



Last updated: October 17th, 2022

Mental Health Promotion

PLEASE NOTE THE FOLLOWING DIFFERENCES IN HOW THIS EVENT WILL BE RUN AT HOSA CANADA'S FALL LEADERSHIP CONFERENCE (FLC):

1. The Social Media Campaign will be pre-judged using digital submissions at FLC. The submission link will be made available as a Google Form via the Google Classroom for this event. The submission deadline for FLC is 11:59 PM EST on November 19th, 2022.
2. Event will run according to the guidelines in the following pages, except that it will take place entirely online at FLC only.
**Students participating online will be expected to turn their cameras on for the entire duration of the event and show judges their surroundings to help minimize the occurrence of academic dishonesty.*
3. Teams will be emailed their presentation time slots and Zoom invitations ahead of time at FLC only.

PLEASE NOTE HOSA CANADA'S SPRING LEADERSHIP CONFERENCE (SLC) WILL BE IN-PERSON AND THIS EVENT WILL BE RUN ACCORDING TO THE GUIDELINES IN THE FOLLOWING PAGES, EXCEPT FOR THE FOLLOWING DIFFERENCE:

1. The Social Media Campaign will be pre-judged using digital submissions at SLC. The submission link will be made available as a Google Form via this events Google Classroom. The submission deadline for SLC is 11:59 PM EST on May 10th, 2023.

Mental Health Promotion



New for 2022 – 2023

This is a new event for 2022 -2023. With the release of the [Surgeon General's Advisory Report](#) in December 2021, the timing of this event is well-poised to make an impact on our HOSA members and communities as a whole. Special thanks to California HOSA for their efforts to bring this important topic and event to HOSA members.

Event Summary

The Mental Health Promotion event provides HOSA members with an introduction to Mental Health topics with a grounding in prevention. The event is built on the understanding that “mental health IS health” and that we must think about taking care of our mental health just as we do our physical health.

This competitive event consists of a team of 2 to 6 members. All team members must first complete the [Be There Certificate](#) online course to help increase their mental health literacy. Teams will then create and publish a social media campaign for their peers centered on building and promoting protective factors around a selected mental health topic. This social media campaign will be pre-judged digitally prior to ILC. Teams will present their social media campaign and process to a panel of judges at ILC. This event aims to provide information on how to support someone struggling with their mental health and to inspire future health professionals to promote the importance of mental health in their schools and communities.

Sponsorship This event is sponsored by [CVS Health](#)



Dress Code Competitors shall wear the official HOSA uniform or proper business attire. Bonus points will be awarded for [proper dress](#). All team members must be properly dressed to receive bonus points.

Competitor Must Provide

- [Photo ID](#)
- One pdf of the completed [Be There Certificates](#) for ALL Team Members, reference pages, completed Mental Health Consultant form and digital files / links of the social media campaign electronically submitted by the published deadline
- Index cards or electronic notecards for presentation (optional)
- Computer/Tablet with social media campaign (optional)

General Rules

1. Competitors in this event must be active members of HOSA in good standing.
2. **Eligible Divisions:** Secondary and Postsecondary/Collegiate members are eligible to compete in this event.
3. Competitors must be familiar with and adhere to the [“General Rules and Regulations of the HOSA Competitive Events Program \(GRR\).”](#)
 - Per the [GRRs #11](#) and [Appendix H](#), HOSA members may request accommodation in any competitive event. To learn the definition of an accommodation, please read [Appendix H](#). To request accommodation for the International Leadership Conference, [submit the request form here](#) by May 15 at midnight EST.
 - To request accommodation for any regional/state level conferences, please work with your local and state advisor directly. Accommodations must first be done at state in order to be considered for ILC.
4. All competitors shall report to the site of the event at the time designated for each round of competition. At ILC, competitor's [photo ID](#) must be presented prior to ALL competition rounds.

