Monitoring Students’ Complete Mental Wellness: Tier 1 and Tier 2 Best Practices

Michael Furlong
Susan Coats
Brian Leung
7 WISHES EVERY PARENT HAS FOR THEIR CHILD
MY LIFE IS GOING WELL
MENTAL WELL-ETH

1. Strongly Disagree
2. Moderately Disagree
3. Mildly Disagree
4. Mildly Agree
5. Moderately Agree
6. Strongly Agree
My life is going well

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Moderately Disagree</th>
<th>Mildly Disagree</th>
<th>Mildly Agree</th>
<th>Moderately Agree</th>
<th>Strongly Agree</th>
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</table>

- Getting along with peers?
- Risk behaviors?
- Emotional Wellness?
- Academic Engagement?
My life is going well

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
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<th>Strongly Agree</th>
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Getting along with peers?
Risk behaviors?
Emotional Wellness?
Academic Engagement?
“My life is going well”

Number per 1,000

<table>
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<tr>
<th></th>
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80
60
50

Strong
Moderate
Mild
Mild

Safety and Security
Feel Safe at School

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<tr>
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My Life Is Going Well

F = 356.56 (4, 4667), p < .0001.
School Bonding
I feel I am a part of this school

<table>
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<td>35</td>
<td>41</td>
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phi = .42

My Life Is Going Well
Making a Contribution
Something important to contribute to society

My Life Is Going Well

F = 256.71 (5, 4624), p < .0001.
Emotional Distress
Considered attempting suicide

<table>
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<th>Mild</th>
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<td>38</td>
<td>24</td>
<td>11</td>
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My Life Is Going Well

DISAGREE

AGREE

\( \phi = .38 \)
Academic Engagement
Self-Reported Grades

My Life Is Going Well

DISAGREE  |  AGREE

Strong  |  Moderate  |  Mild  |  Strong

A or B Grades

 phi = .25
Quality of Life
Did you eat breakfast today?

My Life Is Going Well

DISAGREE

AGREE

phi = .18
Getting to 
Moderately and Strongly Agree

More/Higher
• Safer
• GPA
• Making contribution
• Life has meaning
• Satisfied with teachers
• Satisfied with peers
• Part of, belong at school
• Attendance
• Eats breakfast

Less/Lower
• Distress
• Suicidal ideation
• Drinking alcohol
• Anxiety
My Life is Going Well

“Moderately” or “Strongly” Agree

"X" Factor

% 0 20
1 28
2 39
3 39
4 73

\[ \phi = .59 \]
Institute of Education Sciences
Successful, Thriving Students
CoVitality Framework

12 Individual Strength Subscales

- Optimism + ZEST + Gratitude
- Emotion Regulation + Self-Control + Empathy
- Family Support + Peer Support + School Support
- Self-Awareness + Self-Efficacy + Persistence

4 Domain Strengths

= Engaged Living
= Emotional Competence
= Belief-in-Others
= Belief-in-Self
CASEL Balance Principle

“It is not about whether the framework is exhaustive and includes all competencies but whether it is balanced enough to include major dimensions of SEL versus being focused on only a few dimensions”

(Blyth et al., 2019, p. 3).
“To succeed in life, you need three things: a wishbone, a backbone and a funny bone.”

Reba McEntire

...and CoVitality bones?
How are your bones?

Foundation
Osteoblasts
Sclerostin
7-year cycle
Exercise
Youthful
Memory

Build
Maintain
Foster
How are your SEL bones?

