

SAP COUNTY COORDINATION UPDATE
October, 2014



www.sap.state.pa.us

Prepared by: PA Network for Student Assistance Services (PNSAS)

PENNSYLVANIA NETWORK FOR STUDENT ASSISTANCE SERVICES INTERAGENCY UPDATE

SAP K-12 Bridge Training Completed

Last year, the Pennsylvania Network for Student Assistance Services (PNSAS) developed an integrated SAP K-12 training for both elementary and secondary Student Assistance Team (SAP) team members. For those who were trained and certified as a SAP team member under either the elementary or secondary model before the development of the integrated K-12 SAP Training, a free Bridge Training was available until August 31, 2014. There were over 1,000 participants. Congratulations to those who completed the training! The completion of the training will allow these individuals to serve on elementary through high school SAP teams. Thank you to Northeastern Education Intermediate Unit 19 for hosting the training on their website.

SAP Team Highlights

Looking for some fresh ideas for your SAP team? This section of the SAP County Coordination Update is for you! We want to feature what teams across the Commonwealth are doing in their efforts to reach students and families. What ways do you market your SAP team to students, staff, and the community? Does your SAP team sponsor any events in your school? Have you found an effective and creative way to engage parents and families? Share your ideas with SAP colleagues across Pennsylvania by contacting your regional coordinator (see the regional map and contacts [here](#)).

SAP BACK TO BASICS

The Student Assistance Four-Phase Process—Phase 1: Identifying and Referring Students

Everyone who has ever been to Student Assistance training can probably recite the first phase of the SAP four-phase model in their sleep—identification and referral. But how do you get those referrals? Or, what if you suspect the numbers of referrals your SAP team is receiving doesn't match up to the number of students you know could benefit from the Student Assistance Program?

Referring to SAP

SAP referrals can come from anyone-- faculty, staff, students-- including self-referrals, family and community. But in order for people to make referrals they need to know a few things from the SAP team. First of all people need to know that the SAP team exists (see the Back to Basics article in the September, 2014 SAP County Coordination [here](#) to read about marketing your SAP team). Once they know about your team they probably have further questions such as. . .

How do I know if I should refer someone to SAP?

SAP teams need to make sure that all their stakeholders (faculty, staff, students, parents, and community) know who is appropriate for a SAP referral. This might be in the form of a handout of observable behaviors that could indicate a concern that would be appropriate for the Student Assistance team to address. It might be in the form a brochure that is sent home to parents, or on the school's website. Keep your audience in mind as you prepare this information. For example, do you want to make a handout that is specific to students? Parents? Faculty?

How do I make a referral?

Guard against assuming everyone knows how your program works. Don't think that "contact a member of your SAP team" will tell people everything they need to know. List contact information, provide the locations where SAP referral forms can be found and where/how they can be submitted. Be sure that parents and community members are provided ways to access this information, also. Don't just provide the school's phone number. Whom at the school should be contacted? How can he or she be reached? What information do they need to provide when contacting the SAP team?

What will happen when I make a referral?

Referring someone because you are concerned about him or her can be anxiety producing. Some of this anxiety is due to the unknown. What happens with the information I provide? Will the student be told I made the referral? Is anything going to be done? You can alleviate some of these concerns. While informing your referral source about the confidential nature of SAP, you can still give them information about the SAP process. What happens with the referral? What will the student be told about the referral? What information will be shared with the parent? What are possible outcomes i.e. in-school supports, assessments, and/or outpatient services?

The SAP Team and Referrals

And what about the SAP team itself? What can *you* be doing about referrals? You in-service the faculty and stuff mailboxes with referral forms, explain SAP to students in an assembly, and send home a parent letter about SAP. Then you sit back and wait for the referrals to roll in. Or do you?

Have you thought about the students that are hiding in plain sight waiting for the SAP team to connect with them? How do you find them? Hint: does your SAP team do any of the following?

- Check attendance records every month. Does anyone stand out that is frequently missing school?
- Check the nine-week grade reports. Do you have students whose grades have suddenly nosedived?
- Compare the grade reports and the attendance records. Who is showing up on both lists as being at risk? Are they showing up as discipline referrals, too?
- Answer the following question as a team: what students don't seem to be connected or seem to be invisible? Are they the same ones struggling with attendance, discipline referrals or grades? Are any of them being referred to SAP?
- Look at last year's PDE 4092 reports to see if there are any patterns. For example is the number of sixth-grade females referred a significant number? Maybe there are relational issues for this population

that could benefit from some type of intervention. Or maybe there is a group that is under represented-- do you have very few referrals on 10th graders? Why?

