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EDC

Country Report:

Canada

International Survey *of* Principals Concerning Emotional *and* Mental Health *and* Well-Being

2009

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International Survey *of* Principals Concerning Emotional *and* Mental Health *and* Well-Being

2009

Conducted by

International Association of Child and Adolescent Mental Health and Schools (Intercamhs)

with the

International Confederation of Principals (ICP)

Country Report:

Canada

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Summary of major findings

1 The link and those in need	Nearly 93% of all the principals believe that emotional/mental health and well-being are "very important" for academic achievement. In the Canadian sample, 43% estimate that close to one in five of their students needs prevention or intervention services, compared to 35% globally. These estimates are consistent with other Canadian and global research.
2 Major student issues	The top three emotional/mental health and well-being issues that principals identify among students are anger management, impulse control, and bullying and harassment. In their own words, responding to an open-ended question, one third of Canadian principals emphasize that the most important issues they face in their work are to become more aware of issues, identification of problems, and access to services.
3 Major staff issues	Among staff, principals report that stress, anxiety, and depression are the major emotional/ mental health and well-being issues. In their own words, principals also emphasize the importance of identifying problems and gaining access to services for staff. Principals rate the emotional/ mental health and well-being issues for staff lower than they do for student issues.
4 Ministry of Education policies	Principals see a need to increase and strengthen Ministry of Education policies with regard to both student and teacher emotional/mental health and well-being through schools. However, those principals who report that at least one policy exists, compared to no policies, for either students or teachers express a slightly greater need for educational materials and resources.
5 Impact of student family income	Student family income level does not affect the average ratings of importance that principals place on student or staff issues. Lower income levels are associated with Canadian principals' ratings of importance for resources to address several issues, including knowing how to create effective linkages between schools and mental health services and support as well as creating a whole-school approach to address mental health and well-being.
6 Need for resources	Principals want resources, training, and materials to address eight critical areas of a whole-school approach, including support to students and families in distress, effective promotion and prevention strategies, and teaching emotional and social learning skills. Principals report that training programs and materials for their staff (especially in the form of DVDs/videos and Web-based courses), as well as exchange with other principals and experts, would be most useful.

Introduction

This report provides the Canadian data from the recent International Survey of Principals Concerning Emotional and Mental Health and Well-Being (http://www.intercamhs.org/html/principals_survey.html). The International Alliance for Child and Adolescent Mental Health and Schools (Intercamhs), with EDC's Health and Human Development Division serving as Intercamhs Secretariat, and the International Confederation of Principals (ICP) conducted a global, web-based survey of school principals. The purpose of the global survey was to understand:

- if educators see a link between emotional/mental health and academic achievement;
- the major emotional and mental health/well-being issues facing students and staff; and
- policies, professional development, and other resources that principals say they need to respond.

For more on the collaboration between Intercamhs and ICP, please see Appendix I.

Sample

Intercamhs and ICP sent the survey via the web to the Canadian affiliate of ICP, requesting that they send the survey to all its members. The full international sample represented 1,215 principals from 25 countries. One of these countries was Canada with a sample of 145 principals. Table A, below, compares some of the characteristics of the global and Canadian samples.

Table A. Sample characteristics for the Canadian responses and the overall global dataset (in parentheses)

Characteristic	Canada	Global
Income level of families		
Low income / poverty	24 (16.6%)	278 (22.9%)
Lower middle class	60 (41.4%)	403 (33.2%)
Middle class	48 (33.1%)	424 (34.9%)
Upper middle class	13 (9.0%)	97 (8.0%)
High income	0 (0.0%)	13 (1.1%)
TOTAL	**145 (100%)**	**1215 (100%)**
Size of school		
Very small (< 151)	12 (8.3%)	254 (20.9%)
Small (151-400)	55 (37.9%)	345 (28.4%)
Medium (401-800)	48 (33.1%)	324 (26.7%)
Large (801-1200)	15 (10.3%)	186 (15.3%)
Very large (> 1200)	15 (10.3%)	106 (8.7%)
TOTAL	**145 (100%)**	**1215 (100%)**
Student diversity		
Very diverse	34 (23.4%)	332 (27.3%)
Diverse	27 (18.6%)	146 (12.0%)
Mixed	30 (20.7%)	335 (27.6%)
Similar	26 (17.9%)	234 (19.3%)
Very similar	28 (19.3%)	168 (13.8%)
TOTAL	**145 (100%)**	**1215 (100%)**

Characteristic	Canada	Global
Grade level of school		
Pre-k and elementary	54 (37.2%)	619 (50.9%)
Middle and high school	43 (29.7%)	326 (26.8%)
Other	48 (33.1%)	270 (22.2%)
TOTAL	**145 (100%)**	**1215 (100%)**
Gender of principal		
Female	100 (69.0%)	684 (57.0%)
Male	45 (31.0%)	515 (43.0%)
TOTAL	**145 (100%)**	**1199 (100%)**
Number of years as principal - current school		
1 to 3	89 (61.4%)	442 (36.4%)
4 to 6	43 (29.7%)	306 (25.2%)
7 to 10	12 (8.3%)	228 (18.8%)
11 to 14	1 (0.7%)	138 (11.4%)
15 or more	0 (0.0%)	100 (8.2%)
TOTAL	**145 (100%)**	**1214 (100%)**
Number of years as principal - total		
1 to 3	39 (26.9%)	269 (22.2%)
4 to 6	40 (27.6%)	253 (20.8%)
7 to 10	42 (29.0%)	277 (22.8%)
11 to 14	17 (11.7%)	195 (16.1%)
15 or more	7 (4.8%)	220 (18.1%)
TOTAL	**145 (100%)**	**1214 (100%)**

