



# BRYT NOTES



2018  
RESEARCH  
FINDINGS



Changing school culture to  
support student mental health



THE BROOKLINE CENTER  
FOR COMMUNITY MENTAL HEALTH





## **the brookline center** for COMMUNITY MENTAL HEALTH

### **ABOUT THE BROOKLINE CENTER**

The Brookline Center for Community Mental Health provides outstanding, affordable mental health care and community-based social services that help individuals and families lead healthier, safer, and fuller lives, while building the strongest, healthiest community possible. The Center serves 4,000 children, adults, and elders each year, delivering treatment regardless of insurance or ability to pay.

### **ABOUT BRYT**

The first known program of its kind in the nation, BRYT (Bridge for Resilient Youth in Transition) provides short-term, transitional support for students returning to classes after extended mental health-related absences. BRYT began in a single Brookline, Massachusetts, high school and is now available to more than 90,000 students in 80 schools throughout the state. The Brookline Center's BRYT team is leading a movement to bring bridge programs to schools and students nationwide.



### **ABOUT THE RUDERMAN FAMILY FOUNDATION**

The Ruderman Family Foundation believes that inclusion and understanding of all people is essential to a fair and flourishing community. Guided by its Jewish values, the Foundation advocates for and advances the inclusion of people with disabilities throughout our society; strengthens the relationship between Israel and the American Jewish Community; and models the practice of strategic philanthropy worldwide. The Foundation operates as a non-partisan strategic catalyst in cooperation with government, the private sector, civil society, and philanthropies.

AS THE NATIONAL CRISIS IN CHILDHOOD  
MENTAL HEALTH CONTINUES TO GROW,  
**FAMILIES, SCHOOLS, ORGANIZATIONS,  
AND MENTAL HEALTH PROFESSIONALS  
ARE TURNING TO THE CLASSROOM  
FOR ANSWERS** ON HOW TO BEST MEET  
CHILDREN'S NEEDS.



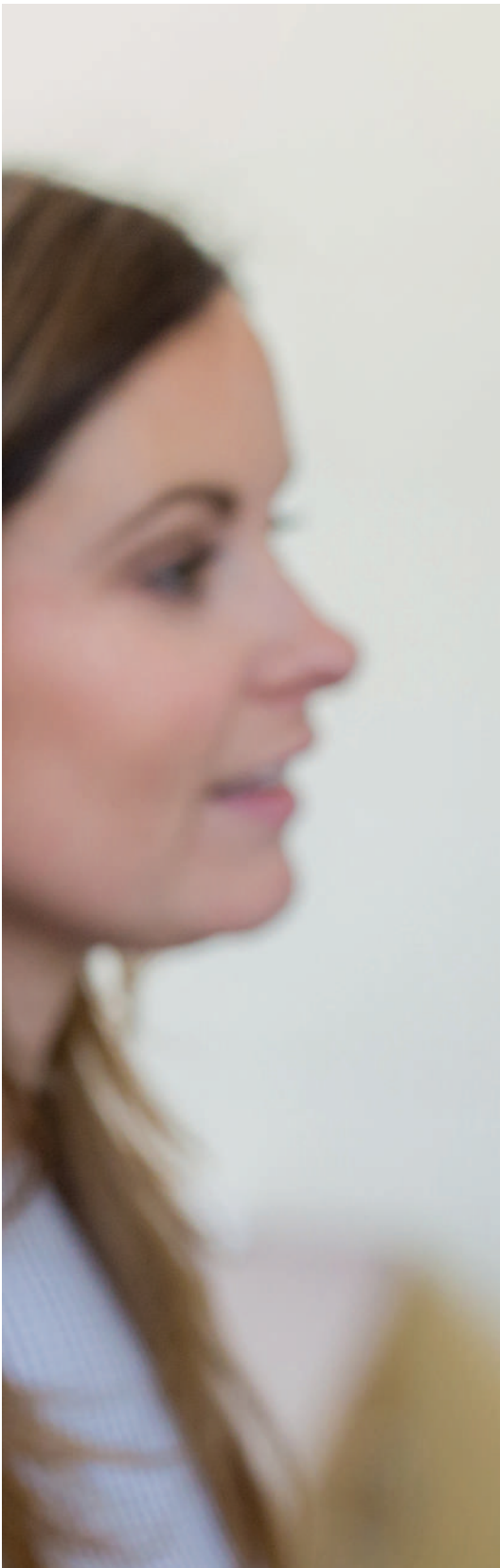
Years ahead of this trend, **THE BROOKLINE CENTER FOR COMMUNITY MENTAL HEALTH** launched a program called **BRYT** (Bridge for Resilient Youth in Transition) to help its local high school change academic structures and adopt policies that promote good mental health and the full inclusion of students with significant mental health needs. Over the past decade and a half, more than 80 schools have launched BRYT programs with the help of The Brookline Center.

