2023

An Action Agenda

# A PATHWAY TO RECOVERY AND RESILIENCE FOR OUR CHILDREN AND YOUTH

# BACKGROUND

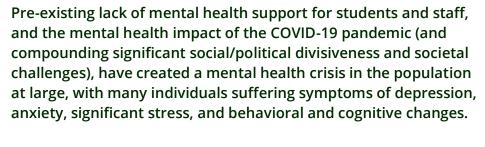**Pre-existing lack of mental health support for students and staff, and the mental health impact of the COVID-19 pandemic (and compounding significant social/political divisiveness and societal challenges), have created a mental health crisis in the population at large, with many individuals suffering symptoms of depression, anxiety, significant stress, and behavioral and cognitive changes.**
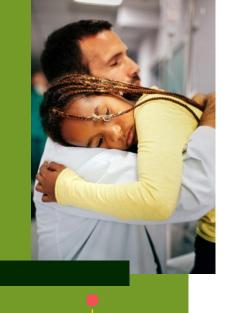
The mental health crisis is also exacerbating the structural and systemic challenges experienced by historically marginalized and minoritized populations who endure racism, negative social determinants of health such as poverty, unequal access to health care, lack of education, stigma, and other significant and widespread disadvantages. This mental health crisis and the disproportionate social impacts manifest in all classrooms in various ways, but undoubtedly have harmed students, families/caregivers, and staff.

There are two sayings that apply to this situation: *"Fish don't see the water they are swimming in"* (Dr. Caprice Hollins), and *"You cannot solve the problem with the same kind of thinking that created the problem"* (Albert Einstein). Despite clear data indicating the current status quo is not working for most, many school systems, working in the midst of "recovery", have not been able to pause and consider the harm created or exacerbated by current disciplinary approaches to mental and behavioral health needs. For example, exclusion from the classroom and punishment are destructive and impact children of color and students with disabilities disproportionately. They are failed practices and policies that cause additional harm. They do not work, nor do they contribute to positive mental health; yet continue to be used widely. Meanwhile, decades of research evidence point to the promise of proactive positive approaches organized within a multi-tiered system of support; in our view, best operationalized by Positive Behavioral Intervention and Supports (PBIS) (see **www.pbis.org**).

Crises can be defined as "turning points for better or worse," "decisive moments," or "crucial times," calling for powerful actions implemented with urgency (Davies & Walters, 1998).

The pandemic wrought chaos in many sectors, but it also raised awareness of needs and provided turning points and opportunities for new conversations around wellbeing and equity.

*We call on educational and collaborating youth system leaders around the country to seize this decisive moment and opportunity caused by these unavoidable upheavals to make significant, novel, and encompassing changes to support the positive mental health and wellbeing of all students and educators.*

The scope and scale of the mental health crisis requires an immediate and intentional response from educators and collaborators at all levels to move away from practices and systems that have no merit, or worse, are causing harm, and toward those that can heal and restore.

This document is an expression of hope that in this moment of crisis we can come together and generate true and impactful change in America's schools, keeping what is working, but also innovating new approaches to mitigate systemic harm to students, families/caregivers, and staff, *to support academic rigor alongside mental and social health for all involved in the educational system.*

This document is not intended to be a comprehensive "how to" guide for recovery. Instead, this document is presented as a starting place and a call for ongoing dialogue and learning that leads to meaningful action. Recommendations and resources presented here represent our current best thinking and we simultaneously acknowledge the need to further center the voices of youth and families most impacted by this crisis and specifically those representing historically marginalized and minoritized communities.

For purposes of this conversation, we utilize the explanation offered by the CDC to refer to mental health as psychological, emotional and social well-being; impacting the way we feel, think, behave, navigate stress, and relate to ourselves and others (**https://www.cdc.gov/mentalhealth/index.htm**).

**We approach this conversation grounded in what we know from decades of research:**

- Mental Health is not just the absence of symptoms, and mental health is not only promoted by effective programming and staff, but also by the school experience itself – positive school experiences promote well-being for students, families, and school staff.

- Relatedly, one of the most impactful ways we can address mental health is to ensure that we live, work, and learn in positive, nurturing, healthy, environments where all people feel valued, experience a sense of belonging, and are socially connected.

- A sense of safety (physical and emotional) is essential for the ability of humans to grow, take risks, and experience belonging, true connection, and achievement.

- An increased sense of safety also reduces fear and anger, along with associated negative behaviors.

- Historically marginalized and minoritized groups continue to experience less emotional and physical safety than their non-marginalized counterparts and therefore equity, inclusion, belonging and justice must be centered in any response.

