



**Brain
Bloom**

**PRACTITIONER
IMPLEMENTATION
TOOLKIT**

Connect Health & Community acknowledges that this work was created on the traditional land of the Boon Wurrung people of the Kulin Nation. We offer our respects to Elders past, present and future. We recognise and respect the cultural heritage of this land and extend this to the Traditional Custodians of country throughout Australia.

ACKNOWLEDGEMENT

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We also extend our thanks to all the youth workers and community health professionals who assisted with this foundational Boss Brain pilot.

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The toolkit was compiled by Paper Giant.

In 2022 the name of the program was changed to Brain Bloom after engagement with students from Sandringham College. New names were proposed and a vote was taken to create our new identity.

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INTRODUCTION

Welcome to the Brain Bloom implementation toolkit. Thanks for your interest in supporting the wellbeing of young people in your community!

What is Brain Bloom?

Brain Bloom empowers young people to improve their mental health. The program sees teams of secondary school students researching and collaborating on projects that aim to improve the mental health of their peers. Brain Bloom is a follow-up program for secondary students who have already undertaken some form of mental health literacy training, such as Teen Mental Health First Aid® (MHFA™) training.¹

The teams of students are supported by a 'Practitioner' who collaborates with the students and oversees the implementation of Brain Bloom in partnership with their school. The Practitioner could be a youth worker from a local council or someone from a community health organisation. A school's Wellbeing Officer, or another staff member, could also act as the Practitioner for the program.

Brain Bloom was designed by the Connect Health & Community Health Promotion Team. The aim is to provide more opportunities for young people to participate in discussions and activities around mental health issues.

Brain Bloom is a standalone program for students who have completed some prior mental health training, who are motivated to share their knowledge and skills. It's an opt-in program.

Who is this toolkit for?

This toolkit is for the key person implementing Brain Bloom, known as the 'Practitioner'. The Brain Bloom program is designed for Australian secondary schools, but the program could be adapted to suit other community or educational contexts too.

What's in the toolkit?

This toolkit provides practical advice on implementing Brain Bloom within a secondary school context. It also includes handy templates, such as letters to parents about the program and worksheets for the students undertaking their projects. It's all you need to get started.

Using this toolkit

We recommend reading this toolkit from start to finish before you implement Brain Bloom. That way, you will be familiar with the whole program structure and can plan for evaluation from the start. You might like to revisit relevant sections in the toolkit as the program progresses.

1. For the purposes of this toolkit, Teen Mental Health First Aid has been referenced as the training example, however we acknowledge there may be other youth mental health literacy training programs that are better suited to your school or student cohort.

The aims of Brain Bloom

Brain Bloom supports the mental health and wellbeing of young people. The program has three core aims:

1. Increase mental health literacy

Young people with good mental health literacy know the basics of how to recognise the signs of mental ill-health. They have an understanding of habits to maintain mental wellbeing and they know how to seek appropriate support for mental health issues. Mental health literacy is an important precursor to good mental health outcomes for young people.

2. Decrease stigma around mental health

In Australia, stigma is recognised as a significant factor that reduces the quality of life of people living with mental health conditions. Stigma associated with mental illness can cause people to avoid or delay treatment, which can have negative impacts on their health. Brain Bloom aims to help young people feel comfortable with discussing mental health issues and seeking support.

3. Increase knowledge of support pathways

There are many services for young people seeking support for their mental health, but not all young people know about these services. Brain Bloom provides students with information about how to access support.

The pilot

Brain Bloom was first piloted with two secondary schools in 2020 with funding support from Bendigo Bank. A group of students implemented Brain Bloom in their school, with 250 students participating in the first student-led mental health project. 230 students completed the survey. As a result of participating:

- 66.5% (152) of students reported an increase in understanding of mental health.
- 66% (152) of students could better recognise the signs and symptoms of mental illness.
- 55.2% (127) of students felt more comfortable to talk openly about their mental health.
- 74% (169) of students had a better understanding of where to go for help.

Glossary of terms

Practitioner - the person leading the implementation of Brain Bloom in a school, usually external to the school itself (such as a youth worker at a local council). See page 9 for a detailed description of the Practitioner role.

School Lead - The school staff member who is the main point of contact for the Practitioner. This person is responsible for logistics within the school, such as organising students into groups. See page 9 for a detailed description of the School Lead role.

Brain Bloom implementation - the implementation of Brain Bloom within a school.

MHFA - Mental Health First Aid, an example of training that can be delivered prior to Brain Bloom.

MHFA Australia - Mental Health First Aid Australia, the organisation responsible for Mental Health First Aid training.

Evaluation measures – The measures, milestones, etc you will look for to assess the value of your program.

Data sources - Anything or anyone that is a 'source' of information useful to your evaluation.

Data collection tools – The actual instruments you will use to collect data (probably surveys).

Outcomes – The results (changes) your program creates among students.

BRAIN BLOOM JOURNEY

1 Pre-implementation



- Students and staff undertake mental health first-aid training for young people (this is not part of the Brain Bloom program).
- Planning for Brain Bloom: setting dates, establishing roles and responsibilities, securing resources, evaluation planning.

Relevant modules

Module 1

Getting started p8

Module 2

Working with schools p13

Module 3

Before implementation p19

2 Implementation



- Step one: Students choose topic and target group.
- Step two: Students investigate topic.
- Step three: Students design their project.
- Step four: Students deliver their project.
- Step five: Students evaluate their project.

Module 4

Student projects p22

3 Post-implementation

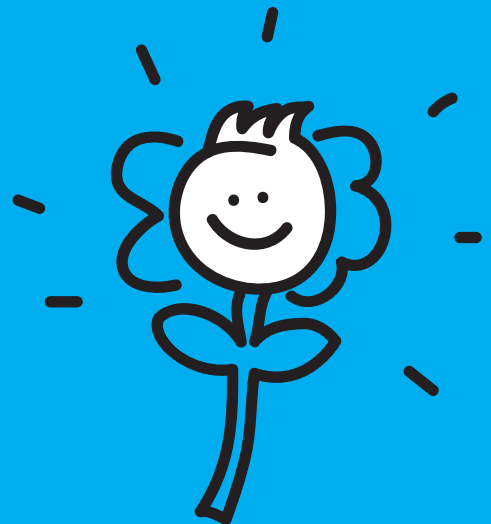


- Practitioner evaluates the project.
- Practitioner uses evaluation findings to improve the next implementation.

Module 5

Evaluation p29

MODULE 1: GETTING STARTED



MODULE 1: GETTING STARTED

What to expect from this module

This module provides an overview of the phases of Brain Bloom. It also includes key roles and responsibilities as well as considerations for funding and resourcing.

Preparing for Brain Bloom

If you are considering implementing Brain Bloom as a Practitioner, it's strongly recommended that you first build your own mental health knowledge and undertake training. You may choose to complete a relevant training course through Mental Health First Aid Australia (or similar). To find a course near you, visit mhfa.com.au

Overview of Brain Bloom

The Brain Bloom program includes three key phases, outlined above in the Brain Bloom Journey graphic. These phases are pre-implementation (planning); implementation (the student projects) and post-implementation (program evaluation).

Roles within the Brain Bloom implementation

There are several key roles within the Brain Bloom program. The responsibilities of each are outlined below.

Practitioner

This is the person who initiates the implementation of the Brain Bloom program (and probably the person reading this toolkit). You might work at a council, at a community health organisation or at any organisation that works with secondary schools in a health promotion capacity.

Duties of the Practitioner include:

- Engaging and meeting with schools.
- Supporting the school staff and students through planning, implementation and evaluation.
- Evaluating the implementation upon its completion.
- Building relationships with schools to sustain the impact of the program.
- The next modules in this toolkit cover each of these duties in more detail.

