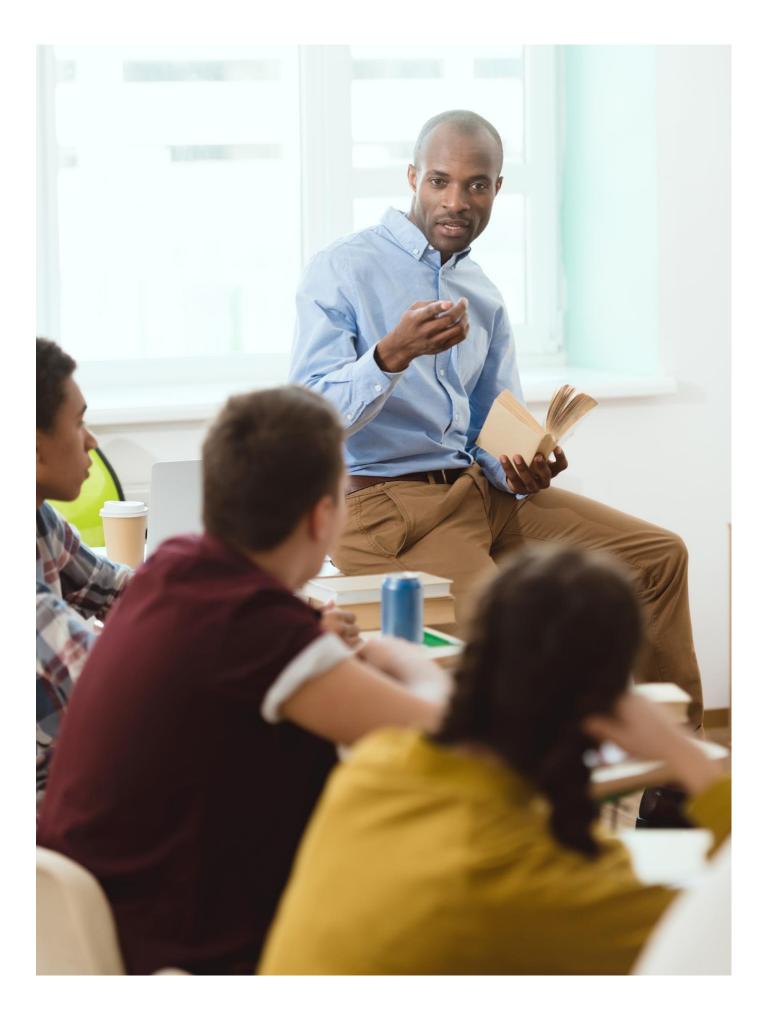


GRADES 9-12 Mental Health Literacy Instructional Units

LET'S TALK ABOUT MENTAL HEALTH







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Foreword

In order to achieve the Department of Public Instruction's vision of all students graduating from high school academically prepared and socially and emotionally competent, Wisconsin schools and staff must be empowered to support the whole child. Working together will enable us to build equitable school communities that promote social and emotional wellness, focus on strong positive relationships, are inclusive for all, and build on the resilience of individuals and systems. With the DPI's vision in mind, we encourage educators to view mental health as an asset that can and should be actively built and strengthened through proactive supports for allstudents.

One important strategy for promoting mental health and wellness in all students is increasing their mental health literacy or knowledge, beliefs, and skills related to mental health challenges that help students recognize, prevent, and manage

them. In the same way, students are taught how to be physically healthy, educators can intentionally build the skills students need to maintain positive mental health. Students look to school staff to lead essential conversations about mental health. These essential conversations and opportunities for skill-building move Wisconsin towards the DPI's mission of every student having access to the resources and educational rigor they need at the right moment in their education, across race, gender, ethnicity, language, ability, sexual orientation, family background, or family income.

The Department would like to acknowledge the contributions of the youth, caregivers, community mental health providers, educators, and other community partners that shaped the development of these units. These partners played an instrumental role in prioritizing the mental health knowledge and skills that are important to Wisconsin communities. Our hope is that these units will build lifelong skillsfor maintaining mental health and wellness, opening the door to honest dialogue about mental health in the classroom, school, and community.



Jill K. Underly, PhD State Superintendent, Department of Public Instruction Twenty percent of all students have a diagnosable mental health condition – a number that many believe has increased since the COVID-19 pandemic led to the closing of school buildings and financial instability for many families.

These Mental Health Literacy Units of Instruction offer skills-based lessons on mental health that we hope will allow students to better understand their own mental health, know where to get help, and be able to support friends experiencing mental health challenges. The accompanying caregiver lesson plans we hope will generate helpful school and family conversations about wellness.

The Wisconsin Office of Children's Mental Health values collaboration across systems, data-driven approaches, lived experience leadership, and equity among all stakeholders. We are pleased to have been able toplay a role in ensuring that our guiding principles were employed in the development of these Mental Health Literacy Units of Instruction. We would like to extend our thanks to the volunteers and staff who dedicated their time to creating this unique resource.

For some time, Wisconsin students have been telling us that they want more and better-informed conversation about mental health at school. We hope these lessons contribute to that goal, while also affording students theinformation they need to better support themselves and one another in a rapidly changing world.



Finda a Hall.

Linda A. Hall Director, Wisconsin Office of Children's Mental Health



Mental Health Literacy Instructional Units

What is Mental Health?



Mental health includes emotional, psychological, and social well-being, affecting how people think, feel, and act. Although mental health is often thought of as the opposite of mental illness, research supports the idea that positive mental health includes both the absence of mental health challenges and the presence of high levels of social, behavioral, and emotional wellbeing (Greenspoon and Saklofske 2001). Students with positive mental health can regulate their emotions, cope with stressors, and demonstrate ageappropriate behavior. They also have a greater connection to their school, better academic functioning, show more prosocial behaviors, and report less bullying and victimization in school than students without positive mental health (Arslan & Allen 2020). These outcomes demonstrate how student mental health is an asset that can and should be actively developed in schools.

PURPOSE OF THIS UNIT

This unit of instruction aims to increase mental health literacy in grades 9-12 students using a skills-based health approach. Mental health literacy includes the knowledge, attitudes, and skills needed to build and maintain positive mental health, recognize mental health challenges, and seek appropriate help. Mental health literacy is a key strategy for promoting positive mental health in students and staff and a larger school mental health effort. Wisconsin's approach to school mental health utilizes an equitable multi-level system of supports or a framework for providing students with a continuum of mental health and wellness supports from universal prevention through targeted early intervention and treatment. Universal strategies are the supports all students receive within a school to promote positive mental health. This unit of instruction is a universal approach to building wellness and provides a foundation for students who may need a greater level of mental health support.

In order to provide alignment across school mental health efforts, the unit learning plans are aligned to <u>Wisconsin's Social and Emotional Learning (SEL) Competencies</u>. The SEL competencies provide a common language for understanding the progression of social and emotional learning from early childhood through adulthood and communicate the skills that are meaningful and relevant to Wisconsin communities. These social and emotional competencies provide a strong foundation forlifelong mental health literacy.

Preparing to Implement the Unit in Your Classroom

Educators wishing to implement this unit of instruction will have varying levels of familiarity and comfort with talking to students about mental health. Your school counselors, social workers, psychologists, and nurses have specialized mental health and wellness training and can provide support. Some schools may use a co-teaching model as a way to introduce students to the pupil services professionals in their building and to have support on hand if student needs arise. The following list includes resources and suggestions for successful implementation of this content in the classroom:

- Increase Your Mental Health Literacy
- Create and Hold Classroom Norms
- Utilize a Framework for Responding to Students
- Strengthen Your Compassion Resilience

INCREASE YOUR MENTAL HEALTH LITERACY

Mental health literacy is important for both students and teachers. Without a solid understanding of mental health and wellness, classroom discussions and activities may inadvertently perpetuate stigmarelated to mental health.

If you are interested in increasing your knowledge about building and maintaining mental health, identifying mental health challenges, seeking appropriate help, or decreasing stigmatizing attitudes related to mental health, check out the following resources:

- Youth Mental Health First Aid Training
- Mental Health Stigma Reduction Toolkit
- DPI Resilience and Hope Module
- Office of Children's Mental Health Reducing Stigma Fact Sheet
- Mental Health of America Wisconsin Fact Sheets
- Rogers Behavioral Health Stories of Recovery

CREATE AND HOLD CLASSROOM NORMS

The practice of creating and holding classroom norms with your class establishes expectations for how students would like to be treated and how they plan to treat others. Creating a supportive, positive learning environment is especially important when implementing a mental and emotional health unit. Be sure to review expectations and agreements to create a safe, inclusive, and affirming space for each student. For example, the norm of "pass or participate" allows students to decide whether or not they would like to contribute to the current conversation. This increases safety by ensuring students have a choice in how they interact with the lessons. Classroom norms or agreements can also set the tone for respectful conversations that honor how cultural identities influence your and your students' attitudes and experiences related to mental health. The unit introduction includes examples of classroom norms that may be helpful. The following may serve s useful resources:

- SHAPE America Appropriate Practices in School-Based Health Education
- "Minimizing Threats and Distractions" for the Universal Design for Learning guidelines
- <u>Collaborative for Academic, Social, and Emotional Learning (CASEL) Creating Classroom</u>
 <u>Shared Agreements</u>
- Learning for Justice's Classroom Culture

UTILIZE A FRAMEWORK FOR RESPONDING TO STUDENTS

The content included in the lessons can prompt a variety of reactions in yourself and your students. Consider these reactions these reactions and have a plan for responding in a way that communicates to the student that you are a safe person (Buccholz et al, 2014). For example, a student who has experienced trauma may be activated by some of the content and require flexibility to engage in a self-regulation strategy. Before teaching these units, familiarize yourself with your school or district's policy and practices for responding to students who express thoughts of suicide or harm. The resources below include several models for responding to students in a supportive way.

