

Mental Health or Discipline? Exploring School Counselors' and School Administrators' Perspectives on Black Youth Suicide Prevention

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ABSTRACT

Despite increased concerns for mental health among Black students and ongoing concerns related to severe disciplinary practices used with Black students, limited research has explored perspectives of how these issues may intersect to impact suicide risk. We recruited 13 professionals (3 administrators, 10 school counselors) in a southeastern state in the United States to complete focus group interviews examining beliefs and attitudes around racial disproportionality in mental health care access, referrals, and disciplinary practices. Thematic analysis revealed that while participants acknowledged efforts to address disparities for Black students, they identified urgent gaps in faculty training, culturally responsive practices, and comprehensive school-based mental health services. Framed by a Biopsychosocial Ecological Model and a Justice, Equity, Diversity, and Inclusion (JEDI) approach, findings highlight the structural inequities can contribute to mental health issues for Black students and call for policy, practice, and intervention strategies for reducing suicide risk in Black youth.

Keywords: Black adolescents, suicide, mental health, school discipline

Black students in K-12 schools are disproportionately subjected to exclusionary and punitive disciplinary policies and practices — including suspensions, expulsions, and referrals to law enforcement. These practices increase the likelihood of youth involvement in the criminal justice system, fueling the persistent cycle of the school-to-prison pipeline (Girvan et al., 2017; McCarter, 2016; Skiba & Losen, 2016; Young & Butler, 2018). These students are less likely to be referred or seen for mental health concerns (Barksdale et al., 2010) and face significant obstacles to academic achievement. Exclusionary and punitive disciplinary practices not only disconnect Black students from critical educational opportunities, but also intensify existing mental health disparities; increase risks of depression, anxiety, and trauma-related symptoms (Anderson & Ritter, 2017; Marraccini et al., 2023; Bryan et al., 2018; Butler-Barnes & Inniss-Thompson, 2020); and contribute to the rising rates of suicide among Black male students (Marraccini et al., 2023; Price & Khubchandani, 2019). Because the mental health implications of exclusionary and punitive disciplinary practices are often overlooked, there is an urgent need to reframe discussions about school discipline with a more comprehensive, trauma-informed approach that prioritizes the well-being of Black students.

Unfortunately, suicide in Black youth is considered a growing crisis, with deaths due to suicide increasing among Black youth faster than in other racial or ethnic groups (The Congressional Black Caucus, 2019). Theoretical frameworks for suicide identify systemic and structural racism as a key driver of poor health outcomes in Black individuals (Opara et al., 2020), necessitating inquiries into how schools may influence Black youth suicide. Therefore, this study explores perspectives on how school system practices around mental health and exclusionary discipline can inform suicide prevention. Specifically, we explored how school counselors ($n = 10$) and school administrators ($n = 3$) view the intersection between disciplinary referrals and mental health outcomes, with a particular focus on Black youth, by answering the questions: “How do school counselors and school administrators in K-12 schools perceive and implement their disciplinary and mental health referral policies and practices?” and “In what ways do these approaches support or hinder suicide prevention efforts for Black students?”

Discipline Practices in Schools

Exclusionary discipline in schools are those punishments that remove students from the classroom. These types of punishments disproportionately affect students from marginalized backgrounds, with Black students facing harsher and more punitive discipline measures than White students (Del Toro & Wang, 2023; Owens, 2022; Skiba et al., 2014). Anderson and Ritter (2017) found that Black students in Arkansas were suspended at significantly higher rates than White students (even after controlling for socioeconomic status), pointing to racially biased disciplinary practices. Administrative decision-making around discipline may contribute up to 46% of the suspension/expulsion gap between Black and White students (Owens & McLanahan, 2020). Teacher race is also a significant factor contributing to the discipline gap in K-12 schools. Lindsay and Hart (2017) found that Black students with same-race teachers are substantially less likely to receive exclusionary and

punitive disciplinary actions, underscoring the importance of racial representation and culturally responsive relationships in reducing discipline disparities.

In recent years, there have been attempts to shift from exclusionary and punitive discipline practices to practices that foster more fair, equitable and positive school cultures. Restorative justice practices focus on cultivating trusting relationships and minimizing harm to students, as opposed to punitive and zero tolerance discipline practices (Lodi et al., 2021). Findings from an evaluation study conducted with the Chicago Public School system indicated that middle and high schools adopting restorative justice practices evidenced an 18% reduction in out-of-school suspensions and students' perceptions of positive school climate increased (University of Chicago Lab, 2023). Unfortunately, restorative practices programs can be met with resistance from school staff, who may feel that students are not being disciplined for their behaviors. For restorative practices to work, they must be consistently applied in settings with school-wide buy-in (Hashim et al., 2018).

Mental Health Among Black Youth

Rates of suicide-related thoughts and behaviors among Black youth have increased in recent years (Lindsey et al., 2019), and scholars assert that unfair and punitive discipline practices exacerbate mental health issues for Black youth (Owens & McLanahan, 2020). Black adolescents encounter racial discrimination and experience racism at higher rates than those from other racial groups (Alliman-Brisset & Turner, 2010; Forrest-Bank & Jenson, 2015), and these experiences can negatively impact their mental health (Watson-Singleton et al., 2021). When adolescents experience untreated mental health challenges, they face increased risks of depressive symptoms, suicidal ideation, and heightened physical aggression (Yu et al., 2017). These risks are even more pronounced for Black adolescents, who are disproportionately subjected to punitive discipline, systemic discrimination, and racialized stressors within school and community contexts and are less likely to receive mental health support in schools (Banks & Kohn-Wood, 2002; Williams et al., 2023).