- Compare your local PAYS survey to your PDE 4092 numbers. Are the self-reported behaviors in the PAYS matching up with the patterns of referrals you receive?

By examining your referral process and monitoring the number of referrals you are receiving, your team can go a long way in ensuring that as many students as possible will benefit from SAP.

RESOURCES

Get Smart About Drugs

The Drug Enforcement Administration (DEA) announces the launch of the **all new** GetSmartAboutDrugs.com, the website for parents, educators, and caregivers. Originally launched in 2008, the website has updated drug information, resources and is totally redesigned for easier navigation. To learn about marijuana use and drugged driving; how to identify drug paraphernalia; why spice/K2 is a serious drug trend; how your school can be involved in Red Ribbon Week and more, please visit the website at www.getsmartaboutdrugs.com.

Tips for Survivors of a Disaster or Traumatic Event: What to Expect in Your Personal, Family, Work, and Financial Life

This publication offers self-help tips for coping with the aftermath of trauma. Discusses the long-term impact of trauma, including personal uncertainties, family relationship changes, work disruptions, and financial concerns. Offers tips on being a trauma survivor. Download the digital version in English [here](#) and the Spanish version [here](#).

Free Kit for Educators Available from National Association for Children of Alcoholics.

Research shows that children who survive a life in high risk families usually have found an adult or two whom they can trust and who provide consistent support to them over the years. Very often this adult is a teacher. We invite you to use these materials designed to assist teachers as they attempt to help the children in their classes who come from homes where alcohol or other drug addiction rules their families. The information and skills identified in the "Kit for Educators" have been compiled with the input of many teachers and other school personnel across the country who function as the special adult in the life of a high risk child. We hope that it will be useful to all of you teachers who seek assistance in helping our kids, as well as the springboard for the help and healing that you so generously offer to the children you serve. [Download a copy of the kit .](#)

Jana Marie Foundation Videos on Sex and the Internet

The Jana Marie Foundation strives to empower young people, especially young women, to make positive choices, practice self-respect and maintain healthy relationships by providing opportunities of personal growth and creative expression.

Jana Marie Foundation's Candid Conversations is a series of concise, focused discussions with experts that serve as easy-to-access references for recognizing and addressing serious issues related to adolescent mental, physical and emotional health. Click [here](#) to access a series of videos on "Sex and the Internet" featuring Megan Maas, certified sexuality educator.

For more information on the Jana Marie Foundation and the Candid Conversations video series, please visit www.janamariefoundation.org.

Suicide and Bullying

The Relationship between Bullying and Suicide: What We Know and What it Means for Schools

This publication is available [here](#) from the National Center for Injury Prevention and Control Centers for Disease Control (CDC). This publication provides tips for educators based on the questions: What do we know from research? What can school personnel do?

Trauma Among Families Affected by Substance Use Disorders

Psychological trauma is an emotional response that commonly occurs after distressing or life-threatening events like child abuse, neglect or living with a caregiver diagnosed with a substance use disorder (SUD) or mental illness. Traumatic experiences can trigger symptoms of post-traumatic stress disorder (PTSD), depression, anxiety, substance use and poor social, educational and occupational functioning. Research has provided substantial evidence linking trauma exposure and SUDs, child abuse, neglect and judicial involvement. Children and families involved in child welfare, substance abuse treatment and court systems often have significant, prolonged and generational exposure to traumatic environments and experiences. The resources below focus on trauma within the substance abuse treatment, child welfare and court systems and its impact on the children and families who enter those systems. For more information contact SAMHSA [here](#).

Ally Week

October 13-17, 2014 Ally Week is a national youth led effort empowering students to be allies to LGBT (Lesbian, gay, bisexual and transgender) youth and stand up against bullying, harassment and name-calling in schools.

- A – Acceptance
- L - Listen
- L - Learn
- Y - Youth
- W – Welcome
- E - Encourage
- E - Empower
- K - Knowledge

Ally Week is about encouraging students to be allies in our schools and celebrating the allies we already have. Ally Week is a great way to kick off the school year, and is an opportunity for students to take the initiative to teach one another about difference, respect and safety for all students. You can learn more about Ally Week at [GLSEN](#).

