

To cite this article: Suprita Kumari Sinha (2025). IMPROVING MENTAL WELLBEING THROUGH COMMUNITY COLLABORATION FOR INCLUSIVE PRACTICES IN SCHOOLS, International Journal of Education and Social Science Research (IJESSR) 8 (5): 318-332 Article No. 1151, Sub Id 1790

IMPROVING MENTAL WELLBEING THROUGH COMMUNITY COLLABORATION FOR INCLUSIVE PRACTICES IN SCHOOLS

Suprita Kumari Sinha

Senior Research Fellow,
Dept of Education & Training, Gautam Buddha University

DOI : <https://doi.org/10.37500/IJESSR.2025.8521>

ABSTRACT

Inclusive education means that every student, irrespective of their abilities or challenges, has an equal chance to succeed. A key strategy involves collaboration, not only among teachers and peers but also with various professionals who can provide specialized support in the mental wellbeing of students. This cooperative effort fosters an environment where the needs of every student are addressed and enables them to reach their full potential. This study examines the importance of collaboration among educators, specialists, and other professionals in establishing an inclusive educational experience and how it can be effectively applied to enhance Mental wellbeing across diverse academic and social contexts. Using a random sample of 150 participants comprising school teachers of Gautam Budh Nagar, the study draws on a self-prepared questionnaire based on a 5-point Likert Scale on perception of school teachers about collaborative and community-based approaches to inclusive practices, related literature, and government initiatives in improving the Mental health of school students. The data collected through the Likert scale questionnaire were analyzed using descriptive analysis, on five key themes: shared responsibility, cultural relevance, Peer support networks, Resource sharing, and Structural barriers. Findings indicate that community engagement and collaboration among stakeholders of education significantly enhance the impact of inclusive mental health practices. The study suggested recommendations for relevant policy, training, and future research to strengthen collaborative frameworks.

KEYWORDS: Mental wellbeing, Collaborative approaches, Community-based Approaches, Inclusive Practices

1. INTRODUCTION

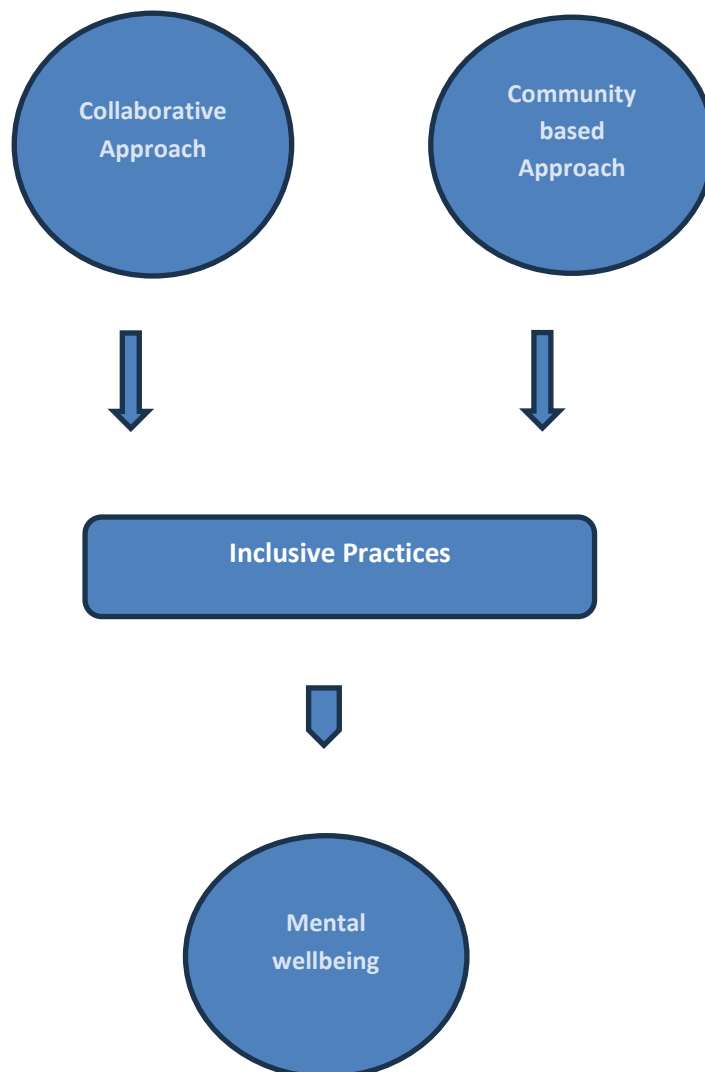
The importance of Mental wellbeing as an integral and holistic component of inclusive education and community development has gained increasing recognition in recent years. Mental wellbeing encompasses emotional resilience, social connectedness, and the capacity to cope with challenges in life (World Health Organization, 2020).

