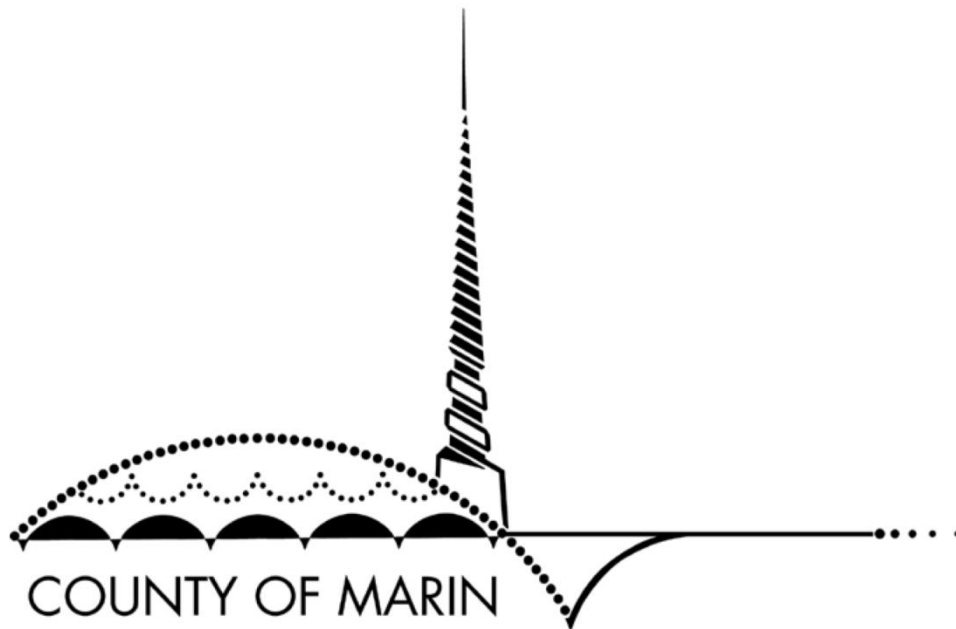


2019–2020 MARIN COUNTY CIVIL GRAND JURY

Reading, Writing, and Therapy: Mental Health Challenges in Our Schools

October 23, 2020

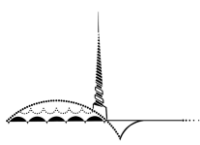


A Note About this Report

The 2019–2020 Marin County Civil Grand Jury is issuing its reports during the unprecedented conditions of the COVID-19 pandemic. We are well aware that Marin County is in crisis and that critical public health concerns, operational difficulties, and financial challenges throughout the county have a greater claim to government attention right now than the important issues raised by this Grand Jury.

We are confident that, in due course, Marin will come through this crisis as strong as ever.

Information in this report is current as of July 30, 2020. During the process of publishing this report, the name of Sir Francis Drake High School was dropped by the Tamalpais Union High School District and a process to consider renaming the school had begun.



Reading, Writing, and Therapy: Mental Health Challenges in Our Schools

SUMMARY

Marin educators and mental health professionals agree that there is a mental health crisis in our schools. Students are increasingly prone to anxiety and chronic feelings of hopelessness. More of our youth report thinking of taking their own lives, and some are acting on these dark thoughts. Marin schools have shown great initiative in their attempts to help these young people, but they need assistance. There has never been enough money, and the COVID-19 pandemic now threatens significant cuts in education funding.¹ At the same time, the pandemic is increasing mental health issues for many of these students.²

The Grand Jury believes a concentrated community effort, led by the Marin County Office of Education and the county Department of Health and Human Services, is needed to support the wellness efforts at our schools. Some of this work, including collaboration to seek funding and work on suicide prevention, has begun. These efforts provide a roadmap to improved mental health services for Marin students. The path is clear, but there is much work to be done.

OBJECTIVE AND APPROACH

The objective of this report is to investigate mental health issues in Marin County high schools and to assess the various schools' responses. The Grand Jury interviewed Marin educators, including officials from each district with a high school; students; mental health professionals; local advocates; and government officials. The jury also reviewed national and local reports on adolescent mental health. Although the mental health needs of Marin children can begin in primary grades and accelerate significantly in middle school, this report is limited to the county's eight comprehensive public high schools.

BACKGROUND

There may be no more urgent indicator of the need for mental health services in Marin County's high schools than the fact that, from 2017 to 2019, four Marin students are known to have taken their own lives.

Jim Hogeboom, then superintendent of the Novato Unified School District, sounded an alarm in 2019. Marin County students "are facing a mental health crisis that is unparalleled," he wrote in a *Marin Independent Journal* opinion article.³ And that was seven months before the COVID-19 pandemic disrupted daily life, closing schools and severing students from the routine structure

¹ Richard Kano, "What California's Budget Means for K-12 Schools," July 1, 2020, CalMatters, <https://calmatters.org/education/2020/07/what-californias-budget-deal-means-for-k-12-schools/>.

² Sonali Kohli, "We Need to Prepare for the Mental Health Impact of Coronavirus on Kids," *Los Angeles Times*, May 7, 2020, <https://www.latimes.com/california/story/2020-05-07/coronavirus-anxiety-children-long-term-mental-health-impacts>.

³ Jim Hogeboom, "Marin Voice: Schools Alone Cannot Address Mental Health Crisis," *Marin Independent Journal*, June 2, 2019, <https://www.marinij.com/2019/06/02/marin-voice-schools-alone-cannot-address-mental-health-crisis/>.

and social and emotional support they find outside their homes.⁴ Hogeboom, who is now superintendent of San Rafael City Schools, urged community-wide support for Marin schools as they cope with youth mental health needs. “The schools can’t do it on their own,” he wrote.

School-aged children in Marin County face significant mental health risks. A 2017 survey found that 13 percent of Marin high school juniors had seriously considered suicide in the last year. Thirty-five percent of the juniors reported having chronic, hopeless feelings in the same period.⁵

Nationally, 70 percent of teens polled by Pew Research said anxiety and depression were major problems among their peers.⁶ Instances of teen depression, the most common mental health disorder, increased by nearly a third from 2005 to 2014.⁷ According to the 2018 *California Health Care Almanac*, two-thirds of the adolescents in California who experienced major depressive episodes between 2011 and 2015 did not receive treatment.⁸

Mental health experts and educators interviewed by the Grand Jury cited myriad reasons for this trend. Pressure to succeed—to earn grade-point averages sufficiently over straight As to win acceptance to universities that seem to guarantee life success—is a factor, particularly in communities like Marin County. Other students struggle with pressures from living in poverty and face insecurities around housing, food, and immigration status. Ubiquitous smartphones, with peer comments about one’s appearance, behavior, and popularity, have seriously complicated adolescent life in the last decade.⁹ Bullying, drug and alcohol abuse, and concerns about sexuality are all cited as factors. So, too, are such life realities as the threat of school shootings, climate change, ongoing global conflicts, and the COVID-19 pandemic.

