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Educational Leadership, Mental Health, and Equity: A Review of Effective Interventions in Schools

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Abstract: This study investigates the role of educational leadership in supporting student mental health and promoting equity within schools. It examines three leadership models, transformational, trauma-informed, and equity-focused leadership, and their effectiveness in fostering inclusive school environments. By synthesizing recent empirical studies, this review identifies strategies that enhance student engagement, emotional resilience, and academic performance. The findings reveal that schools with proactive leadership in mental health experience improved student well-being, reduced behavioral challenges, and higher academic success. However, barriers such as resource constraints, inconsistent policy implementation, and a lack of specialized training for school leaders hinder the full integration of mental health initiatives. These challenges disproportionately affect marginalized student populations, underscoring the need for leadership approaches that address systemic inequities in education. This review emphasizes the importance of embedding mental health within broader school policies and practices. By prioritizing psychological safety, fostering strong school-community partnerships, and ensuring equitable access to mental health resources, educational leaders can create sustainable, supportive learning environments. The study offers practical recommendations for policymakers and school administrators to strengthen leadership practices that bridge the gap between academic achievement and student well-being. This research contributes to the ongoing discourse on student mental health and equity, advocating for school environments that nurture both academic and emotional growth.

Keywords: Educational leadership, equity, inclusive school culture, mental health, student well-being.


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Introduction

Educational leadership plays a crucial role in shaping both academic outcomes and student well-being. According to Ertem (2024), traditionally, school leadership has been centered on improving academic performance, but recent research highlights the need for a more holistic approach that integrates mental health support and equity-driven practices. Turner and Friesen (2024) found that the increasing prevalence of student mental health challenges, compounded by systemic inequalities, calls for leadership models that extend beyond traditional administrative roles to foster inclusive, supportive school environments actively. Santiago et al. (2023) highlight the COVID-19 pandemic as further exacerbated these challenges, exposing deep-rooted disparities in access to mental health resources and educational opportunities. Studies indicate that students from marginalized backgrounds, including those from low-income families and ethnic minorities, faced greater disruptions in learning and heightened mental health struggles due to limited access to school-based support systems (Armijos et al., 2023; Santiago et al., 2023; Stone et al., 2023). For example, Garcia et al. (2023) found that trauma-informed school leadership reduced disciplinary incidents by 30% and improved student engagement by fostering a supportive environment. Similarly, Chen (2023) reported that schools implementing transformational leadership strategies saw a 25% increase in student resilience and academic performance. These findings underscore how leadership directly affects mental health outcomes in tangible, measurable ways. This shift in educational priorities has brought renewed attention to the need for school leadership that promotes student mental health while ensuring equitable access to academic success (Raniti et al., 2022; World Health Organization [WHO], 2023).

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As reported by the Division of Adolescent and School Health (DASH et al., 2023), school leaders today are tasked with balancing academic achievement, student mental health, and educational equity, yet many existing leadership frameworks fail to integrate these priorities into a cohesive strategy. Research has shown that mental health plays a crucial role in student engagement and academic performance, yet school leadership remains primarily focused on academic outcomes rather than holistic student well-being (Ertem, 2024; Turner & Friesen, 2024). This is evident in March et al. (2022), who found that fragmented leadership approaches led to inconsistent mental health interventions, whereas schools with structured, leadership-driven mental health initiatives reported lower absenteeism and improved academic performance. The disparities in mental health support disproportionately affect marginalized student populations, including those from low-income backgrounds, racial minorities, and students with disabilities (Edyburn et al., 2023; Rautela et al., 2024). These students face systemic barriers to accessing school-based mental health resources, leading to higher dropout rates, increased absenteeism, and lower academic performance (Cheatham et al., 2022; Das & Dhar, 2023; Moore et al., 2023; WHO, 2021). Although some schools have attempted to address these disparities through mental health programs or equity-driven initiatives, such efforts are often underfunded, inconsistently applied, and disconnected from school leadership strategies (Garcia et al., 2023; Joseph et al., 2020). One key barrier is resistance from staff and administrators, as Joseph et al. (2020) found that implementing trauma-informed practices often encounters skepticism due to traditional disciplinary norms. Additionally, Gill et al. (2024) highlight that many equity-focused mental health initiatives fail due to inadequate funding, particularly in low-income districts. Overcoming these challenges requires targeted leadership training and policy support to ensure sustainable implementation (Esquierdo-Leal & Houmanfar, 2021). Furthermore, Stone et al. (2023) and Santiago et al. (2023) found that the COVID-19 pandemic intensified existing inequalities, with research highlighting those marginalized students experienced greater educational disruptions and mental health struggles due to the lack of access to in-school counseling and social support systems. Despite the urgent need for leadership approaches that integrate mental health, equity, and academic success, there remains a lack of comprehensive research on how school leadership can effectively implement and sustain these interventions (Bhattacharyya, 2023; Raniti et al., 2022).

However, existing research has extensively examined mental health interventions, leadership effectiveness, and equity in schools as separate areas of study (Bhattacharyya, 2023; Leithwood, 2021; Levinson et al., 2022; Yue, 2023). Studies have explored how school leadership affects student well-being, Ertem (2024), how mental health programs improve academic engagement, Moore et al. (2023), and how equity-driven policies help marginalized students access quality education, Cheatham et al. (2022). Moreover, while these studies highlight the importance of each component, they fail to address how leadership can simultaneously integrate mental health, equity, and academic achievement within a single framework (March et al., 2022). A growing body of literature suggests that effective educational leadership must move beyond performance metrics to incorporate holistic student well-being (Town et al., 2024; Turner & Friesen, 2024). Yet, many school leaders lack clear, research-based strategies for balancing the academic, emotional, and social needs of students, particularly in underfunded and marginalized communities (March et al., 2024; Raniti et al., 2022). This study seeks to fill this gap by investigating how leadership strategies can create an environment that supports both mental health and equity while maintaining high academic standards. To explore this issue, this study focuses on three leadership models that have demonstrated potential in addressing the intersection of educational leadership, mental health, and equity. These models were selected because they directly address the systemic barriers that prevent effective mental health interventions. Unlike traditional instructional leadership, which primarily emphasizes academic achievement, trauma-informed leadership helps students process adverse childhood experiences (Stokes, 2022; Sweeney et al., 2018), transformational leadership fosters emotional intelligence and motivation (Deng et al., 2023; Kumar, 2019), and equity-driven leadership ensures fair access to mental health resources, particularly for marginalized students (Cheatham et al., 2022). These models have been consistently linked to positive student outcomes, making them the most effective framework for integrating mental health and equity in schools. Trauma-informed leadership acknowledges the significant impact of adverse childhood experiences (ACEs) on student learning and behavior (Sweeney et al., 2018). Studies conducted by Garcia et al. (2023) and Joseph et al. (2020) have found that schools that integrate trauma-informed leadership implement restorative practices, social-emotional learning (SEL), and crisis intervention frameworks to help students build resilience and manage emotional distress. Transformational leadership fosters a positive school climate by inspiring teachers and students, promoting emotional intelligence, and strengthening relationships, all of which contribute to increased student engagement and improved academic outcomes (Deng et al., 2023; Kareem et al., 2023). Equity-focused leadership ensures that students from diverse backgrounds have fair access to mental health resources and academic opportunities by addressing systemic barriers such as economic disparities, racial inequalities, and inadequate mental health support in schools (Cheatham et al., 2022; Moore et al., 2023). While existing research has demonstrated the effectiveness of these models independently, there is limited exploration of how these approaches can be integrated into a cohesive leadership framework that simultaneously promotes mental health, equity, and academic success (Liden et al., 2025). Additionally, much of the literature in this field focuses on either K-12 education or higher education exclusively, without considering how leadership strategies might differ across educational levels (Chen, 2023; Kim-Ju et al., 2024; Murwanto, 2024). This study seeks to bridge this gap by examining how school leaders in both K-12 and higher education institutions implement strategies to support student mental health while ensuring equitable educational opportunities. Furthermore, while leadership training programs exist, there is insufficient emphasis on equipping school leaders with the necessary skills to address the complex, overlapping

