Illinois Student Assistance Program Data 1999 – 2013

Prepared by the Student Assistance Center at Prevention First. Collected by the Illinois Association of Student Assistance Professionals and the Student Assistance Center at Prevention First.

Intervention Plans for Indicated Student Assistance

Overview of Student Assistance Interventions

R.E. Kronick identified and recommended successful intervention program management characteristics and strategies in his work on at-risk youth. These program characteristics include:

- utilizing program resources in addressing student needs,
- recognizing the individual characteristics and needs of individual students,
- having readily available a variety of intervention strategies that include both in-school and community services,
- flexibility in structure and practice while limiting barriers to service,
- providing personal attention to identified students,
- demonstrating equality among ethnic/racial groups,
- utilizing intervention at the earliest possible point,
- using positive adults as mentors,
- getting parents involved.

Kronick’s recommendations mirror the work done by Student Assistance Programs since the inception of SAP in the 1970’s.

Student Assistance intervention plans focus on identifying the individual needs of the student through a systematic screening process, helping the student with various types and levels of both school-based and community support, and regularly monitoring the interventions to allow for modification as necessary. This plan for support is often referred to as an ‘action plan’ or ‘intervention plan.’ Action plans that are school-based often involve connecting students to a positive adult in the building along with a combination of other services. A number of schools emphasize utilizing a range of educational support groups as an intervention focused on building social emotional life skills.

Mental health issues across all grades and substance use issues, primarily at the middle and high school level, are the primary needs for connection to community-based services. Some SAPs are able to offer mental health and substance use services in the school setting when on site staff hold appropriate certification for those services. SAPs also collaborate with licensed school counselors and social workers.
to provide appropriate levels of mental health and substance use interventions as school-based services when possible.

Action plans are based upon data collected for screening including archival data, current observations, conversations with the student, and working with parents when possible. After screening is conducted, the SAP utilizes a problem-solving process to implement additional school supports, and may include linking to community supports when needed. Occasionally, a student may refuse to accept help from the SAP which will result in no action plan. Additionally, students who are truant or have attendance problems may be referred to the SAP, which may have limited opportunity to help due to the student not attending school. Students who are already receiving other supports such as special education plans may also be referred to the SAP. It is crucial that these services are well coordinated, documented and integrated.

Not all students identified or referred will have an intervention “action plan.” Students with immediate needs, including those in crisis, are connected to immediate help rather than proceed through screening. These students may not have an immediate ‘action plan,’ but may be appropriate for a follow up action plan upon return from crisis intervention.

Students identified for Student Assistance services may need several types of service based upon screening results. Students may concurrently or progressively receive a variety of services over time. A student may be connected to community mental health services and concurrently be offered participation in a Student Assistance educational support group, as well as be connected to a positive adult in the building, etc. Students participating in SAP services resulting from policy violations might participate in a remediation program offered by the SAP while also receiving substance abuse services in the community, and participating in an educational support group.

‘Types of intervention’ data tells us the primary types of interventions SAPs implement along with the frequency of those types over a given period of time.

Categories of interventions

The following data shows the types of intervention ‘action plans’ most commonly reported as being utilized by Student Assistance Programs throughout the state. Data reported below is for individualized interventions across reporting years for which data is available as well as types of interventions over a given year allowing us to see how variations occur across years as well as in any given year. Percentages do not equal 100% for any year because multiple types of services are reported per student. Untwining the complex and often coexisting needs that a student presents can become overwhelming and may not prove valuable. Therefore, we look at the data through the lens of what types of interventions are used over time rather than what types of interventions are used for what reasons.
Relationships to a Positive Adult in the School

“Research shows that the quality of human relationships in schools and youth service programs may be more influential than the specific techniques or interventions employed.” Connecting students with a positive adult in the building (mentoring) is an important contributor to positive youth development, and has been considered through the history of Student Assistance as one of the most important and effective interventions. Additionally, this connection contributes to strengthening bonding to school which contributes to positive school attendance and academic outcomes. The report question asked, “How many students receiving SAP services were connected to a positive adult in the building?” The responses over the years are reported in percentages in order to understand comparisons across years.

Reports from 2001-02 through 2007-08 utilized the term ‘mentoring’ in the report. Reports from 2008-09 through 2010-11 use the phrase ‘connection with a positive adult in the building.’ These are not separated in composite reporting due to the nature of the strategy being equivalent. A significant increase in action plans including positive adult connections occurred in 2008 through 2011. One possible factor that may have influenced this change was funding for Student Assistance services. During this time period, more SAP core teams were established and fewer SAP Coordinator positions were being funded due to the elimination of Federal Safe and Drug Free Schools funding. SAP Coordinators often became the positive adult providing mentoring to indicated SAP students which occurred as part of the coordinator-to-student relationship, and were, therefore, not written into a formal action plan. As the number of those positions declined and core teams increased, more students
were connected to a positive adult in the school other than a SAP Coordinator, increasing the number of action plans in which mentoring or the positive adult connection was written into the plan and reported.

