



STUDENT MENTAL HEALTH: ARE SCHOOLS DOING ENOUGH?

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ISSUE

Are San Mateo County K-12 public school students receiving adequate mental health support? If not, what more should be done?

SUMMARY

A recent study of youth in San Mateo County, *Adolescent Report 2014-15*, found that mental health challenges facing County adolescents are staggering.¹ The report concluded that nearly 70% of the public school students sampled reported being depressed, anxious, or emotionally stressed. Thirty-eight percent of females and 23% of males reported having suicidal thoughts.²

In one high school district alone—the San Mateo Union High School District—131 students were assessed for mental health issues or taken to the hospital from school, almost all because of suicide concerns, during the 2013-2014 school year. The district found 98 students in similar distress in the first semester of the 2014-2015 school year.³

Research shows that schools can help reverse these troubling trends, because they are uniquely positioned to allow students' mental health issues to be addressed on campus during the school day.⁴ Currently, some schools allow the County's mental health department, Behavioral Health and Recovery Services (BHRS), to provide mental health services on campus to general education students who are publicly insured. However, services provided through private insurance are not allowed to take place on campus. In sum, most students in San Mateo County are not able to receive mental health services at their schools.

The Grand Jury uncovered these facts for the 2013-2014 year:⁵

- Of the County's 94,000 public school K-12 students, more than 33,000 are general education students who are publicly insured through Medi-Cal or Healthy Kids.⁶ BHRS can treat them on campus if students and families request it.

¹ County of San Mateo Board of Supervisors, *County of San Mateo Adolescent Report 2014-15: Youth and Adults Working Together for a Healthy Future*. http://www.peninsulaworks.org/documents/AdolescentReport-YouthandAdultsWorkingTogetherfora_1.pdf.

² Ibid.

³ San Mateo Union High School District, *5150 Assessment Data*, Youth Service Bureaus of the YMCA, January 15, 2015.

⁴ Howard Adelman and Linda Taylor, "Transforming Student and Learning Supports: Developing a Unified, Comprehensive, and Equitable System," UCLA Center for Mental Health in Schools, accessed January 15, 2015. <http://smhp.psych.ucla.edu>.

⁵ Officials from BHRS and the San Mateo County Office of Education; representative from the San Mateo County Special Education Local Plan Area (SELPA): interviews by the Grand Jury.

⁶ Healthy Kids, offered by the Health Plan of San Mateo, is a low-cost health coverage program for SMC children and teens from birth to 19 years who do not qualify for no-cost Medi-Cal.

- Yet not all County schools accommodate on-campus treatment for these students, even though BHRS could provide it. Last year, more than half of those seeking treatment for mental health issues were not seen in school and had to travel to a BHRS clinic.
- About 61,000 County students, or 65%, are privately insured and are not treated by BHRS; such students are referred to their private health insurers who do not treat at school.
- Any student not treated on campus must travel to appointments, making lack of transportation a potential barrier to treatment.⁷ It also excludes them from other benefits of being treated in a familiar school setting.⁸

There are alternatives. In those schools that can afford to hire them, nonprofit community-based organizations (CBOs) provide a wide range of mental health services to *all* students. They offer programs that address broad mental health issues common to many students. When made available in school, such programs can bring prevention and early intervention services directly to students and can identify those who are struggling with unaddressed issues requiring more intensive counseling, which the CBO can provide to all. These programs, or their equivalent, should be provided to all students in all schools.

The Grand Jury found that funding sources for these CBO programs are varied. Some schools find funds from general school budgets. Parent-funded groups such as PTAs and school foundations can also be a source of financial support. Community foundations are another source.

The County Board of Supervisors voiced its support for certain mental health services two years ago by allocating funds from a countywide sales tax increase known as Measure A (2012). However, the funds went mostly to support existing county mental health programs (some provided by BHRS) and did not address the need for in-school support for all students. The Grand Jury recommends that school districts make a special effort to seek funds from all sources, including Measure A, for programs benefiting all students.

The County Office of Education (COE) is positioned to act as a link between some funding sources, the schools, BHRS, and other program providers. The COE has begun coordinating support services and should increase its effort to help schools identify and cultivate funding sources. In addition, the Grand Jury recommends that the COE's role as a coordinator be expanded to ensure access to services for all students in all schools.

Special consideration should be given for funding programs in elementary and middle schools to address problems early and to reduce the stigma attached to mental health issues in general. If such programs were integrated into everyday school life, mental health issues would start to lose their stigma.

⁷ Laura Usher, "Mental Health in Schools: A Role for School Resource Officers," National Alliance on Mental Health. <http://www2.nami.org/Template.cfm?Section=CIT&Template=/ContentManagement/ContentDisplay.cfm&ContentID=156208&MicrositeID=0>.

⁸ Representative from SELPA, interview by the Grand Jury.

GLOSSARY

BHRS Behavioral Health and Recovery Services, or BHRS, is a division of the San Mateo County Health System. It provides mental health and substance abuse treatment to County residents who qualify for public insurance such as Medi-Cal or the Health Plan of San Mateo. It also provides mental health treatment to eligible special education students who need such treatment to access their special education programs.

CBO A nonprofit community-based organization, or CBO, offering specialized services to specific groups needing those services. In the context of this report, CBOs refer to organizations that are contracted by schools to provide mental health services and programs to all students on campus. See the Appendix for a partial list of CBOs operating in San Mateo County schools.

COE The County Office of Education, or COE, provides a variety of resources to the County's 23 K-12 school districts⁹ and operates court schools and special education classes for students with severe disabilities.

