Towards a More Inclusive Future: Creating Equitable School Environments to Improve Health for K-12 Students of Color









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Introduction

PUBLIC HEALTH PRACTITIONERS, RESEARCHERS AND POLICYMAKERS have long recognized that students of color face numerous challenges and inequities within K–12 schools. Often, these challenges are most magnified for Black, Latino and Native American students, who are more likely than their white peers to attend lower-resourced schools that spend fewer dollars per student, hire educators with fewer years of experience and pay them less, offer more limited options for advanced coursework, or provide insufficient student support services. As a result, students of color are generally less likely than white students to earn passing grades, advance grade levels on time, or graduate high school within four years (or at all), reinforcing inequities in educational opportunities and career attainment. A

Unjust educational settings reinforce racial disparities

While these disparities are framed by persistent and intractable patterns of structural and systemic racism outside of schools, they can also be exacerbated by discriminatory policies, practices, programs and power structures within school settings. For instance, unjust school discipline policies unfairly target students of color, leading them to be suspended or expelled at higher rates than their white peers and ultimately introducing these students to the criminal justice system at an early age.⁵ Curricula used in public schools are seldom culturally inclusive, with history textbooks or curricula not accurately reflecting the cultural realities and lived experiences of students of color, limiting or even discouraging academic engagement and increasing risk for disconnection and dropout.⁶ Many standardized tests and other metrics of academic tracking disproportionately favor white

students, but they are still used nationwide to evaluate students, determine their academic tracks and even allocate school funds or teacher pay. In addition, implicit biases among some educators or administrators may subject Black and brown students to less rigorous academic expectations that limit their current and future potentials.

Entangled educational and health disparities

The educational inequities borne by students of color operate in parallel with, and often exacerbate, numerous health disparities. Educational attainment is the single most direct predictor of overall health across the life span, with on-time high school graduation being a particularly key indicator of a student's career options and earnings potential. Adults who do not complete high school face heightened risks for poor health and chronic, yet preventable, conditions such as high blood pressure, diabetes and stroke. Lower academic attainment confines future earnings potential, limiting health literacy, access to health insurance or consistent preventive care visits. And at school, students of color more frequently contend with micro-aggressions, verbal insults, or physical assault, posing both immediate and long-term physical and mental health risks. To this end, the numerous educational disparities afflicting students of color are reproduced and magnified in their health outcomes.

An inclusive, equitable school environment is a prerequisite to academic performance

Many previous and current interventions, policies or programs focus on ameliorating the academic achievement gap faced by students of color and concentrate resources on instructional remediation, college readiness programs or standardized test preparation. But the root causes of educational inequity for students of color cannot be fully addressed without first ensuring that all students can access welcoming school environments grounded in equity, inclusion and justice—necessary prerequisites to school attendance and academic achievement. In counterpoint to inequitable, unjust or ineffective school policies that reinforce patterns of structural racism, policies and programs that center racial equity can alleviate some of the intractable inequities burdening students of color, removing obstacles to success at school.¹² Students who perceive their school climates as positive are more likely to report feeling accepted and welcomed at school, reducing anxiety and depression.¹³ Schools and school districts therefore must implement, strengthen and monitor policies, programs and practices that create inclusive, supportive and equitable K–12 learning environments for students of color.

Structure of this report

We define three key priorities school districts must undertake to advance racial equity for their students: implementing account-ability- and data-based policies to acknowledge and counteract the long-term deleterious effects of systemic racism in schools; replacing harmful, exclusionary school discipline policies with restorative justice principles and ongoing staff capacity building; and expanding school-based health infrastructure while also focusing on racial equity. And since each school district and community across the country contends with a different local environment and political context, we have provided practical implementation spotlights—informed by research and conversations with school district leaders nationwide—for how each key priority is being actualized.

We hope that this issue brief equips education and public health leaders with the information, models and aspirations needed to implement equity-centered changes at the school district level to guide more students of color toward positive outcomes.

TO CREATE RACIALLY EQUITABLE POLICIES IN SCHOOLS, DISTRICTS MUST ACKNOWLEDGE THAT STRUCTURAL AND SYSTEMIC RACISM ARE ROOT CAUSES OF POOR OUTCOMES FOR STUDENTS OF COLOR.



Promising Practice 1:

Acknowledge, understand and address the long-term impacts of racism on the health and academic attainment of students of color by implementing programs and policies rooted in accountability and robust data collection.

TO CREATE RACIALLY EQUITABLE POLICIES in schools, districts must acknowledge that structural and systemic racism are root causes of poor outcomes for students of color. One demonstrated way to make such an acknowledgment is by publicly declaring racism a public health crisis—and in May 2019 (following guidance from the Wisconsin Public Health Association), Milwaukee County¹⁴ made history as the first jurisdiction in the United States to do so. In its declaration, the county acknowledged the impacts racism has on its Black residents and committed to eliminating institutional racism by revising inequitable county policies, practices and power structures.¹⁵ And following the brutal police killings of George Floyd and Breonna Taylor in 2020, an increasing number of entities across the United States—public health agencies, city councils, state legislatures, public safety departments and educational entities—moved to declare racism a public health crisis.

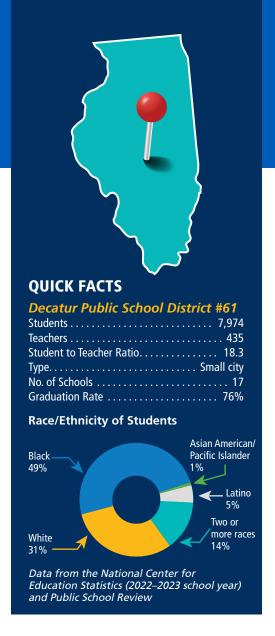
Of the more than 260 such declarations the American Public Health Association has tracked, seven have been passed by educational entities including the Elizabeth Board of Education (NJ), the Lowell School Committee (MA), the Ferndale School Board (MI), the Rialto Unified School District (CA), the Board of Education of Champaign Community Unit School District #4 (IL), the Decatur Public School District #61 Board of Education (IL) and the Akron School Board (OH). Several of these school districts have passed particularly robust declarations that, in addition to being commendably specific or bold, have also served as a foundation to direct sustainable, accountable and transparent district interventions.

IMPLEMENTATION SPOTLIGHT 1: Decatur Public School District #61 (IL) Declares Racism a Public Health Crisis

Decatur Public School District #61 serves a diverse student body, with students of color making up nearly 70% of the district's population. But these same non-white students lag their white counterparts by 10% in mathematics and 15% in reading scores. Recognizing its responsibility to rectify these disparities, the Decatur Public School District #61 Board of Education declared racism a public health crisis in June 2020, committing to modifying district programs, policies and power structures to advance racial equity.¹⁶

In its declaration, Decatur's school board directs the district superintendent and ancillary departments to develop a racial equity policy, integrate racially and culturally relevant content into the curriculum, recognize Juneteenth as an official district holiday, aggressively recruit and develop teachers and staff reflecting the diversity of the student body, revise the discipline and safety system and responsibilities of school resource/police officers and provide consistent updates to the school board regarding progress. The district has conveyed its commitment to these actions by implementing programs and policies rooted in accountability, data collection and ongoing monitoring.

The Decatur Public School District's declaration of racism as a public health crisis was modeled after preceding declarations from the Champaign Community Unit School District #4 (IL) and Akron Public Schools (OH).



Recurring progress updates reinforce accountability

The Decatur Public School District has used its declaration as a basis of accountability for its equity work: in the declaration's eighth section, for instance, the school board directs the superintendent to prepare an annual report—accompanied by quarterly updates—regarding racial bias complaints in the district. The district created a racial bias form through which teachers, staff, parents, students and community members can confidentially submit a complaint regarding perceived racial bias affecting themselves or somebody else.¹⁷ This bias form has since been expanded to allow the district community to report other types of bias, including gender, age and sexual orientation bias. Leaders in the district's diversity, equity and inclusion (DEI) office analyze trends from submitted bias forms and subsequently present emerging patterns at designated Board of Education meetings throughout the school year, informing district leadership on what biases are present across district structures and how to best counteract them.

In addition to ongoing reports to the school board, district leaders regularly and transparently communicate their progress on racial equity commitments to the public. In fall 2023, the district's DEI office published a detailed update on its website tracking the extent to which it had implemented the commitments in each section of the declaration. Although progress enacting several commitments was slow, the district still candidly communicated all progress to the public and, in February 2024, refreshed its website with a new update demonstrating that further headway had been made. The district also speaks about its DEI-related successes and challenges periodically on a Decatur-based radio station (WSOY 1340 AM), inviting and answering questions from community stakeholders. Taken together, these actions allow the community to enter the district's racial equity conversations as a vital stakeholder, helping hold the district accountable to its goals.

Equity-centered recruitment and retention practices

In examining its existing internal processes, the district identified a need to modify its educator recruitment and retention practices: only 18.6% of full- and part-time employees were non-white persons of color, which does not reflect the diversity of the district's student population (of which 63.5% is non-white). The district's declaration acknowledged that legacies of systemic racism have impeded the diversity of its teaching workforce; resultingly, the district has committed to aggressively recruiting and retaining educators who more closely reflect the diversity of students. Since June 2020, the district has hired 178 staff members of color; more than 88% of these recent hires are Black and more than 20% are fully licensed teachers or substitute teachers. The district has also scrutinized its hiring applications, recently updating all job applications with DEI-related questions to further attract and underscore diversity. The district has also scrutinized its hiring applications.

Decatur Public Schools also committed to expanding and mandating DEI training for all administrators, teachers and support staff—an initiative it has completed via a three-year series of workshops and professional development sessions. To continually advocate for and monitor progress on racial equity policies and generate sustainable, school-based buy-in outside the district central office, the district recently established a DEI team at each campus that serves as the chief liaison to school and district administration regarding school climate.

Data collection drives targeted initiatives

In 2020, Decatur began partnering with an external, Black woman-led educational equity consulting agency to provide the district with a comprehensive suite of professional development sessions, data analysis efforts and stakeholder engagement strategies. This included the design and implementation of a districtwide survey that ultimately collected more than 1,700 responses from students, parents, staff members and community members about how the district has addressed diversity, equity and inclusion. The following initiatives have been implemented on the basis of the survey responses:

- **Equity plans.** All school principals have submitted an equity plan to district leadership identifying the highest-priority equity challenges and outlining targeted solutions specific to their school.²⁰ These equity plans are currently being implemented at schools across Decatur, and district leadership is monitoring outcomes.
- School-based DEI teams. Each school's equity team—composed of student leaders, parents and staff—meets monthly and elevates site-specific challenges and concerns to the district's DEI team, which takes supportive actions when applicable to address student feedback (and provides school-based DEI teams with regular status updates). To center student voices, each DEI team was named in accordance with student suggestions (examples include unity team and multicultural team). In spring 2024, students serving on one district high school's DEI team suggested that the district provide students of color with the resources and medium to educate teachers and administrators about their cultures, ethnicities or academic or social needs. In response to this team's feedback, district staff have greenlit a student-led, half-day professional development session for teachers titled "Addressing Students' Individual Needs from a Cultural Lens," which will launch during the 2024–2025 school year.
- More refined survey development. The general nature of the districtwide survey may not have sufficiently accentuated specific school-level challenges. To learn more about individual school climates, the district plans to disseminate a more tailored equity survey (vetted by student leaders and teachers) districtwide in late spring 2024 and will use these data to study year-over-year progress in school climates. The district's initial declaration has thus formed the foundation for tangible, targeted, and sustainable actions centered on data collection, stakeholder transparency, and districtwide accountability.

