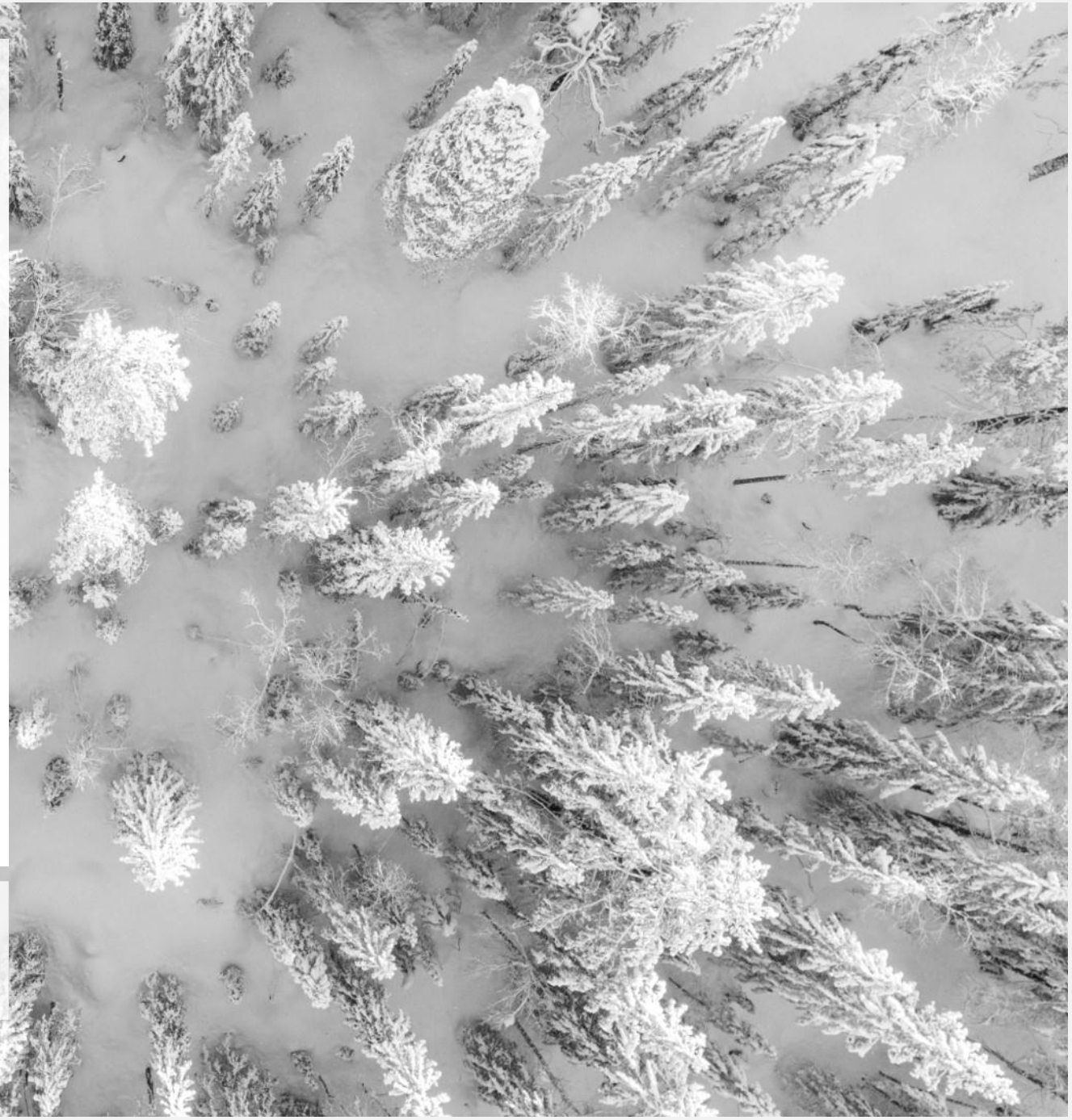
Toward System-Wide School Mental Health:

Successes and Future Directions in Canada and the United States



Banff International Conferences in Behavioural Science,
March 2019

The Banff Conference is all about sharing ideas

With each other, across provinces, across countries, across the globe

System-Wide School Mental Health depends on moving away from islands of excellence and towards shared ideas, thoughtfully and systematically brought to life in ways that are scalable and sustainable

System-Wide School Mental Health

It starts with sharing ideas…

The Canadian Perspective

Kathy Short, Ph.D., C.Psych.

School Mental Health Ontario

Where we left off..

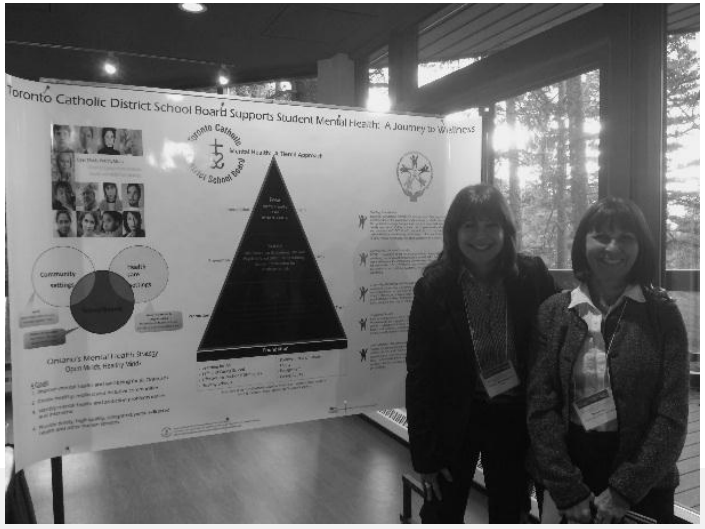
March 2016

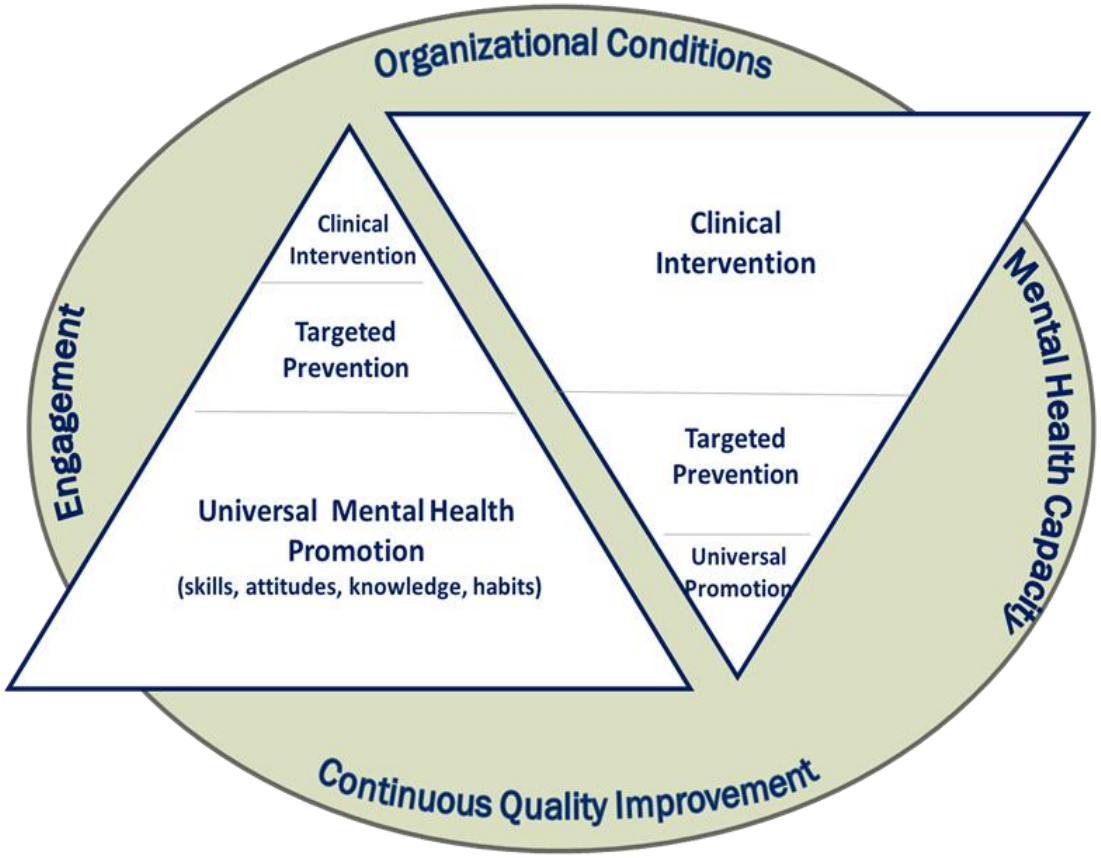
Creating a national research, policy, and practice agenda in school mental health: Collective learnings, collaborative possibilities

Broad Themes

Triangles Rock!

> Multi-Tiered Systems of Support help us:
  - To organize our work in school mental health
  - To situate our individual efforts
  - To communicate our part in the system of care, within and across sectors





