

GPA Looks Back and Moves Forward

CURRENT ACHIEVEMENTS AND VISION FOR THE FUTURE

Interview of Rebecca Blanton, MA, Director of Georgia Project AWARE

GPAD: The Georgia Project AWARE (GPA) grant is racing toward the end of year four, with only one year remaining come September 2018. When Project AWARE was funded by the federal Substance Abuse and Mental Health Services Administration (SAMHSA) in 2014, what were you hoping to achieve?



Rebecca Blanton

Blanton: First of all, we were thrilled to have been selected to receive one of the State Education Agency (SEA) children's mental health grants from SAMHSA. We seized the opportunity to acquire resources to support the design and implementation of early detection and intervention strategies for children with mental conditions in Georgia's schools.

GPAD: Three Local Education Agencies (LEAs) were selected to implement the grant – Muscogee, Newton and Spalding County School Districts. Why them, and why not more LEAs?

Blanton: All of the SEAs awarded a SAMHSA grant could only include three LEAs in which to implement Project AWARE. Georgia Department of Education (GaDOE) proposed to connect its efforts in promoting children's mental health with the stellar work that was already going on in the state's Positive Behavioral Supports and Interventions (PBIS) Program. That meant that we needed to find several LEAs that had already demonstrated a commitment to implementing the PBIS framework with fidelity. Thus, these three LEAs were invited to participate in Georgia's first endeavor to provide school-based mental health services.

GPAD: Wasn't there any way at all that you could have selected more LEAs to participate in Project AWARE?

Blanton: That's a question that we've gotten countless times over the last several years. It wasn't that we wanted to leave any school district out, but SAMHSA required that we only work with three districts as was the case in each of the 20 states that received the grant. We also wanted to begin small, learn as much as we could from three very diverse districts,

Georgia Project AWARE Vision, Mission & Goals

What is Georgia Project AWARE?

Georgia Project AWARE is a Substance Abuse and Mental Health Services Administration (SAMHSA) funded youth mental health initiative. AWARE stands for *Advancing Wellness and Resilience Education*.

Vision

School-aged youth in Georgia experience social and emotional wellness in educational settings through integrated systems of behavioral and mental health.

Mission

The mission of Project AWARE is to build and expand the capacity of school and community partnerships to coordinate and integrate systems of behavioral and mental health services

for Georgia's school-aged youth.

Goals

- To increase awareness of mental health issues among school-aged youth.
- To provide training for school personnel and other adults who interact with school-aged youth to detect and respond to mental health issues in children and young adults
- To connect children, youth, and families who may have behavioral health issues with appropriate services.

Georgia Project AWARE Team

State Core Team: Rebecca Blanton, Project Director/Coordinator.

LEAs

Muscogee: Kenya Gilmore, GPA Manager/Coordinator; Courtney Lamar, Mental Health Coordinator; Connie Smith, Ad-

ministrative Assistant; Rhonda Patchin, Technical Assistant; and Michelle Pate, Technical Assistant.

Newton: Adrienne Boisson, Manager/Coordinator; ; Naran Houck-Butler, Mental Health Clinician; Cindy Leiva, Administrative Assistant.

Griffin-Spalding: Jason Byars, Manager/Coordinator; Debbie Crisp, Assistant Coordinator; Kelley Pettacio, Mental Health Clinician; and Rhonda Harris, Mental Health Clinician.

Evaluation Team (Georgia State University):

Drs. Joel Meyers, Kris Varjas & Ken Rice.

State Training Team (Georgia State University Center for Leadership in Disability):

Dr. Andy Roach, Dr. Emily Graybill, Dr. Catherine Perkins, Cirleen DeBlaere & Breanna Kell.

Upcoming Project AWARE State

Management Team Meetings –

Upcoming meetings include: September 29, 2018; November 14, 2018; February 13, 2019; and April 17, 2019. Meetings begin at 10 a.m. and are held at Georgia Department of Education, Twin Tower East.

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and determine what works before promoting best practices more broadly. We have tried to share insights gained from Project AWARE LEAs by presenting at numerous state and national conferences on an annual basis. Most importantly, we have tried to roll-out training on Youth Mental Health First Aid (YMHA) in schools and communities throughout the state using our train-the-trainer model.

GPAD: What are some of the processes that the Project AWARE LEAs have developed in common?

Blanton: All three LEAs have universal screening programs and have developed referral processes. However, let me take a step back. Although each of the three LEAs has these two items in place, they certainly are not “cookie cutter” or “carbon copies” of each other. *[Note: See a description of each LEA’s referral process in an article found on p. 11.]* We thought that we could mass produce the same systems for the three, but learned early-on that, in order to be successful, each district needed the license to customize to its unique student population and infrastructure. Actually, that’s one of the benefits of having started with just three districts: Changes could be made in real time and LEAs didn’t have to live with a product that was not a good match for them.

GPAD: What types of programs or curricula are the Project AWARE LEAs using to support social and emotional learning?

Blanton: Project AWARE LEAs are implementing numerous evidence-based social-emotional learning programs such as Second Step at the elementary level and Sources of Strength at the secondary level, as recommended on SAMHSA’s evidence-based clearinghouse, the National Registry of Evidence-based Programs and Practices (NREPP) found at <https://www.samhsa.gov/nrepp>.

GPAD: Are other LEAs replicating any of the practices, programs, or procedures that are being implemented in the Project AWARE LEAs?

Blanton: As it relates to universal screening for mental, social and emotional problems, there have been numerous requests for technical assistance and training on how to develop a screening program.

GPAD: There appear to be considerable actions underway in support of children’s mental health in the state. For example, recently Voices for Georgia’s Children launched a mental health campaign; the Carter Center’s Annual Georgia Mental Health Forum included panels that addressed children’s issues; and the General Assembly passed several pieces of legislation in support of children’s mental health during the 2018 session. What do you think accounts for children’s mental health issues receiving so much attention in Georgia these days?

Blanton: From my perspective, the crucial conversations about children’s mental health that partner agencies and stakeholders have engaged in over the last several years have sparked increased levels of collaboration. Conversations and collaboration have further spawned the rise of numerous champions of children mental health. Champions exist in the form of organizations and individuals. You didn’t mention this, but here at GaDOE, one

of the best examples of the department’s systematic support for children’s mental wellbeing is the placement of the whole child theme at the heart of its federally approved Every Student Succeeds Act (ESSA) plan (2017).

GPAD: Since children’s behavioral, social and emotional skills are a major focus of PBIS, what is being done to integrate mental well-being into the framework?

Blanton: The department’s PBIS Program Manager, Justin Hill, has worked closely with us to ensure that children’s mental health is intentionally integrated into the PBIS framework.

GPAD: Can you give our readers an example of PBIS-mental health integration?

Blanton: There are lots of ways in which PBIS-mental health integration is occurring. I’ll mention a couple, and I hope our readers will learn more from Justin’s article on p. 5 of this issue. One example is joint training of the State PBIS Team and School Climate Specialists on implementation of an Interconnected Systems Framework (ISF). ISF is the proposed mechanism that can effectively link School Mental Health (SMH) and Positive Behavioral Interventions and Supports (PBIS) to leverage the individual strengths of each of these processes and produce enhanced teaching and learning environments through their strategic linkage, thus making our schools safer. Another example of integration is the inclusion of trauma-informed practices into the PBIS framework.

GPAD: How is Project AWARE involved in the implementation of mental health services in the Department of Behavioral Health and Developmental Disabilities’ (DBHDD) APEX schools?

Blanton: We view the APEX school-based mental health project as an essential component of the collective impact that both GaDOE and DBHDD are seeking to exert in order to give children and their families access to much needed mental health services. To this end, Project AWARE staff seeks to support APEX staff in identifying ways to remove barriers to delivering mental health services in Georgia’s schools. I am personally involved in monthly conference calls or meetings with APEX staff to stay informed about organizational needs and to troubleshoot issues that may arise. APEX’s state coordinator serves on the Project AWARE State Management Team and participates in our quarterly meetings. This type of involvement has helped to promote understanding of both projects among our joint stakeholders.