Apart from declarations, other avenues exist to acknowledge and begin addressing the effects of systemic racism on students of color.

As evidenced by the Decatur Public School District, declarations of racism as a public health crisis can prove far more than symbolic, instead catalyzing bold, tangible and sustainable racial equity-first changes in district programs, policies and power structures. In many localities nationwide, however, political barriers would lead to such proclamations being nonstarters, precluding productive conversations around racial equity. In other locations, passing declarations requires administrative capacity, interdepartmental or community-wide collaboration and sufficient districtwide buy-in—all of which may be inefficient, time consuming, or difficult to achieve. And yet other localities may deem declarations as an unnecessary symbol and instead take actions without such a document.

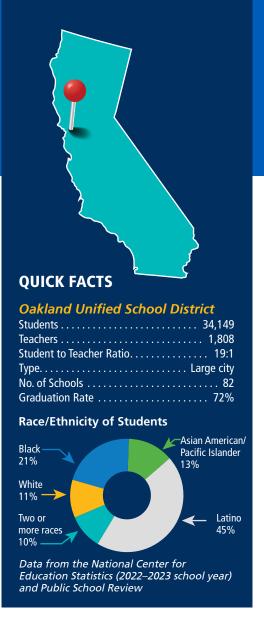
As such, in addition to the seven declaring educational entities nationwide, many districts have adopted alternative strategies to acknowledge (and begin addressing) the ramifications of structural or systemic racism for the learning and health outcomes of students of color. We highlight some of these strategies in the remainder of this section.

IMPLEMENTATION SPOTLIGHT 2: Oakland Unified School District (CA) Develops Targeted Support for Black Male Students

From 2004 to 2014, the number of Black men killed on the streets of Oakland, California, was almost the same as the number who graduated college ready from its high schools.²¹ And the trends within the Oakland Unified School District were no less jarring: Black boys occupied the lowest position on every positive indicator of academic success and the highest position on every negative indicator.²² In 2013, only half of the Black males in the district graduated on time and more than a third dropped out of high school entirely.²³ Against this cacophony of poor academic outcomes, the superintendent—together with Oakland's Board of Education and two community-based organizations—asked the following questions: What were the factors causing this concerning disparity for Black boys? What could Oakland schools do to help?

A groundbreaking effort to improve outcomes for Black male students

The district recognized that, to ensure equitable school climates for all students, it must first acknowledge and understand the long-term impacts of racism on the health and academic outcomes of its students. District leaders, drawing on the targeted universalism principle, believed that by fostering success for the district's lowest-performing student population (Black males), they would also uplift the performance of all students districtwide.²⁴ In 2010, Oakland Unified launched its Office of African American Male Achievement (AAMA), charging this team with dismantling barriers precluding Black boys from academic excellence and beginning to create clear transition pathways from high school to college, careers or the community.²⁵



In late 2010, AAMA launched what would become its flagship initiative: the Manhood Development Program (MDP), an academic mentoring program that created elective daily classes for Black male students taught by Black male educators. ²⁶ In designing the classes, district leaders and educators attempted to counteract the long-term ramifications of systemic racism for Black students' lives; many of the Black male instructors selected to lead MDP courses, in fact, grew up in Oakland and closely resonated with their students' challenging upbringings or home lives. ²⁷ One teacher remarked to his students that he, too, grew up in a family mired by incarceration, drug abuse and neighborhood shootings and that he hopes to apply these lived experiences to better coach his students. ²⁸ The program did not shy away from discussing race, instead fully acknowledging the harmful effects of systemic racism on Black male students' lived experiences, celebrating the cultural diversity of these youth and emphasizing that success in school is attainable.

COVID-19 drives MDP to evolve into multitiered systems of support

The COVID-19 pandemic highlighted and exacerbated long-standing challenges that Black students face in Oakland, stymying or reversing some of the hard-won progress the district had made since 2014. District leaders recognized that, to better serve students, AAMA must expand its programming beyond its classroom MDP initiative. In late 2021, MDP was transformed into King Care, a new program that provides structured, multitiered systems of support by supporting students (referred to as Kings and Queens) inside and outside the classroom through one-on-one check-ins, family home visits, quarterly teacher-parent-student conferences and literacy interventions.²⁹ Students also take a "Mastering Our Cultural Identity" class that acknowledges the complex histories of racism and oppression with respect to the Black experience, helps students cultivate social-emotional intelligence and a positive sense of purpose at school and celebrates students' culture and lived experiences. Students in King Care meet with an assigned counselor weekly to discuss their academic and social-emotional learning progress, and teachers and administrators have access to these robust data. King Care is currently offered at 16 schools across Oakland Unified and is expanding each year.

AAMA closely follows its students' academic indicators, most of which are very positive, and incorporates these data into compelling reports and district budget requests to further fund, maintain, and expand its programs. Students in AAMA have an average daily attendance of 90%, while the district average is 84%. Of the 110 grade 12 students participating in AAMA activities during the 2022–2023 school year, 100% graduated from high school (as compared with the district's overall 75% graduation rate), 100% are continuing to some form of higher education and more than 70% received scholarships from Oakland Promise (\$156,000 in total). AAMA also tracks social-emotional well-being data: in spring 2024, Kings and Queens had an average social-emotional well-being score of 4.2 out of 5, as compared with the district's average score of 3.8.

Data-driven decision making to support student well-being

In 2021, Oakland Unified began districtwide K–12 implementation of Sown to Grow, a universal social-emotional health screener that allows schools to systematically monitor students' self-reported overall well-being, mental health and sense of belonging or inclusion at school.³⁰ Students at all schools are invited to complete the Sown to Grow check-in weekly, submitting numeric responses accompanied by a short reflection. Teachers and administrators receive real-time insights into the well-being of their students through a confidential portal and can provide direct responses to students' reflections. Simultaneously, intelligent software automatically tags any responses that may contain concerning mental health or well-being indicators (such as suicidal ideation or propensity for self-harm) and identifies students reporting poor well-being on multiple consecutive surveys, allowing school leaders and district coordination of service teams to provide timely, targeted and student-centered support. District leadership has continued nurturing its data collection capabilities and, in fall 2023, hired individuals who deliver training and workshops on data collection and analysis strategies to district- and school-level administrators.

District acknowledges the effects of systemic racism on its educators

In summer 2019, the district convened its first Racial Justice & Healing Taskforce, uniting leaders from the district's equity office with those working in the behavioral health, restorative justice, teacher support and English language learner achievement units.³¹ This taskforce, which has since met quarterly, empowers teachers and staff by organizing racial justice summits (which take place on professional development learning days), weeklong summer racial justice institutes and guest speaker sessions with equity thought leaders, to which students and families are invited.³² To ensure that racial equity remains a priority among school leaders, this taskforce has integrated racial justice professional development into existing district programs including a summer principal leadership institute, ongoing support sessions for new teachers and regular professional learning days.³³ Recently the taskforce has convened anti-racist learning communities of practice that, working with more than 100 community partners, have equipped more than 4,500 teachers with best practices and strategies to maximize Black student participation and achievement.³⁴ Workshops scheduled for spring 2024 focus on conflict management strategies grounded in anti-racism and equity, strategies for being an effective adult ally, use of the design thinking framework to create greater inclusivity for students and a mental health support workshop centered on Black woman educators.³⁵ Schools can also designate a staff member to participate in the district's Racial Affinity Facilitator Fellowship to consolidate learning and implement site work at their home campus, enhancing school-based accountability and adherence to Oakland Unified's climate initiatives.³⁶



By using multitiered systems of support to encourage the development of positive, healthy identities for Black male students and by investing in professional development opportunities grounded in racial equity, the district is gradually creating healthier school climates that narrow academic performance gaps and rectify negative health outcomes.

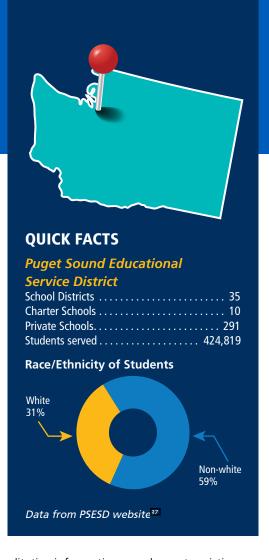
IMPLEMENTATION SPOTLIGHT 3:

Puget Sound Educational Service District (WA) Helps Districts Transform Data into Decision-Making

The Puget Sound Educational Service District is a regional educational agency serving 35 school districts in Washington State, representing 40% of the state's total districts. While this agency does not exert direct authority over any school district, it mentors and convenes districts to work on regional initiatives. The Equity in Education department works directly with district partners to develop, adopt and monitor equitable and inclusive policies and practices, some of which we highlight here.

"Street data" help capture holistic experiences of students of color

Student data collected in Puget Sound—area schools have typically centered on standardized test scores, graduation rates, attendance numbers and discipline rates. While these metrics are essential in identifying and closing achievement gaps among minoritized groups, more data points are needed to fully understand the experiences, successes and challenges of students of color and develop effective, equity-first interventions. Agency leadership has communicated with administrators of its constituent districts about the need to collect broader data metrics and has resultingly adopted the "street data" framework coined by researcher-authors Shane Safir and Dr. Jamila Dugan. Following this street data approach, the agency helps districts gather more holistic data by facilitating listening sessions and focus groups with students, staff and community members; conducting classroom



observations; and studying student work submissions and participation trends. This qualitative information supplements existing district metrics but intentionally and uniquely centers the experiences of marginalized youth of color, helping districts to craft more effective interventions.

