

WORKFORCE SNAPSHOT

ASSESSING INDIANA'S SCHOOL-BASED BEHAVIORAL HEALTH WORKFORCE



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Department of Family Medicine
Indiana University School of Medicine
980 Indiana Avenue,
Indianapolis, IN 46202

Authored by

- **Mykayla Tobin, MPH**, Special Projects Policy Analyst
- **Hannah L. Maxey, PhD, MPH, RDH**, Director
- **Sierra Vaughn, MPH**, Assistant Director of Data and Research
- **Courtney Medlock, MPH**, Assistant Director of Policy and Strategy

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INTRODUCTION AND BACKGROUND

IN 2023, a significant number of Indiana’s youth faced severe mental health challenges. Nearly half of the high school students reported experiencing depression, and a quarter of them had gone as far as developing a plan for suicide.¹ This highlights the urgent need for mental health support and intervention among young people in the state.

Issues with access to care are widespread. In 2024, more than 65% of Indiana adolescents with depression were unable to access care. All of Indiana’s 92 counties contain a federally designated mental health workforce shortage. Without sufficient capacity to address concerning mental health issues, children and youth run the risk of falling through the cracks.

Schools are uniquely positioned to support overall student well-being because they serve as a consistent point of access within their communities. Indiana law requires schools provide several services intended to support the mental, emotional, and behavioral health and wellness of students including student assistance services.

These services are required to be provided by professionals licensed by the Indiana Department of Education (DOE), including school counselors, school social workers, and school psychologists.

While schools are authorized in statute to support students’ emotional and behavioral health, anecdotal reports indicate difficulties with school-based behavioral health workforce capacity. Currently, state level data is limited and does not include information related to services. More information is needed to support and elevate these integral workers.

Recognizing this gap in necessary information, the DOE, with support from Indiana Department of Health, administered a pulse check survey to school counselors, social workers, and psychologists. Findings from this pulse check are included here, as well as recommendations for next steps.

DEFINITION

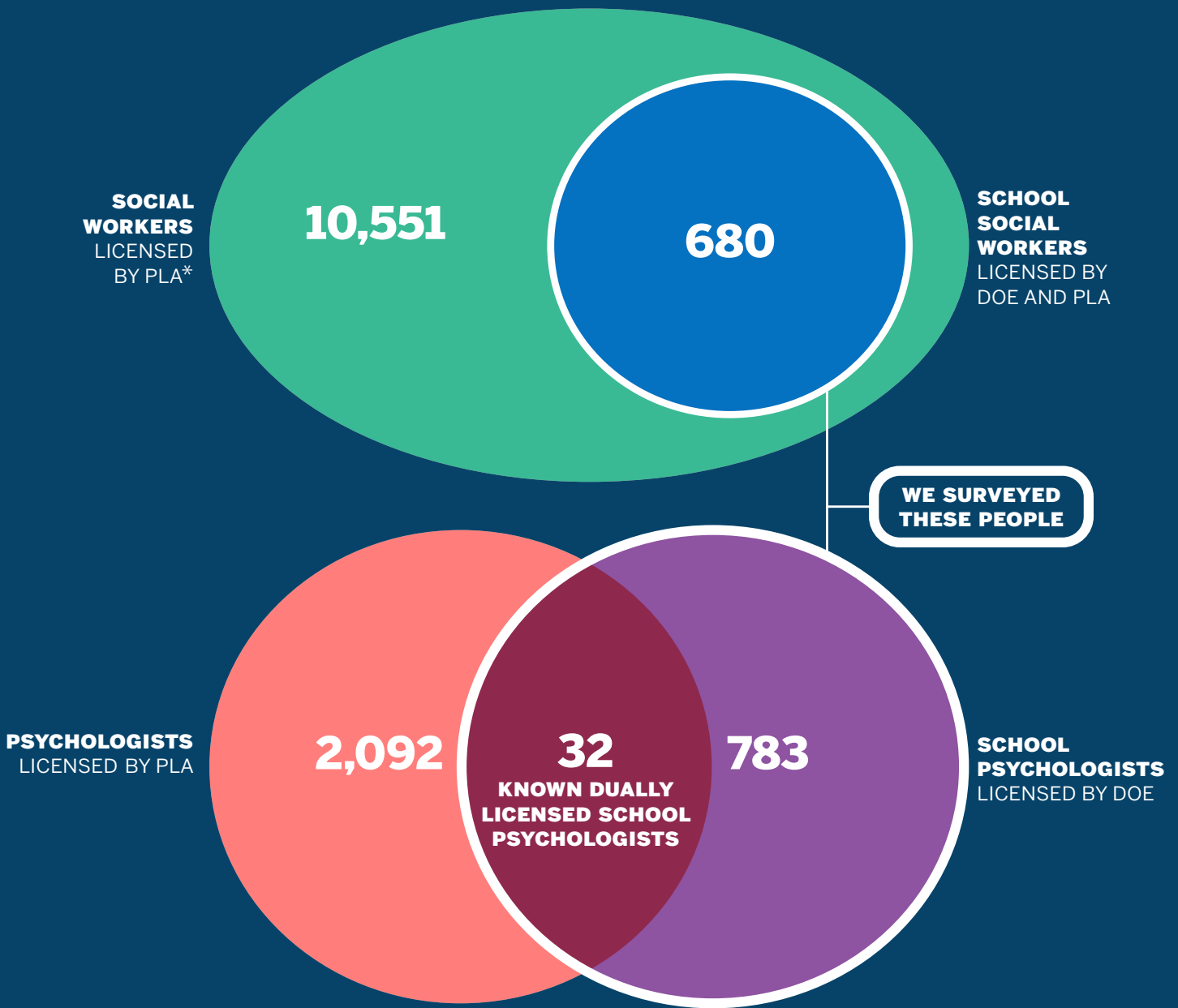
STUDENT ASSISTANCE SERVICES include prevention, assessment, intervention, and referrals.

¹ *Indiana Youth Insitute: Addressing Mental Health Challenges Among Indiana Youth*

Who's Included

The DOE licenses school counselors, school social workers, and school psychologists. School social workers licensed by DOE are required to hold Professional Licensing Agency (PLA) licenses (social work). There are behavioral health professionals located in school-based health clinics or serving school-age children who do not hold DOE licenses. These individuals are only required to hold PLA licenses and are not included in the following report. The figure below includes more information.

