

The Zoom Interface

The screenshot shows a Zoom Webinar window with a dark header bar. The main content area displays the TTC logo and a 'Thank you for joining us today!' message. A 'Question and Answer' window is open, showing a test question and a text input field. A 'Zoom Webinar Chat' window is also open, showing a 'To: All panelists' field. The bottom toolbar contains icons for Audio Settings, Chat, Raise Hand, Q&A, and Leave. Annotations with arrows point to various elements: 'Click here to maximize your session view' points to the 'Enter Full Screen' button; 'Click here to adjust your audio settings' points to the Audio Settings icon; 'Click here to leave the session' points to the Leave button; and several text boxes explain the Q&A and Chat features.

Zoom Webinar

You are viewing David Terry's screen

View Options

Click here to maximize your session view

Enter Full Screen

TTC
Technology Transfer Centers
Funded by Substance Abuse and Mental Health Services Administration

Thank you for joining us today!

You will not be on video during today's session

Select a Speaker

- Speakers (Realtek(R) Audio)
- Same as System
- Test Speaker & Microphone...
- Leave Computer Audio
- Audio Settings...

Audio Settings

Click Here to adjust your audio settings

Chat

Raise Hand

Q&A

Click here to leave the session

Leave

Question and Answer

All questions (1) My questions (1)

You 07:35 AM

This is a test question!

You can switch between questions you've asked and those asked by others using these buttons.

You can use the Q&A feature to ask questions of the host and presenters. These questions can receive text or live responses. To begin asking a question use the field below. You can see a test question above.

Type your question here...

Zoom Webinar Chat

The chat feature will allow you to talk with other people in today's webinar.

The To field will tell you who will receive your message. Be mindful of who you are chatting to.

To: All panelists

Your text can only be seen by panelists

All attendees are muted. Today's session will be recorded.

School Mental Health Summit

*Emerging Stronger and More Resilient: Learning from the
COVID-19 Crisis*



2-Day Virtual Conference
August 31 – September 1, 2021



Northeast and Caribbean (HHS Region 2)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Day 1: Session 3

11:30 am-12:45 pm EST

Comprehensive School Mental Health: Addressing Elevated Stress to Trauma in Schools

Today's Sessions

Session 4: 1:15 pm – 2:30 pm EST

Taking Off the Mask: Showing Up as Your Authentic Self

Session 5: 2:45 pm – 3:45 pm EST

Social and Emotional Learning (SEL) Champions Pave the Way! Elevating Teacher Leaders to Support Sustainable SEL

The full schedule and individual Zoom links can be found on our conference website.

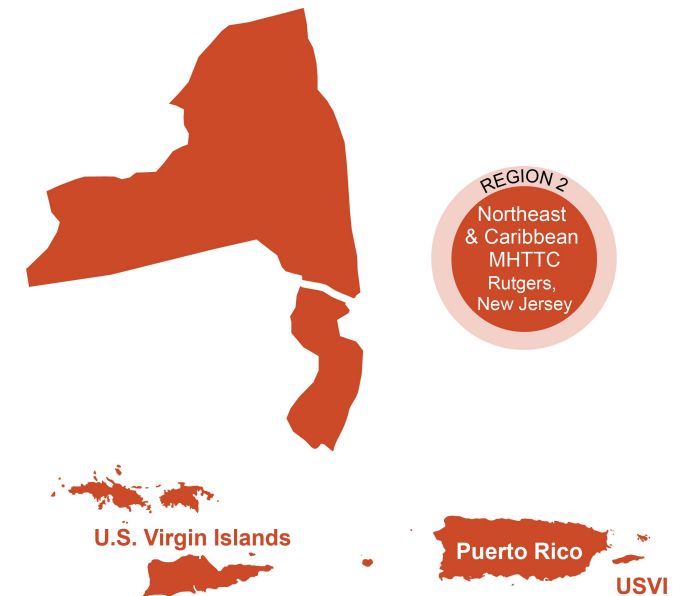
<https://mhttcschoolmentalsummit.rutgers.edu>

About Us

Northeast and Caribbean Mental Health Technology Transfer Center (MHTTC):

- Enhance capacity of behavioral health workforce to deliver evidence-based and promising practices to individuals with mental illnesses.
- Address full continuum of services spanning mental illness prevention, treatment, and recovery supports.
- Train related workforces (police/first responders, primary care providers, etc.) to provide effective services to people with mental illnesses.

Special focus on enhancing student mental health in schools.

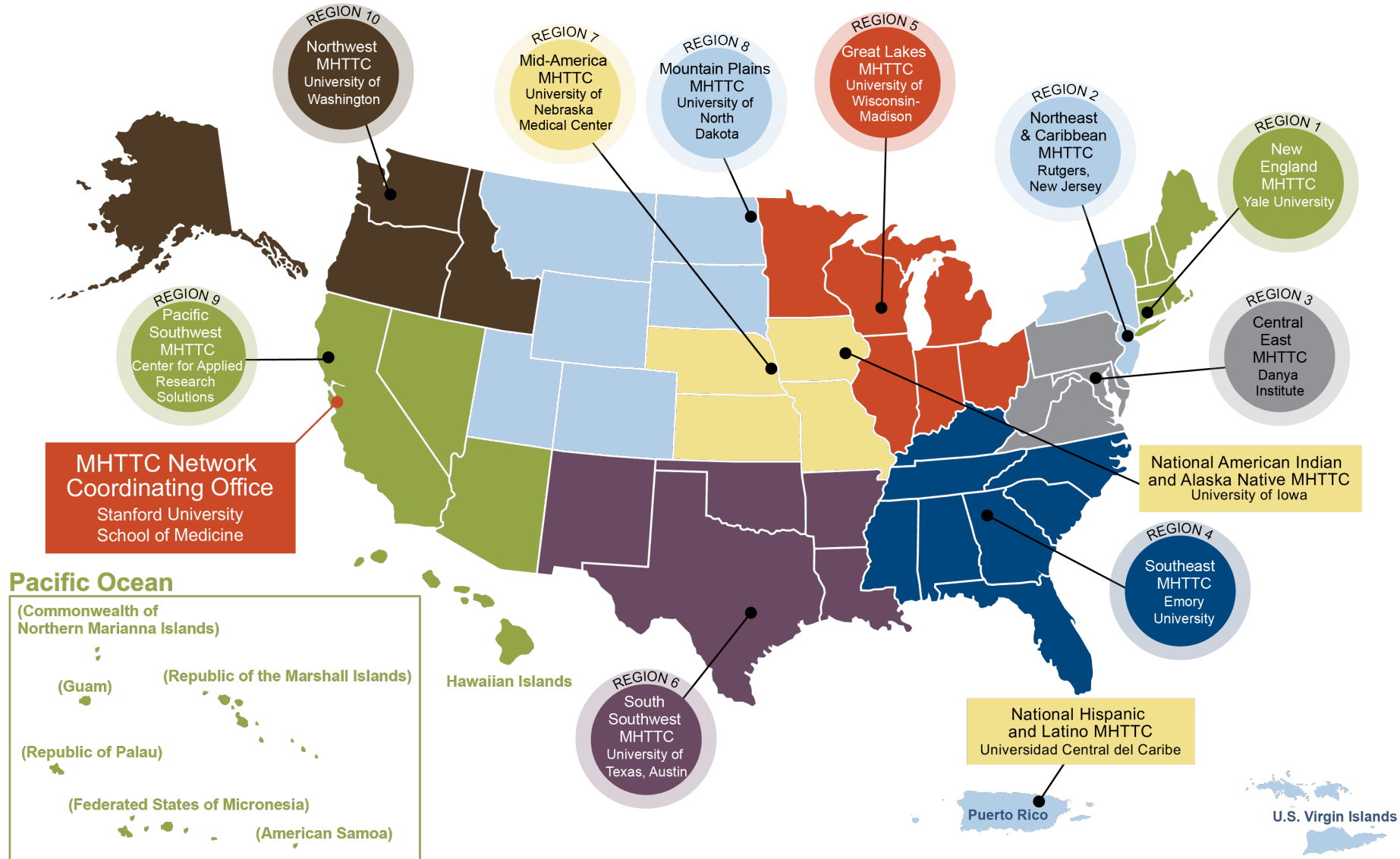




MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

MHTTC Network



School Mental Health Supplement

Supplemental funding was awarded to provide training and TA to teachers and school staff regarding student mental health (2018-2021)

Focus on:

- Importance of mental health supports in schools
- Capacity to recognize and identify mental health concerns in students
- Best models of school-based mental health services
- Linking, as needed, to community-based services



Trainings

- Youth Mental Health First Aid
- Trauma Informed Schools
- Cultivating Resiliency
- Suicide Prevention
- Social Emotional Learning
- Crisis Interventions
- School Refusal and Anxiety
- Self-Care

Technical Assistance

- Individualized plans with schools
- Implementation of SMH
- Resource Mapping
- Needs Assessment
- Teaming
- Assessment
- Tiered Supports
- Funding



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<https://bit.ly/2mpmpMb>

We Want Your Feedback!

- Our funding comes from the Substance Abuse and Mental Health Services Administration (SAMHSA), which requires us to evaluate our services. We appreciate your honest, ANONYMOUS feedback about this event, which will provide information to SAMHSA, AND assist us in planning future meetings and programs.

Feedback about this training will assist us in developing future trainings that are relevant to your professional needs. Therefore, your feedback counts!

Video Recording Information

- *Please Note:*

We will be recording this webinar and posting it to our website along with the presentation slides and any relevant resources.

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At the time of this presentation, Miriam Delphin-Rittmon served as Assistant Secretary for Mental Health and Substance Use at SAMHSA. The opinions expressed herein are the views of the speakers, and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.

This work is supported by grant H79SM081783 from the DHHS, SAMHSA.

Your Interactions With Us

- Question and Answers
 - Q & A will occur at the end of the presentation.
 - Type your questions in the Q & A feature in Zoom located on the task bar (hover over task bar).
 - Note: your question is visible to all participants.
- Chat and Polls
 - Throughout the webinar, we will be asking for your input.
 - Use the Chat or Poll features in Zoom located on the task bar.
 - You can control who can see your chat comments.

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

Our Presenter



Imad Zaheer, Ph.D

Trauma Informed Care (TIC) in Schools

A Multi-tiered School-Wide Approach

Imad Zaheer

Pediatric School Psychologists
St. John's University

Nurturing Environments Institute (NEI)



Today's Plan

- 1. Background on Trauma**
- 2. Framework for School Implementation**
 - Multi-tiered Systems of Support
- 3. Trauma Informed Care (TIC) in Schools Across Tiers**
- 4. Special considerations**

Trauma

Trauma Statistics

- In the United States during 2015, child protective services (CPS) agencies collectively substantiated approximately **680,000 cases** of **child maltreatment** and received **4 million reports** of **suspected maltreatment**



(U.S. Department of Health and Human Services, 2017).

