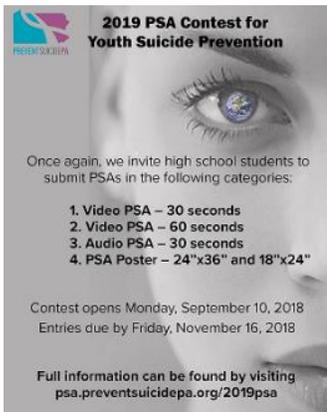


SAP COUNTY COORDINATION UPDATE September, 2018



Prepared by: PA Network for Student Assistance Services (PNSAS)
www.pnsas.org

PENNSYLVANIA NETWORK FOR STUDENT ASSISTANCE SERVICES INTERAGENCY UPDATE



2019 PSA Contest for Youth Suicide Prevention

The annual Prevent Suicide PA PSA contest is in its 7th year, and Prevent Suicide PA is hoping to receive more entries than ever before. This is a great opportunity to engage students in a dialogue around suicide prevention, the importance of positive messaging, and communicating effectively. Staff who have participated in the past have seen this as a way to teach students on many levels -- academically, socially, and emotionally -- and students have been empowered to use their voices to reach out to their peers.

This year's contest will be announced during National Suicide Prevention Week, starting Monday, September 10, 2018 and all submissions are due by Friday, November 16, 2018. Schools may submit one entry in each or any of the following categories: 30 second video, 60 second video, 15 or 30 second audio, and poster. Full contest information including the Rules for Submission, which contains valid resources for messaging, can be found by visiting

psa.preventsuicidepa.org/2019psa.

The PSAs themselves need to be created by a student or group of students. However, Prevent Suicide PA requires there to be a school staff mentor, which can be anyone from the school who is willing to guide the student in this process. A number of teachers have used the contest as part of their curriculum across the academic spectrum, whether in English, Tech Ed, Health, etc.

Prevent Suicide PA recognizes that students put a lot of themselves in these PSAs and each entry is valued. All entries that are selected as finalists remain on the psa.preventsuicidepa.org website for public use and have been shown during morning school announcements, displayed at various events, printed and distributed to schools and organizations, and developed into promo materials. All of the winners are honored and receive a certificate of recognition. PSA winners are invited to attend one of the Suicide Prevention at the Ballpark events in PA, as well as given the opportunity to participate in Capitol Day at the Capitol Building in Harrisburg. Photos from previous events may be viewed at

www.preventsuicidepa.org/glsawareness.

Please visit the PSA site for full information about the contest. Any questions can be sent to rose.milani@jefferson.edu.

NATIONAL SUICIDE PREVENTION AWARENESS MONTH!

SEPTEMBER IS . . .

National Suicide Prevention Awareness Month!

National Suicide Prevention Week: September 9th – 15th

World Suicide Prevention Day: Monday, September 10th

Schools and SAP Teams may consider recognizing this month, week, or day through awareness events and activities, trainings and educational programs, and resource dissemination. Here are some ideas:

- Have students develop a video, audio clip, or poster for Prevent Suicide PA's 7th Annual PSA Contest for Suicide Prevention (see above for more information)
- Use [past PSA contest submissions](#) to engage students in discussions about suicide prevention and helpful resources
- Have staff participate in an online class through Prevent Suicide PA's [Suicide Prevention Online Learning Center](#)
- Select a suicide prevention educational program for students from Prevent Suicide PA and the Garrett Lee Smith Youth Suicide Prevention Grant's new [resource guide](#) for schools. Visit Prevent Suicide PA's [Act 71](#) page for additional training and school policy resources.

Contact your [PNSAS Regional Coordinator](#) for assistance or additional ideas for recognizing this important month

Liaison Best Practice Guidelines

The newly designed joint Best Practice Guidelines for Drug & Alcohol/Mental Health Liaison Services document is now available. Previously there were two documents, one for Mental Health and one for Drug and Alcohol liaisons. The newly designed version has combined the two documents. No changes were made to the liaison expectations. The guidelines are located on the PNSAS website [here](#).

Check Out the Impact of SAP!

