ReClaimWV

A Toolkit for Connecting Social-Emotional and Mental Health Supports to the Opioid Epidemic





^{West Virginia} Behavior/Mental Health Technical Assistance Center

Revisions August 2019



West Virginia Board of Education 2019-2020

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A Message from the State Superintendent of Schools

Upon returning as State Superintendent of Schools in 2017, I found the landscape of public education much changed since my first tenure from 2005-2011. School leaders and educators are urgently requesting additional resources and supports to meet the needs of their students impacted by the opioid epidemic.

The West Virginia Public School System is on the frontline with teachers and school personnel often serving as the first responders to students who need their basic neurological, biological, psychological, and social emotional needs met. Supporting these students is a priority of our school system to ensure our children can continue to grow and thrive as they navigate the challenges they face.

West Virginia children are exposed to adverse childhood experiences creating toxic stress which manifests itself in a variety of ways in our classrooms. Childhood trauma crosses all socioeconomic barriers and has greatly affected students living in homes and communities directly engaged in substance abuse. While not the intent of the parent or caregiver, opioid addiction and other substance abuse often have a direct correlation with abuse and neglect. The manifestation of trauma in our schools ranges from erratic behaviors to an array of social-emotional needs in the classroom. For teachers and school personnel, the impact of toxic stress can reveal itself in the form of anxiety, depression, hopelessness, behavioral disorders, attention deficit hyperactivity disorder (ADHD), and others.

ReClaimWV is an initiative that seeks to advance wellness and resilience in students to equip them to become lifelong learners and achieve personal success. Students touched by trauma and the secondary impact of trauma on school personnel must be addressed and supported by schools, families, and communities.

In response to the Opioid Epidemic, the West Virginia Department of Education will support and collaborate with local education agencies, communities, and families to address the social-emotional, physical, behavioral, and mental health needs of our students. Please join us in this effort to "reclaim" our future leaders from the substance abuse epidemic.

Sincerely,

Awen L. Paine

Steven L. Paine, Ed.D West Virginia Superintendent of Schools

"In response to the Opioid Epidemic, the West Virginia Department of Education will support and collaborate with local education agencies, communities, and families to address the social-emotional, physical, behavioral, and mental health needs of our students."

— Dr. Steven L. Paine, West Virginia Superintendent of Schools



Introduction: A Response to the Opioid and Substance Abuse Epidemic in WV Schools

To address the needs of our students, families, educators, and schools, and to make the most of the state's limited financial and human resources, the West Virginia Department of Education has developed partnerships with local, district, state, and national governmental agencies as well as with numerous institutions of higher education and non-profit organizations.

The West Virginia Behavior/Mental Health Technical Assistance Center is an extension of the West Virginia Department of Education, which provides training and technical assistance to our public schools in meeting the growing behavioral and social emotional mental health needs of our students. The center was created as a response to local outcry for supports with issues related to student behavior/mental health needs as well as the need to improve the continuity of existing interventions in our public schools. The interventions supported by the center are based upon the national models and research related to multi-tiered systems of support (MTSS) and interconnected systems framework (ISF).

The West Virginia Department of Education, the West Virginia Department of Human Resources Bureau for Behavioral Health, the West Virginia Behavior/Mental Health Technical Assistance Center, the Marshall University School Health Technical Assistance Center, and several other partners are working together to improve the lives of students and families in our state. We realize the future of our state is at stake. Only in working together can we reclaim West Virginia from the grasp of addiction, poverty, and despair.

VISION STATEMENT: To advance the wellness and resilience of West Virginia students so they may become lifelong learners, productive citizens, and successful individuals.

MISSION STATEMENT: In response to the opioid epidemic, the West Virginia Department of Education will support and collaborate with local education agencies, schools, communities, and families to address the social-emotional, physical, behavioral, and mental health needs of our students.

RATIONALE: West Virginia's students are suffering from the fallout of the opioid epidemic that is engulfing the state's adults. The trauma these children are experiencing at home is affecting not only their ability to learn, but their entire lives. Violent and erratic behavior—most likely a response to toxic stress—is increasing in frequency, duration, and intensity, especially among younger children. In today's classrooms, teachers and administrators are having to address students' most basic physical, mental, social-emotional, and behavioral health needs before they can provide classroom instruction, causing additional burdens on educators and staff already stretched to capacity.

Student populations at greatest risk to experience trauma, according to The National Child Trauma Stress Network, include: those living in substance abuse environments; families facing economic stress; military and veteran families; children with intellectual and development disabilities; homeless youth; and, LGBTQ (Lesbian, Gay, Bisexual, Transgender, and Queer or Questioning) Youth.

This toolkit is one in a set of resources that provides general information, suggestions, contacts, and guidance for anyone working with or caring for a West Virginia pre-k – grade 12 student. For additional, more in-depth, and targeted information and resources please visit our website at *wvde.us/reclaimwv/*.

Partnerships

To address the needs of our students, families, educators, and schools, the West Virginia Department of Education is committed to partnering with a variety of local, district, state, and national governmental agencies.

West Virginia Governor's Council on Substance Abuse Prevention and Treatment

West Virginia Department of Health and Human Resources (WVDHHR)

- Bureau for Behavioral Health
- Bureau for Children and Families
- Bureau for Medicaid
- Bureau for Public Health
- Office of Drug Control Policy

Partners Funded in Part by WVDE:

- West Virginia Behavior/Mental Health Technical Assistance Center
- West Virginia Transition Technical Assistance Center
- WVDHHR/West Virginia Expanded School Mental Health
- West Virginia Children's Center for Justice
- West Virginia State University—Healthy GrandFamilies Program
- GRaCE Recovery Coach Academies

Drug Enforcement Administration (DEA 360

Strategy) drug prevention lessons and resources at *www.operationprevention.com*

Ed Venture — West Virginia Family Engagement Center

EVERFI — health education curriculum and resources

Family/Parent Engagement Resource Centers

First Choice - 1-844-Help4WV

Head Start and Early Head Start Programs

High Intensity Drug Trafficking Areas (HIDTA) program

Marshall University

Marshall University School Health Technical Assistance Center

Mission WV - supports foster care and adoption

Prevent Suicide WV

School Personnel Professional Associations

West Virginia Expanded School Mental Health

West Virginia Higher Education Policy Commission

West Virginia Homeland Security for human trafficking prevention

West Virginia Parent Teacher Association Coalition

West Virginia Parent Training and Information

West Virginia Primary Care Association (PCA)

West Virginia Secondary Schools Activities Commission (WVSSAC)

West Virginia Sexual Abuse Task Force

West Virginia University

Where Do You Fit Into the Puzzle to ReClaimWV Students?



ReClaimWV: Addressing the Opioid Crisis

A National Epidemic by the Numbers



People died every day from opioid-related drug overdoses³ (estimated)



47,600 People died from overdosing on opioids²

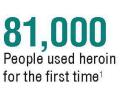


11.4 m People misused prescription opioids¹



2.1 million People had an opioid use disorder¹







886,000 People used heroin¹



2 million People misused prescription opioids for the first time¹



15,482 Deaths attributed to overdosing on heroin²



28,466 Deaths attributed to overdosing on synthetic opioids other than methadone²

SOURCES

- 1. 2017 National Survey on Drug Use and Health, Mortality in the United States, 2016
- 2. NCHS Data Brief No. 293, December 2017
- 3. NCHS, National Vital Statistics System. Estimates for 2017 and 2018 are based on provisional data.