Districts may have limited expertise or resources to collect or apply data, so the agency facilitates recurring Street Data Institutes to build district administrators' awareness of and comfort with better data practices. Each institute consists of triannual workshops supplemented with monthly coaching sessions for school district staff and team assignments between meetings. As of late 2023, the agency had facilitated institutes at five school districts across its service network, and participants have built school-specific racial equity action plans grounded in holistic data collection methods.³⁸ Agency data coaches also provide monthly, in-person technical assistance to district equity team members and train administrators to apply results to guide targeted program development, policymaking and service delivery models that more equitably serve students of color.³⁹

Agency encourages districts to scrutinize internal processes

The agency has developed a racial equity toolkit, including a racial equity worksheet,⁴⁰ to conduct racial equity analyses of its network policies and programmatic decisions. The toolkit is publicly available, and school districts are encouraged to use it to analyze and modify their own policies. Through the racial equity tool, the voices of community members of color are not only considered but actively encouraged, driving the development of district policies and programs built upon racial equity best practices. Individual districts, such as the Tukwila School District, have also created their own tailored rubrics based on the agency's equity tool.⁴¹

Research indicates that teachers of color foster strong positive educational outcomes for all students, and most particularly for students of color, with whom they may share life experiences. 42,43

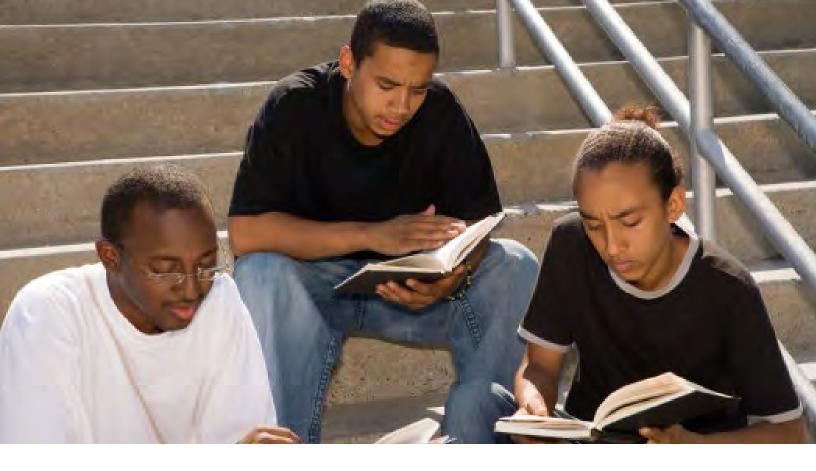


Although 59% of students within the service area of this agency are non-white, only 10% of educators across agency districts are non-white. The agency encourages districts to reimagine their internal educator retention practices and has created the regional Educators of Color Leadership Community, which regularly convenes educators of color and encourages them to share their experiences with colleagues who have similar racial identities. Participants also receive mentoring and coaching from other educators of color and can share suggestions with their school principal. This leadership network has received such positive feedback that several of the agency's constituent districts have started their own networks to boost retention of educators of color. Districts are also encouraged to hire a designated staff member focused on monitoring and advocating for the physical and mental well-being of educators within their district, thus helping ensure prioritization of and adherence to district racial equity policies. Taken collectively, these actions have spurred districts to reexamine their internal practices and provide best practices and frameworks through which districts can advance racial equity.

Additional Resources: Declaring Racism a Public Health Crisis

- Since 2020, APHA has tracked, monitored and mapped nearly 270 declarations nationwide proclaiming racism to be a public health crisis. Click here to view the interactive declarations map, which is regularly updated as new declarations are passed. These declarations, noted with the type of entity passing them, could serve as models for future efforts.
- Salud! America, a national Latino-focused organization, has published an action pack with detailed guides on developing, advocating for and passing a municipal declaration of racism as a public health crisis.
- We recognize that proclaiming racism to be a public health crisis can be a non-starter in many localities around the country, and alternative methods to advance health equity must be sought out. A joint report by The Justice Collaborative Institute and the Institute for Healing Justice and Equity at Saint Louis University provides five practical recommendations on ways to recognize racism as a public health crisis apart from a formal declaration.
- Akron Public Schools (OH), which declared racism a public health crisis, committed in its declaration to review all curriculum and professional development offerings through a racial equity lens. View the Assessing Bias in Standards and Curricular Materials equity tool this district uses.

SCHOOLS AND DISTRICTS THAT HAVE IMPLEMENTED A
RESTORATIVE JUSTICE MODEL AS A FIRST CHOICE OVER
SUSPENSIONS OR EXPULSIONS HAVE SEEN REDUCTIONS IN
STUDENT CONTACT WITH LAW ENFORCEMENT, MORE STAFF
MEMBERS WHO ARE EQUIPPED TO EFFECTIVELY MANAGE
STUDENT CONFLICTS AND A SAFER PERCEIVED SCHOOL
ATMOSPHERE. 55,56



Promising Practice 2:

Transform unjust school discipline systems into programs that ensure positive, restorative approaches to justice that do not disproportionately target students of color, particularly Black and Latino students.

SCHOOLS AND SCHOOL DISTRICTS HAVE HISTORICALLY ADDRESSED serious student infractions, including violence or behaviors that endanger the school community, through in- and out-of-school suspensions, transfers to alternative remediation schools, or referrals to law enforcement. Many school districts in the United States have, however, become overly reliant on these harsh discipline policies for minor infractions such as tardiness, cell phone usage, or so-called "disrespect" that stems from immaturity.⁴⁴ When students are removed from class as a form of punishment, they miss assignments, perform poorly on assessments and exhibit lower classroom engagement and confidence.⁴⁵ In addition, suspensions and expulsions push students away from the protective elements of the classroom (such as adult guidance, a routine and community), making them feel alienated, shamed and unwanted and exacerbating negative mental health outcomes or encouraging harmful substance use.⁴⁶ Overly punitive disciplinary policies, sometimes referred to as zero-tolerance policies, ultimately foster unwelcoming school environments that can exacerbate student absenteeism, disengagement, or dropout.

The link between harsh school disciplinary policies and the number of students who eventually become involved with the criminal justice system is striking and well established. The impacts of zero-tolerance disciplinary practices disproportionately harm students of color. Black students are twice as likely as white students to be subject to a school-related arrest or law enforcement referral and up to 3.8 times more likely to be suspended.⁴⁷ Black female students are six times as likely to be suspended as white female students, and 20% of Latino boys have been suspended at least once before they begin high school.⁴⁸ Overall, Black students make up 15% of our nation's student population but account for 36% of all arrests.⁴⁹ These disparities are not the result of students of color being inherently more dangerous or violent, however: there is no evidence that Black students exhibit greater or more serious misbehavior than their white peers, and studies have continually disproven that students' nature is the root cause of disciplinary disparities.^{50,51}

Rather, these racial disparities are rooted in exclusionary school discipline practices exacerbated by the implicit or explicit biases of certain school adults. Implicit racial bias may lead some teachers to perceive Black students as older, less innocent, more aggressive, and more deserving of harsh discipline than their white counterparts.⁵² And the presence of school police officers (SPOs) on some campuses—an issue we explore in more detail later in this brief—means that adults in school buildings may be actively searching for student misbehavior.

As a result of these ungrounded and incorrect perceptions, students of color are more likely to face disciplinary actions that ultimately lead to in-school or out-of-school suspensions or referrals to law enforcement.

School Discipline Policies Rooted in Restorative Justice Help Counter Racial Injustice

Many school districts nationwide are evaluating, modifying and reimagining their outdated policies in favor of restorative approaches to discipline and justice inspired by indigenous cultural practices.⁵³ In lieu of a reliance on punishment to guide student behavior, restorative practices proactively foster strong relationships among students, teachers, staff and community members. For instance, after an interpersonal conflict, students are given the opportunity to engage in open, respectful communication; examine the consequences of their actions; and commit to rectifying the harm caused.⁵⁴ Schools and districts that have implemented a restorative justice model as a first choice over suspensions or expulsions have seen reductions in student contact with law enforcement, more staff members who are equipped to effectively manage student conflicts and a safer perceived school atmosphere.^{55,56}



IMPLEMENTATION SPOTLIGHT 1: Minneapolis Public Schools (MN) Makes History Reforming School Discipline Policies

At the outset of the 2012 school year, Dr. Bernadeia Johnson, then-superintendent of Minneapolis Public Schools, was analyzing school suspension statistics with her staff when she noticed a concerning trend: the district's schools were referring Black students for suspension almost four times as often as white students. Disciplinary disparities were so glaring that they were noticed by the U.S. Department of Education, which consequently issued federal orders for the district to monitor and reduce its suspension rates with a particular emphasis on students of color.

Historic decision to disallow suspensions

Minneapolis Public Schools made national history in 2014 when it disallowed suspensions for students from prekindergarten through second grade, becoming one of the first major metropolitan school districts in the United States to take such a step. The school district formed a new office to address the disproportionately high suspension rate for Black male students and encouraged educators and administrators to consider antecedent social factors that drive students' behaviors and educational achievement. To enhance the district's practices, district leadership implemented a staff panel to review all suspension decisions for students of color at each grade level and reevaluate the factors leading to the decisions. Many of the discipline reports the panel reviewed featured unremarkable misbehavior that should not have merited a suspension; district leaders returned students who were unrightfully removed to their classrooms and called the teachers and administrators involved to further discuss the situation.



By minimizing student removal from classrooms and by establishing a careful review process for suspensions of students of color, the district maximized instructional time and student presence in supportive classrooms. Dr. Johnson, reflecting on these changes, found that her review panel's work created a school discipline feedback loop that had not previously existed between district- and school-level administrators. And to reverse the misperception that school discipline is only a campus-level issue, the district aggregated data on disciplinary trends across all school districts and established mentoring relationships between administrators of schools that were reporting more racially equitable discipline statistics and administrators of schools that were not.

Restorative justice practices continue

Minneapolis Public Schools has consolidated the actions of its disciplinary action review panel into quarterly data reviews of suspension and expulsion trends, and the district conducts regular training for administrators on restorative justice practices before each school year. As of the 2023–2024 school year, Minnesota state law does not allow public schools to suspend students in kindergarten through third grade.⁵⁷ At the time of the publication of this report, we learned that the district is following this state-level policy; it is unclear the full extent to which the policy changes described above are still being implemented. At present, if a student is wrongfully suspended in the district, the district's student support services team directly contacts the corresponding school's administrators and follows up with the student's caregivers. Minneapolis Public Schools' long-standing commitment to minimizing suspensions should serve as a promising model for other school districts.

IMPLEMENTATION SPOTLIGHT 2:

Los Angeles Unified School District (CA) Passes a School Climate Bill of Rights

In late 2007, the Los Angeles Unified School District was facing a pressing problem: drug usage among students was approaching uncontrolled levels. A statewide survey conducted that year revealed that 17% of the district's seventh graders had abused inhalants—more than double the statewide average. Statewide average. While the overpolicing of some recreational drugs tends to fall along racial fault lines, substance misuse among youth and adolescents represents a serious public health concern because it impedes school attendance, hinders academic performance, and disrupts the formation of protective social support networks. Suspensions and expulsions were L.A. Unified's key disciplinary tactics to address substance misuse and broader student misbehavior. Nine of the district's middle schools had suspended at least 50% of their Black male students at least once, feeding the school-to-prison pipeline and sequestering students from the protective elements of the classroom.

In 2009, to combat these troubling realities, the district issued a policy bulletin outlining more effective strategies to rectify student substance misuse, emphasizing that suspension and expulsion are not the most effective intervention strategies. With the exception of the most egregious student offenses, the bulletin calls for positive, nonpunitive interventions that address each student's psychoeducational needs, listing school- and community-based support options such as student-parent-teacher conferences, substance use cessation programs and school health resources. From 2008 to 2014, the district's suspension rate fell from 8% to only 1.5%, and there was a nearly 15-fold decrease in the collective number of school days lost owing to suspensions.



