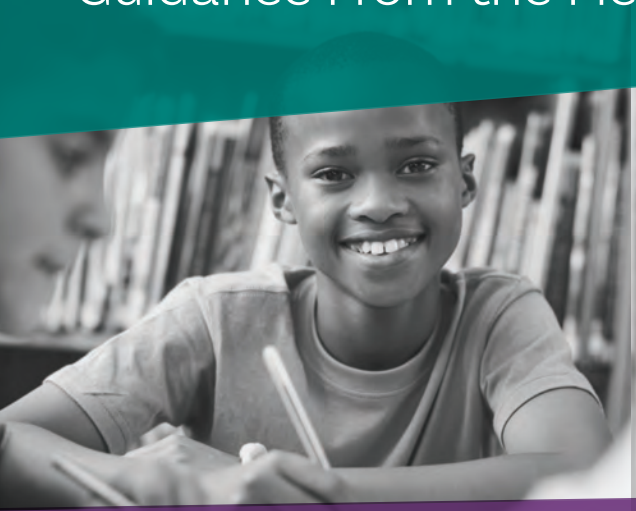
Advancing Comprehensive School Mental Health Systems

Guidance From the Field



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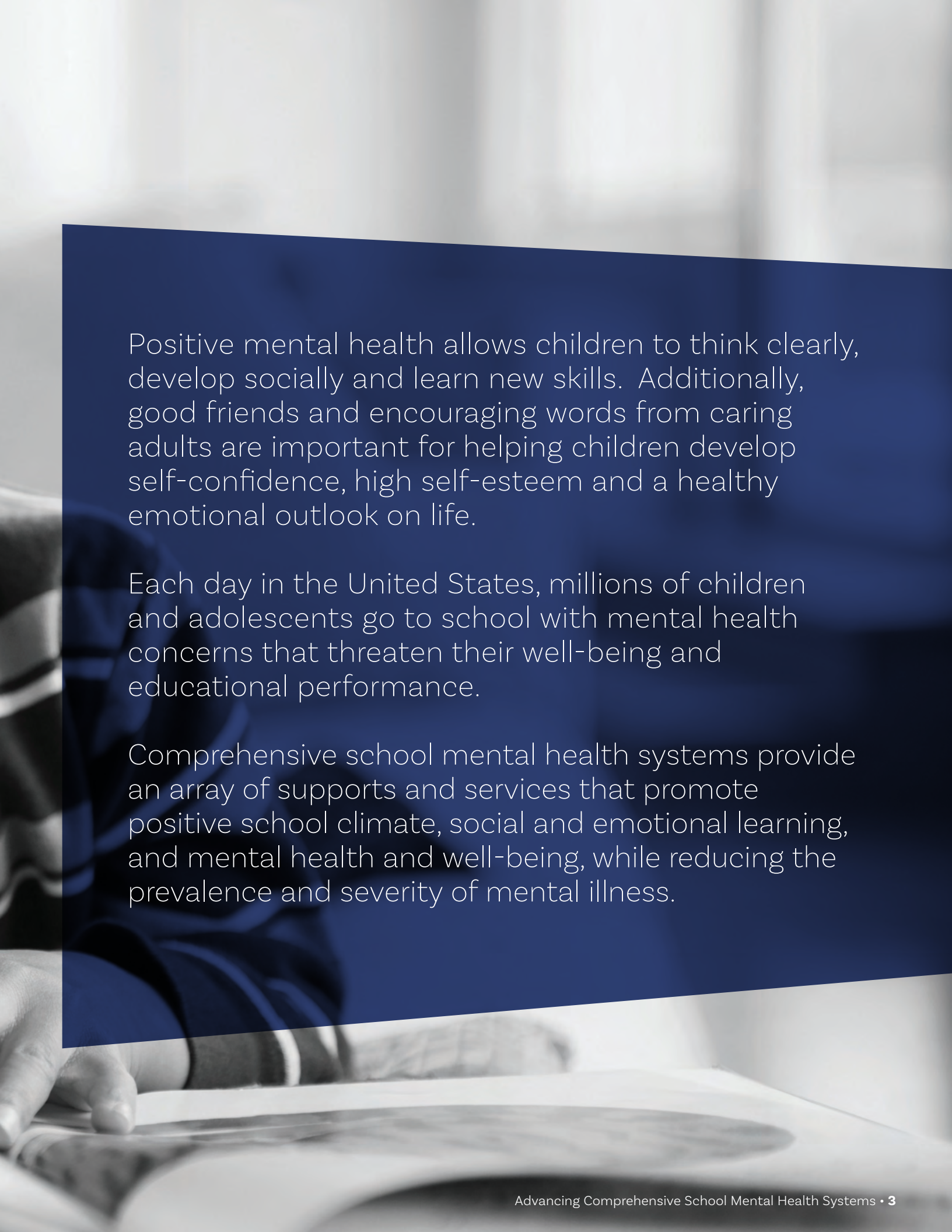

Positive mental health allows children to think clearly, develop socially and learn new skills. Additionally, good friends and encouraging words from caring adults are important for helping children develop self-confidence, high self-esteem and a healthy emotional outlook on life.

Each day in the United States, millions of children and adolescents go to school with mental health concerns that threaten their well-being and educational performance.

Comprehensive school mental health systems provide an array of supports and services that promote positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness.

Contents

Report Development Timeline

September 7, 2017

National convening: Expert panel on school mental health

May 17, 2018

National convening: School mental health in rural communities

June 15, 2018

National convening: School mental health state summit

Preface

This report offers collective insight and guidance to local communities and states to advance comprehensive school mental health systems. Contents were informed by examination of national best practices and performance standards, local and state exemplars, and recommendations provided by federal/national, state, local and private leaders.

In 2017 and 2018, the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) and Health Resources and Services Administration (HRSA), in partnership with the Bainum Family Foundation, hosted three national convenings of experts to advance the widescale adoption of high-quality, comprehensive school mental health systems in the United States. The meetings were designed to document:

- Key milestones and the current state of the school mental health field
- A shared vision of scaling up quality comprehensive school mental health across the nation
- Opportunities and challenges to improve quality and foster the wide-scale adoption of comprehensive school mental health systems
- The conditions (resources, strategies and stakeholder engagement at all levels) needed to scale up school mental health
- Consensus on critical areas of focus for shared work over the next five years

Outcomes of the discussions from the meetings were shared and augmented with input from the broader field via local, state and national meetings and conferences, including sessions at the Annual Advancing School Mental Conferences in 2017 and 2018. Additionally, in 2018, the National Training Institutes provided an important forum for multiple school mental health sessions and discussions to 1) further engage local, state and national partners involved in advancing comprehensive systems of care, and 2) create momentum toward wide-scale advancement of comprehensive school mental health systems across the nation.

July–December 2018

Gathered additional feedback at other local, state and national meetings and conferences

August 2018–May 2019

Developed and produced report

June 2019 and beyond

Engage partners and stakeholders to champion and scale up comprehensive school mental health systems nationally

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Aite Aigbe, Trina Anglin and Bethany Miller

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Andrea Alexander, Ingrid Donato, Larke Huang, Justine Larson, Joyce Sebian and Wendie Veloz

Organizations

Bainum Family Foundation
Noel Bravo and Nisha Sachdev

Center for Health and Health Care in Schools, Milken Institute School of Public Health at The George Washington University
Olga Acosta Price and Linda Sheriff

Child Health and Development Institute of Connecticut, Inc.
Jeana Bracey, Jason Lang and Jeffrey Vanderploeg

National Association of State Directors of Special Education
Joanne Cashman and Mariola Rosser

National Center for School Mental Health, University of Maryland School of Medicine
Jill Bohnenkamp, Elizabeth Connors, Sharon Hoover, Nancy Lever, Kathryn Moffa, Chandni Patel and Mills Smith-Millman

School-Based Health Alliance
John Schlitt

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www.schoolmentalhealth.org/AdvancingCSMHS

We dedicate this guidance monograph to the memory of Andrea Alexander, a dear friend and colleague who spent her career working to advance school mental health at local, state and national levels. Andrea was a significant partner in the national School Mental Health Work Group, and her untimely death only fueled the group to persevere with its goals. Andrea's energy, passion and commitment to improving systems of care for youth contributed significantly to the advancement of school mental health and to the quality of life for countless children and families. May her light shine bright through the work carried forth by school mental health champions across the nation.

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- **Office of Elementary and Secondary Education,** Norris Dickard, Paul Kesner and Kimberly Lights
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- **Bureau of Indian Education,** Teresia Paul

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- **Office of Justice Programs/Office of Juvenile Justice and Delinquency Prevention,** Kathryn Barry and Kathy Mitchell

States

Connecticut Department of Children and Families, Tim Marshall

District of Columbia Department of Behavioral Health, Charnetta Scott

Maryland State Department of Education, Reginald Burke

New Hampshire Department of Education, Mary Steady

North Carolina
- **Department of Health and Human Services,** Terri Grant
- **Department of Public Instruction,** Lauren Holahan

Pennsylvania Department of Human Services, Sherry Peters and Shannon Fagan

Tennessee
- **Department of Education,** Sara Smith
- **Department of Mental Health and Substance Abuse Services,** Keri Virgo

Vermont Department of Public Health and Mental Health, Laurin Kasehagen (CDC Epidemiologist assigned to Vermont)

West Virginia Department of Health and Human Resources, Jackie Payne

Wisconsin Department of Public Instruction, Monica Wrightman

School Districts/Schools

Adams-Friendship Area School District (WI), Crystal Holmes

Anne Arundel County Public Schools (MD), Ginny Dolan

Ashland School District (WI), Greta Blancarte

Baltimore County Public Schools (MD), Lisa Selby
Chapel Hill-Carrboro City Schools (NC), Kerry Sherrill
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New York Office of School Health, Scott Bloom
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Center for Health and Healthcare in Schools, George Washington University, Olga Acosta Price, Rachel Sadlon, Linda Sheriff and Eme Udoh
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Flint Hills Special Education Cooperative, Allison Anderson-Harder
Management and Training Innovations, Beth Stroul
Medstar Georgetown, Jeff Bostic
Midwest PBIS Network, Kelly Perales
Montgomery County Federation of Families for Children's Mental Health, Robyn Horsey
National Association for Rural Mental Health, Paul Mackie
National Association of School Nurses, Susan Hoffman
National Association of School Psychologists, John Kelly
National Association of State Directors of Special Education, Joanne Cashman and Mariola Rosser
National Association of State Mental Health Program Directors, Aaron Walker
National Association of State Mental Health Program Directors, Pennsylvania Representative, Shannon Fagan
National Center for School Mental Health, University of Maryland School of Medicine, Tiffany Beason, Yourdanos Bekele, Jill Bohnenkamp, Rachel Bolan, Dan Camacho, Elizabeth Connors, Dana Cunningham, Sharon Hoover, Vinetra King, Nancy Lever, Stephanie Moore, Brittany Parham, Kris Scardamalia and Rachel Siegal
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Universities

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Johns Hopkins Bloomberg School of Public Health, Catherine Bradshaw
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University of South Carolina, Mark Weist

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Executive Summary

Effective comprehensive school mental health systems contribute to improved student and school outcomes, including greater academic success, reduced exclusionary discipline practices, improved school climate and safety, and enhanced student social and emotional behavioral functioning.

