From Crisis to Action: A Guide for State and Local Leaders on Youth Mental Health in Schools

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October 14, 2025

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National Center for School Mental Health

MISSION:

Strengthen policies and programs in school mental health to improve learning and promote success for America's youth

Focus on advancing school mental health policy, research, practice, and training

Shared family-schools-community agenda

www.schoolmentalhealth.org www.theshapesystem.com

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4 days of Keynote addresses; School mental health awards; Conference sessions; Symposia; Intensive training workshops; Poster & networking reception; Excellent exhibitors; more!

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December 1-4, 2025 · Orlando, FL

- ✓**Registration** open
- ✓**Exhibitors & Sponsors** interest form available
- ✓**School mental health award nominations** open through Oct 17
- ✓**Hotel** rooms available

The Village Behind the Victory:
Lessons From an Olympic Athlete and Family's Journey
Keisha Bishop & Noah Lyles
Keynote Address

The Future of School Mental Health:
Youth Leadership and Advocacy
Facilitated by Tiffany Beason, PhD, & Caden Fabbi, MPP
Keynote Panel with Youth Leaders

A guide for state and local leaders on youth mental health in schools

Published by the National Center for School Mental Health
Designed by Cameron Sheedy, M.S.

Presented by Dr. Sharon Hoover, Professor Emeritus

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This guide was designed by Cameron Sheedy, M.S.

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The Youth Mental Health Crisis

1/3

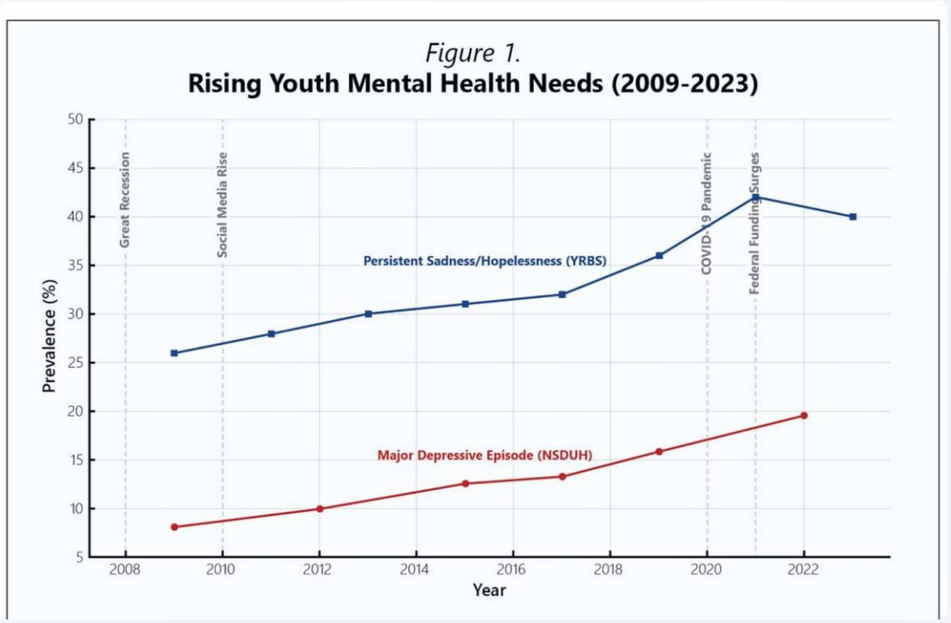
Students Report Sadness

More than one in three high school students report persistent feelings of sadness or hopelessness