Social Emotional Health Survey
Response Options

1 = Not at true
2 = A little true
3 = Pretty much true
4 = Very much true

Strength = > 3.0
Counting Student Strengths

Belief in Self
Belief in Others
Emotional Competence
Engaged Living

Number SEHS-S Strengths

Percent

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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<td>23</td>
<td>22</td>
<td>17</td>
<td>15</td>
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Student Connectedness

School engagement and climate
“I am happy to be at this school”

Responded Agree or Strongly Agree

<table>
<thead>
<tr>
<th>Number SEHS-S Strengths</th>
<th>Percent</th>
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<tr>
<td>4</td>
<td>79</td>
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</table>
Emotional Health

Life Satisfaction and Distress
“Sad or hopeless almost every day”

Percent Yes

Number SEHS-S Strengths

0: 45
1: 50
2: 39
3: 29
4: 15
California Student Wellness Study

- California Healthy Kids Core
- Social Emotional Health Survey-Secondary (36)
- Social Emotional Distress Survey (10)
  - Mental Health Continuum-Short Form (14)
  - Brief Multidimensional Life Satisfaction (5)


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Twitter @UCSBCovitality

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Our Institute of Educational Sciences has gathered information with which to validate and assess the practical utility of the SEHS-S. The main aims are:

1. refining the measure for use in schools,
2. verifying the construct validity,
3. investigating the criterion validity,
4. examining the consistency and stability of responses,
5. investigating strategies for evaluating the credibility of student responses, and
6. analyzing students’ responses for the presence of empirically-defined profiles or classes.

We now have assembled a sample of 120,000 California students in Grades 7-12 and will issue a technical report for the SEHS-Secondary (2020) version in the coming months.
What is the CoVitality principle?

Positive personal mindsets develop with some degree of synchronicity... one’s sense of gratitude might be fostered when a teacher or friend helps them with a challenging math problem. The helpee experiences gratitude for the support, just as their own sense of self-efficacy is fostered when they recognize, “hey, I can do this!”

When considering global well-being, the concept of covitality has been used for benefits that emerge from multiple competencies and strengths in the fields of biology (Weiss & Luciano, 2015), complex personality models (Coppock, Vitale, Barabak, & Scholten, 2013).
CASEL SEL Framework, N = 25 Elements

- Impulse control
- Stress management
- Self-discipline
- Self-motivation
- Goal-setting
- Organizational skill

Self-Awareness

- Communication
- Social engagement
- Relationship-building
- Teamwork

Self-Management

- Identifying problems
- Analyzing situations
- Solving problems
- Evaluating
- Reflecting
- Ethical responsibility

Social Awareness

- Perspective-taking
- Empathy
- Appreciating diversity
- Respect for others

Responsible Decision Making

- Reflecting
- Ethical responsibility

Relationship Skills

- Identification of problems
- Analyzing situations
- Solving problems
- Evaluating
- Reflecting
- Ethical responsibility
Summary

- Rationale: wellness (flourishing)
- Monitoring, not screening (bones)
- Balance: strengths and distress indicators
- Practical Solution: SEHS-S and SEDS
- Specifics: available on website
Kia Ora
But...How do you do this?

Susan Coats
Brian Leung
A MTSS Model of CoVitality Implementation

Susan Coats, Ed.D.
CASP Chair, Baldwin Park USD
Mental Health and Crisis Intervention
coatslep@gmail.com
Why CoVitality in our Mental Health MTSS Framework?

Primarily because it is...

- Strength Based, Dual Factor Approach
- Provides immediate results for student prevention/ intervention
- Aligns with our SEL program (Second Step)
- Is sensitive to Internalized Behaviors
CoVitality App (Social Emotional Health Survey)
Notable youth behaviors typically referred for discipline.

Typically, highly interactive and social Examples.

Disruptive and oppositional behaviors, truancy, verbal bullying, relational aggression, defiance, theft, and vandalism.
Internalizing Disorders

Behaviors
- Socially and academically are “treading water”
- May use academic achievement as a coping mechanism; he/she doing “well” and are even less likely to be identified and offered support/help
- Examples.
  - School refusal
  - Reduced pleasurable activities
  - Poor work completion
  - Somatization
  - Social isolation
  - Unhealthy sleeping habits

Interventions
- Psychoeducation
- Self-monitoring
- Problem solving
- Cognitive restructuring
- Activity scheduling (pleasurable, instrumental, exercise)
- Social skills
- Relaxation
- Exposure
CoVitality (PBIS/MTSS) Site Teams

