Help Students Facing Mental Health Challenges: Evidence-based tools to drive improvement in school mental health systems and practices

Cassandra Doggrell, EdD
Lauren Madia, EdD, NCC

Disclosures
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Learning Targets
1. Discuss research to support comprehensive systems to address student needs
2. Identify evidence-based school health self-assessment tools appropriate for their schools’ needs
3. Describe strategies for implementation of self-assessment tools in the school setting

What Does the Research Say?
Terminology

- The Centers for Disease Control and Prevention (CDC, 2020) described mental health disorders in children as “serious changes in the way children typically learn, behave, or handle their emotions,” causing distress and compromising their ability to function.

- Encompasses a wide range of disorders, such as depression, oppositional defiant disorder (ODD), attention deficit disorder (ADD), attention deficit hyperactivity disorder (ADHD), obsessive compulsive order (OCD), and post-traumatic stress disorder (PTSD), with varying degrees of severity (CDC, 2020).

Prevalence

- The National Alliance on Mental Illness (NAMI, 2020) reported that
  - “one in five youth have a mental health condition, with half of mental health conditions developing by age 14”.
  - statistics show that still fewer than half of youth with mental health conditions receive treatment.

- CDC (2020) reported
  - depression and anxiety in children has increased over time
  - depression, substance use and suicide are important concerns for adolescents

- The Pennsylvania Department of Education (PDE, 2020) estimated that “approximately 30% of school aged children will experience a behavioral, mental, or developmental condition in any given year”.

Global Impact

- Mental health disorders account for the highest rates of disabilities in the United States population and contribute to rates of school dropout, incarceration, substance use, and homelessness (NASEM, 2019).

- United States expenditure for mental health services in 2020 was $280.5 billion (HHS, 2014). The economic strain is further impacted since mental health disorders are associated with loss of earnings, low productivity, and other indirect costs.

Educational Impact

- Mental health disorders affect concentration, energy level, cognitive functioning, and executive functioning, resulting in disruption and disengagement from learning and social experiences.

- This disruption to students’ ability to learn manifests in low academic performance, attendance issues, discipline referrals, school dropout rates, and peer relationships (Moon et al., 2017).
Intersection of Health/Mental Health & Schools

- Intentional efforts of schools to promote healthy behaviors and cultivate positive school climate are connected to improved short-term and long-term health and academic achievement for students (Aldridge & McChesney, 2018; Hunt et al., 2015; Lewallen et al., 2016; Reback, 2010).
- The delivery of mental health interventions in schools is described as school-based mental health (SBMH) and is recommended as a way to increase access to evidence-based interventions and supports for children (Gronholm et al., 2018).
- SBMH offers prevention efforts and intervention strategies by providing a range of services delivered by school professionals (e.g., school psychologists, school social workers, school counselors, school nurses, and other school health professionals) and community-based providers or agencies in the school setting.

Usefulness of Frameworks

- Even with evidence-based resources and practices available for a multitude of areas of school health, without coordinating strategies and a cohesive framework, schools may not utilize these resources to their fullest potential, or at all (Basch, 2011).
- Absent an organizing framework, programs and practices in schools are likely to be inefficient and inadequate, similar to a “crazy quilt patchwork of programs, services, and strategies” (Anderson-Butcher et al., 2008, p. 164).

Why Comprehensive Systems?

- If a school system lacks organizational strategies to address health and wellness, its processes and programs will likely become inefficient and ineffective (Anderson-Butcher et al., 2008).
- Systems provide the ability to create common goals, combine efforts, and streamline services while conserving resources.
- Integrated, coordinated systems of support are more likely to produce more positive outcomes for students with SED (Puddy et al., 2012).

Whole School, Whole Community, Whole Child (WSCC)

(CDC, 2016)
Whole School, Whole Community, Whole Child (WSCC)

- Health Education
- Physical Education / Physical Activity Programs
- Nutrition Environment and Services
- School Health Services
- Counseling, Psychological, and Social Services

- Social and Emotional Climate
- Physical Environment
- Employee Wellness & Health Promotion
- Family Engagement
- Community Involvement

Importance of School-Based Mental Health

- Outcomes
  - Large effects on decreasing mental health symptoms (Sanchez et al., 2018)
  - Effective when integrated into students' school environment (Sanchez et al., 2018)
  - Youth are 6x more likely to complete mental health treatment in schools than community settings (NCSMH, 2019)

- Access
  - Increases accessibility
  - Prevention and early intervention

- Framework
  - Comprehensive Multitiered Systems

Tiers of Support

Self-Assessment as an Improvement Strategy

- A self-assessment is a way to explicitly and specifically identify and define a problem that requires improvement.

  “See the System that Produces the Current Outcomes”
  (Bryk et al., 2015; Carnegie Foundation for the Advancement of Teaching, 2023)
Value of Comprehensive Teams

- Ensuring school mental health efforts are appropriately staffed and supported by multidisciplinary teams.
  - effective communication
  - collaboration practices
  - teaming approach

- Considerations
  - Family and student involvement
  - School-community partnerships
  - Teaming structures
  - Meeting structures and processes

School Health Index

(Centers for Disease Control, 2017)

Self-Assessments for School Teams

School Health Index Features

- Available in Elementary and Middle/High School versions
- Designed to engage stakeholders in self-assessment of health and safety policies and programs
- Separate modules for each component of school health (11 total)
- Can be completed on paper or through online portal
Note: Unless otherwise noted, all screenshots in this section are from the CDC’s SHI Online System.

