



**Boston  
Children's  
Hospital**

Neighborhood  
Partnerships

# Annual Report

Reaching Students Where they Live and Learn



2025

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Looking Ahead

# Message from Leadership

Dear Friends, Colleagues, and Partners,

This past year, across classrooms, schools, and within our own team, we witnessed something remarkable: resilience, innovation, and renewed hope driving us forward as we confront the ongoing behavioral health crisis impacting students and schools. Our approach centers on strengthening systems from within using public health frameworks and multi-tiered supports, to deliver culturally responsive, sustainable behavioral health care in schools. Thank you for your support as we work together to strengthen and expand access to services, resources, and training for school communities.

Since 2002, our 18-person team at Boston Children's Hospital Neighborhood Partnerships (BCHNP) has partnered with schools, focusing on prevention, innovation, and systems level change to offer behavioral health care that is culturally relevant and evidence-informed. We are committed to developing expanded models of care that help schools navigate the complex and evolving behavioral health needs of their students. This work focuses on building internal capacity in schools through workforce development, professional learning, and collaborative partnerships, ensuring that every school community has the tools, knowledge, and systems needed to support student behavioral health and well-being.

We are proud to share the following highlights from the 2024–2025 school year:

- BCHNP partnered with 20 schools across three public school districts in Boston, Somerville, and Agawam, to deliver a tiered continuum of care emphasizing prevention, early intervention, and clinical services. We collaborated with the Massachusetts Child Psychiatry Access Program (MCPAP) to pilot a district-wide consultation model aimed at expanding access to behavioral health care for students with a focus on consultation, training, and coaching with school staff. We facilitated 15 trainings reaching a total of 780 school professional participants and provided 517 hours of consultation.
- The Clough Foundation Training and Access Project (TAP) continues to serve as the leading trainer for behavioral health for the Boston Public Schools. TAP facilitated eight trainings to 1,065 participants in BPS and launched a new online series of ten trainings focused on foundational information about social-emotional learning and behavioral health for educators nationwide.

As we look ahead, we are excited to continue investing in our team, expanding our reach, and shaping the future of school-based behavioral health. Whether through professional learning opportunities, tailored consultation, or research and evaluation initiatives, we remain dedicated to supporting students, caregivers, educators, and communities in every way we can.

Thank you for walking alongside us in this work. Together, we are building stronger, healthier school communities, one partnership at a time. We are grateful for your continued support.

With gratitude,

Shella & the BCHNP Team

**Shella Dennerly, PhD, LICSW**  
Director, BCHNP

**Matthew Siegel, MD**  
Chief of Clinical Enterprise

**Stacy Drury, MD, PhD**  
Psychiatrist-in-Chief

# Our Supporters

BCHNP is grateful for our partnerships and collaborations in the community, with schools, and at Boston Children's Hospital. We are honored to be a long-standing partner with the Boston Public Schools and appreciate the school leaders, teachers, staff, students and families that we partner with in BPS.

We are thankful for the opportunity to collaborate with the Children's Mental Health Campaign and the BIRCh Center at the University of Massachusetts.

We extend our gratitude to Dr. John Strauss and the MCPAP team for their continued partnership and support. We also thank Omar Irizarry and Magui O'Neill-Arana from the Department of Mental Health for their collaboration throughout the year.

We wish to acknowledge and thank the following individuals and teams at Boston Children's Hospital for their contributions and support:

We thank Kevin Churchwell, MD, President and Chief Executive Officer of Boston Children's Hospital for his steadfast support and advocacy. The Office of Community Health and Shari Nethersole, MD, VP, Community Health and Engagement have been instrumental in supporting our efforts in the Boston community. We thank the Government Relations team and Joshua Greenberg, Esq., Vice President of Government Relations in our joint efforts to improve behavioral health care in the Commonwealth and across the nation. The efforts of Lynn Susman, President, and Chief Development Officer, Boston Children's Hospital Trust, and the staff at the Trust have been critical in supporting and sustaining BCHNP. We thank the Marketing and Communications Department for continued support. Additionally, we give special thanks to the Boston Children's Hospital Board Committee for Community Service and the Community Advisory Board for their dedication and investment in the health and wellness of our community.

We thank the BCHNP team for their inspiring efforts to support school communities in Boston and beyond. We appreciate the thoughtfulness, dedication, and commitment shown in their work each and every day.