While the income levels of student families are similar in both the Canadian sample and the global data, a larger proportion of the Canadian respondents (41%) estimate that their students' families are of lower middle class. 79% of the schools where the Canadian principals serve have 800 students or fewer, whereas the global data includes a greater number of respondents working at larger schools. Not unlike the global data, the respondents in the Canadian sample work at schools with a broad range of diversity in their student populations, with equal distribution among majority and minority groups. The Canadian sample has an even larger percentage of female respondents, and are generally not as experienced as compared to the global data: Canadian respondents are nearly twice as likely to have worked only 1 to 3 years as principals in their current school.

Overview of findings

EDC analyzed the full sample and individual country samples by reporting basic frequencies and by conducting correlational analysis, chi-square tests, and ANOVAs to examine the relationships between the various sample characteristics (described in Table A above) and the dependent variables of interest. While some bias may have been introduced due to the principals' self-selection to participate, the high number of responses and the remarkable consistency in their recognition of a link between mental health and education, as well as their accurate estimation of the proportion of students requiring prevention or intervention services, suggest that addressing mental health through schools has broad support . There are some areas where the Canadian data differ noticeably from the global information.

There are several important findings:

- Very similar to the global dataset, Canadian principals see emotional/mental health and well-being of students to be "very important" for academic performance (93%).
- The top four student mental health issues (anger management, bullying and harassment, impulse control, and family dysfunction or other issues) and the top three staff mental health issues (stress, anxiety, and depression) that Canadian principals identify are the same as in the global dataset, but are rated higher in importance.
- Concerning some of the top issues faced in their role with regard to students, Canadian principals cite awareness of mental health, identification of those in need, and access to services more often (30%) than in the global sample (18%). Respondents in the global dataset, however, cite home and community problems nearly twice as often (12.4%) as Canadian principals (7.5%).
- As in the global dataset, principals rate mental health and well-being issues of staff as less important (2.79) on a five-point scale than those of students (3.44).
- Compared to the global dataset, Canadian principals report the existence of fewer Ministry of Education policies (presumably at the provincial level) to address student and teacher general and mental health through schools.
- Canadian principals' average ratings of importance for student emotional/mental health and well-being issues are relatively unaffected by student family income level. The global dataset shows a clearer trend, where principals serving in schools of lower student family incomes report higher ratings of importance for student issues.
- Regardless of years of experience, principals strongly indicate that they need professional development to address a variety of issues, such as student and family supports for those with more serious problems and programs and strategies to teach students emotional and social learning skills. These results are very similar to the global data.

For discussion questions corresponding to each of the six major findings, please see Appendix II.

The evolution of school health and school mental health in Canada

The provision of Health and Education services and programs in Canada falls largely within the jurisdiction of each of the 10 provinces and 3 territories, many of which all have a mental health policy in place.[1] However, there is no national mental health policy in place in Canada as of this writing in 2009.

For several years, many of the provincial/territorial Health and Education Ministries formulated their own school health movements independently. Numerous and diverse sponsors helped to fund the establishment of the Canadian Association for School Health (CASH) in 1988 to support the incorporation of the "Comprehensive School Health" framework. In 2006, CASH developed a revised version of the original consensus statement on this framework (endorsed by 19 national organizations) emphasizing four key elements: instruction, support services, psychosocial environment, and healthy physical environment.[2] The following year, CASH supported the development of the Canadian School Mental Health Community of Practice, a collaborative network of education and health practitioners, researchers, and academics from across Canada that works to develop formative approaches to effective school mental health.

In 1995, the Public Health Agency of Canada established the Mental Health Promotion Unit (MHPU) to promote positive mental health and well-being for all Canadians. Under its mandate, the MHPU contributes to the development, synthesis, dissemination, and application of knowledge. In working with NGOs, professional associations, and international organizations, the MHPU is also committed to the development, implementation and evaluation of policies, programs and activities designed to promote mental health and address the needs of people with mental health problems or disorders.[3]

Adding to these developments at the intergovernmental level, various ministries, agencies, departments, and others established the Pan-Canadian Joint Consortium for School Health in 2005. While not involved in program design or implementation, the Consortium provides a forum, tools, and other resources to build the capacity of its member governments to work together more effectively and efficiently, while advancing and promoting the latest approaches to comprehensive school health in Canada and around the world.[4]

With the release of Senator Michael Kirby's May 2006 report documenting the status of mental health throughout the country and the need for reform, the Mental Health Commission of Canada was established to determine the action required at the national and provincial/territorial levels to undertake these changes.[5] This major focus on child mental health has led to the development of the Child and Youth subcommittee, which is currently working to address several objectives:[6]

