

## 1. Welcome Letter

Hello,

If you are reading this packet, you may have been contacted by your child's school in regards to a behavioral health issue your child may be experiencing. Maybe it's the first time this has happened to you, maybe you have been through this before. Either way, it can be confusing and emotional when your child is struggling with a behavioral health concern. We are here to help. The objective of this toolkit is to use what we have learned from other parents, schools and students themselves to help you understand and answer some of the most common questions that can arise as you are trying to help your loved one.

**What is the difference between behavioral health and physical health?** The overall message is that behavioral health, also often referred to as mental health, is just as important as physical health. Yet we often do not reach out for help as readily with our behavioral health as we do for our physical health. If we begin to understand that the brain is part of the body and it is just as important as any other vital organ, it will only make sense that we should take care of any behavioral issue as they arise with the same rigor that we manage our physical health.

**Another overarching message is, behavioral health issues are not a result of bad parenting.** Behavioral health issues are complicated, with many contributing factors. We know that there are ways of supporting a loved one who is struggling and this toolkit will assist you in the process. Take some deep breaths, be kind to yourself and flip through these pages as you need. Remember you are taking steps to help your child and the best way to do that is one step at a time.

## 2. DO: What to do when there is a behavioral health concern?

### What to look for when you think your child may be struggling with their behavioral health?

It is often hard to know what signs of typical developmental tasks of children are and when to become concerned that something more might be going on. Look for changes in your child from what you know is their basic nature. Watch for warning signs.

### What are Warning Signs?

If you are concerned that someone could be at risk for being overwhelmed with their emotional stressors and/or is having trouble problem solving, they could be at risk for depression, anxiety and possibly suicidal thoughts. Your first step in helping may be as simple as learning the facts or knowing the warning signs to look for.

- **F - Feelings** - Expressing sadness, helplessness, emptiness, desperation and hopelessness about the future.
- **A - Actions** - Displaying overwhelming emotional pain or distress, frequent visits to the school nurse, actual threats, unusual patterns of tardiness, or absences from school. Concerns expressed by other students.
- **C - Changes** - Showing changes in behavior, including withdrawal from friends, social activities, anger or hostility and changes in sleep.
- **T - Talk or Threats** - Saying or writing things like “I can’t do this anymore”, “I am done,” “I don’t want to live anymore”. Look for writing about or making plans for suicide.
- **S - Situations** - Experiencing stressful situations including those that involve loss, change, create personal humiliation or involve getting into trouble at home, in school or with the law.

### What to do when the school has identified there is a behavioral health concern?

It is very important to remember that the school wants to partner with you to do what is in the best interest of your child. It is easier to become partners than it is to become adversaries. You know your child best at home and they know what is going on at school, so it is best to have an open, honest dialogue knowing that you both are working to get this child the support he/she needs.

### How to talk to your child about how they are feeling?

Talking to your child about how they are feeling can be difficult. It is important to ask your child how they are doing and to reassure them you are there for them and want to hear what is going on in their life. *Listening* without judgment and *validating* their feelings is very important to your child. We often talk about three magic words which are “**tell me more**”. This is a great way to get children to trust you and open up. It is never easy to hear the emotional pain of a child, but it is so helpful to allow them the opportunity to have an honest conversation about their behavioral health. Take a moment to try to understand from the perspective of the child as to what is going on in his/her life that could be contributing to such stress or problematic behaviors. Keeping your voice low with an even soft tone can have a calming effect on your child. Include protective factors when you talk.

**What are Protective Factors** – These are exactly what they sound like, factors that can typically support a child during their lives. It is best to support and encourage these factors in your child’s life. They can be things such as:

- A relationship with someone that loves them unconditionally.
- A trusted adult they can talk with, who will truly listen to them.
- At least one friend.
- Participation in community, school or church social activities.
- The opportunity to contribute to others in a “giving or helpful” way.

