Identify Students with Mental Illness

Given their unique relationship with and oversight of students, teachers "are often the first to notice mental health problems."[1] The more knowledge teachers possess regarding symptoms of mental illness, the more capable they will be determining which students should be referred for a formal mental health evaluation by a trained professional.[2] As a foundational step, teachers should acknowledge the breadth of conditions and mental health problems that students may be experiencing.[3] Common mental illnesses among school-aged children include:[4]

- Attention deficit/hyperactivity disorder (ADHD)
- Anxiety disorders;
- Bipolar disorder;
- Conduct disorder;
- Depression;
- Eating disorders
- Oppositional defiant disorder (ODD;
- Psychosis;
- Reactive attachment disorder;
- Schizophrenia;
- Substance abuse; and
- Tourette's syndrome.

The Child Mind Institute's Symptom Checker

The Child Mind Institute—a nonprofit institution focused on supporting children, families, and educators in understanding and addressing children's mental health needs—hosts a digital tool to provide guidance on potential conditions that may be afflicting a given child. The "Symptom Checker" presents a series of questions about a child's behaviors and symptoms, analyzes users' answers to generate a list of mental health and learning disorders associated with displayed behaviors and symptoms, and provides a starting point for further investigation. It is accessible via the hyperlink above and the shortened URL and QR code below.

https://www.the-qrcode-generator.com/

Source: Child Mind Institute and QR Code Generator[5]

Teachers should observe for specific behaviors, moods, and thinking patterns indicative of these conditions.[6] In particular, teachers should look for behaviors of moderate to severe intensity that persist over long periods, interfere with the student's life functions, and diverge from typical behavior for that student's age group.[7] As such, teachers should strive to understand typical and atypical psychological development for the age-band of students that they work with and recognize common signals of mental illness and behavioral challenges among students.[8] Teachers can then apply this knowledge to actively and consciously look for potential symptoms of mental illness displayed by students to flag them for further evaluation by a mental health professional.

Signs of Mental Illness by School Level

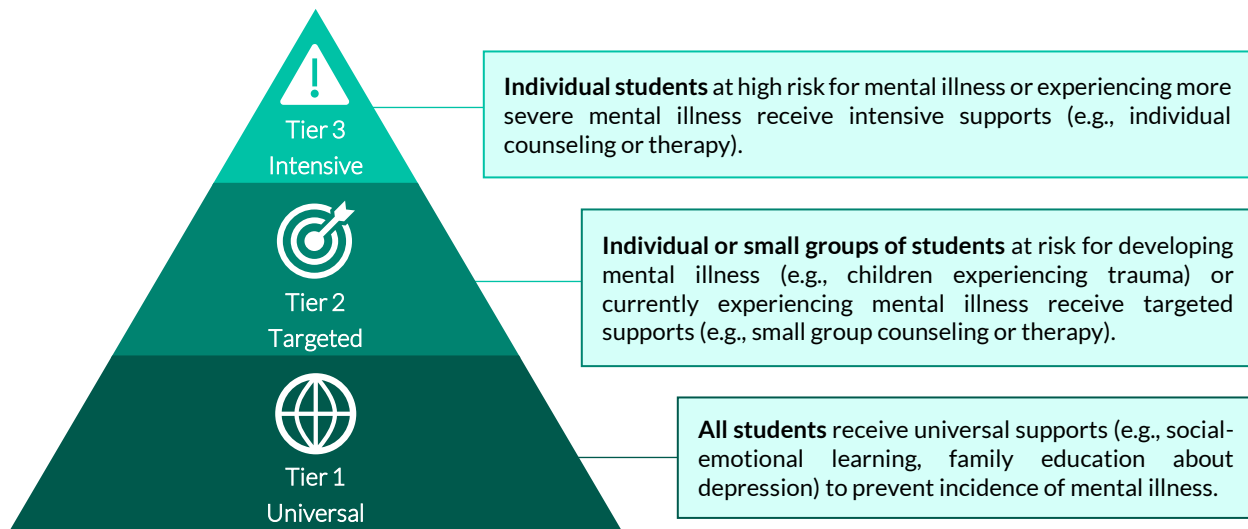| EARLY CHILDHOOD/EARLY ELEMENTARY	LATE ELEMENTARY	MIDDLE/HIGH
• Behavior problems • Hyperactivity beyond that of others • Trouble sleeping • Persistent nightmares • Excessive fear, worry, or crying • Extreme disobedience • Excessive intrusion in others' space • Deliberate violence or destructiveness • Frequent temper tantrums • Difficulty separating from parents	• Excessive fears and worries • Extreme hyperactivity • Sudden decrease in school performance • Loss of interest in friends or activities • Appetite loss and sudden weight changes • Excessive worry about weight • Sudden changes in sleep habits • Visible prolonged sadness • Substance use or abuse • Seeing or hearing things that are not there	• Symptoms from earlier school levels, though displayed in more pronounced ways • Destructive behavior, such as damaging property or setting fires • Constantly threatening to run away or running away • Withdrawal from family and friends • Comments or writings that suggest a desire to harm self or others