- School communities can have a significant impact on the health and wellbeing of our society as they are the primary providers of mental health, with dramatic improvements in mental health service access and effectiveness when provided in schools.

**We also approach this conversation based on the following assumptions, questions, and acknowledgements:**

- With a focus on the "system," transformational changes across federal, state, and local organizations is required and everyone has a role to play including but not limited to federal agencies, governors, state and local superintendents, higher education, collaborating youth-serving systems (especially mental health) professional organizations, school boards, child/youth/family serving agencies, family advocacy, youth, school administrators, teachers, mental health staff, and others.

- Academic success does not happen without health. We cannot expect systemic change without attending to the mental health needs and overall well-being of everyone that is part of the educational system across all levels; students, families, educators, and community members.

- It is important to acknowledge schools as a developmental context for youth that can promote well-being or cause harm in many areas of development, some of which include reading, writing, and other academics, but also social, emotional, and behavioral development, peer relationships, work ethic, attention, etc. School will influence these areas whether we are intentional about it or not. Spending 7 hours daily for 9 months in a space will influence well-being. Therefore, we believe that it is our duty to be intentional about how we organize schools such that they promote youth well-being and avoid causing harm to any student in all areas of their development.

- There is a dynamic relationship between **a)** healthy boundaries, **b)** safety, **c)** adaptability, **d)** energy and **e)** threat response. As a sense of safety and adaptability increases, feelings of threat decrease. Energy devoted to academic and social growth can then increase, facilitating opportunities for entertaining new ideas, along with a broad range of engagement strategies.

- There also needs to be acknowledgement that everyone has experienced a global disaster and the combination of COVID 19, social injustice, racial injustice, political divisiveness, environmental impacts, and gun violence requires radical change in how we prioritize actions. We recognize that many communities have been disproportionately impacted and healing will take place in phases, with a primary goal of disaster recovery being the promotion of resilience for all populations, particularly children, youth, families, and those charged with teaching/helping them.

- Resilience can and should be nurtured and supported systemically but should not be an "expected" response of individuals.

- Primary elements of resilience include **Purpose, Connection, Adaptability and Hope**. Each can and should be nurtured, developed, emphasized, and structurally implemented in school settings to support ALL children, families, educators, mental health staff and others in their mental well-being and behavioral health.

# THE VISION

## Systems that Intentionally Foster Resilience and Healing:

Recovery from widespread and ongoing crises requires developing and implementing systems that foster resilience. Resilience is the ability to withstand or recover from difficulties and can be actively and intentionally developed by promoting purpose, connection, adaptability, and hope. Below we offer definitions of these concepts as they apply to the work in schools as applied to all groups – students, families, educators and school staff, and staff from collaborating youth-serving systems.

### PURPOSE

Through the identification of personal contributions in the classroom and through extracurricular choices, academically challenging experiences, **meaningful motivation and a sense of purpose** can be increased.

### CONNECTION

For each student to be seen, and understood for who they are, in their personal context, with their unique needs addressed in both classroom processes and in content.

### ADAPTABILITY

There should be emphasis on developing internal locus of control by empowering all groups to engage in fluid, non-static thinking, the recognition of shifting priorities based on environmental circumstances, and the opportunity to emphasize unique lived-experiences, resources, and challenges.

### HOPE

There should be attention to the development of accessible **opportunities, and achievable, actionable goals** that are tailored for each of the groups – students, families, school staff, and staff from other systems. Here important themes include connection to mentorship, interpersonal and practical support toward mastery of social-emotional learning and wellness skills that positively influence hope.

Shifting our lens here to students, using these constructs, we envision a teaching and learning environment that actively fosters resilience and healing while supporting academic and social emotional behavioral (SEB) growth for every student.

**In every classroom every student will be:**

- welcomed and greeted warmly into a set of consistent and predictable classroom routines

- surrounded by adults who actively work to establish, maintain, and when needed - repair a meaningful positive relationship with them

- provided with high rates of feedback and acknowledgement

- directly taught and supported to use effective social skills, self-regulation skills, and coping skills

- regularly acknowledged for both proficiency and growth

- meaningfully challenged academically within the context of social-emotional safety and strong relationships with educators, other staff, and other students

- actively protected from harmful practices and systems

- provided regular opportunities for meaningful contributions to classroom lessons and culture

- represented and valued within the classroom community for their unique lived experience

- supported in the development of strengths and areas for growth through individualized and differentiated instructional practices

- provided with realistic opportunities for contribution and growth through mentorship and connections both within the school and the community

- provided opportunities to engage in activities beyond academics (e.g., clubs, teams, leadership groups, etc.)