challenges of mental health and equity. This study aims to provide a comprehensive analysis of leadership strategies that promote both student mental health and equity. The study contributes to the ongoing discourse on educational leadership and provides evidence-based recommendations for school administrators, policymakers, and educators. The findings will help develop leadership models that foster inclusive, supportive, and resilient school environments, ensuring that all students, regardless of background, have the opportunity to succeed both academically and emotionally.

The primary research question guiding this study is: What are the effective leadership strategies and interventions that promote mental health and equity in schools? In addressing this, the study also explores the following sub-questions:

1. How do educational leaders address mental health challenges in diverse school settings?
2. What role does equity play in the design and implementation of mental health interventions?
3. What are the barriers to achieving equitable mental health outcomes in schools?
4. How can leadership practices be optimized to support both mental health and equity simultaneously?

Methodology

This study employed a systematic review methodology to synthesize existing research on the role of educational leadership in promoting mental health and equity in schools. A systematic review was selected due to its well-established and rigorous approach to synthesizing research findings from multiple studies, allowing for the identification of patterns, strengths, and gaps in the literature (Cooke, 2024). According to Bartels (2013), a systematic review facilitates the development of evidence-based recommendations for policy and practice. The primary objective of this research was to identify leadership strategies and interventions that effectively enhance both academic success and emotional well-being, particularly for marginalized student populations. This methodology follows established protocols by Cooke (2024) for systematic reviews to ensure transparency, reproducibility, and rigor.

Data Sources

A combination of academic databases and grey literature sources to gather studies related to educational leadership, mental health, and equity in schools. A range of databases was chosen to ensure the inclusion of peer-reviewed journal articles, empirical studies, reports, and other scholarly materials that cover both academic and non-academic sources. Grey literature, such as government reports, organizational policy documents, and conference papers, was included to provide broader insights into the practical application of leadership strategies in schools. The data sources used for this research include:

-Google Scholar: As a broadly accessible academic search engine, Google Scholar was used to identify a wide array of scholarly articles, books, and conference papers. It provided access to both primary research studies and secondary literature, ensuring a comprehensive perspective on the intersection of leadership, mental health, and equity in educational settings.

-ERIC (Education Resources Information Center): ERIC is a widely respected database for educational research, offering access to a wealth of studies on educational practices, policies, and interventions. It includes a combination of peer-reviewed journal articles, reports, and research briefs, all focusing on topics such as educational leadership, mental health programs, and equity in schools.

-PsycINFO: This database, maintained by the American Psychological Association, provides access to research on mental health and psychology. Studies focusing on emotional well-being, mental health disorders, and interventions in educational contexts were sought using this database, as it includes both empirical studies and literature reviews related to mental health in schools.

-JSTOR: JSTOR is a digital library containing a wide range of academic journals, books, and primary sources. It was useful in locating interdisciplinary studies that examine the intersection of leadership, mental health, and equity across various academic fields, including education, psychology, and sociology.

-Scopus: As one of the largest multidisciplinary databases, Scopus offers access to peer-reviewed literature, conference proceedings, and scientific articles from a broad range of disciplines. It was used to ensure the inclusion of high-quality, high-impact studies related to leadership models and their impact on student outcomes.

-Grey Literature: In addition to peer-reviewed studies, grey literature from reputable organizations was incorporated to ensure the inclusion of reports and policy documents that provide practical, real-world insights into leadership practices in schools. Key grey literature sources included:

World Health Organization (WHO): WHO reports on the global state of mental health and its integration into education systems were essential to understanding how international organizations conceptualize mental health in educational contexts.

UNESCO (United Nations Educational, Scientific and Cultural Organization): UNESCO provides a wealth of resources on educational equity and inclusive practices, offering important policy documents and frameworks that shape educational leadership worldwide.

By consulting these diverse data sources, the review aimed to capture a comprehensive range of perspectives, ensuring that academic and practical viewpoints were represented.

Search terms and strategies

The search strategy was designed to ensure that only the most relevant studies were included in the review. A set of specific search terms was used, both individually and in combination, to maximize the coverage of relevant research. The following search terms were utilized:

- Educational leadership and mental health
- Leadership and equity in schools
- Trauma-informed leadership
- Transformational leadership and student well-being
- Equity-focused leadership in education
- School-based mental health interventions
- Mental health and student outcomes in schools
- Inclusive leadership practices
- Leadership strategies and emotional well-being

These search terms were specifically tailored to capture studies that explored the role of leadership in promoting mental health and equity in educational contexts. Boolean operators (AND, OR) were used to combine these terms and refine the results. For instance, a typical search string used in the databases would be “educational leadership AND mental health AND equity.” This strategy ensured that the search results were both broad enough to capture all relevant studies and specific enough to exclude irrelevant topics.

In addition to using keywords, filters were applied to restrict the results to empirical studies, systematic reviews, and meta-analyses published between 2018 and 2024. This time frame was chosen to ensure the review focused on recent developments in educational leadership, mental health, and equity, especially considering the increasing focus on these topics in light of the COVID-19 pandemic and its impact on schools.

