Children’s Behavioral Health Supports in School Communities

Presented by
Michele A. Carmichael
Director IL-AWARE
Principal Consultant for Behavioral Health Supports in Schools
Illinois State Board of Education
Intentions:

• Define children’s behavioral health (CBH)

• Create a shared understanding of best practices of CBH

• Explore statewide resources available

• Share Youth Mental Health First Aid (YMHFA) information
Children’s Behavioral Health Defined

- **Mental Health**: Mental health in childhood means reaching developmental and emotional milestones, and learning healthy social skills and how to cope when there are problems. Mentally healthy children have a positive quality of life and can function well at home, in school, and in their communities. (CDC)

- **Substance Use/Abuse**: Recurrent use of alcohol and/or drugs causing clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at home, school, or work. (SAMHSA)

- **Co-occurring Disorders**: The coexistence of both a mental health and a substance use disorder (SAMHSA)
CBH Continuous Improvement Model of Support

• Framework
• Multi-tiered evidence-based/informed interventions
  – All (Promote/Prevent)
  – Some (Early Intervene)
  – Few (Intensive Individualized)
  – Community Collaboration potentially throughout

• Trauma Lens First
Educational Outcomes

- Higher grades and test scores
- Participate in higher level courses
- Pass their classes, earn credits, and be promoted
- Attend school regularly
Educational Outcomes Cont.

• Demonstrate improved social skills and behavior
• Adapt well to the school environment
• Graduate and enroll in postsecondary education or begin a career
What is Child Trauma?

The experience of an event by a child that is emotionally painful or distressful which often results in lasting mental and physical effects.

-National Institute of Mental Health
Holistic View- Trauma’s impact
<table>
<thead>
<tr>
<th>Symptoms</th>
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<tbody>
<tr>
<td>Restless, hyperactive, disorganized, and/or agitated activity, difficulty sleeping, poor concentration, and hypervigilant motor activity</td>
</tr>
<tr>
<td>Hyperarousal and other anxiety symptoms, mimicking hypomania, traumatic reenactment mimicking aggressive or hyperarousal behavior, and maladaptive attempts at cognitive coping mimicking pseudo-manic statements</td>
</tr>
<tr>
<td>Self injurious behaviors as avoidant coping with trauma reminders, social withdrawal, affective numbing, and/or sleep difficulties</td>
</tr>
<tr>
<td>Severely agitated, hypervigilance, flashbacks, sleep disturbance, numbing and/or social withdrawal, unusual perceptions, impairment of sensorium and fluctuating levels of consciousness</td>
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Slide courtesy of: Gene Griffin, J.D., Ph.D.
How Do You Interpret What You See?
<table>
<thead>
<tr>
<th>DSM Diagnosis</th>
<th>Overlapping Symptoms</th>
<th>Trauma</th>
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</thead>
<tbody>
<tr>
<td>Attention Deficit/Hyperactivity Disorder</td>
<td>Restless, hyperactive, disorganized, and/or agitated activity, difficulty sleeping, poor concentration, and hypervigilant motor activity</td>
<td>Child Trauma</td>
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<tr>
<td>Intervention?</td>
<td></td>
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<tr>
<td>Bipolar Disorder</td>
<td>Hyperarousal and other anxiety symptoms, mimicking hypomania, traumatic reenactment mimicking aggressive or hyperarousal behavior, and maladaptive attempts at cognitive coping mimicking pseudo-manic statements</td>
<td>Child Trauma</td>
</tr>
<tr>
<td>Intervention?</td>
<td></td>
<td></td>
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<tr>
<td>Major Depressive Disorder</td>
<td>Self injurious behaviors as avoidant coping with trauma reminders, social withdrawal, affective numbing, and/or sleep difficulties</td>
<td>Child Trauma</td>
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<tr>
<td>Intervention?</td>
<td></td>
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<td>Psychotic Disorder</td>
<td>Severely agitated, hypervigilance, flashbacks, sleep disturbance, numbing and/or social withdrawal,, unusual perceptions, impairment of sensorium and fluctuating levels of consciousness</td>
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Trauma’s Impact on the Brain

Disruption in neural development can include:

- **Failure** to expose youth to appropriate experiences at the critical times (Neglect)

- **Overwhelming** the brain’s alarm system (Abuse)
OLDER CHILDREN - High School Sophomores and Seniors

Washington School Classroom (30 Students)
Adverse Childhood Experiences (ACEs)

6 students with no ACE
5 students with 1 ACE
6 students with 2 ACEs
3 students with 3 ACEs
7 students with 4 or 5 ACEs
3 students with 6 or more ACEs
58% (17) students with no exposure to physical abuse or adult to adult violence
29% (9) of students exposed to physical abuse or adult to adult violence
13% (4) of students exposed to physical abuse and adult to adult violence
Impact of ACEs on Education

• 51% of children with 4+ ACE scores had learning and behavior problems in school compared with only 3% of children with no ACE score

• Students with 3 or more ACEs
  – Are 2 ½ times more likely to fail a grade,
  – Score lower on standardized tests,
  – Have language difficulties,
  – More likely to be suspended or expelled, and
  – Are designated as special education more frequently
Impact of Trauma on Learning at School

Academic performance:

- Organization
- Comprehension
- Memory
- The ability to produce work
- Engagement in learning
- Ability to self-regulate attention, emotions, and behavior

Impact of Trauma on Behavior at School

Classroom behavior:

• Ability to remain calm and regulate their behavior in the classroom
• Ability to process social cues
• Ability to convey feelings in appropriate manner

Impact of Trauma on Relationships at School

Relationships:

• Preoccupied with physical and psychological safety
• Distrustful of adults and/or fellow students

Trauma-Informed Developmental Educational Experiences

- Relational (safe)
- Relevant (developmentally-matched)
- Repetitive (patterned)
- Rewarding (pleasurable)
- Rhythmic (resonant with neural patterns)
- Respectful (child, family, culture)
What’s Needed?

A *system-wide approach* that builds a district’s *capacity* to *improve outcomes for ALL* students through implementation of *Evidence Based Practices (EBPs)*.
Multi-Tiered System of Supports

A Multi-Tiered System of Supports is a framework for continuous improvement that is systemic, prevention focused, and data-informed, providing a coherent continuum of supports responsive to meet the needs of all learners.
Continuum of Supports

- **Universal** (Tier 1, School-wide)
  - ALL
- **Targeted** (Tier 2, Secondary)
  - SOME
- **Intensive** (Tier 3, Tertiary)
  - FEW
A system of supports is **responsive** to the **academic and non-academic needs** of all students.
Substance Use and Abuse
SEL
Transition Planning
Math
Science
Wraparound
ELA
Parent Engagement
21st Century Centers
PBIS
Health
Autism
Bullying Prevention
Military Families
Special Education
Poverty
Mental Health
Substance Use and Abuse
Parent Engagement
21st Century Centers
PBIS
Health
Autism
Bullying Prevention
Military Families
Special Education
Poverty
Mental Health
Learning Supports
Improving Student Outcomes
Continuum of Supports

Targeted (Tier 2, Secondary) SOME

Intensive (Tier 3, Tertiary) FEW

Universal (Tier 1, School-wide) ALL
District Leadership Team

Data-driven decision-making

Practices for Few
- Teaming Structures
- Data-driven decision-making
- Person-centered planning
- Co-Teaching

Practices for Some
- Person-centered planning
- Co-Teaching
- Bullying prevention

Practices for All
- 80-90%
- 5-15%
- 1-5%

Teaming Structures
MTSS Climate & Culture (within LEAs)

SWD are part of, not separate from, the **general education** population (SSIP)

**Universal Interventions**
- Implementation Science Systems' Change (MTSS)
- Wellness Plan
- Positive Behavioral Interventions & Supports
- Adaptive Leadership
- Youth Mental Health First Aid (YMHFA-IL-AWARE) (MH First Aid Act)
- Bullying Prevention
- Student engagement
- Family Engagement
- Transition Best Practices (OV, Person-centered planning, self-determination)
- CLAS

**Intensive, Individualized Interventions**
- HF School-initiated Wraparound
- SASS
- School Partnerships with Community Providers/Care Coordination (SOC)
- Hospitalization re-entry plans