Suggested Event Resources

5. [CVS Health Mental Health and Well-being](#)
6. [Substance Abuse and Mental Health Services Administration website](#)
 - o [Risk & Protective Factors for Youth](#)
 - o [Risk & Protective Factors](#)
7. [Jed Foundation](#)
8. [Surgeon General's Advisory: Protecting Youth Mental Health](#)
9. [Mental Health.gov](#)

Be There Certification

10. All team members will first complete the [Be There](#) online course. The course has six modules which should take less than 2 hours and is free of charge. The course will increase mental health literacy and provide information on how to support someone struggling with their mental health.
10. Upon completion of the course, each team member will download a .pdf copy of their Be There Certificate. This Certificate is a required part of the digital upload to Tallo as outlined in #22 below.

Identify a Mental Health Consultant

11. Teams will identify a Mental Health Consultant who will support their participation in this Mental Health Promotion event. Consultants could include a school mental health professional (i.e.: counselor, nurse, psychologist, etc.), or community mental health professional. If none of these consultants are available, the local HOSA advisor can serve in this role.
12. The purpose of the Mental Health Consultant is to provide competitors oversight of project content and to offer support and guidance.
13. The Mental Health Consultation form is found on page 6 of the guidelines and must be included as part of the digital upload to Tallo as described in #22 below.

Identify Risk and/or Protective Factors for Mental Health within Social Media Campaign

14. Teams will focus on risk and/or protective factors [for youth](#). [Learn more about risk and protective factors](#) and [view a listing of specific factors here](#).
15. The risk and/or protective factors can be selected based on the team's interest and/or on a needs assessment/evaluation of their school/community and the desire to address a particular topic with their peers.
16. Teams should work with their Mental Health Consultant to identify an appropriate youth topic and risk and/or protective factors related to the topic. As EXAMPLES, the below two example scenarios are outlined.

- a. Working with the Mental Health Consultant, your team discovers that there are a large number of “people who are cutting for self-harm” in your school. Some risk factors of self-harm are identified as bullying, peer conflict, and witnessing violence in the home. The team decides to focus the social media campaign on ways to navigate bullying and solve peer conflicts.
- b. Your team is interested in the impact social isolation has had on teens at your school. Working with the Mental Health Consultant, you discover that many teens are showing signs of depression. Your team decides to focus your social media campaign on engagement and connections with others through school extracurricular activities, as this has been identified as a protective factor for depression.

Develop a Social Media Campaign for Peers

17. Using the team’s chosen topic and identified risk and/or protective factors, teams will develop a social media campaign to educate their peers on this topic.
18. The social media campaign may include photos, videos, interviews, graphics, animations, cartoons, audio, blogs, tweets, or any other appropriate form of original social media content to convey the educational message desired by the team. Teams may create original content or enhancing something existing. Connected to 16b above, examples may be:
 - a. Series of photos highlighting students feeling connected and engaged during extracurricular activities at school.
 - b. Series of short video interviews of different friends from school who are involved in different school activities, explaining how a wide range of options has benefitted their emotional wellness (i.e: HOSA member, drama club member, football player, Science Olympiad member).
 - c. Series of TikTok videos or social media reels showing what the importance of engagement in school activities looks like, sounds like, and/or feels like.
19. Teams will establish the timeline and method for implementing the social media campaign. Materials may be shared on Facebook, Instagram, YouTube, TikTok, Snapchat, Vimeo, websites, etc. The timeline and methods will be shared as part of the round two presentation. Connected to example 16b above, an example may be:
 - a. The social media campaign will be shared on each team member’s Instagram profile, as well as the local HOSA chapter’s Instagram account during the month of January, so all posts and content can be shared back-to-back. There will be a minimum of 31 posts, one per day, for the month.
20. Teams will compile a Reference Page(s) citing all literature used in the development of the Social Media Campaign. American Psychological Association (APA) is the preferred resource in Health Science. *Points will be awarded for compiling a clean, legible reference page(s), but the formatting of the reference page(s), is not judged.* The Reference Page(s) will be included as part of the digital upload to Tallo as described in #22 below.