Schools are a natural setting for collaboration across partners to promote student well-being and to support early identification and intervention for students with mental health concerns. Comprehensive school mental health systems provide a full array of supports and services that promote positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness. Comprehensive school mental health systems are built on a strong foundation of district and school professionals, including administrators, educators and specialized instructional support personnel (e.g., school psychologists, school social workers, school counselors, school nurses and other school health professionals), in strategic collaboration with students, families, and community health and mental health partners. These systems also assess and address the social, political and environmental structures — public policies and social norms included — that influence mental health outcomes.

"Schools are a natural setting for collaboration across partners to promote student well-being and to support early identification and intervention for students with mental health concerns."

The **core features** of a comprehensive school mental health system include:

- **A full complement of school and district professionals,** including specialized instructional support personnel, who are well-trained to support the mental health needs of students in the school setting
- **Collaboration and teaming** among students, families, schools, community partners, policymakers, funders and providers to address the academic, social, emotional and behavioral needs of all students as well as the predictable problems of practice in crossing systems and roles
- A thorough and continuous **needs assessment** of school and student needs and strengths, coupled with **resource mapping** of school and community assets, to inform decision-making about needed supports and services
- A full array of tiered, evidence-based processes, policies and practices, called a **multi-tiered system of support** (MTSS), that promotes mental health and reduces the prevalence and severity of mental illness
- Use of **screening and referral** as a strategy for early identification and treatment
- Use of **evidence-based** and **emerging best practices** to ensure quality in the services and supports provided to students
- Use of **data** to monitor student needs and progress, assess quality of implementation, and evaluate the effectiveness of supports and services
- **Diverse and leveraged funding** and continuous monitoring of new funding opportunities from federal/national, state and local sources to support a sustainable comprehensive school mental health system
- Leaders who lead by convening and who work effectively on both the technical and human sides to enable **change in policy, practice and people**

There are numerous exemplary models in localities across the United States that have inspired this guidance, several of which are featured here as a road map for states and communities that seek to achieve wide-scale adoption of comprehensive school mental health systems.

Mental health is defined as the social, emotional and behavioral well-being of students. Mental health services are broadly defined as any activities, services and supports that address social, emotional and behavioral well-being of students, including substance use.

Introduction

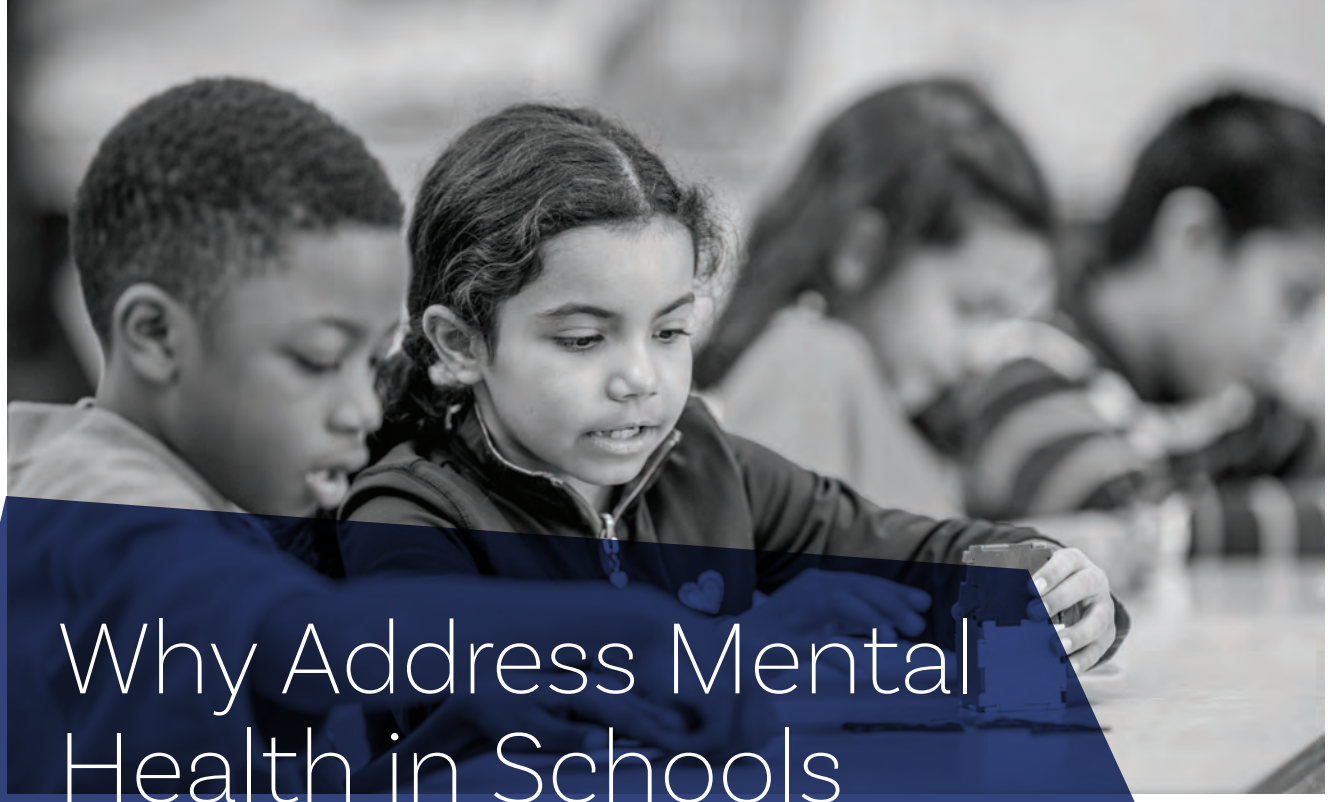
The well-being of school-aged children from kindergarten to 12th grade is a top priority for every community in our nation. Successful achievement of this goal is driven not only by a quality education, but also by healthy social and emotional development — the necessary foundation for children to learn, grow and thrive.

Every child's development is affected by several factors. Child outcomes are driven not only by a quality education and physical health, but also by social and emotional development, including home and neighborhood environment, peer groups, and the support they receive in school. The effects of these factors on the developing brain begin at a very early age and continue through adolescence and into adulthood. Decades of research demonstrate that supportive and safe environments rich in developmental opportunities provide children what they need to be successful academically, socially and emotionally.

Despite our best efforts to provide for the youngest members of our communities, many children struggle to achieve healthy social and emotional development. They may be challenged with mental health concerns that can disrupt their learning, their families and their peer relationships — and that can lead to immediate and enduring detrimental effects. To address these challenges, states and communities are implementing innovative policies and high-quality programs and strategies that have improved the development and well-being of and long-term outcomes for children.

Building comprehensive school mental health systems is one critical strategy to promote positive outcomes for our nation's children. As such, there is a growing movement across the United States to establish and strengthen these systems. At local, state and national levels, policymakers, practitioners and other community members are looking for opportunities to learn about, fund, implement and evaluate improvements for comprehensive school mental health systems.

Comprehensive school mental health systems provide an array of supports and services that promote positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness. These systems are built on a strong foundation of district and school professionals, including administrators, educators and specialized instructional support personnel (e.g., school psychologists, school social workers, school counselors, school nurses and other school health professionals), all in strategic partnership with students and families, as well as community health and mental health partners. These systems also assess and address the social and environmental factors that impact mental health, including public policies and social norms that shape mental health outcomes.



Why Address Mental Health in Schools

Policymakers, researchers and practitioners increasingly understand the inextricable link between mental health and learning, and the roles of home, school and community environments in mental health outcomes. Universal mental-health promotion activities in schools include an emphasis on positive school climate, social and emotional competencies, and reinforcement of prosocial behaviors. Universal approaches to promoting mental health in schools are increasingly being implemented by educators and student support staff across the United States and globally.

The past decade has documented the beneficial impact of mental health and evidence-based prevention programming on both long-term psychosocial outcomes and academic performance.[1, 2, 3] In 2009, the Institute of Medicine report, "Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities," recognized the positive longitudinal impact of school-based social, emotional and behavioral interventions. This further bolstered public interest in integrating universal mental health supports into schools.[1] In addition, efforts to shape school policies and practices that influence mental health outcomes, such as reducing exclusionary discipline (disciplinary action that removes or excludes a student from his or her usual educational setting) and installing trauma-informed systems, have increasing empirical support.

