**RSAI 2023 Legislative Priority:   
Student Mental Health**

**Background:** Mental health challenges for students have increased in all school districts in Iowa, including rural schools. DE’s [website](https://educateiowa.gov/pk-12/learner-supports/mental-health) shares how mental health conditions impact a large number of youth. A [National Alliance on Mental Illness (NAMI) infographic](https://nami.org/Press-Media/Media-Gallery/image) includes the following statistics:

* 1 in 5 children ages 13-18 have or will have a serious mental illness.
* 50% of all lifetime cases of mental illness begin by age 14 and 75% by age 24.
* The average delay between the onset of symptoms and intervention is 8-10 years.
* Approximately 50% of students age 14 and older with a mental illness drop out of high school.
* 70% of youth in state and local juvenile justice systems have a mental illness.

In addition, in 2011, suicide became the second leading cause of death for youth ages 15-24 in the U.S. In 2014, suicide was the second leading cause of death for youth ages 10-14 in the U.S., though it dropped to the third leading cause in 2015. By 2019, suicide is again second. [Leading Causes of Death and Injury Charts, CDC](https://www.cdc.gov/nchs/data/nvsr/nvsr70/nvsr70-09-tables-508.pdf)

**Provider Shortage:** [Iowa Capitol Dispatch](https://iowacapitaldispatch.com/2020/11/23/iowans-must-fight-again-for-state-support-of-mental-health/) reported on Nov. 23, 2020, “One in five Iowans is likely to be affected by a mental health challenge in a normal year. In 2020, that estimate increased to one in four, according to [*NAMI Iowa’s strategic plan*](https://documentcloud.adobe.com/link/track?uri=urn%3aaaid%3ascds%3aUS%3a59cd9208-a039-49d4-9777-0f84734117bc&emci=002e7ea1-a02b-eb11-9fb4-00155d43b2cd&emdi=170092eb-a02b-eb11-9fb4-00155d43b2cd&ceid=2261064#pageNum=1). But Iowa continues to fall far short of the number of mental health providers needed to address the need. The state ranks 48th overall in the provision of mental health services, according to NAMI Iowa, with fewer than 100 psychiatrists accepting clients in the state.”

# Impact on School: Chronic Absenteeism is defined as missing 10% or 18 days a school year. Children with mental illness are more likely to miss school due to depression or anxiety and are then more likely to miss school to get needed mental health care. According to the American Academy of Pediatricians[, School Attendance, Truancy & Chronic Absenteeism: What Parents Need to Know](https://www.healthychildren.org/English/ages-stages/gradeschool/school/Pages/School-Attendance-Truancy-Chronic-Absenteeism.aspx), “**Children who are chronically absent in kindergarten and first grade are less likely to read on grade level by the third grade.**For older students, being chronically absent is strongly associated with failing at school―even more than low grades or test scores. When absences add up, these students are more likely to be suspended and drop out of high school. Chronic absenteeism is also linked with teen substance use, as well as poor health as adults.”

**Recent Strides:** Unless a student is receiving special education services and the IEP so authorizes, mental health treatment at school is not funded. Such services are often not readily available in rural communities, requiring time away from school or no service at all. Thankfully, the 2020 Iowa Legislature approved schools as originating sites for virtual mental health counseling. The hope is to minimize absenteeism and get students the help they need while at school, when virtual telehealth counseling is appropriate for their challenges. Although welcome, this will not be sufficient for Iowa’s neediest students.

The 2019 Legislature created a structure for children’s mental health services. In 2020, the Legislature and Governor approved [SF 2360](https://www.legis.iowa.gov/legislation/BillBook?ga=88&ba=sf2360) Classroom Management/ Therapeutic Classrooms. This legislation sets up a grant process for additional therapeutic classrooms. Both of these efforts require funding to be successful, which the Legislature appropriated in the 2021 Session. [HF 868](https://www.legis.iowa.gov/legislation/BillBook?ga=89&ba=hf868) appropriated $3.2 million to the Iowa AEAs in to provide mental health awareness training for educators and mental health services. In 2022, the Legislature created a new Mental Health Providers Loan Forgiveness Program in [HF 2549](https://www.legis.iowa.gov/legislation/BillBook?ga=89&ba=hf2549). [HF 2575](https://www.legis.iowa.gov/legislation/BillBook?ga=89&ba=hf2575) further increased mental health funding to AEAs to $3.4 million, added another $725,000 for the Therapeutic Classrooms, and established a Mental Health Rural Pilot Report (Required DE, in collaboration with the statewide not-for-profit health care organization receiving moneys for the children's grief and loss rural pilot program, to prepare a report detailing the expenditure of moneys used for the purposes of the program and its outcomes to the General Assembly by Sept. 30, 2023.) These are all promising investments, but the state must continue to support these and do more.

**COVID Impact:** Over the last two years, changes to educational delivery to keep staff and students safe, family job loss, quarantine requirements and illness all contributed to stress for students, parents and staff members with mental illness. The need to continue this important work is more urgent than ever. Making sure there is access to mental health services for all students and their families remains a struggle, especially for rural communities.

**Student Mental Health:** increased access to funded community mental health services for children. Address the shortage of mental health professionals statewide, provide resources for local districts to train school staff in social-emotional learning awareness and build community capacity to collaborate for a collective solution to the increasing mental health needs of children.