National Education Policy (NEP) 2020 and National Curriculum Framework- School Education (NCF-SE) 2023 emphasize mental health within education, advocating emotional resilience, self-regulation, and social awareness among students. For students with diverse needs, particularly those with mental health vulnerabilities, it is critical to access inclusive and supportive environments.

Inclusive practices traditionally emphasize equal access to education, employment, and social participation for all, regardless of any form of discrimination. However, these objectives cannot be fully realized without addressing the psychological and emotional dimensions of wellbeing. Collaborative and community-based approaches have emerged as effective strategies for fostering inclusive environments for all. These approaches engage a broad network of stakeholders, including teachers, educators, mental health professionals, families, community leaders, and non-governmental organizations (NGOs) in a shared commitment to Mental wellbeing. Manodarpan is an initiative of Atma Nirbhar Bharat, Ministry of Education, Government of India, launched in 2020 to foster mental health awareness and promote a Whole School Approach (WSA), engaging students, staff, parents, and communities in creating psycho-social safe environments. Tele MANAS operations are coordinated throughout India by the National Apex Centre, the National Institute of Mental Health and Neuro Sciences (NIMHANS), located in Bengaluru, for mental wellbeing.

School teachers are the primary stakeholders in helping parents and students cope with their problems of anxiety, depression, and behaviour disorders in school-going children. So, this study draws attention to the perception of school teachers to practice the collaborative and community-based approaches to inclusive education in schools. The data was collected from 150 school teachers of Gautam Budh Nagar, Uttar Pradesh, to know their readiness for collaborative and community-based approaches on a 5-point Likert scale, collecting data on five key themes of Shared responsibility, Cultural relevance, Peer support networks, Resource sharing, and Structural barriers. The data was analysed through descriptive analysis in terms of percentage, Mean, and depicted the result graphically.

It examines the perceptions and readiness of school teachers as primary stakeholders involved in inclusive practices and efforts, highlighting the strengths, challenges, and potential for their replication.



This framework supports the idea that Mental wellbeing can be attained through collaborative and community-based, inclusive practices. This figure illustrates a stepwise relationship between collaborative, community-based approaches, inclusive practices, and Mental wellbeing. The steps are explained below:

a. Collaborative Approaches

Collaboration among teachers, parents, mental healthcare professionals, and policymakers forms the foundation of the process of Mental wellbeing. These approaches focus on shared responsibility, mutual support, and coordinated strategies to address diverse needs. These are partnerships between professionals, institutions, and families.

For *Example*, in a school setting, teachers, school counsellors, and parents jointly identify children showing signs of anxiety. They can create an **Individual Support Plan** where teachers adjust

workloads, counselors provide group therapy sessions, and Parents follow supportive routines at home. The collaboration ensures that the child's mental health is addressed from multiple angles.

b. Community-based Approaches

The active involvement of local communities, NGOs, peer groups, and cultural institutions helps extend support beyond formal settings. It ensures inclusivity by valuing local knowledge, cultural sensitivity, and grassroots participation. Here, the wider community contributes resources, awareness, and support.

For *Example*, an NGO partnering with a local community could run a Mental Health Awareness Camp. A group of teachers, peer volunteers, and mental health experts could together organize workshops on stress management, provide free counselling, and reduce stigma about not taking psychological help. This can empower the whole community to support members facing mental health struggles.

c. Inclusive Practices

When collaborative and community-based approaches merge, they lead to inclusive practices. These practices embrace diversity, eliminate discrimination among students, and ensure equal opportunities for all individuals, especially those vulnerable to mental health challenges. Combining collaboration and community support leads to inclusive systems where everyone feels included.

