

SECOND ANNUAL



Ohio Family Engagement

— LEADERSHIP SUMMIT —



*CHARTING NEW
TERRITORIES*
in Family Engagement



THE OHIO STATE
UNIVERSITY

CENTER ON EDUCATION AND
TRAINING FOR EMPLOYMENT



Ohio Statewide
**Family
Engagement
Center**

— at The Ohio State University —



Fostering Student Success in the Pandemic

Brett Zyromski, Ph.D.

Hello!

Meet Your Presenter

Brett Zyromski, Ph.D.

Assistant Professor, The Ohio State University

- Co-Founder, Co-Chair, [Evidence-Based School Counseling Conference](#)
- Lead [RAMP](#) Reviewer, the American School Counselor Association
- Research Fellow: The [Center for School Counseling Outcome Research & Evaluation](#)
- Faculty Associate: [The Center on Education and Training for Employment \(CETE\)](#)
- Project Manager: Over \$5.5 million dollars of Elementary & Secondary SC Grants
- Author of the book: Facilitating Evidence-Based, Data-Driven School Counseling: A Manual for Practice
- Published 25+ peer-reviewed articles, 100+ presentations and workshops
- Former School Counselor (Urban, Rural)



Objectives



01

Understand the impact of the COVID-19 pandemic on the academic, social-emotional and mental health of students



02

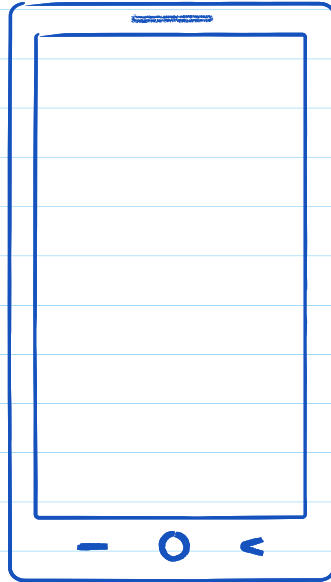
Discuss how Positive Childhood Experiences and Protective Factors could help buffer the negative impacts of the pandemic



03

What can I do to build Positive Childhood Experiences and Protective Factors for kids?

I have a question for you . . .



Go to:
<https://www.menti.com>

Code:

**Let's explore the
1st question**

Let's Compare our Thoughts to Responses from Past Participants



Let's Compare our Thoughts to Responses from Past Participants



Setting the Stage

Prevention Model

Efforts that support the optimal functioning of mental health, while at the same time prevent or reduce mental health issues.

Treatment Model

Occurs after after the person has exhibited signs of mental health struggles.

Often, a mental health urgent care approach is applied in educational settings - where those with the most visible and urgent needs (e.g. often the most disruptive to the educational process) are addressed.

**This presentation focuses on prevention. We want to support optimal health of as many students as possible with our efforts!

01

Living in a Pandemic World

Academic Impact

The Brookings Institute published a [report](#) that compared pre-pandemic fall 2019 MAP Growth national norms to fall 2020 scores:

Reading

Students in grades 3-8 performed similarly in fall 2020 as compared to fall 2019. (They suggested maybe kids are reading on their own or parents are better equipped to help?)

Math

Students in grades 3-8 are performing about 5 to 10 percentile points lower, (varies by grade), compared to the previous year.

Students are still demonstrating positive growth, but fewer kids showed growth in math. One example a lower percentage of students switching from 3rd to 4th grades made gains between Fall and Winter Map scores in 2020 (57%) than did in 2019 (79%). Reading was more positive.

Social-Emotional Impact

Adults



Adults often experience increases in anxiety, fear, tension, acute stress, post-traumatic stress disorder, depression, and suicide¹.

Children



Children are often more susceptible to mental health issues than adults² and may experience anxiety over members of their family or friends getting sick, and the instability they observe in their families over financial insecurity or other insecurities related to basic needs being met.

Anxiety During the Pandemic

Adults



Before the pandemic, about 1 in 10 adults in the United States reported anxiety.

During the pandemic, about 4 in 10 adults in the United States have reported symptoms of anxiety or depression¹².

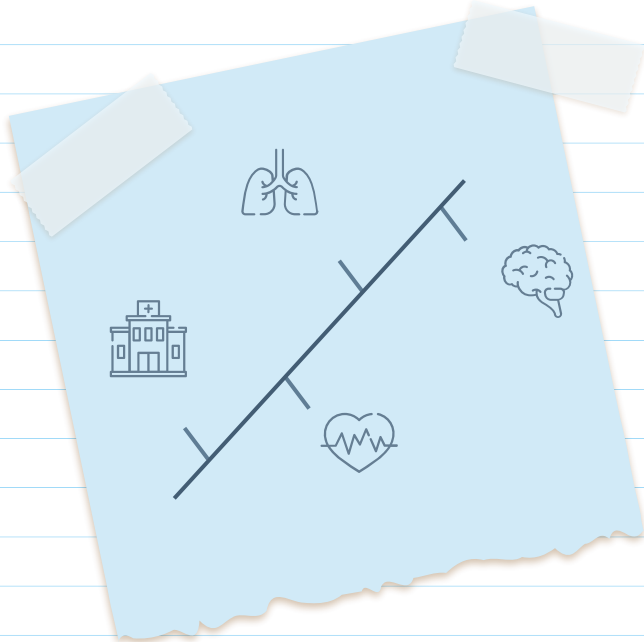
Children



Before the pandemic, about 6.2% of kids in Brazil reported anxiety.

During the pandemic, between 19.4% and 21.8% of children in Brazil reported experiencing high levels of anxiety¹³.