School Counselor and School Administrator Roles in Discipline

Although discipline practices are influenced by local, regional, and state policies, key influencers of implementation include school administrators (e.g., principals) and other school support staff, such as school counselors (Welsh & Little, 2018). School counselors are trained to address the mental health, academic, and college and career planning needs for students (American School Counselor Association [ASCA], 2019). School counselor duties also include advocating for students in the discipline process, as counselors are trained to understand the psychological impact of discipline on student mindsets and behaviors (Bowers et al., 2017). Unfortunately, systemic constraints faced by school counselors, such as role ambiguity and conflict, high student-to-counselor ratios, and limited training in evidence-based mental health practices, limit their ability to meet the mental health needs of their students.

Interviews with 26 high school counselors serving students across the socioeconomic and academic spectrums confirmed that counselors are experiencing both role ambiguity and role conflict, regardless of setting; these counselors reported that conflicting roles adversely impacted students' perceptions of counselors' abilities to meet their social and emotional needs (Blake, 2020). School counselors' responsibilities as stewards of mental health can conflict with the expectations and beliefs of other school members (e.g. parents, students, administrators, and mental health professionals). Role conflict may also result from overlapping responsibilities with others in similar roles (i.e., school social workers), as well as insufficient performance evaluation metrics (Blake, 2020).

The high student-to-counselor ratios, due to a limited number of adequate mental health support staff employed in schools, can also constrain the work of school counselors. Although ASCA recommends a student-to-counselor ratio of 250:1 (ASCA, n.d.), most school counselors carry caseloads that far exceed this recommendation. Schools that hire more school counselors, school psychologists, and school social workers tend to have lower suspension and expulsion rates, as mental health professionals can intervene before behavioral issues escalate into disciplinary problems (Whitaker et al., 2019).

Limited suicide training and awareness in counselor preparation programs also constrain school counselor practices. Becnel and coauthors (2021) surveyed 226 ASCA members and found that almost 40% of respondents reported no suicide prevention training in their counselor preparatory programs, 61.5% reported no suicide post-graduate training, and more than two-thirds reported no graduate or post-graduate training in crisis intervention. Unfortunately, without adequate mental health training, school counselors may be less competent in recognizing mental health as a factor in discipline procedures.

Finally, school administrators, who are often directly responsible for administering disciplinary actions, play a central role in shaping the implementation of school discipline policies. Thus, examining how administrators view discipline practices and policies and considering their roles along those of school counselors is an important area of inquiry. Indeed, Lindstrom Johnson et al. (2018) suggest that school administrators tend to prioritize maintaining order and enforcing school policy, while school counselors tend to focus on addressing the underlying causes of student behavior, such as mental health concerns. Scholars (e.g. Bowers et al., 2017; Hines et al., 2022) assert that both school counselors and school administrators play a critical role in disrupting the negative impacts of exclusionary discipline on Black students through approaches such as trauma-informed practices. Thus, it is pivotal that administrators integrate these practices into their discipline policies.

Theoretical Framework

This research sits at the intersection of two theoretical frameworks. First, the design of the present study was developed based on the Trauma and JEDI-Informed Suicide Prevention Model in Schools (Marraccini et al., 2023). This model, based on trauma-informed approaches and a Justice, Equity, Diversity, and Inclusions (JEDI) lens, is rooted in the historical and current sociopolitical contexts that influence

students' outcomes. It emphasizes positive relationships and linkages to care that are effectuated by a culturally responsible school and community-based care teams. This approach also acknowledges the impact of racial trauma on Black youth and supports suicide prevention by fostering a culturally inclusive environment and amplifying protective factors for suicide. To undergird the research, we also emphasize the importance of context on students' development and outcomes.

The Biopsychosocial Ecological Model further helps contextualize the ways in which race and mental health may intersect in the educational setting, and we drew from this model to inform data analysis and interpretation. In schools, this model centers the student, including their biology (e.g., genetics and epigenetics, physical health) and psychology (e.g., race and ethnicity, mental health), within multiple layers that transact to shape their development, behaviors, and health. Environmental influences on student ontosystem include: the microsystem or the immediate environment surrounding the individual (e.g., family, school, peers); the mesosystem or the connections between microsystems (e.g., interactions between microsystems); the exosystem or larger environmental setting (e.g., extended family, media, government, social services); the macrosystem or the societal context and influences on that individual (e.g., sociopolitical context, policy and laws, cultural beliefs and ideology); and the chronosystem or dimensions of time (Bronfenbrenner, 1979; Kranzler et al., 2020). This model helps school-based research address the complexity of individual needs within prevention and intervention models, moving away from the "one-size fits all model" traditionally adopted in these settings (Kranzler et al., 2020). When considering the development of mental health difficulties among Black youth specifically, we can consider how a student's behaviors may be influenced by their families and peers, and how incongruence between the cultural norms of homes and schools (i.e., mesosystem), as well as implicit biases among teachers and staff stemming from exosystem norms, may intersect to influence decisions determining disciplinary actions versus mental health referrals.

METHODS

This qualitative study explored school counselor and administrator perceptions of discipline and mental health when working with Black youth. This study was conducted over two weeks during the summer of 2024, and is part of a larger mixed-methods research study examining school-based influences of suicidal ideations and behaviors among Black youth.

Participants

The participants for the qualitative portion of the study included three administrators (elementary school, $n = 1$; middle school, $n = 1$; high school, $n = 1$) and 10 counselors (K-12, $n = 3$; elementary school, $n = 2$; middle school, $n = 2$; high school, $n = 3$). This sample allowed for diverse perspectives across educational levels and professional roles within the school system.