Updated January 2019. For more information, visit: http://www.hhs.gov/opioids/



Opioids: Know the Facts

Every day, more than 130 people in the United States die after overdosing on opioids (CDC WONDER, 2018). The misuse of and addiction to opioids—including prescription pain relievers, heroin, and synthetic opioids such as fentanyl—is a serious national crisis that affects public health as well as social and economic welfare. The Centers for Disease Control and Prevention estimates that the total "economic burden" of prescription opioid misuse alone in the United States is \$78.5 billion a year, including the costs of healthcare, lost productivity, addiction treatment, and criminal justice involvement (Florence, Zhou, Luo, Xu, 2013).

What are opioids?

Opioids are a class of drugs that include the illegal drug **heroin, fentanyl** (a synthetic opioid pain killer), and **prescription pain relievers** available legally by prescription: oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, and morphine.

Prescription opioids (pain killers) can be prescribed by doctors to treat moderate to severe pain, but can also have serious risks and side effects. When misused – taken in a different way, in a larger quantity than prescribed, or taken without a doctor's prescription – a user can become addicted.

Fentanyl is a synthetic opioid pain reliever. It is many times more powerful than other opioids and is approved for treating severe pain, typically advanced cancer pain. Illegally made and distributed fentanyl has been on the rise in several states.

CDC Opioid Basics (2017)

Opioid Addiction is a Disease.

Addiction, also called opioid use disorder, is a serious medical condition. It is a chronic, relapsing brain disease with symptoms that include compulsive seeking and use of the drug, despite harmful consequences.

It is considered a brain disease because drugs change the brain; they change its structure and how it works. These brain changes can be long lasting and can lead to many harmful, often self-destructive, behaviors.

While the initial decision to use drugs is mostly voluntary, addiction often takes over and impairs a person's ability to self-regulate.

NIDA Drugs of Abuse Opioid Overview (2017).

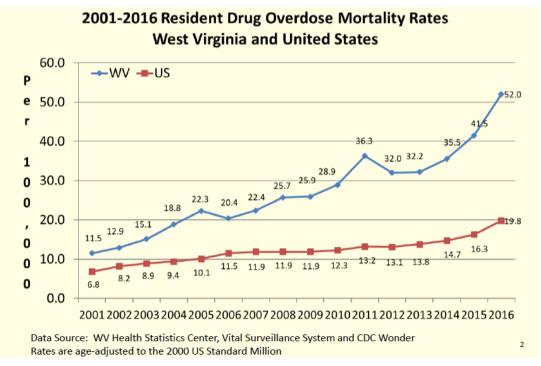
The WV State Profile: The Environments in Which Our Students Live

- **57.8 People per 100,000 died** from drug-related overdose deaths in West Virginia (WV) in 2017, the **highest rate in the United States** (CDC, 2018).
- **6,938 Children in West Virginia** were placed in foster care as of March 2019. **Parental substance abuse** was a factor in **82% of those placements** (KVC WV, 2019).
- **51.2 out of every 1,000 infants** were born with **Neonatal Abstinence Syndrome in 2014**; many of these children **entered kindergarten in the fall of 2019** (CDC, 2016).
- The West Virginia Department of Health and Human Resources (DHHR) released Neonatal Abstinence Syndrome (NAS) data for 2017 showing the overall **incidence rate of NAS was 50.6 cases per 1,000 live births (5.06%) for West Virginia residents** (WV DHHR, 2017).
- The opioid epidemic **cost the state's economy \$8.8 billion a year** (12 percent of GPD) the largest share of GPD among states for health care and substance abuse treatment, criminal justice costs, lost work productivity, and burden of fatal overdoses (Eyre, E., 2018).
- More than 40,000* children live with grandparents or other relatives.
 - » 10.6% of all children under age 18
 - » 34,806 of these children live with grandparents
 - » 21.5% of those grandparents live in poverty (AARP).
- West Virginia ranked 14th in the nation for suicide rates at 18.4 per 100,000 people compared to the national average of 13.8 (Nestor, 2017).
- The second leading cause of death in West Virginia among ages 15-34 is suicide.

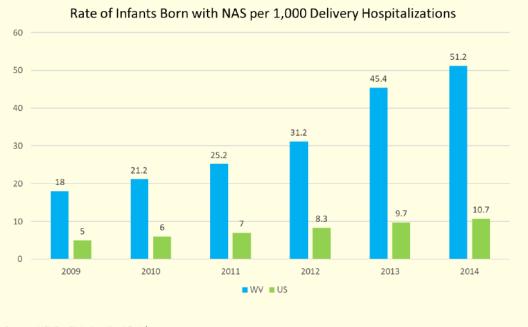


West Virginia Compared to the Nation

"West Virginia continues to lead the nation in overdose deaths per capita. This takes a significant toll on individuals, families, communities, and government resources" (WV DHHR, 2017).



Opioid use during pregnancy can result in a drug withdrawal syndrome in newborns called neonatal abstinence syndrome (NAS). The number of West Virginia infants born with NAS has significantly risen over the past several years and is much higher than that of the nation.



Source: HCUP – State Inpatient Databases https://mchb.tvisdata.hrsa.gov/PrioritiesAndMeasures/NationalOutcomeMeasures

IMPACT OF NAS IN W



Nationally, one child is born with symptoms of withdrawal every 15 minutes. - Vanderbilt, 2018



CHILDREN WITH NAS OFTEN HAVE

- vision and hearing issues
- feeding and gastrointestinal issues
- fine and gross motor delays
- sensory processing problems

(commonly misreported as behavioral issues) - executive functioning problems

WHICH CAN PERSIST BEYOND AND DESPITE BIRTH TO THREE



50.6 babies out of every 1000 are born with NAS 143 additional babies per 1000 statewide have intrauterine exposure #1 in country

* WVDHHR & WV Bureau for Public Health, April 2018



90% of our families report that they didn't feel they got the support or training they needed from DHHR to care for their child who was born drug dependent * To The Moon And Back WV 2019

NEONATAL ABSTINENCE SYNDROME OR NAS

IS A WITHDRAWAL SYNDROME INFANTS GO THROUGH AFTER BIRTH. IT Is caused by a pregnant woman's drug use during pregnancy and includes an infant's withdrawal from those substances. Nas is not limited to opiates and may also include medical assisted treatment. **Not all infants impacted by NAS requires medical intervention**



46% increase in the number of children CPS takes into custody 84% of all child protective service cases involve drug use. As of May 1, 2019 there are 7095 children in fostercare * *Bill J. Crouch, DHHR*

* Bill J. Crouch, DHHI Report 2019



10% of the children in West Virginia did not live with a parent in 2017. We now lead the nation in the percentage of children who do not live with either of their parents. * Anne E. Casey Kids Count Data Center



3-5 YEAR OLDS WITH NAS

Are at a particular risk. This is when Birth to Three ends and the school system can provide services for children. Our families report that school systems frequently find their child not eligible for services because the schools are not well educated in the long-term needs of children with NAS



SCHOOL SYSTEMS REPORT

Show an increase in the number of children with "behavioral issues" and Individualized Education Plans (IEPs) in the elementary school setting. 90% of teachers reported not feeling confident in knowing how to support children with parents who use substances and recent study recommends additional training for classroom strategies for challenging student behaviors

* WVU: A Crisis in the Classroom: Teachers and the West Virginia Opioid Epidemic 2019



HOW TO CLOSE THESE GAPS!

Similar childhood disorders such as Fetal Alcohol Spectrum Disorder (FASD) and Autism Spectrum Disorder (ASD) have specialized care coordination. Children with NAS need this same seamless coordination for our children to meet their true, full potential.

