

# Supporting students' mental health:

A collective responsibility



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**Data from the survey**

Specific research data from the survey can be provided for a fee. Elementary school data have been collected since 1997, and secondary school data have been collected since 2000. For more information, please contact [info@peopleforeducation.ca](mailto:info@peopleforeducation.ca).

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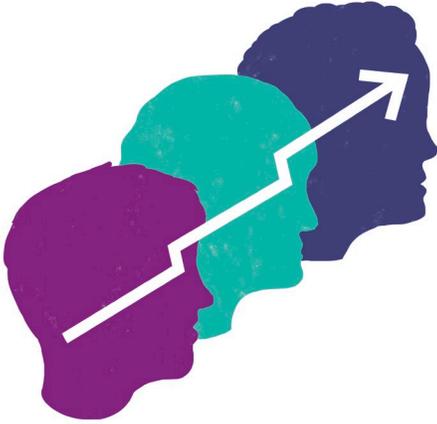
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## Quick facts

- 30% of elementary schools and 36% of secondary schools report having regularly scheduled access to a psychologist.
- 48% of elementary and 80% of secondary schools report having regularly scheduled access to a social worker. Among these schools, social workers spend an average of 4.7 hours per week in elementary schools and 16.3 hours per week in secondary schools.
- 28% of elementary and 62% of secondary schools report having regularly scheduled access to other professionals, including those that support students' mental health such as nurses, with less than half being school-board employees.
- Approximately 20% of children and youth live with a mental health problem and 70% of all mental health problems begin in childhood and adolescence (Centre for Addiction and Mental Health, n.d.; Ontario Ministry of Education, 2013).
- Almost half of students who report needing professional help for mental health concerns do not receive professional help (Ontario Child Health Study, 2017)

## Mental health needs of students are on the rise



“Mental health is the issue that our school struggles with most. It is difficult to get to academic learning when students come to school having experienced, trauma, anxiety, abuse, or other social/emotional negative experiences...”

—Elementary principal, Halton DSB

Principals from across Ontario report that they are seeing more students struggling with mental health issues. Some principals report that the volume and severity of those issues is making it difficult for them to fulfill their roles as instructional leaders.

In their responses to People for Education’s 2019 Annual Ontario School Survey, many principals expressed concern that students’ challenges were beyond the training and capacity of educators and staff and they stressed the need for increased in-school supports. There was near consensus on the value of mental health professionals, whether working with students directly, collaborating with educators, or running school-wide initiatives.

Principals’ perceptions are backed up by reports from student themselves.

In 2014, 11% of students responding to a survey conducted by the Offord Centre for Child Studies and McMaster University reported that they needed professional help for mental health concerns. Of those students, almost half reported that they did not receive the help they needed (Ontario Child Health Study, 2017). In response to a survey conducted by the Ontario Student Trustees’ Association (2017), a third of students said that they felt that mental health resources and supports at their schools were inadequate. At the national level, UNICEF ranked Canada 14th in mental health indicators in its international Index of Child and Youth Well-Being (UNICEF Canada, 2018).

# Supporting young peoples' mental health: a collective responsibility

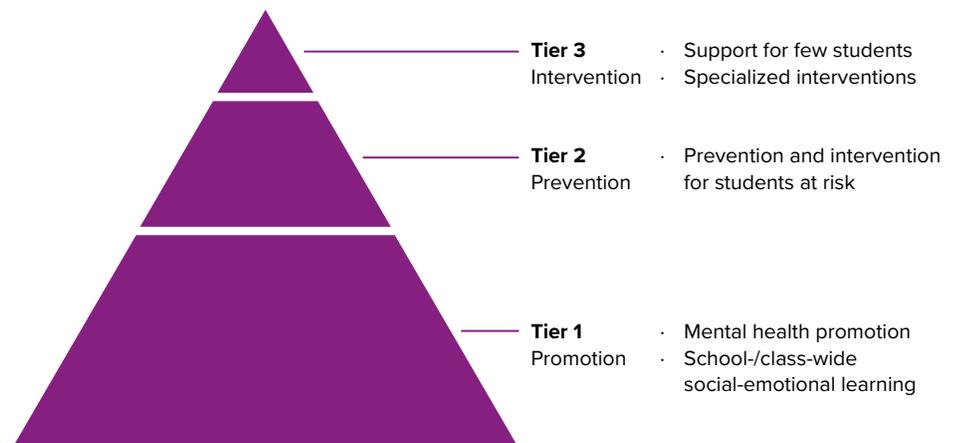


Who is responsible for supporting students' mental health in schools?  
In Ontario: Everyone (Ontario Ministry of Health, 2011).

