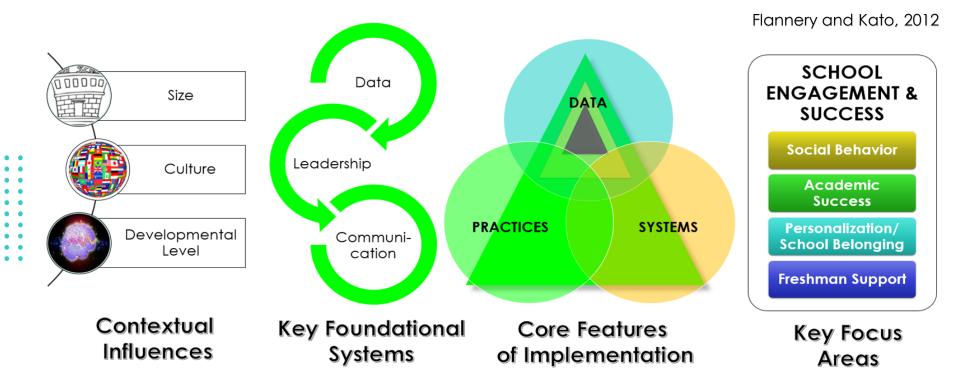
Empowering Teachers, Families, & Students for Mental Wellness and School Success (Breakout)

Mark D. Weist, Ph.D. University of South Carolina





For Your Consideration

REFLECT the "why" ENCOURAGE the dialogue CELEBRATE the change

AUTHENTIC ENGAGEMENT

Outline

- Questions/Comments?
- Family/Student Engagement and Leadership
- Patient-Centered Outcomes Research Institute (PCORI) and Study
- Mental Health Literacy and Educators
- Wellness (with thanks to Nancy Lever)
- Open Forum

Aligning and Integrating Family Engagement in Positive Behavioral Interventions and Supports (PBIS)

Concepts and Strategies for Families and Schools in Key Contexts



Family-School-Community Alliance

https://fscalliance.org



Some thoughts on the FSCA and recent meeting in Tampa

September 19-20, with thanks to Devon Minch, Heather George, Don Kincaid and USF

Critical role of communication with parents/families

- Need consistent, reliable, dependable communication and collaboration between school staff and families to establish trust
- We are very far from the five to one positive to corrective ratio
- Continuum of positive messaging about students to parents using technology
- Develop simple and straightforward messages for parents, e.g., what is PBIS?, how will it help my child? How can I become involved?
- Understand dimensions of effective messaging (e.g., in relation to length, timing, format, use of emojis, etc)...
- Need to overcome the challenge that contingencies in schools often block our progress

Simple actions can be powerful

 For example, see Positive Parent Contact program by Sara Feffer (University of Massachusetts, Amherst)

Relationship are central

- If they start off on the wrong foot, hard to get back on track
- See Clay Cook's relationship emphasis between teachers and students – establish, maintain, restore
- Should we use same framework for work with families?

Reinforcement vs. demand ratio

- "For people to do things they need to be more reinforcing than demanding"
- Are demands we are placing on families comparable to demands we are placing on school staff?

Family Engagement-PASS Study

Prior to ISF Implementation

- Parents involved in Tier 3, sometimes Tier 2
- PTO/PTA
- Report Card/Attendance ceremonies
- Communities In Schools & Social Workers
-Volunteer anytime!

