



School Services Report September 2023—June 2024

Current Status

All seven school districts in Whatcom County provided behavioral health services during the 2023/2024 school year using local Behavioral Health Funds. These contracts made it possible to deliver needed services in all areas of the county, especially in areas where little or no services previously existed. In fact, **68%** of services (1,104 out of 1,608) were provided outside of Bellingham, helping to improve access to services throughout the county.

Compassionate Communities

Services delivered through these contracts support the resolution passed by the Whatcom County Health Board in October, 2013 to “ensure that ‘compassionate approaches’ are built into all public health related services and contracts including human services programs.”

Results

Services delivered through the Behavioral Health Fund are designed to impact substance use and mental health. Reducing risk in these areas also impacts other ‘life-indicators,’ such as improving school performance and social functioning.

Figures in this report reflect services that were provided to individuals, small groups, families, and the larger community. These services demonstrate:

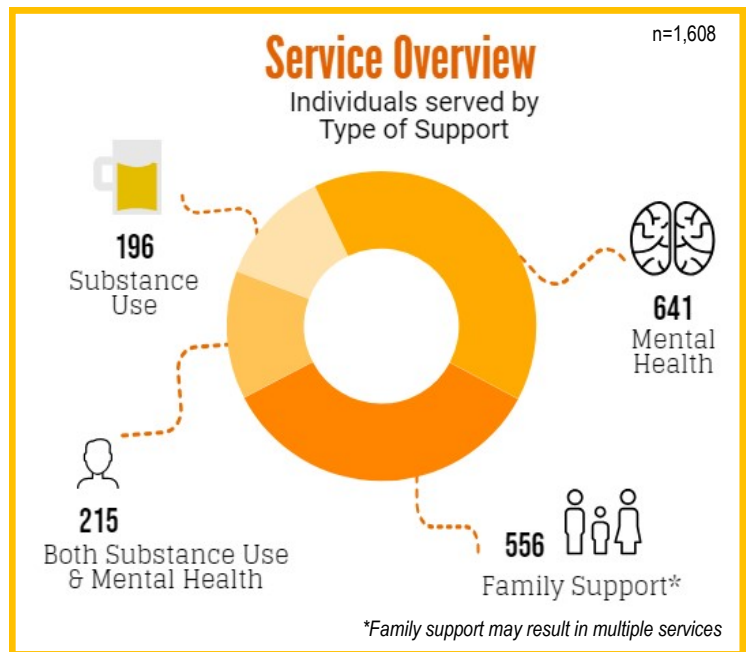
- **Cost Savings to the community**
- **Improved behavioral health outcomes**
- **Leveraged resources**

Cost-benefit estimates show that effective school-based programs can save \$18 for every \$1 spent on these programs. See page 6 for more information on prevention science that drives these services.

Family Engagement Matters

Schools have been actively working to engage families in supporting students. Research shows that when families are engaged in services and providing critical support, young people positively benefit. Parent involvement is also a key component of the Multi-Tiered System of support (learn more on page 5).

Last year, **840 families** were involved in supporting youth through school and/or community-based services. Although not every caregiver or family has



Service Reach & Intensity

- **7,363 Community members** reached through community events and training
- **1,608 Cases** were supported through individual or group services reaching:
 - **1,460 Youth** recipients in services
 - **454 Parent** recipients in services
- **10,273 total professional contacts** were provided to youth and families during the year
- An average of **6 contacts** were made for each youth/family during the year

the capacity or willingness to participate in services, schools conduct this outreach as part of regular business and often have great success. Through this work, additional needs of families can emerge where direct support is offered to parents.

Number of Families Engaged

Community services	87
School services	242
Both Community and School services	511



Success At School

Interventions can take time to produce positive behavior change, but many youth have already experienced benefits at school. School records and staff reports show progress made among students who received services during the school year.

WHY DO THESE SERVICES MATTER?