- Administrators
  - Principal
  - Assistant Principals
- School Employed Mental Health Staff
  - School Counselors
  - School Psychologists
- School Based Community Mental Health Agency Staff
- Other
Determining Screening Schedule

- **What subgroups/classrooms?**
  - Grades 4<sup>th</sup> – 12<sup>th</sup>
  - Sites decide on teachers and time of day

- **When?**
  - September 9<sup>th</sup> – October 31<sup>st</sup>
  - Allows for pre-post intervention surveying

- **Who reads the script to classrooms?**
  - Teacher or Screening Team Members
  - 25-40”, dependent upon student
CoVitality Dashboard

Number of Surveys:
- Available: 379
- Completed: 326

Risk Group Overview and Reporting:
- School Climate
- Student Profile by Grade Level
- Aggregate Response
- Data Export

Strengths (CoVx) by Risk (PD) Dual-Factor Risk Groups:
- Covitality (CoVx)
- Psychological Distress (PD)

Categories:
- Normal
- At-Risk
- Elevated

Levels:
- Low
- Low Average
- High Average
- High

Risk Levels:
- Langishing
- Getting By
- Moderate Thriving
- High Thriving
- Moderate Risk
- Vulnerable
- Inconsistent
- Highest Risk
- Inconsistent
Results and Insights

- Mental Health “gauge” for the development of Tier 1 School-wide Supports, Tier 2 Targeted & Tier 3 Individual interventions

- Analysis: Site & District
  - School Climate
  - School Aggregate Data
  - Student Profiles and Comments
  - Elevated Students

- Determine Follow-up and Monitor Progress
  - Student Interventions
  - Targeted Group Interventions
  - School-wide Activities
“Elevated” Profile Follow Up Interviews

- Elevated student packets created by site for each interviewer
  - District Data Student profiles
  - CoVitality profiles
  - CoVitality Interview Forms
  - Excel Chart for each interviewer
  - Document “CoVitality Meeting” in District Confidential Log

- All paperwork returned to administrative designee. Administrator reviews all notes for any site follow up and that all Elevated students are seen.

- CoVitality Student Interview Forms sent to DO Administrator for qualitative data collection.
CoVitality “Elevated” Student Interviews

Secondary Profile
Elementary Profile
Elevated Excel Sheet
District Student Interview Form
CoVitality “Elevated”
Student Interview Concerns

Bar chart showing the frequency of different concerns:
- ADHD
- Substance Use
- Homeless
- Foster Youth
- ACES (Trauma)
- Anger
- Bullying
- Suicide Ideation
- Depression
- Social Peer Issues
- Family System Issues
- Anxiety

The y-axis represents different concerns, and the x-axis represents the frequency.
Tier 3 Intensive Interventions
- Special Education
  - Data (SE DIS Counseling, ERMHS)
- School Based MH Agency Referral
  - Data (Current Clients)
  - Data (New Referrals)
- MH Hospitalizations
- Suicide Prevention
  - Data (Re-Entry Safety Plans)

Tier 2 Targeted Interventions
- PBIS (Tier 2)
  - Data (Ex. CICO)
- CoVitality Follow Up
  - Data (Elevated students, Student Interview Form)
- Mindup Student Groups
- CBT Student Groups
- Girl/Boy Talk Groups
- NAMI High School Clubs
- Second Step Anti-Bullying Program

Tier 1 Universal Supports
- PBIS (Tier 1)
  - Data (CHKS, School Climate Survey)
- Second Step TK-8th Grades
  - Data (Summative Assessments)
- Suicide Prevention PD (Staff, Parent, Student)
  - Data (Risk Assessments, Hospitalizations)
- CoVitality Survey 4th-12th Grades
  - Data (Individual, Grade, School Climate)
- Parent MH Presentations

Intensive Interventions
(School-Employed MH Professionals, Community MH Professionals)

Targeted School Interventions
(Groups led by School-Employed or Community MH Professionals)

School-Based Prevention
Co-Vitality as part of an individual assessment

- CoV is designed as a school-wide assessment
  - It can identify groups of students who need MH support
- Could it also be used with individual students within a typical psycho-educational case study?
- Asked 2 LMU school psychology program alums to use with students
- Both work in charter schools
- Used with 3 SPED student triennials
  - BASC and CoV were both used
Very positive experience with CoV

**Lily**
- It looks at different areas than other social emotional rating scales.
- It is easy to administer.
- The write up is easily adapted to individual report templates.
- It is parent/consumer friendly and positive.