**Student Assistance Educational Support Groups**

Student Assistance educational support groups are reported as the most commonly utilized intervention action plan over the reporting years. Educational support groups focus on building “fluid intelligence” (the ability to identify problems, analyze problems, and develop solutions based on available resources) through the development of social emotional life skills. Most SAP educational support groups are topically organized to focus social-emotional skill building toward specific types of issues such as stress, anger management or other types of relationship issues, alcohol, marijuana, or tobacco use, grief and loss, gender identity, etc. Educational support groups typically utilize a curriculum aimed toward skill building. Therapy groups may be offered in the school when appropriately certified personnel are available to conduct the groups. Occasionally, a school may be able to offer a substance use treatment aftercare group in the school when a licensed treatment professional is available to conduct the group. Mental health treatment aftercare may also be offered when a licensed professional is available to facilitate the group.

Behavior issues are often closely associated with life issues. Students dealing with life stressors may act out by externalizing behavior such as physically or verbally aggressive behaviors, or may internalize reactions to stressors with behaviors such as self-injury, disordered eating or depression. Behavior, as with academic issues, is often an indicator of the presence of life issues impacting a student’s ability to cope. As with academic issues, when a referred student is screened, the SAP will identify behavior issues through data and conversation with the student, parent, and others in the building, and make a data-based decision about the best interventions (both immediate and intermediate) for the student. Students with apparent behavior skill-deficits appropriate for response to intervention services will be connected with response to intervention through integrated service delivery. Interventions for students with immediate behavior problems that threaten themselves or others would be considered crisis situations, and would follow the school’s crisis procedures. Students violating the school’s behavior policies may be required to seek professional community services along with policy consequences. The Student Assistance Program is often the connector for the student, family, and community services, and collaborates with the community provider once information sharing procedures are completed.

It is difficult to separate behaviors from stressors. Although some students need only behavior modification plans, many students with behavior issues will not benefit from skill-based behavior interventions until stressors are addressed. At the school-based service level, students may meet weekly with educational support groups that are skill-based and topic focused; and / or they may meet individually with a Student Assistance Coordinator, social worker, or guidance counselor when available. Other students will need the help of a professional community counselor or need to participate in community treatment groups to change externalized or internalized behaviors.
It is unknown why the 2003-04 school year shows an increased number of action plans utilizing educational support groups. Due to the nature of the voluntary reporting system, there may have been more schools that utilize educational support groups reporting in that year.
Action plans involving substance use services ranged between 7% and 23% over the reporting years with the exception of the 2002-2003 school year which shows 36% of SAP action plans including substance use interventions. Although the reason(s) for the spike in substance use service needs is not given with the data reports, several factors may influence this percentage. First, the number and grade levels of reporting SAPs vary with each year. The number of reporting schools from grades 7 through 12 versus the number of reporting schools from grades K through 6 or 8 in any given reporting year would impact the number of students needing substance use services.

Secondly, some of the SAPs in northern Illinois especially target substance use and mental health services with an additional problem-solving team working with behavior and other issues. When more SAPs that focus on substance use services submit reports, numbers of students served in substance use and mental health typically increase. Additionally, community-based substance use services were more available to schools during the early 2000’s. State funding for adolescent substance use treatment services has declined since the mid-2000’s.

Action plans including mental health services were higher during the 2002-2003 school year than other reporting years as well. Mental health services ranged between 4% and 14% over the reporting years with the exception of the 2002-2003 reporting year with 20% of action plans directed to mental health resources. Again, the reason for the increased numbers of students needing mental health services is not known. Researchers in substance use treatment report that substance use and mental health issues commonly co-exist. It is reasonable to assess that mental health issues being experienced by students who are receiving substance use assessment and treatment services would become more easily identified. Because the number of students being identified with substance use issues and receiving services was significantly higher for the 2002-2003 reporting year, it is reasonable to expect a higher number of mental health issues would also be identified during that year increasing the number of action plans that included mental health services.

Aggressive and/or violent behaviors are often also indicators that a youth is dealing with life stressors. The youth may need professional community services rather than school-based behavior management strategies to improve skills due to the need to work with the life stressors in addition to working with the behavior. Data reported for actions plans for aggressive and/or violent behavior do not specify the types of interventions used; only that action plans to address aggressive and/or violent behavior were developed.

Noticeable variations occur in the number of intervention plans for aggressive and/or violent behavior during the years data was reported for that intervention category. It is unknown whether those interventions were implemented along with interventions for mental health and / or substance use although these categories are frequently found together.


iii Wwww.ascd.org – Building a Case for School Connectedness, April 2005