

Chapter 8

Individual Factors: Mental Health

Abstract Schools are increasingly becoming aware of the importance of mental health promotion and the early identification of mental illness. The literature clearly indicates that good mental health has a positive outcome on school belonging as well as academic outcomes. In this chapter, we investigate both positive and negative personal characteristics—emotional instability and positive personal characteristics such as self-esteem, character strengths, mindset, social and emotional competence, and positive emotionality. We consider strategies for minimising emotional instability and promoting positive personal characteristics, as important pathways for fostering a sense of school belonging.

Keywords Mental health • Prevention • Self-esteem • Character strengths • Mindset • Social and emotional learning • Positive emotionality • Belonging • School belonging • Mental illness

The last chapter identified strategies that can be used to support school belonging through building academic motivation. Academic motivation, performance and belonging are also impacted by and impact upon mental health. Here, we consider individual factors that impede school belonging (emotional instability), and individual factors that support school belonging (positive personal characteristics). Table 8.1 summarises markers of emotional instability (we reversed these in our review for consistency) that significantly related to (less) school belonging and positive personal characteristics that promote school belonging. These factors are markers of and impact upon one's mental health.

The impact of mental health on other areas of life—academic, physical, social, emotional, cognitive, etc—is clearly documented throughout the research literature. Good mental health supports learning, belonging and overall functioning. Poor mental health increases the risk of learning difficulties, disconnectedness from school and numerous other problems. In what can become a vicious negative spiral, these, in turn, increase the risk for additional mental health problems. School belonging and emotional stability often go hand in hand—on the positive side, each

Table 8.1 Indicators of emotional (in)stability and positive personal characteristics that significantly predicted school belonging

Predictor	Effect size	Related studies
<i>Indicators of emotional instability</i>		
Depressive symptoms	-0.64 to -0.65	Kaminski et al. (2010), Kelly et al. (2012), Kumperminc et al. (2001), Shochet et al. (2006, 2011)
Emotional distress/problem	-0.32 to -0.42	Waters et al. (2010), Wentzel (1998), Wilkinson-Lee et al. (2011)
Stress	-0.34	Roche and Kuperminc (2012)
Fear of failure	-0.50	Caraway et al. (2003)
Psychoticism	-0.51	Heaven et al. (2002)
<i>Indicators of positive personal characteristics</i>		
Self-esteem	0.32 to 0.37	Ryan et al. (1994), Sirin and Rogers-Sirin (2004)
Prosocial goal pursuit and behaviour	0.38 to 0.72	Wentzel (1998), Zimmer-Gembeck et al. (2006)
Hope/Optimism, Positive affect	0.46 to 0.50 0.48 to 0.52	Ryzin et al. (2009), Stoddard et al. (2011), Heaven et al. (2003), Reschly et al. (2008)

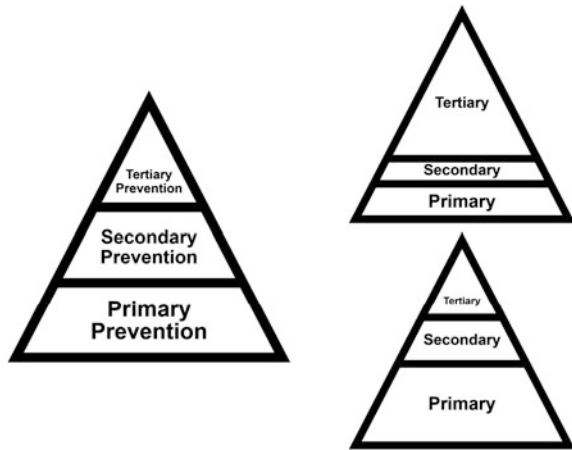
Note $r = 0.10$ is considered a small effect; $r = 0.30$ is considered a medium effect; and $r = 0.50$ is considered a strong effect

supporting the other, and on the negative side, putting students at risk for poor mental health and a lack of belonging.