Time Frame Justification

Studies published between 2018 and 2024 were included and chosen to ensure the review focuses on the most recent advancements in educational leadership, mental health, and equity. The COVID-19 pandemic significantly reshaped mental health priorities in schools, making post-2018 research particularly relevant. Earlier studies (pre-2018) were excluded as they may not fully reflect contemporary challenges and leadership strategies in response to evolving educational landscapes.

Selection criteria (Inclusion/Exclusion)

The inclusion and exclusion criteria were carefully defined to ensure that only relevant and high-quality studies were included in the review. The following criteria were used to select studies:

Inclusion criteria:

Studies published in peer-reviewed journals or reputable grey literature (e.g., reports from WHO or UNESCO). Studies published between 2018 and 2024, reflect the most recent developments in educational leadership, mental health, and equity. Studies that focused on K-12 schools, higher education, or both. This was to ensure diversity in the educational settings considered. Studies that explicitly discuss leadership strategies and their impact on mental health or equity in schools. This includes leadership practices such as trauma-informed, transformational, or equity-focused leadership.

Exclusion criteria:

Studies published before 2018, may not reflect recent trends or changes in leadership practices and policies related to mental health and equity. Non-empirical studies, such as opinion pieces, editorials, or theoretical papers without empirical evidence to support their claims. Studies that only address one of the three focus areas (leadership, mental health, or equity) without considering their intersection. Studies that did not focus on school settings or educational leadership, such as those focused on corporate leadership or other unrelated contexts.

Number of Studies Included

After applying the inclusion and exclusion criteria, 20 studies were selected for final review based on relevance, methodological rigor, and contribution to understanding leadership's impact on mental health and equity in schools. These studies encompassed diverse geographical regions, including North America, Europe, and Asia, offering a global perspective. The selected studies include a mix of empirical research, systematic reviews, narrative reviews, and policy reports from reputable organizations such as the WHO and UNESCO.

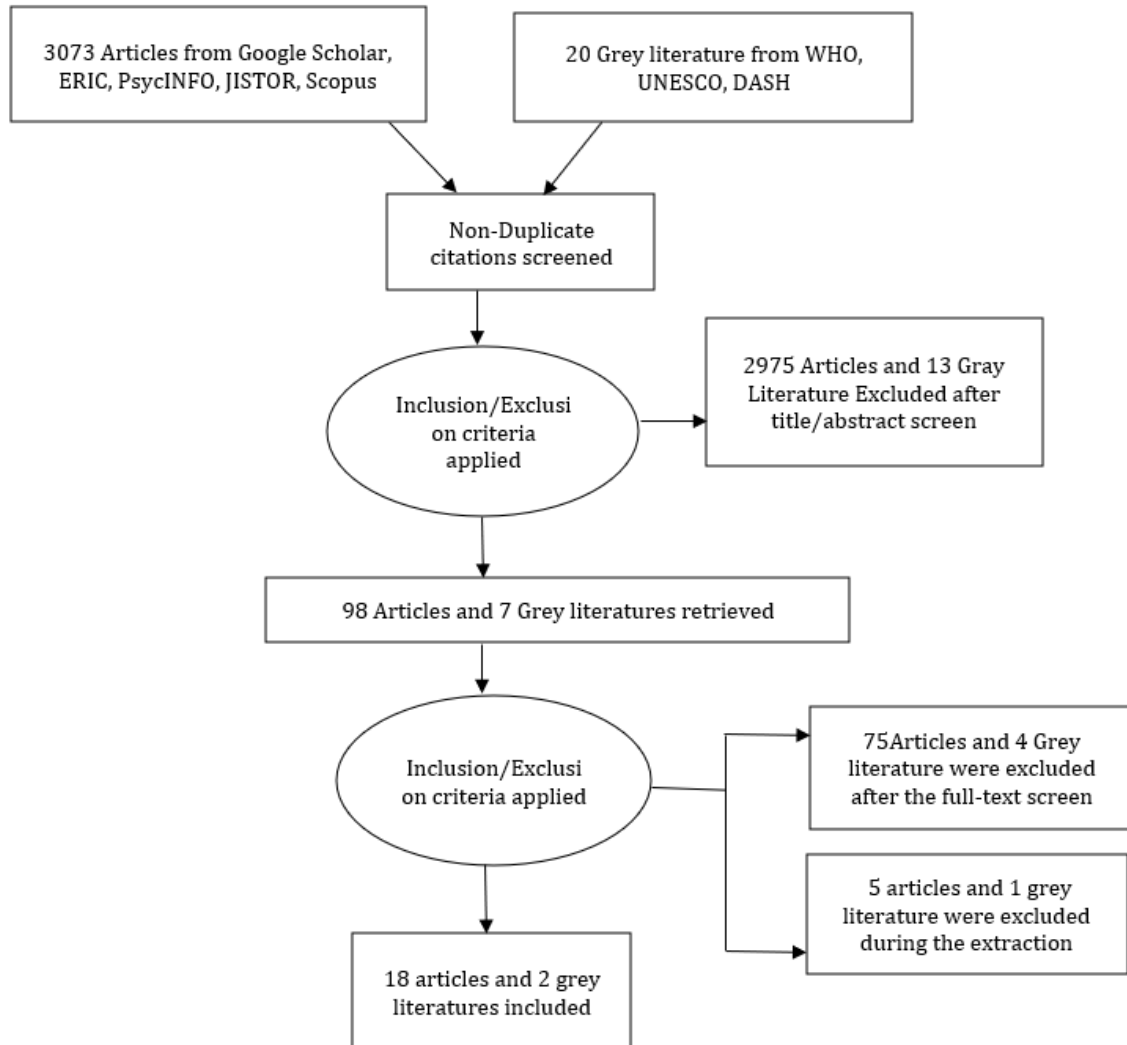


Figure 1. Flow diagram

Data Extraction and Analysis

To ensure methodological rigor, a systematic data extraction and coding process was employed:

Thematic Analysis:

- Identified recurring themes such as trauma-informed leadership, transformational leadership, and equity-focused leadership.
- Categorized leadership strategies based on their impact on mental health and student engagement.
- Ensured inter-rater reliability by having multiple researchers independently code a subset of studies and resolve discrepancies through discussion.

Categorization of Leadership Strategies:

- Grouped strategies into broader categories for easier synthesis.
- Identified best practices in promoting mental health and equity across different educational settings.

Synthesis of Findings:

- Integrated findings to highlight leadership practices that support both academic success and emotional well-being.
- Examined leadership strategies' effectiveness in addressing the needs of marginalized students.