WHO ARE THE SCHOOL-BASED BEHAVIORAL HEALTH WORKFORCE?



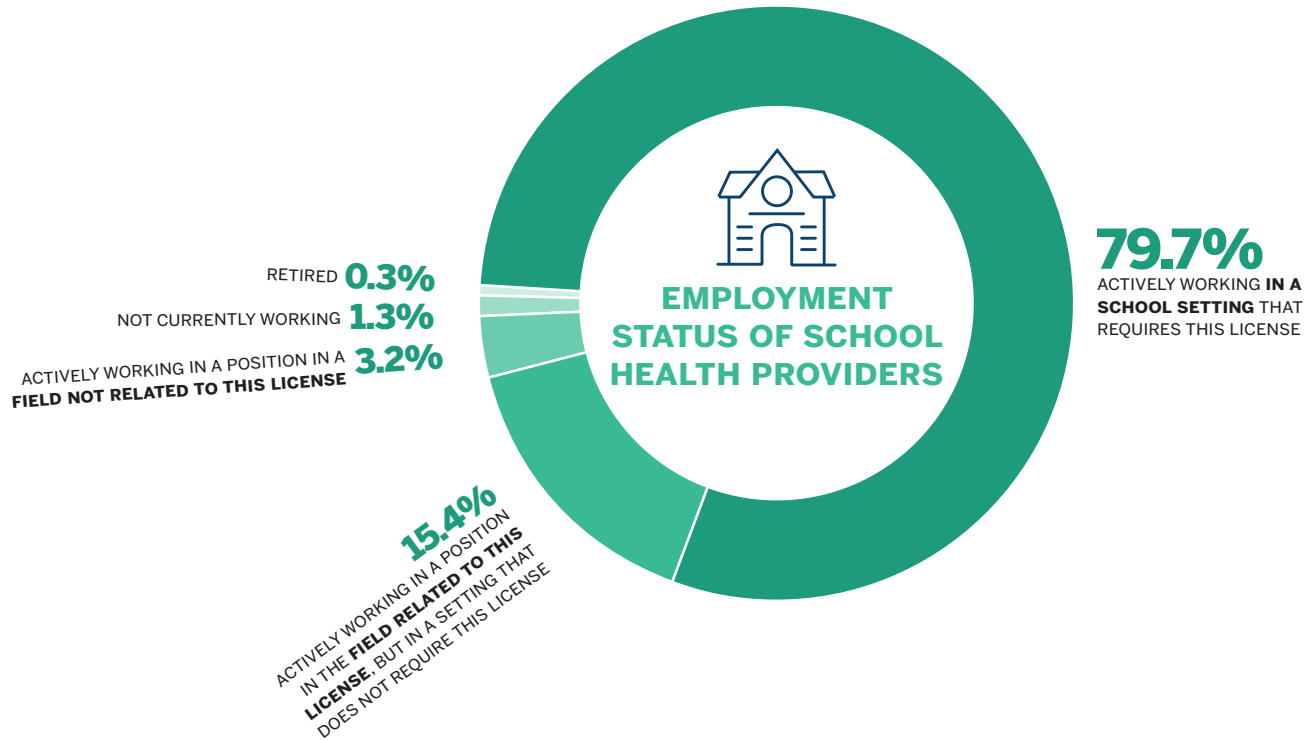
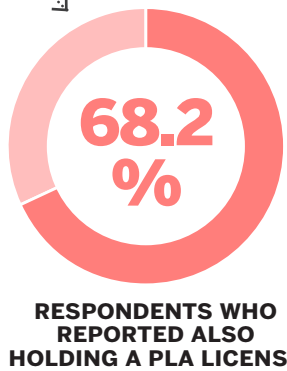
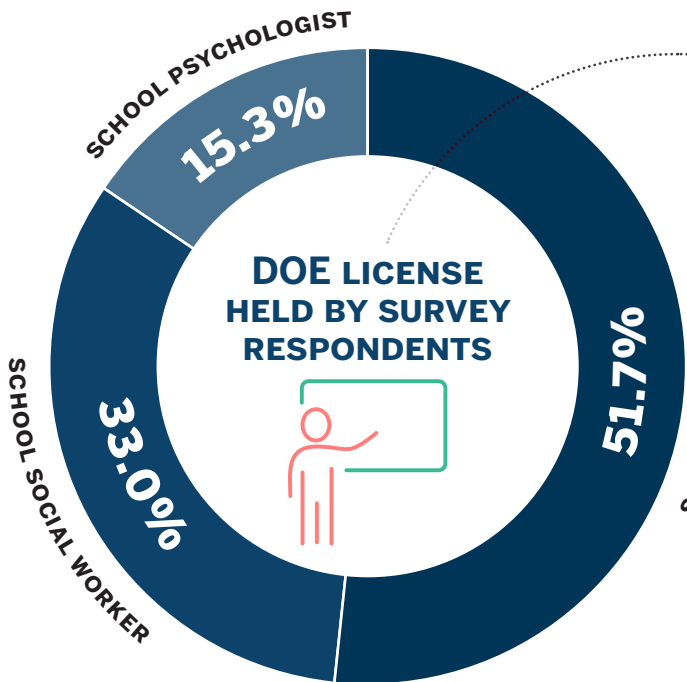
*DOE school social workers are required to be dually licensed by the PLA.



SURVEY RESPONDENTS

The majority of respondents reported holding a school counselor license. When asked about employment status, 80% of respondents were actively working in a school setting. Demographically, most respondents were female and White. About half were between the ages of 35 and 44 years old.

