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The screenshot shows a Zoom Webinar interface with several key elements and annotations:

- Header:** "Zoom Webinar" and "You are viewing David Terry's screen".
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- Q&A Window:** A "Question and Answer" window is open, showing a test question: "This is a test question!". It includes tabs for "All questions (1)" and "My questions (1)", and a text input field labeled "Type your question here...".
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Northwest (HHS Region 10)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Lunch, Listen, Learn

COVID-19 Back-to-Classroom THINK Toolbox and New Resources for School Mental Health for the 2021-2022 School Year

September 10, 2021

Kira Mauseth, PhD

Korbett Mosesly

Katrice Thabet-Chapin, M.Ed., Ed.S., NCSP

Rayann Silva, MEd & Kelcey Schmitz, MEd



Land Acknowledgement

The University of Washington SMART Center and Northwest MHTTC acknowledge that we learn, live, and work on the ancestral lands of the Coast Salish people who walked here before us, and those who still walk here. We are grateful to respectfully live and work on these lands with the Coast Salish and Native people who call this home.

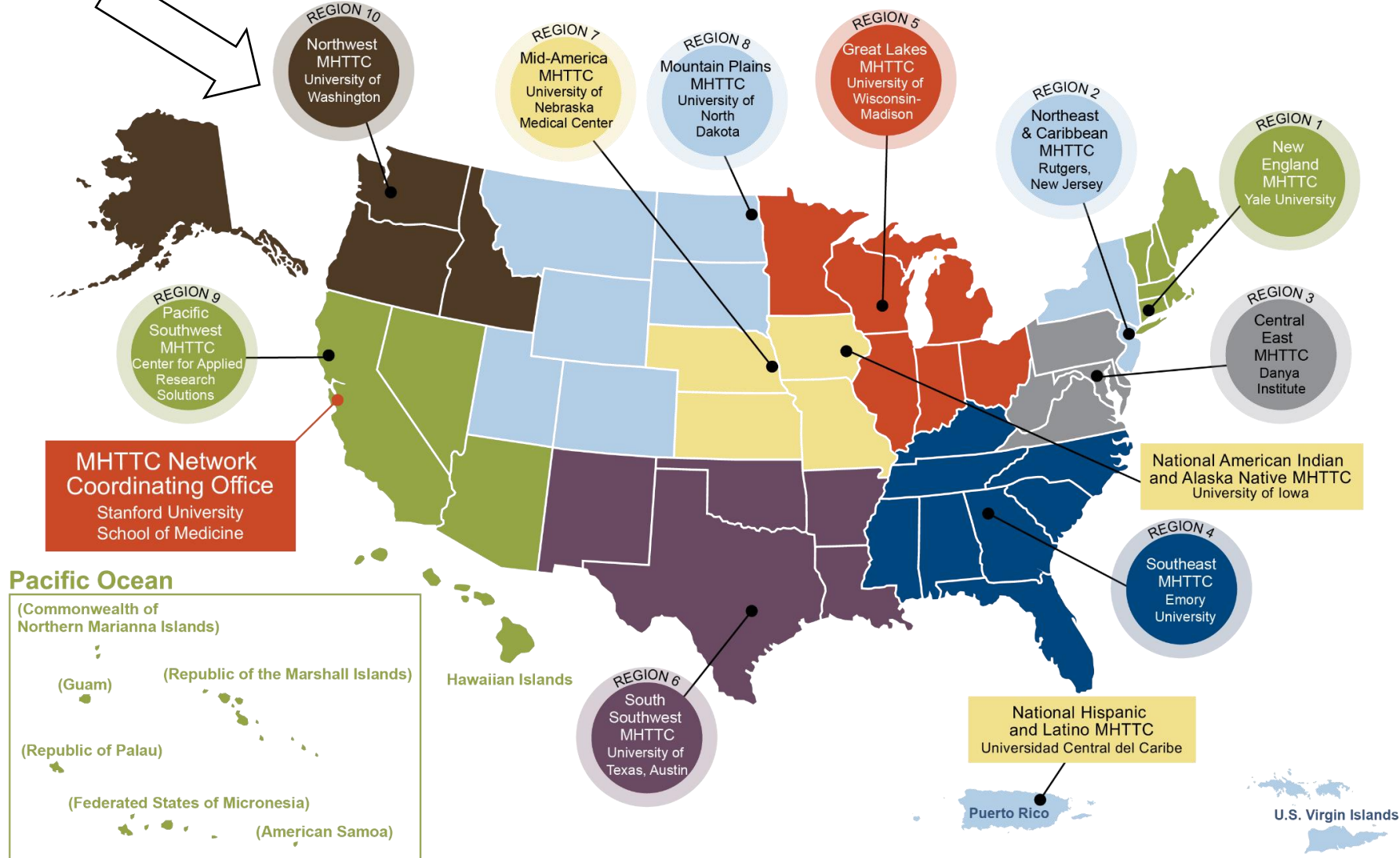
Mental Health Technology Transfer Center (MHTTC) Network



MHTTC

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

MHTTC Network



Visit the MHTTC website at <https://mhttcnetwork.org/>

Northwest MHTTC School Mental Health Center (NWSMH)



PROUDLY SERVING THE SCHOOL MENTAL HEALTH WORKFORCE IN ALASKA, IDAHO, OREGON & WASHINGTON

Our goals:

- Provide direct training and TA on the implementation of mental health services in schools
- Build infrastructure and create learning communities
- Support educational leaders to promote mental health for ALL



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- This work is supported by grant SM 081721 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

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- Certificates of attendance and Washington in-service forms will be provided after you complete the evaluation.

Please Note:
The recording and slide deck will be posted on our event page as soon as possible.



Secretary Miguel Cardona 

@SecCardona



In the past, student access to structured mental health services in schools hasn't been implemented in a functional way. It's been ancillary & after the fact. We have the opportunity now to redesign schools & make sure that mental health services are a core part of school's DNA.

9:11 AM · Mar 27, 2021 · Twitter Web App

331 Retweets **81** Quote Tweets **1,790** Likes



Today's Panelists



Dr. Kira Mauseth

Clinical Psychologist @WA State Department of Health



Korbett Mosesly

Senior Associate Director @Pac Mountain Workforce Development Council



**Katrice Thabet-Chapin,
MEd, EdS, NCSP**

School Psychologist @Vancouver Public Schools, Washington



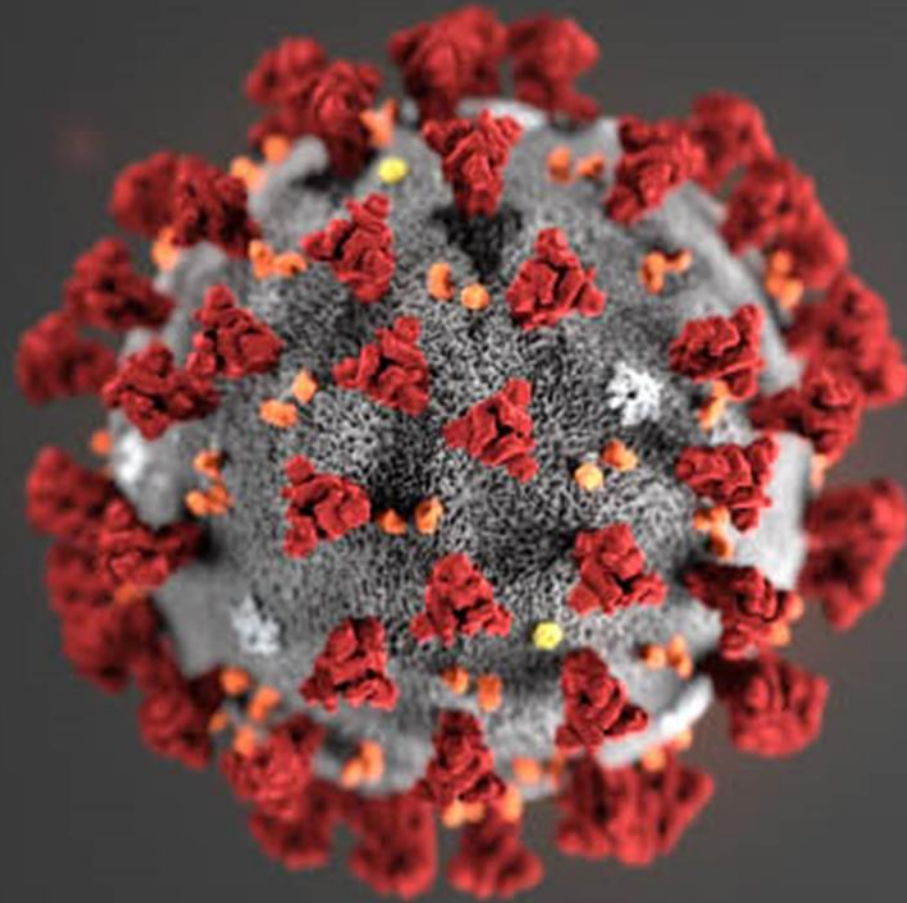
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BEHAVIORAL HEALTH IMPACTS OF COVID-19

Back-to-Classroom Considerations for Parents, Caregivers and Students



Kira Mauseth, Ph.D.

Behavioral Health Strike Team

AGENDA



Understanding impact
of disasters on
behavioral health



Behavioral Health
Considerations for students
returning to the classroom



Building resilience during
reconstruction and recovery



Communication
and connection

Factors that Influence Recovery Speed and Process

- Social marginalization
- Discrimination and racism
- Economic status
- Access to resources and healthcare
- ACEs (adverse childhood experiences)
- Previous experiences in disasters or critical incidents
- Sociopolitical climate
- Additional waves of infection, illness, or restrictions that result
- Additional small- or large-scale disasters (fires, displacement, shootings, etc.)



