ENHANCING SCHOOL SAFETY BY WORKING EFFECTIVELY WITH ALL SCHOOL PERSONNEL

MENTAL HEALTH IN SCHOOLS LAS VEGAS
10/12/18, 11:30-12:30

PRESENTERS

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SESSION AIMS

We aim to

1) unify school mental health workers and professionals such as administrators, educators, staff, and youth

2) provide information of warning signs and proper treatment of youth at risk for harm.

SESSION OBJECTIVES

- **Goal 1:** Recognize mental health issues to enhance school safety.

- **Goal 2:** Increase collaboration between school mental health professionals and administrators (superintendents and principals).

- **Goal 3:** Increase collaboration between school mental health professionals and educators and staff members (nurses, custodians, cooks, etc.).

ABSTRACT 1:
Need for safer schools

School safety,

- rooted in stronger mental health in schools
- radiates in and out of school communities, families, students, and governments.
- school mental health professionals (SMHP) can assist in this effort

Collaboration of school staff is essential

- for increased mental health in schools,

- relate to safety

- schools will benefit when staff collaborate

ABSTRACT 3

Administrators are challenged to make schools safer

- not trained in use of mental health professionals in schools

- advocate for proper use to instill school safety

ABSTRACT 4

SMHP can share warning signs of youth at risk for harm to self and others

- Other staff can share behaviors or knowledge

- Collaborative, train, refer, and intervene for a safer environment.

Admin buy in: Collaboration

- Admin & counselors bolster their school communities
- Collaboration enhances leadership to reach goals
- Counselors advocate for student needs, considering the needs of the teachers and others
- Counselors need administrator to challenge, provide autonomy, and encouraging professional for growth
- Counselors connect between students, schools, families, and communities and the schools

Collaborating with Administration

Advocate for mental health for school safety.

- Administrators want safe school
- Many do not have expertise in mental health
- Most do not know how to properly use mental health professionals in schools.

Staff buy-in: Collaboration

Work with teachers to assist students who are at-risk
- Learning challenges, Special Education
- Poverty, low income
- MTSS: PBIS

Work with community health partners to bring education to parents, staff, and students on topics relating to mental health.
- Example: Hancock County, Indiana

Staff buy in: Communicate

- Practice counseling skills of active listening and unconditional positive regard
- Show and deserve respect
- Avail yourself
- Respond to emails, phone calls in less than 24 hours
- Meet regularly with administration, counselors, and staff

Know your resources

- Community
- Mental Health Professionals
- Law Enforcement
- Clergy

- Ethical Standards
- Position Statements
- Liability Insurance
- ASCA

Creating safe and supportive schools

- Address the social, emotional, and mental health of our students
- Encourage dialogue about mental health,
  - reduce stigma, and
  - raise awareness, understanding, and empathy.
- Empower students to educate one another and their communities,
  - create a culture of peer support within their schools
  - formation of stigma-free mental health clubs

PREVENTATIVE MEASURES FOR OVERALL SAFETY

School Counselors can assist with:

.

Training

- De-escalation strategies
- Non-violent crisis intervention
- Topics for staff relating to mental health; recognizing signs
- Training students to understand mental health

Collaboration

- Working with teachers to assist students at-risk
- Working with community health partners to bring education to parents, staff, and students on topics relating to mental health.

De-escalation strategies (examples)
- Stay Calm: Manage your own response
- Undivided attention
- Acknowledge feelings
- Think about noise, lighting, audience!

Non-violent crisis intervention
- CPI

Topics relating to mental health; recognizing signs
- Anxiety, Depression, Suicide Prevention

Teens help Teens

Peers are more likely to report mental health issues to each other first.

