uk/media-a/4661/resource4.pdf

[32] "Train Your Managers to Promote Health and Well-Being." American Psychological Association, June 2, 2022. https://www.apa.org/topics/workplace/mental-health/train-managers

[33] Chart contents adapted from: Greenwood, K. and N. Krol. "8 Ways Managers Can Support Employees' Mental Health." *Harvard Business Review*, August 7, 2020. https://hbr.org/2020/08/8-ways-managers-can-support-employees-mental-health

[34] Chenoweth, D. "Promoting Employee Well-Being: Wellness Strategies to Improve Health, Performance, and the Bottom Line." Society for Human Resource Management Foundation. p. 1. https://www.shrm.org/foundation/ourwork/initiatives/the-aging-workforce/Documents/Promoting%20Employee%20Well-Being.pdf

[35] "Mental Health - A Workforce Crisis," Op. cit., p. 12.

Figure 2.3: Pillars of an Organizational Mental Health Plan

PILLAR	STRATEGY
Leadership	Leaders demonstrate visible and proactive actions to build a diverse and inclusive culture that supports a mental health-friendly workplace
Organizational Policies and Environmental Supports	Develop a broad Mental Health Plan for the organization that can be fully implemented, understood, and available to all employees
Communications	Develop a plan to communicate clearly and often to employees about the organization's mental health policies, medical benefits, programs, education resources, and training opportunities
Programs and Benefits	Offer a comprehensive package of medical benefits and prevention programs that put employees at the center of care and support
Engagement	Involve employees in all aspects of workplace decision-making
Community Partnerships	Use community partnerships to promote the internal and external objectives of the Mental Health Plan
Reporting Outcomes	Collect and analyze a variety of data to identify strengths and opportunities to continually improve the mental health and well-being of employees

Source: American Heart Association[36]

District mental health policies should include strategies to encourage openness about mental health needs and specific strategies to support employees experiencing mental health problems.[37] Although a positive organizational culture can reduce stress and workforce factors that contribute to mental health challenges, the prevalence of mental health disorders in the global population indicates that some students and employees will continue to need clinical mental health services when a positive school culture is in place.[38] Districts typically provide students with access to mental health support through counseling services and connections to outside mental health professionals and provide employees with access to mental health support through their health insurance programs.[39] Districts can supplement mental health services available through employee insurance with employee assistance programs (EAPs). These programs are designed specifically to provide employees of an organization with support to address problems that may affect their job performance, including mental health and substance abuse challenges. Many health insurance providers offer EAPs, while other organizations offer EAPs as an in-house service or in-partnership with labor unions.[40]

Superintendents should ensure employee health care plans provide staff with access to mental health care and collaborate with community partners to maximize access to mental health care for students. The Substance Abuse and Mental Health Services Administration (SAMHSA) and the Center for Medicaid and CHIP Services recommend that districts establish counseling, psychological, and social services (CPSS) coordinators who serve as liaisons between the district and mental health care providers and connect students to appropriate services.[41] The CDC recommends all employers take the action steps listed in Figure 2.4 on the following page to ensure access to mental health treatments and resources.

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[36] Chart contents taken verbatim from: Ibid., pp. 11–14.
[37] "How to Support Staff Who Are Experiencing a Mental Health Problem," Op. cit., pp. 2–3.
[38] "Mental Health - A Workforce Crisis," Op. cit., p. 31.
[39] McCance-Katz, E. and C. Lynch. "Guidance to States and School Systems on Addressing Mental Health and Substance Use Issues in Schools." Substance Abuse and Mental Health Services Administration and Center for Medicaid and CHIP Services, July 1, 2019. https://store.samhsa.gov/sites/default/files/d7/priv/pep19-school-guide.pdf
[40] "Provide Support." Substance Abuse and Mental Health Services Administration Drug-Free Workplace Toolkit. https://www.samhsa.gov/workplace/toolkit/provide-support
[41] McCance-Katz and Lynch, Op. cit., p. 5.

