Assessing the School-based Prevention Programs and Mental/Behavioral Health Needs of Lincoln County Youth in 2019: Public Report

Lincoln County Resource Board

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Summary Findings

Thirty-two different school staff across the four public school districts (Elsberry, Silex, Troy, and Winfield) and one private school, Sacred Heart) in Lincoln County, Missouri participated in an assessment of the school-based prevention programs funded in part, or in whole, by the Lincoln County Resource Board. The school staff that were sent the survey link in April of 2019 included superintendents/principals, counselors, assistant principals, and other special school personnel that work with a majority of the student population they are representing.

Table 1. Survey Respondents by School, Grade Level, and Role

	Counselor/ Social Worker	Other School Personnel	Superintendent/ Principal	Total
Elsberry	2		2	4
Sacred Heart			1	1
Silex	1		1	2
Troy	12	4	4	20
Winfield	2		3	5
Total	**17**	**4**	**11**	**32**

Here is a summary of this information:

- Two superintendents/principals (one high school and one multiple grade levels) and two counselors (one elementary and one high school) represented Elsberry school district.
- The superintendent/principal covering multiple grade levels at Sacred Heart was their one respondent.
- One superintendent and one counselor represented the Silex school district across all of the grade levels.
- There were 20 surveys completed by Troy school staff. There were twelve counselors who responded at Troy (elementary =7, middle = 3, high =2), and fourth superintendent/principals (all at the elementary grade levels). Out of the 4 additional school staff, one was an assistant principal at the elementary grade, and three staff representing multiple grade levels.
- Winfield was represented by five school staff. One counselor and one superintendent/principal at the elementary level, with one superintendent/principal for the middle school, and one counselor and superintendent/principal at the middle school grade level.

Most Critical Behavioral/Mental Health Issues of Lincoln County Students

School personnel were asked to identify up to five of the most critical behavioral/mental health issues they believe the youth they work with encounter when trying to resolve or seek help for these issues. Findings showed that across all grade levels:

- The most critical behavioral health issue was "friend/peer relationships, social skills, problem solving, and self-esteem" (88%; N = 28 out of 32, see Table 2).
- The second most critical behavioral health issue was "anxiety, worry a lot, fear" (75%; N = 24).
- The third most critical behavioral health issue was "controlling emotions, anger management, and conflict resolution" (72%; N = 23 out of 32).

- The fourth most critical behavioral health issue was "self-harm and suicide" (59%; N = 19).
- The fifth most critical behavioral health issue was identified for "depression/sad a lot" noted by 47% of school personnel (N = 15).

When compared to the 2018 results, all five of the issues were consistently in the top, with changes in prioritization. "Friend/peer relationships, social skills, problem solving, and self-esteem" increased in 2019 to the top BH/MH issue, and "anxiety/worry a lot, fear" became the second prioritized topic.

This same data set was analyzed to determine the most critical behavioral health issue of youth by grade level, where it was found that:

- For the elementary grades, "controlling emotions, anger management, and conflict resolution" was once again rated as the most critical issue by 87% of school personnel representing these grades (N = 13 out of 13 staff), but this tied with "friend/peer relationships, social skills, problem solving, and self-esteem". The third most critical issue was "anxiety prevention and control" (N =12; 80%) followed by "abuse and neglect issues (body safety)" noted by 67% of staff (N = 10). "Coping with grief, loss, and/or divorce" came in as the 5th issue with 7 staff or 42%, and followed by "self-harm and suicide" with 40% of staff (N = 6) (see Table 5). These results were very similar to the 2017 and 2018 trends, with lower percentages experienced in 2019.
- For middle school, the highest rated issue was "self-harm and suicide prevention" (100%; N = 4 out of 4; see Table 6), and "friend/peer relationships social skills, problem solving, and self-esteem", This was followed by a tie for third highest rated issue for (75%; N=3 out of 4 middle school staff) "anxiety, worry a lot, fear", and "bullying/cyber-bullying". Again, results were similar to 2018.
- Three issues tied as being the highest rated for high school students by 83% of staff (N = 5) and included: "friend/peer relationships, social skills, problem solving and self-esteem", "self-harm and suicide", and "depression/sad a lot". "Anxiety, worry a lot, fear" was the fourth highest (67%), with "controlling emotions, anger management, and conflict resolution" still in the top at 50% (see Table 7).