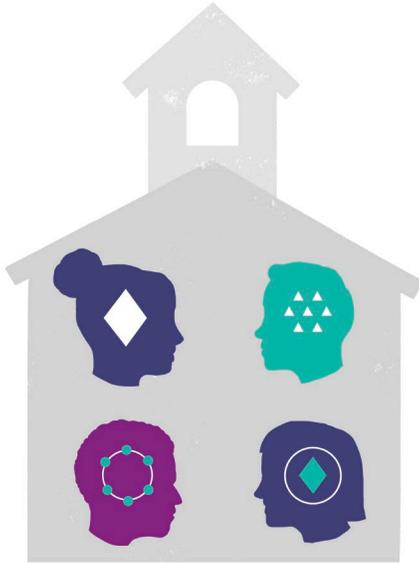
In 2006, The *Ontario Policy Framework for Child and Youth Mental Health* recognized that child and youth mental health is a shared responsibility among all child and youth-serving sectors and that positive outcomes require collaboration among “everyone who shares responsibility for the healthy development of Ontario’s children and youth” (Ontario Ministry of Children, Community and Social Services, 2006, p. 1). In 2011, The *Open Minds, Healthy Minds Strategy* introduced policy and funding for Mental Health Leads in school boards to develop, implement, and monitor board-level well-being strategies (Ontario Ministry of Health, 2011). The strategy also funded School Mental Health Assist, now called School Mental Health Ontario, whose role is to support school boards in promoting student mental health and well-being through a whole-school approach (See Figure 1) (School Mental Health Ontario, n.d.-a; Short, 2016).

This year, in *Education that Works for You*, the Ministry of Education (2019b) announced new mandatory content around mental health for elementary grades and a commitment to working with School Mental Health Ontario to improve learning opportunities around mental health. As part of its 10-year plan to invest \$3.8 billion in a comprehensive and connected mental health and addictions strategy, the government confirmed \$27 million in funding towards mental health supports in the education system (Ontario Ministry of Health, 2019).

**Figure 1** — A tiered approach to promoting mental health at school\*



# In-school resources—human and otherwise—make a difference



School boards receive funding from the province for staff such as guidance counsellors, along with a range of professionals and para-professionals, who can provide support for students’ mental health. Professionals and para-professionals can include psychologists, social workers, and child and youth workers (Ontario Ministry of Education, 2019a).

In schools that report having access to these professionals, virtually all principals identified them as a key resource in supporting student mental health. However, many principals said that there is a need for increased full-time specialists, as well as an ongoing need for professional development opportunities for teachers. Principals also raised concerns that existing mental health supports tend to focus on managing crisis situations rather than fostering positive mental health.

A number of elementary school principals particularly highlighted a lack of resources for elementary students, who, on average, receive fewer hours of professional support than secondary students (Figure 2). Principals identified “upstream interventions” geared towards younger learners as an important potential prevention strategy for those who may be at-risk.

## Guidance counsellors

Guidance counsellors can provide support to students dealing with challenges to their mental health, though they are not specifically trained to do this work. However, only 23% of elementary schools have these staff and the majority work less than half-time. Nearly every high school has at least a part-time guidance counsellor but the average ratio per secondary school of students to guidance counsellors is 375 to one and in 10% of secondary schools, the ratio is as high as 687 to one.

“We have a team (social worker, MH lead, nurse) that work closely with staff, students and admin to support the school. It is a very collaborative team.”

—Secondary principal, Nipissing-Parry DSB

“Having a full time CYC [Child and Youth Counsellor] has been essential to our success.”