2nd

Leading Cause of Death

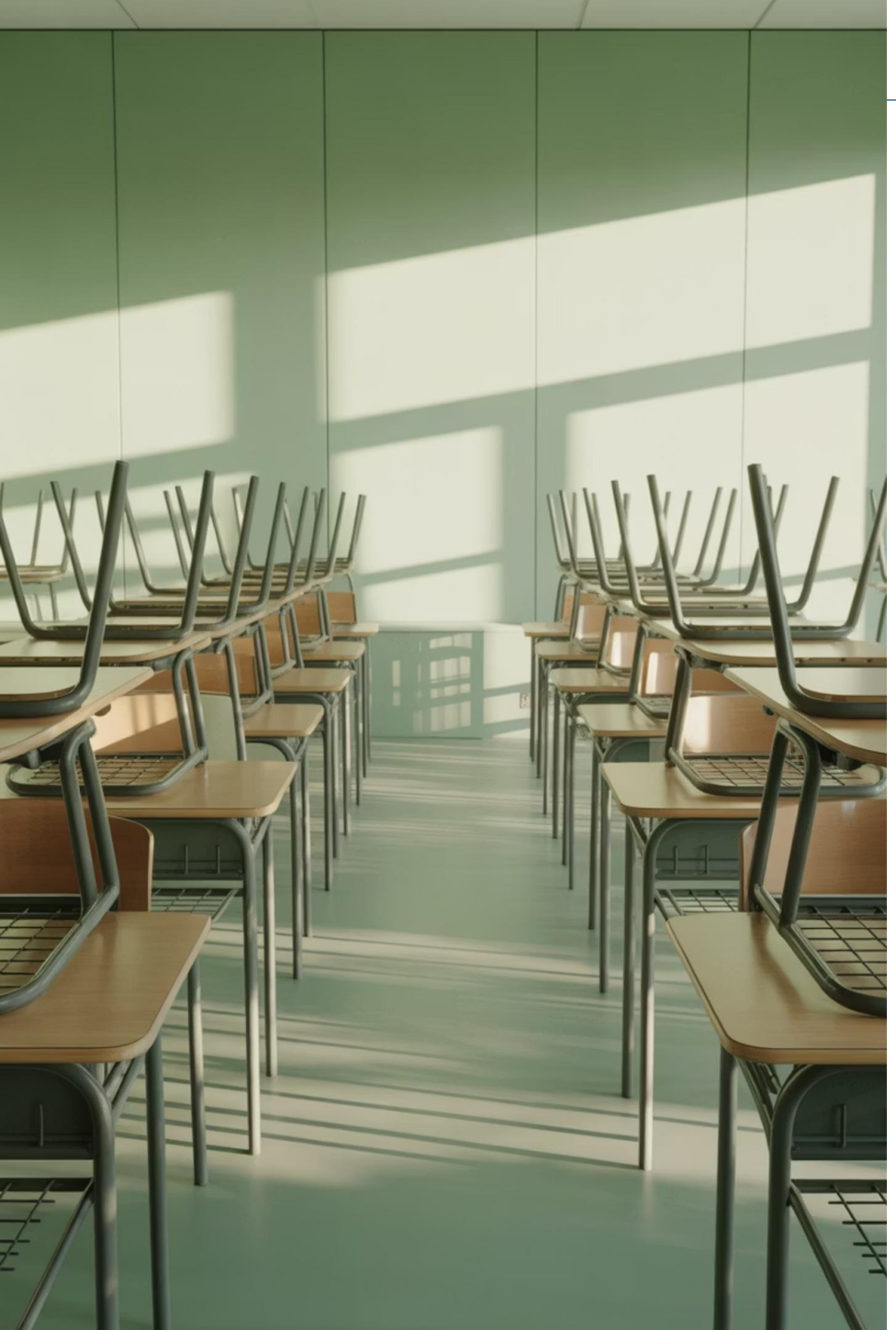
Suicide is the second leading cause of death among youth ages 10–24



Rising Depression Rates

Data show sustained increases in U.S. adolescents reporting major depressive episodes and persistent sadness.

Key Insight: These are not temporary spikes but long-term trends requiring durable, systemic supports



2020: The Crisis Accelerated

Pre-existing Stressors Amplified

- Community violence
- Family financial insecurity
- Discrimination

New Challenges Introduced

- Prolonged social isolation
- Disruption of routines
- Learning loss

From Crisis to Action

1

Recognize

Understanding the depth and scope of the mental health crisis facing our youth

2

Respond

Developing evidence-based strategies and accessible resources

3

Transform

Creating lasting systems of support that cultivate resilience and hope

> "It's time to move from recognizing the crisis to *cultivating* solutions."

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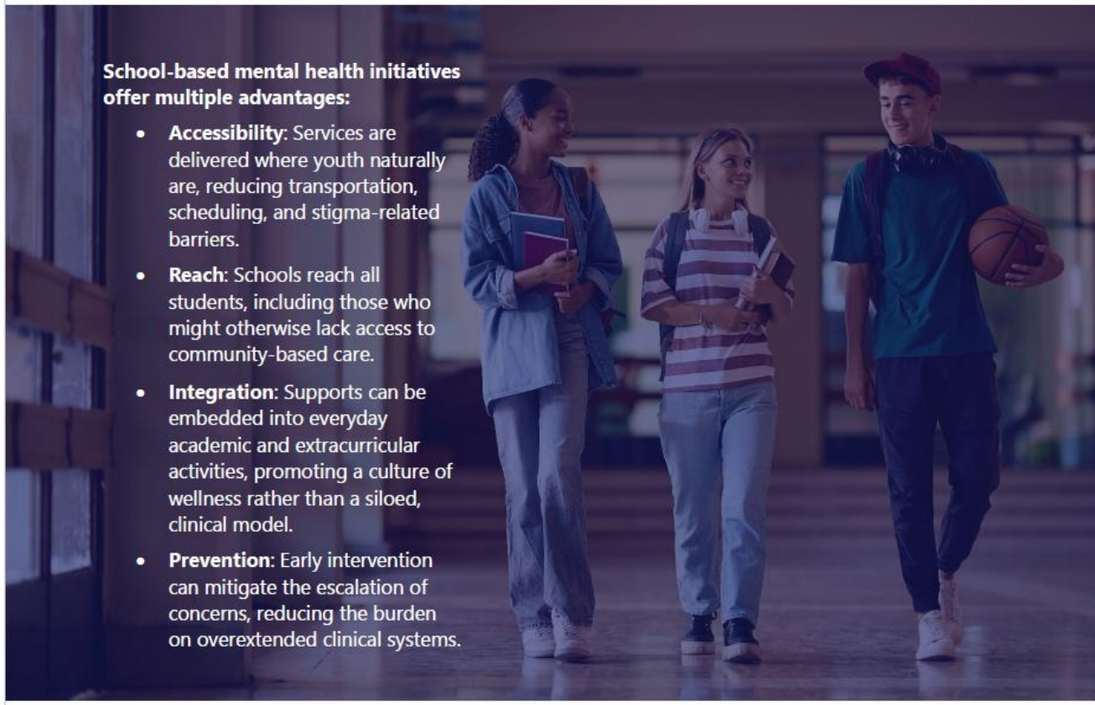
Schools are Essential

Students spend most waking hours in school.

