



**Mental Health<sup>+</sup>**

# **eBook of mental health inclusion initiatives across Europe and the MH<sup>+</sup> Charter**

1

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# Mental Health+ eBook

Mental Health+ eBook objectives.....	4
Part 1: Summary of research into mental health inclusion initiatives.....	4
Emerging themes, main trends and challenges in mental health issues in Europe .....	4
Mental health inclusion policies and approaches.....	6
Main actors in mental health inclusion in Europe.....	8
Emerging trends of mental health inclusion within VET in Europe. ....	11
SWOT analysis on the state of mental health inclusion initiatives .....	12
Part 2: Best practices in mental health inclusion across Europe .....	14
Best practices / resources that you can use immediately within VET .....	15
i. Mental health resources for teachers – United Kingdom .....	15
ii. Schools mental health resource pack – United Kingdom.....	17
iii. Eating disorders – a guide for friends and family – United Kingdom.....	19
iv. Well-being in post-primary schools - Ireland .....	21
v. Mielen hyvinvointi - Finland.....	23
vi. Manual for preventative work with adolescents - Slovenia.....	24
Best practices in VET/education.....	27
i. Prevention of eating disorders – life per kilogram - Bulgaria .....	27
ii. Päihdeilmiö lessons - Finland.....	28
iii. Zipy's Friends - International .....	29
iv. Preventiimi - Finland .....	31
v. Prevention services for addictions - Iceland.....	33
vi. Mental health education program - Iceland .....	34
vii. Shock help - Menntaskolin Hamrahlið - Iceland .....	36
viii. Didactic of emotions- Italy .....	37
Best practices that can be adapted to use in VET .....	40
i. Youth program Teenshtein - Bulgaria.....	40
ii. Improved mental health services - Bulgaria .....	42
iii. PERMIND - Spain.....	44
iv. MedianetFORM - Italy .....	47
v. Integr@lavoro - Italy .....	50
vi. Incorpora programme - Spain.....	53
vii. Prelaboral Services: Solidarity furniture restoration experience - Spain.....	56
Part 3: MH+ Charter for inclusive mental health practices in VET.....	59
General Policies .....	59
Staff training and personal development.....	60
Teaching and Training approaches .....	60



Communication.....	61
Access to information .....	61
Counteracting Bullying.....	62



# Mental Health+ eBook objectives

This eBook aims to summarise the current state of mental health inclusion and promote best practices collected in partner countries as well as throughout Europe, especially those concerning how a more open, embracing and welcoming school environment can be established. This eBook can inspire teachers, trainers and school governance in their efforts to establish mental health inclusion policies, initiatives, training programmes and supporting services.

## Part 1: Summary of research into mental health inclusion initiatives

### Emerging themes, main trends and challenges in mental health issues in Europe

European populations are increasingly aware of the importance of mental health and the prevalence of mental health problems. Attitudes and approaches towards mental health issues in the different European countries investigated in Mental Health+ project (Bulgaria, Finland, Iceland, Italy, Spain and the UK) have many points in common, but are also at different stages in terms of support available. Below, the main trends and challenges in mental health in each country are summarised.

**In the UK** one in four people experience mental health problems, and depression and anxiety are most common. Mental health problems are most common in people living alone, in poor physical health and the unemployed. Young people are also vulnerable to mental health problems with 1 in 10 experiencing mental health problems per year.

Stress, anxiety and depression are the most common mental health problems among working people and are responsible for almost half of missed working days in the UK. However, it is becoming increasingly acceptable to talk openly about mental health at work. In 2019, 49% of employees felt comfortable about talking about their mental health.

**In Italy**, 17% of the population live with or have a history of mental health problems. The most common mental health issue is depression, which affects 6% of Italians, while among young people anxiety is more prevalent with 7% of individuals aged 15 years old and over suffer from anxiety. Despite this, mental health remains a controversial topic with a great deal of prejudices and stigma that still persists despite substantial advancements in awareness raising and education.

Local approaches to the administration of mental health services are significant. However, there are profound regional differences in terms of coordination between health and social care services, data collection, funding allocation, etc. which hinder the full harmonisation of the mental health system and the development of a comprehensive policy framework.



**In Iceland**, as in other European countries, depression and anxiety are the most common mental health problem, and around 19% of children suffer from serious mental health problems.

The principal problem regarding mental health in Iceland is the overmedicating of people. Psychotherapy is less accessible and not covered by insurance system.

**One in five young people in Finland** have mental health problems that require immediate help, and the number of mental health problems diagnosed in young people have increased in the past few years. The most common mental health issues are depression, anxiety and substance related disorders.

In recent years, Finland has been focusing on improving mental health issues and improving the quality of care and better access with the implementation of the new mental health strategy as well as national projects and local measures.

**In Bulgaria**, 15% of people have had a mental health problem at some stage in their lives. The most common mental health issues are anxiety, depression, bipolar disorder and alcohol and drug abuse and addiction. In many aspects, Bulgaria needs to improve the management and coordination of its mental health services as the problems and challenges that people with mental health problems face are many.

**According to the last Health National Survey, in Spain** 11% of people over 15 years old were diagnosed with a mental health problem in 2017. The most common mental health issues are anxiety and depression.

One in four children and adolescents have had a mental health problem in the last year and one in three will experience them throughout their lives as minors. The most common mental health problems among young people are anxiety, followed by depression and bipolar disorder and those derived from drug abuse. It has been found that 68% of adolescents suffering from depression do not receive the treatment that they need.

This shows that in Spain it is necessary to invest in mental health, both prevention policies and research, in the population in general as well as targeted to young people.

Four countries outside the MH+ project partnership were also investigated (Portugal, France, Germany and Norway) to allow for a more complete picture of mental health inclusion across Europe. The most common mental health problems found were anxiety, depression and alcohol and drug abuse disorders, affecting 15-25% of European citizens. In addition, it was found that in **Norway**, half of the population has suffered some sort of mental health problem in their life and in **Germany**, mental health issues rank fifth among the most common childhood illnesses. This shows the importance of addressing mental health issues, particularly in young people as this group is often overlooked and left without adequate treatment.

Although European society is increasingly aware of the mental health problems affecting its citizens, the associated stigma continues to persist in many countries. In **Italy, Bulgaria, Portugal and Spain** people who are affected by a mental health problem continue to bear the prejudices of society and face stigma. Accordingly, it is important to fight against this stigma and try to eradicate it by increasing awareness



around the realities of mental health issues, and promoting support and prevention initiatives as well as societal acceptance and understanding.

In some countries, such as **Spain, Portugal and Bulgaria**, a greater investment is necessary both in prevention policies in the field of mental health and in research. These countries also need to improve the management and coordination of their mental health services in order to fully support their populations.

## Mental health inclusion policies and approaches

In most European countries there is some type of legislation related to mental health inclusion.

The United Kingdom and Finland have specific laws on mental health issues while others have sections aimed at dealing with mental health issues within general health policies. In most of the countries investigated there are National Plans and Mental Health Strategies. In addition, in some countries, there are additional mental health plans and strategies specifically aimed at children and young people.

The most important laws and regulations regarding inclusion mental health in Europe are shown below:

### United Kingdom

National laws and Mental Health Strategies:

- Equality Act (2010): this law protects anyone with protected characteristics, such a mental health status, from discrimination if it can be shown that your mental health problem is a disability. This discrimination covers work, public services, education, etc.
- The Mental Health Act (amended last time in 2007) covers the assessment, care, treatment and rights of those with mental health issues.
- Green paper on “Transforming children and young people's mental health provision”. Main point, a mental health lead in every school by 2025 and support teams working with schools and colleges.
- NHS Health Plan (2019) includes commitments to prevent mental health.

### Italy

Italy is pioneer in deinstitutionalised mental health care (since 1978). Main laws and policies are:

- Mental Health National Action Plan.
- National Prevention Plan (NPP, 2014-2020).
- Based on the NPP, each Region adopts a Plan based on the specific needs of its population and availability of resources.
- Regional Prevention Plans developed by Provincial Health Authorities.

Current policies will serve as a solid starting point for the upcoming programming period Italy is entering in 2021, calling for specific actions on mental health and well-being designed to respect people's autonomy, identity and dignity.



## **Iceland**

Until recently there was no national policy for mental health in Iceland. Now there is Act 338 2016 based on Law 40 2007: resolution on a four-year mental health policy and action plan, which to improve well-being, better mental health and more active community participation of people with mental disorders.

## **Finland**

- Mental Health Act 1116/1990, Social Welfare Act 1301/2014, Health Care Act 1326/2010, Mental Health Strategy 2020-2030.
- National Plan for Mental Health and Substance Abuse Work.
- National Plan for Mental Health and Suicide Prevention 2020-2030, which focuses on the major mental health issues that are currently prevalence in Finnish society.

## **Bulgaria**

- Health Act 2005. Mental health is regulated in Chapter 5 of the Act, which has two sections, one on the protection of mental health and one on involuntary commitment and treatment.
- National strategy for people with disabilities 2016-2020.
- Law for people with disabilities from 2019.
- National health strategy 2020.

## **Spain**

- General Law on the Rights of Persons with Disabilities and their Social Inclusion.
- Law of Promotion of Personal Autonomy and Care for people in situations of dependency.
- Mental Health Strategy of the Health System. This strategy is based on the development of several strategic lines aimed at promoting the mental health of the population, attention to mental health problems, coordination of different institutions, training of health professionals and mental health research.
- Castilla y León Social Services Law, Equal Opportunities Law for People with Disabilities in Castilla y León, Regional Strategy for Mental Health and Psychiatric Assistance in Castilla y León.

## **Portugal**

- Law 36/98.
- National Mental Health Plan 2007-2016.
- Evaluation of the National Mental Health Plan 2007-2016 and priority proposals for extension to 2020. This plan aims to ensure that the entire population can access the services that have been set up, foster their mental health, provide quality care, and heal and reintegrate people who have suffered issues of such kind.

## **France**



- Multi-year program. Psychiatry and mental health.
- Roadmap for Mental Health and Psychiatry.
- Action Plan for the health and well-being of young people.

## Norway

- National Mental Health Programme.
- Youth Mental Strategy 2016-2021.
- National Plan for Mental Health of children and adolescents.

## Germany

- There are no specific national policies or legislation about mental health, instead policies are regional.
- Strategy for the Promotion of Children's Health.

## Main actors in mental health inclusion in Europe.

In the research carried out by all the partners of the partnership, a multitude of organisations and entities have been found, both public and private that work in the promotion and inclusion of mental health. From the institutional point of view, in most of the cases studied, the different ministries of Health and / or Social Affairs have a very important role in mental health inclusion in Europe.

In countries like Italy and Spain, where health issues are transferred to regions, provinces and communities, the presence of public institutions is more notable. In Finland and Bulgaria, municipal authorities are also responsible for coordinating and managing different mental health services.

## United Kingdom

In UK there are charities and organisations providing support, information and research relating to mental health.

Mind, Rethink Mental Illness, SANE and Mental Health UK are some of the most prominent. Young Minds and Place2Be also offer information, advice and support on mental health issues and they are specialised in young people and working with schools.

In addition, there are some national campaigns that aim to raise awareness of mental health issues:

- Time to Change: is a national campaign that aims to change the way that people think and act around mental illness.
- Every Mind Matters: NHS campaign that aims to empower people to manage and improve their mental health and wellbeing by promoting self-care skills.

There are also a variety of documents, strategies and tools promoting mental health inclusion, some of them are:





- Mind Workplace Wellbeing Index: is a benchmarking tool of policy and practice and the only tool dedicated to workplace mental health in the UK.
- Employer pledge by Time to Change: is a public commitment to change the way mental health is addressed thought about and acted upon in the workplace.
- Mental Health at Work Commitment.
- Mindful Employer by Devon Partnership NHS.

## Italy

At the institutional level, Government, Regions and Provincial Authorities are responsible for steering, coordinating, promoting and providing assistance for the implementation of actions aimed at developing a common governance approach to mental health inclusion.

Institutional campaigns:

- “Da vicino nessuno è normale”: campaign targeting all Italian mayors.
- "Social Inclusion Plan": under the framework of the new minimum income guarantee scheme (also called "Reddito di Cittadinanza"), both individual beneficiaries and their families whose low socio-economic status is directly linked to psychological malaise have to adhere to the Plan, which is aimed at improving households' well-being through social services and specialised assistance.

At the civil society level, there are advocacy groups, like UNASAM, which create the conditions for a dialogue between policy makers, the general public, mental health service professionals and users. UNASAM is a national federation of more than 150 associations of people living with mental health problems and their families. UNASAM also promotes cultural events such as conferences and seminars, sharing its direct experience and disseminating good practices collected.

In addition, the Special Education Need Directive and the Standards for Health and Safety Management documents promote mental health inclusion.

## Iceland

The main actors in the mental health field in Iceland come from the public and civil sector.

Ministries of Health and Social Welfare, through the Department of Social Insurance, Social Services offer disability benefits, rehabilitation grants, financial and psycho-social support for education and for employment.

At civil society level, there are a lot of NGOs and organisations working in the mental health field. Hugarafli, The National Mental Health Alliance, Hlutverkasetur, The Red Cross and Geysir offer therapy, socialization, psycho-social support for education and for employment and psychoeducation.



In addition, the National Educational Curriculum as well as ‘Directorate of Health: implementation of psychotherapy, prevention and support for children and young people in schools in Iceland’ document, promote mental health inclusion.