- Department of Public Instruction (DPI) Responding to Student Disclosure of Emotional Pain, Trauma, or Mental Illness
- <u>Wisconsin Initiative for Stigma Elimination (WISE) Safe Person Training</u>
- DPI Suicide Prevention Resources
- DPI Responding to Youth in Crisis Module
- <u>National Child Traumatic Stress Network (NCTSN) Providing Psychological First Aid</u>

STRENGTHEN YOUR COMPASSION RESILIENCE

The discussions and activities included in these lessons can lead to students sharing their own experiences of suffering. Continued exposure to others' suffering can lead to compassion fatigue or feelings of depression, sadness, exhaustion, anxiety, and irritation experienced by people who are helpers in their work or personal life (Gentry 2011). Developing compassion resilience requires exploring your professional role in alleviating student, colleague, and others' distress while maintaining your own well-being. Additionally, intentionally cultivating your own social and emotional competence can help you remain resilient in the face of compassion fatigue (WISE Wisconsin et al, 2021). The following toolkits provide discussions, reflections, and other activities aimed at increasing your resilience.

- DPI and Rogers InHealth Compassion Resilience Toolkit
- <u>Transforming Education Adult SEL Toolkit</u>

Background Information & Considerations

Welcome to the "Let's Talk About . . . Mental Health" unit for grades 9-12. This is an 8-lesson unit that includes a lesson in which students can work on the summative

assessment. Additional lessons could be added for in-class completion of the assessmentrather than assigning the project outside of class time. An additional lesson could also be added so that students can share their final projects. This unit is meant to be taught once in its entirety, in either 9th, 10th, 11th, or 12th grade. Activities may need to be modified by increasing or decreasing the activities' complexity to meet student needs.

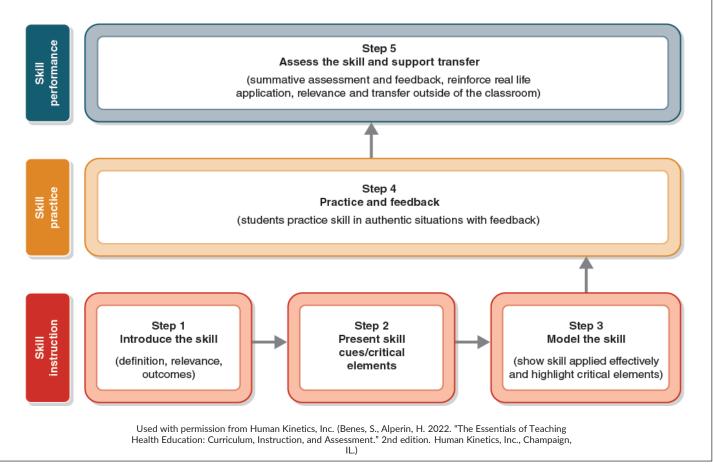
This unit is designed as a Tier 1 intervention. Some ideas for modifications for certain activities, but these do not replace accommodations. The modifications are included to help meet the needs of a range of learners. However, to meet the needs of students with different abilities and Multilingual Learners, please contact school staff who may offer additional guidance and ideas to support students.

SKILL DEVELOPMENT

This unit is designed to support skill development. The skill in this unit is interpersonal communication which is National Health Education Standard and Wisconsin State Standard 4. The content that serves as the context for developing this skill is mental and emotional health. See Figure 1 for the 5 Steps of the Skill Development Model.

All steps of the skill development model are included throughout the unit, with Steps 1, 2, and 3 being addressed in Lesson 2, Step 4 is addressed in Lessons 3-8. Step 5 is addressed in the authentic, summative assessment and in Lesson 8. In order to effectively support skill development, all 5 steps must be included with the most time spent on skill practice and providing students feedback (Step 4). This is why 5 out of the 8 lessons focus on skill practice with opportunities to provide feedback.

5 STEPS OF THE SKILL DEVELOPMENT MODEL



Another key aspect of the skill development model is Step 2, "Present skill cues/critical elements." When developing skills, it is useful to understand the key components that make up that skill. It is also important to note that these skill cues could be used any time you are building the skill of interpersonal communication, including if you are teaching this skill with other topic areas. Using the same skill cues in multiple topics and potentially in multiple grades will also help support retention and aid in positive transfer, whereby students will be able to use the skill in new and novel situations. A final point here; use skill cues that work for your students and are consistent with other school models. We offer a set of skill cues here that teachers have found to be helpful, but they should be modified as needed to support your students. If modified, be sure that all critical elements of the skill are reflected in the revised skill cues.

STUDENT LEARNING OBJECTIVES

The learning objectives included in the learning plans are aligned with standards and are written for the educator. Include "student-friendly" learning objectives and share these with students. In the lessons, language is included that summarizes the learning objectives, but you may need to modify further to meet the needs of your students. It may also be helpful to have a visual reference for students as well.

LEARNING ENVIRONMENT

Creating a supportive, positive learning environment is especially important when implementing a mental and emotional health unit. Be sure to review expectations and agreements to create a safe, inclusive, and affirming space for each student. As these topics may be difficult for students, and some students may need support, identify and post school-based resources and other resources such as the National Suicide Lifeline and the Crisis Text Line.

Notify the school counselor in advance of teaching this unit. If students have not yet been introduced to the school counselor (and even if they have), it is recommended that the school counselor come to the class and introduce themselves to help make that connection for students. Encourage students to seek help and connect with a trusted adult during the class and to engage in self-care as needed.

When discussing class agreements, consider setting up a system for students to discreetly notify you if they need support during the unit and have an agreement that encourages students to engage in appropriate self-care. An example of this could include a thumbs up if they are leaving and okay, a thumbs down to show they are leaving because they need support. Another example could be that students pick up a blue pass if they are leaving and are okay or a yellow pass if they leave and need support. Create a system that works for both teacher and students and then plan to follow up with students as needed.

The following list includes examples of possible classroom agreements:

- · Pass (being able to pass on sharing)
- · Self-care (taking care of needs and protecting well-being)
- Intent and impact (recognizing that even if someone means well, they can say things that can negatively impact others).
- Ouch and oops (students are affirmed in their right to identify hurtful comments and also to recognize or repair after saying something that mayhave hurt another)
- Acknowledge different experiences (students are reminded that everyone has different experiences, comfort, and ability to discuss this topic)
- Anonymous question box students submit questions or comments that they wouldrather not ask in class)

MENTAL AND EMOTIONAL HEALTH

Acknowledge your own experiences and comfort with the topic of mental and emotional health. You are encouraged to reflect on personal strengths relative to this topic and areas for growth or gaps in knowledge/experience that may impact your ability to teach effectively. You are also encouraged to find support for areas of growth or improvement as you teach this unit. Self-care should always be a priority for you, and you should ensure you are taking care of yourself as you help students take care of themselves in this unit.

Considerations for discussing mental health in the classroom:

- Recognize people's experiences and express emotions differently.
- Avoid dichotomizing feelings into good and bad and positive and negative as that introduces judgment on the emotion. Instead, consider emotions as information thatwe can pay attention to and learn from.
- Emphasize the scientific and physical aspects of emotions and mental health.
- Avoid using the language of "warning signs" to discuss signs and symptoms of mentalillness. The phrase "warning signs" reinforces the stigma that mental illness is "bad," and we do not use similar language when discussing signs and symptoms of physical conditions. Using the terms "signs and symptoms" or "things to notice" is more accurate and less judgmental. "Warning signs" are used frequently, so be mindful when using other resources.
- When discussing emotions, spend time discussing the fact that experiencing a range of emotions is a typical (avoiding the word "normal") part of the human experience.
- Mental health can be a challenging topic, so connect with the school counselors, school social workers, and school psychologists and let students know the topics inadvance of the unit. Regularly share resources that students can access if needed.



Unit Objectives

By the end of the unit, students will be able to:

SKILL OBJECTIVES

- Use skills (including non-judgmental, active listening) for communicating effectively with family, peers, and others to enhance mental health . . . in person . . . (NHES 2007, Standard 4.12.1; DPI 2011, Standard 4:4:A1).
- · Communicate personal boundaries and respond effectively when boundaries are crossed.
- Demonstrate consent and permission seeking or giving in interpersonal relationships.
- · Demonstrate compassion and empathy when interacting with others.
- Demonstrate how to ask for and offer assistance to enhance the mental health of self and others (NHES 2007, Standard 4.12.2; DPI 2011, Standard 4:4:A3).
- Effectively apply coping skills.
- · Apply strategies to reduce the stigma around mental health and mental illness.

FUNCTIONAL INFORMATION

- · Describe effective disclosure strategies.
- $\cdot~$ Identify stressors* and responses to address those stressors.
- Identify if they or someone else are in crisis and ways to help (including available resources andhow to access them). ^
- · Discuss personal values and how to establish boundaries based on values.
- · Describe connections between healthy interpersonal relationships and mental health.
- Discuss the importance of communicating about mental health and well-being.

*Should include discussions on social determinants of health and their impact on stress, including socio-economic status, racism, discrimination, etc. ^Should include suicide among other mental health crises.

