WHEREAS: A national climate of xenophobic rhetoric and attacks on immigrants has resulted in decreased feelings of safety, increased stress levels, and academic struggles in a group of students of color, including low income ELL, African American, Latinx, Arab, Middle Eastern, and Muslim American, and Asian Pacific Islander American students.

1. The Chinese Progressive Association's (CPA) survey of 971 SFUSD students found that:
   a. The daily fear and stress experienced by undocumented students surveyed hindered them from being fully engaged and present in their education.
   b. CPA also discovered that LGBTQ+ identified students were 13 times as likely as straight students to be bullied for their gender identity and/or sex. CPA reports found that, 36% of lesbian and gay students felt a barrier to seeking wellness services was a concern that family and friends finding out their identity.

WHEREAS: The SFUSD strategic plan and priorities centers access and equity for all students, and recognizes the need to create multiethnic, multiracial, multicultural, and multilingual practices in connection with community partnerships to create environments that support the full potential of all students.

1. SFUSD’s “Response to Instruction and Intervention” (RtI) framework highlights the importance of intervening to address students’ social and emotional needs; RtI also highlights the intersections between student learning, students’ social emotional well-being and school culture-climate (SFUSD 2016-2019 Strategic Plan, pg. 5).

WHEREAS: Research shows that students who experience trauma can exhibit higher levels of chronic absence, which in turn indicates that mental health services are critical to supporting student attendance and addressing educational inequities. In SFUSD, American Indian, African American, and Pacific Islander students are five times more likely to be chronically absent than white students; and

WHEREAS: CPA believes that in order to build upon the support of wellness services for students of color in schools, the values that need to be centered currently are:

1. Applying further support to a district-wide and site specific preventative and transformative approach to wellness and healing that expands reach to all students before their mental health needs reach crisis mode.

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1 Chronic School Absenteeism and the Role of Adverse Childhood Experiences (Stempel et al 2017)
2. Building upon the value of student voice and skills as leaders and decision makers. Because young people are often the first responders when peers or friends are struggling, student-driven solutions are imperative to address young people’s mental health needs.

3. On-going building of collective responsibility for wellness and healing that further engages students, parents, guardians, and community based organizations to support wellness staff, to continue centering young people as effective educators, counselors, and decision makers; and

WHEREAS: SFUSD has made positive strides through the ongoing support of students’ emotional and social well-being in schools and through the support of the Safe and Supportive Schools resolution led by Coleman Advocates for Youth and Families that seeks to reduce punitive disciplinary practices in schools in favor of restorative justice approaches to classroom discipline. We believe our recommendations will strengthen and supplement SFUSD’s existing work by centering student voice and decision-making to effectively lead mental health engagement; and

WHEREAS: Mental health continues to be a challenge in communities of color. Wellness centers continue to be under-utilized by these groups of students whose mental health needs are difficult to detect and to support by educators and wellness staff. Moreover, students do not have sufficient time and opportunities to visit the wellness center due to interference with class time. There are ongoing disciplinary measures used against students, such as being sent to the dean’s office; and

WHEREAS: The CPA survey shows that school wellness centers need support to meet the cultural and linguistic needs of Asian American and English Language Learners students and families, who are not accessing services As Asian Americans continue to feel under referred to wellness centers due to the Model Minority narrative and mental health stigmatization, Latinx and African American students feel they receive higher levels of referrals as a disciplinary measure.

- Additionally, lack of awareness, outreach, low rates of referral to services, and cultural barriers served as barriers for students, especially for Asian Americans and students whose primary language is not English.
- Middle Eastern students also reported additional barriers of Islamophobia to not using mental health services.

THEREFORE BE IT RESOLVED: The San Francisco Unified School District Board of Education will commit to extend the development procedures, structures, and funding infrastructure to invest in staff, value student voices, and create relationship building spaces for parents, community members, staff, and students to support wellness and mental health across the district; and
FURTHER BE IT RESOLVED: SFUSD will develop and implement plans, processes, and protocols to:

1. Increase funding to support preventative wellness services for students.
   - Hire more staff, therapists, and social workers to serve the needs of students of color and immigrant students with the greatest mental health needs. Individual schools will develop processes that will involve staff, student, and service organization stakeholders at the site level to determine positions needed.
   - Strengthen existing preventative resources through general funds, including mindfulness, community schools, restorative practices, and peer resource programs, especially in schools with higher numbers of low-income ELL, African American, Latinx, Arab, Middle Eastern, and Muslim, and Asian Pacific Islander American student population.

2. Expand on the value of student voice and skills as leaders and decision makers.
   - Deepen student and school staff voice and decision making power by integrating students and school staff with existing school-based and district-wide committees to support with decisions related to school-site wellness programs, feedback, school-site staff hiring committee, curriculum development, and funding. At least one of the organizational representatives that sit on this committee will have the following attributes: working to serve working-class, immigrant, ELL communities rooted in grassroots youth of color-led social justice organizing.

3. Collectivize responsibility for wellness and healing
   - Develop and implement a peer-led coaching program with support from community-based organizations who work to serve working-class, immigrant, ELL communities rooted in grassroots youth of color-led social justice organizing for the 2019/2020 school year. District wellness staff and principals will work with other key community-based and service organizations at two pilot schools to design and integrate program within existing services. CHOWS will be hired to coordinate and facilitate program.
   - Integrate culturally responsive mental health curriculum that addresses root causes of racism, xenophobia, and sexism. Students are core to curriculum design and training for teachers, staff, and students.
   - SFUSD will work with needed partners and other key service organizations servicing immigrant, ELL communities rooted in grassroots youth of color-led social justice organizing to develop curriculum and trainings for teachers, staff, students in 2019-2020 school year to implement in 2020-2021; and

BE IT FURTHER RESOLVED: That the Board of Education will request the Superintendent to give bi-annual reports on the progress. SFUSD will include needed partners servicing immigrant, ELL communities rooted in grassroots youth of color-led social justice organizing as a part of this evaluation process and implementation of this resolution.

5/14/19