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FOREWORD

Dear readers,

Welcome to the third School-Based Family Counseling (SBFC) webinar proceedings. The consequences of two major crises influenced the 2022 SBFC webinar: The COVID-19 pandemic and the war in Ukraine. In times of crisis and stress, one of the social institutions that plays an important role in assisting children to cope with disasters and trauma is school. These crises have highlighted the expanding significance of mental health services in schools, the importance of families, and the necessity for collaboration between family, school, and community. The 2022 articles proceedings highlighted challenges and achievements for SBFC practitioners in helping school communities to cope with trauma.

The articles emphasize the importance of empowering children, teachers, school staff and family with coping strategies to help them be resilient, adaptive, and ready for an unpredictable future. The writers also shed light on the importance of cultural sensitivity in the context of immigrants and refugees, as well as the special demands of non-Western people's psychiatric care. Evidence-based experiences and interventions described allow us to reflect on the role of the SBFC practitioner in creating partnership between the school, the family, the community and mental health providers enhancing resilience, the sense of hope and compassion in situations of trauma, and in empowering school community actors in their role as agent of change.

We would like to thank the writers for sharing their research, experiences, and knowledge with us. The proceedings is peer reviewed, we thank the reviewers for their time and expertise. We hope our readers enjoy the fruitful and informative proceedings of the 2022 webinar.

Editors,

Nurit Kaplan Toren

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Social and Emotional Skills in New Ukrainian School: Continuing Journey of Educational Transformation

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ABSTRACT

EdCamp Ukraine has initiated research that is striving to educate the heart and mind of Ukrainian students. Through coordinated efforts occurring at multiple levels, EdCamp Ukraine has forged a unique partnership with Emory University's Center for Contemplative Science and Compassion-based Ethics. Through this partnership, EdCamp Ukraine has implemented Social, Emotional, and Ethical Learning (SEE Learning) across Ukraine. Given the challenges associated with war, that effort has been hindered. SEE Learning is undergoing validation through both quasi-experimental and qualitative research on an international scale and in the context of Ukraine. The adaptation of SEE Learning in the Ukrainian context enables it to meet the short-term and long-term needs of students by providing tools and resources that promote trauma and resilience-informed care, attention training and awareness, ethical and compassionate discernment, and the capacity to engage in systems thinking. SEE Learning is creating the basis for Ukraine to fulfill its vision of transformational learning as outlined by the United Nations, and within the Ukrainian Education Policy and the New Ukrainian School reform in particular. Through international support, grassroots efforts, and the establishment of collaboration, it will be possible to rebuild Ukraine and to support the development of future citizens who embody resilience, awareness, and compassion.

INTRODUCTION

In 2017, Ukraine made a strong commitment to education reform with the adoption of its "New Education Law." According to Lilia Hrynevych, Ukraine's Minister of Education in 2016-2019, this law was intended to become "the key instrument for modernizing Ukraine's education system and bringing it up to EU standards" (as cited in Tulup, 2017, para. 2). In 2015, EdCamp Ukraine NGO was formed to support innovation and the implementation of best practices in education across the nation. For the past eight years, EdCamp Ukraine has created a network of around 40,000 teachers. EdCamp Ukraine works with individual teachers, schools, and communities through national policy advocacy to foster transformation at all levels of the national education system. Through a process-based approach to change, EdCamp Ukraine embodies the principles of responsibility, collaboration, openness, growth, self-care, and joy through its efforts to effect change and promote sustained transformation at all levels

of the education system. Due to its role as a driver of education reform, EdCamp Ukraine has the capacity to lead Ukraine during this time of crisis and through the post-war era. The New Education Law adopted in 2017 must be reimagined to support the rebuilding of the education system within Ukraine in a manner that accommodates the deep scars that have been created as a result of three years of education disruption that are attributable to the Covid-19 pandemic and the invasion of Ukraine by russia. According to the United Nations, "transforming education means empowering learners with knowledge, skills, values, and attitudes to be resilient, adaptable, and prepared for the uncertain future while contributing to human and planetary well-being and sustainable development" (Thematic action tracks, Action Track 2: Learning and skills for life, work and sustainable development, para. 2).

Social Emotional Learning Needs in Ukraine

Ukrainian teachers and parents recognized the need to develop social and emotional skills in their children long before the challenges of the war in Ukraine and the COVID-19 pandemic arose. This need had been articulated into national education legislation including the 2017 Law on Education, the 2019 Law on General Secondary Education, the 2018 State Standard for Elementary Education, the 2020 State Standard for General Secondary Education, and the Professional Standards for the Secondary school teacher of elementary classes, Secondary school teacher, and Elementary school teacher (junior specialist) approved in 2020.

The national education legislation lays the foundation for efficient introduction of social and emotional learning (SEL) into the Ukrainian education system. The new standards for elementary and basic schooling require learning outcomes include skills and competencies that mirror those established with the "The European Framework for Personal, Social, and Learning to Learn" (European Commission, Joint Research Centre, 2020). This framework was developed to provide consistent tools to aid the implementation of social and emotional learning throughout Europe. The New Ukrainian School reform or NUS (Hrynevych et al., 2016), which informed the 2017 Law on Education, stresses the importance of transforming the school from being the school of only knowledge to the school of competencies. Learning should result in development of cross-cutting capabilities, i.e., soft skills that are shaped with the help of social, emotional, and ethical learning.

EdCamp Ukraine lobbied and participated in developing the new legislation and served as an ambassador for promoting the socio-emotional paradigm. In 2019, EdCamp Ukraine introduced Ukrainian students and teachers to a global program that builds upon best practices in social-emotional learning called Social, Emotional, and Ethical Learning – SEE Learning (Ozawa-de Silva & Frazier, 2020). SEE Learning is a framework and curriculum that promotes resilience and prosocial responses through the development of inner resources and competencies that foster personal wellbeing and elicit compassionate responses on the part of students and teachers. This document provides a trauma-informed roadmap of how education within Ukraine can foster competencies that foster awareness, resilience, and compassion within students and teachers. For the past three years, thousands of teachers and countless more Ukrainian students have received training in SEE Learning and 26 schools have participated in the national pilot of developing soft skills in students through implementing SEE Learning.

In 2021, a feasibility study titled "Social and emotional learning in Ukraine: Today and the Future" (Hrynevych et al., 2021) was conducted, helping to assess the level of educators' readiness and acceptance for SEL. The study included 3,657 participants (3,237 educators and 420 school principals). Schools were selected from a representative sample from all

government-controlled areas of Ukraine, — 409 schools. The group of schools along the demarcation line of the Donetsk and Luhansk regions of Ukraine included 20 schools. Within the school sample, 26 schools are SEE Learning pilot schools where EdCamp Ukraine evaluates teachers' attitudes, awareness, and related needs/issues with both SEE Learning and SEL in general.

The survey findings showed that teachers were aware how important social and emotional skills are for students but noted they lack methodology and learning materials. Educators were optimistic about their awareness what SEL is, but much more modest about their competencies in it (see Figure 1). Both criteria were higher with educators from schools that participate in the SEE Learning pilot led by EdCamp Ukraine (detailed further in the paper). When asked about their role in developing social and emotional skills in students, half of educators from the study never said they were fully competent in doing that. The skills that are harder to teach include "the skills of self-control in difficult situations," an extremely important competency for today.

The chart provided below titled "How competent do you think you are in social emotional learning" demonstrates that the majority of educators feel very confident, confident, or somewhat confident in their knowledge and ability to deliver SEL to students. When asked if they would like to implement SEL in their respective schools, the school leaders resoundingly stated that they would like to implement SEL for their students and community. One factor that contributes to the interest and desire to implement SEL and SEE Learning is the trauma students and teachers have experienced over the past three years. Without providing tools and resources to navigate trauma or distress, there will be lasting implications for the future of Ukraine and its capacity to rebuild in the post-war era.
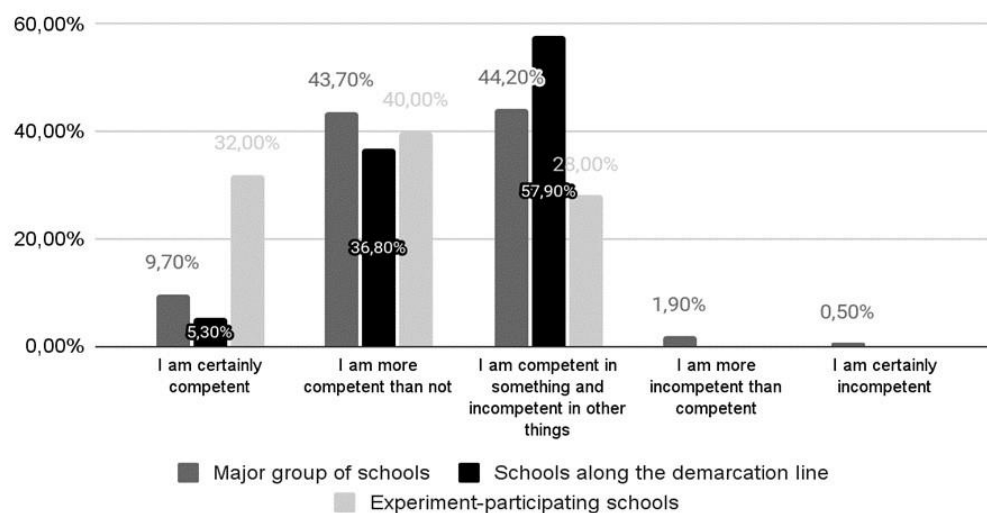

Figure 1. Beliefs about Competency in Social and Emotional Learning

Note. Responses [in percentage] to the question "How competent do you think you are in social and emotional learning?" for various categories of study participants (Hrynevych et al., 2021, p. 312).

The feasibility study findings show that educators feel some inability to efficiently develop these skills in their students. The reasons include, among other, the lack of relevant components in higher pedagogical education and lack of professional development programs

that include those skills. Over the past 12 months, more than half of educators (55 %) never participated in a professional development program that would include at least some SEL modules. At the same time, high level of motivation to get trained in these skills is encouraging; for example, 74.2 % of teachers from EdCamp Ukraine's SEE Learning pilot schools said they would do that, as well as 71.7 % of social pedagogues, and 70.5 % of school counselors. The latter insisted the most on the importance of social and emotional skills.

Among school principals from institutions that participate in the EdCamp Ukraine SEE Learning experiment, 92 % believe that development of social, emotional, and ethical competencies with teachers are very much needed and important (see Figure 2). Similar trend is observed among teachers: 59.1 % of educators from experiment-participating schools would like to introduce SEL systemically in their teaching.

25.4 % of study participants from schools along the demarcation line, who had had personal experience of the war, said in spring 2021 that residents from their regions, i.e., the people who had personally experienced the war, are those who need SEL the most (this should be paid close attention now, when entire Ukraine is experiencing the large-scale war in person)
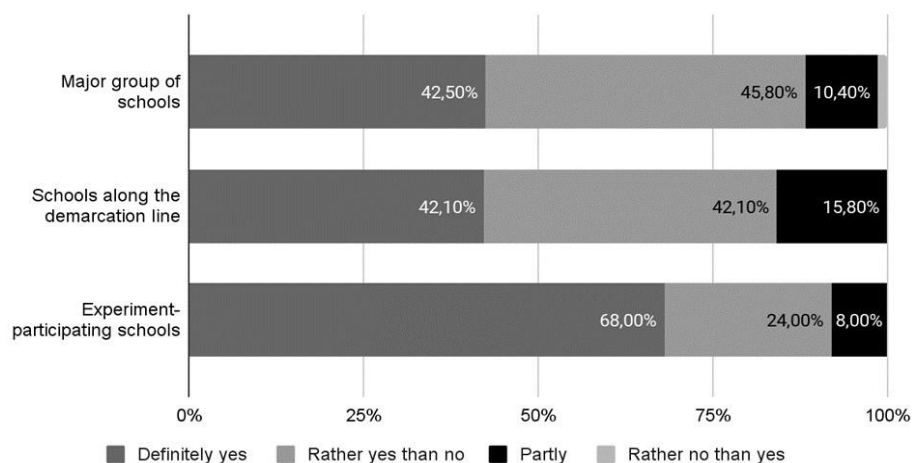

Figure 2. School Principals about Introducing Social and Emotional Learning

Note. Responses [in percentage] by school principals to the question "Would you like to introduce social and emotional learning in your school?" for various categories of study participants (Hrynevych et al., 2021, p. 312).

Based on the survey findings, we can infer that socio-emotional learning, as well as its enhanced version SEE Learning that is being implemented by EdCamp Ukraine, is in great demand by teachers to develop soft skills in students and achieve general wellbeing in society.

Overview of SEE Learning Global Impact and Research

In 2019, when speaking about socio-emotional skills, Dr. Daniel Goleman called SEE Learning SEL 2.0 and stated it showed the way to the future direction for this critically important educational approach (as cited in Ozawa-de Silva & Frazier, 2020, The SEE Learning program, papa. 4). Currently SEE Learning is growing in its capacity to shape communities, states, and even countries. Below are some highlighted examples of how SEE Learning is being

recognized. The references below highlight the interconnected nature of policy, research, school implementation supports, and training teachers through facilitator development. One of the best examples of SEE Learning being implemented to scale is occurring in Colombia, at SEE Learning Foundation Levapan founded in 2022. Through a partnership with the local municipal government, the Secretary of Education, and a regional foundation, SEE Learning is being implemented city-wide in Tulua, Colombia. In 2016, the civil war ended and the nation began transitioning towards peace. The epicenter of the conflict was Tulua. The implementation of SEE Learning represents a courageous step towards the healing of a nation. A plan to scale this pilot experience nationwide was developed. SEE Learning has been accepted by the Ministry of Education in the Czech Republic and provided accreditation for schools throughout the nation to adopt and receive financial support to implement the program. Another European example of national implementation is occurring in Luxembourg, tied to the Ministry of Education. The Center for Social Emotional Development (Centre Pour Le Développement Socio-Émotionnel) established in 2022 is currently training its staff to become SEE Learning facilitators and to translate the program into their native language for national implementation.

The Center for Contemplative Sciences and Compassion-Based Ethics has begun the process of demonstrating the effectiveness of educating the heart and mind. In 2019-20, a pilot study of the online version of SEE Learning was conducted in a public school district in the southeastern United States. Students, primarily in elementary and middle school participated in eight online weekly sessions. The students demonstrated high to very high levels of engagement. Students reported increased understanding of the nervous system, self-compassion, and compassion for others. The vast majority of students reported increased behaviors associated with helping more often, reduced stress, greater focused attention, and improved self-regulation. A model was tested using regression analysis to determine preliminary trends in the relationships between attendance, practice, and choice. These factors demonstrated a significant association with increased scores on the Learning & Doing Student Satisfaction Survey.

Nested Regression on Student Experience Survey

	(1) stud_sum	(2) stud_sum	(3) stud_sum
Attendance	2.763***	1.714***	1.107***
Engagement		.814***	.113
Skills practice		6.105***	1.229***
Did you teach others		2.126***	1.232*
Was choice made clear			1.113*
Did you like SEE			.884**
Did you learn anything			2.869***
Can you use LEs at home			2.455***
Would you recommend			.582
Anything you did not like			-1.311**
_cons	25.568***	4.823***	4.502***
Observations	709	705	623
R-squared	.036	.431	.655

Standard errors are in parentheses
*** p<.01, ** p<.05, * p<.1

Table 1. Student Experience Survey: Regression Analysis Results

Overall, students reported increased development of foundational skills and understandings of compassion, body awareness, and reduced stress even in this short exposure.

The key factors that demonstrated most significance were attendance, having the opportunity to practice, and having a sense of choice.

SEE Learning Studies in Progress

During the 2021-2022 school year, the SEE Learning program at Emory University (USA) together with its international affiliates began the in-person implementation of the program. SEE Learning is in the process of conducting international studies across multiple countries (Spain, Brazil, Mongolia, Kenya, Sweden, Ukraine, USA, and India) to study the preliminary impact of the late elementary SEE Learning curriculum on student outcomes (Research – Emory University). Additionally, SEE Learning is in the process of conducting case studies to illustrate the implementation flexibility of the program across additional international sites. These studies are all aligned across sites and will demonstrate the effectiveness of the SEE Learning program within and across global sites. As these studies are being conducted, the SEE Learning program implementers are going through a rigorous process of assessment, translation, development, and piloting. EdCamp Ukraine is at the forefront of research and implementation.

