Advancing PREVENTION SCIENCE THROUGH POSITIVE YOUTH DEVELOPMENT

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NATIONAL CLINICAL & COMMUNITY-BASED SERVICES CONFERENCE

Learning Objectives

- Compare and contrast current School-Based Health practices with Whole Health and Wellness Approaches that fully integrate the full continuum of behavioral health care.

- Discuss current community gaps and success stories around Whole Health and Wellness Approaches that fully integrate the full continuum of behavioral health care.

- Identify and discuss Prevention Science within the context of School-Based Positive Youth Development, Positive Behavioral Intervention and Supports, and an Interconnected Systems Framework.

- Discuss the implementation science of designing for a full continuum of behavioral health care within a School-Based Whole Health and Wellness framework that can reduces risk, promote resiliency, and learning.

- Identify and discuss Prevention Science within the context of School-Based Positive Youth Development, Positive Behavioral Intervention and Supports, and an Interconnected Systems Framework.
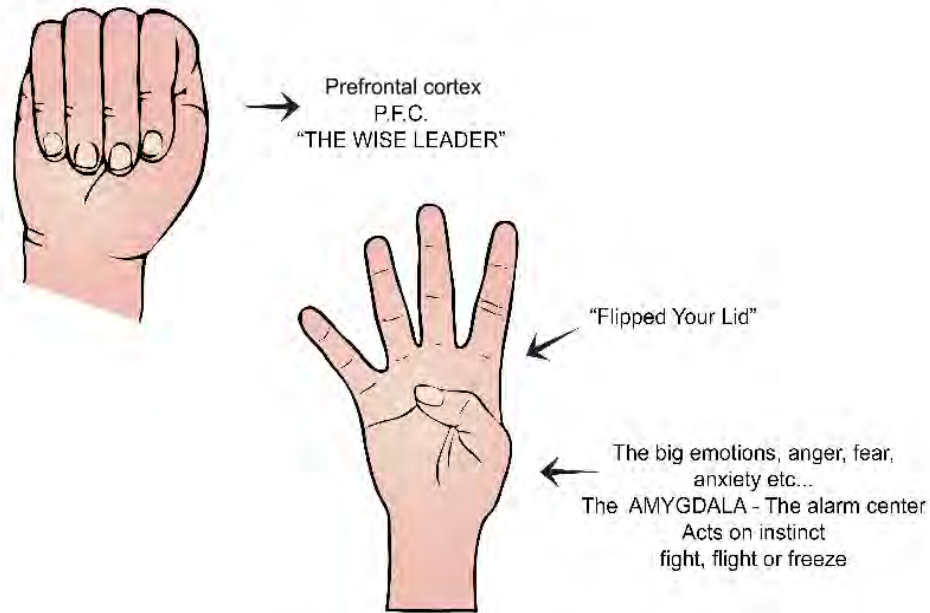
Trauma-informed schools create and maintains a whole-school culture that ensures students and staff members feel safe and supported

- Trauma-informed school: *Realizes* both the widespread impact of trauma and the role of schools in promoting resiliency
- *Recognizes* the signs and symptoms of trauma in students, family, and staff
- *Responds* to fully integrating knowledge about trauma into policies, procedures, and practices
- *Resists* re-traumatization of students and staff and fosters resiliency

Neurobiology
Helps us understand how our brain development and functions are impacted by toxic stress/trauma
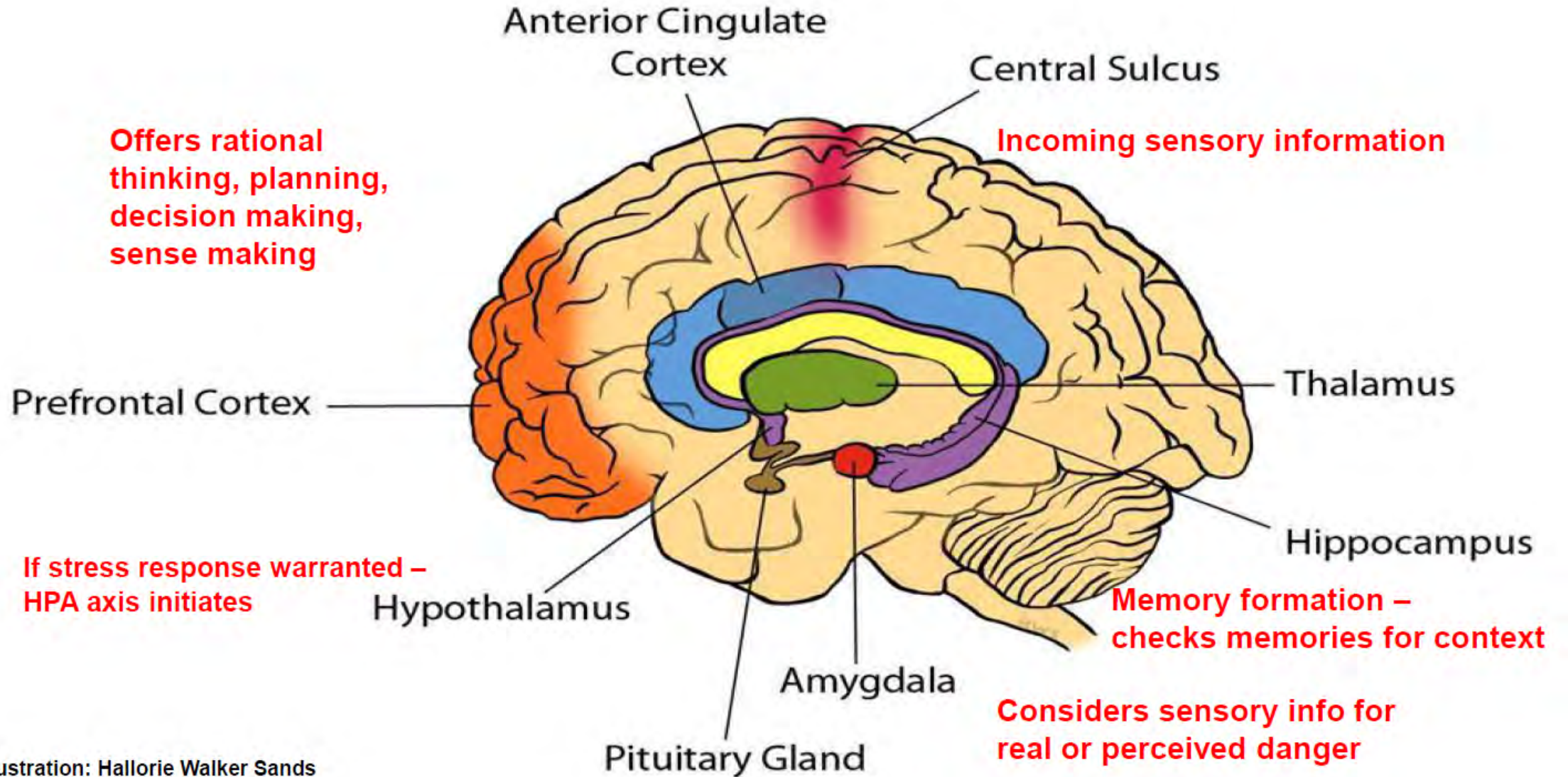
"Flipping One's Lid"