Inclusion criteria for participants were currently working in a K-12 school as a school counselor or school administrator. Participants were asked to identify their

gender and race if they felt comfortable doing so. All participants identified their gender as female. Four participants identified their race as Black; all other participants identified their race as White.

Procedures

Study procedures were reviewed and approved by the university's Institutional Review Board. Based on their roles with discipline and mental health, school counselors and school administrators were selected for recruitment. Although other support professionals, such as school psychologists and school social workers would also provide important insight into these areas, our study focused on practicing school counselors given their role in developing school-wide, comprehensive counseling services to support all students in schools, and previous research indicating they are heavily involved in suicide risk assessments and referrals (Marraccini et al., 2019). Purposive, convenience, and snowball sampling were used to recruit school counselors and school administrators for this study. Purposive sampling strategies are strategic and require the selection of cases based on the study's purpose and available resources (Patton, 2002). In this case, purposive sampling addressed school levels of each professional (with balanced representation at elementary, middle, and high schools). Snowball sampling, in which participants were asked to help recruit other school counselors and to invite their school administrators to participate, was also used (Patton, 2002).

Flyers with the study information were emailed to school counselors serving as site supervisors for a state university school counseling program. Flyers were also disseminated to the School Counseling Consultant in the state of the study, who sent the information to the school counseling listserv for the state. School counselors were also asked to share within their own schools, districts, and networks. School counselors who were interested in participating were then asked to invite their school administrator to participate.

Once the participants agreed to the study via email, participants attended one of three focus group interviews. All focus groups were conducted and recorded via Zoom. The researchers provided a verbal overview of the study, allowing time for questions from participants, and participants then reviewed and completed consent forms. All three focus groups lasted between 90 minutes to 2 hours. Participants were compensated with a \$150 gift card.

Measures

The focus group involved a semi-structured interview guide designed to answer the study research questions. The guide included 12 main questions that addressed the areas of discipline, mental health, suicide, inequity, with a focus on how these areas were enacted or considered for Black students. Example questions include "Talk to us about the disciplinary procedures and guidelines at your school" (discipline), "Talk to us about the mental health referral procedures and guidelines at your school" (mental health), and "What inequity issues exist in identifying students having suicidal thoughts and behaviors?" (inequity and suicide).

Data Analysis

Thematic analysis, as outlined by Braun and Clarke (2006), was employed to systematically analyze the focus group interview data. This qualitative research method is designed to identify, analyze, and interpret patterns of meaning—or themes—within qualitative data. An inductive coding approach guided the analysis, allowing patterns to emerge directly from participants' narratives rather than being constrained by pre-established theoretical frameworks. This approach ensured that the lived experiences and perspectives of participants meaningfully informed the study's findings.

Braun and Clarke's (2006) six-phase process provided a structured framework for conducting the analysis. In the first phase, two members of the research team became familiar with the data by reading and rereading the transcribed interviews, recording initial impressions and noting potential codes. This immersion in the data allowed for researchers to develop a nuanced understanding of participants' experiences. In the second phase, these same team members independently generated initial codes manually, ensuring that each coder's interpretations were captured without influence from the other.

During the third phase, the research team collaboratively reviewed and organized the codes, identifying patterns and relationships within and across the data. This process led to the development of a preliminary codebook, which categorized emerging themes. The fourth phase involved a comprehensive review of these themes to assess their coherence and accuracy in representing the dataset. To enhance the dependability and credibility of the analysis, the transcribed interviews and codebook were uploaded into Dedoose (2021), a qualitative data analysis software program. A third member of the research team then independently reviewed the coding and thematic structure, verifying consistency and resolving any discrepancies through consensus discussion.

In the fifth phase, the research team refined, defined, and named each theme, ensuring that they were distinct, comprehensive, and accurately reflected the data. The final, sixth phase involved organizing and presenting the findings, with each theme supported by rich, representative quotes from participants to illustrate the underlying patterns of meaning.

Throughout the analysis, the process remained iterative and reflexive to enhance the trustworthiness, credibility, and rigor of the study's qualitative findings.

Positionality

Our team includes faculty at a research university, a graduate student research assistant, and a post-bachelor research assistant. Each member brings a unique lens to the study, with each of the three faculty trained in separate disciplines (school counseling, school psychology, and educational policy), and all members bringing varying personal and professional experiences in addressing mental health among Black youth. The diversity in our identities and roles supported a rich dialogue for shaping meaning-making in our analysis, in which all members acknowledged their position and power while voicing their ideas, and explicitly considered alternatives

to their perspectives. Moreover, we considered the power structure of our team when engaging in this research, including opportunities for members in different positions to consider and discuss findings in different settings and with different team members.

FINDINGS

Eight themes were generated from the data: Balancing Restorative Justice and Accountability; Systemic Challenges in Mental Health Support; Intersection of Discipline and Mental Health; Cultural and Societal Influences at the Intersection of Race and Mental Health; Community and Family Dynamics; Fostering School Belonging using Student-Centered Approaches; Proactive Mental Health Strategies; and Complexity of Suicide. In the following sections, we describe each theme, illustrating them with participant voices to highlight the complexity of discipline and mental health in schools.

Balancing Restorative Justice and Accountability

A central theme that emerged across focus groups was the need for equitable, yet flexible, disciplinary procedures that account for both student mental health and the broader racial disparities present in school discipline. Participants emphasized the potential of restorative justice practices to reduce exclusionary discipline and foster more inclusive school climates; however, they consistently pointed to inconsistent implementation and varying levels of staff buy-in as barriers to success.

