

Children and Adolescents' mental health: evaluation of continuing education with multifunctional resource room teachers**Saúde mental infantojuvenil: avaliação de formação continuada junto a professores de sala de recursos multifuncionais****Salud mental infantil y juvenil: evaluación de la formación continua de profesores de aulas de recursos multifuncionales****Received: 18/11/2020****Approved: 01/06/2021****Published: 21/08/2021****Carolina Elisabeth Squassoni¹****Sarah Raquel Almeida Lins²****Thelma Simões Matsukura³**

This is an exploratory, descriptive and quanti-qualitative cross-sectional study carried out in 2016, in two municipalities in the interior of the state of São Paulo. It aimed to evaluate a proposal for continuing education for teachers in multifunctional resource rooms, focusing on children's mental health in the school environment. For data collection, two questionnaires were used that sought to characterize the participants and assess the proposal for continuing education. 51 teachers participated. Training was developed in in-person meetings and distance activities, for six months, making a total of 30 hours. The results showed that 98% of participants gave the opportunity a positive evaluation and indicated contributions to the school practice in the performance with the student and families, also indicating the importance of participation of teachers from regular schools. Continuing education has been shown to provide tools to maximize permanence and learning opportunities for children in psychological distress at school.

Descriptors: Education, Special; Education; Education, Continuing; Mental health.

Este é um estudo transversal exploratório, descritivo e quantiquantitativo realizado em 2016, em dois municípios do interior paulista, com objetivo de avaliar uma proposta de formação continuada para professores de salas de recursos multifuncionais, com foco na temática da saúde mental infanto-juvenil no contexto escolar. Para a coleta de dados foram utilizados dois questionários que buscaram caracterizar os participantes e avaliar a proposta de formação continuada. Participaram 51 professoras e a formação foi desenvolvida em encontros presenciais e atividades à distância, durante seis meses, totalizando 30 horas. Os resultados revelaram que 98% dos participantes avaliaram positivamente a oportunidade e indicaram contribuições para a prática escolar na atuação junto ao aluno e a família, indicando também a importância da participação de professores de salas de aula regulares. A formação continuada mostrou fornecer ferramentas para maximizar oportunidades de permanência e aprendizado de crianças em sofrimento psíquico na escola.

Descritores: Educação especial; Educação; Educação continuada; Saúde mental.

Este es un estudio exploratorio, descriptivo y cuanti-cualitativo de corte transversal realizado en 2016 en dos municipios del interior del estado de São Paulo, con el objetivo de evaluar una propuesta de formación continua para profesores de aulas de recursos multifuncionales, centrado en el tema de la salud mental infantil y juvenil en el contexto escolar. Para la recogida de datos se utilizaron dos cuestionarios que pretendían caracterizar a los participantes y evaluar la propuesta de formación continua. Participaron 51 profesoras y la formación se desarrolló en encuentros presenciales y actividades a distancia, durante seis meses, totalizando 30 horas. Los resultados revelaron que el 98% de los participantes evaluaron positivamente la oportunidad e indicaron las contribuciones a la práctica escolar en el desempeño con el estudiante y la familia, indicando también la importancia de la participación de los profesores de las aulas regulares. La formación continua demostró proporcionar herramientas para maximizar las oportunidades de permanencia y aprendizaje de los niños en sufrimiento psíquico en la escuela.

Descriptores: Educación especial; Educación; Educación continua; Salud mental.

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INTRODUCTION

The field of education was marked by a history of discriminatory practices that focused on a standard student body, however the advent of the inclusive format expands the confrontation and gradual overcoming. For this, the school went through a series of structural, cultural and social adjustments so that the new actions involve greater participation of students who, previously excluded, now have the right to education and to continue their social and professional life^{1,2}.

Among actions and policies that seek to support the premises of school inclusion, there are the multifunctional resource rooms (MRR). The MRR are spaces designed for specialized educational care³, and play a fundamental role in the entry, permanence and educational process of students who require specific interventions in the school context.

