

December 13, 2022



Student Behavior & Mental Health: Pandemic Impact on Public K–12 Education

Behavioral Health Commission

Report summary

The pandemic was an unprecedented disruption for K–12 students and staff.

As students returned to in-person learning, chronic absenteeism, classroom behavior, and reported mental health issues have worsened.

Multiple indicators of student academic achievement declined during the pandemic; some started to rebound as students returned to in-person learning.

The teacher workforce is smaller, less qualified, and less satisfied with their jobs than prior to the pandemic.



Pandemic created a challenging environment for many K-12 students

- Extended period of remote instruction
 - led to decline in routines and patterns of good behavior
 - was especially isolating for some students
- Some students struggled to learn remotely, creating academic and emotional stress
- Numerous non-pandemic factors (e.g. social media) also contribute to student social & emotional challenges

K-12 staff reported student behavior as the most serious issue to address

- School staff rated student behavior as the most serious issue when asked to select from a list of 15 potential issues
- Existing state behavior support program* demonstrates positive results, but has only been available in ≈1/3 of schools

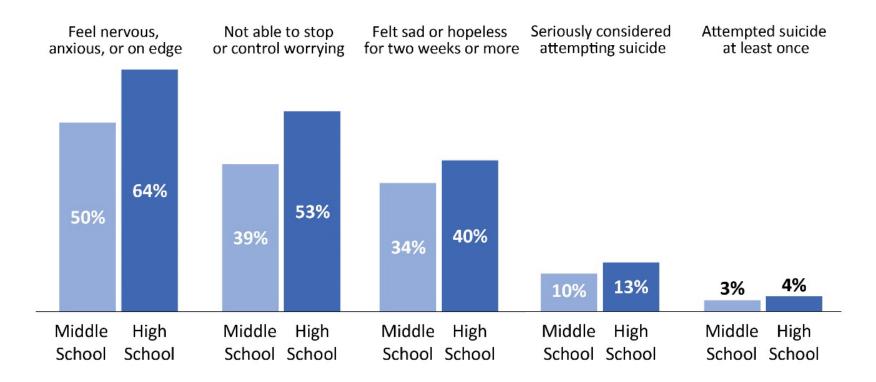
OPTION: Provide additional \$ for the Virginia Tiered Systems of Supports program to train staff at more schools about student behavior and classroom management

Source: JLARC survey of staff at 47 schools in 12 school divisions, spring 2022.

School staff and mental health professionals also reported concerns about student mental health

- Half of school staff reported student anxiety or mental health were "very serious" issue
- Youth mental health providers and pediatricians shared similar concerns:
 - "Pandemic of anxiety."
 - "My practice has become a mental health practice."
- Student mental health issues can negatively affect academic performance and staff working conditions

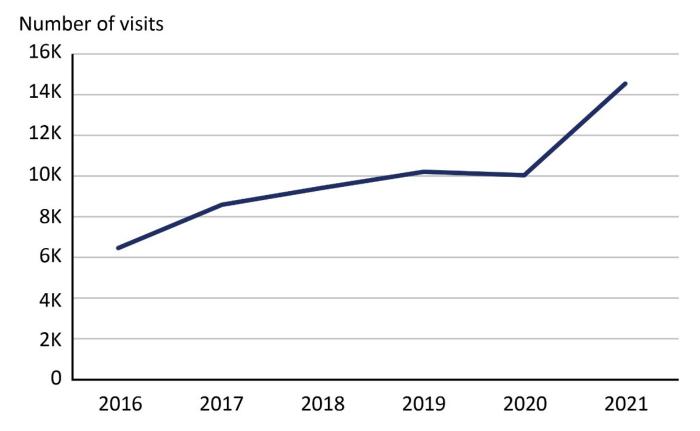
Students reported high levels of mental health issues during the pandemic



Source: VDOE School Climate Survey results - 2021 survey of middle school students and 2022 survey of high school students.

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Youth self-harm* resulting in emergency room visits increased substantially during pandemic



* Youth ages 9 to 18. Self-harm = suicidal thoughts, self-harm, or attempted suicide. Source: Virginia Department of Health.

Amid broader mental health staff shortage, JLARC focused on three strategies

- 1. Partner with public and private providers to supplement existing K-12 mental health capacity
- 2. Ensure already-employed school mental health staff are being used efficiently and appropriately
- 3. Within existing state licensing framework, allow other qualified mental health professionals to work in system



Partnerships with external providers are helping some divisions address student mental health needs

- Partnerships can be with CSBs (Hampton) or private provider networks (Hopewell)
- Partnerships help school staff and students
 - supplement school staff and help manage workload
 - provide higher levels of intervention for students with the greatest need or who are in crisis
- Full extent of partnership potential is unclear
 - state could provide guidance, help identify and fund partnerships
 - BHC staff focus in this area would be beneficial

School counselors work directly with students, report needing more time for counseling activities

- Counselors work directly with students (crisis, individual, or small group) on mental health and wellness, and socialemotional development
- School counselors comprise the majority of school mental health staff
- Nearly all mental health staff surveyed reported needing more time for direct student counseling



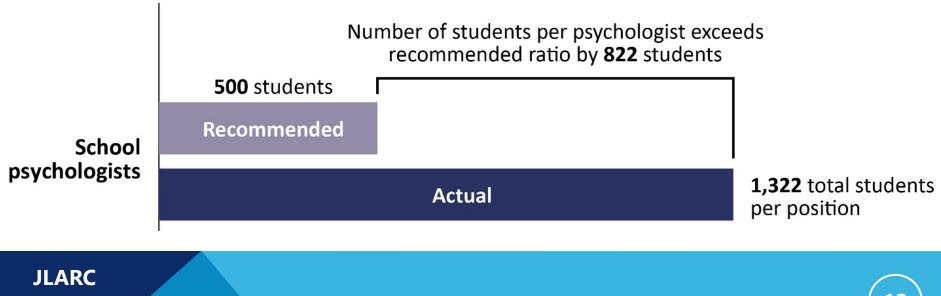
Counselors perform non-counseling activities, precluding full focus on counseling

- However, many counselors report being asked to supervise lunch or recess, administer tests, or cover classes
- Code of Virginia requires counselors to spend at least 80% of their time on "direct counseling" but does not define which activities qualify
- 2019 stakeholder workgroup defined direct counseling (school counseling curriculum, counseling, appraisal & advisement, consultation & referral)

RECOMMENDATION: Codify definition of direct counseling and expressly exclude administrative or support activities

School psychologists address complex mental health issues, far fewer employed than recommended

- School psychologists specialize in student mental health, social-emotional skill development, and psychoeducational assessment
- Virginia employs fewer psychologists than recommended by the National Association of School Psychologists



Divisions face shortage of school psychologists, which could be eased through use of provisional license

- Eleven percent of school psychologist positions statewide are vacant, one of the highest rates among all staff
- Divisions reported school psychologist positions are particularly challenging to fill due to small number of qualified individuals available
- Stakeholders indicate that licensed, qualified clinical psychologists could work in schools with moderate additional credentialing

RECOMMENDATION: Allow qualified, licensed psychologists to be provisionally licensed as a school psychologist.

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Full version of "Pandemic Impact on Public K-12 Education" available online at

http://jlarc.virginia.gov/landing-2022-pandemic-impact-onk-12-education.asp



