MEMORANDUM

TO: Arlington School Board

FROM: Student Services Advisory Committee

DATE: November 20, 2017

SUBJECT: 2017-2018 Recommending Year Report

Introduction

The Student Services Advisory Committee (SSAC) reviews the services offered by school counselors, psychologists, social workers, and substance abuse counselors and makes recommendations for changes or improvements in those services. This work is conducted in close collaboration with the Office of Student Services as well as various other key stakeholders from Arlington Public Schools (APS), Arlington County and community members.

Since 2015, the SSAC has focused on the following:

- Supporting the Office of Student Services to increase support across all schools by improving social worker and school psychologist-to-student ratios with a goal of reducing the ratio in closer alignment with national standards;
- 2) Establishing requirements for teachers and administrative staff for high-quality, low-cost mental health training Mental Health First Aid, to equip them to recognize, refer, and support students with mental and emotional issues; and
- 3) Expanding the reach and impact of current information, programs, and opportunities for students, families, and the community to access youth social-emotional and mental health/resiliency resources, and develop new resources in accessible, available formats.

To bolster the progress made over the last two years, the committee is recommending continued efforts to improve and sustain support systems within the schools from elementary through high school, to better address social, emotional and mental health needs of students, parents and teachers and provide more resources in the schools and community.

The Student Services Advisory Committee is presenting the following recommendations for 2017-2018:

2017-2018 SSAC Recommendations

- 1. Increase the number of counselors across all elementary schools with the goal of improving the counselor-to-student ratio by reducing the ratio from 1:470 to 1:371 over a two-year period.
- 2. Continue to increase the number of school psychologists and social workers across all schools to support the improvement of the ratio of these professionals with the number of students needing vital social, emotional and mental health support.
- 3. To address the growing student, family and staff needs for critical substance abuse prevention and intervention services in APS secondary schools and programs, expand the number of APS substance abuse counselors, with the goal of one full-time SAC serving each of these middle schools, high schools, and secondary programs.

Background

As in recent years, SSAC 2017-18 recommendations continue to focus on social, emotional and mental health and well-being. This focus aligns closely with both the current APS strategic plan goals and School Board priorities to support the needs of the whole child while also supporting and empowering teachers and staff.

In Virginia, over 20% of its students are experiencing a mental disorder at a level that will impair academic functioning and performance; however less than half will receive treatment. The Centers for Disease Control and Prevention (CDC) reports that adolescents often experience stress, confusion, and depression from situations occurring in their families, schools, and communities. The impact is often absenteeism, tardiness, poor academic performance and more.

In March 2017 Arlington County and Arlington Public Schools administered the Youth Risk Behavior Survey (YRBS)¹ to APS 6th, 8th, 10th and 12th graders. Prior to that, the most recent YRBS had been administered in 2013 to APS students in those grades. This survey (YRBS) is based on the national survey developed by the CDC.

¹ Survey results can be found here: https://apcyf.arlingtonva.us/2017-yrbs-school-reports/
The CDC's Survey was developed in 1990 to monitor priority health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth and adults in the United States.

The results show that many of Arlington's young people are dealing with stress, anxiety and depression. Alcohol and drug use is also a note of concern. Some key findings are shared below about Arlington teens:

- 70% of high school students reported feeling stressed by school often or very often
- Compared to the 2013 survey, this number increased the most for 12th graders, from 29% in 2013, to 37% in 2017
- Use of marijuana, prescription drugs for other than their intended use, and overthe-counter medication to get high has all increased
- 19% of middle school students, and 34% of high school students reported feeling sad or hopeless for two or more weeks during the past year.

National statistics show that suicide is the second leading cause of death for college age youth and ages 10-24. 90% of those who died by suicide had an underlying mental illness. According to the CDC, twice as many children and adolescents between the ages of 10 and 14 died by suicide in 2014 than in 2007. In Virginia, suicide is the third leading cause of death among 10 to 24-year-olds.