Also significant, in the schools of the Novato and San Rafael districts, is the presence of “newcomer” students, most of whom have just arrived from Central America, often without parents or other family members. There were 400 such students who arrived in the 2019-20 school year, often with no English language skills and little family support. Many owe significant debt to those who facilitated their travel to the United States, requiring them to get jobs to pay off their debt.

Good mental health is a significant factor in students’ ability to learn. The National Association of Secondary School Principals states that mental health issues create “significant barriers to

⁴ Dan Levin, “In a World ‘So Upside Down,’ the Virus Is Taking a Toll on Young People’s Mental Health,” *New York Times*, May 20, 2020, <https://www.nytimes.com/2020/05/20/us/coronavirus-young-people-emotional-toll.html?searchResultPosition=1>.

⁵ California Department of Education, *California Healthy Kids Survey: Marin County Secondary 2017–2018 Main Report*, p. 49.

⁶ Juliana Menasce Horowitz and Nikki Graf, “Most U.S. Teens See Anxiety and Depression as a Major Problem Among Their Peers,” Pew Research Center, February 20, 2019, <https://www.pewsocialtrends.org/2019/02/20/most-u-s-teens-see-anxiety-and-depression-as-a-major-problem-among-their-peers/>.

⁷ M. Mojtabai, M. Olfson, and B. Han, “National Trends in the Prevalence and Treatment of Depression in Adolescents,” *Pediatrics* 138, no. 6 (December 2016), p. 4, <https://pediatrics.aappublications.org/content/pediatrics/138/6/e20161878.full.pdf>.

⁸ California Health Care Federation, “Mental Health in California: For Too Many, Care Not There,” *California Health Care Almanac*, March 2018, p. 18, <https://www.chcf.org/wp-content/uploads/2018/12/MentalHealthCA2018.pdf>.

⁹ “Smartphones, Teens, and Unhappiness,” interview by Jill Anderson, Harvard EdCast, June 20, 2018, <https://news.harvard.edu/gazette/story/2018/06/gse-phones-study/>.

learning.”¹⁰ Maintaining a safe environment is part of a school’s overall purpose, the association says, and school leaders must create “a safe and nurturing school environment, supporting the physical and mental health of children, fostering their social and emotional well-being, and being prepared to address teen suicide through effective communication and support.”

DISCUSSION

The Grand Jury found in its investigation that students throughout the county share similar mental health and wellness issues. These problems are not specific to one school, or one area of the county. While the underlying stressors vary widely from struggles of poverty to goals of high achievement, Marin educators interviewed by the Grand Jury report increasing levels of anxiety and depression among their students. In the 2019–20 school year, the San Rafael High School District conducted 73 assessments of students out of concern that they might take their own lives.

According to Superintendent Jim Hogeboom:

Teachers, support staff and administrators are having to counsel students daily on coping skills and on developing appropriate social emotional competencies, something that we have not been trained to do but that has now become an absolute necessity. The world has changed radically since the turn of the century, and life is much more complicated now. Our teachers, our support staff and our administrators have done a simply amazing job in rising to this challenge, and they all deserve our sincere thanks and appreciation. But we are now at a breaking point for our system.¹¹

As shown in Table 1, the Marin high schools differ substantially in the resources they are able to spend per student. Per student funding varies by district based on property tax receipts, parcel taxes, state aid, and donations raised by school foundations.

Table 1 also shows the difference in the demographics across the schools. Different student populations require different services. As noted above, newcomers bring different needs to the districts, especially San Rafael and Novato. English-language learners require more attention in some districts than in others. According to the 2017–18 *California Healthy Kids Survey*, Hispanic students in Marin reported higher levels of chronic sad or hopeless feelings than did white students.¹² According to a Marin County Suicide Prevention Community Survey, black and Hispanic respondents had attempted suicide at higher rates than the overall survey population.¹³

¹⁰ National Association of Secondary School Principals, “Mental Health in Middle Level and High Schools,” accessed May 1, 2020, <https://www.nassp.org/policy-advocacy-center/nassp-position-statements/promoting-mental-health-in-middle-level-and-high-schools/>.

¹¹ Jim Hogeboom, “Marin Voice.”

¹² California Department of Education, *California Healthy Kids Survey*, p. 55.

¹³ Roberta Chambers, David Klauber, and Ryan Fukumori (Resource Development Associates), *Marin County Suicide Prevention Strategic Plan*, prepared for Marin County Behavioral Health and Recovery Services, January 2020, p. 42, https://www.marinhhs.org/sites/default/files/files/servicepages/2020_01/marin_county_suicide_prevention_strategic_plan-final-jan_2020.pdf.

Table 1. A Comparison of Marin County High Schools’ Demographics and Funding

School	Enrollment	Black	Hispanic	White	English Language Learners	“Socio-Economically Disadvantaged”	Annual Per-Student Funding
Tamalpais District							
Drake	1,301	1.0%	12.9%	75.4%	1.5%	11.3%	\$18,254
Redwood	1,928	1.5%	14.2%	70.9%	2.2%	8.5%	\$16,557
Tam	1,591	3.3%	10.4%	69.4%	2.6%	10.2%	\$16,406
San Rafael District							
San Rafael	1,333	0.7%	66.5%	27.6%	24.3%	65.6%	\$12,333
Terra Linda	1,230	1.5%	43.3%	43.8%	12.5%	41.9%	\$12,297
Novato District							
Novato	1,410	2.8%	38.1%	46.7%	8.2%	38.0%	\$11,358
San Marin	1,135	1.5%	29.9%	54.4%	5.9%	26.1%	\$11,428
Shoreline District							
Tomales*	138	0.0%	62.3%	31.9%	23.9%	44.9%	\$26,914

Note: Demographics figures are 2018–19, except for Tomales High, which are 2017–18. Revenue figures are for the 2019 reporting year.