A school climate bill of rights broadens impact

The district's interventions quickly broadened beyond addressing substance misuse. In 2013, the district's school board voted to adopt the School Climate Bill of Rights, which was collaboratively written by two community-based organizations.^{62,63,64} In this document, the district committed to:

- Instituting a new school discipline plan that disallowed any suspensions for *willful defiance*, loosely defined as student disrespect towards teachers or other peers, consistent tardiness, or even failing to submit homework assignments.⁶⁵ Because school staff members' implicit biases may foster negative perceptions of students of color, particularly Black males, as being more defiant or even violent than their white counterparts, this inherent subjectivity may guide which instances of willful defiance qualify as offenses meriting suspension.
- Implementing restorative practices in lieu of suspensions, such as schoolwide community building and open dialogues to correct problematic behavior, foster mutual understanding and preempt student conflict.
- Limiting the powers of school police officers, reassigning many disciplinary responsibilities to school administrators and newly hired restorative justice counselors.
- Establishing transparent, accountable practices and permitting students, parents and community members to access school climate data.

In the two years after adopting its School Climate Bill of Rights, the district witnessed a 78% reduction in total suspensions and a 13% rise in graduation rates. And by late 2019, six years after L.A. Unified banned suspensions for willful defiance, the suspension rate of Latino students had decreased to parallel that of white and Asian students and the difference in suspension rates between Black and white students had narrowed considerably. In May 2023, the district celebrated the 10th anniversary of its School Climate Bill of Rights and reaffirmed its dedication to restorative justice principles..

At least 25 states and the District of Columbia permit their schools to subjectively issue suspensions for willful defiance.⁶⁷ Some states have done the contrary, such as California: in 2023, Governor Gavin Newsom broadened the state's current policy to disallow suspensions for "willful defiance" for all K–12 students.

District encourages tailored, school-specific disciplinary policies

Because L.A. Unified consists of nearly 800 schools educating more than 400,000 students, district administrators encourage individual schools to tailor policies and programs to best match their respective student populations. For example, San Fernando Senior High School now offers students facing a minor on-campus substance use violation a choice: in lieu of suspension, students can, with the agreement of a parent or guardian and the school's dean, opt to attend four substance use counseling sessions with a behavioral health counselor at San Fernando's school-based health center. In the first year of this program, suspensions fell by 64%. And at nearby Roosevelt High School, administrators supplemented their existing team of guidance counselors with new hires: a teacher specializing in restorative justice, a counselor focused on preventing recidivism to juvenile detention and a psychologist addressing behavioral health needs. While creating new roles requires financial investment that may not be possible within all schools or districts, delegating disciplinary and student support responsibilities allows Roosevelt High to respond to more student needs.



IMPLEMENTATION SPOTLIGHT 3: Baltimore City Public Schools (MD) Centers Restorative Justice Practices

The city of Baltimore, Maryland, has a diverse ethnic makeup, and the predominant racial group is Black. The city has long been characterized by persistent racial disparities in socioeconomic status, housing stability, health care access and outcomes and educational attainment. In 2017, the average unemployment rate among Black households in Baltimore was 14%, as compared with 4% among white households, and their median income was \$28,950 lower⁶⁸; also during that year, one in three Black residents lived in a food desert.⁶⁹

The effects of these disparities often extend to children and youth, and thus Baltimore City Public Schools, which serves a student body composed of 81% Black students, faces unique challenges. As of summer 2018, the city's suspension rate was more than twice the national average. This situation necessitated bold actions, and the district has adopted policies and programs to correct these racial disparities, embracing restorative approaches to school discipline and other programmatic safeguards rooted in racial equity.

Professional development advances restorative justice

Because many educators and administrators were not familiar with how to implement restorative justice models, the school district partnered with a local nonprofit specializing in racial equity (Baltimore's Open Society Institute) to equip teachers and administrators with training guidebooks that provide an actionable roadmap to implement restorative practices.⁷⁰ The district conducts ongoing professional development for staff members and organizes regular feedback sessions with its stakeholder groups.⁷¹ Recognizing the importance of school-level

QUICK FACTS Baltimore City Public Schools Student to Teacher Ratio. 15:1 Type..... Large city Graduation Rate 69% Race/Ethnicity of Students Two or Latino more races 2% 16% White Asian American/ Pacific Islander Black Data from the National Center for Education Statistics (2022–2023 school year) and Public School Review

buy-in, the district has designated at least one staff member at each school to train other staff members on restorative practices.

Schools facilitate restorative justice conversations or "conferences" with students involved in conflict and often organize larger restorative conferences with students' families to help promote positive behaviors at home. Student participants are guided to critically reflect on the impact their actions had on others and how the harms can be rectified, and schools provide students with affective statements to convey their emotions and productively resolve conflict.

The restorative disciplinary practices utilized by Baltimore City Public Schools have yielded positive results: in the year after implementation of these practices, districtwide school suspensions fell by 44%.⁷² Staff members also benefited, with 72% of school staff reporting an improved school climate and 69% observing that students' mutual respect had improved. Recognizing that equitable school discipline is an ongoing effort, the district has recently identified approximately 100 schools as intensive restorative justice sites and has channeled additional resources to these high-need campuses to support the implementation, evaluation and retention of equitable school discipline programs.⁷³

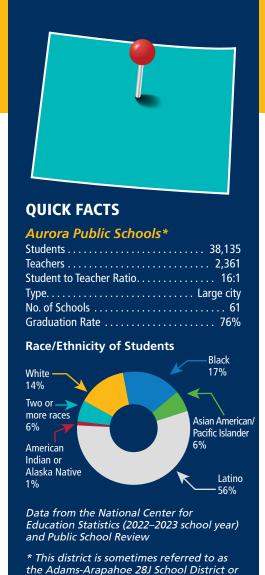
IMPLEMENTATION SPOTLIGHT 4:

Aurora Public Schools (CO) Builds Capacity of School Staff on Restorative Justice

Aurora is Colorado's most diverse city: nearly 30% of its residents are Hispanic or Latino, and more than 16% are Black. The city's racial diversity is also reflected in the student population of Aurora Public Schools, composed of 86% students of color. Aurora's rich racial diversity is an asset to the student experience; however, as a result of the district's majority-minority student body, racial disparities in school discipline can exert a magnified effect on Black and Latino students. Between 2010 and 2013, the rate of Black student expulsions in Aurora Public Schools declined from one in 62 to one in 46. This rate was still exponentially higher than the overall expulsion rate for students of all races, which remained relatively steady at one expulsion per 100 students.⁷⁴ Also, suspension rates were higher for Black students than for any other racial group: one in every seven Black students were suspended in 2012–2013, as compared with only one in every 10 students overall.⁷⁵

Overhauling school discipline practices

Recognizing that school discipline decisions involving suspensions or expulsions can often be shaped by staff members' implicit racial biases, Aurora Public Schools implemented additional layers of scrutiny in its expulsion referral processes. In the past, if a student was referred for expulsion by the school principal but did not receive a hearing, district policy required the student's file be provided to the superintendent for closer examination. The district has updated this policy: in addition to submitting a paper file referral, principals are now required to meet directly with the superintendent to justify the student's expulsion referral and hearing denial. And after the superintendent's recommendation on expulsion, all expulsion decisions undergo final review by the school board.



Aurora Joint School District No. 28.

Growing staff capacity for restorative justice practices

Alongside these new guard rails surrounding student expulsions, the district equipped its teachers with tools to better anticipate student behavioral problems, addressing these issues before they escalate to suspension or expulsion level. In 2013, Aurora Public Schools partnered with a community-based organization to build staff capacity by facilitating connections between individual schools and local community organizations that specialize in restorative justice training. A nonprofit teacher training organization, for instance, equipped educators at one Aurora school with practical strategies to incorporate restorative justice practices in their classrooms. In addition to school-specific efforts, Aurora leaders began convening administration teams for quarterly restorative justice training sessions.⁷⁷ The district, recognizing that practicing restorative justice—which can involve discussions related to trauma—can be mentally taxing for educators, partnered with a city mental health organization to support educators with mental decompression strategies and stress-reduction book clubs.⁷⁸

Promising early results

These additional protections have yielded positive results: comparing the 2012–2013 and 2016–2017 school years, the total number of expulsions in Aurora fell from 159 to 60, and the expulsion rate for Black students fell from nine to three for every 1,000 Black students. School staff reported feeling more comfortable discussing race-related topics, and these open conversations are essential to continued commitments to restorative efforts. At one Aurora middle school, referrals for suspension have fallen by nearly 40% since restorative work began; each grade level at this school is served by a staff member specially trained in conflict resolution and restorative justice principles. Teachers at the school have noticed that some students are even self-initiating restorative practices to rectify disagreements before adults must intervene.

Changes to leadership structures advance equitable school discipline

Educators of color are instrumental in dismantling inequitable school discipline structures that unfairly target students of color. Teachers of color are better retained when they work for racially diverse school administrators, and in 2014, Aurora overhauled its strategy for hiring school principals. In behavioral interviews observed by administrators, job candidates are asked to model how they would respond to an array of scenarios, some of which involve student behavior or discipline. S2,83 Through this process, the district aims to recruit quality candidates whose strategies align with the district's broader racial equity goals. As with many other districts, Aurora invites a group of students to participate in the hiring process but goes further by empowering these students to help develop interview questions and design scenarios.

Reimagining educator recruitment and retention practices

Research indicates that racial concordance between students and teachers can result in fewer suspensions or expulsions for students of color, particularly because educators of color may be better able to develop relationships and trust with students and families of color and provide a more relevant cultural context for learning. From 2013 to 2023, the number of Black teachers in the district increased from 74 to 104 (accounting for 4.3% of the district's educators) and the number of Latino teachers grew from 205 to 230 (accounting for 9.7% of educators).86 Still, teachers of color are underrepresented in Aurora, and in February 2020, the city's school board passed a resolution to strengthen recruitment and retention practices for educators of color.⁸⁷ The district is currently partnering with a national nonprofit (Promise 54) to identify new ways to recruit educators of color; the district has organized a networking event for potential applicants of color and has appointed teachers of color as "ambassadors" who connect with potential candidates.88 The district is also developing a pipeline for its own students to become future teachers in the district by supporting student-teachers, practicum students and student interns of color from local colleges or universities.⁸⁹ Aurora's ongoing approach to equitable school justice, from reimagining its expulsion policies to hiring staff members who reflect the diversity of its student body, can serve as a model for other school districts.



