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PERSPECTIVES FROM TEACHERS AND SCHOOL LEADERS ABOUT LONG-TERM SUSTAINABILITY: A CHALLENGE FOR MENTAL HEALTH PROMOTION INITIATIVES IN EDUCATIONAL SETTINGS ¹

Introduction

The chapters in this book report research into a range of programs, across many countries, which have as their central concern the promotion of young people's mental health and wellbeing. Funding has been directed towards introducing programs into primary schools, secondary schools and early childhood centres to develop young people's mental health and wellbeing. These have included initiatives such as regular social and emotional education for all children, establishment of more effective and efficient referral pathways, and working collaboratively with parents/carers to support children and youth. During the initial phases of these initiatives, attention has been directed towards designing and testing good quality evidence-based programs. As efficacious programs have been rolled-out, attention has turned to achieving good quality implementation of program components. Now, as the field has matured, the key issue that emerges is the sustainability of programs once the initial implementation phases are over, and start-up resources (often substantial) are withdrawn. This issue of sustainability is of concern across international boundaries. In this chapter I report a research project that investigates teachers' and school leaders' perspectives about what has worked, and what has not worked, in achieving sustainability of wellbeing and mental health promotion initiatives in educational settings.

Background

The World Health Organization (WHO, 2017) reported the sobering information that around 20% of the world's children and adolescents are estimated to have mental disorders or problems, with about half of mental disorders beginning before

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the age of 14. Slade et al. (2009) advised that the highest reported prevalence of mental health difficulties in an Australian sample, just over one in four (26.4%), was in the age group 16-24 years. Similarly, Sawyer et al. (2007) reported results of a survey indicating that 14% of Australian children and adolescents were identified as having mental health problems, but only 25% of children and youth with mental health problems had attended a professional service during the six months prior to the survey.

The WHO reports that:

- More than 450 million people suffer from mental disorders. Many more have mental problems.
- Mental health is an integral part of health; indeed, there is no health without mental health.
- Mental health is more than the absence of mental disorders.
- Mental health is determined by socio-economic, biological and environmental factors.
- Cost-effective inter-sectoral strategies and interventions exist to promote mental health. (WHO, 2016)

Following from the final point above, advocates such as the WHO (2016), the World Federation for Mental Health (2014) and beyondblue (2016) highlight the burden of mental illness to individuals, families and communities, and make a clear case for nations and communities to attend to people's mental health and wellbeing. For example, The Council of Australian Government's Roadmap for National Mental Health Reform 2012-2022 (COAG, 2014) identified promotion, prevention and early intervention for positive mental health as essential actions. Educational settings such as schools are conducive contexts for such health promotion activities.

A number of authors have undertaken evaluations that illustrate that well-designed and well-implemented social-emotional wellbeing programs can lead to positive changes in students' mental health and wellbeing (Adi, Killoran, Janmohamend, & Stewart-Brown, 2007; Askell-Williams, Dix, Lawson, & Slee, 2013; Durlak & DuPre, 2008; Weare & Nind, 2011). Furthermore, it has been found that many good quality educational initiatives are implemented well. Examples include promotion of student resilience, wellbeing and positive mental health; cyberbullying prevention; social skills training; and a range of health education programs such as sex and drug education. However, although many effective school-based programs are well designed, implemented with fidelity to program goals, and evaluated to have positive benefits for participating students, there are concerning reports, nationally and internationally, about poor program sustainability once start-up enthusiasm and resources are exhausted (Goodson, Murphy Smith, Evans, Meyer, & Gottlieb, 2001; Nilsen, Timpka, Nordenfelt, &

Kindqvist, 2005; Rohde, Shaw, Butryn, & Stice, 2015; Scheirer, 2005; Shediach-Rizkallah & Bone, 1998; Swain & Drake, 2010).