## **Finland**

In Finland, the Ministry of Social Affairs and Health is responsible for the planning and guidance of mental health policies. Municipal authorities are responsible for organising mental health services.

The private sector is of significant importance particularly in the area of psychotherapy. There is also a wide range of third sector actors. There is extensive collaboration with NGOs who promote health, especially focusing on mental health among young people.

Some of the most important organisations and associations in mental health in Finland include:

- Mieli – Mental Health Finland
- Mental Health House for Youth
- Finnish Institute for Health and Welfare
- The National Family Association promoting Mental Health in Finland

In addition, there are some specific documents that promote mental health inclusion in Finland. The primary one is the ‘Guide to Mental Health and substance abuse work’ (Ministry of Social Affairs and Health), and there are also documents as part of The National Strategy for mental health and suicide prevention.

## **Bulgaria**

According to the law, the state, the municipalities and NGOs are responsible for safeguarding mental health by providing accessible and quality health care and organising active prevention of mental health problems, training programmes, mental health promotion and protection of mental health in risk groups (children, students, elderly people, persons living in social institutions, soldiers and prisoners).

One of the organisations actively working towards the inclusion of people with mental health problems is the Global Initiative in Psychiatry Foundation. It was established in 2002 and has been actively working to reform the mental health system and improve the quality of life for people living with mental illness in the region.

Another organisation is Adaptation Society. The main goal of this non-profit organisation is to support the families and friends of the users of mental health services.

In addition, the ‘Guide to Implementing a Comprehensive Approach to Promoting Mental Health at Work’ is available to help employers promote mental wellbeing in the workplace.

## **Spain**



In Spain, the Ministry of Health, Consumer Affairs and Social Welfare is primarily responsible for ensuring the mental health of citizens.

At a regional level, health issues are transferred to the Autonomous Communities and in each of them the Health Departments are responsible for providing the necessary mental health services.

ISEM platform is worth highlighting. ISEM is a non-governmental and non-profit organisation and works as a network for the promotion and social inclusion of people with mental illness.

Some of the most important organisations and entities that work in the field of mental health in Spain are Confederación Salud Mental and Plena Inclusión. Confederación Salud Mental produced 'Mental Health and Social Inclusion: Current situation and recommendations against the stigma' to promote mental health inclusion among the public. 'Mental Health of the workers', by the Basque Observatory of Moral Harassment, was also produced to increase inclusion in workplaces.

As seen so far, in the countries investigated in this report, there is a strong structure of entities and organizations, both from the public and private sectors, working in the field of mental health and struggling to promote and improve mental health of its citizens.

## Emerging trends of mental health inclusion within VET in Europe.

It has been difficult to find emerging trends of mental health inclusion within VET across Europe due to the differing systems between countries and the fact that in some countries only a minority of education institutions are VET. As a result, some trends refer to education in general in each country.

**In the UK**, it is not currently a requirement for schools to have designated mental health professionals or staff to speak to students about their mental health. This is one of the priorities of the government and something that will be implemented in the coming years. However, schools do have policies in place to support students in their overall wellbeing, including their mental health, even if it is not explicitly mentioned.

In VET institutions, in general, there are no mental health inclusion policies implemented. Some VET institutions have implemented mental health policies but it is not widespread in the UK.

**In Italy** vocational training is integrated into the education system. In addition, it is possible to study a degree to become a support teacher to students in schools and institutes, which includes information about mental health.

In the VET teachers' pre-services training, universities provide initial training on behalf of the Ministry of Education. To become a teacher, they are required to complete a five-year bachelor degree followed by a one-year traineeship in schools. During this traineeship, face-to-face learning, workshop activities and practical work experience are combined in order for future teachers to get acquainted with both content and methodological/didactic aspects of a learning environment.



**In Iceland**, vocational training is integrated into secondary schools. Many of the mental health practices employed in general education schools apply to VET students as well.

There has been an increase in the diagnosis of mental health problems among young people. This is because schools need funds for specialised help, and this help only comes through a medical diagnosis. Icelandic schools offer psychological support, social services staff, counsellors and guides, and addiction prevention staff.

**In Finland** within vocational training, mental health skills are not part of the school curriculum. It is agreed by many that mental health education should be more present in the training of vocational training teachers. Individualised help should also be available in schools and institutions.

**In Bulgaria** vocational training is implemented in the education system, within secondary education.

From October 2017, the Inclusive Education Ordinance has been in operation in Bulgaria. This ordinance contemplates the possibility of additional support for students with special educational needs. This is a good step towards inclusion in mental health, although in Bulgaria the attitude towards mental health is still not particularly good.

However, a positive measure taken in Bulgaria for the mental health of young people is that psychologists and pedagogical advisers are appointed in the preschool and school education system, including VET.

**In Spain**, there are no special measures for mental health inclusion within VET. In primary and secondary education there are measures to support students with special needs, but for VET there is no provision for support teachers for these students.

In general, with everything seen so far in this report, in most of the countries investigated there are no special measures within professional training related to mental health inclusion.

## SWOT analysis on the state of mental health inclusion initiatives

### ● STRENGTHS

- European populations are increasingly aware of the importance of mental health.
- In most European countries there is some type of legislation related to mental health inclusion.
- The United Kingdom and Finland have specific laws on mental health issues. Others, like Bulgaria, have sections aimed at dealing with mental health issues within general health policies.
- In most of the countries investigated there are National Plans and Mental Health Strategies.
- In some countries, like Norway, France and the UK, there are additional mental health plans and strategies specifically aimed at children, young people and workers.
- In Europe, many organisations, both public and private, work to promote mental health inclusion.
- Different ministries of Health and / or Social Affairs play a very important role in mental health inclusion in Europe.



- There are support systems in place for students suffering with their mental health across most European countries. For example, in Italy there are support teachers within the educational system. In the VET teachers' pre-services training, universities provide initial training on behalf of the Ministry of Education.
- **WEAKNESSES**
  - Some countries need more investment in both research and prevention policies in the field of mental health (e.g. Portugal and Bulgaria).
  - In some countries there are regional differences in terms of coordination between health and social care services, data collection, etc. Spain and Italy have these regional differences.
  - Some countries need to improve the management and coordination of their mental health services (e.g. in Spain, Portugal and Bulgaria) in order to fully support their populations.
  - Although in the UK, Norway or Iceland documents exist regarding mental health inclusion (for example, mental health of workers, youth and adolescents, etc.) in the vast majority of European countries, these documents or charters are not available to citizens.
  - In general in Europe, in VET institutions there are no mental health inclusion policies implemented.
- **OPPORTUNITIES**
  - Create or promote new jobs related to mental health in VET institutions, for example support teachers for students with mental health issues.
  - Countries with less mental health legislation can take examples from other countries and thus be able to influence, through advocacy groups, the national policy of their respective countries.
  - Countries with less documents on mental health can take the example of others where these documents or charters do exist.
  - MH + Charter, Benchmarking Tool and the Mental Health Champion Skills Profile can be very useful tools for VET institutions so that they can identify where they can improve and implement positive changes.
- **THREATS**
  - In many European countries, like Spain, Bulgaria or Portugal, the stigma associated with mental illness still persists
  - The economic crisis due to COVID-19 may influence investment in mental health in Europe



## Part 2: Best practices in mental health inclusion across Europe

We have compiled a selection of best practices in mental health inclusion from across Europe that can be used in VET. As VET is quite niche, and countries have differing levels of provision for mental health inclusion, there are very few practices that are specifically targeted towards VET, however all of the below practices can either directly or with a few adaptations be used in VET. To make this list as useful as possible we have divided it into three main sections:

### Best Practices / resources that you can use immediately within VET

These are best practices aimed at mental health inclusion in VET or more general education that have published resources that you can use. As a result you can directly implement these practices into your institution with no adaption – all you will need to do is download the resources

- i. Mental health resources for teachers – United Kingdom
- ii. Schools mental health resource pack – United Kingdom
- iii. Eating disorders – a guide for friends and family – United Kingdom
- iv. Well-being in post-primary schools - Ireland
- v. Mielen hyvinvointi - Finland
- vi. Manual for preventative work with adolescents - Slovenia

### Best practices in VET/education

These are best practices used within VET and education, but due to their nature, there are no produced resources. As a result you will need to prepare resources / practices of your own to incorporate them into your institution. We feel that most of these can be easily achieved with minimal preparation for most institutions.

- i. Prevention of eating disorders – life per kilogram - Bulgaria
- ii. Päihdeilmiö lessons - Finland
- iii. Zipy's Friends - International
- iv. Preventiimi - Finland
- v. Prevention services for addictions - Iceland
- vi. Mental health education program - Iceland
- vii. Shock help - Menntaskolin Hamrahlið - Iceland
- viii. Didactic of emotions - Italy




## Best practices that can be adapted to use in VET

These are best practices in mental health inclusion that have been implemented into wider society (some with young people and some with adults) but contain elements that can be beneficial to VET. As education is not at the core of their practice, we have included sections on how these can be adapted to fit within VET.

- i. Youth program Teenshtein - Bulgaria
- ii. Improved mental health services - Bulgaria
- iii. PERMIND - Spain
- iv. MedianetFORM - Italy
- v. Integr@lavoro - Italy
- vi. Incorpora programme - Spain
- vii. Prelaboral Services: Solidarity furniture restoration experience – Spain

## Best practices / resources that you can use immediately within VET

- i. Mental health resources for teachers – United Kingdom

Organisation	Time to Change 
Location and timing of practice	These resources have been developed in the UK over the past three years (2017 onwards) and are regularly updated. The resources are available online and freely available to anyone who visits the website.
Title and link to resource	<a href="#">Mental health resources for teachers</a>
<b>Objective:</b> Time to Change, a national campaign for mental health led by leading mental health charities, aims to change how we think and act about mental health and to ensure that everyone with a mental health problem has equal opportunities in all areas of life. Their mental health resource pack for teachers provides resources to help schools start discussions and educate within	





assemblies and groups, support student mental health campaigns and encourage parents to talk about mental health at home.

### Detailed content:

The resource pack divides its resources into 5 areas: Deliver a mental health assembly, Run a session with a small group, Support student campaigners, Download & print materials for your school and Get the message out to parents.

The assemblies are divided into 10 and 15 minute categories and include PowerPoint presentations and videos. These assemblies aim to educate young people and encourage discussion around mental health, show ways that you can support your own mental health as well as support friends who are struggling.

The small group sessions contain a series of interactive activities that will enable students to talk and think about mental health. They are all quite short, so can be completed as part of a wider lesson, and encourage students to think, learn and challenge their ideas around mental health so that they become more understanding and inclusive.

The supporting student campaigners section contains links to useful tools for starting a student campaign as well as advice on how to get other students involved and mental health promoting activities.

The downloadable and printable materials are all created to encourage discussion and reiterate messages from each of the assemblies to ensure that mental health remains a subject that students and teachers are aware of and talking about. These include email signatures, social media photos, screensavers and posters relating to main messages from assemblies.

The parents section includes a leaflet, letter and presentation that can be sent and shared with parents to explain the importance of talking about mental health at home. These resources include general information about mental health, tips for talking and links to where you can find more information.

### Evaluation of results:

The assemblies and group sessions have been reported to be most useful among teachers and schools as they are ready to use and easily accessible, and teachers really like the accompanying videos.

Although it is hard to measure exactly how many schools have used this resource pack (as there are many), Time-to-change has contacts with around half of all secondary schools in England.

### What makes it a good/best practice?


Time to Change is a well-known and growing social movement in the UK which aims to change how we all think and act about mental health problems. They are led by leading UK mental health charities, Mind and Rethink Mental Illness, and funded by multiple sources including the UK Government, and use research to develop their approaches and resources.





<p>They have reached millions of people and begun to improve attitudes and behaviour – since the campaign began 10 years ago, yearly surveys (carried out by King’s College London) of a nationally representative sample show that 5.4 million people have improved attitudes towards mental health. Resources are continually kept up to date, ensuring that correct and relevant information and resources are available to schools.</p>	
Other information	<p>Website: <a href="https://www.time-to-change.org.uk/">https://www.time-to-change.org.uk/</a></p> <p>Social media:</p> <ul style="list-style-type: none"> <li>- <a href="#">Facebook</a></li> <li>- <a href="#">Twitter</a></li> <li>- <a href="#">Instagram</a></li> <li>- <a href="#">YouTube</a></li> </ul> <p>These resources for teachers are published on their website and have been promoted through social media campaigns and sent out to their school mailing list. Available in English.</p>
Contact	<a href="mailto:info@time-to-change.org.uk">info@time-to-change.org.uk</a>

## ii. Schools mental health resource pack – United Kingdom

Organisation	<p>High Speed Training</p> 
Location and timing of practice	<p>This resource was developed in the UK and published in July 2019. It is an online resource and freely available to anyone who visits the website.</p>
Title and link to resource	<p><a href="#">School Mental Health Resource Pack</a></p>
<p><b>Objective:</b></p> <p>This resource pack provides information and advice to school leaders on how to develop and implement a whole school approach to mental health inclusion and awareness. This spans from activities to promote positive mental health with students, to promoting staff wellbeing, to writing a school mental health policy (as well as providing an example of a policy)</p>	
<p><b>Detailed content:</b></p> <p>The School Mental Health resource pack is divided into three main sections.</p>	



The first section covers the current statistics relating to the state of mental health in UK schools and the issues that affect young people in 2019. Based on these statistics and findings, a number of activities/attitudes are suggested to help promote positive mental health in schools – examples of this are discussing mental health in PSHE classes, having an open door policy and organising a wellness week. These activities will enable students to learn about the importance of mental health, reassure them that their teachers are there for them and provide some strategies to deal with their own mental health.

