

Spring Newsletter

The information provided in this newsletter is for general informational purposes only and should not be construed as legal advice. The Ohio Coalition for the Education of Children with Disabilities (OCECD) is not comprised of qualified mental health workers, and therefore, the information presented in this newsletter should not be considered a substitute for professional assistance.

Mental Health in Ohio Schools

Many children, parents, and educators in Ohio schools are facing mental health issues. Their emotional health can range from thriving to struggling. For those who are struggling, there are ways to take action and support positive mental health on Ohio school campuses.

The Ohio Coalition for the Education of Children with Disabilities (OCECD) believes there is a need for greater awareness concerning the mental health needs of students with disabilities. The Ohio Coalition's staff not only provides assistance as Information Specialists/Multicultural Information Specialists for



parents/guardians of children with disabilities, but works with their families to help identify support systems to meet the needs of both students and educators with mental health needs.

Ohio Governor Mike DeWine in March 2023 announced that his initiatives to increase Ohio students' access to services that help prevent or intervene in emotional, behavioral, and mental health disorders have hit a new milestone with the release of the 2020-2021 Prevention Services Data Report.

The report shows that 95 percent of Ohio schools offered prevention-focused programs and supports, while more than 81 percent of schools offered prevention-focused curricula.

Other takeaways from the report include:

- Nearly 90% of schools reported partnering with community coalitions, organizations, or other external agencies in the 2020-2021 school year to provide prevention services and resources to families.
- Almost 90% of schools reported efforts to engage parents and families in prevention-focused services.
- More than 93% of schools reported offering some type of prevention-focused professional development and training for school personnel. For the complete report see: <u>Prevention</u> <u>Services Data Report 2020-2021 (ohio.gov)</u>

The Ohio Department of Education, in consultation with the Ohio Department of Mental Health and Addiction Services, describes prevention-focused programs and supports as services that support mental health. These programs and supports may include:

- Community-Based Provider (contractual relationship with mental health specialist, prevention specialist, social worker, counselor, psychologist)
- Educational Service Center (ESC) Employed Providers (mental health specialist, prevention specialist, social worker, school counselor, school psychologist or family liaison employed by the school district)
- Paraprofessional (instructional, behavioral, or other)
- School Administrative Staff (principal, assistant principal, dean, director, coordinator)
- School Nurse
- School Resource Officer
- School-Employed Providers (mental health specialist, prevention specialist, social worker, school counselor, school psychologist or family liaison employed by the school district)





Prevention Services Data Report 2020-2021 (ohio.gov) [p. 9]
Ohio continues to prioritize the strengthening of school-based supports to prevent non-academic barriers to learning. This includes meeting the mental health needs of school staff and students. In 2021, the Ohio Department of Education and the Ohio Department of Mental Health and Addiction Services awarded Governor's Emergency Education Relief (GEER) Funds to Miami University's Center for School-Based Mental Health Programs. This funding was used to develop the Ohio School Wellness Initiative, which focuses on enhancing the full continuum of care of prevention, treatment, and recovery services in Ohio's K-12 schools. This initiative resulted in a comprehensive

model that is available to schools with support and technical assistance from the state funded School-Based Center of Excellence for Prevention and Early Intervention at Miami University.

<u>Center for School-Based Mental Health Programs - College of Arts</u> & Science - Miami University (miamioh.edu)

The Ohio Department of Education and Mental Health and Addiction Services continue to work in partnership to promote the use of evidence-based and evidence-informed practices to prevent mental, emotional, and behavioral health disorders. Schools are encouraged to use prevention programs that have a consistent, positive pattern of results, have been developed based on the best research available in the field, and align with identified strategies and best practices in prevention. Ohio's Evidence-Based Clearinghouse can be used to assist schools in identifying evidence-based programs that will have a positive impact on students. Taken from Prevention Services Data Report 2020-2021 (ohio.gov)

Recently, many therapists work in a new way in Ohio rural school districts that may not have access to local mental health providers. Michael Warner, a school psychologist in a small school district



about one hundred miles east of Columbus, started using advanced telehealth technology. It's part of a pilot telehealth program with the Muskingum Valley Educational Service Center and BroadbandOhio. Together, BroadbandOhio and OCHIN are identifying school districts in Ohio where health care providers are not located nearby, helping those districts connect to broadband, and providing them with up-to-date telehealth technology so they can connect to mental health counselors and school psychologists. In Ohio health care deserts, schools step up | WOSU News cited in Ohio Department of Education Newsclips March 16, 2023.



