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Early identification of mental health problems in schools: The status of instrumentation

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Abstract

When embedded within a continuum of mental health services including both prevention and treatment, school-based mental health identification programs can promote improved academic and mental health functioning among students. This article describes the scientific status of assessment instrumentation that may be used for early mental health identification in schools. Currently available instruments are described in terms of their ability to accurately detect youth with mental health problems. Implications for selecting mental health screening and assessment instruments and integrating them into schools are discussed. Finally, a range of approaches to early identification in schools as well as some of the broader ethical and practical issues related to the integration of these strategies into a school-wide continuum of services are presented.

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The goal of mental health services in schools is to assist students in succeeding both academically and emotionally. Traditionally, mental health services have strived to meet this goal by providing special education evaluations, testing, consultations with teachers and administrators, and time limited individual and group counseling. However, these services are often narrowly constrained and separated from the primary educational

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activities of the school. Much recent discussion has focused on the importance of expanding and broadening school mental health services and fully integrating them into school systems (Adelman & Taylor, 2000; Weist, 1997).

At the same time, research revealing high rates of unidentified and untreated youth with mental health problems (e.g. Katoka, Zhang, & Wells, 2002) has prompted a surge of national interest in improving the early and timely identification of mental health problems among children and adolescents. In particular, school-based, voluntary, universal mental health screening programs have been suggested as one way of accomplishing this goal (e.g., New Freedom Commission on Mental Health, 2003; United States Public Health Service, 2000). However, the implementation of universal screening for mental health problems is different from universal screening for other conditions in that it is not yet possible to identify asymptomatic youth and offer interventions that would prevent the onset of symptoms.

Current screening methods rely on youth having some level of symptoms or impairment in functioning in order to identify them as being at risk and in need of further evaluation and possible treatment. Clearly, the ability to identify youth at early stages of disorder and offer effective treatment is very important, yet there is much debate about the extent to which currently available methods can accomplish this goal and whether the benefits are worthwhile when weighed against potential risks associated with it. Practical concerns involve questions about the types of conditions that should be targeted, about the most appropriate strategies and methods for accurately identifying youth in need of treatment, and about how to integrate these programs within schools. In addition, concerns have been expressed that screening may unnecessarily label children with mental health diagnoses, identify more youth than a school or community can treat, and may lead to recommendations for medication which could place students at risk for adverse effects.

Universal screening for mental health problems in schools is one strategy for early and timely mental health identification, yet given the complex issues raised by screening, it may be helpful to recognize that it is not the only strategy available. In addition, it may be helpful to think of universal screening as one part of a continuum of early identification approaches. Traditional prevention paradigms suggest a range of strategies for early identification from universal, school-wide, screening to comprehensive diagnostic assessments of children and adolescents with significant problems. Accordingly, a variety of mental health screening and assessment instruments have been developed that may be appropriate at these different levels of prevention.

The purpose of this article is to describe the scientific status of assessment instrumentation that may be used for the range of early mental health identification strategies available to schools. Further, the concepts of efficacy and effectiveness are transported from the treatment outcome literature to the research on mental health assessment instruments. As such, currently available instruments are described in terms of their efficacy or, in other words, their accuracy to detect youth with mental health problems, and in terms of their effectiveness which refers to issues of instrument feasibility and acceptability when used in practice. Finally, the article presents the range of approaches to early mental health identification in schools as well as some of the broader ethical and practical issues related to the integration of these strategies in schools. Importantly, the article suggests that universal mental health screening and other early identification strategies are most likely to have a public health benefit when they are embedded within a continuum of school-based mental

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