



School Mental Health Services

Legislator Policy Brief

The Healthy States Initiative

A partnership to promote public health

The Healthy States Initiative helps state leaders access the information they need to make informed decisions on public health issues. The initiative brings together state legislators, Centers for Disease Control and Prevention (CDC) officials, state health department officials and public health experts to share information and to identify innovative solutions.

The Council of State Governments' partners in the initiative are the National Black Caucus of State Legislators (NBCSL) and the National Hispanic Caucus of State Legislators (NHCSL). These organizations enhance information-sharing with state legislators and policymakers on critical public health issues.

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Why public health?

State legislators play a vital role in determining the structure and resources available to state and local agencies dedicated to protecting the public's health. Public health agencies educate the public and offer interventions across a wide spectrum of public health issues including:

- Ensuring that children and at-risk adults are immunized against deadly diseases;
- Assisting victims of chronic conditions such as cancer, heart disease and asthma;
- Preventing disease and disability resulting from interactions between people and the environment;
- Researching how HIV/AIDS infections and other sexually transmitted diseases can be prevented;
- Promoting the health and well-being of people with disabilities; and
- Working with schools to prevent risky behavior among children, adolescents and young adults.

Information resources for state policymakers

New information resources produced under this initiative include:

- Healthy States Web site. This unique Web site offers information and resources on many public health issues. Visit <http://www.healthystates.csg.org> to get information, sign up for publications and view other information on the initiative.
- Health Policy Highlights and Healthy States e-weekly. Each week, this free weekly electronic newsletter brings the latest public health news, resources, reports and upcoming events straight to your inbox.
- Healthy States Quarterly. CSG publishes a free quarterly newsletter covering public health legislative and policy trends, innovative best practices from the executive and legislative branches, current research and information on Healthy States activities.
- Forums and Web Conferences. Web conferences are offered to allow public health experts, legislators and legislative staff to interact on priority public health issues. Forums include educational sessions on public health issues, new legislator training and roundtable discussions with peers and public health experts.
- Healthy States Publications. New resources will assist state legislators interested in public health topics, including obesity and chronic disease prevention, HIV/AIDS and sexually transmitted disease prevention, vaccines, health disparities and school health.

For more information

If you are interested in the learning opportunities available through the Healthy States Initiative, visit <http://www.healthystates.csg.org>, <http://www.nbcsl.org> or <http://www.nhcsl.org>.

School Mental Health Services

Overview

The number of children and adolescents suffering from mental illnesses constitutes a public health crisis in this country. Untreated mental health problems in children can cause negative and oftentimes tragic long-term consequences.¹ Some of these consequences include dropping out of high school, substance abuse, a lack of vocational success, an inability to live and function independently, health problems and suicide.¹

One in five children and adolescents suffers from a mental disorder of some kind, and one in 10 children has a serious emotional disorder that affects his or her ability to function daily.¹ Slightly more than 28 percent of students admitted to feeling so sad or hopeless for two or more continuous weeks over the past 12 months that they stopped doing some usual activities.² Unfortunately, four out of five children who need mental health services do not receive them.¹

Because of the amount of time children spend in school, school-based programs provide opportunities to identify, refer and support children with mental health problems. To be effective however, school-based mental health programs must be a collaborative effort among health care professionals, educators, school administrators, mental health specialists and families.

This Legislator Policy Brief provides state policymakers with key background information about school mental health and identifies proven and cost-effective prevention strategies for states.

What Do State Legislators Need to Know About School Mental Health?

Sound mental health leads to academic success in school and is essential to overall health.³ Comprehensive community mental health services for children and adolescents that rely on a multi-agency, multi-disciplinary approach can cut public hospital admissions and lengths of stays.³ Evidence shows that community-based programs can also reduce average days of juvenile detention by approximately 40 percent, saving states money and valuable resources.³

Minorities have less access to mental health services and are less likely to receive needed care. Hispanic children are least likely to receive specialty care from trained professionals, even though evidence indicates that they and African-American children have the greatest need for care.⁴ Additionally, minority children who are receiving treatment often receive poorer quality mental health care.