As is known, the Brazilian inclusion policy does not yet include children with other forms of mental disorders not identified within the autism spectrum disorders^{4,5}. In this sense, the school has been coexisting with students in psychological distress, mainly based on the perspective of medical reports and the use of medication^{6,7}.

The World Health Organization points to the school as an institution that has the potential to both act and contribute to the promotion of mental health in children and adolescents, and can act as a support for identification, referrals to specific treatment sectors, and in some cases, provide primary care services⁸.

However, national and international studies that focus on the situation of teachers facing their students' mental health problems indicate that there is little information available for teachers; that they feel insecure about making decisions about students with mental disorders; and who demonstrate interest in acquiring knowledge in the area, as they consider that the information can be useful in their daily lives, both in relation to their learning and to guide parents and classmates^{5,9-12}.

A national study published in 2014¹¹ by the state network of the city of São Paulo identified the perception and interest of teachers, showing that the lack of information about mental health generates insecurity and hinders daily practice, and that there is interest in having more access and materials that addressed the theme.

Another Brazilian study¹², which developed a web-based interactive education program to help elementary school teachers in the recognition and management of children with possible mental disorders in the classroom, pointed out that the realization of training programs for teachers is a positive strategy that can help them both in identifying and in the child's daily experience with a possible mental health problem.

In a Portuguese study¹⁰, with 257 teachers, based on the premise that the school is a privileged context for the creation of a favorable environment for health, it was found that after training, teachers felt more prepared to identify signs of problems related to mental health in their students, in addition to the adoption of more empathetic attitudes, listening and directed to additional necessary services.

The promotion of knowledge about child mental health among teachers is a powerful strategy to help them in their daily practice⁹⁻¹⁶. Thus, this study aimed to evaluate a proposal for continuing education for teachers in multifunctional resource rooms, focusing on the theme of children's mental health in the school context.

METHODS

This is a quanti-qualitative, descriptive and exploratory study¹⁷ which has as its theme the mental health of children and youth and which focuses on the evaluation of a proposal for continuing education carried out with public education teachers.

The participants were teachers from multifunctional resource rooms (MRR), working in kindergarten and elementary school, belonging to the municipal education network of two

cities in the interior of the state of São Paulo, Brazil. As inclusion criteria, professional practice in MRR for more than six months and signing the Informed Consent Term were considered.

All stages of the study were carried out on the premises of the Municipal Education Secretariats of the two participating municipalities in 2016.

For data collection, two questionnaires were used, with test applications, namely: *Questionnaire 1 (Identification and characterization of participants)*: general information regarding personal identification and professional training was addressed. *Questionnaire 2 (Evaluation of the continuing education proposal)*: evaluated the continuing education proposal in relation to: understanding of children and adolescent's mental health (CAMH), possible contributions of the proposal, format (adequacy of content, duration, themes and approaches used), most important topics, safety in working with children in psychological distress and raising new demands.

The continuing education proposal consisted of eight face-to-face meetings and distance activities, totaling 30 hours. All face-to-face meetings took place in the Collective Pedagogical Work Schedule (HTPC), already scheduled by the respective secretariats and taking into account the time and availability of teachers.

Distance activities included reading texts, indicating videos and preparing a reflective diary. At each meeting, the participants received the activities to be carried out until the next meeting. A minimum frequency of 75% was considered for the use of the meetings, as established by the Education Departments, which allowed the participants to obtain a certificate.

As for the treatment and analysis of the data, the information obtained through the instruments was organized in Excel® spreadsheets, and the quantitative results were presented descriptively in tables and graphs.

Qualitative data were analyzed through the identification of categories of analysis by Bardin¹⁸, which follows three stages: 1) pre-analysis: which seeks to systematize the initial ideas; 2) material exploration: which emphasizes the construction of coding operations through clipping for aggregation and enumeration; and 3) treatment of results, inference and interpretation: which captures the manifest and latent contents. Thus, after repeated readings, the content was systematically analyzed and organized into analysis categories.

Participants were identified with letters, according to the municipality where they belong (municipality A or municipality B), followed by a specific number (according to the individual identification of each participant in the study).

