

# MENTAL HEALTH IN SCHOOLS: SURVEY OF SCHOOL DISTRICTS



Prepared for the Social Services Appropriations Subcommittee  
February 4, 2019

# DEMAND FOR MENTAL HEALTH SERVICES IN SCHOOLS

- The Division of Substance Abuse and Mental Health (DSAMH) estimates that over 100,000 children and youth in Utah are in need of mental health services.
- In their 2016 Annual Report, DSAMH stated “almost 1 in 5 young people have one or more mental, emotional or behavioral disorders that cause some level of impairment within a given year; however, fewer than 20% receive mental health services.”

Source: <https://dsamh.utah.gov/pdf/Annual%20Reports/2016%20Annual%20Report%20Web%20Final.pdf>



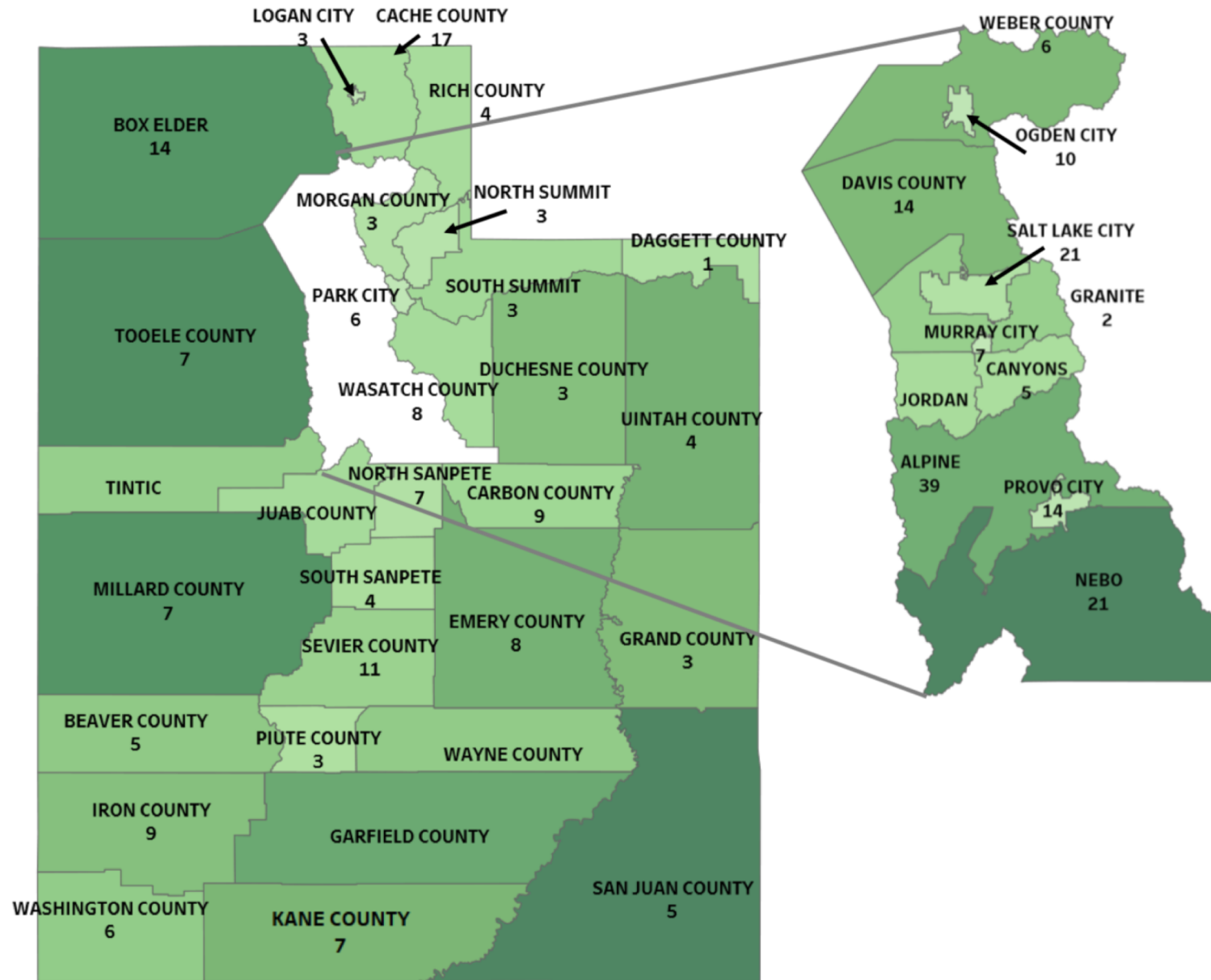
# DEMAND FOR MENTAL HEALTH SERVICES IN SCHOOLS

- Safe UT
  - From July 2017 to December 2018
  - 1 chat to SafeUT for every 43 students
- Legislative Survey
  - FY 2018
  - Among responding districts, on average 1 notification of threat of suicide was sent to parents for every 128 students
  - Districts reported notification rates ranging from 1 per 22 students to 1 per 657 students