Similarly, we envision schools in which educators/staff are able to effectively provide these supports for students because their own wellness and learning has been prioritized. In these schools every educator/staff in every classroom will be:

- welcomed and greeted warmly into a set of consistent and predictable schoolwide priorities and routines

- encouraged and provided opportunities to practice self-care and emotional regulation strategies throughout the day

- supported by supervisory staff, such as principals and school administrators, in setting and maintaining reasonable boundaries as needed with students, fellow staff, and parents

- regularly acknowledged for both growth and proficiency

- actively protected from harmful practices and systems

- represented and valued within the classroom community for their unique lived experience

- provided with realistic opportunities for contribution and growth through mentorship and connections both within the school and the community

- supported with effective professional development and coaching that is job embedded and ongoing, culturally responsive, available on demand and integrated across social emotional behavioral development, wellness, and academic initiatives

- supported in understanding and effectively using anti-racist approaches and practices to build awareness of and address implicit bias

- supported in planning for handling obstacles by proactively identifying effective strategies and meaningful/usable resources

Realizing this vision for every student and educator/staff will require an investment in a whole community approach, a radical shift from the "wait to fail" approach, and a deliberate effort toward building pro-social and relationship-centered school communities.  School communities can explore ways to establish the conditions

for creating strong relationships, and use the public health prevention framework (i.e., MTSS) to organize efforts with a focus on aligning actions with phases of implementation.

For many communities experiencing a disaster cascade (multiple critical events and additional disasters within a short period of time), it may be helpful to organize efforts using phases of disaster response and recovery identified by SAMSHA (**https://www.samhsa.gov/disaster-preparedness**).

In the following sections we provide recommendations and resources for installing these systems utilizing one set of health and education implementation teams organized across. a cascade of support in the areas of practices and systems, workforce development, and policy.



The combination of these efforts will reduce many social emotional behavioral (SEB) issues associated with a heightened threat response related to feeling unsafe. It also is a way to increase a sense of psychological resilience and to facilitate capacity for new learning. Creating the time and funding for this foundational approach to student and staff wellness can lead to not only healthier students, families, and school communities, but also to additional capacity for academic growth and success. The aspiration is that all youth leave the public school system with functional reading, math and other academic skills equipping them for the workforce, for managing their adult roles, and for post-high school education. For those youth who are poor, and from minority and marginalized communities, this will likely include significant funding and staffing efforts to help bring those students into academic competency. This might include targeted individual tutoring, additional individualized educational approaches, lengthening school days, summer programs and inclusion of the systems of care for youth identified in this document.

# RECOMMENDATIONS

## 01. Organize a systemic response within an interconnected multi-tiered framework of support.

- **Use core features of MTSS to guide the work.**

    a. Identify an effective leadership team that includes youth, family and community mental health providers. Expand opportunity and access for members who historically have been excluded and merge with teams charged with the work of school improvement and strategic planning. Situate mental health and overall wellness as priority of the school community.

    b. Use school and community data to uncover strengths and needs of children and youth to customize decision making that include school data beyond office discipline referrals (ODRs) to include community data (e.g., rates of drug and alcohol misuse, emergency room use for serious mental health problems).

    c. Establish formal processes for school and district teams to select and implement small number of *evidence-based practices (EBP)* across the tiers of support: school-wide wellness promotion and behavior support (Tier 1), early identification and group-based or brief intervention (Tier 2), and intensive/individualized intervention for students with more intensive needs. EBPs should be chosen carefully using a team-based process that includes community partners, families, and students and customized/adapted to fit culture/context/strengths/needs of community.

    d. Use a comprehensive and equitable approach to screening, which includes uncovering strengths, student/family/staff narratives, and SEB challenges including internalizing (e.g., depression, anxiety, trauma-related) and externalizing (e.g., acting out behavior) problems.

    e. Rigorously monitor fidelity and effectiveness of all interventions regardless of who delivers.

    f. Provide coaching at systems and practices level for both school and community employed professionals to continuously examine the "health" of the system and the strengths and needs of the caregivers and helpers in the system.

- **Prioritize systems level work and resist the temptation to buy programs and hire staff without focusing on the larger system issues.**
    a. Train and support teachers during pre-service and professional development to explicitly teach social emotional behavioral skills and strategies alongside academic content.
    b. Provide community employed mental health personnel training in how schools operate so they can quickly become embedded members of the school community.
    c. Examine roles of existing school and community employed staff to ensure clinicians are maximizing their skill sets and using available data to decide where to focus efforts, and wherever possible increase clinician involvement in Tier 1 and Tier 2 efforts.
    d. When providing professional development, such as mental health literacy or trauma-informed care; ensure there is a team that is trained and there is a plan in place or follow up coaching to ensure learning is leading to changes in practice within the classroom.