- QPR
- safeTALK
- Peer led *(adult sponsored)* club

ASCA Safe Schools Position Statement

- intervene for students at risk of dropping out or harming self or others
- advocate for student safety
- provide individual and group counseling
- district and school response team planning and practices
- peer mediation training, conflict resolution programs and anti-bullying programs
- family, faculty and staff education programs
- support student initiated programs such as Students Against Violence Everywhere
- facilitate open communication between students and caring adults
- defuse critical incidents and providing related stress debriefing
- partner with communities

MULTI-MODAL: BASIC Ph

**The Basic-ph
multi modal coping approach**

Belief. **A**ffect. **S**ocial. **I**magination. **C**ognition. **Ph**ysical.
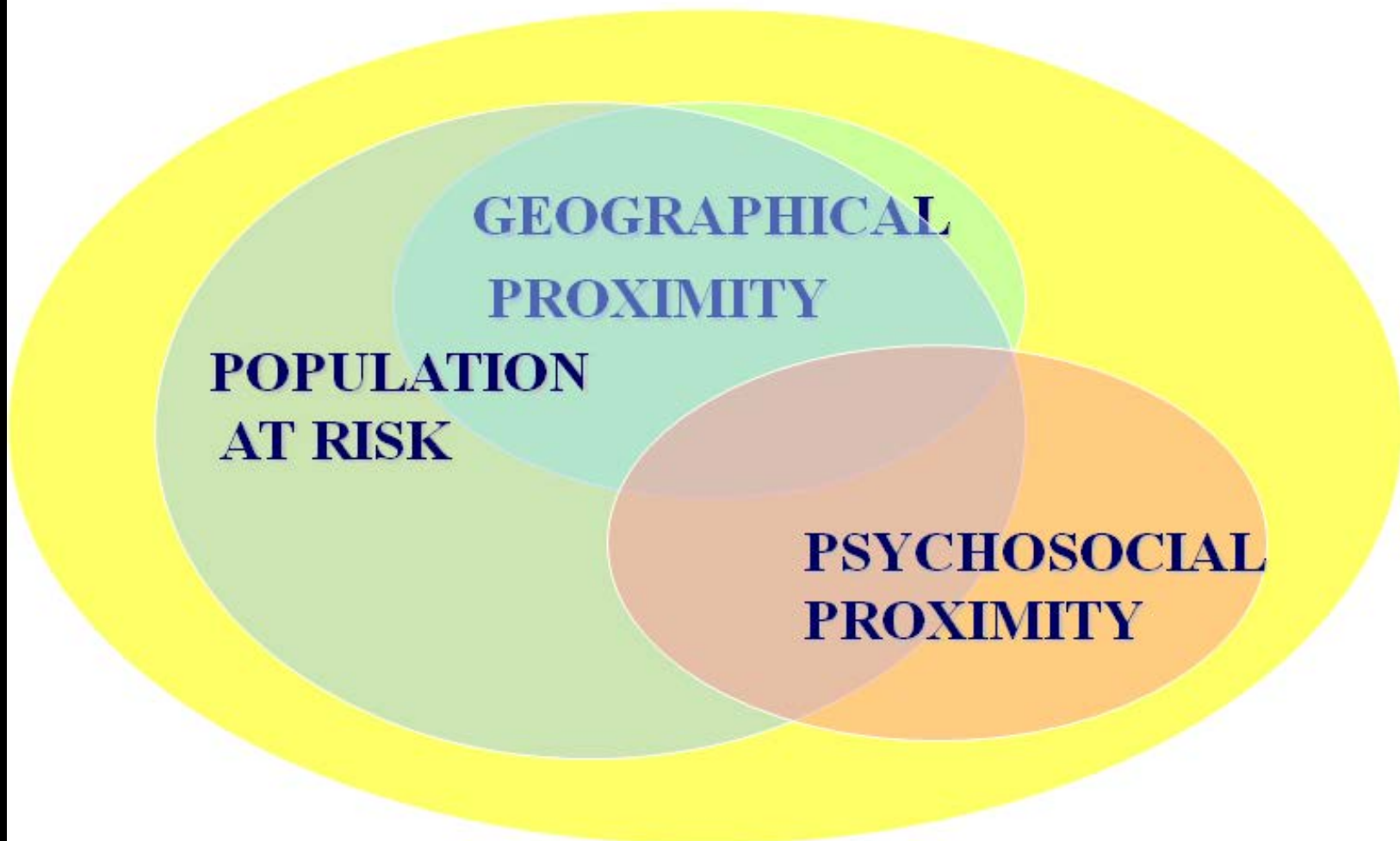
self
values

