

*September 3, 2014*

.....  
.....  
**CSMH NEWS AND RESOURCES**  
.....  
.....

***Back to School***

The Center for School Mental Health Team wishes all students, families and school-based staff a successful and productive 2014-2015 school year!

***There is Still Time to Register for the 19<sup>th</sup> Annual Conference on Advancing School Mental Health***

Register now for the 19th Annual Conference on Advancing School Mental Health to be held September 18-20, 2014 at the [Wyndham Grand Pittsburgh Downtown](#) in Pittsburgh, PA. This year, the theme of the conference is ***School Mental Health: Enhancing Safe, Supportive and Healthy Schools***. The conference offers outstanding opportunities to learn new skills and knowledge related to practice, research, training, and policy, as well as to network with others invested in school mental health. The Annual Conference is sponsored by the Center for School Mental Health (CSMH) at the University of Maryland School of Medicine (funded by the Health Resources and Services Administration) and the IDEA Partnership, funded by the Office of Special Education Programs, sponsored by the National Association of State Directors of Special Education. **Register now!** For detailed information on the conference and to register online, <http://csmh.umaryland.edu/Conferences/AnnualConference/index.html>

***Webinar Series on Funding and Sustainability for School Mental Health: Wednesday, September 10<sup>th</sup> at 12:00pm EST***

The Center for School Mental Health is hosting a monthly webinar series on funding and sustainability for school mental health. The fifth webinar in this series will be held **Wednesday September 10, 2014 at Noon Eastern Time. Mr. William Thomas will present “Cracking the Code: How to Design a Successful Business Model for Funding and Sustainability of School-Based Health and Mental Health Services”.**

Participants will learn how to design a successful business model for funding and sustainability of school-based health and mental health services, by developing a multi-year sustainable business plan, budget by incorporating key financing strategies and performance metrics for sustainability, and analyze the importance of six proven service development strategies. A case example demonstrates how Washington County, Oregon has successfully implemented these strategies and tools to leverage over \$5,000,000 for new school-based health and mental health services.

To participate in the webinar, please follow two steps:

1. Go to this link

<https://sas.illuminate.com/site/external/jwsdetect/playback.jnlp?psid=2014-08-20.0948.M.5F8110B7CE48C99A876CF9F1C1336C.vcr&sid=2011424>

2. Please call 1-855-688-5866 and enter code 23903458.
3. To mute your line, please push \*6

If you have any questions about the webinar, please contact Amanda Mosby, [amosby@psych.umaryland.edu](mailto:amosby@psych.umaryland.edu).

### ***Archived Webinars:***

The first four webinars in the CSMH series on funding and sustainability for school mental health were as follows:

May 21<sup>st</sup>: *Sustaining School Mental Health Services: Is there an App for that?*

June 11<sup>th</sup>: *Using EPSDT to bring Excellent Mental Health Treatment into Schools*

July 16<sup>th</sup>: *Creating a Self-Sustaining, Replicable School Mental Health Program*

August 20<sup>th</sup>: *Building a School-Based Prevention Support System: A Business Plan*

The webinar recordings and PowerPoint slides are available at

<http://csmh.umaryland.edu/Resources/ArchivedWebinars/index.html>

### ***Stay Connected***

The CSMH is on Facebook and Twitter to disseminate information and resources, and to engage in discussions with colleagues. Please become a fan and like our Facebook page!

<http://www.facebook.com/pages/Center-for-School-Mental-Health/193690780654894>

and follow us on Twitter @CSMH1.

## **CURRENT EVENTS AND OPPORTUNITIES**

### ***Upcoming Webinars***

#### ***Webinar: Funding Primary Prevention: Overcoming Challenges with Innovative Financing Mechanisms***

Mental Health America will be hosting the webinar, ***Funding Primary Prevention: Overcoming Challenges with Innovative Financing Mechanism***. This webinar will review the challenges of our current system, explore major existing funding mechanisms, and share emerging and innovative public and private financing strategies that can be utilized for primary prevention interventions. New opportunities from the Affordable Care Act and interest from private investors will also be highlighted. This webinar is aimed at federal, state, and county level stakeholders from multiple sectors - behavioral health, general health, public health, education, child welfare, and juvenile justice - who are interested in primary prevention. The information may also be of interest to researchers, community based organizations, and others who are concerned with promoting individual, family, and community wellbeing.