Like a Fine Wine…

> Evidence-Based Practice is maturing

> Not just WHAT, but HOW

- Evidence-Based Implementation-Sensitive

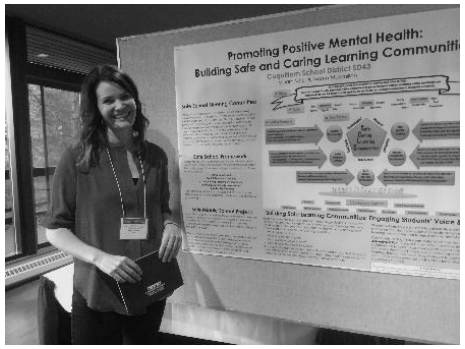
> Increased flexibility

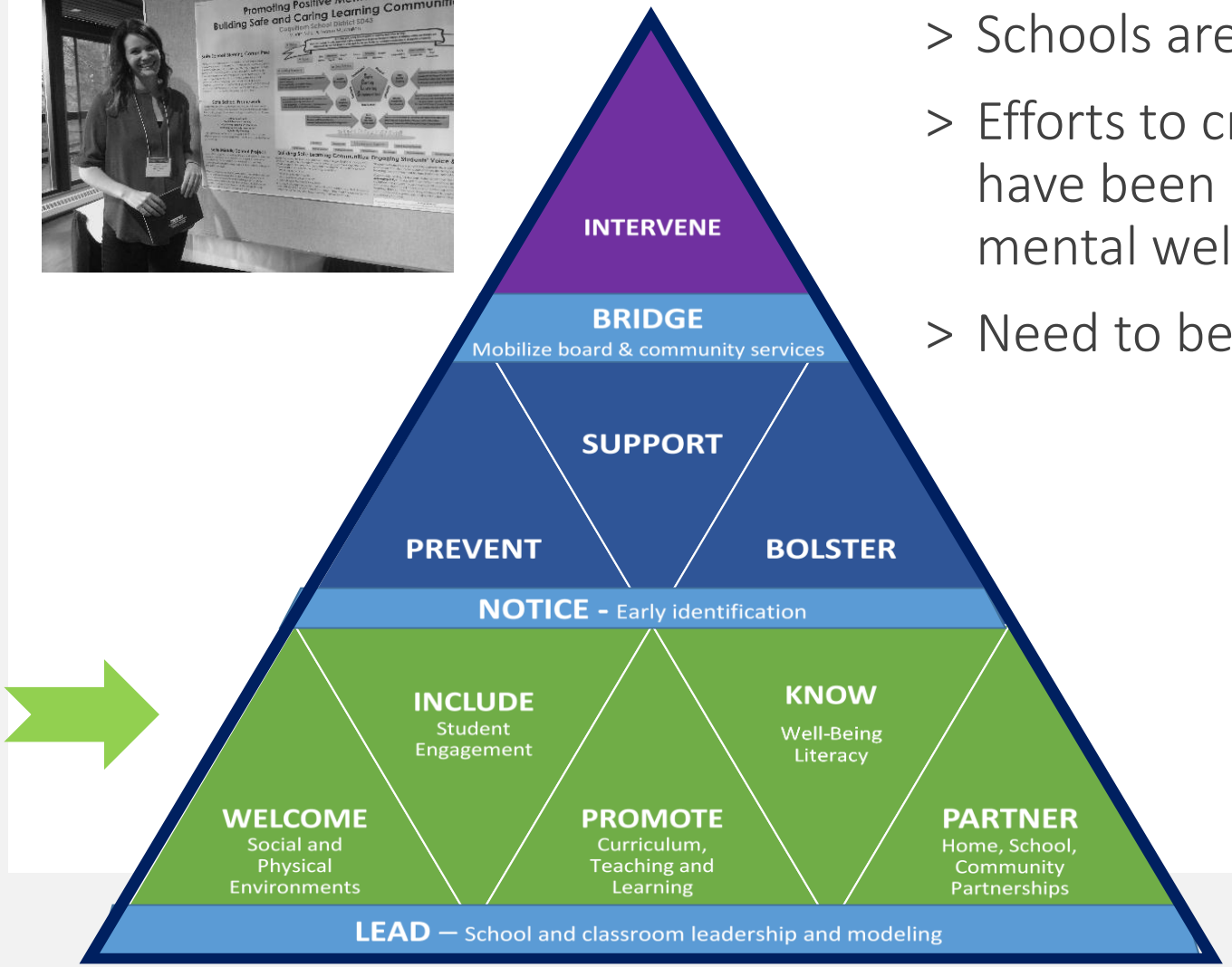
- Consideration of strategic blending, core elements

> Attention to uptake, scale-up, and sustainability

- Foundational structures and conditions, training and coaching, ease of delivery, enhancing relative advantage

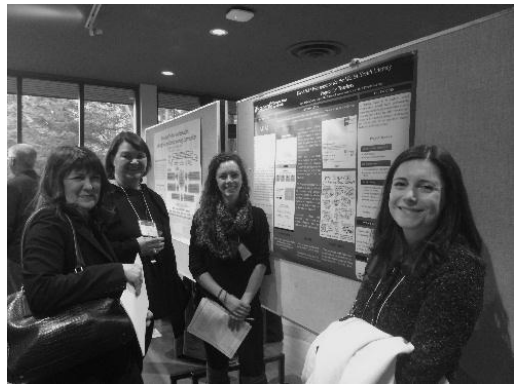
Good for All, Essential for Some





- Schools are well-positioned for tier one work
- Efforts to create safe, welcoming, inclusive schools have been underway for some time – the link to mental well-being for students is new
- Need to be more explicit, and fill in the gaps

The Learning Stance



> This is not an area of comfort and confidence for most educators

> Need for preparation and support (pre-service and practising)

- To lead, to notice, to support, and to provide instruction

> Growing set of resources for professional learning

> Not just WHAT, but HOW

- To engage in ways that encourage uptake, fit with role of educator, build confidence

> Supporting staff well-being is part of the work

> We are all learners in this work

Raising the Bar for our Most Vulnerable

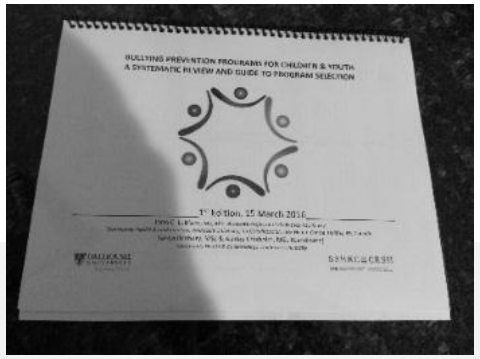
> Schools are very well-positioned to deliver services to students that need a higher dose of skill development or support

> Evidence-based programming can help with standardization and quality of services offered at tier 2 and 3 for our most vulnerable youth

> Great examples of school-based interventions
  - Challenging Horizons, Healthy Relationships Plus, CBITS, Mindfulness

> Decision support is important as schools think about their needs, priorities, costs, commitment, etc.

> Open question about the value of core elements vs program approach – requires flexibility



Honouring and Using Voice

> Important to listen to and honour diverse voices

> Consider social determinants of health, “cultural” connectedness

> Avoid assumptions – Ask!

> Some groups have unique needs – something different (more)
  - Programming may need to be differentiated, adapted

> Engage youth and families <u>meaningfully…and early</u>

> Also need to find our voice and tell our SMH story

> There is a role for advocacy and marketing

Broad Themes - Summary

> Organizing with Multi-Tiered Systems of Support
> Harnessing the Power of Implementation Science
> Optimizing Universal Foundations and Supports
> Building Capacity amongst Education Professionals
> Enhancing Quality and Consistency for Prevention and Intervention Services in Schools
> Honouring Diverse Voices and Perspectives
> Engaging Youth and Families

Recommendations for School Mental Health in Canada

Banff Conference, 2016

Research

- Raise the Bar
- We want More!
- Bring Educators Along
- Build a Coherent Measurement System
- Create Platforms for Effective Knowledge Exchange

Practice

- Become Upstreamists!
- Honour and Share Effective Practices
- Include All Voices
- Focus on Specific Populations
- Build Capacity Amongst Education Professionals

Policy

- Encourage a National Presence in SMH in Canada
- Provide Dedicated Funding
- Mobilize the work of National Organizations
- Encourage Integration across Sectors
- Create Policy Related Resources

Knowledge Exchange

- Create a National Knowledge Table
- Enhance School/University Partnership
- Consider Knowledge Audiences
- Harness Technology

Recommendations for School Mental Health in Canada

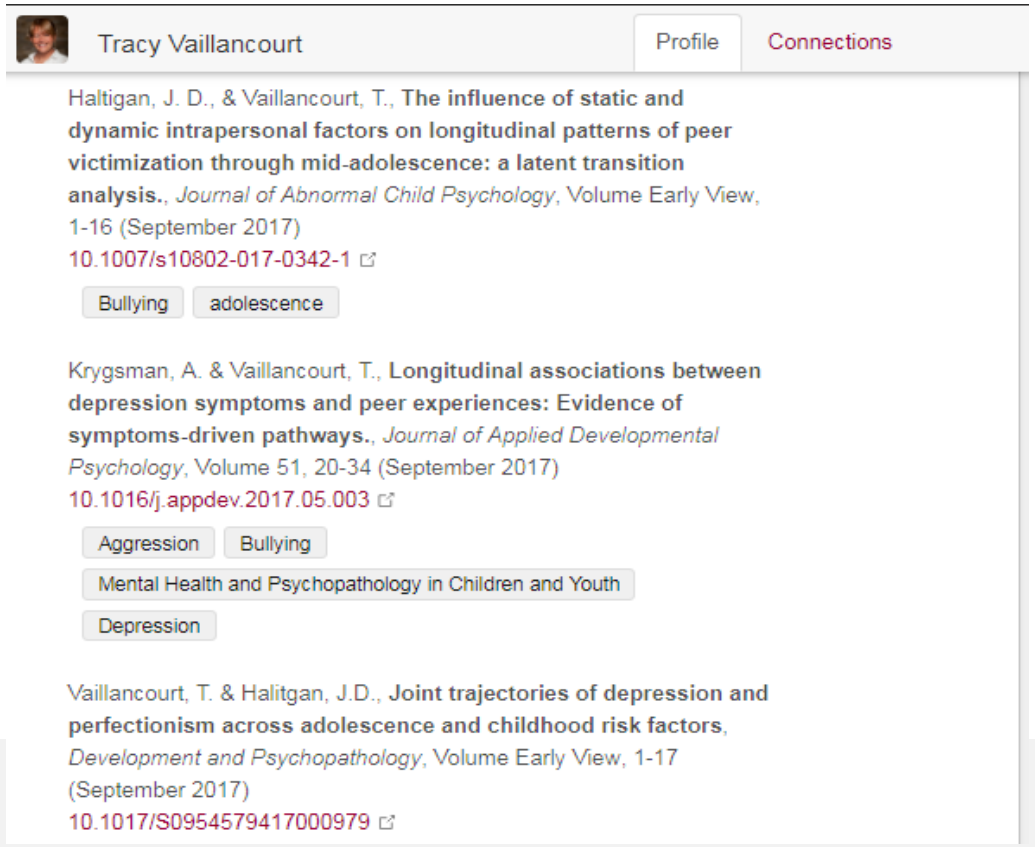
- Banff Conference, 2016

Research

- Raise the Bar
- We want More!
- Bring Educators Along
- Build a Coherent Measurement System
- Create Platforms for Effective Knowledge Exchange

Banff Conference, 2019 - How are we doing with SMH research?

Have we raised the bar with more rigorous and meaningful quantitative and qualitative research in school mental health since 2016?



Tracy Vaillancourt Profile Connections

Haltigan, J. D., & Vaillancourt, T., **The influence of static and dynamic intrapersonal factors on longitudinal patterns of peer victimization through mid-adolescence: a latent transition analysis.**, *Journal of Abnormal Child Psychology*, Volume Early View, 1-16 (September 2017)
10.1007/s10802-017-0342-1
Bullying adolescence

Krygsman, A. & Vaillancourt, T., **Longitudinal associations between depression symptoms and peer experiences: Evidence of symptoms-driven pathways.**, *Journal of Applied Developmental Psychology*, Volume 51, 20-34 (September 2017)
10.1016/j.appdev.2017.05.003
Aggression Bullying
Mental Health and Psychopathology in Children and Youth
Depression

Vaillancourt, T. & Halitgan, J.D., **Joint trajectories of depression and perfectionism across adolescence and childhood risk factors**, *Development and Psychopathology*, Volume Early View, 1-17 (September 2017)
10.1017/S0954579417000979

uOttawa

Recommendations for School Mental Health in Canada

Banff Conference, 2016

Research

- Raise the Bar
- We want More!
- Bring Educators Along
- Build a Coherent Measurement System
- Create Platforms for Effective Knowledge Exchange

Banff Conference, 2019 - How are we doing with SMH research?

Are we doing more research in the area of mental health promotion and prevention, social emotional learning, and popular/ emerging classroom strategies to enhance mental wellness?

