A MESSAGE FROM LEADERSHIP

Dear Friends,

This past school year has been unlike any other. It encompassed challenges and losses, as well as moments of inspiration and hope. School communities were again faced with navigating the ongoing COVID-19 pandemic, challenges in remote-learning, and racial unrest in the United States and around the world. Students, caregivers, and families continued to adapt to new ways of learning, and teachers looked to find creative ways of engaging their students. Physical isolation coupled with grief and loss has had a profound impact on students’ social, emotional, and behavioral health and wellbeing. Many were also separated from their family and friends and some lost loved ones to COVID-19.

Through this time, the Boston Children’s Hospital Neighborhood Partnerships Program (BCHNP) continued to collaborate with community members and organizations to provide equitable, culturally responsive behavioral health care, consultation, professional development, research, and advocacy in school communities most impacted by systemic inequities. We remain energized by our commitment to social justice and to working intentionally to create changes both within our program and our partnerships.

This annual report shares the impact of our work and successes across BCHNP initiatives, as well as some of the ways in which partnering schools navigated the challenges that students, caregivers, and teachers faced during the 2020-2021 school year. This past year, we partnered with 11 schools and provided behavioral health services to 1,469 students and 1,500 hours of training and consultation to Boston school staff. In addition, we provided 42 professional development workshops with 1,650 participants. Through TAP Online, our free innovative training series for educators about social, emotional and behavioral health, we have shared online workshops nationwide, reaching over 5,400 participants to date.

The BCHNP team has had a remarkable year supporting schools and the community. We thank our clinicians and consultants for their hard work, expertise, compassion and dedication. We appreciate their inspiring commitment and thoughtfulness in their work with schools and in our community every day.

We are pleased to share the BCHNP Annual Report for the 2020-2021 school year highlighting accomplishments both on the ground and virtually. We could not do this work without our partners and supporters. Thank you for your continued commitment to Boston’s youth and families!

With gratitude,

Shella Dennery, PhD, LICSW
Director, BCHNP

David R. DeMaso, MD
Psychiatrist-in-Chief
OUR PROGRAM

Boston Children’s Hospital Neighborhood Partnerships Program (BCHNP) is a school-based behavioral health program committed to working with school communities most impacted by systemic inequities. Our purpose is to promote the social, emotional, and behavioral health and well-being of students, caregivers, and staff in partnership with Boston Public Schools. We collaborate with community members and organizations to provide clinical care, consultation, professional development, research, and advocacy.

VALUES

We strive to engage in our work through actions consistent with our core values. We value:
- Building & Centering Community
- Diversity, Equity, & Inclusion
- High-Quality and Culturally Responsive Care for Each and Every Community Member
- Engaged Learning
- Building Trust Across Difference

GOALS

1. Promote the social, emotional, and behavioral health and well-being of students, caregivers, and school staff
2. Increase access for youth and families to equitable, culturally responsive services and supports in schools
3. Build the capacity of schools and school staff to develop the systems, protocols, and procedures needed to effectively and sustainably address the needs of their students
4. Promote systemic change in behavioral health service delivery and address systemic inequities by shifting to incorporate the political determinants of health and social justice in the understanding of wellness
BCHNP partners with school communities in four primary ways:

1) **FULL SERVICE SCHOOLS**

BCHNP clinicians work onsite in 6 partnering schools to provide a range of clinical, early intervention, and prevention and health promotion services to students, as well as professional development, consultation, and capacity building services to each school community. A BCHNP study of three-year outcomes is published in the *Journal of School Health*.

2) **CLOUGH FOUNDATION TRAINING AND ACCESS PROJECT (TAP) SCHOOLS**

BCHNP-TAP consultants provide high-quality professional development and consultation over the course of a 2 year partnership in 5 schools. The goal of BCHNP-TAP is to build the capacity of these partnering schools to develop the systems, protocols, and procedures needed to effectively and sustainably address the social, emotional, and behavioral health needs of their students. An evaluation of this professional development and consultation model is published in *Children and Schools*.

3) **TAP ONLINE**

Expanding opportunities for capacity building beyond Boston, TAP Online offers free online trainings for educators everywhere on social, emotional, and behavioral health in schools.