**Date:** September 8, 2014

**Time:** 2:00-3:30 p.m. EDT

**Click here to register prior to the event:**

<https://cc.callinfo.com/cc/s/registrations/new?cid=1wqyqu6rz62ma>

## **POLICY ANNOUNCEMENTS**

### ***Autism CARES Act (HR 4631; S 2449)***

On Friday, August 8, 2014 President Obama signed the Autism Collaboration, Accountability, Research, Education, and Support Act into law. The bill passed the House on June 25 and the Senate on July 31, reauthorizing the Combating Autism Act of 2011 for five years and dedicating \$260 million a year in federal funding for autism activities. This bill supports states in developing and improving the system of health care for autism spectrum disorders (ASD), provides ongoing funding to interdisciplinary training programs that train health professionals in evidence-based ASD practice, and mandates congressional reporting on the needs of young adults and transition youth with ASD and the challenges they face transitioning from school-based services to adult services. The bill also creates the National Autism Spectrum Disorder Initiative, which will implement a strategic plan for the conduct of, and support for, autism spectrum disorder research.

To learn more, read the White House Blog on the law:

<http://www.whitehouse.gov/blog/2014/08/11/president-obama-signs-bill-support-needs-people-autism>

The text of the bill can be found here:

<https://beta.congress.gov/bill/113th-congress/house-bill/4631>

### ***Victims of Child Abuse Act Reauthorization Act of 2013(S. 1799)***

President Obama signed the Victims of Child Abuse Act Reauthorization Act of 2013 on Friday, August 8, 2014. This act reauthorizes the Victims of Child Abuse Act of 1990 and authorizes funding through 2018 to help child abuse victims. The funding is directed to Children's Advocacy Centers (CACs), which employ a multi-disciplinary team of trained professionals to conduct forensic interviews of children who have been victims of abuse. These interviews are designed to be admissible in court, preventing children from being re-traumatized by having to tell their stories multiple times.

<https://beta.congress.gov/bill/113th-congress/senate-bill/1799/text>

### ***Steps for Using Research to Inform State Policy: A Roadmap for State Policymakers***

Policymakers are increasingly expected to base their policy and program decisions on evidence showing the effectiveness of the selected intervention. In order to do so, policymakers are tasked with identifying, reviewing, and translating available research findings to fit specific program

and policy needs. With support from the Patient-Centered Outcomes Research Institute (PCORI), the National Academy for State Health Policy created this guide to assist states in making evidence-based policy decisions.

[http://www.nashp.org/sites/default/files/Roadmap.final\\_.8.6.2014.pdf](http://www.nashp.org/sites/default/files/Roadmap.final_.8.6.2014.pdf)

## RESEARCH and GRANT OPPORTUNITIES

### *Announcement*

#### ***Youth/Adolescent Mental Health Research, Access, and Preventative Treatment Efforts Grants***

The Ittleson Foundation is accepting funding requests for innovative, pilot, model and demonstration projects that are: fighting the stigma associated with mental illness and working to change the public's negative perception of people who have mental illness; utilizing new knowledge and current technological advances to improve programs and services for people who have mental illness; bringing the full benefits of this new knowledge and technology to those who presently do not have access to them; and advancing preventative mental health efforts, especially those targeted to youth and adolescents, with a special focus on strategies that involve parents, teachers, and others in close contact with these populations. Award amounts vary. Eligible organizations include nonprofit organizations with tax-exempt status.

<http://www.ittlesonfoundation.org/how-to-apply/>

## NEW LITERATURE AND RESOURCES

### *Reports*

#### ***Promoting Protective Factors for In-Risk Families and Youth: A Brief for Researchers***

The Administration on Children, Youth and Families (ACYF) published the research brief *Promoting Protective Factors for In-Risk Families and Youth*, which reviews literature on protective factors for vulnerable populations that have experienced negative outcomes or traumatic events and are at increased for further difficulties. Based on research on protective factors at multiple levels (individual, relationship, and community skills and supports), this brief highlights specific protective factors to focus on in order to promote well-being, including: individual self-regulation and social skills, parenting and adult support, positive peer relationships, positive school and community environments, and economic opportunities. Implications for further research were also discussed.