An elementary school counselor reflected on this challenge, noting that while her school uses restorative practices, "there's still some continued work to be done" in fully implementing and equitably documenting restorative practices. She described ongoing conversations with her school administrator about ensuring discipline referrals are fair, asking, "Are we documenting equitably... looking at our students of color, looking at our White students?" She also emphasized the importance of considering mental health, students' backgrounds, and external factors when addressing behavior. Another elementary counselor echoed these concerns, adding that despite discipline procedures being grounded in restorative principles, some teachers still prefer punitive measures, creating inconsistencies in practice.

Participants also described how they attempt to balance equitable approaches with teachers' expectations around discipline. One elementary administrator highlighted her collaborative relationship with the school counselor, ensuring that every disciplinary decision is paired with a discussion of underlying mental health, as well as the behavioral or environmental factors contributing to the incident. A middle school administrator shared that while she considers mental health and disability status when determining suspensions, disparities often emerge at the referral stage, where teachers' perceptions and implicit biases heavily influence which students are sent to the office for disciplinary action. This observation was met with visible agreement across participants.

Collectively, participants agreed that restorative practices, when implemented consistently and with adequate training and a culturally responsive framework, offer a meaningful strategy for addressing both discipline inequities and student mental

health needs. Participants also emphasized that much of this responsibility falls on those initiating discipline referrals, typically classroom teachers, identifying this as a critical intervention point for reducing disparities.

Systemic Challenges in Mental Health Support

Another significant theme centered on the systemic barriers schools face in addressing student mental health needs. Participants highlighted numerous challenges, including limited mental health resources, complex referral processes, and obstacles within the broader community. A high school counselor illustrated these barriers, describing how families in her district face transportation difficulties, long wait times, and understaffed community clinics. She explained that even when services are available, the mode of delivery — such as virtual evaluations — can be ineffective for students in crisis, particularly those experiencing suicidal ideation.

While school counselors voiced a clear need for additional in-school mental health staff to adequately meet student needs, one middle school counselor reflected on the difficulty of providing meaningful support, even if staffing increased. The participant explained, “Even if we had three more full-time people, I’m not sure I’d feel like it was enough.” Administrators, however, tended to emphasize partnerships within existing school structures over increasing mental health staffing alone. One administrator discussed the importance of collaborating with school resource officers (SROs), advocating for full-time officers in schools to assist with students struggling with mental health concerns, particularly in moments of crisis or escalation.

In sum, while all participants acknowledged the significant barriers schools face in addressing mental health needs, counselors and administrators expressed different perspectives on potential solutions. School counselors prioritized increasing the number of dedicated mental health professionals, while administrators leaned toward strengthening internal partnerships with staff like SROs and other school personnel.

Intersection of Discipline and Mental Health

Participants discussed the need to integrate mental health awareness into disciplinary practices effectively, and balance disciplinary actions with mental health awareness. This theme also encompassed considering the impact of trauma and systemic inequities when interpreting behaviors and addressing discipline and mental health. A high school counselor described how perceptions of student behavior are shaped by race and unconscious bias. She explained that while a second grader sleeping in class might prompt concern about home circumstances, “for a high school Black male student, it’s not a sign of depression or a suicide risk, it’s a sign of disrespect.” This participant emphasized that mental health concerns among Black youth are frequently misinterpreted as behavioral problems, noting these behaviors are “thought of in different ways” and too often dismissed as defiance rather than recognized as potential indicators of distress. She went on to state that these misinterpretations reflect broader patterns of unconscious bias within school environments.

Along these lines, a high school administrator described the difficulty in distinguishing between behavioral and mental health difficulties, admitting, “I don’t know that I can, and I think that’s one of the struggles.” Even with a background in school counseling, she shared that her tendency to consider underlying factors often leads faculty to perceive her as “too soft,” creating internal conflict between enforcing discipline and addressing students’ mental health needs. In summary, all participants acknowledged the need to distinguish between behaviors as actual behavioral problems or mental health issues, while also acknowledging the difficulties in doing so.

Cultural and Societal Influences at the Intersection of Race and Mental Health

Participants discussed how the misinterpretation of Black students’ behaviors as aggression stems from a lack of cultural competence in addressing diverse student needs. They also acknowledged how structural racism is a contributing factor to mental health disparities and how Black students’ behaviors can be misinterpreted as aggression, leading to harsher consequences, or leading to special education referrals. Yet, there was a lack of consensus, with some agreeing bias in the discipline process exists and others believing that bias is not related to race or gender. One elementary school principal explained that her “staff responds consistently and equally to all students, addressing concerns, incidents, or alerts by screening and supporting them as needed.” A middle school principal agreed that race is not considered when responding to student concerns: “We just automatically take action.”

Some participants perceived minimal inequity in how mental health and safety concerns are addressed in their schools. A K-12 school counselor suggested that disparities were less about race or gender and more influenced by “bias in thinking somebody knows somebody and knows how they feel.” Similarly, an elementary school counselor asserted, “I don’t really think we have any inequities that exist there,” emphasizing that when a child’s safety is involved, “race, background... all of that goes out of the window.” These perspectives reflect a belief among some staff that responses to student crises are equitable, though this sentiment stands in contrast to broader concerns about disproportionality raised by other participants. For example, a middle school counselor expressed that Black students’ mental health concerns are often overlooked, with behaviors being misinterpreted. She explained that “the behaviors...aren’t always...suspected as mental health,” and that Black students, in particular, are frequently assumed to have “different intents or malintent.”

