Agenda

Hilton Tampa Downtown

32nd Annual Research & Policy Conference on Child, Adolescent, and Young Adult BEHAVIORAL HEALTH

March 3-6, 2019

Child & Family Studies
College of Behavioral & Community Sciences
University of South Florida • www.usf.edu/cbcs/cfs
Conference Locations

**Poster Sessions**
Bayshore Ballroom  
Sun 5 pm & Tue 6 pm

**Keynote Address**
Bayshore Ballroom  
Monday 8:15 am, 2 pm  
Tuesday 8:30 am, 2:45 pm  
Wednesday 8:30 am

**Research Luncheon**
Bayshore Ballroom  
Tues 11:30 am – 1:15 pm

**Concurrent Sessions**
Bayshore 5, 6, 7  
Esplanade 1, 2, 3  
Palma Ceia 1, 2, 3, 4  
Garrison

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Conference Notes

**Presenters, please check in!**
After you check in at Registration, please see us at the Presenter Check-in Station. Bring your presentation in electronic format. We will test your files, and pre-load them in your presentation room before your session begins.

Hilton Tampa Downtown .............................................................813-204-3000
Twitter...................................................................................@CMHConference
Facebook ..............................................................................www.facebook.com/CMHConference/
Conference Wifi login ............................................................CMHConference2019wifi

*Note: If you are viewing anything that requires a large amount of data, please visit the open access area downstairs.*
Welcome

Welcome to the 32nd Annual Research & Policy Conference on Child, Adolescent and Young Adult Behavioral Health! We’re glad you’re here and hope your time in Tampa will be filled with not only the beautiful warm Florida sunshine, but with the shared desire to make connections that will generate positive improvements for the populations we serve.

For 32 years, the “Tampa Conference” has aimed to encourage researchers, evaluators, policymakers, those running family organizations, as well as community and family groups to get interested in, and stimulated to, creatively solve the issues facing the country’s most challenged children and their families. Through the conference, presenters and participants have created a unique community to share knowledge in the field by introducing new services, evaluation, research and policy impacting the fields of mental and behavioral health, substance abuse, criminal justice and education.

For the last 10 years, we are fortunate to have specialty tracks organized by partners, including: Casey Family Programs; Child & Family Evidence Based Practice Consortium; Family-Run Executive Director Leadership Association; Florida Institute for Child Welfare; Institute for Translational Research Education in Adolescent Drug Abuse at the University of South Florida; Morehouse School of Medicine; National Technical Assistance Network for Children’s Behavioral Health; National Wraparound Initiative; the RTC for Pathways to Positive Futures, Portland State University; and the Learning and Working RTC.

In addition to our partners, this conference would not be possible without the generous support of this year’s sponsors and most importantly, your registration and participation. Please be sure to view the complete list of our partners and sponsors listed in the Agenda. We hope you will take a few minutes to visit their exhibit tables throughout our hallways to learn more about the programs and services they offer.

As your conference hosts, we are proud of the excellent line-up of speakers and presenters this year, who will be true motivation to keep us on our quest to facilitate the charge for improved research and policy in child, adolescent, and young adult behavioral health. This year, we continue our focus of offering a variety of sessions that address solutions for research, practice and policy. Ultimately, we hope that the conference creates a dialogue that leads to more effective systems and policies that impact and support the well-being of children, youth, families, and the communities in which they live.

Have a great conference!

Mario Hernandez, PhD
Professor and Chair
Child & Family Studies
College of Behavioral & Community Sciences
University of South Florida

Scott Bryant-Comstock, MS
President & CEO
Children’s Mental Health Network

CFS Impact 2018
Limited supplies are also available at this conference.
OVERVIEW

Sunday, March 3, 2019
8:00 am  Registration Opens
1:00 pm – 4:00 pm  Preconference Sessions – open to all
5:00 pm – 6:30 pm  Poster Presentations and Opening Networking Reception

Monday, March 4, 2019
7:00 am  Registration & Networking Breakfast
8:15 am – 9:45 am  Welcome & Opening Keynote Address
9:45 am – 10:00 am  Networking Break
10:00 am – 11:30 am  Concurrent Sessions 1-11
11:30 am – 2:00 pm  Lunch on Your Own
2:00 pm – 3:15 pm  Keynote Address
3:15 pm – 3:30 pm  Networking Break
3:30 pm – 5:00 pm  Concurrent Sessions 12-22
5:00 pm – 5:15 pm  Networking Break
5:15 pm – 6:15 pm  Concurrent Sessions 23-33

Tuesday, March 5, 2019
7:00 am  Registration & Networking Breakfast
8:30 am – 9:45 am  Keynote Address
9:45 am – 10:00 am  Networking Break
10:00 am – 11:30 am  Concurrent Sessions 34-44
11:30 am – 1:30 pm  Research Luncheon
1:30 pm – 2:30 pm  Concurrent Sessions 45-55
2:30 pm – 2:45 pm  Networking Break
2:45 pm – 4:00 pm  Keynote Address
4:00 pm – 4:15 pm  Networking Break
4:15 pm – 5:45 pm  Concurrent Sessions 56-66
5:45 pm – 6:00 pm  Networking Break
6:00 pm – 7:30 pm  Poster Session

Wednesday, March 6, 2019
7:00 am  Registration & Networking Breakfast
8:30 am – 9:45 am  Keynote Address
9:45 am – 10:00 am  Networking Break
10:00 am – 11:30 am  Concurrent Sessions 67-77
11:30 am  Conference Adjourns

Thank You, Sponsors!
Special Session Tracks

Look for the following icons to identify sessions that focus on the following themes:

**BHE Behavioral Health Equity**
Co-sponsored by the Morehouse School of Medicine and the University of South Florida, presenters in this track will provide forward-thinking and multidisciplinary approaches to address behavioral health disparities in our progressively complex health system – showcasing the latest evidence-based research and discoveries, innovative programs, and effective policies advancing behavioral health equity among vulnerable populations both domestically and globally. With growing diversity in our country and the current failure to reduce or eliminate associated risk factors that can influence behavioral health and health outcomes, it is imperative that policymakers, researchers, and the larger behavioral health community more fully examine the entire continuum of our complex health system. Therefore, topical discussions will also focus on the look at the upstream, midstream and downstream factors impacting health equity for under-resourced, vulnerable and marginalized groups.

**CW Child Welfare**
Co-sponsored by Casey Family Programs and the Florida Institute for Child Welfare, this track showcases new developments in community-based and other interventions to prevent or mitigate the impact of child maltreatment. The track also includes presentations on how to address behavioral health issues for both children and parents involved in child welfare.

**EBP Evidence-Based Practice in Systems of Care**
Sponsored by the Child and Family Evidence-Based Practice Consortium, this track highlights research and technical assistance informing effective implementation of evidence-based practice in systems of care. Presentations focus upon workforce development, sustainability, and the implementation knowledge to practice gap in behavioral health care and child welfare.

**FE Family Engagement**
Sponsored by the Family-Run Executive Leadership Association, this track focuses on presentations highlighting innovative research designs that partner with parents, family members, and family-run organizations, as well as research efforts led by family members and family-run organizations. Research areas include: family engagement in child-serving systems such as juvenile justice, behavioral health, or child welfare; partnerships between family members or family-run organizations and researchers/evaluators; and unique roles family members and family-run organization leaders play in research and evaluation. Of particular interest are research findings that will help shape policies, practices, and treatments leading to positive long-term outcomes for children, youth adults and families impacted by mental and behavioral health.

**ITRE Institute for Translational Research Education in Adolescent Drug Abuse (ITRE)**
ITRE is a National Institute on Drug Abuse funded (R25DA031103) research education program with a mission to develop, cultivate, and disseminate an innovative model of research education that addresses best practices for translational research in the field of adolescent behavioral health, as it relates to substance abuse and co-occurring disorders. The Institute offers a graduate certificate program in which Institute Scholars work alongside academic mentors, community agency partners, and national mentors to complete service learning research projects. The Institute for Translational Research Track will include presentations of results from translational research projects along with discussions by leaders in the field regarding current trends in the field of implementation science.

**WA Innovations in Wraparound**
Sponsored by the National Wraparound Initiative, in this track, leaders in Wraparound management, supervision, evaluation, quality assurance and research will present an array of cutting-edge developments in care coordination for youth with complex needs. Sessions will focus on predictors of child and families outcomes, new measures of Wraparound implementation and quality, and training and workforce development approaches. Topical discussions on youth-driven care and serving culturally diverse youth round out the track.

**Y&YA Youth and Young Adults**
Sponsored by the Learning and Working RTC, the goal of this track is to share research findings to improve the lives of and services, treatments, and supports for youth and young adults (ages 14-30) living with or at risk of mental health and/or substance use conditions. This track includes research on issues relating to the transition to adulthood for adolescents, and appropriate services for youth and young adults, including developmentally-tailored and culturally appealing services and supports and related policy issues. The track also includes presentations highlighting the value and impact of youth and young adult involvement in the design and delivery of services, supports, and policies.

Visit our Exhibitors!
- Center of Excellence for Children’s Behavioral Health
- Child & Family Studies/University of South Florida
- Child Welfare Information Gateway
- Children’s Mental Health Network
- Devereux Advance Behavioral Health
- Elevate Young Professionals
- GEM Art Studio
- Institute for Innovation and Implementation
- KnKt’d Health
- Kognito
- New York Foundling
- National Adoption Competency Mental Health Training Initiative (NTI)
- National Wraparound Initiative/ National Wraparound Implementation Center
- Open Table
- Pathways Research and Training Center
- Realist Evaluation, Inc.
- Social TecKnowledgy DBA/ FidelityEHR
- Sunshine Health Child Welfare Specialty Plan
- TA Network
- UMASS Medical School – Transitions to Adulthood Center for Research
- UMASS Medical School – Helping Youth on the Path to Employment (HYPE)
- Wraparound Evaluation & Research Team (WERT)
- Youth ERA
**Sunday Preconference Sessions — 1:00 PM**

<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Presenters</th>
<th>RM</th>
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<tbody>
<tr>
<td>Special</td>
<td>Developing a Strategic Communications Plan to Advance Policy, Research, and Practice</td>
<td>Bracey; Tacinelli; Vanderploeg</td>
<td>Bayshore 5</td>
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<tr>
<td>Special</td>
<td>Rapid Results: Data Visualization for Continuous Quality Improvement</td>
<td>Tanana; Fluke</td>
<td>Bayshore 6</td>
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<tr>
<td>Special</td>
<td>Immigrants, Refugees, Trauma and Adverse Childhood Experiences – What Do We Need to Do to Help Them?</td>
<td>Mancini</td>
<td>Bayshore 7</td>
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</tbody>
</table>

**Poster Presentations & Opening Networking Reception — 5:00 PM – 6:30 PM — Bayshore Ballroom**

_Sponsored by Realist Evaluation, Inc._

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<tr>
<th>#</th>
<th>Track</th>
<th>Title</th>
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<tbody>
<tr>
<td>101</td>
<td>Y&amp;YA</td>
<td>Supporting Youth Transitioning Out of Foster Care: A Medicaid Managed Care Organization Approach</td>
<td>Richardson; Zellars</td>
</tr>
<tr>
<td>102</td>
<td>Y&amp;YA</td>
<td>Substance Use and Sexual Risk Taking in Emerging Adults with a History of Polyvictimization</td>
<td>Provenzano; Boroughs</td>
</tr>
<tr>
<td>103</td>
<td>Y&amp;YA</td>
<td>Trauma Exposure and Relationship with Child and Family Team Meeting (CFT) Characteristics and Outcomes in a Statewide System of Care</td>
<td>Schreier; Kaufman</td>
</tr>
<tr>
<td>104</td>
<td>Y&amp;YA</td>
<td>Risk Profiles Among Youth Enrolled in a Statewide System of Care</td>
<td>Schreier; Kaufman</td>
</tr>
<tr>
<td>105</td>
<td>Y&amp;YA</td>
<td>The Role of Client Demographics in Connecticut’s Care Coordination Services: Identifying Disparities to Improve Practice</td>
<td>Kelly; Randall; Bracey</td>
</tr>
<tr>
<td>106</td>
<td>Y&amp;YA</td>
<td>Childhood Witnessing from Adult Daughters of Abused Women: The Role of Drinking on Father’s Intimate Partner Violence</td>
<td>Sulp</td>
</tr>
<tr>
<td>107</td>
<td>Y&amp;YA</td>
<td>Does Parent Engagement Enhance Children’s Emotional Well-Being in Family Team Conference? Not a Panacea for Families with Domestic Violence</td>
<td>Kim; Choi; Pierce</td>
</tr>
<tr>
<td>108</td>
<td>Y&amp;YA</td>
<td>Engaging Families in School-Based Student Mental Health Support: The BRYT (Bridge for Resilient Youth in Transition) Story</td>
<td>Harding</td>
</tr>
<tr>
<td>109</td>
<td>Y&amp;YA</td>
<td>Differential Impact of Wraparound Facilitation Best Practices on Youth Outcomes: A Latent Class Analysis</td>
<td>Matthews; Byers</td>
</tr>
<tr>
<td>110</td>
<td>Y&amp;YA</td>
<td>Attachment and Biobehavioral Catch-Up: Investigating the Experiences and Views of Cultural Relevance from Bilingual Home Visitors</td>
<td>Borland; Mendenhall; Grube</td>
</tr>
<tr>
<td>111</td>
<td>Y&amp;YA</td>
<td>Future Direction for Child Mental Health: Developing a Blueprint using the System of Care Framework</td>
<td>Karikari; Walton; Bishop</td>
</tr>
<tr>
<td>112</td>
<td>Y&amp;YA</td>
<td>Successful Implementation of Evidence-Based Practices and Preparation for the Family First Act</td>
<td>Anderson; Barony; Rowlands</td>
</tr>
<tr>
<td>113</td>
<td>Y&amp;YA</td>
<td>Building Workforce Capacity Through a Community-Based System of Care Model: The Challenges of Balancing Fidelity and Adaptability</td>
<td>Davis; Oliver; Ogojiaku</td>
</tr>
<tr>
<td>114</td>
<td>Y&amp;YA</td>
<td>Meaningful Youth and Family Engagement in Residential Treatment Settings</td>
<td>Sweeney; Simons; Proulx</td>
</tr>
<tr>
<td>115</td>
<td>Y&amp;YA</td>
<td>Cultural Competency in Systems of Care: Assessing Attitudes of Race and Poverty Among Future Health Professionals</td>
<td>Letcher; Ramsay-Seager; Isaacson</td>
</tr>
<tr>
<td>116</td>
<td>FE</td>
<td>Implementation of a Group Intervention Program in a Residential School Setting: Facilitator Perceptions of Process and Outcomes</td>
<td>Castilo</td>
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<tr>
<td>117</td>
<td>FE</td>
<td>Measuring Parent Engagement in a Group-Based Parent-Focused Prevention Program (Legacy for Children™) to Improve Child Development Outcomes</td>
<td>Lee; Robinson</td>
</tr>
<tr>
<td>118</td>
<td>FE</td>
<td>Collaboration in a Public-Private Partnership for Trauma-Informed Child Welfare Services</td>
<td>Palmer; Akin; Dunkerley; Brook</td>
</tr>
<tr>
<td>119</td>
<td>FE</td>
<td>Intergenerational Transmission of Trauma: Creating Local Partnerships to Improve Access to Trauma- and Resiliency-Informed Care for Families</td>
<td>Cain; Munger</td>
</tr>
<tr>
<td>120</td>
<td>FE</td>
<td>Using a Magic Wand to Meet the Workforce Need: Creative Ways to Recruit and Graduate Highly Trained Social Workers to Meet the Needs of Youth and Families in Rural and Underserved Areas</td>
<td>Reay; Randall</td>
</tr>
<tr>
<td>121</td>
<td>CW</td>
<td>Engagement Strategies Among Agency Workers in Voluntary Prevention Programs in Child Welfare Services</td>
<td>Ismajli; Rohrer</td>
</tr>
<tr>
<td>122</td>
<td>CW</td>
<td>Building Stronger Teams: Data-Informed Practice using Visualizations to Improve Engagement of Natural Supports</td>
<td>Sikes; Butler; Oyer</td>
</tr>
<tr>
<td>123</td>
<td>CW</td>
<td>Interrupting Determinants of Abuse, Substance Misuse, and Delinquency: An Evaluation of an Innovative Early Prevention Mentoring Approach</td>
<td>Coote</td>
</tr>
<tr>
<td>124</td>
<td>CW</td>
<td>Increasing Social Support for New Parents: A Preliminary Look at One Program’s Effectiveness</td>
<td>Beaudry; Hussey; Mazza; Candelaria; Zabel</td>
</tr>
<tr>
<td>125</td>
<td>CW</td>
<td>Lessons Learned: Youth Living Out Loud - A Program for Youth Who Have Experienced Sexual Exploitation</td>
<td>Kreuser; Wilhelm</td>
</tr>
<tr>
<td>126</td>
<td>CW</td>
<td>A Wraparound Approach for Children/Youth with Serious Emotional Disturbance: Understanding the Needs of Participants with an Intellectual And/or Developmental Disability and Their Families</td>
<td>Williams; Ruiz; Taycher; McGrath; Clements-Nolle</td>
</tr>
</tbody>
</table>
### Poster Presentations & Opening Networking Reception — 5:00 PM – 6:30 PM — Bayshore Ballroom

**Sponsored by Realist Evaluation, Inc.**

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<tr>
<th>#</th>
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<tbody>
<tr>
<td>129</td>
<td>CW</td>
<td>Developing Leaders for Social Impact: Towards a Leadership Competency Model in Education &amp; Human Services</td>
<td>Dicharry; Blanchard</td>
</tr>
<tr>
<td>130</td>
<td></td>
<td>The Strengths Model for Youth: Implications for Child, Adolescent, and Young Adult Programming and Practice</td>
<td>Mendenhall; Schoenfeld; White; Grube</td>
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<tr>
<td>131</td>
<td></td>
<td>Using an Evidence-Informed Assessment Process to Support the Use of Evidence-Based Practices and Promote Positive Outcomes for Youth in Behavioral Health Settings</td>
<td>Maggiulli; Donovan; Vitron; VanHout; Castillo</td>
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<tr>
<td>132</td>
<td></td>
<td>A Need for Rethinking Drug Use: Addressing OTCs</td>
<td>Davis; Saarnio</td>
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<tr>
<td>133</td>
<td></td>
<td>The Role of Neighborhood-Level Factors on Child Behavior and Mood Problems: Controlling for Individual and Family Characteristics</td>
<td>Sualp; Khanijahani</td>
</tr>
<tr>
<td>134</td>
<td>Y&amp;YA</td>
<td>Measuring Meaningful Youth Voice at the Agency Level</td>
<td>Masselli</td>
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<tr>
<td>135</td>
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<td>The Internet of Everything and Artificial Intelligence Tools for Youth and Their Families with Behavioral Health Needs</td>
<td>Webman</td>
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</tbody>
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**Support the Children’s Mental Health Network and win an Apple iPad**

1 ticket for $5
3 tickets for $10

Tickets available at the CMHNetwork exhibit table

*Winner will be announced Wednesday before the morning plenary*
## Monday, March 4, 2019

### Breakfast 7:00 AM

### Opening Keynote Address – 8:15 AM – 9:45 AM

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<th>K</th>
<th>Title</th>
<th>Presenters</th>
<th>Room</th>
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<tbody>
<tr>
<td>Welcome and Overview</td>
<td>Mario Hernandez; Scott Bryant-Comstock</td>
<td>Bayshore Ballroom</td>
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<tr>
<td>Survive, Study, Grieve: A Conversation with School Shooting Survivors and Helpers</td>
<td>Martin Rafferty; Lisa Hamp; Sarah Lowe</td>
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### Networking Break 9:45 AM – 10:00 AM

### Monday Morning Concurrent Sessions — 10:00 AM –11:30 AM

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<th>Room</th>
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<tbody>
<tr>
<td>1</td>
<td>Y&amp;YA</td>
<td>90-Minute Symposium: Subjective Experiences of Having and Managing a Serious Mental Health Condition in Young Adulthood</td>
<td>Chair: Costa; Discussant: Vorhies Kladnick</td>
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<td></td>
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<td>Element of Symposium: The Realization That “Something Is Wrong”: Initial Contact with Mental Health Treatment</td>
<td>Sabella</td>
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<td>Element of Symposium: Sporadic and Erratic Patterns of Mental Health Treatment</td>
<td>Sabella</td>
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<td></td>
<td>Element of Symposium: The Role of Hospitalizations</td>
<td>Golden; Pici-D’Ottavio</td>
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<td>2</td>
<td>EBP</td>
<td>30-Minute Paper: Strategies to Facilitate Senior Leader Engagement in the Implementation and Sustainability of Evidence-Based Practice</td>
<td>Franks; Vieira</td>
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<tr>
<td></td>
<td>60-Minute Symposium: Evidence-Based Child Trauma Assessment: Barriers, Sustainable Dissemination, and Treatment Implications</td>
<td>Chair &amp; Discussant: Vanderplog</td>
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<td></td>
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<td>Element of Symposium: Changes in Child Trauma Assessment Practices and Related Barriers During and After a Learning Collaborative (LC): Specificity, Diffusion, and Sustainability</td>
<td>Peer; Hanson; Saunders; Korell</td>
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<td>Element of Symposium: Examining Patterns in Child- and Caregiver-Reported Child Trauma Exposure, Symptoms, and TF-CBT Retention: A Latent Class Analysis</td>
<td>Randall; Nelson; Champine; Barrette</td>
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<tr>
<td>3</td>
<td>CW</td>
<td>30-Minute Paper: Planning for Safe Care or Widening the Net? A Review and Analysis of 50 States’ Child Abuse Prevention and Treatment Act Policies Addressing Substance-Exposed Infants</td>
<td>Lloyd; Luczak; Lew</td>
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<td></td>
<td>60-Minute Symposium: Working Together for Families Trapped in Crisis: Innovative, Interactive Interventions that Engage, Increase Resilience and Stabilize Families</td>
<td>Chair: Beale; Discussant: Shepler</td>
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<td>Element of Symposium: Community Application of Experiential Treatments: Innovative Practices to Engage Clients from Multi-Stressed Environments</td>
<td>Lung</td>
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<td>Element of Symposium: The Ohio Adventure Therapy Coalition Journey: Comprehensive Strategies to Provide Effective, Sustainable Treatment While Building a Research Base with Our Most Vulnerable Population</td>
<td>Beale; Lung</td>
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<tr>
<td>4</td>
<td>BHE</td>
<td>30-Minute Paper: Rates of Children’s Mental Health Service Utilization Across Common Service Settings: A Meta-Analysis</td>
<td>Bruns; Duong</td>
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<td></td>
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<td>60-Minute Discussion: Harnessing the Power of the Evidence Base to Make Informed Decisions about Behavioral Health &amp; Equity</td>
<td>Lyons; Rubenstein</td>
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<tr>
<td>5</td>
<td>FE</td>
<td>90-Minute Discussion: Data-Informed Approaches to Collaboration with Youth &amp; Family: What the CMHI Data Tells Us</td>
<td>Masselli; Pearson; Sweeney; McClung</td>
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<tr>
<td>6</td>
<td>WA</td>
<td>30-Minute Paper: Trauma Identification and Increased Risk for Frontier Youth in Wraparound</td>
<td>Cooley; Weber; Dunn</td>
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<td></td>
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<td>30-Minute Paper: Developing a Cluster-Based Wraparound Level of Care System for Youth and Families with Behavioral Health Issues</td>
<td>Rubin; Dvoir; Rourke</td>
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<td></td>
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<td>30-Minute Paper: Using Data to Adjust a Target Population for Wraparound</td>
<td>Bruns; Bowles; Burton; Christiansen; Taychor</td>
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<tr>
<td>7</td>
<td>Y&amp;YA</td>
<td>30-Minute Paper: A Catch 22? The Real Experience of Aging into Adult Community Mental Health Services</td>
<td>Londono; Cohen; Kladnick</td>
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<td>30-Minute Paper: Reframe the Age: Enhancing Practice to Support the Success of Young Adults in Massachusetts</td>
<td>Holland; Wing; Clougherty; Meehan</td>
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<td>30-Minute Paper: Bridging the Transition for Transition-Age Youth (TAY): How Three Agencies in Texas Effected Organizational and Service Delivery Changes with Little or No Additional Resource</td>
<td>Morris; Emerson; Cohen</td>
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</table>
# Track | Title | Presenters | RM
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8 | **30-Minute Paper:** Using an Ecological Perspective to Screen Young Children for Developmental Risk and Resilience | DeCandia; Donegan | Palma Ceia 2

**60-Minute Symposium:** Parent Engagement Works: How Findings from the Home Instruction for Parents of Preschool Youngsters (HIPPY), an Early Education Program, Impacts Family Engagement, School Readiness, and Educational Outcomes of Low-Income Children in Florida | Payne | Palma Ceia 3

**Element of Symposium:** Home Instruction for Parents of Preschool Youngsters (HIPPY), an Early Education Program, Promotes Parental Engagement in Preparing Low-Income Children for Kindergarten | Joseph | Palma Ceia 4

**Element of Symposium:** Florida HIPPY Children’s Development of School Readiness Skills: Results from Bracken School Readiness Assessment Fiscal Year 2016-2017 | Vatalaro | Palma Ceia 5

**Element of Symposium:** Post HIPPY: Florida HIPPY Students’ Educational Outcomes | Yampolskaya | Palma Ceia 6

9 | **90-Minute Symposium:** Pediatric Care Integration Best Practices: Consensus Findings from an Expert Convening | Chair: Pires; Discussant: Fields | Palma Ceia 7

**Element of Symposium:** Expert Convening on Pediatric Care Integration Best Practices | Fields | Palma Ceia 8

**Element of Symposium:** Pediatric Care Integration Continuum: Consensus Framework | Pires | Palma Ceia 9

**Element of Symposium:** Best Practices in Pediatric Care Integration: Oklahoma’s Health Homes for Children with Behavioral Health Challenges | Williams | Palma Ceia 10

10 | **90-Minute Symposium:** Delinquency, Street Gangs, and Commercial Sexual Exploitation: Trauma Exposure and Trauma Symptoms Among Boys and Girls in Care of the Welfare or Justice Systems | Chair: Lanctôt; Discussant: Fox | Palma Ceia 11

**Element of Symposium:** Study of Trauma Associated with Delinquency and Its Traumatic Impact on Young Offenders Associated and Not Associated with Street Gangs | Laurier; Lanctôt; Ducharme | Palma Ceia 12

**Element of Symposium:** A Latent Class Typology of Justice-Involved Youth Victims and Exploration of Trauma-Related Psychological Symptoms and Justice Involvement Outcomes | Reid; Loughran | Palma Ceia 13

**Element of Symposium:** Flashbacks and Nightmares: The Effects of Child Sexual Exploitation on Post-Traumatic Symptoms in Emerging Adulthood | Lanctôt; Laurier; Reid | Palma Ceia 14

11 | ITRE | **Closed Session:** Responsible Conduct of Research II — ITRE Scholars only | Garrison | Palma Ceia 15

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### Lunch on Your Own

11:30 am – 2:00 pm

Take this opportunity to connect with colleagues and friends.

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### Keynote Address — 2:00 PM – 3:15 PM

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### Networking Break — 3:15 PM – 3:30 PM

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### Monday Afternoon Concurrent Sessions — 3:30 PM – 5:00 PM

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</table>
| 12 | **Y&Y** | **30-Minute Paper:** Reviewing Outcomes: O-YEAH, a Transitional Program for Young Adults, 10 Years in the Making | Goldfarb | Bayshore 5

**30-Minute Paper:** CT STRONG — A Review of Connecticut’s Healthy Transitions Program | Rodis; Donnelly; Grodzki; Hensley; Scanlon | Bayshore 6

**30-Minute Paper:** A New Cultural Approach to Young Adult Serving Systems | Daee; Lieb; Byam; Adams | Bayshore 7

13 | **EBP** | **30-Minute Paper:** Evidence-Based Treatments in Child Mental Health: Understanding the Factors Impacting Implementation and Sustainability | Eslinger; Sprang | Bayshore 8

**60-Minute Symposium:** Evidence-Based Practices in Children’s Behavioral Health: Implications for Sustainability and Service Systems | Chair: Lang; Discussant: Saunders | Bayshore 9

**Element of Symposium:** The Influences of Child, Clinician, and Organization Factors on EBP Sustainability and Child Outcomes: A Multilevel Assessment | Champine; Delaney; Lang | Bayshore 10

**Element of Symposium:** Building Bridges: Does Training Enhance Interprofessional Collaboration to Sustain Trauma-Informed Evidence-Based Practices (EBPs) for Youth and Families? | Hanson; Saunders; Davies; Peer; Schoenwald | Bayshore 11

**Element of Symposium:** Evidence-Based Practices in Outpatient Child Mental Health Clinics: Relation between Treatment Type and Diagnosis | Lee; Lang; Marshall | Bayshore 12
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<td>14</td>
<td>CW</td>
<td><strong>30-Minute Paper:</strong> Mitigating Barriers to Implementing Evidence-Based Interventions in Child Welfare: Lessons Learned from Scholars and Agency Directors</td>
<td>Garcia; DeNard; Morones; Eldeeb</td>
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<td>Bayshore 7</td>
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<td><strong>60-Minute Discussion:</strong> Doing the Limbic Limbo - Why Music, Rhythm, Movement, Art, and Play Help More Than Words</td>
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<td>15</td>
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<td><strong>60-Minute Symposium:</strong> System of Care Practice Review (SOCPR): Program, Community, and State Perspective</td>
<td>Chair: Mowery; Discussant: Hernandez</td>
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<td><strong>Element of Symposium:</strong> Ottawa's Children's Mental Health System</td>
<td>Tatarscheff; Quesnel; Hone; Mowery</td>
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<td><strong>Element of Symposium:</strong> Analysis of System of Care Practice Review Results for the Child Welfare and Non-Child Welfare Medicaid Populations in Arizona; Using Outcome Data to Improve/Strength the Children's System of Care</td>
<td>Flynn; Crouse; Mowery</td>
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<td><strong>Element of Symposium:</strong> Success 4 Kids and Families System of Care Practice Review</td>
<td>Mayo; Callejas</td>
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<td><strong>30-Minute Paper:</strong> Using Rapid-Cycle Evaluation and Iteration to Assess and Improve Your Intervention</td>
<td>Pollastra; Ablon</td>
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<td>16</td>
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<td><strong>60-Minute Discussion:</strong> Developing 21st Century Skills for the Young Adult Lived-Expertise Workforce: A Gap Analysis and Approach for Implementation</td>
<td>Dicharry; Martin</td>
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<td><strong>30-Minute Paper:</strong> Optimizing the Impact of Public-Academic Partnerships on Improving Youth Outcomes</td>
<td>Kang; Yi; Olubiyi; Page; Futterer</td>
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<td>17</td>
<td>WA</td>
<td><strong>90-Minute Symposium:</strong> Using Data to Understand the Process and Outcomes of Wraparound</td>
<td>Chair: Kaufman; Discussant: Bruns</td>
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<td><strong>Element of Symposium:</strong> Coaching to the Data in WRAP-CT</td>
<td>Horwitz</td>
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<td><strong>Element of Symposium:</strong> Child and Family Team Meeting Characteristics and Outcomes in a Statewide System of Care</td>
<td>Schreier; Kaufman</td>
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<td><strong>Element of Symposium:</strong> Using Administrative Data to Identify Behavioral Health Service Utilization Outcomes for Youth Enrolled in an Intensive Care Coordination Program</td>
<td>Bory; Plant; Hall</td>
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<td>18</td>
<td>Y&amp;YA</td>
<td><strong>90-Minute Symposium:</strong> Involuntary Treatment and Mandatory Leaves Involving Youth and Young Adults: Subjective Experiences, Impact, and Alternatives</td>
<td>Chair: Jones; Discussant: Stohlmann-Rainey</td>
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<td><strong>Element of Symposium:</strong> Sharing Their Stories: A Qualitative Investigation of Adolescents’ Inpatient Experiences During Psychiatric Hospitalization</td>
<td>Rice</td>
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<td><strong>Element of Symposium:</strong> “I’m Still Trying to Make Sense of It:” Unpacking the Experience and Impact of Involuntary Psychiatric Commitment During High School and College</td>
<td>Jones</td>
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<td><strong>Element of Symposium:</strong> Social Identity, Autonomy and the Loss of the Future Self: Student’s Experiences of University Mandated (Involuntary) Leaves of Absence and Their Long-Term Impact</td>
<td>Cutler</td>
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<td>19</td>
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<td><strong>30-Minute Paper:</strong> A Brighter Future: Children with Autism Spectrum Disorder Succeed within the HIPPY Program</td>
<td>Berkman; Brinson</td>
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<td><strong>60-Minute Discussion:</strong> Considerations for Elevating Family Voice in Early Childhood Systems of Care</td>
<td>Wasserman; Candelaria; Kallal</td>
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<td><strong>30-Minute Paper:</strong> An Evaluation of the Massachusetts Certification for Early Intervention Specialists (CEIS)</td>
<td>Haber; Feldman</td>
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<td><strong>60-Minute Paper:</strong> Shooters In Our Schools: Research Findings and Implications on Prevention, Intervention, Treatment and Recovery After a Mass School Shooting</td>
<td>Adams</td>
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<td>21</td>
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<td><strong>60-Minute Paper:</strong> Utilizing a Same-Day Access Clinic to Increase Access to Behavioral Health and Substance Use Services</td>
<td>Klyachkin; Breeding; Dungan</td>
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<td>22</td>
<td>ITRE</td>
<td><strong>30-Minute Paper:</strong> Client Perspectives on Detox: Practical and Personal Implications</td>
<td>Sharp; Armstrong; Moore; Riveiere</td>
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<td><strong>30-Minute Paper:</strong> Former Foster System Youth Perspectives on Transition to Adulthood</td>
<td>Armstrong-Heimsoth; Hahn-Floyd; Williamson; Sullivan</td>
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<td><strong>30-Minute Paper:</strong> A Needs Assessment for Native Americans for Community Action (NACA) Pathways Youth Substance Abuse Prevention Program</td>
<td>Bilyeu; Cheney; Heffern; Secakuku; de Heer; Baldwin</td>
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**Networking Break 5:00 PM – 5:15 PM**
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<td>23</td>
<td>Y&amp;YA</td>
<td>30-Minute Paper: Exploring Potential Correlates of Employment and Education Experiences Among Youth and Young Adults with Serious Mental Health Conditions</td>
<td>Sabella; Golden; Pici-D’Ottavio</td>
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<td>30-Minute Paper: Family Roles in the Transition of Young Adults with Mental Health Conditions</td>
<td>Koroloff; Friesen</td>
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<td>24</td>
<td></td>
<td>60-Minute Symposium: Multiple Perspectives to Inform the Development of the Connecticut Children’s Behavioral Health Network of Care</td>
<td>Chair: Kaufman; Discussant: Marshall</td>
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<td>Element of Symposium: Behavioral Health Provider Assessment of Collaboration Within a Network of Care</td>
<td>Kaufman; Palazzo; Clark</td>
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<td>Element of Symposium: Community Conversations: Youth Perspective</td>
<td>Ford; Wilson</td>
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<td>Element of Symposium: Understanding Our Regions Through Data</td>
<td>Riordan-Nold</td>
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<tr>
<td>25</td>
<td>CW</td>
<td>60-Minute Discussion: Maryland Social Services Administration’s Strategic Approach to Addressing Parental Substance Use Disorders</td>
<td>Peterson; Lowther; Kearley; Mills</td>
<td>Bayshore 7</td>
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<td>26</td>
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<td>60-Minute Symposium: Rural Trauma-Informed System of Care in Pennsylvania: A Fifteen Thousand Square Mile View</td>
<td>Chair &amp; Discussant: Payne</td>
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<td>Element of Symposium: The BHARP System of Care Project: Youth-Driven, Family-Driven, and Trauma-Informed System Transformation</td>
<td>Minnich; Davis; Payne</td>
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<td>Element of Symposium: Wayne County: Using Its Trauma-Informed Lens</td>
<td>Phillips; Crane; Pulleo</td>
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<td>27</td>
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<td>60-Minute Discussion: Developing Program and Practice Standards for Intensive In-Home Behavioral Health Treatment (IIBHT)</td>
<td>Benjamin; Shepler; Woolston; Bruns</td>
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<td>28</td>
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<td>60-Minute Discussion: Implementing a Cross-System Intervention to Promote the Mental Health of Children Involved in the Child Welfare System</td>
<td>Gopalan; Horen; Lowe</td>
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<tr>
<td>29</td>
<td>Y&amp;YA</td>
<td>60-Minute Discussion: Increasing Engagement and Improving Outcomes in Early Psychosis Programs by Integrating Transition-Age Youth Best Practices: A Solution-Focused Discussion</td>
<td>Fagan; Klodnick; Fetzer; Clark</td>
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<td>60-Minute Discussion: Public, Private and Tribal Partnership to Grow and Sustain Services to Native American Populations in Nebraska</td>
<td>Busch; Hascall; Donovan</td>
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<td>31</td>
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<td>60-Minute Discussion and Demonstration: Update on Continuous Realist Evaluation of System Of Care Expansion Utilizing Big Data from Management Information Systems: Demonstration with Real Human Services &amp; School Big Data from Manchester City Council (UK) and Chautauqua &amp; Rockland Counties (NY)</td>
<td>Kazi; Ludwig; Brinkman; McLaughlin</td>
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<td>60-Minute Symposium: Addressing Emergency Department (ED) Overuse among Youth with Behavioral Health Conditions: Characteristics of Frequent Visitors, the Impact of Mobile Crisis, and System Development Efforts</td>
<td>Chair: Vanderploeg; Discussant: Marshall</td>
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<td>Element of Symposium: Characteristics of Medicaid-Enrolled Youth Visiting EDs for Behavioral Health Conditions</td>
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<td>Element of Symposium: The Impact of a Mobile Crisis Intervention on ED Utilization</td>
<td>Fendrich; Kurz; Bory</td>
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<td>Element of Symposium: Policy, System Development, and Practice Innovations to Address the ED Issue</td>
<td>Vanderploeg; Graham</td>
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<td>33</td>
<td>ITRE</td>
<td>Closed Session: Scholars Reception</td>
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## Tuesday Morning Keynote Address — 8:30 AM – 9:45 AM