Pre-Judging Competition - REQUIRED Digital Upload of Social Media Campaign

21. The following items **MUST** be uploaded to the Mental Health Promotion ILC opportunity in Tallo by May 15 by one member of the team.
 - a. All digital files showing the Social Media Campaign – including any images, graphics, and links to videos and/or posts. For links, type or copy/paste the URL link into the pdf file and ensure all links are set to PUBLIC permissions so judges can view them.
 - b. Copy of each team member’s *Be There* Certificate validating completion of the course.
 - c. Completed Mental Health Consultant Form, page 6 of guidelines.
 - d. Reference Page(s).

May 15 at midnight EST is the **final deadline** and there will be **NO EXCEPTIONS** to receipt of the required materials after the deadline.

The above materials will be uploaded as one combined pdf file. - There is no limit to the number of pages this pdf can be. Include all files and links that were used as part of the Social Media Campaign. Refer to the [Tallo](#)

[Instructions](#) for information on file size upload limits.

22. **SECONDARY/POST-SECONDARY/COLLEGIATE:**

Detailed instructions for uploading materials to Tallo can be found [HERE](#).

23. State Leadership Conference (SLC) vs. HOSA's International Leadership Conference (ILC)
- a. **State Leadership Conferences.** It is the competitor's responsibility to check with their Local Advisor for all state-level processes used for competition as Tallo might not be a requirement.
 - b. **International Leadership Conference.**
 - a. **If a competitor uses Tallo as a requirement at the SLC**, the competitor **MUST** upload an **ADDITIONAL** time to the ILC Tallo opportunity by May 15. The competitor may use the product(s) exactly as written for the SLC but, if the competitor wants to change the information, the competitor may upload a revised version for ILC.
 - b. **If Tallo is NOT used at the competitor's SLC**, it is the competitor's responsibility to upload the product to Tallo for HOSA's ILC on the ILC Tallo opportunity no later than May 15. Not using Tallo at a competitor's State Leadership Conference is not an exception to the rule. **ALL competitors MUST** use Tallo for ILC competition.
24. The FINAL ILC digital upload deadline is May 15. We **STRONGLY** suggest not waiting until the last minute to upload online to avoid user-challenges with the system.
25. For ILC, the digital materials uploaded by May 15 will be **PRE-JUDGED**. Competitors who do not upload materials are **NOT** eligible for the presentation portion of competition and **will NOT be given a competition appointment time at ILC**. All digital content uploaded as of May 15 is what will be used for pre-judging at ILC.
26. Pre-judging will not be attended by competitors at ILC. Judges will view the submitted digital items and will use the rating sheet to score each team's social media campaign.
27. It is important to note that judges will have seven (7) minutes to review the pre-judged digital submissions. The number of items (photos, videos, etc.) to include in the social media campaign is determined by the team, but should be aware of this seven (7) minute review time to ensure there is not too much (or too little) content for the judges to effectively get through.

Presentation for Judges

28. Teams will report at their appointed time to present to the judges.
29. Teams will have a maximum of seven (7) minutes to present to the panel of judges.
30. The timekeeper will announce the time when there is one (1) minute remaining in the presentation. The timekeeper will stop the presentation after seven (7) total minutes and the team will be excused.
31. The presentation will:
- a. Share key points that the team learned from taking the Be There Certification.
 - b. Explain the risk and/or protective factors the social media campaign addressed.
 - c. Summarize "why" the selected topic was chosen (the needs assessment/evaluation of the school/community, and/or the interest by the team).
 - d. Outline the timeline and methods used in the campaign.
 - e. Share how the Mental Health Consultant was utilized in the learning process.
 - f. Describe potential next steps and how the team could implement additional projects and further make a difference regarding the identified target topic.
32. The use of a computer/tablet/DVD player is acceptable to incorporate pieces of the social media campaign during the team's presentation. Teams will bring their own computer/tablet/DVD player operating on battery power for showing parts of the social media campaign. The information should be clearly visible to judges

sitting up to 5 feet away from the screen. (HOSA will NOT provide a TV, DVD player, electrical power, wi-fi, AV, screen, or any connecting cables.)

