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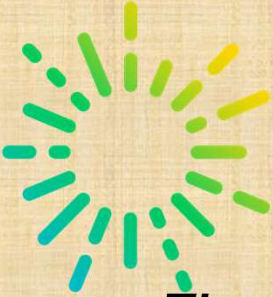
Creating Better Mental Health & Wellness in Our Schools

eLuma Webinar Series

Creating Better Mental Health and Wellness in Our Schools

 John Kelly 1/12	 Eric Rossen 1/19	 Peter Faustino 1/26	 Benjamin Fernandez 2/2	 Todd A. Savage 2/9
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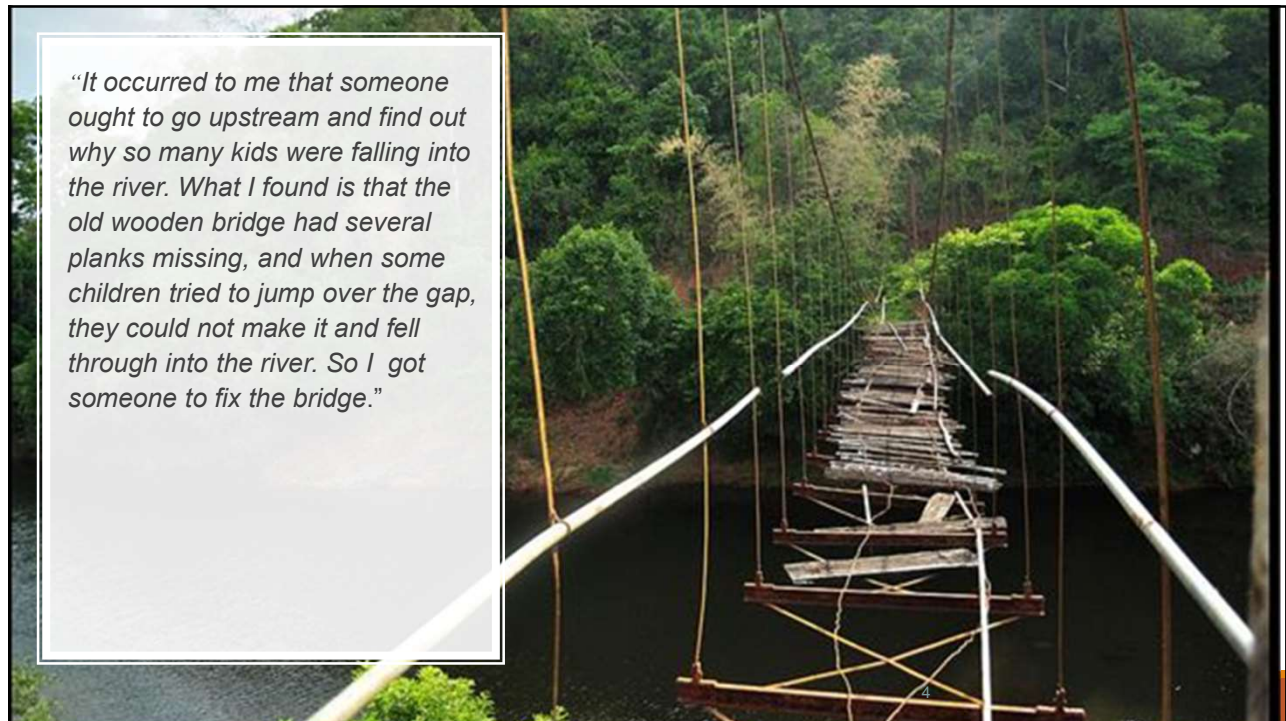
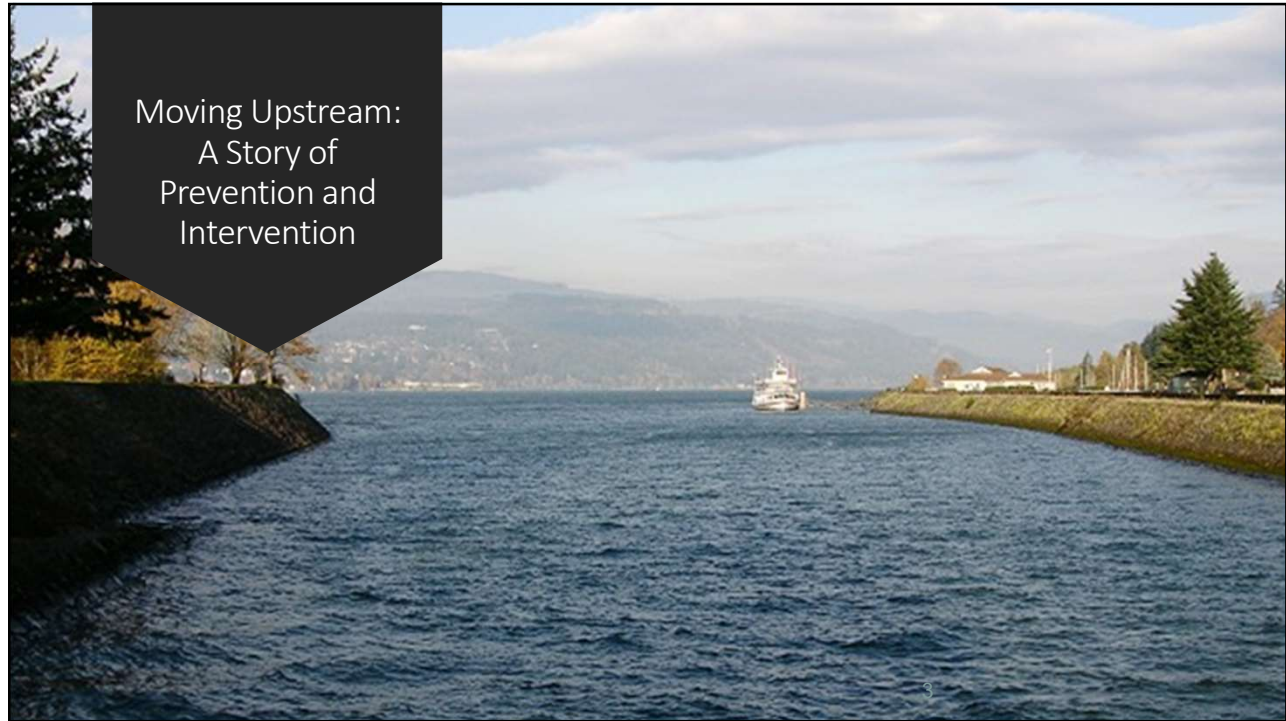
eLuma Jan 12 - Feb 9, 2022 Watch in-person or on-demand



