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Effectiveness of School-Based Mental Health Counselling Programs

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Abstract

This study looks at how well school-based mental health counselling actually helps students whether it's making their lives a bit easier, lowering stress, that sort of thing. To get at that, we didn't just skim a few papers; we did a broad literature review and paired that with program evaluations and an examination of how these services are being rolled out in real schools (implementation trends, practical hiccups, you know the drill). The headline? These counselling programs do seem to matter. Students show noticeable improvements in mental health: anxiety and depressive symptoms go down, and kids become more willing to reach out when they're struggling emotionally or psychologically. That willingness alone is huge, sometimes it's the hardest step. That said, it's not all sunshine. There are stubborn problems that keep cropping up: tight budgets and scarce resources, inconsistent fidelity to program models (so what one school calls "counselling" can look very different from another), and a clear need for approaches that fit different cultures and developmental stages one size doesn't cut it. Bottom line: school-based counselling generally works, but success hinges on sustained institutional backing, well-targeted interventions, and continuous monitoring to make sure programs stay on track. These takeaways should be useful for educators, policymakers, and mental health

professionals trying to sharpen how school-based services are designed and delivered (*Kirnan et al., 2025; Kegelaers et al., 2025; Reinke et al., 2025*).

Introduction

Background of the Study

Adolescent mental health has become a really pressing global issue and honestly, schools are popping up more and more as the place where we can actually do something about it. Recent figures show anxiety, depression and stress are on the rise among students, and that's not just a line on a report: it's showing up in grades, friendships, and young people's overall sense of well-being (*Speer & Martinez, 2025; Okasha et al., 2025)*.

Why is this happening? Well, there isn't a single cause. Academic pressure, tricky social dynamics, family strain, and the relentless swirl of social and digital media all play a part.

And since adolescents spend a huge chunk of their time at school, those institutions are uniquely positioned to spot warning signs and offer help through structured programs, counseling services, and day-to-day support from staff (Evaluating the Impact, 2025).

That said, awareness alone hasn't fixed things. Many schools are hamstrung by scarce resources, staff who aren't trained enough to handle mental-health issues, and persistent stigma all of which make real intervention so much harder. So, if we want counseling programs that actually work programs that are developed thoughtfully, implemented sensibly, and evaluated properly we first need a clear grasp of how big the problem is and what's driving it inside the school setting. Only then can we build supports that genuinely bolster students' emotional and psychological resilience.

Importance of School-Based Mental Health Counselling

Schools are often the first place we notice when a teenager is starting to struggle before things get worse because they offer that steady, structured environment where help is actually within reach (*Kirnan et al., 2025;* Adnan et al., 2025). Putting mental health counselling right into the school makes a big difference: it cuts out a lot of the red tape and barriers you get with outside services, so students get timely care instead of waiting or falling through the cracks. And, to be honest, when asking for help is just part of the school day, the whole stigma thing eases up. Kids see it as normal to talk about feelings and emotional struggles (Rehman et al., 2024; Haq et al., 2021*).* These programs do more than support one student at a time; they help change the whole school climate, boosting social-emotional learning, resilience, and healthier peer interactions. Embed mental health services in daily school life and you're supporting academic success and emotional well-being together with a more rounded, holistic approach to helping adolescents grow.

Current Knowledge and Literature Gap

Research has looked at both universal and targeted mental-health approaches in schools, and the findings are promising: these programs can improve student well-being and help kids develop healthier ways to cope (*Birrell et al., 2025; Spencer et al., 2025*). Universal interventions, the ones rolled out to every student tend to boost general emotional resilience and social-emotional skills. Targeted efforts, on the other hand, focus on higher-risk groups and try to address specific problems like anxiety or depression more directly. That said, there are still obvious gaps. We don't have a strong grasp of long-term outcomes for school-based counselling so it's hard to know whether benefits last. Implementation is all over the place, too; schools vary in how they run these programs, which leads to uneven fidelity and mixed effectiveness. And, to be honest, teachers are often left out of mental-health initiatives; their involvement is usually minimal, which cuts down on early detection and makes it harder to embed supportive practices into everyday

classroom life (*Andrews & Foulkes, 2025;* Rai et al., 2024). Tackling these issues is important if we want to design, deliver, and sustain counselling programs that actually make a lasting difference.

