



# **Improving Student Wellbeing**

Through Mental Health  
First Aid Training

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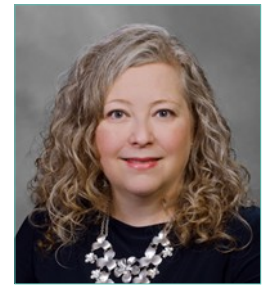
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# The Need

## Current Status on Mental Health of High School Students

**A**cing the next exam is no longer the biggest concern for high schoolers. In fact, it hasn't been for quite some time. According to the Surgeon General, the mental health of high school students has been persistently declining.<sup>1</sup> The stress and isolation of the worldwide COVID pandemic further exacerbated the issue.<sup>2</sup>

Not only are students more stressed, but a majority feel that the world in general is more stressful these days compared to when their parents grew up.<sup>3</sup>

**Nearly 1/2 of students report feelings of overwhelming hopelessness or sadness.<sup>5</sup>**




The Center for Disease Control and Prevention's (CDC) Youth Risk Behavior Survey (YRBS) is considered one of the best resources to provide valuable data on behaviors and conditions for U.S. high school students.<sup>4</sup> According to the YRBS, nearly a third of high school students report "experiencing mental

health issues." In fact, 42% of students reported experiencing "persistent feelings of sadness or hopelessness," a steady increase from the 28% reported in 2011.<sup>5</sup>

**1 in 5 Students Seriously Consider Suicide**

**1 in 10 will Attempt Suicide<sup>5</sup>**



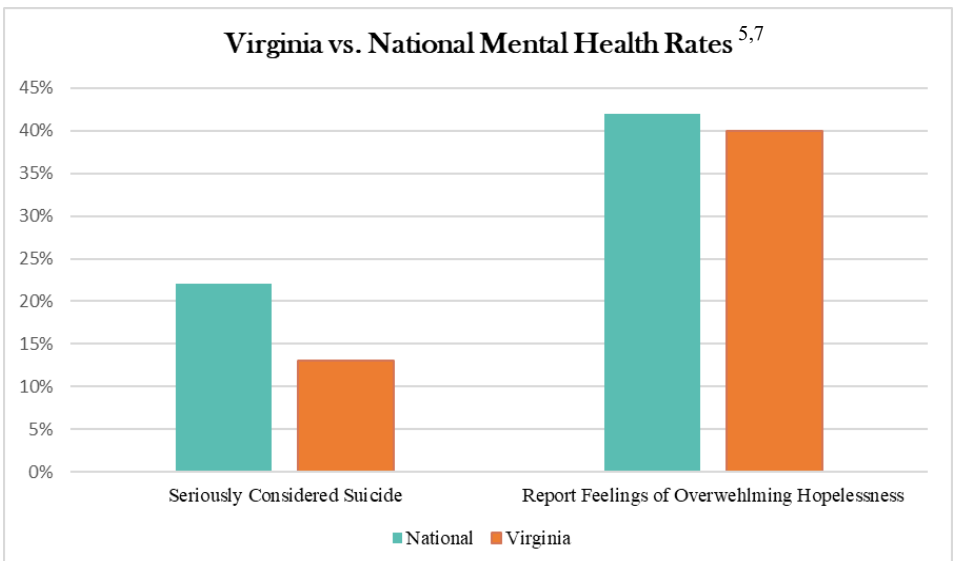
In Virginia, 64% of high school students report feeling nervous or anxious and 53% can't stop worrying.<sup>2</sup>

Additionally, the survey findings show that 22% of students in 2021 reported that they have "seriously considered attempting

suicide," up 37.5% from a decade previously. Furthermore, 18% of students attempted suicide, up from 8% in 2011.<sup>5</sup>

Half of mental health conditions develop by the time a student turns 14 and another 25% develop by 24. However, help is not readily available. In fact, it takes an average of 11 years before students get help for those symptoms.<sup>6</sup>

In Virginia, the Behavior Health Commission reports that mental health data for Virginia is consistent with national averages. It went on to report that the feelings of sadness and hopelessness not only lasted for up to two weeks or more, but also prevented students from participating in their routine activities.<sup>7</sup>

