



WELL-BEING AND WELL-BECOMING IN SCHOOLS RESEARCH INITIATIVE

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APPROACHES TO WELL-BEING AND MENTAL HEALTH BY PROVINCIAL EDUCATION DEPARTMENTS IN CANADA

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Abstract: Decades of accumulated evidence underscore the critical and urgent need for school-based approaches to enhance the well-being and mental health of children and youth, a problem exacerbated by the pandemic. The development of comprehensive and equitable supports for students demands systemic approaches at a provincial level. Several jurisdictions have formulated resources, policies or frameworks to guide planning, pedagogy and the provision of school-based services aimed at addressing student well-being and mental health needs. This study systematically and rigorously examines provincial and territorial department of education websites to assess the prominence and conceptualization of student well-being and mental health across Canada. This paper delineates the findings, identifies common approaches, and proposes areas for further consideration.

Well-Being in Schools Paper Series

#4



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Introduction

It is widely recognized on a global scale that the mental health and well-being of children and youth continues to decline (Cavioni et al., 2020; WHO, 2022), despite substantial and longstanding evidence highlighting this as an area for concern necessitating action (Solmi et al., 2022; Weist et al., 2017). The World Health Organization (WHO) identified child and youth mental health as a critical area for policy attention nearly three decades ago (WHO, 2020). However, in Canada youth mental health has been described as the “orphan of the orphan,” (Mulvale et al., 2015, p. 112) an overlooked area within a category that is already underserved. While schools are acknowledged as pivotal in addressing the mental health and well-being needs of children, schools cannot address this alone. For some time now, scholars have been calling for robust government policies and frameworks to

guide responses to youth mental health and well-being needs (Kutcher & Wei, 2020; Manion et al., 2013; Weist et al., 2017). However, Canadian provinces have not adequately met the essential criteria identified by the WHO for child and youth mental health policies and plans, which recommend school-based mental health promotion and prevention (Alimi et al., 2021).

An important question that should be asked is, what challenges have hampered progress on this front? There are many plausible responses to this question which are beyond the scope of this paper. In Canada, commonly identified obstacles include stigma (Mental Health Commission of Canada, 2009) and, related, inadequate funding, training of staff, and inadequate services (Leschied et al., 2013; Manion et al., 2013; Mental Health Commission of Canada, 2009). Moreover, a lack of consensus regarding terminology and conceptualization may be impeding efforts to address this matter in schools. For instance, although the terms *mental health* and *well-being* are commonly mentioned together and are sometimes used interchangeably in Canadian education literature, it is important to note that they are defined differently. A widely accepted definition of mental health is provided by the WHO, which defines mental health as, “a state of emotional, psychological and social well-being in which individuals can cope with the normal stresses in life, work productively and contribute to their communities” (World Health Organization, n.d.). Contrastingly, a universally accepted definition for well-being is lacking (Eblie Trudel, 2024), though it is generally understood to encompass a broader range of dimensions, including physical, emotional, spiritual, social and material aspects (Nielsen & Amundrud, 2023). Well-being is also understood as human flourishing, and can be conceived as both a “means and end of school education” (Falkenberg & Ukasoanya, 2019, p. 2). For the purposes of this paper, I will use both terms as they are reflected in the literature, as well as the phrase *well-being and mental health* to encompass the broad aims and specific domains that are of interest to schools in supporting students’ positive development.

Supporting positive youth development is a collective responsibility; yet, another contributing factor to the underdevelopment of provincial guidance in youth well-being and mental health likely stems from the difficulty and complexity of evolving and coordinating government departments, particularly large entities such as health and education. There is an increasing acknowledgement that relying solely on health departments is inadequate to address the burgeoning mental health crisis among youth (Clarke et al., 2021; McGorry & Mei, 2018). School-based educational initiatives are crucial for enhancing student well-being (Falkenberg, 2019) and mental health promotion (Kutcher & Wei, 2020). Therefore, delivering comprehensive school-based services necessitates policies and plans which transcend departmental boundaries (Mulvale et al., 2015). Enhanced levels of interdepartmental communication, co-operation and integration are essential to leadership in the prevention, early identification, early intervention and ongoing care that is recommended by a substantial body of research to support youth well-being and mental health (see, e.g., Clarke et al., 2021; Crocker et al., 2023; Kutcher & Wei, 2020; Mulvale et al., 2015; Weist et al., 2017).

This report investigates how governmental departments of education across Canadian provinces and territories have responded to the imperative to explicitly address well-being and mental health in schools. More specifically, this study examines the *prominence* and *conceptualization* of student well-being and mental health by governmental departments of education. The guidance provided by departments of education on their public websites is assessed to identify common approaches and illuminate perceived gaps based on internationally recommended practices. Recommendations are offered regarding the leadership and support which is necessary in the development of comprehensive, evidence-based, and equitable responses to the well-being and mental health needs of students.

Background

Research conducted across the globe over the past twenty years has consistently shown an increase in mental health problems among young people (Cavioni et al., 2020). Further emphasising the critical need to focus on this age group is research which indicates that vulnerability to mental health problems is highest during childhood and adolescence (McAllister et al., 2017), with nearly 75% of all lifelong mental health problems emerging before age 18 (Halsall et al., 2019). Resultantly, a sizable proportion of Canadian school age children, approximately one in five, are affected by a diagnosable mental illnesses, which can negatively affect their development (Manitoba Government, 2022). However, despite this pressing need, fewer than 20 per cent of Canadian youth who require treatment actually receive it (Mental Health Commission of Canada, n.d.), exacerbating the problem further.

In schools, students grappling with mental health difficulties often face challenges in concentrating, completing assignments, and maintaining school engagement and attendance, ultimately resulting in lower academic achievement (Brännlund et al., 2017; Lawrence et al., 2019; Riglin et al., 2016). Unaddressed emotional issues can lead to disruptive behaviours, which are associated with suspension and early school dropout (Valdez et al., 2011). Moreover, students with mental health difficulties struggle to connect with their peers, leading to feelings of isolation and social withdrawal, further compromising their overall well-being (Matthews et al., 2015). These interconnected challenges contribute to mental health problems being the primary cause of disability in Canadian youth (Mental Health Commission of Canada, 2017).