Collectively, the majority of the participants said that inequity issues are not present when it comes to their mental health and discipline procedures, yet still acknowledged that most students referred for discipline are Black students. All of the participants agreed with the sentiments of one elementary school counselor, who reflected on patterns of disproportionate referrals for Black students, stating that she and a colleague do discuss how “these particular students who are Black are being referred to us a lot more often for behavioral issues than other students.” Participant agreement highlights an awareness of this disparity, and also a desire to address it from the counseling perspective.

Family Dynamics

A recurring theme across participant discussions involved the critical role of family attitudes in either facilitating or hindering students' access to mental health services. Many participants described how families' reluctance, disbelief, or inability to engage meaningfully with mental health interventions often presents a major barrier to addressing students' needs. An elementary school counselor explained that families "are sometimes against mental health services, and so that's a barrier for the kids because the students, they really need the services. They really need the support, but their parents are not supportive."

This sentiment was echoed by others, who noted that even when services are made available, caregivers' resistance or skepticism can prevent students from receiving timely or effective care. A second elementary school counselor discussed challenges with families dismissing youth mental health concerns, noting that suicide attempts are sometimes minimized as "just wanting attention." She recalled a parent questioning their child's suicide attempt and highlighted a common sentiment of "What do you have to be stressed or upset about? You're a kid."

While most participants reported ongoing challenges in engaging families, one high school counselor observed positive shifts in her school community, noting, "I appreciate the fact that there's more sense of freedom when a student needs a mental health day. I'm seeing more support from parents in that too." In sum, participants' experiences reveal a complex relationship between families and school-based mental health interventions.

Fostering School Belonging using Student-Centered Approaches

Participants described the essential role that school connectedness, positive teacher-student relationships, and supportive school environments play in promoting students' mental health and well-being. A counselor at a K-12 school emphasized the importance of relationship-building within the school, noting that the school's focus on restorative practices and its small size allows for strong connections among K-12 students, teachers, and staff. She highlighted that "knowing students" is a critical aspect of supporting mental health. Similarly, a middle school counselor also identified "school connectedness" as a key growth area, advocating for programs that build community and accountability "across grade levels" to strengthen student belonging and relationships. A middle school administrator acknowledged the value of connectedness while identifying it as an area for growth in their own school community, noting that staffing shortages and a lack of consistency in staffing hurt the ability to build those essential relationships, which are critical for addressing students' needs and concerns.

Together, these perspectives reveal a shared understanding among participants that fostering strong teacher-student relationships, a sense of belonging, and a connected school community are key protective factors for student mental health. At the same time, participants highlighted both structural and staffing barriers that can impede these efforts, signaling the need for intentional, system-wide strategies to strengthen school connectedness and relationship-based mental health supports.

Proactive Mental Health Strategies

Participants emphasized the critical importance of proactive, tiered intervention systems and early identification of student mental health concerns. School-based resources, both physical spaces and personnel support, were highlighted as essential tools for addressing students' emotional needs before issues escalate into crises. One elementary school counselor highlighted the creation of a sensory room to support student regulation, stating, "We built a sensory room that's down the hallway from my office where students can regulate and spend some time there." She praised staff for effectively utilizing the space, noting that they are "recognizing when students need to take their break and regulate" to enhance learning.

Similarly, another elementary school counselor noted the availability of a calming or Zen room for students needing a safe space to regroup. In secondary schools, where physical space may be more limited, participants identified how creative adaptations to support students' mental health were implemented. A high school counselor shared that at their school they developed alternative ways to be proactive by establishing a designated space for students to take breaks or request counseling, though not a fully equipped "mindful room." The space includes calming tools such as fidgets, low lights, and music, along with coloring materials. After using the space, students engage in a check-in with the student services staff, integrating support into the school's broader mental health resources.

Taken together, these accounts reflect a shared recognition among school counselors and administrators of the value of tiered mental health interventions and accessible resources within the school environment. Whether through dedicated sensory rooms, calming spaces, or designated counseling time, participants described the importance of creating responsive systems that meet students where they are, offering early and ongoing support to address emotional challenges before they escalate.

Complexity of Suicide Identification, Awareness and Prevention

Participants identified significant challenges in recognizing suicide-related risk, particularly among racial minoritized youth, and expressed concern over the lack of culturally responsive training and resources in this area. While participants demonstrated awareness of increasing suicidal ideation among youth, they highlighted persistent gaps between recognizing warning signs and effectively addressing the unique experiences of Black students in mental health and suicide prevention efforts.

A middle school administrator emphasized the importance of comprehensive training, calling for professional development opportunities that address mental health, suicidality, and equity-based systemic reforms. This approach includes reducing referral barriers, minimizing wait times for services, and incorporating suicide prevention strategies into teacher and administrator preparation programs. Several counselors underscored that such training must intentionally center the experiences of Black youth. One elementary counselor noted the absence of suicide

prevention training tailored to racial minoritized students, stating, “We need realistic options and education on the experience of Black youth, because I’ve never received anything specific to people of color when it comes to suicide risks or behaviors.”

A high school counselor added that suicide prevention efforts must be coupled with foundational racial equity work at the school and district level. Without it, staff may struggle to acknowledge racial disparities in suicidality and mental health outcomes. The counselor explained, “If a school doesn’t talk about race or racism, this would be a topic folks would really struggle with.” Finally, an elementary counselor raised concerns about the limitations of current district training, pointing out that existing suicide prevention programs exclude any racial equity components. She suggested this omission may overlook the compounded risks faced by students of color navigating systemic racism as an ongoing trauma.