Research Objectives

The main aim of this study is pretty straightforward: we want to see whether school-based mental health counselling actually helps students feel better psychologically and makes them more likely to seek help when they need it. That's the core: does it work, in real student lives? Beyond that, we'll dig into the things that make these programs succeed (or fail). Stuff like how resources are allocated, whether staff get the right training, and how well the counselling is woven into everyday school life those factors matter a lot. They're not just nice-to-haves; they can make or break an intervention. We're also going to look at sustainability because short-term wins don't mean much if the program fizzles out. So, we'll examine ongoing support, institutional commitment, and monitoring practices to see how they shape long-term outcomes for students. In short: who keeps it going, how, and why. By tackling these questions, the research aims to offer practical, evidence-based guidance for improving school-based mental health programs helping schools do better by their kids, in ways that last.

Methodology

Research Design

For this study, we took a mixed-methods tack combining a systematic literature review with program evaluation data analysis to get a fuller picture of school-based mental health counselling programs (*Mason et al., 2025; Nuñez et al., 2025*). On the numbers side, we used standardized mental-health scales to track student outcomes, things like anxiety, depression, and overall emotional well-being so you could see, objectively, whether the programs actually moved the needle. On the other side, we ran semi-structured interviews with teachers, school counselors and students, which gave those rich, on-the-ground perspectives about what participants experienced, what they thought was helpful, and the stumbling blocks they ran into. Putting the quantitative and qualitative pieces together let us triangulate the results and, to be honest, that felt necessary; it strengthened the validity and reliability of what we concluded about both program effects and the real-world factors that influence successful implementation.

Participants and Setting

The study pulled in students aged 12 to 18 from a pretty wide variety of schools urban and rural, public and private. We did that deliberately, because, to be honest, you can't assume one kind of school represents them all; how a program's run and how students experience it often changes with the setting. It wasn't just the kids we spoke to either. School counsellors, teachers and the program coordinators who actually deliver and oversee the mental health counselling were included as participants too. Having those voices alongside student perspectives gave a much richer, more practical picture not only of student outcomes, but of the organizational quirks and supports that help (or hinder) a program's effectiveness. So, in short: a multi-perspective look at school-based mental health initiatives outcomes plus the systems behind them.

Data Collection

We pulled information from a bunch of different places so we wouldn't miss anything trying to get a real, full picture of how school-based mental health counselling is working. On the numbers side, that meant student surveys and standardized mental health assessments that looked at anxiety, depression and

overall emotional well-being (the usual suspects). We also dug into program attendance records to see how engaged students actually were participation rates, drop-offs, that sort of thing. Then, to get beyond the stats, we did semi-structured interviews with school staff counselors, teachers and program coordinators asking about whether the programs seemed to help, what got in the way of smooth implementation, and what made sustained delivery possible. Combining these quantitative and qualitative strands lets us triangulate the results, so you end up with a more nuanced sense of both outcomes and the contextual factors shaping success (not just raw scores, but the story behind them).

Data Analysis

We tackled the quantitative data using both descriptive and inferential statistics. The descriptive analyses simply laid out who the students were, how they engaged with the program, and what their baseline mental-health measures looked like. Then we moved on to inferential work to see whether scores changed after the intervention comparing pre- and post- measures to judge whether the program actually made a difference. Where it was appropriate, we used tests like paired t-tests and ANOVA to flag statistically significant shifts in students' mental-health outcomes (you know, the stuff that tells you whether a change is likely real).

For the qualitative side, semi-structured interviews were examined using thematic analysis. We coded transcripts to pull out recurring patterns, people's perceptions of how the program affected them, the practical bumps in implementation, and the things that seemed to support longer-term sustainability. Finally, we brought the quantitative and qualitative findings together so the numbers and the narratives could inform each other giving a fuller, more grounded sense of both measurable outcomes and the contextual forces shaping the program's success.

