Promoting Mental Health Education in Schools through Legislation:  
*Strategies for Advocacy and Implementation*

Jenifer Urff, JD, Massachusetts Association for Mental Health

*Annual Conference on Advancing School Mental Health*  
*Austin, TX – November 7-9, 2019*
Mental Health Education Laws

States requiring mental health education:
  – New York
  – New Jersey
  – Virginia (9-10)
  – Maine
  – Pennsylvania
  – Florida

States considering mental health education laws:
  – Massachusetts
  – Delaware
  – Kentucky
  – South Carolina
What is Driving Mental Health Education Laws?

• Increased rates of mental health needs
  – Prevalence rates
  – Special needs/accommodations and IEPs
• Suicide
• School safety
• Student advocacy
What Do We Mean by Mental Health Education?

• Universal; primary intervention
• Distinct from mental health services and supports
• Purposes:
  – Increase mental health knowledge
  – Improve attitudes toward mental health; decrease stigma
  – Increase help-seeking behavior
  – Promote resiliency

Mental health education is designed to give students the information they need to better understand, value, and protect their mental health.
Social Emotional Learning
Core Competencies

Mental Health Association of New York State
### Can Mental Health Education Help?

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<tr>
<th></th>
<th>Probably</th>
<th>Possibly</th>
<th>Probably Not</th>
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<tbody>
<tr>
<td><strong>Increased Knowledge</strong></td>
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<td><strong>Improved Attitudes</strong></td>
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<td><strong>Help-Seeking Behavior</strong></td>
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Leah Harris:

We ... need to teach students that adversity, while affecting us in significant ways, is not destiny. The brain is neuroplastic, or able to heal itself, especially when we are exposed to the right kinds of social support, and learn strategies for regulating our chronically-stressed nervous systems. **We need to underscore that healing is always possible, and affirm the many ways in which young people manage to cope and survive in the face of incredible adversities.**

PROMOTING MENTAL HEALTH EDUCATION IN SCHOOLS THROUGH LEGISLATION

STRATEGIES FOR ADVOCACY AND IMPLEMENTATION

Lucas Johnson
Director, Coalition For The Common Good
Coalition for the Common Good: Public interest group aiming to raise awareness of issues that affect all Americans through the creation, proposal, and lobbying of non-partisan policy alternatives.

Has passed legislation in Virginia and Maine concerning mental health education in K-12 public high school health classes.

Organizing with students from five states aimed to improve the mental health environment of schools through the passage of legislation created, written, and lobbied by and for students.
K-12 Mental Health Education: Bringing mental health education into K-12 health classes to provide a more holistic and substantive approach to human health.

Mental Health First Aid for School Personnel: Aims to increase school personnel’s knowledge of mental health and improve school mental health environments through the implementation of Mental Health First Aid into employment requirements.

Mental Health Counselor Pilot Program: Incorporates mental health counselors into middle and high schools to provide substantive on-site support for at-risk students.
2018:
Enaction of $150,000 of funding for full-time mental health counselors in three high schools in Albemarle County Public School District
Passage of mental health education bill unanimously in Virginia General Assembly

2020:
Effort to introduce Mental Health First Aid for training for school personnel and mental health counselor pilot program
2019:
Passage of mental health education bill unanimously in Maine State Legislature

2020:
Effort to introduce mental health counselor pilot program in Maine State Legislature
2019 LEGISLATIVE AIMS

1. Alaska: Mental Health Education Bill - Prefiled
2. Arizona: Mental Health Education Bill - Prefiled
3. Delaware: Mental Health Education Bill - Prefile Attempt
4. Indiana: Mental Health Education Bill - Prefile Attempt
5. Kentucky: Mental Health Education Bill - Prefiled
6. Maine: Mental Health Counselor Pilot Program - Prefile Attempt
7. Virginia: Mental Health Counselor Pilot Program - Prefile Attempt
8. Virginia: Mental Health First Aid for School Personnel - Prefile Attempt
Student perspective matters, especially on issues they face every day and can readily identify as problems in their community.

Student support and input is fundamental to raising awareness of an issue, and integral to the success of any policy proposal.