Behavioral/Mental Health Prevention Program Availability and Necessity Assessment

School staff were asked to assess the availability and necessity of various behavioral/mental health prevention programs (see Table 8) in addition to community-based services for youth (see Table 9). These tables provide a wealth of information that should be reviewed for future planning and decision-making purposes. In Table 8, the reader will find the issues prioritized by need (any issue identified as a need by 90% or more of the staff members was highlighted in red). The availability of programs that address these issues begins in the 6th column, but the focus should be placed one the "% Not Available" and "Combined Limited or No Availability" columns as well. From the ten topics identified as needed by 90% or more staff, four of them had more than 65% of staff assessed them as not being available (also highlighted in red in that column). This included "anxiety/worry prevention and control (67% of staff assessed it as low/no availability)", "chronic absenteeism prevention" (86% of staff assessed as not available), "coping with grief, loss, and/or divorce training" (79% of staff assessed as low/no availability), "self-harm and suicide prevention/resources" (78% of staff), "social/emotional skills training" (67% rated as low/no availability), and "school success/school advocacy skills training" (76% of staff assessed as not available). Topics where more than 10% of staff rated it as not available should be reviewed to determine if the topic is essential for the grade levels. For example, 50% of the total staff respondents rated "healthy dating

relationships education" as not available, but this would only be an issue for the high school grades and not the elementary grades. Chronic absenteeism prevention had 57% of all staff state it was not available, and this is a topic that should be covered across all grade levels (or at least a procedure for responding to chronic absenteeism). Comments related to these prevention topics are provided by school district and grade level after Table 8.

Table 9 presents the information for the community-based behavioral/mental health services where highlighting was used to identify the top priorities by need and low or no availability as rated by staff who responded to this item. With the exception of "services for teens who are pregnant" and "drug and alcohol use/abuse prevention", every other community service was considered "needed" by 90% or more of the staff respondents. Five of these services had 79% of more of the respondents say it had low or no availability. These services were:

1. Psychiatrists, in/near the community, for students with moderate to severe social, emotional, or behavioral needs that require medications (or Psychiatric referrals to community organizations) (100% needed, 17% not available with an additional 71% limited access to youth).
2. Services for youth in crisis (100% needed, 21% not available with an additional 63% limited access to youth).
3. Psychologists, in/near the community, for students with moderate to severe social, emotional, or behavioral needs (or clinical referrals to community organization) (96% needed, 8% not available with an additional 73% limited access to youth).
4. Services for youth dealing with trauma (96% needed, 4% not available with an additional 75% limited access to youth).
5. Home or community-based services that provide housing, food, clothing, and other basic needs' items to families with children in need (93% needed, 4% not available, 75% with limited access to youth).

Additional comments by school district and grade are provided after Table 9.

Behavioral/Mental Health Service Needed the Most for Students

An open-ended question was asked to allow for a variety of comments from school staff, which was, "What behavioral/mental health services is needed the most for your students?" Staff comments by school district and grade level are presented below.

Elsberry
High School (9-12)
Counseling for anxiety, depression, and trauma.
Multiple grade levels
Chronic absenteeism is becoming a problem. I also need support or a way to find a better plan to work with the Juvenile Court System and Children's Division. We also need to find a better way to support parents and family needs.
Sacred Heart
Multiple grade levels
On-site counselor every school day.
Troy
Elementary (K-5)
Anxiety, self-regulation skills – having more personnel (their Compass counselor) at the building to assist in student's moment of crisis to possibly work with them in the moment and build the skills they are working on in session.
Consistent counseling/therapy for students and families.
Crisis Counselor at schools who can SERVICE ANY STUDENT.
Disruptive students' trauma, home life, not knowing how to express feelings, etc.
Early intervention for young students struggling with self-regulation.
Ideally, each school would have daily access to a mental/behavior health specialist.
It would be wonderful as a school district to use LCRB funds to employ a mental/behavioral health specialist full time.
On-site counselors/social workers who can service any student with skills to help them be successful at school.
Middle School (6-8)
Additional counselors, psychiatry, and social workers.
Mental health support.
Social workers, crisis counselors, outside counselors that can come into the school building.
High School (9-12)
Early intervention at a young age.
Multiple grade levels
More people.
Winfield
Elementary (K-5)
Mental Health and how to handle traumatized kids in the classroom.
High School (9-12)
More counseling and psychiatry services.

