

**House Public Education Committee Interim Hearing on  
Improving Student Achievement  
May 14, 2014**

## **Healthy Minds, Successful Learners**

Thank you for this opportunity to provide testimony. I am Josette Saxton, Mental Health Policy Associate of Texans Care for Children, a nonprofit organization that works solely to improve outcomes for Texas children through policy change. We come by our recommendations and policy positions through active dialogue with our network of members throughout the state who together represent thousands of Texas children. We also co-convene various stakeholder groups, which bring together a wide range of organizations, families, and advocates around our areas of focus: early opportunity; infant, child and maternal health; children's mental well-being; child protection; and juvenile justice.

**Students need more than mastery of academic subjects to be successful in school and prepared for adulthood.** All students do best when they have clear and consistent expectations of how to behave, and it helps to have adults in their schools not only teach those behaviors, but role model them, too. All students need to develop and cultivate non-cognitive skills and abilities like self-control, the ability to stick to a task, the ability to calm themselves when upset, and to manage their frustrations in healthy, productive ways. Many students have personal barriers that make succeeding in school more difficult, such as a history of trauma or mental illness. Without effective interventions and supports, these students are at risk of being pushed out of school. These non-cognitive and behavioral factors that impact student learning must be included in efforts to improve student achievement.

### ***Role of non-cognitive skills.***

Research shows that non-academic factors influence how well students perform in school, and it often is non-cognitive skills and abilities that turn a good test-taker into a successful college student, employee, or future employer. James Heckman, a Nobel Prize winning economist at the University of Chicago, has demonstrated and champions the importance of psychological traits such as the inclination to persist at a boring and often unrewarding task; the ability to delay gratification; and the tendency to follow through on a plan in being in large part responsible for students being able to graduate from high school and, as adults, earn higher wages, and to avoid involvement in the welfare and justice systems.<sup>i</sup> School programs that cultivate social and emotional skills in students have been linked to increases in academic achievement and competence; decreases in problem behaviors; improved student relationships; and improvements in school and classroom climates.<sup>ii</sup>

***Role of school climate.***

School climate - including how safe students and staff feel when they are on campus, the availability of academic supports, social relationships among students and between students and staff, and the level of connectedness students feel towards the school – impacts student achievement and student behavior and is a factor that “differentiates schools that succeed from those that do not.”<sup>iii</sup> Schools that have implemented interventions and programming that promote a positive school climate have seen reductions in problem behaviors, improved classroom environments, increased school bonding, and enhanced youth competence.<sup>iv</sup>

A positive school climate also serves as a buffer to protect students from other factors known to impact learning and academic performance. Students who feel safe and connected to school are less likely to be absent from school, report mental health concerns, or engage in substance abuse, or delinquent or aggressive behaviors,<sup>v</sup> all of which get in the way of student learning.

***Role of stress and traumatic experiences on brain development.***

Acute or prolonged exposure to stress produces hormones known to physically alter a child’s developing brain, affecting structures that are critical to a student’s performance in school and, as an adult, are involved in things like regulating emotions, decision making, memory, impulse control and aggression.<sup>vi</sup> These functions are just as important to be a successful student and future adult, perhaps even more so, as are the academic skills and proficiencies that students are tested on in schools. Other research has shown that adverse experiences in childhood are alarmingly common,<sup>vii</sup> and they are strongly linked to a wide range of outcomes we associate with barriers to students learning – anxiety, memory problems, alcohol or drug use, delinquency, teen pregnancy.<sup>viii</sup>

***Role of mental illness.***

When students’ mental health concerns go unaddressed, performance in school suffers. Students with serious mental health concerns tend to have frequent absences and have trouble with their peers, and they are twice as likely as students without serious mental concerns to drop out of school.<sup>ix</sup> A 2011 survey found nearly 30% of Texas high school students reported feeling so sad or hopeless almost every day for 2 or more weeks in a row that they stopped doing some of their usual activities during the previous year.<sup>x</sup> Nearly 16% of Texas high school students seriously considered suicide, and 11% attempted to take their life one or more times in the previous 12 months. National estimates indicate one in five children have a mental disorder in any given year.<sup>xi</sup>

If they are properly identified and are able to access the right kind of support and interventions, many youth can manage their symptoms. Yet, less than 20% of children with a mental disorder receive treatment. Even when students receive treatment, their schools may not be equipped to help them be successful in school. A *School Based Behavioral Health Survey* conducted in 2009 by the Texas Mental Health Transformation Project<sup>xii</sup> found about 1 in 4 school health staff reported lacking the training or support they need to effectively address their students' behavioral health. General classroom teachers reported similar rates, and nearly 1 in 3 special education teachers felt they do not have the training, support, or supervision necessary to "handle students' behavioral health issues." More than half of Texas teachers and school health staff express an interest in training across a broad range of behavioral health topics.

**Without addressing the non-academic factors known to influence student success, including the presence of a trauma history or mental health concerns in students, schools can only move the needle of student performance so far.**

Texas should assist schools in incorporating practices and strategies that increase factors known to improve student learning, decrease factors known to interfere with learning, and mitigate the challenges associated with adversities many Texas students experience as they develop into young adults.

**Strategy: School-wide positive behavior supports**

When schools adopt a systematic framework of evidence-based strategies designed to help students behave appropriately, they have seen decreases in problem behavior, decreases in time spent by teachers and administrators in disciplining students, increases in academic performance, and positive changes in school safety and climate.<sup>xiii</sup> It has also been shown to improve students' concentration and emotional regulation while also reducing aggressive behavior. For these reasons it is a framework identified by both Department of Education and Texas Education Agency as a recommended model for schools.