[http://www.dsgonline.com/acyf/PF\\_Research\\_Brief.pdf](http://www.dsgonline.com/acyf/PF_Research_Brief.pdf)

#### ***The Biological Embedding of Child Abuse and Neglect: Implications for Policy and Practice***

The Society for Research in Child Development (SRCD) issued a social policy report, *The Biological Embedding of Child Abuse and Neglect: Implications for Policy and Practice*, which summarizes research on possible biological mechanisms through which maltreatment may impact mental health, physical health, and school performance. This report reviews literature on ways in which maltreatment changes biological systems, particularly brain function and immune function, and presents evidence-based programs to prevent maltreatment and interventions for maltreated children. In addition, the report recommends focusing on child well-being in addition to child protection, and the necessity of integrated systems of care.

[http://www.srcd.org/sites/default/files/spr\\_28\\_1\\_final.pdf](http://www.srcd.org/sites/default/files/spr_28_1_final.pdf)

### ***Intergenerational Simulations of Delayed Childbearing and Increased Education***

Child Trends and the Brookings Institution released a research brief, “*What If*” *You Earned a Diploma and Delayed Parenthood? Intergenerational Simulations of Delayed Childbearing and Increased Education*. This research brief used microsimulation to explore the effects of delaying childbearing and increasing education for potential teen parents, and the effects on their offspring. A delay in teenage pregnancy or completion of a high school diploma predicted an increase in the offspring’s average income as an adult. The combination of delaying the teenage mother’s first birth and earning a high school diploma was associated with the greatest increase in offspring income as an adult and decreased the likelihood that offspring would become a teen parent or report poor physical or mental health. The brief also discussed implications for policy and school and community interventions to delay teen pregnancy and promote high school graduation to impact future generations, particularly for high risk youth.

<http://www.childtrends.org/wp-content/uploads/2014/12/2014-27SocialGenomeDelayChildbearing.pdf>

### ***Adverse Childhood Experiences Take a Toll on Health***

A new report from Child Trends demonstrates that nearly 50% of children in the U.S. have experienced at least one of a series of major, potential traumatic events associated with an increased risk of poor health and illness as adults. According to the report, 1 in 10 children have experienced 3 or more of 8 adverse childhood experiences included in the National Survey of Children’s Health. In addition, the report found that the prevalence of adverse childhood experiences varied dramatically across the states. For instance, in Kentucky, over 1 in 10 children lived with a parent or guardian who had been incarcerated. In contrast, in Arizona, more than 1 in 4 teens have lived with someone with alcohol or drug problems. Some states, such as New Jersey, demonstrated a lower incidence of adverse childhood experiences, where more than 60% of children reported never experiencing the adverse events the survey measured.

<http://www.childtrends.org/news/news-releases/new-study-shows-high-prevalence-of-harmful-adverse-experiences-among-children-most-comprehensive-look-at-national-and-state-level-data/>

## ***Resources***

### ***Recommendations for Reporting on Suicide***

The Substance Abuse and Mental Health Services Administration (SAMHSA), the American Foundation for Suicide Prevention (AFSP), and Suicide Awareness Voices of Education (SAVE)

along with a team of suicide prevention experts developed recommendations for journalists reporting on suicide-related news in order to minimize risks for vulnerable individuals with an increased likelihood for suicide, and optimize potentially positive communications (i.e., changing public misperceptions and correcting myths; encouraging those who are vulnerable or at risk to seek help).

<http://reportingonsuicide.org/>

### ***Complex Trauma Factsheets***

Researchers estimate that about 1 million to 1.6 million youth per year experience homelessness, and that many of these youth have a history of complex trauma. The National Child Trauma Stress Network's Complex Trauma Collaborative Group has developed three new factsheets: *Complex Trauma: Facts for Service Providers Working with Homeless Youth and Young Adults* (provides information about the impact of complex trauma on homeless youth and recommendations for intake, assessment, and on-going care); *Complex Trauma: Facts for Shelter Staff Working with Homeless Children and Families* (provides facts for shelter workers on the effects of complex trauma on homeless families and their participation in service programs; along with recommendations for supporting the children and caregivers with whom they work); and *Complex Trauma: Facts for Caregivers* (provides information, such as signs and symptoms of complex trauma, and guides caregivers in how to best support their child).