Limitations

While this methodology provides a comprehensive synthesis, certain limitations must be acknowledged:

- Language Bias: Only English-language studies were included, potentially excluding relevant research in other languages.
- Publication Bias: Despite efforts to include grey literature, some unpublished studies with valuable insights may have been overlooked.
- Evolving Nature of Leadership Practices: The study captures the latest trends, but ongoing changes in educational leadership may require continuous updates to findings.

This systematic review addresses these limitations and ensures rigorous data extraction and analysis, providing a strong foundation for understanding how educational leadership influences mental health and equity in schools.

Findings/Results

The results of this systematic review underline several key themes, connecting leadership practices with student mental health, well-being, and academic performance. The reviewed studies also emphasize the importance of equity in mental health interventions and the challenges faced by educational leaders in implementing these practices. Below is a detailed discussion of the findings, along with an analysis of gaps and areas requiring further exploration.

*Leadership practices and student well-being**Transformational leadership*

The findings consistently highlight that leadership practices have a profound impact on both student well-being and academic performance. Specifically, transformational leadership was found to be highly effective in fostering positive teacher-student relationships, improving school climate, and supporting student mental health. Studies such as Chen (2023) and Deng et al. (2023) emphasized that leaders who exhibit transformational qualities such as empathy, inspiration, and support help create a nurturing school environment that promotes emotional resilience. These leadership practices, in turn, have been shown to improve students' academic success by reducing stress and anxiety and fostering a greater sense of belonging.

However, some findings regarding transformational leadership, while promising, were presented without clear indicators of statistical significance. For example, while Deng et al. (2023) report positive correlations between transformational leadership and improved student outcomes, the lack of specific statistical tests (such as p-values or confidence intervals) limits the strength of these conclusions. Without this quantitative evidence, it is difficult to assess whether the observed effects are statistically significant or merely a result of contextual factors. This gap calls for future studies to include more robust statistical analyses to strengthen the evidence base for transformational leadership's impact.

Trauma-informed leadership

Trauma-informed leadership plays a crucial role in addressing adverse childhood experiences (ACEs) by fostering a school environment that prioritizes psychological safety, restorative justice, and social-emotional learning (SEL). Schools that implement trauma-sensitive leadership strategies have reported significant improvements in student behavior and overall well-being. Joseph et al. (2020) found that trauma-informed policies led to a reduction in suspensions and disciplinary incidents, particularly in high-risk school settings, while Armijos et al. (2023) emphasized the importance of culturally relevant and community-driven mental health interventions.

Additionally, Drabenstott et al. (2023) conducted a pilot program where trauma-informed leadership training contributed to increased emotional regulation skills and academic engagement among students, highlighting the direct link between leadership practices and student resilience. These findings indicate that when school leaders adopt trauma-informed approaches, students feel more supported, leading to better emotional and academic outcomes. Despite its benefits, trauma-informed leadership faces several challenges in implementation. Santiago et al. (2023) noted that schools struggle to maintain trauma-informed initiatives due to staff burnout and limited professional training, leading to inconsistencies in application. Additionally, Hollands et al. (2022) found that while restorative practices are effective, many schools lack the financial resources to sustain long-term trauma-informed programs. These limitations highlight the need for increased investment in leadership training and funding to ensure the successful integration of trauma-

informed strategies in schools. Addressing these barriers will enable educational leaders to create more inclusive and supportive learning environments, ultimately improving student mental health and academic success.

Equity-Focused Leadership

Equity-focused leadership emerged as another central theme in the reviewed studies. Leaders who prioritize equity in mental health interventions are more likely to design programs that meet the diverse needs of their students, particularly those from marginalized backgrounds. For instance, studies such as Bhattacharyya (2023) and Murwanto (2024) emphasized the importance of adapting mental health services to ensure that they are accessible and relevant to all students, particularly those facing socioeconomic disadvantages or cultural barriers.

Despite these positive findings, the discussion on equity-focused leadership lacks sufficient depth regarding the implementation challenges faced by educational leaders. While these studies acknowledge the importance of equity, they do not explore in detail the practical barriers that schools encounter when trying to implement equity-focused mental health programs. Key challenges identified in the studies include institutional resistance, limited resources, and insufficient training for school leaders in equity-based practices. For example, Joseph et al. (2020) found that schools often struggle with a lack of buy-in from staff when introducing equity-oriented mental health interventions. Similarly, Gill et al. (2024) highlighted that some schools face difficulties in securing funding for equity-focused mental health services, especially in resource-poor settings.

Addressing these challenges will require educational leaders to not only champion equity-focused practices but also to foster an environment where all school stakeholders are committed to overcoming the barriers that hinder equitable access to mental health services.

Barriers to Achieving Equitable Mental Health Outcomes

Despite the positive impact of leadership practices, several barriers hinder the achievement of equitable mental health outcomes across schools. One of the most significant barriers identified in the studies is the lack of leadership training. Effective mental health programs require leaders to be well-versed in both mental health issues and equity-focused practices. However, as seen in Drabenstott et al. (2023), many schools struggle to provide sufficient training for their leaders. Without the necessary skills and knowledge, leaders may struggle to implement effective mental health strategies.

In addition, resource limitations were frequently cited as a barrier. For example, Hollands et al. (2022) discussed the cost-effectiveness of restorative practices but also noted that many schools could not afford to implement these practices fully due to budget constraints. Similarly, March et al. (2022) found that while integrated school mental health programs are associated with long-term emotional and academic benefits, these programs often lack the necessary funding for sustainability.

Another significant barrier is systemic inequality within schools. For instance, Joseph et al. (2020) found that trauma-informed practices were often not fully effective in addressing racial disparities, particularly in high-risk environments. This highlights the need for leadership to address not only the individual mental health needs of students but also the broader systemic issues that contribute to inequitable outcomes.

Leadership Strategies Across Educational Levels: K-12 vs. Higher Education

Leadership strategies in educational settings vary significantly between K-12 and higher education due to differences in organizational structures, student demographics, and institutional goals. While both levels aim to foster academic success and well-being, the approaches to leadership often diverge in response to the unique challenges and needs of each context.

K-12 Leadership Strategies

In K-12 settings, leadership is often characterized by a more centralized and hierarchical structure, with principals and administrators playing a pivotal role in shaping school culture and policies. Research highlights the importance of transformational leadership in K-12 environments, where leaders focus on fostering inclusivity, equity, and emotional well-being among students and staff (Chen, 2023; Ertem, 2024). For instance, studies such as those by Ertem (2024) and Joseph et al. (2020) emphasize the role of trauma-informed leadership and restorative practices in creating supportive school climates. These strategies are particularly critical in K-12 settings, where students are more vulnerable to external stressors and require a structured, nurturing environment to thrive academically and emotionally (Corrieri et al., 2014, Hoover & Bostic, 2021).