- Develop a Canadian vision for child and youth mental health
- Support the delivery of evidence-based mental health services for children and youth within the school
- Make the child and youth segment a central part of the national anti-stigma campaign
- Identify, understand, and promote effective strategies to address and defeat self-stigma experienced by children and youth
- Develop an index of current local, national and international knowledge exchange initiatives related to child and youth mental health and establish a Canadian consortium for knowledge exchange in child and youth mental health
- Systematically compile, review, and synthesize material for the knowledge exchange related to child and youth mental health to meet the needs of various end users
- Establish a youth reference group for the Mental Health Commission of Canada

1. The link and those in need

Nearly 93% of all the principals believe that emotional/mental health and well-being are "very important" for academic achievement. In the Canadian sample, 43% estimate that close to one in five of their students needs prevention or intervention services, compared to 35% globally. These estimates are consistent with other Canadian and global research.

The survey asked principals to what degree they see a link between student emotional/mental health and well-being and achievement in the classroom. Figure 1 (a) illustrates that nearly 93% of the Canadian sample believes that this link is "very important." Responses are consistent, regardless of the number of years of experience that principals have in their role or in their estimates of the diversity and family income of their students.

Figure 1 (b) below reports Canadian principals' estimates of the percentage of their students who they believe are in need of services. 43% of Canadian principals estimate that close to one in five of their students is in need of prevention or intervention services. Overall, estimates in the Canadian sample are slightly higher than in the global dataset, a difference approaching signficance.

Other Canadian and global research has arrived at similar findings to this survey, reporting that approximately one in five children live with a diagnosable mental health disorder.[7] The majority of these children most likely do not have access to specialist services.

Figure 1 (a). Principals' average rating of importance of emotional/mental health and well-being in terms of student performance and academic achievement

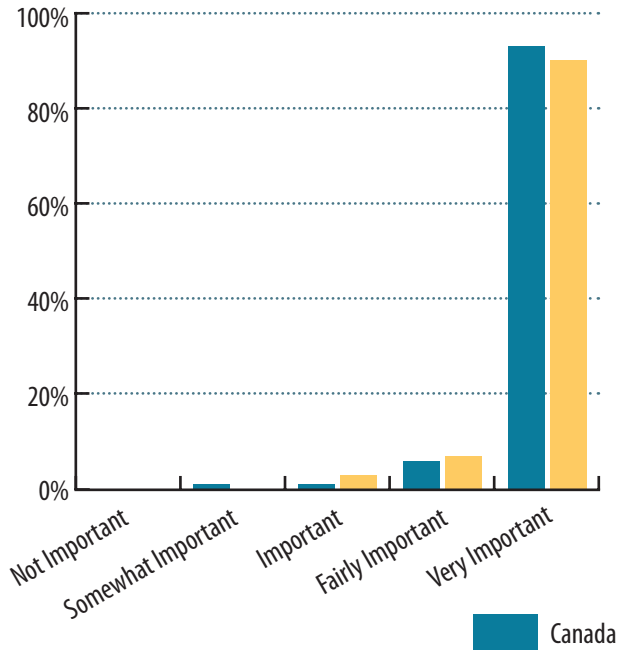
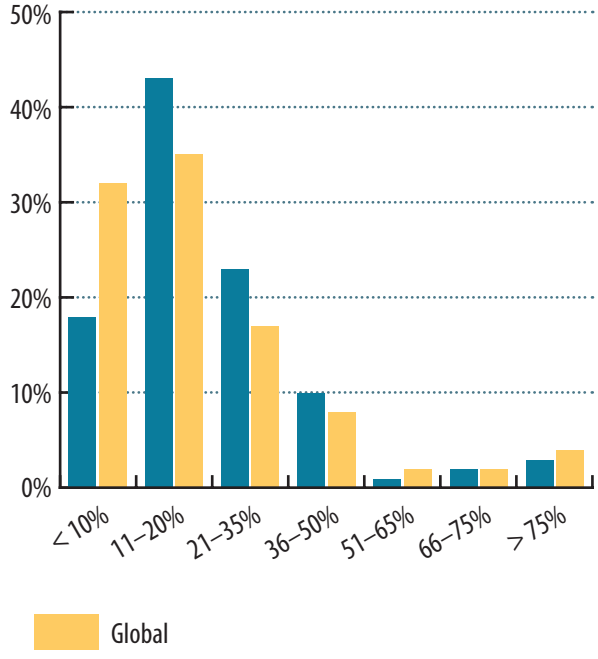


Figure 1 (b). Principals' estimate of the percentage of their students needing services



Voice from the field

"This is an area which has long been neglected, and for some educators dismissed as simply 'babying' students. Preventive and responsive strategies, rather than simply reactive strategies would provide better support for our children, our staff, our communities. Both should be a part of the world we now live in."

2. Major student issues

The top three emotional/mental health and well-being issues that principals identify among students are anger management, impulse control, and bullying and harassment. In their own words, responding to an open-ended question, one third of Canadian principals emphasize that the most important issues they face in their work are to become more aware of issues, identification of problems, and access to services.