Figure 2.4: Employer Action Steps to Ensure Access to Mental Health Resources

- Make mental health self-assessment tools available to all employees
- Offer free or subsidized clinical screenings for depression from a qualified mental health professional, followed by directed feedback and clinical referral when appropriate
- Offer health insurance with no or low out-of-pocket costs for depression medications and mental health counseling
- Provide free or subsidized lifestyle coaching, counseling, or self-management programs
- Distribute materials, such as brochures, flyers, and videos, to all employees about the signs and symptoms of poor mental health and opportunities for treatment
- Host seminars or workshops that address depression and stress management techniques, like mindfulness, breathing exercises, and meditation, to help employees reduce anxiety and stress and improve focus and motivation
- Create and maintain dedicated, quiet spaces for relaxation activities
- Provide managers with training to help them recognize the signs and symptoms of stress and depression in team members and encourage them to seek help from qualified mental health professionals
- Give employees opportunities to participate in decisions about issues that affect job stress

Source: Centers for Disease Control and Prevention[42]

Mental health supports for employees include a combination of strategies to provide access to mental health resources and strategies to ensure that employees are aware of these resources and willing to access them. A healthy organizational culture promotes health and wellbeing for individuals within the organization, so proactive strategies to improve the culture combined with access to more intensive supports for those who need them can improve mental and physical health outcomes.[43] The consulting firm McKinsey and Company recommends employers adopt the strategies presented in Figure 2.5 to promote staff mental health.

Figure 2.5: Employer Strategies to Promote Mental Health

Prioritize mental wellness by dedicating resources and leadership to employee supports

Provide employees with individualized supports to access mental health care

Use multiple channels to communicate about available mental health supports

Create an inclusive work culture, with a specific focus on destigmatizing mental health needs

Measure outcomes related to mental health, such as employee retention, missed work days, and survey responses, and hold leadership accountable for progress toward goals

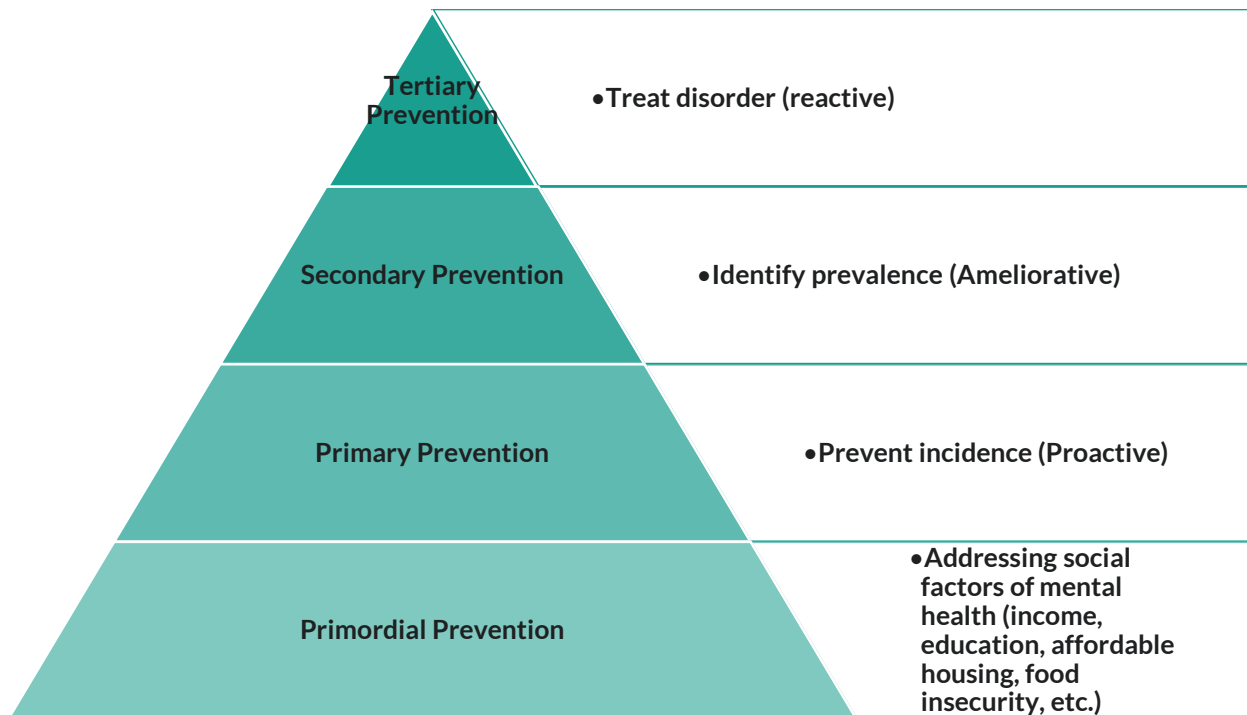Source: McKinsey and Company[44]

