The Role of Educational Institutions and Mental Health in the Lives of Students

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Introduction

COVID-19 was, at first, thought to be nothing more than a small disease. When the first case of the disease in the United States was discovered, there was light panic, but few could possibly imagine how the country would be transformed in a matter of months. For the vast majority of K-12 students, a two-week break from school soon turned into a month, and then a full transition into online learning. School seemed to be the least of the country's worries as deaths soared across America. When fall came around again, most schools chose to remain at least partially online. Although many parents deeply wished for their children to return to complete in-person learning, the pandemic would simply not allow for that.

But what about the students? Students ranging from those in elementary to college have all faced extraordinary challenges, yet many policymakers have ignored how those challenges have affected the youth. In particular, even before the pandemic, the student population suffered from many mental health issues. The pandemic has only exacerbated this. A combination of online learning and staying cooped up at home has contributed to new or worsened stress, anxiety, and/or depression in many students. Yet, few schools have put in place policies to assist those suffering from mental health issues.

Mental Health for Young Students

Even before the pandemic, much of the young adult population suffered from mental health issues (Becker). Suicide was the lead cause of death for people ages 10-24 after unintentional injury, per the Center for Disease Control and Prevention (CDC). The pandemic aggravated these issues, and the effects were drastic. A survey conducted in the first few months of lockdown and remote learning showed 1 in 4 people ages 18-24 "seriously considered" suicide in the past 30 days (Czesler et al.), which is more than 6 times the prevalence of suicidal ideation in adults — about 4% (Piscopo et al.). In a different survey, 80% of college students said they experienced increased sadness and other negative emotions due to the COVID-19 pandemic ("COVID-19 Impact…"). Similar results extended these feelings beyond undergraduate students. A Canadian survey of students ages 12-18 reported increased stress and consequently behavioral concerns, including lack of focus and insomnia (Schwartz et al.). Overall, research has consistently placed young adults as the most vulnerable population for anxiety and depression (Becker).

As teenagers and young adults spend the majority of their time at educational institutions, schools and universities must offer mental health support for the students they serve. However, this is largely not the case. As many students struggle with mental health issues for the first time during the pandemic, with 21% of high schoolers feeling they could benefit from school-based mental health services for the first time (Prothero), schools are failing to respond. A large issue is that many students do not know where to seek help if they need it ("COVID-19 Impact…"). Only 64% of high schoolers who were learning remotely said they had a trusted adult to talk to if they were feeling stressed or having other problems, which was 20% lower than those attending school in-person (Sparks). A contributing factor may be that many faculty members are untrained to handle mental health issues (McKoy). According to a survey conducted by Boston University, less than 30% of their staff received such training, although 70% would like to (McKoy). The failure of schools to provide adequate mental health services, especially during a worldwide pandemic, is deeply troubling.

Hence, institutional changes are needed to combat the student mental health crisis. Though many schools have plans to return entirely in-person for the coming school year, in the event of continued online learning, schools need to ensure students have access to the same resources that they would have if they were at school. Schools should continue to offer meals to low-income students who need them and make sure students have the tools they need for online learning (North). Experts say that having stable access to food is one of the most

important factors for maintaining student mental health (Vox). As the pandemic led to record unemployment and a national recession, schools are one of the few places that can guarantee food to students who need it (Rakesh). Additionally, schools need to devise a plan for students that receive mental and/or behavioral services at school; they need to ensure that telehealth options are available and of the same quality as in-person services. Schools in North Carolina have experimented with telehealth focusing on physical illnesses to great success, and the same should be done with mental and behavioral services (Wicklund). While the economy will improve and schools may return in person, the necessity of some assistance from schools may diminish. However, even solely having options available for struggling students and their families will be of great help in the future, especially if similar emergencies happen.

The Path Forward

Educators also have an important role to play. Some students are not confident enough to voice their concerns, which means teachers need to be perceptive about the behavior of their students. Erratic behavior, fatigue, and signs of discomfort can all indicate a student experiencing distress (Becker). Faculty should also receive training regarding student mental health, including in mental health disorders, behavior management, and social skills (Moon et al.). This would allow them to quickly identify and assist students suffering from deteriorating mental health. Such training is doubly important for distanced learning, where it is more difficult to assess students' well-being, and teachers require support and training.

Of course, teachers should not have to shoulder the burden of managing student mental health alone. Schools need dedicated staff, such as counselors and psychologists, to help students (Prothero). Resources need to be available to students, and they need to be made known, which, lamentably, they are not now (Sparks). Administrators can create online programs to spread awareness and help students online, as well as educate parents and students about practices and programs for mental well-being (Becker). Parents can assist in this process as well by creating conducive learning environments for their children at home and knowing where to seek help (Becker).

Such drastic change would not be without its costs. Luckily, some schools and districts have already committed to using some of their federal relief money for hiring more mental health staff (Prothero), and more should follow suit. They could also use some of the funds to create more mental health programs, invest in telehealth, and train faculty members, as

advocated for earlier (Prothero). Institutions can also seek volunteers and form partnerships with local organizations, potentially cutting costs (Prothero). At the very least, schools can send out surveys, which are a cost-effective way to gauge student mental health needs (Prothero).

Conclusion

There is much to be done when it comes to student mental health. At all levels of schooling, the current educational system is not well equipped to handle mental health issues. Educators need to institute more resources and programs to help struggling students, especially because of the unprecedented pandemic and how it has exacerbated existing mental health problems. By spending more time and resources on assisting students, schools can drastically change the way they handle the mental health of students and create a better environment for the next generation.

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