The disruption and uncertainty brought about by the pandemic has both created and exacerbated mental health and well-being challenges for students and school staff. While some individuals were able to demonstrate resilience, preliminary research suggests a rise in rates of depression, anxiety and substance use among youth (Crocker et al., 2023). Marginalized, racialized and economically disadvantaged children and families have been disproportionately affected by the pandemic due to structural inequities and disparities in access to resources and support systems (Ontario Public School Boards' Association, 2023). Research with teachers indicates that the increased levels of teacher stress during the pandemic continues to be a concern (Eblie Trudel & Sokal, 2023; Sokal et al., 2021). Further research is necessary to determine the lasting impact of the pandemic on student and staff wellbeing and mental health.

Research indicates that early intervention for well-being and mental health issues is crucial, as delaying interventions can lead to entrenched problems that are more difficult to treat, resulting in negative health, education, and employment outcomes throughout adulthood (Clarke et al., 2021; Mental Health Commission of Canada, 2017). With schools facing significant academic, behavioural, and social challenges arising from youth well-being and mental health problems, timely supports are necessary to bolster prevention and adequate responses within education systems.

The Role of Schools

Educational institutions are routinely identified as a natural and excellent locations to support and promote the well-being of children (Powell & Graham, 2017; Short, 2016). Decades of research indicate that schools can have a significant impact on improving the mental health of students (Barry et al., 2017; Cefai et al., 2020; Yu et al., 2022). Therefore, there should be considerable public interest in elevating the importance of well-being and mental health in schools. Rather than viewing student

well-being and mental health as a distraction from the learning agenda or as ‘add-on’ work for teachers, separate gatherings of thought leaders in Canada recommend that student well-being and mental health be viewed as a central purpose of schooling. In both *Beyond the Binder: Toward more Systemic and Sustainable Approaches to Mental Health and Well-being in K-12 Education* (McConnell Foundation, 2020) and *Beyond Knowledge: Preparing Students for an Uncertain Future* (Ontario Public School Boards’ Association, 2023) a diverse group of Canadian education leaders advocate for re-imagining of K-12 education systems to make the enhancement of youth well-being and mental health an essential priority.

Despite the intuitive appeal of such a shift, efforts to embed well-being and mental health into the day-to-day work of schools faces a number of challenges. Ambiguity related to definitions and conceptualizations as well as the difficulty of integrating approaches from different disciplines is a barrier (Nielsen & Amundrud, 2023). Educators report feeling ill-equipped to adequately address mental health and well-being needs in the classroom (Rodger et al., 2014). Relatedly, research indicates that mental health challenges among youth are a source of stress for educators (Harding et al., 2019).

To address these issues, a proliferation of programs have been developed and marketed to schools, often by developers outside of education (Powell & Graham, 2017). Unfortunately, “many programs, resources and services presented to Canadian schools ... are not rooted in evidence” (Short, 2017, p. 6). Busy school and district leaders may find it challenging to discern which approaches are evidenced based, appropriate for their local context, and suitable for scale up (Short, 2017). Departments of education can play an important role in supporting school districts with the selection and implementation of evidenced based programs. Additionally, departments of education may leverage their other roles to advance wellbeing and mental health approaches in schools, as described in the following section.

The Role of Provincial Governments

In Canada, there is no federal ministry of education; instead, the Canadian constitution assigns exclusive responsibility for all levels of education to provincial and territorial governments. Each of Canada’s ten provinces and three territories has a department or ministry of education responsible for the organization, delivery, and assessment of kindergarten to grade 12 education.¹ This decentralized approach permits variations in policy and approaches that reflect the unique priorities and needs within each province. While this flexibility for regional customization of strategies is essential to the development of appropriate responses, competing discourses, changing needs, and shifting political environments can contribute to ad hoc policies and practices. For this reason, *departments of education have a role to play in sustaining implementation of wellbeing and mental health approaches through the development of embedded school and community practices that are aligned with a clearly stated, broadly held vision for education.*

Converging and robust research and recommendations are available to guide these school-based well-being and mental health efforts. Mental health promotion, a focus on learning and environments which foster the development of well-being competencies, has been recommended

¹ In this paper, I just use the term *department of education*. However, when I talk about the departments of a specific province or territory, I use the respective official term used by the respective department.

by global (OECD, 2011; UNICEF, n.d.; WHO, 2020) and national organizations (Joint Consortium for School Health, 2016; Mental Health Commission of Canada, 2010, 2017) to prevent or reduce the severity of mental health problems. Given the significant number of students who are suffering with mental health difficulties, and given it is not possible to predict which children will need these supports, universal (for all children) supports are recommended (see, e.g., Clarke et al., 2021; Crocker et al., 2023; Curran & Wexler, 2017; Ma et al., 2023). Canadian education leaders recommend well-being competencies “be embedded as cross cutting learning objectives in core K-12 curricula” (McConnell Foundation, 2020, p. 22). As curriculum design and outcomes monitoring are provincial and territorial responsibilities, *it is the role of departments of education to develop and articulate these objectives, and to support educators in implementing well-being and mental health promotion as an educational priority for every child.*

Research and policy recommendations for well-being and mental health also highlight the imperative for targeted early interventions in school settings, and the provision of pathways to treatment, often in collaboration with service partners in community settings (Ontario Public School Boards’ Association, 2023). Geographically locating mental health services in schools not only increases the likelihood of access and utilization (Georgiades et al., 2019); it also increases the probability of success. Youth are six times more likely to complete evidence-based treatment provided within school settings rather than in the community (Hoover et al., 2019). That makes it necessary to create comprehensive systems of care (Short, 2016). To this end, *it is provincial governments’ role to ensure the inter-departmental collaboration and communication to develop the partnerships, processes and role clarity.*

Compared to their counterparts from other demographics, students from low-income backgrounds, racial and ethnic minority groups, and other historically marginalized populations are especially reliant on school-based services (Ontario Public School Board Association, 2023). Critically, the provision of well-being and mental health supports within schools has the greatest impact for students with social disparities. Targeted, identify affirming care is required to address the well-being and mental health needs of young people from equity deserving groups (School Mental Health Ontario, 2022b). *Departments of education can play a critical role in providing leadership and direction to ensure the care that is required for our most vulnerable children is available in the school context.*

