

Mental Health & High School Curriculum

A freely accessible curriculum for building students' and teachers' mental health literacy

Aims and Objectives

The *Mental Health and High School Curriculum Guide* is a classroom-ready resource designed to increase mental health literacy among both students and teachers. This model prioritizes the "teacher-led" approach, providing educators with the necessary tools and knowledge to become confident facilitators of mental health talks.

Implementation highlights

- **Core concepts:** The curriculum is centered on four core components of mental health literacy:
 - a. Understanding how to optimize and maintain good mental health;
 - b. Understanding mental disorders and their treatments;
 - c. Decreasing stigma;
 - d. Enhancing help-seeking efficacy
- **The sessions:** the program consists of six distinct modules, each requiring 1-2 hrs of classroom time. Each module is supported by a step-by-step lesson plan, including preparatory background for teachers, animated videos, collaborative group activities, and guided classroom discussions designed to move beyond theory into practical self-care and peer-support skills.
- **The training:** the Guide can be integrated into existing curricula through teacher self-training using provided materials, or through a formal "train-the-trainer" model.
- **For primary schools:** the resource has been updated and adapted to a younger age target: *Elementary Mental Health Literacy Resource*

At a glance



Univ. Prevention
Promotion



Target audience

- Adolescents (13-15)
- Teachers
- Parents



Delivery settings
Schools



Objectives

- Increase mental health literacy
- Decrease stigma
- Improve help-seeking
- Empower educators



Costs

- The resources are available online for free
- Train the trainer model: €16,000 (may vary depending on the location)



Professionals involved

- Teachers
- Educators

Leading organization:

- Recovery Alberta
- Canadian mental health organization



Countries

Originated in Canada, implemented in 12 countries worldwide (5 European countries)



How can this practice be implemented?

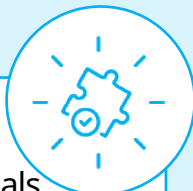
- The Guide and more resources are freely available online
- Translation and cultural adaptation of the resource are needed, and this can be done in collaboration with the responsible organizations
- The guide can be mapped against the host country's national curriculum to ensure it is taught during school hours rather than as an optional add-on activity

Get started

- Find the full Guide [here](#), freely available and translated in 7 languages
- Find a new guide for elementary schools [here](#)
- Read [evaluations](#) and [publications](#) on mental health literacy programs
- More resources are freely accessible [here](#)

Key takeaways

- ▶ Freely available manuals (multiple languages)
- ▶ Both students and teachers improve their mental health literacy



Supporting policies

Success is often tied to national policies that mandate mental health education in schools, providing the administrative framework for teachers to dedicate classroom time to programme modules.

- **England:** The Department for Education (DfE) funded the [Education for Wellbeing](#) programme, a large-scale research initiative involving two randomised controlled trials, under which The Guide was selected for evaluation alongside Youth Aware of Mental Health (YAM) in the AWARE multi-school cluster randomised controlled trial in English secondary schools (4)



What makes this a good practice?

key features

- ▶ Evidence-based MHFA model
- ▶ Empowers youth to recognize early signs of distress
- ▶ Adaptation of a globally scalable programme implemented in multiple countries

Impact: does it work?

Effectiveness

Teen MHFA programmes improve mental health literacy, increase help-seeking behaviours, and reduce stigma among adolescents (2). Results from the French pilot phase conducted on a panel of 18 classes and 506 students showed that 71% of students reported feeling more confident in helping a peer experiencing mental distress and 76% reported that the skills learned would be useful in the future (5).

Efficiency

The programme uses short structured sessions integrated into school schedules and a train-the-trainer model that enables scalable implementation. An analysis on costs and benefits is not available yet.

Evidence base

PSSM France's teen programmes are grounded in the internationally recognised MHFA model, supported by a strong scientific evidence base including two randomised controlled trials (2,6,7). For the French context, PSSM France has embedded evaluation into its work from the outset: the pilot study conducted on a panel of 18 classes and 506 students revealed promising preliminary results (5).

Reach: who can benefit?

Equity and access

Delivered in school settings, the programme promotes broad and equitable access for adolescents from diverse backgrounds

Transferability and scalability

The programme has been implemented in multiple countries and settings, with standardised training materials and implementation procedures supporting adaptation and replication across diverse contexts.

Integration: keeping it going and working across sectors

Sustainability

Teen MHFA programmes have identified institutional support and school-based integration as key facilitators of long-term sustainability, suggesting a supportive foundation for scale-up beyond the French pilot phase (1). This train-the-trainer model builds local capacity and supports long-term sustainability. PSSM Ados is currently financed by Agence Régionale de la Santé (ARS) in France, but long-term funding is still to be secured.

Intersectorality

The programme operates across the education and mental health sectors, and aims to support collaboration between schools, youth settings, and mental health professionals.

Engagement and innovation: listening to young people and adapting over time

Youth participation

The programme empowers adolescents to support their peers and actively participate in promoting mental wellbeing within their communities.

Intergenerational / life-course approach

PSSM Ados comes in two age-adapted versions; the programme targets adolescents while strengthening links with trained adults in their environment.

Research priorities and innovation

The programme contributes to preventive mental health interventions and empowers non-specialist actors (young people) to recognize and respond to early signs of mental distress. Additionally, it trains non-specialist workers in mental health ensuring that 10% of adults in the schools participating in PSSM Ados have been trained as mental health first aiders for youth.

References and additional tools to favour translation

1. Sustained Improvements in Students' and Teachers' Mental Health Literacy with use of a Mental Health Curriculum in Canadian Schools | McLuckie A., Kutcher S., Wei Y., Weaver C. Journal of School Mental Health 12/31/2014.
2. Impact of a Mental Health Curriculum for High School Students on Knowledge and Stigma Among High School Students: A Randomized Controlled Trial | Milin R., Kutcher S., Lewis S.P., Walker S., Wei Y., Ferrill N., & Armstrong M.A. Journal of the American Academy of Child and Adolescent Psychiatry 05/01/2016.
3. Freţian, A. M., Kirchhoff, S., Bauer, U., & Okan, O. (2023). The effects of an adapted mental health literacy curriculum for secondary school students in Germany on mental health knowledge and help-seeking efficacy: results of a quasi-experimental pre-post evaluation study. Frontiers in Public Health, 11. <https://doi.org/10.3389/fpubh.2023.1219925>
4. Hayes D, Moore A, Stapley E, et al School-based intervention study examining approaches for well-being and mental health literacy of pupils in Year 9 in England: study protocol for a multischool, parallel group cluster randomised controlled trial (AWARE) BMJ Open 2019;9:e029044. doi: 10.1136/bmjopen-2019-029044