Implementation of Evidence-Based Programs In Community-Based Settings

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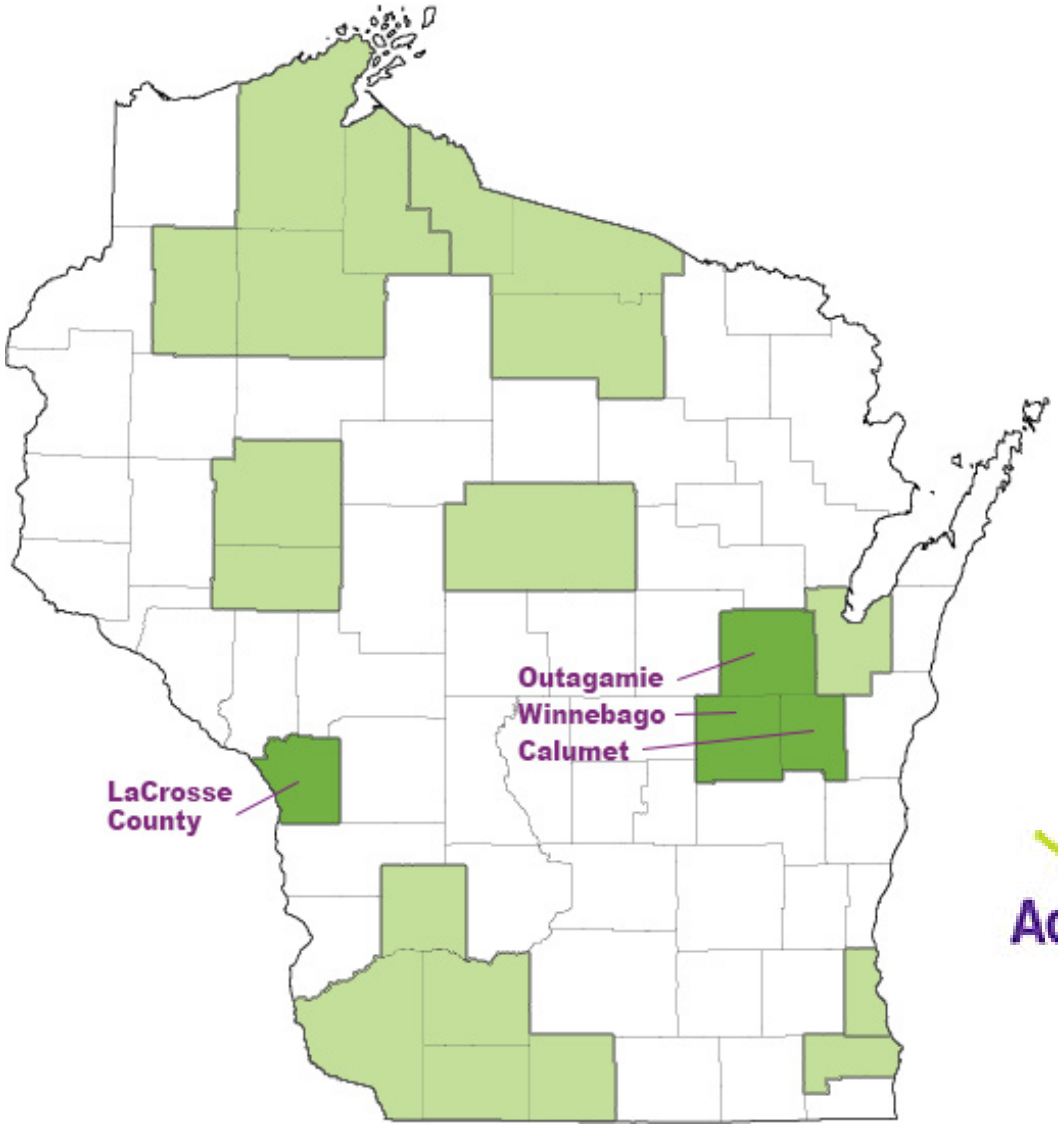
Better Together

The Connection
N.E.W. MENTAL HEALTH

The Samaritan Counseling Center of the Fox Valley, Inc.



A Tale of Two Communities: Working to Reduce Rates of Teen Depression

Advancing Behavioral Health
WISCONSIN

SOURCES OF STRENGTH

We use the power of peer-led social networks to positively change norms and cultures.

Character Strong

What is Collective Impact?

As defined by FSG (the nonprofit consulting firm that invented the term)

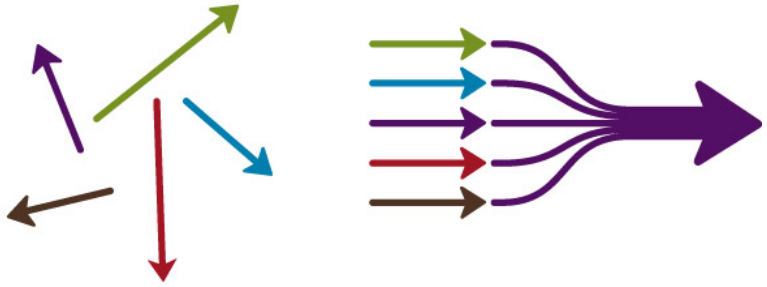
"Collective Impact is the commitment of a group of actors from different sectors to a common agenda for solving a complex social problem."

Achieving Large-Scale Change through Collective Impact Involves Five Key Elements

Common Agenda	• Common understanding of the problem • Shared vision for change
Shared Measurement	• Collecting data and measuring results • Focus on performance management • Shared accountability
Mutually Reinforcing Activities	• Differentiated approaches • Coordination through joint plan of action
Continuous Communication	• Consistent and open communication • Focus on building trust
Backbone Support	• Separate organization(s) with staff • Resources and skills to convene and coordinate participating organizations

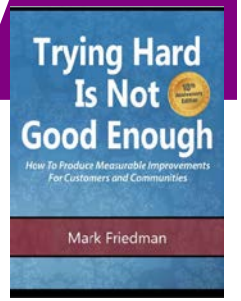
Holy Smokes! This is what we do!