Some students are more vulnerable to mental health problems than others, based on inherent genetic, temperament and personality differences, but all young people are at risk. Mental illness affects young people from every socioeconomic, cultural and demographic background. By the time students reach secondary school, a good portion already reports signs of depression, anxiety and more severe psychopathologies, or display externalising behaviours including bullying, aggression, fighting and criminal behaviours. As high stakes testing has increased pressure for high performance on standardised tests, stress is repeatedly voiced as a primary concern for young people.

The traditional approach to mental health involves having school psychologists on site or referring students out for care, dealing with problems as they arise. But this is a resource intensive approach, and students are often already demonstrating high levels of emotional distress by the time they are referred for treatment. Psychologists may be shared across several schools, adding additional strain for all involved. In high-risk schools, teachers may feel like they spend more time being boxing referees than educators. A preventative model is needed, which proactively supports mental health and inhibits mental disorder from occurring in the first place.

Fig. 8.1 From a prevention framework, three levels at which intervention can occur (*left*). Many schools primarily use tertiary approaches (*top right*), treating cases of mental illness as they occur. Ideally, by focusing more attention on primary and secondary approaches (*bottom right*), fewer students will need to utilise the resource intensive tertiary treatments



8.1 Approaches to Prevention

As illustrated in Fig. 8.1 (left), from a prevention framework, mental health interventions might be approached at three different levels, which are increasingly resource intensive. Primary prevention targets an entire group, aiming to prevent illness from ever occurring. Secondary prevention targets a specific group that might be at particular high risk, or those who show early signs of illness, aiming to minimise the impact. Tertiary prevention treats illness that has already appeared. Many schools primarily use tertiary approaches (Fig. 8.1, top right). Ideally, a greater focus on primary and secondary prevention will result in fewer students needing the resource intensive tertiary treatments (Fig. 8.1, bottom right).

We first consider what these levels look like within the school context, and then identify how different preventative approaches might promote emotional stability and a sense of belonging at the school.

8.1.1 Primary Prevention

Primary prevention refers to activities that promote mental health and prevent illness before it occurs. Primary prevention proactively builds capacity, skills and resources. For example, a school might timetable lessons on how to deal with stress and exams, train students to view stressors as challenges rather than as insurmountable problems and help them to identify specific resources and pathways for dealing with stressors that may occur in the years to come, including academic and social pressures.

A growing number of programs, interventions and strategies have been developed to promote mental health. Such programs teach skills related to self-care,

resiliency, social connectedness, managing stress, resolving conflict and emotion regulation, among other topics. These programs often provide activities to recognise one's thoughts, feelings and behaviours. They attempt to build positive characteristics, which we focus on below. They teach students to recognise their internal strengths, which can be applied in different situations. They also emphasise the benefit of accessing local resources, including seeking help from peers and adults as needed, when facing physical, psychological and social challenges. Appendix C provides a list of resources for some of these programs.

Students often are wary of seeking help. They are trying to form their identity and want to be respected by peers and teachers. Culturally, there can be negative stigmas associated with mental health, such that seeking help is perceived as being weak, which undermines young people from getting the support that they need. Over time, this can cascade into full mental illness. As a primary prevention approach, schools can create a climate that supports and encourages help seeking. Students could be encouraged to know what to do if a friend needs help, including how to access key staff members (e.g., school counsellor, psychologist, chaplain), and how to support themselves in the process.

8.1.2 Secondary Prevention

Secondary prevention involves a more intensive focus on those at particular high risk or those who show early signs of mental disorder. It aims to reduce the impact of disease, before it becomes a full mental illness. For example, students with a high level of test anxiety might be invited to a special weekly study group that provides peer support, an academic tutor and a mentor to help deal with the stress. Students can gain additional skills in managing test anxiety within a supportive environment.

A key feature of secondary prevention is the early recognition of risk factors. A general mental health audit across the school, which includes the personality trait of neuroticism (which is a proneness toward emotional instability), can be used to identify students who show signs of distress. Students can then be provided with additional resources to support them.