*WITH THANKS TO ERIN SCHERDER AND THE CHARLESTON COUNTY SCHOOL DISTRICT

Improvements

Through ISF Implementation

- Family representation starts at Tier 1
- Consistent through Tier 2 & 3
- Request family input
- Families aware of continuum of interventions available

Examples of Family Engagement

- Parent focus groups
- Social media- polls, comments, messaging
- Parent present at Tier 1 meetings
- Evolving directory of school and community resources
- Planning and leading school celebrations

- Survey parent skills, hobbies, and interests to ask for involvement
- Add Family Engagement as topic to agendas of all MTSS meetings (school and district level)
- Coffee chats with teachers and clinicians





CONFLICTING FEELINGS

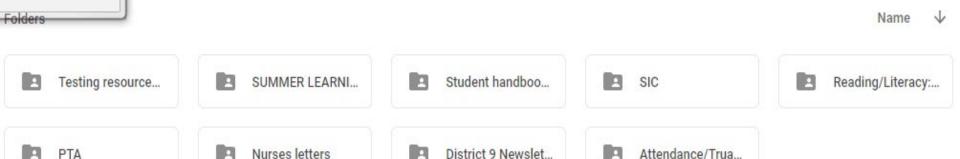
- YOU CAN HAVE CONFLICTING FEELINGS ABOUT A SITUATION.
- HAVING EMPATHY HELPS YOU NOTICE WHEN OTHERS' FEELINGS ARE THE SAME AS OR DIFFERENT FROM YOURS



Home Links, Parent Letters & Social Media

Google Drive Sharing



















Family Matrix

Are YOU a W.I.S.E OWL at Home?

TEACH	Getting Up In the Morning	Getting to School	Homework Time	Mealtime	Getting Ready for Bed
Help Out	Make your bed	Backpack Ready	Put things in folder when finished	Set Table Clean up	Brush teeth Put dirty clothes away
Own Your Behavior	Get up on time Get dressed	Be ready to leave on time	Do your best work Start on time	Use Kind Words	Get to bed on time (9-11 hours of sleep)
Manners Count	Try a Morning Smile Be Happy	Speak kindly "Have a nice day"	Kindly ask for help Say "Thank you"	Please and Thank you go a long way	End the day with nice words and thoughts

EVERYDAY



Parent Matrix

MATE YOU a W.I.S.E OWL Parent?

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	Dress Code		Arrival		Dismissal		Parent Engagement	
W We are Respectful	I Can:	Make sure my child is dressed appropriately as required by school dress code	I Can:	Make sure my child is on time to school at 8:30 am Make sure my child signs in if they are late	I Can:	Respect teachers' time Early check out of student not allowed after 2:45 pm	I Can:	Have positive interactions with school staff members
<u>I</u> I Care	I Can:	Ensure my child's outfit is clean	I Can:	Make certain my child is able to independently enter to building	I Can:	Ensure that my child is receiving as much education as possible	I Can:	Be an active partner in my child's education
Safety Matters	I Can:	Make sure my child's clothes are worn correctly (ex. shoes tied)	I Can:	Not block the entrance to the school building Not smoke on school campus	I Can:	Not block the entrance to the school Not smoke on school campus	I Can:	Follow school rules to ensure my child's safety
E Everyone is Responsible	I Can:	Be proud that my child is dressed well for school	I Can:	Know that teachers are engaged in the start of the school day and honor their time	I Can:	Know that teachers and students are engaged and learning and honor their time	I Can:	Speak positively of Angel Oak Ensure that my child understands the level of excellence expected

Additional Thoughts

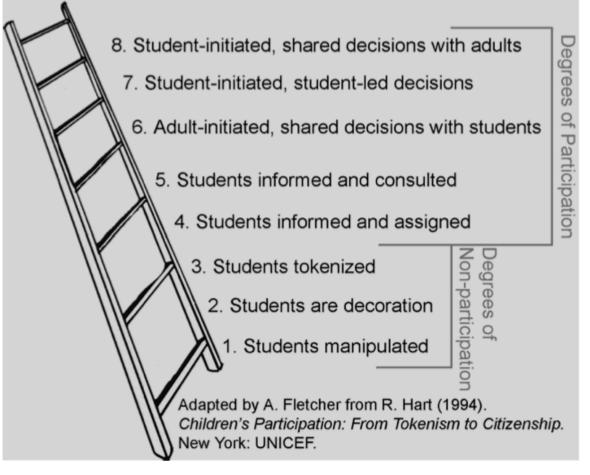
Parents led a traffic study, leading to changes in school start and end times

Change from (boring) PTO meetings to Family Fun Nights

- Halloween Literacy Night
- Fall Festival Math Night
- Multicultural Festival

Include door prizes, food, and feature student work as much as possible!

