

House Education Committee
Testimony from the Vermont Council of Special Education Administrators
Mental Health in Schools
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VCSEA holds the following priority regarding mental health for children:

VCSEA strongly recognizes the importance of early intervention for students who struggle with emerging or present mental health challenges. The strong connection between good mental health and perseverance and life-long success is in evidence in many different bodies of research. VCSEA supports access to high quality mental health services to any child in need. The legislature commissioned a study on Mental Health in Schools through the passage of Act 64. VCSEA was represented with active participation in this study and we will look forward to collaborating on forthcoming recommendations. Mental health services must become an entitlement to all children in need. Collaborative and coordinated service provision available through designated agencies, community providers and schools is critical.

Focus points for VCSEA regarding the study topic:

1. It is important to focus on the proactive work happening in schools. We know what is working well and should continue to build those interventions and structures.
2. There is a high level of variability of service menus offered for children depending to which Designated Agency the child and school are attached, this is an inequity that deserves attention.
3. Clinical treatment services need to be delivered by those with the expertise to treat.
4. We need to spend dollars on proactive efforts while we continue to spend dollars reacting and treating issues that are already present.
5. The lopsided nature of the dollars spent through education versus the dollars spent from Designated Agencies is concerning for VCSEA and deserves to be addressed in a systemic way. Continued cuts to mental health funding shift costs to the education fund.
6. While children do not wait on wait lists for education, nor should they wait on wait list for the mental health services.
7. Co-location and full service schools are both concepts worth further discussion to ensure higher levels of access to services for children.

In a new era of single payer health care we must consider the Adverse Childhood Events research. We know that 4 or more adverse childhood events lead to health care costs later in life. Providing an entitlement to mental health services for children will decrease costs in the long term.

VCSEA is highly supportive of the recommendations contained within the report; however, we also encourage the legislature to act regarding the entitlement to mental health services for children.