

Addressing Children's Mental and Behavioral Health Needs in the Schools

SAANYS Summer Camp 2018

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What is Mental Health?



- Mental health is not simply the absence of mental illness but also encompasses social, emotional, and behavioral wellness and the ability to cope with life's challenges.

Why Mental Health in Schools?

- Students are substantially **more likely to seek help** when school mental health services are available
- Schools are already the **major providers of mental health** services to children
- The Carnegie Council Task Force on Education of Young Adolescents concluded that, while school systems are not responsible for meeting every need of their students, ***schools must meet the challenge when the need directly affects learning.***

The unmet mental health needs of students may be an important and largely unrecognized influence on broader indices of student achievement in school districts and statewide educational systems

The Good News!

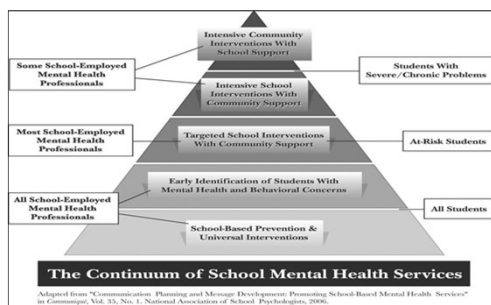
- School mental health programs **improve student mental wellness, behavioral functioning, and academic achievement.**
- School mental health programs improve educational outcomes by **decreasing absences, discipline referrals and improving test scores.**
- Expanded school mental health services in elementary schools have been found to:
 - **reduce special education** referrals
 - improve aspects of the **school climate**
 - **produce declines** in disciplinary referrals, suspension, grade retention, and special education referrals and placement among at-risk students

Despite the enhanced array of community-based and in-home mental health care options, children receive mental health services in schools more frequently than any other setting

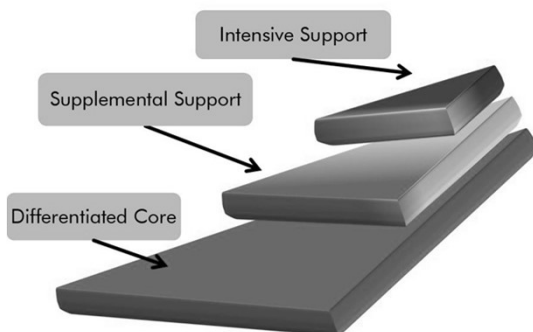
Multi-Tiered System of Supports

- Mental and behavioral health services fall on a continuum and are increasingly provided within a multi-tiered system of supports
 - Tier I: promotion of mental and behavioral wellness and prevention of mental and behavioral health problems
 - Tier II: direct and indirect services to address emerging mental and behavioral health problems and prevent risky behaviors
 - Tier III: direct and indirect services to address identified mental and behavioral health problems
- **services provided by at all three levels are considered mental and behavioral health services**

Model of School Mental Health Services



Layering of Support



Tier 1 - Universal

- Interventions that target the entire population of a school to promote and enhance wellness by increasing pro-social behaviors, emotional wellbeing, skill development, and mental health.
- This includes school-wide programs that foster safe and caring learning environments that, engage students, are culturally aware, promote social and emotional learning and develop a connection between school, home, and community.
- The content of Tier 1/Universal approaches should reflect the specific needs of the school population.

Tier 2 - Secondary

- Interventions at Tier 2 are scaled-up versions of Tier 1 supports for particular targeted approaches to meet the needs of the roughly 10-15% of students who require more than Tier 1 supports.
- Typically, this would include interventions that occur early after the onset of an identified concern, as well as target individual students or subgroups of students whose risk of developing mental health concerns is higher than average.
- Risk factors do not necessarily indicate poor outcomes, but rather refer to statistical predictors that have a theoretical and empirical base, and may solidify a pathway that becomes increasingly difficult to shape towards positive outcomes.

