School Mental Health as the Foundation for Academic SUCCESS

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Department of EDUCATIONAL PSYCHOLOGY COLLEGE OF EDUCATION | THE UNIVERSITY OF UTAH







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ACU









SALT LAKE CITY



- Multi-Tiered School Mental Health Programs
- Multi-Tiered Behavior Supports and Consultation
- Integrated Public School Day **Treatment Programs**
- **Professional Development**
- Functional Assessment and **Function-Based Treatment** Planning
- Teleconsultation and Telehealth







How are you feeling today? Go to www.menti.com and use the code 9926 0369



Mentimeter

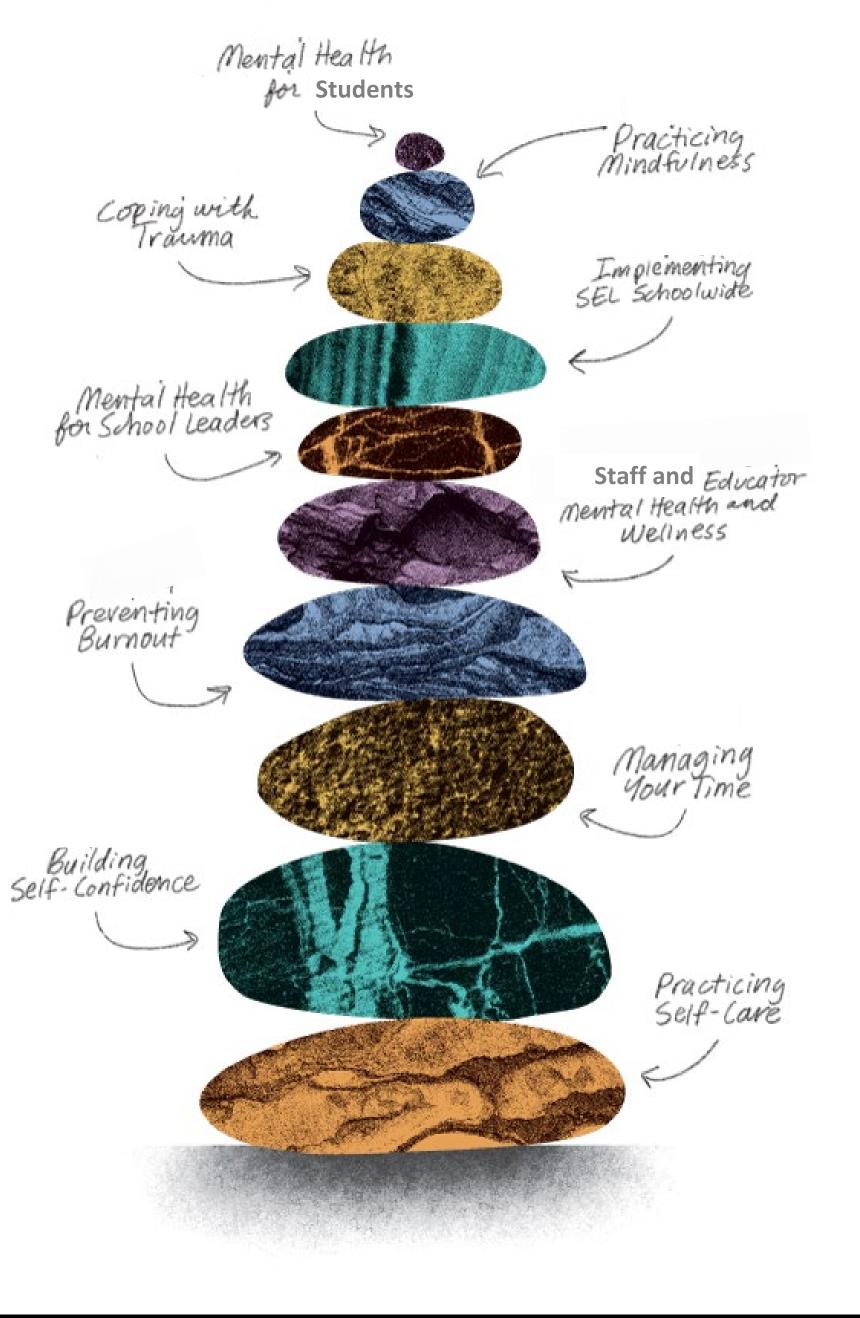


What's the Need for Mental Health in Schools?

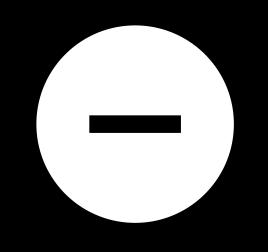




https://www.nami.org/NAMI/media/NAMI-Media/Infographics/NAMI-You-Are-Not-Alone-FINAL.pdf

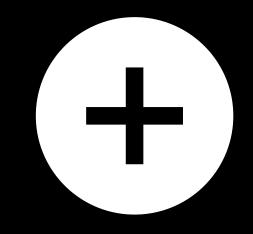


Risk and Protective Factors



RISK FACTORS

- CHARACTERISTICS WITHIN THE INDIVIDUAL OR CONDITIONS IN THE FAMILY, SCHOOL OR COMMUNITY THAT INCREASE THE LIKELIHOOD SOMEONE WILL ENGAGE IN UNHEALTHY BEHAVIOR SUCH AS:
 - THE USE OF ALCOHOL, TOBACCO AND OTHER DRUGS, VIOLENCE, SUICIDE, OR EARLY SEXUAL ACTIVITY.
- THE MORE RISK FACTORS PRESENT IN A CHILD'S LIFE, THE GREATER THE LIKELIHOOD PROBLEMS WILL DEVELOP IN ADOLESCENCE



Protective Factors

- Characteristics within the individual or conditions in the family, school or community that help someone cope successfully with life challenges.
- When people can successfully negotiate their problems and deal with pre-existing risk factors, *they are less likely to engage in unhealthy behavior*.
- Protective factors are instrumental in healthy development; they build resiliency, skills and connections

RISK FACTORS

FAMILY

- Death by suicide of a friend or family member*
- Family history of the problem behavior
- Family management problems
- Family conflict
- Favorable parental attitudes and involvement in problem behaviors
- Household access to substances or guns

SCHOOL

- Academic failure
- Lack of personal commitment to school

<u>COMMUNITY</u>

- Availability of alcohol/other drugs*
- Community norms and laws*
- Availability of firearms
- Transitions and mobility (*moving a lot*)
- Low neighborhood attachment & community disorganization
- Poverty

INDIVIDUAL - PEERS

- Experienced child abuse (physical, sexual) or other family violence*
- Early initiation of the problem behavior*
- Loss of cultural identity and connection*
- Constitutional factors (see definition)
- Childhood media exposure to violence and alcohol
- Early and persistent antisocial behavior
- Friends who engage in the problem behavior
- Favorable attitudes toward the problem behavior (low perceived-risk of harm)
- Gang involvement
- Older physical appearance than peers
- Paid work more than 20 hrs/week
- Perceived risk of untimely death

PROTECTIVE FACTORS

FAMILY

- Family connectedness (attachment & bonding)*
- Positive parenting style
- Living in a two parent family
- Higher parent education
- High parental expectations about school

SCHOOL

- Connected to school*
- Caring school climate
- Student participation in extracurricular activities

INDIVIDUAL - PEERS

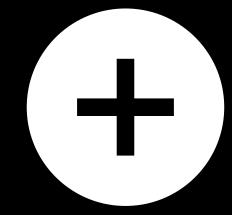
- Engagement in meaningful activities
- Life skills and social competence* (Social Emotional/Employability Skills)
- Cultural identity and connection*
- Positive personal qualities
- Positive self concept
- Positive peer role models
- Religious identity
- High grade point average

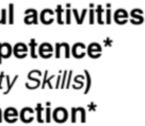
COMMUNITY

Positive connection to other adults*

- Safe, supportive, connected neighborhood
- Strong community infrastructure (services for those in need)
- Local, state policies and practices that support healthy norms and child-youth programs
- Range of opportunities in the community for meaningful youth engagement







