

INTRODUCTION and PURPOSE

- Research suggests that although a large number of children and adolescents meet the diagnostic criteria for mental health disorders, only a fraction receive mental health services (Burns et al., 1995; Center for Disease Control, 2004; Hoagwood et al., 2018; Merikangas et al., 2010; U.S. Department of Health and Human Services, 1999).
- Strategies to increase receipt of evidence-based assessment, programs, and practices through providing mental health services in schools have been associated with improvements (Bradshaw, Buckley & Jalongo, 2008).
- As such, there is a need to understand the practices across systems and individuals that increase the accessibility, efficiency, and effectiveness of children's behavioral health services (Splett, Chafouleas, & George, 2018).
- The purpose of this study was to explore the alignment of policies and practices around social, emotional, and behavioral (SEB) screening across state departments of education (SDEs) and local education agencies (LEAs) by comparing data from several studies that are part of an IES-funded project, NEEDs². The goals of this study were to:
 - Describe state- and district-level policies related to SEB screening.
 - Compare the alignment of district reported practices and state policies around SEB screening.

METHOD

Policy-Practice Comparison

- First, responses from a survey of 1,330 districts were reviewed to determine whether or not districts reported using SEB screening practices.
- If screening practices were mentioned, responses were coded to determine whether screening was reported to occur: a) for targeted groups of students or b) universally for all students.

State-District Policy Comparison Procedures

- First, a search of district websites was conducted for the 1,330 surveyed districts to locate their district policy handbooks. Of the 1,330 districts, 911 had policy manuals available for review.
- Next, policy handbooks were reviewed for references to SEB screening.
- Of the 911 policy handbooks reviewed, 87 included reference to SEB screening. These handbooks were further reviewed to determine whether language about screening was (a) only informational, (b) indicated a recommended screening practice, or (c) mandated SEB screening.
- District policy information was then linked to state policy information and language across these was compared.

RESULTS

Figure 1. Screening guidance of states used in comparison.

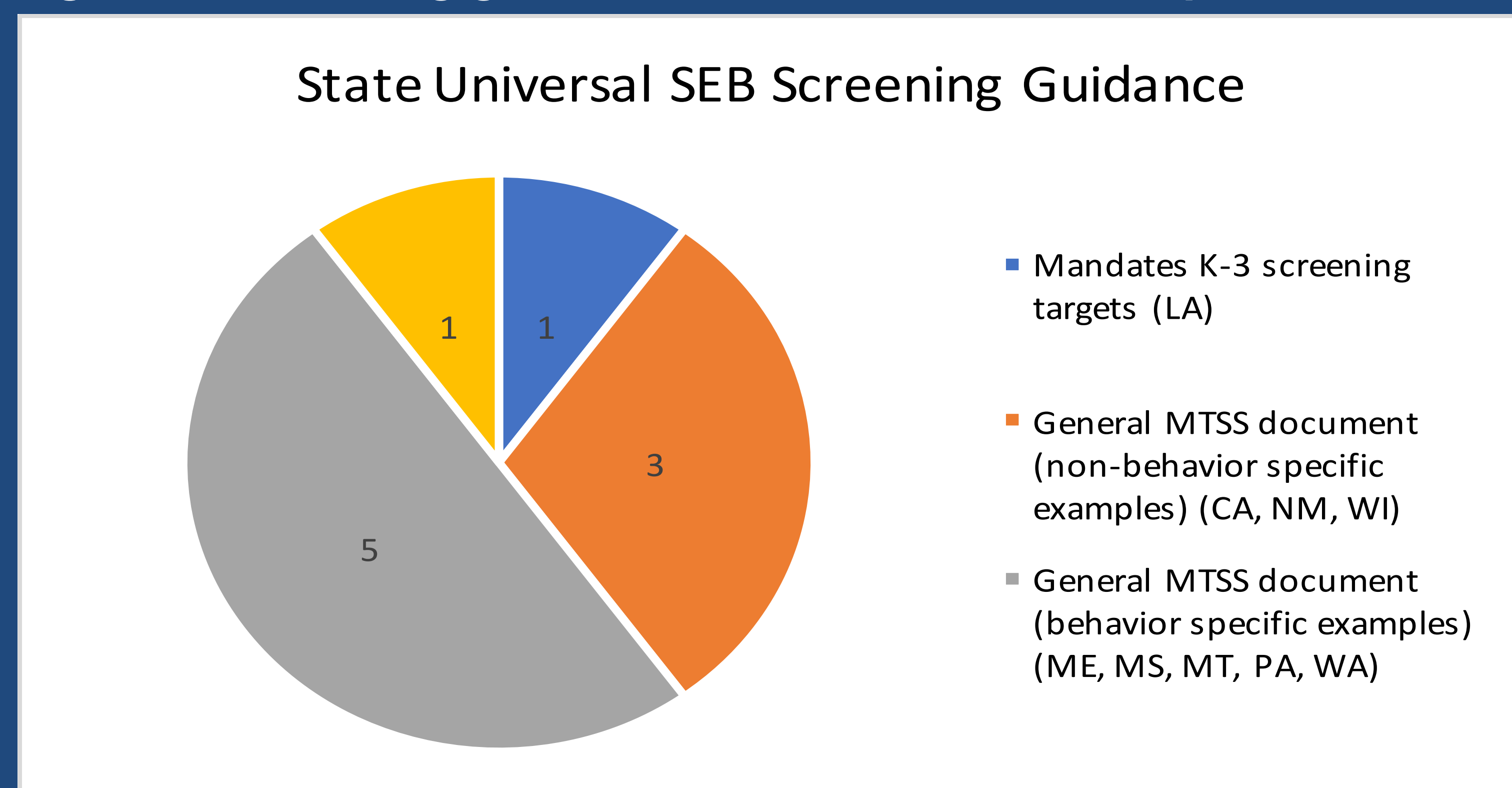


Figure 2. Screening guidance of districts used in comparison.