33. During the presentation, all or part of the social media campaign can be shown to judges to enhance the presentation. The amount of the campaign, and which part(s) of the campaign shown is at the discretion of the team.
34. Use of index card notes during the presentation are permitted. Electronic notecards (on a tablet, smart phone, laptop, etc.) are permitted, but may not be shown to judges.
35. Teams will be ready to present with their digital media at their appointed time.

Final Scoring

36. Scores from pre-judged social media campaign will be added to the presentation score to determine the final results.
37. In the event of a tie, a tiebreaker will be determined by the areas on the rating sheet section(s) with the highest point value in descending order.

Mental Health Promotion: *Mental Health Consultation Form*

Competitor's Names: _____

School: _____ HOSA Advisor Name: _____

Mental Health Consultant: _____ *Title:* _____

Date(s) of Consultation:	Total Time Spent Meeting with Consultant:	Topic(s) Discussed	Consultant Signature:

Thank you for taking this time to consult with HOSA-Future Health Professionals Competitors! Please help them improve by providing the following feedback. HOSA members are responsible for this form as part of their event requirements, so please return it to them at the end of their learning experience.

Objectives to Evaluate	Exceeds Expectation	Met Expectation	Needs Improvement
Competitors effectively explained HOSA to Mental Health Consultant			
The team exhibited sufficient background knowledge of their school/community needs to support engaging conversations			
The team exhibited sufficient background knowledge of mental health to support engaging conversations			
Competitors contributed effective ideas and were receptive to suggestions regarding how, when and where to seek additional help			
Competitor conducted themselves professionally at all times			
Additional Information <i>(optional advice for these future health professionals)</i>			

Mental Health Promotion – Judge’s Rating Sheet

Section # _____ Division: _____ SS _____ PS/Collegiate
 Team #: _____ Judge’s Signature _____

A. Social Media Campaign Digital Submission	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
1. Completed Be There Certification for all team members	Completed Be There Certification submitted for all team members.	N/A	N/A	N/A	Be There Certification not submitted for all team members.	
2. Mental Health Consultation Form	The Mental Health Consultation form is submitted and complete.	N/A	N/A	N/A	The Mental Health Consultation Form is incomplete OR was not submitted.	
3. Reference Page(s)	The reference page(s) included in the digital submission	N/A	N/A	N/A	Reference page(s) not included in the digital submission.	
B. Social Media Campaign Content	Excellent 15 points	Good 12 points	Average 9 points	Fair 6 points	Poor 0 points	JUDGE SCORE
1. Risk and/or protective factors	The risk and/or protective factors identified by the team are exceptionally clear and are centered as the focus of the campaign.	A description of the risk and/or protective factors are provided but some small details are lacking.	The understanding of the risk and/or protective factors are average and not fully threaded into the campaign.	The risk and/or protective factors are not clearly communicated throughout the campaign	No evidence of understanding of the risk and/or protective factors.	
2. Understanding of chosen issue/topic	The team’s understanding of the Mental Health topic is clearly shown through the social media campaign materials. There is no doubt the team has a mastery of the content.	The team’s understanding of the Mental Health topic is mostly evident but some aspects could be more clearly defined.	The team’s understanding of the Mental Health topic is average and could be more fully developed.	The team’s understanding of the Mental Health topic is unclear and does not share adequate knowledge on the topic.	There is no evidence of an understanding of the Mental Health topic.	
3. Effectiveness and Impact	The materials submitted were extremely effective and convincing. Judges absolutely want to hear the team’s round two presentation.	The materials submitted were effective and appealing to judges. The judges are interested in hearing the team’s round two presentation.	The social media campaign was somewhat effective and appealing. The judges might be interested in hearing more but are having a hard time making up their mind.	Some of the materials submitted lacked effectiveness and did not leave a strong impact on the judges.	The judges do not want to hear about any future work from this team.	
4. Peer Education	The social media campaign is clearly designed for an audience of the team’s peers. The content does an exceptional job of educating this audience on the chosen topic.	The social media campaign was unique and offered a fresh approach to the topic; however, it was missing the “wow” factor that would appeal to this audience.	The social media campaign was adequate. It may or may not be an effective education tool for this audience.	The social media campaign was limited and missing some key points to make it desirable for peers to view.	The social media campaign did not appeal to peers and information shared was insufficient.	