COVID-19 Back-to-Classroom THINK Toolbox

Teaching with
Healthcare
Informed
Neurological Strategies for
Kids

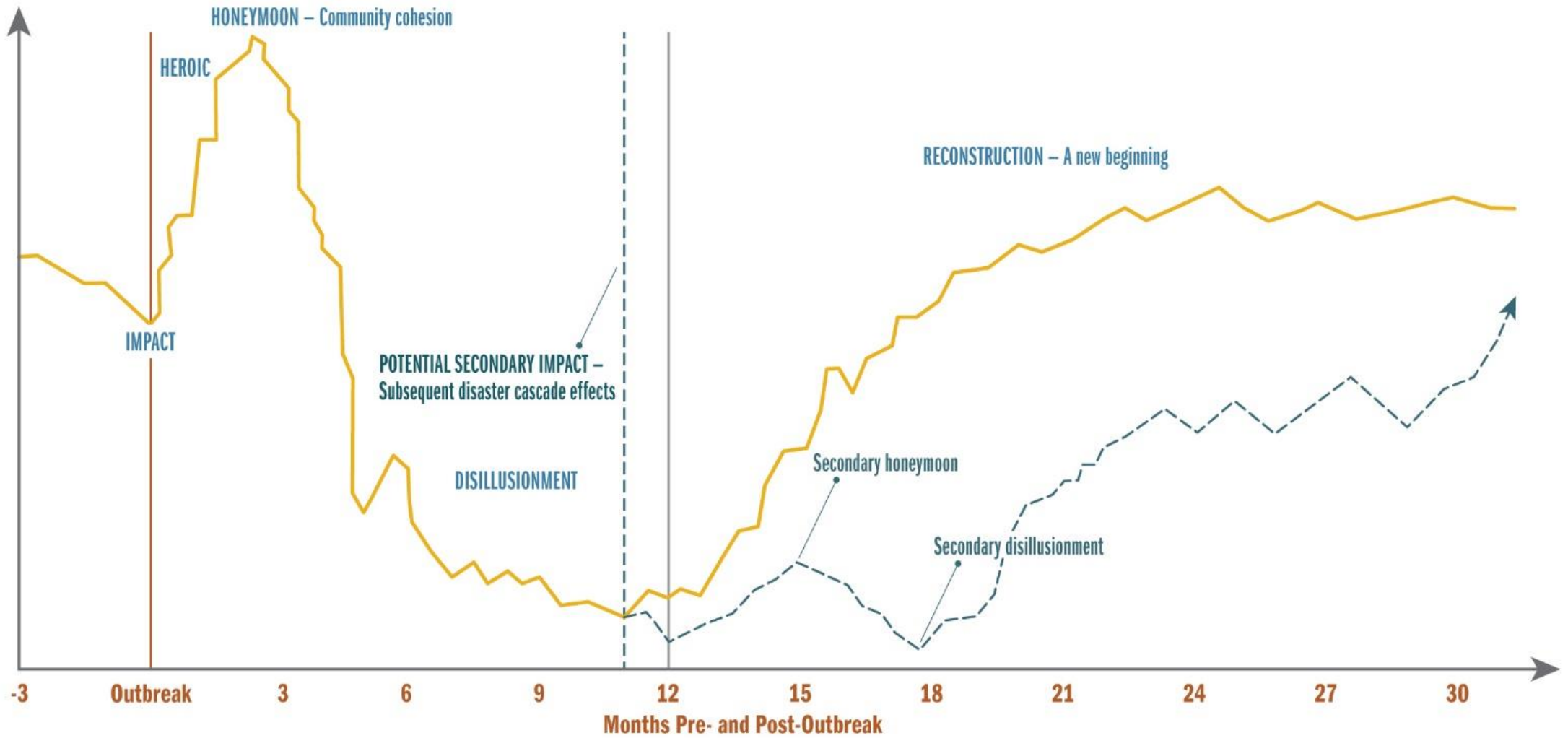


Publication 821-148 August 2021

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Reactions and Behavioral Health Symptoms in Disasters

Emotional Response – Lows to Highs

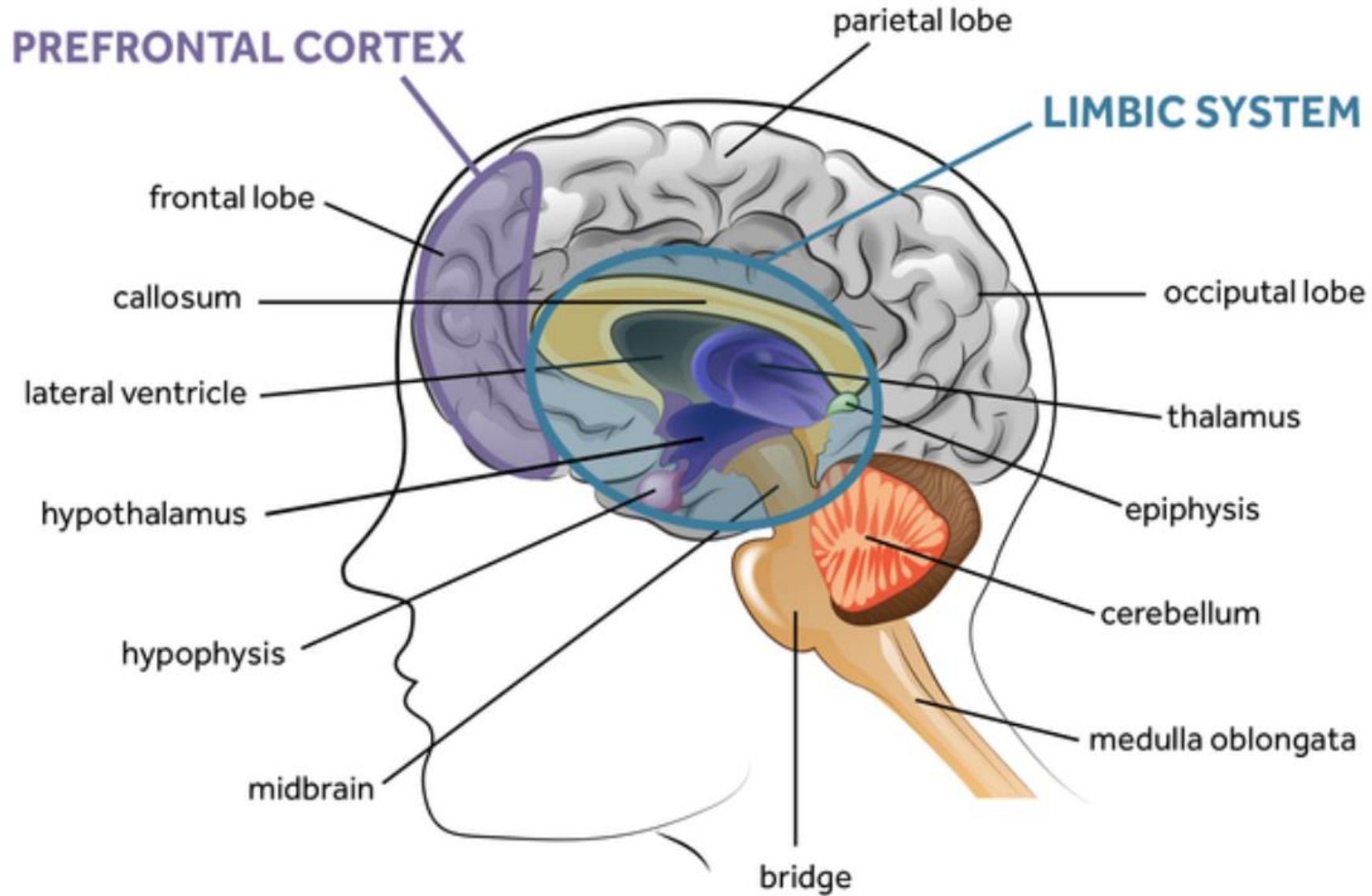


Key Things to Know

- The experience of children, teens, and families during the COVID-19 pandemic can be complicated and challenging.
- Parents, children, and teens may have lost contact with friends and family due to school closures and social distancing measures.
- Teens may wonder about their future since they are absent from school and missing big events like end-of-season competitions and performances, and even graduation.
- Divorced parents must co-parent in the times of social distancing and travel restrictions. Families may have members who already struggle with mental health or substance abuse problems, and these may get worse because of the COVID-19 pandemic.
- The experience that we are all navigating has an impact on our bodies, minds, and emotions. It can be traumatizing. Trauma happens when someone has an experience that feels as though their life or safety, or the lives and safety of their family or friends, is at risk.

Key Things to Know

- The impacts of the pandemic aren't experienced equally across all communities.
- Some people experience persistent stress or trauma related to past or ongoing experiences of injustice and oppression based on race, ethnicity, gender, sexual orientation, or other aspects of one's identity.
- Some people have the luxury of working safely from home, while others don't. This stress and trauma can be worsened due to the stress caused by the pandemic.
- As children, teens, teachers and parents and caregivers navigate the return to in-person school, all of these factors may impact their individual emotional functioning. In addition, the impact of the loss for some children of nearly two years of consistent education will be an issue to be reckoned with.



Common Reactions to Reopening or Return to Work and School



Social changes

Common experiences right now:

- Anxiety about participation in social events.
- Sense of overwhelm in crowds, or in groups.
- Unsure of social dynamics, re-establishing and reconnecting with others, making small talk.
- Fear of pressure to participate in things.

- **BOTTOM LINE:** There is NO playbook for this. Start by recognizing and accepting your OWN comfort level. None of us has been through this before, so we all have the opportunity to create the dynamics that we are comfortable with. We are all different! More on this when we discuss boundaries....

