

Implementation Quality of School Based Mental Health; a Teacher's Experiences

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ABSTRACT

The issue of school-based mental health has been discussed for long time as it is an important factor for a successful educational system. Unfortunately, there are still many schools who give it less attention due to lack of information and awareness. In fact, there are still many cases of mental illness in the school environment such as bullying, stress, anxiety, juvenile delinquency among others. The main purpose of this study is to explore teacher perceptions on school based mental health as being the main factor leading to a comfortable environment in a particular school. Using qualitative method, this paper examines an experienced teacher at the International Islamic School (IIS) in Malaysia. The data analysis reveals that school based mental health implementation is constructed based on three basic elements i.e. an appropriate curriculum, a healthy environment, and mutual understanding between teachers and students. These basic elements should really be considered to establish a healthy environment in schools.

Keywords: School based, Mental Health, Teacher Perceptions, Qualitative.

Introduction

The concept of school based mental health in recent years has taken on a much broader meaning, with the increasing possibilities that schools provide for clinicians, psychologists, social

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workers and counsellors, and in some cases other staff, such as school nurses, and teachers with particular expertise in addressing behavioural issues in promoting the overall well-being of all students.

However, according to Buck and Inman (1992), health, personal, and social education were not made part of the core curriculum in the schools, but was the subject of 'guidance' documents only. As a result many schools have not felt under pressure to give these areas the attention they know they deserve. However, a type of such study is now being supported by new research from several different disciplines, which have come together to demonstrate the importance of this issue, creating a new interest in social and affective health in schools.

The present study seeks to add to the empirical literature by addressing situations of mental health in the school. This study seeks to accomplish two main goals. Firstly, it seeks to detail a narrative description of teacher perception about mental health facilities at the school, school programs of mental health, resource allocation and recent issues of student mental health. Secondly, the study will investigate the influence of teacher understanding on state of school mental health and its outcome on school environment.

With regard to the first goal of this study, it was found on research that gaps in literature remain on the topic of mental health and its association with the aforementioned outcomes. Available literature on school mental health illustrates the nature of the contribution that social science and psychology can make to education situation. While researching books written primarily for teachers in training (Bonney, 1960; Kaplan, 1959; Moustakes, 1959; and Rogers, 1957), and the role of schools in mental health (Allinsmith & Goethals, 1962; Krugman, 1958), it was found that the personality-social aspects of the teacher's role and mental health was strongly emphasized upon.

Regarding the second goal, slightly more research was found to have been conducted in terms of the relationship between mental health and teacher understanding. The topic of this special relationship is meaningful to address because many writers have concluded that school situation has failed to develop the student needs and fail to account for contemporary issues and concerns about mental health.

This paper attempts to explore the teacher understanding on mental health in school conditions as the primer agent for school success regarding student mental and personality development. Specifically, this study examines the relationship between teacher understanding on overall mental health and current school activities such as teaching learning activity and intra and extracurricular activity.

Theoretical Framework

Rotten (1954) and Bandura (1977) have elaborated the Social Cognitive Theory (SCT) with a three-way reciprocal theory in which personal factors (cognitive processes), behaviour, and environmental influences continually interact in a process of reciprocal causality. It means that there is a very dynamic relationship in action whereby the person can shape the environment and vice versa.

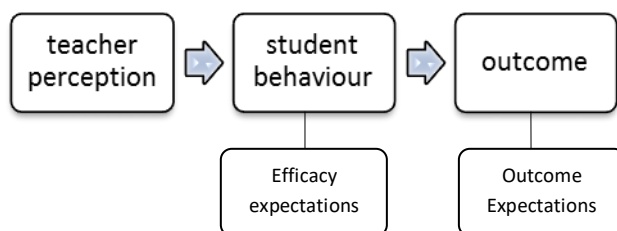
According to Bandura (1977), reinforcement contributes to learning and behaviour, but reinforcement along with an individual's expectations of the consequences of behaviour determines the behaviour. Behaviour is seen as a function of the subjective value of an outcome and the subjective probability that a particular action will achieve that outcome. This is referred to as "value-expectancy theory". There is another aspect called social modelling or observational learning whereby the participant observes someone else being reinforced for behaving in an appropriate or inappropriate manner.

