



Indian Health Service 2012 NATIONAL BEHAVIORAL HEALTH CONFERENCE

Welcome

From Prevention to Postvention:
Collaboration between a Tribally Run Behavioral Health
Department and Community School
LT Sharyl Trail, PsyD



Mobilizing Partnerships to Promote Wellness



House Keeping

- Please be sure to sign in and out on the Sign In Sheets located near the entrance to this room.
- Please complete the evaluation at the end of this presentation.
- For more information on Continuing Education Units (CEUs), please visit the Registration Desk

Comfort Room

- To promote wellness and self-care, a Comfort Room is available in Atrium Room 8 for your use.
- If you need further assistance, please visit the Indian Health Service Division of Behavioral Health booth.

Acknowledgements

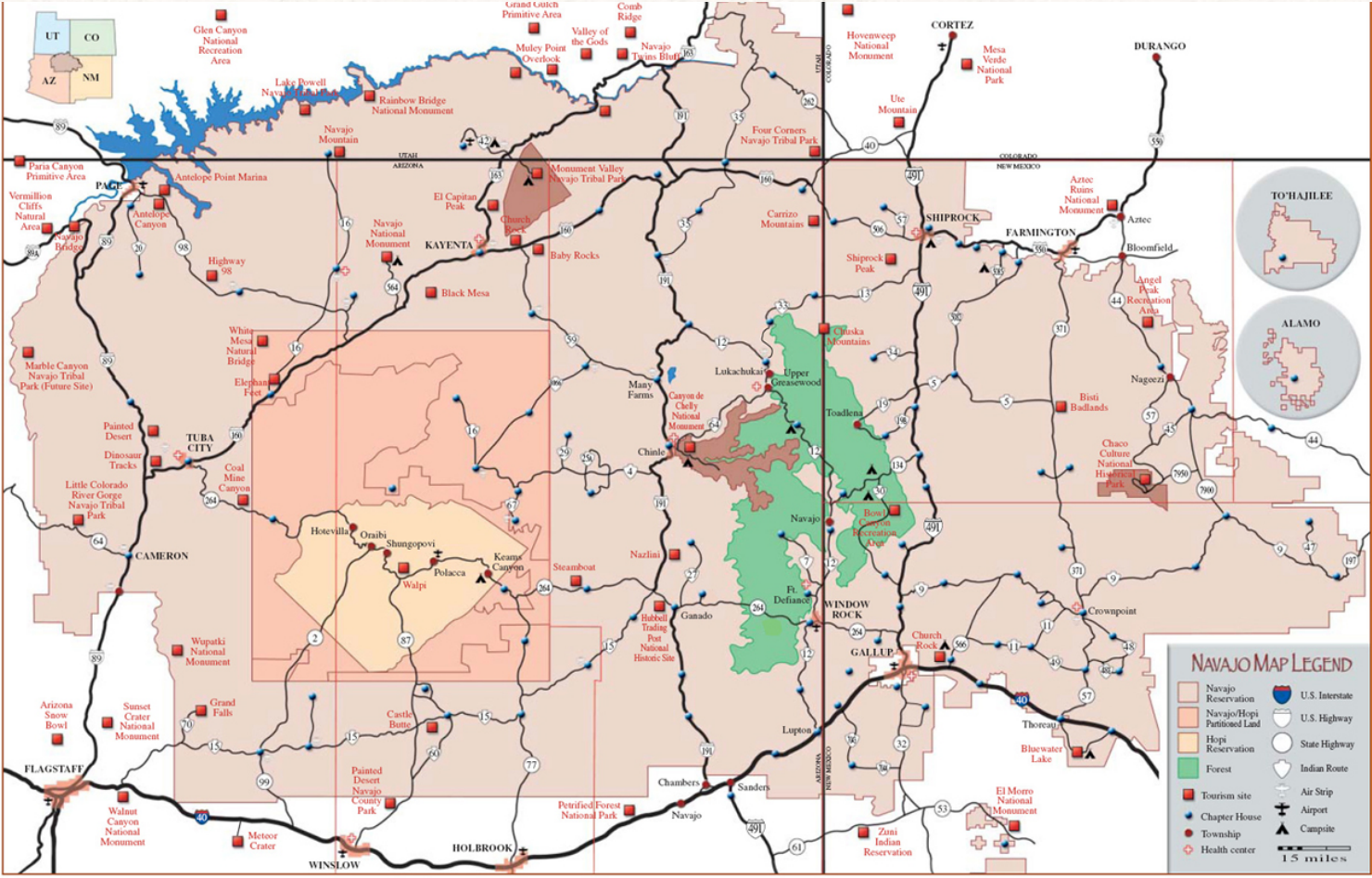
- Thank You
 - Alamo Community
 - School Board
 - Gail Campbell, Dr. Tamarah Pfeiffer
 - BH staff
 - All other providers doing this work day.