Project Title: The Random Acts of Kindness Study

Research Team: Kimberly Schonert-Reichl, John Tyler Binfet, Jenna Whitehead, Lina Sweiss, Michelle Sipl, and Jacqueline Maloney

Participants: 700 4th and 5th grade students and 28 teachers

Location: Vancouver School District and Penticton

Description: The goal of this randomized controlled study is to evaluate the effectiveness of a social and emotional learning program

Recommendations for School Mental Health in Canada

Banff Conference, 2016

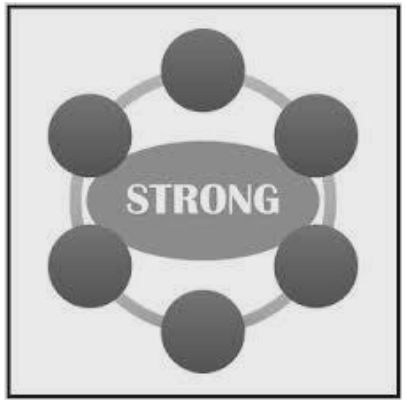
Research

- Raise the Bar
- We want More!
- Bring Educators Along
- Build a Coherent Measurement System
- Create Platforms for Effective Knowledge Exchange

Banff Conference, 2019 - How are we doing with SMH research?

Are we doing more research in the area of implementation science, scale-up, and sustainability related to evidence-based practice?

School Mental Health Ontario
Evidence-Based / Implementation-Sensitive Innovation and Scale-Up Lab



Recommendations for School Mental Health in Canada

Banff Conference, 2016

Research

- Raise the Bar
- We want More!
- Bring Educators Along
- Build a Coherent Measurement System
- Create Platforms for Effective Knowledge Exchange

Banff Conference, 2019 - How are we doing with SMH research?

Are we favouring research that meaningfully includes the voice of educators?

Western
Centre for School Mental Health

› Koenig, A., Rodger, S. & Specht, J. (January 9, 2017). Educator burnout and Compassion Fatigue. Canadian Journal of School Psychology Doi: 10.1177/0829573516685017

› Rodger, S., Bourdage, R.*, Hancock, K.*, Hsiang, R.*, Masters, R.*, & Leschied, A. (2016). Supporting Students: A GRADE Analysis of the Research on Student Wellness and Classroom Mental Health Support. *Canadian Journal of School Psychology* DOI: 10.1177/0829573516684069

› Atkins, M.A. * & Rodger, S. (2016) Preservice Teacher Education for Mental Health and Inclusion in Schools. *Exceptional Education International*, 26, 93-118. *Retrieved from https://ir.lib.uwo.ca/eei/vol26/iss2/6/*

› Meek, F.*, Specht, J. & Rodger, S. (2016). A mental health training format for adult education teachers. Canadian Journal of School Psychology, 1-19 DOI: 10.1177/0829573516645099

› Rodger, S. & Leschied, A. (2016). Building Tools for Resiliency and Mental Health With Teachers and For Teachers. *Physical and Health Education Journal*

Recommendations for School Mental Health in Canada

Banff Conference, 2016

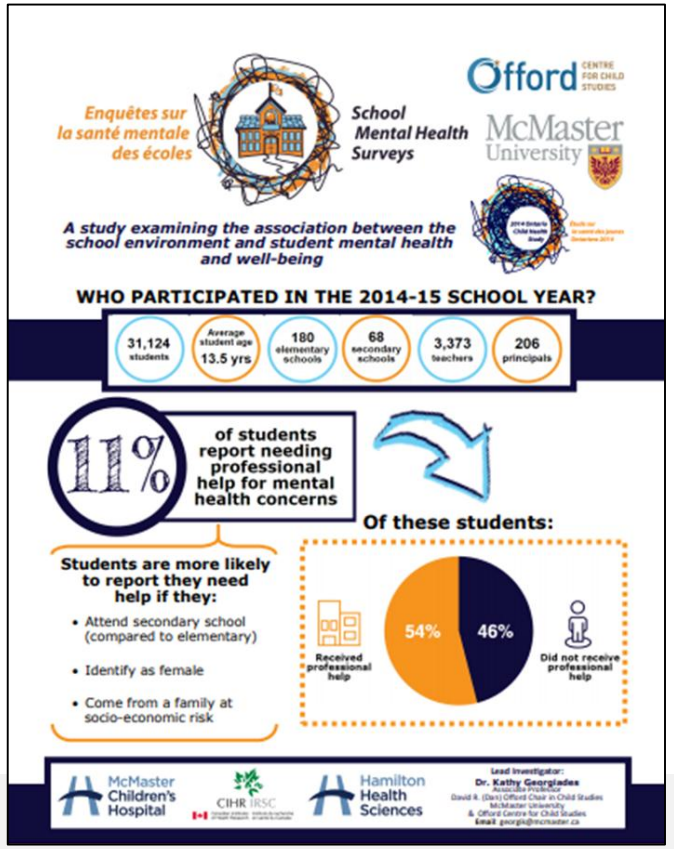
Research

- Raise the Bar
- We want More!
- Bring Educators Along
- Build a Coherent Measurement System
- Create Platforms for Effective Knowledge Exchange

Banff Conference, 2019 - How are we doing with SMH research?

Are we building a coherent measurement system for monitoring student mental health and well-being?

Offord CENTRE FOR CHILD STUDIES



Recommendations for School Mental Health in Canada

Banff Conference, 2016

Research

- Raise the Bar
- We want More!
- Bring Educators Along
- Build a Coherent Measurement System
- Create Platforms for Effective Knowledge Exchange

*Banff Conference, 2019 - How are we doing **with SMH research?***

Are we translating research in meaningful ways, considering the needs and preferences of our audiences?

CANADIAN INSTITUTE FOR SUBSTANCE USE RESEARCH

Title	Author	Date	Type
Understanding Dialogue	Reist, Dan Kristina Jenei Dyck, Tim Dr. Mahboubeh Asgari	2019	Educational resource or tool
Drug Education as Health Promotion	Reist, Dan Dr. Mahboubeh Asgari	2018	Educational resource or tool
Substance Use and Young People: A Guide for Families and Their Caring Communities	Norman, Trudy Remocker, Catriona Reist, Dan	2018	Educational resource or tool
A Public Health Guide to Developing a Community Overdose Response Plan	Pauly, Bernie Hasselback, Paul Reist, Dan	2017	Educational resource or tool
Clearing the Air: A systematic review on the harms and benefits of e-cigarettes and vapour devices	O'Leary, Renee MacDonald, Marjorie Stockwell, Tim Reist, Dan	2017	Report

Western
Centre for School Mental Health

So, are we doing all of the things we recommended? Yes, if we are Dr. Claire Crooks and Company ☺

Journal Articles

- Brown, E.L., Philoppo, K.L., Weston, K. & **Rodger, S.** (2019). United States and Canada pre-service teacher certification standards for student mental health: A comparative case study. *Teaching and Teacher Education, 80*(2019), 71-82. DOI: 10.1016/j.tate.2018.12.015
- Exner-Cortens, D., Wolfe, D., Crooks, C.V., & Chiodo, D. (2019). A preliminary randomized controlled evaluation of a universal healthy relationships promotion program for youth. *Canadian Journal of School Psychology, 00*(0), 1-20. DOI: 10.1177/0829573518821508
- Lapshina, N., **Crooks, C. V.**, & Kerry, A. (2018). Changes in depression and positive mental health among youth in a healthy relationships program. *Canadian Journal of School Psychology,* 1-17. DOI: 10.1177/08295735187
- Lapointe, A., & **Crooks, C. V.** (2018). GSA members' experiences with a structured program to promote well-being. *Journal of LGBT Youth, 0*, 1-19. DOI: 10.1080/19361653.2018.1479672
- Lapointe, A., Dunlop C., **Crooks, C. V. (accepted).** Feasibility and fit of a mental health promotion program for LGBTQ+ youth. *Journal of Youth Development.*
- **Crooks, C. V.,** Lapp, A., Auger, M., van der Woerd, K., Snowshoe, A., Rogers, B.J., Tsuruda, S., & Caron, C. (2018). A feasibility trial of mental health first aid first nations: Acceptability, cultural adaptation, and preliminary outcomes. *Am J Community Psychol, 0*, 1-13. DOI: 10.1002/ajcp.12241
- **Crooks, C. V.,** Exner-Cortens, D., Siebold, W., Moore, K., Grassgreen, L., Owen, P., Rausch, A., & Rosier, M. (2018). The role of relationships in collaborative partnership success: Lessons from the Alaska Fourth R project. *Evaluation and Program Planning, 67*(2018), 97-104. DOI: 10.1016/k.evalprogplan.2017.12.007

Bring educators along

More RCTs

More research into blended promotion/prevention approaches

More research on programming with diverse populations

Facilitate opportunities for multi-site research

SMH Research in Canada

We are moving mountains!

Collectively, we continue to make strong advances in school mental health research in Canada.

These examples show the rigour and innovation that is at the heart of research across the country.

Increasingly, our scientists are tackling the complexities in the work, moving from efficacy to effectiveness, helping to inform practice and policy.

Recommendations for School Mental Health in Canada

Banff Conference, 2016

Practice	***Banff Conference, 2019 - How are we doing with SMH practice?***
• Become Upstreamists!	→ Expanded interest and understanding of upstream benefits and learning
• Honour and Share Effective Practices	→ Cross-province sharing, facilitated through philanthropy
• Include All Voices	→ Co-Creation, partnerships, and feedback loops are becoming the norm
• Focus on Specific Populations	→ More development and testing of culturally relevant practices
• Build Capacity Amongst Education Professionals	→ Mental health knowledge and training for educators has become a huge focus across provinces (role-specific, differentiated, action focus)

However… Challenges Remain

The promise of school mental health

Research is clear about WHAT works in school mental health

Growing literature on HOW to introduce and scale high-quality practices

Mind the Gap

- systemic challenges
- knowledge challenges
- practice challenges
- equity challenges
- service challenges
- pace challenges

The practice of school mental health

Use of mental health programming with uneven evidence

Islands of excellence but inconsistent capacity for scale & sustainability

At a provincial level…

School Mental Health Ontario

(formerly School Mental Health ASSIST)

- Provincial Implementation Support Team
- Funded by Ontario Ministry of Education since 2011
- Supporting all 72 school boards
- Hosted by Hamilton-Wentworth District School Board

- **Mission** – To enhance the quality, consistency, scalability and sustainability of evidence-based mental health promotion and prevention programming across Ontario schools

- **Vision** – Every student in Ontario will have access to skills and school-based supports for maintaining good mental health, for preventing social-emotional problems, and for getting additional and ongoing assistance early when needed.

