

# The East Lansing Mental Health Advisory Board Committee

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# History of the MHAB

- Initiated in 2016-2017, currently in the 6<sup>th</sup> year
- Introduced by the East Lansing Board of Education (BOE) due to many factors
  - Two suicides at the high school (within a month)
  - Community members and school professionals realized more guidance needed
  - Some controversial programming occurred
  - Available school board models for involving consultants from the community
- Designed to be advisory to the BOE
- Governed by a set of by-laws, created by the BOE
- Jen Novello, LMSW served as chair from 2016 – 2020

## Purpose of the MHAB

- The MHAB reviews district programming that addresses social-emotional well-being.
- The MHAB may make recommendations to the BOE, if they see a need for providing professional advice regarding additional programming to address students' social-emotional well-being.
- The MHAB may make recommendations to the BOE addressing other issues pertinent to student mental health, including preventative mental health programming.
- The MHAB may be asked by the BOE to vet programming being considered for use in the district that may impact students' mental health and make recommendations to the BOE, concerning the analysis of the MHAB of said programming.

# MHAB Vetting Guidelines

- What is the intended purpose of program?
- What is the available evidence/research to support the program (e.g., best practices)?
- Has the program been utilized in other districts and to what success?
- How feasible will implementation of the program be?
- What is the cost – financial and other?
- What “tier” for students or staff will the program address?
- How does this program compare with reasonable alternatives?
- How will the program be evaluated?

# Structure of the MHAB

- *Membership (appointed by the BOE)*
  - Includes students, teachers, parents, administration, community members
  - Invitations extended to principals, social workers/counselors
  - Majority are mental health professionals
  - No more than 20 members
  - Call for applications each summer
- *Meetings*
  - 1-2 times per month
  - Subcommittee work in between
- *Subcommittees*
  - Building level subcommittees
  - Community outreach
- *BOE*
  - *Creating policy to drive action (e.g, new hires)*
  - *Annual presentation*

## Some Past Activities & Accomplishments of the MHAB

- Suicide Prevention Policy
- TRAILS
- Staff Professional Development
  - E.g., 4 part trauma series for elementary school
- Formal recommendation to the BOE to hire district level mental health and wellness coordinator
- Trojan Mental Health Matters: <https://trojanmentalhealthmatters.org>
- Collaborations with CMH
- Assisting with district communication
  - Providing resources
  - Increasing transparency
  - Trauma-informed/reducing anxiety
- Mood meters during virtual learning
- District-wide Mental Health Awareness Day May 2021



### TRAILS Improves Access

Nearly 50% of all adolescents are impacted by mental illness, yet only 20% of those ever receive treatment. TRAILS promotes equitable access to youth mental health services through sustainable, cost-effective, school-based solutions. Participating schools receive training and ongoing support to implement school-appropriate mental health programs grounded in cognitive behavioral therapy (CBT) and mindfulness — techniques proven to reduce symptoms of anxiety and depression.

### Using a 3-Tiered Approach

Programming to meet the mental health care needs of all students.

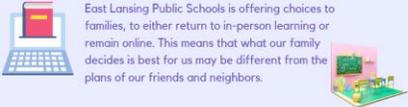
<p><b>TIER 1</b> <b>Universal Education and Awareness</b> For all students and staff Social and emotional learning (SEL) curriculum for the classroom, and self-care programming for staff, to promote mental health and wellness and build resiliency among students and staff.</p>	<p><b>TIER 2</b> <b>Early Intervention</b> For students impacted by a mental health concern Skill-building sessions grounded in CBT and mindfulness and designed to equip students with tools they can use to reduce their symptoms of anxiety and depression.</p>	<p><b>TIER 3</b> <b>Suicide Risk Management</b> For students in crisis Care coordination among schools, families, community mental health agencies, and hospitals through utilization of the TRAILS Suicide Risk Management Protocol.</p>
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## Tips for Discussing ELPS Transitions with your Children

The Mental Health Advisory Committee (Elementary Subcommittee) created the following tips to aid parents in talking with your children about upcoming transitions. Whether your child is remaining online or transitioning to in-person learning, we hope you find this useful. Please reach out to building staff with questions or concerns.