Prefrontal cortex
P.F.C.
"THE WISE LEADER"

"Flipped Your Lid"

The big emotions, anger, fear, anxiety etc...
The AMYGDALA - The alarm center
Acts on instinct
fight, flight or freeze

Credit: Daniel Siegel, M.D. is the creator of this metaphor and expression "Flipped Lid". Copyright © 2014 www.sharonselby.com

Sharon Selby © 2015 www.SharonSelby.com

Challenges with:

- Memory
- Communication
- Sensory regulation
- Executive functioning
- Regulation

In Survival Mode – assessing threat constantly

Brain Structures Involved…

Anterior Cingulate Cortex

Central Sulcus

Offers rational thinking, planning, decision making, sense making

Incoming sensory information

Prefrontal Cortex

Thalamus

If stress response warranted – HPA axis initiates

Hypothalamus

Hippocampus

Memory formation – checks memories for context

Amygdala

Pituitary Gland

Considers sensory info for real or perceived danger

Illustration: Hallorie Walker Sands

Impact of Trauma

- Relational

- Emotional Reactions
  - Feelings – emotions, regulation
  - Alteration in consciousness
  - Hypervigilence

- Psychological and Cognitive Reactions
  - Concentration, slowed thinking, difficulty with decisions, blame

- Behavioral or physical
  - Pain, sleep, illness, substance abuse,

- Beliefs
  - Changes your sense of self, others, world
  - Relational disturbance

Neurobiology and Trauma

- **Neuro biology of habit** is in the basal ganglia having two main types of paths carrying opposing messages: one carries a 'go' signal which spurs action, the other a 'stop' signal.

- **Neuroplasticity** enables the child to adapt to environmental change and is important as we think about the impact of trauma on brain development and children's healing.

How can broader exposure to Positive Youth Development, Creative Arts, and Culturally Based Programs and Services offer hope in fostering healing with complex community, family, and individual trauma?

School Based Health Center

- SCHOOL NURSE

  - Employed by school/school district/ESD

  - Manages student immunizations program

  - Coordinates screenings

  - Chronic school health case management

  - Manage chronic medication delivery during school

  - Oversees school health programs

  - FERPA regulated

- SBHC

  - Employed by medical organization

  - Administers immunizations

  - Conducts screenings, physical exams

  - Care of both acute and chronic needs

  - Administer and prescribe medications

  - Counseling, prevention and wellness promotion

  - HIPPA regulated

  - Certified by the State

  - Fully integrated Whole Child Care

School-Wide Multi-Tiered Supports: An Interconnected Systems Framework Model (ICSF) – Positive Behavior Intervention and Supports (PBIS)

Behavioral Health & Wellness Systems

Level 1:Tertiary Definitions   1-5%
- High (at-risk) students (SI, etc.)
- Assessment-based/Wrap around/CANS, highly individualized
- High intensity (intensive/day/residential tx)

Level 2:Secondary Interventions 5-15%
- Moderate (at-risk) students
- Assessment-based, CANS
- High efficiency
- Rapid response for access
- Small group interventions
- Individualized

Level 3:Primary Prevention 80-90%/Targeted Prevention
- All students (universal)
- Individualized for students around risk factors
- Preventive, proactive
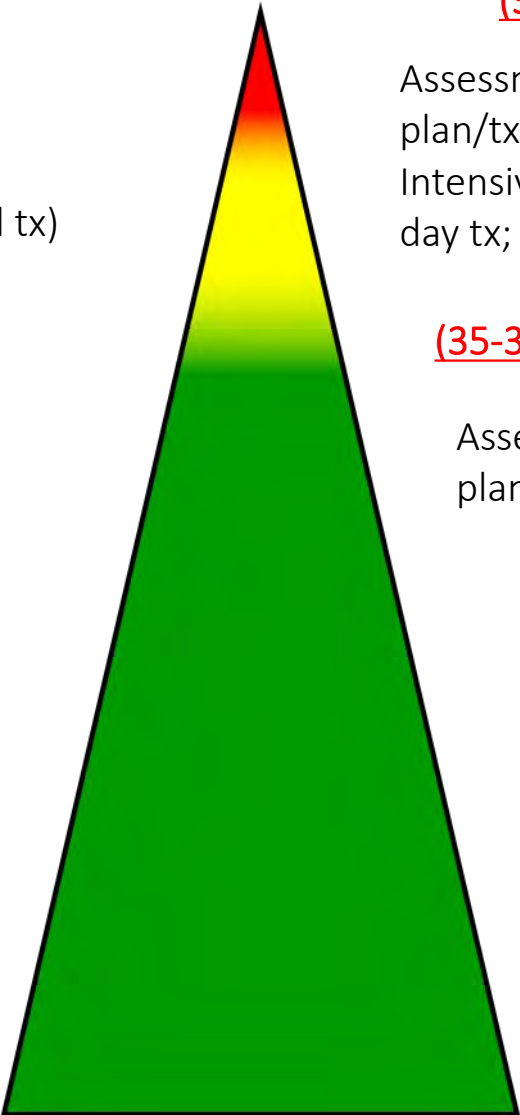
(35-44% CBHC) Level 1:Tertiary Interventions

Assessment/service plan/tx (ind/group) Intensive outpatient; day tx; residential tx

Music, Art, Eco Therapy (contract); **FC Transitions;** Rec therapy; targeted prevention/community integration
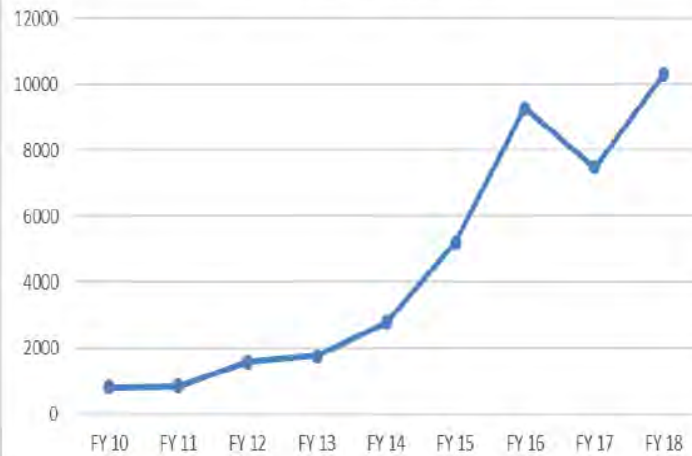
(35-38% CBHC) Level 2:Secondary Interventions

Assessment/service plan/tx (ind, group

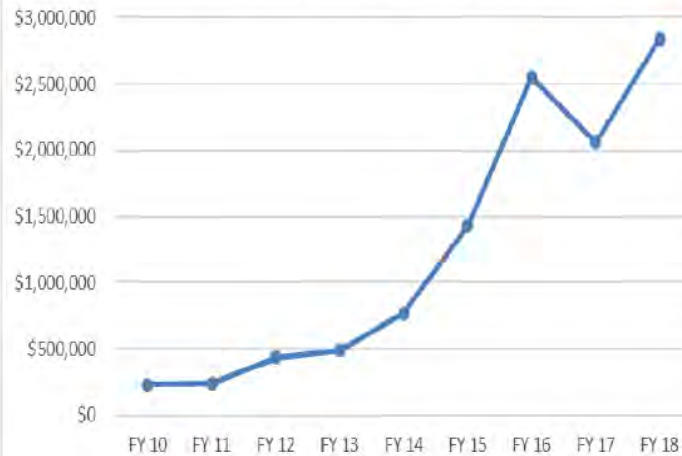Music Therapy; Art Therapy; Eco-Therapy (**contrac**t);Rec Therapy; equine

