Mental Health and Social and Emotional Learning: An Overview

In the United States, approximately 17 million young people have mental health disorders (Child Mind Institute, 2016). According to the Child Mind Institute, a nonprofit focusing on children’s mental health and learning disorders, students with mental health issues are “at risk for poor outcomes in school and in life” (Child Mind Institute, 2016). In fact, studies show that there is a bidirectional relationship between mental health and academic outcomes – in other words, mental health affects academic outcomes, and academic outcomes affect mental health (Suldo, Gormley, DuPaul, & Anderson-Butcher, 2014).

However, many students and their families are neither aware of nor able to access the resources they need to address mental health issues. There are more students in need of services than there are providers available (Hoagwood, et al., 2007). As a result, many schools have become “de facto mental health service centers,” despite the fact that they lack the staffing and resources to deliver coordinated and sustainable services for students and families experiencing need (Merrell, 2009).

Experts recommend that ideal school-based mental health services provide a well-coordinated variety of sustained, whole-school and individualized supports that focus on both prevention and intervention by engaging educators and families as agents of change (Reddy & Richardson, 2006; Zins et al. 2007). The Communities In Schools (CIS) model of Integrated Student Supports (ISS) is structured to provide and/or broker these types of supports. CIS site coordinators, who are at the core of the CIS model, have extensive experience in delivering and brokering schoolwide, group-level, and individualized supports. Site coordinators partner with school staff, community members, and families, working to integrate support services into the very fabric of school life, so that services are accessible to all and yet targeted towards the most high-need students. CIS is therefore well-poised to coordinate mental health services, addressing the needs of students across the country.

Social and Emotional Learning
Students for whom mental health is a barrier to academic achievement can develop new skills to better equip them for success in school and in life by engaging in social and emotional learning (Durlak, Weissberg, Dymnicki, Taylor, & Schellinger,
Social and emotional learning (SEL) “is the process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions” (Collaborative for Academic, Social, and Emotional Learning, 2016b).

The Collaborative for Academic, Social, and Emotional Learning (CASEL) breaks SEL down into five core competencies. The categories are:

1. **Self-awareness** – The ability to accurately recognize one’s emotions and thoughts and their influence on behavior
2. **Self-management** – The ability to regulate one’s emotions, thoughts, and behaviors effectively in different situations
3. **Social awareness** – The ability to take the perspective of and empathize with others from diverse backgrounds and cultures
4. **Relationship skills** – The ability to establish and maintain healthy and rewarding relationships with diverse individuals and groups
5. **Responsible decision making** – The ability to make constructive and respectful choices about personal behavior and social interactions (Collaborative for Academic, Social, and Emotional Learning, 2016b).

How can Social and Emotional Learning Help Students with Mental Health Issues Succeed?

Just as access to basic resources can help disadvantaged students address hunger and discomfort so that they can focus on learning, students with mental health issues can benefit from practicing SEL techniques. Practicing these techniques allows students to develop an array of coping mechanisms so that they can concentrate on academics, graduation, and a healthy and successful life. A meta-analysis of over a hundred studies on SEL intervention programs in schools indicated that there are many positive academic outcomes associated with SEL. These outcomes included increased connectedness to school, increased prosocial behaviors, higher achievement test performance, improved grades and attendance, decreased disruptive conduct, fewer suspensions and retentions, and increased graduation rates (Taylor & Dymnicki, 2007).

An example of an SEL practice is **mindfulness**, during which students exercise conscious awareness of the present moment. One study used MRI analysis to find that mindfulness was correlated with increased grey-matter density in the hippocampus, a part of the brain which is known to be important to learning, memory, self-awareness, compassion, and introspection (Burke & Hawkins, 2012).