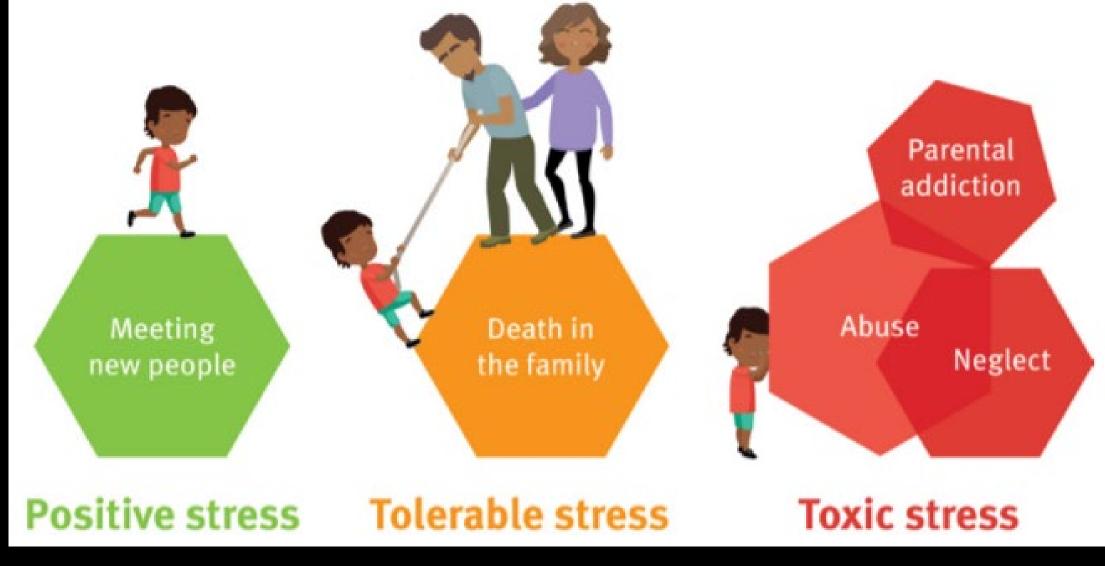
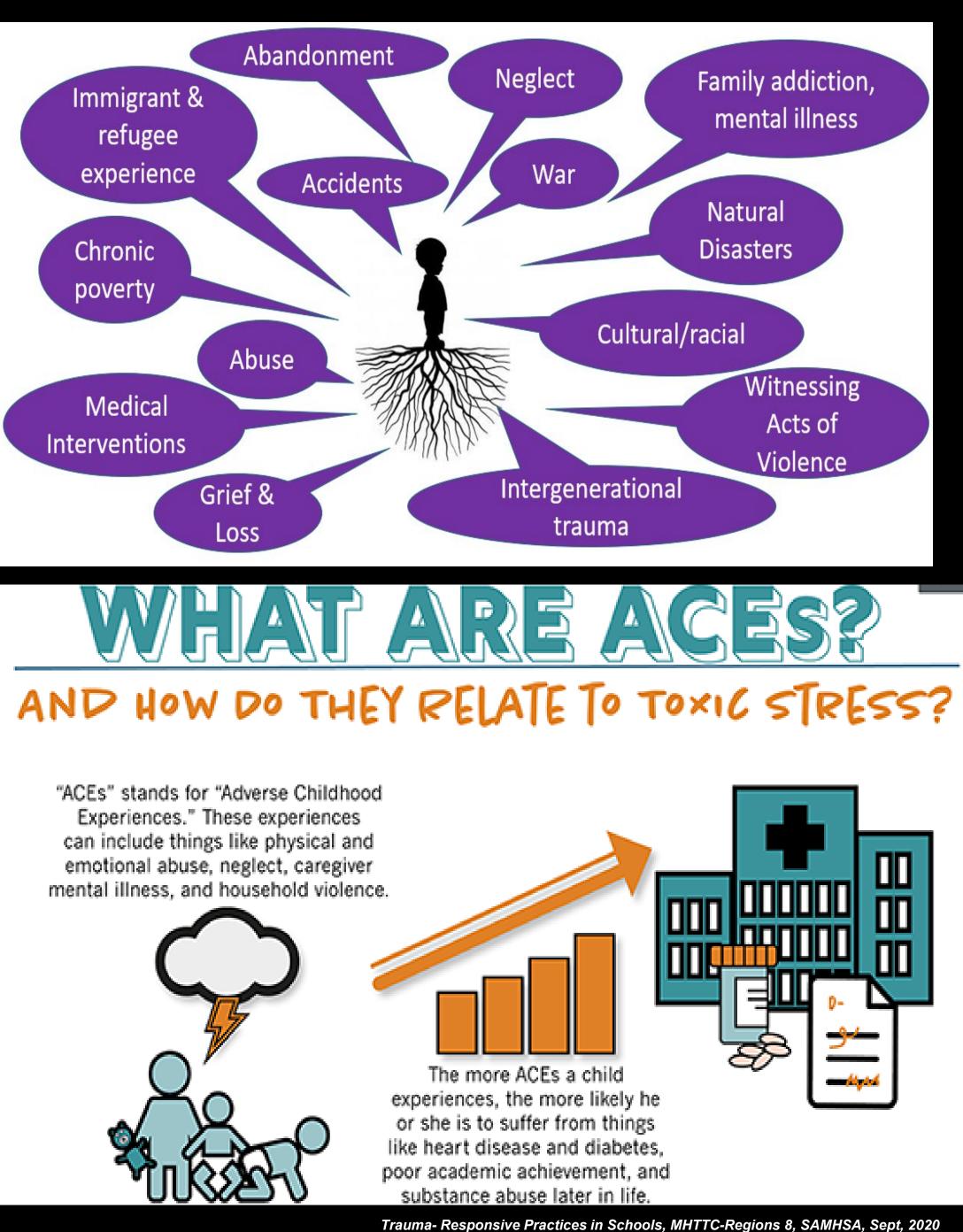


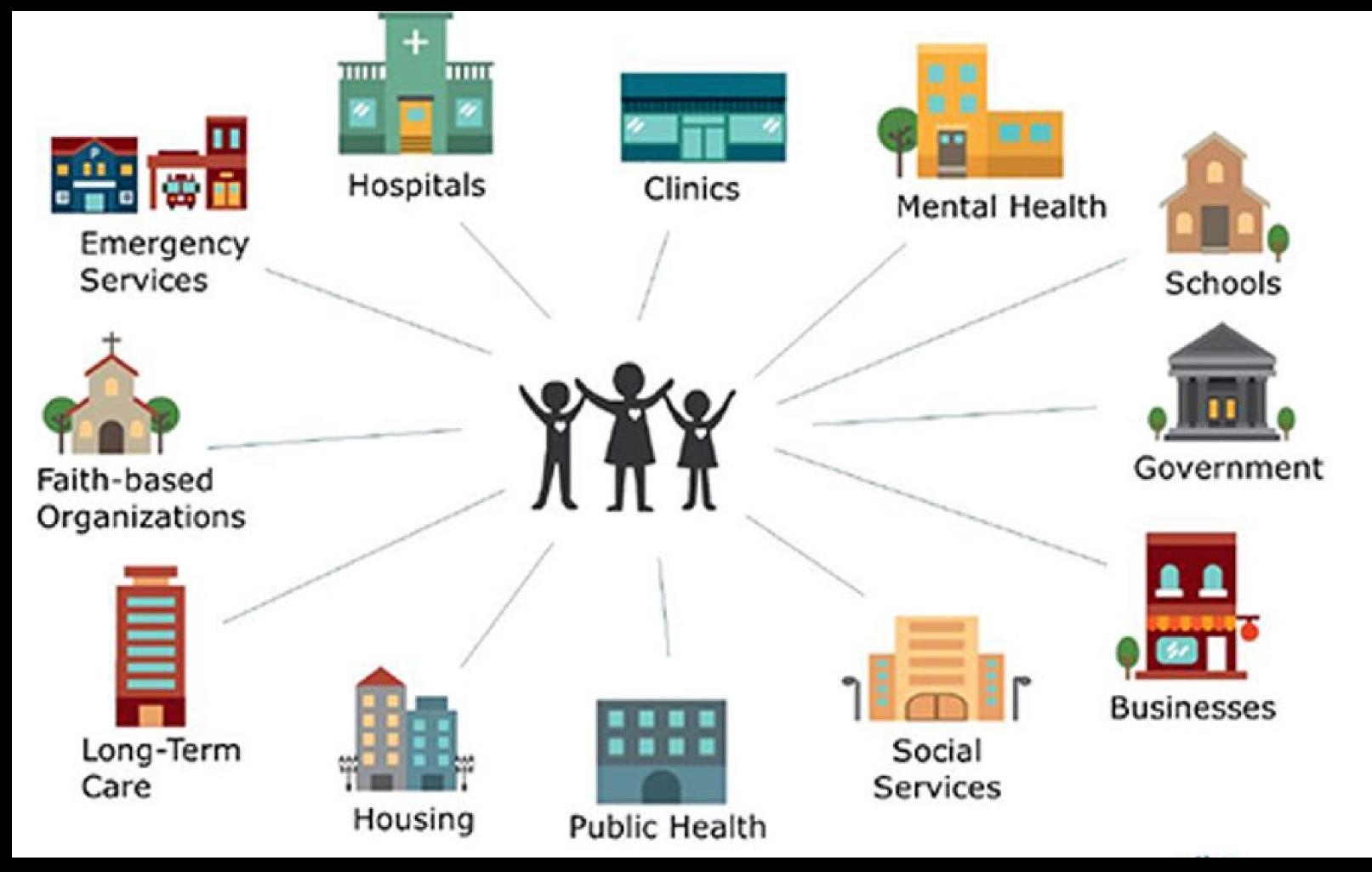
Image Source: https://www.childrens.health.qld.gov.au/wp-content/uploads/PDF/dream-big/Dream-Big-Act-Big-for-Kids-Issue-1-ACEs-Toxic-Stress.pdf

ACEs are stressful or potentially traumatic experiences, including abuse, neglect, and exposure to community violence.

72% of children and youth in the U.S. will experience at least one ACE before the age of 18. 4+ 3 2 As the number of ACEs increases, so does the risk for psychological, behavioral, or emotional problems; substance abuse; academic failure; social maladjustment; and poor medical health.



Schools as the Hub for Student Mental Health and Well-Being



Ruralhealthinfo.org

What comes to mind when you hear "School Mental Health"? Go to www.menti.com and use the code 99260369