A 2002 survey by the Substance Abuse and Mental Health Services Administration (SAMHSA) found two-thirds of school districts reported an increased need for mental health services. Despite this, one-third of the districts questioned reported that funding for mental health services had decreased since the beginning of the 2000-2001 school year.⁵ During the same period, 60 percent of districts reported that referrals to community-based providers increased, while one-third of those surveyed reported that the availability of outside providers to deliver services to students in need had decreased.⁵

The U.S. Surgeon General considers schools to be primary locations for recognizing potential mental disorders in children.⁶ Early intervention for children has provided demonstrated savings in expenditures for special education, welfare assistance and the criminal justice system.⁷ Early intervention also leads to better social, emotional and decision-making skills and higher standardized test scores.⁷

What Can State Legislators Do to Improve School Mental Health?

State legislators play an important role in reducing the number of children and adolescents suffering from mental health disorders. State legislators can:

- Support strong stakeholder involvement and a shared family-school-community system approach;
- Ensure a full continuum of effective, free supports and services are provided for students;
- Mandate continuous and efficient professional development activities for public school staff, including administration, certified teachers, classified and support staff; and
- Provide state funding so communities and schools can implement adequate and appropriate assessments/early identification efforts.

Define Mental Health Broadly

- Emphasize positive mental health outcomes to avoid the stigma associated with mental illness.
- Encourage partnerships and consensus-building among schools, communities and the home.
- Alert colleagues and constituents to the seriousness of the problem and let them know that it will take hard work and serious commitment to address these issues.

Confront Equity Considerations

- All students, regardless of race or ethnicity, are entitled to mental health services when necessary.
- All students are also entitled to a healthy school environment that puts them in the best possible position to achieve academic success.

Address Competition for Scarce Resources

- Focus on mental health with the same urgency as physical health.
 - Encourage insurance providers to cover mental health just like physical health.
 - Recognize that much work remains before mental health parity can be achieved.

Develop a Public Health Call to Action

- **Develop a comprehensive state mental health plan.** This plan should provide specific guidelines for addressing the mental health needs of children and adolescents.
- **Improve and expand school mental health programs.** Given the amount of time children spend in the classroom, schools need to be better prepared to address the mental health needs of their students.
- **Promote early intervention.** Evidence indicates that when mental health problems are addressed early, children can go on to live productive and happy lives. Conversely, when problems persist for long periods of time, the consequences can negatively affect a child's life for its duration. Untreated problems often result in an increased risk for substance abuse, violence and suicide.¹

State Policy Examples

The Partnership for Kids

The Partnership for Kids (PARK Project) in Bridgeport, Conn., is a partnership among parents, mental health professionals and the Bridgeport community designed to ensure children live in a safe, caring community that emphasizes the development of positive mental health.

The project's goal is to build a system of care in homes, at schools and within the community that allows children to overcome behavioral and mental health challenges in order to live successful lives. The project emphasizes providing individual support to children with behavioral and mental health challenges by responding to each child's unique needs. The program also places tremendous importance on involving families in all decisions related to a child's care.

The PARK Project is funded by a grant from SAMHSA and is a collaboration among the Connecticut Department of Children and Families, Bridgeport Public Schools and local service organizations in the greater Bridgeport area.

<http://www.theparkproject.org/index.html>

Chatham-Savannah Youth Futures Authority

Founded as a result of state legislation in July 1988, the Chatham-Savannah Youth Futures Authority (YFA) in Georgia was established to improve school dropout rates, reduce school failures, lower teen pregnancy rates and encourage adolescents to seek employment and become more active in the community. These goals were based on the belief that children's problems were not isolated. The YFA involves families throughout the recovery process by providing support and developing and maintaining a long-term relationship.

The YFA contends that the entire community has a role in helping children improve their mental health to become contributing members of society. Over the past 18 years, the project has evolved to include the city of Savannah, Chatham County, the Savannah-Chatham Public Schools and more than 20 United Way and human services agencies. The YFA has built and operates its own Neighborhood Family Resource Center and works in middle and high schools, as well as company worksites and local churches. The program serves approximately 24,000 area families.

<http://www.youthfutures.com/>

New Jersey School-Based Youth Services Program _____

The New Jersey School-Based Youth Services Program (SBYSP) is a statewide initiative that allows the New Jersey Department of Human Services to provide health and social services in or near New Jersey schools. SBYSP primarily serves adolescents aged 13 to 19 who are at risk of dropping out of school or are in need of counseling services beyond what the school system can provide.