100% Level 3:PrimaryPrevention/Targeted Prevention 30-40%
100% needs/preferences;
100%BH Screening; 100% Safety Assessment (ASQ); 100% Positive Peer/SEL, Project Venture Prevention; Targeted Prevention SELLEAD; Positive Youth Development (peer court; youth coalition; Personal Health/Wellness "Lets Move"; Cultural Arts; NWYC; Healthy Relationships; SA Prevention, etc.
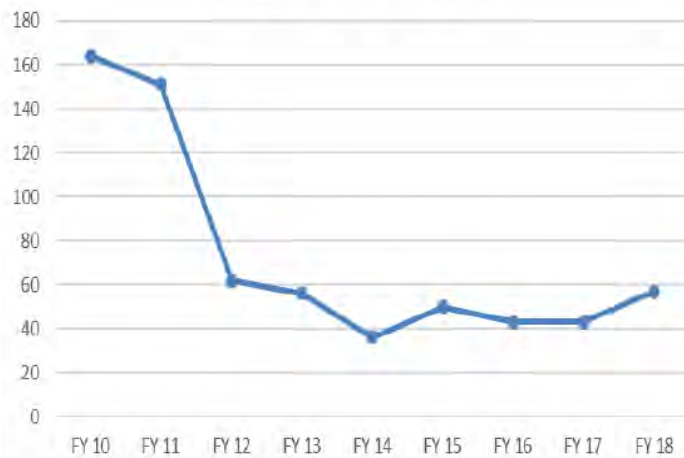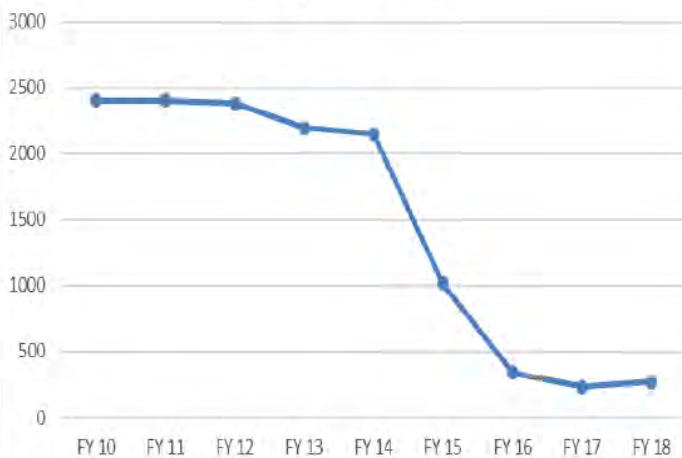
Behavioral Health Access

FY	Value
FY 10	~800
FY 11	~800
FY 12	~1500
FY 13	~1700
FY 14	~2700
FY 15	~5200
FY 16	~9200
FY 17	~7400
FY 18	~10300

Behavioral Health Revenue

FY	Value
FY 10	~$200,000
FY 11	~$220,000
FY 12	~$440,000
FY 13	~$480,000
FY 14	~$750,000
FY 15	~$1,450,000
FY 16	~$2,550,000
FY 17	~$2,050,000
FY 18	~$2,800,000

Drug & Alcohol Incidents

FY	Value
FY 10	~164
FY 11	~151
FY 12	~61
FY 13	~56
FY 14	~36
FY 15	~50
FY 16	~43
FY 17	~42
FY 18	~57

Discipline Referrals

FY	Value
FY 10	~2400
FY 11	~2400
FY 12	~2380
FY 13	~2200
FY 14	~2130
FY 15	~1010
FY 16	~340
FY 17	~230
FY 18	~280

- *"The Commission found compelling research sponsored by OSEP on emotional and behavioral difficulties indicating that **children at risk for these difficulties could also be identified through universal screening** and more significant disabilities prevented through classroom-based approaches involving positive discipline and classroom management."*

Source: U.S. Department of Education Office of Special Education and Rehabilitative Services. (2002). *A New Era: Revitalizing Special Education for Children and Their Families*

Rationale:
Student Benefits Associated with Universal Screening

- Student Wellness Plan

- Universal Screening

  - PHQ-9

  - GAD 7

  - CRAFFT

- Safety Assessment (Ask about Suicide Questions (ASQ))

- Next steps: Collaborative Assessment & Management of Suicidality(CAMS)

- Full Circle Survey/School Climate

- Trauma Responsive School Climate

- Youth Focus Groups/Co-design

- Rapid Assessment for Adolescent Prevention Services

- Next steps:

  - Adapt the Strengths Deployment Inventory (SDI) to support Social Emotional Learning and Strengths-Based School climate/culture

  - BH Family of Measures (Student-centered; equity, effective, efficient, safe, and timely)

Screening and Survey Tools

"Untreated emotional problems have the potential to create barriers to learning that interfere with the mission of schools to educate all children." (Adelman & Taylor, 2002)

"Without early intervention, children who routinely engage in aggressive, coercive actions, are likely to develop more serious anti-social patterns of behaviors that are resistant to intervention." (Walker, Ramsey, & Gresham, 2004)

Youth who are the victims of bullying *and* who lack adequate peer supports are vulnerable to mood and anxiety disorders (Deater-Deckard, 2001; Hawker & Boulton, 2000)

"Depressive disorders are consistently the most prevalent disorders among adolescent suicide victims (Gould, Greenberg, Velting, & Shaffer, 2003)

Rationale:
Poor outcomes associated with delaying intervention

What is Implementation Science?

- Explores the barriers to successful interventions

- Evolved from the failure to transfer evidence based interventions into real world contexts.

- Focus on the implementation science fidelity instead of an outcome measure. <u>Implementation fidelity refers to the degree to which an intervention or programme is delivered as intended.</u>

- Utilizes a project management (stages/phases) and improvement science approach to advancing known best practices/evidence based practices.

- Not intended to be rigid, but adaptive to advance best practices.