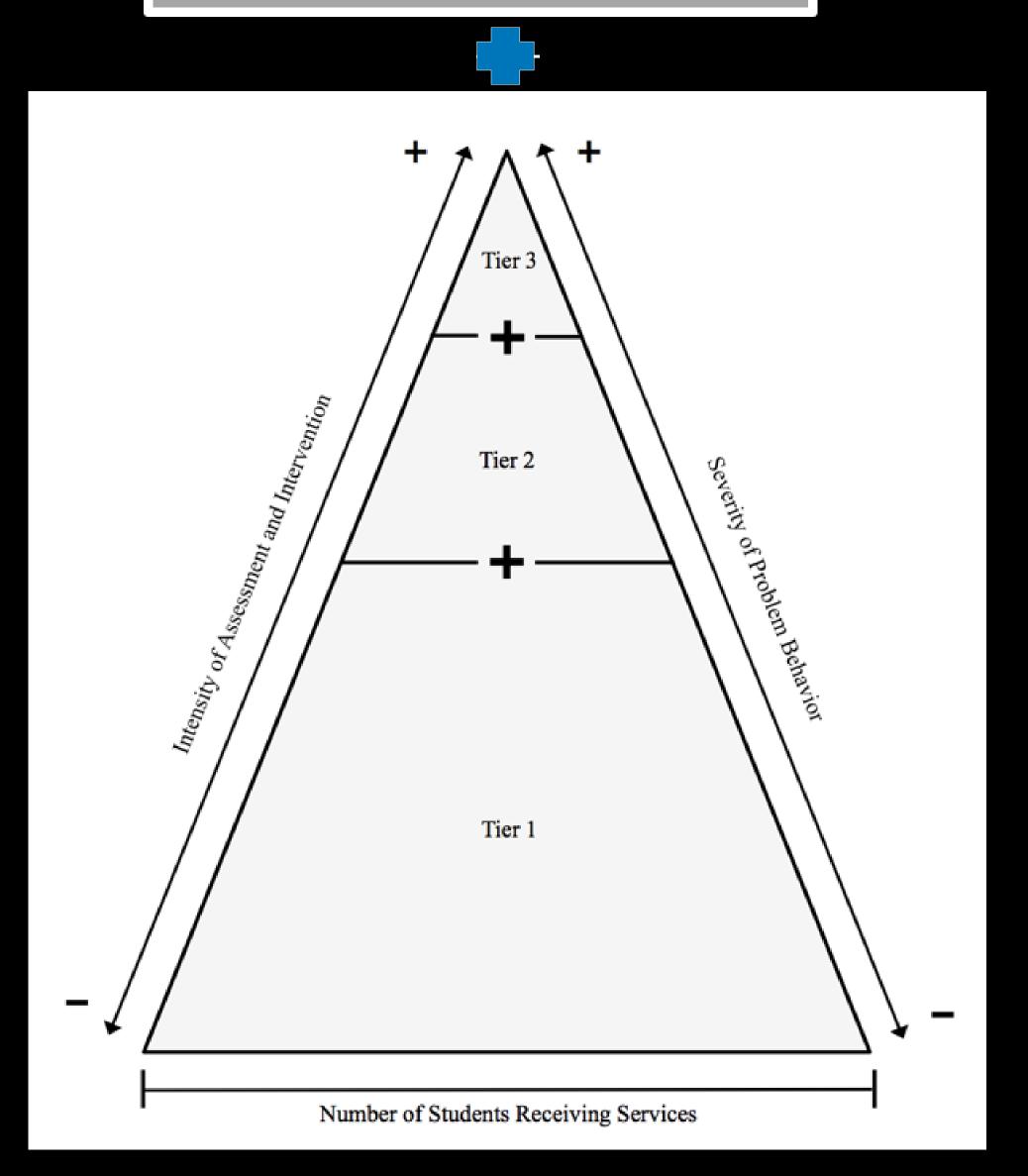


Mentimeter



MTSS **IN SCHOOLS**





Special Education Services

REFERRAL PROCESS FOR MENTAL HEALTH SUPPORT

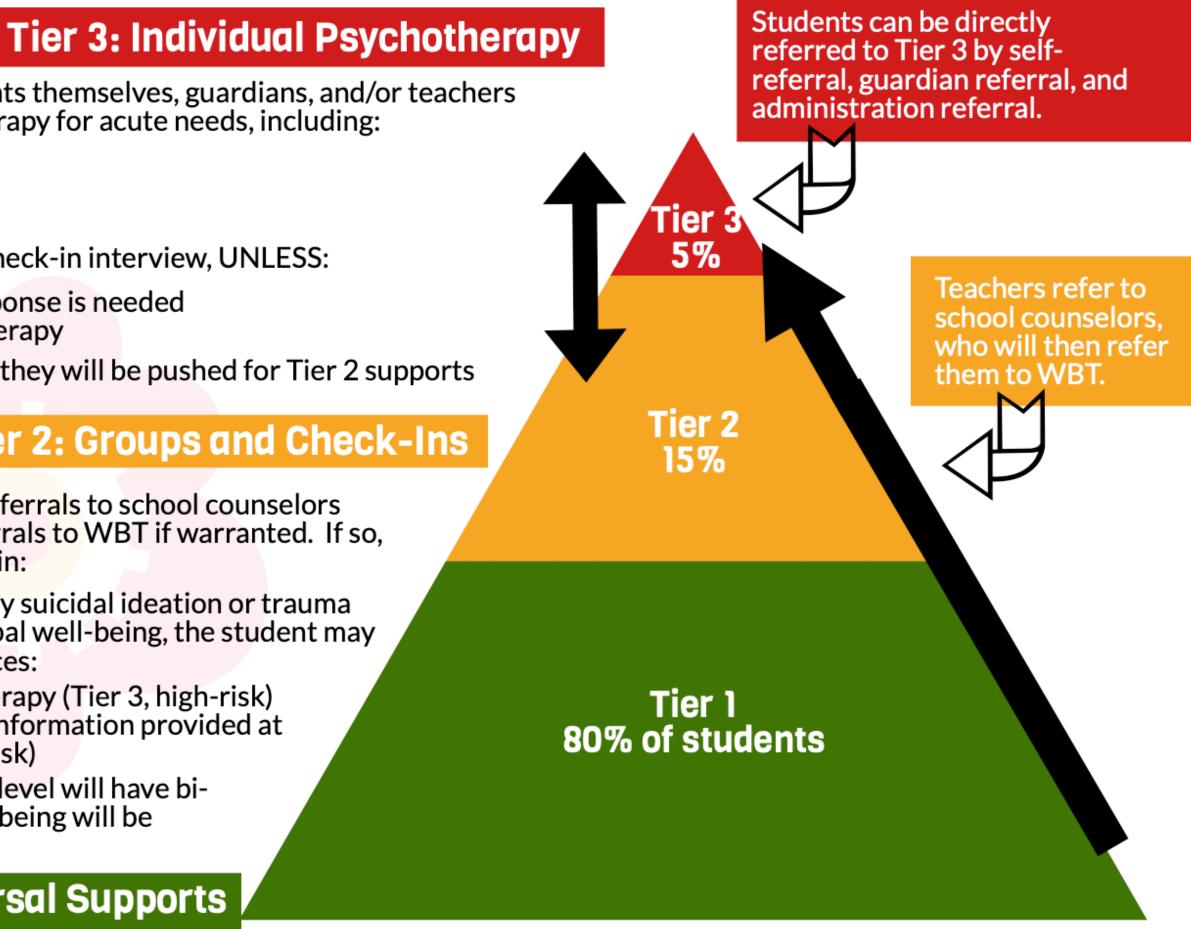
- Referrals may come from: students themselves, guardians, and/or teachers
- Students at this level receive therapy for acute needs, including:
 - Major depression
 - Psychosis
 - Active suicidal ideation
- All referrals will be routed to a check-in interview, UNLESS:
 - Immediate emergency response is needed
 - Student self-referral for therapy
- If student shows lack of interest, they will be pushed for Tier 2 supports instead

Tier 2: Groups and Check-Ins

- Teachers should make student referrals to school counselors
- School Counselor will make referrals to WBT if warranted. If so, WBT will conduct 20-min check-in:
 - Interview student about any suicidal ideation or trauma
 - Based on the student's global well-being, the student may receive the following services:
 - Individual psychotherapy (Tier 3, high-risk)
 - Groups selected by information provided at check-in (Tier 2, at-risk)
- Students remaining at the Tier 2 level will have bimonthly check-ins. Student well-being will be monitored over time.

Tier 1: Universal Supports

- Social-emotional learning through Second Step
- Schoolwide social-emotional attitudes and values (i.e., school rules, reinforcement systems, positive interactions)
- School culture
- Class-wide psychoeducation
- Teacher well-being
- Family involvement

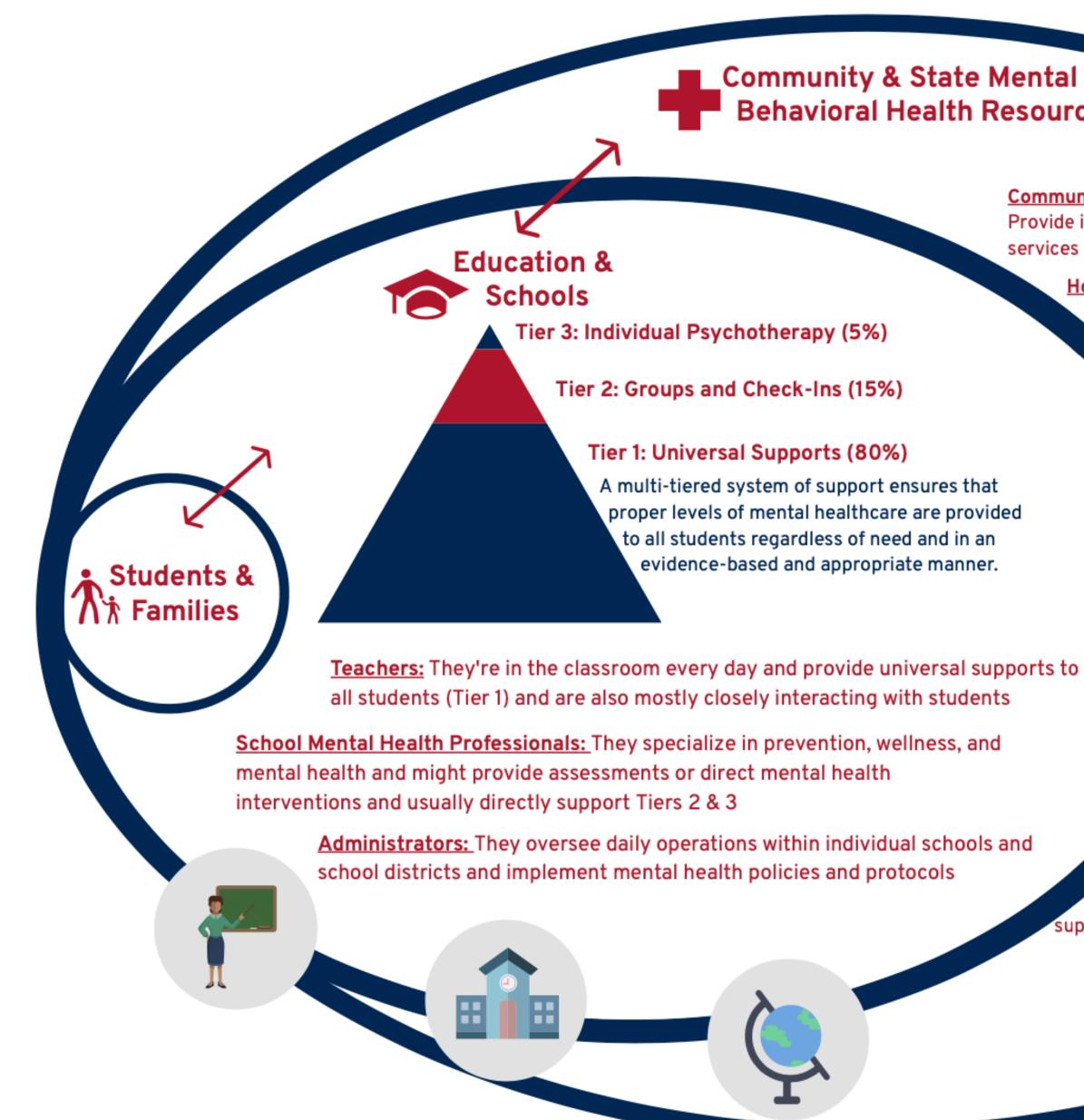


Remember: When referring students, report symptoms and behaviors rather than diagnoses.



