# Program Title: Mental Wellness for All: Empowering Elementary Students in Fond Du Lac and Milwaukee County.

Mental health plays a crucial role in our overall well-being. It is the way we think, feel, and behave. Childhood mental health encompasses achieving developmental and emotional milestones, building healthy social skills, and developing effective coping mechanisms for challenges. Children with strong mental health and well-being enjoy a high quality of life and can thrive in their homes, schools, peer groups, and communities. Mental health goes beyond the absence of disorders; it also involves a child's overall well-being and capacity to flourish (CDC,2024).

Metal Health challenges are a growing public health concern in Fond Du Lac and Milwaukee County, Wisconsin. Rates of anxiety and depression among children ages 3-17 has increased in the past 5 years, with a 23% increase in the months following the COVID-19 pandemic (Fox et al, 2024; Osorio, 2022). This is particularly pressing since mental health disorders if unaddressed can hinder academic progress and performance and impair social development that may have effects in adulthood (Schlack, 2021).

In children mental health issues can arise from a combination of factors, including early adverse experiences such as trauma, abuse, or parental mental health issues, as well as environmental stressors like school challenges and bullying (CDC,2024). According to StopBulling.gov children who are bullied are more likely to experience depression, anxiety, and low self- esteem than those who were never bullied (Board, 2019). Biological factors, such as genetics and brain development, can also contribute to mental health conditions. Additionally, a lack of stable, nurturing relationships or supportive environments can increase a child's vulnerability to mental health struggles. This compounded by socio economic disparities, according to the County Health Rankings, there are 580 residents for every mental health provider in Fond du Lac, which is significantly higher than Milwaukee's ratio of 270 to 1, and worse than the state average of 400 to 1. While Milwaukee has relatively better access to mental health providers, it faces a more pressing challenge with child poverty. In Milwaukee, 23% of children live in poverty, compared to the national average of 16% and Wisconsin's average of 13%. In contrast, Fond du Lac has a lower child poverty rate at 12% (CHR, 2024) (figure 1).

To address these challenges this program utilizes the Integrated Behavioral Model (IBM), which builds on the Theory of Reasoned Action (TRA) and Theory of Planned Behavior (TPB), and focuses on predicting behavior through behavioral intentions, which are influenced by attitudes, social norms, and perceived control (Glanz et al, 2015). It also considers factors like knowledge, skills, environmental constraints, and experience that can affect whether intentions lead to actual behavior. In the *Mental Wellness for All* initiative, IBM can help address mental health needs in elementary school children by targeting the development of positive mental health behaviors (e.g., seeking help, managing stress) through interventions that improve attitudes, reduce perceived barriers (e.g., stigma), and enhance self-efficacy.

The model's focus on motivation and intention can guide interventions that increase children's readiness to adopt mental wellness practices, while also addressing the practical constraints they may face, such as lack of resources or support.

# **Program Summary and Goal**

The program's mission is to improve mental health outcomes for elementary school-aged children in Milwaukee and Fond Du Lac Counties by increasing access to mental health resources, fostering positive attitudes, and building resilience. The *Mental Wellness for All* program includes multiple goals, one of which is to reduce mental health stigma. Success of this goal will be measured by achieving a 20% increase in students reporting reduced stigma around mental health topics within the first two years, which will be assessed through surveys. Additionally, the program seeks to equip students and parents with the knowledge to identify early signs of mental health needs and cries for help and to empower children to navigate their emotions in a positive way. This initiative will teach children that having emotions is normal, while also training 100 percent of educators and school staff in trauma-informed, culturally responsive mental health practices within three years. This will enable them to engage and increase the percentage of elementary students participating in mental health literacy programs.

These goals will be accomplished by creating workshops targeted at those responsible for shaping children and towards children themselves. The workshops will be aimed towards educating them how recognize signs of mental health needs in themselves and other, teaching the importance of seeking help and how to apply coping and relaxation mechanism.

#### **Behavioral Intention**

In the IBM, the primary factor influencing behavior is the intention to perform it, which is shaped by individuals' attitudes toward the behavior and the subjective norms related to it (Glanz et al, 2015). This program will establish a "Mental Health Ambassador of the Month Program" which will encourage students to participate and lead mental health initiative to earn badges for their contribution and work. Personal mental health journals and digital apps will help children set goals, track progress, and receive encouragement from counselors. To incentivize school participation, schools with highest engagement will receive rewards like funding for recreational or field trips.