SEE Learning Implementation in Ukraine

In Ukraine, Social, Emotional, and Ethical Learning is implemented nationwide by EdCamp Ukraine. SEE Learning is one of the most successful of organization's activities. It's being introduced within the largest education reform of the past decade dubbed "New Ukrainian School." The introduction started in the fall of 2019 when the Ministry of Education and Science of Ukraine approved the nationwide SEE Learning experiment (pilot) in 26 schools from 23 regions of Ukraine for the next five years (Ministry of Education and Science of Ukraine, Order No. 1431, 2019).

Within the experiment, a professional SEE Learning community has been created (as of July 2022, it comprises 298 teachers) which teaches SEE Learning to over 5,000 students of elementary and secondary schools, mostly as additional, free-choice classes, and within class hours and study groups. Many teachers have integrated SEE Learning practices into various lessons, including for inclusive classes they teach with assistants.

EdCamp Ukraine spends much time on the development of this professional community. They hold monthly online meetings with teachers where they discuss SEE Learning implementation and "difficult cases" that might and do occur in classes. Since the experiment launched, 12 supervisions with separate schools have been conducted, where they discuss pre-recorded videos of SEE Learning classes, results of self-assessment (using the form suggested by Emory University), and teachers' own progress in SEE Learning.

SEE Learning professional community also functions virtually, as a social media community. Its participants communicate with each other, share their experiences, and help each other professionally. The previously discussed study "Social and Emotional Learning in Ukraine: Today and the Future" (Hrynevych et al., 2021) has confirmed a high level of SEL competencies among educators from experiment-participating schools. These teachers, compared to respondents from other schools, demonstrated higher levels of knowledge and competency in SEL, assuredness of their capability to develop social and emotional skills in students, better attitude to SEL, and higher level of readiness to introduce it.

As the intervention of SEE Learning started, EdCamp Ukraine also actively advocated SEE Learning as a national education policy, which resulted in several policy changes at the

national level. Social and emotional competency has been included in the State Standard (Decree, Cabinet of Ministers, 2020) for general secondary education as an obligatory competency to be developed by students. Emotional and ethical competency has been added to Professional Standards for teachers (Ministry of Economy, Trade, and Agriculture Development, 2020), obliging them to develop this competency when being trained as teachers and helping them to define direction for their own professional development.

These achievements paved the way for further development and scaling of SEE Learning in Ukraine. To make this process even more successful, EdCamp Ukraine made several important steps:

1. an official webpage for SEE Learning in Ukraine as a single info hub has been created (Social, emotional and ethical learning 2022);
2. all methodology materials by SEE Learning developers, including an introductory online course, written and audio practices, have been translated, adapted, printed, and distributed;
3. a series of guidebooks "I (Practice) SEE Learning" has been created by the EdCamp Ukraine team, aimed at helping teachers to assess students' achievements, work on SEE Learning with parents, unite like-minded people into a powerful SEE Learning community, and an additional guidebook for parents on using SEE Learning practices at home;
4. a blog on SEE Learning introduction has been created on Ukraine's most popular education portal, New Ukrainian School (Nova Shkola), with materials by scientific advisers of the SEE Learning experiment and teachers' stories about their experience with the program, including the use of practices;
5. model learning programs on SEE Learning for grades 1–2, 3–4, 5–6 (June 2021) and 7–9 (June 2022) have been created and recommended for use in Ukrainian schools,
6. online SEE Learning training will be conducted for several pilot schools that introduce the general secondary education standard within the New Ukrainian School reform (Sept. – Oct. 2022),
7. combined offline/distance training of SEE Learning trainers' cohort (June through December 2022) has started, mentored by experts from Emory University and the first cohort of Ukrainian facilitators trained by Emory University. The purpose is to scale up the program in 2023, with an ambitious goal to bring SEE Learning into each Ukrainian school.

Socio-emotional paradigm has been developing within traditional EdCamp events. SEE Learning-related topics have become one of the most popular during (un)conferences organized by EdCamp Ukraine. In 2021 alone, SEE Learning component, especially about joy in life and education, has been central among what was discussed and practiced with scientific, psychological, celebrity, spiritual, and education circles within the National EdCamp Joy "High Five, Education!" Fifteen regional (un)conferences of the same year included special sessions titled "Resiliency Dimensions: Personal, School, Systems," aimed at developing body, emotional, social, and professional resiliency of teachers. There has been a special achievement: a dedicated (un)conference titled "SEE Learning in action: Your emotional reboot" in Melitopol, the Zaporizhia region, which gave an impetus to an unprecedented decision by local authorities to introduce SEE Learning in all 25 schools of the city (this will start as soon as Melitopol is liberated from russian occupation),

The research EdCamp Ukraine was involved in has also demonstrated the results of SEE Learning implementation. The earlier discussed nationwide representative study titled "Social and Emotional Learning in Ukraine: Today and the Future" researched SEE Learning pilot participants alongside with other schools and showed high demand for social and emotional skills and their training (Hrynevych et al., 2016, pp. 149-240). Another special study (with a mapping component) has been held, showing all active programs on social and emotional learning in Ukraine (Hrynevych et al., 2016, pp. 107-148).

The war with russia affected the introduction of SEE Learning in Ukraine in significant ways. On one hand, this process is now replaced with more urgent needs, like having a comfortable space for schooling, which is not always possible. As of June 20, 2022, 209 schools have been destroyed in Ukraine, 2,028 were partially damaged (Juvenile prosecutors, 2022). Regions with no active fighting are also only relatively safe because missile strikes are conducted across Ukraine's entire territory. In addition, some schools temporarily host IDPs. Given that, the lessons are less systematic and conducted online. Out of 26 schools participating in the SEE Learning experiment, 21 schools continue operating (the other five are located on temporarily occupied territories or in active fighting zones). One of the schools in the frontline city of Mykolaiv has increased the number of classes with SEE Learning as parents demanded to replace russian language lessons with SEE Learning classes.

The war has increased children's levels of stress significantly: according to a study titled "Changes in children's lives during the war" (April 2022), 50 % of children aged 0–18 reported deterioration in mental health, ¾ of them experience specific symptoms like mood swings (45 %), higher anxiety (41 %), sleep deprivation (29 %), deterioration in attention, memory, ability to learn (16 %), aggression outbursts (14 %), and more (Gradus Research Company, 2022).

Therefore, at the time of war SEE Learning has become a lifesaver – "lifebuoy ring" for children and adults from the experiment-participating schools who had a chance to learn the SEE Learning skills earlier. The teachers from the experiment schools mostly said that SEE Learning practices proved useful for themselves in the first place. Without the peace and resiliency they had mastered, they would not have been able to help others. Some teachers said children were able to use the practices in stressful situations and sometimes even proactively asked teachers to allocate some time for SEE Learning (Osvitoria, 2022).

It should be noted that relevant to the ideas and practices of social, emotional and ethical learning is the established global concept of school-based family counseling (SBFC), which is based on a comprehensive approach to student mental health, focusing on both school and family and aimed at helping children overcome personal problems and achieve success in school (Gerrard, 2022). While mainstreaming SEE Learning in Ukraine during the hostilities and when overcoming their consequences, SBFC can become an important tool for supporting child and family resilience. In this context, SBFC resonates with SEE Learning, because it shows a system approach to working with parents and children's guardians, sees them as partners and is implemented through a complex of measures at the school and family level (school intervention, school prevention, family intervention and family prevention). In this paradigm, the community influences the processes that are happening within the family and school at the systems level.

SBFC offers effective methods of coping with stress in children and adults, which can be found in SBFC disaster copying manuals also translated into multiple languages and available as free electronic copies on the Disastershock.com website (Gerrard et al., 2020). Due

to the integrated approach that the SBFC concept offers, it has a high potential in overcoming the effects of psychological trauma in children, which is extremely important both during martial law and during post-war recovery and is a promising direction for expanding and updating educational activities while implementing SEE Learning in educational institutions of Ukraine, which requires wide coverage among educators of Ukraine and integration in communities.

At the time of war, EdCamp Ukraine introduced several anti-crisis initiatives related to SEE Learning. A series of materials on sensitive topics have been published, including on adaptation of IDPs in a new location, productive reaction to stress, and how to talk with kids about the war. A series of informative and educational classes based on SEE Learning has been held live on YouTube for students from grades 1–2, 3–4, and 5–6. For teachers and all those interested, a project called "Daily Resiliency Space" has been implemented, based on the developments of the Community Resiliency Model by Trauma Resource Institute (USA), which model is one of the central components of SEE Learning (Freeman et al., 2021). This extended series of webinars is dedicated to the most painful issues (suggested mostly by webinar participants) about war, self-support, support for others, including kids of different age groups. The project started urgently in the first days of the full-scale war and will last until mid-fall.

The need for comprehensive social and emotional support has gotten more acute with the war. Ukraine's first lady Olena Zelenska spoke at the 75th World Health Assembly (May 2022) about the need to integrate psychological help into all areas of the post-war life in Ukraine (Presidential Office of Ukraine, 2022). A study by the Ministry of Education and Science of Ukraine held in 1,141 communities (May 2022) showed that trauma-informed teaching is a priority of educators' professional development in at least half of them (570 communities) (ReliefWeb Ukraine, 2022).

For all these reasons, EdCamp Ukraine will continue the development of social, emotional, and ethical learning in Ukraine. Our plans include:
1. creation of an adapted version (for the needs of Ukrainian students during the war and in post-war period) of the SEE Learning Playbook,
2. adaptation of a Ukrainian-language version of SEE Learning curriculum for high school,
3. creation of a "building blocks set" for integration of SEE Learning components into various school subjects,
4. drafting descriptions of various models of implementing SEE Learning into learning process, from a five-minute "check-in" at the beginning of any class to designated SEEL lessons, including comprehensive rethinking of educational space,
5. a large-scale project on creation of physical spaces, "resiliency hubs," in Ukrainian schools and professional development centers, focused on the development of soft skills, entrepreneurship competencies, and integrity,
6. conducting studies of the efficiency of SEE Learning introduction in Ukraine, the results of which will be used for confirmation of SEE Learning efficiency globally.

Growing the Field of SEL through SEE Learning in Ukraine

The war caused by the russian aggression has made the development of social, emotional, and ethical skills even more relevant in the modern world, full of challenges and threats. Social and emotional approaches, including SEE Learning, must become a

comprehensive component of obligatory school programs as opposed to being an exclusive opportunity in some schools. This shift requires a complex approach that must be included in the strategy for development of education in Ukraine in the post-war period; it provides for:

1. Integration of social and emotional learning outcomes in the future state education standards, including pre-school, professional secondary education, and professional education, where SEL is defined as an obligatory component of the education process.
2. Teaching methods and technologies of social and emotional learning for pedagogy majors in colleges and universities, as well as within systemic professional development of teachers.
3. Assessing the level of social, emotional, and ethical competencies of a teacher during evaluation and certification.
4. Creation and support of pedagogical communities that actively introduce and develop SEL / SEE Learning.
5. Development of digital teaching and methodology materials available to all teachers for various age groups of students that provide for integration of SEL components into all school subjects and school counselors' activities, as well as development and introduction of a separate subject titled "Social and emotional learning" or its derivatives (like SEE Learning).
6. Considering hardships and peculiarities of schooling at the time of war and after it, placing accents on skills related to emotional and social / interpersonal processes (emotional empathy, self-control skills, ability to deal with stress, resiliency, etc.), and focus on vulnerable groups, like children with disabilities, abuse victims, students in difficult life circumstances.
7. Comprehensive approach on school level: teaching school staff to build positive relationships, providing psychological support and help, creating a safe environment in a school, and explanations and feedback for parents.
8. Communication with the society, especially parents, on social and emotional learning's importance for successful development and self-fulfillment of an individual.
9. Conducting studies on the effects social and emotional learning programs have on psychological and emotional state of children, their academic results, and the atmosphere and culture inside a school (OECD, 2021).

In post-war Ukraine, we will be obliged to not only rebuild efficient educational spaces in our schools but also fill those spaces with learning aimed at creating moral and ethical values that will become foundation for life resiliency of our students, their successful self-fulfillment, and societal interactions. All of this is possible with systemic introduction of social, emotional, and ethical learning. After Ukraine was granted the status of an EU candidate state, these developed materials and achievements will become even more available for the European educational space, so that more countries could introduce SEE Learning in their schools and learn from Ukraine's unique experience. In this way Ukraine's efforts to foster SEE Learning nationwide will not only build a more resilient and compassionate Ukraine, but it will also create pathways for a united Europe to foster future citizens who are aware, compassionate, resilient, and engaged.

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School Intervention: An experience focused on Initial Education teachers

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ABSTRACT

Family and school are the main development contexts that collaborate to make learning accessible. Specifically, the role of the teacher in initial education is very relevant to promoting and favoring all areas of child development. Our research team has been working in coordination with the Initial Education Directorate, province of Mendoza, Argentina, facilitating and optimizing educational trajectories in children aged 4 and 5 through the application of a program for the strengthening of socio-cognitive and emotional skills (PHSCE) in their students. This program was implemented by teachers as part of activities carried out in the classroom, integrated into the school curriculum. The main objective was to explore the grade of acceptance of teachers regarding the training process done by our team both before and during the pandemic, with anonymous online survey answered by teachers. The sample consisted of 56 initial-level teachers, with results indicating pre-pandemic acceptance by 79.1% of teachers, increasing 96.9%. during the pandemic Both groups felt the PHSCE should continue to be applied. This proposal, aligned with the theoretical model of SBFC, it aims to help children strengthen socio-cognitive and emotional functioning, promoting the engagement and involvement of teachers.

INTRODUCTION

Generally, the damage that these two years of the pandemic have had on people's daily lives is evident, affecting health, work, routines, care, emotions, and bonds, deepening social gaps and inequalities.

In particular, school continuity and the educational trajectories of children and young people were deeply affected by the suspension of face-to-face classes in schools.

Changes have been observed in students at an emotional level, in the configuration of study routines, in interpersonal relationships, and in performance levels in school learning, among others. In order to guarantee the continuity of the teaching-learning processes, government school institutions have had to reorient, organize and plan curricular content and the activities of obligatory school trajectory, using alternative means of presential classes or virtual educational platforms. This has generated significant changes, both in families and in the educational system. Families have had to generate major reorganization due to the suspension of face-to-face classes.

The phenomenon of "schooling of domestic life" has resulted in the domestic space-time organization turning into school space-time. Thus, school structure has been recreated in

the domestic sphere. Families that have had more time and school knowledge have had advantages over others.

The role of teachers has also been reconfigured. They have had to face multiple challenges, such as rapid appropriation of the use of technologies, reorganizing their teaching modality, prioritizing both curricular content and school activities, and having adequate devices with access to connectivity, among others. Under this atypical situation, accompanying and supporting the teacher has become even more relevant.

Our work model follows the postulates on Developmental Counseling and Therapy (DCT) and the assessment of "meaning-making" raised by Dr. Allen Ivey and collaborators. Thus, a counselor who masters the use of this theory can assess how an individual makes sense of a specific situation and broaden understanding, reaching more complex ways of thinking.

The DCT consultation model seeks to help teachers to consider a situation from a different modality or perspective, while emphasizing accurate assessment of the problem and protecting the educator's emotional experience (Ivey & Ivey, 1998; Clements, 2007). Thus, our team focused on the emotional experience of teachers, and how they created meanings in the atypical situation of teaching in a pandemic context. Through this interaction, teachers were encouraged to acquire skills and knowledge that could help them to be better prepared to face this situation, to consider a situation from different perspectives, to become more self-sufficient problem solvers and to be able to become more flexible in the methodology of teaching-learning.

The work presented here is a part of a larger project and is focused on analyzing the perception of teachers after having received training on the stimulation of cognitive and emotional skills aimed at children at initial level, at two moments: prior to the pandemic in 2019 and during the pandemic in 2020 to 2021.

The initial level is the first step within the Argentine educational system that, among other functions, tries to reduce inequalities at the beginning, favors interaction experiences, contributes to the autonomy of the student and promotes the development of motor, linguistic, cognitive, and emotional abilities.

Within the school context, the role of teachers as mediators of knowledge is essential to promote and enrich the learning potential of children. For this, it is necessary for the teacher to diversify, expand and enrich their own practices and pedagogical experiences that make it possible to generate facilitating conditions and opportunities for learning in children. Furthermore, it cannot only help children strengthen their cognitive-emotional functioning and make immediate behavioral changes, but it may also help students maintain those changes (Clements, 2007; Ivey, 1991).

