

The CAFAS, MST, and Safe Schools Healthy Students: Resilience in Action

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The Cleveland Heights-University Heights Safe Schools Healthy Students Initiative

- ◆ Funded by U.S. Department of Education, with support from SAMHSA and CMHS
- ◆ Grant began 8/1/2003
- ◆ Now in second year of three year funding cycle

Goals of Safe Schools Healthy Students Project

- ◆ To reduce youth violence and promote a safe school environment;
- ◆ To reduce youth substance use;
- ◆ To promote youth mental health;
- ◆ To implement evidence-based mental health practices in the schools.

Activities supported by SSHS grant

- ◆ Three evidence based practices
 - Life Skills Training (Botvin) delivered to all middle school students to prevent drug and alcohol use
 - Second Step violence prevention in elementary schools
 - Multisystemic Therapy (MST) for 100 students per year, focusing on middle and high school students

Activities supported by SSHS (2)

- Attendance Assistance for Students and Parents (AASAP)
- After School Program (Elementary & Middle)
- Early Childhood School Social Worker
- Mental Health/Health Education
- Psychiatric Consultation
- Research/Program Evaluation

National Recognition

- ◆ The Cleveland Heights-University Heights City Schools received a Certificate of Merit (SAMHSA Administrator's Award) for increasing mental health services to students in schools Fall, 2004

The District at a Glance

- ◆ 7,000 students
- ◆ 80% ethnic minority
- ◆ 75% African American
- ◆ 36% eligible for free/reduced lunch

MST and the District

- ◆ MST piloted since 2000-2001 school year
- ◆ Results from pilot projects were positive: at least 80% of students at home and in school at discharge
- ◆ District support resulted in 75 referrals during 2003-2004 school year

MST Selected to address goals

- Intensive in-home family treatment (3-5 mo.)
- Services families/students (Ages 10-17)
- Targets high risk behavior: academics, attendance, and discipline issues
- Empirically proven to reduce delinquency, out of home placement, and juvenile court involvement, as well as substance use

Referral Criteria

- **Primary Criteria:**
 - Ages 10-17
 - Criminal or delinquent behavior
 - Evidence of imminent risk of out of home placement due to aggressive or other delinquent problems
 - School truancy or school failure associated with behavioral problems
 - Physical aggression in home, school or community
 - Involvement with multiple systems
 - Higher level than peer group of intensity, frequency or duration of delinquent behavior

Youth described: 2003-2004

◆ 75 TOTAL REFERRALS

46 completed services 27 declined services
61% completion rate

48 students were males 27 students were females

67 African American 5 Caucasian 3 Multi-racial

Reasons for Referral

- ◆ 60 frequent discipline referrals
- ◆ 31 involved with or at risk of being involved with Juvenile Court (included students who have assaulted someone)
- ◆ 31 at risk of out of home placement (included students in foster care, involved with DCFS, probation officer stating the next step was detention, or parents stating they wanted to get child out of home)

MST Treatment Outcomes

- ♦ Average length of MST treatment was 139.64 days (target range: 90-150 days)
- ♦ Cost \$47.26 per day
- ♦ Successful completion rate was 77.4%
- ♦ Adherence targets met or nearly met
- ♦ Remaining cases either moved out of service area or were placed by the court

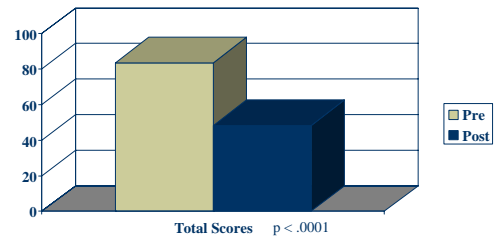
MST Outcomes: CAFAS and other data sources

- ♦ The CAFAS is used to track progress during MST treatment (pre-post)
- ♦ Other outcomes tracked from the schools' main database include: number of disciplinary referrals, number of suspensions/expulsions, and academic progress. This is a quasi-experimental comparison of MST youth with youth eligible but not receiving MST.

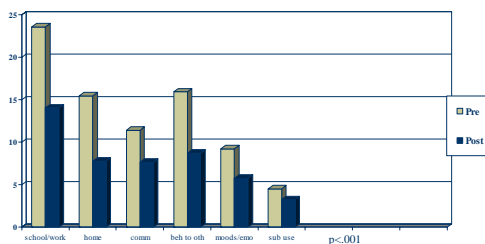
CAFAS outcomes: 64 cases completing to date

- ♦ Significant Total Score differences
- ♦ Significant subscale pre-post differences
- ♦ 63% of students evidenced significant pre-post change (20 points or more decrease in Total Score)
- ♦ 63% of subscales rated as 20 or 30 at opening declined to 10 or 0 at discharge

CAFAS Total Scores Pre-Post



CAFAS Subscale Scores Pre-Post



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