A school might develop a specific plan for student referrals to study groups, a tutor or a youth mentorship program. Staff might be educated about how to recognise early signs of mental difficulty, and be provided with specific referral and response pathways for students at risk. Staff could be encouraged to proactively reach out to students who are exhibiting signs of stress or distress, following the plan provided. Teachers often feel ill-equipped for the mental health problems appearing in their classrooms, so having specific pathways will help students get appropriate levels of care, and will better support the mental health of the teachers themselves. Key staff members can also be trained in postvention, or interventions that restore well-being of students and staff after a critical incident occurs.

8.1.3 Tertiary Prevention

Tertiary prevention involves treating mental illness and aims to lessen the impact of illness. This is the traditional approach in schools and remains an important part of mental health promotion. Regardless of prevention efforts, many students have severe needs. Cognitive, behavioural and when necessary pharmaceutical interventions may be needed.

Stabilising acute symptoms is a necessary first step, and this is where pharmaceuticals can be useful. But a long-term view should be taken. Treatment should help the young person identify the underlying causes of dysfunction, including personal aspects of the student and their home and school environment. Schools can play a role in helping clinicians support strategies that help young people to manage their mental illness and lessen its effect on day-to-day activities.

Tertiary prevention efforts also support students who enter school with an existing mental illness diagnoses. Such students might be provided with a personalised plan for managing the disorder that includes a contingency plan of where and how to get help if symptoms worsen. In some instances, when consent is provided, such plans may be shared with classroom teachers and other key staff to better support the student and ensure the plan is working and adhered to. Such plans should be regularly updated, appointing a specific individual in the school (e.g., a school psychologist) to ensure that this occurs.

Tertiary prevention is the most time and resource intensive approach to supporting student mental health, yet remains a necessary part of supporting student mental health. Notably, by increasing primary and secondary prevention efforts, in the long term, fewer students will need the intensive tertiary approaches. However, schools should also recognise that initial efforts to promote mental health may result in a greater need for tertiary intervention in the short term.

8.2 A Focus on Primary Prevention: Building Positive Personal Characteristics

From a primary prevention perspective, it is imperative to build capacities and skills that support good mental health. A growing amount of research in the field of positive psychology has identified several positive characteristics that support mental health. Whereas emotional instability places students at risk for disconnection from school and various other problems, considerable research now shows the benefit of positive personal characteristics, including a healthy self-esteem, character strengths, optimism, a growth mindset, prosocial behaviour and a positive disposition overall. A full review is beyond our scope (see Allen, Vella-Brodrick, & Walters, 2017 for a full review), but we provide some places to start here.

8.2.1 *Self-esteem*

Adolescence is a period in time that is characterised by the developmental task of identity formation—figuring out where they belong and how they fit in with peers and others. Self-esteem is shaped by how a young person feels about themselves and their abilities, often in comparison with their peers.

A distinction must be made here between high self-esteem and healthy self-esteem. In the 1980s, self-esteem was a focal point of American education. The thought was that if students felt good about themselves, it would translate into good academic performance. Students were rewarded for everything ranging from high performance to simply participating. Unfortunately, this did not result in high achieving students—if anything, it undermined academic performance, and resulted in a good portion of young people with unrealistic views of themselves.

People with healthy self-esteem know themselves. They are able to quickly identify their personal strengths and weaknesses, and live authentically. They are also proud of their achievements and abilities and have a healthy sense of self-worth. Those with low self-esteem often compare themselves to others and view themselves as inferior in comparison. It is also possible to have an overinflated self-esteem, which is often manifested by perceiving others as inferior. Striving to understand one's own unique set of strengths becomes a basis not only for a better sense of self but also an impetus for continued growth.

One challenge in establishing and maintaining a healthy sense of self is a strong culture of comparison. As young people develop their identities, they are particularly vulnerable to social comparison. The media perpetuates unrealistic and unobtainable standards through images that are frequently photo shopped or orchestrated in a way that promotes an unrealistic ideal. Young people can be bombarded with “perfect” images that may represent a particular look that even the person being photographed cannot attain in real life. Perfection becomes the gold standard, and students are constantly reminded through different media outlets (e.g., advertising, marketing, social media, magazines) that they are not thin enough, tanned enough, strong enough, smart enough, etc.