For *Example*, a school can create a "Peer Buddy System" where students with mental health challenges are paired with supportive peers under the observation of school counselors and teachers. Simultaneously, faculty receive training on inclusive teaching strategies, ensuring that anxiety, depression, or learning difficulties do not isolate any student. This practice promotes equality and belonging.

Mental wellbeing

From the data found in related literature, it is obvious that inclusive practices directly contribute to improving Mental wellbeing. By fostering belongingness, equity, and support systems, individuals experience reduced stigma, improved resilience, and holistic development. The outcome is improved mental health and wellbeing.

For *Example*, after implementing inclusive teaching and community peer-support systems, students report better participation in class, reduced exam stress, and increased sense of safety and acceptance. This shows how collaborative and community efforts translate into real improvements in Mental wellbeing.

In essence, a child with depression benefits when school, parents, and counsellors work together. If community awareness programs also reduce stigma, the child feels more supported. When the school ensures inclusive classrooms, the child doesn't feel isolated. Ultimately, this results in better Mental wellbeing with integrated and holistic development in students.

In short:

Collaboration + Community → Inclusivity → Mental wellbeing

Research Questions:

1. How do stakeholders perceive the role of collaboration in fostering inclusive Mental wellbeing practices?
2. What community-based strategies are most effective in promoting Mental wellbeing for diverse populations?
3. What challenges hinder the sustainability of these approaches?

To answer these Research Questions, an extensive literature review has been conducted.

2. Literature Review on Shared Responsibility in Mental wellbeing

The idea of shared responsibility in mental health has gained significant scholarly attention. Sharma and Singh (2020) studied that teacher-parent partnerships in Delhi schools significantly improved coping mechanisms for stress, particularly in high-pressure environments such as board examinations of students. The study emphasized that early interventions led by teachers, supported by parents, created a safety net for adolescents. Choudhary (2019) explored community-led awareness campaigns in rural Bihar, demonstrating that when local leaders and parents participated in mental health discussions, stigma decreased, and more children accessed counselling support.

Internationally, Weare and Nind (2011) reviewed global practices of school-based mental health programs and stressed that the most sustainable interventions are those where multiple stakeholders, like teachers, families, and communities, share responsibility for wellbeing.

O'Reilly et al. (2018) conducted a UK-based study highlighting the effectiveness of whole-school approaches, where wellbeing is not confined to specialists but embedded into the daily routines of schools. These studies collectively show that when responsibility is distributed across different actors, interventions become more robust and child-cantered.

Literature Review on Cultural Relevance in Mental Health Programs

Cultural adaptation has emerged as a cornerstone of Mental wellbeing practices.

Nair and Radhakrishnan (2021) demonstrated how mindfulness, when contextualized through yoga and traditional meditation practices, was more readily accepted by both parents and students. They found that culturally embedded programs increased participation and reduced resistance.

Reddy (2018) argued that traditional storytelling and folk narratives provided effective channels to introduce discussions about resilience and coping among rural schoolchildren.

Betancourt et al. (2016) studied post-conflict mental health interventions in Rwanda and found that community-based, culturally relevant programs using traditional rituals were more successful than externally imposed methods.

Gone (2013) analyzed indigenous mental health interventions in the US and Canada, concluding that culturally congruent approaches, such as integrating tribal values and spirituality, were more effective in healing trauma. These works underscore that cultural resonance is not just desirable but necessary for mental health practices to be meaningful and sustainable.

Literature Review on Peer Support Networks

Peer support as a mechanism for mental health promotion has received wide academic recognition.

Joseph and Thomas (2019) examined peer mentorship programs in Kerala schools, showing that students were more comfortable discussing stress and exam anxiety with peers than with adults.

Verma (2020) highlighted how student-led support clubs in Maharashtra reduced bullying and promoted help-seeking behaviors.

Rickwood et al. (2007) studied Australian youth peer support services and revealed that such networks often serve as the first point of contact for young people struggling with mental health issues.

Hart et al. (2016) in the UK demonstrated that peer-led mental health initiatives in schools significantly reduced stigma and normalized conversations around depression and anxiety. Together, these studies suggest that peer networks can democratize access to emotional support while complementing professional services.

