

A Center Report

We won't Argue Against Adding More Counselors, BUT ...

Addressing Student Mental Health Concerns Involves Much More than Increasing the Number of Mental Health Providers

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The COVID-19 pandemic has underscored that schools must play a greater role in addressing mental health concerns. In reaction, some policy makers are rushing to increase mental health staff in schools. A stated goal is to have a mental health professional in all schools. Given the long-standing short-fall in every category of student/learning support staff at schools, such a goal is being widely lauded. In the long-run, however, this one faceted approach is a marginal way for addressing the complex array of problems students and their schools are experiencing in the wake of COVID-19. This report highlights the need for schools to rethink their current approaches to addressing emotional, behavioral, and learning problems. We outline how to evolve the current emphasis on a multi-tiered system of supports (MTSS) into a unified, comprehensive, and equitable system of school/community supports. And we offer some first steps for moving ahead.

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It is evident from the many media reports that policy makers are trying to increase mental health staff in schools.

For example, here are two recent media headlines:

>Michigan schools hiring hundreds of mental health staffers

>Plan to increase mental health staff in schools - 250 million measure would seek to add 10,000 clinicians across state [California]

While personnel increases in smaller states will be less dramatic, the tendency in most places is the same, namely to add a few more "mental health" staff. (At first glance, adding 10,000 in California appears like a lot, but there are a little over 10,000 schools in the state.)

Given the long-standing recognition about the short-fall in every category of student/learning support staff at schools, schools welcome any increase. And the COVID-19 pandemic certainly has underscored that schools must play a greater role in addressing mental health concerns.

The fundamental question is: ***How schools can best play that role?***

The answer involves much more than adding more mental health providers.

In answering this question, policy making requires consideration of matters such as:

- In addition to *reacting* to students' emotional problems, what more can a school do to *prevent* emotional and behavioral and learning problems?
- Schoolwide and in classrooms, what does a school need in addition to focusing on mental health concerns if it is to be more effective in addressing barriers to learning and teaching and reengaging disconnected students?
- How can schools use whatever personnel and other resources the school and community can muster to develop a system of student/learning supports for meeting the needs of all rather than just a relatively few students?
- What personnel will be still be available after the pandemic relief funds are used up, and schools are faced with the anticipated "fiscal cliff?"

The Need to Escape Old Thinking

As in the past, the increasing concern for students' mental health is generating short-term policies focused on one facet of the complex array of problems students and their schools are experiencing.¹ And in doing so, policy makers are drawing on old and simplistic ways of understanding the role schools need to and can play with respect to mental health.

For example, current policy discussions are dominated by calls for

- >ensuring there is a mental health professional in every school (e.g., a counselor, psychologist, social worker)
- >using schools as an integrated component of the mental health services delivery system
- >increasing the emphasis on mental health education
- >expanding the school's focus on social and emotional learning.

