



Building Bridges For Children's Mental Health

Behavioral Health Facts and Classroom Tips*

For use with Positive Behavior Supports & Response to Intervention

Substance Use Disorders

Symptoms or Behaviors

- Tardiness and/or truancy
- Academic slide
- Associating with negative peers and/or changes in peer group
- Family stress or lack of supervision
- Emerging aggression
- Changes in appetite and appearance
- Red eyes

Source: National Institute on Drug Abuse, *Preventing Drug Abuse in Children and Adolescents*,

Possible Educational Implications

Early abuse typically includes tobacco, alcohol, inhalants, marijuana, and prescription drugs such as sleeping pills and anti-anxiety medicines.

High-risk periods for drug abuse tend to be during major transitions, such as changing schools, and gap times, such as after school time.

Unintentional negative outcomes may arise when grouping teens for peer group prevention programs. Research suggests that grouping high risk teens may reinforce each other's behaviors.

Source: T. Dishion et al., "Preventing early adolescent substance use: A family centered strategy for the public middle school," *Prevention Science* 3(3):191-202, 2002.

Information for Parents & Teachers

All mental health concerns are treatable, and more treatment progress can be made by a coordinated partnership between schools and home. It is recommended that with family consent, all community partners work together and with the family.

Drug addiction is complex. It is a disease that affects the brain and more than sheer "will-power" to overcome. It can affect all age groups, socio-economic groups, and ethnicities. Drug addiction is preventable and can be successfully treated.

Benefits of early intervention

Risk factors to be aware of include the fact that family issues and modeling at home has a great impact on young children and that association with drug-abusing peers is a significant risk factor for adolescents.

Source: D. R. Gerstein et al. (eds.), *Preventing Drug Abuse: What Do We Know?*, Washington, DC: National Academy Press, 1993

Support from family, school, friends, and peers can be an important part of recovery. With sensitivity and support, a child or young adult can lead a healthy and productive life.

At Home

Research confirms the benefits of parents providing consistent rules and discipline, talking to children about drugs, monitoring their activities, getting to know their friends, understanding their problems and concerns, and being involved in their learning. Parents should minimize scare tactics and maximize factual data.

At School

Infuse preventive messages into health, reading, and other academic programs since school failure is strongly associated with drug abuse. Repeat prevention messages and activities.

Source:

www.camh.net/education/Resources_teachers_schools/Youth%20Scoop/youth_scoop_programs_work.pdf

In the Community

Enhance and align anti-drug messages, norms and pro-social behaviors across civic, faith based, judicial, recreation and community programs.

Positive interactions between parents/teacher are best:

- Share goals and strategies
- Become a good working team
- Touch base often
- Share concerns in a friendly manner
- Anticipate positive outcomes and interactions

Questions? Request an in-service at your school.

While it is important to respect a child's need for confidentiality, if you work with children or families, you are legally required to report suspected child abuse or neglect. According to CDE Guidelines, if you suspect possible abuse you are legally required to report your suspicions to the designated agencies immediately. This legal responsibility is not satisfied by merely reporting your suspicion to other school personnel.

Both a verbal and a written report are required. Please see a standard form for a written report in "Preventing and Reporting Child Abuse and Neglect", available at:

<http://www.cde.state.co.us/cdeprevention/pichildabuse.htm>

This fact sheet must not be used for the purpose of making a diagnosis. It is to be used only as a reference for your own understanding and to provide information about the different kinds of behaviors and mental health issues you may encounter in your classroom.

* Behavioral Health refers to mental health and substance use disorders



Published by the Colorado Department of Education's "Building Bridges" Grant with funding from the U.S. Department of Education Additional Building Bridges project information available at www.cde.state.co.us/cdesped/BuildingBridges.asp and www.csf-policy.org/buildingbridges/index.html



Building Bridges For Children's Mental Health

Behavioral Health Facts and Classroom Tips*

For use with Positive Behavior Supports & Response to Intervention

Proactive Instructional Strategies and Classroom Accommodations

Elementary prevention efforts can target academic and social-emotional learning of self-control, problem solving, communication and academic support. Middle and high school prevention efforts can target academic and social competencies, such as study habits, assertiveness, drug-resistant skills and peer support.

Classroom-based prevention should focus on what students need to be successful such as:

- Clear & fair behavior management system
- Social skills to improve interactions and reduce problem behaviors
- Academic enrichment, such as peer literacy supports or tutors.
- Booster sessions for reinforcement: repetition works

Source: www.drugabuse.gov/infofacts/lessons.html

Encourage youth to fight peer pressure with these tips:

- Stand up straight & be assertive
- Make eye contact
- Stick up for yourself
- Say how you feel & suggest an alternative plan
- Don't make excuses
- Get help from a trusted adults when needed

Source: www.thecoolspot.gov/index.asp

If a teacher or parent suspects a youth is using or trying drugs, consider the following steps:

- Create a coordinated plan between home & school
- Discuss suspicions with children calmly – not while he or she is not under the influence
- Impose disciplinary measures as required
- Reach out to professionals and parent groups for support
- Maintain a firm consistent message of anti-drug

Source:

www.lifescopes.com/pages/how2s/DrugChild_3.html

Additional Resources

About.com, <http://speialed.about.com/od/behavioremotional/a/odd.htm>, *Information and behavior contracts*

American Academy of Child and Adolescent Psychiatry, www.aacap.org, 800-333-7636
Information on child and adolescent psychiatry, fact sheets, current research, practice guidelines

Center for Effective Collaboration and Practice, <http://cecp.air.org/preventionstrategies/textonly.htm>

Colorado Department of Education: Fast Facts, http://www.cde.state.co.us/cdesped/download/pdf/FF-EBP_MH_ADHD.pdf

Colorado Department of Education Prevention Initiatives Unit, www.cde.state.co.us/cdeprevention/pichildabuse.htm

Colorado Division of Behavioral Health, www.cdhs.state.co.us/dmh, *Resource for mental health for all citizens of Colorado*

Colorado Division of Child Welfare, www.cdhs.state.co.us/childwelfare

Empower Colorado, <http://www.empowercolorado.com>

Federation of Families for Children's Mental health ~ Colorado Chapter, <http://www.coloradofederation.org>

FREE Resources for Students and Teachers, <http://backtoschool.drugabuse.gov/>

Mind Over Matter: Teachers Guide, Lesson Plan & Facts on Drugs, http://teens.drugabuse.gov/mom/tg_mj1.php

National Institute of Mental Health, www.nimh.nih.gov, 866-615-6464, *Free educational materials for professionals & public*

National Institute on Drug Abuse for Teens, <http://teens.drugabuse.gov/index.php>

National Registry of Evidence-based Programs and Practices, www.drugabuse.gov/infofacts/lessons.html
NIDA Lessons from Prevention Research

Parent Education and Assistance for Kids (PEAK), www.peakparent.org

SAMHSA'S National Mental Health Information Center, www.mentalhealth.samhsa.gov, 800-789-2647

Publications"

The Explosive Child, by Dr. Ross W. Greene, Harper Paperbacks, 2001