A compelling economic rationale also underscores the need for provincial attention in student well-being and mental health. Barry et al. (2017) summarize research by Belfield et al. (2015) which reports a return of \$11 for every dollar invested in socio-emotional learning programs. Additionally, the research by McDaid and Park (2011), which reports a return ratio of 25:1 “for high quality programmes that impact on young people’s mental health and well-being” (p. 436), is also cited as an argument for investment in evidenced-based school programming (Barry et al., 2017). Further, this spending in prevention yields dividends in reduced health care costs, as well as in improved employment and education outcomes (McConnell Foundation, 2020; Mental Health Commission of Canada, 2017). Because almost all funding of K-12 education in Canada comes from provincial governments, *leadership by departments of education is crucial to sustainable investments in high yield school-based supports.*

Recent surveys of Canadian educators conducted nationwide have uncovered a notable lack of adoption of evidence-based practices in school mental health (Short, 2016; Weist et al., 2017). Further, where evidenced based programs are adopted, implementation challenges often hamper program effectiveness. For example, decades of evidence underline the critical role that schools play in the development of socio-emotional learning competencies, which is a key factor in preventing

mental health problems (WHO, 2020). Yet, “under 8% of all the things we call SEL in schools are indeed evidenced-based, and among those, only half are implemented with reasonable fidelity to their original model” (McConnell Foundation, 2020, p. 8). These findings highlight the importance of leadership regarding the selection of evidenced-based programs, their implementation and ongoing professional development (Short, 2016). *Departments of education can play a leadership role in supporting the selection and systemic implementation of evidenced based programs.*

Although Weist’s (2005) description of limited resources, services and linkages as “commonplace” (p. 735) continues to be a concern in Canadian schools, particularly post pandemic, departments of education have a critical role in ushering in change that could meaningfully address the significant and rising concern about student wellbeing and mental health. By exploring the prominence and conceptualization of youth well being and mental health within Canadian provinces, this study contributes the existing scholarly discourse on the leadership and approaches taken by departments of education to support well-being and mental health in schools.

The Study

The objective of this study was to determine how student well-being and mental health is being addressed on the publicly accessible websites of departments of education across Canada. This objective is refined into two areas of inquiry. The first area of inquiry is the *prominence* that is given to student well-being and mental health on departments’ websites. The second area of inquiry is the *conceptualization* of well-being and mental health on departments’ websites. Research questions (see below) were determined for each of the two areas of inquiry.

Following an exploratory search of a few department websites, the research question and methodology were refined to ensure a useful and manageable scope for this study. For example, initial sampling revealed that in a number of provinces mental health guidance and resources were provided under the category of “health,” so the research questions and selection criteria were expanded to include this term as well. Additionally, criteria related to prominence and conceptualization were added to provide a more complete understanding. In the inquiry related to prominence, specificity was increased with sub-questions related to visibility, organization, and the connectedness of this topic to other areas. In the inquiry into *conceptualization* questions were added regarding the ways in which terms are defined and related. The final organization of the research questions and methodology are described in the following sections.

Research Questions

For the first area of inquiry, the prominence of student well-being and mental health on department of education’s websites, three research questions were identified to discern the importance and priority given by departments of education to the area of student wellbeing and mental health. For the second area of inquiry, the conceptualization of the topic on departments’ websites, three additional questions were identified to discern how student wellbeing and mental health were defined, described, and conceived together by departments of education.

Prominence:

1. How visible is communication regarding student wellbeing and mental health on the open-access websites of departments of education? Where within the website structure is the communication located?
2. Based on the nature of the documents available (e.g. policies, frameworks, information), what status (or role) in the hierarchy of departmental communication is given to communication on student well-being and mental health?
3. What connections, if any, are made from the area of student well-being and mental health to other initiatives or areas of priority?

Conceptualization:

1. Which terms (well-being, mental health, or health) are being used?
2. How are they defined?
3. If more than one term is being used, how is the relationship between the terms described, if at all?

Methodology

A systematic approach was employed to search all publicly available department of education websites for every province and territory in Canada. The methodology followed a structured process to ensure comprehensiveness and rigor in identifying relevant documents and website pages.

Each province and territory's department of education website was located through a search engine, and then searched systematically using the following two search strategies. First, each home page was manually navigated to search for relevant policy repositories, document libraries and pages dedicated to the search terms. Second, the following search terms were used in searching the departments' websites with website-internal search functions: "well-being," "well being" and "wellbeing," "mental health," "health," "healthy" and "wellness."

All departments' website information and documents retrieved through the search methodology were included in the analysis. Additionally, all links on the departments' websites that led to documents hosted on other governmental department websites were examined and included in this study if these documents addressed strategies for enhancing student well-being and mental health in school settings.

However, certain exclusion criteria were applied to focus the findings to school-based approaches guided by departments of education. Consequently, only documents available on the department of education website and authored or co-authored by the department of education were included. Documents written by other government departments or agencies (such as school board associations, unions, charitable organizations, and professional associations) were excluded unless they were explicitly designated by government to provide resources to schools for well-being and mental health.

Given the restriction to publicly available documents, any resources or materials disseminated directly to school divisions by departments of education via email or other forms of communication were not included in the analysis. Furthermore, it is important to note that the search was conducted exclusively in English, potentially limiting accurate representation of Québec (French-speaking province) and New Brunswick (bilingual province). Finally, the search was conducted within the

timeframe of February 27, 2024, and April 12, 2024, so only documents available during this timeframe were included in this study.

Findings by Province and Territory

The findings below are organized by area of inquiry by provinces and then territories, working across the country from west to east: British Columbia (BC), Alberta (AB), Saskatchewan (SK), Manitoba (MB), Ontario (ON), Quebec (QC), New Brunswick (NB), Prince Edward Island (PE), Nova Scotia (NS), Newfoundland and Labrador (NL), Yukon (YT), Northwest Territories (NT), Nunavut (NU).

