

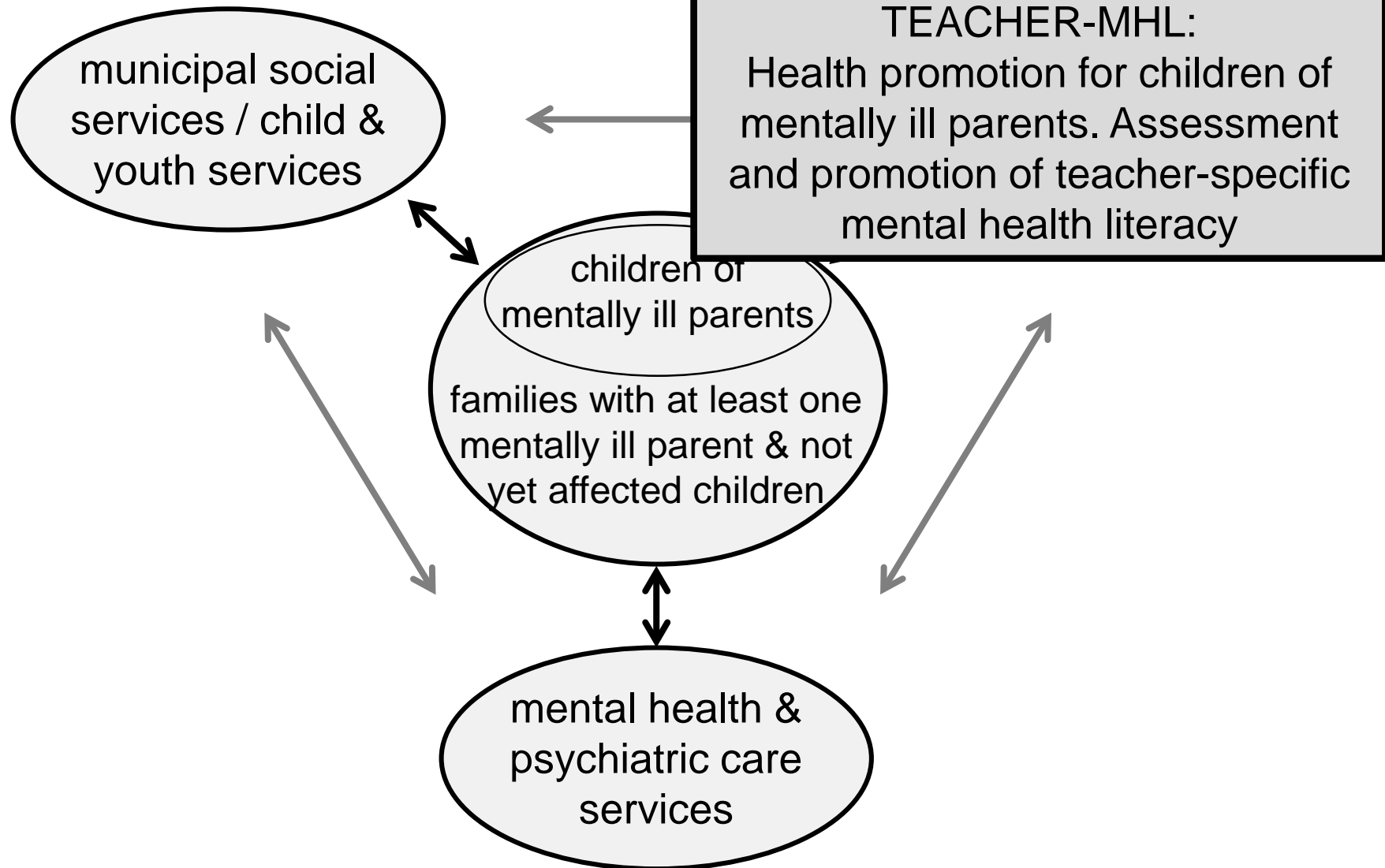
Teacher Mental Health Literacy

Health Promotion for Children of Mentally ill Parents.
Assessment and Promotion of
Teacher-specific Mental Health Literacy

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- 1) Overview
- 2) Children of Mentally-Ill Parents
- 3) Mental Health Literacy
- 4) Children of Mentally-Ill Parents and Schooling
- 5) Objectives and Methods
- 6) Current status and first results
- 7) Expected Outcome