How to Obtain Mental Health Services In Ohio Schools

In order for a student to receive mental health support in Ohio Schools, parents have the option to discuss their concerns with their child's teacher, the school's guidance counselor, Section 504 Plan Coordinator, School Nurse, or with the special education department. Parents may need to follow-up these discussions with a written request for an evaluation to determine eligibility for mental health services or to add mental health services to an existing IEP or Section 504 Plan. Please note that even though Emotional Disturbance [ED] is one of the thirteen categories of disability specified in IDEA and Ohio Operating Standards, mental health services may be provided under any of the thirteen categories of disability. This also includes a child with a developmental delay in Ohio that can be eligible under that category until their tenth birthday. 2014 Ohio Operating Standards for the Education of Children with Disabilities Section 504 law qualifying disabilities may be found in these resources: What Conditions Qualify for a 504 Plan? (understood.org) Parent and Educator Resource Guide to Section 504 in Public Elementary and Secondary Schools

A child identified with a mental health disorder that interferes with their learning may be determined eligible for mental health services, at no cost, through either a special education IEP or a regular/general education Section 504 Plan. Mental health disorders commonly reported to OCECD by parents of children with disabilities in Ohio schools include: anxiety and obsessive – compulsive disorders, depressive, bipolar and related disorders, somatic symptoms and related disorders, trauma and related disorders, plus many more that can be found in the Diagnostic and Statistical Manual of Mental Disorders: Psychological and mental health counseling often are provided on the school campus, thereby, increasing availability to students in rural or inner city school districts. These services are available to both eligible IEP and Section 504 Plan students.

Ohio Agencies Providing Mental Health Assistance

NAMI Ohio Helpline Resource Guide – NAMI, the National Alliance on Mental Illness, https://www.nami.org, is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. The guide offers resources for assisting individuals who are seeking help for themselves or a loved one who is experiencing mental illness. It includes a downloadable excel sheet with resources, organized by NAMI Ohio Affiliate service area. For Ohio statistics: OhioStateFactSheet.pdf (namiohio.org)



have a mental health condition.

▼ That's more than 4x the population of Cleveland.

It is more important than ever to build a stronger mental health system that provides the care, support and services needed to help people build better lives.





More than half of Americans report that COVID-19 has had a negative impact on their mental health.

In February 2021, 43.2% of adults in Ohio reported symptoms of anxiety or depression.

19% were unable to get needed counseling or therapy.



1 in 20 U.S. adults experience serious mental illness each year.

In Ohio, 478,000 adults have a serious mental illness.



1 in 6 U.S. youth aged 6–17 experience a mental health disorder each year.

113,000 Ohioans age 12–17 have depression.

Ohioans struggle to get the help they need.



More than half of people with a mental health condition in the U.S. did not receive any treatment in the last year.

Of the **537,000 adults in Ohio who did** not receive needed mental health care, 35.4% did not because of cost.

6.7% of people in the state are uninsured.



Ohioans are over 3x more likely to be forced out-of-network for mental health care than for primary health care — making it more difficult to find care and less affordable due to higher out-of-pocket costs.

2,385,144 people in Ohio live in a community that does not have enough mental health professionals.

- Many mental health conditions first appear in youth and young adults, with <u>50%</u> of all conditions beginning by age 14 and 75% by age 24.
- One in six youth have a mental health condition, like anxiety or depression, but only half receive any mental health services.
- Early treatment is effective and can help young people stay in school and on track to achieving their life goals.
- Schools can play an important role in helping children and youth get help early. School staff —
 and students can learn to identify the warning signs of an emerging mental health condition
 and how to connect someone to care.
- Schools also play a vital role in providing or connecting children, youth, and families to services. School-based mental health services bring trained mental health professionals into schools, and school-linked mental health services connect youth and families to more intensive resources in the community.
- School-based and school-linked mental health services reduce barriers to youth and families
 getting needed treatment and supports, especially for communities of color and other
 underserved communities.
- When we invest in children's mental health to make sure they can get the right care at the right time, we improve the lives of children, youth, and families — and our communities. Cited from Mental Health in Schools | NAMI: National Alliance on Mental Illness

An inadequate mental health system affects individuals, families and communities.



