

Student Services and Supports

Supporting the whole child requires providing children with behavioral, physical, and educational supports and services to enable them to thrive and live healthy and productive lives. Students are often offered multiple services and supports, without explicit coordination between them. Understanding the array of services offered is a first step toward integrating and coordinating these efforts. This analysis explores how state policies advance a range of **student services and supports** across components of the Whole School, Whole Community, Whole Child (WSCC) model.

What student services and supports constructs have been emphasized in state laws?

- Encouragement for strong student development requires a multi-faceted approach. State laws feature both health education curricula and physical, mental, and emotional support strategies to promote student development (see Table 1).
- Most states' laws address preventive health screenings for students (47 states), teaching about lifelong physical activity in physical education classes (43 states), providing school counseling services for children in grades K-8 (41 states), and encouraging positive behavioral supports (40 states).

Table 1 State Law Coverage of Student Development and Health Education-related Constructs

Selected Student Development-related Constructs	# States	Selected Health Education Topics for All Grades	# States
Preventive Health Screenings	47	Health Education Curriculum for All Grade Levels	51
Physical Education Teaches about Lifelong Physical Activity	43	• Safety and Injury Prevention	47
School Counseling Services for K-8	41	• Alcohol and Other Drugs	46
Positive Behavioral Supports	40	• Personal Health and Wellness	44
Skills for a Healthy Lifestyle	39	• Tobacco Use	42
Community Service Education & Service Learning	36	• Healthy Eating/Nutrition	40
Early Warning and Intervention for Chronic Absenteeism	35	• Violence Prevention	40
Mental Health Supports for Bullying	32	• Mental and Emotional Health	38
Social-Emotional Learning	31	• Comprehensive Sexual Education	38
Re-engagement Plans	23	• Social and Emotional Learning	37
Physical Activity Opportunities throughout the Day	22	• Physical Activity Addressed in Health Education	36
State Addresses District-level Adoption of Wellness Policies	22	• Suicide Prevention	27
Daily Recess	20	• Abstinence Preferred	23
Time for Physical Education (all Grade Levels)	20	• Bullying Prevention	22

- The vast majority of the states' laws require that health education curricula address safety and injury prevention issues (47 states), alcohol and other drug use/abuse (46 states), personal health and wellness (44 states), tobacco use (42 states), healthy eating/nutrition (40 states), and violence prevention (40 states).
- Laws in just over half of states (27 states) address suicide prevention as part of the health education curricula. Less than half of states' laws (22 states) specify that health education curricula teach about bullying prevention.

Figure 1. Forty-seven states address student supports and services across multiple WSCC domains.

Comprehensiveness of policies promoting student supports and services in schools, by state



How much variation was observed in state law?

- On average, state laws address 19 of the 28 topics related to student development and health education examined for this report. Most states' laws (31 states) address at least 20 of the 28 topics examined.
- With the exception of New York, all states in the Northeast and all but three states in the South comprehensively address student services and supports.

This map shows states that have [◇] **comprehensive** (31), [△] **moderate** (16), and [□] **low** (4) coverage of student supports and services topics in statutes and regulations governing education. Ten states comprehensively address six or more WSCC domains.

What opportunities exist for states to address student supports and services in their laws?

- State policies encourage schools to provide a number of student supports and services. However, these topic areas are approached in siloed and disconnected ways, even as many topics overlap. For example, social and emotional learning can be used to prevent bullying; these topics do not necessarily need to be taught separately.¹ Early warning systems could contribute to the development of re-engagement plans for disciplined students. Finding opportunities to connect these supports can reduce burden on schools and better support students' overall well-being.

Child Trends, in partnership with The Institute of Health Research and Policy, University of Illinois at Chicago and EMT Associates, Inc., examined the extent to which 11 healthy schools domains are addressed in state policy. These domains include the 10 components of the Whole School, Whole Community, Whole Child (WSCC) model: Health Education; Physical Education and Physical Activity; Nutrition Environment and Services; Health Services; Counseling, Psychological, and Social Services; Social and Emotional Climate; Physical Environment; Employee Wellness; Family Engagement; and Community Involvement. An additional domain, the WSCC References domain, addresses the extent to which state laws include explicit references to the WSCC model or similar language, such as the Center for Disease Control and Preventions' Coordinated School Health model.

This sub-brief provides an overview of how state policies prepare schools to implement the WSCC model by promoting Student Services and Supports. Data on these topics are available through the National Association of State Boards of Education (NASBE) [State Policy Database on School Health](#). Sub-briefs covering the individual domains as well as the compiled report can be found on the [Child Trends website](#).

¹ Smith, B. H., & Low, S. (2013). The role of social-emotional learning in bullying prevention efforts. *Theory Into Practice*, 52(4), 280-287.