

# POLICY BRIEF: MENTAL HEALTH SUPPORT IN K-12 PUBLIC SCHOOLS

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## THE PROBLEM:

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Nearly  $\frac{1}{5}$  of school districts in the U.S. lack a policy supporting a single individual responsible for coordinating counseling, psychological, or social services for the public schools.<sup>1</sup>

**20-25%**  
of youth in the U.S. have symptoms of a mental disorder severe enough to cause impairment across their lifetime.<sup>2</sup>

There are:  
“Differences in mental health and social services staffing, facilities/equipment, and services observed across all school demographics.”<sup>3</sup>

## ROADBLOCKS:

**There is inconsistency between states, as well as within states, regarding mental health support provided to K-12 public school students:**

\* Particularly in rural and impoverished regions of the U.S., including the Midwest and West, mental health care provisions are limited across the board.<sup>4</sup>

\* While it is commonly regarded that the quality of support in schools is dependent on the states' regulations, even if the state has progressive mental health policies for their schools, the implementation of these policies will be inequitable since each school district has varying resources, as funding from property taxes depends on the property values within each school district.<sup>5</sup>

### Mental health is overlooked:

\* While it is generally understood that students facing challenges outside of school can suffer consequences academically, the magnitude of impact mental health has on academic and lifelong careers is often underestimated; in particular, poor mental health is significantly associated with dropout rates, and “Males in higher education had five times the risk of dropout when reporting poor mental health.”<sup>6</sup>

\* Additionally, there is inconsistent accessibility to mental health screening and diagnosing throughout the US. Some who need mental health support are unable to access treatment due to cost, geographic location, schedules, and other factors.

## WHAT IS MENTAL HEALTH?

Mental health is defined as  
“a state of wellbeing in which every individual recognizes his or her own potential, can cope with the normal stress of life, can work productively and fruitfully, and is able to make contribution to his or her own community.”<sup>7</sup>

— WHO, 2019

**Common mental health disorders based on the psychiatric taxonomy include<sup>8</sup>:**

- Emotional Disorders
- Conduct Disorders
- Hyperkinetic Disorders
- Developmental Disorders
- Attachment Disorders
- Trauma Disorders
- Eating Disorders
- Habit Disorders
- and Psychotic Disorders



Department for Education, 2018



## THE SOLUTION:

A national policy designating funding to employ a mental health professional in every K-12 public school in the country is necessary for the psychological and emotional support of students across the United States.

## WHY:

In the United Kingdom, legislation regarding mental health support in schools passed in 2018, establishing that *“All schools are under a statutory duty to promote the welfare of their pupils, which includes: preventing impairment of children’s health or development, and taking action to enable all children to have the best outcomes.”*<sup>8</sup>

A program like this, clearly defining a school’s role in supporting students’ mental health and already observing success, would be beneficial in the US.

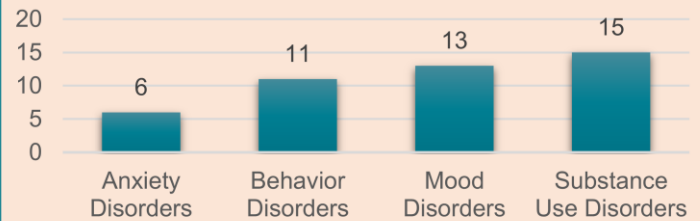
While the responsibility of public K-12 education is reserved for states, the federal government maintains the ability to offer categorical and block grants to states. For example, federal categorical grants were used to provide nutrition under the *Special Supplemental Nutrition Program for Women, Infants, and Children*, and block grants were used to assist needy families through the *Temporary Assistance for Needy Families* program.<sup>3, 9</sup> Similarly, the federal government could create policy providing monetary support to each state so long as it is able to prove that the funding is going directly to mental health support in schools, such as in the form of a paycheck to mental health professionals working at K-12 schools within the state.

In many communities, schools *“are the only reliable community resource available to respond to children’s mental health needs.”*<sup>9</sup>

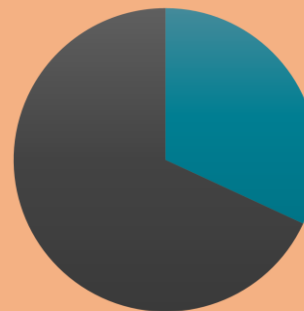
It is *essential* for mental health support to be available through the schools, so that every student has equal opportunity to mental health services.

## IMPORTANT STATISTICS

### Median Age of Onset for Various Psychological Disorders



### Adolescents Age 13-18



■ Suffering from Anxiety Disorder  
 ■ Not Appearing to have Anxiety Disorder

There is a correlation between common mental disorders in adults and their emergence in childhood.<sup>2</sup>

Furthermore, there is the strong potential that with early intervention, the prevalence of mental disorders in adults may decrease.<sup>13</sup>

Statistics from Merikangas et al., 2010

If there was a psychologist or social worker working full-time at every school in the country, it would cost the federal government about \$6.6 billion, based on an average salary of \$50,000/year<sup>10</sup> and an estimate of 132,853 K-12 public schools in the US.<sup>11</sup> With an estimated \$536 billion<sup>12</sup> of taxpayer money going to funding public schools throughout the U.S. each year, this “cost” represents only about a **one percent increase** to the current expenditures.

Additionally, these resources would help students’ present mental health and protect their futures, as accessible intervention could prevent adolescent suicides and dropouts.<sup>6, 13</sup>

## CITATIONS

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