**Emerging Adults**

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 living with mental health conditions (ages 16-30). This track includes research on issues relating to the transition to adulthood for adolescents, and appropriate services for young adults, including developmentally tailored and culturally appealing services and supports and related policy issues.

**Innovations in Wraparound**

In this track, leaders in wraparound management, supervision, evaluation, QA, 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.

**Institute for Translational Research in Adolescent Behavioral Health**

The Institute is a National Institute on Drug Abuse funded (5R25DA031103-01A1) 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 Translational Research track will include presentations of results from four translational research projects along with a panel discussion by leaders in the field regarding current trends in the field of implementation science.

**Child Welfare**

Co-sponsored by Casey Family Programs and the School of Social Work at Florida State University, this track showcases new developments in community-based and other interventions to prevent or treat child maltreatment. It also will include presentations regarding child behavioral health and adult mental health issues, that if not addressed, might require involvement with the child welfare system.

**Native American**

With support from the Indian Country Child Trauma Center at the University of Oklahoma Health Sciences Center, this year's conference is supporting the first-ever Native American Track for those working specifically with Native American populations. Indigenous populations around the globe have had historical challenges in supporting culturally relevant research, practice, and policy improvements. As tribes and urban Indian health organizations are improving their capacity to engage in research and policy, they are developing new models and restoring traditional models for holistic health and well-being of Native youth, families, and the entire community. This track offers a wide range of opportunities to both learn and share with others that are working with tribes, urban Indian health organizations or other indigenous populations toward improving the mental, emotional, physical, and spiritual well-being of youth and their families.

**American Orthopsychiatric Association (Ortho)**

The American Orthopsychiatric Association (Ortho) is an interdisciplinary organization that focuses on the application of mental health research to the creation of humane social policy, the improvement of mental health practice in a manner consistent with human rights, and the prevention of mental health problems. Consistent with these emphases, the theme for Ortho's track is “Changing norms, strategies, and systems to support behavioral health and social justice.” Presenters include several Ortho award winners, and sessions address diverse topics, ranging from enhancing early childhood development via our public systems and innovative strategies for supporting families, to assessing readiness for integrated care, considering responses to stigma in multiple contexts, and providing grief care for bereaved children and families.
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<td>Evaluating Wraparound in Detroit, Wayne County</td>
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<td>Addressing School-Based Behavioral Health Needs: Bringing Everyone to the Table</td>
<td>Habeger; van Vulpen</td>
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<td>Dealing with Distraction: Teacher Perceptions of Students with Attention Deficit/Hyperactivity Disorder</td>
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<td>EPION, 10 Years of Success: Understanding the Development of a Provincial Network for Promoting and Facilitating Care, Research, and Policies for Youth with Psychosis</td>
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<td>106.</td>
<td>Mental Health and Substance Abuse among Civically Engaged Youth</td>
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<td>Investing in Children Will Always Bear Fruit: Using a Participatory Approach to Visualize a Narrative of SOC Accomplishments in the District of Columbia</td>
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<td>Differential Symptom Progression during Trauma Treatment: The Impact of Gender and Placement Status</td>
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<td>Project Launch Missouri</td>
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<td>The Milieu Changes and the Effects on the Treatment of Female Adolescents</td>
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<td>113.</td>
<td>Owen's Place: A Drop-In Resource Center for Transition Age Youth</td>
<td>Goldfarb; McBride</td>
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<td>114.</td>
<td>Young Adult and Staff Experiences with RENEW-DK</td>
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<td>115.</td>
<td>Designing an Evaluation of a Prevention System of Care through Use of Community Facilitation Processes</td>
<td>Mooss; Hartman; Castellanos</td>
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<td>Issues Related to Abused Children on Supporting their Independence and Expecting to Nurse: National Survey of Foster Parents in Japan</td>
<td>Hanada; Nagae</td>
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<td>Prescription Patterns by Psychosocial Stressors among Youth Enrolled in Partial Hospitalization Program</td>
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<td>Medical Conditions, Behavior, and Education: Barriers and Solutions for Evidence-Based Practices</td>
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<td>Juvenile Reentry Court within the Context of Ohio’s Deincarceration Efforts</td>
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<td>120.</td>
<td>Fast Forward in New Hampshire: Family and Youth-Driven Wraparound for the Highest Need Children, Youth, and their Families</td>
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<td>121.</td>
<td>The Wraparound Fidelity Assessment System: A History of National Means and other Psychometrics</td>
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<td>122.</td>
<td>Sex and Menstrual Cycle Effects on Emotion Regulation and Fear Response in Young Adults</td>
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<td>Confidentiality Concerns: Building Open and Trusting Relationships between Youth and Professionals</td>
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<td>Element of Symposium: Client Level Outcomes from HTI</td>
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<td>90-Minute Symposium: Reconceiving Child Welfare Transformation: Community Conversations, Organizational Assessment, Program Implementation, and University Partnership</td>
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<td>Element of Symposium: Trauma Screening in Child Welfare</td>
<td>Lang; Connell</td>
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<td>Element of Symposium: Child Welfare and Behavioral Health Collaboration in Dissemination of Trauma Focused Cognitive Behavioral Therapy</td>
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<td>Lombardti; Wald; Moderator: Wertlieb</td>
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<td></td>
<td>30-Minute Paper: The Policy and Funding Context of Wraparound: New Findings from the Community Supports for Wraparound Inventory (CSWI)</td>
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<td>30-Minute Paper: Using Administrative CANS Data for Benchmarking and Outcomes Monitoring in Statewide Wraparound Initiatives</td>
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<td>30-Minute Paper: Differences in Wraparound Training and Coaching Outcomes as a Function of System Context</td>
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<td>30-Minute Paper: Successful Policy and System Change Efforts by Youth and Young Adult-Led Organizations</td>
<td>Friesen; Buekea; Koroloff</td>
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<td>30-Minute Paper: Integrating Peer Mentors and Youth Voice into Services for Transition Age Youth in Massachusetts</td>
<td>Pratt; Holland; Saulnier; Hunt</td>
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<td>90-Minute Symposium: Preparing Children for Kindergarten: The Impact of HIPPY on Parent Involvement and School Readiness</td>
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<td>Element of Symposium: Early Childhood Education: Preparing Low-Income Children for School Using Florida Home Instruction for Parents of Preschool Youngsters (HIPPY)</td>
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### Monday, March 14, 2016

#### 29th Annual Research & Policy Conference on Child, Adolescent, and Young Adult Behavioral Health – 2016

#### 30-Minute Paper: Evaluating a Cultural Enhancement to Improve Parent Child Relationships among Home Visiting Participants in a Low Resourced Urban Native Community
- **Presenters:** Marfani; Taula-Lieras
- **Room:** Palma Ceia 4

#### 30-Minute Paper: Developing the Infrastructure of Mental Health Services: The Shakapee Experience
- **Presenters:** Stately; BigFoot

- **Presenters:** Sharma; Rollins; Walker; McLean; Brown; Burton
- **Room:** Garrison

#### 30-Minute Paper: A Pilot of a Behavioral Assessment Scale in Early Learning Literacy in Youth in United Way Suncoast ReadingPals Program
- **Presenters:** Chavez; Ivery; Massey; Levin

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### Lunch on Your Own

**11:45 am – 1:45 pm**

Take this opportunity to connect with colleagues and friends. Lunch items will be available for purchase in the hotel atrium on the second floor.

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### Plenary Session – 2:00 PM – 3:30 PM

**Impact of Historical Trauma and Adverse Childhood Experiences on American Indian Health Inequity**
- **Presenter:** Donald K. Warne
- **Room:** Bayshore Ballroom

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### Networking Break — 3:30 PM – 3:45 PM

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### Monday Afternoon Concurrent Sessions — 3:45 PM – 5:15 PM

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<td>90-Minute Symposium: Supporting the Higher Education Goals of Young Adults with Mental Illness: State of the Practice</td>
<td>Chair: Ringeisen; Discussant: Ellison</td>
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<td><strong>Element of Symposium:</strong> State of the Empirical Literature around Supported Education Interventions for Young Adults with Mental Illness</td>
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<td><strong>Element of Symposium:</strong> Research, Practice, and Policy Discussions on Supported Education for Young Adults: An Environmental Scan</td>
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<td><strong>Element of Symposium:</strong> Innovative Efforts to Support Young Adults to Meet their Education Goals: A Site Visit Study</td>
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<td>90-Minute Symposium: Statewide Dissemination of Evidence-Based Practice: Lessons Learned from an 8-Year Initiative</td>
<td>Chair: Lang; Discussant: Stevens</td>
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<td><strong>Element of Symposium:</strong> Towards a Model of EBP Implementation Consultation: Results of a Consultation Needs Assessment from Community-Based Providers</td>
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<td><strong>Element of Symposium:</strong> The Effects of Training and Consultation on Implementation and Child Outcomes in a Statewide EBP Dissemination</td>
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<td><strong>Element of Symposium:</strong> Results of a Juvenile Justice Behavioral Health Collaboration to Disseminate Trauma-Focused Cognitive Behavioral Therapy to Justice-Involved Youth</td>
<td>Restrepo; Connell</td>
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<td>15</td>
<td>30-Minute Paper: Who is My Neighbor? Strategies for Expanding Who We Identify as Neighbors and How We Care for Them</td>
<td>Anderson</td>
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<td>16</td>
<td>30-Minute Paper: A Comprehensive Grief Care™ Model for Bereaved Children and Families</td>
<td>Griese; Farro; Talmi; Silvern; Burns</td>
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<td>90-Minute Symposium: Screening, Brief Intervention, and Referral to Treatment Services for Adolescents and Emerging Young Adults: An Examination of Barriers to Use among Primary Care Providers</td>
<td>Chair: Jones; Discussant: Palmer</td>
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<td><strong>Element of Symposium:</strong> Provider Billing for Adolescent Substance Abuse Prevention Services: Examination of Commercial and Medicaid Claims Data</td>
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<td><strong>Element of Symposium:</strong> Barriers to the Adoption of SBIRT among Pediatricians and Other Primary Care Providers</td>
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<td><strong>Element of Symposium:</strong> Role of Electronic Health Records in Preventing, Identifying, and Treating Substance Use Disorders in Adolescents and Emerging Adults</td>
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### Additional Sessions

- **Evidence-Based Practice**
- **Emerging Adult**
- **Wraparound**
- **Translational Research**
- **Child Welfare**
- **Native American**
- **American Orthopsychiatric Association**
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<td>Bracey; Casiano; Hill; Vanderploeg</td>
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<td>Brennan; Jivanjee; Gonzalez-Prats; Sellmaier</td>
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<td><strong>30-Minute Paper</strong>: Now is the Time-Healthy Transitions: Peer Networking Social</td>
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<td><strong>90-Minute Symposium</strong>: Innovative Long Term Public Academic Partnership for Behavioral Healthcare</td>
<td>Chair: Kang-Yi; Locke; Beidas;</td>
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<td><strong>Element of Symposium</strong>: The Evaluation Center: Public Academic Partnership Connecting Research to Policy and Practice</td>
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<td><strong>Element of Symposium</strong>: School-Based Behavioral Health Program Evaluation Based on Long Term Public Academic Partnership</td>
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<td><strong>Discussion</strong>: A 20 Year History of the System of Care in Tribal Communities: 13 Challenges, 13 Stresses</td>
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<td><strong>30-Minute Paper</strong>: Adapting a Universal Prevention Program to Fit the Multi-Tiered System of Support Framework Utilized in Schools</td>
<td>Jackson; Gonzalez; Menendez; Moore</td>
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<td><strong>30-Minute Paper</strong>: Early Implementation Study: Hillsborough County Children’s Services</td>
<td>Chambers; Roca; Rhodes; Yampolskaya</td>
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<td><strong>30-Minute Paper</strong>: Framing Frameworks: A Qualitative Evaluation of Teens in Action with Implications for Diverse Dissemination</td>
<td>Dunn-Gader; Stavig; Williams; Rose</td>
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<td>Smith; Lidz; Cunningham</td>
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<td><strong>30-Minute Paper</strong>: Vocational Supports for Emerging Adults with Serious Mental Health Conditions and Justice System Involvement</td>
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<td><strong>Discussion Hour</strong>: Implementing the SBDI Toolkit: A Practical Guide to Reduce School-Based Arrests – Part 2</td>
<td>Bracey; Casiano; Hill; Vanderploeg</td>
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<td>30</td>
<td><strong>Discussion Hour</strong>: Parent-to-Parent Peer Support Services: Designing the Research Question</td>
<td>Sweeney; Walker; Gopalan; Bruns</td>
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<td><strong>30-Minute Paper</strong>: Mental Health Literacy: Instrument Development and Relationship to Family Empowerment, Caregiver Self-Efficacy, and Caregiver Strain</td>
<td>Davis; Armstrong; Massey; Mayo; Smith; Tiedemann; Basilik</td>
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<td>32</td>
<td><strong>30-Minute Paper</strong>: Utilizing the Child and Adolescent Needs and Strengths (CANS) Assessment to Identify Patterns and Priorities of Need within a Service Population</td>
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<tr>
<td></td>
<td><strong>30-Minute Paper</strong>: Toward Value-Based Care: Service Utilization, Performance Measurement, and Resource Allocation in a Statewide Children’s Mobile Crisis Service</td>
<td>Lu; Vanderploeg; Marshall</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td><strong>30-Minute Paper</strong>: Assessment of Suicide Prevention Knowledge and Awareness among Student Support Programs and Services Staff and School Administrators at Pasco County Schools</td>
<td>Duncan; Ewing; Chamberlain; Armstrong</td>
<td>Garrison</td>
</tr>
</tbody>
</table>
### Tuesday, March 15, 2016

#### Zumba (Bayshore VII) — 6:00 AM – 6:45 AM

Continental Breakfast 7:00 AM

#### Tuesday Morning Plenary Session — 8:00 AM – 9:45 AM

<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Presenters</th>
<th>RM</th>
</tr>
</thead>
<tbody>
<tr>
<td>PL</td>
<td>Early Intervention in Psychotic Youth Perspectives, State Efforts, and Research Findings</td>
<td>Tamara Sale; Amy Goldstein; Janet Walker</td>
<td>Bayshore Ballroom</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Presenters</th>
<th>RM</th>
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</thead>
<tbody>
<tr>
<td>34</td>
<td>90-Minute Symposium: Now Is the Time-Healthy Transitions (NITT-HT) National Evaluation: Overview, Objectives, Design, and Analysis Plans</td>
<td>Chair: Ringeisen; Discussant: Lichvar</td>
<td>Bayshore V</td>
</tr>
<tr>
<td></td>
<td>Element of Symposium: NITT-HT Evaluation Overview: Design, Logic Model, and Core Evaluation Questions</td>
<td>Haber; Napier; Ryder-Burge</td>
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</tr>
<tr>
<td></td>
<td>Element of Symposium: Evaluating NITT-HT Youth and Young Adult Change: Processes and Outcomes</td>
<td>Ringeisen; Haber; Morgan-Lopez</td>
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</tr>
<tr>
<td></td>
<td>Element of Symposium: Evaluating NITT-HT Systems Change: Processes and Outcomes</td>
<td>Koroloff; Haber; Walker</td>
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<tr>
<td>35</td>
<td>30-Minute Paper: Fundamentals of the Implementation of Evidence-Based Practices: Essential Elements of an Intermediary Organization</td>
<td>Franks; Bory; Baker</td>
<td>Bayshore VI</td>
</tr>
<tr>
<td></td>
<td>30-Minute Paper: Assessing Organizational Readiness: A Critical Step in Improving the Quality of Care</td>
<td>Bory; Franks</td>
<td></td>
</tr>
<tr>
<td></td>
<td>30-Minute Paper: Strategies for Selecting a Good Fit Evidence-Based Practice for Child, Adolescent, and Young Adult Behavioral Health</td>
<td>Martin</td>
<td></td>
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<tr>
<td>36</td>
<td>90-Minute Symposium: Community-Based Work to Reduce Child Maltreatment by Building Parent and Community Support and Resilience</td>
<td>Pecora; Barila</td>
<td>Bayshore VII</td>
</tr>
<tr>
<td></td>
<td>Element of Symposium: Interim Findings from APPI</td>
<td>Babcock; Moore</td>
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<tr>
<td></td>
<td>Element of Symposium: Utilizing an ACEs Framework in a Behavioral Health System of Care</td>
<td>Kaufman; Graham; Marshall; Bracey</td>
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</tr>
<tr>
<td>37</td>
<td>30-Minute Paper: Profile of Recent System of Care Expansion Efforts</td>
<td>Anderson; Gee; Moon</td>
<td>Esplanade I</td>
</tr>
<tr>
<td></td>
<td>30-Minute Paper: A Comparison of Interagency Collaboration and Outcomes in Two Rural Systems of Care</td>
<td>Beeman; Gargan; Painter; Rosenblatt</td>
<td></td>
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<tr>
<td></td>
<td>30-Minute Paper: Impact of Community-Based Participatory Research in a Children's Mental Health Network of Care</td>
<td>Kaufman; Graham; Marshall; Bracey</td>
<td></td>
</tr>
<tr>
<td>38</td>
<td>90-Minute Symposium: Why We Need Cross-Sector Communication between Child Welfare, Animal Welfare, and Juvenile Justice</td>
<td>Chair: Gupta</td>
<td>Esplanade II</td>
</tr>
<tr>
<td></td>
<td>Element of Symposium: A Critical Analysis of the Research on the Link Between Animal Abuse, Child Maltreatment, and Delinquent Outcomes</td>
<td>Randour</td>
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<td></td>
<td>Element of Symposium: Children who Abuse Animals: Characteristics and Risk Factors</td>
<td>Lunghofer</td>
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<tr>
<td>39</td>
<td>30-Minute Paper: Report on User Testing of an Interactive Video and Web-Based “Booster” Training for Core Wraparound Skills</td>
<td>Walker; Ossowski</td>
<td>Esplanade III</td>
</tr>
<tr>
<td></td>
<td>30-Minute Paper: Using User Feedback to Refine an Electronic Behavioral Health Record: TMS-WrapLogic</td>
<td>Hook; Bruns; Hyde</td>
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<tr>
<td></td>
<td>30-Minute Paper: Emerging Trends in Wraparound Training: What Can We Achieve Online?</td>
<td>Matthews; Moon</td>
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<tr>
<td>40</td>
<td>Discussion Hour: Are you being Engaged? Fostering Engagement between Families and Systems: Do We Know What We Are Talking About?</td>
<td>Flake; Moore; Thomas</td>
<td>Palma Ceia 1</td>
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<tr>
<td>41</td>
<td>30-Minute Paper: Service Integration, Service Use, and Costs within Systems of Care</td>
<td>Drilea; Boyce; Maples; Smith</td>
<td>Palma Ceia 2</td>
</tr>
<tr>
<td></td>
<td>30-Minute Paper: Simple and Elegant Statewide “Big Data” using Data Visualization</td>
<td>Rotto; Betzendahl</td>
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<tr>
<td></td>
<td>30-Minute Paper: HIPPI: A Case Study of HIPPI Implementation in Tampa</td>
<td>Brass; Joseph</td>
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<td>42</td>
<td>Discussion: Transforming the Children's System of Care to Build and Support Integration: System and Practice Level Lessons Learned from Maricopa County</td>
<td>Hess; Stauffacher; Gary; Whitfield</td>
<td>Palma Ceia 3</td>
</tr>
<tr>
<td></td>
<td>Discussion: Have a Little Faith in Me: Mental Health Literacy and Pastoral Care Practices of Clergy and their Congregations</td>
<td>McClung</td>
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<td>43</td>
<td>Policy Improvements in Research and Practice with Indian Country to Eliminate Health Disparities for American Indian and Alaska Native Peoples: A Policy Study</td>
<td>Bartgis; Gil-Kashivabara; Roberts</td>
<td>Palma Ceia 4</td>
</tr>
<tr>
<td></td>
<td>Discussion: Tribal and Urban Indian Community Sharing and Innovation Session</td>
<td>BigFoot</td>
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<tr>
<td>44</td>
<td>90-Minute Symposium: Research Project Management: Practical Strategies for Success</td>
<td>Wisdom</td>
<td>Garrison</td>
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</table>
### Research Luncheon — 11:30 AM – 12:45 PM – Bayshore Ballroom

**Research Luncheon**
Bayshore Ballroom
11:30 am - 12:45 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.

### Tuesday Afternoon Concurrent Sessions — 1:00 PM – 2:00 PM

<table>
<thead>
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<th>Title</th>
<th>Presenters</th>
<th>RM</th>
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</thead>
<tbody>
<tr>
<td>45</td>
<td>30-Minute Paper: Implementing RENEW in Denmark: Cultural Influences in the Implementation of Youth-Driven Transition Supports</td>
<td>Hoej; Malloy</td>
<td>Bayshore V</td>
</tr>
<tr>
<td></td>
<td>30-Minute Paper: Evaluation of Future Planning Goals as Progress Indicators of Youth and Young Adults in Transition to Adulthood Programs</td>
<td>Beck; Dresser; Clark</td>
<td></td>
</tr>
<tr>
<td>46</td>
<td>30-Minute Paper: Building Strong Clinicians: Training to Promote Readiness for Supervision and Evidence-Based Treatment</td>
<td>Cannata</td>
<td></td>
</tr>
<tr>
<td></td>
<td>30-Minute Paper: The National Center for Evidence-Based Practice in Child Welfare</td>
<td>Gopalan; Mettrick; Freeman; Kerns</td>
<td></td>
</tr>
<tr>
<td>47</td>
<td>30-Minute Paper: Empowering Youth Aging out of Foster Care</td>
<td>Batista; Johnson</td>
<td></td>
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<tr>
<td></td>
<td>30-Minute Paper: The Use of Evaluation to Strengthen the “System of Care” for Youth: The Example of Supportive Housing Models in Child Welfare</td>
<td>Rosenwald; Landsman</td>
<td></td>
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<tr>
<td>48</td>
<td>30-Minute Paper: Beyond 'Homophobia': Thinking More Clearly about Stigma, Prejudice, and Sexual Orientation</td>
<td>Herek</td>
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<tr>
<td></td>
<td>30-Minute Paper: Intervening with Minority Youth at Risk for Juvenile Justice Involvement</td>
<td>Case</td>
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<tr>
<td>49</td>
<td>60-Minute Symposium: Trauma-Informed Policy and Practice: Implementing Research-Based, Cross-systems Reforms to Improve Outcomes for Children and Youth</td>
<td>Chair: Keator; Discussant: Cocozza</td>
<td>Esplanade II</td>
</tr>
<tr>
<td></td>
<td>Element of Symposium: State-Level Systems Change to Address Childhood Trauma</td>
<td>Greene; Bladen</td>
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<tr>
<td></td>
<td>Element of Symposium: Key Elements to Strengthening our Future: Developing a Trauma-Informed Juvenile Justice Diversion Program for Youth with Behavioral Health Needs</td>
<td>Keator; Doyle</td>
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<tr>
<td></td>
<td>Element of Symposium: Implementing Trauma Screening Practices: A Critical Element to Achieve a Trauma-Informed System of Care</td>
<td>Cruise; Graves</td>
<td></td>
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<tr>
<td>50</td>
<td>60-Minute Symposium: Youth and Family Training Institute: Innovative Approaches to Training, Coaching, and Evaluating High Fidelity Wraparound</td>
<td>Chair: Payne; Discussant: Fagan</td>
<td>Esplanade III</td>
</tr>
<tr>
<td></td>
<td>Element of Symposium: Training and Coaching Platforms that Support Fidelity to the Wraparound Model</td>
<td>Fagan; Payne</td>
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<tr>
<td></td>
<td>Element of Symposium: Evaluation and Continuous Quality Improvement using Standardized High Fidelity Wraparound Chart Documentation</td>
<td>Payne</td>
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<tr>
<td></td>
<td>Element of Symposium: Using Continuous Quality Improvement Strategies that lead to Exciting High Fidelity Wraparound Outcomes</td>
<td>Luke; Fagan; Payne</td>
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<tr>
<td>51</td>
<td>Discussion Hour: Structural Racism, Implicit Bias, Juvenile Justice, and Mental Health: Where do we go from here?</td>
<td>Callejas; Lazor; Serna; Booth; Webster-Bass</td>
<td>Palma Ceia 1</td>
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<tr>
<td>52</td>
<td>Discussion Hour: The Massachusetts Child Psychiatric Access Project: How a Statewide Pediatric Psychiatric Consultation Program can Promote Behavioral Health Integration</td>
<td>Fluet; Strauss; Ravech</td>
<td>Palma Ceia 2</td>
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<tr>
<td>53</td>
<td>Discussion Hour: Breaking Unconscious Bias in Systems of Care: Understanding the Neuroscience of In-Group vs. Out-Group Classification on Systems Change</td>
<td>Ellington</td>
<td>Palma Ceia 3</td>
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<tr>
<td>54</td>
<td>Discussion Hour: Balancing Cultural Competence with Scientific Rigor in American Indian/Alaska Native (AI/AN) Communities</td>
<td>Bartgis; Gil-Kashiwabara</td>
<td>Palma Ceia 4</td>
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<tr>
<td>55</td>
<td>Discussion Hour: Integrating Positive Behavioral Interventions and Supports and Mental Health: Partnering Across School and Community</td>
<td>Romer; Childs; Raulerson</td>
<td>Garrison Suite</td>
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</table>

### Discussion Hour

**Networking Break 2:00 PM - 2:15 PM**

8 – 29th Annual Research & Policy Conference on Child, Adolescent, and Young Adult Behavioral Health – 2016
### Tuesday Afternoon Plenary Session — 2:15 PM – 3:30 PM

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<th>Room</th>
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<tbody>
<tr>
<td>PL</td>
<td>Why Paper Tigers Works: Behind the Scenes with the Children's Resilience Initiative in Walla Walla, WA</td>
<td>Theresa Barila</td>
<td>Bayshore Balroom</td>
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### Networking Break — 3:30 PM – 3:45 PM