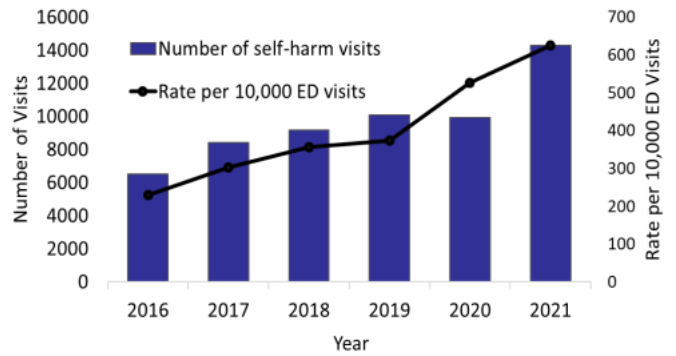


Virginia emergency rooms are seeing more pediatric patients for anxiety and depression, averaging more than 12,000 visits annually.<sup>8</sup> According to the Virginia Department of Health (VDH), Virginia youth visited emergency departments more than 58,000 between 2016 and 2021 for “suicidal thoughts, self-harm, or suicide attempts.”<sup>9</sup>

Self-harm visits more than doubled during that time period, climbing to 14,298 in 2021. Suicides among Virginia’s youth have also increased during those seven years, claiming 384 young souls between 2016 and 2021.<sup>9</sup>

High schools are carrying this mental health burden into adulthood. Anxiety and depression rates are rising among young adults. Nearly 27%

**ED visits related to suicidal thoughts, self harm, and suicide attempts among Virginia youth aged 9-18 years, 2016-2021**

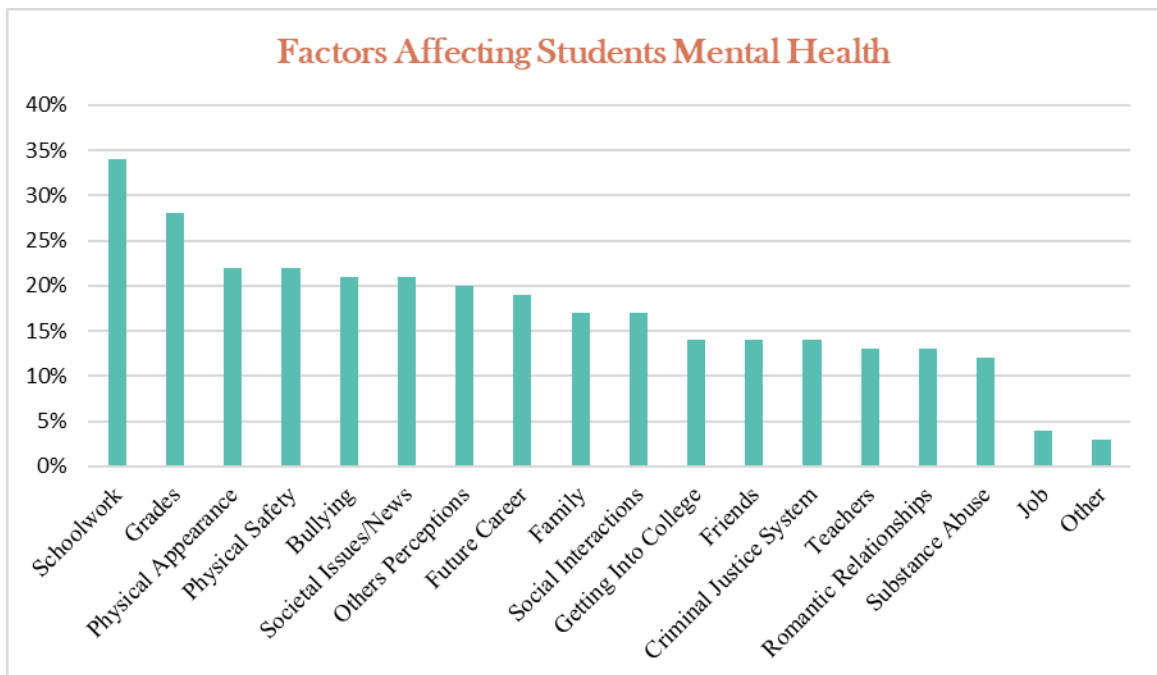


Note: From 2016 to 2021, the number of EDs reporting data increased from 92 to 107.

