

Student Mental Health Supports Network
SY 2023-24 Investment Application

Amendment #1 (September 15, 2023): Extended RFI application due date from Friday, September 15, 2023 to Friday, September 22, 2023.

Revisions are highlighted in **yellow** and underlined (addition) or as a **strikeout** (deletion) to the original RFI issued on Thursday, August 10, 2023.

Student Mental Health Supports | Request For Investment Overview

Investment Summary and Goals

Through multiple City Council Budget Actions ([CBA DEEL-002-A-001-2023](#); [CBA DEEL-603-A-001-2023](#)), the Department of Education and Early Learning (DEEL) will receive a total of \$4M (\$2M in 2023; \$2M in 2024) to expand student mental health services in Seattle Public Schools (SPS) in SY 2023-24 and SY 2024-25. The \$4M in CBA funding is being used to extend the Student Mental Health Supports pilot (launched in SY 2022-23) for currently participating schools (Aki Kurose MS; Chief Sealth HS; Denny International MS; Ingraham HS; Rainer Beach HS) and expand the pilot to include additional schools in SYs 2023-24 and 2024-25. Learnings from the pilot launch have been key to the development of the expansion as the project moves to implementation of a **Student Mental Health Supports Network (SMHSN)**.

In response to this CBA allocation, DEEL identified four additional schools eligible to apply for funding through a comprehensive Landscape Analysis and Needs Assessment process conducted in partnership with key stakeholders (see **Appendix C**), including the Public Health – Seattle King County (PH-SKC), SPS, students, current pilot schools, and community partners. DEEL intends to fund a maximum of 2-3 additional schools to join the SMHSN for SYs 2023-24 and 2024-25. Eligible applicants may submit an application outlining their proposal for use of funds for SY 2023-24 at a minimum of \$113,843 and a maximum of \$227,687.¹ This funding is multi-year and the same funding thresholds per school will apply in SY 2024-25. **The final date for proposal submission is Friday, September 15, 2023 by 11:59pm.**

Culturally-Specific Responsive (CSR) Focus: A key learning from the stakeholder engagement conducted within the Landscape Analysis was identifying a critical gap in service for Black, Indigenous, People of Color (BIPOC) students in receiving effective, healing-centered, CSR mental health supports. Addressing this gap requires a multi-faceted strategy that delivers supports for BIPOC students in a variety of ways, inclusive of both clinical and non-clinical approaches across the Student Mental Health Supports Continuum (see below), that are culturally responsive, localized to their communities, and directly informed by youth and family needs. ***The interventions described within the Student Mental Health Supports Continuum should all be grounded within a Culturally Specific and Responsive (CSR) approach, with mental health supports across the continuum specifically targeted to BIPOC youth that are “rooted in cultural awareness, sensitivity, humility and BIPOC lived experience that responds to cultural needs to feel understood and validated.”***²

¹ These funding amounts reflect the direct award to schools after SPS indirect cost. The pre-indirect amount per school is \$125k-\$250k per school year.

² [Taboos and therapists who don't understand: Mental health struggles more complicated for BIPOC youth | CBC News](#)

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Student Mental Health Supports Continuum: The student mental health supports continuum ranges from direct clinical care to social-emotional learning interventions, defined as follows:

- **Direct clinical care** provided by licensed mental health clinicians (ex. Mental health counselors within School Based Health centers; Community Mental Health Agencies).
- **Mental and emotional health screenings and referrals** to mental health supports and care services (ex. Student & family re-entry case management; SPS Strength and Difficulties Questionnaire; SPS Screening, Brief Intervention, and Referral To services -SBIRT- program).
- **Social-Emotional Learning (SEL)** in schools through dedicated time within the school-day where students can, “acquire and apply the knowledge, skills, and attitudes to develop healthy identities, manage emotions and achieve personal and collective goals, feel and show empathy for others, establish and maintain supportive relationships, and make responsible and caring decisions”³ (ex. SEL curriculum/framework training for teachers;⁴ Affinity-based mentorship for students from adult mentors with similar cultural backgrounds and lived experiences).