BRYT makes a significant difference in the lives of students. A multi-year evaluation published in *Psychology in the Schools* in 2017 showed that students in BRYT programs made clinical progress and improved their day-to-day functioning. Fewer than 20 percent of BRYT participants experienced re-hospitalizations and almost 90 percent remained on track to graduate with their class (compared with a national dropout rate of 50 percent for students aged 14 and over with serious mental illnesses).

As broad replication of BRYT spread, schools with programs began noticing widespread changes around mental health throughout the school ecosystem, beyond students directly served by a program. To identify and better understand the drivers and impacts of these schoolwide changes, The Brookline Center launched a study of six high schools. This report, made possible with the generous support of The Ruderman Family Foundation, details our findings.







## SUNLIGHT POURS INTO THE HIGH-CEILINGED FOYER OF WESTBOROUGH HIGH SCHOOL.

Anchored by an open staircase that allows an expansive view of the two floors above, the lobby is decorated with a half-dozen student-made banners cheering on teams, promoting a fundraiser, and congratulating students on their participation in a local rally. The building exudes the sturdy, traditional feel of a well-established public institution.

Stroll the hallways of this 1,100-student school, however, and you will see hints that something different is happening at Westborough High. A math teacher leads her students through a mindfulness exercise before an exam. A coping center in the library offers tips and techniques to help students manage their anxiety. A school social worker helps a student catch up on coursework missed during a recent hospitalization. Teachers consult one another about workloads and check in about student needs.

Clearly this school's investment in student mental health has moved well beyond the nurse's office and health class.



# SCHOOL LEADERS REPORT HIGH LEVELS OF STRESS, TRAUMA, AND MENTAL HEALTH ISSUES AMONG THEIR STUDENTS—ALL PART OF A GROWING MENTAL HEALTH CRISIS BRYT DIRECTLY ADDRESSES.<sup>1,2</sup>

300%

Over the past 20 years, the number of students hospitalized for psychiatric disorders has increased by nearly 300 percent.<sup>3</sup>

5

In a typical class of 25, five students will experience a mental health problem that gets in the way of school and daily routines.<sup>4</sup>

1/2

Roughly half of all psychiatric disorders begin in the teenage years.<sup>5</sup>

50%

About 50 percent of students aged 14 and over diagnosed with emotional and/or behavioral disorders drop out of school.<sup>6</sup>

3,041

Suicide is attempted on average 3,041 times each day by youth in grades nine through 12 nationwide.<sup>7</sup>

<sup>1</sup> Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62, 593–602.

<sup>2</sup> Teich JL, Robinson G, Weist MD. (2011) What Kinds of Mental Health Services do Public Schools in the United States Provide? *Advances in School Mental Health Promotion*, 1:sup1, 13–22, DOI: 10.1080/1754730X.2008.9715741

<sup>3</sup> Blader, J.C. (2011). Acute inpatient care for psychiatric disorders in the United States, 1996 through 2007. *Archives of General Psychiatry*, 68, 1276–1283. <https://doi.org/10.1001/archgenpsychiatry.2011.8>.

<sup>4</sup> U.S. Department of Education (2001). *Annual report to Congress on the implementation of the Individuals with Disabilities Education Act. (Report No. 23)*. Washington DC.: Education Publications Center.

<sup>5</sup> U.S. Department of Health and Human Services

<sup>6</sup> U.S. Department of Health and Human Services, Department of Adolescent Health (2017, January 31). *Massachusetts Mental Health Facts*. Retrieved from <https://www.hhs.gov/ash/oah/facts-and-stats/national-and-state-data-sheets/adolescent-mental-health-fact-sheets/massachusetts/index.html>.

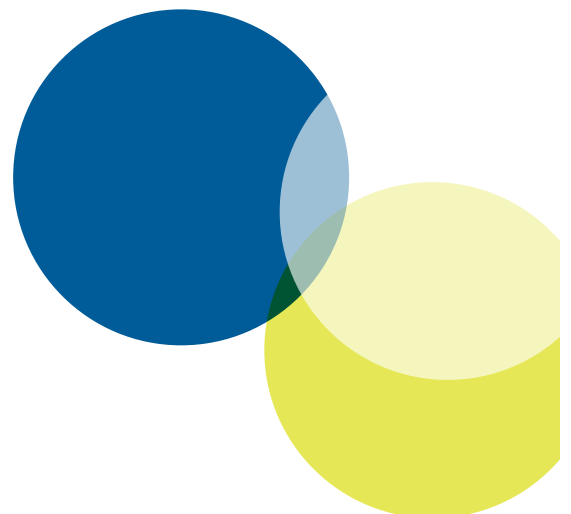
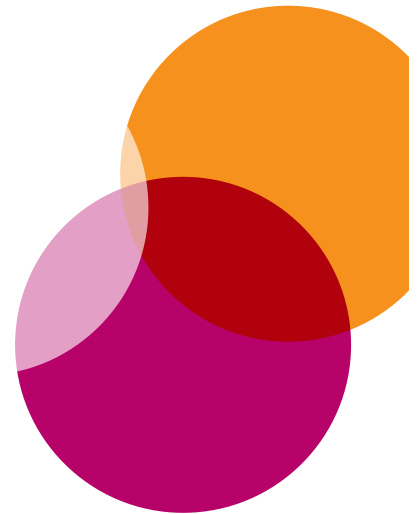
<sup>7</sup> Youth Suicide Statistics. (n.d.). Retrieved from <http://prp.jasonfoundation.com/facts/youth-suicide-statistics/>

