



To: The Vermont State Board of Education  
Rep. Peter Conlon, Chair Vermont House Education  
Sen. Brian Champion, Chair Vermont Senate Education

From: The Vermont Council of Special Education Administrators (VCSEA)  
Submitted by: Nicholas DeVita M.S. Ed CAGS NCSP

Date: February 16, 2024

Re: Mental Health in Schools

The following comments are being submitted on behalf of The Vermont Council of Special Education Administrators (VCSEA). VCSEA is an organization dedicated to providing **leadership for the education of all children with a specific focus on students with disabilities.**

The Child Protection in Vermont [Report](#) indicates that 19,725 reports were made to the Child Protection Line in 2022, with 30% of those reports being made by school staff and nearly 75% of the reports being made by mandated reporters. Behind each of these reports is a youth in need of help. These youths are not isolated to one part of the state or one school district. These youths exist in each and every school, grade level, and classroom across the entire state.

Children who have experienced trauma often require a level of mental health support and coordination of services that school districts and community partners are struggling to provide. Schools have worked tirelessly to break down stigmas and create cultures where students feel comfortable sharing their mental health difficulties and traumas with trusted adults, as well as seek help when they're feeling anxious, overwhelmed, and alone. Schools are mandated to provide social and emotional support to all of their students. Schools do not get the option of saying "no" or "we have a 12 month waitlist." Shortages in qualified staff and navigating the various barriers to services through our community partners and agencies is making it impossible for schools to meet the colossal mental health needs of our students.

As a School Psychologist, I know what it's like first hand to sit on the bathroom floor with a suicidal middle-school student who was engaging in self-harm and crying out for help. Now as a Director of Student Support Services I have to look a student and their parents in the eyes and tell them that the mental health support they require has up to a 2 year wait list in Vermont, or tell them they could drive to the emergency room or out of state for more immediate help.

We are at the breaking point where the help these students require is simply not available to them throughout the state of Vermont. **The system is broken and our children are paying the price.**

### Staffing Shortages

- All of the Supervisory Unions represented by VSCEA are experiencing shortages of qualified staff at all levels. Our school special education and guidance staff are experiencing overwhelming caseloads, are not trained to work with the intensity of these students, and as a result, staff are experiencing their own mental health challenges leading to resignations or medical leave.
- Vermont has a severe shortage of Social Workers, School Psychologists, Board Certified Behavior Analysts, Behavior Interventionists, Mental Health Clinicians, and Child Psychiatrists.
- Due to a lack of training programs in the state of Vermont, school districts are having to recruit from out-of-state, which is made challenging by licensing reciprocity challenges at the state level coupled with the high cost of living that prospective professionals face when deciding to move here.

### Need for Vermont-Based Training Programs

- The pathway to these professions require many years of schooling and training, and there simply are not enough training programs throughout the state. Colleges and Universities throughout the state are eliminating and consolidating programs as they face their own budget concerns. For example, The Vermont State University at Castleton announced in 2023 that it would be cutting its School Psychology program, which was the only one of its kind in the state.
- We need to encourage colleges and universities to partner with school districts and develop flexible programs designed to meet the needs of working professionals who may be interested in pursuing a degree in Social Work, Mental Health Counseling, or Child Psychology but can only take courses in the evenings or weekends.
- The financial barrier to obtaining these degrees is immense, coupled with the high cost of living in Vermont.

### Community Partnerships

- Vermont's Act 264 requires that Coordinated Service Plans are in place for youths and families. This process is often made more challenging as our designated mental health agencies are struggling to provide staffing, and in turn, these meetings often feel as if we are admiring the problems instead of providing families and youths with solutions and options. Often our interagency partners ask, "what can the school do?" This cost shift has directly impacted school district budgets. Engagement thresholds of 3 missed sessions could lead to termination of mental health services and support from private providers and mental health agencies. For families of low socio-economic status or who

may live in a more rural part of the state, missing a session may not be something within their control. These thresholds put up more barriers for struggling families to obtain support.

- Inconsistencies of the Local Interagency Team (LIT) meetings have led to challenges in finding out-of-district and/or residential placements for students to address mental health needs. Districts throughout the state have struggled to find out of district placements with independent schools for students. As a result, schools have been left with no choice but to have students on tutorial programs while we do our best to work with LIT to seek placement options within Vermont or out-of-state to address the student's mental health needs.
- **School districts across the state have begun seeing an influx in referrals for special education evaluations from mental health agencies who are citing their own staffing shortages and long timelines. These evaluation requests place schools in legal and ethical gray areas as lines are being blurred between what is considered a school responsibility and what is considered mental health responsibilities.** These requests often lead to more students qualifying for special education who may not actually have a disability, but instead, require a significant amount of social and emotional support related to a mental health need.