### Tuesday Afternoon Concurrent Sessions — 3:45 PM – 5:15 PM

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<th>Presenters</th>
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<tr>
<td>56</td>
<td>30-Minute Paper: University Suicide Prevention: Evaluation of Campus Connect, a Gatekeeper Training Program</td>
<td>Roggenbaum; Petracco; Monahan; Karver</td>
<td>Bayshore V</td>
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<tr>
<td></td>
<td>30-Minute Paper: College in Mind: A Qualitative Study of Emerging Adults with Psychiatric Disabilities and their College Transition Experiences</td>
<td>Murray</td>
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<td>57</td>
<td>30-Minute Paper: Be a Hero for Zero: Implementing the Zero Suicide Framework in Behavioral Health Systems</td>
<td>Lopez; Shapiro; Cohen; Heise</td>
<td>Bayshore VI</td>
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<td></td>
<td>30-Minute Paper: Cornerstone: An Empirically Supported Intervention for Transition-Age Youth with Mental Disorders</td>
<td>Munson; Cole; Ben-David; Sapiro</td>
<td>Bayshore VI</td>
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<td>58</td>
<td>30-Minute Paper: Minnesota's Short-Stayers: A Study of Children Who Have Experienced Short Out-of-Home Placement Stays</td>
<td>Rorhe; Nelson-Dusek; Roberts</td>
<td>Bayshore VII</td>
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<tr>
<td></td>
<td>30-Minute Paper: Family Preservation or Child Safety? How Experience and Position Shape Child Welfare Workers’ Perspectives</td>
<td>Fluke; Corwin</td>
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<td>59</td>
<td>30-Minute Paper: Parenting Stress as a Mediator of Trauma Exposure and Mental Health Outcomes in Young Children</td>
<td>Whitson; Kaufman</td>
<td>Esplanade I</td>
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<tr>
<td></td>
<td>30-Minute Paper: Readiness for Integrated Behavioral Health and Primary Care</td>
<td>Scott; Bastien; Wrenn; Wandersman</td>
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<tr>
<td>60</td>
<td>60-Minute Paper: The Effect of Parental Substance Use on Child Safety and Permanency in Florida</td>
<td>Yampolskaya; Callejas</td>
<td>Esplanade II</td>
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<tr>
<td>61</td>
<td>60-Minute Symposium: Navigating the Implementation Highway: Using “Real Time” Data to Inform Policy and Practice</td>
<td>Espinosa; Evans; Martinez; Henke</td>
<td>Esplanade III</td>
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<td>62</td>
<td>30-Minute Paper: The Georgia Apex Project: Building Infrastructure and Partnerships for the Delivery of School-Based Mental Health Services</td>
<td>Pruett; Pearson; Redd; Farmer</td>
<td>Palma Ceia 1</td>
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<tr>
<td></td>
<td>30-Minute Paper: Sustaining Evidence-Based Mental Health Promotion Interventions in Schools: An On-Going Process</td>
<td>Price; Frankford</td>
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<td>63</td>
<td>30-Minute Paper: Specifying the Maryland Model of Service for Transition-Age Youth &amp; Young Adults</td>
<td>Haber; Davis; Reeder</td>
<td>Palma Ceia 2</td>
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<tr>
<td></td>
<td>Discussion Hour: Building Peer Support Programs: Applying the Principles of an Implementation Science Framework</td>
<td>Albeau-Rivera; Fintel; Masselli</td>
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<td>64</td>
<td>30-Minute Paper: Understanding Caregiver Strain among Parents of Transition-Aged Young People</td>
<td>Brannan; Brennan; Rosenzweig</td>
<td>Palma Ceia 3</td>
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<td></td>
<td>30-Minute Paper: The Effect of Caregiver’s Change in Employment Status on Child’s Behavioral and Emotional Outcomes</td>
<td>Gebresellassie; Spooner; Stephens; Carleton</td>
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<td></td>
<td>30-Minute Paper: Evidence-Based Treatment Implementation: How to Ensure Service Providers’ Buy-in, Participation, and Continuation</td>
<td>Liddle</td>
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<tr>
<td>65</td>
<td>30-Minute Paper: The Intersection of Trauma Exposure and Substance Abuse: How Traumatic Stress Contributes to Polysubstance Misuse in Adolescents</td>
<td>Silman; Sprang</td>
<td>Palma Ceia 4</td>
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<tr>
<td></td>
<td>30-Minute Paper: Meeting the Needs of Commercially Sexually Exploited Youth</td>
<td>McGrath; Armstrong; Johnson; Landers</td>
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<tr>
<td>66</td>
<td>30-Minute Paper: Patterns of Multi-System Service Use and School Dropout among 7th, 8th, and 9th Grade Students</td>
<td>Garcia; Metraux; Culhane</td>
<td>Garrison</td>
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<tr>
<td></td>
<td>30-Minute Paper: The Promise Zone Initiative: A Cross System Approach to School-Based Mental Health</td>
<td>Bandison; Pessin</td>
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</table>
### Tuesday Poster Presentations & Networking — 6:00 PM – 7:30 PM — Bayshore Ballroom

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<thead>
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<th>Title</th>
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<tbody>
<tr>
<td>201 Lean: Improving Treatment while Saving Money</td>
<td>Raines</td>
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<tr>
<td>202 The Association of Exposure to Adverse Childhood Experiences and Receipt of Social Security Disability Benefits</td>
<td>Sexton</td>
</tr>
<tr>
<td>203 Assessing Decision-Making Skills after Foster Care</td>
<td>Olson; Scherer; Cohen</td>
</tr>
<tr>
<td>204 Parent Partners Engaging Families in Wraparound Services</td>
<td>Mickler; Hill; Bilello</td>
</tr>
<tr>
<td>205 Developing a National Data Collection Tool and Mechanism for Family-Run Organizations</td>
<td>Sweeney; Walker; Bruns</td>
</tr>
<tr>
<td>206 Initial Steps to Measure Statewide System of Care Expansion</td>
<td>Cohen</td>
</tr>
<tr>
<td>207 On the Path to Evidence Based: Infant Mental Health Home-Visiting</td>
<td>Zito</td>
</tr>
<tr>
<td>208 Bridging the Divide: Accessing Care for Youth and Young Adults with Co-Occurring Mental Health and Substance Use Disorders</td>
<td>Lamberts; Silver; Childs</td>
</tr>
<tr>
<td>209 Mind the Gap: Optimizing Addiction and Mental Health Service Delivery for Transitional Aged Youth</td>
<td>Conrad; Corace; Schubert; Willows</td>
</tr>
<tr>
<td>210 Medicaid Health Plans and Complex Care Coordination: An Examination of Three Innovative Care Coordination Programs in Georgia's Child Welfare System</td>
<td>Bolt; Chambers-Ashford; Body</td>
</tr>
<tr>
<td>211 Parent Support and Training Services: A Calm Voice in a Storm of Uncertainty</td>
<td>Kann; Davis; Byers; McDonald</td>
</tr>
<tr>
<td>212 A Mixed Methods Evaluation of a Drug Court Serving Young Adults with Narcotic Drug Addictions</td>
<td>McGonigal; Moore; Young</td>
</tr>
<tr>
<td>213 HIPPY Implementation in Florida</td>
<td>Lindsey; Rampersad; Joseph</td>
</tr>
<tr>
<td>214 Efficacy Evaluation of the Pilot Program Let’s Talk: Finding Reliable Mental Health Information and Resources (Grades 7-8)</td>
<td>Montgomery</td>
</tr>
<tr>
<td>215 They Know It’s Safe, They Know what to Expect from that Face: Perceptions Toward a Health and Physical Activity Counseling Program for Children and Families Living with Cystic Fibrosis</td>
<td>Huynh</td>
</tr>
<tr>
<td>216 Building upon a Sense of Place to Develop a Community-Based Wellness Intervention</td>
<td>Hodges; Tirotti</td>
</tr>
<tr>
<td>217 Promoting Positive Pathways to Adulthood: A Knowledge Translation Online Program for Transition Service Providers</td>
<td>Jivanjee; Brennan; Gonzalez-Prat; Sellmaier</td>
</tr>
<tr>
<td>218 Honest, Open, Proud (HOP) High School: Helping Youth Develop Strategic Disclosure Skills for Sharing their Mental Health Challenges</td>
<td>Urbashich; McKenzie-Dicks</td>
</tr>
<tr>
<td>219 Adolescent on Parent Violence: Development and Testing of a Group Intervention</td>
<td>Reid; Dollard</td>
</tr>
<tr>
<td>220 Examining Preliminary Outcomes of Mental Health and Substance Use in Hillsborough Family Dependency Treatment Court (FDTC)</td>
<td>Bjorlie</td>
</tr>
<tr>
<td>221 A Broad Look at the Success of Placement Decisions across a System of Care’s Services</td>
<td>Jackson; Okado; Izmirian; Keir; Mueller</td>
</tr>
<tr>
<td>222 Gender Responsive Systems of Care</td>
<td>Slavin; Jackson</td>
</tr>
<tr>
<td>223 Parent-School Partnership: Turning the ‘Difficult’ Parent into a Raving Fan</td>
<td>Davis</td>
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<tr>
<td>224 Grandparents as Parents: Understanding the Relationships between Trauma, Relational Conflict, Parenting Stress, and Emotional Well-Being</td>
<td>Eslinger</td>
</tr>
<tr>
<td>225 The Behavioral Health Disparities Impact Statement: Using Data to Effectively Identify Strategies to Eliminate Disparities and Inform Technical Assistance Strategies</td>
<td>Waetzig</td>
</tr>
<tr>
<td>226 Effective Social Marketing in a Rural System of Care</td>
<td>Moon; Goudy; Croft</td>
</tr>
<tr>
<td>227 Readiness for Change: Fidelity EHR Implementation and Training Model for Wraparound Service Organizations</td>
<td>Hyde; Curry; Haley; Bergerson; Bruns; Hook</td>
</tr>
<tr>
<td>228 Results from Year One of a Randomized Control Trial of High-Fidelity Wraparound for Dually-Involved Youth</td>
<td>Coldiron; Hensley; Thomas</td>
</tr>
<tr>
<td>229 Humor Group as a Therapeutic Tool in Developing Mentally Healthy Children and Adolescents</td>
<td>Green</td>
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</table>
### Wednesday March 16, 2016

#### Plenary Session – 9:00 AM – 9:45 AM

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

**Closing Comments**

*Presenters:***

- Larka Huang
- Mario Hernandez

*RM:***

- Bayshore Ballroom

#### Networking Break 9:45 AM – 10:00 AM

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

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<tbody>
<tr>
<td>67</td>
<td><strong>90-Minute Symposium:</strong> Young Adult Voice in the Now is the Time — Healthy Transitions (NITT-HT) Initiative</td>
<td>Chair: Costa; Discussant: Lichvar</td>
<td>Bayshore V</td>
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<td><strong>Element of Symposium:</strong> Background and Rationale for Youth and Young Adult Voice in the NITT-HT Evaluation</td>
<td>Haber; Davis</td>
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<td><strong>Element of Symposium:</strong> Experiences of a Young Adult Participatory Action Research Team on the NITT-HT Evaluation</td>
<td>Costa; Duperoy</td>
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<td>68</td>
<td><strong>90-Minute Symposium:</strong> Building Agency Capacity to Implement Evidence-Based Trauma Treatments</td>
<td>Chair: Strand; Discussant: Popescu</td>
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<td><strong>Element of Symposium:</strong> Organizational Readiness in the Installation Stage of Implementing Evidence-Based Trauma Treatments</td>
<td>Jones</td>
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<td><strong>Element of Symposium:</strong> Trauma-Informed Organizational Change at the Initial Implementation Phase: Enhancing Clinical Competence</td>
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<td>69</td>
<td><strong>90-Minute Symposium:</strong> What Have We Learned about the Needs of Children and Effective Treatment over the Past Two Decades Using the CANS?</td>
<td>Lyons</td>
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<td><strong>30 Minute Paper:</strong> Children and Youth with Early Onset Psychosis Show Improvements in Systems of Care</td>
<td>Carleton; Spooner</td>
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<td>70</td>
<td><strong>30 Minute Paper:</strong> Capturing Resilience among Youth in Psychiatric Residential Treatment: Using Big Data to Inform Innovative Uses of the Ohio Youth Problem, Functioning, and Satisfaction Scales</td>
<td>Damman; Byers; Kapp</td>
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<td><strong>30 Minute Paper:</strong> How are Youth Doing After Discharge? A Multiservice Agency's Experience Implementing a Follow-Up Study</td>
<td>Sabalaukas; Putnins</td>
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<td>71</td>
<td><strong>90-Minute Symposium:</strong> Improving the Efficiency of the Behavioral Health Service Cascade and Promoting the Use of Evidence-Based Substance Use Disorder Screening, Assessment, and Treatment Practices in Juvenile Justice and Behavioral Health Systems of Care</td>
<td>Chair: Dennis</td>
<td>Esplanade II</td>
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<td><strong>Element of Symposium:</strong> Using Process Maps to Guide Cross-System Implementation Activities</td>
<td>Wasserman; Knight</td>
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<td><strong>Element of Symposium:</strong> Use of Behavioral Health Services Cascade Data to Identify Unmet Substance Use Treatment Services Needs among Adolescent Offenders</td>
<td>Robertson; Belenko; Dennis</td>
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<td><strong>Element of Symposium:</strong> Goal Achievement Training (GAT): Turning the Site Feedback Report into Attainable Goals and Progress towards System Change</td>
<td>Fisher; Nager; Baird-Thomas</td>
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<td>72</td>
<td><strong>90-Minute Symposium:</strong> Deja Vu All Over Again: Expansion and Integration within a Mature System of Care</td>
<td>Manley</td>
<td>Esplanade III</td>
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<td>73</td>
<td><strong>30 Minute Paper:</strong> The Strengths Model for Youth: An Innovative Approach to Case Management Services</td>
<td>Grube; Mendenhall</td>
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<td><strong>30 Minute Paper:</strong> Evaluating the Effectiveness of Co-located Peer Support in Juvenile Services: Preliminary Findings from Maine’s Expand ME Initiative</td>
<td>Goan; Clark; Manzer</td>
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<td><strong>30 Minute Paper:</strong> Using Longitudinal Data to Inform Sustainability Planning: Findings from a Summative Evaluation of a Transition-Age Youth Project</td>
<td>Lindquist-Grantz; Downing; Rademacher; Jones</td>
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<td><strong>30 Minute Paper:</strong> Following Their Lead: Going Beyond Advisory Councils to Engage Youth as Research Partners</td>
<td>Lindquist-Grantz; DeJongheere; Bruck; Vaughan</td>
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<td><strong>30 Minute Paper:</strong> Making Emerging Adults with Mental Health Needs a Priority in Canada: Creating Consensus through National, Provincial, and Regional Perspectives</td>
<td>Papadopoulos; Canning; Davidson; Cappelli</td>
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<td><strong>30 Minute Paper:</strong> Mental Health First Aid: Impact Study with a Young Adult Population</td>
<td>James; Batsche</td>
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<td><strong>Discussion Hour:</strong> Immigrant Mother, Adolescent, and Teacher Experiences of Mental Health Literacy and Responses toward School Mental Health Initiatives</td>
<td>Montgomery</td>
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<td><strong>Discussion Hour:</strong> The Mirror Project: Leadership and Organizational Cultural and Linguistic Competency Development</td>
<td>Webster-Bass; Bilello; Guerrero</td>
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<td>77</td>
<td><strong>30 Minute Paper:</strong> The Health Under Guided Systems (HUGS) Program</td>
<td>Kuzbyt; Hunter</td>
<td>Garrison</td>
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<td><strong>30 Minute Paper:</strong> ACCESS Mental Health CT: Connecting Pediatric Primary Care with Child Psychiatry</td>
<td>Garrigan; Sharp</td>
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*Conference Adjourns 11:30 AM*
Poster Presentations & Networking Reception
5:00 pm - 6:30 pm ~ Bayshore Ballroom

101. Early Pathways: An In-Home, Evidence-Based Program for Young Children with Behavior Problems in Poverty
Robert Fox, PhD, Marquette University, Milwaukee, WI
The Early Pathways program was developed over 12 years by the Behavior Clinic, a partnership between Marquette University and a large community-based Birth to Three Program. The clinic provides an in-home, evidence-based program for children under five who have been referred for significant behavior and emotional problems who live in poverty. The clinic serves over 400 children each year. This poster presentation will share program outcomes and research findings.

102. Evaluating Wraparound in Detroit, Wayne County
Bayley Zito, PhD, The Guidance Center, Southgate, MI
Monitoring the effectiveness of Wraparound is uniquely challenging as implementation can vary widely. Peer-reviewed work finding successful improvement of outcomes most often comes from small projects with a high degree of oversight, training, and supervision. Wayne County provides Wraparound services to over 500 families annually. Current measures of fidelity in Wayne County focus solely on facilitator performance. An important component currently missing from these evaluations is youth and parent voice.

103. Addressing School-Based Behavioral Health Needs: Bringing Everyone to the Table
Amy Habeger, MSW, Kimberly van Vulpen, PhD, Salisbury University, Salisbury, MD
The Eastern Shore School Mental Health Coalition is a partnership between the nine rural counties on Maryland’s Eastern Shore. Disparities in child and adolescent mental health have been identified. Many regional stakeholders believe school-based programs must be developed and enhanced to address these disparities. The results of this exploratory study identify needs and gaps in both behavioral health services and workforce training on the Shore.

104. Dealing with Distraction: Teacher Perceptions of Students with Attention Deficit/Hyperactivity Disorder
Kay Lawrence, MSN, University of South Carolina Aiken, Aiken, SC; Robin Estrada, PhD, University of South Carolina, Columbia, SC
Teachers experience challenges interacting with students with attention deficit/hyperactivity disorder (ADD/ADHD). Using a descriptive qualitative approach, we analyzed semi-structured teacher interviews, revealing themes of experiencing guilt after problematic ADD/ADHD student interactions, learning about ADD/ADHD through colleagues and family, and challenges with providing optimal educational experiences and individualized services for their students. Implications include professional education, effective classroom strategies, and teacher/healthcare provider collaboration to develop targeted interventions designed to positively affect child and teacher mental well-being.

105. EPION, 10 Years of Success: Understanding the Development of a Provincial Network for Promoting and Facilitating Care, Research, and Policies for Youth with Psychosis
Gretchen Conrad, PhD, The Royal Ottawa Mental Health Centre, Ottawa, CAN; Chiachen Cheng, MD, CMHA Thunder Bay, CAN; Terry Bedard, BA, North Bay Regional Health Centre, North Bay, CAN
The Early Psychosis Intervention Ontario Network (EPION) is a provincial coalition of over 50 early psychosis intervention (EPI) programs, one of the largest EPI networks globally. It has evolved to meet the changing needs of its membership, supporting evidence-based care, research, and policy development & implementation for youth and families with complex mental health needs. This presentation highlights the multi-stakeholder approach in EPION. Key points and challenges to remaining current and relevant will be shared in this poster presentation.

106. Mental Health and Substance Abuse among Civically Engaged Youth
Alicia Lu, BA, The Warren Alpert Medical School at Brown University, Providence, RI
Few research studies have examined the relationship between civic engagement and health outcomes, despite evidence that social networks contribute to positive health outcomes and that civic engagement facilitates social networks. This poster session examines mental health and substance use among 440 low-income civically-engaged youth in California. Preliminary findings show that civically-engaged youth express higher rates of mental health problems and substance use than non-civically-engaged counterparts. This highlights civic engagement organizations as an important site of intervention.
107. Investing in Children will Always Bear Fruit: Using a Participatory Approach to Visualize a Narrative of SOC Accomplishments in the District of Columbia

Brian Pagkos, PhD, CCNY, Inc., Buffalo, NY; Thomas Houston III, MBA, Carol Zahm, PhD, Department of Behavioral Health, Washington, DC

The District of Columbia’s System of Care (SOC) Gateway project team utilized participatory evaluation approaches to develop a visual representation of the history and accomplishments of the SOC through perspectives of family members and stakeholders. This poster will review the approach, guide participants through the evolution of findings through inclusive practices, demonstrate results, and discuss next steps for using the visualization to celebrate successes, increase mental health awareness and community participation in the SOC.

108. Assessing the Implementation of Trauma-Informed Care through Organizational Cultural Change: Survey Dissemination and Findings from an Organizational Assessment of Children’s Home Society of Florida

Melissa Tirotti, MPH, Sharon Hodges, PhD, University of South Florida, Tampa, FL

In recognition of the impact of trauma on the youth and families they serve, the Children’s Home Society of Florida, Inc. has prioritized becoming a more trauma-informed organization. To assess how well CHS is carrying out this priority of becoming more trauma-informed, a survey of the status of trauma-informed (TI) care was developed and administered to highlight progress and assist in planning the next steps toward further TI care within CHS.

109. Collecting Histories of Education and Employment Activities from Young Adults with Serious Mental Health Conditions

Kathryn Sabella, MA, Kathleen Biebel, PhD, Transitions RTC, Systems and Psychosocial Advances Research Center, Dept of Psychiatry, University of Massachusetts Medical School, Worcester, MA

Young adulthood is a critical time for career exploration and establishment. Youth and Young Adults (Y&YAs) with serious mental health conditions (SMHCs), including young parents, routinely experience barriers to education and employment that can significantly impact their career trajectories. Through a one-time, semi-structured interview, this study seeks to describe the education and employment activities of Y&YAs with SMHCs, explore barriers and facilitators to these activities, and understand how parenting affects these experiences. Methods and preliminary findings will be described.

110. Differential Symptom Progression during Trauma Treatment: The Impact of Gender and Placement Status

Sarah Ascierno, MSW, College of Medicine, Department of Psychiatry, University of Kentucky Center on Trauma and Children, Lexington, KY; Ginny Sprang, PhD, College of Medicine, Department of Psychiatry, University of Kentucky Center on Trauma and Children, Lexington, KY

This study examines symptom fluctuation during Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) amongst a sample of polyvictimized children ages 3-18 (N=100). Aggregate scores on the Child Behavior Checklist and UCLA-PTSD-R1 were mapped onto treatment components and compared based on gender and placement status. T-tests examined the significance of mapped differences. Differential symptom trajectories were observed and findings suggest that males and females may differentially respond at various stages of treatment. Implications for treatment will be shared during this poster presentation.

111. Project Launch Missouri

Liz Sale, PhD, Claire Ward, MSW, Rachel Kryah, MSW, Missouri Institute of Mental Health, University of Missouri - St. Louis, St. Louis, MO

Project LAUNCH is a five year SAMHSA funded initiative designed to enhance the well-being of young children. Missouri received two grants; one in central Missouri and a second in North St. Louis. Both grants introduced innovative strategies to address child well-being, including “Parent Cafés” that promote parent engagement and family well-being and “EC-PBS,” an early childcare professional coaching program combining CSEFEL and PBIS frameworks. Both approaches showed positive effects, suggesting widespread dissemination.

112. The Milieu Changes and the Effects on the Treatment of Female Adolescents

Jason Raines, MBA, MPA CLS, KidsPeace, Orefield, PA

By modifying the three environmental factors, KidsPeace has shown using a 12 month pre and a 12 month post implementation comparison a significant decrease in the following female houses: the restraint rate, number of suicide attempts, the number of self-injurious behavior incidents, the number of client to staff aggression incidents and the number of client to client aggression incidents.
113. **Owen’s Place: A Drop-In Resource Center for Transition Age Youth**

Pnina Goldfarb, PhD, Brian McBride, Wraparound Milwaukee, Milwaukee, WI

The practice model of the Young Adult Transition program informs and is incorporated into Owen’s Place, the Drop-in Resource Center. The inclusion of multiple transition to adulthood concepts into the operations of the Center strengthens its appeal and reinforces access, voice and ownership. Planning through functional domains, providing educational opportunities and maintaining a youth-led program further reinforces the model. Demographic data, patterns of attendance, and satisfaction with the programs of Owen’s Place will be presented.

114. **Young Adult and Staff Experiences with RENEW-DK**

Michaela Hoej, PhD student, Mental Health Center Ballerup, The Capital Region Psychiatry, Denmark, Ballerup, DK; Sidse Arnfred, MD, Psychiatry West, Region Sealand, DK

This poster presents how a mixed methods evaluation of the RENEW model in two different service sector systems in Denmark is organized and structured.

115. **Designing an Evaluation of a Prevention System of Care through Use of Community Facilitation Processes**

Angela Mooss, PhD, Megan Hartman, BS, Behavioral Science Research Institute, Miami, FL; Lina Castellanos, Director of Prevention at South Florida Behavioral Health Network, Miami, FL

This presentation will focus on the early phases of a youth substance use prevention evaluation process including the needs assessment and planning phases in which evaluators used community facilitation sessions to generate system-level prevention and evaluation plans. Three community facilitation sessions were held over three months that led to the development of localized prevention goals across 10 providers as well as a comprehensive evaluation plan to be used for System of Care evaluation.

116. **Issues Related to Abused Children on Supporting their Independence and Expecting to Nurse: National Survey of Foster Parents in Japan**

Hiroko Hanada, DR, Masaharu Nagae, MN, Graduate School of Biomedical Sciences, Nagasaki University, Nagasaki, JP

Questionnaires were sent to 1,186 foster parents in Japan. A total of 358 responses were analyzed with Chi-square test. The result suggested that foster parents in family homes recognized the issues “Acquire Scholastic ability suitable for age” and “Stress coping skills” more than the personal families do (p ≤ 0.05). Foster parents in family homes were worried that they do not “Acquire Basic life skills” and “Acquire Social rules (e.g. greetings, manner)” more than the personal families do (p ≤ 0.05).

117. **Prescription Patterns by Psychosocial Stressors among Youth Enrolled in Partial Hospitalization Program**

Kathy Dowell, PhD, University of Minnesota Duluth, Duluth, MN

A review of medical records of 60 youth participants (mean age = 12.87, sd = 2.70) in a partial hospitalization program compared psychosocial stressors reported at intake with diagnosis and medication. Results indicate that participants prescribed stimulant medication reported significantly more psychosocial stressors compared to participants with no stimulant prescription. An average of 7.73 (sd = 2.72) stressors were reported. A review of commonly reported stressors and implications for treatment will be included.