of young adults reported anxiety and more than 25% reported recent depression.<sup>10</sup>

### What’s on the High School Students’ Minds?

**W**hat is causing all this anxiety and hopelessness for students? More than you think! Students are concerned about school (schoolwork and grades), the people in their lives (family, friends, and teachers), their future (college and career), and social interactions. They are anxious about societal issues (the news), social interactions, romantic relationships, their own physical appearance and the perceptions of others. Students are worried about bullying (online or in person) and their own personal safety both at school and outside school. They are troubled about their own and others’ substance abuse and involvement in the criminal justice system.<sup>11</sup>



## The Cost of the High School Students' Mental Health Issues

These mental health challenges facing high school students result in more than just anxiety and feelings of hopelessness.

High school students are missing an average of 25.8 days of school annual due to mental health issues.<sup>12</sup> In Virginia, "20% of students statewide were chronically absent in 2021-22 school year."<sup>2</sup>



Furthermore, students with excessive absences are less likely to take on leadership roles and suffer from others' negative perceptions.

Additionally, as these students move into adulthood, their employer can bear additional costs as a result of their mental distress or illness. In Virginia, the National Safety Council estimates mental health costs employers more than \$158,000 annually per 100 employees in lost time, job turnover and health care.<sup>13</sup>

**Students Missing More Than 25 Days Annually<sup>12</sup>**



These missed days inversely affect the students' academic performance. The more days a student misses, the worse the student's academic achievement. Additionally, this absenteeism can compound the students' mental health issues. When students miss days at school, they feel more isolated and less likely to be motivated.<sup>12</sup>

**Annually Each Mentally Distressed Worker Costs Employers<sup>13</sup>**



- >\$2,800 in Health Care Services
- >\$4,700 in extra missed work days
- >\$5,700 related to Turnover

### Estimated Average Costs for Employers in Virginia<sup>18</sup> Per 100 Employees

| Lost Time<br>\$47,830                      |    | Job Turnover<br>\$57,330 |   | Health Care<br>\$53,132 |    |
|--|----|--------------------------|---|-------------------------|----|
| Missed Days                                | 93 | Annual<br>Turnover       | 4 | Days in Hospital        | 72 |
| Days of Work Skipped                       | 67 |                          |   | Emergency Room Visits   | 3  |
| Employees Who will Cause a Safety Incident | 2  |                          |   | Outpatient Visits       | 31 |

# Currently In Virginia

## In Virginia ...

The subject of student mental health has indeed been a topic of discussion, study, and action over the past few years. In fact, the need for enhanced mental health awareness training for teachers was identified even before the pandemic.

Mental health awareness training was first required for teachers as a result of legislation passed in in early 2020. This legislation was codified at Va. Code § 22.1-298.6.

### **§ 22.1-298.6. Mental health awareness training**

*A. Each school board shall adopt and implement policies that require each teacher and other relevant personnel, as determined by the school board, employed on a full-time basis, to complete a mental health awareness training or similar program at least once.*

*B. Each school board shall provide required personnel the training required by subsection A and may contract with the Department of Behavioral Health and Developmental Services, a community services board, a behavioral health authority, a nonprofit organization, or other certified trainer as defined in § 37.2-312.2 to provide such training. Such training may be provided via an online module.*

Through this legislation, each school board is required to adopt and implement policies that require each teacher and other relevant personnel ... to complete a mental health awareness training or similar program at least once. Each school board was also empowered to contract with DBHDS, a CSB, a non-profit organization, or other certified trainer to provide the training.<sup>14</sup>

Just weeks after this legislation was passed, the pandemic shut down the world. The pandemic not only had a profound impact on schools and students, but also shed light on an increased need for student mental health services.

| Number of Students Per Staff Member <sup>2</sup> |             |                         |
|--|-------------|-------------------------|
|  | In Virginia | National Recommendation |
| School Social Worker                             | 1349        | 250                     |
| School Psychologist                              | 1322        | 500                     |
| School Counselors                                | 299         | 260                     |

In November 2022, JLARC released a report with the findings of its study of the impact of the pandemic on public K-12 education.