The second section relates to staff wellbeing. This includes the pressures that staff face which can lead to mental health decline, signs that members of staff may be suffering from poor mental health and tips to improve the wellbeing of staff in the school. By including this, a whole school approach is created rather than just being student-centred.

The third section is about writing a school mental health policy which includes why a mental health policy is necessary and the elements it should include. It also provides direction as to how to write a school mental health policy and provides an example that can be used as a template.

At the end of the resource pack, there is a short quiz for teachers about student mental health.

### Evaluation of results:

In the past year, the resource pack has been viewed over 10,000 times. Feedback has indicated that the most helpful sections have been the activity ideas listed in ‘Promoting positive mental health in schools’ as well as the quiz for teachers about student mental health. Although aimed towards secondary education, this resource pack can be used in any educational context as it refers to staff and students’ wellbeing, activities and attitudes to have towards positive mental health (which can be adapted to age range) as well as policy recommendations. Some of the activities, ideas and policy recommendations could also be used in a work context too.

### What makes it a good/best practice?

High speed training is one of the UK’s top training providers and therefore, has a high level of quality in all of their resources. The School Mental Health resource pack was nominated, and received placement as a finalist, in the Teach Secondary Awards 2019. As well as the quality of resources, originality and impact are also assessed, which indicates that this resource is unique in its coverage of mental health inclusion. Although it is the Teach Award’s first year, results were shared with over 100,000 education professionals as well as across Teach Company’s media: three magazines and a website. The resource pack also received media coverage from Education Today, FE News and QA Education which shows that it is a valuable educational resource.


### Other information

Website: <https://www.highspeedtraining.co.uk/>  
 Social media:  
 - [Facebook](#)  
 - [Twitter](#)



	<ul style="list-style-type: none"> <li>- <a href="#">LinkedIn</a></li> </ul> <p>The resource pack is available on the High Speed Training website and the title is included on the Teach awards website. Education Today, FE News and QA education also published information about the resource pack.</p> <p>Available in English.</p>
Contact	<a href="mailto:support@highspeedtraining.co.uk">support@highspeedtraining.co.uk</a>

### iii. Eating disorders – a guide for friends and family – United Kingdom

Organisation	Beat Eating Disorders 
Location and timing of practice	This resource was developed in the UK and is available online.
Title and link to resource	<a href="#">Eating disorders: a guide for friends and family</a>
<b>Objective:</b> <p>The booklet provides information and advice for anyone who is supporting someone with an eating disorder. It covers information about different eating disorders and methods of treatment as well as offering guidance on how you might approach the subject if you're worried about someone you know and how to support them after diagnosis. Although not directly aimed at school staff, valuable knowledge can be gained about supporting those with eating disorders and it can be referred to in meetings with the parents and friends of pupils with an eating disorder.</p>	
<b>Detailed content:</b> <p>The booklet opens by explaining what an eating disorder is, why people may have them and the different kinds of eating disorders there are. As well as explaining each eating disorder, it also lists possible signs associated with each as well as eating disorders more generally.</p> <p>The next section talks about approaching conversations with someone you think has an eating disorder. This includes some tips/things to think about before speaking to someone, how to raise the topic with recommendations about what to say or not say to help them remain at ease, and how to respond to their reactions. A quote is also included from a young person who had</p>	



this conversation with their parent and partner, as well as a number for Beat's Helpline.

The following section talks about treatment for eating disorders as well as advice on having a positive interaction with a GP.

The next section talks about supporting someone with an eating disorder from multiple different perspectives depending on the relationship you have with the person. This includes looking after a child, partner, housemate, friend and colleague. This includes some advice on supporting them around meal times as well as general advice based on your relationship – e.g. suggesting going to the GP with them, finding activities to do that aren't food-centric, getting your children involved in support etc.

The last section is about looking after yourself whilst you are looking after someone with an eating disorder, as well as how to deal with difficult situations and confide in other people.

The final pages of the resource have links and contact information for other relevant charities and support, as well as a poster of the 6 main signs that someone may have an eating disorder.

### Evaluation of results:

The main strength of this resource is that it approaches support from multiple perspectives and relationships as these will all have different roles in the life of a person with an eating disorder. Although not aimed at teachers specifically, the supporting advice from the perspective of a friend, parent, colleague, partner and housemate can be applied to a teacher supporting a student as well as many other relationships.

### What makes it a good/best practice?

Beat is the UK's first and main eating disorder charity. In 2019, they received nearly 38,000 new visitors to their website and had over 200 mentions in the media. They influence governmental policy and healthcare practice and in 2019, attended 2 lobby days in Westminster and met with 39 MPs/representatives. In 2019, a further 564 school professionals were trained to support students in getting treatment. This booklet is a good practice as it refers to supporting someone with an eating disorder from the perspective of different relationships.

### Other information

Website: <https://www.beateatingdisorders.org.uk/>

Social media:

- [Facebook](#)
- [Twitter](#)
- [Instagram](#)
- [YouTube](#)
- [LinkedIn](#)

Available in English.



Contact	<a href="mailto:media@beateatingdisorders.org.uk">media@beateatingdisorders.org.uk</a>
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#### iv. Well-being in post-primary schools - Ireland

Organisation	These Guidelines were developed by the Department of Education and Skills, the Health Service Executive and the Department of Health.
Location and timing of practice	This resource was developed in Ireland and published in January 2013. The resource is reviewed and kept up to date. It is an online resource and freely available to anyone who visits the website.
Title and link to resource	<a href="#">Well-being in post-primary education. Guidelines for mental health promotion and suicide prevention</a>
<p><b>Objective:</b></p> <p>The guidelines aim to provide practical guidance to schools on how to develop a whole school approach to promote mental health and wellbeing to students. This is because increasing the overall wellbeing of students will help increase student success, both in their academic and personal lives.</p> <p>The guidelines have been written for all members of the school community: school leaders, subject teachers, governors, guidance counsellors, student support teams etc.</p>	
<p><b>Detailed content:</b></p> <p>The guidelines come in the format of an informative and detailed, but clear and concise report which includes advice on policy and developing a whole-school approach, links to organisations and tools, case studies and templates.</p> <p>The guidelines start by explaining mental health itself and the statistical mental health situation of Irish young people as well as the importance and responsibility that schools have in supporting young people.</p> <p>The guidelines then explore the ways that schools can develop a whole-school approach, broken down into three areas:</p> <ul style="list-style-type: none"> <li>● School support for all</li> <li>● School support for some</li> <li>● School support for few</li> </ul> <p>Case studies are provided at the end of each of these sections.</p>	



‘School support for all’ details an approach that will support every student. This mainly focuses on prevention, mainstreaming teaching about mental health and early identification and intervention of young people who are struggling with their mental health. This section includes: links to tools and resources for schools to use; guides on delivering effective mental health Social, Personal, Health and Education (SPHE); information on developing a whole school guidance plan; and information about supporting staff and student families.

‘School support for some’ builds on the whole school approach of support for all, but focuses on early identification of some young people who may be struggling with their mental health. This includes information about: identifying and gathering information; planning and intervention; and monitoring and reviewing.

‘School support for few’ focuses on how schools can support young people with more complex or enduring needs relating to their wellbeing and mental health. This includes: information on creating an action plan; information on referring a young person to different sorts of specialists, information on supporting a young person back into school; information on supporting students who are at risk of suicidal behaviour; and how the school can support students if a death by suicide occurs.

The final section is about support for schools which covers staff CPD, with links and information about mental health training programmes available in Ireland; setting up and the responsibility of different team structures within a school to deal with mental health; and links and websites to find out more information.

A few useful resources are also available in the appendix for schools to use which cover short guides, templates and a school self-assessment questionnaire.

### Evaluation of results:

The main success factor of the practice is that it promotes school wellbeing by indicating that schools should adopt a whole-school, multi-component, preventative approach to wellbeing promotion that includes both universal and targeted interventions. It places wellbeing at the core of school ethos and suggests that all schools will provide evidence-informed approaches and support, appropriate to need, to promote the wellbeing of their students.

The recommendations set out in this document can be transferred to a range of educational as well as work contexts, as they cover structures for identifying and offering support to individuals based on their specific needs.

### What makes it a good/best practice?

The resource itself was based on national and international research and best practice and has a large associated literature review. A variety of people and organisations were involved in the development of these guidelines which ensured that they were fit for purpose, including: young people, school principals, parents, guidance counsellors, educational psychologists, academics and a variety of governmental departments.

Resources for research and funding were provided by multiple governmental departments: the



Health Service Executive/the National Office for Suicide Prevention, the Department of Education and Skills/the National Educational Psychological Service and the Department of Health and Children.	
Other information	Website: <a href="https://www.education.ie/en/">https://www.education.ie/en/</a> Social media: - <a href="#">Twitter</a> Available in English.
Contact	<a href="mailto:info@education.gov.ie">info@education.gov.ie</a> <a href="mailto:neps@education.gov.ie">neps@education.gov.ie</a>

## v. Mielen hyvinvointi - Finland

Organisation	The Finnish National Agency for Education funded the project with ESR funding. The project was managed by Keskuspuiston ammattiopisto vocational institution, and Suomen Mielenterveysseura organisation acted as specialist.
Location and timing of practice	The project was implemented in Finland in 2012-2014, and the participating institutions were located in the capital area (e.g. Helsinki, Vantaa) and a few other cities in Southern Finland (e.g. Tampere).
Title and link to resource	<a href="#">Mielen hyvinvointi (Mental wellbeing) dissemination project</a>
<b>Objective:</b>  In Mielen hyvinvointi dissemination project, training and materials for secondary level institutions were developed. This was to help institutions support young people with mental health issues and teach skills related to mental wellbeing in order to create an overall supportive learning environment.	
<b>Detailed content:</b>  In the project, a Hyvinvoiva oppilaitos (“Well-being institution”) model was developed, which consists of learning mental health skills, recognising and strengthening resources and building a community culture and safety network in the institutions.  The practical work was done by organising national and institution-specific Hyvinvoiva oppilaitos trainings for teachers and personnel at the institutions. In addition, discussion	





forums, consulting and workshops were offered as a part of the project. The extensive material developed in the project can be used in group sessions and career guidance in secondary level institutions. The guide and material packages are available [here \(in Finnish\)](#).

### Evaluation of results:

Even though there are no exact numbers available, there were many cooperating institutions involved in the project: Finnish National Agency for Education, Keskuspuiston ammattiopisto VET institution, Suomen Mielenterveysseura organisation, Leppävaara high school, Niilo Mäki Institute, Optima institution, Sataedu vocational education centre, Business College Helsinki, Tampere University of Applied Sciences Teacher Training Centre (Tampereen ammatillinen opettajakorkeakoulu) and Vantaan vocational institution Varia. These large institutions ensured that the results were widely disseminated.

The Hyvinvoiva oppilaitos (“Well-being institution”) model and training material is very comprehensive and therefore it is transferable and can be used in many different education and training situations and utilised by mental health experts in their daily work with young people.

### What makes it a good/best practice?

There were many institutions involved from teacher training institutions to vocational training institutions and expert organisations, and therefore the results of the project were well disseminated. The Hyvinvoiva oppilaitos (“Well-being institution”) model and training material are comprehensive and innovative support materials, and can be used in varied education and training situations by mental health experts and career advisers working with young people.

Other information	Project <a href="#">website</a> <a href="#">Materials available</a> Available in Finnish.
Contact	Anniina Pesonen <a href="mailto:Anniina.pesonen@mieli.fi">Anniina.pesonen@mieli.fi</a>

## vi. Manual for preventative work with adolescents - Slovenia

Organisation	The National Institute of Public Health
Location and timing of practice	This manual was created in 2019 in Slovenia and updated from the 2010 version with additional resources, adapted activities and newer information. It is freely available online.





Title and link to resources	<a href="#">Manual for preventive work with adolescents</a>
<p><b>Objective:</b></p> <p>The Manual covers a series of workshops to be used by teachers who work with 13-17 year olds, to help them support their students in developing and strengthening social and emotional skills as well as self-image.</p>	
<p><b>Detailed content:</b></p> <p>The manual starts by introducing the concepts of mental health and associated preventative work, as the presented workshops are aimed to highlight social and emotional skills to help prevent mental health issues arising. It then describes the importance of developing a positive, realistic self-image when growing up and highlights and explains the role that teachers have in supporting young people in developing these skills and mind set.</p> <p>The section on workshops starts by explaining the best way to embed workshops into school by involving management as well as teachers in their implementation and delivery. Instructions for teachers about the preparation, implementation, methods and completion of workshops is also provided.</p> <p>The majority of the manual is dedicated to the workshops themselves. There are 10 workshops in total (2 related to self-esteem and personal image and the other 8 related to life skills) which address areas of experience, behaviour and life management. These cover the areas of:</p> <ul style="list-style-type: none"> <li>● Respecting and accepting yourself</li> <li>● Goal setting - promoting motivation, diligence and persistence</li> <li>● Cooperation and the required skills of adaption, coordination and compromise</li> <li>● Problem solving</li> <li>● Dealing with stress</li> <li>● Thinking positively and how to recognise negative thoughts and change your method of thinking</li> <li>● Decision making and taking responsibility for decisions and their consequences</li> <li>● Recognising your worth</li> <li>● Acting on your own morals and beliefs</li> <li>● Recognising, accepting and expressing emotions</li> </ul> <p>Each workshop section includes a detailed explanation of the workshop, its purpose, outcomes and direction as well as all associated worksheets and materials. Quotes are also included from students about how they rated the session.</p> <p>The end of the manual includes information about how effective the sessions have been in piloting sessions as well as additional literature.</p>	
<p><b>Evaluation of results:</b></p>	



From the 2011 version, of which these workshops are improvements of, 6,000 workshops were held and delivered to 10,000 young people between 2011 and 2018 6,000. Pilots of this version have shown that workshops have had a positive effect in strengthening mental health and developing social and emotional skills on both the class and individual. Students feel that they are better at dealing with problems and relationships and teachers agree that relationships between pupils improved.

