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Gaps in Implementation of Mental Health and Wellness Programs in Schools

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Abstract

Mental Health is the key concern in present scenario especially in the post COVID -19 pandemic era. Mental Health refers to emotional, psychological, and social well-being of an individual. This affects our way of thinking, feeling, and acting. Schools are large providers of mental health services for children and adolescents. A key factor in creating a caring and supportive atmosphere for students is the Mental Health and Wellness Program in schools. The program seeks to improve kids' academic performance and mental health by raising awareness, providing early intervention, and teaching critical coping skills. By fostering an environment where mental health concerns are openly discussed and de-stigmatized, it helps schools foster a culture where each student's holistic development is given first priority. The government also takes the mental health and general wellbeing of school-age children very seriously. The government has taken numerous initiatives in this area under the MANODARPAN Initiative of the Ministry of Education. What are the gaps in the implementation of mental health and wellness programs at the school level, though? In light of the context, the presentstudy was conducted out to identify the gaps in the in Implementation of Mental Health and Wellness Programs in Schools.

Key Words: *Metal health, Mental health and wellness programme, MANODARPAN*

Introduction

Mental Health is the key concern in present scenario especially in the post COVID - 19 pandemic eras. Mental Health refers to emotional, psychological, and social well-being of an individual. This affects our way of thinking, feeling, and acting. Our relationship with

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others, how we manage stress, and how we make decisions are all influenced by it. Maintaining excellent mental health is crucial for the duration of one's life, from infancy to maturity.

*Mental health is defined as a "state of well-being in which every individual realizes his or her own potential, copes with the normal stresses of life, works productively and fruitfully, and is able to make a contribution to her or his community" (WHO, 2005).*Since mental health is a critical aspect of children's and adolescents' overall development and well-being, it is becoming increasingly important globally.

Because of globalization and technology breakthroughs, the socio-cultural and economic paradigms are changing quickly in the modern period. Life has become more competitive, faster, and more complicated as a result of our social and economic progress. The effects of this swift transition are still felt by today's youth. This has increased the pressure on the kids to perform well in order to meet the demands of a globalized society and get ready for the future. Their mental and behavioral issues are a result of this. The behavioral and mental health issues that school-age children face have drawn the attention of psychologists, parents, educators, and the general public. It is believed that children's behavioral issues at school impede both the teaching and learning process for the students. Most of the time, these issues with children go unnoticed and unaddressed, and occasionally the severity of these issues and their overall effect on the child's development worsen.

In the last twenty years, there has been a global surge in mental health issues affecting children and adolescents, which has led to a major rise in impairment. The development of children and young adults is significantly hampered by mental health issues, which also lead to issues with social and academic achievement, poor school adjustment, and diminished focus. Mental health problems are also linked to early dropout rates, suspensions, and attendance at school. In order to promote emotional and social well-being, the WHO's Global School Health Initiative (WHO, 2000) stressed the significance of concentrating on and improving the psycho-social environment in schools.

When students arrive at school, their mental health does not leave the building. The groundwork and framework for offering mental health services in schools in a way that safeguards student wellbeing, fosters learning, lowers stigma, and expands access have been laid by decades of research and experience. In an ideal multitiered support system, mental health services help students, their families, teachers, community members, and society at large.

Schools have a major role in providing children and adolescents with mental health care. Schools assist in identifying and intervening early on in mental health concerns among kids through curriculum, teacher counselors, and mental health and wellness initiatives. Furthermore, it promotes discussions about mental health stigma, provides psychological support and referral services to students.Children are counselled by schools and receive

structured feedback on their academic and co-curricular activities as a way to promote their intellectual wellbeing. It motivates students to redress their mistakes, overcome weaknesses, and work towards improvement.

NCERT issues various guidelines to schools for early identification of mental health problems in students. It also runs various in-service and pre-service programs for trained teachers in identifying early signs in students for attachment issues, separation anxiety. School refusal, communication issues, and depressive states, conduct related issues, excessive use of internet, intellectual disabilities and learning disabilities.

In order to promote holistic development, the National Education Policy - 2020 places a strong emphasis on the mental health and wellbeing of pupils. Additionally, it instills in students values and life skills that support their development, self-preservation, and long-term progress. It was stated that children who are malnourished or ill cannot learn at their best. Therefore, healthy meals, the addition of qualified social workers and counselors, as well as community involvement, will all contribute to addressing children's nutrition and health, including their mental health (NEP 2020).