SOCIAL JUSTICE STANDARDS

- I interact comfortably and respectfully with all people, whether they are similar to or different from me (Learning for Justice 2018, Standard DI.9-12.6).
- I respectfully express curiosity about the history and lived experiences of others and exchange ideas and beliefs in an open-minded way (Learning for Justice 2018, Standard DI.9-12.8).
- I relate to and build connections with other people by showing them empathy, respect, and understanding, regardless of our similarities or differences (Learning for Justice 2018, Standard DI.9-12.9).
- I have the courage to speak up to people when their words, actions, or views are biased and hurtful, and I will communicate with respect even when we disagree (Learning for Justice 2018, Standard AC.9-12.18).

ALIGNMENT WITH CASEL & WISCONSIN SOCIAL AND EMOTIONAL LEARNING COMPETENCIES:

Social Awareness

- Learners will be able to demonstrate empathy to others who have different views and beliefs(DPI 2018, Grades 9-10).
- Learners will be able to demonstrate connectedness, through empathy and engagement to their communities (DPI 2018, Grade 11 Adult).
- Learners will be able to evaluate verbal, physical, and environmental cues to predict and respond to the emotions of others (DPI 2018, Grades 9-10).
- Learners will be able to evaluate verbal, physical, social, cultural, and environmental cues topredict and respond to the emotions of others (DPI 2018, Grade 11 Adult).
- Learners will be able to identify positive ways to express understanding of differing perspectives (DPI 2018, Grades 9-10).
- Learners will be able to demonstrate conversational skills to determine the perspective of others(DPI 2018, Grade 11 Adult).

Relationship skills

- Learners will be able to independently seek and sustain positive, supportive relationships (DPI 2018, Grades 9-10).
- Learners will be able to maintain positive relationships and use effective strategies (e.g., boundary setting, stating your needs, and recognizing warning signs) to avoid negative relationships

(DPI 2018, Grade 11 - Adult).

- Learners will be able to use assertive communication, including refusals, to get their needsmet without negatively impacting others (DPI 2018, Grades 9-10). *Note: Refusal skills are not addressed in this unit.*
- Learners will be able to use assertive communication, including refusals, in a variety of settings and with a variety of audiences to get their needs met, without negatively impacting others (DPI 2018, Grade 11 - Adult). Note: Refusal skills are not addressed in this unit.

Responsible decision-making

- Learners will be able to consider a variety of factors (e.g., ethical, safety, and societal factors) inorder to make decisions that promote productive social and work relations (DPI 2018, Grade 11 - Adult).
- Learners will be able to evaluate factors that impact personal and community health and safety, and apply appropriate preventative and protective strategies (e.g., health and wellness, sleep, healthy relationships) (DPI 2018, Grade 11 Adult).

Assessment

IT'S TIME TO TALK ABOUT MENTAL HEALTH

In Lesson 8, students (as a class) decide which aspects of the unit are most relevant to high schoolers and which skills are most needed. Students also review key strategies for researching and communicating about mental health avoiding stereotypes and stigma.

Then, in small groups, students design brief "How To" videos for their peers in which they model effective application of the skills relative to topics in the unit. Students design the scenarios, scripts, etc., that they feel will most resonate with their peers.

Since the skill is communication which involves demonstrating (which in this case would mean actually doing the communication skills), you could provide alternatives to filming, which might include: performing their "How To" as a role play for the class, coming to a block or a time after-school to perform without other students (and you could invite students to bring friends to be the audience to make them feel more comfortable). If needed, you could also have students perform the skill to a trusted adult who could use the rubric to assess or have a student come without their group and perform their part of the skit (though it would be important to make sure the student still contributes meaningfully to the project overall).

Note: Completed videos could be shared in school and community.

IT'S TIME TO TALK ABOUT THE MENTAL HEALTH PROJECT DESCRIPTION

For this assessment, you have been asked by the Superintendent to share what you know about communicating about mental health with other high schoolers. The Superintendent has asked you to create "How To" videos that will help teens feel more comfortable and confident about talking about mental health and seeking help for themselves or others when needed. The Superintendent wants to make sure that the videos don't reinforce stereotypes about mental health and that the videos will help decrease the stigma related to mental health.

You will work with your group on a skill or topic that you feel is important for other high school students to have in order to support their own mental health or the health of others. You will work as a whole class to determine these skills and topics, and then your group can choose which to focus on for the videos.

Your videos should be realistic and should help other high school students develop their communication skills related to mental health. Use what you learned in the unit about effective communication, about compassion, and empathy to help other teens. You can be creative in the formatof the "How To" video, make sure the video has the following components:

- · Clearly states and explains the skill and topic being demonstrated in the video
- · Skill cues are explained and demonstrated
- The video includes the skill being applied effectively (you can also do an ineffective version but makesure to point out how to improve the ineffective skill)
- The video includes 1 2 key messages related to the skill or topic and at least 1 key message related to reducing the stigma associated with mental health

RUBRIC

CRITERIA	MEETS EXPECTATIONS	WORKING TOWARDS EXPECTATIONS	DOES NOT MEET EXPECTATIONS
Skill and topic clearly stated	Skill and topic are clearly stated and explained in the video.	Skill and topic are included, but it could be clearer or explained further.	Skill and topic are notstated or explained.
Skill cues are explained and demonstrated	Correct skill cues for the skill are explained and demonstrated effectively.	Skill cues are included, but they are not correctly explained or demonstrated.	Skill cues are not included.
Skill application	Skill is demonstrated effectively (includes all skill cues, leads to a health-promoting outcome, demonstratesempathy and compassion appropriately).	Skill demonstration includes some errors or areas for improvement.	Skill demonstration is not included or is ineffective.
Key messages (skill/topic)	Two key messages areincluded and support the skill.	One key message is included, and the messages could be improved to better support the skill.	Key messages are notincluded.
Key messages (stigma)	The key message included in the video will help teens communicate about mental health in waysthat can decrease stigma.	The key message included in the video may help teens communicate about mental health in waysthat can decrease stigma but could be improved, clarified, or strengthened.	Key messages related tostigma are not included.
Avoiding stereotypes	The video avoids reinforcing stereotypes related to mental health or directly addressed stereotypes.	Aspects of the video may reinforce stereotypes.	Aspects of the video reinforce stereotypes about mental health.



Let's Talk About . . . Mental Health

OVERVIEW		
TIME	~50 minutes	
FOCUS Step of skill developmentmodel or functional information	Functional information	
MATERIALS	 Technology to present video clips 	
KNOWLEDGE OBJECTIVES	 Discuss the importance of communicating about mental health and well-being. 	
SKILL OBJECTIVES	 Apply strategies to reduce the stigma around mental health and mental illness. 	



INTRODUCTION (10 MIN)

Warm Up (2 minutes)

Technology Alternative

You could have students keep an electronic journal rather than having a notebook.



As students enter, invite them to spend about 2 minutes in their notebooksfree writing, drawing, doodling (or something similar) as they reflect on how they are feeling; invite students to take a moment to "check in" with themselves.

Pause & Be Present (3 minutes; longer if including the introduction)



If you have not been engaging in "presencing" activities previously, discuss the benefits of taking some time to practice different strategies for focus, grounding, increasing relaxation, and decreasing stress. Suggested language to introduce breathing techniques: Controlled breathing has a scientific backing:

it can help our memory and improve the functioning of the brain to calmly process emotion (DiDalvo 2017). Let students know that you will begin lessons with different activities that can be applied in all different areas of their lives throughout this unit. You should also let students know they can choose their level of participation during these activities, it is always an invitation, but all should be respectful and allow others to engage as they prefer. You may want to provide options for students such as drawing, doodling, or other activities that could be done quietly while others engage in the breathing exercise. You should also be explicit that people will feel differently, and not everyone will be comfortable with these exercises, and that is okay; do the best you can and be respectful of others.

Invite students to sit up tall in their seats; strong but not rigid spine, hands in a comfortable position on their legs or lap, feet rooted to the ground. Invite students to close their eyes or find a spot to focus on. Next, invite students to pay attention to theirbreathing, ask them: "How do you know you are breathing? Where do you feel it?" You may prompt students by letting them know that they might feel it in their nostrils, back of the throat, chest, or belly; reminding students, it can take time to notice these body sensations and whatever they are noticing or not noticing is okay; they should think of themselves as observers of their experience. Remind students to keep returning to the focus of the breath, paying attention to where they can feel themselves breathing. Invite one last long inhale and long exhale, and then invite students to open their eyes. You may want to ask some students to share how they feel after completing this activity. Remember, it is okay if students don't feel "good" about it; these activities are meant tobuild their skills and awareness without judgement.

Note: Keep this breathing exercise shorter, around 2 minutes, to start to make it more accessible for students.

LESSON PLAN



Lesson Objectives (5 minutes)



As this is the first day of the new unit, introduce the skill (interpersonal communication) and the topic (mental health). Key concepts to include in the definition:

- 1. A healthy mind and brain are important for overall health and well-being (mindbody connection)
- 2. Mental health affects how we think, feel and act
- 3. Mental health impacts how we manage emotions and experiences

Explain that we all have mental health and that sometimes our mental health, just like our physical health, is better sometimes and worse for others. We all have times when we feel sad, down, upset, anxious, or struggle to engage with our peers. These are all typical experiences. We want to recognize when the feelings we are having are something we can manage on our own or when we need to seek out help and support.

Briefly discuss the unit objectives and assessment so that students know where they are headed. Review the objectives for today's lesson.

MAIN ACTIVITIES (37 minutes)

Class Agreements and Expectations (7 minutes)



Even if you have already set class agreements/expectations, it would be important to revisit them here. Remind students that everyone has different understandings and experiences with mental health and mental illness. Review key agreements [see Preparing to Implement the Unit in Your Classroom for more information] such as:

- · Speak your truth (speak from your own experience)
- Intent versus impact
- · Keep an open-mind
- Practice empathy
- · Respectful and affirming behavior and language
- · Self-care and "need support" norms



Exploring the Stigma around Mental Illness (30 minutes)



Ask students to share ideas about what the word "stigma" means and some other terms or phrases used to describe stigma. Next, ask students what the term "discrimination" means and how discrimination is connected to stigma.

