

Mental Health Education in Schools



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Mental Health Education in Schools

Overview

Mental Health Education Law

The Mental Health Education Bill reads as follows;

Sec. 11. **[120B.21] MENTAL HEALTH EDUCATION.**

School districts and charter schools are encouraged to provide mental health instruction for students in grades 6 through 12 aligned with local health standards and integrated into existing programs, curriculum, or the general school environment of a district or charter school. The commissioner, in consultation with the commissioner of human services and mental health organizations, is encouraged to provide districts and charter schools with:

(1) age-appropriate model learning activities for grades 6 through 12 that encompass the mental health components of the National Health Education Standards and the benchmarks developed by the department's quality teaching network in health and best practices in mental health education; and

(2) a directory of resources for planning and implementing age-appropriate mental health curriculum and instruction in grades 6 through 12.

EFFECTIVE DATE. This section is effective the day following final enactment.

This bill is encouraging schools to provide mental health education in health classes to middle and high school students. This includes age-appropriate models to learn from that meet the National Health Education Standards and provide the best practices for mental health education. NAMI Minnesota supports the logistics of this law, and will provide several modules that we have researched and supported for mental health education in middle and high school health classes.

Objective

The purpose and goal of this document is to provide a variety of mental health curricula that, which allow for middle and high school students to learn effectively about mental health and mental illnesses within their health education classes. The goals that are laid out by the Mental Health Education Bill (above) that passed into law during the 2013 legislative session. These suggestions have varying costs, intensity, lengths and depth.

Breaking the Silence

Breaking the Silence is a curriculum for middle and high school students created by NAMI Queens/Nassau. It meets the National Health Education Standards. The program comes with three different packets with several classroom activities for upper elementary, middle school and high school students.

They advertise that the program's "Innovative lessons put a human face on mental illness and confront the myths that reinforce the silence." and that "Just one lesson on mental illness could make all the difference in the lives of young people whose lives have been thrown tragically off course by no fault brain disorders such as, Major Depression, Bipolar Disorder, Schizophrenia, Obsessive Compulsive Disorder and Panic disorder."

Students Learn:

- Biology, not a character flaw, causes mental illness
- Mental Illnesses have never been more treatable
- Warning Signs
- How to overcome stigma

Easy to Use:

- For upper elementary, middle school, high school
- Fully scripted lessons and suggested activities
- Eye catching posters and board games
- Plans can be used for one day or extended
- No prior knowledge of the subject required

This curriculum has the ability to be tailored to the teacher's needs, since it can be taught in one or more days, which is up to the teacher's discretion. This allows for students to have a basic understanding of mental health, reducing stigma and warning signs, and some of the most important aspects that middle and high school students need to know. In the sample lessons provided on the website and attached to this document, we can clearly see that the lessons are interactive, provide great information, real life stories and lets the students evaluate for themselves what mental health involves.

All Information provided and lesson plans can be found on the Breaking the Silence website; www.btslessonplans.org

HECAT: Module MEH Mental and Emotional Health Curriculum

The Center for Disease Control and Prevention (CDC) has put together a module for mental and emotional health in their Health Education Curriculum Analysis Tool (HECAT). The module and the entirety of the HECAT meet the National Health Education Standards as well as CDC's Characteristics of an Effective Health Education Curriculum.

CDC's website explains, "HECAT results can help schools select or develop appropriate and effective health education curricula and improve the delivery of health education. The HECAT can be customized to meet local community needs and conform to the curriculum requirements of the state or school district." The curriculum also has several other useful features:

- Guidance on using the HECAT to review curricula and using the HECAT results to make health education curriculum decisions;
- Templates for recording important descriptive curriculum information for use in the curriculum review process;
- Preliminary curriculum considerations, such as accuracy, acceptability, feasibility, and affordability analyses;
- Curriculum fundamentals, such as teacher materials, instructional design, and instructional strategies and materials analyses;
- Specific health-topic concept and skills analyses;
- Customizable templates for state or local use;
- Summary score forms for consolidating scores from the review of a single curriculum and for comparing scores across multiple curricula.

All of these tools are provided on the CDC website. The specific mental and emotional health module "contains the tools to analyze and score curricula that are intended to promote mental and emotional health."