Did you know . . . referrals to SAP teams total **1.6 million+**? The average of number SAP referrals per year is approximately 79,905 students? The highest months for referrals to SAP teams are September, October, and November? All this and more is in the updated *SAP Talking Points* which is posted on the [PNSAS website](#). Scroll down on the landing page or click on [SAP Talking Points](#). While you're there—take a look at the updated PNSAS map [here](#).

SAP BACK TO BASICS

The Invisible Disorder

It's September and for many it's back to the classroom. So let's begin the school year with a quiz.

What is a disorder that

- Can affect as high as 1 to 5 per 100 school children (or 1% to 5% of the population) in the United States? (Centers for Disease Control and Prevention, 2018)
- Is the leading known cause of birth defects in the United States? (National Organization on Fetal Alcohol Syndrome, n.d.)
- Affects 1 in 100 infants—nearly the same rate as autism? (National Organization on Fetal Alcohol Syndrome, n.d.)
- Is often called a hidden or invisible disability?
- Is 100% preventable?

If you answered Fetal Alcohol Spectrum Disorder (FASD), give yourself an A. However, the child with FASD might find it difficult to answer the short quiz you just completed. Students affected by FASD often have difficulty paying attention and receiving and processing information (Centers for Disease Control and Prevention, 2018).

Fetal Alcohol Spectrum Disorder is just that—a “spectrum” of disabilities. According to the Mayo Clinic (2018), “The range of consequences from drinking alcohol during pregnancy are collectively called fetal alcohol spectrum disorders, as not all signs and symptoms are present in all children with the disorder. This range includes:

- Alcohol-related neurodevelopmental disorder — intellectual disabilities or behavioral and learning problems caused by drinking alcohol during pregnancy
- Alcohol-related birth defects — physical birth defects caused by drinking alcohol during pregnancy
- Fetal alcohol syndrome — the severe end of the fetal alcohol spectrum disorders, which includes both neurodevelopmental disorder and birth defects caused by drinking alcohol during pregnancy
- Partial fetal alcohol syndrome — presence of some signs and symptoms of fetal alcohol syndrome caused by drinking alcohol during pregnancy, but the criteria for the diagnosis are not met
- Neurobehavioral disorder associated with prenatal alcohol exposure — problems functioning due to neurocognitive impairments, such as problems with mental health, memory, impulse control, communication and daily living skills, caused by drinking alcohol during pregnancy”

(Mayo Clinic, 2018)

All individuals with FASD have one thing in common—they were prenatally exposed to alcohol. FASD can only occur when the biological mother consumes alcohol while she is pregnant. Whether or not the child will be affected or how severe the disabilities will be depend on several factors. These factors include, but are not limited to, the following:

- Maternal drinking pattern
- Differences in maternal metabolism
- Differences in genetic susceptibility
- Timing of the alcohol consumption during pregnancy
- Variation in the vulnerability of different brain regions

(Susan E. Maier & James R. West, n.d.)

FASD is often referred to as a “hidden” or “invisible” disorder because the disabilities caused by alcohol exposure are present from birth, but some are not noticeable until later in life. It is often hard to identify because some symptoms such as difficulties with executive functioning, impulsivity, difficulty understanding consequences of behavior, and misreading social cues among others, are behaviors that are also present in other disorders. Depending on where the child’s disabilities fall on the spectrum, he or she may not have the typical facial features that many associate with FASD. (National Organization on Fetal Alcohol Syndrome, n.d.)

So where does Student Assistance fit into this complex picture? Is there anything SAP teams can do? Fortunately the answer to that question is yes. A SAP team can:

- Educate themselves on the disorder and what schools can do to help. The Education & Fetal Alcohol Spectrum Disorders Toolkit which you can access [here](#) is designed for educators and parents/caregivers as well as service providers to help them understand how FASD impacts students and identify appropriate interventions. Each section provides a general overview of issues and challenges, as well as concrete strategies for overcoming those challenges. Along with the

toolkit there are other resources including videos, webinars and [Reach to Teach, Educating Elementary and Middle School Children with Fetal Alcohol Spectrum Disorders](#), a free 60 page publication that can be downloaded from the Substance Abuse and Mental Health Administration.

