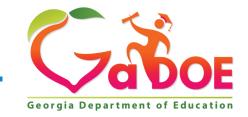
School-Based Behavioral Health



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- Data
- Misconceptions
- Promises
- Successes (Improvement Movement)
- Challenges

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Offering a holistic education to each and every child in our state.

Student Behavioral Health Data

- **14 percent of children** with behavioral health issues receive mostly Ds and Fs on school work (*Blackorby, Cohorst, Garza, and Guzman*)
- On average, children with behavioral health issues miss as many as 18 to 22 days of school (Blackorby)
- The consequences of untreated language problems are significant and result in behavior problems, reading difficulties, grade retention, and high school dropout (Sices, et al)
- Children with untreated tooth decay have trouble sleeping and eating, increased school absences, difficulty paying attention in school, difficulty keeping up with peers academically, difficulty self-regulating behavior, and are more likely to report feeling worthless, shy, and unhappy than their peers (*Children's Health Fund*)



Misconceptions

- \circ Not all student behavioral issues are due to mental health issues
- Not all student behavioral issues should be referred for therapy
- $\circ~$ Not all student behavioral issues should be referred for Special Education
- Not all student behavioral issues should be referred for out-of-school suspension
- $\circ~$ Not all student behavioral issues are attributable to the student
 - Physical health factors
 - Adult factors
 - Situational factors
 - School climate factors



Promise of School-Based Behavioral Health Services

- School-based behavioral health services offer the promise of improving **access** for children to services/interventions to meet their needs as early as possible.
- School-based behavior health services **SHOULD NOT** focus <u>only</u> on access to therapy, because other factors influence behavior.
- School-based behavior health services:
 - Should incorporate physical and behavioral health screening (including language)
 - Should include physical and behavioral health awareness training for all school personnel
 - Should be linked to the Multi-Tiered Systems of Support (MTSS)
 - Should become part of the framework for improving school climate



Promise of School-Based Behavioral Health Services

- School climate affects not only students' motivation and school satisfaction, but their lifestyles, health, mental health, and quality of life, as well (*Vieno, Santinello, Galbiati, and Mirandola*)
- School climate is directly related to conditions that can impact students' ability and capability of dealing effectively with behavioral health and physical issues (*Porteous and Kelleher*)
- A positive school climate increases the psychological well-being of students (*Ruus*)
- An unstable/unhealthy, non-supportive, non-responsive school climate can exacerbate the conditions of students with behavioral health issues (Sugai)



Improvement Movement

- **PBIS** is a proactive systems approach to establishing the behavioral health supports and is a framework for changing school climate to be more positive, supportive, safe, and secure (Sugai)
 - ✓ 1,307 schools are implementing PBIS
 - Improved school climate rating, improved attendance, improved graduation rate, decreased out-of-school suspension (25%)
- **Behavioral health awareness** (NAMI and GaDOE)
 - ✓ Over 9,000 educators have been trained since October 2018 and another 6,000 will be trained before September 2019 (choice of 18 training modules)
 - ✓ Over 400 SROs have received CPI training and another 200 are scheduled for training
- **Power Up for 30** (GaDOE and GaDPH)
 - ✓ 1,000 elementary schools participate



- Suicide prevention training (GaDOE and partners)
 - ✓ Over 1,000 educators have been trained on suicide prevention
- APEX School-Based Therapy
 - ✓ Over 400 schools have APEX therapists
- Title IV Part A Federal Funding is more flexible
 - ✓ Behavioral health services
 - ✓ Re-entry program for justice-involved youth
 - ✓ Drug and alcohol prevention/intervention
 - ✓ Trauma-informed training
- School-Justice Coordination
 - ✓ School Climate and Attendance Committee
 - Cross-training of schools and juvenile courts, which includes school climate and attribution



- Prevention, Intervention, and *Innovation*
 - Innovation:
 - ✓ Sources of Strength
 - ✓ Handle with Care
 - ✓ LPCs in schools
 - ✓ Expanding Medicaid for school nursing services
 - ✓ Remodeling MTSS
 - ✓ Importance of language (research, screening, practices)
 - Misdiagnosis/Attribution
 - Research into the prevalence of speech, language, and communication difficulties among youth in secured detention found that more than two-thirds had below average language skills. Yet, most of the time their behavior was attributed to disrespect for others (Snow 2016).



Improvement Movement Challenges

- Legal issues
- Access issues
 - Awareness
 - ✤ Affordable
 - Available
 - Accommodating
 - ✤ Acceptable
- Workforce issues
- Attitudes and beliefs about behavioral health
- Financial issues
- Limited conceptualization of school behavioral health services (*It's not just mental health*)