Schools can identify concerns, provide prevention, and connect families with support.



Families Are Essential Partners

The Cornerstone of Children's Mental Health

Families provide relationships and contexts that shape development. Effective systems engage parents as equal partners.

When schools and families align, students experience consistent messages and stronger support systems.

The Federal Context

1

Unprecedented Investment

Billions infused through emergency relief and Bipartisan Safer Communities Act

2

Measurable Results

1,163 new staff hired, 13,155 retained, 774,385 students served in first 9 months

3

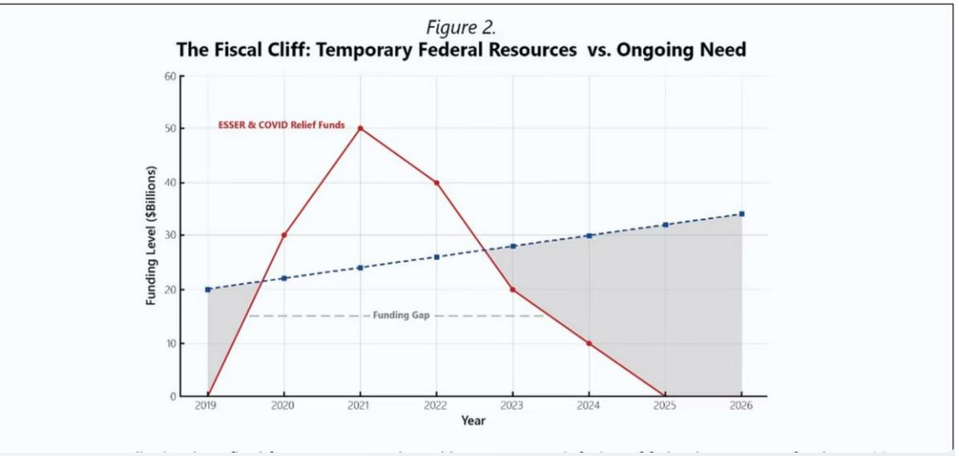
Time-Limited

Public health emergency funding sunsets create fiscal cliff

4

Uncertain Future

Evolving federal priorities create sustainability challenges



The Fiscal Cliff

As one-time resources wind down, schools face steep challenges while student needs remain high.

State and Local Innovation

Why Local Innovation Works

- Local leaders understand their communities' unique values, culture, and needs. They're positioned to:
  - Build cross-sector coalitions (education, health, social services)
  - Leverage existing community assets and relationships
  - Adapt strategies to local context and priorities

"Innovation is most effective when it is localized." Communities know their needs best and they're building solutions that work.

State Innovation: Oregon

Medicaid Expansion for Schools

Oregon broadened its Medicaid State Plan to reimburse services by school-employed counselors, social workers, and psychologists.

Created sustainable revenue through billing systems and training.

State Innovation: Texas

Child Mental Health Care Consortium

Statewide network connecting medical schools, providers, and schools through telehealth.

Sustained with general revenue funds after federal grants ended.

State Innovation: California

Mental Health Services Act

Funded by 1% tax on incomes over $1 million, MHSA provides counties flexible resources for community-driven initiatives.

Many counties partner with schools for prevention and youth services.

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Balancing Short- and Long-Term Goals

Immediate Impact

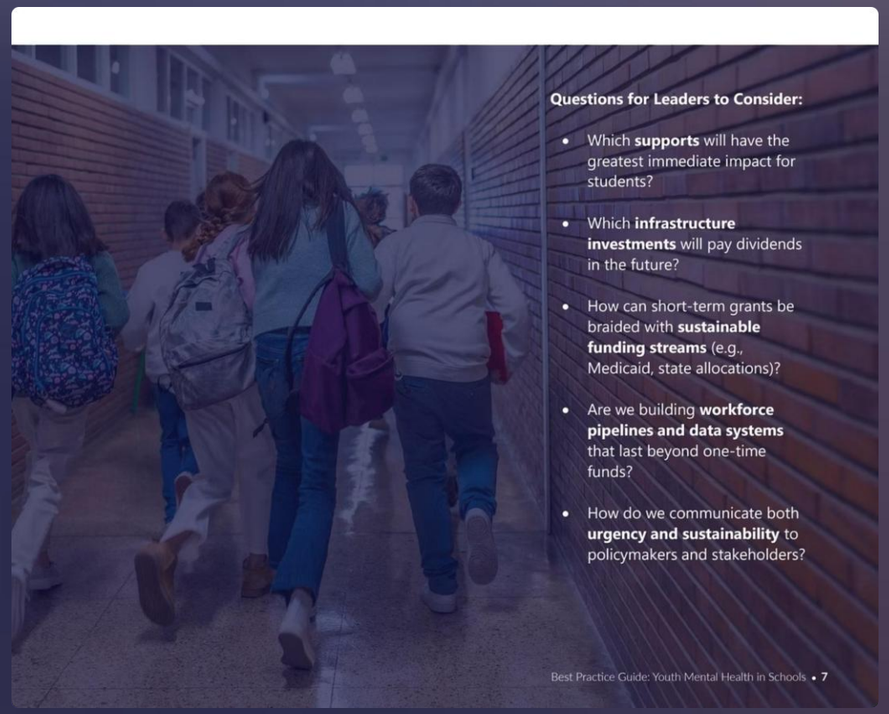
Expand evidence-based Tier 2 interventions to meet urgent needs