**How do you manage your own reactions and feelings to best support your child?**

Receiving a call from the school due to a behavioral problem with your child is never easy and can be very upsetting. It is really important to take a deep breath, remaining calm and composed. Often times a child is watching for your response and will use you as a model or a gauge for how they themselves should be responding. This is where your listening skills, and personal stress management become so very important. Remember do not blame yourself, the school or your child. Even if your child is angry and blaming you or others, stay calm and remember this is not your fault. It is never just one thing and it is often layers of complicated factors that are leading to this behavior.

It is best not to argue with your spouse or other family members in front of your child that is experiencing the behavioral issues as this can lend itself to the child feeling like a burden to the family. It is best to take the approach, we are a family and we are in this together taking it one step at a time until we can get the support that is needed now and in the long run.

**Should I take my child to an emergency room?**

If your child is saying they want to hurt or kill themselves or someone else or they have escalated to the point they are dangerous you should take your child to the emergency room or call 911 for immediate support. If you are concerned that your child’s behaviors are escalating but they are not dangerous you can call PerformCare at 1-877-652-7624 for screening and mobile crisis support in the home. If you are not concerned that this is a crisis, but are concerned about your child’s behavioral health, now is the time to reach out for referrals to outpatient counseling.

### **3. ASK: If you are called into school because your child is experiencing a behavioral health issue, what do you need to ask?**

#### **How can the school be a partner in your journey?**

If you are like most parents, you probably have very little experience accessing or using behavioral health services. If you have been encouraged by the school to have your child evaluated for behavioral health treatment, or you personally think your child might benefit from counseling, even beginning the process may be bewildering and overwhelming.

It is really important to remember that the school has your child's best interest in mind just as you do. This process will be much more effective if you can work together with the common goal of supporting your child through this difficult time. You will feel better too. As a first step, familiarize yourself with your schools policies and procedures in how they handle behavioral health issues to get a better understanding of how best to partner through this journey.

#### **What did my child do/say/exhibit that brought me to the school today?**

Ask the question and be open and willing to listen to the answer. It's important to get the details regarding what occurred. This will help you if you need to get help from a professional in the future. Remember, now is the time to listen and not get defensive. This is not about your parenting, it is about helping your child.

#### **Where can my child go if they are having a behavioral health incident while at school?**

It is really important to understand who and where your child can go within the school for support. Often times it is the school counselor, student assistant counselor, school nurse, child study team or even the vice principal.

#### **When to be concerned about your child's behavioral health?**

We know raising children can be a challenge. But, how do we know what is normal, such as "normal teenage angst", from behaviors that we should be concerned about. If a change in behavior occurs and lasts for 10 days to 2 weeks, chances are there may be something going on with your child that may be cause for concern. As a parent, you have instincts about your child. If your instinct tells you that something is wrong and this is not "just a phase", then you should always listen to yourself.

#### **When to get a behavioral health assessment and what is it?**

A “behavioral health assessment” is usually conducted by a behavioral health professional to determine whether or not your child has a behavioral health issue or problem that would benefit from behavioral health treatment. This evaluation can take the form of an interview with you and your child (both separately and together). This assessment can begin as soon as you recognize that your child might need support and make the call to schedule an appointment. You will probably be asked the reason for your call as well as for basic information about your child. During the initial evaluation session, the behavioral health provider will generally ask both you and your child a series of questions. They might also ask you for a Release of Information for permission to talk to the school, doctor, or other people involved in your child’s life.

Once the necessary information has been collected and reviewed, this behavioral health provider will make a recommendation as to whether there is an issue or problem that might get better with counseling or therapy. In some cases, the behavioral health provider might recommend an additional evaluation for medication. This evaluation is completed by a psychiatrist or other behavioral health professional who is licensed to write a prescription.

**Why is Early Intervention important? What might happen if the behaviors aren’t addressed?**

Early intervention and identification can change your child’s path and improve their well-being for years to come. If your child’s behavior health concerns are not addressed, your child might escalate and things might get worse. When that happens you will likely be required to take your child to an assessment or to the hospital for crisis support and be required to receive clearance for your child to return to the school. It’s important to remember that early intervention can prevent the need for crisis support and mandatory assessment. Just like with a medical concern, if you address it early on you will have more options for treatment and be more likely to resolve the problem early.

