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## MEMORANDUM

**TO:** Members, Utah State Board of Education

**FROM:** Lillian Tsosie-Jensen, Coordinator  
School Counseling, Equity, and Prevention

**DATE:** November 3-4, 2016

**INFORMATION/ACTION:** Social Emotional Learning Supports for Students and Schools

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**Background:** Social Emotional Learning Supports are important to the school climate and a crucial element in improving student achievement. Student social and emotional learning (SEL), is fundamental to a school's academic mission. Social emotional learning collaborative efforts implemented both systemically and programmatically in schools prevent students from dropping out of school. Extensive developmental research indicates that effective mastery of social-emotional competencies is associated with greater well-being and better school performance whereas the failure to achieve competence in these areas can lead to a variety of personal, social, and academic difficulties (Eisenberg, 2006; Guerra & Bradshaw, 2008; Masten & Coatworth, 1998; Weissberg & Greenberg, 1998).

- Risk Factors to achievement:
  - Leading cause of death in youth 10-17 is suicide
  - Adverse childhood experiences (ACEs)
- Protective Factors to achievement:
  - Social Emotional Learning Supports
  - § Prevention Specialist, School Counselors, etc.
- Constraints
  - School discipline data
  - School drop out

**Board Strategic Plan:** This item supports the following imperative(s) and strategies in the Board's Strategic Plan:

- System Values
- Educational Equity
- Quality Learning

**Anticipated Action:** The Standards and Assessment Committee will receive a report regarding social emotional learning supports for students, including updates on suicide prevention efforts, elementary school counseling, and prevention specialist needs.

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# Social Emotional Learning Supports for Student Success Suicide Prevention Elementary School Counseling



Prepared by the  
Utah State Board of Education

November 3-4, 2016

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## Social Emotional Learning Supports Report to the Utah State Board of Education

**Information:** Social Emotional Learning Supports are important to the school climate and a crucial element in improving student achievement. Student social and emotional learning (SEL), is fundamental to a school's academic mission. Social emotional learning collaborative efforts implemented both systemically and programmatically in schools prevent students from dropping out of school. Extensive developmental research indicates that effective mastery of social-emotional competencies is associated with greater well-being and better school performance whereas the failure to achieve competence in these areas can lead to a variety of personal, social, and academic difficulties (Eisenberg, 2006; Guerra & Bradshaw, 2008; Masten & Coatworth, 1998; Weissberg & Greenberg, 1998).

- Risk Factors to achievement:
  - Leading cause of death for Utah youth ages 10-17 is suicide
  - Adverse childhood experiences (ACEs)
- Protective Factors to achievement:
  - Social Emotional Learning Supports
    - § Prevention Specialist, School Counselors, etc.
- Constraints
  - School discipline data
  - School drop out

### Board Strategic Plan:

This item supports all four areas imperatives in the Board's Strategic Plan and provides resources for students and LEAs.

### Components of Report:

- Social Emotional Learning Supports for Student Success
- Suicide Prevention
- Elementary School Counseling

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## Social Emotional Learning Supports for Student Success

Children in today's society face many stresses from a variety of sources that have a major impact on their social adjustment and academic performance in school. Many schools have adopted strategies to help students effectively deal with problems in an attempt to reduce school failure and school dropout rates among students. Most notable among these strategies are school-based mental health programs including the establishment of systemic school counseling programs. School counselors have a positive impact on students' social and emotional well-being as well as on their academic achievements.

