

Health Promotion Intervention Program Plan

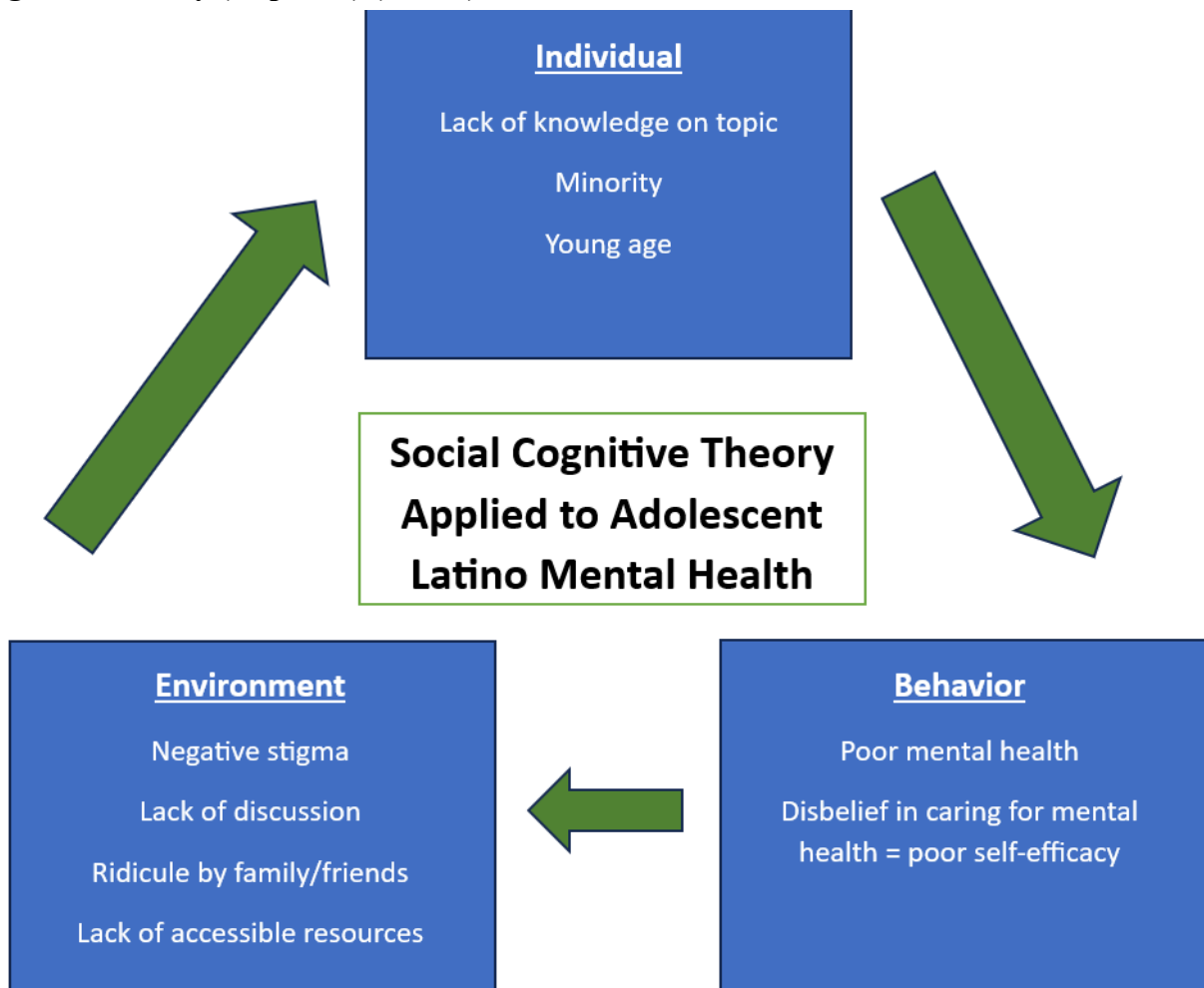
Theory of Behavior Change (50 points) -

For this intervention, I will be utilizing the Social Cognitive Theory (SCT) to guide the health promotion intervention framework. The Social Cognitive Theory is a theory that started as the Social Learning Theory by Albert Bandura in the 1960s, however, it later became the Social Cognitive Theory in 1986 with the addition of self-efficacy as a construct (LaMorte, 2022). One factor that makes the SCT stand out is its focus on social influence and how social reinforcement, both external and internal, affects one's behavior (LaMorte, 2022). SCT assesses the social environment, personal experiences, and how the two work together to push people towards certain behaviors and perceptions (LaMorte, 2022). Therefore, the SCT has a goal of explaining how behavior is regulated over time through control and various forms of reinforcement (LaMorte, 2022). This is primarily explained by six constructs: reciprocal determinism, behavioral capability, observational learning, reinforcements, expectations, and self-efficacy (LaMorte, 2022). In more simplistic terms, however, SCT can be broken down into three integral components: Environment, Person, and Behavior (Urich, 2017).

The main goal of this intervention is to improve mental health outcomes among Latino adolescents in Athens, Georgia by increasing knowledge on the topic and destigmatizing the conversation around it. The literature has shown support for the use of SCT in mental health interventions, with the main takeaway from this theory showing that learning for an individual is dependent on both one's experience and the witnessing of others performing a certain behavior (Islam et al., 2023). When utilized properly, it has been shown to influence others to learn more and alter perception and behavior overall (Islam et al., 2023). Therefore, the intervention will utilize a few of the main constructs, as previously listed, to guide the framework in achieving the program goal. The primary focus is on Reciprocal Determinism, which is the central concept of this theory and it refers to the interaction that occurs between person, environment, and behavior (Urich, 2017). What each of these entails within the program will be further explained in the figure of theory. The next construct is observational learning, which is built upon the idea that people will reproduce a behavior or perception after witnessing how others do so (LaMorte, 2022). This construct will be heavily applied to the program as a way to decrease stigma among students, by implementing a means for more discussion about mental health to occur in a safe environment. Reinforcements, whether positive or negative from internal or external responses, will affect how one acts or thinks (Bandura, 1998). This