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[42] Chart contents taken verbatim from: "Mental Health in the Workplace." Centers for Disease Control and Prevention, May 5, 2021. p. 3. https://www.cdc.gov/workplacehealthpromotion/tools-resources/workplace-health/mental-health/index.html

[43] Chenoweth, Op. cit., p. 13.

[44] Chart contents adapted from: "National Surveys Reveal Disconnect Between Employees and Employers Around Mental Health Need." McKinsey and Company, April 21, 2021. https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/national-surveys-reveal-disconnect-between-employees-and-employers-around-mental-health-need

Strategies to address mental health need to be school-wide to prevent isolation and avoid placing the burden of resilience on individual teachers.[45] The CDC's **Whole School, Whole Community, Whole Child (WSCC)** approach to school health includes schoolwide support for staff mental and physical health. [46] A comprehensive school mental health system combines universal prevention efforts and training to identify early warning signs of mental health challenges with targeted interventions for students and adults who need more intensive support. Guidance for schools and districts on supporting student mental health published jointly by the SAMHSA and the Center for Medicaid and CHIP Services recommends districts implement a multi-tiered system of support (MTSS) for student mental health services similar to the response to intervention (RTI) model for academic supports and the positive behavioral interventions and supports (PBIS).[47] The American Heart Association endorses a similar tiered continuum of prevention for workplace mental health, outlined in Figure 2.6.

Figure 2.6: Tiered Continuum of Mental Health Prevention

Tertiary Prevention
- Treat disorder (reactive)

Secondary Prevention
- Identify prevalence (Ameliorative)

Primary Prevention
- Prevent incidence (Proactive)

Primordial Prevention
- Addressing social factors of mental health (income, education, affordable housing, food insecurity, etc.)

Source: American Heart Association[48]

Universal supports for mental health include professional learning for all staff and training for students focused on recognizing mental health needs in students and colleagues and referring individuals experiencing mental health challenges to the appropriate supports. Staff members need to be able to support both colleagues and students in accessing mental health supports. Because students, particularly in the secondary grades, may be reluctant to access mental health supports due to concerns about stigma and privacy, teachers need to proactively encourage students to seek help and integrate supports into their

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[45] Walker, T. "'I Didn't Know It Had a Name': Secondary Traumatic Stress and Educators." National Education Association. https://www.nea.org/advocating-for-change/new-from-nea/i-didnt-know-it-had-name-secondary-traumatic-stress-and

[46] "Components of the Whole School, Whole Community, Whole Child (WSCC)." Centers for Disease Control and Prevention, March 23, 2021. https://www.cdc.gov/healthyschools/wscc/components.htm

[47] McCance-Katz and Lynch, Op. cit., p. 3.

[48] Chart taken verbatim from: "Mental Health - A Workforce Crisis," Op. cit., p. 36.

classroom management.[49] SAMHSA and the Center for Medicaid and CHIP Services recommend that districts use the **Mental Health First Aid** model and related Youth Mental Health First Aid Model for training staff and students to support peers with mental health challenges.[50] A 2020 study drawing on surveys of 893 professionals in youth-serving occupations who received Mental Health First Aid training finds that respondents provided strong overall ratings of the program's effectiveness.[51] Another study published in 2018 uses a survey that measures respondents' intent to engage in specific behaviors and finds a strong positive effect of Mental Health First Aid training on participants' intention to take action to help others address mental health problems.[52]

Effective school mental health policies embrace a trauma-sensitive approach that addresses psychological traumas experienced by students and staff members to ensure all students and staff members feel safe at school. Research finds supportive relationships with adults are among the strongest protective factors for children and adolescents exposed to trauma.[53] A trauma-sensitive organization addresses potential trauma experienced by both students and adults, including secondary traumatic stress. Figure 2.7 presents essential elements for trauma-informed systems in youth-serving organizations identified by the NCTSN. The National Council for Mental Wellbeing and the National Center for School Safety have developed a **Trauma-Informed, Resilience-Oriented Schools Toolkit** schools and districts can use to implement trauma-informed practices.[54]

