

# The Cost of Mental Health in Wisconsin Schools

Legislature takes small steps to address growing problems of trauma, bullying, broken homes

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Scott Walker's 2017-19 budget proposal includes a \$6.5 million spending increase for school mental health services. The money, originally requested by the Department of Public Instruction (DPI) in November, would go toward

employing more school social workers, supporting collaborations with community health providers and training school staff.

The need for these services is well documented and dire. An estimated one in five U.S. children has a diagnosable mental health condition. The 2013 Youth Risk Behavior Survey found that more than half of Wisconsin students' mental health had not been good on at least one of the past 30 days, and 13% had seriously considered suicide. According to the DPI, 80% of students with mental health needs do not get professional help.

"We couldn't afford to wait any longer. We wanted to push the conversation forward, and felt like it was the right time," says DPI spokesperson Tom McCarthy. "We had seen the legislature and the governor paying attention to this issue and we knew that we had a strong case that schools are an active partner in making sure that all kids are mentally healthy."

The issue of youth mental health is not new to Wisconsin lawmakers, but progress toward reform has often stalled. Former state representative and psychiatric nurse Sandy Pasch describes a pattern of "one step forward and five steps backward."

"There have been glimmers of hope, but still huge unwillingness to deal with the major issues related to mental illness," she says.

This latest glimmer is currently being reviewed by the Joint Finance Committee and would go into effect in July. If approved, spending would aim to expand access to care while improving the climate of school mental health. As it stands, scarce resources make it difficult for many schools to meet immediate needs, let alone pursue long-term goals. For the educators and advocates facing these challenges every day, the \$6.5 million is not a solution, but could be a step.

## **The Impact of Access**

Mental illness can affect anyone, but not everyone can count on getting the care they need. When costs or logistics rule out traditional therapy, families rely on schools to bridge the gap.

“School-based mental health has really come to the forefront in recent years,” says Julie Incitti, president and legislative chair of the Wisconsin School Social Workers Association. “When there aren’t enough clinics in the community or enough providers, schools can be a great way for students to access those services, and I think legislators are recognizing that.”

School social workers are employed in all Milwaukee Public Schools and in many other Wisconsin districts. They apply a systems approach to mental health care, connecting families and schools, along with interrelated agencies like juvenile justice or child protective services when needed.

Judith Kullas Shine, president of the American Council for School Social Work, explains that these providers are often licensed both clinically and by the education department. This background helps them understand mental health in conjunction with other challenges kids face.

“We’ve seen an increase in the number of kids who experience trauma from bullying, divorce, poverty, even parental military deployment,” says Shine. “So there is outreach to make sure that more kids get the help they need to be functioning, successful human beings.”

Collaborations with community providers can also help overcome barriers to care. United Way’s PATH (Providing Access to Healing) for Students program achieves this through partnerships between school districts and a consortium of mental health agencies.

Through PATH, therapists spend a set amount of time providing in-school counseling for students. Time is typically assigned to a district based on the percentage of its students who qualify for free and reduced meals, and the district determines how the time will be allotted in each school. Sessions take place over study periods or during a mix of different class times, to minimize scheduling disruptions. This convenience breeds consistency, which is essential for treating mental health.

“When you have kids going to a clinic for therapy, maybe they’ll miss an appointment, maybe parents weren’t able to get them to an appointment that day,” says United Way Fox Cities Program Officer Mary Wisnet. “When appointments are in school, we have much more consistency in that follow through.”

First piloted in 2008, PATH is now offered in 30 schools across 10 districts. Surveys have shown that 72% of students experienced reduced symptoms and 44% improved academically after going through the program. A 2012 cost-benefit analysis conducted by the University of Wisconsin-Madison also found that PATH increased productivity and reduced expenses associated with things like medical costs and behavioral problems, with an average net benefit of \$49,000 per student per year.

## **Limits to Expansion**

Producing measurable results has helped school-based mental health expand its reach. But a lack of dedicated funding often stymies further growth.

The money for school social work positions typically comes from the general school district funds, or the special education budget. “If a school district understands the value of the role, they can advocate to have a school social

work position and prioritize it above other positions,” Incitti says. “But funding is ultimately what’s driving many of those decisions.”

The National Association of Social Workers recommends one professional be employed for every 250 students. Incitti says she doesn’t know of any school that hits that mark. Data from the DPI in 2012 put Wisconsin’s ratio at 1 to 1,050.

With the PATH program, services are billed through insurance when possible. As many of the kids they work with are underinsured, this accounts for about half of their funding. “When the family can’t afford to meet those high deductibles and copays, that’s when philanthropy kicks in,” explains Wisnet. PATH is largely supported by the United Way, with help from grants.

In addition to expanding services, additional funding would make it easier to comprehensively improve the school environment. A common model for this is known as Positive Behavioral Interventions and Supports (PBIS). Based on a three-tiered framework, PBIS encompasses lessons and coping skills for all students, additional screening and support for individuals, and more extensive therapy or behavioral intervention when needed. “Ideally, we’d want to see that kind of service level in all schools,” says Wisnet.

## **A Need for a Greater Change**

The proposed funding is an optimistic development for school mental health, but it’s clear that not all districts would feel the boost in finances.

“With the amount of money we’re talking about here, we understand that it’s not enough to get everywhere in the state,” McCarthy says. “Our hope is that it’s enough to begin in some areas, to see some exciting, different approaches that we could then expand statewide.”

While school-based mental health programs may seem poised for success, there are still underlying challenges to contend with. After all, they exist at the intersection of healthcare and education: two industries threatened by the current political climate.

Walker's refusal to expand Medicaid under the Affordable Care Act hindered access to adequate healthcare, and put more pressure on schools to fill in the gaps. Pasch argues that Medicaid expansion would be a more effective response to the care shortages, although she acknowledges the chances of that happening right now are "pretty slim."

Pasch also questions how much of an impact the funding would have in schools reeling from budget cuts and the effects of Act 10. "We still have school districts struggling to put books in the library. I don't think they're going to put a primary focus on mental health," she says. "I'm glad the money's there, but it's putting frosting on a lopsided cake."

Whether or not the proposed increase signals a true shift in priorities, it's clear that Wisconsin students are still a long way from getting the level of care they need.

"There's so much work out there to do," Shine says. "We need everybody to be working on behalf of kids."