



Reimagining School: Cultivating a Climate of Care

By Jenny Barker, Editorial Director

Across the country schools have reopened, along with a fresh wave of concern for the COVID-19 Delta variant. At the same time, another concern is plaguing educators: a growing mental health crisis among young people.

The State of America's Young People

According to a recent report in the [Washington Post](#)¹, emergency departments have turned into “a tattered safety net for adolescent mental health care,” with suspected suicide attempts dramatically increasing among adolescents ages 12 to 17 during February and March of 2021. Among K-12 schools, concerns about student mental health are on high. [A Reuters report](#)² found that 74% of districts have seen multiple indicators of increased mental health stress among their students. A study conducted by [Challenge Success](#)³, surveying 75,000 high-school students who represented a diverse mix of students by gender, race and ethnicity, and geography, found that in fall 2020, 32% of students report mental health as a major source of stress versus 26% pre-pandemic.

“The pandemic has taken a toll on student mental health,” said Stephanie Taylor, Ed.S, NCSP, clinical director of psychoeducational services at PresenceLearning. “But it didn’t redefine what mental health is or how to address it. What it did is make it harder for everybody. It highlighted any gaps that adults and children had in their mental health, in their general coping abilities, in their ability to connect with other human beings. And it actively inflicted new trauma. The sooner that we address this deficit in critical mental health services, the less chance that there will be actual long lasting or unalterable damage.”

“Students can’t learn unless their minds are ready for it, You can’t just dump knowledge into them and hope for the best.”

— Dr. Dana Godek, manager of policy and research at the Collaborative for Academic, Social, and Emotional Learning (CASEL).

1 Katherine Ellison, “[Children’s mental health badly harmed by the pandemic. Therapy is hard to find.](#)” The Washington Post, August 14 2021.

2 Benjamin Lesser, M.B. Pell, Kristina Cooke, “[Special Report: As U.S. schools shuttered, student mental health cratered, Reuters finds.](#)” Reuters, March 19 2021.

3 NBC News, Challenge Success, “[Kids Under Pressure: A Look at Student Well-Being and Engagement During the Pandemic.](#)” February 2021, Online PDF.

Mental Health Before & During COVID-19: Persistent Challenges

In America today, there are common barriers to children receiving mental health treatment. To start, there aren't enough mental health providers in communities across the United States, with the American Academy of Child and Adolescent Psychology's workforce map displaying the majority of counties in the US with [severe shortages](#)⁴. According to [Katherine Cowan](#)⁵, spokeswoman for the National Association of School Psychologists, K-12 classrooms are where children's problems are often first identified. But she says there is only one school psychologist for every 1,211 students, when the ratio should be 1 to 500. In addition, families may face challenges in a lack of convenience in appointments, in terms of location of services, parents' or caregivers' working hours, and the expense of treatment, even if they do have insurance. Families who live in rural areas often face particular challenges in access to mental health services. [About one-fifth](#)⁶ of the US population live in a rural area, and about one-fifth of those living in rural areas, or about 6.5 million individuals, have a mental illness. Yet it is estimated that as many as [65% of nonmetropolitan counties](#)⁷ do not have psychiatrists, and more than 60% of rural Americans live in designated mental health provider shortage areas.

On top of the structural challenges, families and their children often grapple with the stigma associated with mental health care. [An analysis of 44 studies](#)⁸ revealed that approximately 22% of participants across the studies reported embarrassment, negative social judgment, and employee-related discrimination as barriers to seeking mental health services. In addition, 32% reported confidentiality as a barrier to seeking help.

But there is a glimmer of hope for mitigating these issues, drawing upon lessons from the transition to telehealth services during the COVID-19. According to a study in the Journal of Affective Disorders Reports, [attendance in appointments](#)⁹ improved after the transition to telehealth, as indicated by fewer



cancellations and more appointments attended. Patients also showed significant improvement and decreases in symptoms. Integrating the benefits of teletherapy (or telehealth) into traditional school programs could be an important piece of solving the puzzle for children.

Why Mental Health in Schools

Amid the increased turmoil in the lives of children, schools are still tasked with ensuring they can absorb learning and be good to one another. Yet if children don't show up to school feeling safe and well, they aren't ready to learn. Research shows that a [lack of](#)¹⁰ treatment can bring significant consequences to children, including greater difficulty in academic performance.

4. "Practicing Child and Adolescent Psychi." American Academy of Child & Adolescent Psychiatry, 2021.

5 Katherine Ellison, "Children's mental health badly harmed by the pandemic. Therapy is hard to find." The Washington Post, August 14 2021.

6 Morales DA, Barksdale CL, Beckel-Mitchener AC. A call to action to address rural mental health disparities. J Clin Transl Sci. 2020 May 4;4(5):463-467. doi: 10.1017/cts.2020.42. PMID: 33244437; PMCID: PMC7681156.

