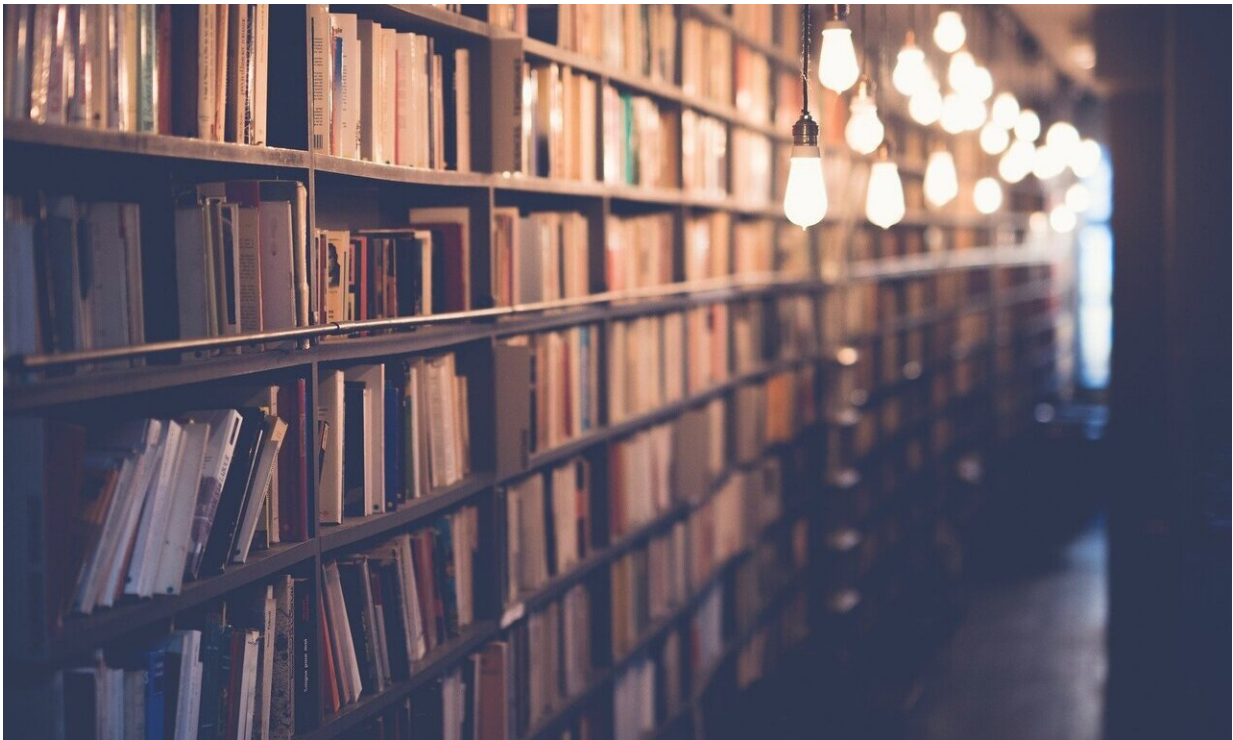


Increased school choice linked to better mental health for students

December 4 2020



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Allowing families to choose schools that are more suited to their children may play a key role in improving student mental health, including reducing adolescent suicide rates, suggests new research published in the peer-reviewed journal *School Effectiveness and School Improvement*.

The study is the first of its kind to examine the relationship between U.S. [school choice](#) policies and teen suicide and [mental health issues](#).

U.S. states are expanding private school options through [charter schools](#)—which are publicly funded but granted charters to operate outside many of the regulations of regular neighbourhood schools—and voucher programs for students to attend a private school of choice. More than 6% (over 3.1 million) of all public school students attend charter schools, and over 5.7 million students attend private schools. However, little is known about whether these choices affect students' mental health.

The U.S. National Institute of Mental Health estimates that around half of teenagers (aged 13-18 years) will experience a mental health disorder in their lifetime. Between 2007 and 2015, suicide rates doubled among girls aged 15-19 years, and rose by 30% in boys of the same age. Suicide is the second leading cause of death in Americans aged 15-34 years old, and the third in those aged 10-14 years.

To examine the relationship between school choice and adolescent suicide and the impact of private schooling on adult mental health, researchers analysed public and private school data from 49 states between 1976 and 2016, coupled with nationally representative data from 4,353 students participating in the 1997-1998 cohort of the National Longitudinal Survey of Youth (who were followed up for around 15 years).

The findings suggest that states adopting voucher and charter school choice laws witnessed declines in [suicide rates](#) among young people, even after accounting for demographic (e.g., age, race) and economic (e.g., unemployment rate, percentage of state below poverty line) factors. The researchers estimate that the effect of the charter school law translated to around a 10% decline in the suicide rate among 15 to 19-year-olds.

Further analyses of survey data suggest that private schooling was associated with better mental health in adulthood, even after controlling for important sociodemographic and health factors including gender, parental education level, household income, race, and measures of mental health near the start of the study.

Compared with [public schools](#), individuals attending private school were about 2 percentage points less likely to report having a mental health condition at around 30 years old, and to be treated for a mental illness.

"Our findings raise the question of whether increased school choice could improve students short- and long-term mental health", says Professor Angela Dills from Western Carolina University, NC, U.S. who co-led the research. "It's likely that private schools face stronger competitive pressures to provide a safer school environment and improve mental health if they want to remain open. Public schools, on the other hand, are more likely to be burdened with government regulations that make it difficult for them to control discipline policy and create strong school cultures."

According to co-lead author Corey DeAngelis from the Reason Foundation in Washington, DC, U.S.: "Our results suggest that expanding school choice could help address the roots of the [student](#) mental health problem. Unfortunately, many students are stuck in unhealthy or unsafe [school](#) environments, which can have extremely harmful effects on their mental [health](#). With further research the mechanisms that promote [mental health](#) in charter schools and [private schools](#) could be identified."

More information: Corey A. DeAngelis et al, The effects of school choice on mental health, *School Effectiveness and School Improvement* (2020). [DOI: 10.1080/09243453.2020.1846569](https://doi.org/10.1080/09243453.2020.1846569)

Provided by Taylor & Francis

Citation: Increased school choice linked to better mental health for students (2020, December 4)
retrieved 26 April 2024 from

<https://medicalxpress.com/news/2020-12-school-choice-linked-mental-health.html>

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