High school students with depression are more than 2x more likely to drop out than their peers.

51.8% of Ohioans age 12–17 who have depression **did not receive any care** in the last year.



10,655 people in Ohio are homeless and 1 in 5 live with a serious mental illness.



On average, 1 person in the U.S. dies by suicide every 11 minutes.

In Ohio, 1,838 lives were lost to suicide and 461,000 adults had thoughts of suicide in the last year.

1 in 4 people with a serious mental illness has been arrested by the police at some point in their lifetime – leading to over 2 million jail bookings of people with serious mental illness each year.

About 2 in 5 adults in jail or prison have a history of mental illness.





7 in 10 youth in the juvenile justice system have a mental health condition.



NAMI Ohio is part of NAMI, National Alliance on Mental Illness, the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness.

This fact sheet was compiled based on data available in February 2021. For full citations, visit: nami.org/mhpolicystats.

- OhioMHAS Ohio Department of Mental Health and Addiction Services. OhioMHAS
 coordinates a statewide system of mental health and addiction prevention, treatment, and
 recovery services. http://mha.ohio.gov
- OSPF The Ohio Suicide Prevention Foundation is a prevention, education, and resource
 organization focused on promoting suicide prevention as a public health issue and advancing
 evidence-based awareness, intervention, and methodology strategies which will support all
 Ohio-based suicide prevention efforts. http://www.ohiospf.org
- OACHBA The Ohio Association of County Behavioral Health Authorities (OACBHA) is the statewide organization that represents the interests of Ohio's county Alcohol, Drug Addiction, and Mental Health Boards at the state level. https://www.oacbha.org
- The Ohio Council of Behavioral Health & Family Services Providers is a statewide trade and advocacy association that represents 150 private organizations that provide alcohol and other drug addiction, mental health, and family services. http://www.theohiocouncil.org/
- Disability Rights of Ohio DRO provides legal advocacy and assists parents of children with disabilities dealing with mental health or special education issues.
 http://www.disabilityrightsohio.org
- Ohio Psychiatric Physicians Association The Ohio Psychiatric Physicians Association is dedicated to promoting the highest quality care for people with mental disorders and to serving the professional needs of Ohio's psychiatric physicians.

Ohio Department of Education Resources

- Returning to School: Supporting the Social, Emotional and Behavioral Health of Students and Staff
- Resources | OSWI (ohioschoolwellnessinitiative.com)
- Ohio's Social Emotional Learning Standards Introduction and Glossary
- ODH Health & Prevention Guidance for K-12 Schools
- Medicaid Eligibility Resources <u>Eligibility Resource Guide</u>
- Clinical Interview <u>Mental Status Report Form</u>
- See Resources | NAMI Ohio for more information.

Mental Health and Anxiety



Let's take a closer look at one of the most prevalent mental health issues reported to the OCECD Information Specialists assisting parents—Anxiety.

Anxiety in a child can be an overwhelming or irrational fear of everyday classroom interactions. Anxiety disorders are the most common psychiatric illnesses affecting children and adults, with even some preschool children being identified with anxiety.

If parents/guardians think their child is struggling with anxiety, they should consider talking it over with their child's teacher, school psychologist, or campus based mental health counselor. Parents have the option to request a Functional Behavior Assessment (FBA) to determine the underlying causes/triggers/antecedents of their child's anxiety and their need for additional support in the classroom, so that their anxiety does not interfere with their life at

school and at home. For school behaviors, the FBA can be used to develop a Behavior Intervention Plan (BIP). Anxiety may be misidentified when it makes a student irritable or noncompliant with requests from teachers on completing classroom assignments. These behaviors may be the anxiety manifesting itself when the student is simply lacking the skills to deal with their anxiety or depression.

