

The Influence of Mental Health on Academic and Social Success in Students

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Abstract: Over the last two decades, the proportion of children with mental health issues such as depression, anxiety, and behavioural disorders has steadily increased. The purpose of this literature review is to look at the prevalence and risk factors for mental health disorders in school-aged children, as well as the effects these conditions have on their social success and academic achievement, and to suggest ways to support children's success while also improving their mental health. Because a child spends a significant amount of time at school, educators who are aware of mental health illnesses will be better able to support and incorporate techniques into their schools and classrooms to support all students. Teachers play an important role in helping children improve their academic performance.

A student's success in school and in their social lives is greatly influenced by their mental health, which is an essential part of their general well-being. The purpose of this research paper is to examine the relationship between students' academic and social success and their mental health. The study will concentrate on how different mental health conditions, such as anxiety, depression, and stress, impact students' academic performance, social skills, and general well-being.

This paper will review various studies on the topic and explore different factors that influence the relationship between mental health and academic and social success. These factors include age, gender, race, socioeconomic status, and academic level. The research will also analyse the impact of mental health interventions and support services on student success.

The results of this study can improve understanding of the significance of student performance by educators, parents, and mental health experts. The research can also be used to help students improve their academic and social outcomes and increase their mental health through effective techniques and interventions. Overall, this research paper emphasises the significance of mental health as a critical factor in academic and social success and advocates for increased awareness and support for students' mental health.

Keywords: Academic achievement, adolescent, children, educators, mental health, social emotional learning, school-based counselling, mindfulness-based interventions, social success

1. Introduction:

The consequences of poor mental health are frequently hidden behind what many educators consider to be inappropriate behaviours in their students. Too often, when educators see students misbehaving, their first thought is, "Stop!" They immediately assume that this child must correct their behaviour. The first thing they should consider is, "What is causing this child's behaviour?" Some children's behaviour may be beyond their control.

According to the Centers for Disease Control and Prevention (2021), one in every six children aged two to eight (17.4%) had a diagnosed mental, behavioural, or developmental disorder, and these figures rise as students get older, with diagnoses becoming more common in the 12 to 17 age range.

Based on this data, it is reasonable to assume that a typical elementary classroom will contain students with a diagnosed mental health disorder. As mental health disorders in children become more common, administrators are concerned that teachers are not properly trained to identify or support these children (Ghandour, Sherman, et al., 2019). Teachers frequently attend classes to learn more about how children deal with mental health issues, but they are not required to do so. The issue is that an increasing number of students are being diagnosed with mental health issues, which are affecting their academic and social success in school. The goal of this literature review is to determine the effects of students' mental health on their academic and social success. The findings of this study will show what teachers can do to help students with mental health issues succeed.

Educators have many students in their classrooms, and it is their responsibility to understand everyone and create an environment in which each student can succeed. If educators do not take the time or do not have the resources to learn about the effects of mental health, they will be unable to support all of their students adequately.

This literature review looks at peer-reviewed articles from the last ten years that focus on the effects of mental health on children. This review will first look at the prevalence of mental health problems in children aged 6 to 17 years old. The literature review will then look at the most common mental health disorders, the risk factors that may cause them, environmental factors, and whether there is a link between certain demographics. The following section of the literature review will look at the effects mental health can have on students' academic, social, and behavioural outcomes. The final section of the literature review will discuss how teachers can better prepare themselves to support students with mental health issues, with a focus on teaching strategies and tools that can help students with mental health issues.

2. Literature Review:

2.1 Factors Influencing Childhood Mental Health

For better or worse, a child's environment shapes and influences their development and mental health (Hosokawa & Katsura, 2020; Flouri et al., 2014; Milburn et al., 2019; Baier et al., 2019; Waenderlund et al., 2016; Molano et al., 2018; Busby et al., 2013). The majority of a child's environment consists of their home, school, and neighbourhood.

