

# School and Community Programs

IMPACT REPORT, SPRING 2022



## Bringing Effective Mental Health Supports to School Communities

Our School and Community Programs offer a comprehensive suite of mental health services for students and families. We provide treatment to students most in need of care, facilitate a layer of prevention for all students, and engage parents, educators, and school mental health professionals to create holistic support systems. Our services include:

### PROFESSIONAL TRAINING AT THE SCHOOL AND DISTRICT LEVEL

- Training for educators and mental health staff to deliver a K-12 mental health skill-building curriculum
- Training for mental health staff to treat students experiencing post-traumatic stress
- Training for paraprofessionals to deliver our reading remediation groups independently

### DIRECT CARE – PREVENTION

- A K-12 mental health skill-building curriculum for students to promote mental health and wellness
- Educator and caregiver workshops to support kids' mental health at school and at home

### DIRECT CARE – INTERVENTION

- In-school treatment for students experiencing post-traumatic stress
- In-school treatment for students experiencing depression or mood symptoms
- In-school treatment for students experiencing behavioral or attentional difficulties
- In-school remediation groups for students struggling with early reading skills
- Coaching and resources for educators and families to support students receiving treatment

# Achieving Significant Outcomes for Youth and School Communities

Since 2012, we have engaged nearly 64,000 students, parents, teachers, and mental health professionals across over 1,000 schools in New York City, the San Francisco Bay Area, and across the United States.

## OUTCOMES: PROFESSIONAL TRAINING

- On average, teachers and school mental health professionals who receive training in our mental health skill-building curriculum score **99% on a content assessment, and 99% of participants feel prepared to utilize our curriculum in their school.**
- On average, school mental health professionals who receive training in our trauma intervention score **97% on a content assessment, and 99% of participants feel prepared to implement trauma treatment groups in their school.** Students treated by our trainees demonstrate clinically significant reductions in PTSD symptoms.

98%

of educators find our mental health workshops helpful and would recommend them to a peer.

98%

of parents find our intensive Behavioral and Emotional Skills Training helpful and would recommend it to a peer.

## OUTCOMES: DIRECT CARE – INTERVENTION

- Students in our mood disorder treatment groups experience **statistically significant decreases in depression symptoms, improvements in emotional regulation, and increases in their use of coping strategies.**
- Students in our reading intervention groups experience **statistically significant gains in phonemic awareness, decoding, and reading fluency skills.**
- Students in our trauma treatment groups experience **statistically significant decreases in PTSD symptoms.**
- Our behavioral treatment groups **help high-need students achieve statistically significant increases in appropriate behavior, attention, on-task behavior, and compliance.** These supports significantly increase time on task for high-need students, with an average of **14 more minutes of academic engagement per class hour.**

## OUTCOMES: DIRECT CARE – PREVENTION

Of students who complete our mental health skill-building curriculum:

- **94% demonstrate a comprehensive understanding of mindfulness.**
- **91% demonstrate advanced knowledge of evidence-based relaxation strategies.**
- **83% understand the importance of their emotions and know how to identify their feelings.**
- Students who receive this curriculum in a small-group format experience a statistically significant increase in their belief that they can cope with future stressors.

# Measuring Success

SERVICE TIER	INTERVENTION	MEASUREMENT TOOLS	FREQUENCY
PROFESSIONAL TRAINING	Training in our mental health skill-building curriculum for teachers and school mental health professionals	Assessment of content knowledge Questionnaire on fidelity to model Qualitative feedback	Pre-, post-, and 1-month follow-up after intervention
	Training in our trauma treatment intervention for mental health professionals	Assessment of content knowledge Questionnaire on fidelity to model Qualitative feedback UCLA Post-Traumatic Stress Disorder Reaction Index (students' symptoms)	Pre-, post-, and 1-month follow-up after intervention
DIRECT CARE – PREVENTION	Workshops for teachers, school mental health professionals, and parents	Detailed post-workshop surveys	Post-intervention
	Mental health skill-building curriculum	Assessment of content knowledge Children's Coping Strategies Checklist – Revised Behavior Assessment System for Children, 3rd edition - TRS Elementary Version, Emotional Control and Resilience Subscale	Pre-, post-, and 1-month follow-up after intervention
DIRECT CARE – INTERVENTION	Trauma treatment groups	UCLA Post-Traumatic Stress Disorder Reaction Index Persistent Complex Bereavement Disorder Checklist – Youth Version	Pre- and post-intervention
	Mood treatment groups	Difficulties in Emotional Regulation Scale DBT Ways of Coping Checklist Children Depression Inventory 2 self-report Children Depression Inventory 2 parent-report	Pre- and post-intervention
	Behavioral treatment groups	Revised Edition of School Observation Coding System Strengths and Difficulties Questionnaire for parents and teachers	Pre- and post-intervention
	Reading remediation groups for at-risk readers	Phonological Awareness Screening Test Dynamic Indicators of Basic Early Literacy Skills, 8th edition	Pre- and post-intervention