Tier 3 - Tertiary

- Interventions for the roughly 1-5% of individuals who are identified as having the most severe, chronic, or pervasive concerns that may or may not meet diagnostic criteria.
- Interventions are implemented through the use of a highly individualized, comprehensive and developmental approach that uses a collaborative teaming process in the implementation of culturally aware interventions that reduce risk factors and increase the protective factors of students.

Advantages of MTSS

- Provides instructional and behavioral assistance in a timely fashion (e.g., not a wait to fail model)
- Helps to ensure a student's poor academic performance is not due to:
 - poor instruction
 - inappropriate curriculum
 - lack of expectations
- Informs teachers and improves behavior and/or instruction because data are collected and closely linked to interventions.

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WISCONSIN SCHOOL MENTAL HEALTH NEEDS ASSESSMENT

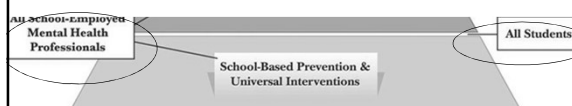
<http://dpi.wi.gov/sites/default/files/imce/sspw/pdf/mhneedsassessmentfill.pdf>

- This 58-question survey allows an individual or a school team to **assess their school's needs and priorities** for strengthening a comprehensive school mental health system.
- Teams will use a needs assessment, reflect on the results to **identify strengths and needs**, and develop a plan for professional development and action to support growth in the identified area(s)
- Planning tool is located in "Framework" Guide

Programs delivered to all students are proactive, preventive, and reduce the risk of stigma for students who are served

Prevention and Universal Interventions

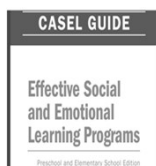
- Prevention and wellness promotion through -
 - Trauma sensitive practices
 - Classroom guidance lessons
 - Social Emotional Learning
 - Positive behavior interventions and supports
 - Effective discipline policies and practices
 - Bullying/Violence Prevention
 - Crisis prevention and intervention teams
 - Fostering positive relationships among students and staff



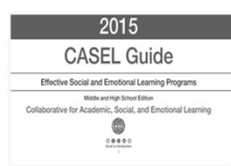
Trauma Sensitive Schools promote

- feelings of physical, social, and emotional safety in students
- a shared understanding among staff about the impact of trauma and adversity on students
- positive and culturally responsive discipline policies and practices
- access to comprehensive school mental and behavioral health services
- effective community collaboration

Collaborative for Academic, Social, & Emotional Learning Guides



casel.org/wp-content/uploads/2016/01/2013-casel-guide-1.pdf



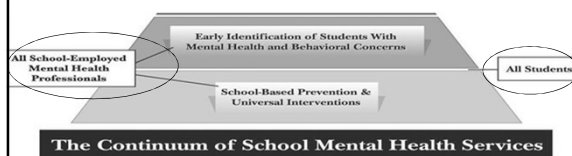
casel.org/middle-and-high-school-edition-casel-guide/

Early Identification, Screening, and Progress Monitoring

- To avoid a reactive approach to addressing unmet student needs, an **early identification system** must be established
- The school must establish procedures to identify students early on who may need additional mental health supports
- **Teacher identification** can be used to determine students with the greatest challenges
- **Existing school data** on these students can be used to help determine what additional supports might benefit them

Early Identification

- Connectedness Surveys
- Teacher surveys/screeners
- Behavioral Data
- Attendance Data
- Staff development/Mental Health First Aid
- Suicide Risk/Threat
- Universal Screening
- Protocols for Responding to Bullying
- Self-Reporting
- Anonymous Reporting



Screening for Mental & Behavioral Health

- Mental health screening is the assessment of students to determine whether they may be at *risk* for a mental health concern.

What's My ACE Score?