Together, these perspectives highlight a critical need for culturally responsive, equity-driven suicide prevention training, as well as resources that recognize how systemic inequities and racial trauma uniquely impact the mental health of Black students. Without intentional efforts in this area, schools risk perpetuating gaps in both suicide risk identification and intervention.

DISCUSSION

The present study explored how school counselors and school administrators consider the intersection of discipline and mental health in Black students, enhancing our understanding of the potential impacts of severe disciplinary procedures among students. Themes emerging from focus group interviews with 13 school counselors and administrators highlight the complexities of addressing mental health and equity issues in schools and the ways in which they intersect across multiple levels of a student’s ecology. They reflect the nuanced dynamics in handling discipline, mental health, and equity in school settings, while also providing a comprehensive lens for analyzing the challenges and opportunities in supporting student mental health for Black students. In the following sections, we discuss the ways these themes can center a JEDI approach situated within the Biopsychosocial Ecological Model to inform improved practice for Black students.

Student Ontosystem

Findings from the present study illustrate how students can get caught at the intersection of discipline and mental health. Specifically, participants described the difficulty they faced in distinguishing between behavioral and mental health difficulties, and the potential for trauma and other psychological factors to influence both areas. Indeed, both biological and psychological factors, considered part of a student’s ontosystem, are strongly related to behavioral and mental health outcomes. Emotion knowledge is negatively correlated with behavioral problems (Trentacosta et al., 2010) and previous research suggests a bidirectional relationship between exclusionary practices in schools (e.g., expulsion) and distress (Ford et al., 2018), with Black students more likely to be recipients of such severe disciplinary procedures compared to White (Fadus et al., 2021). Given the potential for symptoms

of trauma and internalizing disorders to be “masked” in Black youth (Assari et al., 2018), or to emerge as irritability or aggression (Clark & Molesh, 2015), strategies for addressing difficult behaviors may need to mirror strategies for addressing mental health. In other words, attempting to distinguish between behavioral versus mental health challenges may be unnecessary – instead, a first step should be considering the most appropriate social-emotional intervention or support when either difficulty presents.

Microsystem

Because schools themselves are a primary microsystem for students, many of the themes emerging from participant interviews relate to the ways in which we can improve student school environments to support healthy development (i.e., Balancing Restorative Justice and Accountability; Fostering School Belonging using Student-Centered Approaches; Proactive Mental Health Strategies; and Complexity of Suicide Identification, Awareness, and Prevention). Collectively, themes point to the need to address faculty and staff bias in the referral process (when considering behaviors and making referrals for disciplinary action or social-emotional supports); building and reinforcing strong relationships between and among students, faculty, and staff; establishing proactive and evidence-based approaches to school-based mental health care; and improved practices addressing suicide prevention for Black students, such as restorative practices.

Bias

The finding that few participants in the present study felt their school, staff, and faculty held biases regarding race may reflect a belief in meritocracy (a prominent belief held by individuals across the world that prioritizes rewards and advancements based on merit and places the onus of blame for problems on the individual; Mijs, 2015) and a commonly held orientation of “color blindness” in which teachers and other individuals view race, ethnicity, and culture as having no role in the classroom (Ullucci & Battey, 2011). We discuss the context surrounding such bias when reviewing influences of the macrosystem, and note here, at the microsystem level, the need for interventions to carefully and sensitively support teachers in countering such bias.

Positive In-School Relationships

School connectedness has been identified as a powerful protective factor against suicide-related behaviors (Marraccini & Brier, 2017; Welty et al., 2024), as well as numerous other mental health outcomes (e.g., substance use, violence, sexual health, mental health; Rose et al., 2024). Among Black students specifically, school connectedness during elementary school was significantly related to reduced depressive symptoms and aggressive behaviors during adolescence (Gale & Nepomnyaschy, 2024). Thus, participants’ foci on promoting healthy relationships with students align to the larger literature. Nonetheless, compared to White students,

Black students appear less likely to feel connected to their peers and teachers (Bonny et al., 2010), and their disproportionate exposure to disciplinary actions may thwart their sense of school connectedness (Gale & Nepomnyaschy, 2024).

School-Based Mental Health Interventions

Interviewees identified the importance of a comprehensive tiered systems of support that addresses school-based mental health needs and interventions (e.g., multi-tiered systems of support [MTSS]) and restorative justice practices in response to behavioral difficulties that emerge. MTSS is a comprehensive framework that is implemented at a school-wide level and utilizes a three-tier system, with the levels of support being increased at each tier. School professionals can monitor how students respond to interventions and identify those who need extra support through targeted interventions (Macheca et al., 2024). Integrating mental health services into a MTSS framework offers universal mental health screening to all students as a means to offer the appropriate support for students struggling with mental health concerns (Marsh & Mathur, 2020).

Mesosystem

Interactions among schools, families, and communities — key components of the mesosystem in ecological theory — were reflected in the theme Family Dynamics. Given the systemic barriers experienced by Black youth, scholars have emphasized the importance of adopting a collaborative school-family-community framework. This approach positions schools in addressing systemic inequities and racial biases affecting Black male students, while also fostering stronger family engagement in students' educational and social-emotional development (Marraccini et al., 2022). Indeed, lack of family support is among numerous other factors (e.g., peer support, economic context, school connectedness) that may influence mental health help-seeking behaviors among youth (Doan et al., 2020), with findings from one study indicating that parents may be more willing to refer other parents than their own children for psychological services (Raviv et al., 2009). There are multiple, intersecting factors that may influence parents' willingness or reluctance to seek mental health services for their children, including their child's psychological presentation and needs, their attitudes and knowledge of mental health and aligned services, concerns about stigma by the family and held in the community, and availability of mental health services in their community (Fehr et al., 2020).