# OCTOBER 2018 SOCIAL SERVICES MEETING

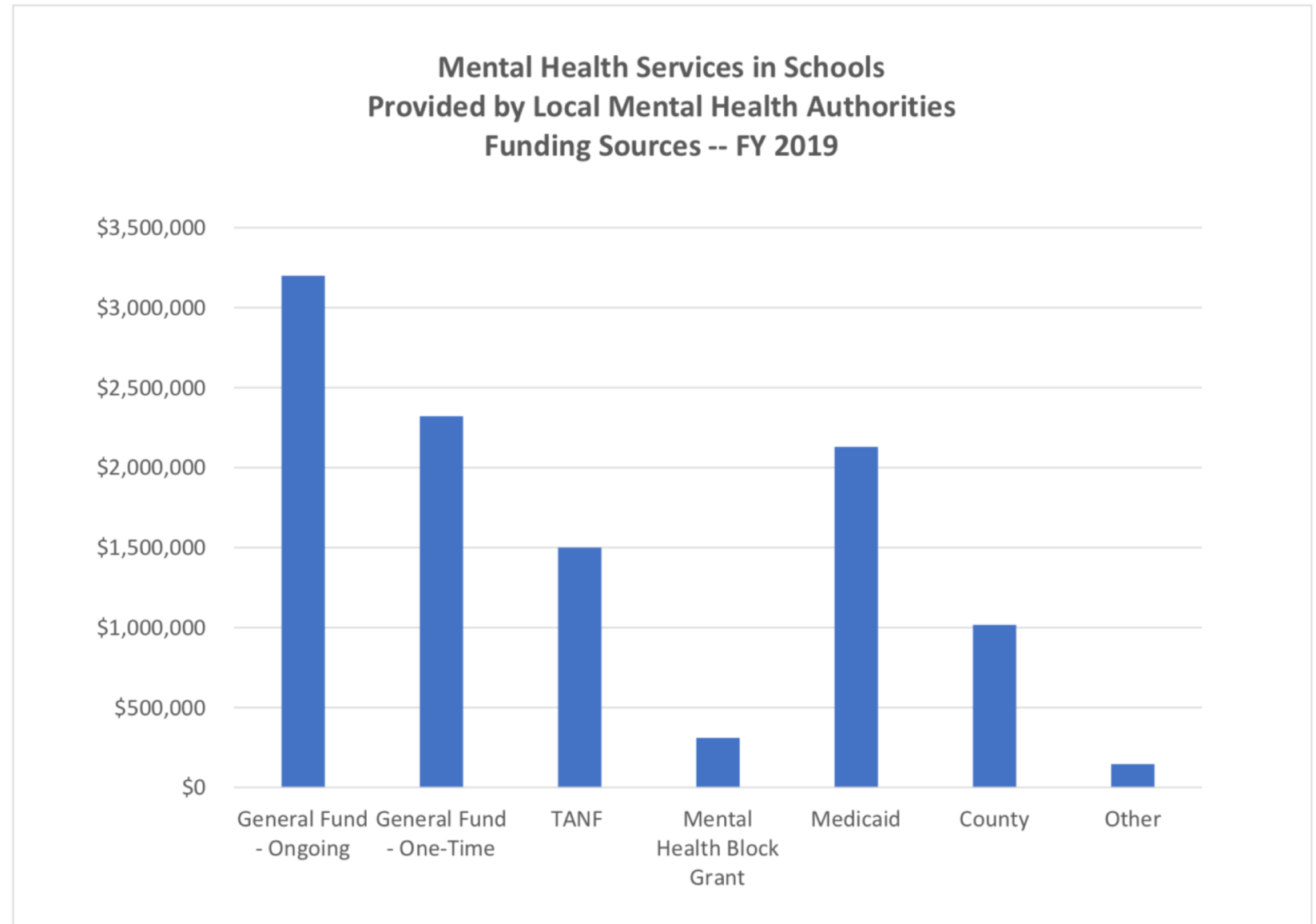
- Division of Substance Abuse and Mental Health (DSAMH) presentation on School-Based Services provided by Local Mental Health Authorities (LMHAs)
- 4,438 youth served in FY 2018
- 329 schools
  - Plus 75 schools served with Temporary Assistance for Needy Families (TANF) funds for intergenerational poverty (IGP)

# Number of Schools with School-Based Services provided by Local Mental Health Authorities (LMHAs)



Source: Division of Substance Abuse and Mental Health

Total services  
budget for  
Local Mental  
Health  
Authorities for  
FY 2019:  
  
\$10,624,400



Source: Division of Substance Abuse and Mental Health

# SURVEY METHODOLOGY

- Survey sent to local education agency (LEA) superintendents from legislative staff
- Completed January 7<sup>th</sup> - 28<sup>th</sup>, 2019
- Sent to 41 districts
- 27 responded – 65.9% response rate
- Data caveats:
  - Survey tool was tested but not validated
  - Not representative of districts that did not respond
  - Variable interpretation of questions

For the purpose of this survey, “mental health services” included:

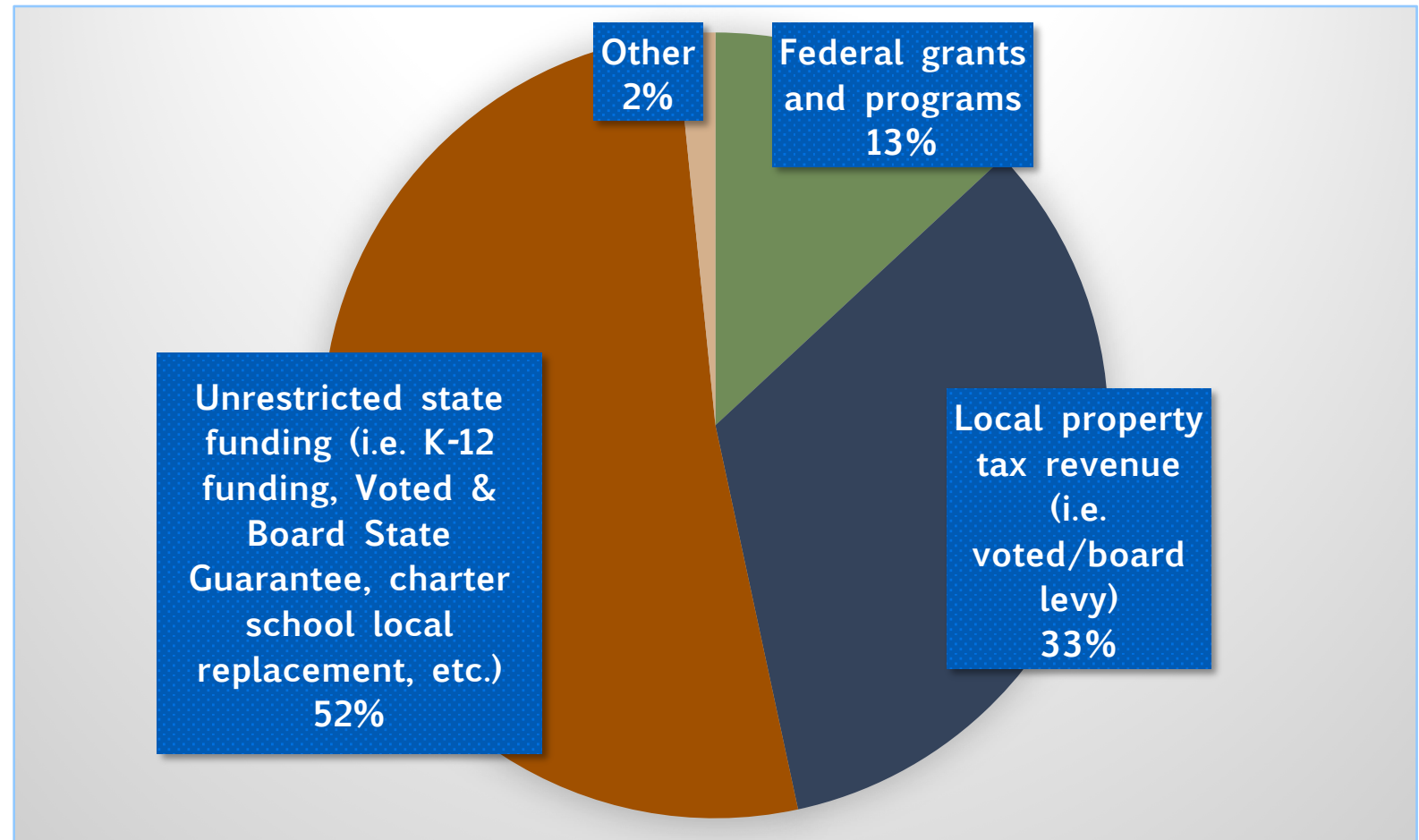
- Mental health assessments or screenings
- Individual, group, and/or family therapy or counseling
- Parent education
- Social skills and other skills development groups
- Facilitated peer support
- Family resource facilitation
- Case management
- Consultation services (including referrals)
- Medication management
- Crisis response protocol
- Telehealth services (providing any of the services listed above)
- Crisis hotlines or SafeUT app
- Respite/supported housing
- Residential care
- Inpatient care




































# FUNDING FOR MENTAL HEALTH SERVICES: TOTAL SPENDING AND BY FUNDING SOURCE

Total spending  
reported by  
responding  
districts in FY  
2018:

\$58,543,300

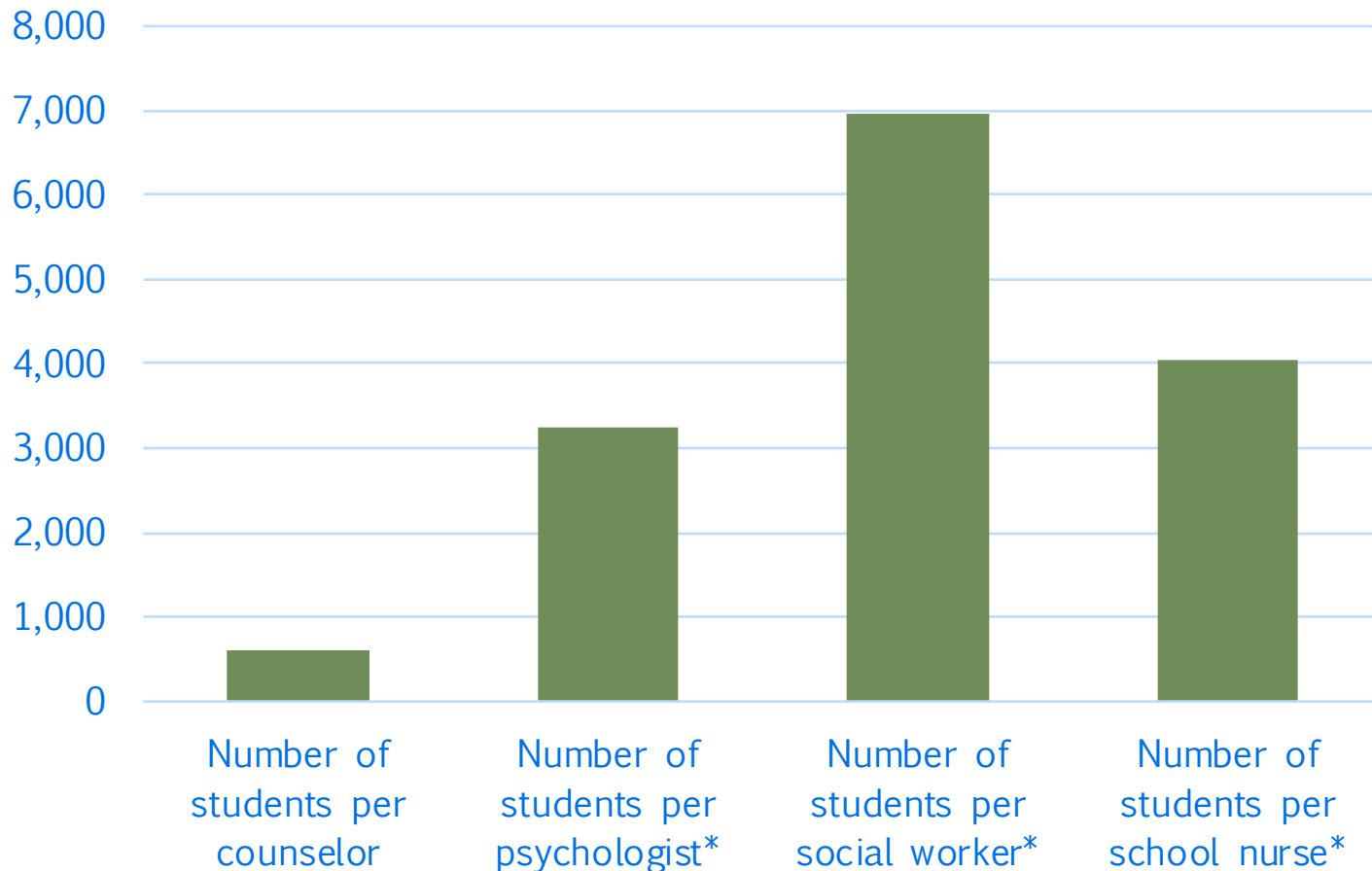


# WHO PROVIDES SERVICES WITHIN THE LEA?

	School Counselor	School Psychologist	School Social Worker	School Nurse
School Improvement				
Attendance				
Early Warning Systems				
Student Engagement & Graduation				
Accommodations for Students with Disabilities				
Bullying Prevention				
Suicide & Drug Abuse Prevention				
Student Intervention				
Psychological & Academic Evaluation				
Service to ALL Students				
Foundational Skills Development				
Academic Support & Planning				
School/Home/Community Collaboration				
Student's Physical Health				

