MARYLAND STATE DEPARTMENT OF EDUCATION
EQUITY AND EXCELLENCE

Mohammed Choudhury
State Superintendent of Schools

TO: Members of the State Board of Education

FROM: Mohammed Choudhury

DATE: February 22, 2022

SUBJECT: Mental Health in Schools

PURPOSE

Student mental health is an important component of student success. The purpose of this agenda item is to explore and highlight the programming and supports that positively impact mental health in schools.

BACKGROUND/HISTORICAL PERSPECTIVE

Student mental health includes emotional, psychological, and social well-being. Mental health determines how we handle stress, relate to others, and make healthy choices. Youth mental health is the focus on the *US Surgeon General's Advisory* in December 2021 as well as the *U.S. Department of Education* report in October 2021. The impact of the COVID-19 pandemic expanded the need for mental health supports in schools. Current research further highlights the impact of mental health on student outcomes, teacher efficacy, and school climate.

EXECUTIVE SUMMARY

The presentation, Mental Health in Schools, outlines the intersection between the COVID-19 pandemic and student mental health. National and state perspectives are featured including a recent (February 2022) perception survey completed by Maryland school principals. Innovative practices shared by central office and school staff from six local school systems highlight the programs and services in schools to support student mental health.

ACTION

For information only.

ATTACHMENT:

Mental Health in Schools PowerPoint February 22, 2022

MARYLAND STATE DEPARTMENT OF EDUCATION

EQUITY AND EXCELLENCE

Mental Health in Schools

Maryland State Board of Education

February 22, 2022

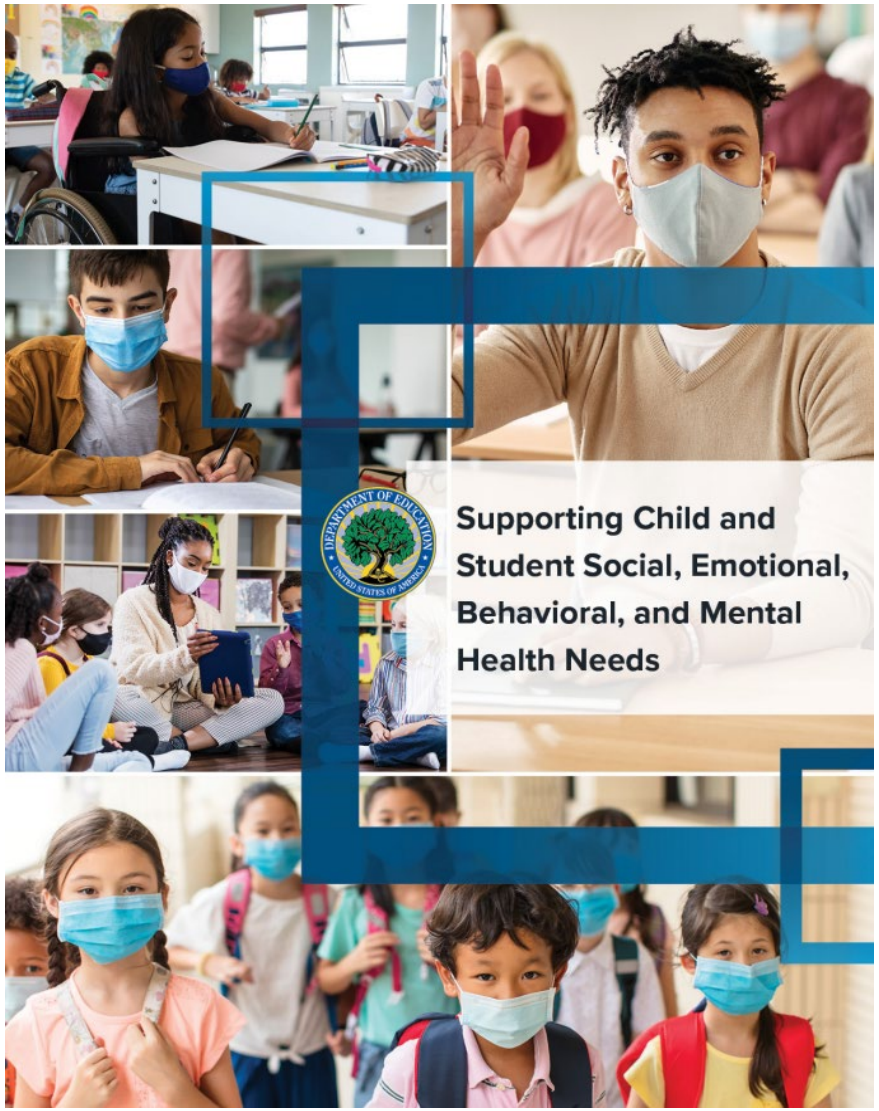
Overview of School Mental Health in Maryland

1. **Setting The Stage**
2. **School Mental Health Prior To The COVID-19 Pandemic**
3. **COVID-19 and School Mental Health: National Perspective**
4. **COVID-19 and School Mental Health: Educator Well-being**
5. **COVID-19 and School Mental Health: Maryland Statewide Perspectives**
6. **Maryland Statewide Mental Health Initiatives**
7. **Mental Health Initiatives: Local School System Level**

1. Setting the Stage

U.S. Department of Education: Supporting Child and Student Social, Emotional, Behavioral and Mental Health Needs

- Published in October 2021 by the U.S. Department of Education and the Office of Special Education and Rehabilitative Services.
- Outlines seven key challenges to providing school-based mental health support across early childhood, K-12, and higher education.
- Highlights seven corresponding recommendations.
- Provides resources for implementation and guidance to adapt existing programming to support social, emotional, and mental health services.



(U.S. Department of Education, Office of Special Education and Rehabilitative Services, Supporting Child and Student Social, Emotional, Behavioral, and Mental Health Needs, Washington, DC, 2021)

Defining Mental Health

Mental health includes our emotional, psychological, and social well being. It determines how we handle stress, relate to others, and make healthy choices.

In schools, U.S. Department of Education prioritizes **three components of mental health**

1. **Social**: How we relate to others
2. **Emotional**: How we feel
3. **Behavioral**: How we act

(Chafouleas, 2020; U.S. Department of Education, Office of Special Education and Rehabilitative Services, Supporting Child and Student Social, Emotional, Behavioral, and Mental Health Needs, Washington, DC, 2021)

Youth.gov: Why Does Mental Health Matter?

Mentally healthy students are more likely to:

- go to school ready to learn
- actively engage in school activities
- have supportive and caring connections with adults and young people
- use appropriate problem-solving skills
- have less aggressive behaviors
- add to positive school culture

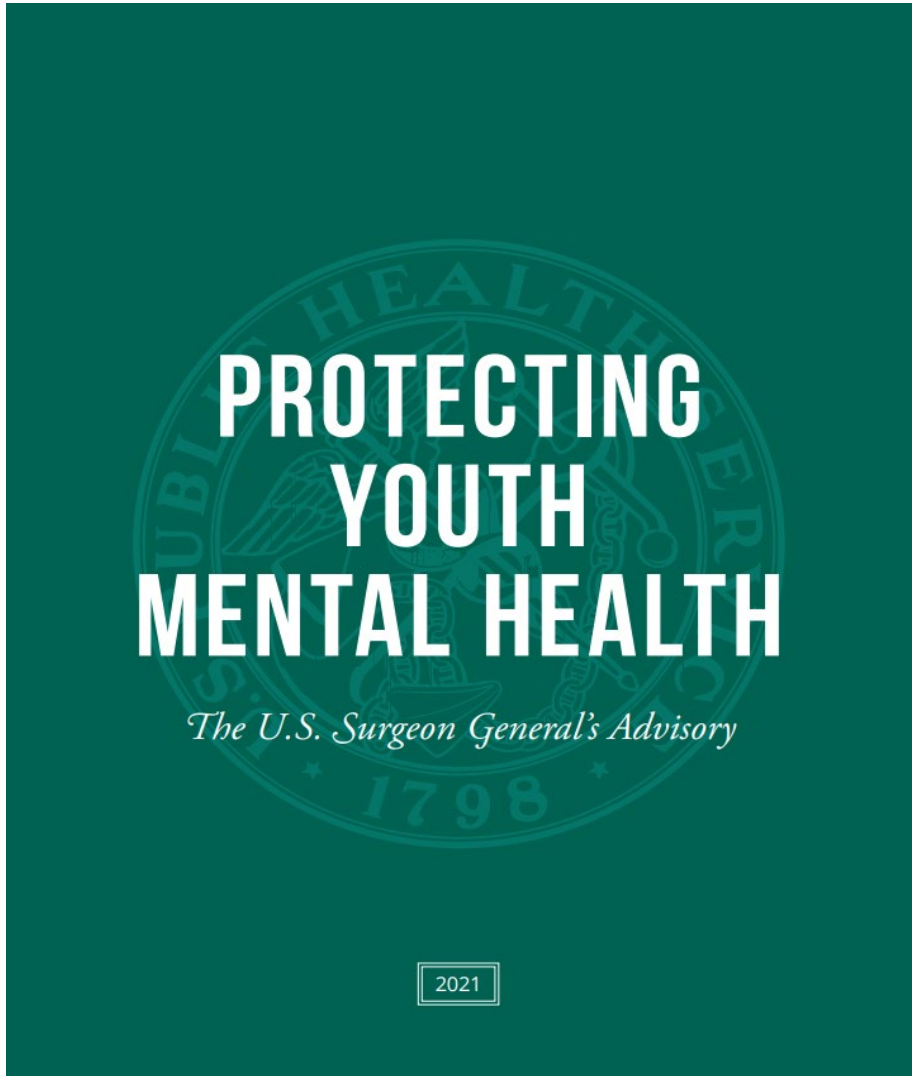
(School-Based Mental Health, youth.gov, 2021)

The U.S. Surgeon General's Advisory: Protecting Youth Mental Health

The U.S. Surgeon General's Advisory issued in December 2021 focused on the Youth Mental Health Crisis

This advisory provides:

- context on the impact of youth mental health
- individual recommendations for supporting mental health of children, adolescents, and young adults
- institutional recommendations for schools, community organizations, health care systems, media, and government agencies



(Protecting Youth Mental Health: The U.S. Surgeon General's Advisory, 2021)