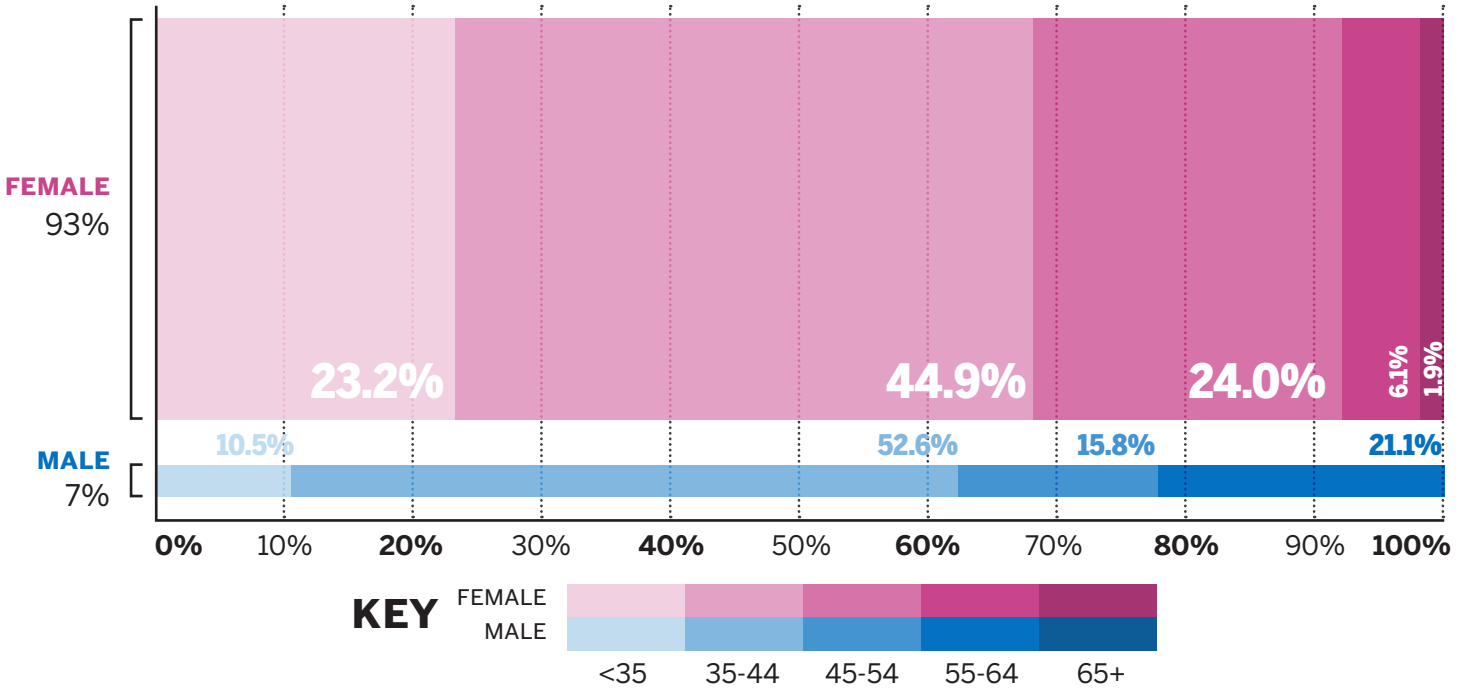
RESPONSE SUMMARY



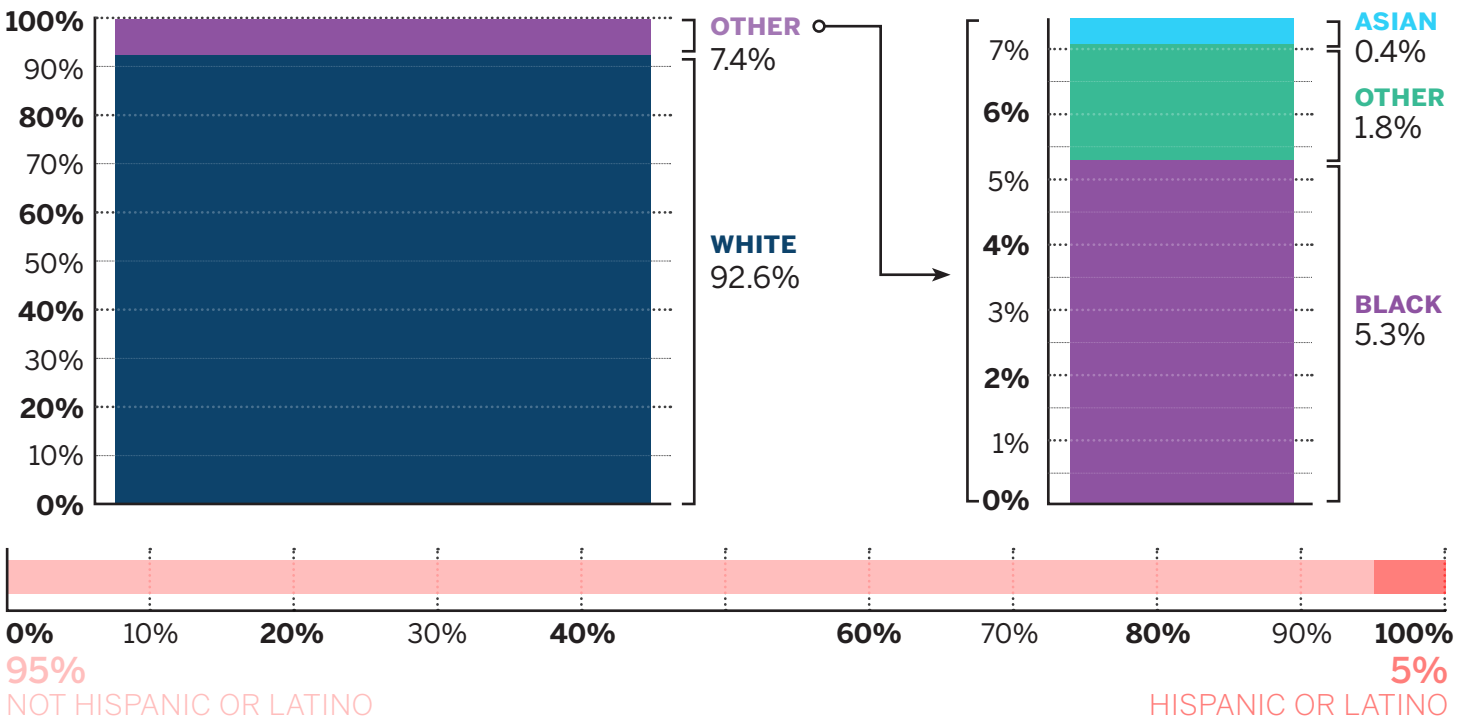
WORKFORCE DEMOGRAPHICS

Demographically, most respondents were female and White. About half were between the ages of 35 and 44 years old.