Figure 2.7: Essential Elements for Trauma-Informed Systems in Youth-Serving Organizations

- Recognize the impact of secondary trauma on the workforce
- Recognize that exposure to trauma is a risk of the job of serving traumatized children and families
- Understand that trauma can shape the culture of organizations in the same way that trauma shapes the world view of individuals
- Understand that a traumatized organization is less likely to effectively identify its clients' past trauma or mitigate or prevent future trauma
- Develop the capacity to translate trauma-related knowledge into meaningful action, policy, and improvements in practices
- Be integrated into direct services, programs, policies, and procedures, staff development and training, and other activities directed at secondary traumatic stress

Source: National Child Traumatic Stress Network[55]

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[49] Taylor, S. "Mental Health Issues: Strategies for Principals." *Principal Leadership*, November 1, 2017. https://www.nassp.org/publication/principal-leadership/volume-18-2017-2018/principal-leadership-november-2017/mental-health-issues-strategies-for-principals/

[50] McCance-Katz and Lynch, Op. cit., p. 5.

[51] Childs, K.K., K. Gryglewicz, and R. Elligson. "An Assessment of the Utility of the Youth Mental Health First Aid Training: Effectiveness, Satisfaction, and Universality." *Community Mental Health Journal*, 56:8, November 1, 2020.

[52] Banh, M.K. et al. "Evaluation of Mental Health First Aid USA Using the Mental Health Beliefs and Literacy Scale." *American Journal of Health Promotion*, 33:2, February 1, 2019. p. 241.

[53] "Student and Staff Well-Being." Ohio Department of Education. https://education.ohio.gov/Topics/Student-Supports/Creating-Caring-Communities/Student-and-Staff-Well-Being

[54] "Trauma-Informed, Resilience-Oriented Schools Toolkit." National Center for School Safety. https://www.nc2s.org/resource/trauma-informed-resilience-oriented-schools-toolkit/

[55] Chart contents taken verbatim from: Peterson, "Introduction to Secondary Traumatic Stress," Op. cit.

SOCIAL AND EMOTIONAL LEARNING AND SCHOOL CLIMATE

Schoolwide strategies that include social-emotional learning (SEL) for both students and adults improve mental health outcomes by supporting teachers in building positive relationships with students and by reducing student behavioral challenges that contribute to teacher stress.[56] A schoolwide SEL program includes the essential elements listed in Figure 2.8. District leaders should ensure all teachers have opportunities to participate in professional development focused on supporting their own SEL skills and enabling them to provide effective SEL supports to students.[57]

Figure 2.8: Essential Elements of Schoolwide SEL

Explicit SEL instruction	SEL integrated with academic instruction	Youth voice and engagement	Supportive school and classroom climates	Focus on adult SEL
Supportive discipline	A continuum of integrated supports	Authentic family partnerships	Aligned community partnerships	Systems for continuous improvement

Source: Collaborative for Academic, Social, and Emotional Learning[58]

A comprehensive schoolwide SEL program includes policy and leadership supports that promote a supportive and trusting climate for staff that builds collective efficacy. Schools can use staff surveys to measure the existing degree of trust, community, and collective efficacy among staff. If surveys suggest existing policies are not sufficiently supporting trust, community, and collective efficacy, the Collaborative for Academic, Social, and Emotional Learning (CASEL) recommends schools and districts use the process outlined in Figure 2.9 to implement a targeted strategy to build community among adults in schools before launching SEL programs for students.[59] This strategy should include dedicated time for staff members to connect with one another and professional development focused on supporting connection.[60] CASEL maintains a **District Resource Center** with additional resources to support the district-level implementation of SEL.[61]

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[56] Jones, S. and T. Tinubu Ali. "Teacher Stress and Burnout." Southern Education Foundation, July 2021. p. 7. https://southerneducation.org/publications/teacher-stress-and-burnout/

[57] Ferren, M. "Social and Emotional Supports for Educators During and After the Pandemic." Center for American Progress, July 20, 2021. https://www.americanprogress.org/article/social-emotional-supports-educators-pandemic/