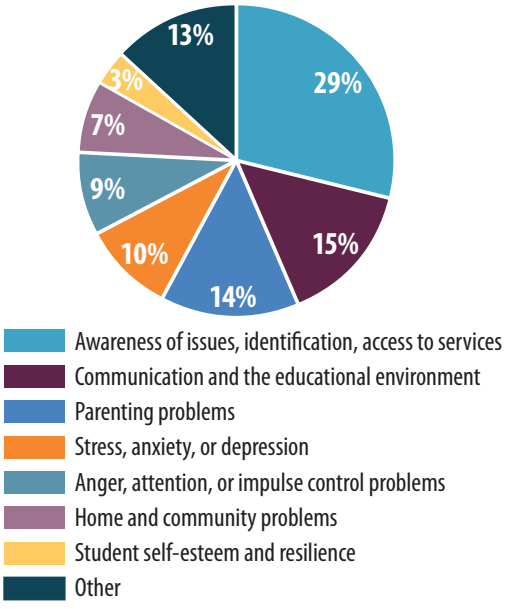
On a scale of 1 ("Not Important") to 5 ("Very Important"), principals rated the importance of 16 issues, presented in a checklist. These 16 issues came from the international literature regarding the prevalence and importance of specific conditions. Canadian principals rank anger management, impulse control, and bullying and harassment as the three leading issues they need to address among their students. The Canadian sample and the global sample rank the top seven issues in a similar order, though Canadian principals give higher average ratings of importance to the top four issues (>4.00) on the five-point scale.

In addition to the checklist, the survey asked principals to respond in their own words to what they see as the most important emotional and mental health issues to address for their students. Figure 2 (b) shows that 29% of all Canadian responses (compared to 18% in the global dataset) are related to awareness of mental health issues, identification of problems, and access to services. However, Canadian principals cite home and community problems only half as frequently as do principals globally (7.5% versus 12.4%, respectively).

Figure 2 (a). Canadian principals' ratings of major emotional/mental health and well-being issues to address among students, based on average rating (1=Not Important, 5=Very Important) from checklist

Issue	Canada rating	Global rating
1. Anger management	4.47	3.93
2. Impulse control	4.28	3.96
3. Bullying and harassment	4.28	3.99
4. Family dysfunction or other	4.10	3.89
5. Anxiety	3.77	3.38
6. Other behaviour problems	3.72	3.49
7. Stress	3.61	3.29
AVERAGE (ALL ISSUES)	3.44	3.21

Figure 2 (b). Canadian principals' open-ended responses as to their views of important issues to address among students



Voice from the field

"School engagement is high when a need emerges and, in general, families appreciate our role and access school/community agencies and supports as needed. However, there is sometimes reluctance on the part of some families to seek support for reasons such as societal perceptions, privacy and cultural traditions. Sometimes, a family may not agree to school requests for intervention and needed support."

3. Major staff issues

Among staff, principals report that stress, anxiety, and depression are the major emotional/mental health and well-being issues. In their own words, principals also emphasize the importance of identifying problems and gaining access to services for staff. Principals rate the emotional/mental health and well-being issues for staff lower than they do for student issues.

As they did for students, principals rated the importance of 11 given issues for staff using the same scale of 1 ("Not Important") to 5 ("Very Important"). Likewise, in response to an open-ended question, principals shared, in their own words, what they see as the most important emotional and mental health issues to address for their staff.

Figures 3 (a) and (b) show that there is reasonable consistency with the global data in the issues that Canadian principals rate as important for staff: stress, anxiety, and depression and the need to help their staff build resilience and develop coping skills to deal with some of these challenges. Interestingly, the principals do not perceive the impact of policy (such as inclusiveness without classroom support) and school structural factors (such as large class sizes) as factors contributing to teacher stress.

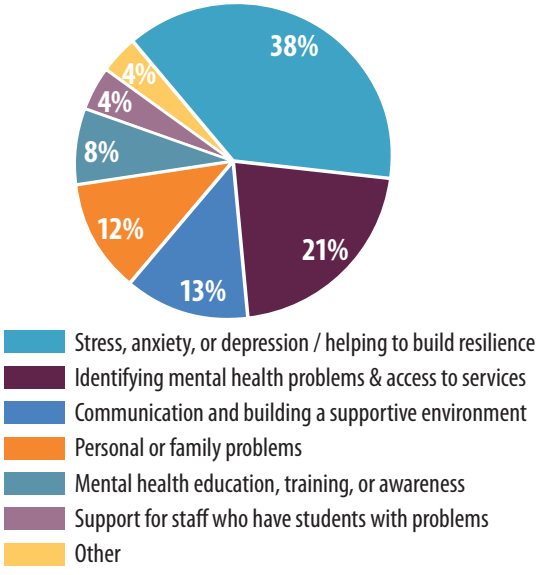
Similar to the global data, 19% of the Canadian principals (compared to about 17% of principals in the global sample) cite the importance of identifying and diagnosing staff with mental health problems and connecting them to needed services within the school or externally. In both the global data and Canadian sample, principals cited the importance of building an environment where staff members can assist other staff and children to feel safe and supported. However, principals in the global and Canadian samples rate teacher issues on average as lower in importance than student issues (3.44 versus 2.79). This difference indicates the need to focus on the school as a healthy workplace, given the rights and needs of teachers and the impact of teacher well-being on student performance.