School lead

This person is the main point of contact within the school, and is responsible for organising school-side engagement and logistics. They may be a teacher, or the school's Wellbeing Officer. Duties can include:

- Engaging school leadership and staff in Brain Bloom and working to identify the student cohorts who will participate.

- Securing funding if required for Teen MHFA training (or similar) for staff and students, prior to implementation.
- Organising logistics of Teen MHFA training (or similar), including help with timetabling for and room bookings.
- Organising the students into project groups for Brain Bloom.
- Working with the Practitioner in planning and executing the implementation.
- Supporting students through the implementation.

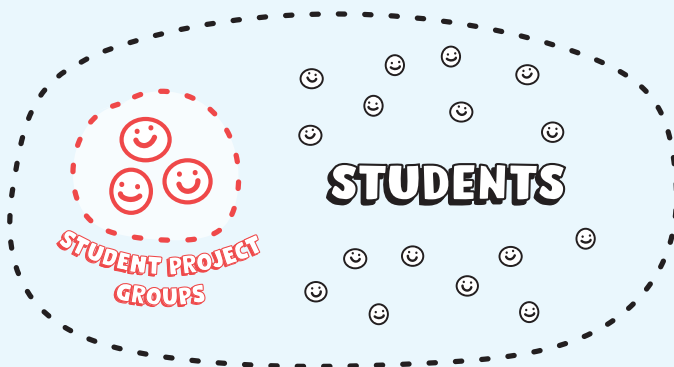
The School Lead may also help to identify students who are at risk or struggling with mental health issues. They may work with the School Wellbeing Officer to establish wellbeing and safety plans for students.

Module 3 provides more detail and advice on the logistical side of the School Lead's responsibilities. Module 4 covers the student project process in detail.

School Wellbeing Officer

The school's Wellbeing Officer plays an active role in the implementation of the program. This person may also be the School Lead. It is recommended the School Wellbeing Officer be available after each student training session to support any students who may be experiencing mental health challenges.

The School Wellbeing Officer may also attend project design meetings to offer support and information. They should be across students' project design ideas.



Student project group

The student project group is at the heart of Brain Bloom. The student journey will cover:

- Attending Teen MHFA training (or similar), prior to starting Brain Bloom.
- Working within their project groups to identify a topic (eg. exam stress) and target group (eg Year 10s undertaking exams for the first time), then designing and rolling out a project to address their goals.
- Evaluating their own project.

An entire year level may receive some form of mental health first aid training, but not all of those students will necessarily go on to be on a Brain Bloom project team.

Considerations for funding

If required, it is the school's responsibility to source funding for MHFA Australia training (or a similar program), but the Practitioner can provide support here.

From September 2022, Victorian state schools are able to access government funding for student wellbeing initiatives, including Mental Health First Aid training from MHFA Australia.

Other sources of funding include grants from local council, school fundraising or working with a local business to establish a sponsorship. If your organisation has a grants officer, it may be a good idea to reach out to discuss any other potential funding options for schools.

It may be more cost-effective for schools to train a staff member to become an accredited Mental Health Trainer².

Resourcing and time considerations

Brain Bloom is a flexible program that can be implemented across a variety of timescales, according to a school's scheduling needs.

Different stages of the implementation will require different levels of time investment from the Practitioner. Some flexibility with resourcing over the course of the project may be required.

Tip: It is important to ensure that time is protected in the Practitioner's calendar to work on the Brain Bloom program. We suggest time resourcing is allocated upfront, leaning towards more generous than necessary for the first implementation.

As a guide, a sample implementation timeline is provided on the next page.

2. www.mhfa.com.au/how-apply-become-mhfa-instructor

Time	Activity	Practitioner hours
Term 4, weeks 1-6	Practitioner reads this toolkit document. Practitioner reaches out to school and begins planning implementation to begin in Term 1 of the new school year.	1-4 hours a week for both meetings and familiarisation with the Brain Bloom program itself, until implementation planning is complete. Approximately 4 hours for the Practitioner to familiarise themselves with the program, and four weeks of emailing and quick meetings.
Term 1, Week 2-4:	Students undertake Teen Mental Health First Aid (Teen MHFA) training (or similar). Teen MHFA training involves three sessions and cannot take place on consecutive days, so the school opts to run it once a week for three weeks.	1-2 hours, to be available via email; with an additional 1.5 hours a week if the Practitioner wishes to attend training.
Term 1, Week 5	Student project groups are assembled and the students have their first session - choosing their topic and target group.	3-6 hours, to prepare for and deliver the session, and answer any questions and emails after the session.
Term 1, Week 6	Students have their second session: Investigating their chosen topic.	3-6 hours, to prepare for and deliver the session, and answer any questions and emails after the session.
Term 1, Week 7	Students have their third session: Designing their project.	3-6 hours, to prepare for and deliver the session, and answer any questions and emails after the session.
Term 1, Weeks 8-9	Students deliver their projects, both in and out of session time, depending on their project designs.	1-6 hours depending on the nature of support required by students for their projects. For example, if the students host an information evening, it would make sense to attend – which may take 2 hours.
Term 1, Week 10	Students evaluate their projects, and the Practitioner carries out some of their evaluation.	3-6 hours, to prepare for and support students to collect and review their evaluation data, and answer any questions and emails after the session. An additional 2 hours to begin collecting data for the Practitioner's evaluation.
Term 1, Week 11 (or during school holidays)	Practitioner finishes their evaluation.	8 hours to complete evaluation, depending on the desired level of detail.
Post-implementation	Practitioner stays in touch with the school to maintain the relationship and potentially plan to implement Brain Bloom again.	1-4 hours for meetings and liaison with the school.

MODULE 2: WORKING WITH SCHOOLS



MODULE 2: WORKING WITH SCHOOLS

Introduction

If you don't often work closely with secondary schools but you're thinking about approaching a local school to implement Brain Bloom, this module is for you. It covers tips for Practitioners on approaching schools and ideas for communicating with students and parents about the program.

Engaging with schools

When reaching out to schools, it's important to keep in mind that you're proposing a partnership that will span at least a few months. So, it makes sense to leverage existing relationships you may already have with local schools.

If you've never interacted or worked with the school before, you can leverage your organisation's community context as a point of relevance, and emphasise your mutual interest in supporting the wellbeing of young people.

When to reach out

It's important to allow ample time for meetings and planning. If you're considering starting the Brain Bloom implementation at the start of a new school year, it's best to approach the school in the year prior. That way, you've begun the conversation before budgets and plans for the following year are locked in. The start and end of term can be very busy, so keep this in mind in terms of turnaround time for setting up meetings and getting responses via email. Every school is different.

Note: You'll need to reach out with enough time to allow for training to be delivered.

Meeting with schools

Initial meeting

Depending on your relationship with the school, the initial meeting can range from introducing yourself and explaining the benefits of Brain Bloom - through to planning the implementation, setting dates and agreeing to roles and responsibilities.

You can refer to Template 1 on page 38 where we have provided a printable Brain Bloom Introduction one-pager that can be left with the school after your initial meeting (or sent prior, via email to quickly explain the benefits of the program).

Distilling the value of Brain Bloom

Context: In any given year, one in four Australians aged 16-24 will experience a mental illness. It's the number one health concern for young people in our community.

Aims: To support good mental health for students by focusing on:

1. Increasing mental health literacy.
2. Decreasing stigma associated with mental health.
3. Increasing knowledge of support pathways.

Outcomes:

1. Improved mental health knowledge and outcomes for students going forward.
2. Greater sense of cohesion and community within the school.
3. Greater student wellbeing resulting in improved engagement.

Roles, responsibilities and key decisions.

The first step is to establish the Brain Bloom program team. This is made up of the people who will actually be executing the Brain Bloom implementation. That may just be you and the School Lead or other people such as the School Wellbeing Officer and anybody assisting the School Lead.