118. **Medical Conditions, Behavior, and Education: Barriers and Solutions for Evidence-Based Practices**

Michelle Davis, MEd, ABCs for Life Success, LLC, Nokomis, FL

Students with medical conditions such as ADHD, Tourette’s Disorder, and other complex medical disabilities may exhibit behavioral, social, emotional, and academic difficulties which affect learning. Too often, students with medically-based disabilities are identified and educated as students with emotional and behavioral disabilities. This perspective often fails to address the student’s medical conditions along with other needs. This poster presentation will share barriers and solutions to the provision of evidence-based practices.

119. **Juvenile Reentry Court within the Context of Ohio’s Deincarceration Efforts**

David Hussey, PhD, Chris Stormann, PhD, Rodney Thomas, MS, Tugba Olgac, MSSA, Begun Center, Case Western Reserve University, Cleveland, OH

Ohio’s community-based treatments and deincarceration programs have reduced commitments to state facilities from 2,500 to under 500. This poster presents results from a SAMHSA federally funded ORP-J court reentry program and its impact on criminal offending, behavioral health, and substance abuse for the remaining group. Recovery environment, treatment resistance, and treatment readiness do not appear to be significantly different for criminal recidivists and non-recidivists in this population.
120. **Fast Forward in New Hampshire: Family and Youth-Driven Wraparound for the Highest Need Children, Youth, and their Families**  
Adele Gallant, MS, DCYF Bureau of Well-Being, NH Department of Health and Human Services, Concord, NH; JoAnne Malloy, PhD, Institute on Disability, University of New Hampshire, Concord, NH; Kathleen Abate, Granite State Federation of Families, Concord, NH  
There is a growing evidence base for the efficacy of high quality Wraparound to improve the behavioral outcomes and community functioning of children and youth with significant emotional and behavioral challenges and their families. This poster presentation will highlight the implementation of Wraparound in a System of Care project in New Hampshire called Fast Forward.

121. **The Wraparound Fidelity Assessment System: A History of National Means and Other Psychometrics**  
April Sather, MPH, Hattie Quick, MSW, Alyssa Hook, BS, Isabella Esposito, BS, Public Behavioral Health and Justice Policy, University of Washington, Seattle, WA  
The Wraparound Fidelity Assessment System is a multi-method approach to assessing the quality of individualized care planning and management for children and youth with complex needs and their families. This poster presentation will present national means data, collected over the span of eight years, for the Wraparound Fidelity Index, v. 4 (WFI-4), the Team Observation Measure (TOM), and the Wraparound Fidelity Index, v. EZ (WFI-EZ). Tools measure adherence to the principles, activities, phases, and key elements of wraparound.

122. **Sex and Menstrual Cycle Effects on Emotion Regulation and Fear Response in Young Adults**  
Mariah Corey, Kennesaw State University, Kennesaw, GA  
This poster presentation will share the results of a study that investigated the effect of hormonal differences on emotion regulation and fear extinction in young adults in college. The first phase of research measured autonomic nervous system (ANS) activity in response to negative and positive valenced images. Results trended in the direction of our hypothesis, showing that females in the follicular phase (low estrogen) showed higher arousal. The second phase of research is measuring how hormonal differences affect fear potentiated startle. This research is important for the young adult population because it helps provide an understanding of factors that may contribute to anxiety disorders.

123. **Confidentiality Concerns: Building Open and Trusting Relationships between Youth and Professionals**  
Lydia Proulx, BS, Chandra Watts, Parent/Professional Advocacy League, Boston, MA  
In this poster presentation, Youth MOVE Massachusetts will outline the process of youth-led research through focus groups and short surveys for participants. Youth MOVE Massachusetts will also provide the demographics of the participants, the themes that emerged, and recommendations by youth.

124. **Understanding the Link Between Knowledge and Adolescent Reproductive Health Policy in Zimbabwe**  
Similo Ngwenya, MSC, National University of Science and Technology, Bulawayo, ZWE  
This poster presentation examines the role of knowledge in informing the adolescent reproductive health policy in Zimbabwe. The socio-cultural barriers to knowledge utilization at policy level will be shared.
Monday Morning Plenary

8:00 am – 9:45 am ~ Bayshore Ballroom

Welcome and Overview

Mario Hernandez, PhD, Dept. of Child & Family Studies, University of South Florida, Tampa, FL; Scott Bryant-Comstock, Children’s Mental Health Network

Place, Race, and Disease: Addressing the Roots of Behavioral Health Disparities

Brian D. Smedley, co-founder and Executive Director of the National Collaborative for Health Equity, Washington, DC

Many in communities of color face high levels of risk for behavioral health problems, including substance abuse and mental illness. Much of the research on the etiology of these disparities focuses on individuals and families, but fails to consider how social, economic, and environmental attributes of neighborhood, schools, and workplaces can also contribute to risk for behavioral health problems. This talk will focus on the role of place, and in particular, residential segregation as a root cause of substance abuse and mental illness. Special attention will be devoted to policy strategies that address community level health risks, as well as the role of racism as a determinant of health

About the Presenter

Brian D. Smedley is co-founder and Executive Director of the National Collaborative for Health Equity, a project that connects research, policy analysis, and communications with on-the-ground activism to advance health equity. In this role, Dr. Smedley oversees several initiatives designed to improve opportunities for good health for people of color and undo the health consequences of racism. From 2008 to 2014, Dr. Smedley was Vice President and Director of the Health Policy Institute of the Joint Center for Political and Economic Studies in Washington, DC, a research and policy organization focused on addressing the needs of communities of color. Formerly, Dr. Smedley was Research Director and Co-Founder of a communications, research and policy organization, The Opportunity Agenda, which seeks to build the national will to expand opportunity for all. Prior to helping launch The Opportunity Agenda, Dr. Smedley was a Senior Program Officer in the Division of Health Sciences Policy of the Institute of Medicine (IOM), where he served as Study Director for the IOM reports, In the Nation’s Compelling Interest: Ensuring Diversity in the Health Care Workforce and Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care, among other reports on diversity in the health professions and minority health research policy. Dr. Smedley came to the IOM from the American Psychological Association, where he worked on a wide range of social, health, and education policy topics in his capacity as Director for Public Interest Policy. Prior to working at the APA, Dr. Smedley served as a Congressional Science Fellow in the office of Rep. Robert C. Scott (D-VA), sponsored by the American Association for the Advancement of Science. Among his awards and distinctions, in 2013 Smedley received the American Public Health Association’s Cornely Award for social activism; in 2009 Smedley received the Congressional Black Caucus Congressional Leadership in Advocacy Award; in 2004 he was honored by the Rainbow/PUSH coalition as a “Health Trailblazer” award winner; and in 2002 he was awarded the Congressional Black Caucus “Healthcare Hero” award.

Join us for Zumba

6:00 am - 6:45 am ~ Bayshore VII
Start the morning right with Zumba
Monday Afternoon Plenary

2:00 pm – 3:30 pm ~ Bayshore Ballroom

**Impact of Historical Trauma and Adverse Childhood Experiences on American Indian Health Inequity**

Donald K. Warne, MD, MPH, Chair, Department of Public Health, North Dakota State University, Fargo, ND

The American Indian (AI) population suffers from significant health disparities. Death rates from diabetes, cancer, infant mortality, suicide and other causes are higher among AIs. Numerous psychosocial influences, including a history of genocide and boarding school experiences have led to unresolved historical trauma and its associated poor health outcomes. Adverse Childhood Experiences are also a strong predictor of risk for numerous chronic and behavioral health conditions. Adverse adulthood experiences, including poverty, racism, substance abuse, and others lead to depression, anxiety, and poor health outcomes. Dr. Warne will discuss the social circumstances that can have an impact on the quality of parenting skills for the next generation, leading to continued inter-generational health disparities. Dr. Warne will conclude his remarks with a call for additional research into the prevention and mitigation of psychosocial influences and social determinants of health that is needed to ensure improved policy and program development.

**About the Presenter**

Donald K. Warne, MD, MPH, is the Chair of the Department of Public Health at North Dakota State University, and he serves as the Senior Policy Advisor to the Great Plains Tribal Chairmen’s Health Board. In addition, he is an adjunct clinical professor at the Arizona State University Sandra Day O’Connor College of Law where he teaches American Indian Health Policy. Dr. Warne is a member of the Oglala Lakota tribe from Pine Ridge, South Dakota and comes from a long line of traditional healers and medicine men. He received his MD from Stanford University in 1995 and his Master of Public Health from Harvard University as a Commonwealth Fund/Harvard University Fellow in Minority Health Policy in 2002. Dr. Warne is a Certified Diabetes Educator (CDE), and he is a Diplomate of both the American Board of Family Practice and the American Board of Medical Acupuncture. In addition to Minority Health Policy, he completed a Fellowship in Alternative Medicine from the Arizona Center for Health and Medicine.

Donald Warne’s work experience includes several years as a primary care and integrative medicine physician with the Gila River Health Care Corporation in Sacaton, AZ, and three years as a Staff Clinician with the National Institutes of Health in Phoenix where he conducted diabetes research and developed diabetes education and prevention programs in partnership with tribes.
Session 1

10:00 am - 11:30 am

90 Minute Symposium ~ Bayshore V

Finding Gold: Results from National Outcome Measures for Healthy Transition Initiative

Symposium Chair: Gwen White, MSW, Child Mental Health Technical Assistance Center, Georgetown University, Murrysville, PA;
Discussant: Brianne Masselli, BA, Youth M.O.V.E. National, Decorah, IA

The Healthy Transition Initiative was a five year grant program funded by SAMHSA to explore the most effective ways to deliver transition-oriented services that would result in positive outcomes for young adults with serious mental health challenges. Funding was provided to seven states. Data about each individual participant and their outcomes were collected through the National Outcome Measure portion of GPRA. These data have now been analyzed and provide a picture of significant change over time for HTI participants.

Overview of the Healthy Transition Initiative (HTI)

Diane Sondheimer, PhD, Child, Adolescent and Family Branch, Center for Mental Health Services, SAMHSA, Rockville, MD

Young adults with serious mental health conditions have the poorest outcomes among young people with disabilities. Recognizing the need for improved services, SAMHSA funded the Healthy Transition Initiative (HTI) in 2009. The client level goals of HTI were to improve outcome for young adults including improved mental health symptoms, increased social connectedness and improved life functioning. The information gained from the seven HTI grantees was instrumental in the shaping of the current grant program, NITT-HTI.

Demographic Characteristics of HTI Participants

Nancy Koroloff, PhD, Research and Training Center on Pathways to Positive Futures, Portland State University, Portland, OR

Fifteen hundred and forty two young adults were enrolled in the Healthy Transition Initiative. Most participants were 16 to 20 years old, however, 33% were over the age of 21. Half were male, 33% were African American and 8% were Latino. 23% were employed, full or part time, and 50% indicated they were unemployed but looking for work. Most (over 90%) had not been in jail, detox, psychiatric hospital or emergency room within 30 days before baseline.

Client Level Outcomes from HTI

Kristin Painter, PhD, Division of Service and System Improvement, Center for Mental Health Services, SAMHSA, Rockville, MD; Steven Reeder, M.Ed, CPRP, CRC, Adult Services, Behavioral Health Administration, Maryland Department of Health and Mental Hygiene, Catonsville, MD

This paper reports on mental health, daily functioning, and social connectedness outcomes for youth and young adults with serious mental health challenges who participated in the Healthy Transitions Initiative. Data were collected using the National Outcomes Measure (NOM) administered at baseline, at six-month reassessments. Univariate analysis showed significant improvement from intake to six months and intake to 12-months across all three outcomes significant pre-test differences based on grantee (state) for social connectedness and daily functioning.

Session 2

10:00 am - 11:30 am

90 Minute Symposium ~ Bayshore VI

Reconceiving Child Welfare Transformation: Community Conversations, Organizational Assessment, Program Implementation, and University Partnership

Symposium Chair: Rosalyn Bertram, PhD, School of Social Work, University of Missouri Kansas City, Child and Family Evidence Based Practice Consortium, Kansas City, MO

A community-based participatory evaluation and a systematic organizational health assessment informed Missouri Children's Division selection of new philosophy and practice. However, hope and inspiration generated by these efforts produced hasty installation and a rush into initial implementation. This symposium presents how policy-to-practice and practice-to-policy feedback loops identified constraining implementation assumptions and practices as they emerged, as well as tools developed through university partnership to correct these oversights.

Taking the Pulse: Community-Based Participatory Evaluation and Comprehensive Organizational Health Assessment

Tim Decker, MSW, Children's Division, Missouri Department of Social Services, Jefferson City, MO

In community conversations across Missouri, a Sundance Film Festival award-winning documentary introduced a value-based philosophy of five factors contributing to the well-being of children and families. These discussions evaluated how that philosophy could transform family engagement by child welfare services. Results were examined in light of a comprehensive organizational health assessment conducted through a National Child Welfare Workforce Initiative (NCWWI) grant. Findings informed Missouri Children's Division selection and implementation of new philosophy and practices.
Implementation System: Results of a 5-Year Statewide Initiative

Creating a Trauma-Informed Child Welfare System: Results of a 5-Year Statewide Implementation

Rosalynd Bertram, PhD, School of Social Work, University of Missouri Kansas City, and Family Evidence Based Practice Consortium, Kansas City, MO; Tim Decker, MSW, Children’s Division, Missouri Department of Social Services, Jefferson City, MO

Installation and initial implementation of new Missouri child welfare practices began in Kansas City. An implementation team identified multiple policies and procedures forcing families through a gauntlet of repetitive assessment and planning processes that constrain family engagement, and increase alternative placements. Required assessment and planning tools were reduced by 50%. An ambitious training plan introduced Signs of Safety as the new engagement, assessment and planning process. However, enthusiasm, logistics, and unexamined assumptions created implementation challenges.

NCWWI University Partnership: Implementation Feedback Loops in Child Welfare Transformation

Rosalynd Bertram, PhD, Megan Gillies, MSW, Soo-Whan Choi, MA, School of Social Work, University of Missouri Kansas City, and Family Evidence Based Practice Consortium, Kansas City, MO

Fortunately, NCWWI university partnership MSW trainee’s weekly field learning reports identified both strong and inconsistent implementation patterns, limited use of learning labs, and staff uncertainty regarding the interface of various child welfare services. Trainees also produced implementation evaluations of each public and private service site. In practice-to-policy feedback loops, a NCWWI field instructor academy and the grant leadership team review these data sources, sharing challenges, lessons, and solutions with the Kansas City and statewide implementation teams.

Session 3

10:00 am - 11:30 am

90 Minute Symposium ~ Bayshore VII

Creating a Trauma-Informed Child Welfare System: Results of a 5-Year Statewide Implementation

Symposium Chair: Kristina Stevens, LCSW, Clinical and Community Consultation and Support Division, Connecticut Department of Children and Families, Hartford, CT; Discussant: Melinda Baldwin, PhD, Administration for Children and Families, Department of Health and Human Services, Washington, DC

This symposium will describe key components and results of a five-year, $3.2 million statewide initiative to implement trauma-informed care in Connecticut’s CWS through the Connecticut Collaborative on Effective Practices for Trauma (CONCEPT), a 5-year grant from the Administration on Children and Families. This initiative included implementation of comprehensive changes in workforce development, trauma screening, and access to evidence-based practices (EBPs). Evaluation of the initiative has been conducted through a mixed methods approach of individual program components as well as a comprehensive, longitudinal system-wide readiness and capacity assessment from a stratified random sample of child welfare staff.

Supporting Trauma-Informed Care in the Child Welfare Workforce

Christian Connell, PhD, The Consultation Center, Department of Psychiatry, Yale School of Medicine, New Haven, CT; Kim Campbell, MSW, Child Health and Development Institute, Farmington, CT; Kristina Stevens, LCSW, CWS, Clinical and Community Consultation and Support Division, Connecticut Department of Children and Families, Hartford, CT

State and tribal child welfare systems are increasingly focusing efforts on identifying and serving children exposed to trauma through creation of trauma-informed systems. This evaluation of a statewide initiative in Connecticut describes the strategies used to develop the child welfare workforce to support trauma-informed practice. Results of a system readiness and capacity evaluation indicate system-wide improvements in readiness and capacity to provide trauma-informed care as a result of these workforce development activities.

Trauma Screening in Child Welfare

Jason Lang, PhD, Child Health and Development Institute, Farmington, CT; Christian Connell, PhD, The Consultation Center, Department of Psychiatry, Yale School of Medicine, New Haven, CT

Recent focus on trauma-informed care have resulted in child welfare systems seeking reliable and valid, but feasible, approaches for screening large numbers of children for trauma. Little is known about trauma screening in child welfare and few measures exist. This presentation summarizes results from four pilot studies examining the feasibility and utility of trauma screening, including validation of a brief screening measure that can be used in child welfare and other service systems.

Child Welfare and Behavioral Health Collaboration in Dissemination of Trauma-Focused Cognitive Behavioral Therapy

Kim Campbell, MSW, Jason Lang, PhD, Child Health and Development Institute, Farmington, CT; Cesalie Stepney, EdM, MS, Christian Connell, PhD, The Consultation Center, Department of Psychiatry, Yale School of Medicine, New Haven, CT

While there has been a push towards improving access to EBPs for children in child welfare, little is known about how to improve collaboration between child welfare and behavioral health to facilitate better access to EBPs. This presentation summarizes data from 13 cross-system implementation teams (N=165 staff) participating in learning collaboratives. Results from evaluation of staff measures will be presented along with implementation and outcome measures for children served (N=800 youth referred for screening; over 350 youth who enrolled in treatment and provided outcome data).
Session 4
10:00 am - 11:30 am
Panel Presentation ~ Esplanade I

_Early Childhood Development and Behavioral Health Systems: Strategies for Enhancing Equity and Justice for Children and Families_

Joan Lombardi, PhD, Buffett Early Childhood Fund, Omaha, NE; Michael Wald, JD, Stanford University, Palo Alto, CA; Moderator: Donald Wertlieb, PhD, Tufts University, Boston, MA

There has been increasing attention on the importance of supporting positive early childhood development, with evidence pointing to socio-emotional, cognitive, and behavioral benefits for children and fiscal returns for our communities and societies at large. This presentation will feature three distinguished panelists, with complementary content expertise and noteworthy records of connecting research with action in practice, policy, and systems change. They will consider the complex factors at play in public sector service systems and describe strategies for promoting equity and social justice for children and families.

Session 5
10:00 am - 11:30 am
90-Minute Symposium ~ Esplanade II

_The Times They Are a Changin’: Sustaining Family-Run Organizations_

Symposium Chair: Alice “Elaine” Slaton, Center for Social Innovation, Cornelius, NC; Discussant: Elizabeth Sweet, Child, Adolescent and Family Branch, Center for Mental Health Services, SAMHSA, Rockville, MD

For more than 30 years, the federal Statewide Family Network grant program, the longest-standing discretionary program in the history of the Substance Abuse and Mental Health Services Administration (SAMHSA), has been a source of learning about the effective development of family-run organizations. This symposium is based on five case studies conducted by the Center for Social Innovation (C4), the contracted technical assistance (TA) provider between October 2014 and September 2015. Immediately applicable strategies and tools will be presented and discussed that will help family-run organizations: Develop fiscal sustainability; improve board effectiveness; and describe strategies for promoting equity and social justice for children and families.

Fiscal Sustainability for Family-Run Organizations

Alice “Elaine” Slaton, Center for Social Innovation, Cornelius, NC; Sue Smith, Georgia Parent Support Network, Atlanta, GA; Joy Hogge, Families as Allies, Jackson, MS

This session offers practical strategies and applicable tools for nonprofit, family-run organizations to develop fiscal sustainability. Assessing the organization’s fiscal health, understanding the different kinds of income and capital needed to build strong infrastructure, and developing a financial plan can drive the organization toward sustainability and improved mission achievement. Components of a financial plan will be introduced. Participants will dialogue with experienced family leaders and technical assistance providers to identify their own “first steps.”

Session 6
10:00 am - 11:30 am
30-Minute Paper ~ Esplanade III

_The Policy and Funding Context of Wraparound: New Findings from the Community Supports for Wraparound Inventory (CSWI)_

Janet Walker, PhD, Regional Research Institute-National Wraparound Initiative/National Wraparound Implementation Center, Portland State University, Portland, OR

The Community Supports for Wraparound Inventory (CSWI) is a survey tool that assesses a community’s system-level support for Wraparound. This presentation reports on data gathered from almost 1,000 respondents from 33 communities that recently used the CSWI. We use multilevel modeling and other analyses to examine which areas of system-level support seem to be easiest and most challenging for communities to develop, and trends over time in scores for specific aspects of system support.
Using Administrative CANS Data for Benchmarking and Outcomes Monitoring in Statewide Wraparound Initiatives

Jennifer Schurer Coldiron, PhD, Eric Bruns, PhD, Spencer Hensley, BA, Isabella Esposito, BA, Wraparound Evaluation and Research Team, University of Washington, School of Medicine, Seattle, WA

The Child and Adolescent Needs and Strengths (CANS) assessment is widely used to determine eligibility and aid clinical decision making for youth with complex needs. This presentation aims to promote better understanding of the strengths and needs of wraparound enrolled youth by presenting CANS data for over 4000 youths in wraparound initiatives across four states. By examining baseline profiles and change over time across systems and subpopulations, we hope to facilitate more effective use of CANS for system-level outcomes monitoring.

Differences in Wraparound Training and Coaching Outcomes as a Function of System Context

Spencer Hensley, BA, Wraparound Evaluation and Research Team, University of Washington, School of Medicine, Seattle, WA; Kimberly Estep, Marlene Matarese, The Institute for Innovation and Implementation, University of Maryland, Baltimore, MD

Wraparound is a context-sensitive process, and the system level and financial contexts in which wraparound services are embedded vary widely from state to state. Some state’s wraparound services are organized around Care Management Entities (CMEs) and others around Community Mental Health Centers (CMHCs). This paper examines differences in wraparound implementation in CMEs and CMHCs by looking at the perceived impact of training and wraparound fidelity.

Adding it All Up: A Value-Based Planning Process for Child and Youth Mental Health Services

William Gardner, PhD, Heather Woltman, BA, Lisa Currie, MSc, Mental Health Research, Children’s Hospital of Eastern Ontario Research Institute, Ottawa, ON, CAN; Evangeline Danseco, PhD, Ontario Centre of Excellence for Child and Youth Mental Health, Children’s Hospital of Eastern Ontario, Ottawa, ON, CAN

In 2014, the government of Ontario (Canada) spearheaded the transformation of mental health services for children, youth, and their families. Lead agencies in geographical service areas are now given a budget to provide and coordinate core services in their communities. We propose a value-based planning process to help agencies decide how to allocate their budgets. This process promotes community collaboration, funding accountability, evidence-based care, and transparent decision-making.

Utilization of Peers in Services for Youth with Emotional and Behavioral Challenges

Geetha Gopalan, PhD, Sang Jung Lee, MSW, University of Maryland School of Social Work, Baltimore, MD; Mary Acri, PhD, NYU Child Study Center, Dept of Child & Adolescent Psychiatry, New York University School of Medicine, New York, NY; Michelle Munson, PhD, Silver School of Social Work, New York University, New York, NY

This study systematically reviewed existing literature on youth peers support services (YPSS), where young adults with current or prior emotional/behavioral challenges and service receipt history provide direct support to other youth currently struggling with emotional/behavioral difficulties. Forty-one documents were included for final data extraction, representing 30 programs. Qualitative data were synthesized though a descriptive analytic framework identifying variations and gaps regarding typology of services, program goals, service system, roles, training, supervision, study design, and outcomes.
Session 9
10:00 am - 11:30 am
90-Minute Symposium ~ Palma Ceia 3
Preparing Children for Kindergarten: The Impact of HIPPY on Parent Involvement and School Readiness

Symposium Chair: Mary Lindsey, PhD, Child and Family Studies, Florida Center for Inclusive Communities, Tampa, FL

With low income children being at a greater risk of failing to achieve successful educational outcomes, the use of early childhood learning becomes crucial. Home Instruction for Parents of Preschool Youngsters (HIPPY) attempts to provide early learning using a teaching model that involves parents as the child's first teacher. Based on the strong involvement of parents with their children, HIPPY uses home visitors to role model various educational activities, and parents later perform these activities with their children.

Early Childhood Education: Preparing Low-Income Children for School using Florida Home Instruction for Parents of Preschool Youngsters (HIPPY)
Ruby Joseph, MPA, Child and Family Studies, University of South Florida, Tampa, FL

Home Instruction for Parents of Preschool Youngsters (HIPPY) program teaches children aged 3-5. The model emphasizes parent involvement in their child's education and uses parents as their child's first teacher. Home visitors deliver the curriculum to parents through role play and parents work directly with their children on educational activities. Twenty-two Florida sites implemented the HIPPY model. Results showed that children's knowledge about foundational learning concepts improved and parents' involvement in their child's education increased.

Florida HIPPY Data Results and Findings FY2014-2015: Bracken School Readiness Assessment and Parent Involvement Survey
Debra Mowery, PhD, Child and Family Studies, University of South Florida, Tampa, FL

This presentation will review the results and findings from two program assessment tools that were utilized by the FL HIPPY sites for FY2014-2015. The Bracken School Readiness Assessment is a norm referenced tool which measures whether a child knows basic information and is ready for school. The Parent Involvement Survey is a program developed tool that indicates the level of parental involvement and engagement with their child across academic, home, and community activities.

Florida HIPPY Kindergarten Educational Outcomes
Svetlana Yampolskaya, PhD, Child and Family Studies, University of South Florida, Tampa, FL

Young children growing up in poverty are at heightened risk for delays in school readiness and social-emotional skills (Farkas & Hibel, 2008). HIPPY intervention aims to provide opportunities for social-emotional growth and higher kindergarten achievement for children from low-income backgrounds. Despite research highlighting the importance of school readiness, no study that consisted of experimental or quasi-experimental design has yet examined the outcomes for children enrolled in HIPPY intervention. This presentation will review the outcomes from a cross-sectional two-group design study comparing HIPPY children and non HIPPY children groups on school readiness and promotion.

