Tealeaf: Upskilling Teachers to Support Children with Mental Health Needs

The Global Youth Mental Health Need

- Youth Mental Health Issues Increased Post-COVID
 - Prevalence doubled in certain regions $(20\% \rightarrow 40\%)$; care providers have not also increased, 0 leading to a care gap and leaving many youth in need without mental health support.¹
- Teachers Are Increasingly Managing Student Mental Health, often without proper training.
 - A lack of mental health training can contribute to **teacher burnout**.²
 - **Classroom academics are affected**; students with teachers with mental health know-how \circ perform better academically (+8.5% improvement).³
- **Teachers Are Actively Seeking Mental Health Training.** •
 - Upskilling teachers provides professional development and improves student well-being. 0

Challenges in Traditional School Mental Health Approaches

- Most Existing Teacher Mental Health Interventions Fall Short of Meeting Clinical Needs.
 - Whole-class mental health lessons are less effective for children with clinical needs.⁴ 0
 - <u>One-on-one student counseling</u> requires too much time for a teacher to deliver.⁴ 0
- There Are Barriers to Teachers Learning Mental Health Skills.
 - Teachers cannot feasibly learn every diagnosis and specific support strategies for each.⁵ 0

The Solution – Tealeaf

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- Tealeaf (Teachers Leading the Frontlines Mental Health) teaches elementary school teachers (K-6) to use transdiagnostic techniques - applying the same principles across disorders without focusing on specific diagnoses - to support any student with any diagnosis in real classroom situations.⁶
- Teachers receive 1-3 days of training & are coached monthly during the school year to ensure use.
- Interactions with students with mental health needs are guided by psychological principles; teachers use Education as Mental Health Therapy (Ed-MH) techniques in their interactions.
 - Ed-MH is based on behavior theory, removing the need to know diagnoses and allowing use of transdiagnostic measures to address mental health.
 - Teachers learn to interpret behavior as one would for a crying baby, identifying if the need is for attention (comfort), escape (from discomfort), tangible (hunger), or sensory (wet diaper).
 - Teachers then pick measures from a menu of Ed-MH options to meet the identified need.
 - Measures are adapted from Cognitive Behavioral Therapy/Play Therapy (CBT/CBPT), Dialectical Behavior Therapy (DBT), & Behavioral Activation but selected to align with practices teachers already use (e.g., small group work, student leadership roles).
 - Measures are a **natural extension of existing classroom management**, not an added task.
 - For example, small group work addresses social anxiety; student leadership roles can boost selfesteem in withdrawn students.
 - Even subtle changes in phrasing or expectations (Figure 1) embed these principles into everyday classroom interactions.
- Overall, teachers are empowered to better manage their classroom. The support they provide is so welltargeted, though, it effectively serves as care, helps address the care gap, and improves student outcomes, as next.

Figure 1. Examples of Teaching as Usual Versus Education as Mental Health Therapy



share her work first.

Her teacher tells her: (1) To wait until it is time to

then and could be called on • to share (unclear outcome)



Roy wants to his share work first.

share (undefined time) (2) She can raise her hand



(2) Says if he cannot wait, he cannot share his work (clear, non-shaming consequence).



- Aria disrupts class
- Aria does not finish work •
- She kneels as punishment • She does not learn a new behavior



- Roy completes his work • Roy learns to wait (distress tolerance)
- New behavior is learned

Evidence Supporting Tealeaf

- Implementation Findings in Trials in Darjeeling, India Are Promising (where Tealeaf was created).
 - Teachers identified students in need with moderate accuracy.⁷
 - They showed high protocol fidelity and felt Tealeaf was feasible to deliver.^{6,8}
 - Teachers, students, and families expressed acceptability of Tealeaf.⁹
- Tealeaf Is Showing Impact on Student Mental Health, Academics, and Teacher Self-Efficacy.
 - Comparable to medication and traditional therapies.^{10, 11}
 - o India
 - Medium to large effect size (0.70) on child mental health symptoms.¹²
 - Only a **44% chance of still having symptoms** after 1 year of Tealeaf versus control (whereas a trial of an anti-depressant typically results in a 66% chance of still having symptoms).¹⁰⁻¹²
 - Large effect sizes in Math (0.79) and Reading (0.84), matching neurotypical peers.¹²
 - Philippines
 - Medium effect size (0.50) on child mental health symptoms.¹³
 - Medium effect size (0.50) on teacher self-efficacy.¹³

Tealeaf's Reach - 3 Countries

- India
 - Type 1 hybrid effectiveness-implementation trial (Mariwala Health Initiative funding).
 - Expansion to adolescent students (Doris Duke Foundation funding).
- United States
 - Pilot RCT in elementary and middle schools (University of North Carolina at Chapel Hill [UNC] Suicide Prevention Institute funding).
- Philippines
 - Set to scale across all 73 public elementary schools in Manila, reaching ~20,000-50,000 students-in-need and 150,000 students overall yearly.
 - Pilot trial in **5 schools (2023-2024)** (UNC Provost & Henry Luce funding).
 - Scaling trial of train-the-trainer model (2024-2026) (Brain & Behavior Research Fdtn funding).

Future Directions

- India Expansion
 - o Exploring expansion across the Darjeeling Himalayas and neighboring communities
 - o Open to discussions to expand Tealeaf to other regions of India
- Potential Expansion in the United States
 - Seeking partnerships to implement **Tealeaf in North Carolina**.
 - Open to discussions to expand Tealeaf to other states in the US.

Philippines Expansion

- o Pursuing nationwide scale in collaboration with the Bureau of Learner Support Services
- Seeking partnerships to support nationwide scale, such as digitizing training.
- Exploring incorporating Tealeaf into teacher education in college.
- Global Scaling
 - Open to discussions on expanding Tealeaf to other countries.

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