

# How Schools Can Help Nurture Students' Mental Health

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By the time he entered second grade, Eric had already witnessed graphic violence and watched as his family fell apart. He'd been moved to a new state and a new home, but he wasn't thriving, especially in school. Eric's reading level was measured in single digits — that is, below the 10<sup>th</sup> percentile for children his age.

"He was so preoccupied by the trauma he'd experienced that it was impairing his learning," says Steve Lepinski, who followed Eric's progress.

Lepinski runs the [Washburn Center for Children](#), a mental health provider in Minnesota that handled Eric's case. After receiving intensive therapy, Eric (not his real name) saw his reading level jump to the 90<sup>th</sup> percentile for his age group. Now "he's just doing normal third-grade things," Lepinski adds.

Trauma can be one cause of mental health issues among kids, but there are other sources. Emotional problems are linked to poverty, according to an [American Academy of Pediatrics study](#), and 20 percent of children live in poverty. The same study notes that children whose parents serve in the military are more likely to experience emotional trouble, especially when parents deploy and return.

[Low-Income Schools See Big Benefits in Teaching Mindfulness](#)

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Fortunately, there are better diagnostics and a greater sensitivity by parents and pediatricians to kids' well-being; what might have been ignored and untreated decades ago is more apt to be spotted and tended to today. But the attention to these diagnoses also uncovers the reality that the youth population feels vulnerable and dislocated.

The hurly-burly of modern life plays a part. Dr. Debra Koss, a child psychiatrist in Sparta, N.J., who has been treating kids for more than 20 years, believes that both teenagers and families face more external pressure and stress today than they did years ago.

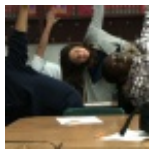
Part of that's from the explosion in technology, especially in the proliferation in phone, computer and TV screens, which eat up an estimated five to seven hours of the average child's day. That time spent inert in front of a screen is time not spent socializing, or playing sports, or getting out into the world, all of which contribute to healthy emotional development, Koss says.

Also, ruthless social media sites like [Yik Yak](#), where kids post anonymous comments about their peers, can be devastating to children's well-being. "They have a terrible impact on self-esteem and social relationships," Koss says.

Developments in neuroscience should be helping to shape cultural expectations for kids, but so far the research has failed to activate much change. Adolescents are [wired](#) for short-term pleasures, feeling emotions more intensely and tending to act on impulse. But they're quizzed about careers and college majors when they've just made it to high school, long before their brains have matured sufficiently to make thoughtful long-term decisions.

"We're expecting a level of decision-making and abstract thinking that's not in keeping with where brain development is," Koss says.

Now, when a student acts up, the teacher's first thought isn't to complain about the kid's bad behavior, but to think 'I



wonder what's going on with him?'

Warped cultural pressure on kids to perform beyond their capabilities is stressful and demoralizing, forcing kids to grow up too fast. The fact that this generation has been subjected to more standardized testing than any other can adds to the anxiety. "These external goals and messages" — [from parents](#), schools, college applications and social media — "create unreasonable expectations," she says. All of this contributes to adolescent depression, anxiety and other mental health concerns.

What's the proper role for schools in attending to children's mental health? Some educators and mental health experts have pushed schools to get more involved in preventing emotional and behavior problems and spotting those kids who need help, so that they can be steered toward professionals who can help them. Mental health problems often reveal themselves early in life, and the sooner they're treated, the thinking goes, the better the outcomes.

Teachers' everyday contact with children puts them in a position to pick out those who might be struggling and who could benefit from professional help. And because, as Koss says, "academic failure is a real consequence of mental illness," teachers and school officials may have no choice but to confront these problems.

The following initiatives have been adopted in various states and schools to help identify, and even treat, those children in need.

## **SCHOOL-BASED MENTAL HEALTH CARE**

One of the most ambitious approaches for treating children has been adopted in Minnesota, where mental health professionals provide treatment for such problems within the schools. The Minnesota system, which began in 2007 as a small pilot program and has since spread to 645 schools in 71 counties, removes the barriers that often keep children from getting the help they need: transportation to and from appointments, insurance coverage and lengthy waits for appointments.

This approach represents a radical departure from the typical way schools have handled troubled children, wherein school officials notify parents of a potential problem and then depend on parents to take action. Today, Minnesota has the largest school-based mental health program in the country.

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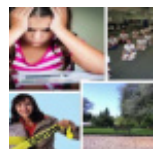
[Can Free Play Prevent Depression and Anxiety In Kids?](#)

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Because the mental health providers are present and available, the stigma attached to getting help has lessened for kids. The method also helps therapists better evaluate their patients, because they see them in their natural environment. Teachers and school principals also welcome in-house clinicians, Lepinski says, through their interactions with the clinicians. Turf battles between "outside" mental health providers and "inside" school nurses, social workers or special education teachers is minimized because they all recognize the important role each plays in identifying and treating students.

And helping drive success — or allay parents' fears — is the fact that the children's mental health records are kept private from teachers and school administrators, under HIPPA laws.

During the first five years of the program, practitioners found that more than half of the children treated by therapists or mental health professionals in school were seeing someone for the first time, and half of these same children were getting treatment for a serious mental illness. Without the ordinary barriers to getting help, most kids



completed their treatment, Lepinski says. Further, the impact of the treatment was reflected in a decline in suspension rates, absences and frequency of emotional problems.

