

The Case for Screening and Early Identification¹

Unidentified youth mental health problems and suicide are at a point of crisis for our nation.

- › The Surgeon General's Report estimated that up to 20% of youth experience mental health problems within any given year, and approximately 75 to 80% of youth in need of treatment and support services do not receive adequate care. Most do not receive services at all.
- › A wide range of negative consequences often accompany youth mental health problems that are untreated, including suicide, substance abuse, inability to live independently, involvement with the correctional system, failure to complete high school, lack of vocational success, and health problems.
- › More than 3,000 children, adolescents and young adults, ages 10-24, take their own lives each year in the U.S. That's the human loss equivalent of September 11th repeating itself every year.
- › Suicide is the third leading cause of death for young people and is considered a public health crisis by the Centers for Disease Control and Prevention and by the World Health Organization.
- › Approximately 90% of youth who die by suicide suffer from diagnosable mental illness. About 63% of those youth experience symptoms of mental illness for more than a year before their deaths, indicating a real opportunity to identify and help at-risk youth before it is too late.

Schools have an important role to play in screening students for mental health and suicide risk.

- › School mental health programs have been shown to be effective in identifying at-risk students early, thereby reducing externalizing and internalizing behaviors, school absenteeism, and school drop-out, as well as improving academic performance.
- › For the small percentage of youth who currently receive mental health services, most are served within the school setting. School-based services are uniquely positioned to reach youth who otherwise may go without needed care.
- › Between 40 and 60% of families that seek community mental health services for their youth terminate treatment prematurely. Families have reported that accessing community mental health services is too difficult, too stigmatizing, too expensive, and too frustrating due to fragmented services.
- › Providing mental health services within schools allows contact with youth during times of crisis, reduces stigma, minimizes disruption to academic studies, and reduces financial costs.

Screening is a safe and effective way to identify at-risk youth and direct them to appropriate services.

- › Screening has been recognized nationally as an effective way to promote early identification of youth mental health problems, helping to identify problems before they develop into more serious conditions. One study showed that screening identified 65% of those who went on to experience recurrent depression or become suicidal in young adulthood.
- › TeenScreen has been nationally recognized as a model screening program. For more information on the TeenScreen program, visit www.teenscreen.org
- › Screening finds high school students that are silently suffering from life-threatening mental health problems. A study of approximately 2,000 high school students that participated in a TeenScreen assessment found that:

- › Approximately 75% of students who were contemplating suicide and 50% of students who had made prior suicide attempts were not previously known to be having problems by school personnel.
- › Nearly 70% of students found to be suffering from depression were also unidentified previously.

- › Emerging research indicates that intervening early can help prevent mental health problems from worsening and can lessen long-term disability brought on by mental disorders.
- › One sure way to reduce the financial and social costs of mental health services is to prevent or minimize the risk of mental health problems, or intervene early in the course of mental illness to avoid chronic problems that are difficult and expensive to treat.
- › Screening is both time and cost effective. The majority of students will spend only 10-15 minutes in screening, with a maximum of one hour for those who go on to the clinical interview segment of the screening process, which keeps screening costs very low.

Principles of quality screening programs.

- › Screening must be voluntary.
- › Confidentiality must be protected.
- › Screening staff and volunteers must be qualified and trained.
- › Youth identified through screening as needing further evaluation should be offered a referral to an appropriate mental health service provider.
- › Parents of identified youth must be informed of screening results and referral recommendations, and offered assistance in securing an appointment for further evaluation.

¹ This advocacy brief was developed for the Ohio Mental Health Network for School Success (OMHNSS), by Center for School-Based Mental Health Programs (CSBMHP) graduate research assistants Raven Cuellar, Jen Elfstrom, Holli Sink, Angela Volz, and Karin Vanderzee. A copy of the brief and an expanded report of all OMHNSS advocacy briefs (with reference citations) are available at <http://www.units.muohio.edu/csbmhp/network/index.html>.