

## Mental Health and Academic Achievement

All educators, and especially school leaders, take pride in knowing the strengths and needs of the young people they serve. Educators are accustomed to thinking about a variety of factors known to affect young people's school-related outcomes, such as whether they come from historically underserved groups, whether they are learning English as a second language, and/or whether they are experiencing poverty. One important contributor to school outcomes that school leaders may not regularly consider is the mental health of the young people they serve.

### What is mental health?

Mental health is best thought of as the way a young person's thoughts, feelings, and behaviors affect his or her life. Mental health is a spectrum. In the same way that every individual experiences physical health as a continuum from 'well' to 'ill', every individual has a mental health experience. As with physical health, mental health changes at different points in individuals' lives based on both biological and environmental factors. Many young people enjoy **mental wellness**, meaning that they have positive regard for themselves, enjoy positive relationships with the people who are important to them, and are generally resilient when faced with challenges in their lives at home and school.<sup>1</sup> When mental health deteriorates substantially, mental illness may be involved. A **mental illness** is a condition that impacts a young person's thinking, emotions, and mood such that it interferes with his or her daily functioning at home and school.<sup>2</sup>

### What is the prevalence of mental illness among young people?

Approximately **one in six school-aged youth** experiences impairments in life functioning due to a mental illness, and the number of young people experiencing mental illness increases as young people grow older.<sup>3</sup>

The most prevalent mental illnesses in school-aged young people include attention deficit hyperactivity disorder (ADHD), behavioral or conduct problems, anxiety, and depression.<sup>3</sup> Half of mental illnesses emerge during or before adolescence, and three-quarters emerge

before the age of 25, meaning that mental illness places a disproportionate burden on young people, yet **fewer than half of young people with mental illness receive adequate treatment.**<sup>4</sup>

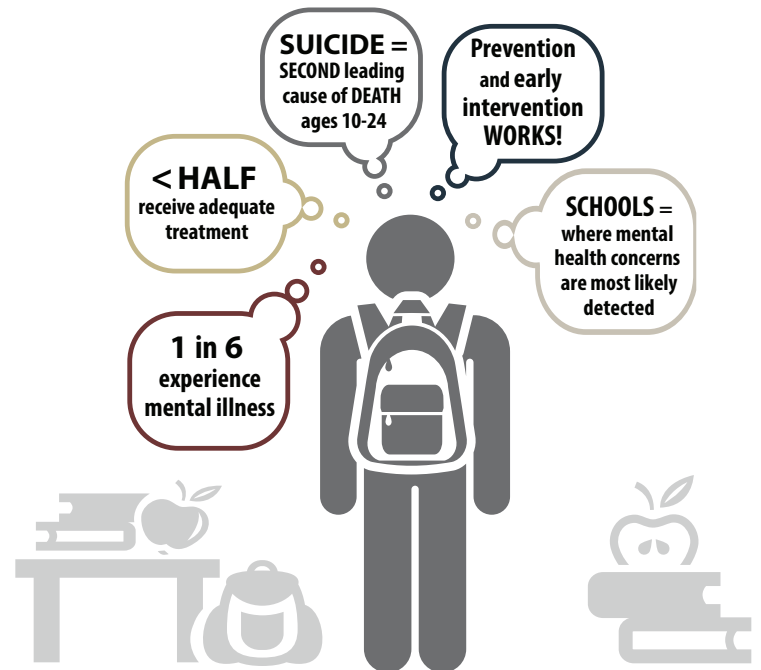
### What is the impact of mental illness?

When left untreated or undertreated, coping with the pain of mental illness can contribute to self-harm, including thoughts of **suicide**, which is now the **second leading cause of death for young people ages 10-24.**<sup>5</sup>

Fortunately, **the earlier mental health concerns are detected and addressed, the more likely the young person is to avoid the onset and/or progression of a mental illness.**<sup>6</sup> Many times signs of deteriorating mental health are noticeable in young people well before a mental illness emerges.

### What is the school's role in addressing mental illness?

Outside of the young person's home, **schools are the most likely place where mental health concerns will be detected.** Young people spend most of their day at school interacting with several adults and peers, all of whom can be empowered to help connect those suffering from mental health concerns to early intervention and treatment supports.