7 Morales DA, Barksdale CL, Beckel-Mitchener AC. A call to action to address rural mental health disparities. J Clin Transl Sci. 2020;4(5):463-467. Published 2020 May 4. doi:10.1017/cts.2020.42.

8 Clement, S., O. Schauman, T. Graham, F. Maggioni, S. Evans-Lacko, N. Bezborodovs, C. Morgan, N. Rüsch, J. S. L. Brown, and G. Thornicroft. "What Is the Impact of Mental Health-related Stigma on Help-seeking? A Systematic Review of Quantitative and Qualitative Studies." Psychological Medicine 45, no. 1 (2015): 11-27. doi:10.1017/S0033291714000129.

9 Hannah E Frank, Nicholas M Grumbach, Selby M Conrad, Julia Wheeler, Jennifer Wolff, Mental health services in primary care: Evidence for the feasibility of telehealth during the COVID-19 pandemic, Journal of Affective Disorders Reports, Volume 5, 2021,100146,ISSN 2666-9153, https://doi.org/10.1016/j.jadr.2021.100146.

10 Danielle Swick and Joelle D. Powers, "Increasing Access to Care by Delivering Mental Health Services in Schools: The School-Based Support Program." School Community Journal, Vol 28, No. 1, 2018.



The good news, however, is that schools are uniquely positioned to cultivate a holistic and meaningful “climate” of care for the young people they serve. Why? Part of the reason is timing and another part is due to access and trust. [Mental illness most often presents](#)¹¹ in school-aged children, and children spend a significant amount of their awake time in a school setting. Research shows too, in fact, that students are more likely to seek counseling when [services are available in schools](#)¹².

“Schools want to support students’ mental health and well-being. Mental health care providers who are connected to the school community can help teachers learn to spot the early signs of distress or deficits,” said Taylor. “The challenge is how to do it. We need to recognize all the hurdles our schools have in their way. Funding and staffing are always a huge hurdle for schools, but so is the perception about their function, which ultimately dictates how time is allocated in a student’s day. Mental fitness needs to be prioritized, funded, and added to the school day, just as physical fitness is.”

In order to be successful, schools need more resources and need support in building mental health and social and emotional learning into their day. Just seven percent of more than 1,400 educators surveyed in Houghton Mifflin Harcourt’s 2020 [“Educator Confidence Report”](#)¹³ said they were prepared to address the emotional needs of students during the COVID-19 disruption. Schools also need support in measuring what matters most.

“Until it is universally recognized at the federal level, state level, and superintendent level that mental health is going to be taught, tracked, and outcomes monitored, it will never be seen in the same way as academics and the systemic changes that need to happen in order to make improvements will never happen,” said Taylor. “That’s just the reality of it because all of us are that way—if we can’t track something and see how what we’re doing matters, we’re less likely to continue doing it.”

[The American Rescue Plan](#)¹⁴ (or COVID-19 stimulus package), which provides a substantial amount of funding for schools, may actually present an unusual opportunity for schools to reimagine and put in place new tools that meet each individual student’s needs in the best ways possible. By investing in innovative solutions ahead, districts can help solve leading issues—the shortage of providers, the growing demand for flexible work solutions, restrictions in access for students and families, and ongoing uncertainty in today’s world—and build an optimal environment for tackling the crisis for children in their care.

The Time Is Now: Innovative Solutions in Schools

Throughout the spring and summer, the national conversation has centered on getting kids back into school “in person” to help mitigate the growing mental health crisis that accelerated during COVID-19.

11 Danielle Swick and Joelle D. Powers, [“Increasing Access to Care by Delivering Mental Health Services in Schools: The School-Based Support Program.”](#) School Community Journal, Vol 28, No. 1, 2018.

12 National Association of School Psychologists. (2021). [Comprehensive School-Based Mental and Behavioral Health Services and School Psychologists \[handout\]](#). Author.

13 [“Experiences from the spring of 2021.”](#) HMHCO, HMH’s 7th Annual Educator Confidence Report, 2021.

14 Jenny Barker, [“American Rescue Plan: Funding Explained...for Schools and Students.”](#) PresenceLearning, May 12 2021.

But that alone can't solve the problems that have existed for some time and that have only increased during the pandemic. Although in-person experiences certainly serve an important role in helping children to thrive and build relationships, there is an alternative view that is worth exploring more deeply: Many schools have seen success during the pandemic in deploying online, remote solutions to support continuous evaluations and services for their students.

"There's a real need to meet students where they are—and deploy innovative tools and strategies to reach them," said Kelly Wolfe, vice president of strategic partnerships and regulatory compliance of PresenceLearning. "In order to prepare for the future, schools need to diversify their services, and policymakers need to help in [opening up access to providers](#)¹⁵ who live and work in communities and states beyond where the students reside."

The answer may lie in using technology as an enduring supplement to in-person capabilities. With a secure, efficient, and engaging [online therapy platform](#)¹⁶, for instance, schools can transition smoothly from delivering services in a school-based, remote, or hybrid environment. With access to a national network of online providers, they can also draw upon a broader population of skilled and talented clinicians as they manage the volume and range of needs in children.