feelings
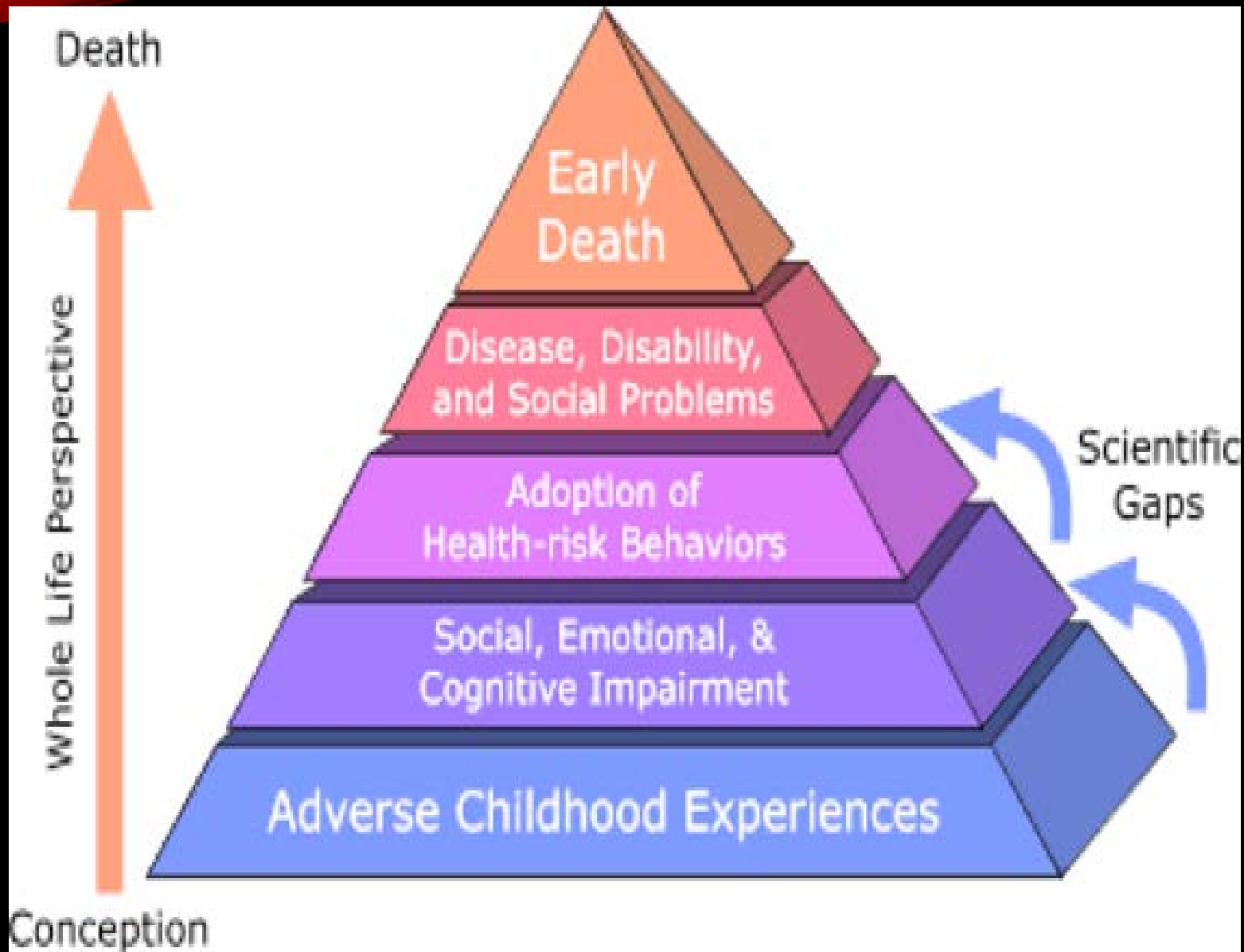emotions

roles
friends

intuition
creativity

knowledge
logic

body
activity

Lahad, M., CSPC, Kiryat Shmona, Israel

Psychological Health & Safety

1. Recognize the importance of adult reactions and behaviors

2. Minimize crisis exposure

3. Reunite/locate caregivers

4. Provide facts

5. Return students to a safe school environment

6. Provide opportunities to take action

Be involved

Development of Crisis Plan/Team

- Be part of the school safety committee
- Contribute to the development of the school Crisis Plan
- Know your Crisis Intervention Team!

