Preface

Evidence-Based School Psychiatry

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Guest Editors

Our patients engage with teachers, school counselors, and school administrators for approximately 15,000 hours during their childhood and adolescence. Partnering with these committed adults, instrumental in so many children’s lives, only makes good sense. School success is a key factor in child and youth long-term outcomes and mental illness can significantly impact school functioning. While our patients sometimes have complicated constellations of symptoms that interfere with every aspect of their lives, schools afford a consistent and supportive setting for intervention unavailable anywhere else. While this process can be complicated, and some schools have more resource constraints than others, in most cases a teacher, coach, assistant principal, school nurse, or counselor within the building is positioned to help that child in a meaningful and effective way. School personnel are in an ideal position to recognize and intervene for children and youth with mental health difficulties and can be essential allies in changing the trajectory of the vulnerable population we serve.

Child psychiatry continues to flourish, to develop, to become more sophisticated in every arena, as psychopharmacology to psychotherapy techniques become more developmentally sensitive and disorder specific. School mental health has been identified as an emerging priority area globally by governments, researchers, clinicians, and educators. This volume provides a distillation of the current evidence-base in school psychiatry, prioritizing what information most matters to those working in the trenches. The authors are an international group of experts “doing” this work in schools. The articles are designed to be practical tools for clinicians, moving away from various programs or models (including their own) and instead toward “what classroom interventions most make a difference” for addressing anxiety, depression,
inattention, mood regulation, vulnerability to substance abuse, bullying, etc. We have tried to find the best evidence-based support for addressing mental health symptoms in the classroom. Child psychiatrists can then use this information to advance knowledge and capacity in school personnel working with our patients to improve outcomes. While pharmacotherapy is a significant component of treatment for many of our patients, this volume does not focus on such treatments. Rather, this volume attempts to provide what is known in 2011 in terms of school-based interventions for mental health and mental illness that can be implemented by school personnel. Accordingly, while this volume was constructed with child psychiatrists as the primary audience, this volume will also be useful to school staff (including administrators), government (policymakers), and psychologists, social workers, and other clinicians who work with schools.

School psychiatry is a relatively new area of research with some strong evidence-based practices, particularly in addressing specific disorders (section 2), and with some emerging areas that clearly impact mental health outcomes in schools (section 1). Section 1, Contemporary Topics and Current State of Knowledge, includes topics on the frontier of our knowledge base that have broad population impact with direct relevance to mental health outcomes in children and youth. Section 2, Evidence-Based School Approaches to Psychopathology, provides disorder-specific recommendations from evidence-based research to support students with mental illness in the school setting.

Section 1 begins with the Bagnell and colleagues article on mental health literacy, shifting our paradigm to viewing mental health as requiring basic mental health literacy, with the factors important for basic mental health literacy as primary in our considerations as we work with schools, even one patient (student) at a time. Wei and Kutcher then describe the global state of school mental health, including recommendations to connect mental health with wider governmental and educational health agendas. Educational attorney Brunt then summarizes contemporary legal aspects for students with mental health issues, distinguishing between relevant Federal statutes and describing the “Response to Intervention” mandates that direct schools to implement research-based interventions promptly for students manifesting mental health conditions. Englander describes bullying and cyberbullying, how school practices may contribute to bullying, and recommended school responses to bullying types of behaviors. Jellinek describes how schools can mobilize and proceed when students die, amidst diverse circumstances. Bostic and Hart describe biological/psychological/social practices that schools may enact to promote mental health, including adjusting the school day schedule, practices found most (and least) effective for student achievement, and promoting mental health by focusing on variables associated with happiness. The last article in this section by Santor describes the variables important for sustaining meaningful changes within school as mental health interventions or programs are put in place.

Section 2 of this volume, Evidence-Based School Approaches to Psychopathology, addresses the mental health conditions that have been most studied in school settings, often with programs specific to anxiety, trauma, depression, etc, now in place. Each author describes important components for schools considering programs to address mental health issues and the evidence supporting these interventions. In addition, each author provides specific recommendations to help support and improve outcomes for students with these mental health conditions so that clinicians can provide evidence-based strategies to school staff regarding their patients.
The first three articles in this section address students with anxiety. Manassis describes cognitive-behavioral therapy-based school programs implemented to address generalized anxiety symptoms, and specific interventions to address topics such as perfectionism, fear of assignments, and test anxiety. Ryan and Masia-Warner describe effective components of two well-evaluated social anxiety school-based programs, and tactics for developing realistic thinking about social situations, facing social fears, and methods for exposures and reinforcement of desirable social skills to diminish social anxiety. Kataoka and colleagues describe five school-based programs to address posttraumatic stress disorder symptoms, and relevant psychoeducation supports, as well as specific techniques for those working with children exposed to trauma.

The remaining four articles address, respectively, student depression, attention-deficit hyperactivity disorder (ADHD), oppositional/conduct symptoms, substance abuse, and psychosis in the school setting. Calear examines the evidence base for depression prevention programs in school settings and describes specific program components including specific school modifications for students with depression. Eiraldi, Maurone, and Power describe interventions for students with ADHD, including schoolwide strategies such as Positive Behavioral Support, and individual strategies in the classroom for students with ADHD including reinforcement techniques and improving self-management strategies. Eiraldi and colleagues further address developmental differences to consider in recommendations and programming for students with ADHD. Lee describes the complex circumstances contributing to disruptive behavior conditions in students and describes the research base in comprehensive programs such as PATH/Fast Track, Seattle Social Development/Raising Healthy Children, and The Incredible Years. Lee details how behavior analysis can be used to address various disruptive or oppositional behaviors for individual students (eg, aggression at school, calling out in the classroom, refusing to do homework). Yule and Prince describe several prominent substance abuse prevention programs in schools, and the “key variables” of interventions that seem most important for diminishing student substance abuse. They review symptoms of substance abuse in schools, and pragmatic approaches for responding to and supporting students with substance use problems. Stevens addresses psychosis emerging in students and the important distinction between various conditions manifesting as psychosis, providing suggestions for clinicians to help schools plan around the wider needs of individual students exhibiting psychotic symptoms. School-based strategies to decrease and help students to cope better and manage psychotic symptoms are discussed.

Schools educate students and are increasingly recognized as fundamental in the social and emotional development of youth. To cultivate “mentally healthy” adults, schools are being asked to expand beyond the educational curriculum and provide an environment that supports mental health and wellness. These articles provide the current state of knowledge about enhancing mental health, inhibiting the evolution of mental health symptoms, and expanding the strategies and supports for students to manage anxiety, depression, inattention, trauma, substance use, and psychosis better. Admittedly, we are still on the frontier of our understanding of what best to advocate for in schools. However, there is clear evidence that improving the mental health of youth in schools is a necessary and fundamental factor in functional outcomes, and that psychiatrists are in a prime position to advocate for these changes and supports. There is enough science to start now, to partner up, and to ensure our recommendations for schools are empirically informed. Helping our youth succeed is a cooperative effort, and this
volume provides clinicians the empirical tools to be an informed advocate and collaborator in this partnership.

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