Loneliness



Adolescents in the UK

Research suggests $\frac{1}{3}$ of adolescents reported feelings of loneliness^{3,4} and almost half of 18-24 year-olds reported being lonely⁵.

Loneliness in the Pandemic

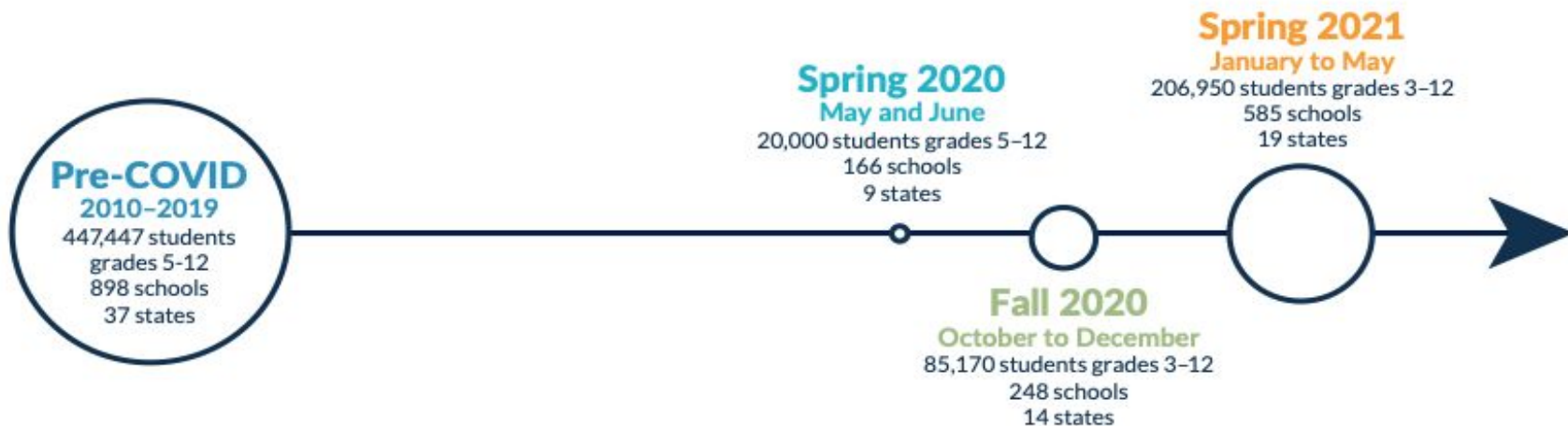
Feelings of loneliness are increasing. Loneliness has a directly association with mental health issues in children and adolescents⁶.

Mental Health Issues Associated with Loneliness



Loneliness is negatively associated with well-being and positive mental health.

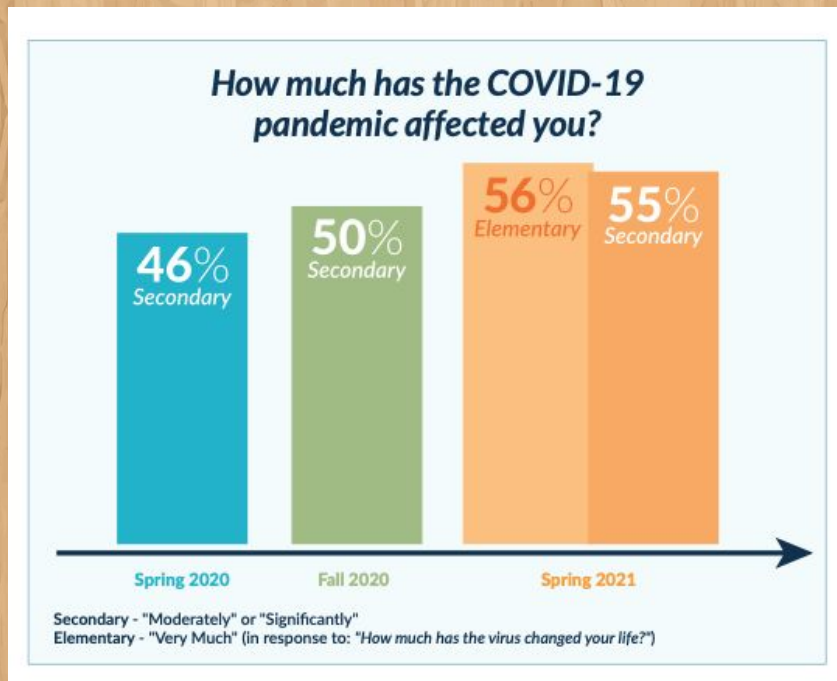
Barriers to Learning: YouthTruth Student Survey



Source:

<https://youthtruthsurvey.org/wp-content/uploads/2021/08/YouthTruth-Students-Weigh-In-Part-III-Learning-and-Well-Being-During-COVID-19.pdf>

Barriers to Learning: YouthTruth Student Survey



Source:

<https://youthtruthsurvey.org/wp-content/uploads/2021/08/YouthTruth-Students-Weigh-In-Part-III-Learning-and-Well-Being-During-COVID-19.pdf>

Findings

ONE

Social, Emotional & Academic Development

While students' perceptions of learning returned to pre-pandemic levels this spring, there is cause for concern about students' social and emotional well-being. Students offer insights on how technology can help or hinder learning.



TWO

Obstacles to Learning

The overall number of obstacles to learning for students is down. However, inequitable experiences and compounding barriers persist, especially for Black and Latinx learners.