4) **COMMUNITY COLLABORATIONS**

To extend its reach further within and beyond Boston, BCHNP also provides targeted professional development, consultation, and/or capacity building services outside of the context of a full service or BCHNP-TAP partnership.

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**Total Number of Partnering Schools:** 11

**Full Service Schools:** 6

**TAP Schools:** 5
THE 2020-2021 SCHOOL YEAR WAS A YEAR UNLIKE ANY OTHER...

WHAT'S ON TEACHERS' MINDS?

When we asked teachers what social, emotional, and behavioral health challenges they believe students, caregivers, and staff are facing during this time, they reported...

SOCIAL ISOLATION AND CONNECTION

“Loss of social skills from being isolated during such important years for social learning.”

DIVERSITY AND BELONGING

“Students that struggle/are struggling as they try to figure out their identity.”

TRAUMA, GRIEF, AND LOSS

“Effects and impacts of physical isolation on relationships; stress and anxiety.”

LEARNING LOSS AND ANXIETY

“Feeling 'behind' academically and socially after a good part of the year learning remotely.”

STUDENT REENGAGEMENT

“Readjusting to the schedule/full day of school, especially since many students now work more hours because of reduced school hours.”
HOW DID BCHNP RESPOND?

SCHOOL STAFF MEMBERS SAID

“The students have dealt with extreme issues this year with the pandemic and loss of family members. The BCHNP clinician was amazing through all of it. She continues to work with families and make sure they get all the services they need.”

“This year it was nice to have someone that was looking out for the teacher’s mental health and providing a space for us to talk.”

“With the surge of depression and student crises, it has been essential to have BCHNP as a resource whether I’m making a referral or just seeking a consult.”

99% Of school staff members agreed that they were satisfied with BCHNP’s support of their school community in responding to the pandemic.
In the midst of a challenging year, BCHNP continued to provide services consistent with the multi-tiered system of supports model (MTSS). This best practice model is aligned with the public health model of stepped care, with each level of service increasing in intensity for students with higher levels of need. Services provided at each partner school are individualized based on a collaborative assessment of each school’s specific needs and resources. The below figure represents this model with data depicting BCHNP’s reach throughout the 2020-2021 school year.

**2020-2021 SCHOOL YEAR**

Total Students Reached: 1,469

- **Clinical Intervention**
  - Crisis Intervention: 29 Students
  - Individual Therapy: 35 Students

- **Early Intervention**
  - Care Coordination: 137 Students
  - Targeted Groups: 51 Students

- **Prevention and Promotion**
  - Classroom Interventions: 1,217 Students

- **Capacity Building**
  - Behavioral Health Workshops: 1,650 Participants
  - Behavioral Health Consultation: 1,496 Hours
CAPACITY BUILDING

In collaboration with teachers, administrators, school staff, caregivers, and other adults in students’ lives, these services aim to support adults’ abilities to address student behavioral health needs through strengthening school-wide systems and building behavioral health knowledge, skills, and self-efficacy.

CONSULTATION

Consultation involves working collaboratively with adults involved in students’ lives in order to effect change. This may be one-on-one, in small or large groups, or through meeting facilitation or participation.

1,159 Hours in Full Service Schools

308 Hours in TAP Schools

29 Hours with Community Collaborators

Primary Topics of Consultation (N = 1,496 Hours)

- Behavioral Health Symptoms and Wellness: 24.8%
- School Climate: 14.8%
- Student Programming and Curricula: 13.9%
- Professional Development: 10.8%
- Behavior Support Plans/Protocols: 12.6%
- Team Infrastructures: 8.3%
- Academic/Learning Challenges: 5.7%
- Other: 9.1%
- Academic/Learning Challenges: 5.7%
- Other: 9.1%

*OTHER: Family engagement, crisis response and management, community partnerships, and social/emotional development

PROFESSIONAL DEVELOPMENT AND CAREGIVER WORKSHOPS

Professional development workshops are presentations, activities, and/or discussions facilitated in partnership with adults in students’ lives to promote knowledge, skills, and self-efficacy to support students and families.

1,650* Total Workshop Participants

- 14 workshops with 718 full service partner school staff members
- 17 workshops with 497 TAP partner school staff members
- 7 workshops with 314 participants from community collaborations
- 4 workshops with 121 caregivers

*Participants were counted each time they attended a workshop.
When asked about capacity building services...