School failure in turn contributes to the rising social problems. According to Comer and Haynes (1995), early school failure is a major predictor of later school, work, and life failure or difficulty, as well as of more severe mental health problems. There are strong correlations among mental health status, psychological conflict, social problems and educational achievement (Dryfoos, 1993; Comer & Haynes, 1995). The serious impact of these pressures on children's development is evident in the increasing numbers of school-aged children in need of social emotional intervention for stress-induced symptoms such as: depression, hyperactivity and attention deficit disorders, oppositional behaviors, externalizing and conduct disorders, and substance abuse delinquency (Comer & Haynes, 1995). Society as a whole is paying a price for not intervening in this cycle of social problems that lead to behavioral or emotional difficulties, which in turn lead to school failure, and begin the cycle again. Primary prevention and early intervention are clearly much more cost-effective than paying for the consequences of not intervening. Although the primary mission of an educational system is academic development, if they are to accomplish educational goals, schools need to assume more responsibility for addressing these social and behavioral issues. Schools are optimal service delivery sites because of the number of students and families they have the potential to reach. Schools are also very influential on children's growth because of the amount of time children spend in school.

Changes in social, economic, family, and demographic factors demand schools to do more, yet school standards and services have not changed much in the last 25 years (Carnegie, 1996), so students are unprepared to meet today's challenges. There have been some efforts to address children's social issues and the array of well-being needs. Unfortunately, the increase in services has not kept pace with the increase in social stress factors. Adverse childhood experiences (ACEs), bullying, limited supports to students, Utah students are in crisis. Currently, the leading cause of death for Utah youth ages 10-17 is suicide. There is a strong need to provide social emotional learning supports for Utah students.

A steady increase in social and related problems has had a negative impact on students' ability to complete school successfully. Changes in family structure, poverty, and economic instability are just a few of the challenges which both weaken families' capacities to care for children and limit their ability to access assistance. Therefore, many children bring problems to school that interfere with learning (Romualdi & Sandoval, 1995). Although the primary mission of an educational system is academic development, if they are to accomplish educational goals, schools need to assume more responsibility for addressing these social and behavioral issues. Primary prevention and early intervention are clearly much more cost-effective than paying for the consequences of not intervening.

With an increasing need for more social emotional supports for students and schools, additional prevention specialists are needed. There is a need to tracking outcome data, offering supports in dropout prevention, reviewing school policy, and offering trauma information care, including an examination of school discipline.

In September 2015, the Utah State Board of Education (USBE) passed an amended R277-609 and approved the Least Restrictive Behavior Interventions (LRBI) Technical Assistance Manual, which addresses the behavioral needs, within a multi-tiered system of supports (MTSS), of all students in Utah. This was in response to data and research, which demonstrated a need for a continuum of both academic and behavioral supports and interventions (Horner et al., in press; Lassen, Steele, and Sailor, 2006; Luiselli, Putnam, Handler, and Feinburg, 2005). Data collected by the USBE annually (e.g., Incidents of Prohibited Behavior) also reflect a need for renewed focus and attention.

Despite multiple statutes, Board Rules, and mandatory local education agencies (LEA) policies, the majority of behavioral information, technical assistance, and professional development is provided across the state through either Special Education Services, and Student Advocacy Services addressing suicide prevention and safe and drug free schools. LEAs request professional develop on social emotional supports and LRBI, however, no specialist is assigned this area for general education. The USBE, in approving R277-609, has stated the importance of behavioral supports and data collection/monitoring; however, there is no current mechanism to implement those requirements in the USBE or monitor LEA implementation.

Comer, J.P., & Haynes, N.M., Joyner, E.T., Ben-Avie, M. (Eds.). (1996) *Rallying the whole village: The Comer process for reforming education*. New York: Teachers College Press.

Haynes, N.M., & Comer, J.P. (1996). Integrating schools, families, and communities through successful school reform: The school development program. *School Psychology Review*, 25(4), 501-506.

Comer, J.P., & Haynes, N.M., Joyner, E.T., Ben-Avie, M. (Eds.). (1996) *Rallying the whole village: The Comer process for reforming education*. New York: Teachers College Press.

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## Elementary School Counseling

### Talking points:

- Effective counseling programs are important to the school climate and a crucial element in improving student achievement.
- School counselors have a unique opportunity to influence the school success of a large number of students through facilitating positive student-teacher relationships.
- School counselors promote student social and emotional learning (SEL), which is fundamental to a school's academic mission.
- School counselors, like all educational professionals, are increasingly being required to demonstrate evidence of effective practice.