Being clear about roles and responsibilities from the outset will help things run smoothly. Below is a list of key decisions that need to be made, with recommendations for which role should take ownership. Feel free to divide this up in whichever way makes the most sense for you.

Practitioner

Pre-implementation:

- Support the School Lead as required. This toolkit includes resources for schools, such as template letters to parents and students that the School Lead might find useful.

During implementation:

- Facilitate student sessions.
- Collaborate closely with the School Lead to ensure a smooth, enjoyable and valuable experience for students during sessions. For example, organising people to give feedback to students on their project designs during a 'pitch' session. These people could be the School Wellbeing Officer, colleagues from your organisation or Headspace etc.
- Facilitate a feedback session with the students to discuss the content of their projects and the overall experience of the Brain Bloom program.

Post-implementation

- Evaluate the Brain Bloom implementation.
- Facilitate a meeting with the school to discuss how the implementation went and how to approach it next time.

School Lead

Pre-implementation:

- Secure funding if required for pre-implementation mental health first aid training. Outside of training costs and staff time, a budget is not required for Brain Bloom. (However the school might choose to make a budget available to the students for their projects).
- Familiarise the School Wellbeing Officer with the program and seek their input.
- Identify which year level will undertake training.
- If undertaking Teen MHFA training, identify which 10% of staff will also undertake training in advance.
- Decide when to do the training in accordance with the timetable.
- Determine whether an external trainer will facilitate all training, or if a staff member will undertake training to become a facilitator themselves.
- Find and book instructors for both students and staff if engaging an external trainer.
- Identify any accessibility requirements for students and make plans to accommodate them throughout the process.
- Identify and leverage any potential curriculum links.
- Decide upon timings for Brain Bloom implementation. Will it take place over a term, six weeks, or a whole year?
- Champion the Brain Bloom program internally to familiarise staff and to get approval from the Principal.
- Present to relevant year level prior to training to introduce them to the program.
- Send letters to students and parents/guardians introducing them to Brain Bloom.

During implementation:

- Organise students into project groups.
- Ensure rooms and resources are booked and available for students participating in Brain Bloom.
- Support students with their projects' logistics. For example, the students may want to present at assembly.
- Collaborate closely with Practitioner to ensure a smooth, enjoyable and valuable experience for students during sessions. For example, organising people to give feedback to students on their project designs during a 'pitch' session.

School Wellbeing Officer

Pre-implementation:

- Get across the program to identify and leverage any links to the work they're already undertaking with students.
- Work with Practitioner and School Lead to establish an action plan in case any student becomes distressed or makes a disclosure during the program.

During implementation:

- Attend training and be available for any students who may be triggered by any of the content in the student project or who may be experiencing mental health challenges.
- Consider how to support students in selecting a project topic and a target peer group to benefit from the Brain Bloom project.

Principal

Pre-implementation:

- Approve the program.

During implementation:

- Champion the program internally.

Post implementation:

- Explore potential to invest in implementing Brain Bloom with other year levels.

We recommend you work with your school to complete a RACI Framework. RACI stands for Responsible, Accountable, Consulted, Informed and describes the different levels of engagement various stakeholders will need for different tasks across a project. You'll find an RACI Framework template in the Templates section at the end of this toolkit (Template 4, page 41).

Working rhythms

Just as it's important to establish roles and responsibilities, it's important to be aligned about the working rhythms of everyone involved in the implementation. Not only the school's rhythms (key dates such as terms or camps), but also of the individuals. For example, is anybody taking leave? What days is the Practitioner available to work on Brain Bloom? It can be useful to book in a regular check-in as the implementation is progressing to keep everyone involved aligned and in contact, especially as the year becomes busier.

Identifying links to curriculum and other programs

It can help to identify and leverage any links between Brain Bloom and the curriculum or any other programs that are taking place at the school. This will serve to strengthen the implementation and enrich the experience for students.

Communicating with students

It's important for the Practitioner and School Lead to communicate with students about Brain Bloom. A short presentation to introduce students to the program can help the School Lead form project groups in the early stages of the program. The introductory session is a chance to gauge which students are most interested in the program and in joining the project team.

When presenting to the students, be sure to include an explanation of who you are as Practitioner. You'll also need to explain what the Brain Bloom experience will be like and why the program is valuable. Be clear that it's an opt-in program.

If a student makes a concerning disclosure

There is a possibility that a student (either inside or outside the Brain Bloom project group) will make a disclosure about their mental health during the Brain Bloom program. You will need to defer to the School Wellbeing Officer to support the student. Before implementation, the Practitioner, School Lead and Wellbeing Officer will need to have an agreed action plan.

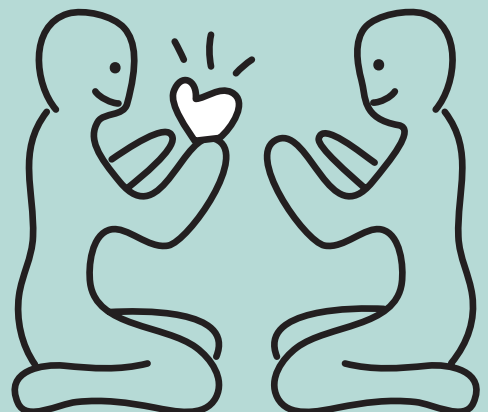
Communicating with parents and guardians

Parents and guardians need to be well informed about the program. Depending on how students design their projects, parents may even be involved (for example, if the students wanted to host a parent information night about supporting students through exam stress).

In the Templates section of this toolkit, there's an example letter to parents that can be sent from the School Lead before Brain Bloom starts (Template 2, page 39). Brain Bloom is an opt-in program, so parents and guardians need to be able to contact the school with questions, or to opt out. Consent needs to be provided for participation, as well as any recording and sharing of the sessions (such as photography).

You might also plan to share evaluation findings with parents and guardians. Module 5 provides some guidance on this process.

MODULE 3: BEFORE IMPLEMENTATION



MODULE 3: BEFORE IMPLEMENTATION

Introduction

This module covers tips for schools, including advice regarding training and choosing student working groups. This module also includes two examples of Brain Bloom implementations to guide your own thinking.

The following content is most relevant to the School Lead. However, it's useful for both the Practitioner and School Lead to be across this material.

Mental Health training

Brain Bloom is designed to be used after students undertake a suitable mental health program as chosen by each school. For example, undertake Teen Mental Health First Aid® (MHFA™) training.

The peer-to-peer Teen MHFA Program teaches students in Years 7–9 and 10–12 about the signs and symptoms of mental health problems, how to offer initial support to a peer who is experiencing a mental health problem or crisis, and how to connect them with a trusted adult.

Teen MHFA training focuses on improving the mental health literacy of a whole student cohort, to reduce the stigmatising behaviours and attitudes that often prevent teens from getting the help and support they need.

Topics covered in the training include depression, anxiety, eating disorders, bullying, problems with alcohol and other drugs, self-injury and suicidal thoughts.

Considerations for scheduling and logistics

It's important to allow enough time for students to complete their training. For example, Teen MHFA training is approximately 3.5 hours long and is delivered by an accredited Teen MHFA Instructor via 3 x face-to-face classroom sessions on non-consecutive days.

It is delivered to an entire cohort of students (e.g. all Year 9 students), and can only be delivered in settings where at least 10% of staff have also completed Youth MHFA training. This is to ensure that teaching and support staff have the skills and knowledge needed to provide the appropriate support to a young person experiencing a mental health problem or crisis.

MHFA Instructors work independently and set their own fees. Schools will need to liaise with Instructors directly for a course delivery quote. Costs may vary depending on cohort size and location.