Beyond advancing social and emotional development and mental health promotion, educators, student support staff and other school-based staff play an integral role in the **identification and support of students with mental health problems.** Each day in the United States, millions of children and adolescents go to school with mental health concerns that threaten their well-being and educational performance.[4] In a given year, 13%–20% of children meet criteria for a mental disorder and approximately 5% of adolescents meet criteria for a substance use disorder, while only 12% of these youth receive any services to address the mental health and/or substance use concerns.[5, 6] For many young people, especially those of color and those who live in disadvantaged communities, their social and environmental contexts set them up for poor health and education outcomes. Youth living in impoverished communities have higher rates of depression and substance use and are at the highest risk of not having regular health maintenance visits.[7] Further, adverse childhood experiences (ACEs) have been correlated with short- and long-term physical and mental health consequences, chronic absenteeism, school failure, and school dropout.[8, 9, 10] In the longer term, youth exposed to ACEs are less likely to graduate from high school and more likely to be underemployed and financially unstable.[11]

13%-20%
Percentage of U.S. children who meet criteria for a mental disorder each year

5%
Percentage of U.S. adolescents who meet criteria for a substance abuse disorder each year

12%
Percentage of these youth who receive any services to address the mental health and/or substance abuse concerns

Missing
10%
or more school days is an early warning sign of academic risk and school dropout.

Mental, behavioral, social and emotional health issues are a leading contributor to chronic absenteeism

Youth are
6 times
more likely to complete evidence-based treatment when offered in schools than in other community settings[12]

A Public Health Approach to School Mental Health

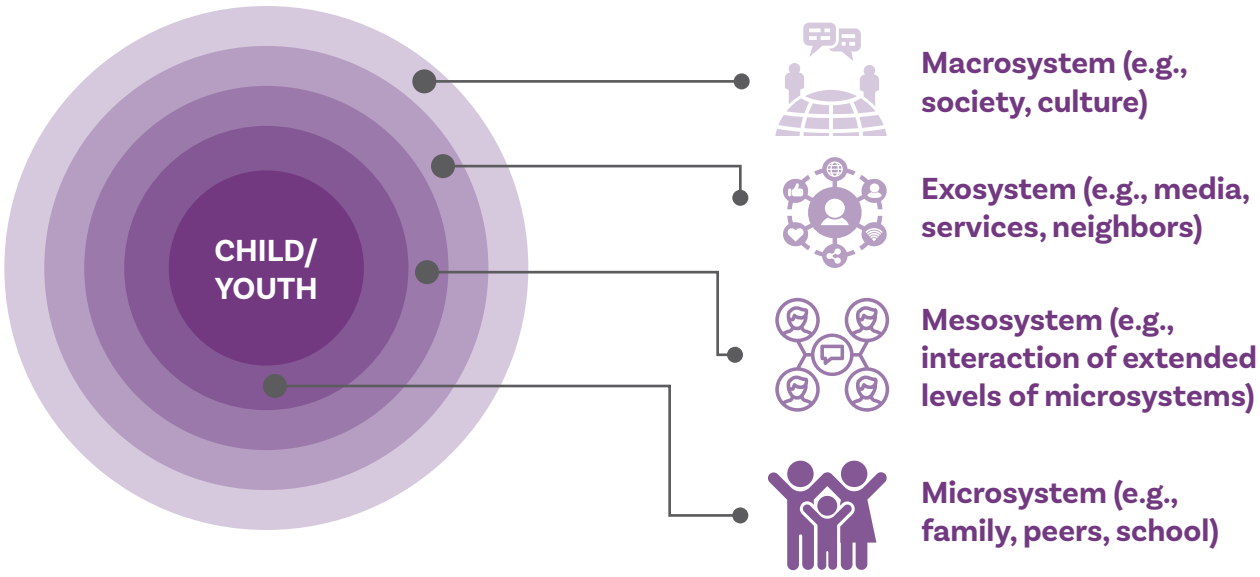
On the strength of the compelling evidence alone, schools have an imperative to attend not just to the academic success of students, but to their social, emotional and behavioral development as well.[13] Schools are a natural and logical setting in which to employ a public health framework that focuses on promoting student well-being and healthy behaviors and preventing mental health problems before they occur. But schools cannot do it alone.

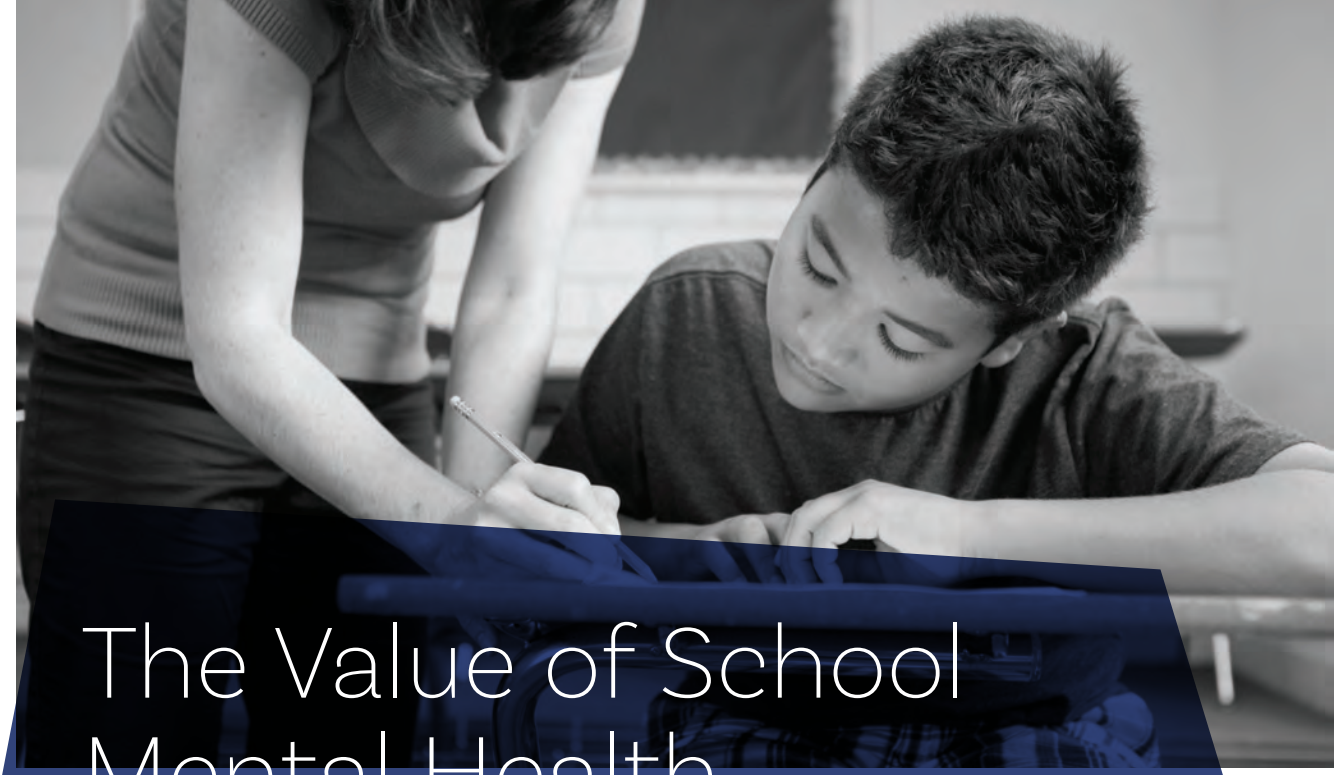
Many schools already operate from a preventive, multi-tiered approach to academic performance, often referred to as MTSS, that employs universal screening, early identification and intervention to address academic concerns. This same approach can be applied to mental health by implementing policies and interventions that promote mental health, prevent problem behaviors and address environmental factors that put students at risk for various mental health problems, while also offering early identification and treatment for students already displaying signs of mental health problems. In partnership with communities, schools can offer a seamless continuum of supports to a large population of students with and without mental health difficulties.

Today, children and adolescents are more likely to receive needed mental health care in their school than in any other setting. Of children and adolescents who receive mental health services, 70%–80% receive them in school.[14] **Schools offer a more accessible, less stigmatizing environment than traditional community-based mental health settings do.** In addition, many school professionals, including school psychologists, social workers, counselors, nurses and other health professionals, have specialized training to address student mental health concerns. While schools are an important setting in which to deliver mental health services, there are differences in training, experience and role definition that continue to challenge effective integration.

A public health approach to school mental health recognizes the primacy of the environment in which children live, learn and play. Healthy, well-adjusted young people thrive when they live among healthy families, schools and communities. This approach rests on the seminal work of Urie Bronfenbrenner, a renowned developmental psychologist at Cornell University who articulated an "ecological systems" model (see Figure 1) that helps practitioners and researchers better understand how environment has a crucial impact on children's healthy development.[15] The model stipulates that there is constant interplay between individuals and their environments. It also highlights that interventions aimed solely at individual behavior change are important but insufficient; interpersonal/environmental/social changes are needed to sustain improvements over time. Building off Bronfenbrenner's work and based in the public health approach, the Whole School, Whole Community, Whole Child (WSCC) model calls for schools to partner with communities and families to ensure that all students are healthy, engaged, safe, supported and challenged.[16] The WSCC model aims to improve educational attainment and healthy development for students, and it recognizes mental health as a critical component for addressing the needs of the whole child. Developing comprehensive school mental health systems as part of the model is essential for supporting all students.

Figure 1. Ecological Systems Model





The Value of School Mental Health

There is growing data to show the impact and value of providing mental health supports and services in schools. Comprehensive school mental health systems address the full array of these services and supports, including mental health promotion, prevention, early identification and treatment. Key findings are featured below and in Figure 2.

