Cost-Effective Mental Health Treatment

The cost of mental health treatment is often offset by:

- Reducing the number of days out of school (absenteeism)
- Increasing academic productivity while at school
- Improving stability in students’ lives

Effective identification and treatment of mental health problems leads to increases in academic achievement, graduation rates and school safety.

School personnel are often the first adults to recognize student mental health problems.

Explore!

Answer the following:

- What mental health needs are not being addressed in your school?
- What resources exist in your school and school district?
  - For example, community mental health center, faith-based care, United Way agency
- What is needed?
  - For example, school/community partnerships
- Who in your school community is concerned about unmet child mental health needs, and what are they doing about it?
- What can you do about it?

MHF: Definition

A process in which a facilitator cares for students with emotional and behavioral needs and assists with achievement in problem-solving and self-determined goals.

- School and community-based helpers
- Empower students to become more self-sufficient
- Reduce stigma and discrimination
- Decrease burden on community health care systems

Empathy: An MHF Skill

- The ability to understand students from their own perspective rather than our perspective
- The emotional connection allows the MHF to think with the student rather than for or about the student
- A deep connection to the emotional state of the student
- The ability to recognize what is important to the student without necessarily agreeing with the student
- Empathy is not sympathy or feeling sorry for the student
- Using empathy allows us to focus on students’ feelings instead of moving away from or avoiding emotions

Development Occurs in Stages

- Stages range from birth to death (cradle to grave)
- Considering what it is like to be your student helps you to identify
  - Their stage of growth
  - The way they understand and make sense of their world
- Also affects your ability to understand your students

Knowledge of child growth and development helps you to:

- Recognize age-related challenges
- Acknowledge age-appropriate knowledge and skills
- Determine impact of peers, family, school, gender and other influences

Caution — Difficult Feelings

- A student may feel trapped by emotional pain and think things will never improve
- This may lead to thoughts, feelings and behaviors that cause problems
- A student whose feelings are painful may not be ready for problem-solving
- Consider a referral to a school mental health professional

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MHF-EEE CURRICULUM SAMPLE

Diversity Skills

- Interest in other cultures
- Ability to recognize different styles
  - Sensitivity to communication cues
  - Awareness of cultural and language differences
- Knowledge of cultural myths
- Using culturally sensitive approaches in the helping process
- Exploration of your biases
- Knowledge of the relationships between cultural groups
- Knowledge of how culture affects students’ use of mental health services

Module 3: Understanding Child Development and Diversity

1. Eye contact
2. Body position
3. Head nodding
4. Attentive silence
5. Facial expressions
6. Gestures
7. Physical distance
8. Touch
9. Voice tone

Demonstration

Watch closely as the instructors or video demonstrate minimal verbal and nonverbal responses

Reflection of Content

- Content is the part of the message that includes information or describes a situation or event
- Content is the who, what, when, where and how of the student’s story
- Listening, then giving a smaller version of the story
- Restating what the student has told you in a few well-chosen words
- Reflection is not a word-for-word repeat or giving your opinion about what the student has said

Meaning is the reason:
- The student feels a certain way about the story
- The story is important to the student

Reflecting meaning:
- May offer clarity to the student about actions and feelings
- Shows you have understood the deeper meaning to the story

Meaning is what lies beneath a student’s story

Students Coping With Problems

- Many students will turn to family, friends, neighbors, voluntary associations, religious leaders and school personnel for assistance
  - But, family members may disapprove of seeking mental health care
  - Parents tend to speak with a primary support person before seeking formal services
  - Parents may not know where or how to seek services
  - Informal helping and support networks can be very helpful

Teachers play an important role in helping students solve problems
module 6: understanding problems

when considering a problem, check the following:

• how severe is the problem?
• how long has the problem been going on?
• how often does the problem occur?
• when does the problem not occur?
• what support does the student have?
• what is the student’s ability to change?
• has the student had success or failure with this type of problem in the past?
• how many other difficulties is the student facing or has the student faced in the past?

module 7: problem-solving and readiness to change

• what is causing the most distress?
• what does the student need?
• what is most important to the student?
• how open is the student to making changes?
• what has the best chance for success?
• what resources are needed to make changes?

module 8: student-teacher relationships and managing student behavior

• prevent problems by creating environments that encourage learning and appropriate behavior
• school climate plays a critical role in the development of violent behavior
• aggression and violence are impacted by:
  — behavioral norms
  — student and school staff relationships
  — learning environments
  — school safety
  — neighborhood environment
• reduce the length of time the stress, distress or disorder exists
• decrease risk factors (prevention)
• increase protective factors
• teach problem-solving skills
• slow the progression of severity
• lengthen the time between episodes of the problem
• stop the recurrence of the problem
• reduce gap between episodes

module 9: recognizing stress, distress and disorder – part 1

• form groups of three
• person one discusses a troubling school situation
• person two acts as the helper or MHF, listening to the story, summarizing and then moving through the STPC process
• person three acts as an observer and provides feedback

positive communication strategies

• build unity in the classroom — we are all in this together
• co-develop class norms with students
• expect cooperation — listening, taking turns, working together
• model good communication — effective listening and speaking skills
• demonstrate and coach — show what you want and give students chances to try out those behaviors, give them feedback on how well they have done

some helping goals

• increase protective factors
• teach problem-solving skills
• slow the progression of severity
• lengthen the time between episodes of the problem
• stop the recurrence of the problem
• reduce gap between episodes