Our research team has been working for years on the application of cognitive-emotional intervention programs in schoolchildren aged 7 to 12 years (Ison, 2009, 2010, 2011, 2015, 2020; Espósito, 2017; Korzeniowski, et al., 202; Morelato, et al., 2019). Based on this, we were summoned by the Directorate of Initial Education, dependent on the General Directorate of Schools (DGE), province of Mendoza, Argentina, to design and implement a program to strengthen cognitive and emotional capacities in early childhood. This is how the Initial Level Pilot Project (PINI) arose, the objective being to promote successful educational trajectories in children aged 4 and 5 through the training of classroom, physical education, and music education teachers. The ultimate goal was to provide them with theoretical-practical tools on cognitive-emotional functioning in childhood, so that they could implement stimulation strategies with their students.

Under this conceptual framework, the objective of this work was to explore the grade of acceptance of teachers, regarding the training process on cognitive-emotional skills (PHSCE) carried out by our team both before and during the pandemic.

METHODOLOGY

The design was non-experimental and cross-sectional. It had a descriptive scope (Hernandez-Sampieri et al., 2014).

Participants: The total sample consisted of 56 initial level teachers, in charge of 4-year-old classrooms and 5-year-old classrooms. In 2019, 24 teachers responded to the survey: 17 from urban schools and 7 from schools in socially-vulnerable sectors of Greater Mendoza. During the pandemic, 2020-2021, 32 teachers responded to the survey: 18 teachers from urban schools and 14 teachers from schools located in socially-vulnerable sectors. Teaching experience ranged from 5-20 years.

What did the teacher training consist of? A program for the strengthening of socio-cognitive and emotional skills (PHSCE), it was described as having the purpose of strengthening the cognitive-emotional functioning in children aged 4 and 5 (Ison & Espósito, 2020), directly involving teachers and indirectly engaging parents. Previous research carried out by our group and the experience of the initial education teachers contributed to its development (Ison, 2009, 2010, 2015; Ison, et al., 2020; Morelato et al., 2019).

This proposal, developed for the schools that participated in PINI, had 3 lines of action: children, teachers, and parents, with the purpose of: a) optimizing the cognitive-emotional performance of schoolchildren; b) promoting cooperative work between classroom, physical education, and music education teachers, in order to articulate activities to promote cognitive-emotional functioning in early childhood; and, c) promoting teamwork among professionals, teachers, and parents, in order to foster an interpersonal climate favouring cooperative relationships in the school context. To do this, our team of counsellors worked with teachers on the central role that their own emotions play in the teaching process and in making creative decisions to open up to new ideas. That is to say, the program presents goal-directed activities, but we also focused on how that process develops. This aspect has been highlighted very clearly by Geiger (2017), when he argues that the skill of a counselor or therapist can be seen as the ability to know when to choose, change or vary the combination of goals and process elements in treatment. Geiger (2017) argues that the skilled clinician or counselor handles the dialectic between the goals and the process and that the counseling and therapy models are not pure since the techniques, processes, and interventions are located on a continuum, either more goals-based or more process-based.

Considering these aspects, PHSCE consists of 8 theoretical-practical modules. Each module has a theoretical foundation that supports a series of practical activities described in a stimulation booklet entitled "Strategies to strengthen cognitive and socio-emotional functioning in initial education" (Ison & Espósito, 2020). This booklet works as a working guide for the teacher, in order to stimulate the cognitive-emotional functions in their students through playful activities. The program lasted 4 months and was incorporated as part of the activities of the school curriculum, working daily on the cognitive-emotional functions through recreational activities based on the activities described in a stimulation booklet. For their part, the teachers guided and monitored the development of the activities, "scaffolding that knowledge", giving positive feedback, trying to maintain the motivation of the group, and promoting emotional self-regulation in their students. The teachers functioned as a support

structure, or guide, for the execution of the children's tasks, such as helping them to think about how they did the activities, why they did them that way, and what other activities they could think about or do. Although the teacher training program had a defined structure with specific content, the teachers could creatively incorporate other activities, allowing their work to be adjusted to the characteristics of the group of children. The focus was on stimulating group function for strengthening effective action.

Concerning instrument, after the stimulation program, an online survey was carried out for teachers, in order to explore the grade of acceptance of teachers regarding the training process on cognitive-emotional skills (PHSCE) carried out by our team and whether the training program stimulation contributed to the strengthening of these functions in children. The questions of the online survey were: a) whether the work material was clear, precise and relevant to the objectives of the PINI project; b) whether significant improvements in student performance were observed with the implementation of PHSCE; c) whether the teacher training was useful and relevant to the objectives of the PINI project; d) whether the management by the professionals in charge of the project was satisfactory or unsatisfactory; e) whether the work of evaluation and accompaniment of the professionals has been satisfactory or unsatisfactory; f) whether it was considered important and pertinent to give continuity to the PINI project in their educational institution and why; and, finally, g) whether the families of the students received the PINI project with enthusiasm and positive predisposition. At the end of the survey, teachers could suggest aspects to improve on the implementation of the PINI project.

For data analysis, the frequencies obtained by both groups of teachers, pre-pandemic and during the pandemic, were compared in each of the items of the online survey, a result that is expressed in percentages.

Regarding ethics, all investigation procedures and the evaluation instrument applied were reviewed and approved by the DGE. The teachers had to give their informed consent to participate in this study. The online survey was anonymous and voluntary. The informed consent notice, as well as the administration of this study, complied with CONICET guidelines on ethical behaviour in the Social Sciences and Humanities (2857/06).
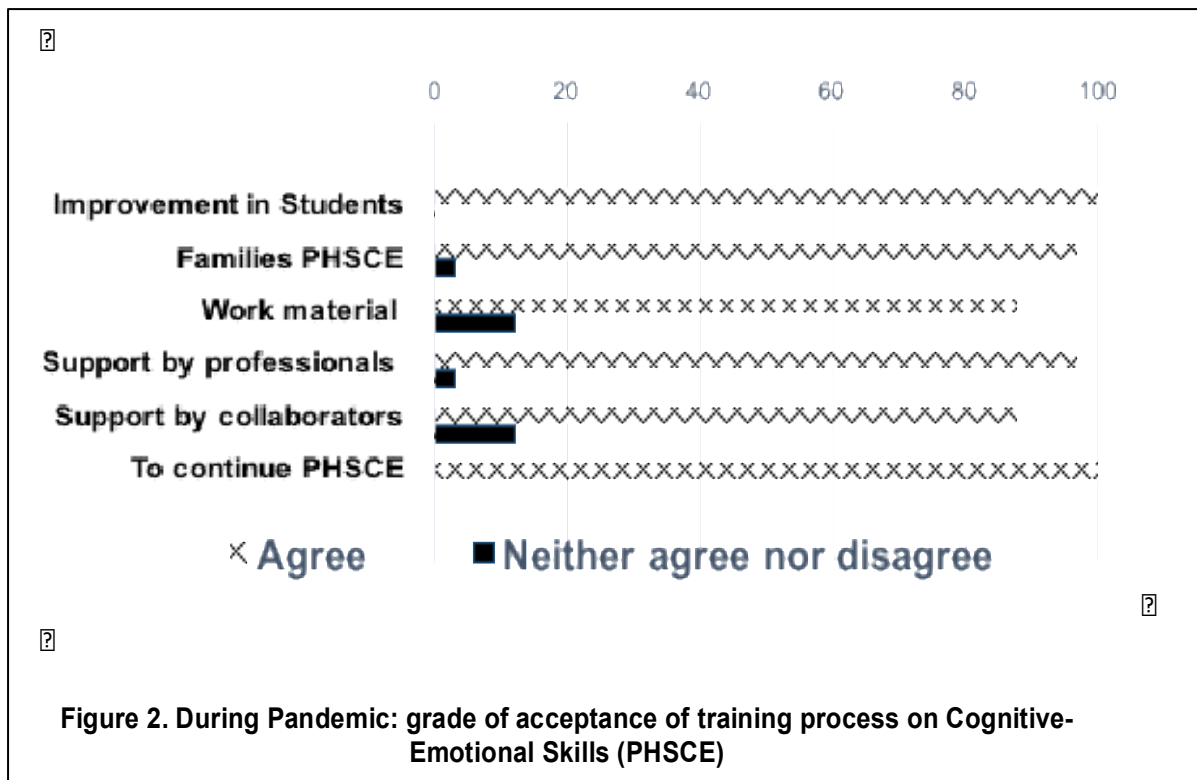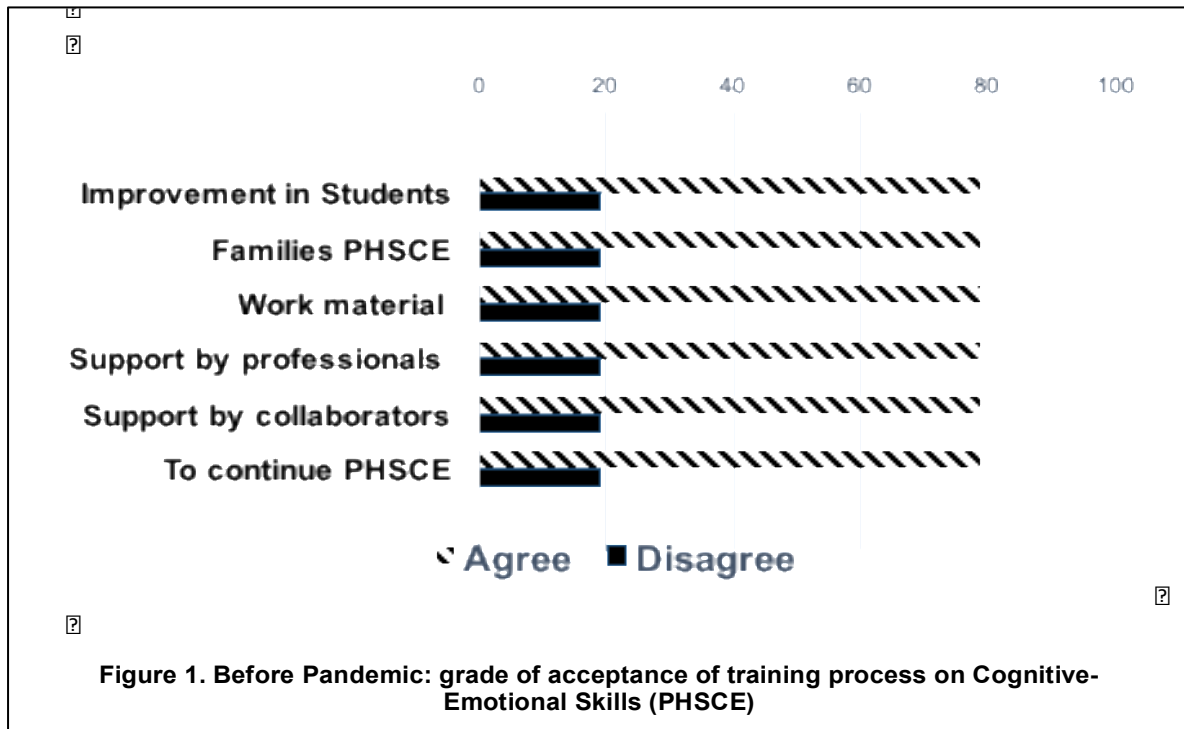
RESULTS

In order to analyse the evaluation carried out by the teachers in relation to the training process on socio-cognitive and emotional skills, PHSCE, before the pandemic and during it, the percentages corresponding to the items considered in the online survey were obtained.

Before the pandemic, 24 teachers participated in the program and answered the opinion survey. During the pandemic, 32 teachers participated in the training. Before the pandemic, 19 teachers, 79.1%, were satisfied or very satisfied with the training process on cognitive-emotional skills, PHSCE. They reported that the families of their students had received the project with enthusiasm, that the work material was clear, precise and pertinent to the proposed objectives, that the training was useful, that the management and support by professionals and students of the Faculty of Psychology, University of Aconcagua, were satisfactory, and that it was important to continue in the project in their institutions. However, 5 teachers, 20.8%, disagreed with the training process (Figure 1).

During the pandemic period, 31 teachers, 96.9%, indicated that they were satisfied with the training program received. This same percentage indicated that the families of their students had received the project with enthusiasm and good predisposition and that the management by the researchers was satisfactory. 28 teachers, 87.5%, were satisfied with the work material and

the accompaniment by the advanced students who had collaborated with the project. The training sessions were considered purposeful by 30 teachers, 93.8%. Moreover, all the teachers, 100%, confirmed both that they had observed significant improvements in their students' performance and that they considered it important to continue the project in the coming years (Figure 2).

Figure 1. Before Pandemic: grade of acceptance of training process on Cognitive-Emotional Skills (PHSCE)

Figure 2. During Pandemic: grade of acceptance of training process on Cognitive-Emotional Skills (PHSCE)

DISCUSSION

In the current study, we examined, first, the grade of acceptance of teachers in relation to the training process for the strengthening of socio-cognitive and emotional skills carried out by our team. The results obtained before the pandemic showed that 79.1% of teachers were satisfied with the training received, while 20.8% were dissatisfied. Despite the difficulties experienced during the pandemic, 96.9% of teachers indicated that they were satisfied with the training process received, and only one teacher expressed her disagreement, 3.1%.

It could be asked what aspects intervened, in the context of the pandemic, to have a greater number of teachers who satisfactorily perceived the training received for implementing the cognitive-emotional stimulation program with their students.

It could be stated that several aspects converged. One of them was the Initial Level Pilot Project (PINI), in which the Socio-Cognitive and Emotional Skills Program (PHSCE) was inserted, which had been developing since 2018 in the schools selected by the Directorate of Initial Education of the province of Mendoza. This allowed the teachers to appropriate the PHSCE and the suggested activities, which were gradually articulated by the teachers to the school curriculum. Thus, they creatively incorporated activities proposed by themselves, adapting and enriching the PHSCE, according to the needs of their students, and indirectly, their community. Interventions in the medium- and long-term require extensive training of both school counselors and teachers, constantly reviewing the situations that can generate certain blocks in the cognitive-emotional processing of experiences in order to promote empathic communication. (Geiger, 2017; Ivey & Daniels, 2016; Ivey et al., 2005).

The ultimate goal of these programs is to optimize and promote the development of other skills necessary for school, such as self-regulation, social skills, and literacy. The basis for these programs is that cognitive-emotional skills could be enhanced in early educational settings by promoting quality teacher-child interactions through appropriate scaffolding and support practices. (Bardack & Obradović, 2019; Ison et al., 2020, Poulou et al., 2022; Traverso et al., 2019).

Likewise, knowing the theoretical foundation that supports the teachers' practice collaborates not only in the systematic application of these stimulation devices, but also in the teachers' conviction in their implementation.

In response to the situation of isolation, our team held monthly online meetings with teachers, through which the implementation of the strengthening program was monitored. In these meetings, not only cognitive and emotional aspects of their students were addressed, but also other emerging issues, such as the emotional situation and the concerns of the teachers.

In other words, these meetings also collaborated in helping teachers to manage their own emotions, fears, insecurities and situations shared by all the actors in the educational community: families, students, teachers and professionals from our team.

When comparing the answers given by the teachers before and during the pandemic, it was observed that, during the pandemic, the teachers better valued the work material for training, support, accompaniment and supervision provided by the members of the research team, as well as the efforts and predisposition of the families to collaborate in the application

of the program. Thus, all the teachers considered it important to continue with this project in the schools.

In turn, studies carried out in Argentina on teachers' perceptions and emotions showed that the emotional state they experienced at the start of non-face-to-face classes was one of confidence to cope with this challenge. However, at the same time, they felt stress, anxiety, and fear of assuming their responsibility of online educational tasks (Expósito & Marsollier, 2021; Oros et al, 2020; Vergara et al., 2021). In times of global crisis, it has been observed that teachers and managers operate with different resources, in unequal contexts, in dissimilar times (Expósito & Marsollier, 2021). In addition to this, the low salaries of teachers represent another stressful factor that influences the educational system.

Taking into account all of these aspects, one could highlight the willingness of teachers to actively intervene in the teaching-learning processes, in the search for strategies to scaffold and support the progress made by their students and in highlighting the importance of the affective bonds, interactions, and contact with others.

During the pandemic, the role of educators has been revalued, because they were essential actors to facilitate and scaffold learning in their students, giving continuity and sustaining the teaching and learning processes. The bonds of security, appreciation, and affective warmth created between the teacher and the children, as well as the bond of trust and respect between the institution and the family, are a condition for the learning experience to take place and be possible (UNICEF, 2021).

The short-term challenge is to work with teachers in the construction of sense and meaning of the changes in practices and modalities in the scaffolding process of their students, focusing on the emotional experiences that accompany this situation. Further, the long-term challenge is to continue with school interventions, seeking a greater involvement of parents and teachers that allows feedback to this team of counselors in order to generate lasting benefits for children and the entire educational community, a positive social "ripple effect".