2.2 Children of Mentally Ill Parents

It has been discovered that children of parents with mental health problems are more likely to experience mental health symptoms than children whose parents do not have mental health problems (Plass-Christl et al., 2017). In a study of 2,891 mothers and their children, Leis et al. (2014) discovered that prenatal depression increased emotional and behavioural problems in middle childhood. Furthermore, they discovered that prenatal anxiety increased total difficulties in middle childhood. Interestingly, they found no increase in childhood problems for children whose mothers had prenatal depression and anxiety compared to children whose mothers did not have prenatal depression or anxiety. Plass-Christl et al. discovered similar findings in a study of 325 children and adolescents who had a parent with mental health problems (2018). They specifically looked to see if the child's gender had any effect, and they discovered that females had more mental health problems as they grew older. They discovered that, while mental health problems are more common in children of parents with mental health problems, the course of the problems does not differ significantly, as mental health problems among children, specifically anxiety and depression, are most common between the ages of 12 and 17. (Ghandour et al., 2019). Plass-Christl et al. (2018) discovered internalising problems were more prevalent when parents had more severe or frequent episodes of mental health, similar to the findings of Gjerede et al., (2019). Gjerede and colleagues (2019) examined data from a Norwegian Cohort of 11,553 mothers and their 17,724 children and discovered that maternal anxiety affected childhood internalisation problems as early as preschool. This study confirms the findings of a 2015 study of the same Norwegian Mother Child Cohort by Kvalevaag and colleagues. The Kvalevaag study sought to determine whether there was a difference in the mental health effects of mothers and fathers on their children.

They discovered that the risk was greatest when both parents experienced significant psychological distress during pregnancy. If only one parent had mental health issues, the risk of increased childhood behaviours was higher if the mother had mental health issues than if only the father had mental health problems. More research is needed to determine whether the mother's mental health has a greater impact because it affects the developing foetus. According to Kvalevaag et al. (2015), these children are more likely to develop mental health disorders. When these studies are compared, it is clear that there is a link between parental mental health problems and an increased risk of childhood emotional and behavioural problems. However, it is unclear whether these effects would be the same if only the parent's mental health were considered. It is possible that there is an increase in childhood behaviours as a result of other environmental factors influencing the child, as well as poor paternal mental health.

2.3 Childhood Abuse

Traumatic events can occur anywhere, but the majority occur at home, school, or in a child's community because those are the places where they spend the majority of their time. Adolescents' mental health problems were significantly predicted by trauma, poor family functioning, and family conflict (Milburn et al., 2019). Milburn et al. (2019) discovered that children who experienced a traumatic event, defined in this study as being a victim of, witnessing, or having a loved one involved in a violent act, were significantly associated with mental health problems and delinquent behaviours. Furthermore, they discovered that poor family functioning and family conflict were linked to mental health problems and externalising behaviours. Trauma can also occur in children at school. Bullying is the most common event that has a negative impact on a child's mental health. In today's society, much bullying takes place behind a screen in the form of cyberbullying, which is becoming particularly harmful to children. Baier et al. (2019) discovered a strong association between bullying and poor mental health in a cross-sectional standardised survey of 10,638 ninth grade students in Germany. They discovered that cyberbullying was the most influential factor on both male and female mental health. Following that, they discovered that psychological or relational bullying had the second highest impact on a child's poor mental health, with similar results in males and females.

Surprisingly, the study found that physical bullying had little effect on poor mental health. However, it was discovered that social support was associated with better mental health and that it could help mitigate the negative mental health effects of bullying.

2.4 Child's Neighbourhood

A child's community can also have an impact on their mental health, and negative neighbourhood environments can harm a child's development. Molano et al., (2018) claim, similarly to Milburn et al., (2019), that exposure to neighbourhood violence is an important risk factor when assessing a child's social and emotional health. Molano et al. (2018) studied the effects of neighbourhood homicides on 5,801 fifth-grade students in Columbia. They discovered that indirect neighbourhood violence harmed the child's emotional functioning. Despite the fact that there was violence in their neighbourhood, the study found no increase in aggressive behaviours or thoughts.

Hosokawa and Katusra (2020) discovered that neighbourhood environmental factors have a significant impact on a child's mental health in a study of 695 fourth grade students in Japan. They discovered that disadvantaged families tend to live in lower-quality neighbourhoods, where children are more likely to develop behavioural problems. Hosokawa and Katusra (2020) discovered that neighbourhoods with aesthetic quality, a walking environment, and social cohesion had fewer behavioural problems and more prosocial behaviours. Scott and his colleagues (2018) investigated the relationship between social-emotional behaviour (SEB) and the number of trees in a child's neighbourhood or school.

Relying on these studies, it is reasonable to conclude that well-kept schools and neighbourhoods that incorporate nature and play areas for children have a positive impact on a child's mental health. These studies discovered that there were fewer behavioural issues and more prosocial behaviours. These studies focused on children aged 3 to 11, which is the most common age for behavioural disorders to develop (Ghandour et al., 2019). It is possible that

similar results will be observed in children aged 12 to 17, as they become more independent and spend more time in their neighbourhood rather than at home.

