

The Flagler Times

Teen mental health screening on hold after program loses funding

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By JOSH SWEIGART

A controversial mental health screening program at Flagler Palm Coast High School has lost its funding and will stop screening students in October unless the program's administrators can come up with \$42,000 to keep it going.

The program, called TeenScreen, is a mental health assessment that has been used at the school since 2004 to screen students for suicidal thoughts.

But The House Next Door, a local organization that administers the program in the school, didn't receive the Drug-Free Communities state grant that funds the program because the state is focusing that funding more on substance abuse programs, rather than family counseling programs.

Gail Hallmon, an administrator with THND, said her group will likely secure new funding, but not in the near future, and certainly not for the rest of this school year.

School administrators say there are no plans to fund the program through the Flagler County School District once the state grant is gone.

"We hate to lose the program," said Myra Middleton, Flagler County Schools director of exceptional student education. "It's been very helpful in identifying future problems.

But this likely comes as good news to the program's critics, who charge that the program does too little to seek informed parental consent before subjecting children to a test with potentially far-reaching implications.

The TeenScreen program's stated goal is to prevent teen suicide. It attempts to do this with a 10-minute questionnaire, given to students in their freshman health class.

The survey assesses whether students may be "at risk" for mental illnesses, such as depression. If so, it helps parents seek counseling for their teen sons and daughters.

The process

Terry Smith, a retired school administrator, committed himself to combating teen depression and suicide after his daughter killed herself five years ago.

Smith learned about TeenScreen through his involvement in the Florida Suicide Prevention Coalition, in which he's actively involved. In 2004, Smith secured the first state grant and approached THND — a private, nonprofit agency offering drug, suicide and domestic abuse prevention counseling — to facilitate the program.

THND sent a clinical therapist to every health class in the school for a week of suicide education. Linda Williams, THND's TeenScreen facilitator, says she shows a video and talks to kids about stress, depression and suicide.

Williams then gives students a consent form to take home to their parents. In 2004, the school used "passive consent" forms, which assumed parental consent for the screening if the parent didn't opt out. This meant that an unreturned form was de facto approval. The school screened 575 students that year.

The program changed to an "active consent" form last year, which requires signed approval from parents. In the winter quarter of last school year (last spring and this fall's numbers are not compiled yet), Williams sent home roughly 130 forms. Of the 82 percent of forms that were returned, more one-quarter of the parents denied consent this year.

The students themselves also signed a consent form before filling out the survey. They then took the test.

TeenScreen's policy forbids sharing the questions that students are asked with anyone, including the media, because the test is copyrighted.

Last year, the school also refused to show the test to parents, though that policy was changed this year.

Williams explains that the test mostly consists of yes or no questions about how each child is feeling.

"It asks how often they feel sad, whether they have trouble sleeping," said Williams, giving examples of the type of questions asked.

Williams then assessed the students' answers to look for warning signs revealed by the test. She says that things such as suicidal ideation or recent attempts at suicide send up automatic red flags. Other students send up a red flag by answering a number of questions in certain ways.

Each student that sends up a red flag is dubbed a positive. Twenty-two local students tested positive last fall.

Williams then sits down with each student who scores a positive for a half-hour clinical interview. This is where she weeds out the “false positives,” those students whose test results indicate a concern that may not exist.

There were five false positives this winter, leaving 17 students that the TeenScreen assessment deemed at risk. Williams then picked up the phone.

“I called their parents and said, ‘You know about the program. Some areas of concern came up, and I would recommend that (your child) get a full evaluation with a therapist,’” Williams explained.

She then lays out their options. They can pay for private therapy, which seven families opted to do this winter. They can apply to an agency for help, as four others did. Some agencies, such as The House Next Door, provide mental care at greatly reduced rates. The school itself will also pay for 10 free counseling sessions for students who qualify.

Two parents refused therapy this winter, and four others said their children were already in therapy.

In 2004, 28 parents agreed to take their child to therapy, 12 were found to already be in therapy and 23 parents refused therapy.

A legal challenge

When Indiana mother Theresa Rhoades learned that TeenScreen was testing students in Palm Coast, she posted a plea to parents on the Flagler Forum, a community Web site for Flagler County residents.

“Young adults and children are being screened and labeled using nothing more than a 10 – 15 minute computer test, and some of this has been done without parental consent,” wrote Rhoades, using the screen name PATMOM. “My family has spoken out against TeenScreen in Indiana, and will continue to do so across the entire country until all parents have been informed of the truth behind this madness.”

Rhoades’ was introduced to TeenScreen in December 2004 when her 15-year-old daughter, Chelsea, came home from school visibly upset and asked, “Mom, what are OCD and social anxiety?” Theresa asked where the question was coming from and her daughter said, “A lady in school told me that’s what’s wrong with me.”

Chelsea said she had taken the TeenScreen test that day. After the test, the woman administering it led her into the hall and asked several questions.

Chelsea said that the lady at her school then explained to the girl that the

obsessive-compulsive disorder diagnosis was based on Chelsea answering “yes” to the question, “do you ever do something over and over again, like cleaning?” Chelsea told her mother that her answer had been in reference to her cleaning chores around the house.