1) American Psychological Association (APA, 2016). Retrieved April 2016 from <http://www.apa.org/helpcenter/change.aspx>

2) National Alliance on Mental Illness (NAMI, 2016). Retrieved April 2016 from <https://www.nami.org/Learn-More/Mental-Health-Conditions>

3) Perou R, Bitsko RH, Blumberg SJ, et al. (2013). Mental health surveillance among children—United States, 2005–2011. *Morbidity and Mortality Weekly Report (MMWR)*, 62(Suppl 2),1-35.

4) Kessler RC, Amminger GP, Aguilar-Gaxiola S, Alonso J, Lee S, Ustun TB. (2007). Age of onset of mental disorders: A review of recent literature. *Current opinion in psychiatry*, 20, 359-364.

5) Center for Disease Control (2014). National Vital Statistics System. Retrieved April 2016 from: [http://www.cdc.gov/injury/images/lc-charts/leading-causes-of-death-age-group-2014\\_1050w760h.gif](http://www.cdc.gov/injury/images/lc-charts/leading-causes-of-death-age-group-2014_1050w760h.gif)

6) Baskin, T. W., Slaten, C. D., Sorenson, C., Glover-Russell, J., & Merson, D. N. (2010). Does youth psychotherapy improve academically related outcomes? A meta-analysis. *Journal of Counseling Psychology*, 57, 290–296. doi:10.1037/a0019652

# You Need to Know: Mental Health Matters



In an average school of 600 students, approximately **100 students** are coping with a mental illness.



More than **1 in 20 young people** ages 12 and over report **current depression**, which among school-aged youth is linked to reduced academic achievement and increased school suspensions.<sup>7</sup>

Mental illness is associated with **school absences**, causing the **loss of critical school funding sources**.<sup>8</sup>



Young people with **attention-deficit/hyperactivity disorder (ADHD)** often feel **isolated** at school due to **social problems** associated with their illness.<sup>9</sup>



Having a mental illness is associated with being pushed out of school through **suspension, expulsion, and credit deficiency**.<sup>10, 11, 12</sup>

**17%**  
considered  
**SUICIDE**

**8%**  
attempted  
**SUICIDE**

Among students in grades 9-12 in the U.S. during 2013-2014<sup>13</sup>: 17.0% of students seriously considered attempting suicide, and 8.0% of students attempted suicide one or more times in the previous 12 months.



Only **one third** of adolescents with mental illness go on to postsecondary education.<sup>14</sup>

**1/3**

**Early detection** of mental health concerns leads to **improved academic achievement** and **reduced disruptions at school**.<sup>15</sup>

## Where to Begin? Get to Know Project AWARE

The NITT-Project AWARE (NITT-PA) grant program, supported by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA), seeks to intervene with the sequelae leading to school failure for young people with undertreated or untreated mental illness through mental health promotion, mental illness prevention, and early intervention. Project AWARE grantees are seeking to build the capacity of educators, in partnership with other youth-serving sectors, to address the mental health needs of the young people they serve by improving awareness of mental health indicators; providing training in how to properly identify and respond to mental health concerns; and by improving service systems that connect young people and their families to affordable, developmentally aligned, and culturally and linguistically-appropriate resources and services in their communities.

Your Community's Project AWARE Coordinator is: \_\_\_\_\_

Your Project AWARE Coordinator can be reached at: \_\_\_\_\_

7) Centers for Disease Control and Prevention (CDC, 2016). Retrieved April 2016 from: <http://www.cdc.gov/mentalhealth/basics/mental-illness/depression.htm>

8) Wood, J. J., Lynne-Landsman, S. D., Langer, D. A., Wood, P. A., Clark, S. L., Eddy, J. M., & Ialongo, N. (2012). School attendance problems and youth psychopathology: Structural cross-lagged regression models in three longitudinal data sets. *Child Development*, 83, 351-366. doi: 10.1111/j.1467-8624.2011.01677.x

9) Becker, S. P., & Langberg, J. M. (2012). Sluggish cognitive tempo among young adolescents with ADHD: relations to mental health, academic and social functioning. *Journal of Attention Disorders*. doi:10.1177/1087054711435411.

10) Kang-Yi CD, Mandell DS, Hadley T. (2013). School-based mental health program evaluation: children's school outcomes and acute mental health service use. *Journal of School Health*, 83, 463-472.