There are eight Healthy Behavior Outcomes (HBO) that are focused on in this module, these shape the module so that teachers are able to decide which ones they would like to focus on. HBOs, A pre-K–12 mental and emotional health curriculum should enable students to:

- Express feelings in a healthy way.
- Engage in activities that are mentally and emotionally healthy.
- Prevent and manage interpersonal conflict in healthy ways.
- Prevent and manage emotional stress and anxiety in healthy ways.
- Use self-control and impulse-control strategies to promote health.
- Get help for troublesome thoughts, feelings, or actions for oneself and others.
- Show tolerance and acceptance of differences in others.
- Establish and maintain healthy relationships.

This curriculum can be reviewed and used to meet what teachers would like to focus on while teaching their students about mental and emotional health. This would not require any additional purchases, and will leave much to the teacher in order to provide the script for the curriculum provided. Overall, this clearly lays out the topics that NAMI Minnesota supports and believes are important for middle and high school student for understanding mental and emotional health, as well as fulfilling the National Health Education Standards and the requirements of this bill.

All information provided at the CDC website for HECAT;
<http://www.cdc.gov/healthyyouth/HECAT/faq.htm>

Making Sense of Mental Health: Past and Present

The U.S. Library of Medicine's National Institute of Health has put together curriculum for high school students, grades 9-12, in three 40-minute class periods that help students learn about mental illness. This curriculum helps students understand mental illness, treatment and warning signs. All information is online and free. Links and documents included.

The curriculum is described by the U.S. Library of Medicine, as a lesson plan that is “prepared to increase the awareness of several mental health disorders. The plan provides team-based activities and a research project for students in three class periods. “In Class 1, students explore the depictions of symptoms, treatments, and causes of a mental illness in ‘The Yellow Wall-Paper,’ a short story written in late 1800s by Charlotte Perkins Gilman. Students move from the past and fiction to the present in Class 2 as they work in teams to research and gather information on a specific mental health disorder in preparation for creating a poster for the third class. In Class 3 students display their posters as well as view other teams’ posters to share information and to raise awareness of various mental health disorders.” This lesson plan also meets the requirements of the National Health Education Standards that have been outlined by the federal government.

Learning Outcomes of “Making Sense of Mental Health,” students will be able to:

- Describe common symptoms of depression and several other mental health disorders.
- Identify possible causes and available treatments for depression and other mental disorders.
- Locate resources in one's community and on the Internet for information and ^{[[[]]]}_{SEP} services regarding prevention strategies for depression and other mental health disorders.
- Evaluate criteria for reliability of health information web sites.

This curriculum provides links, documents and a laid out lesson plan for three class periods. There are a couple links that no longer work, so teachers may want to find other resources for students. There is also an option for continuing this project further and obtaining more information. With students making their own presentations they are able to understand for themselves what the warning signs and treatments are for mental illness, as well as doing so without stigma towards the illnesses. The module allows for teachers to have a laid out lesson plan for each day or the option to customize it to meet the classroom needs. Allowing for this tailoring and leaving some work up to the students, makes for the classroom to learn effectively about mental health. Overall, this curriculum provides all aspects of the Mental Health Education Law into classroom practice for middle and high school students.

All information can be found at the U.S. Library of Medicine's National Institute of Health's website:

www.nlm.nih.gov/exhibition/theliteratureofprescription/education/lessonplan.html#class2

Alcohol Literacy Challenge

This curriculum comes from the Substance Abuse and Mental Health Services Administration (SAMHSA) and focuses mainly on alcohol use of High School and College students, working to reduce the high quantity and frequency of this alcohol use. It is a single day unit that can be taught to students, and address the misconceptions that student may have about alcohol.

SAMSHA explains that this curriculum offers “The intervention, which requires 90 minutes for the high school version and 50 minutes for the college version, [and] can be incorporated into an existing course (e.g., health education) and implemented in one or two class periods. Because the intervention is designed to challenge the unique expectancies of each participating student, it can be used across different populations and cultural groups.”

The course can be taught across adolescence and young adults as well as all different cultural groups makes it very usable for teachers to incorporate into their lesson plans. This curriculum has been tested and researched when put into implementations of schools around the United States. The results show that this is an effective way to inform students about alcohol and cut down of alcohol use. The lesson includes watching advertisements put out by alcohol companies. Students then deconstruct them and learn how they portray alcohol falsely.