In terms of health education, SCT construct behavioural capability which refers to the knowledge and skills necessary to do a behaviour which influences actions. The construction of expectations also refers to the ability of humans to think and to expect certain results in specific situations. Bandura (1977) considered self-efficacy as the most important aspect of the sense of self that determines one's effort to change behaviour. A person can increase self-efficacy through personal mastery of tasks, observing the performance of others, verbal persuasion, and arousal emotional state.

This study emphasizes SCT as the main idea for constructing the teachers' understanding on school mental health. As the person who is responsible for student mental health, the teacher has efficacy expectations towards student behaviour to reach the sustainable

outcome in the school environment, especially school mental health. (see figure 1)

Figure 1
Teacher perception on school mental health



This study tries to explore teacher understanding on school mental health in light of the following questions:

1. What is the teacher's perception about mental health at International Islamic School Malaysia?
2. What is the implication of teacher's perception on mental health toward school environment at International Islamic School Malaysia?

Previous Research

In a majority of studies on mental health, the assumption of mental health is made from positive and negative approaches. The positive approach deals more with positive aspects of human development and less with risky behaviours, i.e. adjustment (Schneiders,1994), happiness and awareness (Malik,2003), well-being and resiliency (Resnick,2000), emotional distress (Svetaz,2000), self-efficacy (Shillington,2000), positive identity, life satisfaction, and pro social involvement (Surgeon, 1999), among others. Conversely, the negative approach deals more with mental illnesses or disorders and risk behaviours, i.e. anxiety, stress and depression (Kilpatrick,2003), drug abuse (NAHIC,2007), schizophrenia (NIMH,2007), smoky behaviour (Costello,1996), suicide (Shaffer,1999), attention-deficit/hyperactivity disorder (AD/HD) (NAHIC,2006), and many others. Here mental health refers to deal with complicated and complex issues, i.e. how to explain mental health in context of social activities in different environments.

The National Adolescent Health Information Centre of USA (NAHIC, 2008) reported that most mental health problems diagnosed in adulthood begin in adolescence. Half of lifetime diagnosable mental health disorders start by age-14 and increase to three fourths by age 24. The ability to manage mental health problems, including substance use issues and learning disorders in the school, can affect adult functioning in areas such as social relationships and participation in the workforce.

In a study conducted by Wickum, et.al (1992), it was reported that there is considerable literature on sexual harassment and assault in the workplace, colleges, and universities, but the literature on such conduct in high schools in North America is slight. Since a U.S. Supreme Court decision in 1992 established that sexually harassed students could sue school boards, literature on the subject has increased considerably, most of which is addressed to school principals concerning methods to educate and deter those who engage in such harassment (e.g., Wickum, 1992; Bryant, 1993; Strauss, 1994; First & Curcio, 1994; Cooper, 1994).

A recent study by "School Mental Health Services in the United States, 2002-2003," provides the first national survey of mental health services in a representative sample of the approximately 83,000 public elementary, middle, and high schools, and their associated school districts in the United States. The findings provide new information about the role of schools in providing mental health services, and how these services are organized, staffed, funded, and coordinated. They also suggest increasing needs for mental health services and the multiple challenges faced by schools in addressing these needs. Indeed, according to Rostosky (2003), there are at least five factors that might affect student adjustment in the school environment, namely: physical condition, personality, learning process, religion and culture.

This study wants to study the factor that affects student mental health in school, namely teachers' perceptions and orientations. With this understanding, teacher will promote and develop the system to realize student's mental health at the school through means such as learning teaching process, academic tests, extracurricular activities, social relationship between teacher and student, and student with others.