Prevalence

- National prevalence surveys indicate that **13%** of all children experience **abuse** or **neglect** during the prior year with the lifetime prevalence (up to age 18) of approximately one in four
- Data collected by state CPS agencies shows that **one in eight children** in the United States experience **substantiated maltreatment** by age 18



Adverse Childhood Events

- Physical, verbal, sexual abuse
- Physical, emotional neglect
- Alcoholic parent
- Abuse of one's mother
- Family member in jail
- Mentally ill family members
- Loss of parent (divorce, death, or abandonment)



As number of ACEs increases, so does the risk of the following

- Alcoholism
- Chronic obstructive pulmonary disease
- Depression
- Fetal death
- Health related quality of life
- Illicit drug use
- Ischemic heart disease
- Liver disease
- Poor work performance
- Intimate partner violence
- Multiple sexual partners
- Sexually transmitted disease
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy
- Risk of sexual violence
- Poor academic achievement

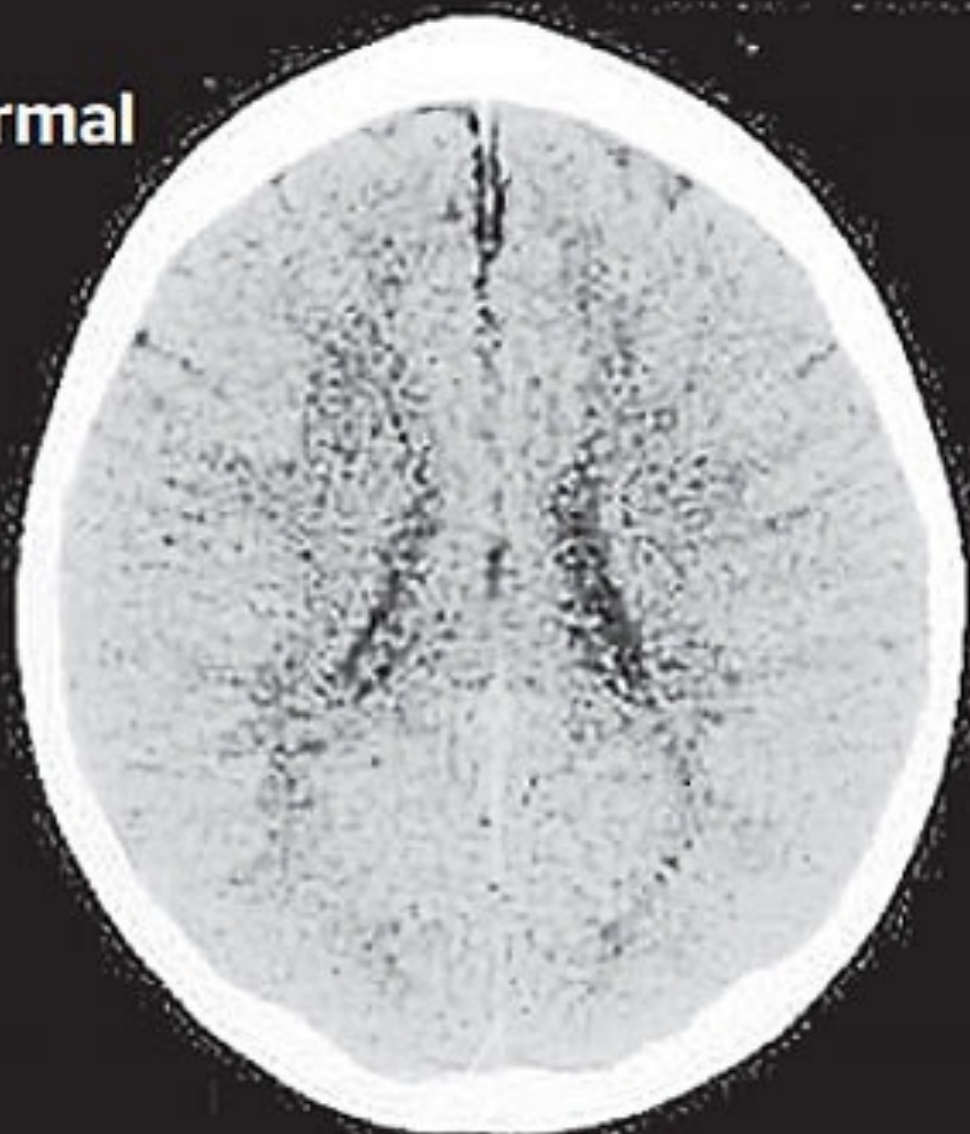
Types of Trauma and Impact

- If one accounts for other traumas such as **car accidents**, **community violence**, and **natural disasters**, the number of students experiencing trauma increases.
- **Not all children** who experience a potentially traumatic event develop traumatic stress symptoms
- However, **many children** develop a variety of psychological concerns that interfere with their educational performance, including but not limited to posttraumatic stress disorder (PTSD)

HOW STRESS CHANGES A CHILD'S BRAIN

3-YEAR-OLD CHILDREN

Normal



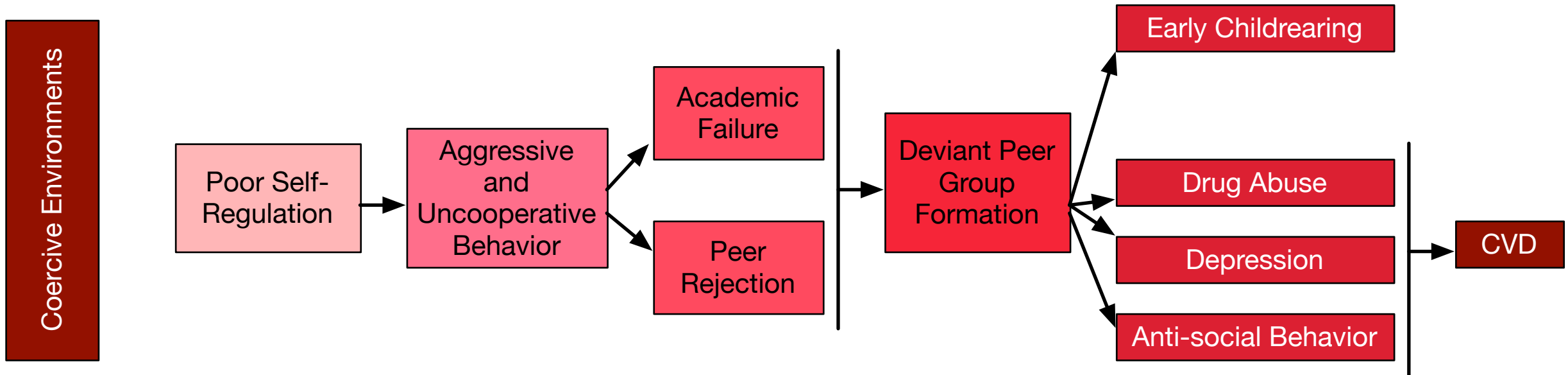
Extreme neglect



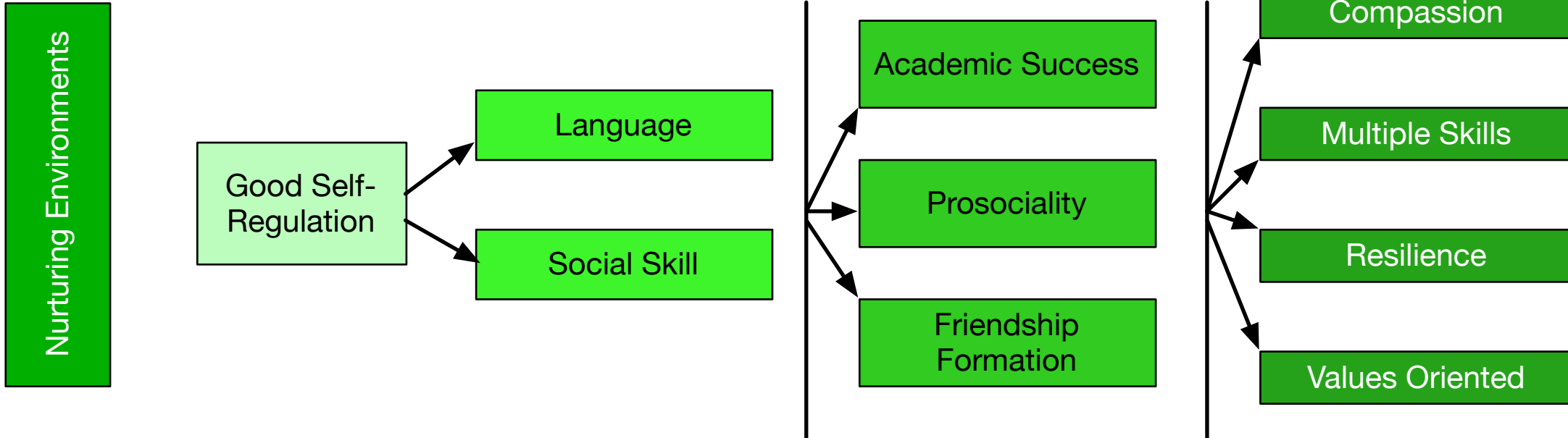
Threats Rewire the Brain

- Research from genetics/epigenetics, neuroscience and psychology are converging to show stress and threatening environments results in:
 - Impaired self-regulation
 - Hyper vigilance
 - Mistrust of others
 - Poor social relationships
 - Deviant Peer groups
 - Early childrearing
 - Depression
 - Obesity
 - Cardiovascular disease
- This pattern of behavior further increases the chances of stress and further physiological harm (Miller, Chen, Fok, et al., 2009)

