**Letter of Support**

Re: ASHA Partnership for Funding Opportunity

Dear sir or madam,

I am writing to express the commitment of the American School Health Association (ASHA) to partner with the applicant on the proposed project. ASHA brings a wealth of expertise from across the country to the project. In recognition of ASHA’s national reputation, expertise, and network, the applicant has partnered with ASHA to expand the reach of services to underserved and rural populations. In particular, ASHA will convene a multidisciplinary advisory group of school health professionals representing all of the Whole School, Whole Community, Whole Child (WSCC) components. This group will provide guidance on communicating the importance of behavioral health integration and the availability of telehealth services. In addition, ASHA will provide a platform for training and dissemination to the field. This assistance will enhance the impact of the project by ensuring that services reach the students and staff in greatest need.

Sincerely,

Jeanie Alter, PhD

Executive Director

American School Health Association

**Proposed Project**

This project will be enhanced by a relationship with a national professional organization – the American School Health Association (ASHA). The American School Health Association is a multi-disciplinary professional association working to **transform all schools into places where every student learns and thrives**. This is done by embracing and implementing the Whole School, Whole Community, Whole Child Model ([WSCC](http://www.ascd.org/programs/learning-and-health/wscc-model.aspx)). The CDC described the model and its purpose well. “Schools, health agencies, parents, and communities share a common goal of supporting the health and academic achievement of adolescents. Research shows that the health of students is linked to their academic achievement. By working together, the various sectors can ensure that every young person in every school in every community is healthy, safe, engaged, supported, and challenged” (CDC WSCC Fact Sheet 508). We know that by supporting the health and well-being of students, we can strengthen K-12 education and prepare students for education and lifelong success. All of ASHA’s members have extensive subject matter expertise in the WSCC model and the overwhelming majority are educators, administrators, or behavioral health/healthcare providers for students. As such, ASHA brings a wealth of expertise from across the country to the project.

In recognition of ASHA’s national reputation, expertise, and networks, the applicant has partnered with ASHA to expand the reach of services to underserved and rural populations. In particular, ASHA will convene a multidisciplinary advisory group of school health professionals representing all of the WSCC components. This group will provide guidance on communicating the importance of behavioral health integration and the availability of telehealth services. This may include development and review of awareness and recruitment messaging and training aimed at the school community. In addition, ASHA will promote the integration of behavioral health telehealth services in schools beyond those in the project. Through its members, followers, and subscribers, ASHA has access to approximately 125,000 school health professionals in all 50 states. This includes rural and urban schools, affluent and underserved students, health and physical educators, school health services staff, and mental health providers. ASHA can provide training and professional development for multidisciplinary audiences through its monthly webinar series. ASHA has the capacity to coordinate and host through virtual technology that will reach K-12 education, school health services, and mental health providers. ASHA also can provide an opportunity to convene project partners at its annual conference by dedicating breakout sessions to the establishment of integrated telehealth services in schools, providing evidence-based services with fidelity, and evaluating the outcomes of behavioral health services. Finally, ASHA’s peer-reviewed journal – the Journal of School Health – offers the opportunity to highlight the findings of this project to a broader audience of school health professionals in the hopes of replicating the successes and expanding reach.

In particular, ASHA will leverage its national network to diffuse research findings through a variety of trusted vehicles. In addition, ASHA’s peer-reviewed journal – the Journal of School Health – offers the opportunity to highlight the findings of this project. Through these activities, ASHA will build and support a more prepared, energized, and capable school health workforce to address needs of students.

**Budget**

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| --- | --- | --- | --- | --- |
| **Name** | **Service** | **Rate** | **Other** | **Cost** |
| American School Health Association | Advisory Group | $100/hour x 10 members to meet quarterly |  | $4,000 |
|
|  | Webinar | $2,500/ Hosted webinar |  | $2,500 |
|  | Conference Convening | Space, AV, planning services | one day conference track | $10,000 |
|  | JOSH open access | $3,500/article |  | $3,500 |
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|
|  |  |  | **TOTAL** | **$20,000** |
| **NARRATIVE JUSTIFICATION:**   1. Assembling of an advisory group of school health professionals representing all 10 WSCC components. Responsibilities will include review and development of messaging/training aimed at the wider school community for the purposes of raising awareness of and recruitment to services. The group will meet virtually on a quarterly basis for no more than 1 hour. 2. Involvement in the ASHA webinar series to include a 1 hour webinar on a topic related to the project. ASHA will provide promotion, technology support, registration, hosting, continuing education, and evaluation. 3. Dedicated track of ASHA’s annual School Health Conference. To be held in the city of ASHA’s choosing in October of each year. ASHA will provide space, AV, planning services, continuing education, promotion, registration, and evaluation. Attendees will be responsible for paying registration fees. 4. Any article developed describing the project’s outcomes will be submitted to ASHA’s Journal of School Health for peer-review. If accepted, open access to the article will be provided to anyone without requirement to have a subscription. This will enhance the reach of the outcomes and provide important lessons learned to school communities beyond those directly involved in the project. | | | | |