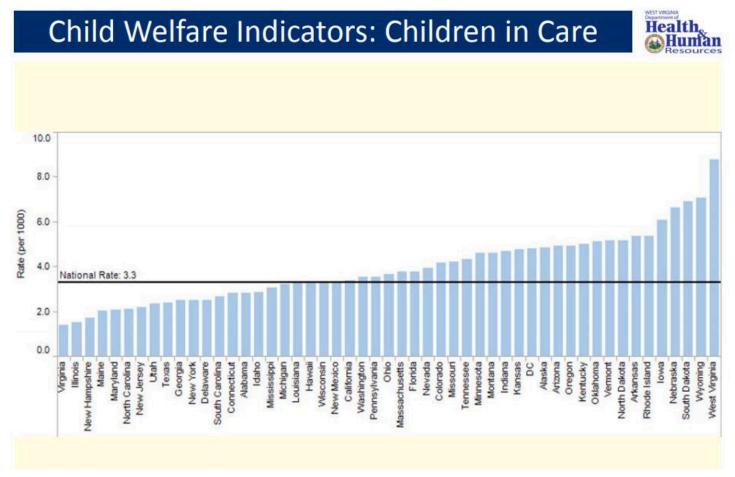


www.2themoonandback.org

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As Opioids Move In, Children Move Out

While many children are being raised by their grandparents, there are many more who are being placed in foster care because they do not have anyone to care for them.



"West Virginia is in the midst of a child welfare crisis and the prevalence of NAS is at the forefront of our issues," said Bill J. Crouch, DHHR Cabinet Secretary. "We have seen a 46% increase in the number of children we take into custody and 84% of all child protective service cases involve drug use. Children across our state have suffered more than anyone because of the drug epidemic and these NAS numbers quantify this tragedy" (WV DHHR, 2018).

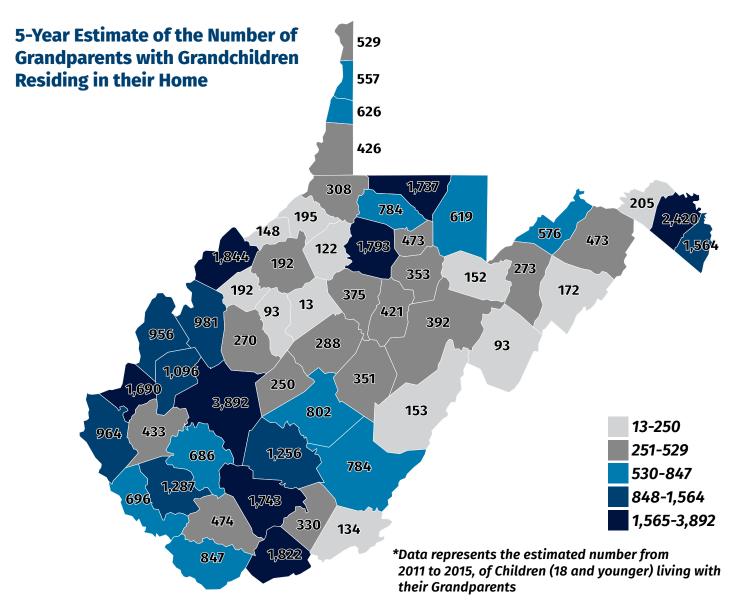
Mission West Virginia is one of the statewide organizations that provide child fostering and/or adoption services. They recruit foster families, support those who are raising another family member's child (or a child with close family ties), provide life skills education and create community connections. https://www.missionwv.org

Necco is another group that provides a number of services for children including fostering, fostering-to-adopt, counseling for children and families dealing with behavioral and substance abuse issues, and programs that combine therapeutic supports with learning that develops practical, real-life skills. *https://www.necco.org/services*



Kinship Care in West Virginia

West Virginians have a proud tradition of stepping up to care for kin as their families are fractured by death, illness, divorce, employment and economic changes, military deployment, incarceration, etc. However, the drug epidemic in particular has incapacitated more parents than ever and continues to increase the number of children needing care by relatives and others (Mission WV, 2018).



WV Relatives as Parents Program (RAPP) offers information and resources including: A Guide to Navigating Resources and Benefits for Relative/Kinship Caregivers in West Virginia. https://www.wvdhhr.org/rfts/files/Resource_Guide_Relative_Kinship_Caregivers.pdf

As the number of WV children being removed from their homes increases, Healthy Grandfamilies offers a free resource, including trainings, for grandparents raising grandchildren. For more information, go to: http://healthygrandfamilies.com/

Opioids, Trauma, and Mental Health: Making the Connection to Learning

Many factors contribute to a child's social-emotional well-being and success in school. Too often, we focus on what to do about low academic achievement scores instead of identifying the issues that may be attributing to the decline in student academic and behavioral outcomes. The nationwide Opioid Epidemic has ignited an unprecedented child welfare crisis requiring school systems to respond in providing help, support, and resources within the schools and beyond their walls to work with local partners to provide mental health services to students and families.

Children living in homes where opioids or other substances are abused often become the victims of trauma. These traumatic experiences impair the brain's development leading to socialemotional mental health issues and even challenging behaviors, which inhibit learning.

According to a new study from the Stanford University School of Medicine and the Early Life Stress and Pediatric Anxiety Program, traumatic stress impacts developing brains, specifically in the areas responsible for emotional regulation and attention.

What do we mean by "mental health" in terms of prevention and the *promotion of wellness* — *the contexts* most important to schools? Mental health is not simply the absence of mental illness; it is a positive state characterized by resilience, productivity, appropriate social behavior, and happiness. Students who exhibit good mental health do well in school, and schools that provide programs to advance their students' social, emotional, and behavioral wellbeing produce students with higher achievement than schools that do not provide such programs.

Source: Desrochers, John E., Kappan Magazine; kappanmagazine.org; December 2014/January 2015; V96 N4; pgs. 34-39

What is Child Trauma?

A traumatic event is an incident that causes physical, emotional, spiritual, or psychological harm. The person experiencing the distressing event may feel threatened, anxious, or frightened.

Child trauma describes the problem of children's exposure to multiple or prolonged traumatic events and the impact of this exposure on their development. Trauma exposure involves the simultaneous or sequential occurrence of child maltreatment- including psychological maltreatment, neglect, physical and sexual abuse, and domestic violence- that is chronic, begins in early childhood, and occurs within the child's family. For information and a free Child Trauma Toolkit, visit www.tipbs.com While these children are often labeled as learning disabled, the reality is that their brains have developed so that they are constantly on alert and are unable to achieve the relative calm necessary for learning (Child Trauma Academy, n.d.).

Educators, families, students, policymakers, and mental health professionals must come together to protect and promote the mental health of students. The West Virginia Department of Education has created ReClaimWV in response to our students' needs and educators' cries for help to reclaim our WV students from the Opioid Epidemic.

The Effects of Maltreatment on Behavioral, Social, and Emotional Functioning:

- Persistent fear response
- Hyperarousal (i.e. overly sensitive; fight/flight response; misinterpretation of nonverbal cues)
- Increased internalizing symptoms (structural and chemical changes in the brain)

CAUTION: SIGNS THAT A CHILD HAS BEEN IMPACTED BY TRAUMA OFTEN LOOK LIKE SIGNS OF DISABILITIES SUCH AS: AUTISM, ADHD, AND BEHAVIOR DISORDERS. WE MUST KNOW THE DIFFERENCE TO PREVENT MISDIAGNOSES AND MISS THE OPPORTUNITY TO HELP STUDENTS.