Common Responses to Disaster for Children & Youth

Emotional: clinginess, separation anxiety, preoccupation with death, terror, sadness, guilt, concern about re-occurrence of the event

Cognitive: difficulty concentrating, difficulty learning new information, intrusive thoughts and memories, regression in developmental stages

Physical: sleep disturbance and nightmares, hyperactivity, physical complaints e.g. tummy aches, enuresis, encopresis

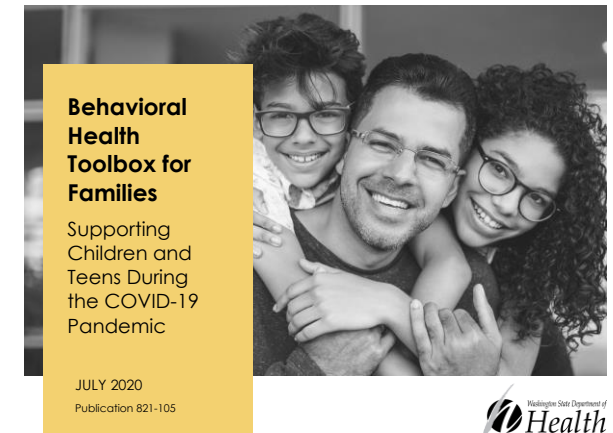
Behavioral: crying spells, aggressive behavior, tantrums, school impairment, substance abuse, re-living events through play, increased questions and story telling about the event, increased deviance and delinquency, sleep impairment

Communication Issues

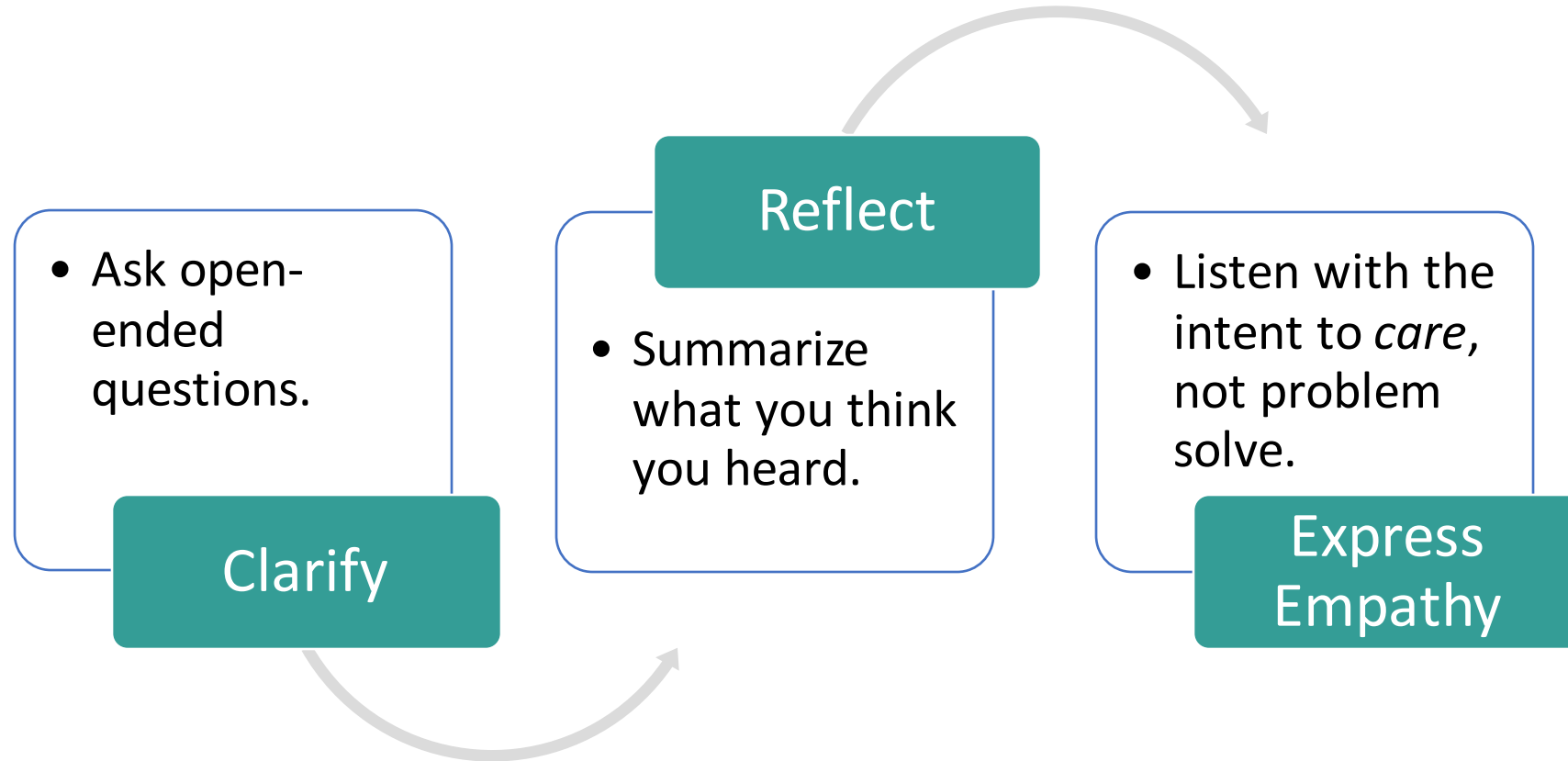
- Remember how our pre-frontal cortex is influenced by stress.
- No one can have a logical problem-solving oriented talk when they are flooded.
- Take extra time to talk.
- Get space from difficult conversations, rather than continuing to push the issue.
- Check in on levels of rest/tiredness before pursuing important conversations.

Zones of Regulation

Color	Level of Alertness	Feelings
Blue	Low state of alertness	Bored, tired, sad, disappointed, sick, depressed, shy
Green	Perfect state of alertness	Happy, positive, thankful, proud, calm, content, ready to learn
Yellow	Higher state of alertness	Excited, silly, annoyed, worried, embarrassed, confused, nervous
Red	Too much alertness	Upset, angry, aggressive, mad, too excited, terrified, out of control



Active Listening



Family Communication



Kids 5-12

- Any window is a good window
- They don't communicate on our schedules
- Regression in development
- Shift expectations



Kids 13-18

- Model careful reactions, slow down
- Ask about goals: What do **they** want or hope for?
 - Future focus helps with hope
- Positive reinforcement for regulated communication



Adults

- Pay attention to signals that the person is ready to talk
- Try to start sentences with "I" rather than with "you"
- If things become too heated, it's ok to take a break

Anxiety and School Refusal

Although students may give different reasons for not wanting to return to school, the common denominator is likely fear.

We conquer fears and anxiety with gradual exposure to the feared event combined with safety. Training wheels allow a gradual approach to full bike riding with safety.

Once we can ride safely without training wheels, we have conquered our fear of crashing on the bike.

The bottom line is that we have to face the fear to overcome the fear. The longer your student avoids returning to school, the more difficult the task becomes.

School Refusal Tips

It may help to have the child recall a time of conquering a fear. They can recall their first time on a bicycle vs their 50th time.

Reach out to your child's school and explain what is happening. Your child's school staff will have had experience with anxiety-related school refusal and will help you come up with a plan.

Try to determine the source of fear with non-judgmental listening. Potentially helpful starter questions might include:

- Can you help me understand why you don't want to go to school?
- I wonder what you might be worried about?
- What do you think might happen if you went to school?

If you are able to learn the source of the fear, you can start to improvise an approach to it.

More tips

- If your child is unable to determine what the fear is, or if they are primarily experiencing physical symptoms you may need to just proceed with helping them get back into the routine for school- again using your school staff for help and backup.
- It's ok to limit the number of times your child contacts you while at school. Constantly texting or calling does not reduce their anxiety, and may make them more dependent on you for soothing, escalate the requests to come home, and actually increase their anxiety.
- Make a plan for handling physical symptoms at school e.g. change of clothes in case of vomiting, allowing limited time in the health room.
- Get all missed work from school. The child should be expected to complete all work.
- Try to avoid things which inadvertently reward not going to school, such as spending the school hours watching TV or playing videos games.
- Build in rewards for bravery. For example, earning a play date on the weekend, or being allowed to hang out with friends on Friday night for making it to school more than 3 days.

School Refusal: Active Management

- Drive to the school with your child at a time when the school is closed.
- Walk around the school with your child.
- Observe and comment on people taking precautions.
- Arrange to meet your child's teacher (younger child) or a best friend of your child (older child) for a short meeting or walk before/after school hours.
- Visit the empty classroom with your child; then also with the teacher.
- Arrange a telephone call or virtual meeting for your child with the teacher and/or good friends who have already safely returned to the classroom.
- Arrange a visit to the class during class hours, stay with your child if requested, for as long as can be tolerated.
- Gradually increase that time and decrease parent presence.
- At each successive success, compliment your child for showing the bravery to face a scary situation.
- Improvise in similar fashion for different fears.

Working with Anger and Hostility: **SAFE Model** for De-Escalation

Many people are expressing distress about the pandemic in an external way. This often manifests itself as anger. In order to de-escalate yourself and others, the **SAFE model** provides key concepts to keep in mind.

- **S:** Self
- **A:** Area Awareness
- **F:** Feelings
- **E:** Engagement

SAFE: Self

- Tune in to yourself.
- Be aware of your own reactions, the tone of voice you use, your body language, and your choice of words.
- Monitor yourself in order to stay calm and to not take the situation personally, even if the words become personal.
- **Larger, non-verbal messages are important, particularly in the case where PPE (e.g., masks) can interfere with people's ability to pick up on nuances of communication.**
- Be aware of the non-verbal cues you are relaying to the other person. **Posture** and **position** are important here.

SAFE: Area Awareness

- Pay attention to your physical area.
- Notice the space and people around you.
- Your general physical area includes people, exits, (potential) weapons, available help, and other resources.
- **Don't position or keep yourself between an angry person and their exit.**

SAFE: Feelings

- Employ active listening techniques to identify what the angry person is feeling underneath the anger.
- **Remember that anger is often related to other emotions like fear or sadness. It is easier for most people to direct emotions outwardly than deal with them internally.**
- By listening for feelings underneath anger, you can identify the cause of the emotions at the center of the issue.
- It is easier to empathize with someone who is angry when you understand what they may be afraid of or worried about.