The government also takes the mental health and general wellbeing of school-age children very seriously. The government has taken numerous initiatives in this area under the MANODARPAN Initiative of the Ministry of Education. What are the gaps in the implementation of mental health and wellness programs at the school level, though? Realizing the scenario researcher carried out the study to identify the gaps in the in Implementation of Mental Health and Wellness Programs in Schools.

Objective

To Study the Gaps in the Implementation of Mental Health and Wellness Programs in Schools.

Method

Descriptive Survey Method was used for the study.

Sample

The sample of the study consists of school teachers working as PRT, TGT, PGT, Head Masters (HM) and Assistant Head Masters (AHM), Counsellors and Others including NGO Members/Managers/Administrators etc. The sample of the study consists of school teachers working as PRT, TGT, PGT, Head Masters (HM) and Assistant Head Masters (AHM), Counsellors and other members (NGO Members/Managers/Administrators etc.). The Data consisted of 21 TGTs, 21 PGTs, 05 PRTs, 18 Counsellors, 3 Teacher Counsellors, 7 Head

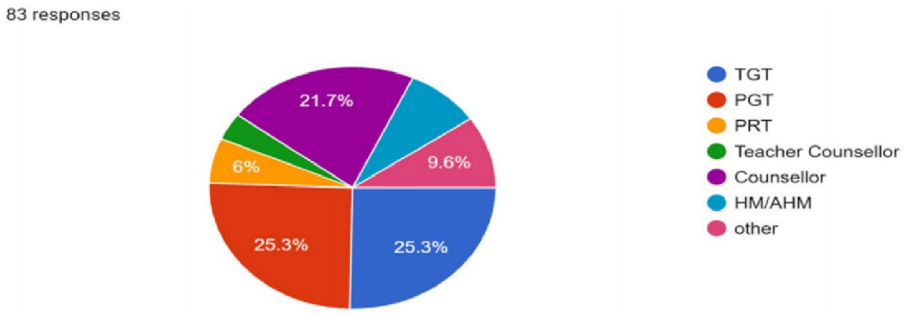
Masters or Assistant Head- Masters and 8 other stakeholders of school education, Totaloverall 83 respondents responded to the study.

Table 1 Sample of the Study

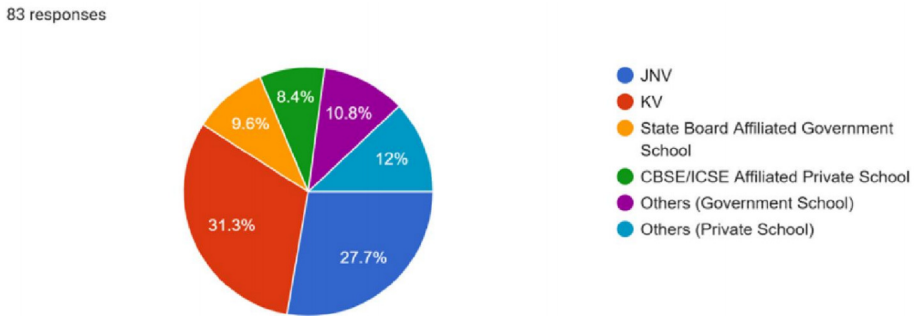
S.No.	Type of respondents (Sample)	Number	Percentage
1	Trained Graduate Teacher(TGT)	21	25.3
2	Post Graduate Teacher (PGT)	21	25.3
3	Primary Teacher	5	6.02
4	Counsellors	18	21.67
5	Teacher Counsellors	3	3.61
6	Head Masters/Assistant Head Masters	7	8.43
7	Others (NGO Members/Managers/Administrators etc.)	8	9.64
	Total	**83**	

