

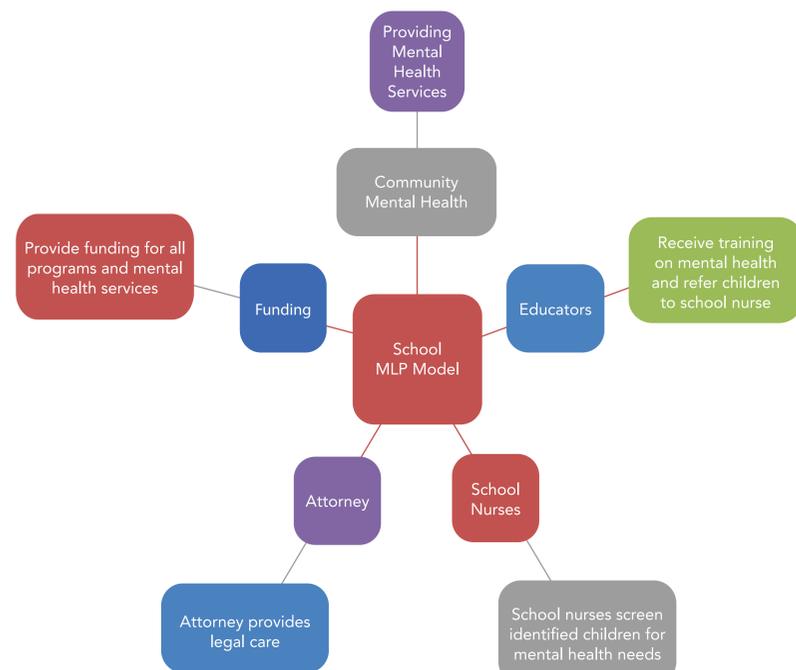
Improving Mental Health for Children by Incorporating MLPs in Schools

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Overview:

This proposed School Medical-Legal Partnership (MLP) model will provide early intervention mental health services by training educators to screen for social determinants of health in their students. Adding educators to the MLP model and placing this School MLP model in high-poverty urban areas will create a necessary layer of protection for vulnerable children negatively affected by poverty. As proposed, educators trained in mental health needs will identify students for screening to the school nurse, who will function as the medical component of the MLP. An attorney will serve as the legal component of this School MLP model, and will be responsible for securing the delivery of school-based mental health services for eligible students in need of early intervention, as well as other necessary legal care. Once the students are identified within this School MLP model, the MLP staff will provide appropriate mental health services to these students and connect with their families, offering both medical and legal care. Essentially, this School MLP model will be the point of entry for children and families to obtain a range of services and improve the social determinants of health for the entire family.

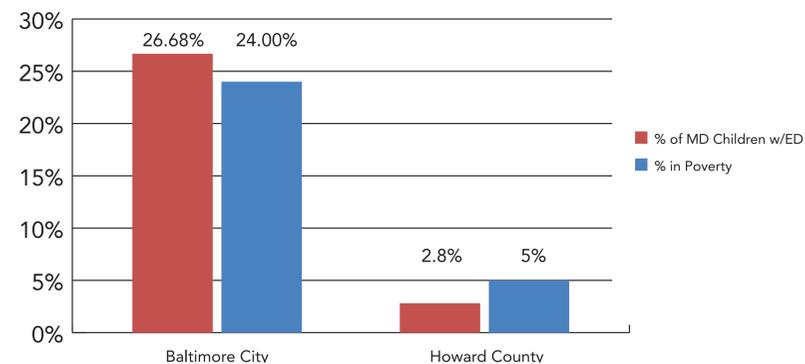
School MLP Model



Discussion:

In Maryland, Baltimore City had the highest poverty rate across all 24 jurisdictions, with 24% of its population living in poverty according to the 2012 Maryland Budget and Tax Policy Institute. The 2012 Maryland State Department of Education (MSDE) census data for students who qualify for special education and related services under the Individuals with Disabilities Education Act indicated that Baltimore City Public Schools had the highest number of students with an emotional disability throughout the entire state. According to MSDE, the total number of students identified with an emotional disability for Maryland is 6,792 students. Of these, 1,812 reside in Baltimore City, comprising 26.68% of the students with this federal eligibility code. In contrast, Howard County, a more affluent county in Maryland, reports that only 5% of its population lives in poverty as reported by the 2012 Maryland Budget and Tax Policy Institute. The 2012 MSDE census data indicated that only 190 students in Howard County had an emotional disability, which is only 2.8% of the students with this federal eligibility code. These data illustrate that many students living in poverty have an emotional disability and qualify for special education and related services; however, there is probably a far greater number of students who do not qualify for special education and related services under IDEA, but could benefit from early intervention mental health services.

Percent of Maryland Students with Emotional Disability and County Poverty Levels in Maryland



Conclusions:

There is a growing body of research on early childhood trauma and its effects. Early childhood trauma may be the result of losing a parent, exposure to violence or crime, homelessness, threats of harm, neglect, or abuse. Young children may not be able to communicate the impact of the trauma, or may be unwilling to share due to a lack of trust. While it is critically important that children receive timely mental health services, it is difficult for educators to access those services without the proper assessment and screening tools, or the data to demonstrate an educational impact so the student may qualify for special education and related services. Strategically implementing a School MLP model in high-poverty urban areas would be a critical step in getting educators and school nurses the assessments, screening tools, and training they require, while the attorney can advocate for necessary early intervention mental health services.

Clinical Support for the School MLP model

Dr. Dan Hoover, senior psychologist at Kennedy Krieger's Family Center in Baltimore, stated "Employing the advocacy component of the MLP directly in the school would allow more children to receive much needed clinical services. Currently, most children receive outpatient clinical services in the community, but providing services directly in the school would reach far more vulnerable children."

Tina Fain, senior clinical social worker at Kennedy Krieger's Psychiatry Social Work Outpatient Program, commented "Legal advocates and mental health clinicians working together in the schools will not only help the child, but the entire family who may need mental health services."

References:

Maryland Budget & Tax Policy Institute: The State of Working Maryland 2012, marylandpolicy.org/dnn/Portals/mbtpi/SOWMD2012/stateofworkingmaryland2012.pdf

Maryland State Department of Education: Maryland Special Education/Early Intervention Services Census Data & Related Tables, October 26, 2012, msde.maryland.gov/MSDE/divisions/planningresultstest/doc/20122013Student/sped12_rev.pdf

The National Child Traumatic Stress Network: nctsn.org

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