Source: Channeling Change: Making Collective Impact Work, 2012; FSG Interviews and Analysis



BEFORE AFTER

Results-Based Accountablity

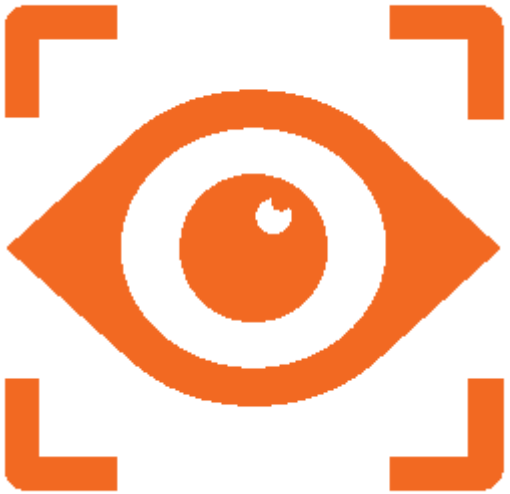


1. Start with ends, work backwards to means

2. Data-driven, transparent decision-making

3. Is designed to work with programs and populations

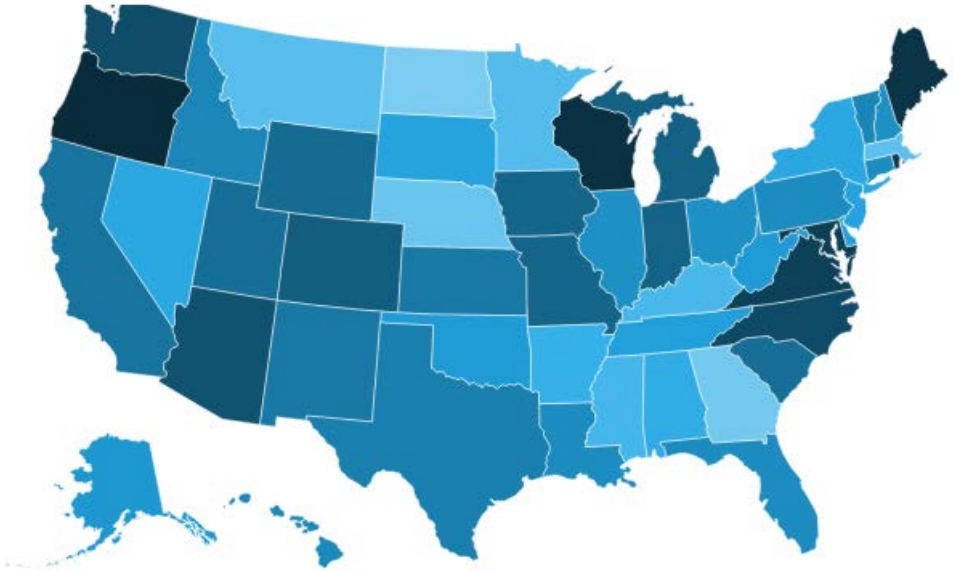
4. It aligns with any other process, and gives us a common language



FOCUS

Choose which problem(s) to focus on.

Youth with severe depression:

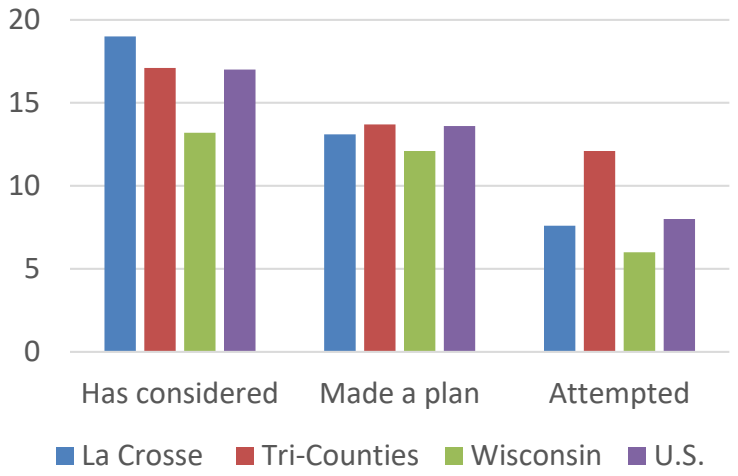


Wisconsin: 10.5%
United States: 7%

Depression is the

No.1

risk factor for suicide



20%

of teens will
experience depression

Mental health disorders start early:

TARGET

Identify goals, target population, and desired outcomes.

The Wisconsin Youth Risk Behavior Survey (YRBS)
"Sad and Hopeless":

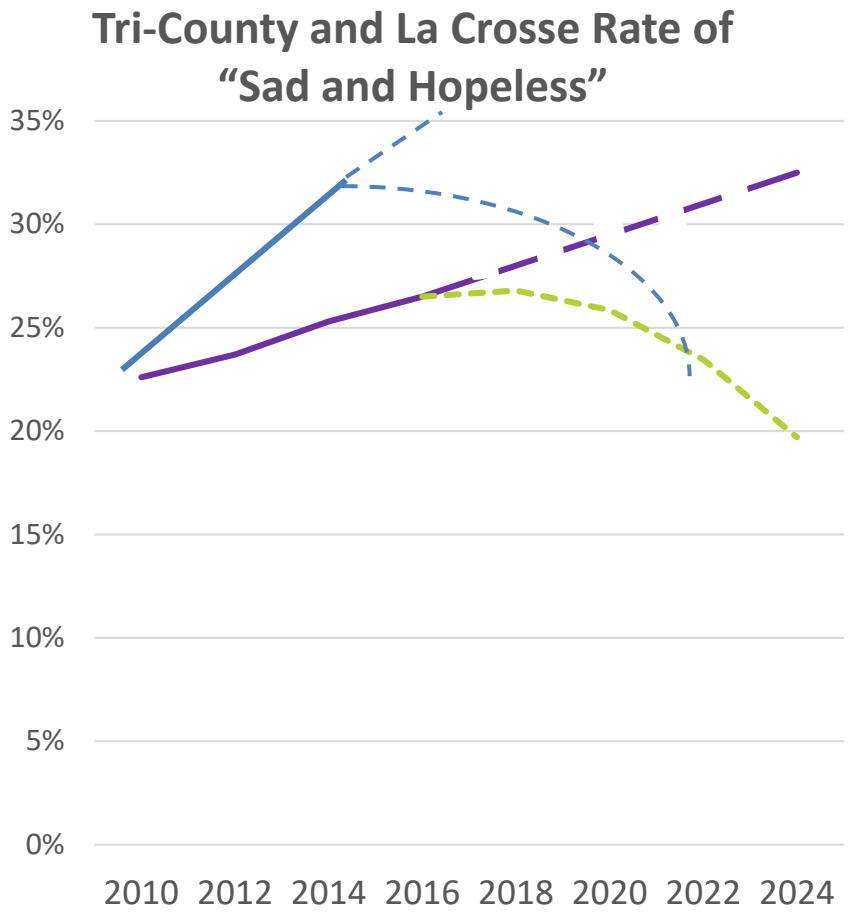
"During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?"

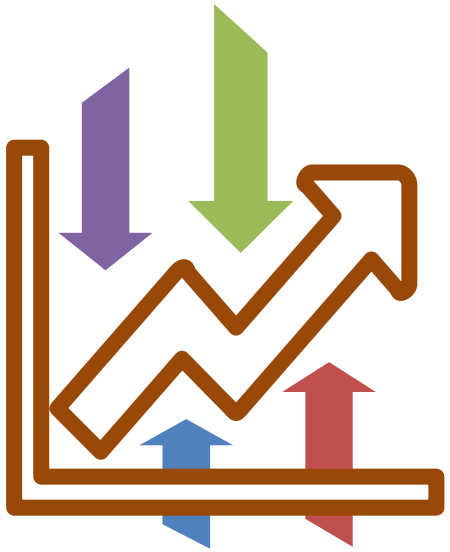
The Wisconsin Youth Risk Behavior Survey (YRBS)
Suicided-related behaviors

30. "During the past 12 months, did you ever seriously consider attempting suicide?"