An online solution can also help to mitigate issues of travel time, convenience, and overall accessibility to services. For clinicians, it can help in reducing "windshield" (driving) time and help them to see more students in a given day. For families, it can help make services more convenient and accessible, and for students, it can help make services feel more confidential.

"When I first started offering counseling services online, I wondered what it would be like to establish rapport with my students because that is critical. Would they trust me online?" said Robin Corder, Ed.S., NCSP, clinical account manager for PresenceLearning. "But the reality was they did and so much more. What I actually saw versus in-person sessions was that students just felt really comfortable opening up to me in the online format. They didn't have the concern that I may know their parents and would therefore talk to their parents about them. They didn't have to fear running into me at the grocery store or church after telling me their most personal, most vulnerable thoughts."

There Were Success Stories

As case in point, there was not all doom and gloom for students during the pandemic. An online therapy platform, such as a specially-designed platform with digital assessments, activities and games built into it, can help districts manage the growing need among children. Schools can also essentially "extend" their team by adding live, online clinicians and services to the school model.

Pleasanton USD partnered with PresenceLearning to help educate district providers in teletherapy and tele-assessment and to provide access to the company's education-built teletherapy platform to conduct services while students are at home.

"Being able to use the PresenceLearning platform to administer assessments has allowed me to get caught up on my caseload. Students are very comfortable with the online platform and I am able to test at least two students a day," said Valeria Reynoso, school psychologist for Pleasanton USD.

The School District of Lee County also turned to teletherapy and remote evaluations with PresenceLearning in order to address their backlog in evaluations and increase capacity for developing students' coping skills and supporting mental health care.

¹⁵ Jenny Barker, "How States Can Open up Access to Teletherapy." PresenceLearning." May 07 2021.

¹⁶ "Therapy Essentials." PresenceLearning.

"We wanted to identify the overall impact of this year on kids and plan ahead to get in front of it," said Amy Clark, director of psychological and social work services. "The PresenceLearning psychologists we deployed are licensed in Florida and have been trained in our process. They provide the same services as our in-person psychologists, just over the live, online platform. They also give us access to bilingual psychologists."

Whole Child: Social Emotional Learning & More

It's important to note that student wellness is not merely a lack of mental illness. It also includes social, emotional, and behavioral health, and the ability to cope with challenges. According to Dr. Robert Avossa, former superintendent of schools in Palm Beach County, addressing the root and symptoms of the mental health crisis in America requires a "whole child approach." He says districts need to put in place intentional approaches that can help children "before they get to a more critical level of need."

"The act of learning itself is social and emotional learning," said Avossa. "Teachers can assign stories about characters grappling with their feelings or working through feelings of being stressed. Teachers can witness the engagement of their students and their relationships and provide useful insights on how each child is doing day-to-day. Superintendents and principals should really encourage the 'academic side' of the school to support or expand support for this important topic too."

Avossa also points to the [Multitiered Systems of Support](#)¹⁷ (MTSS) or the [Continuum of MHS](#)¹⁸ for guidance, which are evidence-based frameworks for integrating multiple systems and services to address students' academic achievement, behavior, and social-emotional well-being.

"As we begin to recover from the pandemic, we can't merely look to the counseling or special education departments within our nation's schools for support," said Avossa. "Rather than assuming that the school social worker or counselor should manage this area alone, superintendents and principals should work intentionally with their teachers to build support into the general education curriculum."

What are some steps to get started on student care in the current environment? Avossa recommends that school leadership and educators should work together to:

- Acknowledge the trauma related to the pandemic.
- Build awareness of the importance of social-emotional health to learning
- Develop their own skills through professional learning opportunities
- Help connect young people with the right resources.

Dana Godek of CASEL further emphasizes the importance of data and communication among school leadership.

"We need the willingness of stakeholders in every school district to collect and review data on how their kids are doing and be honest and collaborative about how to fill the gaps they see," said Godek. "We need to think about what are the most engaging practices to get parents and caregivers in discussions with their school to figure out strategies to help bridge those gaps and make each child's school experience more meaningful."

There may not be a single solution to supporting and nurturing the mental health and social and emotional wellness of today's kids who have grown up during the pandemic. But, with more support for schools and families and a diverse range of innovative tools such as teletherapy to draw upon, schools will be better positioned to cultivate the "climate of care" that only they can provide—and to ensure that it is both sustainable and scalable in the years ahead.

As you and your school consider how to meet students where they are, online psychoeducational services and assessments may support your school in extending its in-person team and reaching students at home and in school. Get in touch for a consultation today.

[GET CONSULTATION](#)

¹⁷ "ESSA and Multitiered Systems of Support for School Psychologists," NASP : National Association of School Psychologists, Accessed on 2021.

¹⁸ "Continuum of School MHS," National Council for Mental Wellbeing, Accessed on 2021.