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<td>K</td>
<td>Supporting Positive Youth Development: Insights from a Former At-Risk Youth, Now a Youth Justice Attorney</td>
<td>Francis “Frankie” Guzman Bayshore</td>
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## Networking Break 9:45 AM – 10:00 AM

### Tuesday Morning Concurrent Sessions— 10:00 AM – 11:30 AM

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<td>Y&amp;Y</td>
<td>90-Minute Symposium: Innovations in Infusing Transition Age Youth and Young Adults Voice &amp; Leadership in Mental Health Systems</td>
<td>Chair: Wing; Discussant: Henry</td>
<td>Bayshore 5</td>
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<td></td>
<td>Element of Symposium: Innovative Non-Traditional Real World Examples of TAYYA Voice and Leadership in Community Mental Health</td>
<td>Edes; Estévez; Mikalson</td>
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<td>Element of Symposium: Challenges and Opportunities of Employing Youth Coordinators in State Systems</td>
<td>Swenson; Wang; Dively</td>
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<td>Element of Symposium: Examples of Youth and Young Adult Voice in Mental Health Services: From Concept to Reality</td>
<td>Edes; Mikalson; Wang; Dively</td>
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<td>Element of Symposium: Transforming Compliance-Driven Child Welfare Practice: Lessons from Installation and Initial Implementation as Missouri Scales Up New Philosophy and Practice</td>
<td>Collins</td>
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<td>Element of Symposium: Selection, Installation and Initial Implementation of Solution-Based Casework Across Programs in a Regional Private Child Welfare Organization</td>
<td>Elen</td>
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<td>Element of Symposium: Supporting Child Welfare Service Transformation: Implementation Science and Evidence-Based Practice in Academic and Field Curricula</td>
<td>Bertram; Wilcutt</td>
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<td>60-Minute Discussion: Grounded in Implementation Science: The Development of Evidenced-Informed Interventions to Improve Stability, Permanency, and Well-Being of Youth with Diverse Sexual Orientation, Gender Identity and Expression in Foster Care</td>
<td>Matarese; Greeno; Weeks</td>
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<td>37</td>
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<td>30-Minute Paper: Rapidly Responding To Children’s Crisis, Preventing Hospitalizations and Engaging Families Effectively: The Visiting Nurse Service of NY, Community Mental Health Children’s Mobile Crisis Rapid Response Team</td>
<td>Bandison; Pessin</td>
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<td>30-Minute Paper: Children of Immigrants’ Perceptions of Citizenship, Immigration Enforcement, and the Threat of Parental Deportation</td>
<td>Rojas-Flores; Vaught; Nunes; Hwang Koo; Zalvana</td>
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<td>30-Minute Paper: Measuring Treatment Fidelity Without Breaking the Bank (Or Your Back)</td>
<td>Pollastri; Wang; Hurley; Ablon</td>
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<td>60-Minute Discussion: Partnering with Family-Run Organizations to Engage Family Voice in Policy and Practice Change</td>
<td>Pearson; Sweeney</td>
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<td>30-Minute Paper: Assessing Support for Family Voices on Committees and Councils: Development of the FAM-VOC Assessment Tool</td>
<td>Pearson; Koroloff</td>
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<td>90-Minute Symposium: Using Data to Support Wraparound Implementation at the Systems, Organization, and Individual Levels</td>
<td>Chair: Bruns</td>
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<td>Element of Symposium: Assessing State-Level Progress and Completeness of Wraparound Implementation Using a Standardized Measure</td>
<td>Olson; Benjamin; Bruns; Hensley; Estep</td>
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<td>Element of Symposium: Supporting Wraparound Implementation at the Provider Organization Level: How Can We Meet Implementation Standards?</td>
<td>Estep; Coviello; Robshaw</td>
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<td>Element of Symposium: Impact of Technical Assistance and Training on Systems of Care Implementation</td>
<td>Olson; Walker; Bruns</td>
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<td>Y&amp;Y</td>
<td>30-Minute Paper: Amplifying Futures: Young Adult Peers in Adolescent Substance Use Brief Intervention</td>
<td>Ferreira; Donegan; Paquette; Winn; Wilkey</td>
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<td>30-Minute Paper: Lessons from Feasibility Piloting: Refining the Pass Academic Peer Coaching Intervention for College Students with Lived Experience</td>
<td>Golden; Costa; Davis</td>
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<td>30-Minute Paper: The Story of Transition Age Services in Muskegon County Michigan</td>
<td>France; Bradish</td>
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<td>Y&amp;Y</td>
<td>30-Minute Paper: Recovery High School Outcomes at Twelve Months</td>
<td>Moberg; Finch</td>
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<td>60-Minute Paper: Teacher-Child Interaction Training Implementation: Outcomes and Lessons Learned from a Quasi-Experimental Trial</td>
<td>Rivas; Hughes Pontier; Romillo; Mooss</td>
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<td>ITRE</td>
<td>90-Minute Discussion: Implementation Science: Strikng the Balance Between Program Fit and Fidelity in Evidence-Based Practice</td>
<td>Vroom; Albizu-Jacob; Menendez; Rome; Willisie</td>
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<td>30-Minute Paper: Leadership Qualities that Promote Success of Community-Based Mental Health Interventions</td>
<td>Tran; McNeish</td>
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<td>44</td>
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<td>10-Minute Presentation: Collaborative Problem Solving: Updates on Implementation</td>
<td>Ablon</td>
<td>Garrison</td>
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<td>10-Minute Presentation: Family Matters: Supporting Permanency Through Adoption Competent Mental Health Service</td>
<td>Smith Goering</td>
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<td>10-Minute Presentation: Exploration of How Youth Drop-In Centers Can Address Housing Needs of Young Adults</td>
<td>McPheeters</td>
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<td>10-Minute Presentation: Leveraging Supervision to Improve Implementation of Evidence-Based Practice in Community Mental Health</td>
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<td>10-Minute Presentation: Condensed Mindfulness-Based Intervention Among At-Risk Youth in Residential Emergency Shelters</td>
<td>Gordon</td>
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<td>10-Minute Presentation: Using Person-Centered Approaches to Understand Complex Profiles of Youth in Public Mental Health Settings</td>
<td>Bonadio</td>
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<td>10-Minute Presentation: Elevating Youth Advocates to Young Professionals: The Next Evolution</td>
<td>Dicharry</td>
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**Research Luncheon — 11:30 AM – 1:15 PM – Bayshore Ballroom**

**Research Luncheon**

**Networking Break 1:15 PM - 1:30 PM**

**Tuesday Afternoon Concurrent Sessions— 1:30 PM – 2:30 PM**

<table>
<thead>
<tr>
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<th>Presenters</th>
<th>RM</th>
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<tbody>
<tr>
<td>45</td>
<td>Y&amp;YA</td>
<td>60-Minute Symposium: Embedding Youth Voices in Systems and Policy Changes</td>
<td>Chair: West-Bey; Discussant: Weerasinghe</td>
<td>Bayshore 5</td>
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<td></td>
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<td><strong>Element of Symposium:</strong> Behind the Asterisk: Perspectives on Young Adult Mental Health from “Small and Hard to Reach” Communities</td>
<td>West-Bey; Mendoza</td>
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<td><strong>Element of Symposium:</strong> Intercepting the Former Perception of Parental Refinement</td>
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<td>46</td>
<td>EBP</td>
<td>60-Minute Symposium: Listening to Voices, Enacting Vision: Practice-Based Research and Data-Informed Policy Decisions in Hawai'i's System of Care</td>
<td>Chair: Mueller; Discussant: Daleiden</td>
<td>Bayshore 6</td>
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<td><strong>Element of Symposium:</strong> Leveraging Multiple Voices to Advance Practice-Based Research in a System of Care</td>
<td>Milette-Winfree; Hee; Mueller</td>
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<td><strong>Element of Symposium:</strong> Using Local Data to Build Digital Decision-Making Tools and Policies</td>
<td>Orimoto; Okamura; Sender; Ahuna; Jackson</td>
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<tr>
<td>47</td>
<td>CW</td>
<td>30-Minute Paper: The Intimate Partner Violence – Family Assessment Intervention Response: An Innovative Intervention for Families Impacted by Intimate Partner Violence in the Child Welfare System in Connecticut</td>
<td>Stover; Beebe; DiVietto; Madigan</td>
<td>Bayshore 7</td>
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<td>30-Minute Paper: Improving Outcomes for LGBTQ+ Youth in Child Welfare Vis-A-Vis Direct Services and Systems-Change Interventions: An Examination of The Los Angeles LGBT Center’s Federal RISE Project</td>
<td>Islas; Bustamante</td>
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<tr>
<td>48</td>
<td>BHE</td>
<td>60-Minute Discussion: Connecticut’s Data-Driven Approach to Eliminating Health Disparities: Building Statewide Capacity and Data Infrastructures for Addressing Disparities and Disproportionalities</td>
<td>Bracey; Marshall; Riordan-Nold; Girelli; Frometa Singh</td>
<td>Esplanade 1</td>
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<tr>
<td>49</td>
<td></td>
<td>30-Minute Paper: Mental Illness Stigma and Suicidality Among Young Adults</td>
<td>Kosyluk; Conner; Jeffries; Karver</td>
<td>Esplanade 2</td>
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<td></td>
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<td>30-Minute Paper: The Implementation and Impact of Eye Movement Desensitization and Reprocessing (EMDR) Within an Urban Child Behavioral Health Setting: A Four-Year Evaluation of Treatment</td>
<td>Kaufman; Lusa; Jaffe; Whitson</td>
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<td>50</td>
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<td>60-Minute Symposium: The Children’s Mental Health Campaign: How a Large Statewide Network of Mental Health Providers, Advocates, and Families Can Create Lasting Change</td>
<td>Chair: White</td>
<td>Esplanade 3</td>
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<td><strong>Element of Symposium:</strong> A History of the Children’s Mental Health Campaign: How a Coalition Can Get Things Done</td>
<td>Allen Scannell</td>
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<td><strong>Element of Symposium:</strong> Using Family Voice to Identify Critical Issues, to Lend Power to the Fight, and to Empower Parents, Caregivers, and Children to Make Change</td>
<td>Lambert</td>
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<td><strong>Element of Symposium:</strong> A Coalition Model: Putting Kids and Families First</td>
<td>Ginnis</td>
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<td>51</td>
<td>Y&amp;YA</td>
<td>30-Minute Paper: Predicting Emerging Adults at Risk for Disengaging from the Behavioral Health Service System</td>
<td>Bory; Plant</td>
<td>Palma Ceia 1</td>
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<td>30-Minute Paper: Unpacking Transition-Age Youth &amp; Young Adult Multidisciplinary Service Engagement: Examining the Relationship Between Social Support and Service Enrollment Length</td>
<td>Kladnick; Johnson; Fagan; Schwank</td>
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<td>52</td>
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<td>60-Minute Symposium: School-Based Mental Health Programs in Georgia: Research, Practice, and Policy</td>
<td>Chair; DiGirolamo; Discussant: Fitzgerald</td>
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<td>Element of Symposium: State-Level Policy, Legislation, and Programming Related to School-Based Mental Health (SBMH)</td>
<td>Blanton</td>
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<td>Element of Symposium: Research and Evaluation of School-Based Mental Health (SBMH) Efforts</td>
<td>Desai; Reid</td>
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<td>Element of Symposium: Local/Organizational Policy Implications for School-Based Mental Health (SBMH) Programs</td>
<td>Snyder; Packard</td>
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<td>60-Minute Symposium: Addressing the Needs of Commercially Sexually Exploited Children: Lessons Learned in Research and Practice</td>
<td>Chair: Johnson; Discussant: Farrell</td>
<td>Palma Ceia 3</td>
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<td>Element of Symposium: Providing Trauma-Informed Care to Commercially Sexually Exploited Children</td>
<td>McGrath</td>
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<td>Element of Symposium: Youth Strengths as Mediators of Trauma: Understanding the Importance of a Strengths-Based Approach in Working with Exploited Youth</td>
<td>Landers</td>
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<td>Element of Symposium: No One Wants to Hear My Story - Engaging the Perspectives of Exploited Youth to Better Meet their Needs</td>
<td>Johnson; James</td>
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<td>54</td>
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<td>30-Minute Paper: Attachment to Parents and Depression During Adolescence</td>
<td>Yampolskaya; Massey; Walker-Egea</td>
<td>Palma Ceia 4</td>
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<td>30-Minute Paper: Perception of Personal Change Among Young Adults Experiencing a First Episode Psychosis in the Context of a Coordinated Service Care Program: Findings from the MHBG 10 Percent Set Aside National Evaluation</td>
<td>Daley; George; Rosenblatt</td>
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<td>55</td>
<td>ITRE</td>
<td>30-Minute Paper: A Behavioral Health Evaluation of Hispanic Youth in Rural Communities</td>
<td>Tucker; Liller; Romo; Massey; Levin; Calcano; Vroom</td>
<td>Garrison</td>
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<td>30-Minute Paper: Voices in Foster Care: A Peer-Driven Perspective on Successful Development of Life-Skills Among Transition-Age Youth</td>
<td>Martin; Wallace; Burton; Massey; Willisie</td>
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**Networking Break 2:30 PM - 2:45 PM**

**Tuesday Afternoon Keynote Address — 2:45 PM – 4:00 PM**

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“Business as Usual” Is Not Enough: Engaging and Innovating with Young Adults in Research and Practice

Kathryn Sabella; Amanda Costa; Stephanie Sikes-Jones; Tyler Clark

Bayshore Ballroom

**Networking Break 4:00 PM - 4:15 PM**

**Tuesday Afternoon Concurrent Sessions—4:15 PM – 5:45 PM**

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<td>Y&amp;YA</td>
<td>30-Minute Paper: Results of a National Delphi Study Prioritizing Child-Adult Mental Health Care Transitions with Youth as Co-Investigators</td>
<td>Cleverley; McCann</td>
<td>Bayshore 5</td>
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<td>30-Minute Paper: Peer- and Non-Peer Transition Support Providers’ Training Needs: Results of a Youth Guided PAR Study</td>
<td>Jivanjee; Brennan; Grover; Maselli; Thorp</td>
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<td>30-Minute Paper: Federal Programs Designed to Support Marginalized Youth in the Transition to Adulthood: Evaluating Their Fit with Transition Needs</td>
<td>Palmer; Narendorf</td>
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<td>57</td>
<td>EBP</td>
<td>30-Minute Paper: Minding the Implementation Gap: Fidelity Measurement Variability Within Evidence-Based Interventions</td>
<td>Mitchell; Sedivy; Rolls Reute; Kerns</td>
<td>Bayshore 6</td>
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<td>30-Minute Paper: Use of Data and Collaborative Problem Solving to Improve Service Delivery and Response at a Statewide Child Welfare Hotline</td>
<td>Vieira; Franks; Bellonci; Young</td>
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<td>30-Minute Paper: Integrating Evidence-Based Practices into an Early Childhood Mental Health Network: A Dynamic Approach to Strengthening the Resilience of Young Children and Families</td>
<td>Kadlik; Berger; Okeke</td>
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<td>58</td>
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<td>30-Minute Paper: Treatment Effects of Parent-Child Focused Evidence-Based Programs (EBPs) on Problem Severity and Functioning Among Children and Adolescents with Disruptive Behavior</td>
<td>Vidal; Connell</td>
<td>Bayshore 7</td>
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<td>60-Minute Symposium: Outcomes, Networks, and Services, What’s the Connection?: Findings from The Children’s Mental Health Initiative National Evaluation</td>
<td>Chair: Rosenblatt; Discussant: Stoul</td>
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<td>Element of Symposium: Children’s Mental Health Initiative (CMHI) National System of Care Expansion Evaluation: Child and Family Outcomes</td>
<td>Rosenblatt; Maselli</td>
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<td>Element of Symposium: Children’s Mental Health Initiative (CMHI) National System of Care Expansion Evaluation: Using Egocentric Network Analysis to Assess Youth Mental Health Support Networks in Systems of Care</td>
<td>George; Rajapaksa; Huang</td>
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<td>Element of Symposium: Children’s Mental Health Initiative (CMHI) National System of Care Expansion Evaluation: Longitudinal Findings on Supports and Services</td>
<td>Jones; Gargan; Johanson</td>
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<tr>
<td>59</td>
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<td>30-Minute Paper: An Evaluation of Georgia’s Recovery Support Clubhouses’ Impact on Substance Use and Mental Health Outcomes Among Youth in Recovery</td>
<td>McLaren; Smith; Lee; Davidson</td>
<td>Esplanade 1</td>
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<td>60-Minute Discussion: The Impact of Social Determinants on Opioid Use</td>
<td>Lupton</td>
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<td>60</td>
<td></td>
<td>30-Minute Paper: Increased Youth Engagement in Youth-Serving Organizations: The Validation of the Organizational Readiness Tool for Youth-Adult Partnerships</td>
<td>Outley; Gabriel</td>
<td>Esplanade 2</td>
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<tr>
<td>61</td>
<td>WA</td>
<td>30-Minute Paper: Adapting Wraparound for Older Youth and Young Adults</td>
<td>Walker</td>
<td>Esplanade 3</td>
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<td>30-Minute Discussion: Building Strong Collaboration Between Primary Healthcare and Children’s Mental Health Services: The Families First Model</td>
<td>Whalen; Matthews</td>
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<td>30-Minute Paper: Wraparound Implementation Using the Innovation of Health Habitus</td>
<td>Lekas; Fuller Lewis; Trinkle; Brown</td>
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<td>62</td>
<td>Y&amp;YA</td>
<td>30-Minute Paper: Methodological Innovations in Research on Services for Youth and Young Adults</td>
<td>Ellison; Bond; Becker; Hayes</td>
<td>Palma Ceia 1</td>
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<td>30-Minute Paper: The Effectiveness of a 12-Week Evidence-Based Transitional Intervention to Sustain Recovery for Youth with Early Psychosis: Preliminary Findings</td>
<td>McCoy; Conrad</td>
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<td>30-Minute Paper: What Happens Next? How to Maximize the Utilization of Findings from Rigorous Evaluations</td>
<td>Hurley; Meyer</td>
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<td>63</td>
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<td>30-Minute Paper: Engaging High School Teachers in Connecting Students to Mental Health Care Using Online Role Play with Emotionally Responsive Virtual Students</td>
<td>Albright; Fazel; McMillan; Joshi</td>
<td>Palma Ceia 2</td>
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<td>30-Minute Paper: Healthy Students Succeed: Policy Solutions for School-Based Substance Use Prevention</td>
<td>Ough; Green</td>
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<td>30-Minute Paper: Does Mental Health Service Use Prevent Child Welfare and Juvenile Justice Systems Involvement?</td>
<td>Garcia; Kim</td>
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<td>64</td>
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<td>30-Minute Paper: It Works Way Better Than Yelling Your Head Off: Strengths and Needs of Teachers Implementing PBIS</td>
<td>Lewis Chiu; Sayman; Lusk</td>
<td>Palma Ceia 3</td>
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<td>60-Minute Discussion: Enhancing School Behavioral Health Supports for Tier 2 &amp; Tier 3 Youth</td>
<td>Hussey; Riske-Morris</td>
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<tr>
<td>65</td>
<td>Y&amp;YA</td>
<td>90-Minute Discussion: Tips and Tricks to Developing and Sustaining Youth Advisory Councils in Mental Health Organizations</td>
<td>Costa; Mizrahi</td>
<td>Palma Ceia 4</td>
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<tr>
<td>66</td>
<td>ITRE</td>
<td>30-Minute Paper: Evaluation of the Too Good for Drugs Prevention Program Implementation Fidelity Checklist</td>
<td>Bales; Baldwin; Menendez; Mendez; Lubotsky Levin</td>
<td>Garrison</td>
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<td>30-Minute Paper: Evaluating Project Prevent: Implementation of Restorative Practices in Hillsborough County Schools</td>
<td>Goldman; Kidambi; Vroom; Green; Hogue; Hensley</td>
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**Networking Break 5:45 PM - 6:00 PM**

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**Tuesday Poster Presentations & Networking Reception — 6:00 PM – 7:30 PM — Bayshore Ballroom**

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<tbody>
<tr>
<td>201</td>
<td>Y&amp;YA</td>
<td>Video Briefs as a Training Modality for Busy Transition Service Providers: Report of an Evaluation</td>
<td>Jivanjee; Brennan; Grover; Aue</td>
<td>Bayshore 7</td>
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<tr>
<td>202</td>
<td>Y&amp;YA</td>
<td>The Relationship Between Perceived Neighborhood Collective Efficacy and Mental Health Service Utilization Among Adolescents</td>
<td>Dawson</td>
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<tr>
<td>203</td>
<td></td>
<td>Project: Come Play With Me-A Grassroots Effort to Encourage the Protective Factor of Play in Preventing and Alleviating Childhood Trauma and Toxic Stress Symptoms in a Rural Indiana Community</td>
<td>Terlep; Bailey; Nunn; Felsman</td>
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<tr>
<td>204</td>
<td></td>
<td>Fighting Stigma in Schools with NAMI’s Ending the Silence Program for Students, School Staff, and Families</td>
<td>Rothman</td>
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<tr>
<td>205</td>
<td></td>
<td>Leveraging Implementation Science to Scale EBPs to Fidelity Across a Behavioral Healthcare System</td>
<td>Donovan; Maggiulli; Vitron; VanHout</td>
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<tr>
<td>206</td>
<td>Y&amp;YA</td>
<td>Transforming the Lives of Former Foster Youth: A Campus-Based Support Program Model Grounded in Social Work Values</td>
<td>Lee; Mickelson; Quijada; Orr</td>
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<tr>
<td>207</td>
<td>EBP</td>
<td>Challenges and Strategies for Social Workers Training in Integrated Behavioral Health Settings: Observations from the Field</td>
<td>Rawlins-Easley; Johnson; Williams; Woodson; Rosenthal</td>
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<tr>
<td>208</td>
<td>BHE</td>
<td>Mental Health Quality of Life Measures Among Rural Transgender and Gender Expansive Youth</td>
<td>Scribani; O’Bryan; Tallman; Wolf-Gould; Gadomski</td>
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<tr>
<td>209</td>
<td>CW</td>
<td>Translating Youth-Specific Data Across Systems to Inform the System of Care Effort</td>
<td>Hascall; Busch</td>
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<tr>
<td>210</td>
<td>CW</td>
<td>Nebraska’s Innovative yet Simple Approach to Sharing Youth Specific Data Across Systems to Inform the System of Care Effort</td>
<td>Miller; Simon</td>
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<tr>
<td>211</td>
<td>EBP</td>
<td>The Ohio Healthy Transitions Project: Serving Transitional Age Youth with a Serious Emotional Disturbance, a Serious Mental Illness, or a Co-Occurring Intellectual Developmental Disability in Cuyahoga (Cleveland) and Lorain (Elyria) Counties</td>
<td>Stormann; Jones; Williams; Sadowsky; McCafferty</td>
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<td>212</td>
<td>CW</td>
<td>Community and School-Based Behavioral Health with D&amp;A Specialist</td>
<td>Miller; Simon</td>
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<td>213</td>
<td>EBP</td>
<td>Analyzing Medicaid Behavioral Health Service Utilization Patterns for Youth Involved in Other Ohio Youth-Serving Organizations</td>
<td>Sweeney; Shepker</td>
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<td>214</td>
<td>BHE</td>
<td>The Landscape of the Council on Accreditation (COA) in Public Child Welfare: Exploring and Mapping a Potential Tool for Quality Improvement</td>
<td>Lee</td>
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<td>215</td>
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<td>Engaging Families Dually-Involved in the Child Welfare System and the Juvenile Justice System</td>
<td>Woolard; Vidal; Rosenblatt</td>
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<td>216</td>
<td>CW</td>
<td>The Preventative Effect of Strength-Building</td>
<td>Tackitt-Dorfmeyer; Oyer</td>
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<td>217</td>
<td>WA</td>
<td>The Ohio Healthy Transitions Project: Serving Transitional Age Youth with a Serious Emotional Disturbance, a Serious Mental Illness, or a Co-Occurring Intellectual Developmental Disability in Cuyahoga (Cleveland) and Lorain (Elyria) Counties</td>
<td>Stormann; Jones; Williams; Sadowsky; McCafferty</td>
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<td>218</td>
<td>CW</td>
<td>Sustaining Evidence-Based Interventions; Solutions to Hiring and Retaining Staff</td>
<td>Anderson; Rowlands; Gramm-Smith</td>
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<td>219</td>
<td>CW</td>
<td>Nebraska’s Innovative yet Simple Approach to Sharing Youth Specific Data Across Systems to Inform the System of Care Effort</td>
<td>Miller; Simon</td>
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<td>Tackitt-Dorfmeyer; Oyer</td>
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<td>221</td>
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<td>Integrating Implementation Science and Evidence-Based Practice to Support Transformational Change in the Child Welfare Workforce</td>
<td>de Guzman; Leake; Bertram; Collins; Wilcutt</td>
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<td>222</td>
<td>CW</td>
<td>How Does State Context Influence Wraparound Quality? Findings from the Coaching Observation Measure for Effective Teamwork (COMET)</td>
<td>Azman; Kellogg; Olson; Hendley</td>
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<td>223</td>
<td>WA</td>
<td>It’s the Principle of the Matter: A Large Behavioral Health and Child Welfare Agency Rooted in Wraparound Programming Aims to Improve Fidelity and Quality Assurance to Wraparound Principles Through Implementation of the Tom 2.0 (Team Observation Measure)</td>
<td>Jones; Klyachkin; Moore</td>
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<td>224</td>
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<td>The Comprehensive Review of the Literature on Bruxism</td>
<td>Stuart</td>
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<td>225</td>
<td>WA</td>
<td>Overrepresentation of Youth with Behavioral Health Conditions in Exclusionary Discipline: The Role of Policy and Law Enforcement</td>
<td>Thomas; Phillippi</td>
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<td>226</td>
<td>WA</td>
<td>Adapting Partnering for Success for Treatment Foster Parents to Promote the Evidence-Based Mental Health Interventions in the Child Welfare System</td>
<td>Powell; Steward; Baldwin; Bryliske</td>
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<td>227</td>
<td>WA</td>
<td>Findings and Lessons Learned: Development and Implementation of a Model to Support Access to Behavioral Health Care</td>
<td>Simmons</td>
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<td>228</td>
<td>WA</td>
<td>Overrepresentation of Youth with Behavioral Health Conditions in Exclusionary Discipline: The Role of Policy and Law Enforcement</td>
<td>Thomas; Phillippi</td>
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<td>229</td>
<td>WA</td>
<td>Youth Engagement Strategies to Inform Federal Policies and Programs</td>
<td>Hoffman; Lulow; Ajmera; Crouse; Morath</td>
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<td>230</td>
<td>WA</td>
<td>A Comprehensive Review of the Literature on Bruxism</td>
<td>Stuart</td>
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<td>231</td>
<td>WA</td>
<td>The Description of Motivational Interviewing in Wraparound to Increase Outcomes</td>
<td>Weber; Campbell; Rast</td>
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<td>232</td>
<td>WA</td>
<td>Faces of Medicaid Data Series: Examining Children’s Behavioral Health Service Use and Expenditures, 2005-2011</td>
<td>McLean</td>
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<td>233</td>
<td>WA</td>
<td>Incorporating Evidence into Systems of Care: An Integrative Framework</td>
<td>Graaf; Mendenhall</td>
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<tr>
<td>234</td>
<td>WA</td>
<td>The Effects of Toxic Stress on Brain Development</td>
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### Breakfast 7:00 AM

#### Keynote Address – 8:30 AM – 9:45 AM

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<th>Track</th>
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<th>Presenters</th>
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<tbody>
<tr>
<td>K</td>
<td>Addressing the Impact of a Changing Health Care Environment through Behavioral Health Research and Policy</td>
<td>Larke Huang</td>
<td>Bayshore Ballroom</td>
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#### Networking Break 9:45 AM – 10:00 AM

### Wednesday Morning Concurrent Sessions — 10:00 AM –11:30 AM

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<th>Presenters</th>
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<tr>
<td>67</td>
<td>Y&amp;YA</td>
<td>90-Minute Symposium: If THEY Build It, THEY Will Come! A Peer-To-Peer Approach to Behavioral Health Services for Youth and Young Adults</td>
<td>Chair: Freeman-Foster</td>
<td>Bayshore 5</td>
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<td>Element of Symposium: Secretly Therapeutic: How to Engage Transition Age Youth</td>
<td>DeFiore; Smith; Edge; Olsen</td>
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<td>Element of Symposium: ‘Florida Healthy Transitions’ Social Return on Investment</td>
<td>Morrison-Rodriguez; Mayo</td>
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<td>68</td>
<td>EBP</td>
<td>30-Minute Paper: A Mixed Methods Outcome Evaluation of the Technical Assistance Network for Children’s Behavioral Health</td>
<td>Olson; Berntson; Bruns; Zabel; Matarese</td>
<td>Bayshore 6</td>
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<td>60-Minute Discussion: Addressing Gaps in Behavioral Health Workforce Training Needs for Children, Youth, and Families</td>
<td>Beaudry; Hussey; Mazza; Candelaria; Zabel</td>
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<td>69</td>
<td>CW</td>
<td>60-Minute Paper: Recruitment, Retention, and Professionalization: Crucial Elements in Organizational Culture for Effective Child Welfare Services</td>
<td>Croney; Klyachkin</td>
<td>Bayshore 7</td>
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<tr>
<td>70</td>
<td>BHE</td>
<td>90-Minute Symposium: Racial Equity at the Center: Advancing Policies to Support Low-Income Mothers and Young Adults</td>
<td>Chair: West-Bey; Discussant: Huang</td>
<td>Esplanade 1</td>
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<td>Element of Symposium: Policy for Transformed Lives: State and Local Efforts to Embed Racial Equity in Young Adult Mental Health Policy</td>
<td>West-Bey; Sethi; Shorttsleeves</td>
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<td>Element of Symposium: Racial Equity in State and National Policy Work: The Case for an Advisory Board</td>
<td>Weerasinghe; Taylor</td>
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<td>Element of Symposium: Embedding Racial Equity in Maternal Depression State Policy and Systems Change</td>
<td>Schmit; Cosse</td>
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<td>71</td>
<td>FE</td>
<td>30-Minute Paper: Journey: A Proposed Framework for Conceptualizing Family Advocacy Skills</td>
<td>Lambert; Ferreira</td>
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<td>60-Minute Discussion: How to Get the Program Results You Want: Lessons Learned from 10 Years of Supporting Evidence-Based Program Implementation in Maryland’s Child Welfare and Juvenile Justice Systems</td>
<td>Wattrous; Farrell; Kearley</td>
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<td>72</td>
<td>WA</td>
<td>30-Minute Paper: Intentional Cultivation of a Pathway to Effective and Efficient Leadership Practice</td>
<td>Delsart; Goldfarb</td>
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<td>30-Minute Paper: How an Electronic Health Record Demonstrates Data-Driven Support of the Principles of Wraparound: A Multi-Method Analysis of User Perception</td>
<td>Bergerson; Zwirecki; Miller; Rourke</td>
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<td>30-Minute Paper: Implementing Scorecards to Track Process and Fidelity Benchmarks for High Fidelity Wraparound in Pennsylvania</td>
<td>Payne; Pulleo; Fridley; Baker</td>
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<td>73</td>
<td>Y&amp;YA</td>
<td>30-Minute Paper: Young Women, Mental Health, and Entrepreneurship</td>
<td>Brewster</td>
<td>Palma Ceia 1</td>
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<td>60-Minute Paper: Understanding Career Pathways for the Young Adult Workforce</td>
<td>Masselli; Proulx; Topaloff</td>
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<td>74</td>
<td>Y&amp;YA</td>
<td>30-Minute Paper: The Evaluation of an Evidence-Based Parenting Practice Implemented by Child Welfare Workers</td>
<td>Greeno; Cosgrove; Lee</td>
<td>Palma Ceia 2</td>
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<td>60-Minute Discussion: Implementing Screening, Brief Intervention, and Referral to Treatment (SBIRT) in School-Based Health Centers (SBHC) in Colorado</td>
<td>Lockhart</td>
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<td>75</td>
<td>EPB</td>
<td>30-Minute Paper: The Impact of Practice Leads for Maintaining Evidence-Informed Practices in a Social Service Agency Using the RE-AIM Framework</td>
<td>Trunzo; Bower</td>
<td>Palma Ceia 3</td>
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<td>30-Minute Paper: Understanding How Research Is Understood: An Early Intervention and Prevention Programme Case Study</td>
<td>O’Connor</td>
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<td>30-Minute Paper: State Decision-Making Regarding Medicaid Waiver Adoption for Youth with Complex Behavioral Healthcare Needs</td>
<td>Graaf</td>
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<td>76</td>
<td>Y&amp;YA</td>
<td>30-Minute Paper: Promoting Positive Outcomes for Justice-Involved Youth: Implications for Policy, Systems, and Practice</td>
<td>Pecoraro; Keator; Bellonci</td>
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<td>30-Minute Paper: Fostering Independence or Dependence? Aging Out of Foster Care with a Serious Mental Health Condition</td>
<td>Johnson</td>
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<td>30-Minute Paper: The Bridge for Resilient Youth in Transition (BRYT) Model: How Schools Succeed with Students with Intensive Tier 3 Mental Health Needs</td>
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<td>77</td>
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<td><strong>90-Minute Symposium: Making Connections to Support Mental Wellbeing Among Young Men and Boys</strong></td>
<td>Chair: Fields-Johnson</td>
<td>Garrison</td>
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<td><strong>Element of Symposium: Making Connections and Building the Conditions for Engaging and Developing Young Leaders for Wellbeing</strong></td>
<td>Neely; Fields-Johnson</td>
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<td><strong>Element of Symposium: Assessing Mental Health and Wellbeing with Youth: Considerations for Instrument Modifications and Early Findings</strong></td>
<td>McNeish; Massey</td>
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<td><strong>Element of Symposium: Young Leader Development: Experiences on the Ground</strong></td>
<td>Gonzalez</td>
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11:30 AM Conference Adjourns

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**The New York Foundling's Implementation Support Center translates effective policy into effective results through expert training in Evidence-Based Models.**

Since 2012, The Foundling's ISC has been partnering with organizations across the world to deliver highly-effective, research-backed methods of support that achieve far greater results for consumers and higher cost savings.

