

**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



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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

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Disclosures

The presenters have no conflicts of interest nor financial disclosures to report.

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What Does the Research Say?



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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).

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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.

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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”.

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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).

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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., 2015; 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.

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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).

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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)

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Whole School, Whole Community, Whole Child (WSCC)



(CDC, 2015)

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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

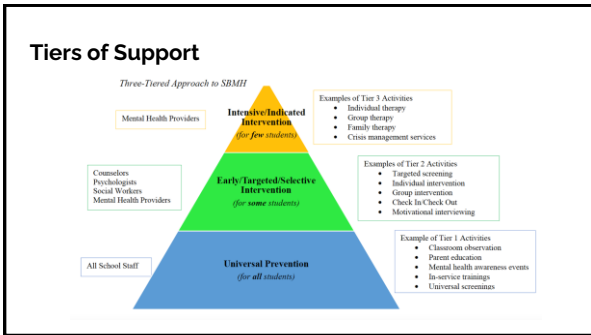
- Social and Emotional Climate
- Physical Environment
- Employee Wellness & Health Promotion
- Family Engagement
- Community Involvement

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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

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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)

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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

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School Health Index

(Centers for Disease Control, 2017)



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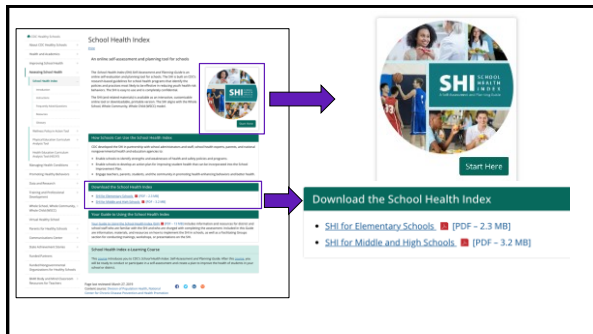
Self-Assessments for School Teams

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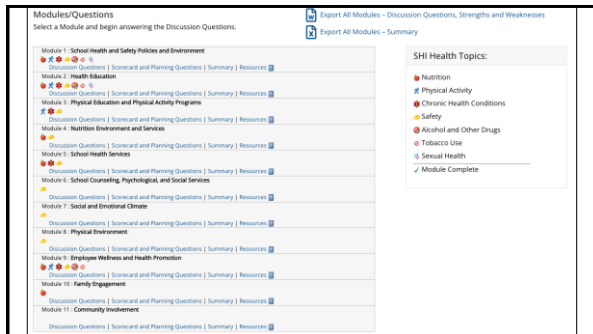
School Health Index Features

- 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

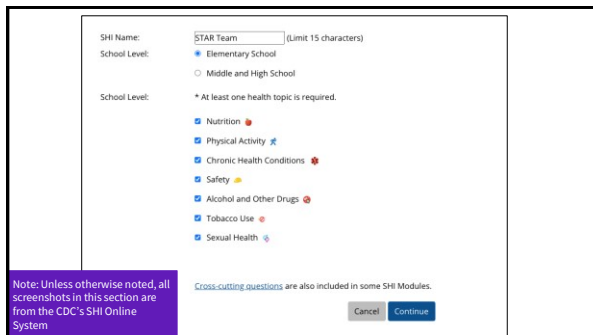
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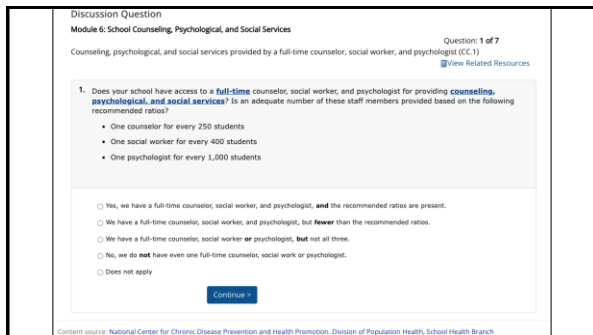
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Discussion Question
 Module 6: School Counseling, Psychological, and Social Services
 Health and safety promotion and treatment (CC.2) Question: 2 of 7
[View Related Resources](#)

2. Does the **counseling, psychological, or social services** provider promote the **emotional, behavioral, and mental health** of and provide treatment to students and families in the following ways?