And yet, an essential component of implementation success is sustainability (Gruen et al., 2008; Pluye, Potvin, Denis, Pelletier, & Mannoni, 2005). Sustainability has been variously defined, but generally includes embedding, diffusion and routinisation within initial contexts, and also, in some accounts, upscaling to wider contexts (e.g., from one school to a whole school district). Whereas guidelines for developing and evaluating program implementation may include a requirement for long-term follow-up (Craig et al., 2008), this typically refers to long term follow-up of the participants (ongoing behaviour change or improved outcomes), but may not refer to long-term follow-up of the program itself, such as whether it is embedded, adapted, refined, up-scaled, and so on. For example, Bierman et al. (2013) observed that,

recent research has validated the power of evidence-based preschool interventions to improve teaching quality and promote child school readiness when implemented in the context of research trials. However, very rarely are follow-up assessments conducted with teachers in order to evaluate the maintenance of improved teaching quality or sustained use of evidence-based curriculum components after the intervention trial. (p. 1194)

By way of example, the Australian Commonwealth Department of Health and Ageing funds the MindMatters secondary schools, the KidsMatter Primary Schools, and the KidsMatter ECEC mental health promotion initiatives in all Australian states and territories. The KidsMatter Primary School initiative (KidsMatter, 2013) was trialled in 100 schools during 2007 to 2009. The evaluation of KidsMatter Primary by Slee et al. (2009) followed the implementation framework proposed by Domitrovitch et al. (2008), consisting of indicators of Fidelity, Dosage and Delivery. Although the evaluation study was longitudinal, in that it tracked students' progress over the two year duration of the initiative, the evaluation design did not track longer-term *program* sustainability. Interestingly, in an independent follow-up study in 2010, the 100 trial schools were contacted by telephone and asked whether they continued to be a 'KidsMatter' school (Askell-Williams, Slee, & Van Deur, 2013). Twenty of the 100 trial schools reported, within the school year following the highly resourced two-year initiative, that they no longer identified themselves as KidsMatter schools.

However, as Askell-Williams et al. (2013) pointed out, analysing the reasons for this drop-out rate is not a straightforward task. Some schools said that they were KidsMatter schools, but were only implementing some of the program. Other schools said that they were not KidsMatter schools, but were still embedding social and emotional learning throughout the curriculum. The schools gave the following main reasons for dropping out of KidsMatter:

- Changing and competing priorities in the school

ASKELL-WILLIAMS

- Leadership change impacting on continuity and sustainability
- Structural change through school mergers
- No longer labelling various activities as KidsMatter
- Changed Coordinator and lack of continued external support
- Insufficient ongoing promotion of KidsMatter at the State level.

This KidsMatter example of the short-term life (in some schools) of a good quality educational program is not isolated (Askell-Williams, Slee, et al., 2013; Devaney, O'Brien, Resnik, & Weissberg, 2006; Scheirer, 2005; Wigelsworth, Humphrey, & Lendrum, 2012a, 2012b). For example, Elias et al. (2003) found that only six of fourteen sites were still using evidence-based social-emotional curricula five years after their introduction. Similarly, a follow-up study of the Life Skills Training school-based prevention program found that teachers were rarely implementing the program according to its original design (Dusenbury, Brannigan, Hansen, Walsh, & Falco, 2005).

One issue is that teachers' education and skill levels may also affect their capabilities for sustained program implementation (Bierman et al., 2013). This has been evident in Head Start in the US and also in the KidsMatter ECEC Initiative in Australia, where ECEC educators vary considerably in their formal education, ranging from high school education to technical certificates, Bachelor's or Master's degrees (Askell-Williams & Murray-Harvey, 2015; Domitrovich et al., 2009). Meanwhile, in secondary schools, Humphrey, Lendrum, and Wigelsworth (2010) found that the range of teachers' interpretations and methods of delivery of the Social and Emotional Aspects of Learning (SEAL) program substantially influenced quality of delivery. This in turn led to disappointing short-term outcomes, which could be expected to translate into poor long-term sustainability (Pluye et al., 2005; Pluye, Potvin, & Denis, 2004; Pluye, Potvin, Denis, & Pelletier, 2004; Scheirer, 2005). Although secondary school teachers' levels of education are at the Bachelor and Masters level in their subject matter domain, they might still not have prior education and experience with subject-matter and pedagogy for social and emotional education. Another difficulty in secondary school settings is that some teachers do not believe it is their role to deliver curricula about topics such as promoting student mental health (see Cefai and Askell-Williams in this volume, also Askell-Williams, Lawson, Murray-Harvey, & Slee, 2005; Wolpert, Humphrey, Belsky, & Deighton, 2013). Early stage implementation difficulties such as these have the potential to foretell poor long-term sustainability.