# STUDENT MENTAL HEALTH IS A CRITICAL CONCERN FOR EDUCATORS ACROSS THE UNITED STATES.

One in every five adolescents has a serious mental health condition and 5 to 9 percent of teens develop serious mental illnesses that necessitate hospitalization or result in prolonged absences from school. These youths disproportionately drop out, attempt suicide, abuse alcohol and drugs, and function poorly in a variety of areas, including relationships with friends, families, and teachers.

For students with poor mental health, school engagement and performance can suffer greatly. Traditional school-based supports are often insufficient to address the needs of students with significant mental health concerns.

But change is happening. BRYT is demonstrating how, through a cohesive focus on space, services, and staffing, bridge programs can transform the way schools think about and effectively approach mental health needs of all students.





# BRYT AND THE BROOKLINE CENTER

BRYT began at Brookline High School in 2004 when The Brookline Center's clinical director, Dr. Henry White, recognized the need to support students returning to school after psychiatric hospitalizations. Schools are an excellent venue for providing student mental health services, but the complex needs of these youths require more support than most schools are able to provide. Dr. White worked with Brookline's school leadership to develop BRYT and since its founding, the flagship program at Brookline High School has served nearly 1,000 students.

The Brookline Center's BRYT team works proactively, and with increasing momentum, to help schools develop and continuously improve their own bridge programs. Following a strategic planning process with the Bridgespan Group, supported by the Robert Wood Johnson Foundation, The Brookline Center set a five-year goal of reaching 25 percent of Massachusetts high school students with a bridge program. BRYT quickly exceeded this goal, growing remarkably over the past several years; as of spring 2018, BRYT programs were available in 80 Massachusetts schools collectively enrolling 90,000 students. The 100th BRYT program will open in 2018–19.

When a school expresses interest in starting a bridge program, The Brookline Center's BRYT team engages a planning group of teachers, health professionals, and administrators to explore student/school needs, assets, and resources, leading to a comprehensive program plan. Once a school has launched a program, BRYT offers ongoing technical assistance. Professional development and regular supports available to all schools in the BRYT network include an annual symposium, monthly professional learning and networking meetings, targeted professional development sessions, and regional meetings. BRYT also manages an online portal that offers a FERPA/HIPAA-compliant database for student-level data collection, aggregation, and analysis, as well as a resource bank of program management tools. BRYT team members visit all schools in the network annually for facilitated program self-assessment and continuous improvement. Schools can also access more intensive supports during their first two years of operation.

In addition to working directly with schools, The Brookline Center's BRYT team regularly participates in a variety of professional organizations, conferences, and advocacy efforts to advance a shared understanding of the need for comprehensive mental health supports in schools and build legislative support for bridge programs. The team is also developing a research base related to BRYT programs.









# ABOUT THE RESEARCH

The Brookline Center conducted a six-school case study to better understand BRYT programs' influence on school culture and the multiplying effects of a schoolwide response. The research design, reviewed and approved by the Institutional Review Board at William James College, included site visits to each school with structured interviews of 10 to 15 staff members, including school leaders, teachers, counselors, nurses, and program staff. Interviewees' comments were transcribed, aggregated, analyzed, and used as the basis for this report.

The participating schools, all in Greater Boston suburbs, differ in their structure and focus, as well as their choice of program name. Some are called "BRYT" or "Bridge," while other schools chose unique names that reflect school and district culture. One school is regional, serving two towns (Algonquin Regional High School), one is vocational and serves multiple towns (Assabet Valley Regional Technical High School), and four are single-town high schools (Hopkinton, Wellesley, Westborough, and Winchester high schools). The oldest BRYT program of the six has been in operation since 2006, and the newest was established in 2015. Many of the programs in this report were created thanks in part to generous funding and support from the MetroWest Health Foundation.

Through the voices of counselors, teachers, clinicians, principals, and coaches—adults most central to students at school—this report showcases how schools with BRYT programs are advancing a culture that prioritizes mental health as a fundamental, inseparable part of student development and achievement.