- 1-on-1 counseling/sessions
- Small group counseling/sessions
- Classroom-based health promotion and prevention
- School-wide health promotion and prevention

Yes, it is provided in all four ways.

It is provided in 1-on-1 and small group sessions, **and** classroom-based **or** school-wide activities.

It is provided **only** via 1-on-1 and small group sessions.

No, our counseling, psychological, or social services provider does **not** promote emotional, behavioral, and mental health or provide treatment in any of these ways **or** we do not have such a provider.

Does not apply

[< Previous](#) [Continue >](#)

Content source: National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, School Health Branch

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Discussion Question
 Module 6: School Counseling, Psychological, and Social Services
 Identify and track students with emotional, behavioral, and mental health needs (CC.4) Question: 4 of 7
[View Related Resources](#)

4. Does the **counseling, psychological, or social services** provider 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, **or** the school does not have a counseling, psychological, or social services provider.

Does not apply

[< Previous](#) [Continue >](#)

Content source: National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, School Health Branch

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Discussion Question
 Module 6: School Counseling, Psychological, and Social Services
 Collaborate with other school staff members (CC.3) Question: 3 of 7
[View Related Resources](#)

3. Does the **counseling, psychological, or social services** provider collaborate with other school **staff members** to promote student health and safety in at least six of the following ways?

- Developing plans to address student health problems (e.g., individual health care plans, individual education plans, **504 plans**, school team plans)
- Providing **professional development** on managing student health and safety concerns, a component of which educates **staff** on the impact of Adverse Childhood Experiences (ACEs) and the principles of a trauma-informed school
- Developing policy
- Identifying, revising or developing curricula or units/lessons
- Developing and implementing school-wide and classroom activities
- Developing School Improvement Plans
- Establishing communication systems with other school staff

Yes, there is collaboration in **at least six** of these ways.

There is collaboration in **three to five** of these ways.

There is collaboration in **one or two** of these ways.

No, there is **no** collaboration, or the school does **not** have a counseling, psychological, or social services provider.

Does not apply

[< Previous](#) [Continue >](#)

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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

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Discussion Question
Module 6: School Counseling, Psychological, and Social Services
 Establish referral system (CC.6)

Question: 5 of 7
[View Related Resources](#)

5. Does your school implement a systematic approach (including the following components) for referring students, as needed, to appropriate school- or community-based **counseling, psychological, and social services**?

- Case management, including assessment, referral, education, support, and monitoring, is shared.
- Referral information is distributed widely (e.g., through fliers, brochures, website, student handbook, health education class) to staff, students, staff, and families can learn about school and community services without having to contact school staff.
- **Staff members** are given clear guidance on referring students to school counseling, psychological, and social services.
- Referral forms are easy for staff members to access, complete, and submit confidentially.
- A designated staff person (e.g., school counselor, social worker, or psychologist) regularly reviews and sorts referral forms and conducts initial screening.
- With written parental permission, additional information (e.g., questionnaires, relevant records, brief testing) is gathered as necessary and in compliance with **FERPA**, and all information is kept confidential.
- Written consent is obtained, in compliance with **FERPA**, to gather relevant records from other professionals or agencies as a confidential source, if available.
- A list is kept and regularly updated of youth-friendly referral providers along with basic information about each (e.g., cost, location, language, program features, services, their feedback, type of insurance accepted).
- Meetings are held with all relevant parties to discuss referral alternatives.
- Referral barriers (e.g., cost, location, transportation, stigma), and how to overcome them, are discussed.
- Referral (e.g., via telephone, text messages, email, personal contacts) is conducted to evaluate the referral and gather feedback about the service.
- A follow-up report is provided to the person who identified the problem, if applicable and in compliance with **FERPA** and/or **IDEIA**.
- Professional development is provided to all staff members about the referral process.

Yes, our school has a referral system that includes **all** of these components.
 Our school has a referral system that includes **some** of these components.
 Our school has a referral system that includes a **few** of these components.
 Our school's referral system does **not** include any of these components, or our school does not have a referral system.
 (Optional open)

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Discussion Question
Module 6: School Counseling, Psychological, and Social Services

Question: 7 of 7
[View Related Resources](#)

Identify and refer students involved in violence (S.1)

7. Does the **counseling, psychological, or social services** provider have a system for identifying students who have been involved (as a bystander, victim, perpetrator, or some combination of these) in any type of violence (e.g., child abuse, dating violence, sexual assault, **bullying** or **harassment**, fighting, suicide and self-harm behaviors) and, if necessary, refer them to the most appropriate school-based or community-based services?