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Levels of Support and Community Member Roles



Community & State Mental and **Behavioral Health Resources**

> **Community Mental Health Centers:** Provide individual and family counseling

services

Hospitals: Provide crisis support and inpatient treatment when higher levels of support are needed

A multi-tiered system of support ensures that proper levels of mental healthcare are provided to all students regardless of need and in an evidence-based and appropriate manner.

Primary Care Providers: Support overall health and wellbeing of students and families and can prescribe medication and provide referrals for other medical providers

> Psychiatrists: Specialize in diagnosing and treating mental health concerns and can provide assessments and prescribe medication

Psychologists/Counselors: Specialize in diagnosing and treating mental health concerns through counseling services and assessment

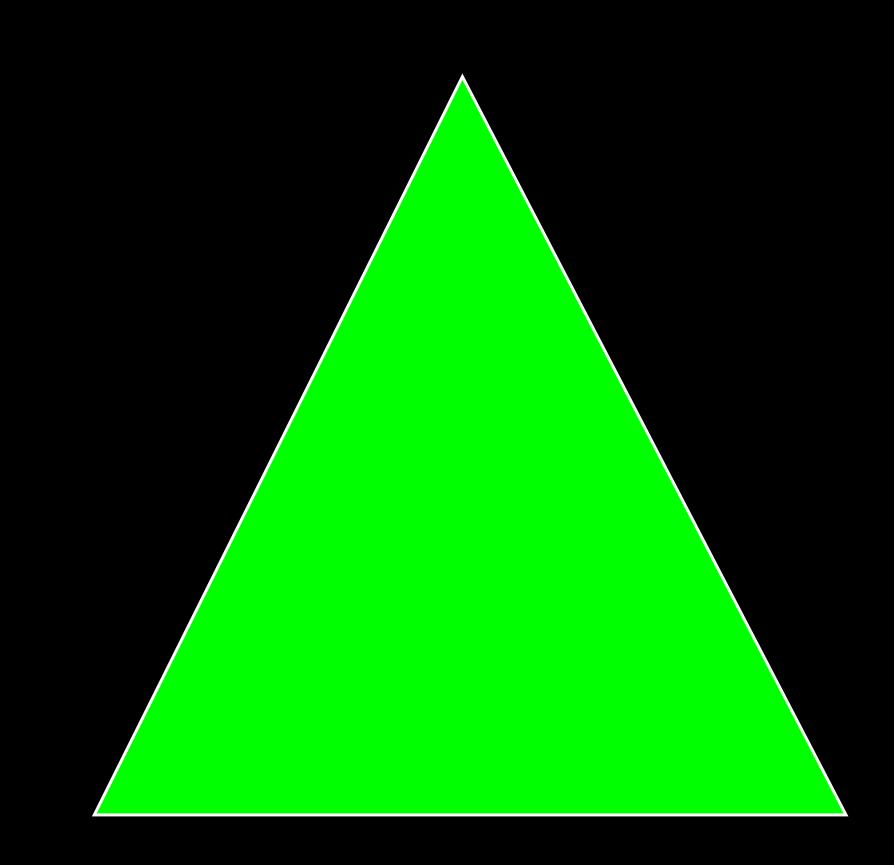
Social Workers/Case Workers: Assist individuals and families in accessing community resources, including housing, food, healthcare, and other necessities

Behavior Analysts: Specialize in behavior management, analysis, and intervention supports tied to mental health needs.

UNIVERSAL SUPPORTS Tier 1

TIER 1 OVERVIEW

- Wellbeing Committee
- SCHOOL CLIMATE
- Social Emotional Learning
- SECOND-STEP
- SAFE UT APP
- Screening



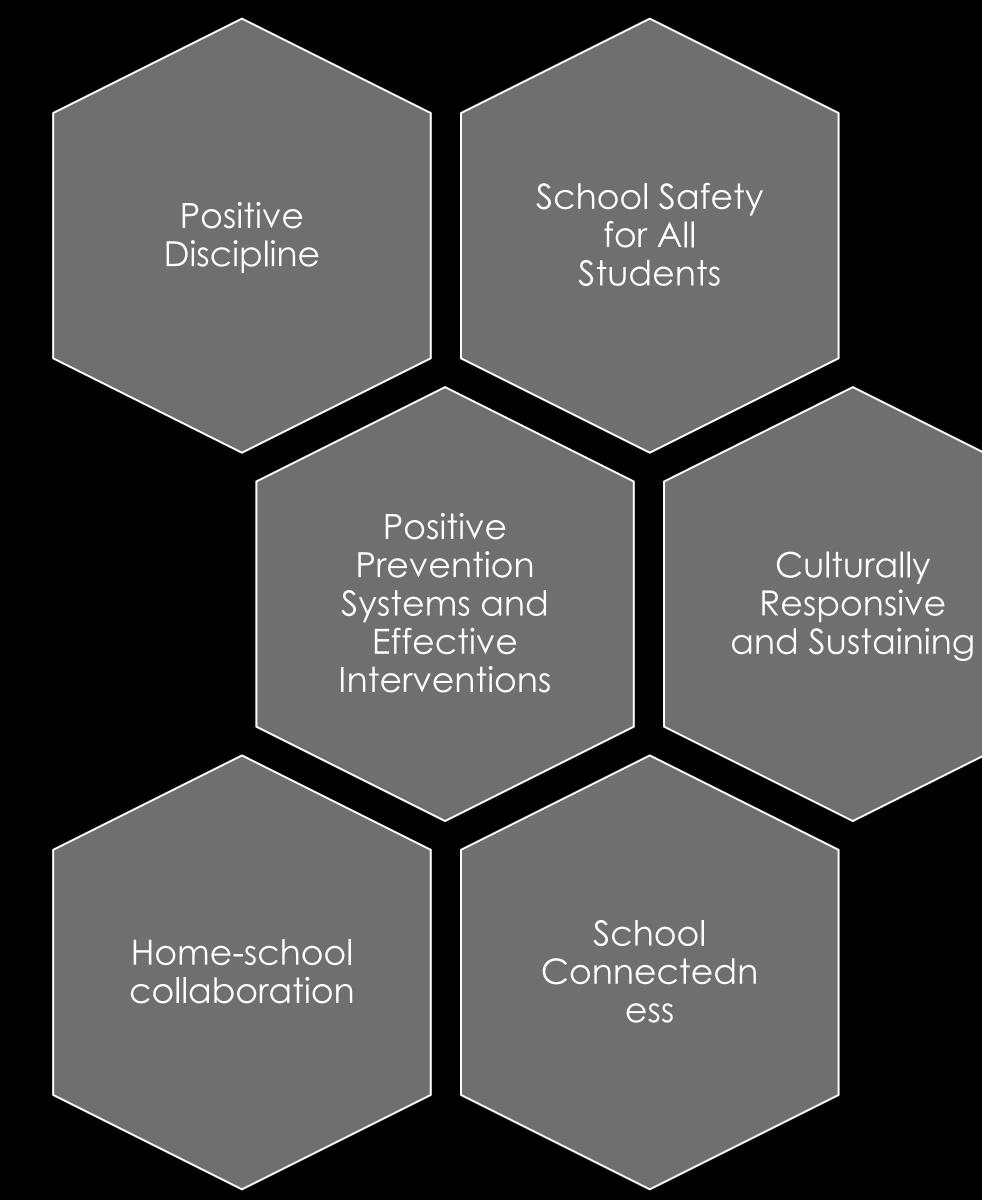
WELLBEING COMMITTEE

- Team at the school building that supports student wellbeing and mental HEALTH
- MEETS AT LEAST MONTHLY TO DISCUSS
 - SCHOOLWIDE WELLBEING PLANS
 - Students who are at risk or experiencing mental health concerns
- Problem-solve access/practical issues
- LEAD EFFORTS TO PROMOTE WELLBEING THROUGHOUT THE SCHOOL
- Uses team initiated problem-solving (TIPS) ightarrow

Newton, Algozzine, Algozzine, Horner, & Todd, 2011



School Climate



Culturally Responsive



SOCIAL EMOTIONAL LEARNING



SOCIAL **AWARENESS**

HOMES AND COMMUNITIES

SCHOOLS

CLASSROOMS

SELF-MANAGEMENT

SEL

RESPONSIBLE **DECISION-**MAKING

RELATIONSHIP **SKILLS**

SR CURRICULUM AND INSTRUCTION SCHOOLWIDE PRACTICES AND POLICIES

AND COMMUNITY PARTNERS





SOCIAL EMOTIONAL LEARNING

IDENTIFY EMOTIONS AND SELF-REGULATION: HELP CHILDREN GAIN MASTERY OVER FEELINGS, THOUGHTS, AND BEHAVIOR TO INCREASE CONFIDENCE AND SELF-ESTEEM

BUILDING EMPATHY AND PEER CONNECTIONS: ASSIST STUDENTS IN BUILDING EMPATHY AND UNDERSTANDING FOR OTHERS AND HOW TO FORM HEALTHY PEER RELATIONSHIPS

Respecting Boundaries: Teach proper boundaries and other skills such as respect, COMPASSION, ETC.

