Conversation Guide for Caregivers: Supporting Your Student’s Mental Health Following High School

Overview:
The goal of this guide is to help parents, guardians, caregivers, and their students integrate mental health and well-being considerations into their important conversations, decisions, and preparations for life after high school.

Each student and family has unique experiences, goals, and choices for life after high school. Transition planning is essential for all students, helping them to connect and thrive as they navigate their many new possibilities and responsibilities – whether starting college, taking a gap year, or entering training programs, the workforce, or military service.

For teens who have experienced emotional or mental health issues in high school, transition planning should incorporate mental health considerations. Caregivers play a key role by engaging and guiding their teens through thoughtful conversations as they prepare for the journey ahead.

*Please adapt this conversation guide to make it more relevant & applicable to your students’ lives.*

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**Beginning the Conversation:**

**Timeframe:** Around spring break of junior year of high school

**Setting Up the Conversation: Considerations...**

1. **Who is important** to include in this conversation?
   - One or more caregivers? Which trusted adults?
   - A conversation with 1 or 2 caregivers/trusted adults helps students feel comfortable and avoid overwhelm.

2. **Frame of Mind**
   - Are you in the right headspace to have this conversation?
   - How are you feeling as the caregiver initiating the conversation?
   - Are you ready to open the conversation topic and **actively listen**?

3. **Timing**
   - When is a good time to chat?
   - Is there adequate time to start and hold this conversation?
   - Ensure the conversation occurs where students are able to engage free of time or focus restraints

**Sentence Starters:**

**About Goals After High School**

- “You’re more than halfway through high school! How do you feel about graduating next year?”
- “What do you think you want to do after you graduate?”
  - Examples: continue your education in college, participate in a training program, find a job, take a gap year, join the military, etc.
- “For any next step you are considering as you transition after high school, it would be good to think about how to support your well-being”
- “I/we are here to help you find the best fit for you”

**About Well-Being:**

- “Before school starts, let’s talk about some common struggles that might arise...”
- “We have a family history of mental illness/substance abuse, so let’s talk about...”
- “Given your diagnosis, let’s talk about your mental wellbeing and choices after high school...”
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College/University:
*For students with a history of mental health concerns, employ a mental health lens when considering the following:

Researching and Applying to College

Timeframe: Around spring break of junior year of high school

There are many items to consider beyond academics, when you're looking at colleges or universities. Your mental and emotional well-being may be affected by this new environment and major transition.

When researching and applying to college, it's helpful to think about...

- Program type and duration: 2-year program, 4-year program, community college, etc.
- Location: in-state vs. out of state vs. international, and the weather
- Size of the school (especially in comparison to your current school size)
- Diversity of the student body
- Extracurricular activities: clubs, student organizations, jobs, etc.
- Finances: Fees, tuition, scholarships, who's responsible for paying
- Support Structures: Student activities, tutoring, academic/peer advising, career services

Consider: Exploring campus websites and attending campus tours provide opportunities to discover the mental and emotional support services each campus provides

For students with a history of learning/mental health concerns:

- **Disability Services**: What accommodations are available for students with mental health conditions?
- **Mental health services, policies, and programs**: what exists at prospective college(s)?
- **Counseling center services**:
  - What services are available?
  - Associated fees? Insurance accepted?
  - Maximum number of sessions allowed per year?
  - Wait times to see a counselor?
  - Is there a counselor on call 24 hours a day? If not, what after-hours emergency services are available near campus?
- **Campus psychiatric services**:
  - Is there a psychiatrist on staff?
  - Are there specialists (i.e. eating disorders, substance use, etc.)?
  - Does the counseling center provide off-campus referrals?
• **Caregiver notification:**
  o Under what circumstances will the college notify a caregiver regarding their student's mental health?
  o What happens if a caregiver calls the college with a concern about their student?

• **Faculty, staff, resident advisors (RAs), etc:** are they trained to identify and refer students in emotional distress?

• **Mental health & wellness educational programming** (e.g., workshops, presentations): provided to students?

• **Policies and Advocacy:** Is there an office to intervene on students’ behalf, help navigate and provide support with leave of absences
  o What are your options if you want to leave for the term?
  o Is it possible to decrease your course load?
  o How might scholarships be affected by a leave of absence?