Positive Impact on Psychosocial and Academic Outcomes

Comprehensive school mental health systems are associated with improved student academic and psychosocial outcomes. Students who participate in social and emotional learning programs demonstrate improvements not only in self- and social awareness, decision-making and relationship skills, but also in academics, including standardized testing.[2] Comprehensive school mental health systems can positively impact students who face physical and mental health issues that impair their well-being and academic performance.[17] Impoverished youth and youth of color are at a higher risk for these negative outcomes.[18, 19] Of the many youth experiencing mental illness, few seek and receive adequate treatment.[20] Comprehensive school mental health systems improve access to all students, including traditionally underserved youth, and positively impact student outcomes — for example, with improved academic performance,[21] fewer special education referrals, decreased need for restrictive placements,[22] fewer disciplinary actions,[23, 24] increased student engagement and feelings of connectedness to school,[25] and higher graduation rates.[26]

Positive School Climate and Safety

Creating a positive school climate is a priority for school-based staff. As defined by the National Center for Safe and Supportive Learning Environments (2019), "a positive school climate is the product of a school's attention to fostering safety; promoting a supportive academic, disciplinary, and physical environment; and encouraging and maintaining respectful, trusting, and caring relationships throughout the school community."[27] There is abundant evidence that schools with positive school climate and integrated social and emotional learning are more likely than comparison schools to achieve higher standards of school safety, including less bullying, less student isolation, more positive peer and teacher-student relationships, and less weapon threat and use in schools.[28] Although the vast majority of students with mental illness are not violent (and are more likely than their peers to be victims of violence), systems for early identification and mental health treatment for students with mental health challenges can protect students who are vulnerable to being disconnected, isolated, self-harming, retaliating and aggressive, all of which are predictive of future violence.[29]

Early Identification and Intervention

Schools can identify mental health problems and intervene early. School staff spend a large part of the day with students and can apply their professional skills and experience to identify potential mental health concerns.[30] Additionally, periodic universal screening for mental health problems can help schools identify students in need of services before they develop a diagnosable mental health problem.[31] Given the high prevalence and recurrence of mental health disorders, it is important to identify problems early and connect students to services and supports. Early identification and treatment are associated with positive outcomes for both students and society, including saving money by reducing the need for more costly and intensive psychological services.[32, 33] Screening also offers the opportunity to assess the social determinants of mental health, including adverse early life experiences, food and housing insecurity, and income inequality.

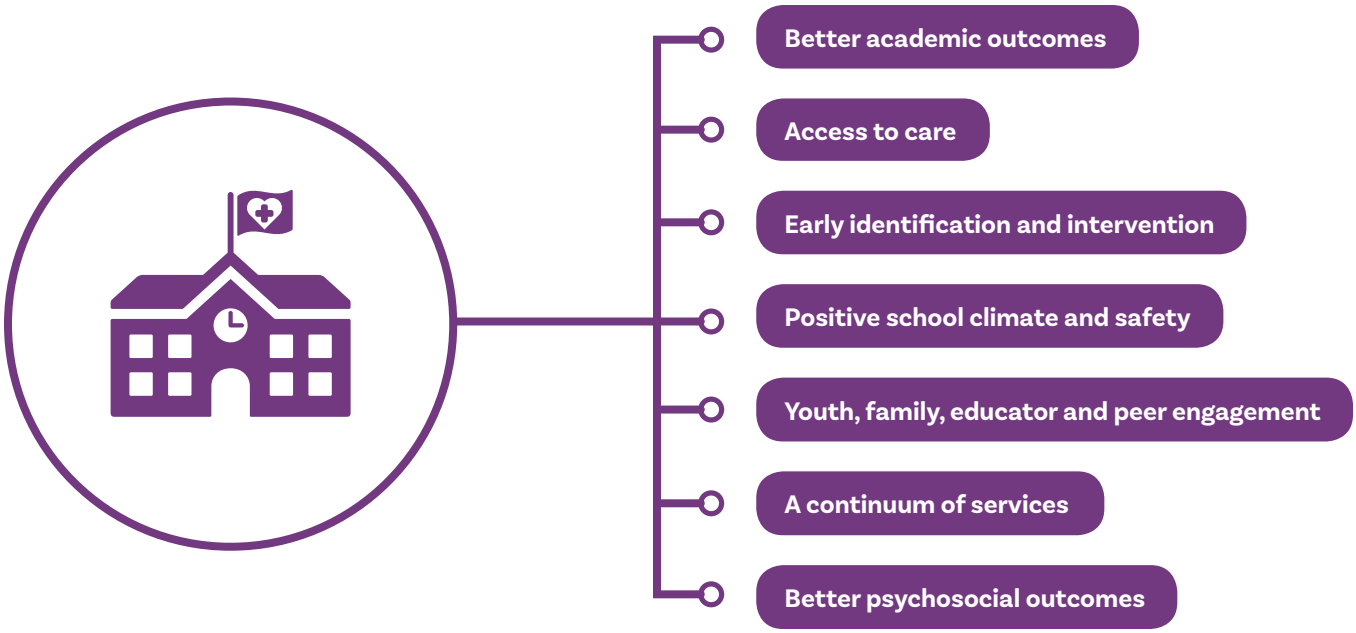
Access to Care

Stigma can directly impact help-seeking behaviors and openness to mental health treatment for both students and caregivers. Only a fraction of children, adolescents and families who experience mental health concerns access outpatient care in traditional, community mental health settings, and of those who access care, about 40%–60% drop out of treatment early.[34, 35] These rates speak to the barriers that keep many students and their families from accessing mental health services and reflect on the health disparities within populations of color and other demographic groups that impact their overall health and success in school. Many of these barriers can be avoided by providing mental health services in schools.[36, 37, 38] These services can be offered using direct school-based services, co-located school-based health centers and services, and school-linked community-based care, and through tele-mental health provided by school- or community-hired staff. Further, schools can reduce stigma and normalize mental illness and treatment by providing training and education to teachers and parents on mental health literacy and help-seeking.

Youth, Family, School and Peer Engagement and Partnership

Youth, family, educators and peers are critical stakeholders in children's mental health and well-being.[39, 40, 41] Meaningful engagement of youth and families in school-based mental health care requires that services are high-quality, easily accessible and individualized to their needs. Because the school setting is familiar and convenient to parents and caregivers and does not require the caregiver to take the student out of school for appointments, access to care is higher in schools when compared with more traditional community-based settings. School-based settings provide mental health professionals easy access to educators, who report both increased abilities to respond appropriately to students in psychological distress and better relationships with students. Educators observe less peer victimization in their classrooms after receiving training about identifying and addressing student mental health needs.[42] In addition, schools provide the unique advantage of being able to engage prosocial and influential peers in school mental health activities by inviting them to be peer mentors, advocates and/or therapy group members.

Figure 2. The Value of Comprehensive School Mental Health Systems: Positive Outcomes



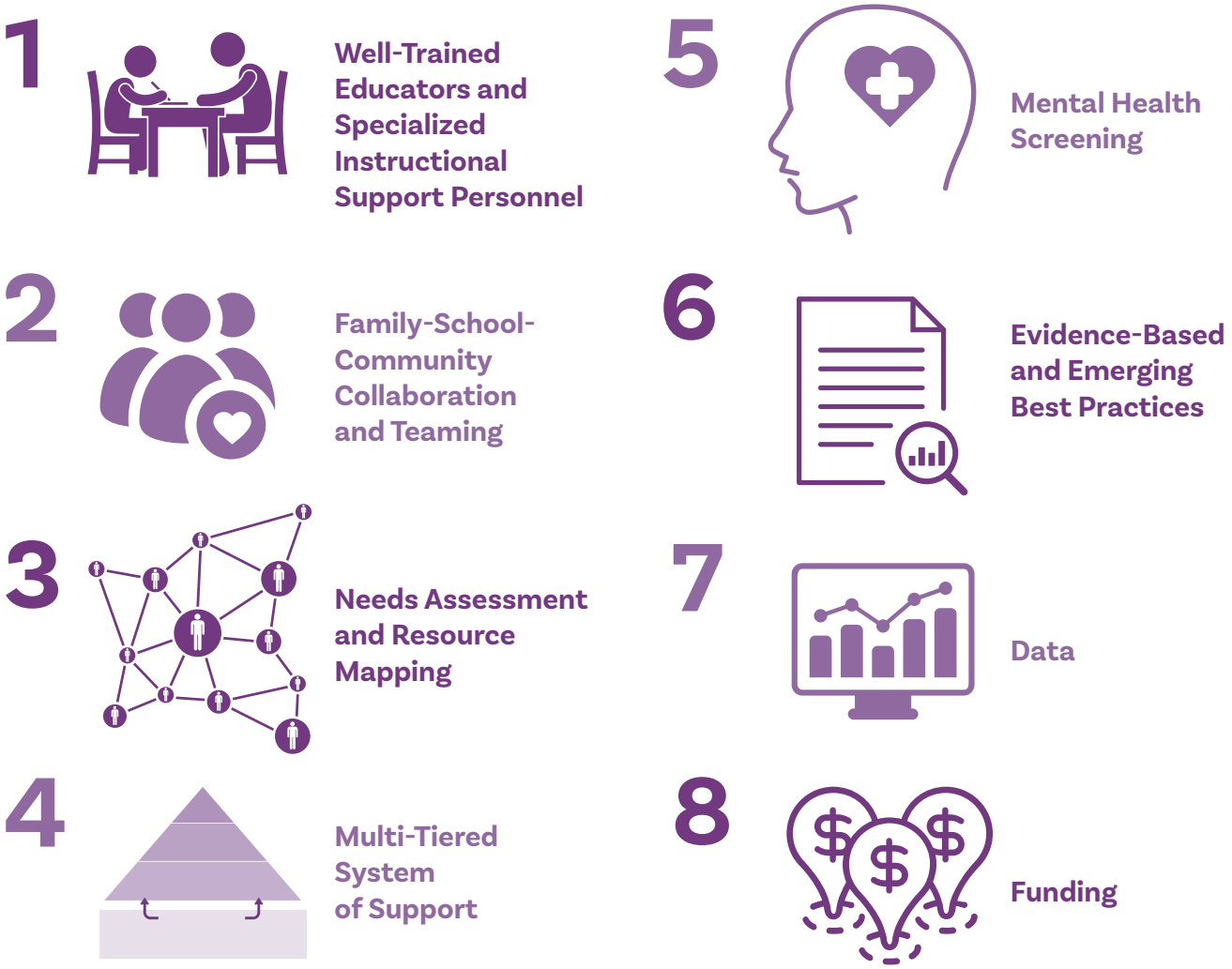
Core Features of a Comprehensive School Mental Health System

There are several core features of a comprehensive school mental health system. Each feature is highlighted in this section and in Figure 3.