DEMOGRAPHICS AGE AND SEX



DEMOGRAPHICS RACE AND ETHNICITY

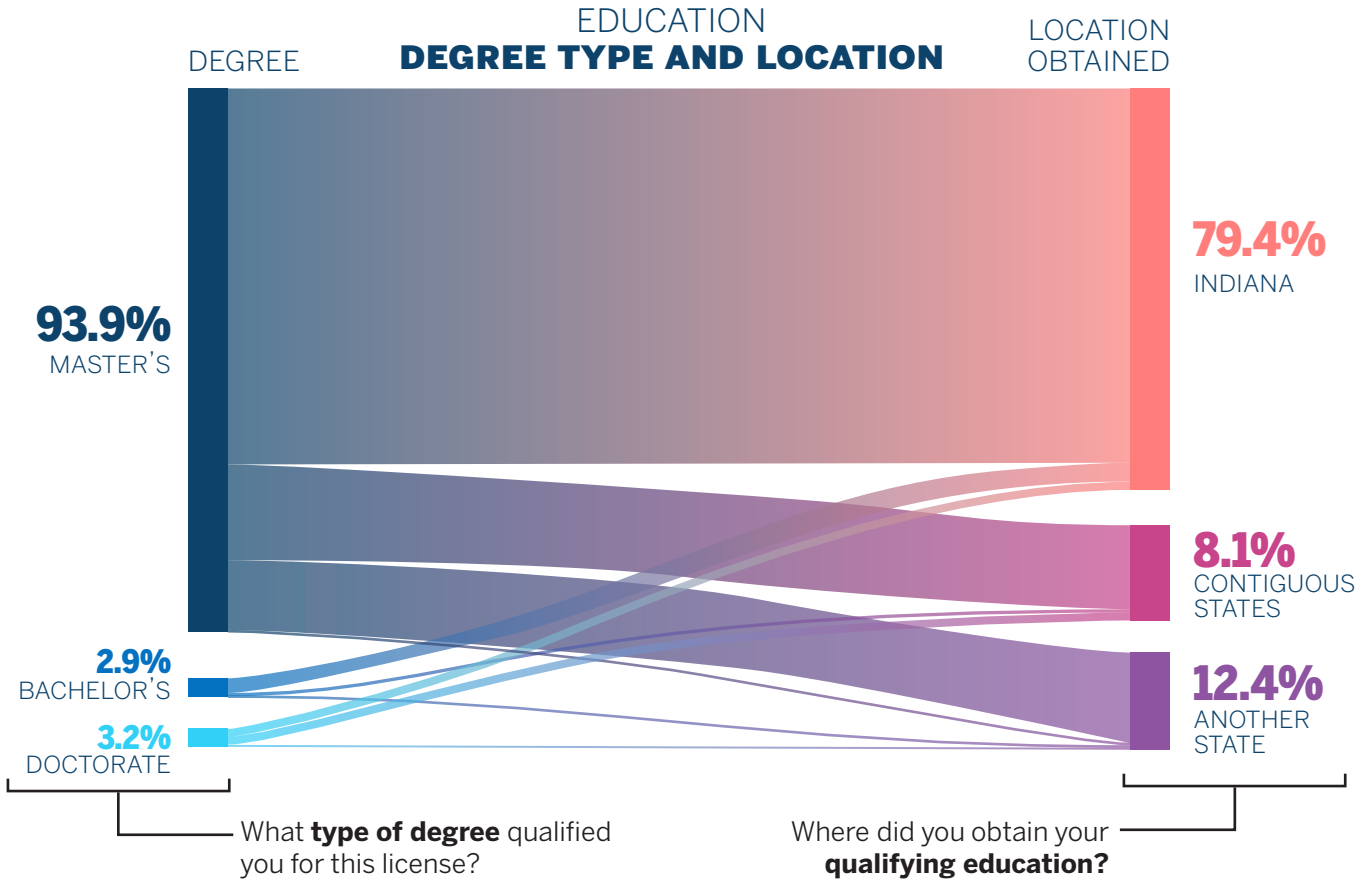


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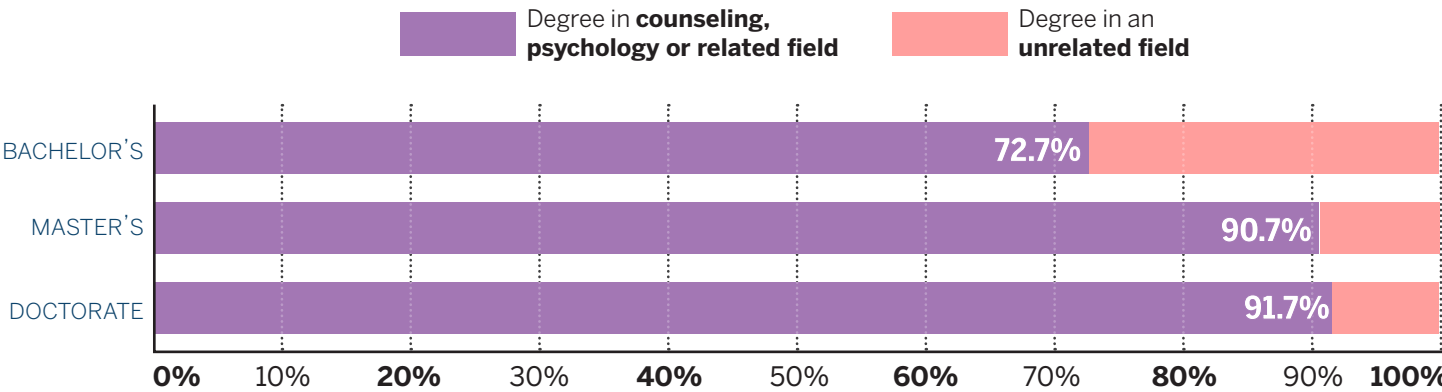
EDUCATION CHARACTERISTICS

The majority of respondents held masters degrees in counseling, psychology or a related field and reported completing their education in Indiana. Similarly, the majority (82.0%) were salaried employees of the school and most did not provide services in the context of a school based health clinic. DOE licensed school-based behavioral health professionals intend to leave their school setting at much higher rates than PLA licensed behavioral health professionals report plans to exit patient care.