GPAD: How are Project AWARE personnel preparing for service sustainability after SAMHSA funds end?

Blanton: Sustainability has not been an afterthought. In fact, it has been a preoccupation. From the very beginning, GaDOE and LEA Project AWARE personnel have sought to identify existing structures and processes that could serve as the foundation of continuous support for children’s mental well-being. As previously mentioned, that is one of the reasons that we have been integrating mental health into the PBIS framework. Of course, we are seeking ideas from our federal technical assistance providers in

search of insights that they have gleaned from other Project AWARE State Education Agencies. Currently, we are in conversations with personnel in Rockdale County School System to understand the path they have traveled since their federal U.S. Departments of Education-Health and Human Services-Justice Safe Schools/Healthy Students grant ended in 2015. Rockdale County was the first school district in Georgia to receive an LEA-level Project AWARE grant in 2014.

GPAD: Are there other sustainability efforts underway?

Blanton: As our project's name (AWARE) generally implies, we are promoting efforts that increase awareness of children's mental health issues. Statewide training of first responders, educators, youth sponsors, parents and others on Youth Mental Health First Aid (YMHFA) is central to our sustainability efforts. To date we have trained nearly 3,900 first aiders, and have 19 YMHFA trainers statewide. Moving forward we will be conducting joint-training with partner agencies such as Mental Health America Georgia. Recently awarded grants to GaDOE from other federal agencies such as the *Literacy for Learning, Living, and Leading in Georgia (L4GA) Striving Readers* grant and the *Office of Special Education Programs' State Personnel Development Grant* include opportunities for school districts to link students' behavioral, social and emotional needs to academic performance and educator training.

GPAD: What is the role of the GPA State Management Team (SMT)?

Blanton: The SMT, which is composed of over 50 state and local partner agencies, has a primary role of advising GPA personnel on the implementation of our SAMHSA Coordination and Integration Plan. Members of the SMT review GPA's annual performance outcomes and offer feedback on areas requiring improvement. Over time, the SMT has become more of a professional learning network. During quarterly meetings, representatives of partner agencies eagerly share updates of their work in children's mental health and pose questions to each other in search of information, resources, and solutions. Brief training segments are sometimes incorporated into meetings.

GPAD: In the recent evaluation of GPA, is there a finding that bodes well for the continued identification of students who may need services?

Blanton: GPA's recent evaluation findings are from grant year three (2016-2017). The training of individuals on Youth Mental Health First Aid appears to be yielding positive results. One finding shows that persons trained in Youth Mental Health First Aid are more likely to refer students who may need services.

GPAD: So far, which parts of the work have been most gratifying to you?

Blanton: Lots of things come to mind: The number and quality of the partnerships that have formed, superb training designed and led by our state training team at Georgia State University's Center for Leadership in Disability and numerous national training consultants, and teamwork between GPA and PBIS staff around mental health integration. The thing that pleases me most, however, is how much other LEAs may be able to learn from our three pilot LEAs beyond what is being measured.

GPAD: Tell me more.

Blanton: Each has similar goals for advancing children's mental health but is plotting different paths to reach their goals. In the area of school-based mental health services, for example, there's much that can be learned from the diverse approaches used. Spalding County School District employs two mental health clinicians and uses supervised, masters' level social work and counselor interns to provide school-based mental health services. The district is seeking to expand school-based mental health services through Pathway Community Service Board. Newton County School District employs one mental health clinician and supplements school-based mental health services with APEX providers in a feeder school pattern. Muscogee County School District is providing school-based mental health services only to its pre-kindergarten population through SAMHSA funded Project LAUNCH under a Memorandum of Understanding (MOU) with the West Central Health District. Counselors play a major role in identifying and referring school-aged students for mental health services in Muscogee County School District.

This district also works closely with the Behavioral Health program for children and adolescents on the installation at nearby Ft. Benning military base. Taken separately and collectively, there's a lot to learn from these districts about providing school-based mental health services.

GPAD: Looking ahead, what do you hope to accomplish in the final year of the grant?

Blanton: During the final year it is my vision that we continue to reduce the stigma of mental health by providing more training to districts that were not part of the Project AWARE grant and providing support to districts interested in universal mental health screening. Also, GPA has a goal to have YMHFA instructors in each of the Regional Education Service Agencies (RESAs) so that the training, education and stigma reduction around mental health will continue long after the grant is completed.

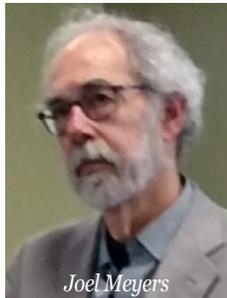
Part of the vision for the work of the grant is to make the discussion about mental health as commonplace as discussions about physical health or academic progress, as this will be the measure for teaching the whole child.

The training of individuals on Youth Mental Health First Aid appears to be yielding positive results. One finding shows that persons trained in Youth Mental Health First Aid are more likely to refer students who may need services.

GPA EVALUATION FINDINGS

Key Evaluation Findings from 2016 - 2017 Implementation of Georgia Project AWARE

By Joel Meyers, PhD, Primary Investigator & Executive Director, Center for Research on School Safety, School Climate and Classroom Management, Georgia State University



Joel Meyers

Georgia Project AWARE is independently evaluated by staff at Georgia State University's Center for Research on School Safety, School Climate and Classroom Management at the conclusion of each federal fiscal year (September 30). The following snapshots highlight key findings from grant year three (2016-2017).

Mental Health Referral Systems

Each district has developed their own system to keep track of referrals for mental health services. These will be used as part of a framework to encourage other districts in the state to develop referral tracking systems in all three districts.

LEA referral tracking systems for Community-Based Mental Health Services

- All districts report counselors are key personnel in implementing referral tracking systems for community-based mental health services. As a result, counselors are receiving training in the districts.
- There has been resistance from some counselors which may be a result of the increased workload that this implies without increased resources. It is important to enhance counselors' acceptance of their role in the mental health referral system by focusing on prevention.
- Schools that have school-based community mental health counselors (or Project AWARE mental health counselors) report greater success in implementing the referral tracking system.

Community-Based Mental Health Services

- Districts have made efforts to increase collaboration between schools and community-based mental health services (e.g., MOUs, etc.) to augment school-based mental health services from community agencies but these need to be increased.
- An increase in collaboration will ideally result in smoother and higher numbers of referrals for both school-based and community-based mental health services.

Youth Mental Health First Aid Training

- Very high ratings of trainings have continued for YMHFA:
 - Overall Course Evaluation = 4.7 - 4.9/5

- Instructor Evaluation = 4.7 - 4.9/5
- Practical Application = 4.6 - 4.8/5
- All Project AWARE districts have a goal of training 125 personnel per year and were on track to meet or exceed the goal in 2016-2017.

Advertising About Mental Health and Project AWARE

- Various efforts have continued to be used effectively across districts. Methods of advertising Project AWARE include:
 - TV and radio advertisements
 - Social media
 - Brochures, posters
 - Community presentations

Engagement of Families and Students

- Various strategies are being implemented across districts (e.g., First Aid Training, information sessions for families and community members, summer programs on active parenting and mindfulness, National Alliance on Mental Illness Training, Sources of Strength, Suicide Prevention, parent awareness session, use of media, websites, etc.) to engage families and students.
- It is suggested that each school district can build on these efforts by working to increase systematic programming with parents in the district to enhance knowledge, awareness and skills related to mental health issues that may affect their children.

Screening Systems

- Universal screening is a critically important component of Project AWARE with implications for sustainability.
- Districts were trained to analyze screening data to determine needs.