With the rise in mental health related issues in the schools, the demand for services has exponentially increased. For example, there has been a significant increase in all activities and services provided by school psychologists and social workers to students and families. The table below provides a snapshot comparing some of the services provided in FY 2015-16 and FY 2016-17 (as of March 2017).²

Activity	FY 2015-16	FY 2016-17	% Increase
Psychological Assessments	442	583	32%
Special Education Eligibility Meetings	2057	2537	23%
504 meetings	404	518	28%
Counseling - as a related service - number of active cases	509	682	34%
Counseling - as a related service - number of sessions	1309	1883	44%
Counseling - individual number of active cases	570	732	28%

² More details on these and other activities were shared during the FY 2018 budget process and can be found on pages 10-12 in the *School Board Questions and Answers* document: https://www.apsva.us/wp-content/uploads/2015/05/FY-2018-School-Board-Budget-Questions-and-Responses-05-09-2017.pdf.

Counseling - individual number of sessions	1592	2072	30%
Counseling - groups number of sessions	284	371	31%
Risk assessments	63	92	46%

The Office of Student Services has also tracked the number of students who require special education services and those who require accommodations according to a 504 Plan. As enrollment in APS schools increased over the past five years from 22,556 to 26,795 students, the number of special education students has increased from 3,570 to 4,164. The percentage of students receiving special education has remained relatively stable, between 15-16% of total enrollment. However, the number of students with a 504 plan has more than doubled over the last five years, from 346 to 867, and the percentage of students with a 504 plan has more doubled as well, growing from 1.53% to 3.24% of total enrollment.

Like special education services, 504 accommodations are required under federal law for students who qualify for them. While special education services receive federal funding, services provided under 504 plans are not funded. This means that there is no specific funding for the staff involved in identifying students, creating the 504 plan, implementing the 504 accommodations and requalifying the 504 plan every three years, other than the three 504 coordinators who help develop 504 plans.

School psychologists, social workers and counselors are involved throughout the 504 process. Psychologists, school social workers and counselors are part of the team who identify which students qualify for a 504 plan. Psychologists and counselors work with the 504 coordinator to create the initial 504 plan. Counselors act as case managers once the 504 plan is developed and are responsible for the annual review of 504 plan and three year requalification process.

It is imperative that APS considers the growing need for these services when determining staffing of psychologists, social workers and counselors in our schools. To best support the whole child and ensure that social, emotional and mental health needs can be addressed, the committee presents the following recommendations.

Recommendation 1

Increase the number of counselors across all APS elementary schools with the goal of improving the counselor-to-student ratio by reducing the ratio from 1:471 to 1:366 over a two-year period.

In the APS system, there are 14,291 students in APS elementary schools³ representing a ratio of 1 counselor to 471 students. The American School Counselors Association (ASCA) recommends a ratio of 250 students to 1 counselor. At present, there is one counselor in each elementary school; an additional 0.2 counselor is allotted per 50 students, or major portion thereof, over 400.

Given the current ratio at the elementary school level of 1:471, SSAC recommends an increase in elementary school counselors over a two-year period, as a staged approach similar to the hiring of the school psychologists and social workers that APS has approved, over the three-year period. This would represent hiring of approximately 4.6 elementary school counselors each year, for a total of 9.2 elementary school counselors. This would bring the ratio down from 1:450 to 1 1:420 in FY17-18 and then to 1:366 in FY18-19.

Rationale

Elementary school years are an important, formative time in children's lives when the foundations are established to develop the academic, social and emotional skills necessary for them to become healthy, competent and confident learners. The elementary years are a time when students start to develop their academic self-concept, decision-making, and self-assurance as learners. It is also a time when children develop and acquire attitudes toward school, self, peers, social groups and family.

Counselors serve a multitude of functions in elementary schools and are vital to the success and development of elementary school students. By providing education, prevention, early identification and intervention, elementary school counselors help their students develop social and emotional skills, resiliency and achieve academic success. These are indispensable skills for success in middle and high school: a failure to build these resiliency factors — one of the Whole Child tenets — will lead to more social, emotional and academic issues as students move beyond elementary school.