Figure 3 (a). Canadian principals' ratings of major emotional/mental health and well-being issues to address among staff, based on average rating (1=Not Important, 5=Very Important) from checklist

Issue	Canada rating	Global rating
1. Stress	4.07	3.72
2. Anxiety	3.42	3.14
3. Depression	3.11	2.84
4. Bullying and harassment	3.04	2.73
5. Anger management	2.94	2.63
AVERAGE (ALL ISSUES)*	2.79	2.61

* difference is not significant

Figure 3 (b). Canadian principals' open-ended responses as to their views of important issues to address among staff



Voice from the field

"Teachers in our province have been overwhelmed by the many, and fast paced changes in both curriculum and student care, and the expansion of character development programming. The concept of accountability, while an essential one, has been overblown to the point of teachers either shutting down, or questioning each and every thing they do."

4. Ministry of Education policies

Principals see a need to increase and strengthen Ministry of Education policies with regard to both student and teacher emotional/mental health and well-being through schools. However, those principals who report that at least one policy exists, compared to no policies, for either students or teachers express a slightly greater need for educational materials and resources.

Figure 4 (a) shows that less than two thirds of principals in the Canadian sample indicate that Ministry of Education (MOE) policies exist to address students' general health through schools. One third acknowledge that there are policies to address mental health, in particular, through schools. These numbers are far lower than those for the global dataset (74% and 55%, respectively). Only 20% of Canadian respondents state that there are MOE policies for either teachers' general health or mental health.

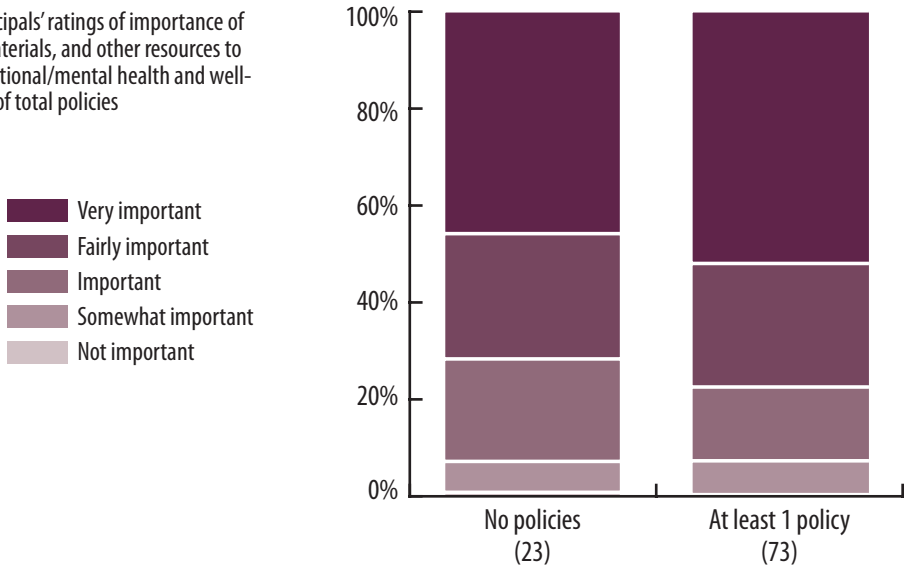
As shown in Figure 4 (b) however, prinicipals in the Canadian sample who report that no policies exist rate the importance of having educational materials, training, and other resources to address various student mental health and well-being issues slightly lower than those who report at least one policy. In the global sample, about 55% of responses among those principals who report no MOE policies identify particular resources as "very important," compared to about 45% in the Canadian sample.

Figure 4 (a). Existence of Canadian MOE policies (presumably at the provincial level) to address health and mental health among students and staff through schools; global data are provided in parentheses

Policy	Yes	No	Don't Know
Student Health Through Schools	61.7% (74.1%)	27.0% (14.1%)	11.3% (11.9%)*
Student Mental Health Through Schools	32.6% (55.4%)	44.7% (27.7%)	22.7% (16.8%)*
Teacher Health Through Schools	22.7% (33.5%)	53.2% (42.8%)	24.1% (23.7%)*
Teacher Mental Health Through Schools	21.3% (34.8%)	53.2% (41.7%)	25.5% (23.5%)*

* differences are not significant

Figure 4 (b). Canadian principals' ratings of importance of having educational tools, materials, and other resources to address various student emotional/mental health and well-being issues by the number of total policies



Voice from the field

"What would be most useful is a coordinated effort from all levels of government to work together to address the needs exhibited in the community. Ministries of Education, Social Services and Health must together come up with not just policies, but actual programs and bodies that are easily accessible and available, especially in areas with demonstrably high needs."

5. Impact of student family income

Student family income level does not affect the average ratings of importance that principals place on student or staff issues. Lower income levels are associated with Canadian principals' ratings of importance for resources to address several issues, including knowing how to create effective linkages between schools and mental health services and support as well as creating a whole-school approach to address mental health and well-being.