#### **4 . EXPECT – Tips on what to expect as you are going through a behavioral health evaluation & next steps**

##### **What kind of treatment do behavioral health professionals provide?**

Behavioral health treatment for children can include talk therapy, play therapy, or activity therapy. Some children benefit from group treatment where they interact with peers who have similar problems or concerns. There may also be a recommendation for family treatment, which involves not only the child but also the parents or caregivers and siblings. When the benefits of treatment with medication outweigh the risks, psychotropic medication might also be recommended.

##### **Where do I start to find a behavioral health provider?**

Your first step is to check with your insurance carrier to find out the extent of your behavioral health coverage, if you need preauthorization, and whether or not you have provisions for out-of-network coverage. If you have to stay within your network, ask the insurance representative for a list of approved behavioral health providers who work with children and child within your geographic area. If you have out-of-network coverage, your choice of behavioral health providers will greatly increase. You can also use the NJ Children's System of Care, referred to as PerformCare, to find local behavioral health providers.

##### **What is PerformCare?**

NJ Department of Children and Families operates the Children's System of Care (CSOC) who serves children and adolescents with emotional and behavioral health care challenges and their families; children with developmental and intellectual disabilities and their families; and, children with substance use challenges and their families. Perform Care is the central hub that all referrals to CSOC services are managed. PerformCare will connect you to the services your child needs and is available 24 hours a day, seven days a week at 1-877-652-7624.

When you call PerformCare, be prepared to spend some time on the phone with them to complete a service need assessment. Through this assessment, they will determine what type of service will be most appropriate for you and your child. If they determine outpatient counseling is appropriate, they will provide you with referrals to outpatient behavioral health providers in your area. They might also determine that a more extensive in home assessment needs to be completed and will offer you options to choose a behavioral health provider in your area.

**I don't want my child to talk to just anyone and I don't know the behavioral health providers my insurance or PerformCare gave me. Where else can I get referrals for behavioral health treatment?**

There are many resources to leverage to get the names of behavioral health professionals who would be appropriate for your child. At your child's school, good referral sources can include the guidance staff or school nurse. They usually have a lot of experience making similar referrals. If your school doesn't have staff in any of these positions, there may be an administrator who is in charge of making these types of recommendations. Another good place to start looking for help is through your pediatrician or family doctor. The American Academy of Pediatricians says, "Pediatricians are, and will continue to be an important first source for parents who are worried about their child's behavioral problems." Other good referral sources can include clergy members or other parents whose children are in counseling. This last source can be very helpful, since you can get a personal feel for the practitioner.

### **What should I expect at the first session?**

The first session will likely be spent with the behavioral health provider asking a lot of questions as they try to get to know you, your child, and what brought you to them for help. The behavioral health provider will likely meet with both you and the child together, then each of you separately.

### **Can I go in when they meet with my child?**

Even if a professional comes highly recommended, it is reasonable to not be comfortable sending your child for counseling without talking to the person yourself. Remember, you are technically a consumer who will be purchasing an important service for your child and therefore you are allowed to go with your child. It helps, of course, to frame your request in a courteous way, for example, *"I don't know much about behavioral health counseling, and I'm trying to approach this process as an educated consumer. I'd like to ask you a few questions to help me better understand how you work."*

While you probably already have a list of questions in your head, here are a few more that you may want to include:

- Can you tell me about any specific training you have had in treating children/teens?
- My child has been having some problems in the following areas . . . Can you give me an idea of what your approach to dealing with these types of problems might be?
- Do you involve parents (or guardians) in the counseling process?
- Do you provide family therapy? How do you decide if this is needed?
- What criteria do you use to determine whether or not a child needs medication? To whom do you refer for this type of assessment?
- If my child needs special accommodations at school, do you assist in making these arrangements?
- How flexible is your appointment schedule? Do you offer after-school, evening or weekend appointments?
- If you or I decide that you and my child might not work well together, will you be able to suggest other referrals?

