## **Building Capacity Through Connections:**

Meeting the Mental Health Needs of Youth and Young Adults at the State and Local Level

Capacity Building Insititute May 18th, 2023

## WELCOME



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## The Center for Advancing Policy on Employment for Youth (CAPE-Youth) Partners



https://www.csg.org/



ILR Yang-Tan Institute

https://www.yti.cornell.edu/

The center is fully funded by the United States Department of Labor's Office of Disability Employment Policy in the amount of \$5 million under Cooperative Agreement No. OD-33982-19-75-4-21

### CAPE-Youth Strands of Work

<u>CAPE-Youth</u> seeks to improve employment outcomes for youth and young adults with disabilities (Y&YAD) by helping states build capacity in their youth service delivery and workforce systems with attention to:

- Strategic partnerships and system coordination;
- Work-based learning; and
- Professional development (PD).

### CAPE-Youth: What We Do

#### **CAPE-Youth:**

- Conducts research on new and existing innovative policy and practice;
- Develops strategic partnerships;
- Shares best practices among key stakeholders; and
- Helps states identify opportunities for new programs and services.

## Why is it Important to Consider Trauma?

- Trauma is pervasive and its impact is broad, deep and life-shaping.
- Trauma has more adverse effects on marginalized groups.
- Trauma affects how people approach services.
- The service system has often been re-traumatizing.

Exposure to trauma can increase risk for mental health symptoms that impact Y&YADs' engagement with services and/or employment outcomes.

## Re-Traumatization in Systems: What is It?

#### **Re-traumatization**

- Any situation or environment that resembles an individual's previous trauma (either literally or symbolically)
- Triggers feelings and reactions similar to original trauma

- The potential for retraumatization exists in all systems and at all levels of care.
- May also occur when interfacing with individuals who have experienced historical, intergenerational or cultural trauma.

(Institute of Trauma and Trauma-Informed Care, 2021)

### Key Findings

- 64% of respondents indicated that they did not have a process for screening and/or monitoring young people for mental health needs.
- 70% of respondents do not track who gets services after a referral is made (outcomes are unknown).
- For those that did not have a screening process, 60% of respondents estimated that over
   50% of their youth had mental health needs.
- 60% of respondents indicated that less than half of the youth can access mental health services when they need them.
- 89% of respondents indicated they did not have sufficient resources to deliver quality mental health training to staff.

## Mental Health Among Youth & Young Adults

- Over **1 in 10** youth in the U.S. are experiencing **depression** that is severely impairing their ability to function at school or work, at home, with family or in their social life.
- 60% of these youth **do not** receive any mental health treatment.
- Even among youth with severe depression who receive some treatment, only 28% receive consistent care.

## Re-Traumatization in Systems: What Hurts?

- Having to retell your story
- Being treated as a number
- Being seen as a label
- Not having a choice
- Not having access to services
- Not having accessibility considered

- Isolation or exclusion practices
- Marginalizing practices
- Lack of cultural consideration
- "Isms" and phobias

(Institute of Trauma and Trauma-Informed Care, 2021)

## Re-Traumatization in Systems: What Helps?

- 1. Safety: Creating areas that are calm and comfortable
- 2. Trustworthiness and transparency: Providing clear and consistent information
- 3. Choice: Providing options for treatment or services
- 4. Collaboration: Making decisions together
- 5. Empowerment: Recognizing capabilities
- 6. Cultural, historical and gender issues: Offering services sensitive to an individual's gender, culture and unique background

What are trauma-informed strategies you have seen within your system which increase the capacity to meet the safety needs of youth while engaging in "business as usual"?

#### **CAPE-Youth Resources**

- Policy Briefs:
  - Improving Mental Health Service Delivery Including Coordinated
     Specialty Care for Youth with a First Episode of Psychosis
  - Trauma-Informed Policy for Youth
  - Addressing the Needs of Youth with Disabilities and Other Intersecting Identities
  - Transition Activities and Services for Justice-Involved Youth and Young Adults with Disabilities
- CAPE-Youth Pages:
  - Mental Health
  - <u>COVID-19</u>
  - Telehealth

## How Can Workforce & Other Systems Respond? (State Level Examples)

**Example:** Wisconsin Department of Workforce Development TIC Training

- WI state agency focus Fostering Futures
- Division of Vocational Rehabilitation (DVR) internal focus on training
  - Regional Trainings
  - o 2020-2021 All staff training

