The Role of School Counselors in Supporting

Mental Health Models in Schools

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Abstract

Many K-12 students face mental health challenges that affect them academically, socially, and emotionally. These challenges include anxiety, depression, trauma, and attention deficit hyperactivity disorder. While research on mental health models in school settings exists, specific attention has not been given to the role of school counselors in supporting mental health models in schools (Lynn, McKay McKernan, & Atkins, 2003; Mellin et al., 2010; Messina, Kolbert, Hyatt-Burkhart, & Crothers, 2015; Splett & Maras, 2011). This article explores strategies that school counselors can use to support mental health models within the K-12 academic setting.

The Role of School Counselors in Supporting

Mental Health Models in Schools

Many children and adolescents face mental health challenges that affect their overall academic achievement in the educational setting. According to the National Association of Mental Illness (2016), 20% of students between the ages of 13 and 18 years are living with a mental health condition. These mental health conditions can hinder them from succeeding academically, socially, and emotionally. Symptoms of mental health diagnoses present themselves in countless ways within the academic setting and often prevent students from meeting their full potential. Despite the existence of research on evidence-based practices to address mental health concerns in schools, little progress has been made toward discussing the role of school counselors in supporting mental health models in K-12 schools (Lynn et al., 2003; Mellin et al., 2010; Messina et al., 2015; Splett & Maras, 2011).

Students in the United States typically spend 6 to 8 hours a day at school for 9 months a year (Baker, 2013), and it is estimated that between 5-9% of U.S. students are not thriving academically because of emotional and/or behavioral concerns (Ballard, Sander, & Klimes-Dougan, 2014; U.S. Department of Health and Human Services, 1999). In low socioeconomic status populations, more than 20% of school-aged children have a mental health disorder (Cappella, Jackson, Bilal, Hamre, & Soule, 2011; Kataoka, Zhang, & Wells, 2002; Tolan & Henry, 1996). Over 8% of students who are 12-17 years old have reported more than, or equal to, 14 mentally unhealthy days within the past month; this number represents over 2 million adolescents (Perou et al., 2013). It is estimated that one in eight middle school students will experience some type of

anxiety and one out of every 100 high school students will be diagnosed with depression (Baker, 2013). Most alarmingly, 70-80% of students with serious mental health needs do not receive mental health services (Lynn et al., 2003).

According to Carlson and Kees (2013), students needing mental health support are more likely to pursue services within the academic setting than through a local mental health agency. Thus, it is critical that schools be prepared to provide the necessary support. Within the school setting, certain mental health professionals are typically available to help decrease the obstacles that are affecting students' overall mental health. Approximately 78% of schools have a school counselor on site, while 61% have a school psychologist and 42% have a school social worker (Brener, Weist, Adelman, Taylor, & Vernon-Smiley, 2007; Cappella et al., 2011). Additionally, about 60% of school districts partner with community agencies that offer school-based mental health services (Cappella et al., 2011). However, since school counselors are the leaders in K-12 settings that help address the challenges that are hindering students from succeeding socially, emotionally, and academically, they are also the logical resource for supporting mental health models (ASCA, 2018).

National Policy to Address Mental Health in Schools

Because of the overwhelming number of mental health problems that students are facing, there has been a national call through the Every Student Succeeds Act (ESSA) to address mental health in the K-12 school setting. According to the ESSA, school districts must address mental health components to support all students (Vaillancourt Strobach, 2015). As part of ESSA, mental health professionals must be included in consultations regarding the development of state and local plans

(Vaillancourt Strobach, 2015). Additionally, ESSA authorizes and supports the investments of districts to support comprehensive mental health services in schools provided by a licensed or certified mental health provider (Vaillancourt Strobach, 2015).

Given the national call to address mental health in schools, schools need to align academic goals with mental health goals (Cappella, Frazier, Atkins, Schoenwald, & Glisson, 2008). Schools are expected to address nonacademic issues pertaining to mental health even when faced with limited funds and resources (DeNisco, 2015). This situation calls for an increased need for collaboration among mental health professionals within the school setting (Baker, 2013; Mellin et al., 2010).