Tracking and reporting of student behaviors and symptoms provide valuable insight to school-based (and community-based) mental health professionals in understanding how students react to and function within their daily life activities.[10] Thus, teachers should monitor and record observations about student behaviors if they have concerns about students' mental and emotional well-being in order to best inform conversations with more qualified school personnel (e.g., school psychologists, social workers, nurses, counselors) about those concerns, as well as any potential evaluation of a given student for a mental health disorder.[11]

Provide Classroom-Based Supports

Many K-12 districts and schools provide students with a continuum of mental health care that exists alongside other resources, services, and supports in a multi-tiered system of supports (MTSS). Within the MTSS framework, teachers may support universal prevention efforts around mental health disorders (i.e., Tier 1) via strategies such as positive behavioral interventions and supports and the establishment of safe and supportive learning environments.[12] Likewise, teachers can support student referral to formal evaluations for mental health disorders and more targeted and intensive mental health supports (i.e., Tiers 2 and 3) by gathering emotional and behavioral data to guide mental health professionals in diagnosing any potential mental illnesses and determining the most appropriate treatments and services.[13]

MTSS Framework for Mental Health Interventions

Tier 3 Intensive

Individual students at high risk for mental illness or experiencing more severe mental illness receive intensive supports (e.g., individual counseling or therapy).

Tier 2 Targeted

Individual or small groups of students at risk for developing mental illness (e.g., children experiencing trauma) or currently experiencing mental illness receive targeted supports (e.g., small group counseling or therapy).