In a class of 30 students in grade 10 in Whatcom County:

- 19** are dealing with anxiety
- 9** are dealing with depression
- 5** have contemplated suicide
- 5** have made a suicide plan
- 2** have attempted suicide

Source: Healthy Youth Survey 2023

IMPROVEMENTS

Many students showed positive improvements in grades, attendance, and discipline.

Improved Academics

184 youth



Improved Discipline

203 youth

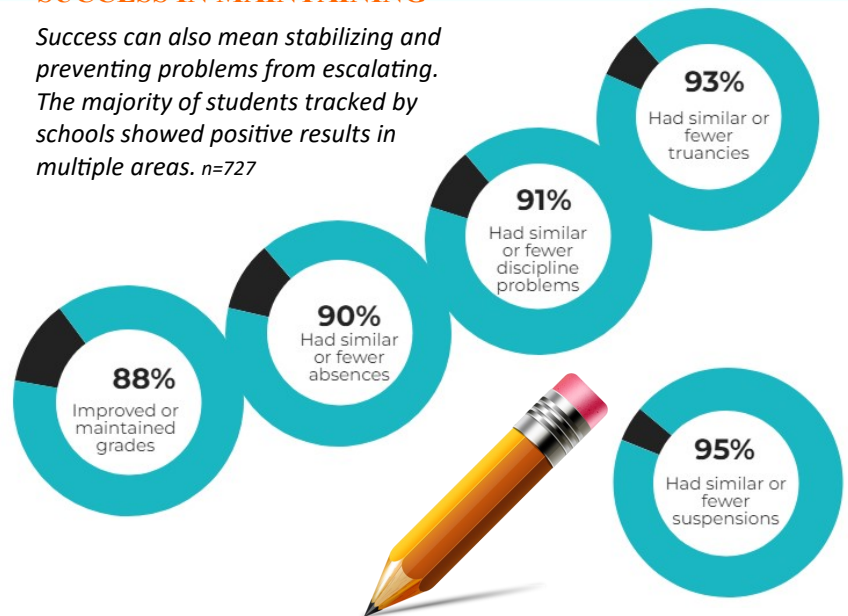
Improved Attendance

235 youth



SUCCESS IN MAINTAINING

Success can also mean stabilizing and preventing problems from escalating. The majority of students tracked by schools showed positive results in multiple areas. *n=727*



Mental Health Services Helping at Home and School

There are many success stories that I could speak to, but one in specific comes to mind. One student at our elementary school began with me reporting major depressive symptoms, self-harm reports and suicidal ideation thoughts. She would frequently become emotional and report feeling lonely.

Throughout the year, she began opening up and advocating for herself at school as well as at home. Recently, she was able to communicate with her parents, which ended with a doctors appointment and new medication for ADHD.

In the last month of our time together, I began to see a completely different student. She began reporting more happiness (home and school), better focus and better ability to regulate emotions. She began sharing more upbeat and positive music, compared to the depressive and sad music she would share prior.

By the end of the school year, when I would arrive to her class for our session, she would be smiling, would report having a "good" week/day as well as feeling seen/heard at home.

-Nooksack

Frequency of Services

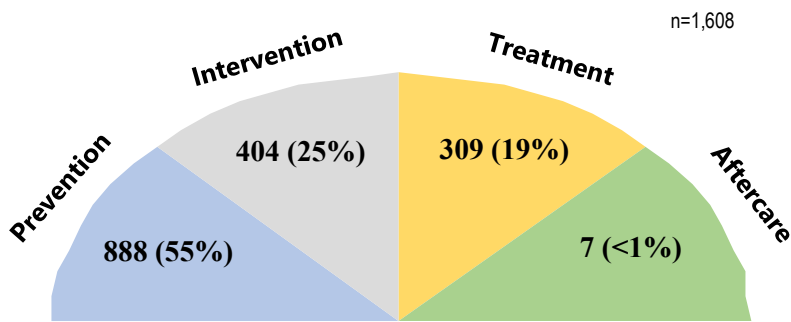
Services are tailored to meet individual needs. While some youth may require just one or a few contacts to meet their needs, some may require more intensive services. **Nearly one in four youth** served had more than 10 contacts with school or community professionals. Some youth needed as many as 65 contacts during the year.

