Human Services Committee

Re: Behavioral Health Challenges of Secondary School Students

Date: January 6, 2016

The Honorable Kathy Horgan

State Representative

State Capitol Building

600 East Boulevard

Bismarck, ND 58505-0360

Chairman Horgan and Members of the Human Services Committee:

My name is Darren Albrecht, Principal of Grafton High School and Superintendent of Saint Thomas School District. I am here to testify in regards to the behavioral health challenges faced in high schools.

In my years as a teacher and administrator I have participated in the changes in the communities and schools I have lived and worked in. The demands placed on the schools to manage and work with so many entities to provide a valid education for our students has been one of the biggest challenges and changes we are currently facing. So many of our students come to school with outside influences that are beyond our control and that contribute to the culture of the school on a daily basis. We have parents with limited skills to teach their children how to interact with others. We have parents with social and emotional problems that impact

what takes place in the home. We have parents with little regard to the academic progress of their student and in return we get classrooms that are sometimes caught up in managing behaviors rather than practicing sound instructional strategies to engage our students in learning.

Grafton Public School has a fifty percent rate of free and reduced students. Thirty percent of our students receive special education services. Grafton community also is home to the Life Skills and Transition Center where students of various disabilities go to receive a structured environment to assist in their daily living. We at Grafton in coordination with Upper Valley Special Education enroll roughly twenty of those students on a yearly basis. The demands on these teachers and para professionals is quite high on a daily basis due to the aggressive behaviors that are sometimes part of this classroom. We have high population of ELL students and number of migrant students. All these demographics have their own barriers and experiences outside of school that contribute to the learning that takes place in the classroom. Often those experiences are negative and have an impact on more than one student. We work hard to provide interventions and strategies to accommodate all levels, but are sometimes left with limited options when looking to provide the least restrictive environment for all our students.

I'd like to share some of the venues and obstacles students and school personnel are faced with on a daily basis: Social Networking, although it can be used for many good things within a school setting, it can also be used to ridicule and bully peers. Often this happens outside the walls of the school, but none the less follows the student into the classroom causing a lack of motivation and the inability to focus. Drug use and alcohol use by both the parent and students,

single parent homes, abuse and neglect, high school students caring for younger siblings affecting performance and attendance, students leaving the home, teenage pregnancy, gang influences, dropout, suicide and cutting to name a few. New legislation was passed to require school personnel to have eight hours of Mental Health training. This needs to extend beyond school personnel to everyone, Social Services, Juvenile Services, Police Departments anyone involved in the child's progress. School leaders have asked for help and a mandate to provide training should not serve as the fix. We need to establish a systematic approach to assist all schools in developing a process to support both the families and schools.

There are students in all grade levels in which staff do not have the capacity, training or resources to accommodate and educate in a normal school setting. We are met with external institutions that are designed to assist these students, but they are full. The consolation is to be part of a waiting list while we are left trying to manage both the child and the family behaviors. Local resources are exhausted, in speaking with school counseling and local juvenile services the one and only request they have is to have more bodies within our local human resource offices to provide timely assistance to those in need. Poverty is a staple in my community and parents have priorities when it comes to transportation and income. Getting their children to appointments much less paying for an evaluation has little or no priority in their day to day life. These services cannot fall under the umbrella of the school, we have to have partnerships and resources available for all our students.

When we are able to coordinate assistance for our students with outside agencies and have them placed, they are successful with structure and monitoring. Sometimes days, weeks, or months later students are returned to the home and to the school. Often that return to the

same environment is too soon. We are told this is due to funding, insurance or custody. The support for transition back into the home is lacking. The support for transition back into school is lacking. I would urge you to look at capacity within the state of North Dakota to house and assist students with mental health behaviors and develop a process to assist in the placement that is less cumbersome and met with so much wait time. We are in need of school based mental health assistance that brings in a long term teaching approach to our families and students.

We have also seen an increase in our students that are prescribed psychotropic medications that alter emotions and behavior that are often used to treat behavior and attention difficulties. There is a spectrum to consider when evaluating the effectiveness of these drugs on our students. Students need time to adjust to the medications, then a time to determine if the medication is improving their performance and focus. When it is determined that it is not effective we often start over making it difficult to engage that student in their learning. I can verify this based on a meeting I was in on Monday. Both parents and all their child's teachers sitting around the table discussing a plan to focus their child and keep him accountable for his daily work and completion of assigned activities. Their frustration level was very high, not necessarily with the instruction in the classroom, but the process to understand their child and help him. He has been interviewed and tested by several Psychologists, given medical assessments to determine the proper prescription, we as a team have made several adjustments to his plan and will go forward with the new one developed on Monday. After the meeting and speaking with the mother, she expressed a need for someone to work with her son to provide strategies that he could apply in his day to day school activities and to help in his

organizational skills. She relayed to me her frustration with all the psychologist they had seen, not one was really able to do anything other than test and prescribe. We find this true in the school setting as well. The recommendations the school is provided by the psychologist are strategies and accommodations that are already in place.

I understand and appreciate the magnitude of your committee and the task that lies in front of you to assist our students in North Dakota. Thank you for the opportunity to submit this testimony. I would be happy to answer any questions or provide more information if you would like.