

TEN CRITICAL FACTORS IN SCHOOL MENTAL HEALTH...WHAT EARLY ADOPTERS SAY

In 2006-07, the National Assembly on School-Based Health Care's School Mental Health-Capacity Building Partnership (SMH-CBP) held discussion groups in four states -- Maryland, Missouri, Ohio, and Oregon -- to gain a deeper understanding of how school mental health activities are organized and implemented at both the state and local levels. Representatives from the fields of mental health, education, health, family advocacy and youth development participated in these groups.

Below are ten common critical factors that emerged across the four states. More information on specific strategies for addressing these factors can be found at: www.nasbhc.org

1. State leaders across child-serving public sectors must establish a cohesive and compelling vision and shared agenda for school mental health that can inspire localities to act.
2. State public agencies invested in a shared vision need a centralized organizational infrastructure and accountability mechanisms to assure the vision's implementation across sectors.
3. State policymakers and leaders need to create feasible and sustainable school mental health funding models that maximize use of patient revenue and provide categorical grants for *comprehensive* school mental health services, including prevention and early intervention.
4. School mental health stakeholders must demonstrate that mental health programs are necessary and integral to students' academic enrichment and success in school.
5. Youth and families must be engaged in all aspects of school mental health policy and program development.
6. School staff and school mental health providers must recognize the needs of students from diverse cultural backgrounds and offer programs that reduce disparities in services.
7. Pre- and in-service training programs should prepare professionals in schools on children's mental health issues.
8. State and community stakeholders should support practitioners in utilizing and monitoring best practice models.
9. State and community stakeholders should coordinate the myriad of federal, state, and local resources dedicated to children's academic success, mental health, and well-being to assure full integration and equitable distribution across schools.
10. State and community stakeholders should agree on and collect performance data that document impact on core psychosocial and academic indicators.

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