## 5. Glossary of terms – Smallest tier side 2

**Behavioral Health** – A state of wellbeing in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. World Health Organization (2014)

**Behavioral Health Provider** – Specialists in behavioral health provide counseling and direction to people dealing with challenges like addiction, physical limitations and mental illness. The profession includes psychologists, psychiatrists, mental health counselors, behavioral therapists, licensed social workers and other healthcare providers.

**Children’s System of Care (CSOC)** – NJ Department of Children and Families operates CSOC who serves children and adolescents with emotional and behavioral health care challenges and their families; children with developmental and intellectual disabilities and their families; and, children with substance use challenges and their families. CSOC is committed to providing services based on the needs of the child and family in a family-centered, community-based environment.

- **Perform Care** – Perform Care is the central hub that all referrals to CSOC services come through
- **Case Management Organization (CMO)** – This is the county based organization that authorizes services and works with the family to address behavioral health, mental health, and substance use issues.
- **Mobile crisis** – Each county has a mobile crisis unit that provides short term (up to 8 weeks) crisis support for families in home to stabilize the home and help child get back on track.

**Crisis Hospitalization** – A temporary confinement in a treatment facility during which the person in psychiatric crisis is evaluated by mental health professionals to determine whether civil commitment is appropriate or necessary; may be called an emergency “hold, “pickup” or “detention”

**Helpline/Hotline** – Phone, email, or text lines that are staffed 24/7 and have trained staff to provides immediate assistance to a caller for a specific purpose

**HIPAA** – The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that required the creation of national standards to protect sensitive patient health information from being disclosed without the patient’s consent or knowledge.

**Intensive Outpatient Program (IOP)** – Counseling services in an office based setting that occur for multiple days per week for several hours per session and typically include group and individual services as part of the program.

**Least Restrictive Environment** – The phrase, “Least Restrictive Environment” (LRE) identifies a continuum of services and establishes that there are multiple environments for your child. Services should always start at the least restrictive and move to more restrictive based on your child’s needs. – NJ Coalition for Inclusive Education (2016)

**Mental Illness** – Behavioral illness refers to a wide range of Behavioral health conditions or disorders that affect your mood, thinking and behavior. Many people have Behavioral health concerns from time to time. Mayo Clinic (2015)

**Outpatient Counseling** – Individual, Family, or Group counseling that occurs in an office based setting. Sessions are typically 45-50 minutes and are provided by a licensed behavioral health provider.

**Partial Hospitalization** – A Partial Hospitalization Program (PHP), or day hospital, is a very structured day program that provides several hours of therapy and skill building groups each day. Clients will participate in a daily routine in a PHP, but you will go back home each night. These are typically hospital based and are usually a step down from a hospitalization.

**Release of Information** – This is a form that gives the behavioral health provider permission to speak to someone in your child’s life and may include the school, a doctor, a clergy member, or other support resource. This is usually a very important component of the assessment and ongoing treatment since your child’s behavior at school or other places may be very different than it is at home. This release will give the other party permission to share their observations about your child but, unless you specifically indicate it, the behavioral health provider is not allowed by law to disclose information to that party. All information accumulated by the behavioral health provider is confidential.

**School Truancy** – The attendance regulations (N.J.A.C. 6A:16-7.6), require each district board of education to develop, adopt and implement policies and procedures regarding the attendance of students, including the adoption of a definition of "unexcused absence" that counts towards truancy. Each school district is different so you should talk about this with your child’s assigned school counselor

**Substance Abuse** – Recurrent use of alcohol and/or drugs causing significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home. SAMHSA (2020)