Primary barriers (if any) over the last three years staff have seen students in Lincoln County encounter when trying to address a behavioral health need/issue (Table 10)

School staff were asked to identify any barriers they have seen students encounter when trying to address a behavioral health need/issue (see Table 10). Three barriers tied as being problematic. The top barrier was once again "lack of parent involvement to assist student with the need" noted by 69% of school staff (N = 22 out of 32). The next barrier noted by 69% of the school staff (N = 22) was "lack of sufficient resources for student support services at school". Twenty-two staff (69%) identified the "lack of access to mental health professionals for service" as another top barrier.

The 4th highest rated barrier was "students have difficulty accessing services due to transportation limitations" with 63% of staff respondents, followed by "lack of time within the school day to respond to the youth with the behavioral health needs" (56% of respondents).

"Severity of students' problems" was identified by 53% (N = 17) of staff, and so was "unavailability of assessment/treatment resources in the community". One of the barrier options was "other", and these responses are listed after Table10. Due to the large sample at Troy, individual school district information for these barriers is presented in Table 10.

Agency Where Students and Parents are Referred to the Most (Table 12)

School staff were asked to identify the agency where students/parents are referred to the most (see Table 12). For the first time in 2019, a list was developed including all of the funded agencies in addition to other agencies that are not currently funded. Here are the top five referrals:

- Eighty-five percent (N = 23) of school staff refer students and parents to Compass Health Network.
- 70% of staff refer to Preferred Family Healthcare and Sts. Joachim and Ann Care Service.
- 67% to St. Louis Counseling
- 52% to The Child Center
- 41% to Life Restoration Center, which unlike the other agencies, is not currently funded by LCRB.

Tables Presenting Information

Table 2. Top Behavioral/Mental Health Issues of Youth – 2019	#	%
Friend/peer relationships, social skills, problem solving, and self-esteem	28	88%
Anxiety, worry a lot, fear	24	75%
Controlling emotions, anger management, and conflict resolution	23	72%
Self-harm and suicide	19	59%
Depression/sad a lot	15	47%
Abuse and neglect issues (body safety)	12	38%
Coping with grief, loss, and/or divorce	12	38%
Feelings of acceptance/belonging	11	34%
Housing instability/nowhere to live	9	28%
Drug and alcohol use and abuse	8	25%
Bullying/cyber-bullying	7	22%
Online safety	7	22%
Unhealthy dating relationships	4	13%
Other:	4	13%
Threats of violence or being injured by another peer	0	0%
Gang violence	0	0%
N = 32		

Other: toxic stress/trauma (Troy; multiple grades); lack of motivation/work ethic (Troy; high school); Parents with mental health issues or sub-standard parenting skills (Elsberry; middle school); and navigating parent mental health and substance abuse issues; symptoms related to past trauma (Troy; Ninth grade center).

Table 3. Top Behavioral/Mental Health Issues of Youth – 2018	#	%
Controlling emotions, anger management, and conflict resolution	45	85%
Friend/peer relationships, social skills, problem solving, and self-esteem	42	79%
Anxiety, worry a lot, fear	38	72%
Self-harm and suicide	34	64%
Depression/sad a lot	29	55%
Abuse and neglect issues (body safety)	26	49%
Bullying/cyber-bullying	25	47%
Drug and alcohol use and abuse	20	38%
Coping with grief, loss, and/or divorce	18	34%
Housing instability/nowhere to live	17	32%
Feelings of acceptance/belonging	15	28%
Online safety	9	17%
Unhealthy dating relationships	4	8%
Threats of violence or being injured by another peer	4	8%
Other:	3	6%
Gang violence	0	0%
N = 53		

*Other (not identified by grade level in table 3, 4, or 5): bipolar depression – not being able to come to school