Stage 1: Getting Ready for Change
(Exploration and adaptation)

Creating an implementation team
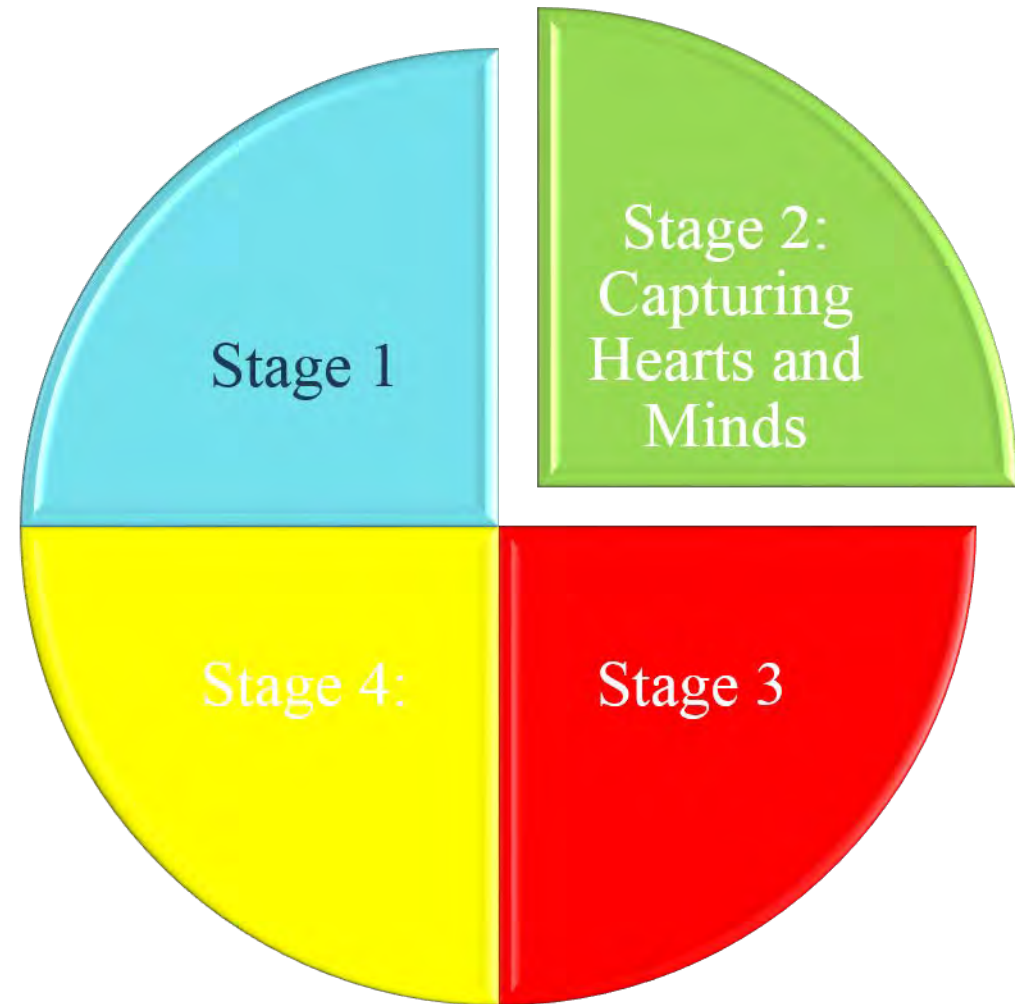
Developing a clear vision

Readiness and commitment

Stage 4:

Stage 1: Getting ready for change
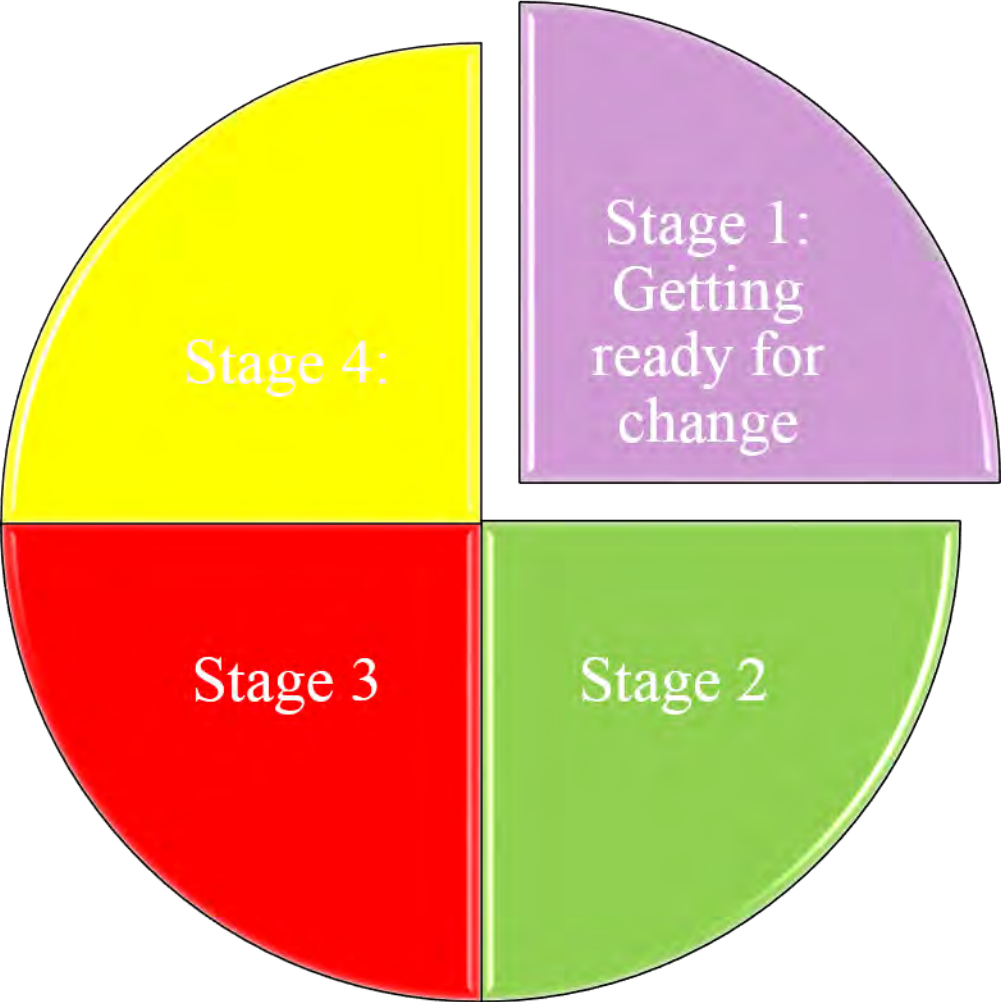
Stage 3