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The Provision of School-based Mental Health Services within a Multi-Tiered Systems of Support Framework

John Kelly, Ph.D.
School Psychologist



Need for Mental Health Supports



- Divorce
- Financial difficulties
- Homelessness
- Sickness
- Violence
- Food Insecurity
- Death
- Unemployment
- Bullying
- Academic difficulties




“Although we are all in the same storm, we are not all in the same boat.”

Following extended school closure due to COVID-19, the social emotional health and well-being of students and school staff is paramount. In order to appropriately address these needs of students and staff, the creation of a safe, supportive and stable community for students and staff is vital.



IMPORTANT

Why this work is so important?



Well, a lot has happened since March 2020

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What we are experiencing is not finite. Instead it's ongoing and uncertain.

Furthermore, the antidote to stress (CONNECTION) is affected because of COVID and the need for social distancing.

10

Declaration of a National Emergency in Child and Adolescent Mental Health



AMERICAN ACADEMY OF
CHILD & ADOLESCENT
PSYCHIATRY
WWW.AACAP.ORG

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®



As health professionals dedicated to the care of children and adolescents, we have witnessed **soaring rates of mental health challenges among children, adolescents, and their families** over the course of the COVID-19 pandemic, exacerbating the situation that existed prior to the pandemic. Children and families across our country have experienced **enormous adversity and disruption**. The **inequities** that result from **structural racism** have contributed to disproportionate impacts on children from communities of color.

This worsening crisis in child and adolescent mental health is inextricably tied to the **stress brought on by COVID-19** and the **ongoing struggle for racial justice** and represents an acceleration of trends observed prior to 2020.

That is why the American Academy of Pediatrics (AAP), the American Academy of Child and Adolescent Psychiatry (AACAP) and the Children's Hospital Association (CHA) are joining together to **declare a National State of Emergency in Children's Mental Health**.