**Example:** Pennsylvania Trauma-Informed Care Initiative

- Training to change their culture
- Expanding their Adverse Childhood Experiences (ACE) definition
- Requiring the evolution to trauma-informed and beyond

Wisconsin Fostering Futures: Phase 3 Results

### References

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- Institute of Trauma Informed Care. (2021). *Retraumatization: What hurts?* Retrieved from <a href="https://mcedsv.org/wp-content/uploads/2021/11/ITTIC-2021-Retraumatization-Chart.pdf">https://mcedsv.org/wp-content/uploads/2021/11/ITTIC-2021-Retraumatization-Chart.pdf</a>

#### **Questions?**

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MTSS Implementation

NTACT:C Capacity Building Institute

May 2023

Charlotte, NC









Office of Special Education Programs U.S. Department of Education

School-Wide Inclusive Mental Health Promotion for Learning and Coordinated Community Engagement

- JAMES SINCLAIR,
- GEOVANNA RODRIGUEZ,
- KATHERINE BROMLEY,
- CHRISTEN KNOWLES,
- CHRISTOPHER MURRAY,
- JOHN SEELEY, &
- SUSAN STADELMAN

TECHNICAL ASSISTANCE AND DISSEMINATION TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES PROGRAM –

Model Demonstration Projects to Enhance Social, Emotional, and Mental Health Services and Supports for Middle or High School Youth with and at Risk for Disabilities

> (CFDA 84.326M, Absolute Priority 2) 2021 – 2026 - 3 awards









## Purpose of the OSERS Program

- To establish and implement an evidence-based integrated school mental health program to enhance social, emotional, and mental health services and supports in middle school or high school settings to support youth with and at risk for disabilities.
- Determine how aspects of the models can:
  - be delivered remotely to increase access to mental health services and supports, either due to lack of access or during disasters;
  - focus on integrating prevention, universal screening and targeted interventions in a schoolbased setting; and
  - increase the capacity of schools to connect students with mental health providers and specialized mental health professionals.

### Project Focus

- 3 suburban high schools in Oregon
- Focused on special education teams and students with disabilities
- No previous systematic implementation of mental health screening or programming for students with disabilities

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Charge

To collaboratively build a multi-tiered system of Mental Health Supports within the Special Education Programs in Schools that address

Assessment

Programming & Interventions

SIMDIE

Family Involvement

Community Collaboration

#### Intensive

Contracted Site
Based Services,
Community Supports,
& Disability Specific Services

#### Coordinated Intensive Assessment

#### **Targeted Interventions and Approaches**

- Small Group Evidence-based SEL
  - Site based Cahoots
- Family Engagement & Supports
- Teacher Professional Development on Differentiation

#### Data-based Decision Making for Students with Disabilities

- Individualized Assessment
- Progress Monitoring (Academic, Social, Emotional, Behavioral)

#### Mental Health Promotion and S.E.L. for Students with Disabilities

- Social Skills, Self-Regulation & Self-management
- Brief Mental Health Promotion & Mental Health Literacy Practices

#### Mental Health Promotion & Professional Development for Teachers and Families

- Brief Mental Health Literacy
- Professional Development on Mental Health and Disability

#### Needs Based Universal Screening and Early Identification for Students with Disabilities

Students with Minimal Support Needs

Students with Significant Support Needs

#### Core Principles: Family - Community Collaboration and Coordination

- Community Mental Health
- Community Cultural Networks
- Culturally Sensitive and Sustaining Mental Health Practices

Carrily Pari

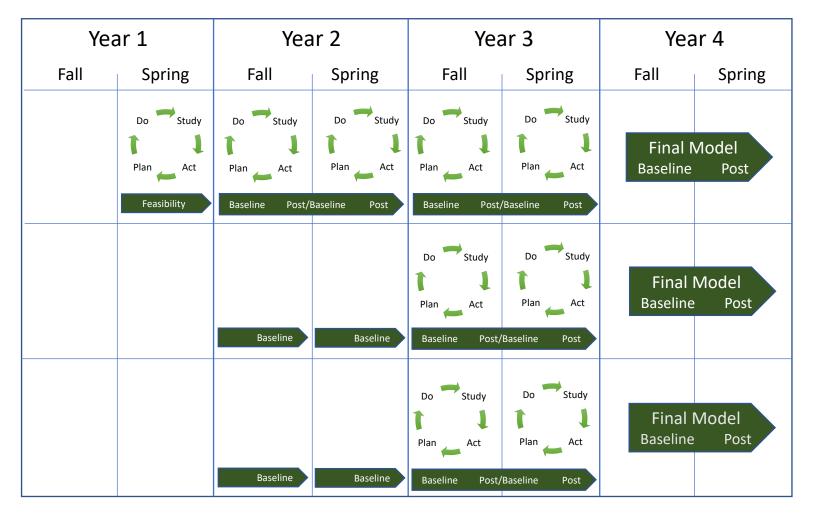
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### SIMPLE Timeline