For reference:

- Stigma is when people are seen negatively because of a trait, characteristic, or behavior they engage in.
- Discrimination is when people are treated unfairly or unjustly because of a trait, characteristic, oridentity they possess.

Tell students that to begin this unit on communication about mental health, we will first discuss why there is a stigma on the topic and ways to destigmatize mental health, as this will support teens' ability to get help when needed for themselves or others.



In small groups, have students discuss any of the following prompts (you could let students choose which prompts to respond to, assign groups different prompts, or you could choose which prompts you to want the class to focus on):

- Why do you think there is a stigma (you may also interchange terms such as: silenced or othered or other terms that youth shared in the previous activity throughout this lesson) related to mental health or mental illness?
- What are the impacts of stigma? How might the stigma around mental health impactteens?
- What are the factors that contribute to stigma? What role does marginalization and oppression have in the stigmatization and discrimination of behaviors rooted in mentalhealth?
- How does stigma "show up"? How do we know there is a stigma?
- In what ways might someone with a mental illness experience discrimination?
- What role does marginalization and oppression have in determining who gets access to mental health supports and who doesn't?

LESSON PLAN



Come back together as a large group and have students share out the ideas from their groups. Record key ideas on the board. If it does not come up from student groups, share the following: some stigmas or misunderstandings about mental health are not a result of malice or not caring, but rather a product of generation or culture. For example, a caregiver

may not be immediately receptive to their student confiding in them that they are having mental health struggles because "what do you have to be sad about?" or "I don't have time, money, etc." to help you find a specialist, etc." Remind students that we want to be mindful of people's experiences and understand that stigmas can arise from various factors; this isn't about judging people but working to address stigma and stand up against discrimination.

Watch the video from <u>Children's Hospital Colorado</u> (some other options include one of these videos: <u>RETHINK stigma</u> [more informational] or <u>NAMI</u> [focuses on stigma in the youth sport and Black communities] or other videos that you feel will best illustrate the issue and connect with yourstudents).

Debrief the video(s) with students making connections back to their ideas from the small group discussion focusing on key takeaways, including the influence of stigma on mental health and help-seeking behaviors and the importance of contributing to ending the stigma.

Let students know that the next video will give you some ideas and suggestions about ways to take action: <u>So You Want to End the Mental Health Stigma. What Now? From Soul Pancake.</u>

Let students know that they will be exploring many of these ideas for action throughout the unit. Also, provide some suggestions for professionals and people to follow on social media accounts such as Twitter, Instagram, and TikTok. Discuss with students how learning more and getting additional perspectives can be an important part of our own personal journey.

Note: If time, you could have students talk about their reactions/thoughts about the video in small groups.

CONCLUSION (3 MINUTES)



Invite students to take 3 deep breaths before reflecting and responding in their notebooks on the following questions related to mental health:

- What would I be afraid to tell? Why?
- What would I be afraid to ask? Why?
- What do I need in order to feel more comfortable/confident in telling/asking?
- · What actions would I feel comfortable taking to address the stigma?

Note: You may want to review these responses as they may inform future lessons or discussions.



Warm Up

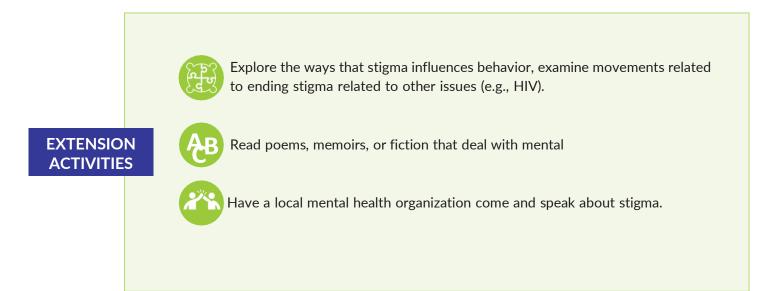
• Provide a check-in worksheet for students to answer questions about how they are feeling.

Exploring the Stigma around Mental Illness

- The first small group activity could be done as a gallery walk with each question posted on a different piece of a flip chart. You could also do this as a Socratic seminar format with older students, or you could have students at any age talk about each question with a partner and then have them switch partners with each question. You could also use stories of youth experiencing stigma and discrimination as a way to foster discussion.
- You may want to include different videos or use writing, artwork, or poetry rather than videos.
- Play videos with captions.

Conclusions

· Offer a fill-in-the-blank or multiple-choice reflection.



Responding to Stress

2 R	espo	ond
	TIME	~50
	FOCUS development inctional info	• Sk • Sk • M

OVERVIEW		
TIME	~50 minutes	
FOCUS Step of skill development model or functional info	 Skill introduction (Step 1) Skill cues (Step 2) Modeling (Step 3) Functional information 	
MATERIALS	 Technology to present video clips 	
KNOWLEDGE OBJECTIVES	 Identify stressors* and responses to address those stressors. *Should include discussions on social determinants of health and their impact on stress, including socio-economic status, racism, discrimination, etc. 	
SKILL OBJECTIVES	 Effectively apply coping skills. Use skills (including non-judgmental, active listening) for communicating effectively with family, peers, and others to enhance mental health in person (NHES 2007, Standard 4.12.1; DPI 2011, Standard 4:4:A1). I interact comfortably and respectfully with all people, whether they are similar to or different from me (Learning for Justice 2018, Standard DI.9-12.6). I relate to and build connections with other people by showing them empathy, respect, and understanding, regardless of our similarities or differences (Learning for Justice 2018, Standard DI.9-12.9). 	

LEARNING PLAN



Warm Up (2 minutes)



As students enter, have a "Mood Meter"(such as the one

found <u>here</u>) projected on the screen (or up on the screen if online or posted where students can see it if a "no tech" option is needed). Invite students to reflect on how they feel (based on the Mood Meter options) and why they feel that way in their notebooks.



Pause & Be Present (3 minutes)



For today's activity, play a "breathing visual" such as triangle breathing or other visuals such as this from Calm (do not include square or box breathing visuals yet; this builds off of the first lesson and invites students to pay attention to their breath and focus). Before starting the visual, invite students to sit up tall

in their seats; strong but not rigid spine, hands in a comfortable position on their legs or lap, feet rooted to the ground. Spend 1-2 minutes on this activity (or longer if you feel students would benefit). You may want to ask some students to share how they feel after completing this activity and how they felt during this experience compared to the 1 in the first lesson.

Lesson Objectives (4 minutes)



Invite students to share key takeaways from Lesson 1. Review the key points from the previous lesson as a group if not brought up by students (ways to discuss mental health thatcan decrease the stigma). Review today's lesson objectives.



MAIN ACTIVITIES

Effective Communication (15 minutes)



Introduce the skill of communication. Connect back to some of the key points from Lesson 1 related to communicating about mental health (e.g., how stigma impacts communication, ways that discrimination can impact communication). Reinforce 1 of the

main takeaways of this unit which is that communicating effectively about mental health is important for getting help when needed, supporting someone experiencing a mental health challenge or illness, and helping remove stigma (rather than use the term stigma, you want to use other words or terms that students identified in Lesson 1).

Put students into small groups. Have students respond to the following prompts:

- What does effective communication look like?
- · What does effective communication sound like?
- · What does effective communication feel like?

Bring students back as a large group and have groups share out their ideas. Use student ideas when discussing skill cues for effective communication. <u>Sample skill cues</u> for effective communication are the "Pause. Reflect. Share. Listen. Consider." skills cues:

Pause: Consider the best time to communicate; pause and take a breath as needed at the moment **Reflect**: Identify what you want or need to communicate and the best way to do so

Share: Use assertive communication (verbal and non-verbal) and "I" statements when communicating **Listen**: Actively listen with an open mind, demonstrate empathy

Consider: Think about the other person's or people's perspectives and ideas, consider how you can use what you are hearing from the person or people to support you

You can use these as a framework to modify or use key ideas from the activity. Some key points to remember are that eye contact is often used as a skill cue. Still, it isn't always appropriate for various reasons (e.g., cultural norms, certain diagnoses), address body language, and, again, remembering that body language is tied to culture, personal preference, etc. Discuss the importance of "I" statements and keeping an open mind during conversations. Also, make connections to empathy and compassion in the skill cues and with communication in general. You will be building onto these skill cues throughout the unit.



Teen Stress (10 minutes)



Let students know that now that we know the critical elements of effective communication, we will explore stress! Stress is one of the main factors that can impact our mental health, so that we will be starting with this topic in our unit. Sometimes stress is also experienced as feeling overwhelmed, anxious, or "burnt out" by what is happening around us.

Note: If you have any local data on student stress levels or sources of stress, this would be a great time to share them. For instance, the <u>2019 YRBS Summary Report</u> provides data for Wisconsin youth. If you feel comfortable, you may consider sharing some of your own stressors that are appropriate to share with students to normalize that everyone can experience stress. You should not do this unless you feel comfortable and think it would support relationship development with students.

Discuss how stress is a typical part of the human experience, and it is important that we have tools to manage stress in effective and health-promoting ways.

Note: One outcome for this and the next lesson are that stress, anxiety, and overwhelm are common experiences for teens.



Ask students: What are some other words or terms that teens use to describe stress? Record ideas on the board.

Ask students: Why do you think there are so many different ways to describe stress?