British Columbia²

Prominence

The Ministry of Education and Child Care’s home web page (Government of British Columbia, n.d.) does not contain any of the keywords of this study. Utilizing the search function on the Ministry’s website yielded results from across the entire provincial government website, leading to information unrelated to educational institutions. Despite not being explicitly identified as pertaining to schools, the website *Mental Health and Well-being* (Government of British Columbia, 2024) contains the Ministry’s *Mental Health in Schools Strategy* (MHIS) (British Columbia Ministry of Education, n.d.) and links to a wealth of resources for educators, family members and supportive adults. This strategy document is a component of the broader provincial initiative known as Expect Respect and a Safe Education (ERASE) initiative under the heading “erase stigma/ embrace understanding.”

Conceptualization

The British Columbia Ministry of Education employs the terms *well-being*, *mental health* and *wellness*. In the MHIS strategy (British Columbia Ministry of Education, n.d.) the term *mental health* used most frequently (90 times); followed by use of the term *well-being* (19 times) and *wellness* (5 times). The term *well-being* is used as a broad concept, as in “contribute to overall well-being” (p. 4) and also in terms of a particular perspective or narrower domain, in the phrase “mental well-being or positive mental health” (p.4). Further, the terms *well-being*, *mental health* and *wellness* are used interchangeably and in combination, for example, “mental health and wellness” (p. 3) and “mental wellness” (p. 10) and “mental well-being” (p. 8). Most often, the terms “mental well-being” (p.4) or “mental health” are used in reference to students; yet, for adults, only the term “well-being” is applied (p.5).

Although explicit definitions are not provided within the MHIS strategy document or elsewhere on the *Mental Health and Well-being* (n.d) website for any of the keywords, a general description is provided on the website under the section *Information*, with the statement “mental well-being or positive mental health impacts how we think, what we feel and the way we act. It also affects how we handle stress, relate to others and make choices” (para. 1).

² [Ministry of Education and Child Care](#)

Alberta³

Prominence

The Ministry of Education home web page does not contain any of the identified keywords. The website search tool searches all of Alberta.ca, generating information from health and other departments as well as education. The *Mental Health in Schools* (Alberta Government, n.d.) webpage is a subsection of *Health and Safety in Schools* (Alberta Government, 2024), located under *Education supports*. The *Working Together to Support Mental Health in Alberta Schools* (Alberta Government, 2017) is listed as a *resource* on the *Mental Health in Schools* (Alberta Government, n.d.) webpage. This document explicitly connects students' mental health and well-being to work in inclusive education in Alberta.

Additionally, a revised *Physical Education and Wellness Curriculum* (Alberta Education, 2022) and the older *Framework for Kindergarten to Grade 12 Wellness Education* (Alberta Government, 2009) are accessible under curriculum and publications, respectively. The connection between the revised *Physical Education and Wellness Curriculum* (launched 2022) and the *Working Together to Support Mental Health in Alberta Schools* (2017) is not made on *Physical Education and Wellness* (Alberta Education, 2022) website, nor the *Mental Health in Schools* website (Alberta Government, n.d.).

Conceptualization

The Alberta Ministry of Education website uses the terms “mental health” and “wellness.” The Ministry describes “mental health in schools” as efforts “to understand and promote positive mental health” (Alberta Government, 2017). The Public Health Agency of Canada’s description of mental health, “the capacity of each of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face” is quoted on the website (para.3) and in the *Working Together to Support Mental Health in Alberta Schools* resource (Alberta Government, 2017, p. 9) This document also cites the WHO’s definition of mental health, “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully and is able to contribute to his or her community,” to illustrate that “mental health is not the absence of, or the opposite of, mental illness” (p. 10).

Separately on the Ministry of Education website, the term “wellness” is used in connection with curriculum. The recently revised *Physical Education and Wellness Curriculum* describes wellness education as that which “promotes the health of individuals and communities and provides students with opportunities to learn about various aspects of well-being” (Alberta Education, 2022). This curriculum combines physical education and health/wellness education to address “eight dimensions: physical, social, emotional, spiritual, environmental, financial, intellectual and occupational.” This conceptualization is broader than that described in the earlier, and still available, *Framework for Kindergarten to Grade 12 Wellness Education* where wellness is defined as a “state of emotional, intellectual, physical, social, and spiritual well-being that enables students to reach their full potential in the school and community. Personal wellness occurs with a commitment to lifestyle choices based on health attitudes and actions” (Alberta Government, 2009, p.3).

³ [Department of Education](#)

The relationship between the terms *wellness* and *mental health* is described briefly on the *Physical Education and Wellness* (Alberta Education, 2022) website. Under the subsection *Feedback on Physical Education and Wellness* it states that in response to suggestions from educators and the public, the curriculum was revised to “strengthen the connection between physical activity and mental health, self regulation strategies and understanding, as well as naming and learning about feelings, emotions and sources of support.”

Saskatchewan⁴

Prominence

The Saskatchewan Ministry of Education home page (Government of Saskatchewan, n.d.a) does not contain links with any of the keywords. Filtering the government website search to education connects one to the website *Student Wellness and Well-being: Services for School Administrators* (Government of Saskatchewan, n.d.b). This webpage is a repository for information on health and safety topics, including comprehensive school health, nutrition, physical activity, gender and sexual diversity, bullying prevention, child abuse prevention, tobacco free schools, and supporting students with potentially life threatening medical conditions. An information link for comprehensive school health leads to the Joint Consortium for School Health (JCSH) website (Joint Consortium for School Health, 2024) where positive mental health is listed as a JCSH priority for 2020-2025. Keyword searches of the Saskatchewan Ministry of Education website did not surface any specific direction from the Ministry regarding school approaches to child and youth well-being and mental health. However, the *Wellness 10 Curriculum* (Saskatchewan Ministry of Education, 2012) is available, although it is not stated whether this course is required or optional for grade 10 students in Saskatchewan.