11) Krezmien, M. P., Leone, P. E., & Achilles, G. M. (2006). Suspension, race, and disability: Analysis of statewide practices and reporting. *Journal of Emotional and Behavioral Disorders*, 14, 217-226.

12) Gregory, A., Skiba, R. J., & Noguera, P. A. (2010). The achievement gap and the discipline gap: Two sides of the same coin? *Educational Researcher*, 39, 59-68.


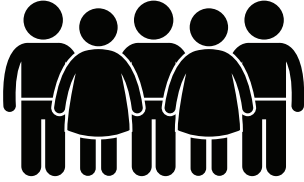

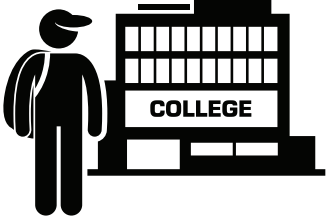
13) Kann L, Kinchen S, Shanklin SL, et al. (2014). Youth Risk Behavior Surveillance — United States, 2013. *Morbidity and Mortality Weekly Report (MMWR)*, 63(ss04), 1-168.

14) United States Government Accountability Office. (June 2008). *Young Adults with Serious Mental Illness; Report to Congressional Requesters GAO Report Number GAO-08-678*. Washington, D.C.

15) Baskin, T. W., Slaten, C. D, Sorenson, C., Glover-Russell, J., & Merson, D. N. (2010). Does youth psychotherapy improve academically related outcomes? A meta-analysis. *Journal of Counseling Psychology*, 57, 290-296. doi:10.1037/a0019652

## How can we detect mental illness in schools?

Coping with mental health concerns negatively impacts young people's ability to meet the many demands of school, including cognitive demands for learning; social and emotional demands for making friends and behaving according to school rules, norms, and expectations; and physical demands for being active throughout the school day. Described below are many of the ways that mental health concerns impact young people at school.

<b>School-Related Effects of Mental Health Concerns on Young People</b>			
 <p><b>Learning and Academic Achievement</b></p>	 <p><b>Friendships and Behavior</b></p>	 <p><b>School Completion</b></p>	 <p><b>Postsecondary Academic Pursuits</b></p>
<p>Coping with the impact of mental illness through the developmental transitions of childhood and adolescence can interfere with the cognitive processes required for classroom learning. Over time, these cognitive processes can affect academic achievement.</p>	<p>The behavior of young people experiencing mental health concerns may interfere with learning and making friends at school.</p>	<p>Over time, as young people experience the progression of untreated or undertreated mental health concerns, barriers to school completion become more difficult to surmount.</p>	<p>The transition from adolescence to young adulthood requires social skills and executive functioning skills that can be reduced or impaired when young people are coping with mental health concerns.</p>
<p><b>Below are some of the ways that undertreated or untreated mental health concerns can impact young people at school.<sup>16</sup></b></p>			
<ul style="list-style-type: none"> <li>• Difficulty controlling attention during learning tasks</li> <li>• Trouble persevering during challenging academic tasks</li> <li>• Trouble recalling academic information</li> <li>• Slowed problem solving</li> <li>• Trouble completing homework</li> <li>• Reductions in standardized achievement test scores</li> <li>• Lower end-of-course grades</li> </ul>	<ul style="list-style-type: none"> <li>• Frequent absences from school due to illness and school avoidance</li> <li>• Trouble making and/or maintaining friendships</li> <li>• Low energy for physical activities, including sports and other recreation</li> <li>• Difficulty following school routines and norms, resulting in suspension and expulsion</li> </ul>	<ul style="list-style-type: none"> <li>• Course credit deficiencies over time</li> <li>• Reduced high school graduation rates</li> <li>• Interference with attainment of General Equivalency Degree (GED) and technical education certifications</li> </ul>	<ul style="list-style-type: none"> <li>• Difficulty completing postsecondary coursework</li> <li>• Difficulty managing independent life demands in college</li> <li>• Interference with college attendance and college completion</li> </ul>

<sup>16</sup> The constellation of experience is different for every individual, meaning that not every young person with mental health concerns will experience one or more of the school-related effects described here.