THREE

Respect & Teacher Support

Students felt more respect from adults during the pandemic as well as increased academic support from teachers. However, respect and teacher support are experienced unevenly across student groups.



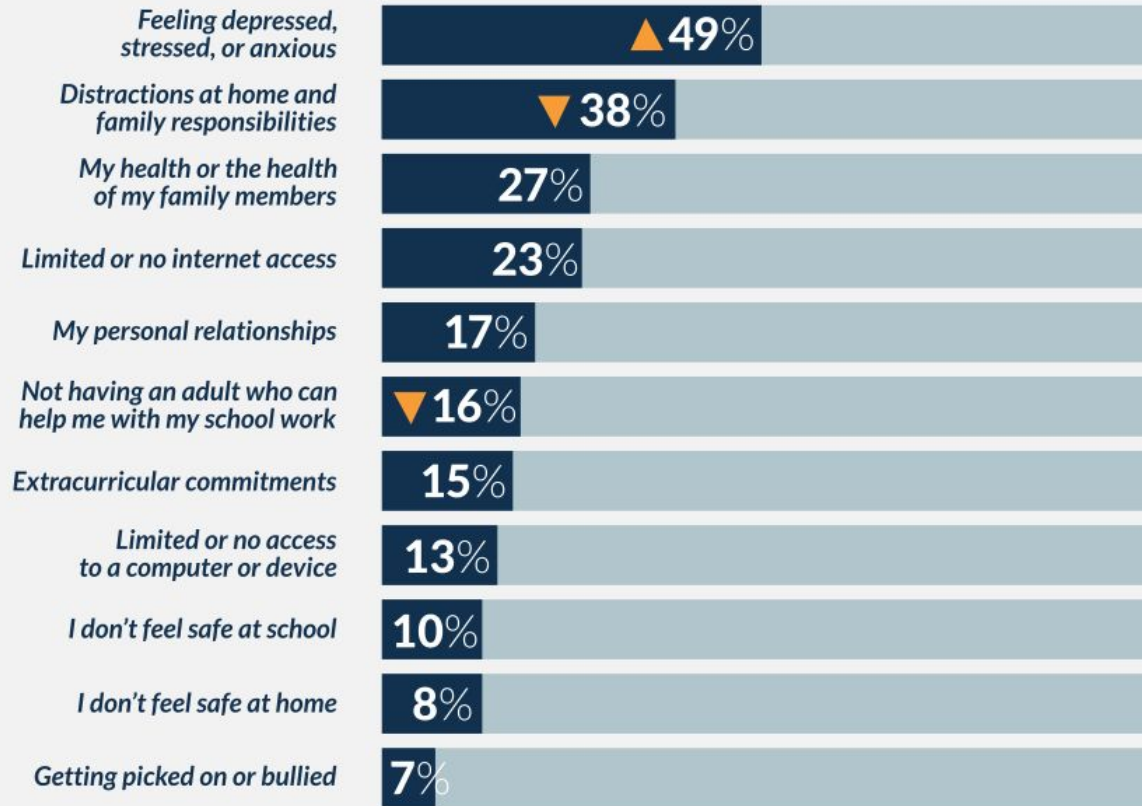
FOUR

Plans for the Future

Fewer students plan to go to college. Students offer ideas for making access to higher education more equitable.



Do any of the following make it hard for you to do your best in school?