In today's elementary schools, counselors are constantly called upon to provide such intervention while also delivering proactive programming for students. In response to these demands, the field of school counseling has shifted from the old-school paradigm of responsive services. This transformation took place to better align school counseling with current educational reforms and the needs of today's students (House & Martin, 1998; Sears, 1999). The new paradigm of counseling focuses on proactively connecting the counseling program to student achievement and development (Campbell & Dahir, 1997; Stone & Dahir, 2004, 2006). It is clear that counselors serve a vital role in elementary schools. Their work is essential to the academic goals of schools as well as to the teaching and learning process (Stone & Dahir, 2006). With student achievement being the primary source of concern, school counselors are expected to offer and/or create proactive services and programs for all students.

### Research:

- Center for School Counseling Outcome Research and Evaluation -University of Massachusetts, Amherst
  - A meta-analysis of school counseling outcome research (117 studies, 153 school counseling interventions, and 16,296 students) found an overall effect size of .30. Students who participated in the interventions improved almost a third of a standard deviation more than their peers who did not receive the interventions. In other words, school counseling interventions have a larger effect size than aspirin for preventing heart attacks (ES of .06).  
Whiston & Quinby (2009). Review of school counseling outcome research. *Psychology in the Schools*, 46(3), 267-272. Schatzberg & Nemeroff (2009). *Textbook of Psychopharmacology*. Arlington, VA: The American Psychiatric Publisher.
  - Elementary school students do better on both national tests of academic knowledge and on state tests of academic achievement when there is a comprehensive developmental school counseling program in their school (sample of 5,618 students).  
Sink & Stroh (2003). Raising achievement test scores of early elementary school students through comprehensive school counseling programs. *Professional School Counseling*, 6(5), 350-364.

- Other Studies
  - Several studies found that elementary guidance activities have a positive influence on elementary students' academic achievement. (1)
  - School counseling interventions have reported success for helping students reduce test anxiety. (2)
  - School counselors in collaborative efforts can implement both systemic and programmatic changes in schools and communities to prevent students from dropping out of school. (3)
  - In studies on the effects of a small group counseling approach for failing elementary school students, 83 percent of participating students showed improvement in grades. (4)
  - Students who have access to counseling programs reported being more positive and having greater feelings of belonging and safety in their schools. (5)

1. Sink., C. A. & Stroh, H.R. (2003). Raising achievement test scores of early elementary school students through comprehensive school counseling programs. *Professional School Counseling*, 6(5), 350-364. Cook, J.B. & Kaffenberger, C.J. (2003). Solution shop: A solution-focused counseling and study skills program for middle school. *Professional School Counseling*, 7(2)

2. Cheek, J.R., Bradley, L.J., Reynolds, J. & Coy, D. (2002). An intervention for helping elementary students reduce test anxiety. *Professional School Counseling*, 6(2), 162-164.

3. Standard, R.P., (2003). High school graduation rates in the United States: Implications for the counseling profession.

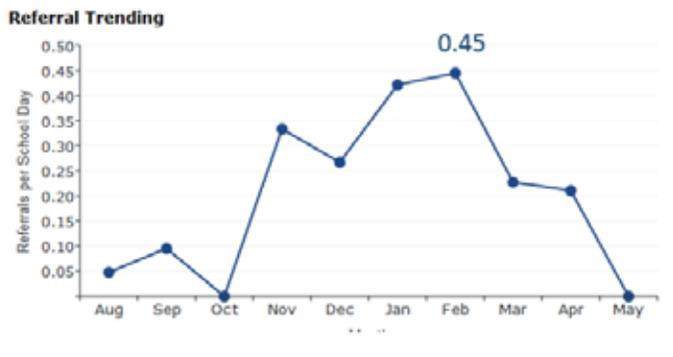
4. Boutwell, D.A., & Myrick, R.D. (1992). The go for it club. *Elementary School Guidance & Counseling*, 27, 65-72.