Ladder of Student Involvement*



Voices from Youth

- Four female USC students (ages 18-21) and one female research coordinator (age 23), reflecting on their experiences in high school
- Questions focusing on PBIS, mental health in schools, wellness

Theme - Stress

- Students are experiencing more stress
- High school is "a very competitive environment,"
 "expectations are so high, like we already need
 our bachelors degree," "days are very structured
 and busy with no free time"
- "Kids are growing up too fast, its an absolute whirlwind"
- "Exams especially standardized tests create stress for everyone"

Stress cont.

- "We're dealing with the social clock, people feel like by high school you should already have your life figured out"
- "Everybody having to do things faster to get a little bitty advantage to be better"
- "...focused totally on academics, and not getting any training in things like taxes, budgeting, managing a car"
- "Not an ease into adulthood, you are essentially on your own at 18"
- "Feels like you can't ask for help or you'll get behind in school and in the social clock"

Theme – Social Media Stress

- "We are constantly comparing ourselves with one another"
- "Separation politics are causing more stress you can't have an opinion or you will be attacked"

Theme – Student Mental Health Challenges

- "Anxiety is really big...when you experience anxiety its easy to go on a screen to get away from it"
- "We avoid social interactions with our phones"
- "Life is so competitive and dark, I know a kid who burned himself alive in a school parking lot"

School Mental Health Services

- "too many handoffs...teacher notices a problems, hands off to the counselor, the counselor hands off to the psychologist, then to the psychiatrist...can't build rapport with so many handoffs"
- "there is no solid ground"
- "the handoffs make a child feel like garbage"

Recommendations

- "Discussions on mental health should be consistent, not just after a suicide"
- "Need to advertise more, make it clear people can come to you for help"
- "Better use advisory times to build relationships and offer support to students"
- "Teachers need training in mental health"
- "Every student should be able to have a more indepth relationship with a teacher"

Recommendations cont.

- "Technology is making stress worse, like computer assignments in all classes, need to go back to more paper stuff"
- "Do things like relaxation and yoga in class...make these their own classes"
- "Build in breaks for students to take walks when they are stressed out"
- "Make class more fun like with Kahoot and Classcraft"

PCORI

Patient-Centered Outcomes Research Institute

PCORI believes that combining patients and other stakeholders' individual experiences and passion for improving healthcare quality with the expertise of researchers will result in research that better meets the needs of the entire healthcare community



PCORI Eugene Washington Engagement Award

- Focused on strengthening the SC School Behavioral Health (SBH) Community, and involving patients and stakeholders in driving advancements in the field (2015-2017)
- The award helped the community evolve to the Southeastern SBH Community involving 12 southeastern states
- 8 Focus Group Sessions held throughout SC as part of an SBH listening tour
- Five theme areas (school-wide approaches, quality and evidence-based practices, implementation support, family and other stakeholder involvement, cultural humility) and three priority populations (youth connecting to the military, justice, child welfare)

PCORI cont.

- All 8 focus groups analyzed with Nvivo
- Around 100 themes identified
- The two most prominent themes were:
 - 1) Families and youth are tired of being talked down to by experts and want to be equal collaborators, move to triangle of equal collaboration of family/youth – school – mental health clinician/system
 - 2) Stigma is pervasive and is the most prominent reason why people avoid MH services

The Partnering for Student Wellness (PSW) study funded by PCORI

- 20 middle schools, 10 in Baltimore, 10 in Myrtle Beach
- All receive training in evidence-based practices (family engagement/empowerment, modular cognitive behavioral therapy, quality improvement, implementation support)
- One half of the schools or 5 in each location will also receive two "patient-centered enhancements" focused on familyschool-clinician partnerships, and mental health literacy/stigma reduction
- Intervention vs comparison in the 2019-20, 2020-21, and 2021-22 academic years with follow-up of students into high school

PSW study cont.

