Youth in Crisis: Supporting Youth Through School-Based Mental Health Programs

Presenters:

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Disclaimer

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Friendly Request

WHILE WAITING FOR OTHERS TO COME IN, HERE ARE A FEW REQUESTS FROM US.

- Please remember to mute your microphone.
- In the chat, please let us know your name and where you are joining us from.
- Please feel free to type your questions in the chat box and we will allow time at the end for Q&A.

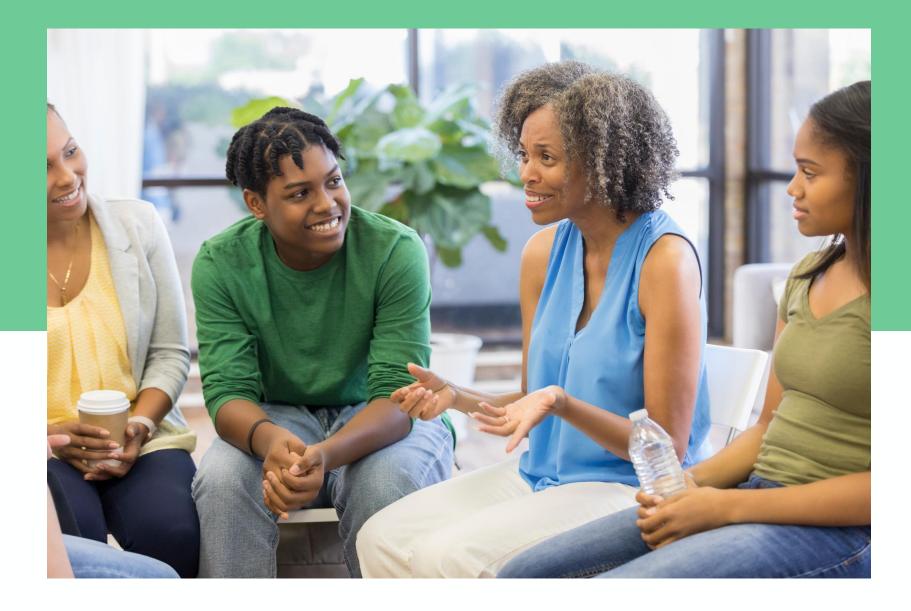


Learning Objectives

WHAT WE HOPE YOU WILL GAIN FROM THIS RESENTATION

To provide strategies for working collaboratively with school and community partners to provide a systemic approach to mitigate the effects of adverse childhood experiences on student learning and growth.

To increase awareness of how to effectively implement traumainformed practices through a school-based mental health program.



Statistics Pre-Pandemic



- 57
- 11

and care.

• According to the Surgeon General, 36% of high school students stated that they had experienced persistent sadness and hopelessness before the pandemic.

• In the decade prior to the pandemic, there was a 57% increase in the rate of suicide.

• From the onset of symptoms, it will take a child 11 years until they are able to access treatment

> ~ Dr. Vivek Murthy, U.S. Surgeon General Retrieved from: https://voutu.be/VafESUHpcUA

Statistics Now

Suicide was the second leading cause of death among individuals between the ages of 10-14 years old. (NAMI, 2023)

50%

Of mental illnesses in youth will surface around age 14 and each year, 1 in 6 youth (ages 6-17) will experience a mental disorder.

(NAMI, 2023)

42%

Of high school students reported having feeelings of persistent sadness and hopelessness

(CDC, 2023)

Of youth reported a substance use disorder in the past year, while 10.2% will be diagnosed with SUD in their lifetime

(Reinert et al., 2022)



6%

60%

Of youth with major depression will not receive any mental health treatment or care

(Reinert et al., 2022)