The demography of the sample can be seen in the following diagrams-

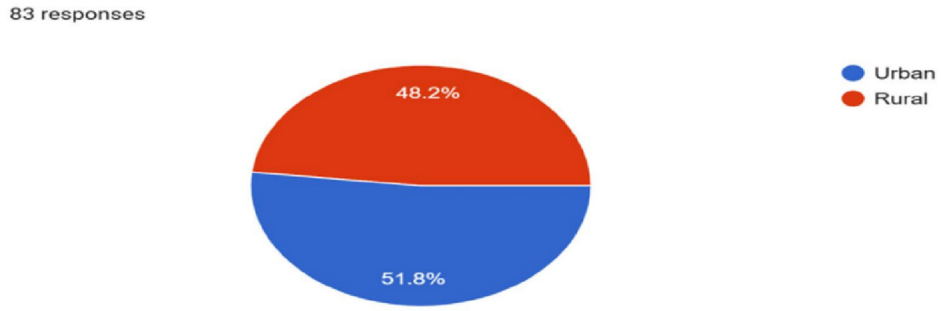
1. **Designation wise Respondents:**



2. **School wise Respondents:**



3. Location wise Respondents:

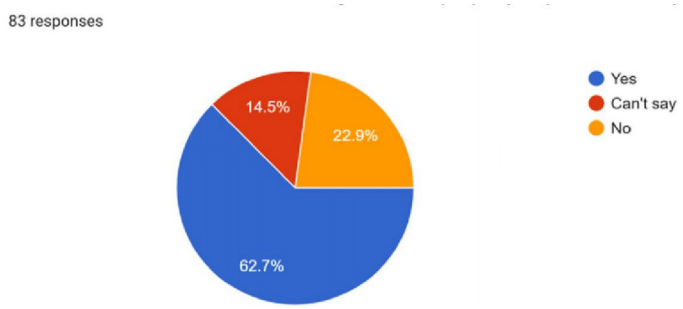


Tool

A questionnaire was prepared and developed by the researcher to collect the data from the sample regarding gaps in the Implementation of Mental Health and Wellness Programs in Schools. It was sent in the form of Google form and sent through WhatsApp groups and emails to the schools and respondents.

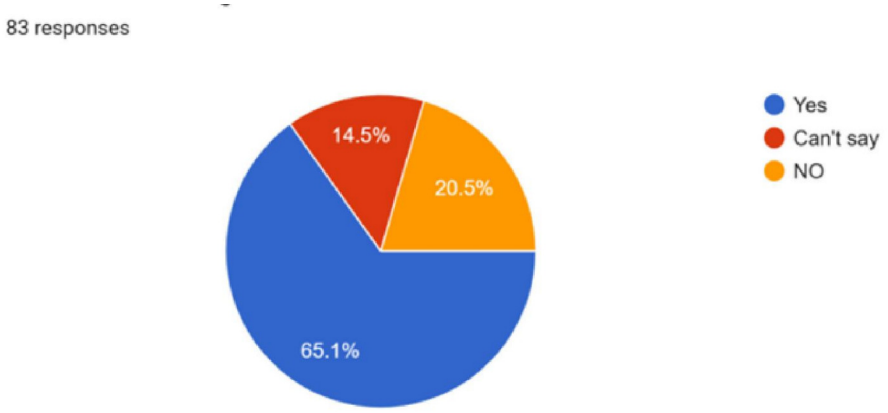
Analysis and Findings of the Study

Item 1: ***Mental Health and Wellness Programme is properly implemented in the school.***



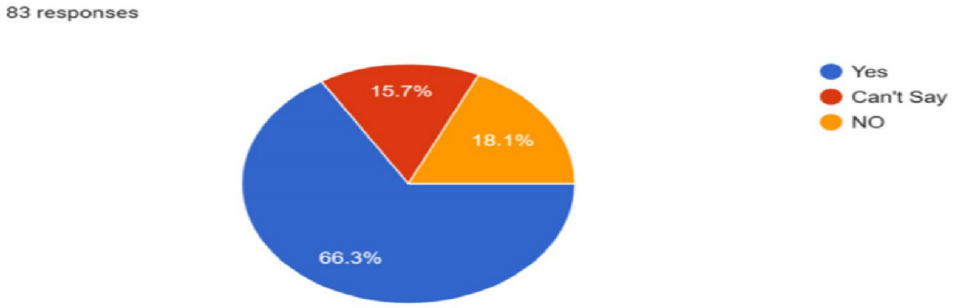
It can be seen from the above pie chart that majority of stake holders i.e. 62.7% opined 'Yes' that Mental Health and Wellness Programme is properly implemented in the school and 22.9 % said 'No' about it while 14.5% didn't say anything about the statement.