Counselors as mental health and education professionals

Elementary school counselors perform many roles in elementary schools to address the needs of all students. First and foremost, they are counselors and mental health and education professionals who are trained to provide short-term individual and group counseling. School counselors possess training in crisis counseling, risk assessments, family systems, substance abuse, individual and group counseling and the mental

 $^{^3}$ This total number includes the 1219 students in pre-kindergarten programs at two elementary schools, Hoffman-Boston and Drew Elementary, as counselors also have involvement with these students. However, the student population of K-5 is 13,072. The current planning factor one counselor per 450 per school K-5 enrollment only and $.2 \times 90$ over 450.

health disorders of childhood. Aligned with Arlington's Tiered System of Support (ATSS), the school counseling program addresses the various needs of all populations of students, whether a student is identified as an English learner, a student with a disability, a student who is identified as gifted, or as LGBTQ, and other special populations. When a crisis arises in a school, the school counselor leads the crisis counseling efforts. The counselor also provides short-term and group counseling for students with Tier 2 and 3 concerns such as stress and anxiety, friendships, anger management, divorce and loss, emotion and behavior regulation, and many other areas of need.

Counselors as teachers

Elementary school counselors also function as teachers, teaching evidence-based classroom lessons to all students with the aim of building the students' resiliency, life skills such as empathy and emotion regulation, problem-solving, goal-setting, career lessons and self-protection, among others. One of the biggest challenges for elementary school counselors is recognizing and responding to the vast developmental range of elementary school students. Elementary school counselors must be aware of the developmental needs of each grade level when planning and delivering classroom guidance lessons as well as classroom management strategies.

Elementary school counselors contribute to school climate; they lead bullying prevention lessons, provide staff information on bullying and child abuse/prevention, and lead campaigns throughout the year on topics such as attendance, bullying, career cafes, etc. Their goal is to help students feel safe and supported and to build relationships with all students. They advocate for the students and connect them to resources when they need additional supports inside and outside the school.

Elementary school marks the beginning of many children's lives in the structured environment of academics and dealing with peers. It is also a critical time in a child's social and emotional development. NAMI reports that 50% of lifetime cases of mental illness begin by age 14. Moreover, about 50% of students ages 14+ with a mental health condition will drop out of school. The average delay between onset of symptoms and intervention is 8-10 years. Logic dictates that early identification and intervention provides better outcomes.

Increasing the number of elementary school counselors as the APS student population grows will help to better identify and support children with nascent mental health issues. The goal is to provide students with the necessary support services to enable their success in their middle and high school years.

Recommendation 2

Continue to increase the number of school psychologists and social workers across all schools to support the improvement of the ratio of these professionals with the number of students needing vital social, emotional and mental health support.

In 2015-2016, this recommendation was presented by both the SSAC and the Arlington Special Education Advisory Committee and was approved in 2015-2016 for a three-year roll-out. For year three, the committee recommends continuance of the plan to hire an additional six psychologist and six social workers, as has been done in the previous two years.

Rationale

There has been an increase and overall improvement in mental, social and emotional supports for students, families and teachers thanks to the increase in school psychologists and social workers over the last two years. Tangible benefits for APS students, families and teachers include:

- Improved access to psychologists and social workers and improved mental, social and emotional support and services
- An increase in trained staff has helped ensure that students are not only challenged academically and engaged in learning, but also supported, safe and healthy
- The additional staff has brought the ratio down to 1:1148 for psychologists, and 1:1124 for social workers, moving closer to best practices and the national recommendation of 1:650. Improving the ratio allows APS to continue to significantly improve and increase these vital services in all APS schools.

School psychologists are trained mental and behavioral health providers who can deliver high quality mental and behavioral health services in the school setting as an extension of their specific role in assessing academic and mental health concerns of students. A school psychologist can help ensure students have the support they need to be successful in school, at home, and throughout life. School social workers are also trained mental health professionals with a degree in social work who provide direct services related to a student's and family's' physiological, safety (shelter, insurance), social, emotional, and life adjustment to school and/or society.

As described in the Background section, the need for services provided by the school psychologists and social workers continues to grow. This staffing plan ensures that each school is equipped with a comprehensive professional counseling team that includes school psychologists, social workers, counselors and substance abuse counselors.