ACE Study



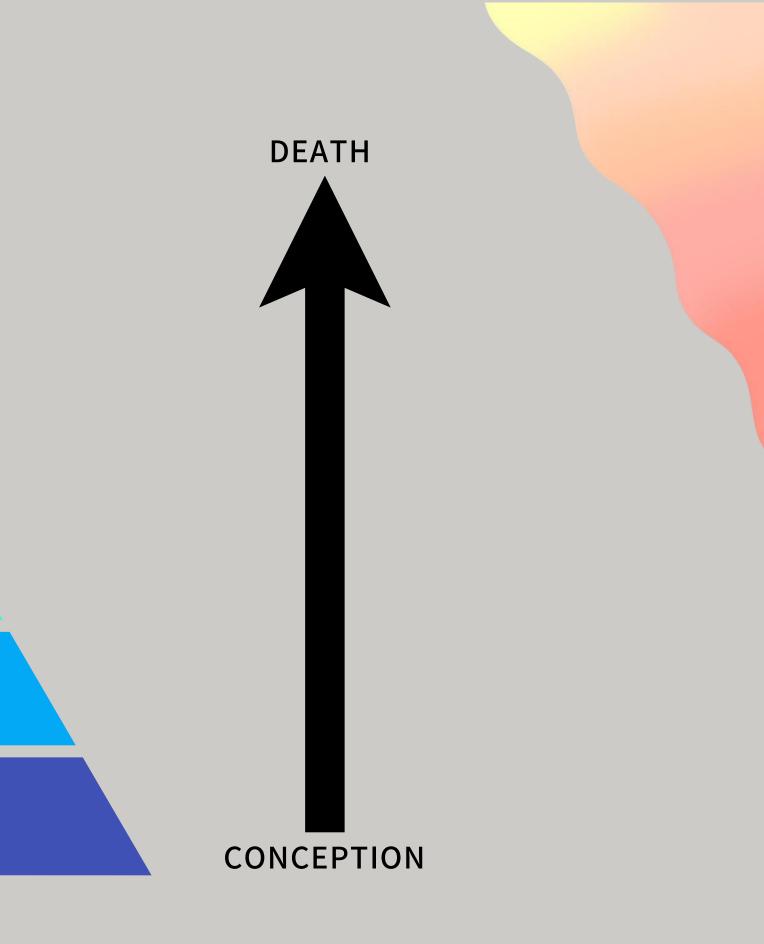
Adoption of Health-Risk Behaviors

Social, Emotional, and Cognitive Impairment

Disruptive Neurodevelopment

Adverse Childhood Experiences

Adapted from https://www.cdc.gov/violenceprevention/aces/about.html



Daniel Siegel Hand Model

Retrieved from: https://youtu.be/qFTljLo1bK8



Types of Trauma Youths May Experience

- School Violence (Bullying, Gun Violence, Fighting)
- Family / Community Violence
- Physical, Sexual, Emotional Abuse / Assault
- Neglect and Abandonment
- Suicide / Homicide
- Loss / Grief / Death
- Medical Trauma / Serious Accident
- Immigration Issues
- Terrorism / War
- Human Trafficking / Kidnapping
- Natural Disasters

(SAMHSA, 2023)

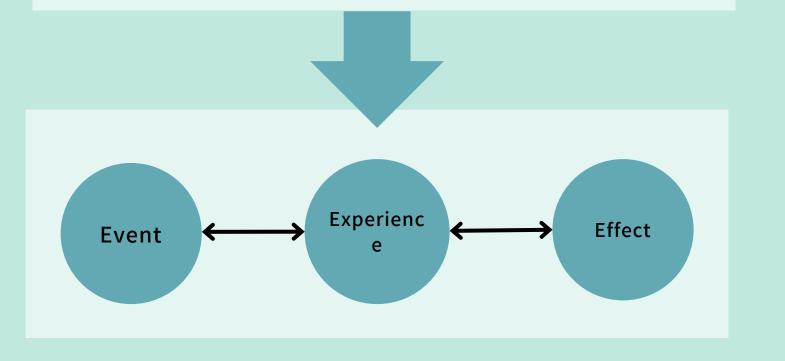
How Trauma Develops

ACCORDING TO SAMHSA (2014)

"Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being"



SOME POPULATIONS OF CHILDREN AND FAMILIES ARE AT EXTREME RISK FOR EXPERIENCING TRAUMA AND VICTIMIZATION AT AN ALARMINGLY HIGH RATE. THESE POPULATIONS MAY EXPERIENCE MULTIPLE LEVELS OF STRESS AND ADVERSITIES AT THE SAME TIME. EFFECTIVE TREATMENT AND ACCESS TO SERVICES CAN BE CHALLENGING.



1.Trauma and Substance Use 2. Economic Stress 3. Military and Veteran Families 5. LGBTQ Youths