GENERAL EDUCATION STUDENT General education students are those without any disability that would prevent them from accessing the regular school curriculum. These students attend regular classes and do not have special accommodations or services. In San Mateo County, about 90% of students are general education students.

NAMI The National Alliance on Mental Illness, or NAMI, is the nation's largest grassroots mental health advocacy group dedicated to helping those affected by mental illness. NAMI raises awareness and provides support and public education on mental health issues.

SPECIAL EDUCATION STUDENT To be eligible for special education services a student must have a "disability" as defined by the Individuals with Disabilities Education Act, which recognizes 13 different disability categories. These disabilities must adversely affect educational performance, which cannot be addressed through general education classes alone. Special education students receive accommodations and services in order to address their educational needs and allow them to receive a free and appropriate public education. There are about 10,000 such students in San Mateo County.

BACKGROUND

The problems of children and adolescents should not be underestimated, especially when it comes to mental health. According to the National Alliance on Mental Illness (NAMI), "the latest research shows that 13% of youth aged 8-15 live with a mental health condition serious enough to interrupt their day-to-day lives."¹⁰ By graduation, 20% of all youth will experience

⁹ The County's total 24 school districts include the San Mateo County Community College District. The three colleges in this District (Canada College, College of San Mateo, and Skyline College) are outside the scope of this report.

¹⁰ "Mental Health in Schools: Why Provide Mental Health Services in Schools," National Alliance on Mental Illness, accessed January 10, 2015. <https://www.nami.org/About-NAMI/Where-NAMI-Stands-on-Public-Policy/Mental-Health-in-Schools>.

some kind of severe distress or depression. In both cases, only 20% of those will seek help.¹¹ An alarming 80% never do seek help due to the stigma of mental illness.¹²

National numbers point to a dramatic uptick in mental health issues severe enough to pose a deadly risk to children and adolescents. Almost 14% of students in a 2013 national survey indicated that they had made a suicide plan in the previous year.¹³ Tragically, many attempts succeed. Suicide accounts for 13% of all deaths among youth aged 8-15 years¹⁴ and is the third leading cause of death for those between the ages of 10 and 24.¹⁵

These national statistics reflect what is happening in San Mateo County. The County Board of Supervisors' own *Adolescent Report 2014-15* stated:¹⁶

- In the past month, nearly 70% of respondents reported being nervous, depressed, or emotionally stressed. Students attending nontraditional schools reported higher rates of depression-related feelings.
- 38% of female and 23% of male respondents reported having suicidal thoughts.
- Youth who have mental health problems are more likely to have felt discriminated against than youth who have no mental health problems.

There is evidence that such issues are on the rise.¹⁷ According to statistics compiled by the San Mateo Union High School District (SMUHSD), in the 2013-2014 school year, 107 students were assessed in school for suicide attempt or contemplation. During the same year, an additional 24 students were hospitalized after 911 calls were placed from school campuses. School officials say the majority of the calls were suicide-related.¹⁸ In the first semester of this school year alone, 77 students in the district were assessed and 21 were hospitalized after schools called 911.¹⁹ School officials believe the numbers do not reflect the whole picture and are likely greater than reported.²⁰

¹¹ Shashank V. Joshi, MD, "Treating Pediatric Depression: A Shared Responsibility," *Stanford Medicine News*, Spring 2015. <http://stanfordmedicine.org/communitynews/2015spring/depression.html>.

¹² Ibid.

¹³ Centers for Disease Control and Prevention, "Youth Risk Behavior Surveillance: United States, 2013," *Morbidity and Mortality Weekly Report* 63.4 (2014): 12.

¹⁴ "Mental Illness Facts and Numbers," National Alliance on Mental Illness, March 5, 2013. http://www2.nami.org/factsheets/mentalillness_factsheet.pdf.

¹⁵ Centers for Disease Control and Prevention, "Suicide Prevention," Injury Prevention and Control: Division of Violence Prevention, March 10, 2015. http://www.cdc.gov/violenceprevention/pub/youth_suicide.html.

¹⁶ County of San Mateo Board of Supervisors, *County of San Mateo Adolescent Report 2014-15: Youth and Adults Working Together for a Healthy Future*.

¹⁷ Officials from the San Mateo Union High School District, interview by the Grand Jury.

¹⁸ Officials from the San Mateo Union High School District, interview by the Grand Jury. San Mateo Union High School District, *5150 Assessment Data*, Youth Service Bureaus of the YMCA.

¹⁹ Ibid.

²⁰ Officials from the San Mateo Union High School District, interview by the Grand Jury.

The Grand Jury could not find any comprehensive statistics from any other County school districts on the number of 911 calls placed from their schools. In fact, the SMUHSD had never tallied such statistics until the Grand Jury asked for data, but were able to gather the information nonetheless. Apart from the SMUHSD numbers, the Grand Jury was only able to obtain anecdotal tallies. An official at one of the high schools contacted, for example, estimated the number of 911 calls to be about ten to twelve per semester.²¹

Yet suicide is only the most dramatic result of mental health issues among youth of all ages. Behavior and emotional problems play a significant role in daily life. They can affect peer and family relationships, life preparation, academic achievement, and test scores. They can hinder students' ability to learn coping skills, manage stress levels, and maintain physical health. Mental health can affect behaviors such as drug and alcohol use or gang membership. It can impact whether students show up for school at all.²²

Treating students on campus is seen as one of the best ways to identify and address students' mental health problems early.²³ NAMI reports that school is where children and adolescents spend much of their time each day, and where they form many of their peer and adult relationships. NAMI also notes that school personnel are in a key position to identify the early warning signs of an emerging mental health condition and to link students with effective services and supports.²⁴ A family therapist with years of involvement in children's mental health support, explained: "School is where students form their relationships. School is their world."²⁵

Mental health programs in schools can actually improve academic performance.²⁶ Some experts believe that mental health is just as important as a school's instructional mission.²⁷ The UCLA Center for Mental Health in Schools has launched a new effort in 2015 aimed at developing a big picture approach to integrating mental health with academic learning.²⁸ The Center is calling for federal, state, and local funding sources to embed mental health support right alongside academic learning.²⁹

Evidence shows that a focus on mental health in early grades is especially important. About 50% of lifetime cases of mental illness begin by age 14.³⁰ Some children in the lower grades actually prefer to be seen for counseling in school rather than outside. Such frank, open, practical, and

²¹ Official from a San Mateo County high school, interview by the Grand Jury.