Methodology

Given the impact of mental health on achievement, as well as developments in using SEL to address student mental health, Communities In Schools of the Lehigh Valley (CIS of the Lehigh Valley) and the CIS national office partnered on a Research to Practice (R2P) grant to study the issue in a local context. During the spring of 2016, members of the Research, Learning, and Accreditation (RLA) team visited CIS of the Lehigh Valley to learn about their comprehensive program to broker and provide services that address the mental health needs of students in Easton Area High School. In order to learn more about the program, RLA researchers reviewed documents and gathered data from interviews and focus groups with affiliate and site staff, school administrators, key partners, and students. Researchers then coded the data thematically to discover trends, promising practices, challenges/solutions in implementing the program, and next steps.

Program Snapshot: Responding to School Needs through Targeted Integrated Student Supports

History

Easton Area High School (EAHS), which has over 2,000 students from grades 9-12, is located in the Lehigh Valley region of eastern Pennsylvania. During interviews, school administration and affiliate and site staff identified mental health issues, including anxiety, depression, and self-injurious behaviors, as consistent problems in the student population at EAHS. Site-level needs assessments and student referrals confirmed the pervasiveness of these issues onsite.

CIS of the Lehigh Valley has been working with Easton Area School District since 1999. In 2013, after the district administration decided that a previous relationship with a mental health services organization at the high school was not successful, the Director of Pupil Services approached staff members from CIS of the Lehigh Valley to discuss the expansion of the CIS model at EAHS to include targeted supports for mental health. After a brainstorming session with school administrators and site staff, CIS of the Lehigh Valley staff members developed a plan to address the student body’s growing mental health needs. The plan included two key components. First, the affiliate would establish a team of three CIS staff members at the high school. Second, the affiliate would refine a process for student referrals. CIS

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1 For the purposes of this brief, “site staff” refers to CIS of the Lehigh Valley-employed staff members who work onsite. The terms “school staff” or “school administrators” refers to school employees.
of the Lehigh Valley staff members began to use a three-level framework to serve students, collaborating intensively with area partners to provide group and individualized supports. CIS of the Lehigh Valley served over 200 students just in the first year of implementing this plan, and the program has grown ever since.

Goals
Throughout interviews, affiliate and site staff, school administration, and partners made the overarching goal of the program clear: get students in class so that they can graduate. Affiliate and site staff and school administration mentioned preparing students for college and career as a secondary goal of the program. Additionally, affiliate staff and school administration thought that the program should improve school climate and build resiliency. One partner and the school administration felt that the program should generally support students in any way possible, and affiliate staff and one partner emphasized a caring relationship as a goal of the program. Interestingly, the goal of improving mental health was not mentioned frequently. This is perhaps because meeting students’ mental health needs is a means to an end rather than the ultimate goal. When healthy students are able to focus in class they are able to graduate and achieve in life.²

Structure

Staffing

In order to meet the needs of the students at EAHS, CIS of the Lehigh Valley decided to form a team of three staff members at the high school - a master's level Site Coordinator, a master’s level Support Specialist, and a bachelor’s level Support Specialist. The three CIS employees split up the work onsite. The bachelor’s level support specialist, who is in the process of getting her master’s degree in Human Services counseling, runs the anger management groups. She also oversees and coordinates the pregnant and parenting program, which is run through two outside providers. Additionally, she meets with 25-30 students for individualized case monitoring.³ The master’s level Support Specialist created and runs three support groups: one for grieving students and two for LGBTQ students. She also case manages 25-30 students. The master’s level site coordinator manages a caseload of 10-15 students and facilitates the Emotional Freedom Techniques group. However, most of this position’s job responsibilities focus on managing at a higher level, coordinating the various programs to ensure that students’ needs are met, and keeping key stakeholders in the loop regarding school and student progress.