SAFE: Engagement

- If it is safe to do so, connect with the angry person by **engaging** to understand their story. Use active listening.
- Don't dismiss them or their concerns. Identify and **engage resources, other people, or information** that may be able to address or help solve their problem or concern in some way.
- **Engage support for yourself** when you are in the position of dealing with an angry person or people.
- Don't keep a hostile interaction to yourself. Share it with others to get the support you need after dealing with a difficult person or situation.
- **Engage your resources (friends, family, social networks)** to increase your resilience.

INDIVIDUAL PROTECTIVE FACTORS

- Sense of humor
- Ability to think outside the box or creatively
- Active coping
- Physical exercise
- Religion or spirituality
- Problem-solving skills
- Good social skills



FAMILY PROTECTIVE FACTORS

- Positive family environment
- Good parent and child relationship
- Parents who get along
- Having a valued role in the household
- Parent self-care is mission critical



Active Coping Techniques



Anxiety

- Sensory interventions:
 - Frozen orange, ice
 - Music
 - Shower
 - Fuzzy slippers
- Apps
- Breathing = calming



Exhaustion

- Sleep hygiene
 - Same bed and wake times
 - Alcohol and sugar considerations
 - Notepad (not phone or laptop)
- Apps
- Boundaries



Depression

- Behavioral activation: Small steps
- Get a “this makes me feel better” list made on a good day
 - 5 minutes to 5 hours
- Movement of any kind
- Connection and support from others

RESILIENCE DEVELOPMENT



PURPOSE

- What gets you up in the morning?
- What contributes to making you feel good about yourself?
- What can you remind yourself of to help on a day-to-day basis?
- Don't think too long term or big picture.

CONNECTION

- How can you stay connected with the people who are important to you?
- How can you develop new connections?
- Connections can be anything.

FLEXIBILITY & ADAPTABILITY

- How can you be creative with social distancing and stay connected?
- How can you adjust your physical space?
- How can you change your schedule to give you discreet and clear breaks and boundaries?
- How can you build your schedule to make room for things that allow you to grow?

HOPE

- Hope is grounded in realistic opportunity.
- Shift in thinking from “Threat” to “Challenge”: Threats are dangerous & challenges can be overcome.
- Hope can be tempered by other pre-disaster experiences such as discrimination and marginalization.

Things to keep in mind with Back-to- Classroom

- Be aware of your internal state. Do you recognize when you are feeling calm and confident vs anxious and having difficulty with job functions?
- Write down your typical “go to” stress management tools such as yoga, running, practicing breathing and relaxation, engaging in spiritual practices. Do you need some additional tools in your toolbox, such as apps for mindfulness or dealing with insomnia?
- Learn what student reactions you might face (point to resource)
- Modify and adjust your goals for your students and yourself (e.g. consider less academic and more process focus)
- Plan some healthy rewards for making it through challenging situations/days/weeks

Resources

Webpages:

DOH – Forecasts, situation reports, guidance, and other resources:

- [Behavioral Health Resources Webpage](#)
- Children and families: [Behavioral Health Toolbox for Families: Supporting Children and Teens During the COVID-19 Pandemic](#)
- [COVID-19 Back-to-Classroom THINK Toolbox](#)

State – General mental health resources and infographics:

- [Mental and Emotional Well-being Resources](#)
- [Infographic Library](#)

Looking for support?
Call Washington Listens at
1-833-681-0211





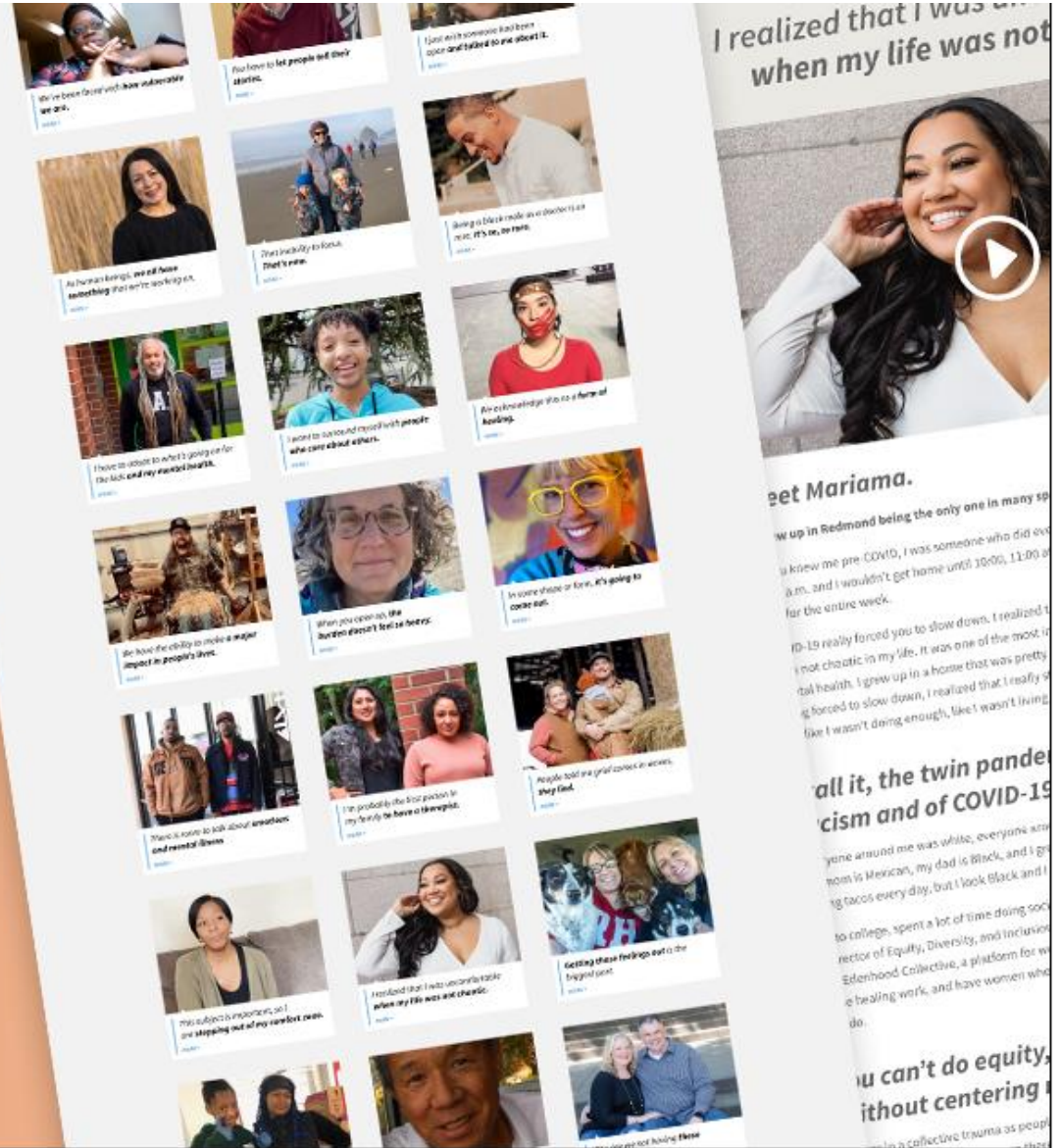
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How are we really doing?

Listen to brave people opening up about the impact of the pandemic on their mental health:

AMindfulState.org

#mentalhealthactionday







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Anchored in our Roots



**A BIPOC School Mental Health Provider's
Guide to Decolonizing Self-Care:
*Intersectionalities, Resiliency, and Strength
of Being a BIPOC School Mental Health
Provider***

<https://bit.ly/AnchoredinOurRootsMtlS>

Meet the Authors



Katrice Thabet-Chapin, M.Ed., Ed.S., NCSP; is a multi-racial educator who has served in the non-profit sector for over 27 years. She comes from four generations of educators who dedicated their life to educational social justice. Katrice has a strong theoretical background in child development and psychology; B.A. in Child Development, M.Ed. in Elementary Education, and Ed.S. in School Psychology. She works diligently to ensure that everyone who wishes to have a seat at the table has one, feels safe there, and can voice their opinions without retribution. As a practicing school psychologist, she has a special interest in researching and applying best practices in consultation, intervention, and assessment implementation when supporting students and families who are culturally and linguistically diverse. Katrice is an active member of Washington State Association of School Psychologists, the National Association of School Psychologist, and is a member of OSPI's School-Based Behavioral Health and Suicide Prevention Subcommittee. When Katrice is away from the office she enjoys spending family time with her partner and four daughters.

Meet the Authors

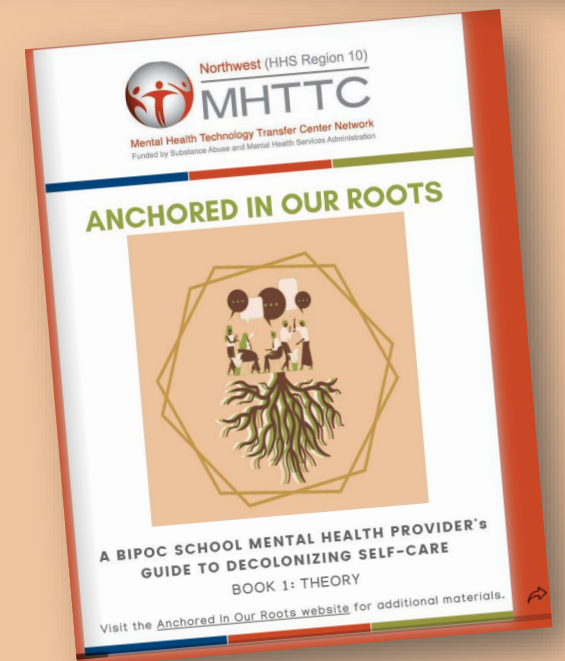
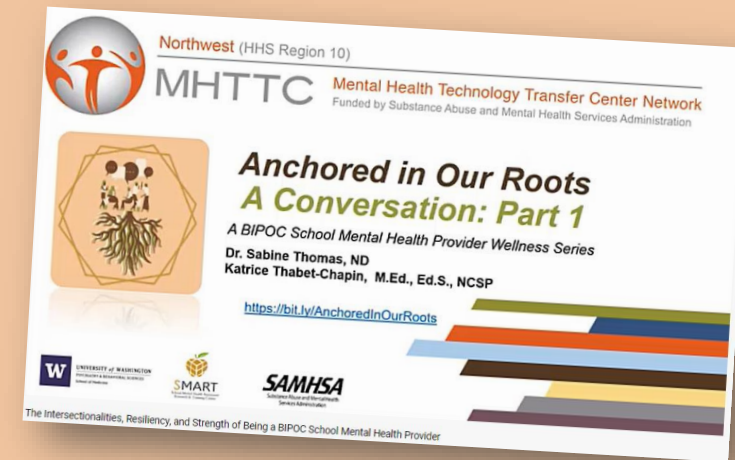


Sabine Thomas, ND; is a Naturopathic Doctor (ND) and an educator. She has extensive background in nonprofit management, wellness, infant/early childhood mental health and user experience (UX) research. She graduated from Mount Holyoke College with a B.A. in Sociomedical Sciences and a Doctorate from Bastyr University in Naturopathic Medicine. She is an early childhood digital ethnographer and a self-care doctor. She is the co- owner of [JSol Studios](#), a virtual wellness educational practice and lives in Tacoma, WA with her family.