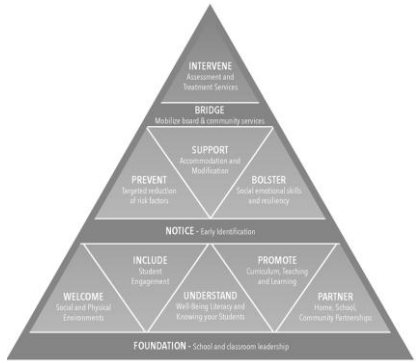
Provincial SMH Strategy

Meeting the Challenges, Straight On…

SCHOOL MENTAL HEALTH-ASSIST
ÉQUIPE D'APPUI POUR LA SANTÉ MENTALE DANS LES ÉCOLES

Challenges	Strategic Pillars	School Mental Health Ontario and Cascading Leadership
Systemic	Organizational Conditions	Provide structures and processes for effective practice
Knowledge	Professional Learning	Build staff mental health capacity
Practice	Evidence-Based Mental Health	Select and sustain high-quality mental health programming
Equity	Specific Populations	Differentiate for specific populations
Service	System Collaboration	Collaborate with community partners to find solutions
Pace	Youth/Family Engagement	Mobilize student / family voice and leadership

SCHOOL MENTAL HEALTH-ASSIST
ÉQUIPE D'APPUI POUR LA SANTÉ MENTALE DANS LES ÉCOLES



Not just what, but how…

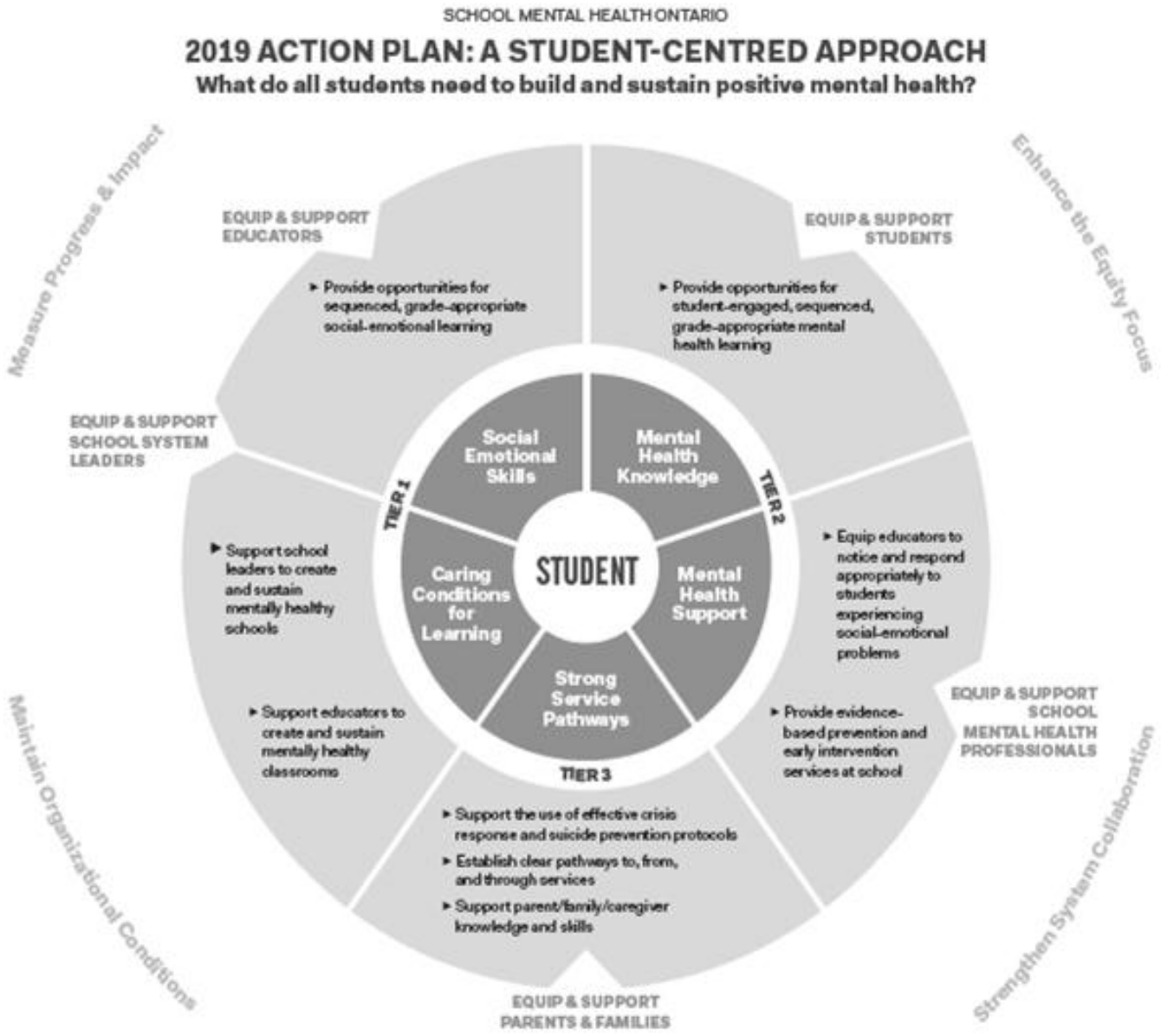
- Leadership cascade for coherence and quality
- Co-created resources and tools
- Implementation coaching
- Community of Practice

NEW

- Training in Evidence-Based Practice (BRISC, CBT, PW)
- Educator Leadership and Mental Health Learning
- Student Leadership and Mental Health Learning

Bridging Research and Practice

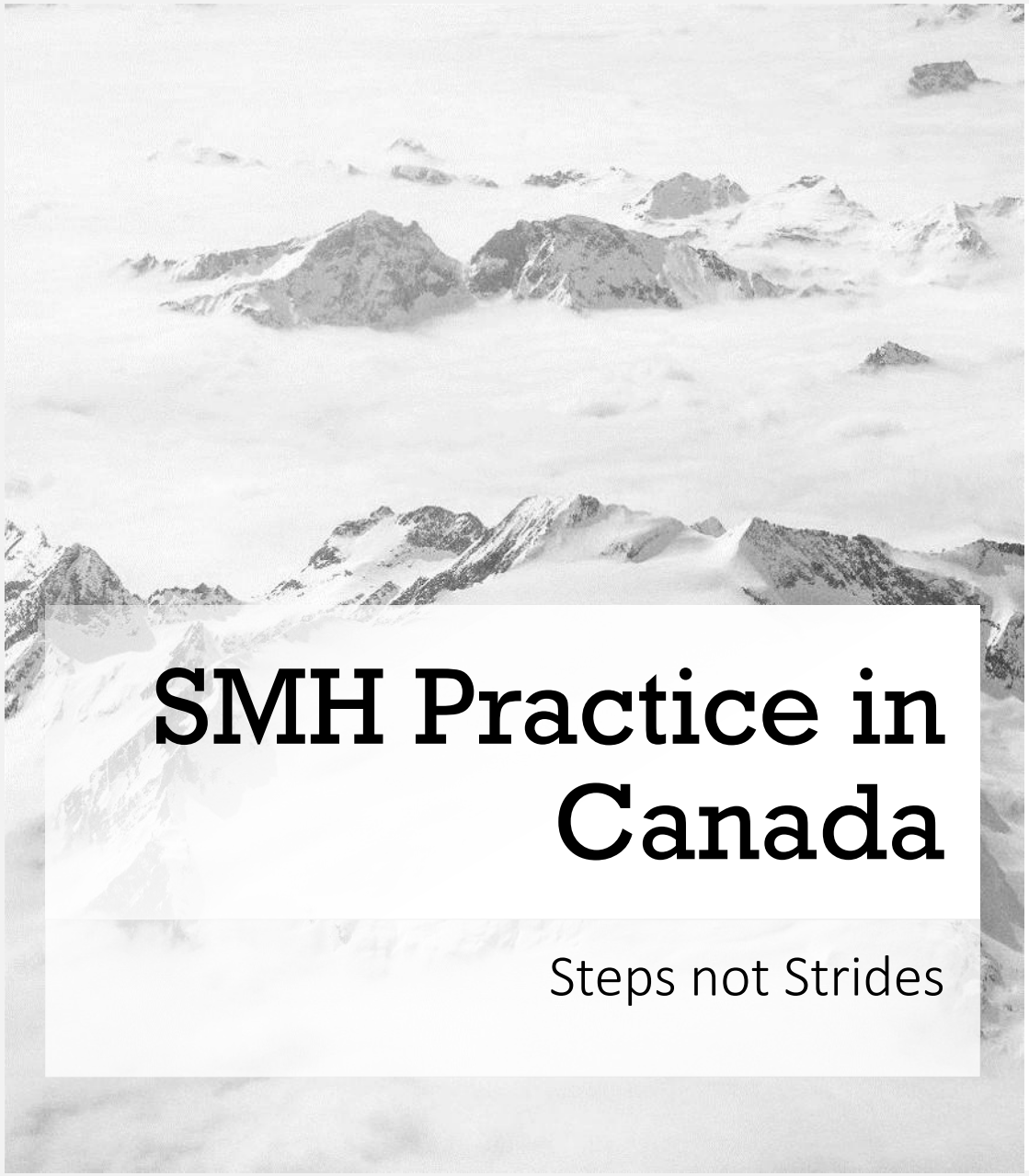
Intervention Research AND
Implementation Science



2019 Action Plan

From Systems to Students

What do all students need?



SMH Practice in Canada

Steps not Strides

Seeing more interest in system-wide approaches, as it is clear that project- or program-based initiatives are not going to scale quickly enough to reach every student

But these approaches are challenging, and require leadership, support, relationships, and patience (and can be disrupted by misaligned but well-intended initiatives)

Cross-province and international learning and sharing appears to be growing, which strengthens all efforts locally towards a system-wide approach

These approaches take a long view and require political will and support to initiate and sustain

Recommendations for School Mental Health in Canada

Banff Conference, 2016

Policy

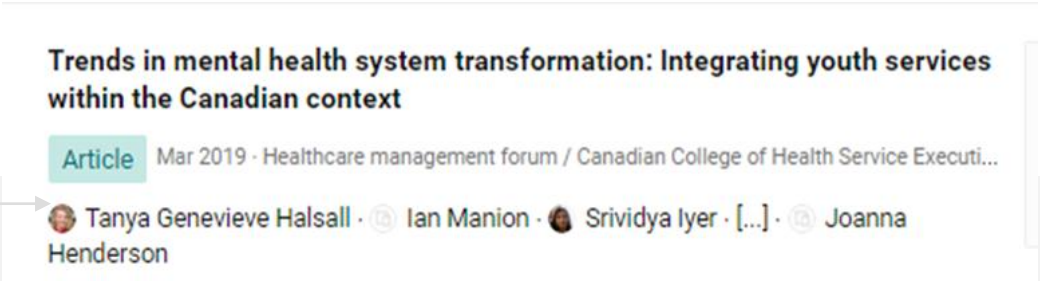
- Encourage a National Presence in SMH in Canada
- Provide Dedicated Funding
- Mobilize the work of National Organizations
- Encourage Integration across Sectors
- Create Policy Related Resources