## Supporting The Mental Health of Young People: The School's Role

When school leaders commit time and resources to address the mental health of young people they serve, the entire school community benefits. In addition to enjoying a healthier student body that is more engaged in school life, young people who receive appropriate mental health supports have improved academic achievement, are more likely to graduate, and are more likely to attend and successfully complete college.<sup>17,18,19</sup> Of course, these are outcomes in which all educators are invested because **when young people thrive, school communities thrive.**

Academic, social, and emotional outcomes of young people are improved in schools with positive school climates; adequate mental and behavioral health supports, including a workforce that is trained in supporting mental and emotional wellness; and coordinated systems for identifying, referring, and addressing mental health needs.<sup>20,21</sup> In reflection of the growing acknowledgement of the links between mental health and school outcomes, the ***Every Student Succeeds Act*<sup>22</sup> placed an unprecedented priority on wraparound supports** for young people struggling with barriers to learning, including programs that address mental health, school climate, violence prevention, and trauma.

**Project AWARE supports several key strategies for addressing mental health in schools: (1) promoting mental wellness and combating stigma, (2) building awareness of indicators of mental health concerns, and (3) intervening early with coordinated supports.**

### 1. Promote Mental Wellness and Combat Stigma

- *Provide supports for mental wellness in the general education setting.* Encourage school staff, including instructional staff and school support staff, to implement evidence-based and developmentally-matched prevention curricula in the general education setting, including social-emotional learning and mental health literacy curricula.
- *Host school-wide mental wellness campaigns.* Encourage mental wellness and improve awareness of mental health concerns among school adults, peers, and family members by hosting regular social marketing campaigns.

17) Kang-Yi CD, Mandell DS, Hadley T. (2013). School-based mental health program evaluation: children's school outcomes and acute mental health service use. *Journal of School Health*, 83, 463-472.

18) United States Government Accountability Office. (June 2008). Young Adults with Serious Mental Illness; Report to Congressional Requesters GAO Report Number GAO-08-678. Washington, D.C.

19) Baskin, T. W., Slaten, C. D., Sorenson, C., Glover-Russell, J., & Merson, D. N. (2010). Does youth psychotherapy improve academically related outcomes? A meta-analysis. *Journal of Counseling Psychology*, 57, 290-296. doi:10.1037/a0019652

20) Suldo SM, McMahan MM, Chappel AM, Loker T. (2012). Relationships between perceived school climate and adolescent mental health across genders. *School Mental Health*, 4, 69-80.

21) Syvertsen AK, Flanagan CA, Stout MD. (2009) Code of silence: Students' perceptions of school climate and willingness to intervene in a peer's dangerous plan. *Journal of Educational Psychology*, 101, 219-232.

22) Every Student Succeeds Act S 1177 (2015)

### 2. Build Awareness of Indicators of Mental Health Concerns

- Promote the mental health literacy of community members through Youth Mental Health First Aid (YMHFA). YMHFA is designed to reduce stigma associated with mental illness; to enhance the ability of educators to appropriately identify young people in need of mental health supports; and to improve help-seeking and referrals by young people and their families.

#### What are some of the signs of mental health concerns in young people?

- Withdrawing from others
- Having very low energy
- Appearing disheveled
- Losing interest in hobbies and other activities
- Trouble concentrating
- Becoming easily irritated or angered
- Changing eating or sleeping patterns
- Crying a lot



### 3. Intervene Early with Coordinated Supports

- *Improve school mental health referral systems* to ensure that concerned school adults, family members, and peers can efficiently and effectively refer their students, friends, and children for mental health supports.
- *Improve the coordination of mental health supports across general education and special education.* Special education and general education must work in a coordinated manner to provide prevention and early intervention opportunities—such as those underscored in *Every Student Succeeds Act*—aligned with a public health model for mental health.
- *Build codified relationships with local mental health service providers* in order to connect young people and their families to affordable, developmentally aligned, and culturally and linguistically-appropriate resources and services.
- Coordinate your school-community mental health partnerships with other supportive, youth-serving sectors, including law enforcement, juvenile justice, and health care.



The Now Is The Time  
Technical Assistance (NITT-TA) Center

Toll-Free Phone: (844) 856-1749  
Email: [NITT-TA@cars-rp.org](mailto:NITT-TA@cars-rp.org)  
Website: [www.samhsa.gov/NITT-TA](http://www.samhsa.gov/NITT-TA)