TRAINING OPPORTUNITIES

PASAP Southwest Regional Workshop

Friday, October 10, 2014

8:00 AM – 3:15 PM

LaRoche College

9000 Babcock Boulevard,

Pittsburgh, PA 15237

Additional information and registration available at www.pasap.org

Act 48 and CEU Hours Available

2014 Safe Schools Conference

“Keeping Our Children Safe: Strategies for Schools and Communities”

Oct 8-9, 2014

Holiday Inn Harrisburg/Hershey, Grantville.

Sponsored by the Center for Safe Schools.

More information/registration at

<http://www.safeschools.info/professional-development/2014-safe-schools-conference>

Bullying Prevention Online Learning Series

The Center for Safe Schools

Thursday, October 16, 2014

3:00 p.m. to 4:15 p.m.

A live online learning session for educators will be held. The session is the first of three, entitled “Attentive on the Journey: Engaging Parents in Children’s Learning, Development and Bullying Prevention”.

Participants will examine best practice approaches for cultivating effective parent/family engagement in their children’s development. Participants will learn strategies to inform parents on how to reduce bullying behavior, support children who may be targets of bullying and intervene if their children are involved in a cycle of peer abuse.

The Center for Schools and Communities, as a division of the Central Susquehanna Intermediate Unit, is offering Act 48 professional development credit for those with Pennsylvania teaching or administrative certificates. Participants must attend the online session from beginning to end to receive credit. Only specified professional development sessions are available for credit. The Record of Attendance will be e-mailed to participants upon completion of the session. If you are interested in receiving Act 48 credit, please check the appropriate box on the registration form.

Please register for Attentive on the Journey: Engaging Parents in Children’s Learning, Development and Bullying Prevention on Oct 16, 2014 3:00 PM EDT at:

<https://attendee.gotowebinar.com/register/4493398719230422274>

Pennsylvania Suicide Prevention Conference

Oct. 15-16, 2014

Ramada Inn and Conference Center,

State College, PA

Sponsored by the PA Adult/Senior Adult Suicide Prevention Coalition and the PA Youth Suicide Prevention Initiative.

Keynote speaker: Dr. Sally Spencer-Thomas, a clinical psychologist, mental health advocate, and survivor of her brother’s suicide.

The first day will feature a choice of breakout sessions, while the second day will feature extended trainings on QPR (Question, Persuade, Refer), Assessing and Managing Suicide Risk, and Youth Mental Health First Aid.

Program and registration information is available [here](#).

Safe Dates Implementation Training

November 5, 2014

Center for Safe Schools,

275 Grandview Avenue, Camp Hill, Pennsylvania 17011

Safe Dates is an evidence-based program for preventing dating abuse among adolescents. It consists of the following five components:

1. A ten-session dating abuse curriculum
2. A play about dating abuse
3. A poster contest
4. Parent materials, including a letter, newsletter, and the Families for *Safe Dates* program
5. An evaluation questionnaire

Safe Dates can be used as a dating abuse prevention tool for both male and female middle- and high-school students. *Safe Dates* would fit well within a health education, family life skills, or general life skills curriculum.

This one-day event is being offered for those individuals who wish to support their schools in the implementation of the *Safe Dates* Curriculum. A school counselor can offer *Safe Dates* as part of a support group or counseling/education program or it can be used in after school, community youth enrichment, and faith-based youth programs. *Safe Dates* can also be used as an intervention tool at domestic abuse or crisis centers, in juvenile diversion programs, and with victim support groups.

For additional information and to register please click on this link: <http://www.safeschools.info/professional-development/2014-safe-dates-implementation-training>

Pennsylvania Conference on Juvenile Justice

Nov. 5-7, 2014

Harrisburg Hilton and Towers, Harrisburg.

Sponsored by the Juvenile Court Judges' Commission and others.

SAVE THE DATE

The 25th Annual PASAP Conference

February 22-24, 2015

Penn Stater Conference Center Hotel

State College, PA

Do Something Remarkable

April 8-9, 2015.

Sheraton Harrisburg-Hershey Hotel,

Harrisburg, PA

Sponsored by Pennsylvania Council of Children, Youth and Family Services.

Deadline for presentation proposals is September 15, 2014.