If the school intends to run Teen MHFA training on an ongoing basis, they may opt to train an internal staff member as a Teen MHFA Instructor through Mental Health First Aid Australia.

For more information on Teen MHFA training for students or staff, visit: <https://mhfa.com.au/>

Note for the Practitioner

You may find it useful to attend the Teen MHFA training held at the school, to be visible to the students and to familiarise yourself with what's covered in the training. (For example, you can use consistent language from the Teen MHFA training when implementing Brain Bloom).

3. Mental Health First Aid, MHFAider, ALGEE and For Anyone. For Everyone are registered trademarks of Mental Health First Aid International. MHFA and Mental Health First Aider are trademarks of Mental Health First Aid International.

Student groups

Student groups will need to be determined either before, or during, the first implementation session of Brain Bloom. The School Lead will need to organise the students into groups, or at least provide oversight if the students are self-organising.

Groups can vary in size. As a guide, groups may have around five students so that the Practitioner and School Lead are able to support everyone adequately.

Accessibility requirements

Some students may have particular accessibility requirements. For example, they may have hearing or vision impairments, or different learning requirements. The School Lead should identify these and collaborate with the Practitioner to make Brain Bloom as accessible as possible for all students.

Resources for students

The School Lead will need to ensure that students have access to space, time and materials to design, implement and evaluate their projects. Schools can choose to allocate a budget to student projects if they'd like. For example, if students choose to host a morning tea, the school might allocate \$500 for refreshments.

Project examples

The following implementation examples have been informed by experiences from the pilot program.

Example 1: Webinar

Student project: Students interview a Headspace clinician via Zoom and ask them questions related to their target topic.

Time spent: The student projects take 7 weeks.

Number of students involved: 15 students are divided into 3 groups of 5. One of the groups of 5 is responsible for the webinar, the other two groups have their own projects. The target group is students in Year 10 dealing with exam stress. However the livestream (and recorded video) is available to be watched by all students.

Budget required: \$0.

Example 2: Male mental health forum

Student project: Students hold a forum about male mental health for male students in years 10-12. The forum itself is 3 hours long with a break for refreshments.

Time spent: The student projects take place over two terms, allowing for research and planning.

Number of students involved: 10 students involved in Brain Bloom, working together. The target audience is all male students in years 10-12.

Budget required: \$1000 for refreshments at the forum.

MODULE 4: STUDENT PROJECTS



MODULE 4: STUDENT PROJECTS

Introduction

This section covers the most important (and exciting) part of Brain Bloom: the student projects. The student project process has been divided into five steps, which could be treated as five sessions, or which could be split up across more sessions, depending on the needs of the school.

Alignment meeting

Before getting underway with the student projects, it can be valuable for the Practitioner and School Lead to make sure they have a shared understanding of the scope of the student projects, as well as who is responsible for facilitating each session, supporting students and so forth.

The student projects must reflect content covered in their prior training. Broader topics such as discrimination or climate change – while they may impact mental health and may impassion students (and staff) – are beyond the scope of Brain Bloom. Projects should relate specifically and directly to mental health skills. It's important that both the Practitioner and School Lead are aligned about the core goals of Brain Bloom in order to keep the student projects on track.

It's also important for the Practitioner and School Lead to be clear about facilitation and support for students during and outside of sessions. This is really up to you—you can co-facilitate these sessions, or take turns, or have just one person acting as facilitator.

Student project process

Each step has been written as a 'session', and is a suggestion. The 'sessions' have been described at a high level, rather than with specific lesson plans, so that you can adapt them to your own needs. We recommend collaborating with the School Lead to develop facilitation plans that are appropriate for context, taking into consideration who will be facilitating, the number of students, their year level, their experience with self-led projects, their other curricular commitments and so on.

The steps of the student project process can be delivered over five or more sessions.

At the end of the project, students will have:

- Chosen a mental health priority, a project topic, that is important to their setting/group/cohort.
- Chosen a target group of their peers who will benefit from the delivery of their project.
- Understood the driving factors that contribute to this mental health problem for this target group.
- Designed and implemented a project with the goal of improving mental health and wellbeing among the target group.
- Evaluated their project.

Facilitation advice

Facilitating sessions with secondary students can be challenging. Be yourself, and don't be afraid to bring some humour into your sessions. Don't think of students as an 'audience', rather as people you're working with. If you're asking questions from the students and getting blank faces in response, try reframing your question to make it more relevant to them.

It's a good idea to allow for plenty of buffer time within a session. You can also include warm-up and wind-down activities to get students into the right headspace for the session.

Step one: Overview and choosing a topic and target group

In this step, students choose their topic and target group. After completing their training, they will now apply their new knowledge to design and deliver their own mental health project.

To begin this step, it's best to provide students with a refresher on the aims of Brain Bloom, as well as a gentle reminder of what is and isn't within the program's scope. It's also important to give students an opportunity to ask questions and voice any concerns.

If student working groups haven't been determined before this step, they need to be formed now.

Ensure students choose a topic that is of significance to their peers/cohort/setting. There is no point delivering a project about psychosis if that is not the most important issue for them. Get them to reflect on what seems to be the most common struggles for their peers. Students can also conduct a quick survey of their peers to help determine a relevant topic. Students should also be aware that they'll be evaluating the success of their projects at the end of the process by surveying their target group.

In the Templates section at the end of this toolkit you can find a printable idea-generator template for students (Template 5, page 42).

Questions for students:

- Based on the mental health issues covered in our teen mental health training sessions, which of these topics would you like us to focus on? For example: Anxiety, Depression, Eating Disorders, Psychosis, Alcohol or Substance Abuse.
- What do you believe is the most significant mental health issue impacting the wellbeing of students at your school?
- What target group should we focus on? Is there a specific age group/year level?

Before closing a session, it's a good idea to let students know what will be expected of them next time - particularly if they need to complete any work between sessions.

Step two: Investigate the chosen topic

In this step, students gain a better understanding of their chosen topic and target group. They need to identify what issues contribute to their chosen topic, and what the impacts are.

Students can do their own research online, speak with others, including their peers, the School Wellbeing Officer, Headspace, etc.

See page 36 for a list of websites and suggested resources for students to conduct initial research.

Questions for students to ask:

1. What is contributing to the issue?
2. What effect is it having on individuals?
3. How can you seek support for this issue?

Potential reflective questions for students, after they've chosen their topic and target group:

- Which topic did you choose and why? How is this topic impacting your peers?
- How did you choose this topic for your project?
- Who is the target group and why?

Once students have a more in-depth understanding of their chosen topic and target group, they are ready to begin designing their project.

Step three: Project design

In this step, students design and finalise their project plan. This includes designing the intended activity, making a schedule, allocating tasks, confirming key dates, and if budget has been allocated, creating a budget.

Students are free to design their project to take whatever form they'd like. They should be encouraged to be creative and have fun with their ideas. Some example projects include:

- An art competition which depicts young people and mental health.
- A mental-health awareness day to build peer connections.
- A magazine where students submit a 'shout out' for one of their peers.
- A video project which celebrates accessing mental health support and removing stigma.
- Guest speakers at assemblies - ReachOut, Resilience Project, etc.
- Educational posters for mental health awareness.

Questions for students:

- How do we want to tackle this issue?
- Is our idea realistic? Can we deliver this project within the provided time frame?
- What resources do we need?

- Does our project address one or more of the aims of Brain Bloom, including?
 - Increasing mental health literacy? Does it increase people's knowledge about my chosen topic?
 - Decreasing stigma? Does the project make people feel more comfortable to talk about my chosen topic?
 - Raising awareness of the pathways to support? Does the project include information on where, or who, to go to for support for this issue?

As a part of planning their project, students can make a list of their planned activities and the corresponding expected outcomes.