Training of School Counselors to Address Mental Health

According to the Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2016), school counselors "demonstrate the professional knowledge and skills necessary to promote the academic, career, and personal/social development of all P-12 students through data-informed school counseling programs" (p. 33). School counselors are the leaders, advocates, and change agents within schools that have the qualities for supporting students with mental health challenges within the school setting. CACREP further notes that school counselors can identify "characteristics, risk factors, and warning signs of students at risk for mental health and behavioral disorders" (p. 33). School counselors also possess the skills to critically examine the correlation between social, emotional, and academic achievement (CACREP, 2016). They are trained within their programs to collaborate and consult to ensure that the social, emotional, and academic needs of students are being met (CACREP, 2016). However, more attention must be given to the role of school

counselors in helping move mental health models forward. The following section discusses specific research-based strategies that school counselors can implement to support mental health models in their schools.

Strategies to Support Mental Health Models in Schools

According to the American School Counselor Association (ASCA, 2012) National Model, school counselors must undertake certain roles to support students within school systems. These roles consist of but are not limited to advocacy, leadership, collaboration, and helping with systemic change. School counselors can fulfill these roles to help move mental health models forward, but they must be aware of key components of evidence-based mental health services in order to do so. In supporting and leading mental health models in schools school counselors:

1. Make data-driven decisions for programming (ASCA, 2012).

2. Collaborate with mental health professionals to support mental health models (Mellin et al., 2010).

3. Provide a tiered system of mental health support (Vaillancourt, Cowan, & Skalski, 2016).

4. Evaluate services and communicate outcomes to stakeholders (ASCA, 2012).

Making Data-Driven Decisions When Developing Mental Health Models

According to the ASCA (2012) National Model, programming within schools must be created using data to support decisions. Data-driven decisions are important when developing mental health models in schools because when programming is designed based on data, school counselors and other stakeholders are given the opportunity to assess needs and develop services that address problems systemically. School counselors have an obligation to create programming based on students' needs and the

ASCA National Model has provided school counselors with a framework to ensure that data-driven decisions are made when creating programming within the academic setting.

According to ASCA (2012), school counselors often use process data to show what services are being provided to students and how many students are being served. However, as part of a push for more accountability within K-12 education, more emphasis is being placed on results and perception data. Results data answer questions about whether the services being provided are making a difference to students and whether the academic achievement gap is diminishing, while perception data reveal whether stakeholders perceive that the provided services are effective. Using process, results, and perception data collectively can provide school counselors with a well-rounded view of the needs of students to drive decision-making regarding support of mental health models in schools.

Collaborating to Support Mental Health Models in Schools

Within the educational setting, the term "guidance counselor" is familiar, but the profession of school counseling has evolved such that guidance is only one component of services provided by school counselors. According to ASCA's (2016) Ethical Standards for School Counselors, the school counselor's role is to help all students improve not only their academic achievement and career prospects but also their social and emotional development.

Research suggests that it is important for various mental health professionals to collaborate when developing mental health models in schools (Mellin et al., 2010). Thus, school counselors may work closely with school psychologists, school nurses,

social workers, and mental health therapists to support mental health models.

Teamwork is important, and early partnerships are vital, because if a student's mental

illness is not addressed early, more resources will be necessary in the future to

accurately identify the diagnosis and provide appropriate interventions (Bohnenkamp,

Stephan, & Bobo, 2015).

School counselors should understand the important roles that the other mental

health team members can play in supporting the mental health models in schools. For

instance, school psychologists can provide support by making assessments, providing

interventions, identifying key community resources for students, and pointing out risky

behaviors being observed (DeNisco, 2015). Meanwhile, school nurses can help with

screening and identifying at-risk behaviors. Because nurses spend time with students

who have other health issues, quite often they have information pertaining to

occurrences between school, home, and outside health care providers (Bohnenkamp et

al., 2015). School nurses may develop a rapport with students because of natural and

regular interactions, and it is during these interactions that school nurses can detect

changes in students' physical and/or mental health.