—Elementary principal, Halton CDSB

**Figure 2** — Average number of hours of access per week among schools reporting regular access to professional services



(continued)



### Psychologists

Psychologists are the most highly trained mental health professionals in schools. Where available, they are often the only in-house resource with the necessary training to perform psychological assessments of students, provide intervention strategies and, when applicable, diagnose learning, social-emotional, behavioral and mental health issues. They can be an expert resource for districts, teachers, and parents and, where possible, they can deliver prevention programming for the full suite of mental health issues affecting schools (Ontario Psychological Association, 2013).

However, not all schools have access to psychologists.

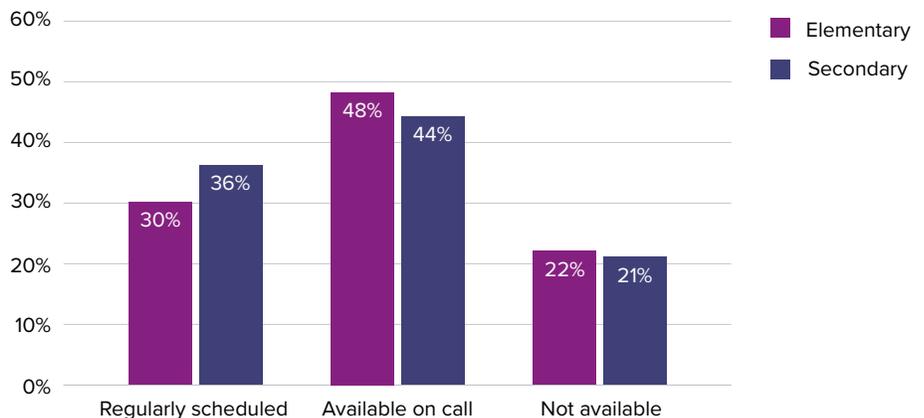
In 2019:

- 30% of elementary schools and 36% of secondary schools report having regularly scheduled access to a psychologist, a decline from 38% and 40% respectively in 2017.
- 22% of elementary and 21% of secondary schools report having no access to a psychologist, nearly double the proportion that reported 5 years ago.
- 48% of elementary and 44% secondary principals report having access to an “on-call” psychologist
- Among schools with regular access, psychologists spend an average of 4.2 hours per week in elementary schools and 5.5 hours per week in secondary schools.

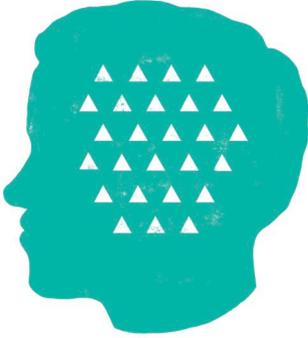
“Getting attention from the very busy and overstretched board psychologists and supports is difficult as we are not seen as a ‘needy’ or ‘problem’ school.”

—Elementary principal, Upper Grand DSB

Figure 3 — Percentage of schools with access to psychologists



(continued)



“Primary students are being provided this year with a new program delivered by a social worker who will present about 5 lessons on how to deal with your feelings.”

—Elementary principal, Rainbow DSB

“The social worker should be at school every day of the week to follow up with the students she sees. The problems are not just one day a week.” (Translated from French)