4. Youths Who Experience Homelessness 6. Intellectual and Developmental Disabilities

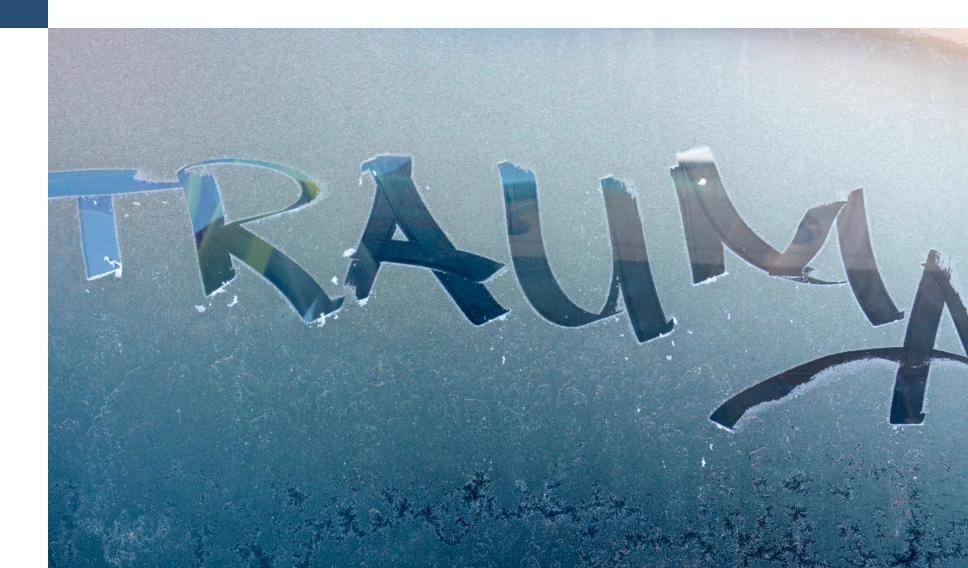
ACCORDING TO THE NATIONAL CHILD TRAUMATIC STRESS NETWORK (NCTSN, N.D.)

TRAUMA CONSIDERATIONS

RISK FACTORS

- Distance from the traumatic event
- Previous exposure to traumatic events
- Mental health issues or disabilities
- Parents with mental health or substance abuse issues
- Little to no social support system and isolation
- Stress or strain on the family (financial, housing, food, work)
- Loss or fear of losing a loved one
- Environmental and developmental challenges
- Low socio-economic status of the family

- Physical (Aggression, Outbursts, Lethargy)
- Psychosomatic Symptoms (Aches, Pains, Medical Conditions)
- Emotional (Outbursts, Dysregulation, Apathy)
- Behavioral (Inability to Focus, Lack of Self-Regulation, Substance Use/Abuse)
- Cognitive (Inability to Process, Comprehend, Intellectual Challenges, **Unfavorable Academic Outcomes**)
- Interpersonal & Social (Isolation, Inability to Make Meaningful Connections)



(NASP, 2015)

TRAUMA RESPONSES

(SAMSHA, 2014; Woodward et al., 2023)

FACTORS THAT INCREASE ANXIETY

- Anticipatory Anxiety Past trauma can cause children to worry if the traumatic event will happen again in the future and can lead to concerns about personal safety.
- **Separation Anxiety** Anxiousness and distress that comes as a result of separating from loved ones or caregivers.
- The Trickle-Down Effect Children take cues from their parents as to how to deal with traumatic events. If parents seem worried and uncertain, then the children will often take on some of the anxiousness seen in the parent.
- Media / Social Media Coverage Continuous viewing of the traumatic event can flood children with too much information that may increase anxiety. (Vicarious Trauma)
- **Peer Talk** Children will often talk amongst themselves and can share wrong information with each other.
- **Drills and Lockdowns** Drills and lockdowns provide information as to what to do in case something does happen but can also increase children's concerns about safety...especially after something traumatic has happened.

(Hurley, 2021)





The After-Effect of Trauma

- and the world.

TAKEN FROM THE TRUST-BASED RELATIONAL INTERVENTION **TBRI/ KARYN PURVIS INSTITUTE, 2019**

• **Behavior** - Trauma Impacts neurodevelopment and behavior leading to issues with behaviors, emotions, and self-regulation.

• Beliefs - Trauma impacts how one views themselves and influences selfawareness, self-regulation, and self-efficacy.

• **Body** - Trauma alters how our senses experience the sensations of own body

• **Biology** - Trauma affects biology in ways such as chronic activation of the Hypothalamic - Pituitary - Adrenal (HPA) Axis that maintain homeostasis, compromised immune response, and how genes are expressed (epigenetics).

• **Brain** - Trauma interrupts the developing brain (flipping your lid) and organizes it around the survival mechanism of fight, flight, or freeze.

HOPE

WHAT CAN SCHOOLS DO?

"The obstacle to treatment is not the absence of pain, it's the absence of hope."

Movie: Tipping the Pain Scale (2021)



Treating The Whole Child

An Ecological Approach to Treatment



Society

Policies / Laws

Community / Organizations

Meaningful Relationships

Student

Adapted from Urie Bronfenbrenner Human Ecological Theory (Budzyna & Buckley, 2023)



How is your organization addressing the youth mental health crisis?

