

Student Mental Health Concerns in Your School: Steps to Take NOW

Cara Dixon | March 11, 2019



At the heart of Christian schools' missions is ministry to children. Christian educators desire that students thrive and achieve their God-given potential, and become successful in their education as well as in their service to Christ. However, the growing mental health needs of students often pose a challenge to these missional goals. [The American Psychological Association \(APA 2017\) estimates](http://www.apa.org/about/gr/issues/cyf/awareness.aspx)

[\(http://www.apa.org/about/gr/issues/cyf/awareness.aspx\)](http://www.apa.org/about/gr/issues/cyf/awareness.aspx) that “one out of every ten children or adolescents has a serious mental health problem, and another 10% have mild to moderate problems.” While data specific to Christian schools is not available, many school leaders and staff have noted an increase in mental health concerns among students. In my own work as a counselor in two different Christian schools, I have seen this increase myself—even just within the past five years.

The APA also reports that there is a “lack of mental health services for children and adolescents. Less than half of children with mental health problems get treatment, services, or support. Only one in five get treatment from a mental health worker with special training to work with children.” This reality is likely true in most of our Christian schools as well. Dealing with students' mental health concerns is not part of either formal educational preparation or on-the-job training for Christian educators. As a result, many Christian educators feel unprepared and unequipped to deal with these concerns.

However, the risks of not addressing student mental health are significant. Mental health issues

can derail not only students, but also their schools' efforts to fulfill their missional responsibilities. This is the case in crisis situations (e.g., suicidal intentions) and also with chronic concerns like anxiety, depression, and eating disorders. This is notwithstanding the legal and liability considerations that accompany these concerns. Appropriate support for students across a range of mental health concerns can ensure students' wellbeing and that those who are in crisis are cared for appropriately.

In addition to my work in Christian schooling, I have also worked as a mental health clinician in private practice and a program director in a partial hospitalization program. Through all of these experiences, I have gained a unique perspective into the many spheres that support the needs of children and adolescents. I have experienced mental health concerns that—when met with poor treatment—escalate, producing high risk. I have also experienced mental health concerns that were caught early and provided with excellent supports, which led to thriving children and adolescents. These experiences and understanding have prompted me to develop and translate strategies for Christian schools, with the hope that mental health concerns decrease and treatable symptoms receive appropriate care.

Here are three concrete steps that I recommend to schools as they seek to address students' mental health needs:

1. ***Intervene early.***

Intervene *with a plan* as soon as the symptoms present. The longer the symptoms persist without appropriate supports or intervention, the higher the risk for escalation of symptoms or for students to develop maladaptive strategies and behaviors. It is crucial to get the right treatment in place early, so that students and their families can immediately implement strategies for facing the challenges of mental health concerns. It isn't always easy, though, to tell whether a student's struggles has a mental health dimension, a spiritual dimension, or a developmental dimension (and often the answer is "yes" for all three!). I would recommend contracting a licensed mental health professional to train all faculty and staff in recognizing signs of distress early on.

2. ***Implement a system for recognizing, assessing, and supporting mental health needs.***

Rather than managing concerns on a case-by-case basis and trying to develop solutions in the (often stressful) moment, a system is an organized approach that matches students' presenting needs with procedures for handling those needs. These procedures can be tailored for common occurrences that are specific to your population. For example, a system would list out procedures and policies (the "who," "what," "where," "when," and "how") for dealing with students who experience debilitating test anxiety, mention suicidal thoughts, refuse to eat any food in school on a regular basis, cannot control impulses to hit other students, or struggle with bathroom accidents that are not age-appropriate (to name

a few common mental health issues among students).

There are several benefits to this proactive approach. First, a system gathers support services and preventative intervention strategies *in advance* of students' need for them, so they are at the ready for school personnel to employ. A system also allows educators to feel equipped with steps to follow, so that responses are not reactive or disorganized. This is key. Students experiencing mental health symptoms often have disorganized thoughts and feelings, and when the response to their experience is met with a disorganized, uncertain response, their symptoms are often intensified—and school staff's sense of vulnerability can rise in turn. Finally, handling concerns with case-by-case solutions can be time-consuming, and make it difficult—if not impossible—to track effectiveness of how the school responds to students' mental health concerns.

3. ***Develop relationships with mental health professionals.***

One of the first things I noted in the schools in which I worked was a list of professional counselors that was used for referrals. This is extremely important to have available for families. However, when I asked school personnel if they knew the professionals on the list, many of them did not. Rather, many reported that they knew them based on what students and families said about them. I cannot stress enough the importance of building relationships with local mental health professionals and connecting with them in person. Knowing a professional's specialty, practice, and experience is critical in deciding whether their expertise would be a good fit for the students and families to be referred. This creates an informed referral and a solid support team (of school and treatment provider) for the student. Over the course of one summer, I worked hard to build relationships with mental health professionals in the community when I was the director of counseling services at the Stony Brook School in New York. When the school year started and the needs arose, the connections to my referral sources were automatic and the follow-up was easy to access. This is critical for all levels of need and helps to ensure consistent care in all settings (e.g., home and school)—which in turn increases effectiveness of interventions.

While they are not a panacea, these three steps are excellent blocks to begin building a school context where mental health needs are recognized early, proactively addressed within a system that provides appropriate supports, and connected to excellent referral options. They are valuable steps for getting ahead of mental health concerns before they rise to the level of risk, and continuing to support the students entrusted to our care.

Additional Resources

- Click [here](https://blog.acsi.org/mental-health-needs-challenges-in-christian-schools) (<https://blog.acsi.org/mental-health-needs-challenges-in-christian-schools>) for an ACSI podcast interview with this blog author on this topic.
- Child Mind Institute. 2016. 2016 Children's Mental Health Report. <https://childmind.org/report/2016-childrens-mental-health-report/> (<https://childmind.org/report/2016-childrens-mental-health-report/>).

About the Author



Cara Dixon, LPC, NCC has worked in the mental health field for over 10 years, currently serving as the program director for Main Line Day LLC, and a clinician, consultant, and CEO of C.J. Dixon and Associates LLC. Dixon is credentialed as a Licensed Professional Counselor (LPC) in Pennsylvania and a National Certified Counselor (NCC). She has worked as a lead clinician and behavior specialist in public and private schools, where she designed treatment plans and produced significant data when evidence-based interventions were implemented. Dixon has spent the last several years designing counseling programs in Christian schools, both day and boarding, drawing on her background in evidence-based practice and research. She has led trainings for staff on stress management in academic settings, crisis management, and recognizing signs of distress. Cara is co-authoring a book on addressing students' mental health needs in Christian schools (forthcoming from Purposeful Design Publications in 2018). She can be reached via email at cjdixonandassociates@gmail.com (<mailto:cjdixonandassociates@gmail.com>) and her website is www.cjdixon.org (<http://www.cjdixon.org>).

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