

AWARE

Advancing Wellness &
Resilience in Education

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ADE/
AHCCCS

Advance

Wellness

And

Resilience

in

Education



3 Goals of the AWARE Grant



GOAL#1: Build and expand capacity at the state and local levels to improve access to mental health services and supports.



GOAL#2: Conduct outreach and training to increase mental health literacy and reduce stigma.



GOAL#3: Connect youth, families, and school staff to mental health services.



Why Does It Matter



Youth Mental Health

MENTAL HEALTH and YOUTH

13%

OF CHILDREN

ages 8-15 experience a
mental health
condition

13-20%

OF CHILDREN
living in the U.S.

17%

OF HIGH SCHOOL
STUDENTS
seriously consider
suicide

50%

OF CHILDREN

ages 8-15 experiencing a
mental health condition
don't receive treatment



(1 out of 5 children)
experience a mental
health condition in
a given year

1/2

OF ALL LIFETIME CASES
of mental illness begin
by age

14

Despite effective treatments there are long delays—sometimes
decades—between onset of symptoms and treatment

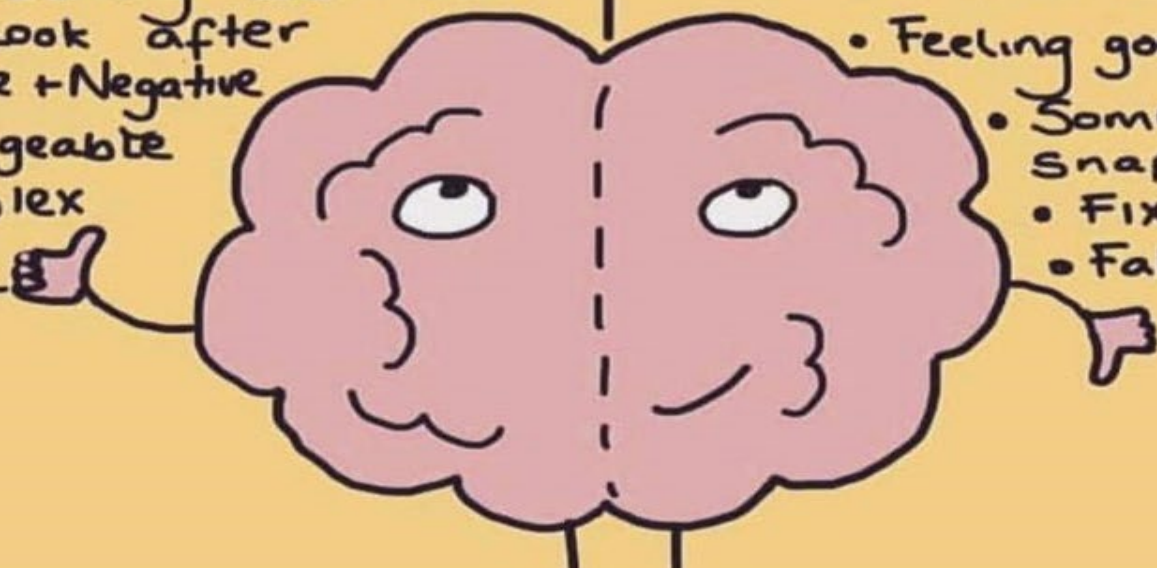
MENTAL HEALTH

IS...

- Important
- Something everyone has
- Intrinsically linked to (+ probably inseparable from) physical health
- On a continuum
- Worth making time for
- Part of being human
- Something we need to look after
- Positive + Negative
- Changeable
- Complex
- Real

ISN'T...

- A sign of weakness
- Shameful
- All in your mind
- Always something negative
- Something you decide to have
- Something to think about only when it feels broken
- An interchangeable term with mental illness
- Feeling good all the time
- Something you can snap out of
- Fixed
- Fake news



SELF CARE & SOCIAL SUPPORT

PROFESSIONAL CARE

HEALTHY

Normal Functioning

Normal mood fluctuations.
Takes things in stride.
Consistent performance.
Normal sleep patterns.
Physically and socially active. Usual self-confidence
Comfortable with others.

REACTING

Common & Reversible Distress

Irritable/Impatient.
Nervousness, sadness, increased worrying.
Procrastination, forgetfulness. Trouble sleeping (more often in falling asleep) Lowered energy. Difficulty in relaxing. Intrusive thoughts.
Decreased social activity.