The study was submitted and approved by the Ethics Committee for Research in Human Beings of the Universidade Federal de São Carlos, CAAE 55337916.7.0000.5504 and CAAE 57570116.8.0000.5504, and followed resolution No. 466, of December 12, 2012, on guidelines and standards regulatory bodies for research with human beings.

RESULTS

Municipality A had 57 school units (25 of them had MRR), referring to kindergarten and elementary school I. Municipality B had 58 educational units, 14 with MRR in elementary schools, and nine MRR in the Specialized Educational Service Center.

Initially, 53 teachers participated, 26 from municipality A and 27 from municipality B, with 51 of them responding after the activity. Table 1 presents the information regarding the meetings and the contents covered during the training.

For better understanding, data were divided into: *Characterization of participants*; and *Participation and evaluation*.

Table 1. Face-to-face meetings and topics covered in the CAMH continuing education proposal. São Carlos, SP, 2018.

Face-to-face meeting	Theme
Meeting 1	Presentation of the proposal and collection of initial data (Questionnaire 1)
Meeting 2	General mental health and children's mental health
Meeting 3	Deepening the understanding of CAMH from the school reality
Meeting 4	Risk and Protection to Child and Youth Development
Meeting 5	The Role of School
Meeting 6	School performance strategies
Meeting 7	Child and adolescent care and protection network
Meeting 8	Closure of meetings and evaluation training (Questionnaire 2)

Characterization of participants

53 teachers from multifunctional resource rooms participated in the continuing education. Of a total of 60 invited teachers, 53 participated in the continuing education proposal. Of these, only two did not participate in the final stage and did not undergo the training evaluation. Therefore, in the evaluation phase, the present study had 51 participants. Table 2 indicates the percentage distribution of invitations and acceptances.

Table 2. MRR participants (effective and dropouts). São Carlos, SP, 2018.

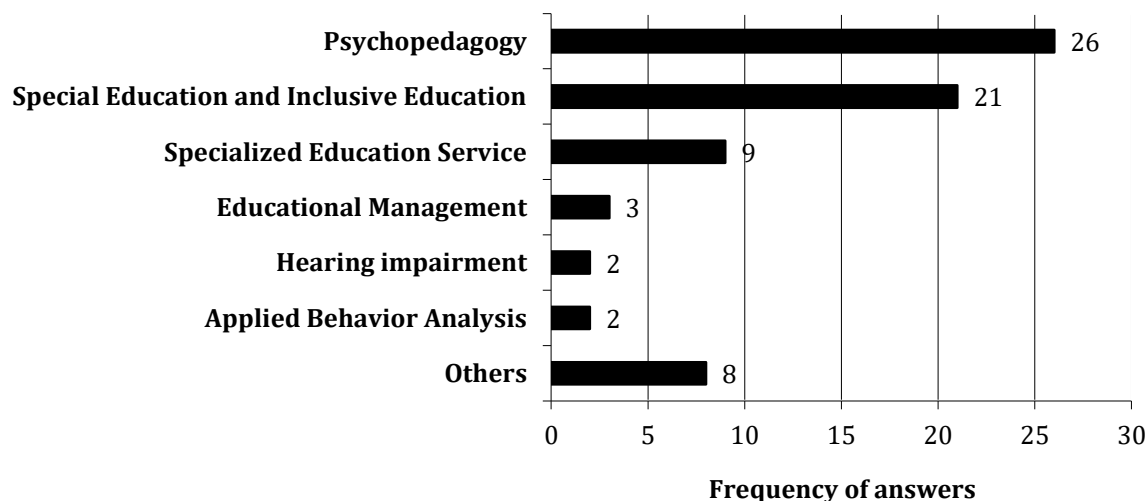
Situation	No. of invited teachers	No. of participants in the training proposal N (%)	No. of participants in the proposal evaluation N(%)
Town A	27	26 (96%)	24 (92%)
Town B	33	27 (82%)	27(100%)
% (Total)	60	53 (88%)	51 (96%)

All participants were female. As for the age group, 25 participants were between 41 and 50 years old, 17 were between 31 and 40 years old, six were between 21 and 30 years old and five were between 51 and 60 years old.

