



**School Practitioner  
Listserv**



A Weekly Community of Practice Network  
for Sharing and Interchange

**August 18, 2014**

**Request**

**>Teaching students about mental health**

**For Your Information**

**>Youth leadership blog on "Collaboration conundrum"**

**Featured Center Resource**

**>Focus on unifying school and community resources  
for collective impact**

**Appended**

**>How one city is welcoming hundreds of migrant children  
with open arms**

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**Please forward this to a few colleagues you think might be interested.  
The more who join, the more we are likely to receive to share.**

**For those who have been forwarded this and want to be part of  
the weekly exchange, send an email to [Ltaylor@ucla.edu](mailto:Ltaylor@ucla.edu)**

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## **R** **request** **Teaching students about MH**

A frequent request to our Center is for descriptions and data related to what schools do with respect to mental health education. The most recent request also asked about the impact of such efforts.

Below are some resource aids we have put together and some comments from a couple of colleagues who are knowledgeable about this topic.

See the Center's Online Clearinghouse Quick Find on:

>*Mental Health Curriculum* – [http://smhp.psych.ucla.edu/qf/p2311\\_01.htm](http://smhp.psych.ucla.edu/qf/p2311_01.htm)

Also search for relevant references in the

>*Mental Health in Schools Bibliography* (a sample of books, chapters, and articles)  
<http://smhp.psych.ucla.edu/qf/references.htm>

One illustrative program to review is NAMI's online mental health curriculum for upper elementary, middle, and high school students. It is called

>*Breaking the Silence* – <http://www.btslessonplans.org/index.html>

Also, see the NIMH funded evaluation of this program –  
<http://www.btslessonplans.org/execsumm2010.pdf>

Here is what two colleagues have to say about the general topic:

(1) "I have used the SAMHSA Eliminating Barriers for Learning modules in trainings I've done with school staff here in Michigan (and I did a few trainings in Chicago and one in W. Virginia as well). Over 2000 teachers/school staff have been trained around the state. Most of those were through our Safe and Supportive Schools (S3) grant. That curriculum is designed for the adults in the school (and actually only for secondary school folks, but I have tweaked it to include elementary staff when necessary). In regards to teaching students about mental health/illness . . . the only evidenced based lessons I'm aware of that we use in Michigan is the Michigan Model for Health. There are lessons for each grade and they include modules on Social and Emotional Learning skills, etc. I know there are groups in the state that go into the schools to do presentations around mental health/depression/suicide prevention for students but those are usually one time presentations and aren't necessarily evidenced based and I can't say for sure if they are collecting data/outcomes. They may have some satisfaction survey info."

(2) "My impression is that how schools teach students about mental health varies tremendously from district to district. Some limit this to psychology courses, which are electives and do not have a universal reach. Others include a unit (or more) on mental health as part of the health class curriculum. Some imbed it in social emotional learning curricula. It also depends on the age of the students. The role of the school-based mental health professional would vary as well. In some cases the health or classroom teacher would simply cover the material themselves; in other cases, they would collaborate with the counselor, psychologist or social worker."

## **L**istserv Participants:

Do you have any recommendations, descriptions, data, reports related to teaching students about mental health?

Also, we have been wondering whether anyone on this Practitioner listserv knows if the American Psychological Association's Center for Psychology in Schools and Education (<http://www.apa.org/ed/schools/cpse/index.aspx>) includes this topic in their efforts to promote "the high quality application of psychological science to programs and policies for schools and pre-K through grade 12 education." It is designed to be "a liaison both within APA and with national educational and scientific societies, federal agencies and the general public concerning the education and development of children and adolescents."

*As always, we look forward to hearing from you! Send to [ltaylor@ucla.edu](mailto:ltaylor@ucla.edu)*

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## **F**or your information

**Youth Leadership blog on "Collaboration conundrum"**

Here is an excerpt from a recent blog by Karen Pittman entitled: *Collaboration Conundrums: Why Youth Service Leaders Embrace and Fear Collective Impact Efforts*  
[http://www.readyby21.org/collaboration-conundrums-why-youth-service-leaders-embrace-and-fear-collective-impact-efforts?utm\\_source=Ready+News+July4+14&utm\\_campaign=Constant+Contact&utm\\_medium=email](http://www.readyby21.org/collaboration-conundrums-why-youth-service-leaders-embrace-and-fear-collective-impact-efforts?utm_source=Ready+News+July4+14&utm_campaign=Constant+Contact&utm_medium=email)

"I recently spent two hours with afterschool and community leaders in Milwaukee who are joining together to improve the quality and coordination of youth programs in their city. This was the first "lunch and learn" gathering for partners in the initiative, called Beyond the Bell. The informal Q- and-A covered many topics, from social and emotional learning to common core standards, but one strand of questions were particularly telling.