[58] Chart contents taken verbatim from: "The CASEL Guide to Schoolwide SEL Essentials." Collaborative for Academic, Social, and Emotional Learning. p. 2. https://schoolguide.casel.org/resource/the-casel-guide-to-schoolwide-sel-essentials/
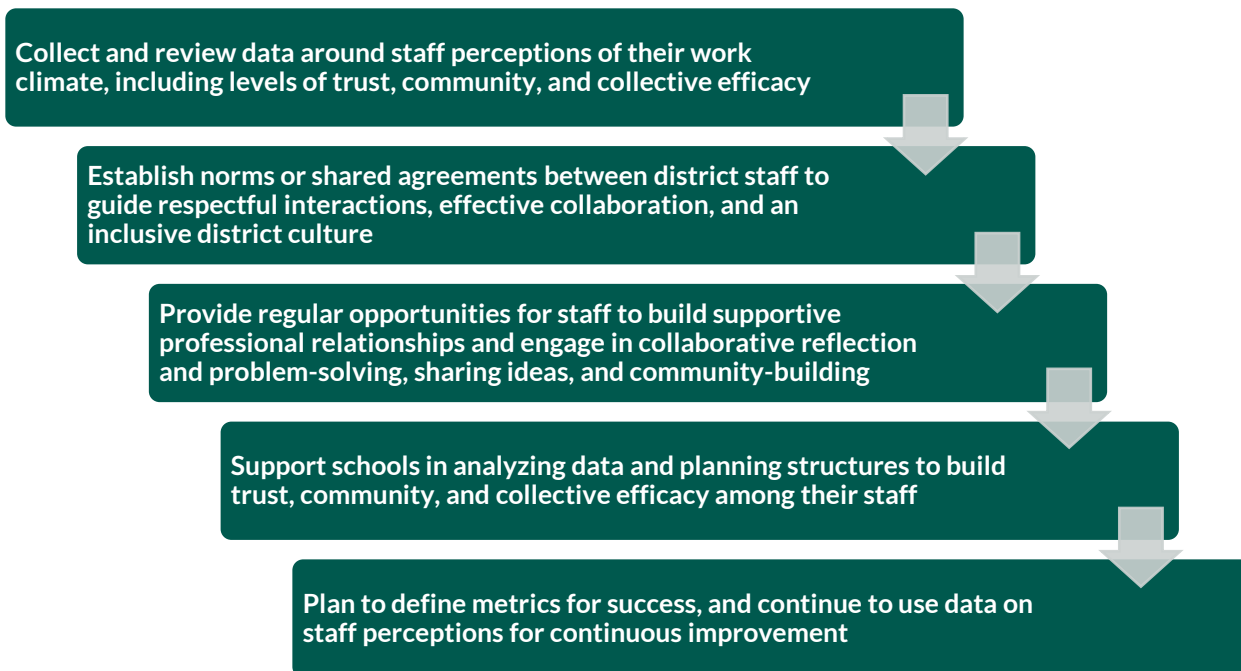
[59] "District Resource Guide: Promote Staff Trust, Community, and Efficacy." Collaborative for Academic, Social, and Emotional Learning. https://drc.casel.org/strengthen-adult-sel-competencies-and-capacity/promote-staff-trust-community-and-efficacy/

[60] Stafford-Brizard, B. "Supporting Teacher Well-Being in a Time of Crisis." *Educational Leadership*. https://www.ascd.org/el/articles/supporting-teacher-well-being-in-a-time-of-crisis

[61] "District Resource Center." Collaborative for Academic, Social, and Emotional Learning. https://drc.casel.org/

Figure 2.9: Suggested Process for Developing Staff Trust, Community, and Collective Efficacy

Collect and review data around staff perceptions of their work climate, including levels of trust, community, and collective efficacy

Establish norms or shared agreements between district staff to guide respectful interactions, effective collaboration, and an inclusive district culture

Provide regular opportunities for staff to build supportive professional relationships and engage in collaborative reflection and problem-solving, sharing ideas, and community-building

Support schools in analyzing data and planning structures to build trust, community, and collective efficacy among their staff

Plan to define metrics for success, and continue to use data on staff perceptions for continuous improvement

Source: Collaborative for Academic, Social, and Emotional Learning[62]