For further information go to http://pccyfs.org/Spring_Conf.html

NEWS

Pennsylvania Passes New Youth Suicide Prevention Bill

On June 26, 2014, Governor Corbett signed Act 71 into law. This bill codifies school-based suicide prevention and requires school entities to adopt an age-appropriate youth suicide awareness and prevention policy, and provide training in youth suicide awareness and prevention to professional educators in grades 6-12. It also requires the Department of Education to develop a model youth suicide awareness and prevention policy, develop a model youth suicide awareness and prevention curriculum and make it available to all school entities, and compile, develop, and post online guidelines and materials for training educators and resources and age-appropriate educational material. The Act also includes requirements related to child exploitation awareness education. The PA Youth Suicide Prevention

Initiative supported this bill and will continue to work with the Department of Education to assist in developing youth suicide awareness and prevention curriculum and providing other related resources. The complete text of the bill is available at <http://tiny.cc/p4cgjx>

Pot Addiction May Be Real, Study Suggests

Many people believe that marijuana is not addictive, but a new study challenges that theory [HealthDay News](#) reports. "As more people are able to obtain and consume cannabis legally for medical and, in some states, recreational use, people are less likely to perceive it as addictive or harmful," study co-author John Kelly, a psychiatrist at Massachusetts General Hospital's Center for Addiction Medicine, said in a hospital news release. "But research shows that cannabis use can have significant consequences, and we know that among adolescents it is second only to alcohol in rates of misuse," he added.

In the new study, Kelly's team followed outcomes for 127 teens, ages 14 to 19, treated at an outpatient substance abuse clinic. Marijuana was the substance used most often by 90 of the teens. Of those 90 teens, 76 (84 percent) met criteria for marijuana dependence, including increased tolerance for, and use of, marijuana, as well as unsuccessful attempts to reduce or stop using the drug. About two-fifths of the 90 teens also experienced symptoms of withdrawal when they stopped using marijuana -- a sign of drug dependence, according to the study authors.

Teens who exhibited withdrawal symptoms were more likely to experience negative consequences such as trouble at school or on the job, or financial or relationship problems, Kelly's team said. The teens who developed withdrawal symptoms were also more likely to meet the guidelines for marijuana dependence and for mood disorders, according to the study published recently in the *Journal of Addiction Medicine*.

The study was supported by a grant from the U.S. National Institute of Alcohol Abuse and Alcoholism. There's more on teens and marijuana at the [U.S. National Institute on Drug Abuse](#).

Family Dinners Good for Teens' Mental Health, Could Protect from Cyberbullying

Cyberbullying was associated with mental health and substance use problems in adolescents, a new study shows, but family dinners may help protect teens from the consequences of cyberbullying and all. The authors examined the association between cyberbullying and mental health and substance use problems, as well any moderation of the effects by family contact and communication through family dinners. The study included survey data on 18,834 students (ages 12-18) from 49 schools in a Midwestern state. The authors measured five internalizing problems (anxiety, depression, self-harm, suicide ideation and suicide attempt), two externalizing problems (fighting and vandalism) and four substance use problems (frequent alcohol use, frequent binge drinking, prescription drug misuse and over-the-counter drug misuse).

Nearly 19 percent of the students reported they had experienced cyberbullying during the previous 12 months. Cyberbullying was associated with all 11 of the internalizing, externalizing and substance use problems. Family dinners appeared to moderate the relationship between cyberbullying and the mental health and substance use problems. For example, with four or more family dinners per week there was about a 4-fold difference in the rates of total problems between no cyberbullying victimization and frequent victimization. When there were no dinners the difference was more than 7-fold.

"Furthermore, based on these findings, we did not conclude that cyberbullying alone is sufficient to produce poor health outcomes nor that family dinners alone can inoculate adolescents from such exposures. Such an oversimplified interpretation of these associations disregards other exacerbating and protective factors throughout the social environment. Instead, these findings support calls for integrated approaches to protecting

victims of cyberbullying that encompass individual coping skills and family and school social supports," researchers note. Go [here](#) to read more on this study.