The questions came rapid fire from around the room: As the head of a small organization with limited time, should I focus on networking with my peers or joining big initiatives? How do you decide which initiative to join? Why are there so many? Can't something be done to combine them? What are the risks of not participating? How do we staff and fund this collaborative work?

We all know the joke that collaboration is an unnatural act between consenting adults. Youth-focused organizations in particular have three challenges that hamper effective collaboration:

They often compete for the same dollars to serve the same kids. Sometimes there is no organizing force that binds them together as a network, which would pull them to identify the issues, goals and capacities that can unify them. Too often, there are stronger organizing forces that pull them into meetings and conversations that might have implications for their work, but in which they have relatively little clout....

There needs to be a better way to connect to single issue-focused coalitions. On average, individual respondents identified more than five issue-focused coalitions per community that they could be involved in, not counting broader coalitions organized around the education pipeline. The issues include youth leadership, substance abuse, obesity prevention and

homelessness – issues that many providers work on simultaneously. In our experience, a quick conversation in a mid-sized community easily surfaces upwards of 20 such groups.

There needs to be support for both a broad provider-focused partnership and a broad, multi-issue leadership council. The first helps community based organizations build common strengths. The second can provide a connecting point for single-issue coalitions. ...

In community after community, nonprofit leaders suggest that they want to be at the education leadership council table in order to protect their interests – both as individual providers, and as members of a broader youth development or afterschool community that believes youth organizations make unique contributions to student success.

Too often, however, these leaders experience “provider undervaluation.” They find themselves sidelined in strategy discussions because they can’t talk “systems.” They don’t have a short list of common goals and indicators. They don’t have shared data on youth attendance, activities and outcomes – particularly the social, emotional, physical and civic outcomes they focus on. They don’t have unduplicated count data on the kids they serve. They don’t have system-level data on quality and impact. They don’t have the accountability infrastructure needed to make joint “needle-moving” commitments.

The challenge for youth services providers is not just to build a network; it’s to build system-like capacities to track and improve quality and reach, along with system-level measures of the outcomes they believe are linked to consistent engagement in quality programs. ...

Meeting these challenges requires strong leadership, shared commitment and shared measures. Mostly importantly, it requires stable funding. Collective impact conversations have focused a lot on the importance of funding the backbone functions of the collective impact initiative. It’s time to make backbone funding for youth services partnership non-negotiable as well."

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## **C**enter featured Resources

### **Focus on unifying school and community resources for collective impact**

It is good to see the above focus on the topic of collaboration. The matters raised have been and continue to be a constant focus of our Center and for many others. For example, the fragmented nature of practices for supporting students within schools and between schools and community services has been the focus of many initiatives and policy reports over the last 25 years. These have generated terms such as school linked services, integrated services, one stop shopping, wraparound services, seamless service delivery, coordinated school health, co location of services, integrated student supports, full service schools, systems of care, and more. Recent policy oriented reports have come from Child Trends using the term "Integrated Student Supports" and from the Association of Maternal & Child Health Programs (AMCHP) and the Lucile Packard Foundation for Children's Health focusing on "Systems of Care". And, the Centers for Disease Control and Prevention (CDC) has revamped their "Coordinated School Health Program" to connect it with the renewal of a whole child movement All this activity underscores increasing interest in addressing barriers to learning and teaching and re-engaging disconnected students.

Our Center at UCLA has a long history of focusing on the problem of fragmented interventions and the underlying policy marginalization that produces ad hoc and piecemeal initiatives. A recent example is our brief policy notes entitled:

>*Integrated Student Supports and Equity: What's Not Being Discussed?*  
<http://smhp.psych.ucla.edu/pdfdocs/integpolicy.pdf>

Abstract: Connecting school, home, and community resources is essential to the well being of children and youth and to enhancing equity of opportunity for them to succeed at school and beyond. With this in mind, many initiatives and policy reports have focused on addressing the widespread fragmentation of supports for families and their children. Considerable policy emphasis has centered on the notion of integrated student supports. While most of the discussion of integrated student supports is well intentioned, the examples most frequently cited have little chance of enhancing equity of opportunity for students across the country. Moreover, as practiced, serious unintended negative consequences have been observed. This set of policy notes stresses the need and directions for moving forward.