The main strengths of the workshops are the collaborative nature of the activities as well as the opportunity to express personal views and exchange them with classmates and teachers. However, the overall impact of the workshops was not as strong as initially desired, although there has been a positive result.

### What makes it a good/best practice?

This manual builds on existing workshops from 2011, as well as 2 decades of public research, with upgrades made in accordance with feedback and findings from school evaluations, which ensures that they are as useful as possible. Further findings have also been added to enrich the theoretical framework.

This resource is associated with an online programme which aims to help young people develop of positive self-esteem, social and communication skills and other life competencies to support adolescents in their everyday lives. This is achieved through online counselling with information for young people about their self-worth and promoting mentally healthy life skills, as well as training and activities for teachers to incorporate this into a school environment. The programme has received multiple awards, the most recent of which was the Prism 2012 national award for communication excellence.

#### Other information

Website: <http://www.tosemjaz.net/>  
Available in Slovenian.


#### Contact

Ksenija Lekic  
[ksenija.lekic@nijz.si](mailto:ksenija.lekic@nijz.si)



## Best practices in VET/education

### i. Prevention of eating disorders – life per kilogram - Bulgaria

Organisation	Foundation “Outside the circle”
Location and timing of practice	The initiative was developed in Bulgaria. It started in October 2016 and continues to this day, operating in Sofia and 6 other cities in the country.
Title	 <p>“Life per kilogram”</p>
<p><b>Objective:</b></p> <p>“Life per kilogram” is the first program in Bulgaria aimed at eating disorder prevention. The main target group is students between ages of 12 and 18, but parents and teachers are also involved. The purpose of working with students is so that they can be given appropriate information in an accessible way so that they can recognise the factors that may trigger eating disorders and symptoms and then react appropriately.</p>	
<p><b>Detailed content:</b></p> <p>The program is specially developed and includes interactive exercises and discussions. It is carried out by a team of psychologists and psychotherapists who meet with students in a school setting. There are three meetings in total, each upgrading the others. The first meeting deals with appearance, role and beauty models, the way we perceive ourselves and the relationship between appearance and eating disorders. The second meeting addresses the topics of inner emotions, their recognition and how to overcome them. The third summarises and makes sense of the first two meetings: students learn what types of eating disorders exist and how a person can seek help in a situation of risk. These sessions make clear that eating disorders are, above all, a mental health issues, where kilograms and eating behaviour are only the most visible part. Students realise that there is a link between eating disorders and internal conflicts related to emotions and our internal or external environment.</p> <p>Another aim of the project is the implementation of additional activities through which the topic should become more visible and widely accessible. An example of such activity is the exhibition "100 grams of tenderness". The photos in it are from the homes of people with eating disorders. They show the usual details that can be seen in every house, but through the prism of a nutritional problem, these details take on a completely different symbolic meaning. The exhibition is an experience that makes people think, look at themselves and at the same time feel, understand and see in a different way what is happening in the souls of people</p>	



suffering from an eating disorder.	
<p><b>Evaluation of results:</b></p> <p>A major strength of the program is that it works directly with students and the approach to work is interactive and experiential.</p> <p>Over 2000 students have been included in the programme from 17 schools in different cities across Bulgaria. More than 300 parents were involved with the topic. Psychologists from other cities have been trained in the program methodology so they can provide the service in schools at regional level.</p> <p>One of the main indicators of success is that new schools are contacting the team and offer to work together.</p>	
<p><b>What makes it a good/best practice?</b></p> <p>"Life per kilogram" is the first and only charity project in Bulgaria that focuses on the prevention of eating disorders, working directly with students. It has been successfully developing for four years now, showing stability and expanding its activities with new initiatives that provoke reflection on the topic among the general public. The project's activities are covered in news programs, magazines, newspapers, radio programs, television, websites, etc., which contributes to its recognition and popularity among the public.</p>	
Other information	<p>Website: <a href="https://zhivotnakilogram.com/">https://zhivotnakilogram.com/</a></p> <p>Social Media:</p> <ul style="list-style-type: none"> <li>- <a href="#">Facebook</a></li> </ul> <p>Available in Bulgarian.</p>
Contact	<p>Lyubomira Mancheva and Milena Tashkova</p> <p><a href="mailto:info@zhivotnakilogram.com">info@zhivotnakilogram.com</a></p>

## ii. Päihdeilmiö lessons - Finland

Organisation	Ehyt ry (Finnish Association for Substance Abuse Prevention)
Location and timing of practice	"Päihdeilmiö" lessons for secondary level students (VET schools and upper secondary schools) all around Finland.
Title	"Päihdeilmiö" lessons (Substance phenomenon lessons)



<p><b>Objective:</b></p> <p>Ehyt ry organises “Päihdeilmiö” (Substance phenomenon) lessons in secondary level institutions (75-90 min) with a student group to support substance abuse education in secondary level institutions, using their own materials. Since substance abuse and addiction is usually a social phenomenon, and a major contributor to mental health issues in Finland, it is important to address this in a group and provide the students with information and constructive discussion.</p>	
<p><b>Detailed content:</b></p> <p>Lessons of 75-90 minutes organised in secondary level institutions to support substance abuse and addiction education. The lessons follow the same pattern. Interaction, reflection and new perspectives are important for substance abuse education, and the “Päihdeilmiö” lesson utilises these methods. Substance use is considered from a social, cultural and political perspective and as a major contributor to mental health problems in Finland, discussing changes in substance use in Finland from the 20<sup>th</sup> century to the current day, and creating a map of ideas and discussing substance use and its reasons and consequences.</p>	
<p><b>Evaluation of results:</b></p> <p>The project was successful because the lessons reached a lot of students - in 2017-2018 there were nearly 13,000 students participating in the “Päihdeilmiö” lessons. According to feedback, most students considered the training provided them useful information (91 %) and most also considered that they were able to share their own views during the lesson (94%).</p> <p>The lessons are also easily transferable as they are easy to organise.</p>	
<p><b>What makes it a good/best practice?</b></p> <p>The lessons are well designed, they have reached a lot of young people in different institutions (in total 13,000 in 2017-2018), and a lot of additional material have been created in connection with the training.</p> <p>The association also received funding from the Ministry of Social Affairs and Health in Finland for providing the lessons.</p>	
<p><b>Other information</b></p>	<p>Project website: <a href="http://www.ehyt.fi/fi/toinen-aste">http://www.ehyt.fi/fi/toinen-aste</a> Available in Finnish.</p>
<p><b>Contact</b></p>	<p>Anu Rautama <a href="mailto:koulutukset@ehyt.fi">koulutukset@ehyt.fi</a></p>

### iii. Zipy’s Friends - International



Organisation	Prague Primary Prevention Centre
Location and timing of practice	These resources were produced in May 2015 in the Czech Republic
Title	Zipy's Friends ( <a href="#">Czech</a> , Information in <a href="#">English</a> )
<p><b>Objective:</b></p> <p>The objective of Zipy's Friend is to provide resources for teachers to use that will teach primary school children how to deal with everyday difficulties and develop social and emotional skills. The idea behind this is that strengthening emotional management and coping strategies at an early age will allow people to cope better in adulthood and help prevent mental health issues.</p>	
<p><b>Detailed content:</b></p> <p>Zipy's Friends is a program for 5-7 year old children about developing social skills and coping strategies. They come in the format of 24 lessons which are divided into 6 modules that address: emotions, communication, relationships, prevention of bullying, coping with change and coping with loss. These lessons each aim to teach children to deal with life difficulties using 2 rules: a good solution helps you to feel better, and a good solution does not hurt anyone. They are supposed to be carried out across a year and each lesson includes an estimated time for delivery, online images, worksheets, methods to adapt activities if needed and certificates to hand out to children upon completion.</p> <p>Each lesson relates to a story, where you follow twins Lenka and Tonda, their friend Sandra and the stick insect Zipy, through different situations. Each lesson includes 2 interactive activities (these can be talking activities, games, artistic activities, play etc.) that encourage children to find their own way of solving these issues. After the activities a summary and awareness section of the story can be read.</p> <p>In addition to the activities themselves, teachers are provided with an introductory booklet detailing how to use the sessions as well as detailed descriptions of each of the lessons including its overall goal and any necessary materials that will be needed for its completion.</p>	
<p><b>Evaluation of results:</b></p> <p>Zipy's Friends has been shown to create a better classroom atmosphere and interpersonal relations between children. Although aimed at 5-7 year olds, the lessons were designed to be adaptable and useable with older students. The adapted activity guides allows activities to take place between smaller groups, older children, children with learning disabilities etc. The main strength of the resource is that activities are arranged to guide children to develop their own solutions to problems rather than being told what to do.</p>	



<p><b>What makes it a good/best practice?</b></p> <p>Zipy's Friends has had its methodology accredited by the MŠMT (ministry of education, youth and sports). Over the past 6 years they have trained 250 teachers and reached 6,000 children across 100 schools in the Czech Republic and it between 2015-2018, 83 UK schools and 4,000 children trialled the resources for Partnership for Children</p> <p>The Zipy's Friends resources led to the development of Jablík's Friends which is aimed at 7-9 year olds, so slightly older children. These resources follow a similar methodology with the same group of friends but address different areas and have activities that are better suited to the older age range.</p>	
<p><b>Other information</b></p>	<p>Website: <a href="https://zipyhokamaradi.cz/">https://zipyhokamaradi.cz/</a></p> <p>The programme has been implemented in 24 countries so is available in multiple languages including: Bulgarian, Czech, Danish, Dutch, English, French, Icelandic, Lithuanian, Norwegian, Polish, Portuguese, Russian and Slovak.</p>
<p><b>Contact</b></p>	<p>Markéta Čermáková <a href="mailto:zipy@ecinstitut.cz">zipy@ecinstitut.cz</a></p>

#### iv. Preventiimi - Finland

<p><b>Organisation</b></p>	<p>Humak University of Applied Sciences and Ministry of Education and Culture</p>
<p><b>Location and of timing practice</b></p>	<p>Preventiimi was a project financed by the Ministry of Education and Culture and operated within the framework of the Humak University of Applied Sciences, which provides education in the youth sector in the capital region in Finland. The project was active between 2011-2017.</p>
<p><b>Title</b></p>	<p>Preventiimi - substance use prevention skills in the youth sector</p>
<p><b>Objective:</b></p> <p>Preventiimi arranged further education courses for professionals working with young people as well as publications and networking possibilities.</p> <p>Substance abuse and addiction is a major contributor to mental health issues of young people in Finland and addressing it is a part of the National Strategy for Mental Health. Preventiimi's target group comprised of all professionals who deal in some way with substance abuse prevention in their work. This includes personnel whose duties include working with young</p>	





people in municipalities, the third sector, in educational establishments and in congregations. The target group also included personnel involved in the planning and development of substance use prevention in various organisations.

### Detailed content:

Preventiimi arranged further education courses for professionals working with youth on various topics. For most of the courses, the participants were awarded credit points at university level. The further education was arranged both in the form of tutorials and as online studies. The project also created high-quality materials and publications related to the topic. There were different teams assigned for different topics who developed materials on these topics. The project also offered the possibility for networking among professionals.

Preventiimi's long-term objectives were:

- To offer courses and further education nationally for personnel who come into contact with young people or who work with issues relating to young people as part of their job
- To increase knowledge and understanding about substance use prevention activities and substance education within the youth sector
- To co-ordinate a national network
- To actively develop substance prevention in the youth sector, promote professional discussions in the sector and co-ordinate information
- To promote approaches to preventive work as a whole within the youth sector

### Evaluation of results:

The project results were training offered to hundreds of professionals in the field of youth work as well as a large number of publications developed in the project on themes related to substance use aimed for professionals and also other target groups providing valuable information. Links to the publications are available on the website: <http://www.preventiimi.fi/etsi-tietoa/>

The project was successful and transferable in the sense that the materials are available online and very useful for others working in the field of youth work.

### What makes it a good/best practice?

The project was well-implemented with funding from Ministry of Education and Culture the innovative in creating new trainings on the topic of substance use and creating working teams that produce materials on related topics.

### Other information


Website: <http://www.preventiimi.fi>  
Materials available: <http://www.preventiimi.fi/etsi-tietoa/>  
Available in Finnish and English.





