



## WHY THIS MATTERS

It's estimated that 50% of all mental illnesses begin by age 14, and 75% by age 24. Due to a shortage of mental health professionals, financial obstacles, and social stigma, few kids receive the mental health care they need. Universal mental health screening—wellness screens—can be conducted in schools or doctors' offices to catch kids who may be struggling, identify their strengths, and provide resources before they reach a tipping point.

## WHAT THE RESEARCH SAYS

Research shows that identifying and treating mental health conditions early in life helps to prevent mental illness in adulthood.<sup>1</sup> Researchers point to the need to screen for anxiety, depression, and suicide risk. One study found that screening teens for depression alone didn't identify all kids who were at risk of suicide.<sup>2</sup> The American Academy of Pediatrics (AAP) has issued a recommendation that physicians screen kids age 8 and up for anxiety, and screen adolescents age 12 and up for depression as well as suicide risk, even in the absence of documented symptoms.<sup>3</sup>

Experts also encourage school-based universal screening, where all students — not just those who display symptoms — are asked about their strengths and struggles. While it's not clear how many schools currently screen universally, the majority (55%) of public schools in the U.S. are providing diagnostic assessments to evaluate specific students for mental health concerns.<sup>4</sup> Schools that cannot offer treatment to their students can make a referral to a mental health provider, which often gets students into services more quickly than if they don't have a referral.

The majority of American parents agree that improving mental health screening and treatment would be very or extremely effective in preventing school violence.<sup>5</sup>



Screening Recommendations:  
8+ YEARS --> ANXIETY  
12+ YEARS --> DEPRESSION & SUICIDE RISK

## WHAT'S HAPPENING IN WISCONSIN?

Many Wisconsin schools already conduct wellness screens though the process varies between districts. A variety of screeners are being used. The frequency and duration of screening varies, as do the ages of students (grade levels) covered. Wellness screens are often provided in middle and high school grades. Some schools screen every other year, in Grades 7, 9, and 11, for example, while others screen every grade every year. A growing number of schools are screening earlier than middle school with some working toward implementing wellness screens in all grades (K-12).

## HOW SCREENING WORKS

In middle and high school grades, students typically complete the screening questionnaire on their own. In earlier grades a teacher might complete the screener. Regardless of whether it is a student self-report or a teacher screen, the information collected is only viewed by the professionals involved in the screening process. These might be the school psychologist, school counselor, school nurse, school social worker, or a mental health partner from the community contracted to conduct the screening process.

To deepen equity, schools identify strengths and stressors among individual students as well as groups of students (e.g. females, Hispanic, LGBTQ).<sup>6</sup> Schools can follow up to offer groups of students tailored support, provide whole-school instruction, or facilitate treatment for specific students in need.

Screeners can accurately identify internalizing symptoms such as anxiety and depression among shy or reserved students who might go 'under the radar.' This creates an

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HOW SCREENING WORKS *(cont'd)*

opportunity to help the majority of kids who may not ask for help, or be recognized as needing help.

In the very few cases when a student indicates that they are in immediate danger (currently or recently suicidal), the mental health professional will provide immediate clinical intervention and contact the student's guardian. If the school has contracted with an outside provider, the providers are

usually contracted to follow up 24 hours after screening to help with any crisis planning. Anecdotal evidence from Wisconsin reveals that immediate intervention is required in less than 1% of all cases. In most cases, what students need is help identifying and building their coping skills to effectively handle stress.

## WHAT WE CAN DO

### ➔ FAMILIES:

- Opt in. Allow your child to participate in wellness screens.
- Understand that kids tend to turn to people at school rather than their parents when feeling overwhelmed.
- Partner with your child's pediatrician and school to strengthen your child's coping skills, emotional literacy, resiliency, and ability to manage stress.

### ➔ SCHOOLS:

- Make wellness screens as routine as vision and hearing checks.
- If screening hasn't begun yet, start small. Screen in one grade and build from there. Include questions that ask about student strengths and skills.<sup>7</sup>
- Embed screening in a comprehensive school mental health system that focuses on whole school wellness.<sup>8</sup>
- Follow the Surgeon General's recommendations on what schools can do to address the youth mental health crisis.<sup>9</sup>
- Serve as a gateway to resources and provide referrals to mental health providers.
- Create a positive school culture with strong student-teacher relationships.

### ➔ POLICYMAKERS:

- Promote the integration of primary care and mental health at local and state levels.

- Fund universal wellness screening in schools.
- Expand school-based mental health resources through support for telehealth, student services professionals in schools, and school wellness programming.
- Require insurance companies cover an annual mental health wellness check, as is done for annual physical wellness checks.

### ➔ PROVIDERS:<sup>10</sup>

- Pediatric providers can make mental health screenings as routine as vision and hearing checks.
- Follow AAP screening recommendations, utilize AAP mental health toolkit for pediatricians, and complete training in mental health screening.
- Focus on primary prevention in patients ages 0-5 by emphasizing positive parenting, parental well-being and addressing the social determinants of health.
- Embrace opportunities to train in suicide prevention to increase comfort level in counseling patients and families on suicide prevention.
- Educate families on the importance of screening for lead poisoning which can cause mental health conditions such as ADHD.
- Integrate primary health care as much as possible and specifically to include youth mental health screening.<sup>11</sup>

REFERENCES:

<sup>1</sup> O'Connell, M. E., Boat, T., & Warner, K. E. (Eds.), Preventing Mental, Emotional, and Behavioral Disorders among Young People: Progress and Possibilities, National Academies Press (2009).  
<sup>2</sup> Kemper et al. (2021). Depression and Suicide-Risk Screening Results in Pediatric Primary Care. *Pediatrics*, 148(1). <https://doi.org/10.1542/peds.2021-049999>.  
<sup>3</sup> Recommendations for Preventive Pediatric Health Care. *Pediatrics* July 2022, 150 (1). <https://doi.org/10.1542/peds.2022-058044>.  
<sup>4</sup> IES (June 2022). Report on Indicators of School Crime and Safety: 2021. <https://bjs.ojp.gov/sites/g/files/xyckuh236/files/media/document/iscs21.pdf>  
<sup>5</sup> American Psychological Association. (2023) Monitor on Psychology, 54 (2). <https://www.apa.org/monitor/2023/03/concern-over-school-shootings>  
<sup>6</sup> Moore, et al. (2023). A roadmap to equitable school mental health screening. *Journal of School Psychology*. Vol 96, 57-74. <https://doi.org/10.1016/j.jsp.2022.11.001>.

<sup>7</sup> Best Practices in Universal Social, Emotional, and Behavioral Screening, An Implementation Guide. (2019). <https://smhcollaborative.org/wp-content/uploads/2019/11/universalscreening.pdf>.

<sup>8</sup> Wisconsin Department of Public Instruction, Comprehensive School Mental Health, <https://dpi.wi.gov/sspw/mental-health/framework#msdynttrid=PU-u3C61lVAXdpH0oIMWfz30bx0vghNZeLnujfg4Fw>.

<sup>9</sup> The U.S. Surgeon General's Advisory, Protecting Youth Mental Health. (December 2021). <https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf>.

<sup>10</sup> Rethy J, Chawla E. (2022). How pediatricians can help mitigate the mental health crisis. *Contemporary Pediatrics*, Vol 30 (2).

<sup>11</sup> Substance Abuse and Mental Health Administration. (March 2023). Promoting the Integration of Primary and Behavioral Health Care. <https://www.samhsa.gov/grants/grant-announcements/sm-23-005>