PBIS in Project AWARE (PA) Districts

- Generally PBIS continues to be viewed positively by the schools and increasing numbers of schools are functioning at the operational status.
- Tier 2 and 3 Interventions
 - Although it is an important goal, no schools have achieved Tier 2 or Tier 3 interventions.
 - These interventions should be increased across districts: Functional Behavioral Assessment (FBA) and Behavior Intervention Plans (BIP); Check-in/Check-out; Positive Action; as well as evidence-based and non-evidence based groups.
 - Intervention fidelity, acceptability, and effectiveness of all Tier 2 and 3 interventions need to be evaluated across districts.

Suicide and Bullying

- Suicide
 - Suicide rates have increased slightly (1 - 2% increase) and suicide ideation has remained relatively constant (about 7% of students) (*Georgia Student Health Survey*).
- Bullying
 - 20% of middle and high school students across the three LEAs reported at least some bullying or threatening experiences.

Office Referrals and Discipline Rates

- Over the past two years (2015-2016 and 2016-2017) Rates of Office Discipline Referrals (ODRs) per 100 students decreased.
- Slight rate drops of 2-3 In-School Suspensions (ISS) and 1-2 Out-of-School Suspensions (OSS) per 100 students have been observed.

School Climate Ratings

- School climate scores were very positive across districts (approximately 3 on a 4-point scale).
- School climate scores are difficult to improve across schools, particularly given that scores were already relatively positive. There has essentially been no change in school climate ratings across the first three years of the grant.
- Increased, effective PBIS implementation at Tiers 1, 2 & 3 might help improve school climate.

Assessment of Student Stigma Regarding Mental Health

- A nine-item scale was used to assess sensitive awareness and mixed negative apprehension among 213 middle school and 384 high school students. The measurement (metric) invariance was sufficient for testing differences in stigma based on gender and race. As a result, stigma items are being included in universal screening.

Sustaining Georgia Project AWARE

Possible strategies/actions to sustain GPA include:

- Provide statewide framework to assist school districts develop their own system to track mental health referrals.
- Continue universal screening; include measurement of stigma and train counselors and others to use this system.
- Increase implementation of PBIS and increase the number of schools that reach operational status of PBIS.
- Include evidence-based interventions for bullying and suicide at Tiers 2 and 3.
- Increase school-based mental health services.
- Define and promote the roles of counselors, school psychologists and social workers in screening, referral tracking systems and providing mental health services.
- Collect and highlight more success stories of how Project AWARE has positively affected students/families in each district.

All questions about the Georgia Project AWARE evaluation process or findings should be directed to Dr. Joel Meyers, Principal Investigator, at jpmeyers@gsu.edu.

PBIS INTEGRATES MENTAL HEALTH BEST PRACTICES

Integrating Children's Mental Health Best Practices into the GaPBIS Framework: Creating a Now and Forever Union

By Justin Hill, Ed.S, State Program Manager, Georgia PBIS (GaPBIS) Program



One of the guiding beliefs of the GaPBIS Team is that social-emotional and behavioral competencies are required skills for success in school, college, and careers. It has been observed in countless classrooms that when a child's physical, social and emotional needs are met, he is more likely to be fully "present" to the academic learning experience. As school personnel have been encouraged to return to a focus on the whole child, the social, emotional, behavioral and, yes, mental well-being of students is being considered right alongside their academic performance. The heightened interest in identifying students with mental health problems can be a conundrum for educators who want to do all they can to assist students in being and becoming their best selves. The fair, but pesky, question might be: how can we add one more thing to our plate and do everything else that needs to be done? The GaPBIS Team's response to that question is, let's see if we can build upon a framework that is already in place to support teachers and students. In fact, that work has already begun as the Team has been intentionally exploring ways to integrate key best practices of children's mental health into the Positive Behavioral Interventions and Supports framework.

We don't pretend that the integration of mental health into the PBIS framework is an easy task; but our goal is to make this a now and forever union. Our team believes that the two go well together. After all, the multi-tiered approach used by PBIS schools incorporates evidence-based prevention and intervention supports for all students. Navigating the tiers requires school-based PBIS teams to use student data that helps to identify the appropriate supports and/or interventions needed by individual students based on their levels of severity or risks. There's also progress monitoring to ensure that supports and interventions change when indicated. Conceptually, we think that the PBIS framework already brings together some of the key elements needed to successfully blend and infuse children's mental health practices into this infrastructure. Our efforts at integration have been small, but thoughtful, to date. Brief examples of some of the actions we have taken are described below.

- **Receiving training and coaching by several of the nation's leading experts on how to implement the Office of Special Education Programs' (OSEP) research-based *Interconnected Systems Framework (ISF)*.** The training has helped our team to appreciate that there are numerous subsystems and processes that have

to be connected in order to integrate PBIS and children’s mental health. For example, a data system must be in place that receives student information from internal and external sources. We also need to ensure that there is a process in place for selecting evidence-based practices. The team has begun using ISF as our blueprint for PBIS and children’s mental health integration.

- **Cross-training GaPBIS Regional Specialists and RESA School Climate Specialists on pertinent children’s mental health topics that are central to understanding and supporting local educators.** A considerable amount of time has been devoted to building the capacity of our state and regional staff to acquire deep knowledge, skills and understanding of topics such as creating trauma-informed schools; universal screening of social, emotional and mental problems; Youth Mental Health First Aid; identifying, building and accessing community mental health assets, etc.
- **Including the Georgia Project AWARE Children’s Mental Health Project Director as a strategic member of the GaPBIS Team.** This affords our team the opportunity to gain insights about the mental health practices being used by the three LEAs.

I can’t emphasize enough how much our team is learning from the school districts that are implementing Project AWARE grants. Also, since these districts are implementing PBIS in many of their schools, we have been able to look over their shoulders at real life connections between PBIS and children’s mental health that will further our work in creating and deploying a systematically integrated model.

Questions or requests for information about Georgia’s PBIS Program should be directed to Justin Hill at JuHill@doe.k12.ga.us.



GaPBIS Team Front Row (from left): MiMi Gudenuith, Timi Hunt, Tammi Clarke; Back Row (from left): Justin Hill, Ben Morre, Brandu Woolridge, Sandra DeMuth, Debi Keane, Susan Barrow and Tony Feldman

STATE PBIS AND SCHOOL CLIMATE TEAM RECOGNIZED

Representative Dickey Recognizes GaDOE/RESA PBIS and School Climate Team Before GA House and Senate

Representative Robert Dickey (District 140), Chairman of the House Appropriations Subcommittee on Education, made the following comments during his recognition of the GaDOE PBIS Team before both Houses of the Georgia General Assembly during the 2018 legislative session.



Rep. Robert Dickey

We all share a common priority today: Keeping our children safe. We know that children are safer in schools than in almost any other place.



Governor Nathan Deal (center) joins Rep. Dickey (second from left) in recognizing State PBIS and School Climate Team.

A positive school climate is necessary for maintaining safe and healthy schools. Georgia is a national leader in school climate and many in this chamber have been champions of this work.

The Georgia Department of Education is addressing school climate through the Positive Behavioral Interventions and Supports or PBIS framework.

In 2008 GaDOE’s PBIS team set out to help schools improve their climate. Thanks to the support from this chamber, a team that once numbered three is now more than forty-eight educators strong and located at GaDOE and in the 16 RESAs spread throughout Georgia.

Thanks to the support from this chamber, a team that once numbered three is now more than forty-eight educators strong and located at GaDOE and in the 16 RESAs spread throughout Georgia.

Together they have trained more than 1,200 schools in 96 districts that is impacting 675,000+ kids. Since their work began there has been a 34% reduction to Georgia's suspension rate, schools report improved climates and improvements in their performance. Through the Project AWARE grant almost 3,000 Georgia students have been given access to mental health services.

This team is dedicated to making our schools safer, healthier, and more positive. They are the GaDOE/RESA PBIS/School Climate Team.

LEGISLATIVE UPDATES

Recap of 2018 Legislation Affecting Children and Youth in Georgia

Mental Health-Related Legislation Passed

HB	740	Students in preschool through 3rd grade may not be suspended more than five days without first being referred to Response to Intervention. Certain other conditions apply.
HB	763	School climate is added to the Student Attendance Protocol Committee statute to enable the Committee to discuss student discipline, safety, and attendance; to require Safe School Plans and mandatory training that includes student mental health awareness.