Beyond School Discipline: Other Equity Initiatives in Aurora

Other districtwide equity initiatives, many of which seek to effect change beyond school discipline, continue in Aurora. Since 2019, the district has invested more than \$1 million in its Young Men of Color Collective Impact Program, focused on providing strong support for and opportunities to Black and Latino male students.90 This program has served at least 10 schools in the district and has been linked to reduced discipline incidents, improved on-track rates, and better student attendance. During the 2021–2022 school year, the Aurora Public Schools Culturally and Linguistically Diverse Education department, collaborating with a statewide educational nonprofit, facilitated an equity work group between district staff and parents.91 The work group created revised, district-specific definitions of diversity, equity, and inclusion and developed a set of clear, publicly available "look-fors" that describes characteristics of an equitable school environment for both students and staff.92



Key Issue Highlight: Reimagining the Role of School Police Officers

School police officers are law enforcement officers who, acting as extensions of local police departments, are meant to assist schools with management of student behavior and overall campus security. Because most SPOs are trained in the same way as traditional police officers, they typically are not sufficiently educated in peaceful conflict resolution strategies or restorative justice practices.⁹³

A sustained police presence in schools has created negative outcomes for students of color: SPOs are more likely to intervene in altercations involving a student of color than those involving a white student and are more likely to recommend or support harsher consequences for minoritized students. SPOs' presence prematurely introduces students of color (most frequently Black and Latino boys) to the criminal justice system instead of equipping or connecting them with more effective conflict resolution mechanisms, which have been demonstrated to keep students learning in schools.⁹⁴ The effectiveness and accuracy of SPOs' work are also under question. SPO presence has been linked to higher numbers of arrests and harsher consequences for noncriminal student behaviors, including minor classroom disruptions and low-level student misbehavior.⁹⁵

SPOs are sometimes referred to as "school resource officers." In this brief, we adopt the "SPO" language, which experts from diverse organizations (including the Brookings Institution and the American Enterprise Institute) argue more accurately describes the law enforcement presence in schools.⁹⁶

The functions of SPOs can be better performed by other staff members who do not represent law enforcement: guidance counselors, crisis intervention specialists, school-based health practitioners and existing administrators, teachers, or staff who receive special training. In comparison with SPOs, school administrators are 83% more likely to adopt preventive measures that preempt student conflict instead of enforcing disciplinary measures after conflict has already occurred.⁹⁷ Despite such data, one in four K–12 students in the United States attend a school with an SPO but no school counselor, nurse, school psychologist, or social worker.⁹⁸ SPO salaries are costly to local communities and states, and these funds could be used to hire more student support staff and retain existing hires, who are less likely than SPOs to exacerbate inequitable policies and power structures.

With these data in mind, some districts around the country are reevaluating the role and even presence of SPOs. Portland, Maine, voted to eliminate SPOs from its district's two high schools with the largest proportions of Black and Latino students, reapportioning the combined \$150,000 salary savings into training other school staff in proper deescalation techniques and how to minimize racially biased decision-making.⁹⁹ In addition, the public school district in Madison, Wisconsin, replaced the SPOs at its four high schools with four restorative justice coordinators who train district teachers on restorative justice policies that prioritize racial equity by building a positive rapport with students instead of resorting to exclusionary school discipline practices.¹⁰⁰

See **Implementation Spotlight 5** on the next page.

IMPLEMENTATION SPOTLIGHT 5: School District of La Crosse (WI) Reduces School Police Officer Presence

In many localities across the country, proposals to eliminate law enforcement presence in schools can be met with major pushback, necessitating the development of alternative mechanisms to improve school climate. One such strategy is to reduce the number of SPOs within schools, minimizing their authority and responsibility and counterbalancing their presence with counselors, social workers or other staff members trained in restorative justice. This is the approach taken by the School District of La Crosse in Wisconsin.

Reduction in SPOs and shift to restorative justice

Starting in July 2021, La Crosse gradually reduced the number of SPOs district-wide from five to three and then down to two a year later.¹⁰¹ The school district thoroughly revised its memorandum of understanding with the local police department with the explicit goal of minimizing youth exposure to the criminal justice system.¹⁰² SPOs no longer wear uniforms, and many officers now host office hours to build more positive and productive relationships with students. Also, a newly established advisory committee attempts to foster accountability of the SPO program to the community's needs: the committee brings together representatives from community organizations serving persons of color, parents from ethnically diverse neighborhoods in La Crosse and representatives from the La Crosse County Department of Health and Human Services and the district school board.¹⁰³

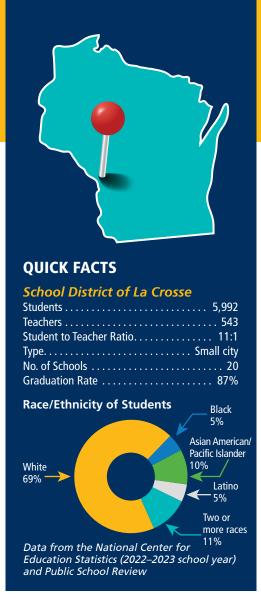
All remaining SPOs in La Crosse must complete the U.S. Department of Justice's Fair and Impartial Policing training program, which includes implicit bias aware-

ness lessons and concrete, SPO-specific strategies to prioritize racial equity. The district has also partnered with YMCA La Crosse's restorative justice chapter, inviting chapter leaders into district schools to train student leaders to become restorative "circle keepers" or moderators. This initiative empowers students to take ownership of restorative practices and ensures the sustainability of policies. The district has also used its YMCA collaboration as a springboard to offer additional training in restorative justice practices to teachers and staff who may sit in on these student-led circles.

Investing in training, services, and mental health support

The yearly savings of \$150,000 from the elimination of two SPO positions now pays the salary of a social worker (who is shared among district schools) and funds efforts focused on restorative justice, wraparound social services and mental health support. All remaining SPOs are now mental health first-aid certified, equipping them to better recognize, understand and respond to substance abuse and mental health challenges that students face. And the district's two cultural liaisons, who play critical roles in building relationships with students of color, also have this certification and (beginning in the 2023–2024 school year) are providing mental health first-aid training to the district's students and parents.

Although more time is required to study the long-term effects of these changes, early results are promising: between 2019 and 2022, the juvenile arrest rate in La Crosse fell dramatically from 14% to 3.9% and the district's out-of-school suspension rate fell from 12.5% to 1.5%. The number of juvenile citations in La Crosse City, which includes those originating in its schools, fell from 524 in 2019 to 184 in 2023 (a 65% decrease) and the number of charges fell from 400 in 2019 to 323 in 2023 (a 19% decrease). And while there has been a slight uptick in the number of citations after the pandemic as students readjust to inperson learning, this is consistent with national trends.



A Grim Reality: Reversal of Some Policies Reducing or Eliminating SPO Presence

While many school districts have implemented commendable changes in terms of diminishing or eliminating the presence of SPOs in schools—with positive effects on school climate—some districts, particularly those in large urban areas, have recently made the troubling decision to pause or even reverse their reduction in SPOs. ¹⁰⁸ In 2021, for instance, the City Council of the District of Columbia voted to gradually have police-free schools by 2025 but repealed this plan in May 2023. In fact, of the 50-plus districts that either ended or divested from their SPO programs between May 2020 and June 2022, at least eight have since reversed course and reinstated SPOs. ¹⁰⁹

Despite these troubling changes, the data remain clear: a renewed police presence in schools is not the answer. The presence of SPOs continues to disproportionately harm students of color and reinforces external patterns of systemic racism.

As such, more effective ways to maintain student safety in schools are needed, and further nonpolice safety solutions to replace SPOs must be piloted, implemented, and evaluated.

Additional Resources: Crafting Equitable School Discipline Policies

- Learning for Justice, a project of the Southern Poverty Law Center, has created a Foundations of Restorative Justice toolkit that offers additional effective practices for school discipline and classroom management.
- As of January 2024, corporal punishment of students in public schools was still legal (although sometimes restricted) in at least 17 states, and the physical and mental health ramifications of this practice disproportionately harm students of color: Black males are hit or spanked at school almost twice as frequently as their white peers. Yiew recently updated policy statements to disallow corporal punishment in schools.

La Crosse, Wisconsin: Supporting Hmong Students with Community and Cultural Connections

More than 130,000 Hmong settled in the United States from the mid-1970s to the early 2000s, with immigration driven by political conflict and civil wars in Laos and other countries in Southeast Asia. 105 Often included as part of the broader Asian American/Pacific Islander (AAPI) group, Hmong Americans and their descendants face continued challenges and exhibit poorer outcomes than those of other AAPI ethnic groups. In 2019, 46% of the Hmong population in the United States had only a high school diploma or less (as compared with 39% of Americans overall and 27% of the U.S. Asian population), with a higher percentage of Hmong living in poverty than the general U.S. population. 106

Wisconsin is one of the three states with the highest populations of Hmong, with this ethnic group representing more than one third of the state's Asian population. ¹⁰⁷ The city of La Crosse is home to a significant Hmong population. Its school district serves more than 500 students of Hmong heritage, many of whom are the American-born children of Hmong immigrants who never completed high school, leading to a host of challenges and poorer educational and health outcomes. The district reports that many Hmong families it serves are still in a transition period and continue to need social service support.

Since its cultural liaison position was established in 1996, the School District of La Crosse has identified innovative ways to elevate, teach, and honor Hmong culture and its impacts on the local community. The district's two high schools now offer Hmong-language classes taught by a Hmong instructor. Open to all students—not only those of Hmong heritage—these courses count as foreign language credits. Considering the shortage of Hmong-speaking teachers and school staff, these classes demonstrate the district's commitment to creating an inclusive and multicultural school environment for its Hmong students (one high school's theater chapter has put on a Hmong-centered student play).

IN ADDITION TO PROVIDING DIRECT HEALTH CARE TO STUDENTS, SCHOOL-BASED HEALTH CENTERS CAN COUNTERACT UPSTREAM HEALTH DISPARITIES AFFECTING MARGINALIZED STUDENTS.

SBHCs ARE A VITAL PREVENTIVE HEALTH RESOURCE PARTICULARLY FOR STUDENTS OF COLOR, WHO ARE LESS LIKELY TO CONSISTENTLY ACCESS HEALTH CARE THAN WHITE STUDENTS AND MORE LIKELY TO DEVELOP FUTURE CHRONIC HEALTH CONDITIONS. 112



Promising Practice 3:

Support the expansion of school-based health services for underserved students of color and supplement programs and services with targeted initiatives that advance racial health equity.

SCHOOL-BASED HEALTH CARE PROVIDERS, many of whom work at wellness centers or school-based health centers (SBHCs), provide millions of K–12 students nationwide with preventive health care services including acute care, mental health support and connection to social support resources. The establishment of more SBHCs has long been a priority for education and public health leaders, and between 1997 and 2017 the number of SBHCs nationwide more than doubled.¹¹¹

In addition to providing direct health care to students, SBHCs can counteract upstream health disparities affecting marginalized students. SBHCs are a vital preventive health resource particularly for students of color, who are less likely to consistently access health care than white students and more likely to develop future chronic health conditions. ¹¹² A recent long-term study in a large urban school district in California showed that after a single visit to an SBHC, a student's school attendance typically increased by 5.4 days after any type of visit and by 7.0 days after a mental health visit. ¹¹³ Greater access to school-based health care has also been correlated with lower rates of hospital admissions or emergency room visits and improved nutrition and physical activity. ¹¹⁴

SBHCs are a net positive for all students but are a particularly crucial source of primary health care for students of color, who, in comparison with their white peers, have lower rates of insurance coverage, transportation access and health-related awareness or education—all of which constrain their access to health care.¹¹⁵ And even if they have a primary care provider outside of school, many families, particularly those with low incomes and those living in communities with few providers that accept Medicaid, still prefer and depend on SBHCs because of their immediacy and high accessibility.¹¹⁶ In 2020, Black students were almost 600 times more likely than white students to receive mental health care at school as opposed to other places.¹¹⁷ Another study revealed that Black and Latino male students in low-income urban schools trusted and valued mental health services in SBHCs from racially diverse providers who understood their unique needs and challenges.¹¹⁸

Despite these enormous benefits, only 3% of American schools currently have an SBHC.¹¹⁹ Even when SBHCs are present, they often lack sufficient funding or an adequate number of appropriately trained health care professionals.¹²⁰ Many SBHCs struggle financially and must be heavily subsidized by external organizations, local hospitals, or private donors, which are often inconsistent, unstable, or limited-duration funding sources.¹²¹

Students of color require tailored school-based health services, including mental health services, that are inclusive of and respectful towards their unique lived experiences. Black and Latino youth, many of whom routinely contend with structural and systemic racism, microaggressions and harmful explicit and implicit biases, benefit most from behavioral health providers who can empathize or even identify with their unique struggles.