*Shoreline district has low student enrollment, resulting in high per-student revenue but low total funds to support its schools.

Sources: Demographics: California Department of Education, “School Accountability Report Cards; Find a SARC,” accessed April 23, 2020, <https://www.sarconline.org>. Revenue: Marin County Office of Education.

Disparities in School Funding

The state’s Local Control Funding Formula sets a base amount of funding per student, and then provides an additional amount according to districts’ percentages of English learners, low-income, and foster youth. If a district’s property tax revenue does not reach this total, the state provides funding to bring the district up to that level. Novato, like 90 percent of California’s districts, is such a district. “Basic Aid” districts,

where property tax revenues exceed the state funding formula level of support, can use all of those revenues to fund their schools. The Tamalpais Union and San Rafael High School districts are both Basic Aid, but San Rafael’s property tax revenues are much lower. To date, proposals for reducing disparities, such as by eliminating the Basic Aid provision or merging districts, have not succeeded.

Marin's districts and schools, the Marin County Office of Education, and the Marin County Department of Health and Human Services have employed a variety of responses to student mental health needs.

On-Campus Therapists

All of the districts reviewed by the Grand Jury employ therapists for one-on-one counseling. Typically, they meet students on a short-term basis (one session a week for six to eight weeks). Some therapists are licensed, some are interns from graduate programs or those working to complete the 3,200 hours of supervised practice required for licensure. The number of therapists and access to them differ from district to district and school to school.

- **Medi-Cal.** Federal law requires states to provide, at no cost, a range of preventive and treatment services, including mental health, to youth under 21 who qualify for Medicaid (called Medi-Cal in California). In Marin, the state contracts with the county Department of Health and Human Services. The department assigns therapists to several schools in Marin.
- **Novato Unified School District.** The Novato district contracts with Bay Area Community Resources (BACR) and North Marin Community Services to provide therapists. None of these therapists are bilingual. In 2020–21, a state grant obtained by Health and Human Services will give the district a bilingual therapist to be shared by its high schools. The district had planned to hire additional therapists if a measure to extend and increase its parcel tax had passed in March 2020, but it failed to achieve the required two-thirds approval.
- **San Rafael High School District.** Rather than contract with a service such as BACR, the San Rafael district hires its own therapists to ensure greater continuity. There are two licensed therapists and two part-time interns at Terra Linda High. San Rafael High employs a bilingual licensed therapist and two interns. A counselor from Huckleberry Youth Programs comes to the school once a week.
- **Shoreline Unified School District.** A licensed mental health counselor is on campus one day a week at Tomales High. In 2020–21, a licensed drug and alcohol counselor from the Coastal Health Alliance is scheduled to be on campus two to three days per week. A state grant will allow Health and Human Services to provide a half-time therapist to the Shoreline district, with some responsibilities at the high school.
- **Tamalpais Union High School District.** The schools in the Tamalpais district have access to considerable therapeutic resources. All three of the high schools have a wellness coordinator who is a licensed therapist (see discussion of wellness centers below). The district contracts with BACR and some community organizations for additional counseling. It also engages interns from graduate programs in counseling and social work. For instance, Drake High School has a wellness coordinator, two licensed BACR counselors, a BACR intern, and up to three graduate school interns. The Tamalpais district can make better use of graduate school interns because it has wellness staff to coordinate with the graduate schools and recruit and supervise interns. The other districts do not have that luxury.

Early and Appropriate Intervention

Therapists are important resources, but they are costly. Virtually every school official interviewed by the Grand Jury said that they could use more therapists (“and they’d be busy all day, every day,” as one said). There are often waitlists to see therapists, and administrators worry that students may not be getting the help they need, particularly those who are not eligible for Medi-Cal or covered by private insurance.

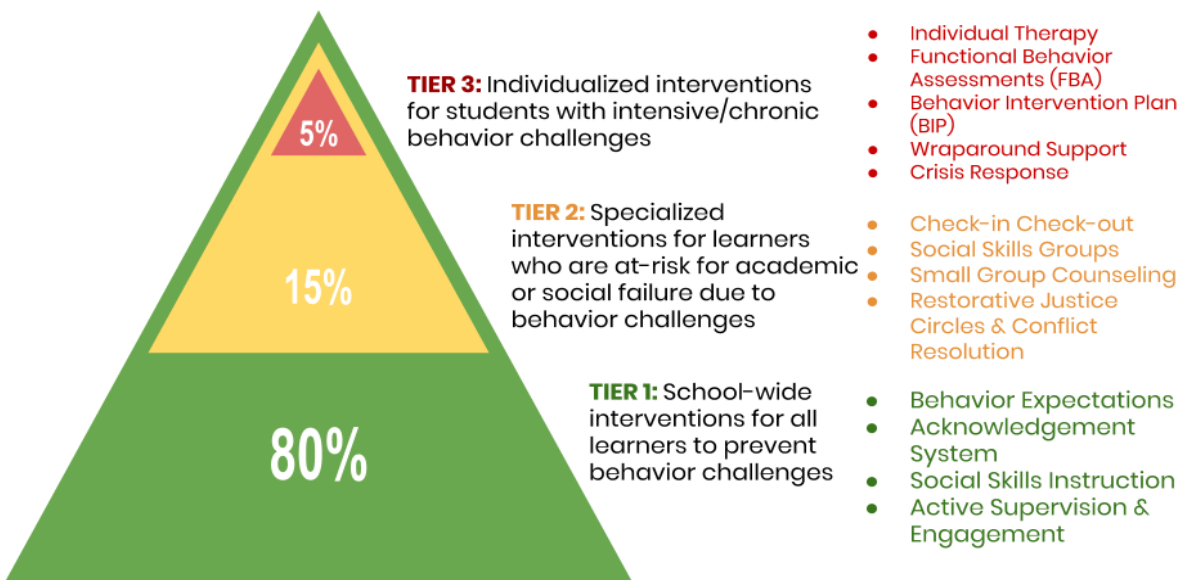
Schools are recognizing the importance of employing newer strategies that have been shown to support the mental health of all students, prevent or delay mental illness, and reduce the need for more expensive therapy. A National Research Council and Institute of Medicine report states that, although individuals who are affected by mental, emotional, and behavioral disorders “should receive the best evidence-based treatment available, interventions before the disorder occurs offer the greatest opportunity to avoid the substantial costs to individuals, families, and society that these disorders entail.”¹⁴

To this end, Marin educators have initiated a number of practices. Among them are multi-tiered support systems, staff training, and on-campus review teams.

