



Improving Schoolwide Substance Abuse Outcomes at a Charter High School



None of the authors have a personal financial relationship with the products or services related to this project.

David S Grunwald, MD, MS*; Bharat R Sampathi, BA>; Karen Li, MD^; Maria Jose Flockhart, LCSW*; and Shashank V Joshi, MD*

*Department of Psychiatry & Behavioral Sciences, Lucile Packard Children's Hospital at Stanford University, >UC Irvine School of Medicine, ^Sequoia Union High School District

Introduction/Background

East Palo Alto Academy High School (EPAA)

- Public, charter school, grades 9-12
- 320 students
- Restorative justice approach
- School-based mental health team includes Stanford psychiatry fellows and PsyD students, supervised by Stanford psychiatrist and psychologist
- Student population: 80% Latino; 10% African-American; 8% Pacific Islander; 2% Asian, Filipino, White, and American Indian
- Approximately 35% of students are English Language Learners and 95% qualify for free/reduced lunch
- First-generation high school graduates: 65%
- First-generation college-bound: 87%



East Palo Alto Academy

EPAA Substance Abuse Prevention Program

- Clinical rotation during 2016/2017 year laid groundwork and developed relationships
- Need for more comprehensive substance abuse prevention and treatment strategy was identified as a priority by school leaders

Evidence Base

- In the U.S., fewer than 10% of the 1.3 million youth who meet criteria for a SUD receive treatment¹
- Schools provide an ideal setting for screening, brief interventions, and outpatient treatment of substance use disorders²
- Early interventions for adolescents using substances are generally effective in decreasing frequency and quantity of use as well as decreasing risky behaviors²
- Examples of programs with effective outcomes per SAMHSA NREPP: Building Assets, Reducing Risks; Hip-Hop 2 Prevent Substance Abuse and HIV³
- Neuroscience of Addiction (NOA) is a locally-developed curriculum designed to help prevent substance use disorders (SUDs), based on the Craving Identification Management Model. Some adaptations have been made to the curriculum by members of the Sequoia Union High School District given unique needs of school population⁴

1. SAMHSA, Substance Abuse and Mental Health Services Administration: Results from the 2013 national survey on drug use and health: summary of national findings. Rockville (MD): U.S. Department of Health and Human Services, 2014.
 2. Benningfield MM, Riggs P and Stephan SH. The Role of Schools in Substance Use Prevention and Intervention. Child and Adolescent Psychiatric Clinics of North America. 2015 May;24(2):291-303.
 3. SAMHSA National Registry of Evidenced-based Programs and Practice. Accessed online on 10/18/2017 at: <http://nrepp.samhsa.gov/landing.aspx>.
 4. Stalcup SA, Christian D, Stalcup J, Brown M, Galloway GP. A treatment model for craving identification and management. J Psychoactive Drugs. 2006 Jun;38(2):189-202.

Proposed Intervention

Community Engagement

- Convening working group involving stakeholders including students, family members, teachers/staff and school-based clinic staff to examine and improve existing drug and alcohol policies and procedures at the school

Primary Prevention

- Use of evidence-supported substance abuse prevention curriculum (NOA), administered by school clinic staff and teachers

Secondary Prevention

- Improve screening and referral process for students at higher risk for SUDs

Tertiary Prevention

- Ongoing treatment at school clinic and referrals to community partners for those with SUDs, post-referral follow-up to ensure appropriate treatment and, when the referral process does not go as planned, to identify issues that may be limiting access to treatment

Data Collection

- IRB to be submitted in late 2017
- Will collect both quantitative and qualitative data, feedback from students and teachers to better tailor the curriculum and school substance use policies to meet the demands of this school's unique population.
- Will examine both efficacy and effectiveness of these interventions

Community Partners

Engagement with district, local community non-profits and county services to make better use of existing resources and strengthen connections between these agencies and the school, including:

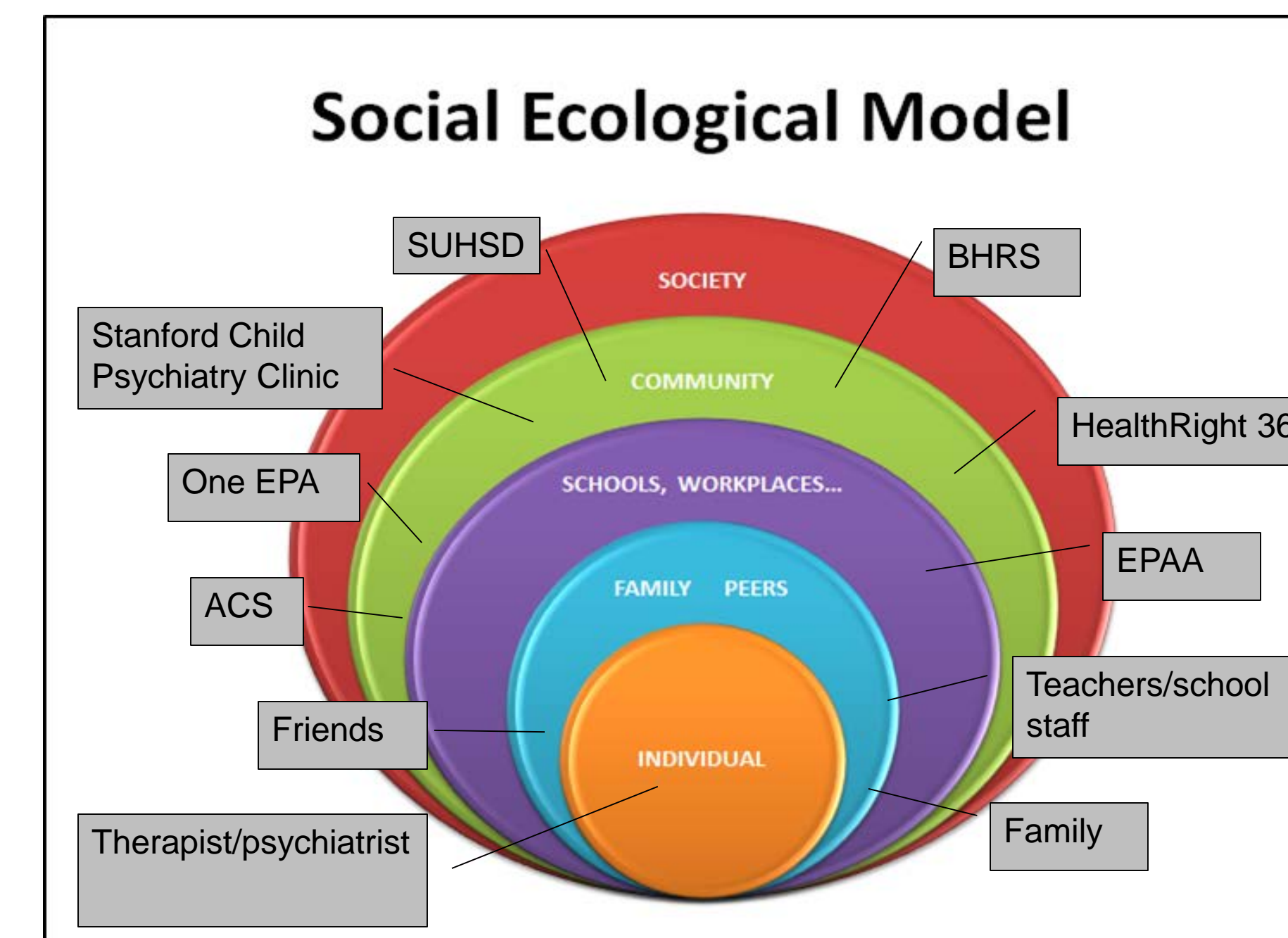
One EPA: mission of strengthening EPA community through multiple initiatives, including substance abuse prevention

HealthRight 360: substance abuse treatment, including work with justice system-involved youth and families

Adolescent Counseling Services (ACS): outpatient treatment for teens with substance abuse

San Mateo County Behavioral Health and Recovery Services (BHRS)

Sequoia Union High School District (SUHSD)



Adapted from Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. American Psychologist, 32, 513-531.



Future Areas of Work

- Expansion of prevention course with goal to teach to an entire EPAA grade level each year
- Refinement of course to meet needs of unique school population
- Continued work with school staff regarding knowledge-base and approach to prevention of SUDs
- Further development of screening and referral process at school-based clinic
- Ongoing cultivation of relationships and network of community partners to refine follow-up procedures
- Potential for expansion of clinic and referral practices at EPAA to entire SMUHSD district



2016-17 EPAA School Mental Health Team

Anticipated Barriers

- Tension between adjusting curriculum to meet unique needs of student population and maintaining fidelity of NOA
- Logistics:
 - Timing/Scheduling (at both school and clinic)
 - Personnel (recruitment, training, retention)
- Clinical aspects: maintaining adequate coordination of care across multiple agencies, adding to already high workload of clinic staff

Funding

San Mateo County Foundation
San Mateo County Behavioral Health and Recovery Services
Lucile Packard Children's Hospital at Stanford
East Palo Alto Academy Foundation
AACAP Systems of Care Special Program funds