31. "During the past 12 months, did you make a plan about how you would attempt suicide?"

32. "During the past 12 months, how many times did you actually attempt suicide?"





To understand the **story behind the curve**, we looked for relationships in the YRBS data while also looking to peer-reviewed journal articles for proven correlations…

Sad and hopeless correlated with:

- Gender (sub-pop, more girls than boys)
- L,G,B,T,Q (sub-pop)
- Not feeling safe at school
- Self-harm
- Suicide-related behaviors (consider, plan, attempt)
- Being bullied - at school and electronically
- Substance use and abuse
- Risky sexual behavior
- Excessive screen time
- Poor mental health days
- Poor body image (trying to lose weight)
- Lack of physical activity
- Perceived violence at school
- Not having a trusted adult at school
- Not feeling connected at school
- Poor sleep (too little)
- Lack of family support

Factor Analysis

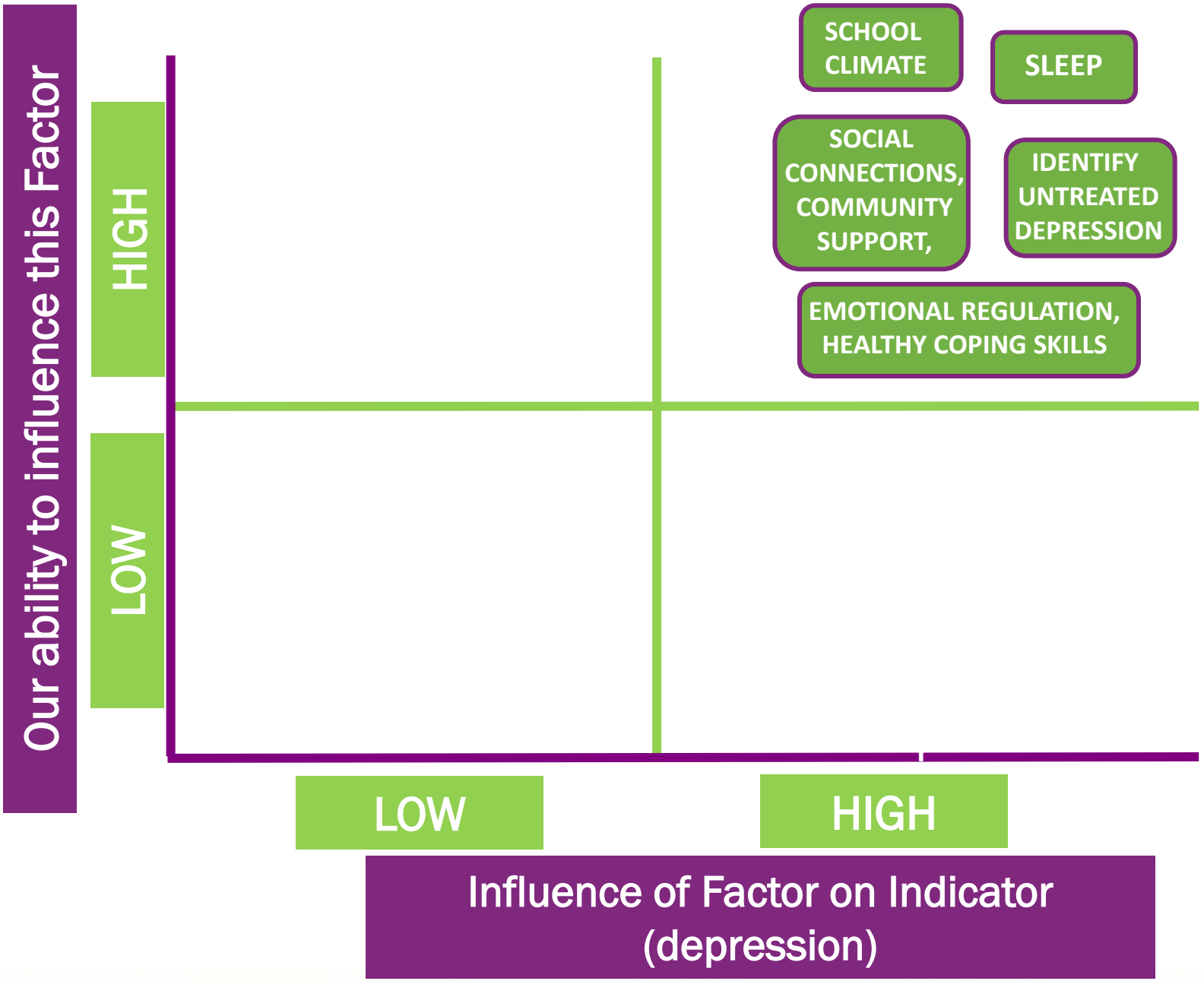
What data/research will I need to validate these factors and identify others?

"Risk Factors" – push indicator up

- Sexual preference (LGBTQ)
- Bullying (at school, electronically)
- Not feeling safe at school
- Substance use and abuse
- Poor body image
- *Genetic predisposition*
- *Generational transmission*

"Protective Factors" – push indicator down

- Adequate amount of sleep
- Regular physical activity
- Self-regulation skills
- Loving and engaged caregiver
- Atmosphere of school environment:
  1. Trusted adult at school
  2. Supportive teacher-student relationships
  3. Sense of belonging at school


Our ability to influence this Factor
HIGH
LOW
SCHOOL CLIMATE
SLEEP
SOCIAL CONNECTIONS, COMMUNITY SUPPORT,
IDENTIFY UNTREATED DEPRESSION
EMOTIONAL REGULATION, HEALTHY COPING SKILLS
LOW
HIGH
Influence of Factor on Indicator (depression)