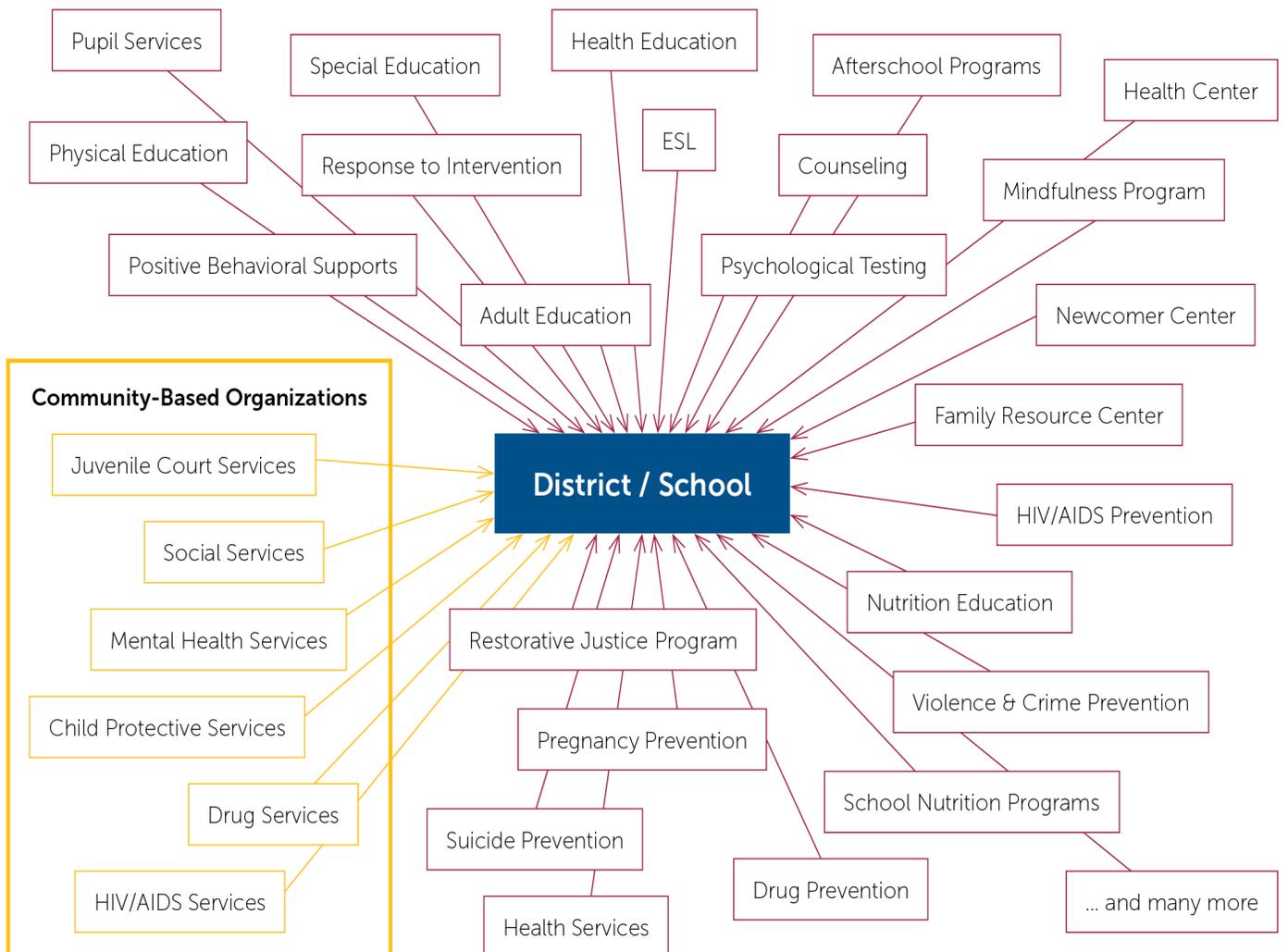
All of these are relevant, but insufficient as a way to fully embed mental health in schools, especially given everything schools need to do in the wake of COVID-19.

Schools Need to and Can Evolve What They are Already Doing

While the causes and numbers vary, every school has students who are not doing well and all schools devote resources to address this reality. Some strategies are designed to reach the entire student body, others are targeted interventions that address discrete problems, and a few are specialized services that can only be provided to a relatively small number of students.²

For a variety of reasons, schools differ with respect to the student and learning supports they have in place. Common, however, is the fragmented and disorganized way supports are developed and implemented. See Figure 1 for a depiction of the piecemeal and marginalized approaches districts often take and that schools draw upon to provide student and learning supports. Add any others that you know about.

Figure 1. A Fragmented Approach to Supporting Student Well-Being



This disjointed approach to addressing emotional, learning, and behavior problems has long been of concern – as reflected in policy initiatives calling for integrated and coordinated student supports.³ Heightened concern can be expected as student needs and barriers increase in the wake of the pandemic and eventual recovery efforts; because school budgets are always tight, cost-effectiveness is a constant consideration.

In some schools, principals have reported that up to 25 percent of their budget is consumed in efforts to address barriers to learning and teaching. Analyses of current approaches to providing student and learning supports indicate limited results and redundancy in resource use. Rivalry for sparse resources also has produced counterproductive competition among support staff and with community-based professionals who link with schools. Each new initiative compounds the competition. The way Community Schools are being adopted also often contributes to the organizational disarray and dysfunction.⁴

And, the way in which relief funds are being used to address mental health concerns tends to perpetuate approaches that are too limited to effectively deal with the multifaceted and complex problems schools and students have and continue to experience regularly .