Compared to the global sample, there are slightly more principals serving in schools with lower middle class student family income levels and slightly fewer serving in those with low income or families in poverty.

Figure 5 (a) illustrates that Canadian principals' average ratings of imporance for student emotional/mental health and well-being issues are relatively unaffected by student family income level. The global dataset shows a clearer trend, where principals serving in schools of lower student family incomes report higher ratings of importance for student issues.

Principals also rated the importance of having additional educational materials, training, or other resources to address a variety of specific emotional/mental health and well-being issues. As in the global dataset, several of these issues show associations with student family income level, as shown in Figure 5 (b). Canadian principals serving in schools with lower student family incomes report higher ratings of importance for resources for issues such as "creating effective linkages between schools and mental health services and support" and "creating a whole-school approach to address mental health and well-being".

Figure 5 (a). Canadian principals' mean ratings of importance of emotional/mental health and well-being issues for students and staff, by student family income level

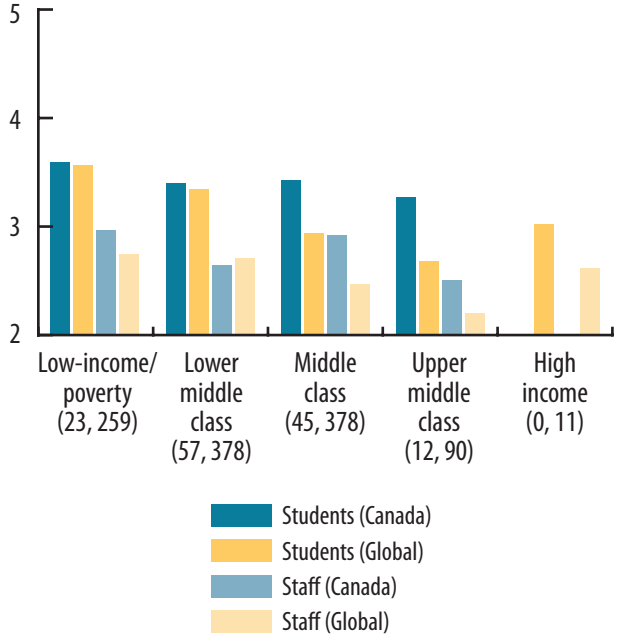
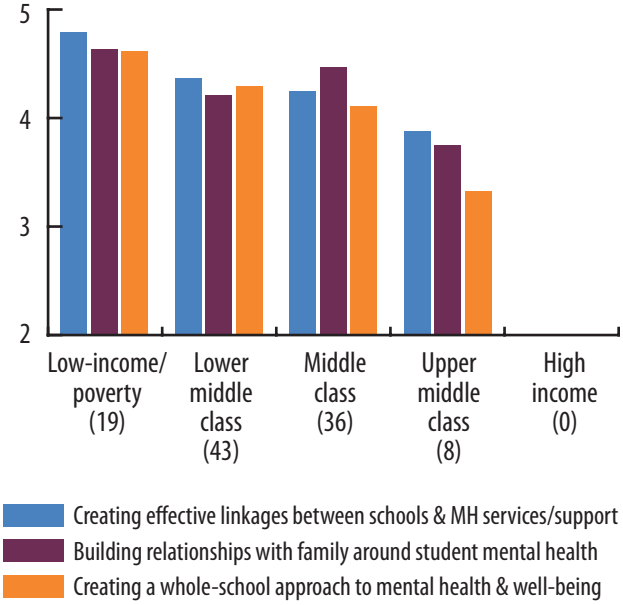


Figure 5 (b). Canadian principals' mean rating of importance of educational materials, training, and resources to address specific issues, by student family income level



Voice from the field

"This is a hugely neglected area and despite children's Ministries and [groups like] Children's Aid Society, in impoverished areas children are disregarded and forgotten. If someone took notice they'd actually be compelled to do something about it; much is only about politics, not action."

6. Need for resources and materials

Principals want resources, training, and materials to address eight critical areas of a whole-school approach, including support to students and families in distress, effective promotion and prevention strategies, and teaching emotional and social learning skills. Principals report that training programs and materials for their staff (especially in the form of DVDs/videos and Web-based courses), as well as exchange with other principals and experts, would be most useful.

When Canadian principals were given a series of types of materials or resources and asked to indicate how useful they believed each to be to address emotional/mental health and well-being issues among their students and staff, respondents report that all except a dedicated column in national association newsletters would be "useful" to "very useful." Still, principals give consistently lower ratings when compared to the global sample, if only slightly lower.

In all, respondents feel that training programs and materials for school staff, videos and DVDs, and web-based resources and publications would be the most useful (3.73, 3.73, and 3.52, respectively). Depending on a school's typical way of providing professional development, it seems that a variety of formats would be useful. Figure 6 (a) provides the average ratings for the list of formats offered. When offered a list of issues for professional development and training that principals might want, they gave an average rating of 4.00 or higher on a 5-point scale to eight different issues, illustrated in Figure 6 (b), ranging across the continuum from basic understanding of risk and protective factors to how to provide student and family supports for more serious problems. Consistent with Finding 3, principals report that "developing specific mental health policies for staff" is of lower concern (3.59) to them than are other issues.