The U.S. Surgeon General's Advisory: Protecting Youth Mental Health

Factors that Can Shape the Mental Health of Young People

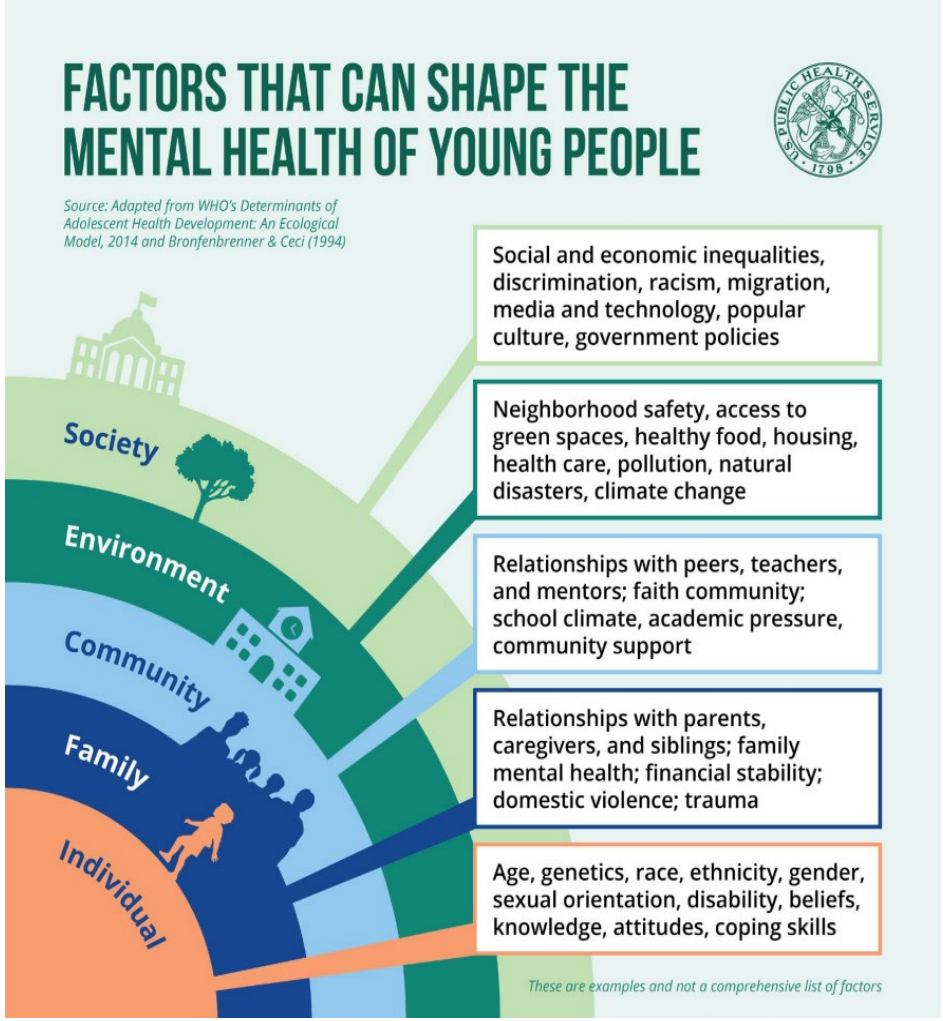
Society
Social and economic inequalities

Environment
Neighborhood safety, food, housing

Community
Relationship with peers, teachers, mentors

Family
Relationships with adults

Individual
Age, genetics, race



(Protecting Youth Mental Health: The U.S. Surgeon General's Advisory, 2021)

2. School Mental Health
Prior to the COVID-19 Pandemic

Youth Risk Behavior Surveillance System

Purpose

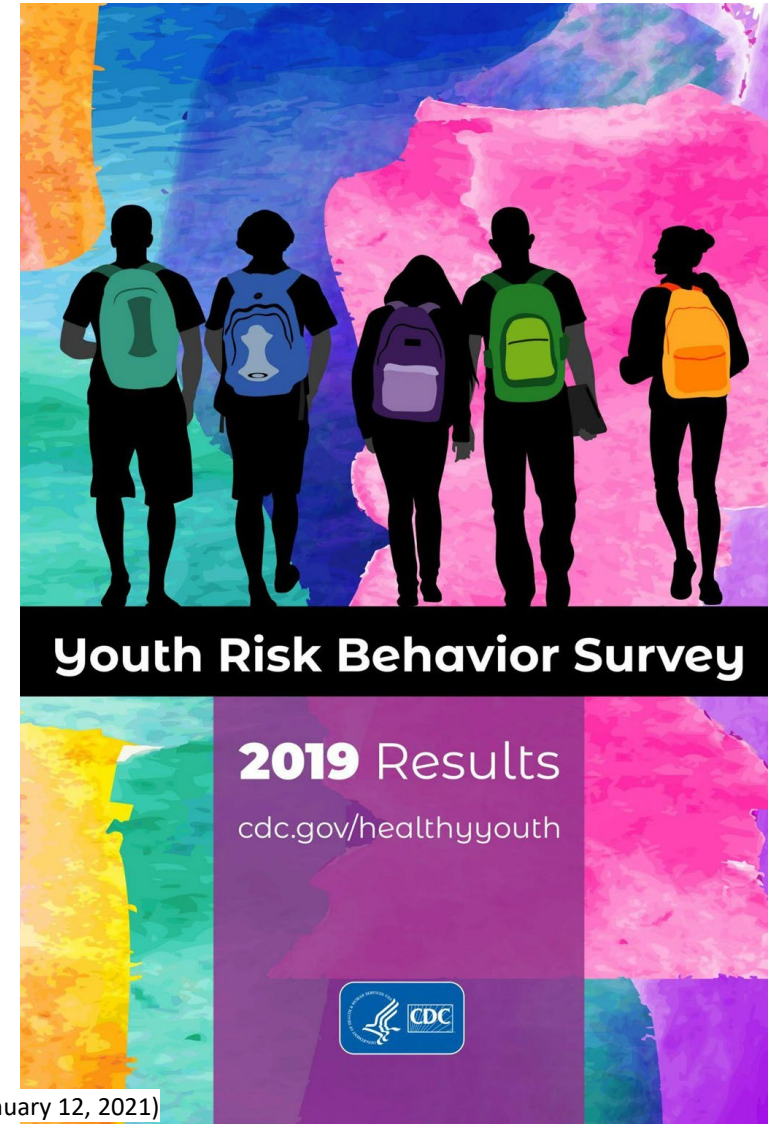
- Focuses on behaviors among youth that are related to the most important health problems.
- Developed by the CDC to determine the prevalence of health behaviors

Participant Characteristics

9th -12th grade students

Survey Characteristics

- National sample size: 13,677
- 92 percent of states participate in Fall semester
- Conducted every two years beginning in 2008
- Data not collected in Fall 2020



(Centers for Disease Control and Prevention. [2009-2019] Youth Risk Behavior Survey Data. Available at: www.cdc.gov/yrbs. Accessed on January 12, 2021)

National Youth Risk Behavior Surveillance System: 2009-2019

THE PERCENTAGE OF HIGH SCHOOL STUDENTS WHO:	2009 Total	2011 Total	2013 Total	2015 Total	2017 Total	2019 Total	Trend
Experienced persistent feelings of sadness or hopelessness	26.1	28.5	29.9	29.9	31.5	36.7	
Seriously considered attempting suicide	13.8	15.8	17.0	17.7	17.2	18.8	
Made a suicide plan	10.9	12.8	13.6	14.6	13.6	15.7	
Attempted suicide	6.3	7.8	8.0	8.6	7.4	8.9	
Were injured in a suicide attempt that had to be treated by a doctor or nurse	1.9	2.4	2.7	2.8	2.4	2.5	

LEGEND

In wrong direction

No change

In right direction

(Centers for Disease Control and Prevention. [2009-2019] Youth Risk Behavior Survey Data. Available at: www.cdc.gov/yrbs. Accessed on January 12, 2021)

Maryland Youth Risk Behavior Surveillance System (2018-2019)

Key Findings

- 32 percent of high school students and 26 percent of middle school students felt sad or hopeless for at least two week.
- 18 percent of high school students considered suicide.
- 21 percent of high school students reported that a parent or other adult yells at them or puts them down.

Protective Factors

- 77 percent of high school and 81 percent of middle school students feel comfortable seeking help from one or more adults.

(Maryland Department of Health. [2018-2019] Youth Risk Behavior Survey/Youth Tobacco Survey Data. Available at: https://health.maryland.gov/phpa/ccdpc/Reports/Pages/YRBS2018. Accessed on January 14, 2021)

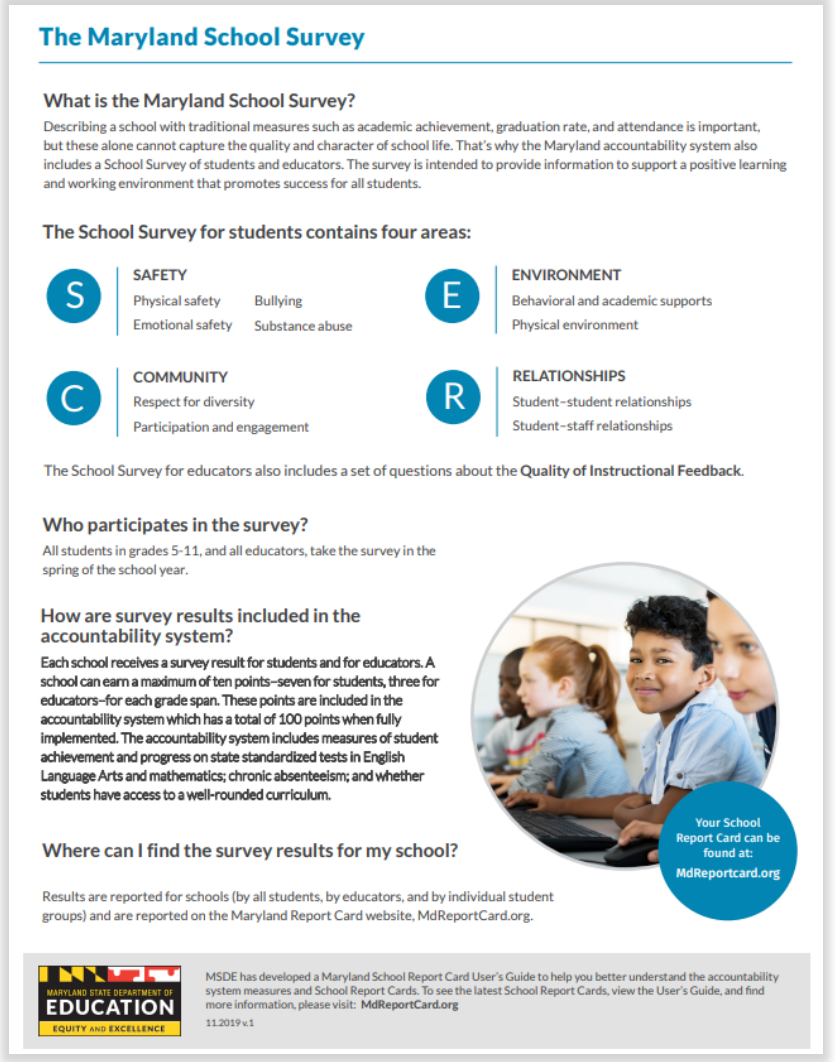
The Maryland School Survey (2019)

The survey provides information correlated with **supporting a positive learning and working environment.**

Completed by **students grades 5-11** and **educators** during the spring 2019 semester.

Areas of focus

- Safety
- Environment
- Community
- Relationship



The Maryland School Survey

What is the Maryland School Survey?

Describing a school with traditional measures such as academic achievement, graduation rate, and attendance is important, but these alone cannot capture the quality and character of school life. That's why the Maryland accountability system also includes a School Survey of students and educators. The survey is intended to provide information to support a positive learning and working environment that promotes success for all students.

The School Survey for students contains four areas:

S — SAFETY
Physical safety; Bullying; Emotional safety; Substance abuse

E — ENVIRONMENT
Behavioral and academic supports; Physical environment

C — COMMUNITY
Respect for diversity; Participation and engagement

R — RELATIONSHIPS
Student–student relationships; Student–staff relationships

The School Survey for educators also includes a set of questions about the **Quality of Instructional Feedback**.