Infrastructure Investment

Build billing systems, data platforms, workforce pipelines

Braid Funding

Connect short-term grants with long-term financing streams



Act boldly to meet urgent needs while planting seeds for future growth

Framing Principles

Bipartisan Framing

Safe schools, strong families, responsible resources

Partnership

Students and families as active co-creators

Reach & Access

Reduce barriers and expand access

Educational Mission

Mental health integral to learning and achievement

Data-Driven

Guided by needs assessments and outcomes

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Three Interdependent Pillars

1. Comprehensive Service Array

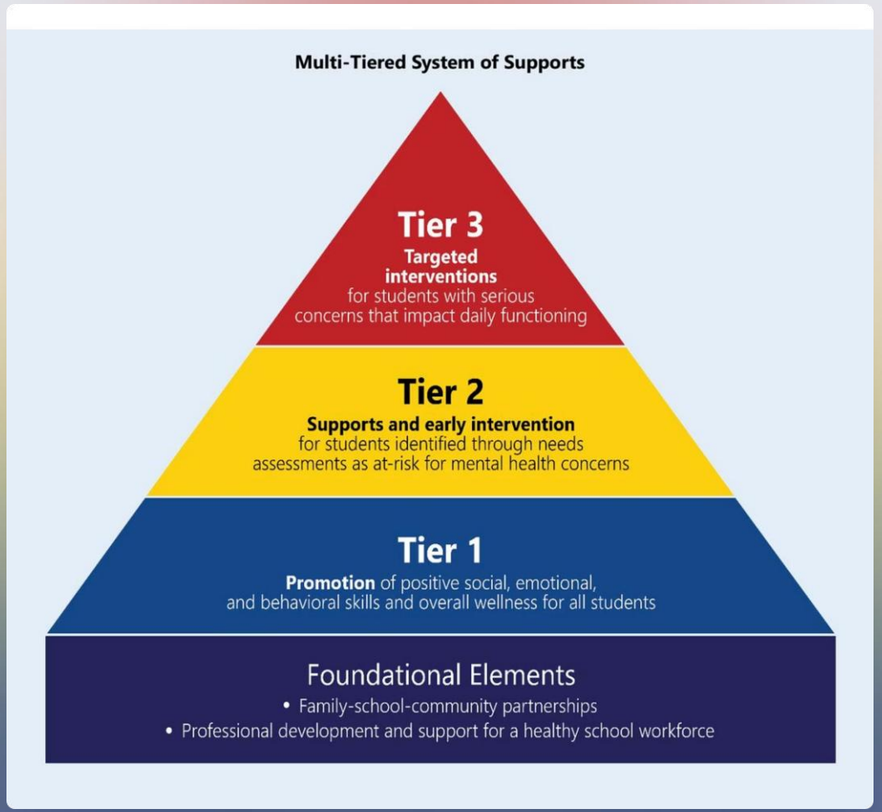
Tiered supports from prevention to intensive intervention

2. Expanded Provider Array

Traditional and non-traditional workforce strategies

3. Sustainable Funding

Braided federal, state, local, and philanthropic resources



Section I. Building a Comprehensive Service Array

Multi-Tiered System of Supports

Organizing prevention and intervention into an interconnected continuum

Tier 1: Universal Supports

Healthy Behaviors

Nutrition, physical activity, sleep, digital wellbeing

Life Skills

Resilience, self-regulation, positive relationships

Trauma-Informed

Understanding experiences, responding with empathy

Mental Health Literacy

Emotional vocabulary, stress management, help-seeking

School Climate

Belonging, safety, restorative practices

Student-Led Programs

Peer ambassadors, youth voice, leadership

Texas Coordinated School Health

Texas encourages coordinated school health models including nutrition, physical activity, health education, and parent engagement.

KIPP Texas instituted universal free healthy meals aligned with state standards.

Digital Literacy & Well-Being

Common Sense Education

Evidence-informed curriculum on screen time management, media balance, online relationships, and privacy.

Combines technical literacy with mental health and wellness.

Florida's Resiliency Standards

Statewide standards integrate resilience and life skills into K–12 education.

Emphasize coping skills, goal-setting, empathy, healthy decision-making.

Embedded into academic expectations rather than treated as add-on.

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Maryland Safe to Learn

Statewide requirements pairing physical safety with school climate strengthening. Each district has safety coordinator, threat assessment teams, and mental health services.

Schools using integrated approaches report fewer incidents and greater student perceptions of safety.