Recommendation 3

To address the growing student, family and staff needs for critical substance abuse prevention and intervention services in APS secondary schools and programs, expand the number of APS substance abuse counselors, with the goal of one full-time SAC serving each of these middle schools, high schools, and secondary programs.

Students, family, and staff all recognize that substance abuse by youth is, unfortunately, once again on the rise in Arlington. Data indicates that APS substance abuse counselors ("SACs") have a significant impact on reducing drug and alcohol use by APS middle and high school students. Currently, this critical resource is provided by six SACs serving 13 middle schools, high schools and secondary programs. There is an urgent need to increase SAC prevention and intervention services.

The committee recommends expanding the number of APS substance abuse counselors, with the goal of one full-time SAC serving each APS secondary school and program to address the growing student, family, and school staff needs and concerns.

Rationale

In 2016-17, the six SACs provided prevention and intervention counseling services to all four high schools, the five middle schools, and the four special programs (H-B Woodlawn, Langston Continuation High school, New Directions, and Arlington Tech). Last year, there were 12,200+ students in these 13 APS secondary schools and programs. Services and support provided by the six SACs in these 13 schools and programs include:

- Student substance abuse assessments
- One-to-one psychoeducation and early intervention services to students
- Group counseling
- Assisting parents with resources and referrals for prevention, intervention, and treatment services
- Coordination of entry process to the New Directions program
- Collaboration and coordination with treatment providers, School Resource Officers, administrators, and school staff
- Presentations to PTAs and other parent/guardian groups
- Presentations to students in Health and other classes
- Collaboration and coordination of school prevention events and activities for students
- Collaborate and participate with APS, County, and community prevention groups and events
- Coordination of court and treatment services
- Coordination of re-entry process after residential treatment or detention

Looking at the March 2017 YRBS results, there are a number of trends since the 2013 survey that warrant attention and action.

- A significant rise in the number of students in grades 6, 8, and 10 using over-thecounter medication to get high. The biggest increase was among 6th graders – from 2% reported using in 2013 to 11% in 2017
- Use of prescription drugs for other than their intended purpose has also increased since 2013, most notably among 6th and 12th graders, with 4% of 6th graders taking pain medication not prescribed for them, and 17% of 12th graders using prescription medication such as Xanax and Adderall not prescribed for them
- 2017 YRBS data on "ever drank alcohol" indicates a positive response from 13% of 6th graders, 26% of 8th graders, 47% of 10th graders, and 69% of 12th graders. The data also show 20% of 12th graders indicated that they had consumed 5+ drinks within a few hours in the last month
- Marijuana use in the past 30 days increased to 27% for APS 12th graders, and by their senior year, 46% of APS students report that they have "ever used" marijuana
- Asked how many times during the past 30 days students had ridden in a car or other vehicle driven by someone who had been using marijuana; 27% of 12th graders and 9% of 10th graders reported one or more times
- While the data indicate that the percentage of 6th, 8th, 10th, and 12th graders who report riding with a driver who has been drinking alcohol had decreased from those reporting in 2013, the number of students in all four grades who reported that they had ridden with a drinking driver is frightening ranging from 11% of 6th graders, 16% of 8th graders, 20% of 10th graders, to 18% of 12th graders
- 24% of 12th graders and 10 % of 10th graders report use of vaping products, such as e-cigarettes. SACs point out that some of the vaping equipment, such as the juul, which looks like a flash drive, can be filled with marijuana or other substances and be used without detection, even during class, according to some APS students.

In light of this YRBS data for APS secondary schools and programs, it is not surprising that during the 2016-17 school year the number of students who received services from SACs increased by more than 25% over the previous school year, and data for this school year is on pace to exceed the number of students served in 2016-17. Referrals to SACs during the first quarter of the school year were nearly 15% higher than last year's first quarter, and 40% higher than the first quarter of 2015-16.

Arlington Police Department "drug offense arrestees 18 and younger" data reflect the same trend, with 28 arrestees during the first quarter of this school year, compared to 65 drug offense arrestees 18 and younger for all of the previous school year. At this

disturbing pace, there will be a 72% increase this year over last year's Arlington Police Department's *drug offense arrestees 18 and younger*.