- Diminished executive functioning (i.e. working memory deficits, impulsiveness, cognitive deficits)
- Delayed developmental milestones
- Weakened response to positive feedback (less responsive to reward systems)
- Complicated social interactions (easily triggered to anger and aggression often due to misinterpretations of situations)

Source: Understanding the Effects of Maltreatment on Brain Development (*https://www.childwelfare.gov*)



Educator Resources

The following are resources to help schools and educators PREVENT opioid addiction, address trauma, and PROMOTE mental health education for students in West Virginia.

What is the Role of the School:

- School leaders, teachers and staff can create safe environments and positive cultures for students.
- Schools can educate students, each other and families about the dangers of drug use and about how to prevent opioid misuse and addiction.
- Many evidence-based prevention programs can be delivered in a school setting.
- Schools can help to mitigate risk factors that can make students vulnerable to engaging in dangerous behavior.
- Schools can also boost protective factors and increase student engagement.
- Schools can be prepared if an opioid overdose occurs on school grounds.
- Schools and school districts can support students in recovery and students whose family members are suffering from addiction.

https://www.ed.gov/opioids

Recognizing Trauma in the Classroom AWARENESS: Signs and Symptoms

How do you recognize the effects of trauma in your students? How do you interpret different kinds of behaviors so you can best respond to your students' needs? The following chart shows a variety of behaviors that can result from trauma.

DEMONSTRATED BEHAVIORS (varies depending on student's personality, experiences, and environment)				
Flight	Fight	Freeze		
» Withdrawing	» Acting out	» Exhibiting numbness		
» Fleeing the classroom	» Behaving aggressively	» Refusing to answer		
» Skipping class	» Acting silly	» Refusing to have needs met		
» Daydreaming	» Exhibiting defiance	» Giving blank look		
» Seeming to sleep	» Being hyperactive	» Feeling unable to move or act		
» Avoiding others	» Arguing			
» Hiding or wandering	» Screaming/yelling			
» Becoming disengaged				

WHAT TO DO: EMERGENCIES

If any of the behaviors are extreme and anyone, child or adult, might be injured, **call 911** or Children's Mobile Response and Stabilization Teams. These teams help our youth who are experiencing emotional or behavioral crises by interrupting the immediate crisis thus ensuring youth and their families are safe and supported in times of crisis. The programs provide supports and skills needed to return youth and families to routine functioning while keeping children in their home or current living arrangement, school and community whenever possible with the appropriate supports.

United Summit Center currently serves Barbour, Braxton, Doddridge, Gilmer, Harrison, Lewis, Marion, Monongalia, Preston, Randolph, Taylor, Tucker, and Upshur Counties. For more information, contact 1-844-HELP4WV or the crisis line at 1-844-WVKIDS-1.

FMRS Health Systems currently serves Raleigh County and surrounding areas in West Virginia. Contact FMRS Health Systems at 304-256-7100.

WHAT TO DO: Normal Circumstances

- Depending on the type of behavior being demonstrated
 - » Speak quietly to the child, preferably where you aren't overheard by the class, to determine what might be causing the negative behavior.
 - » Provide a "comfy" corner where the child can calm down; make sensory activities available such as music, soft lighting, lava lamp, aquarium, pillows for hugging, etc.
 - » Provide an opportunity for a nap if the child is sleep deprived.
 - » Create, teach, and consistently use a visual schedule to plan for the day so the child knows what to expect and when, in order to reduce anxiety/stress and provide a sense of security.
- If possible, contact the student's parent/guardian to see if the child has experienced any traumatic events over the past few months.
- Discuss the student's behavior with other teachers to determine if the child demonstrates concerning behavior in their classrooms as well.
- Consult your school counselor or psychologist. Have them speak to the child to determine what issues the child may be confronting.
- Call 1-844-HELP4WV for counseling and child psychology services that are available in your area (24-hr substance abuse and mental health call line).

Make T.I.M.E.

- **T** ake a walk or 1:1 moment with the person
 - nvestigate by asking, "What is wrong? I noticed..."
 - ake sure to develop a supportive relationship



For additional help and support, contact the following -

WV Bureau for Behavioral Health - Office of Children, Youth and Families

Room 350 350 Capitol Street Charleston, WV 25301 Phone: (304) 356-4811 Fax: (304) 558-1008 Main Office Hours: M - F 8:30 to 4:30

West Virginia Children's Mental Health Wraparound Project

c/o Tahnee Bryant of the W.Va. Bureau for Behavioral Health and Health Facilities at 1-304-356-4820 or *Tahnee.I.Bryant@wv.gov.* (http:www.dhhr.wv.gov/bhhf/) Read more at http://nwi.pdx.edu/wraparound-basics/.

WV Behavioral/Mental Health Technical Assistance Center

Amy Kelly, Director (kelly9@marshall.edu)

West Virginia Department of Education

ReClaimWV staff 1900 Kanawha Boulevard, East Charleston, West Virginia 25305 Phone: 304-558-2696

Safe at Home West Virginia

DHHR - https://dhhr.wv.gov/bcf/Services/Pages/Safe-At-Home-West-Virginia.aspx

The National Council for Behavioral Health

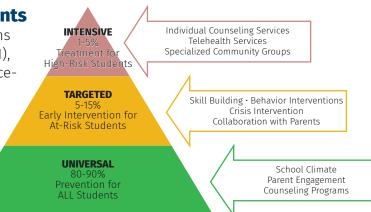
for more information on childhood trauma — https://www.thenationalcouncil.org/# for information on Mental Health First Aid https://www.thenationalcouncil.org/consulting-best-practices/trauma/ https://www.mentalhealthfirstaid.org/take-a-course/find-a-course/

Child Mind Institute

https://childmind.org/article/quick-facts-on-acute-stress-disorder/

WV Initiatives to Support Our Students

Positive Behavioral Supports and Interventions (PBIS), Expanded School Mental Health (ESMH), and Communities In Schools (CIS) are evidencebased models using the multi-tiered system of supports framework to support every student. These initiatives are being implemented in West Virginia schools to support students through universal prevention, targeted intervention, and intensive supports.





The goal of **WV PBIS** is to make schools effective and efficient and provide equitable learning environments for all students. Decreasing aggressive conduct and bullying can occur through improving culture and climate, building relationships with students and staff, changing academic outcomes and increasing prosocial behaviors. *wvpbis.org*

A jointly sponsored effort of the West Virginia Department of Education and the West Virginia Department of Health and Human Resources. **"Expanded school mental health"** refers to programs that build on core services typically provided by schools. ESMH is a framework that: includes the full continuum of prevention, early intervention and treatment; serves all students; and emphasizes



shared responsibility between schools and community mental health providers. wvesmh.org



CIS works inside school systems with superintendents, principals, educators, and other personnel, to forge community partnerships that bring resources into schools and help remove barriers to student learning. *wvde.us/cis/*

WV GRADUATION 20/20 is a West Virginia initiative to ensure all students graduate from high school with a world-class education, who are college and career-ready, with an emphasis on students with disabilities. https://wvde.us/special-education/initiatives/graduation-20-20/



Social Emotional Learning: Building Protective Factors

Social Emotional Learning (SEL) is the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions. SEL should be a deeply ingrained part of the way students and adults interact both in the classroom and out of it, and helps provide children with equitable, supportive, and welcoming learning environments. Research has shown that education promoting SEL can improve student achievement, health, classroom management, and discipline. Visit the Collaborative for Academic, Social, and Emotional Learning (CASEL) at *casel.org* for more information about SEL and resources.

WV Standards for Student Success

WV Policy 2520.19, the WV College- and Career-Readiness Dispositions and Standards for Student Success. address the importance of understanding yourself and others, maintaining positive relationships, and exhibiting respectful behavior. We recognize the importance of encouraging lifelong, positive health practices.