Threats Rewire the Brain



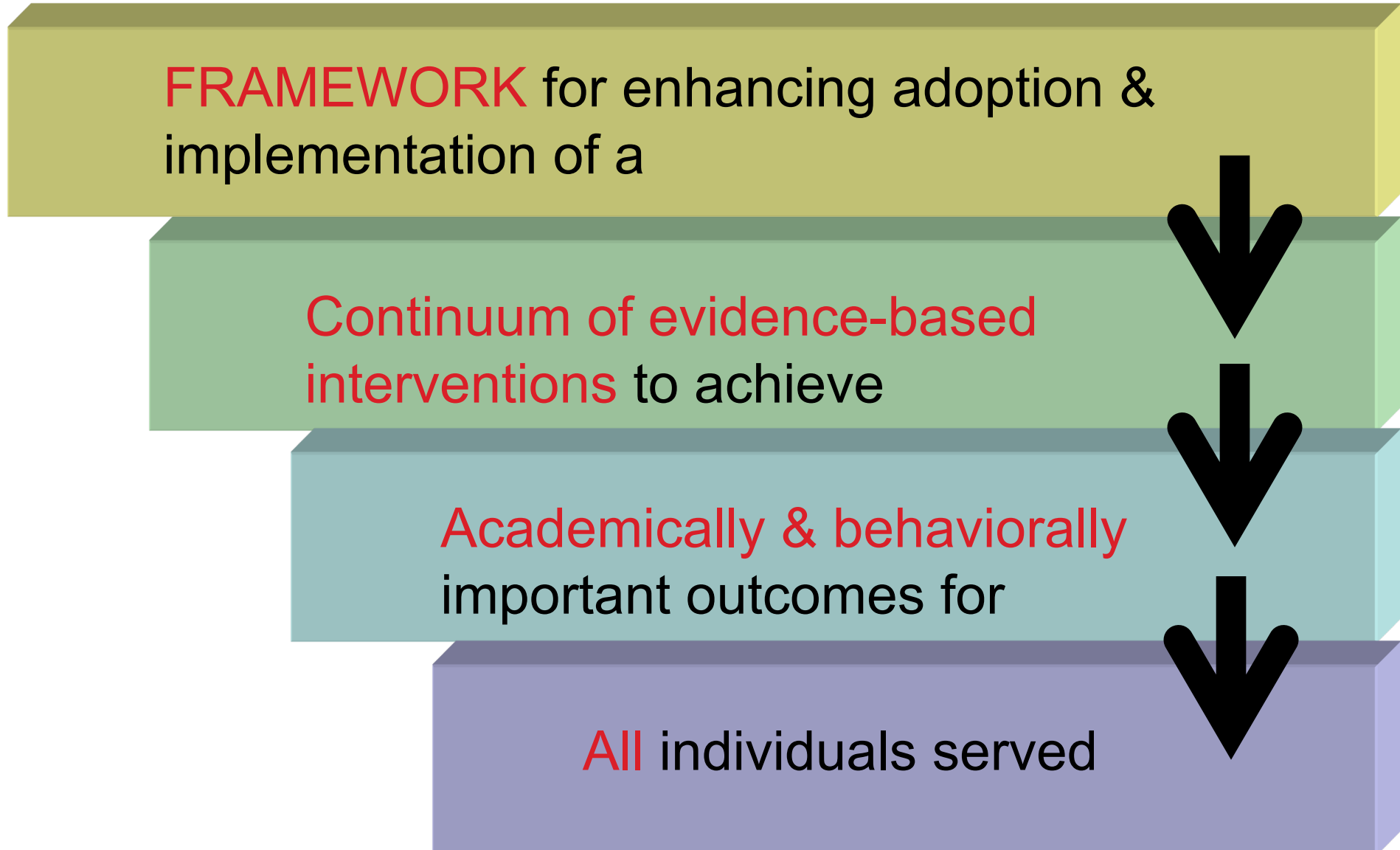
We can Rewire the Brain Back with Nurturing Care



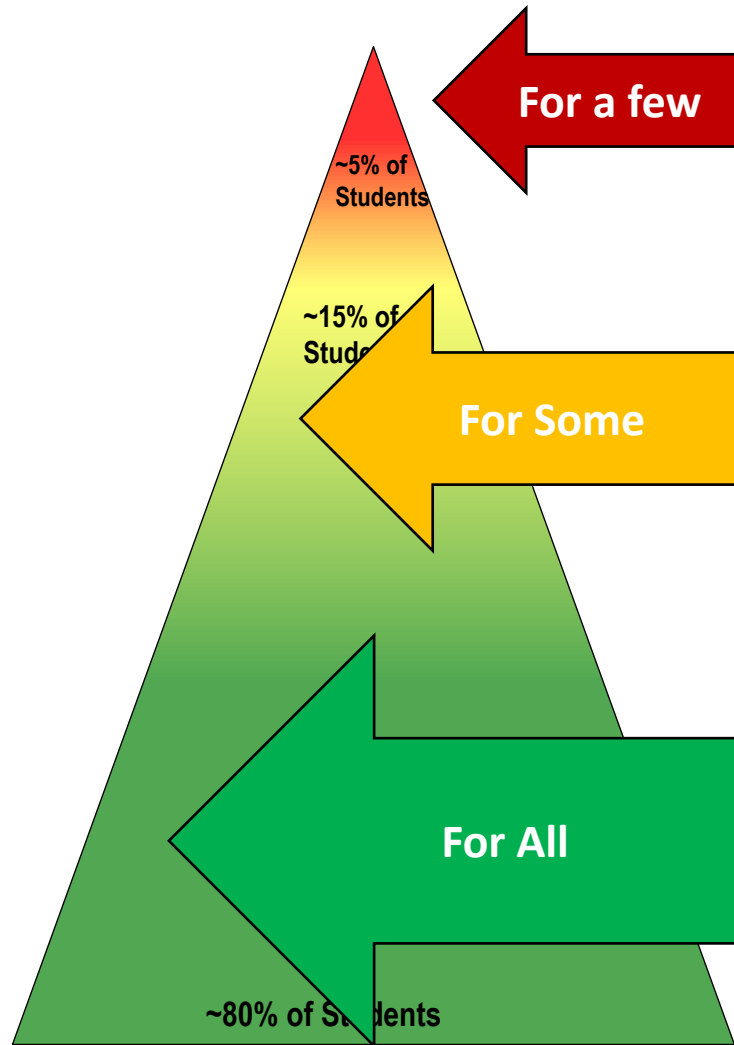
Multi-tiered Systems of Support (MTSS)

Framework for Effective Implementation

Multi-Tiered Systems of Support



Multi-Tiered Systems Approach



➤ Promotion and Prevention

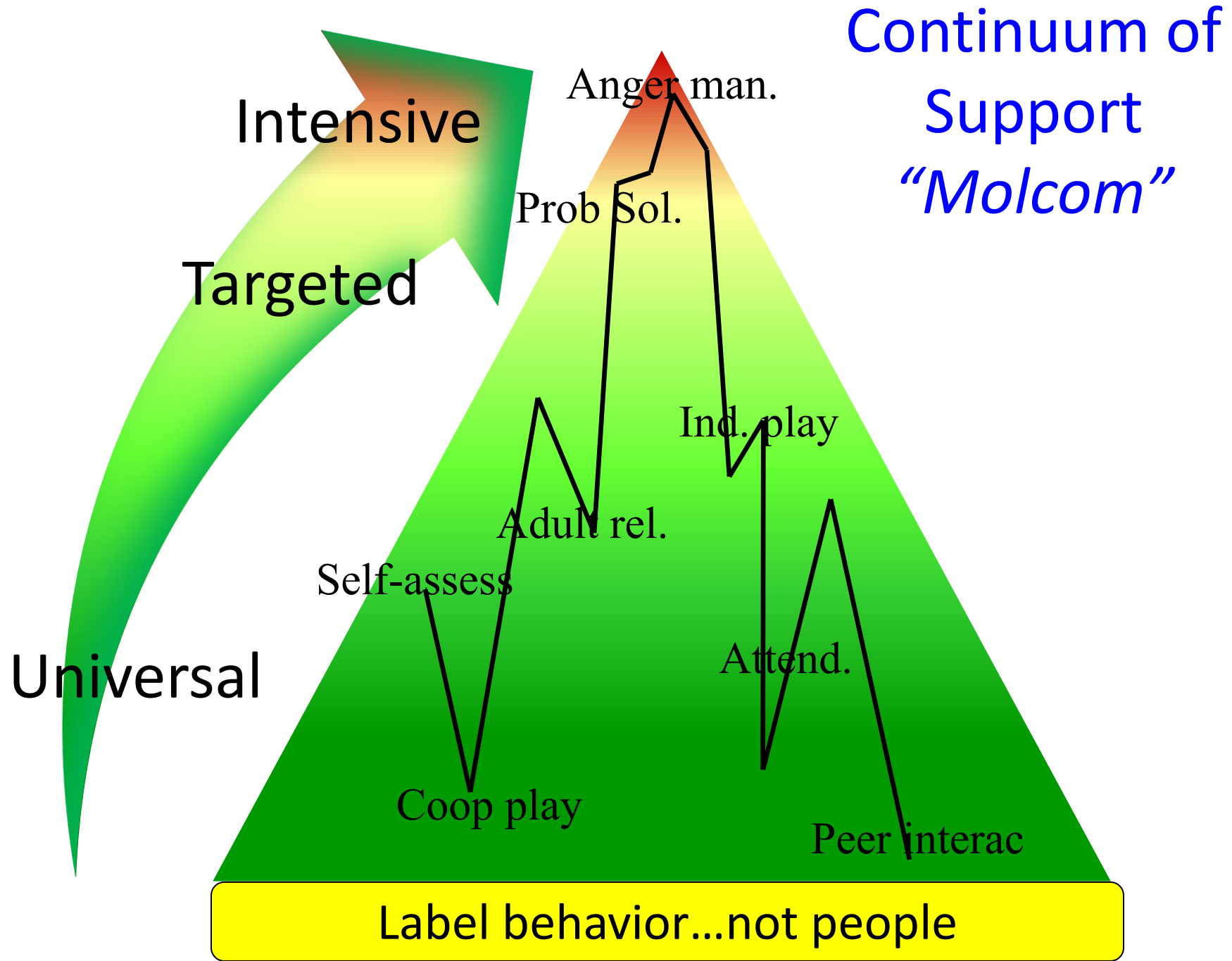
- Creating a positive, safe and supportive environment, teaching coping skills

➤ Multi-tiered support

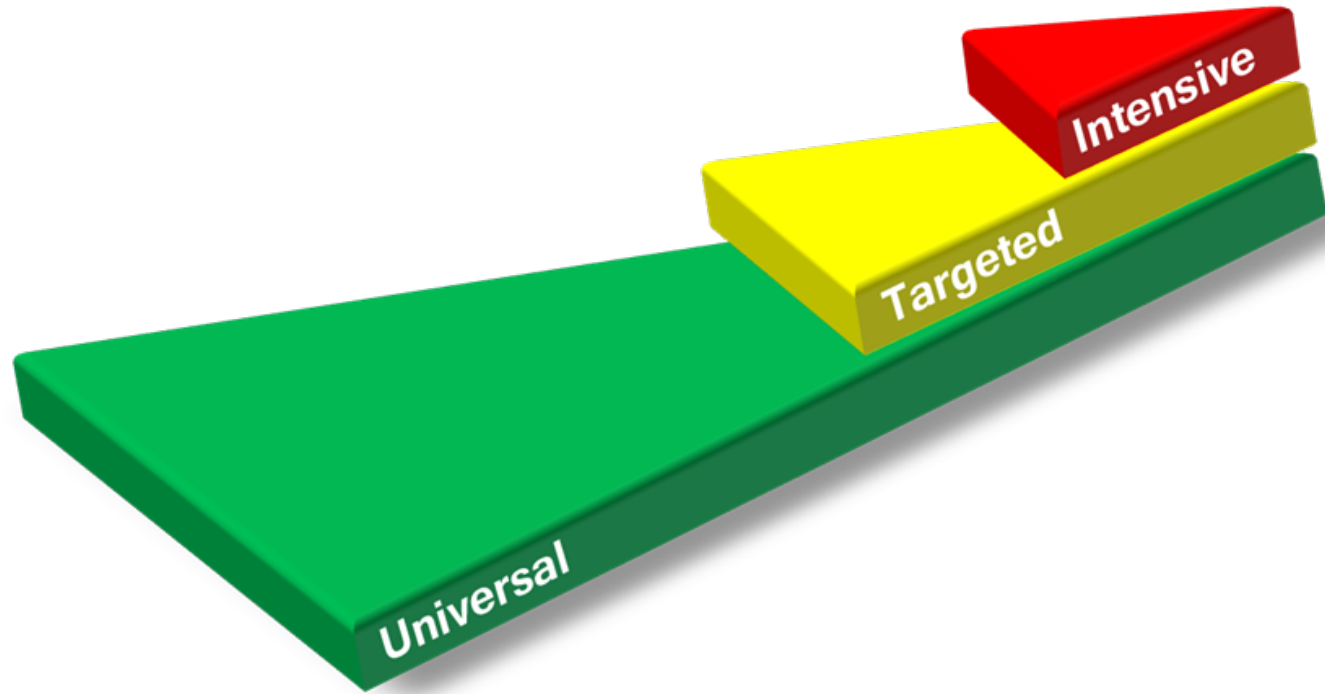
- Intensity of intervention matches magnitude of need

