

# Adapting a Universal Prevention Program to Fit the Response to Intervention Multi-tiered System of Support Framework Utilized in Schools

Sarah Gonzalez, BS

Shalay Jackson, MSW

Kim Menendez, MS

Kathleen Moore, PhD



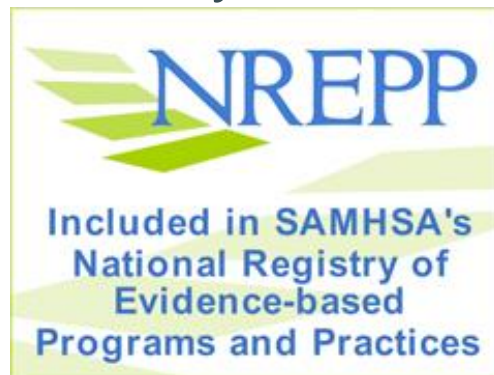
# Acknowledgements

- Project Mentors Dr. Moore and Kim Menendez
- Mendez Foundation Staff
- Hillsborough County School District
- Institute for Translational Research in Adolescent Behavioral Health
- National Institute for Drug Abuse



# Mendez Foundation

- Founded in 1964, Mendez Foundation provides evidence-based universal prevention education programs called *Too Good for Drugs* and *Too Good for Violence-Social Perspectives* for children and adolescents k-12 grades.
- *Too Good* programs provide students with social and emotional learning skills they need to refuse substances, refrain from violent behavior, maintain positive self-image, and develop healthy relationships.



