

Mental Health Promotion

Emergency Preparedness Event

Eligible Divisions: Secondary & Postsecondary/Collegiate	Pre-Judged: Social Media campaign	Digital Upload: YES
Team Event: 2 - 6 competitors per team	Round 1: Presentation	



New for 2024 – 2025

Clarification has been provided on the number of required meetings with Mental Health Consultant. Editorial updates have been made.

TEXAS HOSA

Area Spring Leadership Conference (Virtual Area Competitive Event)

*REQUIRED DIGITAL UPLOAD

- One member of the team must upload the required materials to the HOSA Digital Upload System before the area spring leadership conference registration deadline.
- Ensure all links are set to **PUBLIC** permissions so judges can view them.
- The digital materials uploaded before the area spring leadership conference deadline will be **PRE-JUDGED** virtually. Judges will be using Section A-C for virtual judging.
- The **top 10** scoring teams will be given an appointment time to present in person at the Area Spring Leadership Conference. Scores from Section A-C will be added to Section D for the final score.
- The top three (3) scores from each Area will advance to State.

Texas State Leadership Conference (Virtual State Competitive Event)

*REQUIRED DIGITAL UPLOAD

- One member of the team must upload the required materials to the HOSA Digital Upload System before the State Leadership Conference registration deadline.
- Ensure all links are set to **PUBLIC** permissions so judges can view them.
- The digital materials uploaded before the State Leadership Conference deadline will be **PRE-JUDGED** virtually. Judges will be using Section A-C for virtual judging.
- **All** teams will present in person at the State Leadership Conference. The scores from Section A-C will be added to Section D for the final score.

Teams advancing to ILC will be required to upload again before the ILC deadline.

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. Teams will 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

HOSA-Future Health Professionals is appreciative for the sponsorship of Mental Health Promotion by [CVS Health](#)



Competitor Must Provide

- [Photo ID](#)
- Reference pages, completed Mental Health Consultant form and digital files / links of the social media campaign electronically submitted by the published deadline (see advisor regarding SLC requirements and deadlines)
- Index cards or electronic notecards for presentation (optional)
- Computer/Tablet with social media campaign (optional)

Dress Code

Proper business attire or official HOSA uniform. Bonus points will be awarded for [proper dress](#). All team members must

be properly dressed to receive bonus points.

General Rules

1. Competitors must be familiar with and adhere to the [General Rules and Regulations](#).

Event Resources

2. The following are suggested event resources:
 - a. [CVS Health Mental Health and Well-being](#)
 - b. [Substance Abuse and Mental Health Services Administration website](#)
 - i. [Risk & Protective Factors for Youth](#)
 - ii. [Risk & Protective Factors](#)
 - c. [Jed Foundation](#)
 - d. [Surgeon General's Advisory: Protecting Youth Mental Health](#)
 - e. [Mental Health.gov](#)
 - f. [Be There Certification](#)

Identify a Mental Health Consultant

3. 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.
4. The purpose of the Mental Health Consultant is to provide competitors oversight of project content and to offer support and guidance.
5. The Mental Health Consultation form is found on page 6 of the guidelines and must be included as part of the digital upload as described below.
6. The number of meetings the team has with the Mental Health Consultant is a team decision. Additionally, a team may choose to identify more than one consultant. This is acceptable but certainly not required. If so, upload multiple copies of the Mental Health Consultation Form.

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

7. 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](#).
8. 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.

9. 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**, see below two example scenarios:
 - 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

10. 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.
11. 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 enhance something existing. Connected to 9b 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).*
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.
12. 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 9b 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.*
13. 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 as described below.

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

14. The following item(s) **MUST** be uploaded by ONE member of the team to the HOSA Digital Upload System by May 15:
 - a. All digital files showing the Social Media Campaign – including any images, graphics, and links to videos and/or posts.
 - i. It is up to the team how to best organize and present their digital files showing the Social Media Campaign. An example from a previous year’s team is available here: <https://linktr.ee/pavitforward.hosa>.
 - ii. 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. Links without public permission will result in the entire

project being given a 0 score. If you use Instagram or another social media platform, ensure all content submitted for judging is publicly viewable.

- b. Completed Mental Health Consultant Form, page 6 of guidelines.
- c. Reference Page(s).

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.

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

15. Detailed instructions for uploading materials can be found at:
<https://hosa.org/competitive-event-digital-uploads/>
16. 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 digital uploads may or may not be a requirement.
 - b. **International Leadership Conference.**
 - i. If a competitor uses the HOSA Digital Upload System as a requirement at the SLC, the competitor **MUST upload an ADDITIONAL time for ILC by May 15.**
 - ii. If the HOSA Digital Upload System is NOT used at the competitor's SLC, it is still the competitor's responsibility to upload the product for HOSA's ILC no later than May 15. Not using the HOSA Digital Upload System at a competitor's State Leadership Conference is not an exception to the rule.
17. 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.
18. 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 the 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.
19. 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.
20. It is important to note that judges will have seven (7) minutes to review the pre-judged digital submissions. The team determines the number of items (photos, videos, etc.) to include in the social media campaign, but the team 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 review.

Presentation for Judges

21. Teams will report at their appointed time to present to the judges.
22. Teams will have a maximum of seven (7) minutes to present to the panel of judges.
23. 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.
24. The presentation will:
 - a. Share key points that the team learned from reading the recommended resources.
 - 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.

25. Using a personal electronic device (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 to show parts of the social media campaign. The information should be visible to judges sitting up to 5 feet from the screen. (HOSA will NOT provide a TV, DVD player, electrical power, wi-fi, AV, screen, or any connecting cables.)
26. 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 are shown is at the team's discretion.
27. 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. Only the team's electronic device may be shown to the judges during the presentation. Please refer to [GRR #31](#).
28. Teams will be ready to present with their digital media at their appointed time.

Final Scoring

29. Scores from pre-judged social media campaign will be added to the presentation score to determine the final results.
30. 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

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. 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.	
2. 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 felt the presentation was lacking in numerous aspects.	
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 (105):						

D. Presentation Content	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
1. Learning Points from suggested resources.	The team did an exceptional job of sharing what they learned from the suggested resources. 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 suggested resources. More details would have been beneficial to show they were able to incorporate what they learned.	It was fairly evident that the team had researched the suggested resources but the information was limited in the presentation.	The team member's inclusion of information gained from the suggested resources was minimal.	It was not evident that all team members had completed the review of the suggested resources.	
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.	

D. 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.	
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.	
E. 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.	

E. Presentation Delivery	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
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.	
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 (230):						

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

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