Method

The study adopts a qualitative approach. Shank (2002) defines qualitative research as “a form of systematic empirical inquiry into meaning”. Denzin and Lincoln (2000) claim that qualitative research involves an interpretive and naturalistic approach. It means that qualitative researchers study things in their natural settings, and to understand the phenomena in terms of the meanings people bring to them.

The researcher in this study uses qualitative research for a number of reasons. Firstly, the research was concerned with understanding of meanings on mental health and the personality phenomenon. Secondly, the research pursued an exploration of objectives which were not formulated at the start of the research process. Thirdly, flexibility to follow unexpected ideas during research and explore processes effectively and deeply meaning. Finally, ability to study symbolic dimensions and social meaning to develop empirically supported new ideas and theories was researched.

This study takes phenomenology on a teacher through in-depth interview. According to Leedy (2005), an interview of participants increases the understanding of the cases but reduces generalizability. Each element of school mental health will be explored deeply. Furthermore, the background of the participant in experience in teaching, schools situation, and society influence also explain clearly.

Participants

The participant (interviewee) of the study was a teacher at IIS (International Islamic School of Malaysia) who is responsible to monitor mental health program in the school. He is ISO director and a teacher of Islamic studies and psychology. He has been at IIS for 8 years, and he was vice principal, discipline master, and also counsellor.

Data collection instrument

A semi-structured interview schedule consisting of 12 (twelve) open-ended questions was designed in the light of a comprehensive literature review. The content of the interview questions was built upon the model gained from factors of teacher perception on mental

health in the School by National Summit on School Mental Health held in Milwaukee, WI. September, 2007. The first three interview questions were about perception about the main concept of mental health, school programs of mental health, facilities and condition of student mental health at the school respectively. The rest of the interview questions were about challenges of programming and practicing mental health in the formal education, especially with student academic conditions.

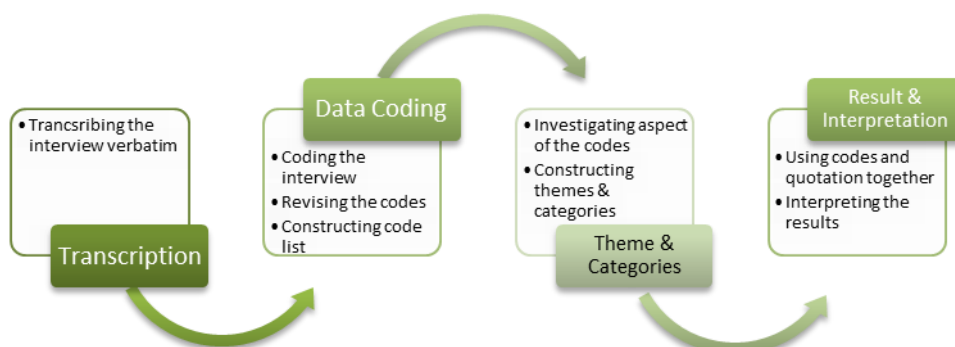
Data collection procedures

Before starting the interview process, the researchers introduced the purpose of the study and prepared an interview time table in cooperation with participant. Then, the interview was conducted in a trustworthy atmosphere, which was believed to result in reliable and comprehensive data (Jarvinen and Kohonen, 1995). The interview was tape-recorded during the discussion which lasted about 45 minutes.

Data analysis

In the present study, similar to Schloss and Smith's (1999) approach, the qualitative data analysis process was carried in four steps (see Fig. 2). The recorded interviews were firstly transcribed verbatim. Then, in order to ensure reliability of the data, one randomly selected transcript was coded by three educational specialists independently. Nearly all of the codes emerged were consistent. This process ensured the reliability among the coder, called also as inter rater reliability (Yildirim and Simsek 2005).

