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**Testimony of Kristin D. Ewing**  
**Policy Counsel, DC Appleseed Center for Law and Justice**  
***Performance Oversight: Department of Behavioral Health***  
***February 3, 2025***

Thank you for the opportunity to submit testimony regarding performance oversight of the Department of Behavioral Health (“DBH”). My name is Kristin Ewing, and I am Policy Counsel at the DC Appleseed Center for Law and Justice (“DC Appleseed”). For 30 years, DC Appleseed has made the District of Columbia a better place to live and work through litigation, advocacy, policy, oversight, and strategic partnerships. DC Appleseed has focused on issues that touch nearly every aspect of public life in the District, especially issues impacting historically marginalized people who live and work in the nation’s capital.

Much of my work at DC Appleseed focuses on health equity and working toward a more equitable, just, and thriving city for all District residents. As part of my work, I am also a co-chair of the Strengthening Families Through Behavioral Health Coalition. The Strengthening Families Coalition brings together a diverse group of advocates who strive to ensure that DC has a fully integrated behavioral health care system in which all DC students, children, youth, and families have timely access to high-quality, consistent, affordable, and culturally responsive care that meets their needs and enables them to thrive.

Given my focus on health equity and my involvement with the Strengthening Families Coalition, my testimony today will focus on youth and school-based behavioral health (“SBBH”).



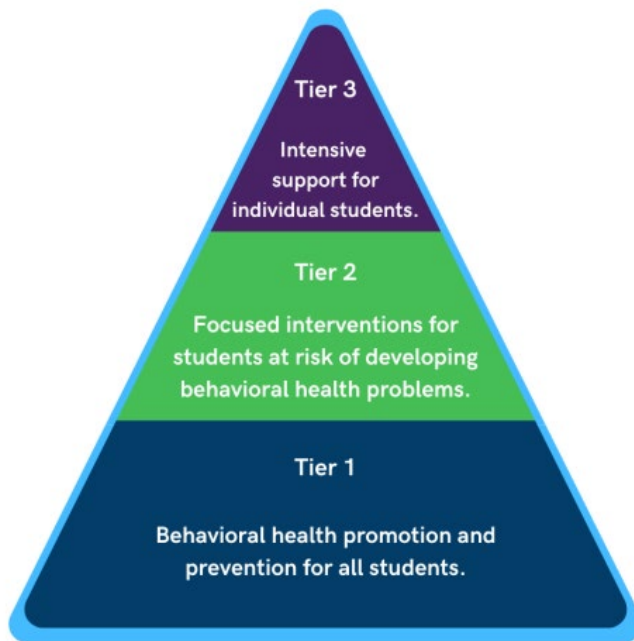
### **Youth Behavioral Health Needs**

DC Appleseed is acutely aware of the District’s disparities in behavioral health access. We know that behavioral health support is vital to District youth, especially as we have seen increases in suicide, substance use, depression, and anxiety in juveniles in the last several years, made worse by the impacts of the pandemic. However, there is some encouraging news. The 2023 Youth Risk Behavior Survey notes a decrease in the rate of middle school students in the District who reported experiencing poor mental health “most of the time” or “always.” Rates of truancy and chronic absenteeism also continue to recover following a concerning spike after the pandemic, according to the Office of the State Superintendent for Education (“OSSE”). These improvements are a testament to the District’s investments in youth behavioral health, including SBBH. The District must continue to ensure access to timely, high-quality, and culturally appropriate behavioral health services, especially in schools, to continue and expand this positive trend across all ages and behavioral health issues.

### **School-Based Behavioral Health**

Behavioral health services provided at District schools are crucial for prevention, intervention, and treatment, as well as for lessening the disparities in access to care. Although we have seen some improvements in the District in certain behavioral health areas related to youth, pediatric mental health continues to be a top concern for healthcare providers, educators, families, and DC students. Despite positive trends, there is still an ongoing behavioral health crisis for children and youth, with increases in depression, anxiety, trauma, substance abuse, and other behavioral health conditions exacerbated by issues such as public safety, gun violence, socioeconomic forces, and residual impacts from the COVID-19 pandemic. SBBH can play a vital role in meeting students where they are to provide necessary care to address the myriad issues facing our youth today.

The Strengthening Families Coalition believes that every school should be able to offer multi-tiered systems of support (“MTSS”) to all students to meet the ongoing needs of District students.



A robust SBBH program for the District’s students meets youth where they are and ensures access to the supports and services they need to thrive in school and beyond.

However, only roughly 59% of DC schools have a dedicated clinician, and that clinician often cannot provide all the services and supports that we know our students need and deserve. Therefore, the District must continue strengthening SBBH

by supporting and retaining clinicians and other staff who provide all levels of services in District schools and prioritizing filling vacant positions, particularly in schools with the greatest need.

### ***Landscape Analysis***

Given the anticipated pressures on the District’s budget for the coming year, DBH should focus on matching clinicians into schools with the greatest need. We are grateful DBH is prioritizing understanding the current behavioral health landscape in schools, whether that is a community-based organization clinician from the SBBH Expansion program, a DBH clinician, a clinician hired directly through the school, or an outside organization providing tier 1 programming.

Conducting a holistic landscape analysis of the current behavioral health care offered and utilized in each school will assist the District in identifying service gaps and prioritizing clinicians and programming for the schools with the most need. We encourage DBH to continue this work and we hope that OSSE, DCPS, and charter schools will partner with DBH to ensure a timely and accurate understanding of the current behavioral health services offered to District students.



### ***School-Based Behavioral Health Coordinator***

Each school's Behavioral Health Coordinator is integral to the SBBH ecosystem. Coordinators help students, families, and teachers effectively navigate the behavioral health resources in their school building. We appreciate the work DBH is doing to support these roles, and we urge DBH, as well as OSSE, DCPS, and charter schools, to continue supporting the staff performing the Coordinator function, as it is key to a robust, efficient, and easily accessible SBBH system. This role will also be vital in assisting with an initial and ongoing landscape analysis in their school. While we want to continue and increase the logistical, procedural, and moral support of these roles, as a preview to our budget asks, we also want to ensure the staff performing these currently unpaid roles are compensated for the extra effort and time these positions require.

Please don't hesitate to reach out with any questions regarding my testimony.

Respectfully submitted,

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