Literature Review on Resource Sharing and Collaboration

Pooling of resources has been identified as a practical strategy to overcome barriers in implementing mental health initiatives.

Mehta and Kapoor (2018) examined NGO-school collaborations in Rajasthan, where resource sharing enabled schools to run counseling workshops despite financial constraints. They concluded that partnerships created scalability in resource-limited contexts.

Banerjee (2020) studied cross-sectoral collaborations in West Bengal, finding that joint resource utilization among schools, local panchayats, and community centers increased the reach of inclusive mental health programs.

Atkinson et al. (2010) in the UK showed how inter-agency collaboration between schools, healthcare providers, and local councils optimized limited resources, ensuring children received comprehensive support.

Adelman and Taylor (2000) in the US discussed how school-community partnerships that pooled training, infrastructure, and financial support created sustainable models of student wellbeing.

These studies consistently emphasize that resource sharing is not just cost-effective but central to sustainability.

Literature Review on Barriers to Sustainability

Despite successes, sustainability challenges are widely noted in the literature.

Deshpande (2021) found that many mental health initiatives in Maharashtra schools lacked continuity due to funding gaps and insufficient training of facilitators.

Rao and Menon (2019) highlighted how persistent societal stigma remained a significant barrier, even when resources were available.

Fazel et al. (2014) noted in their review of global school-based interventions that inconsistent policy support and funding interruptions were major reasons programs failed to sustain impact.

Kutcher et al. (2016) discussed how stigma in communities worldwide, especially in low- and middle-income countries, remained a roadblock to the long-term success of mental health initiatives.

These studies highlight the need for structural solutions, such as regular funding, consistent training, and systemic destigmatization campaigns.

The reviewed literature highlights the growing importance of collaborative, community-based, and culturally relevant approaches to promoting Mental wellbeing in schools. Studies from both India and abroad demonstrate that shared responsibility, peer support, and resource pooling significantly enhance program effectiveness. However, much of the existing research remains fragmented, focusing either on school-based interventions or community initiatives, with limited integration of the two. Moreover, while international scholarship emphasizes systemic and policy-level support, Indian studies often highlight localized, small-scale interventions that lack scalability and sustainability. Persistent challenges such as stigma, inconsistent funding, and inadequate facilitator training are underexplored in comparative contexts. This creates a clear research gap: the need for comprehensive, context-sensitive frameworks that bridge school, family, and community partnerships, while also addressing barriers to long-term sustainability of inclusive Mental wellbeing practices.

Result Outcomes of Literature Reviews

a. Inclusive Practices and Mental Wellbeing

Inclusive practices aim to remove barriers to participation, ensuring that individuals of all abilities can thrive. In the context of Mental wellbeing, inclusivity extends beyond accessibility to encompass emotional safety, social connectedness, and stigma reduction (Florian & Black-Hawkins, 2011).

Research indicates that inclusive mental health interventions lead to better academic, social, and emotional outcomes (Bambra et al., 2015).

b. Collaborative Approaches

Collaboration refers to multi-stakeholder engagement, where diverse expertise and resources converge to address complex challenges. In mental health promotion, collaboration between educators, psychologists, health workers, and community leaders has been shown to increase outreach, tailor interventions to cultural contexts, and build sustainable support systems (Bronstein, 2003). Sharma and Nair (2018) have found that teacher-parent collaboration in Indian secondary schools enhanced early identification of students facing emotional stress, thereby reducing dropout risks. Sahu and Rathod (2020) reported that collaborative teacher training programs in Indian universities improved inclusive classroom practices and sensitivity towards students' mental health. O'Connor et al. (2017) highlighted that in Ireland, teacher-counselor collaboration ensured timely interventions for students' psychological needs. Mulholland and O'Connor (2018) demonstrated that collaborative classroom strategies in the UK improved peer relationships and supported inclusion.

c. Community-Based Models

Community-based approaches leverage local resources, relationships, and cultural practices to address Mental wellbeing. These models prioritize grassroots involvement, peer support, and culturally sensitive interventions. Programs such as *Manodarpan* initiative of Atmanirbhar Bharat, Ministry of Education, India, demonstrate the potential of localized mental health outreach in reducing stigma and increasing help-seeking behavior. Patel et al. (2018) revealed that India's community-based mental health programs, like the District Mental Health Programme (DMHP), improved accessibility for underserved groups. Mathur and Sharma (2019) examined school-community linkages in Rajasthan and found improved resilience among children when local NGOs partnered with schools. Barry and Jenkins (2019) argued that community-school partnerships in the UK fostered holistic student development. Trickett et al. (2019) showed that community-based participatory research in the US empowered marginalized populations and improved mental health outcomes.