also builds off of observational learning and reveals great importance in ensuring the environment is welcoming enough to support positive mental health speak. Expectations also build off of this as people expect to see certain responses towards their behavior due to exterior reinforcements, which are often heavily dependent upon prior experience (Bandura, 1998). Finally, self-efficacy is one of the most important constructs, as it pertains to an individual's confidence in their ability to partake in a certain behavior (Bandura, 1998). This construct encompasses all previous ones since proper education on mental health will help improve confidence, as well as ensure there is a safe

environment for students to comfortably discuss and be rewarded socially for it rather than punished (Urich, 2017). The goal among all these constructs is to create a program that educates the students more on the topic of mental health and works to create a community that allows them to support each other and ensure they have a newfound positive relationship with mental health.

Figure of Theory (25 points) (Visual)



Description of Program/Intervention (50 points)

The planned program is a multifaceted school-based intervention that combines the efforts of school counselors and students to destigmatize and improve mental health. The primary population of interest in this initiative focuses on Hispanic youth in high school, however, minority youth, in general, are also greatly taken into consideration due to the school in which the intervention takes place. It will be held at Cedar Shoals High School in Athens, Georgia, the public high school with the most enrolled Hispanic students in the county. The school also has 87.1% minority enrollment, making the main demographics of the school

primarily Black, at 51%, and Hispanic, at 31% (US News, 2022). Even though the main focus is to improve mental health among Hispanic youth, the high amount of diversity has facilitated a need to ensure that other minority groups feel unseen when the intervention takes place. This works fairly well, however, because research shows that minority groups face significantly more substantial amounts of stigma on the topic of mental health, especially among family and peers (Mental Health America, 2022). There is a shared experience for many minority groups regarding mental health, heavy in the Latino community due to cultural beliefs and traditions such as machismo (Mental Health America, 2022). Therefore, much of what is to be discussed among counselors and learned by students is an approach with a multicultural context to mental health, with an emphasis on the Hispanic experience. The intervention works to both expand upon pre-existing mental health resources and establish a new one. This goal will be accomplished by having the intervention be split into three phases.