2.5 Academic Success and Social Functioning

Academic performance, social well-being, and social problems are all strongly linked to mental health problems in children and adolescents. According to research, there is a link between mental health issues and academic difficulties (Battaglia et al., 2017; Brannlund et al., 2017). Other studies contend that mental health is not the primary cause of poor academic performance (Mcleod et al., 2012; Verboom et al., 2014).

McLeod and colleagues (2012) discovered that depression alone may not lead to lower academic achievement when they examined data from the National Longitudinal Study of Adolescent Health. They discovered that students with depression had lower high school GPAs, but this was not the case once other behavioural problems were controlled for. Substance abuse and delinquency were better predictors of lower academic achievement. You could argue that depression, by impairing social functioning, increases the likelihood of adolescents engaging in substance abuse and delinquency. Verboom et al. (2014) discovered that social and academic functioning deteriorated due to depressive problems in a biennial study of 2,220 10- to 18-year-old children, with the exception of academic performance in boys. Looking at these studies, McLeod et al. (2012) argue that depression does not cause poor academic achievement on its own, and Verboom et al., (2014) discovered similar results in boys. Students who are depressed are more likely to face social challenges, which may lead to other issues affecting their academic performance. Verboom et al. (2014) discovered that depressive symptoms were associated with lower social well-being and more social problems. When children lack social support, they may engage in riskier behaviour such as substance abuse and delinquency. Busby et al. (2013) discovered that an increase in aggressive behaviours leads to poor academic performance in their study on the effects of community violence. According to Mcleod et al. (2012), more punishable offences (e.g., physical behaviour, substance use, and delinquency) keep students out of school or the classroom, resulting in lower academic achievement.

2.6 Therapies and Alternatives

Mental health issues are becoming more prevalent in the United States, with an estimated one in every five children suffering from a diagnosable mental health issue (Center for Disease Control and Prevention, 2017). However, 60% of children do not receive appropriate mental health treatment due to a variety of factors (e.g., transportation, financial resources, and service availability) (Kelchner, Perleoni & Lambie, 2019). Various school programmes can assist children in gaining access to treatment. Atkins and his colleagues (2015) investigated the effects of a school and home-based mental health programme called "Links to Learning" on low-income children in an urban community. According to their findings, using the programme resulted in increased academic engagement, academic competence, and improved social skills. The programme, however, did not significantly reduce the problem behaviours. Their three-year longitudinal study included 171 students in kindergarten through fourth grade who had one or more disruptive behavioural disorders. They discovered that the programme was most beneficial in younger students with fewer symptoms.

Students with more serious behavior problems may require additional assistance. A programme like the one studied by Raval et al., (2019) could be a good complement to Links of Learning. When Raval et al. (2019) investigated the promotion and prevention programme "Turn 2 Us," they discovered a significant decrease in internalising and externalising behaviours in 185 fourth and fifth grade students. This would be a good complement to Links to Learning because it would benefit higher risk students and older elementary students, two areas where Links to Learning lacked. More research is needed to determine whether this programme could be beneficial to younger students.

2.7 Collaborations between schools and communities

A collaboration between schools and mental health centres or hospitals could help more children receive mental health treatment. Mental health professionals could contribute their expertise to these collaborations, removing

some of the barriers that children face when seeking services (e.g. transportation and financially). Walter and colleagues (2019) investigated the effects of a three-year MTSS mental health school-hospital collaboration. Where local hospitals collaborated with six schools at each grade level (elementary, middle, and high school). According to their findings, students who received early intervention had significantly improved social-emotional competencies and coping skills. While participating in clinical treatment, students with mental health disorders improved their symptoms and functioning. Local hospitals collaborated with schools in this study to provide mental health training for staff and families, as well as treatment for students, resulting in more children receiving treatment. Walter et al. (2019) discovered that over the three-year partnership period, students only had to wait 1-2 weeks for individual therapy, as opposed to 3-6 weeks at local mental health centres or partnering hospitals. They also discovered that if kids have access to care they will go. Children in this programme received an average of 26 individual lessons, as opposed to two lessons when receiving services at a clinic or hospital. Based on their findings, Walter and his colleagues discovered that collaborating between hospitals and schools to provide better mental health care to children is both feasible and beneficial. Conners-Burrow et al. (2012) conducted a similar study in which community mental health centres collaborated with 193 Arkansas early childhood teachers to provide early childhood mental health consultation (ECMHC). Teachers felt they had better interactions with the children by year three of the partnership, but there was only moderate improvement in childhood behaviour problems.

