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Exploring the Need for Social Emotional Learning Programs: A New Model for Mental Health and Wellness

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Abstract

In their early years, children often experience a number of adverse childhood experiences (ACEs) including verbal, physical, and sexual abuse; violence; neglect; poverty; and parental divorce, incarceration, and addiction (Bjrkenstam et al., 2017; Dube et al., 2001; Fuller-Thomson et al., 2014; Sarafian, 2018a). These ACEs place children at greater risk of developing academic and behavioral problems, as well as a number of mental health challenges in adolescence and adulthood (Chapman et al., 2007; Sarafian, 2018a). Committed to providing mental health education and services to those impacted by ACEs, a number of organizations are addressing ACE-related challenges within the context of after-school expanded learning programs designed to teach social emotional learning skills (4-H, 2018; Boys and Girls Clubs of America, n.d.; Yale Center for Emotional Intelligence, 2018). This paper provides a review of the literature regarding ACEs, their impact, and risks to adolescent and adult psychological health; as well as a brief description of several learning programs designed to combat these ACE-related risks by providing care, support, and instruction in social emotional competencies. Specifically highlighted is the work of The Sarafian Foundation, a newly established 501(c)3 social enterprise dedicated to reducing ACE-related risks through explicit instruction in and development of the five social emotional competencies: self-awareness, social awareness, self-management, relationship skills, and responsible decision-making (CASEL, 2018). The foundation's leadership, programs, partnerships, supports and challenges; and efforts to build capacity, scale, and sustainability are examined in relation to its mission of providing accessible and low or no-cost mental health and wellness instruction and resources to children and families (The Sarafian Foundation, 2018).

Review of Literature

Across the country administrators, teachers, and staff work tirelessly to teach elementary children the basics of reading, writing, and math. However, their efforts are often countered by minimal engagement and inattention, anger and impulsive behavior, and low test scores. Are the students of today unteachable? Or must education take a new direction, offering more than the core academic curriculum? With a focus on the whole child; including the attitudes, feelings, and life experiences that make up each individual; educators and community partnering agencies can combat the adverse childhood experiences these students face, and provide them with the social emotional skills necessary for mental health and wellness now and in the future.

Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) are a set of "non-specific" and "modifiable risk factors" responsible for "an array of mental health outcomes" (Chapman, Dube & Anda, 2007, p. 360). According to the Center for Behavioral Health Statistics and Quality (CBHSQ) Report, approximately "1 in 8 children (8.7 million) aged 17 or younger" (Lipari & Van Horn, 2017, p. 5) reside

with at least one recurrent substance-abusing parent. Furthermore, these same children may be negatively impacted by parental divorce, violence, incarceration, verbal, physical, and sexual abuse, physical and emotional neglect, and residential instability (Bjrkenstam, et al., 2017; Dube et al., 2001; Fuller-Thomson, et al., 2014; Gonzalez et al., 2016; Overstreet & Matthews, 2011). In addition, they are likely to grow up witnessing "criminality of household members, parental discord," and mental illness (Dube et al., 2001, p. 1628). Researchers suggest that these children are exposed to a greater number of ACEs, and are at greater risk of psychological and behavioral disorders in adolescence and adulthood (Anda et al., 2002; Dube et al., 2001; Chapman et al., 2007).

Psychological and behavioral disorders.

ACEs can lead to a higher risk of behavioral and psychological disorders; and mental health problems such as depression, anxiety, and substance abuse in adolescence and adulthood (Chapman et al, 2004; Choi et al., 2017; Overstreet & Matthews, 2011). Children of alcoholics are often sad, anxious, and depressed; and tend to experience low self-esteem, and "insecure-avoidant" attachment as they exhibit difficulty establishing and maintaining relationships (Peleg-Oren et al., 2008, p. 17). These children are also apt to exhibit academic problems as well as behaviors that are disruptive, aggressive, impulsive, and oppositional (Burlew et al., 2013; Gonzalez et al., 2016; Overstreet et al., 2011; Schroeder et al., 2006).

These behavioral disorders affect high school completion rates, adolescent and young adult substance abuse, incarceration rates, unemployment, and poverty. Research suggests that depressed teens are twice as likely to drop out of high school than peers who experience mental wellness or who have recovered from depression (Weinstock, 2018). ACEs are also linked to early onset of drinking (Anda, 2018). Furthermore, ACEs in childhood "raised the chances of juvenile arrest by 59%" (Bartos, 2016, para. 3). Finally, researchers have noted that a cumulative effect of ACEs increases the likelihood of adult poverty. Poverty, in turn, puts children at increased risk of continued poverty, fewer life opportunities, and "an intergenerational effect of these ACEs" (Metzler, et al., 2017, p. 146).

Depressive disorders. Children who experience ACEs are also at greater risk of developing depressive disorders and attempting suicide later in life. Researchers, examining the relationship between ACEs and recent onset as well as chronic depressive disorders, have found that ACEs increase vulnerability to depressive disorders "up to decades after their occurrence" (Chapman et al., 2004, p. 217). Researchers have also noted that suicide attempts tend to be associated with ACE exposure, and the number of ACEs "had a strong, graded relationship to attempted suicide during childhood/adolescence and adulthood" (Choi et al., 2017, p. 253).