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Systemic Optimism Amid the Burnout: School-Based Mental Health Services and the Coronavirus Pandemic

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ABSTRACT

The Covid pandemic has illuminated the growing role of mental health services in schools in the US over the past few years. The importance of access to health care services for students and school systems, including staff, administrators, and families, is becoming better recognized. Schools are working actively to fund services and partner with health care professionals to serve the needs of students and communities more comprehensively.

But well over two years after the start of the pandemic, school-based mental health clinicians are experiencing the effects of increased demands on their time, energy, and resources. Leaders from the American Association for Marriage and Family Therapy in Schools Topical Interest Network (TIN) have been working with school based mental health clinicians across the US to identify, track, and address these concerns. This paper highlights current challenges and achievements that we have observed as we have interviewed school-based family counselors during the coronavirus pandemic and current sociocultural era. It addresses burnout issues as well as strategies and successes that systemically trained school professionals are witnessing as they work together to support student achievement and resiliency.

INTRODUCTION

Challenges
Social Justice

It is no secret that issues of racism and inequity have been a nationwide challenge in the US since its inception. Well publicized social justice events from the past few years highlight these longstanding systemic problems. Recent events have critically intensified the

systemic stressors affecting students and families, as well as educators, and health care providers.

According to J. D. Dear (1995), problems in schools often reflect the problems in society. He recommends that the solution to those problems lies in understanding the systemic nature and interdependence of schools, families, communities, and culture. One such example of this interdependence is academic performance gaps among students. In the past two decades, studies have been published demonstrating racial and cultural disparities in academic performance (Bemak & Chi-Ying Chung, 2008). In their study, fifty-nine percent of African American, 56% of Latina/Latino, and 52% of Native American eighth-grade students in the United States rank below a fourth-grade reading level, in comparison with only 25% of their White counterparts (Education Trust, 2006). This achievement gap directly contributes to higher drop-out rates among poor students and students of color (Bemak & Chi-Ying Chung, 2008). According to Thornburgh (2006), 50% of African American, Latina/Latino, and Native American students living in poverty do not graduate from high school. Related findings show that low-income students are six times more likely to drop out of high school, compared with youth from higher income families (Bemak & Chi-Ying Chung, 2008). Such growing findings and correlated social justice issues are critically important to address, as racial and ethnic demographics in the United States continue to evolve. It has been established that the demographic makeup of US schools is changing, and that there are significant increases in numbers of students of color and students living in poverty (Bemak & Chi-Yink Chung, 2008; Education Trust, 2006; The Urban Institute, 2005).

Given these findings, it is imperative to examine dominant discourses and initiatives about race and social justice. McDowell, Knudson-Martin & Bermudez (2018) observe that what has "historically been understood as true or common sense often reflects the views and maintains the privilege of those with the greatest influence over its definition" (p. 22). One example can be seen in the attitudes about the mental health and wellbeing of Black adolescents in the US (Hicks-White, 2017). Despite a growing awareness of the mental health needs of adolescents generally, the "mental health concerns among Black adolescents are often explained as problems of character, a lack of motivation, or anti-social behavior. This perspective on mental health of Black adolescents is often fueled by racism, discrimination and ignorance" (Hicks-White, 2017).

Authors McDowell, Knudson-Martin and Bermudez write about the importance of recognizing the power and influence of sociocultural forces on presenting problems (2018). They suggest that family therapy has historically "challenged the dominant discourse of its time" (p. 2) through addressing first and second order change in order to shift not only basic family communication patterns, but also broader structural issues in families. They argue that this should be no different now as family therapists examine even broader impact of social and cultural influences on public discourse, attitudes and client narratives (2018). They address this initiative as "third order change", representing a "shift in relationship to sociocultural systems that expands possibilities and enables transformation of one's life" (p. 22).

Regarding school dropout rates and academic achievement gaps, the Bill and Melinda Gates Foundation (2006) found almost twenty years ago that many underachieving students report that unchallenging and unsupportive school experiences contribute to nationwide dropout rates and academic achievement gaps. Jones and Okun (2001) identified cultural norms of white supremacy, including systemic racism and classism that show up in many American organizations, including schools. Mackie and Radna-Crasta (2020) argue that this

"unconscious implicit cultural bias" is maintained by educational staff, and it has a significant impact on the educational experience of students and families of color, starting from the youngest grades (p. 65).

To this end, systemically trained school-based family counselors (SBFCs) are well positioned to address the complexities of social justice needs within school systems, given their unique position and background (Bemak & Chi-Ying Chung, 2008). SBFCs are trained to recognize systemic and contextual issues that combine to reinforce those dominant discourses, while also utilizing collaborative skill sets to bridge gaps among educators, school staff, families and students. They are tasked with a wide array of responsibilities and roles, including "culture brokering", defined as "translating the climate and culture of the school to families and doing so with sensitivity to what is needed for school success in relation to what may or may not be working educationally for a particular child" (Mackie & Radna-Crasta, 2020). These authors posit that as schools become more culturally competent, school counselors will be challenged to bring an even greater social-emotional, systemic and relational skill set to help "transform the twenty first century school experience in the US" (p 64).

School Violence

School shootings are defined as any incident of gunfire on a school campus, including for example an individual student shot by another student in a fight. Mass school shootings are defined as an intention to cause widespread and collective harm, resulting in the death of at least 4 people on the school campus other than the perpetrator. The United States has a disproportionate number of both types of shootings. Considering school shootings of any type, resulting in death or injury to at least one person, between 2009 and 2018 the United States experienced 288 such incidents (https://worldpopulationreview.com/country-rankings/school-shootings-by-country). The next largest number was Mexico, with eight, and Canada, a close geographic number with a comparable rate of private gun ownership, experienced two. Considering mass school shootings, as defined above, between 2009 and 2018 the United States experienced 14 such mass casualty incidents; Canada experienced one, and Mexico no school shootings that qualify (https://worldpopulationreview.com/country-rankings/school-shootings-by-country). Since 2018 the United States has experienced several more shootings, including the recent 2022 mass shooting in Uvalde. A clear pattern is emerging that is revealing a uniquely United States problem.

The increase in the incidence of gun violence and mass shootings in the US is a major cause for growing social justice concern. The President of the American Psychological Association (Bryant, 2023) made the following response to nearly 40 mass shootings in the United States so far this year:

The American Psychological Association is outraged by the pervasiveness of gun violence in our nation, culminating most recently with shootings in Monterey Park and Half Moon Bay, California, just days apart from each other. The death toll so far this year is at least 69 – almost three people per day so far in 2023. The impact of these acts of violence permeates our culture and is especially profound in communities of color. We are experiencing collective trauma and grief as a result of the constant barrage of news reports about mass shootings. Psychological science suggests that these shocking events lead to post-traumatic distress among victims and bystanders and are triggers for those who have experienced similar violent events (Bryant, T., APA News Release, 1/24/23 APA Public Affairs).

Recurrent violence in schools deeply affects both teachers and students. Teachers report feeling overwhelmed by a constant need to assess risk (Alfaro, 2022). K-12 students report symptoms of increased anxiety and depression after mandated "active shooter" drills at their school (ElSherief et al, 2021). Efforts have been made to address this ongoing problem, including restricting access to gun ownership and increasing mental health resources in schools (Laundy, Rambo & Alfaro, 2022). But the situation remains a major stressor that is particular to United States school systems.

Covid Pandemic

The world has experienced an unprecedented global pandemic in the past three years. It has left billions of people experiencing various stressful incidents that developed along the timeline of the pandemic itself. The world essentially shutdown overnight, leaving students, their families, and educators in a chronic state of uncertainty over a long period of time. It has threatened the stability, safety, and security of all those involved. People have faced the loss of connection to natural supports, social outlets, and peer groups, which has led to isolation and loneliness. Loss has been experienced regarding educational access and learning, job and financial stability that further challenged the ability to meet basic daily needs.

Educators were faced with essentially learning a new skill set in order to carry out their job. Technology systems, foreign to some school staff, quickly became the single way to reach students remotely, through virtual platforms. Educators were faced with not only learning the technological skills themselves, but also how to use that technology to effectively help struggling students utilize the content. This significant learning curve occurred without sufficient formal training or adequate time to prepare. Meeting student needs through modifications and accommodations based on learning style, IEP status, or 504 Plans was especially stressful.

This process quickly highlighted the issue of inequity, revealing that many families from lower socio-economic status, rural, and minority populations did not have access and means to adequate technology, internet services, and their education. Services and supports such as instructional assistance or individual support, school nursing, and access to meals and basic supplies were suddenly no longer available or offered. Across the nation, states varied in their decision-making regarding remote learning plans, return to in-person learning, and guidelines to maintain a safe school environment. Uncertainty added to fear of contracting the virus, making decisions whether to get vaccinated and other safety protections, and losing loved ones have all contributed to distress in schools. With the return to a sense of normalcy worldwide, educators are faced with classrooms of varying learning growth (or lack thereof). They are expected to close learning gaps, guide students through social-emotional skill deficits, and manage difficult behaviors, some of which are rooted in personal traumas such as abuse and neglect.

Natural Disasters

Although the theory and research on climate change is not new and the phenomenon of natural disasters is well-documented throughout the ages, the world is experiencing historical records of incidents from droughts to floods, heat indexes, cold spells and storms. Many of these disasters lead to the experience of mass destruction, loss of resources such as housing, clean water and food supply, electricity and transportation, and loss of life. They further

threaten the security and stability of students and their families. Such losses can impact daily life for extended periods of time.

Achievements: Systemic Events and Opportunities

Despite these challenges, the coronavirus epidemic and concurrent political and cultural events have also created growing systemic opportunities for school-based mental health practice.

The first general systemic change we have observed is that physical and mental health are become increasingly recognized in the US as interrelated contributors to school achievement and resiliency. Health care and education are beginning to shift away from individualized approaches that have historically characterized US medical and education services in the United States. Dr. Thomas Insel (2021), the former psychiatric Director of the US National Institute of Mental Health, reports that social factors such as zip code, rather than genetic code, as well as life choices rather than what and how many medications one takes, are more directly related to health outcomes than specific diagnoses alone. He supports the health care pioneers who have taken a broader view of health care, viewing mental health through the wider lens of human rights and life choices (pp. xxv-xxvi). There is a growing focus on systemic variables such as poverty, systemic racism and access to care that challenge health and school achievement across the US.

Another encouraging finding is that multidisciplinary collaborative initiatives are emerging that seek to address student health needs in schools more comprehensively. An example of such collaboration is the innovative anti racist training and text developed by Turner, H.J. & Lopes, K. (2021). As a Massachusetts school principal and school social worker of Color, they developed a powerful model for teaching educators and health professionals how to become antiracist leaders in their schools through collaborative partnerships.

The following examples from our AAMFT Topical Interest Network leaders will illustrate more ways that these changes are occurring. Several creative school/health initiatives have emerged over the past decade in areas of direct hire, and private practice and agency collaborative partnerships, as our Family Therapy in Schools TIN leaders reported at a former Oxford Symposium (Laundy et al, 2020, pp.194-225). Those initiatives have grown substantially in the past two years, as events of the coronavirus pandemic and sociocultural events have evolved.

Growing Partnerships

The following are four examples of the growing mental/physical and educational partnerships we have observed in school-based practice in the US during the past few years. Throughout the COVID pandemic, the opportunity to promote mental health and support student achievement and resiliency has grown both in traditional and in new ways. School districts across the country, with the encouragement, recommendation and support of state and/or federal legislature, are creating and expanding partnership opportunities. Such positions include direct hires, private practice partnerships, and agency/school partnerships.

Direct Hire:

One such direct hire position is Sandi Cox, LMFT, who is an employee of Lebanon Community School District in Linn County, Oregon. She assists administrators and educators to coordinate, consult, develop, and provide services and supports that positively impact socio-emotional and mental health well-being within the multi-tiered systems of support (MTSS)

framework. She works to coordinate partnerships and systems already in place, while developing new partnerships to provide complementary services among universal, targeted, and selected groups (i.e., Tier 1, Tier 2, Tier 3 systems of school support).

She helps develop policy and protocol to address suicide prevention/intervention and other mental health problems, and she also provides training to school staff and parents about these mental health issues as well. The direct hire option provides an ease of access to direct services by providing the service in building, responding efficiently to emergencies, and breaking barriers that prevent certain families from accessing community resources. Direct hiring can also improve outcomes. It allows for efficient and ongoing data tracking to inform future decisions about services and supports for students in need.

School /Private Practice Partnerships:

KWAFTC: A vivid example of successful school and private practice partnerships is Kimberley Welk and Associates, LLC Family Therapy Center (KWAFTC), in northeast Wisconsin. Welk and her staff have played a significant role in developing collaborative opportunities, particularly in rural, underserved populations. Early in the pandemic, Welk observed that the rural schools her staff served did not have the resources to properly transfer from in-person to online learning, due to lack of computer ownership and/or inadequate internet services throughout their districts. This prompted their clinic to contract with the schools to continue in-person services, when possible, and to switch to telehealth services, when necessary, thus ensuring that school based mental health services continued to those students. Their clinic was able to continue to service three of four school districts with whom they had commitments.

KWAFTC also experienced a new opportunity when a cooperative education service agency (CESA) asked to team with them on a pilot project to provide school-based telehealth services throughout their district of underserved and rural populations in far northeastern Wisconsin. Schools from that district were between one- and two-hours driving distance from KWAFTC offices. Using evidence-based practices and the experience they had gained in telehealth, KWAFTC provided the opportunity to have school-based telehealth services to the 28 school districts in the CESA region. Of those schools, six reached out to make agreements with the KWAFTC staff for their school-based services. As a result, KWAFTC currently provides school-based services to nine school districts and 18 schools, three times the number of districts KWAFTC serviced since COVID initially infected that area of Wisconsin.

Currently, six school districts are waiting for mental health providers to become available in Wisconsin. As with many professions, KWAFTC struggles with worker shortages and often receives contacts from students or recent graduates looking for interns and residencies within their clinic. But because most of their school-based mental health clientele are Medicaid insured, KWAFTC was able to develop a model that allowed for it to hire interns and residents to work their school-based telehealth programs while earning hours towards their degrees and/or licensure. In Wisconsin, both interns and residents working on full licensure can provide services to Medicaid clients.

It was also reported during that time that educator morale was low, and Wisconsin teachers began to retire during the academic year at rates not seen previously in that state. As in other locations, stressors of COVID and return-to-school stressors were often overwhelming. The actions that educators needed to take to ensure safe and viable learning spaces weighed heavily on them and took a toll.

To address student distress and teacher burnout, KWAFTC obtained the Gov. Evers

Atypical Telehealth Behavioral Health Grant In 2022. KWAFTC then worked with schools to redesign their telehealth rooms to be trauma-sensitive spaces for students receiving outpatient telehealth services. They have had some unforeseen success, in addition to reported improvement student health and achievement. Teacher morale at the schools serviced by KWAFTC was also reported to improve. For instance, in two districts with shared usage space, the principals reported that that the rooms are being utilized more frequently. They have become a gathering spot for teachers to socialize, a behavior that had disappeared during the pandemic. These successes will likely have far-reaching effects, not just on KWAFTC clients and their families, but also on school staff as well as the greater student population.

This growth and willingness to think outside of the box to create new ways to provide systemic services attracted the attention of larger healthcare agencies. It afforded KWAFTC the opportunity to consider its future and the growth of school-based mental health services though the merger with larger local and regional healthcare agencies within our area. The goal is to build larger, more sustainable school-based mental health programs. Michael Rankin, LMFT, our former TIN Treasurer and a seasoned Kentucky private practitioner, is collaborating with Welk in Wisconsin to build similar private practice/school-based mental health programs in Kentucky and other states across the US.

Agency/school partnerships: A third way MFTs are partnering with schools is through agency/school initiatives. Anne Rambo, PhD, LMFT, is a seasoned Nova University faculty member who has practiced in Florida schools for many years. She and colleagues developed an alternative to suspension initiative, the Promise Program, which was designed to reduce recidivism and interrupt the school-to-prison pipeline with the help of MFT student interns (https://www.browardschools.com/Page/32438). While the Promise Program has met these initial goals, it afforded increased opportunities for risk assessment and early intervention with failing students. It has experienced increasing growth since the school district in which Rambo works experienced a lethal school shooting at Parkland. School shootings typically occur when the school shooter is forced into an abrupt transition from a smaller or more supportive school environment to a larger or less supportive one or fails out of school. Triggers include, for example, being removed from special education and forced into a mainstream program, or getting expelled, aging out, or otherwise being removed from the school environment entirely. The sad result is too often being forced to enter an adult life for which they are ill prepared (Baird et al, 2017). For instance, a day before the Robb Elementary School shooting in Uvalde, high school seniors from nearby Uvalde High School walked the halls of the elementary school in their graduation robes to inspire the young students. The next day the school shooter returned to kill; he was a high school dropout with little hope for his future (https://www.texastribune.org/2022/05/25/uvalde-texas-school-shooting-community/). While gun control and other factors are important as well, ensuring through school based mental health services that fewer students face unsupported failure is a major objective.