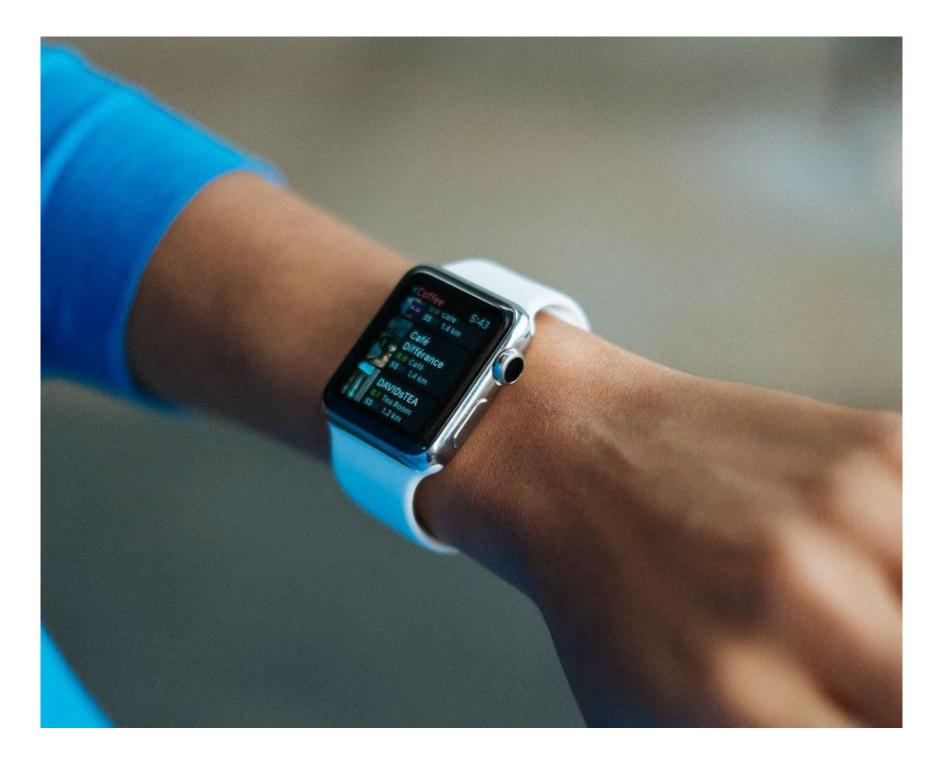
PROMOTE POSITIVE MENTAL HEALTH: UNDERSTAND WHAT MENTAL HEALTH IS AND TECHNIQUES FOR IMPROVING MENTAL AND EMOTIONAL HEALTH

DECISION MAKING AND PROBLEM SOLVING: LEARN TO EFFECTIVELY MAKE CHOICES AND APPLY THE FRAMEWORK WORK TO DAILY LIFE









CURRENT TECHNOLOGY AND SCHOOL PREVENTION EFFORTS



SAFE UT APP

24/7 STATE-WIDE CRISIS LINE STAFFED BY LICENSED CLINICIANS



Chat - CrisisLine -

Opens 2 - way messaging with a SafeUT CrisisLine counselor.

Call - CrisisLine

Tap this to speak to a SafeUT CrisisLine counselor. The CrisisLine number will appear and you can call immediately.



Submit a Tip

Submit confidential tips to school administrators on bullying, threats, or violence.

What Defines a Crisis?

A crisis is a time of intense difficulty, trouble, or even danger when someone is unable to use effective coping and problem-solving skills.

A crisis might mean something different to you than it does to someone else. Every person reacts differently to stressful situations. These reactions can include:

- thoughts about suicide,
- stress,
- depression,
- anxiety,
- concerns about a loved one,
- drug or alcohol use, and
- addiction.

Crises can be caused by:

- grief and loss,
- financial difficulties, or
- impacts of domestic violence or abuse (including emotional, physical, or sexual abuse).



Social and Emotional Wellness

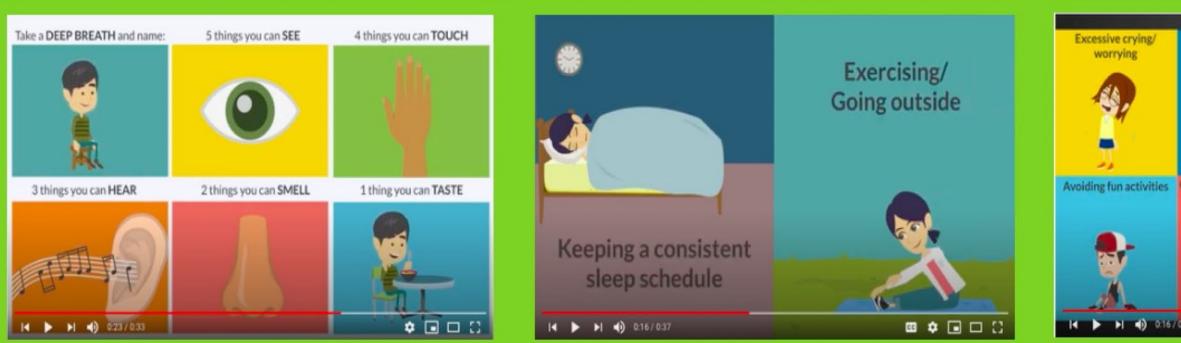
Back To School Anxiety for Kids

Handling Uncertainty



Grounding Technique

Self-Care for Adults









Identifying Emotions

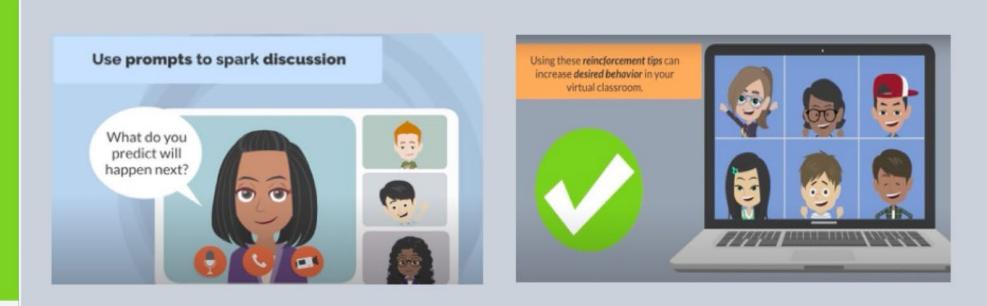
see your eyebrows are e together and you are biting your lip.

Virtual Classroom **Behavior Tips**

Strategies to support remote learners

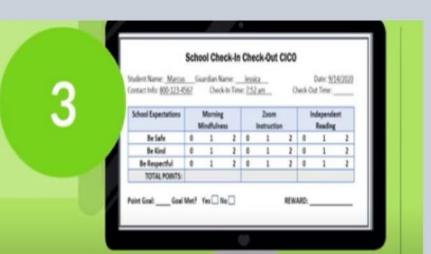
Increasing Virtual Engagement

Virtual Reinforcement



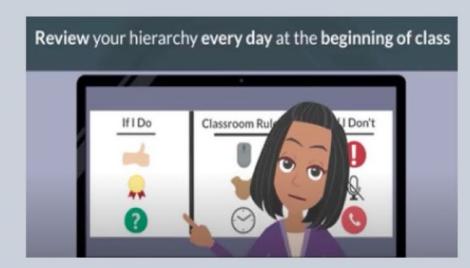
Coping Skills

Changes in appetite headaches 60 Asking "What if uchiness/irritabil ficulty concentrat frequently P



Virtual CICO







@GSD_BRST



@GSDBRST

Behavior

Response Support Team









Behavior Response Support Team BRST

TikTok: @gsd_brst









Try the following **activity** to **help** you **cope** with **uncertainty** about the **future**.

STUDENT SUBJECTIVE WELLBEING QUESTIONNAIRE (SSWQ)

https://osf.io/t9w4q/

Joy of Learning Scale: items 1, 5, 9, 13 School Connectedness Scale: items 2, 6, 10, 14 Educational Purpose Scale: items 3, 7, 11, 15 Academic Efficacy Scale: items 4, 8, 12, 16

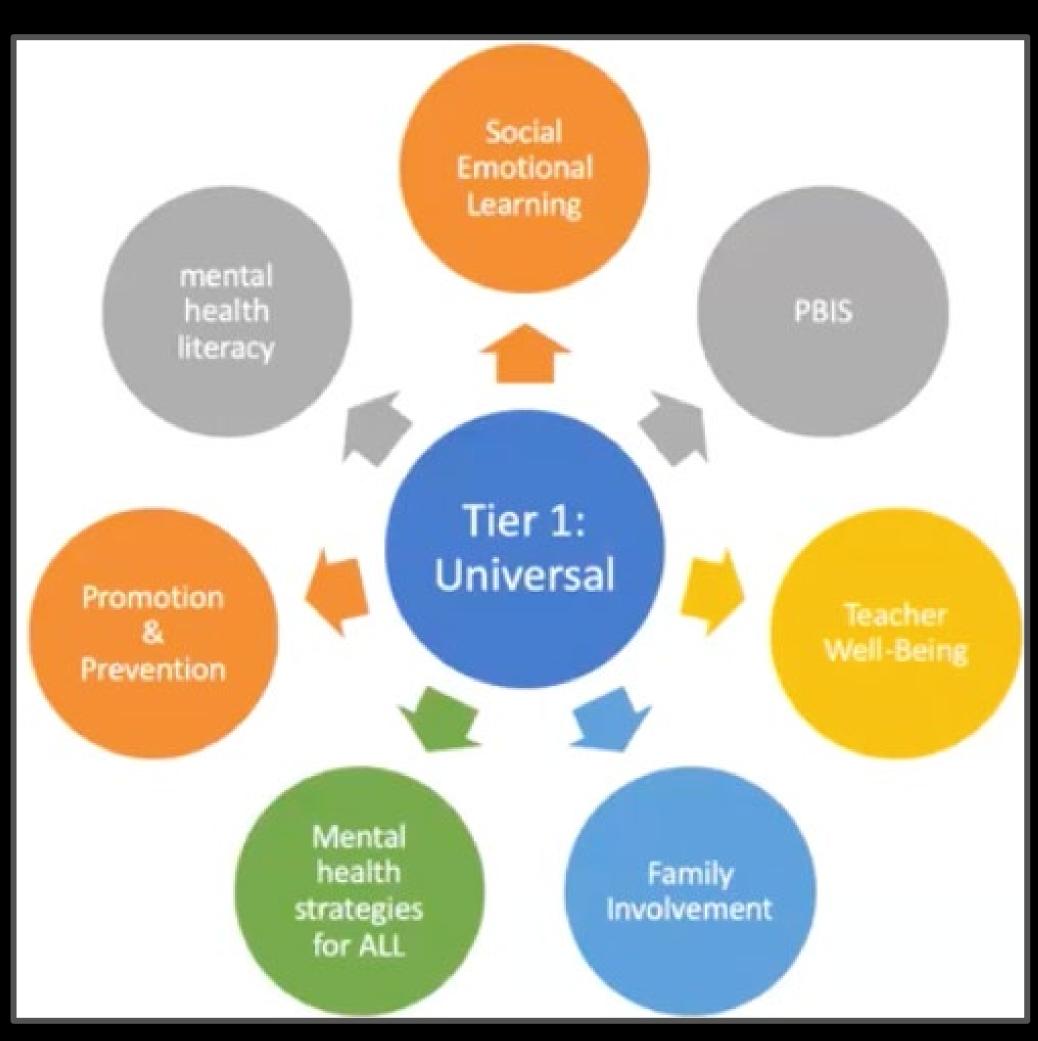
Renshaw, T. L. (2018); Renshaw, T. L., & Chenier, J. S. (2018)

Here are some questions about what you think, feel, and do at school. Read each sentence and choose the <u>one</u> best answer.