*The BRYT network first spread beyond Brookline to suburban high schools west of Boston, placing these schools' programs among the most established. Over the past few years, schools representing greater economic and cultural diversity have joined the BRYT network, as well as middle schools and a small but growing number of elementary schools. The Brookline Center recognizes the need for future research exploring BRYT's impact on these schools, students, and communities.*



BRYT PROGRAMS WORK WITH  
**STUDENTS WHO HAVE MISSED  
SIGNIFICANT AMOUNTS OF SCHOOL**  
(USUALLY FIVE OR MORE CONSECUTIVE  
DAYS) DUE TO A MENTAL HEALTH CRISIS,  
PSYCHIATRIC HOSPITALIZATION, OR  
SERIOUS MEDICAL PROBLEM.

# BRYT MODEL



# THE BRYT MODEL CONSISTS OF THREE CORE COMPONENTS:


**SPACE** BRYT program spaces are designed with access and versatility top of mind. Rooms are open to students during the full school day and are located near an exit. They have both workspace and social space, as well as access to private meeting space.

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**SERVICES** At the core of all BRYT programs is dedicated clinical and academic support, a commitment to collaborating closely with families, and care coordination between school staff and community partners. By providing structured and intensive supports to students struggling with the most acute challenges, programs free up other support staff such as school counselors, social workers, and psychologists to focus on the needs of the broader school population.

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**STAFFING** With a BRYT program in place, students can always connect with a caring, skilled adult. Rooms are staffed by both clinical and academic professionals who work closely with each student and coordinate with teachers. School staff members regularly consult with their BRYT colleagues on strategies for handling social-emotional issues students are facing.

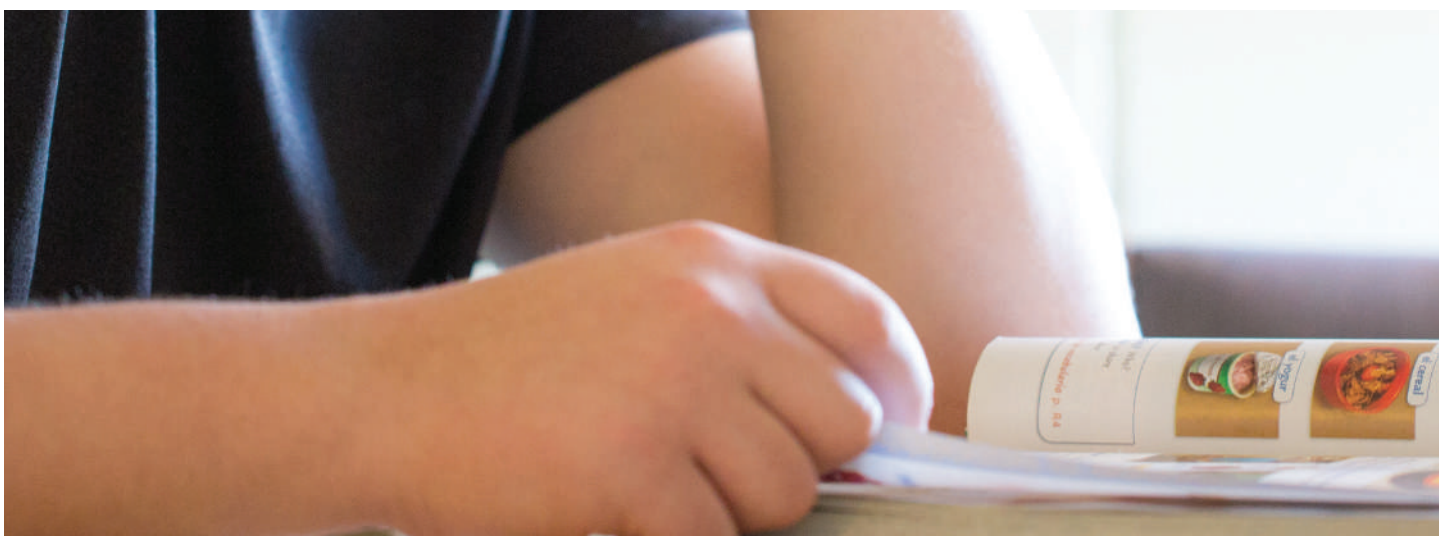


BRYT is a short-term solution, with students spending an average of six to 12 weeks in a program. Students steadily decrease the amount of time spent in BRYT in favor of increased classroom instruction time, eventually transitioning back into regular classes full time.