Contact	Heidi Odell <a href="mailto:heidi.odell@humak.fi">heidi.odell@humak.fi</a>
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#### v. Prevention services for addictions - Iceland

Organisation	 Technical High School
Location and timing of practice	The practice takes place in Reykjavik, Iceland and started in 2020.
Title	Prevention services for addictions
<b>Objective:</b> <p>The school has a part-time employee who serves as prevention officer, supporting students with various addictions.</p>	
<b>Detailed content:</b> <p>The prevention officer has personal experience with alcohol addiction. Her role is to organise AA style meetings on different addictions (alcohol, drugs, computer games, food etc.), to offer individual support meetings and educational lectures/ discussions in classes on addiction-related topics.</p> <p>She also monitors the alcohol consumption during school dances and tracks the students who were visibly under influence and invites them to counselling to individually work on the roots of their addiction and also to identify if there may be any other issues such as depression or trauma etc.</p>	
<b>Evaluation of results:</b> <p>One of the success factors of this service is that the person providing it has lived experience with addiction and with AA meetings. This can help enhance the students' relating to her. The prevention officer sometimes works together with the psychologist who helps the students more specifically with the psychological sides of their addiction, and the parents in supporting certain students to deal with addiction.</p> <p>The practice is highly transferable to other educational institutions.</p>	



<p>A seemingly weak point of the practice is that the educational lectures are based on medical documents such as Doctor General or The Cancer Society. They seem to focus on the biological side of addiction and not to cover the psychological determinants of it. Another limitation is the fact that the prevention officer is only employed on a part time basis so is only available for a limited amount of hours.</p>	
<p><b>What makes it a good/best practice?</b></p> <p>The informative actions in the program reach over 2000 students every year, which is almost the entire student population in the school. However, the degree of innovation is low, but the fact that this reaches essentially all students in the school shows that it is effective, and lets all pupils know that there is support available for them.</p>	
<p><b>Other information</b></p>	<p>Dissemination actions  <a href="https://en.tskoli.is/">https://en.tskoli.is/</a>  Available in Icelandic.</p>
<p><b>Contact</b></p>	<p>Guðlaug Kjartansdóttir  <a href="mailto:GUK@tskoli.is">GUK@tskoli.is</a></p>

## vi. Mental health education program - Iceland

<p><b>Organisation</b></p>	<p>Hugarafll</p> 
<p><b>Location and timing of practice</b></p>	<p>This organisation works in Reykjavik, Iceland and was formed in 2008.</p>
<p><b>Title</b></p>	<p>Mental health education in schools</p>
<p><b>Objective:</b></p> <p>Hugarafll provides mental health education lectures in schools for students aged 14-20.</p>	
<p><b>Detailed content:</b></p> <p>The program consists of mental health education lectures given to upper-elementary and secondary school, by Hugarafll members - persons with lived experience of mental health challenges.</p>	



The main goals of the program is to normalise mental health issues and difficulties one may encounter. The topics of the lectures focus around:

- The importance of not judging yourself or others
- That emotions, psychological and social factors can have as much influence as physical ones when it comes to mental health problems
- The impact that low self-esteem and self-harm have on mental health, as well as bullying and violence
- The importance of seeking a trustworthy individual for support as soon as you experience distress, thus preventing further distress.
- The many different pathways to recovery and that different ways will work for different people – you will need to find which works best for you.

### Evaluation of results:

The stigma around mental health topics has decreased significantly due to this program and this shows in the language student's use before and after the lectures and their increased openness to talk about their problems and seek help. However some difficulties have been encountered, starting in 2019, as a contradictory educational programme is being provided by Psychology students from a University, (based on the disease model of mental health), which can create confusion in the school student population and can lead to more stigmatisation of mental health problems and people affected by them.

Success factors mainly come from the fact that people who deliver the lectures have lived experience of mental health problems and they deliver a message of hope, showing a living example of recovery being possible and of help being accessible. Also, the program is already well-known among the schools in the Reykjavik area and increasing numbers of schools are requesting this training. Weak elements have to do with time limitations of the speakers, which influence the amplitude the project can have in every year and the extent to each the offer of lectures can match the request from schools.

Transferability is dependent on the available human resources and funding. In Hugarafi's program, funding comes from the municipality and it is sometimes supplemented by national grants.


### What makes it a good/best practice?

The program is innovative mainly through its informational content, which is based on the recovery model, as opposed to the disease model or bio-medical model of mental health problems. Another innovative aspect comes from the fact that it is designed and delivered exclusively by people who have lived experience of mental health problems and have had first-hand experiences through the mental health system. These two are also the main innovative aspects that Hugarafi brings in the mental health field in Iceland.



More than 50 schools have been accessing the program so far, most of them several times.	
Other information	Website <a href="http://hugarafl.is/gedfraedslan/">http://hugarafl.is/gedfraedslan/</a> Available in Icelandic.
Contact	Fjóla Ólafardóttir <a href="mailto:fjola@hugarafl.is">fjola@hugarafl.is</a>

## vii. Shock help - Menntaskólinn Hamrahlið - Iceland

Organisation	 Hamrahlið High School
Location and timing of practice	The practice takes place in Reykjavik, Iceland and started in 2012.
Title	Shock help
<b>Objective:</b> <p>The role of the shock help service is, among other things, to provide assistance to students in the event of a shock or trauma, especially those that may happen within the school and affect large numbers of students (e.g. a student suicide, a serious accident happening at school that was witnessed by many students).</p>	
<b>Detailed content:</b> <p>Within the school there is an active shock intervention council, which consists of a department manager, study and career counsellor, office manager and two teachers.</p> <p>The actions taken by the team consist of:</p> <ol style="list-style-type: none"> <li>1. Psychological first aid -includes being with the individual, being present and helping them answer grounding questions. The person who suffered the shock needs to be able to talk about their experience and someone needs to listen.</li> <li>2. Providing information and education -Those who suffer a shock need to be informed of what symptoms they may experience following the shock, both mental, physical and social. Depending on the case, this can be approached individually or in the group that was affected.</li> </ol>	



3. Emotional ventilation – those affected by the trauma get the chance to express their feelings about it.
4. Emotional processing -The purpose of this evaluation is to work out their feelings by sharing their thoughts and feelings and receive instruction on the normal response to shock.
5. Activation of trauma support system -the support of relatives, friends or other close relatives is essential to those who are affected. They can be invited to meetings and a support discussion or the making of a support plan can be facilitated by the trauma team.


Risk Assessment and Follow-Up -in the aftermath of the shock, students are often home during the first few days. The school assists students in returning to school after a shock, for example by being in contact with relatives.

### What makes it a good/best practice?

It is a good practice because it relies on the above-mentioned steps, which can make it transferable to other schools. Another strength of the practice is that it involves a multidisciplinary team.

Contact	Bóas Valdórsson – School psychologist <a href="mailto:boas@mh.is">boas@mh.is</a>
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## viii. Didactic of emotions- Italy

Organisation	Eumoschool 
Location and timing of practice	The practice took place in Palermo, Italy between 2015 and 2018.
Title	Didactic of emotions
<b>Objective:</b> The objective of the practice is to implement an innovative methodology as part of a new module on emotional education within school environments in order to improve the emotional wellbeing and transversal competencies of <b>students (aged 16 to 20)</b> while supporting the	



professional development of **teachers** and **pedagogical staff**.

### Detailed content:

Based on the Italian education methodology “[Didattica delle Emozioni](#)”© (Didactic of Emotions, DoE), the practice promotes a holistic approach to mental health at school, enabling students to recognise, express and manage their mental distress. The goal is to create a positive environment where potential risks and situations likely to lead to discomfort and stress are reduced and avoided. It is an early prevention practice and is based on the assumption that acknowledging emotions constitute an excellent protective factor.

During daily lessons, teachers can take advantage of a set of different techniques to help students become aware of their internal life, and get to know the mental condition of their classmates, developing self-awareness and stimulating empathy. The practice is also meant to timely identify risk factors associated with the mental health of young students, and eventually plan adequate interventions with the involvement of the family and the support of a psychologist.

The impact evaluation of these techniques is carried out through the following tools:

- 3 meetings with teachers (pre-, mid-, post-), assessing the impact of their experience in implementing the DoE techniques in school thanks to the usage of questionnaires and focus groups;
- Assessment tools to measure the key competences of students administered before and after the implementation;
- Psychometric tests – as SEDS – to measure the students’ behavioural and emotional quotient (administered before and after the DoE implementation);
- Observation tools to support teachers in planning the techniques within their lessons’ flow.

These tools allow teachers to gather practical information on how the techniques work, how the students react to each of them, and what difficulties they face.

### Evaluation of results:

Not having the whole teaching staff actively involved acts as a major barrier to the effective implementation of the project, together with the reluctance of the class and high level of diversity characterising the learning environment. In addition, not all teachers were willing to go the extra mile, focusing more on completing just their daily tasks and complying with the school curriculum objectives.

Nonetheless, almost all the teachers agreed Emotional Education should be integrated into existing school curricula, with dedicated time for interventions.

In terms of transferability, the practice has proved to be extensively replicable as it has been already implemented in other 5 European countries.

### What makes it a good/best practice?



The school is the first institution in the area that integrated Emotional Education into the existing curriculum, providing a concrete and replicable example of mental health inclusion promotion in the education system.

The innovative governance adopted allowed the involvement of the whole hierarchy axis of the institution (teachers, students, school council). Moreover, the set-up of a self-learning [Open Education Resource \(OER\)](#) accessible via Moodle for teachers to learn how to plan and implement interventions enabled them to tailor activities to the specific needs of students in terms of management and expression of their emotions. Eventually, the practice capitalised on the available funding opportunities Initiative under the Erasmus+ programme, facilitating exchange of experiences between partner organisations.

In terms of numbers reached, a total of 6 teachers with very different background applied the methodology described, reaching out to 65 students in 2018.

As a result of the implementation of the practice, the number of conflicts within the classes significantly dropped while the emotional, relational and behavioural competencies of young students targeted increased. Eventually, the format meets the guiding rules recommended by the World Health Organization.


Other information	<p>Website: <a href="https://eumoschool.eu">https://eumoschool.eu</a></p> <p>Social media:</p> <ul style="list-style-type: none"> <li>- <a href="#">Facebook</a></li> <li>- <a href="#">Twitter</a></li> </ul> <p>The project was disseminated through a brochure, newsletter and through articles.</p> <p>Available in Italian, English, German, Turkish, Romanian and Hungarian.</p>
Contact	<p>Vitalba Valenti</p> <p><a href="mailto:vitalba@libero.it">vitalba@libero.it</a></p>





## Best practices that can be adapted to use in VET

### i. Youth program Teenshtein - Bulgaria

Organisation	 Essence Foundation
Location and timing of practice	The youth program Teenshtein has been running since 2006. It started in Sofia and is now also active in three other Bulgarian cities.
Title	“Teenshtein”
<b>Objective:</b> <p>“Teenstein” is a psychological program for young people between the ages of 13 and 19. It aims to provide them with psychological support for dealing with the challenges that come with change and being a teenager, as well as to create a long-term and sustainable space, through monthly group meetings, where young people have the opportunity to further accumulate emotional intelligence and knowledge about one’s self and others.</p>	
<b>Detailed content:</b> <p>The Teenstein Youth Program creates an environment for developing self-awareness and relational awareness skills that are essential for building a strong identity. The program offers 2 up-to-date interactive training sessions, each lasting 4 days. As a kind of journey into their own inner world, during training, young people learn to recognise, accept and share their emotions, explore their own behaviour and reactions, and go beyond their comfort zone. They have the opportunity to deal with difficult and painful situations of the past, learn about their resources and strengths, learn how to overcome fears and insecurity with greater confidence, as well as develop tolerance towards the "different."</p> <p>The main approach is learning through experience, and part of the set topics are: "Myself and others", "My limiting beliefs and behaviours", "Relationships with parents", "Communication between people", "Developing self-reflection skills", "Personal qualities and talents and how do we express them", "Taking on personal responsibility", "Me and the group", "Goals, intentions, dreams" and more.</p> <p>Along with the training sessions, the program also includes regular monthly meetings where young people can continue to deepen their work on the topics discussed during the training. These meetings provide a sustainable and lasting space for sharing and accumulating knowledge about themselves and the world and thus helping young people build a healthy</p>	






identity.	
<p><b>Evaluation of results:</b></p> <p>The biggest success of the program is its sustainability. Over the past 13 years, more than 1000 young people have participated in it. During the first 5 years of the program, there were 1-2 trainings sessions each year in Sofia, and today the training sessions take place regularly across 4 Bulgarian cities. Another testament to the success is that over 60% of the new participants in the training come on the recommendation of teenagers who have gone through the program and are not persuaded or coerced by their parents.</p>	
<p><b>What makes it a good/best practice?</b></p> <p>In Bulgaria, psychological work and self-reflection work are not yet very popular and are even partially stigmatised. In addition, the Bulgarian educational system is not sufficiently focused on the development of soft skills, respectively, self-awareness and relational awareness are not present in any way in the curricula. Although as a non-formal education, Teenstein has developed its own methodology for working with young people. It is the first and still one of the few programs in Bulgaria providing an opportunity for long and in-depth group work with teenagers.</p>	
<p><b>How can it be adapted to VET?</b></p> <p>The Teenshtein program is very suitable to be transferred and used in the VET system as in its essence it is intended for adolescents between the age of 13 and 19, which is the main age group in VET schools.</p> <p>Instead of having the four day format it can be developed as a weekly program, where each meeting has a 2 or 3-hour duration. The number of meetings will depend on the goals of the program and the topics included. If the main goal of the program is to create a good environment of trust, so that difficult and painful situations can be shared and processed, the duration of the program can be at least half a year or more. If the goal of the program is the development of self-awareness and relational awareness skills, it could be of shorter duration, but it is recommendable to have not less than 12 meetings. It can be organized in mixed groups of students from different grades and ages, but it could also be organized based on the age principle (for example only 14 year olds, only 18 year olds or 14-16 year olds; 16-18 year olds, etc.). The topics that are part of Teenshtein can be used, but new topics can be added too, but it is advisable to maintain the main work approach – learning through experience.</p>	
<b>Other information</b>	<p>Website: <a href="https://essence-foundation.bg/teen-courses/">https://essence-foundation.bg/teen-courses/</a></p> <p>Social media:</p> <ul style="list-style-type: none"> <li>- <a href="#">Facebook</a></li> </ul> <p>Available in Bulgarian.</p>
<b>Contact</b>	Milena Nenkova