Let students know that next, they will hear from teens talking about their experiences with stress. <u>Watch this video</u> of teens talking about stress. While watching, encourage students to identify skill cues of effective communication and connect to her experiences in terms of stressors they experience.

Note: If you have any videos of local youth discussing stress, use that here instead. Alternatively, you could create something for this unit. It could be a good interdisciplinary opportunity with your technology staff or a local community organization that could help create a video.

Debrief with students about the skill cues they saw applied and the content - what are their takeaways? What resonates?

LEARNING PLAN



Your Teen Stress TED Talk (~14 minutes)



Imagine our school has been asked to host a TEDx event, and you all have the opportunity to do your own TED Talk about your stressors. First, **reflect** (connect to the skill cues) on what your stressors are . . . what are the things in your life that can cause you to experience stress? Then, consider what you want to **communicate** about your stressors. For example,

perhaps you want to communicate your ideas about ways to decrease school stress or communicate about an idea you have for changing a school policy that could support student well-being, or perhapsyou want to communicate to others how stress is impacting you and your peers - this is YOUR TED Talk, so you get to decide what you want to communicate (connect to the **share** skill cue - they won't actually be doing the TED Talk but it is helping them to prepare to **share** or communicate).

In your notebook, outline your TED Talk, including:

- What stories or examples might you share?
- What would your main messages for your TED Talk be and why?

Let students know that their "talk" doesn't need to be a talk. Students could create a poem, rap, song, drawing, collage, or some other art form or form of communication.

CONCLUSION (2 MINUTES)



Invite students to take 3 deep breaths before reflecting and responding in their notebooks on how they currently manage their stress, anxiety, and overwhelm in health-promoting ways. Let students know that we will explore stress management in the next lesson.

Warm Up

• Provide a printout as well as a copy on the board. They can circle their mood, write or draw apicture.

Lesson Objectives

• If time, you could have students turn and talk to a partner first before asking students to share to the large group.

Effective Communication

• Have video examples of effective communication that can help aid in answering these questions.

Teen Stress

• If you have a local mental health club or other school or a community-based resource that includes youth members, invite them to come and present or do a panel for the students about teen stress.

Your Teen Stress TED Talk

- This could be more scaffolded if needed with a worksheet or talking points projected on the board. You may also want to give students some time to share their ideas with each other after some working time (perhaps 10 minutes of working and then 4 minutes of pair share orsmall group sharing).
- Provide a graphic organizer and examples.

You could actually host a TEDx event! Or provide an opportunity for some students to share their TED Talks in some format in the school and community.



Connect to the ways that stress is experienced in the brain and body. Discusshow stress affects neural pathways in the brain.



Explore toxic stress and its impact on the brain and body. Discuss "If These Cells Could Talk" to personify the impacts the classroom and environment has on their



Connect to speaking standards. Consider a character that has experienced stress, in what ways did the character communicate or exhibit their stressfulfeelings? What would have been more effective ways of expressing their

EXTENSION

ACTIVITIES



My Stress Management Plan

OVERVIEW		
TIME	~50 minutes	
FOCUS Step of skill developmentmodel or functional info	 Functional information Skill practice (Step 4) 	
MATERIALS	 Copies of "My Personal Stress Plan" worksheet 	
KNOWLEDGE OBJECTIVES	 Identify stressors* and responses to address those stressors. *Should include discussions on social determinants of health and their impact on stress, including socio-economic status, racism, discrimination, etc. 	
SKILL OBJECTIVES	 Effectively apply coping skills. Use skills (including non-judgmental, active listening) for communicating effectively withfamily, peers, and others to enhance mental health in person (NHES 2007, Standard 4.12.1; DPI 2011, Standard 4:4:A1). I respectfully express curiosity about the history and lived experiences of others and exchange ideas and beliefs in an open-minded way (Learning for Justice 2018, Standard DI.9-12.8). 	

LESSON PLAN

INTRODUCTION (9 MINUTES)

Warm Up (2 minutes)



As students enter, have an image of a "stress meter" posted for students to see (such as this). Invite students to reflect on their current stress levels and record what might contribute to their stress and ideas for ways to manage their stress or strategies that they have been using to keep stress levels low.

Pause and Be Present (3 minutes)



Invite students to sit up tall in their seats; strong but not rigid spine, hands in a comfortable position on their legs or lap, feet rooted to the ground. Let students know that this activity will be a grounding activity. Invite students to identify five things they can see, four things they can feel, three sounds they hear, two smells they can smell, and one thing they can taste. Let students know that grounding techniques like these help us drop into our bodies and ground us in our physical experience.



Lesson Objectives (4 minutes)

Invite students to share key takeaways from Lesson 2. Those may include:

- Identifying stressors (those things that overwhelm us and cause anxiety)
- Coping strategies
- Using communication skills for stress management

Review the key points from the previous lesson as a group if not brought up by students:

- Skill cues for communication
- Ways to discuss mental health that can decrease stigma





MAIN ACTIVITIES (~30 MINUTES)

Examining Causes of Stress, Anxiety, and Overwhelm (10 minutes)



Using a tool that allows students to submit anonymous responses, have students submit 1 or 2 stressors that they identified in the previous lesson. Debrief responses (ask students what stands out to them. What do the "data" tell them about stressors?). Next, ask students to consider what other factors may cause stress (the actual prompt and responses will

change based on initial student responses). You want to lead them to consider factors such as racism, discrimination (connect back to Lesson 1), experiencing poverty or homelessness, societal pressures, and expectations, etc. It is important to help students see a bigger picture of what can cause people to experience stress and the different situations that young people may be in to contribute to their stress. This could be an opportunity to introduce <u>Social Determinants of Health</u> (if not covered earlier) and discuss how these external factors shape our experiences and can contribute to our experiences of stress.

Let students know that the goal of this unit is to support students in addressing and managing stress and supporting mental health at the individual level, which means there won't be time to dig into what to do about these factors. Still, it is important to acknowledge that these factors exist and can impact the way we feel. You may want to provide ways for students to get involved in addressing these issues (see the Extensions section below).

Note: This could be an opportunity to bring in pupil services staff or other local resources to participate and facilitate the conversation and support and check in with students as they work on their stress management plans. If students introduced other terms to describe stress in the previous lessons, use their words when possible.

Ways to Manage Stress (20 minutes)



Invite students to share how they manage stress (from their conclusion reflection in the previous lesson). Record ideas on the board as they might be helpful when working on their "Personal Stress Plan".

Let students know that they will now have a chance to create their own personal stress managementplan. Highlight the fact that this guide helps us think about ways to manage stress and support health and well-being in many dimensions of wellness. Also, let students know that taking the time to actually write down goals and plans has been shown to help people actually put those plans into

place. Let students know that they will take about 15 minutes to work through this guide to help them articulate their "Personal Stress Plan".

Note: You can use the guide found here, "<u>Personal Stress Plan</u>" from fosteringresilience.com, or create a modified version. You may want to play music, etc., while students are working.

After the 15 minutes of work time, have students come back together as a large group and debrief by sharing thoughts, reactions, and ideas they created in their plan. Remind students that managingstress is a lifelong process, and they should revisit their plan regularly and update it as needed.

CONCLUSION (3 MINUTES)



Invite students to take 3 deep breaths before reflecting and responding in their notebooks to the following prompt: How did it feel to talk for 2 minutes about yourself? Why do you think you feel this way? What did it feel like to listen to someone for 2 minutes? Why? Whatdoes that tell you about communication?



Warm Up

• Provide a printed copy of the stress meter and a list of strategies that they can pick from.

Ways to Manage Stress

- You may choose a different worksheet or modify the existing worksheet.
- Recognize that not all students believe they have a trusted adult they can talk to. Acknowledge this and encourage students to consider adults such as teachers, coaches, or mentors at an after-school activity.

Conclusion

• Have the questions printed out for students to reference.





Provide a list of community organizations, local charities, etc. that are working to address these issues and ways to be involved.

Discuss our bodies responses to stress and ways that certain selfmanagement techniques engage the parasympathetic nervous system.

The 4 Cs: Care, Compassion, Concern, and Confidence



OVERVIEW		
TIME	~50 minutes	
FOCUS Step of skill development model or functional info	 Functional information Skill practice (Step 4) 	
MATERIALS	 Copies of scenarios List of local, state, and national resources related to mental health 	
KNOWLEDGE OBJECTIVES	 Identify if they or someone else are in crisis and ways to help (including available resources and how to access them).^ ^Should include suicide among other mental health crises 	
SKILL OBJECTIVES	 Demonstrate compassion and empathy when interacting with others. Demonstrate how to ask for and offer assistance to enhance the mental health of self and others (NHES 2007, Standard 4.12.2; DPI 2011, Standard 4:4:A3). Use skills (including non-judgmental, active listening) for communicating effectively with family, peers, and others to enhance mental health in person (NHES 2007, Standard 4.12.1; DPI 2011, Standard 4:4:A1). 	

NOTE: In the introduction, it was noted the importance of discussing resources for youth who may need support as a result of participating in this unit. The next 2 lessons may be triggers for students, so you should remind them of available resources should they need them, review the class norms around self-care and needing support, and should let the school counselor know that you will be teaching these lessons (you may even want to have them present in the classroom if possible).





INTRODUCTION (9 MINUTES)

Warm Up (2 minutes)



As students enter, invite students to reflect on some signs that they might notice in a friend or peer who might need support for a mental health challenge. Have students note ideas in their notebooks. Refer back to these in the "Recognizing When Help is Needed" activity.