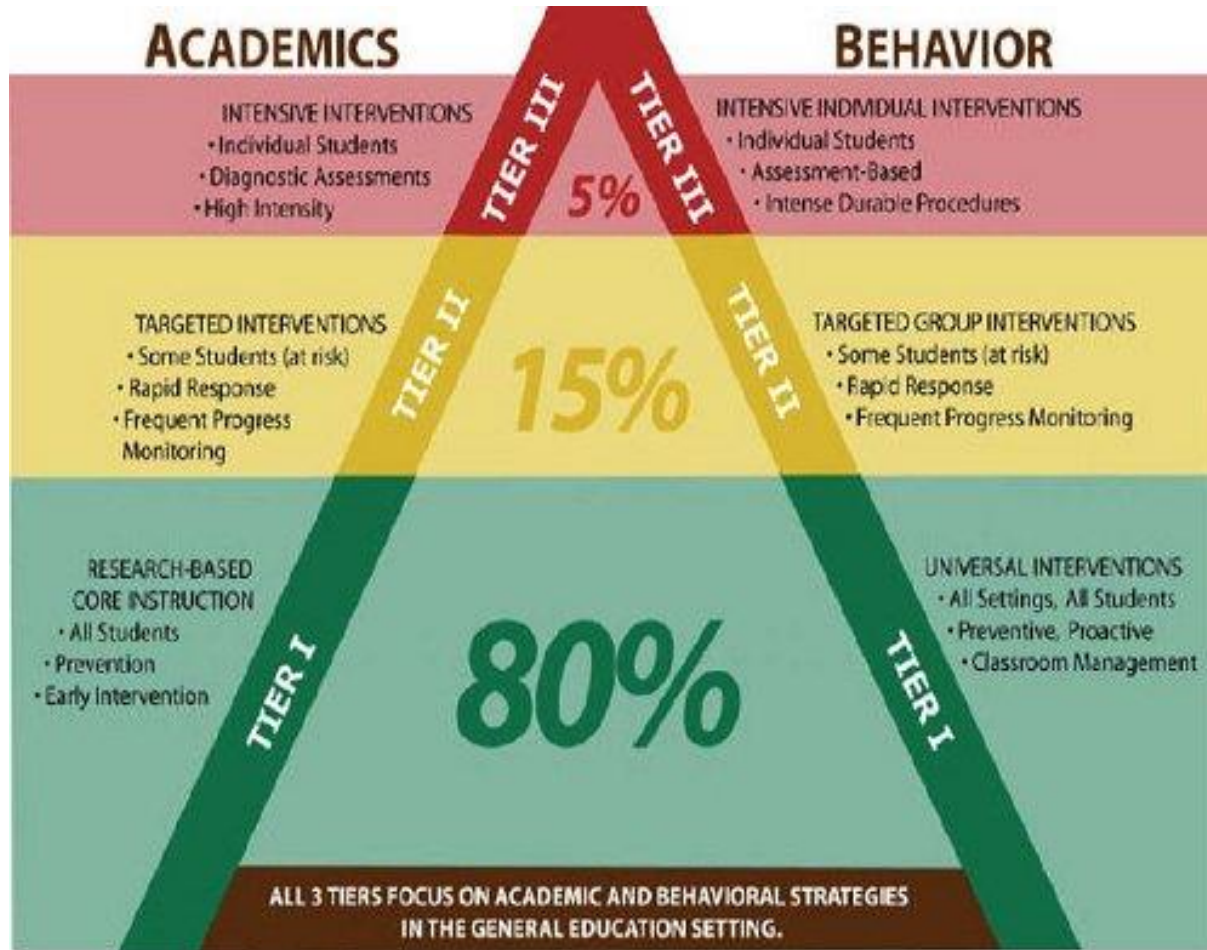
# Response to Intervention

Revisions to the No Child Left Behind (NCLB) Act and Individuals with Disabilities Education Act (IDEA) have led to a proactive approach to addressing student need called Response to Intervention (RTI).

The three key components of RTI include:

- A continuous application of a structured problem-solving process
- An integrated data system to use for problem-solving
- A multi-tiered model of service delivery

# Response to Intervention



# Project Prevent

- In 2013-2014 school year, there were 14,294 (7%) out-of-school suspensions and 21,335 (11%) in-school suspensions among 203,988 students in Hillsborough County School District.
- Hillsborough County School System is investing considerable resources to implement multiple evidence-based programs throughout the district through Project Prevent initiative.
- Project Prevent is designed to:
  - improve student behavior
  - increase mental health of select students
  - improve student engagement
  - improve mental health interventions at program sites



# Adaptation

- One component of Project Prevent employs utilization of the Mendez Foundation's universal *Too Good* programs as a targeted Tier 2 intervention for small groups.
- *Too Good* programs are intended to be delivered in their entirety in a “universal” classroom setting over the course of 10 weeks.
- In the Tier 2 format, school staff must adapt elements of the curriculum to meet specific needs of students and account for challenges associated with addressing behaviors during the school day.



# Mendez Foundation Collaboration with Hillsborough County Schools

- Over the course of 18 months, Mendez Foundation staff including executive directors, curriculum writers, and trainers held numerous meetings and trainings with Hillsborough County Schools' Student Services leadership team and school-based mental health staff.
- In July 2015, Mendez staff met with a special group of school-based mental health staff to provide a preliminary training to inform future trainings.
  - School-based mental health professionals were divided into three groups and asked to record most common problem behaviors they would like to address. The Mendez Foundation used the responses from this exercise to design a customized training.
  - This information was used to create an adaptation matrix to assist with navigating the curriculum to meet the specific needs of each particular school.



# Objectives

Our research team conducted a preliminary process evaluation to explore the adaptation of a universal program for targeted Tier 2 intervention among the schools chosen for the 1<sup>st</sup> year pilot.

The objectives of the evaluation included:

- (a) observing the training provided to school-based mental health staff.
- (b) exploring the mechanisms schools used to adapt a universal program for Tier 2 intervention.
- (c) identifying facilitators and barriers to implementation.

# Methods

## Quantitative

Disseminated a survey to 15 mental health staff who attended training focusing on their:

- Experience
- Subjective feelings towards training
- General implementation information

## Qualitative

Conducted 8 structured interviews to gather information about training, overall operations, target behaviors, SEL lessons, strengths, challenges, and suggestions for improvement.

- 5 school-based mental health staff at each middle school in the pilot
- 3 Mendez Foundation staff members



COLLEGE OF PUBLIC HEALTH  
UNIVERSITY OF SOUTH FLORIDA

# Quantitative Data

Our Practice Is Our Passion

# Survey Results

Variables	% and Range
<b>School Setting:</b>	
Elementary	4.5%
Middle	68.2%
High	27.3%
<b>School Profession:</b>	
Counselor	53.3%
Psychologist	33.3%
Social Worker	6.6%
Success Coach	6.6%
Experience (Years)	7.5 (range 1 – 22)
<b>Implementation</b>	
Bi-weekly	11.8%
Weekly	82.3%
Monthly	5.9%
<b>Number of Students Served</b>	
1 – 10	13.3%
11 – 20	26.7%
21 – 30	6.7%
> 30	53.3%

# Survey Results

- All agree that training was helpful
- 93% received additional help
  - Additional training regarding adaptations and curriculum
- 38% anticipate significant barriers
  - Training of future staff
  - Time
  - Testing conflicts



COLLEGE OF PUBLIC HEALTH  
UNIVERSITY OF SOUTH FLORIDA

# Qualitative Data

Our Practice Is Our Passion

# Middle Schools in Pilot

Five schools with a high volume of discipline referrals participated in the initial implementation pilot.