Figure 6 (a). Canadian principals' average ratings of usefulness of various professional development and educational materials and resources (1 = Not Useful, 5 = Very Useful)

Type of material or resource	Canada rating	Global rating
Training programs and materials for school staff	3.73	3.96
Videos, DVDs	3.73	3.58
Web-based resources and publications	3.52	3.47
Web-based course or interactive web-based learning material	3.51	3.41
Exchange with principals & experts from your country	3.29	3.52
Print, how-to manual	3.06	3.27
Exchange with other schools and experts internationally	3.05	3.37
Dedicated column in ICP/National Association newsletters	2.40	2.70
AVERAGE*	3.29	3.41

* difference is not significant

Figure 6 (b). Canadian principals' average ratings of issues of greatest importance to be addressed through training, educational materials, and resources (1 = Not Important, 5 = Very Important)

Issue or topic	Canada rating	Global rating
Student and family supports for those with more serious problems	4.70	4.42
Program/strategies to teach students emotional and social learning skills	4.40	4.31
Knowledge of effective promotion/prevention strategies & their implementation	4.38	4.31
How to create effective linkages between schools & MH services/support	4.37	4.15
Building relationships with family members around student mental health	4.34	4.16
How to make early identification of symptoms of mental health problems	4.33	4.25
Creating a whole-school approach to emotional/mental health & well-being	4.24	4.20
Basic understanding of risk & protective factors for mental health & well-being	4.11	4.15
Knowledge of prevalence & nature of common mental illnesses in kids	3.99	4.00
Integrating emotional/mental health & well-being into school policy/mission	3.92	3.94
Research on link between emotional/mental health & academic performance	3.91	3.94
Stigma & discrimination related to mental health & how to overcome them	3.88	3.87
Developing specific mental health policies for staff	3.59	3.74
AVERAGE*	4.16	4.05

* difference is not significant

Conclusion and recommendations

The Principal's Survey offers data from a small sample of Canadian principals to begin to understand the issues they see in student and staff emotional/mental health and well-being. The Canadian sample differs from the global sample in several ways: an even greater proportion of respondents are female principals (67% versus 57%, respectively) and a larger percentage have only 1-3 years of experience (61% in Canada compared to 36% in the global dataset). The survey results indicate the importance that principals give to the issue of emotional/mental health in relation to academic performance, the high number of students in need of services, and specific areas to address for professional development. These findings are reported in the context of recent trends over the past twenty years in Canada with respect to the growth of school health promotion and a more recent, growing emphasis in mental health among children and youth.

There are a number of findings within the Canadian data that illustrate different perceptions, policies, programs and practices compared to the global data. First, while Canadian principals identify many of the same major student and staff issues as in the global dataset, they rate them higher in importance. Still, these higher average ratings of importance for student emotional/mental health and well-being issues are relatively unaffected by student family income level. Despite higher ratings of importance, however, Canadian principals report the existence of fewer Ministry of Education policies (presumably at the provincial level) to address student and teacher general and mental health through schools.

The findings provide valuable guidance to ICP, Intercamhs, and other Canadian organizations and professionals for identified follow-up activities. Advocates and others concerned with school mental health should, through these findings, be encouraged to work in close collaboration with principals, researchers, and policy makers to enact more progressive educational policies that use a whole-school promotion and prevention approach and place emotional/mental health and well-being of students and staff higher on the educational agenda. Additionally, these data indicate that Canadian principals agree that more child mental health services based in, or linked with, schools are needed. Moreover, recognizing the school as a workplace and addressing teacher mental health and well-being is an essential step in a comprehensive response.

The data suggest that professional development events, tools, training, and other materials must be developed and made available at the school level. To this end, experience shows that educators and organizations committed to improving child and adolescent mental health are being supported by global knowledge exchange over the internet for reach, delivery, and learning. By capitalizing on new distributed learning technologies for training and expertise, international professional associations can focus on issues of highest need across all income areas. These data can be used as a foundation from which policy makers and educational leaders can work in partnership to achieve positive mental health and enhanced academic outcomes of students in Canadian schools. Specifically, it is recommended that:

- organizations providing educational leadership in Canada use the findings to foster discussion of the issues and findings provided in an effort to advocate for, and plan next steps toward, putting in place needed and effective policies and programs related to school mental health.
- organizations involved in school mental health in Canada work at the national level to connect with Intercamhs and ICP, through their Interconnexions project, in providing more educational resources and training activities for school leaders through newsletters, conferences, web sites, and other means.
- Intercamhs and ICP work to develop a specific plan of action to secure funding that will support development of the needed education and training materials identified through this survey to be adapted and used globally.
- educational and children's mental health organizations in Canada publicize these results broadly within Canada to enhance awareness and dialogue, while working to develop a shared language and agenda for school mental health in Canada to support action for change.

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Appendices

Appendix I: ICP and Intercamhs collaboration

What is ICP?

The International Confederation of Principals (www.icponline.org) is the only global school leaders' umbrella professional organization. Its members are the national associations of school leaders. It has developed a purposeful network that develops and encourages opportunities in an inclusive, affiliated democratic manner. The Confederation is non-political and non-sectarian. Its vision is to link and support the international community of school principal organizations to enhance their members' learning and the life opportunities of their students.