d. Inclusive Practices

Inclusive practices ensure that students with diverse needs are supported in mainstream education without stigma or discrimination. Sharma and Das (2019) studied Indian teachers and reported that inclusive classroom practices directly improved students' psychological wellbeing and self-esteem. Rao (2020) analyzed inclusive education in Karnataka and found that differentiated instruction reduced anxiety and stress among children with learning disabilities. Florian and Black-Hawkins (2018) in the UK highlighted that inclusive pedagogy helped teachers address diversity without segregating learners. Slee (2019) argued that global inclusive education must address not just placement but also social-emotional wellbeing.

e. Mental wellbeing

Mental wellbeing is the outcome of effective, inclusive, collaborative, and community-based practices. Kumar and Gupta (2021) found that mindfulness-based interventions in Indian schools significantly improved resilience and emotional regulation among adolescents. Singh and Kaur (2019) demonstrated that peer support programs in Delhi schools enhanced social connectedness and reduced exam-related stress. Keyes (2018) differentiated between mental illness and Mental wellbeing, emphasizing the need for proactive mental health promotion. Weare (2020) showed that social-emotional learning and mindfulness practices in the UK and US schools promoted both academic and psychological growth.

f. Policy Guidelines

The WHO Mental Health Action Plan 2013–2030 is a key document that outlines global targets and actions for mental health promotion, prevention, and care. It emphasizes a multisectoral, life-course approach and the importance of human rights. The Mental Healthcare Act, 2017, and the National Mental Health Policy of India (2014) are landmark legislative and policy documents. They aim to provide access to mental healthcare, decriminalize suicide, and protect the rights of individuals with mental illness. The United Nations System Mental Health and Wellbeing Strategy provides a framework for creating a mentally healthy work environment for UN personnel. It highlights the role of leadership and management in promoting wellbeing. National Education Policy (NEP) 2020 includes a focus on the holistic development of students, with provisions for their mental health and wellbeing. It recommends integrating mental health awareness into the curriculum and establishing counselling systems in educational institutions.

g. Program Reports

The World Mental Health Report: Transforming Mental Health for All (2022) serves as a comprehensive resource on the state of mental health globally. It provides evidence-based recommendations for policy and practice. The National Mental Health Programme (NMHP) and its reports, including those for the District Mental Health Programme (DMHP), detail the implementation and impact of India's efforts to decentralize mental healthcare and extend services to the community level. Reports such as the *Mental Health and Wellbeing of School Students - A Survey, 2022*, and *Teachers' Mental Wellbeing Survey, 2024*, by the Manodarpan Cell, National Council of Educational Research and Training (NCERT), provide valuable data on the mental health perceptions and challenges of students in India.

h. Training Materials

The Mental Health First Aid (MHFA) program is supported by a range of materials, including the Mental Health First Aid Training Manual, which teaches participants how to provide initial support to people experiencing a mental health crisis. The NCERT initiative, Training and Resource Material on

Health and Wellbeing of School-going Children, is a key resource for teachers in India, helping them to address the mental health and wellbeing needs of their students.

Another initiative from UNICEF, the Psychological First Aid (PFA) and Mental Health and Psychosocial Support (MHPSS) Training Module from UNICEF is designed to train helpers and frontline workers on how to provide psychosocial support in emergencies.

Universal Design for Learning (UDL) is based on the CAST Universal Design for Learning Guidelines, which provide a framework for creating inclusive educational materials that support students' mental health by offering multiple means of engagement, representation, and action and expression.

Research Gaps

While there is substantial evidence supporting collaboration and community engagement separately, less is known about how these two approaches intersect to support inclusive Mental wellbeing. Additionally, there is limited qualitative research that captures the lived experiences of stakeholders involved in such initiatives.