IN THIS REVIEW OF SIX MASSACHUSETTS HIGH SCHOOLS,  
**FOUR SIGNIFICANT FINDINGS** EMERGED ABOUT HOW BRYT  
POSITIVELY IMPACTS SCHOOLWIDE UNDERSTANDING OF  
AND SUPPORT FOR STUDENT MENTAL HEALTH NEEDS



BRYT REDUCES  
**STIGMA** AND  
FACILITATES  
**INCLUSION**

BRYT PROVIDES  
SCALABLE AND  
ACTIONABLE  
**FRAMEWORKS**



BRYT CREATES  
COLLABORATIVE  
**NETWORKS**

BRYT DRIVES  
**INNOVATION** AND  
**FLEXIBILITY**





## FINDING #1

# BRYT REDUCES STIGMA AND FACILITATES INCLUSION

The sense of belonging and compassion in a school with a BRYT program is palpable. Case study interviewees explained that, before their schools' BRYT programs started, the lack of an organized approach meant many adults expressed concern and a desire to help students struggling with mental health challenges, but found it difficult to translate this concern into actions that made a meaningful difference.

When teachers and administrators understand and respond to mental health needs in the same way as physical ones, however, schools see fear and stigma give way to more informed, inclusive perspectives that help students succeed.

Something as simple as physical space—one of the three core components of BRYT—is a clear signal that a school is committed to designing inclusive, welcoming environments and to serving all students. Across programs, BRYT classrooms are places where students find less pressure and more structured support to complete assignments, prep for quizzes and exams, and strategize about the best way to return to their regular academic routines.

More importantly, staff from multiple programs included in this case study noted BRYT classrooms are places where changes in attitudes toward student mental health start to happen. A BRYT room acts as an anchor, giving students a firm connection to the school community at large. BRYT staff members help students steadily reintegrate into their regular classrooms rather than keeping them socially isolated, stigmatized, and physically separated in different academic or programming tracks.

By creating intentional settings and physical spaces where students (and even staff) feel confident and know they're not alone, positive attitudes about mental health grow and spread throughout a school's culture. Students and staff members alike realize there's always a stigma-free home base to return to for questions, help, and guidance.

**"[BRYT] has completely changed how we view mental health. It has become part of the culture."**

**WELLESLEY HIGH SCHOOL  
ASSISTANT PRINCIPAL**



## FINDING #1 SPOTLIGHT

### Wellesley High School



A small, colorful sign hanging on a Wellesley High School classroom wall reads “Bridgeism 101: Go to class.” This simple directive might seem almost too obvious to bother marking in rainbow script, but for many students facing mental health challenges, the sign is a reminder that even when that first step is difficult, they are still welcome and belong alongside peers in a stigma-free, supportive environment.

Just ask Adam Diliberto and Lindsey Yamaguchi, who have led Bridge, Wellesley’s BRYT program, since it started in 2006. Diliberto and Yamaguchi built the program as a way to fight the stigma many students felt when returning to the classroom and have championed an ethos of inclusion that now permeates the school.

At first, some teachers balked at the core concepts behind Wellesley’s Bridge program, recalls Diliberto, the academic coordinator. They thought the program might be a distraction. How could a student benefit from being outside the classroom? They didn’t understand why exams or assignments might be waived for a student who had missed weeks of class. Was that fair to the others? Would it reinforce stigma or a sense of difference?

Now, 12 years later, after many conversations, countless student successes, and intensifying mental health needs, Wellesley’s Bridge program is woven into the institutional fabric of the school—so much so that when the high school moved to a new building in 2012, space was intentionally designed to fit its needs.

Wellesley teachers and administrators embrace the notion that mental health is essential for success at school; they credit BRYT with changing attitudes schoolwide about the best ways to address mental health needs.

As Wellesley’s program actively fostered better communication and greater understanding between students and teachers, the stigma associated with mental illness began to dissipate. Teachers went from saying, “That child is truant and needs detention” to saying, “I think she might be struggling and need help.”

“Everyone finally understood that we all had the same goal: academic success for students,” says Yamaguchi, the clinical coordinator. “The teachers and staff trust us. They know they don’t need to worry.”

Working toward collective, concrete goals to help students succeed demystified mental health challenges, helping school staff recognize that mental health supports are necessary and practical for all students, not just those in crisis. Teachers know students are stressed, and they want to help. They want to understand how academic demands impact students’ wellbeing—and how mental health impacts all students’ abilities to do well in the classroom.

“The Bridge program shows students that they can be here in the high school and still be part of it, even if they are having trouble going to classes or socializing,” notes a Wellesley teacher.

