

A Dual Pathway Approach to Mental Health Promotion



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New Perspectives on Wellbeing

Mental health programs and services within the school, community and health settings have often focused on addressing concerns related to the psychological well-being of children and youth through *the identification of risk-need factors, delivery of timely intervention and support services, and promotional efforts aimed at reducing potential stigma associated with mental health conditions.*

Traditionally, such approaches have emphasized ***the problems or challenges*** associated with existing or emerging mental health-related concerns in children and youth, and the approaches or interventions needed to remediate or address areas of risk and need.

Recent better practice research across health and educational domains assert the importance of ***moving beyond a problem-focused approach to embrace a more positive view of mental health, people, their strengths and potential.***

Dual Pathway to Mental Health Promotion

- The shift toward a “dual pathway” approach to enhancing mental health involves the recognition that students’ state of psychological well-being is not only influenced by the presence or absence of problems and risk need concerns, but also is impacted by the existence of strength-focused factors present within individuals and their social settings that contribute to positive growth and development.
- Current literature supports the view of a dual pathway model for enhancing mental health - one pathway with a focus on addressing areas of mental health concern, and the other with a focus on promoting environmental factors or practices that contribute to an enhanced sense of wellbeing and functioning. The term *Positive Mental Health* has been used to describe this second pathway.

Positive Mental Health Pathway

Definitions of Positive Mental Health in the literature highlight various facets of enhanced wellbeing in individuals and their environments, including:

- The promotion of positive emotions
- Increased life satisfaction
- Positive psychological coping and adaptation
- The presence of social emotional competencies
- Evidence of positive relationships and prosocial attitudes

Other definitions of Positive Mental Health include concepts such as *flourishing*, *thriving* and *enhanced hope*.

The **Public Health Agency of Canada** describes Positive Mental Health as “the capacity of each and all of us to feel, think, and 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”.

Enhancement of Positive Qualities

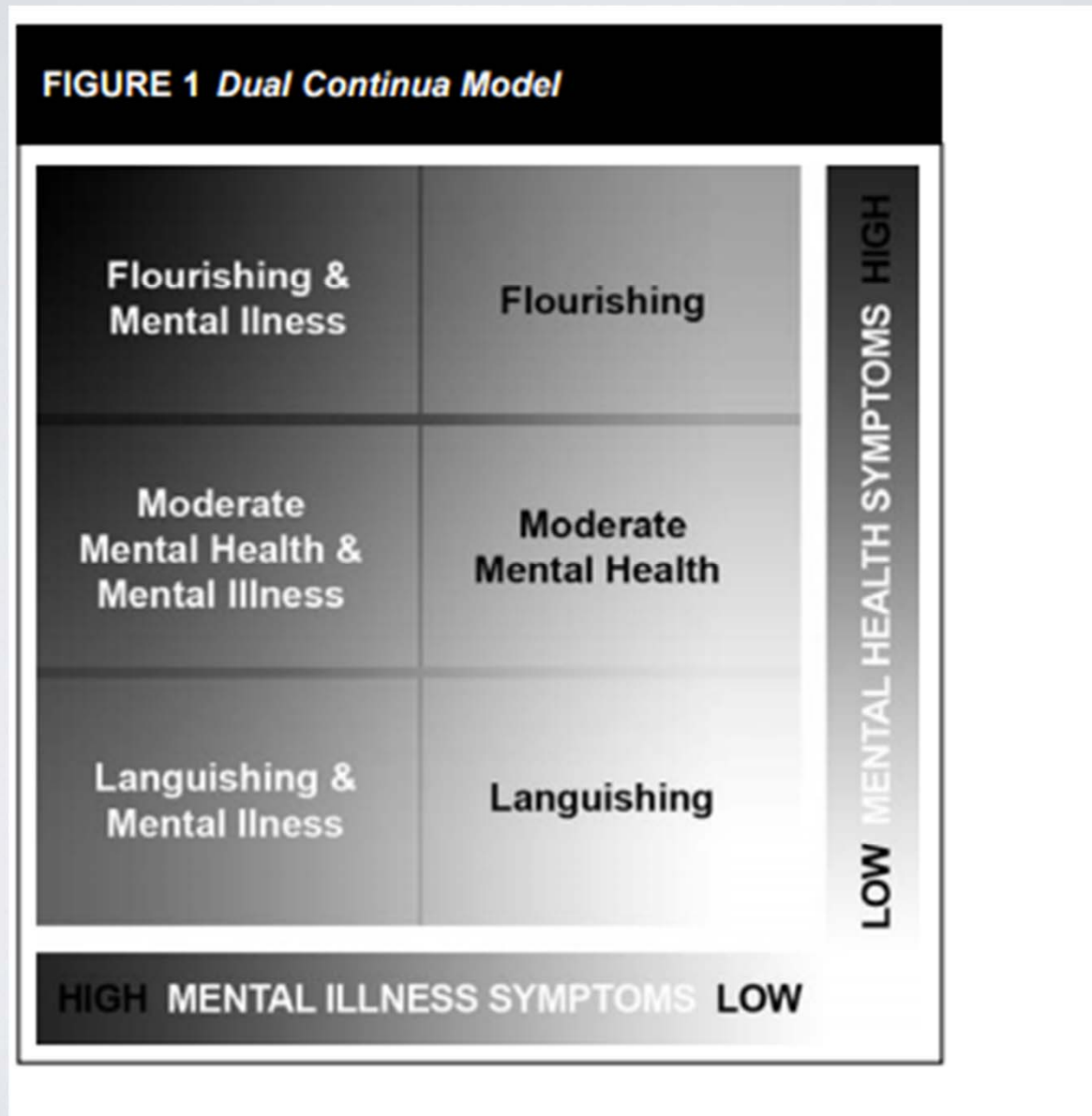
The emergence of **Positive Mental Health perspectives** has shifted the focus of educators and health professionals “from a preoccupation with repairing weakness to enhancement of positive qualities”.⁴ Such qualities or factors may include the investigation or application of:

- Positive personal traits
- Interests and passions
- Gifts and talents
- Positive present or past experiences
- Positive and supportive relationships
- Initiatives, relationship practices, or environmental conditions that contribute to increased life satisfaction, positive emotions, and adaptation

In addition, the promotion of positive mental health perspectives has increased emphasis on prevention practices and ecological approaches.

This in turn has reinforced the importance of universal and whole system strategies for supporting the social development of children, youth and families, including those with and without identified mental health concerns.

Dual Pathway Diagram



PMH Pathway Assumptions I

- Children and youth have inner strengths and gifts that support their capacity to initiate, guide, and sustain positive life directions (Hamilton & Hamilton, 2004; Losier and Morrison, 2007).
- Child and youth engagement and empowerment are critical considerations for facilitating positive development or change (CSPH, 2002; Deci & Ryan, 2007).

FOCUS ON STRENGTHS

Deficit Based

Language

...

⊙ Fix

⊙

Limitation

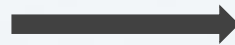
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Weakness

⊙ Problem

⊙ Insist

⊙ Past



Strength Based

Language...

⊙ Empower

⊙ Possibility

⊙ Strength

⊙ Solution

⊙ Invite

⊙ Future

⊙ Facilitate

PMH Pathway Assumptions II

- Social contexts and networks provide important resources and influences that have the capacity to contribute to and enhance psychological well-being (Losier & Morrison, 2007; Sheridan, Warnes, Cowan, Schemm & Clarke, 2004)
- Children's and youths' relationships with adults and peers that contribute to psychological well-being are characterized by interactions that convey genuineness, empathy, unconditional caring and affirmation (Brendtro, 2003)

SCHOOLS AS A CRITICAL SETTING FOR PMH

- Schools provide key opportunities for promoting the delivery of activities and comprehensive initiatives related to positive mental health.
- As children move into their early and later teen years, schools may play an even greater role than the home context in influencing youth, given the powerful influence that teacher support and peer networks have within the educational setting.

SCHOOLS AS A CRITICAL SETTING FOR PMH

- Beyond promoting positive mental health for students, school culture is also impacted by the workplace environment.
- The mental fitness and resiliency of educators, administrators and support staff must be considered as part of any positive mental health initiative.