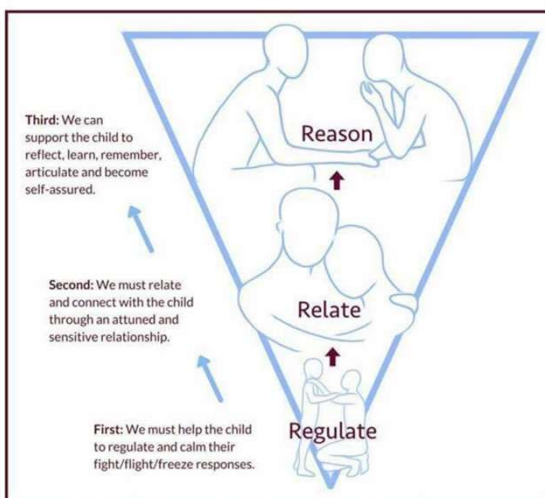
**BREAKING
NEWS ALERT**

**U.S. SURGEON GENERAL ISSUES
ADVISORY ON YOUTH MENTAL
HEALTH CRISIS FURTHER
EXPOSED BY COVID-19
PANDEMIC**

“The COVID-19 pandemic further altered their experiences at home, school, and in the community, and the effect on their mental health has been devastating. **The future wellbeing of our country depends on how we support and invest in the next generation.**”

The Three R's: Reaching the Learning Brain

Dr Bruce Perry, a pioneering neuroscientist in the field of trauma, has shown us that to help a vulnerable child to learn, think and reflect, we need to intervene in a simple sequence.



Heading straight for the 'reasoning' part of the brain with an expectation of learning, will not work so well if the child is dysregulated and disconnected from others.

**The 3 Rs to
Reaching the
Learning Brain-
Dr. Bruce Perry**

What is Mental Health?



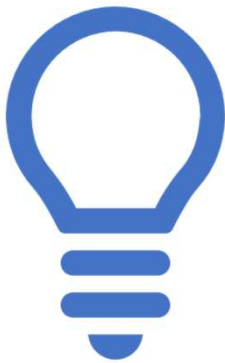
- Mental health is not simply the absence of mental illness but also encompasses social, emotional, and behavioral wellness and the ability to cope with life's challenges.

What We Know...

- The earlier school staff can identify students' difficulties, the quicker and less expensive the task is to help them catch up
- The longer a student goes without assistance, the longer the remediation time and the more intense the services must be

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**



Importance of Addressing Social & Emotional Needs

- “A study estimating the relative influence of 30 different categories of education, psychological, and social variables on learning revealed that ***social and emotional variables exerted the most powerful influence on academic performance .***” -CASEL, 2003

Refocus School-Based Mental Health Services On the Core Foundation of Schools:

To Promote Learning



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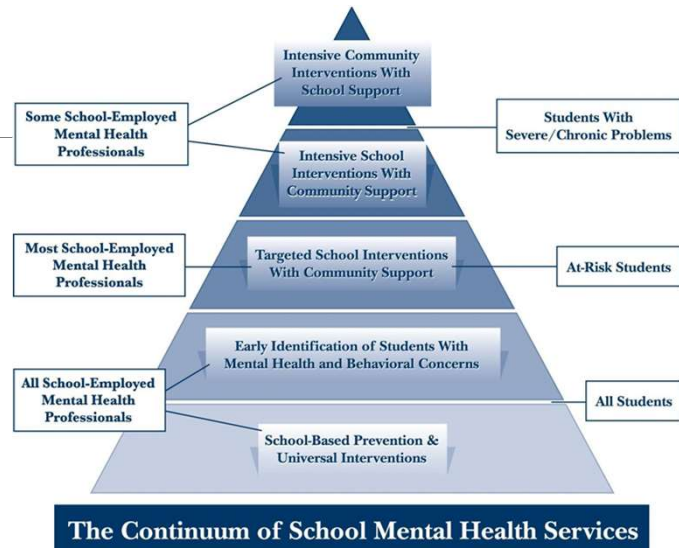
The Refocused Role of Mental Health Services