**Secondary, Targeted Interventions**
- Early identification/screening /progress monitoring
- Trauma-NME/(NMT-Providers)
- Check In-Check Out
- FBA/BIP
- Differentiated Instruction
- Co-Teaching
- YMHFA/(MHFA-Providers)
- Special pops (Autism, Behavioral Health, D/HH)
- Family Engagement
- Transition Group Interventions (RENEW)

**1-5%**
- 5-15%
- 80-90%
# Systems & Mindset Shifts

<table>
<thead>
<tr>
<th>Moving From...</th>
<th>Moving To...</th>
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<tr>
<td>Individual responsibility to support youth</td>
<td>Shared responsibility throughout the local system</td>
</tr>
<tr>
<td>Deficit-based or adversarial approach to interactions</td>
<td>Strength-based and collaborative approach</td>
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<tr>
<td>Add-on programs to support change</td>
<td>Integrated programmatic support for change</td>
</tr>
<tr>
<td>One-shot projects</td>
<td>Sustained efforts</td>
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<tr>
<td>Compliance-driven engagement and goals</td>
<td>Shared ownership focused on continuous improvement</td>
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Statewide Resource for Training, TA & Coaching
(http://www.ilmtss.net/)

The Illinois MTSS Network

Our new website is "Under Construction"! We are adding new information every day, so check back often!

In the meantime, visit us at ISTAC.net and I-Rt!!
Training for All

*Universal Practices*

- Trauma-informed Practices
- Youth Mental Health First Aid (YMHFA)
- MTSS Framework (Systems, Leadership, Teaming, Data)
- Evidence-based/informed practices
IL-AWARE & YMHFA

• In 2013, President Obama established NITT: Now Is The Time through SAMHSA to reduce gun violence and increase access to behavioral health services

• In 2014, Illinois was 1 of 20 states that received a federal, 5-year SEA AWARE: Advancing Wellness And Resilience Education grant to support NITT
  • IL-AWARE will:
    • increase awareness of youth behavioral health
    • train schools & communities in YMHFA to increase early identification & intervention of youth behavioral health issues
    • increase access to youth behavioral health services

• 3 districts in partnership with ISBE:
  • Decatur, East Aurora, & Harrisburg
IL-AWARE

Partnerships • Access • Literacy

IL-AWARE Vision Statement:
The IL-AWARE Vision is to support state and community-level transformation and continuous quality improvement through the implementation of Multi-tiered Systems of Supports to ensure an effective and efficient behavioral healthcare system for all Illinois children and their families.

The IL-AWARE Mission:
Access to Effective Behavioral Health Care for All Students and their Families will be provided in Illinois through building School/Community Partnerships along with improving and employing mental health literacy.
Literacy: Youth Mental Health First Aid (YMHFA)

- **Assess** for risk of suicide or harm
- **Listen** nonjudgmentally
- **Give** reassurance and information
- **Encourage** appropriate professional help
- **Encourage** self-help and other support strategies
Become a

*Youth Mental Health First Aider!*

By participating in **free** YMHFA training, individuals agree:

- To allow ISBE to collect the information on the sign-in sheets
- To contact **First Aiders** monthly via e-mail to request their participation in a brief survey
- Which records their efforts in providing resources/referrals to youth in need of behavioral health services.
Out of the 294 people trained who do NOT currently hold a position working in a MH field to date:

- 94 resources were given for youth behavioral health issues
- 45 referrals were made for youth behavioral health supports

YMHFA training is impacting the behavior of adults not currently working in the behavioral health field every day; youth behavioral health awareness and access to services is increasing!!
Contact:

Cynthia Knight or Michele Carmichael to set up a local training

Cknight@isbe.net
Mcarmich@isbe.net
217/782-5589
Intentions Review

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• Explore statewide resources available

• Share Youth Mental Health First Aid (YMHFA) information
Contact/Website Resources

• Michele Carmichael
  – Mcarmich@isbe.net
  – 217/782-5589

• Illinois State Board of Education: Learning Supports
  – http://www.isbe.net/learningsupports/default.htm

• IL MTSS-Network
  – http://www.ilmtss.net/