—Elementary principal, CEP de l’Est de l’Ontario

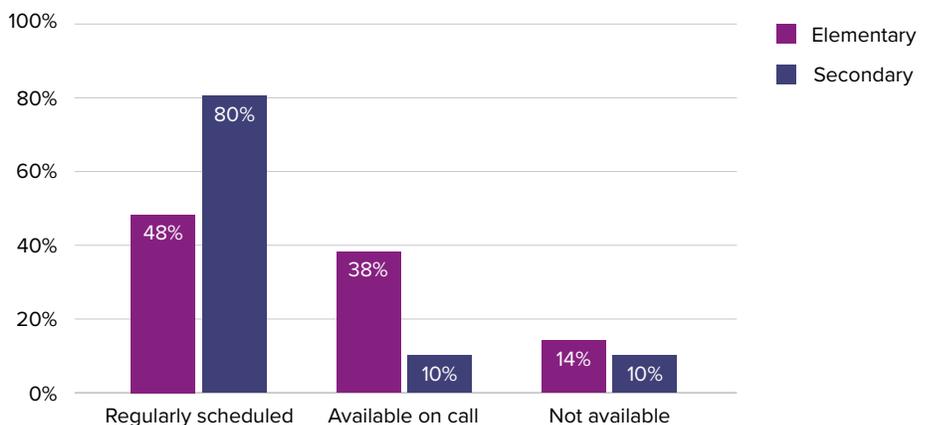
### Social workers

School social workers can help students address the social and emotional factors that impact success at school. Services can include individual or family counselling, trauma response, or community referrals (Toronto District School Board, n.d.-b; York Region District School Board, n.d.).

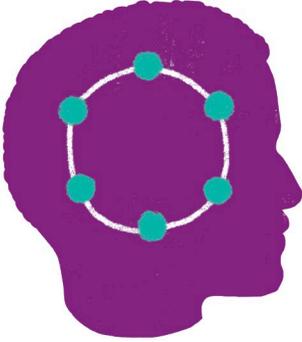
In 2019:

- 48% of elementary and 80% of secondary schools report having regular access to a social worker.
- 14% of elementary and 10% of secondary schools report having no access to a social worker.
- 38% of elementary and 10% secondary principals report having access to an “on-call” social worker
- Among schools with regular access, social workers spend an average of 4.7 hours per week in elementary schools and 16.3 hours per week in secondary schools.

Figure 4 — Percentage of schools with access to social workers



(continued)



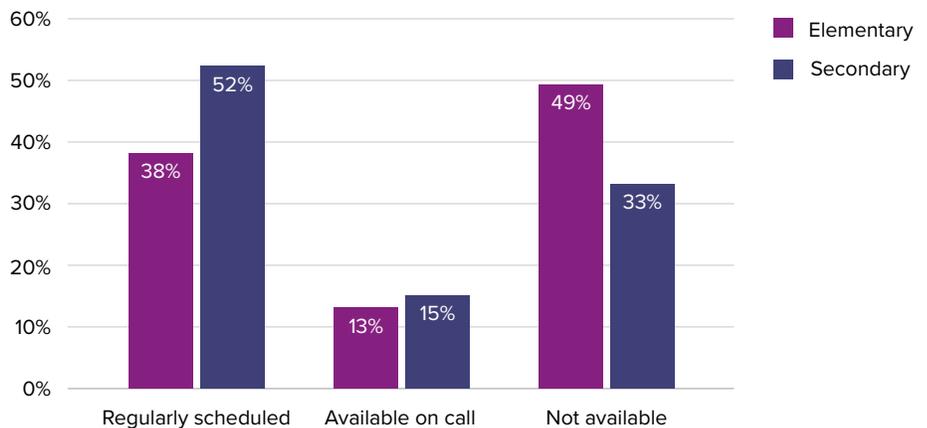
### Child and youth workers

Child and youth workers are a diverse group of specialists who can provide a variety of supports to students with social, emotional, behavioural, or developmental challenges. They may work within larger teams to support specific needs, such as students on the Autism spectrum, students needing academic support, or those with behavioural needs (Toronto District School Board, n.d.-a).

In 2019:

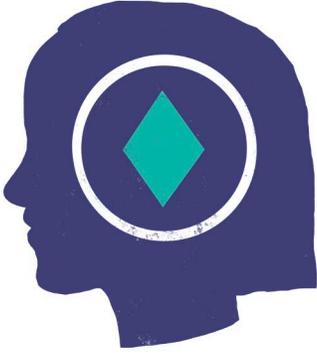
- 38% of elementary schools report having regular access to youth workers, compared to 52% of secondary schools.
- 49% of elementary and 33% of secondary schools report no access to child and youth workers.
- 13% of elementary and 15% secondary principals report having access to an “on-call” child and youth worker.
- Among schools with regular access, child and youth workers spend an average of 16.6 hours per week in elementary schools and 29 hours per week in secondary schools.