Mental Health and Autism



Mental health is the defining public health crisis of our time, according to U.S. surgeon general Dr. Vivek Murthy. Recent research shows that approximately 70 percent of the autistic population has at least one, if not multiple, co-occurring mental health conditions. Services to address this overwhelming concern are lacking and those that are available can be hard to access. At Autism Speaks, they are committed to addressing mental health issues as an organization, as a community, through the collaborative work of their Autism Care Network and as a direct resource through their Autism Response Team.

Mental Health and Social Media



Social media also contributes to student anxiety. In Ohio, most teens have access to a smartphone and social media. From parent reports, one of the biggest negative factors with social media is FOMO (Fear of Missing Out). Social media may make students feel anxious when they compare their posts to the posts of friends and classmates. Social media cyberbullying and harassment via social media are also prevalent in Ohio schools. It is easier to attack from behind a screen.

If your child is a victim of social media cyberbullying or harassment, child and school psychologists recommend reducing the child's use of social media. Parents need to encourage their children to stop mindless scrolling through Facebook or other media platforms' news feeds. They need to stop checking for likes and comments. Encourage taking a break from cell phones, place parental controls on cell phones, and do something physical,

especially outside, with your child. Tips for students to help overcome negative self-talk <u>Overcoming Negative Thoughts - MHA Screening (mhanational.org)</u>

Mental Health and Cyberbullying and Bullying

Bullying is NOT "part of growing up." It has been a problem in schools for decades and in everyday society even before that. Over time, however, as culture has changed, the means through which this malignant social behavior is applied have gotten more and more sophisticated, and the stakes have gotten much higher for victims and their loved ones. <u>Cyberbullying, Addiction, and Suicide</u> among Youth - Guide 2022 - Drug Rehab USA

Bullying can have devastating effects on the mental health and wellbeing of youth, especially if it goes unnoticed or is not addressed. It is imperative that school districts seek ways to prevent it from evolving into a crisis like violence, shootings, or suicide.

Ohio has anti-bullying laws. Schools are to have policies for reporting bullying and cyberbullying in their student handbook and on their websites.

BULLYING ODE Anti HIB Safety Plan.pdf
BULLYING ODE Anti Bullying Guidance.pdf
BULLYING ODE Anti-Harassment, Anti-Intimidation or Anti-Bullying
Model Policy.pdf

Jill Jackson, Ohio Dept of Education. BULLYING (STUDENT TO STUDENT) COMPLAINTS:

Please contact Jill Jackson at jill.jackson@education.ohio.gov or 614-466-9540



The Bull Stops Here: Understanding Bullying and What You Can Do to Help

<u>Letter to discuss bullying with your school district.</u> Building Communication Through Letter Writing [publication] pp.10-11

Office for Civil Rights [OCR] bullying resources

Disability Rights Ohio bullying and harassment resources <u>Disability Rights Ohio - Home</u>



Mental Health and Learning

Undiagnosed or untreated mental health disorders can significantly interfere with a student's ability to learn, grow, and develop. Since children spend much of their productive daytime hours in school, the educational setting offers a unique opportunity for early identification, prevention, and intervention that serve students where they already are. In 2019, NAMI reported that 15% of adolescents aged 12-17 receive mental health services at school compared to 17% who saw a



School based mental health services are most effective if provided by professionally trained mental health professionals who serve students on the campus, rather than in their private office off campus. When the therapist is able to observe the student in their school environment, they are able to observe the student and their interaction with peers and teachers. Untreated mental illness leads to high rates of school dropout, unemployment, substance use, arrest, and early death. In fact, suicide is the second leading cause of death. NAMI of Ohio, the National Alliance on Mental Illness, reports that one in six U.S. youth between the ages of 6-17 experience a mental health disorder each year, and half have mental health conditions that begin by age 14.