Pause & Be Present (3 minutes)



Invite students to sit up tall in their seats; strong but not rigid spine, hands ina comfortable position on their legs or lap, feet rooted to the ground. Invite students to close their eyes or find a spot for focus. Let students know that

today they will be trying a breathing technique called box or square breathing. Invite students to inhale for a count of 3, pause for a count of 3, exhale for a count of 3, pause for a count of 3, inhale for a count of 3, repeat. You may try increasing to counts of 4, but the "pause" or holding breath can be challenging for students; this exercise should be relaxing and not cause any feelings of anxiety or difficulty breathing. Using the count of 3 will likely make this exercise accessible to more students. You could also invite students to experiment with different counts on their own for 1 minute. Prompt students to complete one last full round of square breathing and then open their eyes to bring focus to the front. You may invite students to share their thoughts about and experiences with this technique.

Lesson Objectives (4 minutes)



Invite students to share key takeaways from Lesson 3. Review key ideas related to stress management and communication. Review today's lesson objectives.



MAIN ACTIVITIES (38 MINUTES)

Resources in the Community (20 minutes)



Let students know that the focus has been on stress so far in the unit, which is a common experience for most people. Discuss that they could spend time creating a stress management plan in the last lesson, which can support our mental and emotional health. Let students know that now, we are going to focus on other actions we can take to support mental health, which is to get help for someone who is experiencing a mental health challenge and needs support or someone who is experiencing a mental health crisis. Discuss with students how early intervention can support a person's ability to recover,

avoid experiencing worsening signs and symptoms, and reinforce that mental illness in adolescence is common and getting help can be hard but can make an important difference in people's experience.

Let students know that the next two lessons will be focusing on ways to identify when someone might be facing a mental health crisis, where to get help, and how to get help. Explain to students that you will begin by identifying resources that would be available to a young person experiencing a mental health crisis. Let them know that a mental health crisis is a situation in which a person is in danger of harming themselves or others or which prevents them from taking care of themselves (from NAMI). Examples of mental health crises include: self-harm, thinking about suicide, and experiencing psychosis.

Put students into small groups. Let them know that their task is to identify at least one trusted



adult in the school and at least two valid and reliable resources in the community (or nationally as needed).

Have groups share out the resources they found. Record on the board and have students record in their notebooks. Add any additional resources that students did not find (see some examples on the following page). If students do not include the Trevor Project and other resources for youth of color and other minoritized identities, discuss those (for example, see the list on the following page).



Review hotline numbers:

ESSO

MENTAL HEALTH SUPPORT DURING A CRISIS

National Resources	(800) 273-8255
National Resources National Suicide Prevention Lifeline	(888) 628-9454
the Coopleb	
National Suicide Prevention Lifeline / Options for Deaf and Hard of Hearing National Suicide Prevention Lifeline / Options for Deaf and Hard of Hearing	. (800) 442-HOPE (4673)
National Suicide Prevention Lifeline / Options for Dear and the National Youth Crisis Hotline	(800) 448-3000
National Youth Crisis Hotline Girls & Boys Town National Hotline Trevor Project LGBT Lifeline	
Trevor Project LGBT Lifeline	(800) 246-7743
Trans Lifeline BlackLine: for Black, Indigenous, and People of Color / Call or Text National Eating Disorders Association Hotline	

Wisconsin Resources Find the crisis line for your county https://www.preventsuicidewi.org/county-crisis-lines Find mental health resources for your county http://www.mhawisconsin.org/statewide-resources-by-county.aspx Wisconsin HopeLine (immediate emotional support) Text "HOPELINE" to 741-741 PRISM Peer Support Warmline • (414) 336-7974 prism@mhawisconsin.org Send a direct message on Facebook or Instagram LGBTQ Anti-Violence Resource Line through Diverse & Resilient · (414) 856-LGBT (5428) · ipv.diverse@gmail.org Resources for Elementary, Middle & High School Students

Technology Alternative



can use Jamboard

to list their ideas onto the screen. Also, consider using a PollEverywhere to create a word cloud of responses.

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Recognizing When Help is Needed (18 minutes)



Let students know that now you will discuss ways to recognize when help is needed and to identify signs and symptoms of a possible mental health crisis. Provide the infographic and "<u>How to Help a Friend</u>" infographic from <u>NAMI - Dane County</u> as a reference for students:

Provide the following signs of <u>"How Will I Know If Something's Wrong</u>" from NAMI on a handout oron a slide and other visuals. Ask for students to volunteer to read these aloud:

- Withdrawing from social activities or appearing down for more than two weeks. This could mean crying regularly, feeling tired all the time, or not wanting to hang out anymore.
- Self-harming actions such as cutting or burning. Some people may begin to wear long sleeves or pants to cover up signs that they are doing this.
- Threatening to kill themselves or making plans to do so. Although you may not know whether your friend is serious or not, it's better to be safe and take things seriously.
- Extreme out-of-control, risk-taking behaviors. Behaviors that can endanger their ownlife and others, such as speeding excessively and not obeying traffic laws, might be a sign that something is wrong.
- Sudden overwhelming fear for no reason, including intense worries or fears that get n the way of daily activities like hanging out with friends.
- Not eating, throwing up, or using laxatives to lose weight. Pay attention if your friend isn't eating much at lunch or going to the bathroom right after meals.
- Severe mood swings. Life is stressful, but if there seem to be outbursts that go beyond how other people would often act, it might mean something more serious.
- Repeated use of drugs or alcohol. Coming to class hung over, showing up to sporting events intoxicated, or wanting to bring drugs or alcohol into daily activities is not normal.
- Drastic changes in behavior, personality, or sleeping habits. Your friend might be sleeping much more or much less or get agitated more frequently.
- · Extreme difficulty in concentrating or staying still.

Let students know that if they or someone else is experiencing any of these symptoms, you should gethelp from a trusted adult or from a valid and reliable resource right away.

Note: You may want to share current local data related to suicide ideation and discuss risk factors that may increase the likelihood of suicide or suicide ideation.



Watch the <u>Kids in Crisis Video</u> about Alex and discuss the signs and symptoms that were present, resources accessed, and recovery.



Using the following scenarios, put students into small groups and have them identify signs that indicate help is needed and identity at least one trusted adult and one valid and reliable resource or service that could be contacted to support the young person in the scenario. Debrief as a group. Let students know that they will be building on these scenarios in the next lesson.

Scenarios:

⁽⁽⁾ Jason's family moved to the United States from South Korea when he was 3 years old. He began classical piano study at age 5, and ever since then, music has been his passion. He has been pushed to achieve at a high level, attending only the best schools, working with private tutors, and taking advanced classes. As he grew older, Jason's parents made it clear that they expected him to pursue a career in medicine. In his freshman year of high school, Jason experienced severe anxiety and depression because the expectations of him were so high. Recently, his friends have noticed that he is always wearing long sleeves, even during PE and when it is hot out, and he has seemed really agitated and irritable over the last couple of weeks.

Friends know that Rosa has faced a lot of loss in her life. Two of her grandparents died before she turned 9 years old, and her mother died of cancer when she was 11. She lives with a foster family. Rosa has started to have constant disturbing thoughts and feels like she has to do certain things to prevent the thoughts from coming true. She spends a lot of time and energy worrying that horrible things will happen to her. She is worried that she, too, will become sick and die. Whenever she notices something slightly "off" with her health, she is consumed with fear and spends hours googling illnesses and their different symptoms to assure herself that she is okay. She talks to her friends often about her anxieties, and she often refuses to hang out with them because of her fears.

Jamaal is new at his school this year and one of only a few Black students at a predominately white school. He is very shy and so far has had a difficult time making friends; however, he recently made the varsity basketball team, which has him feeling a little better. A senior on the team has been welcoming to Jamaal. Jamaal is bisexual and has a boyfriend at his old school. He worries how his new teammates will treat him if they find out. He has heard some of them make comments suggesting that they do not like boys who are gay and that they would not be comfortable with a "gay boy" in the locker room. He finds these comments hurtful, but he just smiles and tries to ignore them.Sometimes he will even joke around with them, but afterward, he feels ashamed. He wants to fit in.

1⁴

In 8th grade, Adriana began to feel depressed and to have panic attacks. She began to engage in self-harm to cope with her feelings of low selfworth. She didn't tell anyone at first, but Adriana told her everything when her mother noticed her scars. Adriana's parents took her to a therapist to get help for the self-harm. While in therapy, Adriana shared that when she was 8 years old, she had been sexually abused by her 15-year-old neighbor, the son of a familyfriend from church. While she has made a lot of progress in therapy, she still experiences flashbacks and struggles with feelings of shame. In therapy, she has also begun to realize that she is attracted to girls and is not interested in dating boys. She is concerned about what her family will think if they were to learn of her feelings, but she has told some of her friends about her sexuality and trauma history.

When Jolie's cousin Mara, who was more like a sister to her, died by suicide, Jolie was the one to find her. Jolie says that since then, no matter how hard she tries to move on, she feels like she's just going through the motions.

Her grades dropped and never went back up. She also quit field hockey and track and hasn't played sports since. Soon it will be the 1-year anniversary of Mara's death, and Jolie's friends have been trying to keep her mind off of it. They invite her places, but she never goes. They text her, but she turns off herphone. Last night she tweeted, "Mara had it right. #abetterplace." *

Charles hates school because he gets bullied a lot. He lives with ADHD and has repeated a grade. Charles used to spend a lot of time playing video games with his older brother, Robert. But Robert joined the Army, and now Charles spends most of his time alone. Sometimes he skips school, and it seems like when he's not sleeping, he's eating. He tells you that he'd like to talk more with his mom, but she's exhausted when she gets home from her second job. He says he'd probably be doing her a favor if she didn't have to worry about him anymore.*)

*Scenario from KidsHealth in the Classroom worksheet. Download the entire scenario worksheet.