Moreover, social workers may add a depth of knowledge to mental health models

in schools because they can diagnose and treat mental health disorders. They may also

play a significant role in students' mental health by linking resources between students'

school and home lives (Lynn et al., 2003). Finally, mental health therapists, who can

also diagnose mental health disorders and provide counseling services for students,

offer an area of expertise that can be used to help provide professional development for

stakeholders to ensure that mental health needs are being addressed throughout the school setting.

Further, increasing administrators' and teachers' knowledge of how to properly identify mental health issues in students as well as the community resources available creates a cohesive team with the depth necessary to best serve students (Baker, 2013). The school counselor should take the lead in collaborating with mental health professionals and other stakeholders. When collaborations are formed early and efficiently, with clear boundaries and roles for each member of the group, they can have a positive impact on students' self-efficacy, autonomy, and competence, which are the aspects that can improve and help maintain students' mental health (Doll, Spies, & Champion, 2012).

Providing a Tiered System of Support

Mental health services are currently provided in many K-12 school settings. However, in recent years, attention has been given to providing a tiered system of support (McIntosh & Goodman, 2016). By taking the lead in implementing a tiered system of mental health services, school counselors can provide multiple layers of support (Vaillancourt et al., 2016). A tiered system of support has three levels, and school counselors and other stakeholders must ensure that evidence-based practices are used in each level to guarantee that the most effective, empirically supported practices available are being utilized (Splett & Maras, 2011).

A multi-tiered system of support contains specific interventions at each level to support the students in the areas where they are presenting mental health concerns (Fabiano & Evans, 2019). When applied to mental health concerns, Fabiano and Evans

explained that: Tier one is a universal tier and provides support and interventions for all students, tier two is more targeted to students who are at risk of mental health concerns, and tier three provides intensified services for students who have mental health concerns that are impeding them from succeeding within the academic setting. Research has shown that utilizing a multi-tiered system of support that includes intervention and prevention programs can help decrease harmful behaviors, increase access to resources, improve collaboration among community partners, enhance student engagement, and improve student academic achievement (Vaillancourt et al., 2016).

Tier one. Tier one is all-inclusive, meaning all students receive mental health services within the regular school setting (Leary & Li, 2017). According to Putnam (2013), at the tier one level, schools give priority to social and emotional health; mental health skill development for students, staff, and families; social and emotional learning curricula for all students; a safe and caring learning environment; community partnerships (school, home, and community); and a decision-making framework for making decisions pertaining to mental health services and academic achievement.

Many students have been exposed to various traumatic experiences and may present with symptoms within the academic setting (Chafouleas, Koriakin, Roundfeld, & Overstreet, 2018). To support students at the tier one level, school counselors should introduce trauma-informed classroom methods to teachers, administrators, and staff. Trauma-informed practices shown to support students at this level are building rapport with students, creating a calming space to support students, teaching stakeholders about stress and coping strategies, and collecting data pertaining to school climate to

ensure that the needs of students are being assessed and addressed at this level (Sporleder & Forbes, 2016).

Tier one also includes social/emotional curricula that are preventive in nature and are provided to the entire student body. When implementing social/emotional curricula, school counselors, teachers, and support staff need to provide direct instruction, model social skills, role play those skills in various settings, and provide feedback on progress and limitations (Otten & Tuttle, 2011). Various social/emotional curricula have been used in the K-12 setting, such as *LifeSkills Training* (Botvin, 2000), *Promoting Alternative Thinking Strategies (PATHS)* (Kusche, 2012), *Second Step* (Committee for Children, 2011), *Skillstreaming* (Goldstein & McGinnis, 2011), and Super Skills (Coucouvanis, 2005).

In addition, at this level, the 40 Developmental Assets designed by the Search Institute (1997) should be utilized to ensure that educators and staff are assessing the needs of students using a strengths-based approach. The 40 Developmental Assets consist of preventative interventions that illustrate positive experiences and effective qualities that students must possess to be productive members within their communities. The assets are protective factors, and the more assets students have, the less likely they are to participate in risky behaviors (Search Institute, 1997). Families should be made aware of the services and information available through schools to help support the mental health of students.