Source: State Board of Education

# RATIOS OF LEA PROFESSIONALS TO STUDENTS: RANGE AND OVERALL

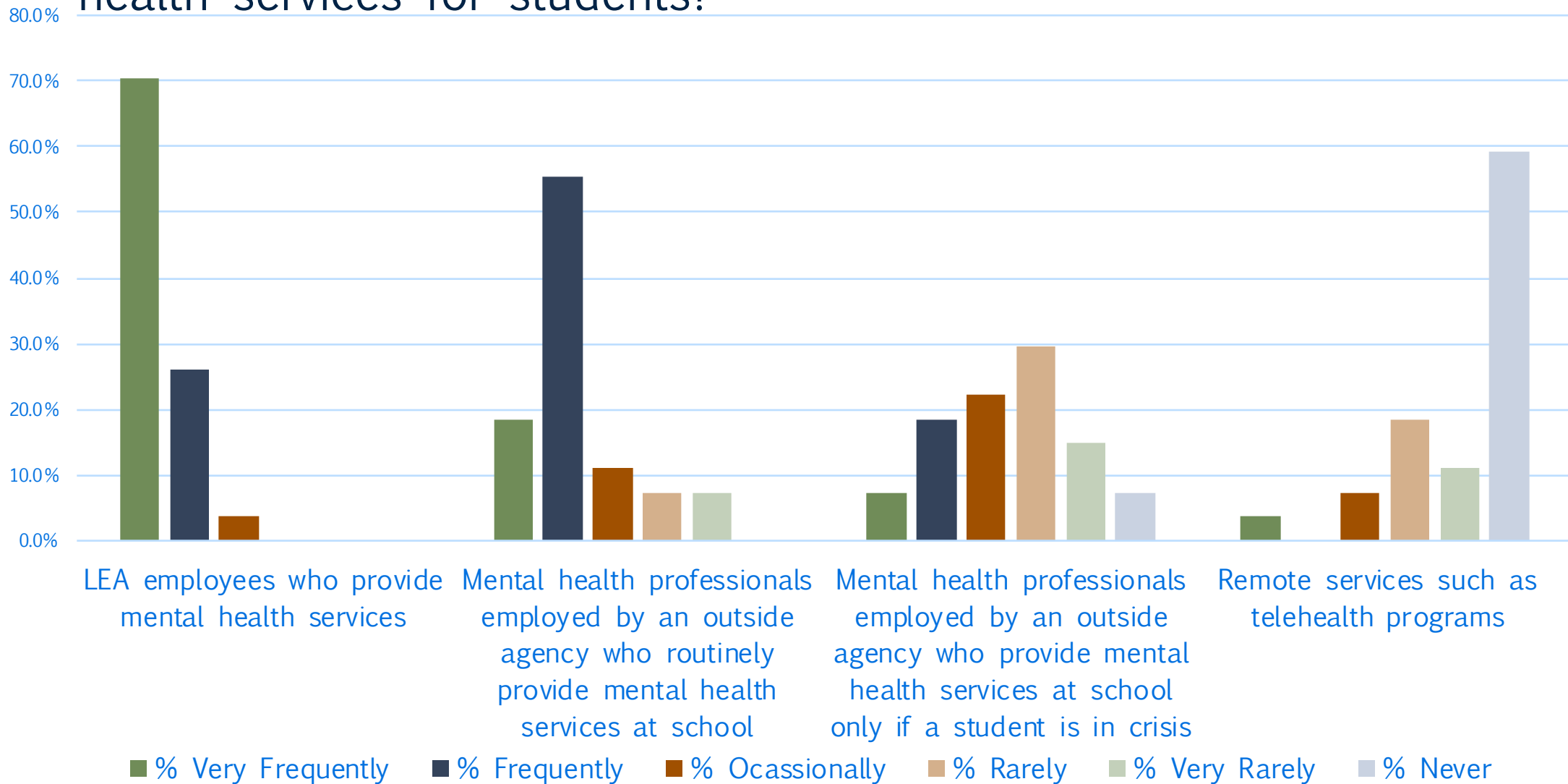


\*Note: Averages are for districts reporting at least one of a professional type. Several districts reported 0 FTEs for some of the professionals.

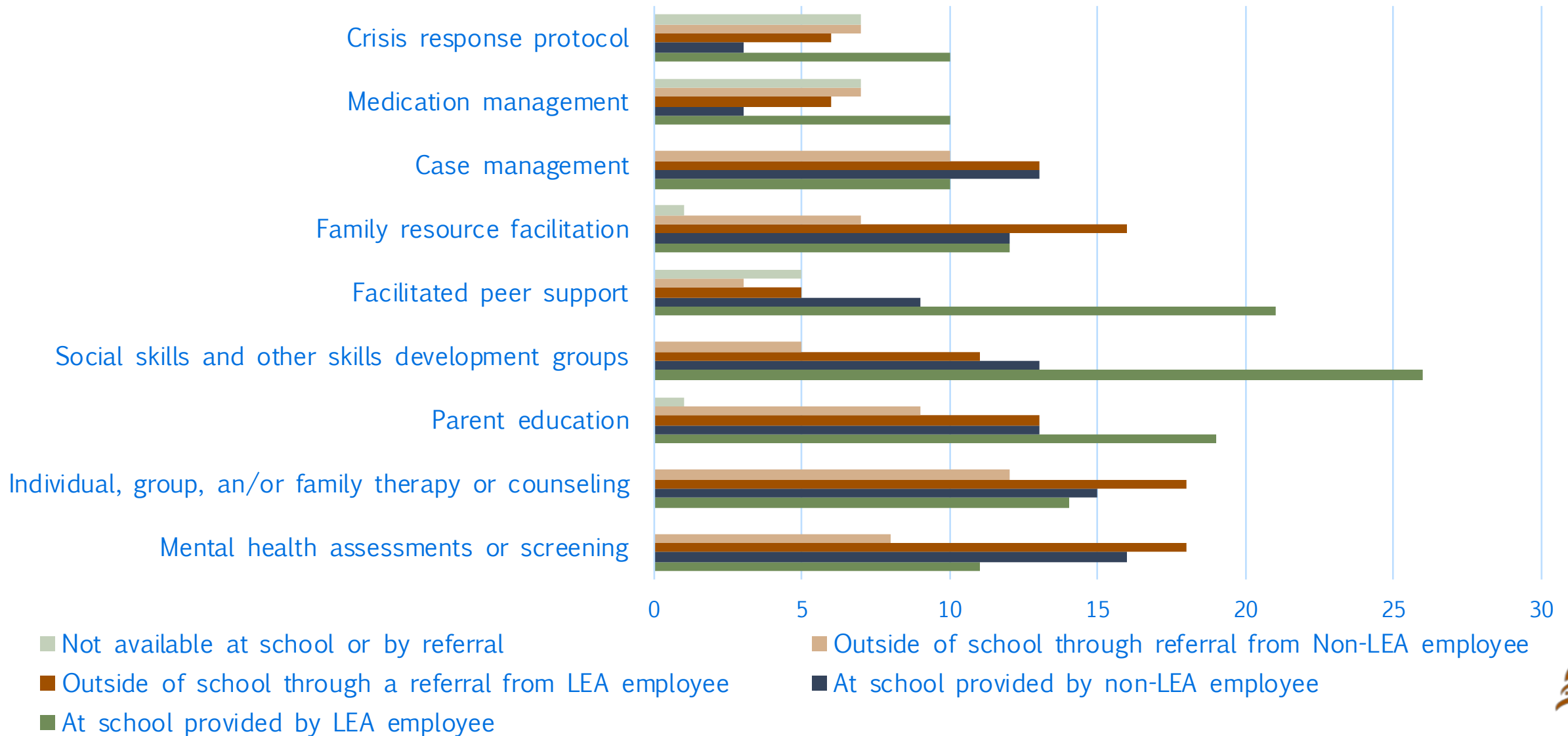
## Range of professional to student ratios\*