Other Children and Youth-Related Legislation Passed

HB	844	Creates Task Force to advise the Georgia Commission on Hearing Impaired and Deaf Person; monitor deaf and hard of hearing children birth to literacy progress; add students to SLDS.
HB	972	Allows DFCS to offer extended youth care services to youths between 18 and 21 under certain circumstances.
SB	118	Increases the age for health insurance coverage for individuals with autism from 6 to 20 and other provisions.
House Resolution	1017	Encourages all schools, local educational agencies, and the state educational agency to recognize that dyslexia has a profound educational impact that must be addressed; and for other purposes.

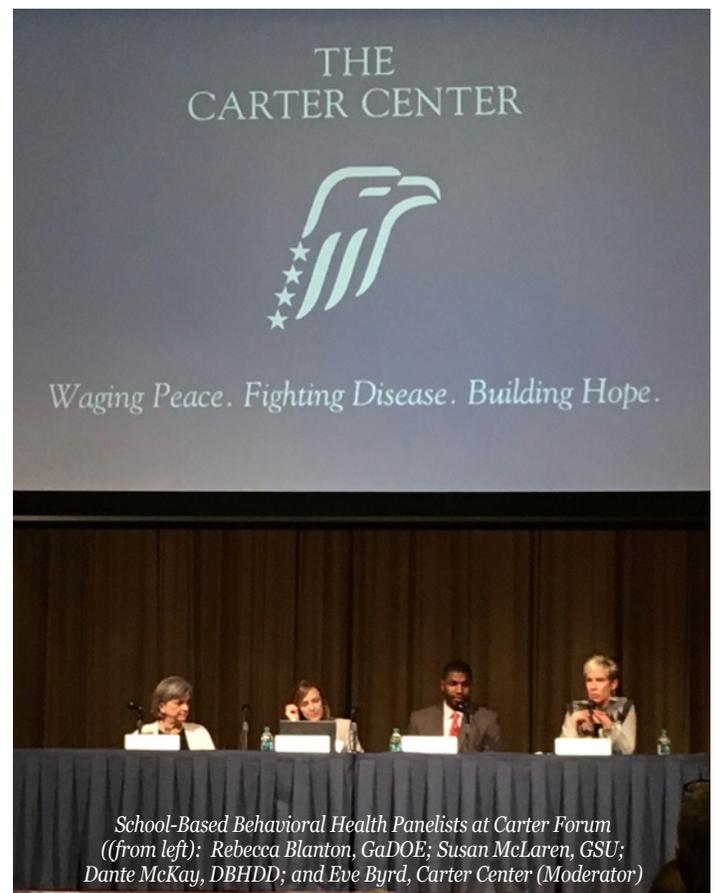
CARTER CENTER FORUM TACKLES SCHOOL-BASED BEHAVIORAL HEALTH

School-Based Behavioral Health Panel among Sessions Featured at Carter Center's Georgia Annual Mental Health Forum

The Twenty-third Annual Rosalyn Carter Georgia Mental Health Forum was held May 11, 2018 at the Carter Center in Atlanta. Attendees at the day-long event were welcomed by former first lady Rosalyn Carter, who serves as the chair of the Carter Center Mental Health Task Force. The American Psychological Association (APA) presented Mrs. Carter with the APA's Presidential Citation. She was also presented with a



Former First Lady Rosalyn Carter receives copy of national children's health survey report from Dr. Coleen Boyle of CDC at Mental Health Forum.



School-Based Behavioral Health Panelists at Carter Forum (from left): Rebecca Blanton, GaDOE; Susan McLaren, GSU; Dante McKay, DBHDD; and Eve Byrd, Carter Center (Moderator)

copy of the National Survey on Children's Health Report by the Centers for Disease Control and Prevention.

Comprised largely of moderated panels, the forum program covered topics pertaining to Applying Science and Policy to Help Georgia's Families with Young Children Thrive; The U.S. Department of Justice Settlement Agreement with Georgia; Children in Need of Services; and School-Based Behavioral Health in Georgia. Rebecca Blanton, GPA Director, was one of the panelists on school-based behavioral health. *See sidebar for more on the Carter Center's Georgia Mental Health Program and Forums.*

ABOUT THE CARTER CENTER'S MENTAL HEALTH PROGRAM

GOAL

Under the leadership of former First Lady Rosalynn Carter, a long-standing champion for the rights of people with mental illnesses, the Carter Center's Mental Health Program works to promote awareness about mental health issues, inform public policy, achieve equity for mental health care comparable to other health care, and reduce stigma and discrimination against those with mental illnesses.

MENTAL HEALTH IN GEORGIA

In the state of Georgia, the Mental Health Program works in three areas: integrating behavioral health care into primary care, monitoring a settlement agreement between the state and the U.S. Department of Justice, and implementing a child and adolescent mental health initiative. The annual Rosalynn Carter Georgia Mental Health Forum is dedicated to updating the public on the state's progress complying to an agreement that entails moving mental health patients out of institutions. The program works with Casey Family Programs on improving the well-being of children in Georgia who fall between the juvenile justice and child welfare systems and who have significant behavioral health needs.

ANNUAL GEORGIA MENTAL HEALTH FORUMS

The Rosalynn Carter Georgia Mental Health Forum, established in 1995, is held each May to address a timely mental health policy issue facing the state. Service providers, policymakers, advocates, and consumers from across Georgia are invited to participate in open discussions on diverse topics. The forum also has been an opportunity to update local stakeholders on progress toward building a quality and sustainable behavioral health system in the state as required by a settlement agreement between the U.S. Department of Justice and the State of Georgia in 2010.

Source: https://www.cartercenter.org/health/mental_health/index.html.

SCHOOL SAFETY PREPAREDNESS IN GA'S SCHOOLS

Superintendent Woods Urges Educational Leaders to Examine School Safety Preparedness

State School Superintendent Richard Woods recently sent a letter to educational leaders requesting that they examine their school safety plans to determine preparedness



to respond to school incidents. Following are excerpts from the letter on specific actions to be considered. The full text of the letter is part of the press release found here (<http://www.gadoe.org/External-Affairs-and-Policy/communications/Pages/PressReleaseDetails.aspx?PressView=default&pid=593>).

Recent incidents should serve as a reminder to all of us to establish, update, and practice school safety protocols and procedures. Your local emergency management experts can assist you in the development and implementation of your safe school plan. Additionally, the Georgia Emergency Management Agency (GEMA) can review your safe school plan.

Considering recent events, I request that you take this opportunity to examine your preparedness in the following areas.

- **Facilities.** Ensure facilities are secure and evaluate processes and procedures to ensure their security. Make sure security is prioritized in the design and construction of new facilities within your district.
- **Visitors and suspicious activities.** Evaluate your processes and procedures for handling visitors. Deliver training for educators, staff, and even students to report suspicious activities or incidents with students or peers that could quickly escalate and consider establishing and practicing front office safety procedures.
- **Communication.** Be sure protocols and processes are in place to clearly communicate with local emergency responders, parents and the community about emergency situations. Provide timely, clear, and accurate information and deliver them through different mediums (text alerts, emails, phone calls, or local media).
- **Student Support Teams.** Be sure that counselors, social workers, and other support staff members participate in the development of your safe school plan and are aware of school safety processes and have clear lines of communication with school leaders at all times.
- **Partnerships.** Beyond engaging local emergency responders, form strong partnerships and lines of communication with local agencies and organizations that can provide support and resources to enhance safety and security; for example, a local chapter of the American Red Cross may be able to provide training.
- **School Climate.** Continue to examine and have deep conversations around school climate data such as suspensions, office referrals, and attendance. Initiatives like Positive Behavioral Interventions and Supports (PBIS) provide support for ensuring a positive learning environment in our schools and classrooms. This is important because we know from research that one of the most effective school safety strategies is creating a school climate where students and staff members feel engaged and connected.
- **State Supports.** In addition to supporting PBIS, the Department offers Youth Mental Health First Aid training to school, safety assessments in partnership with GEMA, and a 24/7 School Safety Hotline — 1-877-SAY-STOP. Additionally, we co-sponsor the annual Safe Schools Conference with GEMA and the United States Attorney's Office of Middle Georgia — this year's conference is scheduled for June 26 to 28. This year's Georgia Education Leadership Institute (GELI) will provide a pre-conference session dedicated to school safety with experts from GEMA sharing information about active shooter response

and emergency planning. GELI will take place from September 16-18. On the Department's School Safety webpage you will find numerous resources for schools pertaining directly to school safety. Also, follow our Twitter account dedicated to sharing school safety resources and information at @GaDOESafeSchool.