ADHD, behavior problems, anxiety, and depression are the most commonly diagnosed mental health disorders in children. OCECD parent calls confirm that anxiety has a high frequency of being reported as coexisting with another disability such as ADHD. Yet, only about half of youth with mental health conditions received any kind of treatment in the past year. www.namiohio.org Mental Health in Schools | NAMI: National Alliance on Mental Illness

Mental Health and Social Emotional Learning



In light of the social-emotional needs of students in Ohio, Ohio's Whole Child philosophy developed Social-Emotional Standards in June 2019.

<u>Ohio's Social Emotional Learning Standards Introduction and Glossary</u> [excerpt]

"What do we mean by social-emotional learning? Successfully interacting with other people is essential to the effective functioning in school, workplace, and even a family. Children need to know how to successfully interact with each other, establish and maintain positive relationships, feel and show empathy, understand and manage their emotions and set and achieve positive goals. Social-emotional learning improves children's mental health..." [Page 1]

Explicit social and emotional learning (SEL) instruction might include lessons on how to identify and label your feelings, build your emotional vocabulary, consider other people's perspectives. For more information on SEL in the classroom.

Another resource that addresses social-emotional learning can be found in a Child Mind article by Jessica Souza, What Is Social and Emotional Learning? - Child Mind Institute [March 7. 2023] Social and emotional learning (SEL) is a term for the way children acquire social and emotional skills. It includes things like managing stress and anxiety that may result in mental health needs. Ohio developed Social-Emotional standards because issues with mental health can interfere with their functioning in school and their ability to learn.

Children with disabilities, in particular, need to be taught social and emotional skills they are lacking, to better manage their emotions, in order to get along with other kids and family members, and to succeed in school.

"These are not things that humans naturally just know," adds Caroline Mendel, PsyD, a clinical psychologist and Senior Director of Clinical Services, School, and Community Programs at the Child Mind Institute. "They do need some explicit teaching strategies to manage their emotions and impulses, manage stress, and set personal goals. It's been shown that SEL can help children feel more confident and happy in the classroom and in life in general. Research data supports the theory that SEL consistently has positive effects on students' success — from their academic performance and behavior to their ability to manage stress. Research has shown that these long-term benefits are consistent



across demographic groups — meaning that SEL instruction can support the positive development of children from these skills.



Social Emotional Learning and Parents

How can parents help teach social emotional learning strategies? Since parents are their child's first teachers, they can model and reinforce SEL competencies at home. Another strategy is to work in partnership with other families and schools to learn from each other about what works best for each individual child. For example, a parent could share with the teacher that their child uses deep breaths to handle emotions at home and see if there's a way to integrate that practice into the classroom when needed. For more resources on supporting social-emotional development at home, please check out <u>Confident Parents Confident Kids</u>.

Mental Health and Suicide: Summary of Data 2011-2021



Nearly 60% of female students and nearly 70% of LGBQ+ students experience persistent feelings of sadness or hopelessness. 10% of female students and more than 20% of LGBQ+ students attempted suicide. Hispanic and multiracial students were more likely than Asian, Black, and White students to have persistent feelings of sadness or helplessness. Black students were more likely than Asian, Hispanic, and White students to attempt suicide.

While the percentage of Black and White students who attempted suicide increased, the percentage of Asian students who attempted suicide decreased, and the percentage of Hispanic and multiracial students who attempted suicide did not change.

YRBS Data-Summary Trends

What if suicide is a concern?

If your teen is severely depressed and has had <u>thoughts of suicide</u>, your pediatrician can help you create a safety plan. This will outline steps for you and your child to take if their symptoms worsen.

Your doctor will also advise you on crisis resources you can use if your child experiences a <u>mental health emergency</u>. Also, you can always access free, confidential, expert help by calling, texting, or chatting with the <u>988 Suicide & Crisis Lifeline</u>. Texting "HOME" to 741741 reaches the <u>Crisis Text Line</u>.