Who participates in the survey?

All students in grades 5-11, and all educators, take the survey in the spring of the school year.

How are survey results included in the accountability system?

Each school receives a survey result for students and for educators. A school can earn a maximum of ten points–seven for students, three for educators–for each grade span. These points are included in the accountability system which has a total of 100 points when fully implemented. The accountability system includes measures of student achievement and progress on state standardized tests in English Language Arts and mathematics; chronic absenteeism; and whether students have access to a well-rounded curriculum.

Where can I find the survey results for my school?

Results are reported for schools (by all students, by educators, and by individual student groups) and are reported on the Maryland Report Card website, MdReportCard.org.

Your School Report Card can be found at: MdReportcard.org

MSDE has developed a Maryland School Report Card User's Guide to help you better understand the accountability system measures and School Report Cards. To see the latest School Report Cards, view the User's Guide, and find more information, please visit: **MdReportCard.org**

11.2019 v.1

(Maryland Department of Education. [2018-2019] Maryland School Survey. Available at:www.cdc.gov/yrbs. Accessed on January 14, 2021)

Maryland School Survey (2019)

Safety

- (1) Physical Safety
- (2) Emotional Safety
- (3) Bullying
- (4) Substance Abuse

Community

- (5) Respect for Diversity
- (6) Participation and Engagement

Environment

- (7) Behavioral and Academic Supports
- (8) Physical Environment

Relationships

- (9) Student-Student Relationships
- (10) Student-Staff Relationships

Educator survey has an additional topic: (11) Quality of instructional feedback

(Maryland Department of Education. [2018-2019] Maryland School Survey. Available at:www.cdc.gov/yrbs. Accessed on January 14, 2021)

Maryland School Survey (2019)

Areas	Topic	Average Topic Score STUDENTS	Average Topic Score EDUCATORS
Community	Respect for Diversity	6.1	6.8
	Participation and Engagement	5.7	5.5
Environment	Behavioral and Academic Supports	6.4	6.6
	Physical Environment	2.7	5.8
Safety	Physical Safety	3.6	6.1
	Emotional Safety	5.5	6.5
	Bullying	4.6	8.0
	Substance Abuse	7.5 (Use/Abuse)	3.7 (Supports/Prevention)
Relationships	Student-student Relationships	3.1	5.3
	Student-staff Relationships	7.0	8.6
	Quality of Instructional Feedback	n/a	5.6

(Maryland Department of Education. [2018-2019] Maryland School Survey. Available at:www.cdc.gov/yrbs. Accessed on January 14, 2021)

Maryland School Survey
Topic Scores: ENVIRONMENT

STUDENTS		EDUCATORS	
TOPIC	AVERAGE	TOPIC	AVERAGE
Behavioral and academic supports describes the degree to which students feel they receive social, emotional, behavioral, and academic supports from adults at the school, that behavior is addressed appropriately, and that what students are learning is important to them and connected to life outside the classroom.	6.4	**Behavioral and academic supports** describes the degree to which educators provide social, emotional, behavioral, and academic supports to students, and whether the programs and resources at the school are adequate to support students' learning. It includes educator feelings about whether the school effectively handles student discipline problems.	6.6
Physical environment describes the degree to which students feel the school is kept clean, comfortable, and in good repair.	2.7	**Physical environment** describes the degree to which educators feel the school is kept clean and whether their work is hindered by poor maintenance, insufficient workspace, outdated equipment/facilities, and/or a lack of materials and supplies.	5.8

(Maryland Department of Education. [2018-2019] Maryland School Survey. Available at:www.cdc.gov/yrbs. Accessed on January 14, 2021)

3. COVID-19 and School Mental Health: National Perspective

COVID 19 and Student Mental Health

Research on prior pandemics suggest there will be both immediate and long-term adverse consequences for many students.

Between March 2020 and June 2020, 15 percent of parents reported declines in their student's mental health and increases in problem-behavior.

Survey data from April and May 2020, suggest that 25 percent of students (ages 13-19) reported lack of sleep due to increased worry, unhappiness, or depression.

Students are six times mores likely to complete mental health treatment in schools than community.

(US Department of Education, Supporting Child and Student Social, Emotional, Behavioral and Mental Health Needs, 2021; Protecting Youth Mental Health: The U.S. Surgeon General's Advisory, 2021)

The U.S. Surgeon General's Advisory: Protecting Youth Mental Health

COVID 19 and Student Mental Health

As of June 2021, more than 140,000 children in the U.S. have lost a caregiver to COVID-19.

Emergency department visits related to suicide attempts were 51 percent higher for adolescent girls and 4 percent higher for adolescent boys compared to 2019.

The COVID-19 pandemic has increased anxiety, isolation, uncertainty, and instability in students leading to increased needs for mental health supports.

Anxiety and depression symptoms have doubled during the pandemic.

- 25 percent of youth are experiencing depressive symptoms
- 20 percent of youth are experiencing anxiety symptoms

(Protecting Youth Mental Health: The U.S. Surgeon General's Advisory, 2021)

Socio-Economic and Housing Status

- One in five students live in poverty and are more likely to experience significant mental health symptoms.
- Food insecurity and homelessness are risk factors for mental health concerns.

Race and Ethnicity

- Differences across race and ethnicity impact the extent to which individuals seek, access and use mental health services.
- There is a disproportionate burden of COVID-19 illness among specific racial and ethnic groups.

(US Department of Education, Supporting Child and Student Social, Emotional, Behavioral and Mental Health Needs, 2021)

English Language Learners

- English language learners are often supporting siblings with remote learning.
- These students frequently take on adult responsibilities at home, due to increased proficiency in English.

LGBTQI+

- 70 percent of LGBTQI+ youth reported their mental health was “poor” most of the time.

Disability

- Students with disabilities often experience higher rates of mental health challenges.

(US Department of Education, Supporting child and Student Social, Emotional, Behavioral and Mental Health Needs, 2021)

Systematic Review of 36 studies from 11 countries

Published in January 2022

- 80,000 children and adolescents
- 18,000 parents

JAMA The Journal of the American Medical Association

Mental Health Outcomes Reviewed

- Anxiety
- Depression
- Physical activity
- Student safety
- Suicide

(Viner R, Russell S, Saulle R, et al. School Closures During Social Lockdown and Mental Health, Health Behaviors, and Well-being Among Children and Adolescents During the First COVID-19 Wave: A Systematic Review. JAMA Pediatrics. Published online January 18, 2022. doi:10.1001/jamapediatrics.2021.5840)

Key Findings

- Screen time and lack of physical activity has been linked to increased risk for depression among children.
- Anxiety and depression among students 19 and younger is impacted by increased screen time, less physical activity and fewer adult supports.
- Eighteen to 60 percent of children and adolescents reported strong “distress” symptoms.
- Child protection referrals declined 27 to 40 percent due to the absence of school-based referrals.
- School closures were not shown to be related to suicide in children and adolescents.

(Viner R, Russell S, Saulle R, et al. School Closures During Social Lockdown and Mental Health, Health Behaviors, and Well-being Among Children and Adolescents During the First COVID-19 Wave: A Systematic Review. JAMA Pediatrics. Published online January 18, 2022. doi:10.1001/jamapediatrics.2021.5840)

U.S. Senate Hearing on Mental Health and Substance Use Disorders

- Full Committee hearing occurred on Tuesday, February 1, 2022.[1]
- Concern from senators and medical professionals regarding increases in reports on children struggling with mental health.
  - 18% to 60% of students experienced strong distress, especially for symptoms of anxiety and depression.[2]
  - Dr. Mitch Prinstein, Chief Science Office for the American Psychological Association (APA), reported a 42% increase in self-injury and suicide cases reported in children's hospitals during 2021 compared to 2019.[3]
- Call for schools to, *"…adopt curricula that incorporates materials about mental health"* (Ujifusa, 2022).[4]
- Schools would benefit from more resources, personnel, community guidance, and classroom materials to help students.[4]

1.U.S. Senate Committee on Health, Education, Labor, and Pensions. Feb. 1. 2022. Retrieved from https://www.help.senate.gov/hearings/mental-health-and-substance-use-disorders-responding-to-the-growing-crisis.
2."New Research Shows How Bad the Pandemic Has Been for Student Mental Health," by Sarah D. Sparks, 2022, *Education Week.*
3.Children's Hospital Association.(2021).COVID-19 and Children's Mental Health. Retrieved from: https://www.childrenshospitals.org/ /media/Files/CHA/Main/Issues_and_Advocacy/Key_Issues/Mental.
4."Student Mental Health Is Overwhelming Schools. Can Congress Help?" by Andrew Ujifusa, 2022. *Education Week.*

4. COVID-19 and School Mental Health: Educator Well-Being

EdWeek Research Center: Threats of Student Violence and Misbehavior Are Rising, Many School Leaders Report (2021)

Purpose: Analyzes national educational data and drills down to the state or local level

Survey: The EdWeek research center conducted monthly national surveys of teachers and district leaders

Focus: How schools are addressing challenges related to communication, equity, attendance, behaviors, and academic performance

- December 2021 survey
  - 286 district leaders
  - 199 principals
  - 725 teachers
- Areas of focus
  - Student threats of violence
  - Student misbehavior

(Kurtz, H. (2022, January 12). Threats of Student Violence and Misbehavior Are Rising, Many School Leaders Report. EdWeek. https://www.edweek.org/leadership/threats-of-student-violence-and-misbehavior-are-rising-many-school-leaders-report/2022/01)

EdWeek Research Center: Threats of Student Violence and Misbehavior Are Rising, Many School Leaders Report (2021)

Key Findings

- 44 percent of respondents reported in the December 2021 survey receiving more threats of violence by students compared to fall 2019.
- 66 percent reported increases in negative student behaviors compared to fall 2019.