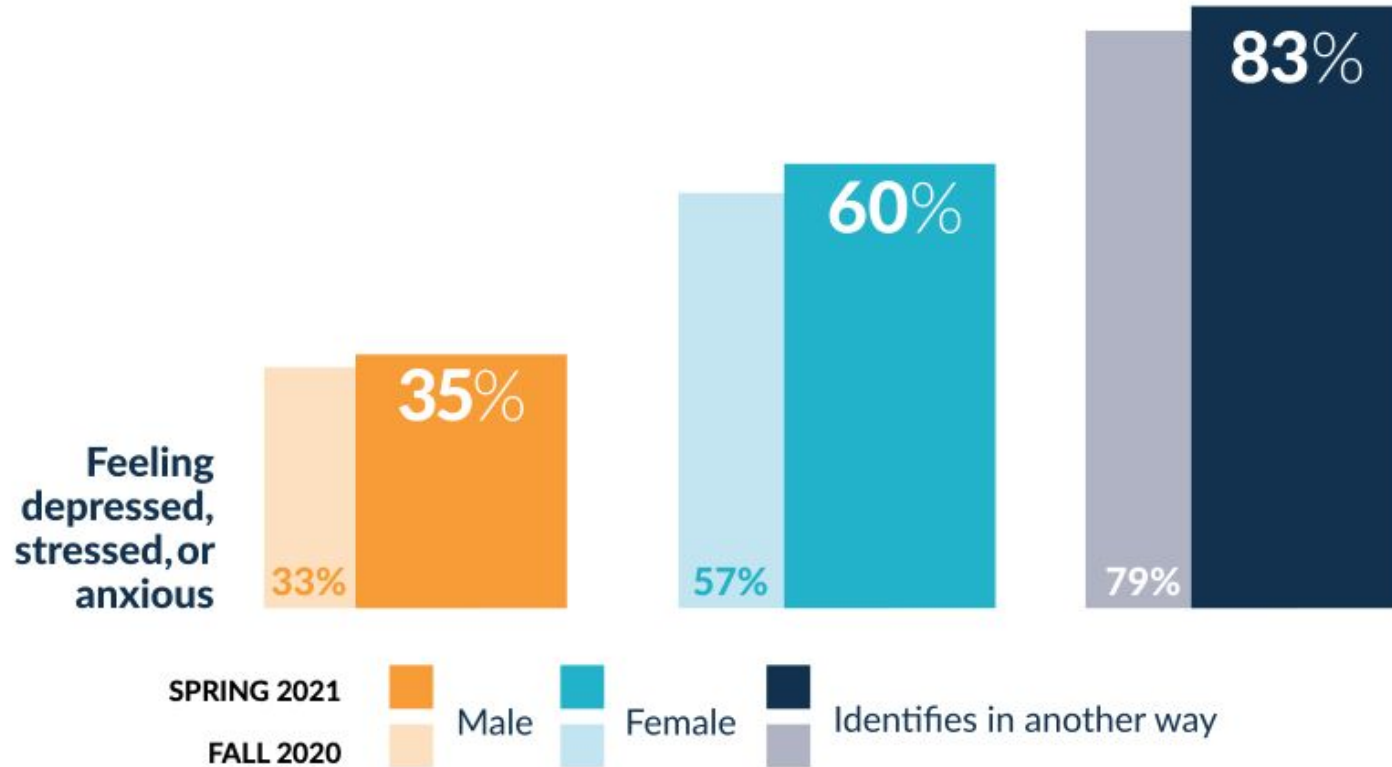


▲ Significant increase since fall 2020

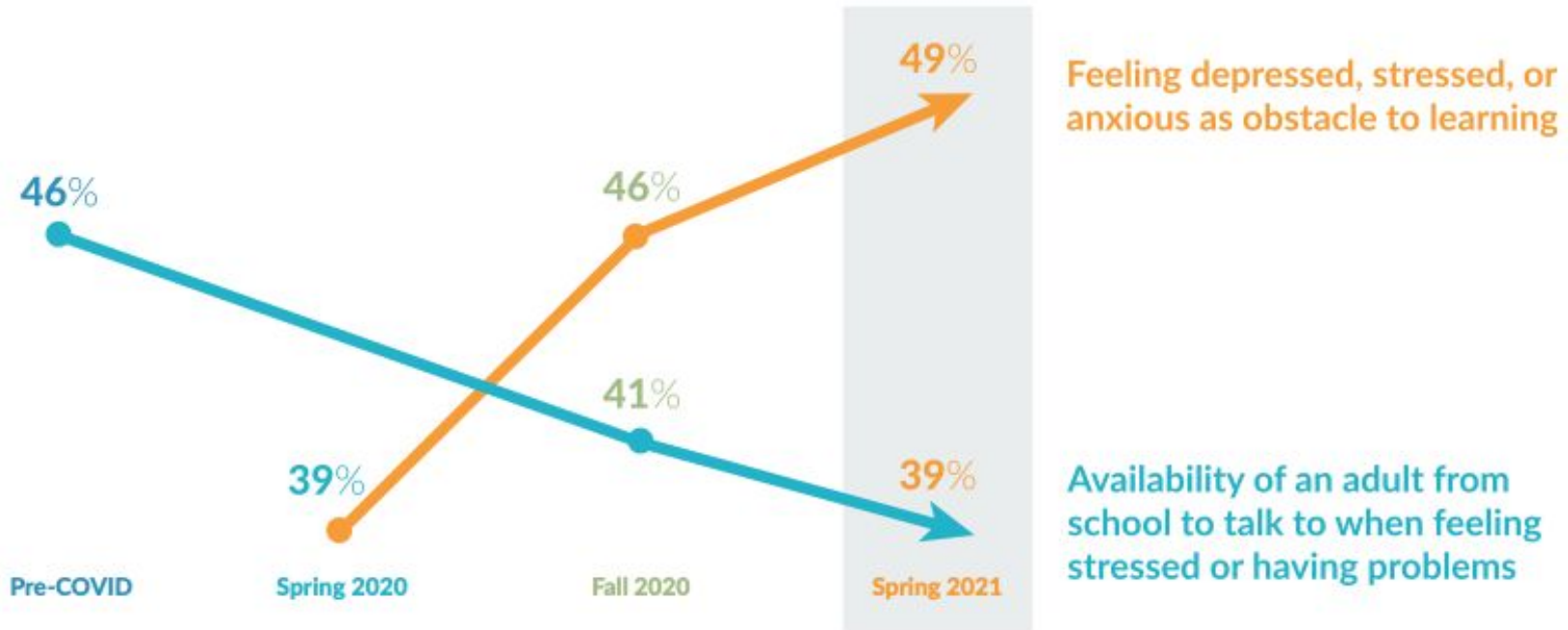
▼ Significant decrease since fall 2020

OBSTACLES TO LEARNING

Do any of the following make it hard for you to do your best in school?



DEPRESSION, STRESS, AND ANXIETY HAS INCREASED AS AVAILABILITY OF ADULTS TO TALK TO WHEN FEELING STRESSED HAS DECREASED



*Note that questions about obstacles to learning, including "feeling depressed, stressed, or anxious" as shown above, were introduced in the emergency distance-learning survey in spring 2020; thus, Pre-COVID data are not available. In addition, the "availability of an adult from school to talk to" question was not included in the spring 2020 emergency distance learning survey; therefore, it does not have a spring 2020 finding.

Mental Health Impact of Crisis

It is estimated that up to 80% (4 of 5) of those affected by a crisis will have mild distress, 20% (1 in 5) to 40% (2 of every 5) will experience a psychological disorder in the medium term, and up to 5% may experience a long-term problem⁹.

If applied to a school district with enrollment of $n=10,000$, that means **8,000** students are experiencing mild distress, **2,000 to 4,000** students are experiencing psychological distress, and **500** students may experience long-term issues. CCS has 51,000 students . . .