MHF-EEE CURRICULUM SAMPLE
Stress, Distress and Disorders in Children

- About 20% have emotional problems
- About 5–12% of children and adolescents experience significant impairment
- As many as two-thirds do not receive any mental health services (need-care gap)
- Schools, families and primary care are the major settings for identifying mental stress, distress and disorders in children and adolescents, not formal mental health services

Learning Disorders (LD)

- Need more awareness and knowledge of LD
- At risk for emotional and behavioral problems
- Dyslexia (reading difficulties)
  - Memory problems
  - Low school achievement
  - Screen for depression

- Service gap between prevalence estimates and special education identification
- Concerns with emotional regulation

Stress, Distress and Disorder Support and Resources

Educators need to:

- Be aware that stress and distress at home are brought to the classroom
- Be aware that parents may be struggling with their own mental health issues
  - Consider parent training
- Including parents is more effective than working with the student alone
  - This fosters consistency across school and home environments
- Develop positive relationships with students
  - You can best market your classroom management plan by maintaining a positive relationship with your students
  - Be a consistent source of positive feedback
  - Pay close attention to the positive aspects of behavior
  - Be creative with your interactions with students
- Use incentives that focus on the student’s internal reinforcement

Cyber Bullying

Bullying that takes place using electronic technology, including:

- Cellphones and computers
- Social media and other web sites, text messages or chat applications

Examples:

- Hurtful text messages or emails
- Rumors emailed or posted on social networking sites
- Embarrassing pictures, videos or web sites
- Fake profiles

Gang Prevention and Intervention

- Educating schools, parents, families and communities about the importance of expressing visible love, nurturing, support and care for at-risk youth
- Students need teachers as viable resources
- Teachers need to learn to identify gang members
- Consider school uniforms if gang activity is high
  - Employ truancy prevention methods (student contracts)
  - Set zero tolerance policies on under-age drinking and guns in schools

Challenges in Migrant Mental Health

- Major impact on school children
- Communication difficulties
- Cultural differences
- Differences in family structures
- Difficulty meeting basic needs of food and shelter
- Problems with adaptability and integration
- Loss of social status, employment and family funds
Suicide Support and Resources

- School professionals are in a unique position for early identification and prevention
- Teacher training to recognize risk factors
- School-based suicide prevention programs
- Teach students the warning signs of suicide
- Early detection is critical
- Increase visibility of mental health staff
- Collaboration across school staff
- Refer to school mental health professionals

Non-Suicidal Self-Injury

- A common phenomenon in adolescents in middle and high school
- Often no suicidal intent, but used to:
  - Reduce distressing mood
  - Inflict self-punishment
  - Signal personal distress to important others
  - Get a reaction, control a situation
  - Stop “bad feelings”
  - Regulate emotion
  - Stabilize mood

Children, Adolescents & Trauma

- Exposure to violence often results in mental health problems for children
- Especially vulnerable during disasters or traumatic events
- Students suffer disruptions in their normal developmental path
- Needs might be overlooked because:
  - Parents and other caregivers are overwhelmed
  - Children protect their care-givers by suffering silently

Providing Support

- Students with strong social support cope better with life’s stressors
- Use open questions to clarify students’ thoughts and feelings
- Encourage positive coping
  - Talking to another student for support
  - Engaging in positive, distracting activities
  - Receiving family support
  - Getting adequate rest
  - Exercising
- Introduce the student to simple relaxation, anger management or sleep improvement skills
- Provide referrals when necessary
- Follow-up

General Indicators of Abuse and Neglect

- Academic Clues
  - Learning difficulties may be the result of hunger, not being able to see well (no glasses) and not being able to hear
  - Sudden or extreme changes in school performance
    - Previously good then suddenly disinterested
    - Refusal to change for gym class may be concealing bruises
    - Glasses are not repaired
    - Physically disabled or developmentally delayed at greater risk

Explore!

Where do you find

- State child abuse laws?
- School policy for recognizing and reporting child abuse and neglect?
- Are you required to report suspicion of child abuse?
Referring and Consulting

- When reactions, behaviors or symptoms seem serious, you should consult with your school mental health professionals to determine what needs to happen to get the student the help needed
- After consulting, referrals may be necessary
- Reduce the barriers to referral sources
- Have a list of resources especially when information is needed quickly

Always Refer When—

The student appears to be:
- Experiencing a mental disorder
- Hallucination/dissociation
- High anxiety
- Depression
- Unable to care for self
- Having suicidal or homicidal thoughts or plans
- Suffering from alcohol or drug abuse
- A victim of abuse

Steps for Ending the MHF Relationship

1. Summarize and review the situation
2. Point out abilities, strengths and choices the student has made successfully
3. Review possibilities and future choices
4. Identify ways of keeping track of progress
5. Leave the door open for a return visit

Contextualizing the MHF Program is Critical

- Places the MHF program in the school and community context where the program will be implemented
- Identifies school and community helpers
- Explores how the MHF program will most effectively work in your school and community
- Encourages participants to become actively involved in learning about student mental health
- Helps identify and address potential areas of implementation and challenges

Important Questions for Continued Contextualizing of the MHF Program

- How can you reduce the resources gap between mental health needs and access to services?
- How will you apply MHF in your school?
- What issues and concerns do you have implementing the MHF program in your school?
- What can you do with your new MHF skills in the next 3 months?
  - Next 6 months?
  - Next school year?
- What do you need to succeed?