In addition to concerns related to chronic absenteeism, academic achievement, and disruptive student behavior, JLARC found that mental health issues among students were “concerningly prevalent.” JLARC also found that K-12 mental health staffing levels were likely inadequate to fully address student mental health issues.<sup>2</sup>

JLARC further made recommendations to address the school-based mental health workforce and access to counseling services for students and to promote community-based partnerships between the schools and their local mental health providers.<sup>2</sup>

In 2023, a subsequent legislative report was issued by the Behavioral Health Commission on maximizing school-based mental health services. The report recognized the important role played by classroom teachers in the provision of mental health

services, not only in the incorporation of concepts such as social and emotional learning into classroom lessons, but also in collaborating with other school mental health professionals.<sup>7</sup>

“Virginia has historically appropriated a limited amount of funding specifically for school-based mental health services.”<sup>7</sup>

The report further noted that local funding for mental health varies significantly among school divisions, and that there is limited state funded directed specifically to school-based mental health services.

In light of concerns coming out of the pandemic and outlined in various reports, there have been additional legislative efforts specific to awareness training for teachers and school personnel related to student mental health.

However, bills introduced in 2023 and 2024 did not result in any change to the existing language in the code that requires that teachers receive mental health awareness training at least once.

In 2023 and 2024, bills were introduced to expand the existing required training:

In 2023, HB 2154 was introduced to include school bus drivers in the named personnel to receive required mental health awareness training; this bill was left in committee;

In 2024, HB 224 was introduced to expand the existing scope of mental health awareness training for teachers and school personnel to include awareness of/ identification of the mental health needs of designated youth populations. This bill narrowly passed the General Assembly and was ultimately vetoed by the Governor.

Finally - How does Virginia compare to other states in addressing the mental health needs of students?

Mental Health America, a national non-profit organization founded in 1909 to promote mental health, well-being, and illness prevention, issues a yearly report on the State of Mental Health in America. In the 2024 report, Mental Health America ranked Virginia as 26th in the nation for youth prevalence of mental illness and 27th for access to youth mental health care for students experiencing at least one major depressive episode in the past year.<sup>15</sup>

“48.3% of youth with MDE reported an unmet need for treatment, totaling 987,000 youth in the U.S.”<sup>15</sup>

This issue has remained on the radar for discussion over the past four years, and likely will continue into the future. As part of that continued discussion, we have our own recommendation.



# Recommendation

## Our Recommendation

Teachers should be required to take the **Youth Mental Health First Aid** training. This course should be part of their mandated license renewal **every 10 years**.

The Youth Mental Health First Aid Training is an eight-hour course that can help individuals understand mental illnesses. Identify resources and seek timely interventions.

This training covers tips to identify signs and symptoms on mental health issues in the youth. These issues can include anxiety, substance abuse, depression, eating disorders and attention deficit hyperactive disorder (ADHD). The class also discusses how to connect with today's youth

## 5-Step Mental Health First Aid Action Plan (ALGEE):

Assess for risk of suicide or harm.

Listen nonjudgmentally.

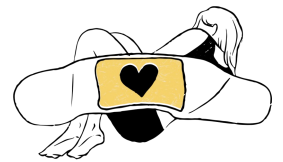
Give reassurance and information.

Encourage appropriate professional help.

Encourage self-help and other support strategies.