*Learn more about our team of experts and how we can work with your organization by visiting [www.nyfoundling.org/ISC](http://www.nyfoundling.org/ISC) or by emailing info@nyfoundling.org.*
Sunday Preconference Special Sessions  Open to all conference participants

1:00 pm – 4:00 pm ~ Bayshore 5

**Developing a Strategic Communications Plan to Advance Policy, Research, and Practice**

*Jeana Bracey, PhD; Julie Tacinelli; Jeffrey Vanderploeg, PhD, Child Health and Development Institute of Connecticut, Farmington, CT*

In this three-hour interactive workshop, the Child Health and Development Institute of Connecticut (CHDI) will help organizations develop and apply effective communication strategies to advance their overall mission and goals of improving children’s behavioral health. Workshop participants will learn how to develop elements of a strategic communications plan, including goal setting, identification of core audiences, implementation of effective strategies, development of clear messaging, and evaluation of key metrics and indicators of success. CHDI will share examples of how we have developed and utilized products such as videos, public events, reports and publications, media outreach, and social media across local and national audiences to inform policy and practice change.

Designed for representatives of academic departments, research centers, service providers, community organizations, and advocacy groups, participants will meet the following learning objectives:

- Review their organization’s mission, vision, and values
- Identify key audiences for reaching target goals
- Develop SMART goals and communications objectives
- Apply strategic communications framework to strengthen messaging and impact.

1:00 pm – 4:00 pm ~ Bayshore 6

**Rapid Results: Data Visualization for Continuous Quality Improvement**

*Michael J. Tanana, PhD, University of Utah, Salt Lake City, UT; John Fluke, PhD, University of Colorado School of Medicine, Aurora, CO*

This workshop provides participants with a background in the principles, development, metric visualization, and use of intelligent feedback for providers and service managers.

The majority of U.S. states maintain administrative databases to collect information on the entry, movement, and exits of youth in the foster care system, however states and jurisdictions struggle with methods to provide this information in the form of actionable feedback to caseworkers and practitioners. As a result, human service professionals are forced to make judgments based on anecdotal or incomplete information. In the past decade, numerous open source tools and computational methods have become available to make analyzing and visualizing quantitative data easy and inexpensive. To help promote the use of administrative data to inform child welfare programming, this workshop will provide an overview and demonstration of a Feedback Improvement System (FIS) which uses web-based feedback and advanced data visualization techniques to give child welfare practitioners ongoing information about the outcomes of youth in their care. The workshop will provide an overview of the theoretical rationale for the system, as well as showing participants the specific components required to implement a similar system for their organizational context.

1:00 pm - 4:00 pm ~ Bayshore 7

**Immigrants, Refugees, Trauma and Adverse Childhood Experiences – What Do We Need to Do to Help Them?**

*Pierluigi Mancini, PhD, National Hispanic and Latino Addiction Technology Transfer Center (ATTC) and Prevention Technology Transfer Center (PTTC), Atlanta, GA*

Over the past few months, there has been much discussion about immigrants, refugees and those persons seeking asylum in the United States. But very little has been shared about the behavioral health needs of these people who are arriving during the most polarized political period in recent history. Most of those seeking asylum are escaping horrors of war, gangs, death, poverty and persecution and are in need of behavioral health treatment and supports. Immigrant families are in a vulnerable state and struggle with specific cultural and linguistic challenges when trying to access services, often resulting in them suffering in silence.

As the population of the United States becomes increasingly diverse, policymakers must make a critical examination of the availability and quality of services received by ethnic minority groups in behavioral health. Infrastructure within behavioral health that is equipped to address the issues of language and culture for immigrant families is lacking. At the local, state and federal level we need to address the individual, provider, and system-level barriers that keep individuals from being served. These include addressing the availability and equitable distribution of resources, the development of the proper workforce and the organization of the health system in general.

This workshop will focus on strategies that are being implemented by the National Hispanic and Latino Addiction Technology Transfer Center and the National Hispanic and Latino Prevention Technology Transfer Center to provide training to the behavioral health workforce to prepare them to work with Hispanic and Latino immigrant and refugee families.
Poster Presentations & Opening Networking Reception
5:00 pm - 6:30 pm ~ Bayshore Ballroom

101. A Community-Based Approach to Provider Partnerships: Identifying Needs and Cultivating Relationships to Produce Outcomes for Families
TaWanda Dent, BA; Jennifer Tackitt-Dorfmeyer, LCSW, CYC-P; Antwan Butler, LCSW, BACS; Elizabeth Oyer, PhD, Choices Coordinated Care Solutions, Indianapolis, IN

Choices Coordinated Care Solutions is a national nonprofit organization based in Indiana and Louisiana. Developing provider networks and cultivating productive relationships with providers on our teams is essential. As “connectors,” we are perfectly positioned to both identify service gaps for our families and leverage our knowledge of available services to improve overall access. Our approach encompasses several strategies for building communities, identifying needs, and cultivating stronger relations with providers.

102. Y&YA Supporting Youth Transitioning Out of Foster Care: A Medicaid Managed Care Organization Approach
Tonia Richardson, PhD, Amerigroup Georgia, Atlanta, GA; Sharika Zellars, MA, Georgia Parent Support Network, Atlanta, GA

Amerigroup Georgia (a Medicaid Managed Care organization) provides transitional care coordination (TCC) services to youth aging out of foster care. The TCC program educates youth on healthcare benefits beyond age 18, assesses social determinants of health needs, and helps transition youth to adult healthcare services. TCC activities include one-on-one interaction with the youth to fill gaps in care and provide resources, and team meetings with various support systems to facilitate a smooth transition to adulthood.

103. Substance Use and Sexual Risk Taking in Emerging Adults with a History of Polyvictimization
Daniel Provenzano, MA; Michael Boroughs, PhD, University of Windsor, Windsor, ON, Canada

This study investigated polyvictimization (i.e., bullying and childhood maltreatment) and health risk behaviors (e.g., substance use and sexual risk-taking) in a sample of emerging adults (N = 515). Logistic regressions suggested that youth with a history of polyvictimization were at greater risk for engaging in substance use (OR = 2.61) and sexual risk-taking (OR = 3.74) compared to youth with only a history of bullying victimization (OR = 2.26 and OR = 3.35, respectively).

104. Trauma Exposure and Relationship with Child and Family Team Meeting (CFT) Characteristics and Outcomes in a Statewide System of Care
Alayna Schreier, PhD; Joy Kaufman, PhD, Yale School of Medicine, New Haven, CT

This study assessed the association between trauma exposure and participation in Child and Family Team Meetings (CFTs) in a sample of youth enrolled in a statewide System of Care (n = 464). Moderation analyses were conducted to understand the influence of trauma on the relationship between CFT participation and outcomes among youth in a statewide SOC (n = 464). Significant relationships and conditional effects and subsequent implications for CFT implementation will be shared.

105. Risk Profiles Among Youth Enrolled in a Statewide System of Care
Alayna Schreier, PhD; Joy Kaufman, PhD, Yale School of Medicine, New Haven, CT

Exposure to risk factors has a significant influence on youth behaviors and functioning and may serve as both facilitators of and barriers to service participation. This study used latent class analysis to identify classes of youth with emotional and behavioral difficulties who are enrolled in a state system of care (SOC) based on the presence of individual, family, and contextual risk factors. Implications for targeted and individualized service provision within SOCs will be shared.

106. The Role of Client Demographics in Connecticut’s Care Coordination Services: Identifying Disparities to Improve Practice
Aleece Kelly, MPP; Kellie Randall, PhD; Jeana Bracey, PhD, Child Health and Development Institute of Connecticut, Farmington, CT

Care Coordination is a key component of Connecticut’s Wraparound model and helps to support a comprehensive behavioral health system for children and their families. A statewide Performance Improvement Center (PIC) collects and analyzes data to inform ongoing program planning and implementation. In examining program data, findings point to the presence of disparities among demographic groups regarding components of Care Coordination services. This poster presentation explores disparities through multiple regression analyses and discusses practice improvements.
107. Childhood Witnessing from Adult Daughters of Abused Women: The Role of Drinking on Father’s Intimate Partner Violence

Kenan Sualp, MSW, University of Central Florida, Orlando, FL

This qualitative study employs grounded theory. Data was collected from interviews conducted with 42 adult female participants, each of whom witnessed their father abuse their mother when they were children. The aim of the study is to examine the relationship between alcohol abuse and the perpetration of intimate partner violence (IPV) from the daughter’s perspective. Participants shared their experiences witnessing IPV during childhood after they transitioned into adulthood.


Jangmin Kim, PhD; Mi Jin Choi, PhD, Texas State University, San Marcos, TX; Barbara Pierce, PhD, Indiana University, Indianapolis, IN

This study examined the effect of parent engagement on child emotional well-being within the Family Team Conference (FTC) and identified the moderation effect of domestic violence on the relationship. Findings indicated that increased active parent engagement was related to increased emotional well-being of children, but only for those who were not exposed to domestic violence. This poster session will show why Family Team Conferences should be well-prepared to ensure the safety of family members and strengthen unity for families experiencing domestic violence.

109. Engaging Families in School-Based Student Mental Health Support: The BRYT (Bridge for Resilient Youth in Transition) Story

Megan Harding, MSW, BRYT, Brookline Center for Mental Health, Brookline, MA

The BRYT model serves as an example of how schools and families in Massachusetts are collaborating on student re-entry after prolonged absences due to mental illness. This poster session will describe the BRYT Family Engagement model and share key learnings from the BRYT Year One of focused family engagement work. This poster will also introduce participants to the Wellesley Bridge Parent Leadership Team, a parent peer model designed to provide support for parents of students who are transitioning back to school.

110. WA Differential Impact of Wraparound Facilitation Best Practices on Youth Outcomes: A Latent Class Analysis

Kris Matthews, MSW, University of Kansas, Lawrence, KS; Kaela Byers, PhD, University of Chicago, Chicago, IL

The Wraparound Fidelity Index-EZ measures adherence to the principles and phases that define the wraparound best practice model. In this study, Latent Class Analysis (LCA) was used to examine WFI-EZ data to determine if wraparound facilitators consisted of distinct subpopulations characterized by their use of certain best practice indicators and if class membership predicted youth outcomes. Four classes of providers were identified and class membership differentially predicted youth outcomes.

111. Attachment and Biobehavioral Catch-Up: Investigating the Experiences and Views of Cultural Relevance from Bilingual Home Visitors

Olivia Borland, BSW; Amy Mendenhall, PhD; Whitney Grube, LMSW, University of Kansas, Lawrence, KS

Attachment and Biobehavioral Catch-up (ABC) is an early childhood intervention that promotes strong relationships between parents and children. Previous literature has discussed the need to ensure that practices are culturally relevant to achieve successful outcomes. This study interviewed bilingual ABC home visitors who shared their experiences and thoughts on the cultural relevance of delivering ABC in Spanish. Findings support ABC as an effective and culturally relevant intervention. Home visitors also discussed the delivery barriers they faced and made recommendations for change.

112. Future Direction for Child Mental Health: Developing a Blueprint using the System of Care Framework

Isaac Karikari, PhD, University of North Dakota, Grand Forks, ND; Betty Walton, PhD; Christine Bishop, MSW, Indiana University School of Social Work (IUSSW), Indianapolis, IN

Mental illness is multi-layered and requires a team effort in order to be properly addressed. There tends to be uncertainty toward maintaining and improving the gains made by professionals in the child mental and behavioral health field. Based on the lessons learned from a multi-year SOC expansion grant funded by SAMHSA, project members will discuss recommendations for improving child mental health and providing support to families.
113. Successful Implementation of Evidence-Based Practices and Preparation for the Family First Act
Marta Anderson, LCSW; Reina Batrony, LMHC; Sylvia Rowlands, PhD, The New York Foundling, New York, NY
In this poster session, The New York Foundling will share lessons learned from its 15 years spent implementing evidence-based programs and making the shift from outputs to outcomes. Members from The Foundling will explain how the Families First legislation will change the landscape for children and families in the child welfare system, share their experiences with system reform, and explore the models that are well suited to the letter and spirit of the new legislation.

114. Building Workforce Capacity Through a Community-Based System of Care Model: The Challenges of Balancing Fidelity and Adaptability
Ursula Davis, MA, LPC; Carrie Oliver, MPH, CHES; Chidinma Ogojiaku, BA, Georgia State University, Atlanta, GA
Implementation of evidence-based programs often requires adaptation. After training adult providers in Recovery-Oriented Cognitive Therapy (CT-R), the Georgia CT-R Initiative expanded the state’s capacity to include youth providers. Adaptation of the CT-R training was necessary for use by these providers. Implementation challenges, including programmatic and financial sustainability, were addressed by engaging partners and balancing fidelity with adaptability. Lessons learned from the trainings’ adaptation provide implementation strategies for evidence-based models within a system of care model.

115. FE Meaningful Youth and Family Engagement in Residential Treatment Settings
Millie Sweeney, MS, Family-Run Executive Director Leadership Association (FREDLA), Ellicott City, MD; Dayana Simons, MEd, University of Maryland School of Social Work, Baltimore, MD; Lydia Proulx, Youth MOVE National, Decorah, IA
Developed as part of the TA Network’s Quality Collaborative on Improving the Use of Psychotropic Medication for Youth in Residential Treatment Facilities (RTFs), Meaningful Youth and Family Engagement in Residential Settings illustrates how youth and family voices can be incorporated into the work of RTFs, and features a continuum of roles for youth and family that strengthen the work of RTFs. Characteristics of authentic youth and family engagement in residential and other settings will be underscored.

116. Cultural Competency in Systems of Care: Assessing Attitudes of Race and Poverty Among Future Health Professionals
Amber Letcher, PhD; Kristine Ramsay-Seanner, PhD, NCC; Mary Isaacson, PhD, RN, CHPN, South Dakota State University, Brookings, SD
Two studies explored attitudes toward poverty and race among undergraduate students in health and human service programs. Results of Study 1 indicated more bias among students in the early stages of a nursing program compared to students in other majors. Study 2 explored differences between first- and fifth-semester nursing students, specifically. Fifth-semester students endorsed more color-blind attitudes toward race than first-semester students. Integrating multicultural curriculum throughout nursing programs may produce more competent health care professionals.

117. Implementation of a Group Intervention Program in a Residential School Setting: Facilitator Perceptions of Process and Outcomes
Jaime Castillo, PhD, Hillside Family of Agencies, Romulus, NY
The purpose of this study is to begin to close the empirical gap regarding treatment modalities for youth in residential placement. A program that integrates psychoeducational groups into the school day at a residential treatment center was evaluated with the primary goal to gain insight into the perspectives of the school personnel and program clinicians related to the implementation of the program.

118. FE Measuring Parent Engagement in a Group-Based Parent-Focused Prevention Program (Legacy for Children) to Improve Child Development Outcomes
Akilah Lee, PhD; Lara Robinson, PhD, Centers for Disease Control and Prevention, Atlanta, GA
Supporting positive parenting behaviors through prevention programs can promote child development. Engaging parents beyond regular attendance is critical to program implementation; however, program engagement may be particularly challenging when recruiting from high-risk populations. This presentation will report on findings from a study on parent engagement in the Legacy for Children’sTM parenting intervention for low-income families. We will discuss the components of parent engagement that are most predictive of child socioemotional/behavioral outcomes and their value to prevention programs.
119. **Collaboration in a Public-Private Partnership for Trauma-Informed Child Welfare Services**  
Ashley Palmer, MSW; Becci Akin, PhD; Stacy Dunkerley, MSW; Jody Brook, PhD, *University of Kansas, Lawrence, KS*

Prior research on public-private collaborations to implement and sustain evidence-based interventions (EBIs) in child welfare systems has found that effective collaboration contributed to the successful implementation and sustainability of EBIs. The objective of this mixed-method study was to assess the evolution of collaboration among public-private child welfare entities and university researchers integrating trauma-informed services into a child welfare system over a five year period. Implications for evaluating, implementing and sustaining collaborative efforts in child welfare will be discussed.

120. **Intergenerational Transmission of Trauma: Creating Local Partnerships to Improve Access to Trauma-and-Resiliency Informed Care for Families**  
Jasmine Cain, MSPH, Benchmark, Raleigh, NC; Katie Munger, MBA, Ollie Harris Behavioral Health Center, Shelby, NC

Benchmark’s Partnering for Excellence (PFE) redesigns local child welfare/behavioral health systems in North Carolina, changing their understanding of the need for accessible, appropriate mental health services for youth and families who have experienced potentially traumatic events. To bridge a gap regarding the lack of trauma-informed services for adults, PFE has partnered with the Ollie Harris Center, a local mental health hub, and collaborative of youth and adult providers working with Medicaid and the Health Department.

121. **Using a Magic Wand to Meet the Workforce Need: Creative Ways to Recruit and Graduate Highly Trained Social Workers to Meet the Needs of Youth and Families in Rural and Underserved Areas**  
Susan Reay, MSW; Amanda Randall, PhD, MSW, *University of Nebraska at Omaha, Omaha, NE*

The University of Nebraska at Omaha, Grace Abbott School of Social Work (GASSW) is addressing statewide critical behavioral health workforce shortages through a multi-systemic approach. With creativity, research, relationships, and partnerships, GASSW is filling the gap in workforce shortages through the use of current resources. Pre- and post-test data are collected regarding student knowledge of treatments for youth. Graduation rates and percent of students remaining in state post-graduation will be provided.

122. **CW Engagement Strategies Among Agency Workers in Voluntary Prevention Programs in Child Welfare Services**  
Flandra Ismajli, BSW; Lodi Rohrer, MSPH, *University of South Florida, Tampa, FL*

This paper addresses engagement among families that are voluntarily involved in prevention programs in the child welfare system. Using data collected from semi-structured focus group sessions across six agencies in North Florida, researchers identified four barriers to engagement: negative history with the child welfare system; lack of community resources; lack of commitment; and behavioral issues of caregivers. This poster identifies how practitioners addressed internal and external barriers while adhering to Family Support Services guidelines.

123. **Building Stronger Teams: Data-Informed Practice Using Visualizations to Improve Engagement of Natural Supports**  
David Sikes, MS; Antwan Butler, LCSW, BACS; Elizabeth Oyer, PhD, *Choices Coordinated Care Solutions, Inc., Shreveport, IN*

Choices’ practice quality improvement (PQI) process is team-driven, individualized, and outcomes-based, using interactive dashboards to support decision-making. For 2018, we focused on improving the integration of natural supports on Child and Family Teams (CFTs). Natural supports are important resources that help families stabilize while developing stronger community connections. Over eight months, our teams convened monthly CFT meetings and included natural supports on the plans of care while steadily improving meeting attendance.

124. **Interrupting Determinants of Abuse, Substance Misuse, and Delinquency: An Evaluation of an Innovative Early Prevention Mentoring Approach**  
Brittany Coote, MPH, *Louisiana State University, New Orleans, LA*

Camp Mariposa (CM) provides a hybrid approach to mentoring for 9 to 12-year-olds. CM is gathering evidence that aligns it with advances in programming for youth navigating child welfare and behavioral health systems. For youth participating in this study (N=351), both substance use and delinquency risks are significantly impacted. This poster presentation will detail those findings and engage participants in a discussion on how this type of mentoring fits in areas of prevention.
125. Addressing Gaps in Behavioral Health Workforce Training Needs for Children, Youth, and Families

Rae Beaudry, MSW, The Institute for Innovation and Implementation, Baltimore, MD; David Hussey, PhD, Begun Center for Violence Prevention Research and Education at CWRU, Cleveland, OH; Elena Mazza, PhD, MSW, LCSW, Monmouth University School of Social Work, West Long Branch, NJ; Margo Candelaria, PhD; Michelle Zabel, MSS, The Institute for Innovation and Implementation, Baltimore, MD

The TA Network launched the Behavioral Health Care Development Initiative (BHCDI) to improve knowledge, expertise, and overall preparedness of MSW degree program graduates to provide effective behavioral health services to youth. Benefits of this initiative include a greater focus on clinical competencies that address gaps in the child behavioral health workforce; a compendium of flexible courses/modular offerings matched to meet student learning needs; and opportunities to develop advanced competency knowledge and practice behavior resources.

126. Increasing Social Support for New Parents: A Preliminary Look at One Program’s Effectiveness

Christy J. Brinkley, EDS; Olivia K. Smith, EDS; Sheila R. Stowers, MS; David A. Saarnio, PhD, Arkansas State University, State University, AR

Child outcomes are often affected by parental factors such as perceived social support, but how can we assist parents in improving such factors? This poster presents preliminary findings from a small study designed to assess whether participation in an Incredible Years Babies class affected perceived social support. Although the results are preliminary, it appears that the parenting curriculum can serve as an effective way for new parents to gain the social support they need.

127. Y&Y Lessons Learned: Youth Living out Loud – A Program for Youth Who Have Experienced Sexual Exploitation

Jenna Kreuzer, MSW; Tiffany Wilhelm, MSW, Wraparound Milwaukee, Milwaukee, WI

This poster presentation will focus on successes and challenges in providing specialized services to youth in Milwaukee, WI. This poster will address program structure and foundation, which includes system response to the commercial sexual exploitation of children, mentor training, service provision, and community partnership. Participants will learn best practices for working with youth who have experienced sexual exploitation. In addition, this will serve as an opportunity to reflect on program/service capacities, and explore how to partner with local efforts.

128. A Wraparound Approach for Children/Youth with Serious Emotional Disturbance: Understanding the Needs of Participants with an Intellectual and/or Developmental Disability and Their Families

Lauren Williams, MPH candidate, University of Nevada, Reno, Reno, NV; Alejandro Ruiz, MPH candidate, Nevada Department of Health and Human Services, Las Vegas, NV; Karen Taycher, NV PEP, Reno, NV; Kevin McGrath, Nevada Department of Health and Human Services, Las Vegas, NV; Kristen Clements-Nolle, PhD, MPH, University of Nevada, Reno, Reno, NV

Our objective was to assess the needs of children and youth with an intellectual and/or developmental disability (ID/DD) and their families. During January 2017-September 2018, 395 children and youth with SED were enrolled in wraparound; 18% had an ID/DD. Those with an ID/DD had more complex needs (i.e., returning from out-of-state residential treatment) and there was a negative impact on their caregivers in many life domains. Use of evaluation findings to improve service array and delivery will be discussed.

129. CW Developing Leaders for Social Impact: Towards a Leadership Competency Model in Education & Human Services

Lacy Dicharry, MS, MBA; Leslie Blanchard, PhD, Louisiana State University, Baton Rouge, LA

Leadership competency models in corporate settings have been found to contribute significantly to the internal environment and external success of corporations. It would follow that effective leadership competency models would have similar success in other sectors. Despite positive findings, there is a significant gap in leadership competency models in Education & Social Services. Participants will be able to conduct individual assessments and implications for these fields will be discussed.

130. The Strengths Model for Youth: Implications for Child, Adolescent, and Young Adult Programming and Practice

Amy Mendenhall, PhD, The University of Kansas, Lawrence, KS; Elizabeth Schoenfeld, PhD; Brooke White, LCSW, LCDC, LCCA, LifeWorks, Austin, TX; Whitney Grube, LMSW, The University of Kansas, Lawrence, KS

In the United States, an estimated 20% of youth experience mental health issues each year. Given the fiscal burden and long-term negative outcomes associated with childhood mental disorders, it is critical to implement effective mental health programming for children, adolescents, and young adults. This poster describes research examining the implementation of the Strengths Model with youth populations in community-based settings, including a mental health agency and a social service organization that provides wraparound services to youth. The findings suggest that the Strengths Model is a promising approach for providing structured case management services to vulnerable youth.
Furthermore, the model can be successful in improving child well-being and professional quality of life, and it has the potential to be successfully implemented across child, adolescent, and young adult serving agencies and systems.

131. Using an Evidence-Informed Assessment Process to Support the Use of Evidence-Based Practices and Promote Positive Outcomes for Youth in Behavioral Health Settings

Laura Maggiulli, PhD; Sarah Donovan, PsyD; Taylor Vitron, PsyD, Samantha VanHout, BA; Jaime Castillo, PhD, Hillside Family of Agencies, Rochester, NY

There has been increased focus among behavioral healthcare providers to deliver evidence-based practice (EBP) to provide the highest quality services to their clients. Using assessment to inform the use of EBPs can support positive outcomes by delivering the services that are most appropriate based on client need and strength. Without standardized processes or a framework for synthesizing data and evidence in a meaningful way, it can be difficult to effectively use this data to inform treatment planning and service delivery. This poster presentation will discuss the development and implementation of a standardized Evidence-Informed Assessment Process (EIAP) to increase the use of EBPs across a large non-profit behavioral healthcare system. The data from each stage of implementation and the results from a case study that demonstrate the use of the EIAP with youth from a residential program will be discussed.

132. A Need for Rethinking Drug Use: Addressing OTCs

Sharon J Davis, PhD; David Saarnio, PhD, Arkansas State University, State University, AR

The opioid epidemic has made nightly headlines, and perhaps because of that, youth misuse of opioids is decreasing. However, over-the-counter (OTC) drugs present dangers and are given very little attention. For example, in 2017, 3% of high school students used OTC cough and cold medications to get high. The harmful effects of these medications include brain damage, seizure, irregular heartbeat, and even death. Substance use risks must receive greater attention from youth services and in family discussions.

133. The Role of Neighborhood-Level Factors on Child Behavior and Mood Problems: Controlling for Individual and Family Characteristics

Kenan Sualp, MSW; Ahmad Khanijahani, MSW, University of Central Florida, Orlando, FL

Using nationally representative data from the National Survey of Children’s Health (NSCH) (2017), this study examined the influence of neighborhood-level factors on child behavior and mood problems. Several individual and family characteristics were statistically controlled to ensure the proper estimation of the isolated influence of neighborhood support, resources, and disorders. Higher scores in neighborhood support were associated with less behavioral or mood problems in children. The findings can guide policymakers in designing community interventions on children’s mental health.

134. Y&Y Measuring Meaningful Youth Voice at the Agency Level

Brie Masselli, Youth MOVE National, Portland, ME

There is a range of benefits when youth-serving agencies include service recipient “voice” in decision-making regarding agency policies and programming. However, many agency stakeholders lack awareness of strategic best practices to ensure the consistent and meaningful participation of young people. This poster will explore strategies and how the youth voice at agency-level assessment will assist organizations in developing individualized strategies by beginning with assessment and moving into best practice approaches.

135. The Internet of Everything and Artificial Intelligence Tools for Youth and Their Families with Behavioral Health Needs

Dorothy Webman, DSW, Webman Associates, LLC, New York, NY

Love to LOL and dive deep at the same time? Please join our conversation on the state of the literature, best practices and policies on the Internet of Everything in Behavioral Health and Artificial Intelligence resources for children, youth and families. A comparative analysis of available tools for evaluating apps, AI tools, and online resources will be presented. Recommendations for improving evaluation tools and policies with a youth-focused lens will be explored.
Children’s Mental Health Network

BRINGING TOGETHER VOICES OF CHILDREN’S MENTAL HEALTH

The Children’s Mental Health Network provides weekly news and unbiased analysis of key issues focused on children, youth and families’ mental health and well-being. We provide an essential source for eliciting broader, more diverse, democratic participation in the creation of better policies and systems for children with mental health needs and their families.

Visit our website to find out more information about our work.

CMHN NETWORK.ORG
Monday, March 5 Events
Opening Keynote Address
8:15 am – 8:30 am – Bayshore Ballroom

Welcome and Overview

Mario Hernandez, PhD, Child & Family Studies, College of Behavioral & Community Sciences, University of South Florida, Tampa, FL; Scott Bryant-Comstock, MS, Children’s Mental Health Network, Chapel Hill, NC

8:30 am – 9:45 am – Bayshore Ballroom
Survive, Study, Grieve: A Conversation with School Shooting Survivors and Helpers

Martin Rafferty, Founder & CEO, Youth ERA, Eugene, OR; Lisa Hamp, National Speaker and Safety Advocate, Sterling, VA; Sarah Lowe, PhD, Montclair State University, Montclair, NJ

Join us as we host a discussion with a first responder, a student involved in a school shooting, and a researcher who have come together for one goal: finding a way forward for helping communities heal from the horrors of school violence. For victims of this senseless violence, what happens when the news channels move on? From the peer support perspective, what does healing look like? How can research pave a better way forward for the healing to come?

About the Presenters

Martin Rafferty is the Founder and Chief Executive Officer of Youth ERA, a national nonprofit that is revolutionizing current thinking about how we view youth engagement. In 2017, the Bill and Melinda Gates Foundation Discovery Center highlighted Martin Rafferty as one of eight global changemakers. He has been awarded the “2010 Oregon Mental Health Award of Excellence,” “Advocate of the Year” by the Oregon Council of Child and Adolescent Psychiatry in 2013, and been named one of the “20 Under 40 Rising Business Stars” in 2018.

Perhaps his most remarkable achievement is the creation Youth ERA which came out of the chaos of Rafferty’s childhood. At the age of 12, Rafferty came home to find a note on the door from his mother that read “this isn’t your home anymore.” Finding himself homeless with nowhere to go, he sheltered in a wooded area next to a freeway near his former home. This wasn’t Martin’s first brush with trauma – the place Rafferty had once called home was one marked by domestic violence, abuse, and neglect. Homelessness exasperated the difficulties he was already facing. By 22, his life had dramatically changed, not only had he been adopted across the country but he launched Youth M.O.V.E. Oregon (the predecessor of Youth ERA) based off of his own experience accessing services as a homeless/ foster youth.

Rafferty and his team at Youth ERA have taken their experience nationwide to provide technical assistance and training. Youth ERA has trained over 26,000 people in 24 states in the areas of peer support, positive youth development, prevention and postvention for crises including youth suicide and school shootings. Their experiences include providing postvention peer support in the shootings at Umpqua Community College in Roseburg, Oregon and Marjory Stoneman Douglas High School in Parkland, Florida.

Lisa Hamp, national speaker and safety advocate, is a survivor of the Virginia Tech shooting that took place on April 16, 2007. With her classmates, she built a barricade to prevent the shooter from entering their classroom. She struggled after the shooting and developed an eating disorder to cope. Eight years later, she sought counseling and began her recovery. Today, Lisa speaks and writes about her experience during and after the Virginia Tech shooting to help others. She shares a raw and powerful personal story, as well as lessons learned from Virginia Tech Tragedy, to first responders, psychologists, community leaders, and many others. Her work has been featured in the Washington Post, Huffington Post, Campus Safety Magazine, and the Domestic Preparedness Journal. Lisa has a Bachelor’s degree in Mathematics from Virginia Tech, a Master’s degree in Operations Research from George Mason University, and a Master’s degree in Economics from John Hopkins University.

Sarah Lowe is an Assistant Professor in the Department of Psychology at Montclair State University, where she also serves as Director of the Trauma and Resilience Laboratory and the Masters Program in Clinical Psychology, Child and Adolescent Concentration. Dr. Lowe’s research interests center broadly on the long-term mental health consequences of traumatic events, the pathways leading from trauma exposure to psychiatric outcomes, and the role of factors at varying ecological levels, from genes to neighborhoods, in shaping outcomes. She has been involved in large-scale investigations of the psychological consequences of natural and technological disasters; epidemiological research on community violence and other traumatic events in urban contexts; and studies of discrimination and emotional wellbeing. In 2017, Dr. Lowe, along with her colleague, Sandro Galea, MD, DrPH, published a review of the research literature on the mental health consequence of mass shootings in the journal Trauma, Violence, and Abuse. She has published over 50 peer-reviewed articles, with other outlets including JAMA Psychiatry, Journal of Abnormal Psychology, Journal of Traumatic Stress, and Social Science and Medicine.
Monday Afternoon Keynote Address

2:00 pm - 3:15 pm
Bayshore Ballroom

Supporting Children, Adolescents, Young Adults and Families Thrive: A Conversation with the First Lady of New York City

Chirlane McCray, First Lady of New York City, New York, NY; David L. Shern, Co-Moderator, National Association of State Mental Health Program Directors, Tampa, FL; Lacy Dicharry, Co-Moderator, Elevate Young Professionals, Baton Rouge, LA

Our nation is in the midst of a full-blown mental health crisis, and young people are among those suffering the worst of its effects. Communities must come together to end this crisis. Through early and comprehensive action, we can address the burden of mental illness and the risks to mental wellness at every stage of life. We have the science; we have the evidence-based studies, so what are we waiting for? First Lady Chirlane McCray will share how ThriveNYC is helping ensure that children and adolescents grow into healthy and whole adults. From the home to the classroom to after-school activities, there are opportunities to build resilience, prevent mental illness, and practice early intervention. Thrive is helping New York City to seize those opportunities and calling on every adult who works with young people to do their part in the national movement for mental health.

About the Presenters

Chirlane McCray. Nationally recognized as a powerful champion for mental health reform and dubbed one of TIME Magazine’s 50 Most Influential People in Health Care for 2018, Ms. McCray created ThriveNYC, the most comprehensive mental health plan of any city or state in the nation. She also spearheads the Cities Thrive Coalition, with more than 200 mayors, county officials and thought leaders from all 50 states, advocating for a more integrated and better-funded behavioral health system.

A lifelong activist and writer, First Lady McCray continues to fight for gender equity and LGBTQ+ rights, support survivors of gender-based violence and create a more inclusive NYC. She brings her deeply-held commitment to the mental health and well-being of people and communities to everything she does.

David L. Shern. From 2006 to 2012 Dr. David L. Shern served as the President and CEO of Mental Health America (MHA), formerly the National Mental Health Association and on an interim basis in 2014 following the departure of his successor. MHA is the country’s oldest advocacy organization addressing all aspects of mental health and mental illness. After leaving MHA Shern joined the staff of the National Association of State Mental Health Program Directors as a Senior Public Health Advisor. He also has an appointment in the Department of Mental Health at the Johns Hopkins.

Prior to joining MHA, Dr. Shern served as dean of the Louis de la Parte Florida Mental Health Institute (FMHI) at the University of South Florida, one of the largest research and training institutes in behavioral health services in the United States.

His work has spanned a variety of mental health services research topics including serving street-dwelling individuals with SMI; epidemiological studies of the need for community services; the effects of differing organizational, financing and service delivery strategies on continuity of care and client outcome and the use of alternative service delivery strategies such as peer counseling and self help on the outcomes of care.

Lacy Dicharry, MS, MBA currently serves as a CEO, Coach and Consultant for LacyDee Consulting, and as Co-Founder of Elevate Young Professionals. Lacy is a founding board member of Young People in Recovery and currently serves as a board member of Mental Health America and the International Foster Care Organization. Previously, Lacy was a partner with Change Matrix, LLC a change management consulting firm.

Lacy also served as the Executive Director of Youth MOVE (Motivating Others through Voices of Experience) National, a youth-led, non-profit organization that advocates for and supports youth voice.