*This report was prepared by members of the BCHNP Research & Evaluation Team: Sara Whitcomb, PhD, Kathlyn Elliott, PhD, Rawan Alsahlawi, BA, Anna Lai, BS, & Dayna Keane, MS. Thank you to Chun Chen and Ravi Yanumula, for providing database support.*

*We would like to thank Giro Studios for their ongoing support with video production. A special thank you to Zoë Judd for support with the report design.*

We are enormously grateful to the foundations and philanthropic donors of BCHNP. We would not exist if not for your generous support and contributions to this important work in improving the behavioral health care system in schools and beyond:

- Aetna Foundation
- Bank of America
- Bronner Charitable Foundation
- Boston Children's Hospital
- Boston Public Schools
- C.F. Adams Charitable Trust
- Digital Federal Credit Union
- Epic
- Gloria L. and Charles I. Clough Foundation
- Josephine and Louise Crane Foundation
- Fidelity Charitable Patriots Day Project
- George Harrington Trust
- Hamilton Company Charitable Foundation
- Jane's Trust
- Jorge Ramos
- J.P. Morgan
- Karp Family Foundation
- Kidvestment
- KPMG Foundation
- Liberty Mutual Foundation
- Linde Family Foundation
- Manton Foundation
- Marion Boynton Trust
- Mike and Maria Cotoia
- National Life Group Charitable Foundation Inc.
- Newman's Own
- James and Kimberly Pallotta
- Peter Riehl and Allison Horne
- PwC Charitable Foundation, Inc.
- Rockland Trust - People's Federal Foundation
- Sidney A. Swensrud Foundation
- TD Charitable Foundation
- Tudor Foundation
- Robin and Marc Wolpov
- Waters Corporation



# Our Program

Boston Children's Hospital Neighborhood Partnerships Program (BCHNP) is a school-based behavioral health program in the Department of Psychiatry & Behavioral Sciences at Boston Children's Hospital. BCHNP has partnered with Boston Public Schools for 23 years.



## Vision

BCHNP envisions a future where all students and members of the school community are thriving in a school environment that supports their behavioral health and wellbeing.

## Our Team

Total BCHNP Staff Members

18

Psychologists

5

Social Workers

8

Collective Years Of Experience Working in Schools

266

## Mission

BCHNP partners with school communities to co-create and sustain flexible, culturally responsive, and evidence-informed behavioral health systems that promote the health and wellbeing of all students, families, and staff. Our approach, research, and advocacy centers on the context of each partnership to provide preventive initiatives, training, consultation, and clinical interventions.

## Our Goals

- Build and maintain strong partnerships through collaborative practices
- Partner with schools to build the capacity of behavioral health systems
- Increase equitable access to a range of behavioral health services and resources in schools
- Evaluate school-based behavioral health by developing, implementing, and disseminating best practices

# BCHNP partners with school communities in 4 primary ways:

---

## Professional Training & Workforce Development

The Clough Foundation Training and Access Project (TAP) provides comprehensive professional development for school-based clinicians and educators to support the strengthening and sharing of knowledge, practices, resources, and build connections within school communities. TAP partners with Boston Public Schools (BPS) and focuses on building capacity and [training](#) to address social, emotional, and behavioral health. Expanding opportunities for capacity building beyond Boston, TAP offers [free online content](#) for educators, families, students, and school professionals nationwide.

## District & School-Based Partnerships

The school-based program promotes and fosters the social, emotional, and behavioral health and well-being of students, caregivers, and school staff. BCHNP psychologists and social workers work intentionally with school and district partners to ensure that students are accessing preventive and responsive behavioral health care. Clinicians work onsite in BPS partner schools as integrated and essential members of school communities and collaborate with school staff to offer a range of tiered support. In partnership with the Massachusetts Child Psychiatry Access Program (MCPAP), BCHNP launched a new initiative this year to provide consultation to school districts. The program hired two social workers, who provide consultation, training, and coaching to Agawam and Somerville Public Schools. The goal of this project is to support districts in building data-driven referral pathways for students to access appropriate behavioral health care within schools and in partnership with community service agencies.

## Research & Program Evaluation

The Research and Evaluation Team supports BCHNP's mission of co-creating evidence-informed behavioral health systems. The team's work includes collaboratively developing evaluation plans to support program development and enhancement, evaluating fidelity and effectiveness of BCHNP consultation and training, identifying drivers of inequity in service delivery, and producing evidence to inform, refine, and scale BCHNP interventions.

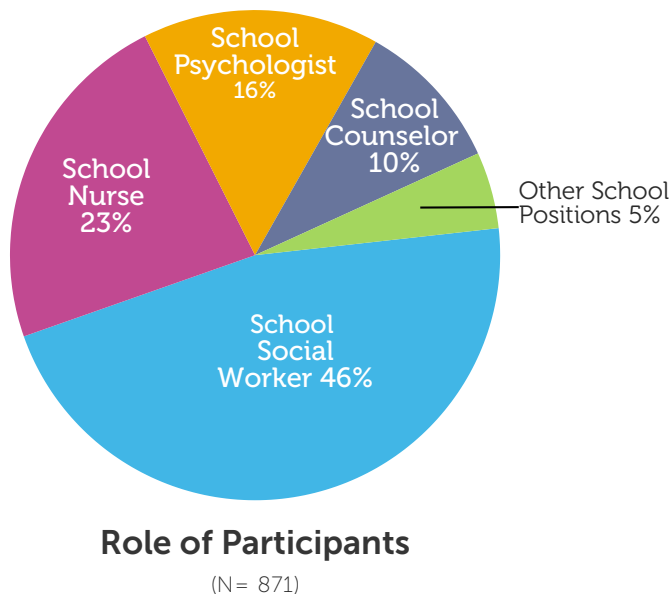
## Advocacy

BCHNP in partnership with Government Relations at Boston Children's Hospital and the Children's Mental Health Campaign, are helping to lead local and state advocacy efforts to increase access, expand funding, and implement a model of comprehensive school-based behavioral health for all school districts in Massachusetts.



