



Organization Profile

Founded: 1882

Location: 6737 W Washington St,
Ste 2275, Milwaukee, WI 53214

Website: www.lsswis.org

EIN: 39-0816846

Mission: Act compassionately.
Serve humbly.
Lead courageously.

Overview: Driven by the belief in the infinite worth of every person, Lutheran Social Services of Wisconsin and Upper Michigan (LSS) serves with compassion and courage to co-create positive change by strengthening families, healing communities, and creating avenues for belonging. Each year, our programs and services help nearly 30,000 people of all ages and backgrounds—regardless of their religious affiliation—address needs around housing and homelessness, adoption, foster care, refugee resettlement, mental health, and substance use.

Leadership

Héctor Colón,
President & CEO

Joel Treffert,
Operating Board Chair

Contact

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Chief Advancement &
Advocacy Officer
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(414) 246-272



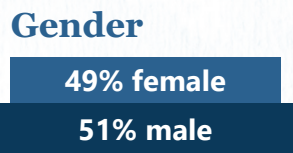
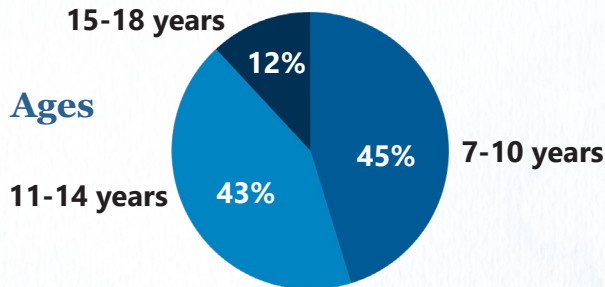
School Centered Mental Health 2024-2025 Final Report

Developed in 2018, this innovative and evidence-informed program utilizes a family coach to directly connect the work done through in-school therapy with the home environment while reducing systemic barriers to mental health treatment. School Centered Mental Health (SCMH) runs year-round (August 1 – July 31) with the most intensive service provided during the academic year. **The goals of SCMH are to 1) reduce youth mental health disparities; 2) address Social Determinants of Health needs; and 3) improve the well-being of historically marginalized youth and families.** SCMH includes:

- **Therapeutic Services** for students and families that prioritize emotional safety, regulation, and resilience. SCMH clinicians use culturally reverent and strength-based approaches and evidence-based modalities such as Motivational Interviewing, Trauma-Informed Care, Person-Centered Planning, Dialectical Behavior Therapy skills, and Trauma-Focused Cognitive Behavioral Therapy.
- **Family Coaching** to nurture trusting and strong relationships with students and their families through home, community, and virtual visits that 1) build caregiver confidence and capacity; 2) identify the family's Social Determinants of Health needs; 3) connect the family to needed resources; and 4) bridge the therapeutic work done in school to the home environment.
- **School Partnerships** that support school administrators and teachers with insights and strategies designed to reduce behavioral disruptions and promote student engagement and learning readiness.
- **Resource Connection.** SCMH family coaches link any family at participating schools with needed resources.
- **Program Evaluation.** Utilizing valid, reliable, and developmentally appropriate assessment tools, SCMH implements ongoing data collection and progress monitoring. Findings inform services, adjust interventions, and ensure continuous quality improvement.

During the 2024-2025 school year, SCMH partnered with the following nine (9) Milwaukee schools and served 127 students and nearly 200 of their family members: Acosta Middle School; Andrew S. Douglas Middle School; Bruce Guadalupe Elementary School; Bruce Guadalupe Middle School; Lafollette Public School; Marvin E. Pratt Elementary; North Division High School; Ralph H. Metcalfe School; and The MPS Success Center.

2024-2025 SCMH Participant Demographics

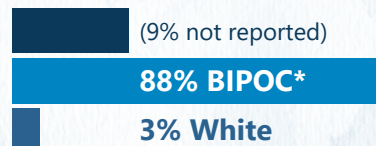


Zip Codes

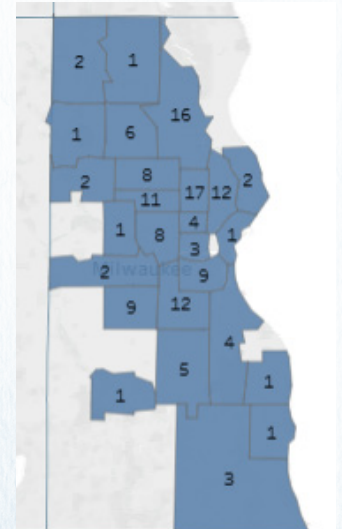
top five zip codes served:

- 53206 (12%)
- 53209 (11%)
- 53204 (9%)
- 53212 (9%)
- 53215 (9%)