Theresa said that Chelsea was diagnosed with social anxiety because the test asked if she had missed a social gathering with friends in the last three months. Chelsea had missed such gatherings because she wasn’t allowed to hang out on those nights.

Chelsea said she was told that if her condition gets any worse, she would require treatment.

After calling other parents and learning that they were unaware of the test, Theresa sought a lawsuit against the school, its staff and the Madison Center, the local agency that implemented the test.

The Rutherford Institute, a Washington, D.C., based civil liberties organization, offered the Rhoades’ free legal services. They filed a complaint, claiming that the passive consent method violated the 14th amendment and Indiana law.

“The heart of our case is about parental consent,” says John Whitehead, director of the Rutherford Institute. “The system works best when parents are in the know.”

The case is still pending.

Local TeenScreen facilitators say the local program is completely different from what the Rhoades experienced. For one, they stress that the test does not diagnose children with specific mental disorders.

“We don’t tell them they have a mental illness, just that there’s symptoms here that should be seen by a therapist,” said Williams, calling Chelsea’s diagnosis “the wrong use of the program.”

Smith likened it to the school nurse calling a parent and saying that a kid has a fever. The nurse doesn’t diagnose an illness, just a sign, and recommends that he or she go to the hospital.

Smith also said that Flagler Palm Coast High School switched from using passive consent to active due to legal concerns.

“When we talked to counselors (in 2004), and the recommendations from counselors was passive consent,” he said. “It’s not that we’re trying to circumvent parents, but there are some parents that are just not involved at all.”

Smith added that he would prefer to go back to the passive system.

“I have two opinions, my professional and personal opinions,” he said. “Personally, I think the household could be part of a child’s problem (but) professionally, I have to recognize the right of a parent to make those decisions.”

Flagler School Board member Evelyn Shellenberger agrees. “I’m really comfortable with either, though I like active better,” she said.

To Whitehead, the issue is much more stark. “Why would they want to get around parents’ consent?” he asked. “To me, that looks like deception.”

Expansion halted

Suicide is the third leading cause of death for teenagers in the U.S., according to the American Academy of Child and Adolescent Psychiatry. That said, it’s somewhat rare. Flagler Focus on Youth’s most recent report says that three 15-to-19-year-olds committed suicide every year from 1997 to 2003.

Depression, on the other hand is common, according to Allan Haller, guidance counselor at the school.

“All students suffer from it at some point to some degree,” said Haller. “It’s part of life, and we all deal with it.”

Smith says the TeenScreen results at FPC High correspond to the program’s national average, with about 20–25 percent of the students who take the test referred for counseling. Smith can’t point to any empirical proof that the program made a difference for these children, but says, “As things flow, you get a sense that things are positive. We’re bringing a great deal of education to students, faculty and parents and the program has identified a number of potentially at-risk students.”

For these reasons, Smith had hoped to expand the program into the county’s middle schools and other high school in coming years before the program lost its funding.

Shellenberger says she’s aware of the controversy, likening it to sex education in the schools. “You have some people who can do it and not offend anybody, while someone else might,” she said.

Shellenberger says TeenScreen “is a very good program,” and supports expanding it into the other high school. She says she would need more information before giving the middle-school program the green light. She added that she would support keeping the program, even without the state grant, recalling that it was popular when introduced to the board.

“When it was presented, I think one board member made the comment that this should be done,” Shellenberger said.

Florida legislators made several unsuccessful efforts to weigh in on the issue of mental health screening in schools during this year’s legislative session.

State Rep. Gus Barrera (R-Miami Beach) and Sen. Victor Crist (R-St. Petersburg) supported legislation that would require a five-page parental consent form. It never passed.

TeenScreen representatives and the organization’s Web site say the bill is just another product of an anti-psychiatry movement, spearheaded largely by the Church of Scientology.

“Let me be straightforward,” said Laurie Flynn, director of Columbia TeenScreen. “This is an anti-psychiatry, anti-mental health and anti-children campaign. If I were a citizen of the state of Florida, I would be outraged.”

Meanwhile, other similar programs are gaining support from state and federal lawmakers.

Another bill that died in the Legislature proposed a \$60,000 grant to the Signs of Suicide program to incorporate it into schools statewide.

SOS is similar to TeenScreen, though SOS Program Manager Sharon Pigeon claims the program is more effective.

While Pigeon states, “SOS is not supported by any pharmaceutical funds,” the organization’s income tax exemptions from the last few years appear to show donations in the millions from companies such as Eli Lilly, Pfizer Inc. and Wyeth Pharmaceuticals.

“After I found out what’s going on in these programs and other programs of this nature, I wanted answers,” said Rhoades.

“We felt we needed to step up to the plate and make sure other parents were informed as well.”

Meanwhile, as Williams wraps up the last round of screening in the foreseeable future, she laments the program’s temporary demise.

“I felt pretty sad during this last round of screening that these (depressed) kids won’t be picked up when the grant’s gone,” she said.