What can schools and teachers do to foster a healthy sense of self? First, ensure that students understand that they have a role to play in fostering their own achievements and their connection with the school. Emphasise the importance of effort and hard work, rather than natural talent, because these are factors that students have control over and can change.

Second, incorporate activities that help students get to know themselves—their strengths, talents, abilities and potential. Encourage students to live authentically—and create a school environment that supports authenticity and vulnerability. Teachers are role models with this. Be willing to admit mistakes and imperfections.

Finally, develop a strengths-based culture. We will look at this more closely in the next section. Too often, students are quick to see the weaknesses in themselves and others. This creates a critical culture. Teach students to look for their own strengths and those of other students.

Table 8.2 The VIA character strengths with their corresponding virtue. See www.viacharacter.org for a free survey, descriptions of each strength and activities to put the strengths to use

Virtue	Strength
Wisdom & knowledge	Creativity/originality Curiosity/openness to experience Judgment/critical thinking Love of learning Perspective/wisdom
Courage	Bravery/valour Perseverance/industriousness Honesty/integrity Zest/enthusiasm
Humanity	Love Kindness/generosity Social intelligence
Justice	Teamwork/citizenship Fairness Leadership
Temperance	Forgiveness Humility Prudence Self-regulation/self-control
Transcendence	Appreciation of beauty & excellence Gratitude Hope/optimism Humour/playfulness Spirituality/purpose

8.2.2 Character Strengths

Young people are often bombarded with messages around ways they do not measure up. Positive psychology focuses on identifying and supporting character strengths—things that a young person is good at doing—and considering how a person can use their strengths to help themselves and others. There are different models of strengths, but one of the most dominant ones is the Values in Action (VIA), which was developed by Professor Chris Peterson and Professor Martin Seligman in the US. They identified 24 different strengths that are valued across most cultures, which are grouped into six higher virtues. Table 8.2 summarises the strengths and the value they are a part of (see www.viacharacter.org for more information).

The VIA model argues that everyone has all of these strengths to some degree, but each person tends to have a different profile of their strengths. For instance, one person might be high in fairness, perspective, and prudence, whereas another person might be particularly strong on creativity and appreciation of beauty. Numerous studies have linked character strengths to a variety of positive outcomes (cf. Niemic, 2015), including greater well-being, achievement, academic performance and better social functioning.

The VIA character strengths can be freely assessed online (www.viacharacter.org), which allows students to discover their strengths and learn about ways to apply their strengths. The VIA provides a foundation for those working with young people to develop prosocial goals around how their strengths can be utilised. For example, students might be encouraged to put their strengths in practice, or to identify strengths in others. Strengths-based language can also be included in class and extracurricular activities. Students might draw on their strengths to do an activity that they do not particularly enjoy, practice kindness to others to foster stronger connections, or be challenged to work on their lesser strengths (e.g., practicing self-control to complete an assignment, rather than going to the shopping centre with friends). The VIA site offers some great ideas around using and building strengths.

8.2.3 Mindset

In Chap. 7, we talked about perceptions that a student or teacher has about their perceived ability. These perceptions reflect one's mindset. Professor Carol Dweck from Stanford University talks about two types of mindsets: a fixed mindset, where intelligence and other characteristics are innate and fixed and a growth mindset, where intelligence and other characteristics are changeable and can be developed through effort.

A good deal of research points to the impact that mindset has on psychological functioning and academic performance (Dweck, 2006). One's mindset impacts one's aspirations, goals chosen and how much effort is applied. With a fixed mindset, intelligence is something you either have or do not have. As we have seen, students either worry about proving their ability, or give up trying, saying things like, "it's too hard". A growth mindset, in contrast, encourages greater effort and a focus on learning for the sake of learning, rather than to achieve a particular outcome.

Mindset is malleable, influenced by expectations by teachers and others, feedback, the praise and language itself. For example, students often complain that they "can't do it". Such a statement shuts down the possibility of even giving it a go. Adding the simple word "yet" (i.e. can't yet) opens up the possibility to try. Studies suggest that it is helpful to encourage students to view errors and mistakes as learning opportunities, rather than as an attack on their personal self-worth.