	Most instruction remote or hybrid (2020-2021)	Most instruction in person (2020-2021)
Reported rising rates of student threats of violence compared to fall 2019	51%	30%
Reported increases in student misbehavior compared to fall 2019	71%	52%

(Kurtz, H. (2022, January 12). Threats of Student Violence and Misbehavior Are Rising, Many School Leaders Report. EdWeek. https://www.edweek.org/leadership/threats-of-student-violence-and-misbehavior-are-rising-many-school-leaders-report/2022/01)

New Orleans Trauma-Informed Schools Learning Collective: COVID-19 Impacts on Educator Well-Being

New Orleans Trauma Informed Schools Learning Collective

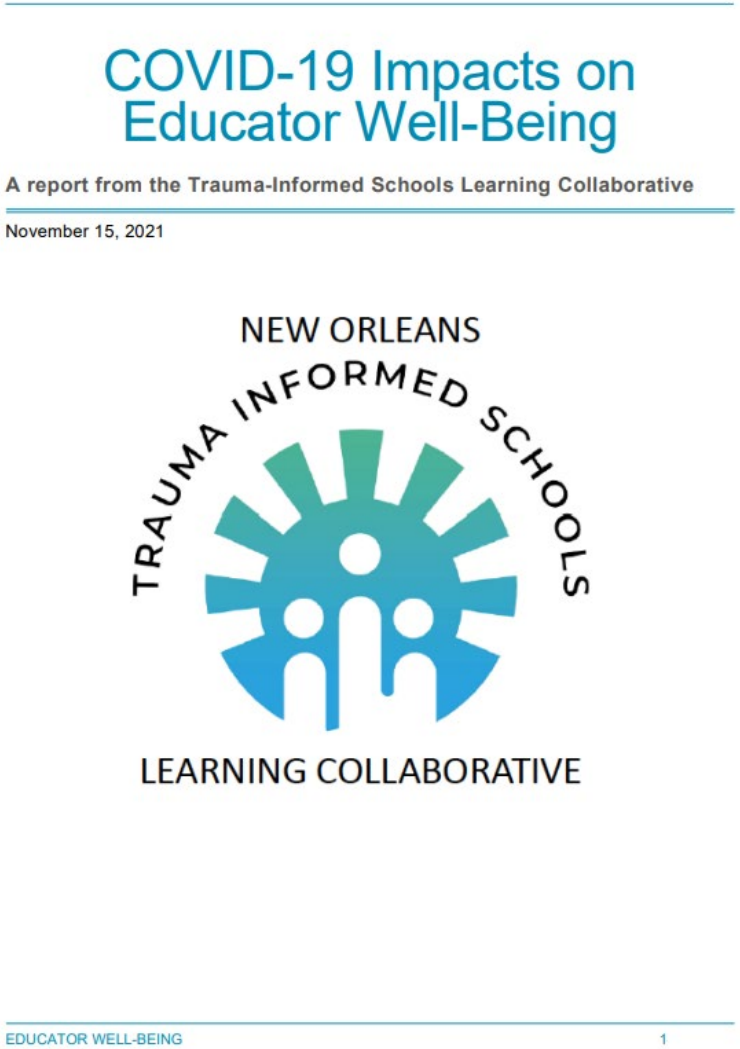
- Provides support to schools to strengthen climate
- Delivers trauma-informed supports
- Multi-agency collaboration

Research Purpose

- To understand the impact of COVID-19 pandemic on educators, their school community, and their teaching

Participants

- 171 educators from 24 different schools completed the survey in June 2021



(The New Orleans Trauma-Informed Schools Learning Collaborative (2021). COVID-19 Impacts on Educator Well-Being. New Orleans, LA: Author)

Key Findings

- COVID-19 stressors and challenges impact teachers' feelings of efficacy.
- The impact of COVID-19 stressors varies across racial groups.
- Teacher mental health is impacted at a level similar to that of a health care worker.
- Personal resilience and peer support can serve as a protective and preventive factor.
- Teacher self-efficacy can buffer the impact of trauma and burnout.

Stressors and Challenges (0-5 Scale)

Challenges of student learning loss (2.32)

Challenges of hybrid instruction (2.18)

Challenges of remote instruction (2.16)

Less impact on students and families (1.88)

Challenges to in-person instruction (1.80)

(The New Orleans Trauma-Informed Schools Learning Collaborative (2021). COVID-19 Impacts on Educator Well-Being. New Orleans, LA: Author)

New Orleans Trauma-Informed Schools Learning Collective: COVID-19 Impacts on Educator Well-Being

Teacher Mental Health

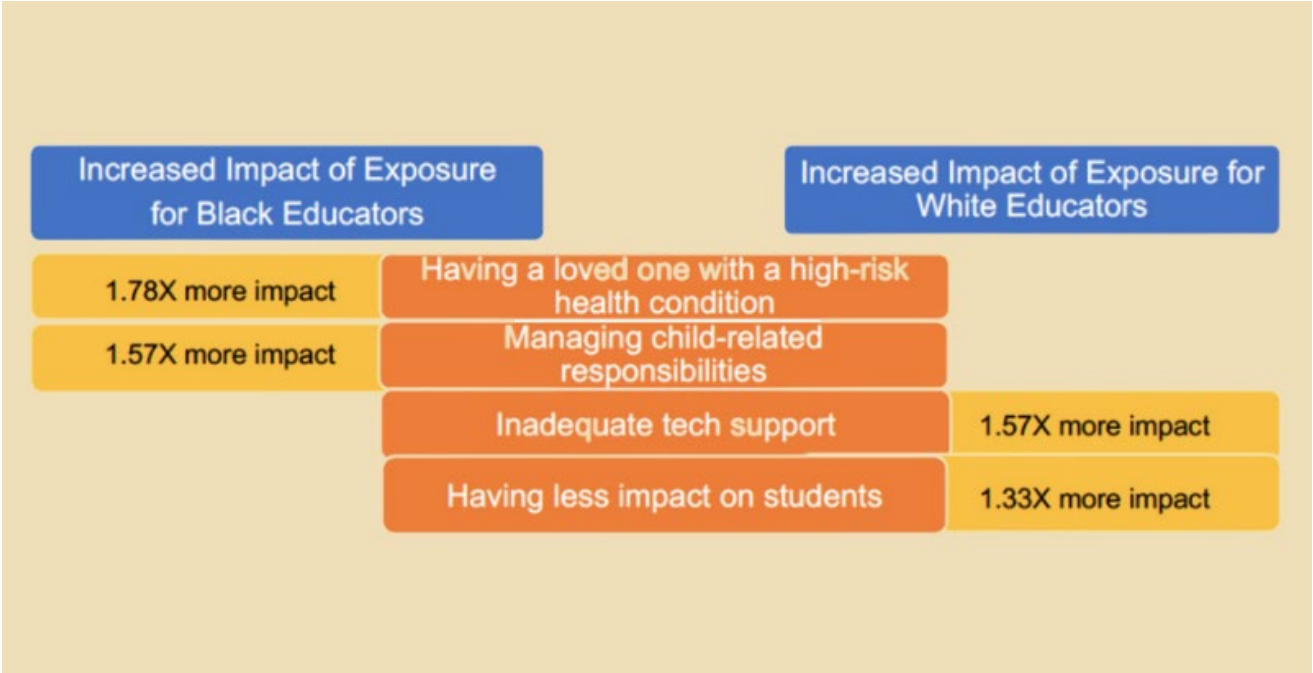
	Health Care Workers	All Teachers	Black Teachers	White Teachers
Depression	17%	35%	26%	48%
Anxiety	33%	36%	26%	46%
PTSD	14%	19%	14%	24%

(The New Orleans Trauma-Informed Schools Learning Collaborative (2021). COVID-19 Impacts on Educator Well-Being. New Orleans, LA: Author)

New Orleans Trauma-Informed Schools Learning Collective: COVID-19 Impacts on Educator Well-Being

Equity Impact

Compared to white teachers, black teachers reported 1.7 times more impact related to the stress of having a loved one with a high-risk health condition and 1.5 times more impact related to the stress of managing child-related responsibilities during COVID.



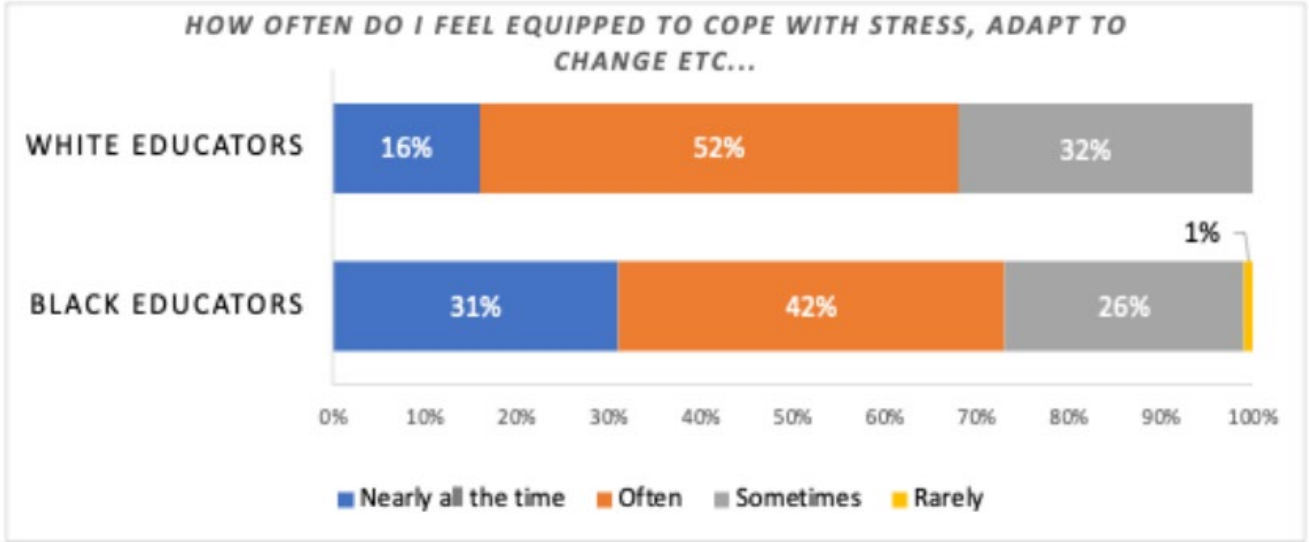
In contrast, white educators reported inadequate tech support and having less impact on students as the most impactful stressors related to COVID.

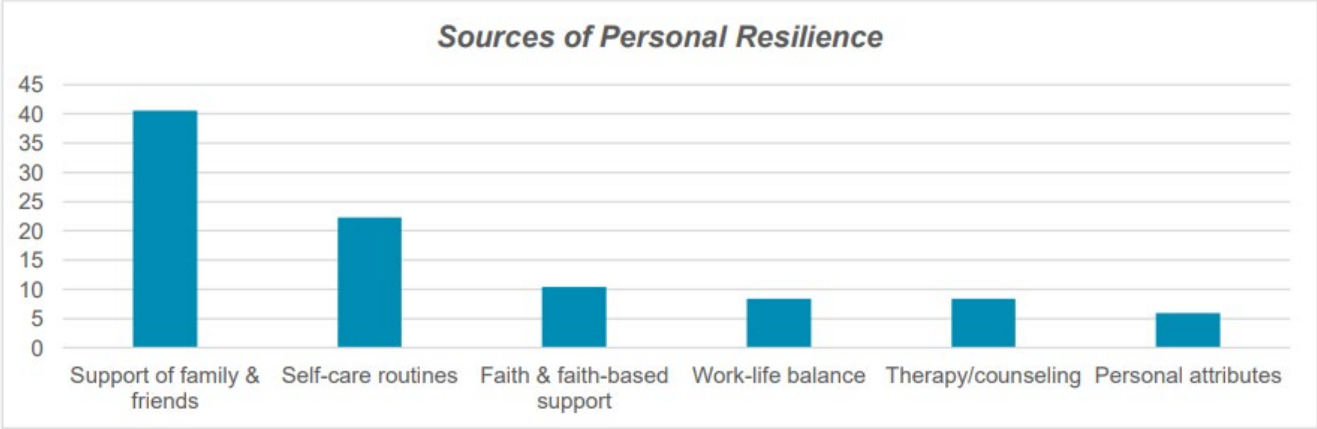
(The New Orleans Trauma-Informed Schools Learning Collaborative (2021). COVID-19 Impacts on Educator Well-Being. New Orleans, LA: Author)

New Orleans Trauma-Informed Schools Learning Collective: COVID-19 Impacts on Educator Well-Being

Personal Resilience

- Support from family and friends
- Self-care routines
- Faith and faith-based support
- Work-life balance
- Therapy and counseling
- Personal attributes
- Peer-to-peer support





(The New Orleans Trauma-Informed Schools Learning Collaborative (2021). COVID-19 Impacts on Educator Well-Being. New Orleans, LA: Author)

RAND Corporation: The Well-Being of Secondary School Principals One Year into the COVID-19 Pandemic

Participants

- 1,686 secondary principals (6th-12 grade) completed the Learn Together Survey in March/April 2021

Purpose

- Well-being of secondary principals including the impact of job-related stress

Research Questions

- What is the state of secondary principals well being nationally?
- Does principal well-being differ across demographic characteristics?
- What are principals' major job-related stressors and is it impacted by demographics or school contexts?