98%
Of school staff members agreed that the BCHNP clinician helps their school better address behavioral health needs

96%
Agreed that the BCHNP clinician helps their school support their students' academic success

SCHOOL STAFF MEMBERS SAID

“The BCHNP clinician is truly part of our school community. She has connected closely with both staff and families. She is always available to listen, provide ideas and support.”

“The BCHNP clinicians were assets to our Health and Wellness Team and provided critical, high quality mental health care to our student body, while also supporting teachers to address student needs as appropriate.”

“The BCHNP clinician provided ongoing and crisis support for teachers and students, innovative classroom curriculum and lessons, expertise and availability, a true sense of partnership and ownership in our school.”
PREVENTION AND PROMOTION

These services involve classroom interventions, community events, and school-wide initiatives with students that teach social-emotional skills, promote healthy social-emotional development, and foster a positive school climate.

CLASSROOM INTERVENTIONS

Classroom interventions involve promoting students’ social and emotional learning through didactic presentations, collaborative learning activities, and discussions facilitated in classrooms.

60
Classroom Interventions
Reaching

1,217
Students With an Average of

3
Sessions Per Intervention

WHAT DOES IT MEAN TO BUILD COMMUNITY AND CONNECTION IN THE CLASSROOM?

Building community and connection amongst students promotes students’ sense of belonging, helping students feel safer to be themselves and ready to learn. Some of the ways BCHNP clinicians facilitated connection in 2020-2021 include...

LABELING AND SHARING FEELINGS

REFLECTING ON IMPORTANT CURRENT EVENTS

LEARNING AND SHARING ABOUT IDENTITIES

BUILDING COPING SKILLS TOGETHER

PRACTICING COMMUNICATION
STUDENTS & SCHOOL STAFF MEMBERS SAID

“This lesson has helped me to have a better look at mental health. It helped me learn about a topic which I haven’t heard about and know what to do since mental health is a daily life thing.”
- Student Classroom Intervention Participant

“The BCHNP clinicians are true practitioners who are able to build a safe and open space for students. They ‘get’ our students and see themselves as equal partners in the work. They work so hard and are open to feedback.”
- School Staff Member Following a Classroom Intervention

“The BCHNP clinician is masterful at talking to students and teachers, understanding our priorities, and equipping us to care for ourselves and our students.”
- School Staff Member Following a Classroom Intervention
EARLY INTERVENTION

For students who are demonstrating early signs of behavioral health concerns, these services involve brief targeted group interventions, referrals for additional supports, and/or care coordination to promote resilience and reduce the risk of developing more extensive concerns.

CARE COORDINATION

Care coordination involves working collaboratively with students, caregivers, school staff, and community professionals to assess needs, support access to appropriate referrals for additional behavioral health services, and facilitate communication amongst adults involved in students’ lives.

137 Students Reached

TARGETED GROUPS

Targeted groups involve working with small groups of students together to build social-emotional skills.

8 Targeted Groups Reaching

51 Students With an Average of

10 Sessions Per Group
“It’s been very fun to be a part of [the group] because we all share similar thoughts, feelings, and struggles and so just talking about it with each other and giving each other advice has been really helpful and understanding as well.”
- Student Targeted Group Participant

“The biggest thing I have noticed is that these students REALLY felt heard and supported this year. Group members looked forward to these meetings each week and expressed that to me on multiple occasions. I think participating in the group helped students feel more connected to school and their peers. Additionally, for one student in particular, I noticed that he was better equipped to deal with stressful situations that came up at school.”
- School Staff Member Following a Targeted Group

“The BCHNP clinician has provided my class with friendship groups upon returning to school after the pandemic which significantly helped my students relearn how to manage challenges that arise within peer relationships. For example, how to ask friends to play, how to resolve conflicts, and how to respond to something that is annoying you. It was wonderful for my kids to learn the language they needed to resolve conflicts on their own.”
- School Staff Member Following a Targeted Group
CLINICAL INTERVENTION

For students with immediate, urgent, or clinically significant behavioral health needs, these services involve providing or referring students for crisis assessment, crisis intervention, and/or ongoing clinical treatment to address these needs.

CRISIS INTERVENTION

Crisis intervention may involve assessment, providing support, discussing coping strategies, referral to more acute care, and/or consultation with other adults involved in students’ lives.