Crisis Intervention Teams

Community Resources
Community mental health professionals, Law enforcement, Clergy, Dept. of Education, ASCA Ethical standards & Position statements, Liability insurance

School Personnel
Mental health and school counselors, nurses, administrators, custodians, resource officers

Stakeholders
School students and staff, mental health workers, and the whole community (public servants, hospitals, churches, synagogues and charities)

Intervention during & after crisis:

1. Promote safety and security for all

2. Reassure individuals in disaster

3. Identify current priorities

4. Assess functioning and coping

5. Provide for needs

Crisis Psychoeducation

Direct instruction or sharing of information to help crisis survivors and their caregivers to understand, prepare for, and respond to the crisis,and to the problems and the reactions it creates, for both self and others.

Psychoeducation strategies

1. Informational documents

1. Trainings for caregivers

1. Groups for youth/students

Informational handouts

Helps caregivers and students

Understand the crisis

Understand potential crisis effects

Identify resources to manage problems

Sample

Psychoeducation Groups

Introduce: Purpose, intros, process, steps, rules created (5 min)

Answer: Respond to questions, avoid disturbing details (20 min)

Prepare: Normalize common crisis reaction and discuss pathological reactions(15 min)

Teach: Stress reduction and relaxation techniques; coping strategies; name supports; avoid maladaptive coping(15 min)
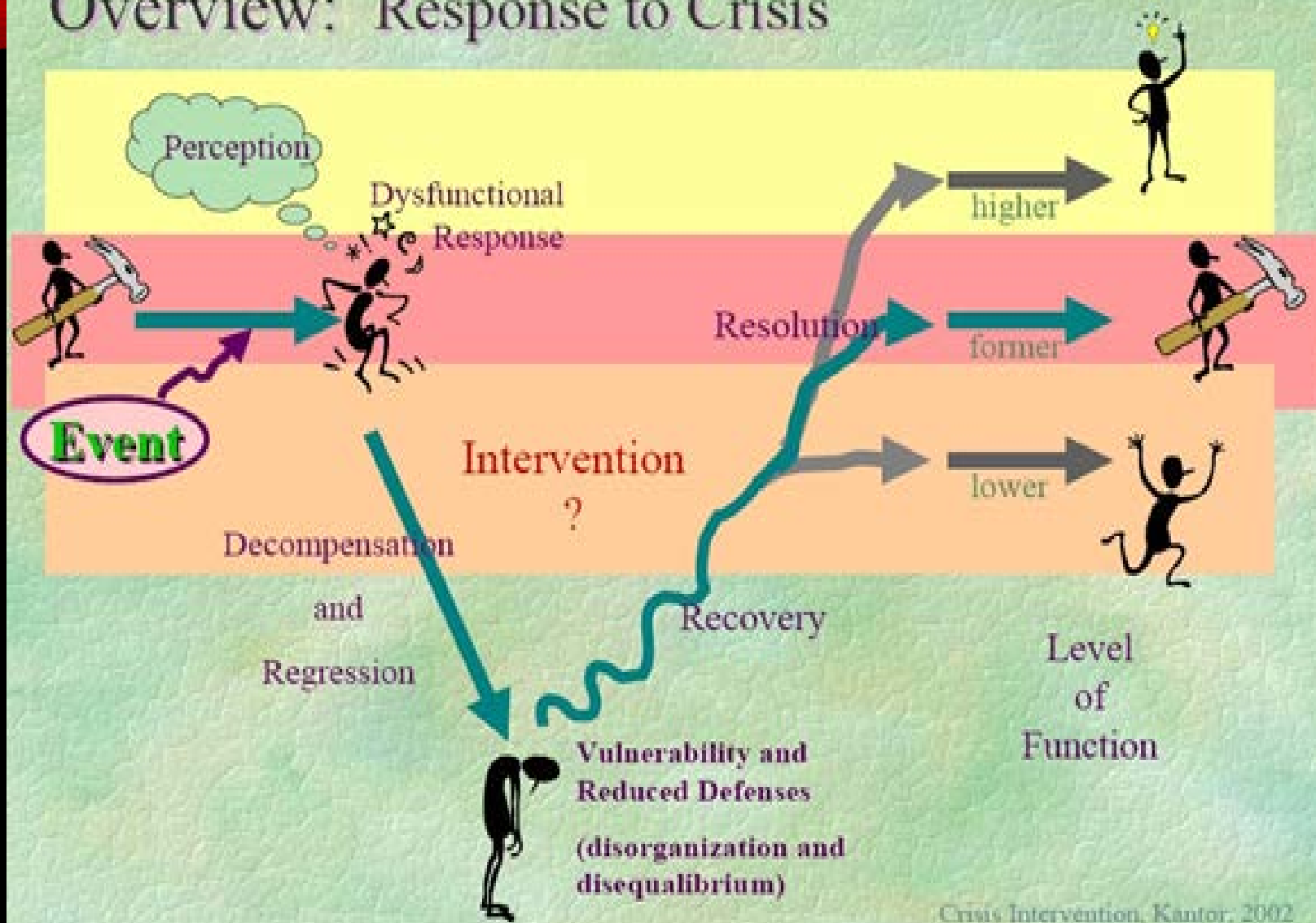
Close: Have plan; Care for themselves; Obtain assistance(5 min)