School 1

**School 2** 

School 3



- Feasibility, acceptability, usability evaluation of assessments and interventions added to Year 1
- Will explore readiness and team functioning of the SMH team in Year 1
- Move forward with Year 1
   data collection and
   analyses during Year 2
- Original Year 3 data collection and analyses will be skipped to ensure we can examine the final model in Year 4

Needs Assessment:

Each school participated in three meetings to focus on their needs with the research team

#### Session 1 Focus

- Current team structures and collaboration processes
- Current capacities and readiness for programming
- Considerations for future team building

### Session 2 Focus

- Current universal or tier 1 practices and programming
- Universal screening and data considerations
- Current services and MH intervention programming

### Session 3 Focus

- Perspectives
   of student
   involvement
   in MH
   programming
   and services
- Planning for future



Needs Assessment

Teams must start somewhere!

#### Successes

- Learning what is happening, what is not happening at the school
- Learning what team capacity is
- Building systemic ways to address concerns versus individual reactionary approaches

#### Learning Areas

- Integrating MH conversations into team time
- Concern for additional workload to overburdened teams and schools

Screening:

Schools evaluate screeners to identify which will allow them to collect valued information for their teams

- BASC-3 Behavioral and Emotional Screening System (BESS)
  - Kamphaus & Reynolds, 2015
- Student Risk Screening Scale Internalizing & Externalizing (SRSS-IE)
  - Lane et al., 2012
- Systematic Screening for Behavior Disorders (SSBD)
  - Walker, Severson, & Feil, 2014
- Social, Academic, & Emotional Behavior Risk Screener (SAEBRS)
  - Kilgus & von der Embse, 2014
- Student Internalizing and Externalizing Behavior Screeners (SIBS/SEBS)
  - Cook et al., 2011, 2012
- Behavioral Emotional Rating Scale (BERS)
  - Epstein et al., 2023

## SIMPLE Screening: BERS

Two Schools:

a total sample of 259 students screened

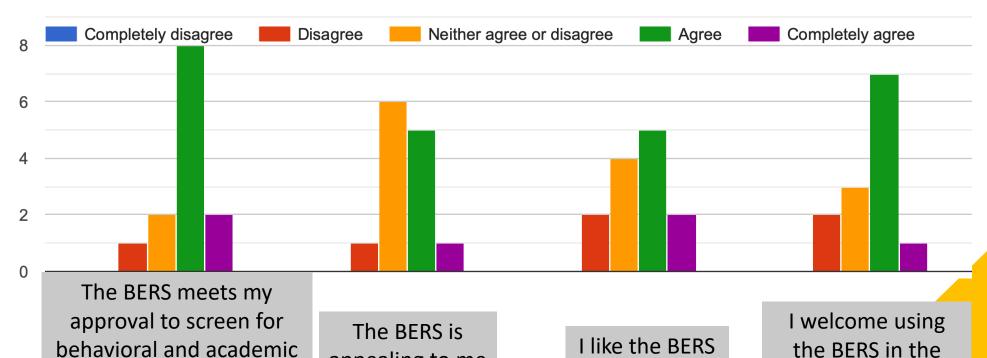
Results presented in % (#)

	<ul><li>Superior</li><li>Above Average</li><li>Average</li></ul>		<ul><li>Below</li><li>Average</li><li>Poor</li></ul>		Very Poor		Not Enough Data	
Interpersonal Strengths	70%	181	20%	52	3%	7	7%	19
Family Involvement	46%	120	36%	93	11%	28	7%	18
Intrapersonal Strength	44%	114	39%	100	12%	30	6%	15
School Functioning	45%	117	38%	99	12%	32	4%	11
Affective Strength	41%	105	51%	132	6%	17	2%	5