- Partners USC, University of Maryland National Center for School Mental Health, MUSC, Baltimore City Schools, Horry County Schools, Waccamaw Center for Mental Health
- Hypothesis is that by focusing on the two PCEs the reach and depth of services will be significantly improved toward improved social, health, emotional, behavioral, and academic (SHEBA) functioning for many more students

Stakeholder Enhancements

- 1) Promote alliance between students, families, clinicians and schools involving the PCOMS system, family liaisons in schools, and family leaders actively shaping services in schools
- 2) Provide teachers with intensive training in The Guide program (one teacher for each of 6th, 7th, and 8th grades), and support these teachers in training other teachers in The Guide and in building mental health literacy and conveying positive messages about MH and MH help-seeking (teachers receive stipends, continuing education, and certification as having expertise in MH)



- Teacher-delivered mental health literacy curriculum for middle and high schools
- Focused on educating students about mental health to reduce stigmatizing attitudes about having mental health challenges and seeking help

The Guide



JNDERSTANDING MENTAL HEALTH AND MENTAL ILLNESS VERSION 3 (USA EDITION: WASHINGTON STATE)



Kutcher and Wei; 2014; Kutcher, Bagnell and Wei; 2015; Kutcher, Wei and Coniglio, 2016.



What is Mental Health Literacy?

- Obtaining and maintaining positive mental health
- Understanding mental disorders and their treatments
- Decreasing stigma related to mental disorders
- Enhancing help-seeking efficacy
 - Know where to go; know when to go; know what to expect when you get there; know how to increase likelihood of "best available care" (skills and tools)



(Kutcher et al., 2016)

Why MH Literacy and Teachers?

- They are the defacto MH workforce, yet are not trained in MH
- Training in MH can assist them in identifying and assisting students in need
- Training in MH can assist them in better classroom management
- Training in MH can help them with their own wellness
- Training in MH can assist in reducing stigma, which is pervasive



Mental Health & High School Curriculum Guide: Training Program for Trainers

Developed By: Dr. Stan Kutcher (MD, FRCPC, FCAHS)

& Dr. Yifeng Wei (Med; PhD)

August 21, 2019

MENTAL HEALTH & HIGH SCHOOL CURRICULU GUIDE: TEACHER PROFESSONAL DEVELOMEI Face—to-face training program – 2 days

- Teacher knowledge update (apple book) (http://teenmentalhealth.org/schoolmhl/wpcontent/uploads/2018/11/final-teacher-knowledge-update.pdf) -(evening homework between days 1 and 2)
- Bringing mental health to school (http://pdce.educ.ubc.ca/mentalhealth/) – (6 –8 hours on line)
- https://www.teachmentalhealth.org/ (5 7 hours on-line)



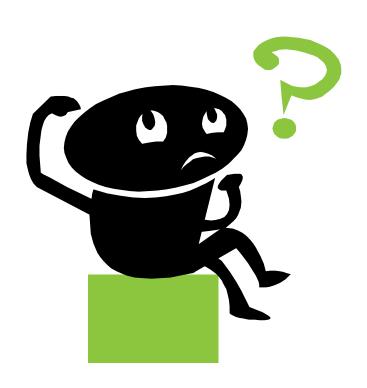
HEALTH LITERACY

... literacy is a stronger predictor of an individual's health status than income, employment status, education level and racial or ethnic group.

- Kickbusch I, Pelikan JM, Apfel F, et al. Health literacy the solid facts. World Health Organization, Regional Office for Europe, 2013.