# 02. Invest strategic actions to support resilience and healing that are aligned to identified needs.

## Organize to promote connection, belonging, support, and predictability.

### DISTRICT ACTIONS

- Build communities of practice for role-alike positions (e.g., principals, clinical staff, school psychologists)
- Develop and use integrated data systems (beyond just academic data)
- Provide standard data decision making process for school use
- Crosswalk existing practices to show alignment with trauma and major challenges students/families in the community are experiencing
- Maintain consistency and stability in routines, expectations, norms, initiatives, and frameworks as a priority so the environment is predictable for all

### STATE ACTIONS

- Provide on-demand professional development
- Prioritize policies that reflect empirical evidence and best practices for education and well-being, keeping political agendas separate
- Highlight successful model demonstrations
- Maintain consistency and stability in routines, expectations, norms, initiatives, and frameworks as a priority so the environment is predictable for all

## Actively engage school, district, community members.

- Provide support for and teach families how to engage in the educational process (e.g., school board meetings, feedback opportunities within schools)

- Develop purposeful collaborations across formal youth serving systems such as child welfare, juvenile justice, drug and alcohol services and mental health

- Develop practical methods to engage parents and caregivers who may be disengaged, due to being overwhelmed or struggling with basic needs or mental/social disruptions, with the school community

- Provide clear guidance and work in authentic partnership with families to bring identified concerns toward effective resolution

- Model and communicate transparency and accountability in following state and federal laws to community members

- Develop purposeful collaborations across youth serving organizations such as YMCA, Boys and Girls Clubs, and other community organizations

- Network with other states to see/experience best practices and demonstrations

## Actively Promote Culture of Wellness.

### DISTRICT ACTIONS

- Prioritize educator pay in budgeting processes

- Reconsider the way school is evaluated, moving away from sole focus on academic metrics, and including  climate and wellness indicators

- Disaggregate data to guide planning - not as an afterthought but to prioritize implementation actions, with a perspective that outliers matter

- Maintain routines - through focus on a small number of priorities that remain consistent

- Limit or eliminate the use of exclusionary discipline practices

- Focus on de-implementation of ineffective or harmful practices

- Implement "stay interviews," not just "exit interviews"

### STATE ACTIONS

- Balance the use of "personal stories" with broader disaggregated data when developing policies to ensure policies reflect overall needs, not just the "loudest voices"

- Rely on vested partners, experts in relevant fields, and community members to drive policies that could be effective state-wide, especially with respect to matters of public safety and civil rights (physical rights, psychological health, civil rights, community safety, etc.)

- Limit or eliminate the use of exclusionary discipline practices which do not work and are harmful, both in the short- and long- term trajectories

- Provide examples of braiding funding and funding flexibility to meet identified needs

## Provide support for leadership.

- Frequent check-ins with principals to provide support and hear and value their lived experiences
- Directly teach adaptability skills for administrators
- Provide school boards with professional learning centered in effective practices and policy development
- Communicate a clear vision and "why" in support of keeping initiatives narrow
- Teach and support boundary setting by principals
- Remove barriers for administrators

## Provide Effective Accountability Systems.

- Move away from sole focus on academic metrics toward broader indicators, including emphasis on wellness, purpose, connection, adaptability and hope for students, families and staff
- Disaggregate data to guide planning - not as an after-thought but to prioritize implementation actions because outliers matter and are informative
- Improve and expand professional evaluation frameworks and professional growth plans
- Develop vetting process for recommended programs and practices
- Build systems of accountability regarding implementation of interventions and fidelity of the use of the programming geared towards identified student groups

## Increase adult support (and reduce classroom load).

- Engage paraprofessionals, volunteers, community supports in classrooms
- Actively seek and partner with /family members beyond reliance on Parent-Teacher Associations

# 03. Actively Foster Workforce Development.

## Invest in Current Workforce.

### Preservice:  Higher Education Recommendations

- Intentionally create training, internship, and supervised experiences to ensure competency in effective practices
- Engage with accrediting boards to expand pre-service training for teachers to include areas within the social emotional behavioral domain
- Train prospective educators and leaders in systems change, advocacy and policy change efforts
- Begin recruitment efforts as early as students in middle school with exposure to education as well as human services careers