Figure 2
Data Analysis Process



Result & Discussion

The results of the study were discussed under three main concepts. The subsequent sub-titles were constructed by considering research questions, the items in the interview schedule and the codes emerged from the interview transcripts. Based on analysis of studies, the discussion was conducted on three themes, i.e. Conducive Environment (CE), Health Symptom (HS), and Health Curriculum (HC).

Conducive Environment (CE)

Conducive Environment (CE) takes into account facilities, knowledge and awareness, control, discipline, competencies and experiences, communication, treatments, techniques and approaches related with school mental health. Based on the study, CE was explored as the main part of school situation. The CE domain explores students and teachers reaction toward challenge of their mental health in the academic situation.

CE is related with facilities of school in terms of mental health. There are three essential elements which are responsible for school mental health situation, especially for students, they are counselling room, discipline room, and discipline room. These three elements work together to design, to respond, to maintain, and to treat the student's activities in the school environment. The respondent understands well

about the function of the three elements in ensuring the mental health of students. He said,

These three departments are dakwah headed by Teacher Ilyas, discipline headed by Teacher Jalal, and counseling headed by Teacher Mimi. These three offices, they are responsible for counseling and guidance session for students. But we in the school do counseling and guidance in the group format. We do this via group counseling by different people or departments.

In another aspect of CE, its related with knowledge and awareness of students on school mental health, the teacher explained that students are aware of mental health, because they easily can get from information from internet. They can access facebook, twitter, email, and other websites of mental health. This awareness also can be seen when students are familiar with counseling session to solve their problems related with academic and behavioral aspects. He explained,

They (I think) are aware about mental health, especially when we talk about stress, depression, and also hysteria. Because they learn from social network like facebook, twitter, email, and other websites...now information is easily accessible....and so far they are familiar with the counseling.

This CE explained further about teacher's awareness, competencies, and experiences of mental health, starting that all teachers are aware about their capabilities and competencies, especially at teaching learning process and managing the class. It is normal, if there are some students having some problems with learning ability or attitude in the classroom during every semester for all teachers give the proper training regarding these matters, especially dealing with 'trouble' students. This condition makes the environment of school conducive for student learning and development. He said,

Every semester we have training of teachers. In that training we have many sessions, including sessions about classroom management, lesson plan, counseling, discipline, extra curriculum activity and about ISO. So the counselor will brief the teacher about some common problems faced by students. In terms of mental health impact, they are made aware the

impact of stress of the study, impact of behavior and impact of stress of relationship.

Generally, he explained about the conduciveness of environment at IIS and its importance for student learning activity. Important elements for mental health of student include morning assembly, counseling session, and religious activity i.e. prayer jama'ah, halaqah (circle study) and Quranic memorization. These activities can positively nurture their mentality during school time and also maintain their awareness of mental health. He said,

Actually, the school is good in terms of environment, because firstly we are Muslims which ensures very good environment already. Secondly, we have subjects which relate to mental health, like an assembly every morning, we start the assembly with prayers to Allah and then after assembly we have home room class for 15 minutes (every day). Here we will check what is your problem, do you have problem today, do you have home work unsettle, or any test have you miss, and others. Thirdly, we have Qur'anic memorization. It is also good. Fourthly, we have a weekly assembly on Thursday; we have halaqah every week for about 1 and half hour...So in terms of environment it is good. Ok. The problem is when we don't handle the student from beginning, such that the student becomes worse in terms of behavior and attitude and can influence others, mostly due to personal problems.

Another aspect of CE is access of student to discipline. According to the participant, every school has problem with discipline of students, either by handling of 'trouble' student or conforming to roles of discipline. He further said,

Discipline is normal. I mean all schools have a discipline problem. But in this school we try to minimize the problem by isolating students who are having a discipline problem. So by this we can minimize any impact. I also one of member of the discipline board, we have 9 discipline teachers, we have books on discipline, so its easy for us to control the problem at a certain level. Since expulsion is the consequence when the student reaches the school limits. Thus it is easy to just expel one student and the rest will get scare.