- Support Teachers: the *Primary Change Agents*
- Mental Health Providers Become: *“Educational Enhancers”*
- Serve the Core Function of Schools
- Promoting Social/Emotional Development, no Longer Tangential

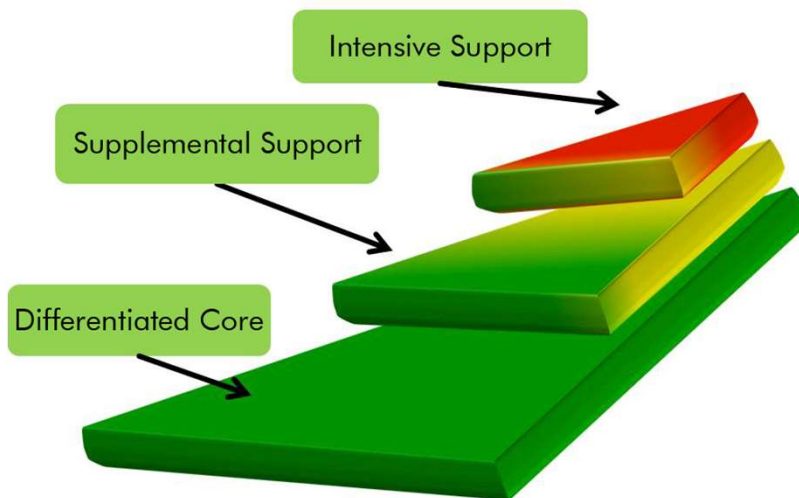
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Model of School Mental Health Services



Adapted from "Communication Planning and Message Development: Promoting School-Based Mental Health Services" in *Communication*, Vol. 35, No. 1, National Association of School Psychologists, 2006.

Layering of Support



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

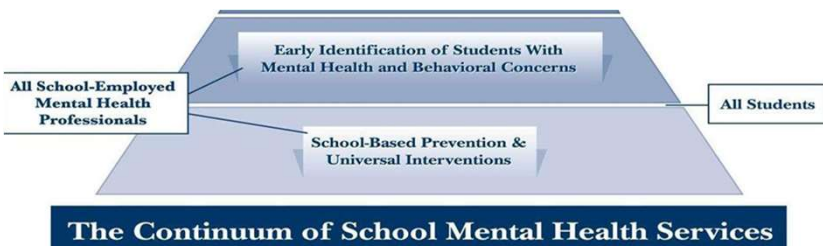
Teacher identification can be used to determine students with the greatest challenges

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

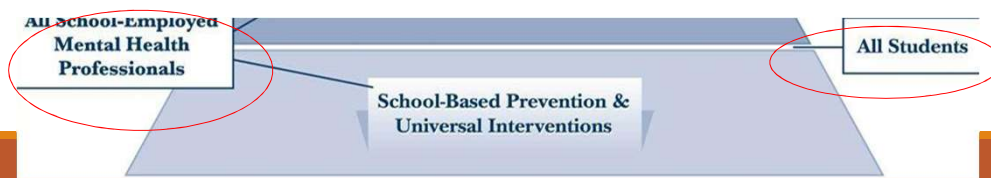


Programs delivered to all students are proactive, preventive, and reduce the risk of stigma for students who are served

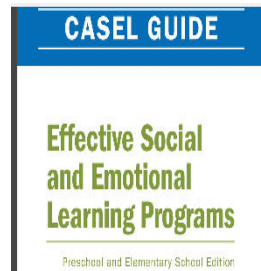
Prevention and Universal Interventions

Prevention and wellness promotion through -

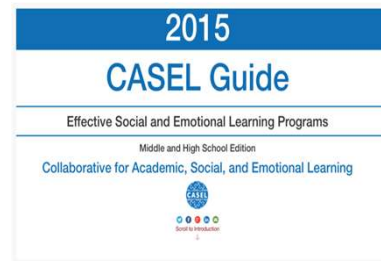
- Trauma sensitive practices
- Classroom guidance lessons
- Social Emotional Learning
- Positive behavior interventions and supports
 - Effective discipline policies and practices
 - Bullying/Violence Prevention
 - Crisis prevention and intervention teams
- Fostering positive relationships among students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



