

## **End of Year 2016/2017 Report for the Good Medicine Program:**

The Good Medicine Program has had a positive 2016/2017 school year thus far. We will be teaming up with Tamarack Grief Center on planning and rounding up student in the 2<sup>nd</sup> to 8<sup>th</sup> grade for the two, two-day Grief camps in June and August. The Youth Mental Health Specialists will be attempting to make contact with our higher tier students throughout the summer to include them in programs or activities that we will be doing. We are also in the planning process of implementing hiking trips and inviting students that we know will benefit and are interested in participating. We will also be helping recruit students for the three week BAWAP summer camp program.

Throughout the year, our five Youth Mental Health Specialists have implemented a variety of groups, such as grief support, girl's self-esteem groups, boys group, emotional control groups (anger-management), taking circles, friendship groups, and we also help facilitate conflict resolution. Each Youth Mental Health Specialist teams up or co-facilitate with school counselors or the Tamarack Grief Center to implement groups that are identified as a need for schools. The groups are run several times throughout the school year and are based on need.

Each Youth Mental Health Specialist provided ongoing individual and group supports to a variety of students in their designated buildings. They also helped with other students who were not on their case load or in a group, which are usually due to a student in crisis or just being a safe place to let kids calm down. All together our Youth Mental Health Specialist provided care to 380+ students in all Browning Public School systems.

As we work with students a lot of our effort is educational and we teach skills, such as emotional control, self-regulation, self-control, focusing skills, de-escalation skills, self-efficacy, empathy, conflict resolution, seeing the perspective of others, prosocial behaviors, grief work (Honor Group), anger management, self-worth, mental health psychoeducation, case management, and how to respond to the behavior of others. We use a variety of methods to help support children when we see them individually and/or in groups, such as evidence based curriculums, meaningful counseling games, arts and crafts, roleplaying, outdoor activities, meaningful worksheets, practicing coping skills, coloring, advocating for mental health, advocate for being under your own influence, teach lessons that involve bullying, Art therapy,

play therapy, talk circles, education about emotions, responsibility, self-control, conflict resolution, self-esteem, learning from mistakes, empathy, perspectives of others, and skill building. In most cases the students we work with are receiving more than one intervention at a time or are a part of individual and groups.

The Good Medicine Program staff members assist when needed in each building as our skills are not limited to mental health supports. We participate in MBI team meetings in each school, we are a part of trauma informed team, we participate in re-entry/solutions meetings, teach Olweus, we are active members of community coalitions, we are participants on the Crisis Emergency Response Team, we assist with the "Be Under Your Own Influence" anti-drug and alcohol campaign, we implement student support teams, we are trained in providing Question Pursue Refer suicide prevention, and five of our employees are Youth Mental Health First Aid trainers.

#### SUCCESSES from the Youth Mental Health Specialists:

Most of the students on our caseloads are needing help to identify their own personal strengths and learning positive coping skills. Our #1 goal is to build a supporting relationship with our students and this helps to create respect and it also provides them with a person they can feel safe and comfortable to share things with. We realize that of our students do not have that one adult they can talk to or an adult who actually takes the time to listen to what they have to say. I truly believe that it only takes one adult to make a huge impact in a child's life. I know I have helped a student when they reach out to me for support, or just to tell me about the positive things going on for them.

My successes of students can be as simple staying in the classroom, reducing the extreme behaviors (tier 3 to tier 2 or 1), getting the student to the right resource, removal from an unsafe environment, getting the student in SPED or an IEP, or giving the student coping skills to be able to be self-sufficient in the classroom, school, and at home.

I've seen a lot of successes this year, from small successes to huge successes. I've seen students be able to work through their emotions on numerous occasions. One student who had a very difficult time controlling his anger and would lash out at others, hit, throw loud

aggressive fits, with consistent anger management work, and teaching him about controlling his reactions to difficult emotions, he was able to eventually self-regulate and take self-time outs when he needed to calm down. Another student who was mute all throughout kindergarten and half of first grade began to talk, gradually in session, then eventually to her classmates. Now she seems so much happier, is able to play and socialize with other students. One student who had trouble controlling his anger, is now able to verbalize I feel statements, independently. There are numerous other successes. I would say every one of my students has progressed and grown in one way or another. They are very resilient themselves and this resiliency is increased when someone notices how great they are, that they are unique, smart and capable of overcoming pretty much anything. Mostly it is just helping students grow and being consistent in being there for them that immensely increases their belief in themselves. When they feel like they can trust someone and talk to someone, they feel more secure and successful at school.

Self-growth is a continual process and takes time to establish, but success can be identified by a decrease in the number of behavioral referrals, a decrease in the amount of times a student has to be prompted, improved academics, improvement in their ability to problem solve, and success can be identified when a student is able to control their emotions by responding rather than reacting.