- Keep in mind that SAP team members do not diagnose or treat. Only a qualified practitioner can do this. It's important that SAP team members do not suggest to the parent that the child has FASD. As stated earlier the behaviors exhibited by a student could be associated with other disorders. However, it is appropriate to discuss the observable behaviors that have been documented by the student's teachers and other staff.
- Maintain a supportive, nonjudgmental attitude towards the family, as should be the case with all SAP referrals. Many people are not aware that even a small amount of alcohol can cause this disability. Many women didn't know they were pregnant when they consumed alcohol and discontinued drinking when they learned they were. Whereas others have adopted children with FASD. Regardless of the circumstances, the stigma that can be associated with FASD often keeps families from sharing information and getting the critical help they need.
- Participate annually in the FASD Awareness Month which takes place every September. The toolkit for this year can be downloaded [here](#).
- Sponsor or participate in alcohol abuse prevention efforts that will educate students about the dangers of consuming alcohol, especially if they are sexually active.

It is important to remember that while there is no cure for FASD, the difficulties a child or adolescent may experience can be mitigated by caregivers, educators, and practitioners who are informed, supportive, and who utilize individualized strategies the student will need to reach his or her full potential.

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RESOURCES

Tips for Teens Fact Sheets

Tips for Teens Fact Sheets provide information about the effects of short- and long term use of cocaine, heroin, methamphetamine, and inhalants. These insightful and easy-to-read brochures provide important facts teens need to know, answer frequently asked questions, and help to dispel common myths about each of the substances covered. Access the free downloadable fact sheets by clicking on the corresponding link. [Tips for Teens: The Truth About Cocaine](#);

[Tips for Teens: The Truth About Heroin](#); [Tips for Teens: The Truth About Methamphetamine](#); [Tips for Teens: The Truth About Inhalants](#)

Implementing Change: Addressing the Intersections of Juvenile Justice and Youth Homelessness for Young Adults

The Coalition for Juvenile Justice's report [Implementing Change: Addressing the Intersections of Juvenile Justice and Youth Homelessness for Young Adults](#) was informed by the expertise of leaders from across the country. The report highlights ways to address the intersections of youth homelessness and juvenile justice.

TRAINING OPPORTUNITIES

Webinar: School Resource Officer Programs - 5 Critical Action Items to Consider

As students return to the classroom this year, school safety is of utmost importance for district leaders. One prong of a school safety plan is a school resource officer program. Whether you are in the evaluation stage or have an existing school-law enforcement partnership in place, there are critical steps to consider for an effective school resource officer program. Join us for an interactive webinar presentation to gain insights on:

- The role of school resource officers How to choose the best person for the job and the types of training needed
- Fostering a positive relationship between school resource officers and students
- Establishing an essential agreement between your school district and local law enforcement agency
- Building a partnership between school-law enforcement and the broader community

September 12, 2018

1:00pm - 2:00pm EST

Reserve your seat [here](#).

PASAP Regional Workshops

Workshops are scheduled throughout the Commonwealth of Pennsylvania during the year. These one-day workshops are planned to be held at a location within a PASAP Region. Go [here](#) for this year's tentative schedule.

Upcoming PASAP Webinars

PASAP is pleased to offer to its members free webinars each year. Beginning in the fall and ending in the spring a series of four webinars are scheduled. Current topics of interest relevant to SAP professionals in the field are offered. All webinars are scheduled for broadcast at 2:30 p.m.

2018-2019 Webinars

Wednesday, October 17, 2018

Topic: Vaping Update with Mallory Henry, Caron Treatment Centers

Wednesday, November 14, 2018

Topic: Engaging Parents in Elementary SAP with Wendy Line, Caron Treatment Centers

Wednesday, February 13, 2019

Topic: MTSS- What SAP Professionals Need to Know with Susan Tarasevich, UPMC Addiction Center

Wednesday, April 10, 2019

Topic: TBD

Go [here](#) for more information.

Trauma-Informed Classroom

This intensive one-day training, presented by Josh MacNeill, Director of NeuroLogic Initiative at Lakeside in North Wales, Pa., will provide an initial introduction to a trauma-informed approach to working with students. The session will provide a

basic overview of the brain and neural-development and an understanding of trauma and its impact on the brain. Participants will then explore many practical solutions to improve neural wiring and to bring out students' best potential. This training is appropriate for helping professionals working with grades K-12.