Print or save PDF booklet

1. Did a parent or other adult in the household often or very often...
 Act in a way that made you afraid that you might be physically hurt?
 Yes No If yes enter 1 _____

2. Did a parent or other adult in the household often or very often...
 Push, grab, slap, or throw something at you?
 Yes No If yes enter 1 _____

3. Ever let you so bad that you had marks or were injured?
 Yes No If yes enter 1 _____

4. Did an adult or person at least 5 years older than you ever...
 Touch or fondle you or force you to touch their body in a sexual way?
 Attempt or actually have oral, anal, or vaginal intercourse with you?
 Yes No If yes enter 1 _____

5. Did you often or very often feel that...
 No one in your family loved you or thought you were important or special?
 Your family didn't look out for each other, feel close to each other, or support each other?
 Yes No If yes enter 1 _____

6. Did you often or very often feel that...
 You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?
 Your parents were ever drunk or high to take care of you or take you to the doctor if you needed it?
 Yes No If yes enter 1 _____

7. Was a biological parent ever lost to you through divorce, abandonment, or other reason?
 Yes No If yes enter 1 _____

8. Was your mother or stepmother...
 Often or very often pushed, grabbed, slapped, or had something thrown at her?
 Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard?
 Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?
 Yes No If yes enter 1 _____

9. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
 Yes No If yes enter 1 _____

10. Was a household member depressed or mentally ill or did a household member attempt suicide?
 Yes No If yes enter 1 _____

11. Did a household member go to prison?
 Yes No If yes enter 1 _____

Now add up your "Yes" answers: _____ This is your ACE Score.

• ACEs
Questionnaire

Connecticut Child Trauma Screening

<http://www.chdi.org/our-work/mental-health/trauma-informed-initiatives/ct-trauma-screen-cts/>

Child Trauma Screener

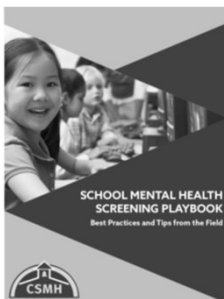
<input type="checkbox"/> Academic Difficulties <input type="checkbox"/> Drop in academic performance <input type="checkbox"/> School tardiness <input type="checkbox"/> School truancy <input type="checkbox"/> Aggressive (or Threats of) Behaviors <input type="checkbox"/> Toward animals <input type="checkbox"/> Toward others (e.g. physical, verbal, or relational bullying) <input type="checkbox"/> Toward self (e.g., cutting, burning, scratching) <input type="checkbox"/> Toward the property of another person <input type="checkbox"/> Avoidance Behaviors , such as avoiding: <input type="checkbox"/> Activities the student once found enjoyable <input type="checkbox"/> School, in general <input type="checkbox"/> Social situations <input type="checkbox"/> Specific objects, situations, or places <input type="checkbox"/> Irregular/Consuming Thoughts , such as: <input type="checkbox"/> Anger/irritability <input type="checkbox"/> Death or dying <input type="checkbox"/> Extreme perfectionism <input type="checkbox"/> Fear of gaining weight <input type="checkbox"/> Flight of ideas (racing thoughts) <input type="checkbox"/> Grandiosity (inflated sense of self-importance) <input type="checkbox"/> Guilt	<input type="checkbox"/> Eccentric behaviors , such as: <input type="checkbox"/> Engaging in high-risk behaviors <input type="checkbox"/> Excessive engagement in pleasurable behaviors <input type="checkbox"/> Excessive talkativeness <input type="checkbox"/> Excessive Sadness , such as: <input type="checkbox"/> Excessive crying <input type="checkbox"/> Feelings of hopelessness/helplessness <input type="checkbox"/> Loss of interest <input type="checkbox"/> Excessive Worrying , such as: <input type="checkbox"/> Worrying about everything and anything most of the time <input type="checkbox"/> Worrying surrounding a specific object, place, event, or situation <input type="checkbox"/> Inattentive Behaviors , such as: <input type="checkbox"/> Being easily distracted <input type="checkbox"/> Being fidgety <input type="checkbox"/> Difficulty with concentration or keeping attention for long periods of time <input type="checkbox"/> Not being able to remain seated <input type="checkbox"/> Not following directions or completing assigned tasks (like homework) <input type="checkbox"/> Not listening or responding <input type="checkbox"/> Speaking out of turn/interrupting others
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University of Nebraska