- **Drills.** In addition to fire and tornado drills, practice other drills such as intruder alerts. GEMA's School Safety Training provides training in several areas related to emergency drills and situations."

"Even though recent events certainly raise the issue to the forefront of public dialogue and discussion, school safety must continue to be an ongoing process and priority for us."

TURNING THE SPOTLIGHT ON GEORGIA'S FIRST PROJECT AWARE LEA GRANTEE

What We Learned from Implementing Rockdale County Public Schools' Safe Schools, Healthy Students and Project AWARE Grants

By April Fallon, MSW, LCSW, Director, Department of Community and Student Support
Susan Paul Smith, BS, Director, Student Relations and PBIS District Coordinator, Rockdale County Public Schools



Rockdale County Public Schools initially leveraged federal grants to install a range of social, emotional and behavioral supports for students. Subsequently, the district has maintained several high-value services through support from our local school board and community partners. In this article, we provide the reader with a brief overview of the federal and local grants Rockdale County Public Schools was awarded and some of the major lessons learned through project implementation. Along the way, we give you a peek at some of the initiatives and activities that we continue to implement.

Overview of Federal Grants Received by RCPS

In 2009, Rockdale County Public Schools (RCPS) was one of 29 local education agencies (LEAs) across the country to be awarded a five-year Safe Schools, Healthy Students (SS/HS) Grant by the U. S. Departments of Education, Health and Human Services, and Justice. The RCPS SS/HS project was called STARS – Support Team for All Rockdale Students. The STARS Project changed momentum in Rockdale County by breaking

down barriers to learning. With a focus on social, emotional, and behavioral health strategies, we used the funding to integrate resources into a comprehensive, cohesive continuum of support. The programs and initiatives begun through the STARS Project promote positive youth development, allow for prevention and early intervention programs to address problems soon after onset, and provide focused assistance on chronic behavior issues. At the official kick-off in December 2010, the STARS Community Partnership — a consortium of core and collaborative partners — pledged its support to our community's youth.

The STARS Project mission has been to provide safe and orderly schools and support services for all students that enable them to reach their highest potential. Like the five points on the star of our logo, the STARS Project had five focus areas:

- **Prevent** violence in our schools and community.
- **Promote** healthy lifestyles for our students that are alcohol, tobacco, and drug free.
- **Protect** our students from bullies and other threats.
- **Provide** school-based mental health services.
- **Prepare** our children to be ready for kindergarten.

As the school system and community worked to build capacity around STARS Project initiatives and activities, the momentum continued to increase. From the onset, sustainability was at the forefront of our planning assuring that our work must continue because this is what's best for our children. As SS/HS grant funds were ending, another federal grant opportunity became available that would help sustain one of our initiatives. We applied for a SAMHSA "Now is the Time" Project AWARE (Advancing Wellness and Resilience in Education) Local Education Agency (NITT-AWARE-LEA) mental health grant, in fiscal year 2014, and became the first school district in Georgia to be awarded LEA-level funding to initiate Project AWARE. The funds from this grant were used to implement Youth Mental Health First Aid (YMHFA) training throughout our school and community with a two-fold goal of increasing 1) the mental health literacy of adults who interact with school-aged youth and 2) awareness of mental health issues among this population.

Lessons Learned

In spite of our ambitious plans to sustain a full continuum of social, emotional and mental health services to the district, we knew that funding would be a challenge. Our strategy has been to leverage existing resources in our school system and community while continuing to seek external funding and external partners that support our goals. The STARS Project enabled us to strengthen relationships with community agencies and partners such that all are ready and willing to support other grant opportunities as they become available. RCPS learned numerous lessons throughout the implementation of two significant federal grants. Some of those lessons are described below.

Build Relationships with Internal Stakeholders — Engage internal stakeholders from the very beginning. Build relationships with your school and department leaders. Strong relationships and a clear understanding of roles and responsibilities allow you to build a program that can be woven into the fabric of your overall and day-to-day school operations. We make

every effort to involve our stakeholders — administrators, educators, students, parents, our district superintendent and school board as well as our community partners — in the planning and implementation of programs. We communicate frequently with our stakeholders and share our expectations for the project. Our goals are included in our District’s Strategic Plan so we seek grants that support our goals and thus our strategic direction. For a comprehensive program, consider developing and posting an interactive Frequently Asked Questions (FAQs) document as a reference for stakeholders.

Give Community Agencies and Organizations a Place at the Children’s Mental Health Table — As a grantee of the federal agencies that awarded RCPS funding, we were expected to involve a number of community agencies and organizations as partners in planning and implementing project activities. Rockdale County community agencies and organizations responded enthusiastically when we invited them to the table. When presented with a data story about the behavioral, social, emotional and mental health needs of students, representatives of social service agencies, juvenile justice, behavioral and mental health agencies, the business community, and faith-based organizations recognized the same needs. Their knowledge of resources, problem-solving, and willingness to take specific actions on behalf of their organizations made them an indispensable source of support. Even if your grantor does not mandate that you involve your community agencies, a consortium of your local agencies like our STARS Community Partnership is an invaluable resource. Likewise, be willing and available to support their goals and initiatives.

Find a Way to Hold on to What Works — Over the period of the grant, it’s important to know what really worked as a result of the funding. Having an independent evaluator is often a requirement of the grant, and evaluation results may help to pinpoint what works and what does not. We were required by the federal agencies that funded our grants to use evidence-based programs and practices from a designated clearinghouse and consumer guide. Now that such resources are available, we would recommend that every school district underpin their work in children’s mental health with evidence-based programs, practices and tools. A few of the supports and interventions that we were able to sustain after the STARS Project ended include:

- Prevention and Intervention Specialists who serve students with chronic behavioral, social and emotional problems.
- School-based mental health services provided by the Academy for Family Empowerment to any student who might not otherwise receive services due to a lack of insurance, transportation, etc.
- Suicide prevention training for middle and high school students using Signs of Suicide.

As our federal grant funds were ending, we sought ways to hold on to these supports given the positive response that had been documented in students’ behavioral, social, emotional and mental skills. RCPS’ school superintendent and school board chose to sustain the prevention and intervention specialists’ positions through the local budget as well as continue school-based mental health services through the Academy for Family Empowerment under a cooperative agreement. Through Georgia APEX, we have been able to secure additional mental health specialists in collaboration with View Point Health.

Collect and Use Data — Data collection is a big piece of any initiative. As we have collected quantitative data, we also recognized the value of qualitative data as perception is often reality.

Prepare for Sustainability Early — The excitement of receiving a large federal grant is eventually dampened when confronted with the question of what the district is going to do when funding goes away. What will become of personnel who have provided supports? How will we be able to continue specialized training? These are some of the difficult questions that must be answered. With every activity we implemented, we kept the question, “how will we sustain this activity?” on the table. We continued to apply for additional grants and worked with our system leaders, school board, and community agencies to discuss funding options. Because we had kept the board and community informed about our project activities, outcomes, and costs, it was not a surprise when we requested funding. In fact, when it was time to include some of the project activities into the general budget there were no surprises because there had been prior planning. As a result, virtually every activity/initiative begun through the STARS Project has been sustained. From staff to strategies and partnerships to programs, the school system made a significant financial commitment to carry on the work of the STARS Project.