## Why Youth Mental Health First Aid<sup>17</sup>

- ☆ Increased mental health literacy, including:
  - Knowledge of signs, symptoms and risk factors of mental health and substance use challenges
  - Ability to identify appropriate types of professionals and self-help resources for youth with a mental health or substance use challenge.
- ☆ Increased confidence/self-efficacy and likelihood to help a young person in distress.
- ☆ Reduced stigma and increased empathy/acceptance toward youth with mental health challenges.
- ☆ Use of MHFA skills after training.



and a five-step action plan to interact with them when they are in crisis. It helps identify resources for topics such as trauma, self-care, substance abuse, bullying and the impact of social media.<sup>16</sup>

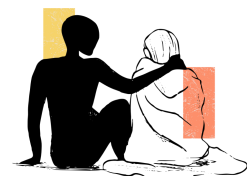
Why this specific class? The Youth Mental Health First Aid class is based on evidence. The class is readily available in Virginia through the Community Service Boards (CSB). In 2020, 492 trainers held 324 mental health first aid trainings that training 5,188 people.<sup>18</sup>

According to the National Alliance of Mental Illness, students expect the school to be a resource. Two

thirds of students expect their school to have mental health curriculum and 80% would seek mental health teachers.<sup>3</sup>

And the teachers wanted as well.

In a study of post-course participant' stories, nearly 80% that when they experienced a mental health-related situation they felt they were able to help and those that hadn't experienced a situation yet still felt prepared to deal with it when one arose.<sup>19</sup>





# In Other States

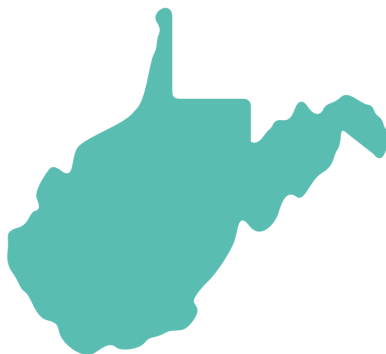
## Across the Country

**M**any other states are utilizing youth mental health first aid and their school systems as a resource for school teachers and personnel.



In Texas, they have the eight-hour face-to-face course available. It is required as part of the minimum qualifications for teacher certification. This requirement has been in place since 2015.

West Virginia also has an expanded school mental health program that is designed to create a school environment that supports social and emotional well-being of students to achieve his or her full potential. It is an evidence-based three-tier approach program.



In 2022, Florida implemented a program through legislation that requires annual certification of 80% of school personnel in a school district to include charter schools. Personnel are required to complete youth mental health first aid training.



In California, the Department of Education also provides youth mental health first aid training for school personnel, teachers, and the frontline mental health workers.

Utah requires licensed employees in each school district or charter school to complete a two-hour youth suicide prevention training every three years.



# Case Studies

## Case Studies of Others Offering Mental Health First Aid Training



Iowa's Prairie Lakes Area Education Agency (PLAEA) successfully implemented Teen Mental Health Training in most of its schools as a pilot program during the 2019-20 academic year.

Iowa also implemented Youth Mental Health First Aid training, which is designed for adults who regularly interact with students ages 12-18 that are facing common mental health challenges. The training reviews typical adolescent development and teaches a five-step action plan for helping young people in crisis and non-crisis situations.

The two programs implemented together increased teens of confidence in dealing with mental health concerns among their friends and peers.

“We believed that by teaching Youth MHFA to the educators and tMHFA to the high school students, we were widening the safety net of noticers who had the knowledge and understanding to help others possibly experiencing a mental health challenge or crisis,” said Kim Bodholdt, school emotional behavior health consultant.<sup>20</sup>

Overall, 89% of teens in the Prairie Lakes District said that they would recommend mental health first aid to a friend. Similarly, 94% of teachers and faculty and staff were more confident in assisting teens with possible mental health challenges.<sup>20</sup>



THE UNIVERSITY  
of NORTH CAROLINA  
at CHAPEL HILL

The University of North Carolina also trained its faculty and staff using Mental Health First Aid.

UNC saw benefits not only to its students, but its workforce and their families as well. Because of the training, faculty and staff recall situations where they felt empowered to recognize symptoms and mental distress and intervene in an appropriate fashion.