As for training, 39 participants graduated in Pedagogy, 10 attended Teaching and Pedagogy, one had a degree in Social Sciences, one in Psychopedagogy, one in Special Education, and one teacher did not specify.

As for training to work in MRR, all participants continued their specific training in the areas of Special Education, especially in Psychopedagogy, Special Education and Inclusive Education and Specialized Educational Service (Graph 1).

The areas of specialization in the "others" category were those mentioned only once, namely: Neuropsychology, Education and Rehabilitation of the Hearing Impaired, Mathematics Education, Mental Disability, Early Childhood Education, Environmental Education, School Administration and Educational Guidance, Text Linguistics and Teaching.

Graph 1. Complementary training of teachers in MRR. São Carlos, SP, 2018.

Participation and evaluation

The average presence of participants in the meetings was 90% in municipality A and 96% in municipality B. In the evaluation of training, the results showed that 98% evaluated the proposal for continuing education positively.

The justifications for the positive evaluations were given in:

1. Contributions to learning (33);
2. Contributions to clarify the topic (9);
3. Exchange of experiences (3);
4. Openness and availability of researchers (3); and,
5. Contribution to personal training (2).

Some reports exemplify and qualify the positive aspects pointed out by the participants:

Contributions to learning

The meetings were positive and significant, as they brought information about mental health that I was unaware of and that will contribute to my teaching practice in identifying students and also in developing strategies. (B19)

Contributions to clarify the topic

The meetings were productive in the sense that we were able to verify that our field of action is important, that we make a difference for many children and, mainly, they brought us greater knowledge that we were aware of, but that we did not have the dimension about mental health and its implications. (B21)

Openness and availability of researchers

Very productive and enriching, no doubt. In addition, I highlight the openness and availability of those responsible for training to welcome and discuss the doubts and reflections of the group. Unique experience in the context of teacher training. (B11)

Three participants considered the meetings productive and enriching, especially because of the opportunity for reflection and exchange of experiences with colleagues, and the indication that talking and learning about mental health is important for teacher education.

The evaluation of the meetings indicated contributions to the daily life with the students, namely:

1. Changes in the way of seeing and relating to the student (24);
2. Re-planning of actions and strategies (21); and,
3. Change in the relationship with the child's family (2).

Alguns relatos mostram essas contribuições:

Change in the way of seeing and relating to the student

Through the meetings it was possible to change the look at certain students with learning difficulties and try to better understand the context in which they are inserted. (A17)

Re-planning of actions and strategies

It was immediately possible to reformulate some issues commonly raised in daily school life, providing a new look at working with children, especially about the fear and insecurity of students with behavioral problems. (B27)

Changes in the relationship with the child's family

Yes, today I can say that I ignored some questions about mental health, as well as its causes. Today, I see how important our work is with students and their parents. I perceive the school-family relationship in a different way, more respectful, so to speak! (B21)

As for the adequacy of content, duration of meetings and frequency; and the presentation of the themes and approaches used, the items were quantitatively evaluated, with grades from one to five, as follows: 1 – poor; 2 - average; 3 – good; 4 – great; and, 5 - excellent. The evaluation was positive since most of the grades were between five (excellent) and four (great).

Table 2. Assessment regarding the format of the continuing education action. São Carlos, SP, 2018.

Item/Grade	5 – Excelent	4 – Great	3 – Good	2 – Average	1 – Poor
Content adequacy	27	19	4	0	1
Duration of meeting and frequency	14	27	9	1	0
Presentation of themes	28	18	5	0	0
Approaches used	19	28	4	0	0

The importance of participation was described:

I liked it a lot and I learned a lot, because I didn't have this knowledge, I found it rich and I will use it in my professional life and in my daily life. (A10)

The themes were clearly addressed and were carefully organized for a broader understanding of the implications of children's mental health, from the perception of its existence, to specific and possible actions at school and outside it (network). (B11)

The results reveal that teachers understood and related the contents to daily practice, and indicated the relevance of the topic, whose possibility of approach and discussion was small or even non-existent.