## Training and Access Program (TAP)

The Clough Family Training and Access Project (TAP) provides professional development and consultation services focused on building the capacity of school communities to address social, emotional, and behavioral health.



## BPS Training Series

During the 2024-2025 school year, TAP provided live webinars to a multidisciplinary audience including social work, nursing, school psychology, school counseling, and other school staff. All trainings can be viewed on our [website](#).

**150**

Average attendance  
per webinar

**1065**

Total participants

## Topics for TAP's Interactive Training Series Included:

### Anxiety and School Avoidance: A Clinician's Role in Supporting School Attendance in Youth with Anxiety

Focusing on the relationship between anxiety and school avoidance in children and adolescents and best practices to support students and families.

### Behavioral Health Crisis Prevention: Building a School-wide Plan, 2-Part Series

Building school wide behavioral health crisis prevention plans that are culturally responsive, family-centered, and support staff wellbeing.

### Supporting the Wellbeing of Newcomer Youth in Schools

A discussion of common resettlement experiences that impact newcomer youth and strategies to support newcomer youth in school.

### Using Storytelling to Support Students with Grief and Loss

Storytelling as a practice to help students express and make meaning from loss and the importance of educators becoming grief-informed.

### Social Media and Student Mental Health

An exploration of the positive and negative effects of social media on youth mental health and strategies for promoting healthy digital engagement.

### Supporting and Affirming Neurodiversity in School

An overview of inclusive practices that support and affirm neurodiversity in schools.

### Fostering Belonging & School Connectedness: A Roundtable Discussion

A roundtable discussion to explore how feelings of belonging and school connectedness among students and staff affect overall wellbeing.

### The Power of Play in Promoting Student Social-Emotional Growth

The benefits of play for students of all ages and how play in counseling can be used to promote social-emotional growth.



When asked about how the training would assist in their work, participants said:

“

*I think the information presented was of vital importance to the work we do at my school as a large portion of our population were/are newcomer youths. The resources were great to see and can definitely help some of the families that I work with.*

”

“

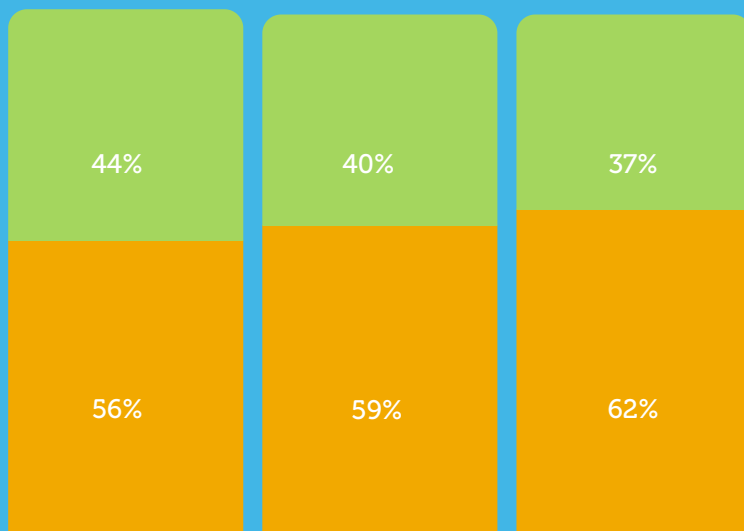
*The information provided practical strategies and tools that I can directly apply to support students more effectively and create a positive learning environment.*

”

“

*The fact that sharing with colleagues and finding other ways this workshop can contribute to my knowledge of strategies to help implement them in my work with staff and the students I service.*

”



This workshop was culturally sensitive

This workshop contributed to my knowledge of the topic

I would recommend this webinar to my colleagues

98%

Of participants rated the trainings as good or excellent (N= 870)



Agree



Strongly Agree

## When asked about the TAP training series...

# 99%

Of participants said that this webinar contributed to their knowledge of strategies to implement in work with staff, students, and/or families related to the topic (N=870)

# 97%

Of participants agreed that they will do at least one thing different in their work as a result of a workshop (N=870)



## When Asked What They Liked Most About The Trainings, BPS Clinicians Said:

“

*The case study is always the highlight as it allowed for conversation and engagement. It was interactive and gave us the opportunity to drill deeper on factors that may impact student outcomes.*

”

“

*Opportunities to connect with other professionals and learn from one another.*

”

“

*The information was informative and helpful. It also served as a refresher with some of the information I learned in the past.*

”

“

*I enjoyed the structure of the seminar with content presentation, videos, breakout room opportunities.*

”

# TAP: Piloting a New Format

## Building a Crisis Prevention Plan: Interactive Workshop

TAP participants indicated that they were looking for more active collaboration and a deeper dive into content. From this feedback, TAP piloted a new webinar format that provided a small group, interactive workshop experience. This series consisted of two 90 minute webinars over the course of two weeks for a total of 3 hours of training.