Students Learn:

- About standard drinks
- The range of alcohol expectancies
- The difference between pharmacological effect and placebo effects
- The powerful effect of advertisements and their false portrayal of alcohol use

The curriculum is provided by SAMHSA and requires teachers to receive a 5-hour training in order to teach it in their classroom by providing all of materials that teachers will need. There is cost for the training and materials that SAMHSA requires. The cost break down is included in the summary attached to this document. Overall, this curriculum looks at substance abuse and the psychological effects that it can have on an individual when misused.

To read SAMHSA’s review, go to <https://alcoholliteracychallenge.com/images/pdf/ALC-Program-NREPP-Summary-.pdf>

To order the program, go to <https://alcoholliteracychallenge.com/>

Preventing Suicide: A Toolkit for High Schools

Suicide is among the top ten leading causes of death in the United States and males aged 15-25 are 5 to 6 times more likely than females of the same age group to complete a suicide attempt.^{1,2} In order to help middle and high school students recognize the symptoms of these deaths in their peers several organizations have developed programs to assist teachers.

This free resource, created by the Substance Abuse and Mental Health Services Administration (SAMHSA), is replete with information to build an entire suicide prevention system within high schools. It includes a list of resources for teachers to include curricula in their courses regarding suicide, its causes, and its prevention. It provides information for administrators and counselors as well should the suicide curricula reveal students who are in need of assistance.

In chapter 6 of this toolkit there are rich resources listed for the teacher to access that enhance access to the curriculum for the students. Each resource is designed for designated grade levels and provides information about the training or resources needed to carry it out. Many of the materials are culturally sensitive and evidence based. Culture may determine the presenting signs or symptoms of suicide and is important so that students do not feel that the curriculum was written for someone else. Other tools are provided as peer resources and build peer relationships as “most youth who are suicidal talk with peers about their concerns rather than with adults.”

SAMSHA recommends teachers choose and modify one of the existing suggested programs in the toolkit, based on the population being served. This allows teachers and their material to remain relevant. The curriculum choices for students include a range from one hour single session courses for the general student body to 75 session courses for high-risk youth.

There is some basic information that will remain constant. Students will learn:

- Risk factors and warning signs
- Prevention factors and management of emotional stress
- Basic data on depression and suicide
- Resources for assistance, including accessing resources through social media
- How to respond to someone who is depressed or suicidal

As shown earlier, the CDC has resources for evaluating the efficacy of programs that teach about mental and emotional health. This evaluation tool will be helpful for teachers in selecting which program to use and how well it communicated the information to student

¹ <http://www.afsp.org/understanding-suicide/facts-and-figures>

² <http://www.nimh.nih.gov/health/publications/suicide-in-the-us-statistics-and-prevention/index.shtml>

Ending the Silence

The National Alliance on Mental Illness (NAMI) has developed a program called “Ending the Silence.” Finding that stigma is the number one reason people do not report concerns about mental illness, NAMI has been a leader in raising awareness and reducing stigma. The most effective stigma reduction technique is sharing personal stories. Individuals who struggle to maintain their mental health after a period of being more acutely ill share their stories as examples of success despite mental illness.

Ending the Silence is a volunteer run education program for middle and high schools that originated in the Chicago area and has shown efficacy in helping students ask for and find mental health assistance. NAMI has also developed a website that advertises the services that the program provides as well as providing more information about mental illness to students, teachers and parents that access the website. The website is user friendly, approachable, provides information for people seeking to bring the Ending the Silence program to their location, and information on how to become a volunteer.

Students have also contributed to the website in a further effort at stigma reduction. Students being able to hear from their peers increases their ability to empathize with the experiences and see how they relate to their lives, what help they might need, and how to best seek that for themselves.

Through Ending the Silence a presenter from NAMI will come to the school and present on the topic of mental illness. Someone who has experienced and recovered from mental illness will also present about their struggle and recovery process with mental illness. Through this program students will learn:

- Identifying gross symptoms of mental illness
- Differences between major classifications of mental illness
- Resources for people with a mental illness
- Stigma reduction education

All information for the Ending the Silence program can be found at <http://www.endingthesilence.org/>

You can request an Ending the Silence class through NAMI Minnesota at <https://namimn.org/education-public-awareness/request-a-presentation/>
[Creating Opportunities for Personal Empowerment: Thinking, Emotions, Exercise, Nutrition Program \(COPE TEEN\)](#)

Creating Opportunities for Personal Empowerment: Thinking, Emotions, Exercise, Nutrition Program (COPE TEEN)

COPE TEEN is a program built for teachers that is modeled after the Cognitive Behavioral Therapy (CBT) model that is a gold standard for effective treatments. The National Institute of Health has found that this course, delivered by health education teachers to 14-18 year olds, has had sustained effects on students' abilities to cope with stress, improve social functioning, and problem solving.