In order to maintain the CE, the school provides rules for discipline, especially to curb destructive behavior of students. In these rules, it is clearly stated that punishment of specific behavior which has 7 steps. Starting from three reminders which is followed by three warnings, and then finally end with expulsion from the school. He explained that every year, IIS expels 1 or 2 students from the school because of student discipline problems. In certain cases, the school also punishes students with immediate expulsion for big problems of discipline, i.e. drugs, *zina* (adultery), coupling, pornography, beating or fighting with a teacher, injuring others, etc.

He stated,

Yes, we have problem like stealing of hand phones, fighting, cheating in the exam, disrespecting the teacher, and vandalism. So we designed the school rules expelling those who do not obey. At the beginning of every semester, we brief the student on the book of discipline and information of how they are going to be treated in the school and how they should deal with the rules. It is easy for us.

Every year we expel 1 or 2 student, because they cross a certain level. It is not easy for us to expel but takes time. OK. We give them a first reminder, then a second and third reminder, then followed it with first warning until third warning and then expel. So we have 7 steps to expulsion. We have a book list of offences which lead to immediate expulsion including a list of behavior which can lead to expulsion in one week and another list of offences which can lead to final warning and followed by expulsion, like drugs, pornography, fighting with teacher, injury to other students, *zina*, so this one we don't discuss. Also pornography, if we found in the student's hp or laptop a pornography item, we can expel him directly. Similarly coupling; let say if we observe someone close, we call them and say we don't want to see you as couple. Then if we see them again, we will repeat the above again until third time before expulsion. Similarly, if we have any report, it can be evidence used to expel.

CE is related also with techniques and approaches regarding student mental health. It means every problem has a technique or procedure to solve it. The teacher has a responsibility to take care her/his student in the class whereby then if she/he finds any student facing a problem, she/he should manage to solve it or refer it to the counselor, teacher discipline, or dakwah irsyad. The school provides a form of teacher report regarding student's problems in the class to be transferred to the counseling teacher or others i.e. Vice Principal of Academic Affairs or Vice Principal of Student Affairs for behavior problems. He said,

If they send any student who is suffering of sadness (depression), the teacher will refer to the counselor, write the report, there is the form in counseling room. I refer the student to you because the student found that he is not happy, sad, does not much in the lesson, no progress, maybe she/he is suffering from stress and you just call him/her. The counselor will ensure the student makes an appointment and will then discover the problem. Then he/she will call the parent, and tell to the parent that his son/daughter is suffering from sadness. All teacher are eligible to report through this is discipline report form.

If the teacher cannot handle the case, he/she will refer it to the discipline master or counselor or he/she will complain to Academic Affairs if there is academic of go to Student Affairs if there is behavior. So we have 2 Vice Principals handling academic problems and discipline problems.

Health Symptom (HS)

This study explored health symptoms (HS) in the school regarding the student's mentality as being either positive (i.e. happiness, willingness, and development) or negative symptoms (i.e. stress, anxiety, autism, attention deficit and hyperactive disorder (ADHD), depression, sadness, and others). There were some mental problems faced by students in the school, but not to the level of illnesses, because the school does not provide the psychiatry or professional treatment to handle students with illness problems. Therefore, mental

problems faced by the student in the school are usually minor problems or just symptoms for initial levels of mental problems due to which the teacher or counselor will give special attention to that symptom. The common mental problem found among student was stress, slow learning, communication problems, sadness, or anxiety.

He explained,

When we talk about Mental Health, actually we refer only to minor disturbances, which are stress related or study related stress problems. Either the student is unable to study well due to a problem with a peer group, parent, teacher, and problem with their understanding or may be some minor mental health issues which may lead to sadness, anxiety, stress, and so on. Its normal I think. Of course overcoming stress is part of mental health, but what I meant is not up to the level of depression. Of course there are students who might have ailment such as autism. We then suggest the parent to take the student to the clinical psychologist, outside of school, to check, test, and do further investigation.

