To articulate recommendations that promote student mental health as a critical component of improving school climate, safety, and learning, and to provide school leaders with best practices for dealing with teen suicide and other school crises related to mental health.

A U.S. Surgeon General report indicates that one in five children and adolescents will face a significant mental health condition during their school years. Mental health disorders affecting children and adolescents can range from attention deficit hyperactivity disorder (ADHD) to autism, depression, eating disorders, schizophrenia, and others. Students suffering from these conditions face significant barriers to learning and are less likely to graduate from high school.

Key responsibilities of school leaders regarding this issue include creating a safe and nurturing school environment, supporting the physical and mental health of children, fostering their social and emotional well-being, and being prepared to address teen suicide through effective communication and support. As leaders work to meet these responsibilities, they face an array of challenges related to mental health:
Limited capacity to address mental health issues. Schools have historically used their resources to employ a substantial number of student support professionals. These school staff members have been the core around which comprehensive school-based programs have been developed and implemented. With increased accountability for academic results under the Elementary and Secondary Education Act (ESEA) and subsequent regulations, school counselors—who represent the majority of student support professionals in schools—have seen their responsibilities shift away from the overall personal, social, emotional, academic, and career development of each student toward an academic achievement-only focus, creating a rapidly widening gap in support services. By the 2014–15 school year, there was one school counselor for every 482 students. The recommended ratio from the American School Counseling Association is one school counselor for every 250 students. Data from the U.S. Department of Education Office for Civil Rights indicates that one in five high schools lack a school counselor. In addition to a shortage of counselors, many schools do not have regular access to school-based mental health professionals. Within a district, numerous schools must share school psychologists, school social workers, school nurses, and other specialized support personnel. This increases the caseload of these mental health professionals and limits access to their services for students in need of support and assistance.

Disinvestment in school-based mental health programs. While the Individuals with Disabilities Act (IDEA) and the Elementary and Secondary Education Act (ESEA) include programs and initiatives to address comprehensive support services in schools, since FY 2009 the funding for these programs, including the Safe and Drug-Free Schools and Communities Act (SDFSCA) State and Local Grants Program, has been severely cut, if not eliminated. This comes at a time of increasing student enrollments and the need for services that address the social-emotional wellness and mental health of students. In FY 2009, the federal programs supporting students’ mental health and wellness surpassed $800 million; however, in FY 2017, Congress was investing only $400 million to support Title IV and the SSAE grant program, less than 25% of its authorized level of $1.65 billion under the Every Student Succeeds Act (ESSA). Mental health and wellness is also only one portion of Title IV’s intended use, which means that number is diluted even further.

Stigma surrounding mental health issues. For unfortunate historical and cultural reasons, mental illness has persistently been stigmatized in our society. This stigma is manifested by bias, distrust, stereotyping, fear, embarrassment, anger, and/or avoidance. Addressing psychosocial and mental health concerns in schools is typically not assigned a high priority, except when a high-visibility event occurs, such as a shooting on campus, a student suicide, or an increase in bullying. Additionally, efforts to address school-based services for mental health continue to be developed in an ad hoc, piecemeal, and highly marginalized way.

Death by suicide. According to the Coalition to Support Grieving Students, death by suicide is the third leading cause of death in children ages 10–14 and the second leading cause of death in children ages 15–19. Close to one in five high school students has considered suicide, and 2 to 6 percent of children attempt suicide. There is a great deal of stigma around suicide, which is why schools must work with parents, children, school staff, and principals to discuss teen suicide in a careful and effective manner. Principals
and other school staff must also focus on preventative measures for causes that are linked to suicide, such as bullying. These challenges underscore the need for comprehensive mental health support services and prevention programs to build the capacity of schools as they help each student reach his or her maximum potential. The value of significant investments in school-based mental health programs is the right thing to do, and its efficacy is also borne out by prevailing research and data. As a 2017 research review in the Harvard Review of Psychiatry asserted, there is a growing body of evidence that supports the effectiveness of mental health programs in schools and their ability to reach large numbers of children.

GUIDING PRINCIPLES

NASSP believes, and recent research has confirmed, that school leadership affects student achievement (second only to instruction, particularly for at-risk students). Principals and assistant principals play a critical role in leading schools’ efforts to serve each student—particularly those who are at risk.

Building Ranks: A Comprehensive Framework for Effective School Leaders includes “wellness” as a dimension of building culture, stating that school leaders “foster and nurture an intentional focus on wellness because healthy students and adults learn and interact productively.”

NASSP believes that for schools to promote a safe learning environment for all students, including those students that may be suffering from some form of mental illness, policymakers must provide adequate levels of access to mental health and counseling services for all students who attend our public schools, in order to foster success in school and to address the mental health needs of students suffering from some form of diagnosable mental illness.

NASSP is committed to the concept of providing all students with equitable educational opportunities and access to school and community-based support services.

NASSP is committed to supporting principals and other school leaders in their work to prevent teen suicide, while also providing principals, school leaders, and schools with resources and guidance for addressing teen suicide in the unfortunate event that it occurs within a school community.