Or, to put it another way, in a classroom of 20 students, **16** are experiencing mild distress, **4 to 8** are experiencing psychological distress, and **1** student will experience long-term problems.

Our Kids Were Struggling Before the Pandemic

Over 4.2 million students received a diagnosis of anxiety in 2016

About 3.2 million adolescents experienced a major depressive episode (Ghandour et al., 2019)

In a sample of over 64,000 adolescents across 11 states (Monto et al., 2018):

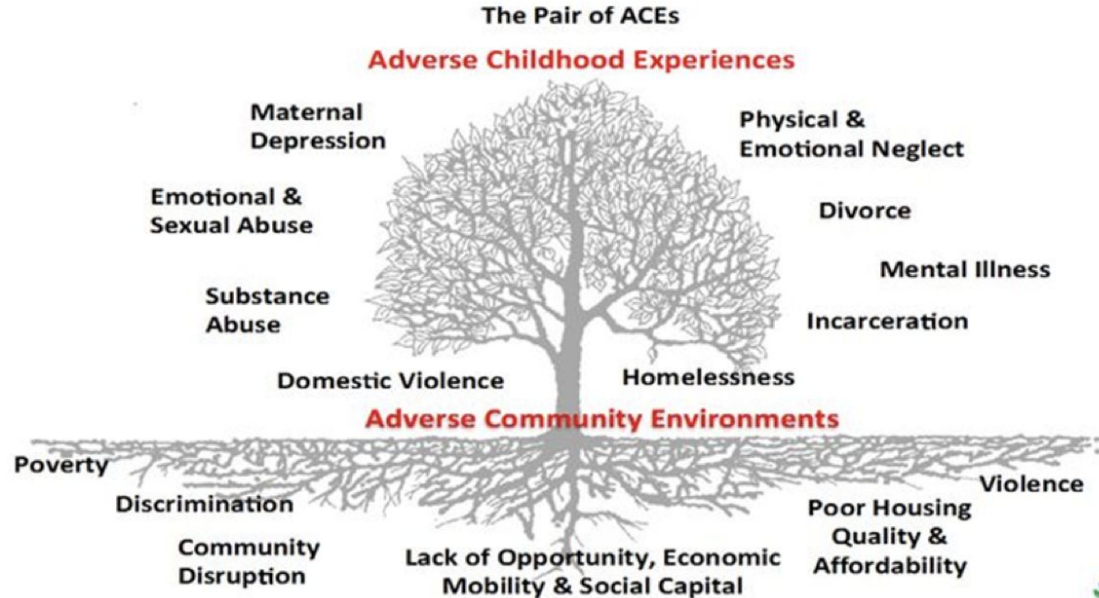
- 28.8% expressed symptoms of depression lasting more than 2 weeks
- 17.6% had participated in non-suicidal self-injury
- 15.3% reported having suicidal thoughts
- 13.1% reported having a suicide plan
- 8.1% reported having attempted suicide

A National Health Crisis

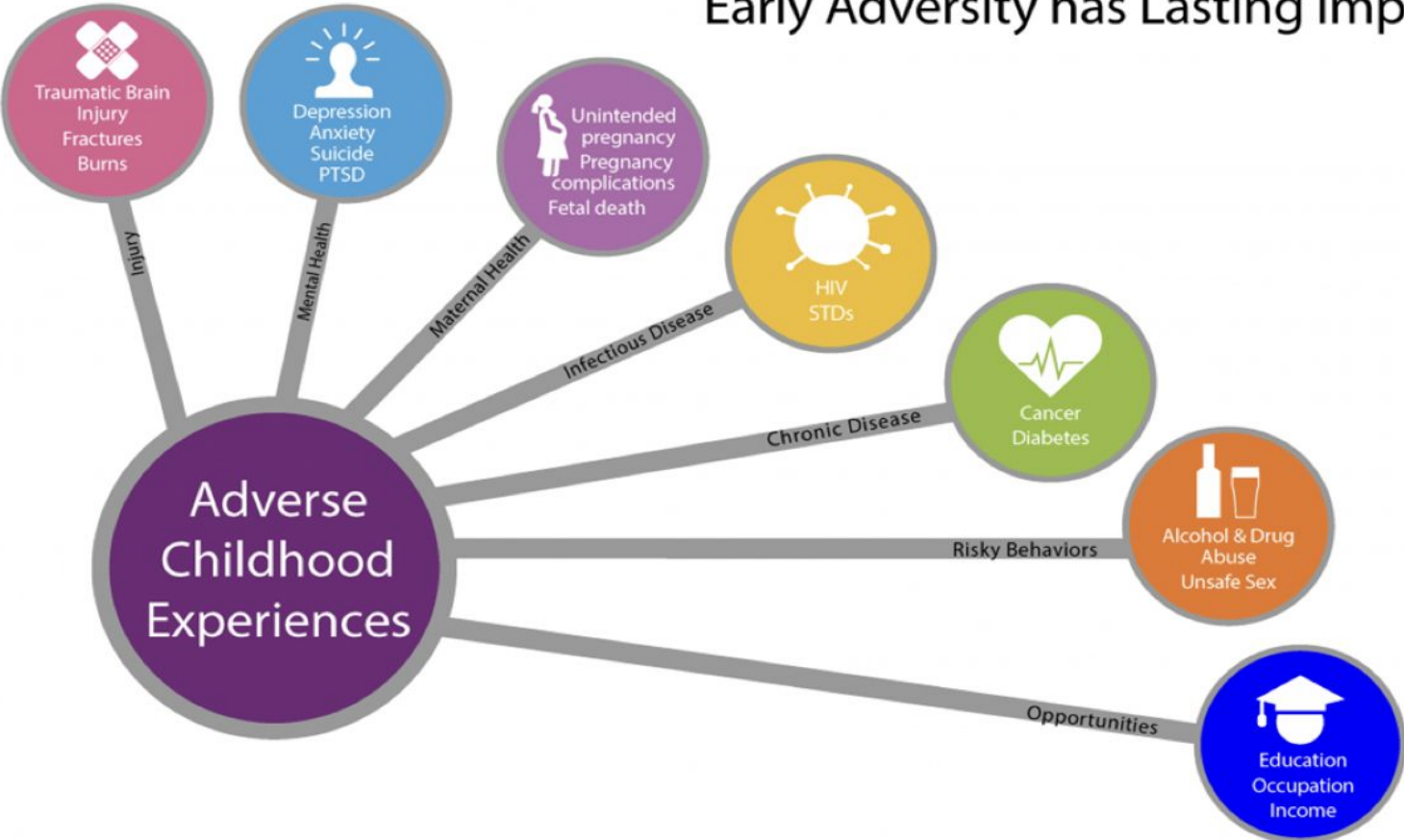
According to the National Center for Health Statistics (Heron, 2019):