(Woo, Ashley and Elizabeth D. Steiner, The Well-Being of Secondary School Principals One Year into the COVID-19 Pandemic. Santa Monica, CA: RAND Corporation, 2022. https://www.rand.org/pubs/research_reports/RRA827-6.html)

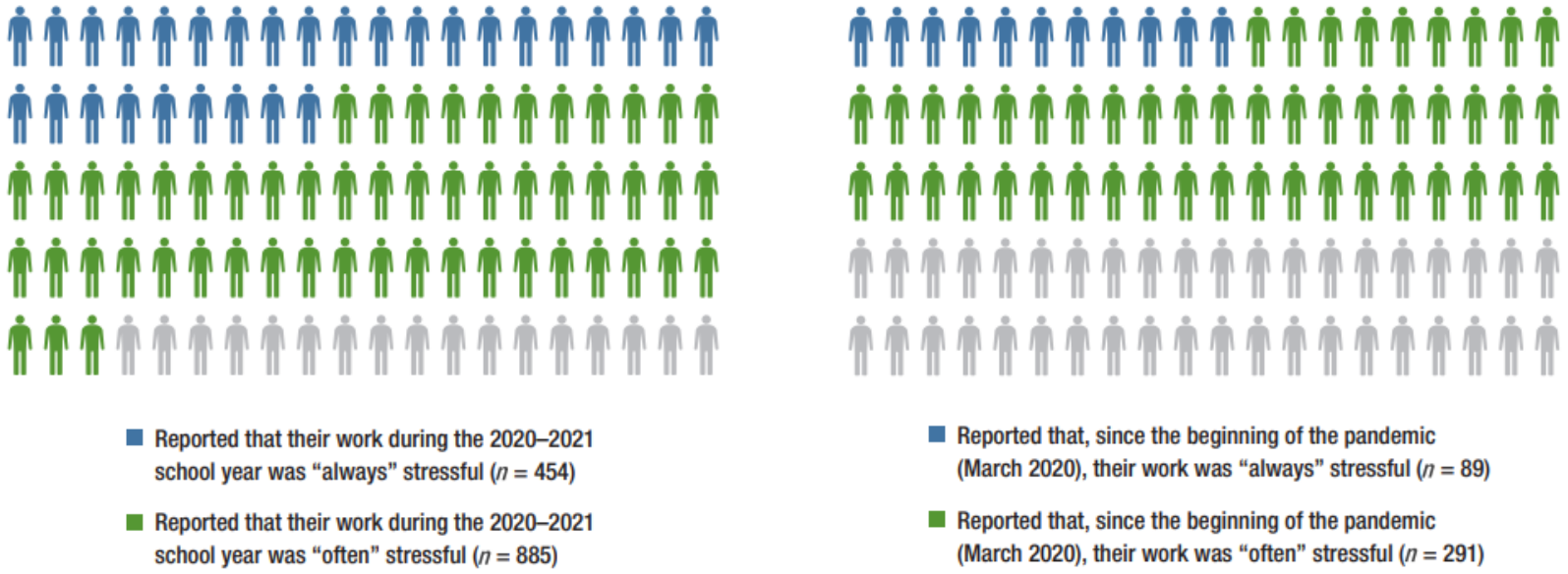
RAND Corporation: The Well-Being of Secondary School Principals One Year into the COVID-19 Pandemic

Principal Well-Being

80 percent of secondary principals reported experiencing frequent job stress

40 percent of the general US population reported experiencing frequent job stress

Percentage of Secondary Principals Who Experienced Constant or Frequent Job-Related Stress Compared with the General Population of Employed U.S. Adults



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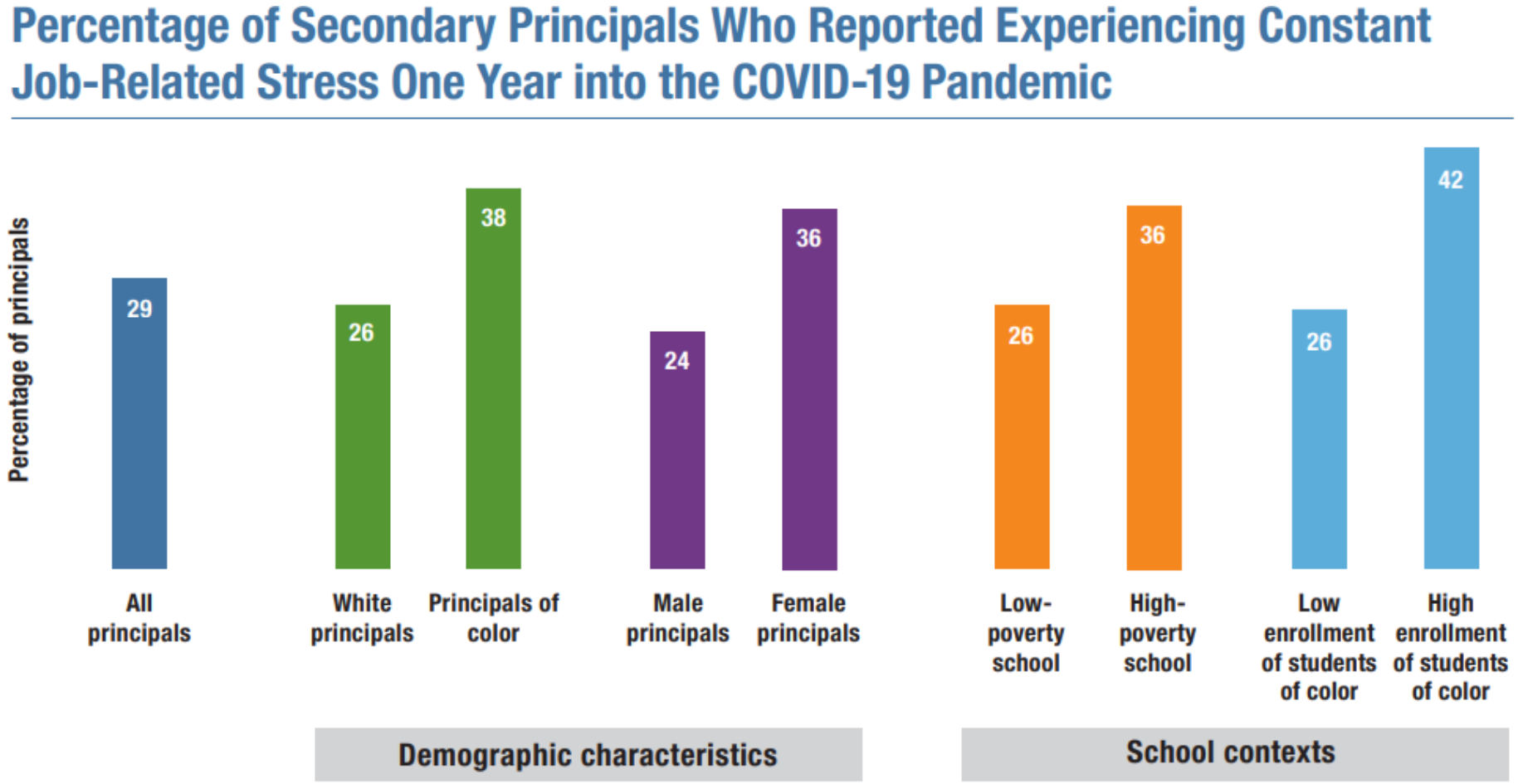
RAND Corporation: The Well-Being of Secondary School Principals One Year into the COVID-19 Pandemic

Equity Lens: Principals' Well-Being



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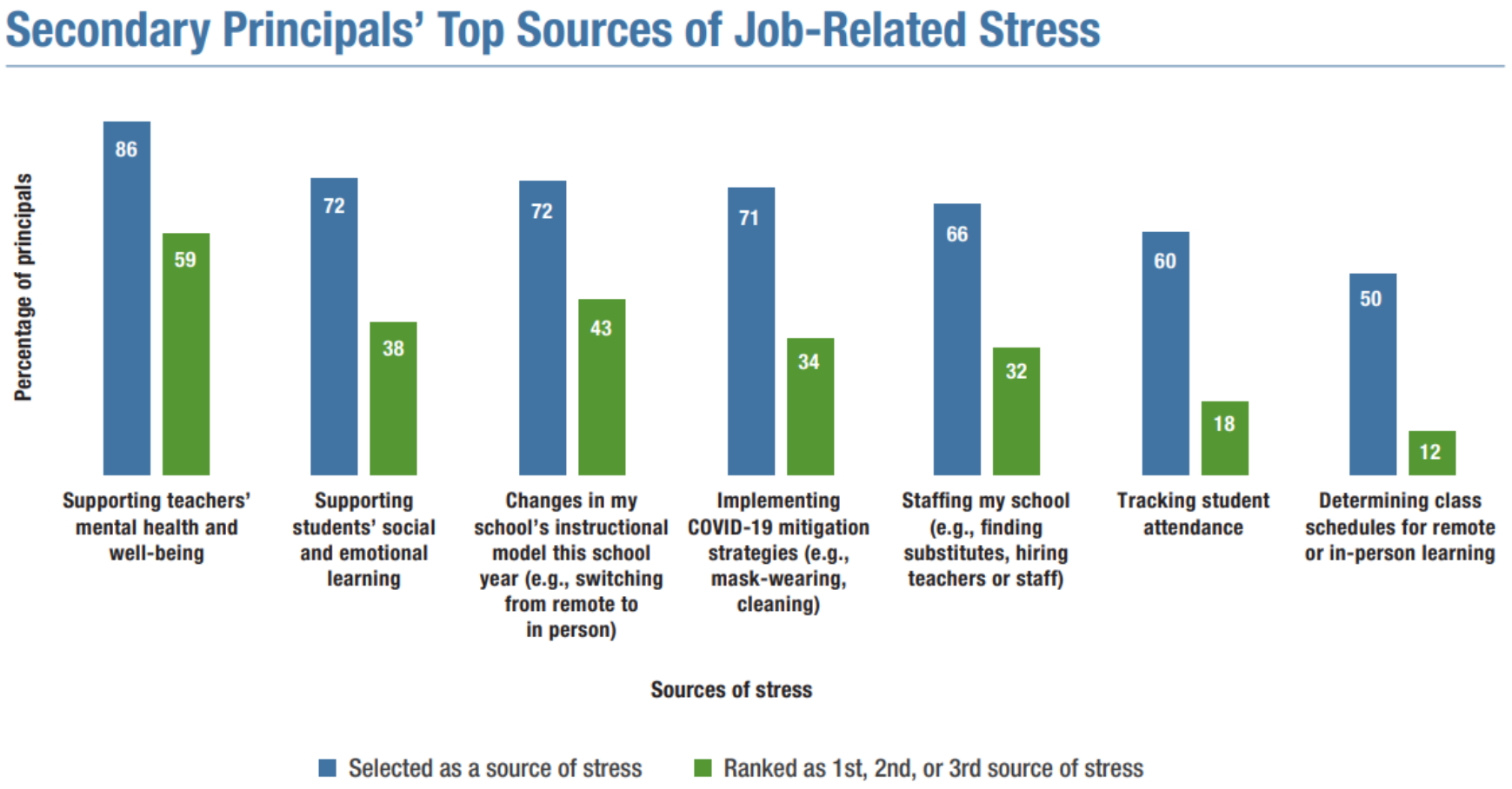
Sources of Job-Related Stress