The Disastershock Global Response Team:

A final example of systemic initiatives we have observed is the collaborative partnership formed by the Disastershock Global Response Team. The DGRT is an international humanitarian relief organization dedicated to providing coping resources to children and families affected by disaster-related stress. The Disastershock Global Response Team is a special interest group of the Oxford Symposium in School-Based Family Counseling, which is sponsored by the Institute for School-Based Family Counseling. It is an all-volunteer

organization with members from twenty different countries. When a natural or human-caused disaster occurs, the goal is to provide practical resources on coping with disaster-related stress for persons affected.

Disastershock Ambassador Program:

Disastershock, 2022 is a recently designed program to give high school students from around the world an opportunity to participate as interns in the Disastershock Global Response Team (DGRT) efforts. Eileen Klima, MS, LMFT, school psychologist and family therapist is a leader in that initiative. The DGRT Ambassador Program was developed during the COVID-19 pandemic to help high school students develop their potential and experience a positive impact on the world. The high school students work with other professionals as colleagues and find the most direct way to deliver the materials. This program builds systemic optimism and influences generations to come. The high school students work together as a team and responded to many international disasters during the 2021-2022 school year, including volcano eruptions, tsunamis, tornadoes, flooding, school and community shootings, and the war in Ukraine and the neighboring countries who received the Ukrainian refugees. The students researched on the internet where to best send the Disastershock information, including universities, public schools, nonprofit agencies and government agencies, explaining the material accompanied by attachments and links in the language of the country impacted by the disaster. The students kept track of where the information was emailed and reported back to the DGRT Ambassador Team on a weekly basis.

Multidisciplinary Collaboration

Public Law 94-142, the groundbreaking US federal special education law passed in 1975, was instrumental for promoting the importance of inclusion of all children in education in the US, regardless of their special learning needs. It resulted in the development of specialized learning opportunities for a wide range of students with such developmental disabilities as developmental delays, speech and language delays, and visual impairments. But, like traditional US medical health care until the 1990s, that approach, known culturally as "eurocentric" (Carter and Hernandez, 2020, p. 351), relied on individualized assessment of specific students rather than a wider systemic evaluation of family, social and cultural variables that also contribute to student achievement.

Several legislative initiatives are now emerging currently that foster a growing array of multi-tiered and multidisciplinary systems of support (MTSS) for students in schools (Goodman-Scott, Betters-Bubon & Donohue, 2019, p. 1). Health and education professionals are becoming more sensitized to the systemic impact of racism, poverty, and service access on student achievement, health, and resiliency (Laundy, Cushing, Fuqua, Rankin & Klima, 2021). Increasingly, schools are developing collaborative health care teams to develop services and programs promoting student achievement and resiliency. Mental health teams now increasingly include licensed mental health counselors, family therapists, psychologists and social workers who are systemically trained. And members of the six mental health professions, who were traditionally trained in siloed programs, are realizing the benefits of collaborative multidisciplinary practice in health care and in schools (Cholewa & Laundy, 2019, p.222).

It is not a coincidence that professional counselors and family therapists, two of the six US licensed mental health professions in the US (including psychiatrists, psychiatric nurses, psychologists, and social workers), were nationally licensed as systems theory began being

incorporated into US health care and education training in the 1990s. As such, professionals licensed in the disciplines of counseling and family therapy are the most universally trained in systems-based practice, although the other four mental health professions are increasingly adopting systemic training into their training curricula. Systemically trained mental health clinicians have become increasingly integral team players in education during the past few years of pandemic and sociocultural distress. As Margaret Mead once said, "Never doubt that a small group of thoughtful, committed people can change the works. Indeed, it is the only thing that ever has'. (Laundy, 2015, Forward).

SUMMARY

This paper chronicled the systemic optimism that needs to be mustered to weather the challenges of the coronavirus pandemic and current sociocultural events in the US. The past few years have been extraordinarily stressful, but there are encouraging systemic developments in schools that are emerging to address those challenges. In this paper, the AAMFT Family Therapy in Schools Topical Interest Network described several creative ways that health services are being more systemically incorporated into educational initiatives in the US through multidisciplinary teamwork. We believe that there is opportunity for optimism to help school-based professionals weather the stresses of the pandemic and sociocultural events. It is our goal to help school-based professionals weather those current stresses, to combat burnout that challenges our practice, and to illustrate systemic initiatives that build optimism and ameliorate burnout.

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MakerMinds: Identifying the components for an engaging and innovative School-Based Mental Health programme

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ABSTRACT

From 2020 to 2023, several US schools added resources to their mental health and social and emotional learning programs to help students cope with the effects of the pandemic. This paper describes one particular program in two San Francisco schools. Faced with the challenge of engaging students meaningfully in therapeutic and psychoeducational learning programs, two schools explored three types of strategies: 1) one-on-one, group and family therapy, 2) classes in Social and Emotional Learning and Mental Health Education ("SEL" and "MHE") and 3) the creation and tending of social spaces ("MakerSpaces") for students. The program has three distinguishing characteristics. First, it teaches neuroscience and psychology at a younger age than most programs do. Second, it uses students' own creations - crafts, stop-motion animation videos - to make complex ideas more understandable, while enhancing social skills and self-control. Lastly, the intention is for the same person to act as a therapist, teacher, and social space creator, which strengthens the bond with students and destigmatizes mental health. Students, parents, and school staff liked the program, as seen in surveys and direct observations of student engagement and learning. The principals of the two schools continue to support the program, and a third principal invited the program to be implemented in a Title One school. Future studies will explore which elements of the program translate well across cultural and socioeconomic communities.

INTRODUCTION

Truth, like love and sleep,
Resents approaches that are too direct
-W. H. Auden

The Covid-19 pandemic from 2020 to 2023 led to an increased need for mental health services for kids and teenagers. Several American schools responded by focusing more on Emotional Learning (SEL) programs and School-Based Family Counseling (SBFC). School principals found that students' social skills had weakened after months of isolation due to the pandemic. Studies showed a worrying rise in mental distress among teenagers in 2021 (CDC, 2023). This heightened need brought attention to the current effectiveness of traditional SEL programming and SBFC offerings. Although younger students and their parents appreciated these programs, they were less effective with middle schoolers. This is a critical age for maintaining, refining and updating emotional and social skills, yet teachers find it hard to

engage these students in traditional SEL lessons. Furthermore, the stigma that is still attached to mental health and family therapy often undermines the benefit of having a therapist on site, due to concerns over confidentiality.

This paper focuses on some promising ways of engaging more meaningfully with elementary and middle schoolers through a combined role of therapist, teacher, and 'space maker' (someone who sets up creative social spaces). We aimed to make a lasting, positive change in students' emotional understanding, stress control, social behaviors, and identity formation. We called this program "MakerMinds" (inspired by Kistruck 2020, who developed an eight-session curriculum for fourth graders). Its goal is to create spaces for connection and meaningful growth experiences, helping students learn to care for themselves, others, and their communities. It also aims to provide more effective teaching and more opportunities for PreK-8 students to connect and practice caregiving.

This study aimed to answer three main questions:
1. Regarding *content*: Could teaching students about brain science and interpersonal psychology make them more likely to adopt more adaptive and prosocial thinking, emotional, and social behaviors?
2. Regarding *pedagogy*: Can collaborative 'maker' projects - which are social, multi-sensory, creative, and concrete - help students engage more deeply with advanced SEL content and learn it better?
3. Regarding *connection*: Does broadening the role of the school-based family counselor to also be a teacher and 'space maker' lead to a stronger positive impact on students?

Based on existing studies, we thought that:
1. Explaining human behavior through science would work better than simply giving advice and practice,
2. Using the 'maker' teaching approach would help students engage with the material, and
3. Expanding the counselor's role would increase its positive impact on student mental health and overall school relational health.

Literature Review

Science Content

The world is increasingly interconnected and complex, with access to vast amounts of information, global economies, public health crises, and challenges such as mass migrations, conflict and climate change. This complexity requires better cooperation among people, which in turn requires improved skills for self-control. A key ingredient for developing these more advanced self-control and collaboration skills is connectedness - the ability to build meaningful, two-way relationships with others. Schools play a primordial role in fostering and expanding such connectedness beyond the family. They are the environments that hold the most promise in providing the relational health most children need to thrive, by scaffolding students' social experiences and fostering a positive social climate.

Current American programs for Social and Emotional Learning (SEL) focus on developing emotional control and social skills in each individual (CASEL, 2023). However, the effectiveness of these programs varies (Haggerty, 2010). In primary school, numerous SEL curricula are readily available, widely implemented, and often integrated into instruction. In secondary school, there are fewer educators trained to deliver engaging and effective social-

emotional or mental health education (MHE). The task often falls upon homeroom teachers, who are not as comfortable dealing with teen psychology and mental health, and occasionally school counselors, who are not as effective in pedagogy. Students' engagement in SEL as taught in school tends to wane during puberty and early adolescence, only to rebound by late high school and college. In fact, psychology has recently become one of the top three Advanced Placement subjects for high school juniors and seniors and is now the fourth most popular undergraduate major overall. The challenge remains to create engaging SEL and MHE curricula that can capture the attention and meet the unique needs of middle school and early high school students.

Beyond the social and emotional skills emphasized by American SEL programs, the Organisation for Economic Cooperation and Development (OECD)'s Directorate for Education and Skills also values cognitive skills like critical thinking and creativity. Research shows a link between these cognitive abilities and relationship skills (Urban, 2023; Papaioannou, 2011; Briggs, 1962). That is why it might be beneficial to introduce developmental neuroscience and psychology to elementary and middle school students. The scientific approach to building knowledge, with its focus on observation and universal developmental processes, is a foundational building block for collaboration. Students prefer science-based explanations of behavior (Gopnik, 2016), made even more gripping and memorable with examples from the animal world. Lastly, understanding the science behind behavior and mental abilities contributes to reducing the stigma associated with various mental health conditions and behaviors, as it provides a framework for understanding these issues as complex, and rooted in both biological and social factors. This helps shift perceptions of mental health conditions from being a personal failing or weakness to a recognition of them as legitimate health issues that require understanding, empathy, and appropriate intervention. It empowers students with tools to think about their own lives and how they can shape them.

In conclusion, some studies suggest a need for more effective and engaging SEL and MHE at the middle school level, and the broader literature suggests potential benefits of incorporating neuroscience and psychology into these programs, both to bolster cognitive skills and to offer students a more compelling, science-based understanding of behavior.

Maker Pedagogy

Maker Pedagogy is a hands-on learning approach where students lead their own discovery journey through idea generation, design, experimentation, and building prototypes. This method of teaching is not only good for developing students' cognitive and relationship skills, but it also helps shape their identities as creative, engaged community members. Initially, MakerSpaces (places equipped with tools and materials for 'making') gained popularity as a way to improve access to Science, Technology, Engineering, and Mathematics (STEM) learning (Davee, 2015). However, high schools and colleges have recognized that these spaces also offer mental health benefits. The principles that make MakerSpaces great for learning also make them excellent for promoting mental well-being. They are social, encourage reflection and open-ended exploration, promote teamwork, and involve the creation of expressive items. They also add a facet to the usual asymmetrical relationship between adults and children in a school setting: instead of adults as instructors who hold the knowledge ('sages on stage'), they become facilitators ('guides on the side') or equal participants. Moreover, when students work on 'maker' projects to create furniture or other items for common use, it enhances their feeling of belonging to their school community. In other words, Maker Pedagogy not only fosters

cognitive and relational skills but also contributes to mental wellbeing and a sense of community.

Multiple Connections

The most significant contribution schools can make to students' mental health may be providing as many opportunities for 'reciprocal attunement' as possible. Also called 'synchrony' or 'resonance' by some researchers, it indicates a way of being together that does not necessarily require words. When a group of students plays a ball game or a board game during recess, they may be in such a mode if they are in a rhythm of responding to each other. In a conversation, this quality of interaction would be captured by 'conversational turns,' a tool used to assess language environments. A conversational turn is when a student says something and an adult (or another student) responds within five seconds. A school counselor responsible for students' mental health may consider one of their objectives as being making sure every child participates in at least a minimal amount of conversational turns daily. This mental health goal focuses on strengthening relational health, rather than only providing targeted interventions to students and families in need.

While many students socialize with their peers during recess, some do not. Children and teenagers who are isolated often experience feelings of alienation during these unstructured periods. Having noticed this need, some schools introduced "buddy benches" where kids sit when they are lonely, awaiting someone to come and involve them in their games. An alternative is a workbench equipped by a counselor with music, craft supplies or board games. The counselor is there to gather the students they believe would benefit, scaffold the initial interactions and step away when exchanges among students take off. These social spaces offer environments for connection that contribute to a range of mental health and wellbeing interventions. They range from preventive relationship-building to response during a crisis. The approach allows all students to have therapeutic experiences without stigma. Perry has shown that using these methods to build trust with sensitive youth, which provide many opportunities for casual connection, are very effective (Perry, 2017.) If students interact with a school-based adult in an informal way every day and if that adult coaches everyone on social and emotional topics, then students are less likely to feel singled out by later needing one-on-one sessions with that adult. This existing familiarity can help build rapport quickly. Conversely, such an adult won't need to wait for referrals from teachers or families to start working with students. Instead, they are in a stronger position to identify situations that require immediate or ongoing interventions, either individually or in groups. This puts the school-based family counselor in a much better position to work with families, teachers, and students to catalyze helpful changes in the students' most important relationships (Gerrard, 2013).

In brief, the literature indicates the potential of a more interactive, relationally-focused approach to mental health and wellbeing in schools. This holistic approach caters to the entire student population, removing the stigma from mental health discussions and interventions.

In conclusion, the literature suggests that the three key factors—understanding of neuroscience and psychology, the Maker Pedagogy, and the expanded role of a school counselor—could come together to create a more inclusive, engaging, and effective approach to student mental health and schoolwide wellbeing. Understanding neuroscience and psychology at an earlier age offers students a scientific perspective on their behavior, de-stigmatizes mental health, and equips them with empowering tools to make some decisions (within their ability) about daily life. The Maker Pedagogy, on the other hand, enhances

creative and relational skills while also fostering belonging. It offers a unique way to engage middle school students in uncomfortable emotional content. Lastly, the expanded role of the school counselor strengthens connections and builds trust. Instead of limiting their interaction to targeted interventions, counselors become daily fixtures in students' lives who can address mental health concerns without creating stigma, responding flexibly, in real time, when needed. So overall, understanding neuroscience and psychology, employing Maker pedagogy, and enhancing the role of a school counselor can combine to boost student mental health and wellbeing.

Research Methods

Description of the MakerMinds program

The MakerMinds Program integrates three levels of intervention (see Table 1).

Table 1. Levels of intervention of the MakerMinds Program

Role / Impact	Interventions	Description
Teacher / Whole school (Tier 1)	SEL and MHE classes, leveraging maker pedagogy	Thirty-minute monthly classes for all elementary grades ("Monthly Mindful Moments") and ninety-minute weekly classes for middle school students ("Mindfulness Class")
"Spacemaker" / Vulnerable groups or students (Tier 2)	Social Maker Spaces	Social maker spaces (e.g. Art Carts, Maker Spaces) are made available during lunchtimes and extended care hours to interested students, and particularly new or isolated students who benefit from social 'scaffolding'
Therapist / Individual students (Tier 3)	Individual and group therapy, using play, art and maker therapy	Individual therapy sessions extensively use art and making, as well as student-designed and student-built materials (e.g. "Mood Board")

Data

The program was developed in two private San Francisco schools: the Lycee Francais, a French-immersion PreK-12, and Saint Philip's School, a Catholic K-8 school. The students exposed to the MakerMinds initiatives were about 200 at the Lycee (grades 6-8, occasional classes to High School) and 250 at Saint Philip's School (all grade levels). In both schools, students came from families from medium to high socioeconomic status, were quasi all caucasian, and had french and american nationalities.

The data included qualitative observations and responses to survey questions.