5. Lapan, R.T., Gysbers, N.C., & Sun, Y. (1997). The impact of more fully implemented guidance programs on the school experiences of high school students: A statewide evaluation study. *Journal of Counseling & Development*, 75, 292-302.

Local Data Points

Grantsville Elementary School Office Disciplinary Referrals

2014-5 School Year  
Total 40 Referrals

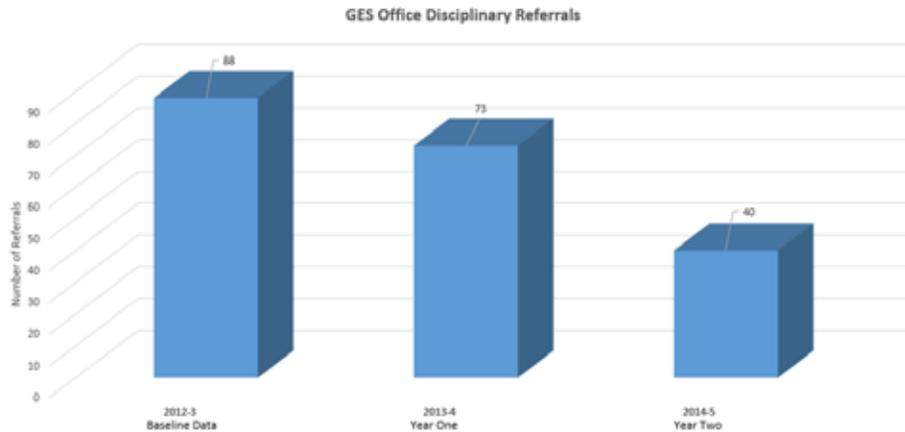


2013-4 School Year  
Total 73 Referrals



★ Counselor had a heart attack on Jan. 25, 2014 and returned to work on April 01, 2014

Office Disciplinary Referrals Yearly Comparison



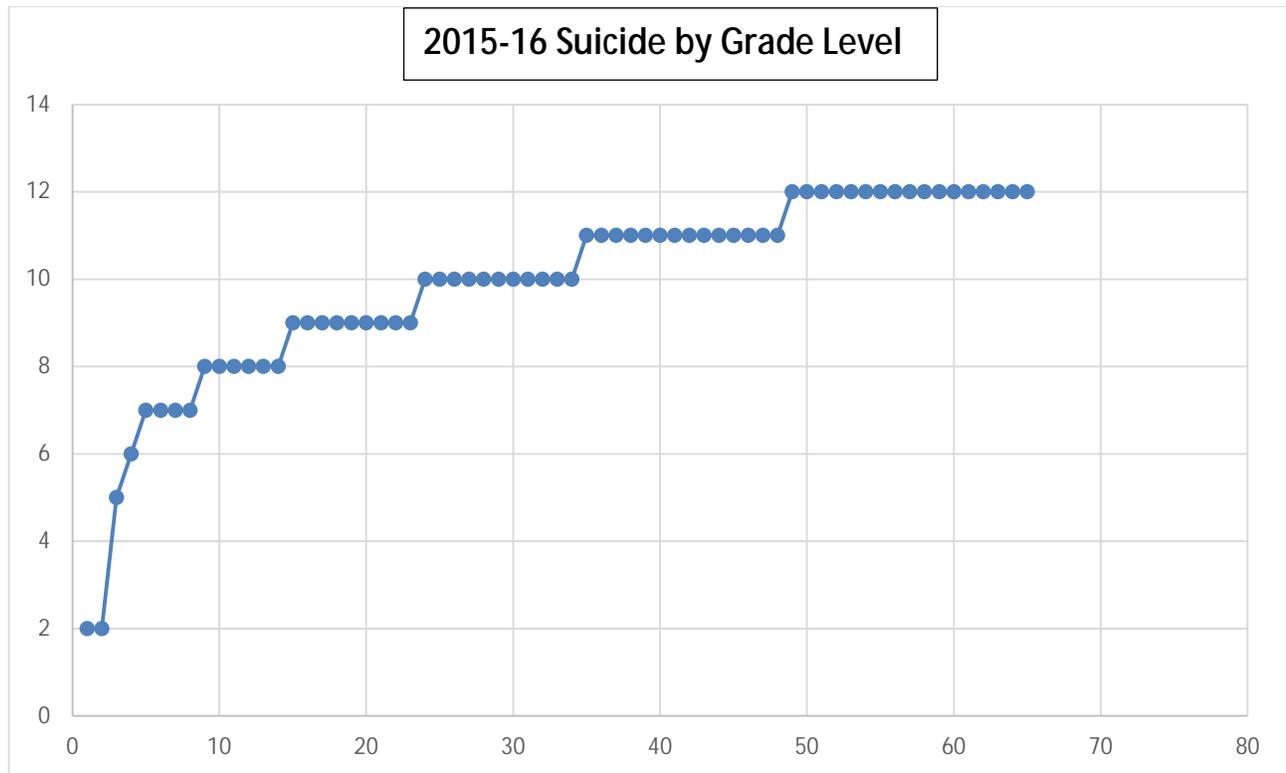
## Suicide Prevention & Bullying Prevention