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EDUCATION DEGREE FIELD

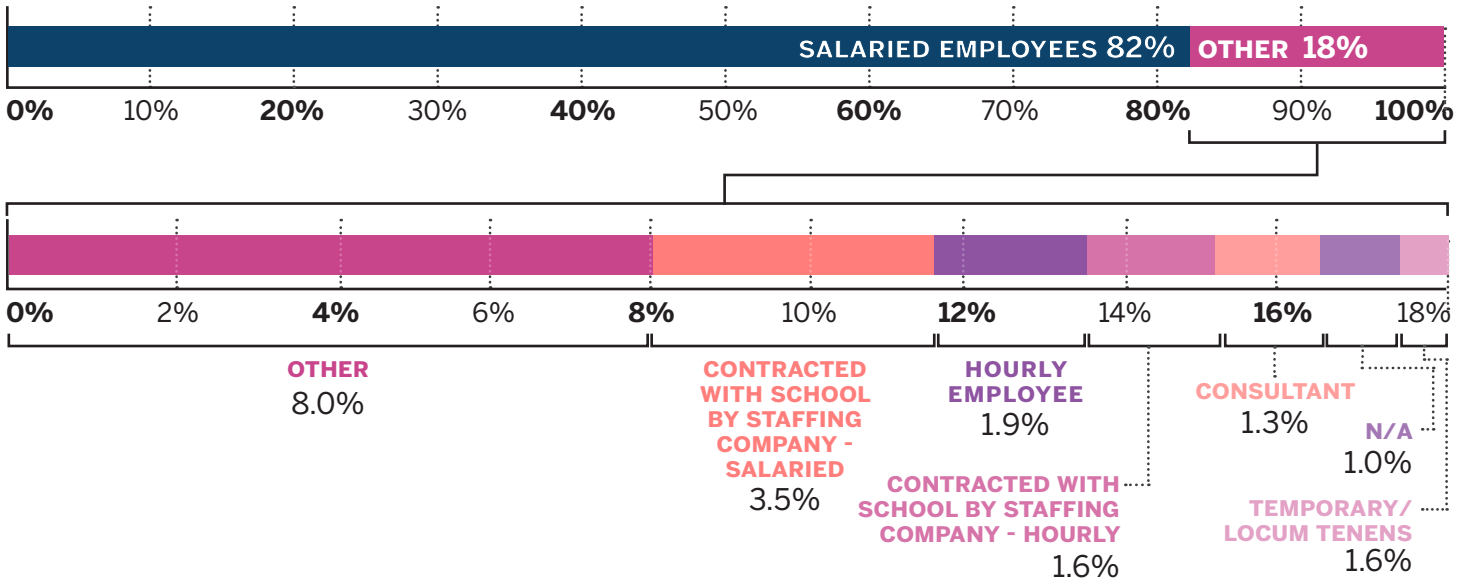


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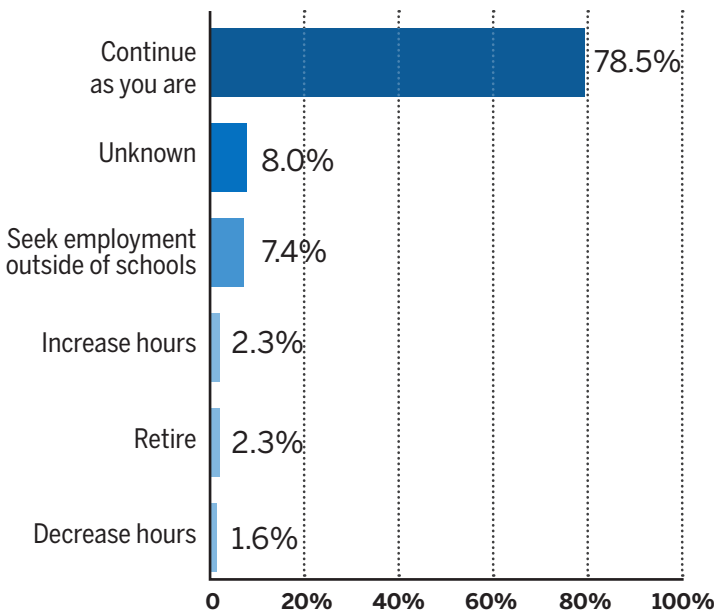
EMPLOYMENT CHARACTERISTICS

The majority of survey respondents reported serving one school and similarly, most reported serving about 200-499 students overall. Grade levels served and percentage of student population on free or reduced lunch were more evenly spread across response options.

EMPLOYMENT STATUS



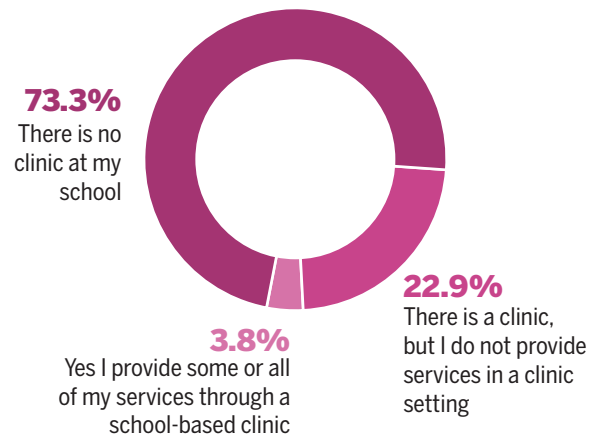
EMPLOYMENT FUTURE PLANS



When looking at PLA licensed [psychologists](#), only 0.3% plan to leave patient care, and 1% of [social workers](#) licensed by the PLA plan to leave patient care. These figures are significantly lower than than the 7% of DOE licensed school psychologists, school social workers, and school counselors who intend to seek employment outside of schools.

EMPLOYMENT SCHOOL-BASED CLINICS

[Indiana statute](#) requires all schools to have a formal relationship with a Community Mental Health Center (CMHCs) or licensed mental health provider to ensure students have referrals to the appropriate level of mental and behavioral health services. Indiana Council of Community Mental Health Centers reports providing school-based services in 1,850 Indiana schools. As shown below, some survey respondents provide services within school-based clinics, while most do not.



