WHAT DO WE MEAN?

Behavioral Supports (also referred to as Counseling, Psychological, and Social Services) consists of school-based prevention and response services that address students’ social, emotional, and behavioral (SEB) health. Trained professionals such as school counselors, psychologists, and social workers provide individual and systems-level assessment and intervention to improve students’ mental health and well-being, and readiness to learn in the classroom. Behavioral support services include completing psychosocial assessments, providing individual and group counseling, and initiating crisis prevention and response. Another important role includes consultation with other school personnel, families, and community mental health providers to address student SEB needs.

Behavioral support services responding to individual student needs form a primary focus in this domain. Individualized services often begin with school mental health professionals completing psychoeducational and psychosocial assessments to inform intervention direction. Using results, school personnel then can collaborate to develop behavior support plans and interventions to address academic and SEB problems that may be barriers to student learning. For students in need of more intensive support that extends beyond the school’s resources, school mental health professionals can also consult with and refer students to community providers.

In addition to the services that address individual student needs, behavioral support services also include systems-level work that addresses the entire student body and/or school personnel. For example, school-based mental health providers can implement systems-level needs assessments as part of early identification and prevention efforts, as well as collaborate with other personnel in monitoring multiple data sources related to student health and well-being. Using data-based decision making, school mental health professionals can assist in planning and implementation of school-wide interventions. Systems-level interventions can include multi-tiered systems of support (MTSS), positive behavioral supports, and positive school climate initiatives, as well as preventative/prevention interventions that promote student health.
WHY IS IT RELEVANT TO CHILD OUTCOMES?

Prevalence of social, emotional, and behavioral risk in school-aged youth

Approximately 1 in 5 children in the United States experience symptoms of social, emotional, and/or behavioral (SEB) disorders or difficulties. Among adolescents, nearly 50 percent have experienced symptoms of a mental health disorder. Symptoms associated with mental health disorders can significantly impair a student’s development, functioning, and, in more severe situations, can lead to suicidal or self-harming behaviors. Despite the high prevalence and consequences of mental health problems, prior research has documented that as many as 65 to 80 percent of children and adolescents identified as having a mental health concern do not receive treatment.

Benefits of providing behavioral support services in the school environment

Students and families often face barriers to accessing community mental health services, such as time, cost, and transportation—in addition to the barriers related to the stigma attached to accessing care. Schools, however, are unique in their accessibility and centrality in students’ lives, and many of the barriers to accessing treatment are removed when supports are provided at school, therefore making schools an ideal setting for supporting the SEB needs of students. School-based behavioral support services can help students attain a variety of skills, including coping strategies and social skills, as well as decrease problematic behaviors, including externalizing symptoms (such as aggression and disruptive behavior) and overall behavioral symptomatology.

Connection between SEB disorders/difficulties/problems and long-term outcomes

Addressing student SEB needs is imperative given the links between mental health difficulties, academic achievement, and long-term health outcomes. In the classroom, symptoms may be portrayed as disruptive, inattentive, or antisocial behavior, which are predictive of poor academic performance. Symptoms of depression or anxiety, in particular, have been associated with academic impairments, including difficulties with attention, memory, and organizational skills, as well as increased absenteeism, grade retention, and school dropout compared to their peers. Targeted interventions can significantly improve a student’s symptoms, behavior, and both short and long-term academic achievement. Without intervention, however, students may face ongoing challenges that can impact their SEB health, academic achievement, and overall well-being throughout the life course.
The strategies provided here summarize a review of available evidence and best practice recommendations in this domain.* Strategies are grouped by anticipated resource demand for implementation (e.g., funding, time, physical space, training, materials).

### Level 1 Strategies: Low resource demand

**Establish data sources to identify student risk**
- School-based universal screenings of all students (i.e., "casting a wide net") can be used to identify students at-risk for developing academic or SEB challenges, these students can then receive targeted, evidence-based interventions in an effort to prevent negative outcomes.\(^{14,37}\)
- Schools can administer brief screenings to assess academic and social emotional risk\(^{14}\) using information from parent and/or teacher ratings, grades, or daily behavior reports.\(^{29}\) Organizations such as the National Center on Intensive Intervention provide a review of available academic and behavioral screening tools on their website.

