

School-Based Mental Health Partnerships

Young people receive mental health care in schools more frequently than any other setting, including doctors’ offices and mental health clinics (Duong, Bruns, et al., 2020¹). Living with poverty, unemployment, an inability to afford childcare, and a lack of access to local resources can be contributing factors to having mental health challenges, especially for historically underserved families. Schools are positioned as familiar, natural environments and often partner with local programs to increase student and family access to mental health services and supports. Since 2014, legislative funding has allowed Oregon Health Authority (OHA) the opportunity to expand critically needed mental health services to 74 schools across 17 counties.

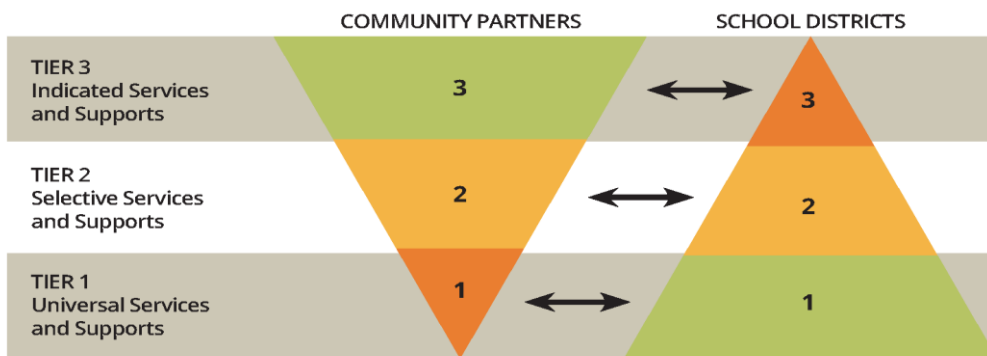
What are School-Based Mental Health (SBMH) partnerships and how do they work?

Community organizations that receive the legislative investment through OHA strategically partner with rural schools and districts where childhood poverty rates are high and there is limited access to mental health services. Partnerships often begin with conversations around learning the needs of the school and/or district and may include the agencies’ mental health workforce capacity and billing strategies. Many agencies and districts have written agreements or a Memorandum of Understanding (MOU) that outlines service provision, budget information and the SBMH providers’ scope of work. Collaborative, trusting relationships can take time to nurture and are key to the foundation of strong SBMH partnerships.

Legislative general funds are often braided with other sources to contribute funding, including:

- ▶ Billing of Medicaid and/or private insurance
- ▶ School districts use their Student Investment Account (SIA) funds
- ▶ Local, state, federal and philanthropic grants

An Example of Complementary Roles and Resources of Community Partners and School Districts in Comprehensive School Mental Health Systems



This figure illustrates how SBMH providers fulfill complementary roles in local schools and districts and work alongside school staff and educators to support student mental health and wellness.

Source: Weist, M.D., Short, K., McDaniel, H., & Bode, A. (2016). The school mental health international leadership exchange (SMHILE): Working to advance the field through opportunities for global networking. *Advancing Comprehensive School Mental Health Systems: Guidance from the Field*. 2019.

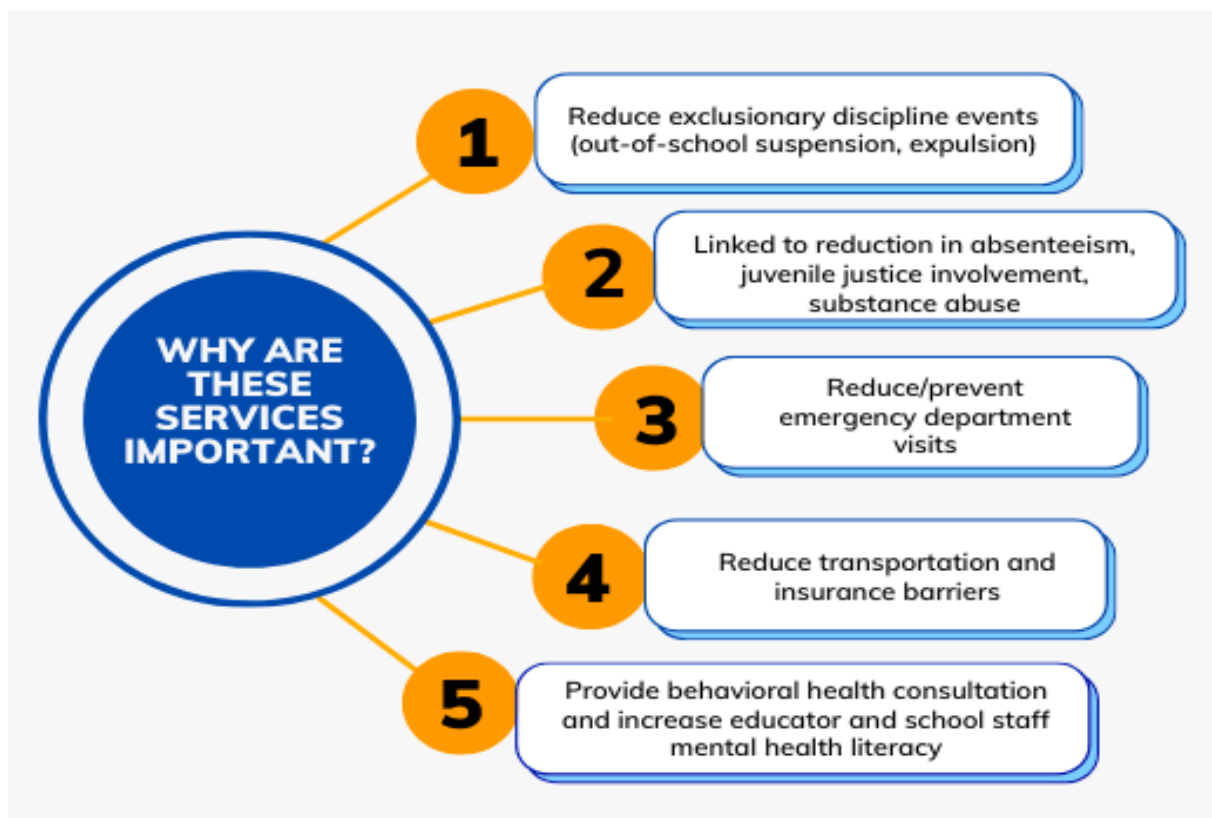
¹ Duong, M.T., Bruns, E.J., Lee, K. et al. Rates of Mental Health Service Utilization by Children and Adolescents in Schools and Other Common Service Settings: A Systemic Review and Meta-Analysis. *Adm Policy Ment Health* (2021 May; 48(3): 420-439.

What do SBMH providers do?

SBMH providers employed to provide services are master's level therapists or qualified mental health professionals and licensed under state law to serve school-age children.

SBMH providers are available on school campuses or via telehealth and are poised to provide brief, short-term individual, group and family therapy along with care coordination, suicide prevention and crisis services. Services are available to any student, regardless of income or insurance status and are person-centered, strengths-based, trauma-informed, culturally responsive and linguistically attuned.

Providers maintain therapeutic relationships with students who need ongoing behavioral health support, covering concerns such as managing anxiety, depression and suicidal feelings, trauma, conflict resolution, navigating relationships, self-regulation and self-management skills.



Click [here](#) to learn more about counties currently receiving school-based mental health funding through HSD, current schools being served, helpful links to school mental health best practices and other information.

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