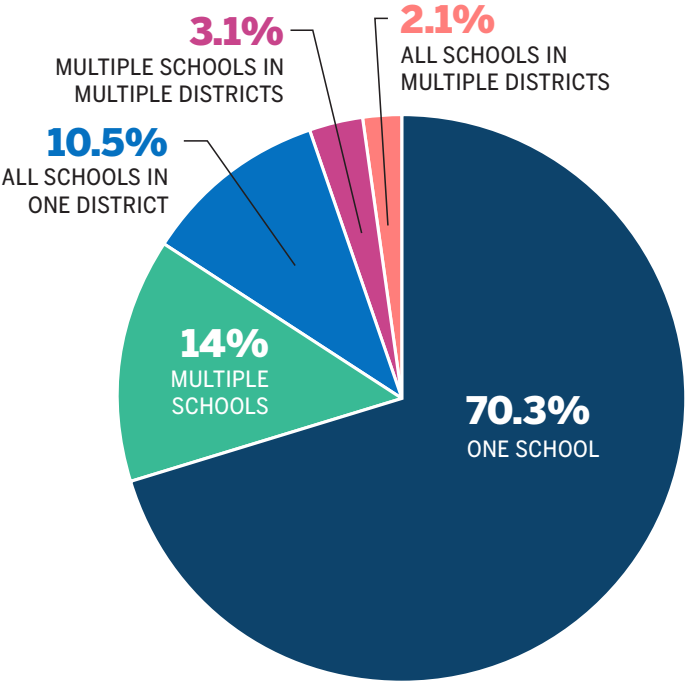
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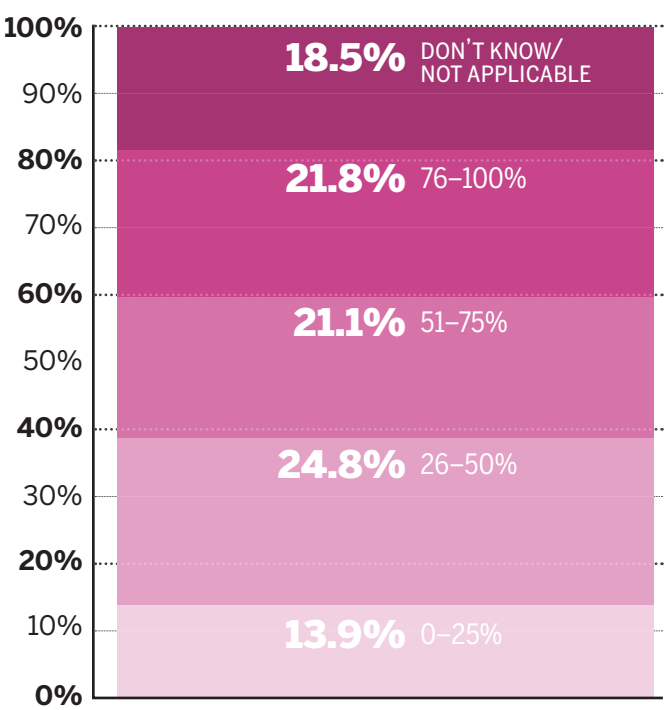
STUDENT BODY CHARACTERISTICS

The majority of survey respondents reported serving one school and similarly, most reported serving about 200-499 students overall. Grade levels served and percentage of student population on free or reduced lunch were more evenly spread across response options.

STUDENT BODY
NUMBER OF SCHOOLS SERVED

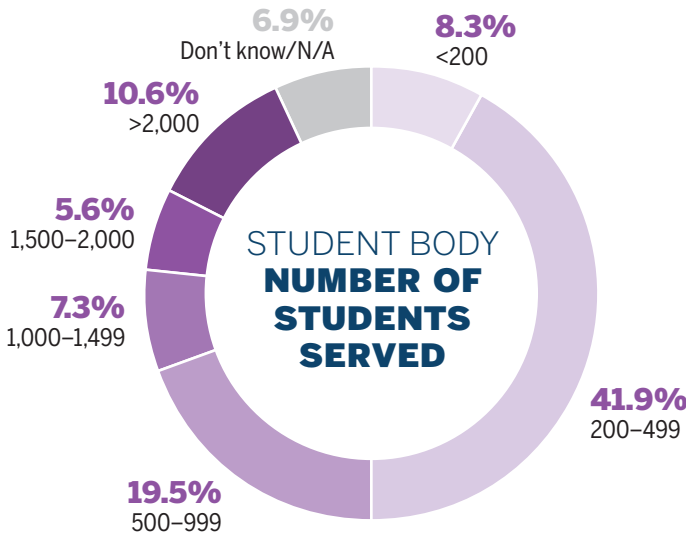
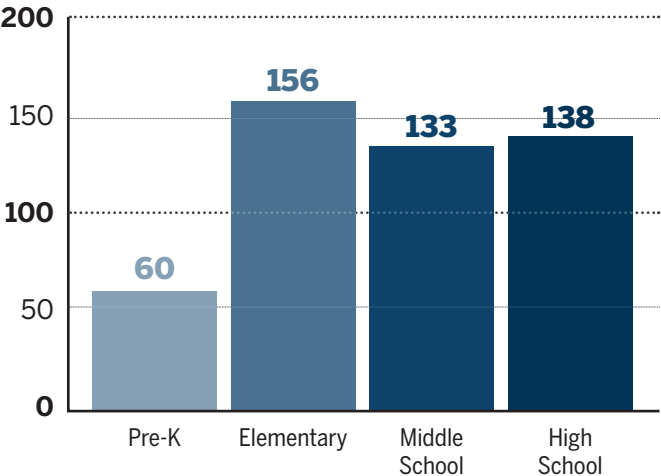


STUDENT BODY
% ON FREE OR REDUCED LUNCH



STUDENT BODY
GRADE LEVELS SERVED

Note: Respondents were able to select multiple options for this question.



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SERVICES PROVIDED

When looking at services, school counselors and school social workers reported the same top 3 services: crisis intervention, individual counseling, classroom behavior/learning support. However, school psychologists overwhelmingly reported evaluation for individualized learning plans as their top service. Most respondents reported spending 70% of their time in direct services and 20% of their time on fair share duties. It is important to note that while school social workers and school counselors reported the same top 3 services, their role in provision of these services is different. For example, individual counseling for a school counselor may look like providing brief intervention to support healthy emotional, academic, and career development while the individual counseling provided by a school social worker may focus on treatment planning and diagnosing of mental health conditions based on differences in their respective [scopes of practice](#).