96 Crisis Encounters
With a Median

5 Minute Wait Time

BCHNP’s presence in the school building during a crisis prevented the following adverse outcomes:

- Prevented no service: 80 encounters
- Prevented referral to a higher level of care: 24 encounters
- Prevented disciplinary action: 1 encounter

INDIVIDUAL THERAPY

Individual therapy involves collaboratively setting and addressing goals through a combination of one-on-one student sessions, consultation with other adults involved in students’ lives, and/or referrals to and coordination with additional school and community-based supports.

Primary Focus of Supports for Students Engaged in Individual Therapy (N = 35 Students)

- Trauma/Other Stressors: 19
- Anxiety: 8
- Depression: 7
- Attention/Behavioral Challenges: 1

35 Students Reached With an Average

17 Sessions Per Student and Median

2 Days Wait Time After Referral
“I feel very relieved to talk to somebody who can understand me and not judge me and give me good commentary. I always thought counseling was difficult but I am really happy that I met the BCHNP clinician. It was really helpful. If I didn’t have the BCHNP clinician for counseling, I don’t know what I would be doing with my life.”
- Student Individual Therapy Participant

“Having the BCHNP clinician at the school was so convenient. My daughter has access to a needed service that was not a burden for me because of location and schedule. I hope the service will always be available at school for families like mine. It truly made a difference for my family.”
- Parent of a Student Participating in Individual Therapy

“This student’s confidence and willingness to try work and participate in class has grown so much.”
- Teacher of a Student Participating in Individual Therapy
The Training and Access Project (TAP) Online provides free trainings designed for school communities everywhere. The trainings include self-paced videos that feature interviews with educators and school professionals sharing their own experiences, challenges, and strategies in the classroom.

During this school year, TAP Online released two video series for educators and school professionals. For more information on these and other available TAP Online trainings, please visit our website.

MANAGING ANXIETY IN CHILDHOOD AND ADOLESCENCE

TAP Online now offers resources for families and students. Our first available content for this audience is a documentary and resource guide for families coping with anxiety.

The documentary, released in July 2021, is hosted on Boston Children’s Hospital YouTube channel and features families and individuals sharing their own experiences, struggles and strategies.
TAP ONLINE PARTICIPANTS SAID

“I think (TAP Online) will help me to continue to shift the culture in the schools to more trauma sensitive practices and will also help me to focus more on self-care for staff as well as students.”

“Content was informative and easily understood. Strategies are very doable for teachers and other staff.”

“I think this will help our school become more informed and have an even more nurturing environment.”

“I think it will be great to have our teachers and other staff take the training and then discuss as a school.”
LOOKING AHEAD

As we enter the 2021-2022 school year, BCHNP will continue to support school communities in their work responding to the pandemic in multiple ways.

- BCHNP clinicians will continue to be embedded onsite in partnering Boston schools to provide a comprehensive array of behavioral health services consistent with an MTSS model.
- The Training and Access Project (TAP) will focus on capacity building within the Boston Public Schools’ newly formed Social Work Department, providing both training and consultation.
- TAP Online will continue extending BCHNP’s reach within and beyond Boston through adding a new training to our online series focused specifically on school-based teams. The program will also facilitate a webinar for educators focused on supporting students with anxiety. All projects will continue to feature educators sharing their experiences and strategies in the classroom.
- BCHNP will continue to partner with the Boston Public School’s Behavioral Health Department to support systemic changes aimed at enhancing schools’ capacities to support students’ social, emotional, and behavioral health needs.
- BCHNP will continue to work collaboratively with other community agencies to advocate for statewide legislation focused on improving schools’ capacities to support students’ behavioral health needs. The Children’s Mental Health Campaign will soon release a policy brief developed with support from BCHNP and focused on school-based behavioral health in the Commonwealth of Massachusetts.

We are excited about the year ahead, partnering with schools in Boston and beyond, and sharing future updates about BCHNP initiatives.
ACKNOWLEDGMENTS

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We thank the BCHNP clinicians and staff who are dedicated to supporting students, staff, families, and school communities in the city of Boston and beyond. Through extraordinary circumstances, the BCHNP team continues to be inspiring in their commitment and thoughtfulness in their work with schools. We are grateful and extend appreciation to the BCHNP team.

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