3. METHODOLOGY

3.1 Research Design

This study adopted a qualitative survey to capture the perception of school teachers engaged in classroom collaborative and community-based Mental wellbeing initiatives of students.

3.2 Sample

A sample of 150 school teachers as participants was randomly selected from Gautam Budh Nagar district, and the survey questionnaire was shared with them to give their views on this approach on a 5-point Likert scale as strongly agree, agree, neutral, disagree, and strongly disagree.

3.3 Data Collection Methods

- Questionnaire Survey on Likert Scale collected from 150 school teachers
- Document review of related literature, policy guidelines, program reports, and training materials

3.4 Data Analysis

Data were analysed through coding and decoding of the 5-point Likert scale and calculating results in percentages and depicted graphically.

3.5 Ethical Considerations

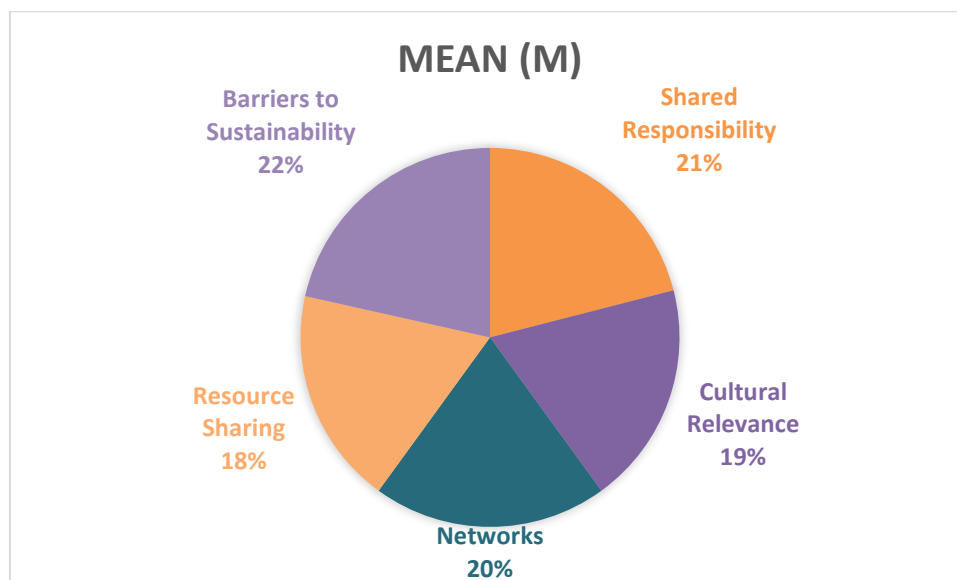
Ethical approval and consideration for data collection from all participants were obtained with informed consent and maintained to ensure confidentiality.

4. FINDINGS

The findings of the data from five key themes were collected through survey questionnaire.

Theme / Item	Mean (M)	SD	% Strongly Disagree (1)	% Disagree (2)	% Neutral (3)	% Agree (4)	% Strongly Agree (5)
Shared Responsibility	4.2	0.7	2%	5%	15%	48%	30%
Cultural Relevance	3.8	0.9	4%	11%	20%	42%	23%
Peer Support Networks	4.0	0.8	3%	7%	18%	47%	25%
Resource Sharing	3.7	1.0	6%	12%	22%	40%	20%
Barriers to Sustainability	4.3	0.6	1%	4%	13%	50%	32%

N = 150



Interpretations

The average mean scores above 4 indicates high agreement among teachers. Standard deviation shows a good spread in responses. The highest agreement is for Barriers to Sustainability (M = 4.3), showing strong recognition of systemic challenges. Shared Responsibility (M = 4.2) also ranks high, reflecting

teacher willingness to collaborate. Resource Sharing ($M = 3.7$) is comparatively lower, suggesting logistical or institutional hurdles.

5. DISCUSSION

These findings align with ecological systems theory, which posits that individual wellbeing is influenced by multiple interconnected systems (Bronfenbrenner, 1979). Collaborative, community-based approaches create multi-layered support networks that address individual needs while reshaping the broader environment.

The emphasis on cultural relevance resonates with literature on community psychology, which advocates for interventions tailored to local norms and practices. Peer support emerged as a particularly effective mechanism, echoing global evidence that lived experience can be a powerful catalyst for change (Repper & Carter, 2011).