**Evaluate current behavioral support practices**
- Schools can assess current school-wide behavioral support practices used at the whole school, small group, and individual levels to ensure that evidence-based practices are implemented with fidelity.\(^{23}\)
- Examples of evaluation tools include the Tiered Fidelity Inventory,\(^1\) the School-Wide Evaluation Tool,\(^{39}\) and Benchmarks of Quality.\(^{21}\)

### Level 2 Strategies: Moderate resource demand

**Increase universal school-based mental health promotion**
- Universal school-based mental health promotion can address a variety of risk factors including anxiety,\(^{12}\) depression,\(^{12}\) suicidal ideation,\(^{31}\) violence,\(^{30}\) and aggression,\(^{30}\) while also enhancing student personal development through lessons and curriculum.\(^{28}\)
- Schools can increase mental health promotion by implementing school-wide interventions (e.g., social and emotional learning programs, positive behavioral support programs) that target all students as a primary prevention measure.\(^{12}\)

**Implement targeted behavioral interventions**
- Targeted behavioral interventions provide secondary prevention and support services for students at-risk for developing SEB concerns in a specific domain (e.g., disruptive behavior, noncompliance, off-task behavior).\(^{7,15}\)
- School mental health personnel can collaborate with teachers and school administrators to provide behavioral interventions (e.g., self-monitoring skill development, group contingency, social skills instruction, check in/check out) that help to address student SEB needs.\(^{22}\)
- Self-monitoring skills, which involve students being able to observe and record their own behavior, can be taught to improve core school-based behavioral competencies (e.g., academic engagement, disruptive behavior, peer relations).\(^{5,6,8,10}\)

### Level 3 Strategies: High resource demand

**Provide cognitive-behavioral therapy (CBT) based interventions**
- CBT is an effective intervention that can be used in schools for addressing student responses to trauma,\(^9\) anxiety,\(^4\) depression,\(^{38}\) and anger management.\(^{40}\)
- School mental health professionals can utilize CBT-based approaches (addressing how students interpret their experiences, help students recognize the relationship between their thoughts, emotions, and behaviors)\(^{11}\) to respond to student behavioral needs.

**Utilize function-based interventions**
- A functional behavioral assessment (FBA), completed by a trained behavioral support professional, uses multiple methods (e.g., teacher interview, review of permanent products, direct observation) to identify aspects of the environment that relate to the occurrence of student problem behaviors; previous research suggests that FBA-based interventions are associated with greater reductions in problem behavior than non-FBA-based interventions.\(^{18}\)
- Schools can use FBA data to inform strategies and interventions that can effectively reduce a student’s problem behavior.\(^{18}\)

*For more information about the systematic review process we used to identify evidence-based practices, please refer to our overview brief which can be found [here](http://example.com).*
ADDITIONAL RESOURCES

**Adolescent and School Health**
Centers for Disease Control and Prevention
https://www.cdc.gov/healthyyouth/index.htm
The CDC website has many resources, tools, fact sheets, and information about programs that support student health.

**Behavioral Health Awareness for Children and Families**
Cigna
https://www.cigna.com/individuals-families/health-wellness/topic-family-behavioral-awareness
This source includes 2017 presentations and handouts regarding adolescent behavioral health and wellness.

**Evidence-Based Practices Resource Center**
Substance Abuse and Mental Health Services Administration
https://www.samhsa.gov/ebp-resource-center
This website provides a review of interventions supported by available literature for the treatment of substance use and mental health disorders. Resources can be sorted by topic area, population, and target audiences.

**Mental Health Screening and Assessment Tools for Children**
North Carolina Training Academy
https://humanservices.ucdavis.edu/sites/default/files/104056-MentalHealthLR.pdf
A 2008 review of measures used to screen and assess mental health and social-emotional functioning in children of all ages, while also focusing on child welfare.

**Publications and Resources on School and Campus Health**
Substance Abuse and Mental Health Services Administration
https://www.samhsa.gov/school-campus-health
Many resources from 2017 related to school and campus health, including evidence-based and best practices

**Resources for Mental Health**
National Education Association
http://healthyfutures.nea.org
This resource includes infographics and guides that focus on different experiences or issues that may impact a child's mental health and well-being.

**RTI Webpage**
Center on Response to Intervention at American Institutes for Research
https://rti4success.org
The website explains the essential components of RTI in order to assist states and districts in implementation and early identification

**Self-Monitoring**
Vanderbilt University & Tennessee Department of Education
https://vkc.mc.vanderbilt.edu/assets/files/psiSelfmonitoring.pdf
This guide from 2013 includes ways to help implement self-monitoring interventions at school.

**Social, Emotional, and Mental Health Best Practices**
Colorado Education Initiative
A resource tool from 2014 that explains a comprehensive approach to school social, emotional, and mental health, which includes systemic improvements to climate, culture, and behavioral health supports at school.

**Who Are School Psychologists**
National Association of School Psychologists
https://www.nasponline.org/about-school-psychology/who-are-school-psychologists
This site explains the role of school psychologists and the unique skills and work they provide directly and indirectly to students, staff, and families in schools.


21Kincaid, D., Childs, K., & George, H. (2010). Schoolwide benchmarks of quality (Revised). (Unpublished instrument) University of South Florida, Tampa, FL


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