It included relevant information, hands-on activities, facilitated break-out rooms, interviews with BPS clinicians, assignments between sessions, and a framework to build a behavioral health crisis prevention plan. Participants were guided through a planning document to support applying this learning to their school communities.

The Clough Foundation  
Training and Access Project (TAP)

Boston Children's Hospital  
Neighborhood Partnerships  
Until every child is well

### Guiding Questions for Building a School-Wide Behavioral Health Crisis Plan

Protocols for addressing a behavioral health crisis are helpful to prepare and guide schools in steps to take before, during, and after a crisis. This guide provides questions to consider when developing or evaluating the plan. Due to each school's ecology, strengths and needs being different, every resulting crisis plan will be different and therefore, a team approach in using this guide is recommended.

- 1. General: What are the team's primary goals when responding to a behavioral health crisis? What larger context needs to be considered?**
  - ☐ How does the team define behavioral health crisis? What are specific examples?
  - ☐ What are the team's goals in terms of students, family, and staff?
  - ☐ What Tier 1, 2, and 3 supports are in place to support students' behavioral health and sense of belonging? How are these being used preventatively?
  - ☐ What are district policies, protocols or training that need to be used? What things can be school or strand specific?
  - ☐ How can the team broaden stakeholder input? How is the team complementing protocols with cultural considerations for crisis assessment, crisis response, and communicating with families?
- 2. Staff and Role Clarity: Who is on the crisis team and how are they able to support?**
  - ☐ What are the roles and responsibilities of each member of the crisis team? Who on the team does suicide risk and threat assessments? What training exists on the team? Who on the team can support language access?
    - ☐ What is the plan for staff absences or lack of availability?
  - ☐ Who will be the point person during response? Does this change based on the student or situation?
  - ☐ Are there different levels of response dependent on the presenting situation?
  - ☐ How will school staff communicate to the crisis team? How will the crisis team communicate to one another?
- 3. Supporting the Student: During response, what are some general best practices for the crisis team and other staff to keep in mind?**
  - ☐ What should you do if you are with a student who is having a crisis? What are important student safety considerations (e.g. not leaving the student alone, what to do if alone)?
  - ☐ What are ways to protect the student's confidentiality and dignity?

*The crisis plan template will be a useful tool to use and also examples of staff wellness to prevent compassion fatigue/burnout.*

*I think it will greatly help my school as we are building and strengthening systems.*

*It will help to build a plan for the safety and wellbeing of all students.*

*I liked our breakout room discussions and how the facilitator made sure to hear everyone's voice if they wanted to respond.*

# TAP: Focus on Collaboration



## Planning with BPS Leaders & Clinicians

TAP meets regularly and partners with district leaders to ensure collaboration and alignment with district priorities and needs. Additionally, TAP distributes a needs assessment survey and conducts discussion groups with BPS clinicians. TAP also administers post-webinar and post-series participant surveys. All responses are reviewed and feedback is incorporated into planning webinar topics, content, and format.



## Highlighting Voices From the Field

TAP prioritizes including interviews from those actively working in the field. This has included partnering with the departments at BPS to include interviews with social workers, psychologists, school counselors, and nurses to share their experiences and expertise with our audience. TAP also included student voice through interviews with young people about their thoughts and ideas on different topics. Having voice from those currently working directly in schools can support webinar participants in applying the information into their practice.



## Partnering with Boston Children's Hospital Programs

Connecting with colleagues across the hospital to be a part of TAP's webinars is key to being able to share extensive clinical knowledge as well as offer ongoing resources to our audience. TAP partnered with clinicians from Martha Eliot Health Center, the Digital Wellness Lab, the Developmental Medicine Department, & Outpatient Psychiatry.



## Connecting with Community Partners

TAP connects with the community through providing training and sharing resources, including facilitating presentations with:

- City of Boston: Office of Youth Engagement and Advancement (OYEA)
- Massachusetts School Counselors Association
- Boston Public Schools
- Office of Community Health's Community Poster Day at Boston Children's Hospital



## Community Resource Series

The community resource series provides information about community-based services to strengthen collaboration and share resources with school communities. TAP partnered with organizations to create informative trainings on these key topics:

- Accessing Emergency Behavioral Health Services in the Community
- Supporting Students in Recovery: Strategies for School Communities
- When Students Experience Grief and Loss: Resources and Supports for School Communities
- Understanding ADHD: Pathways for Diagnosis and Supports