Addressing the pervasive and complex barriers that impede student learning requires a systemwide approach that comprehensively supports whole-child development and learning.

Moving Forward

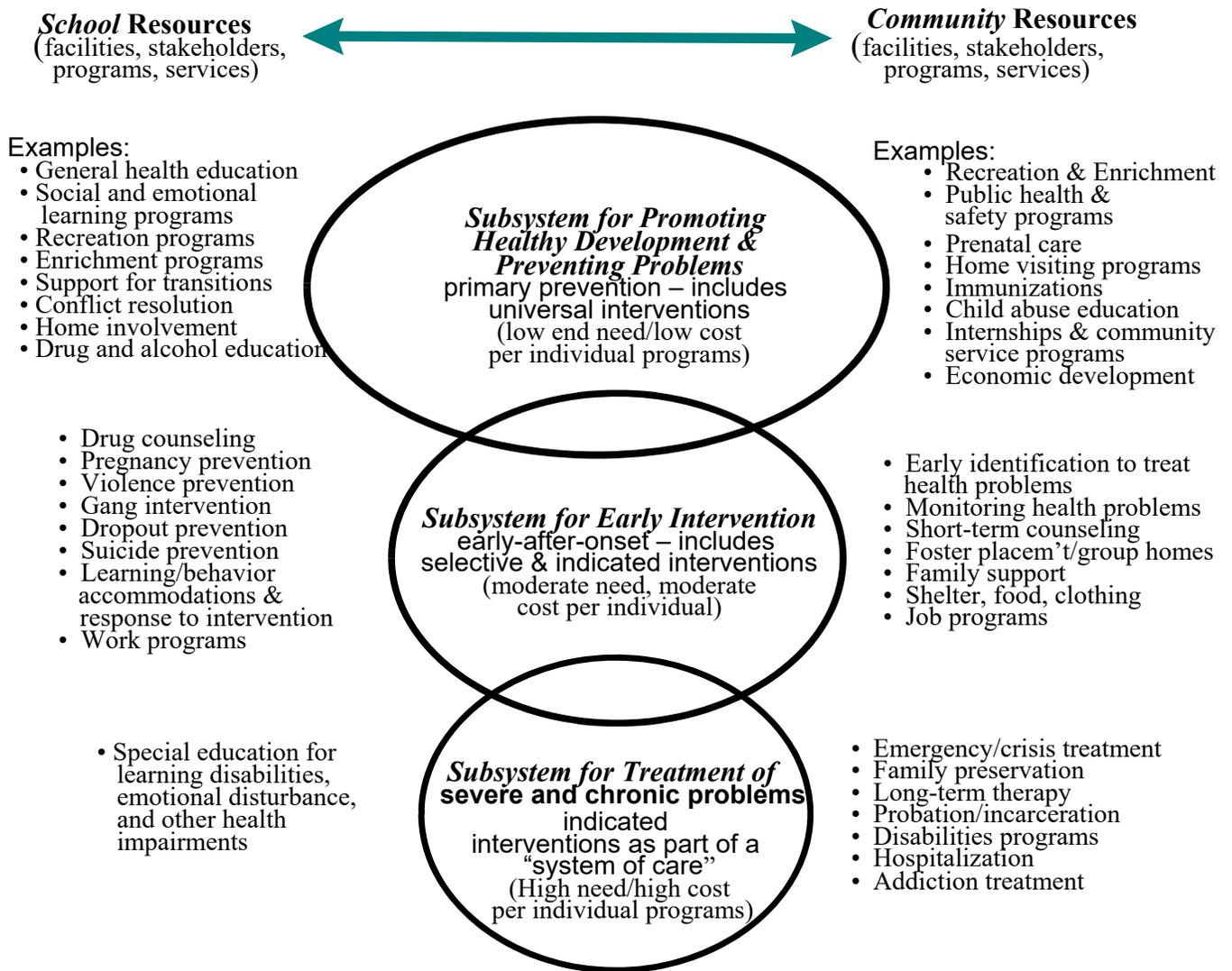
Adoption of a multi-tiered system of supports (MTSS) is promoted as a comprehensive framework to guide local educational agencies (LEA) in aligning “academic, behavioral, and social-emotional learning in a fully integrated system of support for the benefit of all students.”⁵ MTSS and its pyramid depiction does provide a good starting point for broadly framing student and learning supports. As widely conceived, however, the multi-tier model needs to be expanded to become an organizing framework for developing a unified, comprehensive, and equitable system for addressing barriers to learning and teaching.⁶ Figure 2 portrays such a continuum in ways that moves the multi-tier system several steps forward.