CONCLUSION (3 MINUTES)



Invite students to take 3 deep breaths. Invite students to share how they feel after this lesson or any thoughts or reactions that they have before reflecting and responding in their notebooks to the following prompt: What might make it hard to get help for someone experiencing a mental health crisis? Why?



Warm Up

- Give an example scenario and see if the student can pick out the signs that a friendneeds help.
- If using a Google Doc, write the writing prompt down for the student on a Google Doc for students to fill in.

Resources in the Community

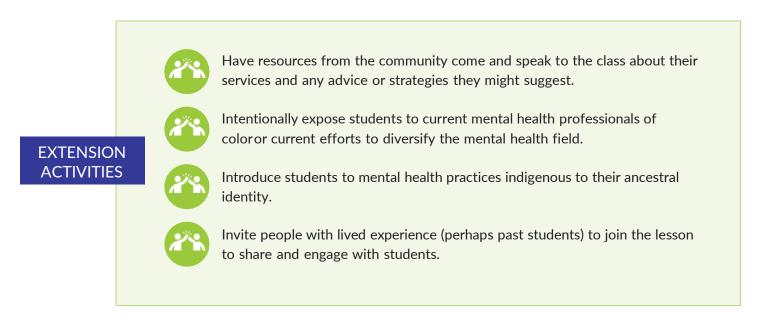
• Provide students with criteria to evaluate resources. Give examples of valid and reliable resources and have students justify why those resources are valid and reliable.

Recognizing When Help is Needed

- The Ted Talk "<u>Mental Disorders as Brain Disorders: Thomas Insel at TEDxCaltech</u>" is a quick and simple way to make it very clear that, like any other disease, mental illness is biological.
- Let students highlight this information in the text. Give a copy of the scenario to everyone in the group. If they feel uncomfortable talking to others, they can at least follow along with the scenario. Give space so they can write any notes.

Conclusion

• Give an option to do an online journal mentioned above. Provide a multiple choice typequestion and answers.



The 4 Cs: Care, Compassion, Concern, and Confidence



OVERVIEW		
TIME	~50 minutes	
FOCUS Step of skill developmentmodel or functional info	Skill practice (Step 4)	
MATERIALS	Copies of scenarios from Lesson 4	
KNOWLEDGE OBJECTIVES	 Identify if they or someone else are in crisis and ways to help (including available resources and how to access them).^ ^Should include suicide among other mental health crises 	
SKILL OBJECTIVES	 Demonstrate compassion and empathy when interacting with others. Demonstrate how to ask for and offer assistance to enhance the mental health of self and others (NHES 2007, Standard 4.12.2; DPI 2011, Standard 4:4:A3). Use skills (including non-judgmental, active listening) for communicating effectively withfamily, peers, and others to enhance mental health in person (NHES 2007, Standard 4.12.1; DPI 2011, Standard 4:4:A1). 	

Note: In the introduction, it was noted the importance of discussing resources for youth who may need support as a result of participating in this unit. This lesson may be a trigger for students, so you should remind them of available resources should they need them, review the class norms around self-care and needing support, and should let the school counselor know that you will be teaching these lessons (you may even want to have them present in the classroom if possible).



INTRODUCTION (11 MINUTES)

Warm Up (2 minutes)

As students enter, invite them to reflect on why they believe it is important to be able to gethelp early for themselves or others who are experiencing mental health challenges or crises.

Pause & Be Present (5 minutes)



Invite students to sit up tall in their seats; strong but not rigid spine, hands ina comfortable position on their legs or lap, feet rooted to the ground. Invite students to close their eyes or find a spot for focus. Let students know that today, they will be following a guided meditation. Here is an example from <u>Stop. Think. Breathe</u>. You can choose a different guided meditation if you feel there is one that would better meet the needs of your students. You may want to invite students to share their experiences with the guided meditation.

Lesson Objectives (4 minutes)

Invite students to share key takeaways from Lesson 5. Review key ideas related to knowing when help is needed, how to access help, and using communication skills to support someone experiencing a mental health challenge or crisis. Review today's lesson objectives.

MAIN ACTIVITIES (37 MINUTES)

Barriers to Getting Help (10 minutes)



Invite students to share their ideas from their reflections in Lesson 4. Record ideas on the board. Have a discussion with students about their responses with a focus on how these ideas might contribute to stigma, how certain barriers might be overcome (this is the focus), and issues that are systemic if brought up (e.g., being afraid of calling 9-1-1, treatment of

Black, Indigenous, People of Color (BIPOC) in the healthcare system).

Note: You may also refer back to Lesson 2 and discuss social and structural determinants of health.

Emphasizing the importance of getting help even when it is hard and explaining this whole unit's goal is to help students feel more comfortable and more confident when help is needed.

Practice Getting Help (27 minutes)



Let students know that they will be building on the scenarios from the previous lessons. Review the skill cues and discuss the importance of demonstrating empathy and showing care during communication. In this lesson, students will practice applying to skill cues by role-playing how they would respond in the scenario and asking for help. Before putting

students into groups, discuss ways to start a conversation with someone they are concerned about. Some sample sentence stems include:

- "I've noticed..."
- "I care about you..."
- "You're not alone."
- "I'll go with you to talk to Mrs. Smith about this."

Put students into five groups (these groups can be the same or different from Lesson 4). Assign each group 1 of the scenarios that they reviewed in Lesson 4.

Students should work together to write a role play that explains what they would do in the scenario and how they would get help. Ask students to be explicit in both "what" they would do and "why" or "how" this is helpful. You may want to review skill cues prior to this activity. Have students perform their role-plays (if time) and debrief as a class. Let students know that sometimes we may need to be persistent and may need to speak to more than one trusted adult. Remind students that it is important to keep reaching out when concerned about self or others.

CONCLUSION (2 MINUTES)



Invite students to take 3 deep breaths before reflecting and responding in their notebooks to the following prompts in their notebooks:

- Do you feel more comfortable/confident asking for help for someone experiencing amental health crisis? Why or why not?
- What other supports or resources would you need to feel more comfortable or confident?



Warm Up

• Give a multiple choice or fill in the blank (with word bank) option.

Practice Getting Help

- You could create your own scenarios to use in this section. You could have adults come to role-play different resources. Students could also reach out to school resources and ask what would happen if they went to them for help in the situation.
- List examples of strategies up on the board for students to select from.
- Provide students with an example script or a graphic organizer to help them organize their ideas.

Conclusion

· Provide written prompts, online journals, or a multiple-choice type format.

EXTENSION ACTIVITIES



Notify community resources in advance of this lesson and see if could practice calling during the lesson. Alternatively, you could ask the resources for a "What Teens Should Know" information sheet that could shared.

My Boundaries, My Health



OVERVIEW		
TIME	~50 minutes	
FOCUS Step of skill developmentmodel or functional info	 Functional information Skill practice (Step 4) 	
MATERIALS	Boundaries scenarios	
KNOWLEDGE OBJECTIVES	 Discuss personal values and how to establishboundaries based on values. Describe connections between healthy interpersonal relationships and mental health. 	
SKILL OBJECTIVES	 Use skills (including non-judgmental, active listening) for communicating effectively withfamily, peers, and others to enhance mental health in person (NHES 2007, Standard 4.12.1; DPI 2011, Standard 4:4:A1). Communicate personal boundaries and respond effectively when boundaries arecrossed. Demonstrate consent and permission seeking and giving in interpersonal relationships. Demonstrate compassion and empathy when interacting with others. I have the courage to speak up to people when their words, actions, or views are biased and hurtful, and I will communicate with respect even when we disagree (Learning for Justice 2018, Standard AC.9-12.18). 	





INTRODUCTION (11 MINUTES)

Warm Up (2 minutes)

As students enter, invite them to consider how relationships in their lives can both support, and sometimes not support, their mental health.

Pause & Be Present (5 minutes)



Invite students to sit up tall in their seats; strong but not rigid spine, hands in a comfortable position on their legs/lap, feet rooted to the ground. Invite students to close their eyes or find a spot for focus. Let students know that today they

will be trying a technique called a body scan. <u>Here is an example of a 5-minute body</u> <u>scan</u>. You may want to choose a different meditation that better meets the needs of yourstudents, if needed. You may want to invite students to share their experiences with the body scan.

Lesson Objectives (4 minutes)

Invite students to share key takeaways from Lesson 5. Review key ideas related to knowing when help is needed, using communication skills to get help when they are experiencing a mental health challenge or crisis. Review today's lesson objectives.

MAIN ACTIVITIES (35 MINUTES)

What are Boundaries? (15 minutes)



Let students know that this lesson will introduce the importance of boundaries in relationships. It is important to acknowledge to students that the focus of this unit is not relationships but that boundaries can help support our mental health and support resiliency. Boundaries can also challenge our mental health, so we wanted to spend some time examining boundaries and relationships and how to communicate about boundaries.

Explain to students that there are multiple types of boundaries, including physical, emotional, mental, material/possessions, and time. Boundaries are the "limits or rules" that people set for themselves in various situations. An important part of boundaries is consent which is when we actively approve something is okay and not breaking our rules or limits. People should be asking for our consent and should respect the boundaries that have been set when not given.

In this lesson, we will focus on mental and emotional boundaries. You may use the definitions provided here or your own:

- **Mental boundaries** apply to your thoughts, values, and opinions. Are you easily suggestible? Do you know what you believe, and can you hold onto your opinions? Can you listen with an open mind to someone else's opinion without becoming rigid?
- **Emotional boundaries** distinguish separating your emotions and responsibility for them from someone else's. It's like an imaginary line or force field that separates you and others.