In addition to the local school board funding, we are using federal entitlement dollars to sustain selected mental health training activities. Title II and IV are sources for covering educators’ professional learning and mental health training. The Youth Mental Health First Aid (YMHFA) training that was initially funded by the Project AWARE Grant is now underwritten, in part, by Title II and through a one-year grant from the Hospital Authority of Rockdale County (HARC). The Hospital Authority’s contribution makes it possible for RCPS to provide 8-10 YMHFA classes at no cost to the schools and community.

Build relationships with your school and department leaders. Strong relationships and a clear understanding of roles and responsibilities allows you to build a program that can be woven into the fabric of your overall and day-to-day school operations.

“One of our most effective sustainability strategies has been the rich relationships that Susan has established within the community, as well as her excellent grant writing skills,” says April. “As a result, RCPS has not only been able to sustain several key programs, but to add new ones. Not all districts will have access to such a powerfully embedded resource. However, it may be worth it to seek such a person out from other community organizations.”

RCPS’ Current Behavioral, Social, Emotional and Mental Health Initiatives

— The quest to enhance and expand the number and quality of behavioral, social, emotional and mental health supports available to RCPS’ students continues. Some of our current initiatives include:

- **De-escalation Training** — All RCPS teachers are required to participate in a 90-minute face-to-face training session on de-escalation of student behaviors. The primary focus is on building relations between students and teachers. We know that mental wellbeing is linked to positive relations.
- **Peer Leadership Model** — The district’s Peer Facilitator Specialist has developed a student peer leadership online course that emphasizes peer mediation, social emotional learning, suicide prevention, teen dating violence prevention, etc. Students conduct awareness training for their peers on each of the course topics. These student also can provide Peer Mediation at their schools.
- **Rockdale Youth Leadership Team** — Rockdale Youth Leadership (RYL) provides leadership development and community awareness training for 10th grade students in Rockdale County. Through collaboration with the Conyers-Rockdale Chamber of Commerce and Rockdale County Public Schools, aspiring youth leaders will have the opportunity to interact with local decision makers and participate in community service activities. During the program, students will interact with community leaders, local elected officials, and school administrators to enhance their awareness of community needs and resources. Through interactive workshops, special tours, and community service projects, RYL participants will develop the knowledge and skills necessary to become confident, caring leaders in their community and respective schools.
- **Teen Leadership Summit** — A half-day conference for middle and high school students that is organized and presented by RCPS teen leaders, Teen Leadership Summit, helps aspiring student leaders develop their leadership skills, learn more about themselves and how they can make a difference in their schools and community and network with other teen leaders. Students participate in three classes as well as a general session featuring a teen panel addressing issues important to teens.
- **Parent Academies** — Twice a year, RCPS conducts training for parents using the vehicle of Parent Academy — a one-day learning opportunity organized like a professional conference for parents and community. The offerings always include mental health-related topics and the sessions are well-attended.
- **Behavioral Interventions and Supports (PBIS)** — Each of the 22 schools in the district is moving toward full implementation of PBIS. The roll-out of PBIS occurred at all elementary schools during the 2017-2018 school year. Middle and high schools spent the year planning

and will implement the PBIS framework next school year. As with all of our initiatives, developing relationships with students is a major focus. Collaboration is underway with the professional learning department to develop cultural proficiency training that will take a close look at social climate, student backgrounds, etc. A newly-formed District Behavioral Interventions and Supports Team will be meeting twice a year to discuss common approaches to supporting students’ mental health, behavioral, social and emotional skills. The team is composed of school counselors, school psychologists, school social workers, RTI chairpersons, prevention and intervention specialists, and special educators.

- **Community Conversations on Mental Health** — County Commissioner Doreen Williams and a team of invested community members hosted a series of three community conversations on mental health this year. The series involved agencies such as RCPS, Rockdale County Courts, local law enforcement and numerous mental health experts. One of the community conversations was devoted to Suicide Prevention and included a presentation by Kevin Hines, whose story is featured throughout the Youth Mental Health First Aid Training.

RCPS is grateful for the federal and local grants and outstanding community partnerships that have made it possible to attend to our students’ mental, behavioral, social and emotional well-being.

To learn more about RCPS’ grant activities, please contact April Fallon, afallon@rockdale.k12.ga.us or Susan Paul Smith, spsmith@rockdale.k12.ga.us.

EXAMPLES OF STUDENT MENTAL HEALTH REFERRAL PROCESSES

Overview of Mental Health Referral Processes Used by Project AWARE LEAs

Muscogee County uses a custom-built mental health referral app that is linked to the student information system. The system has two buttons, one for mental health referrals and one for other support services, to allow school counselors to track all services. The system sends reminders every two weeks to the counselors until they follow up to make sure students have received community mental health services.

Griffin-Spalding used Google Docs to develop its mental health referral process. Data is entered in Quickscore (internal data collection tool) so it can be analyzed and shared with stakeholders. The referral system tool allows the district to document follow-up contact with families to confirm that they have visited a service provider. The tool also analyzes data to help determine where Tier 2 and Tier 3 interventions are needed. The system is used as a data collection tool for Response to Intervention (Rti) meetings and triangulates data with universal screening.

Newton County Project AWARE’s current Mental Health Referral Tracking Form is a Microsoft Office 365 Form. This platform is efficient to collect and display data and export it to Microsoft Excel for further analysis. NCSS school counselors, school social workers, and school nurses

access the form from a link on the Student Information System (SIS) page in Infinite Campus. A new version of the referral tracking form is being developed on SharePoint modeled after the school system's technology ticket system known as a NOW Request. The new version of the Mental Health Referral Tracking Form will allow school staff to begin a referral entry immediately after the first contact, and revisit the entry when they have follow-up information from the family regarding connection to services. The ticket system will also allow Project AWARE staff to see which referrals require follow up and provide feedback to school staff within the ticket.

School Mental Health Referral Pathways Toolkit - This is a SAMHSA toolkit that is available on line at

<http://files.ctcdn.com/bde05f96001/84fa3636-08af-43fc-aeaf-a016f2aa68a6.pdf>

NCSS PROJECT AWARE UPDATE

Newton County Project AWARE End-of-School-Year Update

By Adrienne Boisson, Coordinator,
Project AWARE, Newton County
School System (NCSS)



YMHFA Training — Newton County Project AWARE exceeded its Youth Mental Health First Aid training target for 2017-18. Approximately 140 first aiders have been trained, with four additional training sessions to be conducted before the end of June. Three schools have

*GPA State Management Team
Continues Quarterly Meetings;
Seeks to Collaborate and Stay
on Top of Children's Mental
Health Challenges*



already reached their goal to have 25% of all staff trained in YMHFA. Next year, we will award recognition at board of education meetings when schools reach YMHFA training benchmarks of 25%, 50%, 75%, and 100%.

Mental Wellness Film Series — Our biggest campaign for the 2017-18 school year culminated on Monday, May 7. The series consisted of six events, including three family wellness films: *Inside Out*, *The Grinch*, and *Horton Hears a Who*.

- At each of the screenings, we provided social-emotional games corresponding with the themes of the film.
- Door prize giveaways included social-emotional and mindfulness books for children and parents.
- Parents were also provided talking points on how to have conversations with their children about emotional development and bullying.

There were also three documentary screenings, *Mind/Game*, *Suicide: The Ripple Effect*, and *Outside the House*.

