SAMHSA Project AWARE: Opportunities to Collaborate on School Based Suicide Prevention

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The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).
This session will focus on opportunities to build collective impact through alignment of GLS grants with Project AWARE State and community grantees in your state.

**Participants will**

- learn areas where there are shared agendas with local and state school mental health strategies,
- where AWARE and SS/HS grantees are located at the state and community levels, and
- discuss opportunities to enhance outcomes for young people through collaborative partnerships.
Participants will:

1. Explore areas for collective impact work between GLS grantees and AWARE State and community grantees focusing on school mental health.
2. Learn about where AWARE SEA and Community grantees are located and map this with GLS grantees
3. Discuss opportunities to enhance outcomes for young people through collaborative partnerships between GLS and AWARE grantees in states and examine lessons learned in states currently linking across these grants.
Preventive Intervention Opportunities

Interventions by Developmental Phase

- **Prior to Conception**: Pregnancy prevention
- **Prenatal**: Prenatal care
- **Infancy**: Home visiting
- **Early Childhood**: Early childhood interventions, Parenting skills training, Social and behavioral skills training, Classroom-based curriculum to prevent substance abuse, aggressive behavior, or risky sex
- **Childhood**: Prevention of depression
- **Early Adolescence**: Prevention of schizophrenia
- **Adolescence**: Prevention focused on specific family adversities (Bereavement, divorce, parental psychopathology, parental substance use, parental incarceration)
- **Young Adulthood**: Community interventions, Policy

SAMHSA
Substance Abuse and Mental Health Services Administration
Prevention Window

- **Age at first symptom**
- **Age at first diagnosis**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Age at first symptom</th>
<th>Age at first diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADHD</td>
<td>4</td>
<td>12</td>
</tr>
<tr>
<td>ODD</td>
<td>6</td>
<td>15</td>
</tr>
<tr>
<td>CD</td>
<td>8</td>
<td>17</td>
</tr>
<tr>
<td>Any Anxiety</td>
<td>12</td>
<td>20</td>
</tr>
<tr>
<td>Depression</td>
<td>15</td>
<td>23</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>17</td>
<td>25</td>
</tr>
<tr>
<td>Substance Dependence</td>
<td>19</td>
<td>24</td>
</tr>
<tr>
<td>Any Diagnosis</td>
<td>20</td>
<td>22</td>
</tr>
</tbody>
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Wellness Perspective

• Mental and physical wellness of children, families, and communities
• Mental health promotion, prevention, early intervention, and links to appropriate treatment
• Across the developmental spectrum through school-aged children (12\textsuperscript{th} grade)
• Integration of mental health with other child and family-serving systems: child welfare, education, juvenile justice, public health, early childhood, law enforcement
Interventions by Developmental Phase

- **Prior to Conception**: Pregnancy prevention
- **Prenatal**: Project La
- **Infancy**: Home visiting
- **Early Childhood**: Early childhood interventions
- **Childhood**: Parenting skills training
- **Early Adolescence**: Classroom-based curriculum to prevent substance abuse, aggressive behavior, or risky sex
- **Adolescence**: Prevention of depression, Prevention of schizophrenia
- **Young Adulthood**: Community interventions, Policy

**Programs**
- Safe School/Healthy Students
- AWARE SEA and Healthy Transitions
- Garrett Lee Smith
Project LAUNCH

- States, Tribes, Territories
- 55 sites (7 cohorts)
- Early childhood (prenatal to age 8)
- Wellness promotion & prevention
- State/tribal and community partnership
- Systems integration & services
- 5 Core Strategies
Infant and Early Childhood Mental Health Consultation (IECMHC) is a preventive intervention that partners mental health professionals with children’s caregivers. IECMHC builds the capacities of families and other providers to understand and manage behaviors and build healthy relationships, resulting in improved social, emotional, and behavioral outcomes for young children and reductions in preschool expulsions and suspensions.
Resiliency in Communities After Stress and Trauma (ReCAST) Program

To support communities who have experienced civil unrest within the past 24 months to help them promote resilience and equity in their communities and to support their high-risk youth and families who are feeling the effects of the community trauma.