Partnership and Monitoring Expectations for Funded Schools

Participation in the Network: The five schools (Aki Kurose MS; Chief Sealth HS; Denny International MS; Ingraham HS; Rainer Beach HS) that participated in the launch of the initial Student Mental Health Supports pilot in SY 2022-23 formed the Student Mental Health Supports Learning Community, with participation from pilot school staff, community and institutional partners, and students. Synthesized learnings from the Learning Community provided the Culturally-Specific and Responsive (CSR) foundation for the SMHSN while informing and affirming the Landscape Analysis and Needs Assessment framework (see Appendix C). These learnings were also applied to the emerging Student Mental Health Investment Framework and the recommended interventions and student supports schools should consider for proposal development (see Appendix A).

As the pilot expands to include additional SPS schools, the Learning Community will also expand to form the Student Mental Health Supports Network. While the purpose and charge of the Learning Community was to inform pilot expansion, the purpose of the Network will be to continue this learning and relationship building to strengthen coordination among partners (schools; community-based partners; students and families), each leveraging their own expertise to provide more coordinated and streamlined care to students and families while fostering opportunity for community learning to be applied to a broad range of schools over an extended period to inform systemic approaches to CSR student mental health supports throughout the continuum.

Selected schools will be required to participate in the Network. Participation includes quarterly convenings by a designated school representative and commitment to coordinate engagement with students and community participants to support the SMHSN learning agenda (see below). Additional details will be provided by Fall of SY 2023-24.

SMHSN Learning Agenda: DEEL is taking a phased learning approach centered on the findings of the pilot to establish a Student Mental Health Investment Framework focused on ways that mental health supports can be structured to better serve BIPOC students and families. New schools awarded funding in

³ [Fundamentals of SEL - CASEL](#)

⁴ For more information on professional development and learning for adults that supports high-quality SEL implementation in the classroom, see pages 23-25 in [Navigating Social and Emotional Learning from the Inside Out \(wallacefoundation.org\)](#).

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2023 will join existing pilot schools to support Phase 2 of the Student Mental Health Supports Network learning agenda.

Phase 2 of the learning agenda will focus on connecting specific mental health strategies to measurable outcomes across SMHSN schools to support overarching investment goals. DEEL will work with awarded schools in Fall 2023 to create a school-specific monitoring and reporting plan that aligns with the SMHSN learning agenda and schools' goals for implementation, quality, and outcomes over the course of the two-year funding period. Schools may submit funding proposals for interventions that fall anywhere along the continuum of care and must demonstrate alignment with one or more of the Student Mental Health Supports Network goals below. **Appendix A** provides a list of recommended interventions across the care continuum. Schools are not limited to interventions on this list but are encouraged to use it as a reference.

Student Mental Health Supports Network (SMHSN) goals:

- **Goal 1:** Leverage the expertise of trusted community-based partners to offer CSR mental health supports across the continuum (see continuum information above) by providers who share BIPOC students' identities and who have similar lived experiences, inclusive of family engagement centered on CSR family supports that are multilingual, asset-based, and welcoming.
- **Goal 2:** Identify and address root causes and indicators of student mental health issues (risk factors), including substance abuse, disconnection from school and ongoing truancy and absenteeism, and unhealthy relationships, while providing experiences and environments that can sustain and improve student mental health (protective factors), including delivering professional development that promotes adult learning to support students and creating opportunities for student-led decision-making by authentically sharing power and investment resources with youth.
- **Goal 3:** Embed and implement culturally-responsive healthcare and hiring practices within clinical care supports and SBHCs to increase language access, referral for services, trauma-informed approaches, and person-centered healthcare.⁵

Proposal and Application Instructions

SY 2023-24 Proposal and Application Guidance:

- The final date for application submission is **Friday, September 15 22, 2023 by 11:59pm.**
- Schools will be awarded a minimum of **\$113,843 and a maximum of \$227,687** for SY 2023-24. This funding is multi-year and the same funding thresholds per school will apply in SY 2024-25.
- Proposal prompts are intended to be low-barrier for schools to address. The recommended page limit **per narrative section is NO MORE** than 2 pages, 12-point font, double-spaced for each section (4 sections, 8 page maximum for total application). Please note these are recommended page limits, and applicants will not be penalized for exceeding them. However, concise answers are encouraged. If additional information and clarification is needed, DEEL staff will follow up with questions.
- Submit proposals via email to Vik Cheema and Amelia Moore at DEEL with the subject line – **School Name/2023-24 MH Proposal**
 - Vik Cheema: Vik.Cheema@seattle.gov