Session 10
10:00 am - 10:45 am
30-Minute Paper ~ Palma Ceia 4
Evaluating a Cultural Enhancement to Improve Parent Child Relationships among Home Visiting Participants in a Low Resourced Urban Native Community
Farha Marfani, MSPH, Sophia Taula-Lieras, MSW, Community Wellness Department, Native American Health Center, Oakland, CA

Historical and intergenerational trauma has contributed to the breakdown of healthy attachment and parenting practices in Native American families. This presentation will describe an ongoing study comprised of parents and caregivers enrolled in a home visiting program in an urban Native community, with the objectives of evaluating the effectiveness of a culturally enhanced home visiting model designed to improve parental responsiveness, enhance parental confidence, and increase cultural connectedness.
Session 11

10:00 am - 10:30 am

30-Minute Paper ~ Garrison Suite

Getting Ready for Tomorrow: A Mixed Methods Evaluation of Organizational Readiness towards Implementation of Evidence-Based Practice

Vinita Sharma, MPH, BPH; Christine Rollins, MA, MSW; Ashley Walker, BSPH, The Institute for Translational Research in Adolescent Behavioral Health, University of South Florida; Carali McLean; Richard Brown, ACTS, Inc.; Donna Burton, PhD, University of South Florida, Tampa, FL

One way to help facilitate the transition of evidence-based practice (EBP) to agency adoption is through assessing organizational readiness. Online, quantitative survey among staff members coupled with in-depth interviews with key personnel were carried out at Agency for Community Treatment Services (ACTS) in Tampa. The evaluation examined factors that helped/hindered implementation of EBP to identify areas that could be improved to better-facilitate implementation of evidence-based practices in the agency.

10:30 am - 11:00 am

30-Minute Paper ~ Garrison Suite

A Pilot of a Behavioral Assessment Scale in Early Learning Literacy in Youth in United Way Suncoast ReadingPals Program

Melody Chavez, MPH, RDN, LD, The Institute for Translational Research in Adolescent Behavioral Health, University of South Florida; Emery Ivery, United Way Suncoast; Tom Massey, PhD, Bruce Lubotsky Levin, DrPH, University of South Florida, Tampa, FL

Early exposure to reading and writing can help create school readiness and assist in building a foundation for educational success. Research shows that children who are living in poverty are three times more likely to drop out of school. Early learning literacy programs are designed to help children achieve future success. In order to achieve this, evaluation methods need to be able to measure effectiveness of the program on changes in children's attitudes around reading.

Lunch on Your Own

11:45 am – 1:45 pm

Take this opportunity to connect with colleagues and friends.

Monday Afternoon Plenary

2:00 pm – 3:30 pm

Bayshore Ballroom

Impact of Historical Trauma and Adverse Childhood Experiences on American Indian Health Inequity

Donald K. Warne, MD, MPH, Department of Public Health, North Dakota State University, Fargo, ND

The American Indian (AI) population suffers from significant health disparities. Death rates from diabetes, cancer, infant mortality, suicide and other causes are higher among AIs. Numerous psychosocial influences, including a history of genocide and boarding school experiences have led to unresolved historical trauma and its associated poor health outcomes. Adverse Childhood Experiences are also a strong predictor of risk for numerous chronic and behavioral health conditions. Adverse adulthood experiences, including poverty, racism, substance abuse, and others lead to depression, anxiety, and poor health outcomes. Dr. Warne will discuss the social circumstances that can have an impact on the quality of parenting skills for the next generation, leading to continued inter-generational health disparities. Dr. Warne will conclude his remarks with a call for additional research into the prevention and mitigation of psychosocial influences and social determinants of health that is needed to ensure improved policy and program development.
Session 12  
3:45 pm - 5:15 pm  
90-Minute Symposium ~ Bayshore V  
Supporting the Higher Education Goals of Young Adults with Mental Illness: State of the Practice

Symposium Chair: Heather Ringeisen, PhD, Survey Research Division, RTI International, Research Triangle Park, NC  
Discussant: Marsha Ellison, PhD, Systems and Psychosocial Advances Research Center, University of Massachusetts Medical School, Shrewsbury, MA

This symposium will present new research on the current state of knowledge and practice of supported education. Three key tasks were associated with this project: (1) a literature review; (2) an environmental scan of current supported education researchers, program managers, and other key informants; and (3) case studies of three programs implementing differing supported education service delivery models. In this symposium the results of each of these three activities will be presented. The objective of the literature review is to complement and expand on prior reviews of the literature published around supported education interventions. More specifically, the review draws on the existing published literature to describe the characteristics of supported education interventions (service characteristics, populations served, financing strategies and implementation challenges); report on the impact of supported education interventions; and identify gaps in the published literature about supported education interventions.

State of the Empirical Literature around Supported Education Interventions for Young Adults with Mental Illness

Heather Ringeisen, PhD, Survey Research Division, RTI International, Research Triangle Park, NC

This presentation will summarize results of a literature review conducted to examine the impact of Supported Education on outcomes for youth adults with mental illness. Many promising findings highlight the positive impact of SEd programs on youth and young adults with serious mental illness. However, the current state of evidence is limited. The literature review indicated several future research needs for future studies of SEd intervention approaches.

Research, Practice, and Policy Discussions on Supported Education for Young Adults: An Environmental Scan

Amy Ryder-Burge, MS, Survey Research Division, RTI International, Research Triangle Park, NC

Educational supports for young adults with serious mental illness is a vital service. This presentation covers discussions with researchers, program managers, and stakeholders involved in Supported Education (SEd) services who shared their knowledge and perspectives on SEd beyond what was in the current published literature. The results of this environmental scan reflected on the program implementation strategies and concerns, research strengths and needs, and the mechanisms of support needed for the future of SEd services for young adults with serious mental illness.

Innovative Efforts to Support Young Adults to Meet their Education Goals: A Site Visit Study

Kathleen Biebel, PhD, Shums Alikhan, Department of Psychiatry, University of Massachusetts Medical School, Shrewsbury, MA

The desire for postsecondary education is a developmentally appropriate milestone for most young adults, including those with serious mental health conditions (SMHC). To adequately support the behavioral health needs of young adults with SMHC, one must support their education goals. This study highlights the efforts of three innovative, postsecondary supported education initiatives across the United States, and provides insight into the strategies and infrastructures necessary to support education goals at individual, program, and systems levels.

Session 13  
3:45 pm - 5:15 pm  
90-Minute Symposium ~ Bayshore VI  
Statewide Dissemination of Evidence-Based Practice: Lessons Learned from an 8-Year Initiative

Symposium Chair: Jason Lang, PhD, Child Health and Development Institute, Farmington, CT  
Discussant: Kristina Stevens, LCSW, Connecticut Department of Children and Families, Hartford, CT

This symposium will describe results from Connecticut’s model for disseminating and sustaining Trauma Focused-Cognitive Behavioral Therapy (TF-CBT) across a statewide system of care over the past eight years. Connecticut has designated a Center of Excellence that partners with state agencies, community-based providers, EBP trainers, academic partners, and family advocates in the role of an intermediary organization to support dissemination of EBPs (Franks, 2010). The Center of Excellence provides initial EBP implementation using learning collaboratives (Ebert, Amaya-Jackson, Markiewicz, Kisel, & Fairbank, 2012) and other implementation strategies, ongoing sustainment and quality improvement through implementation consultation, data collection and reporting, administration of performance-based financial incentives, and integration with other state systems (Lang, Franks, Epstein, Stover, & Oliver, 2015). This initiative has resulted in more than 800 clinicians trained across 30 community-based agencies and provision of TF-CBT to more than 5,000 children. A mixed methods approach to evaluation has been used, including data at the agency, clinician, and child levels.
Towards a Model of EBP Implementation Consultation: Results of a Consultation Needs Assessment from Community-Based Providers

Brian Padilla, PhD, Child Health and Development Institute, Farmington, CT; Jason Oliver, PhD, Department of Psychiatry & Behavioral Sciences, Duke University School of Medicine, Durham, NC

Clinical consultation is a necessary but insufficient strategy for successful EBP implementation and sustainment, but research suggests that additional support related to staffing, leadership, and use of data are also required. Results of a needs assessment conducted with 263 staff in various roles at 32 community-based agencies implementing TF-CBT will be presented, including perceptions of barriers and consultation needs. A model for implementation consultation integrating these data with implementation science and consultation research is described.

The Effects of Training & Consultation on Implementation and Child Outcomes in a Statewide EBP Dissemination

Jason Lang, PhD, Kellie Randall, PhD, Child Health and Development Institute, Farmington, CT

Little is known about the most cost-efficient methods of EBP implementation that result in quality outcomes. Training, consultation, and implementation and child outcome data from an eight year statewide EBP dissemination to 29 agencies, 688 clinicians, and 4,001 children will be described. The contribution of training and consultation type/quantity to implementation and child outcomes will be presented. Recommendations for delivering EBP training and consultation while balancing quality with cost-efficient approaches will be discussed.

Results of a Juvenile Justice Behavioral Health Collaboration to Disseminate Trauma-Focused Cognitive Behavioral Therapy to Justice-Involved Youth

Mayte Restrepo, MA, MPH, Child Health and Development Institute, Farmington, CT; Christian Connell, PhD, The Consultation Center, Department of Psychiatry, Yale School of Medicine, New Haven, CT

Youth in the juvenile justice system have very high rates of trauma exposure and traumatic stress reactions. A cross-system initiative utilizing learning collaboratives comprised of 69 juvenile justice and behavioral health staff to improve access to trauma-focused services for youth in juvenile justice system is described. Results indicated significant improvements in trauma-related knowledge, practice, and collaboration, and promising outcomes for youth receiving trauma treatment. Implications for implementing trauma-focused services for justice-involved youth will be discussed.

Session 14 CW

3:45 pm - 4:15 pm
90-Minute Symposium ~ Bayshore VII

James Clark, PhD, College of Social Work, Florida State University, Tallahassee, FL; John Couch, Florida Dependency Court Improvement Program, Tallahassee, FL; Lynn Tepper, Circuit Judge, Florida 6th Judicial Circuit

In most states the judiciary is the de facto branch of government charged with the oversight of ASFA implementation. This creates several challenges, including (a) directive supervision of primarily executive branch functions (e.g., CPS) by the judicial branch; (b) demands to interpret legislative intent for child welfare reform that may be inconsistent with extant case law about the status of child rights, parents’ rights, and state parens patriae functions of the government; and (c) the general difficulty of applying legal theory to specific child welfare cases that require analysis from non-legal domains of knowledge (pediatric and primary care health; developmental psychology; traumatic stress science; child and adolescent neuroscience; etc.). This symposium will present and discuss the legal school known as “Therapeutic Jurisprudence” (TJ), and explore its specific relevance to child welfare policy and practice. Through the use of several case examples, the presentation will demonstrate the utility and challenges in applying TJ approaches to enhance child welfare outcomes as experienced through the use of “first generation” TJ applications. Finally, the presentation will discuss future advantages and challenges for intentionally and mindfully utilizing “second generation” TJ concepts and frameworks to enhance child welfare policies and practices in an era of child welfare innovation and reform. The thrust of the presentation is to enhance the probability of effective collaboration among key decision makers involved in the lives of child welfare clients at both the practice and policy levels.

Session 15 OR

3:45 pm - 4:30 pm
30-Minute Paper ~ Esplanade I
Who is My Neighbor? Strategies for Expanding Who We Identify as Neighbors and How We Care for Them

David Anderson, PhD, Lydia Home Association in Chicago, IL

This session will describe strategies for providing support and resources to families in crisis situations. In particular, the session will focus on Safe Families for Children, a program pioneered in the Chicago area, which consists of a network of families that open their homes to children whose families are in crisis. In recognition of the importance of relationships to children, Safe Families offers partnerships between biological parents and
volunteer safe families. Partner parents assist biological parents in caring for their children by supplementing rather than substituting for parental care. Safe Families now has a presence in 65 U.S. cities, the U.K., Canada, and Kenya.

4:30 pm - 5:15 pm
30-Minute Paper ~ Esplanade I
A Comprehensive Grief Care™ Model for Bereaved Children and Families
Brook Griese, PhD, Samantha A. Farro, PhD, Ayelet Talmi, PhD, Judi’s House/JAG Institute, Denver, CO; Louise Silvern, PhD, University of Colorado at Boulder, Boulder, CO; Micki Burns, PhD, Judi’s House/JAG Institute, Denver, CO

Childhood bereavement is a critical public and behavioral health issue impacting 1 in 20 children in the U.S. Current policies regulating access to grief care are not based in empirical evidence due to a paucity of published data on the topic. Through the development of the Comprehensive Grief Care™ Model, Judi’s House and JAG Institute are integrating knowledge drawn from community, practice, and research partners to impact social change around the issue of childhood bereavement.

Session 16
3:45 pm - 5:15 pm
90-Minute Symposium ~ Esplanade II
Screening, Brief Intervention, and Referral to Treatment Services for Adolescents and Emerging Young Adults: An Examination of Barriers to Use among Primary Care Providers

Symposium Chair: Jenna Jones, PhD, Evaluation and Economic Research, Truven Health Analytics, Bethesda, MD; Discussant: Ashley Palmer, MPH, Evaluation and Economic Research, Truven Health Analytics, Bethesda, MD

Several evidence-based tools (such as the CRAFFT) have been constructed to screen those at risk of misuse or abuse of alcohol or drugs and guide physicians on next steps for brief intervention or referral to treatment. The Screening, Brief Intervention, and Referral to Treatment (SBIRT) process has the potential to increase early identification and remediation of risky behaviors in adolescents and young adults (Association for Community Affiliated Plans, 2015). Electronic health records (EHRs) may play an important role in the provision of SBIRT. There were four aims to this study: (1) analyze the extent to which providers are billing for SBIRT services in primary care and other provider settings using claims data, (2) determine whether providers are not billing for SBIRT services because they are not providing the services or they are just not billing for them, (3) uncover primary barriers for providers who are not providing SBIRT, and (4) investigate the role that EHRs play in facilitating the use of evidence-based interventions to prevent, identify, and treat substance use disorders in adolescents (12–17 years) and emerging adults (18–21 years).

Provider Billing for Adolescent Substance Abuse Prevention Services: Examination of Commercial and Medicaid Claims Data
Jenna Jones, PhD, Evaluation and Economic Research, Truven Health Analytics, Bethesda, MD

Little empirical evidence exists on provision of substance abuse services by pediatricians and other primary care providers. We used the 2013 Truven Health MarketScan® Commercial Claims and Encounters Database to generate counts of claims for Screening, Brief Intervention, and Referral to Treatment (SBIRT) or wellness-related services. Less than 1% of adolescent and young adult outpatient claims were for SBIRT-related services in 2013, within both the commercially insured and Medicaid sample.

Barriers to the Adoption of SBIRT among Pediatricians and Other Primary Care Providers
Ashley Palmer, MPH, Evaluation and Economic Research, Truven Health Analytics, Bethesda, MD

Pediatricians and other primary care providers, who often have close and regular contact with their adolescent patients, may be ideally suited to identify those at risk for a substance use disorder and intervene (Babor et al., 2007). However, an analysis of claims data revealed that few primary care providers bill for SBIRT services. This qualitative work was conducted to gain a better understanding of key barriers faced by providers to offering these services.

Role of Electronic Health Records in Preventing, Identifying, and Treating Substance Use Disorders in Adolescents and Emerging Adults
Peggy O’Brien, PhD, Evaluation and Economic Research, Truven Health Analytics, Bethesda, MD

Electronic health records (EHRs) may facilitate screening, brief intervention, and referral to treatment (SBIRT) for adolescents and emerging adults with substance use disorders. The authors interviewed: (1) EHR vendors to ascertain which screening products they offer and the potential for customizing provider systems to include other screening instruments and (2) experts in incorporating SBIRT into EHRs for an alternative perspective. They identified several impediments to successful implementation in terms of knowledge gaps and workflow issues.
Session 17  WA
3:45 pm - 4:45 pm
60-Minute Symposium ~ Esplanade III
Wraparound with Older Youth and Young Adults: New Findings, Challenges, and Lessons Learned

Symposium Chair: Janet Walker, PhD, Regional Research Institute, Research and Training Center for Pathways to Positive Futures, Portland State University, Portland, OR

This symposium brings together three presentations focused on the use of Wraparound to meet the needs of older youth and young adults. Participants will have an opportunity to participate in a discussion of the findings from the three studies, and the implications of findings and lessons learned for efforts to ensure that Wraparound is effective for this “emerging adult” population.

Increasing Meaningful Youth Engagement and Participation in Wraparound: Findings from a Randomized Study
Janet Walker, PhD, Celeste Seibel, MS, Sharice Jackson, BA, Regional Research Institute, Research and Training Center for Pathways to Positive Futures, Portland State University, Portland, OR

This presentation describes a strand of research focused on developing, testing and implementing the Achieve My Plan (AMP) intervention, which takes a strengths-based, empowerment-oriented approach to increasing engagement and active participation in treatment among adolescents and young adults with serious mental health conditions who are receiving Wraparound, a specific form of intensive team-based care/service planning. We will describe findings from a randomized study that showed increased and more meaningful participation in treatment planning among young people who received AMP, as well as increased satisfaction with treatment and perceptions of youth engagement and participation among young people, providers and parents/caregivers.

Wraparound Milwaukee O-YEAH Practice Model
Brian McBride, Pnina Goldfarb, Wraparound Milwaukee, Milwaukee, WI

Participants will be introduced to Wraparound Milwaukee’s O-YEAH practice model described as a merging of two empirically-based practices: Wraparound and Transition to Independence. The model’s flexibility will be highlighted as it serves a diverse transition population: justice system, out of foster care, young adults with histories in multiple systems (e.g. justice & child welfare) and those experiencing psychosis. Fidelity and outcome data will be shared using the lens of the principles and values of the practice model.

4:45 pm - 5:15 pm
30-Minute Paper ~ Esplanade III
Identifying Systemic Strengths and Needs to Support Wraparound: A Comprehensive Programmatic Evaluation
Susan McLaren, MPH, Ann DiGirolamo, PhD, Sara Redd, MSPH, Center of Excellence for Children’s Behavioral Health, Georgia Health Policy Center, GA State University, Atlanta, GA

A comprehensive evaluation of Wraparound services provided to youth with severe emotional disturbances (SED) expanded a quantitative evaluation to incorporate stakeholder surveys and interviews to understand systemic facilitators and challenges to Wraparound fidelity and youth outcomes. Analysis of qualitative data reinforced quantitative utilization and outcome findings and gleaned additional findings as to why successes and challenges are experienced. These findings can assist programs with identifying additional resources to support Wraparound.

Session 18
3:45 pm - 5:15 pm
Discussion ~ Palma Ceia 1
Implementing the SBDI Toolkit: A Practical Guide to Reduce School-Based Arrests – Part 1
Jeana Bracey, PhD, Yecenia Casiano, MS, Tianna Hill, MSW, Jeffrey Vanderploeg, PhD, Child Health and Development Institute, Farmington, CT

This presentation will guide participants through implementation of a free arrest-reduction school toolkit developed by the presenters to promote school-community partnerships. Punitive and exclusionary discipline practices continue to pervade many schools resulting in arrests, suspensions, and expulsions, often for minor and non-violent incidents. The toolkit is one component of Connecticut’s comprehensive efforts to reduce in-school arrests through intensive school intervention and integration of enhanced mental health services and supports.
Session 19  
3:45 pm - 4:15 pm
30-Minute Paper ~ Palma Ceia 2

**Assessing Competency-Based Outcomes of Transition Service Provider Training Experiences: Scale Development**

Eileen Brennan, PhD, Pauline Jivanjee, PhD, Carolina Gonzalez-Prats, MA, Research and Training Center for Pathways to Positive Futures, Portland State University, Portland, OR; Claudia Sellmaier, PhD, University of Washington Tacoma, Tacoma, WA

The Pathways Transition Training Collaborative identified a set of 10 core competencies for transition service providers. Our presentation reports on the development process and psychometric properties of the Transition Service Provider Competency Scale, an instrument that can be used for competency self-assessments and training evaluations. We will also discuss examples of training programs using the TSPCS to evaluate service providers’ gains in confidence that they are prepared to serve young people with behavioral health challenges.

4:15 pm - 5:15 pm
Discussion Hour ~ Palma Ceia 2

**Now is the Time—Healthy Transitions: Peer Networking Social**

Alexandra Albizu-Rivera, MPH, Nichole Fintel, MSPH, Now is the Time-Technical Assistance Center, Tampa, FL

The President’s Now is the Time initiative (NITT) is a call to action in response to the recent gun violence tragedies that have happened across the country. NITT-Healthy Transitions seeks to improve the continuum of care for youth and young adults with, or at-risk, for serious mental health conditions. This discussion hour is an opportunity to share early successes, challenges, and new directions for Healthy Transitions. Others engaging in similar work are welcome to attend.

Session 20
3:45 pm - 5:15 pm
90-Minute Symposium ~ Palma Ceia 3

**Innovative Long Term Public Academic Partnership for Behavioral Healthcare**

Symposium Chair: Christina Kang-Yi, PhD, Center for Mental Health Policy and Services Research, University of Pennsylvania, Philadelphia, PA

This symposium (1) introduces the Evaluation Center as a model of long term public academic partnership for improving behavioral health care policy and service delivery and (2) presents a series of school-based behavioral health program evaluations as an example of how a long term public academic partnership can support systems making policy decisions and designing behavioral health programs.

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**The Evaluation Center: Public Academic Partnership Connecting Research to Policy and Practice**

Aelesia Pisciella, PhD, Performance Evaluation, Analytics & Research, City of Philadelphia Community Behavioral Health, Philadelphia, PA; Christina Kang-Yi, PhD, Center for Mental Health Policy and Services Research, University of Pennsylvania, Philadelphia, PA; Suet Lim, PhD, Performance Evaluation, Analytics & Research, City of Philadelphia Community Behavioral Health, Philadelphia, PA; David Mandell, ScD, Center for Mental Health Policy and Services Research, University of Pennsylvania, Philadelphia, PA

The presentation will introduce the Evaluation Center, a public academic partnership between the City of Philadelphia Department of Behavioral Health (DBH)/Community Behavioral Health (CBH) and the University of Pennsylvania Center for Mental Health Policy and Services Research (CMHPSR), as a long term and innovative public academic partnership model to improve quality of public behavioral health care.

**School-Based Behavioral Health Program Evaluation Based on Long Term Public Academic Partnership**

Christina Kang-Yi, PhD, Center for Mental Health Policy and Services Research, University of Pennsylvania, Philadelphia, PA; Jill Locke, PhD, Speech and Hearing Sciences, University of Washington, Seattle, WA; Rinad Beidas, PhD, Benjamin Courtney, PhD, David Mandell, ScD, Center for Mental Health Policy and Services Research, University of Pennsylvania, Philadelphia, PA

This presentation will introduce a series of school-based behavioral health program evaluations as an example of how a long term public-academic partnership can support systems making policy decisions and designing behavioral health programs. The processes of school-based program evaluation led the public-academic partners to learn the importance of (1) facilitating communication between clinical and research/evaluation teams, between systems of care such as school districts and behavioral health systems, and between systems of care and community service providers; and (2) designing creative ways of encouraging service providers to collect good quality of primary data and utilize the data for service improvement. The presentation will introduce how evaluation findings have informed policy decisions and address future directions for public-academic partnership to further school-based behavioral health services for children.
Session 21
3:45 pm - 4:30 pm
Discussion ~ Palma Ceia 4
Advisory Committee Report on AI/AN Children Exposed to Violence

Dolores Subia BigFoot, PhD, Indian Country Child Trauma Center, University of Oklahoma Health Sciences Center, Oklahoma City, OK

In 2013, the Office of Juvenile Justice and Delinquency Prevention established an Advisory Committee to provide recommendations to the US Attorney General on violence against American Indian and Alaska Native children. The Advisory Committee conducted hearings, listening sessions, and interviews to better understanding the dynamics of violence in Indian Country and to explore programs that had success in decreasing the impact of violence. The 2014 Attorney General's Advisory Committee on America Indian/ Alaska Native Children Exposed to Violence: Ending Violence so Children Can Thrive. This presentation will provide an overview of the recommendations and how the recommendations can be incorporated into the tribal action planning to provide coordinated efforts for children services.

3:45 pm - 4:15 pm
30-Minute Paper ~ Garrison Suite
Adapting a Universal Prevention Program to Fit the Multi-Tiered System of Support Framework Utilized in Schools

Shalay Jackson, MSW, Sarah Gonzalez, The Institute for Translational Research in Adolescent Behavioral Health, University of South Florida, Tampa, FL; Kim Menendez, Mendez Foundation, Tampa, FL; Kathy Moore, PhD, University of South Florida, Tampa, FL

Our team gathered information regarding the implementation processes associated with the use of the Mendez Foundation's Too Good programs in a multi-tiered system. The goal is to provide Mendez clients with valuable information about the processes and procedures essential to adapting the universal programs to meet the needs of students receiving Tier 2 and Tier 3 interventions. Our research team will provide a formative evaluation to describe the strengths and challenges associated with this process.

Session 22
3:45 pm - 4:15 pm
30-Minute Paper ~ Garrison Suite
A 20 Year History of the System of Care in Tribal Communities: 13 Challenges, 13 Strengths

Holly Echo-Hawk, MS, Echo-Hawk & Associates, San Diego, CA

American Indian and Alaska Native communities continue to be a significant part of the national movement to build new systems of care for emotionally challenged youth and their families. By October 2014, ninety-four (94) American Indian and Alaska Native communities received system of care funding from SAMHSA, including Circle of Care 3-year planning grants and the multi-year System of Care grants and cooperative agreements. The National Indian Child Welfare Association and senior behavioral health consultant Holly Echo-Hawk have worked closely with tribes, tribal consortia, tribal colleges, urban Indian organizations, and tribal-city, tribal-county, and tribal-government partnerships as the tribal grantees underwent complex change to build and sustain their system of care. Observed trends of the system and service transformation of local children's mental health services have been summarized into 13 strengths and 13 challenges. The role of evaluation in the transformation process will be highlighted.