Askell-Williams, Slee and Van Deur (2013) reviewed extant literature and synthesised a list of implementation issues needing attention. This synthesis, shown in an adapted form in Table 1, suggests that the various phases of implementation each require phase-specific questions about processes as well as outcomes. The tendency of program evaluators to ask these types of questions only

at the end of the trial period of a program can mean that it is too late to redress issues and oversights that might be leading to the long-term demise of the program.

Table 1: Framework for monitoring and feedback during the trials of educational initiatives (adapted from Askell-Williams et al., 2013).

Phase	Questions to be addressed
Promotion	What is the demonstrated efficacy of the initiative? How well is information about the value of the initiative promoted to the site and the broader community?
Readiness	To what extent do the staff/communities recognise the imperative to introduce the initiative? What capacity building is required? What barriers need to be addressed?
Adoption	Does the initiative have the support of the staff, parents/carers, site leader, and other community stakeholders? What pre-intervention modifications need to be made?
Initial Implementation	To what extent is the initiative rolled-out with attention to fidelity, dosage and engagement with the processes of delivery? What is working well/ needs to be changed?
Sustainability	What aspects of design and the start-up phase establish conditions for long-term sustainability? Where do components for ensuring sustainability feature in each phase of the roll-out of the program? Who else needs to be involved? What is missing?
Monitoring and Feedback	What monitoring and feedback systems are in place, and do they provide timely information? Who gets the information? Who is responsible for follow-up? How does renewal occur?
Incentives	Are there incentives or recognition that implementation milestones and desired outcomes are achieved? Are these incentives valued?

A review conducted by the US National Institutes of Health (OBSSR, 2007) proposed that further systematic research is needed on the phase(s) of long-term sustainability of successful programs. The lack of sustainability research on health promotion initiatives was also noted by Salmon et al. (2011) who observed that such research is rarely reported, and Greenberg (2010), who called for the development of a new science of implementation and sustainability. The recently published Handbook of Implementation Science (Kelly & Perkins, 2012) noted that,

implementation science [is] a new area of scientific, academic and practitioner interest focused on exploring and explaining what makes interventions work in real world contexts... Paradoxically, this new science has arisen mainly from the study of failure. Psychological interventions, or indeed any interventions involving people and resources in natural contexts, have notoriously unpredictable outcomes. (p.3)

Well-designed, trialled and effective initiatives can have a significant impact on child outcomes over time, but only if they are maintained with high-quality implementation (Durlak & DuPre, 2008). Partial, ad hoc, sporadic program maintenance by some teachers and not others within a school system is highly unlikely to achieve the original goals set for the initiative. The goal of sustained, high-fidelity program implementation is difficult to attain - evidence-based interventions often fade quickly or are replaced by alternative programs after initial funding and implementation support is withdrawn (Bierman et al., 2013; Elias et al., 2003; Florian, 2001; Han & Weiss, 2005; Pluye et al., 2005; Pluye, Potvin, & Denis, 2004; Pluye, Potvin, Denis, et al., 2004; Scheirer, 2005). But little research has addressed this issue in theoretical and practical ways.

Thus, the aim of this chapter is to raise awareness and understanding about how effective educational initiatives, delivered into complex systems such as schools, can be sustained over longer terms. This chapter investigates the perspectives of teachers who have been involved in school-based initiatives to support young people's wellbeing and positive mental health. The teachers were asked to think about initiatives that had been introduced to their school, and to describe what had happened, and what had not happened, to ensure sustainability of the initiatives.

METHOD

Conceptual background

The design of the research began with the observation that educational initiatives are situated within complex systems, which are in turn situated within communities with diverse cultural and social determinants. Lee et al. (2008) identified long-term problems with programs that have been piloted in relatively controlled, highly resourced situations, and are then broadly rolled-out to settings with fewer resources and limited controls over implementation processes. Thus the conceptual background to this chapter is informed by the ecological systems model proposed by Bronfenbrenner (Santrock, 2007), which also underpins other major studies, such as the Longitudinal Study of Australian Children (AIFS, 2017).

