Prevention and Mitigation of Alcohol and Drug Use within a MTSS Framework

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Poll Everywhere
Agenda

- Adolescent substance use trends and Impact
- Review how substance misuse programming fits within the context of PBIS and the Interconnected Systems Framework (ISF)
- Practice selection and refinement
Learning outcome for the session

1. Understand substance misuse as a part of broader behavioral health supports

2. Identify strategies for bolstering and streamlining supports for substance misuse within a multi-tiered system of support
Adolescent Substance Use Trends
Use of a substance for a purpose that is not consistent with legal or medical guidelines*

*Includes use of prescription drugs:

- without a prescription,
- for a reason other than the condition for which they were prescribed, or
- using at a higher quantity, more frequently, or for longer duration than prescribed.
Trends in Substances

What changes have you noticed?
Alcohol (5+ Drinks)
Cigarettes

Use
% who used in last 30 days

8th Grade
10th Grade
12th Grade

PERCENT

YEAR

MONITORING the FUTURE
NATIONAL SURVEY RESULTS ON DRUG USE
1975–2021
Vaping

Any Vaping
% who vaped in last 30 days

PERCENT

YEAR

MONITORING the FUTURE
NATIONAL SURVEY RESULTS ON DRUG USE
1975–2021
Prescription Opioids

**OxyContin Use**
% who used OxyContin in last 12 months

**Vicodin Use**
% who used Vicodin in last 12 months
U.S. Students Reporting Any Past-Year Illicit Drug Use*

*Illicit drug use in this survey was defined as use of marijuana, LSD, other hallucinogens, crack, other cocaine, or heroin; or any use of narcotics other than heroin, amphetamines, sedatives (barbiturates), or tranquilizers not under a doctor's orders.

Source: 2021 Monitoring the Future Survey

MONITORING the FUTURE
NATIONAL SURVEY RESULTS ON DRUG USE 1975–2021
Figure 4: Mean of Self-Reported Change in Drug Use Since Pandemic Among Past Year Users in All Three Grades Combined, 95% Confidence Intervals
Students with Substance Possession Referrals

* Substance category denotes substance possessed on first referral.
Figure 2. National Drug-Involved Overdose Deaths*, Number Among All Ages, 1999-2019

*Includes deaths with underlying causes of unintentional drug poisoning (X40–X44), suicide drug poisoning (X60–X64), homicide drug poisoning (X85), or drug poisoning of undetermined intent (Y10–Y14), as coded in the International Classification of Diseases, 10th Revision. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2019 on CDC WONDER Online Database, released 12/2020.

(CDC, 2020)
Opioid Crisis Impact
Impact of the Opioid Crisis on Schools

Students require substance misuse supports

For students who report high risk opioid use:

- Many report their initial exposure to non-medical prescription opioid use early in the middle school years (ages 10-12)
- Demonstrate greatest risk for heroin use late in high school
- Peer use can influence individual risks
Impact of the Opioid Crisis on Schools

Students need help coping with traumatic home experiences

Children of family members who use opioids and other substances are at higher risk for a range of problematic outcomes:

- Higher risk for developing opioid use disorder themselves
- Higher likelihood of encountering traumatic experiences
- Exposure to the child welfare system
Impact of the Opioid Crisis on Schools

Families need help coping as well

These problems can be wide-ranging, but they include situations like sudden loss of a family unique family structures:

- Shifting roles within the family can cause additional distress in addition to the loss
- New guardians, such as grandparents, may be renewed novices in parenting children of a different generation than their own
Adolescence: Risk taking is unusual (Hunt et al. 2010)
Early onset linked to dependence (Jordan & Andersen, 2017)
Early intervention is important (Gray & Squeglia, 2018)
Substance use disorders are rarely comorbid with mental health problems (Chan et al., 2006)
Recommendations

Foundation
- Alignment of Policies
- Time, funding, discipline
- Preventive Framework
- Team
- Systems
- Data
- Practices

Points of Engagement:
- Families
- Students
- Staff
Social Emotional Learning

Prevention
- Embed in school-wide expectations
- Universal curriculum
- Mental health promotion

Mitigation
- Counseling services
- Targeted and intensive interventions
- Monitoring

Resource: Teaching Social-Emotional Competencies in PBIS Framework
Alternatives to Exclusion

- **Prevention:**
  - Supervision
  - Instruction
  - Relationships

- **Mitigation:** Dealing with mistakes
  - Restorative approaches
  - Counseling
  - Referral for support
Employing Substance Misuse Expertise

Interconnected Systems Framework (ISF)

- Utilizing behavioral health practitioners and/or agencies
- A single system of delivery

School-Based Mental Health

- Resources:
  - PBIS and Mental Health
  - Installing ISF
Family Engagement

Prevention
- Newsletters
- Drug disposal
- Caregiver training monitoring
- Encouraging extracurricular activities

Mitigation
- Coordinate/Communication around Tier 2/3 services
- Referral resources
- Liaison to community providers
Professional Development

- Teacher Practices
  - School-wide PBIS practices
  - Behavioral health and wellness