Yes, identifies and refers students to the most appropriate services.
 Identifies and refers students, **but** does not always refer them to the most appropriate services.
 Identifies students, **but** sometimes does not refer them to appropriate services.
 Does not identify students at risk, or the school does not have a counseling, psychological, or social services provider.
 Does not apply

Content source: National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, School Health Branch

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Discussion Question
Module 6: School Counseling, Psychological, and Social Services

Question: 6 of 7
[View Related Resources](#)

Aid students during transitions (CC.6)

6. Does your school aid students during school and life transitions (such as changing schools or changes in family structure) in the following ways?

- Matching new students with another student or buddy
- Opportunities for students to check-in with a trusted adult
- Orientation programs that focus on adapting to transitions

Yes, our school aids students during school and life transitions in **all three** of these ways.
 Our school aids students during school and life transitions in **two** of these ways.
 Our school aids students during school and life transitions in **one** of these ways.
 No, our school does **not** aid students during school and life transitions in these ways.
 Does not apply

Content source: National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, School Health Branch

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Module 6: School Counseling, Psychological, and Social Services

Standard 6: Planning Questions

Standard 6: Planning Questions	Fully in Place	Partially in Place	Under Development	Not in Place	Does Not Apply
1. Collaborate, coordinate, and coordinate with school, community, and business (CC.6)					
2. Health and safety transitions and initiatives (CC.6)	3				
3. Collaborate with other school staff members (CC.6)	3				
4. Health and safety transitions with internal, behavioral, and mental health services (CC.6)	2		1		
5. Establish referral systems (CC.6)					
6. Aid students during transitions (CC.6)	2				
7. Identify and refer students involved in violence (S.1)	2				
Column Totals	4	4	2	0	-
Total Points/Maximum Points					14/21
Missing Points					0/7

Step 1: Identify Strengths and Weaknesses
 According to these scores, what are the strengths and the weaknesses of your school's policies and environment related to student health and safety?

Strengths
 No strengths have been entered.

Weaknesses
 No weaknesses have been entered.

Step 2: Recommended Actions

Actions
 No actions have been added.

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Step 2: Recommended Actions

Action 1:
 Is Action 1 a top priority? Yes
 Select Weaknesses:
 Enter recommended action

Select the rankings which best describe the action

Importance	5 = Very Important
Cost	4 = Somewhat Important
Time	3 = Neither Unimportant or Important
Commitment	2 = Somewhat Unimportant
Feasibility	1 = Very Unimportant
	3 = Very Easy
	Total Points:

Save Cancel

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School Health Assessment and Performance Evaluation (SHAPE) System

(National Center for School Mental Health, 2023)

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Overall Scorecard

For each module, a "✓" appears where the module score falls. Use these scores to create a Plan for Improvement.

Export Overall Scorecard

Modules	Low		Medium		High
	0-20%	21-40%	41-60%	61-80%	81-100%
Module 1 - School Health and Safety Policies and Environment					
Module 2 - Health Education					
Module 3 - Physical Education and Physical Activity Programs					
Module 4 - Nutrition Environment and Services					
Module 5 - School Health Services					
Module 6 - School Counseling, Psychological, and Social Services				✓	
Module 7 - Social and Emotional Climate					
Module 8 - Physical Environment					
Module 9 - Employee Wellness and Health Promotion					
Module 10 - Family Engagement					
Module 11 - Community Involvement					

Previous Continue

Your work will be saved automatically when you continue.

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SHAPE Overview

Welcome to SHAPE! Explore all that SHAPE has to offer to improve your district's school mental health system.

- Map your school mental health system and supports**
 - Teams are encouraged to start with the School Mental Health Profile, which asks about the structure and operations of your school mental health system. This profile is part of the National School Mental Health Census, an effort to indicate the status of school mental health nationally.
- Assess system quality using national performance measures**
 - School Mental Health Quality Assessment
 - Trauma Responsiveness
- Improve your school mental health system**
 - Custom reports help guide your team's strategic planning for system improvement.
 - Use the Resource Library to inform continuous quality improvement.
- Learn & Share SHAPE**
 - Learn about SHAPE features and how to share information about the SHAPE system with others.
- My Schools**
 - View data related to school mental health from schools in your district in the "My Schools" tab.