Professional	Low	High
Counselor	1:299	1:862
Psychologist	1:1067	1:15,320
Social Worker	1:479	1:28,905
School Nurse	1:774	1:16,165

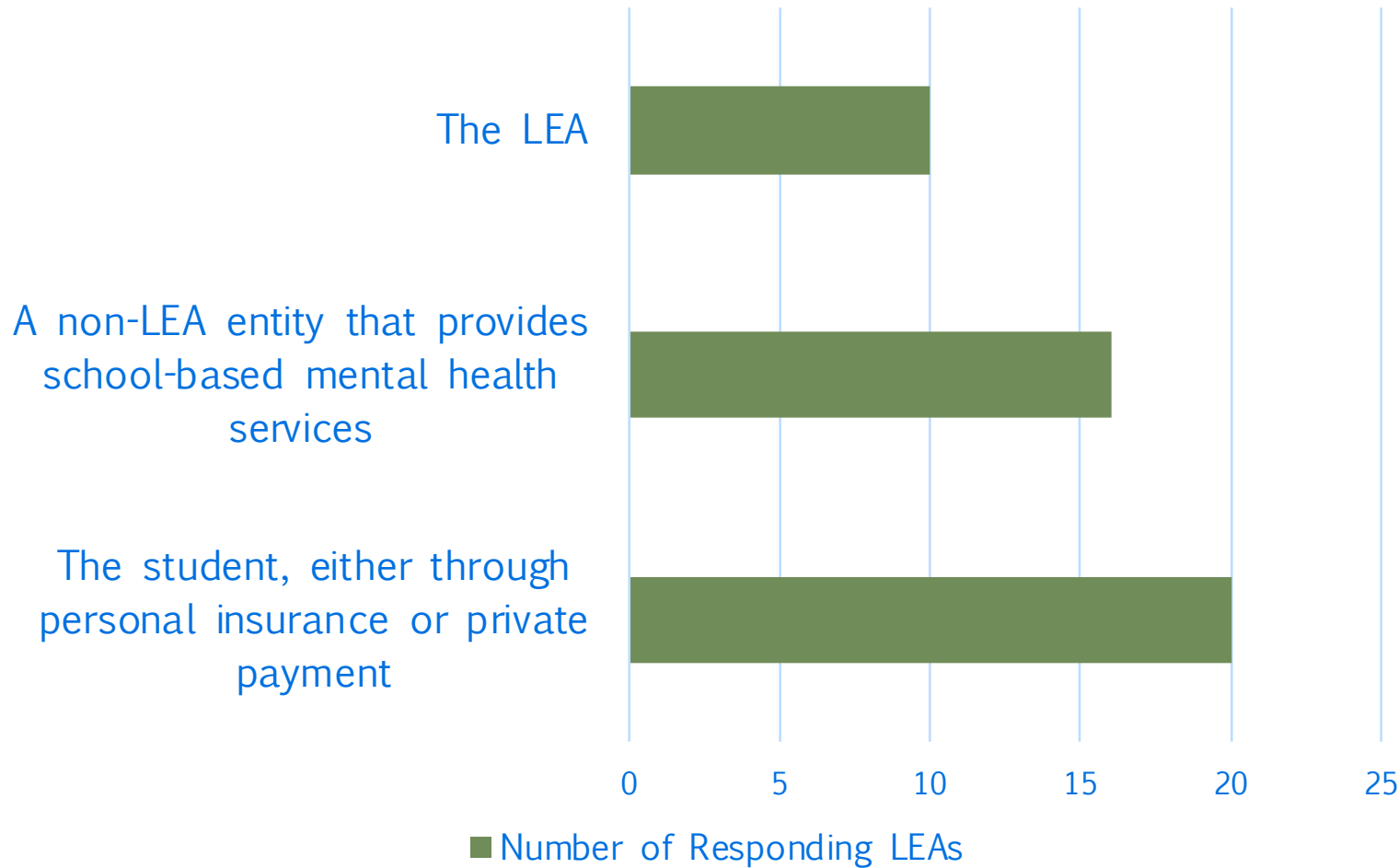
# How often do LEAs use the following resources to provide mental health services for students?



