

Challenges for Schools

Kathryn L. Buch, DPI School Psychology Consultant

Presentation at Annual State Superintendent's Conferences on Special Education and Pupil Services Leadership Issues, 2014

- There are insufficient pupil services personnel to meet student counseling needs.
- Special education programs are designed to meet the learning needs of students with disabilities, but not always their mental health needs per se.
- Students with more severe and often untreated mental health disorders are coming to school, at younger ages, sometimes with severe behavioral consequences.
- Medication and treatment regimens are sometimes complex, interrupting the school educational day for administration of medications or outside counseling appointments.
- Lack of professional preparation for school pupil services providers and other school personnel on current mental health issues, e.g. trauma informed care in the school setting, limits their efficacy to service students with severe emotional disturbance.

School-Employed Mental Health Providers

Pupil Services	WI Pupil Services Ratios 2012 (Data from Department of Public Instruction)	National Organization Recommendations
School Counselors	466:1	250:1
School Psychologists	956:1	500-700:1
School Social Workers	1,050:1	250:1
School Nurses	1,596:1	750:1*

*750 to 1 for students in the general population, 225 to 1 in the student populations requiring daily professional school nursing services or interventions, 125 to 1 in student populations with complex health care needs, and 1 to 1 maybe necessary for individual students who require daily and continuous professional nursing services (National Association of School Nurses, 2010)

Wisconsin Youth Risk Behavior Survey 2013

Mental Health Fact Sheet

Suicide	Mental Health	Other Behaviors
13% Seriously considered suicide	25% Reported feeling sad or hopeless for two weeks straight or more	17% Reported harming themselves without wanting to die such as cutting or burning
12% Made a plan about how they would attempt suicide	83% Of gay, lesbian, or bisexual students reported their mental health was not good on one or more of the past 30 days vs. 54% of their heterosexual peers	9% Reported being physically hurt on purpose by someone they were dating or going out with in past year
6% Of teens attempted suicide	6% Did not go to school because they felt unsafe	23% Have been bullied on school property in past year
3% Of teens who attempted suicide were treated for injuries, poisoning or overdose as a result	74% Have at least one adult in school that they can talk to if they have a problem	74% Feel like they belong at their school

Based on the Wisconsin 2013 High School Youth Risk Behavior Survey

For more information see: http://sspw.dpi.wi.gov/sspw_yrbsindx

Questions contact:

Tracy Herlitzke, CESA #4, 608-786-4838 or therlitzke@cesa4.k12.wi.us

Statistics

1 of 10 Adolescents are Emotionally Impaired

Knopf et al. (2008)

- In Wisconsin, 26,000 high schoolers would be considered emotionally impaired
WI DPI (2014A)
- The most common disorders among adolescents include
 - Depression
 - Anxiety disorders
 - Attention-deficit/hyperactivity disorder
 - Substance use disorder

60-90% of children with mental health disorders do not receive treatment

In Wisconsin that means between 104,000 - 157,000 school-age children with a diagnosable mental health disorder do not receive treatment yearly

Of the 10-40% who DO get treatment

About ¾ of children & youth receiving mental health services get these services only in school

Burns et al. (1995)

Improved student mental health promotes better learning

- Addressing student's mental health is associated with positive school outcomes
 - Increased academic achievement
 - Decreased problem behaviors
 - Improved school & classroom climate
- School mental health promotion helps create a better learning environment
- School mental health programs & services improve teaching conditions

Hurwitz & Weston. July 2010. *Using Coordinated School Health to Promote Mental Health for All Students.*