Please write your answers in the chat

Preventing Adverse Childhood Experiences (ACEs)

ACES CAN IMPACT THE INDIVIDUAL IN A NUMBER OF WAYS/DIMENSIONS:

- Individual / Household
- Community
- Environmental

RECOMMENDATIONS FOR PREVENTING ACES INCLUDE:

- Family based-interventions
- Structured Parenting Skills interventions
- Establishing appropriate parent-child communication
- Community involvement

(Woodward et al., 2023)

Trauma-Informed Care

(SAMHSA, 2014)

Six Principles of Trauma-Informed Care

- Safety
- Collaboration & Mutuality
- Trustworthiness & Transparency
- Empowerment, Voice, & Choice
- Peer Support
- Cultural, Historical, & Gender Issues

"Four R's" of Trauma Informed Care:

- Basic Realization of trauma
- Recognizing the signs of trauma
- Responding with TIC
- Resisting re-traumatization



Suggestions for Trauma–Informed Care Interventions and Therapeutic Approaches

Trauma and Grief Component Therapy Cognitive Behavioral Therapy (CBT) Trauma-Informed CBT Play Therapy Family Therapy / Family System Therapies

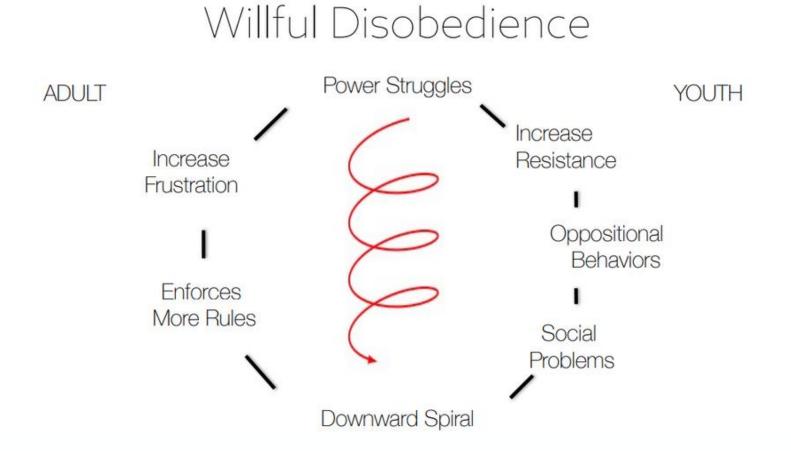
EMDR Psychodrama Expressive Art Therapy Sand Tray (Virtual or In-Person) Mindfulness Play-Based Interventions / Playful Engagement Nurture Groups Sensory Rich Diet Tapping (Emotion-Focused-Therapy) Client-Centered Intervention / Positive Regard

> Youth Mental Health First Aide (YMHFA) Making Sense of Your Past Worth Trust-Based Relational Intervention

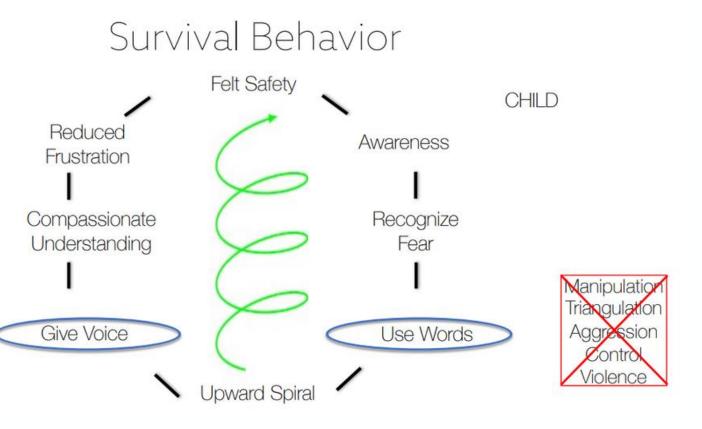
www.dallasisd.org/mentalhealth

TRAUMA CONSIDERATIONS

(Purvis, 2019; Purvis, 2022)



