

AN OVERVIEW OF SCHOOL-BASED MENTAL HEALTH SERVICES

Why is mental health important to education?

Mental health is directly related to children's learning and development. It encompasses or intersects with interpersonal relationships, social-emotional skills, behavior, learning, academic motivation, certain disabilities, mental illness (e.g., depression or bipolar disorder), crisis prevention and response, school safety and substance abuse. Each of these issues affects not only the success and well-being of the individual student but also the school climate and outcomes for all students.

What are school-based mental health services?

School-based mental health services include a broad spectrum of assessment, prevention, intervention, postvention, counseling, consultation, and referral activities and services. These services are essential to a school's ability to ensure a safe and healthy learning environment for all students, address classroom behavior and discipline, promote students' academic success, prevent and respond to crisis, support students' social-emotional needs, identify and respond to a serious mental health problem, and support and partner with at-risk families. Ideally, school-based services dovetail with community-based services so that children and youth receive the support they need in a seamless, coordinated, and comprehensive system of care.

Who are school-based mental health providers?

School-employed professionals.

The vast majority of school-based services are provided by school-employed school counselors, psychologists and social workers. They are specially trained in school system functioning and learning, as well as mental health, and focus on how students' behavior and mental health impacts their ability to learn and be successful in school. In most states, the certification or licensure for practice in the schools is typically issued

by the state's Department of Education. To earn this certification or licensure, a practitioner generally needs a comprehensive master's degree and knowledge of child development, school systems, and service provision. This includes but is not limited to the ability to demonstrate broad knowledge of school systems' functioning, educational law, curriculum and instruction, classroom and behavior management, models for working with diverse populations including people with disabilities, and models for consultation and school-based practice. Additionally, all of these professionals are required to have practiced these skills successfully in school settings with supervision prior to being eligible for practice (usually between 500 and 1700 hours is required depending upon the discipline). Best practice recognizes the master's degree as the preferred entry level credential for provision of services in schools.

Community-employed professionals.

In selected school districts across the country, community mental health providers working in the schools through inter-agency agreements provide some school-based mental health services. Community-employed mental health providers tend to focus their work on a student's global mental health and how it impacts family, community, work, and school functioning. In some communities, these agreements set up "School-Based Health Clinics" where students and their families can come to the school for all medical, social-emotional, and/or behavioral health services. These clinics provide a valuable service, particularly in communities without other easily accessible mental health services. In these settings, the interagency agreement should articulate the purpose and scope of the services being provided by the public school practitioners and the community practitioners. Community-employed mental health providers vary in their level of experience and training related to schools. Some community mental health providers hold masters and doctorate degrees, while other



community mental health providers have minimal graduate coursework in education or their training is specific to a particular mental health or behavioral health need (i.e. substance abuse).

What are the necessary qualifications of school-based mental health providers?

Variations in the qualifications (training and experience) of school-based mental health providers pose challenges to ensuring the quality of school-based services. It is essential that all school-based mental health providers, whether they are school employees or community employees working in schools, meet the “highly qualified” standards for practice in the schools. Specifically, school-based mental health providers need to have graduate training and experience working with children, knowledge of child and adolescent development, an understanding of school systems, prevention and intervention skills and strategies appropriate for school settings, an awareness of how mental health and academic achievement interplay, and a working knowledge of state and federal educational law, regulations, and practices. Further, all school mental health providers should only practice within the scope of their training, qualifications and experience, adhere to the professional code of ethics for their discipline, and hold the appropriate state licensure credential.

Who receives services from school-based mental health providers?

There has been an increased demand for school-based mental health services across all segments of the student population in the past decade. This is due both to the increased mental health needs of students and their families and to an improved understanding of the role mental health plays in children’s functioning. Additionally, the growing emphasis on prevention and early intervention (a public health approach) encompasses universal services that target all students. Historically, many

school counselors spent much of their time responding to the needs of a small percentage of students, typically those who were high achievers or who were at-risk. Today school counselors provide services to all students. As times have changed so has the focus of school-based services. For example, school psychology research indicates that by the mid 1990s, 68% of school psychologists reported providing services to students with disabilities at least 20% of their day, and by the year 2000, 79% of school psychologists reported providing services at least 20% of the time to students without disabilities. The percentage continues to rise as the number of students and families seeking mental health support increases. In the past, school social workers were hired primarily to assist in the assessment of and provision of services to students with special education needs and their families. Currently, their role is quickly evolving to include all students, with emphasis on those in crisis and those with disabilities. According to the 1999 Surgeon General’s Report on Mental Health, 70% of children with a diagnosis and impaired functioning received mental health services from the schools.

How are school-based mental health services accessed?

There are two primary ways to initially access school-based mental health services: a) through referral by an adult in the student’s life (parent, teacher, or administrator); or b) if the student is of consenting age and ability, by self-referral. When there is a suspected need or concern, parents should call their child’s school to determine the appropriate professional to contact and the breadth of services and supports available.

For more information, contact:

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