Stage 2

Stage 2: Capturing Hearts and Minds

Sharing the vision

Building knowledge & under-standing

Organizational structures

Stage 4: Making it Natural
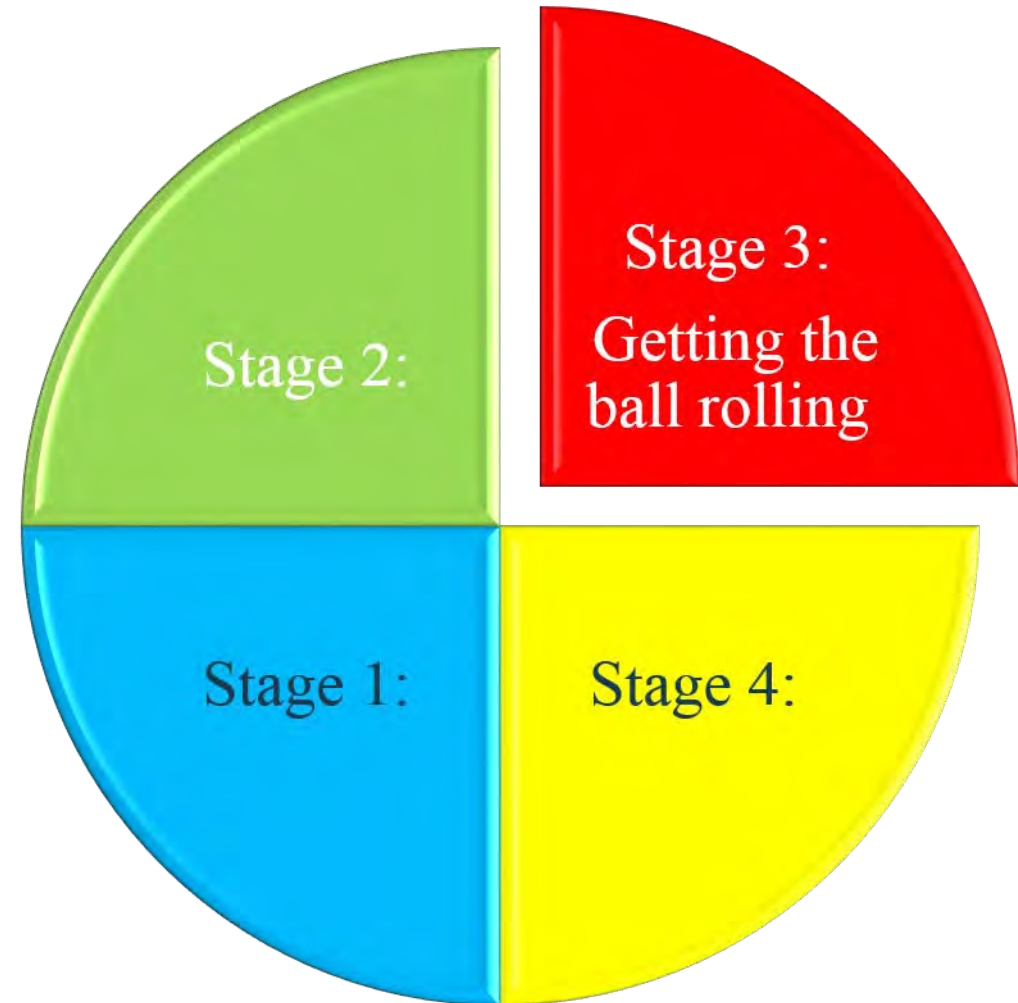
(Full Implementation)

