Ensuring Quality in High School Mental Health Services

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Ensuring Quality in High School Mental Health Services
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Abstract
As a particularly vulnerable group to undiagnosed and untreated mental disorders, high school students require special attention. Ensuring adequate mental health resources are made available to students requires full participation of school faculty, parents, and peers. Feedback from all of these parties is necessary to address and properly refer students that may be displaying signs of impairment due to unaddressed mental health issues. Detecting early signs of mental health disorders and subsequently referring a student to receive professional help can offset the danger of worsening mental and physical health in the student. High School programs are often a student's first encounter with any form of a mental health service and it is important that schools ensure quality and proper regulation of their programs. High school services that implement community services and develop a trusted network of adults and peers inside of the school have shown to be the most successful. It is crucial that teachers and parents implement and actively participate in bettering a students' mental health by working with them according to the direction given by the provided mental health professional. Improperly regulated or unsupported mental health service providers in the high school can also lead to a poor treatment for students. To ensure the academic success and overall well-being of its students, it is vital that high schools implement and properly maintain a well-supported mental health service program within itself.

Introduction
- School services may be a student’s first or only encounter with a mental health service.
- School services are more accessible to the student over community mental health services and can observe symptoms of behavior disorders (Vieira, Gadelha, Moriyama, Bressan, & Bordin 2014).
- Early referral in adolescent life can prevent further progression of psychopathy and physical health problems (Vieira, Gadelha, Moriyama, Bressan, & Bordin 2014).
- Screenings have shown to be another successful tool that can be used to identify students in need of service (George, Zaheer, Kem, & Evans 2018).
- Mental health services in high schools can provide screenings and direct students toward local, specialized help (Brice et al., 2015).
- Untreated mental health problems can act as a social and academic barrier for the student, leading to an increase in mental health problems and contribute to a domino-effect of worsening symptoms into adult life. Screenings can better mobilize already strong mental health services in both the students’ school and community, vastly decreasing the consequences from unaddressed mental health problems (Weist, Rubin, Moore, Adelsheim, & Wrobel, 2007).
- Teachers are oftentimes very aware of students with mental health disorders such as conduct disorder due to the disruptive nature of its most common symptoms (Vieira, Gadelha, Moriyama, Bressan, & Bordin 2014).

Mental Health in the Learning Environment
- High school services do not display the same socioeconomic differences found in community programs for disadvantaged students (George, Zaheer, Kem, & Evans 2018).
- A more alert and involved school environment comprised of peer–adult networks may be able to better address suicide in students with behavioral and emotional concerns.
- An expanded school mental health program that integrates the school mental health service within community mental health services have shown to be incredibly effective (Weist et al., 2014).
- The support of the school faculty, parents, and peers of the student are essential to the success of school mental health programs (Nabors, Reynolds, & Weist, 2000).
- To ensure the success of the student, high school mental health services must adhere to a well-planned and consistent evidence-based program with strongly trained staff and proper implementation (Weist et al., 2014).

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32% of high school students experienced symptoms of depression.

17% of high school students seriously contemplated suicide.

13% had or currently have ADD or ADHD.

70% of adolescents with mental health needs do not receive the care they need.


Lack of mental health services in schools can often lead to school administrators and teachers within inclusive education systems to “unofficially leave out” students who exhibit disruptive mental health symptoms such as conduct disorder (Rothi, Leavey, Best, 2008).

Screenings and services
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