²² "Children's Mental Health," American Psychological Association. <http://www.apa.org/pi/families/children-mental-health.aspx>.

²³ "Mental Health in Schools: Why Provide Mental Health Services in Schools," National Alliance on Mental Illness.

²⁴ Ibid.

²⁵ Officials from the San Mateo County Office of Education and Youth Service Bureaus of the YMCA: interviews by the Grand Jury.

²⁶ "Why Have Mental Health Programs in Schools?" New York City Department of Education.

<http://schools.nyc.gov/Offices/Health/SBHC/MentalHealth.htm>.

²⁷ UCLA Center for Mental Health in Schools, *School Mental Health Project*. <http://smhp.psych.ucla.edu/>.

²⁸ Ibid.

²⁹ Ibid.

³⁰ "Mental Health Facts: Children and Teens," National Alliance on Mental Illness. <http://www.nami.org/getattachment/Learn-More/Mental-Health-by-the-Numbers/childrenmhfacts.pdf>.

accessible treatment can lead to a greater understanding about mental health, which can result in far less stigma.³¹

Given this background, the Grand Jury saw a need to investigate what County schools and other concerned entities are doing in the area of mental health support in schools and to identify what can be improved.

METHODOLOGY

Documents/Sources

See Bibliography for a detailed list:

- Websites for national associations with a focus on mental health issues and supports
- Articles from national and local online periodicals and newspapers dealing with student mental health
- Reports from local County government (Board of Supervisors, County Office of Education, San Mateo Health System, Behavioral Health and Recovery Services)
- Websites of local schools and parent-teacher organizations
- San Mateo Unified High School District reports and studies
- Websites and materials from local community-based organizations

Interviews

In conducting this investigation, the Grand Jury interviewed 21 individuals, including one member of the Board of Supervisors, six officials from the San Mateo County Office of Education, three administrators from the San Mateo County Union High School District, one official from Woodside High School, four representatives from the San Mateo County Health System and Behavioral Health and Recovery Services, one special education official, four employees from community-based organizations, and one representative from the National Alliance on Mental Illness.

DISCUSSION

Support for school-based mental health programs in San Mateo County has historically centered on students who require such services as part of their special education program.³² About 600 of the County's 10,000 special education students have mental and emotional health issues that interfere with learning. They are provided one-on-one or small group therapy on campus at no cost to the student. The state of California, the federal government, and the school districts

³¹ Mina Fazel et al., "Mental Health Interventions in Schools in High Income Countries," *Lancet Psychiatry*, October 2014. Official from StarVista, interview by the Grand Jury.

³² Representative from SELPA, interview by the Grand Jury.

themselves fund these services. The County’s mental health agency, BHRS, contracts with about 80% of County school districts to provide these in-school supports.³³

In addition to special education students, BHRS treats general education low-income students through Medi-Cal or through Healthy Kids, also referred to as public insurance.³⁴ There are about 33,000 such students in the County. While BHRS is not technically restricted in the kinds of services it can render, it specializes in and generally provides individual or small group therapy to these eligible students.³⁵ Medi-Cal reimburses BHRS for these services. In addition, if BHRS is on campus, it can provide on-site crisis or emergency response services to any student regardless of payor source, or insurance. Privately insured students are then referred to their own provider.

BHRS has authority to treat these students on campus during the school day, just as it treats special education students. A BHRS official said the agency prefers to see all its student clients in school—a student’s “natural setting.”³⁶

However, County schools do not always agree to this arrangement. Some limit on-campus treatment of publicly insured general education students because of space constraints and other reasons. Others are more amenable, especially if BHRS already has an established presence on campus seeing special education students. Others state that they favor school treatment but simply do not provide it.³⁷ As a result, BHRS may not be able to treat all eligible general education students on campus even if students request it. Currently, BHRS’s practice is to require schools, students, and their families to agree to a treatment location.³⁸

In fiscal year 2013-2014, BHRS served a total of 2,484 students (aged 6-18 years), of whom 545 received school-based services through their special education plan.³⁹ Of the 1,939 general education students receiving mental health services, BHRS treated approximately 40% on campus. The other 60% had to travel to a local BHRS clinic for treatment.⁴⁰

Ongoing mental health support for general education students who have private insurance, a group making up the majority of students, is not provided by BHRS.⁴¹ Although precise statistics are not available, the Grand Jury estimates that more than half of all County students fall into this category. These students must be seen by private therapists who do not practice on campus.⁴²

³³ Three other agencies also providing in-school support to special education students include Beacon, Children’s Health Council, and Edgewood Center for Children and Families.

³⁴ Official from BHRS, interviews by the Grand Jury.

³⁵ Ibid.

³⁶ Ibid.

³⁷ Officials from the San Mateo Union High School District, interview by the Grand Jury.

³⁸ Ibid.