• **Privacy (HIPAA/FERPA):** Turning 18 brings up a number of decisions for students, which includes what they do or do not want to share with their caregivers (such as health or education records). Once a student reaches the age of 18, the rights accorded to the student’s caregivers, including authority to permit access to records, are transferred to the students themselves. The Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA) govern all students’ privacy rules related to sharing information about mental health.

  *Given these privacy laws, it’s critical that families consider how they want to manage a mental health crisis before one arises, know what is available on campus (or local community) and how to respond should a stressful event or medical crisis arise.*

**Students with Disabilities - 504 plans and Individualized Education Plans (IEP)**

• According to the [Individuals with Disabilities Education Act – (IDEA)](https://www2.ed.gov/about/offices/list/idea/index.html) – every student with an IEP must have an [Individual Transition Plan (ITP)](https://www2.ed.gov/about/offices/list/idea/index.html) in their IEP by the time they turn 16.
  o The ITP is a written document designed to help prepare students for life after school.

• Students with **504 plans** do not have the same right to school-based transition plans that students with IEPs have.
  o 504 plans do not have the equivalent of an ITP, but some school districts may provide some kind of transition planning for students with 504 plans, even though they are not required to do so.
Resources:

College and Mental Health

- JED/NAMI Guide: STARTING THE CONVERSATION - College and Your Mental Health
- NAMI College Guide Important Forms: Student Health Records — The Forms You Need (and Why You Need Them)
- SetToGo Program, The Jed Foundation
- Set-to-Go Toolkit - JED Foundation
- Text, Talk, Set-to Go (for Juniors & Seniors) - JED Foundation
- Transitioning from High School to College with a Psychiatric Illness - Preparation

HIPAA/FERPA

- FERPA Summary Page
- Federal Health Privacy Laws: Basics for School Professionals
- Transitioning from High School to College with a Psychiatric Illness - Preparation

504/IEP support

- How to Put Together a Successful IEP Transition Plan - YouTube
- Parents’ Guide to 504 Plans and IEPs: What They Are and How They're Different
- How to Get the Right IEP or 504 for Your Child's Learning Disabilities
- Does My IEP or 504 Plan Transfer to College?

Learning Disabilities

- Parents Helping Parents - Supporting Families with Disabilities
- Students with Disabilities Preparing for Postsecondary Education
- Transitioning to Life After High School for Students with Learning Disabilities
- CHC Podcasts - Creative Conversations about Mental Health, Education & Parenting
- CHC Resource Library - Services for Mental Health and Learning Differences for Young Children, Teens and Young Adults

After Being Accepted to College:

**Timeframe:** Around March/April of senior year of high school

As students decide which college they would like to attend, discussing mental health proactively can help ensure students feel supported on campus and know how their caregivers can be a source of strength as well (especially in a period of crisis).
Action Items:
1. Be honest on the college’s medical history form about current or past emotional issues. These forms provide important information to the health/mental health practitioners
   ○ They are confidential!
   ○ Knowledge of a pre-existing condition will help in an emergency
2. Transfer student care and records to the college’s counseling center or a local community provider
3. Insurance: Find out what mental health services are covered when making decisions about health insurance – are you considering keeping existing health insurance or changing to a college plan?
   ○ Will a student’s existing insurance cover an out-of-state provider?
   ○ Will a provider be able to fill out-of-state prescriptions?
   ○ What outpatient and inpatient mental health services, emergency care, possible hospitalization and prescriptions are covered under each insurance plan?
   ○ What mental health services are covered by student health fees (e.g., number of sessions, psychiatric care, medication)?
4. Disability services:
   ○ Determine eligibility for disability services
   ○ Students with a diagnosed mental illness or learning disability may be eligible to:
     i. Register with the disability services office (may be called the “Office of Accessible Education”)
     ii. Receive reasonable accommodations (e.g. education coaching, academic accommodations, or other services)
5. Action items for caregivers:
   ○ Identify whom to contact when concerned about student's wellbeing
   ○ Understand the circumstances under which the college will notify you regarding your student's mental health.
   ○ Read web pages specifically designed for loved ones, links to guides or information from an advisory council.
   ○ Read the college’s student handbook.
   ○ Examine college’s Code of Conduct, which addresses issues such as alcohol or other drug use and plagiarism. It may also include information regarding confidentiality of records and leaves of absence.