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School Mental Health Profile

Students Served and Data Systems

Take Survey | View Report

Staffing

Take Survey | View Report

Services and Supports

Take Survey | View Report

SHOPE
Students Served and Data Systems
JEFFERSON UNITED

Last updated: 2019-11-06

Services and Supports	Availability			
	Not in place	Little or minimal	In place at school	In place at district
Mental health awareness				
Tier 1 services and supports				
Tier 2 services and supports				
Tier 3 services and supports				
Evidence-based practices and programs				
Community partnerships				
Quality improvement processes				

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School Mental Health Quality Assessment (SMHQA)

Teaming

Schools are in the position of ensuring that school mental health efforts are appropriately staffed and supported by multidisciplinary teams that have effective communication and collaboration practices. Many schools have teams that meet to discuss and strategize about student mental health issues. Schools may have one team focused on the full continuum of mental health supports (mental health promotion to early intervention and treatment) or they may have multiple teams that address different parts of the continuum (e.g., school climate team, student support team, Individualized Education Program team, intervention/treatment care team, Tier 2 team, A and any other team that addresses student mental health concerns). School teams should include students, families, staff, and community partners that represent diverse cultural identities and backgrounds including diversity of sex, disability, ethnicity, gender identity and expression, language, national origin, race, religion, sexual orientation, and socioeconomic status. All school teams should prioritize trauma-informed approaches and cultural responsiveness, and recruit and equity as they relate to the team's mission, goals, and deliverables.

To what extent did schools in your district use best practices to...

Best Practices	Frequency					
	Never	Rarely	Sometimes	Often	Almost Always	Always
<p>1. ... ensure your school mental health team is multidisciplinary and diverse?</p> <ul style="list-style-type: none"> *Use recruitment and hiring practices to attract diverse team members. *Include team members who reflect the diversity of students, families, and staff. *Ensure that representatives of different groups regularly attend and have an active and equitable voice in team meetings and decision-making processes. *Engage school mental health system team members from the following groups: <ul style="list-style-type: none"> a. School health and behavioral health staff b. Teachers c. School administrators d. Youth/Students e. Campus/Paraprofessionals f. Community health and behavioral health (mental health/substance use) providers g. Child welfare staff h. Juvenile justice staff i. Community leaders 						

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School Mental Health Quality Assessment (SMHQA)

Teaming

Take Survey | View Report

Needs Assessment/Resource Mapping

Take Survey | View Report

Screening

Take Survey | View Report

Mental Health Promotion Services & Supports

Take Survey | View Report

Early Intervention and Treatment Services & Supports

Take Survey | View Report

Funding and Sustainability

Take Survey | View Report

Impact

Take Survey | View Report

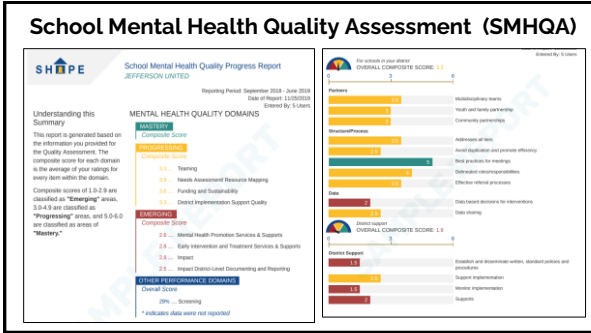
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School Mental Health Quality Assessment (SMHQA)

