More (Temporary) Money to Improve Behavioral Health: The Good and the Bad for Schools

We see increasing attention to enhancing the behavioral health system in states. California is a prominent example. The state intends to spend "Over $3 billion over the next few years to transform California's behavioral health system for children into an innovative and prevention focused system. The initiative includes school linked partnership, capacity, and infrastructure grants to support behavioral health services in schools and school linked settings." This includes "$5 million for a pilot project to expand comprehensive health and mental health services to public school pupils." "The goal is to provide training and technical assistance on the requirements for health care provider participation in the Medi Cal Program to enable Local Educational Agencies (LEA) to participate in, contract with, and conduct billing and claiming in the Medi Cal Program."

Clearly, better access to improved services is desirable, and certainly a few more students with significant mental health problems will be treated. We stress, however, that transforming a state's behavioral health system does not account for the need to transform how schools address barriers to learning and teaching and reengage disconnected students (and families). For schools to play their role in addressing factors that interfere with equity of opportunity for so many students, a district's and school's student/learning supports must be significantly reworked.

And, we caution that, while well-intentioned, the current priority of states and localities on fixing behavioral systems can be anticipated to have negative consequences for a school's efforts to transform student and learning supports as a critical facet of pursuing a whole child agenda.

For example, the overemphasis on "services" and billing Medicaid will *narrow and limit* the roles and functions of many district and school student support staff; it will increase *counterproductive competition* between school and community providers; it will lead to *excessive screening* for mental health problems *at the expense of* improving classroom and schoolwide *primary* prevention (e.g., student/learning supports, special assistance, accommodations); it will slow down development of *comprehensive* community schools and other forms of school-community collaboration.

In the process, it will further limit and marginalize student and learning supports in school improvement policy and practice. And it certainly will undermine efforts to (1) unify student and learning supports at schools and then (2) develop them into a comprehensive and equitable system that integrates a wide range of community resources.

At a time when schools are confronted with a wide range of factors interfering with success at school, the need is for building a system that brings together not only essential health services, but develops a systematic and equitable approach to supporting students, families, and school staff at school each day. This includes six domains of student/learning supports (preK-12):

- enhancing supports *in classrooms*

- supporting transitions

- increasing home connections to the school

- increasing community involvement and collaborative engagement

- responding to, and where feasible, preventing crises

and, of course,

- facilitating student and family access to effective services and special assistance *as needed*. (If the other domains are well-addressed and the school's role in promoting social and emotional development is well-enhanced, the number needing referral for specialized help can be significantly reduced.)

For indepth discussions about moving forward to transform student and learning supports, see the resources the Center has developed to guide planning, including the following three free books:

>*Addressing Barriers to Learning: In the Classroom and Schoolwide*
>*Improving School Improvement*
>*Embedding Mental Health as Schools Change*
   All three of these resources can be accessed at no cost at
      http://smhp.psych.ucla.edu/improving_school_improvement.html

And see the recent Center discussion:
About Improving Mental Health Support at Schools: Meeting Immediate Needs, Rebuilding Systems to Enhance Capabilities http://smhp.psych.ucla.edu/pdfdocs/practitioner(9-8-2021).pdf

Also see *New Directions for School Counselors, Psychologists, & Social Workers*
http://smhp.psych.ucla.edu/pdfdocs/report/framingnewdir.pdf

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