Table 4. Most Critical Behavioral/Mental Health Issues of Youth Prioritized by Grade Level -2019

	Elem. (K-5)	Middle (6-8)	High (9-12)	Multiple	Total #	Elem. (K-5)	Middle (6-8)	High (9-12)	Multiple	Total %
Bullying/cyber-bullying	1	3	2	1	7	7%	75%	33%	14%	22%
Drug and alcohol use and abuse	2	2	2	2	8	13%	50%	33%	29%	25%
Abuse and neglect issues (body safety)	10	0	1	1	12	67%	0%	17%	14%	38%
Coping with grief, loss, and/or divorce	7	1	2	2	12	47%	25%	33%	29%	38%
Friend/peer relationships, social skills, problem solving, and self-esteem	13	4	5	6	28	87%	100%	83%	86%	88%
Self-harm and suicide	6	4	5	4	19	40%	100%	83%	57%	59%
Controlling emotions, anger management, and conflict resolution	13	2	3	5	23	87%	50%	50%	71%	72%
Anxiety, worry a lot, fear	12	3	4	5	24	80%	75%	67%	71%	75%
Depression/sad a lot	5	2	5	3	15	33%	50%	83%	43%	47%
Online safety	3	2	0	2	7	20%	50%	0%	29%	22%
Unhealthy dating relationships	0	2	1	1	4	0%	50%	17%	14%	13%
Feelings of acceptance/belonging	4	2	2	3	11	27%	50%	33%	43%	34%
Housing instability/nowhere to live	4	0	1	4	9	27%	0%	17%	57%	28%
Threats of violence or being injured by another peer	0	0	0	0	0	0%	0%	0%	0%	0%
Gang violence	0	0	0	0	0	0%	0%	0%	0%	0%
Other:	0	0	2	2	4	0%	0%	33%	29%	13%
Sample Size	15	4	6	7	32	100%	100%	100%	100%	

Other responses: see Table 2

Table 5. Top Behavioral/Mental Health Issues of Youth by Grade-2019 – Elementary	#	%
Friend/peer relationships, social skills, problem solving, and self-esteem	13	87%
Controlling emotions, anger management, and conflict resolution	13	87%
Anxiety, worry a lot, fear	12	80%
Abuse and neglect issues (body safety)	10	67%
Coping with grief, loss, and/or divorce	7	47%
Self-harm and suicide	6	40%
Depression/sad a lot	5	33%
Feelings of acceptance/belonging	4	27%
Housing instability/nowhere to live	4	27%
Online safety	3	20%
Drug and alcohol use and abuse	2	13%
Bullying/cyber-bullying	1	7%
Unhealthy dating relationships	0	0%
Threats of violence or being injured by another peer	0	0%
Gang violence	0	0%
Other:	0	0%
Sample Size	15	100%

Table 6. Top Behavioral/Mental Health Issues of Youth by Grade-2019 – Middle School	#	%
Friend/peer relationships, social skills, problem solving, and self-esteem	4	100%
Self-harm and suicide	4	100%
Bullying/cyber-bullying	3	75%
Anxiety, worry a lot, fear	3	75%
Drug and alcohol use and abuse	2	50%
Controlling emotions, anger management, and conflict resolution	2	50%
Depression/sad a lot	2	50%
Online safety	2	50%
Unhealthy dating relationships	2	50%
Feelings of acceptance/belonging	2	50%
Coping with grief, loss, and/or divorce	1	25%
Abuse and neglect issues (body safety)	0	0%
Housing instability/nowhere to live	0	0%
Threats of violence or being injured by another peer	0	0%
Gang violence	0	0%
Other:	0	0%
Sample Size	4	100%

Table 7. Top Behavioral/Mental Health Issues of Youth by Grade-2019 – High School	#	%
Friend/peer relationships, social skills, problem solving, and self-esteem	5	83%
Self-harm and suicide	5	83%
Depression/sad a lot	5	83%
Anxiety, worry a lot, fear	4	67%
Controlling emotions, anger management, and conflict resolution	3	50%
Bullying/cyber-bullying	2	33%
Drug and alcohol use and abuse	2	33%
Coping with grief, loss, and/or divorce	2	33%
Feelings of acceptance/belonging	2	33%
Other:	2	33%
Abuse and neglect issues (body safety)	1	17%
Unhealthy dating relationships	1	17%
Housing instability/nowhere to live	1	17%
Online safety	0	0%
Threats of violence or being injured by another peer	0	0%
Gang violence	0	0%
Sample Size	6	100%