ADULT







SEE THE NEED BEHIND THE BEHAVIOR

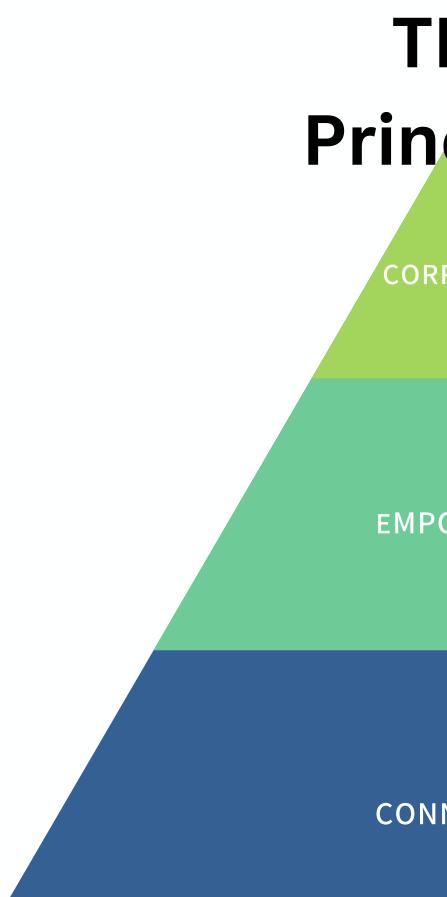
MEET THE NEED

DON'T QUIT IF NOT YOU, THEN WHO?

child.tcu.edu

TRUST-BASED RELATIONAL INTERVENTION (TBRI)

Karyn Purvis Institute, 2019



TBRI Principles

CORRECTING

EMPOWERING

CONNECTING

TBRI Animate: Toxic Stress & The Brain

https://youtu.be/LTcFTpGve4g

What is the importance of having a common language?

Youth Mental Health First Aid



Youth Mental Health First Aid teaches individuals how to identify, understand, and respond to children and adolescents (ages 12 to 18 years) who might be experiencing mental health and substance use challenges.

TOPICS COVERED:

- Common signs and symptoms of substance use challenges.
- How to interact with a child or adolescent in crisis.
- How to connect the youth with help.
- Expanded content on trauma, substance use, self-care and the impact of social media and bullying.

https://www.thenationalcouncil.org/our-work/mental-health-first-aid/

- Common signs and symptoms of mental health challenges,
 - including anxiety, depression, eating disorders and attention deficit hyperactive disorder (ADHD).



(https://www.dallasisd.org/domain/19609)

COMMUNITY INITIATIVES



Parent Education Forum

RSVP recommended, but not required: bit.ly/41kq0cz



City of Dal

Streaming live: univisiondfw.com Learn about: Prevention Intervention Interdiction

8 a.m. to 12 p.m.

Saturday, April 22, 2023

1201 E. Eighth St., Dallas, TX 75203

Yvonne A. Ewell Townview Center

DALLAS





CAMPUS INITIATIVES



Family Resource Centers

(https://www.dallasisd.org/resourcecenters)



SUPPORTING DALLAS ISD STUDENTS AND PARENTS

STUDENT RESOURCES :

- ACADEMIC SUPPORT (\circ)
- COOKING \bigcirc
- \odot ART
- \oslash ZUMBA
- PODCASTING (\checkmark)
- YOUTH SPORTS (\checkmark)
- \odot
- YOGA \odot

MORE INFORMATION :

972-749-1082 LINCOLN RESOURCE CENTER AT J.J. RHOADS **DALLAS, TX 75210**



RESOURCE CENTER NOW OPEN

SUMMER CAMP

PARENT RESOURCES :

GROCERY STORE \bigcirc

0

- NUTRITION CLASSES \bigcirc
- \odot **JOB TRAINING**
- \odot ESL CLASSES
- \bigcirc GED CLASSES
- FAMILY COUNSELING \bigcirc
- SNAP AND CHIP ENROLLMENT \oslash
- \odot **CO-WORKING SPACE**

4401 SOUTH SECOND AVENUE



SCAN OR CODE OR **USE THE LINK TO REGISTER TODAY! BIT.LY/DALLASISDRESOURCECENTERS**

Our Team



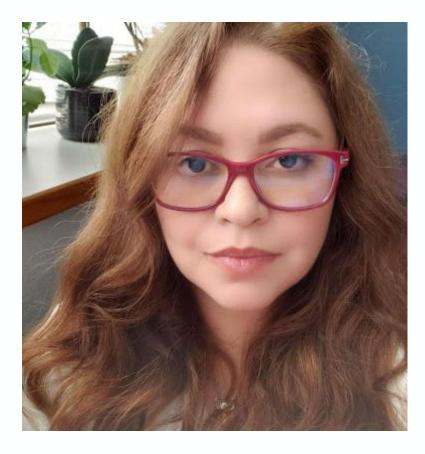
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Clinic Manager



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Executive Director



Crystal Arriola,

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ANY QUESTIONS?





MATTER!



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