November 7, 2018

PaTTAN

Harrisburg, PA

Register [here](#).

Archived Webinar--Suicide & Bullying: Preventing Suicide through Collaborative Upstream Interventions

This is the sixth webinar of the Injury Control Research Center for Suicide Prevention's (ICRC-S) 2018 webinar series. In this webinar, Marci Feldman Hertz, MS, of the Division of Analysis, Research, and Practice Integration at the Centers for Disease Control and Prevention reviewed research on the relationship between bullying and suicide. Her presentation explored youth risk and protective factors that might increase or decrease the risk for bullying involvement or suicide across several socio-ecological levels. She also reviewed specific strategies that schools and youth-serving organizations can implement to increase protective factors for youth. Particular emphasis was given to increasing school connectedness as part of a multi-tiered strategy. Watch the webinar and view the slides [here](#).

SAVE THE DATE

Center for Safe Schools 20th Annual Safe Schools Conference

December 11-12, 2018

Hilton Harrisburg

Harrisburg, PA

Go [here](#) for more information.

PASAP-PAMLE Conference

February 24-26, 2019

Penn Stater Conference Center

State College, PA

Go [here](#) for more information.

NEWS

Depressed Children 6 Times More Likely to Have Skill Deficits

The Anxiety and Depression Association of America reports that as many as 2 to 3 percent of children ages 6-12 might have major depressive disorder. Now, researchers at the University of Missouri have found that children who show mild to severe symptoms of depression in second and third grades are six times more likely to have skill deficits, such as difficulties with social skills or academics, than children without symptoms. Parents and teachers also had difficulties recognizing depression in children.

"When you ask teachers and parents to rate a child's level of depression, there is usually only about 5-10 percent overlap in their ratings. For example, the teacher might report that a child has difficulties making friends in class, but the parent might not notice this issue at home," said Keith Herman, professor in the MU College of Education. "Some people would view that overlap as the truth about a child's well-being and areas of disagreement as errors, but we need to explore the possibility that they each are seeing different aspects of children's behavior and mental health."

Herman and education professor Wendy Reinke completed profile analyses of 643 children in early elementary school to explore how patterns between student, teacher and parent reporting can be used to gain a holistic picture of a child's mental health. They found that even though 30 percent of children in the study reported feeling

mildly to severely depressed, parents and teachers often failed to recognize the child as depressed. However, teachers and parents were more skilled at identifying other symptoms that might predict long-term risk for depression, such as social problems, inattention and skill deficits. This could be crucial, as Herman found that the children showing severe signs of depression were six times more likely to have skill deficits than their peers.

"The gold standard for identifying children who might be at risk for developing depression later in life is to ask the children themselves," Herman said. "However, even if a child doesn't say they feel depressed, certain outward behaviors might provide clues to the state of the child's mental health. It's important for teachers and parents to catch these behaviors early to prevent long-term problems that occur with depression."

Herman says mental health professionals can work with teachers and parents to identify depressive symptoms early by including self-reports from children in mental health evaluations. Screenings also should consider social difficulties, inattention and skill deficits as this might help provide support to at-risk students before they develop further depressive symptoms. Read more about the study [here](#).

CDC Youth Risk Behavior Surveillance, 2017

The Centers for Disease Control and Prevention ([CDC](#)) has released [2017 data](#) from the national Youth Risk Behavior Surveillance System ([YRBSS](#)). The data show that 17.2 percent of students seriously considered attempting suicide, 13.6 percent made a suicide plan, and 7.4 attempted suicide in the 12 months before the survey was carried out.

Nonsuicidal Self-Injury among U.S. Adolescents

A study of high school students in 11 U.S. states found that nearly 18% had engaged in at least one act of nonsuicidal self-injury (NSSI) in the past year. This research identified youth who may be at higher risk for NSSI, including younger females, and those experiencing risk factors such as bullying, depression, suicidal thoughts or behaviors, and substance use. The authors suggested that school- and community-based programs could help address these risk factors, as individual clinical interventions alone may not be adequate. Read more [here](#).