**Katie**
- CoVitality was a very easy survey to utilize with students.
- I found the handouts the program provides to assist students in growing their subdomains helpful to give to parents and teachers.
  - Lots of documents as resource to use as recommendations in my reports.
- It allowed for a more positive discussion about strengths students possess after discussing the results of the BASC (I decided to use the BASC and CoVitality). Parents seemed to appreciate that focus.
Specific comments – Student 1

- Struggling with school refusal due to a hard home life and past trauma (PTSD, involved in children's court, foster care, etc). He was previously identified as a student with SLD.

- Covitality results were very positive to the point where I think he may not have been honest. He rated his personal distress to be normal when I think he may have more personal distress than other kids his age as evidenced by a review of records, interviews, and the fact that he is currently struggling to attend school regularly and missed over 100 days last year.

- He also reported high social emotional strengths and falls in the high thriving complete mental health priority status, which indicates that he reports low levels of distress and his levels of personal assets and that combo means he should be functioning well in school; however, he is not. I don't think this is the fault of the co-vitality app. Just interesting results and probably him wanting to portray himself in a positive light.
Specific comments – Student 2

- **11th grader** and it's his triennial and we are looking into exiting from SPED as his grades have been As and Bs the past three years with very minimal sped support (also good teacher comments, observations, etc).

- Covitality results weren't as strong and I was honestly a bit disheartened because I want everything to be positive if we are looking at exiting (I know it doesn't need to be). Nevertheless, the overall results indicated that the student has a positive sense of bonding, trust, and support in his interpersonal relationships. He reported feeling connected to school.

- Areas for growth included his belief in himself, emotional competence and engaged living. Overall, he had no immediate areas of concern and could benefit from school-wide activities that foster optimism and personal competence. I really liked that the co-vitality write up indicated that there were no immediate areas of concern and that he could benefit from tier 1 activities.
Not typical Domains of SE assessment

- **Belief-in-Self** assesses a youth’s overall sense of self and personal competence. This construct includes self-efficacy, self-awareness, and persistence. Score indicates mindset about their personal competence.

- **Belief-in-Others** assesses a youth’s general appraisal of the quality of their social supports and general level of interpersonal trust and connectedness. The subscales comprise school support, peer support, and family coherence. Score indicates sense of bonding, trust, and support in their interpersonal relationships.
Not typical Domains...

- **Emotional Competence** is at the core of a youth’s ability to successfully manage emotions to enhance interpersonal relationships and to reach desired goals. Emotional regulation, empathy, and behavioral regulation are the subscales. Score indicates confidence in the personal capacity to use core social emotional skills to manage and express their emotional experience.

- **Engaged Living** assess personal assets that are closely linked with a youth’s happiness and enthusiastic participation in school, family, and community activities. Score indicates appreciation for what life has provided them, enthusiasm in their daily activities, and aspirations for the future.
Additional domains

- **Overall Life Satisfaction** (on a scale from 1 to 100) – This domain, related to youth’s happiness, has been shown to be a useful global indicator of mental health and predicts positive engagement and school success.

- **School Connectedness** is the students’ perceptions that their teachers care about them as a person and student, which is a known protective factor against involvement in risk behaviors and promotes positive development. Score have been shown to be related to school grades, to feel safe at school, and likelihood to engage in developmental risky behaviors.
Summary

- Easy to administer
- Can be incorporated into a Social-Emotional area of assessment
- Include areas that are not typically assessed in other instruments that provides Positive indicators
- Allows for recommendations that promotes positive mental health (vs remediate negative)
  - Not being Sick is not the same as being Well!
- App contains good resources as handouts or material for PD