SEL is most effective when schools combine direct SEL supports with strategies to create a positive school climate.[63] A substantial body of research finds that a positive school climate improves student mental health outcomes. For example, a study drawing on surveys of 2,768 Grade 7 students in Texas finds students' self-reported perception of their school's awareness of and the importance of reporting aggressive conduct is correlated with lower levels of mental health symptoms.[64]

Research also finds school climate promotes resilience for students facing an elevated risk of poor mental health outcomes. A 2015 study using student surveys to examine the role of school climate in building resilience for military-connected students finds school connectedness, meaningful participation, and feeling safe at school significantly reduce self-reported depressive symptoms and suicidal ideation.[65] Similarly, a 2020 review of the literature examining mental health outcomes for lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ) students finds these students are significantly less likely to report suicidal ideation and depressive students in schools with positive climates than in schools with negative climates.[66] A 2017 study drawing on surveys of students participating in mental health awareness programs finds students exhibit higher levels of mental health literacy and lower levels of stigma around mental health in schools with positive climates, suggesting that a positive climate can enhance the effectiveness of other universal

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[62] Chart contents taken verbatim from: "District Resource Guide: Promote Staff Trust, Community, and Efficacy Process." Collaborative for Academic, Social, and Emotional Learning. https://drc.casel.org/blog/resource/how-do-principals-influence-student-achievement/

[63] "School Climate and Social and Emotional Learning The Integration of Two Approaches." The Pennsylvania State University and the Robert Wood Johnson Foundation, January 2018. p. 4. https://www.prevention.psu.edu/uploads/files/rwjf443059-SchoolClimate.pdf

[64] Franco, K. et al. "The Link between School Climate and Mental Health among an Ethnically Diverse Sample of Middle School Youth." *Current Psychology*, March 30, 2022.

[65] De Pedro, K.T. et al. "School Climate, Deployment, and Mental Health Among Students in Military-Connected Schools." *Youth & Society*, 50:1, January 1, 2018. p. 107.

[66] Ancheta, A.J., J.-M. Bruzzese, and T.L. Hughes. "The Impact of Positive School Climate on Suicidality and Mental Health Among LGBTQ Adolescents: A Systematic Review." *The Journal of School Nursing*, 37:2, April 1, 2021.

supports. [67] A positive school climate develops supportive, respectful, and trusting relationships among students and staff through the components listed in Figure 2.10.

Figure 2.10: Components of a Positive School Climate

COMPONENT	DESCRIPTION
Engagement	When students experience engagement and feel a sense of belonging and connection with adults and peers at school, they can build social capital and more readily use adults as social models, accept feedback, and navigate and persevere through challenges.
Safety	When students and staff feel safe, they are more willing to focus on learning from and with others and take academic risks.
Cultural Competence	Cultural competence is a set of behaviors, attitudes, and policies that enables schools, agencies, and teachers to work more effectively in bicultural and multicultural settings and interactions. Cultural competence can help adults be aware of privilege, implicit bias, and micro-aggressions. Culturally competent schools help educators engage students and families by creating conditions where students and families feel a sense of belonging, support, respect, and safety.
Cultural Responsiveness	Culturally competent teachers can use their knowledge of students to be more instructionally responsive. Culturally responsive instructional approaches are engaging, and participatory, and use diverse instructional models to scaffold learning by using students' own cultural knowledge to teach new concepts, connect experiences inside and outside the classroom, and master new information. Such approaches can address the social and emotional and learning needs of culturally and linguistically diverse students by creating learning environments where students feel emotionally and intellectually safe, supported, and challenged.
Challenge and High Expectations	Students are more personally motivated to succeed, more actively engaged in learning, and work better with others when they, their peers, and adults have high expectations for achievement that are experienced as relevant to them; when they are surrounded by peers who have academic aspirations; and when curricula, pedagogy, and opportunities to learn are rigorous, engaging and aligned with their goals.

Source: Pennsylvania State University[68]

In addition to integrating school climate into SEL supports for students, districts can use school climate to improve mental health outcomes for school staff. A report on mental health for educators prepared by researchers at Pennsylvania State University for the Robert Wood Johnson Foundation, a nonprofit organization focused on health care, identifies the major sources of teacher stress listed in Figure 2.11. Schools can address these sources of stress and improve mental health outcomes for teachers by creating supportive cultures that provide teachers with autonomy and needed resources, support positive interactions with students and families, and develop teachers' social and emotional skills.[69]

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[67] Townsend, L. et al. "The Association of School Climate, Depression Literacy, and Mental Health Stigma Among High School Students." *Journal of School Health*, 87:8, August 1, 2017. p. 2.