Item 2: The school administration/management is actively participating in the implementation of the Mental Health and Wellness Programme for the school



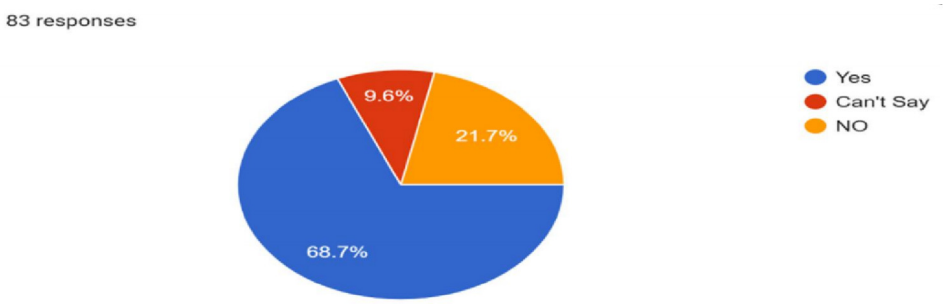
It is clear from the above pie chart that the majority of the stake holders i.e. 65.1% opined 'Yes' that the school administration/management is actively participating in the implementation of the Mental Healthand Wellness Programme for the school and 20.5 % said 'No' about it while 14.5% didn't say anything about the statement.

Item3.Support provided by the School Administration/Management in the implementation of Mental Health and Wellness Programme in the school.



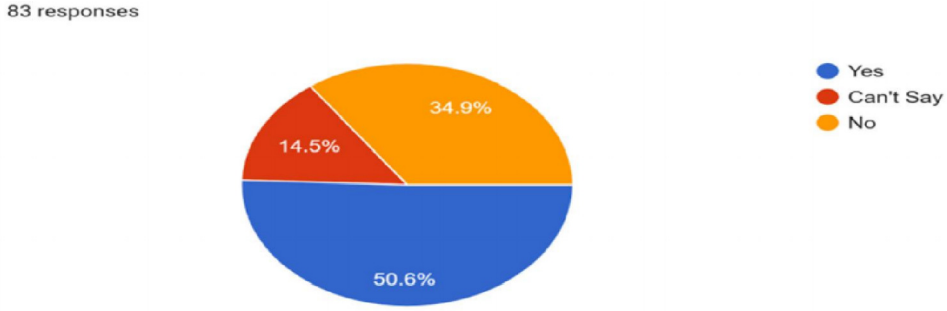
It can be seen from the above pie chart that the maximum no. of stakeholders i.e. 66.3% thought that support is provided by the School Administration/Management in the implementation of Mental Health and Wellness Programme in the school**.** However, 18.1% disagreed with the statement, and 15.7% had no opinion.

Item 4: School Teachers are aware about the Mental Health and Wellness Programme



It can be visualized from the above pie chart that majority of stake holders i.e. 68.7% opined 'Yes' that School Teachers are aware about the Mental Health and Wellness Programmeand 21.7 % said 'No' about it while 9.6% didn't say anything about the statement.

Item 5: Did any Orientation provided to teachers of the school about implementation of Mental Health and Wellness Programme?



It can be seen from the above pie chart that approximately half of the stakeholders i.e. 50.6% admitted that orientation provided to the teachers of the school about implementation of Mental Health and Wellness Programme and 34.9 % said that no orientation provided to teachers of the school about implementation of Mental Health and Wellness Programme while 14.5% didn't say anything about the statement.

Item 6: What are the Gaps in implementation of Mental Health and Wellness Programme in schools?

Major Gaps identified by the stakeholders is shown the table 2.0 with percentage of opinion.

Table 2 : Gaps in implementation of the Mental Health and Wellness Programme in schools

S.No.	*Gap Areas*	Percentage
1	Overloaded Curriculum	53.00%
2	More Emphasis on Academics	44.60%
3	No time slots for such activities	43.40%
4	Lack of Parents Support	41.00%
5	Teachers are not oriented	38.60%
6	Lacking Awareness at Management/ Admiration level	37.30%
7	Lack of Trained Counsellor/s in schools	36.10%
8	Lack of resources	33.70%
9	No Proper work role for counsellor	32.50%
10	Lack of Team work	26.50%
11	Traditional Taboos	27.70%
12	Lack of Funds/Budget	25.30%

Diagram:*Percentage of identified Gaps in implementation of the Mental Health and Wellness Programme in schools*