Gap Year
Some students choose to spend their first year after high school as a “gap year” - traveling, studying abroad, engaging in volunteer work, or pursuing passions or internships.
Insurance:

- Youth are able to stay on their caregiver's health insurance until age 26, per the Affordable Care Act (ACA).
- Check to see if your student is covered domestically or internationally, based on their gap year circumstances.
- Health insurance should cover both physical and mental health and can be purchased independent of caregivers' coverage.
- Different countries have different health plans that they accept from the U.S. Investigate before travel begins.

Job, Training Program, or Military Options

There are a number of workplace oriented after-high-school options for graduates to consider - technical/vocational training standalone programs, immediate entry into the workplace, as well as the military. Each option has unique aspects to consider, especially when viewing through a mental health planning lens.

Resources

Post High School Options

- [After High School: Different Paths to Success](#)
- [Choosing a Vocational School or Certificate Program](#) (Federal Trade Commission)
- [EdNavigator | 6 Options to Consider for After High School](#)
- [Comparing the Costs of College vs. Work After High School](#)

Gap Year

- [What a Gap Year Is and How it Prepares Students for College](#)
- [When to Consider a Gap Year Program - Child Mind Institute](#)
- [EF Gap Year Programs For College Students](#)

Military

- [What You Should Know Before Joining the Military](#)
- [Requirements to Enlist in the US Military](#)
- [Mental Health and the Military: Asking for Help When You Need It](#)
- [Can You Join the Military with Depression?](#)
- [Can I Join the Military after Rehab?](#)
- [Military and veteran suicide prevention | AFSP](#)
For Caregivers: Staying Connected

Timeframe: After high school

As students graduate high school, they take on not just a new adventure, but also new responsibility for their own health. All students – regardless of their post-high school choices, must learn to manage their health and healthcare. This is still challenging, however, given the stresses, poor sleep patterns and rising rates of anxiety and depression emerging or recurring amongst transition aged youth (TAY) ages 19-24. It is important to discuss mental health issues even if there is no history of a mental or emotional difficulty.

It's important to stay connected and in communication with your student after high school. This is especially true for students who have experienced mental health challenges. You may be in the best position to notice and address any difficulties that your student is having.

Tips:
1. Keep lines of communication open.
   - Have mutually agreed-upon, regular check-in times/calls, etc.
   - Consider using apps that teens are using to connect, e.g. SnapChat, Facetime, etc.

2. Don’t be afraid to talk to your student about how they’re feeling or if you think that something is wrong.
   - If they say that nothing is wrong -
     - explain what you’re noticing that concerns you (be specific)
     - reassure them of why you’re mentioning it (e.g., because you love them, don’t want them to struggle on their own, know how difficult it can be to reach out for help, etc.). It’s ok to be persistent!

3. Learn the signs and symptoms of mental health conditions & warning signs for suicide.
   - It is not uncommon for mental health problems to appear for the first time while youth are in this transition time
   - These signs will take the form of changes or behaviors that are out of character and that are pervasive in their life and persistent for about 2 weeks or more. There may be marked changes such as:
     - eating or sleeping more or less
     - isolation or withdrawal from others
     - feeling overwhelmed
not going to classes or work, etc.
- difficulty concentrating
- seeming confused or disoriented
- feeling worthless or behaving as if they were worthless
- a sudden drop in grades or work performance
- poor memory or recall
- highs or lows in mood
- anxiety
- and thoughts of suicide

- Insomnia may be considered an indicator of acute suicidal risk, especially if the youth is in the midst of a depressive episode (Fawcett et al., 1990). Professionals are available to help your student and should be contacted immediately

- Teen Mental Health: How to Know When Your Child Needs Help (American Academy of Pediatrics)

4. **Encourage your child to seek help when you notice signs or symptoms of a mental health condition or signs of distress**
- Youth can be reluctant to seek help, fearing someone will find out.
- Reassure your student that counseling services are provided confidentially and that you fully support them in reaching out for assistance.

5. **Provide your student with their health information including details of their primary physician and emergency numbers to contact at home.**
- Include a list of current medications and diagnoses, if applicable. Keep this up to date. Make sure your student understands why they are taking each medication and the potential side effects.
- Your young adult should advise a friend where this information is in case an emergency arises.
- Insurance options and access to care will vary according to post high school choices. This is an important component of post high school planning.