Additionally, K-12 leaders often prioritize community engagement and collaboration with external stakeholders, such as parents and local organizations, to address systemic inequities and provide holistic support to students (Armijos et al., 2023; DASH et al., 2023). The implementation of mental health programs in schools, as highlighted by March et al. (2022)

and Drabenstott et al. (2023), underscores the need for leaders to adopt evidence-based practices that are adaptable to diverse student populations.

Higher Education Leadership Strategies

In contrast, leadership in higher education tends to be more decentralized, with a greater emphasis on shared governance and academic freedom. University leaders, such as deans and department heads, often focus on creating environments that promote intellectual growth, research innovation, and student autonomy. Transformational leadership remains relevant in higher education, as demonstrated by Deng et al. (2023), who found a strong correlation between leadership practices and improved teacher-student relationships, which in turn enhance student resilience and academic success.

However, higher education leaders also face unique challenges, such as addressing the mental health needs of a more diverse and independent student population. Studies like Bhattacharyya (2023); Gill et al. (2024) and Campbell et al. (2022) highlight the link between mental health equity policies and academic performance, emphasizing the need for tailored interventions that consider the intersectionality of students' identities and experiences. Unlike K-12 settings, higher education leaders often rely on institutional policies and cross-departmental collaborations to implement mental health initiatives, as seen in the work of Santiago et al. (2023), which explored the adaptation challenges faced by educators during the COVID-19 pandemic.

Key Differences and Implications

The primary differences in leadership strategies between K-12 and higher education can be attributed to the developmental stages of students and the organizational structures of institutions. K-12 leaders often adopt a more hands-on, directive approach to address the immediate needs of younger students, while higher education leaders focus on fostering independence and self-efficacy among adult learners. Additionally, K-12 leadership is more community-oriented, whereas higher education leadership is often driven by institutional goals and academic priorities.

Understanding these differences is crucial for developing context-specific leadership strategies that effectively address the mental health and academic needs of students across educational levels. Future research should explore how leadership practices can be adapted to bridge the gap between K-12 and higher education, ensuring a seamless transition for students and promoting lifelong well-being.

Conclusion

This study has explored the critical role that leadership practices play in addressing mental health challenges in schools, with a particular focus on equity. It examined the interconnections between leadership, student well-being, and academic outcomes, and provided valuable insights into how these leadership practices can be optimized to support both mental health and equity. The findings underscore that effective leadership is integral to fostering a school environment that promotes the well-being of students while ensuring that mental health services are accessible to all, regardless of socioeconomic or cultural background.

The findings of this study revealed a strong connection between leadership practices, student mental health, and academic performance. Transformational leadership, in particular, emerged as a key factor influencing both student well-being and academic outcomes. Leaders who adopt a transformational approach create an environment characterized by trust, clear communication, and emotional support, which helps students feel valued and motivated. This leadership style is linked to higher levels of engagement and resilience among students, which directly impacts their academic performance. However, it was also noted that the effectiveness of transformational leadership is highly contextual, dependent on factors such as the school's resources, the socio-economic challenges faced by the student body, and the level of support from teachers and administrators. For example, schools that face significant socio-economic challenges may need additional resources or modifications to their leadership strategies to ensure that the benefits of transformational leadership can be fully realized.

Another crucial finding of this study was the importance of equity-focused leadership. Leadership that prioritizes equity ensures that mental health services are accessible to all students, particularly those from marginalized or disadvantaged backgrounds. Equity-focused leaders work to reduce disparities in mental health support, striving to create an inclusive school environment where every student's needs are met. However, the implementation of equity-focused leadership remains a challenge, as schools often face barriers such as limited funding, a lack of access to trained mental health professionals, and resistance from within the institution to changing traditional practices. These barriers make it difficult for leaders to effectively translate the principles of equity into concrete, actionable strategies.

This study's findings also reveal that trauma-informed leadership plays a vital role in creating an environment where students, particularly those affected by trauma, feel safe, supported, and understood. This approach focuses on recognizing the profound impact that adverse experiences have on students' behavior and learning and emphasizes practices that prioritize emotional safety and healing. When implemented effectively, trauma-informed leadership can lead to significant improvements in student well-being, including reductions in behavioral issues, increased engagement,

and stronger resilience. However, the integration of these practices is not without its challenges. Barriers such as the need for comprehensive staff training, consistent application, and adequate resources often hinder the full implementation of trauma-informed strategies. To address these challenges, it is essential for school leaders to commit to continuous professional development and ensure that sufficient resources are available to sustain these practices. By doing so, trauma-informed leadership can have a lasting positive impact on both the emotional and academic growth of students.

While leadership practices are undoubtedly important, this study has highlighted the numerous challenges that exist in their implementation. Educational leaders are frequently confronted with issues such as inadequate funding for mental health resources, insufficient training for staff, and a lack of integration between academic and mental health services. These challenges underscore the need for a more coordinated approach to mental health in schools, one that involves not just leadership, but also collaboration between educators, mental health professionals, parents, and the wider community. Additionally, the findings revealed a gap in the research concerning how leadership strategies differ between K-12 schools and higher education institutions. While much of the literature focuses on K-12 settings, the higher education context presents unique challenges that require different leadership approaches. Therefore, more research is needed to explore how leadership strategies in higher education can be adapted to address the mental health needs of students in those settings.

The barriers to achieving equitable mental health outcomes in schools are multifaceted. Disparities in funding and resources across school districts, particularly those in low-income or rural areas, continue to exacerbate existing inequalities in access to mental health services. Schools in these areas often lack the personnel or funding to provide sufficient support for students dealing with mental health issues, such as anxiety, depression, and trauma. Furthermore, the stigma surrounding mental health remains a significant obstacle. Many students, especially those from marginalized groups, may be reluctant to seek help for fear of being judged or labeled. To overcome this barrier, educational leaders must foster an open and supportive school culture that encourages students to seek help and acknowledges the importance of mental health alongside academic achievement.

In light of these findings, several policy recommendations emerge that can guide educational leaders and policymakers in improving mental health outcomes in schools. First and foremost, there is a pressing need for comprehensive leadership training programs that focus on both transformational leadership and equity. These programs should equip school leaders with the skills necessary to support student mental health, create inclusive environments, and collaborate effectively with mental health professionals. For example, leadership training programs could be developed in partnership with mental health organizations, offering school leaders practical tools and strategies for addressing mental health challenges. These programs should also be designed to help leaders navigate the challenges of implementing equity-focused practices in schools, providing them with the skills needed to address systemic disparities in access to mental health resources.