- Suicide is now the 2nd leading cause of death for children and adolescents between the ages of 10 and 17.
- The rate of suicide for adolescents increased 76% in the decade between 2007 and 2017.
- The rate of suicide for children between the ages of 10 and 14 increased by 300% in the same decade.

Adverse Childhood Experiences



Early Adversity has Lasting Impacts



How the ACES Work

Adverse Childhood Experiences

- Abuse and Neglect (e.g., psychological, physical, sexual)
- Household Dysfunction (e.g., domestic violence, substance abuse, mental illness)



Impact on Child Development

- Neurobiologic Effects (e.g., brain abnormalities, stress hormone dysregulation)
- Psychosocial Effects (e.g., poor attachment, poor socialization, poor self-efficacy)
- Health Risk Behaviors (e.g., smoking, obesity, substance abuse, promiscuity)



Long-Term Consequences

Disease and Disability

- Major Depression, Suicide, PTSD
- Drug and Alcohol Abuse
- Heart Disease
- Cancer
- Chronic Lung Disease
- Sexually Transmitted Diseases
- Intergenerational transmission of abuse


Social Problems

- Homelessness
- Prostitution
- Criminal Behavior
- Unemployment
- Parenting problems
- High utilization of health and social services
- Shortened Lifespan


02

Buffering ACEs and Trauma

What are Positive Childhood Experiences?




“Feeling safe in our families to talk about emotions and things that are hard and feeling supported during hard times.”




—Dr. Christina Bethell

What are Protective Factors?



“A characteristic at the biological, psychological, family, or community level (including peers and culture) that is associated with lower likelihood of problem outcomes.”



Positive Childhood Experiences & Protective Factors: What's the Difference?

Positive Childhood Experiences



Research through the lens of examining how various constructs load directly into outcomes that buffer the negative effects of ACEs

Protective Factors



Research through the lens of examining how various constructs load directly into buffering the negative effects of trauma in general - sometimes overlaps with ACEs



As we go through this section - please note which you think could directly impact loneliness.

03

Positive Childhood Experiences

Positive Childhood Experiences

1. Felt able to talk to family about feelings
2. Felt family stood by them during difficult times
3. Enjoying participating in community traditions
4. Felt a sense of belonging in high school
5. Felt supported by friends
6. Had at least 2 non-parent adults who took genuine interest in them
7. Felt safe and protected by an adult in their home.



Bethell et al., 2019



Positive Childhood Experiences - Research (1)

assessing and proactively promoting positive childhood experiences may reduce adult mental and relational health problems, even in the concurrent presence of adverse childhood experiences.

The odds of having adult depression were
72% lower for adults reporting 6 to 7 PCEs
50% lower for those reporting 3 to 5 PCEs

Positive childhood experiences demonstrate a dose-response association with adult depression and/or poor mental health and adult-reported social and emotional support after adjustment for ACEs.

Study accounted for exposure to ACEs. Wisconsin majority white population (n= 6188; 89.4% white).

(Bethell, et al., 2019)

Emphasizing Traditions . . .

What traditions do we do, or can we think of that others do (or could do), in our families and community?

Let's Use the CHAT to create a list of ideas . . .

Talking about feelings . . .

What types of activities can we do that create space to talk about feelings?

Let's Use the CHAT to
create a list of ideas . . .



Positive Childhood Experiences

- Adult provided support
- Feeling safe at school
- Liking/Enjoying school
- Liking/Comfortable with self
- Nonparent adult relationship
- Peer relationship
- Sense of belonging at school
- Supported by friends
- Teacher-student relationship

PCEs - Research (2)



Positive Childhood Experiences = **ideal cardiovascular health**

Slopen et al., 2017

Counter-ACEs (PCEs) = **better health outcomes**

Greater fruit and vegetable intake, better executive functioning,

Higher internal locus of control, report of positive psychology,

More connection with families of origin as adults

Counter-ACEs ↔ depression, stress, and difficulties with sleep

Crandall et al., 2019

PCEs - Research (3)



PCEs ↔ ACEs in **personality development**

(antisocial, avoidant, borderline, dependent, depressive, obsessive-compulsive, passive-aggressive, self-defeating, schizoid and schizotypal personality disorder symptoms)