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/

The Incredible Years

early intervention model targeting risk factors across settings

two goals

- to enhance both social-emotional and academic competence, which includes understanding of feelings and decrease of negative attributions (Tier 1)
- to reduce conduct problems (Tier 2)

three different curricula for parents, teachers, and children

Ages 2 - 8

Promoting Alternative Thinking Strategies (PATHS)

Universal and comprehensive SEL intervention for students in kindergarten through fifth grade

program content includes

- emotional understanding
- self-control
- Social skills
- social-problem-solving skills

Preschool version is available

Penn Resiliency Program

teaches cognitive behavioral and social problem solving

manualized curriculum

designed for both elementary and middle school levels

designed to be taught by trained school personnel

students learn that beliefs affect both emotions and behavior.

Can be used at Tier 2

Second Step - Universal SEL Curriculum
 classroom-based program that promotes the development of critical thinking and
 problem-solving skills

Early Childhood (preschool)

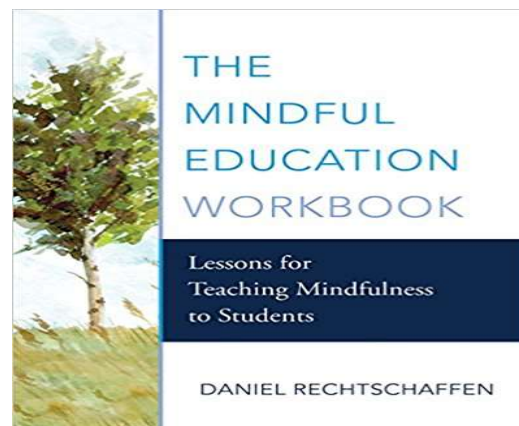
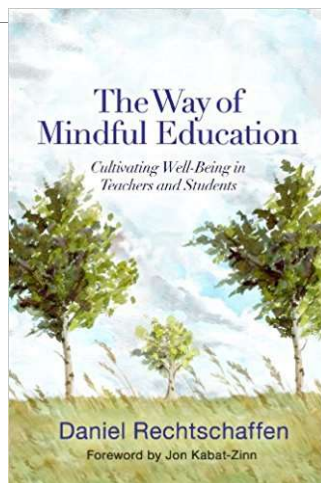
- Listen
- Pay attention
- Control their behavior
- Get along with others

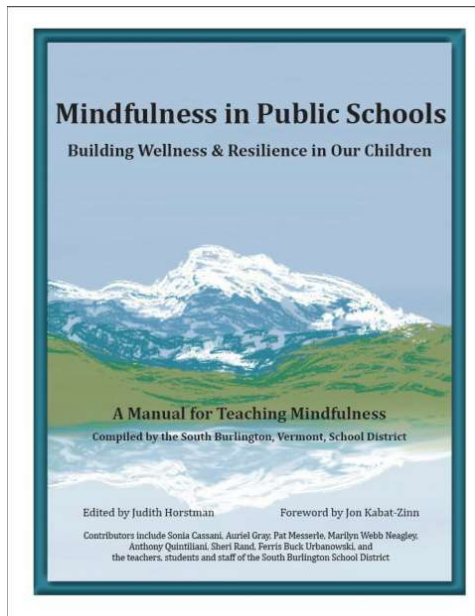
Elementary (K-5)

- Empathy
- Emotion Management
- Problem Solving

Middle School (6-8)

- Mindset & Goals
- Values and Friendships
- Thoughts, Emotions, & Decisions
- Serious Peer Conflict





<http://www.mindfulnessink12education.com/>

Web-based resources

<https://www.mindful.org/4-signs-poorly-designed-school-mindfulness-programs/>

<https://www.mindful.org/mindfulness-schools-can-provide-lifeline-teens/>

<http://www.calmclassroom.com/>

<https://learning2breathe.org/>

<https://mindfulnessinschools.org/>

<http://themindfulnessinitiative.org.uk/publications/building-the-case>

<http://missionbe.org>

Targeted Interventions

- Co-Planning Session
- Wellness Plans
- Check-In Check Out
- Group Counseling
- Behavior Plans
- Mentoring
- Teacher/Family Consultation



CBT for childhood anxiety & depression includes

Psychoeducation
 exposure therapy
 cognitive restructuring
 relaxation training, diaphragmatic breathing, progressive muscle relaxation
 contingent reinforcement
 modeling