Multi-tiered Systems of Support

The Marin County Office of Education and all of the school districts reviewed by the Grand Jury are champions of multi-tiered systems of support, as shown in Figure 1. This strategy recognizes

Figure 1. Tiers of Support



Source: “MTSS and PBIS,” Monterey Unified School District, https://www.mpusd.net/apps/pages/index.jsp?uREC_ID=1012305&type=d&pREC_ID=1322797

¹⁴ National Research Council and Institute of Medicine, *Preventing Mental, Emotional, and Behavioral Disorders Among Young People* (Washington, DC: National Academies Press, 2009), p. 1, https://www.ncbi.nlm.nih.gov/books/NBK32775/pdf/Bookshelf_NBK32775.pdf.

that different types of support are appropriate for different students and that greater attention to Tiers 1 and 2 serves more students and reduces the need for Tier 3 therapy.¹⁵

- **Tier 1** is for all students and is sufficient mental health support for perhaps 80 percent of students. Tier 1 includes schoolwide assemblies and programs, such as “Wellness Week” and “Suicide Prevention Month.” Ninth-grade classes on health or social issues present many Tier 1 topics such as coping with stress, sexual identity and activity, substance abuse, and suicide prevention. Other elements include social and emotional learning, defined by practitioners as “how children and adults learn to understand and manage emotions, set goals, show empathy for others, establish positive relationships, and make responsible decisions.”¹⁶ Tier 1 can also include teaching self-care and stress reduction techniques such as mindfulness (paying attention to the present moment without judging thoughts or feelings, rehashing the past, or imagining the future).¹⁷ Programs to remove the stigma of mental illness are designed to make it easier for students experiencing problems to seek care sooner.
- **Tier 2** is appropriate for about 15 percent of students—those who need extra help with academic and behavioral issues. Schools often address these concerns through group counseling led by a staff member, a therapist, or a service provider from outside the school.
- **Tier 3** involves the smallest number of students, maybe five percent, who would be best served by individual counseling.

Staff Training

Faculty can, with training, incorporate practices that contribute to student wellness. Novato High, for instance, has trained teachers to begin class with a quiet time in which students close their eyes, rest, and settle down before beginning lessons. Faculty and staff members, who have the most day-to-day contact with students, can learn to identify signs that students may be developing mental health difficulties or contemplating suicide. In recent years, the Marin County Office of Education and some districts have offered training in “trauma-informed practices” to help educators recognize signs of trauma that lead to inappropriate behavior rather than simply reacting negatively to the behavior.

On-campus Review Teams

To give more systematic and consistent attention to individual students, Terra Linda High School has created teams involving therapists, counselors, administrators, and teachers who meet weekly to identify, review, and assess at-risk students, determine what support is most appropriate, and track results. San Rafael High’s Crisis Response Team and Novato High’s Student Review Team serve similar functions.

¹⁵ PBIS Rewards, “What Is MTSS?,” accessed April 9, 2020. <https://www.pbisrewards.com/blog/what-is-mtss/>.

¹⁶ The Collaborative for Academic, Social, and Emotional Learning, “What Is Social and Emotional Learning?,” accessed April 17, 2020, <https://casel.org>.

¹⁷ The Greater Good Science Center, “What Is Mindfulness?,” accessed May 22, 2020, <https://greatergood.berkeley.edu/topic/mindfulness/definition>.

Support for Newcomers

Marin schools face challenges addressing the academic and wellness needs of a significant “newcomer” population. In 2019–20, Marin schools enrolled more than 400 newcomer students, mostly in the San Rafael City and Novato Unified Districts. Newcomers are recently arrived immigrant youth, often from Central America and usually unaccompanied by family. They are mostly non-English speakers, and many have fled violence and exploitation, both in their home countries and on their perilous journeys. These students arrive with a wide range of academic needs, as many have had irregular formal education. Most newcomers have experienced significant trauma and are at risk for long-term mental health challenges.

Novato Unified employs two district-wide newcomer coordinators to support this population. Huckleberry Youth Programs hosts groups for newcomers at San Rafael High, and the San Rafael district plans to add a newcomer coordinator in 2020–21 through a state grant to Health and Human Services. Marin educators strive to integrate younger newcomers into the general population at their schools, but older newcomers create a particular challenge as these students will be unable to accrue the necessary credits for graduating and often have significant financial debts or responsibilities. The San Rafael High district is creating a “bridge” program for these newcomers that will connect them to community college and technical training opportunities.

Wellness Centers and Wellness Campuses

From 2016 to 2018, the Tamalpais Union High School District opened wellness centers in its three high schools. Other districts have created their own variants. A wellness center is a physical space. It is also a set of resources, programs, and practices.

Tamalpais Union High School District. The Tamalpais district wellness centers are modeled after those in San Francisco, which opened its first centers in 2000–01 and now has wellness centers on 19 high school campuses. According to the San Francisco Unified School District, its centers are designed to “help teens gain the skills they need to cope with complex issues such as stress, trauma, suicide, bullying, depression, self-esteem, drug and alcohol use, sexual health and relationships. Students learn positive, lifelong habits that contribute to their well-being and success, and ultimately, to the health of the communities in which they live.”¹⁸

In August 2014, the Tamalpais district hired a wellness director to create and oversee its wellness centers. Each school’s wellness center is staffed by a wellness coordinator who is a licensed therapist. The coordinator oversees the center’s operation and programming, counsels students, supervises interns, and serves as liaison with community service providers. A second staff member, an outreach specialist, holds at least a bachelor’s degree. This person is typically the first adult seen by a student entering the center. The outreach specialist checks in with the student and performs a triage to help the student connect with the support needed.

The wellness centers are open to all students, and their services are free. The centers include spaces where students can drop in, with comfortable furniture, pillows and blankets, art supplies, and hot tea. Additional rooms are available for group meetings and counseling. The centers are stocked with pamphlets and other literature about a range of issues from anxiety to safe sex.

¹⁸ San Francisco Unified School District, “San Francisco Wellness Initiative,” accessed April 10, 2020, <https://sfwellness.org>.

The wellness centers focus their efforts on four areas: physical health, mental health, substance use and abuse, and sexual health. They offer Tier 1 presentations in classes, workshops, poster campaigns, film series, and schoolwide events. They also offer parent education programs and professional development for staff. Among Tier 2 groups are LGBTQ+ support, intervention for students discovered with drugs or alcohol on campus, grief support, and healthy relationships.