Gunay-Oge et al., 2020

Perceived social and emotional support ↔ depression in adults
with ACEs

Brinker & Cheruvu, 2017

ACE exposures = a higher odds of depressive symptoms,
But only among individuals with poor '**perceived social support**'

Von Cheong et al., 2017

04

Protective Factors



Protective Factors

- Positive adult relationship
- Emotional stability
- Empathy
- Peer intimacy
- Positive student-teacher relationship
- Positive student-peer relationships
- Prosocial friends
- Psychological resilience
- Resilience coping
- School belonging
- School engagement
- School safety
- Self-efficacy
- Social emotional support
- Support from class
- Support from peers

Protective Factors - Research (1)

Positive, supportive relationships with one or more adults = School Success

(Forster et al., 2017)

School Engagement and Belonging, and Feeling Safe = Better Health

(Davis et al., 2019; Liu et al., 2020; Moore & Ramirez, 2016)

Feeling Supported By Others buffers depression


(Brinker & Cheruvu, 2017; Cheong et al., 2017)



Let's Pause and Consider . . .

As a parent: What questions might we ask our school leaders to determine if schools are building these vital relationships?

- Positive relationships between students and teachers
- Positive peer-to-peer relationships
- Does this relate to the school counseling program?



Let's Use the CHAT to
create a list of ideas . . .

Protective Factors - Research (2)

Emotional Stability and Self-Efficacy buffers mental health issues

(Cohrdes & Mauz, 2020)

Social Support or Empathy buffers some effects of dating abuse

(Davis et al., 2019)

Resilience buffers feelings of anxiety, depression, and distress

(Beutel et al., 2017)



Protective Factors - Research (3)

ACEs = substance use

← **protective adult relationships**

Brown & Shillington, 2017



Youth with 0-5 ACEs, **stronger social bonds**, ↓ rearrested

Craig et al., 2017

Childhood sexual abuse → **having a confidant** → ↑ mental health

Fuller-Thomson et al., 2019

↑ ACEs → ↑ emotion dysregulation → ↑ anxiety

← **psychological resilience**

Poole et al., 2017

05

**Building
these factors
at school**

Ohio's Whole Child Framework

A collaborative approach to learning and wellness

Notice which aspects of Ohio's Whole Child Framework directly relate to building Positive Childhood Experiences and Protective Factors . . .



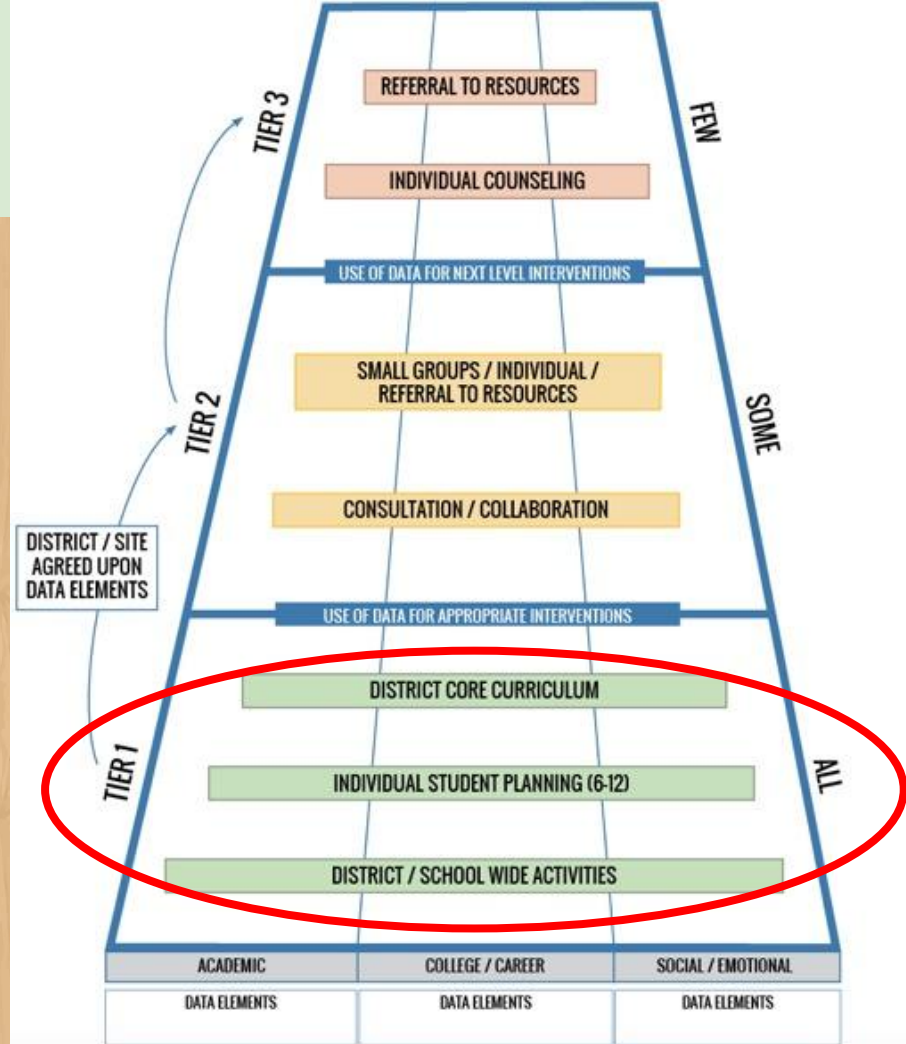
MTMDSS Tier 1

“All means ALL”

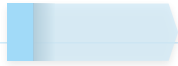
Central Question:

What does EVERY student receive because they “breathe”

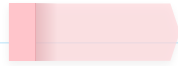
©HatchingResults. Used with permission.



