

Blog Article

The Impact of School Mental Health Services on Reducing Chronic Absenteeism

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*This blog post is written by **Healthy Schools Campaign** (<https://healthyschoolscampaign.org/>), **Mental Health America** (<https://mhanational.org/>) and Attendance Works.*

Students who are experiencing well-being and feel engaged are much more likely to attend school and achieve academically. Recently reported declines in student mental health are raising concerns among educators, families and pediatricians and may be contributing to the drastic rise in chronic absence seen in most schools today.

Chronic absenteeism (missing 10% or more of school for any reason) is one of the biggest challenges facing public K-12 schools. When children are not in school, they can be below grade level for reading and numeracy in the **early grades** (<https://www.attendanceworks.org/preschool-attendance-in-chicago-public-schools/>), achieving in **middle school** (<https://www.attendanceworks.org/preventing-student-disengagement-and-keeping-students-on-the-graduation-path-in-urban-middle-grades-schools/>) and graduating from **high school** (<https://www.attendanceworks.org/what-matters-for-staying-on-track-and-graduating-in-chicago-public-high-schools-a-close-look-at-course-grades-failures-and-attendance-in-the-freshman-year/>). They also are at higher risk of falling behind in social-emotional **development** (<https://journals.sagepub.com/doi/10.3102/0013189X21994488>) and **executive functioning**. (<https://psycnet.apa.org/record/2021-26898-006>) Chronic absence **nearly doubled** (<https://www.attendanceworks.org/state-data-for-2021-22-school-year/>) since the Covid-19 pandemic, from 16% to nearly 30% of students in the 2021-22 school year. It is disproportionately

affecting Black and brown children and those experiencing poverty. **State data** (<https://www.future-ed.org/tracking-state-trends-in-chronic-absenteeism/>) for the 2022-23 school year shows only modest declines in most states and even slight increases in a few.

Research shows (<https://www.attendanceworks.org/mapping-the-early-attendance-gap/>) that physical health challenges, such as asthma or unmet oral health needs, have been the leading causes of health-related school absenteeism. By analyzing data from school-based health centers, **The Los Angeles Trust for Children's Health** (<https://www.thelatrust.org/datainsights>) found that anxiety, depression and mental health are currently the top health-related drivers of absenteeism in those schools. A recent **Youth Trust Survey** (<https://youthtruthsurvey.org/resources-3/#SWI>) of 500,000 students found that nearly half (48%) reported that depression, anxiety and stress are making it difficult for them to do well in school, a substantial increase from 39% in 2020.

As schools, districts, states and communities seek to address the attendance crisis, they should consider the positive impact of school-based mental health services on student attendance. Since children spend half their awake hours at school, schools are the ideal place to receive such services, especially in under-resourced areas where students may struggle to receive such services. Accessing mental health services at school also can reduce stigma and address transportation and scheduling barriers.

Attention to mental health can be integrated into school and district investments in ensuring a **multi-tiered approach** (<https://www.attendanceworks.org/chronic-absence/addressing-chronic-absence/3-tiers-of-intervention/>) to reducing chronic absence that begins with prevention and an investment in the underlying **positive conditions for learning** (<https://www.attendanceworks.org/using-chronic-absence-data-to-improve-conditions-for-learning/>) that motivate all students to come to school while also promoting academic success.

The following school-based service and integrated care delivery models have shown positive impacts on students' school functioning, with significant improvements in attendance.

School-Wide Social and Emotional Supports

The foundations of a successful multi-tiered strategy are aimed at supporting all students: universal prevention-oriented approaches that reinforce positive social and behavioral skills. **Research shows** (<https://srcd.onlinelibrary.wiley.com/doi/10.1111/cdev.13968>) that students who participated in these programs experienced significantly improved skills, behaviors, sense of safety, peer relationships and academic achievement. **An evaluation** (<https://d1fbsi2gqyrpr4.cloudfront.net/main/v0.4.7/assets/pdf-files/articles/sh2013.pdf>) of Positive Action, a social emotional character development program, shows reduced student chronic absenteeism as one of the outcomes. Other research shows implementation of **school climate initiatives** (<https://journals.sagepub.com/doi/abs/10.1177/1098300715580992>) such

as PBIS can improve attendance. The Centers for Disease Control and Prevention has created an **action guide** (<https://www.cdc.gov/healthyyouth/mental-health-action-guide/index.html#mtss>) to promote and support mental health and well-being using a multi-tiered approach.