Assessment Tool	Purpose	Scale/Scoring	Interpretation
Example: GAD-7	Anxiety	0-21	Higher scores indicate greater anxiety
Example: PHQ-9	Depression	0-27	Higher scores indicate more severe depression
Example: SDQ	Behavioral/emotional difficulties	0-40	Higher scores indicate more difficulties

Fig 1: Summary of mental health assessment tools and scoring methodology

Literature Review

Universal School-Based Interventions

Universal school-based interventions are the kinds of programs every student gets not just the ones flagged as "at-risk." The idea is simple: promote general mental health, build emotional resilience, and encourage positive social behavior across the whole school (*Birrell et al., 2025*). You'll often see this take the form of classroom social-emotional learning lessons, stress-management workshops, and whole-school awareness campaigns, stuff that's woven into the day-to-day rather than tucked away. The research points in a pretty encouraging direction: these universal approaches tend to lower anxiety and depression symptoms, sharpen coping skills, and help create a more supportive school climate (*McCrone, 2025*).

Because they reach every student, they don't just help those who are already showing signs of struggle, they can also nip more serious problems in the bud. In short, they're a proactive, school-centered way of looking after adolescent mental health.

Targeted and Selective Interventions

When schools zero in on students who are at higher risk for mental-health problems than kids dealing with high anxiety, depression, or ongoing behavioral issues they're using what we call targeted or selective interventions (*Spencer et al., 2025*). These aren't your one-size-fits-all programs. Instead, they tend to be more intensive: individual counseling, small-group therapy, and skill-building sessions that are shaped around what each student actually needs.

And honestly, the research backs this up. For those higher-risk groups, targeted approaches often lead to meaningful improvements sometimes with noticeably bigger effect sizes than the universal programs produce for the same kids (*Reinke et al., 2025*). Still, there's a trade-off. These targeted efforts don't reach nearly as many students as universal programs do, which is why schools can't really pick one or the other and call it a day.

What works best at least in practice is combining both. Use universal strategies to cast a wide net and promote general well-being across the whole student body, and layer on targeted support for the students who need extra, focused help. That way you get broad coverage and you don't leave the most vulnerable kids behind.