INJURED

Significant Functional Impairment

Anger, anxiety. Lingering sadness, tearfulness, hopelessness, worthlessness.
Preoccupation. Decreased performance in academics or at work. Significantly disturbed sleep (falling asleep and staying asleep).
Avoidance of social situations, withdrawal.

ILL

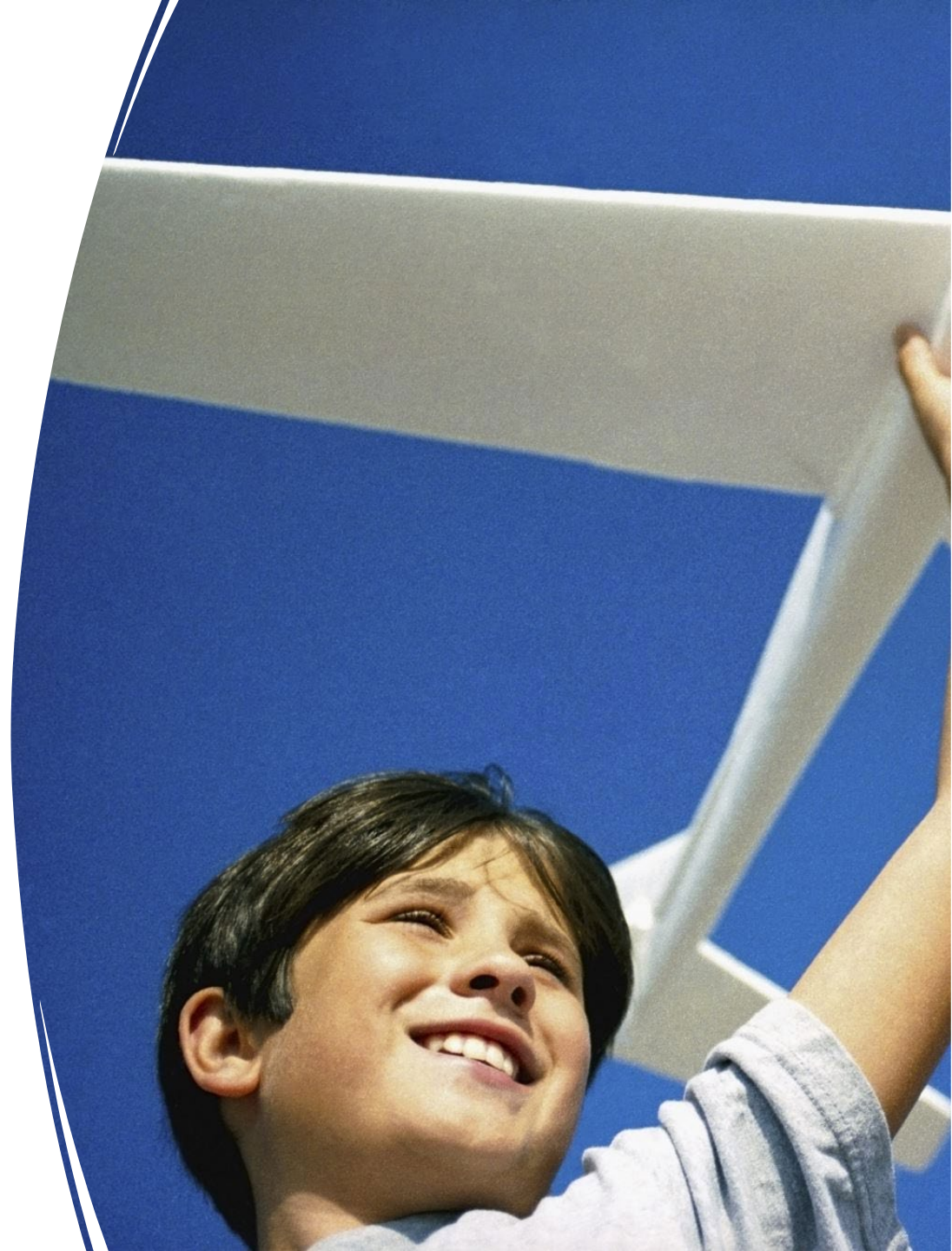
Clinical Disorder. Severe & Persistent Functional Impairment.

Significant difficulty with emotions, thinking High level of anxiety, Panic attacks. Depressed mood, feeling overwhelmed Constant fatigue. Disturbed contact with reality Significant disturbances in thinking Suicidal thoughts/ intent/behaviour.



Benefits of Early Intervention

- Decreased impact on brain development
- Longer and fuller recovery periods
- Increased graduation rates
- Increased self-esteem and motivation
- Increased earning potential



What does early intervention look like in schools?