Through the wellness centers, the Tamalpais district offers substantial Tier 3 therapeutic support. Besides the on-staff wellness coordinator and interns from graduate programs, the district contracts with Bay Area Community Resources for therapists, Huckleberry Youth Programs for substance use and abuse counseling, the Marin City Health and Wellness Center for work with African American students, and the Spahr Center for LGBTQ+ counseling.

The wellness centers receive more than 100 hours a week in donated services from community organizations. For instance, Community Violence Solutions provides counseling for students who have been victims of sexual assault and violence. The Marin Community Clinic offers sexual health program services. Hospice by the Bay leads grief and loss groups. Pet Partners brings therapy dogs to campus.

According to an independent evaluation of the wellness program at Redwood High School, published in 2018, “about 40 percent of the students surveyed reported that they would have received *no* services were it not for the presence of the Wellness Center at their school, underscoring the critical accessibility the Center provides.” More than 60 percent said they were better able to manage stress and to cope when things go wrong and were more satisfied with life as a result of participating in the wellness program.¹⁹

The Tamalpais model is impressive—and costly. Staffing (the district wellness director and the two staff members at each school) costs about \$700,000 a year, in addition to the counseling contracts with Bay Area Community Resources and other local organizations. The district is in the first year of a three-year \$672,000 (\$224,000 per year) Tobacco Use Prevention Education (TUPE) grant. When the wellness programs were threatened with budget cuts in 2016 and 2019, parents and students launched petition campaigns, packed school board meetings, and averted major cuts.²⁰ Parent groups at each school demonstrate their confidence in the programs by contributing substantial funds to wellness-related activities. Everything from supplies to stipends for interns is paid for by the school foundations.

The Grand Jury does not foresee these kinds of resources becoming available to other districts anytime soon, and commends those districts for their creativity in developing alternatives within their resources.

Novato Unified School District. At Novato High, a group of students began asking “Where’s our wellness program?” after losing classmates to suicide. Assisted by sympathetic school staff and parents, they lobbied administrators and the board of education.

¹⁹ John Shields, “THUSD Wellness: Evaluation Update,” January 23, 2018,

https://drive.google.com/file/d/0B8_HKLilSdqIYi1xbXBYOHdscEdleWVQbHUwNnkycGVTTC1Z/view.

²⁰ Janis Mara, “Tamalpais Union Board Votes to Extend Wellness Program,” *Marin Independent Journal*, May 11, 2016, <https://www.marinij.com/2016/05/11/tamalpais-union-board-votes-to-extend-wellness-program/>; Nina Geoghegan, “Model Giant Josh Chan Works Hard to Improve Mental Health at Redwood,” *Redwood Bark*, April 20, 2020, <https://redwoodbark.org/59832/culture/lifestyles/model-giant-josh-chan-works-hard-to-improve-mental-health-at-redwood/>.

School authorities had looked at wellness centers in the Tamalpais district and elsewhere and concluded that they were beyond their means. They created an alternative model in a space that had opened up on campus. Students have felt free to call the space a “wellness center,” though administrators have been careful not to use the term, believing that a wellness center requires the kind of staffing that is considered essential in the Tamalpais district. The space’s official name is East Annex (EAST is an acronym for “Emotional and Social Teams”—a name chosen by students—and the space is in the east part of the campus).

Another reason for not using wellness-center language is the belief of some administrators that “wellness campus” is a better approach. Vice principal Michelle Cortez told the school newspaper, “I don’t believe in talking about the East Annex by itself. I believe in talking about a wellness campus with a dedicated East Annex. ... a room doesn’t solve anything, all of us have to think differently on how we hold safe places. As a school we have been adopting wellness campus types of slogans. The East Annex is a dedicated place where some of these activities can happen, but it shouldn’t be divorced from the whole campus.”²¹ The school’s January 2020 Midyear Wellness Report lists “Culture of Caring and Wellness for All” at the top of its shared values.²² The school’s motto is “Be kind. Be responsible. Be well.”

To provide staffing support for the center, the school used grant money and funds from the Parent Teacher Student Association to increase the hours of the school’s wellness and restorative practices coordinator. Such creative funding is commendable, but it means that staffing is year-to-year and resources are unstable. The space is a classroom-sized open area with adjoining offices used by the wellness and restorative practices coordinator, therapeutic counselors, and the assistant principal, who has substantial other responsibilities.

The wellness and restorative practices coordinator leads restorative practices circles in collaboration with the school resource officer. The intent of restorative practices is to repair harm and restore relationships instead of resorting to such punitive measures as suspension. She also reaches out to community resources that can offer services, from teaching yoga to providing group therapy. The Bay Area Community Resources counselors lead groups on topics such as stress and anxiety and healthy relationships, and do individual counseling.

When a group of concerned students asked to establish a system of peer counseling to help their classmates, the school arranged for them to take an eight-hour class in mental health first aid offered for adult educators at the Marin County Office of Education.

Before the COVID-19 shutdown, each of these students spent an elective hour every day as a receptionist at the East Annex. School staff described these students as teacher assistants, greeting classmates and inviting them to relax and de-stress. These assistants are supposed to direct students experiencing problems to an adult who can help. This is different than in the Tamalpais district, where it is an adult who greets students, assesses them, and connects them with the services they need. Administrators told the Grand Jury that establishing an adult presence in centers that do not have one should be a priority when support can be found.

²¹ Elsa Dunn, “New East Annex Focusing on Wellness,” *The Swarm*, October 11, 2019, <https://novatoswarm.org/807/news/new-east-annex-focusing-on-wellness/>.

²² Novato High School, “All In: Embracing a Whole-Campus Approach toward Wellness,” accessed July 8, 2020, https://1hx8pw3oma4j34hw0i374pbp-wpengine.netdna-ssl.com/wp-content/uploads/sites/12/2020/02/NHS-Wellness-Report-19_20-midyear-.pdf.

San Marin’s approach to student mental health has been different than at Novato High School even though the two schools are in the same district. San Marin’s use of peer-to-peer resources is limited to academic support. There is no wellness center, though there was a mid-year plan (postponed after the COVID-19 shutdown of the campus) to create a drop-in space using part of the school library for students needing to de-stress. The restorative practices coordinator would be located there.