Provider Contacts	Individuals Served	% of served
1-10	1244	77%
11-19	208	13%
20+	156	10%

n=1,608



Individuals Served by Primary Area of Service



NEED FOR BEHAVIORAL HEALTH TREATMENT

Schools deliver services based on the Prevention, Intervention, Treatment, and Aftercare (PITA) Continuum of Care. Some youth are involved in preventive efforts, some may only need time-limited interventions, but others may need more intensive services, such as substance use disorder or mental health treatment services.

REFERRALS TO TREATMENT

546 Mental Health

27 Substance Use Disorder

17 Both (MH & SUD)

CONNECTED TO TREATMENT

420 Mental Health

18 Substance Use Disorder

14 Both (MH & SUD)

Engagement in treatment may be unknown due to confidentiality

FROM THE



Parents shared their thoughts about the impact of services on their children

"I wanted to say a special thank you for your work with my child this year. You have done such a great job making him feel seen and listened to. And because of your respectful, caring approach with these kids, they feel respected and they trust and value what you are teaching them. I have heard this from others in his friend group. Thanks so much for helping them navigate through middle school. You are making an impact. Thanks!

"Thank you for creating a positive environment for all of them and especially my son. Things have improved significantly, at home and in school the past two months, and I do believe you have had a strong influence in that. What you do matters and helps our kids find a better path. Thank you again!

Housing Needs Efforts In Nooksack

In collecting data for this school year, we had 104 homeless students (this is unusually high for our district). Of these 104 students, 35 of them and their families were able to secure permanent, stable housing. That's 33%! I consider this a positive outcome and hope to increase this number through collaboration, partnership, and responsiveness. I appreciate how attentive each school is to their students and how quickly they are to advocate for their needs if they suspect a concern. Collaborating with families as partners has also been key in building relationship and trust. As families become stably housed, school outcomes improve. Attendance improves. Our goal is to ensure that all families have their basic needs met but also are happy, healthy, and well.

We have been working with a family of 3 (1 parent, 2 students) who have been living in a homeless shelter for 8 months. The family is connected to their community, culture, and has remained hopeful during these last 8 months. The parent has worked with us to ensure her mental health needs are being met so that she can be a present parent to her children. They got into permanent housing the week before Christmas! Mom called me and told me we were the first ones she wanted to tell. The district has been a stable support for this family by helping connect them with basic needs, meeting in-person (this is very important to mom), listening, advocating, utilizing a strengths-based approach.

Mental Health Supports in Mt. Baker

Throughout this school year I was successful in providing and creating an environment of safety, acceptance, inclusion and stability for several at risk students. At the High School I successfully connected suicidal students with the appropriate crisis response services and helped create a plan with students and their caregivers to ensure the safety of the student as well as successfully created a plan for ongoing mental health support. Students have referred their fellow students to me when they have cause for concern and they see me as a valuable resource on their campus. This is also true of the Junior High and High School students and staff. I have become a safe, trusted adult that students seek out.

Impacting Substance Use

Stories From the Districts

Addressing Fentanyl

A follow-up success story from last Spring is that two students I was working with who were overcoming their addiction to fentanyl are both doing great, and one has over 6 months clean! It was a tough Fall full of triggers, suicidal ideation, and a few close calls to relapse. The students were proactive about reaching out for support and both have made amazing progress. We were even able to help connect one of the students to Compass and they are engaging in mental health therapy.

Finding Treatment

We have a student who started at the suboxone clinic in July of 2023. This student is celebrating one year clean this July! We celebrated 300 days together. This student is fighting hard to continue to choose sobriety while being 16 and in school full time.