⁵ King County Best Starts for Kids School-Based Health Center (SBHC) Enhancement goal

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- Amelia Moore: Amelia.Moore@seattle.gov

Technical Assistance:

- Proposal questions should be directed to Vik Cheema at Vik.Cheema@seattle.gov.
- DEEL staff will schedule one-on-one consultant sessions during the open proposal period with each school leader and team to discuss the expectations of being a participating school in the SMHSN and support proposal development.
- DEEL will also host an SMHSN informational session on **Wednesday, August 16 from 3-4pm** to share pilot and Learning Community history and the vision for the SMHSN moving forward. The session will also be recorded. The session will take place on Microsoft Teams and an invitation will be sent to school leaders.

Proposal Review and Notification:

Part I: Review Panel - A review panel consisting of DEEL staff and current Student Mental Health Supports Learning Community representatives will evaluate applications using the Investment Application Scoring Criteria (see below, and **Appendix B** for a detailed scoring rubric). Proposal scores and review panel discussions will inform review panel recommendations for funding awards.

Section	Score
1. Proposed Intervention(s)	20
2. Culturally Specific & Responsive	20
3. Progress Monitoring	20
4. Readiness	40
5. Budget	<i>Not scored, mandatory submission to be considered for review</i>
Total Points	100

Part II: Award Decisions and Notification - DEEL will make final funding decisions based on review panel recommendations and on the factors named above. Final funding decisions will be made by the DEEL Director. **DEEL will notify each applicant of the decision by the week of October 16, 2023.**

Proposal Prompts

General Information:

Directions: Provide contact and role information for your school's lead point of contact for this proposal.

- Lead point of contact for proposal information and follow-up:
 - Name:
 - School Role:
 - Contact Information:
- If the lead point of contact for the planning and implementation of this work is different, please provide:
 - Name:
 - School Role:
 - Contact Information:
- If either of these points of contact is not an administrator, please designate the administrator who will provide support to this staff member:
 - Name:
 - School Role:
 - Contact Information:

Commitment to Participating in Student Mental Health Supports Network (SMHSN):

Selected schools will be required to be active participants in the SMHSN. Participation includes designating a school representative to attend quarterly convenings, hosting at least one site visit for DEEL staff during SY 2023-24, and a commitment to coordinate engagement with students and community participants to support the SMHSN learning agenda. Additional details will be provided by Fall of SY 2023-24. If your school is awarded funding and selected to join the SMHSN, can you commit to being an active participant in the SY 2023-24 Network activities, including recruiting student and community partner participants, attending convenings, and participating in additional activities?

- Yes
- No

Section 1: Identified Student Need and Proposed Intervention(s)

Directions: Review the details in the Proposal Overview and **Appendix A: Identified Student Need and Proposed Interventions** for examples and guidance to answer the prompts. While schools are not limited to interventions on this list, it is strongly encouraged to use it as reference for the types of supports this investment intends to fund.

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Section 1; Prompt 1:

What mental health needs have you and your students identified in your school? How do these needs show up in student behaviors or mindsets? How have students, families and staff informed the mental health needs identified in your school? *Examples of student need may include adverse lived experiences students go through that can have a negative impact on their mental health (ex. Physical or Sexual Violence; Physical or psychological abuse; Family economic instability such as food insecurity and homelessness) and/or behaviors or mindsets that students might exhibit if they are struggling with their mental health (ex. Substance Use; Disengagement from School - Chronic Absence).*

Section 1; Prompt 2: What is/are the proposed intervention(s) for each student mental health need you have identified? How do your proposed intervention(s) address the student need?

Question to consider in your response: How do your proposed intervention(s) build on school, community, and student and family assets to provide students with experiences and environments that can sustain and improve their mental health? *Examples of school, community, and student and family assets include students experiencing social-emotional well-being, such as hope, self-efficacy, and agency; Positive Behavior & Safety, Belonging & Relationships, Equity & Antiracism; and Having Trusted Adults in school or in community to talk to/seek help from.*

Section 1; Prompt 3: How will you engage student voice in the implementation of your proposed interventions? What evidence or stakeholder input have you gathered to inform your proposed intervention(s)?