Substance Use and Mental Health Estimates from the 2013 National Survey on Drug Use and Health: Overview of Findings

The Substance Abuse and Mental Health Services Administration (SAMHSA) released an overview of the findings of the 2013 National Survey on Drug Use and Health (NSDUH). The short report showed that in 2013 illicit drug use in America was stable over the previous year:

- Among young adults (18 to 25) there was no change in either past month use of any illicit or marijuana; this pattern is unchanged since 2008. However, there was a decline in past month use of pain relievers from 2012; from 3.8% to 3.3%.
- In 2013, 1.4 percent of adolescents had a co-occurring major depressive episode and substance use disorder (SUD); 3.2 percent of adults had co-occurring "any mental illness" and SUD; and 1.0 percent of adults had a co-occurring serious mental illness and SUD.
- In 2013, 24.6 million people aged 12 or older (9.4%) were current illicit drug users, including 2.2 million adolescents aged 12 to 17. While current marijuana use among this population was unchanged from 2012, it has been increasing in recent years, rising from 5.8 percent in 2007 to 7.5 percent in 2013.
- Past month use of any illicit drug among adolescents declined significantly from 2012 to 2013 (9.5% to 8.8%); this appears to be driven by declines in prescription drug use: pain relievers from 2.2% to 1.7% and tranquilizers from 0.6% to 0.4%. While marijuana use among adolescents was unchanged from 2012, it is down significantly from 2011 (7.9% vs. 7.1%)—in the opposite direction of the trend for the population overall.
- 60.1 million people aged 12 or older were past month binge drinkers, including 1.6 million adolescents (ages 12 -17).
- In 2013, about 1 in 10 adolescents (10.7 percent) had a major depressive episode (MDE) in the past year. Among adolescents with MDE, 38.1 percent received treatment or counseling for depression in the past year.
- In 2013, 1.4 percent of adolescents had co-occurring MDE and substance use disorder (SUD).

Over the past three decades, the rate of drug use in America has declined by approximately 30%. Click [here](#) to view the full report.

Know What's Happening at Those Friday Night Football Games!

It's Friday night, you drop your teen off at the high school football game to meet up with her friends. You are not naïve; you know that among some of your daughter's peers, there is likely to be drinking that occurs before or after the game. But not your child, you've covered your bases. Not only did you drop your daughter off at the entrance and watched her walk in, you instructed her not to leave the stadium until you return to pick her up following the game. Plus, there are plenty of adults looking on from the bleachers and walking to and from the concession stand during the game. *You're doing great, but did you warn your child about the 7-Eleven Slurpees?* What harm is there in a Slurpee you ask? Aside from the high-sugar content and typical brain-freeze, not much, until vodka or other alcohol is added to the mix. It has become a Friday night ritual among some teens; stopping by 7-Eleven on the way to the game, grabbing giant Slurpees, spiking them with alcohol and then walking around sipping on them, undetected by adults. This is happening with Gatorade and other bottled drinks brought into the stadium as well. Just when you thought you had your bases covered... So what is a parent to do now?

1. Advocate for your local high school to create a policy restricting outside drinks from being brought into the stadium (if there is not already one in place).

2. Warn your son or daughter that Slurpees and other drinks offered to them may be spiked, as some teens may find it amusing to try to get an unsuspecting peer or even a preteen to unintentionally drink alcohol. Tell children to stick to their own drinks.
3. Keep track of your child during the game. If you are physically present, have your child check in with you at a predetermined time (like halftime, or the end of each quarter); and be sure to take the “scenic route” to the concession stand or restroom. If you are not at the game, randomly check in with your son or daughter by exchanging text messages or by giving your child a call (with the condition he/she has to answer at any given time).
4. Know the impact of alcohol on adolescents and share the facts with your child, reminding him/her of your stance against underage drinking and the consequences if he/she so chooses to partake.
5. Above all, engage in regular, on-going and open conversations with your child (about the everyday stuff, as well as the heavier issues, like alcohol and other drugs).

Whether it’s a spiked Slurpee at a football game or some other alcoholic beverage at a different place and time, your child is likely to be offered a drink at some point. Encourage your child to find his/her personal motivation for being alcohol-free, then practice saying “no.” Your child may attribute it to academics, sports, friendships, appearance, health or simply not wanting to disappoint you. Regardless, your child will feel better-equipped and more confident in saying ‘no’ if he/she has thought about it and practiced ahead of time.

The idea of sneaking alcohol into a football stadium is nothing new, and even when protective measures have been taken, there will be those who find a way around it. You are encouraged to take the above precautions and stay up-to-date on what’s happening in your child’s world, but more than anything, talk early and often with your son or daughter to educate and empower him/her – because in the end, it is up to your child to make the right choice. For information on the impact of alcohol on the behavior, body and mind of adolescents, to the Drug Free Action Alliance website [click here](#).