We are experiencing a national crisis in youth mental health. A Washington State Healthy Youth survey in 2016 cited an average of 1/3 of the state’s 8th to 12th grade student population expressing depressive feelings or high anxiety and one in five students with suicidal ideation. In 2018, the percentage reporting suicidal ideation rose by 14% over the previous survey. As we emerge from the COVID-19 pandemic, numbers can be reasonably anticipated to be higher with the upcoming publishing of the 2021 survey.

Teachers and students alike recognize the importance of reducing the stigma of mental illness and the benefits of good mental health. Proven benefits include increased student productivity and, more importantly, reduced suicidal ideation. The stigma associated with mental illness has contributed to a well-documented eight to ten-year delay from onset of mental health issues and illnesses to delivered services, with many never even receiving care. While some students may now be receiving mental health education, systemic inequities also exist in terms of availability, delivery, and depth of content. Two obstacles largely contribute to this inequity.

First, while there is growing support for mental health education within teacher circles, educating youth in mental health is often thought of as potentially creating a demand for services schools do not have the resources to provide. In reality, research done in schools that currently teach mental health education shows both of those two concerns not to be the case. Students have been asking for mental health education integrated with physical health as a means of understanding the complexities of their own mental development and health and survey data shows students broadly express a value in the experience. More importantly, data shows that mental health education helps to eliminate stigma around mental illness. With delivered mental health education to youth, we see a new peer support network develop around youth in crisis, leading to faster tracks to care in the community, rather than solely within a school’s four walls.
The second significant obstacle to delivering mental health education is the time and effort needed merely to find and select a curriculum, not to mention orchestrating program implementation from scratch. Prior to MentalHealthInstruction.org, a teacher, district or even state educational organization had to perform their own exhaustive search for curricula or school presentations. With that search, there is often no guarantee the program meets the needs of a particular school, nor is there easily disseminated data to evaluate evidence-based programs. The cumbersome discovery process, followed by an almost impossible quest for evidence and feature comparison for any program found, essentially makes mental health education infeasible to implement.

But the advent of www.mentalhealthinstruction.org gives any teacher, school counselor or other staff member a comprehensive resource of professionally vetted curricula and school presentations to easily and quickly compare available programs at their fingertips. The site has three very important features.

1. A detail of every listing, along with an inventory of defined Mental Health Literacy Components. Each detailed listing also includes an inventory of six Mental Health Learning Standards as currently described by the Washington State Office of the Superintendent of Public Instruction as a comparison metric.

2. Each entry is backed with all available existing evidence and data surrounding the listing, as well as links to all available studies for both quick reference and in-depth review.

3. A Quick Reference Table is provided for fast, convenient comparison for all listings so that a choice can be made with ease and links followed to access and implement a chosen program.

In addition to these three important components, the University of Washington SMART Center has prepared an Implementation Guide Toolkit featured on the site that provides best practices for program implementation. This toolkit has a wealth of information to aid teachers with any facet of their teaching program across any subject matter, but is intended as a tool to help implement Mental Health Literacy with ease. The toolkit also provides resource links for more in-depth exploration in this area.
MentalHealthInstruction.org is the brainchild of Chad’s Legacy Project and was created in partnership with educational experts at the University of Washington SMART Center where programs were searched and vetted. The library currently focuses on Mental Health Literacy, which consists of four primary components:

- Understanding how to foster and maintain positive mental health
- Understanding mental health disorders and their treatments
- Decreasing stigma
- Understanding how to seek help effectively

MHL programs within this library focus on learning delivery directly to students in grades 8 through 12. Going forward, MentalHealthInstruction.org will undergo continuous efforts to ensure information accuracy following its Fall 2021 rollout. In time, it is the intent of Chad’s Legacy Project for this site to also house Social Emotional Learning programs, suicide prevention-dedicated programs and instruction programs for substance use disorders.

Yesterday, mental health education was an often-unrealistic aspiration. Today, it is an easily obtainable reality.

To learn more, visit www.mentalhealthinstruction.org