- Referral Process

- Procedure for managing incidents

- Community-academic partnerships
Emergency Protocol

Plan for drug overdose on campus
◦ Identify signs
◦ First responder notification
◦ Opioid antagonists

Resource:
SAMHSA Opioid Overdose Prevention Toolkit
https://store.samhsa.gov/sites/default/files/d7/priv/five-essential-steps-for-first-responders.pdf
Responding with the Interconnected Systems Framework (ISF)
Recommendations

Foundation

• Alignment of Policies
• Time, funding, discipline
• Preventive Framework
• Team
• Systems
• Data
• Practices

Points of Engagement:

◦ Families
◦ Students
◦ Staff
Responding with Systems

- Pervasive, persistent issues require coordination
- Flexibility and pivoting of school teams
- Multi-tiered support
PBIS Structure ➔ Broader Needs

Interconnected Systems Framework (ISF)

School-Based Mental Health
Interconnected Systems Framework (ISF)

- A single system of delivery of mental health support
- Integrated services for **behavioral health** into schools
- Evidence-based practices integrated at each tier
- Social/emotional/behavioral health addressed with same level of attention as academic achievement

**Resource:** [https://www.pbis.org/topics/mental-healthsocial-emotional-well-being](https://www.pbis.org/topics/mental-healthsocial-emotional-well-being)
Interconnected Systems Framework (ISF)

- Requires
  - Reconsidering how tiered supports foster behavioral health
  - Partnership with behavioral health providers and partners
  - Adjustments to promote rigorous instruction and monitoring for these issues

Resource:
Interconnecting PBIS and School Mental Health to Improve School Safety: A Randomized Trial

- Partners: University of South Carolina (UofSC), University of Florida (UF), Medical University of South Carolina, Local School Districts and Mental Health Centers
- Operating 2016-2020 with two years of intervention vs. comparison and a follow-up assessment
- 24 schools, 12 near UofSC, 12 near UF, 8 each randomly assigned to PBIS only, PBIS + SMH, or ISF

This project was supported by Award No. 2015-CK-BX-0018 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect those of the Department of Justice.
Key Findings, ISF Schools

More involvement of school leaders and clinicians on MTSS teams

Improved Tier 1 programming

More students proactively referred for and receiving Tier 2 and 3 supports

Reduced in-school suspensions and office discipline referrals (ODRs)

Reduced out-of-school suspensions and ODRs for students of color
Interconnected Systems Framework (ISF)

- Advantages
  - Alignment and continuum
  - Coordination among staff
  - Improved access
  - Retention in care
MTSS Features within the ISF

Integrated Team Process

➢ Use an existing team
  • District and Community Leadership Team (DCLT)
  • Expand or merge teams with similar goals
  • Corresponding level of support

➢ Include staff and community partners with substance abuse expertise (e.g., Licensed Alcohol Drug Abuse Counselor; Certified Alcohol and Drug Abuse Counselor)

➢ Address barriers to improving an integrated effort

➢ Review and provide resources to:
  • Meet identified needs
  • Have capacity to implement with fidelity
  • Fit with the school and community contexts
MTSS Features within the ISF

Expanded Use of Data

- School data on substance use (e.g., discipline data, staff surveys, student surveys)
- Relevant community data sources on substance misuse and abuse
- Regional prevalence and trends on substance use from Center for Disease Control
- Incorporate substance use data with other mental health indicators
- Identify needs and monitor progress
Selection of Evidence-Based Practices (EBPs)

- Evidence-based programs addressing opioid crisis specifically are limited
- Draw from practical problem-solving and evidence-based approaches for broader substance use problems
- Team assesses implementation and program indicators of EBPs (e.g., Active Implementation Frameworks Hexagon tool)
- Apply across the three tiers of ISF
MTSS Features within the ISF

Screening

Use existing data sources for screening

Consider additional, substance misuse-specific screening tools to identify and respond

- Screening, Brief Intervention, Referral to Treatment (SBIRT)
- Car, Relax, Alone, Forget, Friends, Trouble (CRAFFT)
- Adolescent Drug Involvement Scale (ADIS)
- Drug Use Disorders Identification Test (DUDIT)
- Alcohol Use Disorders Identification Test (AUDIT)
MTSS Features within the ISF

Tracking Fidelity & Impact

- Fidelity Assessment Tools:
  - PBIS District Systems Fidelity Inventory (DSFI)
  - PBIS Tiered Fidelity Inventory (TFI)
  - ISF Implementation Inventory (ISF-II)

- Assess effectiveness of behavioral health and substance use interventions

- Examine data trends over time to determine ongoing needs of students
MTSS Features within the ISF

Professional Development

- School-wide PBIS practices
- Effective behavioral health integration
- Mental health awareness (MHFA)
- Behavioral health and wellness
- Wraparound services integration
- Community-academic partnerships
Enhancing Substance Misuse Supports with ISF
Interconnected Systems Framework (ISF)

- Advantages
  - Alignment and continuum
  - Coordination among staff
  - Improved access
  - Retention in care
Enhancing through Alignment