The participants also pointed out that the suggested activities enriched the training, that the discussions held in the meetings provided them with greater participation, that the reflective diaries were an opportunity for them to express themselves more deeply, and that the indicated texts and videos at each meeting were significant:

The off-site activities were of great value to follow up on the subject discussed, and also to reflect on our work. The texts, videos and diaries made were so good that I intend to consult them as soon as the next year begins, recalling "important records" for my personal and professional development. (A12)

Especially the videos can be used in parent meetings and teacher orientations. (B4)

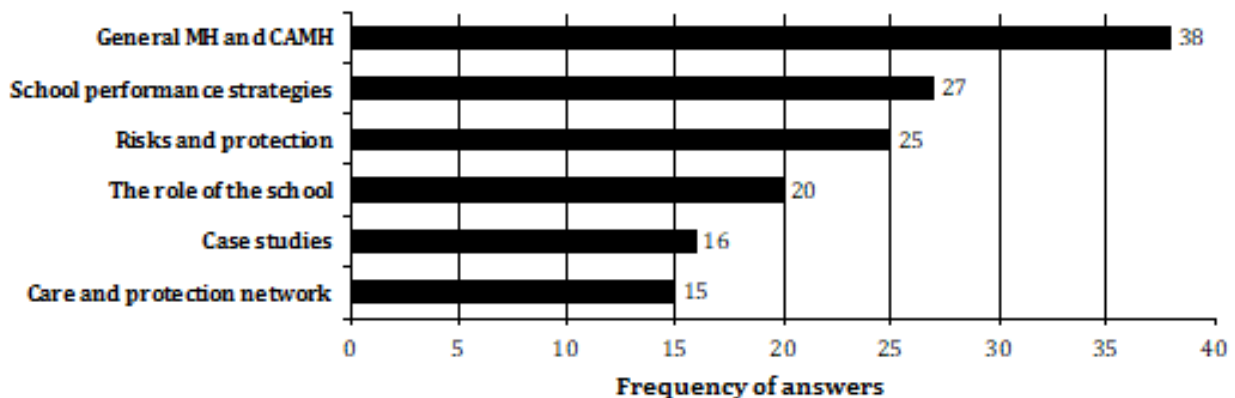
However, some teachers indicated that they were unable to follow the activities from a distance:

Unfortunately, I couldn't follow and read all the texts and videos. I plan to review them all again soon. (A19)

The implemented proposal sought to make use of different sources and formats in the composition of individual and collective activities, carried out in person and at a distance, through conversations, discussions, reflective diaries, indication of texts, videos and films.

With the possibility of addressing more than one item, Graph 2 presents the list of themes indicated by the participants.

Graph 2. Important topics covered according to MRR teachers. São Carlos, SP, 2018.



Key: MH = Mental health; CAMH = children and adolescents' mental health

The deponents presented justifications on the importance of the themes:

Important for acquiring knowledge

The overall topic of mental health was very enriching and enlightening. I was able to clarify doubts regarding this topic. The issue of risk and protection and the role of the school were also very specific and I was able to reflect on my professional performance. (B16)

Help in daily school practice

I have always worked in early childhood education and I have been in elementary school for 3 years. I loved getting to know about this topic that is so pertinent in my school, as well as discovering new strategies to reach this audience. (B4)

On what they would like to delve into, the themes of greatest interest to the teachers were: intervention strategies (25%); specific disorders (18%); and general mental health and children's mental health (18%). Of these, only specific disorders were not addressed in the training. Highlights that justify such themes are pointed out:

I believe that deepening problem-solving strategies within the school context would be very interesting. (A17)

I could perhaps explore further the characteristics of autism related to psychological distress. It would also be interesting to know a little bit about schizophrenia. (B23)

The child-juvenile mental health theme is quite broad and could continue to be worked on. (B4)

In adjustments for the improvement of training, it was suggested with emphasis: the participation of regular classroom teachers (n=15), according to the statements:

A project built with the participation of all teachers, including the participation of the regular classroom teacher. (A16)

Extend the course as it is to teachers and principals. (B13)

[...] I believe that teachers who work in the classroom, especially in elementary school, are the ones who most need a course on mental health. (B17)

DISCUSSION

There are few studies that address training initiatives in children's mental health with teachers, as well as those that present the assessment of training and share experiences¹⁹. It is understood that these trainings are positive strategies that enable the improvement of teaching knowledge in recognizing and dealing with children in psychological distress, in more effective referrals and also in reducing stigma towards mental health^{1,12,15,16}.