Within that broad systemic perspective, this study sits within the emerging field of implementation science. An example of the application of systems thinking to implementation of health sector interventions was provided by Pronovost et al. (Pronovost, Berenholtz, & Needham, 2008), who proposed iterative phases including, focussing upon how work is organised; engagement with inter-disciplinary teams; creation of centralised support; encouraging local adaptation

and creating a collaborative culture locally and within the larger system. Interestingly, Pronovost et al. proposed the four E implementation cycle, namely, Engage-Educate-Execute-Evaluate, but initially failed to include the exact post-implementation issues that are the focus of long-term sustainability. Pronovost et al. later added endure (sustain) and extend (upscale) to make six Es in their implementation model.

Ethics

Ethical clearances were obtained from the Flinders University Social and Behavioural Research Ethics Committee, and from the South Australian Department of Education and Child Development. School principals provided permission for the research to be conducted at their school sites. Informed written consent was obtained from all participants.

Research question

The broad research question addressed in this chapter is: What are the perspectives and experiences of teachers about current processes of implementation that do, and do not, support the long-term sustainability of effective educational initiatives for promoting young people's wellbeing and positive mental health?

Procedure

In 2015-2016 extended focused interviews were conducted with 17 South Australian teachers and school leaders about practices that ensured the sustainability of their school-based initiatives to develop students' wellbeing and positive mental health. The teachers were located in eight primary schools and four secondary schools that were involved in delivering programs to promote students' wellbeing and positive mental health (e.g., beyondblue, 2014; DEEWR, 2011; KidsMatter, 2013; Noble & McGrath, n.d.). Teachers' teaching experience ranged from 5 to 30 years.

Examples of interview questions included:

What, specifically, has caused some programs for promoting student wellbeing and positive mental health to be further developed and grown at your school? Can you give me an example(s)?

What are some of the key reasons that have caused some programs for promoting student wellbeing and positive mental health to be dropped at your school? Can you give me an example(s)?

What advice would you give to other schools about how to go about maintaining, sustaining and growing programs for promoting student wellbeing and positive mental health?

Data Analysis

Interviews were transcribed verbatim, and then parsed into identifiable “units of meaning”. A unit of meaning could be a word, phrase, or (short) sentence. Next, the units of meaning were iteratively read and coded to emerging themes.

Results

Many themes emerged, but for the purposes of this chapter, four main themes are reported below. Each main theme is accompanied by selected extracts, in italics, from the interview transcripts.

A local champion is not enough

It lasted a year. It was a burnout factor because it was just two staff members.

Participants consistently referred to the dedicated work of one or a small few “champions” of the wellbeing initiative in their school – both in establishing the program, and for maintaining it. Having one or a few local champions of the initiative is commendable, but it emerges as a clear problem for long-term sustainability. Participants made many references to problems with program sustainability when local champions moved on to other schools or to Departmental activities such as curriculum design. In fact, such local champions were seen as being the very innovative and enthusiastic types of teachers who were most attractive to being sought out by other schools and departments, and therefore likely to move onwards and upwards. Relying upon one or a few local champions, although perhaps important at early start-up, can be seen as a recipe for long term failure. Implementation plans and actions need to actively pursue the substantial involvement of a broad cross section of the school community to ensure program sustainability.

But yeah, you can see that changes in staff are a really big thing, you know, if someone was passionate about something and they leave, often that expertise and passion goes.

Leadership support is essential

That would have to come from the leadership as an expectation that it’s documented in our School Development Plan that it continues.

Participants referred to the need for active and visible leadership support for activities associated with wellbeing initiatives. School leaders’ support to purchase materials, to include information in newsletters, to timetable wellbeing into the curriculum, to hold wellbeing promotion events, and so on, were considered necessary to communicate to the school community that the school values and promotes initiatives that promote student wellbeing and positive mental health. Some school leaders, in the spirit of delegation and less hierarchical leadership structures, were seen to adopt a ‘hands off’ approach to supporting program

implementation. This was seen as being less than ideal at both early implementation and long-term implementation phases. Visible leadership support, including allocating resources for materials and professional development; support from the school governing council; realistic timetabling not only for lessons but also for lesson planning; including “wellbeing” in a leader’s role description and title; and writing wellbeing into the school development plan (mission statement), were identified as signs of support necessary for an initiative to become part of the ongoing fabric of a school’s life.