But while many SBHCs are based in schools with a high concentration of students of color, the health care services provided may not be sufficiently culturally relevant for students of color. Black and Latino students with mental health needs are more likely than their white peers to receive punishment as opposed to mental health care in school settings, ¹²² and Latino students with psychiatric disorders are less likely to use SBHC services than white students as a result of cultural differences and language barriers. ^{123,124}

Therefore, in addition to broadening their students' access to health care by funding, expanding and enriching school-based health centers, school districts must directly advance health equity for their students of color by adopting and implementing specific policies and practices to hire more providers of color and build the capacity of existing staff through ongoing training.

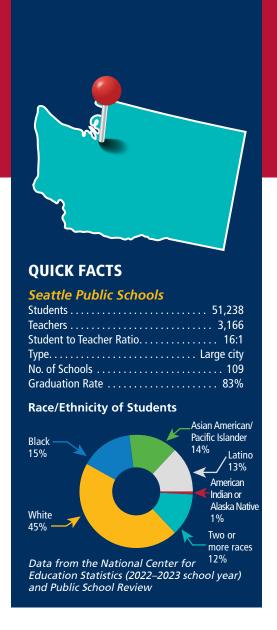


IMPLEMENTATION SPOTLIGHT 1: Seattle Public Schools (WA) Creates Accountable Structures for Its Wellness Centers

Seattle Public Schools is Washington State's largest school district and is among the state's most diverse: in 2023, students of color made up more than 50% of the district's students. 125 However, disparities in educational attainment and graduation persist. In the 2021–2022 school year, only 28.8% of Black students and 41.7% of Latino students in grades 3–8 and 10 were reading at grade level, as compared with 62.7% of district students overall and 77.1% of white students. 126

In addition to exacerbating disparities in educational attainment, the generational effects of structural racism disproportionately harm the physical and mental health of people of color in Seattle. In King County, of which Seattle is a part, Latino residents are 5.4 times more likely to lack health insurance than their white counterparts and 2.6 times more likely to forgo doctor visits because of high costs.¹²⁷ In addition, the infant mortality rate for babies born to Black mothers is more than double that of babies born to white mothers,¹²⁸ and children in Black families are 2.5 times more likely than children in white families to face barriers to transportation, limiting their ability to access health care services.¹²⁹

These glaring disparities in educational attainment and health outcomes, compounded by barriers to health care access, cement the power of school-based health centers to provide care to marginalized youth of color in Seattle Public Schools. Resultingly, the city of Seattle has made sustained investments to not only expand the number of its SBHCs (there are currently 29 districtwide) but also ensure that SBHCs are structured and developed in ways that specifically advance health equity for students of color.



Clinic coordinators create inclusive clinic spaces

Each Seattle Public Schools SBHC has a designated clinic coordinator who serves as a consistent point of contact for all students and has front- and back-office responsibilities. (While Seattle Public Schools is the largest district in King County to have a clinic coordinator in each SBHC, other districts in the county also have these positions.) Clinic coordinators lead a relational approach that increases visibility and trust between students and the SBHC; they are typically the most visible multilingual, multicultural members of the SBHC team. Coordinators are the first and last individual students see upon their clinic visit, and they perform clinic outreach, lead health education initiatives and connect students to community social support services (such as where to obtain dental care or health insurance coverage). Largely because of the clinic coordinators, students have reported that they feel more comfortable visiting their SBHC (with some students even opting to eat lunch alongside the coordinator and care providers). Clinic coordinators in Seattle Public Schools, together with other coordinators in surrounding districts, participate in learning collaboratives to further develop their ability to work consciously towards creating an inviting, welcoming environment for all students, including those of color. More information on the role of clinic coordinators can be found in the SBHC clinic coordinator toolkit prepared by the Public Health-Seattle & King County and the Washington School-Based Health Alliance.

Structured communication promotes integration and accountability for SBHCs

Too often, SBHCs can be collocated to school campuses but remain unintegrated with the school community, leading to decreased visibility or reliability for students and staff. Students, particularly those of minoritized ethnic backgrounds, those with low health literacy and those who are uninsured or underinsured, may not view wellness centers as having the resources that would support them (or they may be entirely unaware of the center's existence). Also, school staff, including teachers and school nurses, may not have the infrastructure to facilitate referrals of students to SBHC staff, and little visibility into SBHC practices may lead to teachers being unwilling to allow students to leave class for SBHC visits.

To help promote bidirectional communication between SBHC staff and school principals, Seattle Public Schools' Community Alignment Initiative, along with Public Health-Seattle & King County, has developed a partnership agreement that each SBHC service provider in the district must submit annually. One section of the school-SBHC agreement focuses on ongoing communication, requiring school principals to meet formally with their school's SBHC team at least three times per year (and recommending additional informal communication and ad hoc meetings as needed). And the district encourages schools with new SBHC partnerships and those experiencing challenges to meet monthly to strengthen alignment and improve student outcomes. Upon submission of the agreement in August each year, the district asks each SBHC care provider to enter dates of required milestone meetings, promoting an accountable communications plan from the outset.

Milestone Meetings Between School and SBHC Leaders

Seattle Public Schools outlines specific best practices for each of three milestone meetings to strengthen alignment with the district's equity-focused strategic goals and promote improved student outcomes, particularly for those students furthest from educational justice.

- **Pre-year summer launch meeting:** The district directs principals and their SBHC site coordinators to review the memorandum of understanding, share school and SBHC plans for the coming school year, and review mutual expectations.
- **Fall meeting:** Principals must introduce the SBHC team to school staff, thus promoting visibility, mutual understanding, and trust; discuss any needs or requests of their SBHC partner to best support the school community; and identify specific ways to collaborate to align complementary support for individual students and their families per school goals.
- Winter milestone meeting: The district instructs both parties to review student data to identify students who need additional support from the SBHC, including social-emotional learning skills, mental health, or family support services. Partners are also asked to check in regarding success and challenges with the school-SBHC partnership and identify any needed course corrections, including how to improve communication and information sharing practices.

Seattle Public Schools also invites the leader of Public Health-Seattle & King County's school-based partnerships team to present at each August districtwide meeting of principals, allowing school leaders to update their knowledge about equity-focused SBHC practices. In addition, the district works with Public Health-Seattle & King County to facilitate FERPA-compliant data-sharing agreements between each school and the collocated SBHC: student attendance records, suspension and expulsion metrics and other data are shared with clinic providers so that they can better tailor their care to the unique needs of each school population. Seattle Public Schools' structured, up-front communications plan thus promotes mutual understanding, accountability and alignment of goals between school leadership and SBHC providers, in turn increasing students' knowledge of and trust in the SBHC.

Consistent communication between school leadership and SBHCs has led the district's partnerships team to facilitate strategic placements of health care providers across the district to best meet student needs. For instance, one of the district's secondary schools (Seattle World School) serves a culturally and linguistically diverse population of many newcomer students, and the SBHC located there is operated by a provider focused on providing culturally and linguistically appropriate health and wellness services to international patients. And at another school where a high number of students are experiencing homelessness, the SBHC provider plays an increased role in connecting these students with housing and mental health resources. This district's facilitation of consistent, intentional dialogue among school administrators, county leadership and SBHC providers ensures that its health centers serve diverse school communities in targeted ways.

County-level support helps advance health equity

In addition to directly operating three of the 36 SBHCs in the county, Public Health-Seattle & King County (which itself operates as a federally qualified health center) provides ongoing cross-county support and training for SBHC providers. For instance, the director of strategic partnerships and leaders of the coordinated school health team in Seattle Public Schools have organized monthly meetings with the county public health department's leader of school-based partnerships, ensuring alignment of SBHC goals. The county also facilitates monthly meetings with SBHC managers across King County and has hosted an educational equity conversation series for SBHC personnel focused on trauma-informed care in urban communities and a healing-centered approach to care delivery. In the past, the county public health department has partnered with an organization called Washington Building Leaders of Change to provide ongoing training on racial equity, restorative justice and how race can impact student achievement and health.¹³¹ Specifically, SBHC teams have been trained to facilitate restorative justice as "circle keepers."

County-led efforts have recently unlocked funding to expand SBHC locations and services within Seattle Public Schools and surrounding districts through a \$2.4 million donation from a private foundation. 132 This funding will help hire multicultural and multilingual SBHC providers, particularly mental health professionals, to better serve the needs of county students. County-level support has thus led to a public-private partnership in which local philanthropy is matching public investments in strategies that help SBHCs expand their services beyond the provision of basic health care.



IMPLEMENTATION SPOTLIGHT 2: Long Beach Unified School District (CA) Creates Community-Focused Wellness Centers

The Long Beach Unified School District—the fourth largest district in California in terms of student enrollment—is considered by many as a top-performing district. ¹³³ Nevertheless, it still struggles with the racial disparities in academic attainment and school discipline visible in other school systems: students of color are less likely to engage in rigorous coursework and are more likely to be suspended or expelled than their white peers. ¹³⁴ About 33% of Black and Latino students in the district do not attend college after high school graduation, as compared with only 23% of non-Black and non-Latino students. ¹³⁵ While the district had hired a team of social workers in 2007, the subsequent 2008 recession forced the district to eliminate these positions. The COVID-19 pandemic highlighted long-standing educational and health inequities in the district, elevating discussions about ways to bring back social workers to support student mental health.

Data-driven approach guides launch of wellness centers

At the outset of the 2021–2022 school year, Long Beach Unified opened its firstever district-operated wellness centers at its 11 comprehensive high schools. Each wellness center was staffed by a social worker (with most centers led by licensed clinical social workers) recruited from a local mental health agency, outpatient mental health provider or nearby school district.

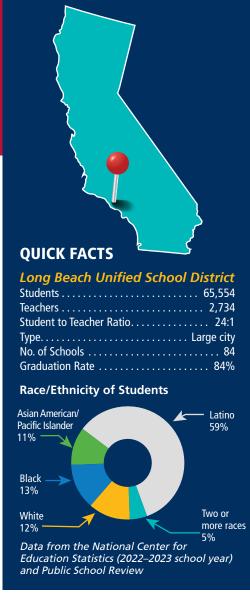
To steer the program's launch, the district hired a new assistant director within its division of student support services who researched effective preventive care models and conducted interviews with other wellness centers nationally before applying this information to craft a district-specific, structured framework detailing

best practices, roles and responsibilities for each newly hired social worker. Following this framework, the wellness centers provide a safe space with individual and group counseling, support groups, mental health wellness activities, staff support and linkage to community resources such as food, school supplies, hygiene products and more.