Survey Your Community

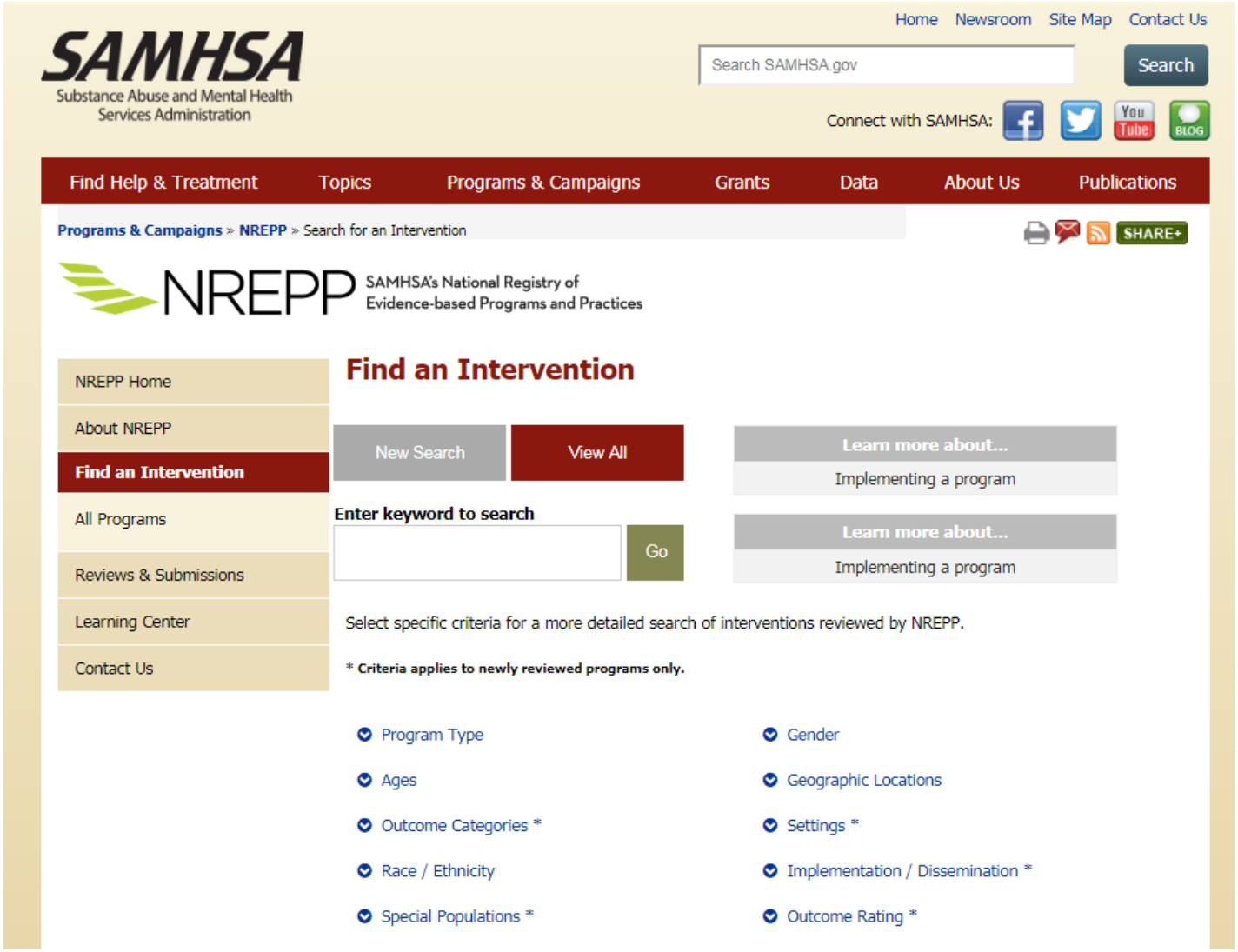
- What is your community's mental health literacy?
- What programs are already in place?
- What are other agencies/organizations already doing?
- What is the existing awareness/public will around improving community behavioral health?

Activity:

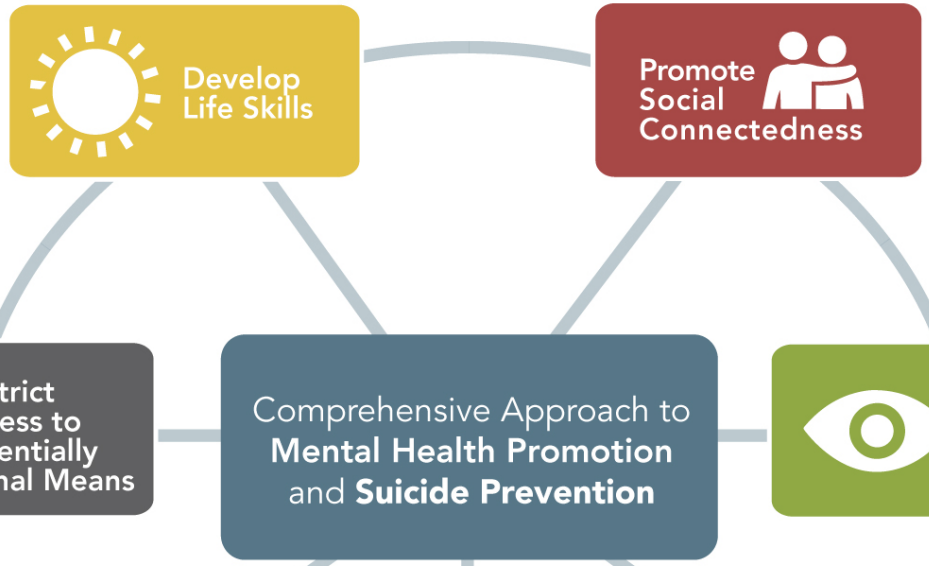
What is your community's mental health literacy?

ADOPT

Find existing programs and best practices worth adopting.

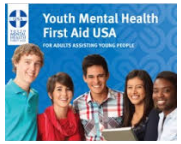

SAMHSA
Substance Abuse and Mental Health Services Administration
Home Newsroom Site Map Contact Us
Search SAMHSA.gov
Search
Connect with SAMHSA:
Find Help & Treatment
Topics
Programs & Campaigns
Grants
Data
About Us
Publications
Programs & Campaigns » NREPP » Search for an Intervention
SHARE+
NREPP
SAMHSA's National Registry of Evidence-based Programs and Practices
NREPP Home
About NREPP
Find an Intervention
All Programs
Reviews & Submissions
Learning Center
Contact Us
Find an Intervention
New Search
View All
Enter keyword to search
Go
Learn more about...
Implementing a program
Learn more about...
Implementing a program
Select specific criteria for a more detailed search of interventions reviewed by NREPP.
* Criteria applies to newly reviewed programs only.
Program Type
Ages
Outcome Categories *
Race / Ethnicity
Special Populations *
Gender
Geographic Locations
Settings *
Implementation / Dissemination *
Outcome Rating *

Develop Life Skills
Promote Social Connectedness
Restrict Access to Potentially Lethal Means
Comprehensive Approach to Mental Health Promotion and Suicide Prevention
Identify Students at Risk
Follow Crisis Management Procedures
Increase Help-seeking Behavior
Provide Mental Health Services
N
W
E
S