Evolving MTSS

As illustrated, the intervention continuum consists of intertwined sets of subsystems. The intent at each level is to braid together a wide range of school and community (including home) resources. The subsystems focus on promoting whole-child development and prevention, identifying and addressing problems as soon as they arise, and providing for students with severe and chronic problems.

The subsystems are illustrated as tapering from top to bottom. This is meant to convey that if the top subsystem is designed and implemented well, the number of students needing early intervention are reduced and fewer need “deep-end” therapeutic interventions.

Figure 2. Intervention Continuum: Interconnected Subsystems



The simplicity of the tiered presentation as widely adopted by schools is appealing and helps underscore differences in levels of intervention. However, focusing simply on levels of intervention, while essential, is insufficient. Three basic concerns about such a formulation are that it mainly stresses levels of intensity, does not address the problem of systematically connecting interventions that fall into and across each level, and does not address the need to connect school and community interventions. As a result, it has done little to promote the type of intervention framework that policy and practice analyses indicate is needed to guide schools in developing a unified and comprehensive system of student and learning supports. In contrast, Figure 2 illustrates that intervention tiers/levels are better conceived as a set of interconnected, overlapping subsystems that pulls together school and community resources.

Organizing Domains of Support

A system of student and learning supports requires more than conceiving a continuum of intervention: it also is necessary to organize interventions cohesively into a circumscribed set of well-designed and delimited domains that reflect a school's daily efforts to provide student and learning supports in the classroom and schoolwide.

Our analysis of typical “laundry lists” of district programs and services used to address barriers to learning and teaching led us to group them into six domains. In organizing the activity in this way, it becomes clearer what supports are needed in and out of the classroom to enable student learning.

The six domains are:

- *Embedding student and learning supports into regular classroom strategies to enable learning and teaching* (e.g., working collaboratively with other teachers and student support staff to ensure instruction is personalized with an emphasis on enhancing intrinsic motivation and social-emotional development for all students, especially those experiencing mild to moderate learning and behavior problems; reengaging those who have become disengaged from instruction; providing learning accommodations and supports as necessary; using response to intervention in applying special assistance; addressing external barriers with a focus on prevention and early intervention);
- *Supporting transitions*, including assisting students and families as they negotiate the many hurdles related to reentry or initial entry into school, school and grade changes, daily transitions, program transitions, accessing special assistance, and so forth;
- *Increasing home and school connections and engagement*, such as addressing barriers to home involvement, helping those in the home enhance supports for their children, strengthening home and school communication, and increasing home support for the school;
- *Responding to – and, where feasible, preventing – school and personal crises* (e.g., by preparing for emergencies, implementing plans when an event occurs, countering the impact of traumatic events, providing followup assistance, implementing prevention strategies, and creating a caring and safe learning environment);
- *Increasing community involvement and collaborative engagement* (e.g., outreach to develop greater community connection and support from a wide range of resources – including enhanced use of volunteers and developing a school – community collaborative infrastructure); and
- *Facilitating student and family access to special assistance*, first in the regular program and then, as needed, through referral for specialized services on and off campus.⁷

Supporting students in- and out-of- classrooms

Continuum + Domains

As illustrated in Figure 3, combining the continuum and the six domains of supports provides an intervention framework that can guide development of a unified and comprehensive system of learning supports. This framework is designed as an essential facet of a school's accomplishing its instructional mission, not an added agenda to that mission.

The matrix provides a guide for organizing and evaluating a system of student and learning supports, and provides a tool for

- >mapping existing interventions
- >clarifying which are evidence based
- >identifying critical intervention gaps and
- >analyzing resource use with a view to redeploying resources to strengthen the system.