Staff Well-being Is Foundational

Montgomery County, MD

Mental health days, counseling access, wellness challenges, resilience training

California

Educator Workforce Investment Grant: coaching, peer support, wellness centers

Wisconsin

Compassion Resilience Toolkit: preventing burnout, self-compassion, healthy boundaries

Tier 2: Targeted Supports

Closing the "Missing Middle"

01

Evidence-Based Interventions

BRISC, SPARCS, SSET: 3–12 session skill-focused programs

02

Clear Referral Pathways

Structured systems with progress monitoring

03

Bridge the Gap

Support students with mild to moderate concerns

04

Build Capacity

Train educators, nurses, coaches to deliver supports

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Seattle's BRISC Integration

Brief Intervention for School Clinicians scaled district-wide. 3–4 session model helps students identify stressors, set goals, build coping strategies.

Standardized approach provides timely support, reduces crisis-driven referrals.

Tier 3: Intensive Services

Onsite or Virtual Clinical Services

Embedded clinicians reduce barriers to specialty care through partnerships with community agencies

Regional Hubs

Serve multiple districts with training, supervision, direct service

Crisis Response Protocols

Trauma-informed plans for emergencies with clear roles and communication

Reentry Plans

Structured supports for students returning from hospitalization or detention

Kentucky's Technical Assistance Network

Statewide network provides training, coaching, program design support for Tier 3 services.

Ensures even small and rural districts access expertise for intensive behavioral health supports.

Data Systems Drive Integration

Connecticut's CONNECT IV

Toolkit for aligning MTSS data with community mental health tracking.

Coordinates academic, behavior, and provider data to identify needs and monitor progress.

Florida's Accountability Model

Every district submits annual Mental Health Assistance Allocation Plan documenting tiered continuum strategies.

Links investment to planning and measurable outcomes, creating comprehensive state accountability.

Section II.
Expanding the Provider Array

The Workforce Challenge

Persistent shortages require expanding who delivers supports through layered workforce strategies

Non-Traditional Workforce Models

Community Health Workers

Trusted navigators, prevention specialists, cultural liaisons

Wellness Coaches

Bachelor's-level staff delivering Tier 1 and 2 supports under supervision

Youth Mental Health Corps

AmeriCorps mobilizing early-career mentors and paraprofessionals

New Mexico's Community Health Workers

CHWs expanded into schools, particularly in rural and tribal communities.

Bilingual, community-embedded staff act as navigators and cultural liaisons, bridging gaps between schools and health systems.

Nebraska's Behavioral Health Technician Training

Certificate program equips educators and paraeducators with practical behavioral health strategies.

45-hour e-learning plus supervised experiential learning.
Train-the-trainer model ensures ongoing capacity.

Technology Extends Capacity

Digital Tools

Screening, case management, evidence-informed apps

AI Support

Early identification, customized resources, data insights

Telehealth

Virtual coaching, telesupervision, rural access

Critical: Technology extends capacity but never replaces human connection

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Building the Specialty Pipeline

Scholarships & Forgiveness

Attract candidates to field, encourage service in high-need districts

University Partnerships

Place interns and residents in schools, create employment pipeline

Rural Telehealth

Connect trainees and clinicians to underserved areas

Career Ladders

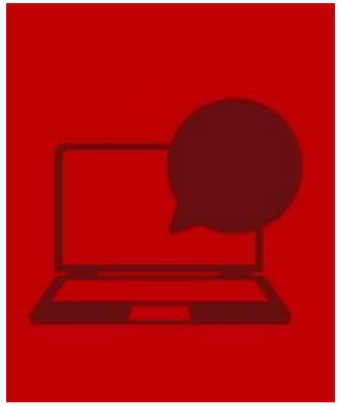
Support paraprofessionals pursuing advanced degrees

Minnesota's Workforce Pipeline

Grants cover attendance costs for students in accredited programs to become school psychologists, nurses, counselors, and social workers.

Includes wraparound services to help students complete degrees.

Mississippi's Tele-Mental Health



Policy-driven initiative expanding access through telehealth services.

Investment in broadband, dedicated state funding, staff training extends licensed provider reach to rural districts.

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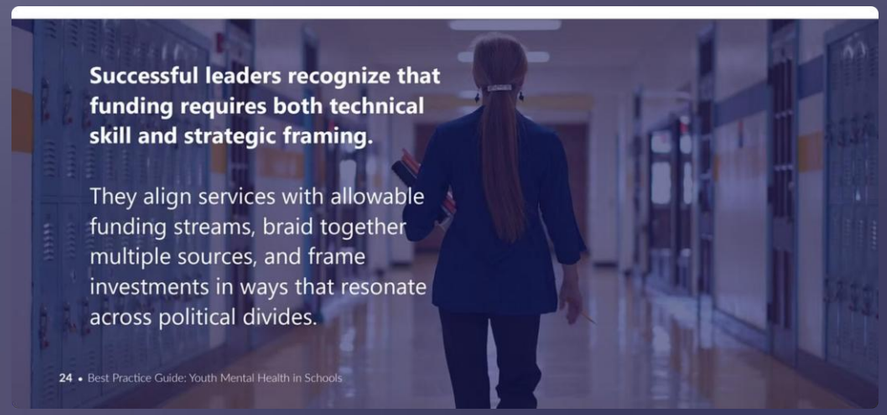
Section III. Funding Strategies to Sustain and Scale