**Figure 5** — Percentage of schools with access to child and youth workers



## In-school resources—human and otherwise—make a difference

(continued)



“We have supports from outside agencies within our building on a scheduled basis—full-time support is needed but we appreciate all the help provided.”

—Secondary principal, Keewatin-Patricia DSB

“Through the UPHS [Urban and Priority High Schools] Grant we have been able to have a full time social worker, increased psychologist FTE and a Nurse Practitioner on site for 2 days a week. This has been incredibly helpful.”

—Secondary principal, Ottawa-Carleton DSB

### Support from other professionals to support mental health

In 2019, many principals reported drawing on the expertise of a range of other professionals—from inside and outside the education system. For example, Youth Outreach Workers work with youth in priority neighborhoods to connect them with services and provide case management and short-term counselling services, with many providing specialized supports for newcomer youth (East Metro Youth Services, 2019; Yorktown Family Services, n.d.). In Northwestern Ontario, the Keewatin Patricia District School Board (2018) has piloted the *First Nations, Métis and Inuit Student Support Navigator* program, complementing their existing *Four Directions* graduation coach program for First Nations, Métis and Inuit students. The role of the student support navigator is to help Indigenous students access services inside and outside the school, including mental health supports.

Many principals also report working with nurses, who provide a range of services from coordinating school-wide health promoting activities to one-on-one support and referrals.

# Geography and its impact on school-based mental health resources and support



Our data show that schools in Northern and Southwestern Ontario are less likely than schools in other Ontario regions to have access to mental health supports (Figure 6). At the other end of the spectrum are schools in the Greater Toronto Area, which report the highest rates of access to mental health professionals and paraprofessionals. Differences in access are also likely along socio-economic lines—the Canadian Association of Paediatric Health Centres et al. (2010) note that low-income families are much less likely to receive specialist mental health services than their more affluent counterparts.

Principals in French-language systems also expressed concerns that their francophone communities are underserved when comes to mental health and that access to francophone professionals is an issue.

A number of principals noted that some families were not able to travel long distances to get supports, even in cases where a coordinated referral was made. The expansion of the Ontario Telemedicine Network, including Telemental Health and Telepsychiatry, is one of the ways that the provincial government is attempting to address these access issues for rural and remote communities (Ontario Ministry of Health, 2018).

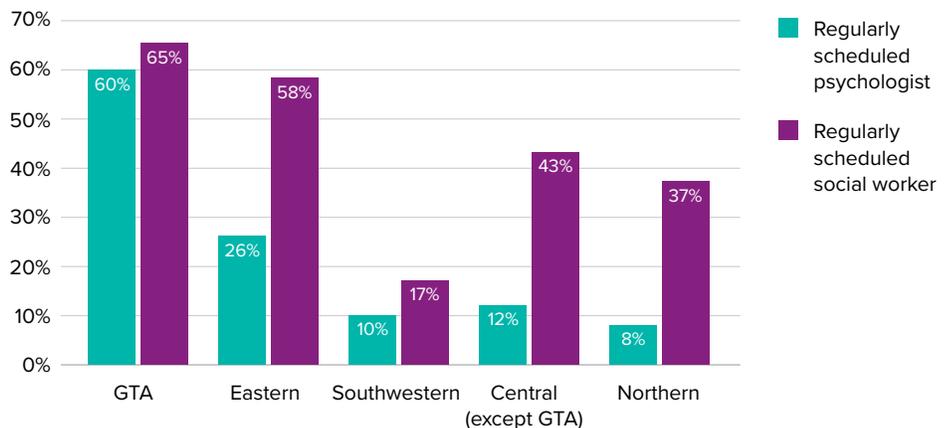
“Accessing mental health services, particularly in our community (which is a more Northern community) can be challenging. Community services are limited, and wait times are often long, so the school provides what support is possible through our mental health lead and social worker.”

—Elementary principal, Rainbow DSB

“The lack of francophone services especially for us who are isolated [is a challenge].” (Translated from French)

—Secondary principal, CSD du Grand Nord de l’Ontario

**Figure 6** — Percentage of elementary schools with access to regularly scheduled professional services, by region



# Innovating to promote school-wide mental health



“Each student who struggles with mental health is given a choice of ‘safe place’ where they can go and relax. They have a toolkit of things they can use to decrease anxiety... which works.”