Overview



- One of the populations at highest risk for developing mental disorders [Beardslee et al 1998; England & Sim 2009]
 - E.g. offspring of depressed parents: up to 4fold higher risk of developing depressive disorders than other children [Weissman et al. 2005]
- In Germany, >3 million children/adolescents experience at least one parent with a mental disorder every year [Mattejat 2008]
 - **About one quarter of students in German schools**

- Term coined in the mid-1990s by Anthony F. Jorm
- Objective: To draw attention on the public as target for better identification/management of mental disorders [Jorm 2012]
- Definition:
 - **Knowledge and beliefs about mental disorders which aid their recognition, management or prevention** [Jorm et al. 1997]

- Emphasis on knowledge that is linked to the **possibility of action** to benefit one's own mental health or that of others [Jorm 2012]
- Components of MHL
 - E.g.: **knowledge** of prevention and recognition, **help-seeking** options, **self-help** strategies, first aid skills [Jorm 2012]

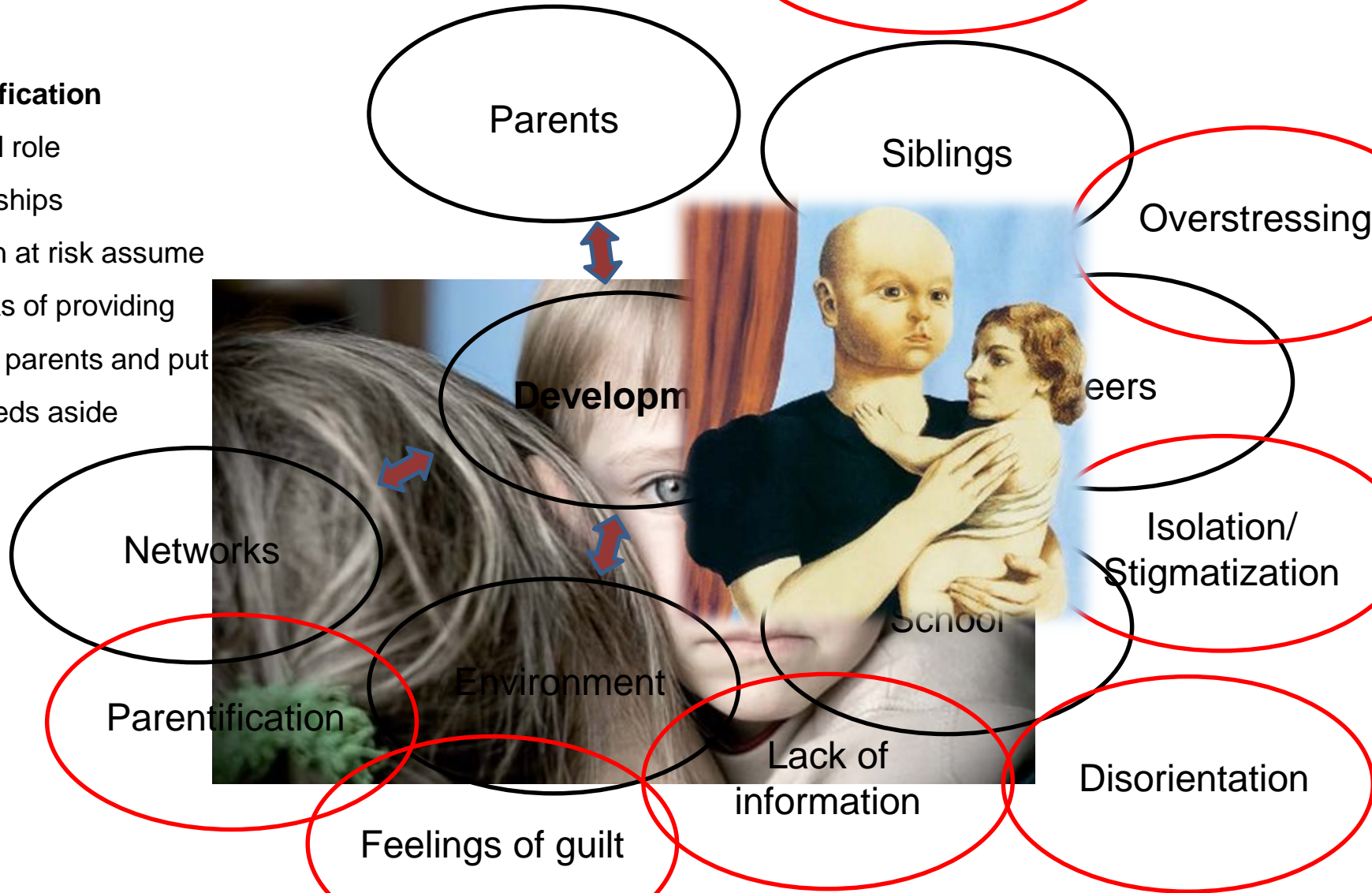
The complexity of MHL

Care deficits

Parentification

Inverted role relationships

Children at risk assume the tasks of providing care for parents and put own needs aside



- Burden patterns / attempts at coping also become manifest in **children's school lives** [Beardslee et al. 2010; Griepenstroh et al. 2011]
 - Lack of sleep, poor concentration, **learning lags**, absence from school
 - Social isolation and **shame** resulting from self-perceived deviation from “typical” family arrangement
 - Withdrawal and drop in achievement (***internalization***)
 - Engaging in aggression, angry outbursts, law-breaking or hyperactivity (***externalization***)

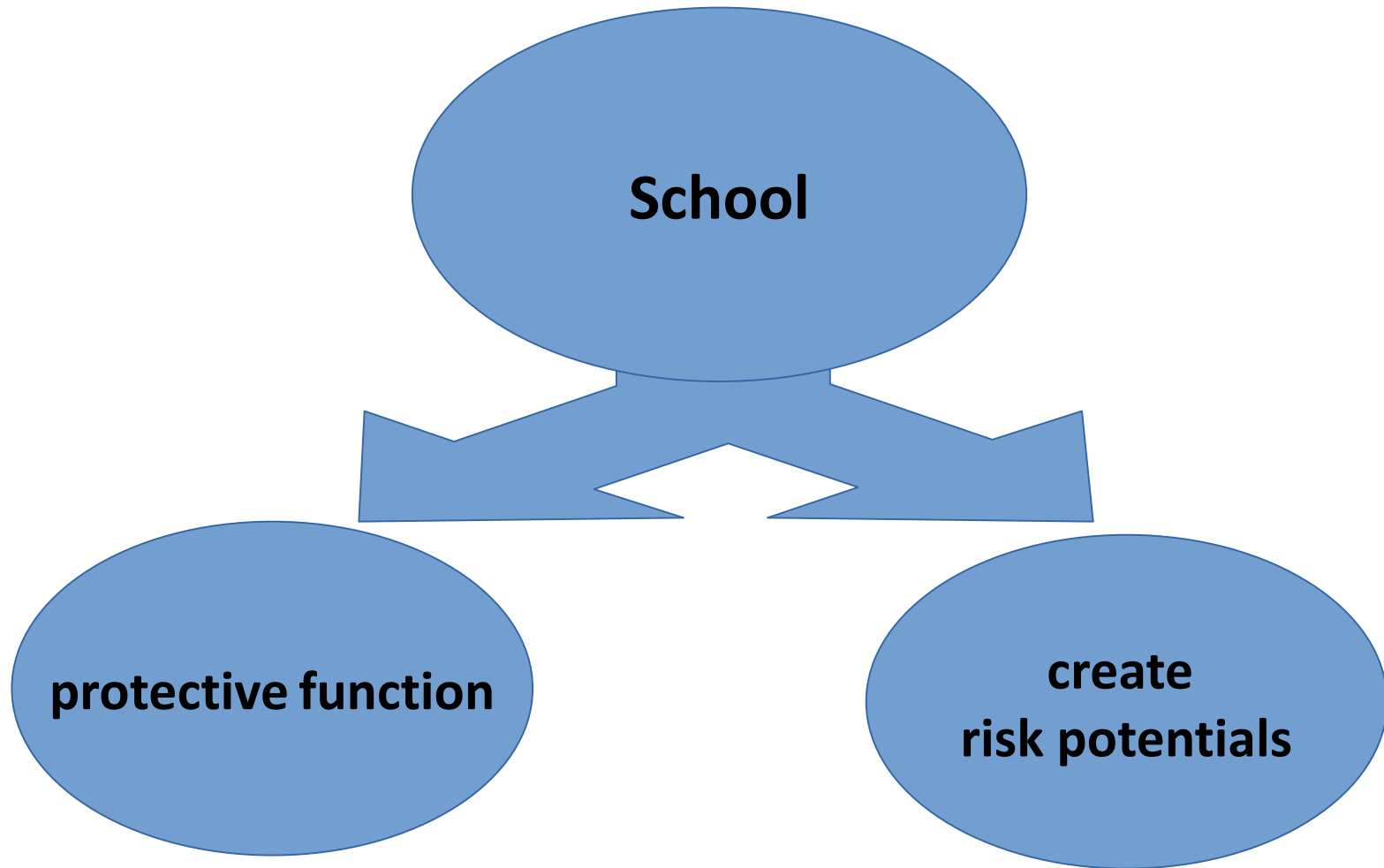
Burden patterns / attempts at coping also become manifest in **children's school lives** [Beardslee et al. 2010; Griepenstroh et al. 2011]