Conceptualization

None of the search terms for this study were defined on the Ministry of Education website pages; however, the *Wellness 10 Curriculum* (Saskatchewan Ministry of Education, 2012) identifies that wellness as comprised of five domains: physical, psychological, spiritual, social and environment. Further, wellness is a state [rather than a trait] of being in which a person’s awareness, understanding, and active decision-making capacity are aligned with a set of values and aspirations” (Goss, Cuddihy, & Brymeh, 2009). Notably, wellness generally refers to an individual’s functioning and is viewed as the umbrella overarching well-being (Miller & Foster, 2010) and is best illustrated as an ongoing process, a wellness journey, rather than an endpoint (Saskatchewan Ministry of Education, 2012, p. 10).

⁴ [Ministry of Education](#)

Manitoba⁵

Prominence

The Department of Education and Early Childhood Learning website (Government of Manitoba, n.d.-a) home page does not contain links with any of the keywords. Use of the search tool takes one to the *Mental Health in Schools* web page. This is one of twelve “updates and additional details” (Government of Manitoba, n.d.-b, para.3) on actions towards the *Student Engagement and Well-being* pillar, one of four in the action plan (Government of Manitoba, 2023). Elsewhere on the Department of Education website, under *Student Services* (Government of Manitoba, n.d.-c), the document *Mental Health Promotion in Schools* (Healthy Child Manitoba, n.d.) is provided, as well as links to other documents including the first edition of the JCSH Positive Mental Health Toolkit (Joint Consortium for School Health, n.d.). These two mental health web pages are separate and distinct from one another. Links are not made between these different pages, nor are the external links available on the *Student Services* page repeated on the *Mental Health in Schools* web page.

Conceptualization

None of the keywords in this study are defined on any of the webpages of the Department of Education and Early Childhood Learning. However, with the *Mental Health Promotion in Schools* (Healthy Child Manitoba, n.d.) document, the question ‘What is mental health?’ is answered in the following way:

The Public Health Agency of Canada’s defines mental health as “the capacity of each and all of us to feel, think, act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections, and personal dignity”.
(p. 3)

Separately, the newly released *Manitoba School Leadership Framework* (Manitoba Education and Early Childhood Learning, 2024) describes the role of school leaders to “promote mental health and well-being of students, staff and self” (p. 12). This leadership practice and behaviour is a subset within the leadership focus area “leading a safe, caring and inclusive school community” (p. 12). Although this document does not make specific reference to provincial government mental health promotion resources or definitions, well-being is described within as “the experience of health, happiness, and prosperity including having good mental health, high life satisfaction, a sense of meaning or purpose, and the ability to manage stress (Davies, 2019)” (Manitoba Education and Early Childhood Learning, 2024, p. 20) .

⁵ [Department of Education and Early Childhood Learning](#)

Ontario⁶

Prominence

The Ministry of Education home page (Government of Ontario, 2024b) does not contain any of the key words from the study. However, mental health resources are available on the *Helping to Create Healthy Schools* webpage (Government of Ontario, 2024a). Among the links provided is access to School Mental Health Ontario (SMH-ON), an intermediary organization funded by the Ontario government to serve as the Ministry of Education’s implementation partner to support Ontario school districts to enhance student mental health. The search function located on the Ministry of Education website searches the Government of Ontario website, generating more than two thousand results for keywords from this study. Refining the search to ‘school mental health’ surfaces the *Policy / Program Memorandum 169* (Government of Ontario, 2023), which provides direction to Ontario school boards. This provincial policy outlines expectations “for mental health promotion, the prevention of mental health issues and the early identification of mental health concerns through school-based intervention services” (para. 5).

Conceptualization

The Government of Ontario cites the Public Health Agency of Canada’s description of mental health in the *Policy / Program Memorandum 169* as

the state of an individual’s psychological and emotional well-being. It is a necessary resource for living a healthy life and a main factor in overall health. It does not mean the same thing as mental illness. However, poor mental health can lead to mental and physical illness. Good mental health allows you to feel, think and act in ways that help you to enjoy life and cope with its challenges (Government of Ontario, 2023, Appendix section).

Additionally, SMH-ON identifies the First Nations Mental Wellness Continuum Framework as a “particularly thoughtful and comprehensive understanding” of mental health which describes mental health and well-being as a “balance of the mental, physical, spiritual and emotional” which can be

enriched as individuals have purpose in their daily lives... hope for their future... a sense of belonging and connectedness within their families, to community, and to culture and... as sense of meaning and an understanding of how their lives and those of their families and communities are part of creation and a rich history (First Nations Mental Wellness Continuum Framework, as cited by School Mental Health Ontario, 2022, What is mental health? section).

⁶ [Ministry of Education](#)

Quebec⁷

Prominence

The Quebec Ministry of Education home page (Gouvernement du Québec, n.d.-a) does not contain links with any of the keywords. The website search tool searches all government departments, generating information not specific to schools, including the EKIP framework (Gouvernement du Québec, 2024). This resource is designed to guide integrated action among professionals in health, education, social services, and the community to promote the health and well-being in school age children. The framework addresses topics such as physical activity, healthy eating, sexuality, oral health, infections, sleep, tobacco, mental health, and others.

Conceptualization

The EKIP framework is intended to promote “the health, well-being and educational success of young people” (Gouvernement du Québec, n.d.-b, para.1). Although well-being is not defined in the framework, the *Mental health: Interventions in schools* (Gouvernement du Québec, n.d.-c) web page defines mental health as

a state of well-being in which a person can achieve self-fulfillment. Mental health refers to the ability to think and act in such a way as to enjoy life, meet various challenges, be productive and contribute to the community. Mental health is related to the ability to manage one’s thoughts, emotions, behaviours, and relationships with others (para. 1).

New Brunswick⁸

Prominence

The home page for the Department of Education and Early Child Development does not contain links with any of the keywords (Government of New Brunswick, n.d.a). Use of the search tool does not connect to department web pages with the keywords mental health or well-being; however, links to news releases are generated announcing improvements to the ‘Integrated Service Delivery (ISD) model’ for mental health supports in schools (Government of New Brunswick, 2017), and a mental health promotion campaign (Government of New Brunswick, 2016). Search with website internal search tool connects to a health department website page which provides information on the *Healthy Learners in Schools Program*, provided by regional health authorities, which “supports health promotion efforts that involve all areas of health which includes physical, emotional and social health” (Government of New Brunswick, n.d.b, para. 3).

