Prioritizing Student Mental Health

**Introduction**

For Project 4 I chose to remix my topic from Project 3, which was a rhetorical analysis of Abby Quirk’s “Prioritizing Racial Equity in Student Mental Health Spending”. Before researching the inequities within mental health resources in schools, I knew that students are currently facing a mental health crisis. Still, I was unaware of the true disproportionality of it all and how this crisis affects our future educators, doctors, and government officials. I struggled with my mental health towards the end of my high school career amidst the COVID-19 pandemic, and it had never occurred to me that my school could have provided resources to mitigate this issue. While Quirk’s article addresses the Center for American Progress’s ideas to reach a more equitable society in terms of mental health, it does not thoroughly address the direct impact of mental health services and the negative stigma surrounding mental illness that makes these services necessary. For these reasons, I have written a letter to a school district superintendent discussing why proper mental health resources are essential to student success and I also have created an infographic for parents to learn how to best support their child’s mental health issues. Through these artifacts, I hope to mitigate the ongoing mental health crisis and reduce the negative stigma surrounding mental illness.

**Genre 1**

In Project 3, I learned that public school districts received funds to install or improve mental health services in schools, but most of those funds had not been allocated equitably (Quirk). I also learned that there is an overall underestimation of the positive impact these services can have on students’ mental well-being, which is why many schools still lack mental health resources. The Center for American Progress article discussed in my previous project
addresses numerous solutions that policymakers can take to resolve these issues, such as directing money toward hiring diverse mental health personnel (Quirk). Considering 25% of teenagers suffer from a mental disorder, these services are crucial when it comes to supporting student wellness (“School Violence Statistics”). With this in mind, I created a rhetorical situation in my letter that elaborates on the importance of mental health resources in schools and how a school district superintendent can benefit the student body by implementing them.

I decided to create this new rhetorical situation because I wanted to explore beyond the solutions for equitable mental health resources in schools. While it is still crucial to ensure that every student has access to the support systems that best serve them, reflecting on the student mental health crisis and the initial resources should be prioritized. In this new rhetorical situation, the exigence is the lack of resources for mental health support in school systems as a result of unawareness as to why it is necessary. That is currently reflected as none of the U.S. states have a social worker for every 250 students despite it being recommended (Charania). This issue can be resolved by bringing it to the attention of those capable of making these changes to schools. School district superintendents are responsible for allocating funds, and they must first reconsider their current distribution of resources to include mental services. Once aware of the importance of including mental health resources, school district superintendents will then have to be the ones that hire professionals to provide these wellness services.

Unfortunately, I face a constraint to accomplish the goal of effectively reaching a school district superintendent because of my age. As I am a college student, a public school leader may quickly disregard my beliefs and suggestions for how to improve their student population. I hope by including my personal experiences with mental health and the services that were provided throughout my academic career, that the superintendent will understand how I am relevant to this
cause. Sharing my experiences allows me to advocate for students within the superintendent’s district who also suffer from a lack of mental health support. My perspective will provide insight as to how students are impacted by the availability of support in schools and allow the superintendent to understand how his current students could be of benefit to mental health services.

I chose to bring this issue to the superintendent through the genre of a letter because I felt it was the most direct way to reach out to him. If I were to call Dr. Eppes’s office, I most likely would be connected to their secretary who may or may not later relay my message. Mailing a letter will not only ensure I include everything I wish to say that I may easily forget to include over the phone, but it is a permanent artifact that the superintendent can refer back to. A letter also comes across as more professional and formal than a phone call or email. This helps prove that despite my age, I am responsible and mature enough to be encouraging the superintendent to make changes to how they conduct their district. Additionally, most letters received by school district superintendents are from parents of students who wish for school policies to be changed to accommodate their child’s specific needs. However, my letter addresses information and solutions from which all students can benefit, making mine likely to be remembered by the superintendent as it varies from the typical letters they receive.

Within my letter, I was very intentional with everything that I included because I wanted to ensure that I did not lose the attention of the superintendent while he was reading it. For this reason, I begin my letter by telling Dr. Eppes that I am a former student of his school district. I decided to incorporate this because I believe it will prevent my constraint of the superintendent quickly dismissing the ideas of a college student. As a recent graduate from the Fort Mill School District, I am also aware of the scarcity of mental health resources that are currently available to
students. The fact that I struggled with my mental health during my high school years suggests that the current mental health services in place are insufficient to improve the well-being of the student body. The inclusion of these details will hopefully make the superintendent aware that the student mental health crisis has made an impact on his own students, which is something he may not have been fully aware of before reading my letter.

Moreover, I incorporated statistics regarding the student mental health crisis in my letter so the that this problem is not further dismissed. Because mental illness cannot always be noticed simply by looking at someone, it is easy to assume that many students are mentally stable when they are not. Dr. Eppes may be guilty of having these assumptions which is why it is imperative that he realizes how serious the student mental health crisis is. The statistics I wrote outlining the prevalence of mental illnesses in students were not meant to evoke fear or concern in the superintendent, but rather inspire action. Dr. Chuck Eppes would not be the school district superintendent if he did not have a great love for students and want them to succeed. I hope that these writerly choices will encourage the superintendent to implement mental health services so that the well-being of his students improves and they can get the support they need.