Impact on school life and academic achievement [Powell 2007; 2009]

- Higher risk of experiencing a "**school handicap**", i.e., of being excluded from regular schools once a special need of support has been diagnosed
- Increased probability of having a **problematic educational biography**
- **... new and long term problems occur**

Social environment can also act protectively:

- Children at risk: only 1/3 permanent disorder but: **1/3 no mental disorder**, another 1/3 transient disorder
- Children cope well with a parental mental disorder when they have **individual, familial and community resources** to accomplish developmental tasks, engage in relationships, and understand their and their family's **situation** [Beardslee & Podorefsky 1988; Hammen 1991; Beardslee 2002]



- **Untried possibilities of support: Poor use of attachment to pupils and families**
- In Schools: **At best, informal awareness** of this problem

[Powell 2007, Wagner et al. 2009]

- **Teachers** not prepared to adequately respond to this situation
 - **Rarely able to decode** phenomena as symptoms of a risk situation
(awareness not to diagnose!!!)

Poor School Mental Health Promoting

- Measure the extent of pupil-related mental health literacy in teachers at primary schools (years 1- 4) and secondary schools (years 5 – 6)
- focus on knowledge regarding the children's living conditions and psychosocial strains
- Foundation for the development of a structured teacher training programme

**Module 0:
structured
literature
review**

**Module 1:
exploratory
quality
teacher
survey**

n = 24 Teachers

- Recruiting by direct approaching
- Mixed school-types
- Different areas
- under 45 years/over 45 years

results: December 2015

**Module 0:
structured
literature
review**

**Module 1:
exploratory
quality
teacher
survey**

**Module 2:
quantitative
teacher
survey**

conducted by external institute
n = 2.070
1.860 women, 210 men

**Module 3:
structured
teacher
training**

open interviewing, standardised written survey
of a 5% sample and group interviews

results: December 2017 - March 2018

structured literature review

in April/May

Searchterm/ Database	„Children of mentally ill parents“	
	AND Teacher	AND School
Pubmed	0	0
Cinahl	0	0
Eric	1	1
PsycInfo	6	11
Psyndex (German)	6	10

Databases:
 Pubmed,
 Cinahl,
 Eric,
 PsycInfo,
 Cochrane,
 Psyndex,
 Web of Science
 Core Collection

research gap for Teacher-MHL and their skills

especially to handle a high-risk-group like children of mentally ill parents

- **Difficult for teacher to identify children with a mentally ill parent in everyday school-life**

e.g. 40% of teachers said, they would not be able to easily identify a child living with a mentally ill parent [Bibou-Nakou 2004]

- **No common knowledge of mental health problems**

Participants' knowledge about mental health was informed through various informal means such as media, personal experience, connections to personal experience or experience as a teacher [Trudgen and Lawn 2011]

- **Dealing with the situation is perceived as difficult**

e.g. homework situation and school marks [Reupert and Mayberry 2007]

- **Insecure teacher role** [Brockmann 2014]

**Reasons: lack of -
training, time
and common school structures/values**

Next step:

Teachers will be interviewed to assess
the current status of pupil-related mental health literacy

- Test a promising health promotion approach to improve the health of children and adolescents by enhancing profession-specific mental health literacy
- For the first time, schools will be addressed as a setting where children and adolescents are especially "accessible" for measures of health promotion
- the occupational group of professional pedagogues and their professional ethos are made the focus of health promotion in middle and late childhood
- gives reason to expect a high degree of effectiveness of the aimed programme



Thank you for your attention