

# Ecological Model of Care for Healing Victims Through School-Based Mental Health Centers in Austin Independent School District

## PURPOSE:

*Building on the district's nationally noted Social and Emotional Learning Initiative, this pilot will expand AISD's successful model of school-based mental health centers to 22 elementary campuses across three geographic areas in Austin with high rates of crime and child victimization. The elementary schools are in the LBJ, Lanier, and Akins vertical teams: Andrews, Blanton, Harris, Jordan, Norman, Overton, Pecan Springs, Cook, Guerrero-Thompson, McBee, Padron, Lucy Read PreK, Wooldridge, Wooten, Blazier, Casey, Kocurek, Langford, Menchaca, Palm, Perez.*

## PROPOSAL SUMMARY:

Primary grant-funded activities include:

1. **Victim Identification/Assessment:** Identification and assessment of victims while at school. Anticipated at each school up to 30 crime victims, 20 family members of the students, and up to 20 staff members and other school-based staff (e.g. support service providers)
2. **Therapeutic Services:** 2 therapists will provide a therapeutic diagnosis and ongoing therapeutic services to victims, their families and teaching staff at school during the day and at times that meet their needs, such as after hours and during school holidays and the summer when schools are typically closed.
  - a. **Lead therapist:** On-campus full-time, doing intakes, consultations about client cases, one-on-one student therapy, group therapy, monitoring activities and schedule of 2<sup>nd</sup> therapist.
  - b. **Second therapist:** Conduct one-on-one student therapy, group therapy, but primary charge will be to work with caregivers in students' lives, including teachers, parents and other family members of students, including home visits.
3. **Wrap-Around Supports:** Engagement with adults familiar with their case (educators, police, service providers, etc.), so that victims do not encounter additional impediments when they return to class, playground, and home.
4. **Teacher PD:** Professional development will be provided to staff who serve victims and their families in the school setting, through staff-wide presentations along with "in-the-moment" support/coaching from licensed therapist when challenges arise.
5. **Evaluation:** A third-party evaluation of the effectiveness of the school-based mental health centers to identify and share with others the best practices in victim services.

### **ARC Ecological Model = Attachment, Regulation, Competency**

- Collaboration across system – home, school, treatment providers, individual child
- Emphasizes (1) development of healthy attachments (connections) with caregivers (teachers, parents); (2) support with self-regulation (expressing thoughts and feelings appropriately and effectively); (3) development of child competency (academic, interpersonal)

**Why School-Based Matters:** School staff are the people who have day-to-day contact with young victims and are often the first to become aware of trauma-impacted behaviors. By giving educators and the

criminal justice system immediate referral avenues, the child can more quickly transition into a coordinated plan for restoration.

#### BACKGROUND:

**Need** – The 22 elementary schools fall within the “East Austin Crescent” pattern of high child maltreatment identified by the 2012 study by Dell Children’s Medical Center of Central Texas and Children’s Optimal Health:

- **High-crime** neighborhoods, i.e. 78753, which, according to Austin Police Department data in 2015, reported 45 rapes and 183 aggravated assaults.
- **Barriers to Treatment:** Lack of transportation (on average, 95% of students are economically disadvantaged), language (56% of students are English Language Learners), and navigating support systems, often delay or even prevent children and families from getting the restorative help they need
- **Impact:** Left untreated, child victims often fail to meet socioemotional competencies on par with same-aged peers, and are more likely to respond to stress with underdeveloped coping strategies, i.e. aggression, disassociation, avoidance. Ability to self-regulate is predictive of longer-term academic and social success.

#### AISD Experience & Existing Infrastructure:

- **2011/12 Pilot** – Pilot of school-based mental health center at Crockett HS that has expanded to 18 middle and high schools in AISD
  - AISD has refined systems and legal procedures for referring students to campus-based mental health services, with intake forms already including indicators that identify victims of crime.
  - Seven years of system development and testing with more than 50 hours of legal consult have produced referral processes and forms that are both FERPA (Family Educational Rights to Privacy Act) and HIPAA (Health Insurance Portability and Accountability Act) compliant.
  - Amending the district’s existing mental health center model so that only victims of crime are served is a natural development because most students currently served by AISD mental health centers meet the VOCA definition of victims of crime. If a student is referred to the center and does not meet the criteria of being a victim of crime, the therapist will advise the parent to seek other resources.
- **National and state recognition**
  - Michelle Harper, VP for Child and Family Policy at The Meadows Mental Health Policy Institute for Texas recently stated: “Austin schools are at the forefront of recognizing the importance of addressing children’s mental health to ensure student success...The expected successes from this [grant] will serve as a model for other Texas school districts.”
  - AISD is leading toward increasing access for victims by testifying to State legislature about needed refinements in existing systems so that Medicaid and other funding sources can be utilized in the future for campus based mental health services.