4:15 pm - 4:45 pm
30-Minute Paper ~ Garrison Suite
Early Implementation Study: Hillsborough County Children's Services

Monica Chambers, BA; Gina-Maria Roca, BA, The Institute for Translational Research in Adolescent Behavioral Health, University of South Florida, Tampa, FL; Rhonda Rhodes, Hillsborough County Children's Services; Svetlana Yampolskaya, PhD, University of South Florida, Tampa, FL

Hillsborough County Children's Services Division (n.d.) strives “…to be recognized as the nationally acclaimed premier provider of comprehensive, innovative, and efficient services for Hillsborough County's youth and families.” To achieve their vision, Children's Services implemented three evidence-based programs: Trauma-Focused Cognitive Behavioral Therapy, Seeking Safety, and Brief and Strategic Family Therapy. Our research evaluates constructs of organizational readiness for change, perceived barriers to change, and beliefs about future sustainability of the implemented interventions.
4:45 pm - 5:15 pm
30-Minute Paper ~ Garrison Suite

**Framing Frameworks: A Qualitative Evaluation of Teens in Action with Implications for Diverse Dissemination**

Elizabeth Dunn-Gader, BA, Mariana Stavig, BA, *The Institute for Translational Research in Adolescent Behavioral Health, University of South Florida, Tampa, FL; Kim Williams, Lisa Rose, *Frameworks, Tampa, FL*

This study evaluates the curriculum, implementation process and sociocultural context of Frameworks of Tampa Bay’s unique Teens in Action (TIA) Social and Emotional Learning (SEL) program. Employing a qualitative methods approach, we identify the key elements of effective implementation, and to what extent this foundation informs the anticipated path to evidence-based consideration. In addressing potential avenues for exportability, we discuss the influence of sociocultural/economic context in implementation science, sharing implications valuable to diverse dissemination.

**Networking Break**

5:15 pm – 5:30 pm

Session 23

5:30 pm - 6:00 pm
30-Minute Paper ~ Bayshore V

**Employment for Youth and Young Adults with Serious Mental Health Conditions: The Employer Perspective**

Lisa M. Smith BA, Charles Lidz, PhD, Walter Cunningham, MA, *Transitions RTC, Department of Psychiatry, University of Massachusetts Medical School, Worcester, MA*

For young adults with serious mental health conditions the path to recovery can be a difficult one. Employment is a critical part of recovery. However, even with evidence-based supported employment very few people with SMHC develop a stable pattern of employment that progresses in both expertise and remuneration. Employers play a key role assisting the development of careers. The results of 11 in-depth interviews with employers are presented.

6:00 pm - 6:30 pm
30-Minute Paper ~ Bayshore V

**Vocational Supports for Emerging Adults with Serious Mental Health Conditions and Justice System Involvement**

Maryann Davis, PhD, *Transitions RTC, Department of Psychiatry, University of Massachusetts Medical School, Worcester, MA*

Multisystemic Therapy for Emerging Adults (MST-EA) is designed to reduce recidivism in emerging adults with serious mental health conditions and justice system involvement. Two MST-EA approaches to providing vocational support were tested in a small randomized trial. MST-EA Coaches with vocational curricula were compared to state vocational rehabilitation services plus MST-EA Coaches without vocational curricula. Those in the Vocational Coach group had better employment outcomes. Implications for future clinical trials of MST-EA will be discussed.

**Session 24**

5:30 pm - 6:30 pm
Discussion Hour ~ Bayshore VI

**Treatment of Youth with Co-Occurring Mental Health and Substance Use Disorders**

Richard Shepler, PhD, PCC-S, Michael Fox, MA, PCC, LCDC III, *Center for Innovative Practices at the Begun Center for Violence Prevention, Research and Education, Case Western Reserve University, Cleveland, OH; Jeff Kretschmar, PhD, Begun Center for Violence Prevention, Research and Education, Jack, Joseph, and Morton Mandel School of Applied Social Sciences, Case Western Reserve University, Cleveland, OH*

This discussion hour will present an overview of current research on youth with co-occurring mental health and substance use disorders (COD). Treatment adaptations to current evidence-based practices and integrated treatment models designed specifically for youth with COD will be presented. Cross-system collaboration strategies that support effective treatment for this population will be shared. Key funding and human resource issues in implementing integrated co-occurring treatment will be discussed.
Session 25
5:30 pm - 6:30 pm
Discussion Hour ~ Bayshore VII

Discussion and Demonstration: Can We Utilize 100% Sample Data from all Schools, Mental Health, and Other Services in Continuous Evaluation of System of Care?

Mansoor Kazi, PhD, School of Social Welfare, University at Albany, State University of New York, Albany, NY; Patricia Brinkman, Rachel Ludwig, Anne Bartone, PhD, Chautauqua County Mental Hygiene, Mayville, NY

Mental health affects school functioning (Gracy, 2014; Cappella et al., 2008; Desrocher, 2015; Rossen & Cowan, 2014). Suldo, Thalji, and Ferron (2011) found a significant rapid decline in GPA among students with mental health problems. However, most studies have focused on at risk groups rather than the total school populations. This is a demonstration of 100% evaluation of all services for children and families, utilizing big data on the entire school populations, in a continuous longitudinal study showing how mental health services can have a positive impact on school outcomes.

Session 26
5:30 pm - 6:30 pm
Discussion Hour ~ Esplanade I

Building State Capacity for Integrated School Mental Health Services

Natalie Romer, PhD, Catherine Raulerson, EdS, Rene Anderson, BA, Karen Childs, MA, Department of Child and Family Studies, College of Community and Behavioral Sciences, University of South Florida, Tampa, FL

This session will describe one state’s process for facilitating systems change towards a multi-tiered continuum of mental health supports in which school and community-based services are integrated and guided by youth and family voice. The presenters will highlight state policies and procedures that have facilitated cross-agency communication to support a model of integrated school-based mental health promotion and share best practices for engaging youth and family across systems.

Session 27
5:30 pm - 6:30 pm
Discussion Hour ~ Esplanade II

Addressing Behavioral and Primary Health Disparities and Access to Care for Young Adults of Color

Elisabeth Cannata, PhD, Community-Based Family Services and Practice Innovation, Wheeler Clinic, Plainville, CT

Recognizing the need to enhance health equity for low-income and vulnerable populations with serious behavioral health disorders, including young adults, Wheeler refined its strategic direction to build a more systemic integrated approach to whole person health through the establishment of Health & Wellness Centers. These Centers, located in Hartford and Bristol, CT, were developed in collaboration with key strategic partners and provide an integrated, comprehensive continuum of patient centered primary care, behavioral health and community resources, supported by multidisciplinary health teams, to reduce disparities in care, enhance health equity and achieve the triple aim of health reform: improve health, reduce costs & increase quality. Young adults enrolled in Wheeler’s behavioral health and intervention programs and services received a comprehensive health assessment, were educated about primary care and wellness, and engaged in care with emphasis on preventive screenings.

Session 28
5:30 pm - 6:30 pm
Discussion Hour ~ Esplanade III

Applying the Experiences and Recommendations of Girls to Address the Pathways into the Juvenile Justice System

Vanessa Patino Lydia, MPA, Inderjit (Vicky) Basra, LMSW, Delores Barr Weaver Policy Center, Jacksonville, FL

Presenters will share research findings about girls’ pathways into the juvenile justice system with attention to girls’ recommendations on how the First Coast community can improve the response. Examples of how the Policy Center is guided by girls’ voices in research, program models, and advocacy efforts to address policies and practices negatively impacting girls will be discussed. Participants will discuss community strategies to address the questions raised by the research.
Session 29
5:30 pm - 6:30 pm
Discussion Hour ~ Palma Ceia 1
**Implementing the SBDI Toolkit: A Practical Guide to Reduce School-Based Arrests – Part 2**

*Jeana Bracey, PhD, Yecenia Casiano, MS, Tianna Hill, MSW, Jeffrey Vanderploeg, PhD, Child Health and Development Institute, Farmington, CT*

This presentation will guide participants through implementation of a free arrest reduction school toolkit developed by the presenters to promote school and community partnerships. Punitive and exclusionary discipline practices continue to pervade many schools resulting in arrests, suspensions, and expulsions, often for minor and nonviolent incidents. The toolkit is one component of Connecticut’s comprehensive efforts to reduce in-school arrests through intensive school intervention and integration of enhanced mental health services and supports.

Session 30
5:30 pm - 6:30 pm
Discussion Hour ~ Palma Ceia 2
**Parent to Parent Peer Support Services: Designing the Research Question**

*Millie Sweeney, MS, Jane Walker, LCSW, Family-Run Executive Director Leadership Association, Ellicott City, MD; Geetha Gopalan, PhD, School of Social Work, University of Maryland, Baltimore, MD; Eric Bruns, PhD, Department of Psychiatry and Behavioral Sciences, Division of Public Behavioral Health and Justice Policy, University of Washington School of Medicine, Seattle, WA*

Through a three tiered process within PCORI, FREDLA will develop a comparative effectiveness research proposal regarding parent to parent peer support. A partnership between researchers and family leaders has been established to accomplish this goal, and the discussion hour will inform the group about the types of research questions that interest the children’s mental health field. During the discussion hour, participants will learn about the project and provide input into the design of the research question(s).

Session 31
5:30 pm - 6:00 pm
30-Minute Paper ~ Palma Ceia 3
**Mental Health Literacy: Instrument Development and Relationship to Family Empowerment, Caregiver Self-Efficacy, and Caregiver Strain**

*Christine Davis, PhD, Department of Communication Studies, University of North Carolina at Charlotte, Charlotte, NC; Mary Armstrong, PhD, Louis de la Parte Florida Mental Health Institute, University of South Florida, Tampa, FL; Tom Massey, PhD, Department of Child and Family Studies, University of South Florida, Tampa, FL; John Mayo, MA, Success 4 Kids & Families, Tampa, FL; Richard B. Smith, PhD, Kate Tiedemann College of Business, University of South Florida, St. Petersburg, St. Petersburg, FL; Debra Basalik, University of North Carolina Charlotte, Charlotte, NC*

Health literacy, the capacity to obtain, communicate, process, comprehend, and utilize health information, is as important a concept in children's mental health as it is in physical health. This paper reports on research developing, validating, and utilizing an instrument to measure caregiver mental health literacy (MHL). MHL is related to higher Family Empowerment and Caregiver Self-Efficacy, and lower Caregiver Strain. We discuss the implications of this body of work from bench to bedside.

Session 32
5:30 pm - 6:00 pm
30-Minute Paper ~ Palma Ceia 4
**Utilizing the Child and Adolescent Needs and Strengths (CANS) Assessment to Identify Patterns and Priorities of Need within a Service Population**

*Katharan Cordell, MPH, School of Social Welfare, University of California, Berkeley, Berkeley, CA*

The Child and Adolescent Needs and Strengths (CANS) assessment is widely used to assess needs and strengths for children and families. CANS actionable items identify areas for treatment focus, and a larger number of total actionable items confers a greater level of overall service need for the most troubled children and families. Local analysis of enrollment CANS within programs can identify patterns of strengths and needs within a service population and facilitate prioritization of care.
6:00 pm - 6:30 pm
30-Minute Paper ~ Palma Ceia 4

**Toward Value-Based Care: Service Utilization, Performance Measurement, and Resource Allocation in a Statewide Children’s Mobile Crisis Service**

Jack Lu, LCSW, Jeffrey Vanderploeg, PhD, Child Health and Development Institute, Inc., Farmington, CT; Tim Marshall, LCSW, Department of Children and Families, Hartford, CT

This paper describes the children’s mobile crisis service in Connecticut and how data on access, utilization, and provider performance were used to inform allocation of new funding to expand services. Service utilization and performance-based indicators were used to inform statewide decision-making on resource allocation to support service expansion. Implications are discussed in the context of the Affordable Care Act and the movement toward value-based care.

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**Session 33**

5:30 pm - 6:00 pm
30-Minute Paper ~ Garrison Suite

**Assessment of Suicide Prevention Knowledge and Awareness among Student Support Programs and Services Staff and School Administrators at Pasco County Schools**

Ericka Duncan, BS; Aldenise P. Ewing, MPH, The Institute for Translational Research in Adolescent Behavioral Health, University of South Florida, Tampa, FL; David Chamberlain, Pasco County Schools; Kathleen Armstrong, PhD, University of South Florida, Tampa, FL

This study sought to assess the level of training, knowledge and awareness for suicide prevention and postvention among Pasco County School administrators and Office for Student Support Programs and Services (OSSPS) staff. The OSSPS is a first line of contact for many youth facing mental and behavioral challenges. Considering that suicide is the third leading cause of death among adolescents, equipping school service staff with knowledge and awareness for early intervention is imperative.
Morning Plenary

8:00 am - 9:45 am ~ Bayshore Ballroom

**Early Intervention in Psychosis: Youth Perspectives, State Efforts, and Research Findings**

**Tamara Sale, MA,** Program Development Coordinator, Early Assessment and Support Alliance, Regional Research Institute (RRI), Portland State University; **Amy Goldstein, PhD,** Program Chief, Child and Adolescent Treatment and Preventive Intervention Research Branch, Division of Services and Intervention Research, National Institute of Mental Health; **Janet Walker, PhD,** Co-Director Pathways to Positive Futures RRTC, Director of Research, Early Assessment and Support Alliance, Regional Research Institute (RRI), Portland State University

Exciting new developments in research, policy and practice related to early intervention in psychosis have drawn increased attention and funding to efforts aimed at improving outcomes and preventing disability for young people who are experiencing the symptoms of psychosis for the first time. This plenary introduces a variety of perspectives on this work, beginning with those of young adults who have participated in early intervention programs. The plenary will also include a presentation by the EASA Center of Excellence, which helps to coordinate statewide early psychosis implementation as well as providing support nationally to emerging programs, through technical assistance and training, practice guideline development, fidelity review, participatory decision making, outcomes monitoring, and clinical consultation. The plenary will close with a research perspective featuring findings from the National Institute of Mental Health, a discussion of the implications of those findings, and a question and answer period.

**About the presenters**

**Tamara Sale** is a Co-Principal Investigator in the Research and Training Center on Pathways to Positive Futures and the Director of the EASA Center for Excellence at Portland State University's Regional Research Institute. Ms. Sale has been responsible for the overall development and implementation of early psychosis services in Oregon starting with a five-county regional program in 2001 and statewide dissemination beginning in 2007, including program design, financing and sustainability efforts, marketing and community education, data system development, training and consultation. Ms. Sale was Deputy Director for the Oregon arm of the Early Detection and Intervention for the Prevention of Psychosis (EDIPPP) study sponsored by The Robert Wood Johnson Foundation. Ms. Sale has almost thirty years of planning and program development experience within the mental health system and over a decade as a leader in family advocacy. She received a MA in Public Affairs with concentrations in fiscal policy and management of public and nonprofit organizations in 1992 from the University of Minnesota.

**Amy Goldstein** joined the National Institute of Mental Health (NIMH) in November 2006. She serves as Chief of the Preventive Intervention Research Program within the Division of Services and Intervention Research. In October 2013, Dr. Goldstein was named as the NIMH Associate Director for Prevention. In this congressionally-mandated position, she collaborates with other NIMH divisions, including the Division of Intramural Research Programs, other NIH institutes, other federal agencies, and external organizations to build and manage an NIMH-wide, integrated prevention research program. Dr. Goldstein received her PhD in Clinical Psychology in 2002 from Case Western Reserve University and completed post-doctoral fellowships in the Department of Psychology at the Children's Hospital of Philadelphia, as well as the Johns Hopkins Bloomberg School of Public Health. Dr. Goldstein had previous appointments as a Senior Instructor in the Division of Child and Adolescent Psychiatry, Department of Psychiatry, at the Case Western Reserve University School of Medicine and as a Clinical Psychologist at University Hospitals of Cleveland.

**Janet Walker, PhD,** is Research Associate Professor in the School of Social Work and the Regional Research Institute at Portland State University. She is the Director of the Research and Training Center on Pathways to Positive Futures and was formerly the Director of Research at the Research and Training Center on Family Support and Children's Mental Health. Her research focuses on exploring how individuals and organizations...
acquire capacity to implement and sustain high quality practice in human service settings, describing key implementation factors that affect the ability of organizations and individuals to provide high quality services and treatment, and developing and evaluating interventions to increase the extent to which youth with emotional or mental health difficulties are meaningfully involved in care and treatment planning. Dr. Walker’s research and related activities are guided by a commitment to collaborating with stakeholders, particularly including young people who have received services and supports intended to meet their mental health and related needs, and the families of these young people.

Afternoon Plenary
2:15 pm – 3:30 pm ~ Bayshore Ballroom

**Why Paper Tigers Works: Behind the Scenes with the Children’s Resilience Initiative in Walla Walla, WA**

*Theresa Barila, Co-Founder, Children’s Resilience Initiative, Walla Walla, WA*

Theresa Barila will share the “back-story” to the documentary Paper Tigers, now in national screenings. Theresa will describe how a focus on common language, common agenda and the community capacity development model of the Family Policy Council, created the context, structure and support not just for Paper Tigers but for the many other untold resilience-based stories underway in Walla Walla. Newly released research showing how youth positive supports and resilience-building strategies can buffer the negative effects of ACES – even for youth with a large number of ACES will also be reviewed.

**About the Presenters**

*Theresa Barila* is coordinator of the Walla Walla County Community Network, part of the Washington State Community Network System. Together, this family-community-state partnership reduces expensive social problems by involving each community in finding its own unique pathway to thriving families. Building community capacity is a key element of the Network’s mission. One example of community capacity development is the creation of the Children’s Resilience Initiative to bring awareness of the impact of Adverse Childhood Experiences as the major determinant of adult and public health to the Walla Walla Valley community for practical application, with an emphasis on resilience. This work has attracted national attention in part due to its grassroots organizational development and the focus on the hope of Resilience.

Theresa has a Masters of Science in Fisheries Management and a Bachelor of Science in Biology. Born and raised in Washington, D.C., she migrated west in 1981 and now calls the Pacific Northwest home. Her area of expertise for 20 years with salmon and steelhead Federal recovery planning in the Snake and Columbia River system was focused on fish stress and physiology. She shifted career goals in 1998 when she resigned from the U.S. Army Corps of Engineers and accepted the role of Network Coordinator. She has lived in Walla Walla since 1984, and has been the Network coordinator since 1998. She has two children: a 34 year old son and a 25 year old daughter. Experiencing the world of a special needs child with Asperger’s Syndrome (Autism Spectrum) has significantly shaped Teri’s thinking on systems, education, resilience and advocacy for children.
Session 34

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

*Now Is the Time-Healthy Transitions (NITT-HT) National Evaluation: Overview, Objectives, Design, and Analysis Plans*

**Symposium Chair:** Heather Ringeisen, PhD, Survey Research Division, RTI International, Research Triangle Park, NC; **Discussant:** Emily Lichvar, PhD, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, Rockville, MD

The Substance Abuse and Mental Health Services Administration (SAMHSA) Now Is The Time (NITT) initiative includes four grant programs: Project AWARE (Advancing Wellness and Resiliency in Education)—State Education Agency (SEA), NITT Healthy Transitions (NITT-HT), and NITT Minority Fellowship Program—Youth and Addiction Counselors. Program grantees received preliminary funding in 2014 and a national evaluation of all 4 NITT grantee programs was launched in March of 2015. This symposium will provide an overview of the national evaluation plans for one component of the SAMHSA NITT initiative—Healthy Transitions: Improving Life Trajectories for Youth and Young Adults with, or at Risk for, Serious Mental Health Conditions (NITT-Healthy Transitions). NITT-HT is SAMHSA’s most recent investment in support of services for young adults with mental illness. This symposium will describe the NITT-HT national evaluation objectives, design, primary evaluation questions, and analysis plans.

**NITT-HT Evaluation Overview: Design, Logic Model, and Core Evaluation Questions**

Mason Haber, PhD, Department of Psychiatry, University of Massachusetts Medical School, Shrewsbury, MA; Ariana Napier, MS, Survey Research Division, RTI International, Research Triangle Park, NC

This paper describes an overview of the NITT-HT national evaluation logic model, design, and evaluation questions. The NITT-HT national evaluation is grounded in a logic model that illustrates the program's intent as well as activities to support desired system and participant outcomes. This logic model is complemented by core evaluation questions around collaboration and coordination. Additional questions are focused on mental health service system capacity and infrastructure; early and accurate identification of mental health needs; mental health service access for individuals in need; and individual resilience and functioning and school/community safety.

**Evaluating NITT-HT Youth and Young Adult Change: Processes and Outcomes**

Heather Ringeisen, PhD, Survey Research Division, RTI International, Research Triangle Park, NC; Mason Haber, PhD, Department of Psychiatry, University of Massachusetts Medical School, Shrewsbury, MA; Antonio Morgan-Lopez, PhD, SPHERE, RTI International, Research Triangle Park, NC

This paper describes the design for the NITT-HT national evaluation of youth and young adult change processes and outcomes, including evaluation questions and a summary of methods as well as plans for data analysis. The data analysis plan is designed to support more rigorous inferences than typically possible in interpreting program evaluation data through the use of propensity scoring methods and integrative data analysis techniques. Assessments of individual-level outcomes including symptoms and functioning as well as intermediate outcomes (e.g., career development self-efficacy) will be presented, along with individual process measures (e.g., person-centered planning, working alliance). The presentation will also discuss a rigorous quasi-experimental statistical design for evaluating outcomes.

**Evaluating NITT-HT Systems Change: Processes and Outcomes**

Nancy Koroloff, PhD, School of Social Work, Portland State University, Portland, OR; Mason Haber, PhD, Department of Psychiatry, University of Massachusetts Medical School, Shrewsbury, MA; Janet Walker, PhD, School of Social Work, Portland State University, Portland, OR

The paper describes the design for the cross-site evaluation of systems change processes and outcomes for the NITT-HT Initiative, including a review of its questions, data collection methods, and analytic approach. Instruments assessing systems change processes and outcomes will be presented, including updated versions of the Community Support for Transition Inventory and State Support for Transition Inventory. The presentation will also discuss the mixed methods analytic design for relating NITT-HT systems change processes and outcomes.

Session 35

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

**Fundamentals of the Implementation of Evidence-Based Practices: Essential Elements of an Intermediary Organization**

Robert Franks, PhD, Christopher Bory, PsyD, Judge Baker Children’s Center, Boston, MA

This presentation will build upon the growing literature in the field of implementation science to propose a blueprint for the development of intermediary organizations to support the implementation of evidence-based practices and programs.
10:30 am - 11:00 am
30-Minute Paper ~ Bayshore VI

Assessing Organizational Readiness: A Critical Step in Improving the Quality of Care
Christopher Bory, PsyD, Robert Franks, PhD, Judge Baker Children’s Center, Boston, MA

A critical step in improving the quality of care is to determine whether systems and organizations are ready for change. Presenters will describe the conceptual background and practical application of assessing organizational readiness when implementing an evidence-based practice in community-based settings. The presentation will include a description of the evidence-based practice, an overview of the methods utilized, the results of the readiness assessment, and implications for practice change within the system of care.

11:00 am - 11:30 am
30-Minute Paper ~ Bayshore VI

Strategies for Selecting a Good Fit Evidence-Based Practice for Child, Adolescent, and Young Adult Behavioral Health
Jared Martin, MA, Chadwick Center for Children & Families, Rady Children’s Hospital – San Diego, San Diego, CA

Adopting an evidence-based practice (EBP) requires careful consideration of organizational needs, the characteristics of the EBP, and its fit with the organization and target population. Agencies that fail to consider these factors may inadvertently select an inappropriate EBP, resulting in wasted agency resources and potentially harmful effects for families. This seminar will detail strategies for assessing organizational needs, determining whether change and/or a new program is needed, and exploring EBPs.

Session 36
10:00 am - 11:30 am
90-Minute Symposium ~ Bayshore VII

Community-Based Work to Reduce Child Maltreatment by Building Parent and Community Support and Resiliency

This symposium will present the key findings of a 3-year, multi-site study of interventions that use neuroscience and population-level data to reduce Adverse Childhood Experiences (ACEs). The findings from this study will act as the basis for a conceptual framework for infusing trauma-informed care across the behavioral health continuum. The goal of this symposium is to highlight the importance of using research to inform practices and policies.

Session 37
10:00 am - 10:30 am
30-Minute Paper ~ Esplanade I

Profile of Recent System of Care Expansion Efforts
Ana Maria Brannan, PhD, Special Education, Indiana University, Bloomington, IN; Lynda Gargan, PhD, National Federation of Families for Children’s Mental Health, Rockville, MD; Kristin Painter, PhD, Substance Abuse and Mental Health Services Administration, Rockville, MD; Abram Rosenblatt, PhD, Westat, Washington, DC

This presentation describes the system of care expansion efforts of the grantees funded by SAMHSA in 2013 and 2014. Data were collected through semi-structured interviews with key partners (e.g., project directors, family and youth representatives, core agency representatives) involved with system development and implementation at the jurisdiction level (e.g., state, region, county). Additional information was provided through other sources. The primary focus will be on strategies used to achieve system of care expansion and implementation.
violence over time puts children at risk for complex trauma. While exposure to ACEs and violence—both as a victim and a witness—and resulting trauma and poor health outcomes have received increasing attention, the extent and effects of exposure to animal cruelty have largely been overlooked. Yet it is clear from the empirical evidence that the abuse that occurs within family systems rarely has one target, and frequently the target shifts from intimate partner, to child, to pet.

**A Critical Analysis of the Research on the Link Between Animal Abuse, Child Maltreatment, and Delinquent Outcomes**

Marylou Randour, PhD, Animal Welfare Institute, Washington, DC

A critical analysis is offered of the research on child abuse and animal abuse. One approach examines the co-occurrence of child abuse and animal abuse and the role of animal abuse in poly-victimization. Another, more extensive literature review, documents the significance of childhood animal abuse in the trajectory of anti-social behavior. In conclusion, the important role that identification of animal cruelty in the early intervention and treatment of children at risk, and the trend toward cross reporting is described.

