

**Characterizing the School-Based Mental Health Crisis**

Alizea Alvarez-Sookram

Arizona State University

PAF 505 Public Policy

Kenichi Maruyama, PhD, MPA, GPC

07/22/2025

### **Characterizing the School-Based Mental Health Crisis**

The school-based mental health crisis in the United States is both deep and unevenly distributed, affecting millions of students while disproportionately burdening those who are most vulnerable. Though schools have increasingly become hubs for mental health services, implementation gaps, funding instability, and systemic inequities continue to undermine their potential. This assignment explores the magnitude and distribution of this crisis by synthesizing evidence from peer-reviewed academic literature and public policy frameworks. Understanding who is most affected and why is a critical step toward advancing equitable policy solutions.

#### **Magnitude: Widespread and Growing Need**

The scale of the youth mental health crisis is staggering. Larson et al. (2017) found that over half of children with emotional and behavioral disorders do not receive needed care, and that untreated trauma significantly impairs academic achievement and social-emotional development. SBMH services offer a unique opportunity to intervene early and effectively by reducing barriers related to cost, stigma, and accessibility. However, the sheer size of the population in need dwarfs the resources currently allocated. According to McCrone (2024), up to 30% of students are estimated to have a diagnosable mental health condition, yet schools are often under-resourced and understaffed to respond.

This problem aligns with Furlong and Kraft's (2020) discussion of public problem magnitude, which involves both scope and impact: "Many problems become priorities because they affect large numbers of people or impose significant costs on society" (p. 92). In this case, the educational and societal costs of untreated youth mental health, measured in lower graduation rates, higher discipline referrals, and long-term health outcomes, underscore its urgency.

**Distribution: Who Is Most Affected?**

Although the crisis is national in scope, it is not evenly distributed across the country. Raval et al. (2019) show that students from low-income, urban, and racially minoritized communities are more likely to experience mental health issues and less likely to access adequate care. Larson et al. (2017) further document how Black and Latino students are less likely to be screened for or diagnosed with depression, even when SBMH services are available. These disparities highlight the systemic nature of access gaps, where students most in need are least likely to be served.

Furlong and Kraft (2020) address this issue of distributional equity directly, noting: “Equity is a particularly important criterion in education policy because of its long-term consequences for opportunity, income, and civic participation” (p. 169). When school systems fail to provide culturally responsive and adequately resourced support, they risk exacerbating structural inequalities under the guise of neutrality.

**Policy Implementation Challenges**

Even when SBMH programs are well designed, implementation is uneven across districts. Richter et al. (2022) outline barriers such as fragmented funding, inadequate training, and a lack of coordination across agencies. These findings align with the notion of institutional fragmentation as a barrier to policy coherence. As Furlong and Kraft (2020) explain, “fragmentation of government power... has a significant impact on policymaking processes and the policies that result” (p. 129). In the case of SBMH, this fragmentation manifests in disjointed efforts between school districts, health departments, and federal agencies, which often lack the capacity to sustain integrated services.

These barriers are compounded by policy environments shaped by shifting political priorities. In 2025, multiple news outlets reported that the Trump administration withdrew federal funding from dozens of school-based mental health initiatives due to their association with diversity, equity, and inclusion (DEI) frameworks (Associated Press, 2025; NPR, 2025; MSNBC, 2025). These defunding efforts not only stalled program expansion but actively dismantled services in high-need communities. Such political actions reflect the broader problem of institutional fragmentation and competing public values. While some policymakers emphasize cost or standardization, others target equity initiatives for ideological reasons, further complicating efforts to establish stable, effective school-based care systems.

### **Evolving Understanding and Policy Framing**

Reviewing this literature has reshaped my understanding of the SBMH crisis. I had initially seen it as a matter of underfunding or lack of services, but it is now clear that the problem is rooted in how we define access, prioritize equity, and design institutions. Policy analysts should not only consider technical solutions but also recognize how values influence the framing of problems. As the textbook states, “how one defines a problem also goes a long way toward shaping the solution offered” (Furlong & Kraft, 2020, p. 210). If we define the crisis as one of uneven access tied to racial and economic inequality, our solutions will likely include more targeted, equity-centered interventions.

### References

- Associated Press. (2025, May 1). *Trump-era cuts to school mental health programs draw criticism, lawsuits*.  
<https://apnews.com/article/school-mental-health-grants-trump-biden-dei-00bec2d96371f023ac56fe3f32f3e92f>
- Furlong, S. R., & Kraft, M. E. (2020). *Public policy: Politics, analysis, and alternatives* (7th ed.). CQ Press.
- Larson, S., Chapman, S., Spetz, J., & Brindis, C. D. (2017). Chronic childhood trauma, mental health, academic achievement, and school-based health centers: A multidisciplinary review of the literature. *Journal of School Health*, 87(9), 653–662.  
<https://doi.org/10.1111/josh.12541>
- McCrone, P. (2024). Debate: Where to next for universal school-based mental health interventions? *Child and Adolescent Mental Health*, 29(1), 93–94.  
<https://doi.org/10.1111/camh.12668>
- MSNBC. (2025, May 2). *States sue Trump administration over school mental health funding cuts*.  
<https://www.msnbc.com/top-stories/latest/states-sue-trump-cuts-school-mental-health-rcna216310>
- NPR. (2025, May 1). *Trump cuts derail school mental health expansions across U.S.*  
<https://www.npr.org/2025/05/01/nx-s1-5382582/trump-school-mental-health>
- Raval, V. V., Dhawan, N., & Rafael, D. (2019). School-based mental health promotion and prevention program: Turn 2 Us reduces emotional and behavioral difficulties in urban,

ethnic minority school children. *Journal of School Health*, 89(9), 732–741.

<https://doi.org/10.1111/josh.12808>

Richter, J., Wolf, D., Schwan, S., & Plener, P. (2022). Implementing school-based mental health services: A scoping review of the literature summarizing the factors that affect implementation. *Child and Adolescent Psychiatry and Mental Health*, 16, 17.

<https://doi.org/10.1186/s13034-022-00461-y>