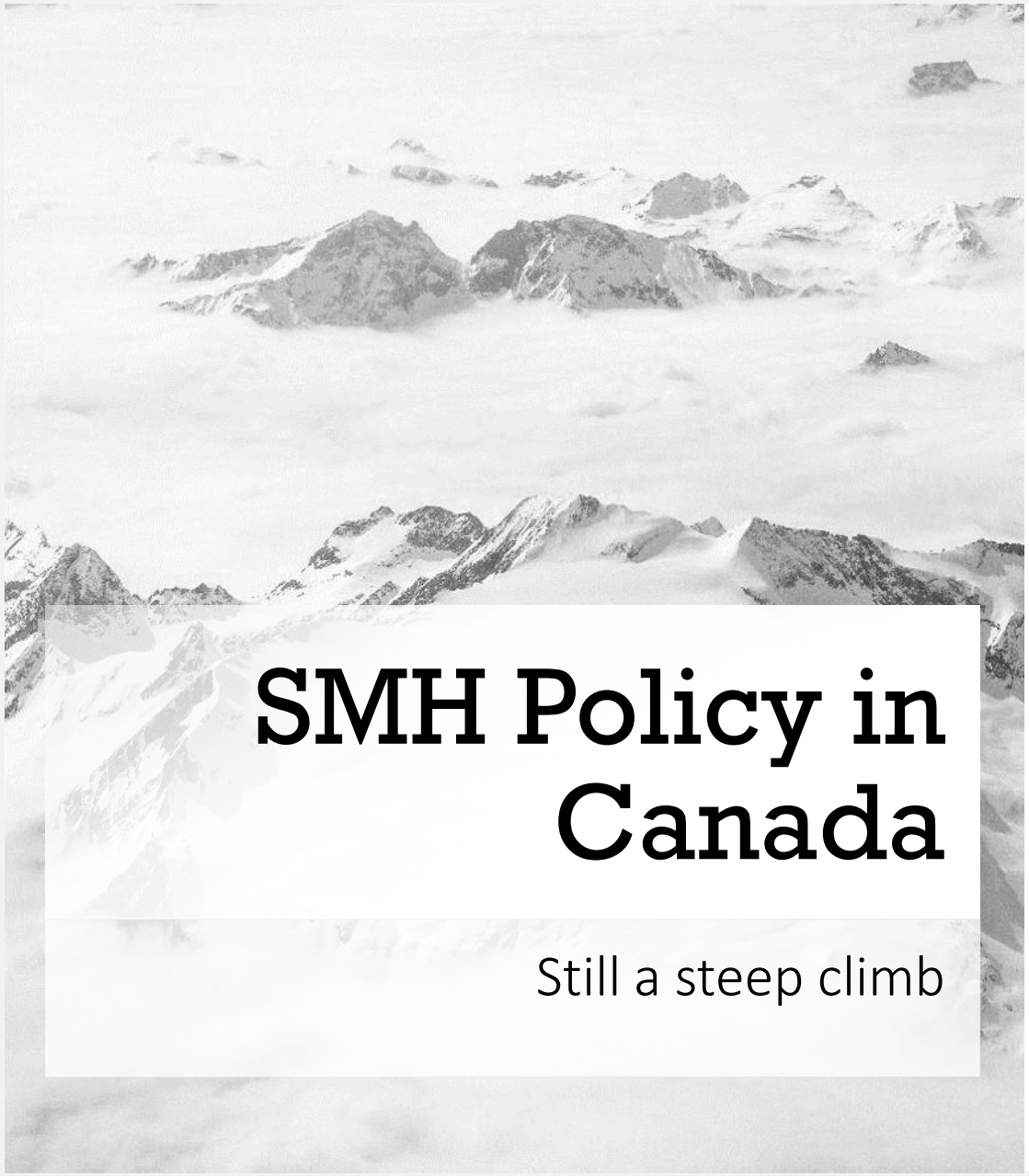
Banff Conference, 2019 - How are we doing with SMH policy?

Are we moving forward on a national strategy for school mental health? No.

- But we are seeing increased and evolving investments in school mental health in some provinces.
- Comprehensive and systematic provincial strategies founded in a multi-tiered system of support are evident in BC and Ontario.
- New Brunswick has introduced an Integrated Service Delivery Framework, a person-centred collaborative stepped care model that shows promise in providing more timely support to students with a mental health problem.

Integrated Service Models are expanding across Canada, and advanced through FRAYME





SMH Policy in Canada

Still a steep climb

There is reason for optimism as mental health, and school mental health, increasingly appears to be an “all party”, all-of-government, issue

More examples of cross-sectoral thinking and integration at the provincial level (e.g., Ontario and BC Coalitions informing government)

Continuous education and re-education with changes in government

Venn diagram of national organizations

Weak and inconsistent support for mental health capacity-building and programming in First Nations schools – an issue of urgent concern

Recommendations for School Mental Health in Canada

Banff Conference, 2016

Knowledge Exchange

- Create a National Knowledge Table
- Enhance School/University Partnership
- Consider Knowledge Audiences
- Harness Technology

Banff Conference, 2019 - How are we doing with knowledge exchange?

More research/policy/practice conversations are happening within and across provinces (e.g., BC and Ontario coalitions, McConnell projects)

Better knowledge exchange strategies are being used to share research and practice information, but it is still difficult to DO and COMMUNICATE at the same time

There is no "one stop" for SMH in Canada. Instead there are many organizations doing similar, and sometimes competing, work at the national and provincial level.

It is getting harder to meet in F2F sessions, particularly across provinces, given budget restraints

SMH Sharing in Canada

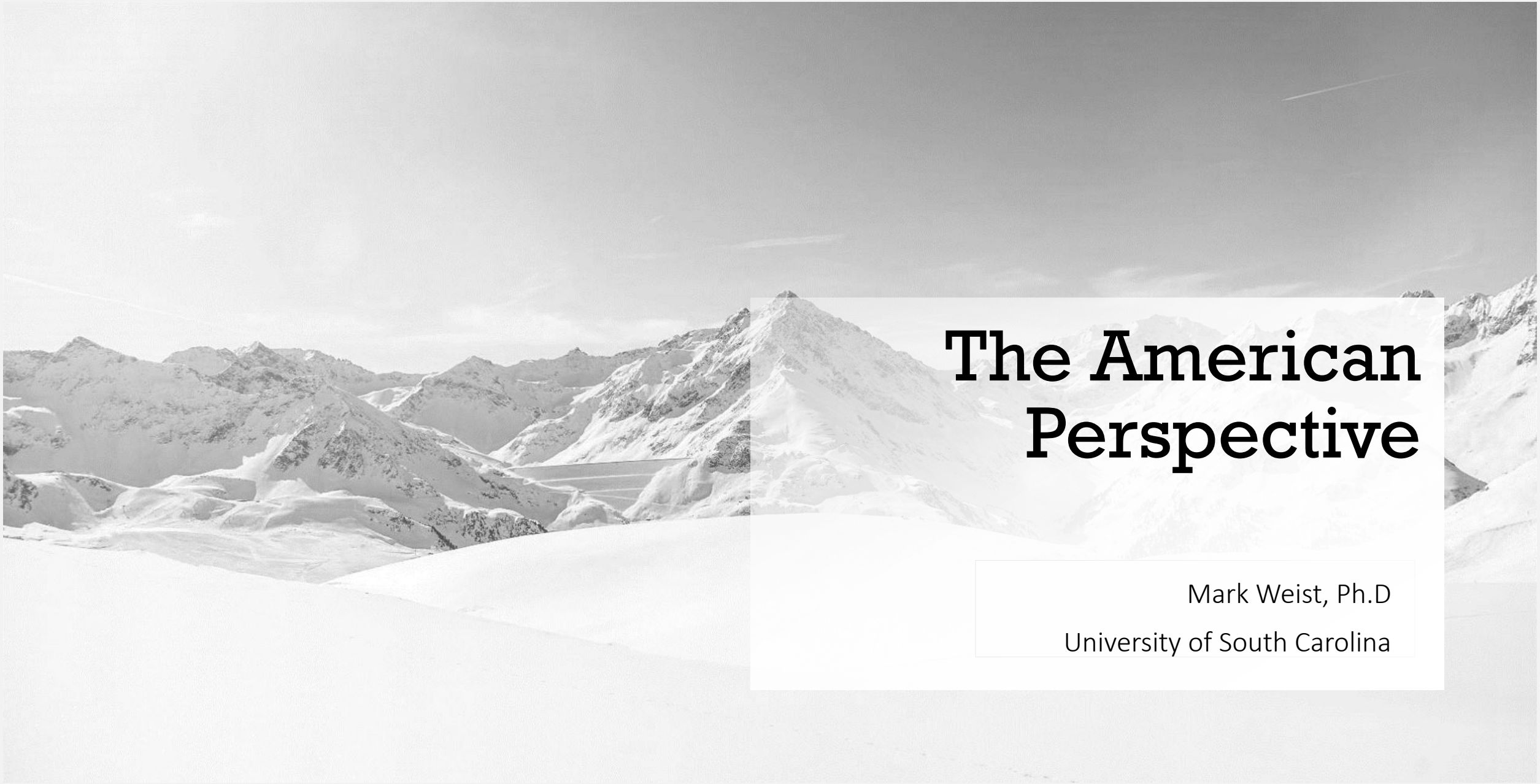
The spirit is willing, but time is limited

We are growing in sophistication re: “packaging” evidence-based, implementation-sensitive information for various knowledge audiences

It is a full time job to synthesize and share SMH information in ways that are easy to access – a lot of good learning is being lost

Technology is helpful for knowledge sharing, but insufficient for deep learning on complex topics, and can be associated with more minimal engagement

A national platform for multi-tiered systems of support in SMH, with an associated community of practice and spin-off learning communities is lacking (looking to our US counterparts with envy!)



The American Perspective

Mark Weist, Ph.D

University of South Carolina

Outline

- Expanded School Mental Health (SMH)
- Federal Support
- Interconnected Systems Framework (ISF) for SMH and Positive Behavioral Interventions and Supports (PBIS)
- ISF Key Themes (teams, alignment, district leadership, stakeholder involvement, continuum of needs and EBPs, screening)
- *Very significant need* to enhance focus on and reduce stigma
- Communities of Practice
- Resources

"Expanded" SMH

> Full continuum of effective mental health promotion and intervention for students in general and special education

> Reflecting a ***"shared agenda"*** involving school-family-community system partnerships

> Collaborating community professionals (not *outsiders*) ***augment*** the work of school-employed staff

Strong History of Federal Support for SMH in the U.S.