We believe successful policy writing combines professional advocacy and student initiative.
Promoting Mental Health Education in Schools through Legislation: Strategies for Advocacy and Implementation

The 2019 Annual Conference on Advancing School Mental Health

November 8, 2019

Jessica Larochelle, MPH
Director, Public Policy and Government Relations
Massachusetts Association for Mental Health
About MAMH

Mission and Vision

*MAMH is committed to advancing mental health and well being by promoting prevention, early intervention, effective treatment and research to address social, emotional and mental health challenges.*

Legislative, Budgetary, & Regulatory Advocacy

Knowledge Dissemination, Training, & Technical Assistance
COMMUNITY CATALYST SYSTEM OF ADVOCACY

EVALUATION

OPPORTUNITY

- Campaign Development
- Communications
- Resource Development
- Policy Analysis & Advocacy
- Coalition & Stakeholder Alliances
- Grassroots Organizing

LEADERSHIP

POLICY CHANGE

*Graphic courtesy of Community Catalyst
Opportunity in Massachusetts

- Few education mandates in Massachusetts
- The Massachusetts Comprehensive Health Curriculum Framework last revised in 1999
- Data from the MA Department of Elementary and Secondary Education, MA Department of Public Health, MetroWest Health Foundation, clearly illustrate need
- Other states achieving change though legislative advocacy provide inspiration
Advocacy Framework

COMMUNITY CATALYST SYSTEM OF ADVOCACY

- OPPORTUNITY
  - Campaign Development
  - Resource Development
  - Coalition & Stakeholder Alliances
- LEADERSHIP
  - Communications
  - Policy Analysis & Advocacy
  - Grassroots Organizing
- EVALUATION
- POLICY CHANGE

*Graphic courtesy of Community Catalyst*
Core Advocacy Capacities

GRASSROOTS
• Let’s Empower, Advocate, and Do Inc. (LEAD)
• Lucas Johnson (Virginia, Maine, and beyond)

GRASSTOPS STAKEHOLDERS
• MA Dept. Elementary and Secondary Education, Safe and Supportive Schools
• Social Emotional Learning Alliance for Massachusetts
• Massachusetts School Mental Health Consortium
• Massachusetts School-Based Health Alliance
• Behavioral Health Integrated Resources for Children Center
• MindWise Innovations and The Nan Project
• Children’s Mental Health Campaign (CF Adams Fund)
• Massachusetts Community Behavioral Health Promotion and Prevention Commission

POLICY ANALYSIS
• MAMH drafts literature review and policy brief
COMMUNITY CATALYST SYSTEM OF ADVOCACY

- Opportunity
  - Campaign Development
  - Resource Development
  - Coalition & Stakeholder Alliances

- Leadership
  - Communications
  - Policy Analysis & Advocacy
  - Grassroots Organizing

- Evaluation
  - Policy Change

*Graphic courtesy of Community Catalyst*
Legislative Campaign
New Campaign Approaches

Advocacy Capacities: Flexibility and Responsiveness

- FY21 State Budget
- Promotion and Prevention Commission
Thank You!

• For more information about MAMH, please visit our website: www.mamh.org

• To contact me directly, please email me: JessicaLarochelle@mamh.org

THANK YOU!
Promoting Mental Health Education in Schools through Legislation:
Strategies for Advocacy and Implementation

Presented by:
Amy Molloy, Director
School Mental Health Resource and Training Center
Mental Health Association in New York State, Inc.
MHANYS is a not-for-profit organization that works to end the stigma against mental illness and promote mental health wellness in New York State. MHANYS achieves this through training, education, advocacy and policy, community-based partnership programming, and by connecting individuals and families to help.
Mental Health Literacy

When people are educated about:
• how to recognize mental health disorders
• common risk factors
• self-help strategies and types of professional help
• stigma and how it impacts help-seeking behaviors

Then people are more likely to:
• express positive attitudes about mental health
• seek professional help sooner
• be able to support others

Based on research by Dr. Anthony Jorm, Australia
“We possess the knowledge and tools necessary to increase awareness in young people about mental health, how to recognize signs and symptoms in themselves and others and how to get help. Why in the world would we withhold this lifesaving information from our youth?”

MHANYS Issue Brief: Mental Health Education in Schools 2016
TIMELINE: 2016
From Partnerships to Planning

- October 2016 – Governor signs Mental Health Education bill
- March 2017 – MHANYS hosts education summit
- August 2017 – State Education Department sends survey
- September 2017 – Advisory Council first meeting
- October 2017 – MHANYS publishes white paper
Mental Health Education in New York Schools

A REVIEW OF LEGISLATIVE HISTORY, INTENT AND VISION FOR IMPLEMENTATION

October 19, 2017

Included:
- Legislative Background
- National Trends
- Why Mental Health Instruction
- Mental Health Literacy
- MHANYS recommendations:
  Guiding Principles
  Curriculum Elements