For example:

Project activities (what you will do)	Expected outcomes (what you will achieve)
Distribute mental health info to students via the school newsletter.	This will increase the students' level of understanding of mental health.
Interview students about how they maintain good mental health and share the answers with the target group at assembly.	Doing this will hopefully make people feel more comfortable to talk openly about their mental health, decreasing stigma.

Students should also fill out a timeline for their project delivery.

For example:

Student project milestone	Due date
Working group meeting to develop newsletter content.	Week 1, Term 2
Newsletter content checked by School Wellbeing Officer.	Week 2, Term 2
Newsletter distributed to students.	Week 3, Term 2

Similarly, if student project groups have been allocated a budget, students should itemise their expenses in a table as a part of their project planning.

Depending on the scale and complexity of the student projects, you may want to provide the students with a detailed project plan template for them to fill out. For example:

Objective	Actions	Person responsible	Due date	Obstacles?	Done?
Increase mental health literacy.	Choose topic based on needs of peers.	Elly	18/7	N/A	Yes
	Research topic.	Ahmed	26/7	N/A	No
Decrease mental health stigma.					
Increase pathways to support.					

Once students have designed their project, it can be a good idea to ask them to write up a summary that they can reflect on later:

Student project summary:

- Name of school
- Project name
- How does your project increase mental health literacy?
- How does your project decrease mental health stigma?
- How does your project raise awareness of pathways to support?

Pitching Projects

At this step, you may wish to run a 'pitch' session, where the students present their project concepts for feedback in a couple of minutes, ie an elevator pitch. To frame the session, you could get them to imagine they are presenting to a funder. You can invite people like the School Wellbeing Officer, other teachers or people within your organisation, to serve as a panel in order to provide feedback.

Step four: Project delivery

In this step, students deliver their projects. This could take many forms depending on the project design. The School Lead will probably be providing most of the support at this stage. However, if availability permits, it's a good opportunity for the Practitioner to see the projects come to life.

Practitioners should keep records of the numbers of students engaged in developing projects, the number of projects delivered, and the number of peers reached by each project and by all projects combined.

Step five: Student evaluation

The final step is for students to evaluate their projects by collecting data from their target group (peers).

There are numerous ways students can collect their evaluative data:

- Written survey (recommended).
- Online survey (recommended).
- Face-to-face interview.

Consideration should be given as to whether the responses need to be anonymous, or whether the target group would feel comfortable answering questions face-to-face.

The Peer Survey Template at the end of this toolkit (Template 6, page 43) provides a guide for a set of survey questions students could use for their project evaluations. The survey could be provided as a hard copy, or developed into an online version.

Ensure students have a clear sense of the data collection method that has been agreed upon and walk them through the steps for this.

Ensure you identify:

- Who will hand surveys out or send out the link to the online version.

- When they will do this.
- Who will receive the completed surveys either in paper form, or via accessing the results on the online survey platform.

Once Student Project Groups have distributed their surveys and collected the completed versions, support them to review the responses. This may occur during the same session or at a later date. Prompt the students to read the responses in groups and discuss what they notice in the feedback from their peers.

Prompt students to go away and write up their findings, using the Simple Student Evaluation Report Template (Template 12, page 52). They could do this in groups.

It is important to allow students enough time to complete their evaluations, but also to give them a deadline to ensure this work is completed.

Collate the student evaluation reports, as well as their completed Peer Surveys and file these for your Practitioner Evaluation, which will be the focus of Module 5.

Wrapping up the project

Once students have completed their evaluation, the students' role in the Brain Bloom implementation is complete. It is now over to you, as Practitioner, to complete your own evaluation.

It can be valuable to hold a retrospective session with the student group. This is an opportunity for the students to provide feedback on the program, and for you and the School Lead to provide feedback to them. The School Wellbeing Officer may also participate. This is entirely optional but can be incorporated into your evaluation plan (Template 11, page 50). It is recommended that you also collect student feedback using the Student Survey (Template 12, page 52) in Module 5.

Depending on how you've structured your sessions, you can combine this with the student evaluation session (Step five: Student evaluation), or hold an additional session. It is suggested that you draw on your evaluation questions in your Practitioner Evaluation Plan (Template 11, page 50) to structure the topics you cover in a retrospective session if you decide to hold one.

On page 45, there is a template for a student assessment rubric that the Practitioner and School Lead can use to provide feedback to students on their projects. On page 46 there is a template for feedback questions (from staff and students) that will be useful for the School Wellbeing Officer.

This reflective step is also useful for the School Lead in terms of sharing information about the program and the student projects with the broader school community, if they haven't done so already.

MODULE 5: EVALUATION



MODULE 5: EVALUATION

Introduction

Congratulations on working your way through Modules 1 to 4. You are now in a position to conduct your Practitioner evaluation.

This Module will guide you through planning and implementing your Practitioner evaluation and will incorporate the data you collated from the student evaluations⁴, as well as some additional data you will now collect.

Before you get started, here are some key points to keep in mind:

- Allow time for evaluation of your program.
- Prepare your evaluation materials when you are planning your program.
- Start thinking through how you will collect data and how that data will be stored and analysed.

4. Most likely this will be the completed Peer Surveys (Template 6, page 43) and Simple Student Evaluation Reports (Template 12, page 52)

Purpose of evaluation

It's an opportunity to reflect on all you have learned and feed those reflections into future activities.

This module will assist you to capture some useful information (data) about the extent to which the program objectives were achieved.

Keep in mind that you may want to implement this program for several years running. Evaluating your activities will enable you to demonstrate cumulative impact over time.

Before you start

A word on semantics. There are many ways to evaluate a program. The approach outlined here is simple and effective. See the Glossary for terms used in this module (page 6).

For more detailed technical guidance, you could check out the Better Evaluation website⁵. Better Evaluation is referenced worldwide as a comprehensive source of tools for all styles of evaluation.

5. <https://www.betterevaluation.org/>

Please follow Steps one to six in order as you work through this Module.

Evaluation steps

Step one: Develop your evaluation plan.

To do this, you will need to:

- Decide on the questions your Practitioner evaluation will be seeking to answer.
- Decide on your evaluation measures – i.e. what you will be looking to capture and measure through this process.

- Decide on your evaluation activities – how you will collect the data.
- Decide how you will analyse and make sense of your data and who will undertake this.
- Consider how you will share findings with all of your stakeholders. (Hint: you may want to create reports or powerpoints, or present verbally to students, staff and parents/guardians.)
- Confirm your timeline for implementing these steps.

The Sample Practitioner Evaluation Plan (Template 10, page 47) could be a ready-to-go plan if you don't want to make any changes. A blank Practitioner Evaluation Plan Template can be found on page 50 if you'd like to add more detail or make amendments.

Step two: Prepare data collection tools

In addition to collating the student evaluations from Module 4, you're encouraged as Practitioner to consider collecting data with or from the following groups.

1. Other staff involved in the program (e.g. School Lead or School Wellbeing Officer).
2. Students involved in designing and implementing projects.

There are a wide range of ways you could do this. To support you, a Student Survey Template (Template 12, page 52) and Staff Survey Template (Template 13, page 53) have been provided.

Your data collection tools, or templates, should ensure you capture data covering your selected evaluation questions (as identified in your completed evaluation plan).

It is highly recommended that you use an online survey platform as it will present you with your data in clear formats and will save you time.

Take some time now to review the included templates and decide on whether you want to use them as they are or make any amendments. If you do make changes, aim for consistency across your data-collection tools. This will assist you to aggregate data and show combined impacts e.g. to show how peers, students and staff reported the impacts of the program.

Step three: Begin collecting data and ensure your data is stored safely

By now, students have collected their own data. This was completed in Module 4. Now it's time to undertake the other data collection processes, using your Evaluation Plan.