³⁹ The total number of children/youth served by BHRS in all settings climbs to 3,592 when the following are included: Healthy Kids beneficiaries aged 0-17 years, youth who received substance use services, and Health Plan of San Mateo beneficiaries who were treated at the Ravenswood Medical Clinic.

⁴⁰ Ibid.

⁴¹ However, in a crisis situation, BHRS will provide emergency response services to any student who needs it, regardless of insurance.

⁴² Official from the San Mateo County Office of Education, interview by the Grand Jury.

Community-Based Organizations Fill in the Gaps

Nonprofit CBOs provide a wide range of mental health support services to any school or school district with the funds for a contract. There are no restrictions on how funds are spent or qualifying guidelines, so agencies can offer services that reach all students.⁴³ Many of these CBOs are able to operate with a lower overhead than BHRS.⁴⁴

CBO-provided in-school programs can be broadly focused, addressing issues common to all students such as suicide prevention, mental health awareness, coping skills, behavior adjustments, anxiety, depression, and social issues. Services can also include one-on-one counseling, full-time in-school psychologists, and curriculum and program coordinators. One of the benefits of having a broad-based presence in schools is that it allows CBOs to identify students who need more focused counseling.

CBO programming can be especially beneficial to the majority of students in San Mateo County, i.e., general education, privately insured students who do not qualify for any special assistance but are in serious need of attention nonetheless.⁴⁵

For example, Edgewood Center for Children and Families, a CBO with offices in San Carlos, operates a program at Roy Cloud School, a K-8 in Redwood City. Funded by the school's Parent Teacher Organization (PTO) and managed by Edgewood, a full-time counselor has a visible presence on campus. The counselor teaches life-skill lessons in the classroom and educates teachers on how to accommodate emotional issues surfacing in class. The counselor also acts as playground monitor during recess and hosts "lunch bunch" meetings with interested students. These connections occur organically and give the counselor a perch from which to identify students needing individual or small group counseling, which the counselor also offers. The cost to the school is less than \$80,000 per year, or about 15% of the PTO's budget.⁴⁶

Schools benefit from such CBO relationships, which can take advantage of the unique characteristics of each of the County's 23 school districts. CBOs can tailor programs to fit the needs of a school's particular student population, a significant benefit in a diverse county like San Mateo.⁴⁷ These programs are open to any student in need, regardless of income level, academic status, or insurance coverage and are available on campus.

See the Appendix for a list and description of some of the on-campus mental health services in SMC schools and the CBOs providing them.

⁴³ BHRS generally does not offer these services and focuses instead on one-on-one therapies reimbursable by special education funds or Medi-Cal.

⁴⁴ Officials from Youth Service Bureaus of the YMCA, Edgewood Center, and StarVista: interviews by the Grand Jury.

⁴⁵ Representative from SELPA, interviews by the Grand Jury.

⁴⁶ Roy Cloud School PTO, *Parent Guide 2014-2015*. <http://roycloudinfo.com/wp-content/uploads/2012/02/PTO-Parent-Guide-2014.pdf>.

⁴⁷ Representatives from Edgewood Center, StarVista, and Youth Service Bureaus of the YMCA: interviews by the Grand Jury.

School Funding

CBO-provided programs are funded through a school's general fund, grants, parent associations and foundations, and other forms of community support reflecting the demographics of each district. These sources vary from district to district and school to school and are limited by funding available in any given year.

For many school districts, finances are improving. Beginning in 2013, the state's funding of school districts has been calculated under a new formula using a mix of local property taxes and state aid. This Local Control Funding Formula (LCFF) is intended in part to equalize economic disparities among school districts.⁴⁸

LCFF allows schools to qualify for additional funding if they meet certain criteria, such as creating a positive school climate and involving parents in setting school priorities. Some officials speculate that eventually schools will be able to use funds for mental health programs because of this flexibility.⁴⁹

Community Funding

In some cases, the school's general funds are not enough for mental health services or programs; therefore schools must look to other sources of revenue. Funding could come from donations from parent groups such as Parent Teacher Organizations and Associations (PTO, PTA) and school foundations, which raise money to donate directly to schools. The fund-raising methods and results reflect school district demographics.

Last year, for example, the Hillsborough School Foundation raised \$3.6 million (\$48 million since 1980). Proceeds from social events account for most of those funds, which went to reduce class sizes and support enrichment programs.⁵⁰ The 1,500 students in the K-8 Hillsborough School District consistently perform in the top 1% in the state in standardized tests. In contrast, the Ravenswood Education Foundation, in existence since 2007, raised \$1.9 million last year. The Foundation's corporate partners include such local companies as Intel Corp, Yahoo, Google, Gilead, and Charles Schwab.⁵¹ There are 3,500 students in the K-8 Ravenswood City School District, 90% of whom are considered low income.

Nonprofit community foundations also support schools. The Sobrato Family Foundation funds several programs in the County's southern schools. The Sequoia Healthcare District granted half the funds for Woodside High School's in-school mental health program, with the rest coming from the PTA. And, in this era of technology company success, newly formed local foundations are surfacing. The family of Mark Zuckerberg, founder of Facebook, which is located in Menlo Park, contributed \$1 million to three Redwood City schools for technology

⁴⁸ Official from the San Mateo County Office of Education, interview by the Grand Jury.

⁴⁹ The Local Control Funding Formula: Maximizing the New School Funding Formula to Expand Health Supports. <https://www.schoolhealthcenters.org/wp-content/uploads/2014/10/LCFF-Toolkit-FINAL.pdf>.

⁵⁰ Hillsborough Schools Foundation, *Raising Excellence*. <http://www.hsf.org/about.html>.

