



## **5 Pillars: The Pathway to Improving the Delivery of Mental Health Services in Education**

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The mental health needs of our nation's youth have become an issue of great concern over the past decade. As the rates of mental illness among children and adolescents rise exponentially, a comprehensive and integrated approach to meet their needs must be developed.

Research has long established that a community approach to mental health is highly effective. Further, it has also been consistently documented that bringing mental health services to a community is much more successful than having children and their families go beyond their communities for services. As such, school systems become the ideal location to meet the mental health needs of children and adolescents. While some school systems across the nation have become epicenters for the delivery of mental health services, many have not. As a nation, we need to increase equitable access to mental health services for all youth.

By creating mental health systems within our schools that work in tandem with community mental health professionals and researchers, we (1) increase the likelihood of identification of students' mental health needs at earlier stages, (2) provide a pathway to develop innovative prevention and intervention programs, (3) create an integrative system of care in which students have access to the level of treatment needed when they need it, and (4) build capacity to sustain mental health services over time.

## **Pillar 1: School-Community Partnerships**

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### **Collaboration to Ensure the Delivery of Comprehensive Mental Health Services**

Developing collaborative working relationships between schools and the larger community will create pathways to ensure the delivery of comprehensive mental health services. The outcomes here are multiple. First, creating partnerships between schools and communities allows for the creation of a system of care in which services within the school system are enhanced, not duplicated. Second, it opens the door to developing creative ways to build capacity in terms of services offered. Third, the link between conducting research and implementing results into practice becomes a reality. Lastly, a functional system is created in which all students have access to mental health care.

#### **Key Points for School-Community Partnerships**

1. Creation of leadership teams comprised of school and community stakeholders
  - a. Partnerships emphasize collaboration, communication and transparency
2. Identification of school needs, delineation of roles and responsibilities, and acceptance of joint accountability
3. Coordination of school- and community-based mental health services
  - a. Identification of a designated coordinator to facilitate school-community partnerships and address mental health programming needs
  - b. Recognize the differences between school and community mental health professionals
  - c. Work to enhance, not duplicate services
4. Building capacity of services through additional partnerships with local universities
5. Ongoing needs assessment and program evaluation

## **Pillar 2: School-Based Mental Health Services**

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### **Developing a Framework for Prevention and Intervention**

Since school systems must intervene and respond to students experiencing acute (daily) and chronic (long-term) levels of social, emotional and behavioral challenges, the prospect of larger scale prevention programs and target interventions becomes limited. When school systems remain in reactive states, very little progress is made and the delivery of mental health services to the greater school population diminishes greatly. In order to build the schools that we need, educational institutions must develop a framework for the delivery of mental health services that will meet a wide range of students' needs. In addition to the supports provided to students, the ideal school-based mental health program would also work to increase parental knowledge and understanding in the area of mental illness so that they become strong advocates as part of their child's treatment team.

## **Key Points for School-Based Mental Health Services:**

1. Create school-based mental health “clinics” in which all students have access to services when needed.
  - a. Documents areas of need as well as progress
2. Develop a framework for the delivery of school-based mental health services
  - a. Universal prevention programs
  - b. Targeted individual and small group interventions
  - c. Wraparound services for students at greatest risk
3. Implement evidence-based prevention and intervention programs
4. Develop and implement Social Emotional Learning and Character Education programming that is embedded in core curriculum
5. Build student resiliency through the use of brain fitness
  - a. Increase student knowledge and understanding of brain functioning through the inclusion of neuroscience and brain development in Health and Biology classes. Specific attention should be given to brain fitness and positive ways students can prevent disease and optimize brain performance.
  - b. Teach students positive ways to achieve brain fitness:
    - i. Mindfulness
    - ii. Yoga/Controlled Movement
    - iii. Technology
6. Empower students through the creation of programs that teach self-advocacy skills and increase students’ self-respect and self-worth
7. Coordinate a wide range of parent support groups and provide opportunities for parent training

## **Pillar 3: Early Identification**

### **Implementation of Universal Mental Health Screening**

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The development of universal mental health screening programs in public education institutions across the nation should be deemed as equally important as current programs that screen regularly for vision, hearing, dental, and academic deficits. When schools provide universal mental health screenings for students at key transition points throughout their education, they increase the likelihood of early identification of social, emotional, and behavioral deficits that, when remain untreated, have the potential to negatively impact an individual’s success across his/her life as well as their overall contribution to society. Through early identification, high quality prevention and intervention programs can be developed in order to minimize long term effects and teach students the social, emotional, and behavioral skills needed to become productive adults.