Breaking the Boom-and-Bust Cycle

Stable, long-term funding is essential for comprehensive systems



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The Funding Imperative

The Challenge

Boom-and-bust cycle erodes trust, disrupts services

Dual Strategy

Adapt to federal shifts while building state and local mechanisms

Implementation Costs

$75K–$120K annually per clinician; $40K–$60K per wellness coach

Key Funding Sources

Federal Programs

Project AWARE, School-Based Mental Health Services grants, BSCA

Medicaid Reimbursement

School-employed and contracted providers

State Allocations

Mental health funding, flexible education formulas

Local Investment

Tax levies, philanthropic partnerships, business engagement

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Adapting to Shifting Federal Funding

The Fiscal Cliff

ESSER, CARES, ARPA funds ending 2026—urgent need for sustainable strategies

Changing Priorities

Federal programs competitive and time-limited; priorities shift with leadership

District Readiness

Maintain grant capacity, track sunsets, scan opportunities continuously

Advocacy Matters

Demonstrate how services improve attendance, reduce costs, boost graduation

Texas Child Mental Health Care Consortium

Innovative Model

Connects medical schools, providers, K–12 districts for psychiatric consultation

Bipartisan Support

Framed as cost-effective, locally controlled, essential for educational success

Sustained Investment

Secured through state general revenue after federal funding ended

Leveraging Medicaid: The Most Sustainable Source

Expand Services

Oregon, Arkansas cover school-employed staff, not just external providers

Update State Plans

Use amendments or 1115 waivers to expand coverage

Build Infrastructure

Billing systems, staff training, compliance processes create ongoing revenue

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Medicaid Considerations and Federal Context

Universal Access

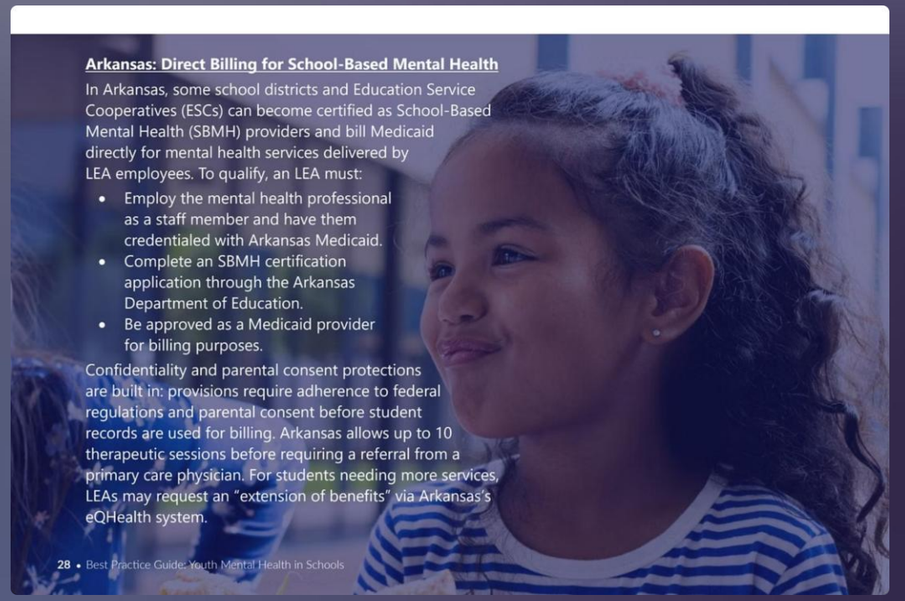
Ensure reimbursement doesn't limit non-Medicaid students; use schoolwide screening