Lacy is an internationally known expert in youth engagement, and has led several national innovative youth-led programs and helped set standards for youth engagement practice. Over the past 15 years, her work has impacted more than 250,000+ individuals in more than 40+ countries around the world. She was a 2014 VOICE Award winner for her advocacy efforts to promote youth engagement and National Association of Professional Women VIP Woman of the Year in 2016.
Session 1 Y&YA

10:00 am - 11:30 am
Bayshore 5 ~ 90-Minute Symposium

Subjective Experiences of Having and Managing a Serious Mental Health Condition in Young Adulthood

Symposium Chair: Amanda Costa, Transitions to Adulthood Center for Research (ACR), Worcester, MA; Discussant: Vanessa Vorhies Klodnick, PhD, Thresholds Youth & Young Adult Services & the University of Texas at Austin, Austin, TX

Very little research has captured the subjective experiences of managing a serious mental health condition (SMHC) as a young adult. The sociological concept of “illness career” refers to the dynamic process through which one identifies as having a mental health need and their interactions with the mental health treatment system to manage those needs. One’s illness career influences one’s life course significantly. This symposium will use qualitative data from 61 young adults (ages 22-30) with SMHCs to explore when and how they were diagnosed, their experiences with mental health treatment providers and medications, and their hospitalization experiences. A better understanding of a young adult’s mental health treatment experiences, patterns, and perceptions can influence how they pursue school, work, and future mental health treatment. Findings from this symposium can invaluably inform service providers, policy-makers, and family members.

The Realization That “Something Is Wrong:” Initial Contact with Mental Health Treatment

Kathryn Sabella, Transitions to Adulthood Center for Research, Worcester, MA

This paper describes early experiences of serious mental health conditions (SMHC) among 61 young adults including when and how they recognized certain emotions as SMHC and sought treatment. The data revealed two patterns: early childhood diagnoses; and interventions and delayed help-seeking culminating in crises. Early mental health experiences have long-term implications for future mental health treatment and how young people come to perceive their mental illness.

Sporadic and Erratic Patterns of Mental Health Treatment

Kathryn Sabella, PhD, Transitions to Adulthood Center for Research, Worcester, MA

This paper illustrates that young adults’ ongoing interactions with the mental health treatment system are often erratic and sporadic. It is common for young adults to report receiving different diagnoses from different providers and experience several associated medication adjustments. Discontinuity in care erodes young people’s confidence in the field of psychiatry and threatens their likelihood of pursuing mental health treatment down the road.

Session 2 EBP

10:00 am - 11:30 am
Bayshore 6 ~ 30-Minute Paper

Strategies to Facilitate Senior Leader Engagement in the Implementation and Sustainability of Evidence-Based Practice

Robert Franks, PhD, Charlotte Vieira, MPH, Judge Baker Children’s Center, Boston, MA

This presentation will describe implementation methodologies utilized within a Learning Collaborative model to facilitate senior leader engagement in the implementation of MATCH-ADTC in a statewide system of care. Strategies including metric and outcome data reporting, consultation and technical assistance, affinity groups and in-person Learning Sessions, and ongoing quality improvement methods used in combination from diverse data feedback systems that enhance senior leader participation and promote the sustainability of MATCH-ADTC both within and across agencies.

10:30 am - 11:30 am
Bayshore 6 ~ 60-Minute Symposium

Evidence-Based Child Trauma Assessment: Barriers, Sustainable Dissemination, and Treatment Implications

Symposium Chair and Discussant: Jeffrey Vanderploeg, PhD, Child Health and Development Institute of CT, Farmington, CT

Given child trauma’s significant prevalence and consequences, identifying, disseminating, implementing, and sustaining evidence-based child trauma assessment practices are needed to assess post-traumatic sequelae and salient comorbidities, tailor treatment for clients, promote treatment retention, and reliably evaluate the efficacy and effectiveness of those treatments (APA, 2008; Cohen et al., 2017; Saunders et al., 2004). This symposium addresses several gaps in this literature and informs future child behavioral health scholarship and practice. The first paper presents data from 315 community clinicians who participated in six statewide Learning Collaboratives (LCs) to disseminate and implement Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). Pre-LC, post-LC, and follow-up data showed significant, sustained improvements in clinician-reported assessment barriers and practices. The second
Changes in Child Trauma Assessment Practices and Related Barriers During and After a Learning Collaborative (LC): Specificity, Diffusion, and Sustainability

Samuel O. Peer, PhD, Idaho State University, Pocatello, ID; Rochelle F. Hanson, PhD; Benjamin E. Saunders, PhD, Medical University of South Carolina, Charleston, SC; Alyssa M. Korell, Idaho State University, Pocatello, ID

This longitudinal study examined 315 community clinicians from five LCs to disseminate and implement Trauma-Focused Cognitive Behavioral Therapy. Results identified (a) typical use of and barriers to child trauma assessment, (b) pre- to post-LC decreases in assessment barriers, (c) pre- to post-LC increases in evidence-based child trauma assessment practices, (d) agency-level diffusion, and (e) sustained improvements.

Examining Patterns in Child- and Caregiver-Reported Child Trauma Exposure, Symptoms, and TF-CBT Retention: A Latent Class Analysis

Kellie G. Randall, PhD; Ashley Nelson, BA; Robey B. Champine, PhD; Kyle Barrette, MSW, Child Health and Development Institute of CT, Farmington, CT

Latent class analysis was used to group 3,465 children who received TF-CBT according to child- and caregiver-reported trauma exposure and symptoms. Group membership was assessed in relation to treatment retention. A six-class model provided the best fit to the data. Class 5 (high child-reported trauma symptoms; child-caregiver agreement on trauma exposure and depressive symptoms) had the highest likelihood of completing treatment. These findings suggest how treatment approaches may be tailored to promote retention in TF-CBT.

Session 3 CW

Planning for Safe Care or Widening the Net? A Review and Analysis of 50 States’ Child Abuse Prevention and Treatment Act Policies Addressing Substance-Exposed Infants

Margaret Lloyd, PhD, University of Connecticut, Hartford, CT; Stephanie Luczak, LMSW, Connecticut Children’s Medical Center, Hartford, CT; Samantha Lew, MSW, University of Connecticut, Hartford, CT

This presentation will present findings from a content analysis of 50 states’ child welfare policies on prenatal substance exposure (PSE). Results revealed extensive variability across states. Only two states’ policies comply with all five domains of the overarching federal legislation.

10:30 am - 11:30 am
Bayshore 7 ~ 60-Minute Symposium

Working Together for Families Trapped in Crisis: Innovative, Interactive Interventions that Engage, Increase Resilience and Stabilize Families

Symposium Chair: Bobbi Beale, PsyD, Case Western Reserve University, Cleveland, OH; Discussant: Richard Shepler, PhD, Case Western Reserve University, Cleveland, OH

In Ohio, the child welfare and behavioral health systems are joining forces to increase the availability of trauma-informed, innovative, effective programs to our most vulnerable populations. We are working to strengthen cross-system understanding, competencies and practices with required child welfare and behavioral health partnerships, as well as mandatory data collection for ongoing, applied research. This symposium will present the three primary components of the Ohio Adventure Therapy Coalition project: evidence supported experiential treatment for youth with trauma histories, an implementation strategy that includes ongoing consultation and technical assistance, and a culture that embeds data collection and research into the programming. By combining these critical components we have been able to provide effective, sustainable treatment to our most vulnerable population, abused and neglected children and youth, while validating the programming and helping behavioral health agencies launch sustainable services.

Community Application of Experiential Treatments: Innovative Practices to Engage Clients from Multi-Stressed Environments

Maurie Lung, PhD, Life Adventures Counseling & Consulting, St. Petersburg, FL

We will present the adventure therapy model, which uses highly engaging interactive interventions, followed by a variety of program applications that share some common elements, including experiential participation in treatment and concurrent, applied research. One study explored how adventure therapy enhanced learned coping strategies for stress and improved therapeutic alliance for adults. Another NREPP program focused on increasing students’ social engagement and empathy and decreasing stress and anxiety.

The Ohio Adventure Therapy Coalition Journey: Comprehensive Strategies to Provide Effective, Sustainable Treatment While Building a Research Base with Our Most Vulnerable Population

Bobbi Beale, PsyD, Case Western Reserve University, Cleveland, OH; Maurie Lung, PhD, Life Adventures Counseling & Consulting, St. Petersburg, FL

This presentation will detail our process of combining evidence supported experiential treatment for youth with trauma histories, ongoing consultation and technical assistance, and a culture that embeds data collection...
and research into programming. By combining these three elements, we have been able to create and support effective, sustainable treatment, while monitoring outcomes and collecting data to validate this innovative programming. The positive outcomes, coupled with the appreciation and enthusiasm of the trained providers, has led to additional collaborative opportunities in Ohio, including the Attorney General’s Office, the child welfare system, the developmental disabilities department, the education system, and of course the mental health and addictions department.

Session 4 BHE

10:00 am - 10:30 am
Esplanade 1 ~ 30-Minute Paper
Rates of Children’s Mental Health Service Utilization Across Common Service Settings: A Meta-Analysis

Eric Bruns, PhD, University of Washington School of Medicine, Seattle, WA; Mylien Duong, PhD, Committee for Children, Seattle, WA

This meta-analysis investigated rates at which children access mental health care across service sectors. Across seven general population studies, 9% received services in schools, followed by outpatient (7%), primary care (5%), child welfare (4%), juvenile justice (3%), and inpatient/residential (2%) settings. But across 14 studies of youth already in services, rates were highest for outpatient settings. Results show there is no “de facto” system of children’s mental health care and can inform funding and policy decisions.

10:30 am - 11:30 am
Esplanade 1 ~ 60-Minute Discussion
Harnessing the Power of the Evidence Base to Make Informed Decisions about Behavioral Health & Equity

Karen Lyons, MPA, The Pew Charitable Trusts, Washington, DC; Jessica Rubenstein, MPA, MPH, UW Population Health Institute, Madison, WI

Advancing behavioral health equity and addressing disparities is a complex and multidisciplinary challenge. Research clearinghouses are one tool to assist in developing an evidence-informed approach to this challenge. In partnership, the Pew-MacArthur Results First Initiative and The University of Wisconsin Population Health Institute and Robert Wood Johnson Foundation’s County Health Rankings & Roadmaps What Works for Health will showcase free tools and resources for accessing, understanding, and applying evidence to behavioral health and equity.

Session 5 FE

10:00 am - 11:30 am
Esplanade 2 ~ 90-Minute Discussion
Data-Informed Approaches to Collaboration with Youth & Family: What the CMHI Data Tells Us

Malisa Pearson, FREDLA, Lansing, MI; Brie Masselli, Youth Move National, Decora, IA; Millie Sweeney, MSW, FREDLA, Ellicott City, MD; David McClung, The University of Texas at Austin, Austin, TX

While collaboration is generally seen as beneficial by all stakeholders within Systems of Care, the CMHI National Evaluation data shows that sites are not maximizing partnerships with youth- and family-run organizations. This symposium will review the findings from the CMHI data, explore best practice for integrating family and youth voice, and identify how assessment tools and local evaluations can enhance collaboration with youth- and family-run organizations to implement more meaningful roles for youth and families.

Participants and presenters will engage in discussion about best practice strategies for engaging families and youth, opportunities for maximizing collaboration with youth- and family-run organizations, and the many ways assessment tools and local evaluation can support efforts to enhance collaborations at all levels through the system of care. There is a great deal to be learned from the CMHI collaboration data. As sites work toward a more robust array of opportunities to enhance and inform the services and systems that support youth, young adults and their families, this data creates an opportunity to develop data-driven approaches that address the reasons communities and states struggle to achieve authentic family and youth partnerships during and after systems of care cooperative agreements finish their funding cycles.

Session 6 WA

10:00 am - 10:30 am
Esplanade 3 ~ 30-Minute Paper
Trauma Identification and Increased Risk for Frontier Youth in Wraparound

Tammy Cooley, MSW; Sharon Weber, BA, Magellan in Wyoming, Cheyenne, WY; Barbara Dunn, MSW, Magellan Healthcare, Newtown, PA

Trauma-informed practice in Wyoming Wraparound has unfolded over the first three years using the Adverse Childhood Event (ACE) Survey and the new 2016 CANS trauma module in the Plan of Care. This discussion will review the data collection and analysis, compare the differences in the measures and explore how a frontier state using High Fidelity Wraparound has used creative resources to address the high prevalence of trauma in their population.
Session 7 Y&YA
10:00 am - 10:30 am
Palma Ceia 1 ~ 30-Minute Paper

A Catch 22? The Real Experience of Aging into Adult Community Mental Health Services

Tatiana Londoño; Deborah Cohen, PhD, University of Texas, Austin, TX; Vanessa Klodnick, PhD, LCSW, Thresholds Youth & Young Adult Services & the University of Texas at Austin, Austin, TX

Those aging out of child services are at high risk for not transitioning to adult system services. Twenty young adults were interviewed as they transitioned (or not) into adult services. Overwhelmingly, adult services did not directly meet critical needs, including independent living and employment. Young people are in a “catch 22” as they opt out of services that support emotional and psychological wellness at a time when they are needed for independent living and employment success.

10:30 am - 11:00 am
Palma Ceia 1 ~ 30-Minute Paper

Reframe the Age: Enhancing Practice to Support the Success of Young Adults in Massachusetts

Heidi Holland, MEd, Massachusetts Department of Mental Health, Boston, MA; Susan Wing, MSW, LICSW, Massachusetts Department of Mental Health, Tewksbury, MA; Kim Clougherty, BS; Julia Meehan, MSW, LICSW, Massachusetts Department of Mental Health, Brockton, MA

The Massachusetts Department of Mental Health (DMH) implemented a regulation change last year that enables youth/young adults to become authorized for services with a “child” diagnosis up until their 22nd birthday (previous age was 19). The purpose of this change, which we’ve named Reframe the Age, is to provide flexibility in meeting the service needs of young adults as they transition into adulthood. The session will focus on the relationship between policy and practice change.

11:00 am - 11:30 am
Palma Ceia 1 ~ 30-Minute Paper

Bridging the Transition for Transition-Age Youth (TAY): How Three Agencies in Texas Effected Organizational and Service Delivery Changes with Little or No Additional Resource

Cory Morris, MSW; Kaleigh Emerson, MPH; Deborah Cohen, PhD, MSW, The University of Texas at Austin, Austin, TX

Nationally, there has been an increasing conversation around providing effective mental health support for transition-age youth (TAY). Given the vulnerable nature of TAY, the State of Texas has prioritized identifying gaps in serving TAY. This paper describes how three Community Mental Health Centers (CMHC), through technical assistance support and strategic planning, are bringing about organizational and service delivery changes with little to no additional funding attached.
Session 8
10:00 am - 10:30 am
Palma Ceia 2 ~ 30-Minute Paper

Using an Ecological Perspective to Screen Young Children for Developmental Risk and Resilience

Carmela DeCandia, PsyD, Artemis Associates, Watertown, MA; Rosie Donegan, MA, Center for Social Innovation, Needham, MA

NEST (Neurodevelopmental Ecological Screening Tool) is an easy-to-use, online tool developed on a nationwide sample of children ages 3-5 experiencing homelessness. NEST encourages partnership between providers and caregivers, identifies a child's likelihood for developmental risk, and provides real-time recommendations. The creation of NEST represents applied child development work at its best. Guided by developmental theory, academic literature, and field research, NEST helps to make valid developmental screening accessible in low-resource settings. NEST screens children across three domains and 12 constructs: Neurodevelopmental (motor, functional communication, executive function, social-emotional), Caregiver (risk for PTSD and depression, parenting style), and Environment (Child ACE score, housing/homelessness, health care access, food security, lead exposure). NEST is psychometrically validated and can detect clinically significant developmental delays among young homeless children. This session will appeal to both practitioners and researchers. We will share findings and highlight policy and practice implications.

10:30 am - 11:30 am
Palma Ceia 2 ~ 60-Minute Symposium

Parent Engagement Works: How Findings from the Home Instruction for Parents of Preschool Youngsters (HIPPY) Early Education Program Impacts Family Engagement, School Readiness, and Educational Outcomes of Low-Income Children in Florida

Symposium Chair: Tracy Payne, PhD, University of South Florida, Tampa, FL

This symposium provides an overview of an evidenced-based, early education program, Home Instruction for Parents of Preschool Youngsters (HIPPY). HIPPY serves children ages 3-5 and prepares them for kindergarten using their parents as their first teachers. With programs across the state of Florida, HIPPY serves between 1,500 and 2,000 children yearly. Three presentations will address three different aspects of the program: the HIPPY model emphasizing parent engagement and its impact; the program’s impact on children’s school readiness; and the program’s longer-term impact on educational outcomes when HIPPY children enter Florida public schools. Discussions will show how parent involvement in HIPPY results in increased social and educational parent-child interactions, highlight how the Bracken School Readiness Assessment (BSRA-3, 2007) captures the conceptual development of children’s school readiness skills, and demonstrate how HIPPY students’ longer-term success in school is evidenced through satisfactory achievement scores on Florida Standardized Assessments (FSA).

Home Instruction for Parents of Preschool Youngsters (HIPPY), an Early Education Program, Promotes Parental Engagement in Preparing Low-Income Children for Kindergarten

Ruby Joseph, MPA, University of South Florida, Tampa, FL

Home Instruction of Parents of Preschool Youngsters (HIPPY) is an evidence-based early intervention program that prepares children aged 3-5 for kindergarten. The program uses parents as their children’s first teacher. Home visitors deliver the curriculum to parents using role play and parents then work directly with their children on educational activities. This presentation highlights the results of pre- and post-parent involvement surveys used to monitor parents’ involvement in their children’s educational development.

Florida HIPPY Children’s Development of School Readiness Skills: Results from Bracken School Readiness Assessment Fiscal Year 2016-2017

Angela Vatalaro, PhD, University of South Florida, Tampa, FL

This presentation will highlight the results of the Bracken School Readiness Assessment offered as pre- and post-assessment to Florida HIPPY children in 2016-2017. The pre-assessments were administered upon enrollment before any curriculum was received, and post-assessments were administered during week 25 of the curriculum. Matched pre-assessment and post-assessment data were used to assess children’s progress over time. Results show general improvement in scores from pre-assessment to post-assessment across sites and curriculum years.

Post HIPPY: Florida HIPPY Students’ Educational Outcomes

Svetlana Yampolskaya, PhD, University of South Florida, Tampa, FL

This presentation will review the outcomes from a cross-sectional two-group design comparing a group of HIPPY children and a non HIPPY group of children on school standardized tests and promotions. The propensity score method was utilized because students were not randomly assigned to groups. Statistical analyses consisted of chi-square tests of significant differences between proportions and analysis of variance (ANOVA) tests of significant differences between means. Results show promising outcomes for promotions and Florida Standards Assessments (FSA) among HIPPY students.
Session 9
10:00 am – 11:30 am
Palma Ceia 3 ~ 90-Minute Symposium

Pediatric Care Integration Best Practices: Consensus Findings from an Expert Convening

Symposium Chair: Sheila A. Pires, MPA, Human Service Collaborative, Washington, DC; Discussant: Suzanne C. Fields, MSW, University of Maryland, Baltimore, MD

In June 2017, the National Technical Assistance Network for Children’s Behavioral Health invited primary and behavioral health care experts to address the topic of improving physical and behavioral health care integration for children enrolled in Medicaid and the State Children’s Health Insurance Program. Over a two-day meeting, the group explored care integration challenges and opportunities in both primary care and behavioral health settings and identified evidence-informed approaches. The goal of the meeting was to develop consensus and enhance guidance to the field on an effective care integration continuum for children, youth, and young adults with behavioral health challenges and their families. This symposium provides information about the composition, process, and deliberations of the expert convening, describes the consensus achieved by the group concerning a comprehensive care integration continuum, and provides state and provider examples, including Oklahoma’s tiered care coordination health home approach.

Expert Convening on Pediatric Care Integration Best Practices

Suzanne C. Fields, MSW, University of Maryland, Baltimore, MD

Background data on the population and status of pediatric care integration approaches will be introduced. The National Technical Assistance Network for Children’s Behavioral Health’s convening of experts will be described, including the process of examining best practices and achieving consensus on the elements of a comprehensive care integration continuum for children, youth and young adults with behavioral health challenges and their families enrolled in Medicaid and the State Children’s Health Insurance Program.

Pediatric Care Integration Continuum: Consensus Framework

Sheila A. Pires, MPA, Human Service Collaborative, Washington, DC

Consensus findings from the Pediatric Integrated Care Expert Convening will be detailed, which provide a comprehensive care integration continuum framework for policymakers, purchasers and providers interested in effective approaches to pediatric care integration for children, youth and young adults with behavioral health challenges and their families. State and provider examples that illustrate components of the care integration continuum will be provided.

Best Practices in Pediatric Care Integration: Oklahoma’s Health Homes for Children with Behavioral Health Challenges

Sheamekah S. Williams, MSW, Oklahoma Department of Mental Health and Substance Abuse Services, Oklahoma City, OK

Oklahoma will describe its health home approach for children and youth who experience serious or emergent complex behavioral health challenges, which draws on best practices that informed the Pediatric Care Integration Continuum adopted by the National TA Network’s Expert Convening. Oklahoma health homes include a tiered-care coordination approach, integration with primary care, fidelity Wraparound, peer support, and wellness coaches. Oklahoma will describe how health homes function and the outcomes they are expected to achieve.

Session 10
10:00 am – 11:30 am
Palma Ceia 4 ~ 90-Minute Symposium

Delinquency, Street Gangs, and Commercial Sexual Exploitation: Trauma Exposure and Trauma Symptoms Among Boys and Girls in Care of the Welfare or Justice Systems

Symposium Chair: Nadine Lantôt, PhD, Université de Sherbrooke, Longueuil, Quebec City, Canada; Discussant: Bryanna Fox, PhD, University of South Florida, Tampa, FL

Adolescent boys and girls in the care of the welfare and justice systems are known to witness and experience disproportionately high levels of violence and abuse that often occurs in multiple forms and repeatedly over their life paths. While many studies document the effects of child maltreatment on further behavioral problems, few have focused on the harmful effects of risky proximal contexts - such as delinquency, street gangs, and commercial sexual exploitation - on traumatic events exposure. This symposium will focus on the traumatic events to which young male offenders and sexually exploited females are exposed and the associated post-traumatic symptoms that may hinder their development. Findings will be discussed through a trauma-sensitive approach. Youth’s trauma-related symptoms must be eased so they can gradually recover and adapt positively.

Study of Trauma Associated with Delinquency and Its Traumatic Impact on Young Offenders Associated and Not Associated with Street Gangs

Catherine Laurier, PhD; Nadine Lantôt, PhD; Anne-Marie Ducharme, MSc, Université de Sherbrooke, Longueuil, Quebec City, Canada

This presentation focuses on traumatic events (TE) and post-traumatic symptoms. Our study comprised a sample of 212 young male offenders (15-25 years); 80 of them revealed involvement with a street gang. Structured interviews and self-administered questionnaires were used to assess mental health and TE exposure. Young offenders have a high prevalence of PTSD, even more so among those associated with street gangs who report greater exposure to TE.
A Latent Class Typology of Justice-Involved Youth Victims and Exploration of Trauma-Related Psychological Symptoms and Justice Involvement Outcomes
Joan Reid, PhD, University of South Florida St. Petersburg, St. Petersburg, FL; Thomas A. Loughran, PhD, Pennsylvania State University, University Park, PA

Justice-involved youth are known to witness and experience disproportionately high levels of violence and abuse, leading to calls for the provision of trauma-informed care as best practice. However, our understanding of trauma-related symptoms among justice-involved youth and their association with exposure to violence (ETV) remains largely underdeveloped. Using data from a sample of 1,354 justice-involved youth, this study uses latent class analysis to construct a typology of justice-involved trauma victims based on ETV items.

Flashbacks and Nightmares: The Effects of Child Sexual Exploitation on Post-Traumatic Symptoms in Emerging Adulthood
Nadine Lanctôt, PhD; Catherine Laurier, PhD, Université de Sherbrooke, Longueuil, Quebec City, Canada; Joan Reid, PhD, University of South Florida St. Petersburg, St. Petersburg, FL

This study evaluates the effects of child sexual exploitation on post-traumatic symptoms reported in emerging adulthood. Data were gathered from the Montreal Longitudinal Study on Adolescent Girls in Residential Youth Centers (Lanctot, 2011). The sample is composed of 134 young women previously in care. Results show that over and above the occurrence of child sexual abuse and the intensity of post-traumatic symptoms reported during adolescence, child sexual exploitation predicts more post-traumatic symptoms in emerging adulthood.

Session 11 ITRE
10:00 am - 12:00 pm
Garrison ~ Closed Session
Responsible Conduct of Research II – Closed Session – ITRE Scholars only

This session will provide an overview of the IRB requirement to conduct human subject research. Topics to be explored include responsible conduct of research, confidentiality, informed consent, conflict of interest, and other topics related to the NIH’s in-person training requirement.

Lunch on Your Own
11:30 am – 2:00 pm
Take this opportunity to connect with colleagues and friends.

Afternoon Keynote Address
2:00 pm - 3:15 pm
Bayshore Ballroom
Supporting Children, Adolescents, Young Adults and Families Thrive: A Conversation with the First Lady of New York City
Chirlane McCray, First Lady of New York City, New York, NY; David L. Shern, Co-Moderator, National Association of State Mental Health Program Directors, Tampa, FL; Lacy Dicharry, Co-Moderator, Elevate Young Professionals, Baton Rouge, LA

Our nation is in the midst of a full-blown mental health crisis, and young people are among those suffering the worst of its effects. Communities must come together to end this crisis. Through early and comprehensive action, we can address the burden of mental illness and the risks to mental wellness at every stage of life. We have the science; we have the evidence-based studies, so what are we waiting for? First Lady Chirlane McCray will share how ThriveNYC is helping ensure that children and adolescents grow into healthy and whole adults. From the home to the classroom to after-school activities, there are opportunities to build resilience, prevent mental illness, and practice early intervention. Thrive is helping New York City to seize those opportunities and calling on every adult who works with young people to do their part in the national movement for mental health.

3:15 pm - 3:30 pm
Networking Break

Session 12 Y&YA
3:30 pm - 4:00 pm
Bayshore 5 ~ 30-Minute Paper
Reviewing Outcomes: O-YEAH, a Transitional Program for Young Adults, 10 Years in the Making
Pnina Goldfarb, PhD, Wraparound Milwaukee, Milwaukee, WI

A review of O-YEAH that uses the same core philosophical guidelines as Wraparound and a complimentary practice model. Fidelity instruments and outcome measures are discussed. Outcome data in the areas of engagement and planning satisfaction, personal goal achievement, housing, employment, education, and level of progress upon disenrollment is analyzed. Comparison of variables that contribute to successful disenrollment vs those young adults who leave the program will be presented.
Monday – March 4

4:00 pm - 4:30 pm
Bayshore 5 ~ 30-Minute Paper
CT STRONG – A Review of Connecticut’s Healthy Transitions Program
Eleni Rodis, MS; Jennifer Donnelly, MSW; Dawn Grodzki, BS, CPS, Connecticut Department of Mental Health & Addiction Services, Hartford CT; Karen Hensley, MS; Michael Scanlon, RSS, Advanced Behavioral Health, Inc., Middletown, CT
This presentation reviews CT STRONG, Connecticut’s Healthy Transitions program. The purpose of CT STRONG is to engage youth and young adults who have, or are at risk for, behavioral health disorders and connect them to care. The project involves public awareness, outreach, engagement and increasing access to treatment and supports. This presentation will include a description of the program, evaluation results, and a video created for the project.

4:30 pm - 5:00 pm
Bayshore 5 ~ 30-Minute Paper
A New Cultural Approach to Young Adult Serving Systems
Navid Daee, MA; Matteo Lieb, BA, Community Connections, Washington, DC; Leslie-Ann Byam, MA; Kristin Adams, BS, Department of Behavioral Health, Washington, DC
The DC Our Time program adjusted their behavioral health service delivery to meet the cultural needs of transition age youth (TAY). In this workshop, we’ll share strategies for developing programs that are culturally and developmentally appropriate as well as young adult driven. Additionally, we’ll share techniques to engage TAY around behavioral health services and ways to reconstruct young adult serving systems from one focused on deficits to one that emphasizes strengths and early intervention.

Session 13 EBP
3:30 pm - 4:00 pm
Bayshore 6 ~ 30-Minute Paper
Evidence-Based Treatments in Child Mental Health: Understanding the Factors Impacting Implementation and Sustainability
Jessica Eslinger, PhD; Ginny Sprang, PhD, University of Kentucky, Lexington, KY
There have been focused efforts to increase the dissemination of evidence-based treatments (EBTs) for child mental health issues. However, the dissemination of these EBTs has not necessarily translated into sustainability and has many challenges associated with the implementation process. Further understanding of the factors that help or hinder the implementation process is needed. An electronic survey was sent to a multi-disciplinary group of mental health providers who received training in one of three EBTs (Trauma-Focused Cognitive Behavioral Therapy, Functional Family Therapy, Encompass CBT+). Two studies were conducted using this data. Results suggest that organizational factors, such as productivity concessions and agency incentives, type of training format, clinical experience, attitudes toward EBT, and post-training barriers impact implementation outcomes. Implications for training and practice will be offered.

4:00 pm - 5:00 pm
Bayshore 6 ~ 60-Minute Symposium
Evidence-Based Practices in Children’s Behavioral Health: Implications for Sustainability and Service Systems
Symposium Chair: Jason Lang, PhD, Child Health and Development Institute, Farmington, CT; Discussant: Benjamin Saunders, PhD, Medical University of South Carolina, Charleston, SC
Great efforts are being made by researchers and providers to disseminate evidence-based practices (EBPs) for children with behavioral health conditions, yet the uptake and sustainability of bringing EBPs to scale remain limited. This symposium addresses several research gaps and common questions about sustaining EBPs as part of large service systems. The first paper analyzes data from 278 clinicians and 2,300 children to describe the relative contributions of organization-, clinician-, and child-level factors toward sustaining EBPs and healthy outcomes for child recipients. The second paper examines the relationship between interprofessional collaboration across child service systems and sustainment of child behavioral health EBPs. The final paper describes the extent to which community-based EBPs were provided to children with behavioral conditions that the EBPs were intended to address. Lessons learned and implications for scaling up EBPs and sustaining them efficiently and effectively will be discussed.

The Influences of Child, Clinician, and Organization Factors on EBP Sustainability and Child Outcomes: A Multilevel Assessment
Robey Champine, PhD; Michelle Delaney, MA; Jason Lang, PhD, Child Health and Development Institute, Farmington, CT
The relative contributions of child-, clinician- and organization-level factors towards EBP implementation and outcomes for 2,300 children receiving EBPs will be described. Measures assessed the extent to which clinicians’ organizations supported the implementation of EBPs, clinicians’ perceived self-efficacy in delivering interventions, the number of children served, and change scores in child trauma symptoms. Findings will inform discussion of the roles of individual and contextual factors in the use of EBPs in community settings.
Mitigating Barriers to Implementing Evidence-Based Interventions in Child Welfare: Lessons Learned from Scholars and Agency Directors

Antonio Garcia, MSW, PhD, University of Pennsylvania, Philadelphia, PA; Christina DeNard, PhD, University of Illinois at Chicago, Chicago, IL; Seth M. Morones, MSED; Nehal Eldeeb, University of Pennsylvania, Philadelphia, PA

No research to date has examined the experiences of scholars and directors who have implemented Evidence-based Practices (EBPs) in child welfare agencies that are empirically robust and tested among a racially diverse sample. They revealed during interviews that exchanges of relevant information about EBPs were sporadic, hindering awareness and “buy-in” about the implementation process. Attendees will learn about and discuss strategies to address barriers and cultivate optimal conditions that are needed to implement EBPs.

4:00 pm - 5:00 pm
Bayshore 7 ~ 60-Minute Paper

Doing the Limbic Limbo – Why Music, Rhythm, Movement, Art, and Play Help More Than Words

L. Michelle Codington, MS, LMFT, CFTP, Where Kids Thrive, Haddonfield, NJ

In an effort to help, clinicians often miss critical pieces of the developmental needs of traumatized children. Before cognitive, language-based interventions or behavior modification can be effective, children must develop the capacity to recognize their energy (arousal) level and practice modulating it to their comfort level. Doing so requires interventions that first address somatosensory issues to calm the limbic system. Once the “limbic limbo” has restored a sense of calm relaxation to the “downstairs brain,” then only then is it appropriate for a clinician to gradually shift the focus of intervention to the “upstairs brain.” This discussion hour will focus on ways to synthesize somatic techniques with traditional top-down cognitive approaches that not only alleviate symptoms but also help kids experience a strong sense of self, competence, and worth.

Session 15

3:30 pm - 4:30 pm
Esplanade 1 ~ 60-Minute Symposium

System of Care Practice Review (SOCPR): Program, Community, and State Perspective

Symposium Chair: Debra Mowery, PhD, University of South Florida, Tampa, FL; Discussant: Mario Hernandez, PhD, University of South Florida, Tampa, FL

The System of Care Practice Review (SOCPR) collects and analyzes information regarding the process of service delivery to document the service experiences of children and their families, and provides feedback and recommendations for improvement to the system. The process yields thorough, in-depth descriptions that reveal and explain the complex service environment experienced by children and families. Feedback is provided through specific recommendations that can be incorporated into staff training, supervision, and coaching, and may also be aggregated across cases at the regional or system level to identify strengths and areas in need of improvement within the system of care. In this manner, the SOCPR provides a measure of how well the overall system is meeting the needs of children and their families. This presentation presents results at the program, community, and state level of adherence to the system of care values and principles to inform change, training, and dissemination.
Ottawa’s Children’s Mental Health System

Natasha Tatarcheff-Quesnel, MSW, Ottawa Children’s Coordinated Access and Referral to Services, Ottawa, ON, Canada; Michael Hone, MEd RP, Crossroads Children’s Mental Health Centre, Ottawa, ON, Canada; Debra Mowery, University of South Florida, Tampa, FL

One community utilized information regarding fidelity of practice to a model of service delivery and systems organization to bring about a locally driven collaborative approach to system planning and service delivery. The community used the model to support their planning as a group. This session will share the lessons learned in forming a local collaborative of providers for creating an integrated, community-based, individualized, and culturally competent approach to system planning and service delivery.

Analysis of System of Care Practice Review Results for the Child Welfare and Non-Child Welfare Medicaid Populations in Arizona; Using Outcome Data to Improve/Strengthen the Children’s System of Care

Kevin Flynn, LCSW; Robert Crouse, Arizona Health Care Cost Containment System, Phoenix, AZ; Debra Mowery, University of South Florida, Tampa, FL

The Arizona Health Care Cost Containment System and the University of South Florida have gathered statewide System of Care Practice Review (SOCPR) data on both the Child Welfare and general Medicaid populations in Arizona across multiple years. A systematic review of statewide SOCPR results for child welfare versus non-child welfare cases provides a window into the quality of care for these populations in the state’s behavioral health system. How can outcome data for these populations be used to improve and strengthen the children’s system of care in Arizona, at present and in the future?

Success 4 Kids and Families System of Care Practice Review

John Mayo, LMHC, Success 4 Kids and Families, Tampa, FL; Linda Callejas, PhD, University of South Florida, Tampa, FL

The System of Care Practice Review (SOCPR) provides quality improvement feedback to Success 4 Kids & Families (S4KF) regarding the children and families served through the various funding sources utilized by the agency. S4KF adopted the wraparound service model (family-focused and strengths-based) to develop individualized behavioral and mental health plans for children and families. Child and family teams bring together key people in the child’s life to explore the family’s unique strengths, needs, and culture.

4:30 pm - 5:00 pm

Using Rapid-Cycle Evaluation and Iteration to Assess and Improve Your Intervention

Alisha Pollastri, PhD; J. Stuart Ablon, PhD, Massachusetts General Hospital/Harvard Medical School, Boston, MA

The Collaborative Problem Solving approach (CPS) is applicable across various treatment, justice, and educational settings and populations, so results of one clinical trial may not generalize. Using the IDEAS Impact Framework, we continually assess the process and impact of the approach and adjust implementation to maximize outcomes. We will explain how doing so supports continual improvement. You will be led through the process of how to apply this Framework to meet your own organizational goals.