Table 8. Behavioral/Mental Health PREVENTION Programs/Resources Gap/Availability Assessment (school district data made available to LCRB for planning purposes)

Topic	DK	Needed	Not Needed	N	Adj. N	DK	# Avail.	# Limited Avail.	Not Avail.	N	Adj. N	% Lmtd. Avail.	% NOT Avail.	Combined Lmtd or NO Avail.	% Needed
Abuse and neglect (body safety) prevention	1	24	2	27	26	2	18	3	1	24	22	14%	5%	18%	92%
Anxiety/worry prevention and control	0	25	1	26	26	0	8	12	4	24	24	50%	17%	67%	96%
Bullying/cyber-bullying prevention	1	22	3	26	25	0	17	6	1	24	24	25%	4%	29%	88%
Chronic absenteeism prevention	2	24	1	27	25	3	3	6	12	24	21	29%	57%	86%	96%
Coping with grief, loss, an/or divorce training	3	20	2	25	22	0	5	11	8	24	24	46%	33%	79%	91%
Counseling (at school) for students with social, emotional, or behavioral needs (depression, anxiety, anger, etc.)	0	26	1	27	27	0	10	14	0	24	24	58%	0%	58%	96%
Drug and alcohol use and abuse prevention	2	17	6	25	23	3	9	7	5	24	21	33%	24%	57%	74%
Feelings of belonging/acceptance (diversity) training	2	18	5	25	23	1	5	10	8	24	23	43%	35%	78%	78%
Online safety training	1	26	0	27	26	2	12	7	3	24	22	32%	14%	45%	100%
Self- harm and suicide prevention/resources	1	24		25	24	1	5	10	8	24	23	43%	35%	78%	100%
Social/emotional skills training (grade/age-focused)	1	24	1	26	25	0	8	11	5	24	24	46%	21%	67%	96%
Healthy dating relationships education	2	13	10	25	23	4	7	3	10	24	20	15%	50%	65%	57%
School success/school advocacy skills training	2	21	2	25	23	2	5	8	8	23	21	38%	38%	76%	91%
Other:	0	5	0	5	5	1	1	1	0	3	2	50%	0%	50%	100%

DK = Don't Know; N = Total Sample Size; Adj. N. = Adjusted Sample Size (removing don't know responses); Not Avail = Not Available; % Limited Avail. = % of staff who responded that service was available but limited to only some students; Combined Lmtd or NO Avail. = Total percentage of programs with limited AND no availability.

Other Responses:

Elsberry
Multiple grade levels
Supports for families in crisis or with low abilities to parent.
Troy
Elementary (K-5)
Assistance with food and utilities
Assistance with utilities and food, transportation for families for appointments
Food and utilities assistance
Psychiatrists so kids and parents aren't waiting so long.
Middle School (6-8)
Some type of service for incentives for students to come to school.
High School (9-12)
Early intervention services and skills training for youth first exhibiting social, emotional, or behavioral needs; Parenting education.
Winfield
Elementary (K-5)
Doubled-up and Homeless

Table 9. Community Behavioral/Mental Health Services/Resources Gap/Availability Assessment (school district data made available to LCRB for planning purposes)