Through a developmentally appropriate, integrated approach, students will engage in activities that promote positive social and communication skills. They will develop their ability to determine and comprehend various points of view, solidify their understanding of constructive ways to resolve problems and conflicts, and strengthen their personal and scholastic self-confidence. Academically they will increase their capacity for both self-direction and for constructive collaborative work. They will familiarize themselves with various careers so they understand both what those careers entail and what types of learning will prepare them for those careers. Students will also increase their exposure to various cultures and communities at the local, state, national and international level.

WV STANDARDS OF STUDENT SUCCESS

 Understanding self and others Understanding thoughts, feelings, attitudes, beliefs Developing values and beliefs Developing skills for effective communication Learning skills for positive decision making Developing skills to maintain positive relationships Demonstrate respectful behavior Learning skills for positive conflict resolution Learning skills for positive conflict resolution Demonstrate respectful behavior Learning skills for positive conflict resolution Safely addressing peer pressure Developing skills to address bullying Developing skills to address bully address bully address bully address bully address bully address bully address	PERSONAL & SOCIAL DEVELOPMENT	ACADEMIC & LEARNING DEVELOPMENT	CAREER DEVELOPMENT & LIFE PLANNING	GLOBAL CITIZENSHIP
	others Understanding thoughts, feelings, attitudes, beliefs Developing values and beliefs Developing skills for effective communication Learning skills for positive decision making Developing skills to maintain positive relationships Demonstrate respectful behavior Learning skills for positive conflict resolution Safely addressing peer pressure Developing skills to 	 competence and interest Understanding of the relationship between school performance and personal success Improving executive functioning skills (paying attention, memory, flexibility, self-control, communication, focus, and perseverance) Working collaboratively in groups Learning personal responsibility Goal setting Identifying and utilizing school and community 	 skills, interests, and values related to the workplace Exploring career options Examining specific job requirements and opportunities Exploring possible career and life plan options and required skills/education Exploring how career choice impacts lifestyle Exploring the need for 	 communities Understanding different social and world views Learning to be respectful and be sensitive to different cultures Learning about global issues and events and how to view them from others' perspectives Understanding how stereotyping and

Substance Use Prevention: What should students know and do?

The social behavior of students affects the success of schools as learning environments. Risk-related behaviors are a barrier to academic gains and healthy lifestyles.

- Students should know about the dangers of opioid misuse and illicit drug use.
- They should be supported in developing decision-making skills and in developing understanding about ways to resist pressure to experiment with and misuse drugs.
- They should know when and where to seek help either for their own opioid use disorders or addiction issues or for dealing with issues arising from misuse, addiction and overdose by friends or family members.

https://www.ed.gov/opioids

The best approach to prevention is to teach positive, healthy behavior.

- As a rule of thumb, focus on healthy alternatives to use;
- enhance connections to, and bonding with pro-social adults peers, and organizations;
- use structured interactive approaches that include skill practices;
- focus on normative education that portrays true use rates and corrects misperceptions.

What Doesn't Work in Prevention

- *Fear arousal and scare tactics:* Teens tend to disbelieve these messages and discredit the messenger.
- **One-time assemblies and events:** Do not impact behavior and may re-traumatize students.
- *Personal testimonies:* Normalizes drug use and is not appropriate for universal prevention.
- *Reinforcing exaggerated social norms:* Normalizes the perception that everybody uses and undermines healthy teen responses to peer pressure.
- <u>The illusion of truth effect:</u> "Myth Busting": People exposed to a myth/fact presentation style are more likely to recall myths as facts. (Washington DSHS, 2017)

Evidenced-based Programs and Registries

Knowing what works is vital to keeping young people from developing serious and life-long issues with addition.

Evidence-based Programs

There are many strategies confirmed by research that are shown to positively impact the health behaviors and choices of young people. These research-validated strategies are known as evidence-based programs and have been proven effective over time.

Online searchable registries of evidence-based programs are available. Their goal is to connect schools and communities with the programs most suitable for their specific needs.

Evidence-Based Registries

- www.nrepp.samhsa.gov/
- www.blueprintsprograms.com/

Prevention resources should be evidence-based and developmentally appropriate.

Effective Prevention Strategies:

Pre-K-Elementary Students

- should focus on strategies and activities that build social competence, self-regulation, and academic skills;
- should help students learn to make healthy choices and decisions;
- should teach students to recognize medicines and gain awareness of rules that are in place for medicine safety;
- should help students be able to identify where to go and who to talk to when feeling sad or afraid.

*Prevention programs should target SEL and academic learning to address risk factors and increase protective factors.



Middle School Students

- should focus on increasing academic and social competence;
- should teach study habits and academic strategies, communication skills, self-efficacy and assertiveness, drug refusal skills, reinforcing anti-drug attitudes, and strengthening personal commitment against drug abuse;
- should focus on helping students recognize positive mental health and effective ways of coping with stress;
 - should help students understand the consequences of the use and abuse of opioids.
 - *Research has identified transition from elementary school to middle school as a risk period for children as this is a time when they will experience new academic and social situations. During this time, preteens are likely to encounter drugs for the first time and experience social pressures to experiment and/or use drugs.

High School Students

- focus on increasing academic and social competence;
- should teach study habits and academic strategies, communication skills, self-efficacy and assertiveness, drug refusal skills, reinforcing anti-drug attitudes, and strengthening personal commitment against drug abuse;
- should focus on helping students recognize positive mental health and effective ways of coping with stress;
- should teach students to recognize the physical, psychological, social, and legal consequences of opioids, including fentanyl, and the factors that influence a person's use of opioids.

*Prevention programs should build on the skills and protective factors taught in earlier grades. The program should have a focus on drug information combined with social and resistance skills education.

Pre K-Elementary Students

SMART MOVES, SMART CHOICES TOOL KIT (drugs)

Elementary schools and community organizations can begin educating children (Grades K-5) and their parents about safe and proper use of over-the-counter and prescription medications. www.smartmovessmartchoices.org/start-smart

TEACHERS' GUIDE: DRUGS (PRE-K - GRADE 2) (drugs)

Teachers' guide for Pre-K-2 that includes standards, related links, discussion questions, activities for students and reproducible materials. www.classroom.kidshealth.org/prekto2/problems/drugs/drugs.pdf

OPERATION PREVENTION: ELEMENTARY EDUCATOR GUIDE

These lessons lead students to investigate what medicine is and when, how, and why we take it. They will use this information to help explain the importance of responsibly consuming medications that are sold over-the-counter and those prescribed by a doctor. www.operationprevention.com/

SANFORD HARMONY

A research-based Pre-K-6 SEL program that helps students at the earliest ages develop skills that emphasize collaboration and communication to cultivate strong peer and gender relationships, reduce conflict and foster positive school climates that encourage academic excellence. This program has been proven to improve academic achievement and decrease discipline issues.