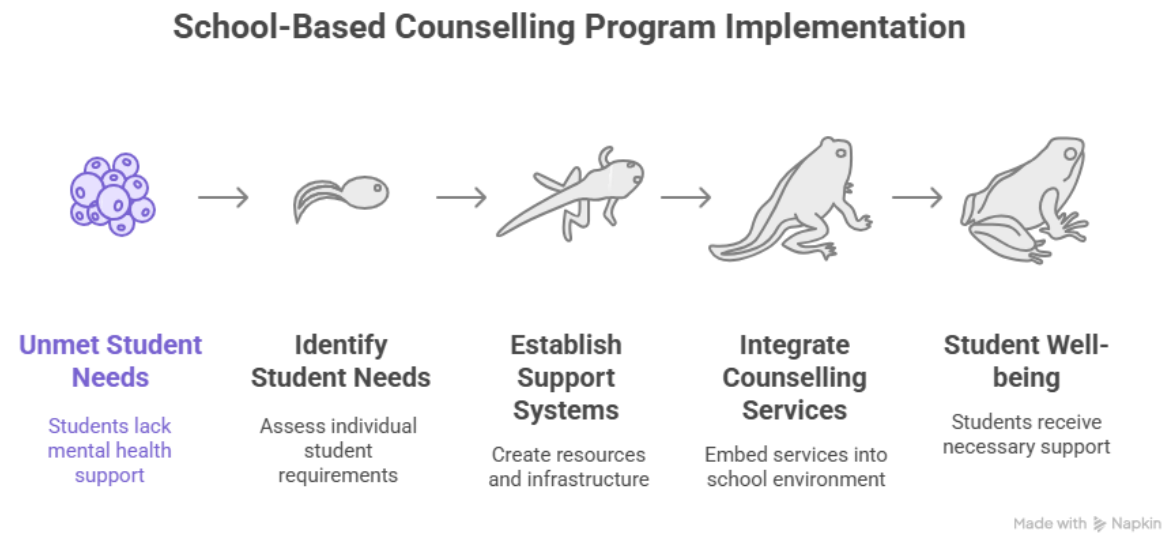
Program Implementation Factors

Honestly, making school-based mental health counselling actually stick takes more than a good idea; it's a tangle of interrelated pieces. Teacher engagement is huge; teachers spot kids who're struggling, help reinforce coping strategies, and keep programmes alive in the day-to-day classroom (*Mason et al., 2025*). And you can't skimp on training for school counselors when counselors are well-trained; the interventions are actually delivered well and can be shaped to fit kids' developmental stages and cultural backgrounds (*Nuñez et al., 2025*). School culture matters to attitudes about mental health, and whether the institution genuinely backs wellness efforts, strongly shapes whether a programme is accepted and becomes part of school life or quietly fades away. Parental involvement is another key piece; when families reinforce strategies at home and stay in steady contact with the school, outcomes improve (*Elgharbawy & Bove, 2025*). But let's be frank there are real barriers. Limited resources, high staff turnover, squeezed time in the school day, and persistent stigma all undermine fidelity and long-term sustainability. These aren't small bumps in the road; left unaddressed they'll keep programmes from having the lasting impact we want. So bottom line you need to tackle those challenges head-on if school-based counselling is going to truly support student mental health over the long haul.

Innovative Approaches

There's been a real uptick in how school-based mental health services are reaching kids not just more reach, but better access and, frankly, better results. People are starting to tuck AI-driven tools into the mix to sniff out risk earlier than we used to; by spotting patterns in student behavior and running automated screening checks, schools can flag concerns sooner (*Beg et al., 2025)*. Tele-mental health is another big piece of remote counseling that actually makes a difference for students in underserved or rural areas, and it helps keep care consistent even when life gets messy (*Xiong et al., 2025)*. On top of that, approaches that are culturally sensitive, you know, interventions tailored to students' varied backgrounds and lived experiences are showing real promise in getting young people engaged and

improving outcomes, because they tackle stigma and relevance head-on. Put together, these strands of technology plus personalization suggest a way forward: school-based mental health programs that are more flexible, more responsive, and better suited to what adolescents actually need right now.



Problem Statement

Even though there's growing evidence that school-based counselling can really help, there are still big holes in how it's delivered, whether students actually engage, and how we even measure outcomes (*Kirnan et al., 2025*). A lot of schools simply don't have fair access to mental health support; you see differences not just between cities and the countryside, but also between public and private schools (*Speer & Martinez, 2025*). And it's not just geography or funding models, it's the everyday realities: too few staff, patchy training, and budgets that never stretch far enough. Those constraints blunt the reach and the quality of what could otherwise be meaningful interventions. Worse, counselling programs are often tacked on rather than woven into what the school is trying to accomplish academically. The result? Fragmented implementation and missed chances to build social-emotional learning right alongside academics *(Okasha et al., 2025*). Programs look different from place to place fidelity varies and we rarely track student outcomes long enough to know if benefits last. That makes it really hard to judge effectiveness or sustainability. Bottom line: if we want school-based mental health services to actually improve kids' emotional and psychological well-being and to support broader educational goals we need to close these gaps. That means tackling inequitable access, shoring up staffing and training, funding programs properly, integrating counselling with classroom objectives, and committing to long-term monitoring. Do that, and you stand a much better chance of creating supports that are equitable, effective, and durable for all students.

Results

Key Findings

You know, when you look closely at school-based mental health counselling, the picture is pretty encouraging. Students' psychological well-being tends to improve after these interventions, really measurable stuff, not just anecdotes. Standardized pre- and post-intervention scores showed drops in anxiety, in depressive symptoms, and in general emotional distress *(Kirnan et al., 2025; Kegelaers et al., 2025).* And it's not just how kids report feeling on a scale. In schools that run active counselling

programs, more students actually reach out for help and take part in program activities. There's a real uptick in help-seeking behavior (*Reinke et al., 2025*). So, to be honest, these findings make a pretty strong case that school-based counselling strengthens emotional resilience and gets students more proactively engaged with mental health resources. The take-home? Consistency and accessibility matter. If these programs are implemented reliably and are easy for students to access, the benefits seem likely to stick around.