However, the sustainability challenges highlight the need for systemic policy support. Without institutional backing, even the most promising initiatives risk being short-lived.

6. IMPLICATIONS

- **For policymakers:** Institutionalizing collaborative community-based mental health programs within national education and health policies can be done.
- **Wellbeing Practices:** Provide ongoing professional development for educators and community workers on inclusive Mental wellbeing practices.
- **For future Research:** Conduct longitudinal studies to assess the long-term impact of such programs on wellbeing and inclusion.

7. CONCLUSION

Through extensive literature reviews and government surveys, it was found that the collaborative and community-based approaches enhance the inclusive practices to Mental wellbeing in students. After this study on the perception of school teachers, it added the influential potential of collaborative and community-based approaches to enhance inclusive practices for Mental wellbeing in school students. By integrating diverse stakeholders, honouring cultural contexts, and fostering peer support, such initiatives create environments where individuals feel valued, supported, and empowered. Strengthening these approaches through policy support and sustained resources can significantly advance inclusive wellbeing at both local and systemic levels.

REFERENCES

- Adelman, H. S., & Taylor, L. (2000). *Shaping the future of mental health in schools: A framework for mental health in schools*. Harvard Review of Psychiatry, 8(3), 136–144. https://doi.org/10.1080/hrp_8.3.136

- Atkinson, M., Jones, M., & Lamont, E. (2010). *Multi-agency working and its implications for practice: A review of the literature*. CfBT Education Trust.
- Banerjee, S. (2020). Cross-sectoral collaborations in promoting inclusive education and Mental wellbeing: A study from West Bengal. *Indian Journal of Educational Research*, 39(2), 45–60.
- Bamba, C., Gibson, M., Sowden, A., Wright, K., Whitehead, M., & Petticrew, M. (2015). Tackling the wider social determinants of health and health inequalities: Evidence from systematic reviews. *Journal of Epidemiology & Community Health*, 64(4), 284–291. <https://doi.org/10.1136/jech.2008.082743>
- Barry, M. M., & Jenkins, R. (2019). *Implementing mental health promotion*. Routledge.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Harvard University Press.
- Bronstein, L. R. (2003). A model for interdisciplinary collaboration. *Social Work*, 48(3), 297–306. <https://doi.org/10.1093/sw/48.3.297>
- Choudhary, R. (2019). Community engagement in school-based mental health awareness: A rural Bihar study. *Indian Journal of Psychology and Education*, 9(1), 25–34.
- Deshpande, P. (2021). Barriers to sustaining school mental health initiatives in Maharashtra. *Journal of Indian Educational Studies*, 18(1), 67–79.
- Fazel, M., Hoagwood, K., Stephan, S., & Ford, T. (2014). Mental health interventions in schools in high-income countries. *The Lancet Psychiatry*, 1(5), 377–387. [https://doi.org/10.1016/S2215-0366\(14\)70312-8](https://doi.org/10.1016/S2215-0366(14)70312-8)
- Florian, L., & Black-Hawkins, K. (2018). Exploring inclusive pedagogy. *British Educational Research Journal*, 37(5), 813–828.
- Florian, L., & Black-Hawkins, K. (2011). Exploring inclusive pedagogy. *British Educational Research Journal*, 37(5), 813–828. <https://doi.org/10.1080/01411926.2010.501096>
- Gone, J. P. (2013). Redressing First Nations' historical trauma: Theorizing mechanisms for indigenous culture as mental health treatment. *Transcultural Psychiatry*, 50(5), 683–706. <https://doi.org/10.1177/1363461513487669>
- Hart, L., Medlow, S., & Steinbeck, K. (2016). Peer support and mental health in schools: A systematic review. *Journal of Adolescence*, 52(1), 1–15. <https://doi.org/10.1016/j.adolescence.2016.07.001>
- Joseph, A., & Thomas, R. (2019). Peer mentoring and adolescent mental health: Evidence from Kerala schools. *Indian Journal of School Health*, 5(2), 112–125.