—Elementary principal, Trillium Lakelands DSB

“We have done a lot to remove the stigma about mental health as being something we do not talk about and have made for a very open and accepting community for all things that cause students stress: anxiety, gender changes, sexual orientation, etc.”

—Elementary principal, Simcoe County DSB

Despite challenges with resources, many principals report that their schools are embedding positive mental health practices across the learning environment. They report numerous different strategies and programs, including:

- Integrating mental health throughout the curriculum, often with the help of third-party supports (e.g. the MindUP program, or approaches such as “The Zones of Regulation”).
- Launching school-wide initiatives (for example, “Stomp the Stigma”).
- Working to create a school climate with an open dialogue around mental health.
- Incorporating mental health into their school objectives and School Improvement Plans.
- Promoting student development via communities of practice, often in the form of student-led activities or student representation on mental health teams.
- Altering the school’s physical layout or designating specific spaces for students to practice self-regulation, relaxation, or meditation.
- Making specialized supports available, such as weighted blankets or therapy dogs.

Principals noted that efforts to support student well-being must reach beyond the classroom. Principals expressed the need for resources to equip family members to have open, informed conversations about mental health at home. Many noted cultural or language barriers to creating these resources and the negative outcomes it creates for students in need of support. Developing *cultural competence* may help schools and their communities meet the mental health needs of “students and parents from diverse immigrant, ethnic, and linguistic backgrounds” (Ontario Ministry of Education, 2013, p. 15).

## The cost of not addressing student mental health is high



“The stigma attached means families don’t want to accept the help for their children. Students are still nervous to say they need help.”

—Elementary principal, Simcoe County DSB

“Culturally, the community tends not to engage the school unless it’s a moment of crisis as there is a lot of stigma around mental health and the resources that are most readily available do not address the cultural and linguistic dynamic the majority of families in my community...are faced with.”

—Secondary principal, Peel DSB

The majority of mental health disorders emerge during childhood and adolescence and there is widespread agreement that prevention and early treatment of mental illness has long-term payoffs for individuals and society (Ferguson & Power, 2014).

Educationally, there are a wide range of negative outcomes associated with untreated mental health issues including poor academic achievement, missed classes, and higher drop-out rates (Children’s Mental Health Ontario, 2018; Ontario Ministry of Health, 2011; Short, Ferguson, & Santor, 2009).

However, the long-term effects of untreated mental health challenges extend well beyond the classroom and may include increased levels of unemployment, poverty and homelessness, risk of criminal behaviour as well as substance abuse and difficulty developing relationships (Ontario College of Teachers, 2018; Ontario Ministry of Health, 2011).

Economic models show that promotion, prevention and early intervention services in schools yield sizable economic returns: the return on investment from social emotional learning initiatives is projected at a rate of nearly 84 : 1, anti-bullying programming at 14 : 1, and early years mental health promotion between 6 and 16 : 1 (School Mental Health Ontario, n.d.-b).

In addition to substantial personal costs, poor mental health has been shown to have negative social and financial impacts for society at large. Nearly half of all youth in Ontario have reported missing school due to anxiety and nearly a quarter of their parents missed work to care for them (Children’s Mental Health Ontario, 2018). In Ontario, there has been a 63% increase in hospitalizations for children and youth seeking treatment for mental health and addiction issues since 2006, compared to an 18% *decrease* in hospital visits for other complaints during this time (Children’s Mental Health Ontario, 2018). The Mental Health Commission of Canada (2016) estimates that mental health issues cost the Canadian economy \$50 billion per year in both direct and indirect costs and the World Health Organization predicts that mental health disorders will be the world’s leading cause of disability by 2030 (as cited in Ontario College of Teachers, 2018).

## What's next?



The way Ontarians think about health and well-being is evolving and there is no doubt that increased recognition of both the issues and the potential solutions is making a difference in schools.

Students in Ontario are engaging in new kinds of conversations with their teachers and themselves about what it means to be well—both physically and mentally—and Ontario is making strides in student well-being policy. But to be truly effective, policy must be backed up with sufficient resources.