➤ Data-based decision-making

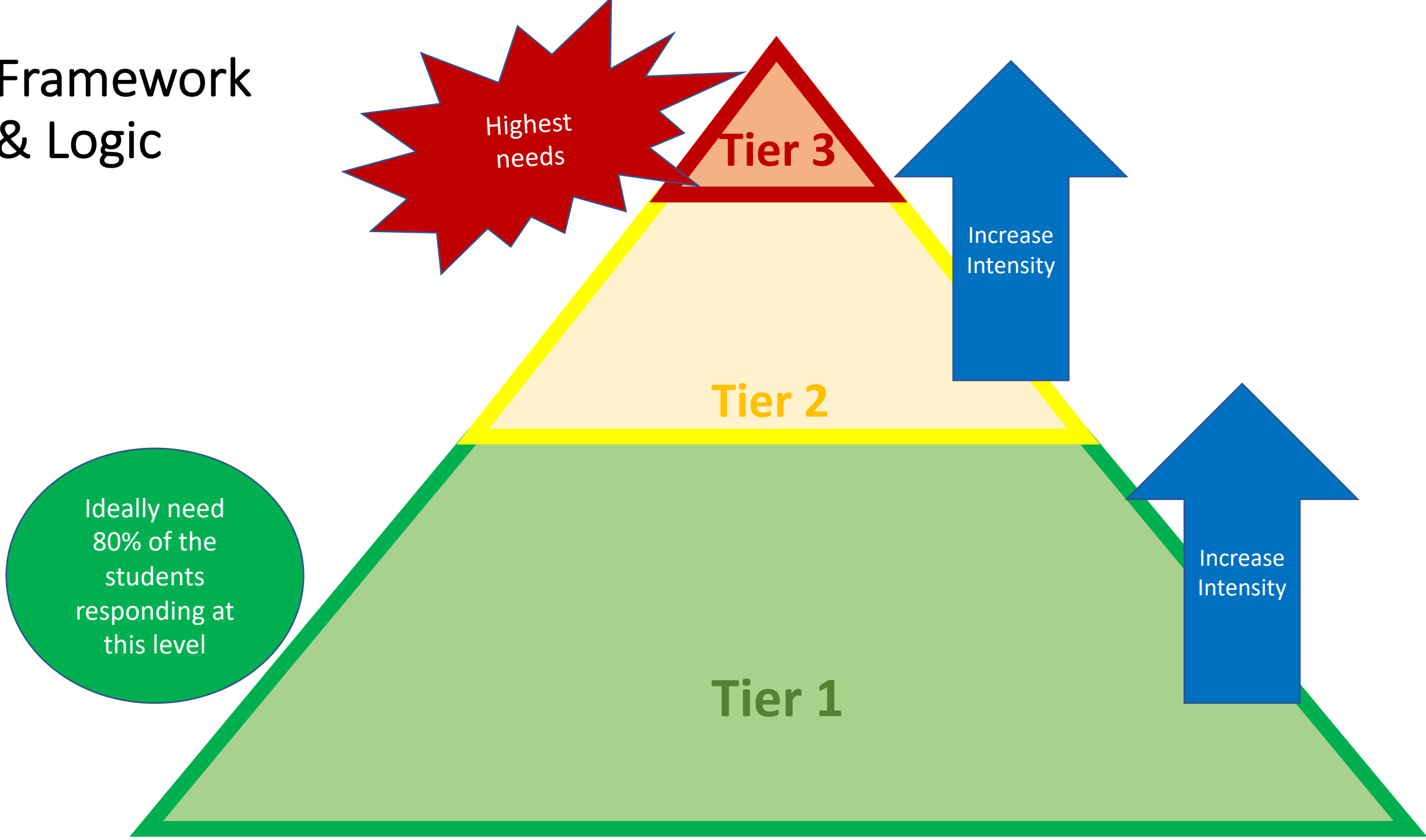
- Making adjustments to the environment and how staff interact with students



Layered



Framework & Logic



Highest needs

Tier 3

Increase Intensity

Tier 2

Increase Intensity

Tier 1

Ideally need 80% of the students responding at this level

A School-wide Multi-Tiered Systems framework

ACADEMIC Systems

Intensive, Individual Interventions

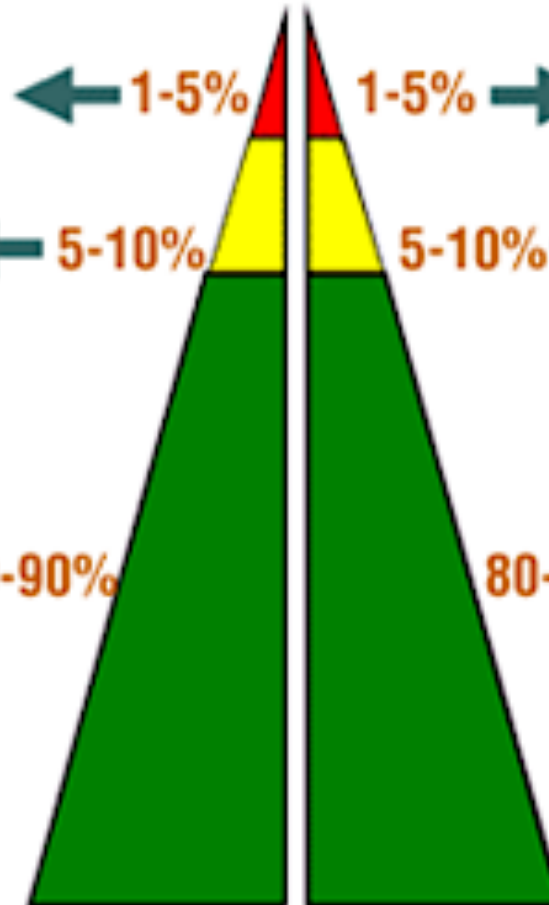
- Individual Students
- Assessment-based
- High Intensity

Targeted Group Interventions

- Some Students (at risk)
- High Efficiency
- Rapid Response

Universal Interventions

- All Students
- Preventive, proactive



BEHAVIORAL Systems

Intensive, Individual Interventions

- Individual Students
- Assessment-based
- Intense, durable procedures

Targeted Group Interventions

- Some Students (At-Risk)
- High Efficiency
- Rapid Response

Universal Interventions

- All Settings, all students
- Preventive, proactive



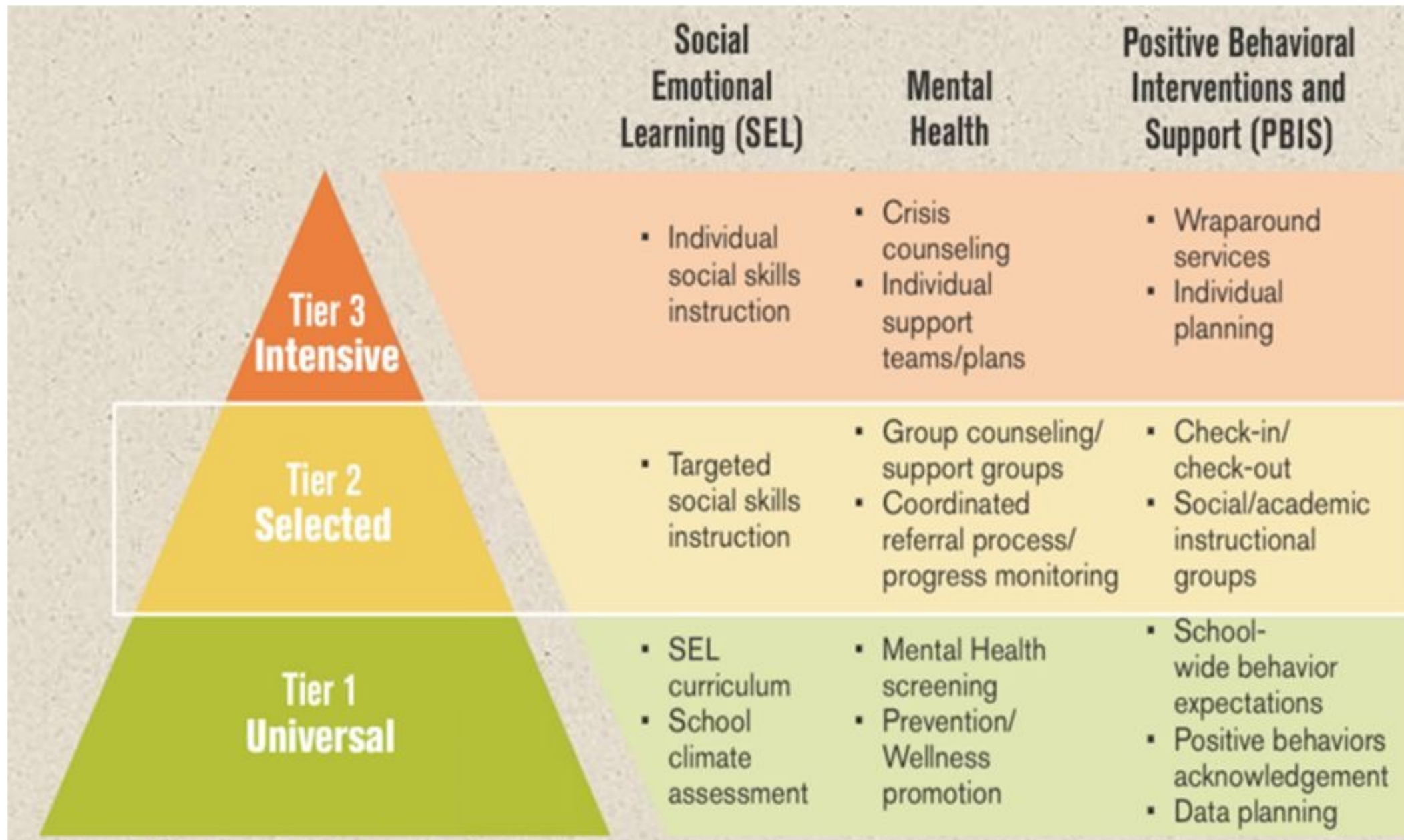
Comprehensive Approach

Youth Mental Health							
<i>Negative Indicators</i> (Mental Illness Symptoms)				<i>Positive Indicators</i> (Well-Being)			
Internalizing Problems (such as Anxiety and Depression)		Externalizing Behaviors (such as Defiance, Rule Violations, Substance Use)		Life Satisfaction and Positive Emotions (such as happiness and self-esteem)		Strong Social Relationships (positive friendship and supports)	
Trauma and other environmental stressors	Thinking errors, behavioral withdrawal	Risky/unsafe settings	Inconsistent rules and expectations across settings	Building blocks of well-being (gratitude, empathy, persistence)	Basic needs are met	Social and emotional skills	interactions and safe, nurturing settings (minimal bullying, high support)
<i>Risk Factors</i>				<i>Resilience Factors</i>			