⁷ [Ministere de l’Education](#)

⁸ [Department of Education and Early Child Development](#)

Conceptualization

The Department of Education and Early Childhood Development does not provide a description or definition of any of the search terms on its website.

Prince Edward Island⁹

Prominence

The Department of Education and Early Years has a link to ‘Student Well-Being Teams’ on its home page (Government of Prince Edward Island, n.d.). These teams “work in all Island public schools advising, consulting and providing direct service to children and youth who are struggling with mental, social and physical health issues” (Government of Prince Edward Island, 2017, para.1). Use of the website internal search tool links to government wide resources including the web page *Joint Consortium for School Health* and a link to the *Positive Mental Health Tool Kit* (Government of Prince Edward Island, 2016, para.3)

Conceptualization

The Department of Education and Early Years does not provide a description or definition of any of the search terms on its website.

Nova Scotia¹⁰

Prominence

No links with the search terms are available on the Department of Education and Early Childhood Development home page. Use of the website search tool generates links to news releases for all of government. More mental health and wellness resources for schools were announced (Government of Nova Scotia, 2023); however, website pages and links are not provided on the department website.

Conceptualization

The NS Department of Education and Early Childhood Development does not provide a description or definition of any of the search terms on its website.

⁹ [Department of Education and Early Years](#)

¹⁰ [Department of Education and Early Childhood Development](#)

Newfoundland and Labrador¹¹

Prominence

The home page for the Department of Education has the keyword *well-being* on a featured link (Government of Newfoundland and Labrador, n.d.-a). A well-being week in schools is highlighted as part of a province wide initiative “focused on building awareness and action to influence social factors on health outcomes and quality of life” (Government of Newfoundland and Labrador, n.d.-d). During well-being week, schools support student well-being in four focus areas: movement, inclusion and belonging, environment and relationships (Government of Newfoundland and Labrador, n.d.-c). The *Health and Community Services* website describes the healthy school planner. (Government of Newfoundland and Labrador, n.d.-b).

Conceptualization

Well-being is defined as “an overall positive quality of life where an individual’s needs are met across many aspects, including physical, mental, social, economic, and environmental” (Government of Newfoundland and Labrador, n.d.-c).

Yukon¹²

Prominence

The Department of Education does not use any of the search terms on the website home page. The website search tool generates items from all of government, which can be filtered for the Department of Education. No web pages with the search terms surfaced in education; however health promotion such as physical activity, nutrition and health programs in schools are described in a two page document *Why do we Need Health Promoting Schools in the Yukon?* (Government of Yukon, 2014).

Conceptualization

Definitions or descriptions of the search terms are not provided on the Department of Education website pages.

Northwest Territories¹³

Prominence

The Department of Education, Culture and Employment has a link on the home page regarding a school counselling program to support students’ and families’ mental health and wellness

¹¹ [Department of Education](#)

¹² [Department of Education](#)

¹³ [Education, Culture and Employment](#)

needs (Government of Northwest Territories, n.da). Use of the search tool navigates to *Student Support and Wellness* (Government of Northwest Territories, n.d.-d) where services, wellness data, and a framework *Fostering Resilience in Classrooms and Self-Regulation* (Government of Northwest Territories, n.db) are described.

Conceptualization

Descriptions or definitions of the search terms are not provided on the Education, Culture and Employment website pages.

Nunavut¹⁴

Prominence

The home page on the Education and Schools website (Government of Nunavut, n.d.-a) contains a link ‘Student Support and Wellness’ (Government of Nunavut, n.d.-b) which describes efforts to “establish a multi tiered, child focused, integrated service delivery approach to the provision of services” (para.1) to students. Use of the keywords in the search tool, which searches the entire government website, did not surface hits with the keywords related to schools.

Conceptualization

The search terms were not described defined on the Education and Schools web pages.

Comparative Findings by Research Question

Prominence

Location and Visibility

There is great variability across provinces and territories regarding the location and visibility of department of education approaches to well-being and mental health. In some provinces and territories, department prioritization of well-being and mental health is evident, with guidance provided within documents or web pages dedicated to well-being and mental health (BC, AB, MB, ON, PE, NU, NT). In other provinces, department-level communication is absent, fragmented, or provided through other government departments (SK, QC, NS, NB, NL, YT). Three provinces (YT, NB, NS) do not have a dedicated web page or links to school-based mental health and wellbeing resources. Four departments of education (PE, NL, NU, NT) used one of the keywords on the home page, of which three (NU, NT, and PE) were highlighting government announcements to improve mental health and counselling services in schools. The fourth, NL, highlighted a provincial effort to improve health and quality of life by building well-being awareness and action (Government of Newfoundland and Labrador, n.d.-d).

¹⁴ [Education and Schools](#)

Where departments have web pages dedicated to mental health, well-being, or wellness, these web pages are located under guidance for student safety (BC’s ERASE initiative), health and safety, (AB), health promotion (QC, ON,), or student support (PE, MB, NU, and NT). In Manitoba, in addition to resources being provided under student support, a mental health web page is also separately and distinctly located within layers of the K-12 Action Plan, under the heading *Engagement and Well-being* (Government of Manitoba, 2023). In Saskatchewan, topics are organized differently, with a web page titled *Student Wellness and Well-being* dedicated largely to the location of health promotion materials. In two of the three provinces where a department web page is not dedicated to any of the study’s search terms, news releases are available on the government website (NS, NB) announcing investments in mental health services.

Status or Role in Hierarchy of Department Communication

There is a significant variability in the status or role of department communication to school divisions and the public. The highest level of direction and support is provided by the Ministry of Ontario. This is the only Canadian province with provincial policy directing school districts regarding requirements for school mental health planning, with an intermediary organization, SMH-ON to support implementation. Two departments (BC, AB) have provincial publications, described as resources, specific to mental health and well-being in schools. In other provinces, departments’ communication specific to mental health and wellbeing is described within web pages (MB, NT, NU) or in government news releases (NS, NB).