There are several portions of the program that showed positive effects and did so with large groups that were culturally diverse, showing that this program could be effective in Minnesota's more diverse schools. An exercise portion of the program showed lower obesity rates and increased activity for students who participated, measure by a pedometer. Rates of depression also decreased for students enrolled in the program, as did alcohol use rates. While still unsure of the impact on students overall academic performance, COPE TEEN positively affected teens' health class grades, outperforming peers who did not participate in COPE TEEN.

Materials to implement this program are forthcoming; schools and their administrators should continue to be aware of health programs that could affect their student body for the better, improving student health and performance. COPE TEEN is a promising prospect and has already been manualized, and so once made accessible to the public will be a valuable resource.

Materials can be purchased at <https://www.cope2thrive.com/cope-in-the-classroom>

Suicide Prevention Resource Center (SPRC)

The SPRC is the only federally supported resource for suicide prevention and is supported by the surgeon general. Their goal is to provide resources and training to practitioners and others who are in positions of likelihood of facing people at higher risk of suicide. The SPRC includes an information and resource page for teachers.

The resource is a first point of contact for teachers to learn about their role in suicide prevention. It provides information for educators about how to intervene broadly and with their individual students. The resource sheet provides information for teachers on what indicators there may be for an increased risk and differentiates this from priority risk factors that need immediate intervention. Students who are at risk or who have lost friends or family to suicide need particular attention and careful conversation and the SPRC fact sheet for teachers provides helpful hints for educators facing these challenges. As mentioned about other resources, being culturally sensitive about how students react to and perceive suicide becomes more and more relevant and this resource opens the door to that cultural competence.

The SPRC website is replete with information that could be used by teachers and other educators or school counselors who should not feel limited by the resource developed for teachers. At the end of this resource there are many other resources recommended for teachers, some of which have been discussed above (e.g. Preventing Suicide: a toolkit for high schools). Like the Preventing Suicide toolkit, it also recommends resources that will be specific to educators needs so as to provide resources relevant to the specific challenges of each educator.

The SPRC resource for teachers can be found here:

<http://www.sprc.org/sites/sprc.org/files/Teachers.pdf>. To find the wealth of information that the SPRC provides please visit their website at <http://www.sprc.org/>.

Mental Health for High School Curriculum Guide

This is a curriculum of six lesson plans to help teach high school students about mental health and mental illness. Topics include the stigma behind mental health, the different types of mental illnesses, and how to get help. The program spends time emphasizing the difference between a mental illness and the mental distress experienced from day-to-day events. It starts by asking students about what stigma is and the types of stigma we see in mental health. Students then learn myths and facts about mental illness and how those myths perpetuate that stigma.

The *Mental Health for High School Curriculum Guide* incorporates a variety of learning styles and mediums. It uses a mix of PowerPoint presentations, videos, small group discussion, games, whole-class discussion, and jigsaw activities in order to engage students in various ways to learn about mental health and mental illness. The curriculum also comes with resources for teachers and students, such as a glossary of terms, a Teacher Knowledge Update, and links to other websites that may be helpful for students and teachers.

The curriculum states that the “Mental Health and High School Curriculum Guide (the Guide) is the only evidence based mental health curriculum resource that has been demonstrated to improve both teachers’ and students’ mental health literacy through usual teacher education and application in the classroom in a variety of program evaluations and research studies in Canada and elsewhere.” They define mental health literacy as having four components:

1. Understanding how to optimize and maintain good mental health
2. Understanding mental disorders and their treatments
3. Decreasing Stigma
4. Enhancing help-seeking efficacy (knowing when and where to get help and having the skills necessary to promote self-care and how to obtain good care)

This curriculum was written for Washington State, so teachers may need to change a few statistics and resources to be relevant to Minnesota. Other than that, it is ready for teachers to use with all its resources, assessments, handouts and homework accessible to teachers.