$1m per year for 5 years
• 365 LEA grants awarded

• 7 state grants awarded at $2.2 million per year for four years
Project AWARE

- **Project AWARE – State Education Agency grants**
  - 20 Five year grants awarded at $2 million per year
  - Collaboration with ED School Climate Transformation SEA grants

- **Project AWARE – Local**
  - 100 2 yr. grants awarded at $100K
  - Collaboration with ED School Climate Transformation LEA grants and
  - Justice School Justice Collaboration Program: Keeping Kids in School and Out of Court

- **Project AWARE-Community**
  - 70 3 year grants awarded at $125K per year
  - To include 2 in Puerto Rico
We know that mental health is essential to successful education and life outcomes. It cannot be an add-on, it must be integrated into a whole-child perspective – Joyce Sebian, Substance Abuse and Mental Health Services Administration

Children’s mental health is tied to their entire wellbeing – Olga Acosta Price, Center for Health and Health Care in Schools

Over the years we’ve moved to a recognition of mental health being integral in schools and tremendous advancement in evidence-based practices, multi-tiered systems of support, shared mental health agendas, and performance measurement in school mental health, but there is still much more to accomplish – Nancy Lever, Center for School Mental Health, University of Maryland School of Medicine

Health affects education and education affects health – Norris Dickard, Department of Education/Office of Elementary & Secondary Education/Office of Safe and Healthy Students
Key Features of Effective School Mental Health

• Family-school-community partnerships

• Delivery of mental health services within a multi-tiered system of supports (MTSS).
MTSS Defined

MTSS is a coherent continuum of evidence based, system-wide practices to support a rapid response to student needs, with frequent data-based monitoring to inform decision-making and empower each student to achieve their potential.
Research Demonstrates Positive Outcomes of School Mental Health Services

• Improvements in social competency, behavioral and emotional functioning

• Improvements in academics (GPA, test scores, attendance, teacher retention)

• Cost savings!

• Increased access to care → Decreased health disparities
# Prevention Savings

<table>
<thead>
<tr>
<th>If we are able to:</th>
<th>HEALTH AND/OR SOCIETAL DOLLARS SAVED FOR EVERY $1 INVESTED</th>
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<tbody>
<tr>
<td>Five Strongest School-based Substance Misuse Prevention Programs</td>
<td>$3.80 – $34</td>
</tr>
<tr>
<td>School-based Social Emotional Learning Programs</td>
<td>$11</td>
</tr>
<tr>
<td>School-based Violence Prevention Programs (including Suicide)</td>
<td>$15 – $81</td>
</tr>
<tr>
<td>Screening, Brief Intervention and Referral to Treatment (for Substance Misuse)</td>
<td>$3.81 - $5.60</td>
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Comprehensive Approaches

- Comprehensive- Includes all the related partners, systems, and services.
- Needs and resource driven planning process
- Collaborative partnerships that are not dependent on funding
- Cross-sector (juvenile justice, mental/behavioral health, law enforcement, child welfare, and education)
- Data-driven and research-based
- Sustainable strategies
State & Community Comprehensive Models

Project AWARE

Safe Schools/Healthy Students

- State (SEA) + 3 communities (LEAs)
- Needs & resource assessment
- Comprehensive plan
- State & Community Management Teams
- Evaluation plan
- Strong bi-directional communication between all partners, leveraging and linking to other resources and a focus on sustainability.
In first 3 years of 5 year program, the 20 states and associated communities:

- Trained 51,259 in Mental Health First Aid
  - Trained a variety of people, including teachers, student support personnel, cafeteria workers, bus drivers, community service providers, juvenile justice and child welfare personnel, and parents.
- Connected 117,573 youth to services or additional resources
Collective impact occurs when organizations from different sectors agree to solve a specific social problem using a common agenda, aligning ...
Collective Impact between AWARE SEA and GLS?

Safe Schools/Healthy Students

AWARE SEA

GLS
Healthy Youth and Families
and Communities

Suicide Prevention Programs and strategies

Comprehensive Community/School Partnerships /School Mental Health Systems

Healthy Youth and Families and Communities
Discussion Questions

- Are you currently in a state that receives AWARE SEA or SS/HS grant?
- What partnerships are in place regarding these grant programs now?
- Where do you see opportunities for further collaboration?
- Where do you see intersections between GLS and AWARE STATE or Safe Schools/Healthy Students?
- Where is their opportunity for collective impact?
- What would success look like in your community and state?
- Other?
Thank you

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