Mental Health and Depression

Excerpted from <u>Depression in Teens or Just Moodiness? – Cleveland Clinic</u>



Signs of depression in your teen may include:

- Changes in mood, like acting more sullen and irritable.
- Changes in behavior, like sleeping more or eating less.
- Withdrawing from family, friends or activities they used to enjoy.
- Problems in multiple areas of life, like friendships, family relationships, academic performance and leisure activities.
- Signs of cutting and other forms of self-harm, like hair-pulling or skin-picking. Drug and alcohol use.
- Sudden lack of confidence or significant drop in self-esteem.
 Expressions of hopelessness.
- Explicit talk of <u>suicide</u> or more subtle comments like, "I wish I weren't here."

Treating Depression in Teens

If you're worried about trying to figure out a course of treatment for your depressed teen or to figure out whether they're depressed to begin with, take a step back and turn to a source you already know well: your pediatrician.

You may feel inclined to find your teen a therapist ASAP to start talking it out, but pediatric psychologist <u>Ethan Benore, PhD</u> says it's best to start with your pediatrician or family doctor. "They've had a longer-term relationship with you, so they understand you and your child and how they're developing," he notes.

Your child's doctor is trained to help identify depression in children and teens. The American Academy of Pediatrics (AAP) <u>guidelines</u> encourage pediatricians to conduct depression screening for children ages 12 and up. That means you can expect them to ask your child about depression as part of routine exams.

Teen Depression: More than just moodiness Being a teerniger can be tough, but it alloudint feel hopeless. If you you not be tough the feel alloudint feel hopeless. If you you're not able to concernitate or do the things you used to enjoy, talk to a structed adult about depression. Do I have depression? O by you often best and, anxious, the second of the things you used to enjoy, talk to a structed adult about depression. Here you lost interest in demands. O by you often best and the second of the

<u>Depression in Teens or Just Moodiness? - Cleveland Clinic</u>

Mental health is a critical part of everyone's well-being, including teens. Having routine screenings for depression can help keep the lines of communication open and ensure that your child is healthy and supported.

"To learn more on this topic from Dr. Benore, listen to the Health Essentials Podcast episode, "The Teen Mental Health Crisis." New episodes of the Health Essentials Podcast publish every Wednesday.

NIMH » Teen Depression: More Than Just Moodiness (nih.gov)

<u>Teen Depression: More than just moodiness (nih.gov).</u>

Mental Health and REACH Institute



The REACH Institute is a resource for families of children with mental health concerns, information on advocating for your child, mental health needs, mental health websites, separating fact from fiction. REACH provides thousands of primary care providers, therapists, and health care institutions with training in the best evidence-based therapies in order to better diagnose, treat, and manage child mental health issues. One in five children experience mental health issues, but only 20% receive the comprehensive treatment they need. The Reach Institute

Conclusion

When we invest in the mental health of Ohio's children, we ensure that they can get the right care at the right time, we improve the lives of children, youth, and families — and we improve our communities. To be successful, Ohio schools play a vital role in providing or connecting children, youth, and families to mental health services. Support for local and state sponsored school-based mental health services increases access to appropriate mental health services and reduces barriers to delivering mental health services in schools.

Family Resources

General

- Mental Health Resources | Center for Parent Information and Resources (parentcenterhub.org)
- www.healthfinder.gov and in Spanish www.healthfiender.gov/espanol
- Children's Mental Health <u>Buzz | Children's Mental Health | Center for Parent Information and Resources (parentcenterhub.org)</u>
- Mentalhealth.gov English and Spanish Mental Health.gov in English and Spanish | Center for Parent Information and Resources (parentcenterhub.org)
- Supporting Child and Student Social, Emotional, Behavior and Mental Health <u>Supporting Child</u> and Student Social, Emotional, Behavioral and Mental Health | Center for Parent Information and Resources (parentcenterhub.org)
- Start Talking | Ohio.gov On Our Sleeves
- BOLD Beginning! | Ohio.gov Crisis Resources
- Crisis Intervention Team | NAMI Ohio
- Helping at Home: Tips for Parents | Mental Health America (mhanational.org)
- <u>Understood.org</u> is the resource that helps the 70 million people in the United States with learning and thinking differences anticipate the challenges, barriers, or opportunities in life and confidently reach their potential. https://www.understood.org/