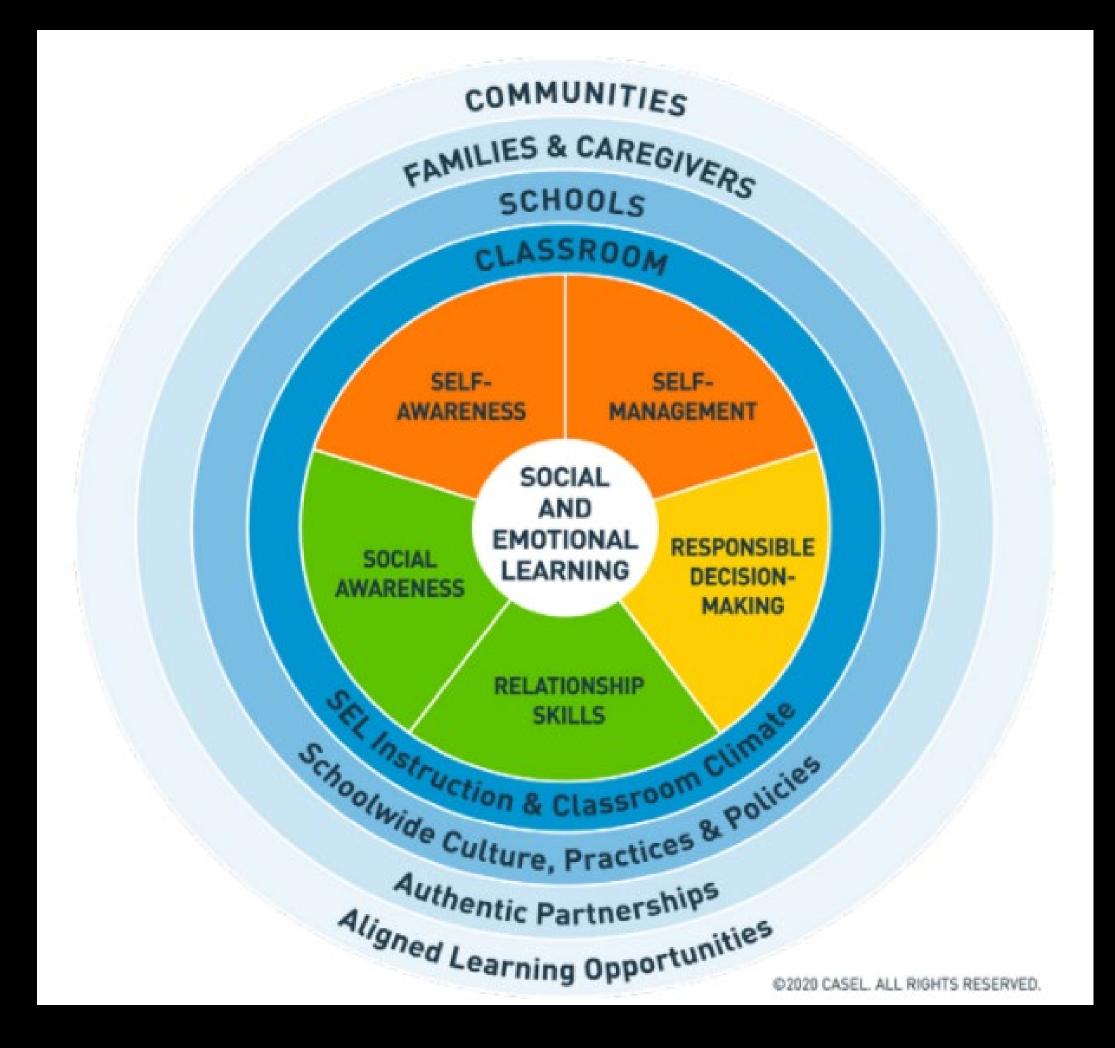
		Almost Never	Some- times	Often	Almost Always
1.	I get excited about learning new things in class.	1	2	3	4
2.	I feel like I belong at my school.	1	2	3	4
3.	I feel like the things I do at school are important.	1	2	3	4
4.	l am a successful student.	1	2	3	4
5.	I am really interested in the things I am doing at school.	1	2	3	4
6.	I can really be myself at my school.	1	2	3	4
7.	I think school matters and should be taken seriously.	1	2	3	4
8.	I do good work at school.	1	2	3	4
9.	l enjoy working on class projects and assignments.	1	2	3	4
10.	I feel like people at my school care about me.	1	2	3	4
11.	l feel it is important to do well in my classes.	1	2	3	4
12.	I do well on my class assignments.	1	2	3	4
13.	I feel happy when I am working and learning at school.	1	2	3	4
14.	I am treated with respect at my school.	1	2	3	4
15.	I believe the things I learn at school will help me in my life.	1	2	3	4
16.	l get good grades in my classes.	1	2	3	4

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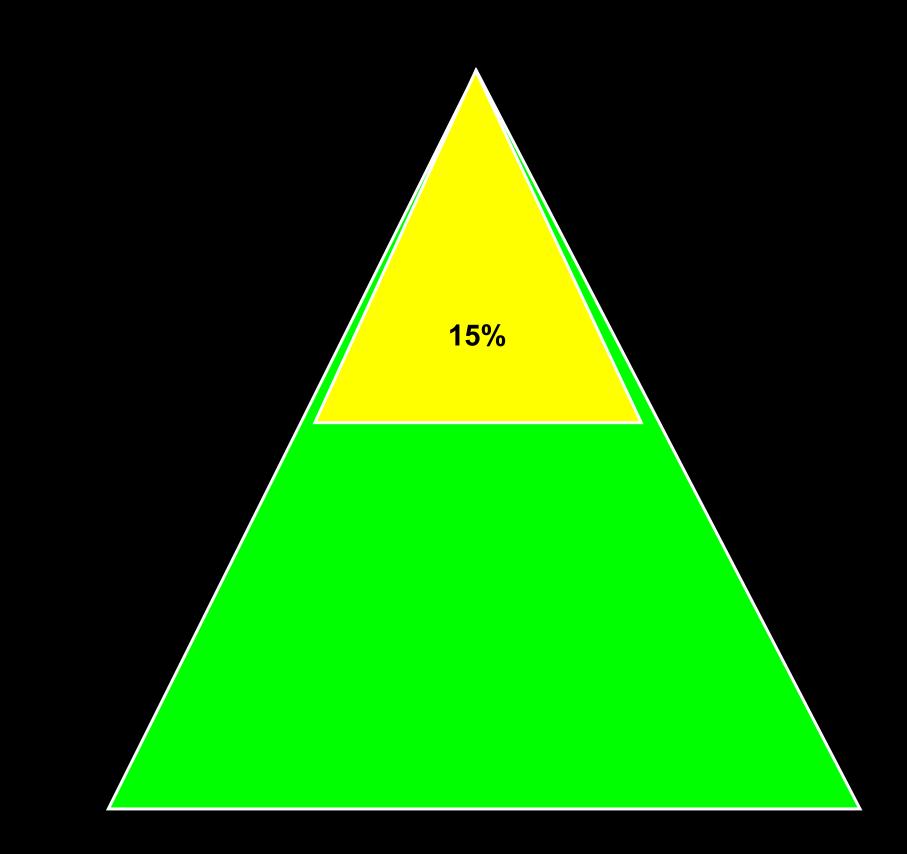
MTSS TIER 1 SERVICES



TARGETED SUPPORTS TIER 2

TIER 2 OVERVIEW

- BRIEF CHECK-IN
- GROUP THERAPIES
- Electronic School-Home Notes
- CHECK IN, CHECK OUT



BRIEF CHECK IN

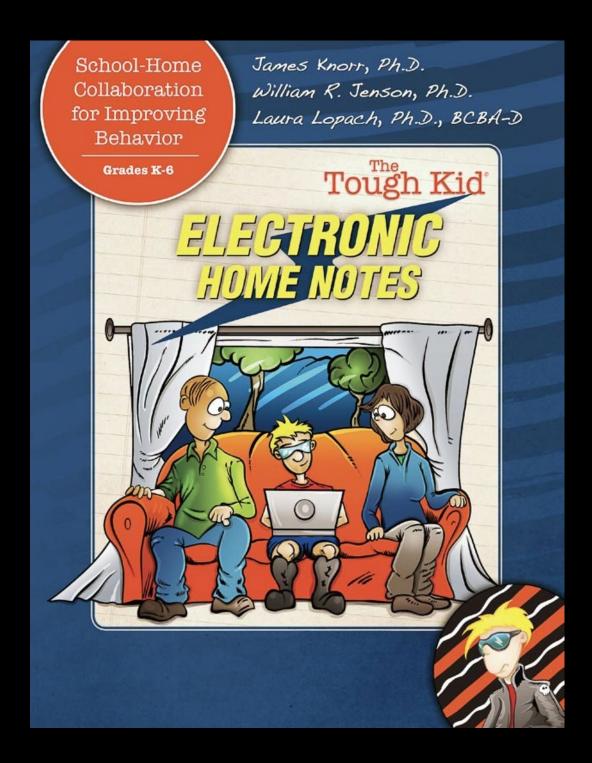
- NITIAL ightarrow
 - 20-MINUTE SEMI-STRUCTURED CONVERSATION
 - WELLBEING, SUICIDAL IDEATION, TRAUMA
- ONGOING
 - <u>20-MINUTE SEMI-STRUCTURED CONVERSATION</u>
 - **BI-MONTHLY**
 - WELLBEING, SUICIDAL IDEATION, TRAUMA
 - CHECK IN REGARDING ANY PREVIOUS INFORMATION