## 7. Resources - 3<sup>rd</sup> smallest tier side 2

### **Safety Planning and Meditation Apps:**

- My 3 App - You define your network and your plan to stay safe. With MY3 you can be prepared to help yourself and reach out to others when you are having thoughts of suicide
- Virtual Hope Box – The Virtual Hope Box app contains simple tools to help with coping skills, relaxation, distraction, and positive thinking.
- My Life My Voice – How are you feeling? This mood journal offers a simple solution for tracking your thoughts, feelings and moods in this interactive tool you can keep right on your phone!
- Headspace – Provides guided meditations, mini-meditations, sleep sounds, SOS meditations for emergencies, meditations for kids and animations to help you better understand meditation.
- Calm - Provides guided sessions ranging in time from 3 to 25 minutes with topics from calming anxiety to gratitude to mindfulness at work—as well as sleep sounds, nature sounds, and breathing exercises
- Aura - daily meditations, life coaching, nature sounds, stories, and music, which are all personalized based on the mood you select

### **NJ Family Success Centers:**

Family Success Centers are “one-stop” shops that provide wrap-around resources and supports for families before they find themselves in crisis. Family Success Centers offer primary child abuse prevention services to families and bring together concerned community residents, leaders, and community agencies to address the problems that threaten the safety and stability of families and the community. There is no cost to access services provided by Family Success Centers (FSCs). Each county in NJ has at least one Family Success Center. You can find your closest Family Success Center at <https://www.nj.gov/dcf/families/support/success/>

### **Statewide Parent Advocacy Network (SPAN)**

Providing information, resources, support, and advocacy assistance to families, professionals, policy makers, and our Parent Center colleagues. SPAN’s foremost commitment is to those with greatest need due to disability or special health/mental health needs, material poverty or financial instability, discrimination (race, sex, language, immigrant status, homelessness, etc.), involvement in the foster care, child welfare, or juvenile justice systems, geographic location, or other special circumstances. <https://spanadvocacy.org/>

### **NJ Helplines/Hotlines**

- 2<sup>nd</sup> Floor Youth Helpline (1-888-222-2228 call or text) - This is a youth helpline that assists with daily life challenges and serves all youth and young adults in NJ. Anonymity and confidentiality are assured except in life-threatening situations.
- Addiction Hotline of NJ (1-800-238-2333) – At any time of the day or night, trained and clinically supervised telephone specialists are available to educate, assist, or make referrals regarding substance use

- NJ Caring Crisis Hotline (908-232-2880 or text “CWC” to 839863) - A resource for people going through difficult times and looking for someone to care. Whether our callers are dealing with depression, anxiety, other sources of stress or suicidal thoughts, our volunteers are trained to provide a non-judgmental and supportive ear.
- NJ Children’s Mobile Response & Stabilization (1-877-652-7624) - Mobile Response and Stabilization Services are available 24 hours a day, seven days a week. The services are designed to defuse an immediate crisis, keep children and their family safe, and maintain the children in their own homes or current living situation (such as a foster home, treatment home or group home) in the community.
- NJ Division of Child Protection & Permanency (1-877-NJ ABUSE (652-2873)) - DCPD responsible for investigating allegations of child abuse and neglect and, if necessary, arranging for the child's protection and providing support to the family
- NJ Suicide Prevention Hotline (1-855-654-6735) – A 24/7 free confidential hotline with support services for people in distress

### **National Helplines/Hotlines**

- National Family Helpline (1-800-843-5437) - A helpline for families who are trying to prevent a crisis from occurring. Parents may be provided with parenting resources and community referrals
- National Suicide Prevention Hotline (1-800-273-8255 or text “HOME” to 741741) – A 24/7 free confidential hotline with support services for people in distress
- Boys Town National Hotline (1-800-448-3000) – A free resource and counseling service that assists children and parents 24/7, year round, nationwide

### **Online Resources**

Substance Abuse and Mental Health Services Administration (SAMHSA) - <https://www.samhsa.gov/>

National Alliance on Mental Illness - [www.nami.org](http://www.nami.org)

Mental Health America - <https://www.mhanational.org/>

American Foundation for Suicide Prevention (AFSP) - <https://afsp.org/>

Society for the Prevention of Teen Suicide – <https://www.sptsusa.org>

Trevor Project - [www.thetrevorproject.org](http://www.thetrevorproject.org)

Garden State Equality - [www.gardenstateequality.org](http://www.gardenstateequality.org)

## **FAQ - Largest tier side 2**

### **How do I talk to my child about needing treatment?**

The way you bring up the subject is important. You need to be calm and remain calm regardless of their reaction in order to have a serious conversation. It's common for your child to be self-conscious about what is going on and may it be hard for them to admit they have a problem. It's important you don't shame your child for needing treatment. Focus on the fact that you care about them and you want to find a way to help them feel better. Ask for their input into the problem and listen to their opinions.