Further confirming the extent of substance abuse among Arlington middle and high school students, in October 2017 the Office of the Commonwealth's Attorney, Arlington Police Department, Arlington County Government, and Arlington Public Schools planned and participated in an Arlington community town hall, "From Middle School to High School to Our Community at Large: Arlington Has a Drug Problem." A standing-room-only crowd of parents, guardians, youth, service providers, and other community members attended the town hall event and others throughout Arlington County watched the live broadcast, with others continuing to view it through social media and Arlington County and APS communication outlets.

Arlington Public Schools substance abuse counselors provide critical prevention and intervention services for our middle and high school students and serve as the linchpin for the families of these young people, as well as other caring adults and young people who support and encourage them. Their knowledge and training, dedication, and support are key in the efforts of friends, families, school administrators, teachers and other school staff, school nurses, School Resource Officers, coaches, physicians, and treatment professionals to help Arlington young people stay safe and healthy.

Budgetary Implications

This year's recommendations focus on increasing professional staff in order to most effectively meet the requirements and needs of APS students. Therefore, APS will need to consider the best approach to increasing staffing levels over time. Currently a FTE for a counselor, social worker or school psychologist is \$90,400.

At a time when resources are stretched and enrollment numbers continue to increase, weighing the costs and benefits of investing in these vital resources and supports for APS students is critical. The committee is dedicated to working collaboratively and creatively with APS staff to ensure that APS is able to carry through on its priorities to support the needs of the whole child.

Alignment with ACI Priorities

When students are healthy - physically, socially, emotionally and mentally, it sets the stage for effective learning and overall academic success. APS' commitment to providing adequate professional counseling staff ensures that supports are in place for all students.

This aligns closely with the key focus areas of inclusive education and opportunity gaps. In this case, it is making certain that regardless of the need or perceived ability, or other

factors that may challenge students, that APS staff and families are working together to support the whole child.

With respect to the other focus areas of literacy and the vision for PreK-12 instruction, having trained professional staff who can administer assessments and work closely with teachers and other staff, makes it possible for students to make progress. In addition, part of the vision for instruction must be to continue to plan and support specific programs that exist to meet special needs and circumstances for our diverse student population.

Ongoing Committee Work

Mental Health Trainings: Mental Health First Aid and Kognito

Mental Health First Aid

In 2015 the SSAC recommended training for staff, and as a result APS now requires Mental Health First Aid training for new hires as well as for those seeking licensure renewal. Thus far, hundreds of APS teachers and staff have completed this 8-hour training that uses a national peer-reviewed curriculum. Mental Health First Aid helps staff assist someone experiencing a mental health related problem or crisis. Youth Mental Health First Aid is designed to teach caring adults (parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services workers, and other caring citizens) how to help an adolescent (age 12-18) who is experiencing a mental health or addiction challenges or is in crisis. The course introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations, and where to turn for help.

Kognito

The SSAC appreciates the commitment of APS to continue this practice for new hires and for those seeking re-certification. The committee also urges APS to support the training of all other teachers and staff with an available online training called Kognito. Kognito Youth Suicide Prevention Training is an evidence-based online platform that includes three animated scenario simulations that prepare educators and other adults in our community to:

- Recognize when a young person is exhibiting signs of psychological distress, and
- Talk with the young person to be able to connect them with appropriate support.

The training allows participants to enter a virtual environment and assume the role of an adult interacting with a young person. Unlike many online platforms, these trainings are

interactive and dynamic with actions the participant chooses to move the scenario along; and participants receive real-time feedback on how well they are doing. Participants learn how to differentiate between "normal" and "at-risk" behavior and how to begin a conversation about the topic of mental distress.

Each training can be done in more than one sitting. *At-Risk for Middle School and At-Risk for High School* are each one hour online trainings to help concerned adults support youth who exhibit signs of psychological distress, including thoughts of suicide. *Step In, Speak Up!* is a 30-minute online training to help concerned adults support youth who may be struggling due to harassment or exclusion related to sexual identity, sexual orientation or other differences. The training simulations are classroom-based, but the information and practice skills can apply in many settings and are useful for anyone who works with youth including parents, school staff, scout leaders, coaches, faith communities, and more. All three trainings are listed as best practices by the Suicide Prevention Resource Center and the American Foundation for Suicide Prevention.

