Children and youth are experiencing soaring rates of anxiety, depression, trauma, loneliness, and suicidality in the wake of COVID-19. During the pandemic, social and emotional challenges have increased dramatically in what the US surgeon general has described a “youth mental health crisis” and the American Academy of Pediatrics is calling an “national state of emergency.” Emergency rooms are seeing a significant uptick in the proportion of visits for mental health reasons in young people. Visits for suicide attempts for adolescent boys have risen by 4 percent for adolescent boys since 2019, and a terrifying 51 percent for adolescent girls.

While it is a national crisis, 2022 key findings from Mental Health America’s The State of Mental Health in America report show that Texas children, relative to the youth in most other states, are especially anxious, depressed, traumatized and lonely. Moreover, they are also much less likely to be receiving treatment. According to the report, 363,000 children — or 6 percent of Texas students — suffer major depression. More than 70 percent receive no treatment.

The Hopeful Futures Campaign, a coalition of national organizations, has joined together to ensure that children have access to comprehensive mental health care in schools. The campaign recently published school mental health report cards based on current MHA data as well as an overview of eight policy areas the coalition feels most impact student mental health in schools. Texas ranks 41.

In a recent speech, U.S. Secretary of Education Miguel Cardona called on states to act. “Our schools must offer increased access to mental health supports for students, wrap-around programs, meaningful and authentic parent and family engagement, and interventions for those students who felt the impact of the pandemic more bluntly than others,” he said.

Of the eight policy areas that the Hopeful Futures Campaign believes must be present for schools to have a comprehensive mental health system, Texas was lacking across the board. In three of the eight, the campaign identified that Texas had achieved “little or no progress”: school mental health professionals; skills for life success; and well-being checks. The healthy school climate and funding support indicators come in just above bottom.

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Perhaps the most disquieting data concerns school mental health professionals:

- Texas has one school counselor for every 423 students. The recommended ratio is 1:250.
- Texas has one school psychologist for every 4,962 students. The recommended ratio is 1:500.
- Texas has one school social worker for every 13,604 students. The recommended ratio is 1:250.

The only areas in which Texas scores sufficient, according to the campaign’s report card, are mental health training of staff and students. But as is evidenced by the numbers, teaching individuals how to identify a problem is meaningless if not bolstered with proper supports.

During the House Select Committee on Youth Mental Health on October 4 of this year, invited witness Dr. Andy Keller of the Meadows Mental Health Policy Institute reiterated this point. “Teachers are an essential component [to comprehensive systems], but they should not be frontline. Teachers are not mental health professionals. The only thing we need them to know in mental health first aid is when to call for help.”

Instead of training teachers and considering the problem solved, the Legislature must give classroom teachers the professionals they need to call for help. Counselors are insufficient in number to begin with and being overburdened with administrative duties, and school psychologists and social workers are practically non-existent.

TSTA respectfully submits the above comments for consideration and urges the House Committee on Public Education to expand and sustain comprehensive school mental health systems. Mental health challenges can affect success at school and in life, yet Texas students are not getting the help they need to thrive. It is urgent that Texas invest significantly in improving the ratios of school counselors, school psychologists and school social workers in K-12. Schools are in a unique position to help, and our children cannot afford to wait.