**Children who Abuse Animals: Characteristics and Risk Factors**

Lisa Lunghofer, PhD, Making Good Works, Gaithersburg, MD

Following a description of Children and Animals Together (CAT), a trauma-focused intervention for children who have abused animals, findings from analysis of detailed assessments of children referred to CAT will be presented. Children accepted into CAT will be compared to those who were not. Findings discussed will include the complex trauma experienced by children who abuse animals and related environmental factors, including parental dysfunction. We conclude with a discussion of practice and policy implications.

**Session 39**

10:00 am - 10:30 am

30-Minute Paper ~ Esplanade III

**Report on User Testing of an Interactive Video and Web-Based “Booster” Training for Core Wraparound Skills**

Janet Walker, PhD, John Ossowski, MSW, National Wraparound Initiative, Portland State University, Portland, OR

National Wraparound Initiative (NWI) experts reviewed video footage of Wraparound meetings to identify instances of strengths-based and youth/family driven practice. These segments of video, along with the experts’ ratings and commentary, formed the core of an online, interactive training “booster” with opportunities for trainees to rate practice (from video clips) and compare their scores to the experts’. This presentation will include findings from initial trainee user testing.
Do We Know What We Are Talking About?

Tuesday – March 15

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Are You Being Engaged? Fostering Discussion Hour ~ Palma Ceia 1

10:00 am - 11:00 am

Are You Being Engaged? Fostering Engagement Between Families and Systems: Do We Know What We Are Talking About?

John Fluke, PhD, Kempe, Pediatrics, University of Colorado School of Medicine, Aurora, CO; Kurt Moore, PhD, WRMA, Inc., Denver, CO; Krista Thomas, PhD, Chapin Hall at the University of Chicago, Chicago, IL

The concept of “engagement” is generally used to describe a positive relationship between individuals/families and service systems. However, the exact definition and measurable features of this relationship remain unsettled. This discussion hour will focus on identifying what we know about engagement and involve short presentations that offer specific examples of rigorous quantitative and qualitative research on the subject to set the stage for a discussion.

Behavioral Health Record: TMS-WrapLogic

Using User Feedback to Refine an Electronic Behavioral Health Record: TMS-WrapLogic

Alyssa Hook, BS, Eric Bruns, PhD, Public Behavioral Health and Justice Policy, University of Washington, Seattle, WA; Kelly Hyde, PhD, Fidelity EHR, Santa Fe, NM

Electronic health record (EHR) technology promises to promote greater efficiency, service quality, and positive outcomes. This paper will present rationale for and functions of TMS-WrapLogic, an EHR specific to Wraparound care coordination, and results of user experience (UX) testing from surveys, standardized measures, and focus groups from users in four states. Ways in which UX feedback can aid in development, refinement, and positive impact of an EHR, as well as limitations of this methodology, will be discussed.

What Can We Achieve Online?

Emerging Trends in Wraparound Training: What Can We Achieve Online?

Kris Matthews, MSW, Jungrim Moon, MSW, Center for Children and Families, School of Social Welfare, University of Kansas, Lawrence, KS

This presentation reviews the development of an online training for wraparound facilitators in Kansas. There is a lack of research regarding how online training formats impact service delivery in children’s mental health. This presentation reviews one state’s move from a preferred blended wraparound training that included online, in-person, and post-training, to a strictly online format that will become the required state training for facilitators in Kansas, and the impact this move may have on services.

11:00 am - 11:30 am

30-Minute Paper ~ Esplanade III

Simple and Elegant Statewide “Big Data” Using Data Visualization

Knute Rotto, ACSW, Lindsay Betzendahl, Beacon Health Options CT, Rocky Hill, CT

Monitoring key performance indicators and demonstrating successful outcomes are critical to ensuring high quality care, but often outside the comfort zone of behavioral health care professionals and administrators. Big data represents overwhelming amounts of information which requires increased sophistication to sift through and understand. This session will teach you the power of a data visualization tool to transform your data and reports into dynamic interactive visualizations, empowering you to identify insights and highlight your results.

Service Integration, Service Use, and Costs within Systems of Care

Service Integration, Service Use, and Costs within Systems of Care

Susan Drilea, MS, WRMA, Inc., Rockville, MD; Simone Boyce, PhD, Connie Maples, MA, Keith Smith, ICF International, Atlanta, GA

Data collected through the national evaluation of the Children’s Mental Health Initiative provide information on service use and costs of integrated system of care services received across multiple service sectors. This analysis indicates that children and youth with serious mental health conditions receive substantially more support services while enrolled in systems of care than prior to enrollment. The cost of support services is substantially lower than the cost of therapeutic and psychiatric inpatient services.

10:30 am - 11:00 am

30-Minute Paper ~ Palma Ceia 2

HIPPY: A Case Study of HIPPY Implementation in Tampa

Brenda Brinson, Ruby Joseph, MPA, Child and Family Studies, College of Behavioral and Community Sciences, University of South Florida, Tampa, FL

This paper will provide a case study demonstrating how HIPPY has provided preschool education to 3-5 year old children in Hillsborough County using parents as their children’s first teachers. The presentation will outline core program components including staff training, program tools, and child assessments. The presentation will highlight curriculum adaptations that enhance curriculum delivery to a small group of children with autism. Results on HIPPY children’s educational progress and parent involvement in their children’s preschool education are also presented.

11:00 am - 11:30 am

30-Minute Paper ~ Palma Ceia 2
Session 42
10:00 am - 10:45 am
Discussion ~ Palma Ceia Palma Ceia 3
**Transforming the Children’s System of Care to Build and Support Integration: System and Practice Level Lessons-Learned from Maricopa County**

Robert Hess III, Sondra Stauffacher, MA, Inter-Growth, Phoenix, AZ; Tad Gary, MEd, Mercy Maricopa Integrated Care, Phoenix, AZ; Maryjo Whitfield, MSW, Jewish Family and Children's Services, Phoenix, AZ

Transforming a system of care takes a multi-faceted approach to strategically plan, engage, and facilitate change at the system and practice level. This panel presentation provides a cross-system view from the health plan, provider, and external consultant perspectives and identifies key lessons learned and recommendations for challenging historical perspectives of how to implement the system of care model for integration within diverse communities.

10:45 am - 11:30 am
Discussion ~ Palma Ceia Palma Ceia 3
**Have a Little Faith in Me: Mental Health Literacy and Pastoral Care Practices of Clergy and their Congregations**

David McClung, MSW/MDiv, Texas System of Care and Baylor University, New Braunfels, TX

Families with mental health concerns may commonly seek out clergy members for pastoral care and support. Existing literature points to a need for clergy to increase their mental health training, strengthen their relationships with mental health providers, and develop more effective referral practices. This presentation will examine the current research to describe the challenges and opportunities that exist for including clergy and congregations as sources of support for families seeking holistic, person-centered, and community-based care.

Session 43
10:00 am - 10:45 am
Discussion ~ Palma Ceia Palma Ceia 4
**Policy Improvements in Research and Practice with Indian Country to Eliminate Health Disparities for American Indian and Alaska Native Peoples: A Policy Study**

Jami Bartgis, PhD, One Fire Associates, LLC, Sand Springs, OK; Eleanor Gil-Kashiwabara, PsyD, Erica Blue Roberts, PhD, MHS, James Bell Associates, Inc., Arlington, VA

This policy study examines the challenges and potential solutions for balancing scientific rigor and cultural competence in implementing behavioral health research and practice in American Indian and Alaska Native communities. The study methods include key informant interviews with researchers, evaluators, and program staff serving American Indian and Alaska Native Communities through federally funded behavioral health initiatives. These data identify the common themes, lessons learned, and recommendations for policy improvements in supporting research and practice in Indian Country.

10:45 am - 11:30 am
Discussion ~ Palma Ceia Palma Ceia 4
**Tribal and Urban Indian Community Sharing and Innovation Session**

Dolores Subia BigFoot, PhD, University of Oklahoma Health Sciences Center, Indian Country Child Trauma Center, Oklahoma City, OK

This session provides a forum for open networking for tribal and urban Indian health organizations to learn and share from one another. Most of the innovative strategies and best practices that are occurring across Indian Country are coming directly from communities. This session allows for community to share and learn from one another to support improved policy, practice, and research with Native communities. Participants are encouraged to bring tools, resources, marketing materials, policies, evaluation or research materials and other tangible products to showcase and share during this networking session.
Session 44
10:00 am - 11:30 am
90-Minute Symposium ~ Garrison Suite
Research Project Management: Practical Strategies for Success
Jennifer Wisdom, PhD MPH, The George Washington University, Washington, DC
What does it take to successfully complete a research project? A good team and strong project management skills are critical! This presentation describes how to create a strong research team and how to manage a research project efficiently and effectively to achieve your goals. Key factors to success include clear goals, planning, organization, leadership, multiple perspectives, and cooperation. An example of an effectively managed project and its products is provided.

Research Luncheon
Bayshore Ballroom
11:30 am - 12:45 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
1:00 pm - 1:30 pm
30-Minute Paper ~ Bayshore V
Implementing RENEW in Denmark: Cultural Influences in the Implementation of Youth-Driven Transition Supports
Michaela Hoej, MA, Center for Psychiatry and Recovery, Psychiatric Center of Bellerup, Bellerup, DK; JoAnne Malloy, PhD, Institute on Disability, University of New Hampshire, Concord, NH
This paper is focused on how the RENEW (Rehabilitation for Empowerment, Natural Supports, Education, and Work) intervention for transition age youth (TAY) with emotional and behavioral challenges (EBC) is being adapted to meet the needs of young adults in a vocational program and mental health clinic in Denmark.

1:30 pm - 2:00 pm
30-Minute Paper ~ Bayshore V
Evaluation of Future Planning Goals as Progress Indicators of Youth and Young Adults in Transition to Adulthood Programs
Christine Beck, PhD, Karyn Dresser, PhD, Research and Program Practices, Stars Behavioral Health Group, Oakland, CA; Hewitt B. “Rusty” Clark, PhD, National Network on Youth Transition (NNYT), Tampa, FL
This study addresses whether transition programs applying the Transition to Independence Process (TIP) program model facilitate and support young adults to identify and work on their own goals regarding Education, Employment, Living Situation, Emotional and Behavioral Wellbeing and Community Living (transition domains). Three programs serving young people ages 15 yrs to 26 yrs in Michigan, Ohio and California (N= 286 combined) have begun tracking participant goals and perceptions of progress.

Session 46
1:00 pm - 1:30 pm
30-Minute Paper ~ Bayshore VI
Building Strong Clinicians: Training to Promote Readiness for Supervision and Evidence-Based Treatment
Elisabeth Cannata, PhD, Community-Based Family Services and Practice Innovation, Wheeler Clinic, Plainville, CT
This discussion hour will define and underscore the opportunity for best-practice supervision through jobs within evidence-based treatment programs and provide an overview of a successful partnership between Wheeler Clinic and Fordham University to promote pre-service workforce readiness for EBTs. Discussion will focus on clinical skill building activities to elicit interest and readiness for EBTs and specific instructional challenges and strategies within the traditional classroom as well as online graduate training.

1:30 pm - 2:00 pm
30-Minute Paper ~ Bayshore VI
The National Center for Evidence-Based Practice in Child Welfare
Geetha Gopalan, LCSW, Jennifer Mettrick, Pamela Freeman, PhD, School of Social Work, University of Maryland, Baltimore, MD; Sue Kerns, PhD, Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA
The National Center for Evidence-Based Practice in Child Welfare (NCEBPCW) responds to the discontinuities between the mental health needs of youth involved in child welfare services and treatment services they receive. NCEBPCW focuses on building the capacity of child welfare agency staff, mental health provider agency staff, and public city/state/county leadership to effectively identify, assess, and respond to the mental health needs of child welfare involved children/youth guided by open source evidence-based treatment models.
Session 47 CW
1:00 pm - 1:30 pm
30-Minute Paper ~ Bayshore VII

Empowering Youth Aging out of Foster Care
Tara Batista, PhD, Department of Management, Entrepreneurship, and Family Enterprise, Stetson University, Deland, FL; Allen Johnson, DPH, Global Health Program, Rollins College, Winter Park, FL
This study examines the effects of youth empowerment programs (YEPs) on the psychological empowerment of young people aging out of foster care. The research uses a cross-sectional survey to compare the outcomes of foster care alumni who participated in YEPs to those who did not participate. Findings suggest that youth who have participated in YEPs have higher levels of psychological empowerment than those who participate in programs that do not contain a participatory component.

1:30 pm - 2:00 pm
30-Minute Paper ~ Bayshore VII

The Use of Evaluation to Strengthen the “System of Care” for Youth: The Example of Supportive Housing Models in Child Welfare
Mitchell Rosenwald, PhD, School of Social Work, Barry University, Miami Shores, FL; Miriam Landsman, PhD, School of Social Work, University of Iowa, Iowa City, IA
This presentation describes the concept of supportive housing models as a system of care designed to help youth who experience child maltreatment and homelessness. Drawing on process evaluations at two federal demonstration sites, the process findings – program capacity, treatment fidelity, partner collaboration, and ethical oversight – are discussed. Implications for how these findings can impact supportive housing partnerships are reviewed.

Session 48 OR
1:00 pm - 1:30 pm
30-Minute Paper ~ Esplanade I

Beyond ‘Homophobia’: Thinking More Clearly about Stigma, Prejudice, and Sexual Orientation
Gregory Herek, PhD, University of California, Davis, Davis, CA
Policy changes and public opinion polls show that there has been a major shift in views on sexual minorities. This session attempts to explain why this change has occurred; considers the nature of heterosexuals’ negative attitudes toward sexual minorities and the label commonly used to describe them—homophobia; and suggests that researchers, scholars, and practitioners move beyond homophobia to help us think more clearly about sexual stigma in all its manifestations.

1:30 pm - 2:00 pm
30-Minute Paper ~ Esplanade I

Intervening with Minority Youth at Risk for Juvenile Justice Involvement
Andrew Case, PhD, University of North Carolina at Charlotte, Charlotte, NC
This presentation outlines an empowerment model for intervening with minority youth at risk for justice system involvement. The model was informed by a 9-month ethnography of a positive youth development program. Key components include: a) creating an affirming setting that neutralizes the adverse psychosocial consequences of labeling; b) developing skills and knowledge to enact personal and social change; c) providing empowered roles; and d) fostering supportive relationships.

Session 49
1:00 pm - 2:00 pm
60-Minute Symposium ~ Esplanade II

Trauma-Informed Policy and Practice: Implementing Research-Based, Cross-Systems Reforms to Improve Outcomes for Children and Youth
Symposium Chair: Karli Keator, MPH, National Center for Mental Health and Juvenile Justice, Delmar, NY; Discussant: Joseph Cocozza, PhD, National Center for Mental Health and Juvenile Justice, Policy Research Associates, Inc., Delmar, NY
Each year, millions of children are exposed to violence in their homes, schools, and communities. Left unaddressed, traumatic exposure can put these children at an increased risk for aggressive/disruptive behaviors; psychiatric disorders, including but not limited to, anxiety, depression, and PTSD; alcohol and substance abuse; school failure; unsafe sexual behavior; involvement in the juvenile and criminal justice systems; and continued or repeated victimization. Trauma caused by exposure to violence also has long-term medical implications, including increased likelihood for stroke, diabetes, heart disease, cancer, and premature death. Children’s exposure to violence drives significant public costs, with the predicted incremental healthcare costs alone ranging from $333 billion to $750 billion annually.

State Level Systems Change to Address Childhood Trauma
This presentation will provide an overview of successful strategies to support state level system improvement in responses to children who are experiencing trauma as a result of their exposure to violence. Details and experiences of the Defending Childhood State Policy Initiative will be shared, with emphasis on components that are critical to shaping reform efforts across child-serving systems.
**Key Elements to Strengthening Our Future: Developing a Trauma-Informed Juvenile Justice Diversion Program for Youth with Behavioral Health Needs**

Karli Keator, MPH, National Center for Mental Health and Juvenile Justice, Policy Research Associates, Inc., Delmar, NY; Christine Doyle, PhD, Office of Behavioral Health, Georgia Department of Juvenile Justice, Decatur, GA

This presentation will provide participants with an opportunity to engage in a discussion of the implementation steps necessary to achieve a trauma-informed and trauma-responsive juvenile justice diversion strategy. The overall discussion will focus on lessons learned through a four state Policy Academy-Action Network Initiative and will highlight one state’s approach which ultimately led to successful implementation of several domains identified in a newly released guidebook entitled “Key Elements to Strengthening Our Future.”

**Implementing Trauma Screening Practices: A Critical Element to Achieve a Trauma-Informed System of Care**

Keith Cruise, PhD, Department of Psychology, Fordham University, Bronx, NY; Adolphus Graves, Fulton County Juvenile Court, Atlanta, GA

This presentation will overview a three step process for developing and implementing a trauma screening practice within service delivery systems. Application of this three-step process within two juvenile justice settings (diversion and detention) will be highlighted. Drawing on the lessons learned from the trauma screening initiatives implemented in different juvenile justice settings, the benefits and challenges of trauma screening implementation are highlighted with recommendations for shaping similar trauma screening initiatives in other systems of care.

**Session 50**

1:00 pm - 2:00 pm

60-Minute Symposium ~ Esplanade III

**Youth and Family Training Institute: Innovative Approaches to Training, Coaching, and Evaluating High Fidelity Wraparound**

Symposium Chair: Monica Payne, MA, Youth and Family Training Institute, Monroeville, PA; Discussant: Shannon Fagan, MS, Youth and Family Training Institute, Monroeville, PA

The Youth and Family Training Institute (YFTI) has produced a team-based training, a coaching process that focuses on skill development and demonstration, and an evaluation and continuous quality improvement system that provides innovative information about the wraparound process, fidelity, and outcomes. This high quality training and coaching, along with standardized documentation and monitoring, produces high-fidelity wraparound programs with very exciting outcomes for youth and families with the most complex and costly needs.

**Training and Coaching Platforms that Support Fidelity to the Wraparound Model**

Shannon Fagan, MS, Monica Payne, MA, Youth and Family Training Institute, Monroeville, PA

By creating a skill-based training, coaching, and credentialing platform, we have assured a consistent approach to supporting the HFW workforce in reaching and maintaining fidelity to the HFW principles and phases. In this workshop we explore how the Youth and Family Training Institute developed this platform, adapts it for other planning process models, and continues to assure fidelity to the wraparound model by the use of data and continuous quality improvement.

**Evaluation and Continuous Quality Improvement Using Standardized High Fidelity Wraparound Chart Documentation**

Monica Payne, MA, Youth and Family Training Institute, Monroeville, PA

By standardizing chart documentation, we created a sustainable evaluation tool that is utilized by wraparound providers in diverse regions to better monitor the process and improve outcomes for families. Our evaluation reports are customized for coaching, monitoring the progress of youth and families, reporting important outcomes data to key stakeholders, and implementing a comprehensive CQI process. We will discuss lessons learned in implementation, and how the system could be used in other communities.

**Using Continuous Quality Improvement Strategies that Lead to Exciting High Fidelity Wraparound Outcomes**

Bryon Luke, MSS, Child and Family Focus, Inc., Hatboro, PA; Shannon Fagan, MS, Monica Payne, MA, Youth and Family Training Institute, Monroeville, PA

An important component of the continuous quality improvement (CQI) process is to use the data gathered to improve the local provider training and coaching practices, which ultimately leads to higher fidelity and outcomes for youth and families with complex needs. Child and Family Focus will discuss how the CQI process is implemented across four PA counties. We will also present state level outcomes data from the System of Care National Evaluation to support the discussion.
Session 51
1:00 pm - 2:00 pm
Discussion Hour ~ Palma Ceia 1

**Structural Racism, Implicit Bias, Juvenile Justice, and Mental Health: Where Do We Go from Here?**

Linda Callejas, PhD, Kathy Lazear, MA, Cultural & Linguistic Competence Hub of the Technical Assistance Network for Children's Behavioral Health (TA Network) & the National Training and Technical Assistance Center for Children's Behavioral Health (NTTAC), Department of Child & Family Studies, University of South Florida, Tampa, FL; Myriam Monsalve Serna, MED, LMFT, Center for Community Learning, Inc., Miami, FL; Catalina Booth, JD Center for Community Learning, Inc., Houston, TX; Selena Webster-Bass, MPH, Webster-Bass Health Resources Group, Jacksonville, FL

As part of this interactive session, we will present 3-4 contemporary social issues using photos and brief descriptions of relevance to SOC communities (poverty, racism/discrimination/police/community relations; LGBTQI communities/and working with transition-aged youth from diverse communities) as they seek to increase family and youth voice/participation in children's mental health. This session will allow for interactive discussion among attendees with an eye toward enhancing culturally and linguistically competent service delivery to diverse communities around the country.

Session 53
1:00 pm - 2:00 pm
Discussion Hour ~ Palma Ceia 3

**Breaking Unconscious Bias in Systems of Care: Understanding the Neuroscience of In-Group vs. Out-Group Classification on Systems Change**

Laurie Ellington, MA, Zero Point Leadership, Silver Spring, MD

Because the human brain is deeply and intrinsically biased, most biases are unconscious to us. However, they have a dramatic impact on every decision we make and often prevent us from making sound decisions and creating a culture of inclusion and collaboration. System of care leaders recognize the costs of poor decision-making and disengagement to the success of organizational missions and child and family level outcomes. To minimize biased decision-making in child and family serving systems, it is imperative that leaders and practitioners learn to identify and minimize bias whenever possible. This discussion hour draws on the most recent findings in the neuroscience of bias that impact the ability of child and family-serving systems to collaborate and make effective decisions that move positive change forward.

Session 52
1:00 pm - 2:00 pm
Discussion Hour ~ Palma Ceia 2

**The Massachusetts Child Psychiatric Access Project: How a Statewide Pediatric Psychiatric Consultation Program Can Promote Behavioral Health Integration**

Christina Fluet, MPH, Division of Child and Adolescent Services, Massachusetts Department of Mental Health, Boston, MA; John Straus, MD, Massachusetts Behavioral Health Partnership, Boston, MA; Marcy A. Ravech, MSW, Massachusetts Child Psychiatry Access Project, Boston, MA

The Massachusetts Child Psychiatry Access Project (MCPAP) is a system of six regional children's behavioral health consultation teams that help pediatric primary care providers (PCPs) meet the needs of children with behavioral health concerns. This session will describe the program and discuss how MCPAP is collaborating with accountable care organizations and provider networks to ensure child psychiatric consultation and ancillary supports are available to their providers as they increasingly integrate behavioral health in primary care.

Session 54
1:00 pm - 2:00 pm
Discussion Hour ~ Palma Ceia 4

**Balancing Cultural Competence with Scientific Rigor in American Indian/Alaska Native (AI/AN) Communities**

Jami Bartgis, PhD, One Fire Associates, LLC, Sand Springs, OK; Eleanor Gil-Kashiwabara, PsyD, Portland State University, Regional Research Institute for Human Services, Portland, OR

There is an ongoing need to balance cultural competence and scientific rigor in conducting evaluation and research with American Indian and Alaska Native communities. This session will provide national updates in improving evaluation efforts with American Indian and Alaska Native communities to improve cultural competence and usefulness. The session will also provide participants with an opportunity to engage in an informative discussion around unique challenges faced by American Indian and Alaska Native communities, as well as possible solutions and innovative models that can be used to address these critical concerns.
Session 55
1:00 pm - 2:00 pm
Discussion Hour ~ Garrison Suite

**Integrating Positive Behavioral Interventions and Supports and Mental Health: Partnering Across School and Community**

Natalie Romer, PhD, Karen Childs, MA, Catherine Raulerson, EdS, Department of Child and Family Studies, College of Community and Behavioral Sciences, University of South Florida, Tampa, FL

This session will describe the core features of a Multi-Tiered System of Support (MTSS) such as Positive Behavioral Interventions and Supports. The presenters will provide illustrations and examples from a state funded program aimed at building capacity to improve youth mental health outcomes by integrating mental health supports across school and community settings within an MTSS framework.

Networking Break
2:00 pm - 2:15 pm

Afternoon Plenary
2:15 pm – 3:30 pm ~ Bayshore Ballroom

**Why Paper Tigers Works: Behind the Scenes with the Children’s Resilience Initiative in Walla Walla, WA**

Theresa Barila, Children’s Resilience Initiative, Walla Walla, WA

Theresa Barila, co-founder of the Children’s Resilience Initiative and longtime community mobilizer in Walla Walla, WA, will share the “back-story” to the documentary Paper Tigers, now in national screenings. Theresa will describe how a focus on common language, common agenda and the community capacity development model of the Family Policy Council, created the context, structure and support not just for Paper Tigers but for the many other untold resilience-based stories underway in Walla Walla. Newly released research showing how youth positive supports and resilience-building strategies can buffer the negative effects of ACES, even for youth with a large number of ACES, will also be reviewed.

Networking Break
3:30 pm – 3:45 pm

Session 56
3:45 pm - 4:15 pm

30-Minute Paper ~ Bayshore V

**University Suicide Prevention: Evaluation of Campus Connect, a Gatekeeper Training Program**

Stephen Roggenbaum, MA, Child and Family Studies, University of South Florida, Tampa, FL; Heidi Petracco, MSW, USF Counseling Center, University of South Florida, Tampa, FL; Maureen Monahan, MA, Marc Karver, PhD, Department of Psychology, University of South Florida, Tampa, FL

Campus Connect suicide prevention gatekeeper trainings were provided across a large southeastern university to approximately 200 students. Trainees were invited to participate in pre and post training evaluations that assessed constructs pertaining to suicide prevention including: knowledge, attitudes, and perceived ability to engage in learned behaviors. Data were analyzed through the use of paired t-tests and one-way ANOVA. Prevention and research implications of findings and future directions for college suicide prevention programming will be discussed.