Arlington County Department of Human Services receives access to individual Kognito licenses through a VA State provided grant: The Regional Suicide Prevention Grant. This grant provides funding for suicide prevention resources to Arlington and several surrounding jurisdictions. Arlington County currently uses roughly 250 of the licenses annually; but can access up to 1000 for the year. These are made available to the Counseling Departments at the secondary level.

To underscore the importance of this APS training initiative, beginning in July 2017 a new Virginia law requires school counselors to receive more training in the recognition of mental health disorders, behavioral distress including depression, trauma, violence, youth suicide, and substance abuse. This requirement is tied to initial licensure and renewal of a license. More details and guidance is expected from the Virginia Dept. of Education. In the meantime, APS can lead the way in ensuring that school staff are prepared to support students who may need their help.

Kognito's Friend2Friend Peer Support Module

Kognito also provides a research-proven online, game-based simulation (30 minutes) that engages youth in a conversation about mental health and drives changes in their skills and attitudes toward seeking help for oneself or for a friend. It prepares youth to recognize signs of distress, reach out to a friend they are concerned about and help identify a trusted adult for support. Arlington County's DHS has offered licenses to the Counseling departments at the secondary schools.

One of the YRBS results pointed to the fact that youth are more likely to reach out to a peer than an adult in many cases. One of the ways APS can support youth is by

providing opportunities such as this Kognito training to learn how to seek help for oneself or a peer.

Online Resources

In Crisis/Need Help Now button

In SSAC's 2015 recommendation report, the committee advocated to add a clearly visible, easy to see and find button (icon) to APS school websites. This "In Crisis/Need Help Now" button links users to APS and county-wide services, programs and information on social, emotional and mental health topics. The button was created and positioned on the APS home page. Shortly thereafter, the websites were revamped and it disappeared. It took several months to get it back onto the APS website, and to make it visibly stand out. This effort was done in coordination with School and Community Relations and the Office of Student Services.

The idea is simple but so important: to provide easy to find, helpful mental health information and resources for all APS families. The button is back on the APS home page and is visible, however the committee strongly recommends that it be positioned higher up on the Quicklinks side panel. In addition, the committee will continue to stress the importance of making this button available on the home page of every single school web site.

Dissemination of Resources for Families

Through its research the SSAC discovered many ideas for concrete ways that more families and students could be reached with important, often life-saving, information and activities.

Caring, supportive, cohesive communities where every child is a valued member and where bullying also becomes much less likely

Every child should have the basic human needs -- for belonging, relationship, identity, security, and justice -- met within his/her community, and every child should be prepared to be a productive, contributing, and successful member of his/her future communities as an adult.

Student Services professionals can help in a number of ways, but responsibility for a school's community rests first with its principal, as well as the guidance and oversight s/he receives from APS, and as we continue to grow as a school system, we hope that the Whole Child Initiative and the ATSS framework will allow APS to provide more guidance and support to help all school communities more consistently become fully supportive of all members, and regardless of race, religion, ethnicity, ability, gender, or

gender identity. Examples of ways to make communities more caring and supportive include **Courtesy Week**, **Ability Week** and the **Buddy Bench Concept**.

Explore resources for all disadvantaged students that address any stress or trauma suffered by students with disabilities, English language learners, minority students, and economically disadvantaged students

Whether the disadvantage is economical, due to language barrier, due to being part of a disadvantaged or minority community, having special needs, etc., making sure that all of our children succeed requires that we offer sufficient caring and knowledgeable intervention, and that we continue to address achievement and graduation gaps academically.

Student Services professionals can help address the emotional issues these students might suffer (and we believe that HILT counselors' numbers should be increased for that reason, as well), but the actual sources of the stress are generally not within the purview of Student Services professionals.