The other element of HS is happiness. This is an important element because, mentally healthy students also mean that they are happy to study and reach their physical and mental development. The responsibilities of the teacher and counselor are to maintain their mentality function, attitude, and to minimize negative symptoms during school time. He said,

I think, they are happy because when we gather them every morning, we can see the fact that if they are coming to school it means they are happy. If they are not happy, they will not be coming to the school. So now, the challenge is how during the 6 hours they are happy to study, the teacher is able to make the task of learning fun, and student is able to study in the school for 6 hours from 8 am – 4 pm.

Health Curriculum (HC)

HC includes the religious activities, counseling session, mental health subject and teacher training. The participant has deeply explained the religious activities based on his experiences. Basically, HC improves

their mental health in the school and increases the student motivation to study.

HC of the school is related with religious activities which in IIS is very rich, because it is based on Islamic values. Therefore, all subject matters and activities of students are constructed from Islamic teachings.

...Because firstly we are Muslim, this is a very good environment already. Secondly, we have subjects which relate to mental health, like every morning we have assembly, we start assembly with prayers to Allah and then after assembly we have home room class in 15 minutes (every day)...Thirdly, we have Qur'anic memorization. It is also good. Fourthly, we have weekly assemblies on Thursday; we have halaqah every week for about 1 and a half hour. We also attend the Jum'ah payer, every Friday. The girls pray in the Mushalla, they have their own prayer and own halaqah. The boys go to Mosque to pray juma'ah.

In terms of counseling session for assessing the mental health of students, the counselor teacher has to manage a schedule to give treatment for 'trouble' student who is referred from the teacher from the class, to suggest and solve the student's problem related to learning abilities, communication, or stress. This HC stated from respondent,

...There are some students who are called by the counselor because they have a problem. Teacher Mimi will make a time table every day; a free session of 1 hour for student every day. This 1 hour can be availed during school time and after school from 3.40 pm until 4 pm. Every day counseling is open for any student who wants to come and want to talk with the counselor. So this time table makes the student aware that counseling is not only for sick student but for all the students.

HC is also related with training teachers every semester. Training is very important to manage perception of teachers in association with their responsibility towards students and the school. It is also important to develop knowledge and the skill of a teacher, especially when they facing problems in the school with students or management or others. This training has many sessions to brief a

teacher in terms of managing class, lesson plans, communication skills, extra curriculum activities, and ISO. He explained,

Every semester we have session of teacher training. In that training we have many sessions about classroom management, lesson plans, counseling, discipline, extra curriculum activity and about ISO. So the counselor will brief the teacher about some common problems faced by the student. In terms of mental health impact, they made aware of the impact of stress of the study, impact of behavior, impact of stress of relationship.

The importance of training of teachers related with mental health is to minimize the stigmatization through labeling of students by the teachers, because this practice can destroy the mentality of students. Thus, HC in the school has helped teachers to deal with students in a proper manner and encouraged them to develop their learning abilities. Although it takes time, the training of teachers has improved the capability in terms of communication skill, class management, and others.

He said,

It's the labeling, it is happening to everybody. Labeling happens because you have knowledge before hand or because of movies or magazines or because newspapers, which easily put labels to a person who has symptoms resembling certain mental health problems. This is why we need training in beginning of every semester especially new teachers, since they are not experienced and are fresh graduates. We train them how to handle the student, how to handle classes, lessons, and to handle problems in the class, especially those which cause disturbances to the lessons and also those which choose some symptoms of mental health problem.

Base on the data collected, table 1 concluded the teacher's perception of promoting school mental health at International Islamic School (IIS) of Malaysia.