Long-Term Benefits

Recently I received a call from the parent of a student who I worked with for 3 years. Parent called me to thank me for the support received. Student graduated last year and is now enrolled in the Army. I started working with the student when he was a 10th grader, he was dealing with severe depression, suicidal ideations, and substance use. Parents and teachers were very concerned about his safety. I worked closely with the family to get him connected with a mental health therapist and the student and I met weekly. Student was able to get treatment and the support needed on time and he is now fulfilling his goals.

Goal Setting

As goal setting is introduced in intervention meetings, students are choosing to set goals to decrease and end substance use. Several students have chosen to discontinue use of substances included tobacco, marijuana, and alcohol. Additionally, when meeting with students with attendance concerns, students are willing to talk through the barriers that are causing missed days. Students are goal setting around attendance, committing to goals to be at school, and consistently meeting their goals.

Note: These stories represent a small portion of those submitted, and district names and identifiable items were removed to protect individual identities.

Impacting Mental Health

Stories From the Districts

Increasing Access

Another highlight from this year was the number of students we were able to refer to school-based counseling and MH support in our community. I had two students in particular who were hesitant to meet with a therapist, and have now been meeting for a few months, and will continue to receive much needed support over the summer. We still have work to do to reduce barriers to mental health services and the stigma associated with receiving support, but I believe having access in schools is helping immensely.

Preventing Suicide

There was a day where a student told the administration his friend had intent to die by suicide when he got home. The student is a 7th grader, and I was able to respond immediately and go through the protocol with him, as well as be there for him during this dark time. We worked together throughout the school year (as his parents did not want to get him into therapy outside of the school) and he now has no suicidal ideation, has a wonderful social circle, can use his coping skills effectively, can share his emotions (which he previously struggled with) and overall has a bright and spunky view on life and self.

Improving Grades & Attendance

I continue to see attendance and grades improve for numerous students engaged with in-school mental health supports at both the high and middle schools. For instance, one student who will be a senior in 24-25 had struggled significantly with attendance in 9th grade and fell well behind in credits to start high school. This student has continued to engage in school based mental health supports and was able to retrieve missed credits via a Credit Retrieval class this year (11th grade), and is now on track to graduate with plans to continue with community college courses after graduation.

Social Supports

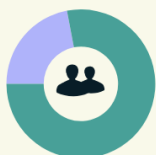
Individuals were connected to other essential social supports (housing, tutoring, basic needs, etc.) in addition to mental health and substance use services.

860 individuals were referred to additional school or community support services during the year

693 individuals were connected with additional supports

1,412 total referrals were made for other school or community support services

1,096 referrals resulted in a connection to other school or community support services

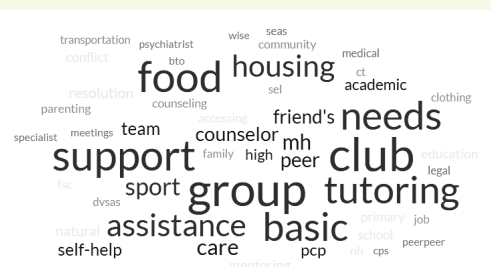


78% Of referrals resulted in connection to other social supports

Profile of Supports

The need for additional social supports showed up in a variety of ways. Some of the most common needed supports included:

- Mentoring
- Peer support
- Care Team
- Tutoring
- Basic needs
- Housing
- School Counselors
- Food Assistance



Mental Health Expansion

Whatcom County Council approved new service contracts with all seven school districts in September/October of 2023 to expand mental health services. The efforts listed below represent services offered through a partial school year, with some districts beginning services in January of 2024. Significant service was still delivered in Year 1 of these 3-year contracts. While these efforts have increased the number of youth directly receiving services, it has also expanded the capacity of districts to build up systems of care for students and families.