School SBIRT

- SBIRT stands for Screening, Brief Intervention, and Referral to Treatment
- SBIRT offers an efficient, evidence-based, and comprehensive service to address selected behavioral health concerns among adolescents
- <http://www.wishschools.org/resources/schoolsbirt.cfm>

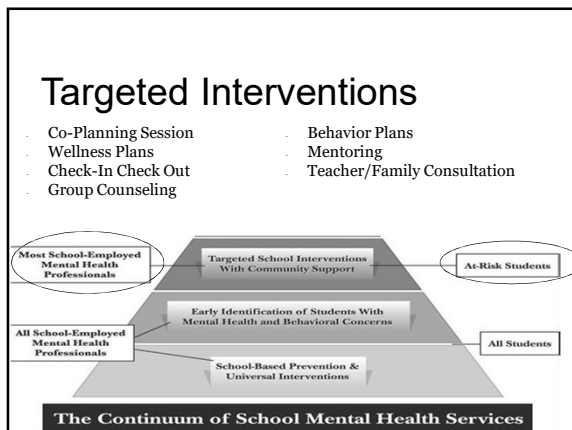
Center for School Mental Health



Values of School Mental Health and Interventions for Nebraska for School Mental Health

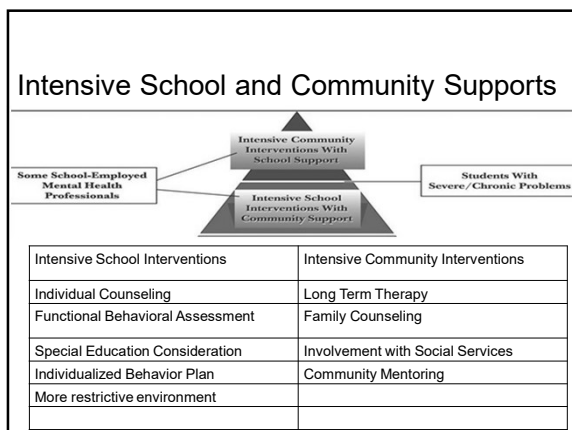
Screening/Intervention	Screening	Intervention	Screening	Intervention	Screening	Intervention	Screening	Intervention
Screening	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
Intervention	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00

Center for School Mental Health, 2018



Intensive Level of Supports for a FEW Students

- When prevention and early interventions do not meet students' needs, other interventions should be used. Intensive and individualized interventions should be linked with the system of care principles



Examples of Ineffective Secondary/Tertiary Structures

- Referrals to Special Education seen as the “intervention”
- FBA seen as required “paperwork” vs. a needed part of designing an intervention
- Interventions the system is familiar with vs. ones likely to produce an effect

We Know the Practices that Work at Tier 3...

- Proactive, strength-based; “set students up” to experience success
- High rates of consistent, supported instruction; teach/practice/reinforce

We Know the Practices that Work (cont.)...

- Predictable and consistent environments
- Know unique “why?” for each student/problem
- Contextual fit: Strategic use of natural supports, and settings

We Know the Practices that Work (cont.)...

