May has once again been set aside to recognize the importance of mental health and to draw attention to the many people who are directly affected by a behavioral health challenge or have a loved one who experiences such a challenge. In Nebraska’s System of Care, we particularly draw attention to children and young people with a behavioral health challenge, who often have trouble finding help and often feel ostracized.

Nebraska System of Care is proud to help support the Eagle Riders as they begin their 11th Annual Pony Express Ride Across Nebraska - Benefit Ride for Children’s Mental Health Awareness. From May 16-19, 2018 the motorcyclists will reenact the mail-delivery service of the Pony Express to raise awareness for children’s mental health, picking up advocacy letters about children’s mental health written by youth, their families, and other children’s mental health supporters from across the state so they can hand deliver them to government officials at the State Capitol in Lincoln.
Nebraska Legislative Day 2018 was full of education, but also fun and new experiences. The environment felt so positive, because it really felt like everyone present wanted to be there and truly learn how to make the changes they wanted to see. I could see the passion, intelligence, and overall joy in the people there. It really was such a great thing.

Going into Legislative Day, I knew very little about how I could use my voice to affect politics as a minor. I always thought that there wasn’t much I could do since I am not yet old enough to vote. Using your voice is so much more than voting, which is something I didn’t truly see or understand. We have the power to make so much change by communicating with our local politicians whether it be through a letter, an email, a phone call, or a face-to-face meeting. Our politicians are there to represent us. They want to know what’s going on and what they can do to make positive changes for us all.

Ultimately, from Legislative Day I learned how important my voice is as an individual, as well as how important everyone’s opinions and perspectives are. Everyone has the right to express what they believe and participate in improving our communities. This event really opened my eyes to this, and I believe it will continue to do that for many others within the coming years.

by Megan Jerabek

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TERRI’S STORY

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and Boys Town, to name a few. It was a bit intimidating, even for me with years of experience as an educator and as a parent navigating the multiple systems our son was involved in. I didn’t say anything, except to introduce myself representing the “parent voice.” Over time, I have developed more confidence in sharing my experiences and views on how the many systems are working and how they could improve their ability to cooperate with each other. Now, a year later, I can see some changes that are beginning to emerge. There is still a lot of work to do! We are a large size state with a smaller population than many states. There also is a wide array of needs that are not being met for families. I am hopeful this will work.

From cross-systems, I also joined the Family Advisory Council. Within this council, there was a lot of shared experiences with the other members. I found many challenges shared by the parents were similar to my family. With this committee, I had the opportunity

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Nebraska delegation attends Research & Policy Conference

Recently, a group from Nebraska attended the 31st Annual Research & Policy Conference on Child, Adolescent, and Young Adult Behavioral Health. The group consisted of representatives from the Division of Behavioral Health, The Behavioral Health Education Center of Nebraska, University of Nebraska Public Policy Center, and Nebraska Children and Families Foundation. Some of the highlights of the conference included:

Former Surgeon General Vivek Murthy said that prevention work is the key to sustainable change in physical, emotional, and social health. The two most important tools for prevention for children services are community voice and partnership. He challenged all to help cultivate a love-based society and avoid a fear-based one.

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Using Data in the System of Care

by Susan Feyen-Reay, LICSW

Data informed decision-making is vital for a successful System of Care (SOC). Knowledge and research regarding processes, methods, and client results are critical. This data and feedback is valuable to providers when making treatment decisions with clients and their families. It is important that data is used on all levels to include the family, provider, and system in order to inform decisions and improve services.

Knowledge at all levels of SOC must be fed back into all parts of the system through an integrated decision support system in order to create a learning platform within SOC. For data and knowledge to be useful within the SOC, it must be derived from a rigorous, reliable, and valid data system that is well established and applied consistently.

To learn more about the architecture of a data system and how data from the Nebraska state data can be utilized to both improve practices within the SOC and inform organizations and policy makers, click on the link below to access the webinar, Using Data in the System of Care. This training is part of the Behavioral Health Education Center of Nebraska’s (BHcen) newly launched Nebraska System of Care website with content specific to Nebraska’s System of Care model. ■

https://register.gotowebinar.com/recording/5489998284480425217

www.unmc.edu/bhecn/SOC

It is important that data is used on all levels to include the family, provider, and system in order to inform decisions and improve services.

TERRI’S STORY

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to attend a Parent Leadership Training in Kearney with other parents from across the state. We have also been working on developing a parent manual that spells out the family’s strengths and systems of support, along with information about their child’s abilities and needs. Parents would be able to take this manual to any meeting or appointments including doctor appointments, schools, hospitals, courts, etc. The goal of this is to make it easier for parents so they will not have to re-tell the story repeatedly of the disruptions and difficulties they may have experienced as the parents of their child. Now my child is 25 and I wish I would have had something like this when he was younger.

One time my son was discharged from the hospital and then back at the hospital within 13 days! I was expected to tell his history all over again! If we can save even one family from this, it will be worth it.

I live in Lancaster County and have served on the Youth Crisis Response committee. Since we only focus on our county, I see first-hand the progress with the work. At each meeting we share information from the police, sheriff, schools, the Behavioral Health region, and local service agencies. The committee developed a mission statement and has set goals of what we plan to do for our youth. One of our goals was to develop a flow chart of how we can ensure a consistent process will be followed for each family that seeks help. This has been difficult to accomplish as it is a work in progress. The work I do as a parent representative can hopefully change the way a family is treated by the “professionals” in the future.