# School and Community Programs Feedback

“We chose to implement the mental health skill-building curriculum with our fourth-grade community... By the time we reached our last session, our students were able to recall strategies they learned and moments they had enjoyed throughout the curriculum. Our students especially loved learning how to identify the intensity of their feelings, how to ride the wave of big emotions, and using different calm down strategies like progressive muscle relaxation and mindfulness. **I am sure that our fourth graders will not only remember this positive experience but also use these skills to be successful in their future.**”

LEAH BERNSTEIN, SCHOOL COUNSELOR  
HEBREW LANGUAGE ACADEMY CHARTER SCHOOL 2, BROOKLYN, NY



“It has been so wonderful for us to watch [our son] engage with [his clinician] and the DBT curriculum. **It has truly been a life-changing experience for him on many levels — most notably in what it has taught him about his ability to build trusting relationships.**”

PARENT OF CHILD WHO PARTICIPATED IN A MOOD TREATMENT GROUP

“The Child Mind Institute trauma therapy program has been instrumental in our school becoming a trauma-sensitive school. **In our partnership with the Child Mind Institute, dozens of children have received high quality mental health services usually unavailable to them in their neighborhood and through their insurance.** We have seen students diminish in their outbursts, anger and fight-or-flight responses.”

MARIA GARCIA, LCSW, SCHOOL SOCIAL WORKER  
PS 503K, BROOKLYN, NY



“I have been working with the Child Mind Institute ever since Sandy hit NYC in 2012. Once our schools closed due to the COVID-19 pandemic, I immediately contacted them to assist with providing social-emotional support for the 171 school counselors and social workers I work with in Queens, and we met over the summer to plan monthly professional development sessions for the entire 2020–21 academic year. **The tools they’ve provided during this unsettling time have been invaluable. Queens South schools and families are better because of the Child Mind Institute and I truly hope that we can continue our partnership in the coming years.**”

TARIQ MCKAY, SCHOOL COUNSELING MANAGER  
QUEENS SOUTH BOROUGH CITYWIDE OFFICES, QUEENS, NY



## Fostering Diversity, Equity, and Inclusion

Informed by feedback from the communities we serve and in light of the national dialogue around racism, our team has embarked on a variety of diversity, equity, and inclusion initiatives, including:

- **Increasing diversity** among our team by prioritizing the hiring of BIPOC and Spanish-speaking staff
- **Centering our professional development for clinicians on themes of racial stress and trauma as well as equity and anti-racism**
- **Facilitating regular team reviews of our materials**, seeking feedback related to considerations of race and identity, privilege, and relevance to the communities we serve
- **Convening bi-weekly anti-racism discussion groups** for our staff, informed by readings and expert guest speakers
- **Creating community review boards** made up of parents, teachers, and school administrators to help us ensure our materials and interventions are relevant to community concerns, adapted to the needs of diverse populations, and racially and culturally appropriate
- **Establishing a youth advisory council** to bring in the diverse perspectives of the youth we serve

We recognize that these efforts are only a first step. Diversity, equity, and inclusion will continue to be a central focus of our work as we explore new ways to improve our support of diverse communities.

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### OUR CORE PROGRAM PARTNERS AND SCHOOL DISTRICTS INCLUDE:

