Incorporating Substance Use Treatment in Schools

Introducing Behavioral Health Treatment Options to Schools
Objectives

• Discuss the need for offering substance use treatment options in Rhode Island schools, particularly Providence Public School District
• Provide a brief overview of the substance use treatment model Rhode Island chose for young adults ages 12-25 years of age
• Identify challenges with implementing the model within the schools
• Review lessons learned and next steps for us with this project
Family Service of Rhode Island

- Non-profit human services agency
- Serving the community for over 125 years
- Provide outpatient mental health, residential treatment, case management for underserved/low income individuals and families
- Programming for individuals from birth through adulthood
- Trauma-informed & evidence-based practices
- Committed to incorporating substance use work through the community health teams, primary care, pregnant and parenting mothers, residential programs, and general outpatient services, along with AIDS Project Rhode Island
PPSD Schools’ Wellness Teams

- Weekly meetings
- Team Members
- Consultation

- Screens & Assessments
- Treatment Planning
- Intervention
- Family Involvement

- Linkages to community resources
- Referrals to care
- Integrate in school community

- Training for school personnel
- Parenting strategies

Collaboration

Clinical Care

Community

Sharing Expertise
Providence Public Schools

- Johns Hopkins Report:
  - Across all grade levels, 90% of students not proficient in Math and 86% not proficient in English Language Arts
  - Overburdened with multiple layers of governance and bureaucracy with no clear path to get anything done
  - Overwhelming number of students and teachers reported not feeling safe in their school, which correlates to high numbers of both student and teacher absenteeism
  - Teacher report they do not feel supported, given limited opportunities for professional development and have severe constraints regarding hiring and removing teachers
  - Principals have limited ability to create change within their schools and are often blamed for processes out of their control
  - Parents (majority Latino) report feeling demoralized due to little effort to incorporate them in the learning process
  - Buildings are crumbling
What Rhode Island Youth are Facing

One in five middle school students have tried drinking alcohol.

While smoking cigarettes among high school students has declined, 4 in 10 students have used an e-cigarette.

23% report current use of marijuana.

12% of high schoolers and 4% middle schoolers used prescription drugs not prescribed to them.
The Seven Challenges is a healthy decision making model designed for youth ages 12-25 years of age dealing with alcohol and other drug use.

- Not an abstinence model
- Flexibility with modality: individual, group, and home based
ACTIVITY

Putting it into practice
<table>
<thead>
<tr>
<th>Experimental Use</th>
<th>Regular Use</th>
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<tbody>
<tr>
<td>Harmful Abuse</td>
<td>Drug Dependence</td>
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Data

Substance Related and Treatment Motivation Changes from Baseline to 6 months Post Baseline

Mental Health Changes from Baseline to 6 Months Post Baseline
Internal Data
FSRI and CCAP combined 2018-2019
Academic Year

• 1 group, 7 participants
• 5 of 7 participants reported reduction or abstinence by end of the school year.
• All 7 reported a reduction in school incidences and 0 incidents involved substances
• FSRI has serviced 10 individual adolescents
  • 2 have completed the program reporting reduction in use, 1 is finishing up and has not used since January 2019
  • 1 transitioned to a new school and did not elect to be followed by a clinician
  • 3 did not engage in the program after initial referral
  • 3 are currently actively participating in the program at various stages
Challenges vs. Benefits of Implementation in Schools

Challenges
• Buy in
• Confidentiality within school and with guardians
• Space
• Time – pulling students out of class
• Sustainable Funding
• Student Absenteeism
• Staff Retention

Benefits
• Easy access for students
• Serve a lot of students in one place
• Peer community/ownership of issues
• Flexible model
“It makes me feel that someone else gets that it’s not easy to want to quit.”

“They (the facilitators) trust me.”

“I feel safe to say anything.”

Moving in the Right Direction
Lessons Learned and Next Steps

• Simultaneously launching mental health services and substance use treatment within the schools has been difficult
• Widening the focus of advertising to include community recreation centers, YMCAs, libraries, police departments, family and drug courts, etc.
• Train more clinicians from various departments to have a wider reach
• Brief Challenges
References