Our Principal demonstrates the value of wellbeing by allocating to the teachers’ timetables regular planning time to plan wellbeing lessons.

Staff professional education must be continuous

We’ve had this program that’s lasted for fourteen years. One of the things that would help the mental, the emotional social, the wellbeing kind of programs if teachers had, if the school had more control over getting teachers who were au fait with Pastoral Care type programs. But that’s probably a bit pie in the sky when you need teachers here who are subject teachers. You need physics teachers and chemistry teachers and technology teachers and so on. And to expect those teachers to come in with a background in the wellbeing, you probably couldn’t do that.

Ongoing, whole staff (full-time teachers, part-time teachers, classroom support staff) professional education was considered vital. A major concern was evident with the typical approach to professional education, whereby such education is offered to staff at program start-up. However, in subsequent years, new staff are not provided with the same educational opportunities. Over the space of only a few years, the bank of knowledge created in the initial training round has dissipated due to staff turnover. This affects the quality of program implementation, dedication to maintain the program, and long term sustainability. A related concern that was noted more than ten years ago (Askill-Williams et al., 2005) and emerged again in this study, is that some staff, especially at secondary school level, do not consider it part of their role and responsibility to engage with promoting students’ wellbeing and positive mental health. Rather, they consider that their responsibility is to teach the subject-matter, and it is the school counsellor’s responsibility is in the area of wellbeing. Extended professional education can help to counter this perception.

I mean some teachers don’t see it as coming out of their job descriptions. They don’t see well-being as being part of their job duties I guess.

Evaluation and review must proceed throughout the life of the program

And, the school will say, ‘we need some kind of Pastoral Care Program for our students’, and they will devote some time to it. It might be ten minutes, twenty minutes a day or one session a week, and they’ll set an involved program with activities and that will go for two years, or three years, and people will say ‘this isn’t working’, ‘this is terrible’, ‘what a horrible waste of

time', so it's thrown out and they go back to a minimalistic program which runs for two years and after two years they say 'things are terrible, the students don't have these skills or this information' or whatever we need a Pastoral Care Program and one is set up. And the cycle continues.

Teachers described previous programs that had worked for periods of time which had started with success, but then had faded away due to apparently being no-longer useful or effective. Although teachers did not appear to have the technical language to refer to the causes for such program fading, it appears that it is related to lack of ongoing evaluation, quality assurance, adaptation and renewal of programs as certain components become embedded, schools mature, and the student population changes. Whereas new programs are often evaluated as part of start-up implementation processes, ongoing processes for program evaluation appear to be rare, leading to the cycle referred to in the extract above.

DISCUSSION

This chapter identifies concerns with achieving long term sustainability of school-based initiatives to promote student wellbeing and positive mental health. Extended focussed interviews with teachers and thematic analysis of their responses identified four themes, namely,

1. The limitations of relying upon a local champion to initiate, promote, lead and maintain the program;
2. The need for leadership support, both from school principals, deputy principals and the school governing council;
3. Continuous staff professional education that goes beyond the start-up phase, and encompasses permanent and temporary staff, as well as new staff;
4. Ongoing program evaluation, adaptation and renewal.

The champion: The participating teachers' perspectives add contextual detail to earlier recommendations about program champions from the literature. For example, Shediak-Rizkallah & Bone (1998) argued that programs need a champion who advocates for a focus on the initiative, and gradually brings other staff on board. The present study highlights how relying upon a program champion might be a double edged sword: She/he might get things going at start-up, but might also be left with keeping things going – an unsustainable long-term demand due either to staff mobility or staff burnout.

The leaders: If the local champion is not the leader, or at least in the leadership team, then active and visible support from school leaders is required. Mukoma and Flisher (2004) and Shek et al. (2009) alerted program designers and deliverers of the need to embed initiatives within school policies, including explicitly recognizing the initiatives within each institution's mid- and long-term goals. Without leadership support, other staff and the broader school community will not

value and engage with the initiative, which is a prescription for long term failure. Furthermore, the participants in the present study highlighted that leadership does not just refer to the school principal and the leadership team, but also to the broader school leadership, such as the school governing council. Leadership can demonstrate active support by the giving public voice to the value of the initiative via school publications (formal and informal), and allocating financial (materials), human (staffing and professional education) and timetabling (class-delivery and lesson planning) resources.