# TAP's New Series:

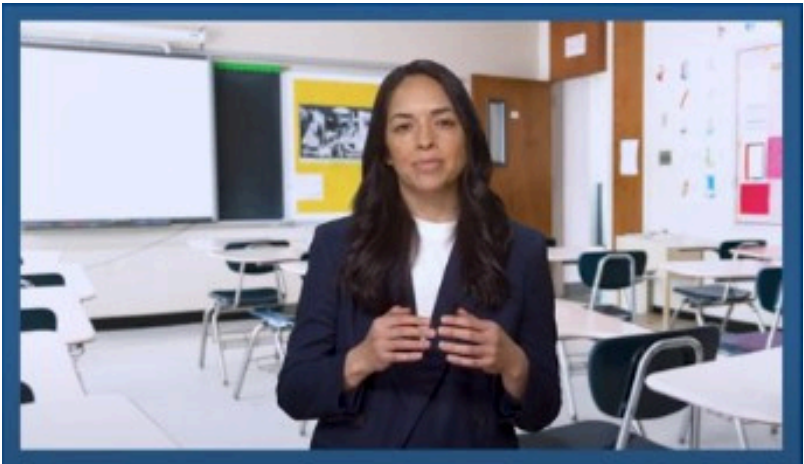
## Building the Foundation

Launched in January 2025, these short trainings provide research-based information, practical tools, and engaging materials to build a foundation for increasing capacity to incorporate social-emotional learning and behavioral health into school communities.

### Building A Foundation for Behavioral Health in Schools



They are designed for all school staff including teachers, specialists, school nurses, administrators, school counselors, school-based clinicians, paraprofessionals, and support staff who are wanting to learn more about best practices for school teams that are looking to start a conversation about how these topics can be addressed in their schools.



#### Strengthening Partnerships between Families and Schools

One of the foundational elements of being in schools is partnering with families. This video highlights the importance of family engagement and shares how family engagement can be different from family involvement.






It will also highlight practices school professionals can use to build and strengthen partnerships with families.






Additional Resources

References

Post-Survey

## The series currently includes:

-  An Overview of the Behavioral Health Landscape in Schools
-  Utilizing Public Health Models in Schools to Support Social-Emotional Learning
-  Building Teams in Schools
-  Strategies to Support Students in the Classroom: Understanding Student Behavior
-  Strengthening Partnerships between Families and Schools




-  Reentry and Reintegration: Preparing for a Student's Return to School After a Behavioral Health Crisis
-  Staff Wellbeing and Organizational Care
-  The Impact of Social Media on Youth Behavioral Health
-  Using Storytelling to Support Students with Grief and Loss
-  An Overview of School-Based Behavioral Health Providers

# School-Based Program

BCHNP's school based program promotes and fosters the social, emotional, and behavioral health and well-being of students, caregivers, and staff through partnerships with twenty schools in three districts. BCHNP psychologists and social workers work as part of school communities and teams, building intentional partnerships to understand the unique ecology of each district and/or school. Our team collaborates with school staff and community partners to provide a full and flexible spectrum of equitable, culturally, and contextually inclusive services to students and their families through a tiered approach, including capacity building, prevention, promotion, early intervention, and clinical intervention.

For the 2024-2025 school year, our school-based program expanded and partnered with two new districts, Agawam Public Schools and Somerville Public Schools. In addition to our work in Boston Public Schools, the work in these districts focused on consultation, training, and coaching with school staff to increase student access to behavioral health interventions.

## District Partnerships

-  Boston Public Schools
-  Agawam Public Schools
-  Somerville Public Schools

20

Partnering Schools

780

Participants across all professional development and professional learning opportunities

## The School Based Program Aims To:

- Assess needs and strengths of partnering schools each year through observations, relationship building, listening in individual and group settings, soliciting feedback, and through the use of the formal needs assessment tools and existing school data.
- Work collaboratively with school community members to develop data-informed, multi-tiered intervention plans.
- Provide multi-tiered services (e.g., therapy, groups, classroom interventions, whole-school initiatives and training) that are culturally responsive/informed and utilize best practices.
- Build capacity of school behavioral health systems by supporting school staff's awareness, knowledge, and skills of identified needs through collaboration, continued learning, and consultation.
- Utilize a variety of outcome measures across individuals, groups, classrooms, and systems to assess the impact of services delivered.

★ *A profile of school-based projects with partnering districts are included within this section*

# 2024-2025 School Year

## A Multi-Tiered Approach

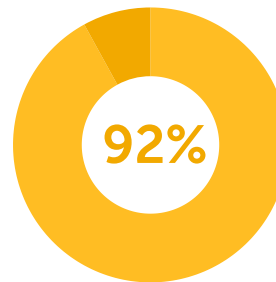
BCHNP focuses on building internal capacity within schools and districts to strengthen existing systems that support students. BCHNP clinicians anchor their support in schools using public health models and multi-tiered systems of support (MTSS) that are aligned with community-based care. Clinicians advocate for collaborative partnerships that meet student needs and focus on supporting schools in capacity building, prevention and promotion. Clinical and consultative services are tailored to each school based on a collaborative needs assessment that leads to goals and action items that will directly impact their students.