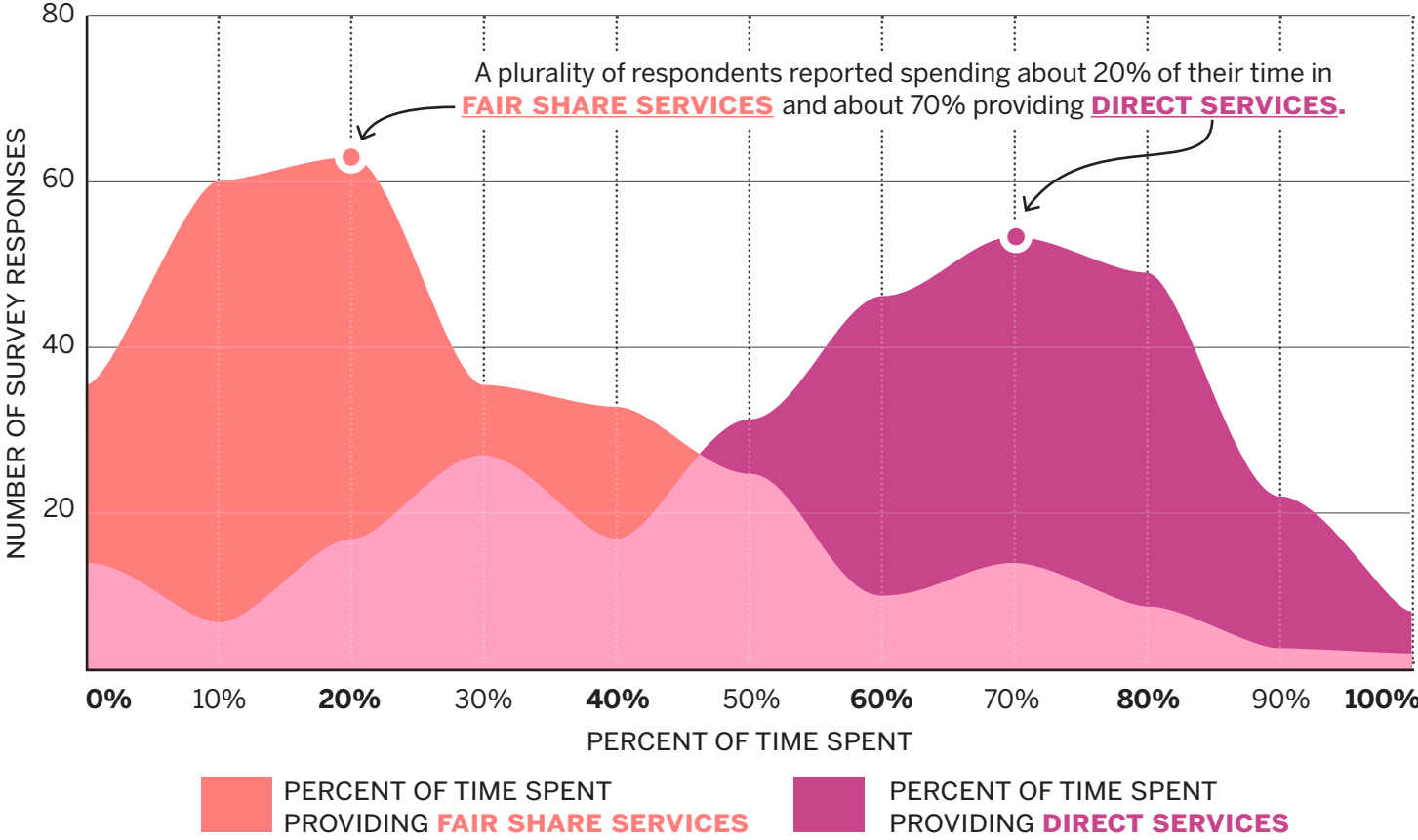
SERVICES DIRECT SERVICES PROVIDED BY LICENSE TYPE



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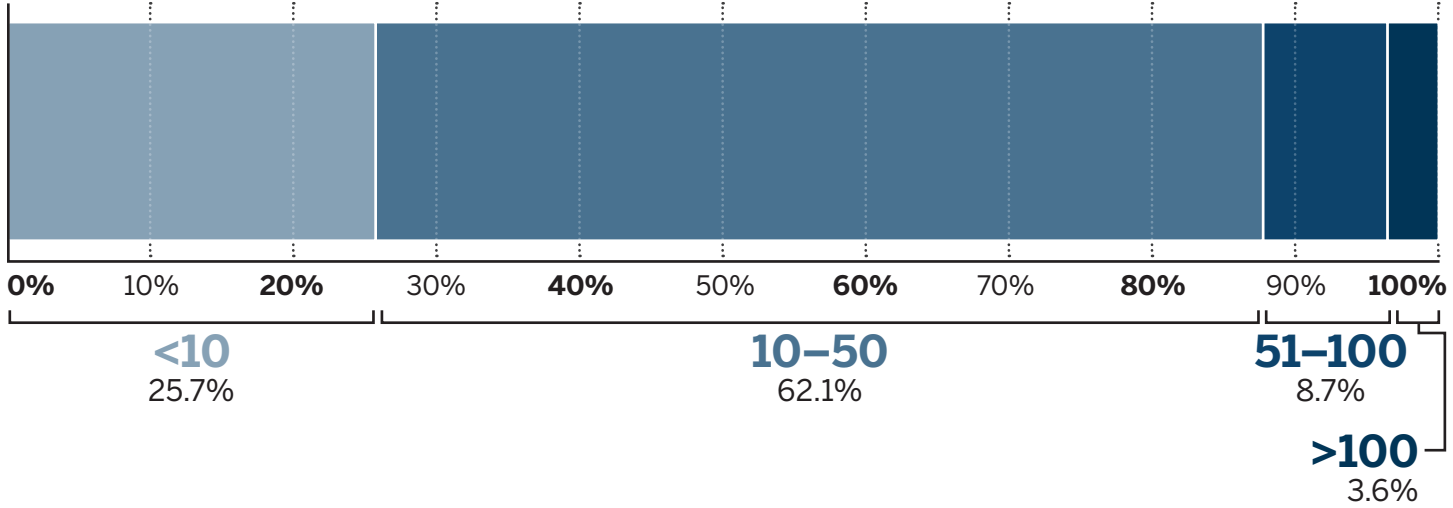


