

Student Mental Health

Erin Whinnery

What Is the Issue, and Why Does It Matter?

Data suggest that each year, approximately [1 in 6 children](#) in the U.S. experience a mental health disorder. Despite the fact that more than half of mental health challenges begin by age 14, [many children do not receive appropriate treatment](#).

Many factors may contribute to inadequate access to, or use of, mental health care. Children's [age and poverty level](#) affect the likelihood that they are diagnosed with, or receive treatment for, mental health disorders. There are also nationwide shortages in [youth mental health professionals, school psychologists and counselors](#). Additionally, mental health researchers are concerned that stigmas associated with mental health care may [impact adolescents' willingness to seek treatment](#). Because improvements in a student's behavioral and emotional health [positively influence academic achievement](#), school systems may be particularly interested in increasing access to mental health care and treatment.

Education leaders and policymakers are taking note of students' mental health needs and see a role for schools to play in the [delivery of children's mental health services](#). This Policy Snapshot highlights activity in the 2019 legislative sessions focused on K-12 student mental health.

State lawmakers are making efforts to improve **SCHOOL-BASED MENTAL HEALTH SERVICES AND SUPPORTS** through a variety of legislative measures, such as funding health care professionals and counselors, integrating trauma-informed or evidence-based mental health practices, or changing practitioner-to-student ratios.

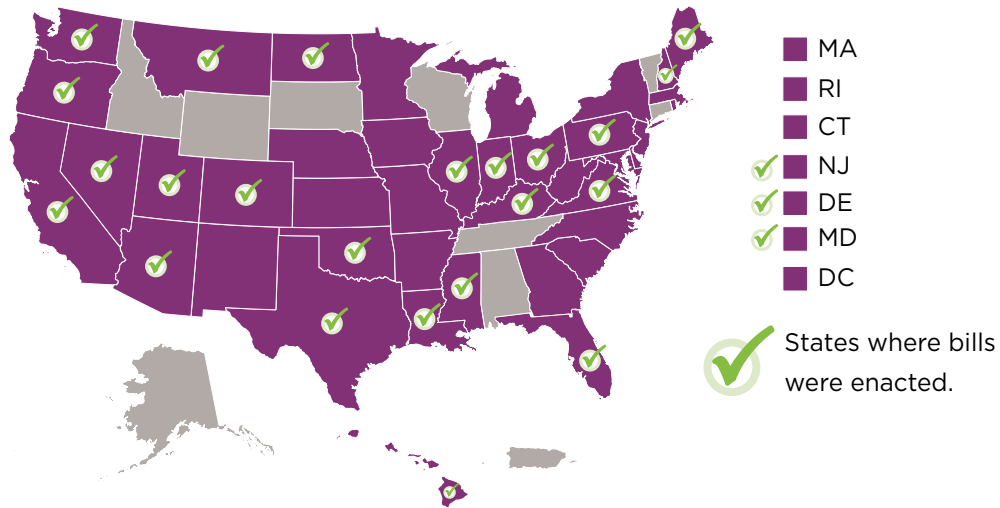
Additional legislation provides **TEACHER AND SCHOOL STAFF TRAINING** on trauma-informed care, adverse childhood experiences and mental and behavioral health. Often on the front line of supporting student health and wellness, [teachers](#) may be the first adults who notice mental health concerns and subsequent changes to student learning and behavior. Research suggests when teachers and staff implement [school-based mental health services](#) (such as prevention and intervention services), student mental health issues can be lessened.

Finally, state policy changes require that mental health education is incorporated into **SCHOOL CURRICULA**, as age appropriate instruction is emerging as [one effective way](#) of minimizing stigmas associated with mental health.

How Many States Considered Legislation in 2019?

Based on a review of 2019 legislative activity concerning K-12 student mental health and wellness:

At least **323** bills were **INTRODUCED** in 42 states and the District of Columbia.





At least **49** bills were **ENACTED** in 26 states.


Enacted Legislation			
Arizona	H.B. 2749 , S.B. 1468	Montana	H.B. 696
California	S.B. 75	North Dakota	S.B. 2149
Colorado	S.B. 19-010 , H.B. 19-1017 , H.B. 19-1203 , H.B. 19-1120	New Hampshire	H.B. 131 , S.B. 282
Delaware	H.B. 74	New Jersey	S. 2861
Florida	S.B. 1418	Nevada	S.B. 319 , S.B. 204 , A.B. 114 , S.B. 555 , S.B. 89
Hawaii	S.B. 383	Ohio	H.B. 166
Illinois	S.B. 459 , H.B. 907 , S.B. 1731	Oklahoma	S.B. 446
Indiana	S.B. 325	Oregon	S.B. 707 , H.B. 2191 , S.B. 52 , H.B. 3427
Kentucky	S.B. 1	Pennsylvania	S.B. 144
Louisiana	H.B. 320 , H.B. 53	Texas	H.B. 906 , H.B. 19 , S.B. 11 , H.B. 18
Maryland	H.B. 844	Utah	H.B. 373 , H.B. 393
Maine	H.P. 851 (L.D. 1168) , S.P. 303 (L.D. 1024)	Virginia	S.B. 1195 , H.B. 1604 , S.B. 953
Mississippi	H.B. 1283	Washington	S.B. 5082 , S.B. 5903