The continuum and domains provide a framework for a unified, comprehensive, and equitable system of supports

As the examples illustrate, the framework can guide efforts to embed supports for compensatory and special education, English learning, psychosocial and mental health problems, use of specialized instructional support personnel, adoption of evidence-based interventions, integration of funding sources, and braiding in of community resources. The specific examples in the matrix are illustrative of those that schools already may have in place.⁸

Using the framework to map and analyze resources provides a picture of system strengths and gaps. Priorities for filling gaps can then be included in strategic plans for system improvement; outreach to bring in community resources can be keyed to filling critical gaps and strengthening the system.

Clearly, the intervention domains can be conceived in other ways. The point for emphasis here is that the many activities schools pursue along the intervention continuum can and need to be further organized.

In sum, the intent is to unify and develop a comprehensive and equitable intervention system for addressing barriers to learning and teaching as well as for reengaging disconnected students. Establishing such a system requires coalescing ad hoc and piecemeal policies and practices. Doing so will help end the fragmentation of student and learning supports and related system disorganization, and will provide a foundation for weaving together whatever resources a school has with whatever a community is doing to confront barriers to learning and teaching.

Implementation of a unified, comprehensive, and equitable system of learning supports as a primary school improvement component is essential to the focus on whole child, whole school, and whole community (including fostering safe schools and the emergence of a positive school climate).

Properly implemented, this component can increase the likelihood that schooling is experienced as a welcoming, supportive set of transactions that accommodates diversity, prevents problems, enhances youngsters' strengths, and is committed to assuring equity of opportunity for all students to succeed.⁹

Figure 3. Intervention Framework for a Unified, Comprehensive, and Equitable System of Supports

		Integrated Intervention Continuum (levels)		
		Subsystem for promoting healthy development & preventing problems	Subsystem for early intervention	Subsystem for treatment ("system of care")
Categories of Classroom & Schoolwide Student and Learning Support Domains	Classroom-based learning supports	e.g., personalized instruction	e.g., special assistance in the classroom provided as soon as a problem arises	e.g., referral for specialist assistance
	Supports for transitions	e.g., welcoming newcomers and providing social and/or academic supports	e.g., when problems arise, using them as teachable moments to enhance social-emotional development and learning	e.g., personalized supports for students returning to school from incarceration
	Home involvement & engagement	e.g., outreach to attract and facilitate participation of hard-to-reach families	e.g., engaging families in problem-solving	e.g., support services to assist families with addressing basic survival needs
	Community involvement & collaborative engagement	e.g., outreach to recruit volunteers	e.g., developing community links and connections to fill critical intervention gaps	e.g., outreach to reengage disconnected students and families
	Crisis response & prevention	e.g., promoting positive relationships	e.g., immediate response with physical and psychological first aid	e.g., referral for follow-up counseling
	Student & family special assistance	e.g., enhancing coping and problem-solving capability	e.g., providing consultation, triage, and referrals	e.g., ongoing management of care related to specialized services
<i>Accommodations for differences & disabilities</i>				<i>Specialized assistance & other intensified interventions (e.g., special education, school-based interventions)</i>

Some First Steps

Moving forward proactively to plan and develop a more effective system for addressing barriers to learning and teaching requires a mechanism that is dedicated to making it happen.

- So a first proactive step is to ***Establish a Learning Supports Leadership Team***
(See *What is a learning supports leadership team?*
<http://smhp.psych.ucla.edu/pdfdocs/resource%20coord%20team.pdf>)
- The teams first actions involve
 - (a) mapping existing resources for addressing barriers to learning and teaching and reengaging disconnected students
(See *Mapping & Analyzing Learning Supports*
<http://smhp.psych.ucla.edu/summit2002/tool%20mapping%20current%20status.pdf> ;
also see *An Aid for Initial Listing of Current Resources Used at a School for Addressing Barriers Learning and Teaching*
<http://smhp.psych.ucla.edu/pdfdocs/listingresources.pdf>)

- (b) analyzing what's working, what needs strengthening, and critical gaps
 - (c) developing a set of prioritized recommendations for moving toward a unified, comprehensive, and equitable system of student/learning supports
 - (d) presenting the recommendations for approval.
- After a set of proposed improvements are approved, the next step is to establish a workgroup to develop a strategic action plan that details the who, what, and when of the steps forward.
 - Then, assign the Learning Supports Leadership Team to guide implementation of the strategic plan.¹⁰

After taking some first steps, see the Center resources for aids related to institutionalizing, replicating to scale, and sustaining the system.¹¹

Concluding Comments

Given the relatively small pool of resources available to so many schools and the range of students in need, this is a critical time for schools to be proactive in

- >meeting immediate concerns
- and*
- >rethinking how they are addressing barriers to learning and teaching
- and*
- >improving their approach to reengaging disconnected students and their families.