The Framework

- ❖ Anchored in our Roots is a self-guided and self-paced resource.
- ❖ There are two interactive companion workbooks:
 - **Anchored in Our Roots - A BIPOC School Mental Health Provider's Guide to Decolonizing Self-Care: Intersectionalities, Resiliency, and Strength of Being a BIPOC School Mental Health Provider**
 - **Anchored in Our Roots - A BIPOC School Mental Health Provider's Guide to Decolonizing Self-Care: Deconstructing the Concepts of Self-Care and Exploring our Ancestral Roots of Healing and Wellness**
- ❖ Audio Segments provide an opportunity to go deeper into several concepts shared within the workbooks.

<https://bit.ly/AnchoredinOurRootsMtls>



The Vision

- ❖ Create a safe space for authentic and honest conversations.
- ❖ Honor and acknowledge the lived experience of our BIPOC school-based mental health providers.
- ❖ Decolonize conceptual concepts associated with race and social justice.
- ❖ Giving ourselves permission to take time to self-reflect, learn, and heal.
- ❖ Reconnecting with our ancestral roots.
- ❖ Revisiting the concept of self-care.

Living Truth

“The paradox of education is precisely this - that as one begins to become conscious one begins to examine the society in which he is being educated. ”

— James Baldwin

Radical Love

“EVERY TIME SOMEONE LOVES THEMSELVES BETTER, BUILDS THEIR SELF- AWARENESS, UNDERSTANDS THEIR PATTERNS, IMPROVES THEIR ABILITY TO COMMUNICATE, AND EXPANDS THEIR COMPASSION FOR OTHERS, THE FUTURE OF HUMANITY GROWS BRIGHTER. YOUR HEALING IMPACTS THE WORLD BY BRINGING IN NEW PEACE”

-YUNG PUEBLO

Compassionate Healing

“Caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare.”

— Audre Lorde

"Healing comes when the individual remembers his or her identity—the purpose chosen in the world of ancestral wisdom—and reconnects with that world of Spirit."

— Malidoma Patrice Some

Coming Soon!

*BIPOC SMH Staff Virtual Community**

Interested in participating? Complete this short survey.

<https://bit.ly/AIORInterestForm>

**At this time, participation is limited to BIPOC SMH Staff in Region 10 (AK, ID, OR, WA)*



Thank You!

<https://bit.ly/AnchoredinOurRootsMtls>

You can reach us at:

anchored.in.our.roots@jsolstudios.com

Enhancing MTSS - Integrating Student Mental Health and Wellness through Systems, Data, & Practices: *Interconnected Systems Framework (ISF) Series Resource Guide*

- Foundational Material
- Fact Sheets
- Recorded Learning Sessions
- Assessment Tools
- Key Readings
- Practice Guides
- Implementation Examples

All in ONE document for easy access to the information you and your team need!

<https://bit.ly/ISFSeriesResource21>



Pacific Southwest (HHS Region 9) • Northwest (HHS Region 10)

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Enhancing MTSS - Integrating Student Mental Health and Wellness through Systems, Data and Practices

What is the Interconnected Systems Framework?

The Interconnected Systems Framework (ISF) promotes using a single system of delivery for educational and mental health support in schools. ISF offers a solution to the challenge of meeting the needs of the whole child. ISF is a structure and process that maximizes effectiveness and efficiency by blending the strengths of school and community mental health with strengths of the multi-tiered framework of PBIS (Barrett, Eber, Weist, 2013).

General ISF Videos & Foundational Resources

- [An Introduction to the Interconnected Systems Framework](#)
- [Introducing the Interconnected Systems Framework Monograph](#)
- [Advancing Education Effectiveness: Interconnecting School Mental Health and School-Wide PBIS, Volume 1](#)
- [Advancing Education Effectiveness: Interconnecting School Mental Health and School-Wide PBIS, Volume 2: An Implementation Guide](#)

The Northwest and Pacific Southwest MHTTC provided a series that explores the ISF framework by examining and redesigning systems (structures and leadership) that are equitable by using data to support practices (services and supports) needed to promote wellness for all.

MHTTC Region 9's ISF Factsheets

ISF 101: An Introduction | This factsheet introduces ISF and its positive impact on schools; offers strategies to align Positive Behavioral Interventions and Supports (PBIS) and Multi-Tiered Systems of Support (MTSS); provides guidance on how to engage appropriate community partners; and outlines the initial steps for implementing the ISF approach.

ISF 201: When School Mental Health Is Integrated Within a MTSS – What's Different | This factsheet provides strategies to develop an integrated ISF leadership team; details the foundation steps to establish ISF at the school or district level; defines the process of evaluating potential evidence-based practices for inclusion in schools; and discusses implementation challenges, solutions, and innovations with ISF practitioners.

ISF 301: Installing an Integrated Approach | This factsheet defines appropriate roles, functions, and mission of a District/Community Leadership Team (DCLT); discusses strategies to conduct a robust assessment of existing mental health and MTSS resources; explores the process through which the DCLT selects interventions and monitors outcomes; and identifies installation challenges, solutions, and innovations.



BEHAVIORAL HEALTH IMPACTS DURING & AFTER COVID-19

What to Expect and Ways to Prepare for the Return to In-Person Learning

April 2021



OVERVIEW

After over a year of the global pandemic and with the availability of vaccines, schools are now returning to hybrid learning or all in-person learning.

This document is an update by the University of Washington School Mental Health Assessment, Research, and Training (SMART) Center, Seattle Children's Hospital, and the Center on Positive Behavioral Interventions & Supports (PBIS) to an initial checklist that was provided to Washington's State Education Agency in June 2020. This update includes new information gleaned about the youth mental health crisis, as well as additional recommendations and considerations to keep in mind as schools bring students back into the school building in a way that prioritizes everyone's mental health and wellness.

This document presents information on (1) what has happened in the last year, (2) what to expect as students return to school, and (3) ways to prepare at the staff, building, and district levels. This document is not intended to be an exhaustive list of all school mental health strategies or used in the place of direct consultation with mental health providers. Instead, it should help guide you and your school and district teams to consider an array of strategies and supports for students, families and staff.

If you or others in your school, district, or jurisdiction have specific questions about the guidance in this document, your return to school plans, and/or your long-term approach to supporting the social-emotional needs of students please free to contact the SMART Center's Training and Technical Assistance team at smarttac@uw.edu.



<https://mhttcnetwork.org/centers/northwest-mhttc/product/behavioral-health-impacts-during-after-covid-19-what-expect-and>

Recommendations for Prep: At the Staff &

What to do to prepare before or at the start of in-person

- Reach out to students to hear from their perspective or
- Encourage families to tell you about issues they anticipate. This could happen through a family survey.
- Get as much information as you can about each student remote schooling. Prepare to celebrate whatever they brought up that is needed.
- Prepare to address concerns/uncertainty about what will happen about having "fallen behind." The more supported and prepared you are, the more likely you will be. Repeatedly calling attention to lack of progress may lead to

Getting back to "routine" is one of the pillars of recovery for students who have experienced trauma. Teachers and students will still need to take it slowly and be flexible. Keep goals modest.

- Re-establishing school as a safe, positive space is the first priority.
- Assessment of teacher and student social emotional needs.
- Students may not be ready to discuss hardships experienced.
- Upon returning to school, there may be a honeymoon phase. Look for patterns and trends in data that inform how to best support students.
- Students may experience more frequent changes in the need to take extra care to support positive relationship development. Be sure to include lunchroom staff, playground

Once back in school, remember that student-teacher relationships are key to student emotional wellness, classroom climate, and

- Think about small changes that can make a big difference.
 - Positive Greetings (and Farewells) at the door & Daily
 - Frequent reminders to students such as "I'm going to be late" and "I'm so glad you're here and I am so excited to be here with you."
- Even if brief, teachers should try to make a **brief personal connection** with each student.
- Teachers and school staff should focus on **listening first** to the information you hear to gauge how to get up to speed.
- Teachers play a key role in creating safe space for students and teachers in developing the skills needed to navigate the

Be ready for your own "triggers". Be mindful of the signs of your own emotional state, cause distress, and make it difficult

- Students' issues may be similar to yours.
- Appreciate that the uncertainty of it all will be challenging.
- Journal what situations cause or may cause you distress. This will help you ensure you respond in a calm manner.