Table 2. Psychological tools used for assessing Mindfulness Classes and MakerMinds Program effectiveness

Mindfulness Classes (Saint Philip School, grade 8, 36 students, spring '23)	MakerMinds Program (all grades, 2021-23)
Qualitative student feedback on the whole course *[data set 1]* **Assessment of student behavior** carried out during eight of the twelve sessions. Each student was rated across the following categories: Contributed significantly, Participated, was Disengaged, was Disruptive to others, or was marked Absent *[data set 2]* **Evaluation of student effort** in three specific exercises, and in maintaining their class journal *[data set 3]* **Quantitative pre- and post-tests on a "Celebrities" project:** Students scored their agreement with the extent to which early life experience influences adult life outcomes at the start and at the end of a five-week project *[data set 4]*	**Observations of student engagement** during Monthly Mindful Moments *[data set 5]* - Year-end **survey** to parents and staff - to gather feedback on the perceived benefits of both the Social Spaces and the SEL Classes (K-8). *[data set 6]* - Saint Philip School Principal **interview** *[data set 7]* - Optional **appreciation notes** from 8th grade students. Year end notes students volunteered to express appreciation for something that stood out for them *[data set 8]*

Interview questions included:

[data set 1] 36 grade 8 students on the whole course:
- What did you like most about the class?
- What did you dislike / what was confusing?
- What would you like to see changed?

[data set 4] 17 grade 8 students expressed their views on a 1-5 scale:
- How successful was the celebrity you studied (1-5)? To what extent was their success due to innate qualities (1) versus positive upbringing (5)?
- How troubled was the celebrity you studied (1-5)? To what extent were their troubles due to innate flaws (1) versus negative upbringing (5)?

[data set 6] 8 parents and 2 staff members answered survey questions:
- How valuable did you consider the Mindfulness Classes?
- How valuable did you consider the Social Spaces (Wellness Space, Art Carts, Maker Space)?
- What did you appreciate the most?
- What would you suggest we do differently next year?

[data set 7] Saint Philip's School Principal Interview questions:
- What was your initial vision for the Mindfulness Elective for middle school? What surprised you? What elements do you wish to keep? What was missing?
- What parts of the MakerMinds program (i.e. the social spaces) did you envision before we set it up? What surprised you? What elements do you wish to keep? What was missing?
- How did you think school mental health and wellness was impacted by having the school therapist conduct classes and animate social spaces in addition to providing counseling?

Methods

Tabla 3. Description of the methodology used in MakerMinds program

Research question	Data used	Analysis
Content: Is an understanding of the science (brain development & functioning and interpersonal psychology) valuable?	*[data sets 1, 2, 3, 4, 6, 7]* Observations of student engagement, direct feedback by students, parents, staff and the Principal	- Analysis of qualitative themes and quantitative data. Assessment of how lessons with a higher science content were received (what students explicitly highlighted in their feedback, whether teacher observations of behavior showed more engagement) - Compare pre- post-test results *[data set 4]* - Identify opportunities for adjustments
Pedagogy: Do collaborative 'maker' projects increase students' engagement with the content?	[data sets 1, 2, 3, 5, 7, 8] Indicators of engagement and learning	- Analysis of qualitative themes and quantitative data. Assessment of how lessons with a higher making component were received (what students explicitly highlighted in their feedback, whether teacher observations of behavior showed more engagement) - Identify opportunities for adjustments

Research question	Data used	Analysis
Connection: Was the combined triple role of therapist, teacher and "spacemaker" positive?	*[data sets 6, 7, 8]* Survey responses and Principal reflections	- Identify themes in parent's surveys, Principal interview, and student appreciation notes - Identify opportunities for adjustments

Ethical Considerations

The community of students and staff were informed that our initiatives were part of a research project and gave their permission to use anonymized feedback data for those purposes. Specifically, 8th grade students in spring 2023 were given access to consent forms on their Google Classroom page - which was also accessed by parents and faculty. The Principal had given prior permission by signing a separate Consent Form for the school.

Results

The data gathered was not sufficient to thoroughly prove or disprove our first two hypotheses, and broadly support the third. Several elements point to opportunities for program refinement and further study.

Science content

On the question of whether a science-based understanding is effective in engaging middle school students in SEL and MHE content, the results are ambivalent:

- When asked directly whether they found brain science interesting, most 6th grade boys responded positively while most of their female classmates responded negatively.
- A majority of 8th grade students were fascinated by science stories, which took the form of descriptions of psychologists' experiments and real life stories by psychiatrists. For example, the lesson during which we read a psychiatrist's rehabilitation of children who survived the Waco siege in 1993, his diagnosis based on heart rates, and his explanation of stress response sensitization gathered positive results (with 17 out of 31 students that day listing this story as their favorite part of the lesson.)
- In a 5-week group project, grade 8 students picked a celebrity whose childhood and youth experiences they researched. Pre- and post-questions inquired on the relative importance of innate personality traits and the first twenty years of life experience in how celebrities' adult life played out. The hypothesis was that taking a closer look at how life experience affects brain development would shift students' answers slightly away from 'innate personality traits' (1, on a scale from 1 to 5) and more towards 'life experience' (5). Results were ambivalent: while true for adversity (post-test average of 3.62/5 vs pre-test average of 3.29/5), this was not true for nurturance (2.90 vs 3.14.)
- The Principal's view was that "*Neuroscience might have been too academic, preventing some students from getting immersed. For the older ones, it's important they get part of the 'why'.*"

Maker Pedagogy

On the question of whether maker pedagogy enhanced SEL and MHE learning, results were also ambivalent.

- Unquestionably, making was stimulating. However, whether the excitement was distracting or conducive to deeper understanding is unclear. Some students put effort into adequately informing their classroom journals, answering prompts thoughtfully, and filing their handouts. In 8th grade, about six of the twelve groups also put effort in producing presentable trifolds for the Celebrity project. Classes that involved a change in the environment - change of location or of seating plans - and the use of unusual equipment and materials - glue guns, pipe cleaners, play doh, LED lights and so on - generated excitement. The behavior scores of the classes that had significant making components were worse than the ones where we used interactive powerpoints and remained inside their usual classrooms: that was expected, and not interpreted necessarily as lesser engagement. In their feedback on some of the Maker classes, opinions were positive: there were more explicit mentions of students enjoying (13) than not enjoying (6) the move from their homeroom to the Maker Space to work on the group maker project. Future studies could include indicators such as:
  - *Concept recall:* compare the concepts for which there was a tangible artifact created to those for which there was only an interactive lecture or a story
  - *Quality and quantity of group interactions:* compare interactions around collaborative maker projects to interactions in classes with only group discussions and sharing
- Outside the classroom, on the Art Carts and Maker Space during lunchtimes or after school hours, the findings clearly support our hypothesis. Making was a real alternative collaborative activity to the traditional social groupings and modes of interaction. Students who were not into competitive team sports found a space in which to be social around music, while working on creative projects. The Principal noted that the *"social spaces were a success story for some lonesome middle schoolers. To see them engage at recess and not feel so 'othered' was great. Watching the younger ones socialize, chit chat, roam around… these spaces helped them develop social skills, and it showed all kids that being there was normal - there was no stigma."* She also highlighted that parents were very impressed with the existence of such spaces and made them essential stops on the school tour for prospective families. The therapy spaces in both schools became appropriated by students as their own sanctuary. This was reflected in the Lycee's community survey in June 2021, to which 30 people responded (students, faculty and parents), which gave the Wellness Center an even higher overall grade than the SEL classes. Note that the classes were popular with parents, faculty and staff: 62 parents had opted into receiving a weekly email summarizing the week's lessons. The Lycee is currently remodeling the Wellness Center and giving it a larger space on campus.

Multiple Connections

Lastly, on the question of how combining the roles of therapist with those of teacher and spacemaker played out, the results seem to be vastly positive. A noteworthy observation is that middle schoolers frequently came to the therapy office (which was called "Wellness Center" at the Lycee and "Wellness Space" at Saint Philips) in pairs or small groups, even when only one person had an issue to discuss. This suggests the need for non-pathologizing interactions in informal group settings. This was facilitated by not being viewed solely as a school therapist.

- Students' expressions of gratitude and parents' appreciation corroborate these views: "*You helped me feel more comfortable talking to people. I loved helping with all the projects and activities. I can't convey the impact you've had on my life but I wish you well." "You have helped me through many emotions and I I really appreciate the makers space you gave us the opportunity to attend." "Thank you for being a supporter in my life" "For the time that you were here you have been my lifeline at this school. Thank you for your kindness and dedication. You have brought communities together through the maker space upstairs in the beginning to the current one downstairs and on wheels. So thank you for all the fun times and the care you gave."*
- Saint Philips School Principal compared the integrated approach favorably to previous counselors' therapy-only model: "*It used to be called the Counselor's room, before you turned it into students' Wellness Space. Going in there once used to be ok, but then stigma was attached, so we had to find ways to wiggle students out of class without anyone noticing. That's no longer the case."*

A more rigorous analysis in the future will require a comparison with control groups exposed to a traditional SEL curriculum and the usual School-Based Family Counseling model. Furthermore, averaging all student feedback can lead to a loss of insight: future studies will segment students in groups based on behavior and analyze group insights.

Discussion

Although the data did not fully support the hypothesis that a science-based understanding of brain functioning and interpersonal psychology is more effective than traditional approaches to teaching SEL, there were sufficient indications that the approach holds promise. The ambiguous results can be ascribed to poor data quality and to leader effects - the school counselor's own relative lack of experience as a middle school science teacher. The Celebrity project's pre- post- test comparison was puzzling. The partial shift in beliefs about the impact of experience may reflect a common bias in perception: adversity and abuse are explicit, notable events, whereas appropriate nurturance and stable environments are less perceptible. Hence we could have expected that after taking a closer look at the first twenty years of celebrities' lives, students would ascribe a greater relative impact of adversity in the person's later troubles than before. We could have expected a smaller impact of positive life experiences - that the impact went in the opposite direction is puzzling.

Similarly, Maker pedagogy holds promise, with some adjustments. Distraction and disengagement, when noted, can be attributed to a relative lack of experience in facilitating

project-based learning. Student feedback during such maker-heavy classes overwhelmingly mentions "chaos, all the people talking" as disruptive factors to their learning. Classroom management skills are essential to making such demanding experiences a success, as is a better calibration of student abilities to tackle the project, avoiding being too specific or too vague in the instructions given. Projects need to be better defined, organized and timed in advance, so that students may be in a position to explore and experience more during the activities.

The quality of student connection seems to benefit from wearing the three hats of therapist, teacher and 'spacemaker.' The impact of this multi-pronged approach rests in shrinking the distance between students and caregiving adults, and in the adult dissolving into a role of catalyst who improves interactions between students and others (their peers, teachers and parents.) That said, we see two potential limitations with the mode. First, it can create a dual relationship for children in therapy: troubled students who need the therapist's expressions of unwavering support in session may find it disorienting to be dealt with more sternly when standards of behavior are not upheld in the classroom. Second, this model may not be as effective in cultures where respect stems from a more assertive display of authority or expertise.

Conclusion

MakerMinds' goal is to *"give, model and teach youth how to care for their self, surroundings and society"*. The approach involves students, parents, teachers, and administrators, and focuses on delivering knowledge, building connections, and fostering highly interactive environments where no child spends a day without sufficient conversational turns, or entering some form of communal space where they feel they belong.

Future goals include implementing these initiatives in different contexts and testing their effectiveness, discussing them with a broader community of educators and therapists in the School-Based Family Counseling community, and then possibly preparing MakerMinds for inclusion in the CASEL Guide to Effective Social and Emotional Learning Programs, and exploring partnerships with Khan Academy, The NeuroSequential Network, and the OECD's Directorate of Education and Skills team.

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African Cultural Worldview and Indigenous Healthcare in South Africa: Psychological perspective

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ABSTRACT

The study explores the importance of African cultural worldview and Indigenous Healthcare in South Africa. Furthermore, the purpose of the study is to explore the relevance or irrelevance of psychological knowledge and content that is imported from Europe and America to the historically marginalised indigenous people in South Africa. The developers of psychological tests in South Africa, are faced with a complex challenge because some of psychological tests in African countries, are standardized for European and American population. This signifies that many psychological tests used in South Africa have been imported from Europe and America. However, South Africa has clients who are traditional and whose belief systems differ from that of Europeans and Americans. The training of psychologists in South Africa is therefore, informed by Eurocentric ideologies and western knowledge. In this article I identify the unfairness of some of the psychological tests and assessment methods that are generally imposed on indigenous African clients. The research methodology in this study constitutes a review of the literature. The body of literature on the use of psychological tests which are based on Eurocentric principles as well as the African cultural worldview in psychology informs the research methodology. In this regard. The critical theory serves as an important lens that assist the researcher to realise and explain the phenomena, draw conclusions as well as making predictions. The researcher is also acknowledging the importance and relevance of Indigenous Knowledge Systems, when providing psychological assessment and intervention to majority of the non-western people in South Africa. In addition, the African Personality model, which is based on African belief systems is presented. It is recommended that issues of diversity, be taken into consideration when training psychologists in South Africa in order to address the unique needs of the population it serves. In that regard the indigenous knowledge should be part of the training of psychologist so that they can provide relevant and appropriate psychological services to the Indigenous people of South Africa.

INTRODUCTION

The history of South African Education and training of Psychologist is very complex. Europeans settled in South Africa and later introduced segregation and apartheid policies to South African blacks who are the majority in the country. The segregation policies left the majority of black South Africans with deep psychological scars (Moletsane, 2013). During post- apartheid South African schools and universities opened their doors for all races. As a result, Black, Coloured, Indians and White children started attending the same schools. It took many years for leaners and students from different racial groups to trust and interact with each

other. John (2012) points out that African people functioning in a Westernized society may find themselves in a so-called 'in-between' state of being – experiencing themselves as being in the middle of their traditional ethnic culture and the more dominant or universal, often Western, worldly culture.

Due to the fact that education is based on Western principles, it does not address the needs of the indigenous people of South Africa. As a result, psychologists and mental health professionals in South Africa are challenged by the need to display cultural competence when rendering support services to clients from cultures different than their own (Kekae-Moletsane, 2004). Hall and Maramba (2001) support this statement by maintaining that issues of diversity need to be considered when rendering psychological services, in order to accommodate the needs of various clients and the groups they belong to. Cultural awareness and sensitivity are thus important throughout the process of psychological service provision. The majority of psychologists are white, are unable to speak the language of their African clients, and have limited insight into the cultural milieu (Bojuwoye & Moletsane – Kekae (2018).

Aim

It is a known fact that the training of psychologists in South Africa is informed by Eurocentric ideologies and western knowledge. The aim of the paper is to explore the importance of African cultural worldview and Indigenous Healthcare in South Africa. Furthermore, to explore the relevance or irrelevance of psychological knowledge and content that is imported from Europe and America to the historically marginalised indigenous people in South Africa.

METHODOLOGY

The research methodology in this study constitutes a review of the literature. A careful examination of the body of literature on the use of psychological tests which are based on Eurocentric principles as well as the African cultural worldview in psychology are looked at in this paper. The purpose of the literature review as a research methodology in this theoretical paper is to investigate the importance of indigenous knowledge by psychologists when providing psychological service to the indigenous people in South Africa. The research is thus theoretical in nature and does not draw on fieldwork.

The challenges faced by the Mental Health Practitioners in South Africa

In South Africa, mental health practitioners face distinct challenges when assessing or supporting clients from diverse backgrounds (Moletsane, 2016). Hall and Maramba (2001) emphasise the importance of psychology addressing issues of diversity, in order to address the unique needs of the population it serves. The importance of remaining sensitive to diversity and cultural differences and preferences emphasises the importance of on-going research in the field of psychological assessment and service provision.

In the 21st century, the relevance and value of mainstream or western psychology for non-western and multicultural clients is continuously being debated. As a result, practising mental health professionals are increasingly showing empathy and sensitivity when working with clients across cultures. However, the lack of meaningful normative data for different cultural and sub-cultural groups, and the fact that the norms of many psychological tests have been determined based on western and European participants remains to be a concern (Moletsane, 2013). Many psychometric tests currently implemented in South Africa directly

stem from similar tests initially developed in and for the contexts of the United States of America, Britain and Western Europe. The tests may be used in the South African context that are in actual fact mere adapted versions of tests that had been standardized in other countries (Moletsane, 2013). Such tests typically do not consider cultural diversity when being implemented.

It has become increasingly relevant to ensure the appropriate and suitable use of psychological tests. This can be done by identifying avenues for adapting and developing culturally appropriate measures, which can enable psychologists to apply suitable instruments during assessment of clients from diverse backgrounds. In this regard, concern is often raised in terms of the degree to which mental health professionals in general, but counselling and clinical psychologists in particular, may address the needs of a culturally diverse society (Kekae-Miletsane, 2004).