⁵¹ Ravenswood Education Foundation, *Financial Information*. <http://ravenswoodef.org/about-ref/financial-information/>.

purchases. The family plans to contribute \$120 million to underserved communities in the Bay Area to support education.⁵²

County Spotlights Mental Health

While the network of mental health programs and services varies from school to school, the Sandy Hook school-shooting incident in 2012 galvanized SMC school officials into taking a more consistent approach across schools. It spurred a two-year, countywide effort to ensure that schools, law enforcement, and other agencies were prepared to deal effectively with such an event in San Mateo County.

The effort began with a countywide summit, called “Beyond Newtown: How to Ensure Safe Schools and Communities,” led by Congresswoman Jackie Speier.⁵³ The summit resulted in a focus on the following three broad areas:

- **The Big Five** The first was a plan, called The Big Five, outlining how school officials and students, law enforcement, and emergency responders would react immediately, during, and after an actual school-shooting event.
- **Information Sharing** The second area recognized that sharing information was the key to identifying potentially troubled students and synchronizing the efforts of school officials, local law enforcement, and mental health providers. The result is a Universal Consent Form, which will be in use beginning in the 2015-2016 school year. With a parent’s signature, the consent will allow a school to conduct a “threat” assessment of a student and share information among the agencies involved to help the student resolve dangerous issues.
- **Mental Health Needs of Students** The third area involved mental health and was also identified as a prevention measure. In contrast to the efforts described above, it focused on less volatile students, recognizing that mental and emotional health issues are at the root of much more than school shootings.

With input from Supervisor Adrienne Tissier, the County’s Board of Supervisors allocated almost \$10 million from Measure A during the first round of funding in 2013,⁵⁴ to augment existing mental health services mostly for families and children with public insurance.

⁵² Bonnie Eslinger, “Three Redwood City Schools Share \$1 Million Grant from Zuckerberg Foundation,” *San Jose Mercury News*, August 21, 2014. http://www.mercurynews.com/peninsula/ci_26381245/redwood-city-and-ravenswood-school-districts-each-get.

⁵³ The April 2013 summit focused on finding ways to ensure the safety of students. Close to 300 concerned people, including County law enforcement, school-shooting experts, representatives from the COE, mental health professionals, and local officials discussed solutions to gun violence in San Mateo County schools.

⁵⁴ Approved by voters in November 2012, Measure A increased the County sales tax paid on the purchase of goods and services by one-half cent for 10 years (2013-2023). In FY 2014, Measure A netted \$75 million. In FY 2015, the projected total is \$82 million. By the time the measure expires in 2023, the funds will have increased each year, with the highest yearly total projected in 2022 at \$103 million (County of San Mateo Measure A Dashboard, <https://performance.smcgov.org/measure-a>).

Several new expenditures stand out as making a significant dent in the area of mental health support, some of which could impact, directly or indirectly, all students in the County:

- BHRS hired five additional clinicians to decrease wait times at clinics and increase access to BHRS services for qualified students and families in need.⁵⁵
- BHRS launched Youth Mental Health First Aid, a series of one-day classes aimed at teachers and other youth-involved adults. The classes teach how to recognize the signs of mental illness in children, what to do in a crisis, and which BHRS services could be of assistance. As of May 2015, nearly 1000 teachers, parents, and students have attended classes.
- A coordinator for in-school mental health services, the Director of Safe and Supportive Schools, was hired by the County Office of Education to support in-school mental health services. BHRS contributes half of the coordinator's salary.

At this time, the County Board of Supervisors is selecting grantees for a new two-year cycle of Measure A funds. However, mental health is not a priority identified by the County Board of Supervisors for this round, so no new programs have made the list of potential grantees. Edgewood had submitted a proposal to expand its Roy Cloud program to other schools but it was rejected for being outside the priority list. In the future, the Supervisors have a chance to do more by extending support for the many CBOs that serve the wider student population.

Stronger Coordination from the COE

The new position of Director of Safe and Supportive Schools, operating out of the COE, shows how serious officials from the County, the COE, and school districts have come to see the issue of mental health in schools. For the first time ever, there is a full-time staff position devoted to helping schools help students.⁵⁶

Communications among the many groups offering services has become the linchpin to helping students with mental health issues.⁵⁷ The position should be an important liaison between the schools, BHRS, and the CBOs that have programs on school sites.⁵⁸ To facilitate links with BHRS, the County's 23 K-12 school districts have been divided into groups called School-Based Mental Health Collaboratives, roughly parallel to the geographic nature of the BHRS network of clinics. These Collaboratives go beyond the original focus of working with law enforcement to identify and help potentially violent students. Now they also facilitate communications among the member schools, the BHRS clinic in the area, and CBOs operating in member schools to help

⁵⁵ Official from BHRS, interview by the Grand Jury.

⁵⁶ Officials from the San Mateo County Office of Education, interviews by the Grand Jury. The Director of Safe and Supportive Schools position was originally filled in April 2014. It has been vacant since January 2015. The position was reposted in March 2015, and the COE expects to fill it this coming July.

⁵⁷ Officials from the San Mateo County Office of Education, BHRS, and Youth Service Bureaus of the YMCA: interviews by the Grand Jury.

⁵⁸ Officials from the San Mateo County Office of Education, BHRS, SELPA, Edgewood Center, StarVista, and Youth Service Bureaus of the YMCA: interviews by the Grand Jury.

address students' more universal mental health needs.⁵⁹ At present, three of the planned six to nine Collaboratives are up and running.