- *Mind/Game* was screened during our MLK Day of Service and Wellness featuring collections of food, clothes, and books distributed throughout the school district and luggage for children in foster care. Our wellness activities included a family Zumba class and a chat and chew about *Mind/Game* with a local sports psychologist.
- *Suicide: The Ripple Effect* featured a panel of experts representing GaDOE/NAMI, GA Crisis and Access Line, Behavioral Health Link, and View Point Health, as well as resource bags with information from our community partners for each guest in attendance.
- *Outside the House* screening kicked off Mental Health Awareness month with a student art showcase called *A Vision for Mental Health*. 50 art pieces from middle and high school students were showcased before the film screening. After the film, Newton County Board of Education member Shakila Henderson-Baker moderated a panel discussion about the stigma of mental health in the black community. The panel featured the film's director, Darnell Lamont Walker, as well as mental health professionals representing Mental Health America of Georgia, NAMI, View Point Health, Behavioral Health Link, GA Crisis and Access Line, and Silence the Shame. Guests received a resource bag with information from our community partners.

Looking Ahead to Next School Year — The following activities are being planned for the 2018-2019 school year:

- Coordinating with Athens-Clarke County Police Department to provide Trauma-Informed Care training for NCSS Administrators next school year.
- Suicide Prevention Month will feature a Sources of Strength Color Run and Health Festival.
- Mental Wellness Film Series 2.0 will be developed.

SAMPLE TOOLS TO MONITOR STUDENTS' TECHNOLOGY USE

Monitoring Students' Technology Use and Online Searches for Signs of Emotional Distress

By Jason Byars, Ed.S, District PBIS Director and Project AWARE Coordinator, Griffin-Spalding County Schools



The Georgia Department of Education does not endorse vendors or products. The opinions in this article belong to the author.

Are These Signs of Students in Emotional Distress?

"How to end your life, and why do teachers hate kids."

"Why am I feeling very down lately? I feel like I want to end my life."

"I want to kill myself. Please help."

"How to kill yourself in school."

Today's 'screen-agers' are looking for the answers to their questions and problems in search engines and on social media. These comments are just a sample of the hundreds collected by the Griffin-Spalding County School System (GSCS) utilizing a variety of technology monitoring software.

Parents and educators struggle with if and how to monitor students' technology use. In GSCS, we follow the rule that safety trumps privacy when it comes to the well-being of our students. There are dozens of services that provide monitoring and reporting of students' online activity. GSCS is utilizing two monitoring services, SysCloud and Go Guardian, to alert educators to online activity relating to self-harm, suicidal and homicidal ideations. In the fall of 2018, the district will add Social Sentinel to monitor social media for similar threats.

Features and Use of SysCloud

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SysCloud monitors all of the students' Google accounts that are housed on the school system server. Each student is provided a g-mail school account with access to the Google suite of applications. Many teachers utilize Google Docs, Google Slides, etc. to submit school work. SysCloud's threat detection settings are set by the school system. When a threat is detected the SysCloud administrators are notified. The administrators then verify whether or not the threat is credible. Many of the notifications are students who may be writing papers that may include the death of character or research on suicide. If a threat is deemed credible the system administrator notifies the two GSCS mental health clinicians, the school counselor, and the school adminis-

tration. SysCloud is priced based on the number of students using the system at about \$1.80 per student. During the 2017-18 school year there were nearly 2,000 SysCloud alerts in GSCS. The SysCloud technology alerted school officials to numerous threats, including a suicide note left by a student to her family where the school and mental health clinician were able to successfully intervene to assist the student in getting mental health resources. For more information on SysCloud visit their website at www.syscloud.com.

Features and Use of Go Guardian

Go Guardian monitors all internet searches conducted on the GSCS server. This is true for any school-owned device or personal electronic device. As soon as the device is connected to the GSCS server and the personal use agreement is confirmed, monitoring occurs with Go Guardian. A significant difference in Go Guardian compared to SysCloud is that when a threat is detected the Go Guardian Company monitors and verifies the credibility of the threat. This results in significantly fewer alerts, but the urgency to respond to the notification in a timely manner is heightened. GSCS had just over 100 Go Guardian alerts for the 2017-2018 school year (see Figures 1 & 2). In the same process when a threat is detected the system administrators are notified and they in turn notify the two GSCS mental health clinicians, the school counselor, and the school administration. Go Guardian is priced based on the number of school devices monitored by the company at a cost just under \$4.00 per device. Nearly all of the Go Guardian alerts during the 2017-18 school year resulted in crisis intervention and a referral for a mental health evaluation. For more information on Go Guardian visit their website at www.goguardian.com.

Monitoring Systems Piloted Before Implementation

GSCS' Director of Instructional Technology, Mr. Lonny Harper, piloted the use of technology monitoring with SysCloud and Go Guardian at the end of the 2016-17 school year. Funds are allocated in the instructional technology budget to cover the costs of both technology services. It is important that the school system have a solid Technology Use Agreement that clearly states "Administrative staff and teachers reserve the right to monitor any and all use of technology resources by students including electronic mail and internet use." So far, we have not had a parent or guardian get upset with the monitoring when we contacted them concerned about their child's well-being. If asked how we found out about the threat or concern, we simply tell them that 'someone who loves you very much let us know.'

School Counselors Play Key Role in Monitoring

The use of this type of technology will be sustainable after the Project Aware grant funds cease largely because of the commitment of the GSCS

Figure 1. Grade Levels of GSCS' Students Receiving Go Guardian Alerts

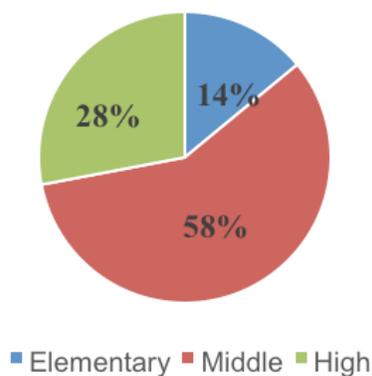
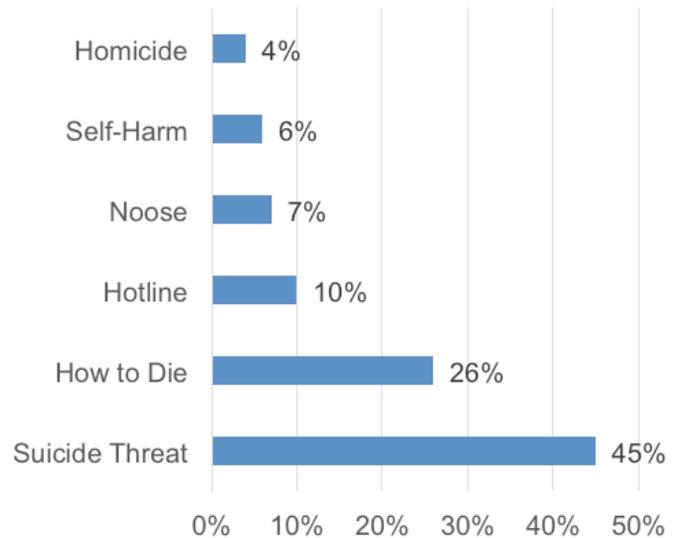


Figure 2. GSCS's Results of Go Guardian Searches, 2017-2018



school counselors. Our counselors have been trained in Youth Mental Health First Aid (YMHFA) and on the Columbia Suicide Severity Rating Scale to triage students in crisis. GSCS has adopted clear procedures for notifying parents, writing student safety plans, and making referrals for student evaluations. Heavy lifting by school counselors has contributed to the success of the technology monitoring program and, ultimately, the safety of countless GSCS students.

Learn more about Griffin-Spalding's Project AWARE activities by contacting Jason Byars at Jason.Byars@GSCS.org.

MSCD PROJECT AWARE PROVIDES RESOURCES TO STUDENTS AND TEACHERS

Muscogee County School District's Project AWARE Provides Student Training and Classroom Resources

Courtney Lamar, MS, NCC, BCC
School Mental Health Coordinator Project AWARE
Muscogee County School District

Students Share Insights about NAMI's Ending the Silence Presentation

Earlier in the school year, 96 Muscogee County Early College Academy students participated in a presentation by the Georgia National Alliance on Mental Illness (NAMI) called Ending the Silence. The presentation featured testimonials by individuals who share their lived experiences with a mental health condition and their journey of recovery. Audience

members were given the opportunity to ask questions and gain understanding of an often-misunderstood topic. Ending the Silence connected the audience through an engaging dialogue that helped adolescents learn about facts and statistics, the warning signs of mental health conditions, the steps to take to get support for themselves, and how to support a loved one who displays symptoms of a mental illness. Students were also educated on tools and interventions that can support recovery from mental illness such as counseling, medication, involvement of family and friends, self-care and self-awareness. Students at Early College Academy reported numerous benefits of the Ending the Silence presentation. Two students responded to questions posed to them about the presentation.