12-session interactive CD-ROM-assisted treatment for use with children suffering from anxiety

Ages 7 – 13

Sessions 1 – 6, child guided (Tier 2)

Sessions 7 – 12, therapist guided (Tier 3)

Skills Training in Affective and Interpersonal Regulation for Adolescents (STAIR-A)

manualized, cognitive-behavioral therapy (CBT) program that aims to improve emotion regulation and interpersonal and social-support problems among adolescents exposed to trauma

intended for ages 12 – 21

reduce PTSD and depression symptoms

8 – 12 group sessions

Cool Kids Child and Adolescent Anxiety Management Program

Ages 7 – 18

anxiety and related disorders (e.g., social anxiety disorder, separation anxiety disorder, generalized anxiety disorder, obsessive–compulsive disorder, specific phobia, and selective mutism)

family-based program that uses cognitive–behavioral therapy providing children (and parents) with skills and strategies to manage anxiety.

parents are offered information sessions as well as support through phone calls.

Homework assignments following each session provide the opportunity to practice new skills.

Support for Students Exposed to Trauma (SSET)

Adaptation CBIT-S

Ages 10-14

reduce posttraumatic and depressive symptoms and to improve functioning in youths who have been exposed to traumatic events

SSET is delivered through a lesson-plan format

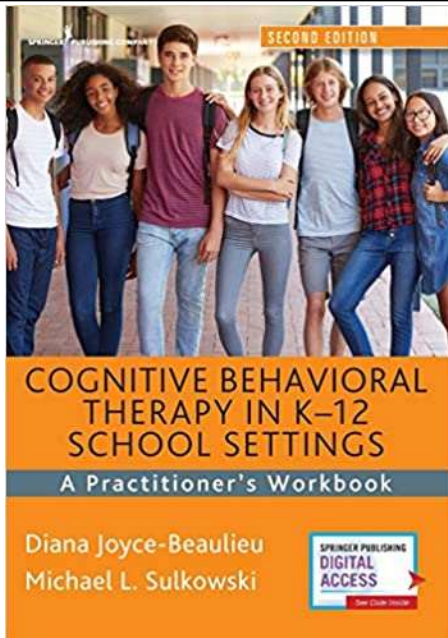
Intensive Level of Supports for a FEW Students

- 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

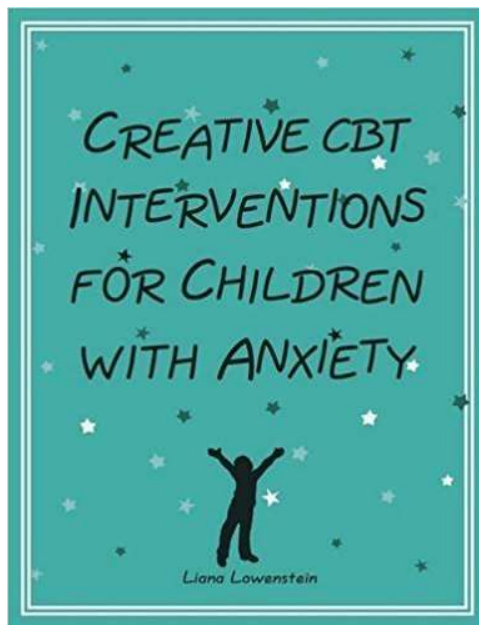
Intensive School and Community Supports



Intensive School Interventions	Intensive Community Interventions
Individual Counseling	Long Term Therapy
Functional Behavioral Assessment	Family Counseling
Special Education Consideration	Involvement with Social Services
Individualized Behavior Plan	Community Mentoring
More restrictive environment	