8.2.4 Social and Emotional Competence

Considerable research shows the importance of social and emotional skills for success in school and for the rest of life (e.g., Durlak et al., 2011). Social and emotional learning (SEL) interventions aim to build competencies in students that

improve social and emotional skills. Greater social and emotional skills, in turn, relate to a greater sense of school belonging (Allen et al., 2017; Sirin & Rogers Sirin, 2004). SEL programs teach students a variety of non-cognitive skills, including understanding and managing their emotions, coping skills, adaptability, resilience, setting goals, building good relationships, having empathy for others, behaving in an ethical manner, positive prosocial behaviour and problem-solving. Taking a whole school approach, SEL curriculum is embedded into the policies and practices of the school, and supported by family and community partnerships.

Fortunately, a growing number of SEL programs and curricula are available. For instance, the Collaboration for Academic, Social, and Emotional Learning (www.casel.org) is working to make social and emotional skills a core part of education. They focus on six main competencies: self-awareness, self-management, responsible decision-making, relationship skills, and social awareness. These competencies provide a framework to engage students in setting personal goals related to their social and emotional skills in addition to goals that may already be in place for their academic outcomes. In Australia, the Resilience, Rights, and Respectful Relationships program (Cahill et al., 2016) builds skills in emotional literacy, strengths, coping, problem-solving, stress management and help seeking.

8.2.5 Positive Emotionality

Finally, research and practice in positive psychology and positive education are identifying activities and practices that can add positive emotion to learning (cf. Parks & Biswas-Diener, 2013). Activities include reflecting on the good things in life, thinking about your best possible self, showing gratitude toward others and doing kind acts for others. Such activities are simple to do, and can all help students feel good and foster feelings of belongingness to school.

While primary schools often incorporate considerable fun into learning, play and fun become less common through secondary school. Some secondary schools have tackled this problem by building play grounds and play spaces for Year 7 and 8 students or by striving for novelty in daily routines and classrooms practices. Future research will benefit from focusing on strategies for directly incorporating positive emotion into everyday learning.

8.3 Prevention and the Mental Health Continuum

Scholars have suggested a variety of ways to think about well-being and mental illness. A dominant view places mental health on a continuous spectrum, from dysfunction at the low end, normal functioning in the middle and flourishing at the high end. From this perspective, flourishing students are those without mental illness and who report high levels of well-being. Such students are more likely to

feel a sense of school belonging, perform well in their classes and succeed in other areas of life—all of the correlates of school belonging that we have seen throughout this book. Such students are at lower risk of developing mental illness.

Flourishing does not just happen—it takes continued care. A garden provides a helpful analogy. It may flourish at a single point in time, but requires continued care for it to maintain its flourishing state. When storms come and threaten the plants, a good gardener knows how to protect the plants and how to minimise damage that is done. Primary prevention provides students with strategies, behaviours and resources that can help a young person tend to their mental garden across their lifespan.

In contrast, mental illness and low well-being often go hand in hand. Languishing refers to students with low well mental health and the presence of mental illness. Such students are at high risk of academic, physical, mental, cognitive and social problems. Tertiary prevention methods are needed to treat and deal with the consequences of illness. The earlier mental illness is detected, and intervened upon, the better. When mental illness is identified late, treatment becomes more challenging. A neglected garden takes much more effort. Weeds need to be pulled out, extra nutrients needed, and considerable time and resources are needed to rejuvenate plants.

We often think of mental health and mental illness as the continuum between the flourishing and languishing person. The two are often highly inversely correlated (that is, as one goes up, the other goes down). However, the correlations are moderate at most. Professor Corey Keyes suggested a different model of mental health, illustrated in Fig. 8.2. Here, mental illness and mental health are two different dimensions. From this perspective, flourishing (upper right) and languishing (lower left) are the typical continuum. But the other two diagonals (upper left and lower right) provide some interesting possibilities, especially from a preventative