Session 16

3:30 pm - 4:30 pm

Developing 21st Century Skills for the Young Adult Lived-Expertise Workforce: A Gap Analysis and Approach for Implementation

Lacy Dicharry, MS, MBA; Samuel Martin, MS, MPA, Elevate Young Professionals, Baton Rouge, LA

The young adult lived-expertise workforce has continued to emerge over the last decade. Much attention is given to supporting the development of technical skills, but research shows the biggest challenge is not the absence of technical skills, but the lack of 21st Century skills. Elevate Young Professionals extends this framework beyond classroom learning and proposes an application to the lived-expertise workforce.

4:30 pm - 5:00 pm

Optimizing the Impact of Public-Academic Partnerships on Improving Youth Outcomes

Christina Kang-Yi, PhD; Oluwatoyin Olubiyi, MD, MPH; Amy Page, DSW; Anne Futterer, MSSP, Center for Mental Health, University of Pennsylvania, Philadelphia, PA

This paper presentation will introduce a conceptual framework to understand dynamic and complex public-academic partnerships (PAPs) and reveal contexts and mechanisms to occur for each PAP life cycle stage to optimize PAP leaders’ use of research evidence in improving youth mental health and well-being. Recruiting PAPs across the U.S. that aim to improve mental health and/or promote well-being of youth aged 12-25 years, we conduct document analysis and an online survey of PAPs to inform policymakers and academic researchers regarding the contexts and mechanisms to increase ultimate PAP sustainability and promote policymakers’ use of research evidence in improving youth outcomes. This paper will present
a systematic review of PAPs conducted as part of the document analysis and generate discussion about specific measures of PAP life cycle stage and its impact on policymakers’ use of research evidence in policy making, and PAP recruitment strategies.

**Session 17 WA**
3:30 pm - 5:00 pm
Esplanade 3 ~ 90-Minute Symposium

**Using Data to Understand the Process and Outcomes of Wraparound**

**Symposium Chair:** Joy Kaufman, PhD, Yale University School of Medicine, New Haven, CT; **Discussant:** Eric Bruns, PhD, University of Washington School of Medicine, Seattle, WA

Connecticut is engaged in the state-wide implementation of wraparound to individualize community-based services for youth with serious emotional and behavioral difficulties and their families. Child and Family Team Meetings (CFT) are a core element of wraparound care where individualized plans of care are developed, and outcomes monitored. This symposium will present three studies that highlight the use of data to inform wraparound: 1) the use of data collected about the characteristics of CFT meetings to coach care coordination staff, 2) an examination of the aspects of CFT meetings and how they relate to outcomes, and 3) the use of Medicaid expenditure data to explore changes in service use after enrollment in wraparound. Presentations will include discussion of the implications of these data within Connecticut and nationally along with directions for future research.

**Coaching to the Data in WRAP-CT**

Mark Horwitz, PhD, MSW, JD, Westfield State University, Westfield, MA

Connecticut’s child behavioral health wraparound program collects data about each Child and Family Team (CFT) meeting held across the state and the Plans of Care (POC) that the meetings produce. Coaching to this data allows us to identify and train to best practices. Key variables include the ratio of informal supports to professionals attending each CFT and represented in each POC. This session will also discuss the use of the data to promote best practices.

**Child and Family Team Meeting Characteristics and Outcomes in a Statewide System of Care**

Alayna Schreier, PhD; Joy Kaufman, PhD, Yale University School of Medicine, New Haven, CT

Child and Family Team (CFT) meetings are a core element of wraparound care and are used to develop individualized plans of care and monitor outcomes for youth. This study used multiple regression analyses to examine the association between CFT characteristics and outcomes in a statewide system of care for youth with emotional and behavioral difficulties (n = 363). Significant relationships were observed between CFT characteristics and outcomes. Implications for CFT implementation will be discussed.

**Session 18 Y&YA**
3:30 pm - 5:00 pm
Palma Ceia 1 ~ 90-Minute Symposium

**Involuntary Treatment and Mandatory Leaves Involving Youth and Young Adults: Subjective Experiences, Impact, and Alternatives**

**Symposium Chair:** Nev Jones, PhD, University of South Florida, Tampa, FL; **Discussant:** Jess Stohlmann-Rainey, Denver, CO

While often a focus of media attention, the experience and impact of involuntary system responses to mental health crises among youth and young adults—including compulsory psychiatric hospitalization and mandatory leaves of absence from postsecondary institutions have received surprisingly little attention in the research literature. In this symposium, we present three important research projects along with a practice-focused discussion of alternatives. Our first research talk focuses on longitudinal qualitative data generated through in-depth interviews with adolescents at the beginning and end of involuntary inpatient stays. The second talk covers the experiences of college students who have experienced campus-initiated involuntary psychiatric treatment and their perspectives on optimal campus supports and policy change. Finally, the third talk tackles the subjective impact of university-mandated leaves of absence due to psychiatric disability/distress. A leading suicide prevention activist will discuss these findings and weigh in on alternatives designed to support young adults in crisis.

**Using Administrative Data to Identify Behavioral Health Service Utilization Outcomes for Youth Enrolled in an Intensive Care Coordination Program**

Christopher Bory, PsyD; Robert Plant, PhD; Gabrielle Hall, MS, Beacon Health Options, Rocky Hill, CT

The Connecticut Intensive Care Coordination program works with families and youth that have complex behavioral health challenges and assists families to develop and coordinate their care using the Wraparound Practice Model. We identified 150 youth enrolled in the Connecticut Intensive Care Coordination Program between September 2015 and June 2017 and examined the change in behavioral health service utilization using Medicaid claims data. Results and implications will be discussed.
Sharing Their Stories: A Qualitative Investigation of Adolescents’ Inpatient Experiences During Psychiatric Hospitalization

Jessica Rice, PhD candidate, University of South Florida, Tampa, FL

The prevalence of hospitalized youth continues to rise, but there remains a research gap regarding adolescents’ treatment experiences. We investigated the experiences of 25 youth (13-17 years of age), through in-depth interviews at the beginning and end of hospitalization. Four themes emerged: significance of precipitating factors, criminalizing nature of hospitalization, peer support, and complexities of inpatient treatment. Our data underscore the importance of attending to adolescents’ experiences and insights.

“I’m Still Trying to Make Sense of It:” Unpacking the Experience and Impact of Involuntary Psychiatric Commitment During High School and College

Nev Jones, PhD, University of South Florida, Tampa, FL

Compared to adults, there is little research on young people’s experiences of involuntary commitment. We interviewed 35 students regarding their experiences of involuntary hospitalization during college or high school. Cross-cutting themes include substantial perceived gaps between participants’ expectations and the realities of hospitalization, negative impacts on the willingness to trust mental health providers, and the desire for stronger postvention supports. Findings highlight the importance of research on involuntary commitment involving young people.

Social Identity, Autonomy and the Loss of the Future Self: Student’s Experiences of University Mandated (Involuntary) Leaves of Absence and Their Long-Term Impact

Emily Cutler, University of South Florida, Tampa, FL

To the best of our knowledge, there is no existing research on the impact of university-mandated leaves of absence. We conducted in-depth interviews with 25 individuals who had previously experienced a mandated leave during their undergraduate or graduate studies. Participants described multiple negative short- and long-term impacts including the disruption of social networks and loss of identity. Given potential impacts, expanded research on the effects of mandated leaves is critical.
Session 20
3:30 pm - 4:00 pm
Palma Ceia 3 ~ 30-Minute Paper

An Evaluation of the Massachusetts Certification for Early Intervention Specialists (CEIS)

Mason Haber, PhD, Harvard Medical School, Boston, MA; Noah Feldman, MS, MPA, Massachusetts Department of Public Health, Boston, MA

This paper describes the evaluation of the Massachusetts Certification for Early Intervention Specialists (CEIS), providers of services for children ages 0-3 with developmental disabilities or delays. A multi-method process evaluation identified strengths, weaknesses, and priorities for improving the certification system. A statewide survey comparing the self-efficacy of certified to uncertified providers showed higher levels of confidence among certified providers in seven of nine competency domains. Implications for improving state certification systems will be discussed.

4:00 pm - 5:00 pm
Palma Ceia 3 ~ 60-Minute Paper

Shooters In Our Schools: Research Findings and Implications on Prevention, Intervention, Treatment and Recovery After a Mass School Shooting

Jim Adams, MDiv, Geauga County Board of Mental Health and Recovery Services, Chardon, OH

Mass school shootings are reshaping what we know about the response, treatment, and recovery after traumatic events occur. These events touch lives well beyond the boundaries of a single school district. Research shows that students, teachers, school staff and even unaffiliated community members are affected. This presentation will share research findings from both before and after a mass school shooting and discuss the implications for creating a prevention, treatment, and recovery plan that works.

Session 21
3:30 pm - 4:30 pm
Palma Ceia 4 ~ 60-Minute Paper

Utilizing a Same-Day Access Clinic to Increase Access to Behavioral Health and Substance Use Services

Gina Klyachkin, LCSW; Taylor Breeding, LCSW; Jarrod Dungan, BA, KVC Behavioral HealthCare Kentucky, Inc, Lexington, KY

A large behavioral health and child welfare agency in Kentucky has implemented a same-day access clinic in response to the increased need for behavioral health and substance use treatment services and long wait lists for consumers. Treatment and demographic variables of individuals accessing traditional treatment versus same-day access will be compared and contrasted and lessons learned from implementation of the same day access clinic will be explored.

Session 22 ITRE
3:30 pm - 4:00 pm
Garrison Suite ~ 30-Minute Paper

Client Perspectives on Detox: Practical and Personal Implications

Amanda Sharp, MPH; Amanda Armstrong, MS; Kathleen Moore, PhD, University of South Florida, Tampa, FL; Cris Riviere, MA, Agency for Community Treatment Services, Inc., Tampa, FL

The Agency for Community Treatment Services (ACTS) in Hillsborough County, Florida offers a variety of recovery services, including inpatient detoxification and outpatient treatment services. This qualitative assessment gauges client experiences in inpatient detox and explores how these experiences shape their recovery. More specifically, the authors assess patient perceptions of direct clinical care operations, resources accessibility, and interpersonal relationships with direct-care staff. Client perceptions are analyzed through a lens of person-centered care best practices to better understand how facility practices may affect treatment engagement and retention.

4:00 pm - 4:30 pm
Garrison Suite ~ 30-Minute Paper

Former Foster System Youth Perspectives on Transition to Adulthood

Amy Armstrong-Heimsoth, OTD, OTR/L; Molly Hahn-Floyd, OTS, Northern Arizona University/University of South Florida, Phoenix, AZ; Heather Williamson, DrPH, Northern Arizona University, Phoenix, FL; Shevaun Sullivan, OCJ Kids, Phoenix, AZ

Youth aging out of foster care face many risk factors as they transition into adulthood. While multiple transition services exist, there is no gold standard transition service. Semi-structured interviews, support mapping, and resiliency measurements were completed to gather the lived experiences of foster youth through transition. Comparisons between those choosing initial transition supports and those who didn't were explored. Dissemination of needs/desires of the youth can assist with sustainability and effectiveness of transition programming.
Y&YA

5:15 pm – 5:45 pm
Bayshore 5 ~ 30-Minute Paper

Exploring Potential Correlates of Employment and Education Experiences Among Youth and Young Adults with Serious Mental Health Conditions

Kathryn Sabella; Laura Golden; Emma Pici-D’Ottavio,
Transitions to Adulthood Center for Research, Worcester, MA

Youth and young adults (Y&YAs) with serious mental health conditions (SMHC) experience several interruptions to ongoing school and work activities. However, we know very little about the correlates of successful education and employment outcomes in this population. This paper will describe the methods and baseline characteristics of an innovative longitudinal investigation of education, employment, and potential facilitators and barriers to success among 180 Y&YAs with SMHC. Results can inform future analyses, research, and service provision.

5:00 pm – 5:15 pm
Networking Break

Session 24

5:15 pm – 6:15 pm
Bayshore 6 ~ 60-Minute Symposium

Multiple Perspectives to Inform the Development of the Connecticut Children’s Behavioral Health Network of Care

Chair: Joy Kaufman, PhD, Yale University School of Medicine, New Haven, CT; Discussant: Tim Marshall, LCSW, Connecticut Department of Children and Families, Hartford, CT

Connecticut has engaged in a process to facilitate ongoing engagement and input from stakeholders in the development of our Children’s Behavioral Health Network of Care. This process includes gathering the perspectives of multiple stakeholders including youth and family members and behavioral health providers, and engaging citizens in the work. This symposium will include three papers: 1) using social network analysis of input from behavioral health providers regarding their collaboration with other agencies to assess network growth over time, 2) a youth-led community-based participatory research approach to gather input from their peers, and 3) the process by which data is shared with community members with the goal of engaging them in systems development. The symposium will include a discussion of how these data and processes inform the continued development of Connecticut’s network of care.

Behavioral Health Provider Assessment of Collaboration Within a Network of Care

Joy Kaufman, PhD, Yale University School of Medicine, New Haven, CT; Lisa Palazzo, LCSW, Beacon Health Options, Rocky Hill, CT; Kathryn Clark, MS, Yale University School of Medicine, New Haven, CT

The process to collect and the results of a collaboration survey to assess how behavioral health agencies interact within the regional networks of care in Connecticut will be reviewed. Social network analyses were performed to assess quantitative changes in the network over time and content analyses were employed to summarize staff perceived changes in the network. The discussion will include how the data are being used to inform the continued development of the network of care.
**Community Conversations: Youth Perspective**  
Taylor Ford, MSW; Beresford Wilson, FAVOR, Inc.,  
*Whetherfield, CT*

This presentation will summarize community-based participatory research conducted by a family-led organization to solicit youth perspectives on Connecticut’s behavior health network of care. Youth and family members were engaged as full partners to collect, analyze, and disseminate findings to local communities. This information is being used to inform the ongoing development and implementation of the Connecticut Children’s Behavioral Health Plan. Findings outline the strengths, service gaps, and recommendations for change from the youth perspective.

**Understanding Our Regions Through Data**  
Michelle Riordan-Nold, MPP, Connecticut Data Collaborative, Hartford, CT

An important component of developing the networks of care entails equipping citizens with data about their communities to engender data-informed discussions and action. In partnership with the Network of Care managers, the Connecticut Data Collaborative developed and presented regional online, interactive data stories that describe the people living in each region. These stories provide, for the first time, data about communities across sectors and also educate residents on the data that are available publicly.

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### Session 25 CW

**Bayshore 7 ~ 60-Minute Discussion**

**Maryland Social Services Administration’s Strategic Approach to Addressing Parental Substance Use Disorders**

Keisha Peterson, LMSW, Maryland Department of Human Services, Baltimore, MD; Jennifer Lowther, LCSW-C; Brook Kearley, PhD, University of Maryland School of Social Work, Baltimore, MA; Shawnett Mills, LCPC, Maryland Department of Human Services, Baltimore, MD

This discussion hour will focus on describing the process, successes, and lessons learned in selecting and implementing evidence-based practices and other supports to improve Maryland’s Department of Human Services and Social Service Administration’s (SSA) response to families affected by substance use disorders (SUDs). Through Maryland’s Title IV-E Waiver demonstration project needs assessment, parental SUDs were identified as a priority area: every local department identified parental SUDs as a primary driver of entries and re-entries into care.

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### Session 26

**5:15 pm - 6:15 pm**  
**Esplanade 1 ~ 60-Minute Symposium**

**Rural Trauma-Informed System of Care in Pennsylvania: A Fifteen Thousand Square Mile View**

**Symposium Chair and Discussant: Monica Payne, MA, University of Pittsburgh, Monroeville, PA**

The Behavioral Health Alliance of Rural Pennsylvania (BHARP) System of Care (SOC) Project was founded with the aim to establish a youth- and family-driven, trauma-informed system transformation across twenty-three rural Pennsylvania counties. Many steps have been taken to further engage youth and families as well as ensure that everyone who interacts with these individuals is trauma-informed. Grant implementation has taken a decentralized approach to empower county-level ownership and sustainability. Together with youth, family, and leaders from Wayne County, BHARP SOC will discuss their journey toward meeting their goals and developing best practices for rural counties.

**The BHARP System of Care Project: Youth-Driven, Family-Driven, and Trauma-Informed System Transformation**

Christopher Minnich, MEd; Judy Davis, BA, BHARP State College, PA; Monica Payne, MA, University of Pittsburgh, Monroeville, PA

The BHARP SOC Project is comprised of twenty-three rural counties in central Pennsylvania. Together, they aim to support the grant’s core activities: to develop county leadership teams, youth- and family-driven systems, and trauma-informed systems of care. As the grant enters its final year, the BHARP leaders will discuss lessons learned related to how goals were set and accomplished, the importance of relationships, best practices, evaluation across different systems, and advancing trauma-informed care.

**Wayne County: Using Its Trauma-Informed Lens**

Faith Phillips; Amanda Crane, Wayne County System of Care, Honesdale, PA; Samantha Pulleo, BS, University of Pittsburgh, Monroeville, PA

Wayne County is one of the eight counties that agreed to participate in grant activities at the highest level and receive an annual sub-award. Counties such as Wayne use their allocations to support local goals related to BHARP’s core activities as well as their own identified priorities. Wayne County will share their local implementation successes related to their county leadership team and additional examples of how the county contributed to BHARP’s overall success.
Session 27

5:15 pm - 6:15 pm
Esplanade 2 ~ 60-Minute Discussion

**Developing Program and Practice Standards for Intensive In-Home Behavioral Health Treatment (IIBHT)**

Philip H. Benjamin, MA, University of Washington, Seattle, WA; Richard Shepler, PhD, PCC-S, Case Western Reserve University, Cleveland, OH; Joseph Woolston, MD, Yale School of Medicine, Child Study Center, New Haven, CT; Eric J. Bruns, PhD, University of Washington, Seattle, WA

Intensive In-Home Behavioral Health Treatment is utilized widely for youth with serious behavioral health needs and their families, yet the field has functioned for decades without accepted quality standards. This discussion hour will present results from a project to define program and practice standards for IIBHT drawing upon expert interviews, literature review, and a Decision Delphi process. Standards will ultimately inform efforts such as quality collaboratives, workforce development, and quality improvement at system, organization, and practice levels.

Session 28

5:15 pm - 6:15 pm
Esplanade 3 ~ 60-Minute Discussion

**Implementing a Cross-System Intervention to Promote the Mental Health of Children Involved in the Child Welfare System**

Geetha Gopalan, PhD, Silberman School of Social Work at Hunter College, New York, NY; Maria Jose Horen, MA, MPH; Jennie Lowe, University of Maryland School of Social Work, Baltimore, MA

The Partnering for Success initiative promotes greater collaboration between child welfare and mental health systems. This presentation will explore factors that facilitate and hinder cross-system implementation.

Session 29

5:15 pm - 6:15 pm
Palma Ceia 1 ~ 60-Minute Discussion

**Increasing Engagement and Improving Outcomes in Early Psychosis Programs by Integrating Transition-Age Youth Best Practices: A Solution-Focused Discussion**

Marc Fagan, PsyD, Thresholds, Chicago, IL; Vanessa Klodnick, PhD, LCSW, Thresholds Youth & Young Adult Services & the University of Texas at Austin, Austin, TX; Patrice “Patti” Betzer, LSW-S, Northeast Ohio Medical University, Rootstown, OH; Hewitt B. “Rusty” Clark, PhD, University of South Florida, St. Petersburg, FL

Coordinated Specialty Care (CSC) for a recent onset of psychosis varies widely in practice, and in client engagement and retention. This discussion will bring together practitioners, researchers, and program administrators to discuss the benefits and solutions related to integrating young adult specific strategies and engagement practices in CSC. Our collective system, agency, and team-level-solutions will lay a foundation for future collaboration and co-learning among participants.

Session 30

5:15 pm - 6:15 pm
Palma Ceia 2 ~ 60-Minute Discussion

**Public, Private and Tribal Partnership to Grow and Sustain Services to Native American Populations in Nebraska**

Nathan Busch, JD, Nebraska Children and Families Foundation, Lincoln, NE; Bernie Hascall, Nebraska Department of Health and Human Services, Lincoln, NE; Greg Donovan, MPA, Santee Sioux Nation, Lincoln, NE

Learn successful sustainability strategies. Through the development of public, private and tribal partnerships, entities in Nebraska united to sustain community-based behavioral health services and supports for inter-tribal young Native Americans, their families, and communities initiated through a federally funded Native American System of Care grant. Approaches include partnership development, financial resources, services and supports, data collection and analysis.
Session 31

5:15 pm - 6:15 pm

Palma Ceia 3 ~ 60-Minute Symposium

Discussion and Demonstration: Update on Continuous Realist Evaluation of System Of Care Expansion Utilizing Big Data from Management Information Systems: Demonstration with Real Human Services & School Big Data from Manchester City Council (UK) and Chautauqua & Rockland Counties (NY)

Mansoor Kazi, PhD, Fredonia State University of New York, Fredonia, NY; Rachel Ludwig, LCSW; Patricia Brinkman, Chautauqua County, Mayville, NY; Marie McLaughlin, Manchester City Council, Manchester, UK

Even today, most evaluations focus on at-risk groups rather than entire agency or school populations. This demonstration utilizes big data continuously on school populations from the SAMHSA-funded SOC expansion in Chautauqua and Rockland counties (NY), and from Manchester City Council (UK). Methods included a nonequivalent comparison group as well as matched quasi-experimental designs, combined with logistic regression to investigate what interventions worked and for whom, in real time. We can do this!

Session 32

5:15 pm - 6:15 pm

Palma Ceia 4 ~ 60-Minute Symposium

Addressing Emergency Department (ED) Overuse Among Youth with Behavioral Health Conditions: Characteristics of Frequent Visitors, the Impact of Mobile Crisis, and System Development Efforts

Symposium Chair: Jeffrey Vanderploeg, PhD, Child Health and Development Institute, Farmington, CT; Discussants: Tim Marshall, LCSW, Connecticut Department of Children and Families, Hartford, CT

The number of emergency department (ED) visits among youth with behavioral health conditions is on the rise nationally, despite widespread acknowledgment that EDs are far from optimal settings for seeking behavioral health assessment and treatment. This symposium will examine the issue from three perspectives. The first presentation examines statewide Medicaid claims data and describes the characteristics of ED visitors presenting with behavioral health conditions, as well as the characteristics of a smaller subset of frequent and persistent ED visitors. The second presentation describes a study that examined service and Medicaid claims data, using propensity score matching, to demonstrate statistically significant reductions in ED utilization among youth participating in a statewide Mobile Crisis service. The third paper describes how the above findings and other data were used to inform a multi-stakeholder workgroup in the development of a plan for statewide policy, system development, and practice innovations to address the ED issue.

Characteristics of Medicaid-Enrolled Youth Visiting EDs for Behavioral Health Conditions

Robert Plant, PhD, Beacon Health Options, Rocky Hill, CT

This presentation uses statewide Medicaid claims data to examine the characteristics of ED visitors including their demographic, clinical, system-involvement, and referral characteristics. This paper will also describe the unique characteristics of a smaller subset of frequent and persistent ED youth visitors. Preliminary findings indicate that youth with behavioral health conditions that use the ED tend to be older (adolescents 13 to 17 years old), male, white, and involved with the state’s child protective system.

The Impact of a Mobile Crisis Intervention on ED Utilization

Michael Fendrich, PhD; Brenda Kurz, PhD, University of Connecticut, Hartford, CT; Christopher Bory, PsyD, Beacon Health Options, Rocky Hill, CT

This paper will describe findings from a study using mobile crisis service and Medicaid claims data. The study used propensity score matching and a quasi-experimental comparison group design. The findings indicate that Mobile Crisis users had 25% lower ED utilization over the 18 month study period. Follow-up analyses examine the characteristics predicting ED use among Mobile Crisis users. Qualitative findings will be summarized to contextualize the findings and suggest areas for further research.

Policy, System Development, and Practice Innovations to Address the ED Issue

Jeffrey Vanderploeg, PhD, Child Health and Development Institute, Farmington, CT; Susan Graham, MA, MSW, Let’s Build It, Thomaston, CT

This presentation will describe the results of a multi-system stakeholder group convened to review the findings above as well as other data and best practices, and craft a set of recommendations for statewide implementation. We will describe key findings and recommendations for policy, system development, and practice innovation. Recommendations are in the areas of ED diversion, mobile crisis services, enhanced care coordination within EDs, alternative behavioral health assessment centers, and telepsychiatry consultation to EDs.

Session 33

5:15 pm - 6:15 pm

Garrison

Scholars Reception (Closed event)
WE ARE HERE TO HELP YOU MAKE THE BEST USE OF THE DATA THAT IS ALREADY AVAILABLE!

MOST EVALUATIONS FOCUS ON AT-RISK GROUPS RATHER THAN THE TOTAL AGENCY OR SCHOOL POPULATIONS.

THE SOLUTION? REALIST EVALUATION INC. UTILIZES BIG DATA CONTINUOUSLY ON ENTIRE SCHOOL POPULATIONS FROM THE SAMHSA-FUNDED SYSTEM OF CARE EXPANSION IN CHAUTAUQUA AND ROCKLAND COUNTIES IN NEW YORK STATE, AND FROM MANCHESTER CITY COUNCIL IN THE UNITED KINGDOM.

MARCH 4TH 5:15 TO 6:15 PALMA CEIA 3

COME TO OUR DISCUSSION AND DEMONSTRATION!

QUESTIONS: LET’S TALK!
MANSOOR A. F. KAZI, PH.D.
(716) 417-0419 EMAIL: KAZIM@FREDONIA.EDU
Supporting Positive Youth Development: Insights from a Former ‘At-Risk’ Youth, Now a Youth Justice Attorney

Francis “Frankie” Guzman, JD, Director, California Youth Justice Initiative at the National Center for Youth Law, Oakland, CA

Each year in the United States, hundreds of thousands of California children and youth are involved in the child welfare, juvenile, and criminal justice systems. A highly disproportionate number of them are youth of color. All too often, once involved, they are removed from their homes and communities and denied the supports and opportunities they need to heal and grow into successful adults. Those removed from their communities have often suffered significant early-life trauma; but instead of responding to their needs, they get placed into environments like groups homes, juvenile halls, and prisons that ultimately exacerbate the trauma. Drawing on his own experiences with poverty, abuse, and neglect, Guzman will discuss the myriad of obstacles these youth face, the impact on their development and well-being, as well as what supports can help ease youth transitions to their home communities and adulthood.

About the Presenter

Attorney Frankie Guzman is the Director of the California Youth Justice Initiative at the National Center for Youth Law. As a juvenile justice attorney, Frankie is working to eliminate the practice of prosecuting and incarcerating children in California’s adult criminal justice system, reducing incarceration and justice system involvement, and increasing developmentally appropriate alternatives in communities for youth in conflict with the law.

Raised in a poor, mostly immigrant community plagued by drugs and crime, Frankie experienced his parents’ divorce and his family’s subsequent homelessness at age 3, the life-imprisonment of his 16-year-old brother at age 5, and lost numerous friends to violence. At age 15, he was arrested for armed robbery and, on his first offense, was sentenced to serve 15 years in the California Youth Authority. Released on parole after six years, Frankie attended law school and became an expert in juvenile law and policy.

Through partnerships with community organizations and advocacy groups, Guzman has helped lead California’s effort to reduce the number of youth prosecuted as adults and serving time in adult prisons by passing legislation that established Youth Offender Parole Hearings (SB 260, 2013 & SB 261, 2015), reformed Juvenile Transfer Hearings (SB 382, 2015), and eliminated prosecutor’s direct file authority (Prop 57, 2016). In 2018, Frankie worked successfully to eliminate California’s practice of prosecuting 14 and 15 year-olds as adults, prohibit California from arresting and incarcerating children under age 12 in the juvenile system, and secure more than $40 million dollars to expand local youth pre-arrest diversion programs and deliver developmentally-appropriate, culturally-relevant services in underserved communities in California.
Afternoon Keynote Address

2:45 pm - 4:00 pm ~ Bayshore Ballroom

“Business as Usual” Is Not Enough: Engaging and Innovating with Young Adults in Research and Practice

Kathryn Sabella, PhD; Amanda Costa, BS, Transitions to Adulthood Center for Research, Worcester, MA;
Stephanie Sikes-Jones, Healthy Transitions Initiative (TAYLRD), Owensboro, KY; Tyler Clark, Four Rivers Behavioral Health, Paducah, KY

Over the last decade, the field has recognized the benefits of partnering with youth and young adults in the design of mental health services research, policies, and practice. However, providers and researchers continually struggle to successfully engage young adults in treatment, services, and research initiatives, especially young adults from disadvantaged backgrounds who are at the highest risk of poor mental health outcomes (e.g., those who are homeless or at risk of being homeless, those not actively engaged in services). “Business as usual” in treatment services and research methods no longer seems to be enough to engage young adults. To successfully engage young adults in mental health services and research initiatives you need to be willing to shake things up by genuinely partnering with young adults to find innovative ways that can alter “business as usual” and lead to more engagement overall. In this plenary, researchers and practitioners from across the country will provide examples of engaging and innovating with young adults in mental health services and research. The importance of innovative communication and dissemination strategies will also be discussed.

About the Presenters

Kathryn Sabella, PhD, is a Research Instructor within Transitions to Adulthood Center for Research (Transitions ACR) in the Systems and Psychosocial Advances Research Center, Department of Psychiatry. The Transitions ACR conducts rigorous research and knowledge translation activities to promote the full participation in socially valued roles of youth and young adults with serious mental health conditions. Kathryn has designed and implemented several research studies of young adults with mental health conditions that inform, develop, or test evidence-based practices to support their various goals. She is currently the principal investigator of a national longitudinal study of young adults with serious mental health conditions, ages 16-25. She has partnered with young adults with lived experience in various ways throughout her career.

Amanda Costa, BS, is a Project Director at the Transitions to Adulthood Center for Research located at UMass Medical School Department of Psychiatry, Implementation Science and Practice Advances Research Center (iSPARC). Amanda has over eight years of experience providing support on multiple research studies focused on improving the education and employment goals of young adults with lived experience. She also infuses her own lived experience of a mental health condition in her work, serving as Co-Director of the center’s Participatory Action Research (PAR) Initiative, where she educates and trains faculty within UUMS and beyond about partnering with young adults and older adults with mental health conditions in the conduction of research. Amanda is currently pursuing a Master’s in Public Health at UMass Amherst.

Stephanie Sikes-Jones is a young professional with lived experience in Kentucky’s behavioral health and foster care systems. During her time in these systems, she participated in a variety of advisory boards and initiatives to improve human services on a local, state, and national level including Fostering Goodwill, Voices of the Commonwealth, and FosterClub AllStars. In 2015, Stephanie began working with the Healthy Transitions initiative, also known as TAYLRD, in her home state of Kentucky. As an employee, she’s used her voice to make policy changes, develop training, and help support the next generation of young leaders with lived experience in Kentucky. After a short hiatus in national suicide prevention work, Stephanie has returned as a State Level Youth Coordinator for the TAYLRD initiative in Kentucky.

Tyler Clark is a youth peer specialist with lived experience in Kentucky’s behavioral health and the adult justice system. In recovery from substance abuse, Tyler has survived multiple suicide attempts. After going through treatment for his substance abuse Tyler strives to work with youth and young adults in similar situations to what he himself had faced. He began working at the crisis unit at Four Rivers Behavioral Health in Paducah, KY where he was able to speak to those calling the local and international suicide hotline, which is where his drive to do more began. After hearing of TAYLRD and the youth drop-in centers he chose to become a youth peer specialist. Tyler is now the lead youth peer specialist at Four Rivers Behavioral Health and assists in multiple programs such as adolescent ACT, adolescent IOP, IHOPE, IMPACT, partial hospitalization and overseeing the youth drop-in center as well as continuing to work at the crisis unit where his passion began. Tyler continues to advance his career through his pursuit of a college education.
Session 34 Y&YA

10:00 am - 11:30 am
Bayshore 5 ~ 90-Minute Symposium

Innovations in Infusing Transition Age Youth and Young Adults Voice & Leadership in Mental Health Systems

Symposium Chair: Sue Wing, EdM, MSW, LICSW, Massachusetts Department of Mental Health, Tewksbury, MA; Discussant: Alexis Henry, ScD OTR/L, University of Massachusetts Medical School, Shrewsbury, MA

Massachusetts and Utah are both recipients of SAMHSA's Healthy Transitions grant that represent innovative models that effectively engage transition-age youth and young adults (TAYYA) who have “fallen through the cracks” of the mental health system. Incorporating TAYYA voice is a critical component in developing services targeted for TAYYA. In this symposium, we present findings from each state’s local evaluation of how TAYYA voice and leadership are represented and explore considerations for replication.

Innovative Non-Traditional Real World Examples of TAYYA Voice and Leadership in Community Mental Health

Betsy Edes, BA, Massachusetts Department of Mental Health, Lawrence, MA; Adriana Estévez, MEd; Terra Mikalson, LCSW, Justice Resource Institute, Lawrence, MA

This presentation will focus on transition age youth and young adult (TAYYA) voice as a critical component of effectively serving this population. It will provide multiple examples of how TAYYA voice can be incorporated into programs and used in improving mental health systems and services. Additionally, we will explore how drop-in centers provide important opportunities for TAYYA leadership within a community, and the synergy between drop-ins and individual support services.

Challenges and Opportunities of Employing Youth Coordinators in State Systems

Kristin Swenson, PhD; Ming Wang, MSW; Colin Dively, HS Diploma, Utah Department of Human Services, Salt Lake City, UT

When a state system employs a Youth Coordinator, it is often a first-time experience for both parties. It may be the first professional job for the Youth Coordinator and many states have never employed youth with lived experiences. Both sides often feel that the arrangement does not work, but do not know why or what to do. This session discusses strategies for success, including mentoring the Youth Coordinator and preparing states to support the role.

Examples of Youth and Young Adult Voice in Mental Health Services: From Concept to Reality

Betsy Edes, BA; Terra Mikalson, LCSW, Justice Resource Institute, Lawrence, MA; Ming Wang, MSW; Colin Dively, HS Diploma, Utah Department of Human Services, Salt Lake City, UT

In this session, a youth-led video project will be presented as an example of TAYYA voice in action. Attendees will hear from peer and youth in leadership roles, team members, and supervisors who will discuss from their perspectives some of the struggles and success of youth leadership and peer integration. Attendees will have an opportunity to ask questions and participate in a facilitated discussion about various aspects incorporating leadership opportunities into their organization or program.

Session 35 EBP

10:00 am - 11:30 am
Bayshore 6 ~ 90-Minute Symposium


Symposium Chair: Rosalyn Bertram, PhD, Child and Family Evidence-Based Practice Consortium, Kansas City, MO

Successful, sustainable systems change requires readiness, careful selection of practice models, alignment of implementation drivers, and consistent monitoring and response to fidelity and outcome data. In light of the requirements of the 2018 Family First Prevention Services Act, this symposium first presents challenges experienced and strategies applied in the Missouri Children’s Division statewide introduction of new philosophy (Five Domains of Well-Being) and a promising practice (Signs of Safety). For comparison, a regional private child welfare organization, Cornerstones of Care, presents its challenges and strategies in scaling up Solution-Based Casework, an evidence-based practice. Both efforts were challenged by staff turnover and negotiating model adaptations with purveyors. Implementation of both efforts was informed and supported by the University of Missouri-Kansas City National Child Welfare Workforce Institute (NCWWI) University Partnership grant that integrates implementation science and evidence-based practice into its academic and field curricula.
Transforming Compliance-Driven Child Welfare Practice: Lessons from Installation and Initial Implementation as Missouri Scales Up New Philosophy and Practice

Christy Collins, MS, Missouri Children’s Division, Jefferson City, MO

In 2014, Missouri Children's Division initiated a three-year, statewide transformation of philosophy and practice. Signs of Safety, a promising Australian practice was integrated with Five-Domains of Well-Being, to better engage families and natural supports in a solution-focused, strengths-based approach across all services. Systematic adjustments to policies and procedures, staff selection, training, and coaching unfolded amidst typical child welfare staff turnover. Implementation supports, challenges, lessons and early outcomes will be shared.