Tier two. Tier two is a targeted intervention for at-risk students who need additional support to eliminate barriers that are affecting them academically, socially, and emotionally (Leary & Li, 2017). At the tier two level, school counselors provide small

group support and/or psychoeducational group support. Small group attention is placed on specific needs that the students are facing. According to ASCA (2016), topics for groups should be selected based on need, and school counselors must work within their scope of practice when providing group support in the school setting. School counselors can facilitate short-term support groups for students, and the groups should address the students' social, emotional, and academic needs. The group sessions should also be based on evidence-based practices to ensure that they are effectively addressing the needs of the students (ASCA, 2016). Examples of support groups are grief and loss groups, social skills groups, parental incarnation groups, and divorce groups.

At the tier two level, school counselors also provide individual counseling sessions to address specific topics related to social and emotional barriers to academic achievement. Within the individual counseling sessions, school counselors can recognize warning signs of mental health concerns that are impeding students from succeeding within the academic setting (ASCA, 2015). According to ASCA (2015), some of the warning signs that school counselors should look for are changes in academic performance and overall changes in behavior.

According to ASCA (2015), school counselors are charged with advocating and collaborating with stakeholders to ensure that students are supported mentally. Thus, at the tier two level, school counselors should coordinate with community stakeholders to ensure that students, families, and staff have access to and resources on mental health support. ASCA has also charged school counselors with educating stakeholders about the mental health needs of students. Through collaboration and consultation, school counselors can provide insight on strategies that support students academically,

socially, and emotionally. At this stage, additional professional development for administrators, teachers, and staff who are working with students with mental health concerns that are impacting them academically may be necessary. The role of the school counselor in this aspect is to provide resources and to educate these stakeholders about the trends of mental health concerns impacting students. Also, informing stakeholders of the environmental barriers that cause or trigger mental health concerns of students in the academic setting is vital. Community mental health resources should be identified and disseminated at this stage to ensure stakeholders are aware of additional services that students may need outside of the academic setting (ASCA, 2015).

Tier three. The third tier is where the most intensive interventions are provided based on students' needs (Leary & Li, 2017). Tier three focuses on a more comprehensive process, called a "wraparound" process, that involves key stakeholders meeting to collaborate and strategize about students' needs (Leary & Li, 2017). Barriers to students succeeding are often interconnected across various areas of life including school, community, and family (Mellin et al., 2010). According to ASCA (2016), it is imperative to consider the involvement of major stakeholders for at-risk students. This can happen by involving pertinent stakeholders that are a part the student's support system in and outside of the academic setting. The key stakeholders are identified by the wraparound team and should be recruited based on the roles that they play in supporting students academically, socially, and emotionally.

The wraparound team should consist of students, parents/caregivers, teachers, administrators, mental health professionals, and outside agencies that work with the

student and family (Atkins, Graczyk, Frazier, & Abdul-Dil, 2003; Messina et al., 2015).

The student is a key member of the team and should be present in meetings to discuss

barriers to success within the academic setting and provide insight on interventions that

he or she needs to be successful. Parents/caregivers at this stage can provide insight

on strategies, behaviors, and other key contributions to support the student in the

school setting. Teachers can play a vital role in the wraparound process by offering

social support that may have a significant impact on students academically, socially,

emotionally, and mentally (Lynn et al., 2003). Administrators should also be included in

the wraparound process to provide building-level support and to engage in

conversations on effective strategies to support the student.

In addition, mental health professionals are vital at the tier three stage. The

mental health team from the school might consist of the school counselor, school

psychologist, or clinical counselor in the school setting. These various experts can

provide input on valuable interventions to support the student within the academic

setting (King-White, 2018). The involvement of school counselors is very important at

this stage; however, school counselors are still labeled "guidance counselors" in many

K-12 settings and are not always considered an asset for supporting students socially,

emotionally, and mentally (King-White, 2018).