Federal Fiscal Changes

H.R.1 proposes Medicaid reductions, increased admin requirements

State Leadership

Maintain billing practices, explore waivers, diversify funding streams



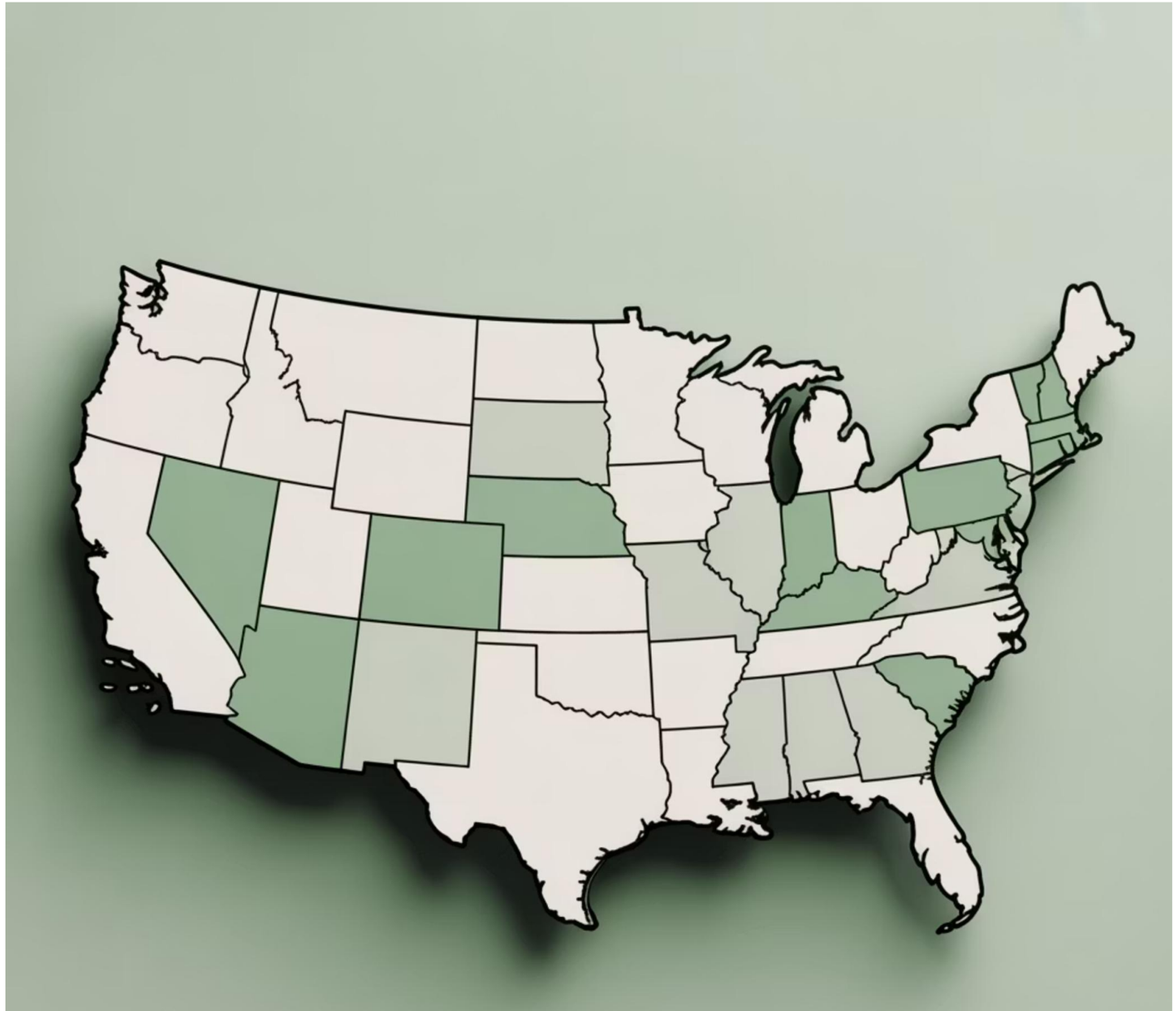
Healthy Schools Campaign Resource

25+ States Expanded

School Medicaid programs now cover services beyond IEPs, including behavioral health

Use the Map to:

- Check your state's status
- Learn from state examples
- Plan strategic expansion steps



Philanthropy and Creative Financing

Foundation Partnerships

Frame proposals around workforce development, access, youth empowerment

Business Engagement

Local donors invest when they see connection to community well-being

Innovation Capital

Use philanthropic funds to test new approaches, pilot programs

Local Tax Levies

Cincinnati uses voter-approved initiatives for stable, dedicated revenue

Building Systems That Endure

Align Resources

Map funding streams to tiered service array and workforce innovations

Seed Infrastructure

Use short-term funds for billing systems, data platforms

Advocate for Policy

Sustain alignment through state education plans

> When communities prioritize youth mental health, they find ways to pay for it.

Tools for Policy Action

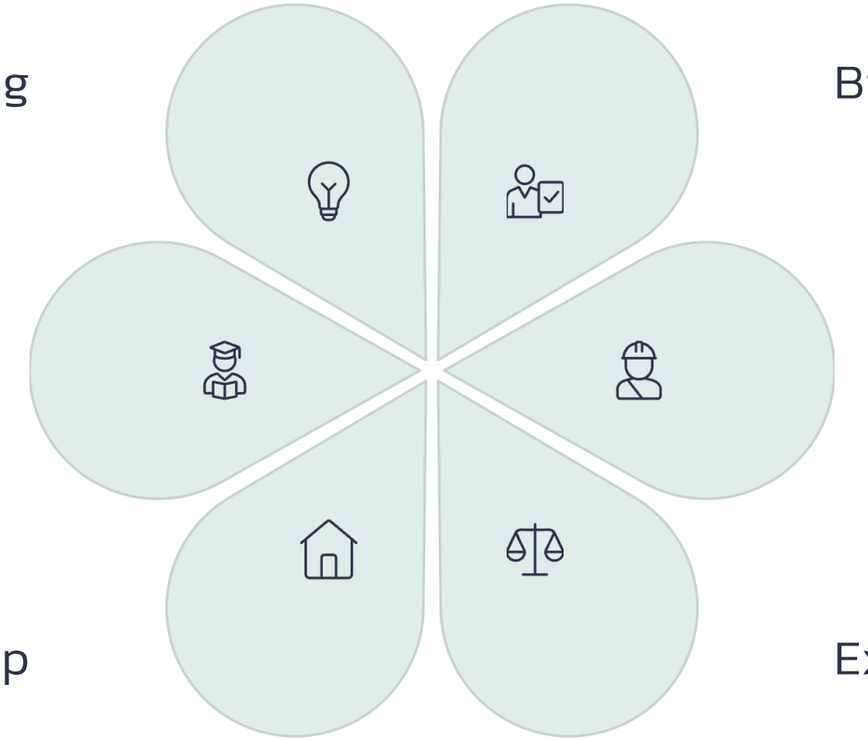
- **The School Mental Health Report Card** provides a state-by-state snapshot of policies that support school mental health, including measures of access, funding, workforce, and implementation.