Exosystem

The exosystem, including structures such as the government and social services, was reflected in the theme, Systemic Challenges. Participants described a range of challenges related to limited mental health resources and staffing in and out of schools, aligning to the research on barriers to school-based mental health. For example, common barriers to mental health supports in rural areas may include limited access to services and resources, gaps in the mental health literacy of the

school and family community, and difficulties in communication and collaboration across school and community members (Perkins et al., 2021). Many of the barriers for health services are similar in urban settings (Cyr et al., 2019). Cyr and colleagues (2019) proposed a multifactorial, hierarchical conceptual framework for understanding both settings based on extant literature. Specifically, issues related to public policy (such as insurance and organizational structures) influence system supply (e.g., availability, acceptability, and affordability), intersecting with patent demand for services (Cyr et al., 2019). Certainly, the concerns expressed by school professionals in the present study are largely influenced by these intersecting domains.

Participants' recommendations for addressing such barriers appeared to vary based on role in school. While a school administrator suggested partnerships with SROs to address these gaps, school counselors considered the addition of more support staff like themselves. Scholars disagree on the effectiveness of SROs in schools, but the data does show that more SROs are employed in schools with high numbers of Black and brown students than in schools with a majority White populations. Indeed, in 2018, the National Association for the Advancement of Colored People (NAACP) wrote a resolution that SROs should only intervene in potentially life-threatening situations and that discipline sits within the scope of responsibilities for teachers and administrators (NAACP, 2018).

Macrosystem

Collectively, findings reveal the persistent and pernicious presence of internalized norms related to race, colorblind ideology, and institutional denial. Participants acknowledged how the macrosystem, or societal context such as cultural beliefs can influence misinterpretation of behavior (i.e., Cultural and Societal Influences at the Intersection of Race and Mental Health). Although most participants shared beliefs that biases were not embedded into their own approach to discipline, many also acknowledged that Black youth were still being disciplined at higher rates than other ethnic and racial groups. Implicit bias, an outcome of systemic racism (Payne & Hannay, 2021), can drive inconsistent responses to student behaviors. Even though teachers and staff may be well intentioned, their implicit beliefs and previous experiences can influence their reactions to students who are perceived as different from themselves (Whitford & Emerson, 2019). Implicit bias can also influence school counseling services – with White youth students more likely to be recipients of academic and college advising than Black students (with the exception of Black students with “exceptional” academic or social functioning or significant numbers of behavioral referrals; Vannest et al., 2023).

Given participants did note disproportionality in disciplinary referrals related to race, it is likely these biases are present, but largely invisible. While there appears to be an increase in societal acknowledgment of interpersonal racism and institutional racism, internalized racism and racial oppression are often overlooked (David et al., 2019). For example, funding disparities favoring schools serving predominantly White compared to ethnic and racial minoritized students (The Education Trust, 2018), and a higher prevalence of exclusionary disciplinary procedures in ethnic and

racial minoritized students compared to White students (Skiba et al., 2014) are well documented. Thus, identifying and addressing racial oppression across all levels is critical for engaging in culturally grounded suicide prevention efforts, as these factors can contribute to suicide risk among Black students (Johns Hopkins Center for Gun Violence Solutions, 2023).

IMPLICATIONS FOR POLICY AND PRACTICE

Findings from this study highlight critical implications for improving mental health services, disciplinary practices, and equity efforts for Black students. Specific policy and practice implications address trauma-informed practices, school-family-community partnerships, the role of SROs, and a path towards addressing implicit and systemic bias in schools.

Integrating Trauma-Informed Practices into Discipline and Mental Health Response

Given the intersection between behavioral concerns and unrecognized or untreated trauma in Black youth, schools must intentionally adopt trauma-informed frameworks when responding to student behaviors. This requires training school personnel in trauma-sensitive practices, recognizing trauma manifestations such as irritability or defiance, and ensuring access to culturally affirming mental health interventions. Incorporating trauma-informed care into existing MTSS frameworks can allow for proactive, universal screening and tiered interventions that address both academic and social-emotional needs (Guest et al., 2024). Additionally, trauma-informed practices should include a focus on suicide prevention for Black youth, addressing the specific risk factors they face, such as racial trauma and marginalization. Early identification, culturally sensitive intervention strategies, and accessible mental health services are critical components of this approach.

Building Positive, Inclusive School Climates through Relational Practices

Schools should prioritize relationship-centered practices such as restorative justice circles, mentorship programs, and student-centered pedagogy. Restorative justice practices in schools aim to build a safer and more positive school environment by applying an equity focused approach to disciplinary actions (Zakszeski & Rutherford, 2021). Unfortunately, in schools, these practices can conflict with broader school policies (e.g., zero-tolerance policy), or be implemented without fidelity (Pavelka, 2013). To encourage the integration of restorative justice practice, school-wide staff must fully support the principles behind restorative justice practices, with those in a leadership position actively demonstrating this through their actions and decisions. Disciplinary policies and procedures should be altered based on current school data to reflect the environment, while also integrating restorative practices. Additionally, practices should prioritize critical consciousness among school staff, opportunities for self-advocacy among students, and family involvement

to facilitate positive relationships between the school, students, and families (Gregory et al., 2020).