## Consultation Services

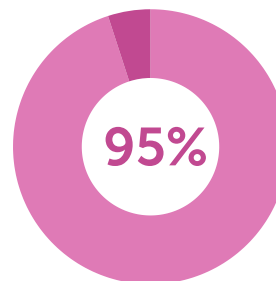
**517** Hours of consultation

“ The BCHNP clinician brings a wealth of knowledge and really strives to build the capacity of our school team so that we can continue to grow and learn and use that to further support our students. She is always readily available, and open for consultation and collaboration. Her care for our students is evident in everything that she does.

-School Staff Member ”

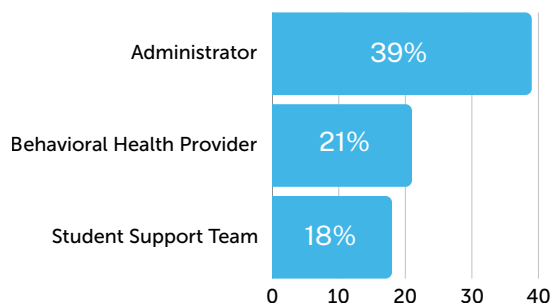


Percentage of BPS partners agreed that the BCHNP clinicians helped their school better address behavioral health issues (N = 12)

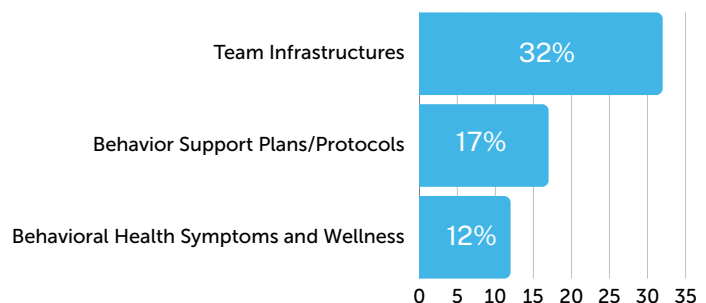


Percentage of MCPAP partners agreed that their school/district has taken action to improve student access to intervention (N = 20)

### Who do we consult with most?



### What do we consult about the most?



\*Please note: the charts above display only the top 3 options

# MCPAP for Schools:

## School Behavioral Health Consultation Model

### Expanding Access, Transforming Systems

MCPAP for Schools, an initiative within BCHNP, in collaboration with the Massachusetts Child Psychiatry Access Program (MCPAP) and the Department of Mental Health (DMH), piloted a district consultation model to enhance how schools connect students to the behavioral health care they need. Partnering with Agawam and Somerville Public Schools, two districts representing diverse settings and student populations in Massachusetts, BCHNP developed the infrastructure for a scalable, equity-focused consultation and training model. The goal of this model is to expand student access to care through a data-driven referral pathway that bridges school and community behavioral health resources. Each district piloted a teletherapy option to help expand access to care.

Traditional behavioral health systems often rely on insurance-driven models that leave gaps for many students. MCPAP for Schools enhances that model by embedding consultation, capacity-building, and coordinated referral pathways into the systems of schools. Grounded in an Interconnected Systems Framework (ISF), the pilot focused on three goals:

#### GOAL 1

##### Model Development & Dissemination

Create a sustainable model for districts and plan for future state-wide dissemination

#### GOAL 2

##### Training & Consultation

School teams will build capacity, knowledge, and skills about best practices for effective school teams, referral practices, care coordination, and community & crisis management

#### GOAL 3

##### Access to Behavioral Health Care

Students will increase access to a range of behavioral health services, both in the community and school-based

### MCPAP for Schools Outcomes: Pilot Year

- Facilitated 15 professional learning communities and workshops on 5 topics that reached school leaders, school-based clinicians, counselors, and community providers (N= 130).
- Provided 313 hours of direct coaching and consultation with school staff, helping to ensure that changes were not only initiated but also embedded within school systems to support long-term impact.
  - In an end-of-year survey, educators (N= 20) reported clearer referral processes, stronger team collaboration, and increased capacity to support students with emerging behavioral health needs.
- Schools referred 353 students to behavioral health services, and 232 of those students received care.
  - Of the students who received services, 65 accessed teletherapy. Among telehealth participants who reported symptoms, 80% showed measurable reductions in anxiety, and 85% reported improvements in depression symptoms (N= 20).



# MCPAP for Schools:

## School & District Assessments & Professional Learning Communities

### District and School Assessments: Laying the Foundation

To best understand the contexts in which we work, our team facilitated comprehensive district-wide and school-level assessments in Somerville and Agawam Public Schools. District leaders engaged in the School Mental Health Quality Assessment (theshapesystem.com) to reflect on their systems for prevention, intervention, and sustainability. School-based teams completed the Tiered Fidelity Inventory 3.0 (Center on PBIS, 2025). This process was supported by BCHNP consultants who observed classrooms, reviewed prac-

tices, and facilitated self-ratings of tiered supports. District and school-based assessments revealed both strengths, such as effective teaming and intervention practices, and areas for improvement, including the need for stronger referral pathways, improved data systems, and clearer criteria for matching students with appropriate supports. These assessments serve as baseline data to guide action planning, coaching, and progress measurement both this year and in the years ahead.