NASSP recognizes that, in addition to diagnosed mental illness, today’s middle level and high school students often face a myriad of undiagnosed mental health issues such as stress and anxiety, depression, drug and alcohol abuse, eating disorders, sleep deprivation, disruptive situations at home, and lack of nutrition. School counseling and mental health services should in turn be equipped to support students suffering from these issues.

NASSP believes focused efforts at the local, state, and federal levels to secure funding for resources to support and sustain mental health programs will address the issue at hand.
POSITION STATEMENT: MENTAL HEALTH

RECOMMENDATIONS FOR FEDERAL AND STATE POLICYMAKERS

- Federal and state governments must provide financial support to enable local communities to implement a comprehensive culturally and linguistically appropriate school-based mental health program that supports and fosters the health and development of students.
- Federal and state governments should encourage local communities to focus on schools as the hub for delivery of mental health, wellness, and social services.
- The federal government should give states and local communities the ability to combine federal and state funding from separate agencies to address mental health and school safety issues at the local level.
- The federal government should fully fund the Student Support and Academic Enrichment Grants under Title IV, Part A of the Elementary and Secondary Education Act to help K–12 schools provide students access to advanced courses and college and career counseling.
- Federal and state governments must provide funding to enable schools to lower the counselor-to-student ratio to levels recommended by the American School Counselor Association, in support of providing counselors greater opportunity to help students with the mental health issues they face (as well as academic issues).
- Federal and state policymakers should assist schools in recruiting and retaining school counselors, school social workers, school psychologists, and mental health specialists to support school-based interventions and the coordination of mental health and wellness services.

RECOMMENDATIONS FOR STATE AND LOCAL POLICYMAKERS

- States and local governments should facilitate community partnerships among families, students, law enforcement agencies, education systems, mental health and substance abuse service systems, family-based mental health service systems, government agencies, health care service systems, and other community-based systems. State-funded school-based wellness centers would provide students with a comprehensive health support system, which would include mental health services.
- State and local policymakers should provide funding to support the hiring of mental health specialists to serve students and schools.
- State and local policymakers should provide funding to increase professional development opportunities for school leaders and other school staff.
- State and local policymakers should provide funding for comprehensive school-based health centers, especially those that provide mental health services. On-site, school-based mental health services in these centers will help more adolescents receive mental health services.

State and local policymakers should provide funding to support the hiring of mental health specialists to serve students and schools.
RECOMMENDATIONS FOR SCHOOL DISTRICTS

- With appropriate funding and support, districts should provide principals, teachers, school counselors, school social workers, school psychologists, and mental health specialists with appropriate professional development to build their capacity to support comprehensive school-based interventions, and coordinate mental wellness services.

- With appropriate funding and support, superintendents and school boards should promote comprehensive school-based mental health programs that address:
  - The promotion of the social, emotional, and behavioral health of all students in an environment that is conducive to learning.
  - The reduction in the likelihood of at-risk students developing social, emotional, or behavioral health problems.
  - The treatment or referral for treatment of students with existing social, emotional, or behavioral health problems.
  - The early identification of social, emotional, or behavioral problems and the provision of early intervention services.
  - The development and implementation of programs to assist children in dealing with violence.
  - The handling of school suicides to ensure school leaders effectively communicate with students, teachers, and families while also doing everything in their power to prevent another suicide.

RECOMMENDATIONS FOR SCHOOL LEADERS

- With appropriate funding and support, school leaders should offer comprehensive professional development for teachers, other staff members, and school and community service personnel working in schools, including training in:
  - The techniques and supports needed to identify students early on with, or at risk of, mental illness.
  - The use of referral mechanisms that effectively link such students to treatment and intervention services in the school and in the community.
  - Strategies that promote a positive school environment.
  - Models for school-based collaboration, coordination, and consultation.
  - How to handle suicide when it occurs and what to do to prevent future suicides.

- School leaders should promote mental health in their schools by:
  - Creating a safe, caring environment characterized by adult-student interactions that convey high expectations, support, and mutual respect.
■ Modeling and promoting positive interpersonal and professional relationships among teachers, staff, and students
■ Encouraging quality sustained involvement and engagement of parents and community members in the school
■ Partnering with students’ families in fostering the social, academic, and intellectual success of each student
■ Cultivating student self-discipline and respect for others
■ Providing an adult advocate to advise and individualize the educational and school experience for each student
■ Coordinating with community agencies for the delivery of social, physical, and mental health services to meet the needs of students and their families
■ Implementing scheduling and student grouping practices that are flexible, meet each student’s needs, and ensure successful academic growth and personal development
■ Banishing anonymity through structures such as small learning communities, teams, and advisory programs
■ Advocating and modeling a set of core values essential in a democratic and civil society
■ Ensuring teachers know how to identify signs for teen suicide, how to address these situations, and how to effectively communicate with students and families by using the National Center for School Crisis and Bereavement toolkit, modules from the Coalition to Support Grieving Students, and other resources included in the references section of this position statement