Referrals
Anyone can refer a student to receive CIS services. Typically, referrals come from: the EAHS guidance department, which consists of about eight school counselors; the Child Study Team (CST), which consists of four guidance counselors and one grade-level principal who meet weekly to discuss issues, including which students might benefit from CIS services; and the Student Assistance Program (SAP), a team comprised of teachers and counselors from the school that is funded by the state of Pennsylvania to focus on substance abuse and mental health issues. If an EAHS student wants to self-refer, he or she usually goes to the guidance department⁴ at the school. Additionally, referrals can come from CIS of the Lehigh Valley employees at the alternative high school or the middle school that feeds into EAHS. Members of these teams and other school staff members use a standardized student referral form⁵ that lists different categories of observable mental health or behavioral issues; they check off the appropriate issues and leave any relevant notes on the form. The referral forms are then submitted to the CIS of the Lehigh Valley site coordinator.

In addition to managing the referrals that come through the usual referral process, CIS of the Lehigh Valley site staff act as consultants to the EAHS guidance counselors, particularly by conducting threat assessments. During this process, one of the master’s level CIS of the Lehigh Valley site staff members meets with a child who is in crisis, especially any student that a school staff member feels is at risk of hurting themselves or others. The CIS of the Lehigh Valley employee determines whether or not a child should be hospitalized or receive services, and then comes up with an action plan, which may involve empowering a student to consent to treatment.

The Framework for Supportive Services: Three Levels of Student-Focused Supports

CIS of the Lehigh Valley employees created a Framework for Supportive Services⁶ document to help guidance counselors refer students to different categories of supports. Though the plan is flexible and responsive to the needs of students, in general, the three categories are:

• Low-risk students, which occupy the green level, and are eligible for an individualized plan, monthly individual or group counseling, monthly work with a service provider, and quarterly assessments

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² Individual partner goals varied and included goals such as helping students on the path to self-discovery and expanding meditation to more schools, and maintaining abstinence from drug and alcohol.

³ A support specialist’s case load consists of 25-30 students at any given time throughout the year, with additional students moving on and off the case load. During the 2015-2016 school year, the team at EAHS case managed over 100 students.

⁴ As is the case with many high schools, EAHS’s guidance department focuses primarily on academics, attendance, standardized testing preparation, and college applications.

⁵ See the CIS Supportive Services Referral Form in the toolkit associated with this brief.

⁶ The Framework for Supportive Services is available in the toolkit associated with this brief.
• **Moderate-risk students, which occupy the yellow level**, and are eligible for an individualized plan, weekly or as-needed individual or group counseling, weekly or as-needed work with a service provider, and monthly assessments

• **High-risk students, which occupy the red level**, and are eligible for a risk assessment and a safety plan/contract to be shared with the CST, an individualized plan, weekly or as-needed individual or group counseling, weekly or as-needed work with a service provider, and monthly assessments

By using this framework, along with the [CIS Supportive Services Referral Form](#), to manage the referral process, CIS of the Lehigh Valley employees ensure that students receive appropriate services in a timely manner.

**Key Services: Fostering the Well-Being of All Students through Staff Leadership and External Partnerships**

The program to address mental health needs at EAHS offers a robust array of services through internal staffing support and external partnerships. Because there are three employees onsite, they are able to look at both the needs and trends in the school and align them with their particular skillsets, and create curriculum or broker services based on that alignment.

As this brief is focused on mental health services and service providers, we will not be mentioning all of the services that CIS provides or brokers. For addressing mental health issues, however, CIS of the Lehigh Valley site staff generally focus on providing individual and group counseling opportunities depending on the needs of the student; dosage and frequency of services also depend on student need. CIS of the Lehigh Valley site staff view their role as both creating a safe and caring environment (by meeting with students, being present for them, and keeping information confidential as appropriate) and as helping students navigate stressful transitions (such as transitions to different grade levels or transitions in housing, for example).

**Tier One Supports**

Tier 1 supports are services that are schoolwide and offered to all students regardless of risk. The most significant Tier 1 support is a schoolwide campaign during National Mental Health Awareness month each May. CIS of the Lehigh Valley site staff create cards with an inspirational quote and contact information for local emergency and mental health service providers; each student receives one of these cards. Additionally, the principal announces the campaign, statistics and pertinent information on mental health, and the availability of the cards during schoolwide announcements. The idea behind this campaign is to inform the student body about the availability of resources and to empower them to address their mental health needs.