EXPAND



Direct Services

- **773 individuals** served
 - ◆ 595 reached through district staff
 - 4,644 total service sessions provided
 - quantity of sessions ranged from 1-80
 - ◆ 178 reached through Educational Service District
 - over 3k service sessions
- **353 referrals** were made for other social supports
- **241 connections** were made for other social supports
- **11,551 community members** were reached through community events and training

Capacity Building

- **7** new programs/services created
- **13** new partnerships among school partners
- **14** new partnerships with community partners
- **7** new positions created
- **10** Staff positions expanded
- **8** MOU's/agreements developed for services
- **\$325,000** in leveraged resource
- Increased capacity to use data to identify needs and target interventions
- Increased capacity to mentor and supervise new clinicians, counselors, and staff

Multi-Tiered System of Supports (MTSS)

Many schools use a framework of interventions and supports designed to address behavioral and academic challenges. This framework, known as MTSS, helps schools to identify struggling students early so that they may receive assistance quickly. The key components of MTSS include:

- Universal screening of all students early in the school year
- Tiers of interventions that can be amplified in response to levels of need
- Ongoing data collection and continual assessment
- Schoolwide approach to expectations and supports
- Parent involvement

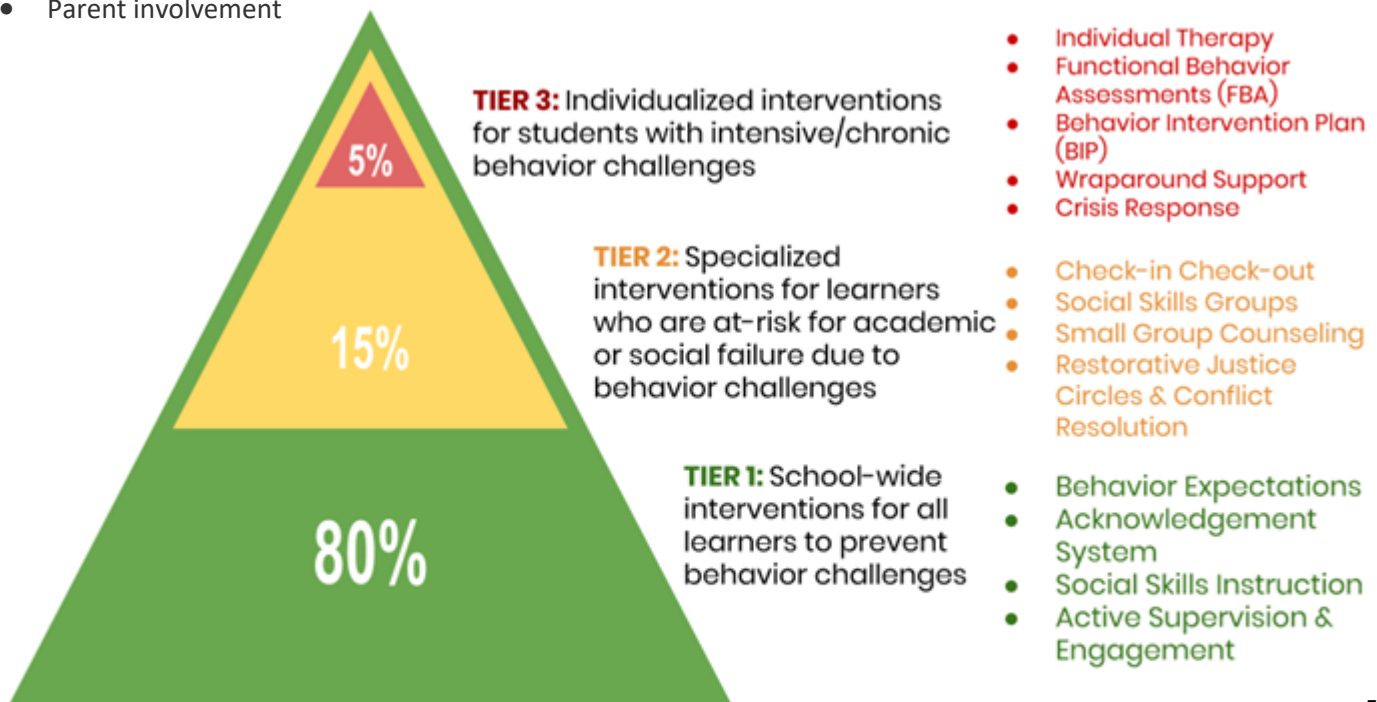


Image Source: Hastings Area School System



Services Created from the Science!