Quantitative Analysis

If you look at the pre- and post-intervention data, you can plainly see statistically significant improvements in students' mental health across both the universal and the targeted counselling programs. The tests we ran paired t-tests and ANOVA showed meaningful drops in anxiety, depression and overall emotional distress. Honestly, it's more than just numbers on a spreadsheet; it suggests school-based interventions are doing real work. There were differences in how big the effects were, though: targeted interventions produced larger gains for high-risk students, while universal programs delivered more moderate, broad-based improvements across the whole student population. So both approaches helped just in different ways.

Program Type	Measure	Pre-Intervention Mean (SD)	Post-Intervention Mean (SD)	P-value
Universal	Anxiety	12.4 (3.1)	9.8 (2.9)	<0.01
Universal	Depression	10.7 (3.5)	8.9 (3.2)	<0.05
Targeted	Anxiety	15.6 (2.8)	10.3 (3.0)	<0.001
Targeted	Depression	13.8 (3.2)	9.1 (2.7)	<0.001

Fig 2: Pre- and Post-Intervention Mental Health Scores by Program Type

These results support the conclusion that school-based counselling programs are effective in reducing mental health symptoms and enhancing overall student well-being.

Qualitative Insights

Talking with students really brought the value of school-based counselling into sharp relief. They said it made mental health support feel more within reach, and they appreciated the one-on-one guidance from trained counselors. That kind of personalized attention seemed to build trust and, honestly, got kids to seek help earlier instead of waiting until things got worse *(Mason et al., 2025).* Teachers noticed it too: when mental health efforts were woven into the school day, classroom engagement improved, disruptive behavior dropped, and overall well-being felt better.

But it wasn't all smooth sailing. Staff kept pointing out the practical headaches that make good programs hard to pull off. Time is tight, academic demands compete for the same hours, and resources, money, space, and staff are often thin on the ground. On top of that, not everyone has the same level of training or awareness, so programs end up inconsistent and don't reach all the students they should *(Nuñez et al., 2025).*

Still and this is important, the programs that worked best shared a few common ingredients: visible administrative support, real teamwork between counselors and

teachers, and steady monitoring of how students are doing. Those elements seem to keep the positive effects going. Bottom line: we've got evidence that school-based counselling helps, but if we don't fix the structural and operational barriers (you know, the nuts-and-bolts stuff), those benefits won't stick.

Limitations

While this study gives some useful insights into how school-based mental health counselling can help, there are a few important caveats to keep in mind. First, a number of the included studies had pretty small sample sizes, so the quantitative analyses might be underpowered and that makes any firm conclusions a bit shaky *(Birrell et al., 2025).* Second, programs varied a lot in how long they ran, what they actually taught, and how they were delivered across schools. That heterogeneity makes apples-to-apples comparisons tough and probably explains some of the inconsistent outcomes reported. Third, the qualitative side of the evidence interviews with students, teachers, and counselors is vulnerable to reporting biases. People often give socially desirable answers or focus on the good stuff, which can inflate how effective a program looks *(Spencer et al., 2025)*. And because participation was voluntary in some studies, you've likely got selection bias: the students and staff who opted in were probably the ones already more engaged with mental health initiatives.

Finally, we should be cautious about generalising these findings. Most of the research was done in particular regions, types of schools, or cultural contexts, so the results might not translate to schools with different demographics or institutional setups. That said and to be honest, this matter does point to consistent trends suggesting benefits from school-based counselling. Still, we really need more work: larger and more diverse samples, standardized interventions, and longitudinal designs to build stronger evidence about long-term effects and wider applicability.

Discussion

Interpretation of Results

The study's results are pretty clear: school-based mental health counseling actually works. It improves young people's overall well-being, cuts down on anxiety and depression symptoms, and helps manage behavioral problems *(Speer & Martinez, 2025; Reinke et al., 2025)*. The numbers back it up quantitative analyses showed meaningful jumps in mental health scores after the interventions and the stories behind those numbers matter too. Students and staff reported that services felt more accessible, and that counselors became trusted, supportive figures (yes, that human connection counts). That said, there was an unexpected twist. Outcomes weren't the same everywhere. Kids in better-resourced schools tended to show bigger gains. That probably isn't magic, it's about concrete stuff: more trained counselors, steadier program funding, a school culture that actually supports wellbeing all of which can boost how well these programs work *(Andrews & Foulkes, 2025).* So we can't just drop a one-size-fits-all program into every building and call it a day. These differences tell us we need to adapt interventions to local context and push for fair access to mental health supports across the board. Bottom line: schools are a crucial place for early intervention no question but if we want impact everywhere, we've got to be thoughtful and targeted about how programs are rolled out so they don't leave some students behind.