The role of culture in Psychological practice and intervention in South Africa

Culture has more than often occupied a secondary role in psychology as a moderator or qualifier of theoretical propositions assumed to be universal in scope. As already stated, the suitability of European American psychological theories for non-European American contexts are currently questioned. On-going debate focuses on the potential value of cultural sensitivity and consideration, to broaden the relevance of psychology (Hall & Maramba, 2000). It follows that mental health practitioners face the challenge of applying culturally competent skills when assessing or intervening with clients from various cultural groups. Especially in a country such as South Africa, which is marked by multiculturalism, mental health practitioners cannot ignore the importance of cultural differences (Kekae-Moletsane, 2004).

Culture defines and influences reality for all people, with or without their explicit permission or intentional awareness. Pedersen, Draguns, Lonner and Trimble (2002) emphasize the value of acknowledging the cultural context of clients when rendering psychological services, rather than moving this aspect to the periphery. However, because modern psychology first developed in a Euro-American cultural context, "mainstream psychology" remains to typically reflect Euro-American mono-cultural assumptions and biases in textbooks, theories, tests, ethical guidelines, methods and other aspects of the discipline.

Dana (2000) refers to culture as the variable that determines the context for operation of all other variables. In his model, Dana (2000) maintains that human behaviour can only be understood when the practitioner has insight into the culture of the client. It follows that cultural psychology implies the study of behaviour across cultures, in order to understand the behaviour transferred from generation to generation, more specifically in cultures different from, and often unfamiliar to that of the practitioner (Dana, 2000). This implies an understanding of the experiences and histories of people from different cultures. The important role of culture is increasingly acknowledged in the various fields of psychology, such as research psychology, counselling psychology or industrial psychology, when interpreting development, social behaviour, emotion, or thinking (Kekae-Moletsane, 2004). The majority of psychologists in South Africa, are white or Europeans and only familiar with the European and Western cultures. Therefore, when assessing the indigenous people of South African, they do not take into consideration the frame of reference of non-European clients or patients. Mental Health professionals who are non-European are critical about that approach and formed an indigenous psychology movement, which is highlighted below.

Emergence of the indigenous psychology movement

An indigenous psychological approach has been promoted by psychologists since the late 1970s (Hwang, 2010), with specific focus on the psychological assessment of and intervention with clients. Hwang (2005) highlights the fact that various psychologists conducted research in the psychological field of non-western countries at the time. As a result, pioneers of indigenous psychology continued propagating the implementation of such an approach to the field of psychology in non-Western countries (Nsamenang, 2000, Mkhize, 2004, Hwang, 2010, Kekae-Moletsane, 2004). Indigenous psychology is especially important in Africa, also in South Africa, due to Western psychological measures being applied to non-western clients who are not familiar with the western culture, and associated dissatisfaction with this approach (Kekae-Moletsane, 2004).

Initially, the majority of indigenous psychologists followed a bottom-up model-building paradigm (Kim, Park & Park, 2000). This initial school of thought was gradually developed, refined, and acknowledged as important (Odendaal, 2010). Hwang's (2010) conception described the major aim of developing indigenous psychology as building systems of knowledge according to folk wisdom. As such, the epistemological goal of indigenous psychology is to construct a series of formal models, where these models can be used to present the universal structure of the human mind, whilst accounting for individuals' specific mentalities in indigenous culture (Hwang, 2012).

Following initial research in the field, indigenous psychology gained the interest of practitioners and researchers in mainstream psychology (Odendaal, 2010). As a result, indigenous psychology is currently recognized across the globe, and practiced as alternative approach when assessing and intervening with clients from diverse backgrounds, more specifically clients coming from a non-western context. A deeper understanding of clients across cultures has been made possible through indigenous psychology.

Therefore, the origin of indigenous psychology can be related to the challenges associated with following a Western approach to social problem solving in non-Western cultures, resulting in less than optimal levels of success. Despite sound training in Western psychology, contexts of diversity have resulted in practitioners not being able to apply their expertise in their countries of origin in cases when they come from non-Western communities (Mukuna, 2014). As such, indigenous psychology can be viewed as the psychological approach that aims to understand human behaviour and mental process from a specific cultural context, relying on culture-related value systems, concepts, methods, beliefs and others resources, as practiced in the specific ethnic group. It follows that indigenous psychology is based on the political, economic, religious, and social elements and practices of the specific cultures involved. As the discipline of psychology originates from North America and Western Europe, it has been imported to other countries worldwide. The origin of indigenous psychology rests on the understanding that indigenous psychology follows an approach where psychologists strive to reflect the social, political, and cultural beliefs and traits of people across cultures (Mukuna, 2014). In light of this argument, the underlying principle of indigenous psychology relates to the fact that human behaviour is co-determined by the cultural environment in which a person develops and grows up.

Historically, psychology as a science has placed emphasis on philosophies related to universal truths, objectivity and rationality (Hwang, 2010). Experimental work, materialism, quantitative approaches, nomothetic laws and rationality were often practiced, more specifically in psychological work stemming from European or American movements. In

response, non-Western psychologists, argue that non-Western psychologists should focus on developing theoretical frameworks as part of the indigenous psychology movement, based on their experiences in the field when working with clients from diverse contexts, whether through practical engagement or while conducting research (Moletsane, 2013).

The mainstream psychology stems from Western Knowledge System (WKS). Similarly, indigenous psychology is based on Indigenous Knowledge Systems (IKS). As previously indicated, this movement emerged when psychologists coming from and working in non-western cultural settings started realizing that mainstream (western) psychology cannot be viewed as appropriate for all cultural settings and communities (Odendaal, 2010). At the time, psychologists in non-western countries thus realised that mainstream psychology cannot be regarded as universal approach that can be applied across contexts of diversity. As a result, the critical psychology movement emerged (Odendaal, 2010).

In this regard, Kekae-Moletsane (2004) emphasise how the imported Western psychology cannot simply be applied in its initial format when attempting to solve local social problems in non-western contexts. It follows that indigenous psychology is characterized by a focus on local phenomena, specific cultural contexts and building theory and practices based on context-specific beliefs. In the next sessions the critical psychology theory and African Personality model, which were developed because of the critique of the Eurocentric approach are presented. The African Personality Model was developed also to embrace the non-European psychological assessment and intervention of the indigenous people in South Africa.

Critical psychology theory

Critical psychology was developed in response to the application of Western approaches to psychological theory and practice, representing European and American-based philosophies and value systems, to non-Western populations (Nightingale & Neilands, 2000). Therefore, critical psychology questions the psychological processes, dynamics, capacities and practical applications related to emancipation, freedom, liberation and power structures of oppression. Research in this area typically relate to post-colonial beliefs, feminism and gender studies (Hook, Mkhize, Kiguwa, Collins, Burman, & Parker (2004). In South Africa, critical psychology generally represents a movement of resistance against the application of Western-based psychological approaches and practices to the various cultures that represents the country. Critical psychology challenges dominant perspectives in psychology, and aims to redress injustice, misrepresentations and imbalances in both the academic and professional sector, in terms of psychological practice (Mukuna, 2014).

According to critical psychologists, Western psychology falls short due to limited reflections on the limitations related to the application of a selected culture across contexts, discarding and not valuing knowledge and belief systems of other cultures (Mkhize, 2004). As such, critical psychology propagates the idea of the so-called 'colonial nature' of psychological knowledge. As a result, critical psychology rejects an approach where one culture is imposed on other cultures, and promotes the acknowledgement of existing indigenous knowledge systems (Mkhize, 2004). It follows that critical psychology encourages a psychological approach where a phenomenon is viewed from different angles, rather than merely viewing a client in a traditional Western and Eurocentric way (Mukuna, 2010). To this end, the focus often falls on power dynamics, racial alienation and colonial domination (Mukuna, 2010). This does not mean that Western ideas and world-views should be ignored, it merely proposes an integration of Western and indigenous viewpoints (Mkhize, 2004). This author believes,

African people are able to shift between different worlds based on the principle of dialogism, thereby internalizing all lived experiences of the social, historical and cultural worlds, in order to form self - perspectives. It is extremely vital for the Mental Health professionals in South Africa, to understand the frame of reference of the indigenous people in South Africa. In order to inform the Mental Health Professional about the Africans' believe system, the African Personality theory that was developed by Mokgadi Moletsane is discussed in the section below.

African Personality Theory

The majority of black people in South Africa consult traditional healers because they have faith in them. South African psychologists generally propagate co-operation and healthy working relationships between traditional healers and themselves (Louw, 1993). A comprehensive understanding of some types of psychopathology is found among traditional healers in African societies. Similar views also exist among traditional shamanistic healers in Europe and Asia, and among the Indians of North America (Kekae-Moletsane, 2004). In South Africa, indigenous cultures still have strong traditional beliefs and practices related to illness and health, more specifically in rural areas, where modern medicine may not be readily available (Kekae-Moletsane, 2004).
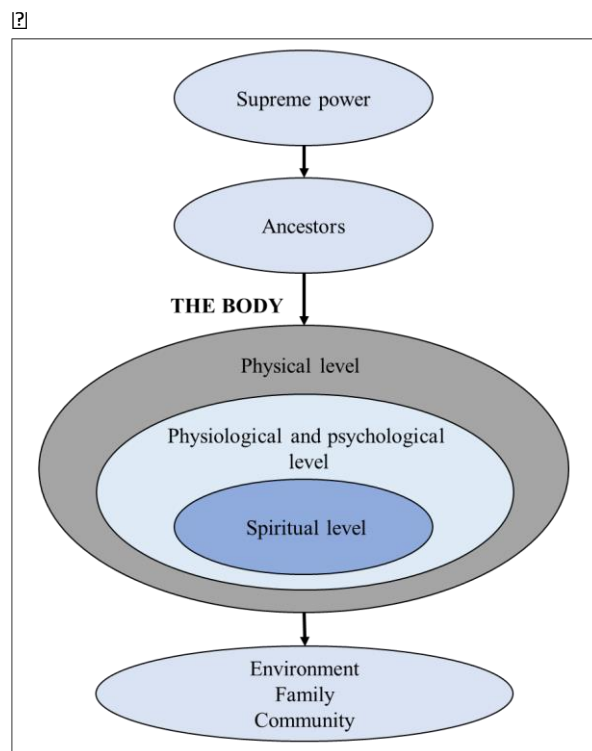
Figure 1. African Model of Personality
Botha K and Moletsane M (2012).

Berry, Poortinga, Segal & Dasen (2002) highlights the important difference in viewing people in indigenous and Western contexts. Whereas the modern (often Western) psychological view on human beings captures autonomy as essential, the African view of the same concept highlights coexistence of an individual with the community, the spiritual world and the ecological environment. In Africa, the existence of an indestructible vital force is typically emphasized, that will continue to exist in the world of spirits after human death. Accordingly,

personhood is regarded as a manifestation of this vital force through a body (Kekae-Moletsane, 2004). The African personality model is indicated in Figure 1.

According to African culture, a person exists because of other people. It is commonly known that "Motho ke motho ka batho ba bangwe" in Sesotho, which means, a person is a person because of other people while in isiZulu and iSixhosa, it is expressed as "Umuntu ngumuntu ngabantu". These phrases demonstrate the importance of collective identity in African cultures (Botha & Moletsane, 2012). For example, if a person does something good, the credit goes to the community not to the individual.

Africans believe that there is a powerful being which supersedes all of us. This supreme power is invisible and can be seen as God or comprising of more than one God (Botha & Moletsane. 2012). Ancestors are regarded as those who have died but whose spirits are still alive and are among the living and as a result, they are watching and protecting their living relatives. In that regard, it is believed that the ancestors play a crucial role in people's lives by communicating with God ('Modimo' in Sesotho) on behalf of the living. The ancestors use dreams, signs, or traditional or spiritual healers to deliver the messages from God (or the gods) to those who are alive. Louw & Edwards (1993) state that the relationship with the ancestors, and through the ancestors with God, permeates all beings.

The outer layer of the body represents a cover or container (Figure 1), of the human's body. The body needs to be active in order to be in a good physical shape. There are other levels of functioning, such as the physiological, which focuses on the body's physiological functioning and the psychological, which focuses on the stability of a person's mind are also crucial. The physiological and psychological levels of a person are important; for the body to survive and to be healthy, it needs good nutrition and a stable mind. The spiritual part is the inner part or the seed of a person. The spirit is regarded as the seed because it does not die even after the body has died. Berry et al., 2002) also regards the inner layer as the spiritual principle, which represents a soul that can never perish. It can leave the body during sleep and during trance states and leaves definitively upon death. Berry et al., 2002 further states that the spiritual principle does not give life to the body; rather, it has an existence of its own, belonging to the sphere of the ancestors and representing that sphere in each person. Every person has a connection or relationship with their environment; hence, people adapt to their own environment. If people do not adapt to their environment, they get sick. This happens because their state of equilibrium is weak. The firm connections between the gods or the supreme power, the ancestors, a person, the environment, the family, and the community is vital. This connection represents the state of equilibrium or sanity (Bojuwoye & Moletsane – Kekae, 2018).

On the other hand, a person will experience disequilibrium when one, more or all of the levels is/are not held firmly (Moletsane, 2013). People experiencing disequilibrium are generally unhappy, and may get sick easily or find it challenging to efficiently relate to others. This may for example occur when someone does not perform family rituals, thereby angering the ancestors. The African personality model described above provides a possible reason for mental illness or disorders, as well as background to potential treatment procedures. As in any other case, a traditional healer needs to determine where disturbances in connections may have occurred in order to make a diagnosis of an illness or mental disorder (Moletsane, 2013).

It is believed that a rupture in the connection between a person and the ancestors may cause a serious chronic psychotic state. In terms of the connection with family, the rupture in this area may lead to organic illness, while disequilibrium in the person-community

connection can manifest in more benign organic, psychosomatic illnesses or a neurotic state. As a first step of treatment, the site and nature of the rupture therefore needs to be determined, with the aim of restoring equilibrium through therapy or indigenous ways of healing by a traditional healer. Once the conflict between the person and the ancestors, family or community has been resolved, the connecting lines can be restored and healing can occur. It is therefore important that Mental Health professionals who practice in Africa, be informed about the African Personality model and understand the frame of reference of the patients so that they can be able to provide well-informed intervention and support (Moletsane, 2013).

Findings and recommendations

When assessing clients from diverse backgrounds, the mental health practitioners in South Africa, are faced with some challenges. South African landscape is marked by both cultural and linguistic diversity. There are eleven official languages which are, English, Afrikaans, isZulu, isiXhosa, isiSwazi, Nothern seSotho, Southern seSotho, isiTsonga, isiVenda, isiNdebele and Setswana. It is vital that the training programmes for psychologists include knowledge on one or more dissimilar cultures, with the effect of culture on behavioural and developmental trends in these cultures. It is therefore recommended that issues of diversity, be taken into consideration when training psychologists in institutions of Higher Learning in South Africa in order to address the unique needs of the population that they serve.

South African students in the field of psychology are often primarily trained in accordance with American-European models of education. However, this approach does not accommodate or embrace the unique background, circumstances, mental functioning and needs of the majority of the South African population. In fact, such western-based knowledge is applicable to a rather small section of the South African population, more specifically to white and black middle-class people (Louw & Edwards, 1993). Following this line of argumentation, Kekae-Moletsane (2004) observe that students in doctoral programmes are often not trained to provide culturally appropriate service delivery when conducting psychological assessments, or display the relevant social etiquette when interacting with clients from a different ethnic background. Students are typically not sufficiently provided with experiences in examining culture-specific perspectives that would be relevant for interpretation of test protocols.

Indigenous Knowledge System have been somehow ignored due to Africa's political history of suppression of human rights based on race and culture and partly from accelerating globalization. Many researchers and practitioners are questioning the relevance and universal validity of the Western Knowledge in Africa. Despite very strong foreign Western cultural influences, a majority of indigenous African people of Southern African hold on to their traditional cultural values. Western medicine is accepted only superficially, and many patients routinely consult traditional healers after hospitalization. Traditional healing and cultural legacies remain the realities people have come to understand and assimilate. Critical psychology theory is relevant in this paper as it interrogates many challenges that exist in psychology. Its aims are to redress injustice, misrepresentations and imbalances in both the academic and professional sector, in terms of psychological practice. Many clients who are Indigenous Africans, and not familiar with the Western knowledge and culture are often misdiagnosed when assessed with the existing psychological assessments, which are imported from Europe and America.

The development of African Personality Model has played a significant part as it has contributed knowledge in education and psychology. South African education has imported education system from the west and Europe, which do not take into consideration the frame of reference of Africans. This includes the theories that are taught in South African universities. The universities in South Africa, teach theories that are adopted from the West and some of them have no relevance to some of the indigenous people of South Africa. This motivated me as a researcher, to develop the African Personality Model which relates to the indigenous communities in South Africa.