Middle School Students

KIDS HEALTH: DRUG EDUCATION • HEALTH PROBLEMS SERIES (GRADES 6-8) (drugs)

Despite the fact that they're illegal and dangerous, drugs are still accessible to kids and teens. These activities will help your students learn what drugs do to the body and mind, and enable them to counter peer pressure to take drugs. www.classroom.kidshealth.org/6to8/problems/drugs/drugs.pdf

HEADS UP SCHOLASTIC: OPIOIDS AND THE OVERDOSE EPIDEMIC (drugs)

Lesson plans, related articles, classroom materials and critical thinking questions for drug education with a focus on opioid overdose. www.headsup.scholastic.com/teachers/opioid-overdose-epidemic

Know the signs of drug use in pre-adolescent children

- » Negative changes in grades
- Changes in general behavior, including unusual tiredness, sleeping & eating habits
- » Skipping classes or school
- » Dropping longtime friends
- » Loss of interest in usual activities
- » Changes in appearance
- » Secretive behavior, laughing for no reason



High School Students

MY GENERATION RX: TEEN EDUCATION (EDUCATE TEENS ABOUT USING MEDICATIONS SAFELY) (drugs)

A comprehensive guide that contains information to successfully present all of the teen resources. In addition, we've included a "Tips & Advice" handout for teens. Facilitators may elect to distribute this handout following an educational program or at an informational booth. www.generationrx.org/take-action/teen

EVERFI: PRESCRIPTION DRUG ABUSE AND ALCOHOL PREVENTION LESSONS

An innovative digital course that empowers teachers to bring critical skills education to the classroom. Gives high school students the knowledge and tools to make healthy, informed decisions. Through interactive scenarios and self-guided activities, students learn the facts and needed skills about alcohol and prescription drugs.

www.everfi.com

OPERATION PREVENTION: HIGH SCHOOL DIGITAL LESSON GUIDE

Operation Prevention's classroom resources provide educators with engaging tools that integrate seamlessly into classroom instruction. Through a series of hands-on investigations, these resources introduce students to the science behind opioids and their impact on the brain and body. *www.operationprevention.com/classroom*

"Programs and drug prevention curricula should focus on increasing academic and social competence by teaching:

- study habits and academic support;
- communication;
- peer relationships;
- self-efficacy and assertiveness;
- drug refusal skills;
- reinforcing anti-drug attitudes; and
- strengthening personal commitment against drug abuse" (Washington DSHS, 2017).





Youth Mental Health First Aid is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis.

For information about training in WV, contact Dianna Bailey-Miller at bailymiller@marshall.edu.

Student Resources

It is time to take a stand! The movement starts with us. We are better than drugs. We can rise above the trauma and problems we face. We are building an army to combat the Opioid/Substance Abuse Epidemic.

Our Future Depends on You - "The Not Us Movement"





Do you have a passion for helping others and/or making a difference?



WV Students Against Destructive Decisions (SADD):

A West Virginia Peer-to-Peer Education, Leadership and Development Organization. West Virginia SADD builds on the unique strengths of all types of students – encouraging peer-to-peer networking and mentoring. SADD was founded on the simple philosophy that young people, empowered to help each other, are the most effective force.

More information on the WVSADD can be found at: http://wvsadd.org/

Become a Recovery Coach by GRaCE Recovery Coach Academies.

Work with a counselor or teacher to help you:

- Create a "student voice" steering committee.
- Address the school environment to become more welcoming and proactive to student mental health such as making the entrance more inviting or creating a "Chill Room" for students and teachers to have a relaxing place to take a mental health break.
- Plan for tough situations. Organize "stress busters" such as giving students access to coloring books, puzzles, board games, etc. the week before finals or testing.
- Lead efforts in raising awareness about drug prevention, de-stigmatizing mental health disorders, and ways to get help from the ReClaimWV website (*wvde.us/reclaimwv/*) in crisis situations.
- Consider support groups and awareness campaigns.
- Work with other student-led groups to build a team in preventing bullying and other issues students face.

https://www.strengthingrace.com/wv

Do you know what to do when you or a friend is experiencing anxiety, depression, or thoughts of suicide?

REMEMBER TO ACT:

- cknowledge his/her feelings and what is wrong
- **C** are; let him/her know you care
- ell a trusted adult who can help get immediate help, whether it is a counselor or 911

I'm not ok. I'm here, and I'm listening. CRISIS TEXT LINE Text HELLO to 741741

1-844-**HELP4W**

Call the 24-hour Behavioral Health Referral & Outreach Call Center for confidential help for yourself or a loved one.

SUICIDE PREVENTION

suicidepreventionlifeline.org

1-800-273-TALK (8255)

LIFEL

The **LIFELINE** provides 24/7, free and confidential support for people in distress, prevention and crisis resources for you or your loved ones, and best practices for professionals.



Contact your local American Red Cross to get certified in CPR and First Aid. https://www.redcross.org/local/west-virginia.html

Family Resources

Parents and caregivers - you can influence whether your child uses alcohol or drugs. It is crucial that you start talking with your children about alcohol and drugs well before their teen years. The earlier a person starts using drugs or alcohol, the more likely they are to develop substance use disorders.

Although you may not think so, parents have a significant influence on teens' decisions.

Ways to help your child make good decisions about drugs and alcohol:

- 1. Establish and maintain good communication with your child.
- 2. Get involved in your child's life.
- 3. Make clear rules and enforce them consistently.
- 4. Be a positive role model.
- 5. Monitor your child's activities.
- 6. Teach your child to choose friends wisely.



Source: Keeping Youth Drug Free. HHS Publication No. (SMA) 17-3772. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, 2017.

https://store.samhsa.gov/product/Keeping-Youth-Drug-Free/SMA17-3772

Partnership for Drug-Free Kids downloadable parent resources at https://drugfree.org/resources/.



Family Checkup: Positive Parenting Prevents Drug Abuse

https://www.drugabuse.gov/family-checkup

Could your kids be at risk for substance abuse?

Families strive to find the best ways to raise their children to live happy, healthy, and productive lives. Parents are often concerned about whether their children will start or are already using drugs such as tobacco, alcohol, marijuana, and others, including the abuse of prescription drugs. Research supported by the National Institute on Drug Abuse (NIDA) has shown the important role that parents play in preventing their children from starting to use drugs.



Call the 24-hour Behavioral Health Referral & Outreach Call Center for confidential help for yourself or a loved one.

The 1-844-Help4WV toll free number and website for linkage to local resources. The WVDE will work with WVDHHR to offer this information in posters and paper format for schools to share with students and parents.



WV Relatives As Parents Program

https://www.missionwv.org/rapp

WV Relatives as Parents Program (RAPP) offers information and resources including: A Guide to Navigating Resources and Benefits for Relative/Kinship Caregivers in West Virginia.

https://www.wvdhhr.org/rfts/files/Resource_Guide_Relative_Kinship_Caregivers.pdf



Healthy Grandfamilies is a new, free resource for grandparents raising grandchildren.



Healthy Grand families West Virginia State University

http://healthygrandfamilies.com/

Safety Advice for Patients and Family Members

If you suspect an overdose:

CALL 911 IMMEDIATELY. An overdose requires immediate medical attention.

Signs of an OVERDOSE (a life-threatening emergency) include:

- Face is extremely pale and/or clammy to the touch.
- Body is limp.
- Fingernails or lips have a blue or purple cast.
- Person is vomiting or making gurgling noises.
- Person cannot be awakened from sleep or is unable to speak.
- Breathing is very slow or stopped.
- Heartbeat is very slow or stopped.

Signs of OVERMEDICATION (which may progress to overdose) include:

- Unusual sleepiness or drowsiness.
- Mental confusion, slurred speech, or intoxicated behavior.
- Slow or shallow breathing.
- Extremely small "pinpoint" pupils.
- Slow heartbeat or low blood pressure.
- Difficulty in being awakened from sleep.



SAMHSA Opioid Overdose Prevention TOOLKIT:

> Fire Essential Degis for First Responders Information for Presigners Safety Advice for Patients & Farety Members Recovering Provi Operat Overdose



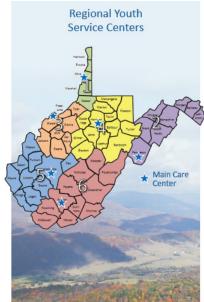


Regional Youth Service Centers (RYSCs)

The Regional Youth Service Centers are designed to serve adolescents and young adults aged 12-24. They are centers of excellence that coordinate a spectrum of community-based services to provide meaningful partnerships with families and youth with the goal of improving a youth's functioning in the home, school, and community. These centers provide an array of services and supports to foster engagement through communitybased and outpatient treatment and recovery. They also hold quarterly stakeholder meetings to increase community and system



collaboration in each region. They provide community and workforce education and awareness on mental health and substance use issues.