School-Based Health Centers

School-based health centers provide comprehensive health services at a clinic co-located in or near a school. A **recent study** ([https://www.jahonline.org/article/S1054-139X\(23\)00377-4/pdf?mc_cid=4e45db0b68&mc_eid=fc9bbe2b8c](https://www.jahonline.org/article/S1054-139X(23)00377-4/pdf?mc_cid=4e45db0b68&mc_eid=fc9bbe2b8c)) analyzing data from a large urban school district revealed that students who received care from an SBHC for any reason showed improved attendance trajectories following their first SBHC visit, and the results were nearly five times greater for students who visited the SBHC specifically for a mental health concern.

School-Community Partnerships

School-community partnerships are formal agreements between schools and community mental health providers to allow those providers to deliver services to students in the school setting, which can reduce stigma and address transportation and scheduling barriers. The Mental Health Integration Team program in Kansas began as a pilot in nine school districts across the state. **State data** (<https://www.ksde.org/agency/Fiscal-and-Administrative-Services/School-Finance/Mental-Health-Intervention-Team-Program>) estimates that student attendance rates following participation in the MHIT program improved absenteeism by over 33%. The positive outcomes from the pilot led Kansas lawmakers to scale up the program from the original nine districts in the 2018-2019 school year to 90 districts in 2023-2024.

Integrated Care Models

Integrated behavioral health services in primary care models provide team-based care from behavioral health staff working with pediatricians and other team members to screen and deliver services to young people. Though not specifically provided in schools, **recent research** (https://journals.lww.com/jrnldb/fulldtext/2023/09000/changes_over_time_in_outcomes_of_schc) on integrated care models, such as the Transforming and Expanding Access to Mental Health Care in Urban Pediatrics (TEAM UP), revealed that participation in integrated care at a federally qualified health center is associated with improved attendance. Children missing school because of mental health problems dropped from an average of one day per two-month period to an average of one missed school day per 10-month period. The study showed that students were late less often.

School-Based Health Providers

School-based mental health providers are employed by the school district and include school nurses, social workers and school psychologists. They play a significant role in recognizing early warning signs of absenteeism and preventing chronic absence in the first place. A **review of research** (<https://pubmed.ncbi.nlm.nih.gov/30674219/>) published between 2002 and 2018 shows that the presence of a school nurse is associated with fewer missed days of school. More

recent research (<https://journals.sagepub.com/doi/10.1177/10598405231210959>) published in 2023 finds that students with high numbers of partial-day absences are likely to visit their school nurse for support.

School-Based Teletherapy

Teletherapy is another important approach for delivering mental health services in schools and can also help students regularly attend school. A **2023 study** (<https://caldercenter.org/sites/default/files/CALDER%20WP%20276-0123.pdf#page=5>) of three rural school districts in North Carolina found that access to a school-based telemedicine clinic, which provided physical and mental health services, reduced the likelihood of chronic absenteeism by 29%.

Going Forward

Today, schools are grappling with declining health service resources and hard decisions – especially as federal Covid Elementary and Secondary School Emergency Relief (ESSER) and other one-time funding sources end this year. However, the mental and behavioral health challenges students are experiencing do not go away just because this funding ends.

Sustained federal and state investments are needed to realize the full impact that school mental health services can have on attendance and student wellness. These should include increasing state and school district supports that were enacted as part of the federal Bipartisan Safer Communities Act, including funding to support the school-based mental health workforce. In addition, greater funding can be provided for federally qualified health centers and school-based health centers, especially for those that integrate behavioral health into primary care settings.

As states and schools face the ESSER fiscal cliff, it is urgent they maximize other available funding streams and sources. **School-based Medicaid** (<https://753a0706.flowpaper.com/CCSSORRLeveragingFederalv3/#page=1>) is one key source to help sustain ESSER mental health investments, yet **twenty-five states** (<https://healthystudentspromisingfutures.org/resources/state-status-school-medicaid-expansion-2023/>) have taken no action to allow for increased reimbursement of services in schools from the federal government.

Recent research and data on the impact of school-based mental health services on chronic absenteeism provide an exciting start, but there are still gaps in our knowledge. For example, new research can help us better understand the impacts of school climate and culture on absenteeism and how school-based mental health services support teachers and staff, as well as families and caregivers.

Investments in school mental health services and attendance are urgently needed. Going forward, comprehensive mental health services should be integral to efforts to reduce chronic absence and promote student success and well-being.

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