Evidence-based Treatment Services in Schools: What’s Possible?

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Questions

• What are the evidence-based treatments for children?

• How can they be implemented in schools?

• What special issues emerge when working in schools?
What are EBT’s for children?

• Studies and literature lags behind adult treatment literature, so answers are not always clear.
  – Just because its standard practice, does not mean its been shown to be effective
  – Published studies, reviews, expert consensus guidelines should be reviewed

• Studies and literature on immigrant and refugee children is especially lacking
  – Something that works in average American student might not work in your group
  – Published studies, reviews, expert consensus won’t get you much farther

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EBT Depends on the Type of Problem

• Many different manuals / models exist, but they often contain similar core elements
• Cognitive-behavioral approaches are effective for treatment of child/adolescent
  – Depression
  – Anxiety / PTSD
  – Behavioral problems (often involves parent)
• Medication is effective for child/adolescent
  – Depression
  – Anxiety / PTSD
• Several approaches have been shown to be effective for adolescent substance use (residential treatment programs)
How do you identify who needs an EBT?

• Screen students
  – Consent for screening
  – What measures to use?
  – Are they valid in your immigrant/refugee group?

• Wait until they come to your attention (parent, teacher referral)
  – Miss the quiet ones, anxious and depressed
  – Over-identify behavior problems
  – Can staff identify kids in need from within your immigrant/refugee group?
How can EBT’s be implemented in schools?

Option 1: Design a referral mechanism and linkage with a mental health center

This is the typical design for treatment in schools

Problems include:
  – Multiple barriers to getting care in a specialty setting
  – Is the mental health center delivering EBT?
    • Do not assume this is the case!
  – Does the mental health center have cultural and linguistic competence to serve your group?
How can EBT’s be implemented in schools?

Option 2: Bring mental health clinicians into the schools

This is the a growing model, overcomes some barriers to getting to a specialty clinic

– Transportation
– Stigma
– Parent motivation
– Payment/insurance issues

Problems include:

– Space
– Confidentiality
– Billing
How can EBT’s be implemented in schools?

Option 3: A program just for schools

For most problems, programs tend to be on the prevention/early intervention end of the continuum

For trauma exposure, for instance, a thorough review of the literature reveals at least 30 programs designed for schools

- Range from prevention to treatment
- For long-term recovery from trauma
- Majority use cognitive-behavioral skills
- Only 5 have been evaluated in any kind of controlled trial

- CBITS, Multi-Modality Trauma Treatment, UCLA Trauma/Grief Program, Overcoming the Threat of Terrorism, and Classroom Based Intervention
What are their characteristics?

• Brief, time-limited group activities for students

• Average 8-20 group sessions

• Some have components for parents or teachers

• Focus on symptom reduction and skill-building
  – Anxiety management
  – Resolution of trauma (narrative)
  – Peer support
  – Cognitive skills

• Run by mental health professional in most cases
  – 1 program run by teacher
  – Adaptation of CBITS for teachers is underway
What special issues emerge when working in schools?

• School Culture
  – Each school has its own, and there can be sub-cultures within each school

• Academic pressures
  – Pressures on schools for achievement, testing makes attention to mental health difficult

• Confidentiality
  – School personnel and clinicians have different ideas about confidentiality
What special issues emerge when working in schools?

• Stigma
  – Services need to be named, designed, run in order to minimize stigma

• Space, time, logistical constraints
  – No degree of planning can prevent the need for flexibility and trouble shooting on a daily basis

• School calendar
  – Can dictate timing and availability of services