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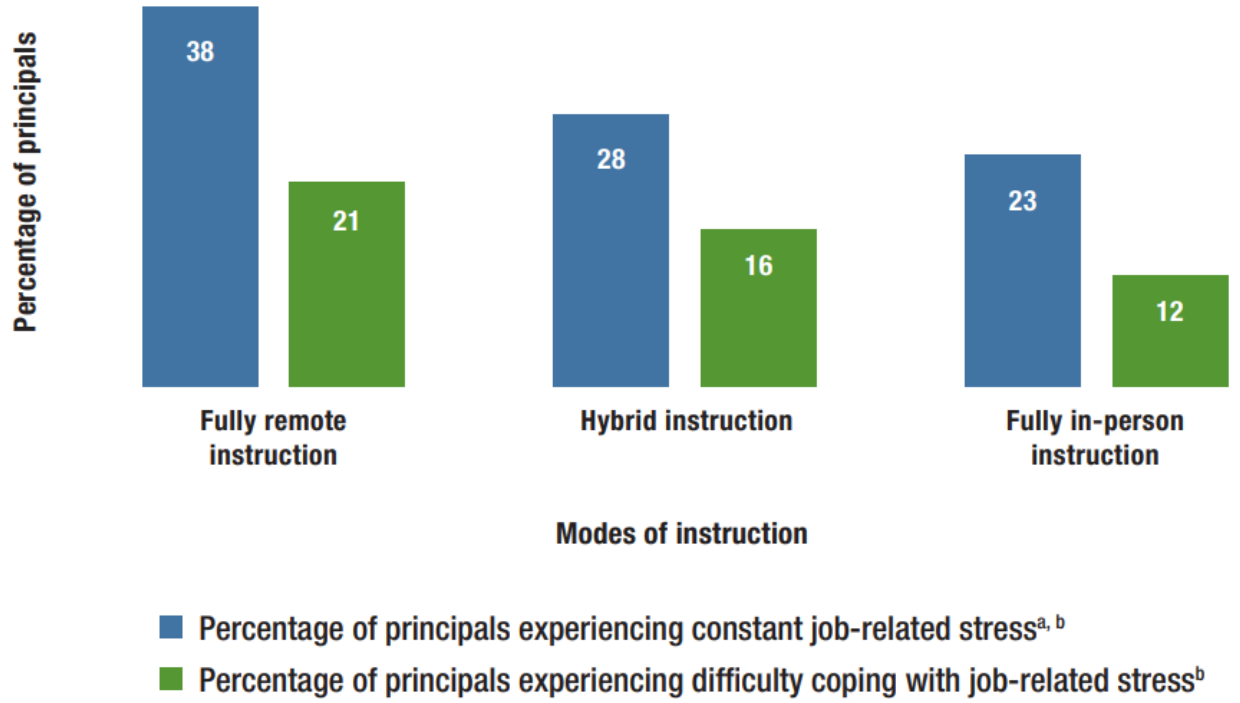
RAND Corporation: The Well-Being of Secondary School Principals One Year into the COVID-19 Pandemic

Constant Job-Related Stress and Difficulty Coping with Job-Related Stress Among Secondary Principals Whose Schools Provided Different Modes of Instruction



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RAND Corporation: The Well-Being of Secondary School Principals One Year into the COVID-19 Pandemic

Implications and Recommendations

- Support the well-being of principals especially those from historically marginalized backgrounds and who lead school with high enrollment of students of color.
- Help principals to support and improve teacher and student well-being.
- Provide guidance and resources to help principals manage operational job tasks.

(Woo, Ashley and Elizabeth D. Steiner, The Well-Being of Secondary School Principals One Year into the COVID-19 Pandemic. Santa Monica, CA: RAND Corporation, 2022. https://www.rand.org/pubs/research_reports/RRA827-6.html)

5. COVID-19 and School Mental Health: Maryland Statewide Perspectives

2021 Maryland Youth Pandemic Behavior Survey

Background

- Maryland Department of Health was unable to administer the YRBS Survey for 2020-2021 due to COVID.
- Smaller web-based survey was conducted with Maryland high school students.

Goal

- To determine how students are coping with the adverse effects of the COVID-19 pandemic on their lives

Sample

608 Maryland youth ages 14-19

- 9 percent from western region
- 28 percent from capital region
- 47 percent from central region
- 6 percent from southern region
- 10 percent from eastern shore region

Recruited on social media

Competed spring 2021 (May-June)

Question Topics

- Exercise and Physical Safety
- Tobacco Use
- Alcohol Use
- Sexual behavior
- Home Life
- Mental Health
- Violence
- COVID-19 impact

(Maryland Department of Health. [2021] Maryland Youth Pandemic Behavior Survey (YPBS-21) Survey Data)

2021 Maryland Youth Pandemic Behavior Survey

Key Findings

- 58 percent of Maryland youth (ages 14-19) struggle with their mental health during the pandemic.
- 36 percent of Maryland youth felt sad or hopeless for two weeks in a row over the past 12 months.
- 52 percent of Black/African-American youth and 75 percent of LGBTQI+ have felt significantly sadder and more hopeless compared to statewide average.
- 48 percent of Maryland youth report increased stress in the home.
- 28 percent of Maryland teens surveyed have lived with someone who was depressed, mentally ill, or suicidal.

(Maryland Department of Health. [2021] Maryland Youth Pandemic Behavior Survey (YPBS-21) Survey Data).

Protective Factors

- 82 percent of Maryland youth feel they can **talk to a peer** about their life**.**
- 73 percent of Maryland youth feel they can **share their feelings** with an adult in their family.
- 77 percent of Maryland youth have been able to **virtually socialize** during the pandemic.

(Maryland Department of Health. [2021] Maryland Youth Pandemic Behavior Survey (YPBS-21) Survey Data).

Local School District Survey

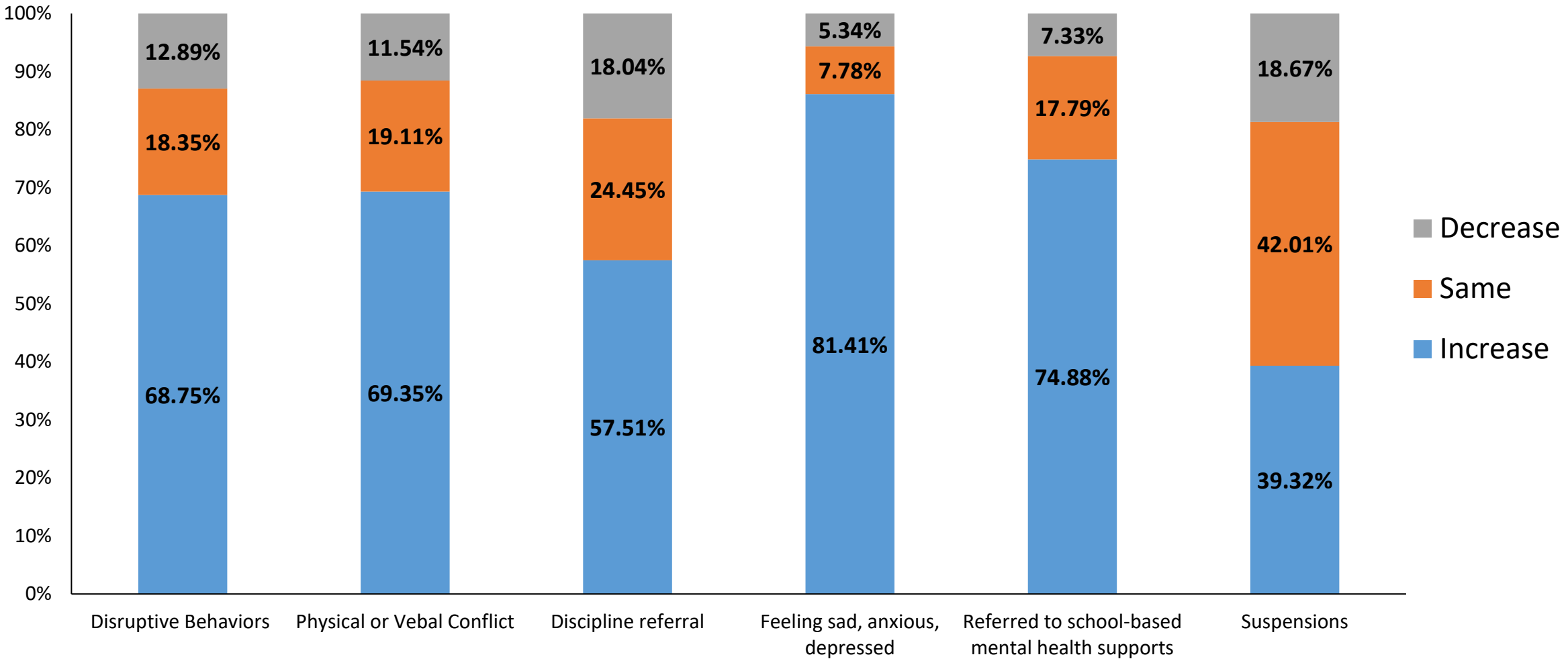
In January/February 2022, school principals across the state were asked about their perception of the current change in behaviors compared to before COVID.