## Inservice.

### DISTRICT RECOMMENDATIONS

- Expand professional development to include any interested educator regardless of role and provide choices in professional learning
- Prioritize high leverage classroom practices and staff wellbeing (e.g., include in school improvement plans)
- Work in adaptive change efforts to facilitate support, trust, communication
- Provide support for White colleagues to become allies to colleagues of color for support

### STATE RECOMMENDATIONS

- Provide appropriate compensation for educators and para educators and any staff for in-service training
- Expand training capacity
- Provide more research-supported effective training/professional development practices in areas of equity
- Incorporate behavior science and classroom management skills into training and coaching opportunities

- Prioritize learning units (behavioral kernels, etc.) based on building or district need - "triage" professional learning

- Resource mapping needs to be a continuous process of identifying needs and matching those with resources and opportunities; conduct with a focus on reducing redundant and/or non-value-added programming

- Task shift to move responsibilities not requiring graduate training to other fully-trained and capable employees like paraprofessionals and administrative staff

- Move toward holistic (social, emotional, academic, contextual) pre-service training curricula for educators

## Develop an Expanded, Skilled, and Diverse Workforce.

- Expand incentives for those working in more challenging (low-resourced, crime rate, illegal drug activity) areas (e.g., tuition, stipends, loan payments, etc.) similar to military incentive system

- Value and provide benefits to substitutes

- Recruit from colleges/universities where there is a concentration of students of varying backgrounds

- Fund conditional scholarship initiatives for programs such as school social work, counseling, and psychology that incentivize students to choose careers working in high-need districts by reducing student debt while also receiving specialized training and support on effective school behavioral health

- Partner with institutes of higher education to align state-wide leads with training expectations

- Create career ladder and promotion pathways so educators and mental health professionals can see a path towards a rewarding career within the LEA community

- Partner with groups such as the Black School Psychologists and other similar groups to work on recruitment and retention

- Actively inform the legislative agendas in clear strategic communication, build consensus on priorities, and center historically marginalized and minoritized voices

- Develop pipeline programs to develop qualifications and interest among members of marginalized and minoritized communities (e.g., beginning in high school, grow-your-own opportunities)

- Create career ladder and promotion pathways so educators and mental health professionals can see a path towards a rewarding career within the LEA community

- Place less weight on standardized tests such as PRAXIS exams and GREs

# 04. Align state and federal policy and funding to support systemic change.

**POLICY**

- Adopt standards for MTSS as a foundational framework that directs state and district continuous quality improvement, guides district planning, determines approval of plans they submit to the state to secure additional funding

- Provide access to advocacy professional learning in the areas of educational law and requests for support to parents, students, educators and community members

- Require professional learning for school boards on strategies to promote effective practices in the best interest of students

- Provide protections for educators and systems (districts, etc.) who engage in and provide anti-racist practices (e.g. employee, resource groups (ERGs, HR specific complaint process)

- Eliminate policies that are politically centered and not in the best interest of learners (policy that specifically targets or further marginalizes a specific group of students/families based on their cultural identification)

- Withhold funds if there are not specific efforts to meet state or federal requirements/laws outlined in educational code (e.g., significant disproportionality, focus on race and other marginalized groups, training around bias, etc.)

- Ensure zero tolerance for systems that perpetuate and maintain racism - similar to sexual harassment is managed in the law and offers a consistent structure for reporting incidents

- Hold districts accountable for harmful school policies/actions similar to the licensure board for health professionals

## FUNDING

- Provide attractive salaries and meaningful incentives (e.g., loan forgiveness, housing stipends, expanded benefits)

- Provide funds for undergraduate and graduate students going into education

- Reduce burdens of training for staff such as moving toward paid versus unpaid internships and practicum placements

- Prioritize funding for ongoing professional development throughout a career journey

- Increase accountability for use of state and federal funds through an expanded peer review vetting process to ensure use of evidence-based practices and the discontinuation of harmful practices

- Encourage state and federal investments that are not time limited bursts of funding, but prioritize long-term investments in important incentives, like teacher salaries, etc.

- Increase oversight of funds used for designated LEAs who demonstrate significant disproportionality

- Build federally funded centers as part of an implementation support system that is regulatory in nature to help support fidelity

- Funded investments must include alignment with behavioral and mental health initiatives

- Funded investments must include attention to implementation teaming – including attention to what a functioning team looks like (e.g., inclusive of families, representatives from education and all relevant youth-serving systems)

- Include exploration/Installation stages and resource mapping in funded projects to facilitate sustainable implementation with fidelity

- Provide an integrated and user-centered data system that is free and available to all LEAs

- Place more emphasis on innovative projects that have gated funding (e.g., achievement on performance parameters in phase 1 to receive phase 2 funding)

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