Research has shown that those of Hispanic descent respond better to mental health resources when counselors and therapists are either of the same heritage or have a deeper understanding of their culture (SAMHSA, 2020). It was found that many Latinos utilize *cuento*, or storytelling, to answer questions in a more narrative format, allowing for healing to take place through the sharing of culture and personal experiences (SAMHSA, 2020). Therefore, to improve mental health outcomes among this demographic, the first phase of the intervention will have current counselors work with local Athens organizations to learn more about how they expand upon their cultural competency in this regard. The goal here is to ensure that the students feel seen and that they can feel more comfortable discussing uncomfortable topics given that the adult understands more about the culture and how to navigate conversation. Given that this intervention is working to aid Latino students in their mental health journey primarily, it may serve as a benefit to see more familiar faces when discussing this topic. This is why during this phase, it is crucial to add at least one more counselor of Hispanic heritage to the pre-existing staff. The addition of a Hispanic counselor will show students that they have options for counselors to talk to, who may have similar shared experiences among students for causes of mental health distress. The experienced understanding of familial pressures to subside feelings of mental health due to cultural reasons is integral for a counselor to showcase their understanding, as it is a big part of why Hispanic youth have a strong negative stigma associated with it. Yet it is not only Hispanic youth that face struggles in the stigma of mental health, which is why the program will work with another organization to ensure that other minority students feel seen. During the implementation of this process in spreading the word about the new counseling system, Cedar Shoals High School will work with appropriate local Athens organizations to host a mental health awareness week. In doing so, students will be exposed to much more conversation around mental health than potentially previously seen. The awareness week will allow students to engage in discourse about the topic throughout the week, and potentially learn more with various activities and educational opportunities. It also allows them to learn how to work with school counselors to better their mental health in a safe environment.

Phase two of this intervention will take place after a certain threshold of students have attended counseling meetings. Those who have utilized the new counseling service will be asked if they would like to join a new student club in which they may meet with other students who are working towards bettering their mental health. Research has shown that school-based interventions on mental health work very well, but to enhance their effectiveness, stigma has to be decreased (Richter et al., 2022). One of the most impactful ways to do this is by getting the student body actively engaged in discourse around a topic (Richter et al., 2022). Therefore, the new mental health club will serve as a means for students to discuss the topic more amongst themselves, establish a support group, and learn more through guest speakers or instructors during club meetings. Students participating in the club are encouraged to inform others of the club as well, to further drive engagement. There will be an opportunity for any willing students, during the midpoint of the year, to enter a classroom with a counselor to discuss their personal experiences with the new counseling program and their time with the new mental health club. The goal is that even if the majority of students don't join the club, they will hear others exposed to an environment in which mental health is discussed much more openly. The second phase will close out once all students have taken a mid-year survey, identical to the first pre-test except for the questions - "Have you utilized the new counseling services?" and "Have you participated in the new mental health club?". Both of these questions would be presented in a yes or no format within the answer box.

The final phase of this intervention serves more as the final evaluation of the program. The student body will be given a final post-test to gauge how the implementation of the new counseling system and club has affected mental health perceptions, knowledge, and beliefs. The post-test will be given out during the first scheduled homeroom in May (Mental Health Awareness Month), to see how the program has performed in the eyes of students, and compare pre-test results to post-test results. The goal is to budget out the intervention to run for one year, to see how mental health attitudes, beliefs, perceptions, and knowledge compare from the beginning of the school year to the end of the school year. If the results appear promising, additional funding may be needed to continue the project. Fundraisers may need to be developed so the program can be sustainable in years to come. However, if the program shows rather insignificant results, then the program will be pulled at the end of the year with no further funding coming from the cause. Yet, the knowledge instilled in counselors and the student body should remain long-lasting, even after the separation of the program.