4:15 pm - 4:45 pm

30-Minute Paper ~ Bayshore V

**College in Mind: A Qualitative Study of Emerging Adults with Psychiatric Disabilities and their College Transition Experiences**

Laura Murray, PhD Candidate, Division of Applied Psychology and Human Development, Graduate School of Education, University of Pennsylvania, Philadelphia, PA

There are more emerging adults with psychiatric disabilities attending American colleges and universities than ever before (Gallagher, 2012), yet little is known about these students’ transitions into college or their lives once enrolled. The purpose of the current qualitative study is to explore and describe the lived experiences of ten emerging adults with self-reported mood, anxiety, and/or psychotic disorders as they move through their Freshman year at six different U.S. institutions of higher education.

Session 57
3:45 pm - 4:15 pm

30-Minute Paper ~ Bayshore VI

**Be a Hero for Zero: Implementing the Zero Suicide Framework in Behavioral Health Systems**

Molly Lopez, PhD, Erica Shapiro, PhD, Deborah Cohen, PhD, University of Texas, Austin, TX; Jenna Heise, MA, Mental Health and Substance Use Division, Texas Department State Health Services, Austin, TX
Led by the Texas Department of State Health Services, Texas’ Zero Suicide initiative is taking a statewide approach to addressing the high-risk population of individuals served by the public mental health system. The effort builds upon the infrastructure developed in the state over the last decade, including a State Suicide Prevention Council, a statewide strategic plan, and a strong collaboration with partner organizations and community coalitions. The Texas Suicide Safe Care approach includes a comprehensive multi-level focus with the goal of ensuring an effective, coordinated network of supports aimed at identifying, referring, treating, and supporting individuals at risk of suicide.

4:15 pm - 4:45 pm
30-Minute Paper ~ Bayshore VI
Cornerstone: An Empirically-Supported Intervention for Transition-Age Youth with Mental Disorders
Michelle Munson, PhD, Andrea Cole, MSW, Shelly Ben-David, MSW, Social Work, New York University, New York, NY; Beth Sapiro, MSW, Social Work, Rutgers University, New Brunswick, NJ
This study presents a blueprint for developing an evidence-supported psychosocial intervention for transition-age youth with serious mental health challenges. The blueprint includes a strong theoretical basis, designing an initial program manual, and examining feedback from stakeholders. Interviews and group discussions were utilized to collect information on intervention (N=50). The team used constant comparative methods. Then, refined the manual, which is being used in our NIMH-funded efficacy trial. The presentation will describe the final program Cornerstone.

Session 58 CW
3:45 pm - 4:15 pm
30-Minute Paper ~ Bayshore VII
Minnesota’s Short-Stayers: A Study of Children Who Have Experienced Short Out-of-Home Placement Stays
Monica Idzelis Rothe, PhD, Stephanie Nelson-Dusek, MA, Wilder Research, Wilder Foundation, St. Paul, MN; Yvonne Humenay Roberts, PhD, Research Services, Casey Family Programs, Seattle, WA
Staff from Wilder Research and Casey Family Programs will present findings from a recent study of children who have experienced short out-of-home placement stays of less than 30 days (referred to as “short-stayers”). This study is a collaboration between the State of Minnesota, Casey Family Programs, and Wilder Research aimed at describing the large short-stayer population in Minnesota, understanding the extent to which these children re-enter foster care, and determining possible next steps for reducing short-term placements.

4:15 pm - 4:45 pm
30-Minute Paper ~ Bayshore VII
Family Preservation or Child Safety? How Experience and Position Shape Child Welfare Workers’ Perspectives
John Fluke, PhD, Kempe Center, Department of Pediatrics, University of Colorado School of Medicine, Aurora, CO; Tyler Corwin, MA, Research Services, Casey Family Programs, Seattle, WA
In child welfare there is sometimes a false dichotomy between child safety and family preservation and achieving balance is challenging. Staff and agency level orientation toward values and beliefs associated with family preservation and child safety may influence other aspects of child welfare systems, particularly decision making. This presentation describes findings from four child welfare agencies regarding applications of a scale designed to assess staff proclivities and associated implications for agency workforce development and policy.

Session 59 OR
3:45 pm - 4:15 pm
30-Minute Paper ~ Esplanade I
Parenting Stress as a Mediator of Trauma Exposure and Mental Health Outcomes in Young Children
Melissa Whitson, PhD, University of New Haven, West Haven, CT; Joy Kaufman, PhD, Yale University School of Medicine, New Haven, CT
Exposure to potentially traumatic events (PTEs) significantly impacts outcomes for children in behavioral health systems of care (SOCs). The present study built on previous research that found parenting stress influences outcomes for children exposed to PTEs. The results support previous research; parenting stress mediated the relationship between PTEs and internalizing/externalizing problem behaviors. In response to the culmination of these studies, we will discuss ways SOCs can incorporate more interventions that focus on alleviating parenting stress.

4:15 pm - 4:45 pm
30-Minute Paper ~ Esplanade I
Readiness for Integrated Behavioral Health and Primary Care
Victoria Scott, PhD, MBA, University of North Carolina at Charlotte, Charlotte, NC; Gilberte Bastien, PhD, Glenda Wrenn, MD, MSHP, The Satcher Health Leadership Institute, Morehouse School of Medicine, Atlanta, GA; Abraham Wandersman, PhD, University of South Carolina, Columbia, SC
This session will present an emerging body of scholarly work on organizational readiness using the R=MC² heuristic (Readiness=Motivation x General Capacity and Innovation-Specific Capacity) and describe its multi-pronged utility for integrating behavioral health and primary care. We will share results from our Readiness for Integrated Care Questionnaire and provide lessons learned. This session aims to stimulate
dialogue around how a heuristic for organizational readiness can be used to address the complex, dynamic needs of healthcare organizations to implement a new program, policy or practice.

Session 60
3:45 pm - 4:45 pm
60-Minute Paper ~ Esplanade II

The Effect of Parental Substance Use on Child Safety and Permanency in Florida

Svetlana Yampolskaya, PhD, Linda Callejas, PhD, Child & Family Studies, University of South Florida, Tampa, FL

In Florida during FY2014-2015, 40 percent of children with verified maltreatment had substance-abusing parents, and approximately 43% of such children were placed in out-of-home care. Analysis of state data sets examined the effect of parental substance use on the timing of reunification and time to reentry into out-of-home care. Findings suggest that children who had parents with substance use problems were at risk for both delayed reunification and reentry into out-of-home care.

Session 61
3:45 pm - 4:45 pm
60-Minute Symposium ~ Esplanade III

Navigating the Implementation Highway: Using “Real Time” Data to Inform Policy and Practice

Erin Espinosa, PhD, Bonnie Evans, MS, Texas Institute for Excellence in Mental Health, The University of Texas at Austin, Austin, TX; Jennifer Martinez, MSOLE, Youth Empowerment Services (YES) Waiver, Mental Health Substance Abuse Division, Texas Department of State Health Services, Austin, TX; Tegan Henke, LMFT, NorthSTAR Services Unit, Mental Health and Substance Abuse Division, Austin, TX

Implementing practices within an organization can be complex and often requires multiple drivers. This increases dramatically when mandates are made to implement a practice quickly across multiple organizations. Complicating matters further, some interventions can come to organizations that are not prepared for implementation. Recognizing the need for a real time process evaluation of the implementation effort, used the Consolidated Framework for Advancing Implementation Science (CFIR) to develop and implement process evaluation measures and used data collected by those measures in the development of “real time” data dashboards to inform the CQI process. This session will provide an overview of the use of the CFIR framework to inform statewide implementation of Wraparound and include a discussion of the usefulness of “real time” data by state policy leaders.

Session 62
3:45 pm - 4:15 pm
30-Minute Paper ~ Palma Ceia 1

The Georgia Apex Project: Building Infrastructure and Partnerships for the Delivery of School-Based Mental Health Services

Jana Pruett, MSW, Center of Excellence for Children’s Behavioral Health, Georgia Health Policy Center, Atlanta, GA; Stephanie Pearson PhD, Office of Children, Young Adults, and Families (OCYF), Georgia Department of Behavioral Health and Developmental Disabilities, Atlanta, GA; Sara Redd, MSPH, Deana Farmer, BA, Center of Excellence for Children's Behavioral Health, Georgia Health Policy Center, Atlanta, GA

The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) developed Georgia Apex Project to build infrastructure for school-based mental health services in an effort to increase access to care for school-aged children and emerging adults. The pilot project runs for the 2015-2016 school year. Results from a literature review and environmental scan that informed program implementation will be presented, as well as the results of the ongoing evaluation of this project.

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

Sustaining Evidence-Based Mental Health Promotion Interventions in Schools: An On-Going Process

Olga Acosta Price, PhD, Milken Institute School of Public Health, George Washington University, Washington, DC; Evelyn Frankford, MSW, Frankford Consulting, Brookline, MA

The knowledge base on school-based mental health promotion and social-emotional development continues to expand but ensuring its long term implementation remains a major public health challenge. Following up on the authors’ outlining a conceptual “pivot” from traditional program advocacy to a long term infrastructure and constituency-building strategy to advance school-based mental health, the current presentation summarizes extensive qualitative data about local and state level capacity-building processes and correlates this data with the literature on sustaining public health approaches.
Session 63  
**3:45 pm - 4:15 pm**

30-Minute Paper ~ Palma Ceia 2  
**Specifying the Maryland Model of Service for Transition-Age Youth and Young Adults**

Mason Haber, PhD, Maryann Davis, PhD, Transitions RTC, SPARC, Department of Psychiatry, University of Massachusetts Medical School, Shrewsbury, MA; Steven Reeder, MEd, CPRP, CRC, Adult Services, Behavioral Health Administration, Maryland Department of Health and Mental Hygiene, Catonsville, MD

This paper presentation focuses on a recently concluded project to articulate and operationalize a comprehensive statewide model for providing services and supports for transition-age youth and young adults with serious mental health conditions. The model development process will be presented, types of implementation tools produced described, and next steps in advancing the model and its implementation shared. Implications will be described for designing and operationalizing complex, multi-component service models for transition-age youth and young adults.

4:15 pm - 5:15 pm

Discussion Hour ~ Palma Ceia 2

**Building Peer Support Programs: Applying the Principles of an Implementation Science Framework**

Alexandra Albizu Rivera, MPH, Nichole Fintel, MSPH, Now is the Time-Tech Assistance Center, Tampa, FL; Brianne Masselli, MA, Youth M.O.V.E. National, Portland, ME

In response to the increasing demand to offer developmentally responsive youth peer support services, Youth M.O.V.E. National conducted a national environmental scan of communities offering youth peer support programming. An implementation science framework was employed in the design and analysis of the scan to strategically identify key programmatic components. The process for applying this framework to the design, implementation, and researching of youth peer support programs will be emphasized.

Session 64  
**3:45 pm - 4:15 pm**

30-Minute Paper ~ Palma Ceia 3  
**Understanding Caregiver Strain among Parents of Transition-Aged Young People**

Ana Maria Brannan, PhD, Special Education, Indiana University, Bloomington, IN; Eileen Brennan, PhD, Julie Rosenzweig, PhD, School of Social Work, Portland State University, Portland, OR

Families play an important role in identifying emotional and behavioral disorders in their children, seeking treatment, and shaping service use. While the knowledge base on strain among caregivers of school-aged children is growing, we found no research on the experiences of families caring for transition-age youth. This presentation will examine caregiver strain among parents of transition-aged youth receiving mental health services, and explore differences in caregiver strain across families of children in different age groups.

4:15 pm - 4:45 pm

30-Minute Paper ~ Palma Ceia 3  
**The Effect of Caregiver's Change in Employment Status on Child's Behavioral and Emotional Outcomes**

Tesfayi Gebreselassie, PhD, Mary Spooner, PhD, Robert Stephens, PhD, Russell Carleton, PhD, ICF International, Atlanta, GA

Children and youth with behavioral and emotional issues often require special attention and care. The demands of caring for a child could reduce parents’ ability to find and maintain employment. Findings from this study show that children of caregivers who were employed after entry into system of care services experienced improvement on behavioral and emotional symptoms after 12 months. Caregivers who transitioned from being unemployed to being employed showed improvement in strain after 12 months.

4:45 pm - 5:15 pm

30-Minute Paper ~ Palma Ceia 3

**Evidence-Based Treatment Implementation: How to Ensure Service Providers' Buy-In, Participation, and Continuation**

Howard Liddle, EdD, ABPP (Family Psychology), Center for Treatment Research on Adolescent Drug Abuse, University of Miami, Miami, FL

Evidence-based practice implementation models parallel evidence-based treatment (EBT) models – they are ecological in orientation, multilevel and multicomponent in organization, and they target different but interconnected domains of individual and system functioning. Undoubtedly implementation and treatment have advanced because of these systemic conceptualizations. At the same time, implementation
science and treatment science have not adequately represented the specific and dynamic role played by the individual service provider in bringing effective innovations to diverse service settings. This presentation summarizes the key ideas and methods for ensuring clinical provider participation and EBT success. These outcomes are a critical slice of 35 years of treatment research studies in the specialty of family-based treatment for youth substance abuse and delinquency.

Session 65
3:45 pm - 4:15 pm
30-Minute Paper ~ Palma Ceia 4

The Intersection of Trauma Exposure and Substance Abuse: How Traumatic Stress Contributes to Polysubstance Misuse in Adolescents

Miriam Silman, MSW, Ginny Sprang, PhD, Center on Trauma and Children, University of Kentucky, Lexington, KY

The relationship between trauma and substance misuse is well-established. This analysis of 150 adolescents referred for substance abuse intervention across a southern, predominantly rural state finds that higher rates of traumatic stress symptoms predict use of a greater number of substances. Characteristics of trauma exposure and context are examined to understand the trajectory of development and trauma response which may contribute to this increased polysubstance use. Implications for policies and practice within and beyond the behavioral health arena for working with substance abusing and at-risk youth are discussed.

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

Meeting the Needs of Commercially Sexually Exploited Youth

Kimberly McGrath, PsyD, Citrus Health Network Inc., Hialeah, FL; Mary Armstrong, PhD, Melissa Johnson, MA, Monica Landers, MA, Department of Child and Family Studies, University of South Florida, Tampa, FL

Citrus Health Network has developed a Specialized Therapeutic Foster Care Program and an intensive in-home team to meet the special needs of youth involved in commercial sexual exploitation entitled Citrus Helping Adolescents Negatively Impacted by Commercial Exploitation. This presentation addresses the key program components of the program and the unique social factors related to CSE. Findings including demographic and diagnostic information, as well as youth functioning, strengths and well-being over time, will also be presented.

Session 66
3:45 pm - 4:15 pm
30-Minute Paper ~ Garrison Suite

Patterns of Multi-System Service Use and School Dropout among 7th, 8th and 9th, Grade Students

Antonio Garcia, PhD, School of Social Policy & Practice, University of Pennsylvania, Philadelphia, PA; Stephen Metraux, PhD, Health Policy and Public Health, University of Sciences, Philadelphia, PA;

Dennis Culhane, PhD, School of Social Policy & Practice, University of Pennsylvania, Philadelphia, PA

Youth who receive services from mental health, child welfare, juvenile justice, and homeless systems are exposed to overlapping risk factors. Little is known, however, as to whether system involvement is effective in promoting positive outcomes. Relying on administrative datasets, this study reveals that multiple service system involvement is positively linked to dropping out of high school. Effective strategies for mobilizing systems to provide coordinated services to reduce school dropout rates among system users are discussed.

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

The Promise Zone Initiative: A Cross System Approach to School-Based Mental Health

Devon Bandison, MPA, Neil Pessin, PhD, Community Mental Health, Visiting Nurse Service of NY, Bronx, NY

In many schools, children and adolescents are often identified as being “at risk” based strictly on office referrals for disciplinary interventions. NYC schools are going through a major transformation of school-based mental health services as a result of many challenges in cross system collaboration. This presentation will give an overview of the 5 year outcomes of a unique cross system collaborative initiative implemented in New York State called the Promise Zone. In its fifth year of implementation, the Visiting Nurse Service of NY Promise Zone Program has identified a model for collaborative interagency policy planning and service delivery to improve the educational and behavioral health for children in high needs districts/schools.
Assessing Decision-Making Skills after Foster Care

Annika Olson, David Scherer, PhD, Andrew Cohen, PhD, Psychological and Brain Sciences, University of Massachusetts Amherst, Amherst, MA

The struggles youth face aging out of foster care have been well documented. Minimal research has been done, however, to understand why this is the case. This poster session will share the results of research looking at the decision-making skills of adults that have aged out of foster care in their transition to independent life, as well as compare these skills to their peers who were never involved in the child welfare system. Decision-making skills may be one aspect playing a role in the negative outcomes of foster alumni, and this study suggests further research is needed into the decision-making skills of this population, as well as emerging adults overall, to find ways to improve their skills.

Poster Presentations & Networking Reception

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

201. Lean: Improving Treatment while Saving Money

Jason Raines, MBA, MPA CLS, KidsPeace, Orefield, PA

Despite the best efforts, too many treatment programs fail to deliver the desired outcomes or needed cost savings. Fortunately, Lean and other continuous improvement tools can solve both problems. This poster presentation will describe how different data tools are used to garner both the best outcome possible in a treatment setting and most cost-effective application. Participants will learn how to apply those tools to maximize effectiveness of treatment in a residential setting.

203. Assessing Decision-Making Skills after Foster Care

Annika Olson, David Scherer, PhD, Andrew Cohen, PhD, Psychological and Brain Sciences, University of Massachusetts Amherst, Amherst, MA

The struggles youth face aging out of foster care have been well documented. Minimal research has been done, however, to understand why this is the case. This poster session will share the results of research looking at the decision-making skills of adults that have aged out of foster care in their transition to independent life, as well as compare these skills to their peers who were never involved in the child welfare system. Decision-making skills may be one aspect playing a role in the negative outcomes of foster alumni, and this study suggests further research is needed into the decision-making skills of this population, as well as emerging adults overall, to find ways to improve their skills.

204. Parent Partners Engaging Families in Wraparound Services

Juliane Mickler, MBA, Jacksonville System of Care Initiative, Partnership for Child Health, Jacksonville, FL; Jill Hill, CRPS-F, Federation of Families Northeast Florida, Mental Health America of Northeast Florida, Jacksonville, FL; Lori Bilello, PhD, Center for Health Equity and Quality Research, University of Florida College of Medicine Jacksonville, Jacksonville, FL

This poster session will share the results of efforts by the Wraparound program with the Jacksonville System of Care Initiative to incorporate Parent Partners in the provision of services to families. The process for introducing Parent Partners to the families and creating a team atmosphere with the Wraparound coordinators will be shared.

205. Developing a National Data Collection Tool and Mechanism for Family-Run Organizations

Millie Sweeney, MS, Jane Walker, LCSW, Family-Run Executive Director Leadership Association (FREDLA), Ellicott City, MD; Eric Bruns, PhD, Department of Psychiatry and Behavioral Sciences, Division of Public Behavioral Health and Justice Policy, University of Washington School of Medicine, Seattle, WA

To address a critical need for data regarding the impact of family-run organizations (FROs), FREDLA embarked upon a National Data Collection Project, bringing together researchers and family leaders to jointly begin developing national data collection measures and tools for FROs and contributing to the body of research around family support. This poster presentation will outline the daunting task of developing the first data collection tool of its kind for FROs.

206. Initial Steps to Measure Statewide System of Care Expansion

Deborah Cohen, PhD, University of Texas at Austin, Austin, TX

Since the conception of system of care, researchers continue to struggle to measure the impact of the philosophy between and within programs and organizations. This poster presentation will provide an overview of the initial attempt for the Texas System of Care to compare differences between system of care communities and non-system of care communities. Results suggest that there is an impact of the system of care philosophy on community-level approaches to service provision.
207. On the Path to Evidence-Based: Infant Mental Health Home-Visiting

Bayley Zito, PhD, The Guidance Center, Oakland University, Detroit, MI

This poster presentation will review efforts to evaluate the effectiveness of the IMH-HV model on parental and child outcomes according to legislative standards and consistent with the State of Michigan's Benchmarks. Access to evidence-based and sustainable parenting support can ultimately improve outcomes for this vulnerable population. To accomplish this, the efficacy of IMH-HV for improving outcomes for parent/caregivers and their children is being evaluated and IMH-HV quality assurance via analysis of program impact on key parent/caregiver, child and family indicators is being determined.

208. Bridging the Divide: Accessing Care for Youth and Young Adults with Co-Occurring Mental Health and Substance Use Disorders

Lisa Lambert, BA, Anne Silver, JD, Jessica Childs, BA, Parent/Professional Advocacy League, Boston, MA
Parent/Professional Advocacy League (PPAL) and Massachusetts Organization for Addiction Recovery (MOAR) held 11 listening sessions across the state designed to capture information about access to services and gaps in care for youth with co-occurring addiction and mental health challenges. This poster presentation will provide an overview of the qualitative and quantitative data from the listening sessions and will report the five findings from the data analysis.

209. Mind the Gap: Optimizing Addiction and Mental Health Service Delivery for Transitional Aged Youth

Gretchen Conrad, PhD, Kim Corace, PhD, Nick Schubert, MA, Melanie Willows, MD, Substance Use and Concurrent Disorders, The Royal Ottawa Mental Health Centre, Ottawa, CAN

Improved transitioning between the child-youth and the adult mental health systems is essential. Mental health and addiction services were reviewed for youth (16-25), in a large (1.2M) Ontario (Canada) region. One hundred thirty-four hospital and community programs were surveyed. Focus-groups were held with urban and rural agencies, youth, and family members. Findings highlight readiness and desire to provide youth services, but glaring disparities between service requirements and availability, particularly for moderate-severe behavioral health issues and complex needs.

210. Medicaid Health Plans and Complex Care Coordination: An Examination of Three Innovative Care Coordination Programs in Georgia’s Child Welfare System

David Bolt, MSW, Tanya Chambers-Ashford, MAOD, Candace Body, EdD, Amerigroup Community Care Georgia, Atlanta, GA

Georgia’s Medicaid Health Plan (MHP) for children in foster care has established three innovative programs for care coordination to youth with complex needs. The three programs address permanency, behavioral health, and transition-age foster youth. This poster presentation will describe: (1) the Pathway to Permanency pilot (placement), 2) partnership between a MHP and Care Management Entities to provide High Fidelity Wraparound (behavioral health), and 3) COACHES program (transition-age youth).

211. Parent Support and Training Services: A Calm Voice in a Storm of Uncertainty

Tiffany Kann, MSW, Sharah Davis, LMSW, Kaela Byers, PhD, Tom McDonald, PhD, School of Social Welfare - Child and Family Center, University of Kansas, Lawrence, KS

Researchers employed a randomized controlled trial (RCT) and an in-depth participatory case study approach to investigate the experiences and parent-perceived outcomes of the PST Best Practices Protocol (PST), for parents of children with intellectual or developmental disabilities (I/DD). Results show that after 90 days, family outcomes improve and progress is made towards individualized goals. The PST model operationalizes the family driven paradigm and is useful to inform family driven policies and programs across service systems.

212. A Mixed Methods Evaluation of a Drug Court Serving Young Adults with Narcotic Drug Addictions

Patrick McGonigal, University of Massachusetts Amherst, Amherst, MA; Kathleen Moore, PhD, Scott Young, PhD, Mental Health Law and Policy, University of South Florida, Tampa, FL

The current study is a mixed method design that evaluated a drug court program for young adults ages 18 - 26. Results indicated that the program was effective at reducing substance use, criminal recidivism, and mental health symptoms for young adults. Qualitative findings from focus groups of clients mid-treatment revealed program aspects that clients deemed most and least helpful. Policy implications for criminal justice reform and the implementation of drug court programs are discussed.
213. **HIPPY Implementation in Florida**

Mary Lindsey, PhD, Dabaram Rampersad, MA, Ruby Joseph, MPA, College of Behavioral and Community Sciences, University of South Florida, Tampa, FL.

Home Instruction for Parents of Preschool Youngsters (HIPPY) is an international early learning program. Twenty-three states in the United States are currently implementing HIPPY programs and Florida currently has 23 HIPPY programs in communities in the Northwest, North, Central and Southern regions of the state. In 2014-2015 over 2,062 children were served through HIPPY programs. Positive educational outcomes were experienced by children in HIPPY and parent involvement also improved from pre to post.

214. **Efficacy Evaluation of the Pilot Program**

**Let’s Talk: Finding Reliable Mental Health Information and Resources (Grades 7-8)**

Cameron Montgomery, PhD, University of Ottawa, Ottawa, ON.

This poster presentation will touch upon the experiences and perspectives of the evaluation team in delivering and evaluating a pilot mental health promotion program: Let’s Talk: Finding Reliable Mental Health Information and Resources (Grades 7-8), and the feedback and results stemming from the teacher and student sample populations. This program was delivered between January and June 2014 in Ontario (Canada) schools and the regions of Toronto and Ottawa more specifically and funded by a corporate partner. The “Let’s Talk” program was designed to help students recognize, find and authenticate reliable mental health information and resources online and via a variety of multi-media tools. The goal of the efficacy evaluation was to assess student learning (of the lesson content) and the degree to which their knowledge was enhanced. Teacher training and pedagogical experiences (of the program delivery) were also evaluated.

215. **They Know It’s Safe, They Know What to Expect from that Face: Perceptions Toward a Health and Physical Activity Counseling Program for Children and Families Living with Cystic Fibrosis**

Elizabeth Huynh, B.Kin, Faculty of Kinesiology and Recreation Management, University of Manitoba, Winnipeg, CAN.

Youth with cystic fibrosis (CF) experience significant behavioral and psychosocial challenges, such as depression, anxiety, and poor treatment adherence. For this reason, interventions that lessen these difficulties are required. A qualitative study was used to explore the experiences of youth and parents living with CF in a cognitive-behavioral counseling program in Canada. The sessions were experienced as “distinctly different” from routine appointments at the hospital, and were characterized by a sense of listening and bi-directional communication.

216. **Building upon a Sense of Place to Develop a Community-Based Wellness Intervention**

Sharon Hodges, PhD, Melissa Tirotti, MPH, Child and Family Studies, University of South Florida, Tampa, FL.