The Director of Safe and Supportive Schools can also help pave the way for BHRS to expand its access to in-school delivery of treatment. Owing to its education perspective, the Director can help schools establish procedures so that students can receive care without disrupting class time. The position could serve as an advocate for increased funding for existing programs and schools that need more. At present, there is no authority or budget to start up new initiatives that may be identified by the Director over time.

Combatting Stigma in the Schools

According to noted Stanford psychiatry professor Shashank Joshi, the stigma of mental illness can sometimes be worse than the illness itself.⁶⁰ It sets a person apart from others and is a powerful negative attribute in social relations. Stigma can come with a sense of shame for many, driving students underground, causing them to suffer in silence. Joshi explains: "Among the main reasons teens say they do not seek help is that they do not want to disclose it to anyone."⁶¹

Many experts see education and open discussion as a way to defuse stigma's power.⁶² Tackling it can be the first step toward earlier and sometimes life-saving treatment. Once again, schools are becoming a viable place to address the problem. As a result of student suicides in Palo Alto, in neighboring Santa Clara County, Stanford mental health professionals are collaborating with Palo Alto schools to develop programs aimed at reducing stigma and preventing suicide. Among the efforts are new classroom curricula to promote social and emotional wellness.⁶³ In addition, the Palo Alto Board of Education allocated \$250,000 in April to hire two additional counselors to serve in the district's two high schools.⁶⁴

Friends and fellow students are seen as much more likely to know about problems before parents or teachers. Per Joshi, "Those in severe distress may not go to an adult, but they will often tell a peer."⁶⁵ In San Mateo County, youth leaders at Sequoia High School survey fellow students annually to find ways to improve the health and wellness of the school community. The survey is a unique opportunity for students to speak up about the issues they feel matter most."⁶⁶

For the last two years, suicide and depression have been identified as the priority issues at Sequoia High School. As a result, student leaders worked with adult partners to organize special

⁵⁹ Officials from the San Mateo County Office of Education and BHRS: interviews by the Grand Jury.

⁶⁰ Shashank V. Joshi, MD, "Treating Pediatric Depression: A Shared Responsibility," *Stanford Medicine News*, Spring 2015. <http://stanfordmedicine.org/communitynews/2015spring/depression.html>.

⁶¹ Ibid.

⁶² Sue Baker, "Breaking the Taboo: It's Time to Talk about Mental Health," *Special to CNN*, January 3, 2015. <http://www.cnn.com/2014/10/10/opinion/breaking-the-taboo-mental-mealth/>.

⁶³ Shashank V. Joshi, MD, "Treating Pediatric Depression: A Shared Responsibility," *Stanford Medicine News*.

⁶⁴ NBC Bay Area News, "Student Suicides Prompt Schools to Hire More Counselors," April 2, 2015, Live Video. <http://www.nbcbayarea.com/news/local/7-Student-Suicides-This-Year-Prompt-Palo-Alto-Unified-School-District-to-Hire-More-Counselors-298382431.html>.

⁶⁵ Shashank V. Joshi, MD, "Treating Pediatric Depression: A Shared Responsibility," *Stanford Medicine News*.

⁶⁶ Sequoia Union High School District. <http://www.seq.org/?id=164>.

PE classes on how to recognize signs of suicide and depression and how to help students in need. Panels of speakers with real-life experience were brought in with the goal of reducing the stigma in hopes that those who were in need would be more able to reach out for help.⁶⁷

Experts believe that students should learn early about mental health issues in the same way they learn about physical health. It helps dispel misconceptions and stigma, and it provides them with the understanding and resources they need if they or someone they know is struggling.⁶⁸

“Kids know more about the stereotypes [for mental illness] than what it actually is,” says Kenya Sesay, who serves as the youth program director of NAMI’s Montgomery County, Maryland, chapter. “They don’t really know the symptoms. They don’t really know what the person goes through.”⁶⁹ Learning about the facts of mental health becomes a foundation for learning how to cope if the need arises.

Some educators acknowledge that more should be done in the lower grades.⁷⁰ One County elementary district has already begun weaving together early education and coping strategies for all its students, made possible with the help of a nonprofit foundation. The Ravenswood City School District is partnering with Southern California-based Sonima Foundation to offer mindfulness and yoga training as a regular part of its curriculum. This focus on health and wellness is considered essential to helping students perform well academically and also helps to create a supportive, trusting school climate, according to a Ravenswood principal. In addition, 700 of the 3,400 district students will participate in a four-year Stanford University study to assess the impact of the program on stress, coping skills, physical health, and social-emotional development.⁷¹ The goal is to gauge and strengthen the long-term impact of this early education.

Many of the pieces addressing mental health in schools are already in place around the County. Putting it all together into a strong web of supports across all districts is the next step. With funding, coordination, and focus, such a network is within reach. If left to chance, mental health issues will follow some students well beyond their school years and out into the adult world.

FINDINGS

- F1. National statistics show the need for mental health support for K-12 students. Statistics in *San Mateo County’s Adolescent Report 2014-15* reflect this same pattern for students in San Mateo County.
- F2. According to published studies, schools are one of the best places to address this need.

⁶⁷ Ibid.

⁶⁸ Kirsten Fawcett, “How to Talk to Kids and Teens about Mental Illness,” *US News and World Report*, September 23, 2014. <http://health.usnews.com/health-news/health-wellness/articles/2014/09/23/how-to-talk-to-kids-and-teens-about-mental-illness>.

⁶⁹ Ibid.

⁷⁰ Officials from the San Mateo Union High School District, SELPA, and StarVista: interviews by the Grand Jury.