Best Practices	Frequency					
	Never	Rarely	Sometimes	Often	Almost Always	Always
<p>3. ... facilitate effective school-community partnerships?</p> <ul style="list-style-type: none"> * Establish communication mechanisms (e.g., team meetings, email communication, conference calls) to ensure ongoing and effective communication between school leadership/staff and community partners. * Engage community partners that represent and are trusted in the community and value cultural responsiveness, anti-racism, and equity (CRAC) and trauma-informed, family-centered approaches. * Use memorandums of understanding or other agreements to detail the terms of the partnership (i.e., by whom, what, when, where, and how all services/supports to be provided). * Support a full continuum of care within a multi-level system of supports to school and community partners working together and recognizing their respective knowledge and resources. * Use data sharing agreements, that have been established by youth and families, to allow for accessing and sharing data to inform needed services and supports and the impact of partnership activities. 						
<p>4. ... ensure teaming structures address each tier of the multi-tiered system of support?</p> <ul style="list-style-type: none"> * Establish a team or teams to effectively address Tier 1, Tier 2, and Tier 3 * Establish a clear delineation of purpose, target goals, activities, and processes of each team * Establish effective communication between teams addressing Tier 1, Tier 2, and/or Tier 3 						
<p>5. ... avoid duplication and promote efficiency of teams?</p> <ul style="list-style-type: none"> * Establish well-defined and critical goals for distinct teams with structures in place to avoid duplication of team efforts * Practice consistent communication and coordination among various teams * Address any confidentiality barriers to facilitate regular information sharing across and within teams * Have a system to evaluate existing team structures, with existing team coordination and new establishment only as necessary 						

NCMHQ, 2021 School Mental Health Quality Assessment www.thegatewaynmh.com

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- 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

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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)

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Intentional Planning & Preparation

The image shows a screenshot of a training module titled 'School Health Index: A Self-Assessment and Planning Guide E-Learning Module'. The interface includes a navigation menu with sections like 'Introduction', 'How to Use the SHI', and 'How to Interpret the SHI'. A video player is embedded in the center, showing a slide titled '1. Introduction'. To the right is a circular graphic with the text 'Your Guide to Using the School Health Index' and an image of diverse students.

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Facilitation Tools

SMHQA

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

The image shows the cover of a document titled 'School Mental Health Quality Guide: Early Intervention and Treatment Services & Supports (Tiers 2 & 3)'. It features the SHIPE logo (School Health Assessment and Performance Evaluation System) and a photograph of a woman in a pink shirt interacting with students.

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Facilitation Tools

SMHQA

- Strategic Planning Guide

The image shows a 'Strategic Planning Guide' form. It includes a header with the SHIPE logo and the title 'Strategic Planning Guide'. The form contains several sections: 'Please state a specific goal within this domain...', 'GOAL:', 'How will you know if you've achieved success within this goal?', 'What opportunities exist related to this goal?', 'What barriers exist related to this goal?', and 'INDICATOR OF SUCCESS:'. Each section has a list of bullet points for reflection.

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Facilitation Tools

SMHQA

Guide Example

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


The image shows a guide titled 'Implement a systematic protocol for emotional and behavioral crises'. It features a star icon and a 'Best Practices' section. The text describes the importance of having a protocol for emotional and behavioral crises and lists several best practices, such as developing a protocol based on team input, including guidelines for contacting parents, and providing training and ongoing coaching.

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Facilitation Tools

SMHQA
Guide Example

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



action steps Create Protocols for Student Crises

When developing protocols, specify:

- Types of crises
- Point person to respond
- Process for how to connect student with point person (e.g., nearest adult calls/texts point person)

Include instructions for:

- Contacting guardians (e.g., write example scripts for different situations that can be approved by school administrator ahead of time)
- Providing feedback to teachers/school staff after (e.g., create form or back-ups in the order they should be contacted)
- Responding when the point person is unavailable (e.g., create list of back-ups in the order they should be contacted)

Provide:

- Training (schedule time for this at the beginning, middle, and end of the school year)
- Ongoing support (label as a crisis team or administration after each event)
- Time to evaluate and revise protocol (at least annually and based on staff, parent, student, and community feedback)

Resources:

- [Facilitate Crisis Response Protocol](#)
- [SCHOOL CRISIS RESPONSE MANUAL](#) from San Francisco Unified School District is an example of a school crisis response protocol developed for a specific school district. The purpose of the manual is to provide strategies for addressing school crisis intervention using a "crisis response." Crisis response is defined here as "an intervention designed to restore a school and community to baseline functioning and to help prevent or minimize psychological results following a disaster or crisis situation."

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Questions?

Contact Us:
cdoggregl@uscscd.k12.pa.us
lmadia@uscscd.k12.pa.us

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Additional Resources / Technical Assistance

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



MHTTC Mental Health Technology Transfer Center Network
 Funded by Substance Abuse and Mental Health Services Administration

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