**UEN 2021 Legislative Priority:
Student Mental Health Services**

**Background:** Mental health challenges for students have increased in all school districts in Iowa, including rural schools. The following statistics from *A Strategic Plan for a Children’s Mental Health Redesign in Iowa* [*DRAFT*](https://www.namigdm.org/documents/resources/Final_Document_A2BABAF6FDF28.pdf) , are compelling:

* Over 20% of children have a seriously debilitating mental illness during their lifetime.
* Over 45% of children have had any mental illness.
* Half of all lifelong cases of mental illness begin by age 14 (75% by age 24).
* 80% of children who need mental health treatment never receive treatment.
* 50% of youth in the child welfare system have a mental illness.
* Treatment works. Treatment of mental illness reduces disability, leads to recovery and is most effective during the brain’s development from birth to age 26.

**Provider Shortage:** [Iowa Capitol Dispatch](https://iowacapitaldispatch.com/2020/11/23/iowans-must-fight-again-for-state-support-of-mental-health/) reported on Nov. 23, 2020, “One in five Iowans is likely to be affected by a mental health challenge in a normal year. In 2020, that estimate has increased to one in four, according to [*NAMI Iowa’s strategic plan*](https://documentcloud.adobe.com/link/track?uri=urn%3aaaid%3ascds%3aUS%3a59cd9208-a039-49d4-9777-0f84734117bc&emci=002e7ea1-a02b-eb11-9fb4-00155d43b2cd&emdi=170092eb-a02b-eb11-9fb4-00155d43b2cd&ceid=2261064#pageNum=1). But Iowa continues to fall far short of the number of mental health providers needed to address the need. The State ranks 48th overall in the provision of mental health services, according to NAMI Iowa, with fewer than 100 psychiatrists accepting clients in the state.”

# Impact on School: Chronic Absenteeism is defined as missing 10% or 18 days a school year. Children with mental illness are more likely to miss school due to depression or anxiety and are then more likely to miss school to get needed mental health care. According to the American Academy of Pediatricians[, School Attendance, Truancy & Chronic Absenteeism: What Parents Need to Know](https://www.healthychildren.org/English/ages-stages/gradeschool/school/Pages/School-Attendance-Truancy-Chronic-Absenteeism.aspx), “**Children who are chronically absent in kindergarten and first grade are less likely to read on grade level by the third grade.**For older students, being chronically absent is strongly associated with failing at school―even more than low grades or test scores. When absences add up, these students are more likely to be suspended and drop out of high school. Chronic absenteeism is also linked with teen substance use, as well as poor health as adults.”

**Recent Strides:** Unless a student is receiving special education services, and the IEP so authorizes, mental health treatment at school is not funded. Such services are often not readily available in rural communities, requiring time away from school or no service at all. Thankfully, the 2020 Iowa Legislature approved schools as originating sites for virtual mental health counseling. The hope is to minimize absenteeism and get students the help they need while at school, when virtual telehealth counseling is appropriate for their challenges. Although welcome, this will not be sufficient for Iowa’s neediest students.

The 2019 Legislature created a structure for children’s mental health services. In 2020, the Legislature and Governor approved [SF 2360](https://www.legis.iowa.gov/legislation/BillBook?ga=88&ba=sf2360) Classroom Management/ Therapeutic Classrooms. This legislation sets up a grant process for additional therapeutic classrooms. Both of these efforts require funding to be successful. An appropriation of $2.1 million to the Iowa AEAs to provide mental health awareness training for educators must also continue.

**COVID Impact:** School closures and hybrid instructional models, family job loss, quarantine requirements and illness are all potential stressors increasing the mental health challenges of students, parents and staff members. The need to continue this important work is more urgent than ever.

**Mental Health Services:** Iowa must fund services, eliminate barriers, and clarify funding sources and responsibilities, including critical partnerships and wrap-around services. Enabling the delivery of mental health services, when appropriate for students, via telehealth, enacted in the 2020 Session, is a good first step. Additional State efforts are needed to establish and fund comprehensive community mental health systems to offer preventative and treatment services and comprehensive school mental health programs that include in-school access for students to mental health professionals, provisions for reimbursement by Medicaid and private insurers, and programs to fill in gaps for students without coverage. In addition, funding for additional and ongoing teacher, administrator, and support staff training to improve the awareness and understanding of child emotional and mental health needs is needed. Additional mental health services for our school staff are also required. Schools should not be mandated to screen for mental health needs or provide mental services without adequate funding to do so.