- Policies and Procedures
 - Formalized referral pathways
 - MOUs
 - Opt in/out policy
 - Tiered services
 - Prevention/postvention
- Trained personnel
 - Compliant with state requirements

What does early intervention look like in schools?

- Engaged community
 - Student and Parent voice
 - Leadership buy-in
 - Integrated emotional learning:
 - SEL
 - Trauma Sensitive
- Culture shift
 - Stigma free
 - Health parity
 - Collaborative



Educator Mental Health:
Who is caring for you?

AZ Educator Peer Support Program

- Pairs teachers and administrators in Arizona with a trained peer coach
- Trained Educator Peers are teachers and administrators (in Arizona) just like you.
- Informal and confidential. In fact, you don't even have to submit your full name (first name and last initial only).

www.AZEDUCATOR.org

A photograph of a desk with educational supplies. In the foreground, there is a silver mesh pencil holder filled with colorful pencils, a stack of three books (blue, yellow, and orange covers), a red apple, and an open book with a yellow pencil resting on it. The background is a chalkboard with faint mathematical equations and diagrams.

**Educators
Helping
Educators**

Don't tough it out alone.

If you are struggling and want to have an informal and confidential conversation with a peer, this is for you.

RESILIENT *Arizona*

CRISIS COUNSELING PROGRAM

Get Connected with
a **FREE** Crisis Counselor



CALL 2-1-1

100% FREE & CONFIDENTIAL · STATEWIDE

www.resilientarizona.org

**Resilient
Arizona:
Available in
Spanish
and
English**

Resources Available for AZ Schools



Mitch Warnock Act

In 2019, the Arizona State legislature passed Senate Bill 1468, named after a Tempe teen who died by suicide, mandating all school staff who interact with students in grades 6 through 12 must be trained in an evidence-based, best practice suicide prevention training at least once every three years beginning in 2020-2021.

The Arizona Health Care Cost Containment System (AHCCCS), in coordination with the Arizona Department of Education (ADE), have identified evidence-based prevention training options from which school administrators can choose:

- **Question, Persuade, Refer (QPR)**
 - **Applied Suicide Intervention Skills Training (ASIST)**
 - **Kognito At-Risk (available in Spanish)**
- **Youth Mental Health First Aid**
- **Suicide Alertness for Everyone (safeTALK).**
 - **ACT on FACTS**
 - **More than Sad**
- **Be a Link! Suicide Prevention Gatekeeper Training**

KOGNITO

A suite of virtual role-play trainings to teach educators about mental health and suicide prevention which supports improved student wellness and school safety.

If interested in full district implementation available for free for a limited time, email:

SchoolSafety.SocialWellness@azed.gov

Subject Line: Kognito



Arizona SEL Course

FREE self-paced online course; 6-modules for individual, or team registration, or a train-the-trainer track; includes certificates for CEUs.

SchoolImprovementInbox@azed.gov

[ADE SEL Competencies Webpage:](#)