<http://www.nctsn.org/trauma-types/complex-trauma>

### ***KnowBullying App***

Research suggests that parents who spend at least 15 minutes a day talking with their child can increase the strength of their relationship and help prevent problems related to bullying. The Substance Abuse and Mental Health Services Administration (SAMHSA) in conjunction with the StopBullying.gov Federal partnership has released a free bullying app for Android and iPhone mobile devices. The resource includes conversation starters for parents talking with their child about bullying, tips for preventing bullying, warning signs for children affected by bullying, reminders for parents to find a time to connect with their child, social media sharing tactics and useful advice, and a section for educators on preventing bullying in the classroom.

<http://store.samhsa.gov/apps/bullying/>

### ***Resources to Address the Psychological Consequences of Sexual Abuse***

It is estimated that one in five girls and one in twenty boys will be the victim of sexual abuse in their lifetimes. In order to address the psychological consequences of these assaults, PublicHealth.org created a website that contains free resources for professionals, students and individuals dealing with sexual abuse. Content includes open access journals dedicated to sexual abuse, online courses on sexual violence, and information for related research, professional and public awareness organizations.

<http://www.publichealth.org/resources/sexual-abuse/>



## ***Araminta Freedom Initiative Resources on Domestic Minor Sex Trafficking***

Experts estimate that at least 100,000 American juveniles are victimized through prostitution in America each year, with the average of entry into prostitution being 13 years old. The Araminta Freedom Initiative is a non-profit organization that focuses on the mobilization of entire communities to end Domestic Minor Sex Trafficking (DMST) by training volunteers to effectively champion these efforts in their areas. Their website provides information on DMST through a variety of resources including videos, national reports and campaigns, and links to human sex trafficking resources.

<http://aramintafreedom.org/dmst-resources/#>

## ***Journal Articles***

### **The Expanded School Mental Health Collaboration Instrument [School Version]: Development and Initial Psychometrics**

*Authors:* Elizabeth A. Mellin, Leslie Taylor, & Mark D. Weist

*Journal:* School Mental Health

*Abstract/Summary:* This article presents the psychometric properties of the Expanded School Mental Health Collaboration Instrument [School Version] (ESMHCI [SV]), a new measure for assessing ESMH collaboration from the perspective of school-employed professionals. A three-scale instrument (types of collaboration, influences on collaboration, and perceived benefits of collaboration) was initially developed based on theory, findings from focus group interviews, and a review of the literature. Exploratory factor analyses defined a set of factors for each of the three scales. Initial psychometric examination indicates preliminary evidence for validity and internal reliability. Implications for school professionals, policymakers, and researchers are offered.

### **School-Age Children of Military Families: Theoretical Applications, Skills Training, Considerations, and Interventions**

*Authors:* Carlos V. Guzman

*Journal:* Children & Schools

*Abstract/Summary:* Since the start of the conflicts in Iraq and Afghanistan, more than 2 million children in the United States have been directly affected by the deployment of a parent. There are few recent empirical investigations that examine interventions designed to help children within military-connected (MC) schools. The purpose of this article is to provide a brief overview of relevant studies, review some interventions, and call for more research studies to help MC schools develop effective practices and programs to address the unique needs of MC students.

### **Minority Stress and Substance Use in Sexual Minority Adolescents: A Meta-analysis**

*Authors:* Jeremy T. Goldbach, Emily E. Tanner-Smith, Meredith Bagwell, & Shannon Dunlap

*Journal:* Prevention Science

*Abstract/Summary:* Lesbian, gay, and bisexual (LGB) adolescents report disparate rates of substance use, and often consume more cigarettes, alcohol, marijuana, cocaine, and ecstasy than their heterosexual peers. It is therefore crucial to understand the risk factors for substance use

among LGB adolescents, particularly those unique to their minority status. In an effort to organize the current knowledge of minority-related risk factors for substance use among LGB youth, this study presents results from a systematic review and meta-analysis of the published research literature. Results from 12 unique studies of LGB youth indicated that the strongest risk factors for substance use were victimization, lack of supportive environments, psychological stress, internalizing/externalizing problem behavior, negative disclosure reactions, and housing status. Results are discussed in terms of their implications for targeted intervention programs that address minority stress risk factors for substance use among LGB youth.