To view the *Mental Health and High School Curriculum Guide*, go to <http://teenmentalhealth.org/schoolmhl/wp-content/uploads/2019/01/final-washington-guide-full-online-version.pdf>

Signs of Suicide (SOS)

This is a one-day suicide prevention class with a version for middle school students and a version for high school students. It generally entails watching videos about suicide prevention and then having a whole-class discussion about the videos. The videos show youth coming into contact with peers displaying warning signs of suicide or depression. They show common well-intentioned but ineffective methods of helping people, such as changing the topic or telling the person to look on the bright side, and then explain why these strategies often do not help. They then show the youth implementing the A.C.T. strategy (Acknowledge, Care, Tell) to connect their peer with an adult for help. They also show discussions by adolescents about different mental illnesses, as well as an interview with a counselor.

SOS is a self-contained curriculum, meaning no extra training is required to implement it. However, there are trainings for teachers to help them with implementation and discussions on suicide if they so choose. The subscription can be purchased for an entire school and lasts a year.

Suicide Prevention Resource Center (SPRC) lists SOS as a “Program with Evidence of Effectiveness.” It showed to be “Promising” for helping with suicidal ideation and behavior and “Promising” for Knowledge, Attitudes, and Beliefs About Mental Health.

For more information about the SOS curriculum, go to <https://www.sprc.org/resources-programs/sos-signs-suicide>. To order SOS, go to <https://www.mindwise.org/what-we-offer/suicide-prevention-programs/>

Discover Your Happy curriculum from LG and Discovery Education

This is a curriculum that is designed to help 7th-12th grade students boost their happiness through teaching them about the Six Sustainable Happiness Skills. These skills are Mindfulness, Human Connection, Positive Outlook, Gratitude, Purpose, and Generosity. The website offers various lessons, activities, and videos related to these six skills, as well as a four-day unit.

The four-day unit is called This is Your Brain on Happiness digital lesson bundle and goes into depth on each of the Six Sustainable Happiness Skills. For each skill the students learn what the skill is, the brain science behind the skill, and a way of practicing this skill. Students will also learn how to use these skills to cope with the stress they face every day as adolescents and the health benefits each skill provides. At the end of the unit, students will come up with projects to help educate the rest of the school about these six skills.

Each lesson contains various teaching strategies to accommodate the diverse learning styles in the classroom. It uses a combination of whole class discussion, small-group discussion, Think-Pair-Share, and individual reflection. The curriculum also mixes PowerPoint slides with videos, writing, and group projects. Each skill has an activity that shows how students can incorporate that skill into daily life.

The lesson plans come with a PowerPoint presentation and handouts. Teachers may need to check over slides ahead of time as some of the text-boxes shift in the downloading process. Though this curriculum has not been evaluated for being an evidence-based practice, its content is based on research related to happiness and aligns with national health standards.

For more information on Discover Your Happy go to <https://www.learnexperiencehappiness.com/about>

For curriculum and materials, go to <https://www.learnexperiencehappiness.com/educators>

Can We Talk? Mental Health Lesson Plans

This is a series of lesson plans that cover various mental health related topics. Some lessons are designed for middle and high school students, while some are designed only for high school students, for middle school students, and there are a few lessons for elementary school students. Topics for middle and high school students include the stigma of mental illness, stress management, and positive self-talk. Topics for elementary-aged students include resiliency and positive self-talk.

The first lesson on stigma focuses a great deal on knowledge of mental illness and the stigma that comes with having a mental illness. The rest of the lessons focus more on skills to maintain good mental health, such as managing stress. One take-home activity for high school students is a Mind Tracker. This is a chart where students can record their moods, self-care exercises such as sleeping, and negative coping strategies such as drugs and alcohol. This helps students see patterns in their moods and behaviors, and hopefully helps students see how good self-care affects their moods. The point of this exercise is to help students identify if they need help from a trusted adult and then students can use it to show the adult what has been happening throughout the week. A take-home activity for middle school students is Stress Management Bingo, which is a bingo sheet with various stress management strategies, and students mark off when they complete a strategy.

A skill that is taught to all three age groups is positive self-talk. In the middle and high school activity, students come up with personal examples of when they have used each of the eight different types of negative self-talk, write about their feelings when they made that kind of self-talk, and then find ways to rework their thinking to create positive self-talk. For elementary-aged students, each student thinks of a time they said “I can’t do _____” and then write down what their feelings were and how that thought made them behave. They then talk about when they told themselves “I don’t need to be perfect at _____” and how that changed how they felt and how they behaved.

This curriculum does not appear to have been evaluated yet for Evidence Based Practices, but the lessons and skills it teaches aligns with health standards and teaches students how to live healthy lives. This curriculum was created in Canada, so teachers may have to change some statistics and resources to be more Minnesota-specific.

To access **Can We Talk? Mental Health Curriculum**, go to <http://canwetalk.ca/wp-content/uploads/2016/03/COOR-791-2016-03-CWT-lesson-plans.pdf>

Minnesota Association for Children’s Mental Health (MACMH) Classroom Activities

This is a series of five lessons that can be spread out throughout the school year to teach mental health related skills. The target audience is elementary-age students, but the lessons do list some suggestions on how to adapt the lessons for older students.

The first lesson called “Getting to Know You” talks about similarities and differences between different children. It talks about viewing differences as being unique in order to help build positive self-esteem and self-identity. It also teaches about how even though someone may seem very different from oneself, there are still plenty of similarities. The emphasis with this part is to not just look at a person with a mental illness as “different,” but to see that this person actually has plenty similarities with the other children in the classroom.

The second lesson called “How Are You Feeling” teaches students about empathy. Being able to understand one’s own emotions and the emotions of others, and then to be able to talk about it, is crucial to good mental health. These skills also cover important Minnesota Health Benchmarks for elementary-age students. The third lesson called “It’s All in your Viewpoint” teaches about seeing things from other people’s perspectives and learning how to come to agreements when views differ. Being able to take on new perspectives helps children reframe what may seem to be negative situations into more positive ones. Being able to see other people’s perspectives helps students to think more flexibly and problem-solve collaboratively.

The fourth lesson plan called “Simon’s Hook” teaches about how to handle teasing. Teasing and bullying can present many mental health challenges, so this is a great lesson to help students learn how to deal with these situations. The skills taught in this lesson also can be applied to other mental health resiliency skills. There is a big emphasis on focusing on what one can change for oneself in negative situations, instead of waiting for the situation to change or for other people to change. Learning to change one’s own perspectives and actions instead of complaining about the actions of others is an important skill to promote good mental health.

The fifth lesson called “Tools of Friendship” talks about what students look for in a friend. The class then discusses what traits might make it hard to be friends with someone. They then discuss common traits of mental illnesses, and how students should look past these and see those deeper traits that students said they look for in finding a friend. This lesson appears to require students to have some background in mental illness before the discussion as it addresses the idea of mental illnesses directly.

These lessons all use a variety of teaching styles such as whole class discussions, small group discussions, read-alouds, and various art projects. The lessons also come with additional

activities that a teacher can use to supplement the lesson. These lessons have not yet been evaluated for Evidence Based Practices, but they do help cover interpersonal skills and health-enhancing behaviors required under the National Health Education Standards.

To view the lesson plans, go to <https://www.macmh.org/open-up-magazine/classroom-activities/>

Linking Education and Awareness of Depression and Suicide (LEADS)

This is a curriculum created by SAVE (Suicide Awareness Voices of Education), a nonprofit based in Minnesota. The curriculum comes with a teacher's guide book, handouts, and presentations. It provides three hours of lessons that are broken up over three days. It starts by introducing the concept of depression as a medical illness and has students examine the difference between depression and simply "having the blues." It then teaches about the warning signs of suicide and finishes the unit by teaching about where to go for help and having students do a project to raise awareness of suicide.

LEADS is designated as a "Program with Evidence of Effectiveness" under Suicide Prevention Resource Center (SPRC). According to its National Registry of Evidence-Based Programs and Practices (NREPP) review, students who went through the LEADS program were more likely to consider depression a medical illness and more likely to be able to name at least five resources for suicide prevention than the control group. There was a follow-up study three months later that showed that students were able to retain the knowledge they had gained from the LEADS program.

LEADS incorporates various learning styles to meet the needs of all students in the classroom. It combines PowerPoint presentations with small-group discussion, individual work, and group projects. It also includes an optional assessment for the end of the unit if teachers wish to grade students.