QPR For Suicide Prevention

Connected Community Wellness Screen
BWell2Excel

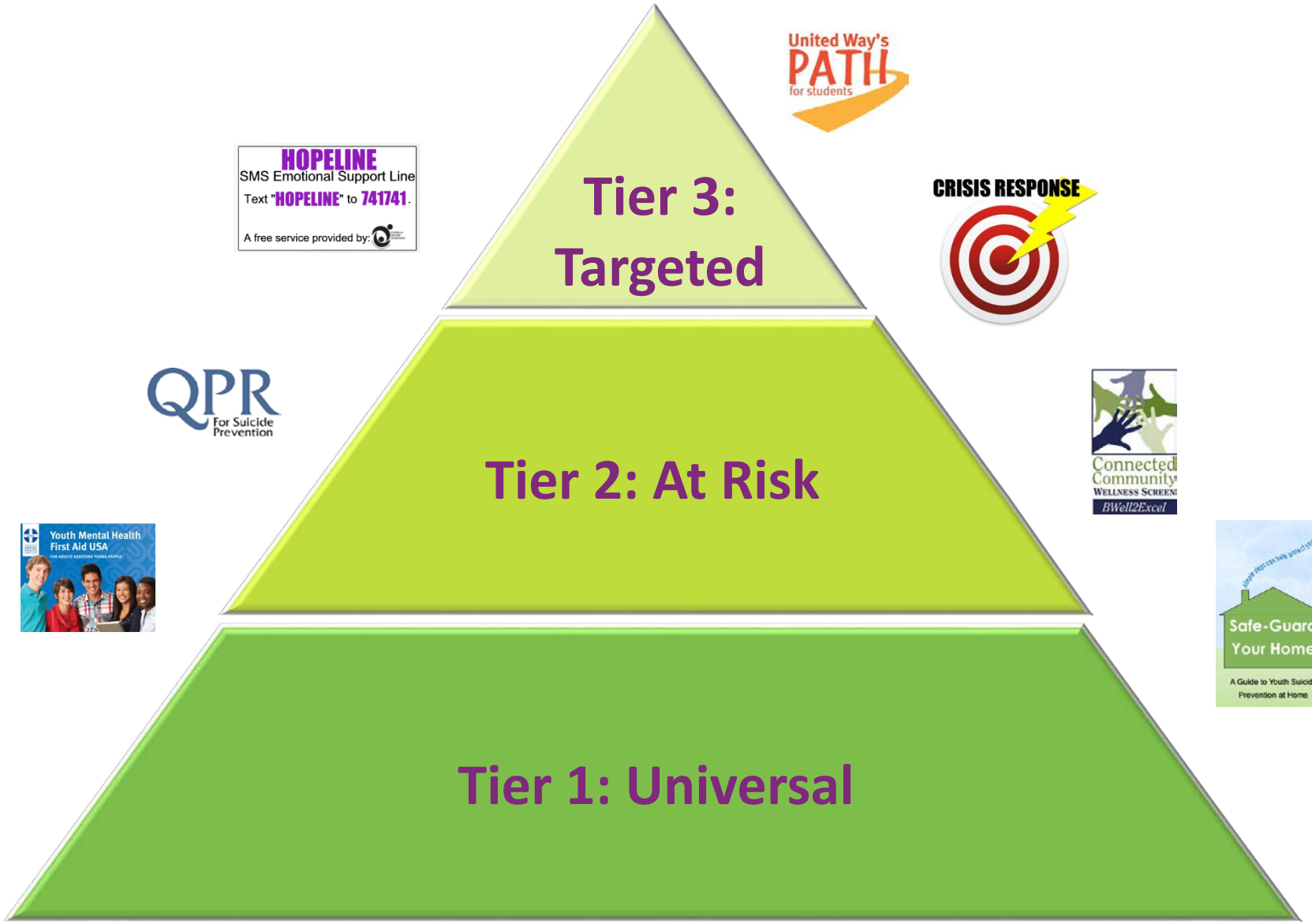


HOPELINE
SMS Emotional Support Line
Text "HOPELINE" to 741741.
A free service provided by:

CRISIS RESPONSE

engage.educate.empower.

United Way's PATH for students


United Way's PATH for students
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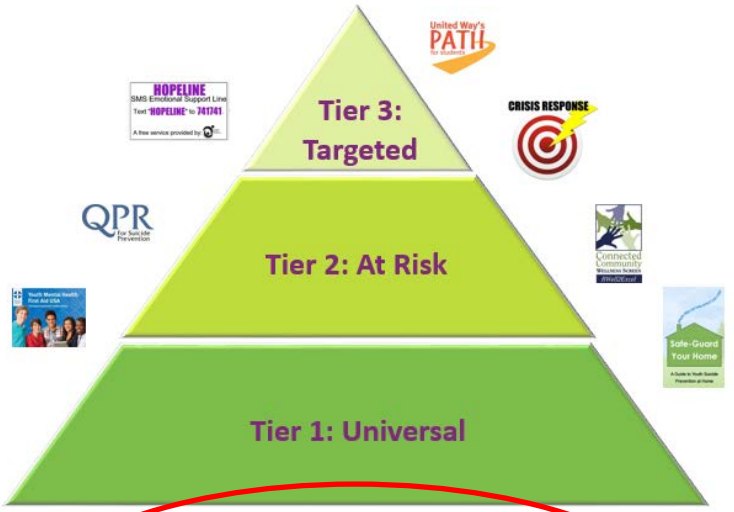
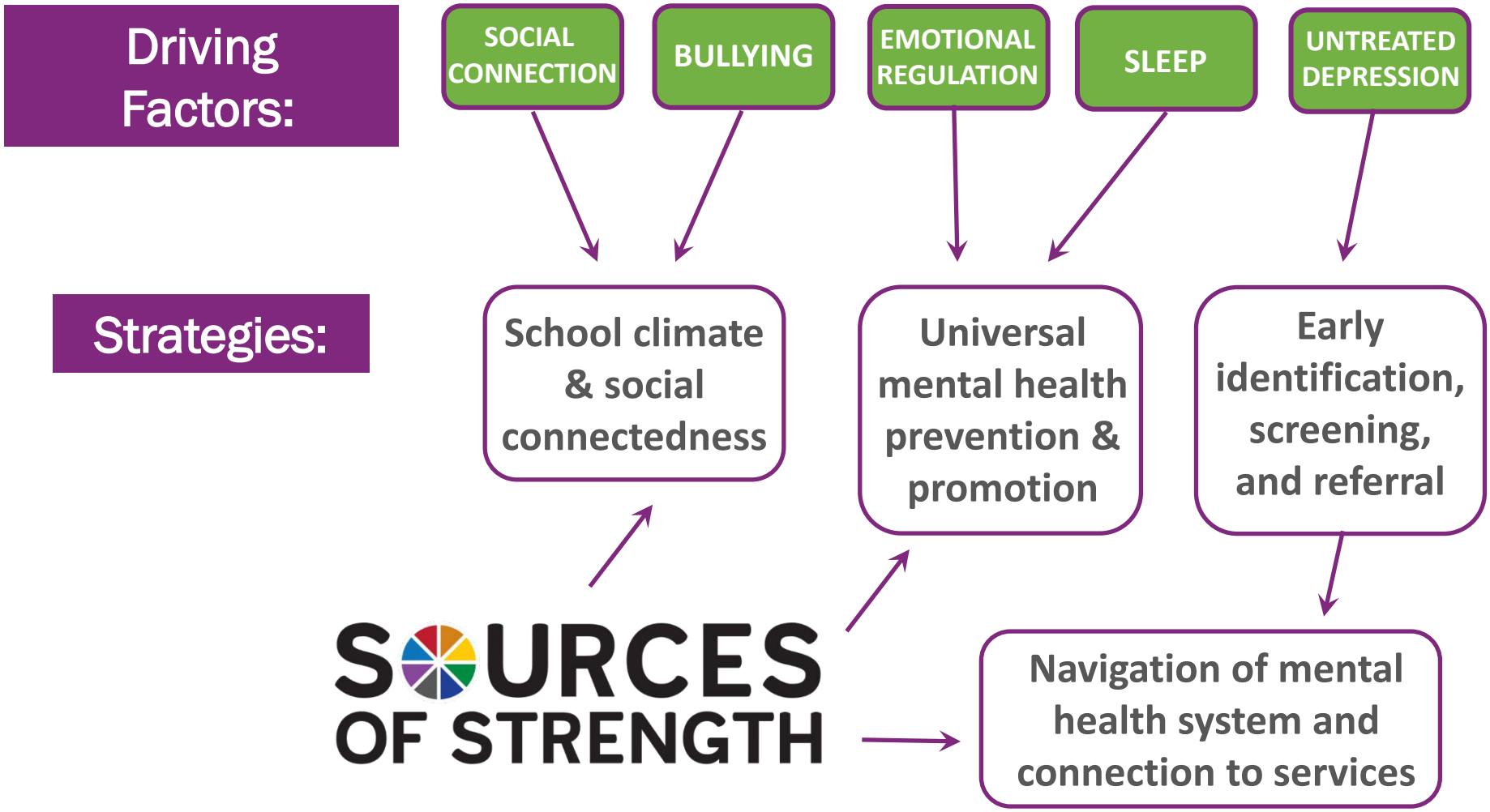
SMS Emotional Support Line
Text "HOPELINE" to 741741.
A free service provided by:
CRISIS RESPONSE
Tier 3: Targeted
QPR For Suicide Prevention
Connected Community
Wellness Screen
BWell2Excel
Tier 2: At Risk
Youth Mental Health First Aid USA
Safe-Guard Your Home
A Guide to Youth Suicide Prevention at Home
Tier 1: Universal