The SBYSP assists approximately 15,000 students, 50 percent of whom are African-American and another 23 percent of whom are Hispanic. The SBYSP conducts operations in 45 urban, rural and suburban school districts and has at least one site in every New Jersey county. All sites provide the following mental health services: crisis intervention, individual and family counseling, drug and alcohol abuse counseling, mental health and family services counseling and learning support services.

<http://www.state.nj.us/humanservices/sp&i/schoolbased.html>

National Alliance on Mental Illness Utah's Hope for Tomorrow Program _____

Utah's Hope for Tomorrow program is designed to teach students, teachers, parents and the community about the dangers of mental illness. The program's goals are to raise awareness of mental health issues, eliminate the stigma associated with mental illness and provide hope to students and parents who are affected by a mental disorder. By utilizing the expertise of mental health professionals and educators, students and their families are better able to understand address their mental illness.

Hope for Tomorrow focuses most of its efforts in three areas: mood disorders, substance abuse and eating disorders. The program uses video clips, classroom discussion guides, mental health tips of the day, community forums for parents and professional development for teachers to better educate the entire community about the signs and dangers of a mental health disorder.

<http://www.namiut.org/hope.htm>

Advice from a State Legislator

Making a Commitment to Mental Health



Amanda Aguirre
Arizona Senate

Since 1991, Amanda Aguirre, M.A., R.D., has been the CEO/president of the nonprofit Regional Center for Border Health Inc. She also serves as the CEO/president of the San Luis Walk-In Clinic Inc., a subsidiary nonprofit rural health clinic of the Regional Center for Border Health Inc. Aguirre has been involved for more than 25 years in public health education and administration with a strong emphasis in U.S.-Mexico border health issues. She has served as a legislator in Arizona since Nov. 2, 2004, and was elected to the Senate on Dec. 4, 2006. She has introduced multiple bills covering a broad range of mental health topics.

Her Advice To State Legislators:

- **Understand the importance of the issue.** Aguirre emphasized the need for legislators to educate themselves on the importance of school mental health. She highlighted the link between good mental health and classroom performance when stressing the importance of this topic.
- **Bring stakeholders together.** According to Aguirre, the first step in improving school mental health is to bring all relevant parties to the table. This means law enforcement agencies, government officials, schools administrators, teachers, parents and students all have to put aside their differences and show a genuine willingness to cooperate. Only when this is accomplished can real progress be made.
- **The problem can only be solved with proper funding.** Aguirre said that simply talking about the problem is not enough. State legislators and government officials must show a commitment to improving school mental health by providing adequate funding to address the problem. With proper funding, programs that will make a difference in the lives of children in the future can be developed and put in place.

Want to Know More?

We'll help you find experts to talk to about this topic

If you would like to explore this topic in greater depth, contact us at the Healthy States Initiative and we'll help you connect with:

- an expert on this issue from the CDC.
- fellow state legislators who have worked on this issue.
- other public health champions or officials who are respected authorities on this issue.

Send your inquiry to <http://www.healthystates.csg.org/> (keyword: inquiry) or call the health policy group at (859) 244-8000 and let us help you find the advice and resources you need.

Advice from a State Legislator

Working Together Vital for Success

Judy Baker
Missouri House of Representatives



Rep. Judy Baker was elected in 2004 to represent part of Boone County (District 25) in the Missouri House of Representatives. She is an adjunct professor of managerial economics at Columbia College in Columbia, Mo., and a health care consultant and managing partner at Cura Advantage, a health care consulting firm. She has sponsored multiple pieces of legislation addressing school mental health issues, including HCR 41 (2007), which recommended that professional development opportunities for elementary, secondary and postsecondary educators include sessions on social and emotional learning disorders.

Her Advice To State Legislators:

- **Highlight the problem.** Legislators need to make a stronger effort to illustrate to their constituents and colleagues why school mental health issues are such a problem. The first step in resolving a problem is drawing attention to it.
- **Cooperate and align with proper agencies.** Legislators must align themselves with the proper public and private agencies and community stakeholders to coordinate efforts in the children's mental health delivery system.
- **Develop a multidisciplinary approach.** A multidisciplinary approach that utilizes the expertise of educators, mental health providers and school nurses needs to be established to ensure effective care. Legislators can aid this process by identifying champions from each area and bringing them together.
- **Create points of connection between legislators and bureaucrats.** This way, the work various stakeholders do can flow through one agency. The Children's Service Commission serves as that agency in Missouri.
- **A long-term commitment.** School mental health problems cannot be resolved overnight. Instead, policymakers must be prepared to work tirelessly to address these problems. Only through long-term commitment can change realistically be achieved.