Comprehensive Approach

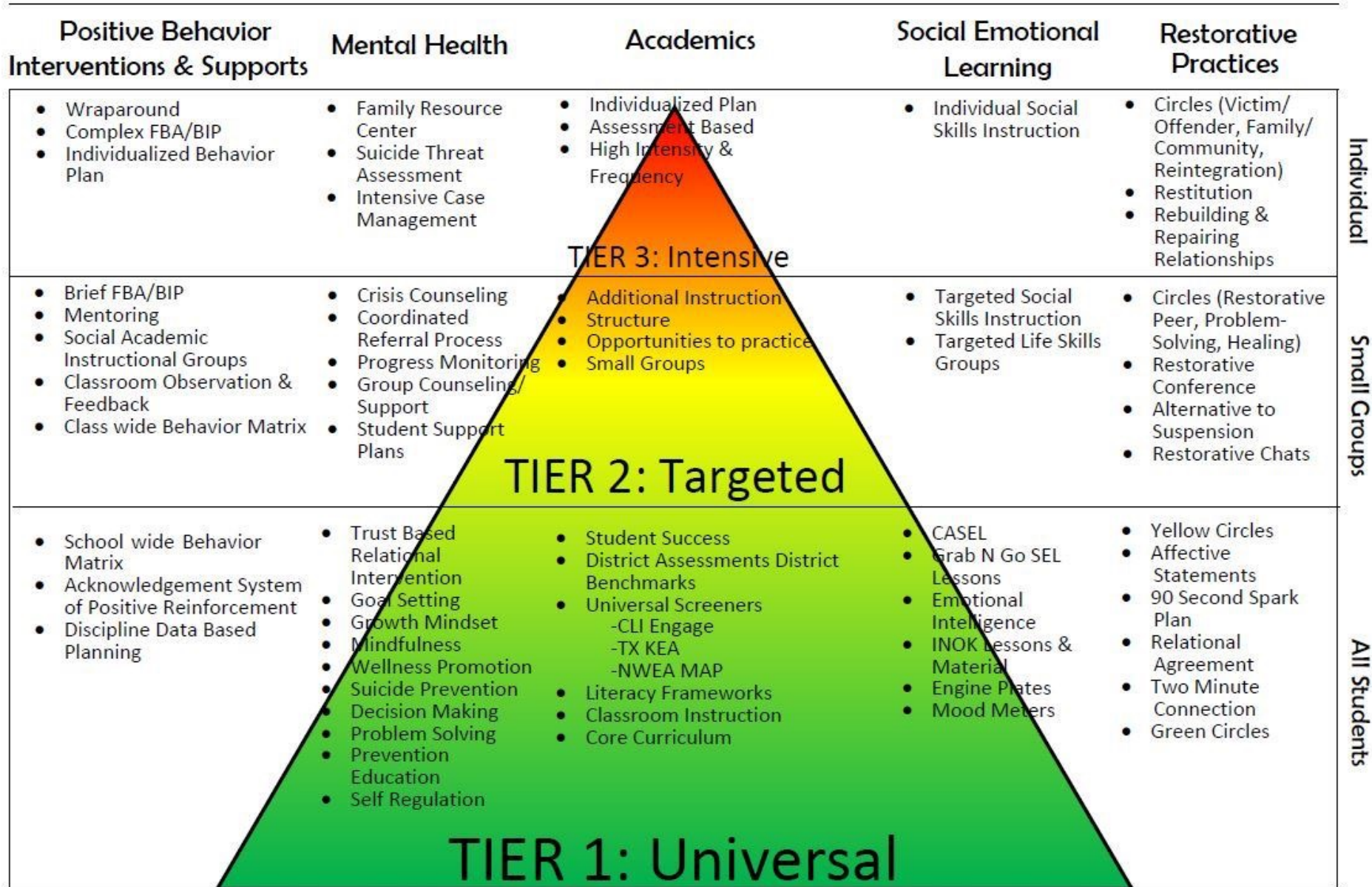
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MTSS: Coordinated 3-Tiered Practices



Multi-Tiered Systems of Support Framework

Alignment of Student Supports



GOAL: Prevention and support for the optimization of learning in the least restrictive environment.

What is Trauma Informed Care?

Integrating it into our Existing School Systems

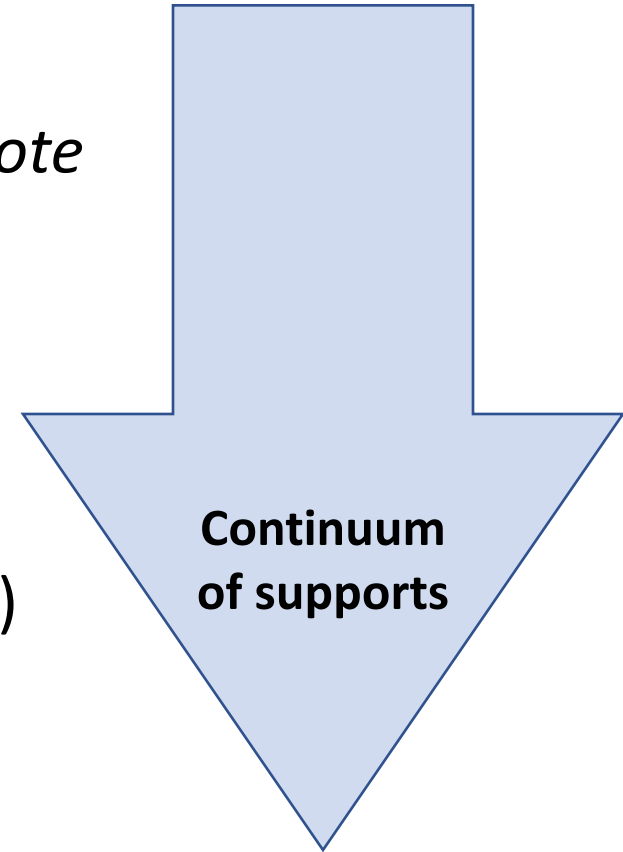
Trauma Informed Care (TIC)

- **Hard to define but broadly speaking**

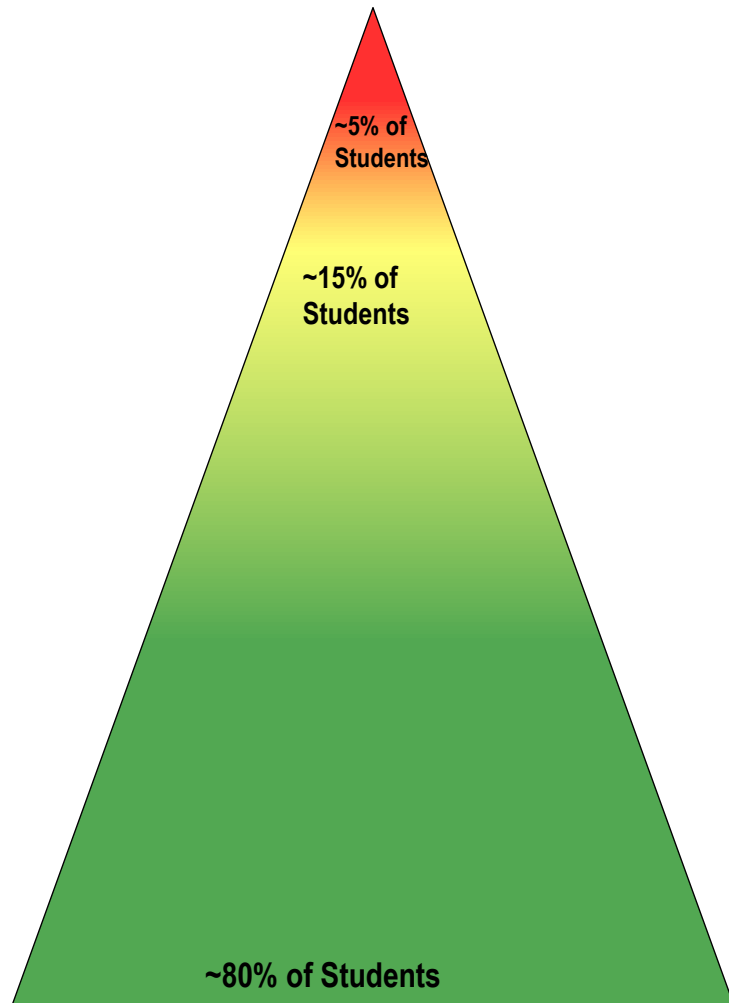
- *“Trauma-informed care is defined as practices that promote a culture of safety, empowerment, and healing.”*
- In need of specific and more concrete steps

- **Trauma Focused Treatments**

- Clinical treatments for traumatized individuals (i.e., PTSD)
- Trauma-Focused Cognitive Behavior Therapy
- Prolonged Exposure