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WHAT IS MENTAL HEALTH LITERACY



Mental health literacy is the Knowledge and understanding that helps us become responsible, effective, and successful in living full and healthy lives



MENTAL HEALTH LITERACY: the FOUR components

- Understand how to obtain and maintain good mental health
- Understand and identify mental disorders and their treatments
- Decrease stigma
- Enhance help-seeking efficacy: know where to go; know when to go; know what to expect when you get there; know how to increase likelihood of "best available care" (skills and tools)

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ROLE OF A TEACHER

- Teach and promote students mental health literacy
- Recognize a potential problem
- Refer appropriately linking WITHIN the school
- Work effectively in the classroom and with other professionals – support not counseling or therapy
- **Do not diagnose** describe what you see!
- Do not prescribe/suggest specific treatments (know where to find out about treatments)



School Mental Health is Not Just for Students: Why Wellness Matters

Nancy Lever, Ph.D.

Associate Professor
Co-Director, Center for School Mental Health
University of Maryland School of Medicine, Baltimore

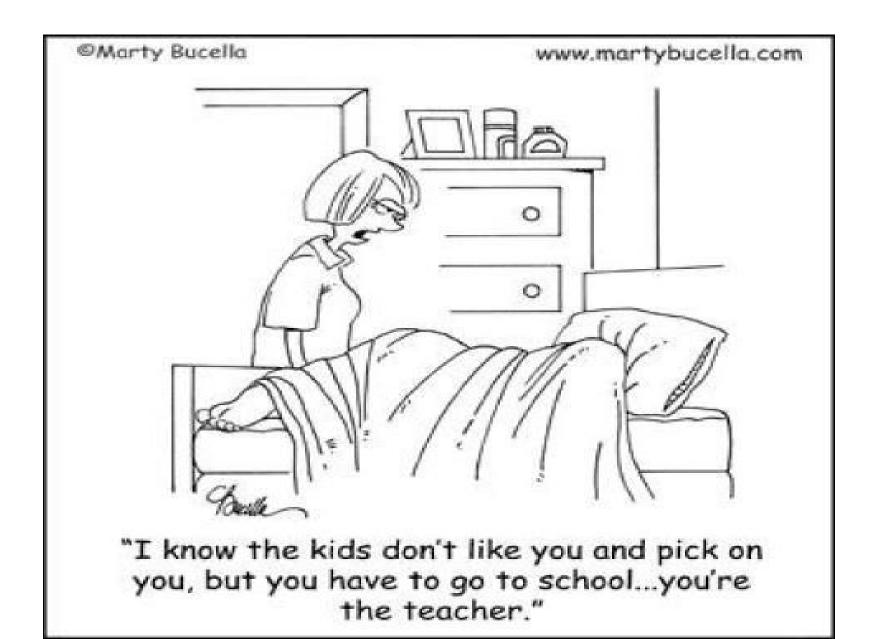
April 21, 2016



Many Employees are Unwell

- According to the US Department of Health & Human Services, for every 100 employees in this country:
 - 27 have cardiovascular disease
 - 24 have high blood pressure
 - 50 or more have high cholesterol
 - 26 are overweight by 20% or more
 - 10 are heavy drinkers
 - 59 don't get adequate exercise

Why Wellness in Schools?





"We ask teachers to be a combination of Albert Einstein, Mother Theresa, Martin Luther King Jr. and...Tony Soprano. We ask them to be Mom and Dad and impart tough love but also be a shoulder to lean on. And when they don't do these things, we blame them for not being saviors of the world. What is the effect? The effect has been teachers are incredibly stressed out"

--Randi Weingarten

President of American Federation of Teachers

Common Sources of Educator Stress

High Stakes Testing (1500 PK-12 Educators)

- 72% felt "moderate" or "extreme" pressure from school and district administrators
- 42% reported emphasis on standardized test scores had a "negative impact" on classroom
- 45% considered quitting because of standardized testing