Connections to Other Initiatives or Areas of Priority

Most provinces (NU and NT are exceptions) make connections to *health promotion*. Outside of Quebec, which designed its own integrated health promotion resources, all provinces which refer to health promotion refer to either comprehensive school health planning, the Positive Mental Health Toolkit or other resources provided by the JSCH (Joint Consortium for School Health, 2024). In its *Mental Health Promotion in Schools* document, Manitoba highlights how the comprehensive school health framework can be used to integrate mental health promotion in schools (Healthy Child Manitoba, n.d.). Departments also provide links to JCSH directly via education website pages (NS, MB, PE) or newsletters (SK). Or, when other government departments are partnered with education or primarily responsible for health promotion in schools, as with BC, AB, NB, NL, YT, the connection to the healthy school planner or the JCSH website is made through health or community services departments.

Some provinces (ON, BC, AB) make connections to targeted well-being and mental health resources as part of a *multi tiered system of support (MTSS)*. The MTSS framework includes a “continuum of services: mental health promotion, early identification, prevention and early intervention and service pathways / clinical support for more intensive health needs” (Government of Ontario, 2023). Classroom and school wide resources, professional development and supports are aimed at mental health promotion and prevention through enhanced curriculum, pedagogy, and social and physical environments. Emphasis is placed on culturally sensitive, identify affirming approaches and partnership with the community and home to enhance equity and effectiveness.

Within a MTSS framework (ON) or independently of such a framework, some provinces highlight *curriculum* in support of wellness, well-being, and mental health (SK, AB). Ontario has the

most comprehensive mental health curriculum, with lessons and resources are available for kindergarten to grade 12 (School Mental Health Ontario, 2023). The curriculum at grades 7 and 8 is mandated for all students. In Alberta, the revised K-6 *Physical Education and Wellness* curriculum (Alberta Education, 2022) was recently updated to place emphasis on mental health. In Saskatchewan, the *Wellness* curriculum (Saskatchewan Ministry of Education, 2012) is at the grade 10 level.

Services aimed at students who require additional well-being and mental health support are highlighted by a number of departments (BC, ON, NS, NB, NU, and NT). Additional guidance teachers and/ or mental health professionals added to schools are conceived of as part of a MTSS continuum of care (BC, ON) or announced as necessary enhancements to available school services (NS, NB, NU, NT).

Evidenced based practices and data collection regarding mental health and well-being are also a stated area of priority in some provinces. School Mental Health Ontario outlines an *Innovation and Scale-Up Lab* dedicated to introducing “mental health programming that is evidenced based and implementation-sensitive” (School Mental Health Ontario, 2020, para.2). Prince Edward Island monitors students’ health, including mental health, with School Health Action Planning and Evaluation System (SHAPES), (Government of Prince Edward Island, 2016b). The Northwest Territories shares wellness data (Early Years and Middle Years Development Index) on the website (Government of Northwest Territories, n.d-c).

Conceptualization

Terms Used

The terms vary in their use across provincial departments of education. The term *mental health* is the most consistently used term among provincial departments of education, with five provinces (BC, AB, MB, ON and NT) employing it in a title for a web page. Additionally, while the terms *well-being* and *wellness* also serve as titles for web pages in other provinces (SK, QC, PE, NU, NT), these pages are sometimes hosted by education partners in health or community development (QC, PE). Across departments of education, the terms *well-being* and *wellness* are frequently used interchangeably to describe broad concepts, often in association with curriculum (SK, AB), health promotion (SK, NL, QC) or student engagement (MB). Interestingly, these terms are also combined with the concept of mental health, such as *mental well-being*, *mental wellness* or the phrase *mental well-being or positive mental health* (BC).

How the Terms are Defined

Of the provinces who used the search terms on the department of education or linked websites, (NS, NB, YT did not), most provided definitions for the terms used (BC, AB, SK, MB, ON, QC, NL), while others did not (PE, NU, NT). The Public Health Agency of Canada (PHAC) definition of mental health is quoted most often (AB, MB and ON). Additionally, the WHO’s definition of mental health is also used (AB). Other provinces, while not directly quoting the PHAC, offer descriptions of mental health which are closely related (BC, QC). While the definitions of well-being (NL) and wellness (SK) differ across provinces, the government of Saskatchewan cites Miller and

Foster (2010), suggesting that wellness is an “umbrella overarching well-being” (Saskatchewan Ministry of Education, 2012).

Defining the Relationship Between Multiple Terms

Where multiple terms are used, departments generally do not explain the relationship between the terms *mental health*, *well-being* and *wellness*. However, based on the hierarchy of how information is laid out in websites, a common approach that the study found was to consider mental health as an aspect of well-being or wellness. The exception to this finding is articulated by SMH-ON on the website *About Student Mental Health in Ontario*. Here mental health is described as a “positive state of wellness and flourishing.” Further, and nuanced understanding of well-being and mental health is provided through the First Nations Mental Wellness Continuum Framework as follows:

mental health and well-being is [*sic*] inspired through a “balance of the mental, physical, spiritual and emotional” and that everyone, even the most vulnerable or mentally ill, has an opportunity to live as a whole and healthy individual.

Balance can be “enriched as individuals have purpose in their daily lives ... hope for their future ... a sense of belonging and connectedness within their families, to community, and to culture ... a sense of meaning and understanding of how their lives and those of their families and communities are part of creation and a rich history (p. iv) (School Mental Health Ontario, 2022).

Discussion

The findings suggest a dramatically varied landscape of approaches by departments of education to well-being and mental health across Canadian provinces and territories. Significant differences exist across every research question. The sections below explore an analysis of the findings and their implications by area of inquiry.

Analysis of Findings

Prominence

The prioritization of mental health and well-being – as suggested through the prominence criterion used in this study – varies significantly among provinces and territories. While most provinces make some reference to well-being or mental health in educational settings, there are notable discrepancies in the visibility, integration, and coherence of the public communication through department websites. The visibility of well-being and mental health as a topic varies on a continuum from being highlighted as a feature on the department of education home page, to being completely absent from any web page at all. Most provinces fall somewhere in between these two extremes. Typically, only limited information is provided on department web pages. This information is sometimes buried within layers of the education website or hosted on other department sites or government communication channels. The ways in which the information provided by other departments or agencies is integrated into school approaches is unclear, as the

material provided often is identified as “resources,” either for educators or families. Occasionally, pages within department of education websites which refer to mental health and well-being appear not to be related to one another, suggesting a lack of coherence and siloed approaches from within government units.