### Every Family is Making the Choice that is Best for them.

East Lansing Public Schools is offering choices to families, to either return to in-person learning or remain online. This means that what our family decides is best for us may be different from the plans of our friends and neighbors.



### School Buildings will be Safe

For those returning in-person, principals, teachers, and other responsible adults have been working really hard to make sure that the buildings provide safe places for students to learn. You will learn new school rules and plans for helping to keep everyone safe.



### Some Things will be Different

You may have a new teacher and new classmates. Your new teacher may do things a little differently. Soon, you and your new teacher and new friends will get to know each other well! For those remaining online, you will now have more live instruction on Fridays. For those returning, school may seem different then you remember it be. Different and new can be hard.

### Provide Information & Encourage Questions

Let children know the details of the plans and schedules for the day, as well as the new procedures (for in-person). Helping children visualize the changes and walking through the day will reduce anxiety. Encourage questions from your children and seek information from building staff if you don't know the answer.



### Support all kinds of Emotions

Even though it is hard to see children upset, try not to downplay or dismiss their negative feelings (e.g. anxiety, disappointment, confusion). Instead, try engaging children in conversation about their feelings.



### Resources for Parents:

<https://theconversation.com/how-to-help-your-child-cope-with-the-transition-back-to-school-during-covid-19-144530>

<https://childmind.org/article/back-to-school-anxiety-during-covid/>

<https://www.unicef.org/coronavirus/supporting-your-childs-mental-health-during-covid-19-school-return>

# COVID-19 Impact on the MHAB

# AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health

October, 2021

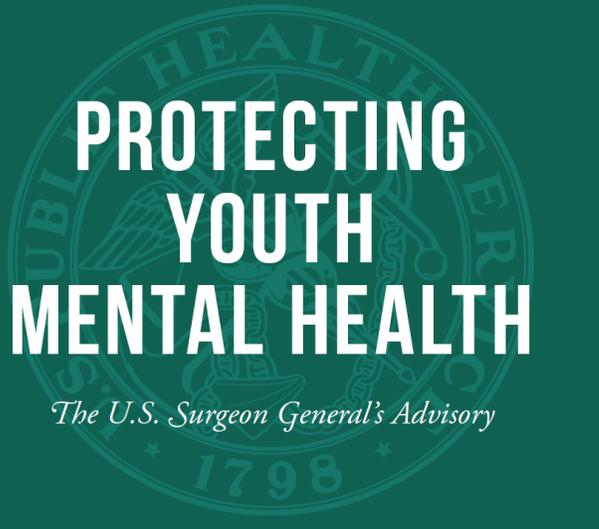


AMERICAN ACADEMY OF  
CHILD & ADOLESCENT  
PSYCHIATRY  
WWW.AACAP.ORG



- Crisis in child mental health is related to COVID-19 stress and the struggle for racial justice
- Significant increases in ED for mental health emergencies
- More than 140,000 children lost a primary or second caregiver, with youth of color disproportionality impacted
- “Soaring rates” of depression, anxiety, trauma, loneliness, and suicidality
- Advocate for: increased federal funding, improved access to technology, accessible and affordable school-based mental health care and integrated mental health care (primary care), suicide prevention programs, community-based systems of care, trauma-informed care, and much more....

## WHAT EDUCATORS, SCHOOL STAFF, AND SCHOOL DISTRICTS CAN DO



# PROTECTING YOUTH MENTAL HEALTH

*The U.S. Surgeon General's Advisory*

## Current & Future Work of the MHAB

- Create positive, safe, and affirming school environments.
- Expand social emotional learning programs and other evidence-based approaches that promote healthy development
- Learn how to recognize signs of changes in and mental and physical health among students, including trauma and behavior change. Take appropriate action when needed.
- Provide a continuum of supports to meet student mental health needs, including evidence-based prevention practices and trauma-informed mental health care.
- Expand the school-based mental health workforce.
- Support the mental health of all school personnel.
- Promote enrolling and retraining eligible children in Medicaid, CHIP, or a marketplace plan so that children have health coverage that includes behavioral health services.
- Protect and prioritize students with higher needs and those at higher risk of mental health challenges.