Social Emotional Learning

In response to the growing need to address these psychological and behavioral issues, there is greater societal and educational interest in making social emotional learning a priority for elementary, middle, and high school students within classrooms, schools, homes and communities. According to the Collaborative for Academic and Social Emotional Learning (CASEL), social emotional learning (SEL) is defined as development of five key competencies: self-awareness, social awareness, self-management, relationship skills, and responsible decision-making ("What is sel?," 2018). These can be taught in a coordinated framework designed to reduce ACE-related risks. Within schools, coordinated efforts take the form of stand-alone SEL curriculum, integration of SEL principles across the curriculum, school-wide policies, and implementation of Positive Behavior Interventions and Supports (PBIS, 2018).

Programs. In 2018, the California Department of Education (CDE) introduced its Guiding Principles for Social Emotional Learning (CDE, 2018). Publication of these principles provides a pathway for school-community partnerships in provision of mental health and wellness instruction and services in after-school expanded learning programs. Programs offer leadership and team building activities, community service learning experiences, and wellness resources to children and families. Such partnerships include Boys and Girls Clubs of America (BCGA), 4-H, RULER, and Ayo! CONNECT.

BCGA offers programs from sports and education to the arts and wellness, and character and leadership. BGCA participants are surrounded by supportive adults who explicitly teach social emotional skills such as responsible decision-making, relationship skills, and social awareness so children follow the "path to great futures" (Boys and Girls Clubs of America, n.d., p. 1). Specific programs such as "Youth of the Year" and "Million Members, Million Hours of Service" utilize recognition and community service as vehicles for development of relationship and leadership skills (Boys and Girls Clubs of America, n.d., p. 1).

4-H is recognized worldwide in its efforts to develop leadership in young people. With a focus on community service as well as hands-on experiential learning; 4-H members develop social emotional competencies such as compassion, decision-making, and communication. In turn, these abilities lead to greater confidence and resilience, as well as other life skills. The 4-H model focuses on positive youth development to ensure long-term goals of greater societal contribution and decreased risk behavior in adolescence and adulthood (Institute for Applied Research in Youth Development, 2013, p. 2).

The Yale Center for Emotional Intelligence uses the evidence-based RULER approach to integrate SEL in schools by teaching students to "recognize, understand, label, express, and regulate emotion" (Yale Center for Emotional Intelligence, 2018, p. 1). Found to lead to success in school and beyond, these skills are taught across the curriculum and in after-school settings. The program is available to pre-kindergarten through twelfth grade students and families in participating RULER schools and districts.

Case in Point

The Sarafian Foundation, a 501(c)3 social enterprise, has recently launched its inaugural Ayo! CONNECT and Ayo! CONNECTions family workshops in partnership with a local elementary school in the Elk Grove Unified School District in Sacramento County, California. Ayo, meaning yes in the Armenian language, provides the theme for each twelve-week session. Participants are taught to say "yes" to mental health and wellness as they learn social emotional skills within the context of an after-school expanded learning program. Third through fifth grade students and families are encouraged to participate in this free program and learn SEL skills related to empathy, goal-setting, appropriate and productive risk-taking, the body's reaction to anxiety, and tools for developing mindfulness.

While the foundation's board of directors is optimistic about initial program success, there are several challenges that must be overcome. To begin, the necessity to build capacity and expand leadership is critical. The founders, in establishing the mission and vision for the organization, have the passion to drive the work forward. But, program demand requires a larger and more diverse network. The foundation, based on the work of the Sprout Fund's Remake Learning Playbook (2015), developed its own leadership guide for scale and sustainability. Utilizing playbook tools; the leadership will convene, catalyze, communicate, coordinate, and champion for mental health and wellness for children and families (Sarafian, 2018b).

The foundation's leadership is also working to address challenges specific to implementation of its Ayo! CONNECT program. For example, due to the partner school's multi-track year-round calendar as well as the voluntary nature of the program, attendance has been inconsistent. This leads to the potential for curricular gaps that may negatively impact program effectiveness. Additionally, the program has not yet been piloted with other educational partners. Differences in demographics, school calendars, and program facilitators may yield contrasting results. It is therefore necessary to conduct an empirical study of program effectiveness.

Armed with research findings, future plans include program expansion to other schools in Sacramento County and beyond. In addition to after-school expanded learning programs, the foundation strives to develop other community partnership programs, such as those outlined in the California Department of Education's Guiding Principles for Social Emotional Learning (CDE, 2018). Programs will address the lack of available and appropriate mental health services for children by providing low or no-cost opportunities such as weekend retreats and summer camps for children and families impacted by ACEs.

Conclusion

In examination of the literature regarding adverse childhood experiences, it is clear that there is great need for mental health education, programs, and resources for the children in today's schools and communities. It is time for children impacted by ACEs to say "no" to substance abuse, depression, incarceration, poverty, and suicide and say "ayo!" or "yes" to mental wellness and prosperity. The California Department of Education's Guiding Principles for Social Emotional Learning provide an avenue to development of school-community partnerships. SEL programs such as The Sarafian Foundation's Ayo! CONNECT may support reduction in mental health risks, positively impact academic and behavioral performance, and decrease the likelihood of mental disease in adolescence and adulthood. By taking initial steps to fulfill its mission of providing low or no-cost mental health and wellness programs, The Sarafian Foundation is challenging the status quo of adverse childhood experiences and defining a new normal for children and families.

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