The district has advanced health equity in targeted ways by, even in the early phases of its wellness center launch, implementing systems to capture student data—demographics of visiting students, chief complaints and more. All data are regularly monitored, shared with district administrators and used to strengthen programs. District leaders were reportedly surprised when they learned that, in the first year alone, 60,000 students visited the 11 wellness centers. Driven by the clear unmet need and positive student reception indicated in the data, the district expanded wellness centers to middle school campuses in the 2022–2023 school year. Social workers divided their time between two middle schools (because of staffing shortages), but data on student visits and satisfaction revealed that students needed consistency and the ability to visit the wellness center every day of the week. As a result, district leadership in the 2023–2024 school year invested funds to hire more social workers for middle schools. Today there are 32 schools in Long Beach with wellness centers, and each center is run by a social worker (and a part-time intern when possible).

Integrating wellness centers into the school community by addressing needs

Too often, school-based health or wellness centers operate in a siloed fashion, isolated from community feedback. Long Beach is a highly socioeconomically and racially diverse city, and to consistently elevate school-specific student needs and become more closely intertwined with the school population, the district also extends its data-driven approach to capture community feedback. Students were asked to pitch names for the centers; today, friendly names such as "Dragon's Den" create more welcoming and approachable



wellness centers. And within the first month of the establishment of the school wellness centers, the district surveyed its students, parents and staff, asking what services they envision each wellness center as providing and gathering information on community priorities. Today, the district regularly conducts surveys to monitor use, perceptions and outcomes of its wellness centers.

The district also strategically placed social workers at high-need schools. Long Beach has a large Spanish-speaking immigrant population, and most of the district's social workers are Latino and Spanish speaking. At one middle school with a particularly large Cambodian immigrant population (Nelson Middle), the district has stationed a Khmer-speaking social worker. Bilingual social workers conduct support groups for newcomer students and English-language learners, inviting students to talk about their experiences and share what they miss from home. Multilingual and multicultural care providers are thus essential to creating inclusive, equitable wellness centers for students of color.

At other schools in the district exhibiting higher general academic achievement, wellness center social workers have reported that students—including those at high levels of need—resist attending counseling appointments at their wellness center, hesitant to miss class and fall behind. To ensure that students can access care when needed, the district has tailored its programming to schedule student wellness support and counseling during key times (in the morning, during lunch and after school), emphasizing organic, unstructured activities that, by not exacerbating academic stress, lead to more students accessing wellness center services.

Wellness centers operate at schools with different climates and student bodies. The district has further integrated its wellness centers with the broader school community by inviting external collaborators to create center programming that helps tackle social factors driving poor outcomes among marginalized students. As a result of efforts by community-based organizations, every wellness center now has a food pantry or hygiene product repository; nonprofit organizations provide prom attire each spring, and therapy dogs and yoga sessions help advance student wellness and community integration.

District wellness center complements an existing school initiative

District leadership realizes its wellness centers must complement existing structures and programs to reach all students who need health care services. Although Polytechnic High is one of the district's largest schools, its wellness center is among the district's smallest owing to space constraints. As such, Polytechnic's wellness center complements the long-standing services of the school's Counseling, Assistance, Resource & Education (CARE) Center. To meet student demand during high-traffic periods, Polytechnic's wellness center and the CARE Center simultaneously see students and provide mental wellness support.

The CARE Center helps facilitate a school-to-career pipeline for future social workers and mental health workers through a long-standing peer mentoring program. The center offers two for-credit classes: Social Work and Community Advocacy, predominantly taken by 11th graders, and the Developing Future Mental Health Professionals capstone course for 12th graders. Students undergoing personal difficulties may sometimes not want to talk to adults and would rather talk to a peer with similar experiences. As a result, students taking the CARE Center's two courses serve as peer counselors and mentors at Polytechnic High and at nearby Roosevelt Elementary School. Each year the center averages approximately 1,350 individual student visits, of which peer mentors assist with more than 20%. Student mentors also offer mental health—related classroom presentations, organize schoolwide mental health assemblies and convene community-wide wellness weeks that unite various community stakeholders.

Nationwide, there is a shortage of multicultural or multilingual social workers and mental health professionals who are similar in terms of diversity to those they serve. However, Polytechnic's CARE Center student mentors are nearly 60% Latino, 23% Black and 17% Asian American or Pacific Islander, helping create more inclusive, trustworthy services for their peers of color. One current student mentor who identifies as a person of color reports that the work is fulfilling, especially when it involves supporting younger students of color at the nearby elementary school.

Wellness centers and school administration remain in close contact

In the first year of the wellness centers, the division of student support services noticed that some teachers and administrators were hesitant to send students to wellness centers. Because they did not understand the importance of ongoing preventive health practices in supporting long-term physical and mental health outcomes, some staff were waiting until students were in crisis before referring them to their school's social worker.

In late 2024, program leadership provided each school's leaders with information on their school's social worker and wellness center data (for example, visits, utilization and chief complaints), an explanation of the data, a list of the social worker's roles and responsibilities and details about possible interventions. School administrators were also given campus-specific suggestions on how to further strengthen and support their wellness center, such as conducting class tours of the center, ensuring that teachers are aware of (and properly following) referral protocols and inviting social workers to present their work and data at staff and community meetings. Many principals have displayed positive reactions to (and often surprise regarding) the data they receive, asking wellness center program leaders for continued suggestions. Increased visibility into the successes and challenges of wellness centers and tailored communications to individual schools, have therefore been key to advancing students' access to quality, culturally inclusive care.

In the words of one program leader, "It's important to be very transparent in your work and share [it] with all your stakeholders. Everybody should know what your wellness center is doing continually. It's everybody's business."

Close Collaboration between District Leaders and SBHC Operator in Long Beach Expands Health Care Access Among Students of Color

Social workers at Long Beach Unified's wellness centers can refer students to be seen at the three school-based health centers districtwide, which are located at two elementary schools and one middle school. TCC Family Health—formerly known as The Children's Clinic—is the clinical care operator at these SBHCs (and at other community clinics elsewhere in Long Beach). A decade ago, TCC Family Health became the first major community health center in Long Beach to take a trauma-informed, cross-cultural approach to care, and today district officials (including both the assistant superintendent and director of the School Support Services division) regularly meet with the chief executive officer of TCC Family Health to ensure goal alignment and share trends, challenges and solutions regarding student health. Long Beach district administrators have also invited TCC Family Health's chief executive officer and chief medical director to serve on the district's student attendance review board, advising the district and supporting families whose students are missing school because of family health issues. New students at Polytechnic High School take school-led walking tours across the street to the TCC Family Health Center at Roosevelt Elementary, and the district's schools consistently invite the SBHC operator to open houses and school-organized wellness weeks to directly communicate to students at the highest levels of need who may not otherwise be aware of available services. Long Beach Unified also benefits from TCC Family Health's diverse practitioners, including Khmer-speaking clinicians and a larger number of Spanishspeaking therapists (about 70% of the district's student body is Latino) who work across the three SBHCs.





Community Advocacy Helps Expand Health Care for Cambodian Students

Although Asian populations in America often exhibit some of the highest outcomes on health, academic achievement, income and career attainment metrics, these positive trends dissipate when data are disaggregated. Cambodians in America contend with an array of health disparities; for example, they have lower incomes and academic attainment than the U.S. population overall.¹³⁶ A lack of bilingual or bicultural health workers also complicates health care access given that English is not the primary language among some of these populations.¹³⁷

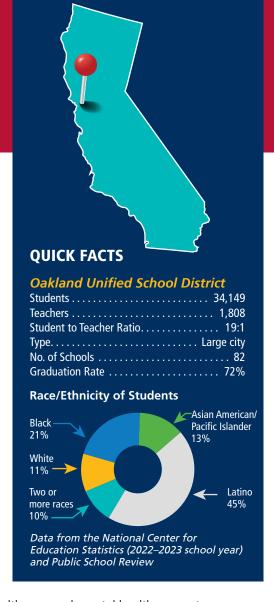
These overlapping factors of marginalization are highly apparent in Long Beach, which is home to the largest population of Cambodians outside Cambodia. Youth from marginalized, low-income Asian American populations, such as Long Beach's Cambodian population, generally experience high rates of cultural invisibility and rarely receive culturally competent student support services. ¹³⁸ By early 2015, two SBHCs were operating within the Long Beach Unified School District, but both were relatively far from the highest-density Cambodian populations in the city. While district leaders were considering establishing a third SBHC, grassroots advocacy from Khmer Girls in Action—a Long Beach-based, student-led advocacy group for young Cambodian American women—enhanced the visibility of Cambodian students' health care needs and encouraged district leaders to prioritize this population. In spring 2015, this group's student leaders conducted a study that revealed high rates of illiteracy, pregnancy, school dropout and self-reported depressive symptoms among Cambodian students in Long Beach. ¹³⁹ Khmer Girls in Action shared this information with district leaders, recommending that they open a third SBHC near the heart of Long Beach's Cambodian community. ¹⁴⁰

In fall 2015, Long Beach Unified opened its third SBHC at an elementary school near a site recommended in the advocacy group's proposal. Khmer Girls in Action collected 1,500 survey responses on what hours of operation would be most beneficial and accessible for the new SBHC.¹⁴¹ As a direct result of this advocacy, the new SBHC created teen-only hours each Friday during which appointments from other age groups were blocked, allowing high school students to receive confidential support on sensitive topics such as menstrual health, safe sex, mental health and health insurance access. We recognize the efforts of Long Beach Unified leaders to foster partnerships with and heed the recommendations of community-based groups that center minoritized racial groups.

IMPLEMENTATION SPOTLIGHT 3: Oakland Unified School District (CA) Advocates for Unaccompanied Immigrant Youth

Newcomers and unaccompanied immigrant youth in Oakland

Oakland, California, is one of America's most racially diverse cities, with many immigrants from Central and South America in particular. 142 Newcomers students who were born outside the United States with a home language other than English and who have been in the country three years or less—make up a substantial portion of the Oakland Unified School District's student body. 143 In the 2022–2023 school year, the district served 3,065 identified newcomer K–12 students, and one out of every eight district high schoolers was a newcomer. 144 Particularly vulnerable are unaccompanied immigrant youth (UIY): newcomers who arrive without their parents to flee violence, poverty or trauma and seek better opportunities in America. 145 Of all school districts in California's Alameda County, Oakland serves the greatest number of unaccompanied immigrant youth, 146 who predominantly hail from Mexico, Honduras and El Salvador. The multitude of complex issues with which these students arrive often makes it difficult for them to stay engaged in school, and retention and graduation rates for this group are therefore lower than those of their U.S.-born peers. 147 In addition, these youth endure traumatic journeys from their home countries, and many have been detained at the border, have spent time at an immigrant detention center or have parents who remain in their home country or are deceased; because of these traumatic upbringings or experiences, this group often has poor physical and mental health outcomes. School districts with large numbers of unaccompanied immigrant students are challenged with creating programs to help these students



meet basic needs such as safety, affordable housing, food, legal representation, health care and mental health support.