Other approaches to instilling a sense of belonging may involve training teachers and staff in empathy-building, mindfulness-based stress reduction, and bias-awareness interventions to improve daily interactions and promote equitable classroom environments (Legette et al., 2022), as well as culturally adapted social-emotional learning interventions (Heidelberg et al., 2024). Research suggests that interventions helping teachers build empathic mindsets can positively influence teacher responses (Whitford & Emerson, 2019) and reduce suspensions and expulsions for Black students (Okonofua, et al, 2022). Importantly, these efforts should extend beyond individual staff development to systemic policy and culture shifts that position relationship-building as foundational to discipline and mental health practices (Legette et al., 2022).

Strengthening School-Family-Community Partnerships

Schools should adopt collaborative, strengths-based approaches that engage families and community members as partners in student mental health and well-being. Research focused on school-family partnerships point to the significance of proactive strategies for engaging with families in teaching and supporting student mental health, with professionals working in schools with strong family partnerships viewing parents more favorably (Williams et al., 2007). Historically, teachers have been viewed as the experts in educational systems; however, over the last several decades, schools and educators have begun to emphasize the need to collaborate with their communities and families to support student learning and development (Jones, 2013). Despite numerous barriers (e.g., lack of infrastructure and planning; Jones, 2013), existing models for school-family partnerships point the significance of taking a strengths-based and culturally responsive approach with families, building long-term relationships that value communication and foster a sense of family belonging, and establishing an infrastructure for shared ownership that instill family leadership in schools (Francis et al., 2016; Shapiro et al., 2010).

Given stigma and historical distrust of mental health systems in Black communities (Marraccini et al., 2022), schools should also cultivate partnerships with trusted community organizations to expand access to culturally affirming, trauma-informed services both within and beyond the school setting. Family and community involvement is especially important in suicide prevention efforts, as stigma and lack of awareness around mental health may prevent families from recognizing early signs of distress (Marraccini et al., 2023). By building strong partnerships, schools can ensure that Black youth receive comprehensive support at home, school, and in the community.

Reassessing the Role of School Resource Officers (SROs)

Exosystem-level challenges, including shortages in mental health staff and barriers to community services, call for policy advocacy and strategic resource allocation. As described previously, schools must carefully examine the role of SROs in student mental health crises, particularly in schools serving predominantly Black and Brown youth (NAAC, 2018). The role of SROs should be reassessed to ensure

that they are not disproportionately involved in discipline that could escalate mental health crises, including those related to suicidal ideation, particularly among Black youth.

Confronting Implicit Bias and Structural Racism in School Policies

Addressing implicit and systemic bias requires whole school initiatives that build a culture and climate inclusive and supportive to diversity, prioritizing teacher and staff wellness (Williams et al., 2024). It also recognizes and questions the systemic obstacles that may exacerbate opportunity gaps for ethnic and racial minoritized students (Jagers et al., 2021; Maloney et al., 2024). For example, schools can employ accountability systems that track and address racial disparities in referrals, suspensions, and access to counseling services (Marraccini et al., 2022). Equity audits, staff wellness programs, and school climate interventions can work in tandem to transform school cultures into more inclusive, affirming environments for Black students.

Even leaders focusing on anti-racist equity in schools appear to struggle with interrogations of race and racism in these settings, especially when faculty believe they are already engaged in equitable practices (Liu et al., 2025). Thus, in addition to initiatives to foster race-conscious practices, the work requires creative approaches beyond individual beliefs and actions. Liu and colleagues (2025) suggest pairing leaders with protected initiatives safeguarding antiracist work in schools and establishing formal university and school partnerships to enhance these safeguards as possible ways to navigate resistance. Given recent trends in policies against antiracism efforts, such practices appear more important than ever.

Limitations and Future Directions

Several limitations of the present study should be noted. First, our focus on school counselors and administrators in one state using a snowballing convenience sampling recruitment method limits generalizability of findings. It is possible that the inclusion of other professional roles (e.g., school psychologists, school social workers) and representation in other states would yield different findings. Moreover, although our sample generally reflected the demographic characteristics of school counselors and administrators (NCES, 2022), because it reflected predominantly White, female perspectives, it will be important for future research to address perspectives of more diverse samples. Second, we rely on qualitative interviews that are likely influenced by self-report and social desirability biases. Our finding that interviewees viewed limited biases in their own schools may be limited based on what school professionals felt comfortable disclosing in the context of focus group interviews with other professionals. Third, our research focused exclusively on professional perspectives, with only three administrator participants. Our study did not include voices of students or families – a significant perspective for understanding the intersection of race and discipline in Black youth.

Future research prioritizing youth and family voices is needed to fully understand this phenomenon, and implications for improving school practices for Black students.

Additional research is also needed to evaluate the effectiveness of trauma-informed, JEDI-aligned MTSS frameworks in reducing disparities in both mental health outcomes and disciplinary practices for Black students. Studies should also explore scalable, culturally adapted school-family-community partnership models and the long-term impact of restorative practices on school connectedness, student well-being, and academic achievement. Specifically, future studies should examine the effectiveness of suicide prevention strategies tailored to Black youth, taking into account their unique experiences of trauma, systemic inequities, and social-emotional needs.

CONCLUSION

Findings highlight systemic challenges and opportunities for creating inclusive, trauma-informed, and culturally responsive schools. Counselor and administrator perspectives indicate the need for multi-systemic efforts — from positive in-school relationships to addressing structural racism — to reduce mental health disparities and disciplinary disproportionality. Intentional, equity-focused strategies are essential to foster safe, supportive, and affirming environments for Black students.

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