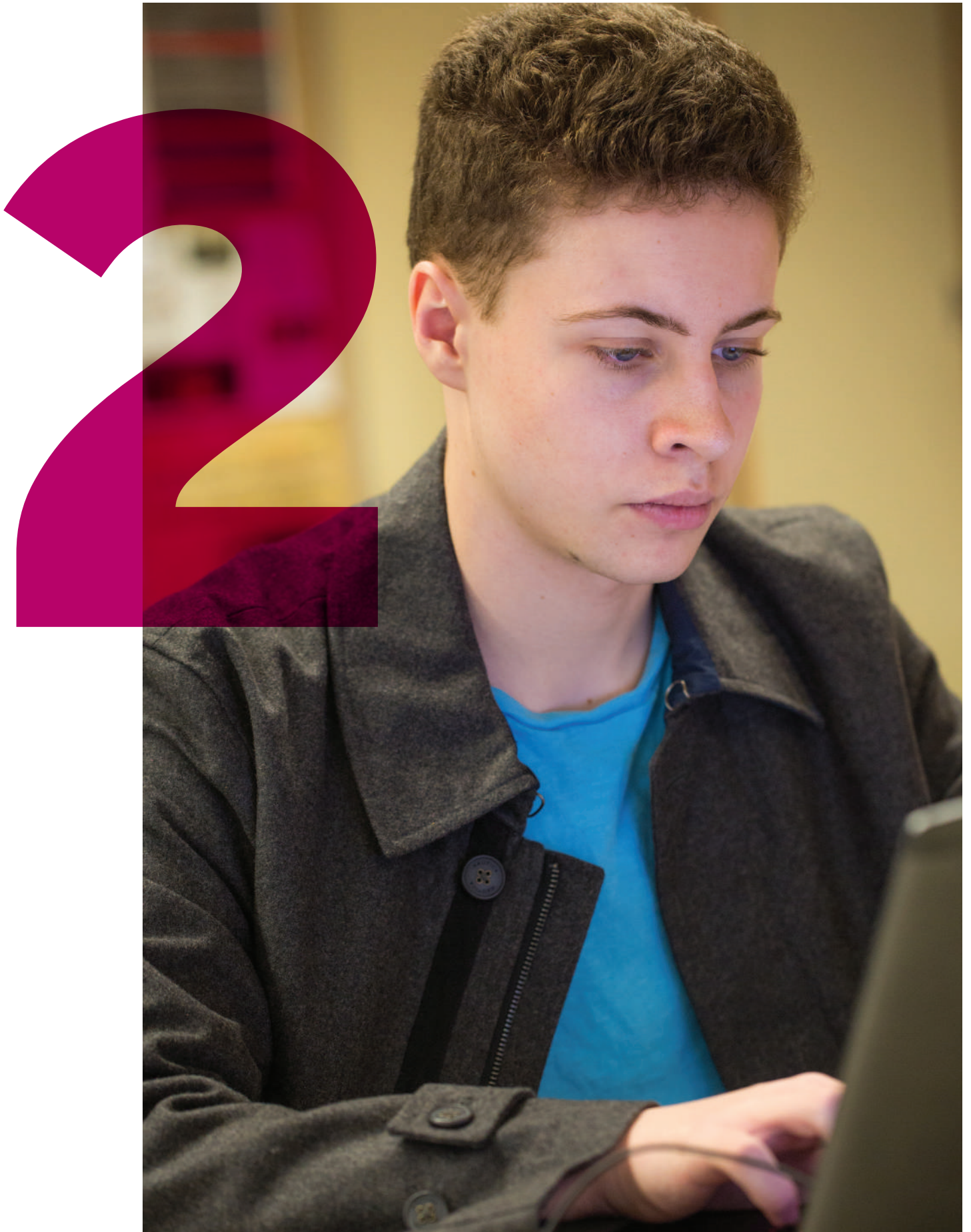
The attitude and inspiration behind BRYT have spread throughout Wellesley High School. School staff understand that students can integrate seamlessly back into regular academic routines, while teachers foster an open, inclusive attitude in their classrooms and recognize that supports once deemed beneficial for a targeted population of students are key for helping all students thrive.





“The Bridge program shows students that they can be here in the high school and still be part of it, even if they are having trouble going to classes or socializing.”

WELLESLEY HIGH SCHOOL TEACHER



## FINDING #2

# BRYT PROVIDES SCALABLE AND ACTIONABLE FRAMEWORKS

BRYT empowers schools to deal with mental health by design, not by default, creating scaffolding to address mental health needs proactively and across an entire school, rather than leaving individual staff members to their own devices.

While schools and districts are working to understand and integrate social-emotional learning strategies (SEL) into their curricula, unique to BRYT is a programwide focus on understanding relationships between mental health and SEL supports and intentionally integrating mental health tools and strategies within academic frameworks and SEL. BRYT staff members take ideas traditionally found in clinical settings—strategies for helping individuals build coping skills, a systematic understanding of how stressors can affect an individual, or specific treatment modalities—and introduce or integrate them in ways that work in the education space, building on and in tandem with other SEL techniques.

As many of the schools included in this case study report were quick to identify, services and supports that make up the backbone of a school's BRYT program are frequently scaled up into actionable, whole-school frameworks and solutions that allow educators to address student mental health at large.

Interviewees also consistently noted that supports and dedicated strategies to address student mental health needs are not mere add-ons, but rather enhance schools' existing academic and family engagement programming. Strategies are introduced in structured, systematic ways so that supports are not wholly dependent on individual educators' levels of familiarity with mental health and its relationship to student success.