Topic	DK	Needed	Not Needed	N	Adj. N	DK	# Avail.	# Limited Avail.	Not Avail.	N	Adj. N	% Lmtd. Avail.	% NOT Avail.	Combined Lmtd or NO Avail.	% Needed
Psychologists/Counselors, in/near the community, for students with moderate to severe social, emotional, or behavioral needs.	0	26	1	27	27	1	4	19	2	26	25	73%	8%	81%	96%
Psychiatrists, in/near the community, for students with moderate to severe social, emotional, or behavioral needs that require medications.	0	26	0	26	26	2	3	17	4	26	24	71%	17%	88%	100%
Home or community-based services that provide housing, food, clothing, and other basic needs' items to families with children in need.	1	25	1	27	26	1	5	18	1	25	24	75%	4%	79%	93%
Drug and alcohol use/abuse treatment.	5	21	0	26	21	4	6	15	1	26	22	68%	5%	73%	81%
Services for teens who are pregnant and/or parenting.	10	11	5	26	16	10	4	11		25	15	73%	0%	73%	42%
Services for youth in crisis.	0	27	0	27	27	1	4	15	5	25	24	63%	21%	83%	100%
Services for youth dealing with trauma.	1	25	0	26	25	2	5	18	1	26	24	75%	4%	79%	96%
Other	0	8	0	8	8	1	1	1	1	4	3	33%	33%	67%	100%

Other Responses:

Elsberry
High School (9-12)
Some resources including psychologists and psychiatrists are available in Troy, but that is 20 minutes away and transportation is a huge barrier for some of our families who need these services the most. Home or community-based services that provide assistance are available via Bright Futures and local church programs, but there is always more need. Transportation and access to employment opportunities are two big issues in the Elsberry community.
Multiple grade levels
Family support for crisis and/or parenting
Troy
Elementary (K-5)
Housing, transportation for families and youth

Primary barriers (if any) over the last three years staff have seen students in Lincoln County encounter when trying to address a behavioral health need/issue.

Table 10. Barriers Youth Face Trying to Address a Mental/Behavioral Health Need/Issue

Barriers	% of Staff	Total #	Elem. (K-5)	Middle (6-8)	High (9-12)	Multiple
Lack of parent involvement to assist student with the need.	69%	22	11	3	4	4
Lack of sufficient resources for student support services at school.	69%	22	10	3	3	6
Lack of access to mental health professionals for services.	69%	22	12	3	2	5
Students have difficulty accessing services due to transportation limitations.	63%	20	12	2	4	2
Lack of time within the school day to respond to the youth with the behavioral health needs.	56%	18	9	1	3	5
Severity of students' problems.	53%	17	9	2	2	4
Unavailability of assessment/treatment resources in the community.	53%	17	10	2	2	3
Lack of sufficient resources for special education services.	22%	7	2	2	1	2
Lack of information/training.	13%	4	2		1	1
Other	13%	4	2		1	1
Students require too many modifications/accommodations to assist.	9%	3	1	1	1	
Lack of clear, consistent, school behavior rules/policies.	6%	2	2			
Lack of support from school administration.	3%	1		1		
	100%	32	15	4	6	7

Other Barriers Identified by School and Grade Level:

Troy - Biggest Barrier for most students is need parents to follow through with paperwork that outside groups require AND workers being pulled during the time they should be at school for "team meetings".
Elsberry - Lack of parent follow through
Elsberry - Paperwork and insurance issues have been extremely problematic when attempting to refer students to Crider/Compass Health. Many of the counselors also say they cannot make contact with the families to complete the paperwork; however, school staff does not have any difficulty reaching them. It can sometimes take months for students to begin receiving services, and these are students with significant mental health concerns. Families have been directed to the Troy location to receive help enrolling in Medicare/Medicaid, however once again transportation is an issue.
Winfield - Parental support not available at times.

Table 11. Barriers by School District

Elsberry	% Staff	#
Lack of parent involvement to assist student with the need.	100%	4
Lack of time within the school day to respond to the youth with the behavioral health needs.	75%	3
Students have difficulty accessing services due to transportation limitations.	75%	3
Lack of sufficient resources for student support services at school.	50%	2
Severity of students' problems.	50%	2
Other:	50%	2
Lack of sufficient resources for special education services.	25%	1
Unavailability of assessment/treatment resources in the community.	25%	1
Total		4

All of the other barriers at 0%

Sacred Heart	% Staff	#
Lack of time within the school day to respond to the youth with the behavioral health needs.	100%	1
Lack of sufficient resources for student support services at school.	100%	1
Lack of access to mental health professionals for services.	100%	1
Unavailability of assessment/treatment resources in the community.	100%	1
Total		1