Monitoring & reviewing

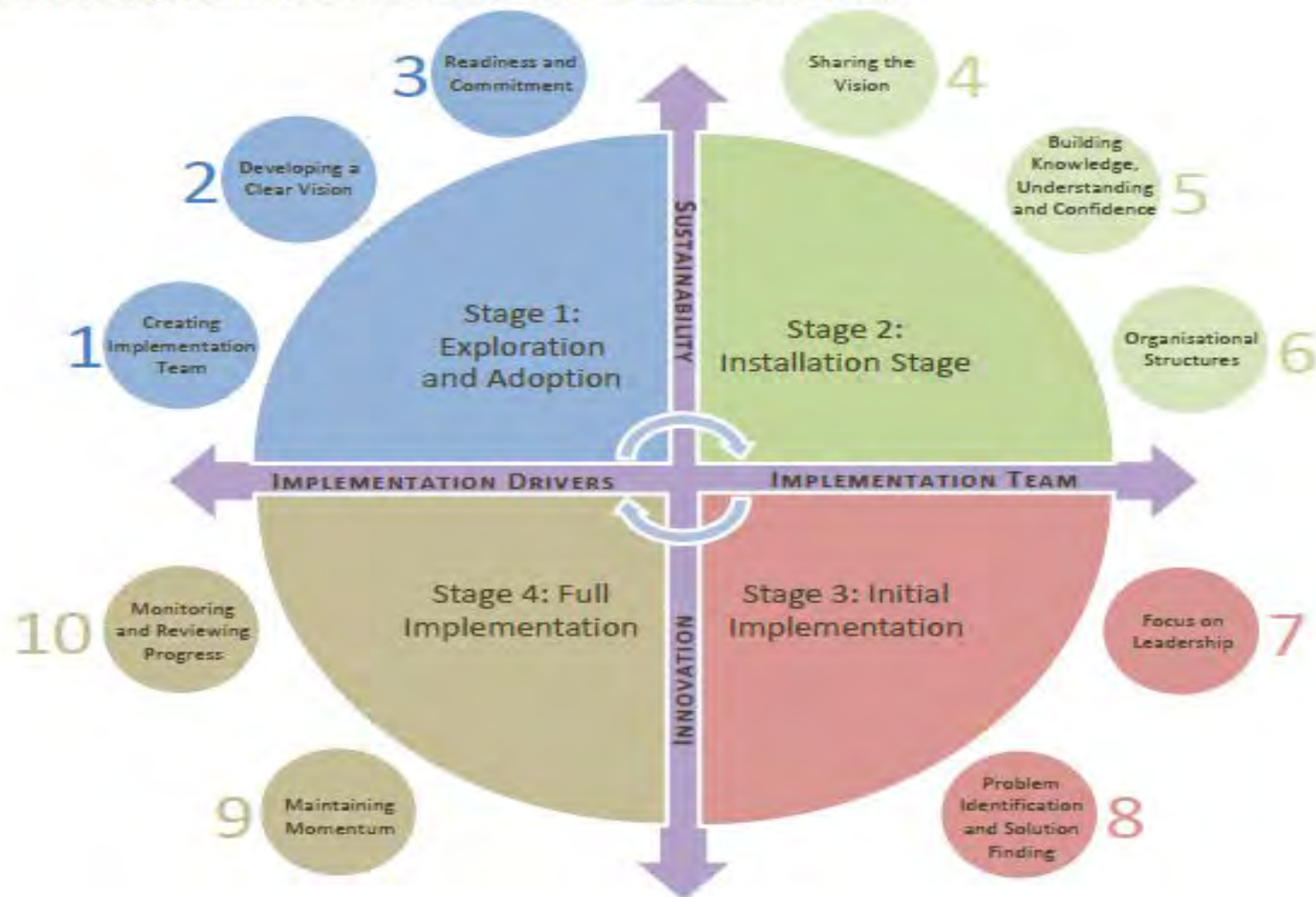Maintain momentum

Stage 3

Stage 4: Making it natural

Stage 2

Stage 1
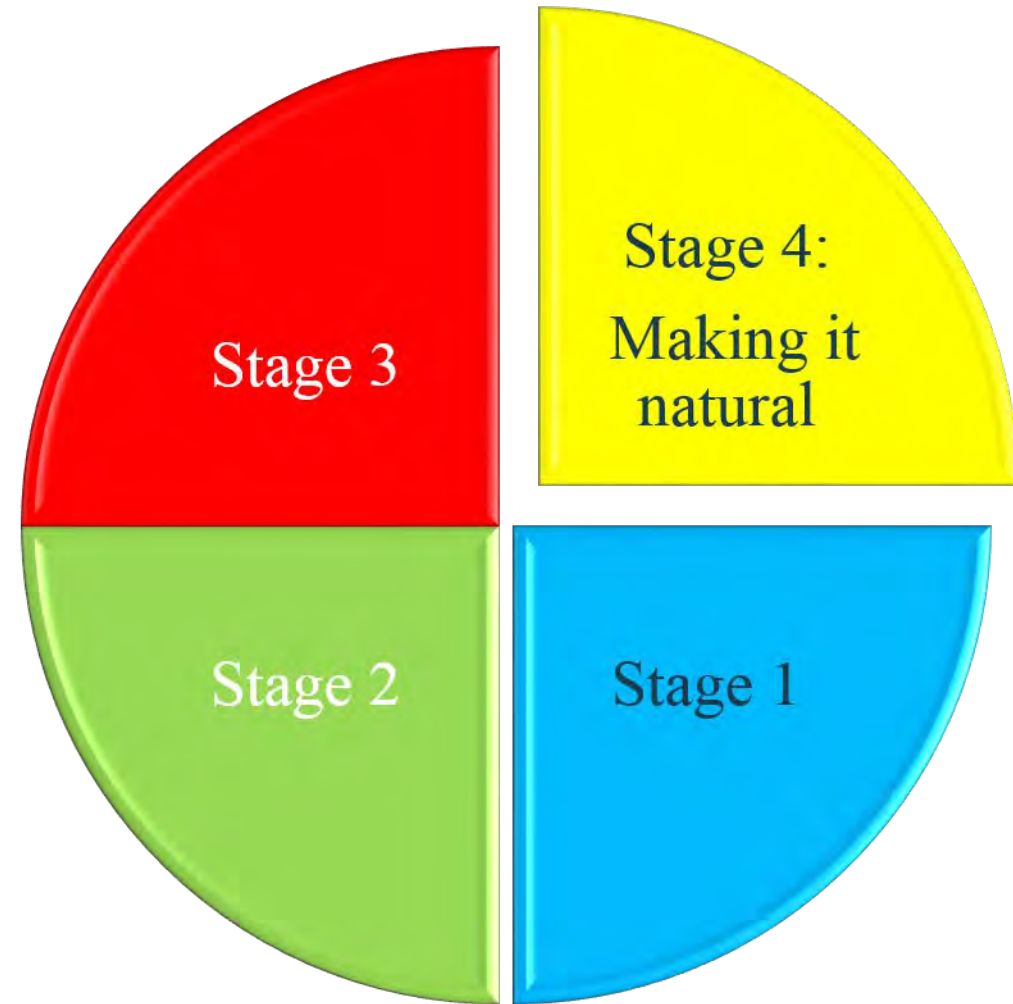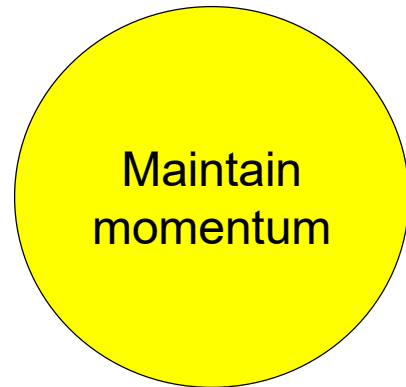
Implementing Whole Child School-Based Healthcare Example

Implementing New Interventions — Whole School Implementation Planning

1 Creating Implementation Team
2 Developing a Clear Vision
3 Readiness and Commitment
4 Sharing the Vision
5 Building Knowledge, Understanding and Confidence
6 Organisational Structures
7 Focus on Leadership
8 Problem Identification and Solution Finding
9 Maintaining Momentum
10 Monitoring and Reviewing Progress

Stage 1: Exploration and Adoption
Stage 2: Installation Stage
Stage 3: Initial Implementation
Stage 4: Full Implementation

SUSTAINABILITY
INNOVATION
IMPLEMENTATION DRIVERS
IMPLEMENTATION TEAM

Advancing Prevention Science through Positive Youth Development

- According to the Institute of Medicine Report, 2009, "Prevention Science provides the knowledge to help children, youth and families to live healthy, happy, and productive lives." Advancing Prevention Science becomes even more urgent when it comes to serving the most vulnerable. Suicide, substance abuse, and complex trauma exposure disproportionately impacts American Indian and Alaska Native (AI/AN) youth.

- According to SAMHSA, prevention efforts that use a Positive Youth Development (PYD) framework can address both risk and protective factors in a more balanced and holistic way.

Positive Youth Development

PYD is an intentional, prosocial approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances young people's strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths.

PYD Categories

- Social Emotional Learning Programs;

- Health, Fitness, and Nutrition Programs;

- Personal Leadership Development Programs;

- Service Learning; and

- Experiential learning

7 C's Focus areas of development

- Competence; Confidence; Caring; Connection; Contribution; Character; and **Culture**

Source: youth.gov

The Positive Youth Development (PYD) approach draws on the wisdom and strengths of AI/AN culture

- Within cultures of the United States, Native American youth with a high sense of cultural identity and self-esteem displayed lower levels of alcohol and drug use.

- The use of traditional American Indian/Alaska Native values through activities, such as storytelling, have shown success in decreasing substance abuse among these youth.

- Key PYD program components have been shown by CDC to reduce substance abuse, suicide, and violence risk and promotes protective factors

AI/AN Positive Youth Development Programs listed in SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP)

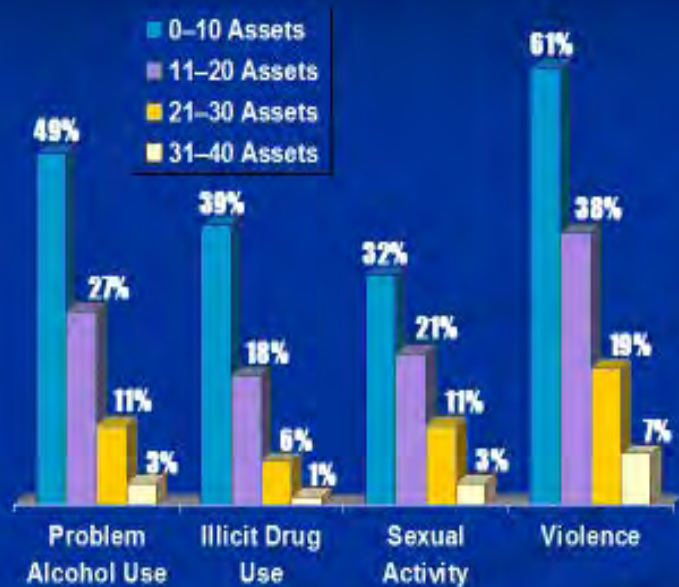- American Indian Life Skills Development Program
- Family Spirit
- Project Venture
- Red Cliff Wellness School Curriculum
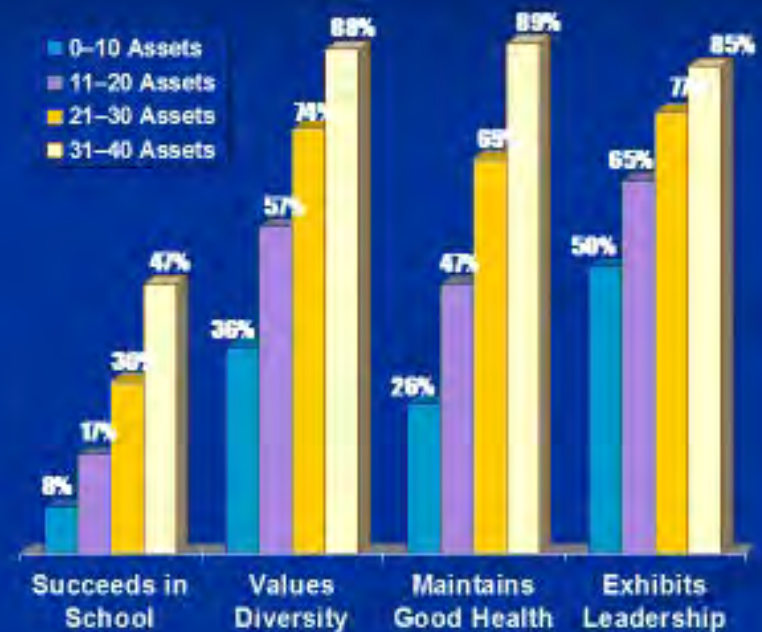
Other Recognized Programs

