With gratitude to the co-chairs, Assemblywoman, Mary Beth Walsh, Assemblyman Joseph GiGlio, Assemblyman Doug Smith and Assemblyman Mike Reilly

Dear Honorable Chair and Assembly members,

My name is Dr. Robin DeLuca-Acconi. I am a representative from the New York State School Social Workers’ Association and am a Licensed Clinical Social Worker. I was blessed to spend 20 years as a School Social Worker. I am currently an Assistant Clinical Professor and Assistant Dean in the School of Social Welfare at Stony Brook University. I consult with school districts on issues of trauma and grief in their schools, as well as research and publish about issues impacting schools and School Social Workers.

We surveyed our membership, who are spread throughout the state, about their observations and concerns. We had 80 respondents from rural, urban, and suburban districts. I will summarize the concerns and hope to do justice to what they shared. The number one concern of respondents was the mental health and well being of their students, many echoing what one person said: “Our children are walking around riddled with anxiety, depression, suicidal ideation, high absenteeism, no pride for anything, and ready to fight all the time. They feel emboldened, lost, defensive, alone, unheard, unprotected, and that there are no positive options. There are no positive options. There are no programs, not enough mental health providers, not enough anything for these kids or their family.” Our members would like politicians, policy makers, school board members and administrators to have more of an understanding about just how trauma seriously impacts students.

Another respondent said: “We need more funding for mental health support, healthy meals that the kids will actually eat, enrichment and extracurricular activities, facility maintenance and upkeep, and clothing and other hygienic/basic needs that kids can get from school.” If these services are not provided through school, students often do not obtain these much-needed services (Baweja et al., 2016; Jaycox et al., 2010). Students from under-resourced and segregated neighborhoods are also more likely to access mental health services in an educational setting (Ali, et. al., 2019; Baweja, et. al., 2016.) Our members would like you to know that they need an increase in mental health services in schools, increasing school social workers and reducing the ratio of the caseload they carry.

I recently spoke to a school administrator who was asking for guidance on a case where a child was “holding his kindergarten class hostage with his behavior”. I gave the administrator some questions to ask the child’s guardian. When we met again, she told me that the conversation revealed that this little one had experienced more trauma in his young life than some experience in a lifetime. I have
heard these stories throughout my career but in the last few years, the stories have increased in both frequency and intensity. The Harvard Center on the Developing Child has decades of research showing that when a “child experiences strong, frequent, and/or prolonged adversity—exposure to violence, and/or the accumulated burdens of family economic hardship causes prolonged activation of the stress response systems that can disrupt the development of brain architecture” (https://developingchild.harvard.edu/). The “trauma brain” is concerned with survival, often reacting impulsively for self-preservation and sometimes manifesting in violence. The good news is that “Research also indicates that supportive, responsive relationships with caring adults as early in life as possible can prevent or reverse the damaging effects of toxic stress response” (https://developingchild.harvard.edu/).

According the CDC, before the pandemic, mental health was getting worse among high school students, and these mental health needs have only intensified since the pandemic https://www.cdc.gov/media/releases/2022/p0331-youth-mental-health-covid-19.html. The pandemic has exacerbated preexisting trauma for communities of color due to the high morbidity and mortality of COVID-19 in these communities (DeLuca-Aconci, 2022; Serafini et al., 2021).

School Social Workers and other school mental health professionals have the expertise needed to address the impact of trauma on children and youth as well as to address the myriad of other factors interfering with a child’s ability to succeed in school and in life. Interventions that are known to work are also needed at a system’s level, such as restorative justice, mentoring and trauma-informed schools.

School Social Workers are licensed mental health professionals with a master’s degree in social work who provide trauma informed services related to a person’s social, emotional and life adjustment to school and/or society. We provide assessment, consultation, and counseling/therapy to individuals and groups. Using data driven research to guide best practices; we work within a multi-tiered system of support, implementing universal programming including school climate, whole class workshops, and social-emotional interventions. Our systems approach provides a pivotal link between the home, school and community in facilitating and coordinating school and community services to students, families and school personnel. As licensed mental health professionals, School Social Workers serve as part of school districts’ Student Centered Support Services teams which affords districts the option to bill Medicaid in education for the related services provided by School Social Workers.

In order to obtain the MSW, you need two years in graduate school or one year if you already have your BSW. The hours of internship practicum are essential as the application of social work interventions noted above take time and training to master. The requirements for practicum internship are 900 hours for the MSW over the course of two years. As you can imagine, it can be tough to work, raise a family, attend classes and have an internship. This rigor is important, however, in order to have highly trained social work professionals. To increase workforce capacity, the NYS could facilitate paid internships, tuition reimbursement and other financial incentives that will assist in growing the workforce of School Social Workers.
In the wake of Columbine, the Secret Service released a report called the “Safe School Initiative” (see https://www2.ed.gov/admins/lead/safety/preventingattacksreport.pdf). Since that report, it has been found and replicated that a majority of school shooters report mental health problems such as depression and/or suicidal thoughts. The Secret Service found that even with the presence of armed officers if the connection between youth and the adults in the school is severed, no school is safe. Although there has been progress on school climate and initiatives in some places, we have far to go.

According to respondents, in some schools, school resource officers lent to a sense of security, serving to create an environment of safety. In others, however, “school safety and police officers do not have this effect, they have the opposite, causing more anxiety, putting students on edge, and diminishes trust between school and our young people (who already have enough trauma and contact with police in their communities).”

This is a complex issue, colored by one’s experiences and world view. However, what is abundantly clear, echoed in research, respondents to our survey and even the Surgeon General: our children are in pain and need interventions that will help heal them and their communities. This is especially true in communities that have been historically underserved, under-invested and have experienced marginalization.

We need to implement interventions that create a connection to a positive school climate with adults who understand trauma and mental health. It is not a zero sum game. It is balancing the practical safety needs that school resource officers provide and increasing the number of mental health providers such as School Social Workers who are skilled in making sure that students feel safe to thrive, not just survive.

We will continue spiraling and in the wake of violence shake our heads and shrug our shoulders unless a group of people from all parts of the system listen to each other and start to understand the experiences of those who are from communities different from our own. To promote the healing that is necessary, we all need to be willing to come together

We know our children are in pain. They are yelling this at us in words and deeds. Recently a colleague said to me that “We need to learn to love all children as if they are our own”. I wholeheartedly agree, because in the end, the success or failure of all society’s children is the success or failure of all our collective futures.

I would be honored to further speak on this issue and to share additional feedback from our members.

Respectfully submitted,

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Board Member, New York State School Social Workers’ Association
References


Harvard Center for the Developing Child - https://developingchild.harvard.edu/