### **“We’re Working in the Dark Here”: Education Needs of Teachers and School Staff Regarding Student Self-Injury**

*Authors:* Emily Berger, Penelope Hasking, & Andrea Reupert

*Journal:* School Mental Health

*Abstract/Summary:* Although teachers and other school staff encounter adolescents who self-injure, the behaviour evokes strong reactions. We (a) validated a measure of attitudes towards self-injury, (b) examined knowledge, confidence, and education needs regarding self-injury, and (c) explored the relationship between attitudes and responses to self-injury among 501 secondary school teachers and other school staff. Three factors reflecting participants’ attitudes were extracted. Experience was related to knowledge and confidence regarding self-injury, but not to attitudes. Thematic analysis of open-ended questions indicated a desire for education and resources. Implications for teacher education and school policies to support teachers in addressing self-injury are discussed.

## **IN THE NEWS**

### ***Student Support Programs Help Cut Suspension Rates***

An article in the San Francisco Examiner reports that student suspension rates in the San Francisco Public School District have dropped by nearly 50 percent in the past three school years, largely due to expanded support programs for troubled students in the District. During the 2014-15 school year, 85 of the District’s 103 schools are expected to receive training for Behavior Response to Intervention, a proactive approach to supporting students in the classroom to decrease the number of school suspensions or removal from class. A component of this intervention includes social-emotional learning which teaches students how to be emotionally healthy in schools. In addition, schools will establish behavior matrices to ensure consistency in student expectations among teachers.

<http://www.sfexaminer.com/sanfrancisco/sfusd-cuts-student-suspension-rate-in-half/Content?oid=2841429>

### ***Successful School Environments Reduce Risky Behaviors for Teens***

This article reports on a study published in Pediatrics that examined whether exposure to high-performing schools reduced the rates of risky health behaviors among low-income adolescents due to better academic performance, peer influence, or other factors. The study design consisted of a natural experiment where 521 high school students who attended high-performing public charter schools were surveyed and compared to 409 high school students who were not offered admission to high-performing charter schools in the Los Angeles area. Overall, the study found



that increasing performance in public schools in low-income communities has the potential to decrease risky health behaviors among low-income adolescents.

<http://pediatrics.aappublications.org/content/early/2014/07/16/peds.2013-3573.full.pdf+html>

### ***Pediatricians Call for Teenagers to Get More Sleep***

This Washington Post article highlights research reported in *Pediatrics* on the chronic lack of sleep among teenagers, being described as a “health emergency” contributing to mental health problems, obesity and car accidents. The American Academy of Pediatrics has issued a new policy indicating that middle and high schools should begin classes after 8:30 a.m. to allow students to get more rest. Dr. Judith Owens, pediatrician and lead author of the policy statement described that “Chronic sleep loss in children and adolescents is one of the most common – and easily fixable – public health issues in the U.S. today. The research is clear that adolescents who get enough sleep have a reduced risk of being overweight or suffering depression, are less likely to be involved in automobile accidents, and have better grades, higher standardized test scores and an overall better quality of life. Studies have shown that delaying early school start times is one key factor that can help adolescents get the sleep they need to grow and learn.”

<http://www.washingtonpost.com/news/morning-mix/wp/2014/08/25/pediatricians-prescribe-later-school-start-let-them-sleep/>

\*\*\*\*\*

**The CSMH is on Facebook and Twitter to disseminate information and resources, and to engage in discussions with colleagues. Please become a fan and like our Facebook page!**

<http://www.facebook.com/pages/Center-for-School-Mental-Health/193690780654894>

**and follow us on Twitter @CSMH1.**

*Please feel free to share this announcement with others who are interested in school mental health research, training, policy, and/or practice. These announcements are archived on the CSMH website at <http://csmh.umaryland.edu/resources/CSMH/Archived%20Listserv>*

*\*To sign up for the CSMH listserv please send an email to [sympa@lists.umaryland.edu](mailto:sympa@lists.umaryland.edu). In the subject line write the following csmh insert your email address insert your last name insert your first name. Please leave the message blank. You will receive an email that you have been subscribed to the listserv.*

*\*To be removed from the CSMH listserv please send an email to [sympa@lists.umaryland.edu](mailto:sympa@lists.umaryland.edu) and write in the subject line the following **unsubscribe csmh**. Please leave the message blank. You will receive an email to confirm that you have been unsubscribed from the listserv.*

University of Maryland School of Medicine, Department of Psychiatry Confidentiality Notice: This email message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message