- 864 school principals completed the survey (60% response rate).
- Principals were asked 6 questions (Scale of 1-5)

Survey Questions
Compared to before COVID, what is your perception of the change in the number of students who are:

- Engaging in disruptive behaviors
- Engaging in physical or verbal peer conflict
- Receiving discipline referrals
- Feeling sad, anxious or depressed
- Referred to school-based mental health supports
- Being suspended

Local School District Survey: Results



6. Maryland Statewide Mental Health Initiatives

Statewide Mental Health Initiatives

- Maryland AWARE Grant
- School-Based Health Centers
- Maryland School Mental Health Response Program
- Monitoring of online activity on school-issued devices
- Mental Health training for educators
- STOP School Violence Grant
- Adverse Childhood Experiences Grant
- Trauma informed approaches
- Suicide prevention/training for certificated staff
- Governors Commission on Suicide Prevention
- Restorative Approaches Trainings
- Positive Behavior Interventions and Supports (PBIS)
- Maryland School Mental Health Response Program

Advancing Wellness and Resiliency in Education (Project AWARE)

Background

- Grant funding from the Substance Abuse and Mental Health Services Administration awarded to state education agencies
- Maryland received $1.7 million in grant funding for October 2020-September 2025

Goals

- Increase awareness of mental health issues among school-age youth
- Train school personnel and other adults who interact with school-age youth so they can detect and respond to mental health issues
- Connect children, youth, and families who may experience behavioral health issues with appropriate services

Maryland Advancing Wellness and Resilience in Education (MD-AWARE-II)

Provides targeted, evidenced-based practices, multi-tiered system of support to improve student social, emotional and behavioral needs to three Maryland Local School Systems: Baltimore City, Caroline County, Talbot County

- Family supports through family navigators and resource library
- Trauma-Informed training for teachers, parents, school staff, and community members
- Creation of school-based support including calmness center for staff, mindfulness practices, and social skills training for students
- Policy updates to support student mental health
- Development of the Community of Practice for mental health providers, school staff, and community members

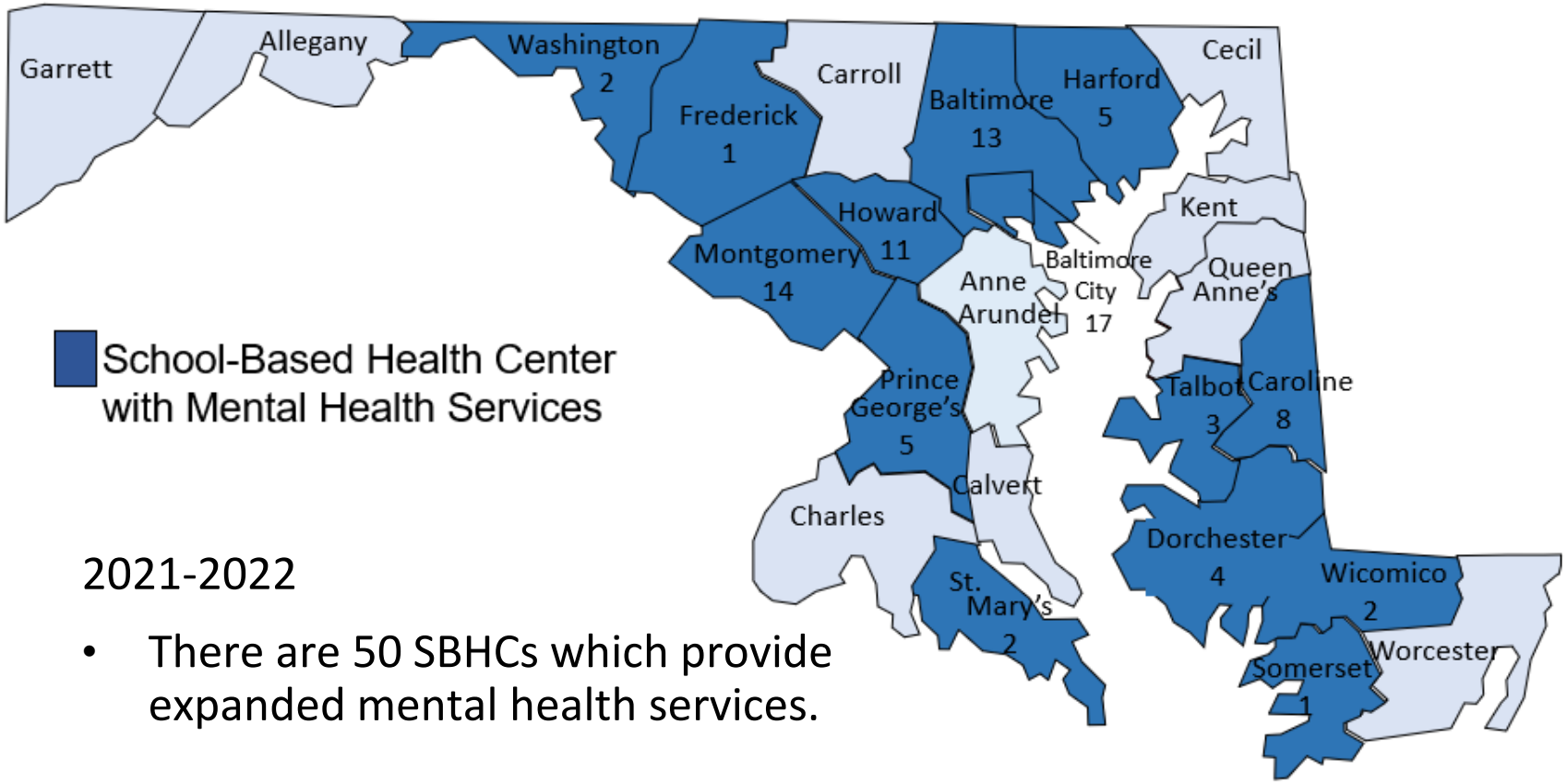
Maryland Advancing Wellness and Resilience in Education (MD-AWARE-II)

MD AWARE-II Outcomes (Year One: 2020-2021 School Year)

- 1,732 students received mental health and related mental health services
- Trained 1,445 school and community stakeholders in mental health prevention practices
- Identified pathways for 642 students and families to gain access to needed supports
- Provided trauma-informed training for educators, families and communities
- Established Maryland Education and Behavioral Health Community of Practice

School-Based Health Centers

- School-Based Health Centers (SBHCs) are primary care health centers.
- SBHCs are designed to assure that all students who are enrolled in the school have access to free, convenient, comprehensive health services.
- SBHCs are designed to reduce health disparities and overcome barriers to healthcare.
- There are 88 SBHCs centers in 14 local school districts.



2021-2022

- There are 50 SBHCs which provide expanded mental health services.

Maryland School Mental Health Response Program

The Maryland State Department of Education (MSDE) is developing the **Maryland School Mental Health Response Program** to provide timely consultation and support to school systems to address student and family mental health concerns.

Components of Response Program

- School mental health response team
- Expansion of current programs
- Sustainability
- Electronic/online hub
- Research and evaluation
- Partnerships

Maryland School Mental Health Response Team:

Core Coordination Maryland School Mental Health Response Program

- Program Director
- Project Coordinator
- Administrative Support
- Child and Adolescent Psychiatrist

Maryland School Mental Health Response Team (as of 2/14/22)

- School Nurse (1)
- School Social Workers (2)
- Behavior Analyst (1)
- System Navigators (3)

National Center for School Mental Health at the University of Maryland School of Medicine

- Dr. Sharon Hoover, Professor, Division of Child and Adolescent Psychiatry Co-Director, National Center for School Mental Health Director, NCTSN Center for Safe Supportive Schools University of Maryland School of Medicine
- Dr. Jill Bohenkamp, Assistant Professor National Center for School Mental Health Division of Child and Adolescent Psychiatry University of Maryland School of Medicine

Maryland School Mental Health Response Team

IMPLEMENTATION PLAN

December 2021-February 2022

- MD School Mental Health Response internal team training

March 2022

- Outreach to Local School System Superintendents
- Present webinar to district leaders

March 2022-April 2022

- One-on-one meeting with district leaders and their Maryland School Mental Health Team Point of Contact to begin local resource mapping and needs assessment

April 2022

- Begin support services

SUPPORT SERVICES

Consultation

- Best practices around mental, behavioral, and physical health
- Connection to: Behavior Analyst, School Social Worker, School Nurse, and System Navigator

Training

- Training available for school system and school-based staff
- Partnership with the National Center for School Mental Health at the University of Maryland
- Trainings customized to specific need

Community of Practice

- Monthly webinars on topics related to best practices around mental, behavioral, and physical health
- Designated office hours for personalized and/or group supports
- Community partner outreach

7. Mental Health Initiatives: Local School System Level

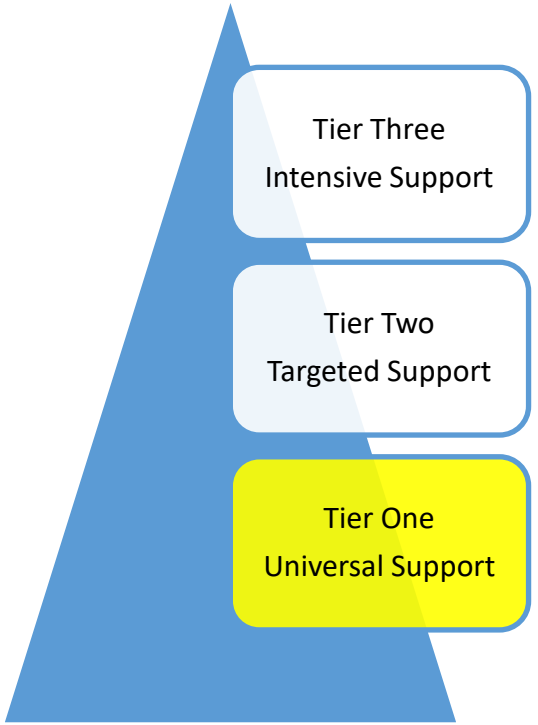
Local Initiatives: School-Level

- Student Support Teams (SST)
- School Based Health Centers - 88 in 14 local school systems
- School-Based Mental Health Providers
- School Psychologists, School Counselors, School Social Workers, Pupil Personnel Workers, School Nurses
- Teacher Mental Health Supports
- Anti-Bullying Initiatives
- Strategies for Positive School Climate
- Social-Emotional Learning Lessons
- Community Schools

Montgomery County Schools
Universal Mental Health Supports

Montgomery County Schools is partnering to provide Tier One (universal supports) to all students

- Creation of social-emotional lessons centered on the impact of COVID-19
- Implementation of suicide prevention programming: Signs of Suicide
- Adoption of the Leader In Me Framework: Student leadership and self-advocacy programming
- Presentation of personal body lessons to support student awareness and safety (K-12)



Presenter:
Michelle Palmer, Coordinator of Psychological Services

Allegany County Schools
Data Analysis, Screening and Intervention

Allegany County School Board prioritized mental health

Data Analysis of student outcomes

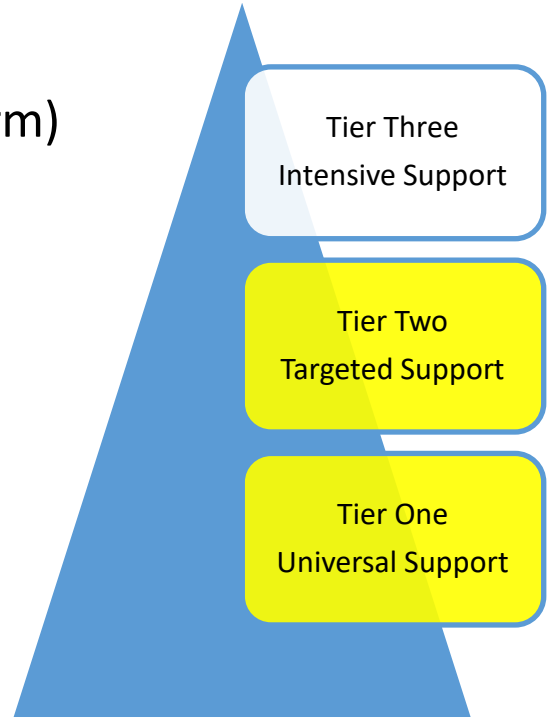
- Root-Cause Analysis
  - Trainings on Restorative Practices and Implicit Bias
- School-wide data (e.g., discipline referrals, attendance, teacher assistance form)

Universal Screening address student behavioral health

- Alignment with ongoing multi-tiered supports

Development and implementation of the Mental Health Support Team

- Importance of school-based services/resources
- Data-driven decision making
- Resource mapping
- Use of decision-making tools



Presenter: Debra Metheny, Supervisor of Special Education, Sarah Welsh, Equity and Student Outcomes Coordinator; Dr. Molly Stewart, Principal of Braddock Middle School

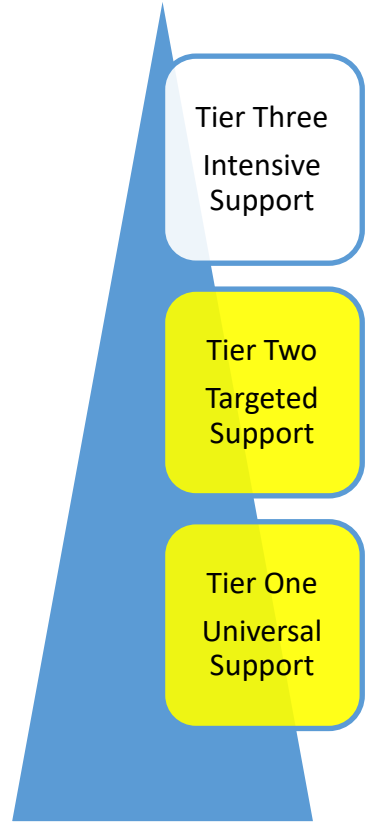
Harford County Schools
Needs Assessment, Data Analysis, Emotional Wellness Teams

Administered a Mental Health Needs Assessment

- Administered to 38,000 elementary and secondary students in 55 schools (voluntary) in late September/Early October 2021
- Each school is analyzing their data
- Collected #1 highest reported concern of students from each school

Created Emotional Wellness Teams

- Part of the school improvement plan teams (consists of school psychologist, school counselor, school nurse, and school social worker)
- Every school must have a wellness goal as part of their school improvement plan
- Needs assessment data will drive decision making regarding the school's wellness goal and actions to implement to address the goal



Presenter: Becky Green, School Counselor at Forest Hill Elementary School, Chris Yancone; Principal at North Harford Elementary School; Bernard Hennigan, Executive Director of Student Support Services

Harford County Schools: Handle with Care

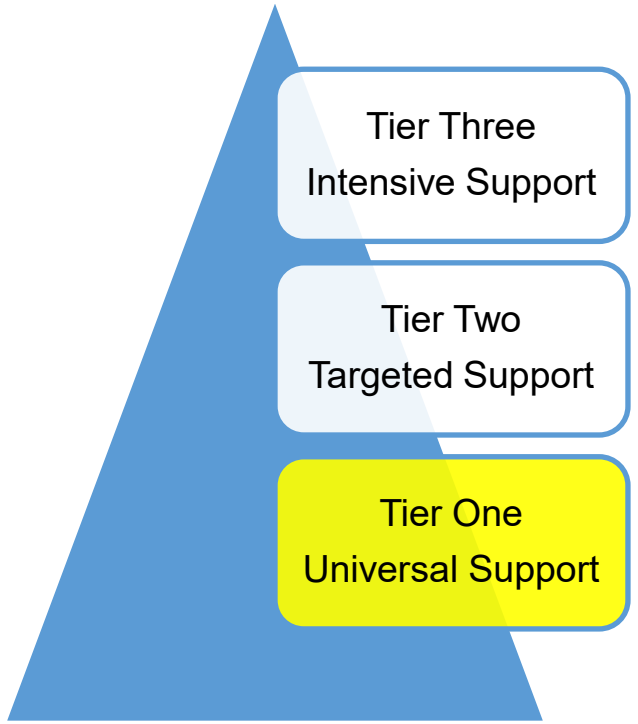
If a law enforcement officer encounters a child during a call, that child's name and three words, HANDLE WITH CARE, are forwarded to the school/child care agency before the school bell rings the next day.

The school implements individual, class and whole school trauma-sensitive curricula so that traumatized children are "Handled With Care."

If a child needs more intervention, on-site trauma-focused mental healthcare is available at the school.

2018-2021 Harford County Schools

431 Notices → 736 Students



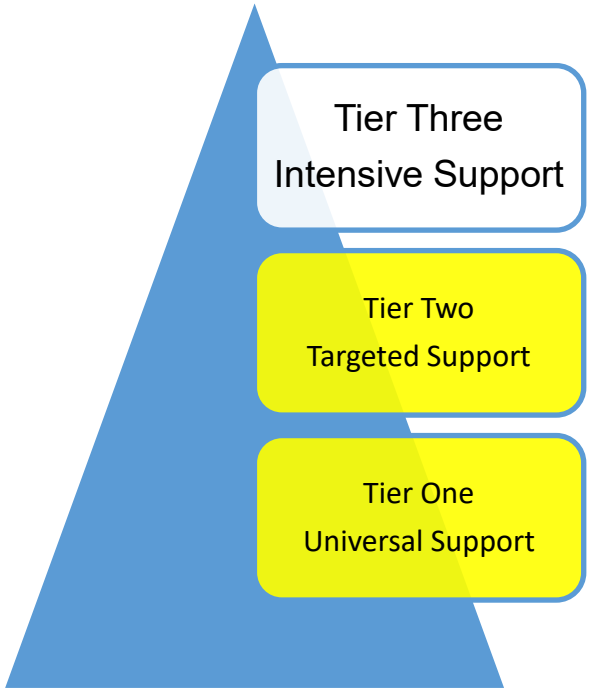
Baltimore City Public Schools
Student Wellness Support Team

Student Wellness Teams

- Increased awareness and visibility of school-based providers
- Coordinated behavioral, social and emotional student support

Strategies

- Increase awareness: Poster with QR code
- Support monthly mental health theme
- Strategies to support positive school climate
- Whole class lessons (as needed)
- Onsite and ongoing needs assessment for schools
- Behavior data analysis and intervention



Participants

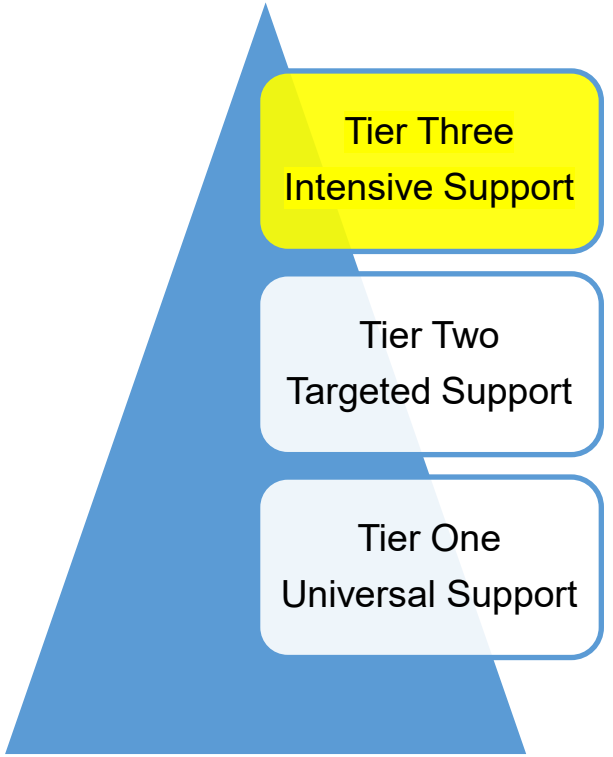
- School Psychologist, School Counselor, School Social Worker, School Nurse, School Administrator, Student wholeness specialist

Presenters: Rebecca Lee, Coordinator of School Psychological Services; Mavis Jackson, Director of College Readiness; Patricia Roberts-Rose, Coordinator of School Social Work; Kelly Carideo, Principal Beechfield Elementary/Middle School; Nick D'Ambrosio, Principal Academy for College and Career Explorations(ACCE)

Baltimore County Schools
Community Partnerships

Community and family factors impact student mental health

- 199 community mental health providers supporting schools
- 18 vendors across the school system at 135 schools
- Have implemented a robust referral system
- Focus on the partnership between families and mental health support
- Referrals come through Student Support Teams for students who have not responded to previous interventions provided by school staff

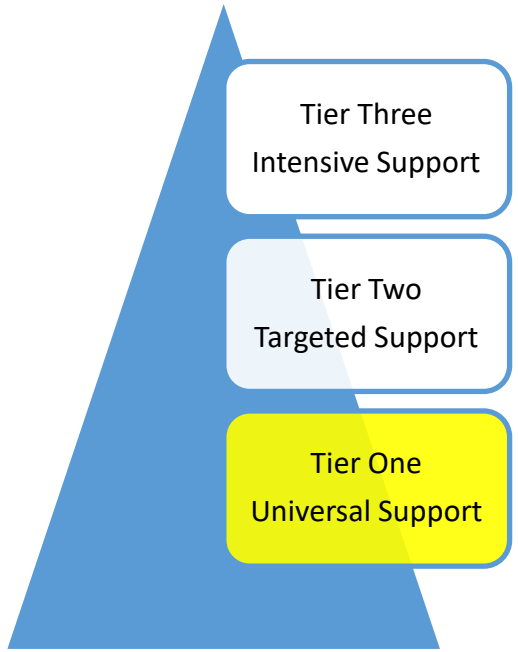


Presenter: Patricia L. Mustipher, Coordinator of School Social Work Services & MTSS

Caroline County Schools
Building Sustainability

Social-Emotional Well-Being Program at Caroline County Public Schools

- Mental health supports as a component of the 5-year strategic plan
- Comfortable cafeteria programming
- Calming centers within schools
- Family supports through the family navigators
- On-site training for family through resource sharing
- School-Based Health Centers
- Family learning session (ACEs, understanding trauma, intervention supports)
- Trauma-Informed supports



Presenters: Derek Simmons, Interim Superintendent; Nicole Fisher, Supervisor; Elizabeth Anthony, Director of Student Services/Special Programs; Cara Calloway, Mental Health Coordinator; Stella Lee Coulbourne, AWARE Program Coordinator

Lessons Learned:
School-Based Mental Health Supports

- Implement models that conduct school-wide screening and needs assessment for mental health at every grade level for students and staff
- Leverage partnerships to maximize resources and ensure sustainability of services
- Embrace innovations in service delivery (i.e., use of telehealth to provide student access to mental health counseling and physical checkups through remote networks)
- Implement social-emotional learning programs that improve a school's climate and train staff members on interventions, such as restorative practices, that can resolve conflicts and behavioral issues at school without turning to suspensions.
- Formally embed mental health goals in school improvement plans at all levels.

Tell Someone

Maryland Center for School Safety Tip Line

1-833-632-7233

Maryland School Safety Tip Line Website

schoolsafety.maryland.gov/Pages/Tipline.aspx

National Suicide Prevention Hotline

1-833-632-7233

National Suicide Prevention Lifeline Website

suicidepreventionlifeline.org

SAMHSA National Helpline

(Substance Abuse and Mental Health Services Association)

1-800-662-4357

SAMHSA's National Helpline Website

samhsa.gov/find-help/national-helpline