Curriculum Table (25 points) (Visual)

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	Objective	Activities/Actualization of Goals
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<p><u>Phase 1a</u></p>	<ul style="list-style-type: none"> • Expand cultural context and competence among current Cedar Shoals high school counseling staff. • Create a better understanding of how student's life outside of school is impacting mental health. 	<ul style="list-style-type: none"> • Two weeks prior to first day of school - Have representatives from AAPA meet with counselors for three hours Monday, Wednesday, Friday for one week. Trained upon perspectives from locals, ways to improve cultural competence, and learn more about generational trauma. • Week prior to first day of school – Have representatives from Casa de Amistad meet with counselors for three hours Monday, Wednesday, Friday for one week. Trained upon how to implement new counseling method, <i>cuento</i>, and more cultural context for the Hispanic population in Athens, Georgia.
<p><u>Phase 1b</u></p>	<ul style="list-style-type: none"> • Add another counselor for the aid of Hispanic students. • Will ideally showcase students that members of the staff have endured similar experiences. 	<ul style="list-style-type: none"> • Ideally hired three weeks prior to the first day of school. • Hire a new counselor of Hispanic descent. • Applicant is preferred to be younger (below age 40) so they can attempt to relate more with recent or ongoing events .
<p><u>Phase 1c</u></p>	<ul style="list-style-type: none"> • Advertise the new counseling program to student body. 	<ul style="list-style-type: none"> • The first week of school with host a mental health awareness week, in which counselors will speak to one grade a day. At least one counselor in each homeroom for the time of a class period. • Counselors will present a lecture about mental health, associated stigma, and the new program available for students.

<p><u>Phase 1d</u></p>	<ul style="list-style-type: none"> • Gauge current knowledge, perception, and comfortability around discussing mental health. 	<ul style="list-style-type: none"> • Students will be given a pre-test immediately once the lecture is completed. • The questions presented will ask about topics regarding their perceptions of mental health, their peers/family perceptions, how their mental health is, and their comfortability in discussing mental health.
<p><u>Phase 1-2</u></p>	<ul style="list-style-type: none"> • Begin recruitment for new mental health club. • Establish the foundation of the club through its members and head counselor. 	<ul style="list-style-type: none"> • Between phases one and two, students who attend two or more counseling meetings will be asked if they would like to join a new mental health club. • The club will start as early as October and run as late as May. • The club will initially be made up of these students and serve as a type of support group in which they can talk more amongst each other, with the head counselor, and learn more through the small lecture portions given by guest speakers or the head counselor. • Meetings will occur once a week, but attendance is not mandatory. • There will also be a group chat for members and the counselor to discuss issues, support each other, or communicate a time to meet with each other. • The recently hired counselor will oversee this club and serve as the intermediary between counselors and students.

<p><u>Phase 2</u></p>	<ul style="list-style-type: none"> • Advertise the new student mental health club. 	<ul style="list-style-type: none"> • Takes place in mid-December. • Students wanting to talk to others will get the opportunity to present the club in a similar format to that of 1c. • At least one student and one professor will talk among the various classes, where they will explain what the club is, how it has been for them so far, and give other students information on how to join. • Afterward, a pre-test survey like the previous one will be given out; the only difference is it asks if the student has utilized the new counseling program. • The student and counselor will stay after class to answer any questions
<p><u>Phase 3</u></p>	<ul style="list-style-type: none"> • Evaluate the effectiveness of the program 	<ul style="list-style-type: none"> • Distribute a post-test for all students during homeroom at the end of the year to gauge how the program performed. • The post-test will ask the same questions as prior and see if any perceptions have changed.

Implementation Plan (50 points)

The intervention planned for Cedar Shoals High School must have many requirements met along the way to see proper implementation. As previously discussed, the intervention is split up into three separate phases. The first phase is primarily comprised of the instruction of newer cultural competencies for existing staff in the counseling office, and the hiring of one new staff member. The other core aspect of this phase is the implementation of the mental health awareness week at the beginning of the semester. To begin, the current counselors must first work with local Athens organizations to better understand the mental health needs of their students and the cultural context behind the different ethnic groups there. Casa de Amistad will be the primary organization that works with the counselors to instruct them on cultural