In the present study, the training proposal was positively evaluated by 98% of the participants, pointing out the contributions to school practice in working with the student and the family, the relevance of exchanging experiences with other teachers and the recognition of the importance of their role as a MRR teacher, results in agreement with other investigations^{10,20}. Specifically, the realization of training programs in mental health contribute to: strengthening self-confidence, acquiring useful skills for solving problems and handling critical situations¹⁹.

The results found here corroborate those of the study carried out in the "ES'COOL Project"¹⁰, which also indicated that teachers started to adopt more sensitive, empathetic postures and to offer more support to their students after graduation.

The teachers positively indicated the content worked on in the meetings, the approaches used and the frequency of meetings. In relation to distance activities, this study sought to advance the proposals presented in other works^{12,16} with the appreciation and benefits indicated.

Considering the indications of format and approaches suggested by the teachers, the evaluations were positive, as well as the indication about carrying out subsequent consultations on the suggested materials and sharing them with other colleagues. This sharing can also suggest a possible dissemination of the content presented, agreeing with the idea that the teacher is a key professional for the dissemination of new practices in mental health^{13,16,21}.

The order of priority themes indicates the need for information and clarification on general mental health, as the need for understanding and appropriating knowledge is primary. It is not about making the teacher an expert, but providing contributions for the educator to critically analyze issues related to mental health, the needs and particularities of the student, as well as the development of new attitudes towards the child, their family and the school team.

On the other hand, the care network and intersectoriality appear as themes of last priority. This result points to the challenge of articulation between fields of action and care for childhood and adolescence, towards the construction of a network of shared care and protection, essential for the earlier identification of situations of psychological distress, for referral to the necessary sectors⁹, in addition to understanding that effective inclusion requires the implementation of the principle of intersectoriality^{22,23}. Intersectorial discussions and articulations between school professionals and those from other sectors, such as health and social assistance, are essential, and future studies must deepen this relevant challenge.

One of the goals of the training offered was to provide reflections that would result in a broader understanding of children's mental health, considering the daily practice of the teacher

with the students. And, to the extent that the participants' reports pointed to an expansion of reflection on the practice, to the recognition of the care network and the school as an integral part of it, to the indication of more attention and approach to the family and the evaluation of the participants themselves, it is possible that there has been an important gain in expanding the possibilities of school inclusion and in reducing the stigma of mental health.

CONCLUSION

The possibility of offering a proposal for continuing education on children's mental health should maximize opportunities for approach and problems with teachers and managers of public and private schools. The teachers' appropriation of this reality can expand the learning and permanence opportunities of children and adolescents in psychological distress at school.

The inclusion of teachers from regular classrooms, who were not targets of this study, was indicated as a limitation of the research. Also, the lack of systematic evaluation, involving a more robust design of measures, may be another limitation, as it could provide more information about the effectiveness of the training proposal in question.

For some teachers, participation in training was a first opportunity to discuss mental health, especially children's, and there was no intention of exhausting content, considering the complexity of the field and the diversity of the public.

The proposal must be understood as a trigger so that teachers can recognize and reflect on mental health in their field of work and mobilize themselves for research and deepening. In addition, it is suggested that actions of this nature can also be considered to be developed in other formats and on a continuous basis, aiming at both monitoring and support, as well as the opportunity for further development.

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CONTRIBUTION

Carolina Elisabeth Squassoni contributed to the design, collection, organization and analysis of data. **Sarah Raquel Almeida Lins** participated in the design, collection and analysis of data and writing. **Thelma Simões Matsukura** worked in the design, data analysis, writing and reviewing.

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