Preparing students for lifelong success is about more than what happens in the classroom. Principals tell us that many students in Ontario are in need of mental health support and that their schools are working to respond to their students' mental health needs. Those responses can mean both taking a broad approach to health promotion for all students, as well as targeted interventions for students with higher needs.

There are a number of promising initiatives on the horizon, including #HearNowON—a project led by School Mental Health Ontario and supported by the Ontario Student Trustees' Association. This initiative, launched in the spring of 2019 with an extensive student survey and in-person meetings with students, is intended to “hear student voices, improve youth engagement in school-based mental health programming, and inform a provincial student mental health leadership strategy” (School Mental Health Ontario, 2019, para. 1).

# Recommendations



“Schools are an excellent place to promote student mental health, to build knowledge about social-emotional skills, and to identify and support students early who may struggle with a mental health problem.”

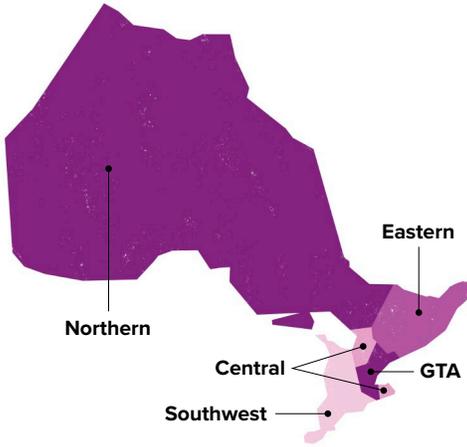
—Dr. Kathy Short, Executive Director,  
School Mental Health Ontario

Our data continue to show that schools are struggling to provide adequate services and supports to students who are struggling with their mental health and that geography continues to play a role in students’ access to services and mental health professionals.

## People for Education recommends that the province:

- Continue to revise Ontario curriculum to embed teaching and learning about social-emotional skills and the range of skills and competencies that People for Education and others have identified as The New Basics. Many of these skills and competencies can provide students with the knowledge and understanding they need to promote good mental health.
- Update the Education Funding Formula to ensure that schools in rural areas and the north, as well as French-language schools are able to provide students with equitable access to mental health professionals and supports.
- Consult with principals, teachers, and professionals across the province to develop long-term planning and policy that will support a *whole school* approach to mental health.

# Methods



## People for Education’s data

Every year, People for Education surveys Ontario’s publicly funded elementary and secondary schools. This report is based on data from the 1,254 schools that participated in the Annual Ontario School Survey this year. Unless cited from other sources, the statistics and quoted material in this report originate from People for Education’s Annual Ontario School Survey, the 22nd annual survey of elementary schools and 19th annual survey of secondary schools in Ontario. The surveys were sent to schools in the fall of 2018, and could be completed online via SurveyMonkey, in both English and French.

This year, we received 1,254 responses from elementary and secondary schools in 70 of Ontario’s 72 publicly funded school boards, representing 26% of the province’s publicly funded schools. Survey responses are also disaggregated to examine survey representation across provincial regions (see Figure 7). Regional representation in this year’s survey corresponds relatively well with the regional distribution of Ontario’s schools.

**Figure 7** — Survey representation by region

Region (by postal code)	Percentage of schools in sample	Percentage of schools in Ontario
Eastern (K)	19%	18%
Central (L excluding GTA)	15%	17%
Southwest (N)	18%	20%
Northern (P)	13%	11%
GTA	35%	34%

## Methods

(continued)

### Data analysis and reporting

Qualitative data analysis was conducted using inductive analysis. Researchers read responses and coded emergent themes in each set of data (i.e. the responses to each of the survey's open-ended questions).

The quantitative analyses in this report are based on descriptive statistics. The chief objective of the descriptive analyses is to present numerical information in an illuminating format that is accessible to a broad public readership. All data were analyzed using SPSS statistical software.

Calculations have been rounded to the nearest whole number and may not amount to 100% in displays of disaggregated categories. All survey responses and data are kept confidential and stored in conjunction with Tri-Council recommendations for the safeguarding of data.

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