Module 6: School Counseling, Psychological, and Social Services

Question 1-5

1. Does your school have access to a full-time counselor, social worker, and psychologist for providing counseling, psychological, and social services? (as an adequate number of these staff members provided based on the following recommendations below)
   - One counselor for every 250 students
   - One social worker for every 400 students
   - One psychologist for every 1,000 students

2. Yes, we have a full-time counselor, social worker, and psychologist, and the recommended ratios are present.
3. We have a full-time counselor, social worker, and psychologist, but not at all times.
4. No, we do not have a full-time counselor, social worker, or psychologist.
5. Other (please specify)
2. Does the counseling, psychological, or social services counselor provide treatment to students and families at the following events?

- Small group counseling/meetings
- Classroom-based health promotion and prevention
- School-wide health promotion and prevention

- Yes, it is provided in all four areas.
- It is provided in 3 of 4 and small group sessions, and classroom-based school-wide activities.
- It is provided in 1 of 4 and small group sessions.
- No, it is not counseling, psychological, or social services provider does not promote emotional, behavioral, and mental health or provides treatment in any of the areas or services. Do not have such a provider.
- Does not apply.

4. Does the counseling, psychological, or social services counselor have a system for identifying and tracking students with emotional, behavioral, and mental health needs?

- Yes, there is a system to identify and track students with emotional, behavioral, and mental health needs.
- Students are systematically identified, but not systematically tracked.
- Students are identified only when an urgent need arises at school.
- No, there is no system for identifying or tracking students with emotional, behavioral, and mental health needs, so the school does not have a counseling, psychological, or social services provider.
- Does not apply.

Emotional, behavioral, and mental health needs can impact student learning and behavior if not treated or managed. They include diagnosed mental health disorders (for example, Attention Deficit Hyperactivity Disorder, Anxiety, Bipolar Disorder and Depression) and challenges such as:

- Stress, anxiety, and depression
- Worries about being bullied
- Problems with family or friends
- Loneliness or rejection
- Disabilities
- Thoughts of suicide or hurting others
- Concerns about sexuality
- Academic difficulties or dropping out
- Alcohol, tobacco, or other drug use
- Inadequate basic life needs (e.g., housing, food, clothing, healthcare)
- Pregnancy or parenting
- Death of a friend or family member
- Addiction
- Fear of violence, terrorism, or war
Module 6: School Counseling, Psychological, and Social Services

Question 6 of 7

4. How do you support students during school and life transitions (such as changing schools or changes in family structures)?
   - Matching new students with another student or buddy
   - Opportunities for students to check in with a trusted adult
   - Identification programs that have an adaptive role in transitions

   Yes, our school aids students during school and life transitions in all three of these ways.
   - Yes, our school aids students during school and life transitions in some of these ways.
   - No, our school does not aid students during school and life transitions in any of these ways.

   Previous | Next
Step 2: Recommended Actions

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<thead>
<tr>
<th>Action</th>
<th>Importance</th>
<th>Cost</th>
<th>Time</th>
<th>Government</th>
<th>Feasibility</th>
<th>Total Points</th>
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<tbody>
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### Overview

**Overall Scores and**

For each module, a “○” appears where the module score falls. Use these scores to create a plan for improvement.

<table>
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<tr>
<th>Module</th>
<th>Score</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
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<td>Module 2: Health Education</td>
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<td>Module 3: Physical Education and Physical Activity Programs</td>
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<td>Module 6: School Counseling, Psychological, and Social Services</td>
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<td>Module 7: Social and Emotional Climate</td>
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<td>Module 8: Health and Environmental</td>
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<td>Module 9: Employee Wellness and Health Promotion</td>
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<td>Module 10: Family Engagement</td>
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<td>Module 11: Community Engagement</td>
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Contact source: National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, School Health Branch.
School Mental Health Quality Assessment (SMHQA)

Assessments and Tools
- Trauma Responsive Schools Implementation Assessment (TRS-IA)
  - Trauma Responsive Schools Guide
- Guides and tools related to domains of SMHQA
- Preschool and Early Childhood
- Screening and assessment tools

Implementation Strategies

Administrative Buy-In
A school must have the support of one or more school leaders who have the agency to carry forward any recommendations for change that come from the review

(Austin et al., 2006; Sherwood-Puzello et al., 2007)
Intentional Planning & Preparation

Facilitation Tools
SMHQA
- Strategic Planning Guide

Facilitation Tools
SMHQA
- Mental Health Quality Guides
  - Summary of research
  - Examples from the field
  - Best practices
  - Action Steps
  - Linked resources and examples

Facilitation Tools
SMHQA
Guide Example
- Early Intervention and Treatment Services and Supports Tier 2/Tier 3 Quality Guide

Facilitation Tools
SMHQA
Guide Example
- Implement a systematic protocol for emotional and behavioral crises
  - Best Practices

Facilitation Tools
SMHQA
Guide Example
- Early Intervention and Treatment Services and Supports Tier 2/Tier 3 Quality Guide
Facilitation Tools

**SMHQA Guide Example**

- Early Intervention and Treatment Services and Supports Tier 2/Tier 3 Quality Guide

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**Additional Resources / Technical Assistance**

- Mental Health Technology Transfer Center (MHTTC) Network
  - School Mental Health Best Practices Implementation Guidance Modules

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**Sources Cited**


Sources Cited (Continued)

- Pennsylvania Department of Education. (2020). Safe schools: Mental health. [https://www.education.pa.gov/Schools/safeschools/MentalHealth/Pages/default.aspx]