- Kumar, P., & Gupta, R. (2021). Mindfulness-based school interventions in India: Effects on adolescents' mental health. *Indian Journal of Health and Wellbeing*, 12(2), 215–223.
- Kutcher, S., Wei, Y., & Morgan, C. (2016). Successful implementation of mental health curriculum in schools: A case study from Canada. *Child and Adolescent Psychiatry and Mental Health*, 10(1), 1–10. <https://doi.org/10.1186/s13034-016-0107-4>
- Mehta, P., & Kapoor, V. (2018). School-NGO collaboration for student mental health: Lessons from Rajasthan. *Indian Journal of Community Psychology*, 14(2), 56–70.
- Nair, S., & Radhakrishnan, M. (2021). Mindfulness and cultural adaptation in Indian schools: A qualitative study. *Journal of Indian Psychology*, 39(3), 88–102.
- O'Reilly, M., Svirydzenka, N., Adams, S., & Dogra, N. (2018). Review of mental health promotion interventions in schools. *Social Psychiatry and Psychiatric Epidemiology*, 53(7), 647–662. <https://doi.org/10.1007/s00127-018-1530-1>
- Mathur, S., & Sharma, P. (2019). School–community partnerships for resilience building in Rajasthan. *Journal of Indian Education*, 45(1), 65–79.
- Mulholland, M., & O'Connor, U. (2018). Collaborative classroom practice for inclusion. *International Journal of Inclusive Education*, 22(1), 49–65.
- O'Connor, U., Carroll, C., & Covell, K. (2017). Teacher collaboration and inclusive practices in Irish schools. *Irish Educational Studies*, 36(2), 195–210.
- Patel, V., Saxena, S., Lund, C., et al. (2018). The Lancet Commission on global mental health and sustainable development. *The Lancet*, 392(10157), 1553–1598.
- Rao, N. (2020). Inclusive teaching strategies and mental health of learners. *Indian Journal of Education Research*, 39(2), 87–104.
- Repper, J., & Carter, T. (2011). A review of the literature on peer support in mental health services. *Journal of Mental Health*, 20(4), 392–411. <https://doi.org/10.3109/09638237.2011.583947>
- Rao, A., & Menon, K. (2019). Stigma and barriers in implementing school mental health programs: Evidence from South India. *Indian Journal of Mental Health Education*, 22(1), 34–49.
- Reddy, V. (2018). Storytelling as a tool for resilience building among rural schoolchildren. *Indian Journal of Child Development*, 45(1), 20–32.
- Rickwood, D. J., Deane, F. P., Wilson, C. J., & Ciarrochi, J. (2007). Young people's help-seeking for mental health problems. *Australian e-Journal for the Advancement of Mental Health*, 4(3), 218–251. <https://doi.org/10.5172/jamh.4.3.218>
- Sharma, P., & Singh, R. (2020). Teacher-parent collaboration and adolescent stress management: A study from Delhi schools. *Indian Journal of School Education Research*, 14(1), 54–68.

- Sahu, R., & Rathod, A. (2020). Collaborative teacher training and inclusive practices in Indian universities. *University News*, 58(23), 12–19.
- Sharma, U., & Das, A. (2019). Inclusive education in India: Challenges and prospects. *Asia Pacific Education Review*, 20(4), 1–13.
- Sharma, P., & Nair, A. (2018). Teacher-parent collaboration and student Mental wellbeing. *Indian Educational Review*, 55(1), 44–58.
- Singh, R., & Kaur, M. (2019). Peer support and exam stress management in Delhi schools. *Indian Journal of Psychological Studies*, 64(4), 112–120.
- Slee, R. (2019). Inclusive education and the rise of neoliberalism. *Journal of Education Policy*, 34(6), 876–890.
- Trickett, E. J., et al. (2019). Community-based participatory research: Challenges and opportunities. *Annual Review of Psychology*, 70, 395–419.
- Weare, K. (2020). *Promoting mental health in schools*. Routledge.
- Weare, K., & Nind, M. (2011). Mental health promotion and problem prevention in schools: What does the evidence say? *Health Promotion International*, 26(S1), i29–i69.
<https://doi.org/10.1093/heapro/dar075>
- World Health Organization. (2020). *Mental health: Strengthening our response*.
<https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>
- Verma, G. (2020). Student-led mental health support clubs: Evidence from Maharashtra schools. *Indian Journal of Educational Psychology*, 12(2), 78–92.