There are six Regional Youth Service Centers, one per each WVDHHR-BBHHF region:

- Region 1—Youth Services System
- Region 2—Potomac Highlands Guild
- Region 3—Westbrook Health Services
- Region 4—United Summit Center
- Region 5—Prestera Center
- Region 6—FMRS.

Regional Suicide Intervention Specialists

Affiliated with each Regional Youth Service Center is a Youth Suicide Intervention Specialist. Barri Faucett (*Barri.Faucett@prestera.org*) of Prevent Suicide WV coordinates the specialists. https://preventsuicidewv.org/regional-youthintervention-specialist/



The Help & Hope WV and Stigma Free WV websites provide resources and information to support efforts around drug prevention, treatment and supports.

Free Recovery Coach Statewide Academies for staff, parents, grandparents, law enforcement and community members. This training builds communication and mentorship skills to assist students and adults with adverse childhood experiences by removing barriers and obstacles to support their ability to be resilient and successful in life. Classes can be tailored for 3-4 hour staff development or five-day coach certification with free graduate credit for classroom teachers and professional support personnel. Contact John Unger to schedule a class at *WVRecoveryCoachAcademy@gmail.com*.



Partnership for Drug-Free Kids: Providing support and guidance to families struggling with a child's substance use. Call 1-855-378-4373 or TEXT 55753 *https://drugfree.org/*

Community Resources

Communities

- 1. Encourage providers, persons at high risk, family members, and others to learn how to prevent and manage opioid overdose.
- 2. Ensure access to treatment for individuals who are misusing or addicted to opioids or who have other substance use disorders.
- 3. Ensure ready access to naloxone.
- 4. Encourage the public to call 911 for individuals experiencing opioid overdose.
- 5. Encourage prescribers to use state Prescription Drug Monitoring Programs.



A Joint Report From

A Prescription for Action: Local Leadership in Ending the Opioid Crisis Report (www.opioidaction.com/report) from National Association of Counties and the National League of Cities examines how cities and counties can strengthen collaboration with each other and state, federal, private-sector



and non-profit partners to tackle the opioid crisis. The report also includes recommendations for state and federal officials, who are pivotal partners in local efforts to combat opioid misuse, diversion, overdose, and death.

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First Responders: Taking Care of Yourself

First Responders are on the front lines of the opioid epidemic and are at risk for post-traumatic stress disorder (PTSD) and burn-out. *Check out these tips for taking care of yourself. https://tinyurl.com/emergencycoping*



Source: Substance Abuse and Mental Health Services Administration. SAMHSA Opioid Overdose Prevention Toolkit. HHS Publication No. (SMA) 16-4742. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2016.



OH

Fentanyl Safety Recommendations for First Responders https://tinyurl.com/fentanylsafety

Naloxone Information

information

https://www.wvoems.org/

medical-direction/naloxone-

reeWV

Stigma

What Can Faith-Based Communities Do?

Stop the stigma through education in your congregation and

community. Visit www.StigmaFreeWV.org

- Learn new ways of talking about addiction. Use "person with substance use disorder" instead of "addict," "person in recovery" instead of "former/reformed Addict/Alcoholic," and "abstinent," instead of "clean."
- Sponsor training in your community, such as a Screening, Brief Intervention, Referral, and Treatment program (SBIRT).
- Sponsor Naloxone training. Contact your local prevention coalition or health department to find out what is already being done and how you can help.

Join a prevention coalition in your area.

- Provide sober community supports, such as helping someone find employment, transportation, or housing.
- Sponsor a Students Against Destructive Decisions (SADD) chapter for youth in your community.
- Lock and count your medications. Dispose of unused or expired medications properly.
- Do not provide alcohol to youth and encourage teens not to use alcohol until 21 years of age.
- Encourage and provide a place where people feel welcome, safe, and can find hope and healing regardless of the type of addiction.
- Educate the congregation on Substance Use Disorders and ways to offer resources and help.

Sponsor Recovery Coach Training and/or become a "Recovery Angel."

- Organize regional and community meetings among clergy to address drug abuse, stigma, and help with recovery.
- Seek out information about addiction treatment and services to connect them to resources and community partners.
- Work with police, first responders, and treatment groups.
- Allow space in the building to allow support groups to meet regularly.
- Train a team to be Recovery Coaches through Greater Recovery and Community Empowerment (GRaCE); connect through Facebook.

Celebrate the WV Day of Hope in your congregation!

Source: WV Council of Churches & Community Impact Coalition Day of Hope Flyer https://wvcc.org/2017-day-of-hope-a-celebration-of-prevention-and-recovery/



The Opioid Epidemic Practical Youth Mental Health Toolkit: First Aid is designed

The Opioid Epidemic Practical Toolkit: Relping Fath-based and Community Leaders Bring Mape and Healing to Our Communities Helping Faith-based and Community Leaders Bring Hope and Healing to Our Communities https://helpandhopewv. org/docs/hhs-partnershipctr-opioid-practical-toolkitunremediated.pdf Youth Mental Health First Aid is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services



workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis.https:// www.mentalhealthfirstaid.org/take-a-course/ coursetypes/youth/

West Virginia Resources

Resource	Format(s)	Description	Targeted Audience
ACES	• Website: https://www.wvaces.org/	• The ACES Coalition of West Virginia includes over 70 different organizations and individuals working together to improve the health and well-being of all West Virginians by reducing the impact of Adverse Childhood Experiences (ACEs) and preventing their occurrence.	 Educators Families Communities Professionals
Adolescent Health Initiative (WV) [Adolescent Health Initiative]	 Website: https://www.wvdhhr.org/ahi/ Website: https://www.wvdhhr.org/ahi/ contactus.asp 	 Conceptual Framework for Adolescent Health Coordinator Contacts 	CommunitiesEducatorsProviders
Body Safety Education Toolkit	• Website: https://wvde.us/leadership- system-support/body-safety- and-sexual-abuse-prevention- toolkit/	 Body Safety Education and Sexual Abuse Prevention for: Staff Training Student Education 	EducatorsStudents
Common Ground	 Website https://wvde.us/ commonground/ MIC3: https://tinyurl.com/WV-MIC3 Speaker Series: https://tinyurl.com/ CommonGroundSpeakerSeries 	 Educator Speaker Series- request military speakers at schools Military Family Resources Military Interstate Children's Compact Commission (MIC3) - ASVAB Military OneSource March2Success – provides online study program for standardized tests (ACT, SAT, etc.) 	 Educators Students Families Military Families
Communities in Schools Communities In Schools	Website: https://wvde.us/cis/	• Communities in Schools (CIS) dropout prevention organization that helps kids stay in school and prepare for life by working inside school systems	CommunitiesEducatorsFamilies
Expanded School Mental Health Expanded School Mental Health -Because a healthy student is a teachable student	• Website: https://wvesmh.org/	 Programs that build on core services typically provided by schools Tools and resources Prevention Early intervention and treatment Services all students Emphasizes shared responsibility between schools and community mental health providers 	 Educators Behavioral Health Professionals Families ESMH Grantees
Healthy Grandfamilies Healthy Grandfamilies West Virginia State University	• Website: http://healthygrandfamilies. com/about/	• Initiative by WVSU to provide information and resources to grandparents who are raising one or more grandchildren.	• Grandparents