Section 1; Prompt 4: Describe how your proposal aligns with one or more of the Student Mental Health Support Network goals (see page 3 in Opportunity Overview).

Section 2: Culturally Specific & Responsive

*Key term: **Culturally Specific and Responsive (CSR):** mental health supports specifically targeted to BIPOC youth, with supports “rooted in cultural awareness, sensitivity, humility and BIPOC lived experience that responds to cultural needs to feel understood and validated”.*

Section 2; Prompt 1: Describe the student population(s) you intend to serve and the specific strategies and approaches in your proposal that make mental health supports more culturally responsive, identity affirming, and equitable for BIPOC students and families.

Questions to consider in your response: What population(s) of students are you targeting supports and interventions to? How do your strategies and approaches recognize and build on the strengths and cultural assets of this student population, and how is the approach responsive to their needs and the challenges they face?

Section 3: Progress Monitoring

Section 3; Prompt 1: Describe how you will know if the approach/strategy/intervention is successful.

Question to consider in your response: What will success look like for the students and/or families participating in your school’s proposed services?

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Section 3; Prompt 2: Describe how you plan to track progress towards achieving goals and outcomes. *Questions to consider in your response:* What indicators will you use to measure student progress and success specific to the intervention in your proposal (i.e., student attendance; lower incidents of violence; school climate survey data; etc.)? How do you plan to support continuous improvement of the mental health intervention? How will you engage students, families, and community partners in ongoing continuous improvement?

Section 4: Readiness

*Key term: **Readiness** refers to a school's ability to successfully implement the proposed intervention across a range of readiness factors that include a strategic vision for how CSR student mental health supports fit into the broader landscape of student services offered at your school, collective "buy-in" from school leadership and staff on this vision, and ability to effectively partner with community, family, and students to accomplish the vision.*

Section 4; Prompt 1: Briefly describe your school's current strategy to support student mental health and wellness, including connections to work already happening in your school and community. *Questions to consider in your response:* Is the intervention(s) described in this proposal a continuation or enhancement of existing interventions at your school? If so, why did you decide to continue or enhance this intervention? If this is a new intervention to your school, how will it be integrated with existing student support systems in your school or community?

Section 4; Prompt 2: Please describe your school's plan for staffing and administration of this proposed intervention. How does your school's leadership and administration prioritize and integrate this strategy into your school's overall strategic planning?

Section 4; Prompt 3: How do you successfully partner with communities, other organizations, and/or students and families to support student mental health? How will you engage these stakeholders in planning and implementing these supports? *Questions to consider in your response:* How will you authentically create opportunities to incorporate student voice into how your school supports student mental health?

Section 5: Budget

Complete the SY 2023-24 Student Mental Health Supports Network budget template ([linked here](#)).

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Appendix A: Recommended Interventions

Based on compiled learnings from the SY 2022-23 pilot, inclusive of stakeholder engagement with students and Learning Community members at LC convenings, spring site visits, and within student listening sessions, the following is a list of recommended interventions across the student mental health supports continuum. *Note: Schools are not confined to this list.*

Identified Student Need	Proposed Intervention	Intervention: Protective Factors	Continuum
Supporting healthy family dynamics for students of color	Therapy Sessions: Offer individual students and their families the opportunity to receive a designated number of therapy sessions with therapists of color and/or local private practitioners of color.	School Climate: Support/positive relationships with adults at school; Identity affirming and antiracist environment	Clinical; Mental and emotional health screenings and referrals
Supporting healthy family dynamics for students of color & LGBTQ+ youth	Family Support Workshops: Provide workshops for families to strengthen familial support and increase families' understanding of different systems they may encounter; the opportunity to learn about the school system, intergenerational communication, bicultural parenting skills, and raising bicultural youth; supporting parents of QTBIPOC/LGBTQ youth.	School Climate: Support/positive relationships with adults at school; Identity affirming and antiracist environment	Clinical
Provide identity affirming, safe spaces for LGBTQ+ youth	Offer services and spaces specifically for LGBTQ+ Youth, centered on the youth's assets, strengths, cultures, identities, and their capacity to own their futures.	School Climate: Support/positive relationships with adults at school; Identity affirming and antiracist environment	Clinical; Mental and emotional health screenings and referrals
Support students with depression, anxiety, low self-esteem	Clinical counseling: Provide clinicians of color to work full time at the school and offer both 1:1 and drop-in group counseling.	School Climate: Support/positive relationships with adults at school	Clinical; Mental and emotional health screenings and referrals
Support in diagnosis and treatment to address MH concerns. Provide DBT groups and learning	Provide Dialectical Behavior Therapy (DBT) ⁶ Groups or other mental health support groups to be run during the school day and afterschool.	School Climate: Feeling safe at school, and like adults take action to address conflict at school; Support/positive relationships with adults at school	Clinical