The professional education: A number of researchers have addressed the necessary components of high quality professional development in educational settings (Darling-Hammond, 2006; Ingvarson, Meiers, & Beavis, 2005; Mitchell & Cubey, 2003). Desimone (2009) and colleagues (e.g., Garet, Porter, Desimone, Birman, & Yoon, 2001) provided a conceptual framework of five core features of effective professional education, as follows:

1. Content focus, which refers to the essential requirement to focus professional education on the core knowledge to be learned.
2. Active learning, which identifies the need for discussion and feedback -- moving away from didactic lecture styles.
3. Coherence, which refers to the need for professional education to be consistent with the current levels of staff knowledge and beliefs, and also to fit with changing educational policies and reform agendas.
4. Collective participation, which is facilitated through collegial exchange among staff who work collaboratively together.
5. Duration, which highlights the limited value of one-off professional education sessions.

Duration is the issue that emerges strongly in the present study as a key component of sustainability. In order to achieve long-term, substantial changes in practice, professional education also needs to be sustained over time – for the same staff, and also for new staff. Following Desimone (2009), Askill-Williams and Murray-Harvey (2015) and Cefai and Askill-Williams (in this volume) extend Desimone’s (2009) model of professional development, to recognise the differential learning needs of pre-service and in-service teachers and educators. Notably, duration is incorporated in those extended models in the form of learners undergoing a transformative journey.

The program renewal: The findings of this study identify, from the teachers’ perspectives, the need for ongoing evaluation (quality assurance) and the need to identify specific components necessary for sustainability that have been identified in earlier work. For example, Askill-Williams et al. (2013) argued that there are two clear areas for potential short term and long-term failure of mental health promotion initiatives, namely:

1. A lack of attention to quality assurance of components and implementation processes, and
2. The absence of specific components that explicitly embed sustainability in the design and delivery of programs.

The present study has also highlighted that, in practical application, the lack of ongoing evaluation and quality assurance has allowed programs to atrophy, to become no-longer relevant nor fresh, and to consequently die. Initiatives need constant monitoring, regeneration and renewal as staff and student capabilities develop and their needs change.

LIMITATIONS

This chapter reports an interview study with a relatively small sample of participants, located in the metropolitan area of Adelaide, South Australia. It is recommended that the findings of this study are used to provide a theoretical lens for considering implementation issues in other settings, but are not to be interpreted as prescriptively applying to other settings.

CONCLUSION

Governments invest strongly in the roll-out of mental health promotion programs in schools and ECEC centres. It is in the interests of the health and education systems, of local communities, and of individuals, that long-term sustainability of such programs be achieved. There are personal, social and economic benefits to finding more effective ways of ensuring sustainability of resource intensive educational interventions. Becoming involved in new educational initiatives requires allocation of substantial resources, such as, providing professional education programs for staff; paying for staff release time; establishing working groups with parents and community stakeholders such as psychologists and counsellors; developing curriculum resources; and working with students/clients in new ways. These investments by educational communities imply intentions that, once a trial initiative is shown to be successful, the initiatives will continue. Schools expect that teachers and support staff will maintain the skills gained in the professional development associated with the initiative, and that curricular enhancements will become institutionalized and embedded into their permanent practice (Bierman et al., 2013). Funding bodies, organisations, staff, community stakeholders, and students/clients lose knowledge, capabilities and practices, as well as their financial and emotional investments, when effective programs are not sustained (Pluye et al., 2005; Pluye, Potvin, & Denis, 2004; Pluye, Potvin, Denis, et al., 2004; Shediak-Rizkallah & Bone, 1998).

The literature reviewed and research study reported in this chapter have the potential to contribute to new understandings about components and processes of sustainability in the complex contexts of educational settings. Collecting evidence

from practitioners and leaders that is synthesised to create new knowledge that can be shared across international research and educational communities will make an important contribution to the new science of implementation and sustainability identified by Greenberg (2010) and Kelly and Perkins (2012). The perspectives from teachers described in this chapter illustrate some of the contextual facilitators and barriers to program sustainability within complex systems such as schools.

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ASKELL-WILLIAMS

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