	<a href="mailto:milena@essence-foundation.bg">milena@essence-foundation.bg</a>
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## ii. Improved mental health services - Bulgaria

Organisation	 National Center of Public Health and Analyses
Location and timing of practice	The project was developed and carried out in Bulgaria from 2015 – 2017. The information and methodologies created as part of this project are available for free use by all interested parties and can be found on the project's website.
Title	Project “Improved mental health care services”
<b>Objective:</b> <p>The main aim of the project was to improve public health and develop evidence-based policies on mental health. The specific objectives of the project were to increase the knowledge of GPs, doctors, psychologists and social workers for early detection and treatment of common mental health issues. Target groups and final beneficiaries were GPs; school teachers and psychologists; those with mental health issues and their families.</p>	
<b>Detailed content:</b> <p>The activities of the project cover two areas – information and training.</p> <p><b>Information:</b></p> <p>The project took a public campaign to raise awareness of mental health problems and suicidal behaviour. A brochure with useful information about depression and anxiety was prepared, printed and distributed across the country, as well as an information leaflet about child aggression in schools and how to overcome it.</p> <p><b>Training:</b></p> <p>Experts from the Regional Health Inspection of the Ministry of Health were trained to work with young people in schools on topics such as depression, anxiety, aggression and self-aggression (which includes self-harm, self-blame, self-humiliate etc). GPs, psychologists and social workers were also trained for the early detection of these disorders. A web portal was developed to provide online training on mental health, providing lectures, case studies and video examples which allow the individual to gain a theoretical knowledge on the most important aspects for the early detection of anxiety and depression. There is also an offline</p>	



“Guide to Early Detection of Anxiety and Depression in Primary Care” which is provided to the professionals. Additional specialised Guides were developed for teachers and psychologists working with students in the 8<sup>th</sup>, 9<sup>th</sup>, 10<sup>th</sup> and 11<sup>th</sup> grades.

In addition to this, material was published regarding the formation of support groups for people that have experienced a suicide of someone close, as well as materials covering suicide prevention, for the rest of the project’s target groups.

Since the beginning of 2017, an online platform for data on suicide attempts was launched.

### Evaluation of results:

More than 2000 professionals from 16 districts in Bulgaria have undergone the online training for early detection of anxiety and depression. As part of a public campaign, 6 TV shows were broadcasted in highly rated national TV stations and 8 radio interviews on national radio. 10 interviews were also published in a national daily paper and 12 materials in regional newspapers. As an echo of all the activities of the public campaign, over 20 news broadcasts on various TV channels mentioned the project, and there have been more than 40 publications in print media and 200 online. The information campaign videos (a 3-minute and a 10-minute video) were available across 10 news sites and health portals.

### What makes it a good/best practice?

This is innovative project for Bulgaria because it is the first large-scale training that has been carried out for GPs and professionals at schools with the aim to prevent and detect mental health issues and symptoms. The project partners are aware that the project results are the foundation for future work, because the attitudes towards the people with mental health conditions and the knowledge regarding mental health cannot be changed in two years. Nevertheless the information campaign, the training courses and the developed offline materials provide considerable information on the topic and place an important emphasis on its significance.

### How can it be adapted to VET?

In order for the goals to be obtained, the project encompasses a wide range of target groups - the final beneficiaries are GPs; school teachers and psychologists; those with mental health problems, their families and other vulnerable groups.

In order to be used into VET, the project could be adapted mostly in its part targeting school teachers and school counsellors..


Detailed manuals for school teachers can be designed on a local (school), regional or national levels that include the most important theoretical aspects for early detecting of depression and anxiety. This way the group of the teachers will be informed and actively included in the process of detecting such states.

Along with all this, a material can be designed for school counsellors to provide them help in creating support groups for students that have experienced a suicide of a close one.



Brochures can also be made, as well as short video clips or another kind of informative materials to be spread amongst the students and the trainees, aiming to prevent suicide and to provide wider understanding of the states of anxiety and depression.	
Other information	Website: <a href="http://www.bgmental.info/bg">http://www.bgmental.info/bg</a> Facebook <a href="https://www.facebook.com/ncpha.government.bg/">https://www.facebook.com/ncpha.government.bg/</a> Available in Bulgarian and English.
Contact	<a href="mailto:ncpha@ncpha.government.bg">ncpha@ncpha.government.bg</a>

### iii. PERMIND - Spain

Organisation	Fundación INTRAS	 Permaculture applied in the recovery process of people with mental illness
Location and timing of practice	The project has been developed in Valladolid, Castile and León and Taroconte, in Tenerife, Canary Island, both in Spain. The project started in June 2017 and finished in August 2019.	
Title	PERMIND Project	
<b>Objective:</b> PERMIND is a horticulture training course for people with mental health issues that uses permaculture as a therapy aiming to improve social and personal development. Permaculture is an innovative, and therefore relatively unknown) system of agricultural and social design principles imitating the no waste, closed loop systems seen in diverse natural systems and inspired in the patterns and features observed in natural ecosystems.		
<b>Detailed content:</b> Permaculture is a multidisciplinary toolbox including agriculture, hydrology, energy, natural building, waste management, animal systems, appropriate technology, economics and community development. It is based on care of earth, care of people and fare share. <ol style="list-style-type: none"><li>1. Permaculture as therapy: Several studies have reported the benefits of horticultural therapy and garden settings in reduction of pain, improvement in attention, lessening of stress, modulation of agitation, decreasing the need for medication, antipsychotics and thereby reducing hospitalisations.</li></ol>		



2. Non-formal learning: Defined as “learning that is intentional from the learner’s point of view and embedded in planned activities not explicitly designed as learning”. PERMIND is based on it as well as the principle of ‘learning by doing’ to acquire knowledge.
3. Mental health challenges: The mental health of its citizens is a vital but under-valued resource within the EU. It is estimated that one in four people experiences a significant mental health problem in their life, so the problem really affects everybody. Although employment is identified as providing people with a social identity, sense of meaning and sense of self-esteem (being linked with EU’s policy objectives of prosperity, social inclusion, security and public health), it is very difficult for this target group to get a job, as declared by the WHO in 2010: “mental disabilities are associated with unemployment rates that can reach 90%”.

Based on the above, the PERMIND project tackles the challenge of providing high quality training in permaculture for people with mental health issues to create sustainable slow growing communities, thus increasing their knowledge, competencies and work opportunities.

PERMIND project has developed an eLearning platform for people with mental illness including an interactive training curriculum based on permaculture and using a learning-by-doing methodology to improve skills and competences of the target group. The curriculum is divided into 6 didactics units:

- Permaculture as therapy
- Design the place
- Designing our edible garden
- Edible garden forest
- Maintenance of our edible garden
- From the seed to the harvest

The permaculture curriculum teaches everything related to ecological practice, environmental awareness and balanced way of life. Topics like agriculture, water harvesting and hydrology, energy, natural building, forestry, waste management, animal system, aquaculture, appropriate technology, economics, community development, biodiversity preservation, resilience, integrated production, soil preservation and so on.

PERMIND project has developed the PERMIND mobile/tablet application as innovative educative tool that complements the eLearning platform.

The eLearning platform is available for free and for long (at least 2 years). During the development of the platform, some technical problems were found but were finally resolved. To what extend the PERMIND learning platform partners consider it a suitable educational tool, the medium score is also high 4,5/5 (in internal survey made to the project’s partners)

### Evaluation of results:

PERMIND project had developed a pilot course for trainees (people with severe and prolonged mental illness) and for trainers to test the didactic materials created for the eLearning platform. The course was implemented twice per week in a relaxing and



comfortable natural environment.

PERMIND wants to change the life of the participants, providing them with abilities, competences and experiences; giving them the chance to use their own hands to learn and make something useful, something that they can share with other people.

The project have trained 75 people with mental illness during a year in contents and practical knowledge related to green farming, as well as empowered by being responsible of feeding the PERMIND application. This innovative education philosophy gives the power to the person; the self-esteem and self-confidence of the participants has increased, something crucial in their recovery process and for their daily life. Trainees (people with mental illness) have improved their manual skills, enjoy the therapeutic effects of working the land and being in touch with nature, spending time with other people, using technology and socialising with others.

The participants in the project have interacted with each other's but also with the local community (showing the garden, selling the eco vegetables, picking up organic wastes, giving the welcome basket to the neighbors, etc.), thus being a great integration tool.

For the participant organisations piloting the course, PERMIND has changed the way in which they manage their gardens and orchards, and even in the way that they manage other training courses and resources, being more sustainable. Professionals of the mental health field have learned another way to work in the land and another way to understand the environment. The feeding of the app was also a different way to provide people with mental health issues with learning activities.

PERMIND project has developed an eLearning platform to teach how to use the permaculture with therapeutics aims for people with mental illness. The platform allows the creation of an easy to use teaching-learning environment, integrating didactic materials and tools of communication, collaboration and educational management always following the common thread of permaculture. The PERMIND platform is addressed to professionals of the mental health sector that are looking for new ways to improve the quality of life of the people they work with. A collection of training units are available in the platform (web page) for free.

### What makes it a good/best practice?

Before this project, permaculture had never been used as a therapeutic activity and at the same time as a realistic and profitable way to make a living. The innovative methodology followed is based on learning by doing (to ensure concentration, interest and involvement) as well as on the co-production principles, where the user/client plays a major and active role in their recovery process.

75 people with mental illness have been trained during a complete year in agriculture techniques based on permaculture philosophy and 10 professional of the mental health field have trained in a transversal methodology that can be applied in others fields.

### How can it be adapted to VET?


Although aimed at the general public, the practices within the PERMIND project can be





<p>adapted into VET.</p> <p>A lot of vocational institutions offer outdoor, physical courses – e.g. horticulture, construction, sports etc. – and therefore have outdoor facilities or creative spaces that can be used. The activities from PERMIND can be adapted into these VET courses, but also offered as an additional activity for all students over lunch or at the end of the day.</p> <p>The main focus of the PERMIND project is to address and improve mental health by participating in mindful activities (in this case gardening) and in vocational education this activity can be accompanied with advice/lessons about the beneficial activities to improve mental health - being outside, being creative, partaking in a regular physical activity, being present and appreciative, creating and giving etc. – all of which are addressed in the PERMIND project by gardening but this can also be adapted to different creative activities. Having students working together and supporting each other towards creating a beautiful garden, whilst learning about positive mental health strategies, is an activity that could be adapted into many VET organisations.</p> <p>The e-Learning course and app can also be used by teachers to increase their knowledge to further improve this activity.</p>	
Other information	<p>Website: <a href="http://www.permind.eu/">http://www.permind.eu/</a></p> <p>Available in English, Spanish, Swedish, Greek and Slovenian.</p> <p>Dissemination actions: PERMIND app, newsletters.</p>
Contact	<p>Maria Carracedo</p> <p><a href="mailto:mcb@intras.es">mcb@intras.es</a></p>

#### iv. MedianetFORM - Italy

Organisation	<p>MediaLabor srl</p> 
Location and timing of practice	<p>The practice takes place in Verona, Italy and started in 2011 and is still ongoing.</p>
Title	<p>MedianetForm</p>





## Objective:

The objective of the practice is to increase the occupational, personal and social development of **people with mental health issues** and **learning disabilities** through the provision of effective and integrated (education, training, employment) guidance services towards the improvement and maintenance of their employment levels.

## Detailed content:

MedianetFORM puts forward an innovative and inclusive approach to labour integration and training activities at the provincial level. The practice is based on strong networking activities and partnership with public authorities and key supporting services, and provides learners with **individual guidance programmes** aimed at evaluating their cognitive and working skills while raising awareness of their abilities, labour market requirements, and available local services. Learners have to enter a service delivery agreement in order to benefit from a labour market access plan, including the following services:

- determining individual expectations
- self-evaluation
- assessment of work abilities and work experience
- counselling
- advice to employers
- long-term job integration monitoring
- job reintegration.

When it comes to assist people with mental health issues, MedianetFORM works in collaboration with a self-help association, boosting the project's ability to reach the goal of sustainable and lasting employment. Complementarily, it also offers **consultancy services** to private companies on disability management at the workplace, including when mental health is classified as a disability, with the view to empower and ensure the equal treatment of people who struggle to enter the labour market because of their personal condition while raising awareness of the importance of mental health inclusion and enhancing the existing service network.

## Evaluation of results:

While the effectiveness of the practice is demonstrated by the high employment rate (59%) of targeted learners experiencing mental health problems, MediaLabor srl faced some difficulties during its implementation due to both cultural and systemic challenges associated with the promotion of mental health and labour market performances at the national level, respectively. In Italy, private firms and the public administration often see mental health inclusion as a burden rather than a value in a context where low employment rates limit chances of labour (re-)integration.

Nevertheless, the practice proved to be successful thanks to the integrated approach it takes, providing complementary services combining training and career guidance, while targeting



both individuals and firms, eventually improving the quality of job matching.