[68] Chart contents taken verbatim from: "School Climate and Social and Emotional Learning The Integration of Two Approaches," Op. cit., pp. 5–6.

[69] "Teacher Stress and Health: Effects on Teachers, Students, and Schools." Pennsylvania State University, September 2016. pp. 3–4. https://www.prevention.psu.edu/uploads/files/rwjf430428-TeacherStress.pdf

Figure 2.11: Major Sources of Stress for Educators

School Organizations	**that lack strong principal leadership, a healthy school climate and a collegial, supportive environment**
Job Demands	**that are escalating with high-stakes testing, student behavioral problems, and difficult parents**
Work Resources	**that limit a teacher's sense of autonomy and decision-making power**
Teacher Social and Emotional Competence	**to manage stress and nuture a healthy classroom**

Source: Pennsylvania State University[70]

DATA COLLECTION AND CONTINUOUS IMPROVEMENT

Developing and implementing a mental health plan requires the ongoing collection of data to inform the design of mental health supports and continuous improvement of mental health initiatives. The CDC's Workplace Health Model begins the implementation process with a needs assessment that collects data on workplace health to inform the design of mental health supports and continues to collect data on the impact of mental health programs to evaluate program outcomes and facilitate continuous improvement.[71]

Data sources to support needs assessment include a combination of formal and informal data on employee needs, such as health surveys and informal conversations with employees.[72] Leaders can use existing data sources such as staff surveys and human resources data to assess mental health stressors and needs.[73] If survey data are not already available, superintendents can incorporate items about mental health needs into school climate surveys or administer a standardized needs assessment survey.[74] Guidance for school and district mental health programs published jointly by SAMHSA and the Center for Medicaid and CHIP Services recommends districts use the **School Health Assessment and Performance Evaluation System** (SHAPE), a free online self-assessment system maintained by the National Center for School Mental Health at the University of Maryland to assess their current implementation of mental health supports.[75]

Figure 2.12 on the following page presents the American Heart Association's recommended action steps for monitoring and reporting the outcomes of mental health plans. To assess the impacts of a mental health plan, leaders collect data on outcomes related to mental health, such as survey data on mental health indicators and school climate and workforce indicators such as absenteeism.[76]

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[70] Chart contents taken verbatim from: Ibid., p. 2.

[71] "Workplace Health Model." Centers for Disease Control and Prevention, May 12, 2021. https://www.cdc.gov/workplacehealthpromotion/model/index.html

[72] Ibid.

[73] "Resource 2: How to Take Stock of Mental Health in Your Workplace." Mind. p. 3. https://www.mind.org.uk/media-a/4664/resource_2_take_stock_of_mh_in_your_workplace_final.pdf

[74] "School Mental Health Quality Guide: Needs Assessment and Resource Mapping." National Center for School Mental Health, 2020. p. 6. https://www.schoolmentalhealth.org/media/SOM/Microsites/NCSMH/Documents/Quality-Guides/Needs-Assessment-&-Resource-Mapping-2.3.20.pdf

[75] McCance-Katz and Lynch, Op. cit., p. 4.

[76] "Mental Health - A Workforce Crisis," Op. cit., p. 16.

Figure 2.12: Action Steps to Monitor and Report Outcomes for Mental Health Plans

- Establish objectives and targets for improving employee mental health based on available data.
- Create a comprehensive evaluation plan prior to implementation of the Mental Health Plan.
- Evaluate the mental health, functional performance, and productivity impact of the plan.
- Determine the cost-benefit and/or cost-effectiveness of the Plan.
- Monitor changes in employee engagement using all available metrics.
- Use all available outcomes data to review and evaluate overall Plan performance. Adjust and improve based on data insights.

Source: American Heart Association[77]

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[77] Chart contents taken verbatim from: Ibid., p. 14.

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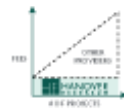200+ analysts with multiple methodology research expertise

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