SERVICES % OF TIME SPENT PROVIDING DIFFERENT TYPES OF SERVICES



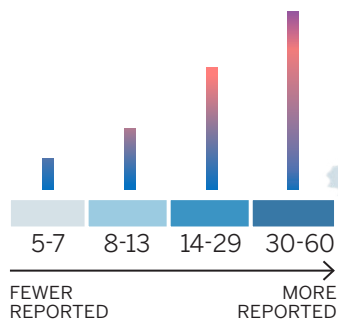
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SERVICES NUMBER OF EXTERNAL REFERRALS ANNUALLY



INDIANA'S SCHOOL-BASED BEHAVIORAL HEALTH WORKFORCE

PROFESSIONALS REPORTING SERVING IN EACH COUNTY



MARION COUNTY HAD THE MOST PROFESSIONALS REPORT SERVING THERE, WITH 60 RESPONSES

HAMILTON COUNTY HAD THE SECOND MOST PROFESSIONALS, WITH 29 RESPONSES

Survey respondents were asked to select **all of the counties they provide services in**. Marion, Hamilton, Allen, Lake, and LaPorte counties were selected by the most respondents. There were 26 counties in which only 5 respondents reported working, while another 37 counties had only 6 or 7 professionals that reported providing services there. Please note this does not capture the geographic distribution of the entire school-based behavioral health workforce but only those who responded to this exploratory survey (n=379).

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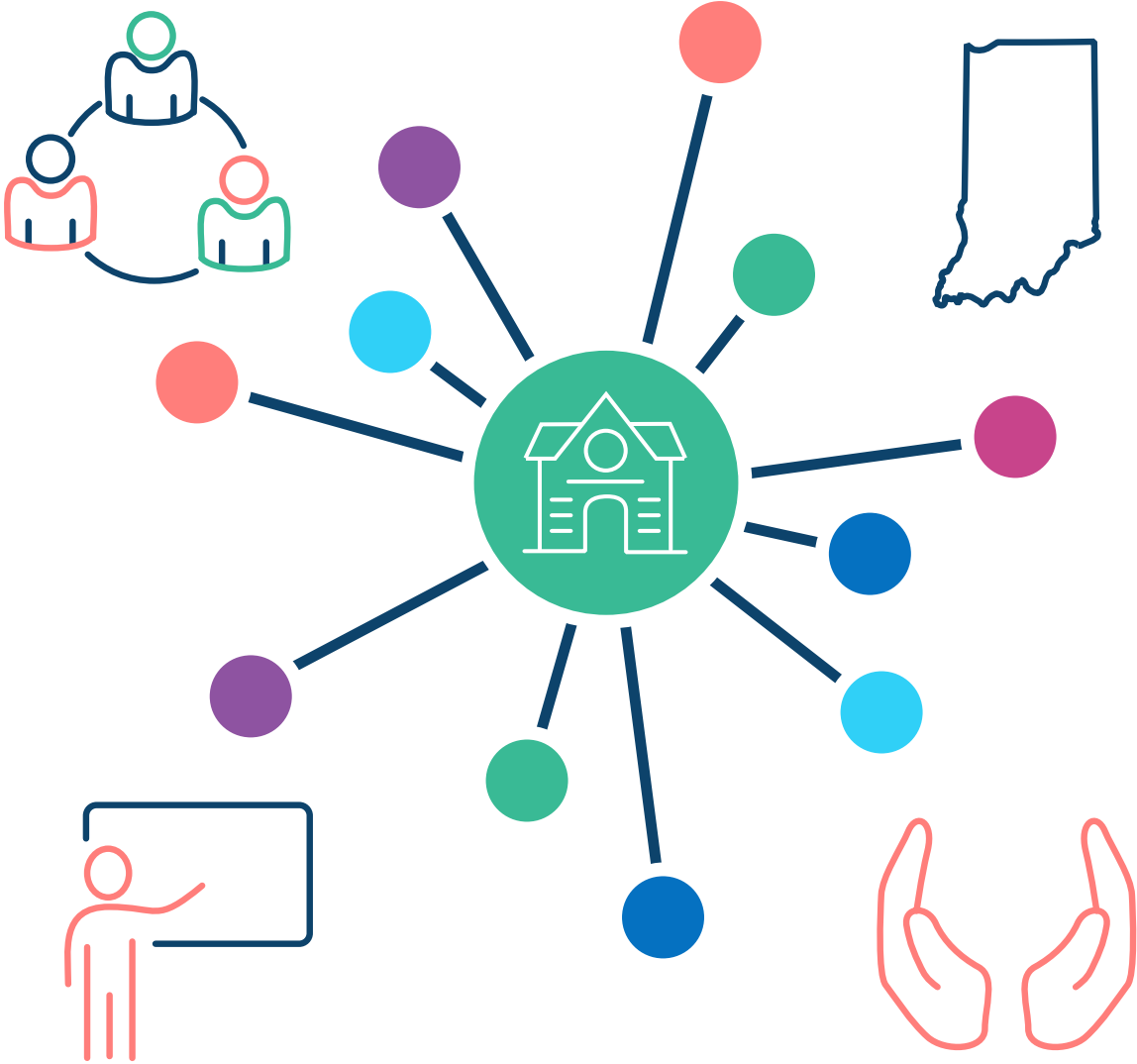
CONCLUSION

What's next for Indiana?

INDIANA needs more data on school-based behavioral health workers. Workforce data is needed to confirm anecdotal reports of shortages and to define the extent of these shortages in different settings or by license type. Workforce data detailing supply and capacity is needed to prioritize and target appropriate solutions. In addition to the DOE licensed school-based behavioral health workforce surveyed through this project, there is an extensive workforce providing services within the context of school-based health clinics that needs to be evaluated to have a true understanding of the school-based behavioral health environment.

DOE has developed an [innovative statewide supply and demand talent marketplace](#) which helps schools match with talent across the state of Indiana. Students enrolled in relevant Indiana higher education programs may sign up and connect with schools. While this improves connections between prospective school professionals and schools, more information is necessary to develop recommendations for building the pipeline of professionals. For example, there have been anecdotal reports that school psychologists have a particularly unique training pathway and additional internship opportunities in Indiana could help keep talent in the state.

More information, in the form of a full pipeline and workforce assessment, is needed to ensure solutions are appropriately targeted and data driven.





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