### Professional Learning Communities (PLCs) : Building Capacity Together

Assessment findings informed topics for the Professional Learning Communities (PLCs) facilitated across districts with teachers, school adjustment counselors, administrators, social workers, and community providers. In the table below, participants reported growth in knowledge, and feedback confirmed that the sessions were relevant, practical, and immediately applicable to their work. PLCs encouraged new strategies and shared language to support the development of coordinated systems of behavioral health support. Each PLC targeted a core topic and element of a healthy school behavioral health system:

#### PLC 1

Advanced Tiers: Reviewing Current Practices in Connecting Students to Care

#### PLC 2

Resource Mapping Interventions: Identifying and Organizing Existing Supports in School & Community

#### PLC 3

Understanding Roles to Increase Cross-Discipline Collaboration in a Tiered System of Support

#### PLC 4

Screening & Matching Students to Behavioral Health Services: Supporting Teams in Identifying Supports for Students

#### PLC 5

Progress Monitoring & Collaboration: Supporting Teams in Effectively Monitoring Student Outcomes

# Pre/Post Knowledge Gains

\*Knowledge rated  
on 1-10 scale



## When asked about how the MCPAP Professional Learning Communities:

“

*This model gives us the roadmap we've been missing—one that connects the dots between schools, families, and the mental health system.*

*– District Leader*

”

“

*I believe this work should continue. I would like the partnership to continue with Boston Children's Hospital.*

*- School Staff*

”

# School Profiles:

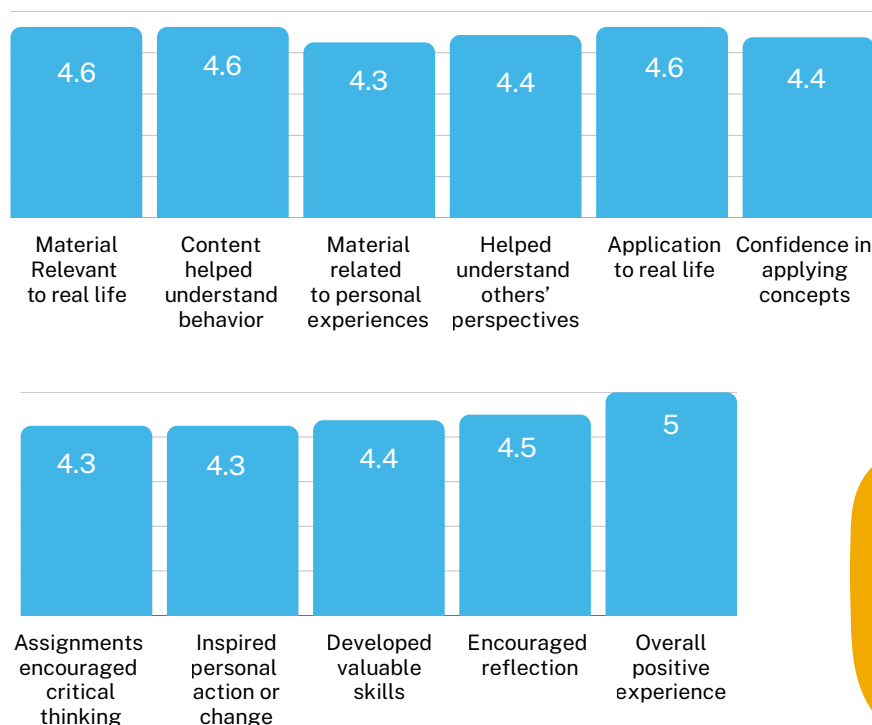
## Boston Arts Academy

BCHNP has partnered with Boston Arts Academy for 23 years. As an integrated member of the school's Health & Wellness Team, Dr. Lea Petrovic works closely with staff and students to support behavioral health and wellbeing. This school year, she taught a psychology class, deepening students' understanding of behavioral health and human behavior. This school year, she taught a psychology class, deepening students' understanding of behavioral health and human behavior with 17 students.

### Psychology Class Through A Social Emotional Lens

An elective psychology curriculum was created for junior and senior high students to teach core concepts and build social-emotional skills. Through interactive lessons, discussions, and projects, students explored topics such as learning theory, emotional regulation, identity, and stress, applying these concepts to real-life situations. The course fostered critical thinking, self-awareness, and empathy, linking academic content to personal growth and relationships.

### Applied Learning in Psychology



\*Higher scores indicate stronger agreement with statements on a scale of 1-5 (N= 8)

*The most valuable thing was discovering how people can be brought up in different ways, and how that effects the way they think and act on things.*

*[The most valuable part of the class was] being able to relate to several aspects of things we learned about to apply them to my personal life.*

# School Profiles: **Boston International Newcomers Academy**



## **Bridging Disciplines: Integrating Behavioral Health and Education to Promote Immigrant Student Wellbeing**


Over three years, Dr. Vanja Pejic partnered with two 12th-grade English teachers at Boston International Newcomers Academy to co-design and strengthen a year-long English Language Arts curriculum that integrates mental health literacy into academic learning. Grounded in Transformative Social-Emotional Learning (T-SEL), trauma-informed practices, and culturally sustaining pedagogy, the curriculum has reached more than 250 students and centers on four themes: Hope, Identity, Social Conditions, and Agency, inviting students to explore the guiding question: What supports the health and wellbeing of immigrant youth?