⁷¹ Elena Kadwany, “Ravenswood School District to Integrate Mindfulness, Yoga into Regular Curriculum,” *Palo Alto Weekly*, January 22, 2015. <http://www.paloaltoonline.com/news/2015/01/22/ravenswood-school-district-to-integrate-mindfulness-yoga-into-regular-curriculum>.

- F3. Of the County’s 94,000 public school K-12 students, more than 33,000 are publicly insured general education students. BHRS can treat such students on campus upon request.
- F4. Not all County schools accommodate on-campus treatment for general education publicly insured students, even though BHRS could provide it.
- F5. Lack of transportation to off-campus appointments can be a barrier to treatment for both publicly and privately insured students.
- F6. About 60% of publicly insured general education students needing treatment for mental health issues were not seen in school and had to seek transportation to a BHRS clinic.
- F7. About 61,000 County students, or 65%, are privately insured. BHRS does not treat privately insured students on an ongoing basis; such students are referred to their private health insurers. Therapists paid by private insurance do not provide services on campus.
- F8. Nonprofit CBOs currently provide student programs for mental health support and one-on-one counseling on some K-12 campuses. These services are open to any student who needs them.
- F9. Potential funding sources for CBO services include a school’s general budget, parent groups, local foundations, and Measure A.
- F10. In 2014, the County Office of Education created the position of Director of Safe and Supportive Schools, partially funded by Measure A, to coordinate mental health activities on school campuses.
- F11. Not all schools in the County keep comprehensive and accurate data on mental health issues that surface in the school setting. Nor is there a comprehensive summary and count of all the CBOs and programs offered to students across the County. Thus it is difficult to track mental health trends among local students or to measure the success of programs.
- F12. Identification and early treatment of mental health issues in the lower grades can lead to reduced stigma and improved outcomes for all students.

RECOMMENDATIONS

The San Mateo County Grand Jury recommends that all school districts:

- R1. Provide a broad spectrum of mental health services and support—ranging from mental health education to one-on-one counseling—to all students on campus during the school day.
- R2. Provide BHRS full access to campuses to treat publicly insured general education students if the students and their parents so desire.

The San Mateo County Grand Jury recommends that the County Office of Education:

- R3. Work closely with school districts to develop mental health programs and allow for access by BHRS to treat its eligible students. The COE should assist schools in investigating all sources of funds, including Measure A.

- R4. Maintain and prioritize the position of Director of Safe and Supportive Schools. The COE should solidify its independent role as an in-school mental health service facilitator and advocate for increased funding for all students.
- R5. Work with all school districts to set up accurate record-keeping systems of all student mental health issues that surface on campus and CBOs providing services to schools, while protecting student confidentiality. These statistics will provide data to measure the effectiveness of mental health services.

The San Mateo County Grand Jury recommends that the County’s elementary and unified school districts:

- R6. Focus on providing mental health programs and services at the K-8 level. Such early mental health education would have the added benefit of reducing stigma before it develops further.

REQUEST FOR RESPONSES

Pursuant to Penal code section 933.05, the Grand Jury requests responses as follows:

- All San Mateo County School Districts—R1 and R2
- San Mateo County Office of Education—R3, R4, R5
- San Mateo County Elementary and Unified School Districts—R6

The governing bodies indicated above should be aware that the comment or response of the governing body must be conducted subject to the notice, agenda and open meeting requirements of the Brown Act.

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APPENDIX

Community-Based Organizations

Following is a list of community-based organizations providing a wide range of mental health services to County schools.⁷² These groups are nonprofit, relying on a mix of donations, fees for services to individuals, and contracts with schools and others. Generally, they are able to operate with relatively low overhead and can tailor programs to fit the needs of their clients.

Acknowledge Alliance Serving K-12 schools in the County, Acknowledge Alliance offers in-school individual and group counseling. It also offers programs addressing “key social and emotional issues targeted to the needs of a particular school.”⁷³

The *Resilience Consultation Program* places mental health professionals directly into classrooms where they work to support educators in different ways, including fostering healthy relationships and enhancing the positive social-emotional well-being of students. Counseling is provided for elementary and middle school County students at Beechwood School (private) and Selby Lane School.

The *Collaborative Counseling Program*, with its Transition Program, supports students transitioning back to high school from the County Court and Community Schools. Started five years ago, the program provides two therapists to cover all four Sequoia Union High School District schools. The Transition Program provides these students with high-level counseling services and connects them to other resources on site.

According to Susan Clark, Executive Director of Acknowledge Alliance, before the program began less than 20% of students transitioning back to high school after expulsion were staying in school and now more than 80% are staying.⁷⁴

Adolescent Counseling Services Started in 1980, Adolescent Counseling Services (ACS) provides free counseling during school hours to adolescents at two high schools in San Mateo County—Redwood Continuation and Woodside. ACS provides mental health professionals at each school, including licensed therapists and trained, supervised clinical interns.⁷⁵

Support services include one-on-one therapy with students, family and group counseling, and immediate intervention during crisis situations that may happen on campus. Areas addressed during counseling include academic stress, peer conflict, self-esteem, depression and anxiety, suicidal thoughts, grief and loss, and substance abuse.

⁷² This list is not meant to be comprehensive, but it provides examples of the number and type of community-based organizations operating in San Mateo County.

⁷³ Acknowledge Alliance, *The Power of Classroom Wellness*. <http://acknowledgealliance.org>.

⁷⁴ Margaret Lavin, “Acknowledge Alliance Transition Program Puts Teens on Right Track,” *San Jose Mercury News*, April 16, 2014.

⁷⁵ Adolescent Counseling Services, *On-Campus Counseling*. <http://www.acs-teens.org/what-we-do/on-campus-counseling/>.