Systems of Care

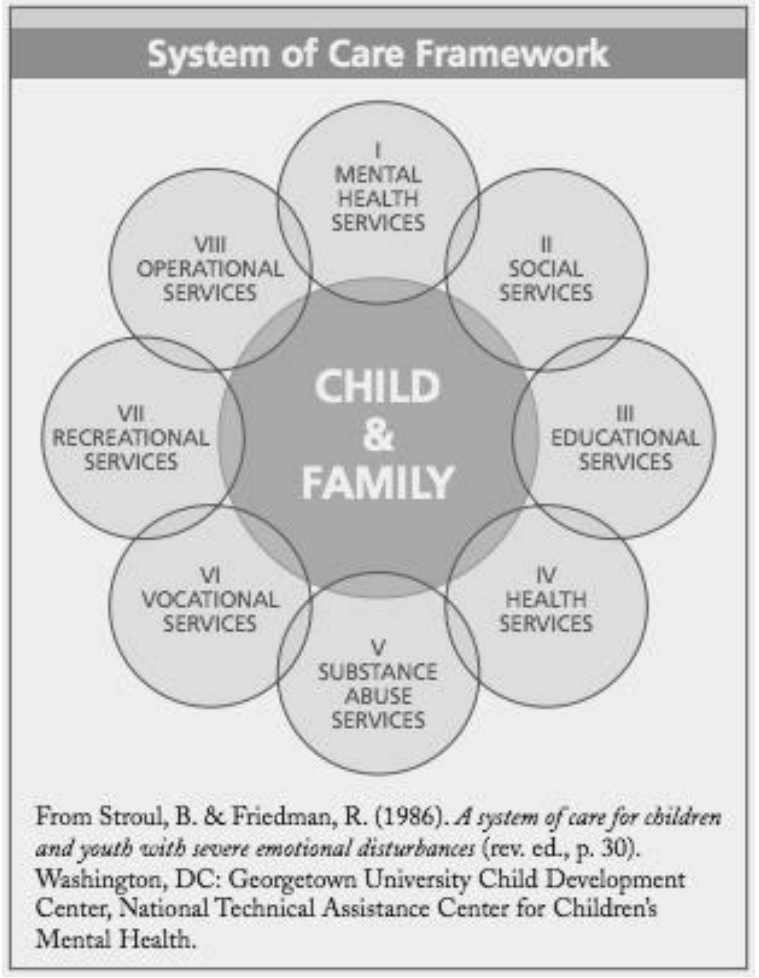
> Funder:

- Substance Abuse and Mental Health Services Administration (SAMHSA)

> Started in 1980s with significant federal funding starting in the early 1990s

> Major emphasis:

- Developing a coordinated network of community-based services and supports organized to meet physical, mental, social, emotional, educational, and developmental needs of children and their families



From Stroul, B. & Friedman, R. (1986). *A system of care for children and youth with severe emotional disturbances* (rev. ed., p. 30). Washington, DC: Georgetown University Child Development Center, National Technical Assistance Center for Children's Mental Health.

School-Based Health Centers

> Funders:

- State general funds, Health Resources and Services Administration (HRSA), Social Services Block Grant and Medicaid Match, Title V MCH Block Grant, and Tobacco Settlement

> Started in 1980s with significant federal funding starting in the early 1990s

> Major emphasis:

- Comprehensive health and mental health care in schools

Mental Health in Schools Program

> Funder:

- Maternal and Child Health Bureau, Health Resources and Services Administration

> Started in 1995

- Five states: Kentucky, Maine, Minnesota, New Mexico, South Carolina
- Two national centers: University of Maryland (UM), UCLA
- **National Center for SMH at UM going strong in its 24th year!**

> Major emphasis:

- All issues relevant to advancing effective SMH in policy, practice and research dimensions

Center for School Mental Health Assistance - 1996

CSMHA
CENTER FOR SCHOOL MENTAL HEALTH ASSISTANCE
UMAB

On The Move

with School-Based Mental Health Services

Volume 1, Number 1 Spring 1996

Promoting Mental Health Services in Schools

Mark D. Weist, PhD
Director, Center for School Mental Health Assistance

In the 1980s and 1990s, there has been much discussion and some concerted action toward reforming the mental health system of care for children and adolescents. However, significant gaps in mental health services for youth remain. Community mental health clinics are still the dominant method of addressing emotional and behavioral problems in youth; but in many cities and localities, youth in need are not connecting to services available in these clinics. At the same time, more and more questions are being raised about the appropriateness and viability of weekly outpatient visits in an artificial setting.

One method to significantly address the unmet mental health needs of youth is to place more mental health services in schools. Schools provide a single point of access to services in a familiar, non-threatening atmosphere, and placing services in them reduces barriers that constrain the provision of clinic-based mental health services to youth in need.

As recognition of these advantages has grown, so has the number of programs providing a full range of mental health services in schools across the United States. Examples of these services include: screening programs to identify youth for early mental health intervention; individual, group, and family counseling; [illegible] of youth for more intensive

decades old, to bring comprehensive health services to schools. School-based health centers (SBHCs) have witnessed tremendous growth in recent years, with nearly 700 centers now existing, and a new professional organization, the National Assembly on School-Based Health Care. In SBHCs, staff are clamoring to address mental health needs of youth, as psychosocial problems are either the most or second most frequent reason for referral.

Mark Weist

The primary goal of the Center for School Mental Health Assistance (CSMHA) is to provide practical support to SBHC staff, other school health programs, and educational staff in the

Center for School Mental Health Assistance
toll-free: (888) 706-0980

This is Mark in 1996 ☺

Safe Schools/Healthy Students

> Funders:

- U.S. Departments of Education, Justice, and Health and Human Services

> Started in 1999 following several school shootings in the late 1990s

> Major emphasis:

- Safe schools, SMH

President Obama's *Now Is The Time*

> Executive actions taken following the Sandy Hook shooting in Newtown, Connecticut in January 2013

> Major emphasis:

- Safe schools, SMH, reducing gun violence

School Climate Transformation Grants

> Funder:

- U.S. Department of Education

> Started in 2014

> Major emphasis:

- Effective MTSS, school climate, SMH

School Climate Transformation Grant

Project Prevent

> Funder:
  - U.S. Department of Education
> Started in 2014
> Major emphasis:
  - Violence prevention, SMH

Project AWARE (Advancing Wellness and Resilience in Education)

> Funder:

- Substance Abuse and Mental Health Services Administration (SAMHSA)

> Started in 2018

> Major emphasis:

- Mental health training for non MH professionals, SMH

Comprehensive School Safety Initiative

> Funder:

- National Institute of Justice (NIJ)

> Started in 2014

> Major emphasis:

- developing knowledge about the root causes of school violence, developing strategies to assure safe schools, SMH

Mental Health Technology Center Cooperative (MHTCC)

> Funder: SAMHSA

> See https://www.samhsa.gov/grants/grant-announcements/sm-18-015

Key Questions

> Much federal investment, but

> *Do programs sustain after the grant?*

> *How do we promote coherent approaches among a hodge podge of investments?*

> *How to overcome challenge of siloing in federal agencies?*

Positive Behavior Intervention and Support (www.pbis.org)

> In around 26,000 schools

> National TA Center Funded by the Office of Special Education Programs, U.S. Department of Education

> Decision making framework to guide selection and implementation of best practices for improving academic and behavioral functioning

- Data based decision making
- Measurable outcomes
- Evidence-based practices
- Systems to support effective implementation

Mapping PBIS and SMH

SC School Behavioral Health Community
Connecting Schools, Families and Mental Health

State of the Carolinas: Implementing School Mental Health and Positive Behavioral Interventions and Supports

by Joni W. Splett, Kurt D. Michael, Christina Minard, Robert Stevens, Louise Johnson, Heather Reynolds, Katharina Farber, and Mark D. Weist*

The Carolinas have a rich and diverse history. South Carolina was the first colony to declare independence from British rule during the American Revolution and the first state to declare secession from the Union at the start of the Civil War. The population of South Carolina is nearly 4.8 million. It is the 24th most populous state in the United States and has a diverse citizenry, including 64% Caucasian, 28% African-American, and 5% Hispanic residents (U.S. Census Bureau, 2012). Children and youth under the age of 18 make up 22.8% (1.08 mil

a large number (25.8%) of North Carolina's children live in poverty (Annie E. Casey Foundation & O'Hare, 2013).

Equally unfortunate, a high percentage of children attending public schools in the Carolinas perform below state standards. For example, in South Carolina, the number of children who perform below state standards in reading (17% in 3rd grade; 32% in 8th) and math (30% in 3rd grade; 30% in 8th) is substantial, and in North Carolina, the situation is considerably worse, with below-standard scores in reading at 65% in

of Mental Health (SCDMH) has one of the strongest expanded school mental health (SMH) service programs nationally, and the grassroots effort to disseminate and support implementation of Positive Behavioral Interventions and Supports (PBIS) is benefiting from recent interest, renewed energy, and federal momentum.

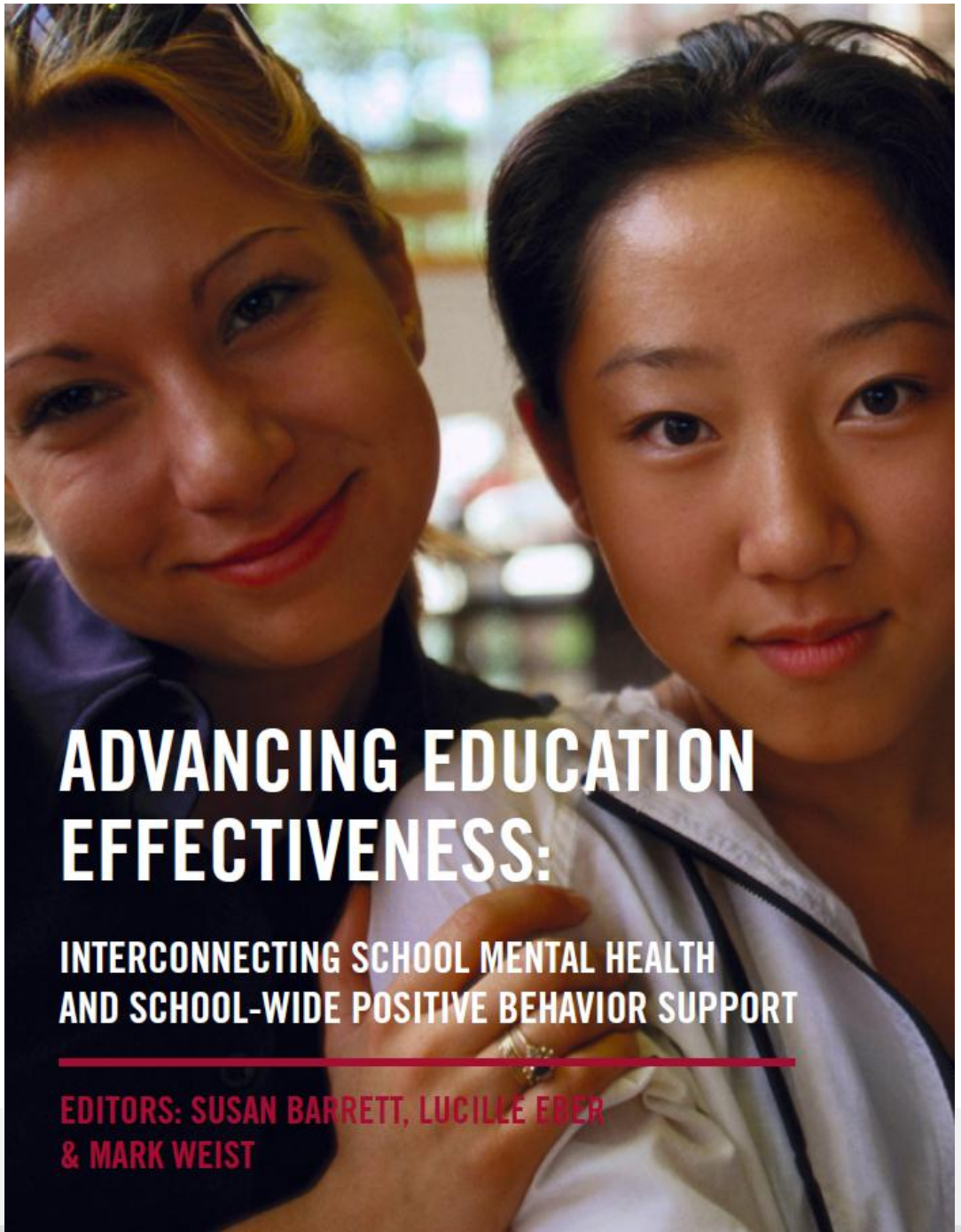
The Interconnected Systems Framework

The trends in the Carolinas mirror national trends in children's educational and men