---

### **Key Features of the Curriculum:**

 **Interdisciplinary Collaboration:**  
Infusing clinical expertise into classroom teaching.

 **Culturally Affirming Content:**  
Literature, immigrant narratives, and “Immigrant Spotlight” stories of resilience and bicultural pride.

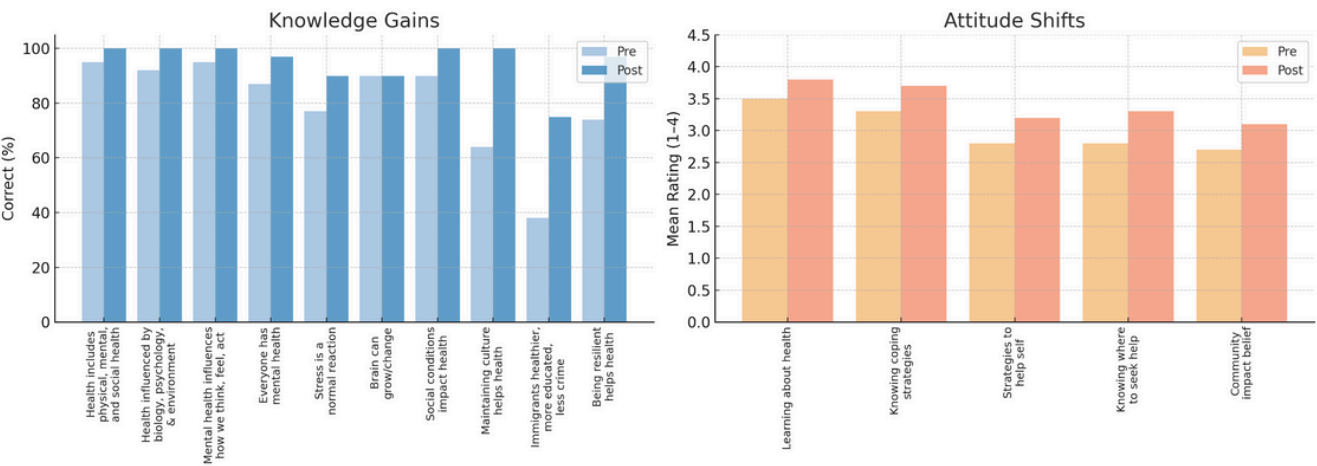
 **Mental Health Literacy:**  
Coping skills, help-seeking, and awareness of social determinants of health.

 **Trauma-Informed Supports:**  
Safe, predictable classrooms with built-in counseling access.



# Boston International Newcomers Academy, cont.

Figure 1: Percentage of correct responses on Pre- and Post-Intervention Knowledge and Attitudes Survey for AY 2022-2023 (N=39 Pre; N=32 Post)



## Why It Matters

This initiative demonstrates how schools and behavioral health providers can partner to create inclusive, healing-centered learning environments. By embedding mental health literacy and culturally sustaining practices into the academic curriculum, schools can empower immigrant youth to reflect on their identities, build resilience, and thrive both academically and emotionally.



### Students

Students showed significant gains in mental health knowledge (e.g., understanding the role of culture in health rose from 64% to 100%). Students expressed pride in their identities, greater confidence in coping strategies, and a stronger belief they could contribute to community wellbeing. One student shared: "I thought only the crazy people had mental health, but now I understand everyone has it."



### Teachers

Teachers reported deeper student engagement, improved relationships, and shifts in their own pedagogy toward more asset-based, culturally responsive approaches. The collaborative design process expanded their capacity to address student wellbeing alongside academics.

# Looking Ahead

As we look to the year ahead, we remain focused on advancing school-based behavioral health through innovation, collaboration, and evidence-driven practice. With new partnerships, including our collaboration with the Children's Wellness Initiative at Franciscan Children's, we are broadening our reach, refining our program model, and strengthening our evaluation efforts. These steps are laying the foundation for a robust research agenda that will guide our continued growth and impact.

We are excited to continue investing in workforce development, designing and delivering high-impact professional learning, and redefining care pathways that better meet the needs of students and school systems. We are also actively planning for the creation of a Center for School-Based Behavioral Health at Boston Children's Hospital, a bold step toward building the future of the field.

At the heart of our work is a belief in prevention, capacity building, and the power of system-level change. We are honored to stand with educators, clinicians, caregivers, and young people as we work toward a future where every student has timely access to the behavioral health support they need to thrive. We enter this next chapter with purpose, urgency, and hope, and we look forward to continuing this work together.