Common Sources of Teacher Stress

- Large class size
- Behavioral challenges in students
- Inadequate resources & poor physical space
- Bureaucracy
- Workload & Paperwork
- High responsibility for others
- Perceived inadequate recognition or advancement
- Gap between pre-service training expectations and actual work experiences



Compassion Fatigue/Vicarious Traumatization/Secondary Traumatic Stress

The emotional residue or strain of exposure to working with those experiencing the consequences of traumatic events. It can occur due to exposure on one case or can be due to a "cumulative" level of trauma

American Institute of Stress, 2016

Compassion Fatigue/Secondary Traumatic Stress and School Staff

- Not just mental health clinicians
- "Any educator who works directly with traumatized children and adolescents is vulnerable to the effects of trauma."

-National Child Traumatic Stress Center

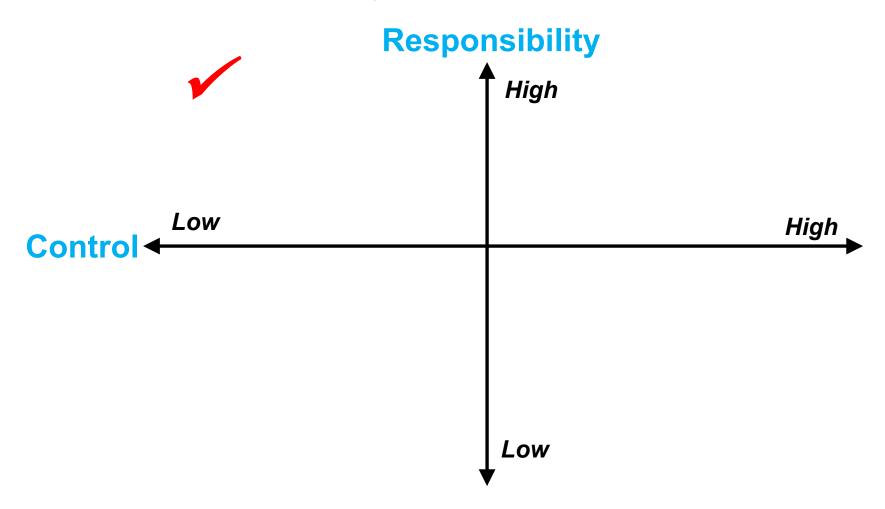
Burnout - Definition

- The condition of someone who has become very physically and emotionally tired after doing a difficult job for a long time (Merriam-Webster Dictionary)
- A multi-faceted phenomenon comprised of three features
 - Emotional Exhaustion
 - Depersonalization
 - Reduced personal accomplishments

Signs of Exhaustion and Burnout

- Emotional numbing, feeling "shut down"
- Loss of enjoyment
- No time or energy for yourself
- Sense of cynicism or pessimism
- Increased illness or fatigue, aches and pains
- Increased absenteeism, "sick days"
- Greater problems with boundaries,
- Difficulty making decisions, or making poor decisions

A Recipe for Burnout



Factors Associated with Educator Burnout

- Student misbehavior and disengagement
- Low sense of self-efficacy
- Inadequate salary and perceived lower status of the profession
- Time pressure
- Lack of autonomy

Working in Schools can be Challenging

- 80% of teachers reported feeling physically and emotionally exhausted at the end of the day
- Surveys of 30,000 teachers revealed <u>89%</u> stated they were enthusiastic about teaching when they started, <u>only 15% feel that way now</u>