Help de-stigmatize mental health concerns students

- Let students know that additional stress and anxiety is a normal part of the transition, and there are resources available to support them.
- By supporting students' social-emotional and behavioral needs, you can create a classroom climate and building strong relationships, you can help them succeed.
- If the term "mental health" is a barrier, consider using the

Recommendations for Preparing for the Return to School At the District Level

Systematize Support for Teachers, Staff, and School Teams

Establish or expand an existing District Leadership team to oversee equitable and inclusive programming and policies to support student social and emotional well-being.*

- Do not create a separate team or system for mental health and Return to School. Consider bringing on experts to the existing school improvement team or forming a workgroup that has direct connection to the existing team.
- **Schools won't be able to do this alone.** Families, child serving partners and community providers will be critical. Be sure to include mental health providers, nurses, and youth and families on your District team and hold space to build trust and work towards establishing norms and routines together.
- Embed programs and policies within a Multi-Tiered System of Support (MTSS) framework focusing on implementing a small number of evidence-based initiatives (kernels) matched to the needs of students and families well.

Assess current status of mental health systems and practices to determine greatest needs for additional services and initiatives.

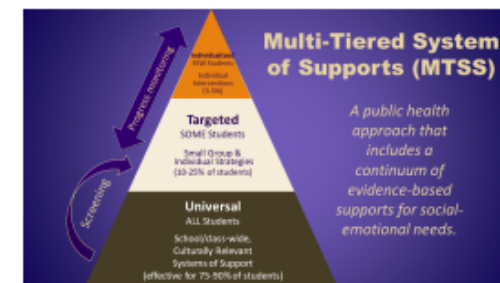
- Map current district/school and community resources, inventory current district initiatives, and assess staff roles and the availability of people to provide mental health supports. Consider redefining mental health provider roles in schools (i.e. nurse, counselor, school psychologist) where appropriate, to allow for additional group and/or brief, evidence-based interventions to add capacity.
- Deliver high quality professional learning opportunities with time for teams to plan how to incorporate new learning into current efforts and other preparations for teachers and school staff. Focus on school/student wellness and impacts of COVID, considering both school and community data.

Ensure that each school has a single integrated team that oversees programming and policies to support student behavior and social and emotional well-being* within an MTSS framework.

- In addition to key school staff, students, and families, this team should include representatives of local community mental health providers who can contribute to school-wide strategies as well as serve students who are identified as needing support.
- The team will need access to a variety of school and community data to base decisions on and select evidence-based practices that match specific needs.
- The team should also be charged with selecting and implementing strategies across the tiers that are based on school and community data and are layered and available rapidly. Strategies should increase with intensity as needs increase.
 - **Tier 1:** Classroom-based social-emotional learning, school-wide behavioral expectations;
 - **Tier 2:** Brief assessment and problem-solving strategies, support groups, social skills groups;
 - **Tier 3:** Individualized, intensive services delivered in school or via community providers.
- Existing strategies and programs should be reviewed and evaluated for their effectiveness and appropriateness. Eliminate ineffective, duplicative, or contra-indicated programs or practices.

Establish or enhance universal, school-wide screening for internalizing and externalizing emotional and behavioral challenges, especially anxiety/depression, through the use of universal screening and/or teacher, family or student nomination.

- Universal screening is administered for each student 2-3 times a year beginning 4-6 weeks after the start of school. Take time during the first weeks of school to learn as much as you can about your students to decrease implicit bias.
- It is recommended that the district oversee screening selection and use the same screening tool across all schools.
- Use psychometrically sound tools that have been studied with similar student populations.
- If you screen, you must intervene. Be prepared with interventions to support students who need additional support.



* This is one of the components of Multi-Tiered Systems of Support (MTSS) for social-emotional programming in schools. See: <https://www.k12wa.usdstudent-success/support-programs/multi-tiered-system-supports-mtss>

The Mental Health Impacts of Surviving COVID-19: Implications for School Mental Health Systems Leaders and Providers

Watch the recorded learning session!



The screenshot shows the MHTTC logo and the title of the webinar. It includes the date and time: Friday, June 25, 2021, 10:30 am – 12:00 pm PT. On the right side, there is a list of instructions for participants, such as 'If you have questions during the session, please use the chat box...' and 'All phone/audio lines will be muted.'

<https://mhttcnetwork.org/centers/northwest-mhttc/product/mental-health-impacts-surviving-covid-19>

The infographic is a hand-drawn style poster with a blue background. It features several key sections:

- LONG HAUL:** Must honor and take seriously. Includes emotional, cognitive, physical, and behavioral impacts. Notes that we can't produce, perform, engage, or participate in the way we did pre-pandemic, and that we must respect and acknowledge new ways people participate.
- 4 INGREDIENTS OF RESILIENCE:** Connections, Purpose, Hope, and Flexibility + Adaptability. Notes that the most common outcome of a natural disaster is resilience.
- IMPACTS:** Weight fatigue, lack of breath, racialized experience of not being believed, deterioration of all basic abilities taken away, entire life and relationship to self changed, lack of trust, isolation, sanctuary trauma, layers of grief and loss, gun/racialized violence, and students of color minimizing grief and fear.
- STUDENTS:** Believe them. Have honest conversations with young people. What they faced, how they overcame, and resources needed.
- ADULTS:** Please model not knowing a lot about long haul and model collective care.
- RECOMMENDATIONS:** Long haulers who are school mental health leaders: take care of yourself.

At the bottom, there are portraits and names of the speakers: Kira Mauseth, Mieka Tennant, Karla Monterroso, Derek Canty, and Jessica Gonzalez. The date is June 25, 2021, and it's noted as a live recording capture of a special event.

LEARN® Saves Lives Suicide Prevention Training for Parents/Caregivers and Q&A Session with Suicide Prevention Experts

Help Prevent Suicide - LEARN® SAVES LIVES

Most people can relate to a time when they felt alone. We may have just needed a reminder. / see you. / care. To help those in crisis and considering suicide, we recommend using LEARN®. We need everyone to play a role in suicide prevention. Most suicides are preventable. Together, we can save lives. **To learn more, go to www.intheforefront.org.**

LOOK FOR SIGNS

- Talking, joking or researching ways to die.
- Feeling hopeless, depressed, trapped, burdensome, anxious, ashamed, or humiliated.
- Changes in personality, academic/work performance, sleep, withdrawing from friends/activities.
- Increasing use of alcohol/drugs, reckless behavior, self-harm/cutting, giving away possessions.

EMPATHIZE AND LISTEN

- People who have survived suicide attempts report what was most helpful to them—**just listen.**
- Listen with compassion, remain calm, avoid judgement and validate their feelings.
- Don't offer quick fixes, tell them everything will be OK, show anger, panic, or ask "why" questions.
- Let them know that you care about them.

ASK ABOUT SUICIDE

- Ask in a way that invites an honest response. Use any signs you've noticed as part of "the ask."
- Be direct. Use the word "suicide" and be prepared to hear a "yes."
- Asking about suicide will NOT put the idea in someone's head.
"Sometimes when people feel hopeless they are thinking about suicide. Are you thinking about suicide?"

REMOVE THE DANGER

- If they say yes, ask them *"Do you have a plan?" "Do you have access to those means?"*
- Putting time and distance between a person at risk for suicide and lethal means can save lives.
- Remove or limit access to firearms, medications, belts, ropes, knives, alcohol and chemicals.
- Report concerning posts on social media.

NEXT STEPS

- Ideally with the person at risk, call the National Suicide Prevention Lifeline (see number below).
- If the person will not agree to stay safe, do not leave them alone. **CALL 911.**

📞 SUICIDE LIFELINE - 24/7 1.800.273.8255 (TALK) Veterans, press 1	📞 CRISIS TEXTLINE Text 741741 then hit 'Send'	📞 SAFER HOMES, SUICIDE AWARE Take steps today to lock and limit access to all medications and firearms. saferhomescoalition.org
📞 TRANS LIFELINE 1.877.565.8860	📞 TREVOR PROJECT - LGBTQ 1.866.488.7386	📞 ADDICTION RECOVERY HELPLINE 1.866.789-1511



SPEAKERS

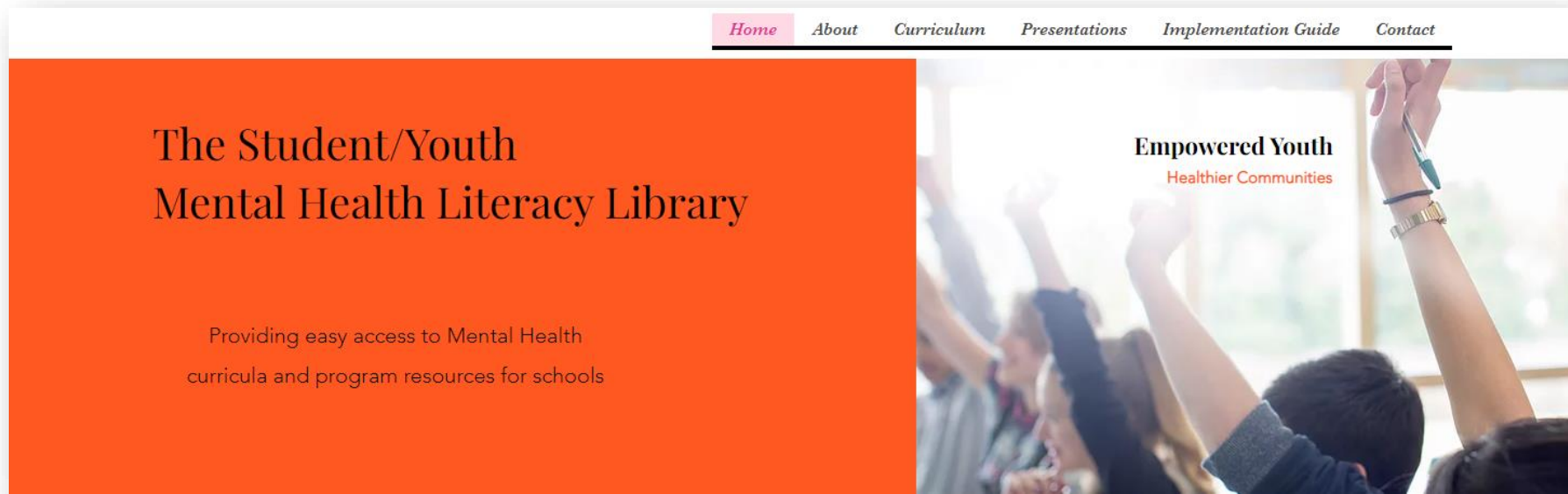


Jennifer Stuber, PhD
Forefront Suicide Prevention,
University of Washington



Chris DeCou, PhD
Harborview Injury Prevention
and Research Center





<https://www.mentalhealthinstruction.org/>

- A Chad's Legacy Project and UW SMART Center collaboration
- Systematic review of Mental Health Literacy curricula and programs
- Compare programs across mental health literacy components, implementation features, and Washington State Learning Standards
- Implementation Guide



