

## Chapter 20

# Interdisciplinary Support Teams to Enhance Social Emotional and Behavioral Outcomes for Students With Disabilities: Project BEAMS

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### **ABSTRACT**

*This chapter highlights Project BEAMS (Behavioral Emotional and Mental Health Supports in Schools), an interdisciplinary personnel preparation program at San Diego State University. Project BEAMS is a five-year training grant funded by the Office of Special Education Programs (OSEP) to improve the preparation of school psychologists (SP) and special educators (SE) to deliver intensive, yet coordinated, interventions to address behavior and mental health. This chapter describes the training components and collaborative learning activities (e.g., core research-based courses, monthly project seminars, clinical practicum, summer institutes, and co-attendance at research conferences) that enable special educators and school psychologists to form teams that enhance academic, social-emotional, and behavioral outcomes for students with disabilities.*

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## **CHAPTER MISSION**

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## **MENTAL HEALTH NEEDS IN AMERICA'S SCHOOLS**

Mental health is a fundamental component of children and adolescents' overall health and wellbeing and is integral to academic achievement and school success (MHSAAC, 2020; OSG, 2021). Mental health includes the mental, emotional, and behavioral functioning of youth, and impacts how individuals view themselves, respond to their environments, and socially interact with others. Children need mental and emotional stability to achieve their academic potential and thrive in school. Unfortunately, nearly 20% of children and adolescents experience mental health challenges in a given school year, and recent reports indicate significant increases in debilitating mental health disorders such as anxiety, depression, and suicide ideation. In a 10-year span from 2009 to 2019, there was a 40% increase in high school students reporting continual feelings of sadness or hopelessness (OSG, 2021). Younger children (aged 2–8 years) also experience psychological distress, with nearly 18% having a diagnosed mental, behavioral, or developmental disorder (CDC, 2020). In fact, prior to the COVID-19 pandemic, mental health challenges were the leading cause of disability and poor outcomes in our youth, and this crisis has exponentially magnified in recent years with our shift to social distancing and online learning.

Exacerbated by the COVID-19 pandemic, several leading national children's health organizations (US Surgeon General, American Academy of Pediatrics, American Academy of Child and Adolescent Psychiatry, Children's Hospital Association) declared a state of emergency in 2021 due to the rise in youth mental health crises, including increases in hospitalizations for suicide attempts (ASCA, 2022). Understandably, there is an urgent call to address COVID-19 health disparities and social justice advocacy due to the higher mental health needs, especially among students with increased vulnerability due to family and community exposure to the virus and systemic inequity (Sullivan et al., 2021). In a meta-analytic study assessing global prevalence of mental health symptoms in children and adolescents, more than 29 studies provide evidence to suggest a considerable spike in youth-reported symptoms of anxiety and depression, from 11-12% pre-pandemic, to 24-25% across depression and anxiety, respectively (Racine, et al., 2021). An investigation of mental health, suicidality, and connectedness among high school students during the COVID-19 pandemic revealed that 37% reported experiencing poor mental health, with 44% indicating persistent feelings of sadness or hopelessness, nearly 20% indicating serious suicidal ideation, and 9% had attempted suicide (Jones et al, 2022). Importantly, findings suggest that among students who reporting feeling closer (connected) to persons at school had significantly lower prevalence rates of mental health symptoms compared to students with lower levels of school connect-

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