The essential goal is to transform student/learning support so that the sparse resources available can be deployed in more potent ways to address the wide range of factors interfering with school learning and teaching. The focus of such system (re)building is on

- >unifying the district's student/learning supports
- and then*
- >weaving in whatever resources the community and those at home can add.

It is into this type of system that the many ways mental health promotion, prevention, and response can most comprehensively be embedded. Without transforming student/learning supports, just adding more mental health staff in schools will contribute to the ongoing fragmentation and marginalization of efforts to cope with the increased number of learning, behavior, and emotional problems schools are confronting.

Maximizing the benefits of mental health in schools requires an ambitious agenda for transforming student/learning supports. The goal is to develop a unified, comprehensive, and equitable system for addressing barriers to learning and teaching and reengaging disconnected students (not just adding another staff member to provide mental health services). Achieving such a goal is vital to enhancing equity of opportunity for all students at school and beyond.

The COVID-19 pandemic and growing concerns about social justice mark a turning point for how schools, families, and communities address student and learning supports. Those adopting the prevailing MTSS framework have made a start, as have the initiatives for community schools, integrated student supports, and school-based health centers. Given the growing challenges, however, schools need to develop and implement a more transformative and comprehensive approach. The prototype for addressing barriers to teaching and learning highlighted in this brief is such an approach.

We know from experience how hard it is to achieve the outlined policy and practice changes in a district. And, given the scale of public education, the degree of transformative system change proposed here gives rise to many complications. For example, the approach calls for a major reworking of the operational and organizational infrastructure for the school, the family of schools, and the district, as well as for school, family, and community collaboration. It also calls for enhancing in-classroom supports by retooling what ESSA labels as specialized instructional support personnel (e.g., student and learning support personnel – psychologists, counselors, social workers, nurses, Title I staff, special educators, dropout/graduation support staff, etc.). In particular, the jobs of these personnel need to be modified to include working collaboratively with regular teachers in classrooms (in person and online) for part of each day. Improving student and learning supports in classrooms requires such collaboration, which is essential to ending the myths and expectations that teachers can do it all and can do it alone.

Certainly, the challenges are daunting. But maintaining the status quo is untenable, and just doing more tinkering will not meet the need.

Endnotes

¹ See, for example, Terada, Y. (2020). COVID-19's impact on students' academic and mental well-being. *Edutopia*. edutopia.org/article/covid-19s-impact-students-academic-and-mental-well-being;

Weir, K. (2020). Safeguarding student mental health. *Monitor on Psychology*, 51(6). <http://apa.org/monitor/2020/09/safeguarding-mental-health>

² Adelman, H.S., & Taylor, L. (2011). Expanding school improvement policy to better address barriers to learning and integrate public health concerns. *Policy Futures in Education*, 9(3), 431–436.

<https://journals.sagepub.com/doi/10.2304/pfie.2011.9.3.431> ;

Restructuring California Schools to Address Barriers to Learning and Teaching in the COVID 19 Context and Beyond http://edpolicyinca.org/sites/default/files/2020-11/pb_adelman_nov2020.pdf

³ Anderson Moore, K., Caal, S., Carney, R., Lippman, L., Li, W., Muenks, K., Murphey, D., Princiotta, D., Ramirez, A. N., Rojas, A., Ryberg, R., Schmitz, H., Stratford, B., & Terzian, M. A. (2014). *Making the grade: Assessing the evidence for integrated student supports*. Child Trends.

<http://childtrends.org/publications/making-the-grade-assessing-the-evidence-for-integrated-student-supports>.