San Rafael High School District. San Rafael High School has created a wellness center on campus, a comfortable space with couches, art supplies, and a calm atmosphere. There are three therapy offices, but the doors are often closed. There is no staff in the center, so there is no one to greet and triage students. The administration hopes to train a member of the school staff to serve as a receptionist who can help direct students to services. Although there is presently no physical wellness center at Terra Linda High School, administrators hope to create a space in the new two-story Student Commons scheduled to be completed in December 2020.

Shoreline Unified School District. The Shoreline district includes “develop the student wellness center” in the draft statement of 2019–24 goals on its website.²³

Virtual Wellness in the Time of COVID-19

With shelter-in-place orders in spring 2020, students were faced with closed campuses, remote learning, and canceled sports programs. School officials reported that mental health issues were compounded by loneliness, grief at missing end-of-year activities and celebrations, financial uncertainty for some, and added stresses in families confined in close spaces. Districts stepped up to continue or increase wellness programming. District websites provided links to resources. Therapists reached out to continue counseling with students by phone or video conferencing. Teachers noted students who were not checking in to online learning sessions, and counselors, administrators, special education case managers, and other staff members followed up. Schools arranged for everything from food distribution to hot spots for students without internet connections.

The Tamalpais district wrote students and parents to announce the launching of a Virtual Counseling & Wellness Center, including a password-protected Wellness Community Zoom Room where students could engage with each other, get instructions on connecting with a counselor, or receive information on drugs, alcohol, or sexual health. The district arranged for a counselor from Huckleberry Youth Programs to lead online groups where seniors from each of the high schools could talk about the disruption and loss they were experiencing with the truncation of their final months of high school.

²³ Shoreline Unified School District, “Draft Shoreline District Goals 2019–2024,” accessed April 28, 2020, <http://shorelineunified.org/files/SUSD%20Goals%202019-2024.pdf>.

Suicide Prevention and Response: A Countywide Collaboration

Marin schools' efforts related to suicide have been extensive and ongoing, and the need for them was underscored by the four suicides of Marin high school students from 2017 to 2019.

Throughout, these efforts have been marked by collaboration among the Marin County Office of Education, the school districts, Health and Human Services, and community service providers.

In 2017, Health and Human Services, Kaiser Permanente, the Marin County Office of Education, and Marin school districts jointly published *Crisis Response: Suicide Prevention and Postvention Protocols* as a guide to establishing procedures to prevent, intervene in, and respond to suicide.²⁴ In 2018, representatives of the Office of Education introduced the *Crisis Response* recommendations in some 20 presentations to staff members at 30 schools. The publication has been regularly revised and updated, most recently in February 2020.

Schools observe Suicide Prevention Month in September with programs and presentations, including student-led activities. Suicide prevention is an element of much of the schools' wellness programming throughout the year, with special attention to teaching staff members and students to recognize signs that someone may be contemplating suicide and defusing the stigma about talking about suicide.

A Countywide Strategic Plan

In recognition that suicide is a public health issue deeply affecting Marin residents and communities, Health and Human Services convened community members in October 2018 to initiate a countywide suicide prevention strategy. Among the partners in the process were Health and Human Services, the Office of Education, school districts, Buckelew Programs, Kaiser Permanente, MarinHealth, Marin Community Clinics, the National Alliance for Mental Health, the Probation Department, and the Marin County Youth Commission. The 15-month process resulted in the release in January 2020 of the *Marin County Suicide Prevention Strategic Plan*.²⁵ It was approved by the board of supervisors in February 2020. Health and Human Services hired a coordinator for the initiative in June 2020. The three-year to five-year initiative identifies seven core strategies with numerous objectives, activities, and recommended partners, including Strategy 6, "Foster Safe and Healthy Environments on All School Campuses."

According to the strategic plan, "Marin County will support all schools to expand and strengthen existing wellness and suicide prevention activities with the goal of building safe and healthy environments for students."²⁶ This plan was released at a time when awareness of the COVID-19 pandemic and its impact on county government were only emerging, but the Grand Jury believes that the county's commitment remains an important foundation for ongoing collaboration around mental health efforts in Marin schools.

²⁴ Marin County Health and Human Services, Kaiser Permanente, Marin County Office of Education, and Marin County School Districts, *Crisis Response: Suicide Prevention and Postvention Protocols Version 2.8* (February 2020), p. 3,

<https://www.marinschools.org/site/handlers/filedownload.ashx?moduleinstanceid=13783&dataid=14237&FileName=Version%202.8%20Crisis%20Response%20Document.01-2020.SansPagetwo.pdf>.

²⁵ Roberta Chambers, David Kluaber, and Ryan Fukumori, *Marin County Suicide Prevention Strategic Plan*.

https://www.marinhhs.org/sites/default/files/files/servicepages/2020_01/marin_county_suicide_prevention_strategic_plan-final-jan_2020.pdf.

²⁶ Roberta Chambers, David Kluaber, and Ryan Fukumori, *Marin County Suicide Prevention Strategic Plan*, p. 88.

Some of the objectives and activities proposed in Strategy 6, such as “Implement trainings and education on screening and assessment of suicide risk,” are specifically aimed at suicide prevention. However, many are directed at broader mental health goals, including promoting resiliency, teaching coping skills, creating supportive relationships, and facilitating access to resources. This is a reminder that suicide prevention and mental health programming are not separate endeavors. Among the proposals with broader application are the following:

- Through collaboration with county, district, and community partners, support school districts in the implementation of a three-tiered continuum of supports in all schools
- Develop recommendations around adopting evidence-based Tier 1 supports such as mindfulness and Social Emotional Learning
- Enhance the provision of individual and group mental health services to students, including targeted strategies for LGBTQ+ and justice-involved youth
- Develop standardized recommendations and guidelines for schools to implement coordination of services teams to streamline referral process and increase access to mental health supports for students
- Provide schools with mini-grants and/or funding supports to implement youth-led suicide prevention and mental health awareness activities
- Increase family education and provide resources around suicide prevention and mental health

Several of the potential performance measures in Strategy 6 would also be appropriate tools for measuring schools’ progress in mental health programming. They include the following:

- Number of full-time, on-campus mental health counselors located in each school/school district
- Number of schools implementing standardized guidelines for coordinating student mental health services
- Number of youths trained and active as peer mentors
- Number of families participating in educational events or other suicide prevention programs

The Marin Schools Wellness Collaborative is expected to take the lead in implementing Strategy 6 when school resumes in fall 2020. The collaborative, which began meeting in fall 2019, is an expansion of the partnership formed in 2017 to develop protocols in response to student suicides. It provides a forum to discuss best practices to enhance wellness programs and systems of mental health and support in Marin’s middle and high schools. It is co-chaired by an Office of Education assistant superintendent and the Tamalpais Union High School District wellness director. It also includes a representative from Health and Human Services; school psychologists, therapists, and staff from the school districts; the executive director of the Marin chapter of the National Alliance for Mental Health; and additional community stakeholders.