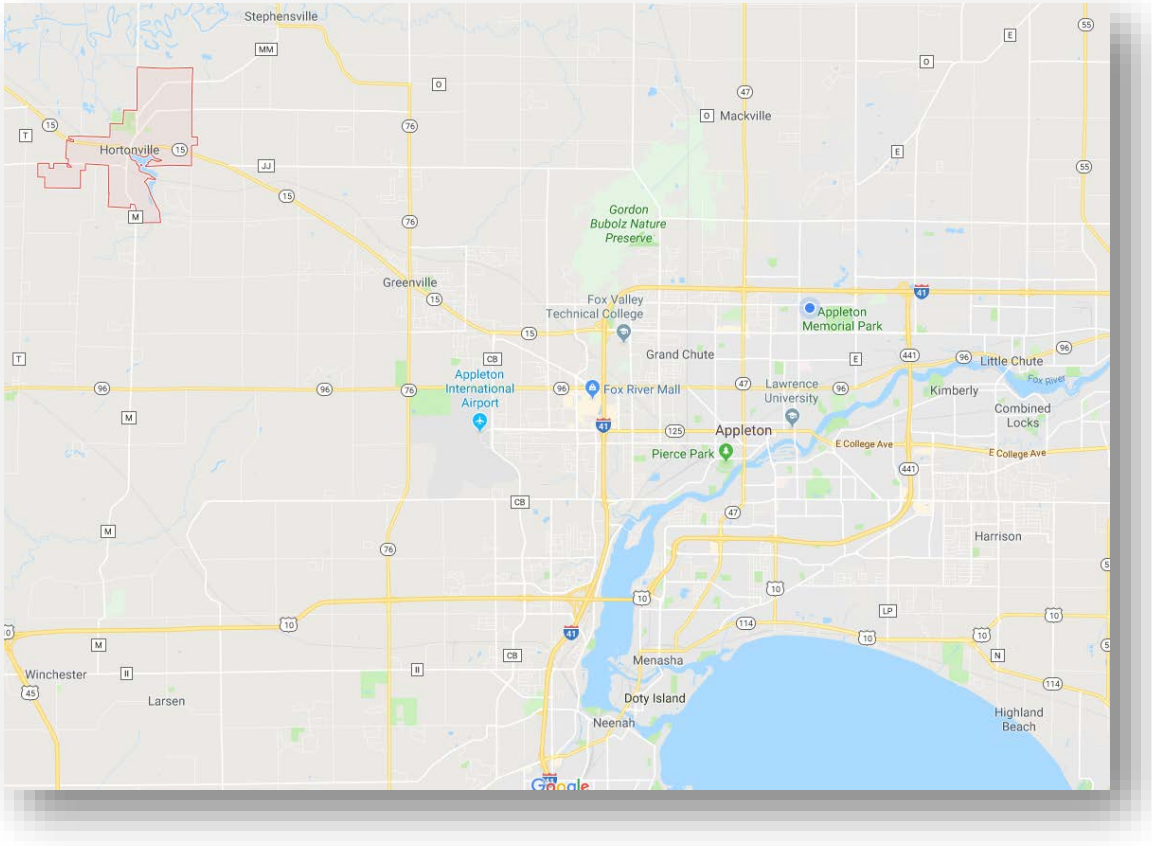
SOURCES OF STRENGTH

Goal: Reduce rates of teen depression



Activity: What programs/tactics, strategies exist in your community?

The Hortonville Story



E3: Our District's Journey to Mental Wellness

Comprehensive, collaborative K-12 program to address mental health challenges and promote mental wellness

- **Prevention/education** (positive student programs around resiliency/grit/coping; positive messaging; parents, and staff training)
- **Identification** (screening, goal is K-12, passive consent, student assent)
- **Intervention** (on site therapy)

Youth Risk Behavior Survey Data: Hortonville Area School District

Youth Risk Behavior Survey- (HHS, 2015) 23% (19.4% in 2018) of students reported feeling sad or hopeless almost every day for two weeks or more in a row; 11.8% (10.2% in 2018) of students reported having a plan about how they would attempt suicide; (HASD Middle Schools, 2015) 21.6% (19.9% Middle Schools, 2018) of our middle school students reported feeling sad or hopeless almost every day for two weeks or more in a row; 3.9% (3.08% Middle Schools, 2018) of middle school students reported they had tried to kill themselves

HHS Positive Data YRBS 2015 and 2018

- Do you agree or disagree that your family loves you and gives you help and support when you need it? 89% agree (2015) 89.3% agree (2018)
- Do you agree or disagree that teachers really care about you and give you a lot of encouragement? 92.2% agree (2015) 66.4% agree (2018)
- Do you agree or disagree that you feel like you belong at this school? 68% agree (2015) 72.3% agree (2018)
- Is there at least one teacher or other adult in this school that you can talk to if you have a problem? 65.6% agree (2015) 69.7% agree (2018)

Assessment completed with Pupil Services Team/ District Administrative Team

Results identified strengths and gaps in programming:

- School Environment
- Curriculum and Instruction
- Student Programs
- Pupil Services
- Adult Programs
- Family/Community

What could the district do different or better?