Table 1
Promoting School Mental Health

Element of Mental Health	Aspects	School Conditions	Statements
Conducive Environment	Facilities, knowledge and awareness, control, discipline, competencies and experiences, communication, treatments, techniques and approaches related with school mental health	1. Has 3 rooms: counselling, discipline, and dakwah isryad 2. Has book on discipline 3. Has form of report and procedure to solve mental health problems	“Actually, the school is good in terms of environment, because firstly we are Muslim which is a very good environment already. Secondly, we are have subjects which relate to mental health”
Health Symptoms	Students mentality, either positive i.e. happiness, willingness, and development or negative symptom i.e. stress, anxiety, autism, attention deficit and hyperactive (ADHD), depression, sadness, and others	1. Students are happy to study in the school 2. Deals with minor symptoms of mental health, i.e stress problem 3. Major symptoms are referred for professional treatment	“When we talk about Mental Health, actually we refer only to minor disturbances, which are stress related problems or study about stress problem”
Health Curriculum	Religious activities, counseling sessions and teacher training	1. Curriculum based on Islamic values 2. Rich with religious activities, i.e. halaqah, prayer jama’ah, etc 3. Training every semester	“Every semester we have training of teachers. In that training we have many sessions, including session about classroom management, lesson plan, counseling, discipline, extra curriculum activity and about ISO”

Discussion and Conclusion

The purpose of this study was to explore the teachers’ perception about mental health in the school. There were some aspects that contributed to this study. Firstly, teacher perceptions about school

mental health at IIS Gombak have contributed to make the environment of the school conducive and to maintain the developing of mental health of student. Secondly, the rules of the school also contributed to maintain students' health some of these rules helped them in overcoming symptoms of mental health problem, especially the rules of discipline and in how to deal with trouble some students in terms of behaviour or academic performance. Thirdly, this study also highlights the health curriculum to give knowledge and awareness for students' mental health during school time. It's important to avoid them from illnesses or distrusting behaviour in the school.

Compared to previous studies conducted about school mental health in association with certain behaviour and emotional adjustment, i.e. maladaptation (Cowen, 2003), this study indicated that greater mental health was significantly associated with higher self-esteem and better psychological functioning (e.g. Benson et al., 1989; Ellison, 1993; Blaine & Crocker, 1995; Donahue & Benson, 1995; Evans et al., 1995; Gartner, 1996; King et al., 1997). This finding suggests that the teacher perception of the mental health could be contributed to maintain student mental health attitude in educational situation, especially academic aspects. Thus, the study showed the consistent direction with earlier works.

In summary, this study has explored the perceptions of teacher regarding school mental health. There was portrayal of the three major themes; conducive environment, health symptoms, and health curriculum. These elements of school mental health explained conditions of students feeling and attitude, teachers' responsibilities, religious activities, discipline, and school facilities for developing mental health.

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Factors of Teacher Perception on Mental Health in the School (Interview Questions)

1. Identity? About position, experience of teaching, others?
2. School facilities for mental health of students? examples
3. School environment for mental health of students? examples
4. Student knowledge and awareness about mental health at schools? Relate with discipline and others?
5. Does teacher has awareness of students' mental health – mental illness and early warning signs of mental health concerns? Please, explain by the examples!
6. Does teacher has communication skills that work for connecting with all students – especially troubled students? Please, elaborate further!

7. Does teacher has Classroom management strategies related with classroom mental health? Please, elaborate further!
8. Does teachers know their personal and professional limits, when to ask for help with a troubled student and who to ask?
9. How teacher can identify their own stigmatized ideas about mental health and illness and personal mental health issues and experiences and how they affect the students' experience in the classroom?
10. How to build trust, empathy, and communication between school and family to improve academic performance and classroom behaviour?
11. Does teacher has skills to differentiate curricula appropriate for different learning styles among students? Please, give the examples!
12. Does teacher has knowledge and skills to work effectively as a member of a multidisciplinary team? Please, elaborate further!

Reference: Proceedings from National Summit on School Mental Health held in Milwaukee, WI. September, 2007 (with some justification)