MTSS & TIC



Intensified Individual Interventions

- TF-CBT, AF-CBT
- FBAs and BIPS

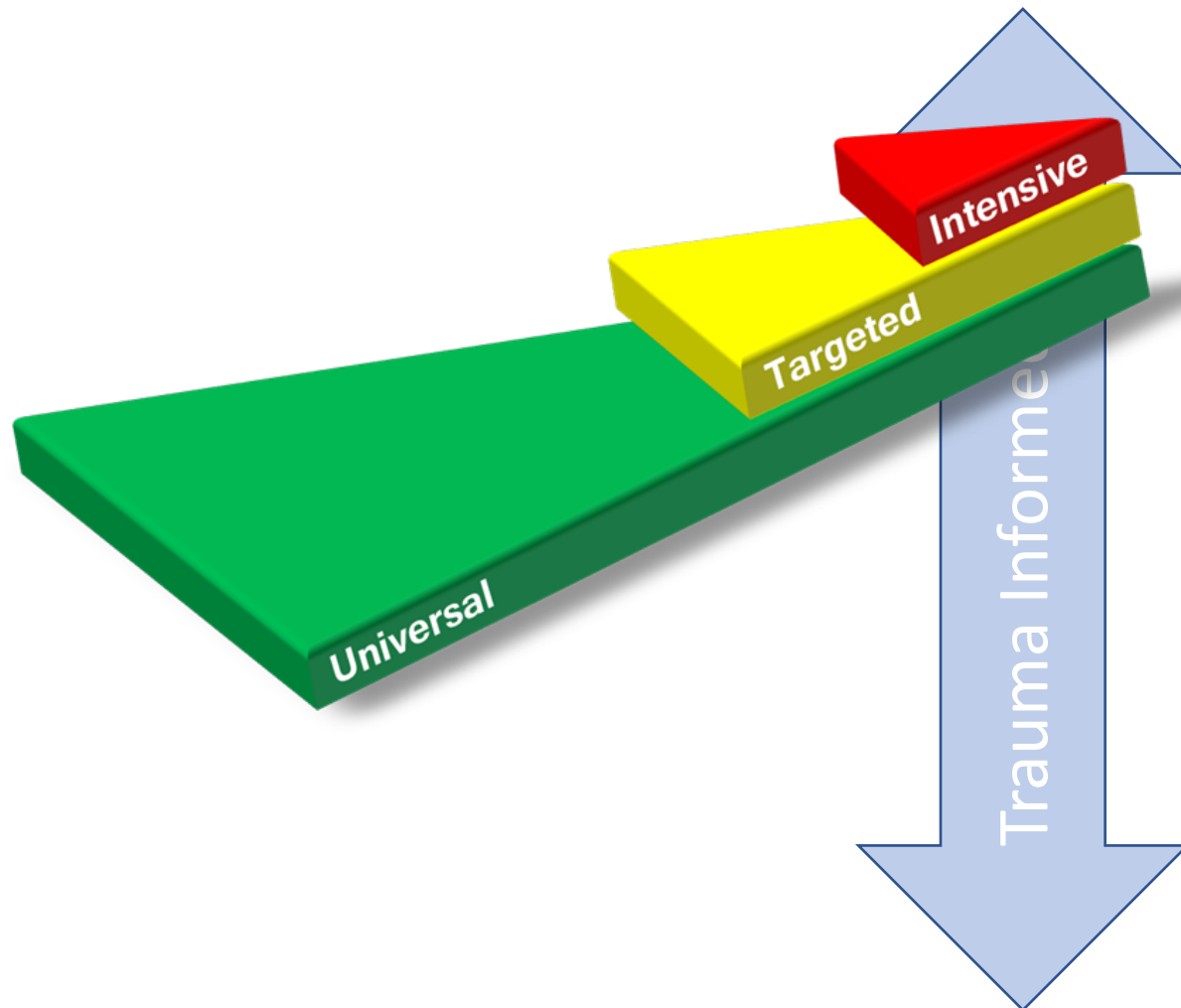
Small Group Treatments

- CICO, Social Skills
- CBITS

School and Class Wide practices

- PBIS & SEL
- Trauma Informed Lens
- Psychological First Aid, 4 R's of Trauma

MTSS & TIC



Trauma Focused
Treatments

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Tier 1: PBIS & SEL

- Creating Safe and Consistent Environment
- Nurturing Positive School Culture, Relationships and connectedness
- Explicit instruction around social, emotional, and behavioral expectations

- **Teaching**
 - Emotion identification,
 - Emotion regulation
 - Social problem-solving
- **Promote**
 - Resiliency,
 - Adaptive coping,
 - Well-being
- For all students, including those who have been exposed to trauma

Tier 1: TIC

Trauma-informed teaching recognizes the frequency and classroom impacts of childhood trauma, focuses on relationship building and emotional regulation instruction instead of punishment, and emotional safety and consistency, and tries to support the “whole student” in the classroom.

Changing Our Lens

Trauma Informed Lens

- Shifting from “discipline problems” to “social emotional learning challenges”
- From “what’s wrong with you” to “what happened?” “How can I help?”



Tier 1: 3 E's: Events, Experiences, Effects

EVENT

Event and circumstances may include the actual or extreme threat of physical or psychological harm (i.e. natural disasters, violence, etc.) or severe, life-threatening neglect for a child that imperils healthy development.

EXPERIENCE

The individual's **experience** of these events or circumstances helps to determine whether it is a traumatic event. A particular event may be experienced as traumatic for one individual and not for another (e.g., a child removed from an abusive home experiences this differently than their sibling; one refugee may experience fleeing one's country differently from another refugee; one military veteran may experience deployment to a war zone as traumatic while another veteran is not similarly affected).

EFFECT

The long-lasting adverse **effects** of the event are a critical component of trauma. These adverse effects may occur immediately or may have a delayed onset. The duration of the effects can be short to long term.

Tier 1: 4 R's: Realize, Recognize, Respond and Resist re-traumatization

Realize

All people at all levels of the organization or system have a basic **realization** about trauma and understand how trauma can affect families, groups, organizations, and communities as well as individuals.

Recognize

People in the organization or system are also able to **recognize** the signs of trauma. These signs may be gender, age, or setting-specific and may be manifest by individuals seeking or providing services in these settings

Respond

The program, organization, or system **responds** by applying the principles of a trauma-informed approach to all areas of functioning. The program, organization, or system integrates an understanding that the experience of traumatic events impacts all people involved, whether directly or indirectly.

Resist Re-Traumatization

A trauma-informed approach seeks to **resist re-traumatization** of clients as well as staff. Organizations often inadvertently create stressful or toxic environments that interfere with the recovery of individual, the well-being of staff and the fulfillment of the organizational mission

Tier 1: TIC

Psychological First Aid (free Training)

<https://www.nctsn.org/treatments-and-practices/psychological-first-aid-and-skills-for-psychological-recovery/about-pfa>

CORE ACTIONS



Contact &
Engagement



Safety
&
Comfort

REMEMBER:

- 🐾 Work within a team.
- 🐾 Protect survivors from harm.
- 🐾 Be calm and compassionate.
- 🐾 Listen and be flexible.
- 🐾 Respect culture and diversity.
- 🐾 Give clear and reliable information.
- 🐾 Know local available resources.
- 🐾 Help survivors help themselves.
- 🐾 Know your limits.
- 🐾 Take care of yourself.

NCTSN

The National Child
Traumatic Stress Network



PFA Mobile™ can be downloaded on
mobile Apple and Android devices

This project was also funded by SAMHSA,
US Dept. of Health and Human Services
Illustrations by Dr. Bob Seaver

PSYCHOLOGICAL FIRST AID

Are you ready to respond?

GET **P**REPARED

GET **F**OCUSED

GET INTER**A**CTIVE

GET

PFA®



www.NCTSN.org
learn.nctsn.org

CORE ACTIONS



Stabilization

CORE ACTIONS



Practical Assistance

CORE ACTIONS



Information on Coping



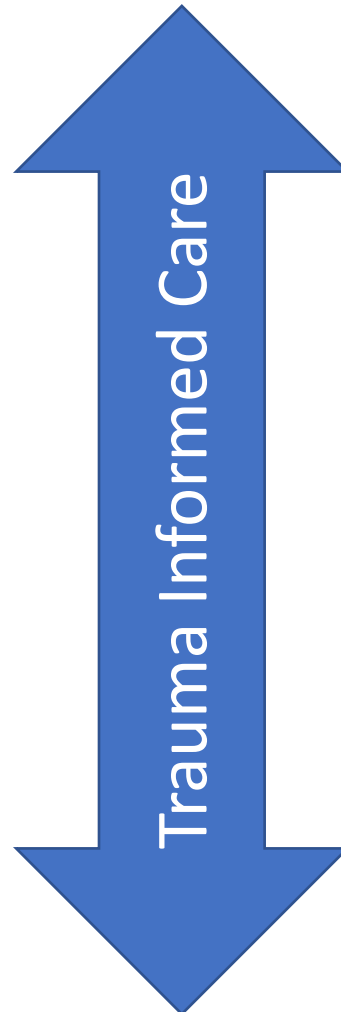
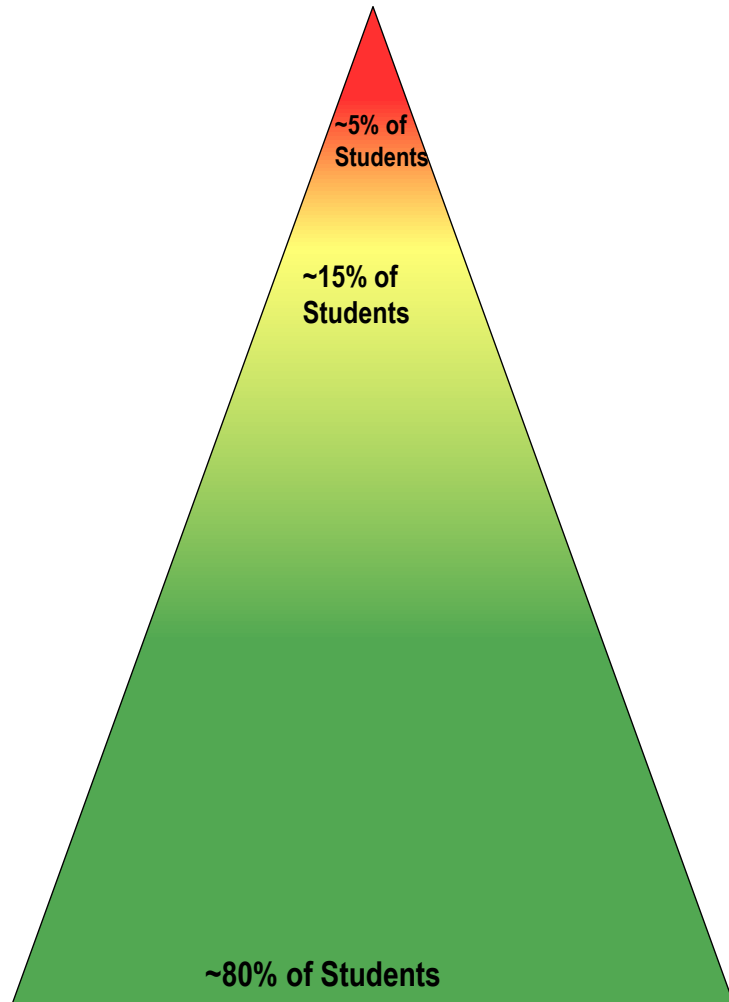
Information Gathering

