

# School-Based Mental Health Services in Hennepin County

## School Year 2017-18



**1 IN 5 YOUTH<sup>1</sup>**

**EXHIBIT MENTAL HEALTH ISSUES**

and most (80%) do not receive services to address them.<sup>2</sup>

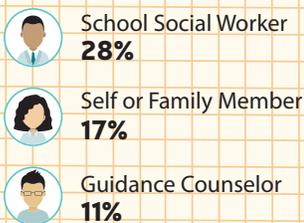
School-based mental health services allow students to access clinical supports in their school. These services not only prevent them from missing school, but also increase access for students who are uninsured or underinsured. This is a summary of services provided by six providers in Hennepin County, Minnesota, based on data from the MN Kids database.



The Minnesota Kids Database (MKD) is a collaborative project to collect a common set of data related to clinical services provided in schools with the goal of better understanding the potential benefits of school-based mental health services and identifying strategies for enhancing programming.

MKD is managed and owned by the partners that financially contributed to its creation and is not a government run website. Wilder Research serves as project manager, providing training to users, managing user agreements and fees, and preparing reports. Learn more about MKD at [www.mnkidsdata.org](http://www.mnkidsdata.org).

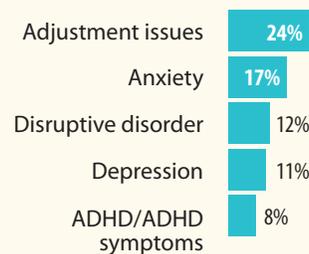
### Students are referred mostly by . . .



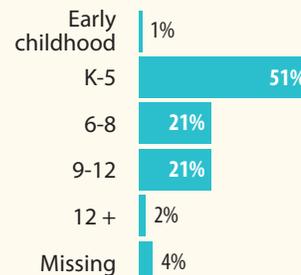
### who received mental health SERVICES?

Six agencies provided school-based mental health services to nearly 2,500 students in Hennepin County during the 2017-18 school year. These agencies served students up to the age of 24. Over half (53%) were male, 45% female and 2% identified as transgender or other. The race/ethnicity of students served were white (34%), black (24%), bi-racial or multiracial (9%), and/or Hispanic or Latinx (20%).

#### Top 5 presenting problems



#### Grade of students served



#### 1st time receiving mental health services



### Students receiving school-based mental health services in Hennepin County are more likely than their peers to . . .

be diagnosed with Severe Emotional Disturbance



have an Individualized Education Plan (IEP)



Note. According to clinicians

### NATIONALLY

In 2015, six percent of parents reported that their child ages 4-17 displayed serious difficulties with emotions, concentration, behavior, or getting along with other people.<sup>3</sup>

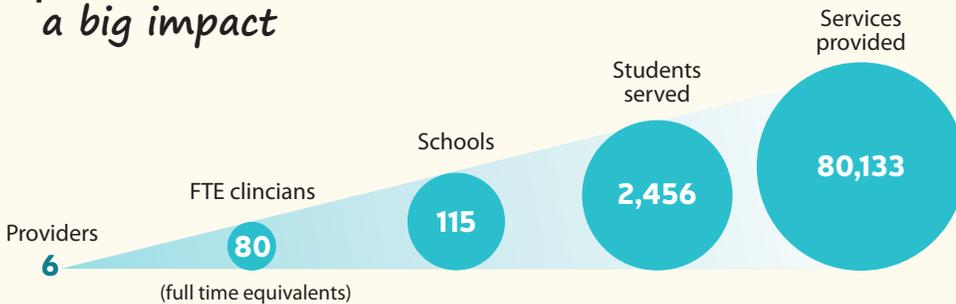
5% of special education students have a severe emotional disturbance.<sup>4</sup>

13% of students in public schools are in special education.<sup>5</sup>

# what are the SERVICES PROVIDED?

School-based mental health services are paid for through a mix of public insurance, private insurance, and additional government funding. Government agencies, including Hennepin County Health and Human Services and the Minnesota Department of Human Services department, supplement coverage, especially for services insurance will not cover or if a student is not insured.

## 6 providers have a big impact



(GAP, Headway, Nystrom, People Incorporated, Washburn, Watercourse)

## Top 5 services

| Service                  | Duration        | Percentage | Count  |
|--------------------------|-----------------|------------|--------|
| Individual Therapy       | (38-52 minutes) | 24%        | 19,513 |
| Individual Therapy       | (53+ minutes)   | 13%        | 10,564 |
| Parent Consultation      |                 | 9%         | 7,505  |
| Consultation to Teachers |                 | 7%         | 5,709  |
| Care Coordination        |                 | 7%         | 5,393  |

Data include number of services and percentage of overall services.

# are students IMPROVING?

The Strengths and Difficulties Questionnaire (SDQ) is a brief questionnaire given to parents and/or teachers every 90 days during treatment to assess the student in several areas.

## SDQ assessment results

972 students had more than one parent SDQ completed during the school year. Of those,



731 students had more than one teacher SDQ completed during the school year. Of those,



## SDQ assessment areas



<sup>1</sup> Merikangas, K. R., He, J., Burstein, M., Swanson, S. A., Avenevoli, S., Lihong, C., . . . Swendsen, J. (2010). Lifetime prevalence of mental disorders in U.S. adolescents: Results from the National Comorbidity Survey Replication-Adolescent Supplement (NCS-A). *Journal of the American Academy of Child and Adolescent Psychiatry*, 49(10), 980-989.

<sup>2</sup> Kataika, S. H., Zhang, L., & Wells, K. B. (2002). Unmet need for mental health care among U.S. children: Variation by ethnicity and insurance status. *American Journal of Psychiatry*, 159(9), 1548-55.

<sup>3</sup> Emotional and behavioral difficulties. (2017). In *America's children: Key national indicators of well-being*. Retrieved from <https://www.childstats.gov/americaschildren/health3.asp>

<sup>4</sup> Children and youth with disabilities. (2016). In *The condition of education 2016*. Retrieved from [https://nces.ed.gov/programs/coe/pdf/Indicator\\_CGG/coe\\_cgg\\_2016\\_05.pdf](https://nces.ed.gov/programs/coe/pdf/Indicator_CGG/coe_cgg_2016_05.pdf)

<sup>5</sup> Children and youth with disabilities. (2018). In *The condition of education*. Retrieved from [https://nces.ed.gov/programs/coe/indicator\\_cgg.asp](https://nces.ed.gov/programs/coe/indicator_cgg.asp)

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