**Strategy: Social and Emotional Skills**

Schools that include social and emotional learning components into their curriculum promote the mental health of both students and school staff, as they actively and intentionally teach students how to appropriately manage their emotions, relate to others in healthy ways, and overcome challenges and frustrations. Research has found that school-based social and emotional learning programs improve classroom behavior, reduce bullying and delinquent behavior, and foster stronger relationships between

students and their teachers.<sup>xiv</sup> Social and emotional learning has also been shown to positively influence academic performance. Students engaged in social and emotional learning attained higher grades and scored 11 percentile points higher on academic achievement tests than peers who did not engage in such learning.<sup>xv</sup>

### **Strategy: Educator Training**

The 83rd Texas Legislature passed legislation (SB 460) requiring current teachers and those seeking certification to receive basic information on recognizing “red flags” that may indicate potential mental health concerns in students and strategies on how they could appropriately respond to them. It also provided funding for educators seeking more in depth training to receive Mental Health First Aid training at no cost. These efforts will help schools to better recognize and prevent potential crises and save student lives. To help students with mental disorders be successful in the classroom, teachers need additional training, technical assistance, resources and strategies they can use to address students’ learning barriers and support their academic achievement.

Educators also need to be trauma informed. Other systems serving children, including child welfare, juvenile justice, and public mental health, have efforts in place to increase the skills and capacity of their workforce to better understand the prevalence and impact of trauma on children and youth and to know how to respond to it. The short and long term impacts of trauma on a child’s brain development have direct bearings on a student’s learning, behavior, and judgment. Texas educators should have access to training and technical assistance to help them mitigate the effects of traumatic stress on student achievement.

### **Strategy: School Counselors**

School counselors are often thought of as being on the frontline of school efforts to address students’ personal and social development and in influencing the school environment, but too few school counselors are available to Texas students or are being utilized in the capacity most parents and legislators imagine them being. Texas schools recognize school counseling as a key approach to identifying and addressing students’ mental health and substance abuse problems, but too often school counselors are assigned to tasks other than mental health and/or substance abuse counseling, especially in high school.<sup>xvi</sup> At a time when the need for behavioral health services is increasing, school counselors are frequently being pulled from counseling activities for use as test administrators<sup>xvii</sup> The average student-to-counselor ratio in Texas is 435:1,<sup>xviii</sup> well above the recommended ratios, which range from 250:1 to 350:1.<sup>xix</sup> The reality is students in need of mental health support may not have access to their school counselor.

### **Strategy: Coordinated Prevention and Early Intervention Programming**

Schools recognize the importance of non-academic factors on school achievement, and many have implemented programs and supports to prevent things like bullying, school dropout, delinquency, substance abuse, or suicide. While these programs may have different goals, they often address common risk and protective factors known to affect multiple outcomes. More often than not, these prevention efforts are uncoordinated and disjointed, creating a patchwork of siloed efforts by various disciplines using various approaches.<sup>xx</sup> Coordinating these efforts into a systematic approach can help schools eliminate gaps and reduce redundancies, build partnerships and teamwork, and enhance the effectiveness of prevention programs while reducing inefficiencies.

### **Recommendations**

**1. Develop and strengthen state infrastructure to promote and assist schools in implementing coordinated effective strategies that improve school climate, like school-wide positive behavior interventions and supports and including social emotional learning into existing curriculum.**

- With the support from the Hogg Foundation for Mental Health, Texans Care convened a group of national and state experts to develop a plan on how Texas can promote the use of a comprehensive, systematic framework in schools to teach appropriate skills and behaviors, prevent disruptive behaviors, identify students in need of additional services and supports to be successful learners, and connect them to those resources.<sup>xxi</sup> *School-wide Positive Behavioral Interventions and Supports: A Plan for Texas* and subsequent work done by stakeholders participating in the plan's development provide a roadmap for empowering Texas schools and supporting Texas students, including policy recommendations.<sup>xxii</sup>

**2. Provide educators with access to training, technical assistance and evidence-based resources on recognizing the impact of traumatic events on students and effectively educating students with a history of trauma or mental illness.**

- Build upon existing efforts, expertise, and infrastructures in the state and local communities, including:
  - i. The School Health Program within the Department of State Health Services, including Coordinated School Health activities at the state and district levels.<sup>xxiii</sup>
  - ii. Educator training resources related to recognizing and responding to students with mental health concerns being compiled by Texas Tech University Health Sciences Center, in partnership with TEA, in response to SB 460 (83<sup>rd</sup> Legislative Session).

- iii. Initiatives to train workforces within the Department of Family and Protective Services, Texas Juvenile Justice Department, and the Department of State Health Services on trauma informed care.

### **3. Limit the amount of time school counselors spend on non-counseling duties. Amend the student-to-counselor ratio to align with recommended standards.**

Thank you for your time and commitment to Texas children and families. If you have any questions, please feel free to contact me at 512.473.2274.

Respectfully,

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<sup>vii</sup> Flaherty, Thompson, Dubowitz, et al. 2013

<sup>viii</sup> Centers for Disease Control and Prevention. *Adverse Childhood Experiences (ACE) Study. Publications by Health Outcome*.  
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<sup>ix</sup> Wagner, M. (1995). "Outcomes for youths with Serious Emotional Disturbance in Secondary School and Early Adulthood." *Critical Issues for Children and Youths*. 5(2).

<sup>x</sup> Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance System (YRBSS). *Texas, High School Youth Risk Behavior Survey, 2011*

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