1. Well-Trained Educators and Specialized Instructional Support Personnel

A comprehensive school mental health system is built on the foundation of a full complement of school and district professionals, including specialized instructional support personnel who are well-trained to support the mental health needs of students in the school setting. Administrators and educators are often on the front lines of promoting student mental health and addressing mental health concerns and must be adequately trained and supported to do so.Equipping educators with social and emotional skills and mental health literacy will prepare them to best support student mental health and create a healthier workforce. In addition, specialized instructional support teams (e.g., school counselors, social workers and school psychologists, and other qualified professional personnel, such as school nurses and occupational therapists) must be adequately staffed to provide assessment, diagnosis, counseling, educational, therapeutic and other necessary services to support student needs.

Figure 3. Core Features of a Comprehensive School Mental Health System

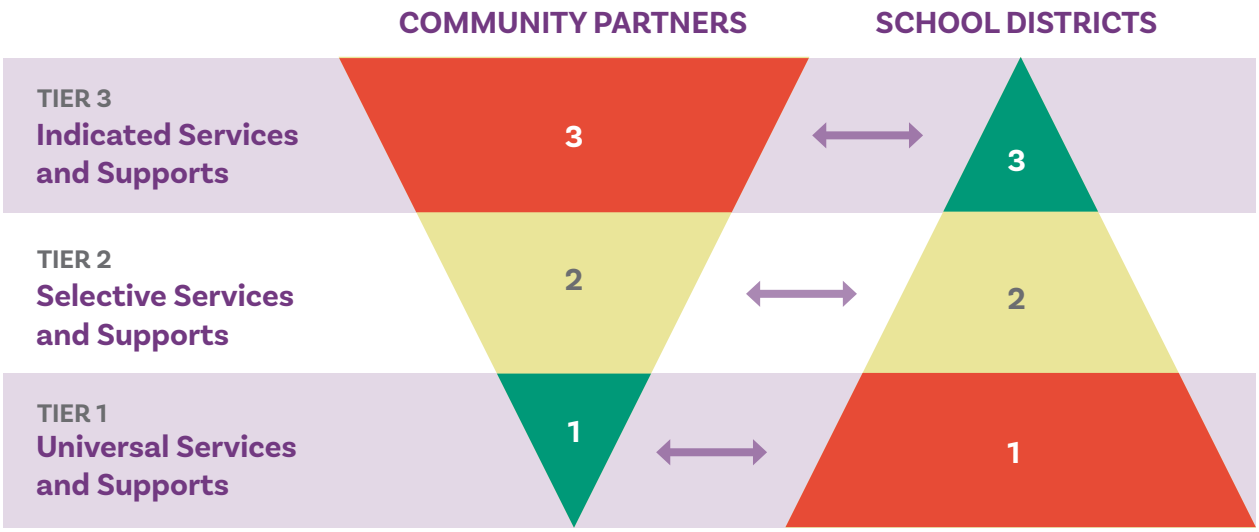


2. Family-School-Community Collaboration and Teaming

To promote student mental health, school-employed mental health staff, school administrators, community partners, policymakers, funders, providers, students and families must be committed to working together to address the interconnected academic, social, emotional and behavioral needs of all students. Collaborative partnerships guided by school-employed staff working closely with communities and families help improve student outcomes and impact academic, social, emotional and behavioral needs. Further, coordinating resources and strategies leads to efficient, effective and sustainable workflows in the busy context of the school setting. Using a collaborative team approach requires shared funding streams, data collection processes and data-sharing mechanisms, which can be complicated to navigate. Community partners can augment services within the school building and can link students to other services and supports in the community. In addition, they can champion what schools are doing to support mental health with key leadership, such as boards of education and policymakers.

Successful and sustainable school mental health systems do more than co-locate services within the school building; they seek to integrate partners seamlessly so that the diverse complement

Figure 4. An Example of Complementary Roles and Resources of Community Partners and School Districts in Comprehensive School Mental Health Systems[43]



of mental health supports and services are tightly coordinated to meet the student body's needs efficiently and effectively. Working directly with community partners broadens the availability of potential supports that can be available to students and families, enhancing access to mental health care. The roles and responsibilities of school and community partners will differ based on unique resources and needs. One example of this balance is illustrated in Figure 4.

Conceptually, the roles of school and community personnel fit together to form an integrated system that is responsive to student needs. Yet we know that in practice the individuals in these roles work in environments shaped by multiple systems, where practices emerge in response to context and roles must be adapted. This dynamic environment demands a set of core principles to ground the work and collaboration of all partners.[44]

3. Needs Assessment and Resource Mapping

Conducting a **needs assessment** offers a systematic process for identifying programmatic and system needs and helps staff determine priorities. A school mental health needs assessment, which could include student mental health and school climate surveys, informs decisions about school mental health planning, implementation and quality improvement. **Resource mapping** offers schools and districts a comprehensive view of school and community mental health services and resources available to students and families.[45] Having a systematic process that helps individuals better understand specific details about the types of services offered, and how and when they can be accessed, can improve student follow-through with services and coordination of care. Resource mapping offers a map of how needs are being addressed, and can visually display many factors, including the location of service, the type of service, and how students and families can access the services that are available to them. Together, needs assessment and resource mapping highlight strengths and gaps in the school mental health system and can inform prioritization of goals and action planning. When conducting needs assessment and resource mapping, collaborative teams that understand and

A needs assessment may include the following activities conducted by the school mental health team in partnership with educators, youth, families and community partners.

- Determine appropriate data (e.g., school-level data, survey data, informal inquiries with teachers and parents, review of office referrals, provider feedback on caseload characteristics) and identify priority areas of focus that are based on student needs.
- Assess common risk and stress factors faced by students (e.g., exposure to crime, violence, illicit substance abuse).
- Evaluate whether the school mental health team has staffing capacity and services in place to help students contend with common risk and stress factors.
- Assess the frequency, quality and content of professional development for school staff.
- Assess school efforts to refer students to community-based behavioral health services and track access to and utilization of these services.

represent the community, including school personnel, community staff, and families and students, should be utilized.

4. Multi-Tiered System of Support

Many schools deliver instructional or behavioral intervention to students in varying intensities, also known as a multi-tiered system of support (MTSS), to address the academic needs of the larger student body, including (but not limited to) students with identified disabilities. Based on a public health framework, prevention is an underlying principle at all three tiers, with Tier 1 focusing on promoting mental health and preventing occurrences of problems, Tier 2 focusing on preventing risk factors or early-onset problems from progressing, and Tier 3 focusing on individual student interventions that address more serious concerns and prevent the worsening of symptoms that can impact daily functioning.[46] Professional development and support for a healthy school workforce as well as family-school-community partnerships are foundational elements that support these three tiers.

Matching the range of academic, behavioral and social needs within a school involves the layering of interventions from universal approaches to targeted programming for students with mild impairment and, for some students, adding on individualized interventions linked to the lower-tiered structures.

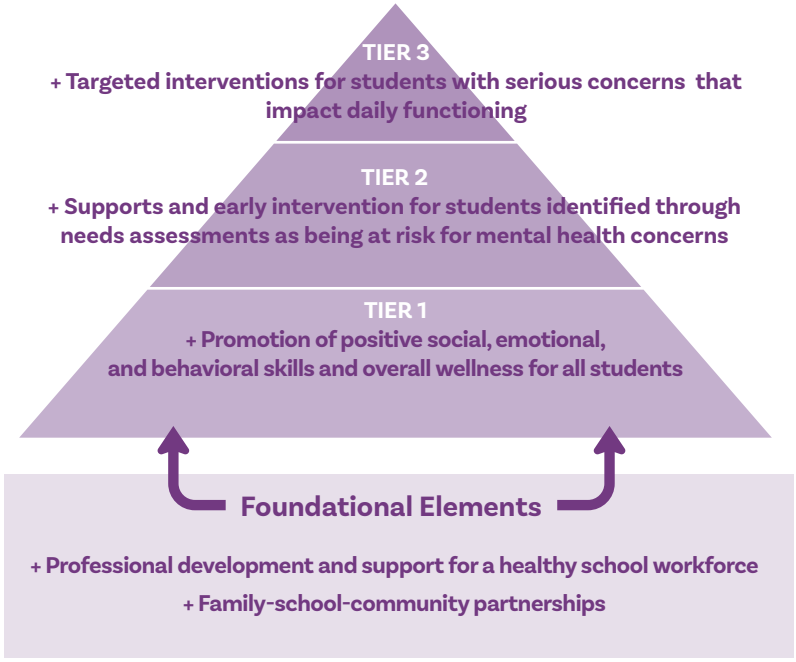
The MTSS approach ensures that all students can access the service array, including students in both general and special education, and that all students will have exposure to universal mental health supports. The number of tiers in an MTSS can vary, though many districts employ a three-tiered model. (See Figure 5.)

Mental health promotion services and supports (Tier 1) are mental health-promoting activities, including the strengthening or reinforcement of positive social, emotional and behavioral skills designed to support the well-being of all students, regardless of whether they are at risk for mental health problems. These activities might include efforts to support positive school climate and staff well-being. They can be implemented schoolwide, at the grade level and/or at the classroom level.

***Examples** include schoolwide curricular lessons and grade-level or classroom presentations for all students, regardless of whether they are at risk for mental health problems.*

Early intervention services and supports (Tier 2) to address mental health concerns are provided for students who have been identified through needs

Figure 5: Multi-Tiered System of Support



assessments, screening, referral or other school teaming processes as experiencing mild distress or functional impairment, or being at risk for a given problem or concern. When problems are identified early and supports put in place, positive youth development is promoted and problems can be eliminated or reduced.