## **Attitude**

Attitude is shaped by an individual's beliefs about the outcomes or characteristics of performing a behavior (behavioral beliefs), which are then influenced by how they evaluate those outcomes or attributes (Glanz et al, 2015). The program will foster positive associations with mental health practices through interactive activities. Virtual Reality (VR) simulations will teach children emotional regulation in engaging environments, such as resolving conflicts or managing classroom stress. It will also teach children breathing and countdown techniques to help cope with stress. Additionally, interactive storytelling booths equipped

with AI will personalize emotional learning experiences. These booths will allow students to engage in decision-making scenarios where they can choose how to react to various social and emotional situations. By providing real-time feedback and showing the consequences of different choices, the AI booths will help children understand the impact of their decisions on their emotions and relationships. This personalized approach will encourage self-reflection, and increase emotional awareness, all while fostering a positive attitude toward managing mental health.

# **Descriptive/ Perceived Norm**

Social approval is essential for this model, not just in how individuals perceive others but also in what they believe others think they should do (Glanz et al, 2015). Developing a role model system would be crucial for its success. These role models should be tailored by age to ensure relevance and engagement. For example, a 5-year-old might relate more to characters like *Bluey*, while an 11-year-old could look up to action heroes like Spider-Man or a basketball player.

It is also vital to consider differences in gender and culture when designing these role models. All could generate personalized celebrity figures to deliver lessons to students based on their preferences. Questions could be crafted in a subtle way so that the child believes they are interacting with the real celebrity, without being aware it is AI-generated.

Additionally, older, well-trained students could earn badges, as previously mentioned, by serving as peer mentors to younger participants. These mentors would be paired with younger students to normalize conversations about mental health. They could share how the program has benefited them and discuss how attending sessions with the school counselor has positively impacted their lives. Furthermore, the program's peer-mentorship initiative can provide children with a sense of safety and support in addressing bullying, which, as previously mentioned, is a significant source of mental health stress for children.

## **Self-Efficacy**

For this program to succeed, students need to feel confident in their ability to conduct the behavior. Self-efficacy refers to the level of confidence a person has in their ability to perform a behavior, even when faced with obstacles or challenges (Glanz et al, 2015). It's crucial for self-efficacy for students to possess the necessary information and abilities to execute the behavior. The program will increase children's confidence in managing their mental health by offering mindfulness sessions, resilience-building workshops, and a support system of trained professionals. Mindfulness activities, emotional resilience workshops, and the peer-mentoring previously mentioned will all enhance self-efficacy. Sessions will be held at school on a weekly basis, lasting no more than 30 minutes to minimize disruptions to the daily school curriculum and to accommodate children's shorter attention spans. These sessions are designed to feel less like additional schoolwork and more like a fun break from regular activities. Conducting them weekly will also help reinforce habits, which is a key element of the IBM model.

#### **Perceived Control**

Perceived control is influenced by an individual's beliefs about the presence or absence of factors that can either support or hinder their ability to perform a behavior (Glanz et al, 2015). These beliefs are further shaped by the perceived significance or impact of each factor in either enabling or preventing the behavior.

In order for this program to work teachers and students must feel confident in their ability to perform. Providing grounding tools previously mentioned like mindfulness practice (deep breathing) and cognitive behavior strategies which involve reframing negative thoughts will help them regulate classroom dynamics. Feeling supported makes educators more apt at tackling learners' mental health needs.

For students, tools for emotional regulation which will include some of the above-mentioned items like charting, journaling and coping skills kits will allow them to take responsibility and action in managing their own emotions. Coping skills kit will be designed to provide students with tangible, and accessible resources they can use whenever they feel overwhelmed or stressed. These kits will consist of practical tools such as stress balls, fidget toys, guided journaling prompts, and breathing exercises. Social-Emotional Learning programs will further provide students with essential skills such as self-awareness and self-management.

#### Parental and Teacher involvement.

This program can't work without proper parental and teacher involvement. Teachers will play a pivotal role in the entire process. A parent academy will be formed to provide workshops on mental health literacy and stigma reduction, along with strategies to support children at home. Parents will be encouraged to attend the school while their children are participating in these workshops, allowing them to gain reassurance that the content being taught is both safe and beneficial for their children. To ensure accessibility, the academy will offer transportation and childcare. Teachers will receive training in trauma-informed practices to better address student needs and foster resilience in the classroom. Mental health coordinators will support educators through monthly check-ins and resource-sharing.