**"Before the program, we were just doing everything intuitively, and that was hard. I might say 'here's what you should do,' and another teacher might have a different approach."**

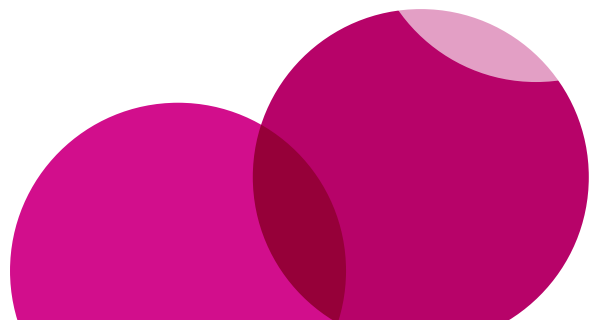
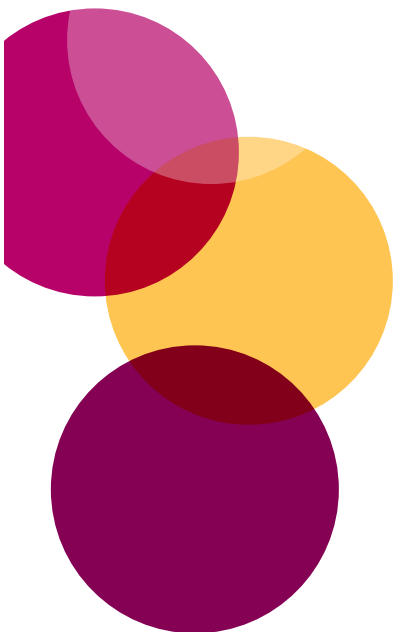
**WINCHESTER HIGH SCHOOL TEACHER**

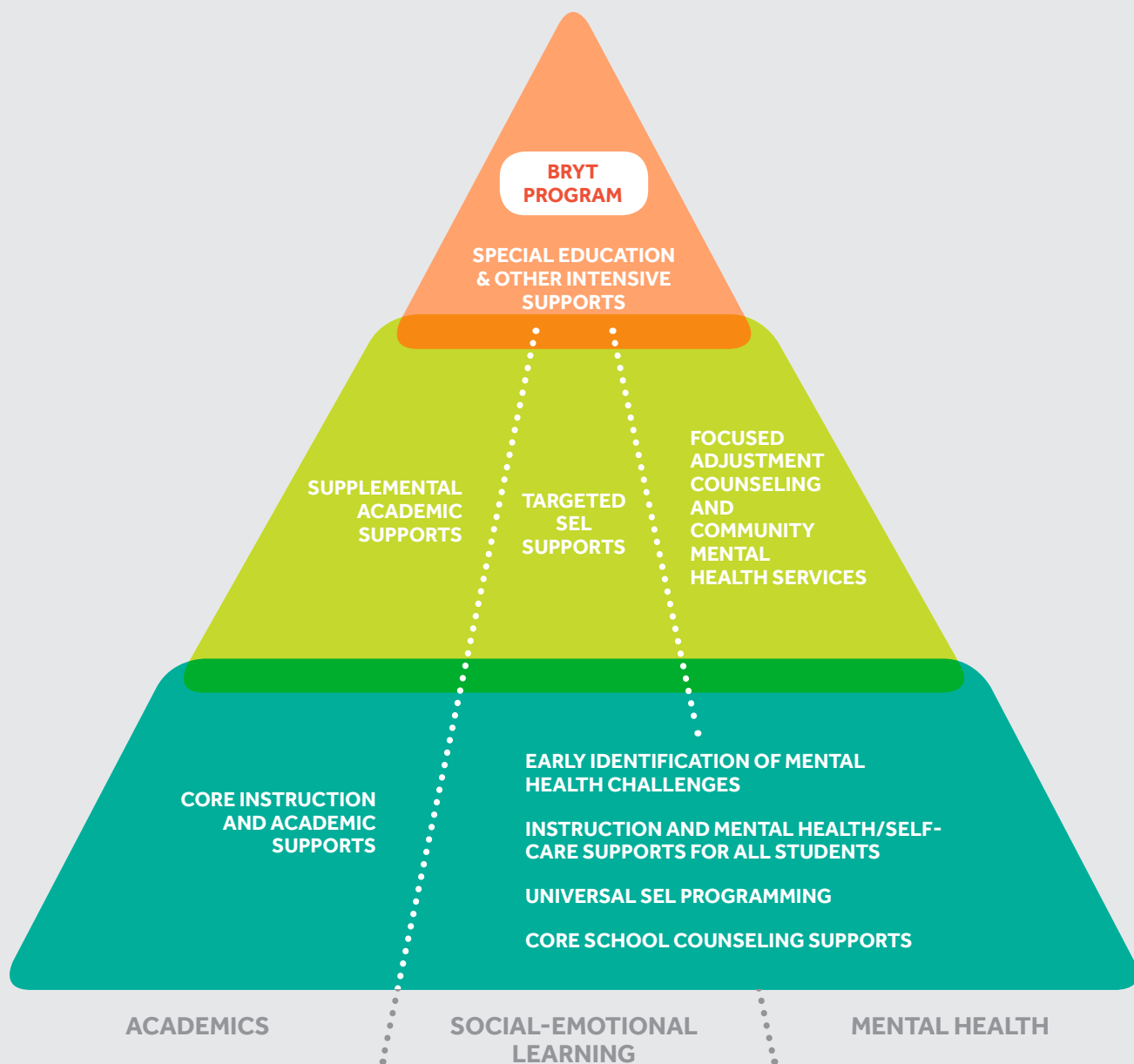
## BRYT USES A **MULTI-TIERED SYSTEMS OF SUPPORT (MTSS) MODEL** TO ENSURE THAT PROGRAMS ARE FULLY INTEGRATED INTO A SCHOOL'S EXISTING SUPPORT SYSTEMS AND STRUCTURES