With respect to the complex matters of establishing and sustaining a nonmarginalized school-community collaboration, see:

>*School-Community Partnerships: A Guide* –  
<http://smhp.psych.ucla.edu/pdfdocs/guides/schoolcomm.pdf>

>*Fostering School, Family, and Community Involvement* –  
[http://smhp.psych.ucla.edu/publications/44\\_guide\\_7\\_fostering\\_school\\_family\\_and\\_community\\_involvement.pdf](http://smhp.psych.ucla.edu/publications/44_guide_7_fostering_school_family_and_community_involvement.pdf)

And for more, see the Center's Online Clearinghouse Quick Find on  
>*Collaboration - School, Community, Interagency; Community Schools* –  
[http://smhp.psych.ucla.edu/qf/p1201\\_01.htm](http://smhp.psych.ucla.edu/qf/p1201_01.htm)

We have a lot of experience with these matters and are always pleased with the opportunity to share. See our website at <http://smhp.psych.ucla.edu> and feel free to contact us with specific follow-up questions. Send to [Ltaylor@ucla.edu](mailto:Ltaylor@ucla.edu)

## **PRACTITIONER RESOURCES AND COMMUNITY OF PRACTICE EXCHANGE**

We are working on upgrading our website resources for practitioners – including the Net Exchange which provides and captures the interchanges with the Center on specific topics and between users.

See the array of resources at <http://smhp.psych.ucla.edu/netexch.htm>

See posted exchanges at <http://smhp.psych.ucla.edu/newnetexchange.htm>

*If you have ideas for how these can be improved,  
let us know by sending to [Ltaylor@ucla.edu](mailto:Ltaylor@ucla.edu)*

## Appendix

A recent newspaper article:

*How one city is welcoming hundreds of migrant children with open arms*

<http://www.csmonitor.com/USA/Education/2014/0807/How-one-city-is-welcoming-hundreds-of-migrant-children-with-open-arms>

As unaccompanied children continue to pour across the US-Mexico border from El Salvador, Guatemala, and Honduras, they're creating a challenge for school districts across the country, where local officials are scrambling to put together the resources to educate and care for the new arrivals. Because the Department of Health and Human Services (HHS) often places these minors with family members, the children are disproportionately ending up in cities with large Central American populations - typically low- to middle-income locales already struggling to deal with their own social needs. As a result, city leaders have begun to dig into local budgets, while calling on the federal government to pitch in, and, in some cases, receiving aid from concerned citizens.

Case in point is Chelsea, Mass. - a proud, threadbare tangle of commerce and heavy industry, directly across the Mystic River from Boston. Thirty-four percent of the city's 38,000 residents identified as Salvadoran, Guatemalan, or Honduran at the 2010 census, and during the past four years, this portion has only increased. Of the 720 new enrollees in Chelsea's school system in 2013, 267 came directly from Central America's Northern Triangle, and dozens of other Hispanic students came from Texas or Arizona. In total, 315 spoke little or no English. Both the city manager, Jay Ash, and the public schools superintendent, Mary Bourque, emphasize that they welcome immigrants with open arms - a stark contrast with many other local leaders across the country, even in progressive Massachusetts, many of whom are calling for a halt to the immigrant influx. Though the state often picks up close to 90 percent of the costs of educating Chelsea students, that never covers the extent of the care needed for new students from Central America - a reality that's putting a strain on the municipal budget.

Chelsea schools have redirected \$300,000 to boost counseling programs. The district has also hired another two specially trained English instructors this summer, adding to the phalanx of English teachers that she's already added to in recent years. But the burden could be much greater, if it weren't for the many community members that have actively come together to support the children - offering every service from mental health care to legal advice. Among the centers of this aid is the Chelsea Collaborative, a multi-issue nonprofit advocacy and human services organization occupying an unassuming storefront attached to the town's post office, where hundreds from the Boston area have volunteered their services.

Executive Director Gladys Vega recalls one July 10 meeting in particular in which 139 residents of Greater Boston packed into one small room and an adjacent hallway at the Collaborative to find out how they could contribute.

"There were doctors, lawyers, Catholic charities, counselors, the state senator [Democratic Sen. Sal DiDomenico],... staff from North Suffolk Mental Health, the security guard from Chelsea High School, people from Mass General Hospital, law enforcement," Ms. Vega says. "We said as a community, let's put our heads together and try to figure this out." Vega says this challenge is no big deal for her city, which emerged in the past from setback after setback, including a period of suspended self-government and prolonged periods of infamous corruption.

"Crises could be our last name," she says. "We went into receivership and had four mayors indicted. So this doesn't faze us now. We'll all work together and take responsibility."

*Please share relevant resources ideas, requests,  
comments, and experiences!*

Send to [ltaylor@ucla.edu](mailto:ltaylor@ucla.edu)

**Note: Responses come only to the  
Center for Mental Health in Schools at UCLA for  
possible inclusion in the next week's message.**

We also post a broad range of issues and responses to the  
*Net Exchange* on our website at  
<http://smhp.psych.ucla.edu/newnetexchange.htm>  
and to *Facebook* (access from the Center's homepage  
<http://smhp.psych.ucla.edu/>

**For Recent Previous Postings**, see  
<http://smhp.psych.ucla.edu/practitioner.htm>