A Collaborative Approach to Student Mental Health
Today’s Purpose

Provide information regarding mental health difficulties of students

Define the role of the School Social Worker, the School Psychologist, and the School Counselor

Outline how the three disciplines work collaboratively

Describe the work of suicide prevention and intervention in the state
Increasing Youth Suicide Rates

Present rate of suicide among youth is at the highest level recorded in history.

The rate of suicide increased 47% since 2000 for 15-19 year old students.

The suicide death rate among Black youth is increasing faster than any other racial/ethnic group.

Suicide is the 2nd leading cause of death among 15-19 year old children.

4 out of 5 teens that attempt suicide have given clear warning signs.
<table>
<thead>
<tr>
<th>20% of students have been diagnosed with a mental health condition, but only 1 in 5 students who have mental health difficulties are receiving treatment</th>
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<tbody>
<tr>
<td>Schools are optimal locations for students to receive counseling and support for mental health difficulties since children spend 7 hours a day in this location</td>
</tr>
<tr>
<td>School based mental health providers work in a collaborative manner with teachers, parents, and students to provide optimal services for children</td>
</tr>
<tr>
<td>School based mental health providers have unique knowledge of school systems and are trained to collaborate with other professionals in the school setting</td>
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</table>
The Role of School Counselors, School Psychologists, and School Social Workers

Conduct assessments, counseling, and other mental health and academic services

Work with children individually and in groups

Collaborate with parents, teachers, and administrators

Help schools, families, and communities provide successful outcomes for ALL students
School Counselors, School Psychologists, and School Social Workers Promote Positive Behavior and Mental Health

- Improve students communication and social skills
- Assess student emotional and behavioral needs
- Provide individual and group counseling
- Promote problem solving, anger management and conflict resolution
- Reinforce positive coping skills and resilience
- Promote positive peer relationships and social problem solving
- Make referrals to and help coordinate community services provided in schools
School Counselors, School Psychologists, and School Social Workers Create Safe, Positive School Climates

- Conduct suicide and threat assessments to ensure student safety
- Prevent bullying and other forms of violence
- Support social-emotional learning
- Assess school climate and improve school connectedness
- Implement and promote positive discipline and restorative justice
- Implement school-wide positive behavioral supports
- Identify at risk students and school vulnerabilities
- Provide crisis prevention and intervention services
- Conduct suicide and threat assessments to ensure student safety
Promote student motivation and engagement
Conduct psychological and academic assessments
Individualize instruction and interventions
Improve student and classroom behavior
Monitor student progress
Reduce inappropriate referrals to special education
Collect and interpret student and classroom data

School Counselors, School Psychologists, and School Social Workers Promote Academic Achievement
School Counselors, School Psychologists, and School Social Workers Support Diverse Learners

- Assess diverse learning needs
- Plan appropriate Individualized Education Programs for students with disabilities
- Adjust classroom facilities and routines to improve student engagement and learning
- Provide culturally responsive services to students and families from diverse backgrounds
- Modify and adapt curricula and instruction
- Monitor and effectively communicate with parents about student progress
School Mental Health Professionals

School-employed mental health professionals focus on how a student’s behavior impacts their ability to learn and be successful in school.

Community-employed mental health professional in schools focus on a student’s global mental health and how it impacts family, community, work and school.

Community-employed mental health providers vary in their level of experience and training related to schools

School mental health services should provide seamless, coordinated support
School Counselors, School Psychologists, and School Social Workers Conduct Interventions

We engage in the following interventions at the school level:

- Promoting Social Emotional Learning
- Connecting families with community resources
- Counseling
- Signs of Suicide training
- Academic interventions and behavior plans
- Threat assessment
- Collaborating with outside providers
- Suicide assessment
<table>
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<tr>
<th>Help families understand their child’s learning and mental health needs</th>
<th>Assist in navigating special education processes</th>
<th>Connect families with community service providers when necessary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Help effectively engage families with teachers and other school staff</td>
<td>Enhance staff understanding and responsiveness to diverse cultures and backgrounds</td>
<td>Help students transition between school and community learning environments, such as residential treatment or juvenile justice programs</td>
</tr>
</tbody>
</table>
School Counselors, School Psychologists, and School Social Workers Provide Crisis Response Services