Key Facts and Terms

Need for School Mental Health Services

- Approximately 20 percent of children and adolescents in the U.S. reported experiencing symptoms of a mental health problem and 5 percent reported experiencing “extreme functional impairment.”⁶
- Nearly 60 percent of the 2.2 million adolescents who reported a major depressive episode in the past year did not receive treatment.⁸
- Untreated mental illness can result in a lack of vocational success, substance abuse, violence and even suicide.¹
- The dropout rate for students with severe emotional and behavioral problems is nearly two times higher than it is for other students.⁹

Logic for Providing Mental Health Services in Schools

- To promote a healthy learning environment, schools need to provide a cohesive and coordinated school health program that promotes healthy development, prevents problems, allows for early interventions and provides assistance to those with severe and persistent problems.³
- Evidence suggests that students are much more likely to seek help when school-based programs are available and when they promote confidentiality and anonymity.¹⁰
- Though schools are not responsible for meeting every need of every student, schools need to address the barriers that directly affect learning.⁶

How Mental Health Services in Schools Can Promote Positive Outcomes

- Students in need of mental health services who receive emotional support and preventive care perform better in school.¹¹
- Elementary schools that have recently expanded mental health services have reported:
 - A reduction in special education referrals.¹¹
 - An improved school climate.¹¹
 - Declines in disciplinary referrals, suspensions and grade retentions.¹¹

Cost/Benefit Analysis

- Evidence supplied by the Institute of Medicine indicates early childhood mental health interventions for at risk and low-income children have resulted in savings in public expenditures for special education, welfare assistance and the criminal justice system.¹²
- It is estimated that nearly \$200 billion a year in economic loss could be avoided by improving the quality of schooling, investing more in education and reducing the dropout rate.¹³

What Scientific Research Says

Scope of the Problem

- Epidemiological studies indicate that 12 percent to 30 percent of school-aged children in the U.S experience at least moderate behavioral, social or emotional problems.¹⁴
- During 2005, approximately three in 10 high school-aged children reported feeling sad or hopeless almost every day for a two-week period.²

Need for Early Detection

- Researchers from the National Institute of Mental Illness (NIMH) concluded that half of all lifetime cases of mental illness begin by age 14. The study also indicated that there are often long delays between the first onset of symptoms and the time people seek and receive treatment.¹⁴
- Untreated mental disorders can lead to more severe and more difficult-to-treat illnesses. It is even possible that an untreated mental illness can develop into an additional mental condition.¹⁴

A System in Need of Restructuring

- The NIMH study also indicates that the U.S mental health care system is not keeping up with patients' needs. Over a 12-month period, 60 percent of people with a mental disorder did not receive any form of treatment.¹⁴
- The NIMH study concluded that improvements are needed to speed the initiation of treatment as well as to enhance the quality and duration of treatment.¹⁴

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Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance

<http://www.cdc.gov/mmwr/PDF/SS/SS5505.pdf>

Centers for Disease Control and Prevention, Mental Health Group

<http://www.cdc.gov/mentalhealth>

Center for School Mental Health Analysis and Action, University of Maryland School of Medicine

<http://csmha.umaryland.edu/>

Georgetown University Center for Childhood and Human Development

<http://gucchd.georgetown.edu/>

IDEA Partnership

<http://www.ideapartnership.org>

Louis de la Parte Florida Mental Health Institute, University of South Florida

<http://home.fmhi.usf.edu/default.aspx>

Mental Health America

<http://www.nmha.org/>

National Alliance on Mental Illness

<http://www.nami.org>

President's New Freedom Commission on Mental Health

<http://www.mentalhealthcommission.gov/>

School Mental Health Project, UCLA

<http://smhp.psych.ucla.edu/>

Substance Abuse and Mental Health Services Administration

<http://www.samhsa.gov/>

Technical Assistance Partnership for Child and Family Mental Health

<http://www.tapartnership.org/>

Preventing Diseases:

Policies that work based on the research evidence

1) Promote healthy eating.