**Tier Two Supports**

Student groups, a key component of service delivery at EAHS, fall into two categories: open groups, which are available to the general student population, and groups that are specifically for case-managed students. Though not all of the groups are focused on supporting mental health needs, CIS of the Lehigh Valley staff and external group leaders work with students whose life situations could lead to increased stress and the need for targeted social and emotional supports. Thus students in some of the groups mentioned below do not automatically qualify for mental health services, yet given the needs of the student population at EAHS, all of the groups are designed to foster positive coping and self-management skills and enhance student mental health. Additionally, students in these groups are referred to external mental health providers as necessary.

**Open Groups**

In the first year of implementation, 60 students were on a waitlist for case-managed services. The three site staff members formed several open student groups to address various needs that, if unaddressed, could lead to student mental health issues. During interviews, site and affiliate staff stated that these groups help ensure that all students – even students from the general population who are not being case-managed – put the tools into practice.

**Tier One** supports are school-wide preventative services that are available to all students, regardless of their risk for developing serious problems. Examples include presentations, health fairs, anti-violence campaigns, attendance initiatives, and motivational speakers.

**Tier Two** supports are targeted programs and sustained interventions provided for specific students over an extended period of time. These services are often provided in a group setting, to students with a shared need or goal, and include services such as one-on-one academic tutoring, linkages to medical resources, and behavioral intervention.

**Tier Three** supports are high-intensity, individualized services provided in a one-on-one setting to students with highly specified needs such as mental health counseling, mentoring, nutritionist consultations, and intensive dental work.

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7 As mentioned previously, the [CIS Supportive Services Referral Form](#) helps site staff to determine level of need.
have a connection to the school while they were waiting to be put on a CIS employee’s caseload.

**Meditation** group is an open group that is led by Lois Frey, a meditation instructor from the community who offers classes to both adults and youth and received the President’s Volunteer Service Award by the Volunteer Center of the Lehigh Valley, located in Bethlehem, PA, for the impactful work she does with CIS of the Lehigh Valley students. Every Friday, students from the school come to participate in a short, guided meditation session. Lois, who has been working in this capacity with EAHS students for three years, uses an emergent curriculum based on the feedback and observable attitudes and behaviors of students. She believes that meditation should be student-directed, and reminds students that this is about their own desires and not hers. This empowers students who are accustomed to receiving specific instructions from adults, giving them the ability to fine-tune their individual coping skills.

“Again this year, we have seen changes in the students. Some changes are more subtle and some changes are quite profound. For example, one student approached me after the session to ask how to meditate at home and then at the end of the school year thanked me and asked if I was coming back again in the Fall. She... smiled as she was telling me she tries to meditate daily. When she first came to meditation, this student didn’t smile and usually hung her head down. Her smile was a gift to me.”

– CIS of the Lehigh Valley Partner and Meditation Instructor

**Emotional freedom techniques** group is similar to the meditation group and is instructed by Jessica Baker, the master’s level site coordinator at EAHS. In this open group, students think of an emotion they want to release and tap gently on certain parts of the body to let that emotion go. This simple exercise can be practiced quietly during the school day in the bathroom or a quiet area of the school, or even at home. It is appealing especially because students choose the emotion that they want to let go and can subtly practice releasing it throughout the day as necessary.

**Groups for Case-Managed Students**

**Anger management** groups, which are led by Melissa Horvath, one of the EAHS Support Specialists, focus on topics such as coping skills and forgiveness. She runs two separate groups – one for building skills and one for students who are working on more ingrained anger management issues. One student who is part of this group reported that it helped to “express yourself and be able to cope and actually understand your feelings”.