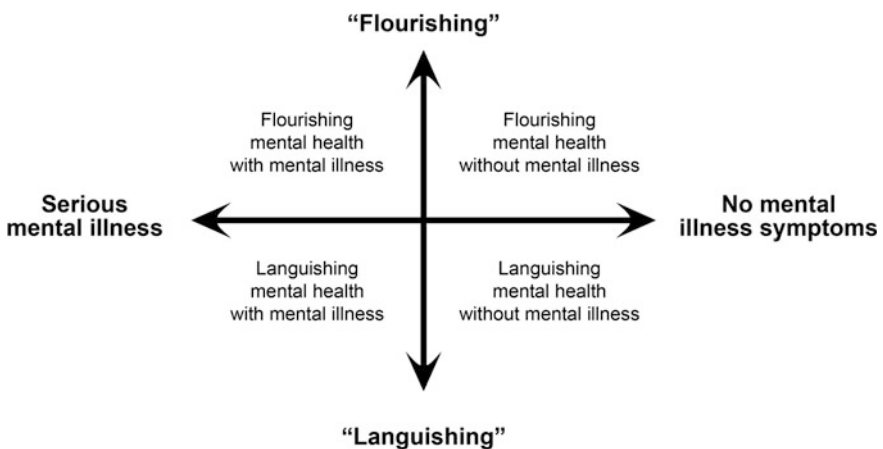


Fig. 8.2 Flouring versus Languishing model adapted from Corey Keyes (2002)

lens. The lower right box represents students who have no signs of mental illness, but also are not particularly thriving. A plant that is alive but not growing is not flourishing—it is simply surviving. When we consider high rates of student disengagement and lack of school belonging, a surprisingly large number of young people are in this group. They simply survive secondary school. They are also at higher risk of mental illness in the future. For these struggling students, primary prevention efforts might focus on equipping the young person with skills and resources that help them to be resilient when challenges do occur and to prevent mental illness from occurring. They might also help motivate a young person to move beyond simply surviving adolescence, and thrive.

A teacher's relationship with a student is also necessary at seeing students grow and reach their potential. Schools should look at ways for the student-teacher relationship to be encouraged and to also support teacher mental health as a part of this process. But such efforts also take time. Crowded time tables give teachers little time to get to know their students, and surviving students are the most likely to fall through the cracks, unnoticed. Secondary prevention programs, such as coach mentoring and study group, which provide additional resources to surviving students and a sense of connection with others, may be particularly beneficial for such students.

Then there is the upper left corner, which represents flourishing students with mental illness. These are students who live with mental illness, and yet are well connected to others and perform well. Studies show that mental illness and well-being can indeed coexist. A person with asthma can become a successful athlete, by accepting that the condition is there, learning how to work within the constraints that it brings, and knowing how to deal with symptoms of the disease. Similarly, a person with any range of mental illnesses can live a fulfilling life, by accepting the condition as part of him or her and managing the associated psychological sequelae. This requires a secondary prevention approach—putting resources in place to help the young person manage an illness, preventing additional disorder and living the best life possible within the constraints of life.

8.4 Personal Factors Revisited

In the last two chapters, we have considered mindsets, personal characteristics, behaviours, positive habits and ones' overall approach to life. Emotional instability places the adolescent at higher risk for disconnection from school, poor academic outcomes, physical and mental illness and a host of other problems. The adolescent period is a critical period to target and support mental health, from a preventative framework. By proactively promoting the mental health of young people, students, teachers and the educational community as a whole benefit in the long term, regardless of short-term costs that preventative efforts may entail.

A core part of this is to encourage students to take an active role in feeling a sense of belonging while creating an environment and providing resources to help

students take on that role. Schools need to create an environment that supports high levels of motivation, good mental health and positive personal characteristics. Teachers and others who work with youth play a crucial role in equipping students with tools and resources to build these individual factors. This can be done through psychologically based educational opportunities provided by the school, social and emotional learning, small group interventions, and individual coaching and counselling and peer-to-peer approaches, among numerous other strategies and interventions.

Underlying these individual factors are the relationships that exist and that are developed amongst the students, between the students and their teachers and the students and their parents, and the many other relationships that occur within the school environment. We turn next to some of these social factors and investigate how they may be encouraged to foster stronger feelings of belonging in young people.