ELECTRONIC SCHOOL-HOME NOTE

- EFFECTIVE INTERVENTION FOR IMPROVING STUDENT ON-TASK BEHAVIOR AND PARENT CONNECTION
- ALLOWS FOR DIGITAL COMMUNICATION BETWEEN THE PARENT/CAREGIVER AND SCHOOL STAFF ABOUT TARGETED GOALS OF THE STUDENT.
- DATA ENTRY, GRAPHING, AND MANAGEMENT IS AUTOMATED
- Parents provide contingencies at home for meeting GOALS
- TOUGH-KID-ELECTRONIC-HOME-NOTES/

• HTTPS://WWW.ANCORAPUBLISHING.COM/PRODUCT/THE-Knorr, Jenson, O'Neill, Clark, Hood, & Davis, 2018

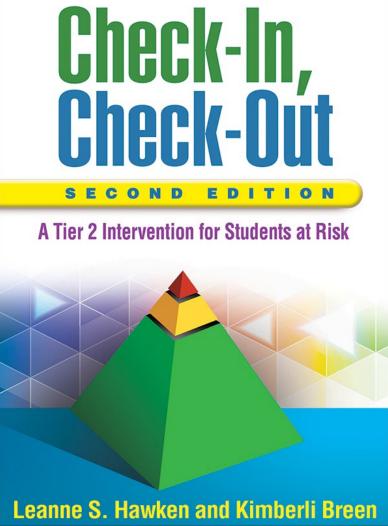


CHECK IN, CHECK OUT

- MENTOR-BASED INTERVENTION
- **INCREASE POSITIVE INTERACTIONS BETWEEN STUDENTS** SCHOOL STAFF THROUGH MULTIPLE OPPORTUNITIES FOR FEEDBACK THROUGHOUT THE SCHOOL DAY
- HTTPS://WWW.GUILFORD.COM/VIDEOS/CHECK-IN-<u>CHECK-OUT/HAWKEN-BREEN/9781462524587</u>

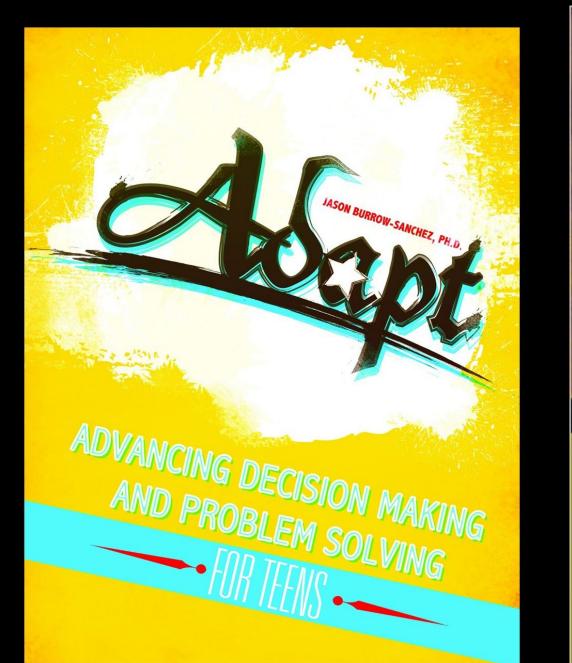
Drevon, Hixson, Wyse, & Rigney, 2019; Hawken, L., Bundock, Eber, Breen, & Phillips, 2015

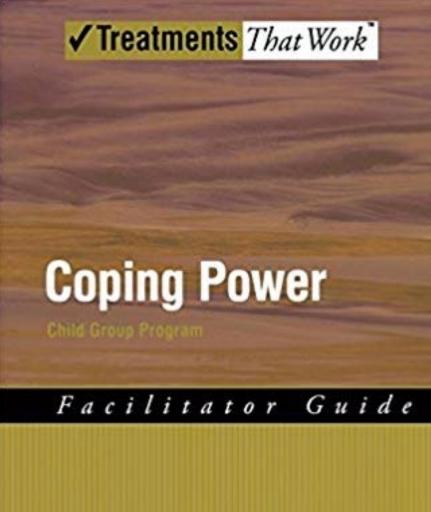




GROUP THERAPIES

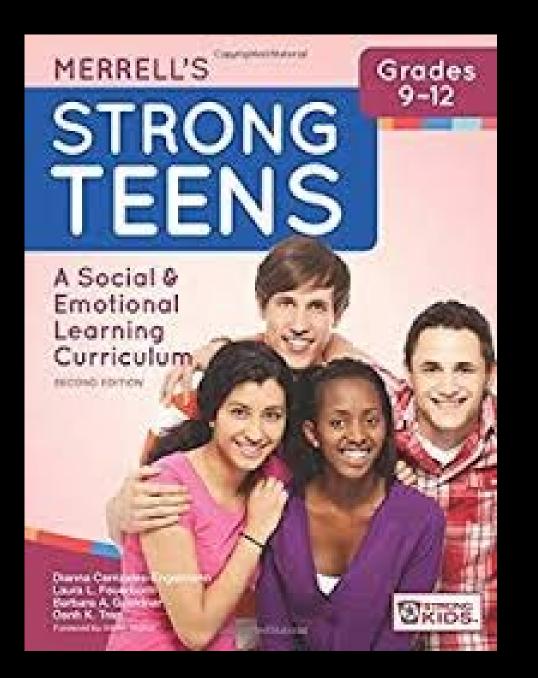
- PROBLEM-SOLVING AND DECISION MAKING
- Emotional understanding and EXPRESSION
- SOCIAL SKILLS AND SUPPORT
- INTERPERSONAL / COMMUNICATION SKILLS
- Conflict resolution skills
- COPING STRATEGIES



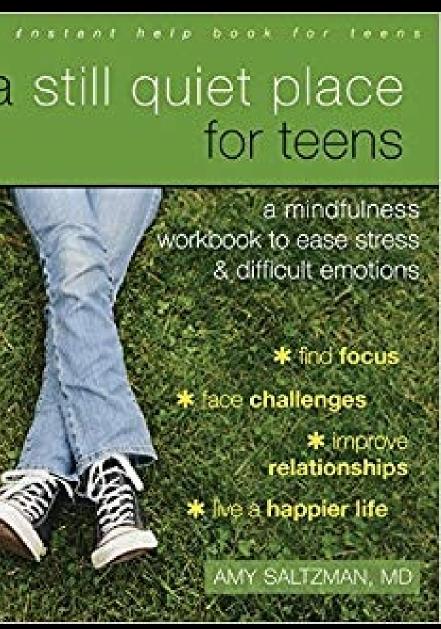


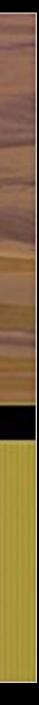
John E. Lochman Karen C. Wells Lisa A. Lenhart





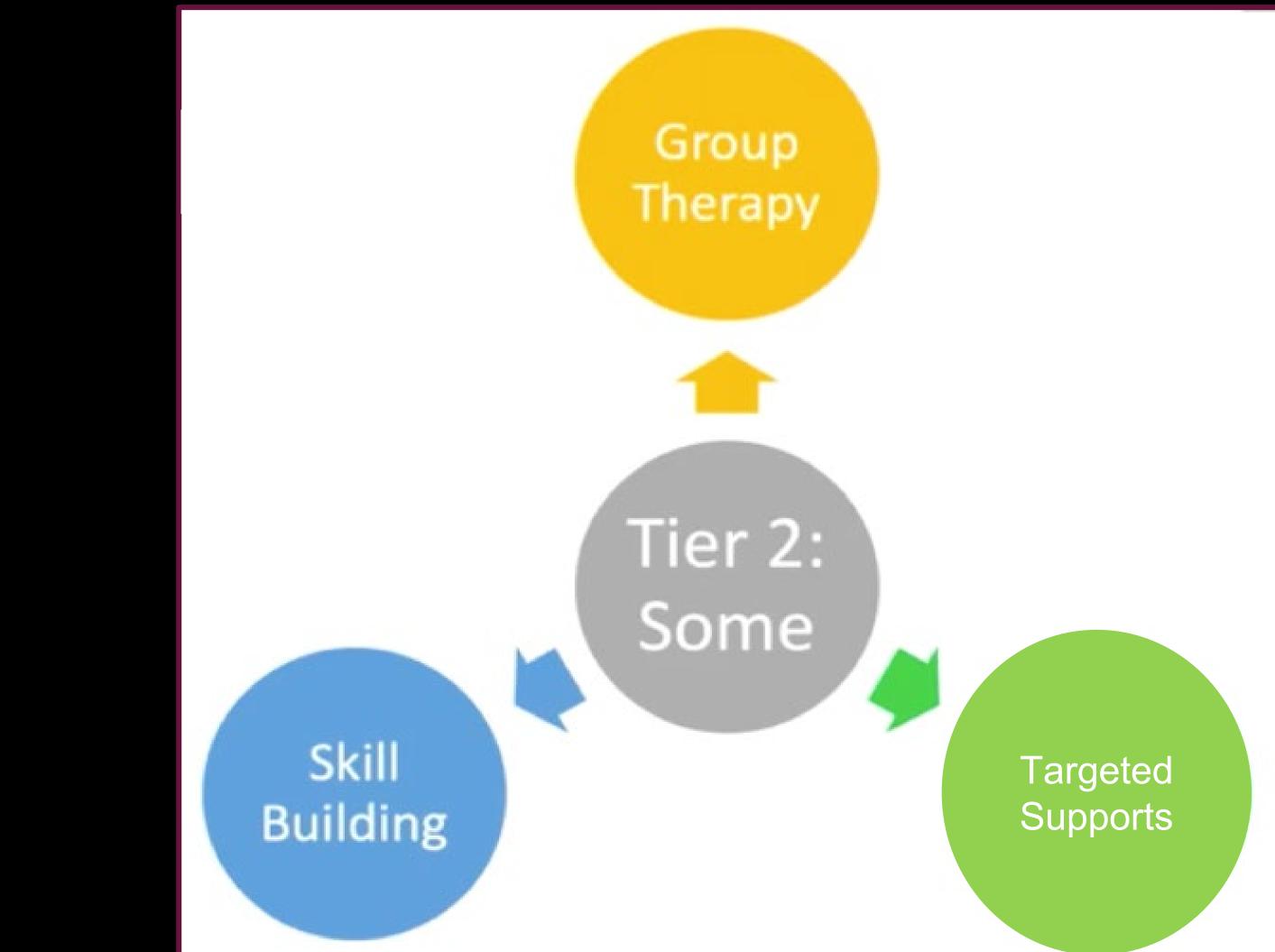
n instant help book for teens a still quiet place