Selection, Installation and Initial Implementation of Solution-Based Casework Across Programs in a Regional Private Child Welfare Organization

Megan Elsen, MSW, Cornerstones of Care, Kansas City, MO

Anticipating the Family First Prevention Services Act, Cornerstones of Care, a regional private child welfare organization in the Kansas City area, adopted an evidence-based practice, Solution-Based Casework. This session presents installation and initial implementation activities and challenges that required continual negotiations with the purveyor and adjustments to training, coaching, policy, procedure, and use of data in implementation teams. Early fidelity and outcome data will be presented.

Supporting Child Welfare Service Transformation: Implementation Science and Evidence-Based Practice in Academic and Field Curricula

Rosalyn Bertram, PhD, University of Missouri-Kansas City School of Social Work, Kansas City, MO; Shane Wilcutt, MSW, Cornerstones of Care, Olathe, KS

By design, the UMKC NCWWI grant seeks to improve child welfare workforce development while simultaneously transforming academic and field curricula to improve implementation of child welfare services (Bertram, Decker, Gillies, & Choi, 2017). Reflecting implementation science, plan-do-study-act feedback loops inform and refine academic and field curricula innovations. These innovations and feedback loops also support the implementation of public and private child welfare programs, and graduates quickly assume leadership roles (Bertram, Choi, & Elsen, 2018).

Session 36 CW

10:00 am - 10:30 am
Bayshore 7 ~ 30-Minute Paper

Evaluation of the Family Intensive Treatment Program: Child Safety, Placement Stability and Permanency

John Robst, PhD, University of South Florida, Tampa, FL

The Family Intensive Treatment (FIT) team model provides intensive team-based, family-focused, comprehensive services to families in the child welfare system with parental substance use disorders. Among the many goals of FIT related to children are (a) to promote the safety of children in the child welfare system, (b) develop a safe, nurturing and stable living situation for these children, and (c) reduce the number of out-of-home placements. This presentation will examine how well FIT providers are achieving these outcomes.

10:30 am - 11:30 am
Bayshore 7 ~ 60-Minute Discussion

Grounded in Implementation Science: The Development of Evidenced-Informed Interventions to Improve Stability, Permanency, and Well-Being of Youth with Diverse Sexual Orientation, Gender Identity and Expression in Foster Care

Marlene Matarese, PhD, Institute for Innovation & Implementation University of Maryland Baltimore, Baltimore, MD; Elizabeth Greeno, PhD, University of Maryland, Baltimore School of Social Work, Baltimore, MD; Angela Weeks, MSW, Institute for Innovation & Implementation, University of Maryland School of Social Work, Baltimore, MD

This presentation includes lessons learned and findings from a national implementation and intervention research project that is developing, implementing and studying 14 cutting-edge interventions designed to improve stability, permanency, and well-being for youth with diverse sexual orientation, gender identity and expression in foster care. Findings provide a guide for systems to improve services and outcomes for this population. Participants will engage in discussion about implementation science and conducting culturally responsive intervention research within child welfare.
Session 37
10:00 am - 10:30 am BHE
Esplanade 1 ~ 30-Minute Paper
Rapidly Responding To Children’s Crisis, Preventing Hospitalizations and Engaging Families Effectively; The Visiting Nurse Service of NY, Community Mental Health Children’s Mobile Crisis Rapid Response Team
Devon Bandison, MPA; Neil Pessin, PhD, Visiting Nurse Service of New York, New York, NY
This paper will illustrate the effectiveness of the Visiting Nurse Service Children’s Mobile Crisis Rapid Response Team on the reduction of 911 calls and an increase in preventable psychiatric hospitalizations. Using the following tools: Crisis Assessment Tool (CAT), average response time, hospitalizations disposition at/after discharge we expect to show that the implementation of this team has allowed us to not only better engage families in services, but deliver more effective crisis stabilization and treatment which decreases hospitalizations.

10:30 am - 11:00 am BHE
Esplanade 1 ~ 30-Minute Paper
Latino Children of Immigrants’ Perceptions of Citizenship, Immigration Enforcement, and the Threat of Parental Deportation
Lisseth Rojas-Flores, PhD; Jennifer Vaughn, MS; Marissa Nunes, Fuller Graduate School of Psychology, Pasadena, CA; Josi Hwang Koo, Universidad Tecnológica del Perú, Lima, Peru; Christina Zalvana, Azusa Pacific University, Azusa, CA
Our nation’s current sociopolitical environment perpetuates an anti-immigrant climate that may be associated with detrimental short- and long-term developmental impacts upon US-citizen children of immigrants. This paper provides evidence of children of immigrants’ conflated perceptions of law enforcement and immigration enforcement officers, often resulting in heightened fear and worry about parent-child separation. Recommendations for actionable agenda and alternative policy options to effectively address the best interests of citizen children are warranted.

Session 38 FE
10:00 AM – 11:00 AM
Esplanade 2 ~ 60-Minute Discussion
Partnering with Family-Run Organizations to Engage Family Voice in Policy and Practice Change
Malisa Pearson; Millie Sweeney, Family-Run Executive Director Leadership Association (FREDLA), Ellicott City, MD
Caregivers have unique insight into what works for their families. It is critical to engage them in designing, implementing and evaluating services in children’s mental health. Partnering with family-run organizations (FROs) facilitates access to families. FREDLA partnered with FROs to conduct virtual discussion groups on family experiences with antipsychotic medications and family engagement during transition. Using a standard protocol and facilitated online platform was cost-effective and efficient, gathering rich data and recommendations for the field.

11:00 am - 11:30 am
Esplanade 2 ~ 30-Minute Paper
Assessing Support for Family Voices on Committees and Councils: Development of the FAM-VOC Assessment Tool
Malisa Pearson, Family-Run Executive Director Leadership Association (FREDLA), Lansing, MI; Nancy Koroloff, PhD, Portland State University, Portland, OR
This paper will describe the development and testing of the Fam-VOC (Family Voices on Committees), an assessment tool for use by system-level committees, councils, advisory groups and other bodies that make decisions about policy, funding, and delivery of mental health services. The Fam-VOC is a web-based survey with 19 items, arranged around four themes. It can be used for self-assessment and quality improvement around supporting the participation of family members in system-level decision-making.
Session 39 WA
10:00 am - 11:30 am
Esplanade 3 ~ 90-Minute Symposium

Using Data to Support Wraparound Implementation at the Systems, Organization, and Individual Levels

Symposium Chair: Eric Bruns, PhD, University of Washington, Seattle, WA

In light of recent movement towards evidence-based practices (EBPs) in behavioral health, there has been growing emphasis on high-quality implementation. The presentations in this symposium focus on the National Wraparound Implementation Center (NWIC)’s use of data and partnership to support the implementation of Wraparound care coordination at three levels. First, at the state or systems level, we will provide an overview of the NWIC adaptation of the Stages of Implementation Completion (SIC) scale (Saldana & Chamberlain, 2012) and present SIC data on implementation progress and completeness across 12 states supported by NWIC. Second, at the provider organization level, we will discuss NWIC’s Wraparound Provider Organization (WPO) standards, which outline Wraparound implementation steps at the organizational level. Finally, at the individual provider level, we will present results of analyses examining predictors of the positive impact of NWIC training and coaching, using data from the Impact of Training and Technical Assistance (IOTTA) measure.

Assessing State-Level Progress and Completeness of Wraparound Implementation Using a Standardized Measure

Jonathan Olson, PhD; Philip Benjamin, MA; Eric Bruns, PhD; Spencer Hensley, BA, University of Washington, Seattle, WA
Kimberly Estep, PhD, University of Maryland School of Social Work, Baltimore, MD

The National Wraparound Implementation Center (NWIC) has adapted the Stages of Implementation Completion (SIC) scale to assess activities associated with implementing Wraparound care coordination for youth with complex behavioral health needs. We are gathering data from state-level administrators who oversee the coordination of efforts across multiple systems. In this presentation, we will provide an overview of the adaptation process and present preliminary results based on internal coding and interviews with state-level administrators.

Supporting Wraparound Implementation at the Provider Organization Level: How Can We Meet Implementation Standards?

Kimberly Estep, PhD; Kim Coviello, MA; Shannon Robshaw, MSW, University of Maryland, Baltimore, MD

Wraparound presents unique implementation challenges at the provider organization level. It demands that organizations move beyond the walls of a single agency and incorporate family voice and choice in service provision. In addition, it requires support from competent staff, a supportive organizational climate, and effective leadership. In this presentation, we will describe the Wraparound Provider Organization (WPO) implementation standards, which specify key activities that represent a pathway to successful Wraparound installation at the provider organization level.

Impact of Technical Assistance and Training on Systems of Care Implementation

Jonathan Olson, PhD, University of Washington, Seattle, WA; Janet Walker, PhD, Portland State University, Portland, OR; Eric Bruns, PhD, University of Washington, Seattle, WA

This study examined characteristics of technical assistance and training that predict Wraparound practitioners’ perceptions of training impact and implementation practices at the individual provider level. Results indicate that quality of training, availability of follow-up training/coaching, perceived degree to which training content differs from current practice, and personal motivation to change were all significant predictors of implementation outcomes. These results underscore the importance of focusing on the quality, content, and context of TA and training efforts.

Session 40 Y&Y
10:00 am - 10:30 am
Palma Ceia 1 ~ 30-Minute Paper

Amplifying Futures: Young Adult Peers in Adolescent Substance Use Brief Intervention

Kathleen Ferreira, PhD; Rosie Donegan, MA; Kristen Paquette, MPH; Laura Winn, MA; Catriona Wilkey, MPH, MSW, Center for Social Innovation, Needham, MA

Innovative approaches are needed to identify and respond to substance use during adolescence. Project Amp is an extended, four-session brief intervention for low to moderate risk adolescents, delivered by trained young adult peers who are in recovery from substance use. Drawing on best practices and grounded in peer recovery support and prevention frameworks, young peers use their experiential knowledge and skills to deliver a strengths-based and developmentally appropriate early intervention to adolescents.
10:30 am – 11:00 am
Palma Ceia 1 ~ 30-Minute Paper

Lessons from Feasibility Piloting: Refining the Pass Academic Peer Coaching Intervention for College Students with Lived Experience

Laura Golden, BA; Amanda Costa, BS; Maryann Davis, PhD, Transitions to Adulthood Center for Research (Transitions ACR), Shrewsbury, MA

The Peer Academic Supports for Success (PASS) peer coaching intervention has been developed to address the lack of academic supports for college students with mental health conditions with empirical evidence of efficacy. A feasibility pilot of the PASS model was conducted at Boston University during the 2017-18 academic year. Iterative feedback and data collection from the feasibility pilot resulted in refinements to the intervention that will be described.

11:00 am - 11:30 am
Palma Ceia 1 ~ 30-Minute Paper

The Story of Transition Age Services in Muskegon County Michigan

Kelly France, MSW; Derek Bradish, HealthWest, Muskegon, MI

When HealthWest decided to enhance services for transition age youth specifically, Derek Bradish had no idea how this decision would forever change his life. Prepare to be inspired by the significant impact of successful implementation of the Transition to Independence Process (TIP) model in Muskegon County, MI. The recovery story of Derek Bradish is joined with program outcome data to tell the story of why adherence to fidelity measures of the TIP Model works.

Session 41

10:00 am – 10:30 am
Palma Ceia 2 ~ 30-Minute Paper

Recovery High School Outcomes at Twelve Months

D. Paul Moberg, PhD, University of Wisconsin School of Medicine and Public Health, Madison, WI; Andrew J. Finch, PhD, Vanderbilt University, Peabody College, Nashville, TN

Recovery High Schools (RHS) provide recovery support and education for young people with substance use disorders (SUDs). We studied nearly 294 students post-treatment for SUDs; 90% also report a history of mental health specialty services. Comparing students in RHS to students in other settings at 12-month follow-up, there were significant reductions in alcohol and marijuana use and improved educational outcomes. There was a similar reduction in mental health symptoms in both groups.

Session 42 ITRE

10:00 am - 11:30 am
Palma Ceia 2 ~ 60-Minute Paper

Teacher-Child Interaction Training Implementation: Outcomes and Lessons Learned from a Quasi-Experimental Trial

Alexandra Rivas, MPH, Behavioral Science Research Institute, Miami, FL; Christine Hughes Pontier, PhD; Jackie Romillo, LCSW, Citrus Health, Hialeah, FL; Angela Mooss, PhD, Behavioral Science Research Institute, Miami, FL

Citrus Health implemented Teacher-Child Interaction Training (TCIT) in childcare settings in Miami. Results indicated that TCIT positively predicted increases in teacher’s skills, improved children’s behavior, and accounted for positive sense of efficacy among teachers. Using outcome data, a series of minor changes were made to the implementation in year two including additional booster/check-in sessions with teachers and altering the length of the intervention to align with the academic calendar. This process and subsequent outcomes will be presented.

10:00 am - 11:30 am
Palma Ceia 3 ~ 90-Minute Discussion

Implementation Science: Striking the Balance Between Program Fit and Fidelity in Evidence-Based Practice

Enya Vroom, MS; Alexandra Albizu-Jacob, MPH, University of South Florida, Tampa, FL; Kimberly Menendez, MS, Mendez Foundation, Inc., Tampa, FL; Margarita Romo, Farmworkers Self-Help, Inc., Dade City, FL; Jeannie Callahan Willsie, PhD, LMHC, Hillsborough County Department of Children’s Services, Tampa, FL

The session will begin with a didactic presentation focused on the practice of implementation science (IS), followed by an interactive conversation with IS experts and community partners who are responsible for implementing evidence-based practices (EBP) in their organizations. This session aims to establish a general foundation in IS and provide the opportunity for questions and discussion surrounding real-life applications of fidelity, adaptation, and fit as they relate to EBPs and diverse populations.
Session 43
10:00 am - 10:30 am
Palma Ceia 4 ~ 30-Minute Paper
Leadership Qualities that Promote Success of Community-Based Mental Health Interventions
Quynh Tran, BA; Roxann McNeish, PhD, University of South Florida, Tampa, FL
Community-based mental health interventions (CBI’s) are commonly identified as effective means for promoting mental wellbeing. This study uses the findings from an ongoing evaluation of 16 community-based mental health programs that focused on men and boys to examine the leadership qualities that contributed to successful program planning and implementation. Six common leadership characteristics were identified. Efforts supporting the leadership of CBI’s can contribute to more positive outcomes for men and boys as well as others.

10:30 am - 11:30 am
Palma Ceia 4 ~ 60-Minute Discussion
Peer-Run Lens: Innovative Approaches to Research and Data Collection
Khalil Power, CPS; Vesper Moore, CPS; Maegin McDonald, CPS, Central Massachusetts Recovery Learning Community: Zia Young Adult Access Center, Worcester, MA
This presentation examines the role that young adults who identify with public health struggles have in research. In this presentation we will examine the template Zia, a young adult access center in Massachusetts is currently using, and discuss their successes with implementation. We will discuss how to implement research regarding young adults in the future using a peer-run lens.

Session 44 LP
10:00 am - 11:30 am
Garrison Suite ~ 10-Minute Lightning Presentations
Collaborative Problem Solving: Updates on Implementation
J. Stuart Ablon, PhD, Massachusetts General Hospital/Harvard Medical School, Boston, MA
Collaborative Problem Solving (CPS) is a well-known, evidence-based approach for treating children with behavioral challenges. This lightning presentation will provide an update on what implementation of CPS looks like in 2019 and an opportunity for providers working with challenging youth to learn how CPS can be helpful in addressing their needs.

Family Matters: Supporting Permanency Through Adoption Competent Mental Health Services
Emily Smith Goering, MSW, Center for Adoption Support and Education, Burtonville, MD
Children and youth who are moving toward or have achieved adoption often have diverse unmet mental health needs. This presentation will highlight the need for adoption mental health competency training for child welfare and mental health professionals and present the state-of-the-art online training developed by the National Adoption Competency Mental Health Training Initiative (NTI). The evaluation found significant knowledge gains on all core competencies and impact on practice both during the training and three months post completion.

Exploration of How Youth Drop-In Centers Can Address Housing Needs of Young Adults
William McPheeters, Centerstone, Frankfort, KY
This lightning presentation will describe how a youth drop-in center addressed the housing needs of young people by developing strategic local partnerships with community organizations. The presentation will highlight the preliminary analysis of changes in housing outcomes, from baseline to six months. Preliminary results show that there are positive changes in housing conditions at six months.

Leveraging Supervision to Improve Implementation of Evidence-Based Practice in Community Mental Health
Siena Tugendrajch, MA, University of Missouri, Columbia, MO
Supervision can support the implementation of quality care, including evidence-based practices. Unfortunately, supervision process, content, and outcomes are largely understudied across clinical settings, including community mental health. Furthermore, available data indicate that supervision in community health settings may focus on billing or administrative issues to the neglect of treatment process and content. We provide recommendations for future research to understand how to leverage supervision to facilitate the implementation of evidence-based practices in community settings.

Malcolm Gaines, PsyD, Safe & Sound, San Francisco, CA
Safe & Sound will present its innovative, community-based child abuse prevention model. The model was developed in response to the need for integrating behavioral health treatment with other services that promote protective factors that mitigate risk and prevent abuse. The presentation will describe a multi-year analysis of outcome data and show how Safe & Sound continues to use practice-based evidence to improve the model.
Condensed Mindfulness-Based Intervention Among At-Risk Youth in Residential Emergency Shelters

Jessica Gordon, PhD, University of South Florida, Tampa, FL.

Over a 12-week period, youth residing in an emergency shelter voluntarily participated in mindfulness-based programming facilitated by a trained mindfulness practitioner once a week for two hours. Youth in crisis reported an increase in beliefs of feeling wanted and social-emotional self-regulation in response to mindfulness training. However, beliefs of feeling worthy of love did not improve, warranting further study and intervention.

Using Person-Centered Approaches to Understand Complex Profiles of Youth in Public Mental Health Settings

F. Tony Bonadio, PhD, University of Maryland School of Social Work, Baltimore, MD

To understand which interventions and services work best for whom, treatment research must account for the complex profiles of youth being served. The current study uses a person-centered approach, latent profile analysis, to identify profiles of youth involved in the public mental health system based on routinely collected assessment data. Five distinct profiles were identified. The process of how these profiles were identified and the impact on future practice will be discussed.

Elevating Youth Advocates to Young Professionals: The Next Evolution

Lacy Dicharry, MS, MBA, Elevate Young Professionals, Baton Rouge, LA

Transition happens for all young adults, and youth entering the workforce are no exception. This lightning presentation provides an overview of current challenges and solutions in supporting the young adult lived-expertise workforce, an overview of the transition from youth advocate to young professional, and career pathways for utilizing lived-experience.

Research Luncheon

Bayshore Ballroom
11:30 am - 1:15 pm

Conference attendees are welcome to enjoy lunch on us! A buffet-style meal will be provided allowing opportunities for networking with fellow attendees and presenters.

Session 45 Y&YA

1:30 pm - 2:30 pm
Bayshore 5 ~ 60-Minute Symposium

Embedding Youth Voices in Systems and Policy Changes

Symposium Chair: Nia West-Bey, PhD, Center for the Law and Social Policy, Washington, DC; Discussant: Isha Weerasinghe, MSc, Center for the Law and Social Policy, Washington, DC

The Center for Law and Social Policy (CLASP) is embarking on a multi-year effort to seize state and local policy opportunities to improve behavioral health outcomes for low-income youth and young adults. A wide variety of research, as well as perspectives from youth leaders, advocates, expert practitioners, and policymakers, underline the enormous need to focus on providing improved access to mental health and support services for low-income youth and young adults. CLASP believes that centering the voices of youth and young adults in identifying challenges and barriers, as well as generating solutions, is critical to developing effective policy recommendations.

Behind the Asterisk: Perspectives on Young Adult Mental Health from “Small and Hard to Reach” Communities

Nia West-Bey, PhD; Marlen Mendoza, Center for Law and Social Policy, Washington, DC

Learning about small and hard to reach populations presents a challenge for researchers and policymakers. Sometimes called “asterisk groups” because their data is replaced with an *, their numbers are often too small in nationally representative samples to be considered reliable. Behind the asterisk are hundreds of thousands of young adults with unique perspectives on mental health. This presentation will share findings from focus groups with Native, rural, homeless, AA&NHPI, and LGBTQ youth.

Intercepting the Former Perception of Parental Refinement

Clelie Choute, Raw Uncut Woman, Detroit, MI

Raw Uncut Woman, an organization based in Detroit, MI, has defined its objective to bring cognizance of perinatal and post-natal anxieties to present day society. Its work ranges from eliminating barriers and stigmas to overcoming postpartum obstacles, to providing resources and aid for young women of all walks of life. Using analytical research and interpersonal communication, we will present the variety of adverse quandaries young mothers in our community are currently facing.
**Session 46 EBP**

**1:30 pm - 2:30 pm**

Bayshore 6 ~ 60-Minute Symposium

**Listening to Voices, Enacting Vision: Practice-Based Research and Data-Informed Policy Decisions in Hawai'i’s System of Care**

*Symposium Chair: Charles Mueller, PhD, University of Hawaii at Mānoa, Honolulu, HI; Discussant: Eric Daleiden, PhD, PracticeWise, LLC, Satellite Beach, FL*

This symposium reviews a 15-year research, service and learning collaborative between the University of Hawaii Department of Psychology and the State of Hawaii Child and Adolescent Mental Health Division (CAMHD). We will (a) outline the principles that have guided decision-making within this system, particularly regarding the collection and use of multi-informant locally aggregated data, (b) summarize selected findings resulting from this collaboration, and (c) describe several examples of the practical application of these findings within the system toward the goal of improving the quality of service delivery.

**Leveraging Multiple Voices to Advance Practice-Based Research in a System of Care**

*Matt Milette-Winfree, PhD, University of Hawaii at Mānoa, Honolulu, HI; Puanani Hee, PhD, State of Hawaii Child and Adolescent Mental Health Division, Honolulu, HI; Charles Mueller, PhD, University of Hawai'i at Mānoa, Honolulu, HI*

Fifteen years of collaborative scientific inquiry has underscored the value of aggregate multi-informant data in understanding youth public mental health treatment. This talk will summarize practice-based research within a state system of care, beginning with the development and implementation of data tracking measures and then describing findings stemming from their use, including those that speak to therapist decision-making, intervention effectiveness, and the trajectory of treatment progress (with special attention to identifiable risk factors for treatment failure).

**Using Local Data to Build Digital Decision-Making Tools and Policies**

*Trina Orimoto, PhD; Kelsie Okamura, PhD; Max Sender State of Hawaii Child and Adolescent Mental Health Division, Honolulu, HI; Jonathan Ahuna, University of Hawaii at Mānoa, Honolulu, HI; David Jackson, PhD, State of Hawaii Child and Adolescent Mental Health Division, Honolulu, HI*

Practice-based evidence relies on locally aggregated client-specific historical data from families, therapists, and stakeholders (Daleiden & Chorpita, 2005). Such data can be leveraged to inform clinical practices and system policies, particularly with the advent of electronic health records. We describe how findings from local aggregate data studies within a system have advanced local knowledge, improved workflows and informed the structure of a new electronic case management system. Examples of workflows and dashboards will be shown.

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**Session 47 CW**

**1:30 pm - 2:00 pm**

Bayshore 7 ~ 30-Minute Paper


*Carla Stover, PhD, Yale University School of Medicine, New Haven, CT; Rebecca Beebe, PhD; Susan DiVietro, PhD, Connecticut Children's Medical Center, Hartford, CT; Linda Madigan, LMSW, Connecticut Department of Children and Families, Hartford, CT*

The Connecticut Department of Children and Families is engaged in innovative efforts to meet the unique needs of families impacted by intimate partner violence (IPV). This paper will describe the child welfare system's response that was developed and implemented across the state of Connecticut to address intimate partner violence. IPV-FAIR is a comprehensive, individually tailored family intervention designed to reduce violence and improve outcomes for child welfare-involved families where IPV is present. Key elements of the IPV-FAIR intervention will be shared.

**Improving Outcomes for LGBTQ+ Youth in Child Welfare Vis-A-Vis Direct Services and Systems-Change Interventions: An Examination of The Los Angeles LGBT Center's Federal RISE Project**

*America Islas, LMFT; Ariel Bustamante, Los Angeles LGBT Center, Los Angeles, CA*

In 2009, The Los Angeles LGBT Center launched the RISE (Recognize Intervene Support Empower) Project made possible by the Children’s Bureau Permanency Innovations Initiative. Through that initial 5-year demonstration project, RISE aimed to reduce the number of LGBTQ youth in long-term foster care and improve permanency. The Project’s intervention consisted of two components: (1) providing Care Coordination Team (CCT) services for a small group of LGBTQ+ children and youth involved in the child welfare system, designed to increase their permanency and well-being outcomes at the child and family level; and (2) facilitating change at the organizational level of LA’s child welfare system. An Outreach and Relationship Building (ORB) program was designed to develop more competent and affirming professional and caregiving environments using LGBTQ+ educational materials and coaching. This presentation will explore the design and implementation of the CCT services, as well as the parallel ORB services including methodology, evaluation, and outcomes.
Session 48 **BHE**  
1:30 pm - 2:30 pm  
**Esplanade 1 ~ 60-Minute Discussion**  
**Connecticut’s Data-Driven Approach to Eliminating Health Disparities: Building Statewide Capacity and Data Infrastructures for Addressing Disparities and Disproportionalities**

*Jeana Bracey, PhD, The Child Health and Development Institute, Farmington, CT; Tim Marshall, LCSW, Connecticut Department of Children and Families, Hartford, CT; Michelle Riordan-Nold, PhD, Connecticut Data Collaborative, Hartford, CT; Steven Girelli, PhD, Klingberg Family Centers, New Britain, CT; Cecilia Frometa Singh, PhD, Yale University School of Medicine, New Haven, CT*

This interactive discussion hour will share strategies for partnering with child-serving organizations to incorporate enhanced planning, development, and support for the integration of the National Culturally and Linguistically Appropriate Services (CLAS) standards into service delivery. Facilitators representing the statewide data team, CLAS consultants, a provider agency, and a state department partner will use a case study approach to highlight effective strategies and lessons learned in this data-driven, collaborative effort to impact health equity in one community.

Session 49

1:30 pm - 2:00 pm  
**Esplanade 2 ~ 30-Minute Paper**  
**Mental Illness Stigma and Suicidality Among Young Adults**

*Kristin Kosyluk, PhD, University of South Florida, Tampa, FL; Kyaiken Conner, PhD, University of South Florida, Tampa, FL; Victoria Jeffries, MA, MSPH, Simon Fraser University, Burnaby, BC, Canada; Marc Karver, PhD, University of South Florida, Tampa, FL*

Research has demonstrated associations between trait and state factors of the individual (i.e. mental health, substance use, and demographics) and suicide risk. However, fewer studies have explored the contribution of environmental factors. We sought to examine the contribution of mental illness stigma to suicidality. Utilizing a dataset of college student mental health we found that stigma predicted suicidality above and beyond more typical risk factors. Implications for stigma interventions to reduce suicidality will be discussed.

2:00 pm - 2:30 pm  
**Esplanade 2 ~ 30-Minute Paper**  
**The Implementation and Impact of Eye Movement Desensitization and Reprocessing (EMDR) Within an Urban Child Behavioral Health Setting: A Four-Year Evaluation of Treatment**

*Joy Kaufman, PhD, Yale University, New Haven, CT; Jennifer Lusa, LCSW, PhD; Jennifer Jaffe, LCSW, The Village for Families & Children, Hartford, CT; Melissa Whitson, PhD, University of New Haven, West Haven, CT*

This paper will focus on the implementation of EMDR by a nonprofit community mental health agency over a four year period. The target population served was low-income children and youth, ages 6 to 18, who were exposed to at least one traumatic event and/or prolonged traumatic stress; with a diagnosable disorder. The paper will highlight the training process, a rationale for client selection, notable treatment gains, and the EMDR implementation process.

Session 50

1:30 pm - 2:30 pm  
**Esplanade 3 ~ 60-Minute Symposium**  
**The Children’s Mental Health Campaign: How a Large Statewide Network of Mental Health Providers, Advocates, and Families Can Create Lasting Change**

*Symposium Chair: Jacob White, MD, Boston Children's Hospital, Boston, MA*

In 2006, Boston Children's Hospital (BCH) and the Massachusetts Society for the Prevention of Cruelty to Children (MSPCC) produced a white paper detailing the challenges and proposed solutions to the inadequate Massachusetts children’s mental health care system. Joined by the Parent-Professional Advocacy League (PPAL), Health Care for All (HCFA), and Health Law Advocates (HLA), the Children's Mental Health Campaign (CMHC) was established as an advocacy coalition that worked to pass “An Act Relative to Children's Mental Health,” in 2008. Over the past 12 years, the CMHC has continued to work together to ensure that all children in Massachusetts have access to resources to prevent, diagnose, and treat mental health issues in a timely, effective and compassionate way. In this symposium, we will reflect on CMHC work and discuss how to bring a coalition together to effectively make change for children and youth affected by mental health issues and their families.
A History of the Children’s Mental Health Campaign: How a Coalition Can Get Things Done
Nancy Allen Scannell, Massachusetts Society for the Prevention of Cruelty to Children, Jamaica Plain, MA
Nancy Allen Scannell, Director of External Affairs and the MSPCC will reflect on what has helped the Children’s Mental Health Campaign to achieve policy wins in the name of children’s mental health for over a decade.

Using Family Voice to Identify Critical Issues, to Lend Power to the Fight, and to Empower Parents, Caregivers, and Children to Make Change
Lisa Lambert, Parent/Professional Advocacy League, Boston, MA
Lisa Lambert will reflect on her leadership in the CMHC, and the critical role that families and caregivers play in an advocacy coalition.

A Coalition Model: Putting Kids and Families First
Kate Ginnis, MSW, MPH, Boston Children’s Hospital, Boston, MA
Organizations have individual missions and goals. This presentation will focus on how individual organizations can come together around a unified advocacy agenda to make improvements that will impact children’s mental health.

Session 51 Y&YA
1:30 pm - 2:00 pm
Palma Ceia 1 ~ 30-Minute Paper
Predicting Emerging Adults at Risk for Disengaging from the Behavioral Health Service System
Christopher Bory, PsyD; Robert Plant, PhD, Beacon Health Options, Rocky Hill, CT
Research indicates that emerging adults with behavioral health challenges drop in service utilization as they transition from the child and adolescent to the adult behavioral health system. This presentation will describe an innovative approach in utilizing Medicaid claims to predict youth at risk for dropping out of the service system when a behavioral health need is indicated. Methods, results, and clinical application of the predictive models will also be presented.

2:00 pm - 2:30 pm
Palma Ceia 1 ~ 30-Minute Paper
Unpacking Transition-Age Youth & Young Adult Multidisciplinary Service Engagement: Examining the Relationship Between Social Support and Service Enrollment Length
Vanessa Klodnick, PhD, LCSW, Thresholds Youth & Young Adult Services & the University of Texas at Austin, Austin, TX; Rebecca Johnson, LCPC, MA; Marc Fagan, PsyD, Thresholds, Chicago, IL; Alex Schwank, MPH, City of Milwaukee Health Department, Milwaukee, WI
Transition-age youth are at risk for premature mental health service disengagement. Examination of associations between characteristics, life experiences, and treatment stays is key. Among 18-26-year-olds (n=121) enrolled in multidisciplinary team-based services, ANOVA and multivariate regression analyses reveal that non-family social support (e.g., friends, peers) and psychiatric hospitalizations (while enrolled) are significantly associated with longer treatment engagement. Findings speak to the complexity of engagement and the importance of assessing and boosting informal social network ties.

Session 52
1:30 pm - 2:30 pm
Palma Ceia 2 ~ 60-Minute Symposium
School-Based Mental Health Programs in Georgia: Research, Practice, and Policy
Symposium Chair: Ann DiGirolamo, PhD, Georgia Health Policy Center, Georgia State University, Atlanta, GA; Discussant: Layla Fitzgerald, MS, Department of Behavioral Health and Developmental Disabilities, Atlanta, GA
One in five children under 18 has a diagnosable mental health (MH) disorder. An estimated 75 - 80% of children requiring treatment do not receive it. School-based mental health (SBMH) programs provide a continuum of mental health services to students and families in schools. Georgia has prioritized SBMH through legislation, policy, and state and local programs. This symposium aggregates information on state and local SBMH programs and policies in Georgia. Presentations will examine state and local program, evaluation, and programming related to SBMH. Georgia is prioritizing children’s mental health and investing significant funds to expand services. Evaluation data suggest that SBMH programs are increasing access to services, with positive impacts on educational outcomes and school climate. Findings demonstrate the importance of linking research, policy, and practice to implement SBMH effectively. Evidence illustrates the importance of addressing mental health in schools and early childcare settings.
State-Level Policy, Legislation, and Programming Related to School-Based Mental Health (SBMH)

Rebecca Blanton, MEd, Georgia Department of Education, Atlanta, GA

In the past five years, Georgia has promoted policy, legislation, programs, and funding to improve children's mental health. The Georgia State Assembly recently passed a variety of legislation promoting SBMH. The 2017 Commission on Children’s Mental Health initiated targeted funding of children’s mental health programs. For example, funding has been allocated to support the expansion of the Georgia Apex Program, which currently has placed mental health providers in 400+ schools since 2015.

Research and Evaluation of School-Based Mental Health (SBMH) Efforts

Dimple Desai, MSW; Hailey Reid, MPH, Georgia Health Policy Center, Georgia State University, Atlanta, GA

Research and evaluation inform SBMH implementation in Georgia and provide evidence to inform policy and practice. Data reporting helps to define growth and reach of services across the state. Publicly available data from the state demonstrate improved outcomes associated with SBMH programs such as decreased absences and discipline incidents and improved school climate. Collectively, these programs help to increase access to services and enable early detection of mental health needs.

Local/Organizational Policy Implications for School-Based Mental Health (SBMH) Programs

Angela Snyder, PhD, Georgia Health Policy Center, Georgia State University, Atlanta, GA; Jennifer Packard, MS, CHRIS 180, Atlanta, GA

School-based mental health initiatives aimed at improving children's social-emotional development and functioning, resourced by federal, state, and foundation funding, have informed local policies and programs. These local initiatives have included screening and assessment strategies, trauma-informed models of care, and cross-disciplinary workforce development between early care, education, and health sectors. Policies that may facilitate implementation success include embedding staff within schools, providing intensive coaching models, and allowing flexibility in program delivery and utilization.

Session 53

1:30 pm – 2:30 pm

Palma Ceia 3 – 60-Minute Symposium

Addressing the Needs of Commercially Sexually Exploited Children: Lessons Learned in Research and Practice

Symposium Chair: Melissa Johnson, MA, MPH, University of South Florida, Tampa, FL; Discussant: Amy Farrell, PhD, Northeastern University, Boston, MA

Awareness of the commercial sexual exploitation of children (CSEC) has grown considerably, but empirical research on effective approaches to address the needs of this population is limited. This symposium presents findings from five years of clinical practice and research with commercially sexually exploited children. Three papers will be presented, highlighting lessons learned about best practices. The first draws on clinical experience to examine what it means to provide trauma-informed care when working with sexually exploited children. The second paper presents research exploring relationships among youth strengths, trauma, and behavioral health outcomes among CSE youth. Findings show that youth strengths may mediate the relationship between trauma experiences and youth outcomes, lending support for a strengths-based treatment approach. The final paper explores youth perspectives regarding how services and professionals respond to their needs, emphasizing the importance of empowering youth voice and agency.

Providing Trauma-Informed Care to Commercially Sexually Exploited Children

Kimberly McGrath, PsyD, Citrus Health Network, Hialeah, FL

This paper draws on clinical experience to examine what it means to provide trauma-informed care when working with sexually exploited children. The presentation will focus on building an understanding of exploited youth as suffering from complex trauma, and implications for treatment. Key components of effective treatment approaches will be described, providing concrete examples of what trauma-informed care looks like with this population. Lessons learned from the CHANCE program and recommendations for best practice will be shared.