## SIMPLE Screening Reactions

Acceptability

concerns in my students



appealing to me

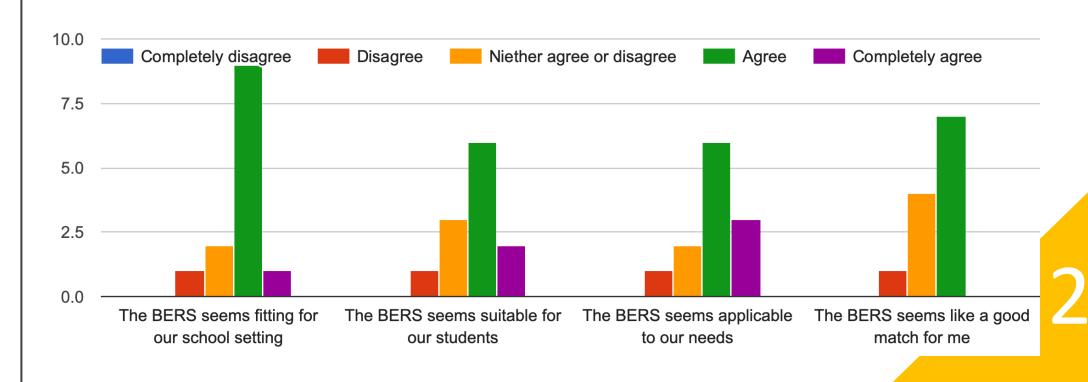
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future

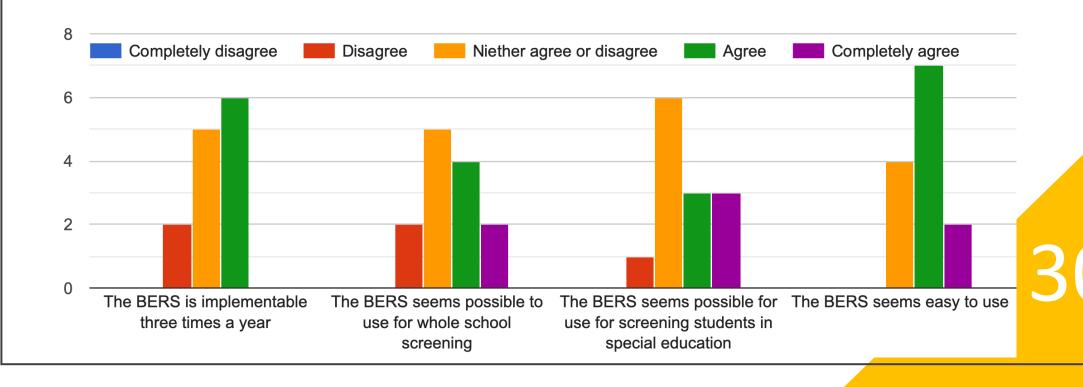
## SIMPLE Screening Reactions (2)

#### Assessment Appropriateness



## SIMPLE Screening Reactions (3)

#### Feasibility of Assessment



### SIMPLE Learning Areas: Logistics

**Schools work School teams** Time must be at different have limited flexible capacities paces **Funding and** Limited Limited financial personnel people available resources Priorities of what and how schools **Divergent** Common intend to address concerns concerns **MH** concerns School needs vs. School system-**Limited grant** project resources wide needs resources Different levels of No Admin administration involved in administrative involvement each meeting support

### SIMPLE Learning Areas: Practice

Playing "catchup" due to school interruptions

Academic instruction is a priority

Balancing other initiatives

Trying to build a sustainable system, not a flash in the pan

Feasibility is a must

How do you plan to continue?

Working to address needs of students with disabilities

What are specific needs?

How do services change?

Building a universal language

PBIS?

MTSS?

Identifying the "what" of training

Professional needs?

Classroom needs?



### Success Areas: Logistics

 Schools are forming or redesigning teams to think about SWD

Redesigning

#### Screening

 School teams implemented universal MH screening  Roles of school professionals in supporting mental health

Rethinking

#### Brainstorming

 Implement creative solutions for students with specific behavioral support needs

#### Success Areas: Practice

 Empowering to see teams interact with universal mental health screening data for the first time

Data

#### Eager

 School teams are eager to add to their mental health supports for students with disabilities  School teams are excited to make collaborative relationships WITHIN their school building

Collaboration

Current and future activities

All three schools have or finishing a threepart needs assessment interview process

Two schools have one round of screening, plan to screen in Spring for all three schools

Community organization interviews

Listening sessions for families

Focus groups with students and teachers



blogs.uoregon.edu/simple/

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## Please take a moment to submit your session Quick Reaction