**Genre 2**

As I explored how funding has been directed towards mental health spending and how it could be more focused in my Project 3 research, I discovered society’s lack of understanding regarding mental illness. The Center for American Progress article I analyzed addresses the negative stigma surrounding BIPOC mental health and the resources that can combat it. Many students of color’s mental illnesses are worsened due to society’s chronic misdiagnoses and poor self-perception (Quirk). A 2016 study concluded that this perception and stigma can affect access to mental health resources, which is why more services are necessary (Lannin, et al.). Because of
the unsupportive attitudes about mental health, I created a rhetorical situation in my infographic that includes ways for parents to recognize and support the mental health of their children so that the student's feelings are not further stigmatized and they can get the help they need.

I created this new rhetorical situation because my previous project emphasized what mental health resources can do to equitably benefit students, but it did not consider barriers that may be preventing students from using those resources. Since the negative stigma surrounding mental illness produces unfavorable attitudes and judgments toward mental health services, the resources being implemented in schools would be put to waste (Lannin, et al.). Additionally, the Center for American Progress’s article focused on the stigma surrounding BIPOC mental health. People of color do disproportionately receive fewer mental health services; however, the negative stigma surrounding mental health is prevalent among most communities. For these reasons, the exigence of my new rhetorical situation is the persisting student mental health crisis as a result of the shame surrounding people who seek and need mental health services.

This exigence can be resolved if the parents of students become informed about the student health crisis and learn how to best support their children’s mental health. Parents are the most influential people in their children’s lives because children instinctively mirror their actions and share similar beliefs as their parents (Murthy). As a result, students are cautious about addressing topics they have not heard their parents discuss or approve of. However, if parents of students include the importance of mental well-being and support in their everyday conversations with their children, the students will be more likely to feel comfortable with mental illness and seek the help they deserve (“Many parents”). After all, if children are not comfortable discussing their mental health struggles with their parents, they will not be comfortable enough to discuss it with personnel within their school’s resources.
Unfortunately, while some parents can easily embrace and present the topic of mental health to their children, they also are capable of shielding their children from it. In a poll conducted by the Time to Change campaign, 45% of surveyed parents intentionally haven't discussed the topic of mental health with their children because it did not seem to be a relevant issue for them (“Many parents”). This parental hesitancy to address mental illnesses with their children is because they do not wish to scare them. Because of ideals such as this, some parents may not utilize my infographic, as they will not be discussing this matter with their children. This constraint inhibits my ability to reach all parents because they can easily opt not to access the infographic unlike if they were forced to be handed a paper version of it. However, the Time to Change campaign also found that 20% of parents who have not made their children aware of the mental health crisis also admitted that they did not know how to bring up the issue. If parents were open to reading my infographic despite their hesitancies, they would discover how to best address the topic with their children and the benefits of embracing it rather than suppressing it.

I decided to use an online infographic as my means of communication to reach the parents of students because I felt that was the most efficient way for the information to be continuously accessed. Throughout the school year, students of all ages are handed numerous flyers such as field trip forms and classroom wish lists from the teachers to then pass on to their parents. Despite the frequency at which papers like these are passed out, they are not very effective when they contain pressing information or require urgent action. This is because students often misplace the flyers before they ever give them to their parents, and the same thing would likely happen with a printed version of my infographic. However, the student mental health crisis is too severe for the critical information to be lost or never read. With the principal's approval, having the secretary upload the infographic under the “Parents/Students” menu under
the “Health and Wellness” tab on the school website makes it easily accessible and likely to be read. Also, parents can refer back to the infographic at their convenience. This is especially useful if parents find that their child does not need school mental health services one year, but does later on and now needs to know what steps to take. Additionally, the school website is where a lot of other school information and announcements are located, so parents are very familiar with how to navigate the website and where to access the infographic.

In my infographic, I had to heavily consider the best ways to give instructions to parents without coming across as too authoritative and controlling. I realize that some parents may be opposed to my recommendations, and I did not wish to evoke anger or frustration from them as they read the infographic. Because of this concern of mine, I decided to maintain a firm tone when mentioning what steps parents should take to improve the well-being of their children. An example of this directiveness is when I used phrases such as “you must” and “it is necessary”. Additionally, I decided to bold words within the text that I believe are integral to my message about the student health crisis and what parents can do to mitigate it. I understand that I incorporated a lot of information in that one document, so I thought that bolding action words and key ideas would allow the parents to more easily understand and recognize the intent of my infographic. Furthermore, I also recognized that many parents may feel as if this infographic is irrelevant to them if their children do not appear to be suffering from mental illnesses. Because of this constraint, I provided evidence and stated, “Even if your child does not suffer from a mental illness, it is likely you know a child who is”. I hope these inclusions will allow my infographic to effectively encourage parents to advocate for their children’s well-being and properly support them.
Conclusion

With the two new artifacts I have created for Project 4, I have redirected the focus from Project 3’s rhetorical situation. In the previous project, I analyzed the Center for American Progress’s article that discussed ways to make school spending directed toward equitable mental health resources. My decision to remix this rhetorical situation was not because I thought this topic was unnecessary, but because I believe mental health awareness and support need to be accepted before equitable resources can be implemented. Through my first genre, I addressed a new rhetorical situation with the need for mental health services in schools. I brought this to the attention of the Fort Mill School District superintendent by outlining the student mental health crisis and how this may be affecting his students. This will inspire Dr. Eppes to implement mental health resources in his schools so that his students can succeed academically. Through my second genre, I addressed a new rhetorical situation with the negative stigma surrounding mental illnesses that have fostered the student mental health crisis and discouraged people from seeking help. I shared this exigence in the form of an infographic addressed to the parents of students to ensure that affected students are getting proper mental health support at home and to normalize mental health discussions. By implementing school mental health resources and educating parents on how to reduce the negative stigma, the student mental health crisis will be alleviated and student well-being will improve.
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