⁶ [Dialectical behavior therapy \(DBT\)](#) is a modified type of cognitive behavioral therapy (CBT). Its main goals are to teach people how to live in the moment, develop healthy ways to cope with stress, regulate their emotions, and improve their relationships with others.

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Addressing & preventing dating or domestic violence	Offer a youth violence prevention curriculum in a designated elective class, designed specifically to be relevant to youth culture and that teaches them how to advocate to their peers.	School Climate: Feeling safe at school, and like adults take action to address conflict at school; Support/positive relationships with adults at school	SEL; Youth Violence prevention
Support students in finding outlets, belonging, and spaces to simply have fun	Organized activities such as exercise groups, art/crafting, meditation, sports intramural leagues.	School Climate: Support/positive relationships with adults at school	SEL
Support students in finding outlets, belonging, and spaces to simply have fun	Offer designated safety and wellness rooms in schools that are designed for youth and create more break times during the school-day for students to access these spaces, build community, and relax.	School Climate: Feeling safe at school, Identity affirming and antiracist environment	SEL
Support student mental health, wellness and belonging	Grade Level Mental Health Days: Work with students in each grade level via ASB and other student groups to plan and implement specific grade-wide activities which are healing and/or restorative in nature where students are able to engage with one another to develop relationships and strengthen community.	School Climate: Feeling safe at school, and like adults take action to address conflict at school	SEL; Youth-led
Train teachers & school staff to support a variety of student mental health needs, including mindfulness, self-compassion, handling emotions, empathy, and others	Implement evidence based SEL curricula (e.g. SEE Learning, etc.) in the classroom through staff training (includes curriculum, licensing, and/or facilitator training).	School Climate: Feeling safe at school, and like adults take action to address conflict at school; Support/positive relationships with adults at school	SEL
Train teachers & school staff on SEL & restorative practices to implement in the classroom	Community Circles: Staff trained to facilitate community circle meetings in their classrooms through facilitated professional development	School Climate: Feeling safe at school, and like adults take action to address conflict at school; Support/positive relationships with adults at school	SEL
Train teachers & school staff on Trauma Informed practices for students who need Tier 2 & 3 services	Trauma Informed Practices PD and Curricular Materials: Engage staff in a series of PD trainings with local mental health providers on trauma informed instructional practice.	School Climate: Feeling safe at school, and like adults take action to address conflict at school; Support/positive relationships with adults at school	Clinical

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Disconnection from school for Black, Indigenous, Latinx students; Student of color	Address root causes of chronic absenteeism, including disconnection chronically absent students feel from the school community and the lack of solid, positive relationships with each other and with adults in the building, by intentionally focusing on relationship building through restorative practices.	School Climate: Feeling safe at school, and like adults take action to address conflict at school; Support/positive relationships with adults at school; Identity affirming and antiracist environment	Mental and emotional health screenings and referrals
Disconnection from school for Black, Indigenous, Latinx students & families; Student and families of color	Student & family re-entry case management. Connect the work happening with students to their families to achieve more wrap-around support for the students. Include and maximize family support to identify the barriers to attendance and find realistic ways to address these barriers for students and families.	School Climate: Feeling safe at school, and like adults take action to address conflict at school; Support/positive relationships with adults at school; Identity affirming and antiracist environment	Mental and emotional health screenings and referrals
Disconnection from school for Black, Indigenous, Latinx students; Student of color	Focus on ancestral, intergenerational, interpersonal trauma, healing, joy, and resiliency, applicable to all areas of students' lives. Engage students in traditional practices of health and healing.	School Climate: Feeling safe at school, and like adults take action to address conflict at school; Support/positive relationships with adults at school; Identity affirming and antiracist environment	Clinical
Support students through the development of their understanding of their community and cultural identity and action plans for individual and collective healing	Create safe and affirming spaces where students can develop and expand their understanding of their community and cultural identity and learn and place into action individual and collective healing modalities that include coping strategies and considerations for mental health care.	School Climate: Support/positive relationships with adults at school; Identity affirming and antiracist environment	SEL
Substance abuse support	Provide Substance Use Disorder services to students who self-refer or are referred by staff, families, partners, or behavioral health screening. Services may include outreach, assessment, outpatient treatment, groups, family engagement, and staff collaboration. Offer a consistent on campus	School Climate: Support/positive relationships with adults at school	Clinical

