



# Advocates for Children of New York

Protecting every child's right to learn

## Testimony to be delivered at the NYC Department of Health and Mental Hygiene Behavioral Health System Planning Forum

September 15, 2014

Thank you for the opportunity to provide input on ways to improve the mental health system for New York City's children and youth. My name is Bernard Dufresne and I am a staff attorney at Advocates for Children of New York. Since 1971, Advocates for Children of New York has worked to promote access to the best education New York can provide for all students, especially students of color and students from low-income backgrounds. Each year, we help thousands of parents navigate the education system, and we receive numerous calls about students, from preschool through high school, who are being suspended or excluded from school due to their behavior or inappropriately being sent to the Emergency Room. Advocates for Children works to help these students get the support they need to address their behavior and succeed in school. We are also a member of the Campaign for Effective Behavioral Health Supports for Students, a working group of advocates and behavioral health clinicians pushing for increased behavioral health supports in schools.

During the 2012-2013 school year, over 3,600 calls were made by NYC schools to EMS for disruptive-related behaviors, and the DOE issued over 53,000 suspensions. In many instances, when schools called EMS, students were seen by a treating psychiatrist and released on the same day. In our work, we have seen scenarios where school staff has called 911 for a student only to have the police and Emergency Medical Technician arrive at the school and determine that the student does not require their services. Similarly, we have seen schools unable to meet students' behavioral needs resort to exclusionary disciplinary practices, such as suspensions and classroom removals, that do not address underlying behavioral and mental health issues and, instead, contribute to the school-to-prison pipeline. Other students, while not removed from the classroom, fail to receive the appropriate emotional and behavioral supports they need to succeed academically.

When students are in crisis or exhibit behavioral challenges, schools often do not have the resources and training to respond appropriately. Just the other day, we received a call from a parent whose fourth grader was taken out of school for being "insubordinate" and walked home by the guidance counselor and parent coordinator and another call about a school that had illegally placed a kindergarten student with a disability on a half-day schedule for months last year because the school did not know how to address the student's behavior.

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We would like to offer four recommendations for the Department of Health and Mental Hygiene. First, we request that DOHMH partner with the Department of Education (DOE) to expand school-based mental health clinics. School-based mental health clinics allow students to receive necessary treatment on-site, facilitating a student's mental health care and, in many cases, when used properly, eliminating the need for the student to be suspended or transported by ambulance to a nearby hospital—a traumatic experience in and of itself for students. Where school-based mental health clinics are not available, DOHMH should work with the DOE to increase partnerships between schools and community-based clinics and hospitals. These vital linkages are a cost-effective way to facilitate referral of students in crisis into community mental health clinics and reduce the reliance on EMS removals or suspensions.

Second, DOHMH should provide training from experienced mental health professionals to school staff around trauma-informed care, positive behavior supports, and de-escalation techniques that will enable school staff to respond appropriately to students in crisis and those at the highest risk of school suspensions and referrals to EMS. DOHMH should also partner with the DOE to conduct comprehensive behavioral assessments, including Functional Behavioral Assessments, which are required for students with disabilities whose behavior interferes with their learning, and to develop Behavior Intervention Plans to address behavior using positive, developmentally appropriate practices. With proper training, school staff is in a better position to address the root causes of student behavior and reduce the reliance on exclusionary disciplinary policies that unjustly remove students from their classrooms.

Third, DOHMH should work with the DOE to establish clear protocols and procedures related to EMS calls, including guidance to school officials and school safety officers on when EMS should be called and when and how the school should implement other interventions first.

Finally, we request that DOHMH partner with the DOE to expand the number of mobile crisis response teams available for public school students. When schools do not have access to on-site mental health clinics, mobile crisis response teams, where available, provide necessary assessments, crisis intervention, counseling and referrals to community-based organizations for students who may otherwise be suspended or referred to EMS. These response teams allow multiple schools to share resources in a cost-effective and efficient manner and provide much-needed care to students in school and in their communities.



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The Department of Health and Mental Hygiene has the opportunity to play an instrumental role in shaping school mental health by working with the Department of Education to expand the mental health resources available to students and by creating policies, procedures, and training tools to respond to students with behavioral challenges to avert crisis and to respond to students in crisis. The ability to respond to students' mental health needs impacts individual students and the school community as a whole.

On behalf of Advocates for Children, thank you for the opportunity to testify and we look forward to working with the Department of Health and Mental Hygiene to support the mental health needs of our students.