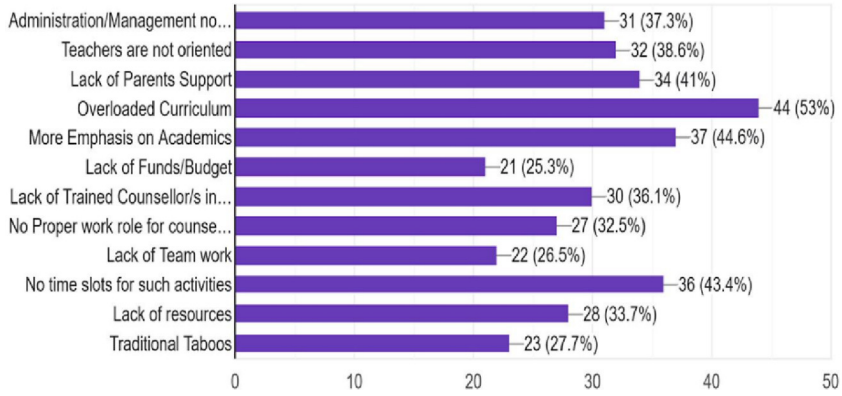


Table 2 shows that more than half (53%) of the stake holders opined that over loaded curriculum is the major challenge for the proper implementation of the mental health and wellness programme in schools, 44.6% stakeholders reflected that more emphasis on academics is also creating a gap in implementation. 43.4% stakeholders responded that there is no time slots for such activities in regular time table. 41% stake holders opined that lack of parental support is also big factor in creating Gaps in implementation of the Mental

Health and Wellness Programme in schools. Lacking of formal orientation of all the teachers about the programme and related activities is also identified gap by 38.6% stakeholders. lacking Awareness at Management / Admiration level, Lack of Trained Counsellor/s in schools, No Proper work role for counsellors, Lack of resources, Lack of Team work, Traditional Taboos, Lack of Funds/Budget are the identified areas/factors creating gaps in the implementation of the Mental Health and Wellness Programme in schools.

Challenges in implementation of Mental Health and Wellness Programme in schools: Stake holders reported following challenges in the implementation of the mental health and well programme in schools-

- Higher authorities not providing a proper plan and period.
- More attention in academics.
- Rigidness of the management, taking mental health issues not seriously.
- Proper Students orientation and participation: When students are also properly oriented that mental health and wellness is very much required for their all-round development and they can freely share their mental health issues with teachers, counselors and even with Principal also.
- Lack of awareness about mental health.
- Absence of fair regulatory body to check activities
- Illiteracy of Parents & lack of knowledge in rural areas
- Not considering mental health a priority. Lack of human unity.
- Not have proper plan in timetable of the schools
- Principal's training and taking initiative to improve the system.
- Lack of self-motivation in teachers due to lake of training and orientation.
- There is not any stage wise plan and implementation strategy.
- No Separate budget for such activities.
- Lacking frequent communication between parent, child, teacher and management.
- Not the part of regular curriculum
- Shortage of time
- Counsellor responsibility not clear
- Acknowledgement of school Counsellor is not as same as other PRT, TGT, PGT ...in Most of the schools, it is just like a Job positions.
- Negative attitude towards mental health
- Tribal Schools are active in extreme remote areas and geographical location becomes hindrance in accessing to online platforms.
- Mental wellbeing is not considered important to be healthy and to create healthy environment for all. Other factors are given more attention.
- It is really difficult to identify mental cases because of unavailability of mental health assessment tools

7.0 Conclusion: The importance of mental health and well-being has been acknowledged by the school education system more and more in the post-COVID-19 period. This change is clear from the fact that most stakeholders now recognize how well mental health and wellness programs are implemented in schools and how proactive school administrations have been in supporting them. The majority of teachers are aware of these programs and actively take part in associated events. Still, there are a number of major obstacles to overcome. These include inadequate parental support, an overburdened curriculum, a focus on academics above everything else, restricted budget, a dearth of counselors with the necessary training, ambiguous counselor responsibilities, and a lack of teamwork. Closing these gaps is essential to students' overall development and the success of school-based mental health initiatives.

References

World Health Organization. (2021). *Mental health and COVID-19*. https://www.who.int/teams/mental-health-and-substance-use/covid-19

Centers for Disease Control and Prevention. (2022). *Mental health in schools*.https://www.cdc.gov/healthyschools/mentalhealth/index.htm

Ministry of Education, Government of India. (2020). *MANODARPAN: Psychosocial support for mental health & well-being during COVID outbreak and beyond*. https://www.education.gov.in/en/manodarpan

NEP (2020) (1): Policy document released by Government of India. https://www.education.gov.in/sites/upload_files/mhrd/files/NEP_Final_English.pdf

Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development, 82*(1), 405-432. https://doi.org/10.1111/j.1467-8624.2010.01564.x

National Institute of Mental Health. (2019). *Child and adolescent mental health*. https://www.nimh.nih.gov/health/topics/child-and-adolescent-mental-health/index.shtml

National Institute of Mental Health. (2019). *Child and adolescent mental health*. Retrieved from https://www.nimh.nih.gov/health/topics/child-and-adolescent-mental-health/index.shtml