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	provider to remove barriers to services such as insurance, transportation.		
Support the increase of the school based support team which covers and supports the role of addressing Mental Health.	School Social Worker: trained mental health clinicians who provide an integral link between school, home, and community in helping students achieve academic and social success. This is accomplished by removing barriers and providing services that include: Mental health, social-emotional learning, crisis prevention, and intervention, professional case management, and advocacy support for students and parents. SSWs work on-site in individual schools to provide wrap-around support services that include positive behavioral support, academic, and classroom support, consultation with teachers, parents, and administrators as well as provide individual, and group counseling/therapy.	School Climate: Support/positive relationships with adults at school	Clinical
Provide Healing Circles, One on One Mentoring for students	Restorative Practices & Mentoring: Leverage and train staff to work with the students in mentoring and facilitating Healing Circles and provide mentoring and case management to support students in healing.	School Climate: Support/positive relationships with adults at school	SEL

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Appendix B: Scoring Criteria

<i>Criteria</i>	<i>Description</i>	<i>Total Points</i>
Proposed Intervention	<ol style="list-style-type: none"> 1. Proposal includes a clear description of intervention activities, participants, and timeline. 2. Proposal demonstrates thorough understanding of the school mental health climate and challenges being addressed by the intervention, including evidence such as data points and input from students, families, and/or staff. 3. Proposal specifies how the intervention addresses these challenges to support student mental health and demonstrates alignment with one or more SMHSN goals. 4. Proposed intervention is supported by an evidence base (examples of evidence include research and student and community input), or a concrete plan to incorporate learning and community involvement to inform development of the program. 	20
Culturally Specific & Responsive Strategies	<ol style="list-style-type: none"> 1. Proposal clearly articulates different subgroups of students being engaged in the intervention (specific race/ethnicities, gender identities, etc.) 2. Proposal describes how implementation of the intervention is differentiated based on the strengths and cultural assets of the student populations identified. 3. Culturally specific and responsive strategies are clearly described and integrated into multiple aspects of the proposed intervention (such as outreach, staffing, etc.) 4. Youth/community feedback and/or supporting research is included to support the proposed culturally specific and responsive strategies. 	20
Progress Monitoring	<ol style="list-style-type: none"> 1. School articulates a target mental health outcome that is clearly aligned with the proposed intervention. 2. School describes anticipated changes in student mindsets, behavior, or school climate that are associated with progress toward the outcome. A strong response will demonstrate an understanding of risk and protective factors that influence student mental health. 3. Proposed plan for tracking progress toward intended outcomes includes potential measures and data sources. 4. Proposal describes a planned or current process for supporting continuous improvement of the mental health intervention, including use of data and/or participant engagement (e.g., students, families, partner organizations). 	20
Readiness	<ol style="list-style-type: none"> 1. Proposed plan for staffing and administration of the intervention is clear and commensurate with the intended scale or effort. 2. School demonstrates presence of existing student support systems (such as student support staff, community partnerships, related initiatives and funding) to bolster the mental health intervention. 	40

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	<p>3. School describes concrete actions (past or planned) that demonstrate leadership and administration support for the mental health intervention.</p> <p>4. Proposal provides clear details about how engagement and partnership with community (students, families, organizations) will support the implementation of this mental health intervention. A strong response will demonstrate recent success engaging stakeholders (students, families, partner organizations) to develop and support this or a similar intervention.</p>	
Budget	<i>Not scored, mandatory submission to be considered for review</i>	
Total		100

Appendix C: Landscape Analysis & Needs Assessment

Landscape Study

To inform selection of additional schools eligible for funding, DEEL engaged stakeholders and reviewed youth mental health research to generate a needs assessment framework. DEEL then developed quantitative measures based on this framework to rank schools by need and identify those that will benefit most from mental health interventions.