Lead, participate, and inform crisis response teams to provide emotional support after a myriad of crises:

1. Suicide of students
2. Death of teachers, staff members, and students
3. Natural disasters and pandemics
4. Car accidents with student deaths or severe injuries
5. Counseling and support after school shootings
Collaboration during the COVID-19 pandemic (state level)


Pandemic Return to School Toolkit: A Focus on Physical and Mental Health Well-being for Educators and Families
Collaboration during the COVID-19 pandemic (district level)

School Counselors, School Psychologists and School Social Workers were recognized by the General Education Leadership Network (GELN) of Michigan as important stakeholders to support student wellness in the return to school following the pandemic.
Providing Comprehensive & Integrated Mental Health Services in Michigan’s Schools

**School mental health professional and community providers**

- Intensive School Interventions
  - Community Support
  - IEPs, behavior plans, progress monitoring
  - Individual Interventions

- Targeted Interventions
  - Assessments, academic supports, individual and small group interventions
  - Strategies for parents and teachers

- School-Based Prevention & Universal Interventions
  - Positive school climate and sense of belonging
  - School emotional learning
  - School-wide Positive Behavioral Supports
  - Bullying prevention programs

**Students with severe/chronic problems**

**At-risk students**

**All students**

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School mental health professionals
<table>
<thead>
<tr>
<th>School Counselor</th>
<th>School Psychologist</th>
<th>School Social Worker</th>
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<tbody>
<tr>
<td>School Counselor License or endorsement from the State of Michigan</td>
<td>Michigan School Psychologist Certificate</td>
<td>Master Social Work License</td>
</tr>
<tr>
<td>Master’s degree</td>
<td>Specialist degree</td>
<td>School Social Work Certificate</td>
</tr>
<tr>
<td>Minimum 600 hours internship</td>
<td>600 hour practicum in school psychology and a 1,200 hour full-time internship</td>
<td>Master of Social Work (MSW) degree</td>
</tr>
<tr>
<td>6 semester credit hours or 150 SCECHs or 150 hours of DPPD</td>
<td>6 semester credit hours or 150 SCECHs or 150 hours of DPPD</td>
<td>Minimum 500 hours school-related practicum</td>
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<td></td>
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<td>45 hours of board approved continuing education</td>
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Historically, the term “guidance counselor” was used to refer to counselors working in the schools. This term has evolved to “school counselor” as the scope of duties has changed and evolved. Although some schools still used the outdated “guidance counselor” term, the American School Counselor Association encourages the use of “school counselor” to more accurately reflect the role.

**GUIDANCE COUNSELOR**
- Reactive
- Services to some
- Impact measured via feelings and perceptions
- Ancillary role to school improvement process
- Work in isolation

**SCHOOL COUNSELOR**
- Proactive/data-driven
- Programming for all
- Impact measured via achievement, attendance, and behavior data
- Essential role in the school improvement process
- School counselors as school leaders
- Develop, manage and evaluate a comprehensive school counseling program
Mission and Vision

The Michigan School-Based Mental Health Providers (S-BMHP) collaboration seeks to identify and address systemic issues regarding student mental health. Through research, evidence-based practices, and community partner development, the Michigan Association of School Psychologists (MASP), The Michigan Association of School Social Workers (MASSW), and the Michigan School Counselor Association (MSCA) have committed to work jointly on improving the mental health of all students.
Priorities

- School Suicide Prevention and Intervention
- School Safety
- School Integrative Mental Health Services
- Student Mental Health Programming and Best Practices
- School Mental Health System of Care Development
- Joint Professional Development, Conferences, and Training
- Hospital to School Transition Programming (Workgroup that is sponsored by Pine Rest Services, Forest View Hospital, and the West Michigan Regional Suicide Prevention Alliance)
- The Facilitation of Legislative Agendas, Legislation, Policy, and Grant Opportunities
Suicide Prevention

School suicide prevention and intervention
Reason #1 to educate our students about youth suicide

Every 15 minutes someone in the United States dies by suicide

Every 16 minutes someone is left to make sense of it
Reason #2 to educate our students about youth suicide

Suicide is the 2nd leading cause of death among 15-24 year olds in the U.S.