Anxiety

- Anxiety in Children
- What To Do and Not Do When Children Are Anxious
- 5 Ways to Support Your Child When They're Feeling Anxious
- Parents Passing Anxiety to Children | Anxious Parents | Child Mind Institute

Autism

OCALI (formerly Ohio Center on Autism and Low Incidence) www.ocali.org
Milestones Autism Resources

Autism Society of Ohio www.autismohio.org

Depression/Suicide

- Understanding Depression in Kids
- · What to do if you think your child is depressed
- · Kids and Suicide: What You Should Know

Stress and Self-Esteem

- Know-Our-Youth-Are-Beyond-Stressed-1.pdf (db.k12.oh.us)
- How to help kids who are too hard on themselves
- How to Help Children Calm Down Child Mind Institute
- Social Media and Mental Health for Teens with ADHD: Self-Esteem Help (additudemag.com)How to Help Kids Learn From Mistakes
- How to Improve Self Esteem In Kids with ADHD: Confidence Boosts for Parents (additudemag.com)
- Top 10 Stress Management Techniques for Students (verywellmind.com)

Black, Indigenous, and People of Color

- NIMH » Información en español sobre la salud mental (nih.gov)
- National Minority Mental Health Awareness Month (hhs.gov)
- National Minority Mental Health Awareness Month Resources and Publications (hhs.gov)
- How to Teach Kids About Microaggressions
- Supporting Immigrant Children's Mental Health
- Mental Health Challenges We R Native
- Therapy For Black Girls

Student Resources

Mental Health

- · Mental Health is Health
- Seize the Awkward | Talk With A Friend About Mental Health · https://seizetheawkward.org/
- FACT SHEETS Social Media and Mental Health for Youth (mhanational.org)
- Teen Depression.pdf Google DriveTalking to your parents about getting help
- Mental Health | DASH | CDC
- Mental Health By the Numbers | NAMI: National Alliance on Mental Illness

Multicultural Resources

- · How Schools Can Address Black Students' Unmet Mental Health Needs | Teach For America
- · Mental Health Among Asian-Americans (apa.org)
- · Mental Health in Schools: Black and Hispanic Students Say They Have Less Support (edweek.org)
- · Hispanic/Latinx | NAMI: National Alliance on Mental Illness

· La salud mental—información y recursos - MHA Screening (mhanational.org)

LGBTQ+

- LGBTQI | NAMI: National Alliance on Mental Illness
- LGBTQ+ Communities and Mental Health | Mental Health America (mhanational.org)

Stress

<u>062519_tMHFA_StressTips_Infographic_v2.png - Google Drive</u>

Substance Use

- Teen Corner (Alateen) Al-Anon Family Groups
- High Risk Substance Use in Youth | Adolescent and School Health | CDC
- Brain Stimulation and ADHD / ADD: Cravings and Regulation (additudemag.com)

Bullying

- What Is Bullying | StopBullying.gov
- What Is Cyberbullying | StopBullying.gov
- Bullying Prevention Resources from the Committee for Children
- Bullying Resources for Educators and Parents
- Stopbullying.gov Resources
- National Bullying Prevention Center
- National Association of Elementary School Principals
- American Academy of Child and Adolescent Psychiatry
- Bullying | Center for Parent Information and Resources
- Children's Safety Network
- Bullying Crisis Text Line (Text HOME to 741741)
- HelpChat Line STOMP Out Bullying
- From Cyberbullying, Addiction, and Suicide Among Youth Guide 2022 Drug Rehab USA

Self-Esteem

- <u>FACT SHEETS Fitting In and Self-Esteem for Youth (mhanational.org)</u>
- Steps To Building Self Esteem | Cooperative Extension | University of Delaware (udel.edu)

Recognizing and addressing the mental health needs of students is essential for their overall well-being and success. By acknowledging these needs and providing the necessary support, we demonstrate our commitment to caring for the whole child. It is crucial to remember that there are ample resources and services available to assist those who may require assistance. It is important for families to know that they are not alone on this journey, and that a network of individuals is ready and willing to lend a helping hand. Together, we can make a positive impact on the lives of students and ensure a brighter future for all.



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WE WANT YOUR FEEDBACK

www.ocecd.org





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