Conclusion

It is evident that many psychological tests used in South Africa have been imported from Europe and America. However, South Africa is marked by clients who are, traditional and whose belief systems may differ from that of Europeans and Americans. This has resulted in the challenge of psychologists' training being informed by Eurocentric and western knowledge, yet within a context where psychological service provision is required for people whose belief system is often based on African beliefs. Because modern psychology is developed in a Euro-American cultural context, "mainstream psychology" typically reflect Euro-American mono-cultural assumptions and biases in textbooks, theories, tests, ethical guidelines, methods and other aspects of the discipline. This pose a challenge when assessing or administering those tests to majority of indigenous people of African continent.

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Using the Solution-Focused Approach with Immigrant and Refugee Students

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ABSTRACT

When working with immigrant and refugee students, it is important to use a counseling approach which: 1) is culturally sensitive; 2) is evidence-based; 3) helps engage students in the counseling process; 4) reduces the likelihood of retraumatizing students who have experienced past traumas; 5) assists students in identifying their personal strengths and coping strategies; and 6) helps build students' resiliency and sense of hope. Fortunately, Solution-Focused Brief Therapy (SFBT) meets these criteria and is a great fit for use with both immigrant and refugee students. SFBT is also a good fit with the School-Based Family Counseling meta-model for several reasons. For example, they are both strength-based, collaborative, culturally-sensitive, empowering, respectful, and action-oriented. Furthermore, the solution-focused approach can be adapted and used within all four of the SFBC meta-model quadrants. Unlike most other counseling and theoretical approaches, the solution-focused approach can be easily adapted for a variety of applications within school setting. It can also provide a common strength-based language that can be used both in and outside of counseling sessions.

INTRODUCTION

Immigrant and refugee students are likely to face a variety of challenges both in and outside of school. For example, they may be subjected to prejudice, discrimination, or microaggressions on a regular basis. They may have experienced trauma in the past or are currently dealing with traumatic situations. They may experience ongoing anxiety associated with their families because they are concerned that their family members could be deported or they may be concerned about loved ones who remained in their country of origin and are living in unsafe conditions. In addition, their families may experience financial difficulties, family conflict, or even intrafamilial violence before and/or after they resettled in their new homes. Some students may also be struggling with untreated mental health issues because they have an overall negative view of mental health care and they are reluctant to seek these services. This reluctance may occur because some students feel that receiving mental health services is stigmatizing due to how their cultures perceive mental health care. They may also mistrust mental health professionals and do not feel it is appropriate to discuss anything that pertains to symptoms of depression, anxiety, abuse or even PTSD with someone who is not a family member or a member of their cultural community (Miller, Brown, Shramko, & Syetaz, 2019).

When working with immigrant and refugee students, it is important to use a counseling approach which: 1) is culturally sensitive; 2) is evidence-based; 3) helps engage students in the counseling process; 4) reduces the likelihood of retraumatizing students who have experienced past traumas; 5) assists students in identifying their personal strengths and coping strategies; and 6) helps build students' resiliency and sense of hope. Fortunately, Solution-Focused Brief Therapy (SFBT) meets these criteria and is a great fit for use with both immigrant and refugee students.

Brief Overview of Solution-Focused Brief Therapy

SFBT was developed in the early 1980s by Insoo Kim Berg and Steve de Shazer with the help of their colleagues at the Brief Family Therapy Center in Milwaukee, Wisconsin. During the formation of this approach, the team observed hundreds of hours of therapy at the center, and they made note of questions and client responses which appeared to lead to clients experiencing real-life change. Unlike many traditional counseling approaches which use a deductive problem-solving method and focus efforts on uncovering explanations for why problems occur in order to resolve problems (Birdsall & Miller, 2002), SFBT emerged when practitioners experimented pragmatically and used an inductive manner for uncovering solutions (Berg & Steiner, 2003).

The solution-focused approach redirects attention and energy to identifying what possible solutions may already exist instead of concentrating on problems. The inductive process incorporated within the solution-focused approach is also similar to the trial and error method that children use to learn. Berg (1994) and de Shazer (1985) also believed that clients benefited more when therapeutic conversations focused more on the future instead of the past especially since the past cannot be changed and the future holds the potential for positive change. In addition, they asserted that it was more helpful for the clients to be asked to describe what the clients wanted in the lives (their preferred futures) instead of what they did not want (their problems). This switch to future-focused talk also helped clients identify their own goals. During their observations of sessions, the Milwaukee team also noticed that no problem was constant and there were often times when a problem was less intense, less frequent, or even absent (De Jong & Berg, 2008). These times were identified as "exceptions" to the problem behavior. Within each exception, lies a potential solution. By spending more time exploring identified exceptions and focusing on what clients were already doing that worked for them, it became easier for clients to notice possible solutions (Visser, 2013).

How SFBT Fits Within the School-Based Family Counseling Meta-Model

Solution-Focused Brief Therapy (SFBT) also fits within the School-Based Family Counseling meta-model for several reasons because both are strength-based; are collaborative; engage individuals in counseling process; are culturally-sensitive; help students and families identify their own resources; emphasize respect, caring, and humility; promote student success and wellness; and are action-oriented (Gerrard, Carter, & Ribera, 2020). In addition, SFBT can be adapted and applied for use in all four SBFC meta-model quadrants (School Intervention, School Prevention, Family Prevention, and Family Intervention). Unlike many other counseling theoretical approaches that have limited use outside of counseling sessions, the solution-focused approach can be easily adapted for a variety of applications within school settings. The solution-focused approach provides a common strengths-based language that can be utilized not only during individual, group, or family counseling sessions but also for classroom management, parent/guardian meetings, teacher consultation, staff meetings, etc (Sklare, 2005).

Evidence-based Support for Using SFBT in School Settings

Evidence-based support for the use of SFBT in school settings continues to grow. Numerous research studies which have been conducted throughout the world in countries such as Australia, Canada, China, India, Iran, Norway, South Africa, Turkey, United Kingdom, and United States have shown that the solution-focused approach can be used effectively for

multiple applications within school settings (Kim & Franklin, 2009; Kim, Smock Jordan, Franklin, & Froerer, 2019). This research has demonstrated that SFBT can be used with students from a wide range of cultural backgrounds including refugees and immigrants (Jabouin-Monnay, 2016; Moosa, Koorankot, Nigesh, 2017). Instead of focusing primarily on students' problems, solution-focused conversations highlight students' skill development, asset building, and coping strategy identification.

When used with individual students, SFBT has been shown to be effective for helping students deal with a variety of issues such as improving school attendance (Lovarco & Csiernik, 2015); reducing students' internalizing and externalizing problems (Bakhsipoor & Ramazanzadeh, 2016; Franklin, Moore, & Hopson, 2008); alleviating concerns and reducing the intensity of students' personal problems (Littrell, Malia, & Vanderwood, 1995); increasing assignment completion and accuracy (Fearrington, McCallum, & Skinner, 2011; Yarbrough, 2004); reducing academic and behavioral problems in the classroom (Franklin, Biever, Moore, Clemons, & Scamardo, 2001); and reducing test anxiety (Altundag & Bulut, 2019). SFBT has also been effective when applied in counseling groups designed to address topics such as helping students improve their self-regulation skills and increase academic achievement (Saadatzaade & Khalili, 2012); helping students who experienced bullying increase their coping skills and protective factors (Çopur & Kubilay, 2022; Wang et al., 2020); helping socially withdrawn students increase their sense of self-efficacy and self-esteem (Kvarme, et al., 2010; Springer, Lynch, & Rubin, 2000); helping students reduce school burnout (Ates, 2016), and helping students improve their grade point averages and school attendance (Newsome, 2004). SFBT,

Reasons Why SFBT Works Well with Immigrant and Refugee Students

As mentioned earlier, SFBT is a good fit for use with immigrant and refugee students. Listed below are some reasons why SFBT works well with these two populations:

1. **SFBT is inherently a culturally-sensitive approach**. It emphasizes respect, empathy, and respectful curiosity within the therapeutic relationship. It also believes that clients are the experts of their own lives. In turn, SFBT practitioners are described as taking a non-expert stance and leading from one step behind (Pichot & Dolan, 2003). By taking a "not knowing" stance and not making assumptions, SFBT practitioners invite clients to share how the clients experience and view their problems. Furthermore, SFBT practitioners do not determine what the best solutions are for their clients. Instead, the practitioners ask carefully constructed questions which help their clients identify solutions which are personalized and congruent with clients' cultures.

2. **SFBT is an evidence-based approach, and is developmentally appropriate for use with children and adolescents from a wide variety of cultures.** Numerous studies have provided evidence of SFBT's efficacy not only in clinical settings but also school settings (Gingerich, Kim, & MacDonald, 2012).

3. **SFBT believes that clients are the experts of their own lives and they help determine the goals in the SFBT counseling sessions.** In a sense, solution-focused practitioners can be viewed as the "taxi" or "Uber" drivers in sessions. It is their responsibility to ask their clients where they want to go (the clients' goals) and then help them get to where they want to be (their preferred futures) (Murphy, 2008).

4. **SFBT is designed to be a short-term solution-building approach which emphasizes the importance of the goal-setting process.** Since SFBT focuses on goal setting and solution building instead of concentrating on clients' problems, it may be ideal for clients who may be anxious about seeking support outside of their families (Ali, Liu, & Humedian, 2004). In addition, some individuals may not even view SFBT as "therapy" because sessions are not focused on the details of their problems. Instead, they may view SFBT as a fast and easy method for finding solutions for their problems with the assistance of trained practitioners.

5. **SFBT engages students in the counseling process.** Students are more invested in goals and solutions they generate on their own or co-construct with SFBT practitioners (Murphy, 2008). In addition, there is a greater chance that students will actually implement the identified solutions they helped generate especially if they have been successful using these solutions in the past (past successes). Students are also more likely to become engaged in a counseling process that focuses on their positive traits instead of their deficiencies (Sklare, 2005).

6. **SFBT helps students identify their own resources, strengths, and coping strategies that fit within their own cultures.** Solution-focused practitioners believe that all clients are capable of changing, and have inherent strengths and resources to help themselves–regardless of their level of functioning (Berg & Miller, 1992; Murphy, 2008). One role of solution-focused practitioners is to help clients identify these strengths and resources that they may have forgotten they possess, may be underutilizing them, or may not be using them at all. This collaborative strengths-based counseling approach seeks to empower clients by using competence-seeking activities (De Jong & Berg, 2008). By asking questions designed to help uncover times when the client was successful dealing with the problem (past successes) or examples of coping strategies the client used that worked, the solution-focused practitioner shifts the focus of the conversation to further highlight the client's existing competences and resources.

7. **SFBT helps to build hope by increasing the sense of agency and expanding pathways.** Since immigrant and refugee students may be faced with some complex and big challenges that can cause them to feel overwhelmed or hopeless at times, they may benefit greatly from approaches which help to build hope since hope is a powerful protective factor for students. SFBT provides an effective way to help individuals build hope because it 1) stresses the importance of assisting students to identify their own goals instead of practitioner choosing the goals; 2) helps students identify past coping strategies that worked for them which in turn helps them overcome constricted thinking and expand their pathways (ways to reach a goal); and 3) helps students identify their past successes which in turn helps students increase their sense of agency (Snyder, 2000). Solution-focused practitioners may also introduce the concept of courage or pride into the conversation and encourage the client to identify ways in which they demonstrated courage or things they feel proud about doing. Hopefully a client can move from perceiving themselves as a victim to a survivor to ultimately a thriver.

8. **SFBT believes that small changes can lead to bigger changes.** Immigrant or refugee students may face some big challenges or problems that may cause these students to feel overwhelmed or hopeless. To overcome these potential feelings, solution-focused

practitioners encourage students to first identify small changes that they feel would be more reasonable or easier to achieve. Breaking down changes into more manageable steps increases the likelihood that students can achieve them. SFBT never underestimates the importance of small steps. Solution-focused practitioners also make sure to highlight clients' microsuccesses (De Jong & Berg, 2008). Being successful at taking small steps toward a desired goal can help energize the client, generate hope, and lead to bigger changes. This slow and steady process for accomplishing goals is also a good fit for refugee and immigrant students who may have limited resources or have limited power to change their situations on a big scale. It is important to remember that small changes accumulate over time and they help create a positive forward momentum in counseling.

9. **SFBT's relationship question helps bring family and friends "into" counseling sessions.** In some cultures, there is a strong interconnectedness and closeness within clients' families and/or communities. By asking the relationship question, a SFBT practitioner helps include people who are important to the client in the counseling session even though they are not physically present in the room. For example, the practitioner may ask: "What would be the first thing your father would notice you doing when you are feeling more relaxed?" or "What would your best friend say is your greatest strength?"

10. **SFBT can help reduce the likelihood of retraumatizing students who have experienced past traumas.** One reason this is possible is because SFBT does not require a client to provide a detailed history of their traumatic experiences in a counseling session unlike many traditional counseling approaches which focus a great deal on the details of past trauma (De Jong & Berg, 2008). SFBT may also reduce the chances that clients become flooded with intrusive thoughts about their trauma in counseling sessions. Instead of spending a significant amount of time in a session talking about "what happened to the client" (i.e., past trauma), the majority of time in a SFBT counseling session is focused on discussing "what the client wants in their life" (preferred future) and "what the client did" (past successes) to help themselves deal with or even overcome the problem and/or trauma. In a recorded interview, Insoo Kim Berg stated that she did not even need a client to share their problem or trauma with her in order to help facilitate their healing (Huibers' interview). She only needed to know what the client's goals and preferred future were so that they could work collaboratively to identify a solution. Since clients are not required or expected to share possible painful deals about their pasts in solution-focused counseling sessions, they are likely to experience SFBT as a much less intrusive form of counseling. Immigrant and refugee students may also find this approach less threatening and may be more likely to engage in the counseling process.

Example of a First Session with a Student

Solution-focused practitioners realize the importance of language, and they use carefully crafted questions as tools to facilitate the identifications of clients' strengths and solutions (Berg & Steiner, 2003). Solution-focused questions and Socratic questioning are the

main tools/techniques of this approach. Below are typical steps taken in a first session with a student:

1. **Develop rapport with the student by using problem-free talk at the beginning of session.** When first working with a student, it is important to develop rapport and join with them (Berg, 1994). Encouraging "problem-free talk" such as asking about the student's interests and/or preferred activities is one way of connecting with a student.

2. **Begin the goal setting process with the student.** Instead of asking the student to describe the problem which brought them to counseling, the practitioner asks the student what they hope to get out of the meeting by using questions such as "*What are you hoping we can accomplish today by working together*?" or "*What are your best hopes for our meeting today?*"

3. **Ask the miracle question to help identify and describe the student's preferred future.** If a student struggles with identifying or providing details about their goal for the counseling session, it is helpful to ask the *miracle question* which is a hallmark of the solution-focused approach. The miracle question was designed to help a client visualize what their life would be like when their problem no longer existed (De Jong & Berg, 2008)

4. **Assist the student with identifying exceptions and past successes.** An *exception questions* asks the student to recall times when their problem was less frequent, less intense, or was not present. The *past success question* asks the student to identify what the student did in the past which lead to success in dealing with a problem (Murphy, 1997).

5. **Ask scaling questions**. A *scaling question* can assess: (1) how a student is feeling; (2) a student's motivation to change; (3) a student's confidence about finding a solution; or (4) a student's progress toward implementing a solution. (McConkey, 2002).

6. **Identify potential challenges (a.k.a. "Flag the minefields").** *Flagging the minefield* is a basic solution-focused technique designed to help prepare students for challenges they might encounter in the future when implementing their solutions (Sklare, 2005.

7. **Provide the student with direct and indirect compliments.** A *direct compliment* is a positive reaction or evaluation by the solution-focused practitioner in response to what the student has shared in a session. An *indirect compliment* is presented in the form of a question such as *"Wow, how did you manage to complete all of your assignments on time?"* (Fiske, 2008).

8. **Provide bridging statements and identify tasks.** Henden (2008) noted that a *bridging statement* often pertains to something that was discussed in the session and is then used to encourage the student to complete a small task (a.k.a."homework") before the student's next session. The purpose of these identified tasks is to encourage the student to begin implementing small parts of their solution.

9. **Summarize (collaboratively) and wrap up the session.** During the wrap-up and summary, the practitioner highlights the student's current coping skills and past successes at dealing with challenging times. The student is encouraged to help co-summarize the session with the practitioner. The practitioner also confirms with the student which tasks the student plans to complete.

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