Tier 1
- Embedding SEL expectations
- Universal curriculum

Tier 2
- Small group SEL interventions

Tier 3
- Intensive support focused on needed SEL skills

Consistent language/instruction across tiers
Enhancing through Alignment

**Tier 1**
- ‘We Are Responsible’ includes
  - “listening to my body’s signals”,
  - “use my calming routine”
- Curriculum reviews feeling-thought-action cycle

**Tier 2**
- Small group intervention provides
  - 6-8 weeks, 2x per week
  - identifying “signals”
  - practicing other calming routines and communication strategies

**Tier 3**
- Intensive, daily instruction on
  - identifying and anticipating unique triggers and “signals”
  - individualizing a calming routine
  - Reinforcing practice

Consistent language/instruction across tiers
Enhancing through Access

Access in Tier 1
- All students get instruction
- All caregivers get information

Expanding Tier 2
- Screening
- Funnel into school-based services
- Caregivers engaged to reinforce skills at home

Expanding Tier 3
- Screening
- Funnel into school-based services
- Warm referral to partners in community
- Caregivers engage with family-based component
Impact of Systematic Social-Emotional-Behavioral Screening

Enhancing through Access

Access in Tier 1
- SEL instruction
- Newsletters, conference discussions about drug disposal

Expanding Tier 2
- SBIRT/CRAFFT Screening
- Moderate risk to social-emotional learning group
- Caregivers collaborate on practice, cues at home

Expanding Tier 3
- SBIRT/CRAFFT Screening
- High-risk to wraparound services
- Warm referral to substance abuse treatment in community
- Caregivers engage with family therapy, parenting skills
Enhancing through Retention

Easier access for parents and staff
- Cost
- Logistics

Integrating allows schools to monitor
- Attendance of intervention / Progress
- Implementation Fidelity

Proactive problem-solving at school
Enhancing through Coordination

- Embedding expertise in and across teams
- Bridging connection between schools and community providers
- Bridging connection between families and community providers
Tier 1 Programs & Practices

- Operation Prevention School-based Curriculum
  - Classroom resources
  - Parent toolkit
  - https://www.operationprevention.com/#about

- Botvin LifeSkills Training (LST)

- Strengthening Families Program

- Mindfulness (MindUp Curriculum)

- Positive Action

- SAMHSA Resource Guides
Tier 1 MMH Curriculum

The Michigan Model for Health includes age-appropriate student lessons (K-12) and teacher resources as well as family resources that help caregivers identify warning signs and where they can go to seek help.

- Advocating for a drug-free environment
- Analyzing influences on alcohol/drug use
- Using decision making and problem solving
- Advocating to reduce teen alcohol/drug use
- Accessing reliable information and resources
- Avoiding exposure to and resisting alcohol/drug use
- Practicing refusal skills
- Supporting others who want to stop using

Michigan Model for Health Scope and Sequence Article on the inclusion of Opioid Misuse Prevention Lessons
Tier 2 Programs & Practices

- Trauma-Informed Practices
- Coping Cat
- Grief & Loss
- Check-in/Check-Out
- Project Towards No Drug Abuse (Blueprints)
- SAMHSA Resource Guides
Tier 3 Practices

- Individual LADC Counseling Services
- Individual Mental Health Counseling Services
- Social Worker support for students and families to better access community resources and supports (Wraparound)
- Recovery High Schools
- SAMHSA Resource Guides
Tier 3 Practices

High-fidelity Wraparound Model

- Family and youth-driven planning process
- Wraparound Coordinator engages the family in self-discovery process
- Team formation includes network of helpers (therapists, teachers, family)
- Wraparound typically lasts 6-18 months depending on needs and progress
- May include Family Peer Support worker (e.g., Youth MOVE, NAMI)

The New Hampshire FAST Forward Process

1. Family Referred
2. Family Enrolled
3. “Hello” Strengths Discovery & Vision
4. Team Meetings Begin
5. Ongoing Services & Team Meetings
6. Family Transitions Out

Enrollment → Discovery → Team Meetings → Ongoing Services & Team Meetings → Exit Wrap
Vaping Evidence-Based Programs

- **Tier 1 Program: smokeSCREEN**
  - Explain how using tobacco products, including e-cigarettes, could negatively affect their health and lives
  - Demonstrate effective refusal skills to resist the use of tobacco products
  - Summarize how the media and tobacco marketing aim to influence teens to use their products

- **Tier 3 Program: This is Quitting**
  - Free and anonymous text messaging program from Truth Initiative designed to help young people quit vaping
  - Users receive one age-appropriate message per day tailored to their enrollment date or quit date
  - Throughout the program, users can text COPE, STRESS, SLIP or MORE to receive instant support

Summary

- Substance misuse is one aspect of broader behavioral health
- PBIS/ISF can be used to address behavioral health as a whole
- PBIS/ISF can streamline and enhance substance misuse services for students and families
Revisit: Learning outcome for the session

1. Understand substance misuse as a part of broader behavioral health supports
2. Identify strategies for bolstering and streamlining supports for substance misuse within a multi-tiered system of support
Questions
Thank you for your time today!

Contact Info:

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Exit Survey

Survey Link

How helpful was this session in supporting your understanding and programming around substance misuse in your community?

What about the session was most helpful?

What changes would you suggest to improve the session in the future?