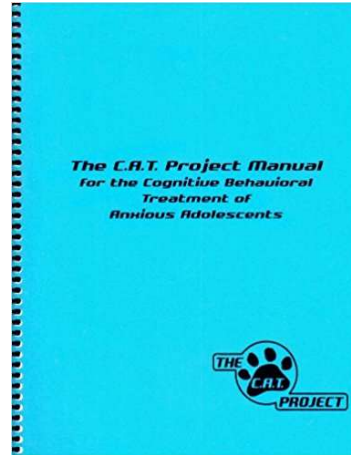
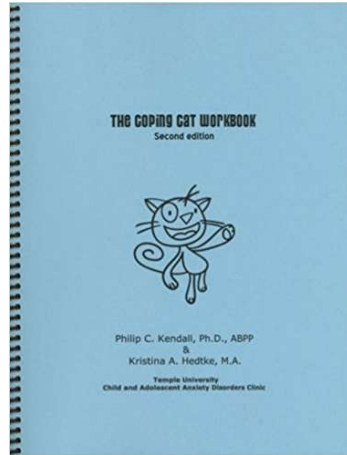
1. Effectively Integrating CBT Counseling Into School Services
2. What Is Cognitive Behavioral Therapy?
3. Understanding Internalizing Problems
4. Cognitive Behavioral Therapy for Internalizing Problems
5. Understanding Externalizing Problems
6. Cognitive Behavioral Therapy for Externalizing Problems



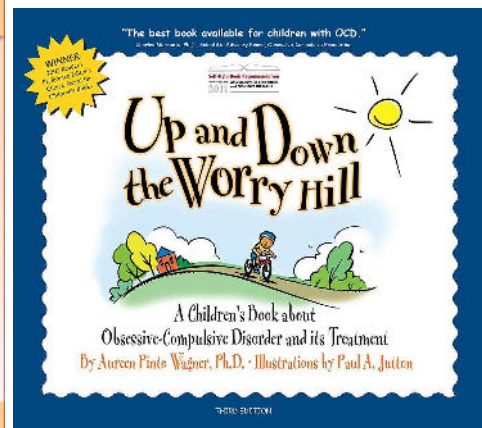
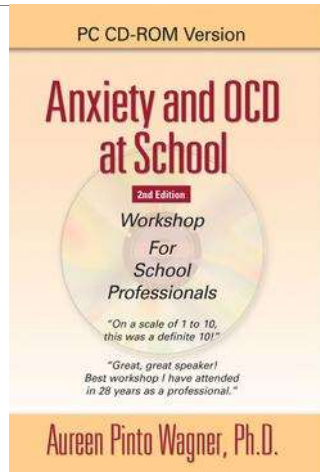
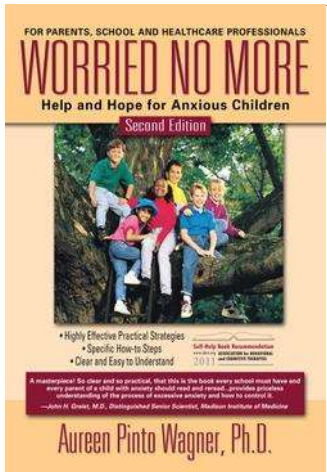
Therapeutic games, art, stories, and other creative activities address the key components of CBT

Psychoeducation, relaxation, affective expression, cognitive coping, exposure, and parent training

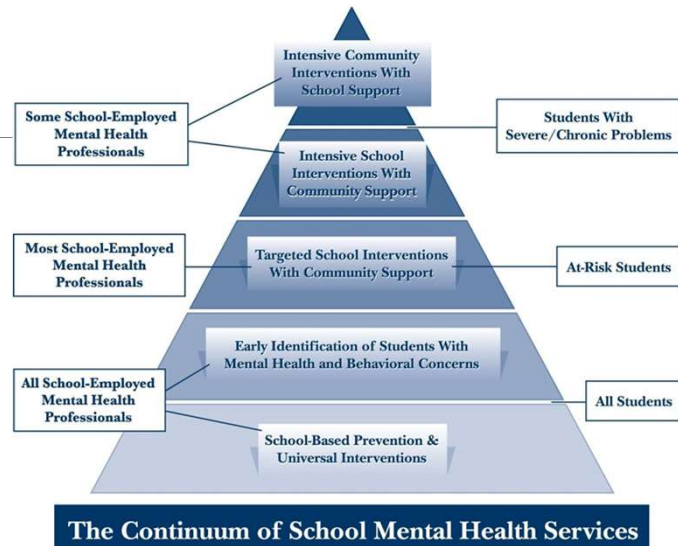
Coping Cat & CAT Project - Kendall



Aureen Pinto Wagner



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QUESTIONS?
COMMENTS?
CONCERNS?

