

Fact Sheet Number 3 Mental Health and Students in Schools

Students experience a wide range of mental health disorders¹

These include attention deficit hyperactive disorder, conduct disorders, eating disorders, autism spectrum disorders, anxiety, depression, bipolar disorders, substance abuse, and other diagnoses.

- Approximately one in five children has a mental health problem and one half of all lifetime cases of mental health disorders begin by the age of 14.
- It is estimated that between 5 and 9 percent of children aged 9 to 17 experience a serious emotional disturbance that affects their ability to function.

According to the Guilford County School Health Year End Report (2015-16) nurses provided one-on-one counseling sessions to the following number of students:

- * *Mental Health issue.....1,181*
- * *Substance Abuse1,399*
- * *Violence/bullying..... ... 134*

From GCS School Nurse Journal Entry:

“The School nurse discovered that a student had cut herself while in the school bathroom. The student reported that “voices made her do it.” The nurse assessed, administered first aid and made an appropriate referral so that the student would have an emergency mental health evaluation.”

Mental Health disorders are increasingly complex and serious.

- Statistics from the NC Child Fatality Task Force (CFTF) indicate that the number of youth suicides in NC rose by more than one-third between 2013 and 2014, and has doubled since the beginning of the decade.
- In 2016 the CFTF endorsed funding to increase the number of school nurses in the state as part of the Intentional Death Prevention Committee’s ongoing strategy to address youth suicide prevention.

Guilford County school nurses, with school counselors and social workers, provide emergency counseling and referral for students who appear at risk to commit suicide.

From GCS School Nurse Journal Entry

A high school nurse was asked to see a student who expressed suicidal thoughts. The student reported she had suffered a miscarriage one month ago and had previously been on medication for anxiety and depression. The nurse made the appropriate referral to the school counselor and the student was admitted to Cone Behavioral Health for evaluation and treatment.

¹National Association of School Nurses (2013). [Mental health of students](#) (Position Statement). Silver Spring, MD.

Guilford County Project ONE

More journal entries. These describe how nurses

- **Responded to a call** from school staff who found a student in a high school bathroom with a leather belt around his neck. The nurse escorted him directly to the counselor and the Suicide Intervention Team. After an initial assessment, the student was hospitalized in a behavioral health unit for appropriate treatment.
- **Improved the pattern of response** to a mental health crises. When a student experienced symptoms of an anxiety disorder, typically, EMS was called. On the day the nurse was in the building she was able to assess the student and calm her down. The nurse noted that her respiratory rate was returning to normal and eventually the student returned to class. The nurse then contacted the student's parent and encouraged her to seek help with her medical provider. The parent followed through and the student is now receiving much needed treatment. An Anxiety Health Care Plan is in place in the school - ready if needed.
- **Uncovered problems** with substance abuse when a student appeared to be feeling poorly in the classroom. The nurse was asked to assess her symptoms. She discovered that the student had been drinking alcohol and taking prescription medication. The School Resource Officer (SRO) was notified along with administrative personnel. In a separate incident, the nurse was summoned to evaluate a student who had lost consciousness in the school bathroom. This student had a known diagnosis of depersonalization syndrome and dissociative amnesia and was referred for emergency medical evaluation and treatment.
- **Intervened** with a student whose symptoms, shaking and sweating, mimicked physical illness. When questioned the student confessed to not taking his bi-polar medication for the past month but that he had taken a "friend's Xanax®". After completing an assessment, the nurse called 911 for transport to the emergency room. This student had a history of a prior suicide attempt, but now is back in school, on medication and showing improvement.
- **Helped a student cope** with chronic illness. The nurse met with a diabetic student whose anger related to his diagnosis was compromising safety at school. The school nurse was able to address the challenge this presented so that the student was willing to take his medicine, keeping him well and in school during the day. In another case, the nurse intervened with a diabetic student who had a history of a suicide attempt when he intentionally overdosed his insulin. In this incident the student was refusing to go home because he was angry with his parents. The nurse and SRO worked together to transport the student for in-patient behavioral health treatment.
- **Helped families cope** with stress. During a vision screen a student broke down and shared that she was experiencing lots of stress at home because she could not keep up with homework. When the nurse talked with the student's parents, she learned that the family was experiencing many stressors. The nurse referred them for family counseling.
- **Kept kids in school.** After an elementary student was out of school for one year because of school phobia, the nurse joined the school team assisting him in returning to school. The nurse completed the Anxiety Care Plan that would be used by school personnel once he returned.

Good health is necessary for academic success, and nurses make good health happen.