**Art for relaxation** group is led by local art therapists to help students build self-esteem and manage their feelings of being overwhelmed or frustrated. CIS of the Lehigh Valley site staff started the program in part to work with students who tended toward self-harm. Site staff members collaborate with a local college professor who is head of the art therapy program to get art therapists to lead the group. Therapists base the curriculum off of the students’ needs after site staff speak with the therapists about the kind of issues that students are facing.

**Grief and loss** group is a year-long support group that meets every week and is facilitated by Elise Symia, one of the CIS of the Lehigh Valley support specialists. Students have the opportunity to share their stories, or simply listen to others, and learn about bereavement and the stages of grief and loss. CIS of the Lehigh Valley site staff report that this group is like a family, with powerful peer-to-peer sharing, balloon releases, and a healing garden in which group members plant donated trees, plants, and flowers to honor their loved ones.

**LGBTQ** groups are weekly, year-long support groups facilitated by one of the CIS of the Lehigh Valley support specialists. There are two active LGBTQ groups on EAHS’s campus. One is for students who consider themselves “out”, are presently in relationships, or are transgendered. Another is for students who are currently exploring their sexuality. Students in each group have the opportunity to share their experiences and support each other as they develop self-confidence and close personal relationships.

“Again this year, we have seen changes in the students. Some changes are more subtle and some changes are quite profound. For example, one student approached me after the session to ask how to meditate at home and then at the end of the school year thanked me and asked if I was coming back again in the Fall. She... smiled as she was telling me she tries to meditate daily. When she first came to meditation, this student didn’t smile and usually hung her head down. Her smile was a gift to me.”

– CIS of the Lehigh Valley Partner and Meditation Instructor

**Pregnant and parenting** groups are led by two outside facilitators. In our interview with Emigh Allison, from the Easton Area Neighborhood Center, she spoke about how her organization provides monthly educational presentations on topics such as personal finance, parenting skills, and child development. Emigh also conducts one-on-one or two-on-one counseling sessions with parents and home visits as needed. Family Connections, another local nonprofit, facilitates a four-week-long parenting group as well.

**Recovery Revolution** is an organization that offers substance abuse services to students and families in the Lehigh Valley region. The group, which is run by Courtney Lambert, meets twice per week, with
the goal of helping students maintain abstinence from drugs and alcohol, educating them about the disease of addiction and providing tools for recovery.

**Equine therapy** is an out-of-school time, eight-week program that occurs in the summer or fall and gives students an opportunity to develop leadership skills and trust. Students choose, build a relationship with, and care for a horse that they think represents who they are.

**Tier Three Services**

CIS of the Lehigh Valley works with their case-managed students to ensure that they are getting any services they need to address their needs. Staff members and CIS of the Lehigh Valley partners work weekly or multiple times per week with their highest-need students. Some moderate-intensity students are primarily served through the group and only check-in with their case manager monthly. CIS of the Lehigh Valley assesses case-managed students monthly to determine whether or not the services they are receiving are appropriate.

The programs in which students participate and services that students receive vary according to the intake assessments that CIS of the Lehigh Valley site staff conduct. As mentioned previously, CIS of the Lehigh Valley works with partners to offer one-on-one or two-on-one counseling services and home visits for pregnant and parenting students. Recovery Revolution, the substance abuse prevention organization, offers individual counseling in addition to the group sessions that they provide. In addition to the LGBTQ group, CIS of the Lehigh Valley site staff have been able to refer transgendered students to therapists who are trained in hormone therapy. Site staff also ensure that transgendered students get help if they are being harassed, and look for colleges and universities that are welcoming to transgender people. Valley Youth House, which is funded by Student Assistance Program dollars, sends in a therapist to speak with students who have a history of depression or other mental health issues. These are just some of the many providers with which CIS of the Lehigh Valley works to address their case-managed students’ needs.

Though CIS of the Lehigh Valley staff try to ensure that students receive services on campus, occasionally students will be referred to outside providers. During interviews, CIS of the Lehigh Valley staff members confirmed that it is important for students to work with other professionals beside CIS of the Lehigh Valley employees. If a student needs to be referred to an outside provider, site staff will work with the student to ensure that payment and transportation are not limiting factors.