Others on the list of recommended partners for Strategy 6 activities are many of the organizations that the Grand Jury believes are crucial to community support for mental health programs in the schools. They include Kaiser Permanente, community health clinics and primary

care providers, Buckelew Programs, the Spahr Center, the Marin County Youth Commission, and community-based organizations serving youth and families.

The development of the suicide prevention strategic plan demonstrates Marin County’s ability to respond as a whole community. The Grand Jury believes that the activities, performance measures, and partners identified in Strategy 6 can help support schools in responding to their students’ mental health needs. Having the collaborative already scheduled to take responsibility makes this the best near-term opportunity for addressing these needs.

Additional Community Support for Schools

Sources for support of Marin’s school districts include community service providers, the Marin County Office of Education, and the Marin County Department of Health and Human Services. But services are often not coordinated. Schools are not always aware of help they could receive, and potential helpers do not always know how to work most efficiently with the schools.

Community Service Providers

Numerous agencies in Marin are willing to support the schools. As noted earlier, the Tamalpais district receives more than 100 hours a week of donated services for its wellness centers. The centers can take advantage of these resources because they have staff members who can assess needs, identify and connect with agencies, coordinate schedules, and evaluate relationships. Many schools or districts in Marin do not have wellness coordinators, so the responsibility falls on the principal or other administrators with substantial other responsibilities. “It’s left to chance that some people have an abundance of resources and some have a dearth,” in the opinion of one administrator, who said that making these agencies’ resources more widely available would be “a game changer.” The Grand Jury believes that finding a way to better coordinate between schools and community agencies should be a high priority.

Marin County Office of Education

People have long noted the curious situation of Marin’s 18 separate school districts in a moderately sized county; proposals are made regularly to merge districts in order to make better use of limited resources.²⁷ The Grand Jury is aware of the challenges such proposals face—they would have to be approved by the districts’ voters. Given this situation, the Marin County Office of Education plays an important role in providing shared administrative services to Marin’s school districts, thus saving them significant costs. The Office of Education also facilitates mental health programming, primarily under the direction of an assistant superintendent whose chief responsibilities are special education in the school districts and the Marin County Special Education Local Plan Area, which offers programs on 22 campuses.

Among the Office of Education’s trainings for staff and families related to wellness and mental health are High: Everything You Want to Know about Drugs, Alcohol, and Addiction; Parent Education: Affluence, Pressure, and Academic Expectations; Trauma Informed Practices with an Equity Focus; Mental Health First Aid; and No Bully: How to Bully-Proof Children in Their

²⁷ Dick Spotswood, “Marin Education Board Would Be a Good Start in Cutting Special Districts,” *Marin Independent Journal*, August 17, 2019, <https://www.marinij.com/2019/08/17/dick-spotswood-marin-education-board-would-be-good-start-in-cutting-special-districts/>.

Lives and the Digital World. During 2019–20, the office introduced a suite of online role-play simulation programs for school staff to support intervention with students in distress.

SchoolsRule–Marin

SchoolsRule was launched in 2010 under the leadership of the Marin Superintendent of Schools as one way to help reduce disparities between districts' revenues.²⁸ Virtually every district in the county, as well as many individual schools, has a foundation to support its schools. Foundations in more affluent areas are capable of raising considerably more money, sometimes in the millions of dollars. To combat this inequity, SchoolsRule solicits corporate and individual donors, and then distributes the funds to the school foundations on an equal per-student basis. The San Rafael and Novato districts, the county's largest, receive the largest distributions. The amount raised annually increased from \$220,000 in 2012 to \$1 million in 2019.

Marin County Department of Health and Human Services

The Department of Health and Human Services, primarily through its Division of Behavioral Health and Recovery Services, offers mental health support to schools under several programs. They are funded through a combination of federal, state, and county sources, and are sometimes mandated by federal or state legislation.

Treatment for Mild to Moderate Mental Health Issues. Health and Human Services is reimbursed by the state to provide services to Medi-Cal-eligible students, but it has no legal mandate to serve other students. Some school officials have expressed to the Grand Jury a hope that the department could provide more therapists to the schools, but county officials say that they do not have the resources to offer services for which they are not compensated through contracts or grants. They say they will respond to students with immediate mental health needs but cannot take responsibility for their ongoing treatment.

Mobile Crisis Team. The department's mobile crisis team responds to mental health and substance abuse crises throughout the county.²⁹ For instance, it offered on-campus counseling to students and staff members after a student suicide and after a fatal automobile accident involving high school students.

Additional Support. The department provides mini-grants to schools to develop youth-led mental health activities such as Mental Health Month in May and Suicide Prevention Month in September. When Novato High was organizing its wellness space in the East Annex, Health and Human Services provided about \$10,000. The department provides consultation and administrative support to schools and assists with mental health-related grant applications. It also offers training, including mental health first-aid classes for providers, families, and community members.

²⁸ SchoolsRule–Marin, "Our Mission in Action," accessed April 4, 2020, <https://schoolsrule.org/about/mission-statement/>.

²⁹ Marin County Department of Health and Human Services, Mobile Crisis Response Team brochure, accessed March 29, 2020, https://www.marinhhs.org/sites/default/files/files/servicepages/2018_02/mcrt_brochure_final_english.pdf.

Major Grant-Supported Initiatives

Mental Health Services Act

In November 2004, California voters approved Proposition 63, the Mental Health Services Act, which imposes a 1 percent tax on personal income exceeding \$1 million to support county mental health programs.³⁰ Counties receive allocations for three-year periods according to a formula based on total population, number of people at poverty level, and prevalence of mental illness in the county. Within Marin’s 2020–23 allocation is \$570,000 a year for school-based health support and \$220,000 a year for newcomer support. One way to address revenue disparities between districts is to direct these kinds of funds to districts with higher needs and fewer resources. Marin’s 2020–23 focus for these funds is the Sausalito-Marín City, Shoreline, Novato, and San Rafael districts.