Available at:
www.mhanys.org
1. A holistic view of wellness, including self-care and personal responsibility.
2. The concept of mental health as an integral part of health.
4. Instruction in the awareness and management of mental health crises.
5. The relationship between mental health and substance use.
6. Understanding of how stigma & cultural attitudes contribute to discrimination.
7. The concept of recovery.
8. The implications of risk factors, protective factors and resiliency.
9. How to identify and leverage appropriate professionals, services & supports.
“All schools shall ensure that their health education programs recognize the multiple dimensions of health by including mental health, and the relationship of physical health and mental health, so as to enhance student understanding, attitudes and behaviors that promote health, well-being and human dignity.”
School Survey Results

Rank Order of Mental Health Instruction Topics

- Concept of Wellness
- Recognition of Signs &...
- MH Crisis Awareness
- MH and Substance...
- Impact of Stigma
- Recovery
- Risk/Protective Factors
- Who can Help?
Concerns About Ability to Teach Mental Health

- Yes: 17.3%
- No: 82.7%
Barriers that Might Interfere With Teaching about Mental Health

- Not Enough Time: 31%
- Parental: 18%
- Other: 16%
- Knowledge: 13%
- Treatment Accessibility: 21%
Who Would Coordinate Instruction in Your School/District?

- Health Educator: 39.19%
- District Health Coord.: 11.53%
- Elementary Teacher (H): 4.98%
- School Social Worker: 40.37%
- School Counselor: 31.45%
- School Psychologist: 36.44%
- School Nurse: 9.04%
- Other: 8.52%
Mental Health Advisory Council

WORKGROUPS:

1) Mental Health Instruction/Resources for the Classroom
2) Multiple Dimensions of Mental Health
3) Mental Health Resources for Schools, Students and Families
4) Supporting a Positive Climate and Culture
5) Implementation
TIMELINE: 2018
From Guidance to Implementation

• January 2018 – MHANYS advocates for Resource Center
• April 2018 – MHANYS receives $1M in state budget
• May 2018 – guidance is presented to Board of Regents
• July 2018 – law takes effect, Resource Center is launched
guidance is shared with education community
TIMELINE: 2019
Building on our Success

January 2019– MHANYS advocates for continued funding
April 2019 – MHANYS receives $500K in Governor’s budget
June 2019 – send survey to education community
August 2019 – first year evaluation is completed
School Mental Health Resource and Training Center: Utilization Data for Year One

**Educators Registered Since Launch of Site**
- The number of educators who have registered on the website from July 2018 to June 2019.
- **Over 1,500 Registered**
  - June 30, 2019
- **Site Launch**
  - July 1, 2018

**Future Growth**

**NYS Public School Districts’ Participation Exceeds Expectations**
- **40% (Target)**
- **67% (Achieved)**
- Percentage of NYS Public School Districts to access the School Mental Health Resource & Training Center since July 2018.

**Professional Development Opportunities Maximized**

**Trainings**
- 140 facilitated
- 5 regional summits

**Participants**
- 7,065 attended
- 600 participated

Participants have included educators, administrators, and other school staff.

Note: The statistics above include data from July 1, 2018 – June 30, 2019.
School Mental Health Resource and Training Center

Utilization Data 2018-2019

**IMPACT**

More than 1,500 educators have accessed the Center’s K-12 “We All Have Mental Health” lesson plans on the website.

On December 12, an online training titled, “Supporting the Mental Health and Wellness of Students” was launched. Since then, 416 educators registered for the training.

The World Mental Health lesson plans were accessed approximately 1,800 times since they were posted on World Mental Health Day on October 10, 2018.

“Resource Briefs” provide a snapshot of programs for mental health instruction; 2,361 users have visited the webpage to view these resources.

The Center offers a search tool for community-based resources (by county) which has been visited 2,428 times since it was launched in October.

Regional staff provided mental health instruction in 21 school districts; 4,900 middle school and high school students received mental health education.
How have you used the information from the School Mental Health Resource and Training Center website? (check all that apply)
School Mental Health Resource and Training Center

Utilization Data 2018-2019

I have found this resource incredibly effective. One of the few partnerships that I have felt has had an immediate impact on our school community.

—Educator
Survey Respondent, June 2019

REGIONAL SUMMITS

97% of those completing evaluations from all five Regional Summits agreed that the topics covered were relevant and the content could be applied to their work with students and/or in the school setting.

89% reported that the content increased their understanding of the alignment of the Mental Health Education Framework with other New York State Education Department initiatives.
THANK YOU!

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