Reminders of School shootings

}Senseless violence is difficult to understand.

}Violence is never the solution to personal problems.

}Safety is everyone's responsibility.

}Good, caring people are watching over you.

}The return to routine and structure is healing.

}Support is available.

}Schools remain the safest environment for youth

Overview: Response to Crisis

Perception

Dysfunctional Response

higher

Event

Resolution

former

Intervention
?

lower

Decompensation

and

Regression

Recovery

Level
of
Function

Vulnerability and
Reduced Defenses

(disorganization and
disequalibrium)

Crisis Intervention, Kantor; 2002

Final Thoughts

Q & A

RESOURCES

Positive Behavioral Interventions and Supports (PBIS)

Crisis Prevention Institute (CPI)

Question, Persuade, Refer (QPR)

Remedy Live

ASCA Position Statements : The School Counselor and Crisis Response

National Center for School Crisis and Bereavement

Video: What is school for?   Video: Almost a school shooter

REFERENCES

ASCA, (2016). Ethical Standards for School Counselors. Retrieved on September 13, 2018: https://www.schoolcounselor.org/asca/media/asca/Ethics/EthicalStandards2016.pdf.

Florida State University. Retrieved September 14, 2018 at https://www.cpeip.fsu.edu/storm/StormresourcesFiles/resourceFile_51.pdf.

Galassi, J. P., & Akos, P. (2004). Developmental advocacy: Twenty-first century school counseling. Journal of Counseling & Development, 82(2), 146-157.

REFERENCES (Continued)

Hill, J. & Hill, A. (2018). School Safety and Response and Prevention. Indiana Wesleyan University School Counseling Program Symposium, Marion, IN.

Janson, C. (2009, December). High School Counselors' Views of their Leadership Behaviors: A Q Methodology Study. Retrieved from https://www.schoolcounselor.org/asca/media/asca/LeadershipSpecialist/HighSchoolCounselorViews.pdf.

Florida Crisis Response Team, Frank J. Zenere, Ed.S., School Psychologist, Miami-Dade County Public Schools, 11th Circuit.

References (continued)

Money-Brady, Jennifer. (2018). The effective Leadership Characteristics, Skills, and Supporting Components of School Counselors: A qualitative study. Dissertation for Argosy University.

Nonviolent Crisis Intervention Foundation Course. (2016). Milwaukee, WI: Crisis Prevention Institute.

Oliver, B., Fleck, M., & Money-Brady, J. (2016). *Superintendents & Principals: Partners in Success,* Indiana Chamber of Commerce Foundation Study. Retrieved from http://share.indianachamber.com/media/Partners_in_Success.pdf

Young, A., Dollarhide, C. T., & Baughman, A. (2015). The Voices of School Counselors: Essential Characteristics of School Counselor Leaders. Professional School Counseling, 19(1), 36-45.