- Native H.O.P.E.
- Wiconi Ohitika (Strong Life) Suicide Prevention Project
- Arrowhead Business Group Apache Youth Entrepreneurship Program
- The Healing of the Canoe Project (HOC)

Search Institute: Developmental Assets

SEL is...
The process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.

Social and Emotional Learning (SEL)

SELF-AWARENESS
- Identifying emotions
- Self-perception/Identity
- Recognizing strengths
- Sense of self-confidence
- Self-efficacy

SOCIAL AWARENESS
- Perspective-taking
- Empathy
- Appreciating diversity
- Respect for others

RELATIONSHIP SKILLS
- Communication
- Social engagement
- Building relationships
- Working cooperatively
- Resolving conflicts
- Helping/Seeking help

SELF-MANAGEMENT
- Impulse control
- Stress management
- Self-discipline
- Self-motivation
- Perseverance
- Goal-setting
- Organizational skills

RESPONSIBLE DECISION-MAKING
- Identifying problems
- Analyzing situations
- Solving problems
- Evaluating
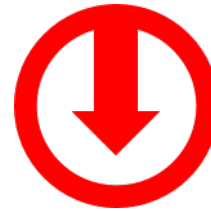- Reflecting
- Ethical responsibility

SEL works: Compelling national evidence

Science Links SEL to Student Gains:

- Better social-emotional skills
- Improved attitudes about self, others, and school
- Positive classroom behavior
- 11 percentile-point gain on standardized achievement tests

- Fewer conduct problems
- Less emotional stress
- Lower drug use

…and adults benefit too

Teachers who possess social and emotional competencies are **more likely to stay in the classroom longer** because they're able to work more effectively with challenging students —one of the main causes of burnout.

Statistically significant associations between measured social-emotional skills in kindergarten and key young adult outcomes across multiple domains of **education, employment, criminal activity, substance use, and mental health**.

CASEL

Science Links SEL to Student Gains:
Landmark study documented multiple benefits of SEL

2011 meta-analysis of 213 studies involving school-based, universal SEL programs including over 270,000 students in K-12 revealed:

Science Links SEL to Student Gains:

- ✓ Social-emotional skills

- ✓ Improved attitudes about self, others, and school

- ✓ Positive classroom behavior

- ✓ 11 percentile-point gain on standardized achievement tests

Reduced Risks for Failure:

- ✗ Conduct problems

- ✗ Emotional distress

Source: Durlak, J.A., Weissberg, R.P., Dymnicki, A.B., Taylor, R.D., & Schellinger, K. (2011) The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. Child Development: 82 (1), 405-432.

CASEL

SEL works: Strong return on investment

The **average return on investment** for six evidence-based programs is

11 to 1

meaning for every dollar invested there is an $11 return, savings from costs not incurred for intervention

Source: Belfield, C., Bowden, B., Klapp, A., Levin, H., Shand, R., & Zander, S. (2015). The Economic Value of Social and Emotional Learning. New York: Center for Benefit-Cost Studies in Education.

The Whole School, Whole Community, Whole Child (WSCC) Model

- The Whole School, Whole Community, Whole Child (WSCC) model is an ecological approach to learning and health.

- WSCC was created by combining the following:

  - ASCD's (Association for Supervision and Curriculum Development) Whole Child Initiative

  - Center for Disease Control's (CDC) Coordinated School Health Model

- [WSCC Video](#)

CD

CDC: Whole School, Whole Community, Whole Child Model (WSCC)

Whole Child Initiative

- ASCD's Whole Child Initiative is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.

Coordinating Policy, Process, & Practices

- The white band of the WSCC Model.
- The white band represents the coordination of the school, health and community sectors to align policy, process and practice to support a child's learning and health.