Student: Chelsea Brannan
Grade: 9th
Hobby: reading
Future aspirations: Graduate with Honors



Question: What was your experience like with Ending the Silence?

“My experience was amazing. I got to see things from a different point of view. It has changed my understanding of mental illness... that many things can contribute to it and it’s never okay to bully someone over it.”

Question: What were your thoughts on mental illness before participating in the workshop?

“My thoughts about mental illness [before the presentation] were that if you had something going on in your life, it affected your mental health.”

Question: Do you have a different perspective on mental illness than before?

“I understand that you can do many things to help someone with a mental illness. Whether they are born with it or not, you can still do something to help them.”

Student: Raymond Hyman
Grade: 10th
Hobby: Politics
Future aspirations: Become a CIA agent



Question: What was your experience like with Ending the Silence?

“It was interesting. It gave me a lot of inspiration and gave me the courage to speak up for others. I got to understand it from a different perspective.”

Question: Having participated in the presentation how has it changed your understanding of mental illness?

“It changed my understanding of mental illness because it showed how we need to have patience with and understanding of mental illness.”

Bringing *Ending the Silence* to students of Early College Academy represents one of the many ways that Muscogee County School District (MCSD) is attempting to reduce the stigma of mental illness. We believe that raising awareness of mental illness among students, educators and the community is paramount in reducing the stigma frequently associated with this condition.



Behavioral/Therapeutic Resources Provided for Students with Emotional Behavioral Disturbances

Project AWARE has provided several resources to MCSD’s Program for Exceptional Students (PES) to enhance social-emotional learning opportunities for students with emotional behavioral disturbances in elementary, middle and high school. To date, we have provided over 110 resources such as interactive games, feelings dolls, conversation starters, etc. to 21 schools. The resources are designed to assist students in managing their emotions through noncompetitive and therapeutic play; strengthening social skills; and building effective communication skills. Our Local Education Agency (LEA) Facilitator and Special Education teachers report that the tools have been useful in their educational practices.

“I truly believe using strategies to improve social/coping skills in everyday life can benefit our students with disabilities. Many times our students do not stop, relax, and think before they act. For many students with disabilities, it is a skill-mindset to be taught and modeled. To teach, model, engage and equip our students with healthy ideas and ways to calm down and deal with their feelings, thoughts, and especially anger can be therapeutic and delivered in a fun way. I am really excited and thankful to Dr. Gilmore for sharing [these resources] with us.” — Wyndell Crowell, PES Lead LEA Facilitator, Functional Curriculum & Supports.

Upcoming Training for Educators to Focus on Strategies for Diffusing Challenging Behaviors

In MCSD educators are trained on non-confrontational strategies for diffusing challenging behaviors in school settings. The primary approach taught in this class is the conflict model. The premise of the conflict model is to interrupt the problem behavior immediately after its occurrence

with emphasis on being proactive with a positive relational response and subsequent interactions with the student that can diffuse the problem behavior. Project AWARE will offer a specialized version of the class in collaboration with Project LAUNCH this summer at the Student Success Summit for MCSD Special Education Teachers and Administrators.

GPA YOUTH MENTAL HEALTH FIRST AID TRAINING SNAPSHOT

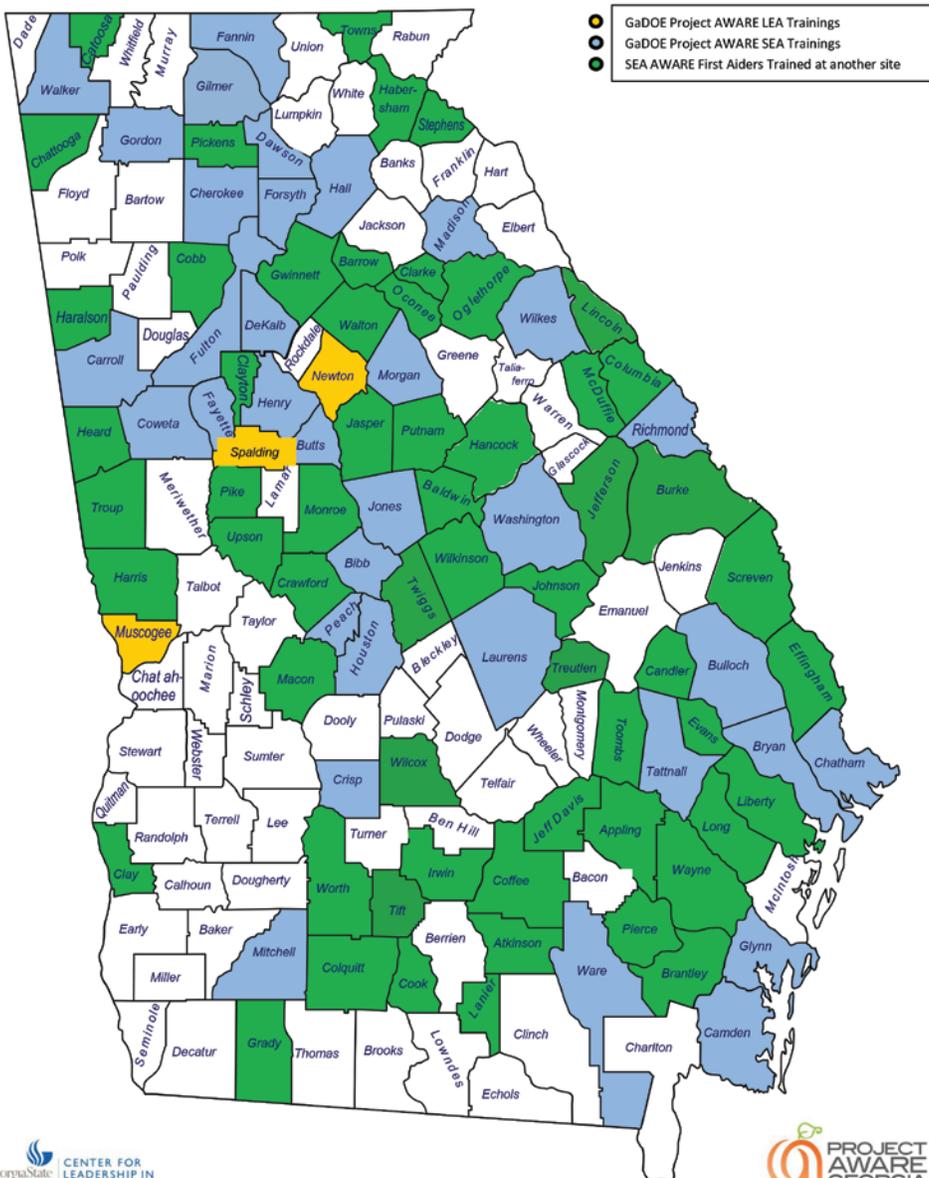
What is Youth Mental Health First Aid?

Youth Mental Health First Aid is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health

and human services workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis. Youth Mental Health First Aid is primarily designed for adults who regularly interact with young people. The course introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations. Topics covered include anxiety, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including AD/HD), and eating disorders.

Source: Accessed at <https://www.mentalhealthfirstaid.org/take-a-course/course-types/youth/>

Georgia Project AWARE YMHFA Trainings



GPA YMHFA Training By the Numbers

- 3,854 First Aiders trained from January 2015-May 2018
- 227 YMHFA trainings from January 2015-May 2018
- 19 SEA and LEA YMHFA trainers