Therapeutic rather than punitive approach to student behavioral problems

Mindfulness, meditation, and yoga are specific suggestions offered, for instance, as an alternative to detention, and the committee is interested in seeing more discussion regarding their potential for APS. The committee applauds APS' exploration of innovative and compassionate methods, such as the Restorative Justice process, and would like to encourage APS to continue to expand and strengthen such measures. The committee believes that as part of the Whole Child Initiative and the ATSS, these methods will continue to result in an overall more needs-based and child-centered approach being used consistently across APS.

The committee looks forward to continued progress in addressing whether minority students, students with disabilities, or other groups receive consistently equally satisfactory outcomes from within the ATSS when their behavior is believed to be an issue. Again, Student Services professionals can also aid further in addressing student assessment, behavior issues, and counseling or other remedies, if more fully staffed.

Committee Members

Erin Beckles, Erika Collins, Naomi Cummings, Jill Flack (Co-Chair), Alicia Giuliani Guajardo, Judy Hadden (Co-Chair), Linda Hardy, Jennifer Landis-Santos, Dana Milburn, Jennifer Taylor, Adora Williams, Zakiya Worthey; HB Woodlawn student Kayla Beckles

APS Student Services Staff Liaisons

Laura Newton, Director of Student Services; Pam McClellan, Supervisor of Counseling; Wendy Carria, Supervisor Psychologists & Social Workers; Sarah Snyder, Coordinator of Counseling

The Student Services Advisory Committee appreciates the opportunity to collaborate closely with APS staff, the School Board and the many community partners such as the Arlington Partnership for Children, Youth and Families and Arlington County's Dept. of Human Services. The committee members wish to thank the Office of Student Services staff and the building level staff and administrators who everyday carry out the important work overseen by Student Services to ensure that every child's needs are met.

References

Introduction

 March 2017 Arlington Youth Risk Behavior Survey administered to Arlington Public School middle and high school students

Background

- APS Strategic Plan 2011-2017
- 2015 CDC WISQARS
- National Alliance on Mental Illness (NAMI) Infographic Mental Health Facts:
 Children & Teens: nami.org
- (NAMI, National Center for Mental Health and Juvenile Justice). Arlington Partnership for Children, Youth and Families: http://www.apcyf.org
- Raising Safe & Healthy Teens" pamphlet by APCYF
- YRBS Arlington Partnership for Children, Youth and Family (APCYF) March 2015
 Assets Survey: http://www.boarddocs.com/vsba/arlington/Board
- Centers for Disease Control, Youth Risk Behavior Survey: http://www.apcyf.org
- Mental Health Facts for Children and Teens, NAMI https://www.nami.org/NAMI/media/NAMI-Media

Recommendation 1

- American School Counselors Association https://www.schoolcounselor.org
- National Center for Mental Health and Juvenile Justice: http://www.ncmhjj.com/
- Virginia Performs: http://vaperforms.virginia.gov/indicators/healthfamily/suicide
- National High School Center: http://www.ccrscenter.org
- Behavioral Institute for Children and Adolescents https://www.behavioralinstitute.org/mental-health
- Project Aware -- State of Virginia mental health service federal grants: https://governor.virginia.gov/newsroom/newsarticleNAMI "Mental Health Facts Children and Kids' 'nami.org

Recommendation 2

- National Association of Social Workers: http://socialworkers.org
- National Association of School Psychologists: http://www.nasponline.org/resources-and-publications/resources/mental-health/school-psychology-and-mental-health

Recommendation 3

- The Arlington Partnership for Children, Youth and Families (APCYF), articles on Assets, Teen Stress, etc: http://www.apcyf.org
- Mindfulness: http://www.childmind.org/en/mindfulness/home/
- National Alliance on Mental Illness (NAMI)
- https://www.nami.org/; http://notalone.nami.org/

Ongoing Work of the Committee

- Phone interview with Linh T. Nghe, Supervisor, Children's Behavioral Health Bureau, Behavioral Health Wellness Services, Arlington Dept. of Human Services
- https://www.mentalhealthfirstaid.org/
- https://nova.kognito.com
- https://apcyf.arlingtonva.us/2017/09/youth-risk-behavior-survey-summary
- https://www.edweek.org/tm/articles/2016/02/17/author-to-reach-struggling-students-schools-need.html