- Pledge
- Funding Guide
- Resources

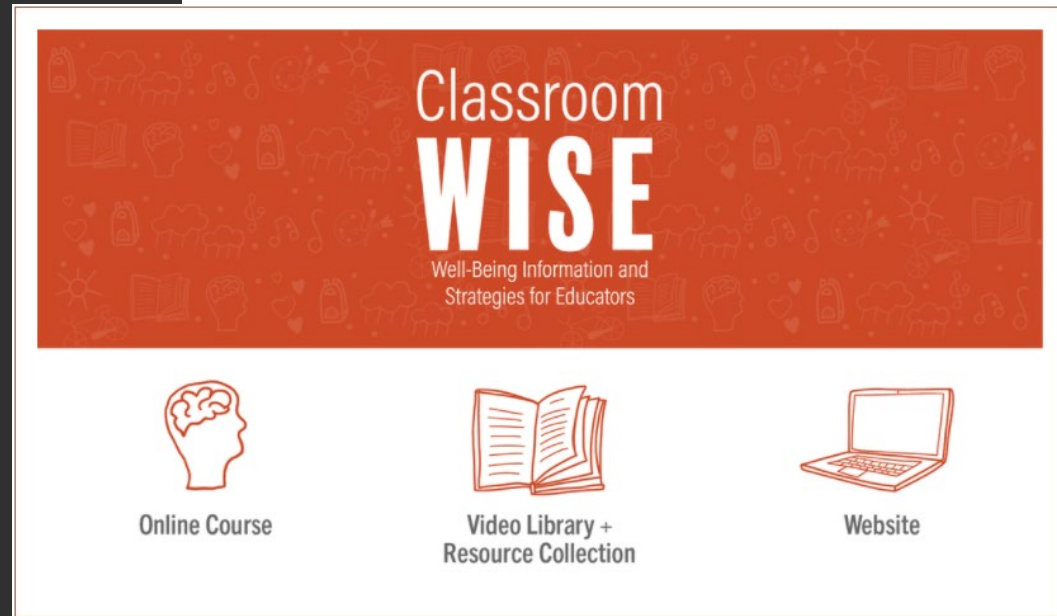


Classroom WISE

From MHTTC

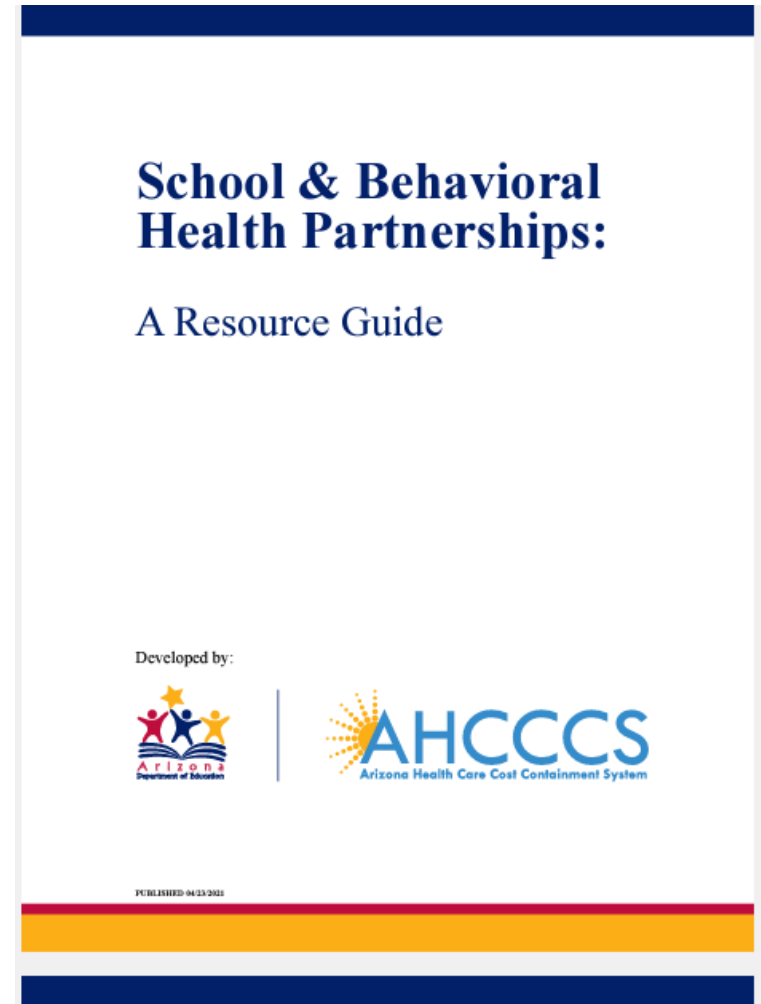
3-part training package that includes a FREE self-paced online course, video library featuring practicing teachers and students, comprehensive resource collection and website for K-12 educators on mental health literacy.

classroomwise.org



Guidance for:

- Collaborative partnerships
- Model referral, suicide prevention and postvention policies
- Development of comprehensive school mental health teams
- Template for MOUs



Mental Health Referral Policy

Things to consider:

- Who will initiate the referral process
- How will referrals be processed
 - **Internally**
 - **Externally**
- How is this data tracked?



Mental Health Considerations & Guidance to Referral Process for Schools in Arizona

What does this document provide?