Connection with Social Supports



Linkage with Collaborative Services

MTSS & TIC



Intensified Individual Interventions

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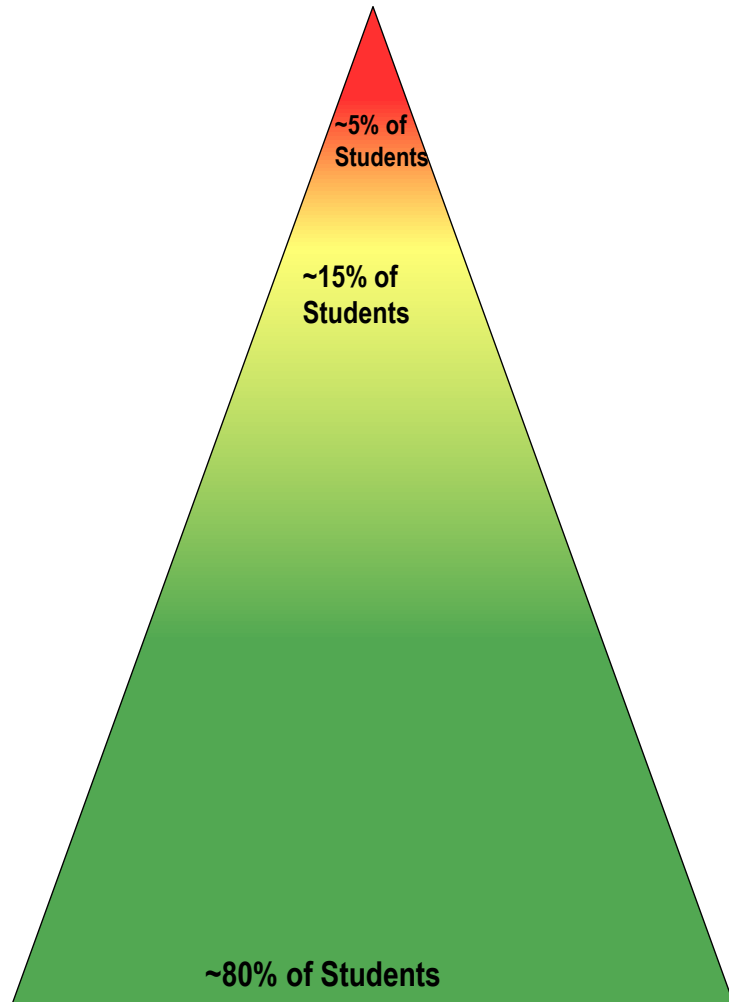
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Tier 2 & 3: Interconnected Systems Framework (ISF)

ISF provides a way for schools to link up with community services to collaborate on these services

- School based teams with outside service providers, family, and community members
- Collaborative across a continuum of supports
- Find common metrics to measure success



Pacific Southwest (HHS Region 9)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Fact Sheet

INTERCONNECTED SYSTEMS FRAMEWORK 201: WHEN SCHOOL MENTAL HEALTH IS INTEGRATED WITHIN A MULTI-TIERED SYSTEM OF SUPPORT: WHAT'S DIFFERENT

BY SUSAN BARRETT, LUCILLE EBER, KELLY PERALES AND KATIE POHLMAN

OSEP TECHNICAL ASSISTANCE CENTER ON PBIS

Tier 2 & 3: Trauma Treatments

Trauma treatments (require trauma and mental health experts)

- **CBITS**- Cognitive Behavioral Interventions for Trauma in Schools
 - Made for school-based implementation
 - Not replacement for full treatment (tier 2)
- **TF-CBT**- Trauma-Focused Cognitive Behavior Therapy
- **AF-CBT**- Alternative for Families: Cognitive Behavioral Therapy

School

- High intensity, specialized
- Assessment-based
- Individualized (e.g., functional behavioral assessment)

- High efficiency
- Rapid response
- Group systems
- Specialized supports (e.g., check-in/check-out)

- Whole school, all classrooms
- Preventive, proactive
- Clear expectations taught to all students
- Reinforcement & correction systems
- Data-based decisions

Family

- Family Check-Up
- Parent support sessions
- Parent management training
- Community referrals

- Increased parent integration into check-in/check-out
- Attendance & homework support
- Home-school behavior-change plans
- E-mails & text msgs home

- Family Resource Center
- Parenting materials
- Positive family outreach
- Parent screening for student needs