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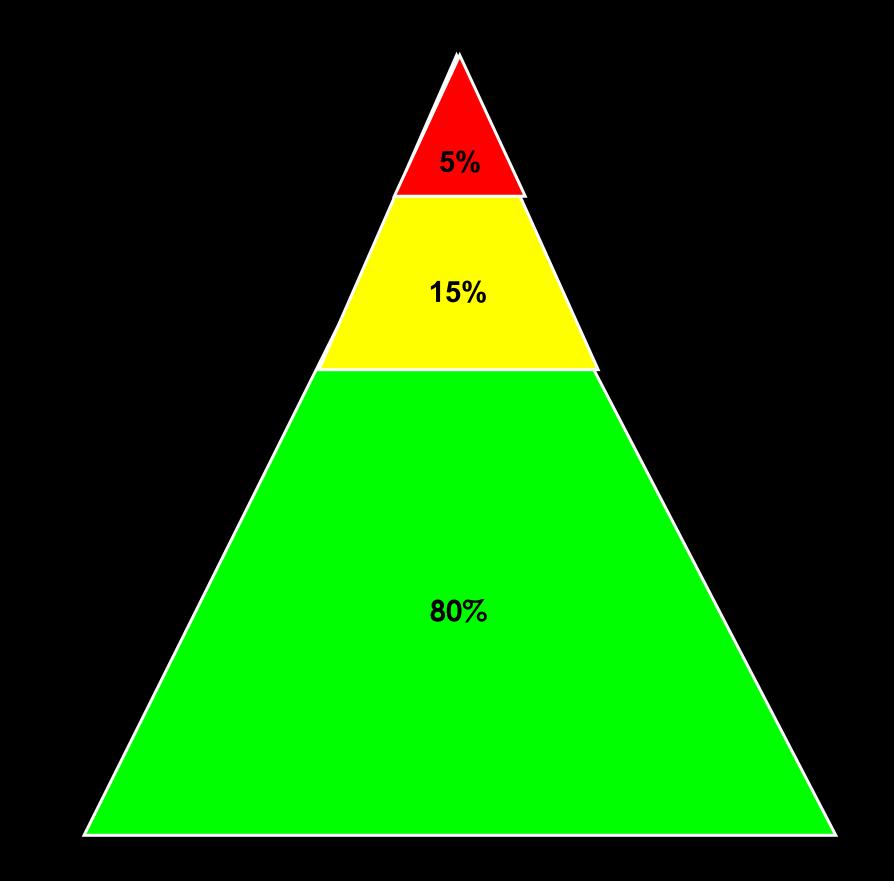
MTSS Tier 2 Services



INDIVIDUALIZED SUPPORTS TIER 3

TIER 3 OVERVIEW

- Individual Psychotherapy
- COMMUNITY COLLABORATION
- PROGRESS MONITORING



INDIVIDUALIZED PREVENTION

- INDIVIDUAL PSYCHOTHERAPY
 - ANXIETY
 - DEPRESSION
 - TRAUMA
 - INTERPERSONAL PROBLEMS
- COMMUNITY COLLABORATION
 - MENTAL HEALTH PROVIDERS
 - MEDICAL PROVIDERS



PROGRESS MONITORING

YOUTH INTERNALIZING PROBLEMS SCREENER

Here are some questions about what you think, feel, and do. Read each sentence and circle the <u>one</u> best answer.

		Alm Nev
1.	I feel nervous or afraid.	1
2.	I feel very tired and drained of energy.	1
3.	I find it hard to relax and settle down.	1
4.	I get bothered by things that didn't bother me before.	1
	I have uncomfortable and tense feelings in my body.	1
6.	I feel moody or grumpy.	1
7.	I feel like I'm going to panic or think I might lose control.	1
8.	I do not really enjoy doing anything anymore.	1
9.	I feel worthless or lonely when I'm around other people.	1
10.	I have headaches, stomachaches, or other pains.	1

lost /er	Some- times	Often	Almost Always
	2	3	4
	2	3	4
	2	3	4
	2	3	4
	2	3	4
	2	3	4
	2	3	4
	2	3	4
	2	3	4
	2	3	4



PROGRESS MONITORING

YOUTH EXTERNALIZING PROBLEMS SCREENER

Here are some questions about what you think, feel, and do. Read each sentence and circle the <u>one</u> best answer.

		Almo Neve
1.	I lose my temper and get angry with other people.	1
2.	I have a hard time sitting still when other people want me to.	1
3.	I fight and argue with other people.	1
4.	I break rules whenever I feel like it.	1
5.	I talk a lot and interrupt others when they are talking.	1
6.	I say or do mean things to hurt other people.	1
7.	I have a hard time focusing on things that are important.	1
8.	I like to annoy people or make them upset.	1
9.	I get distracted by the little things happening around me.	1
10.	I choose not to follow directions and don't listen to adults.	1

ost er	Some- times	Often	Almost Always	
	2	3	4	
	2	3	4	
	2	3	4	
	2	3	4	
	2	3	4	
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•	2	3	4	
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https://osf.io/t9w4q/ Renshaw & Cook, 2018

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MTSS Tier 3 Services

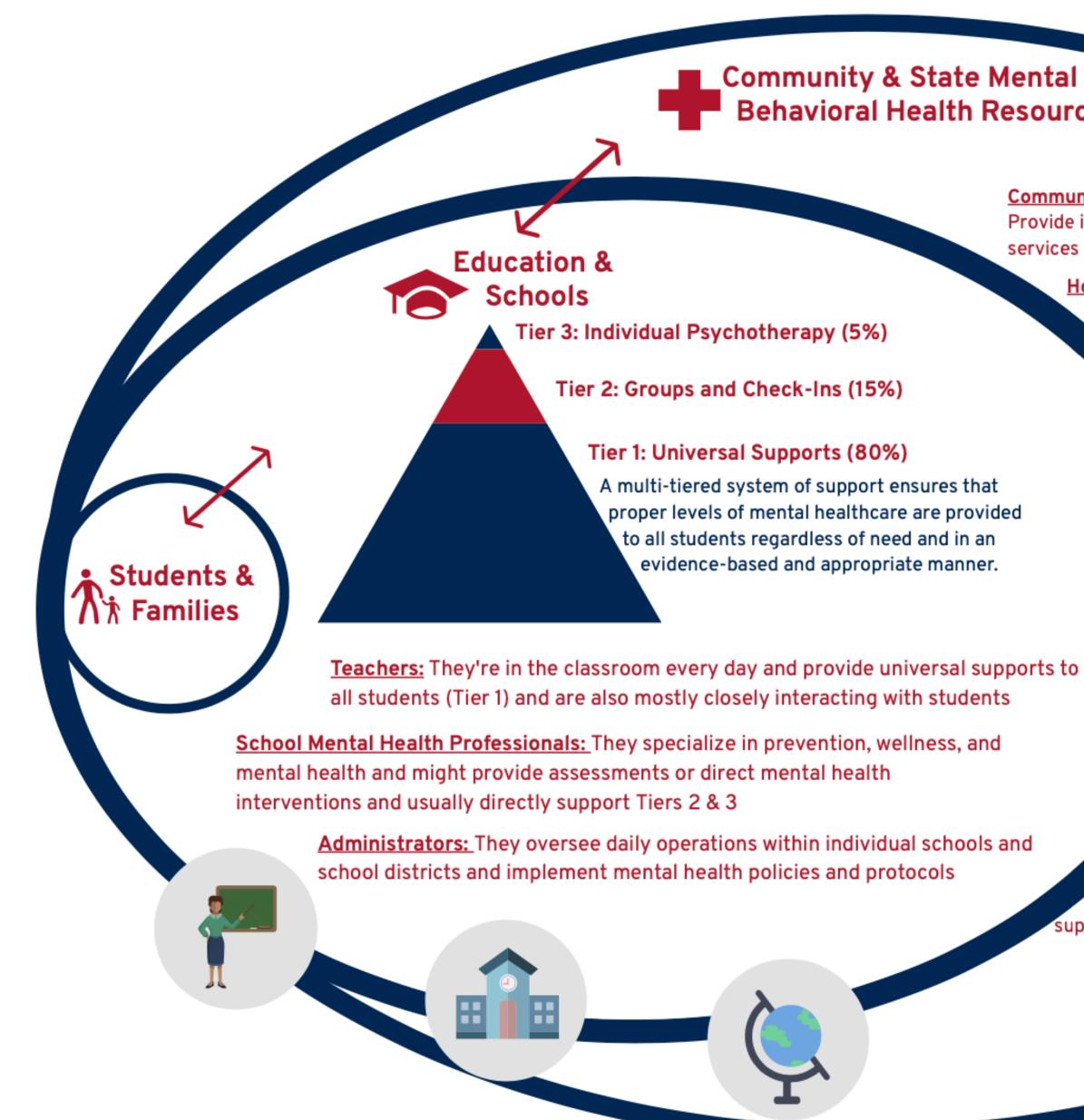
Privacy

Therapy

Therapeutic orientation dependent on clinician skill & problem



Levels of Support and Community Member Roles



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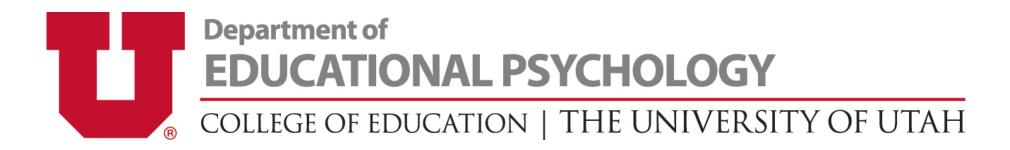
- Aaron J. Fischer, PhD, BCBA-D
 - aaron.fischer@utah.edu
 - www.u-tteclab.com











Thank you!

For additional information, please contact:

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Technology Applications in School Consultation, Supervision, and School **Psychology** Training

Edited by Aaron J. Fischer, Tai A. Collins, Evan H. Dart, and Keith C. Radley



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