MHTTC

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



Classroom WISE

Well-being Information & Strategies for Educators

A mental health literacy course

<https://www.classroomwise.org>

SAMHSA
Substance Abuse and Mental Health
Services Administration



Classroom **WISE**

Well-Being Information and
Strategies for Educators






Online Course



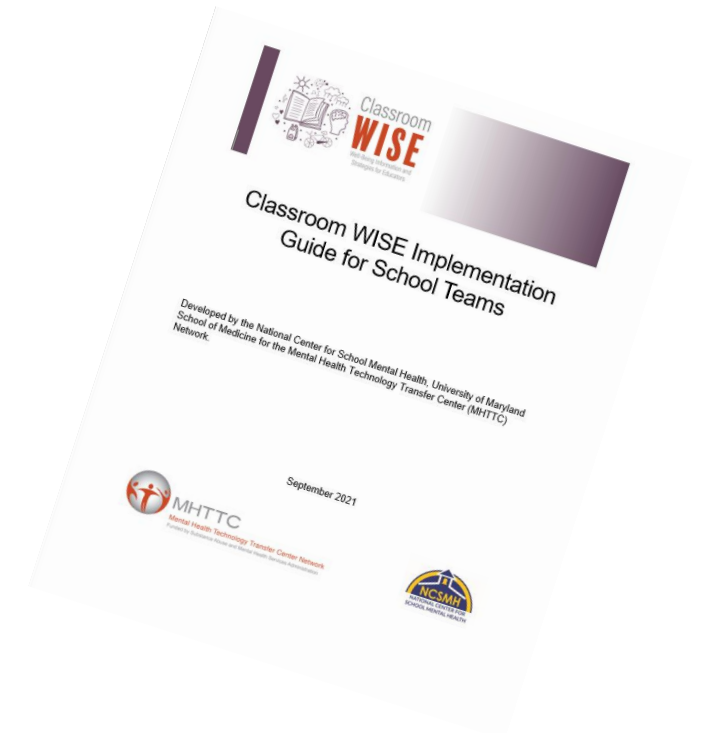
**Video Library +
Resource Collection**



Website

Program Name	Description	Cost	Modality (length)	Target Grade Level	CEUs Available	Mental Health Literacy Components
Classroom WISE (Well-Being Information and Strategies for Educators)	A 3-part training package that assists K-12 educators in supporting the mental health of students in the classroom. Offers evidence-based strategies and skills to engage and support students with mental health concerns in the classroom. In addition to a free online course on mental health literacy for educators and school personnel, a video library and resource collection are also available. (https://www.classroomwise.org/)		 Varies	K-12th	×	

Cost
Pace
Duration
Timing
Interactive
Independent or Team





Online Course



Module 1: Creating Safe and Supportive Classrooms



Module 2: Teaching Mental Health Literacy and Reducing Stigma



Module 3: Fostering Social Emotional Competencies and Well-Being



Module 4: Understanding and Supporting Students Experiencing Adversity and Distress



Module 5: The Impact of Trauma and Adversity on Learning and Behavior



Module 6: Classroom Strategies to Support Students Experiencing Distress

Video Library & Resource Collection

Video Library

This library is a compilation of videos embedded in the Classroom WISE online course. All videos were developed by the MHTTC Network and the National Center for School Mental Health for Classroom WISE.

Module 1 Module 2 Module 3 Module 4 Module 5 Module 6

Module 1: Creating Safe and Supportive Classrooms



How Teachers Make Students Feel Welcomed

One way to create a safe, supportive classroom is to help students feel welcome. In this video, students of various ages describe ways that teachers have made them feel welcome and included.
1min 15sec



How Teachers Can Show Interest

Teachers can help keep students engaged by showing interest. In this video, students of various ages describe ways that teachers have shown interest in them and their lives.
1min 10sec



Welcoming Students

One way to create a safe, supportive classroom is to help students feel welcome. In this video, teachers describe the strategies they use to individually welcome students each day.
3min 23sec

<https://www.classroomwise.org/video-library>



Video Library +
Resource Collection

Resource Collection

Module 3: Fostering Social Emotional Competencies and Well-Being

[Back to Complete Resource Collection](#)

Glossary

Key Terms

This resource includes definitions for key terms used throughout the Classroom WISE course.

Collaborative for Academic, Social, and Emotional Learning (CASEL) Framework

Reunite, Renew, and Thrive: Social and Emotional Learning (SEL) Roadmap for Reopening School

This resource is a roadmap that supports the return to school with equity-focused SEL strategies centered on relationships and built on the existing strengths of a school community. Developed by CASEL.

SEL Competencies and Practices

This resource can help educators identify common practices for use with each of CASEL's social-emotional learning competencies. Each SEL competency is listed in the first column, followed by broad classroom practices and more specific sub-practices.

K-12 Social Emotional Learning (SEL)

Habits of Mind

This resource provides problem-solving strategies for students. Within this resource, teachers can access curriculum, lessons, and posters for their classrooms.

SEL Activities by Grade Level

This resource provides ideas for SEL activities that may be best used in elementary and secondary classrooms.

Strategies for Implementation

Adult SEL Self-Assessment

This resource is a self-assessment that provides a framework and process for staff to reflect on their own social and emotional growth. Developed by CASEL.

<https://www.classroomwise.org/resource-collection>

Modules 1-3: Promoting Mental Health & Well-Being



Module 1: Creating Safe & Supportive Classrooms



1. How to Make Students Feel Welcome
2. Showing Interest
3. Welcoming Students
4. Active Listening (Elementary & Secondary)
5. Praise (Elementary & Secondary)
6. What Not to Do with Students in Distress
7. Restorative Practices
8. What Makes a Great Classroom
9. Rules & Routines (Elementary & Secondary)



Online Course




Video Library +
Resource Collection



Website


Resource Collection

Engagement Safety Environment



**Classroom
VISE**
Being Information and
Strategies for Educators

MODULE 1:
Creating Safe and
Supportive Classrooms



Trauma-Sensitive Schools
TRAINING PACKAGE
UNDERSTAND • BUILD • LEAD

Building Trauma-Sensitive Schools
Handout Packet

National Center on Safe Supportive Learning Environments
Safe Supportive Learning
Engagement | Safety | Environment

Symbols of Inclusion

Identities, visually being able to see representation of diverse initial anxiety and make students feel safer and the ability to craft their classroom in both physical and students feel seen, heard, and validated in the instructional environment you create in your classroom is and supported. This can be achieved, in part, by the classroom.



Media created with Canva's free user content.

Symbols of inclusion can be purchased on sites like Amazon or Teachers Pay Teachers. There are free resources available on Teachers Pay Teachers like the resource included here. Additionally, teachers/students can create their own posters and then display them in the classroom.



Time to Learning for Justice—
Early Teaching for Tolerance!

Over the last 30 years, from reducing prejudice to tackling systemic racism, we have seen a new name that better reflects that evolution: Learning for Justice.

LEARN MORE



Module 2: Teaching Mental Health Literacy and Reducing Stigma



1. Providing Accurate Information
2. Talking Openly
3. Intentional Language
4. Students' Lived Experiences
5. Raise Awareness

teen mental health org

LANGUAGE MATTERS

THE IMPORTANCE OF USING THE RIGHT WORDS WHEN WE'RE TALKING ABOUT MENTAL HEALTH

Increasing awareness of mental health and mental illness is rising across Canada. However, awareness without mental health literacy does not lead to improved mental health and better access to mental health care for those who need it. Talking about something as if it were the same as something else, that is, grouping mental health and mental illness together, can be confusing and even harmful. We are using the right words to describe the various components of mental health and mental illness.

WE ALL HAVE MENTAL HEALTH

1. No distress, problem or disorder
2. Mental health problem
3. Mental illness
4. Mental disorder / illness

Mental Distress refers to the common, expected and normal response to the stressors of everyday life. Mental distress is normal, transient and does not require professional attention. It is a necessary part of life. It can include feeling overwhelmed, stressed, sad, anxious, or angry.

Classroom WISE

Web-Based Information and Resources for Educators

MODULE 2: Teaching Mental Health Literacy and Reducing Stigma

Creating Mental Health Bulletin Boards

The simplest way to address mental health stigma in the classroom is to start talking about mental health openly. Use what you've learned to have smart, well-informed, and developmentally appropriate conversations with your students. These open discussions will be a first sign to students that your classroom is a safe space to discuss any mental health challenges they may be encountering, but you can make sure it is clear by telling them directly. You can also show students that you believe in the importance of mental health by dedicating a classroom bulletin board to mental health and wellness.

DEFINITION AND DANGERS OF STIGMA

Stigma is damaging and can make people feel excluded, which can be a major barrier to treatment and recovery. A bulletin board highlighting myths and facts about mental illness or the dangers of mental health stigma can provide students with mental health literacy and help make them feel safe and supported.

WELLNESS STRATEGIES

Bringing wellness strategies directly into instruction is fantastic. It's also important to regularly remind students that they can practice those strategies on their own. A wellness bulletin board, with strategies for breathing or mindfulness, can help students learn to self-regulate.

COMMUNITY SUPPORTS

For students who may need additional support, a bulletin board listing community resources or mental health campaigns can be a great addition to your classroom.