- Careful monitoring of data over time with ongoing revisions to guide incremental improvements in quality of life

Center for School Mental Health – U of MD

- School Health Assessment and Performance Evaluation(SHAPE) System
- free, private, web-based portal that offers a virtual work space for your school mental health team to document, track, and advance your quality and sustainability improvement goals
- comprehensive school mental health systems can access the census and performance measures, as well as obtain customized school and district level progress reports and useful resources to improve system quality and sustainability

Strategic Team Planning

- **School Mental Health Quality Assessment** Tool is designed for your school to self-assess your system's quality
- **School Mental Health Sustainability Assessment** Tool is designed for your school to self-assess your system's sustainability

Customized Reporting



Additional SHAPE Features

- Access to a comprehensive repository with up-to-date, public access **resources**
- Use the repository to **generate ideas for action steps** related to your own improvement goals
- By engaging with The SHAPE System in any way, your school or district mental health system will become a part of the **National School Mental Health Census**

OPPORTUNITIES THROUGH ESSA

Funding

- The Every Student Succeeds Act (ESSA) authorizes various funding streams (e.g., Title I, Title II, and Title IV), including funds specifically reserved for schools identified for targeted support and improvement, to support state and district efforts to improve access to coordinated comprehensive school mental health services.

School Climate

- ESSA explicitly recognizes the strong relationship between positive school climate and student learning and success. In addition to requiring states to include data related to school climate and safety in annual school report cards, the law provides significant opportunity for school leaders to create learning environments that support the success of all students

A strong system of comprehensive social, emotional, and behavioral supports is equally as important as effective teaching in helping students achieve and exceed their academic potential

Key ESSA Definition:

School Based Mental Health Services Provider

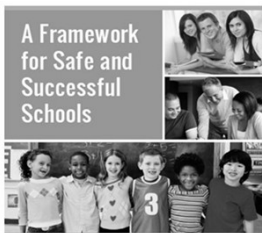
- **School-based mental health services provider:** "...includes a State-licensed or State-certified school counselor, school psychologist, school social worker, or other State licensed or certified mental health professional qualified under State law to provide mental health services to children and adolescents.

Key ESSA Definition: *Specialized Instructional Support Personnel (SISP)*

Specialized Instructional Support Personnel means "(i) school counselors, school social workers, and school psychologists; and "(ii) other qualified professional personnel... involved in providing assessment, diagnosis, counseling, educational, therapeutic, and other necessary services (including related services ...) as part of a comprehensive program to meet student needs."

- Replaces "pupil services personnel"
- Is intended to reflect the similarities between pupil services (as defined in ESEA) and 'related services' as defined by IDEA
- ESSA explicitly references (and in some cases mandates) specialized instructional support personnel and services more than 40 times in policies regarding state and district school improvement plans; identifying and supporting students most at risk of school failure; improving student literacy; addressing school climate and school safety; supporting the mental and behavioral health of students, among others.

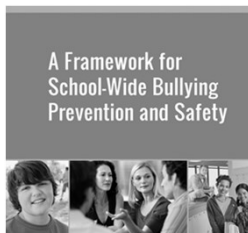
A Framework for Safe and Successful Schools



NASRO
National Association of State Principals
NASPP
National Association of School Psychologists

<http://www.nasponline.org/resources/framework-safe-and-successful-schools.aspx>

A Framework for School-Wide Bullying Prevention and Safety



National Association of School Psychologists
Helping children achieve their best
Academic, Social, and Life Skills

http://www.nasponline.org/resources/Bullying/Bullying_Brief_12.pdf

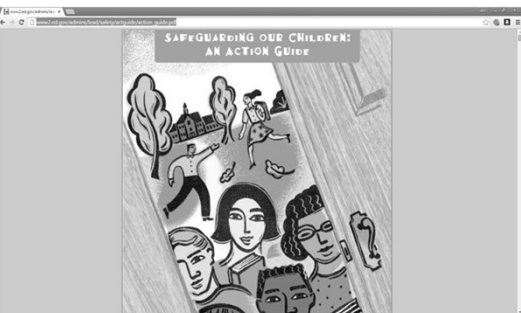
Early Warning, Timely Response

<http://cecp.air.org/guide/>



Safeguarding Our Children

http://cecp.air.org/guide/AIRsearch01%28Frev%29Action_Guide_SP.pdf



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