Linking
Systems

1–5%
**Tertiary
Indicated**

5–10%
**Secondary
Selected**

80–90%
**Primary
Universal**

Figure 1
An Integrative Model for Linking Prevention and Treatment Research

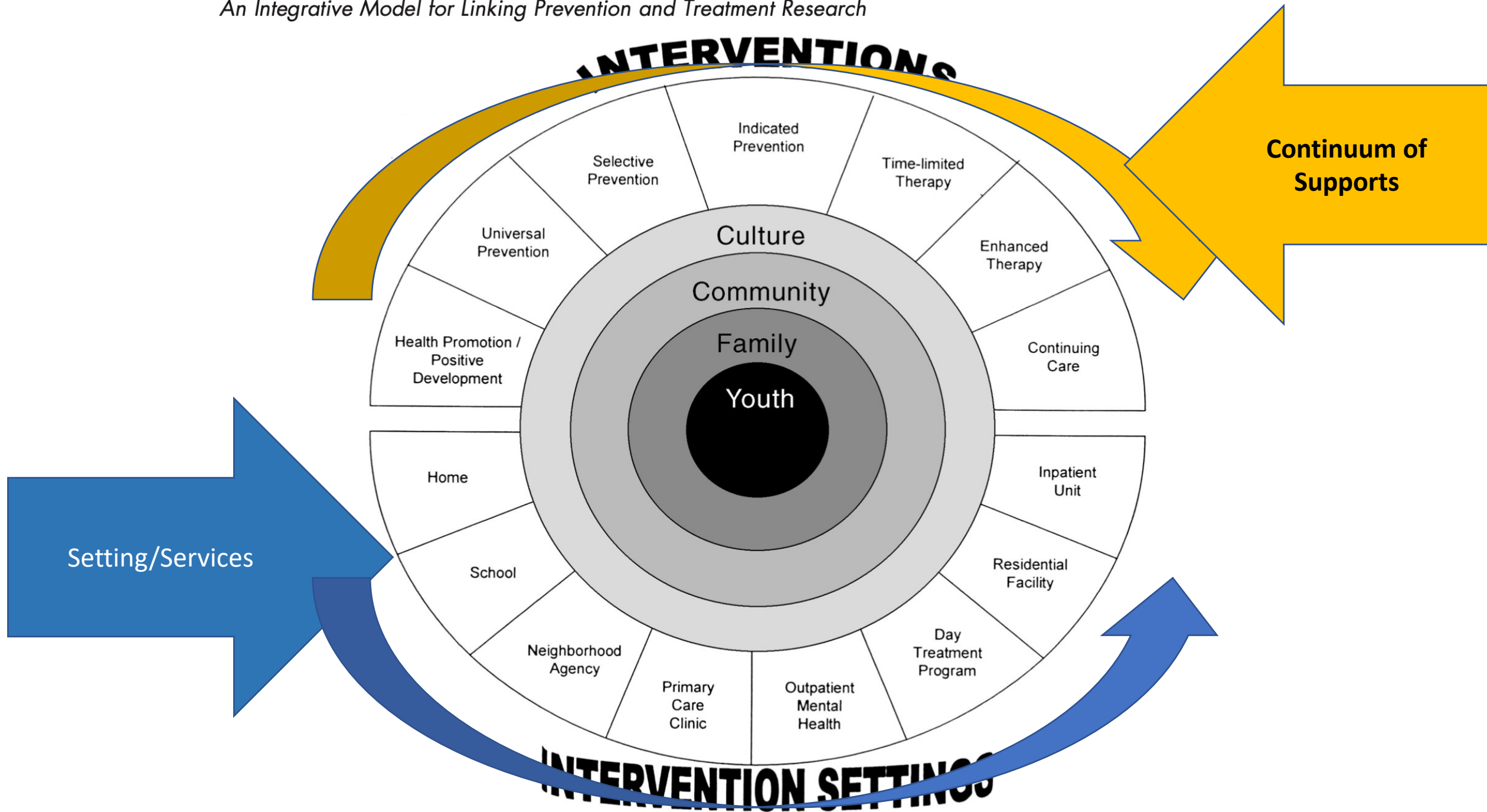


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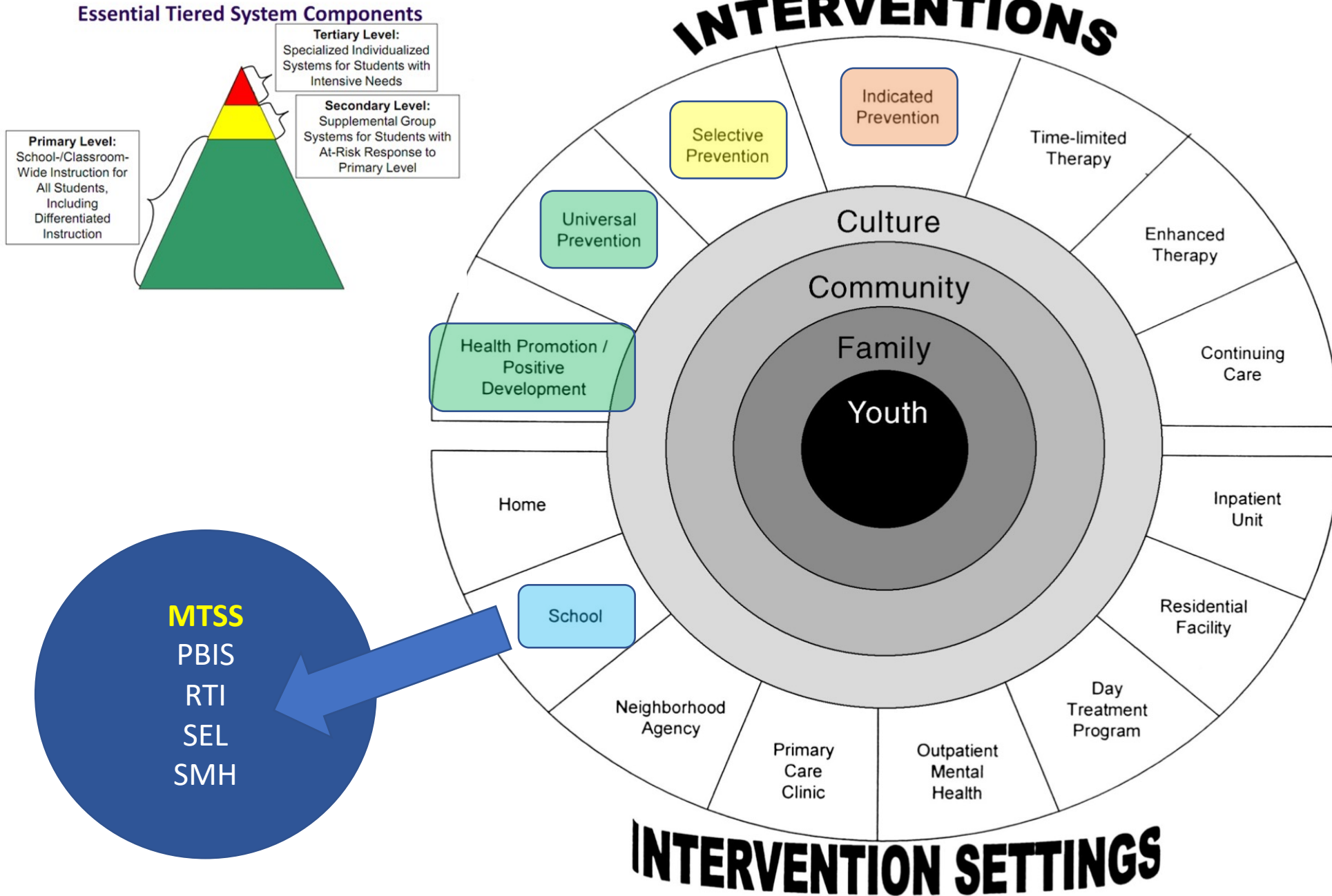
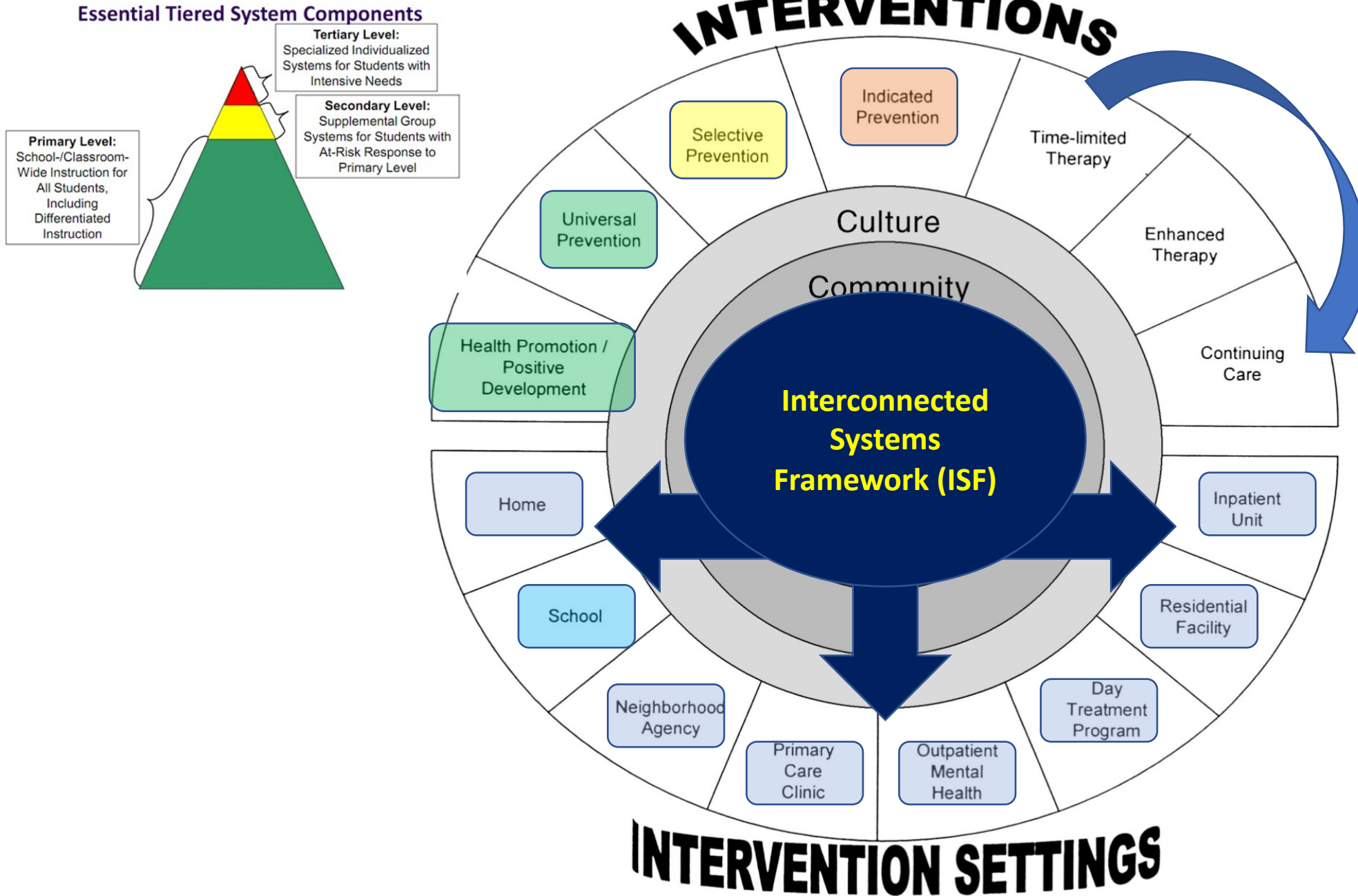


Figure 1
An Integrative Model for Linking Prevention and Treatment Research



Special Considerations

Special Considerations

- **Secondary Trauma**

- **Post traumatic growth**

- **Academics are important (eventually)**

Special Considerations

- **Secondary Trauma**

- Take care of yourself
- Helping others with trauma can lead to your own traumatic experience
- Same skills covered earlier apply to you

- **Post traumatic growth**

- Some individuals come out stronger on the other side if provided a nurturing and effective environment

- **Academics are important**

- Neglecting academics or forgetting about them can lead to more trauma than the original event

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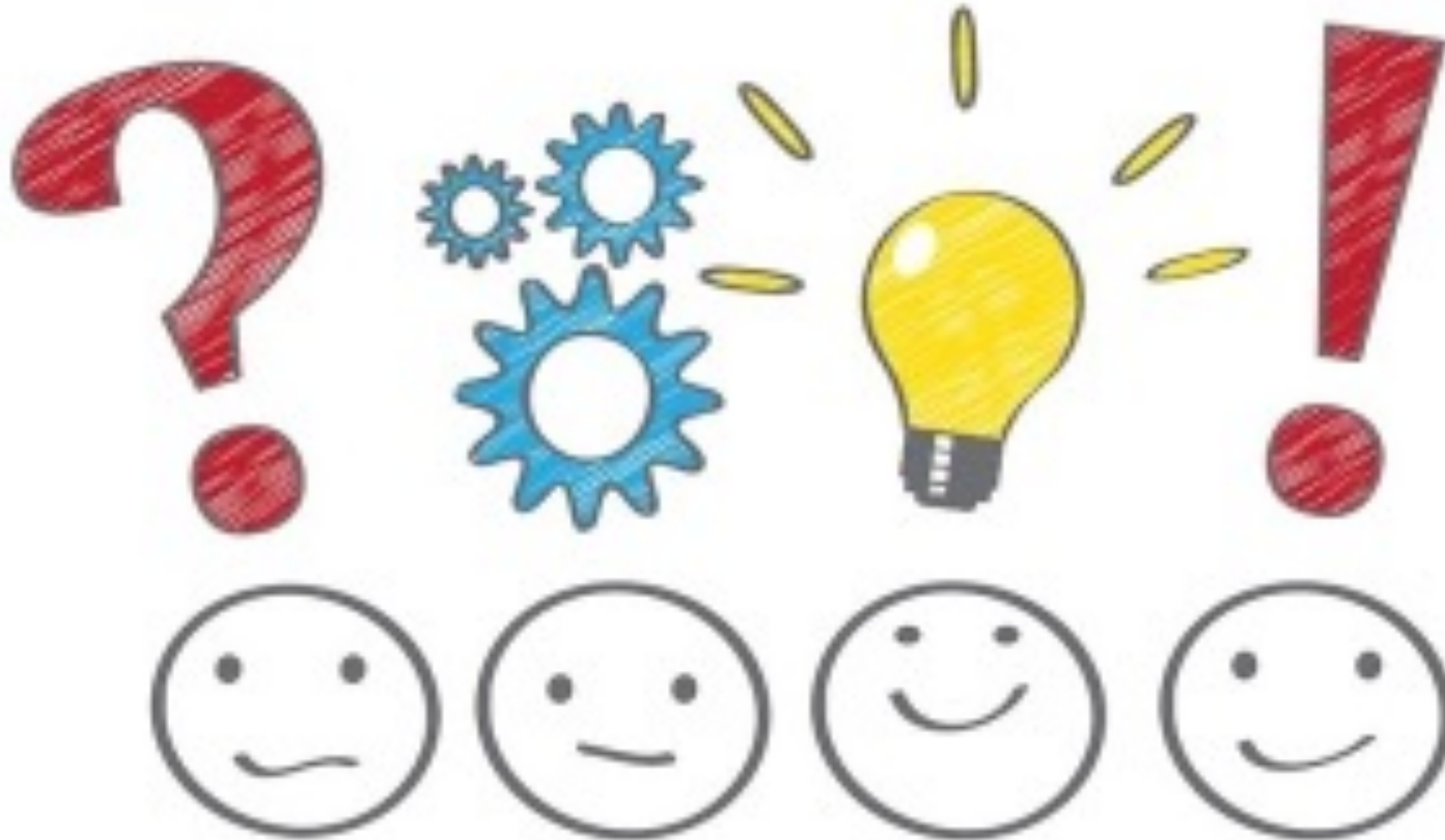
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Phew



Questions, Thoughts, Ideas or Comments



Thank you!

Contact

Imad Zaheer, Ph.D.

imadzaheer@gmail.com



Question and Answer



Please enter any questions for presenters using the Q&A feature in the toolbar.

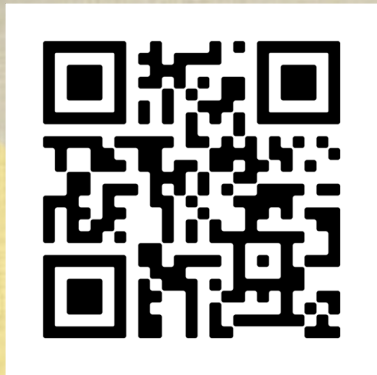
Evaluation Information

- The MHTTC Network is funded through SAMHSA to provide this training. As part of receiving this funding we are required to submit data related to the quality of this event.
- At the end of today's training please take a moment to complete a brief survey about today's training.



We Want to Hear From You!

- Guide our educational, training, and technical assistance efforts
- Tell us your training needs
- Responses are anonymous
- Use the QR code or link in follow-up email



**TRAINING NEEDS
ASSESSMENT**



Resources

- Helplines and Support
- National Suicide Hotline - 1-800-273-8255
- NAMI - 1-800-950-NAMI (6264) or info@nami.org
- Mental Health America- 1-800-273-TALK (8255), text MHA to 741741
- SAMHSA's National Helpline - referral and information - 1-800-662-HELP (4357)
- SAMHSA's Disaster Distress Helpline 1-800-985-5990 or text TalkWithUs to 66746

Next Session:

**Taking Off the Mask:
Showing Up as Your Authentic Self**

1:15 pm- 2:30 pm EST

Connect With Us

- Phone: (908) 889-2552
- Email: northeastcaribbean@mhttcnetwork.org
- Website:
<https://mhttcnetwork.org/centers/northeast-caribbean-mhttc/home>

- *Like and follow us on social media!*
- Facebook: Northeast & Caribbean MHTTC
- Twitter: @necmhttc
- LinkedIn: @Northeast and Caribbean MHTTC



Northeast and Caribbean (HHS Region 2)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

SAMHSA
Substance Abuse and Mental Health
Services Administration