Youth Strengths as Mediators of Trauma: Understanding the Importance of a Strengths-Based Approach in Working with Exploited Youth

Monica Landers, MA, MSW, University of South Florida, Tampa, FL

This paper presents research exploring relationships among youth strengths, trauma, and behavioral health outcomes among commercially sexually exploited (CSE) youth, lending support for a strengths-based treatment approach. Results of this study indicate that youth with a greater number of adverse childhood experiences (ACEs) had a greater number of risk behaviors and behavioral health needs. When youth strengths were examined, however, findings show that peer relationships and relationship permanence partially mediate the relationship between ACE scores and youth outcomes.
No One Wants to Hear My Story – Engaging the Perspectives of Exploited Youth to Better Meet their Needs

Melissa Johnson, MA, MPH; Sophie James, BA,
University of South Florida, Tampa, FL

This paper explores youth perspectives regarding how services and professionals respond to their needs. Findings from interviews conducted with youth receiving specialized services for commercial sexual exploitation of children (CSEC) victims will be presented, highlighting the need to encourage and prioritize youth voices. The data suggests that many youth feel silenced and marginalized by the professionals and service systems they encounter, and such experiences may negatively impact their recovery process. This study supports the need for services to empower exploited youth.

Session 54
1:30 pm - 2:00 pm
Palma Ceia 4 ~ 30-Minute Paper

Attachment to Parents and Depression During Adolescence

Svetlana Yampolskaya, PhD; Tom Massey, PhD; Connie Walker-Egea, PhD,
University of South Florida, Tampa, FL

This study examined the relationship between adolescent depression and three dimensions of attachment to parents including trust, communication, and non-alienation. Adolescent’s trust in the availability and sensitivity of an attachment figure and lower levels of alienation from a parent significantly contribute to youth well-being and are associated with decreased chances of having depressive symptoms including suicidal ideation. Implications of the findings will be discussed.

2:00 pm - 2:30 pm
Palma Ceia 4 ~ 30-Minute Paper

Perception of Personal Change Among Young Adults Experiencing a First Episode Psychosis in the Context of a Coordinated Service Care Program: Findings from the MHBG 10 Percent Set Aside National Evaluation

Tamara Daley, PhD, Westat, Durham, NC; Preethy George, PhD; Abram Rosenblatt, PhD, Westat, Rockville, MA

A ten percent set aside in the Mental Health Block Grant (MHBG 10%) funds aspects of programming for sites serving the approximately 100,000 young people nationally who experience first episode psychosis (FEP) each year. This presentation includes data from the MHBG Ten Percent Set Aside Study and focuses on client outcomes and youth perceptions of how they have changed since receiving FEP services.

Session 55 ITRE
1:30 pm - 2:00 pm
Garrison Suite ~ 30-Minute Paper

A Behavioral Health Evaluation of Hispanic Youth in Rural Communities

Lacey Tucker, BS; Rebecca Liller, BS, University of South Florida, Tampa, FL; Margarita Romo, Honor Doctorate, Farmworkers Self-Help Inc., Dade City, FL; Tom Massey, PhD; Bruce Levin, PhD; Ercilia Calcano, MPH; Enya Vroom, MS, University of South Florida, Tampa, FL

Hispanic youth are an underrepresented population in the United States regarding the utilization of behavioral health services. Given that many minority groups, including Hispanics, reside in rural communities, it is important to identify and understand their unique needs to better inform behavioral health service agency providers. The objective of this study was to identify the challenges and service needs of youth in a rural Florida community through a qualitative needs assessment.

2:00 pm - 2:30 pm
Garrison Suite ~ 30-Minute Paper

Voices in Foster Care: A Peer-Driven Perspective on Successful Development of Life-Skills Among Transition-Age Youth

John Martin, BA; Renee Wallace, BS; Donna Burton, PhD; Tom Massey, PhD, University of South Florida, Tampa, FL; Jeannie Willisie, PhD, LMHC, Hillsborough County Department of Children’s Services, Tampa, FL

Transition-age youth face a host of barriers to successful transitions into adulthood. Foster care, while acting as a forced placement, may decrease an individual’s autonomy and decision making. In-depth interviews were conducted with residential and aged-out youth to explore interest in gaining life-skills and levels of self-determination. This study looks to incorporate concepts from youth-informed practices to develop a promising method for delivering life-skills training to youth in the foster care system.

2:30 pm - 2:45 pm
Networking Break
“Business as Usual” Is Not Enough: Engaging and Innovating with Young Adults in Research and Practice

Kathryn Sabella, PhD; Amanda Costa, BS, Transitions to Adulthood Center for Research, Worcester, MA; Stephanie Sikes-Jones, Healthy Transitions Initiative (TAYLRD), Owensboro, KY; Tyler Clark, Four Rivers Behavioral Health, Paducah, KY

Over the last decade, the field has recognized the benefits of partnering with youth and young adults in the design of mental health services research, policies, and practice. However, providers and researchers continually struggle to successfully engage young adults in treatment, services, and research initiatives, especially young adults from disadvantaged backgrounds who are at the highest risk of poor mental health outcomes (e.g., those who are homeless or at risk of being homeless, those not actively engaged in services). “Business as usual” in treatment services and research methods no longer seems to be enough to engage young adults. To successfully engage young adults in mental health services and research initiatives you need to be willing to shake things up by genuinely partnering with young adults to find innovative ways that can alter “business as usual” and lead to more engagement overall. In this plenary, researchers and practitioners from across the country will provide examples of engaging and innovating with young adults in mental health services and research. The importance of innovative communication and dissemination strategies will also be discussed.

Results of a National Delphi Study Prioritizing Child-Adult Mental Health Care Transitions with Youth as Co-Investigators

Kristin Cleverley, RN, PhD, CPMHN, University of Toronto and CAMH, Toronto, ON, Canada; Emma McCann, Centre for Addiction and Mental Health, Toronto, ON, Canada

Delphi’s are online surveys designed to achieve consensus among experts. This method has been used in mental health research, particularly with a focus on engaging patients as experts. There is a widely acknowledged implementation gap regarding evidence-based interventions. This paper uses data and materials from a survey of 254 transition service providers’ training needs and preferences. Older non-peer providers reported greater needs for training in understanding youth cultures and using technology to communicate with youth. Younger peer providers expressed preferences for youth-led training, participation in learning communities, and on-the-job coaching. Qualitative responses highlighted training needs for supporting specific underserved populations: youth of color, LGBTQ youth, and youth with co-occurring disorders.

Federal Programs Designed to Support Marginalized Youth in the Transition to Adulthood: Evaluating Their Fit with Transition Needs

Ashley Palmer, MSW, University of Kansas, Lawrence, KS; Sarah Narendorf, PhD, University of Houston, Houston, TX

This study evaluated federal policies designed to support marginalized youth in achieving a successful transition to adulthood through programming that spans late adolescence into young adulthood. Eight federal programs fit inclusion criteria. Chambers’ (2000) policy analysis framework guided program analyzes, and the TIP model transition domains framed the assessment of how program elements fit with primary transition domains. Findings and policy implications will be presented.
criteria, program fidelity characteristics, including source, type, and frequency of use were coded. Characteristics of the available fidelity measures will be presented, and strengths and weaknesses discussed.

4:45 pm - 5:15 pm
Bayshore 6 ~ 30-Minute Paper
**Use of Data and Collaborative Problem Solving to Improve Service Delivery and Response at a Statewide Child Welfare Hotline**
Charlotte Vieira, MPH; Robert Franks, PhD; Christopher Bellonci, MD, DFAACAP; Rich Young, Judge Baker Children's Center, Boston, MA

This presentation will describe a two-year quality improvement initiative to reform service delivery at a statewide 24-hour child welfare hotline. Methods focus on the use of call system data to inform and promote continuous quality improvement with participation by diverse stakeholders. Results from the initiative include a 78% reduction in average wait time for callers. Findings emphasize the benefit of data utilization and engagement of stakeholders to improve complex service systems and are widely applicable.

5:15 pm - 5:45 pm
Bayshore 6 ~ 30-Minute Paper
**Integrating Evidence-Based Practices into an Early Childhood Mental Health Network: A Dynamic Approach to Strengthening the Resilience of Young Children and Families**
Fatima Zahra Kadik, MA; Shirley Berger, DrPH, MPH, MA; Janice Okeke, MPH, New York City Department of Health and Mental Hygiene, New York, NY

This presentation focuses on the workforce development, effective implementation, and evaluation of evidence-based practices (EBPs) within an early childhood mental health network in a large urban setting. It describes a multi-year and dynamic process of training service providers in appropriate EBPs, such as Child-Parent Psychotherapy and Triple P Positive Parenting Program. Participants will learn strategies to sustain EBPs and use data to improve outcomes at the practice level and the child/family level.

Session 58
4:15 pm - 4:45 pm
Bayshore 7 ~ 30-Minute Paper
**Treatment Effects of Parent-Child Focused Evidence-Based Programs (EBPs) on Problem Severity and Functioning Among Children and Adolescents with Disruptive Behavior**
Sarah Vidal, PhD, Westat, Rockville, MD; Christian Connell, Pennsylvania State University, University Park, PA

This study examined the treatment effects of manualized parent-child focused EBPs on functioning and problem severity among a statewide sample of children referred to outpatient services for serious and persistent disruptive behavior. Children who received parent-child focused EBPs showed a more significant greater reduction in problem severity, but not functioning, compared to the comparison group. Parent-child focused EBPs may serve as an effective remedy that is less restrictive and more conducive to the healthy development of children and adolescents.

4:45 pm - 5:45 pm
Bayshore 7 ~ 60-Minute Symposium
**Outcomes, Networks, and Services, What’s the Connection?: Findings from The Children’s Mental Health Initiative National Evaluation**
Symposium Chair: Abram Rosenblatt, Westat, Rockville, MD; Discussant: Beth Stroul, Reston, VA

This symposium features three presentations describing findings from the SAMHSA-funded Children's Mental Health Initiative (CMHI) National System of Care Expansion Evaluation. CMHI provides federal support for the development of systems and supports for children and youth with serious emotional disturbances and their families based on the System of Care approach (Huang et al., 2005; Stroul, Blau and Friedman, 2010). Systems of Care involve multiple child and family serving agencies collaborating to provide an array of community-based, family-driven, youth-guided, culturally and linguistically appropriate services and supports for children, youth, young adults and their families. This presentation will provide findings from the National Evaluation of grantees funded between 2013 and 2017.

**Children’s Mental Health Initiative (CMHI) National System of Care Expansion Evaluation: Child and Family Outcomes**
Abram Rosenblatt, Westat, Rockville, MD; Brianne Maselli, Youth MOVE National, Decorah, IA

This presentation offers findings from the Child and Family Outcomes study conducted with the children, youth and families served by system of care grantees. Analyses focus on the population served by grantees, the types of services provided, and the improvements in mental, emotional, and behavioral health of those served.
Session 59

4:15 pm - 4:45 pm
Esplanade 1 ~ 30-Minute Paper

An Evaluation of Georgia’s Recovery Support Clubhouses’ Impact on Substance Use and Mental Health Outcomes Among Youth in Recovery

Susan McLaren, MPH; Colleen Smith, MSW; Jumanne Lee, MPH, Georgia Health Policy Center, Atlanta, GA; Kristal Davidson, MS, Georgia Department of Behavioral Health and Developmental Disabilities, Atlanta, GA

To address substance use among youth, the Georgia Department of Behavioral Health and Developmental Disabilities Office of Addictive Disease (DBHDD) supports nine Recovery Support Clubhouse programs. Clubhouses provide comprehensive substance use recovery support designed to engage adolescents and their families in their recovery. To assess model success and inform program improvement opportunities, the DBHDD partnered with the Center of Excellence for Children’s Behavioral Health (COE) to implement an evaluation of the program.

Session 60

4:15 pm - 4:45 pm
Esplanade 2 ~ 30-Minute Paper

Increased Youth Engagement in Youth-Serving Organizations: The Validation of the Organizational Readiness Tool for Youth-Adult Partnerships

Corliss Outley, PhD; Gayle Gabriel, PhD, Texas A&M University, College Station, TX

This session will describe the development and validation of the Organizational Readiness Tool for Youth-Adult Partnerships (ORAYAP), an authentic, organizational self-assessment that provides organizations with a practical tool for assessing an organization’s capacity to support the development of youth-adult partnerships. The tool is being used in a project involving collaboration between several state agencies, two universities, an extension service, and multiple youth-serving organizations.
Session 61 WA

4:15 pm - 4:45 pm
Esplanade 3 ~ 30-Minute Paper

**Adapting Wraparound for Older Youth and Young Adults**

Janet Walker, PhD, Portland State University, Portland, OR

Many providers are making changes to their Wraparound practice so they can be more successful in engaging and retaining older youth and young adults, and in meeting their needs. However, it is unclear exactly what sort of adaptations they are making and how systematic the process of adaptation is. This presentation will describe findings from a qualitative study exploring this topic and discuss the implications of the findings.

4:45 pm - 5:15 pm
Esplanade 3 ~ 30-Minute Discussion

**Building Strong Collaboration Between Primary Healthcare and Children’s Mental Health Services: The Families First Model**

Michelle Whalen; Joanna Matthews, Reach Out Centre for Kids, Burlington, ON, Canada

In 2013 the Families First pilot launched in Ontario. This innovative program aimed to improve positive outcomes in complex children’s mental health cases. It promised to create a bridge between the fragmented primary health care and children's mental health systems. By utilizing both the Wraparound and Peer Support models, community champions believed that the program could improve the social determinants of health, advocate for families across systems, improve family capacity, and become a flagship for care.

5:15 pm - 5:45 pm
Esplanade 3 ~ 30-Minute Paper

**Wraparound Implementation Using the Innovation of Health Habitus**

Helen-Maria Lekas, PhD; Crystal Fuller Lewis, PhD, Nathan Kline Institute for Psychiatric Research & Columbia University, Orangeburg, NY; Joanne E. Trinkle, MSW, New York State System of Care, Division of Integrated Community Services for Children & Families, Albany, NY; Daphnne Brown, Families Together NYS, Albany, NY

Health Habitus is the set of tendencies we develop to address our mental and physical wellbeing that shapes our health behaviors and lifestyle. Health behaviors are developed by the interplay between the choices we make and the structural opportunities/constraints we encounter called health habitus. We will discuss how to elicit a person’s health habitus; how health habitus influences the health behaviors of vulnerable patients; and how we have integrated health habitus into the New York State Systems of Care and High Fidelity Wraparound Youth and Family Peer Advocates’ service delivery to improve health outcomes for children and families.

Session 62 Y&YA

4:15 pm - 4:45 pm
Palma Ceia 1 ~ 30-Minute Paper

**Methodological Innovations in Research on Services for Youth and Young Adults**

Marsha Ellison, PhD, University of Massachusetts Medical School, Shrewsbury, MA; Gary Bond, PhD; Deborah Becker, MEd, CRC, Westat, Lebanon, NH; Marcela Hayes, BA, BS, University of Massachusetts Medical School, Shrewsbury, MA

Adaptations that reflect the circumstances and culture of young adulthood are needed both in the services typically offered to adults and the methods used to assess and study these services. This paper describes a study of supported employment services that were adapted and delivered to high school and transition age youth. Presenters will describe how the standard individual placement and support (IPS) model of supported employment and its fidelity scale, previously used primarily with adults, were adapted for use with transition age youth. Notable adaptations to the fidelity scale include measurement of supported education services and family involvement. Other innovations in research strategies were also needed to better engage and retain youth and young adults in research. This paper will describe the need for and successful use of innovations such as texting and social media; online survey completion; timeline cards; reminder postcards and others.

4:45 pm - 5:15 pm
Palma Ceia 1 ~ 30-Minute Paper

**The Effectiveness of a 12-Week Evidence-Based Transitional Intervention to Sustain Recovery for Youth with Early Psychosis: Preliminary Findings**

Elizabeth McCay, RN, PhD, Ryerson University, Toronto, ON, Canada; Gretchen Conrad, PhD, CPsych, Royal Ottawa Mental Health Centre, Ottawa, ON, Canada

A prospective cohort study is currently underway to assess the effectiveness of an evidence-based, multi-component 12-week Transitional Intervention to sustain the recovery process for youth with psychosis, as they transition from Early Psychosis Intervention programs to community-based care. Our results demonstrate that comparison cohort participants identified as ready for discharge had achieved optimal levels of recovery. It is anticipated that the Transitional Intervention will support participants to maintain the positive gains following discharge.
What Happens Next? How to Maximize the Utilization of Findings from Rigorous Evaluations

Sarah Hurley, PhD; Walter Meyer, MA, Youth Villages, Memphis, TN

Results of rigorous evaluation are often viewed as a ‘thumbs up’ or ‘thumbs down’ on a program. Findings may identify program areas in need of improvement, but additional analysis may be required in order to fully understand and utilize evaluation findings. This paper recounts an agency’s work after a random assignment evaluation that led to a deeper understanding of the findings and identification of interventions that will be evaluated for future inclusion in the program model.

Session 63
4:15 pm - 4:45 pm
Palma Ceia 2 ~ 30-Minute Paper

Engaging High School Teachers in Connecting Students to Mental Health Care Using Online Role Play with Emotionally Responsive Virtual Students

Glenn Albright, PhD, Baruch College, City University of New York, New York, NY; Mina Fazel, DM, MRCPsych, University of Oxford, Oxford, UK; Jeremiah McMillan, MS, University of Georgia, Athens, Athens, GA; Shashank Joshi, MD, Stanford University School of Medicine, Stanford, CA

Online role-play simulations offer a new and promising approach to building the capacity of educators to function as the “eyes and ears” of mental health. This practice-based training method is designed to increase educator behaviors for identifying students in psychological distress, approaching them to discuss concerns, and referring them to support. Findings of the impact of the training simulation on gatekeeper attitudes and behaviors from a wait-list controlled trial will be reported.

4:45 pm - 5:15 pm
Palma Ceia 2 ~ 30-Minute Paper

Healthy Students Succeed: Policy Solutions for School-Based Substance Use Prevention

Melissa Ough, MSW, Community Catalyst, Boston, MA; Alyssa Green, MPA, Georgias for a Healthy Future, Atlanta, GA

With drug overdose deaths in the U.S. at an all-time high, it is more important than ever to put resources toward addressing substance use among young people before a problem develops. Screening, brief intervention, and referral to treatment (SBIRT) in schools can help young people get and stay healthy and succeed in the classroom. This session will offer strategies to bring SBIRT into schools by leveraging policy opportunities in the health and education sectors.

5:15 pm - 5:45 pm
Palma Ceia 2 ~ 30-Minute Paper

Does Mental Health Service Use Prevent Child Welfare and Juvenile Justice Systems Involvement?

Antonio Garcia, MSW, PhD, University of Pennsylvania, Philadelphia, PA; Minseop Kim, PhD, The Chinese University of Hong Kong, Sha Tin, Hong Kong, China

Limited efforts focus on whether engagement in mental health services prevents dual child welfare and juvenile justice (CWJJ) system involvement. Findings highlight that males and African Americans (compared to Caucasians) are more likely to experience dual CWJJ involvement and that mental health service receipt prevents CWJJ involvement, particularly among Latinos and older youth. Attendees will learn about and discuss evidence-informed strategies to improve service provision for CWJJ involved youth.

Session 64
4:15 pm - 4:45 pm
Palma Ceia 3 ~ 30-Minute Paper

It Works Way Better Than Yelling Your Head Off: Strengths and Needs of Teachers Implementing PBIS

Calli Lewis Chiu, PhD, California State University, Fullerton, Fullerton, CA; Donna Sayman, PhD, Wichita State University, Wichita, KS; Mandy Lusk, PhD, Clayton State University, Morrow, GA

Classroom management is often cited as the most critical issue that teachers face in their work with students with disabilities. Positive Behavioral Interventions and Supports (PBIS) is a framework emphasizing the use of positive, evidence-based practices to decrease challenging behaviors and, in effect, increase academic engagement. Training related to PBIS must emphasize the knowledge application of tier II and tier III interventions.

4:45 pm - 5:15 pm
Palma Ceia 3 ~ 60-Minute Discussion

Enhancing School Behavioral Health Supports for Tier 2 & Tier 3 Youth

David Hussey, PhD; Michelle Riske-Morris, PhD, JD, Case Western Reserve University, Cleveland, OH

Addressing behavioral and mental health needs of students is challenging but increasingly important. Although schools emphasize universal based programs, expertise selecting, implementing, and evaluating services for PBIS tier II and tier III youth are more limited. Presenters will discuss effective strategies for identifying, selecting, implementing, and evaluating services for tier II & III youth and highlight the importance of developing consultation relationships to guide service development.
Session 65  **Y&YA**

4:15 pm - 5:45 pm
Palma Ceia 4 ~ 90-Minute Discussion

**Tips and Tricks to Developing and Sustaining Youth Advisory Councils in Mental Health Organizations**

Amanda Costa, BS; Raphael Mizrahi, BS, *Transitions to Adulthood Center for Research, UMass Medical School, Shrewsbury, MA*

Attendees will learn how to harness the power of youth voice to improve mental health services in their organizations. Attendees will learn the benefits and challenges associated with facilitating youth advisory boards and tips and tricks for infusing youth input. Workshop facilitators have firsthand experience leading a national youth advisory board and will review content from two nationally recognized products on the tips and tricks of developing and sustaining youth councils.

Session 66  **ITRE**

4:15 pm - 4:45 pm
Garrison Suite ~ 30-Minute Paper

**Evaluation of the Too Good for Drugs Prevention Program Implementation Fidelity Checklist**

Tracy Bales, BA; Charles Baldwin, BS, Bruce Lubotsky Levin, PhD, MPH, University of South Florida, Tampa, FL; Kimberly Menendez, MS, Mendez Foundation, Inc., Tampa, FL; Charles Mendez, III, Mendez Foundation, Inc., Atlanta, GA

Too Good (TG) evidence-based prevention programs empower youth to resist risky behaviors through the development of social-emotional learning skills. Positive student outcomes rely on effective implementation and model fidelity. Revised TG observation tools seeking to measure curricular adherence, dose, quality of delivery, and student responsiveness were tested during program delivery. Measures of validity and reliability were assessed using quantitative and qualitative analysis. Results are presented with recommendations for improvement and implications for adolescent behavioral health.

4:45 pm - 5:15 pm
Garrison Suite ~ 30-Minute Paper

**Evaluating Project Prevent: Implementation of Restorative Practices in Hillsborough County Schools**

Joshua Zaris Goldman, MSW, *Institute for Translational Research Education in Adolescent Drug Abuse, Tampa, FL; Anubhav Kidambi, MPH; Enya Vroom, MS; Amy Green, PhD, University of South Florida, Tampa, FL; Myrna Hogue, EdD, LCSW, Kristine Hensley, Hillsborough County Public Schools, Tampa, FL*

Traditional exclusionary discipline punishes students with removal from the classroom. Restorative practices (RP) presents an alternative, allowing students who have caused harm to make reparations to those harmed and the school. RP has shown promising results with decreased suspensions, fewer repeat offenses, and less disruptive or violent behavior. This study evaluates RP in Hillsborough County schools by surveying teachers and staff to determine effectiveness, barriers, and facilitators to improve current and future RP implementation.
Poster Presentations & Networking Reception

6:00 pm - 7:30 pm ~ Bayshore Ballroom

201. Y&YA Video Briefs as a Training Modality for Busy Transition Service Providers: Report of an Evaluation

Pauline Jivanjee, PhD; Eileen Brennan, PhD; Leigh Grover, MSW; Nicole Aue, BA, Portland State University, Portland, OR

Video briefs offer a strategy for sharing skill-based practice tips with transition service providers. Based on priorities identified through a national training needs survey, we created ten video briefs, each 5-6 minutes long and accompanied by a resource list and discussion questions. Presenters are mental health experts, young adult advocates, and family members. Topics include trauma-informed care, promoting family support, and supporting LGBTQ youth. This poster presentation reports on an evaluation of the video briefs.

202. Y&YA The Relationship Between Perceived Neighborhood Collective Efficacy and Mental Health Service Utilization Among Adolescents

Christyl Dawson, MPH, Florida International University, Miami, FL

This study analyzes the association between neighborhood perceptions (i.e. collective efficacy) and mental health service utilization among adolescents. Using multilevel modeling, results show that perceived neighborhood collective efficacy was associated with significantly higher rates of obtaining mental health care.

203. Project: Come Play With Me – A Grassroots Effort to Encourage the Protective Factor of Play in Preventing and Alleviating Childhood Trauma and Toxic Stress Symptoms in a Rural Indiana Community

Meagan Terlep, MA; Bob Bailey, PhD; Kristine Nunn, MA; Lisa Felsman, BA, Centerstone of Indiana, Richmond, IN

Play is an important part of childhood and it becomes even more important when regarded as a vital protective factor against trauma and toxic stress. One community mental health center in rural Indiana began investing evidence-based play programs, and initiated a Power of Play community awareness campaign to help address rising numbers of childhood PTSD diagnoses within their community. These programs included parent-to-child play programs, peer-to-peer play programs, and preventative education about the benefits of play for a child's wellbeing and development. Results indicate that play does, indeed, improve a child's sense of wellbeing. The reasons for this improvement may be that stable relationships with parents and increased psychosocial skills in peer interactions serve to help children better navigate stress and trauma, and prevent toxic stress from damaging a child's development.

204. Fighting Stigma in Schools with NAMI's Ending the Silence Program for Students, School Staff, and Families

Jennifer Rothman, BA, National Alliance on Mental Illness, Arlington, VA

The National Alliance on Mental Illness (NAMI) completed a 3-year study in 2017 that proved NAMI’s Ending the Silence program effective for changing high school and middle school students’ understanding of and attitudes toward mental health conditions and seeking help for themselves and/or others. NAMI staff will share the results of this national study and explore what the study has meant for the program’s expansion across the country.

205. Leveraging Implementation Science to Scale EBPs to Fidelity Across a Behavioral Healthcare System

Sarah Donovan, PsyD; Laura Maggiulli, PhD; Taylor Vitron, PsyD, Hillside Family of Agencies, Rochester, NY; Samantha VanHout, BA, Hillside Children’s Center, Romulus, NY

Though evidence-based practices (EBPs) are often the preferred treatment methods for youth, organizations sometimes struggle to implement EBPs with sustained fidelity. Implementation science is critical to bridging this gap and can be used at the beginning stages to build infrastructure designed to achieve sustainable implementation with fidelity. This poster presentation will illustrate how implementation science has strengthened the installation and implementation of two EBPs across a large system of care. Results demonstrate an increase in proliferation of EBPs across programs as well as in the number of staff trained. Targeted efforts around the transition from initial to full implementation for dialectical behavior therapy (DBT) will be shared, including the use of program fidelity evaluation to inform implementation planning.


Madeline Lee, MSSW, PhD; Jim Mickelson, MSW; Leigh Quijada, MSW, LCSW; Laurie Orr, MSW, LCSW, California State University San Marcos, San Marcos, CA

Support programs for former foster youth in college have emerged in the past couple of decades, but literature to guide their development and implementation is limited. This poster presentation describes ACE (Achieving College Excellence) Scholars Services, a campus-based program supporting former foster youth at California State University San Marcos. ACE views education as having the most impact on ending generational child maltreatment. Towards transforming lives, the ACE model is an innovative, comprehensive approach grounded in social work values.

Madeline Lee, MSSW, PhD, California State University San Marcos, San Marcos, CA
This study explores the Council on Accreditation (COA), the original accreditor of child and family services, by describing the accreditation rate among public child welfare agencies, examining COA accreditation status and state policies requiring accreditation, and mapping COA-accredited agencies using geographic information systems. This study is a step towards building a much-needed evidence-base regarding accreditation as a potential leverage point for improving the quality of our child welfare system.

208. Working with Difficult Emotions: Developing and Implementing a Group Intervention for Youth with Mental Health and Substance Use Disorders

Gretchen Conrad, PhD; Mallory Campbell, MA; Nicholas Schubert, MA; Sean Lafontaine, BA, The Royal Ottawa Mental Health Centre, Ottawa, ON, Canada
The Transitional Aged Youth Service follows youth with moderate-severe mental health and substance use diagnoses. A Dialectical Behavior Therapy-informed group was developed based on the needs of clients who commonly experience challenges with emotion regulation, impulsivity, decision-making, and risk-taking behaviors. Ongoing program evaluation revealed significant positive changes in depression, psychological well-being, self-esteem, and emotional acceptance. Initial results suggest the potential effectiveness of this group intervention targeting the management of difficult emotions in clients presenting with dual diagnoses.

209. Families as Partners in Educating Clinicians for Effective Implementation of Evidence-Based Treatments

Elisabeth Cannata, PhD; Sandra Phair, Wheeler Clinic, Plainville, CT; Ann Smith, JD, MBA, African Caribbean American Parents of Children with Disabilities, Inc. (AFCAMP), Hartford, CT
There is increasing emphasis on peer counselors promoting client patient education, engagement, and retention. An extension is to enlist these individuals to train the healthcare workforce. Examples of families serving as educators to promote effective implementation of Evidence-Based Treatments (EBTs) will be reviewed. The poster session will show findings from a family survey about effective family engagement, illustrate how the feedback aligns with specific EBTs and may help address questions about the relevance of specific treatment paradigms for diverse families.

210. EBP Challenges and Strategies for Social Workers Training in Integrated Behavioral Health Settings: Observations from the Field

Riisa Rawlins-Easley, MSW; Sharon Johnson, PhD; Sha-Lai Williams Woodson, PhD; Patricia Rosenthal, MSW, University of Missouri-St. Louis, St. Louis, MO
This presentation discusses the challenges of training for integration from the perspectives of MSW-level social work trainees who worked in agencies focused on children, adolescents, and transitional-age adults. Trainee feedback provided during a debriefing session following the successful completion of a clinical field placement suggests infrastructure, convenience, mutual respect, and reciprocal communication are key to successful integrated health teams. We will share the implications of these findings for future training efforts in integrated health practice settings.

211. A Mixed Methods Analysis Exploring the Impact of Gender on Symptom Progression and Trauma Narrative Processing During Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

Sarah Ascienco, PhD; Ginny Sprang, PhD, University of Kentucky, Lexington, KY
There is a lack of research concerning the progression of Post-Traumatic Stress Disorder (PTSD) symptoms during trauma-focused treatment for youth. This poster presentation presents the findings of a mixed methods study that examined symptom progression during TF-CBT, assessed whether gender-related differences were reported, and conducted a thematic analysis of trauma narratives. Findings revealed gender-related differences in PTSD symptoms during some phases of treatment and variations in the narratives of males and females. Implications for practice and policy will be shared.

212. BHE Mental Health Quality of Life Measures Among Rural Transgender and Gender Expansive Youth

Melissa Scribani, MPH; Jane O’Brien, MPH; Nancy Tallman, BS; Carolyn Wolf-Gould, MD; Anne Gadomski, MD, MPH, Bassett Healthcare Network, Cooperstown, NY
Transgender youth face barriers to healthcare and are at high risk for poor medical and psychosocial outcomes. For patients under 22 years old receiving gender-affirming care, health-related quality of life (QOL) was assessed using the Child Health Questionnaire-87 (ages under 18) and the Short Form-36v2 (ages 18-21). On both QOL instruments, mental health subscale mean scores were significantly lower than U.S. population means. Lower mental health scores were also associated with an anxiety disorder diagnosis.
213. Analyzing Medicaid Behavioral Health Service Utilization Patterns for Youth Involved in Other Ohio Youth-Serving Organizations

Helen Anne Sweeney, MS, Ohio Department of Mental Health and Addiction Services, Columbus, OH; Rick Shepler, MS, Case Western University, Cleveland, OH

This poster session will present findings from Ohio's analysis of youth access to Medicaid-covered behavioral health (BH) treatment services and other youth-serving organizations. Medicaid-covered youth receiving BH treatment services has increased by 45.0% between 2014 and 2016. This poster session will describe how researchers collected and analyzed data, pinpointed gaps in services, will review their proposed methodology for future analysis, and explain dissemination efforts to policymakers. Presenters will solicit ways to improve methodology and disseminate findings.

214. The Ohio Healthy Transitions Project: Serving Transitional Age Youth with a Serious Emotional Disturbance, a Serious Mental Illness, or a Co-Occurring Intellectual Developmental Disability in Cuyahoga (Cleveland) and Lorain (Elyria) Counties

Chris Stormann, PhD, Case Western Reserve University, Cleveland, OH; Holly Jones, MSW, Ohio Department of Mental Health and Addiction Services, Columbus, OH; Erin Williams, MA, Wingpan Care Group, Shaker Heights, OH; Jill Sadowsky, MSW, LISW-S, Bellefaire JCB, Shaker Heights, OH; Jim McCafferty, MSSA, Wingpan Care Group, Shaker Heights, OH

The Ohio Department of Mental Health and Addiction Services is implementing the Ohio Healthy Transitions Project to serve transitional age youth with serious emotional disturbance, mental illness, or co-occurring intellectual developmental disabilities in Cuyahoga (Cleveland) and Lorain (Elyria) counties. This poster session will provide descriptive information about the transitional age youth population, service delivery model, and initial results from the implementation of a 2018 SAMHSA Healthy Transitions - Systems of Care award.

215. Community and School-Based Behavioral Health with D&A Specialist

Jessy Miller, BA, MPA; Ron Simon, LCSW, Children's Service Center of Wyoming Valley / Robinson Counseling Center, Wilkes Barre, PA

Substance abuse problems are currently destroying our homes, communities, schools, and states. The recent Opioid Epidemic has shed light on a national problem that demands additional resources and a shift in treatment approaches. The Children's Service Center of Wyoming Valley, Inc. has taken a unique approach to enhance prevention and intervention efforts in their community. The service delivery model being used is focusing on those at greatest risk and provides timely education and intervention services.

216. Sustaining Evidence-Based Interventions; Solutions to Hiring and Retaining Staff

Marta Anderson, LCSW; Sylvia Rowlands, PhD; Shannon Ghramm-Smith, LCSW, The New York Foundling, New York, NY

This poster session will explore the following child and family topics: What is the evidentiary standard needed for 'evidence-based (EB)'? How can we fund EB practices when most funding streams pay for outputs and not outcomes? Who pays attention to system sustainability? Are evidence-based intermediaries an important part of the EB puzzle? What are the hiring and retention challenges to EB's and how do we overcome them? Discuss these questions and more with The New York Foundling.

217. Breakthrough: A Community Working Together for Youth

Anne Sutherland, MS, Orange County Board of County Commissioners, Orlando, FL; Chris Stewart, PhD, MSW, University of Central Florida, Orlando, FL

Breakthrough is a community collaboration pilot project designed to improve the mental health service delivery system for youth using evidence-based practices and System of Care values. Breakthrough has partnered with the University of Central Florida to research its efficacy with the goal of expanding Breakthrough tenants throughout the community.

218. The Evaluation of the Dually-Involved Youth Case Conference Intervention

Lina Racicot, EdD, American International College, Springfield, MA

The purpose of the Case Conference intervention was to reduce negative outcomes for dually-involved youth. An evaluation was completed to test for any significant differences between the intervention group and the comparison group on juvenile justice, child welfare, and school performance outcomes (n = 316). Statistical results indicated the intervention group had significantly lower rates (p < .05) of new Department of Youth Services commitments, detentions, violations of probation, arraignments, and home removals at 6-months.