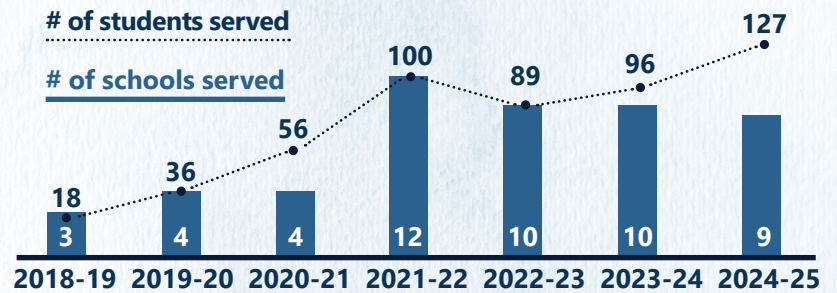
Grouped Race



*Black, Indigenous, People of Color

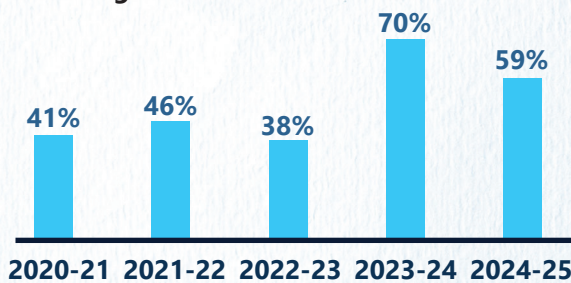


SCMH over the years



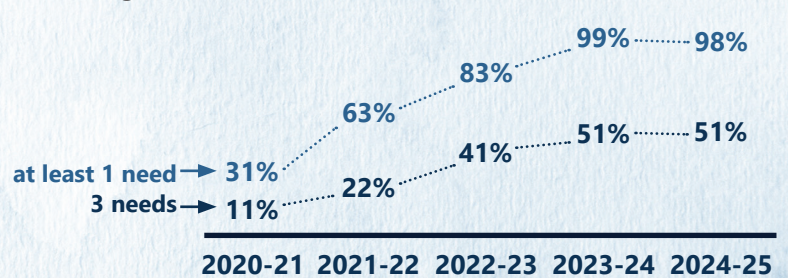
Increasing SCMH Need

Percentage of Students with 4+ ACEs at Intake



From the 2020-2021 school year to the 2024-2025 school year, there has been a 44% increase in the percentage of students who enter the SCMH program with four or more Adverse Childhood Experiences (ACEs)—traumatic events that occur in childhood and have a tremendous impact on lifelong health and opportunities. In 2024-2025, **59% of our SCMH students had an ACE score of 4+** (compared to the national average of 17.3% [1]) and 61% were diagnosed with trauma and stress-related disorders.

Percentage of Families with SDoH Needs at Intake



At the same time, we have seen a 216% increase in families entering the program with at least one (1) significant Social Determinants of Health (SDoH) need—housing, food insecurity, social connectedness, healthcare access, etc. In addition, we have seen a **364% increase in families that come to us with three (3) or more significant SDoH needs.**

[1] Swedo EA, Aslam MV, Dahlberg LL, et al. Prevalence of Adverse Childhood Experiences Among U.S. Adults — Behavioral Risk Factor Surveillance System

School Centered Mental Health Impact on Students & Families

SCMH utilizes a variety of assessment tools for continuous quality improvement purposes. For example, our SCMH team uses the Strengths and Difficulties Questionnaire (SDQ), a brief screening tool used to measure a child's emotional and behavioral functioning related to five core scales: emotional symptoms (anxiety and depression), conduct problems, hyperactivity/inattention, peer relationship problems, and prosocial behavior. Our team also uses the Columbia-Suicide Severity Rating Scale (C-SSRS) to supplement the SDQ for children with severe depression and concerns of possible self-harm, as well as the Social Determinants of Health (SDoH) screening tool to assess each family's SDoH needs. Assessment is conducted at intake and discharge. Analysis of the 2024-2025 year of SCMH programming demonstrated the following impact:



79%

Of students with an elevated score at intake improved their **hyperactivity**, such as restlessness, overactivity, impulsiveness, inattention, and difficulty completing tasks to completion, at least one clinical level by discharge.



64%

Of students with an elevated score at intake improved their **mental health symptoms**, such as depression and anxiety, at least one clinical level by discharge.



59%

Of students with an elevated score at intake improved their **conduct** or externalizing behaviors such as difficulty complying with adult requests, aggression, tantrums, or outbursts, at least one clinical level by discharge.



52%

Of students with an elevated score at intake improved their **prosocial skills**, including empathy, sharing, kindness, and helpfulness towards others, at least on clinical level by discharge.



95%

Of students and families experienced a reduction in barriers to Social Determinants of Health needs. The most improvement was seen in the following areas: 1) social connectedness and belonging; 2) transportation to work; 3) income level; and 4) childcare.

Last year, LSS had the opportunity to advocate for our school centered mental health programming model so that it could be replicated in other communities outside of Milwaukee thanks to a Senate Assembly Bill. LSS was heavily involved in advocating for this bill and on May 23, 2025, our senior leadership and Yolanda, a mother whose daughter participated in SCMH testified to support the bill in front of the Senate Committee on Mental Health, Substance Abuse Prevention, Children and Families, and the Assembly Committee on Mental Health and Substance Abuse Prevention. The bill passed out of committee with bi-partisan support from the Assembly and Senate. Ultimately, however, it did not make it into the State Budget signed by the Governor on July 2, 2025. While we would have celebrated being included in the budget, the process has helped us gain greater visibility and advocates for School Centered Mental Health.

“The passing of her older sister affected Antonia a lot. Her school saw her pain and suggested that SCMH would be a good program to help her out. SCMH has helped my baby. It really did. And Antonia has come a long way from where she was. Now she is not so angry. She’s not fighting the way she used to fight. Instead, she’s listening. Even her school has seen the impact that it has had on her. Thank you for bringing a smile back to my daughter.” -Yolanda



Thank you for helping improve the mental health and wellbeing of our local young people and their families through our School Centered Mental Health Program!