All of the other barriers at 0%

Silex	% Staff	#
Lack of time within the school day to respond to the youth with the behavioral health needs.	50%	1
Lack of parent involvement to assist student with the need.	50%	1
Lack of sufficient resources for student support services at school.	50%	1
Lack of access to mental health professionals for services.	50%	1
Lack of sufficient resources for special education services.	50%	1
Unavailability of assessment/treatment resources in the community.	50%	1
Students have difficulty accessing services due to transportation limitations.	50%	1
Total		2

All of the other barriers at 0%

Troy	% Staff	#
Lack of access to mental health professionals for services.	100%	17
Lack of sufficient resources for student support services at school.	94%	16
Lack of parent involvement to assist student with the need.	88%	15
Students have difficulty accessing services due to transportation limitations.	76%	13
Severity of students' problems.	71%	12
Unavailability of assessment/treatment resources in the community.	71%	12
Lack of time within the school day to respond to the youth with the behavioral health needs.	59%	10
Lack of information/training.	24%	4
Lack of sufficient resources for special education services.	18%	3
Students require too many modifications/accommodations to assist.	12%	2
Lack of clear, consistent, school behavior rules/policies.	12%	2
Lack of support from school administration.	6%	1
Other:	6%	1
Total	100%	17

Winfield	% Staff	#
Lack of time within the school day to respond to the youth with the behavioral health needs.	100%	3
Severity of students' problems.	100%	3
Lack of access to mental health professionals for services.	100%	3
Students have difficulty accessing services due to transportation limitations.	100%	3
Lack of parent involvement to assist student with the need.	67%	2
Lack of sufficient resources for student support services at school.	67%	2
Lack of sufficient resources for special education services.	67%	2
Unavailability of assessment/treatment resources in the community.	67%	2
Students require too many modifications/accommodations to assist.	33%	1
Other:	33%	1
Total		3

All of the other barriers at 0%

Table 12. Agency where Students/Parents Are Referred to the Most - 2019

***Compass Health Network (formerly Crider Health Center)	85%	23
***Preferred Family Healthcare	70%	19
***Sts. Joachim and Ann Care Service	70%	19
***St. Louis Counseling (formerly Catholic Family Services)	67%	18
***Child Center Inc.	52%	14
Life Restoration Center	41%	11
***Youth In Need	33%	9
***Crisis Nursery Wentzville	26%	7
***F.A.C.T. (Partnership with Families)	26%	7
***Presbyterian Children's Homes and Services	22%	6
The Sparrow's Nest Maternity Home	11%	3
Other:	11%	3
Circuit Court (local)	7%	2
***ThriVe (Best Choices)	7%	2
***Arise Equine Therapy Foundation	4%	1
CHADS for Mental Health	4%	1
Foster and Adoptive Care Coalition	4%	1
Lutheran Family and Children's Services	4%	1
NAMI St. Louis	4%	1
***Nurses for Newborns	4%	1
Bethany Christian Services	0%	0
Big Brothers, Big Sisters	0%	0
Boys and Girls Club	0%	0
Community Council (located in St. Charles)	0%	0
Community Living	0%	0
Epworth Children and Family Services	0%	0
Family Forward	0%	0
Megan Meier Foundation	0%	0
Our Lady's Inn Maternity Home	0%	0
UMSL Center for Behavioral Health	0%	0
United Services for Children	0%	0

Sample Size = 27

Troy - Ninth Grade Center	Rauscher Therapeutic Group, Nicole McNeil
Silex - Multiple grades	There are a few private counseling agencies that I refer families to as well.

Scheduling Issues

Scheduling and planning prevention programming can be difficult for the various stakeholders involved. Therefore, one open-ended item was included to assess this information, with confidential feedback that mentions an agency by name, provided to LCRB. General comments that are applicable to all of the prevention programs are included in this public report.

Troy
Elementary (K-5)
We have several outside agencies that come to school to provide services to individual students - sometimes finding a space for them to meet with students can be challenging. It would be great if they could call or come meet with the principal or counselor to prearrange visits instead of just showing up and expecting a space. It would also be helpful for the outside groups to communicate with us about who is on their caseload, goals, and who the actual workers are that should be coming. Most times we just have to take their word for it.
High School (9-12)
Greater communication and consistency from service providers in terms of schedule for seeing students would be helpful.
Winfield
High School (9-12)
In terms of scheduling, it would be beneficial to have more resources for students and families that are available outside of the school day. Many of our students often miss school due to outside counseling and psychiatrists to meet their mental health needs.