ACS also offers the “Outlet” program for LGBTQ youth (Lesbian, Gay, Bisexual, Transgender, Queer, and Questioning).

- **Asian American Recovery Services** Serving the north county, Asian American Recovery Services operates “Project Grow” in two middle schools (Thomas R. Pollicita and Parkway Heights). Started in 2006, the program supports students on campus during school hours.⁷⁶

An on-site team provides individual and family therapy, advocacy for students and parents, and case-management services. Project Grow focuses on serving students who are experiencing grief and/or trauma-related issues such as loss of a loved one, violence, or abuse.

Students who are eligible for Project Grow are special education children who are at risk of school dropout, gang, juvenile justice, or child welfare involvement. The program is funded by BHRS through a state grant.

- **Edgewood Center for Children and Families** Edgewood has provided school-based behavioral health services in the County for over a decade. These services include mental health consultation, behavior coaching, individual and group counseling, teacher training, and classroom climate coaching.⁷⁷

Edgewood currently provides the services of one full-time school counselor at Roy Cloud, a K-8 school in Redwood City. Funded by the PTO, the counselor offers individual and small-group counseling; she also arranges parent education workshops, teaches life skill lessons in the classroom, and invites students to her “lunch bunch,” which allows her to connect with all the students at the school.⁷⁸ An important part of the counselor’s role is to educate teachers on how to accommodate the social-emotional issues affecting kids—this type of training is not part of normal teacher education.⁷⁹

- **Pyramid Alternatives** For more than 30 years, Pyramid has partnered with County school districts to provide counseling and education services in elementary, middle, and high schools. Serving the central and north county, it is headquartered in Pacifica.⁸⁰

Pyramid currently serves five local school districts: Jefferson Elementary, Jefferson High School, South San Francisco, Cabrillo, and Redwood City. Pyramid treats children and adolescents for many mental health issues including anxiety, depression, and trauma.

⁷⁶ Asian American Recovery Services, *San Mateo: Project Grow*. http://www.aars.org/counties/san_mateo/project-grow/.

⁷⁷ Edgewood Center for Children and Families. San Mateo, *San Carlos Intensive Outpatient Program*. <http://www.edgewood.org/whatwedo/smiop/>.

⁷⁸ Roy Cloud School PTO, *Parent Guide 2014-2015*. <http://roycloudinfo.com/wp-content/uploads/2012/02/PTO-Parent-Guide-2014.pdf>.

⁷⁹ Representative from Edgewood Center, interview by the Grand Jury.

⁸⁰ Pyramid Alternatives, *School Based Services*. http://pyramidalternatives.org/?page_id=48.

- **StarVista** One of the County’s largest nonprofits, StarVista provides school-based mental health services to 19 elementary, middle, and high schools, primarily at school districts in central and south county. In service for 35 years, StarVista offers assessment; crisis intervention; and individual, group, and family therapy.⁸¹

With up to 200 therapists on staff, StarVista is positioned to adapt their services quickly to fit the varying needs of each school and the County’s diverse population.⁸² Sessions are scheduled to avoid disruption to the child’s classes. With one clinician full-time at a school, he or she is able to interact with students throughout the school, in an individual session as well as on the playground. StarVista has found that, when young students interact regularly with a clinician, mental health begins to lose some of its stigma, particularly when the interaction happens in the earlier grades.⁸³

- **Youth Service Bureau, YMCA of San Francisco Urban Services** The Youth Service Bureau (YSB) specializes in counseling for youth and families, prevention programs for at-risk youth, and safe school environments. YSB counselors are located on over 40 K-12 campuses in northern SMC, assisting school staff in identifying, assessing, and providing therapeutic individual and group-based counseling.⁸⁴

YSB created *The School Safety Advocates High School Program* in response to the 1999 Columbine tragedy. School Safety Advocates are clinicians assigned full-time to work with school staff and students on campus. They intervene in crises, conduct safety and mental health assessments, and make referrals for services.

Advocates stop fights, mediate conflicts, and work to prevent bullying, self-harm, and attempted suicide. They also help adolescents navigate social media, encouraging concerned students to help them identify those at risk if signs surface on social media or elsewhere.⁸⁵ In 2007 the program expanded operations to eight middle schools from Daly City to Foster City.

Alternatives to Suspension Program, run by the YSB at seven high schools in SMC, is a one-day program available to students who have committed minor offenses to avoid suspension. Typical reasons for a student to be referred to the program include cutting school, smoking or drugs, fighting, sexual harassment, theft, verbal disrespect, and bullying. The structured curriculum makes the day’s sessions interactive. The program has resulted in a 27% reduction in suspensions.

⁸¹ StarVista, *School Based Services*. http://www.star-vista.org/whatwedo_services/earlyintervention/youth/school_based_services.html.

⁸² Representative from StarVista, interview by the Grand Jury.

⁸³ Ibid.

⁸⁴ YMCA of San Francisco Urban Services. *What We Offer—Youth Service Bureaus (YSBs)*. http://www.ymcasf.org/urban/what_we_offer/for_kids/youth_service_bureaus_ysbs#contentTab_1196-tab.

⁸⁵ Representative from Youth Service Bureaus of the YMCA, interview by the Grand Jury.

Students have given the program high marks. A majority of participants themselves reported that, since attending the program, their GPA has improved, they are getting into less trouble, and they can communicate their thoughts and feelings more clearly.⁸⁶

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⁸⁶ San Mateo Union High School District, *Alternative to Suspension Outcome Results 2013-2014*, Youth Service Bureaus of the YMCA. PowerPoint. <http://slideplayer.com/slide/3619519/#>.