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California K–12 Schools and Communities Collaborate to Support Student Mental Health

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Across the education, public health, and human and social services arenas, there is renewed interest in bringing agency representatives together to work on the promotion of student mental health and wellness. When effective, collaboration among agencies can build cross-system partnerships, improve referral processes and effective use of resources, increase access to services, enhance professional development and the quality of service provision, and ultimately improve child and family outcomes.

One of the aims of California's Prevention and Early Intervention (PEI) K–12 Student Mental Health (SMH) initiative funded under Proposition 63 is to build collaboration among K–12 school districts, counties, and regions to increase the effectiveness of SMH programs across the state. The Student Mental Health Policy Workgroup (SMHPW) was established to develop statewide policies that would impact K–12 programs, with a focus on enhancing linkages to services provided at schools or through the foster care system, county departments of mental health, special education programs, and community-based organizations.

As part of its evaluation of activities funded under Proposition 63, SRI International and RAND researchers are evaluating the development, quality, and effectiveness of collaboration among K–12 SMH program partners. Through multiple methods, including document reviews, key informant interviews, and participant surveys, the SRI research staff is collecting data about the development, function, and goals of collaborative activities; the ongoing challenges and facilitators to successful collaboration; and the degree to which collaboration activities contributed to short- and long-term outcomes relevant to SMH PEI services and supports.

Preliminary Findings from Key Informant Interviews

The SRI research team consulted with California Department of Education (CDE) and California County Superintendents Educational Services Association (CCSESA) program staff to identify individuals who participate in CalMHSA-supported

collaborative activities and represent different program components and roles in various locations. Due to their personal and professional involvement in SMH partnerships, these respondents were in positions to judge the benefits and challenges of collaboration. Below, we report preliminary findings from 12 interviews conducted with these SMH key informants in the fall of 2013 separately for each K–12 CalMHSA-funded program.

California Department of Education (CDE). Tom Torlakson, the State Superintendent of Public Instruction (SSPI), convened the SMHPW to develop a framework for student mental health, identify best practices, and recommend policies at the state, regional, and district levels. Members meet quarterly and represent multiple sectors and consumers of the mental health community, such as state and county mental health professionals, school administrators, school nurses and psychologists, community-based organizations, consumer and advocacy groups, and researchers. The SMHPW maintains strong partnerships with statewide agencies and organizations such as the National Alliance on Mental Illness (NAMI) and its local affiliates, the California Commission on Teacher Credentialing (CTC), Kaiser Permanente, the California State Parent-Teacher Association (CAPTA), the California Association of School Counselors (CASC), CalTrain, the Mental Health Association in California (MHAC), and United Advocates for Children and Families (UACF).

Interviews with SMHPW stakeholders revealed that the workgroup members shared a deep commitment and sense of responsibility to make the SMHPW projects successful. With well-organized meetings (led by program partners from the CDE), the workgroup profited from clearly articulated agendas and action items, productive use of subgroups, and effective communication mechanisms (e.g., regular teleconferences, frequent email). Importantly, the workgroup capitalized on a time-sensitive opportunity in 2013 to re-examine and provide feedback on the state teacher credentialing standards, which only occurs every ten years. The group rallied to develop and put forth their first official recommendation, *School Staff Preparation to Meet Student Mental Health Needs*, presented to the CTC in August 2013.

The recommendation sets forth new credentialing standards that require educators to be trained to provide students and their families with greater access to mental health services, and to enhance collaborative partnerships to link students to appropriate services. The recommendation was subsequently approved by CalMHSA's Advisory Committee and Board, and it has been officially submitted to the SSPI (<http://www.cde.ca.gov/ls/cg/mh/smhpwpolicyrec.asp>).

This historical accomplishment with the potential for far-reaching effects was not met without challenges, however. In engaging in the collaborative process, some SMHPW members recognized that the state education system can be resistant to change, especially to reforms that add to educators' responsibilities. They also voiced concern that impacting broader policy and educational practices requires collaboration and support at the local levels: changes will only be enacted with buy-in from the district and school levels. As one member declared, "We can get together and have great ideas, the State Superintendent can champion it and even give them as recommendations, but if our principals and teachers don't understand it and buy in, then it won't be successful."

California County Superintendents Educational Services Association (CCSESA). Through CCSESA, county superintendents have a regional structure and statewide organization to deliver educational support services to all of the state's districts and communities. CCSESA's Regional K–12 Student Mental Health Initiative is based on a common statewide framework of SMH PEI strategies that also supports regional flexibility to build on local strategies and to employ culturally competent practices. County Cross-System Leadership Consortia, which consist of representatives from organizations including county mental health, probation, school districts, foster care, and youth agencies, work together locally and regionally to build cross-system collaboration, education and training, technical assistance to schools, and school-based demonstration projects. County consortia develop their own SMH PEI plans and capacities to meet local SMH priorities and needs while also having the opportunity to connect with other counties to gain insights on lessons learned and model practices that address common issues.

Interviews with CCSESA administrative staff (including those from the Sacramento County Office of Education and those who coordinate the initiative across CCSESA regions) and Regional Leads representing county consortia shared their impressions that the collaborative structures allowed for efficient delivery of training and technical assistance, information sharing, and modeling demonstration programs across counties and regions. For example, trainings on relevant topics (e.g., suicide prevention, the effects of trauma on children, schoolwide positive behavior support) were held in central locations with video conferencing available to distant counties.

Counties vary dramatically in terms of mental health needs, service capacities, resources, and level of collaboration with local mental health departments and other key stakeholders. Consequently, some participants expressed frustrations about their partners' resistance to change and lack of support for school-based mental health delivery systems. However, many interviewees also recognized considerable accomplishments from their partnerships and networking, including the implementation of key demonstration programs across counties, such as those focused on culturally relevant bullying prevention and positive school climate strategies, and the adoption of standard curricula for supporting students' social-emotional learning (e.g., Triple P, Second Step).

Next Steps

To learn more about the extent to which collaboration and networks supported by CalMHSA have fostered improvements in the delivery of PEI services and supports, the SRI research team will next develop a brief collaboration survey to be disseminated widely to participants in SMH collaborative activities (e.g., CCSESA county consortia members, SMHPW members). These additional survey data will allow researchers to integrate quantitative findings from a larger audience with the in-depth data from the key informant interviews, and to investigate whether specific characteristics of collaborative entities (e.g., degree of formality, level of mutuality) or participants (e.g., duration of involvement, gender, role) affect the success or challenge of forming partnerships.

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RAND Health

This research was conducted in RAND Health, a division of the RAND Corporation. A profile of RAND Health, abstracts of its publications, and ordering information can be found at <http://www.rand.org/health>.

CalMHSA

The California Mental Health Services Authority (CalMHSA) is an organization of county governments working to improve mental health outcomes for individuals, families, and communities. Prevention and Early Intervention programs implemented by CalMHSA are funded by counties through the voter-approved Mental Health Services Act (Prop. 63). Prop. 63 provides the funding and framework needed to expand mental health services to previously underserved populations and all of California's diverse communities.

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