

JOCELYN P. ANTONIO, MPH

Testimony on H-5338, School Psychologists

House Education Committee

March 4, 2025

Good afternoon, Chairperson McNamara and members of the House Education Committee. My name is Jocelyn Antonio, and I serve as the Director of Program Implementation and Policy at the Hassenfeld Child Health Innovation Institute at the Brown University School of Public Health. I am providing this testimony in my personal capacity.

I strongly urge your support for **H-5338 –An Act Relating to Education – Health and Safety of Pupils**, sponsored by Representative Casimiro and co-sponsored by Representatives Noret, Spears, Donovan, Carson, Morales, Solomon, and Shanley.

This legislation proposes that each school system in the state employ a certified school psychologist for every 500 students enrolled. This is a vital step in addressing the growing and unmet need for mental and behavioral services for children and youth across Rhode Island.¹

The National Association of School Psychologists recommends a ratio one school psychologist for every 500 students, and in some cases the ration may need to be lower, to ensure that school psychologists can provide high-quality and comprehensive services. School psychologists are uniquely qualified members of school teams who are specially trained to provide mental and behavioral health services to children and youth in schools to improve academic achievement, promote positive behavior and mental health, support diverse learners, create safe and positive school climates, strengthen family-school partnerships, and improve school-wide assessment and accountability.^{2,3} Data as of January 24, 2025, shows that in Rhode Island, the student-to-school psychologists ratio is 605:1.⁴ Moreover, districts with high economic need have higher school psychologist-to-student ratios compared to districts with low economic need, but the roles and responsibilities of school psychologists in these high-economic-need areas tend to be much broader and may include responsibilities outside of those assigned to them.⁵

Why Addressing Mental Health in Youth Matters

Addressing youth mental health is critical to ensuring long-term academic success, social-emotional well-being, and overall health outcomes.^{1,6,7} Mental health challenges in childhood and adolescence, if left untreated, can persist into adulthood, leading to higher risks of substance use, unemployment, and chronic health conditions.^{8,9} Research has shown that early identification and intervention are key factors in improving lifelong mental health and reducing the burden on emergency healthcare systems.

A recent RI Kids Count Report found that young people are in a mental health crisis in Rhode Island.¹⁰ There have increased rates of anxiety and depression even before the pandemic, yet the pandemic exacerbated the situation. Moreover, the report found that there are significant differences in mental health by race, ethnicity, gender, and sexual identity. In 2023, 41% of

Hispanic youth reported feeling sad or hopeless almost every day for more than two weeks compared to 31% of White youth. LGBTQ+ and transgender youth were more than twice as likely to report feelings of sadness and hopelessness compared to heterosexual and cisgender youth.

The Advantage of Addressing Mental Health in Schools

Schools are uniquely positioned to address youth mental health because they serve as a primary environment where children and adolescents spend a significant portion of their time. School-based mental health services are more accessible to students who might otherwise face barriers to care, such as transportation issues, financial constraints, or stigma. Additionally, embedding mental health professionals within schools facilitates early identification and intervention, preventing mental health crises before they escalate. Research has shown that students with access to school-based mental health support demonstrate improved academic outcomes, lower suspension rates, and reduced absenteeism. By investing in school psychologists, Rhode Island can proactively support youth mental health, improve learning environments, and foster resilience among students.^{1,11-14}

Conclusion

The passage of H-5338 represents a critical step in supporting the mental health and well-being of Rhode Island's students. Ensuring that every school system meets the recommended ratio of school psychologists will provide children and youth with the necessary support to thrive academically, socially, and emotionally. School-based mental health services offer a proactive, accessible, and equitable solution to addressing the growing mental health crisis among young people. I strongly urge the House Education Committee to pass this legislation and prioritize the well-being of Rhode Island's students.

Thank you for your time and consideration.

Jocelyn P. Antonio, MPH

joantoni@bu.edu

References

1. National Association of School Psychologists. Comprehensive School-Based Mental and Behavioral Health Services and School Psychologists. Preprint at <https://www.nasponline.org/resources-and-publications/resources-and-podcasts/mental-and-behavioral-health/additional-resources/comprehensive-school-based-mental-and-behavioral-health-services-and-school-psychologists> (2021).
2. National Association of School Psychologists. The Value of School Psychologists. *National Association of School Psychologists (NASP)* <https://www.nasponline.org/research-and-policy/advocacy/the-value-of-school-psychologists> (2024).
3. National Association of School Psychologists. *THE PROFESSIONAL STANDARDS of the National Association of School Psychologists*. <https://www.nasponline.org/standards-and-certification/professional-ethics> (2020).
4. National Association of School Psychologists. State Shortages Data Dashboard. *National Association of School Psychologists (NASP)* <https://www.nasponline.org/about-school-psychology/state-shortages-data-dashboard> (2025).
5. Camacho, K. A., Dwyer, C., Whitcomb, S. & Pannozzo, P. Rethinking School Psychologist Ratios through a Practice Model Lens in One Northeast State. *Contemp School Psychol* (2024) doi:10.1007/s40688-024-00511-w.
6. Eklund, K. *et al.* Examining the role of school psychologists as providers of mental and behavioral health services. *Psychology in the Schools* **57**, 489–501 (2020).
7. Sohn, E. There's a strong push for more school psychologists. vol. 55 (2024).
8. Schlack, R., Peerenboom, N., Neuperdt, L., Junker, S. & Beyer, A.-K. The effects of mental health problems in childhood and adolescence in young adults: Results of the KiGGS cohort. *J Health Monit* **6**, 3–19 (2021).
9. Panchal, N., Cox, C. & Published, R. R. The Landscape of School-Based Mental Health Services. *KFF* <https://www.kff.org/mental-health/issue-brief/the-landscape-of-school-based-mental-health-services/> (2022).
10. RI Kids Count. *Supporting the Mental Health of BIPOC and LGBTQ+ Youth in Rhode Island*. <https://rikidscount.org/wp-content/uploads/2024/10/Supporting-the-Mental-Health-of-BIPOC-and-LGBTQ-Youth-in-Rhode-Island.pdf> (2024).
11. Richter, A., Sjunnestrand, M., Romare Strandh, M. & Hasson, H. Implementing School-Based Mental Health Services: A Scoping Review of the Literature Summarizing the Factors That Affect Implementation. *Int J Environ Res Public Health* **19**, 3489 (2022).
12. Weist, M. D. & Evans, S. W. Expanded School Mental Health: Challenges and Opportunities in an Emerging Field. *J Youth Adolescence* **34**, 3–6 (2005).
13. Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D. & Schellinger, K. B. The Impact of Enhancing Students' Social and Emotional Learning: A Meta-Analysis of School-Based Universal Interventions. *Child Development* **82**, 405–432 (2011).
14. Dalsgaard, S. *et al.* Association of Mental Disorder in Childhood and Adolescence With Subsequent Educational Achievement. *JAMA Psychiatry* **77**, 797–805 (2020).