***Examples** include small-group interventions for students identified with similar needs (e.g., students with asthma), brief individualized interventions (e.g., motivational interviewing, problem-solving), mentoring, and/or low-intensity classroom-based supports such as a daily report card or daily teacher check-in.*

Treatment services and supports (Tier 3) to address mental health concerns are provided for students who need individualized interventions for the significant distress and functional impairment they are experiencing.

***Examples** include individual, group or family therapy for students who have been identified, and often diagnosed, with social, emotional and/or behavioral needs.*

5. Mental Health Screening

Early identification and intervention lead to better outcomes for students. Given the high prevalence and recurrence of mental health disorders, it is important to identify problems early and connect students to needed services and supports. Mental health screening, including assessment of the social determinants of mental health, is a foundational component of a comprehensive approach to behavioral health problem-prevention, early identification and intervention services. Screening can be conducted using a systematic tool or process with an entire population (e.g., a school's student body) or a group of students (e.g., a classroom or grade level). Screening should be conducted only when there is a system in place to promptly review screening data once it is collected and then make

necessary referrals for further assessment, services and supports.

6. Evidence-Based and Emerging Best Practices

Using research-based interventions and best practices within an MTSS increases the likelihood that youth will have access to effective interventions matched to their strengths and needs. School districts can learn more about evidence-based interventions by accessing databases such as the What Works Clearinghouse (WWC), https://ies.ed.gov/ncee/wwc/. WWC is an investment of the Institute of Education Sciences within the U.S. Department of Education, and is designed to provide educators the information they need about programs, practices and policies to make evidence-based decisions. Evidence-based approaches that promote mental health and reduce mental illness are not solely directed at students; for example, strategies that focus on social and environmental determinants of mental health, school climate, or staff wellness each have a positive influence on student mental health. MTSS also allows for the installation of practices to support specific target populations. For example, trauma-informed schools are increasingly adopting MTSS as a foundational framework for interventions across the continuum of mental health supports.

In addition to ensuring that a practice has been tested through a scientifically rigorous process, it is important that the practice is based on population strengths and needs, is culturally relevant, and can be implemented given current workforce capacity, cost and organizational infrastructure. The National Center for Healthy Safe Children (https://healthysafechildren.org/) provides a step-by-step guide and a series of online learning modules for selecting and implementing evidence-based practices (EBPs) in schools. After selection of an EBP and initial staff training has been carried out, ongoing supervision/coaching, organizational support, data collection and continuous quality improvement are needed to promote effective implementation. The Hexagon Tool, developed by the National Implementation Research Network, offers EBP implementation guidance to schools and districts.[47]

7. Data

Data outcomes, data systems and data-driven decision-making are all critical components to supporting a comprehensive school mental health system.

Outcomes. Comprehensive school mental health systems must document the provision and impact of service and supports. Data may include student-level outcomes such as numbers of students referred and receiving mental health supports, as well as documented improvement for students served. School-level outcomes, such as school climate, teacher retention and discipline practices, may also prove useful in documenting the impact of universal mental health programming. Tracking and monitoring these outcomes at the school and district levels can improve understanding of the system and of student needs, gaps and service utilization patterns. School mental health systems routinely face barriers to systematically tracking individual student data, including:

- Lack of staffing capacity
- Lack of technological options/infrastructure
- Lack of knowledge, training and time to create a data collection system
- Limited data sharing across systems (e.g., between school and community providers)

Data systems. Use of existing student information systems and partnerships with experts in data collection (e.g., through university partnerships) can facilitate the collection of information to document services and outcomes. Examples of data indicators that reflect school mental health outcomes are given in Table 1.

Data-driven decision-making. A critical component of school mental health systems is the use of comprehensive data for data-driven decision-making

Table 1: Examples of Data Indicators Useful to a Comprehensive School Mental Health System

System Functioning	Student Academic Functioning	Student Psychosocial Functioning
• School climate • Trauma-responsive policies and practices • School staff retention • School staff well-being • Discipline practices (including disproportionate rates of suspension and expulsion) • Family engagement	• Grades • Benchmark assessments • State testing • Attendance • Expulsion and suspension • School connectedness • Engagement with learning	• Social and emotional wellness • Mental illness (e.g., anxiety, depression, trauma) • Interpersonal relationships • Food and housing security • Risk behaviors

(DDDM) to inform school mental health planning and delivery. DDDM can inform decisions related to appropriate student supports and can be used to monitor progress and outcomes across multiple tiers. Data can facilitate information sharing across team members, achieve common understanding of target concern(s), and inform decisions about which strategies to try to test and how to adjust interventions as needed.

8. Funding

Building and sustaining comprehensive school mental health systems requires innovative strategies to leverage and apply various financial and nonfinancial resources in a school or district. Best-practice considerations include using diverse sources, combining categorical and block grant funds from across multiple agencies to achieve shared outcomes, leveraging funding and Medicaid reimbursement by developing relationships with other agencies, matching funding to service delivery across multiple tiers, and monitoring policy and new funding opportunities (e.g., education, behavioral health, health, climate/safety, juvenile justice) at local, state and national/federal levels.

In our experience, diversification of funding is the bedrock of sustainable programs and services.

Assessing Core Features of Comprehensive School Mental Health Systems

As part of the National Quality Initiative on School Health Services, the National Center for School Mental Health (NCSMH) (www.schoolmentalhealth.org) led a rigorous, stakeholder-driven process that resulted in the first National School Mental Health Quality Performance Measures.[48] These standards reflect best-practice strategies for systematically developing, improving and sustaining comprehensive school mental health systems. District and school assessments and resources to support the core features of comprehensive school mental health systems can be found at the School Health Assessment and Performance Evaluation (SHAPE) System site (www.theshapesystem.com), a free, private, web-based portal that offers school districts and schools a virtual work space to document and track the advances they are making in their school mental health systems.

"Given the high prevalence and recurrence of mental health disorders, it is important to identify problems early and connect students to needed services and supports."

Successful systems draw from a wide array of sources, including (but not limited to) **legislative earmarks and federal block and project grants** (e.g., Healthy Schools, Healthy Communities Program; Project AWARE State Education Agency Grants; The Promoting Student Resilience Program; and the Title XX Social Services Block Grant), **state or county funding** (e.g., budget line items, local taxes, and funding to implement special programs and health initiatives), **fee-for-service revenue** from third-party payers (State Children's Health Insurance Programs, Medicaid and commercial insurance) and **private individual donors and private foundations** (e.g., Bainum Family Foundation, Annie E. Casey Foundation and Robert Wood Johnson Foundation). Additionally, the Center for Health and Health Care in Schools developed a guide to federal education programs that can fund K-12 universal prevention and social and emotional learning activities.[49]

To attain best practices in funding your comprehensive school mental health system:

- Create multiple and diverse funding and resources to support a full continuum of services.
- Maximize leveraging and sharing of funding and resources to attract an array of funders.
- Increase reliance on more permanent versus short-term funding.
- Have adequate funding for services and supports at each tier.
- Use best-practice strategies to retain staff.
- Utilize and maximize third-party fee-for-service mechanisms to support services.
- De-implement programs that are not achieving desired outcomes, and reallocate resources to evidence-based and effective programs.
- Evaluate and document outcomes, including the impact on academic and classroom functioning.
- Use outcome findings to inform school, district and state-level policies that impact funding and resource allocation.

Source: National Center for School Mental Health, 2018

Opportunities, Challenges and Recommended Strategies

During convenings of national, state and local school mental health leaders and stakeholders, participants were asked to identify the top challenges to, and opportunities and strategies for, advancing comprehensive school mental health systems. Stakeholders identified the following common themes, as captured in this section and in Table 2.

Opportunities

Given the growing awareness and commitment to school mental health, there is tremendous potential to increase access to quality mental health care and to promote student well-being and prevent and mitigate mental health challenges before they become more serious and costly. Furthermore, there is consensus among stakeholders that it is necessary to engage caregivers, family members, students, the school and other community members in a meaningful way. Buy-in of these and other key partners is essential to the planning, implementation and sustainability of comprehensive school mental health systems.

With new models emerging for partnerships across youth-serving systems and community partners, there is an opportunity to work across sectors to strengthen the system. Lastly, new policies being implemented, such as Every Student Succeeds Act, create opportunities for advancing innovative and locally responsive ideas and services.

Challenges

An overarching challenge facing the advancement of comprehensive school mental health systems is the gap between public perceptions and scientific knowledge. Mental health is not well understood and is often viewed as something that we cannot influence. For example, public discussion of mental health frequently frames it as an individual illness and does not consider its social and public health aspects. A major challenge is to change the dialogue so that mental health and mental illness can be viewed through two lenses — an individual's disease and a public health framework — which allows the use of a full spectrum of strategies that include mental health promotion, as well as prevention, early intervention and treatment of mental illness. Public health strategies are applied at the individual, school, community, state and national levels. Rather than waiting for problems to surface prior to interventions, prevention science shows that public health strategies, including evidence-based policy and programs, are available to promote mental health and to prevent mental health challenges.

Comprehensive school mental health systems have an essential role in reaching young people to foster healthy social and emotional development and well-being. In addition, mental health issues and supports often carry stigma, which limits buy-in of providing and receiving services from staff, parents and students.

Furthermore, the multiple systems involved in school mental health (e.g., education, health, behavioral health) operate in a disconnected or fragmented way. Siloed systems do not allow for integration of services and supports or for leveraging of resources. School and other staff need training and support to be ready to implement best practices and evidence-based interventions with fidelity.

Table 2: Overall Summary of Opportunities, Challenges and Strategies (Expert Panels, 2017 and 2018)

Opportunities	• There is growing awareness and commitment to school mental health among stakeholders. • New models are emerging for partnerships across youth-serving systems. • New policies are being implemented to advance innovative and locally responsive ideas and services.
Challenges	• A gap exists between public perceptions and scientific knowledge of mental health. • Multiple systems involved in school mental health (e.g., education, health, behavioral health) operate in a disconnected or fragmented way. • School and other staff need training and support to be ready to implement best practices and evidence-based interventions with fidelity. • Insurance coverage and other financing for multi-tiered systems of support are limited. • The stigma of mental health issues and supports limits buy-in from staff, parents and students. • Unequal access to health care limits equal access to mental health supports.
Strategies	• Develop and disseminate evidence-based resources, tools and practices. • Improve school mental health infrastructure support. • Use a whole-child approach with aligned academic and social, emotional and behavioral goals. • Connect mental health to other academic outcomes. • Share and braid financial and other resources from multiple sources.