**Tools and Tips for a Successful Program**

CIS of the Lehigh Valley site and affiliate staff use several tools and documents to ensure the success of the EAHS program. One important aspect of running a comprehensive program such as this is the collection of accurate data on student progress. As such, CIS of the Lehigh Valley staff members use a Student Stress Inventory. Staff members have students fill out the inventory at the beginning of each group to establish baseline data, at the end of the group for shorter programs, and at various intervals during the course of the year for year-long groups.\(^8\) Staff members designed the tool to assess how students are coping with stress in their lives and to review whether or not students are meeting stated goals.

Progress reports give information to CIS of the Lehigh Valley staff members on the development of the students they serve. Courtney from Recovery Revolution works hand-in-hand with CIS of the Lehigh Valley site staff to organize student information at intake. She then takes careful notes and gives CIS of the Lehigh Valley staff members updates as students work with her. During her interview, Emigh, the pregnant and parenting student counselor, mentioned using case notes and tracking the number of times she interacts with each student. Both Lois, the meditation instructor, and Courtney, mention student observations as a key data point as well. This can be as simple as watching to see whether or not a student is more fidgety than usual during meditation, as Lois mentioned during her interview, or checking in to see if a student who is recovering from drug and alcohol addiction is starting to take better care of his or her hygiene, as Courtney mentioned during her interview.

Each week, CIS of the Lehigh Valley site staff members send school administration and guidance counselors information on the students who participate in group activities, along with any pertinent notes. Then every month, staff members send the following information to school administration and guidance counselors: the number of students who are being actively case-managed and participating in various groups and programs, who has been referred by whom and when, who is on waiting lists, and who has been discharged and when/why. CIS of the Lehigh Valley employees emphasized that there is a constant exchange of information between themselves, the school, and the partners with whom they work.

All of this information, along with information from the **Student Stress Inventory** and CISDM, feeds into a comprehensive end-of-year (EOY) report that CIS of the Lehigh Valley employees give to the school board each year.

\(^8\) In addition to the **Student Stress Inventory** itself, CIS of the Lehigh Valley staff members consult a document called Administering and Analyzing the **Student Stress Inventory** to guide their use of the tool. Both of these items are included in the toolkit associated with this research brief.
Program Implementation: Challenges and Solutions

Whenever an organization implements a comprehensive program, there are opportunities to learn lessons and grow. Though stakeholders did mention a few areas of improvement during our interviews with CIS of the Lehigh Valley staff members, partners, and EAHS staff and students, it is worthy to note that partners did not mention any program management issues.

The challenge mentioned most often actually had to do with serving the student population. One of the partners and multiple students mentioned that it is initially hard for students to admit they need help and to open up to receiving services from providers. There are two main ways that CIS of the Lehigh Valley staff members are working to address this. First, students mentioned that site staff members consistently encouraged them to be communicative and “outgoing”. CIS of the Lehigh Valley staff members give students opportunities to communicate their problems verbally, but they encourage students to write about their feelings as another coping strategy. Second, as mentioned during one of the partner interviews, educating students about their particular situation — and the health risks of not addressing it — helps students to gradually be more forthcoming in describing the issues they face to service providers.

CIS of the Lehigh Valley faces another problem that is all too common in schools: the sheer number of students who need mental health services and cannot be put on a CIS of the Lehigh Valley staff member’s active caseload immediately. This issue was mentioned during interviews and focus groups with affiliate staff, principals, and students — in other words, most of the stakeholders interviewed seemed well aware of this issue. Interviewees mentioned an obvious way of solving this problem — hire more staff. However, with limited resources, CIS of the Lehigh Valley staff members have already worked on this problem by having an honest and solution-focused dialogue with school administration, brainstorming ideas such as brokering in certain services from county providers. Additionally, CIS of the Lehigh Valley site staff members email school administration and counselors with appropriate data points, including the CIS of the Lehigh Valley provider list, the EAHS active caseload, the EAHS waiting list, as well as EAHS students with high-risk behaviors. CIS of the Lehigh Valley site staff members share this data not only to demonstrate the intensive level of services provided, but also to show that students who are on waitlists are receiving at least some initial level of support — such as student groups — even if they are not directly on one of the three staff member’s caseloads. Additionally, in these emails, site staff encourage school administration and guidance personnel to discuss the high-risk students and their progress during their CST team meetings. This helps ensure that guidance is still involved in student well-being.