Meanwhile, attendance rates have crept up. And with a full-time mental health professional on staff, the culture of these schools has become more sensitive to the role of mental health in learning. “Now, when a student acts up, the teacher’s first thought isn’t to complain about the kid’s bad behavior, but to think ‘I wonder what’s going on with him?’” Lepinski says.

## **OFFER MENTAL HEALTH SCREENING**

Testing for emotional well-being is one way of identifying troubled kids, and some schools have started using them after a crisis, or even preventively. One of the most widely used screens, the Columbia-Suicide Severity Rating Scale, or C-SSRA, is a brief survey that has been shown to identify accurately individuals at risk of suicide. In Tennessee, schools started asking the state for help in preventing suicide or managing in the aftermath, and the state responded by offering districts the C-SSRA.

More than 5,000 such screens were carried out with kids of all ages after crises since July, says Melissa Sparks, a registered nurse in Tennessee who helps oversee the state screens. Tennessee also uses what’s called a [Youth Screen](#) as a way of identifying mental health problems early. Of the 221 teenagers whose parents consented to their children’s screening since July, 75 kids were found to have a mental health or substance abuse problem.

## **INCLUDE EXERCISE IN THE SCHOOL DAY**

Aerobic exercise is good for mental health; it reduces stress, improves attention and buoys the mood. But as school budgets have grown tighter, schools are [dropping gym class](#) and recess for more time in the classroom. This trend undermines student well-being and achievement, says Dr. Lawrence Steinberg, author of “[Age of Opportunity: Lessons From the New Science of Adolescence](#).” Steinberg believes that schools should include an hour of exercise in the daily curriculum, because physical activity improves academic performance and mental health.

Steinberg is not alone: The Institute of Medicine challenges schools to work an hour of exercise into the school day, offering suggestions and games for teachers to boost activity. Its [interactive website](#) offers tips on how to arrange the classroom to make space for physical activity, so that kids don’t spend all day at their desks, and offers ideas on how to make recess and gym class more active and engaging for kids.

## **ALLOW KIDS TO SLEEP IN**

Teenagers don’t sleep enough, and that deficit affects their mental health as well as their [ability to calculate or compose a sentence](#). The recommended amount of sleep for children and adolescents is 8.5 to 9.5 hours a night, but up to 87 percent of high school kids sleep less. It’s hard for teenagers to fall asleep naturally before 10:30 p.m., and most can’t make it up on the other end when the school day begins; 40 percent of high schools open their doors before 8 a.m.

Some schools are taking the advice of the [American Academy of Pediatrics](#) and are delaying the start of the school day to better fit with adolescent sleep cycles. According to Stacy Simera, the outreach director for Start School Later Inc., “the number of schools opening later has grown exponentially,” with positive results.

Researchers at the University of Minnesota who [studied](#) the impact of later start times in eight high schools found improvements in grades, attendance and punctuality, as well as a 70 percent reduction in auto accidents.

“It’s doable,” Simera says. “Superintendents and teachers are afraid it’s going to throw a wrench into everything, but hundreds of schools have adjusted,” she says.

## **BUILD MINDFULNESS INTO THE SCHOOL DAY**

Taking time to breathe deeply, slow down the mind and focus on the moment can lengthen attention spans and promote emotional control, and some schools are beginning to fold [mindfulness training](#) into the school day. Dr. Amy Saltzman, director of the Association for Mindfulness in Education, says that schools in all 50 states and around the world have started to teach children mindfulness.

The surge in children diagnosed with ADHD, depression and anxiety, as well as the growing body of evidence on the benefits of mindfulness, have prompted educators to bring the exercise to school. “There’s more awareness of the need,” Saltzman says.

## LIMIT TECHNOLOGY AND ENCOURAGE FUN

One of the simplest ways for teachers to encourage a healthy mindset among their students is to take small steps in the classroom that work against harmful cultural pressures. To encourage breaks from screens, for example, [teachers can set up tech-free spaces or times in class](#). Publicly limiting their own reliance on phones and computers also models the message that happiness isn’t found in “likes” or tweets.

And asking kids what they enjoy doing, then encouraging them to pursue those interests, permits children and teens to start valuing their own preferences, separate and apart from what presumably “looks good” to colleges. “This encourages kids to learn about themselves,” Koss says.

## TAKE HAPPINESS SERIOUSLY

Hundreds of teachers in 43 states around the country are taking part in the [Global Happiness Project](#), a loosely structured endeavor in which students are invited to consider the nature of happiness and to assess its prevalence in their community. In keeping with the program’s purpose, teachers are tailoring the assignment to fit the special circumstances of their classes.

A teacher in Cleveland, for example, advises her students to develop a [growth mindset](#) when it comes to learning, so that they’ll look at a bad test grade as a temporary setback and learning opportunity rather than a mark of permanent failure. An instructor in Rochester, Indiana, encourages her students to analyze Thornton Wilder’s “Our Town” in terms of the characters’ and community’s happiness, and then to develop a service project that will try to deliver more happiness to the town.

By integrating ideas about happiness and the good life into the school curriculum, teachers are encouraging children to value their feelings and to take control of their lives.

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