Stakeholder Engagement

- ***The Student Mental Health Supports Learning Community*** was the primary site of stakeholder engagement, with participation from pilot school staff, community and institutional partners, and students. In addition to four monthly convenings that took place March-June, activities included follow-up surveys and worksheets, and site visits at each school to gain greater insight into implementation of current support services, identify successes and challenges, and continue conversations with school and community partners. Synthesized learnings from the meetings and activities provided the Culturally-Specific and Responsive (CSR) foundation for the Landscape Study and affirmed the Needs Assessment framework. These learnings are also informing the emerging Student Mental Health Investment Framework and the recommended interventions and student supports schools should consider for SY 2023-24.
- ***Public Health- Seattle King County (PHSKC)*** participated in the Learning Community, met with DEEL weekly and was a key thought partner in identifying and gaining access to source data, defining measurable student mental health outcomes and risk/protective factors in the Needs Assessment Framework, and providing guidance on how to prioritize the various scoring and selection factors in the final analysis.
- ***SPS*** was also part of the Learning Community and a key collaborator in identifying and gaining access to source data and affirming the student mental health outcomes and risk/protective factors in the Needs Assessment Framework.
- ***Students*** were engaged through a multi-tiered approach that included capturing student voice through student-led advocacy sources⁷ and dialogue with trusted adults relaying student insights, listening sessions with students from the five pilot schools and the Seattle Student Union (SSU), and participating in the Learning Community. Students informed and affirmed the CSR investment focus, helped to identify student needs and assets, and provided direct feedback on the Needs Assessment framework and how different risk/protective/demographic factors should be prioritized in the final analysis.

Research and Literature Review

DEEL consulted a variety of sources (see Appendix D) such as the CDC, National Institutes of Health, and academic journals, to explore the following:

- Measures for observing youth mental health **outcomes**,
- Measurable **predictors** of youth mental health status,
- **Best practices** for sustaining positive youth mental health, particularly in school settings,
- **Local and national trends** in youth mental health, and
- **Available data** to observe mental health outcomes and predictors at the school level.

⁷ Rainer Beach Town Hall Call-to-Action , [FEEST Student Mental Health Youth Fellows](#) ; student letters and emails

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Needs Assessment Framework

The landscape study produced the following key parameters for investing in school-based mental health supports and prioritizing schools for funding:

- ***Culturally Specific & Responsive (CSR)⁸ Focus:*** A key learning from the stakeholder engagement was identifying a critical gap in service for Black, Indigenous, People of Color (BIPOC) students in receiving effective, healing-centered, CSR mental health supports. Addressing this gap requires a multi-faceted strategy that delivers supports for BIPOC students in a variety of ways, inclusive of both clinical and non-clinical approaches, that are culturally responsive, localized to their communities, and directly informed by youth and family needs. Because of the explicit CSR focus of the emerging investment framework, the Needs Assessment weighted a school's demographic population to prioritize services to the largest possible number of BIPOC students and multilingual students who are English Language Learners.
- ***Higher Risk Among Secondary students:*** PHSKC recommended a secondary school focus based on available student mental health data, with research and data analysis showing high levels of adverse mental health outcomes and associated risk factors among secondary students. In King County, suicidal ideation and attempt rates among youth ages 10 – 24 were highest in the 14-17 age group⁹. This data and research is also supported with anecdotal reports from School-Based Health Centers (SBHC).
- ***Prioritize Comprehensive, Non-option¹⁰ High Schools:*** Adding additional schools expands the investment footprint across a diversity of geographic regions within SPS, fostering opportunity for community learning to be applied to a broad range of schools over an extended period to inform systemic approaches to mental health supports for BIPOC students across the district. While SPS option schools are an excellent source of targeted supports for specific student populations and do offer valuable opportunities to learn about effective interventions, that learning may be limited in its applicability to neighborhood comprehensive high schools and their ability to implement or replicate the same type of supports in their buildings.

Mental Health Needs Assessment Criteria: DEEL drew from five data sources to measure student mental health outcomes, risk, and protective factors across individual Seattle Public Schools—the Washington State Healthy Youth Survey¹¹; Office of the Superintendent of Public Instruction Report Card; SPS administrative data; SPS School Climate Survey; and the Seattle Police Department Crime Statistics Map. The table below outlines the indicators used to score and prioritize schools for expanded mental health funding. In addition to mental health outcomes (measured at the student level), DEEL included mental health risk and protective factors that reflect individual student experiences and mindsets, school environment, and community-level factors in its model.