A Framework for Change

In 2020, Health and Human Services, the Marin County Office of Education, and the Novato and San Rafael districts applied for a new competitive state program designed to fund partnerships between county behavioral health departments and local schools to increase access to mental health services.³¹ It would have provided \$1 million a year for four years. Although Marin did not receive the grant, the application demonstrates cooperation between the schools and the Department of Health and Human Services and illustrates their common understanding of the mental health needs in schools. The Grand Jury was told that the proposal will serve as a framework for future efforts, if and when funding can be secured.

The Marin application identified several issues that the districts and Health and Human Services felt most needed attention. These include access to community resources, reduction of waitlists for therapeutic counseling, creation of systems to prioritize students with the greatest need and connect them with resources. Other issues include expanded training for teachers and other staff in early identification of problems that may be symptoms of mental health issues. The core of the grant would have provided for wellness coordinators in the San Rafael and Novato districts. The grant also called for strengthening “natural communities of wellness supports,” including parents and peer-based support systems. It proposed parent education on responding to at-risk behavior and helping students build strength and resilience.

CONCLUSION

There are serious mental health issues among high school youth in Marin County. Educators have shown great initiative and creativity in trying to address the mental health needs of their students, from finding ways to add therapists to adopting measures to reduce the need for therapists. Their work is laudable, but districts also need assistance to meet this challenge—and the school districts with fewer financial resources often have more students with unmet needs.

The wellness centers in the Tamalpais district are impressive. With their more limited resources, the San Rafael and Novato districts are creating commendable alternative approaches.

³⁰ Mental Health California, “California Mental Health Services Act (MHSA),” accessed March 29, 2020, <https://www.mentalhealthca.org/faq-1>.

³¹ Mental Health Services Oversight and Accountability Commission, *Mental Health Student Services Act—Request for Application*,” accessed March 29, 2020, <https://mhsoac.ca.gov/what-we-do/request-proposal/mhssa-rfa>.

Establishing an adult presence in these centers will be important if students are to be directed to appropriate mental health services. Meanwhile, because the Tamalpais district schools have more wellness center staffing, including full-time licensed therapists, they can take much more advantage of community agencies that offer mental health services—often at no cost—and can make greater use of therapeutic interns from local graduate school programs.

Collaborations among the Marin County Office of Education, school districts, and the Department of Health and Human Services have channeled some state funding to districts with fewer resources, and offer a vision for improving mental health services in Marin schools. The grant proposal discussed above demonstrates agreement among these agencies about several priority areas.

The recently adopted Marin County Suicide Prevention Strategic Plan presents one route to moving forward. Many of the objectives, partnerships, and activities of Strategy 6 of that plan, “Foster Safe and Healthy Environments on All School Campuses,” go beyond suicide prevention to broader goals of ensuring that all campuses have adequate mental health services and supportive resources.

Taken together, the grant proposal and the Suicide Prevention Strategic Plan provide a roadmap for improving mental health services in Marin schools.

FINDINGS

- F1. Many mental health issues result from social and cultural factors that lie outside the schools, but affect the ability of students to learn and schools to teach. This is a complex problem that the community must help address.
- F2. Strategy 6 of the Marin County Suicide Prevention Strategic Plan, which includes a promise of support by the county and designates the Marin Schools Wellness Collaborative with responsibility for leading its implementation, presents an especially appropriate opportunity for addressing mental health needs.
- F3. To help provide therapeutic counselors at affordable costs, most districts need assistance from licensed therapists who have the time and skills to recruit, train, and supervise interns from local graduate school programs.
- F4. Most districts need staffing help to identify, arrange, and maintain relationships with community mental health resources.
- F5. The Grand Jury recognizes that the COVID-19 pandemic has severely strained resources at all levels of government. However, the mental health concerns for students will remain. It is appropriate to expand teacher and staff training and parent education even while funding is sought for more costly programs.

RECOMMENDATIONS

- R1. Health and Human Services and the Marin County Office of Education should direct the Marin Schools Wellness Collaborative to begin implementation of Strategy 6 of the Suicide Prevention Strategic Plan in the fall of 2020.

- R2. When funding becomes available, Marin County Office of Education should employ a full-time licensed therapist whose job is to help coordinate wellness services in the schools. Responsibilities would include finding and supervising interns.
- R3. As soon as possible, Marin County Office of Education should designate staff to connect the schools with community agencies that can provide them with mental health services.
- R4. Marin County Office of Education should expand teacher and staff training and parent education around mental health issues.

REQUEST FOR RESPONSES

According to the California Penal Code, agencies required to respond to Grand Jury reports generally have no more than 90 days to issue a response. It is not within the Grand Jury’s power to waive or extend these deadlines, and to the Grand Jury’s knowledge, the Judicial Council of California has not done so. But we recognize that the deadlines may be burdensome given current conditions caused by the COVID-19 pandemic.

Whether the deadlines are extended or not, it is our expectation that Marin's public agencies will eventually be able to return to normal operations and will respond to this report. In the meantime, however, public health and safety issues are of paramount importance and other matters might need to wait.

Pursuant to Penal Code Section 933.05, the Grand Jury requests responses as shown below. Where a recommendation is addressed to multiple respondents, each respondent should respond solely on its own behalf without regard to how other respondents may respond.

From the following governing bodies:

- County of Marin Board of Supervisors (F1–F5, R1)
- Marin County Board of Education (F1–F5, R1–R4)
- Novato Unified School District Board of Trustees (F1–F5)
- San Rafael City Schools Board of Education (F1–F5)
- Shoreline Unified School District Board of Trustees (F1–F5)
- Tamalpais Union School District Board of Trustees (F1–F5)

The governing bodies indicated above should be aware that the comment or response of the governing body must be conducted in accordance with Penal Code Section 933 (c) and subject to the notice, agenda and open meeting requirements of the Brown Act.

Note: At the time this report was prepared information was available at the websites listed.

Reports issued by the Civil Grand Jury do not identify individuals interviewed. Penal Code Section 929 requires that reports of the Grand Jury not contain the name of any person or facts leading to the identity of any person who provides information to the Civil Grand Jury. The California State Legislature has stated that it intends the provisions of Penal Code Section 929 prohibiting disclosure of witness identities to encourage full candor in testimony in Grand Jury investigations by protecting the privacy and confidentiality of those who participate in any Civil Grand Jury investigation.