



Addendum: Mental Health Awareness Programs in Schools

Executive Summary

Mental health difficulties are common among young people and the mental health of elementary and secondary school students has been negatively affected by the COVID-19 pandemic broadly. State policies have implemented various school-based mental health programs and academic studies are evaluating the role that school-based mental health programs may have in promoting emotional and behavioral wellness in this age group. Proposed in the 2022 legislative session, [SB 1057](#) would require that the Department of Elementary and Secondary Education (DESE) develop a program for high school students on mental health awareness. Based on this plan, public high schools in Missouri would be required to integrate mental health awareness programming into health or physical education curricula.

Highlights

- Roughly 20% of youth experience a mental health difficulty each year; schools have been identified as one avenue to administer mental health services.
- Important features of school mental health training programs include: 1) coping and help-seeking training, 2) social and emotional training, and 3) psychological education.
 - The most effective programs are adaptable and involve student and teacher engagement.
- Missouri schools can currently receive no-cost Mental Health First Aid training made possible by federal relief funding.
- A study of mental health first aid programming for school personnel found that the majority of participants had increased mental health literacy, decreased stigma toward mental health issues, and reported more confidence in identifying and interacting with students undergoing mental health difficulties.

Limitations

- Many studies are focused on children under the age of 12 years. Therefore, further research is needed for the applicability of existing programs and whether they can be effective long-term for older children.
- Most studies on youth mental health first aid training effectiveness investigated adult personnel who work with children. There is less data on programs where students are the target audience for the mental health first aid training.

Research Background

School-Based Approaches to Mental Health & Awareness

Prior to the COVID-19 pandemic, an estimated 1 in 5 young people experienced mental health difficulties annually and 1 in 10 had a serious emotional disturbance.¹ Despite this, mental health treatment is accessed by fewer than half of young people with current mental disorders.² School-based mental health programs are one method to promote mental and emotional well-being. Program factors that are important for effective mental health programs may include: 1) teaching help-seeking and coping strategies, 2) promote social and emotional well-being, and 3) deliver effective psychological education (after appropriate teacher training).³ Other important features may include consistency, parental inclusion, integration into curriculum and multiple methods, and developmentally appropriate components.⁴ Several school-based mental health programs whose goals are to increase mental well-being and protect from future mental health complications have been studied.

Two programs, the [Mindfulness-Based Stress Reduction](#) program and [Zippy's Friends](#) (the latter of which has been studied internationally) have sought to improve psychological functioning with the goal of reducing the negative effects of stress and increasing coping skills. The [RALLY program](#) has aimed to increase the prevalence of resilient protective outcomes for learning. The [Strong Start](#) program sought to prevent future emotional or behavioral problems by promoting social and emotional well-being. Reviews of these studies have shown that the programs whose curriculum are adaptable and can be modified to the needs of the class population, involve the teacher, and engage the student are important to effective program delivery. Programs that also emphasize engagement (as opposed to self-report tools) allow for better assessment of how to navigate lived experiences and use coping skills. RALLY and Zippy's Friends have also shown positive outcomes in coping and resilience, academic motivation, and emotional self-regulation.⁵

Importantly, these programs (and a majority of other programs) are based on children under 12 years old, and their efficacy in older groups may be limited. Of the existing literature for high school-aged children, programs of short-term duration (such as those aimed at depression) may not have beneficial long-term effects. Screening of clinically-identifiable mental health or mood disorders, however, may result in fewer detrimental mental health outcomes (such as major depressive disorders). Social learning and skill training approaches to substance abuse may also have a negative effect on high school-aged children if already using substances, compared to earlier interventions.⁴ Additionally, a small study of mental health knowledge and recognition in students (a.k.a. mental health literacy) determined that student help-seeking behavior and recognition of mental health were correlated with positive mental well-being in high school students.⁶

Multi-Tiered System of Supports (MTSS)

Within education, multi-tiered systems of supports (MTSS) for mental health provide

frameworks to support students. The forms of support are broken down into three tiers: tier 1 is for all students and includes universal screenings and services such as lessons on mental health; tier 2 involves early interventions and targeted support; and tier 3 involves services for students with identified mental health difficulties.^{7,8}

For more information on early behavioral healthcare intervention programs, please see the Science Note: [Behavioral Healthcare Deficits and Interventions](#).

Youth Mental Health First Aid

Mental health training, such as Youth Mental Health First Aid, focuses on providing participants with the skills needed to identify and interact with persons with mental health challenges. According to the National Council for Wellbeing, nationwide 2.5 million people have received training in [Mental Health First Aid](#).

The Department of Elementary and Secondary Education (DESE) has partnered with [Mental Health First Aid Missouri](#) to provide training at schools. Schools can apply for the no-cost training via an [online application](#) and then host the 6.5 hour-long training in-person or online. The training is implemented by the Missouri Department of Mental Health (DMH) and the Missouri Institute of Mental Health and is funded using federal relief funds.

A two-year study of mental health first aid programming for school personnel found that the majority of participants had increased mental health literacy and decreased stigma toward mental health after completion of the training.⁹ In addition, 89% of participants reported increased confidence in being able to identify and interact with students undergoing mental health difficulties. Most studies on youth mental health first aid training effectiveness investigated adult personnel who work with children; there is less data on programs where students are the target audience for the training.

COVID, Mental Health, and Schools

Schools provide more than just academic training for students, they often have many other wrap-around benefits such as school lunch programs and can be places where mental health difficulties in students are identified. In addition, they are one of the primary places for students to learn the social, emotional, and behavioral skills needed to participate in society which is often called socio-emotional learning (SEL). The COVID-19 pandemic has also resulted in children experiencing increased anxiety and mental health-related difficulties. As society shifts to endemic recognition of the disease, strategies in coping, resilience, and long-term trauma-informed services are recommended by psychiatrists.¹⁰ For more information on school and teacher-based approaches to mental health training, see the Science Note: [Suicide Education and Prevention Programs](#). For more information on the effect of COVID in schools, please see the Science Note: [COVID-19 & K-12 Education](#).

References

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