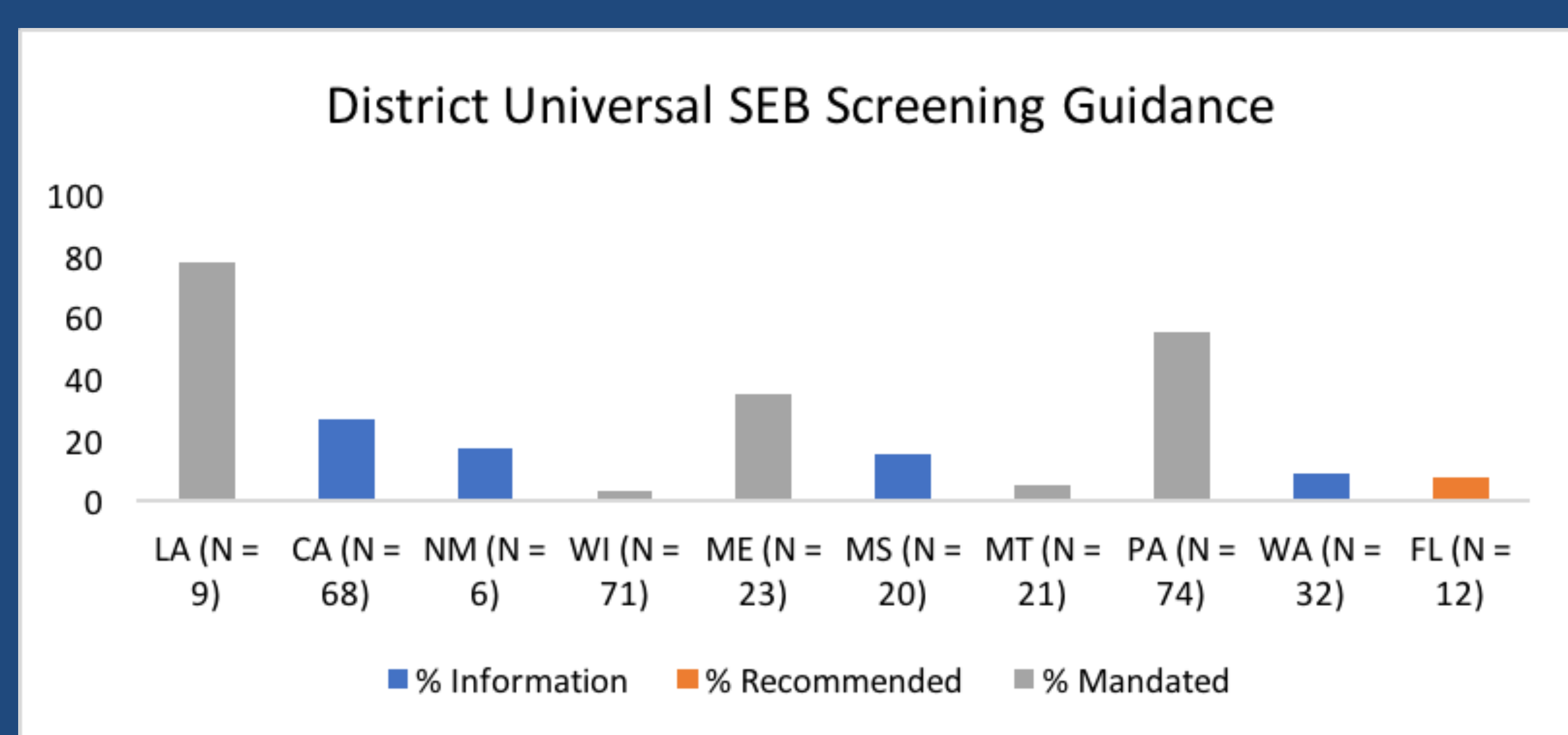


Table 1.

Alignment between district practices and state policies around universal SEB screening.

Universal SEB Screening Guidance	States	Districts No Screening (%)	Districts Targeted Screening (%)	Districts Universal Screening (%)
Information only (N = 109)	AZ, DE, IA, MI, OK, WI, ME, UT, WA	71%	18%	11%
Recommended (N = 200)	AK, AL, AR, CO, CT, FL, ID, IL, KS, KY, LA, MD, MO, MS, MT, ND, NH, NY, OR, PA, SC, SD, VA, WV	64%	27%	9%
Mandated (N = 2)	NM	0%	100%	0%

DISCUSSION

State/District Policy Comparison

- 10 states contained districts that explicitly describe behavioral screening.
- Some consistency exists between districts within states in regard to behavioral screening language
- Some states note behavioral screening as a part of district policies, whereas some mention it as part of RtI/MTSS procedures.
- Guidance varied from general information about screening to mandated or recommended policies.

Alignment of Policies and Practices

- As state-level guidance around SEB screening decreases, the percentage of districts reporting no screening practices increases.
- In the only state to include mandated universal screening policy, administrators in the sampled districts did not report engaging in universal screening.
- In states providing recommendations for universal SEB screening, fewer districts report engaging in screening compared to districts in those states that only provide information.
- Based on these results, some inconsistencies exist between state and district universal SEB screening policies and practices.