Another critical recommendation is to increase funding for mental health resources in schools, especially in underserved districts. Policymakers must prioritize the allocation of funds to mental health services, ensuring that schools have the personnel and resources needed to support students' emotional and psychological well-being. For instance, schools could hire additional counselors, social workers, and psychologists to work directly with students, while also providing teachers with professional development opportunities to help them recognize signs of mental health issues. Schools should also explore external funding opportunities, such as federal and state grants, to support mental health initiatives. By investing in mental health resources, policymakers can ensure that all students, regardless of their background or circumstances, have access to the support they need to succeed.

Equally important is the role of interdisciplinary collaboration in implementing leadership strategies that promote mental health. Educational leaders cannot address the complex mental health needs of students in isolation. Collaboration with mental health professionals, community organizations, and even parents is essential for creating a comprehensive support system that addresses the multifaceted nature of student well-being. For example, schools could establish multidisciplinary teams that include teachers, counselors, social workers, and external mental health professionals to develop and implement individualized support plans for students. These teams can work together to provide targeted interventions, track student progress, and ensure that students receive the appropriate care and attention. Schools could also partner with community-based mental health organizations to offer additional resources and expertise, such as counseling services or therapy groups for students who require more specialized support.

To ensure the success of leadership practices that prioritize both mental health and equity, educational leaders must be intentional in their approach and develop clear strategies for implementation. Leadership practices must be adaptable to the specific needs of each school and its student population. For example, schools that serve large numbers of students from low-income backgrounds may require targeted interventions that address the unique challenges faced by these students, such as trauma, food insecurity, and housing instability. In such schools, transformational leadership that focuses on creating a supportive, nurturing environment can help foster resilience and improve student outcomes. On the other hand, schools with more affluent populations may benefit from leadership strategies that emphasize mental health promotion and early intervention to prevent issues from escalating.

Additionally, data-driven decision-making is essential for evaluating the effectiveness of leadership practices and mental health programs. Educational leaders should regularly collect and analyze data on student well-being and academic performance to identify trends and areas of concern. For instance, schools could administer surveys to students, teachers, and parents to gather feedback on the effectiveness of mental health programs and leadership practices. This data can then be used to refine strategies, adjust interventions, and ensure that the mental health needs of students are being adequately addressed. By using data to guide their decision-making, school leaders can make informed choices that lead to improved outcomes for students.

Finally, creating a supportive school climate that prioritizes mental health is critical for the success of leadership strategies. School leaders must work to establish a culture where mental health is not stigmatized and where students feel comfortable discussing their concerns. This can be achieved by implementing peer support programs, offering counseling services, and promoting mental health education across the curriculum. Schools should also focus on building strong relationships between students, teachers, and administrators, creating a sense of community and belonging that contributes to emotional well-being. When students feel supported and valued, they are more likely to engage in school, perform well academically, and seek help when needed.

In conclusion, this study has provided valuable insights into the role of leadership in promoting mental health and equity in schools. The findings emphasize the importance of transformational leadership, equity-focused practices, and interdisciplinary collaboration in creating supportive school environments that foster both student well-being and academic success. However, challenges remain in the implementation of these practices, particularly in terms of funding, training, and creating a school culture that prioritizes mental health. To address these challenges, policymakers and educational leaders must work together to develop and implement concrete strategies that ensure all students have access to the mental health support they need. Through strategic leadership, increased funding, and collaboration, schools can create environments where every student has the opportunity to thrive academically and emotionally.

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Generative AI Statement

"As the author(s) of this work, we used the AI tool Grammarly for grammar correction. After using this AI tool, we reviewed and verified the final version of our work. We, as the author(s), take full responsibility for the content of our published work."

Authorship Contribution Statement

Joie Claire: Drafted the manuscript, acquired data, created the concept, and designed the design. Jacqueline: Editing/reviewing, critical manuscript revision, and final approval.

References

- Armijos, A., Bonz, A. G., Brown, F. L., Charlet, D., Cohen, F., Greene, M. C., Hermosilla, S., James, L. E., & Le Roch, K. (2023). Ensuring equity in mental health and psychosocial support during the COVID-19 pandemic and beyond. *Conflict and Health*, 17, Article 7. <https://doi.org/10.1186/s13031-023-00500-5>
- Bartels, E. M. (2013). How to perform a systematic search. *Best Practice and Research: Clinical Rheumatology*, 27(2), 295-306. <https://doi.org/10.1016/j.berh.2013.02.001>
- Bhattacharyya, M. (2023). The intersection of mental health and educational equity for college students. *International Journal of Creative Research Thoughts*, 11(12), 984-990. <https://www.ijcrt.org/papers/IJCRT2312113.pdf>
- Campbell, F., Blank, L., Cantrell, A., Baxter, S., Blackmore, C., Dixon, J., & Goyder, E. (2022). Factors that influence the mental health of university and college students in the UK: A systematic review. *BMC Public Health*, 22, Article 1778. <https://doi.org/10.1186/s12889-022-13943-x>
- Cheatham, J. P., Thomas, R., & Parrot-Sheffer, A. (2022). *Entry planning for equity-focused leaders: Empowering schools and communities*. Harvard Education Press.

