### Westchester Children's Association

## The State of Children and Youth Mental Health

# Report on 2024 Roundtable

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#### ATTENDEES:

Allison Lake – Westchester Children's Association, Andrea Ruggiero – Open Door Family Medical Centers, Angel Gray – Westchester Children's Association, Ann Narcisse – Putnam Northern Westchester BOCE, Suzanne DeLasho – Westchester Jewish Community Services, Christian Templeman – Morgan Stanley, Clecy Cesario - Mt. Vernon Neighborhood Health Center, Diane Rosenthal – Student Advocacy, Gabriella Nanna – Westchester Children's Association, Jonathan Morgenstern – The Guidance Center, Kerry Megley – Family Ties, Laura Caruso – Pelham Together, Marie Considine NAMI Westchester, Michelle Bethencourt-Garcia Westchester County Department of Social Services, Paula Santa-Donato – Mental Health Consultant, Scott Dorn, Public School of the Tarrytowns, Dr. Erin Vredenburgh, Rye Public Schools, Ellen Gerace, Peekskill Public Schools, Suzanne DeLasho, Westchester Jewish Community Services, Stepahnie Shabman, Student Advocacy, Lisette Matos, Westchester Department of Social Services

On April 3rd Westchester Children's Association held its 3rd Youth Mental Health Roundtable, bringing together over 20 community partner organizations including 3 school districts to address the challenges supporting the mental health crisis among our youth.

Pupil Service administrators from Peekskill, Rye and Tarrytown gave an overview of the rising need of students and more importantly, the many programs and services they are instituting to address these mental health challenges. All districts are creating strategic plans to support all students' mental health.

The dynamic discussion highlighted the importance of community school partnership and creating a climate and culture that supports everyone. While there exists many programs to support youth, all agreed the challenges of staffing, funding sustainability and continued growing demand remain.

### **Overview: Districts addressing Mental Health in Schools:**

The three administrators (Peekskill, Rye, and Tarrytown) discussed a rise in need and support for the youth in their districts. Several years following the COVID-19 pandemic, chronic absenteeism and school refusal are major concerns. While school avoidance may stem from the previous availability of online learning and that attendance is 'optional', such behavior may also reflect the pressure of academic achievement felt by students. Increases in depression, anxiety, suicide ideation and attempts have dramatically intensified. The age at which students experience behavioral health challenges has been noticed as early as elementary school.

Participants at the roundtable were fortunate to hear about some of the programs the districts are employing to address these mental health challenges. Moreover, districts are actively engaged in implementing a number of preventives, broad based educational programs for K-12 students and are including the community and teachers in ways that will support all students.

To mitigate the impact of school avoidance, schools are evaluating strength-based assessments and tools in addition to their Code of Conduct, allowing for a 'restorative justice' model to address chronic lateness, absenteeism, and behavioral problems. The utilization of curriculum and community programs will bolster administrative initiatives.

All districts were either actively engaged in or are planning a K-12 supportive mental health/anti-bullying curriculum for all students. This is considered a Tier 1 approach that incorporates social emotional learning (SEL) into classroom lessons. Some are utilizing Second Step, Safe School Ambassadors and/or Dialectical Behavioral Therapy (DBT). Not only do these programs educate students on how to be good citizens, care for one another and regulate emotions, they also help create a positive culture and sense of belonging. Utilizing a MTSS – multi-tiered systems of support - districts are able to address the level of support a student needs.

Aside from in-school curriculum, districts are also partnering with community organizations. The Community School Model is found to be a progressive step in working together as a community by integrating services and resources, removing barriers to both education and mental health support. A community centered model works to engage everyone in the education of children, including parents. This is accomplished in various districts through Parent Academy, Parent Resource Center, Town Hall meetings, and Parent Workshops, etc. Additionally, no longer operating in silos is beneficial to all parties.

Organizations across Westchester's towns and cities expressed the various needs of the communities. These needs range across different social determinants of school success including socio-economic status, housing access, citizenship, and language acquisition. While not all schools utilize the Community School Model, such school and organizational partnerships are essential to providing locally focused and culturally competent care.

Within districts, these partnerships include mental health clinics, food pantries, medical facilities and housing and employment support. Many have mental health clinics on site in a variety of schools in their districts through partnerships with local human service agencies such as WJCS, Andrus, The Guidance Center and Open Door.

Collaboration with community organizations also allows for the continuum of care outside of the school day by providing services after school hours and during the summer. This streamlined care ensures young people in need of mental health support do not experience 'emotional slump/slide' similar to academic/learning loss. Some summer camp programs are incorporating SEL in camp programming, using the same language as school personnel. This also helps identify students in need of services for the district. They also utilize Student Assistance to support students with substance use issues.

### **Challenges:**

All the districts, either with NYS grant funds or other funding have increased their pupil service personnel. The Tarrytown and Peekskill schools were awarded various grants through NYS. Community providers have mentioned utilizing funding of other programs and policies, such as McKinney-Vento and homelessness status, in connection with mental health programs. Despite these funding streams, program sustainability and staff retention continue to be difficult challenges. While Governor Hochul's initiative for additional mental health clinics in schools is impressive, finding and keeping professional staff is difficult.

There are no outpatient mental health services for children under the age of 13. Considering the rise in mental health issues occurring younger and younger, this is a tremendous gap in support services. The need for in-school mental health programs for younger ages is likewise needed.

Serving students who have been recently discharged from the hospital for mental health disorders has been challenging. Those recently discharged often return to school without warning or a proper discharge plan. There is a bill in NYS legislation named "Nicole's Law" (S.4345) that ensures an appropriate discharge plan for those hospitalized for self-inflicted life-threatening injuries, including an immediate connection to community services, with the person receiving priority access to community services and follow-up with the individual following discharge among other stipulations.

Schools have found difficulty coordinating a system of referrals. Pupil Personnel often spend significant time making calls to probation, searching for available beds and any possible connections with any other services where a student may be eligible. This task is time-consuming and often frustrating for both schools and parents. Additionally, it does not appear that the rising need among youth and their families for mental health services is waning.

#### **Possible Solutions:**

School districts and community providers are already spearheading the efforts to access mental health programs. Districts are attacking this mental health crisis head on and creatively, utilizing all possible resources to engage all impacted, including families. All three districts have school-based mental health clinics in many of their buildings—improving access, removing stigmas, and dismantling barriers to services. They are implementing programs that reach all students on a Tier 1 level and are fortifying their supports for Tier 2 and Tier 3. All are exploring strategic plans that are aligned and incorporate supportive curriculum K-12.

# **Immediate Advocacy Steps:**

- Facilities need a discharge plan for outpatient care.
  - o See: Nicole's Law (S.4345)
- Outpatient plans are needed for children under the age of 13.
- There is potential to create a Westchester County
  Dashboard/Database of resources for children/youth, allowing for
  easy access and assistance with placement of youth (beds,
  openings, etc.).
- Mental health urgent care facilities in Westchester would allow for easy access.
- To promote workforce development: partners can engage colleges to create programs and funding that will increase mental health professionals.
- Possible high school internships for counseling and social work can also engage students.