The final problem that stakeholders mentioned is related to the large number of students that CIS of the Lehigh Valley site staff members serve. As mentioned above, the Framework for Supportive Services helps manage the many referrals that CIS of the Lehigh Valley receives. Additionally, staff members are working to fine-tune their strategy for exiting students from the program. First, they are currently working with students and guidance counselors to develop a healthy sense of independence and empowerment. Site coordinators create goal-specific treatment plans for students who are frequent visitors for the same issues; they share this information with guidance counselors, who are then aware that students have been encouraged to work diligently on a particular issue before they seek help again for it. Site coordinators also let students know when they should be focusing on sticking to their regularly scheduled school day, rather than trying to visit the CIS room. Next, students who might have emotional difficulty with the concept of being “discharged” from the program, but whose mental health issues are largely resolved, are put in “case monitoring” status. In this status, students come as-needed for a once per month check-in, but are not receiving any of

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<tr>
<th>Challenges</th>
<th>Solutions</th>
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<tr>
<td>Students struggle to open up and admit need for help</td>
<td>• Encouragement from site staff members</td>
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<td></td>
<td>• Educating students about their particular situations and the risks of not addressing them</td>
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<td>The number of students in need of mental health services</td>
<td>• Collaborating with school administration to find appropriate brokers for services</td>
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<td>• Sharing relevant data with other school support staff</td>
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<td>• Leveraging the power of student groups</td>
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<td>A large CIS student caseload</td>
<td>• Creating the Framework for Supportive Services to manage referrals</td>
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<td>• Developing a comprehensive exit strategy for students who are no longer in need of services</td>
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the regular services mentioned in the Framework for Supportive Services. Finally, CIS of the Lehigh Valley staff members are considering developing a leadership and mentoring program in which students who are ready to transition out of the program are able to still be part of the CIS of the Lehigh Valley “family”, but are offering their talents in a new and productive way.

**Long-Term Results**

During interviews, RLA team members asked stakeholders to describe how they know that the program at EAHS was having an impact on students. Stakeholders discussed individual student and school-level progress indicators as well as success stories.

**Individual Student and School-Level Progress Indicators**

CIS of the Lehigh Valley staff members and partners look for several different indicators of student success, but most of it can be summarized with “ABC” – attendance, behavior, and coursework. Through their relationships with EAHS faculty and workgroups (SAP, CST), site staff are aware of baseline student data. As students in the program progress, site staff check to see whether, for example, students are attending class more often or receiving fewer discipline referrals. Both CIS of the Lehigh Valley staff members and partners also make note of observable student behaviors, looking to see whether students’ symptoms are improving. The data collected through student observations varies for different students. For some, this means looking to see whether they are able to verbalize their emotions rather than acting up in class. For others, it means looking to see whether they are able to independently manage their day-to-day stresses, rather than seeking constant support from site coordinators or service providers. CIS of the Lehigh Valley staff members and partners also look for student hygiene, self-confidence, aspirations, and group participation.

At the school level, CIS of the Lehigh Valley staff members look at aggregate attendance, behavior (including the number of discipline referrals and suspensions), and coursework, as well as the number of services being offered, the students being served, graduation rates, and how many students in the program are meeting their goals.