#### Limitations

This is a very robust program that will obviously need a lot of resources, not only financially, with the incorporation of AI, which is extremely expensive, but also partners like mental health coordinators, transportation, childcare providers, parents, and teachers. Even if we provide all the above-mentioned socioeconomic disparities may still impact certain families. For instance, some parents may have to work long hours or multiple jobs, also parents who aren't emotionally available or children who don't have parents. Additionally, cultural stigma around mental health could limit participation, and ensuring consistent implementation across schools with varying resources might be challenging.

# Overcoming Barriers and Areas for Future Growth

Overcoming barriers for the success of the *Mental Wellness for All* initiative will require thoughtful strategies and a commitment to addressing systemic challenges. Partnering with local businesses, non-profits, and universities can help secure funding and reduce the financial burden of implementing advanced tools like Al. Offering flexible workshop schedules, such as evening or weekend sessions can ensure accessibility for families facing socioeconomic challenges. Providing free or low-cost mental health kits and journals can further support students in need. To address cultural stigma, it will be essential to create culturally relevant materials and involve trusted community leaders to advocate for mental health awareness. Consistent implementation across schools can be achieved through standardized training for educators and robust systems to monitor and evaluate progress.

To ensure this initiative continues to grow, it will be crucial to expand the program to middle and high schools and to incorporate family counseling in order to create a more comprehensive approach. Sustainability can be fostered by training educators and volunteers as ambassadors and integrating mental health literacy into school curricula. It will also be crucial to advocate for statewide policies that increase funding and require trauma-informed training for all educators will ensure long-term impact. Additionally, conducting longitudinal studies will allow the program to assess its effectiveness over time and adapt to better serve children, families, and schools.

#### Conclusion

The *Mental Wellness for All* program addresses a critical gap in mental health services for elementary-aged children. By applying the Integrated Behavioral Model, it creates a holistic framework that fosters positive attitudes, normalizes mental health conversations, and builds resilience among children, parents, and educators. While challenges exist, the program's comprehensive strategies and community-based approach offer a sustainable solution to improving child mental health outcomes.

# Charts

Figure 1

Mental Health Factor	Milwaukee	Fond Du Lac	Wisconsin	USA
Child poverty	23%	12%	13%	16%
Mental Health Provider	270:1	580:1	400:1	320:1

The primary factor influencing behavior, shaped by individuals' attitudes toward the behavior and the subjective norms related to it	-Establish a "Mental Health Ambassador of the Month" program to incentivize student participation in mental health initiatives.  - Use personal journals and digital apps for goal setting and progress tracking.  - Reward schools with the highest engagement through funding for recreational activities and field trips.
Shaped by an individual's beliefs about the outcomes of a behavior and how they evaluate those outcomes or attributes (behavioral beliefs	-Foster positive attitudes through interactive activities like Virtual Reality (VR) simulations for emotional regulation.  -Teach stress management techniques, including breathing and countdown exercises.  - Provide AI-powered interactive storytelling booths to personalize emotional learning experiences.
The influence of social approval, based on how individuals perceive others and what they believe others think they should do	Develop an age- appropriate role model system featuring characters (e.g., Bluey for younger kids, action heroes for older kids) Use AI to create personalized celebrity figures for delivering lessons.

- Encourage older students to serve as peer mentors and earn badges by normalizing mental health conversations and sharing program benefits. - Train peer mentors to model positive mental health practices and share success stories Refers to confidence in the - Offer weekly mindfulness sessions and resilienceability to perform a behavior, even when faced building workshops with with obstacles or trained professionals. challenges (Glanz et al., - Incorporate fun, engaging 2015). activities like emotional resilience workshops and peer mentoring. - Limit sessions to 30 minutes to accommodate shorter attention spans while maintaining consistency to build habits. - Reinforce self-efficacy through repeated exposure and practical tools. Beliefs about factors that - Equip teachers with tools can support or hinder the like mindfulness practices (deep breathing) and ability to perform a behavior and the perceived cognitive-behavioral significance of these strategies to help manage classroom dynamics. factors (Glanz et al., 2015). - Empower students with emotional regulation tools like journaling, charting, and coping skills kits. - Provide Social-Emotional Learning (SEL) programs to build self-awareness and self-management skills. - Create a supportive

	environment for both
	students and educators to
	feel capable of addressing
	mental health needs
	effectively

#### Resource

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