⁸ ***Culturally Specific and Responsive (CSR)*** mental health supports specifically targeted to BIPOC youth provide that are “rooted in cultural awareness, sensitivity, humility and BIPOC lived experience and respond to cultural needs to feel understood and validated.”

⁹ [Mental Health Among Youth and Young Adults in King County, WA](#)

¹⁰ SPS [option schools](#) with continuous enrollment offer unique services, opportunities, and learning environments to meet individual student needs. Students may request assignment to these schools or may be referred to one. These schools do not have geozones.

¹¹ Learn more about the Healthy Youth Survey on the Washington State Department of Health website: <https://doh.wa.gov/data-statistical-reports/data-systems/healthy-youth-survey>.

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Composite Scores <i>(average score of multiple indicators)</i>	Indicators <i>(school-level percentage)</i>
Mental Health Outcome Score: Adverse mental health outcomes that this investment seeks to improve.	<ul style="list-style-type: none"> • Suicidal ideation • Depression • Anxiety
Risk Factor Score: Lived experiences that can have a negative impact on student mental health, and behaviors that can be symptoms of poor mental health.	<ul style="list-style-type: none"> • Adverse experiences (sexual violence, abuse, homelessness, and economic insecurity) • Community-level violent crime rates • Risky behavior (substance use) • Disengagement from school (chronic absence)
Protective Factor Score: Lived experiences and environmental factors that can sustain and improve student mental health.	<ul style="list-style-type: none"> • Social-emotional well-being (hope) • School Climate (equity, safety, belonging and relationships) • Trusted adult in community to turn to for support
Demographic Priority Score: A school's percentage of BIPOC students, and multilingual students who are English Language Learners.	<ul style="list-style-type: none"> • BIPOC student population • ELL student population

Scoring & Selection Methodology: DEEL applied needs assessment scores to SPS high schools, and used the following selection process to identify priority schools who will be invited to apply for funding:

1. Include comprehensive, non-option high schools in analysis.
2. Rank school-level results for each indicator by generating deciles (1-10).¹²
3. Generate Mental Health Outcome, Risk Factor, Protective Factor, and Demographic Priority composite scores by averaging indicator decile scores in each category.
4. Generate a Total Mental Health Need score for each school by averaging Mental Health Outcome, Risk Factor, and Protective Factor decile scores. A higher average decile indicates a higher school need.
5. Exclude schools with a Demographic Priority score below 4.
6. Select up to seven schools with a Total Mental Health Need score of 4 or above.

School Scoring and Selection Results

Seven high schools met the selection criteria, three of which are already receiving funding through the 2022-23 mental health pilot. Four additional schools will be invited to apply for funding.

School	Student Count (2022-23)	Total Mental Health Need Score	Mental Health Outcome Score**	Risk Factor Score	Protective Factor Score (Inverse)	Demographic Priority Score
Ingraham High School*	1454	7.0	8.0	5.7	7.2	5.0
Chief Sealth High School*	1292	6.4	5.3	6.2	7.8	7.5
Nathan Hale High School	1100	4.9	4.0	5.0	5.8	4.5
Garfield High School	1628	4.8	4.8	5.0	4.6	5.0

¹² Deciles are compiled by ranking percentage scores for each school from lowest to highest and splitting this range into 10 equal subsections: from the 10th percentile to the 100th percentile. A decile rank assigns a number from 1-10 to each decile.

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Rainier Beach High School*	819	4.5	2.3	5.6	5.6	9.5
Cleveland High School	902	4.2	4.0	4.1	4.6	6.5
Franklin High School	1177	4.0	3.3	4.4	4.4	8.5

**Already participating in 2022-23 pilot.*

***A high score indicates a higher rate of adverse mental health outcomes.*

DEEL's next steps are as follows:

- Notify the four selected priority schools of the opportunity to apply for funding in summer 2023.
- Finalize standardized funding application with proposal review criteria.
- Finalize proposal review and school selection process in time for award announcement in the beginning of SY 2023-24.

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Appendix D: References

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