What is Intercamhs?

Intercamhs (www.intercamhs.org) is the first and only global organization that promotes the international exchange of ideas and experiences and acts as a forum for researchers, policy makers and practitioners in education and mental health to advance initiatives that benefit the well-being of young people. The primary constituents of Intercamhs are the current 300 members with varying disciplinary backgrounds, as well as the international organizations which collaborate to offer symposia. The Health and Human Development Division (www.hhd.org) at Education Development Center, Inc., serves as Secretariat to Intercamhs. EDC is an international non-profit organization dedicated to enhancing learning, promoting health, and fostering a deeper understanding of the world.

What is the Interconnexions Project?

In 2007, the two organizations joined together to "take actions so schools around the world will increasingly understand the value and importance of teacher and student mental health to successful learning and adopt policies and programs that address the continuum from mental health promotion to prevention of disorders and early intervention." The agreement to collaborate was based on the recognition that the advocacy of principals in this area is critical to change. Additionally, when trained, school staff can recognize student problems early, gaining the necessary services for students and their families to prevent and reduce later harm. By creating positive environments, schools can foster emotional and mental health and well-being among their students and staff. Through partnerships among practitioners, educators, policymakers and academics, the positive linkages between health and education can be strengthened.

Appendix II: Discussion questions

Finding 1: The link and those in need

1. What evidence do you see of this link in your school or country? Do others of your staff, your community, and your policy leaders also see the link?
2. What steps can principals take to increase awareness among policy makers, staff, union leaders, parents, mental health providers, community leaders, others? Why is it critical to do so?
3. How do your own countrywide estimates of students requiring prevention or intervention services compare to the survey estimates?
4. What services are available in your school or country? Needed?
5. What different types of programs are needed for all students?

Finding 2: Major student issues

1. Are these issues similar to your experience? If so, in what ways?
2. Are there other issues you see? What are some similarities or differences between the table in Figure 2a and the pie chart in Figure 2b?
3. What actions are you presently taking or might you want to take to address the issues you face?
4. What are a few of the most effective, research-based strategies you know of for specific issues?
5. Where can you turn for assistance and resources?
6. Are these issues common in your school? What role do you think stigma about mental health plays in terms of awareness of mental health problems, identification and diagnosis of those in need, and access to services? How can principals combat stigma?
7. Given the range of issues principals must address, how can student mental health become a higher priority?

Finding 3: Major staff issues

1. Does the ranking of issues above reflect what you see as the major staff issues? If not, what is different and why?
2. What are some similarities or differences between the table and the pie chart in Figure 3?
3. What is the importance and likely effect of these staff issues on the educational system? On students? On the quality of teaching and learning?
4. Who is responsible to address staff emotional and mental health and well-being? How and in what way might an effective response be designed?
5. Is stress adequately appreciated as an emotional/mental health concern among the staff and administration at your school?
6. What kind of resources might be needed and available to address these issues for staff?
7. Given the range of issues principals must address, how can staff mental health become a higher priority?

Appendix II: Discussion questions (continued)

Finding 4: Ministry of Education policies

1. What are the positive and important components of existing policies pertaining to emotional and mental health? How might they be strengthened?
2. What can principals and others do to influence and advocate for regional or national policy concerning staff emotional and mental health?
3. What can principals do at the school level to adopt policies in the absence of a national response?
4. Why is it important to address teacher health and mental health? Why might teacher emotional/mental health and well-being not be perceived as important for education policy makers? How can this situation be changed?
5. Who should take the lead? What can principals, teachers' unions, teachers, and others do to put teacher emotional/mental health and well-being on the national education policy agenda? Who needs to be involved? What would be the best points of leverage for change?

Finding 5: Impact of student family income

1. In your school, what role does family income level play in terms of student emotional/mental health and well-being, academic achievement, and the need for educational materials, training, and other resources? How do the specific issues listed in Figures 4 (a) and (b) align with problems you see in your school and where you feel resources would be best directed?
2. What policy changes at the national or school level could have a positive effect on student and families living in poverty, with benefits to their emotional and mental health?
3. What types of support programs and services could be of immediate help to students in low-income neighborhoods? How can community leaders and non-governmental organizations be involved?
4. What additional types of support might be made available to staff who are dealing with more acute needs of low-income/poverty students and families?

Finding 6: Need for resources and materials

1. Among the identified issues and formats, which are the most important for you and where will you dedicate attention?
2. How can you best use current or new professional staff development opportunities for principal and staff development on these issues? What formats would you prefer?
3. What professional associations, non-governmental organizations, universities or local mental health or social service agencies can you access and partner with to provide needed professional development on student/staff well-being, emotional and mental health?
4. Given the issues identified for staff, what formal and non-formal supports can the principal and others create to alleviate their stress, anxiety, and depression?
5. What actions can country affiliates of ICP play to place this issue higher on the agenda for ICP delivery of events and materials and resources?
6. Have you visited the Intercamhs website (www.intercamhs.org) to find resources there? What else might be needed?

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