

2024 School-Based Behavioral Health Services Survey Highlights

Executive Summary

Following the pandemic, data continues to reflect troubling trends in youth mental wellbeing, leading to an increased need for youth behavioral health supports. Optimistically, investments in school-based behavioral health (SBBH) prevention and intervention significantly improves young people’s mental, emotional, and academic functioning; and partnerships between schools and community behavioral health providers is the evidence-based best practice for the implementation of these interventions. In 2017, The Ohio Council of Behavioral Health & Family Services Providers began tracking data on the prevalence of partnerships between schools and community behavioral health centers (CBHCs), and since that time, SBBH partnerships have grown by over 223%. In the last year alone, partnerships between schools and CBHCs grew by 21.8%: one of the largest documented expansions in school-CBHC partnerships since this data tracking began. Despite noted growth, results from the [2024 School-Based Behavioral Health Services Report](#) highlight significant workforce and funding challenges that limit students’ access to SBBH services – which research demonstrates has long-term economic and social costs in the hundreds of billions of dollars each year.

Data Highlights from the 2023–2024 Academic Year

School – Community Behavioral Health Center (CBHC) Partnerships:

- Partnerships exist in 3,610 school buildings (+21.8% from 2023) across 646 school districts & charters schools (+10.1%).
- 87.5% provide clinical/treatment services; 88.5% offer prevention services; 60% deliver crisis intervention services.
- 97.5% of CBHCs engage in collaborative practices, like school planning teams or school curricula development.

School-Based Behavioral Health (SBBH) Services:

- Family Engagement: 92.3% of providers are engaging families to address social, emotional, and behavioral needs.
- Most Requested Service: Individual or Group Counseling (74.7%)
- Most Needed Service: Crisis De-Escalation & Behavior Management (73.75%).
- CBHC-led After-School Programs: 40.5%, bridging critical divide during students’ most at-risk time of day.
- Providing Behavioral Health Services directly to School Staff: 83.5%, up 13% from 2023.

Workforce Challenges:

- Reporting Hardship with SBBH Workforce: 84.4%, with 1-in-3 indicating challenges have worsened over last year.
- Total Full-Time SBBH Staff Vacancies: 374 FTEs, a 11.6% increase compared to the same time last year.
- Full-Time SBBH Staff Recruited Away by School District: 204 FTEs, a significant 98% increase from last year.
- Top Barriers to SBBH Services: Shortage of professionals (81.25%) and high needs of students/long wait lists (52.5%).

Funding Challenges & Opportunities

- Top reason SBBH Staff Left Position in Past Year: Salary (86%, up 8.4% from 2023).
- Primary Payor for SBBH Services: Community BH Medicaid – covering an aggregate median of 60% of total program costs – a 10% increase compared to last year, likely attributable to historic Medicaid rate increases for community behavioral health.
- Percent of CBHCs Receiving Some Funds from School Districts: 67.5%, a notable 16.2% increase compared to 2023, likely attributable to positive policy changes related to the use of Student Wellness & Success Funds.
- CBHCs Receiving No Funds from Schools: 1-in-3, highlighting an opportunity for revenue to support SBBH services.
- There continues to be no widespread, sustainable funding stream to cover either prevention or school consultation services, leaving significant gaps in revenue that contribute to wage disparities for SBBH providers.

Recommendations

To ensure students have the support they need to thrive, it is critical that we continue to invest in the expansion of school-based behavioral health services and strengthen school and community partnerships. Ohio policymakers can support the expansion of school-based services by 1) Addressing funding shortfalls for prevention, consultation, and treatment services and disseminating guidance to schools on funding strategies to grow and strengthen community partnerships. 2) Continue investing in solutions to overcome behavioral health workforce shortages. 3) Increasing students’ access to screening and early intervention for mental health challenges and at-risk populations.