Healthy emotional boundaries require clear internal boundaries – knowing your feelings and yourresponsibilities to yourself and others (Campbell & Juby 2021).

Let students know that they will now look at some examples of boundaries - some that are health-promoting and some that are not. Show each boundary and have students "vote" (thumbs up or down) about whether this is an example of a health-promoting emotional boundary or not.

Examples of emotional boundaries for teenagers may include (the ones with asterisks are health-promoting):

- Moving slowly into friendships to establish trust*
- Trusting no one, or everyone
- Stating personal values despite what others believe*
- · Letting others define you
- Respecting others, despite their differences*
- Respecting oneself, even though someone may not like you*
- Allowing friends to direct your life, without questioning
- · Clearly communicating needs and wants, even though you may be rejected*
- Noticing when your personal boundaries feel invaded*
- · Going against personal values to please others or to be liked
- Understanding that others cannot anticipate your needs*
- Believing that others can anticipate your needs
- Giving as much as you can for the sake of being liked

(Price-Mitchell 2019)



Communicating about Boundaries (20 minutes)



Explain to students that one of the ways that we can use our communication skills is to help maintain our boundaries. Review skill cues if needed. When we communicate our boundaries, we express ourselves in effective ways, listening to our own needs and the voices of others, and working to understand what is important to us and the person we are communicating with.

Put students into small groups and have them determine how to respond in each scenario. Have groups share out (be sure to have students actually write out and practice what they would say) and discuss how there can be multiple ways to communicate boundaries effectively.

Sample scenarios: **(** Jon's friends know that he is gay, and most are affirmative and accepting of him. Someone in Jon's social group, Dan, is not supportive and calls Jon names and bullies him. Dan threatens to tell other people that Jon is gay. Jonwonders how to set a boundary with Dan. Also, Jon's other friends want to step in and talk to Dan about his behaviors but are intimidated and unsure how to do so.

Marie and Carlos have been dating for two years, and they are at the point in their relationship where they are getting more intimate. Carlos is hesitant to tell Marie that he has scars on his torso from self-injury. He is worried about what she will think. He wants to continue being close to her, but he is not ready forher to see his scars or to explain them to her.

Eddie works a lot after school hours, helping provide for their family. Some weeks they even work weekends and spend more time on their job than they do in school. They worry that their exhaustion will impact their school work. They are embarrassed and do not want their teachers to know why sometimes they fall asleep in class and miss a homework deadline.

Dominique always looks after his younger sister, Elaina, and is very protective of her. He takes a lot of pride in his sister and does not ever want anything bad to happen to her. Elaina is entering high school, and some of Dominique's friends are beginning to voice their attraction to her. Dominique thinks some of his friends would be respectful and kind to his sister. He also has concerns that one friend in particular, who is the most vocal about his attraction for Elaina, would not treat his sister very well.

Anne's mother is very hard on her. She has high expectations for Anne and is often critical. Anne has started to experience test-related anxiety and is hesitant to tell her mother that her grades have been slipping. Anne's therapist suggests that Anne talk with her mother about her **main anxieties** and needs, but Anne is conflicted about doing so.



CONCLUSION (4 MINUTES)



Invite students to take 3 deep breaths before reflecting and responding in their notebooks by writing about some of their mental or emotional boundaries and how they align with their values. Let students know it is okay if they can't think of any right now, invite them to reflect on their values and what they learned from the lesson.

DIFFERENTIATION AND MODIFICATIONS

Warm Up

- Give a multiple choice or fill in the blank (with word bank) option.
- Give scenarios, and students identify if the relationship is positively or negatively impacting health.

What are Boundaries?

Consider that boundaries are largely influenced by culture. Be sure to have examples that will
resonate with your students and show examples of different cultural boundaries. Consider
adding: Explore how societal structures determine whose boundaries are acknowledged and
whose aren't.

Communicating about Boundaries

• Provide a printout of skill cues and examples of boundaries. A graphic organizer would also be helpful.



Invite a local mental health professional to come and speak to students about boundaries.

Use examples from age-appropriate texts that students are reading to

Putting it All Together

ESSON

OVERVIEW		
TIME	~50 minutes	
FOCUS Step of skill developmentmodel or functional info	• Skill practice (Step 4)	
MATERIALS	Copies of scenarios	
KNOWLEDGE OBJECTIVES	• N/A	
SKILL OBJECTIVES	 Use skills (including non-judgmental, active listening) for communicating effectively with family, peers, and others to enhance mental health in person (NHES 2007, Standard 4.12.1; DPI 2011, Standard 4:4:A1). Demonstrate consent and permission seeking and giving in interpersonal relationships. Demonstrate compassion and empathy when interacting with others. 	



INTRODUCTION (12 MINUTES)

Warm Up (2 minutes)



As students enter, invite them to spend a few minutes describing how communication can support health and well-being.

Pause & Be Present (6 minutes)



Invite students to sit up tall in their seats; strong but not rigid spine, hands in a comfortable position on their legs or lap, feetrooted to the ground. Invite students to close their eyes or find a spot for focus. Let students know that today they will

be practicing a technique for grounding in your body and engaging thesenses (similar to the other grounding exercise we tried in Lesson 3).

<u>Here is an example from Stop.Think.Breathe</u>. You may want to choose a different meditation that better meets the needs of your students, if needed. You may want to invite students to share their experiences with this grounding meditation.

Lesson Objectives (4 minutes)



Invite students to share key takeaways from Lessons 5 and 6. Review key ideas related to knowing when help is needed, how to access help, and using communication skills to support someone experiencing a mental health challenge or crisis. Review today's lesson objectives.





MAIN ACTIVITIES (35 MINUTES)

What Would You Do?

Let students know that today is an opportunity for practice! Students will have the opportunity to practice many of the different skills they have built over the unit.

Put students into small groups and distribute scenarios to each group (each group will have a different scenario). Students should work through the scenarios and respond based on what they have learned through the unit. Each group should include a trusted adult or trusted community resource that could be accessed to support the person in the scenario and should include how they would ask for help.

Each group should share their responses, and the class should provide feedback or additional ideas for how to respond.

Note: This is also a good opportunity for students to work on effective communication skills while giving feedback!

<u>Sample scenarios</u> are provided by <u>teenmentalhealth.org Mental Health & High School Curriculum</u> <u>Guide.</u> You may design your own scenarios or even have students design their own scenarios for this activity. It is important that any scenarios used are relevant for your students.

CONCLUSION (3 MINUTES)



Invite students to take 3 deep breaths before reflecting and responding in their notebooks to the following prompt: What are 3 things you learned in this unit, what are two things you will share or tell someone else from this unit, what is one action you will take or one thing you might do differently as a result of this unit? Consider how you can use what you learned to normalize mental health in areas where it is stigmatized.

DIFFERENTIATION AND MODIFICATIONS

What Would You Do?

- This activity could be more scaffolded by adding a worksheet with questions for each scenario. You could have students role-play the "resolution" of the scenarios.
- Make sure to provide an example of what the finished product should look like, graphic organize, list of questions they should answer.

"Let's Talk"



OVERVIEW		
TIME	~50 minutes	
FOCUS Step of skill developmentmodel or functional info	 Skill practice (Step 4) Assessment and Transfer (Step 5) 	
MATERIALS	• N/A	
KNOWLEDGE OBJECTIVES	 Focus is on demonstration of knowledge acquired in the unit. 	
SKILL OBJECTIVES	 Use skills (including non-judgmental, active listening) for communicating effectively withfamily, peers, and others to enhance mental health in person (NHES 2007, Standard 4.12.1; DPI 2011, Standard 4:4:A1). 	



INTRODUCTION (12 MINUTES)

Warm Up (2 minutes)



As students enter, invite them to reflect on their comfort and confidence in communicatingabout mental health.

Pause & Be Present (6 minutes)



Invite students to sit up tall in their seats; strong but not rigid spine, hands ina comfortable position on their legs or lap, feet rooted to the ground. Invite students to close their eyes or find a spot for focus. Let students know that

they will be practicing another grounding technique with the guided meditation they are trying today. <u>Here is an example from Stop.Think.Breathe</u>. You may want to choose a different meditation that better meets the needs of your students, if needed. You may want to invite students to share their experiences with this grounding meditation.

Lesson Objectives (4 minutes)

Since students will have time later in the lesson to reflect on and share takeaways from the unit, let students know that today you will be working together to start the assessment.

MAIN ACTIVITIES (38 MINUTES)

Setting the Stage for the Assessment (15 minutes)



Let students know that we will decide on the topics and skills that you think are most important for other teens related to mental health for the assessment.

Put students into small groups and have them identify key topics or skills. After about 5-6 minutes, have a representative from each group come up to write theirideas on the board.

Technology Alternative

Have students put ideas onto a Jamboard and then group them into categories prior to assigning groups.

You may choose to hold a more formal "vote." You could have students submit their ideas ahead of time, and then you couldorganize them into a survey or polling software to have students vote.

Once all ideas are on the board, make sure each idea only shows up once and number all ideas. Ask each group to rank their top 5

choices and then come back together and determine the top 5 topics or skills for the assessments.

Note: The number of choices should reflect the number of groups you plan to have for the assessment.

Once this is done, review the instructions for the assessment and remind students of important reminders such as:

- 1. The goal is to reduce stigma.
- 2. Projects should not reinforce stereotypes.
- 3. Be mindful of language and ways that aspects of your videosmay be viewed and interpreted.

Time to Work on Assessment (~13 minutes)

Students have time in their groups to start working on the assessment!

CONCLUSION

No specific concluding activity here; students can use all thetime to work on their projects.



The videos that students complete could

be shared in the broaderschool and community.

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