219. CW Nebraska’s Innovative yet Simple Approach to Sharing Youth Specific Data Across Systems to Inform the System of Care Effort

Bernie Hascall, MS, Nebraska Department of Health and Human Services, Division of Behavioral Health, Lincoln, NE; Nathan Busch, JD, Nebraska Children and Families Foundation, Lincoln, NE

Learn how Nebraska achieved something almost unheard of in cross-systems work—obtaining and analyzing youth-specific data across child-serving systems. Through Memorandums of Understanding and other data sharing agreements, the Nebraska System of Care can now track youth expenditures, service utilization and outcomes for youth served in one or all partnering agencies. The approach taken to reviewing over five million records did not require compatible electronic health records or platforms.
220. Sustained Use of a Modular Cognitive Behavioral Therapy (M-CBT) Delivered by School-Based Clinicians
Jamie LoCurto, PhD; Jeffrey Pella, PhD; Paige Pikulski, BA; Golda Ginsburg, PhD, UConn Health School of Medicine, West Hartford, CT
Dissemination and sustained use of Cognitive Behavioral Therapy (CBT) in school-based settings have been slow and few studies have focused on pediatric anxiety. The purpose of this study was to examine the sustained use of M-CBT by school-based clinicians. The majority of clinicians continued to use M-CBT 3.42 years after training, but many modified the treatment. Given treatment modification, it will be important for future studies to examine the effectiveness and fidelity of treatments after funding ends.

221. Engaging Families Dually-Involved in the Child Welfare System and the Juvenile Justice System
Jennifer Woolard, PhD, Georgetown University, Washington, DC; Sarah Vidal, PhD, MPP; Abram Rosenblatt, PhD, Westat, Rockville, MD
This poster session focuses on family engagement in the child welfare and juvenile justice systems. After briefly reviewing research and policy we explore what should be considered as family engagement and what characterizes beneficial engagement according to families, practitioners, and researchers. Should it be measured differently in different systems or are there common core components? Research that could inform how best to accomplish beneficial engagement is critical and has the potential for wide-ranging applied benefits.

222. The Preventative Effect of Strength-Building
Jennifer Tackitt-Dorfmeyster, LCSW, CYC-P; Elizabeth Oyer, PhD, Choices Coordinated Care Solutions, Indianapolis, IN
Choices Coordinated Care Solutions services include care coordination, implementation of needs-based service delivery, safety and crisis planning, strength-based discovery, and facilitation of child and family teams. About 31% of youth experienced a critical incident and survival analyses demonstrated the preventative role of foundational strengths (measured by the CANS). While wraparound care coordination does focus on developing a team and plan of care to address needs, the impact of building strengths to stabilize and support outcomes cannot be underestimated.

223. CW Integrating Implementation Science and Evidence-Based Practice to Support Transformational Change in the Child Welfare Workforce
Anna de Guzman, MA, Graduate School of Social Work, University of Denver, Denver, CO; Robin Leake, PhD, University of Denver, Graduate School of Social Work, Butler Institute for Families, Denver, CO; Rosalyn Bertram, PhD, University of Missouri-Kansas City, Kansas City, MO; Christy Collins, MS, Missouri Children’s Division, Jefferson City, MO; Shane Wilcutt, MSW, Cornerstones of Care, Olathe, KS
The National Child Welfare Workforce Institute (NCWWI) supports child welfare agencies in implementing evidence-supported practices and improving workforce health. NCWWI conducts comprehensive organizational health assessments that support collaborative exploration of workforce challenges and interventions. Selected sites implement innovations to improve client outcomes, while NCWWI supports university/agency partnerships and leadership training across each state. This poster session presents the Missouri Workforce Excellence site’s challenges, strategies, and effectiveness in implementing strategies to improve workforce health and development.

224. CW Answering the Critical Question of Are Clients Getting Better? Utilizing a Standardized Assessment Tool to Evaluate Social Determinants of Health as an Outcome Measure Across Child Welfare and Behavioral Healthcare Programming
Taylor Breeding, LCSW; Megan Moore, MSW; Jarrod Dungan, BA, KVC Behavioral HealthCare Kentucky, Inc, Lexington, KY
In behavioral health and child welfare arenas, measurement-based care is becoming increasingly important. KVC Kentucky, a large child welfare and behavioral health agency, selects and implements the Lifeworks Self Sufficiency Matrix to monitor the social determinants of health outcomes across diverse programming. Preliminary pilot results of this tool’s use as an outcome measure will be discussed. Lessons learned from selection, implementation and preliminary analysis will also be shared.
225. **WA How Does State Context Influence Wraparound Quality? Findings from the Coaching Observation Measure for Effective Teamwork (COMET)**

Alya Az Zahra Azman; Marianne Kellogg; Jonathan Olson, PhD; Spencer Hensley, University of Washington, Seattle, WA

The system context in which Wraparound care coordination is embedded plays a critical role in implementation success. The Coaching Observation Measurement for Effective Teamwork (COMET) is a tool to measure fidelity to the wraparound model and skill attainment by providers that also guides the training and coaching process. This poster introduces the COMET and presents the results of an analysis of variation in COMET scores across 13 states supported by the National Wraparound Implementation Center.

226. **WA It’s the Principle of the Matter: A Large Behavioral Health and Child Welfare Agency Rooted in Wraparound Programming Aims to Improve Fidelity and Quality Assurance to Wraparound Principles Through Implementation of the Tom 2.0 (Team Observation Measure)**

Denise Jones, LCSW; Gina Klyachkin, LCSW; Megan Moore, MSW, KVC Behavioral HealthCare Kentucky, Inc, Lexington, KY

A large behavioral health and child welfare agency implemented the use of TOM 2.0 (Team Observation Measure) across all areas of programming as part of a comprehensive redesign of their quality assurance program. Data will be compared and contrasted across behavioral health, family preservation, and foster care services. Subsequent training and feedback loops were devised to supplement the measure for quality improvement. Lessons learned including strategic technology use, successes, and challenges will be shared.

227. **FE Enhancing Young Adult and Parent Leadership Abilities**

Will Voss, MS; Kathy Rogers, MSW, Tennessee Voices for Children, Goodlettsville, TN; Don Walker; Brenda Donaldson, MA; Jules Wilson, Tennessee Department of Mental Health and Substance Abuse Services, Nashville, TN; Crystal Hutchins, Tennessee Voices for Children, Goodlettsville, TN

This poster session will focus on how a two-day Peer Leadership Academy partnership between the Tennessee Department of Mental Health and Substance Abuse Services and Tennessee Voices for Children successfully empowered young adults and Family Support Specialists by strengthening leadership and advocacy skills. Data confirms the results were positive with Family Support Specialists reporting a statistically significant difference in 7 of 8 areas, and the young adults reporting a statistically significant difference in 3 of 8 areas.

228. **CW Adapting Partnering for Success for Treatment Foster Parents to Promote the Evidence-Based Mental Health Interventions in the Child Welfare System**

Karen Powell, MS, MSW; Rochon Steward, MSW, University of Maryland School of Social Work, Baltimore, MD; Melinda Baldwin, PhD, Administration for Children and Families, Washington, DC; Paul Brylske, MSW, Kennedy Krieger Institute, Baltimore, MD

The Partnering for Success (PfS) initiative promotes greater collaboration between child welfare and mental health systems. A key component of PfS is the dialogue between child welfare and mental health to promote the delivery of quality evidenced-based mental health services and clinically informed case management services. This poster session explores the process to adapt PfS for treating foster parents as crucial stakeholders to coordinate the multidisciplinary interventions and support behavioral health within the child welfare systems.

229. **Findings and Lessons Learned: Development and Implementation of a Model to Support Access to Behavioral Health Care**

Teresa Simmons, MSW, Salisbury University, Salisbury, MD

Maryland BHIPP (Behavioral Health Integration in Pediatric Primary Care) is a state-funded program designed to improve access to quality mental health for children and adolescents in Maryland. The program provides support to pediatric primary care providers in the assessment and management of parents’ behavioral health concerns through the provision of training, telephone consultation, and social work co-location. This poster session will focus on the social work co-location component.

230. **Overrepresentation of Youth with Behavioral Health Conditions in Exclusionary Discipline: The Role of Policy and Law Enforcement**

Casey Thomas, MA; Stephen Phillippi, PhD, Louisiana State University Health Sciences Center, School of Public Health, New Orleans, LA

In 2016, the National Institute of Justice (NIJ) awarded a School Safety and Justice grant to Policy Research Associates and the LSU Institute for Public Health and Justice to support the evaluation of non-exclusionary policies for school discipline. The evaluation is measuring the effects on school climate, juvenile justice, and mental health. This portion of the study examined the policies governing school-based police officers in relation to youth development, behavioral health, and crisis response.
231. Y&YA Youth Engagement Strategies to Inform Federal Policies and Programs
Cheri Hoffman, Office of the Assistant Secretary for Planning and Evaluation, Washington, DC; Eric Lulow; Tanvi Ajmera, Substance Abuse and Mental Health Services Administration, Rockville, MD; Caroline Crouse; Caitlin Morath, U.S. Department of Housing and Urban Development, Washington, DC
The poster will highlight various youth engagement efforts at the federal level, particularly focused on engaging young people in potentially high-risk environments and vulnerable situations. The presenters represent a sample of federal agencies working to engage youth, including youth with system-involvement, youth experiencing homelessness, and youth experiencing mental health issues. The federal representatives will be available to engage in conversation with attendees and provide handouts.

232. A Comprehensive Review of the Literature on Bruxism
Elizabeth Stuart, BS, California School of Professional Psychology at Alliant International University, Alhambra, CA
Bruxism, or extreme teeth-grinding, is a behavior that affects many individuals on the Autism spectrum. Bruxism is not only deleterious to overall dental health but can also have negative impacts on social skill development, bone structure damage, as well as furthering communication impairments. To best address this behavior, it is important to examine the research concerning the interventions and origins of bruxism and future opportunities for interventions.

233. WA Integration of Motivational Interviewing in Wraparound to Increase Outcomes
Sharon Weber, BS, Magellan Health Care, Laramie, WY; Kat Campbell, BS, Magellan Healthcare, Cheyenne, WY; Jim Rast, PhD, Vroon VDB, Aurora, CO
How can the integration of High-Fidelity Wraparound and Motivational Interviewing impact engagement, self-efficacy and motivation? Wraparound in Wyoming is holding to fidelity slightly better than the national average, yet engagement, implementation, and graduation success rates still have room for improvement. A study methodology for field research of the integration of MI with existing HF WA will be discussed from family and research perspectives.

234. Faces of Medicaid Data Series: Examining Children’s Behavioral Health Service Use and Expenditures, 2005-2011
Jamila McLean, MPH, Center for Health Care Strategies, Hamilton, NJ
Children in Medicaid with behavioral health needs are a vulnerable population, representing a small portion of the Medicaid child population, but accounting for disproportionate costs. These children are often served by multiple public programs, putting them at risk for fragmented care, and they often experience poor health outcomes at high costs. This poster summarizes the Center for Health Care Strategies’ national analysis of 2011 Medicaid claims data and highlights opportunities and resources for states.

235. Incorporating Evidence into Systems of Care: An Integrative Framework
Genevieve Graaf, PhD, University of Texas at Arlington, Arlington, TX; Amy Mendenhall, PhD, The University of Kansas, Lawrence, KS
This poster session proposes a framework for incorporating evidence into every aspect of systems of care service delivery. The model hinges on Wraparound and its central role in the system of care paradigm for service delivery. The evidence-based clinical decision-making process is embedded in wraparound, and the resulting plan of care is made up of portable, empirically-supported interventions (e.g. common factors, kernels and behavioral vaccines, and common elements), provided by each provider on the treatment team.

236. The Effects of Toxic Stress on Brain Development
Chad Sedam, PhD, CRC, Sunshine Health, Tallahassee, FL
This poster presentation will show attendees how toxic stress alters brain structure and may impact behavioral, social, and emotional functioning in children and in adults.
Wednesday, March 6 Events

Keynote Address

8:30 – 9:45 am – Bayshore Ballroom

**Addressing the Impact of a Changing Health Care Environment through Behavioral Health Research and Policy**

*Larke Huang, PhD, Director, Office of Behavioral Health Equity, Substance Abuse and Mental Health Services Administration, Rockville, MD*

Dr. Huang will discuss the impact of emerging national, social, political and economic trends on the behavioral health of children and young people. Recent legislation prioritizing a focus on the opioid crisis, serious mental illness and serious emotional disorders, and other challenges to healthy development are potentially altering the landscape for prevention, treatment, services, and supports. New federal investments and reconfigurations in service delivery are being positioned to advance behavioral health care for children and youth.

**About the Presenter**

*Larke Nahme Huang, PhD*, a licensed clinical-community psychologist, is a Senior Advisor in the Administrator’s Office of Policy Planning and Innovation at the Substance Abuse and Mental Health Services Administration (SAMHSA) in the U.S. Department of Health and Human Services. In this position she provides leadership on national policy for mental health and substance use issues for children, adolescents and families and leads the Administrator’s strategic initiative on Trauma and Justice. She is also the Director of SAMHSA’s Office of Behavioral Health Equity which was legislated by the 2010 health reform legislation. In 2009, she did a six months leadership exchange at the Centers for Disease Control and Prevention (CDC) where she was the Senior Advisor on Mental Health.

For the past 26 years, Dr. Huang has worked at the interface of practice, research and policy. She has assumed multiple leadership roles dedicated to improving the lives of children, families and communities. She has been a community mental health practitioner, a faculty member at the University of California, Berkeley and Georgetown University, and a research director at the American Institutes for Research. She has worked with states and communities to build systems of care for children with serious emotional and behavioral disorders. She has developed programs for underserved, culturally and linguistically diverse populations, evaluated community-based programs, and authored books and articles. In 2003, Huang served as an appointed Commissioner on the President’s New Freedom Commission on Mental Health.

Recent publications include: *Children of Color: Psychological Interventions with Culturally Diverse Youth; Transforming Mental Health Care for Children and Their Families; The Influence of Race and Ethnicity on Psychiatric Diagnoses and Clinical Characteristics of Children and Adolescents in Children’s Service; and Co-Occurring Disorders of Adolescents in Primary Care: Closing the Gaps.*
Session 67 Y&YA

10:00 am - 11:30 am
Bayshore 5 ~ 90-Minute Symposium

If THEY Build It, THEY Will Come! a Peer-To-Peer Approach to Behavioral Health Services for Youth and Young Adults

Symposium Chair: Tonicia Freeman-Foster, EdD, Central Florida Behavioral Health Network, Tampa, FL.

The path to and through young adulthood can be very exciting. Milestones such as graduating from high school, college, gaining increased independence, and finding full-time employment frequently occur during this time. However, this period can also be overwhelming by bullying, gender/sexuality questioning, teenage pregnancy, HIV/AIDS, poverty, trauma, juvenile and criminal justice involvement, and homelessness. Consequently, many young people will experience severe mental health challenges, substance use, and suicidal ideations, without appropriate engagement and intervention. Over the past three years, Florida Healthy Transitions has demonstrated positive and sustainable outcomes.

Secretly Therapeutic:
How to Engage Transition Age Youth

Brittany DeFiore, BS; Tyler Smith, BS; Braiden Edge; Meshalynn Olsen, Florida Healthy Transitions, Tampa, FL.

Bent Not Broken is a movement of young people providing support to other young people. The movement takes shape as the group component of the Florida Healthy Transitions program, where participants connect with one another and other non-traditional therapeutic supports. Conventional therapy groups are not always able to capture the unique experiences of transition age youth, as they thrive in creative and collaborative environments.

Florida Healthy Transitions’ Social Return on Investment

Barbara Morrison-Rodriguez, PhD, BMR Consulting, Lutz, FL; John Mayo, MA, Success 4 Kids & Families, Tampa, FL.

Florida Healthy Transitions’ evaluation workgroup identified the cost savings and cost avoidance outcomes for youth and young adults who received program services. The variables for the analyses consist of the program participants’ past and current involvement with the program, social connectedness with others, and interactions with systems such as child welfare, juvenile/criminal justice, educational, vocational, and crisis stabilization services. The evidence of the program’s effectiveness, both qualitative and quantitative, is critical to future funding and sustainability.

Session 68 EBP

10:00 am - 10:30 am
Bayshore 6 ~ 30-Minute Paper

A Mixed Methods Outcome Evaluation of the Technical Assistance Network for Children’s Behavioral Health

Jonathan Olson, PhD; Taylor Berntson, BA; Eric Bruns, PhD, University of Washington, Seattle, WA; Michelle Zabel, MSS; Marlene Matarese, PhD, University of Maryland, Baltimore, MA

The National Technical Assistance (TA) Network for Children’s Behavioral Health provides ongoing, proactive support to states, communities, and tribes that are developing and implementing systems of care to support youth with complex behavioral health needs. This is a multi-method case study evaluation of the TA Network activities in a purposefully selected sample of grantee sites. This presentation will review TA Network strategies that are associated with impact and implications for future TA delivery.

10:30 am - 11:30 am
Bayshore 6 ~ 60-Minute Discussion

Addressing Gaps in Behavioral Health Workforce Training Needs for Children, Youth, and Families

Rae Beaudry, MSW, The Institute for Innovation and Implementation, Baltimore, MD; David Hussey, PhD, Begun Center for Violence Prevention Research and Education at CWRU, Cleveland, OH; Elena Mazza, PhD, MSW, LCSW, Monmouth University School of Social Work, West Long Branch, NJ; Margo Candelaria, PhD; Michelle Zabel, MSS, The Institute for Innovation and Implementation, Baltimore, MD

The TA Network launched the Behavioral Health Care Development Initiative (BHCDI) to improve the knowledge, expertise, and overall preparedness of MSW program graduates to provide effective behavioral health services to youth. Benefits of this initiative include a greater focus on clinical competencies that address gaps in the child behavioral health workforce; a compendium of flexible course/modular offerings matched to meet student learning needs; and opportunities to develop advanced competency knowledge and practice behavior resources.
Session 69 CW
10:00 am - 11:00 am
Bayshore 7 ~ 60-Minute Paper

Recruitment, Retention, and Professionalization: Crucial Elements in Organizational Culture for Effective Child Welfare Services

Elizabeth Croney, MSW, KVC Health Systems, Lexington, KY; Gina Klyachkin, MSW, KVC Behavioral HealthCare Kentucky, Lexington, KY

Effective recruitment, retention, and professionalization of the workforce providing child welfare and behavioral health services are crucial to the success of a provider organization—both for client outcomes and the business model of the organization. While there are many proposed micro-strategies for approaching these tasks, this presentation will demonstrate how these must be embedded in a larger organizational culture that supports and enhances employee health, wellness, and professional development.

Session 70 BHE
10:00 am - 11:30 am
Esplanade 1 ~ 90-Minute Symposium

Racial Equity at the Center: Advancing Policies to Support Low-Income Mothers and Young Adults

Symposium Chair: Nia West-Bey, PhD, Center for Law and Social Policy, Washington, DC; Discussant: Larke Huang, PhD, Substance Abuse, Mental Health Services Administration, Rockville, MD

Building a system that supports mental health and wellness for low-income mothers with depression and youth and young adults is critical to their healthy development and success. The Center for Law and Social Policy (CLASP) is leading a two-year project focused on engaging states in learning communities to drive policy and systems change to better meet the mental health needs of young people living in poverty and low-income mothers experiencing depression. Central to this effort is integrating a racial equity lens into the policy and systems change work of the project. This symposium will share findings about how states and localities are integrating a racial equity lens in their approach to young adult mental health, how the project’s advisory board helps to center racial equity, and how the project team is infusing a racial equity lens into the work of states in the learning community focused on maternal depression.

Policy for Transformed Lives: State and Local Efforts to Embed Racial Equity in Young Adult Mental Health Policy

Nia West-Bey, PhD; Shiva Sethi, Center for Law and Social Policy, Washington, DC; Paige Shortsleevess, Broward Organized Leaders Doing Justice, Ft. Lauderdale, FL

States must ensure that changes are carefully vetted with a racial equity lens to disrupt patterns of inequity and make policy changes that have a meaningful impact for marginalized youth and young adults. CLASP conducted an in-depth scan of how selected states and localities are addressing young adult mental health to inform efforts to improve relevant policies. This presentation will highlight successful efforts to embed a racial equity lens in young adult mental health policy.

Racial Equity in State and National Policy Work: The Case for an Advisory Board

Isha Weerasinghe, MSc, Center for Law and Social Policy, Washington, DC; Kima Taylor, MD, MPH, Anka Consulting, Silver Spring, MD

The Center for Law and Social Policy (CLASP) bolstered its focus on mental health to address intersections with CLASP’s existing policy areas, ensuring racial and health equity as a core component. CLASP is working on an initiative focused on the mental health of young adults and mothers. This panel will outline the development of an expert, diverse advisory board working in both populations, and state technical assistance that CLASP and the board are overseeing.

Embedding Racial Equity in Maternal Depression State Policy and Systems Change

Stephanie Schmit; Ruth Cosse, Center for Law and Social Policy, Washington, DC

The prevalence of maternal depression and access to screening and treatment vary significantly by race and ethnicity. CLASP’s Moving on Maternal Depression (MOMD) project provides technical assistance to states with an emphasis on addressing these racial inequities in maternal depression prevention, screening, and treatment. This session will highlight selected states’ racial equity-focused policy and systems change efforts and how CLASP is embedding racial equity in the project.
Session 71

10:00 am - 10:30 am FE
Esplanade 2 ~ 30-Minute Paper

How an Electronic Health Record Demonstrates Data-Driven Support of the Principles of Wraparound: A Multi-Method Analysis of User Perception

Kara Bergerson, MEd; Amanda Zwirecki, FidelityEHR, Santa Fe, NM; Katie Miller, MA, LMHC, Community Connections of NY (CCNY), Inc., Buffalo, NY; Erin Rourke, MSW, Region 5 Systems, Lincoln, NE

In a research collaboration with system of care partners utilizing a specialized Electronic Health Record (EHR), research findings are presented from the End User perspective. This research builds on initial 2016 research findings and was conducted through a collaborative mixed-methods field-based research approach. EHR system administrators and system of care partners providing Wraparound services share user perception data and qualitative user interview data. Findings support previous (2011-2016) STTR-EHR research findings indicating this aligns behavioral health technology to support positive practice change in the areas of: the sustainability of high fidelity care coordination, improved data-driven decision making, client face to face time, and improved client health outcomes. This session will also include direct field experience of EHR use to improve practice by two behavioral health provider groups currently using the EHR.

10:30 am - 11:30 am
Esplanade 3 ~ 30-Minute Discussion

How to Get the Program Results You Want: Lessons Learned from 10 Years of Supporting Evidence-Based Program Implementation in Maryland’s Child Welfare and Juvenile Justice Systems

Jessie Watrous, MPA; Jill Farrell, PhD; Brook Kearley, PhD, University of Maryland School of Social Work, Baltimore, MA

Common program implementation challenges experienced by child welfare and juvenile justice agencies and program providers will be presented, and ways to address them will be discussed. The highlights strategies will include low-cost infrastructure and processes, the role of implementation teams, and use of tools to guide continuous quality improvement (CQI) efforts. The information is based on 10 years of experience supporting Maryland’s child welfare and juvenile justice systems in CQI with evidence-based programs.

Session 72 WA

10:00 am - 10:30 am
Esplanade 3 ~ 30-Minute Paper

Intentional Cultivation of a Pathway to Effective and Efficient Leadership Practice

Leanne Delsart, MS; Pnina Goldfarb, PhD, Wraparound Milwaukee, Milwaukee, WI

Wraparound Milwaukee utilized a process of data collection and assessment to enhance the efficiency and efficacy of Care Coordination leadership practices to reduce turnover and improve program outcomes. This process included an assessment of tasks, time allocation, value alignment, and support at the Care Coordination and Leadership levels. Focus group feedback guided administrative streamlining of paperwork and policy, and hiring/onboarding, training, and practice tool creation.
Session 73  **Y&YA**
10:00 am - 10:30 am  
Palma Ceia 1 ~ 30-Minute Paper  
**Young Women, Mental Health, and Entrepreneurship**  
Britney Brewster, BA, Street Smart Ventures, Hartford, CT  
Street Smart Ventures’ Work and Learn model offers an entrepreneurial approach to supported employment and vocational readiness. Previous data revealed that programming had drawn female participants at a higher rate than male participants. Further investigation included survey collection and gender-specific focus groups to provide supplementary evidence of successful characteristics of programming. The findings of this mixed method, grounded theory research will be presented along with conclusions and recommendations.

10:30 am - 11:30 am  
Palma Ceia 1 ~ 60-Minute Paper  
**Understanding Career Pathways for the Young Adult Workforce**  
Brie Masselli; Lydia Proulx, Alice Topaloff, Youth MOVE National, Decorah, IA  
Youth MOVE National has conducted a national youth workforce survey to better understand the career pathways for those who identify as having lived experience. Organizations benefit when lived experience is integrated into the day to day operations and services provided. However many organizations continue to struggle with creating a career pathway for youth leaders. This session will review national data and provide insight into how best to support an emerging workforce.

Session 75
10:00 am - 10:30 am  
Palma Ceia 3 ~ 30-Minute Paper  
**The Evaluation of an Evidence-Based Parenting Practice Implemented by Child Welfare Workers**  
Elizabeth Greeno, PhD; John Cosgrove, MSW; Bethany Lee, PhD, University of Maryland School of Social Work, Baltimore, MA  
Under the Maryland IV-E Waiver demonstration project, a suburban child welfare jurisdiction located in the State of Maryland is implementing the Nurturing Parenting Program (NPP). NPP is a 12-session family-based program designed for the prevention and treatment of child abuse and neglect for caregivers of young children. NPP is being implemented primarily by child welfare staff with collaboration from community providers. This paper will present findings from a process and outcome study.

10:30 am - 11:00 am  
Palma Ceia 3 ~ 30-Minute Paper  
**Understanding How Research Is Understood: An Early Intervention and Prevention Programme Case Study**  
Siobhan O’Connor, MSc, Maynooth University, Co. Kildare, Ireland  
Knowledge Translation (KT) aims to make research more accessible and understandable for a range of knowledge users. This case study was conducted to increase awareness and understanding of an early intervention and prevention programme evaluation based in Ireland among knowledge users working in child and family services in Ireland and to translate the programme findings through a series of KT strategies.
11:00 am - 11:30 am **EPB**
**Palma Ceia 3 ~ 30-Minute Paper**

**State Decision-Making Regarding Medicaid Waiver Adoption for Youth with Complex Behavioral Healthcare Needs**

Genevieve Graaf, PhD, University of Texas at Arlington, Arlington, TX

This study sought to understand what factors influenced state adoption of Medicaid waivers to fund HCBS for youth with complex mental health concerns, as well as what factors dissuaded states that have not adopted a Medicaid waiver to serve this population. Findings suggest that decisions around waiver adoption relate to the size and flexibility of Medicaid budgets, the political prioritization of children and families, and ideology about the role of the state in welfare provision.

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11:00 am - 11:30 am **Y&Y A**
**Palma Ceia 4 ~ 30-Minute Paper**

**The Bridge for Resilient Youth in Transition (BRYT) Model: How Schools Succeed with Students with Intensive Tier 3 Mental Health Needs**

Katherine Houle, LICSW, Brookline Center for Community Mental Health, Brookline, MA

Based at the Brookline Center for Community Mental Health, BRYT supports a growing network of school-based programs in Massachusetts addressing the needs of students who experience serious mental illness—students often struggling with depression, anxiety, fear of social rejection, and high risk for academic failure. This session includes an overview of the challenge of BRYT-model programs and the data supporting their efficacy, and of BRYT’s support for schools in starting up and continuously improving BRYT programs.

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Session 76 **Y&YA**

10:00 am - 10:30 am
**Palma Ceia 4 ~ 30-Minute Paper**

**Promoting Positive Outcomes for Justice-Involved Youth: Implications for Policy, Systems, and Practice**

Matthew Pecoraro, MSW, Judge Baker Children’s Center, Boston, MA; Karli Keator, MPH, National Center for Mental Health and Juvenile Justice, Delmar, NY; Christopher Bellonci, MD, Judge Baker Children’s Center, Boston, MA

This session will focus on actionable recommendations and strategies to improve outcomes for justice-involved youth within a state-wide system of care. Participants will explore how systems of care prioritizing evidence-based policies and practices, community-based services, and positive youth development can: address the underlying behavioral, emotional, and developmental needs of justice-involved youth; reduce the number of system involved youth; promote positive youth, family, and community outcomes; and likely lead to significant return on investment.

10:30 am - 11:00 am
**Palma Ceia 4 ~ 30-Minute Paper**

**Fostering Independence or Dependence? Aging Out of Foster Care with a Serious Mental Health Condition**

Rebecca Johnson, MA, DePaul University, Chicago, IL

Youth who are aging out of child system institutional settings with mental health conditions have grown up relying on systems and providers for support. Youth are often entrenched in public systems while rejecting dependence and seeking their understanding of independence. The project utilizes a feminist lens to examine guidelines and youth experiences within a transitional program. The findings highlight how the ideologies within the guidelines of a TLP impact how these youth perceive their transition to adulthood.

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Session 77

10:00 am - 11:30 am
**Garrison Suite ~ 90-Minute Symposium**

**Making Connections to Support Mental Wellbeing Among Young Men and Boys**

Symposium Chair: Dana Fields-Johnson, MPA, Prevention Institute, Oakland, CA

Since 2015, the Prevention Institute, with support from the Movember Foundation and evaluation support from the University of South Florida (USF), has coordinated the Making Connections initiative focused on advancing community-driven prevention efforts for men and boys of color as well as veterans and their families in 14 communities across the United States. This symposium will share progress from the initiative related to building leadership and wellbeing among young leaders across the 14 local sites. Many of the local programs have intentionally engaged young leaders in the development, implementation, and evaluation of their strategies. These activities provide an opportunity to center multi-generational transfer of power, build capacity and leadership and lay a strong community-centered foundation for equity, wellbeing, and upstream prevention.

**Making Connections and Building the Conditions for Engaging and Developing Young Leaders for Wellbeing**

Roosevelt Neely, MPA; Dana Fields-Johnson, MPA, Prevention Institute, Oakland, CA

The Making Connections initiative was developed as a community-centered approach to mental health and wellbeing, and through this intentional approach has been able to provide the opportunity for young leaders to emerge as the core of the work – leading assessment, implementation, and evaluation of strategies.
Assessing Mental Health and Wellbeing with Youth: Considerations for Instrument Modifications and Early Findings

Roxann McNeish, PhD, MSW; Tom Massey, PhD, University of South Florida, Tampa, FL.

Concept Mapping was used to define and create a survey instrument to assess mental wellbeing for men and boys. While piloting the instrument, it was discovered that modifications were necessary to enhance youth’s understanding of various survey questions. After multiple modifications, a youth version of the instrument was created for use with youth. Early findings indicate that youth tend to have more positive perceptions about their circumstance and community than adult community members.

Young Leader Development: Experiences on the Ground

Alejandra Gonzalez, Sinai Health System, Chicago, IL.

With high rates of violence and mental health challenges, several communities, including Chicago’s west side, face a huge need to improve conditions for men and boys. As part of Making Connections, Sinai Health System and others have put in place opportunities for young leaders to lead the charge through Youth Boards of Directors and other mechanisms that guide activities to build connection and mentorship to young boys in the community.

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EXPANDING THE IMPACT OF PUBLIC-PRIVATE PARTNERSHIPS IN SYSTEMS OF CARE

System of Care Grantees are Implementing Open Table’s Faith-Based Model to Support Young People and Families

Fourteen county and two statewide System of Care grantees have or are planning to implement public-private partnership initiatives with the Open Table model. Through the model, grantees tap into community resources to address the barriers that keep people from achieving employment, a livable wage, and life stability – issues that many young adults and families, including those supported by Systems of Care, often face.

System of Care Grantees are Pioneering the Expansion of the Faith-Based Approach Through Open Table’s Community Convening Model

Community Convening builds on Open Table’s Faith-Based model to engage the resources of community sectors. In Open Table, a group of individuals volunteer to serve one person or family and co-invest their relationships and social capital (who and what they know) in the plan of a young adult or family to develop the better life they envision for themselves. Through Community Convening, community sectors - including business, healthcare, faith communities and others – partner with a System of Care to co-invest their resources to support the young adults and families being served. Simply put, the Community Convening model extends Open Tables’s Faith-Based approach to organizations in the community, including business, foundations, academic institutions, etc.

Community Convening in Systems of Care and Communities

County System of Care
The business community is developing a database of business owners and executives willing to provide a job shadowing experience.

Federal Grantee Serving Runaway and Homeless Youth
The faith community is providing Tables and operations funding.

County Department of Children and Families
A healthcare system is forming Tables with 8,500 member staff to serve families and transitional youth.

Law enforcement convening community sectors to support projects to increase economic mobility in neighborhoods experiencing poverty.

What is the Open Table Model?

People experiencing poverty and other life challenges need more than clothing or food to improve their situation – they need relationships. Over the course of a year, Open Table volunteers meet on a weekly basis to work with a person or family seeking support to create positive change. The model educates and trains the volunteers who can be anyone in a community or faith organization. The group of volunteers then forms a “Table,” guided by a “life plan” that outlines goals specific to individuals and families requesting assistance.

Open Table research shows that an individual or family can implement their own visions for better lives with the support of a small group of volunteers who develop reciprocal relationships and invest their relational and social capital in the plan to achieve their own vision for a better life with the support of a small group of volunteers who invest their relational and social capital in the plan to achieve that vision.

HOW TO LEARN MORE

Contact Open Table to learn how the Open Table and Community Convening models can support the objectives of your System of Care.

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The USF College of Behavioral & Community Sciences and the Department of Child & Family Studies (CFS) are committed to providing high quality academic programs, leading edge research, and the active engagement of community partners in teaching and research endeavors. Current CFS academic offerings are:

### Academic Programs

#### Applied Behavior Analysis

www.usf.edu/aba

**Are you interested in working with individuals in all walks of life to help them with behavior change that will increase their quality of life?**

ABA focuses on meaningful behavior change to increase the quality of life for individuals in all walks of life. Our nation’s current demand for skilled behavior analysis practitioners is outpacing the field’s current capacity for training them. USF is helping to meet that demand for practitioners in the fields of developmental disabilities, autism, education, child protective services, child behavior disorders, rehabilitation, mental health, and business and technology.

- **ABA PROGRAM OPTIONS** –
  - Doctoral Program
  - Master’s Program (MS, Online MA)
  - Undergraduate Minor
  - Continuing Education Credits

#### Child & Adolescent Behavioral Health (M.S.)

www.usf.edu/cabh

**Are you interested in working in public or non-profit agencies or schools that work with diverse children and adolescents with behavioral health challenges?**

The Online Master of Science in Child & Adolescent Behavioral Health Program was established in 2014 to support the growing demand for professionals to serve in public and non-profit agencies and schools that work with diverse children and adolescents experiencing behavioral health challenges. Thesis and applied tracks are offered.

- **CABH PROGRAM OPTIONS** –
  - Earn an online master’s degree focusing on:
    - Developmental Disabilities
    - Leadership
    - Research and Evaluation
    - Youth & Behavioral Health
    - Graduate Certificates
      - Children’s Mental Health
      - Leadership in Behavioral Health
      - Translational Research in Adolescent Behavioral Health

#### Rehabilitation & Mental Health Counseling (M.A.)

www.usf.edu/rmhc

**Are you interested in becoming a counselor?**

The USF Rehabilitation and Mental Health Counseling program trains a workforce of professionals that promote quality behavioral health care for all, particularly people with disabilities, including those of a physical, mental, emotional or chemical nature. Both non-thesis and thesis programs provide high quality teaching and inspire learning in rehabilitation and mental health counseling and related disciplines.

- **RMHC PROGRAM OPTIONS** –
  - MS Program
  - Graduate Certificates
    - Addictions & Substance Abuse Counseling
    - Marriage & Family Therapy

#### Graduate Certificates

www.usf.edu/cbcs/cfs/academics/gradcerts.aspx

- Addictions and Substance Abuse Counseling
- Children’s Mental Health
- Leadership in Child & Adolescent Behavioral Health
- Marriage and Family Therapy
- Positive Behavior Support
- Translational Research and Adolescent Behavioral Health

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CFS Research & Training


Limited supplies are also available at this conference.