C. Social Media Campaign Design	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
1. Appearance / Organization	The social media campaign is exceptionally neat, organized, and error-free. Information is clear and easy to understand and follow.	Social media campaign is neat and organized. The content has a logical flow with only minimal errors.	The social media campaign was basic and could use more organization, editing and thought to be fully understood.	The social media campaign lacked organization and/or contained several spelling errors. The flow of information seemed to create more questions than answers.	Social media campaign not submitted OR the display is either too busy or lacks enough detail to support the content.	
C. Social Media Campaign Design	Excellent 15 points	Good 12 points	Average 8 points	Fair 4 points	Poor 0 points	JUDGE SCORE
2. Creativity and Originality	The social media campaign incorporates creativity and innovation that make it unique. It has the "wow-factor" and stands out.	The social media campaign is innovative and creative. It offers something unique but is missing the wow-factor.	The social media campaign has moderate levels of creativity and originality.	Basic elements of creativity and innovation were captured in this social media campaign. It may be soon forgotten.	Social media campaign not submitted OR little creativity or originality was captured in the campaign. More effort needed.	
Subtotal Points for Pre-judging Social Media Campaign (115):						

A. Presentation Content	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
1. Learning Points from <i>BeThere</i> Certification	The team did an exceptional job of sharing what they learned from taking the <i>BeThere</i> Certification course. It was evident they greatly benefited from the course and were able to incorporate what they learned into the event process.	The team did a good job of sharing what they learned from the <i>BeThere</i> Certification course. More details would have been beneficial to show they were able to incorporate what they learned.	It was fairly evident that the team had completed the <i>BeThere</i> Certification but the information was limited in the presentation.	The team member's inclusion of information gained from the <i>BeThere</i> Certification was minimal.	It was not evident that all team members had completed the <i>BeThere</i> Certification course.	
2. Mental Health Consultant Incorporation	The team effectively shared how the Mental Health Consultant was utilized in the learning process.	NA	It was evident that the team worked with a Mental Health Consultant but how that work impacted their campaign was incomplete.	NA	Evidence of the Mental Health Consultant being utilized in the learning process was not evident.	
3. Timeline and Method	The team clearly explained the timeline for implementing their social media campaign and the methods for sharing the content with their peers.	NA	The team explained the timeline for implementation of the social media campaign but questions remain regarding sharing the information.	NA	The team failed to describe a timeline and method for sharing the social media campaign.	
4. Incorporation of Social Media Campaign during Presentation	The use of the social media campaign greatly enhanced the presentation. The incorporation was very smooth and thoughtful.	The use of the social media campaign during the presentation helped explain the campaign. It complemented the presentation effectively.	The competitors did an adequate job of using the social media campaign during the presentation.	The use of the social media campaign only somewhat enhanced the presentation and seemed to miss key points of emphasis.	The use of the social media campaign seemed to be an "afterthought" to the presentation. There was a definite disconnect.	