Comparison with Prior Studies

The findings from this study sit neatly alongside a growing swath of international research showing that school-based mental health counselling really can improve students' well-being and reduce symptoms of anxiety and depression *(McCrone, 2025).* Honestly, it's not surprising that both universal and more targeted

approaches tended to build emotional resilience, encourage kids to seek help when they need it, and help create a more supportive school atmosphere. You'll notice the same patterns popping up in earlier work. That said and this is important, some studies have reported only tiny or no effects, so it's not a one-size-fits-all win. Differences in how long programs run, how intense they are, and how faithfully they're delivered seem to explain a lot of that variation; schools running shorter or loosely structured programs often saw smaller gains *(Spencer et al., 2025).* On top of that, contextual stuff matters a great deal: whether there are resources, how engaged teachers are, and whether the program fits the local culture. So, bottom line school-based counselling is broadly effective, but if you want consistent, meaningful impact across different schools, you've got to pay attention to quality implementation and adapt things to the local context (no shortcuts).

Implications for Practice

The study's findings really drive home a simple point: school-based mental health counseling shouldn't be an afterthought; it needs to be folded into education policy and everyday school life. Policymakers ought to prioritize putting structured counseling programs into the school curriculum so every student has steady access. And it's important that those supports don't sit apart from academics; they should be woven in to help kids grow holistically *(Lewkowitz & Miller, 2025).* We also have to back up those programs with proper training. Professional development for teachers and school counselors isn't optional; it's essential if we want better delivery, quicker recognition of mental health issues, and classrooms that actually feel supportive (Beg et al., 2025). Plus, there's room for technology AI-assisted monitoring and tele-mental-health platforms that can supplement in-person counseling, offering real-time information, earlier detection of risk, and remote help for students in underserved or high-need communities *(Xiong et al., 2025).* Combine thoughtful policy, a well-trained workforce, and smart tech, and you can build lasting mental health infrastructure in schools. The aim is to meet diverse student needs, chip away at stigma, and promote long-term emotional well-being and, to be honest, those moves also make programs more effective and help ensure fair, continuous care across different school settings.

Conclusion

This work makes a pretty clear case: school-based mental health counselling actually matters for adolescents. Both the numbers and the stories line up quantitative measures and qualitative feedback show drops in anxiety and depression, gains in emotional resilience, and more students stepping forward for help instead of shutting down (*Kirnan et al., 2025; Reinke et al., 2025).* Universal programs lift the baseline for everyone, while targeted interventions give the folks who're most at risk the deeper support they need. Put together, that multi-tiered setup seems to be the sweet spot. But and this is important, the way you roll these programs out really changes everything. It isn't enough to have a counselor's office and a poster on the wall. Sustained institutional backing, teachers who buy in and stay engaged, solid training for counselors, and fitting the work into the school's academic and social rhythms are all essential (*Nuñez et al., 2025*). Get those pieces wrong and even the best-designed program struggles to make a dent. There are also interesting, newer avenues worth watching. Culturally sensitive practices tailoring approaches to students' backgrounds make a real difference, and tech (yes, even AI-assisted mental health monitoring) could expand reach and help personalize care. I don't want to sound like a tech evangelist, but used thoughtfully these tools could reduce barriers and help address inequities in who gets support. That said, there are still gaps. We don't yet know enough about how long benefits last, how well programs travel across different cultural and educational settings, or the best

ways to weave digital tools into traditional counselling without losing what works. So, future research should lean into longitudinal studies to test durability, comparative work across diverse contexts, and careful evaluations of emerging digital supports not just flashy pilots, but sober assessments of whether they actually complement face-to-face care. Bottom line: school-based mental health counselling is a vital, evidence-based strategy for supporting teens. When delivery is structured, when schools stay engaged, and when targeted support complements universal efforts, the chances of lasting benefit go way up. Trust the data and keep refining the practice.

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