	Jennings	Madison	McLane	Greco	Sligh
Battery	8	2	1	3	0
Drug Use	7	5	11	2	1
Fighting	14	25	30	31	81
Threat/Intimidation	2	8	12	4	11
Weapons	4	1	4	1	2



# Training

Participants stated they enjoyed the training sessions because they were able to explore the materials using a “hands on” approach and interact with other school-based mental health staff

Mendez Foundation Staff reported that the training provided facilitators with knowledge on how the universal program is typically delivered, which is key for helping them make adaptation decisions.



# Identification

- All schools utilized some form of the Response to Intervention (RTI)
- Referrals from teachers, parents, and subject area departments
- Exceptional student education (ESE) students, individual education plans (IEPs)



# Operations

There was variety in how *Too Good* programs were delivered at each school site



- During lunch
- Immediately following lunch
- Some schools split the lessons in half and took two days to complete
- Due to *Too Good* already being implemented in 7<sup>th</sup> grade classrooms, two schools chose to limit this Tier 2 intervention to 6<sup>th</sup> and 8<sup>th</sup> grade students only
- One school took an innovative approach to delivery by training 8<sup>th</sup> grade Advancement Via Individual Determination (AVID) students to teach the *Too Good* lessons for 6<sup>th</sup> grade Tier 2 students.

# Targeted Behaviors & Social and Emotional Learning



The 5 schools targeted the following behaviors:

Anger  
Violence  
Drugs  
Communication  
Goal setting  
Decision Making  
Deescalation



## SOCIAL AND EMOTIONAL LEARNING

Mendez staff and the school-based mental health staff generally shared the same sentiment on the importance of teaching the social and emotional learning (SEL) lessons.

- Four out of the five schools strongly supported the use of these lessons.
- The Mendez staff expressed that these lessons “enhance student’s self-efficacy, resiliency, and overall respect for one’s self.”

# 7<sup>th</sup> Grade Overlap



In 7<sup>th</sup> grade, *Too Good* programs are delivered in the universal classroom format, in conjunction with the program being used in the Tier 2 format. As a result, we asked participants their thoughts on the overlap.

- 2 participants reported that they couldn't comment because they were "not sure" or "didn't know" if the 7<sup>th</sup> grade universal program was already being implemented at their school
- 1 participant stated that the overlap caused an issue because the 7<sup>th</sup> grade students had already completed the activities
- 2 participants stated that they enjoyed the overlap because students need the repetition, in order for the concepts stick with the Tier 2 students who have been identified as needing additional support

# Discussion

## Strengths

### *Too Good* curriculum

- user-friendly, fun, and interactive
- a deeper understanding of the material takes place in the Tier 2 setting

## Challenges

- Competing with academic instruction time
- Difficult to pull students from class, which created difficulty in implementation
- Poor communication was another challenge mentioned by several participants

## Suggestions/Solutions

- Create implementation plans at each school that consider minimizing interference with academic instruction time
- Explain the aims of Project Prevent to the entire staff at each participating school
- Ensure that the administrative leadership team at each school display enthusiasm and support for the initiative

# Limitations and Future Directions

## Limitations

- Time frame
  - Early implementation
- Sample size
  - Only 5 middle schools were selected for pilot

## Future Directions

- Elapsed time allows for opportunity to provide a more thorough program evaluation
- Possibly expand the project to incorporate more schools and elementary and high school
- Attend more trainings and distribute additional surveys to include more participants



# Implications for Adolescent Behavioral Health

- The bulk of the adaptation literature is concerned with cultural adaptations to evidence-based programs, rather setting-based adaptations.
- Only a few studies have discussed adapting evidence-based programs for school settings and even fewer address adaptations made as a result of the multi-tiered RTI framework.
- While adaptations to evidence-based interventions are common in schools, more research is needed to understand the processes used and what types of adaptations still result in positive outcomes.