Key Rationale

- PBIS and SMH systems often operate separately
- Results in ad hoc, disorganized delivery of SMH and contributes to lack of depth in programs at Tiers 2 and 3 for PBIS
- By joining together synergies are unleashed and the likelihood of achieving depth and quality in programs at all three tiers is greatly enhanced

Social, Health, Emotional, Behavioral and Academic (SHEBA)


ADVANCING EDUCATION EFFECTIVENESS:
INTERCONNECTING SCHOOL MENTAL HEALTH AND SCHOOL-WIDE POSITIVE BEHAVIOR SUPPORT
EDITORS: SUSAN BARRETT, LUCILLE EBER & MARK WEIST

ISF Conceptual Framework

> Improved behavioral/academic outcomes for all

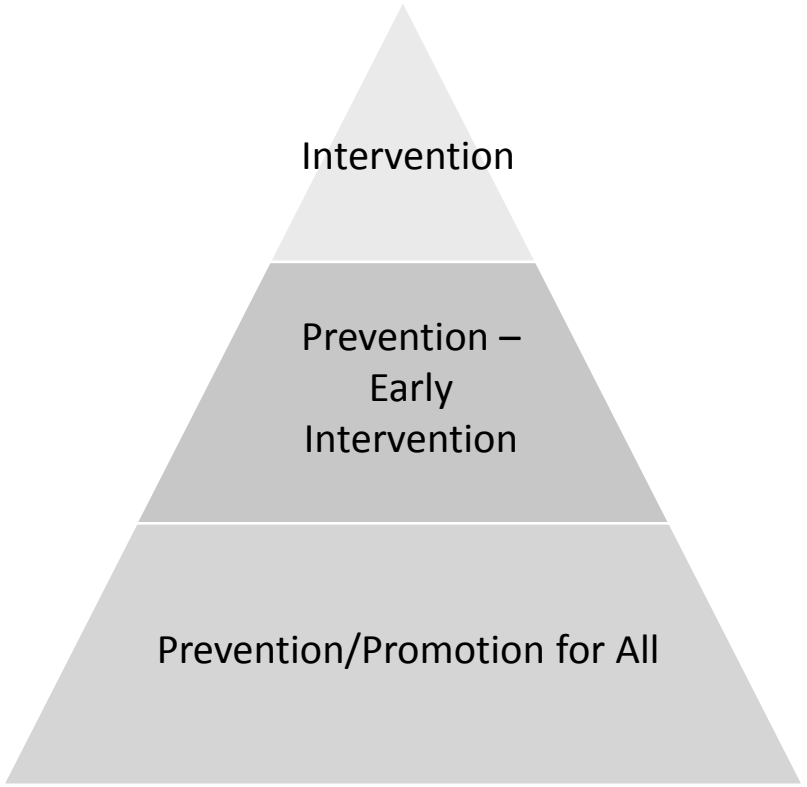
> Greater depth and quality in services

> Improved data use, team functioning

> Systematic MOAs

> Strong district/building leadership

> A SHARED AGENDA

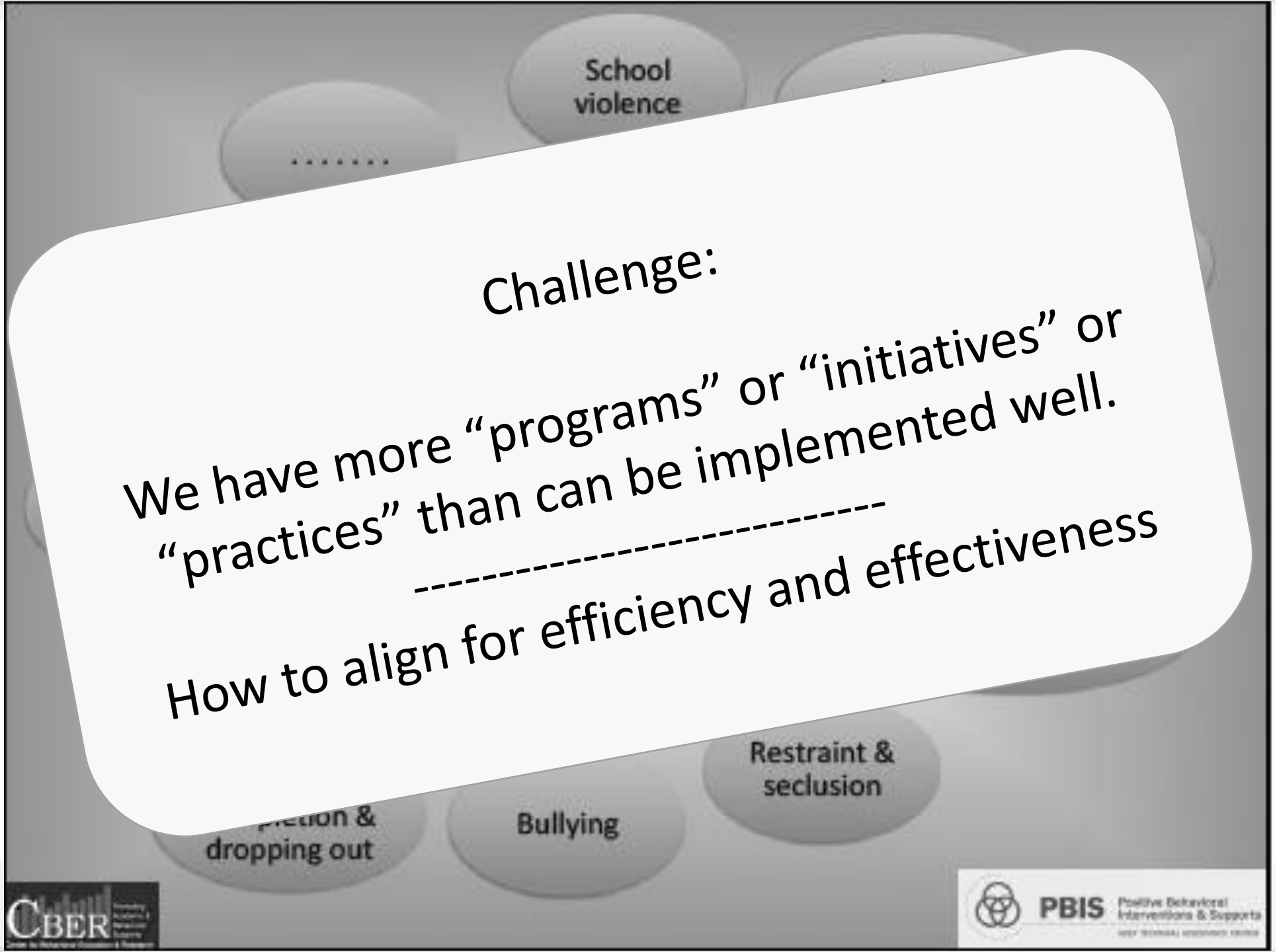


Three Connected Priorities

> Implement effective practices

> Document valued outcomes

> Build capacity


School violence
.....
Challenge:
We have more “programs” or “initiatives” or “practices” than can be implemented well.

How to align for efficiency and effectiveness
Restraint & seclusion
Bullying
dropping out
CBER
PBIS Positive Behavioral Interventions & Supports

District-Community Leadership Team

- Systems leaders (e.g., School Superintendent, MH Agency Leader)
- Those involved in ISF coaching (from EDU and MH)
- Educators (including principals) and clinicians
- Family members and older youth
- Representatives from other diverse youth-serving systems (e.g., child welfare, juvenile justice, disabilities, primary healthcare)
- Government officials
- University staff and researchers

Stakeholders (Leaders and Staff)

> Youth and Families

> Government

> Education

> Child and Adolescent Mental Health

> Juvenile Justice

> Child Welfare

> Disabilities

- Primary Healthcare
- Allied Health Universities and Colleges
- Faith
- Business
- Services
- Vocational Rehabilitation

- *Interconnecting PBIS and School Mental Health to Improve School Safety: A Randomized Trial*
  - PI Mark Weist, Co-PI Joni Splett, Co-I Colleen Halliday-Boykins, Lead Research Manager Elaine Miller
  - 2016-2019
  - *This project was supported by Award No. 2015-CK-BX-0018, awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect those of the Department of Justice.*

NIJ COMPREHENSIVE SCHOOL SAFETY INITIATIVE

Study Design

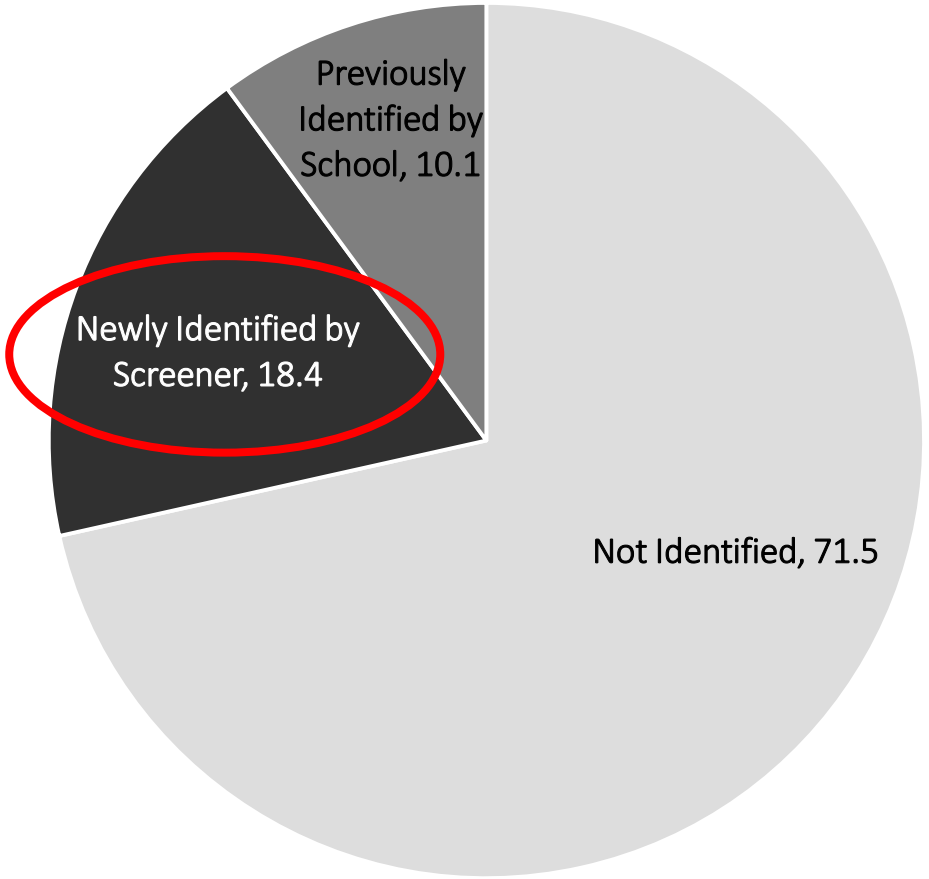
> 24 Participating Elementary Schools
  - Charleston County, SC (12)
  - Marion County, FL (12)
  - Prior to study all were implementing PBIS; none were implementing SMH
> Each school is randomized to one of three conditions
  - PBIS Only
  - PBIS + SMH (business as usual)
  - Interconnected Systems Framework (ISF)
> Intervention (ISF) in place for 2 academic years
> All students in the building are participants unless they opt of study

Splett et al. (2018)

- Used BASC-3 BESS Teacher with externalizing, internalizing, and adaptive skill subscales
- Compared students already receiving intervention to those **newly identified** by BASC-3 BESS Teacher

- Splett, J.W., *Trainor*, K., *Raborn*, A., Halliday-Boykins, C., *Garzona*, M., *Dongo*, M., & Weist, M.D. (2018). Comparison of universal mental health screening and traditional school identification methods for multi-tiered intervention planning. *Behavioral Disorders, 43(3),*344-356.