In response to limited outcomes and the fragmented and redundant implementation of student supports, one policy response has been to fund initiatives focused on integrating student supports. See our discussion of the problems associated with such initiatives, Center for Mental Health in Schools at UCLA. (2014). *Integrated student supports and equity: What's not being discussed?* <http://smhp.psych.ucla.edu/pdfdocs/integpolicy.pdf>

⁴ *Evolving Community Schools and Transforming Student/Learning Supports*

<http://smhp.psych.ucla.edu/pdfdocs/evolvecomm.pdf>

⁵ California Department of Education. (n.d.). *Multi-Tiered System of Supports*. <http://cde.ca.gov/ci/cr/ri>.

⁶ Center for Mental Health in Schools & Student/Learning Supports at UCLA. (2018). *ESSA and addressing barriers to learning and teaching: Is there movement toward transforming student/learning supports?*

<http://smhp.psych.ucla.edu/pdfdocs/2018%20report.pdf>

⁷ Each of the six domains are discussed in detail in Adelman, H. S., & Taylor, L. (2019). *Addressing barriers to learning: In the classroom and schoolwide*. UCLA. <http://smhp.psych.ucla.edu/pdfdocs/barriersbook.pdf>. The domains have been explored in a variety of venues across the country over the last decade (see

<http://smhp.psych.ucla.edu/summit2002/nind7.htm>).

⁸ For a fuller array of examples of student/learning supports that can be applied in classrooms and schoolwide, see the set of surveys available at <http://smhp.psych.ucla.edu/pdfdocs/surveys/set1.pdf>

⁹ See Center for Mental Health in Schools at UCLA. (2008). *A sampling of outcome findings from interventions relevant to addressing barriers to learning*. <http://smhp.psych.ucla.edu/pdfdocs/sampler/outcome/outcome.pdf>;

Anderson Moore, K., Caal, S., Carney, R., Lippman, L., Li, W., Muenks, K., Murphey, D., Princiotta, D., Ramirez, A. N., Rojas, A., Ryberg, R., Schmitz, H., Stratford, B., & Terzian, M. A. (2014, February). *Making the grade: Assessing the evidence for integrated student supports*. Child Trends.

- ¹⁰ Some general resources from the center to aid in moving forward are
- > *Embedding Mental Health as Schools Change*
 - > *Addressing Barriers to Learning: In the Classroom and Schoolwide*
 - > *Improving School Improvement*
- all 3 can be accessed from our Center's website
http://smhp.psych.ucla.edu/improving_school_improvement.htm
- > *2021-22: Addressing Learning, Behavior, and Emotional Problems Through Better Use of Student and Learning Support Staff* <http://smhp.psych.ucla.edu/pdffdocs/supports.pdf>
 - > *Evolving Community Schools and Transforming Student/Learning Supports*
<http://smhp.psych.ucla.edu/pdffdocs/evolvecomm.pdf>

A host of other free resources to aid in the transformation process are available on the Center's website
<http://smhp.psych.ucla.edu> -- for example, the *System Change Toolkit*
<http://smhp.psych.ucla.edu/summit2002/resourceaids.htm>

And we offer free technical assistance and coaching if you need it -- see
<http://smhp.psych.ucla.edu/pdffdocs/coach.pdf>

¹¹ For lessons learned, see <http://smhp.psych.ucla.edu/summit2002/trailblazing.htm>

For details and prototypes for transforming operational infrastructure to implement a unified, comprehensive, and equitable system of learning supports, see Center for Mental Health in Schools at UCLA. (2011). Key leadership infrastructure mechanisms for enhancing student & learning supports
http://smhp.psych.ucla.edu/pdffdocs/report/resource_oriented_teams.pdf.

For a discussion of the operational infrastructure needed for and the problems associated with making sustainable system changes, see Adelman, H. S., & Taylor, L. (2019). Getting from here to there, in *Addressing barriers to learning: In the classroom and schoolwide*. <http://smhp.psych.ucla.edu/pdffdocs/barriersbook.pdf>.

For capacity building resources, see Sections B and C of the Center's System Change Toolkit
<http://smhp.psych.ucla.edu/summit2002/resourceaids.htm>.

For Standards for a learning supports component, including indicators for monitoring, evaluation, and accountability, see <http://smhp.psych.ucla.edu/pdffdocs/commcore.pdf>.