This document provides step-by-step instructions for educators that have *already identified* a student that needs mental health support from a community-based provider. This document will discuss how an educator will connect students and their caregivers to services, how those services might be funded, and how to proceed with the referral. In the past, educators might have been nervous to connect with outside providers because of their lack of knowledge of rules and regulations, challenges in obtaining services for students, and concerns about payment. Some examples of common mental health services include:

- Psychological evaluations
- Individual or family therapy/counseling
- Behavioral therapy
- Group therapy (anger management, social skills, grief)
- Psychiatric services

We hope this document will provide guidance and insight to educators trying to navigate care

<https://nttacmentalhealth.org/wp-content/uploads/2021/08/Behavioral-Health-Considerations-Guidance-to-Referral-Process-for-Schools-in-AZ.pdf>

Paying for Behavioral Health Services



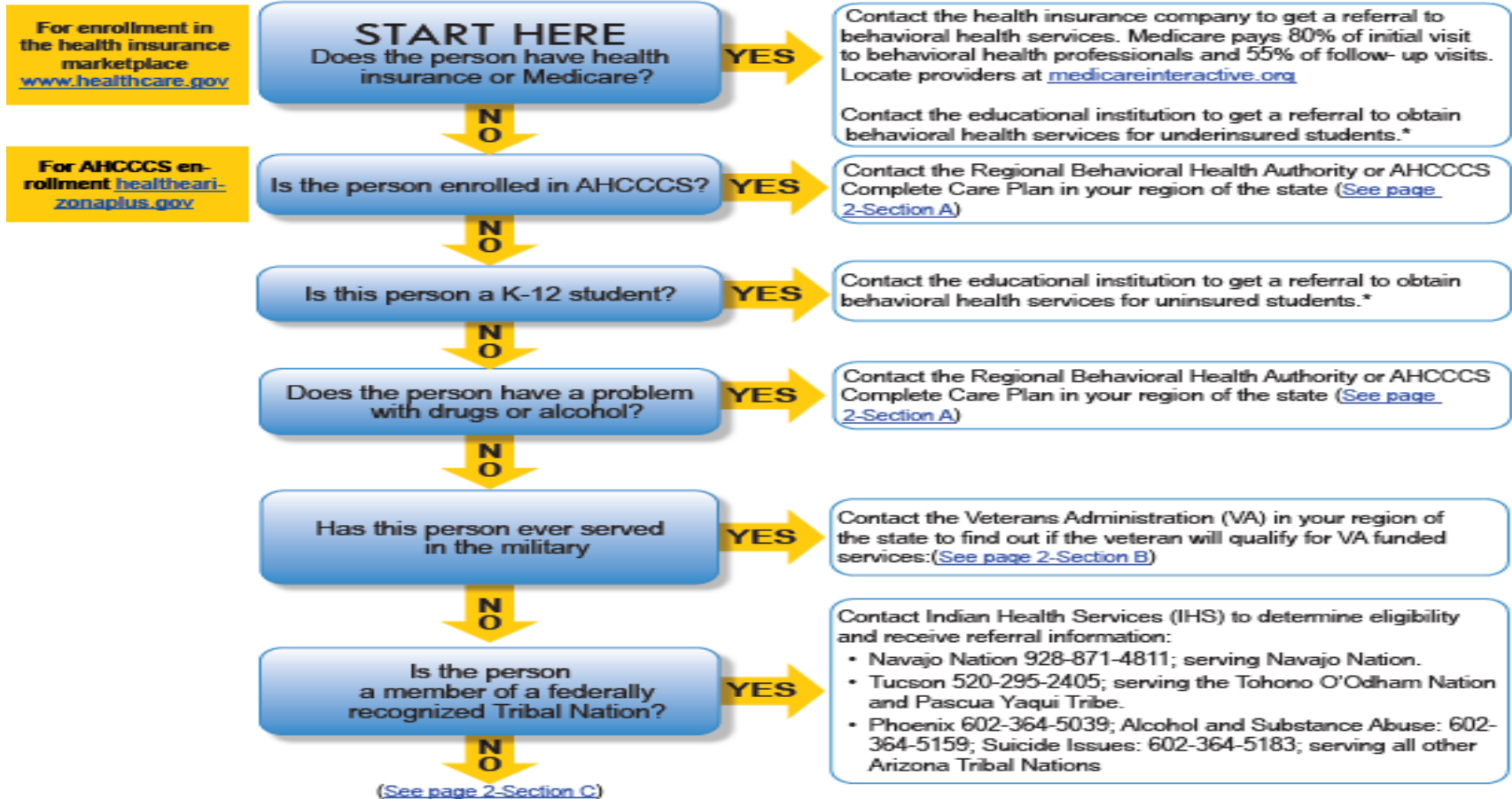
DOES THE INDIVIDUAL APPEAR TO BE AN IMMEDIATE DANGER TO HIS/HER OWN SAFETY OR TO THE SAFETY OF OTHERS?

CALL 911

DOES THE INDIVIDUAL APPEAR TO BE IN NEED OF MENTAL HEALTH ASSISTANCE RIGHT AWAY?