Coordinated School Health Model

- CDC's Coordinated School Health (CSH) Model has been the blueprint for integrating health-promoting practices in the school setting.
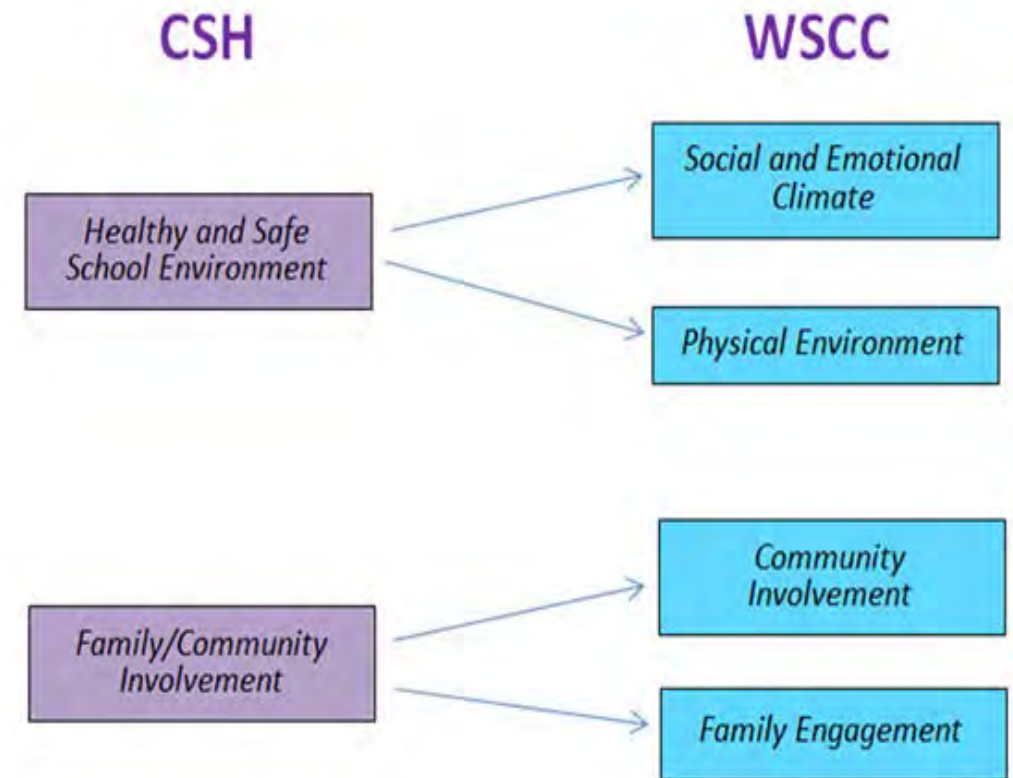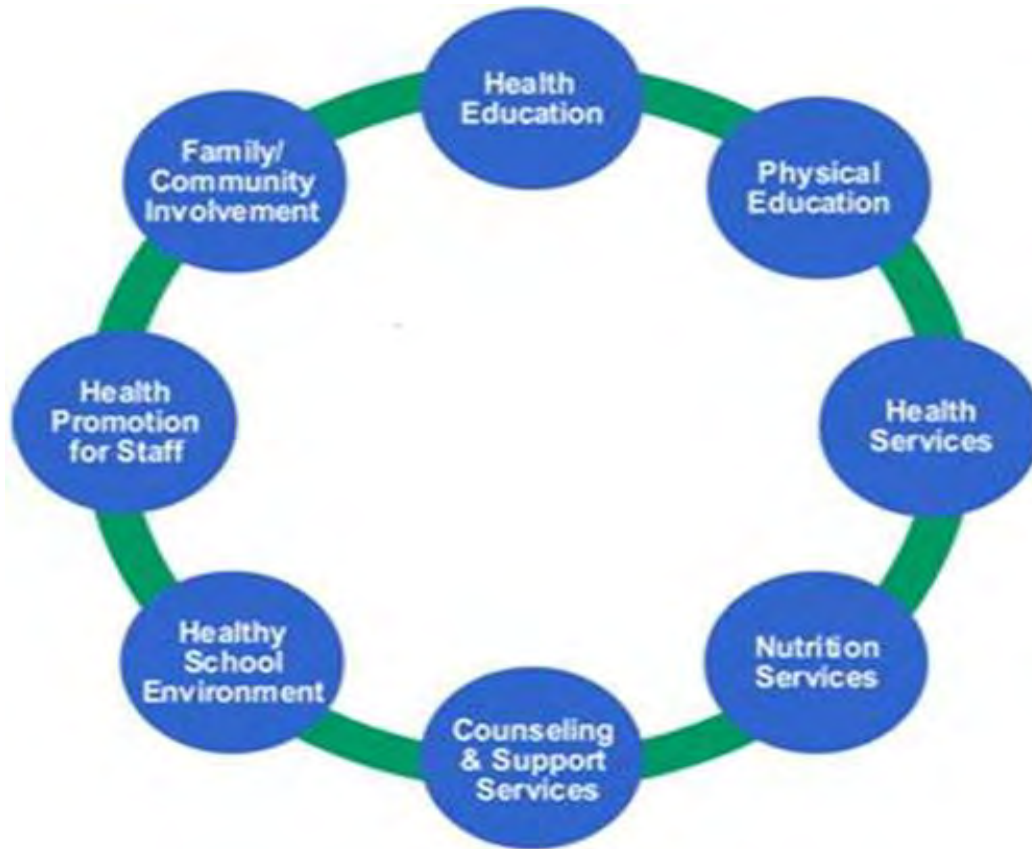
Why the WSCC Model?

Need to develop a culturally responsive system of care that addresses complex trauma and a full continuum of wellness care.

What are the benefits of WSCC?

Enhances positive learning and health outcomes	**Student access to health and wellness services**	**Engages students and increases concentration**	**Support health and wellness & resiliency of staff**
Student access to full continuum of behavioral health services	**Improves attendance, behavior, and academic achievement**	**Improves resiliency and protective factors**	**Improves positive attitudes towards self and others.**

Whole School, Whole Community, Whole Child Model

- WSCC model calls for a collaborative approach to learning and health, across the community, across the school and across sectors to meet the needs and reach the potential of each child.

- This is not a program! Think of it as puzzle pieces to be connected.

- Behavioral and Physical Health and education impact individuals, society, and the economy.

  - Individuals – quality of life

  - Society – active lifestyles

  - Economy – healthy productive workforce and health care costs

- Schools are a perfect setting for this collaboration because approximately 95% of all U.S. children and youth attend school.

- Schools are one of the most efficient systems for reaching children and youth to provide health services and programs.

Table 1. Whole School, Whole Community, and Whole Child (WSCC) Components by Category

WSCC Components	Categories
• Physical education and physical activity • Nutrition environment and services • Health education	Supporting healthy student behaviors
• Health services • Counseling, psychological, and social services • Employee wellness	Supporting school health services
• Social and emotional school climate • Physical environment	Supporting safe and positive school environments
• Family engagement • Community involvement	Supporting the engagement of family and community

WOSU Next Steps…

- New Student Wellness Center 2020-2021
- New Healing and Gratitude Garden 2019-2020
- Expanded eco therapy/fitness 2019
- Certification as School-Based Health Center 2019-2020 (WCWSWC Model)
- Creative Arts Therapist positions established (recreation, music, art, dance movement, psychodrama) 2019 (2 FTE)
- Integrated Behavioral Care Managers 2019 (2 FTE)

- Clinical Supervisor Position 2019-2020
- Improvement Champion Roles 2019 (Trauma, Clinical Dev, Prev.)
- Seasonal School Based MHP's 2019 (2 FTE)
- CARF Certification 2020
- Comprehensive PYD SEL and Health, Fitness, Nutrition 2019-2020 (PRC PSC)
- Internship/University Partnerships
- Develop long-term staffing plan 2020 (GS 9, 11, and 12)

For More Information

- CDC

  https://www.cdc.gov/healthyschools/wscc/index.htm

- WSCC Boston Public Schools

  http://bpsselwell.weebly.com

- Greater Tacoma Community Foundation

  http://gtcf.org

  www.k12.wa.us

- WSCC Colorado

  http://cde.state.co.us

- WSCC OK Website

  http://wscc.health.ok.gov

CASEL's tools and resources: Support high-quality SEL implementation

SEL District Resource Center

Resources from districts where SEL programs, practices, and policies are working to support high-quality SEL implementation.

https://drc.casel.org

Schoolwide Guide to SEL

Guidance for systemic SEL implementation in a school.

https://schoolguide.casel.org/

SEL State Resources

Sample policies and practices that support SEL.

https://casel.org/csi-resources/

SEL Assessment Guide

Guidance to choose and use an SEL assessment.

http://measuringsel.casel.org/assessment-guide/

Program Review Guides

Recommendations for selecting high-quality SEL programs.

https://casel.org/guide/

SEL Starts at Home

Resources to bring SEL into your home and community.

https://casel.org/in-the-home/

Resources

- Centers for Disease Control (CDC)

  http://www.cdc.gov/healthyschools/wscc/index.htm

  Virtual School Health

- ASCD

  http://www.ascd.org/programs/learning-and-health.aspx

- WSCC Video

  https://youtu.be/x1kURnZXsd0

- CASEL Meta-Analysis 2017
  https://casel.org/2017-meta-analysis/

- CDC's Health and Academic Achievement

  http://www.cdc.gov/healthyschools/health_and_academics/index.htm

Kahoot! Survey

QUESTIONS - DISCUSSION

Please do not hesitate to reach out with questions and/or opportunities to collaborate:

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School Based Health and Wellness Needs Assessment link:
https://www.surveymonkey.com/r/SchoolBasedWellness