competencies and context that they feel may be relevant to the student body (*Casa de Amistad*, n.d.). Collaboration with this organization should prove to be extremely beneficial since this is an Athens local organization whose main mission is to help under-served Latinos, particularly aiding those with financial issues regarding healthcare (*Casa de Amistad*, n.d.). Due to the work performed by the organization, they have a much more widespread understanding of the Athens Latino community and the potential struggles they have that could harm mental health outcomes for youth. This organization will also inform and encourage counselors to utilize *cuento* (storytelling) as a means to have conversations with their Hispanic students (SAMHSA, 2020). Additionally, another organization that will be partnered with the school is the Athens Area Psychological Association (AAPA). This organization is chosen to add another layer to the expansion of cultural context and competency in more specifically black communities (*Athens Area Psychological Association - Home*, 2024). The organization also deals with other minority groups and demographics in general, but the insight from the AAPA will teach the staff more about generational trauma and allow for improved discussion among primarily Black students (*Athens Area Psychological Association - Home*, 2024) The application of knowledge taken from both of these organizations will allow the counselors to understand how more complex issues, such as generational trauma, may look like for current residents in Athens, Georgia. Regardless, it should function effectively since the demographic composition of students is 51% Black and 31% Latino (US News, 2022). The counselors' training will take place two weeks before the first week of school. There will be a mandatory 3-hour session three times per week (Monday, Wednesday, Friday) to discuss with the individual organizations. The first week will be with a few representatives from the AAPA to educate counseling staff on ways that they can improve cultural competence by being given cases of generational trauma and lived experiences in Athens. The second week will follow a similar format, except the meetings will be held with only representatives from Casa de Amistad. Here similar topics will be discussed, but with an emphasis on particularly the Hispanic population and how their experiences, culture, and traditions can affect mental health for the youth. A new method for counseling, *cuento*, will also be instructed upon (SAMHSA, 2020).

In addition to the intellectual expansion that will take place among current staff, the program also intends to hire a new counselor, specifically of Hispanic descent. In doing so, the counselor will show Latino students that they can talk to another person who has potentially similar shared issues in mental health due to cultural reasons. Once the counselors have met with the organizations, the next step is to showcase the new counseling program to the student body. The way this will be done is through homeroom visits and lectures. The visits from counselors will take place during a mental health awareness week in the first week of school to educate students on mental health, host small activities, and encourage students to register for a counseling meeting. The mental health awareness week will have one homeroom day out of the week for every grade level to receive a visit from at least one counselor. For example, on Monday there all 9th graders will report to their homeroom for the length of one class period, where at least one counselor per classroom will appear to talk to the students. This process will

be repeated throughout the week until all grades have had a homeroom period with a counselor. To round out phase 1, students will be given a pre-test during their homeroom class to gauge their current knowledge of mental health, beliefs, perceptions, and comfortability discussing mental health. It will be administered on paper and pencil, as an anonymous survey with questions that will be asked again at the end of the year once the program is over.

During the intermediary time between phases 1 and 2, any students who have attended two or more sessions will be asked by their counselor if they would like to join a new club made up of students who have been working to better their mental health. The club will be run by the newly hired counselor and they will also serve as an intermediary between all other counselors and the students. The purpose of the club is to allow students to have a safe place to discuss their mental health among peers, as well as to learn more about ways they can improve their mental health by listening to guest speakers and lectures given by the club's counselor. Meetings will be held once every week but attendance is not mandatory and members may come and go as they please. These meetings will be primarily composed of a small educational portion by either the counselor guest speakers from the AAPA or Casa de Amistad. The main portion of the meeting however will see members broken into small groups to talk amongst themselves and learn to become comfortable discussing rather difficult topics. There will also be a group chat in which students can talk amongst each other and support one another when in need or simply if they want a friend to hang out with. The overall goal of this club is to decrease the negative stigma associated with mental health and allow for more of the student body to feel comfortable discussing these issues with their peers. This program will start as early as October and run as late as May, till the end of the program.

The next phase will take place in mid-December of the school year, following a similar format as previously described for the homeroom interaction with students. However, during this homeroom session, it will not be the counselors who are the main focus, but rather students from the new mental health club who will be talking to students, along with the help of a counselor. There will be at least one counselor and one student from the club explaining to the class what the club is and their experience with it, giving them information on how to join. After the club presentation is over, students will be asked to complete another pre-test survey asking the same questions as before, with the only difference being that questions on whether they have used the new counseling system will be asked. The student presenter and counselor will then stay in the room for a bit after class to answer any questions that students may have or if they simply want someone to discuss their issues with.

The final phase of the program takes just one homeroom for all grades out of the end of the year in May, where students will be required to take a post-test with the same questions they have received in the previous phases.

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