"At the federal/national level, it is important to engage in cross-agency collaboration with clearly identified actions, outcomes and accountability."

Extra effort also is required to implement new supports with fidelity to the model. As is understood in the field of implementation science, the "how" of implementation is critical to the success of any model. Additionally, there is a growing understanding of the importance of school connectedness. According to the Centers for Disease Control and Prevention, school connectedness — the belief held by students that adults and peers in the school care about their learning as well as about them as individuals — is an important protective factor. Research has shown that young people who feel connected to their school are less likely to engage in many risk behaviors, including early sexual initiation; alcohol, tobacco and other drug use; and violence and gang involvement.[50] Understanding these factors can help decrease the fact that student discipline is often punitive instead of restorative. Another challenge identified is that insurance coverage and other financing for multi-tiered systems of support are limited. This is one of the factors that add to the unequal access to health care and limit equal access to mental health supports.

Recommended Strategies

Strategies were identified by local, state, federal/national leaders at various convenings. (See Table 3.) The stakeholders discussed opportunities and challenges and identified considerations to capitalize on those opportunities and mitigate the challenges. Some are more linked to state, local or federal/national partners, and some are cross-cutting and can be adapted for any level. Those interested in advancement of these or other strategies need to assess the unique opportunities and readiness within their school, community, state or organization for buy-in and for advancement of comprehensive school mental health systems. With this data in hand, stakeholders are well-positioned to move forward using the most effective strategies to meet their community, state or national/federal goals around advancing quality comprehensive school mental health systems that will benefit our schools, students and families.

Participants at the State School Mental Health Summit (June 2018) identified strategies for advancing school mental health systems. They were organized into the following categories: Communication/Dissemination, Financing, Policy/Legislation and Technical Assistance/Workforce Development. These strategies can be adapted for use at the local, state and national/federal levels.

Prioritization of Strategies at Local, State and Federal/National Levels

Furthering the development of multilevel strategies, participants also identified and prioritized local, state and federal/national strategies critical to advancing school mental health. (See Table 4.)

Local Strategies

At the local level it is important to engage the wider community and diverse stakeholders to gain buy-in for the value and need for implementing a comprehensive school mental health system. Furthermore, it is necessary for the partners to designate time and resources to build, enhance and sustain comprehensive school mental health systems. This process involves building capacity for ongoing processes for engaging in data collection, reporting, dissemination and continuous quality improvement to promote and advance school mental health activities that achieve positive student outcomes, school climate and other school-level outcomes.

Table 3: Strategies for Advancing School Mental Health Systems (Expert Panels, 2017 and 2018)

Communication/ Dissemination	• Educate policymakers on the importance of school mental health and its relevance for academic success, economic growth, substance abuse prevention/ treatment and other community priorities. • Use social marketing to promote messages that have been shown by research to improve child and youth well-being (similar to efforts used for tobacco, teen pregnancy and healthy eating). • Be creative in messaging. • Ensure youth and family voices are included in messaging.
Financing	• Align planning and funding by Medicaid, private insurance and managed care organizations at the state level to support school mental health. • Build relationships and communities of practice to influence awareness, funding and advocacy. • Document the return on investment. • Link school mental health with state Every Student Succeeds Act plans. • Use other federal education (e.g., Title I, Title IV) funds to support school mental health.
Policy/ Legislation	• Convene state departments of education and mental health staff with community representatives, families, students and professional associations to enhance communication and opportunities to collaborate. • Improve understanding across state systems about their efforts and funding. • Build agreement among stakeholder groups in a structural process to determine priority issues and strategies in school mental health. Find an issue that is manageable and specific to receive immediate focus. • Have data and success stories ready for state legislators. • Improve awareness and support for the importance of staff and teacher wellness and conditions for teaching that promote mental health. • Ensure advocacy messaging unifies the voices and agendas of key stakeholders around a shared vision and priorities that will mobilize broad support for this work.
Technical Assistance/ Workforce Development	• Integrate families and youth in partnership to provide leadership and feedback loops. • Reassess practices and modify approaches in a continuous improvement process, and include youth and others in this process. • Strengthen the coordination of technical assistance networks to support states and local stakeholders, and link this network to other national networks. • Ensure curriculum changes at the pre-service level to teach undergraduate and postgraduate students in education, health and behavioral health professions about high-quality and sustainable school mental health systems. • Identify and advance sustainable funding mechanisms. • Ensure there is adequate technical assistance to support states in developing a multi-tiered approach to school mental health.

State Strategies

At the state level, it is important to provide training and implementation opportunities and supports. Examples of strategies include 1) hosting an annual state school mental health conference that raises awareness and provides tools and resources for districts in building capacity for implementation of quality comprehensive school mental health systems, 2) developing and disseminating a school mental health website, 3) providing technical assistance to schools on developing and implementing effective school mental health systems in schools and districts, and 4) implementing cross-system provider training on key topics, including evidence-based program selection and implementation, and state-specific funding guidance.

Stakeholders at the state level should promote cross-sector engagement, goal-setting and decision-making to advance a coordinated school mental health vision and best-practice strategies — for example, linking school safety and student well-being within the umbrella of comprehensive school mental health. Convening a coordinated school mental health "council" with substructures that include designated stakeholder representatives to establish and monitor school mental health activities can help advance the field.

Federal/National Strategies

At the federal/national level, it is important to engage in cross-agency collaboration with clearly identified actions, outcomes and accountability related to comprehensive school mental health systems. One example would be to establish jointly issued funding opportunities with synchronized requirements across agencies, including expansion of school mental health initiatives. In addition, it is important to fund national and state school mental health technical assistance and infrastructure supports. Promoting awareness of strategies among regions and states can help achieve high-quality, sustainable school mental health systems. Funding for national and regional centers to execute research and innovation that advance school mental health strategies can help strengthen the opportunities in the field.

Table 4: Summary of Recommended Strategies by Level (Expert Panels, 2017 and 2018)

Local	• Gain community buy-in on the value of school mental health. • Designate time and resources to build, enhance and sustain comprehensive school mental health systems. • Engage in data collection, reporting, dissemination and continuous quality improvement.
State	• Develop statewide training and implementation support. • Promote cross-sector engagement, goal-setting and decision-making. • Convene a coordinated school mental health "council."
Federal/ National	• Establish jointly issued funding opportunities. • Fund national and state school mental health technical assistance and infrastructure supports. • Promote awareness of strategies among regions and states. • Engage in cross-agency collaboration. • Fund national and regional centers to execute research and innovation.

Local Spotlights

Numerous local schools and communities have demonstrated significant progress in the advancement of school mental health systems in recent years. This progress is seen through the numbers of schools and communities that are connecting with the SHAPE System discussed previously. Highlights of their efforts, and links to reports and resources related to those efforts, are offered as a road map for other states and communities seeking to advance comprehensive school mental health systems. Featured here are highlights from local districts representing diverse geographic areas: the District of Columbia Public Schools (DCPS); Adams-Friendship Middle School in Adams, Wisconsin; Seneca Family of Agencies and Education for Change Public Schools (Seneca/EFC), California; and Chapel Hill-Carrboro City Schools (CHCCS), North Carolina.

District of Columbia Public Schools (DCPS)

DCPS has taken on high-quality school mental health in a large, urban school district that employs 266 school social workers and psychologists to serve more than 48,000 students across 113 public schools. Through collaborative conversations and districtwide data collection from their front-line school mental health providers, DCPS developed a Workload Analysis that includes recommendations for school administrators and teams to optimize social work and psychology service delivery time in the school building. Most recently, DCPS worked on advancing its social and emotional learning curricula in classrooms by collecting data on current task-sharing practices among educators and mental health providers. DCPS has mastered the art of incremental, collaborative, innovative methods to produce durable quality improvements across the entire district and is reflected in its School Mental Health Quality Assessment, a quality indicator within the SHAPE System, which shows substantial growth nearing "Mastery" in Resource Mapping, Teaming and data-driven decision-making (DDDM) since January 2017.

To learn more about how your school or district can access the School Mental Health Quality Assessment and achieve Gold Level SHAPE Recognition like DCPS did, visit www.theshapesystem.com.

Adams-Friendship Middle School in Adams, Wisconsin

Adams-Friendship Middle School received recent accolades for its school mental health services from leadership at the U.S. Department of Health and Human Services (HHS) following a tour of the school. During the site visit, HHS representatives listened to teachers, administrators, mental health professionals, law enforcement, students and parents talk about programs and services at Adams-Friendship that support positive school climate, health and safety in their school. HHS acknowledged the state of Wisconsin for taking the lead on integrating mental health services into schools and for its Wisconsin School Mental Health Framework, noting that HHS is interested in extending "sophisticated, comprehensive services" like Wisconsin's into more schools and communities, especially rural communities such as Adams. Read more about efforts in Adams, Wisconsin, at https://madison.com/opinion/column/alex-azar-put-mental-health-services-in-schools/article_b99cf4f1-d77e-5788-8091-862adbd52ff6.html.

Seneca Family of Agencies and Education for Change Public Schools (Seneca/EFC)

The partnership between Seneca Family of Agencies and Education for Change Public Schools (Seneca/EFC) is innovating ways to bring the science of mental health screening and DDDM to actual school mental health practice in Oakland, California. This school mental health system significantly increased its screening data collection effort by assigning care coordinators to this task and providing feedback to school staff and administrators about student strengths and needs, resulting in more than 2,000 students screened during the 2018-19 school year. Seneca/EFC also surveyed clinician-reported barriers and successes to using screening data and is currently training and supporting clinicians' ability to integrate this data into decision-making and collaborative service planning with the school team. Mental health screening and DDDM are two key domains of school mental health quality that in practice can be challenging to implement. Seneca/EFC is a pioneer in these domains by

> "Its team has outlined a vision for co-locating community mental health providers in every school."