These can include:

- Asking Student Project Group to complete your survey (Student Survey Template – Template 12, page 52).
- Asking staff to complete your survey (Staff Survey Template – Template 13, page 53).
- Conducting any reflection sessions you had planned.

Take care to store your evaluation data securely. This might be a lockable storage cabinet for hard copies or a password-protected folder on a laptop or PC.

Step four: Analyse your data and write up your findings

As the Practitioner leading this program, you will probably be the best person to analyse your evaluation data. Here are some tips:

- Set aside time to review all data (completed Peer, Student and Staff surveys – Templates 6, 12 and 13).
 - Make notes as you go as you notice any recurring themes.
 - If you used paper version of surveys with scaled questions, consider entering the data into an Excel spreadsheet⁶ (see Peer, Student and Staff Survey Templates – Templates 6, 12 and 13).
 - If you used an online survey platform, the platform will automatically create a report on your results, eg. easy-to-read bar graphs of responses to scaled questions.
 - Look for themes in your qualitative data (ie. in survey responses to open-ended questions where respondents write or type comments). Identify and highlight quotes from survey responses that illustrate these themes. These are handy when sharing your findings with stakeholders⁷.
 - Set up a report structure with subheadings that will communicate your findings.
 - Come up with short and succinct statements of fact that describe your data.
 - Trust your knowledge of the program and your data and have a go at writing a summary of the findings.
6. It is not too late to enter your data into a survey platform, and, while this may still take a bit of time, it could save you time producing graphs and writing up your findings.
 7. IMPORTANT – Sensitive, personal or identifiable quotes must not be used. If in doubt, do not use that quote.

Step five: Share your findings with students and other stakeholders

Refer back to the plan you have made for sharing your findings in your completed Evaluation Plan. Aim to share findings in an engaging and interactive way where strengths and achievements are celebrated, and things that can be improved are viewed as valuable lessons learned.

Step six: Review your evaluation plan and decide whether you would use it again or make changes to it

It is always worth reviewing your evaluation plan once the dust has settled. Gather some simple feedback on how the evaluation findings were received by students, staff and parents and guardians. You can get a good sense of how useful the findings and formats of your reports were by the questions these different stakeholders asked about the findings. In other words, what did they most want to know?

And finally, ask yourself whether your evaluation plan was useful in helping you evaluate your program and whether it had any gaps that would have been useful to cover next time.

SUSTAINING IMPACT

SUSTAINING IMPACT

Wrapping up Brain Bloom

We recommend conducting a retrospective meeting with the school, similar to the suggested wrap-up session with students, at the close of their projects.

This is a chance to reflect on the implementation. What worked well, what didn't and what can you change for next time? Try to lock this into diaries in advance so that it isn't skipped.

It's also a good opportunity to share any positive feedback you've heard from students over the course of the program.

Repeating Brain Bloom and setting yourself up for success

Brain Bloom's impact will be strengthened with repeated implementations. If the school is interested in running Brain Bloom again, it's a good idea to get the ball rolling on planning as soon as possible, so that dates can be locked in and resources allocated.

For repeat implementations, the school will likely be in a position to take more ownership of the program, making it easier for the Practitioner to step back and introduce Brain Bloom (and other programs) in other settings. Eventually, the school should be capable of running Brain Bloom completely internally, if it would like to.

THANK YOU

Thank you for your interest in the Brain Bloom program.

We wish you the best of luck!

– Connect Health & Community, 2022.

APPENDIX

APPENDIX

References

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MHFA Course Evaluations, <https://mhfa.com.au/research/mhfa-course-evaluations>

Mental Health Literacy - Past, Present and Future, Stan Kutcher, MD,1,2 Yifeng Wei, MA,1,2 and Connie Coniglio, PhD3 - <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4813415/>

National Survey of Mental Health and Wellbeing: Summary of Results, <https://www.abs.gov.au/statistics/health/mental-health/national-survey-mental-health-and-wellbeing-summary-results/latest-release>

Mental Health snapshot, Australian Institute of Health and Welfare, <https://www.aihw.gov.au/reports/australias-health/mental-health>

Causes of Death, Australia, 2019: Intentional self-harm (suicide), Australian Bureau of Statistics (2020), Catalogue No 3303.0

The Impact of Mental Illness Stigma on Seeking and Participating in Mental Health Care, Patrick W. Corrigan, Benjamin G. Druss, Deborah A. Perlick, <https://journals.sagepub.com/stoken/rbtf/dDpyhM2zRi.Fg/full>

What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies, S. Clement, O. Schauman, T. Graham, F. Maggioni, S. Evans-Lacko, N. Bezborodovs, C. Morgan, N. Rüsç, J. S. L. Brown and G. Thornicroft, <https://www.cambridge.org/core/journals/psychological-medicine/article/what-is-the-impact-of-mental-healthrelated-stigma-on-helpseeking-a-systematic-review-of-quantitative-and-qualitative-studies/E3FD6B42EE9815C4E26A6B84ED7BD3AE>

Resources

<https://www.beyondblue.org.au/>

<https://headspace.org.au/>

<https://www.blackdoginstitute.org.au/research-areas/youth-mental-health/>

<https://www.minus18.org.au/>

<https://www.lifeline.org.au/>

<https://kidshelpline.com.au/>

<https://au.reachout.com/>

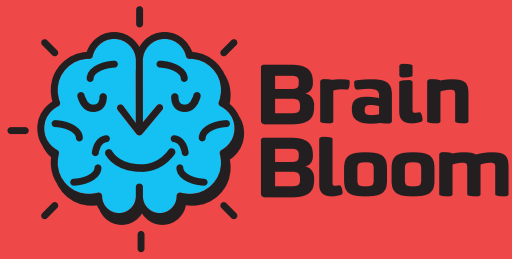
<https://www.orygen.org.au/>

<https://www.headtohealth.gov.au/about-us>

<https://www.copmi.net.au/>

<https://www.bgkllen.org.au/>

TEMPLATES



YOUNG PEOPLE TAKING CHARGE OF THEIR MENTAL HEALTH

The 'why' and the 'what'

In any given year, one in four young Australians aged 16-24 will experience a mental illness, making this the number one health issue for young people in our community (Department of Health, 2017).

Brain Bloom began in a secondary school in the South-East of Melbourne with the aim to increase mental health literacy and decrease the stigma associated with mental illness among young people.

Students who participate in the program will be:

- trained in mental health literacy.
- supported to design and implement a mental health initiative at their school through their own student projects.

What do we expect to achieve?

Brain Bloom aims to support good mental health for students by focusing on:

- Increasing mental health literacy.
- Decreasing stigma associated with mental health.
- Increasing knowledge of support pathways.

The outcomes of Brain Bloom are:

- Improved mental health knowledge and outcomes for students going forward.
- Greater sense of cohesion and community within the school.
- Greater student wellbeing resulting in improved engagement.

What is the commitment for the school?

A staff member from the school will need to act as the 'School Lead' - to be the main point of contact during Brain Bloom. Students will need to undertake training, such as Teen Mental Health First Aid training, prior to Brain Bloom. The Brain Bloom student projects can be delivered across five sessions or more; we will collaborate with you to design a schedule that works best for the school.

PROGRAM INFORMATION LETTER - PARENTS

Dear Parent/Carer

Re: Youth mental health initiative, Brain Bloom

We are writing to advise that [insert school name] year [X] students will be participating in Brain Bloom, a youth mental health program designed by Connect Health and Community.

What is Brain Bloom?

Brain Bloom is a peer-led program for school students that aims to increase mental health literacy, reduce the stigma around mental health and increase knowledge of support pathways. The outcomes of the pilot program (Boss Brain) which was implemented across two schools highlighted that this initiative resulted in students effectively promoting good mental health, increasing help-seeking behaviours and provided students with the opportunity to understand and recognise the signs and symptoms of mental illness.