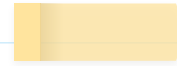
OHIO SEL STANDARDS



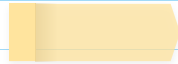
A: Self-Awareness



B: Self-Management



**C: Social
Awareness**



**D: Relationship
Skills**



**E: Responsible
Decision-Making**

06

**Family/School
Partnerships**

Family/School Collaboration: Building Protective Factors



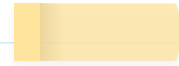
Relationships

How can schools create trust w/families?



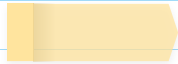
Understand

How can schools strive to understand families' cultures and beliefs?



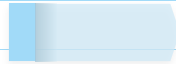
Value

How can schools show they value and celebrate families' traditions?



Share Progress

Progress around what?
Building protective factors?



Listen

How can schools collect family and student voice?



Inform

How can schools inform their work from listening to families?

Resources for Mental Health

Symptoms

Project AWARE Ohio
Information Brief

Trauma Brief

Project AWARE Trauma
Information Brief

National Institute of Mental Health

Children and Mental Health

Suicide Prevention

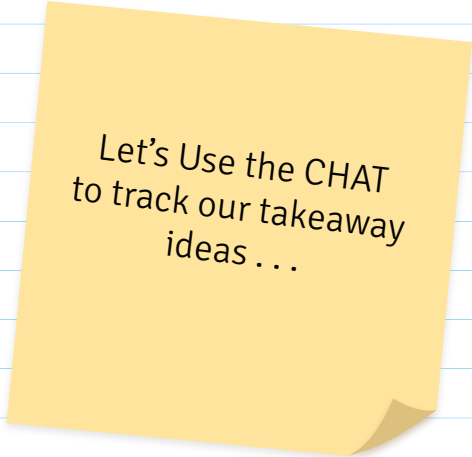
Suicide Prevention resources
for families

Last Thoughts . . .

1. Families and Schools should be partnering to promote Positive Childhood Experience and Protective Factors.
 - a. Celebrating Family Traditions
 - b. Increasing feelings of school belonging
 - c. Building positive relationships with adults and peers
2. How can families ensure schools are priorities programs that bolster Positive Childhood Experiences and Protective Factors?
3. How do schools reach out to learn about and celebrate families' culture and traditions?
4. How do we educate ourselves and others about social determinants of health and ensure all of us, including our schools, are pushing for initiative and policies that address these inequities?

Whew! That was a lot of information . . .

What is one takeaway for you that you will leave thinking about applying in your own environment (e.g. family, school, district office)?



Let's Use the CHAT
to track our takeaway
ideas . . .

THANKS!

Do you have any questions?

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References

1. Baba, M. M. (2020). Navigating COVID-19 with emotional intelligence. *International Journal of Social Psychiatry*, 66(8), 810-820.
2. Deighton J, Lereya ST, Casey P, Patalay P, Humphrey N, Wolpert M. Prevalence of mental health problems in schools: poverty and other risk factors among 28 000 adolescents in England. *Br J Psychiatry*. 2019;215:565-567.
3. Oxford ARC Study. Achieving resilience during COVID-19 weekly report 2. 2020. Available at: <http://mentalhealthresearchmatters.org.uk/achieving-resilience-duringcovid-19-psycho-social-risk-protective-factors-amidst-a-pandemic-in-adolescents/>.
4. Young Minds. Coronavirus report March 2020. 2020. Available at: https://youngminds.org.uk/media/3708/coronavirus-report_march2020.pdf.
5. Mental Health Foundation. Loneliness during Corona-virus. 2020. Available at: <https://www.mentalhealth.org.uk/coronavirus/loneliness-during-coronavirus>.
6. Loades, M.E. and authors (2020). Rapid systematic review: The impact of social isolation and loneliness on the mental health of children and adolescents in the context of COVID-19. *J Am Acad Child Adolesc Psychiatry*, 59(11), 1218-1239.
7. https://f.hubspotusercontent40.net/hubfs/6210449/Content/Reports/BTS_Report_Ring_the_Alarm.pdf
8. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3601399
9. Hunt, P., & Greaves, I. (2017). Oxford manual of major incident management. Oxford University Press
10. <https://www.childandadolescent.org/positive-childhood-experiences/>
11. O'Connell, M. E., Boat, T., & Warner, K. E.. (2009). *Preventing mental, emotional, and behavioral disorders among young people: Progress and possibilities*. Washington, DC: The National Academies Press; and U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (2009). *Risk and protective factors for mental, emotional, and behavioral disorders across the life cycle*.
12. Panchal, N., Kamal, R., Cox, C., & Garfield, R. (2021). The implications of COVID-19 for mental health and substance use. Retrieved from: <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>
13. Garcia de Avila, M. A., Hamamoto Filho, P. T., da Silva Jacob, F. L., Souza Alcantara, L. R., Berghammer, M., Nolbris, M. J., Olaya-Contreras, P., & Nilsson, S. (2020). Children's anxiety and factors related to the covid-19 pandemic: An exploratory study using the children's anxiety questionnaire and the numerical rating scale. *International Journal of Environmental Research and Public Health*, 17(16): 5757. doi: 10.3390/ijerph17165757
14. Singu. S., Acharya, A., Challagundla, K., & Byrareddy, S.N. (2020). Impact of social determinants of health on the emerging COVID-19 pandemic in the United States. *Front Public Health*, 8:406. <http://www.doi.org/10.3389/fpubh.2020.00406>

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