To learn more about LEADS, go to <https://www.sprc.org/resources-programs/leads-youth-linking-education-and-awareness-depression-and-suicide-0>

To order the LEADS curriculum, go to <https://save.org/product-category/school-education-curriculum/>

Hazelden Lifelines Prevention

This is a suicide prevention curriculum that believes in a Competent Communities approach. This means that suicide prevention should be more than a class taught to students; everyone in the community needs to play a role in suicide prevention. The curriculum consists of four main parts: The Administrative Perspective, Faculty and Staff Training, Parent/Guardian Workshop, and Student Curriculum. The Administrative Perspective helps administrators prepare the school community for a suicide prevention curriculum, including creating suicide intervention and postvention policies. Faculty and Staff Training teaches staff how to be “trusted adults.” This is a 30-minute training that can be tacked on to a regular teacher in-service and can be taught by any member of the school without having to hire out a trainer from Hazelden. The Parent/Guardian Workshop is a one-hour training that teaches parents the warning signs of suicide and how to help their child if their child or someone they know is showing these warning signs.

Hazelden Lifelines Prevention Curriculum requires that the first three parts be completed before teaching the Student Curriculum. The Student Curriculum was originally designed for 7th-10th grade students. Hazelden then added a curriculum that is developmentally appropriate for 5th and 6th graders, and then an extra curriculum on life after high school for 11th-12th grade students. 7th-10th grade curriculum is a four-day unit where students learn about their misconceptions on suicide, the warning signs that someone needs help, how to talk to a friend that is showing these warning signs, and how to go to a trusted adult for help. The 5th-6th grade curriculum takes a similar approach, except it has students simply tell an adult if they think something is wrong instead of having students directly ask peers if they are thinking about suicide (5th-6th grade students rarely ask this question directly). Both curriculums emphasize the importance of seeking help and not keeping the warning signs a secret. Each curriculum shows videos of students using the skills taught by this curriculum

Hazelden Lifelines Prevention curriculum incorporates a variety of learning styles through visuals, whole group discussion, small-group work, and videos. Lifelines is designated as a “Program with Evidence of Effectiveness” by Suicide Prevention Resource Center (SPRC). The National Registry of Evidence-based Programs and Practices (NREPP) study on this curriculum showed in students a significant increase in knowledge of suicide, a “significantly greater improvement in attitudes about suicide and suicide intervention,” and “significantly greater improvement in attitudes about seeking adult help.”

Hazelden Lifelines Prevention curriculum is not designed for schools with a recent death from suicide. Schools should wait for at least a semester before implementing the Prevention curriculum. Hazelden Lifelines also has a Postvention curriculum that can be utilized to help schools process recent suicide loss. There is also an Intervention curriculum for students that are most at-risk.

For more information on Hazelden Lifelines Prevention curriculum, go to
<https://www.sprc.org/resources-programs/lifelines-curriculum>.

To purchase Hazelden Lifelines Prevention curriculum, go to
https://www.hazelden.org/store/item/503138?Hazelden-Lifelines-Prevention&src_url=itemquest

Teen Mental Health First Aid (tMHFA)

This program comes from the National Council of Behavioral Health who created Mental Health First Aid (MHFA) and Youth Mental Health First Aid. These MHFA programs are designed to teach adults to help others experiencing mental health problems. However, adolescents often do not go to adults when they are in distress; they go to other youth. With Teen Mental Health First Aid, youth learn how to help each other when experiencing mental health problems, and how to direct their peers to a trusted adult.

This program can be taught in three 75 minute classroom sessions or five 45 minute sessions. It is meant to be taught on non-consecutive days. It teaches students about their own mental health as well as what mental illnesses are. The program then goes on to teach a five-step action plan for when a peer needs help as well as teaching suicide prevention. It gives students practice in handling crisis and non-crisis situations. Throughout the program there is a heavy emphasis on going to a trusted adult for help.

This course is still being piloted throughout the USA. tMHFA is no longer accepting applications for pilot schools. The plan is to be available nationally for the 2020-2021 school year, but more information about this will be available in 2020. A certified instructor must teach the course, and at this moment only those that are partnering with a school or youth organization may be trained to be instructors. If tMHFA is to be taught at a school, it is required that the entire grade be given training in tMHFA. They also recommend that at least 10% of the staff be trained in Youth Mental Health First Aid before students learn tMHFA.

Keep a lookout for availability for tMHFA in the coming years. To learn more about tMHFA, go to <https://www.mentalhealthfirstaid.org/population-focused-modules/teens/>