A. Presentation Content	Excellent 15 points	Good 12 points	Average 9 points	Fair 6 points	Poor 0 points	JUDGE SCORE
5. Summarize "why" the selected topic is chosen	The team included details of the needs assessment of the school/community and/or clearly summarized why they selected the topic they did – the reason for selecting the topic is appealing.	The team did a good job of sharing the "why" of the selected topic and/or incorporating the needs assessment information.	Summary of "why" and/or needs assessment are sufficient but could have been developed further.	Reasoning behind the "why" is lackluster and/or needs assessment misses the mark.	The "why" / needs assessment of the topic selection was missing.	
6. Risk and/or protective factors	The risk and/or protective factors identified by the team are well researched and it is evident the team has a command of the topic selected.	A description of the risk and/or protective factors are provided but some small details are lacking.	The understanding of the risk and/or protective factors are average and not fully threaded into the presentation.	The risk and/or protective factors are not clearly communicated throughout the presentation.	No evidence of understanding of the risk and/or protective factors was shared in the presentation.	
A. Presentation Content	Excellent 15 points	Good 12 points	Average 9 points	Fair 6 points	Poor 0 points	JUDGE SCORE
7. Next Steps	The team clearly defined potential next steps for their selected topic and how they could further expand and make a difference.	N/A	The team included some potential steps for what comes next, but additional development is needed.	N/A	The team did not define potential next steps for their selected topic.	
B. Presentation Delivery	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
1. Voice Pitch, tempo, volume, quality	The team's voice was loud enough to hear. They varied rate & volume to enhance the speech. Appropriate pausing was employed.	The team spoke loudly and clearly enough to be understood. They varied rate OR volume to enhance the speech. Pauses were attempted.	The team could be heard most of the time. They attempted to use some variety in vocal quality, but not always successfully.	The team's voice is low. Judges have difficulty hearing the presentation.	Judge had difficulty hearing and/or understanding much of the speech due to low volume. Little variety in rate or volume.	
2. Stage Presence Poise, posture, eye contact, and enthusiasm	Movements & gestures were purposeful and enhanced the delivery of the speech and did not distract. Body language reflects comfort interacting with judges. Facial expressions and body language consistently generated a strong interest and enthusiasm for the topic.	The team maintained adequate posture and non-distracting movement during the speech. Some gestures were used. Facial expressions and body language sometimes generated an interest and enthusiasm for the topic.	Stiff or unnatural use of nonverbal behaviors. Body language reflects some discomfort interacting with audience. Limited use of gestures to reinforce verbal message. Facial expressions and body language are used to try to generate enthusiasm but seem somewhat forced.	The team's posture, body language, and facial expressions indicated a lack of enthusiasm for the topic. Movements were distracting.	No attempt was made to use body movement or gestures to enhance the message. No interest or enthusiasm for the topic came through in presentation.	
3. Diction*, Pronunciation** and Grammar	Delivery emphasizes and enhances message. Clear enunciation and pronunciation. No vocal fillers (ex: "ahs," "uh/ums," or "you-knows"). Tone heightened interest and complemented the verbal message.	Delivery helps to enhance message. Clear enunciation and pronunciation. Minimal vocal fillers (ex: "ahs," "uh/ums," or "you-knows"). Tone complemented the verbal message	Delivery was adequate. Enunciation and pronunciation suitable. Noticeable verbal fillers (ex: "ahs," "uh/ums," or "you-knows") present. Tone seemed inconsistent at times.	Delivery quality minimal. Regular verbal fillers (ex: "ahs," "uh/ums," or "you-knows") present. Delivery problems cause disruption to message.	Many distracting errors in pronunciation and/or articulation. Monotone or inappropriate variation of vocal characteristics. Inconsistent with verbal message.	

B. Presentation Delivery	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
4. Team Participation	Excellent example of shared collaboration in the presentation of the campaign. Each team member spoke and carried equal parts of the presentation.	Most of the team was actively engaged in the presentation.	The team worked together relatively well. Some of the team members had little participation.	The team did not work effectively together to present their campaign.	One team member dominated the presentation.	
Subtotal Points for Presentation (125):						
Total Points (240):						

*Definition of Diction – Choice of words especially with regard to correctness, clearness, and effectiveness.

**Definition of Pronunciation – Act or manner of uttering officially