More teenagers and young adults die from suicide than cancer, heart disease, AIDS, birth defects, stroke, influenza, and chronic lung disease combined.
Reason #3 to educate our students about youth suicide

Suicidal Ideation is a significant concern for teens in Michigan

- **35%**
  Students felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months

- **19%**
  Students seriously considered attempting suicide

- **14%**
  Students made a plan about how they would attempt suicide

- **9%**
  Students actually attempted suicide one or more times

Data Source: MiPHY 2018-19 9th and 11th Grade High School Students from Hillsdale, Jackson, Kent, and Oakland Counties
**The Role of School Counselors, School Psychologists, and School Social Workers in Suicide Prevention and Intervention**

<table>
<thead>
<tr>
<th>Action</th>
<th>Details</th>
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<tbody>
<tr>
<td>Train all staff members (teachers, administrators, para-pros etc.)</td>
<td>on the warning signs of suicide and methods of reporting these concerns</td>
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<tr>
<td>Completion of suicide assessments on students</td>
<td></td>
</tr>
<tr>
<td>Provide school based therapy to address coping skills and improve</td>
<td>outcomes for students with suicidal ideation/who have attempted suicide</td>
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<tr>
<td>Educate families on suicide and safety issues associated with this</td>
<td>difficulty (removal of lethal methods-pills guns etc. from the home)</td>
</tr>
<tr>
<td>Creating plans in the school to improve academic success and decrease</td>
<td>emotional difficulties</td>
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1.7 million students are in schools with police but no counselors

3 million students are in schools with police but no nurses

6 million students are in schools with police but no school psychologists

10 million students are in schools with police but no social workers

14 million students are in schools with police but no counselors, nurses, school psychologists, or social workers

Barrier to Intervention
Limited access to school mental health staff
### Barrier to Intervention
Professional to student ratios

<table>
<thead>
<tr>
<th>Professional Role</th>
<th>Recommended</th>
<th>Actual</th>
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<tbody>
<tr>
<td>School Counselors</td>
<td>250:1</td>
<td>693:1</td>
</tr>
<tr>
<td>School Psychologists</td>
<td>700:1</td>
<td>2,184:1</td>
</tr>
<tr>
<td>School Social Workers</td>
<td>250:1</td>
<td>1,051:1</td>
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Success Stories

A high school student witnessed the murder of her aunt and subsequent suicide of the perpetrator in a domestic violence situation. The child attended school the day after the murder.

The school psychologist provided counseling services to the student. During the sessions the student reported that she came to school the day after the murder so she could be provided with counseling services. The child has continued to receive school based counseling services to address her issues related to the incident. During these sessions she continues to report that she attends school on a regular basis so she can be provided with counseling.

The school based mental health professionals have collaborated with teachers to create a successful plan for this student.
A high school student created a detailed plan to kill several students and faculty members at the school. A threat assessment was completed by the school psychologist, school social worker, school resource officer, and principal. It was determined that the student fell at a high level of risk. During this assessment it was also noted that the student had engaged in self harm and had a plan to commit suicide.

The student spent eight months outside of school due the level of threat that he posed to others. During this time the school social worker provided extensive counseling with the student and parent, along with court ordered counseling.

The student re-entered the school the following year, where he continued counseling with the school social worker. He also met with the school psychologist each morning and had lunch with the school resource officer. Staff members regularly connected with the student in the hallway and classroom to facilitate relationships and decrease isolation. The student also participated in a social skills group led by the school social worker and speech therapist. The student reported that he feels connected to the school and no longer has thoughts of wanting to harm himself or others.
In conclusion...

...our work is focused on saving lives so that students grow and thrive.