**Describing Impact: Success Stories from the Easton Area High School Program**

School and CIS of the Lehigh Valley staff members, partners, and students all shared success stories from the program at EAHS. Many stakeholders mentioned that CIS of the Lehigh Valley had worked to create a safe place and a sense of community for students on campus. Students reported feeling that they were part of a group and that they were able to connect with students who were facing similar issues. Partners and school staff members said that students felt more at home in school and more comfortable being open and honest with adults. Principals, partners, and CIS of the Lehigh Valley staff members also reported satisfaction with improvements in dropout rates and the fulfillment of seeing students who may not have graduated without the program being able to walk across the stage to receive their diplomas. Stakeholders also mentioned the importance of partnerships; CIS of the Lehigh Valley has facilitated positive working relationships with outside support providers as well as the staff members within EAHS, who feel comfortable approaching site staff with student needs. Principals and site staff members also mentioned the success of the process of serving students, stating that CIS of the Lehigh Valley facilitates everything from intake to service provision to creating a broader sense of community within the school. Students and partners reported several areas of impact on students, including improved communication skills, development of self-discovery, self-respect, and positive coping and leadership skills. These themes are in alignment with the five core competencies of SEL mentioned earlier in this brief: self-awareness, self-management, social awareness, relationship skills, and responsible decision-making. As one student put it, “They helped me find what I love about myself.”

**Next Steps**

Partners, school staff, and students responded in incredibly positive ways when asked about what else CIS of the Lehigh Valley could do to address the mental health needs of its students, referencing all of the work that CIS of the Lehigh Valley has already done. Stakeholders had a few additional suggestions about next steps for the program at EAHS. First, all stakeholder groups wanted to see the program continue to thrive and grow the program in some way – through bringing in more counselors (including a male counselor), advocacy and support for mental health services from a wider breadth of caring adults,
and providing or brokering further services (such as a support group for students of incarcerated parents, an in-home truancy counselor, a youth empowerment program, a CIS secretary to manage all of the student drop-ins, and partnering with a local clinic with pediatricians). Second, during the CIS staff and both principal interviews, interviewees mentioned the need to update the exit strategy for students receiving CIS services. This will allow students who have successfully improved in their target areas to move independently forward, while ensuring that students with urgent needs are receiving appropriate services.

**Tool Development**

When asked about other tools that were needed to implement and evaluate the program, stakeholders focused on data, expressing the desire to see: comprehensive pre- and post-tests for partners; tools to measure trauma, SEL, and school climate; student data post-graduation; and changes within CISDM to facilitate data entry and reporting.

**Conclusion**

CIS affiliates across the country can help schools address student mental health. By using social and emotional supports, including whole-school, group, and individual services, CIS of the Lehigh Valley has been able to address student mental health in a holistic way at EAHS. Stakeholders interviewed by RLA staff members indicated that the program is necessary and impactful, and they expressed a desire that it continue to grow and develop, ensuring that students in the Lehigh Valley are empowered to succeed in school and achieve in life.

**Further Resources**

UCLA’s [Center for Mental Health in Schools](https://www.ucla.edu/center-for-mental-health-in-schools) has an overview of mental health in schools, a resource center, links to hot topics, and more. They also have a practitioner listserv you can sign up for to receive updates on current pertinent topics.

The Child Mind Institute published a recent [report](https://childmind.org) on children’s mental health, which makes a clear case for addressing mental health in schools in an integrated way. The report also cites recent relevant statistics about children’s mental health in the United States.

[This article](https://www.gse.harvard.edu) from the Harvard Graduate School of Education gives recommendations for developing comprehensive social and emotional learning programs. The authors state that a whole-school approach is effective. Social and emotional learning can be woven into every part of a school, benefitting both students and adults.

**Toolkit Items**

1. Framework for Supportive Services
2. CIS Supportive Services Referral Form
3. CIS Specialized Group Referral Form
4. Elementary School Student Stress Inventory
5. Middle and High School Student Stress Inventory
6. Administering and Analyzing the Student Stress Inventory
References


What Do You Think?

Do you have quick comments or questions on this brief? Click here and let us know.