

## **Hypersensitivity to Student's Emotional Reactions Can Be Harmful**

In whatever form the new school year begins, the number of students manifesting learning, behavior, and emotional problems will be on the up-swing. School staff and those caring for youngsters at home are being especially alerted about mental health concerns. The intent is to increase awareness; the danger is that it will produce a hypersensitivity that will have a variety of negative effects. Caution is in order about overpathologizing problems and misinvesting in universal screening.

**Overpathologizing Problems** -- Care must be exercised to avoid *mislabeled* previous commonplace problems and those resulting from the impact of COVID-19 as pathological conditions. The reality is that in many districts (and especially in schools serving low-income families) a large proportion of students have not been doing well for some time.

In this context, it is well to recognize that a long-standing concern for schools is the widespread misuse of the terms ADHD and LD. This includes the problem of nonprofessional applications of these labels, and the reality of the number of misdiagnoses. Remember that at one point in time, almost 50% of those assigned a special education diagnosis were identified as having learning disabilities. This contributed to the backlash to LD seen in the last reauthorization of Individuals with Disabilities Act. Despite the backlash, the learning disability diagnosis still accounts for the largest number of students in special education.

A similar concern has arisen about the increasing number of students manifesting "garden-variety" misbehaviors who are misdiagnosed as ADHD. Reports appear rather regularly that suggest a growing backlash, especially as related to the increasing use of medication to treat these youngsters.

**Universal Screening for Mental Health Concerns** -- Related to mislabeling is the debate about universal (first-level) mental health screening of students (e.g., surveys to identify trauma, depression, etc.). As with most such debates, those in favor emphasize benefits (e.g., "Screening lets us identify problems early and can help prevent problems). Those against stress various downsides. Particular concerns are that large-scale screening programs can produce many false positives, lead to premature prescription of "deep end" interventions, focus mainly on the role of factors residing in the child and thus collude with tendencies to "blame victims," and so forth. Concerns also arise about parental consent, privacy and confidentiality protections, staff qualifications, involvement of peers, negative consequences of monitoring (especially for students who are false positive identifications), and access and availability of appropriate assistance.

The reality is that teachers and parents readily identify students whose emotional reactions are of concern and those whose learning and behavior require attention. *The need in such instances is not so much for screening but for assistance.*

These are matters addressed in the Center's new online resource entitled: *Embedding Mental Health as Schools Change* – access it from the Center's website by going to [http://smhp.psych.ucla.edu/improving\\_school\\_improvement.html](http://smhp.psych.ucla.edu/improving_school_improvement.html).