ISSUE BRIEF: MENTAL HEALTH
Building Positive Climates for Learning

Overview

To ensure that all children can learn, schools must provide safe and healthy environments that enhance students’ learning skills that are essential for school readiness and academic success. To accomplish this goal, every school must have dedicated, highly qualified school mental health professionals who serve as essential members of the school team available to work with all children. Evidence-based positive school climate programs and mental health services and supports are critical and necessary to ensuring all students can learn and thrive from infancy through to adulthood, including in early intervention programs for infants, toddlers, and preschoolers, as well as K-12 schools. Professionals in schools and early childhood programs who provide evidence-based mental health services and interventions are adept at creating positive environments that support learning and a sense of belonging. Without those professionals, academic and nonacademic outcomes suffer.

The Centers for Disease Control and Prevention’s most recent Youth Risk Behavior Survey (YRBS) demonstrates the urgency of mental health challenges in schools. According to the YRBS, more than 4 in 10 students experienced symptoms of depression in the past year and 10% attempted suicide during that same period. One in three high school students reported poor mental health in the past month. Now more than ever—with residual impacts from pandemic disruptions and the persistence of violent incidents in schools—children, youth, and staff need access to mental health services provided by well-trained school mental health professionals.

Behavioral and mental health interventions are critical to addressing the impact of traumatic experiences on child development and must be integrated into a comprehensive and cohesive system of care, delivered in schools, early childhood programs, transition programs, and community health and mental health systems.

Members of Congress are Urged to:

► Provide $428 million within Safe Schools National Activities for the School-Based Mental Health Services Professional Demonstration Grant program and the School-Based Mental Health Services Grant program to address severe shortages of school-based mental health professionals (school psychologists, school social workers, and school counselors).

Investment in recruiting and retaining school mental health professionals and identifying and implementing evidence-based mental health interventions in all tiers is essential to achieving successful outcomes for all children and youth.

School Mental Health Services

As we look toward the new school year, students and staff will continue to face the residual impacts of the pandemic and heightened concerns related to school safety. Schools and early intervention programs will need to hire additional mental health providers, collaborate with community mental health services, and train teachers, early interventionists, and administrators to identify children and youth who need short- and long-term services. Targeted federal investments are necessary to improving mental health among students and school communities, as good mental health is critical to academic achievement.
Recruiting and Retaining High-Quality Professionals

Building a positive climate in schools and early childhood programs requires highly skilled school social workers, psychologists, and counselors. Collectively, these individuals make a difference in the lives of children and youth, resulting in positive developmental, academic, and social outcomes. The National Association of School Psychologists recommends a minimum ratio of one school psychologist for every 500 students. The American School Counselor Association and School Social Work Association of America each recommend a ratio of one professional for every 250 students. Unfortunately, national ratios for all school mental health professionals are more than double those recommendations. Persistent shortages of school mental health professionals result in a dearth of mental health promotion, prevention, and early intervention services that are vital lifelines for students. These shortages can be particularly devastating in underserved areas such as rural communities, where schools may be the only source of mental health services. Federal investments will help ensure sufficient numbers of mental health professionals specifically trained to meet the needs of all children and youth in schools and early intervention settings.

Addressing Mental Health Needs of Children and Families

Positive school outcomes are a result of caring communities of adults, children, and youth learning together. This outcome also requires implementing multi-tiered systems of support (MTSS), including evidence-based curriculum and intervention within a trauma-informed environment. Access to mental health services—screening, providing direct services, engaging with and supporting families, and connecting to community-based interventions—is also vital to the well-being of children and youth. Policies to fund mental health services through private health insurance, Medicaid, and programmatic mental health resources (e.g., evidence-based training, curriculum, and best practices) are needed to create a comprehensive system of supports to ensure children and families are mentally healthy.

Mental health and community providers should be trained in trauma-informed, culturally responsive interventions and should collaborate, as appropriate, to address the mental health needs of children and youth and their families. Such collaborations should include attention to the stigma of mental health challenges and ensuring an adequate number of professionals trained to address children’s complex social, emotional, and mental health needs.

FAST FACTS ON CHILDREN’S MENTAL HEALTH

► One in six children have a mental health condition, but only half receive any mental health services.
► From 2019 to 2020, children with behavior or conduct problems increased by 21%.
► 4.4% of children aged 3-17 (approximately 2.7 million) have diagnosed depression.
► 9.4% of children aged 3-17 (approximately 5.8 million) have diagnosed anxiety.
► 8.9% of children aged 3-17 (approximately 5.5 million) have a diagnosed behavior problem.
► Suicide attempts among 10- to 12-year-olds increased fivefold between 2010 and 2020.