SEE CRISIS SERVICES

Accessing/Paying for Behavioral Health



Children's Behavioral Health Services Fund

(Jake's Law)

- Funds behavioral health services for uninsured and underinsured children who are referred through an educational institution.
- Funding is authorized for services through June 2022.
- Schools that meet the requirements of the law are able to refer students for behavioral health services, regardless of a student's Medicaid eligibility:
 - mental health referral policy in place
 - formal consent process for parents



Jake's Law Providers by Region

Southern Arizona	Central Arizona	Northern Arizona
<u>Arizona Complete Health-Complete Care Plan</u>	<u>Mercy Care</u>	<u>Health Choice Arizona</u>
Arizona's Children's Association Casa de los Niños Child and Family Services COPE Community Services Horizon Health & Wellness Pathways La Frontera Intermountain	Arizona Youth & Family Services Community Bridges Inc.* Devereux Family Involvement Center* Horizon Health and Wellness Jewish Family & Children's Service LaFrontera-EMPACT-SPC New Hope of Arizona, Inc.* Open Hearts Pathways of AZ Resilient Health Southwest Behavioral & Health Services Southwest Network Terros Health The Resolution Group Inc.* Touchstone Health Services Valle Del Sol	ChangePoint Integrated Health Child and Family Support Services Encompass Health Services Horizon Health & Wellness Little Colorado Behavioral Health Centers Mohave Mental Health Clinic Southwest Behavioral & Health Services Spectrum Healthcare The Guidance Center West Yavapai Guidance Clinic

Thank you

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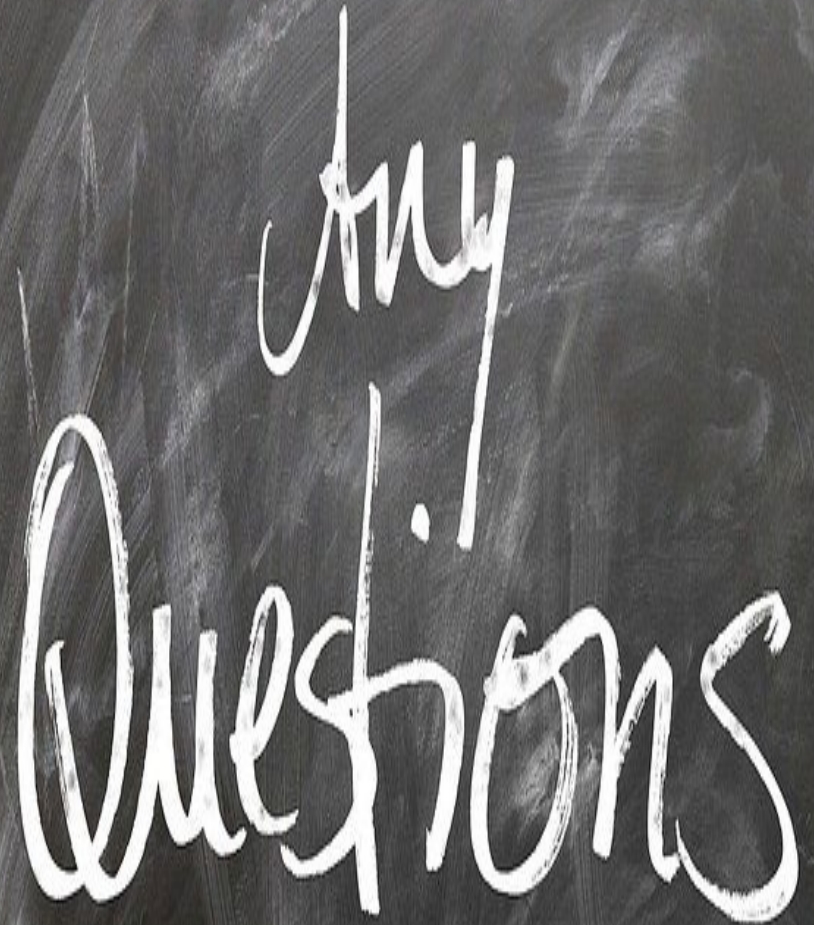
Amy Castellanos,
Program Coordinator

Email:

SchoolSafety.SocialWellness@azed.gov

Website

<https://www.azed.gov/wellness/projectaware>

A chalkboard with the text "Any Questions?" written in white chalk. The word "Any" is written in a cursive script, and "Questions" is written in a larger, more stylized cursive script. The background is a dark, textured surface, likely a chalkboard.