Help & Hope WV	 Website: https://helpandhopewv.org/ index.html Website: https://helpandhopewv.org/ prevention-in-your-region.html 	 Teens & Families HELP4WV Prescribers Opioid Overdose Prevention Links to Local Prevention Resources in your region 	CommunitiesFamiliesEducatorsProviders
Help Me WV: State Agency Directory	 Website https://www.wv.gov/services/ HelpMeWV/Pages/default.aspx 	• WV Center for Children's Justice website has federal, state and local links to a variety of services available, depending on the need and location.	 Anyone living a case Educators Parents Families Communities
Helping Traumatized Children Learn HelpingTraumatized Children Learn	• Website: http://handlewithcarewv.org/ book-study/mobile/index.html	• Handle With Care Book Study: Helping Traumatized Children Learn	• Educators
LIVEWELL: WV School Health TAC	 Website: https://livewell.marshall.edu/ mutac/ Website: https://livewell.marshall. edu/mutac/Docs/R- YSCContactSheet.pdf 	 WV School Health Technical Assistance Center: Regional Youth Service Center (R-YSC) Contact Sheet School Health Centers Mental Health WV Telehealth 	EducatorsFamiliesCommunities
Mental Health First Aid	• Contact Dianna Bailey-Miller at: baileymiller@marshall.edu	 Will coordinate Trainer(s) for Mental Health First Aid 	Educators
National Suicide Prevention Lifeline	Website: https://suicidepreventionlifeline.org/	• We can all help prevent suicide. The Lifeline provides 24/7, free and confidential support for people in distress, prevention and crisis resources for you or your loved ones, and best practices for professionals.	 Youth Loss Survivors Disaster Survivors LGBTQ+ Native Americans Attempt Survivors Veterans Deaf, Hard of Hearing, Hearing Loss

Parent Educator Resource Centers Hend in Hend Guidance for West Virginia Parents	Website: http://wvde.state.wv.us/osp/ percdirectory.html	• Links to local Parent Educator Resource Centers throughout West Virginia	ParentsFamiliesCommunities
Prevent Suicide WV	Website: http://preventsuicidewv.org/	 Assessment Protocols Evidence-Based Practices General Resources 	EducatorsCommunitiesFamiliesStudents
ReClaimWV	• Website: wvde.us/reclaimwv/	 Awareness information, signs, symptoms related to trauma, substance abuse, & mental health Substance abuse prevention & intervention information with related WVBE Policies, Content Standards & lessons Social-emotional mental health resources, strategies, related WVBE Policies, Content Standards, and lessons Resources, strategies, offered trainings, and links to services offered by WVDE partners Info and immediate help for crisis situations 	 Students Educators Families Communities
Safe Schools Toolkit <mark>Safe Schools Toolkit</mark>	• Website: https://wvde.us/leadership- system-support/safe-schools- toolkit/	 The WV Safe Schools Online Toolkit adheres to national best practices with information and resources compiled from a variety of vetted sources. Coordinates school safety and violence prevention Develops policies and strategies to promote safe schools in WV. 	EducatorsCommunitiesStudents
Sort GRaCE Greater Recovery and Community Empowerment	• Website: https://www.strengthingrace. com/	• WV Recovery Coach Academy – promotes recovery by removing barriers and obstacles to recovery and serving as a personal guide and mentor for people seeking or already in recovery.	 Communities Families High School Students
Stigma Free WV	Website: https://stigmafreewv.org/	• WV Stigma Free – Language Matters	CommunitiesFamiliesStudents

West Virginia Department of West Virginia BEAMTMENTOR EDUCATION	• Website: https://wvde.us/	 School Calendars, Directories, and Policies Body Safety Toolkit <i>math4life</i> Safe Schools College and Career Readiness Simulated Workplace 	EducatorsStudentsCommunitiesFamilies
WV Autism Training Center	• Website: https://www.marshall.edu/atc/	• Provide support to individuals with autism spectrum disorders as they pursue a life of quality	StudentsFamiliesCommunities
WV Center for Children's Justice: Handle with Care	• Website: http://handlewithcarewv.org/ index.php	 A statewide trauma informed response to child maltreatment and children's exposure to violence including: » Handle With Care » WV Children's Justice Task Force » Drug Endangered Children » Child Human Trafficking » Recognizing/Responding to Child Abuse 	 Students Providers Educators Communities Parents
WV DHHR	 Website: https://dhhr.wv.gov/Pages/ default.aspx Website: https://dhhr.wv.gov/bph/ Pages/default.aspx Website: https://dhhr.wv.gov/bms/ Pages/default.aspx 	 Department of Health & Human Resources Bureau for Behavioral Health Bureau for Child Support Enforcement Bureau for Children and Families Bureau for Medical Services Bureau for Public Health Office of Inspector General West Virginia Children's Health Insurance Program (WV CHIP). 	CommunitiesFamiliesEducators
WV DHHR Bureau for Behavioral Health West Wagnan Health Health Behavioral Health	 Website: https://dhhr.wv.gov/bhhf/ Pages/default.aspx Website: https://tinyurl.com/ WVBBHChildrenFamilies Website: https://dhhr.wv.gov/bhhf/ resources/Pages/Suicide.aspx 	 Bureau for Behavioral Health Office of Children, Youth and Families Suicide Prevention 	ChildrenYouthFamilies
WV Family Resource Network	Website: http://wvfrn.org/	 Organizations that respond to the needs and opportunities of the community Develop innovative projects and provide needed resources in local areas Community Development 	• Communities

WV Help: State Agency Directory	• Website: https://www.wv.gov/services/ WVHelp/Pages/default.aspx	• WV Center for Children's Justice website has federal, state and local links to a variety of services available, depending on the need and location.	• Anyone working a case
WV PBIS	Website: http://wvpbis.org/	 Positive Behavioral Interventions and Supports Training Materials Evaluation/Data County Resources 	• Educators
WV Prevention First Prevention FIRST	Website: https://www.preventionfirstwv. org/	• A proactive, comprehensive stance on the importance of substance abuse prevention throughout West Virginia	• Communities
WV School Counselors	Website: https://wvde.us/leadership- system-support/wv-school- counselors/	 WV Department of Education link for Schools and School Counselors Comprehensive School Counseling Program (CSCP) Crisis Response Planning Resources 	 School Administrators School Counselors
WV State Treasurer's Office:	• Website: https://wvable.com/	Offering ABLE Accounts to West Virginians with disabilities	CommunitiesFamilies
WV Suicide Prevention Resource Center	 Website http://www.sprc.org/states/ west-virginia Barri Faucett, MA Director 1-304-415-5787 Barri-Faucett@prestera.org 	 Prevent Suicide WV Adolescent Suicide Prevention and Early Intervention Project (ASPEN) 	 Educators Students Families Communities
WVSADD WVSADD WVSADD WVSADDD WVSADDD VVSADDD VVSADDD	• Website: http://wvsadd.org/ Call (304) 913-4956	 Students Against Destructive Decisions: Strategic Prevention Framework Peer-to-Peer Education Leadership Development 	• High School Students

For more information, visit our website at

https://wvde.us/reclaimwv/

or please contact

Diana Whitlock, Assistant Director • *dwhitloc@k12.wv.us* or 304.558.2696 Stephanie Hayes, School Counseling Coordinator • *stephanie.hayes@k12.wv.us* or 304.558.2696 Kelly Mordecki, School Mental Health Coordinator • *kmordecki@k12.wv.us* or 304.558.2696



Links to resources outside the West Virginia Department of Education's website do not constitute an endorsement by the WVDE. Users should vet linked resources to meet audience needs.



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