American Federation of Teachers (2015) with the group Badass Teachers

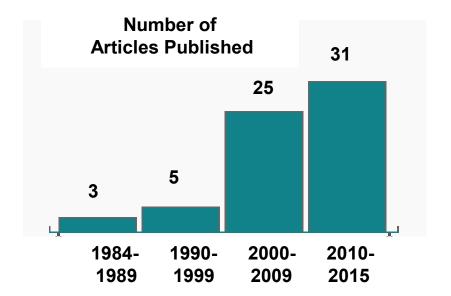
Workforce Issues

- 10% of teachers leave after 1 year
- 17% of teachers leave within 5 years
- In urban districts, up to 70% of teachers leave within first year
- More teachers leave when compared to social service professionals, including mental health service providers
- Over 4 years rates of

teacher dropout > student dropout

State of the Research: PsycINFO

- PsycINFO search for "wellness" and "teacher"
 in abstract = 64 peer-reviewed results
- Published between 1984 and 2015
- Dramatic increase in recent years



State of the Research: PsycINFO

- Focuses on a range of topics, such as:
 - Relation between teacher wellness and child outcomes (e.g. academic achievement)
 - The role of teacher wellness in promoting childschool connectedness
 - Burnout, depression and teacher-efficacy
 - Measurement

The *Professional Quality of Life Scale* (*ProQOL*)

- No cost, <u>www.proqol.org</u>
- 30 item well-validated, self report measure of the positive and negative aspects of caring
- Measures Compassion Satisfaction and Compassion Fatigue
- It can be given individually or in groups
- The measure was developed with data from over 3000 people

The Economics of Wellness

 RAND suggest participation in a wellness program over five years = lower health care costs and decreasing health care use

 Healthcare expenditures are nearly 50% greater for workers who report high levels of stress (National Institute for Occupational Safety and Health, 1999)

The Economics of Wellness

- 2010 meta-analysis on the impact of workplace wellness programs found that:
 - Medical costs fall \$3.27 for every \$1 spent
 - Absenteeism costs fall \$2.73 for every \$1 spent
 (Baker, Cutler & Song, 2010)
- 2005 meta-analysis found that employee wellness programs are cost-effective:
 - a \$5.81 to \$1 return-on-investment ratio, on average (Chapman, 2005)

The Economics of Wellness

42 published worksite health promotion programs

Companies with **effective wellness programs** had an average of:

- 28% reduction in sick days
- 26% reduction in health costs
- 30% reduction in workers' compensation and disability management claims
- \$5.93 to \$1 savings-to-cost ratio

Why are Teacher Wellness Programs in School Important?

Reduces:

- Risk of developing diseases
- Rates of workplace injuries and compensation claims
- Employee medical costs which can allow for sustainable health care coverage and lower out-of-pocket costs

Why are Teacher Wellness Programs in School Important?

- Employees more satisfied with their jobs
- Improved employee performance
- Fewer absences
- Help combat stress and build healthy coping strategies
- Improved retention of teachers

Healthy employees provide the continuity and stability so essential for educational success

Community Approach to Learning Mindfully (CALM)

- Daily school-based intervention to promote/improve:
 - Social-emotional competencies
 - Stress management
 - Wellbeing
 - Teaching
 - Health
- Intervention included yoga and mindfulness practices
- 4 day a week for 16 weeks (64 sessions total)



CALM: Results

- Significant improvements in:
 - Mindfulness
 - Emotional functioning
 - Positive affect
 - Distress tolerance
 - Efficacy in classroom management
 - Physical symptoms
 - Blood pressure
 - Cortisol



Change is Possible

- In a 10 week health promotion program for employees in Dallas Independent School District
 - -focus on exercise and physical fitness
 - 44% of teachers changed their overall lifestyle
 - 68% changed their diet
 - 26% who did not exercise began vigorous programs
 - 18% quit smoking
 - 1.25 days less of absenteeism for exercising teachers, savings of \$149,578 for the district

School Employee Wellness Programs Make a Difference

- Programs that focus on nutrition, physical activity, and stress management:
 - Increase teacher morale
 - Increase ability to handle job stress
 - Reduce absenteeism
 - Result in higher levels of overall well-being
 - Save \$\$\$



What doesn't kill you,

makes you stronger





Thank you

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