Where We Are

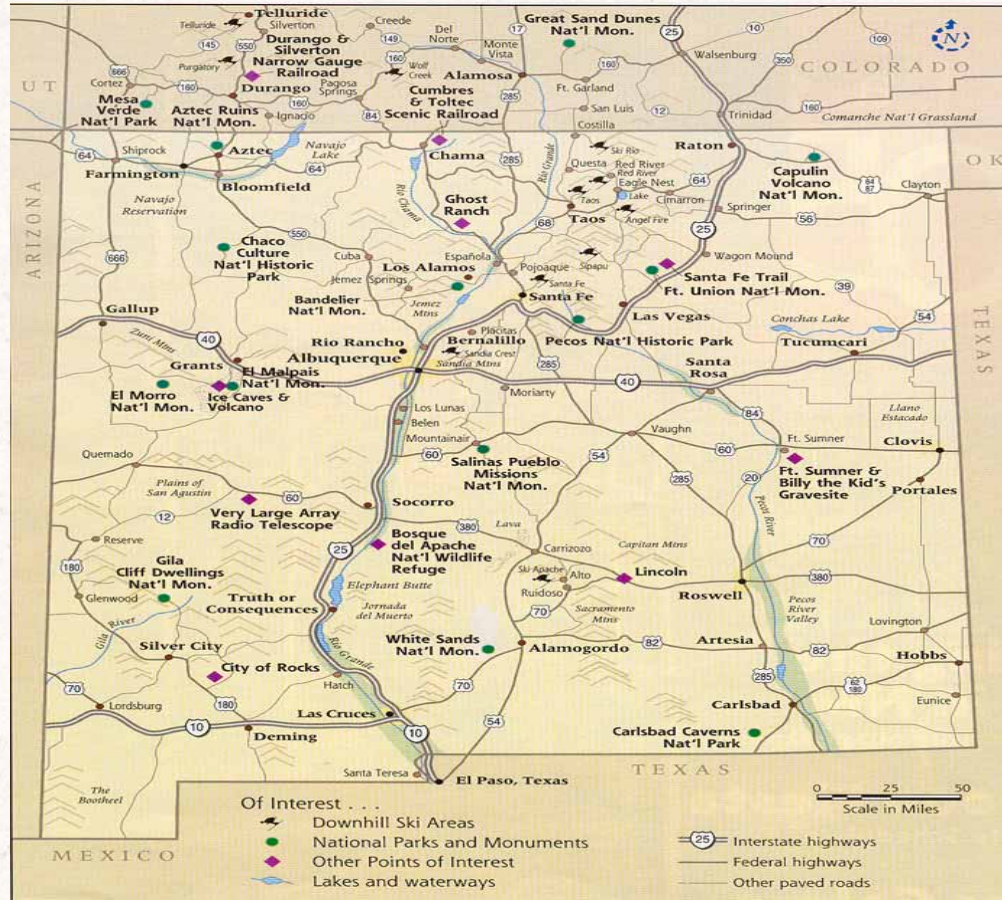
Alamo, NM



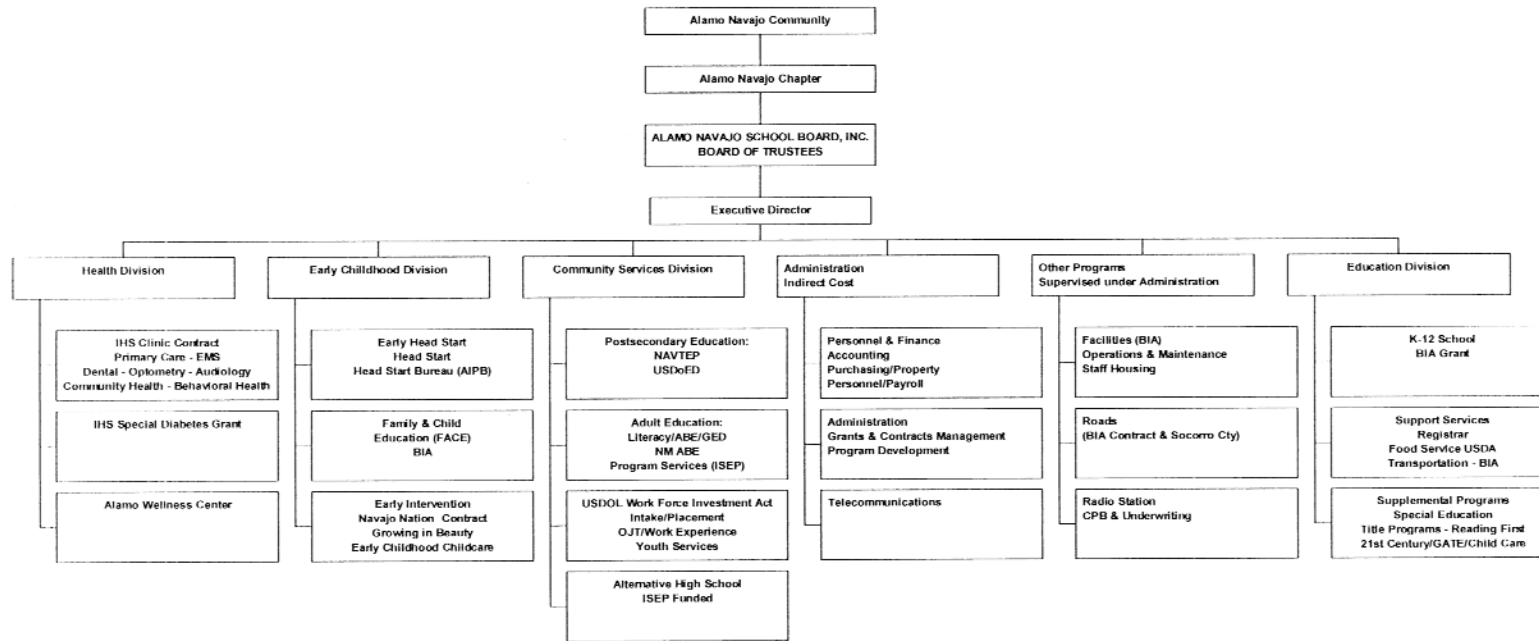
Navajo Nation



State of New Mexico



Alamo Navajo School Board, Inc.



Board approved 8/2/05

BH Department

- BH Cord. (Overall vision, strategic plan, goal planning, and evaluation. Trainer & Clinician)
- C&A Cord. (Supervisor, trainer, clinician)
- Prevention Specialist (2) (PV, AILSC, 2nd Step, GONA)
- Clinical Social Worker (DV, PIP, Clinician)
- School Social Worker
- SA Cord. (Clinician/Bullying Prevention)
- Case Manager (psychiatric management, SAT team)
- Contract psychiatric services/UNM Tele-health.

Alamo Community School



Alamo Community School

- K-12 school Tribally run and operated.
- Around 300 students.



Overview of Presentation

- Who we partner with.
- Why we partner.
- How we partner.

Who We Partner With

- School faculty and administrative staff.
- School Dept. of Special Education
- Community Wellness Center
- Child Protective Services
- Alamo court and probation program. (Teen court recently funded and to begin next year)
- Upside Down Organization “Helping Adults Help Kids”

<http://www.upsidedownorganization.org/>

Who We Partner With

- Exercise
 - Brainstorm a list of key stakeholders who would need to be in initial discussions about starting school-based behavioral health services.

Why We Partner

- **What the research has to say:**
 - Students are unprepared for learning due to emotional and behavioral problems. (Vanderbleek, 2004)
 - Emotional well-being in children is associated with positive social and academic development. (Hansel, et. al., 2010)
 - Psychological trauma is one of the most common factors associated with mental health problems in children. Left untreated, at higher risk for negative physical and emotional outcomes in adulthood. (ACE study, National Native Children's Trauma Center, **Taylor & Zimmerman**)
 - The school-based mental health service model emphasizes the importance of prevention and early intervention. (Heathfield & Clark, 2004)
 - School-based Health Centers (SBHCs) increase access to care by making health services convenient, providing an integrated approach of public health and intervention services. (Clayton, et.al, (2010)
 - ***TREATMENT WORKS!*** (SAMHSA, Zirkelback & Reese, 2010)

Why We Partner

- Adequate Yearly Progress (AYP)
 - 6 out of 32 Tribally Run schools in Navajo Nation made AYP during 2009-10 school year.
 - 9 out of 33 Navajo Nation BIE schools made AYP
 - <http://navajonationdode.org/News.aspx?016ddaa074be4f22aaf9a9760785ed9bblogPostId=ccc6289adb78433c95f70405f0434be2>
 - Alamo Community School is dedicated to making AYP goals as well as overall academic improvement for all students.

Why We Partner

- Alamo Community Challenges
 - Population 2,072
 - Per Capita Income \$5,273
 - Percentage with less than high school education 40%
 - Safe School Survey showed majority of our students had experienced mental health symptoms and/or substance abuse issues.
 - Concerns from teachers include: Bullying, exposure to DV/family violence, classroom management challenges.

Why We Partner

- Exercise
 - What community challenges are you facing that you feel school-based mental health care could address?

How We Partner

- School Board had strategic planning meeting in 2010 and decided to incorporate all ANSBI divisions in assisting the school meet their AYP goals.
- The Alamo Clinic developed three goals to assist the school. (1) Increase the mental health/substance abuse services at the school; (2) Aid in the reduction and prevention of obesity; (3) Increase the fitness levels and amount of activity levels in youth.

How We Partner

- Three BH objectives
 - Prevention
 - Intervention
 - Consultation

How We Partner

- Prevention
 - Project Venture (MSPI)
 - American Indian Life Skills Curriculum in Health Class (launching this year)
 - 2nd Step
 - Positive Indian Parenting (MSPI)
 - GONA (MSPI)
 - QPR (MSPI)

How We Partner

- Intervention (usually the only service provided at community based C&A clinic)
 - Crisis assessment and intervention
 - Individual therapy (SA & MH): multiple evidence based models, ie: Cognitive Behavioral Intervention for Trauma in Schools (CBITS)
 - Psychiatric evaluation and medication management through tele-health (MSPI)
 - Court-ordered BH & SA treatment for parents
 - Therapy services for all ANSBI staff, including teachers.

How We Partner

- Consultation
 - Representative on Student Assistance Team through Special Education department.
 - Classroom observation and one-on-one assistance to teachers with classroom management needs.
 - Assist Dean of Students with positive behavior supports for students with high referral/disciplinary record.
 - Coordinate school crisis response team. Help team develop plan in the case of community-wide trauma or suicide cluster.
 - Training on secondary trauma.

How We Partner

- Exercise
 - How are you already partnering with your school district?
 - What would be some first or next steps toward developing a school-based behavioral health model?
 - What are some barriers you see might need to address?

Sustainability

- Funding
 - MSPI Grant Funds
 - 638 Direct Funds
 - Billing (Medicaid)
 - Grants

Relationships: Team building; Consistent meetings with regular feedback from all stakeholders; Getting youth involved in leadership of the initiative.

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- <http://www.intercamhs.org/files/School-based%20Mental%20Health,%20An%20Empirical%20Guide%20for%20Decision-Makers.pdf>



Contact Information

- Sharyl Trail, PsyD

LT, US Public Health Service Commissioned Corps

Licensed Clinical Psychologist

BH Coordinator, Alamo Navajo Health Center

Alamo Navajo School Board, Inc.

Indian Health Service, Albuquerque Area

575.854.2626 x111

strail@ansbi.org



Crisis Hotline Numbers

Suicide Prevention Lifeline Number:

- 1-800-273-TALK (8255)

National Domestic Violence Hotline:

- 1-800-799-SAFE (7233) or TTY 1-800-787-3224

National Child Abuse Hotline:

- 1-800-4-A-CHILD

Sexual Assault Hotline:

- 1-800-262-9800