### **What if my child refuses treatment?**

A child that feels forced to get treatment isn't likely to be motivated to change. Talk honestly and openly about what changes you have seen in them and that you are concerned for their wellbeing. Make a plan with them about getting treatment and provide a reward if they comply with the plan.

### **What do I tell my family and friends?**

Talking to your family and friends is an individual choice. Some family and friends might be supportive however, some might dismiss your concerns. Use your judgment and talk to people who will support you and your child. Talking about behavioral health concerns will help you feel less alone and may provide you resources you didn't know you had. Many people struggle with behavioral health issues so it is important you model for your children that they don't need to be ashamed of what is going on and that asking for help only makes them stronger.

### **Do I need to tell the teachers at the school?**

You do not have to tell the teachers at school, however, it might be helpful for them to know any strategies you are working on with your child so they can implement them in the classroom. The more communication you have with your child's teacher, the better they will be able to support them when you are not there.

### **I'm afraid people will think I'm a bad parent because my child is struggling with a mental illness. Is there anything I can do about that?**

We cannot control what other people think, however, many times people hold their beliefs because they don't understand behavioral health issues. Educating others on what a behavioral health issue is will help them understand they are complicated and have many contributing factors. Just because a child exhibits behavioral health issues, does not mean the parent is a bad parent.

### **What is a safety plan?**

A safety plan is a document that supports and guides someone when they are experiencing thoughts of suicide, to help them avoid a state of intense suicidal crisis. Anyone in a trusting relationship with the person at risk can help draft the plan; they do not need to be a professional. The plan should include what put the individual at risk, coping strategies that do not rely on the presence of others, ideas that engage them with people they trust, methods to reach out to family or friends, ways to keep the environment safe, and the number to the Suicide Prevention Hotline. This plan can change as the circumstances for the individual change and can be revised accordingly.

**What if my child is almost 18?**

It is a good idea to get your child enrolled into treatment that will continue to provide treatment when your child turns 18. Once your child turns 18, you will no longer have the authority to enroll your child in treatment. Additionally, unless your child gives consent to release information, you will not be able to access or talk to the behavioral health provider about what is going on in treatment. If your child decides to quit treatment, they do not have to notify you. Talk openly with your child about what their plan is regarding treatment when they turn 18. Discuss how keeping you involved can support them in their progress.

**What if my child needs a waiver to return to school?**

If you have been told your child needs a waiver to return to school, speak with the school about where you can access the waiver. The school may have a behavioral health provider that they work with and they prefer to assess your child. If they do not have a preferred behavioral health provider, typically a hospital crisis center staff member will give you a written waiver to return to school. Make sure you have the waiver in your hand before you leave the provider as getting it at a later time can be a hassle.

**Medication has been prescribed to my child, but I'm scared to give it to them for fear that it may make them worse. What should I do?**

Always talk to the prescribing doctor about your concerns. When you go, bring your written list of questions you have to help you better understand the medication the doctor prescribed for your child. It is their job to help you understand the benefits and potential side effects of each medication. Remember, each person is different and will respond differently to medication. Keeping an open dialog with your doctor will help make sure your doctor is prescribing the right medication for your child.

**How long will this last?**

For many children, once they get the appropriate treatment the behaviors reduce and the child learns to control themselves. Don't expect one session or even a few sessions with a behavioral health provider to "fix" the problem. It has taken time for the child to get to where they are today and it will take time for them to learn to control their thoughts and feelings. We also know that for some children this becomes a lifelong process. Remember if you don't give up on your child, they will learn not to give up on themselves. The process is easier with both you and your child as allies.