- Chen, Q. (2023). Mental health as a mediator of the transformational leadership to better performance. *Journal of Education, Humanities and Social Sciences*, 8, 2141-2148. <https://doi.org/10.54097/ehss.v8i.4660>
- Cooke, R. (2024). *Systematic review essentials*. Meta-Analysis for Psychologists (pp. 35-48). Springer. https://doi.org/10.1007/978-3-031-73773-2_4
- Corrieri, S., Heider, D., Conrad, I., Blume, A., König, H.-H., & Riedel-Heller, S. G. (2014). School-based prevention programs for depression and anxiety in adolescence: A systematic review. *Health Promotion International*, 29(3), 427-441. <https://doi.org/10.1093/heapro/dat001>
- Das, D., & Dhar, D. (2023). Impact of mental health on academic achievement: A qualitative study. *International Journal of Research Publication and Reviews*, 4(8), 2833-2840.
- Deng, C., Gulseren, D., Isola, C., Grocutt, K., & Turner, N. (2023). Transformational leadership effectiveness: An evidence-based primer. *Human Resource Development International*, 26(5), 627-641. <https://doi.org/10.1080/13678868.2022.2135938>
- Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Health Promotion, & Centers for Disease Control and Prevention. (2023, December). *Promoting mental health and well-being in schools: An action guide for school and district leaders*. Centers for Disease Control and Prevention. <https://stacks.cdc.gov/view/cdc/136371>
- Drabenstott, M., Smyth, R. E., Searle, M., Kirkpatrick, L., & Labonté, C. (2023). School leaders' response to rising mental health concerns: A collaborative school-based social worker pilot. *Journal of School Leadership*, 33(6), 607-632. <https://doi.org/10.1177/10526846231187569>
- Edyburn, K. L., Bertone, A., Raines, T. C., Hinton, T., Twyford, J., & Dowdy, E. (2023). Integrating intersectionality, social determinants of health, and healing: A new training framework for school-based mental health. *School Psychology Review*, 52(5), 563-585. <https://doi.org/10.1080/2372966X.2021.2024767>
- Ertem, H. Y. (2024). School leadership fostering mental health in the times of crisis: Synthesis of school principals' views and PISA 2022. *BMC Psychology*, 12, Article 695. <https://doi.org/10.1186/s40359-024-02195-6>
- Esquiedo-Leal, J. L., & Houmanfar, R. A. (2021). Creating inclusive and equitable cultural practices by linking leadership to systemic change. *Behavior Analysis in Practice*, 14, 499-512. <https://doi.org/10.1007/s40617-020-00519-7>
- Garcia, A., Sprang, G., & Clemans, G. (2023). The role of school leaders in cultivating a trauma-informed school climate. *Children and Youth Services Review*, 146, Article 106816. <https://doi.org/10.1016/j.childyouth.2023.106816>
- Gill, C., Todd, J., Bennett, D., & Gepp, A. (2024). Exploring the interplay between equity groups, mental health, and perceived employability amongst students at a public Australian University. *Research in Higher Education*, 65, 1316-1339. <https://doi.org/10.1007/s11162-024-09778-7>
- Hollands, F. M., Leach, S. M., Shand, R., Head, L., Wang, Y., Dossett, D., Chang, F., Yan, B., Martin, M., Pan, Y., & Hensel, S. (2022). Restorative practices: Using local evidence on costs and student outcomes to inform school district decisions about behavioral interventions. *Journal of School Psychology*, 92, 188-208. <https://doi.org/10.1016/j.jsp.2022.03.007>
- Hoover, S., & Bostic, J. (2021). Schools as a vital component of the child and adolescent mental health system. *Psychiatric Services*, 72(1), 37-48. <https://doi.org/10.1176/APPI.PS.201900575>
- Joseph, A. A., Wilcox, S. M., Hnilica, R. J., & Hansen, M. C. (2020). Keeping race at the center of school discipline practices and trauma-informed care: An interprofessional framework. *Children and Schools*, 42(3), 161-170. <https://doi.org/10.1093/cs/cdaa013>
- Kareem, J., Patrick, H. A., Prabakaran, N., Valarmathi, B., Tantia, V., Pramod Kumar, M. P. M., & Mukherjee, U. (2023). Transformational educational leaders inspire school educators' commitment. *Frontiers in Education*, 8, Article 1171513. <https://doi.org/10.3389/feduc.2023.1171513>
- Kim-Ju, G. M., Knifsend, C. A., & Gonzales, A. (2024). Putting social and emotional learning into practice: Best practices in developing and implementing an SEL program through a university-1st-8th grade partnership. *Social and Emotional Learning: Research, Practice, and Policy*, 3, Article 100033. <https://doi.org/10.1016/j.sel.2024.100033>
- Kumar, M. (2019). Championing equity, empowerment, and transformational leadership in (mental health) research partnerships: Aligning collaborative work with the global development agenda. *Frontiers in Psychiatry*, 10, Article 99. <https://doi.org/10.3389/fpsyt.2019.00099>
- Leithwood, K. (2021). A review of evidence about equitable school leadership. *Education Sciences*, 11(8), Article 377. <https://doi.org/10.3390/educsci11080377>

- Levinson, M., Geron, T., & Brighouse, H. (2022). Conceptions of educational equity. *AERA Open*, 8(1), 1-12. <https://doi.org/10.1177/23328584221121344>
- Liden, R. C., Wang, X., & Wang, Y. (2025). The evolution of leadership: Past insights, present trends, and future directions. *Journal of Business Research*, 186, Article 115036. <https://doi.org/10.1016/j.jbusres.2024.115036>
- March, A., Stapley, E., Hayes, D., Moore, D., & Deighton, J. (2024). Sustaining mental health and wellbeing programmes in schools: Recommendations from an online roundtable. *Frontiers in Education*, 9, Article 1397994. <https://doi.org/10.3389/educ.2024.1397994>
- March, A., Stapley, E., Hayes, D., Town, R., & Deighton, J. (2022). Barriers and facilitators to sustaining school-based mental health and wellbeing interventions: A systematic review. *International Journal of Environmental Research and Public Health*, 19(6), Article 3587. <https://doi.org/10.3390/ijerph19063587>
- Moore, S., Long, A. C. J., Coyle, S., Cooper, J. M., Mayworm, A. M., Amirazizi, S., Edyburn, K. L., Pannozzo, P., Choe, D., Miller, F. G., Eklund, K., Bohnenkamp, J., Whitcomb, S., Raines, T. C., & Dowdy, E. (2023). A roadmap to equitable school mental health screening. *Journal of School Psychology*, 96, 57-74. <https://doi.org/10.1016/j.jsp.2022.11.001>
- Murwanto, P. (2024). Developing and practicing inclusive leadership in schools. *Progres Pendidikan*, 5(1), 93-100. <https://doi.org/10.29303/prospek.v5i1.710>
- Raniti, M., Rakesh, D., Patton, G. C., & Sawyer, S. M. (2022). The role of school connectedness in the prevention of youth depression and anxiety: A systematic review with youth consultation. *BMC Public Health*, 22, Article 2152. <https://doi.org/10.1186/s12889-022-14364-6>
- Rautela, S., Sharma, A., & Panackal, N. (2024). Exploring the mental well-being of higher educational institutions students: A bibliometric analysis. *Cogent Education*, 11(1), Article 2343522. <https://doi.org/10.1080/2331186X.2024.2343522>
- Santiago, I. S. D., dos Santos, E. P., da Silva, J. A., de Sousa Cavalcante, Y., Gonçalves Júnior, J., de Souza Costa, A. R., & Cândido, E. L. (2023). The impact of the COVID-19 pandemic on the mental health of teachers and its possible risk factors: A systematic review. *International Journal of Environmental Research and Public Health*, 20(3), Article 1747. <https://doi.org/10.3390/ijerph20031747>
- Stokes, H. (2022). Leading trauma-informed education practice as an instructional model for teaching and learning. *Frontiers in Education*, 7, Article 911328. <https://doi.org/10.3389/educ.2022.911328>
- Stone, G., Witzig, T., & McIntosh, C. (2023). The impact of COVID-19 on school-age children. *Psychology in the Schools*, 60(5), 1347-1354. <https://doi.org/10.1002/pits.22831>
- Sweeney, A., Filson, B., Kennedy, A., Collinson, L., & Gillard, S. (2018). A paradigm shift: Relationships in trauma-informed mental health services. *BJPsych Advances*, 24(5), 319-333. <https://doi.org/10.1192/bja.2018.29>
- Town, R., Hayes, D., March, A., Fonagy, P., & Stapley, E. (2024). Self-management, self-care, and self-help in adolescents with emotional problems: A scoping review. *European Child and Adolescent Psychiatry*, 33, 2929-2956. <https://doi.org/10.1007/s00787-022-02134-z>
- Turner, J., & Friesen, S. (2024). Mapping education leadership of mental health promotion in one school district in British Columbia: A strength-based case study. *Social and Emotional Learning: Research, Practice, and Policy*, 3, Article 100031. <https://doi.org/10.1016/j.sel.2024.100031>
- World Health Organization. (2021, June 22). *WHO guideline on school health services*. <https://bit.ly/4iaOi1p>
- World Health Organization. (2023, May 3). *How school systems can improve health and well-being. Topic brief: Mental health*. <https://bit.ly/4knAvGn>
- Yue, Z. (2023). Leadership styles of school leaders and the mental health of teachers in a University in Beijing, China. *Pacific International Journal*, 6(4), 98-102. <https://doi.org/10.55014/pij.v6i4.483>