# What services are provided, where, and how?

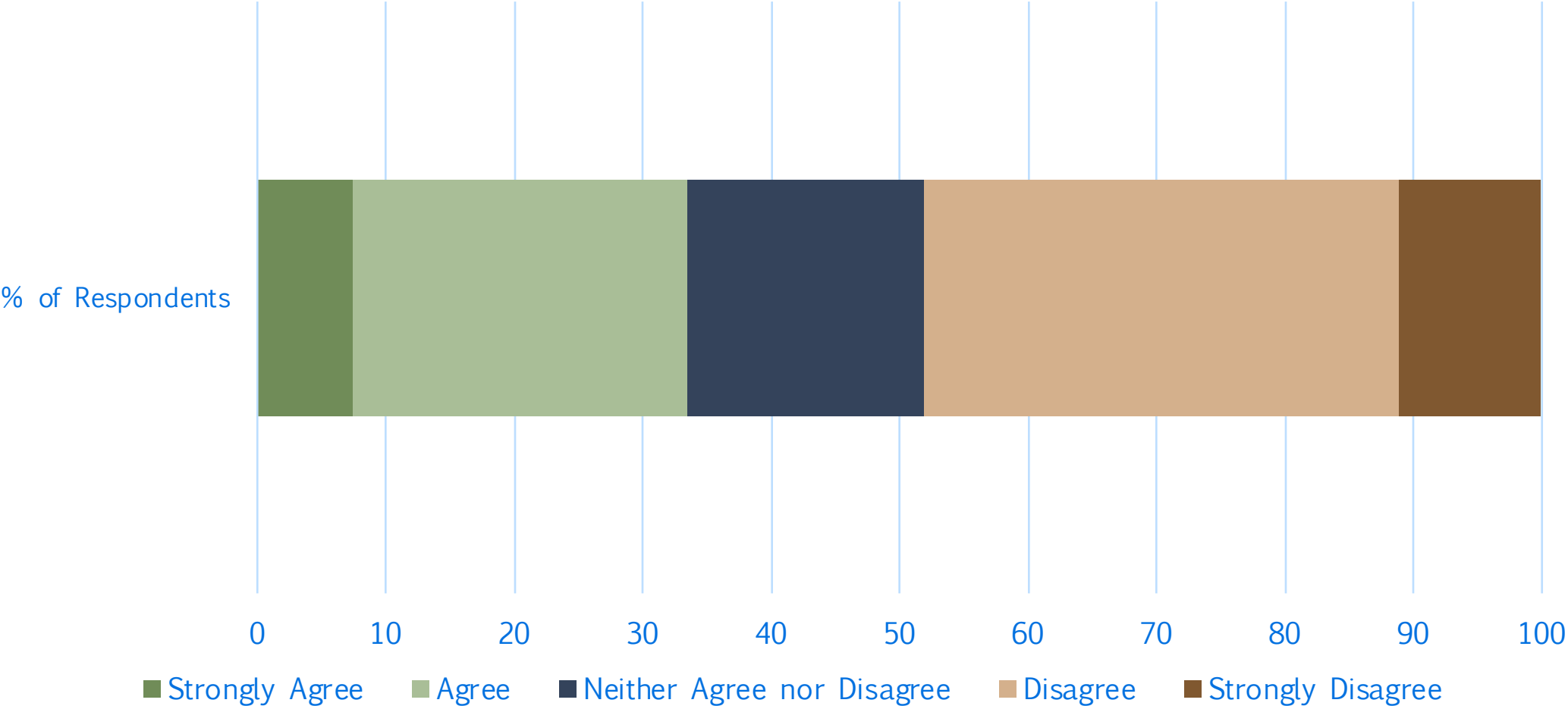


# When an LEA refers a student to mental health services outside of school, who pays for those services?

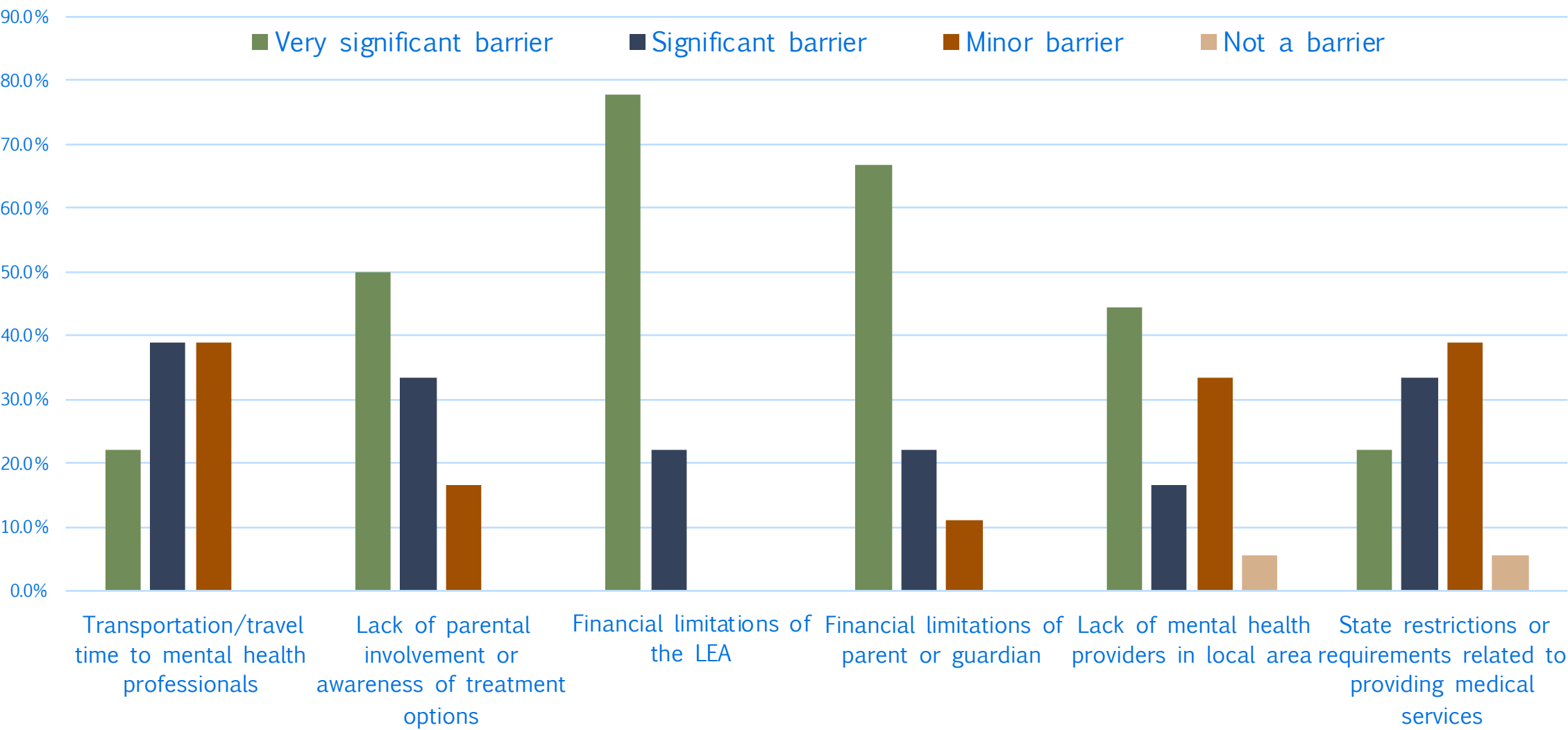


- “Access to mental health services most often comes down to ability to pay or quality of insurance coverage. Insurance coverage is tricky and has seemingly endless variables.”
- “Many of our students with the greatest mental health needs, who are a danger to themselves and others, do not have access to funding to get the medical services they need.”

AGREEMENT WITH THE FOLLOWING STATEMENT: “STUDENTS ARE ABLE TO ACCESS SERVICES THAT MEET THE MAJORITY OF THEIR MENTAL HEALTH NEEDS (AT SCHOOL, THROUGH REFERRAL FROM THE LEA, OR ON THEIR OWN).”



# Respondents who did not agree that students are able to meet the majority of their mental health needs identified the following barriers:





# IS THERE ANYTHING ELSE YOU WOULD LIKE TO SHARE?

## *SAMPLE COMMENTS FROM RESPONDENTS*

- “Public Schools are the only agency that cannot refuse services or stop treatment based on the client maximizing a therapeutic threshold. We have seen students fail a treatment program and return to school still requiring extensive mental health services which we struggle to provide.”
- “The main problem for our district is a lack of preventative services rather than crisis services. [...] We also need additional evidence-based trauma-informed services to deal with youth offenders.”
- “With the significant rise in anxiety, depression, suicidal ideation and self-harming behaviors in the student population (and in younger children), we need more resources to hire more mental health providers/supports. Licensed school counselors are not trained and/or legally able to provide the intensive mental health services needed in our schools to support struggling students.”
- “We have seen a significant INCREASE in mental health issues with our students including 3 student suicides in the last 6 months.”

# THANKS!

- For input on survey development:
  - Lillian Tsosie-Jensen, State Board of Education
  - Terry Shoemaker, Utah School Superintendents Association
  - Eric Tadehara and others, Division of Substance Abuse and Mental Health
  - B.J. Weller, Canyons School District
  - Brad Christensen, Davis School District
- For LEA staff and superintendents who completed the survey