School-Based Mental Health Services and Supports


Examples of Enacted Legislation

 [H.B. 19-1017](#) directs the department of education to create a pilot program for up to 10 elementary schools. Each school will contract to provide each grade from kindergarten to fifth with a dedicated mental health professional. If a grade has more than 250 students, mental health professionals must be added to maintain an approximate ratio of one professional per 250 students. The pilot program will launch in the 2020-21 school year and run through the 2022-23 school year.

 [S.B. 1](#) directs all public schools to adopt a trauma-informed approach to education and requires the department of education to create a toolkit for schools. The toolkit may contain guidance, strategies, behavioral interventions, practices or techniques. Beginning July 1, 2021, or as funds and qualified personnel become available, each school district and public charter school must employ at least one school counselor per 250 students. A school counselor or school-based mental health provider must facilitate the creation of a trauma-informed team to identify and assist students whose learning, behavior and relationships have been impacted by trauma.

 [H.B. 844](#) requires local school systems to report their ratio of students to school psychologists, and strategies to reach or maintain ratios of no less than one psychologist per 700 students. Reports must also include strategies to decrease wait times to see school psychologists and increase recruitment and retention of school psychologists.

 [S.B. 555](#) requires a portion of funds appropriated to the School Safety Account be transferred to schools for block grants for social workers or other licensed mental health professionals.

 [S.B. 11](#) directs the Texas Education Agency to develop a mental health rubric that identifies resources for training on practices that support student mental health; school-based prevention and intervention services; community-based prevention and intervention services; and school-based mental health providers, among other items. The agency is also required to develop a statewide plan for student mental health, including goals for increasing access to school-based interventions. Each regional education service center is required to use the agency's rubric to create school environments that support the social, emotional and academic development of students; identify students who may need behavioral or mental health support; provide intervention services; and connect students with school- or community-based specialized services, among other uses.

Teacher and School Staff Training

Examples of Enacted Legislation



[S.B. 446](#) directs the state department of education and department of mental health and substance abuse services to consult with district superintendents and boards of education to develop information, training and resources to help school employees recognize and address students' mental health needs. The resources must address community-based organization services, how trauma and adverse childhood experiences can affect a student's ability to learn, availability of telehealth services and evidence-based strategies for prevention of at-risk behaviors.



[H.B. 373](#) requires the state board of education to provide training for school personnel on the impact of childhood trauma on learning. Educators must be given information that advises against practicing medicine, diagnosing a student or providing treatment.



[S.B. 5082](#) directs the Washington Professional Educator Standard Board to incorporate new competencies for educators — such as trauma-informed practices, consideration of adverse childhood experiences and mental health literacy — to prepare teachers to recognize signs of emotional or behavioral stress. Subject to appropriations, the office of the superintendent of public instruction must develop a webpage with professional development resources for school district staff on the newly required competencies.

School Curricula

Examples of Enacted Legislation



[S.P. 303 \(L.D. 1024\)](#) requires health education in elementary, middle and high school to address the relationship between physical and mental health in order to enhance students' understanding of, attitudes toward and behavior relating to mental health.



[H.B. 1283](#) directs the state department of education to establish three pilot programs in six districts that provide K-5 students with skills to manage stress and anxiety through an evidence-based curriculum. The department of mental health is charged with selecting the curriculum content. Results of the pilot program may be used to inform future decisions to scale the curriculum statewide.



[H.B. 1604/S.B. 953](#) incorporates health instruction standards that recognize multiple dimensions of health and the relationship of physical and mental health to enhance student attitudes and behavior and promote health and well-being.



About the Author

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As a policy researcher, Erin supports the foundational research services at Education Commission of the States, and has a particular interest in the areas of postsecondary access and success. Before joining the organization, Erin earned her master's degree in higher education administration from the University of Denver and a bachelor's degree in English from Boston College. On the weekends, Erin is an amateur crafter and quilter. Contact Erin at ewhinnery@ecs.org or **303.299.3654**.

Related Resources

[What Goes Into Improving School Climate?](#)

[State Information Request: Student Behavioral Health](#)

[State Information Request: Student Mental Health](#)