- Break down the barriers for mental illness
- Allow all students access to services
- Screen all students (similar to vision/hearing)
- Change student culture: Positive messaging and support to students for resiliency/coping/grit/perseverance through programs and activities
- Provide educational training for our staff, and support for parents

engage. educate. empower.
Building Healthy Minds

SOURCES OF STRENGTH

Mental Health
Family Support
Medical Access
Positive Friends
Spirituality
Mentors
Generosity
Healthy Activities

SOURCES
OF STRENGTH
MEDICAL ACCESS
MENTAL HEALTH
FAMILY SUPPORT
POSITIVE FRIENDS
MENTORS
HEALTHY ACTIVITIES
GENEROSITY
SPIRITUALITY

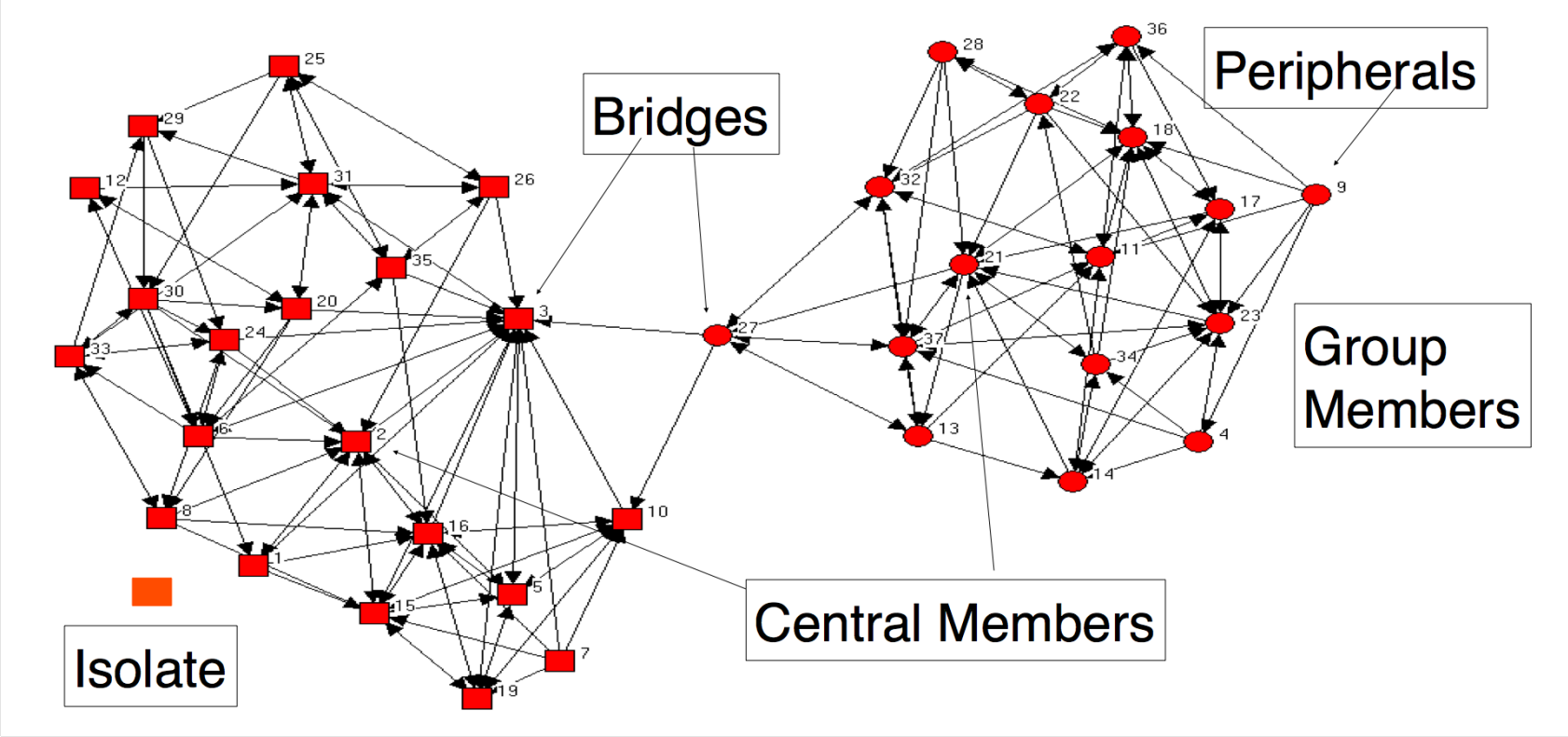
EVIDENCE-BASED

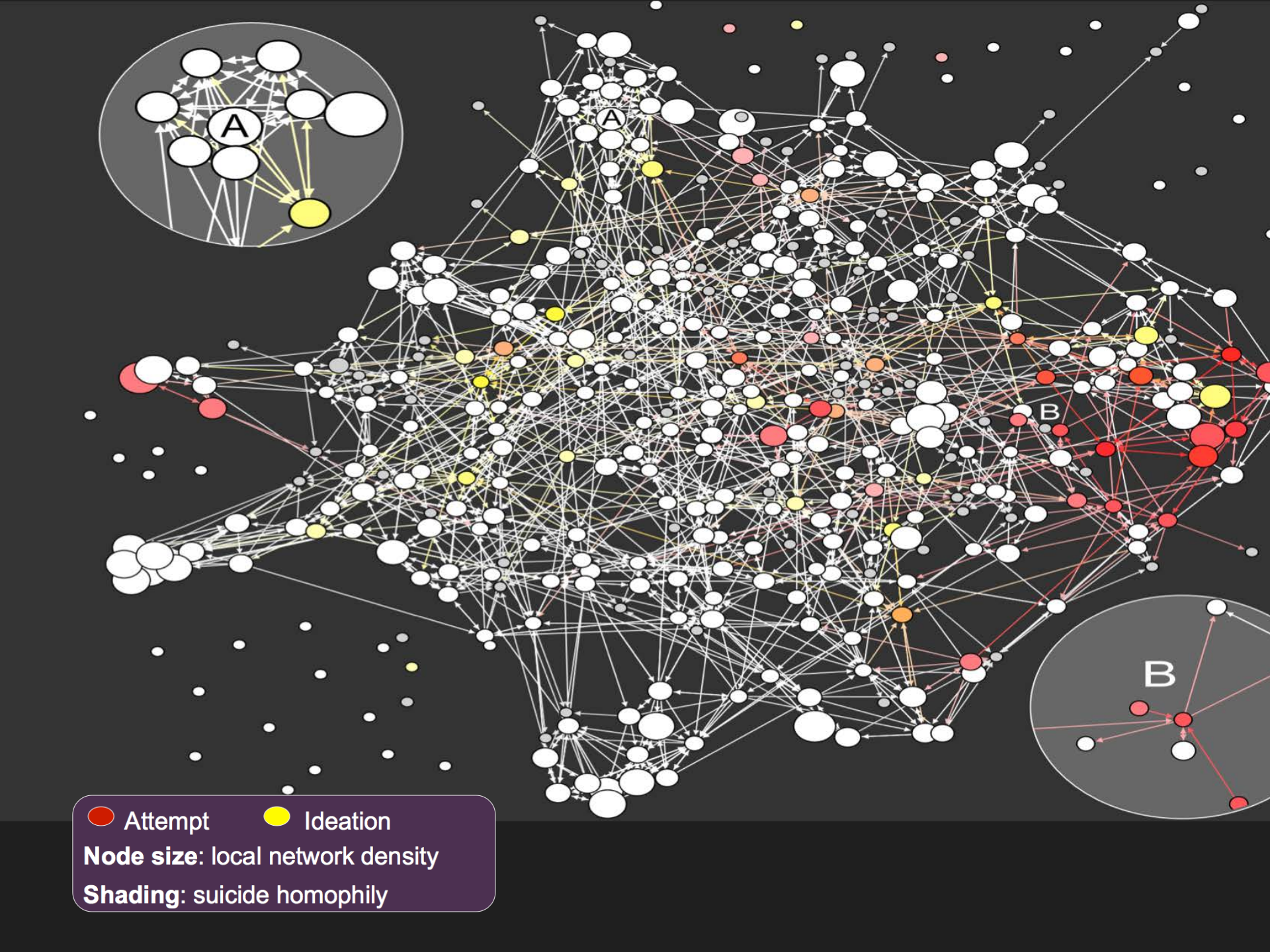
- National Best Practices Registry by the Suicide Prevention Resource Center (SPRC) and The American Foundation for Suicide Prevention (AFSP).