Another important point which is worth noting is that, based on the fact that Regions and Autonomous Provinces in Italy are fully responsible for the establishment and organisation of health structures and services, the practice is potentially highly transferrable. It strongly relies, in fact, on the network of entities dealing with mental health inclusion, which is already in place in most of the Italian territories.

### What makes it a good/best practice?

The innovative potential of the practice resides in the evaluation process used to measure working abilities of learners, namely the **Methods-time Measurement (MTM) method**, as well as in the non-formal nature of the methodologies and activities implemented (e.g. role plays, mock interviews, etc.), greatly contributing to the development of soft skills of learners, which are essential to increase the chance to enter today's labour market. Innovation can also be observed in the way planned activities are funded, that is through the combination of blended financing sources (both European and national funds).

The fact that the organisation responsible for the practice serves as a meeting point of private and public services (rehabilitation centres, vocational training, employment offices and companies), tailoring training provisions to labour market demand and population needs, represents the innovative point of the organisation.

In terms of number reached in 2018, out of 2340 people attending vocational training courses, a total of 920 of them have been involved in labour integration projects while 147 internships/apprenticeships have been activated. At the company level, 36 audits aimed at analysing training and disability management needs have been carried out.

Eventually, in order to ensure accountability and transparency of the system in place, MediaLabor srl obtained the EU Equass certification, and the Quality Management System in place conforms to the international Standard UNI EN ISO 9001:2015

### How can it be adapted to VET?


The adaptability of the methodology applied to the learning process and flexibility of the activities implemented make the MedianetFORM initiative highly replicable within the VET context.

Taking into account that most European countries focus on learning outcomes when devising qualifications, regardless of where, when and how these have been acquired, non-formal life-long learning stands as a tool for creating additional learning opportunities for students. In addition, it greatly contributes to the creation of a participatory learning environment in which every student is encouraged to interact with its peers. VET institutions aiming at becoming more inclusive could relate non-formal methods to the precise functional learning needs of individual participants or small groups of students. Non-formal methodologies and activities carried out as part of Medianet FORM's learning offer (e.g. role play, simulation games, mock interviews, etc.), therefore, can easily be adapted to any VET institution by systematically integrating them into their curricula, combining formal and non-formal education



<p>methodologies and training. They are task- or skill-centred and help both young people and adults learn more about their own needs, strengths and shortcomings in the period when they are growing up to become self-sufficient.</p> <p>The link between the world of education and the labour market is also of paramount importance for VET-quality and attractiveness. While the MedianetFORM project relies on the extensive network of private firms it advises to customise education plans and increase the chance of labour market integration, VET institutions could take inspirations from this practice and offer dual (work-based) learning in which a third of the time is spent on theoretical training and two thirds on practical, in-company training.</p>	
Other information	<p>Website: <a href="http://www.formazionedoncalabria.it/Index.aspx">http://www.formazionedoncalabria.it/Index.aspx</a></p> <p>Social media</p> <ul style="list-style-type: none"> <li>- <a href="#">Facebook</a></li> <li>- <a href="#">LinkedIn</a></li> </ul> <p>Dissemination actions include both advertisements on the website as well as published information available at the organisation's front desk.</p> <p>Available in Italian.</p>
Contact	<p>Cristina Ribul Moro</p> <p><a href="mailto:medianetform@centrodoncalabria.it">medianetform@centrodoncalabria.it</a></p>

#### v. Integr@lavoro - Italy

Organisation	<p>Azienda socio-sanitaria territoriale (city of Milan)</p> 
Location and timing of practice	<p>The practice takes place in Milan, Italy and started in 2011 and is still ongoing.</p>
Title	<p>Integr@lavoro</p>
<p><b>Objective:</b></p> <p>The objective of the practice is twofold: improving accessibility and usability of social and employment services targeting both <b>individuals experiencing mental distress</b> and <b>employers</b>; and promoting mental health at the workplace.</p> <p>To this aim, an organisational model that facilitates interactions between key entities and</p>	



develops a strong network system at the local level is implemented.

### Detailed content:

Integr@lavoro works as a **network platform** promoting and facilitating exchange and contact between individuals, the different entities that make up the local mental health network system, and employers. It consists of a group of psychologists, career counsellors and social workers, who combine their expertise and develop tailored plans for each individual they reach out to through the different provincial mental health departments. The aim is to determine their specific abilities and potential with the view to promote their labour (re-) integration while boosting self-confidence.

Key role is played by the **multi-membership coach**, a professional profile responsible for navigating individuals facing mental issues through the existing labour market opportunities according to their vocation, skills and experience based on its mixed background in social care and job coaching. The support of the coach persists also after the placement process is completed. To complement the support provided, a **web app** has been set up acting as a repository of education and training resources on work-related mental health issues and inclusive opportunities targeting both individuals and firms, as well as a management system that connects professionals and citizens, facilitating the encounter of supply and demand of both rehabilitative and training services.

At the governance level, all the different entities part of the network must comply with inter-institutional agreements defining procedures, financial resources and objectives for each programming period. These agreements are systematically renewed to keep up to date with legislative reforms and address the constantly changing needs of the population.

The practice includes various services such as the analysis of business needs and work environment dynamics, job matching, interviewing of candidates, and constant monitoring of their professional career.

Services available to employers are:

- Selection of suitable employees according to their background and professional experience, provision of targeted training, and best placement according to the needs and structure of the workplace;
- advice and technical support to help employers comply with legislative provisions on the mandatory employment procedures of people with mental health issues;
- permanent support to the company in the dealing with employees with mental health issues.

Services offered to individuals include:

- enhancement of transversal professional skills;
- career coaching aimed at work integration;
- ongoing dialogue with organisations, associations, foundations and companies dealing with health and employment.



Integr@lavoro also runs specific [Working Groups](#), which are designed to help people with mental health issues acquire specific skills to better integrate at work. Among them is the “Laboratorio Teatrale” – a theatre workshop to develop and strengthen adaptability to environmental changes, and help candidates build a positive image of themselves.

### Evaluation of results:

Difficulties founded during the implementation of the practice mainly relate to the cultural approach to mental health inclusion adopted at the national level. Mental health remains a controversial topic with a great deal of prejudices and stigma, limiting the chances of learners to be re-integrated into the labour market based on their vocation and aspirations. In addition, political instability leads to frequent legislative reforms at the national level, requiring periodic adjustments of agreements between key actors involved, significantly limiting the impact of the practice.

On the other hand, factors of its success are the different “working groups” activated every year with the view to offer an integrated and comprehensive service dealing with different aspects of mental health inclusion, such as employability assessment, self-confidence and empowerment, verbal and listening skills improvement.

Eventually, the practice capitalises on the existing governance structure at the local level, which is identical across the 20 Italian regions, demonstrating it can be easily replicated.

### What makes it a good/best practice?

The degree of innovation of the practice lies on two main elements: the accessible and easy-to-use web app set up for the provision of key education and training resources, that serves as a direct link to labour market (re-)integration opportunities; and the quality assurance system in place, which is managed by an ad hoc professional profile with specific competences in social services provision and employment called “the coach”, appointed to act as a mediator between potential employers and the candidate.

The inter-institutional agreements between all the different entities involved represent the innovative point of the organisation. They make it easier for the users to become aware of their mental health status (also among their families) while increasing their chances to enter the labour market.

In terms of numbers reached, out of the 906 people involved between 2012 and 2018, 45% took part in at least one career coaching session, 38% completed a traineeship, and 31% entered the labour market. It is worth mentioning the low level of drop-out during the same period of time, which was only 3%.

Eventually, the success of the practice is confirmed by the establishment of additional network platforms across the region based on this model and the confirmation of already existing agreements with key actors involved. The practice also promoted self-entrepreneurship among targeted learners.



## How can it be adapted to VET?


Although initially conceived as one of the pillars of the local mental health network system, the Integr@lavoro project has two main distinctive elements which can easily apply to vocational education: the multi-membership coach and the web app.

Generally, mental health is subsumed into wider equality and diversity responsibilities within VET institutions, preventing them from maximising the value of mental health inclusion in the long-term. The professional profile of the multi-membership coach could be adapted to the specific context of vocational education, where a dedicated member of the staff could work as a contact person for students experiencing mental distress, timely detecting potential risks and situations likely to lead to more serious problems. Students should learn ahead of time where and how to access this service while the mentor advises the institution on suitable internal procedures and policies to be developed according to the information collected thanks to the bilateral relationships established and maintained throughout the academic year.

E-learning represents an effective way of improving the quality of teaching and learning in VET schools, eventually improving their responsiveness to labour market and individual needs. It is for this reason that, starting from the basic idea of setting-up a web app working as a repository of training materials, any VET institutions could equip itself with an online platform developed with open-access technologies with the possibility of individually adapting the learning content and the learning pace to the needs of each student. The e-learning methodology, in fact, has extensively proven to increase the motivation of learners while promoting inclusion in a variety of educational contexts, encouraging continuous exchange among peers and with teachers.

Other information	Website: <a href="http://www.integralavoro.com/">http://www.integralavoro.com/</a> Social media: <ul style="list-style-type: none"><li>- <a href="#">Twitter</a></li><li>- <a href="#">YouTube</a></li></ul> Dissemination actions include promotion in a brochure and compiling an annual report. Available in Italian.
Contact	Domenico Versace <a href="mailto:info@integralavoro.com">info@integralavoro.com</a>

## vi. Incorpora programme - Spain

Organisation	Obra Social “la Caixa” 
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Location and of timing practice	Incorpora Programme and Incorpora Mental Health have been developed in 22 Spanish territories. The Incorpora Programme was launched in 2006 and Incorpora Mental Health Programme in 2015 and both are ongoing.
Title	Incorpora Programme: Incorpora Mental Health
<p><b>Objective:</b></p> <p>Incorpora is a labor intermediation programme based on the needs of the social and business world. Within this programme there is Incorpora Mental Health, aimed at people with mental health problems. Its objective is to facilitate the occupation of these people, the necessary support to both the company and the individual and to combat the stigma that exists around mental health problems.</p> <p>The programme is responsible for training companies, as well as people with mental health issues who are looking for employment and professionals who deal with people with some kind of mental health issues.</p>	
<p><b>Detailed content:</b></p> <p>Incorpora Mental Health promotes the social and labour integration of people with mental health issues by collaborating with companies and organisations. There are a network of entities that offer training and job placement opportunities to those with mental health issues looking for employment, such as Red Incorpora who offer training throughout the Spanish territory. They also offer free advice and support to companies that have people with mental health issues on their teams in order to strengthen internal actions and reduce stigma.</p> <ul style="list-style-type: none"> <li>• For companies: the Programme advises companies to show them the advantages of hiring a person with mental health issue. In addition, they are offered training to adapt potential workers to the needs of companies.</li> <li>• For individuals: the Programme helps people with mental health issues who cannot easily find work. It helps increase the employability of these people through training and courses to enhance social and labor skills. The training includes internships or experience in companies to facilitate entry into the workplace. Also, if the person is interested in creating their own business, there is another programme called Autoempleo Incorpora.</li> <li>• For professionals: Red Incorpora offers training courses, practical and dynamic of various topics, selected from the needs of the sector. Through an online platform, professionals can find courses to facilitate the inclusion of people with mental health issues in the workplace. <ul style="list-style-type: none"> <li>- Virtual training: online support courses in the labor integration of people with mental health issues. These courses offer continuous training.</li> </ul> </li> </ul> <p>Resources: tools, training materials and resources selected to facilitate the daily work of the</p>	






socio-labor insertion professionals.
<p><b>Evaluation of results:</b></p> <p>Within the Incorpora Mental Health programme there is a network of collaborating entities and organisations formed by 375 social entities, grouped into 22 territories. When a person with mental health issues wants to begin their labour insertion process, contact the coordinating entity of their territory.</p> <p>The programme has its own methodology and incorporates guides and manuals of quality indicators of the Incorpora programme.</p> <p>In the training offered by this programme, high rates of employment are achieved. In many of the courses offered, the target of 50% employment has been exceeded. Even in some training courses, 90% of job placement has been reached. Much of the success of these formations is due to the high participation of the participants and their interest in the contents.</p>
<p><b>What makes it a good/best practice?</b></p> <p>One of the most innovative points of this good practice is that of training to facilitate work placements, work experience and employment. The Incorpora programme offers Incorpora Training Points (PFI) aimed at people at risk of social exclusion, those who are vulnerable and those who have mental health issues. Through training with courses with cross-cutting content, job placement is facilitated and the employability of these people is improved. Different entities and organisations are part of the PFI. These organisations offer professional training and education that allows these groups of people to enter or return to the labor market.</p> <p>The Incorpora programme has a network of 407 social entities, grouped into 20 groups distributed throughout the Spanish territory.</p>
<p><b>How can it be adapted to VET?</b></p> <p>The Incorpora Programme and Incorpora Mental Health can be easily adapted in VET institutions.</p> <p>Professionals and teachers from VET institutions could be trained through the courses that Incorpora Programme offer or adapt the courses to their own needs. This programme could also be adapted for youth and students of VET institutions.</p> <p>Within Incorpora Mental Health, a methodology is described that could be adapted in VET institutions, depending on their needs. The methodology is based on an online course that offers knowledge, tools and practical resources to address the process of socio-labor integration of people with mental health issues.</p> <p>The course provides a series of basic resources that both teachers and students can apply daily. Thanks to this adapted methodology, young students will learn while doing different activities, in an easy and fun way.</p>



Other information	<p>Website: <a href="http://www.incorpora.org">www.incorpora.org</a></p> <p>Social media:</p> <ul style="list-style-type: none"> <li>- <a href="#">Facebook</a></li> <li>- <a href="#">Twitter</a></li> </ul> <p>Dissemination actions consist of current news being published on the website.</p> <p>Available in Spanish and Catalan.</p>
Contact	Email application form on website

## vii. Prelaboral Services: Solidarity furniture restoration experience - Spain

Organisation	<p>INTRESS</p> 
Location and timing of practice	The project started in 2019 and was developed in Catalonia, Spain. In Catalonia Intress has two Prelaboral services, one it is in l'Alt Urgell (La Seu d'Urgell), the other one it's in Vallès Oriental (Granollers). Both services share the same goals and methodology.
Title	Prelaboral Services: Solidarity furniture restoration experience
<p><b>Objective:</b></p> <p>The Prelaboral is a specialised social community service in coordination with public social services, as well as public and private mental health services and other training and labour services. The work of the Prelaboral services, as a job training and employment service, is to attend people with social problems as a result of a mental health issues, in order to teach and train them to increase and improve their social and labour skills and employability with the aim to facilitate their workplace insertion. The Servei de Rehabilitació Prelaboral is managed by INTRESS (Institut de Treball Social I Serveis Socials). The Prelaboral works with individuals from 16 years old and onwards.</p>	
<p><b>Detailed content:</b></p> <p>The aim is to train and qualify the users (those with mental health issues) teaching them basic work skills to increase their possibility of employment. The goal is to be a reference service in help people with mental health issues who wants to recover and improve their social and employability skills in order to introduce or reintroduce themselves in the labour market.</p>	



The population with mental health issues which need to improve their skills arrive to Prelaboral, mostly, though referral from mental health services.