Tier 1 Universal

All students receive universal supports (e.g., social-emotional learning, family education about depression) to prevent incidence of mental illness.
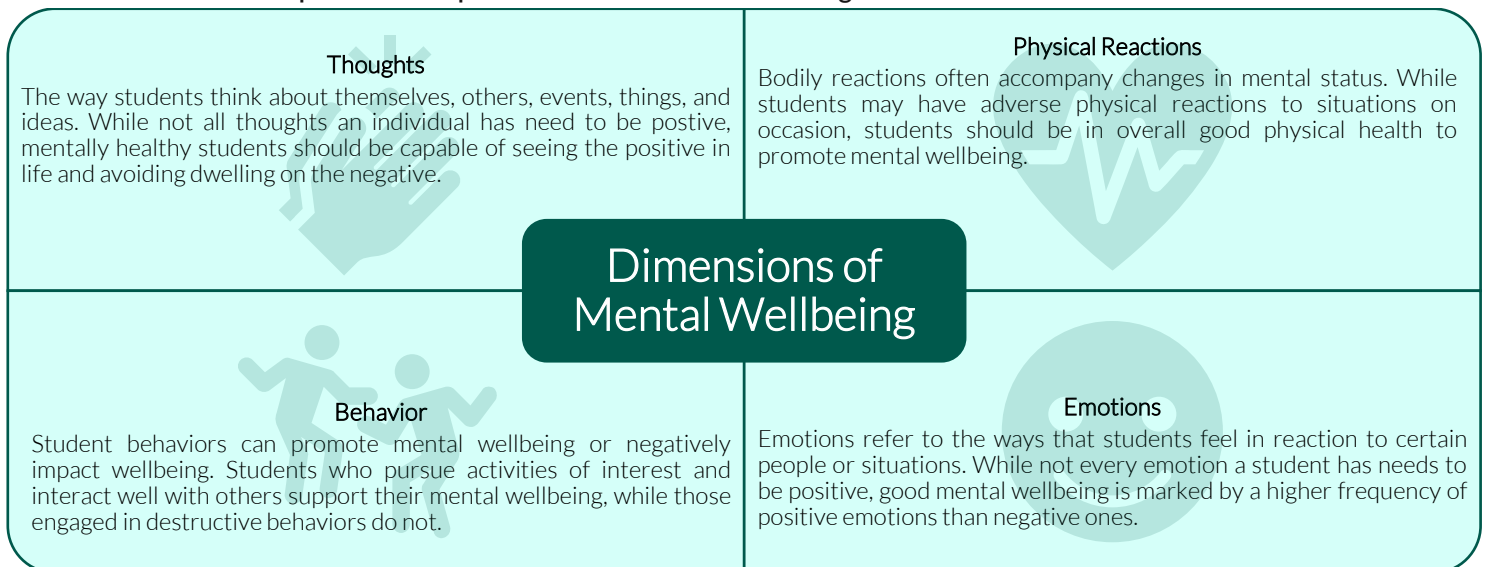
Source: Multiple[14]

Within Tier 1, teachers should leverage a climate-based approach that recognizes the classroom and larger school as contributing factors to students' mental health, limits the impact of risk factors (e.g., bullying, academic struggles), and enhances the presence of protective factors (e.g., positive relationships, engaging instruction) to support students' mental wellbeing.[15] Teachers should also show compassion to students experiencing mental illness, encourage students to treat one another with kindness and respect, and push themselves and students to use language that does not assign negative value to mental health disorders or those individuals who experience them.[16]

Relatedly, teachers should devote time and attention to social-emotional learning (SEL) to promote students' social and emotional competencies such as self-awareness and resilience. Furthermore, **teachers can educate students, parents, and themselves about the symptoms, causes, and impacts**

of depression and other mental health disorders to promote acceptance and diminish stigma and biases.[17]

Teachers can reduce stressors in the classroom and the pressure associated with instructional activities through strategies such as breaking tasks into their component parts, encouraging students who fall behind on their work or set unrealistic expectations for themselves, and making realistic and positive statements about student performance.[18] Essentially, teachers should structure and modify tasks to increase their manageability and offer additional scaffolding to students with mental illness while maintaining instructional expectations and setting students up for success.[19] Such actions are especially beneficial in cases where students are absent due to their mental illness or become more sensitive to academic pressures or performance critiques as a symptom of their mental illness.[20] Perhaps most importantly, **teachers should collaborate with mental health professionals such as school psychologists and school counselors to identify effective strategies to support students experiencing different forms of mental illness.**[21]

Important Aspects of Mental Wellbeing to Monitor and Address

Thoughts	Physical Reactions
The way students think about themselves, others, events, things, and ideas. While not all thoughts an individual has need to be postive, mentally healthy students should be capable of seeing the positive in life and avoiding dwelling on the negative.	Bodily reactions often accompany changes in mental status. While students may have adverse physical reactions to situations on occasion, students should be in overall good physical health to promote mental wellbeing.

Dimensions of Mental Wellbeing

Behavior	Emotions
Student behaviors can promote mental wellbeing or negatively impact wellbeing. Students who pursue activities of interest and interact well with others support their mental wellbeing, while those engaged in destructive behaviors do not.	Emotions refer to the ways that students feel in reaction to certain people or situations. While not every emotion a student has needs to be positive, good mental wellbeing is marked by a higher frequency of positive emotions than negative ones.

Source: Canadian Mental Health Association and Anxiety Canada[22]

Endnotes

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