Policies that give kids healthier food choices at school can help curb rising rates of youth obesity. Ensuring that every neighborhood has access to healthy foods will improve the nutrition of many Americans.

2) Get people moving.

Policies that encourage more physical activity among kids and adults have been proven to reduce rates of obesity and to help prevent other chronic diseases.

3) Discourage smoking.

Policies that support comprehensive tobacco control programs—those which combine school-based, community-based and media interventions—are extremely effective at curbing smoking and reducing the incidence of cancer and heart disease.

4) Encourage prevention coverage.

Policies that encourage health insurers to cover the costs of recommended preventive screenings, tests and vaccinations are proven to increase the rates of people taking preventive action.

5) Promote health screenings.

Policies that promote—through worksite wellness programs and media campaigns—the importance of health screenings in primary care settings are proven to help reduce rates of chronic disease.

6) Protect kids' smiles.

Policies that promote the use of dental sealants for kids in schools and community water fluoridation are proven to dramatically reduce oral diseases.

7) Require childhood immunizations.

Requiring immunizations for school and child care settings reduces illness and prevents further transmission of those diseases among children. Scientific, economic and social concerns should be addressed when policies to mandate immunizations are considered.

8) Encourage immunizations for adults.

Policies that support and encourage immunizations of adults, including college students and health care workers, reduce illness, hospitalizations and deaths.

9) Make chlamydia screenings routine.

Screening and treating chlamydia, the most common sexually transmitted bacterial infection, will help protect sexually active young women against infertility and other complications of pelvic inflammatory disease (PID) that are caused by chlamydia.

10) Promote routine HIV testing.

Making HIV testing part of routine medical care for those aged 13 to 64 can foster earlier detection of HIV infection among the quarter of a million Americans who do not know they are infected.

Learn more about these and other proven prevention strategies at <http://www.ahrq.gov/clinic/uspstfix.htm>, <http://www.thecommunityguide.org/policymakers.html> and http://www.prevent.org/images/stories/health_policy.pdf.

What the CDC Does for States

The Centers for Disease Control and Prevention (CDC) is part of the United States Department of Health and Human Services, which is the main federal agency for protecting the health and safety of all Americans. Since it was founded in 1946 to help control malaria, CDC has remained at the forefront of public health efforts to prevent and control infectious and chronic diseases, injuries, workplace hazards, disabilities and environmental health threats.

Helping state governments enhance their own public health efforts is a key part of CDC's mission. Every year, CDC provides millions in grants to state and local health departments. Some funds are in the form of categorical grants directed at specific statutorily-determined health concerns or activities. Other funds are distributed as general purpose block grants, which the CDC has more flexibility in deciding how to direct and distribute.

The CDC does not regulate public health in the states. Rather, it provides states with scientific advice in fields ranging from disease prevention to emergency management. It also monitors state and local health experiences in solving public health problems, studies what works, provides scientific assistance with investigations and reports the best practices back to public agencies and health care practitioners.

For state legislators who are interested in improving their state's public health, the CDC offers a wealth of resources, including:

- Recommendations for proven prevention strategies;
- Examples of effective state programs;
- Access to top public health experts at the CDC;
- Meetings specifically aimed at state legislative audiences;
- Fact sheets on policies that prevent diseases; and
- State-specific statistics on the incidence and costs of disease.

This publication from the Healthy States Initiative is also an example of CDC's efforts to help states. The Healthy States Initiative is funded by a cooperative agreement with the CDC.

The CDC has developed partnerships with numerous public and private entities—among them medical professionals, schools, nonprofit organizations, business groups and international health organizations—but its cooperative work with state and local health departments and the legislative and executive branches of state government remains central to its mission.



The Council of State Governments' (CSG) Healthy States Initiative is designed to help state leaders make informed decisions on public health issues. The enterprise brings together state legislators, officials from the Centers for Disease Control and Prevention, state health department officials, and public health experts to share information, analyze trends, identify innovative responses, and provide expert advice on public health issues. CSG's partners in the initiative are the National Black Caucus of State Legislators and the National Hispanic Caucus of State Legislators.

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