THE IMPORTANCE OF USING THESE TERMS CORRECTLY

These categories are not mutually exclusive. A person can experience a mental health problem, and a mental illness at the same time. A person can experience a mental health problem and a mental illness at the same time, just not have good physical health and an illness at the same time.

The Inter-Relationship of Mental Health States: Language

Understanding the differences between these components is crucial to getting to avoid seeking treatment when it is not needed and to be clear about the language we are using.

When we do not use words that appropriately describe how we are feeling or what we are experiencing, it can be confusing and even harmful. For example, by treating someone with depression as simply 'sad', or by treating someone who is having a bad day as 'depressed', we are making it harder for them to get the help they need.

LET'S MAKE SURE WE'RE SAYING WHAT WE MEAN

- Depression is not the same as having a bad day.
- PTSD is not the same thing as feeling upset.
- OCD is not the same as being organized.
- Schizophrenia is not a split personality.
- ADHD is not the same as being hyperactive.
- Panic Disorder is not the same thing as feeling afraid.
- Bipolar is not the same as being moody.

Prepared March 2021 by Marianne Moxley and Sharon Moxley for the MHTTC Network and MCHRI. All materials except that taken directly from copyrighted sources, will be the sole creation and may be reproduced or adapted without permission from MCHRI or the authors. Content of the source is acknowledged.

MHTTC: The Mental Health Training Network Centre Ontario



Online Course



Video Library + Resource Collection



Website

Module 3: Fostering Social and Emotional Learning



1. CASEL Framework
2. K-12 Social Emotional Learning
3. Strategies for Implementation



SEL Activities by Grade Level

Social-emotional learning can be taught using several different approaches. You can provide individual lessons to teach students core social-emotional skills, with lessons that vary in frequency and last different amounts of time. You may also promote SEL through embedding social-emotional competencies throughout academic instruction. Listed below are several ideas for activities that can be integrated into elementary and secondary classrooms.

ELEMENTARY

High Five to Friendship – This activity can help students learn how to be a better friend. First, brainstorm as a class to identify characteristics of a good friend. Then have students trace their right and left hands onto two pieces of paper. On one hand, have them write the characteristics that make them a good friend. On the other hand, have them write areas where they can improve to become a better friend. Ask the students to choose one area to practice that week.

Snowstorm in a Bag – This activity can encourage students to practice deep breathing with a fun technique. First, explain the concept of deep breathing and its purpose. Choose a container (e.g., bottle, baggie) that can have a straw inserted and add small pieces of paper into the container. Ask students to breathe deeply and exhale into the straw to create a "snowstorm". Encourage students to reflect on how they feel during and after the activity.

SECONDARY

Gratitude Journal – This activity can help students intentionally recognize the positive. At the end of

2018 Guide to Schoolwide SEL

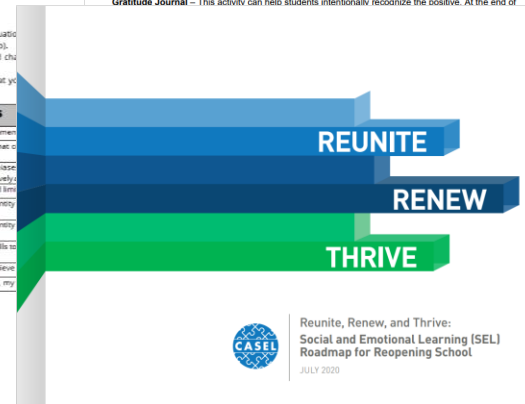
Personal SEL Reflection

Purpose: This tool is designed for self-reflection. It should not be used to evaluate members, staff members, and other adults; can use it to assess personal strengths interacting with others, and plan strategies to promote growth across areas of self should first complete the reflection privately, then discuss general themes and exit small groups. Individuals can return to the reflection throughout the year to revise

Here's how to use this tool:

- Read each statement and think of related specific situations (very difficult, difficult, easy, or very easy for you to do).
- When you finish, search for patterns of strengths and challenges; responses as "good" or "not as good."
- Review your responses and take action in light of what you reflection statements.

	Self-Awareness
EMOTIONAL SELF-AWARENESS	I can identify and name my emotions in the moment. I use self-reflection to understand the factors that cause my emotions to impact me. I recognize when my emotions, thoughts, and biases react to people and situations, both negatively and positively. I know and am realistic about my strengths and limitations.
IDENTITY AND SELF-KNOWLEDGE	I recognize and reflect on ways in which my identity (race, culture, experiences, and environments) influences me. I recognize and reflect on ways in which my identity influences others.
GROWTH MINDSET AND PURPOSE	I believe I will continue to learn and develop skills to succeed. I believe I can influence my own future and achieve my goals. I can see how I have a valuable role in my work, my community, and the world.



Reunite, Renew, and Thrive:
Social and Emotional Learning (SEL)
Roadmap for Reopening School
JULY 2020

Modules 4-6: Understanding & Supporting Students Experiencing Diversity and Distress



Q&A

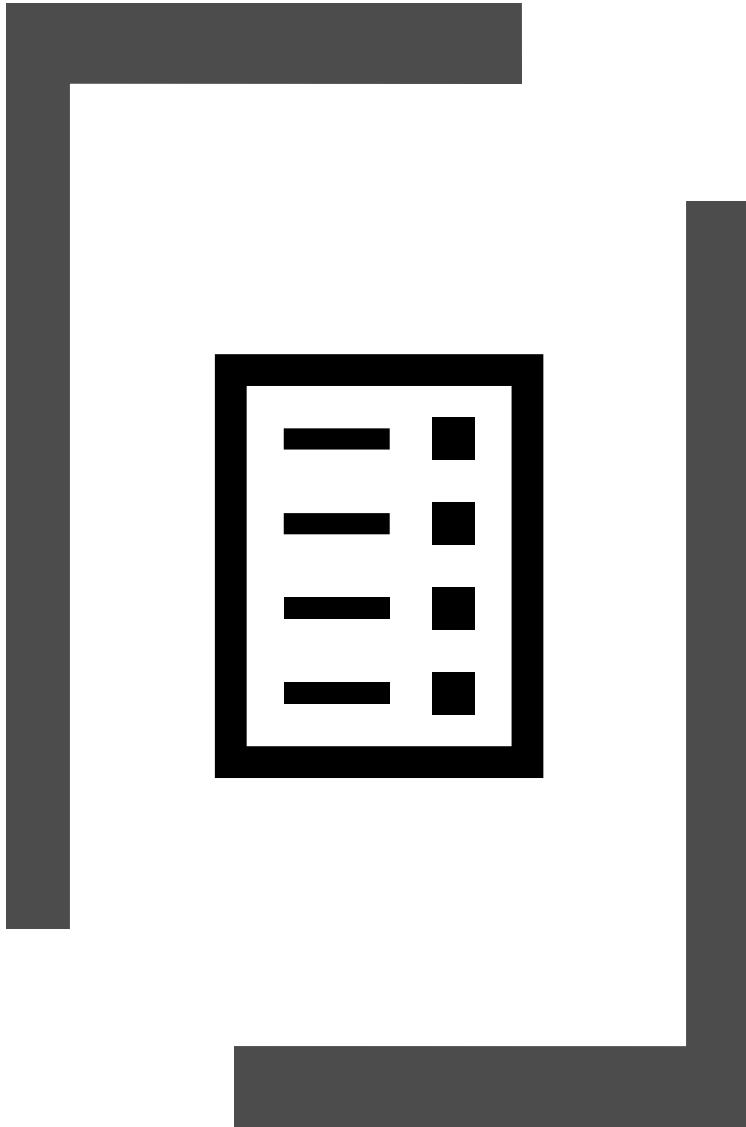
What school mental health and MTSS topics and formats are of interest to you? *Let us know!*

Chat	Add to chat box
Evaluation	Answer in evaluation
Email	Email us! nwsmh@uw.edu

Resources

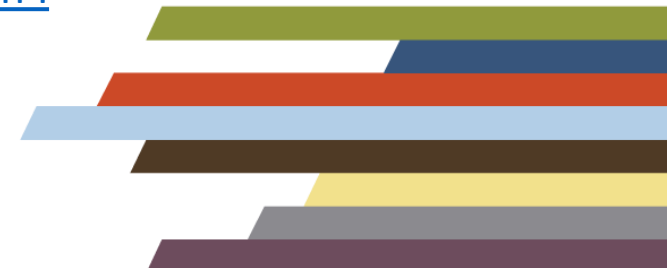
- [COVID-19 Back-to-Classroom THINK Toolbox](#)
- [Statewide High-Level Analysis of Forecasted Behavioral Health Impacts from COVID-19](#)
- ['A Mindful State' Website](#)
- [Anchored In Our Roots: A Wellness Series for BIPOC School Mental Health Providers](#)
- [Enhancing MTSS - Integrating Student Mental Health and Wellness through Systems, Data, and Practices](#)
- [Behavioral Health Impacts During & After COVID-19: What to Expect and Ways to Prepare for the Return to In-Person Learning](#)
- [Mental Health Literacy Library](#)
- [Long COVID and Implications for School Mental Health](#)
- [Classroom WISE: A 3-part training package on mental health literacy for teachers and school staff](#)
- [National School Mental Health Implementation Guidance Modules and Related Projects](#)
- Mental Health Technology Transfer Center
 - [Training and Events Calendar](#)
 - [Products and Resources Catalog](#)





Event Survey

- Required by our funder
- Used to inform, refine, & enhance future events/activities
- Helps communicate the need for this type of support
- Voluntary and anonymous
- **Very important!** *We will end a few minutes early and ask that you please take a few moments to complete.*
- <https://bit.ly/event-evaluation4>



Northwest MHTTC

Contact Info

Email: nwsmh@uw.edu

Website: <https://bit.ly/NWSMH>



Join the NW MHTTC School Mental Health Listserv

<https://bit.ly/NWSMHsignup>

CONNECT WITH US ON SOCIAL MEDIA:

@NorthwestMHTTC



SAMHSA's mission is to reduce
the impact of substance abuse and
mental illness on America's communities.

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