The support from family is also crucial at this level because it is important to align

students' home life with school life and to do so in the most supportive way possible

(Messina et al., 2015). However, in the academic setting, garnering family support may

be a challenge. It is vital for school counselors to inform parents of the mental health

challenges that are impacting a student and possible triggers in and outside of the

academic setting (ASCA, 2015). School counselors have an obligation to collaborate with parents/guardians, even those who are difficult to engage, to try to establish rapport in order to ensure that the social and emotional needs of the students are being met (ASCA, 2016). However, if parent/family support is impossible, there are a few strategies to consider to support the student's overall mental health: (a) identify other members from the wraparound team who can provide support and advocate for the student, (b) seek out other members of the child's support system who can help provide an additional layer of support in and outside of the academic setting, and (c) collaborate with community partners to provide additional resources to assist the school in meeting the student's mental health needs.

At the tier three level, mental health and related services include individual counseling provided by a mental health therapist, crisis intervention, outside counseling services, small-group counseling, behavior plans, and additional professional development for stakeholders.

Evaluating Mental Health Services and Communicating Outcomes

The evaluation of evidence-based practices can help decrease negative mental health outcomes in students and support academic achievement. According to the most recent ASCA (2016) Ethical Standards for School Counselors, it is the role of the school counselor to conduct program evaluations to determine if programming is effective and meets the academic, social, and emotional needs of students. An effective mental health model involves regular monitoring of student and program outcomes to include reviewing outcome data and analyzing the data to measure gaps, successes, and areas

of limitations. Among school counselors and other mental health professionals, evaluating services is a continuous process (Vaillancourt et al., 2016).

Once programming and/or services are provided, it is vital for school counselors to analyze the data and review the goals that were established for programming. This approach can be time consuming and collaboration is imperative at this stage. When analyzing data, it is important to have an outside reviewer give feedback. The outside reviewer can be another school counselor, another mental health professional on the team, a curriculum director, an administrator, someone from a local college, or other colleagues within the district who have experience analyzing data.

Once the data are analyzed, it is vital to communicate the results to proper stakeholders. According to the ASCA (2012) National Model, results must be shared with schools and individual members throughout the district. By communicating the outcomes, school counselors have the opportunity to build a rapport with stakeholders and provide a layer of transparency. This communication also provides a chance for parents to be involved in their children's overall educational experience. Communicating outcomes allows teachers, administrators, other mental health professionals, parents, staff, and students to see the correlation between mental health services and their impact on students' ability to succeed within the school setting based on the services provided.

Discussion

School counselors have become an integral component in supporting mental health models in K-12 schools. They possess many skills as well as the educational background to move mental health models forward in school settings. The various

strategies that school counselors can employ to support mental health models in schools include the use of data-driven programming, collaboration among mental health professionals, implementation of a tiered system of mental health support, and evaluation of outcomes of programming to ensure that students' needs are being met. These strategies can be effective in moving mental health models forward, but school districts must recognize the importance and urgency of the implementation of mental health models and the support currently available from school counselors.

The barriers to implementing mental health models in schools must be addressed through the leadership and advocacy of school counselors. These obstacles include limited funding for mental health services, limited awareness of the impact of mental health on academic achievement, and lack of coordination of mental health services currently provided in schools. Educational leaders should recognize that school counselors have the knowledge and training to help move mental health models forward to address these barriers and close gaps in mental health services at the K-12 level.

Implications for School Counselors

Many students face mental health challenges that prevent them from succeeding within the school setting. As discussed herein, school counselors can play an integral role in supporting and moving mental health models forward to help these struggling students. However, in order to do so, school counselors can:

1. Participate in continuous professional development pertaining to implementation of mental health models in schools.

2. Communicate with administrators about the potential role of school counselors as it relates to supporting mental health models in schools.

3. Advocate for mental health models to be a part of school districts' strategic plans to ensure that a plan for implementation exists.

4. Be aware of recent laws pertaining to mental health models in schools.

5. Create local policies and procedures within school districts that support the mental health models in schools.

6. Present outcomes of programming that support mental health models in schools to proper stakeholders.

Summary

Within the school setting, school counselors have an obligation to support the social and emotional well-being of students. This obligation requires school counselors to collaborate with other stakeholders because of the many mental health challenges students are facing within the academic setting. Since students needing mental health support are more likely to pursue services within the academic setting than through a local mental health agency (Carlson & Kees, 2013), it is imperative that school counselors help develop mental health models to address the barriers that are impeding students from succeeding academically, socially, and emotionally.

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