Splett et al. (2018)



180% increase in identified need with screener

Splett et al., (2018). Comparison of Universal Mental Health Screening to students already receiving intervention in a multitiered system of support. *Behavioral Disorders, 43(3),* 344-356. https://doi.org/10.1177/0198742918761339

Latent Profile Analysis - BESS

	Class 1: Elevated Behavioral-Emotional Risk	Class 2: Normal Behavior-Emotional Development	Class 3: Extreme Behavioral-Emotional Risk
Characteristics:	Moderate levels of IRI, ERI, and adaptive skills deficits	Low IRI, ERI, and high levels of adaptive skills	High levels of IRI, Extreme levels of ERI, low levels of adaptive skills
Size	1734 (29%)	3668 (61%)	577 (10%)
Internalizing Risk	4.8	2.1	7.2
Externalizing Risk	6.8	0.9	13.7
Adaptive Skill Risk	5.2	9.4	3.2

More fine-grained analysis

> Profiles of students based on patterns of emotional/behavioral and adaptive functioning

> Anxiety = A, Depression = D, Attention Problems-Hyperactivity = APH, Conduct-Aggression = CA, Adaptive = AD

More fine-grained analysis 2

- From most to least in need
- A,D, APH, CA and low AD
- A,D,APH, and low AD
- A,D, and low AD
- A,D,APH and higher AD
- A,D, and higher AD
- A and higher AD
- Etc.

Stigma is Pervasive

> Language that is institutionalized compounds the problem

- For example, use of terms like *emotional disturbance*, *psychopathology* and many diagnostic labels (*bi-polar disorder*, *borderline personality disorder*, *conduct disorder*, *narcissistic personality disorder*)

Patient-Centered Enhancements (PCEs) in School Behavioral Health: A Randomized Trial

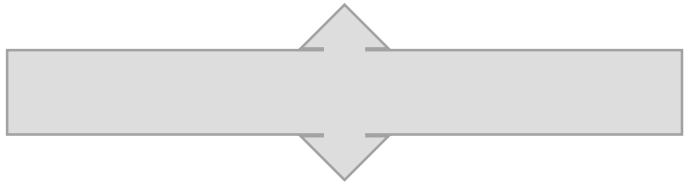
> Five year (3.8.19-3.7.24) randomized controlled trial funded by the Patient-Centered Outcomes Research Institute (PCORI)

> PI - M. Weist, Co-PI - S. Hoover

> 10 middle schools in Baltimore, 10 in Myrtle Beach

> At each site 5 randomized to PCEs of enhancing family-school-MH system partnerships, and mental health literacy/stigma reduction

Systematic
Agenda



Relationships

Children's Mental Health Awareness Week, 2007

Communities of Practice

"Communities of practice are groups of people who share a concern, a set of problems, or a passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis" (p.4)

Wenger, E., McDermott, R., & Snyder, W.M. (2002). *Cultivating communities of practice: A guide to managing knowledge.* Boston: Harvard Business School

Leading by Convening

Creating conditions for groups with common interests to be actively engaged and move from discussion to dialogue to collaboration to policy improvement and enhanced resources

Joanne Cashman & Bill East, National Association of State Directors of Special Education (2014)

Multiscale Learning

> People with common interests interacting at multiple levels, within and across

- Teams
- Schools
- Districts/Communities
- Regions within States
- States
- Regions of States
- Countries

OSEP Technical Assistance Center on PBIS

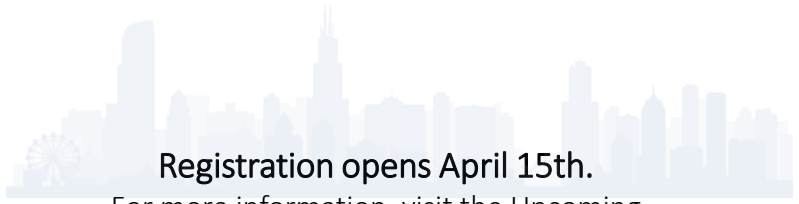
2019 National PBIS Leadership Forum

SAVE THE DATE

PBIS: Supporting Our Most Vulnerable Children & Youth

OCTOBER 3-4, 2019

Chicago, Illinois



Registration opens April 15th.

For more information, visit the Upcoming Events page at www.pbis.org in March.

The National PBIS Leadership Forum is a technical assistance activity of the OSEP Technical Assistance Center on PBIS and provides an opportunity for the Center to share information on the latest applications of PBIS. Center Partners select and organize conference strands, select session topics, and invite session leaders based on content area expertise. Session leaders invite exemplar presenters from sites known to be implementing specific applications of PBIS. Exemplar presenters are often identified from sites participating in the previous year's poster presentation.

This two-day forum for school, state, district, and regional Leadership Teams and other professionals has been designed to increase the effectiveness of PBIS implementation.

Sessions are organized by strands that support initial through advanced implementation in a full range of education settings, and assist state level planning to improve school quality and student success. Featuring sessions specific to Juvenile Justice, Alternative Educational Settings, Mental Health, and Family partnerships.

National Center for School Mental Health

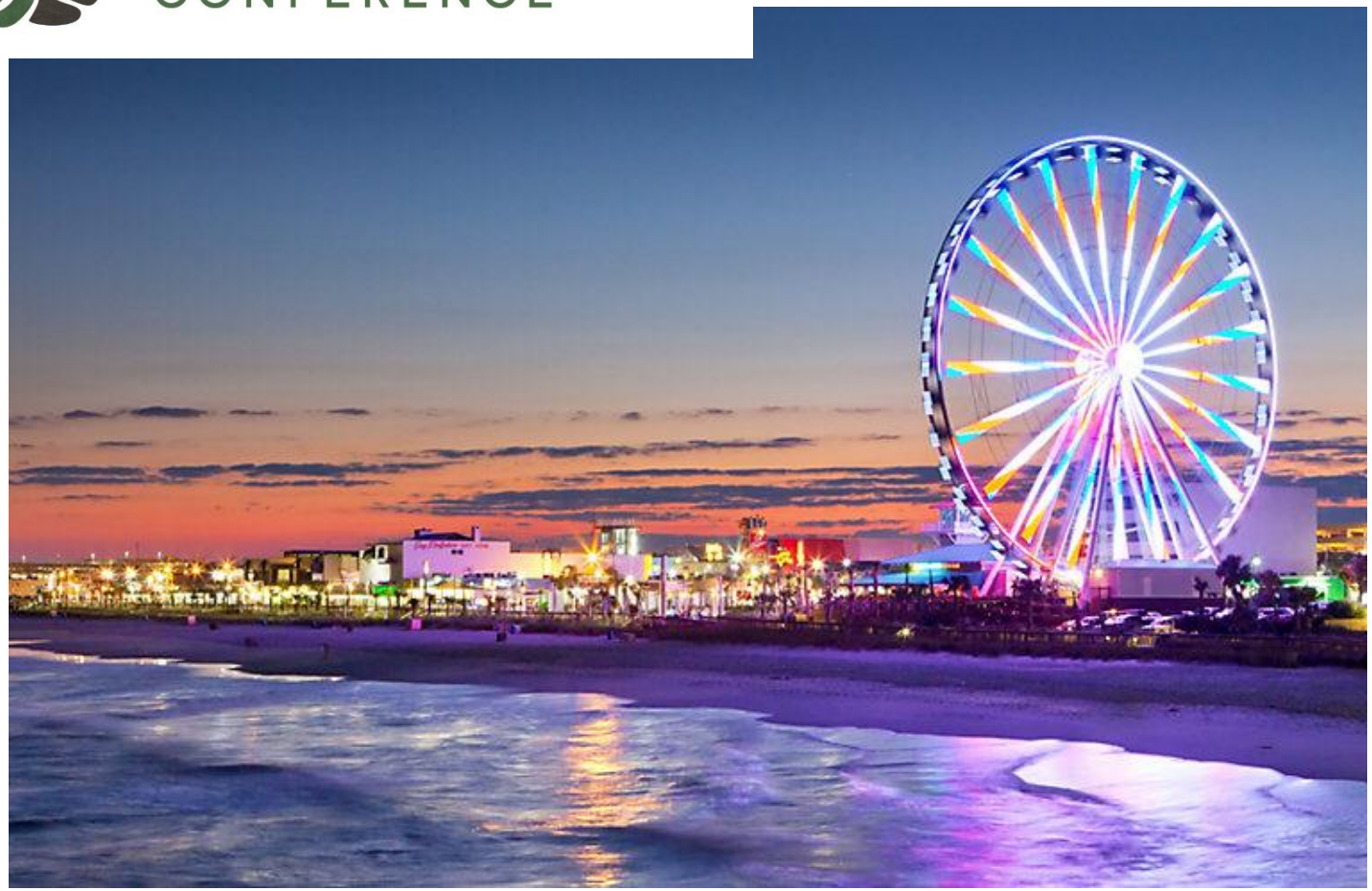
> http://csmh.umaryland.edu

> www.theshapesystem.com

> Next annual conference - Austin, Texas, November 7-9, 2019

SOUTHEASTERN
SCHOOL BEHAVIORAL HEALTH
COMMUNITY

SOUTHEASTERN
SCHOOL BEHAVIORAL HEALTH
CONFERENCE



Thank you

- kshort@hwdsb.on.ca
- weist@sc.edu

Common Themes, Kathy and Mark

- Integrating into schools' multi-tiered system of support (MTSS)
- Effective implementation of EBPs
- Increasing stakeholder environment (especially for youth and families) and decreasing stigma
- Multi-level leadership