“I recently assisted a student who was having a major mental health crisis. I never thought I would really need to use the training at all, let alone this soon (approximately 4 months after training),” said one faculty member. “I was able to apply the nonjudgmental listening skills we learned in a space in which the student felt less threatened.”<sup>21</sup>

“Foremost, our students need support ... Why wouldn't we equip those around them with the initial tools to identify distress symptoms, and the confidence and knowledge to intervene if needed?” said Tara Lea Bohley, the director of UNC's Behavioral Health Springboard.<sup>21</sup>

### Teachers Aren't Counselors



The concern is that teachers are not mental health professionals. We agree! Teachers are not mental health professionals. However, they are best positioned to recognize emerging or persistent struggles about high school students. Teachers may be that first connection to the resources. And with this training teachers will be able to help move students to the appropriate resource. The goal is not for them to be mental health professionals, but a means of directing students to the correct resources. Just as a teacher would direct a student with a cut to the school nurse.

### Another Mandate



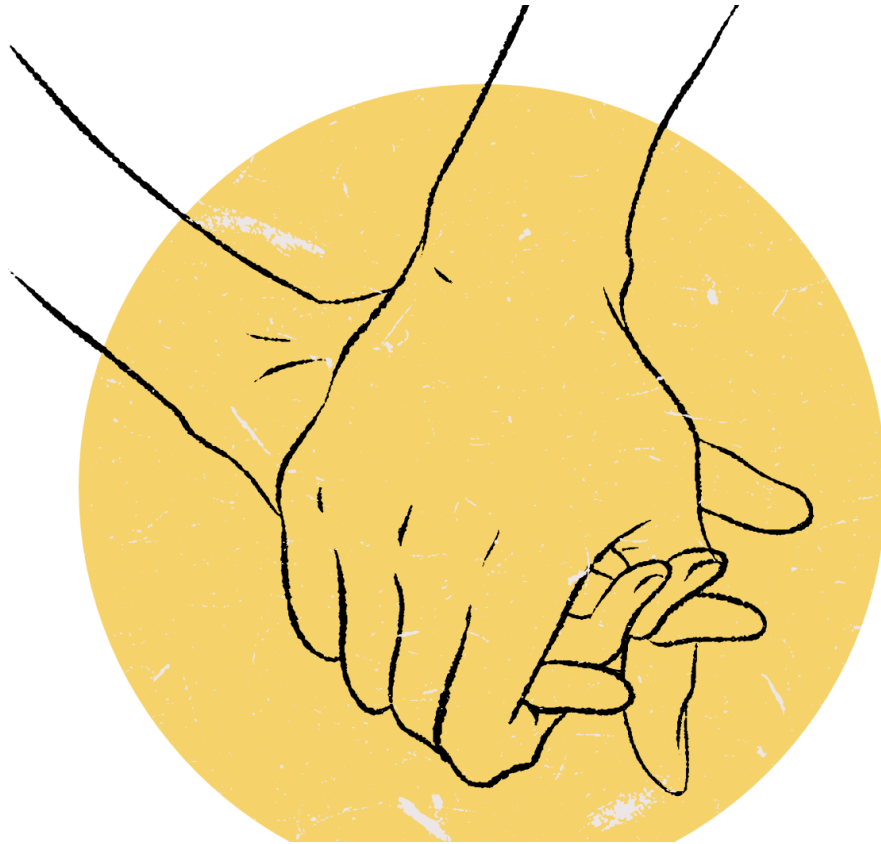
The second challenge is that this recommendation is yet another mandate. This recommendation isn't another mandate, it's a modification to an existing mandate. A modification to ensure that teachers can meet the existing mandate with a consistent, evidence-based course that will benefit teachers the most.

### Is it Worth the Time/Money?



The last challenge is about time and money. Teachers are extremely busy. This course would be part of the license renewal that teachers are already required to complete every 10 years. A request that would not be any different than the CPR or Neglect and Abuse course requirements that are currently mandated by the Department of Education. Additionally, this course is available to teachers at no cost through the Community Service Boards,

# Challenges



**With Youth Mental Health First Aid training, we can empower the teachers with the tools to make an impact on high school students' well being!**



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