Prevention services rely on a large body of research spanning decades. By implementing evidence-based services that are designed to reduce risk, communities experience positive behavioral health impacts **and** economic benefits.

Age Matters

Prevention can be beneficial to people of all ages, but services can make the biggest impact when serving younger individuals. Reducing risks and building key protective factors in the early years creates life-long positive benefits.

According to the World Health Organization, **half of all mental health conditions start by 14 years of age.** Substance use initiated in the early years also contributes to much higher rates of substance use disorders as an adult. In fact, **a two year delay in the initiation of alcohol use can reduce problems as an adult by 50%.**

The data is also very clear that early childhood traumas, known as Adverse Childhood Experiences (ACE's), play a significant role in adult substance use and poor mental health, as well as a variety of physical health problems.

Investments Matter

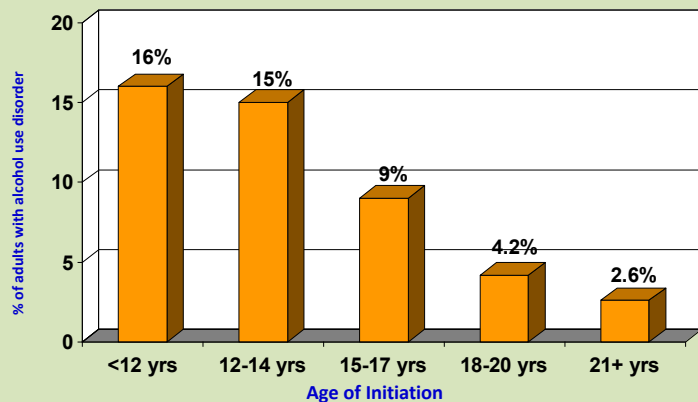
According to the Substance Abuse & Mental Health Service Administration, cost-benefit estimates show that **effective school-based programs could save \$18 for every \$1 spent on these programs.** The Washington State Institute on Public Policy (WSIPP) has also calculated individual program cost-benefit ratios, many services of which are reflected in Whatcom County. Early services help to mitigate costlier interventions down the road.

Science Matters

Not all programs, strategies, and interventions are created equally. Hundreds of Evidence-based Best Practices (EBP's) have gone through rigorous evaluation to demonstrate and replicate effectiveness. Programs are available for a range of populations, settings, and levels of risk, but implementation of EBP's must be done with fidelity.

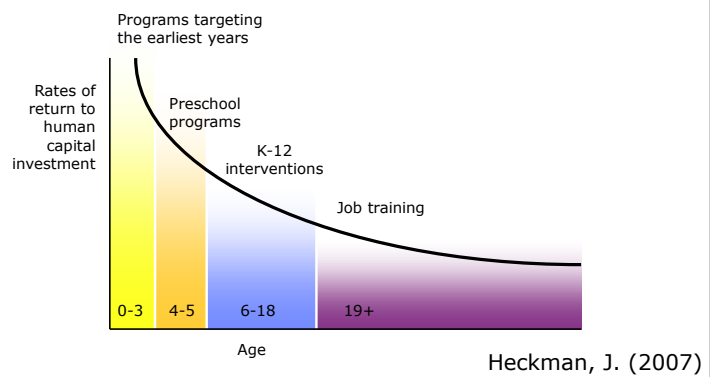
While effective prevention services do reduce substance use and improve mental wellness, they often simultaneously reduce risk for delinquency, teenage pregnancy, school drop out, violence, and other problem areas.

Percentage of Past Year Alcohol Use Disorder* Among Adults Aged 21 or Older by Age of First Use



*Abuse or Dependence (Source: SAHMSA, 2005)

Preventive Intervention is More Efficient and Produces Higher Returns than Later Remediation



WHATCOM COUNTY
**HEALTH AND
COMMUNITY
SERVICES**