6. **Get local contact information including that of a friend of your child.** Assure the friend that you will contact them only in an emergency.

7. **Create an emergency plan with your student before a crisis arises.**
Suicide Prevention - Considerations & Warnings of Suicide:
If you witness, hear, or see your student exhibit any of the following signs, get help IMMEDIATELY.

Dial 911, their college’s emergency number, or 988 (the Suicide & Crisis Lifeline) for a referral.

- Threatening to hurt or kill him/herself, or talking of wanting to hurt or kill themself
- Looking for ways to kill themself by seeking access to firearms, available pills, or other means.
- Talking or writing about death, dying or suicide, when these actions are out of the ordinary for the person
- Expressing hopelessness
- Rage, uncontrolled anger, seeking revenge
- Acting reckless or engaging in risky activities, seemingly without thinking
- Anxiety, agitation, inability to sleep or sleeping all the time
- Dramatic mood changes
- Expressing no reason for living; no sense of purpose in life

Individuals who are contemplating suicide often give some warning of their intentions to a friend or family member.

All suicide threats, gestures, and attempts must be taken seriously.

What Can You Do If You Are Concerned That Your Student May Be Thinking About Suicide?

Start a conversation after recognizing concerns, signs, or symptoms:

Remember: Asking someone about suicide does not put the idea into their head.

(Dazzi et al, 2014)

- Be direct. Talk openly and matter-of-factly about suicide.
- Be willing to listen. Allow for the expression of feelings. Accept what they have to say as being reflective of their current experience; don't argue about or dismiss these feelings.
- Be non-judgmental. Don't debate whether suicide is right or wrong, or whether feelings are good or bad. Don't lecture on the value of life.
● Get involved. Become available. Show interest and support.
● Don’t dare them to do it.
● Don’t act shocked. This will put distance between you and make them feel less comfortable being entirely honest about how they are.
● Don’t be sworn to secrecy. Seek support.
● Offer hope that alternatives are available, but do not offer glib reassurance; it only shows that you don’t understand just how distressed they are feeling.
● Take action. Remove means, such as guns or stockpiled pills.
● Get help from individuals or agencies specializing in crisis intervention and suicide prevention.
● Never leave a child in crisis alone.

**National Resources:**
In immediate danger of self-harm call, 988 (Suicide & Crisis Lifeline), call 911 and ask for a Crisis Intervention Team (CIT) officer, or text HELLO to 741-741 (Crisis Text Line)

**Santa Clara County Resources:**
● Santa Clara County Crisis and Suicide Prevention Lifeline: 988 *(area codes 408, 650, 669)*
● **For other area codes:** Dial (800)704-0900, Press 1
  ○ Your call will be routed to the appropriate service (in-person crisis support program or phone de-escalation response)

**Local Resources:**
Connect with local suicide prevention resources wherever your child is located (college, gap year, training program, work force, or military). Most resources can be found online by searching “suicide crisis line in [location]”.

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## Key Contacts Table

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<td>Parent, Caregiver, or Guardian (1)</td>
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<td>Current Address</td>
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<td>Crisis</td>
<td>If someone you know is at risk of suicide or self harm</td>
<td>Call 988</td>
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<td>Suicide and Crisis Lifeline</td>
<td>Text HELLO to 741-741</td>
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<td>Crisis Text Line</td>
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<td>Closest Hospital</td>
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<td>Loved Ones</td>
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<td>Caregiver 2</td>
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| **Caregiver 2 Cell Phone** (for example: mom, dad, aunt, grandparent) |
| Caregiver 2 Home Phone |
| Caregiver 2 Address |

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The HEARD Alliance Toolkit

The K12 Toolkit for Mental Health Promotion and Suicide Prevention was created in 2013 in response to school communities’ needs to promote student mental health and wellbeing, to prevent suicide, and to provide information about intervening in a crisis or after a suicide loss. The Toolkit has drawn on evidence-based national and state youth suicide prevention guidelines. In California, a suicide prevention policy is now required for all public School Districts and Charter Schools serving students in grades K-12. The Toolkit is meant to serve as an implementation tool for this policy. The three main areas addressed are Promotion, Intervention and Postvention, which are all interconnected. The Toolkit is a dynamic document and is continually updated. The goal is to bring the most up-to-date information to schools, parents, primary care clinicians, and the broader community.

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