2.8 Programs for Socioemotional Learning

Shoshani and Steinmetz (2014) investigated the effects of a school-based mental health intervention on 537 7th-9th graders in comparison to a control school with demographically similar students. When the participants were assessed over a two-year period, they discovered that those who participated in the intervention had a decrease in general distress, anxiety, and depressive symptoms, as well as a significant increase in self-esteem and self-efficacy. Another study evaluating the effectiveness of SEL programmes Raimundo et al. (2013) discovered that a social-emotional learning programme resulted in minimal gains in internalising and externalising problems for 213 fourth grade students. According to the study, students demonstrated a significant increase in social-emotional competences, particularly peer relations and social competence. Students in this study may not have benefited as much as students in the study by Shoshani and Steinmetz, (2014) because this study was limited to fourth grade students, whereas the other study changed the entire school culture. When reviewing the studies, it is clear that incorporating social emotional learning into school settings can have benefits. The impact of these programmes, however, varies depending on how invested teachers are in incorporating it into their routines. Shoshani and Steinmetz (2014) observed great success when they witnessed a school change its culture to benefit students' mental health. While Raimundo et al. (2013) did not observe the same level of success with the programme because it was only implemented in one grade.

2.9 An Approach Based on Mindful awareness.

Mindfulness-based practises have been around for thousands of years and have previously been used in adult mental health treatment. It was only recently that they began to use them on adolescents and children. In a study of 85 12–18-year-olds, Vohra et al. (2019) discovered that using Mindfulness-based stress reduction improved internalising problems and adaptive skills. The study was conducted over a 10-week intervention period with a 3-month follow-up. At the follow-up assessment, children who received the treatment improved their skills, whereas the control group's skills deteriorated.

Sheinman et al. (2018) examined a much larger study involving 646 students aged 9 to 12 from three different schools. The schools differed significantly in that one had used whole school mindfulness for 13 years, while the other two had used it for one year and zero years. According to their findings, students who attended the school that had been practising mindfulness for 13 years were much more likely to use mindfulness-based coping strategies in everyday situations than students from the other two schools. The study does not investigate the effects of mindfulness on academic success or behavioural access, but it is possible that children's academic performance could improve if they can cope with stress better.

3. Future Scope

More research is required to determine the best practices for treating mental health problems in children. According to research, mental health treatment in a school setting is beneficial to children (Atkins et al., 2015; Raval et al., 2019; Walter et al., 2019; Shoshani & Steinmetz 2014; Schonefeld et al., 2015; Sheinman et al., 2018). Where research is lacking is in determining how effective these programmes are in increasing graduation rates and high school GPA. A SEL district versus a non-SEL district with a similar demographic may provide useful data year after year.

More research is also needed to determine what characteristics distinguish a well-designed SEL programme and how much training educators require to successfully run a programme.

4. Conclusion

Psychological health is a burgeoning concern in our society, particularly among our youth. Mental health conditions go untreated for a variety of reasons, including a lack of resources. When these conditions go untreated, they deteriorate as these children grow into productive members of our society. This rise in the number of young people may eventually pose a growing public health issue (Brannlund, Strandh, & Nilsson 2017). Mental health problems are not isolated issues; they are contributing factors to other physical health problems. Because of an inadequate understanding of the relationship between mental illness and other health conditions, the burden of mental disorders is likely to have been underestimated (Prince, Patal, & at el., 2007).

The likelihood that common mental disorders in adults emerge during childhood and adolescence emphasises the need for a shift away from the common focus on treatment and towards a much stronger emphasis on prevention and early intervention (Askell-Williams & Lawson, 2015). Early detection and treatment of mental, behavioural, and developmental disorders may improve a child's functioning and reduce the need for costly interventions in the long run (Cree, Bitsko, & at el., 2018). One method of providing access to children is to incorporate evidence-based programmes into daily school routines, which can change how children think about themselves and school and lead to academic and social success (Shoshani & Steinmetz, 2014). This could be accomplished through community collaborations with mental health centres or hospitals. Walter and colleagues (2019).

Introducing social emotional learning into schools may be the most effective way for schools to address children's mental health. Treatment provided in a school setting may help to eliminate access barriers that exist in clinical and private settings.

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