Oklahoma's Landscape of Pediatric Mental Health: Past, Present and Future

Sara Coffey, D.O.



## Learning Objectives



Participants will explore history of mental health care in Oklahoma
Participants will learn about existing services and supports in Oklahoma
Participants will envision a future where all children and adolescents have access to quality, evidence-based care

## Oklahoma History













## OKLAHOMA DATA

20.8% of students experienced 0 ACEs.
40.3% experienced 1-2 ACEs.
16.0% experienced 3 ACEs.
22.9% experienced 4 or more ACEs.
4 lst in the Nation



## The Trauma and Learning Policy Initiative (TLPI) is a nationally recognized collaboration between Massachusetts Advocates for Children and Harvard Law School.

### Helping Traumatized Children Learn

A Report and Policy Agenda



Massachusetts Advocates for Children: Trauma and Learning Policy Initiative In collaboration with Harvard Law School and The Task Force on Children Affected by Domestic Violence

supportive school environments for children traumatized by family violence

### TRAUAMA AND LEARNING

- There is a dose-response relationship between adverse childhood experiences and student learning
- Students Are two-and-one-half times more likely to fail a grade
- Score lower on standardized achievement test scores
- Are designated to special education more frequently
- Are suspended or expelled more often







A







# Behavior VS. Treatable Illness

## 100% of Oklahoma is a Mental Health HPSA



Geographic HPSA: A shortage of providers for an entire group of people within a

Population HPSA: A shortage of providers for a specific group of people within a defined geographic area (e.g., low-income, population HPSAs in Oklahoma are low-





### Emergent Trends: Under 18 ER Encounters By Month Cerner HealthFacts Data Warehouse



Some Seasonal Trends, Uptick at ~ September each year

R450	NERVOUSNESS	
R451	RESTLESSNESS AND AGITATION	
R452	UNHAPPINESS	
R453	DEMORALIZATION AND APATHY	
R454	IRRITABILITY AND ANGER	
R455	HOSTILITY	
R456	VIOLENT BEHAVIOR	
R457	STATE OF EMOTIONAL SHOCK AND STRESS, UNSPECIFIED	
R4581	LOW SELF-ESTEEM	
R4582	WORRIES	
R4583	EXCESSIVE CRYING OF CHILD, ADOLESCENT OR ADULT	
R4584	ANHEDONIA	
R45850	HOMICIDAL IDEATIONS	
R45851	SUICIDAL IDEATIONS	
R4586	EMOTIONAL LABILITY	
R4587	IMPULSIVENESS	
R4588	NONSUICIDAL SELF-HARM	
R4589	OTHER SYMPTOMS AND SIGNS INVOLVING EMOTIONAL STATE	
F320	MAJOR DEPRESSIVE DISORDER, SINGLE EPISODE, MILD	
F321	MAJOR DEPRESSIVE DISORDER, SINGLE EPISODE, MODERATE	
F322	MAJOR DEPRESSV DISORD, SINGLE EPSD, SEV W/O PSYCH FEATURES	
F323	MAJOR DEPRESSV DISORD, SINGLE EPSD, SEVERE W PSYCH FEATURES	





### Table 4: Ratio of school psychologists, counselors, and social workers to students in Oklahoma

Professional Type	Oklahoma's Professional to Student Ratio	Recom to Stud
School Psychologist	1:3,301	1:500
School Social Worker	1:5,167	1:250
School Counselor	1:421	1:250



### nmended Professional dent Ratio

Î,Î

ī,ī



#### **Figure 1: School and District Funding for MTSS Implementation**

SCHOOLS AND SCHOOL DISTRICTS WITH FUNDING AND SUPPORT TO IMPLEMENT MTSS

OKLAHOMA SCHOOLS 1,783 total 240 with funding & support

### DISTRICTS

509 total with funding & support 14 full district wide

STUDENTS 700,000 total about 130,000 attend a school or district funded to implement MTSS

 $\widehat{\underline{\cdot}}$ 

 $\widehat{\phantom{a}}$ 

000 

\*



## Oklahoma

#### **BY THE NUMBERS**

### 687,000

Number of K-12 Students (2022 Projection)<sup>i</sup>

#### 54,000

Children with major depression<sup>ii</sup>

#### 30,000

Children with major depression who do not receive treatment<sup>iii</sup>

#### 1:3,301

**Ratio of School** Psychologists to Students (Recommended Ratio 1:500)

# hopeful futures campaign

#### 1:5,167 **Ratio of School** Social Workers to Students (Recommended Ratio 1:250)

#### 1:421

**Ratio of School** Counselors to Students (Recommended Ratio 1:250)



- Community Mental Health Act of 1963
- Terry D Lawsuit, 1996
- Mental Health Parity 2008



#### IMPROVEMENTS IN CARE

Oklahoma (46 to 28): Oklahoma had an increase in insurance coverage and access to care for youth.

The percentage of Children With Private Insurance That Did Not Cover Mental or Emotional Problems decreased in Oklahoma from 7.9% in 2017-2018 to 4.4% in 2018-2019

The percentage of Youth With Severe MDE Who Received Some Consistent Treatment increased from 23.5% in 2017-2018 to 33.6% in 2018-2019.





## Moving Forward



249 families in Cohort 3 are already receiving services and 91 families are approved. In total, 37% of Cohort 3 is approved or already receiving services.

### **DDS WAITLIST COHORT 3**

### MOVED TO SERVICES

 Receiving Services — 27% (249) • Approved — 10% (91)

 Application In Process — 15% (135) • Asked to Stay on Waitlist — 1% (12)

#### NOT PURSUING SERVICES

 Declined — 9% (83) Refused to Cooperate — 2% (20) Selected an Alt. Service — 4% (35)

#### NO LONGER NEED SERVICES

 Deceased — 1% (13) Incarcerated — 0% (0) Lives Out of State — 2% (15) Didn't Qualify — 2% (21)

#### **DID NOT CONNECT**

• Didn't Locate — 7% (59) • Didn't Respond — 20% (181)

School Counselor Corps adds more than 300 counselors, mental health professionals to Oklahoma public schools...



OKLAHOMA Education





### City of Tulsa and Tulsa Public Schools receive \$13 million grant for mental health services



City of Tulsa and Tulsa Public Schools receive \$13 million grant for mental health services (KTUL)

## Oppurtunties for Oklahoma

### **SECTION THREE: OPPORTUNITIES FOR OKLAHOMA**

In this section, we compare Oklahoma's multi-tiered system of supports (MTSS) implementation initiatives to the core set of seven elements that were shared by the four national exemplars we reviewed and are included in the Center on Positive Behavioral Interventions and Supports' State Systems Fidelity Inventory. The core elements we used for comparison are outlined below:

- 1. Legislation to support MTSS,
- 2. State and Every Students Succeeds Act planning,
- 3. Blended or braided funding,
- 4. Alignment of state efforts,
- 5. Training and technical assistance,
- 6. The use of demonstration or pilot projects to test and refine the model, and
- 7. The development of sufficient workforce capacity.



## Meeting Children Where they are



Schools provide a safety net for many children in need.



Often times behavioral health concerns first present in school based settings



Effective partnerships can help foster emotional wellbring

# THANK YOU