SBHCs provide culturally relevant services for unaccompanied immigrant students

Oakland Unified is leveraging its existing school-based health centers as a key component of multitiered, wraparound support for these youth. Supported by investments from Alameda County's *Caminos* program (see the text box below), the district is actively connecting unaccompanied immigrant students to SBHCs, providing them with preventive physical and mental health screenings and services. Alameda County's Health Care Services Agency has also provided the Oakland Unified School District with its own UIY specialist and behavioral health consultants who are responsible for identifying and linking UIY with mental health services available at school. Health centers from several school districts in Alameda County are positive: more than 90% of UIY served by school-based health centers report that they "received services that were right for me" and that the adult helping them "was sensitive to [their] culture and ethnic background." Alameda Unified also partners with community-based organizations to provide ongoing healing programs and services at its schools; the locally based Freedom Community Clinic, for instance, leads programs at two Oakland schools that serve Spanish-speaking UIY and students and staff afflicted by gun violence.

Licensed clinical social workers' symbiotic relationship with SBHCs

School-based health centers are, by definition, located on a school campus, but their visibility and impact can often be limited by insufficient integration with the school environment and student population. For instance, SBHCs including those in Oakland Unified—are typically not operated or staffed by the district itself but rather by community-based clinics or local hospitals that provide the necessary staff, expertise and infrastructure. SBHC providers may therefore benefit from additional support to better understand, represent and align themselves with the unique cultural and language needs of their patients. To this end, Oakland Unified complements its SBHCs with a staff of 14 directly employed, licensed clinical social workers (LSCWs). All LCSWs are bilingual in Spanish, and these individuals are placed at 16 of the district's middle and high schools with the highest numbers of newcomer youth, serving as a lead advocate for these students' needs. At Oakland schools with SBHCs, these social workers collaborate closely with center providers and often have offices within or directly adjacent to the centers. On newcomer students' first day in Oakland Unified—which is frequently shortly after their arrival to the United States—the district partners them with an LCSW who provides support with cultural adjustment and basic needs by liaising with district staff, community partners and social services. As part of the district's first-day programming for newcomer youth, the social worker walks students to the SBHC, accompanies them on a tour and sends home consent paperwork that allows them to receive services. LCSWs, who are trained mental health clinicians, enrich SBHC services by providing (when requested) bilingual, bicultural therapy or emotional support, and when a student has a concern outside the LCSW's scope (such as safe sex practices), the social worker facilitates a referral to SBHC providers. The strong, trusting relationships that LCSWs build with newcomer youth therefore increase the visibility, cultural relevance and impact of the district's SBHC services.

Developing bicultural, bilingual future clinical social workers

This district's programs demonstrate the tremendous value social workers have in advancing health equity for newcomer youth. However, there remains a need to ensure that our nation's graduate social work programs appropriately emphasize cultural consciousness and anti-racist practices in the case of marginalized racial or ethnic groups. 151 To this end, the Oakland Unified School District is supporting the development of future clinical social workers with its Newcomer Wellness Initiative Clinical Intern Program. Launched in September 2022, this district-created initiative recruits master of social work and master of clinical counseling students from local Bay Area universities for an academic yearlong mentorship and professional development experience. (Intern stipends are supported by Alameda County's Caminos program.) Clinical interns spend two or three days weekly at Oakland Unified schools, shadowing and training with the district's LCSWs to support case management for UIY students. Interns also participate in staff meetings alongside LCSWs, partake in professional development on culturally relevant practices and regularly discuss their training experiences with cohort members in peer communication groups. And although many interns in the previous two cohorts were fluent Spanish speakers.

Alameda County's Caminos Program Supports Initiatives in Oakland Unified and Beyond

Alameda County is home to the secondhighest number of UIY in California. The Caminos program, led by Alameda County Health, provides case management, health education, workshops, and home visits for UIY and children of migrant families across the county's school districts. 153 The Caminos program convenes numerous UIY-focused local organizations—such as UCSF Benioff Children's Hospital, which provides culturally relevant health care and mental health supports to UIY at their SBHC at Castlemont High School—in monthly learning communities that train partners on indigenous languages, customs, and culturally relevant practices when serving UIY. 154 The Caminos program has been instrumental in helping coordinate care across the district's various systems of support and has provided training and consultation across Alameda County school districts to help school site staff better understand the unique needs of this population. And the Caminos program helps fund district-level initiatives including the Newcomer Wellness Initiative Clinical Intern Program.

In fall 2023, the Caminos program hosted its first county-wide conference, educating more than 100 participants including school district administrators, staff and SBHC providers. Conference attendees learned, for instance, that therapy may not be the highest priority for UIY students or their caregivers; instead, attendees were equipped with culturally specific strategies to support these students' emotional health while taking a clientcentered, needs-first approach. The program's county-wide learning spaces foster collaboration across various learning sites, empowering SBHC providers and district leaders to share best practices. Alameda County's capacity building and vision setting therefore help drive school district-level initiatives and successes, demonstrating the importance of multiple power structures working together to achieve health and racial equity.

Spanish speakers, the program emphasizes bicultural, bilingual, and professional language training for situations unique to UIY, who may be hesitant to engage with social services as a result of concerns about immigration status or security, stigma or trauma related to mental health, absence of familial support, or lack of cultural familiarity. For instance, interns participate in a monthly two-hour clinical *charla* (chat) during which they speak entirely in Spanish to practice vocabulary and build fluency in discussing sensitive topics specific to UIY.

Oakland Unified's Newcomer Wellness Initiative—from its LCSW staff to its new clinical intern program—demonstrates the district's commitment to advancing equity for its newcomer youth, most of whom are Latino. An alum from the internship program's launch year remarked that because graduate social work classes are taught in English from an American cultural perspective, students typically resort to adapting sensitive concepts to Spanish¹⁵²; this program is thus essential for developing linguistically competent, bicultural, trauma-informed clinicians.

While the program remains in its early stages, district leaders are heartened by its promise and hope that some program alums may one day return to serve Oakland students. Bilingual and culturally respectful clinical social workers and an accompanying education-to-career mentorship program serve as vital components of multitiered systems of support for students of color and can broaden the reach and strengthen the impact of SBHCs.

State Support of School-Based Health Services Remains Vital

District-level changes expanding and improving school-based health centers are crucial and the focus of this brief, but long-term equity cannot be ensured without sustained funding and support from states. However, 15 states still do not provide any funding to school-based health centers, 154 stymying the ability of SBHCs to expand, hire staff, or build the capacity of multilingual and culturally informed care providers.

Even when federal funds exist to help, some states continue to resist funding SBHCs: since 2014, the Centers for Medicare & Medicaid Services has allowed Medicaid funds to pay for school-based health services for students enrolled in the program.¹⁵⁵ (Previously, Medicaid funds could be used only to pay for school health services delivered to students with disabilities, special needs, or an individualized education plan.¹⁵⁶)

Nevertheless, only half of eligible American public schools currently bill Medicaid to defray SBHC costs, leaving millions of federal dollars on the table. For the districts that are billing Medicaid, the benefits can be immense: in 2021, for example, Chicago Public Schools received \$40 million from Medicaid, and districts in Texas collectively received more than \$740 million in federal Medicaid funds to support, among other initiatives, their SBHCs.

Considering the funding challenges that SBHCs face, full access to federal Medicaid resources is essential to expanding access among marginalized students in underserved areas. States must take full advantage of federal dollars by ensuring that their statewide Medicaid plans and other state-level policies allow and encourage school districts to bill for services rendered to low-income Medicaid-enrolled students.

Washington is one notable state robustly funding its SBHCs: in April 2021, its governor signed legislation expanding school-based health centers with a focus on historically underserved populations and students of color.¹⁵⁷. The legislation established the School-Based Health Center Program Office and directed \$2.4 million to SBHCs to fund training and technical assistance for personnel. In 2022, the office awarded 17 grants to help fund new SBHCs and the start-up or implementation of behavioral health programs within these centers.¹⁵⁸ Other states with notable grant programs equipping SBHC personnel with funding, tools, and training include Oregon and Minnesota.

Additional Resources: SBHCs and Racial Health Equity

- **Federal funding opportunities:** In October 2022, the United States Department of Education introduced its School-Based Mental Health Services Grant Program, which is funded by the 2022 Bipartisan Safer Communities Act.¹⁵⁹ The grant program, which awards \$144 million to high-need states and school districts nationwide, confers competitive priority to applicants focusing on expanding the diversity of SBHC providers. (Here "diversity" with respect to providers is defined as providers who have diverse backgrounds or come from high-need communities that the school district serves.) Grant applications that include initiatives to recruit underrepresented groups, including groups underrepresented in terms of race or national origin, are favored by grant reviewers. Similar agencies responsible for education in each state should provide funding to supplement the federal program and directly support the application processes of school districts that would otherwise have insufficient resources or staff to navigate the federal grant process.¹⁶⁰
- Additional recommendations: The California School-Based Health Alliance has compiled a list of specific recommendations on how SBHCs can advance health equity in its From Vision to Reality toolkit. These strategies include acknowledging the legacy of racism in medical care, facilitating peer affinity groups in SBHCs, and conducting active outreach to the most marginalized students.



THE SCHOOL DISTRICTS MENTIONED IN THIS REPORT HAVE ALL IMPLEMENTED BOLD ACTIONS ALONGSIDE, AND SOMETIMES DESPITE, LOCAL, REGIONAL AND NATIONAL POLITICAL ENVIRONMENTS WITH THE GOAL OF CREATING MORE INCLUSIVE AND WELCOMING SCHOOL ENVIRONMENTS FOR ALL STUDENTS.



In Closing

EQUITY, INCLUSION, AND BELONGING IN SCHOOL ENVIRONMENTS are necessary ingredients to foster robust student attendance, engagement and achievement—factors that collectively drive students' short- and long-term health. School districts must understand and react to the legacy of differential treatment and exclusivity that systemic racism imposes on students of color, and move to correct these disparities through forward-thinking policies and programs—whether by boldly declaring racism as a public health crisis, as several districts nationwide have done, or by taking alternative policy actions. Districts must rectify and reimagine exclusionary discipline policies proven to disproportionately affect students of color by adopting restorative justice practices, building the capacity of school staff to intervene appropriately in disciplinary situations and reducing or eliminating the presence of law enforcement in schools. And we must continue to fund, support and expand the reach of school-based health centers, which are effective and essential connectors of students of color to health care, while also developing and implementing SBHC practices that enhance access and equity for Black and Latino students.

Alongside these key priorities, several core questions remain for future public health and education research: How do we unlock and distribute the requisite funding (which too often is insufficient or even nonexistent) for districts to develop, implement and monitor policy changes? What can we do across the aisle, and at all levels of policy, to cultivate the recruitment, training and retention of a more diverse and representative cohort of future educators? And how should we provide school districts with the necessary tools and ongoing training to monitor and evaluate the effectiveness of their interventions? Policy leaders at all levels must, together with public health policy experts, mobilize to answer these questions and relay the solutions to school district administrators and staff.

Today's hyperpolarized political environment means that a policy intervention or practice welcomed in one school district might fail in another. As such, we have highlighted practices from a diverse array of school districts that differ with respect to geographical location, size, student demographics and financial resources but share a similar commitment to advancing health equity for students of color. The school districts mentioned in this report have all implemented bold actions alongside, and sometimes despite, local, regional and national political environments with the goal of creating more inclusive and welcoming school environments for all students. We hope that this issue brief underscores the urgency of working together to advance racial equality for all students and reminds us that—in the face of disheartening political, social and legal challenges to forward progress—pragmatic solutions are within reach for school districts nationwide.

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