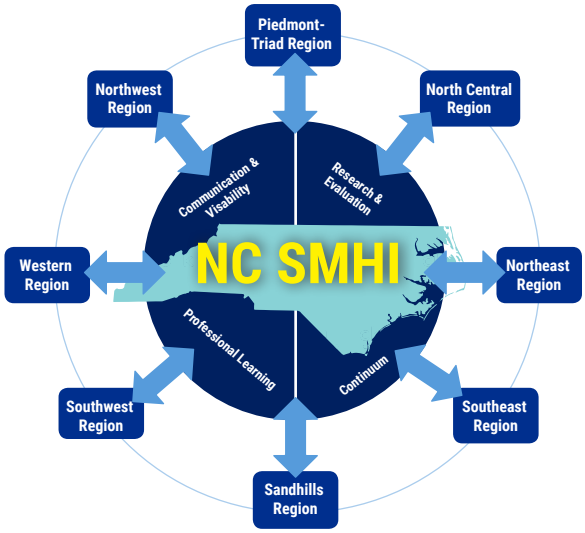
supporting clinicians' use of data and using clinician feedback to inform system improvements.

Chapel Hill-Carrboro City Schools (CHCCS)
CHCCS has taken an intentional and proactive approach to ensure students in its district have access to school mental health services. Its team has outlined a vision for co-locating community mental health providers in every school. The district first developed a request for proposals, and then used decision analysis to prioritize its list of requirements for community mental health providers and to support its decisions to work initially with three provider organizations. This district-led school mental health team worked collaboratively to set a high bar for co-located services in its school buildings. For example, the district specified the importance of the following examples of qualifiers for community mental health providers to partner with the district: teacher consultation, prevention and early intervention activities, and strengths-based services that prioritize family involvement. CHCCS also has Gold Level SHAPE Recognition and routinely monitors the quality and sustainability of its comprehensive school mental health system on a regular basis throughout the year.

State Spotlights

States clearly have an important role in advancing comprehensive school mental health systems and are important partners with local districts seeking to implement school mental health systems. Federal grants such as the Project AWARE State grants and Safe Schools/Healthy Students State grants funded by DHHS/SAMHSA and School Climate grants from the U.S. Department of Education have been significant in leveraging state and local partnerships and achieving transformational results for school mental health. Below are highlights from three states, among many, that have demonstrated significant progress in the advancement of comprehensive school mental health systems in recent years. Their efforts offer a road map for other states and communities seeking to advance comprehensive school mental health systems.

Figure 6. North Carolina School Mental Health Initiative's Statewide Support

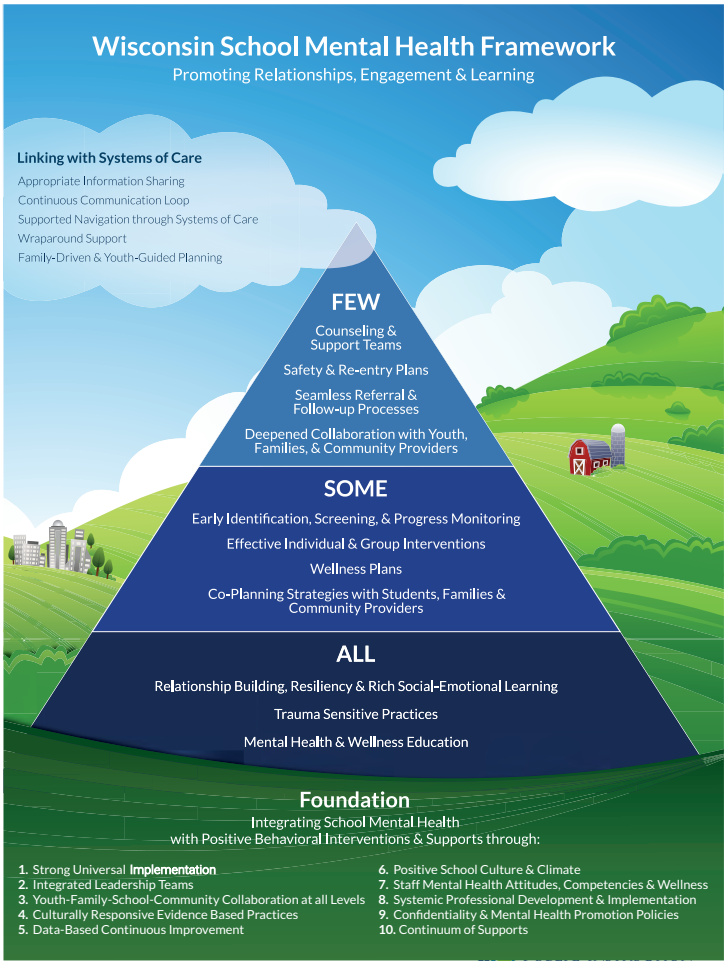


Source: North Carolina School Mental Health Initiative

North Carolina

The North Carolina School Mental Health Initiative (NC SMHI) is a statewide partnership of families, students, public school representatives, community-based mental health clinicians, North Carolina state department officials, advocates, university faculty, justice system representatives and others. The NC SMHI mission is to develop recommendations for and support implementation of policy and/or legislative changes to ensure that public school students in North Carolina have equitable access to a full continuum of high-quality and well-coordinated mental health services. The partnership has studied statewide perceptions of and access to mental health services for children and youth, drafted state board of education policy, prepared legislative reports, influenced continuous improvement of the statewide implementation of MTSS, and supported

Figure 7. Wisconsin School Mental Health Framework



Source: Wisconsin School Mental Health Initiative

the development of an awarded SAMHSA AWARE grant proposal. Overarching recommendations for policy and/or legislative action stemming from NC SMHI findings include 1) creating a continuum of school mental health supports and services, 2) making it sustainable and 3) engaging stakeholders. More information on the NC SMHI and its findings and recommendations can be found in the North Carolina School Mental Health Initiative final report. For more information about school mental health in North Carolina, visit http://bit.ly/NCSMHI2019.

Wisconsin

The Wisconsin Department of Public Instruction's school mental health initiative has benefited from three large-scale federal grants: Safe Schools/ Healthy Students (SAMHSA), Project AWARE (SAMHSA) and School Climate Transformation (Department of Education's Office of Safe and Healthy Students). Braided funding from these projects allowed for more than 100 schools in the state to receive school mental health professional development, technical assistance and coaching. Teaming efforts through a state management team and community management teams have helped advance strategic school mental health advancement. Central to Wisconsin school mental health system advancement was the adoption of a School Mental Health Framework in the state. The School Mental Health Framework defines and outlines key elements to implement comprehensive school mental health systems in districts and schools across Wisconsin. The framework offers the foundational elements to build and sustain school mental health systems. The framework is designed to integrate mental health and wellness supports into a multi-tiered system of support. Using the tenets of this framework, districts and schools can build and sustain a comprehensive school mental health system. For more information about school mental health in Wisconsin, visit https://dpi.wi.gov/sspw/mental-health or www.schoolmentalhealthwisconsin.org/.

Massachusetts

The Massachusetts School Mental Health Consortium (MASMHC) offers a compelling example of how school districts within a state can work together to advance professional development and best practices and policies in school mental health. It advances school mental health quality and sustainability to 1) increase awareness of mental health problems, 2) promote mental well-being through education and prevention activities, and 3) increase access to and utilization of evidence-based mental health services and supports. The MASMHC comprises school districts committed to improving school mental health services and supports available to students in Massachusetts. Member districts voluntarily participate based on their recognition of the significant mental health and substance use needs of students, and work with the MASMHC through shared learning, collaboration and consultation. Member districts attend monthly MASMHC meetings, complete needs assessments, participate in professional development, develop action plans to advance school mental health in their own community, and share best practices and policies. For more information about school mental health in Massachusetts, visit www.methuen.k12.ma.us/departments/special-education/guidance/massachusetts-school-mental-health-consortium-masmhc.

Moving Forward

There is a growing national recognition of the need to elevate and address the mental health of students and other young people. Comprehensive school mental health systems can become the "new way of doing business." How can we made this a reality on a large-scale basis?

Participants in the set of three school mental health gatherings convened during 2017 and 2018 identified several key areas of focus for shared learning to build momentum for advancing high-quality comprehensive school mental health systems at the state and local levels. These areas include:

- Funding and sustainability
- Training and building internal staff capacity
- Coordination/collaboration across family-school-community partners
- Resource support and technical assistance
- Trauma-informed care
- Engagement of youth, families and other key partners in school mental health
- Policies to support comprehensive school mental health systems
- Screening and early identification of youth risk and protective factors
- Supportive discipline and restorative practices

The advancement and sustainment of school mental health systems across the United States requires the cross-stakeholder development of a **compelling vision and shared agenda** — one that can inspire local action — and a strategic action plan and infrastructure to carry out the agenda. Several states and communities have established School Mental Health Communities of Practice or coalitions to enhance communication and shared learning to further goals that support school mental health. Development of a compelling vision and shared agenda challenges us to build new leadership skills. Approaches such as Leading by Convening (www.ideapartnership.org/building-connections/the-partnership-way.html) guide us to achieve changes in practice and foster adaptive leadership. We must learn to convene across disciplines, roles and agencies. Progress in practice demands that we share leadership and learn together. Drawing on science, practitioner wisdom, and the lived experience of families and youth, we will more fully address the promise and the challenge of comprehensive school mental health systems. When state and local champions are positioned to strategically build and advance school mental health policy, funding and programming can expedite wide-scale school mental health adoption. These champions, in partnership with schools and communities as well as the youth and families they serve, can work together to build comprehensive school mental health systems that address our shared goals for safe and supportive schools that promote student well-being and success.

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