The Pine Hills Wellness Program (PWHP) was a pilot project implementing a lay health worker intervention that integrated education and action to address health disparities, including lack of physician access and high emergency room (ER) utilization. The intervention focused on caregivers of Pine Hills children between the ages of 2-7 who had missed a primary care well-child visit and/or had used hospital emergency department services for non-emergent care. This poster presentation will share results of the PHWP evaluation.

217. **Promoting Positive Pathways to Adulthood: A Knowledge Translation Online Program for Transition Service Providers**

Pauline Jivanjee, PhD, Eileen Brennan, PhD, Carolina Gonzalez-Prats, MA, Claudia Sellmaier, MA, Research and Training Center for Pathways to Positive Futures, Portland State University, Portland, OR.

Promoting Positive Pathways to Adulthood is an online knowledge translation (KT) initiative designed to build the capacity of direct service providers working with emerging adults with behavioral health needs. This poster presentation will review the development, content, KT supports, and pilot evaluation results of this 10 module training program. Provider self ratings of competency to perform transition-focused activities improved significantly in pilot tests of two modules. The need for additional KT supports is also considered.

218. **Honest, Open, Proud (HOP) High School: Helping Youth Develop Strategic Disclosure Skills for Sharing their Mental Health Challenges**

Suzette Urbashich, MS, Sue McKenzie-Dicks, MA, Rogers InHealth, Rogers Behavioral Health System, Brown Deer, WI.

Honest, Open, Proud High School (HOP-HS) – to Erase the Stigma of Mental Illness – is a strategic disclosure program for youth developed by WISE (Wisconsin Initiative for Stigma elimination), in partnership with Patrick Corrigan, PhD. Qualitative research examined youth, parent, and teacher perspectives on costs/benefits of disclosure of mental health challenges, guiding the design of training to assist youth’s disclosure decisions, reduce stigmatizing attitudes, and increase self-empowerment via the story one tells themselves and others.
Laurie Reid, MS, Breaking the Cycle Consulting, Inc., Sanford, FL, Norin Dollard, PhD, University of South Florida, Tampa, FL.
Teen violence toward a parent is an all too common family secret requiring an understanding that is different from traditional domestic violence theories. This presentation will define Child to Parent Violence and introduce a group model of practice to address family violence. This poster will include the logic model guiding the fidelity and outcome evaluation. Results presented will include both fidelity measures as well as outcomes including violent behavior and juvenile justice recidivism.

220. Examining Preliminary Outcomes of Mental Health and Substance Use in Hillsborough Family Dependency Treatment Court (FDTC)
Kayla Bjorlie, North Dakota State University, Fargo, ND.
Parental substance abuse is highly prevalent in child abuse and neglect cases. Specialized treatment such as Family Dependency Treatment Courts (FDTCs) have recently shown positive results. This study seeks to further uncover the “black box” of FDTCs, examining preliminary outcomes of mental health and substance use after six months in treatment for 28 parents enrolled in Hillsborough County’s FDTC. Outcomes showed significant reductions in substance use, and mental health symptoms, and high therapeutic alliance after six months.

221. A Broad Look at the Success of Placement Decisions across a System of Care’s Services
David Jackson, PhD, Izumi Okado, BA, Sonia Izmirian, MA, Scott Keir, PhD, Charles Mueller, PhD, Dept of Psychology, University of Hawaii at Manoa; Hawaii Dept of Health, CAMHD, Honolulu, HI.
This research examined treatment success rates among youth with varying levels of baseline dysfunction across multiple levels of care within a statewide system of care. Findings revealed that success rates differ within service type in relation to baseline severity. This information can be used to inform service placement decisions and identify youth who are at risk of treatment failure and who may require more frequent and ongoing monitoring of progress.

222. Gender Responsive Systems of Care
Lesley Slavin, PhD, David Jackson, PhD, Child and Adolescent Mental Health Division, Hawaii State Department of Health, Honolulu, HI.
Juvenile Justice and Mental Health systems have been struggling over the past decade to address the unique problems faced by girls. This poster presentation will share evaluation data from a Hawaii initiative designed specifically for girls with significant trauma exposure.

223. Parent-School Partnership: Turning the ‘Difficult’ Parent into a Raving Fan
Michelle Davis, MEd, ABCs for Life Success, LLC, Nokomis, FL.
This poster presentation will identify a process used to help parents discuss and find solutions to family challenges, with a focus on evidence-based practices to increase productive parent-school partnerships. Strategies to prevent informal and formal disputes will also be shared.

224. Grandparents as Parents: Understanding the Relationships between Trauma, Relational Conflict, Parenting Stress, and Emotional Well-Being
Jessica Eslinger, PhD, Center on Trauma and Children, University of Kentucky, Lexington, KY.
The number of grandparents raising grandchildren has been steadily increasing. Results of a study focusing on grandparents as parents will be shared. Results of the study indicate the number of different types of trauma exposures for the child indirectly affected both grandparenting stress and grandparent emotional well-being by way of the degree of conflict within the child-grandparent relationship. Policy and practice implications will be discussed.

Elizabeth Waetzig, JD, Change Matrix, Las Vegas, NV.
SAMHSA requires grantees to submit a behavioral health disparities impact statement identifying: populations in the area, service populations, and disparate populations. The statement includes a plan of how grantees (including Healthy Transitions) will use data to monitor disparities.
and implement strategies to improve access, utilization, and outcomes among the disparate populations. This poster presentation will share strategies for identifying relevant data components to address disparities, and to inform related technical assistance efforts.

226. Effective Social Marketing in a Rural System of Care

Jordan Moon, BS, Jessica Goudy, BS, Rick Croft, LCPC, Madison CARES, Madison School District, Rexburg, ID

While social marketing is an integral component of a system of care, little research has examined the efficacy of campaigns and social media posts. This poster presentation will share results of a study that sought to explore two dimensions of social marketing in a rural system of care: first, what factors make content attractive to viewers in the community and second, what impact a social media campaign has on attitudes toward mental health.

227. Readiness for Change: Fidelity EHR Implementation and Training Model for Wraparound Service Organizations

Kelly L. Hyde, PhD, Mary P. Curry, LISW, Jennifer Haley, MSW, Kara Bergerson, MEd, Fidelity EHR, Santa Fe, NM; Eric J. Bruns, PhD, Alyssa Hook, BS, University of Washington, Wraparound Evaluation and Research Team (WERT), Seattle, WA

The landscape of Wraparound practice is changing with more service organizations adopting EHRs for youth and family care coordination, managed care organization billing, and reporting. Meta-analysis of EHR implementation and training emphasizes the challenges service organizations face and current limitations in the EHR software marketplace. Fidelity is an Integrated Behavioral Health Record grounded in the 10 principles of Wraparound and is a tool to increase youth and family health and wellness. Fidelity EHR is collaborating with service organizations in the field utilizing participatory approaches to develop a model for EHR implementation and training. Methods have included: qualitative analysis of surveys, focus groups, and participatory evaluation.

228. Results from Year One of a Randomized Control Trial of High-Fidelity Wraparound for Dually-Involved Youth

Jennifer Schurer Coldiron, PhD, Spencer Hensley, BA, University of Washington, School of Medicine, Seattle, WA; Shari Thomas, LCSW, Henderson Behavioral Health, Fort Lauderdale, FL

Evidence of Wraparound’s effectiveness from rigorous studies is scarce. In partnership with Broward County, FL, Henderson Behavioral Health, and local child service system providers, a randomized control trial of Wraparound for foster care youth involved in the juvenile justice system was conducted, comparing outcomes to youth receiving “treatment as usual” within the community. This poster presentation will share initial findings from year one, regarding youth child welfare and juvenile justice outcomes and program fidelity and implementation.

229. Humor Group as a Therapeutic Tool in Developing Mentally Healthy Children and Adolescents

Lori Green, RN/DNP, Department of Nursing, Bethune Cookman University, Daytona Beach, FL

Humor is a therapeutic tool that may serve as a coping strategy in times of crisis. Children and adolescents are able to learn humor strategies to utilize during mental instability. The use of a Humor group is being presented weekly to children and adolescents in a mental health inpatient community crisis center in Daytona Beach Florida. This poster will present how to initiate this therapeutic intervention in any setting and positive results from this intervention.
Wednesday, March 16 Events

Federal Update Plenary

9:00 – 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 a changing health care environment on behavioral health evaluators, researchers, policy-makers and practitioners. With the increasingly difficult economic climate facing our nation, it is imperative that research and policy leaders examine effective approaches to serving children with behavioral health challenges and their families. Now, more than ever, it is critical that we begin a national discussion on funding strategies that support an evidence-based approach to meeting the behavioral health needs of children and families.

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  

10:00 am - 11:30 am  

90-Minute Symposium ~ Bayshore V  

**Young Adult Voice in the Now is the Time – Healthy Transitions (NITT-HT) Initiative**  

*Symposium Chair: Amanda Costa, BS, Transitions Research and Training Center (RTC), University of Massachusetts Medical School, Shrewsbury, MA; Discussant: Emily Lichvar, PhD, Child, Adolescent and Family Branch, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, Rockville, MD*  

Participatory Action Research (PAR) is defined as a process in which research participants are actively involved in the completion of research studies from start to finish, from defining a problem to disseminating findings. This framework for meaningful participant involvement is echoed by the idea of “youth voice” that is gaining prominence in discussions of best practices in transition services. Youth voice, simply put, is the ability of youth and young adults to have their perspectives heard and influence the services that they and their peers receive. Enhancing youth voice in grantee communities is one of the objectives of the recently begun Now is the Time—Healthy Transitions Initiative, a program funding 17 grantee states and 43 local communities to develop, enhance, and expand services and systems for transitioning youth and young adults with serious mental health conditions (SMHC). Similarly, identifying effective strategies for enhancing youth voice and outcomes of these efforts is an important potential contribution of the NITT-HT National Evaluation.

**Background and Rationale for Youth and Young Adult Voice in the NITT-HT Evaluation**  

*Mason Haber, PhD, Maryann Davis, PhD, Transitions Research and Training Center, University of Massachusetts Medical School, Shrewsbury, MA*  

The Transitions RTC has successfully created and implemented a participatory action research (PAR) framework by meaningfully involving young adults with serious mental health conditions (SMHC) in all activities, including RTC research and knowledge dissemination, and more recently, the NITT-HT National Evaluation. This presentation introduces the Transitions RTC young adult PAR team, describes its conceptual basis and development, and how the PAR team has been incorporated into NITT-HT National Evaluation design and planning.

**Experiences of a Young Adult Participatory Action Research Team on the NITT-HT Evaluation**  

*Amanda Costa, BS, Tania Duperoy, BA, Transitions Research and Training Center, University of Massachusetts Medical School, Shrewsbury, MA*  

In this presentation, youth on the Young Adult Participatory Action Research Team (PAR team) with the Transitions RTC will share their experiences assisting with the development of the National Evaluation plan, using these to help characterize barriers and facilitators to participation of young adults in designing large, complex evaluation projects. Additional contributions of a second group of young adults, the National Youth Advisory Board (YAB), will also be described by the young adult presenters.

**Experiences of Young Adults Working at NITT-HT Grantee Sites**  

*Gustavo Payano, BS, Massachusetts Department of Mental Health, Now is the Time Health Transitions Grant, Tewksbury, MA; Tania Duperoy, BA, Transitions Research and Training Center, University of Massachusetts Medical School, Shrewsbury, MA*  

This presentation will describe the process and challenges of engaging youth voice in the development and implementation of NITT-HT services and supports at the 17 local grantee sites. The presenters, including one young adult who serves as a staff and advisory team member with one of the NITT-HT grantees, will describe strategies adopted for helping to ensure that young adults’ voices are heard, including a national group of “youth coordinators” at NITT-HT sites.

Session 68  

10:00 am - 11:30 am  

90-Minute Symposium ~ Bayshore VI  

**Building Agency Capacity to Implement Evidence-Based Trauma Treatments**  

*Symposium Chair: Virginia Strand, DSW, Graduate School of Social Service, Fordham University, West Harrison, NY; Discussant: Marciana Popescu, PhD, Graduate School of Social Service, Fordham University, West Harrison, NY*  

Challenges and success in the implementation of evidence-based trauma treatments in child and family-service agencies are presented. Results from a time series design, assessing organizational readiness to implement an evidence-based trauma treatment, identify critical factors. A unique aspect of the initiative is the selection of different evidence-based trauma treatments at different agencies. All sites have followed the implementation process outlined in the National Implementation Research Network (NIRN) framework.

**Organizational Readiness in the Installation Stage of Implementing Evidence-Based Trauma Treatments**  

*Annette Semanchin Jones, PhD, School of Social Work, University of Buffalo, Buffalo, NY*  

Complex trauma histories in childhood, if not addressed, can have a negative impact on cognitive, social, and emotional outcomes throughout development. This study examined the organizational readiness of an agency implementing Real Life Heroes in a foster care and residential program. Findings from baseline and 12-month follow-up will be presented. Implications will be discussed, focusing on the Installation phase of implementation, based on the National Implementation Research Network (NIRN) framework.
**Session 69**

10:00 am - 11:00 am

**90-Minute Symposium ~ Bayshore VII**

**What Have We Learned About the Needs of Children and Effective Treatment over the Past Two Decades Using the CANS?**

*John Lyons, PhD, Senior Policy Fellow, Chapin Hall, University of Chicago, Chicago, IL*

The Child and Adolescent Needs and Strengths scale (CANS) has been used by more than a million child and family services staff over the past twenty years. This specially designed session will focus on what has been learned about the most common needs of children served by child welfare and related services – and what interventions appear to be effective when a child’s progress is measured using the CANS. Insights from recent applications of the CANS in community-based and out of home care will be shared.

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**Session 70**

10:00 am - 10:30 am

**30 Minute Paper ~ Esplanade I**

**Children and Youth with Early Onset Psychosis Show Improvements in Systems of Care**

*Russell Carleton, PhD, Mary Spooner, PhD, ICF International, Atlanta, GA*

Children and youth diagnosed as having a psychotic disorder are at risk for negative outcomes. However, systems of care represent a promising framework for delivering services to these children and youth. Data from the Children’s Mental Health Initiative (CMHI) show that they improve their clinical and functional outcomes within 6 months of entering services. In addition, there are significant reductions in use of cost-intensive and restrictive mental health services.

10:30 am - 11:00 am

**30 Minute Paper ~ Esplanade I**

**Capturing Resilience among Youth in Psychiatric Residential Treatment: Using Big Data to Inform Innovative Uses of the Ohio Youth Problem, Functioning, and Satisfaction Scales**

*Jeri Damman, MSc, Kaela Byers, LMSW, Steve Kapp, PhD, School of Social Welfare, University of Kansas, Lawrence, KS*

Big data provides an opportunity to use information in new ways to advance practice. This innovative study seeks to explore how knowledge about resilience in youth admitted to PRTF can be measured without introducing additional instrumentation. Data on youth admitted to psychiatric residential treatment facilities (PRTF) from a statewide system is used to test whether a measure of resilience can be extracted from an instrument intended to measure problems, functioning, hopefulness, and satisfaction.

11:00 am - 11:30 am

**30 Minute Paper ~ Esplanade I**

**How Are Youth Doing After Discharge? A Multiservice Agency’s Experience Implementing a Follow-Up Study**

*Kara Sabalaukskas, MSW, Susan Putnins, MSW, The Home for Little Wanderers, Boston, MA*

Assessing to what extent children and youth are able to maintain successes made during treatment after discharge can inform program management, needs assessment, and evaluation activities. This paper will summarize lessons learned from the implementation of a follow-up study in a multiservice setting and will present preliminary study results. Through presentation and discussion, participants will learn about implementation facilitators and barriers, techniques to increase response rate, and domains of interview questions relevant to behavioral health.
Session 71
10:00 am - 11:30 am
90-Minute Symposium ~ Esplanade II
Improving the Efficiency of the Behavioral Health Service Cascade and Promoting the Use of Evidence-Based Substance Use Disorder Screening, Assessment, and Treatment Practices in Juvenile Justice and Behavioral Health Systems of Care

Symposium Chair: Michael Dennis, PhD, Lighthouse Institute, Chestnut Health Systems, Normal, IL

The objectives of this presentation are to a) provide an overview of the Juvenile Justice-Translational Research on Interventions for Adolescents in the Legal System (JJ-TRIALS) 36 system of care site study and its core intervention; b) to provide more detailed descriptions of service map, behavioral health service cascade, and goal attainment training components; and c) to provide actual examples from a diverse range of systems of care to show how the data and steps taken vary.

Using Process Maps to Guide Cross-System Implementation Activities

Gail Wasserman, PhD, Department of Child and Adolescent Psychiatry, Columbia University/NYSPH, New York, NY; Danica Knight, PhD, Institute of Behavioral Research, Texas Christian University, Fort Worth, TX

This presentation describes the steps in generating site process maps that present cross-agency paths by which youth are identified and referred on to services addressing behavioral health needs. A diverse range of systems of care from large urban to rural counties in three states from the Northeast, South and West South Central were included to illustrate their use as tools for quality improvement.

Use of Behavioral Health Services Cascade Data to Identify Unmet Substance Use Treatment Services Needs among Adolescent Offenders

Angela Robertson, PhD, Social Science Research Center, Mississippi State University, Starkville, MS; Steven Belenko, PhD, Department of Criminal Justice, Temple University, Philadelphia, PA; Michael Dennis, PhD, Lighthouse Institute, Chestnut Health Systems, Normal, IL

The Behavioral Health Services Cascade is a framework for understanding and measuring movement through the stages of identifying need for and delivering behavioral health services to juvenile justice-involved adolescents. The cascade framework helps visualize unmet services needs as youth move through the juvenile justice and behavioral health systems, and helps policy-makers identify stages/linkage points that may need improvement. This presentation focuses on the contribution of services cascade data to the Site Feedback Report.

Goal Achievement Training (GAT): Turning the Site Feedback Report into Attainable Goals and Progress towards System Change

Jackie Horan Fisher, PhD, Alexis Nager, MS, The National Center on Addiction and Substance Abuse (CASA), Columbia University, New York, NY; Connie Baird-Thomas, PhD, Social Science Research Center, Mississippi State University, Canton, MS

The JJ-TRIALS Goal Achievement Training (GAT) assists sites in selecting a goal to increase their use of evidence-based practices. This presentation discusses: how the JJ-TRIALS GAT utilizes the Site Feedback Report (SFR) to identify potential goals; examples from a diverse range of county-level systems of care from three states; and the kinds of early changes that have been seen. The presentation concludes by summarizing the lessons learned, next steps and limitations of the intervention.

Session 72
10:00 am - 11:30 am
90-Minute Symposium ~ Esplanade III
Deja Vu All Over Again: Expansion and Integration within a Mature System of Care

Elizabeth Manley, MSW, Children’s System of Care, NJ Department of Children and Families, Trenton, NJ

New Jersey has a statewide integrated children’s system of care. This symposium will focus on how to address the complex needs of youth with substance use challenges within a system of care. The critical role of close partnerships between the state, child welfare and existing providers in preparing for and meeting the needs of youth and families. How communicating a clear vision staying true to the core values of system of care provides a rudder in the storm of emotions and reactions to such a profound change in service delivery to a population largely new to the system of care approach.

Session 73
10:00 am - 10:30 am
30 Minute Paper ~ Palma Ceia 1
The Strengths Model for Youth: An Innovative Approach to Case Management Services

Whitney Grube, MSW, Amy Mendenhall, PhD, Social Welfare, University of Kansas, Lawrence, KS

Adolescents diagnosed with a mental illness often receive community-based case management services. By partnering with a mental health center and piloting an adapted version of the Strengths Model, a case management model for adult mental health consumers, researchers sought to develop an innovative way to deliver case management services to adolescents. Early results demonstrate implementing an adapted version of the model is feasible and could be a viable option for mental health intervention.
Wednesday – March 16

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

**Evaluating the Effectiveness of Co-Located Peer Support in Juvenile Services: Preliminary Findings from Maine’s Expand ME Initiative**

*Sarah Goan, MPP, Hornby Zeller Associates, Inc., South Portland, ME; Laura Clark, Maine Department of Corrections, Division of Juvenile Services, Region 3, Bangor, ME; Tamara Manzer, Youth M.O.V.E. Maine, Portland, ME*

The Maine Department of Corrections, Juvenile Services is committed to developing a trauma informed system of care for justice-involved youth and their families. One aspect of the initiative has provided peer-based outreach and support to youth and families who are involved with juvenile community services. This session will describe peer support within juvenile services, explore the preliminary outcomes observed among youth and families and discuss the implications for service delivery suggested by the findings.

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

**OPEN**

**Session 74 (EA)**

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

**Using Longitudinal Data to Inform Sustainability Planning: Findings from a Summative Evaluation of a Transition-Age Youth Project**

*Robin Lindquist-Grantz, MSW, Kimberly Downing, PhD, Eric Rademacher, PhD, Institute for Policy Research, University of Cincinnati, Cincinnati, OH; Carolyn Jones, MA, Journey to Successful Living, Hamilton County Mental Health & Recovery Services Board, Cincinnati, OH*

Longitudinal Outcome Study (LOS) data from the National Evaluation of SAMHSA/CMHS System of Care can assist with examining the long-term outcomes of interventions with transition-age youth. The presenters will discuss how an urban project, Journey to Successful Living (JOURNEY), used LOS data to examine outcomes of youth enrolled in programming. JOURNEY’s LOS results will be shared with attendees, with an emphasis on how they have been used to enhance sustainability planning.

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

**Making Emerging Adults with Mental Health Needs a Priority in Canada: Creating Consensus through National, Provincial, and Regional Perspectives**

*Despina Papadopoulos, MEd, Christopher Canning, PhD, Knowledge Exchange Centre, The Mental Health Commission of Canada, Ottawa ON; Simon Davidson, MD, Specialized Psychiatric and Mental Health Services for Children and Youth, The Children’s Hospital of Eastern Ontario, Ottawa ON; Mario Cappelli, MD, Children’s Hospital of Eastern Ontario Research Institute & Director, Mental Health Research Program, Children’s Hospital of Eastern Ontario, Ottawa, ON*

This presentation will showcase the current state of policies and practices in the area of youth transitioning from child and youth to adult mental health and addiction services across Canada. It will also explore consensus statement recommendations that emerged from Canada’s first consensus conference on the mental health of emerging adults, hosted by the Mental Health Commission of Canada, aimed to improve the mental health of emerging adults and address the challenges they face in the current service system.
Session 75
10:00 am - 10:30 am
30 Minute Paper ~ Palma Ceia 3
Mental Health First Aid: Impact Study with a Young Adult Population

Aliyah James, BA, Penn State, State College, PA; Catherine Batsche, PhD, College of Behavioral & Community Sciences, University of South Florida, Tampa, FL

Mental Health First Aid (MHFA) is designed to improve the knowledge and attitudes related to mental health among the general population. This session will describe a study that assessed the impact of MHFA training with a young adult population, i.e., college-age students. The results indicated that MHFA has positive, long lasting effects on participant knowledge, opinions, and helping confidence. Most importantly, participants used MHFA to provide help to individuals in need of assistance.

10:30 am - 11:30 am
Discussion Hour ~ Palma Ceia 3
Immigrant Mother, Adolescent, and Teacher Experiences of Mental Health Literacy and Responses toward School Mental Health Initiatives

Natalie Montgomery, MA, Communication, Doctoral Candidate, Population Health, University of Ottawa, Ottawa, ON, CAN

Two studies demonstrating the needs of diverse audiences in mental health promotion will be disseminated; a qualitative study on the impressions of new immigrant mothers on mental health promotion for adolescents; and a mixed methods study implicating teachers and students on the delivery through the evaluation of a mental health program. The objective is to understand the perspectives of the variety of publics with integral roles in mental health promotion, using a group exercise and continuous discussion.

Session 76
10:00 am - 11:30 am
Discussion Hour ~ Palma Ceia 4
The Mirror Project: Leadership and Organizational Cultural and Linguistic Competency Development

Selena Webster-Bass, MPH, Lori Biello, PhD, Erica Guerrido, BS, Center for Health Equity and Quality Research, University of Florida College of Medicine - Jacksonville, Jacksonville, FL

Leadership is a critical factor in promoting organizational cultural and linguistic competency. The Jacksonville System of Care (JSOC) – Cultural and Linguistic Competency (CLC) Committee developed an organizational self-assessment process, The Mirror Project. Using Learning Organizations and Adaptive/Technical Leadership Theories as frameworks, CLC assessment data across nine behavioral health and youth/family serving organizations has been analyzed and presented to participating organizations.

Session 77
10:00 am - 10:30 am
30 Minute Paper ~ Garrison Suite
The Health Under Guided Systems (HUGS) Program

William Kuzbyt, PsyD, JD, Behavioral Health Solutions, Bonita Springs, FL; Kathryn Hunter, BSW, NAMI of Collier County, Inc., Naples, FL

The Health Under Guided Systems (HUGS) program is a community-based program geared to screen, assess, diagnose, and treat early childhood social/emotional and mental health issues. The program, over its first four years, has screened an average of 1,300 children per year with 24% screening positive for a treatable issue. The external Systems Navigators have successfully placed over 95% of the children in appropriate treatment. HUGS is a demonstrated effective model to engage children in early intervention.

10:30 am - 11:00 am
30 Minute Paper ~ Garrison Suite
ACCESS Mental Health CT: Connecting Pediatric Primary Care with Child Psychiatry

Elizabeth Garrigan, LPC, Sherrie Sharp, MD, ACCESS Mental Health CT, ValueOptions CT, a Beacon Health Options Company, Rocky Hill, CT

Launched June 2014, ACCESS Mental Health CT involves statewide collaboration between DCF, ValueOptions, Hartford Hospital, Wheeler Clinic, and Yale Child Study Center to increase pediatric primary care providers’ knowledge to identify and treat more mental illness, thereby increasing penetration of behavioral health services to youth. First year results exemplify innovations and successful cross-systems collaboration from policy to program implementation showing remarkable outcomes including high rates of enrollment, utilization and program satisfaction.