What does Brain Bloom involve?

Students will initially undertake [enter name of training]. They will then be supported to design, deliver and evaluate a project at their school, with the aim of increasing the mental health literacy of their peers and reducing the stigma that is too often associated with mental illness.

How much time will students spend on the project?

We estimate students will spend about [x] hours on program activities over a [period of time]. Students will be supported by [x] from the school and [x] from [enter council] local council youth services team.

Does my child need to participate in Brain Bloom?

Brain Bloom is an exciting opportunity for our students to be involved in shaping the way we support student mental health. It empowers them with the knowledge and understanding of mental illness, how they can support themselves or their peers, and how to reach out for support and guidance.

If you would like to discuss how we will be implementing Brain Bloom at [insert school name], please contact [insert contact name, number and email address].

We thank you for your time and are looking forward to bringing this wonderful initiative to our school and students.

With kind regards,

PROGRAM INFORMATION AND PARTICIPATION LETTER - STUDENTS

Re: Youth mental health initiative, Brain Bloom

[insert school name] year [X] students will be participating in Brain Bloom, a youth mental health program designed by Connect Health and Community.

What is Brain Bloom?

Brain Bloom is a peer-led program for school students that aims to increase mental health literacy, decrease the stigma around mental health and increase the knowledge of support pathways. This program is led by students, for students and the wider school community.

Our pilot program (Boss Brain) was implemented across two schools and showed that this initiative led to students effectively promoting good mental health, increasing their help-seeking behaviours and provided students with the opportunity to understand and recognise the signs and symptoms of mental illness.

What does Brain Bloom involve?

Following completion of [enter name of training] you will then commence the Brain Bloom program and will be supported to design, deliver and evaluate a project at school. The aim of the program is to increase your own mental health literacy as well as the mental health literacy of your peers and decrease the stigma that is too often associated with mental illness.

How much time will I need to spend on the project?

We estimate you will spend about [x] hours on program activities over a [period of time]. You will be supported by [x] from the school and [x] from [enter council] local council youth services team.

If you have any questions about Brain Bloom please speak to [insert contact name, number and email address].

With kind regards,

RACI FRAMEWORK

Plan out the key decisions and actions for your Brain Bloom program, ideally in a meeting . In each row, list a key decision or action. In each column, list a person or stakeholder group who needs to be either: responsible (R), accountable (A), consulted (C), or informed (I).

Responsible: People must complete the task or make the decision. Several people can be jointly Responsible.

Accountable: Person who must sign off or approve when the task or decision is complete. Success requires that only one person is Accountable, which means that “the buck stops there.”

Consulted: People who need to give input before the work can be done and signed-off on. These people are “in the loop” and are active participants.

Informed: People who need to be kept “in the picture”. They need updates on progress or decisions, but they do not need to be formally consulted, nor do they contribute directly to the task or decision.

Below is an example of a partially filled-out RACI Framework:

	Practitioner	School Lead	School Wellbeing Officer	[Person / group here]	[Person / group here]
Book pre-implementation training	C	R	C		
Send letter to students	R	R	I		
Facilitate Brain Bloom sessions	R	A	C		

RACI frameworks can be quite big - it's a good idea to use a whiteboard or a spreadsheet to give yourself enough space.

IDEAS GENERATOR: CHOOSING A MENTAL HEALTH TOPIC

The first step is to choose your mental health topic.

What mental health issue do you want to focus on? What do you believe is the most significant mental health issue impacting the wellbeing of students at your school?

Write it here (by yourself):

Discuss your answers as a team. Did you choose the same topic? Are they different?

Now, agree as a team on what your topic will be.

STUDENT PEER SURVEY

To be distributed by Student Project Groups to the peers who participate in their projects e.g. their project recipients.

	As a result of this (<i>insert student project name here</i>)... (circle one option on each row)
1	<p>I feel that I have a better understanding of (<i>topic chosen for this student project</i>).</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
2	<p>I can better recognise the signs and symptoms of (<i>topic</i>)</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
3	<p>I feel more comfortable to more openly talk about _____(<i>topic</i>).</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
4	<p>I am more likely to seek support for _____(<i>topic</i>) if I needed to.</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
5	<p>I have a better understanding and awareness of where to go for help/info/support related to this topic.</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
6	<p>What I liked about the session/activity was</p>
7	<p>Suggestions for how the session/activity could have been even better</p>
8	<p>Students could add their own questions they would like to ask here</p>

SIMPLE STUDENT EVALUATION REPORT TEMPLATE

To be distributed to Student Project Groups

Student/group name:

Name of project:

The aim(s) of our project was/were

Our main activities were

The evaluation data we collected from peers who participated in our session showed that ... (Now describe your survey findings)

(Here are some examples ...)

Most attendees agreed or strongly agreed that they had a better understanding of the topic

About half of the attendees agreed or strongly agreed that they can better understand the signs and symptoms of (insert topic)

The main things our peers liked about our session were:

We received the following suggestions for improving our session/project:

ASSESSMENT / FEEDBACK RUBRIC FOR STUDENTS

Criteria	Comment
Able to demonstrate that their chosen mental health topic is relevant to their school. Students must provide evidence that the topic is significant (for example, they can survey or interview a small sample of their peers).	
Delivered within budget	
Addressed all three objectives	
Conducted a survey and collected data to analyse results – Must include the survey questions supplied.	
Demonstrated reflective practice – Must be able to reflect on what worked well, what didn't work well and why.	

REFLECTION QUESTIONS FOR STUDENT GROUPS AND STAFF - FOR STUDENT WELLBEING OFFICER

Did you enjoy participating in this project?

What positive impact do you think this project had?

Is this something the school would continue doing?

How do you think we should change how we implement the project moving forward? How could we improve the way we do things?

Any reflections on the support from the Student Wellbeing Officer?

Was it too hard/time consuming participating in this project? Do you think it took too much time out of your studies?

How could we involve the broader school community next time?
Like parents?

SAMPLE PRACTITIONER EVALUATION PLAN

Program objectives

Increase student and peers mental health literacy

Decrease mental illness stigma among students and peers

Increase awareness of and uptake of pathways to support among students and peers

Evaluation questions

You may wish to develop your own evaluation questions. Below are some suggestions for you to consider. You could use any combination of these question

Process - Process evaluation questions are concerned with the steps you took to plan and implement this program and what worked well and what could be improved.

Suggested Evaluation Questions 1 to 6

1. To what extent was the program implemented as planned?
2. What was the reach of the program?
3. Were there any unforeseen barriers to implementing the program and if so, what were they?
4. What would be done differently if this program were to be implemented again? (focus on each module individually e.g. supporting students to choose a topic, investigate a topic, design a project, deliver a project)
5. What were the main lessons learned about implementing this program?
6. What feedback did students provide on the program?

Impact - Impact evaluation questions are about what has changed and to what extent.

Suggested Evaluation Questions 7 to 9

7. To what extent were the program objectives achieved? Or – to be more specific:
 - a. To what extent has there been an increase in mental health literacy in the target group?
 - b. To what extent has there been a decrease in mental illness stigma among our target group?
 - c. To what extent has there been an increase in pathways to support and help-seeking within our target group?
8. What else has changed as a result of implementing this program?