### ACEs

Children with two or more adverse childhood experiences were 2.67 times more likely to repeat a grade in school, compared to children without any of the experiences. This effect remained after we adjusted for children's demographic characteristics and health status factors. Similarly, children without adverse childhood experiences had 2.59 greater odds of usually or always being engaged in school, compared with their peers who had had two or more of the experiences. Resilience mitigated the impact of adverse childhood experiences on grade repetition and school engagement. Among children with special health care needs who had had two or more of the experiences, those who had learned and showed aspects of resilience were 1.55 times more likely to be engaged in school and nearly half as likely to have repeated a grade in school, compared to those not exhibiting resilience.

Bethell, C. D., Newacheck, P., Hawes, E., & Halfon, N. (2014). Adverse childhood experiences: Assessing the impact on health and school engagement and the mitigating role of resilience. *Health Affairs*, 33(12), 2106-2115. doi:<http://dx.doi.org/10.1377/hlthaff.2014.0914>

### Data Points



**Personnel at USBE in the area of prevention**

<b>Staff</b>	<b>Anti Bullying</b>	<b>Suicide Prevention</b>
Verne Larsen	Assigned 0.5 FTE to substance abuse prevention, prevention dimensions curriculum, related prevention efforts	
Cathy Davis	Answers or direct phone calls; <b>Training pieces</b>	Assigned 1.0 FTE 100% of assignment
Momi Tuua	Answers or direct phone calls; <b>Training pieces</b>	Answers or direct phone calls; <b>Training pieces</b>
Lillian Tsosie-Jensen	Answers or direct phone calls; <b>Training pieces</b>	Related FTE; Answers or direct phone calls; <b>Training pieces</b>
Jennifer Slade	Related FTE; Answers or direct phone calls; <b>Training pieces</b>	

**Funding Allocations for FTEs in prevention**

	<b>Funding Allocation</b>	<b>Covered under allocation</b>
<b>Suicide prevention</b>	FY 14 HB 154 \$100,000	0.5 FTE Suicide Prevention Specialist (FTE and expenses of program)
	FY 15 HB 364 \$50,000 one-time	suicide prevention coordinator (back fill of HB 154)
	FY 15 HB 364 \$50,000 on going FY16)	suicide prevention coordinator (with HB 154 1.0 FTE)
<b>Prevention</b>	FY 15 contract with DSAMH	0.5 FTE Prevention Specialist (limited to Substance Abuse and Preventions Dimensions)