STRATEGY GOALS



PARTICIPANTS



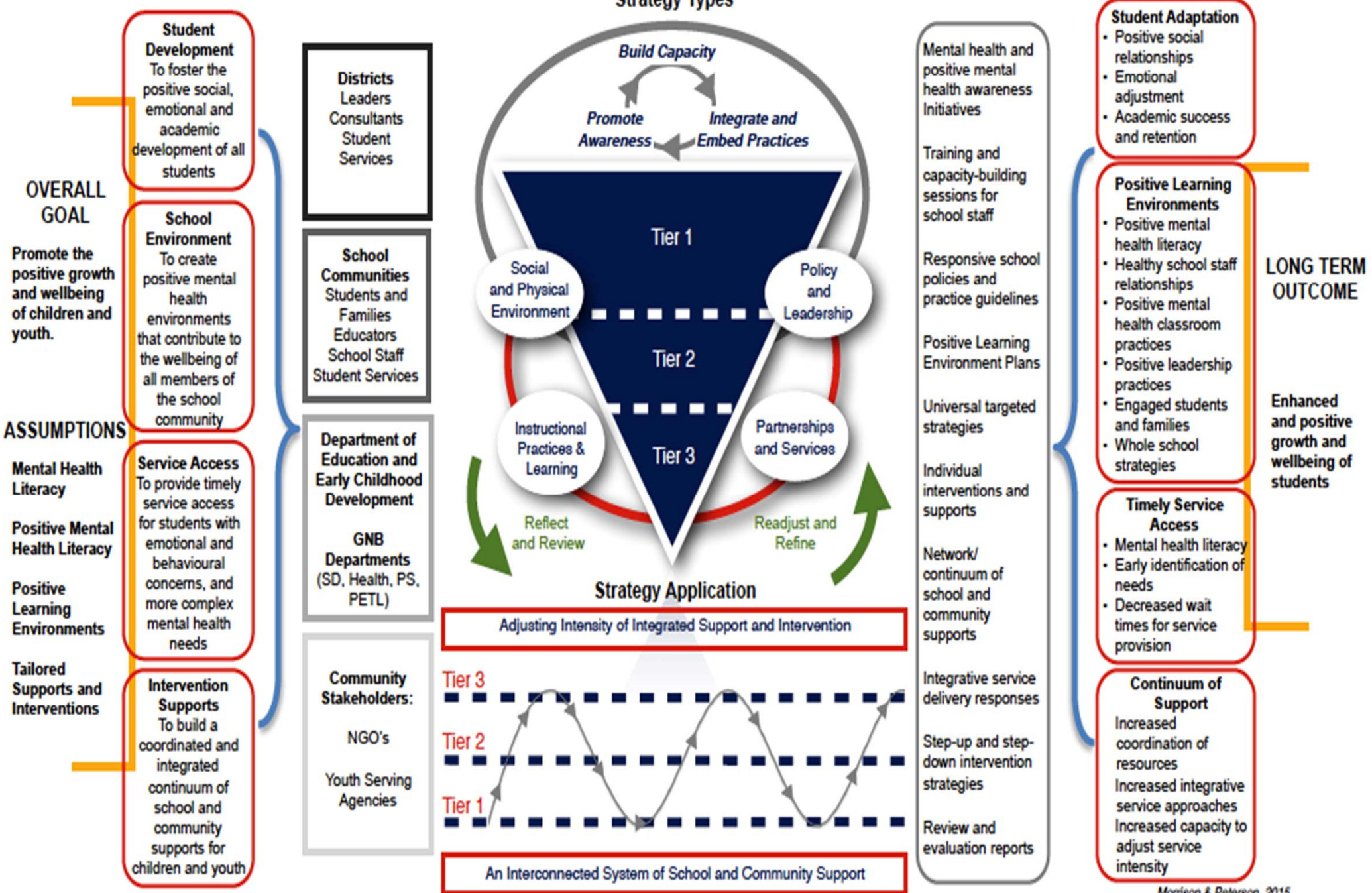
STRATEGIC ACTIONS



OUTPUTS



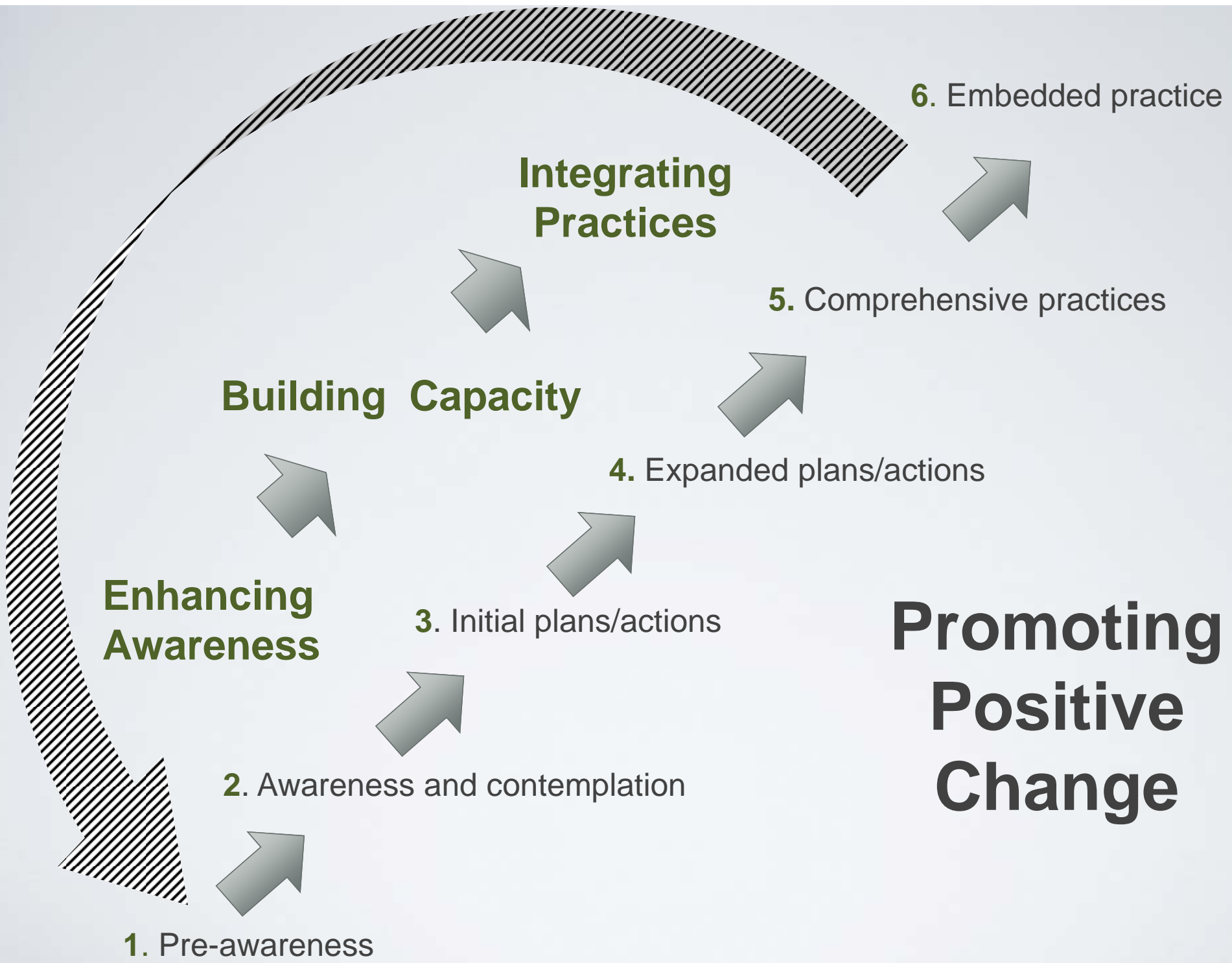
STRATEGY OUTCOMES



PSYCHOLOGICAL NEEDS

Deci and Ryan (2007) assert that our interactions with others may either impede or facilitate the fulfillment of core psychological needs. These needs include:

- **Relatedness Needs:** Welcomed, Included, Connected
- **Competency Needs:** Recognized/Active with Strengths, Confident
- **Autonomy-Support:** Engaged, Empowered, Self-determined



Adapted from Prochaska, J.O. & DiClemente, C.C. (1983). Stages and processes of self-change of smoking: Toward an integrative model of change. *Journal of Consultative Clinical Psychology*, 51(3):390-5.