Appendix

Table A1. Papers and reports used for this research

Author (Year)	Quality of Studies	Study Type	Mental Health Condition Assessed	Scale Used	Main Results	Study Limitation
Armijos et al. (2023)	High	Systematic Review	Anxiety, depression, and trauma	Equity-focused adaptation, community engagement strategies, and a systematic documentation process.	The paper highlights the importance of mental health and psychosocial support (MHPSS) services for vulnerable populations during the COVID-19 pandemic, emphasizing the need for equitable access to these services. Community engagement is emphasized as vital for ensuring services are culturally relevant and accountable to the needs of vulnerable populations.	The strategies and adaptations discussed are based on specific contexts, such as Bangladesh, Colombia, Ecuador, and Lebanon, which may not be generalizable to other settings or populations.
Bhattacharyya (2023)	Moderate	Qualitative Study	Mental Health & Educational Equity	Literature review	College students' mental health is linked to equity gaps and academic performance, showing the need for tailored interventions.	Small sample size, single institution.
Campbell et al. (2022)	High	Systematic Review	Mental Health of University Students	Observational studies	Identified critical factors like academic stress and social isolation affecting mental health during the pandemic.	UK-focused, limited global applicability.
Chen (2023)	High	Empirical Study	Transformational Leadership Impact	Framework	Transformational leadership improved teacher-student relationships, boosting student resilience and academic success.	Context-specific findings.
Das and Dhar (2023)	High	Qualitative Study	Academic Performance & Mental Health	Interviews	Demonstrated that comprehensive mental health programs enhance both emotional well-being and academic outcomes.	Limited to qualitative insights.
DASH et al. (2023)	High	Action Guide Report	Mental Health in Schools	Implementation guide	Provided a robust framework for mental health policy implementation at school and district levels.	Lacks empirical evaluation.
Deng et al. (2023)	High	Evidence-based Review	Transformational Leadership	Meta-analysis	Found a strong positive correlation between leadership practices and improved teacher and student well-being.	Context-specific, diverse methods used.
Drabenstott et al. (2023)	Moderate	Pilot Program	School Mental Health	Mixed methods	Improved student mental health outcomes through cross-sector collaboration and leadership training.	Limited program duration, pilot only.
Edyburn et al. (2023)	High	Framework Development	Intersectionality in Mental Health	Review major leadership model, highlight evidence for empirical redundancy, and discuss meta-analytic findings.	Developed a framework linking social determinants and mental health interventions in schools.	No direct implementation evidence.

Table A1. Continued

Author (Year)	Quality of Studies	Study Type	Mental Health Condition Assessed	Scale Used	Main Results	Study Limitation
Ertem (2024)	High	Empirical Study	School Leadership & Mental Health	Not specified	Showed that leadership practices fostering inclusivity significantly reduce student anxiety and emotional distress.	Limited to single-country data.
World Health Organization and Unesco (2021)	High	Global Report	School Health Services	Policy framework	Established global standards for integrating mental health services into education systems.	Focus on policy, lacks empirical data.
March et al. (2022)	High	Systematic Review	School-based Interventions	Mixed methods	Reported long-term academic and emotional gains through integrated school mental health programs.	Limited longitudinal follow-up.
March et al. (2024)	High	Systematic Review	Mental Health Program Sustainability	Literature review	Identified key enablers like stakeholder engagement and funding stability for program sustainability.	Lack of field-based case studies.
Gill et al. (2024)	High	Quantitative Study	Mental Health & Employability	Surveys	The positive association between mental health equity policies and job readiness among university students.	Limited to one university.
Joseph et al. (2020)	High	Empirical Study	School Discipline & Trauma Care	Systematic observation and measurement of behavior	Trauma-informed policies reduced suspensions and improved school climate in high-risk environments.	Limited focus on racial disparities.
Hollands et al. (2022)	High	Cost-Outcome Analysis	Restorative Practices	Cost-analysis tools	Found restorative practices to be cost-effective in reducing behavioral incidents and improving student outcomes.	Limited economic context analysis.
Murwanto (2024)	Moderate	Case Study	Inclusive School Leadership	Qualitative data	Demonstrated that inclusive leadership fosters equity and reduces dropout rates.	Limited to one school setting.
Santiago et al. (2023)	High	Empirical Study	Mental Health & COVID-19 Impact	Mixed methods	Showed increased mental health needs and adaptation challenges among teachers during the pandemic.	Focused on pandemic context only.
Moore et al., (2023)	High	Research Report	School Mental Health Screening	Survey Data	Proposed new screening models improving early mental health detection.	Limited sample diversity.
Sweeney et al., (2018)	High	Narrative review	Addresses mental distress broadly, emphasizing that past trauma is a significant underlying factor for many individuals seeking mental health services.	No empirical measurements or scales were employed within the study.	The authors highlight several key points: prevalence of trauma, re-traumatization risks, impact on staff, and benefit of trauma-informed care	The article does not present original empirical data or statistical analyses