Challenges Experienced this year with the content/approach or staff that have provided LCRB-funded prevention programs at your school

	No	Yes	Total
Elsberry	3	1	4
Elementary (K-5)	1		1
High School (9-12)	2		2
Multiple grade levels		1	1
Sacred Heart	1		1
Multiple grade levels	1		1
Silex	2		2
Multiple grade levels	2		2
Troy	5	11	16
Elementary (K-5)	2	8	10
Middle School (6-8)	2	1	3
High School (9-12)		1	1
Multiple grade levels	1	1	2
Winfield	2	1	3
Elementary (K-5)	1	1	2
High School (9-12)	1		1
Grand Total	13	13	26

General Feedback Data (with no negative references to an agency)

Elsberry - Multiple grade levels
Again, thank you for the work that you do. I remember the days prior to this level of students' services being available, and it was not good. While I have shared several factors in this survey that need to be addressed, please be assured that there are many things working well. Students in my building have access to basic counseling and mental health services, especially through Youth In Need and Compass that are making a very positive difference. I am extremely appreciative of these services, and would be at a loss without them, especially when it comes to severer mental health issues/suicide/self-harm. Compass and Crider have a made a tremendous difference for many of our students and families. The need is great so continued advocacy is needed. If you have questions for me, please never hesitate to ask or employ me to help the Board.

Sacred Heart - Multiple grade levels
I am very grateful for the board's strong support of mental health services for children in our community. The longer I am an educator, the greater the need for services exists. Children come to school with a wide variety of issues that parents and educators can feel unprepared to address adequately, if at all. Having such a variety of services available just makes such a difference for the work we do as educators. THANK YOU!

Silex - Multiple grade levels
As always, I appreciate the assistance from the LCRB. The programs and resources funded through the LCRB provide much-needed help to our students and families. Thank You!

Troy - Elementary (K-5)
I am very appreciative of the opportunity to offer our students and families supports and am grateful to have access to mental health/behavioral/social/emotional resources. At times, it is a struggle to provide consistency to our families in their experience with some of the agencies and the relationship between the family and the agency has an impact on the relationship between the school and family. I am always open to feedback on ways we can improve our response as a school community and appreciate the opportunity to share feedback with the LCRB each year.
It seems that sometimes certain agencies have so many rules/regulations that create barriers to services and who can be served and delay the process of students getting services. If our school district was able to receive funding to hire more counselors/social workers they could be available for all students without some of the barriers that outside agencies sometimes face. Not even sure if that would be a possibility but wanted to at least try. Despite barriers and challenges that we face we are definitely headed the right direction. Many students have had and are receiving services through the LCRB who may have never received the support they need. There are a lot of good things happening. I appreciate the work that is being done and the support our students are receiving. We received services mid-year from the Pinocchio program and within a short time we saw student growth and progress. This has been a great addition for our students. Thank you to the LCRB and the work being done for our students, families and community!
Thank you for all you do for our students and families.
Thank you so much for the services the LCRB provides!!!!

Middle School (6-8)
Can't thank you enough for always coming to my aide when I have a specific need!!! We are so very lucky to have you moving forward with us during this difficult time when parents are checking out of students' lives, when we need them to check in more. If you can please keep supporting more assistance for mental health. The more counselors that can take on clients in school, is a big help to us here in Troy Middle School.

High School (9-12)
Thank you for your tireless work and commitment to serving the mental health needs of the children in this community!

Winfield - High School (9-12)
Transportation to and from services is a large concern for our students. In addition, educating parents and families on the importance of treating mental and behavioral health. When working with students, their success is often correlated to the education and importance that the family holds in regards to mental health. In addition, though there are many resources out there for youth and families, unfortunately those closest to Lincoln county are extremely overburdened and it is not uncommon for students and families to have difficulty receiving these resources in a timely/ongoing manner.