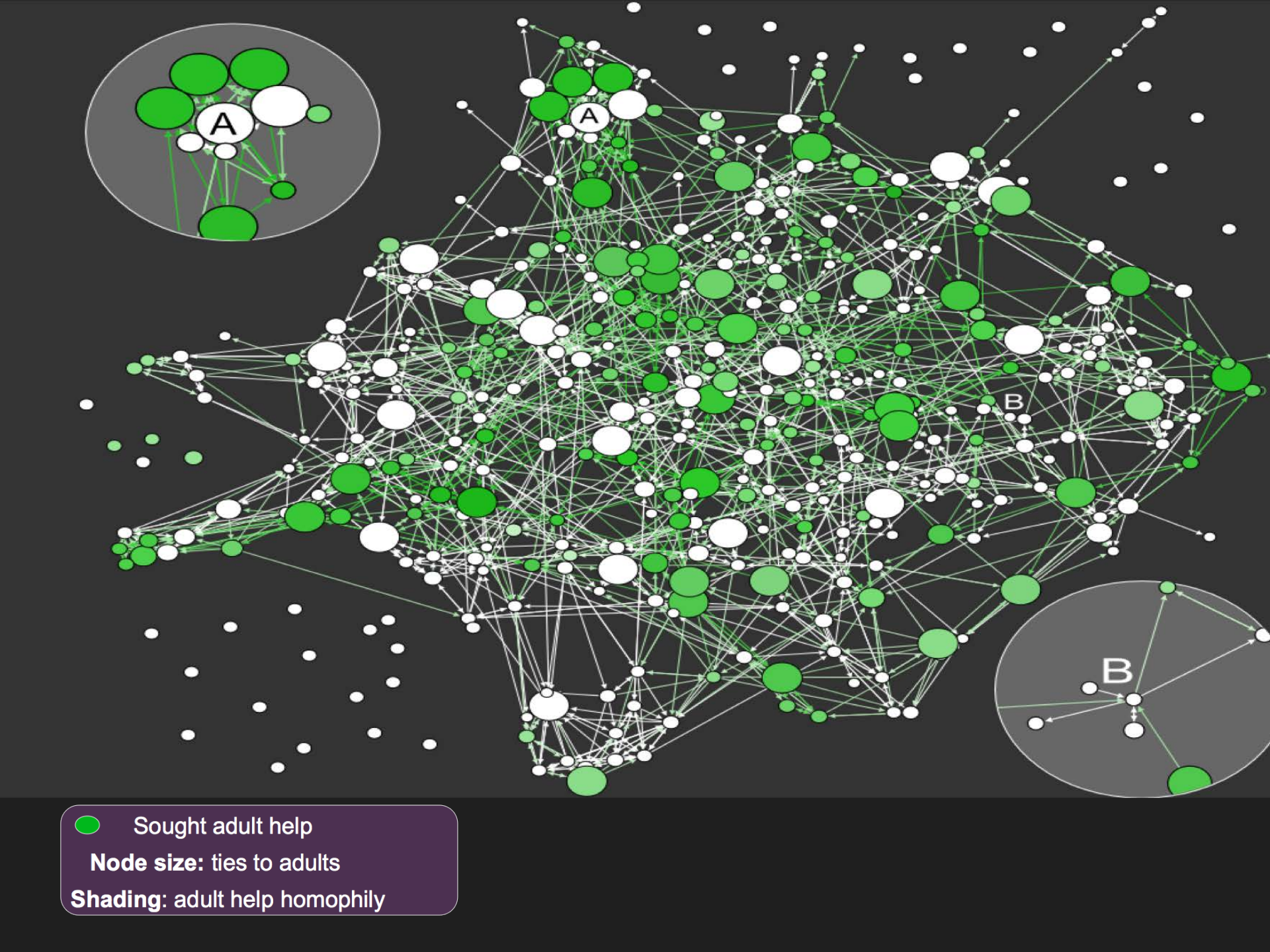
- SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP).

(NREPP is SAMHSA's online registry of interventions that have demonstrated effectiveness in the prevention or treatment of mental health and substance use disorders)

5th Grade Social Network




A
A
B
B
Attempt
Ideation
Node size: local network density
Shading: suicide homophily


A
A
B
B
Sought adult help
Node size: ties to adults
Shading: adult help homophily

RESOURCES

Assess capacity (staff, financing, etc.) to implement the program.

$15,000 per school
X 24 schools

$360,000

Trained Trainer Model

$7,750 per school
X 24 schools

$186,000

Let’s split the cost!

$3,875/$3,875

Find your champions and early adopters!

MONITOR

Track planning and implementation. How did it go?

Monitoring activities:

- Steering committee meetings regularly
- Schools report back on campaigns conducted
- Adult advisor team take survey to assess the strength of their student and staff teams
- Schools receive support from regional and national trainers
- Healthy Teen Minds staff providers logistical report

EVALUATE

Evaluate the program's success in achieving desired results.

Evaluation:

- Sources of Strength evaluation tools – staff and student surveys
- Key indicator – YRBS sad and hopeless
- Other YRBS data points:
  - Suicide-related behaviors
  - Feeling a sense of belonging at school
  - Feeling that teachers care about you
  - Having a trusted adult at school

SUSTAIN

Consider how to keep the program going if it is successful.

Q&A

Contact Us

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