Key Points for Universal Mental Health Screening:

1. Universal screening for social, emotional and behavioral difficulties
2. Focus screenings on key transition grade levels:

- a. Kindergarten
  - b. Middle School
  - c. High School
3. Identify an assessment protocol that includes standardized screening measures such as rating scales, questionnaires, surveys, and/or structured interviews
  4. Develop procedural guidelines for screening and identification
  5. Develop a framework for referring students for school- and/or community-based services
  6. Develop a monitoring system that aligns with federal guidelines in order to protect the privacy of educational records and health information (i.e., FERPA and HIPAA). This system should facilitate the communication of student information between school- and community-based mental health providers that is essential to streamlining treatment planning and service delivery across all domains (i.e., home-school-community).

## **Pillar 4: Educating the Educators**

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### **Creating a Nation of “Mindful Educators”**

Educators today are faced with a wide range of student social, emotional, and behavioral challenges. Unfortunately, most teacher training programs do not provide sufficient training in these areas and thus teachers often report feeling ill equipped to effectively address mental health issues when they arise in the classroom. In the short term, the provision of meaningful professional development opportunities must be created to target the specific needs of teachers. Such training should include increasing general knowledge of child and adolescent mental health, the impact of trauma on learning, verbal de-escalation skills to utilize when conflict arises, and ways to incorporate mindfulness into teaching practices. In the longer term, teacher-training programs need to improve curriculum and learning experiences in ways that will prepare teachers to develop confidence and competence when faced with challenging students.

#### **Key Points for Educating the Educators:**

1. High quality, meaningful professional development
2. Professional development needs are assessed and trainings are linked directly to the needs of staff
3. Trainings are developed to meet the specific needs of professional groups who work directly with students (i.e., not one size fits all)
  - a. Teachers, paraprofessionals, school-based mental health professionals, community-based mental health professionals, administrators, nurses, security staff, bus drivers, etc.
4. All mental health professionals must be trained in psychological first aide
5. All staff working directly with students should be trained in nonviolent physical crisis intervention.
6. Utilization of community partnerships to assist in creating professional development opportunities

## **Pillar 5: Sustainability**

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### **Guaranteeing Student Mental Health Matters**

One of the greatest barriers to mental health services in the schools is how to sustain programs over the long term. Due to budget and funding constraints within school districts and communities, there is generally a gap between the degree to which services are needed and the number of staff to provide the services. In addition, due to the nature of working with students with severe social, emotional, and behavioral difficulties, staff burnout and high job turnover is common. As a result, a school district's ability to sustain programs over the long-term diminishes. School districts along with the support of local agencies must come up with innovative ways to fund programs internally when funds are not available through state and federal funding.

#### **Key Points for Sustainability:**

1. School-based mental health programming must include ongoing assessment, data collection, progress monitoring, and program evaluation
2. Barriers to implementation of comprehensive school-based mental health programs should be identified and addressed
3. Partnerships with universities will allow school districts to increase funding through grant applications
4. Limiting the number of students placed in the least restrictive environments allows for the redistribution of funding to district-based programming
5. Policy changes:
  - a. On a local level, central school administrators can mandate the expansion of mental health services and programs by requiring their inclusion in school improvement plans and allocating appropriate funding
  - b. Federal mandate for educational institutions to develop school-based mental health "clinics"
  - c. Increase federal funding to school districts to implement school-based mental health programs
  - d. Increase federal funding to states' systems of care to provide greater accessibility to child and adolescent psychiatric services.