Prompts:

 - a. Sense of cohesion and community within the school
 - b. Student wellbeing across the whole school
 - c. Practitioner confidence to implement mental health literacy programs
9. Where the program did not achieve its objectives / desired outcomes, why was this the case? E.g. if 70% reported increase/decrease, what about the other 30%

Evaluation measures⁸		
Process Measure	Relevant evaluation question	Data source
Number of students engaged in developing projects	1, 2	Records kept by the Practitioner and/or School Lead
Number of projects implemented	1, 2	Records kept by the Practitioner and/or School Lead
Number of peers reached by student projects	1, 2	Records kept by the students
Barriers to implementing the program	3	Staff Survey (Template 13)
Lessons learned in implementing this program	4, 5	Staff Survey (Template 13)
Student feedback on the program	6	Student Survey (Template 12)
Impact Measure	Relevant evaluation question	Data source
Impact on student and peer mental health literacy	7a	Peer Survey (Template 6) Student Survey (Template 12) Staff Survey (Template 13)
Increased student/peer understanding of mental health	7a	Peer Survey (Template 6) Student Survey (Template 12) Staff Survey (Template 13)
Improved student/peer ability to recognise the signs and symptoms of mental illness	7a	Peer Survey (Template 6) Student Survey (Template 12) Staff Survey (Template 13)
Impact on student and peer mental illness stigma	7b	Peer Survey (Template 6) Student Survey (Template 12) Staff Survey (Template 13)
Increased student/peer confidence to talk openly about their mental health	7b	Peer Survey (Template 6) Student Survey (Template 12) Staff Survey (Template 13)
Increased student/peer likeliness to seek support for a mental health concern	7c	Peer Survey (Template 6) Student Survey (Template 12) Staff Survey (Template 13)
Impact on student and peer access to pathways to support to a mental health concern	7c	Peer Survey (Template 6) Student Survey (Template 12) Staff Survey (Template 13)
Impact on sense of cohesion and community within the school	8	Staff Survey (Template 13)
Impact on student engagement in school activities	8	Staff Survey (Template 13)
Impact on practitioner confidence to implement strategies to address youth mental health	8	Staff Survey (Template 13)
Reasons for not achieving program objectives	9	All

<p>Evaluation activities</p> <p>Who collects what, when and how, where is data stored and who has access to data</p> <p>It is suggested that you number your evaluation activities. This list is an example of what might work for your program.</p>	
<ul style="list-style-type: none"> • Create processes for distributing evaluation materials (Student and Staff Surveys – Templates 12 and 13) and collecting and storing completed data (who prints templates, who collects completed surveys, where are these stored, who has access) • Record data on student engagement in the program at all activities • Record data on reach of student projects at all student-led activities • Distribute Student Survey (Template 12) to students engaged in the program (around Term 1, week 10 – in the feedback session with students) • Distribute Staff Survey (Template 13) (around Term 1, week 10) • Hold a retrospective feedback session with students (if appropriate) (around Term 1, week 10) • Collate all evaluation data in one place in preparation for analysis (around Term 1, week 11) 	<p>Person responsible for each activity e.g. Practitioner / School Lead</p>
<p>Analysis</p> <p>What data will you end up with and who will analyse and write it up.</p> <p>In this section of your evaluation plan, you will provide a brief overview of how evaluation data will be analysed.</p>	
<p>Produce simple bar graphs for all survey question responses that use a scale</p> <p>Present peer survey responses, student survey responses and staff survey responses separately and/or discuss what the results show in aggregated form</p> <p>Conduct a simple thematic analysis by grouping open-ended text responses by themes and describing what the most common themes were</p>	
<p>Plan for sharing findings</p>	
<p>Practitioner report is shared with school staff</p> <p>Practitioner creates a summary of findings to present to students in an engaging interactive visual session</p> <p>Practitioner creates a summary of findings for families in nontechnical language and translated into relevant languages spoken locally</p>	

8. If you want to conduct a more elaborate evaluation, you may wish to identify indicators and outcomes.

PRACTITIONER EVALUATION PLAN

Program objectives		
Increase student and peers mental health literacy		
Decrease mental illness stigma among students and peers		
Increase awareness of and uptake of pathways to support among students and peers		
Evaluation questions		
<p>Process - Process evaluation questions are concerned with the steps you took to plan and implement this program and what worked well and what could be improved.</p> <p>Evaluation questions</p> <ul style="list-style-type: none"> • • • <p>Impact - Impact evaluation questions are about what has changed and to what extent.</p> <p>Suggested Evaluation Questions 7 to 9</p> <ul style="list-style-type: none"> • • • 		
Evaluation measures ⁹		
Process Measure	Relevant evaluation question	Data source
Impact Measure	Relevant evaluation question	Data source

9. If you want to conduct a more elaborate evaluation, you may wish to identify indicators and outcomes.

Evaluation activities	
Who collects what, when and how, where is data stored and who has access to data	
<ul style="list-style-type: none">•••	Person responsible for each activity e.g. Practitioner / School Lead
Analysis	
What data will you end up with and who will analyse and write it up.	
Plan for sharing findings	

STUDENT SURVEY TEMPLATE

To be administered by Practitioner or School Lead to students that have developed projects.

	As a result of this (<i>insert student project name here</i>)... (circle one option on each row)
1	<p>I feel that I have a better understanding of mental health among my peers.</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
2	<p>I can better recognise the signs and symptoms of mental illness and distress among my peers.</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
3	<p>I feel more comfortable to more openly talk about mental health.</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
4	<p>I am more likely to seek support for mental health of myself or others if I needed to.</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
5	<p>I have a better understanding and awareness of where to go for help/info/support on mental health.</p> <p><i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree</i></p>
6	<p>What I liked about the Brain Bloom program</p>
7	<p>Suggestions for how the Brain Bloom program could have been better</p>

STAFF SURVEY TEMPLATE

To be administered by the practitioner to staff involved in the program as part of the Practitioner-led evaluation. It is recommended that the Practitioner and School Lead complete this survey too.

If you want to keep this survey anonymous, it's best not to ask the staff member to identify their role in the project. An online version of this survey enables anonymity.

1	<p>In your opinion, to what extent was the program implemented as planned? (Please comment) Prompts: Were there any clear barriers to implementing the program as planned?</p>
2	<p>Is there anything you would have done differently if implementing the program again? Prompts: consider supporting students to choose a topic, investigate a topic, design a project, deliver a project, evaluate a project</p>
3	<p>What were the main lessons you learned while implementing this program?</p>
4	<p>From what you saw, on the whole, to what extent do you agree with the following statements. (circle one option on each row)</p>
a	<p>Mental health literacy among the students involved in projects has increased <i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree I don't know</i></p>
b	<p>Mental illness stigma among the students involved in projects has decreased <i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree I don't know</i></p>
c	<p>Knowledge of pathways to support and likeliness to seek help has increased among students involved in projects <i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree I don't know</i></p>
d	<p>Mental health literacy among the peers has increased <i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree I don't know</i></p>
e	<p>Mental illness stigma among peers has decreased <i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree I don't know</i></p>
f	<p>Knowledge of pathways to support and likeliness to seek help has increased among peers <i>Strongly disagree Disagree Neither agree nor disagree Agree Strongly Agree I don't know</i></p>

5	<p>To what extent, if any, have you observed any improvement in the overall sense of cohesion and community within the school that you associate with this program? (circle one option on each row)</p> <p><i>Not at all A small improvement A moderate improvement A huge improvement This doesn't apply to me</i></p>
6	<p>To what extent, if any, have you observed any improvement in student engagement in school activities that you associate with this program? (circle one option on each row)</p> <p><i>Not at all A small improvement A moderate improvement A huge improvement This doesn't apply to me</i></p>
7	<p>On a scale of 1 to 10, where 1 equals not at all confident and 10 equals extremely confident, how would you score your confidence to implement mental health literacy programs for young people before and after your involvement in Brain Bloom? (circle one option on each row)</p> <p><i>Before Brain Bloom</i> <i>1 2 3 4 5 6 7 8 9 10</i></p> <p><i>After Brain Bloom</i> <i>1 2 3 4 5 6 7 8 9 10</i></p>
8	<p>If you have any additional comments about any aspect of this program please write them here.</p>



Brain Bloom

Developed by:

