



## Wisconsin State Legislature

FOR MORE INFORMATION  
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February 5, 2016

### **The Impact of Mental Illness in Schools**

Lately, when I talk with school superintendents, I hear about something many people would not think of as a school issue – the mental health of children and how it impacts learning. The more I talked to these educators, the more I understood the impact that students' mental health has on their learning, their classmates' learning, teachers and the school environment. These superintendents told me they are spending more time and resources on mental health care for students who are not in a special education program than ever before. After hearing from them, I decided to hold an informational hearing before the Senate Education Committee to learn more about what schools around the state are facing and what they are doing to meet the needs of their students.

According to the National Institutes of Health, approximately 20 percent of children between the ages of 13 and 18 experience a mental health disturbance in any given year. In Wisconsin, that could mean as many as 174,000 school age children. One of the surprising things we learned at the hearing is that this is not an issue that only middle and high school students experience.

According to a national report, an estimated 13 percent of children as young as 8 years old face this same challenge. We heard stories of elementary school students, some as young as kindergarten, coming to school with significant mental health challenges.

One of the problems expressed was the shortage of mental health professionals in rural areas of the state. These shortages mean people often wait longer times to get an initial appointment with a mental health provider and have longer wait times between appointments. We also heard about

the struggles many children face outside of school, stories of abuse and neglect that make focusing on schoolwork almost impossible.

We heard the story of a boy in kindergarten who lived with his mom, siblings, and a series of abusive men. Through tears, the kindergarten teacher told us how the child withdrew when his home situation worsened, hiding under the teacher's desk and hitting his head on the side of it. She told us how much she wanted to help this student, as well as address the impact his behavior had on the other children in the class and the impact it had on his own learning.

This is not a problem that schools can tackle alone. Most school personnel are not trained in dealing with mental health problems. At the informational hearing, we heard from schools that have partnered with medical professionals in their community to craft programs that bring mental health care providers to schools to help students in need, as well as help teachers learn how to work with these children in their classroom. We heard about successful partnerships that include institutions of higher education and non-profit organizations like the Boys and Girls Club. Some of the programs bring mental health professionals into schools to work directly with children, while other programs work with teachers to educate them and help find ways to work with children in their classrooms.

Some committee members raised questions about why these services are being provided in schools, and wondered why schools aren't focused solely on academics? What we've learned is that to teach a child, first you have to reach the child. In addition, school-based services remove barriers that can impede care. For instance, parents do not have to take time off work or find transportation for an appointment. Students and their families may also be more accepting of care that is provided through the school because it is a place they trust. We heard that students miss less class time and are less likely to miss appointments that are held at the school.

There is a bill in the legislature, Assembly Bill 664 that is an attempt to make it easier for mental health professionals to provide services in schools. Under current law, the state requires mental health clinics to establish a school branch office if their mental health professionals provide any sort of mental health service at a school which the Department of Health Services then conducts

on-site reviews of these offices. This has become an administrative burden because mental health professionals are often in a school for only a few hours a week using school space, but do not keep an office at a school. In addition, the requirement that mental health services at the school must be provided through a branch office means that licensed therapists who practice independently are not able to work at schools. This bill allows licensed treatment professionals to provide mental health services in schools without establishing a branch office in the school.

This bill is just one way that the state can reduce red tape and improve the accessibility of mental health services for students, but it is not the only way to help students who face mental health issues. I look forward to working with school district administrators and mental health professionals to find new ways to better reach students with mental health issues so that they can focus on learning and succeeding in school.

*If you have any questions about any of the information I have included or if you have suggestions on other topics or issues you would like learn more about, you may call my office toll-free at (800) 991-5541; write me at P.O. Box 7882, Madison, WI 53708; or e-mail me at: [Sen.Olsen@legis.state.wi.us](mailto:Sen.Olsen@legis.state.wi.us). You can also sign up for our newsletter at our website: <http://www.legis.state.wi.us/senate/sen14/news/index.htm>.*

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