I am honored to be part of improving the “system of care” for our youth. ■

RESEARCH & POLICY CONFERENCE

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Dr. Victor Rios talked about the urban youth behavioral health crisis and how the punishing arm of the government has overpowered the nurturing side. He challenged all to add an emotion-informed approach to our trauma-informed approach of service development and provision with schools being the best point of focus for connecting with kids.

Dr. Larke Huang, Director of the Office of Behavioral Health Equity, SAMHSA, gave all an update from the federal government. She said the focus has shifted from trauma and families to a juvenile justice approach. SAMHSA has not been hurt by the budget issues other departments have experienced. The new Secretary of Health and Human Services wants to modernize technical assistance. The current priorities are serious mental illness, early intervention, suicide prevention and diversion in place of incarceration. The agency has received billions of dollars to address opioid prevention, treatment and recovery. However, it is important to remember more children die from alcohol abuse than other substances. Methamphetamine use is increasing again, moving from west

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Rooted in Relationships focuses on suspension and expulsion in early childhood care settings

The Pyramid Model being implemented through the Rooted in Relationships initiative, is an effective approach for addressing challenging behaviors that may lead to expulsion and suspension. When culturally responsive practices, which are naturally incorporated in the Pyramid Model, are highlighted during training and coaching and intentionally applied in classrooms, expulsion and suspensions may be greatly reduced.

Did you know?
Preschool children are suspended up to three times more than students from kindergarten through 12th grades. Young students who are expelled or suspended are as much as 10 times more likely to drop out of high school, experience academic failure and grade retention, hold negative school attitudes, and face incarceration than those who are not.

In addition to implementation of the Pyramid Model, Rooted in Relationships is developing materials to share with families and providers to educate by providing definitions of suspension/expulsion, resources to address issues leading to these actions and data showing how this practice can lead to lifelong negative outcomes.

Rooted in Relationships is also sponsoring Dr. Rosemarie Allen who will present on implicit bias and preschool suspension/expulsion at the Nebraska Young Child Institute on June 27, 2018 and will then provide a workshop on this topic specifically for Nebraska’s early childhood coaches on June 28th.

Would you like to learn more? Check out the video “School suspensions are an adult behavior” by Rosemarie Allen TEDxMileHigh https://youtu.be/f8nkcRMZKV4

Young children are being expelled or suspended from early childhood settings at an alarming rate.

Why should I care?

Young children who are suspended or expelled from childcare/preschool are 10 times more likely to:
- Drop out of high school
- Experience academic failure and grade retention
- Have negative feelings about school
- Face incarceration

In-school suspension could look like
Disciplining a child by sending the child out of the classroom and to the director’s office.

Out of school suspension could look like
Asking a family to pick up their child early because of behavioral issues like biting, hitting, or refusing to follow directions.

Soft expulsion could look like
Repeatedly asking a family to pick up their child early because of behavioral issues, requiring them to leave or miss work frequently.

Expulsion could look like
Asking a family to find another care arrangement/center because the child is not a “good fit” for the program or that the program can “no longer support” their toddler or preschooler.

Source: SRI Education | To learn more, visit http://preventexpulsion.org
Omaha's Got Talent

Youth Mental Health Awareness Event
Saturday May 12
The Milo Bail Student Center (MBSC) On the UNO Campus
Room 207 Ballroom
Contest Runs from 11:00 AM—3:30
Free Admission & Free Food

Talent Registration is open! www.eventbrite.com search for talent

MUSIC
ART
DANCE
SINGING
Poetry
Ages 9—21
Cultural Dance
RESEARCH & POLICY CONFERENCE

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cost to east coast. There are 100,000 more kids in foster care than in 2012, mainly due to parental substance abuse. There is also a rising number of babies being born addicted to opioids and currently, 3 to 10% of first graders are affected by fetal alcohol syndrome. There was a momentary move away from prevention work in general during 2017, but things have shifted back to recognizing the need for prevention and particularly for minorities.

During the conference, the Nebraska contingent met with Dr. Robert Friedman, well regarded nationally for his systems of care work. Dr. Friedman is co-author with Beth Stroul of “A System of Care for Children and Youth with Severe Emotional Disturbances,” a monograph on systems of care which has been widely used across the country to plan service delivery systems.

He is also co-editor of a Paul H. Brookes book series on systems of care, co-editor of several special journals on children’s mental health, and co-editor of a book entitled, “Advocacy on Behalf of Children with Serious Emotional Problems.”

NeSOC Collaborative

- Department of Health and Human Services
- Administrative Office of the Courts
- Administrative Office of Probation
- Behavioral Health Education Center of Nebraska (BHECN)
- Children’s Commission
- Nebraska Family Run Organizations
- Nebraska Department of Education
- Nebraska Children and Families Foundation
- Regional Behavioral Health Authorities
- Tribal Society of Care
- Youth Partners & Family Partners with lived experience

NeSOC Priority Outcomes

- Decrease the proportion of youth who report living in a setting that is not their home (i.e. foster care, group home, detention, residential treatment, or hospital).
- Increase the number of children and youth who attend school regularly.
- Decrease costs per youth receiving services.
- Decrease in average age of first system contact.

To learn more about NeSOC:
- http://dhhs.ne.gov/behavioral_health/Pages/beh_systemofcare.aspx
- Nathan Busch nbusch@nebraskachildren.org
- Bernie Hascall Bernie.Hascall@nebraska.gov

Youth Mobile Crisis Response supports youth and families who are experiencing a behavioral health crisis anywhere in Nebraska.

Help is only a call away.