Program/support title: iyarn *School Wellbeing check in solution for whole school positive mental health promotion*

THEORY OF CHANGE:	Building student routines to stop, reflect and check in on their social and emotional wellbeing improves self-awareness and wellbeing.			
TARGET POPULATION	**INPUTS**	**EVIDENCE**	**ACTIVITIES**	**OUTCOMES**
• *Year 7 – 12 students* • *Year 7 – 12 teachers* • *School leader representative* • *Health and wellbeing staff* • Young people, teachers and Student Advisory Councils	• Student & teachers have access to either Mobile app or internet via computer desktop or laptop for access to check in app and support resources along with video conferencing for remote facilitator check-in support. • School Wellbeing leadership define support resources available to students that are year group appropriate • *One facilitators to run in-person or virtual sessions with school staff and wellbeing leaders generally school deputy principle* • *Facilitators to support the delivery of virtual group sessions for whole year groups* • *Space to conduct in-person sessions in schools - optional* • *Curriculum development costs -optional, if schools require customized student resources.* • *Research and evidence to inform program design*	We commissioned a synthesis of the evidence underpinning our model, led by UTS researchers. Key points are: **Whole-school approaches with youth engagement enhance otucomes** • There is increasing consideration in education policy at both a national and state level about how to support the wellbeing, resilience and mental health of students in Australian schools. Research on the effectiveness of these program in schools have found both universal and targeted interventions in school settings but argued that 'Enhancing youth engagement in these programs is necessary if program adherence is to be improved' (Werner Seidler et al., 2017). **The PERMAH positive psychology model and related approaches such as '5 ways to wellbeing' are well supported in literature for young people** • Many of these programs focus on a positive psychology approach based on work by Seligman (2002), Noble & McGrath (2012) and others. This approach, known increasingly as 'positive education', focuses on 'The empirical study of human wellbeing, strengths and resilience to negative life events and the conditions that allow individuals, groups and organisations to flourish' (Noble & McGrath, 2012). • These programs aim to build self-esteem, wellbeing and the ability to 'bounce back' from difficult experiences. The focus of these programs is primarily on developing individual skills and social and emotional competencies as well as communication skills. • Three principles underpin the definition and selection of factors/segments 1. **Conceptual:** They should be distinct (and ideally mutually exclusive), e.g. sport & exercise overlap, while 'activity' might mean physical activity, or being busy	*Core intervention involves 'checking in' by rating state on a set of agreed factors, represented as segments in a wheel. Young people can add a comment to their ratings, and view their ratings over time. Their checkins can be viewed by their teacher / year coordinator.* *The tool is integrated by:* • *School year group coordinators are trained in the iyarn tool.* • *School leadership teams curate the additional support resources* • *School leadership define appropriate responses/interventions for red-flag scores* • *Ongoing support throughout the school year with termly check ins* • *Students will have online access to resources linked to check-in results* • *iyarn team co-design resources and checkin factors/segments with school staff and/or students.* *School Wellbeing lead facilitates discussion after first term of iyarn use with the YAC (Youth Advisory Council) this youth advisory*	*Short term (1 – 3 months):* • *Improved ability to understand one's emotions, thoughts and values* • *Earlier intervention, access to age-appropriate support resources, and increases in help-seeking behaviour* • *Improved knowledge by young people of how to support personal mental health and wellbeing* *Medium term (6-12 months):* • *Improved school support culture through shared language and systems for support* • *Reduced likelihood of demonstrating generalised worry, fear or nervousness* • *Improved self-esteem* • *Improved student wellbeing* *Medium-term school-level outcome (6 to 12 months):* • *Student engagement and participation in the wellbeing programs provided to young people leading to greater enrolment and participation.*

		2. **Research:** Supported by research as being important for young people (and alignment with iyarn theoretical grounding in values-based education) 3. **Practical:** The identified needs within schools and the ways schools articulate (in their current, and developing practice) (build on what you have) The facilitator will assist the school leadership with defining the segment selection **Checkin apps support reflection and awareness** • Self-monitoring through tech-platforms (via mobile apps or websites) is an effective tool for building self-awareness and reflection (Bakker et al., 2016; Miller et al., 2015). Self-monitoring is a core feature of many evidence-based psychological therapeutic techniques including Cognitive Behavioural Therapy (CBT) and acceptance and commitment therapy (ACT). Self-monitoring of mood can boost overall emotional self-awareness which in turn can lead to improvements in self-regulation (Kauer et al., 2012).There is increasing evidence that that self- monitoring is effective tool for routine/habit formation (Shiffman et al., 2008). **Increased awareness and reflection via apps improves wellbeing outcomes** • Multiple studies have found that for young people the regular use of online platforms with a component of self-monitoring and CBT have been effective in reducing symptoms of anxiety and depression and increasing wellbeing over time (Bakker & Rickard, 2018 (correlational), 2019 (correlational); Clarke et al., 2015 (PRISMA systematic review); Eisenstadt et al., 2021 (PRISMA systematic review); Goldberg et al., 2022 (PRISMA+ systematic review); Kenny et al., 2020 (RCT); Lappalainen et al., 2021 (RCT)). • Some studies have linked self-monitoring with improved help-seeking behaviour for mental health in young people as well as showing promising early intervention outcomes (Rickard et al., 2016). Monitoring for early detection of mental health problems allows for early intervention, which improves longer term outcomes (Rickard et al., 2016).	*council amends the segment title and descriptions to meet the social and cultural needs of the schools young people.*	

		Resources provided in online mental health promotion improve wellbeing outcomes • Clarke et al., (2015) systematic review, found tentative evidence in support of online mental health promotion interventions – largely skills-based modular-format ones – for young people.		

Assumptions:

List and describe the assumptions associated with the theory of change and the external factors that may influence attainment of the outcomes.

- Self-report checkin data (and experience sampling methods) are an accurate method for young people to monitor their moods and mental health (reasonable evidence through multiple studies including (Miller et al., 2015; Rickard et al., 2016) This has been confirmed in a number of studies including for MH apps, MyCompass (Harrison et al., 2011) and mobiltype (Reid et al., 2011).
- App use is reasonably consistent (across duration, occurrences, or specific features); specific features of use and external measures for validation are not always reported which is a limitation in the evidence base for all such apps (Eisenstadt et al., 2021). However integration with more direct contact (which in class use would constitute) suggests this supports app use (Clarke et al., 2015; Rickard et al., 2016).

- Evidence syntheses assume that there is an alignment between the features of the target intervention and those in the synthesised evidence, the approach taken to reviewing the evidence sought to maximise this alignment