The principal aim of the Prelaboral services is to offer training workshops in order to help individuals with mental health issues improve or acquire functional social and employability skills.

The programme they offer is made up of five different areas, three of them about training social and employability abilities and two of intervention:

- Workshops on basic work and instrumental skills.
- Workshops on attitudinal and social abilities.
- Labour counselling, employment guidance and job searching sessions.
- intervention with families to communicate the importance they have in supporting the mental wellbeing of the individual accessing the services
- individual sessions tracking the improvement of skills and any difficulties

### Evaluation of results:

Some examples of the different services that Prelaboral offer are: the restoration of garden benches, dining chairs, trunks, etc. produced for sale. (<https://www.grapats.com/>)

The Prelaboral works with population from 16 years old and onwards. Especially in the youth population they observe additional difficulties in their rehabilitation process. Some of these are:

- Interruption of the educational stage due to the onset of the mental health issue
- Weak professional orientation because of the life period in which they are
- Professional training interrupted for the same reason
- Low self-esteem, that may be affected by the perception of being different or for being socially isolated for example

With all users, but especially with the youth group, they work using a Service-Learning methodology.

This initiative is highly transferable and seeks to be a reference within the Spanish territory.

### What makes it a good/best practice?

This service seeks to be a reference within Catalonia and Spain. It is based on the innovative Service-Learning methodology and can be applied in many collaborative projects. Learn by offering a service to the community. In Service-Learning, students identify in their immediate environment a situation whose improvement they commit to, developing a solidarity project that brings into play knowledge, skills, attitudes and values. It is an educational practice in which students learn while acting on real needs in order to improve it.

This pedagogy integrates the community service with education or training workshops as well as self-knowledge, as a way to enrich the learning experience. This methodology also teaches



citizenship, encourages social involvement and strengthens the common good of the communities.

### How can it be adapted to VET?

Although aimed at the general public, the practices within the Prelaboral Service project can be adapted into VET.

The activities from Prelaboral Service can be adapted into these VET courses, but also offered as an additional activity for all students.

The main focus of the Prelaboral Service project is to address and improve mental health by participating in mindful activities, in this case furniture restoration. In vocational education this activity can be accompanied with advice and lessons about the beneficial activities to improve mental health - being creative, participating in a regular activity, etc. – all of which are addressed in the Prelaboral Service project by a specialised social community service but this can also be adapted to different creative activities.

Having students working together and supporting each other towards creating furniture or other restoration tasks, whilst learning about positive mental health strategies, is an activity that could be adapted into many VET organisations.

#### Other information

Website: <http://www.intress.org/>  
Social media: [Facebook](#)  
Dissemination actions have mostly been through a [blog](#).  
Available in Spanish and Catalan.

#### Contact

Isabel Gil: [isabel.gil@intress.org](mailto:isabel.gil@intress.org)



## Part 3: MH+ Charter for inclusive mental health practices in VET

This Charter has been created to help VET organisations (and other educational organisations) foster a tolerant, inclusive and accepting environment in which student and staff mental health is recognised and supported. Below are a series of approaches, policies and procedures that a mental health positive VET organisation can adhere to, to demonstrate that it is committed to support the mental health and wellbeing of all of its staff and students. Overall, a mental health positive VET organisation is a place where:

- Proactive education and training are offered to all students and staff to help them fully understand mental health and different support pathways.
- Information about mental health and where to receive support is easily accessible to all.
- All stakeholders (teachers, parents, all members of staff etc.) respect one another and are able to have open conversations.
- Everyone is taught to recognise and resist stereotypes, not to tolerate mistreatment (discrimination, stereotyping, teasing, bullying, harassment), including those based on mental health and to protect students, parents, teachers and other staff from all forms of discrimination.
- Create a culture of support so that students' voices are heard, their talents, interests and career aspirations are respected, their training and development needs are adequately supported and their work and feelings are valued.

### General Policies

Mental health positive VET organisations:

- Have a dedicated mental health policy that outlines how it will support student and staff mental health, how it will support staff learning and training, and all internal procedures around communication and discussing mental health with individuals (including confidentiality when personal discussions around mental health arise). This policy should also include an implementation plan of this Charter, describing specific measures to be taken for each section.
- Have a school ethos of equality and respect and ensure that all activities are inclusive of all students, and does not discriminate, regardless of gender identity, sexual orientation, age, race, ethnicity or origin, religion or belief, disability or health status, including mental health. This should be followed by all students and staff members.
- Provide a space marked by respect, acceptance and confidentiality for students to speak openly about their mental health challenges.
- Identify and train staff members who function as leads around mental health work or issues (**IO3 Mental Health Champion**). These could be teachers, teaching assistants, school counselors etc.
- Have readily available written materials and information about mental health and wellbeing, the variety of mental health issues, mental health advocacy groups and support mechanisms.
- Have signage/imagery (such as posters, banners, email signatures etc.) promoting talking and being open about your mental health.
- Present opportunities for all students to take part in decision-making about policies that affect them (this can be done through student councils etc.).



- Support student campaigns and run activities each year that promote mental health – e.g. at mental health awareness week or a wellness week.
- Run lunchtime or after school activities and encourage students to participate and find activities that they enjoy as this helps promote wellbeing and helps students develop important social connections.

## Staff training and personal development

- All staff are aware of the policies and internal structures in place regarding mental health and are updated about any changes.
- All members of staff (including teachers, administrative staff, cafeteria staff, bus drivers etc.) are provided training on young people's mental health, the variety of mental health problems there are and signs of emotional distress or suffering. This training should be comprehensive and updated regularly.
- There are Identified staff members who function as leads around mental health work or issues (**IO3 Mental Health Champion**)
- Staff are also supported with their mental health and sessions are provided on key issues such as dealing with stress and burnout.

## Teaching and Training approaches

Mental health positive VET organisations use teaching and learning approaches which instill greater awareness and understanding about mental health. Whether alone or integrated into other aspects of course delivery, these approaches are the most direct way to impact students:

- Actively address and educate students about mental health. This is done through assemblies, presentations by guest speakers from mental health advocacy groups, and informal activities within lessons.
- Use lesson plans that educate young people about emotional distress and suffering, mental health and their signs, and tackle mental health stereotyping.
- Use video, books, social media or other forms of media that present information and ideas around mental health and promote discussion.
- Create space for students to form and articulate their own understanding and to share their experiences of mental health.
- Use lesson plans that help students see, appreciate, support and understand one another as individuals.
- Offer sessions to all students on key issues such as dealing with exam stress, dealing with body image, self-image, social relations, managing anxieties, developing resilience, resolving conflict, communication etc.
- Discussions should be held with disruptive students to see if there are any signs of emotional distress / mental health issues and to see if support mechanisms can be found, before taking disciplinary actions such as detentions and exclusions.



## Communication

Interpersonal communication reinforces the VET organisation's commitment to mental health inclusion.

In a mental health positive VET organisation, teachers:

- Recognise that everyone's mental health is important, that we can all influence each other's mental health both positively and negatively, and that everyone should communicate and interact with empathy, respect and in ways that are supportive of other people's mental health
- Promote discussions around mental health which revolve around individual experiences, rather than diagnosis, and stresses the importance of social support
- Stress the idea that seeking support is a form of courage rather than a weakness
- Use language that is inclusive of all communities and which does not reinforce stereotypes
- Let students know that their strengths are recognised
- Celebrate both academic and non-academic achievements of students

Developing a whole school approach towards mental health is vital in supporting the mental health of students. This includes communicating with parents/carers:

- Provide written information to parents/carers on the importance of talking about mental health with their children, the policies and training for teachers that the school has in place as well as resources around where to get help.
- Discuss and hold presentations on mental health with parents/carers to help them understand the complexity of mental health and the importance of being open about discussing it at home, and signs of emotional distress and how to support their child.
- Support families of students who have mental health problems. Help parents/guardians understand what their child may be going through and signpost towards useful information. Make sure that the student has a say in the discussions about them.
- Support the student to express their own perspective and needs.
- With families, share ways to talk about mental health that are affirming and inclusive.

## Access to information

- Information about mental health and where to get support is readily available to students in publicly visible locations in the form of flyers, posters, brochures etc. This will include the introduction of relevant materials in the library and access to electronic and printed materials etc.
- Information and advice about general mental wellbeing is also presented – e.g. dealing with exam stress, communication, making friends, self-confidence, expressing yourself, dealing with family issues etc.
- The mental health policy is accessible and updated to all students and families on the organisation's online areas.
- There is clear signage (for example through posters, banners, teachers email signatures and social media posts etc.) throughout the organisation that mental health is a core value and that students can speak to teachers.





- Ensure access to a specific person at every VET organisation who would consult students, teachers and the non-teaching staff on issues related to mental health (**IO3 Mental Health Champion**).
- Cooperate with students, teachers and parents in the implementation of projects and initiatives – e.g. wellness weeks.

## Counteracting Bullying

Within education, bullying can impact a young person's mental health and there is a duty to prevent bullying and support victims.

- Educate students about the forms that bullying can take (emotional, physical, ignoring), the effects it has and how students can contribute to a bullying-free environment.
- Policies have been put in place on how staff should deal with instances of bullying.
- Introduce effective mechanisms for protecting the victims of bullying and violence, giving priority to ensuring their safety. These mechanisms should involve effective and prohibitive sanctions for the perpetrators, which aim at correcting their behaviour.
- Discussions are held with bullies around their emotional wellbeing and mental health to see if any support can be provided to them.
- Organise a centralised system for the collection of statistical data on the occurrence of bullying and how it has been handled.
- Challenge student comments based on stereotypes.
- Sanction hate speech in public in the name of reinforcing the principles of equal treatment and acceptance of all individuals and offer an alternative to it, by modelling compassionate speech.
- Ensure hallways and cafeterias have trusted individuals present to increase a sense of safety.
- Enable all students to have access to support services for victims of violence, including psychological support.



# MH+ partners

Mental Health + project is formed by:

## Aspire-igen (UK)

The Aspire-igen group is the largest careers and training organisation in the Yorkshire region (an area with a population of over 5 million). The group is a not-for-profit social enterprise with 22 years' experience of supporting young people and adults into employment.

Website: <https://aspire-igen.com/>



## CESIE (Italy)

CESIE is a non-profit, apolitical, and non-governmental organisation based in Palermo (Italy) and established in 2001. CESIE promotes cultural, social, educational and economic development at local, national, European and international levels.

Website: <https://cesie.org/>



## Learnmera Oy (Finland)

Learnmera Oy is a private adult education provider and translation company, focused mainly on corporate clients in the greater Helsinki area providing private executive business language lessons.

Website: <https://learnmera.com/>



## Business Foundation for Education (Bulgaria)

Business Foundation for Education (BFE) is a Bulgarian non-government organisation, established in 2005 to act in public interest. The Foundation has been implementing a variety of innovative national and EU initiatives impacting on citizens' employability and competitiveness directed to various target groups.

Website: <https://www.fbo.bg/en/>



### **Hugarafll (Iceland)**

Hugarafll (Mindpower) is an independent association of people dealing with mental illness. The organisation is built on ideas on empowerment, recovery, equality and cooperation between users and professionals.

Website: [www.hugarafll.is](http://www.hugarafll.is)



### **INTRAS Foundation (Spain)**

INTRAS is a non-profit organisation founded in 1994 dedicated to high quality research and intervention in the field of mental health. The organisation consists of 12 centres in 9 different provinces in Spain, with 189 interdisciplinary professionals (psychiatrists, psychologists, educators, art-therapists and professionals from social and economic fields) carrying out research, training, clinical practice as well as cultural and sport activities

Website: [www.intras.es](http://www.intras.es)