- **The School Mental Health State Legislative Guide** offers policy levers, examples, and legislative language.

Moving Forward Together

Continuous Learning

Bipartisan Coalitions



Short-term Innovation

Systems Change

Youth and Family Partnership

Expand access

By uniting educators, families, policymakers, providers, and youth, we can move from fragmented efforts to a coherent national movement ensuring every student has access to the mental health supports they need to thrive.

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Action Agenda for Advancing School Mental Health

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A one-page checklist for state and district leaders*

1. Build a Comprehensive Service Array

- ☐ Strengthen **Tier 1 universal supports** *(e.g., life skills, trauma-informed practices, mental health literacy, school climate).*
- ☐ Close **Tier 2 gaps** with evidence-based group and brief interventions plus clear referral and monitoring systems.
- ☐ Ensure **Tier 3 access** through onsite/virtual clinical care, crisis protocols, and structured reentry plans.
- ☐ Embed **youth and family partnership** into every tier.
- ☐ Develop sustainability plans that outlast grants.

2. Expand and Diversify the Provider Array

- ☐ Deploy **non-traditional workforce models** *(e.g., community health workers, wellness coaches, Youth Mental Health Corps).*
- ☐ Invest in **pipeline programs** *(e.g., scholarships, residencies, university–district partnerships).*
- ☐ Provide **tiered training for all staff**, including teachers, coaches, and extracurricular leaders.
- ☐ Establish **career ladders** and incentives to reduce turnover and diversify the workforce.
- ☐ Build **policy infrastructure** *(e.g., credentialing, inter-agency planning, data systems).*

3. Secure Sustainable Funding

- ☐ Prepare for the **federal fiscal cliff** by identifying replacement strategies now.
- ☐ Expand **Medicaid reimbursement** for school-employed providers and prevention services.
- ☐ Build **district billing and compliance systems** that can generate recurring revenue.
- ☐ Leverage **philanthropy and local investment** to pilot innovations and seed long-term models.
- ☐ Explore **creative financing** *(e.g., local levies, flexible education formulas, outcomes-based funding).*

4. Promote Reach and Family Partnership

- ☐ Use data to **identify and address gaps** in access and outcomes.
- ☐ Partner authentically with **families and caregivers** as co-designers and decision-makers.
- ☐ Center **youth voice** through peer-led programs, advisory boards, and leadership opportunities.

5. Position School Mental Health as Essential

- ☐ Frame services as integral to **learning, safety, and workforce readiness**, not add-ons.
- ☐ Build **bipartisan coalitions** that emphasize accountability, local control, and cost-effectiveness.
- ☐ Embed mental health into **education mission statements, accountability frameworks, and funding formulas**.

*This agenda is meant to be adapted. Leaders can check off current strengths, highlight gaps, and identify priority next steps. Progress will look different across contexts, but the commitment is the same: every student deserves access to the supports they need to learn, grow, and thrive.

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National Center for School Mental Health

Strengthening policies and programs in school mental health to improve learning and promote success for America's youth.

Housed within the University of Maryland School of Medicine's Division of Child and Adolescent Psychiatry.

To learn more, visit: www.schoolmentalhealth.org

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Annual Conference on Advancing School Mental Health

The Nation's Leading Gathering

Each year, educators, mental health providers, researchers, advocates, youth, families, and policymakers come together for this transformative event.

The conference showcases cutting-edge research, innovative practices, and cross-sector collaboration focused on student mental health and well-being.

What You'll Gain

- Network with national leaders and peers
- Learn from exemplary programs and practices
- Discover effective strategies adaptable to your unique context
- Access the latest research and policy updates

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Quality Improvement Resources

The NCSMH provides comprehensive tools to help schools and districts build, evaluate, and sustain robust school mental health systems.

SHAPE System

School Health Assessment and Performance Evaluation: A free, interactive platform helping schools assess their mental health systems, set improvement goals, and access targeted resources.

Quality Guides

Comprehensive guidance across key domains: Teaming, Needs Assessment, Screening, Mental Health Promotion (Tier 1), Early Intervention & Treatment (Tiers 2 & 3), Funding, and Impact.

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Join the Movement

School and district leaders, educators, mental health professionals, and community partners can access the tools, knowledge, and national network needed to build comprehensive school mental health systems that truly make a difference.

01

Explore Resources

Access quality improvement tools and assessment platforms

02

Attend the Conference

Connect with leaders and learn innovative practices

03

Implement Change

Apply evidence-based strategies in your schools

04

Sustain Impact

Build lasting mental health systems for students

To learn more, visit: www.schoolmentalhealth.org