Some regions demonstrate clear efforts to highlight and integrate well-being and mental health through dedicated publications and resources. Ontario stands out for its longstanding and significant commitment to school mental health, which is reflected in its comprehensive policy framework, strong infrastructure for implementation, and richness of resources and curriculum. Among other provinces, publicly available communication from departments is largely focused on the provision of resources, either for use as classroom materials, or to indicated plans for additional services. Some provinces have recently developed (within the last eight years) specific resource and strategy documents referring to MTSS, suggesting a trend of increased attention to comprehensive approaches to student well-being and mental health. In provinces where provincial level resources for enhancing well-being and mental health are not specifically developed, health promotion curriculum, planning documents and other resources from the Joint Consortium for School Health are utilized to support positive student development. In summary, outside of Ontario, there is a noticeable absence of coherent direction, guidance and support from government to school divisions and schools concerning comprehensive approaches to well-being and mental health. In most cases, the communication that is provided is limited in scope, unspecific or altogether absent.

Moreover, the manner and location in which departments disseminate pertinent information on their website pages can offer insights into their prioritization and conceptualization of well-being and mental health. Most often, well-being and mental health are addressed primarily as components of student support. However, in certain provinces, they are categorized within health promotion or fall within the purview of health and safety. Ontario distinguishes itself through clear, bold statements underscoring the well-being and mental health as fundamental to the core purpose of schools (School Mental Health Ontario, 2022a).

Conceptualization

The conceptualization of well-being, wellness and mental health varies across provinces. The term *mental health* is the most consistently employed; however, it is often used in conjunction with the terms *wellness* and *well-being*, which are often used interchangeably. Although these concepts are related, the manner in which the terms are used and substituted for one another suggests a lack of conceptual clarity. Notwithstanding, there is a general understanding that mental health is component of overall well-being or wellness. A holistic perspective is offered by First Nations’ Mental Wellness Continuum framework, which emphasizes a balance and interconnectedness of mental, physical, spiritual, and emotional aspects of well-being.

The definitions provided by departments are varied. Some provinces referenced authoritative sources such as Public Health Agency of Canada (quoted most often) or the World Health Organization (often as a secondary definition). Still others provided their own definition, combining elements of the PHAC and WHO definitions. Yet, it was not uncommon among departments to not to provide a definition of the terms at all.

Importance of Findings

Prominence

Based on the criteria used in this study, the findings suggest that for most departments of education across Canada, student well-being and mental health is not at the forefront of attention. Department use of policy, curriculum, MTSS, evidence-based practices, and data collection for efforts at ongoing improvement, in keeping with recommendations from global research, is limited. Outside of Ontario, strong collaboration with other government departments or related organizations is not evident from website information. Where other departments are relied upon to provide resources or support to schools for health promotion, ongoing department of education engagement is unstated. The level of prominence given by departments of education to student well-being and mental health efforts is disturbingly low given the ample, longstanding national research evidence identifying unmet youth well-being and mental health needs.

Conceptualization

The lack of clear conceptualizations regarding well-being and mental health presents a potential barrier to effective communication both within and between provinces. While *mental health* appears to be the prevailing term utilized, departments of education may adopt this term due to clear definitions provided by recognized and authoritative sources. Notwithstanding these definitions, the conceptualization of mental health, particularly concerning promotion, sometimes encompasses such a broad scope that it overlaps with understandings of *well-being*. Adding to the complexity, the terms *well-being* and *wellness* are utilized interchangeably as umbrella terms to encompass an array of dimensions with ‘murky boundaries and definitions’ (Nielsen & Amundrud, 2023), some of which are considered enablers for mental health. Findings have implications for information sharing across provinces so that department of education can build on each other’s knowledge and approaches. Establishing national conceptualizations of these terms and elucidating their interconnections could be beneficial in fostering communication within provinces and departments of education, thereby enhancing ongoing learning and practices thereby enhancing practices of continuous improvement aimed at well-being and mental health.

Conclusion

The research findings underscore a markedly diverse landscape of departmental approaches to well-being and mental health across Canadian provinces and territories. Significant disparities exist across all research questions, indicating a lack of uniformity across departments’ website communication regarding the prominence and conceptualization of student well-being and mental health. While certain regions demonstrate clear efforts to prioritize and integrate mental health and well-being through dedicated publications and resources, others exhibit fragmented or absent communication at the departmental level. It is worth noting that communication on departments’ websites may not accurately or completely convey the prominence and conceptualization of student well-being and mental health that occurs at the school and division/district level. Further, it is

possible that communication on government websites may not capture the depth or breadth of department attention and action in this area.

Notwithstanding, if silence can be considered “an act of discounting” (Ott et al., 2017, p. 9), this study suggests that student well-being and mental health is largely discounted by departments of education across the nation. This finding is consistent with previous research, which has described limited policy, fragmented approaches and a patchwork of efforts across Canada (Alimi et al., 2021; Kutcher et al., 2010, 2010; Manion et al., 2013). It appears that youth well-being and mental health continues to be the “orphan of the orphan” (Mulvale et al., 2015, p. 112) in government attention. In contrast to the Canadian context, the United States has demonstrated a marked commitment to addressing youth well-being and mental health. In response to the pandemic, the United States has allocated billions of dollars to provide a continuum of supports aimed at youth education and well-being outcomes (Hoover, 2024). Furthermore, the United States, where the prevalence of youth mental health problems resembles that of Canada, has officially recognized youth mental health as a pressing national crisis (Crocker et al., 2023).

A robust dialogue at both provincial/territorial and national levels is imperative to mobilize action which clarifies conceptualizations of well-being and mental health and highlights their centrality in the purpose of schooling. Ontario’s comprehensive approach provides a robust model for establishing implementation infrastructure that integrates evidenced-based practices, facilitates ongoing learning, and offers support for continuous improvement. If we are to effectively turn the tide for the well-being of the next generation of Canadians, it is essential that departments of education assume a more prominent role in prioritizing, conceptualizing, and supporting the well-being and mental health of children and youth.

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