
behavioral
health

GHPC's Center of Excellence for Children's Behavioral Health partners with the Georgia Department of Behavioral Health and Developmental Disabilities to expand school-based mental health services.

"Ryan" needed help.† He was having a difficult time staying focused, staying in his seat, and keeping his hands to himself each day at school. He was 5 years old when he entered the Georgia Apex Program with a diagnosis of attention deficit disorder. Through the program, he was able to receive medication, individual therapy, and community support services. Two years later, he is excited to be at school, he has shown improvement with his behavior, and he is taking the test to enter the gifted program.

Nearly one in five U.S. school-age children has a treatable mental health disorder, yet half are not receiving treatment.*

Recognizing that schools are a natural environment to identify youth and address unmet mental health needs, the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) is expanding school-based mental health services. The Georgia Apex Program provides funding to community mental health providers to partner with schools and provide school-based mental health services for referred students, in addition to professional development for school staff and opportunities for mental health promotion and awareness.

"When a child is struggling, parents often feel desperate, unsure of how to move forward or where to seek help," says Susan McLaren, assistant project director at GHPC and lead evaluator of the program. "The Georgia Apex Program offers children the chance to succeed in school and, ultimately, in life."

Now in its fifth year, the Georgia Apex Program still pursues three basic goals:

- Detection — Provide early detection of child and adolescent behavioral health needs.
- Access — Improve access to mental health services for children and youth.
- Coordination — Promote increased coordination between Georgia's community mental health providers and local schools and school districts in their service areas.

Ongoing evaluations, conducted by GHPC's Center of Excellence for Children's Behavioral Health, show the program is succeeding.

"Increased access is the greatest impact that I have seen. By receiving needed mental health services and supports in schools, we are helping students to sustain wellness and remain in school," says Danté McKay, director of the Office of Children, Young Adults & Families at DBHDD. "Prior to Apex, if a child needed to see a therapist, he or she would have to miss part or all of the school day, and a parent or guardian would have to be available to take the child to the appointment — if they could get an appointment. In addition to the parent having to take time off from work, some families do not have reliable access to transportation. In rural Georgia, those barriers are further exacerbated because schools are farther apart and there are fewer transportation resources."

The Center of Excellence also assists new providers and schools in implementing the program by helping with relationship development, community engagement, formalizing agreements (memorandum of understanding and data-sharing), and a needs assessment. For experienced providers, the center's technical assistance supports continuous quality improvement and program sustainability.

How Does the Apex Program Work?

Most referrals come from school counselors. For the 2018-19 school year, top referral reasons included behavior outside the classroom (74%), classroom conduct (65%), and symptoms of depression (52%).

Once a student is referred, the provider can conduct an assessment or provide treatment based on an existing diagnosis. They can then tailor services to meet that child's needs, including individual outpatient services, community supports and individual services, group or family outpatient therapy, and crisis intervention.

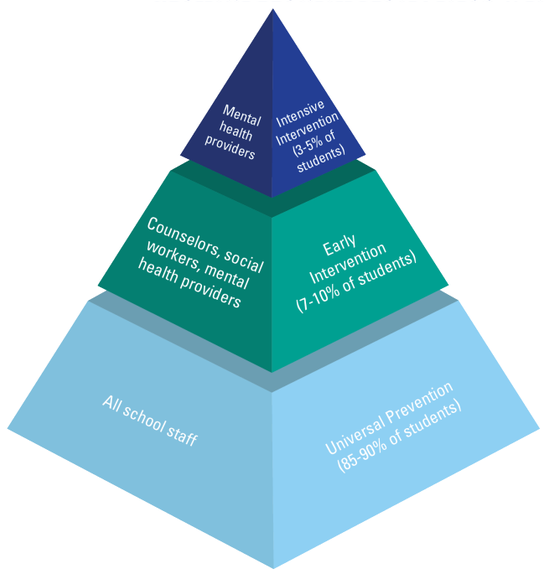
The most common diagnoses during the 2018-19 school year included disruptive impulsive control and conduct disorders (38%), depressive disorders (30%), and trauma and stress-related disorders (9%).

Depending on the arrangements within each school, providers can deliver services during school hours (48%), after school (26%), or during school breaks (26%).

Schools report seeing positive results from participation in the Georgia Apex Program, including decreased reports

†*The student's real name is not being used to protect his identity.*

Mental Health Activities with Apex Schools, 2018-2019



Adapted from: Bieber B, Hotchkiss & Palmer, B. (2007). *A Guide to School Mental Health Services*. Denver, CO: Colorado Department of Education.

In the 2018-19 school year:

- 31 Apex behavioral health provider agencies partnered with schools
- 436 schools across Georgia engaged in the Apex Program (78% rural; 46% elementary)
- 5,419 students received first-time services
- 89,642 services were provided in schools
- 319,003 students had access to school-based mental health services

of bullying, out-of-school suspensions, and unexcused absences, as well as increases in perceptions of a positive school climate.

"The wonderful part of the Apex Program is that it has decreased the stigma of behavioral health," says Marnie Braswell, who leads the Child and Adolescent Program at the Community Service Board of Middle Georgia, the largest Apex provider agency in the state, with 17 therapists serving 60 different schools in 16 counties. "Families have shied away because of judgment from schools and communities. But the integration in the school gives parents less of a reason to shy away from getting their child help."

Despite the noticeable improvements, Steve Smith, superintendent of the Bleckley County School District, says the need remains great.

"The nearest town with access to care is 30 miles away, so there is just very limited access in Bleckley County," says Smith. "We are seeing a growing number of students who, at younger and younger ages, are exposed to just some horrific issues at home. There is anger involved, especially if there is an incarceration involving one of the parents. Apex has provided the means to allow these kids to get some additional help that they sorely need.

"We are leaps and bounds ahead of where we were a few years ago. Our teachers and our administrators see a ray of hope, but we still have children not being served adequately, just because of funding limitations. Whatever services they are providing, we could have double the number of therapists and still have them all have a full caseload."

In the state's 2019 amended budget, DBHDD received an $8.4 million one-time appropriation to expand the program to more schools.

"There is a great confluence of interest at all levels — Gov. Brian Kemp, the Georgia General Assembly, schools, state agencies — and it has helped with provider and community responsiveness, awareness of the program, and interest in collaborative efforts to grow the program," McKay says. "I believe the majority of stakeholders are aligned and on the same page, recognizing the importance of school-based mental health."

* Whitney, D.G. & Peterson, M.D. (2019). U.S. national and state-level prevalence of mental health disorders and disparities of mental health care use in children. *JAMA Pediatrics*, 173(4): 389-91.