The multi-tiered systems of support (MTSS) framework is increasingly used by schools to plan and implement interventions for students with varying levels of need (universal, supplemental, and intensive).

Within the MTSS framework, schools often focus on tiered academic and behavior management supports and interventions. The BRYT MTSS triangle explicitly integrates academics, social-emotional learning, and mental health. BRYT uses this version of the MTSS model to help schools take a meaningful snapshot of their systems, reinforce existing supports, and fill identified gaps, while also ensuring tier 3 BRYT programs are fully integrated into a school's systems of support.

It's important to recognize that, while there is overlap between the types of programming and supports that promote social-emotional learning and mental health, especially at tier 1, SEL interventions (programming) at the supplementary and intensive levels are not the same as mental health interventions.





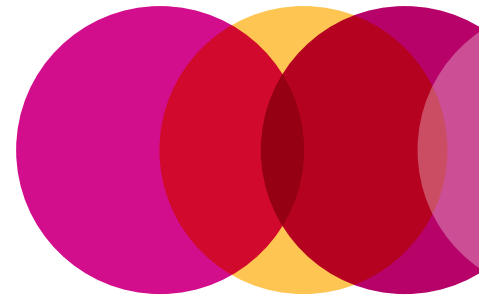
## THE BRYT MTSS TRIANGLE





## FINDING #2 SPOTLIGHT

### Winchester High School



Student wellness is emphasized from the very beginning at Winchester High School. A welcome presentation given to incoming freshmen and their parents stresses the importance of balancing self-care needs, looking beyond books to learn skills like time management, and, above all, to be kind to one another.

This emphasis is intentional, and one that many credit to Transition, Winchester's BRYT program. Transition is leading the charge in addressing students' mental health needs and integrating teachings and strategies to develop skills like self-efficacy, empathy, and resiliency among students in Winchester's highly competitive academic program.

"We were responding to a need," says Kristen Woollam, the program's co-founder and clinician/director. "When we started the program, we said we would manage academics and communication with teachers and get kids back to classes, while at the same time meeting their social and emotional needs."

Uniting structured academic support with SEL and mental health skills quickly caught on. Following the structure provided by BRYT's MTSS framework, cohesive SEL instruction now meets the needs of students across the high school, not just those directly involved with the Transition program.

"[Transition staff] are good at identifying the bigger picture, what major stressors have just happened, and which students might be struggling," notes Winchester High's nurse. "Students need ways to compartmentalize what they have been through, put that issue in one bucket, and then be able to work on the school bucket. They learn how to separate things in a way that teenagers don't usually know how to do."

By encouraging program staff to introduce frameworks and skills from the BRYT classroom throughout the school's rigorous curriculum, Winchester is deepening overall staff understanding of student needs. Faculty can adapt tools and lessons to fit their own students' emotional and social needs, regardless of mental health status.

"The district's big goals are focused on social and emotional awareness and how to maintain levels of stress that are manageable," explains Woollam. We have done psychoeducation in the whole building, so more and more in the school, there is a raised level of awareness."

By all accounts, the approach is working. "It brings a moment of humanity to all of this," says Woollam. "It helps all of us with our relationships. In working with teachers in this way, it builds credibility. I love that piece of things. It builds in a lot of trust."

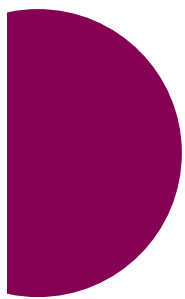
"We have more and more kids finding themselves in difficult situations, but there is more social and emotional understanding," agrees a Winchester High guidance counselor. "Part of that could be the work [Transition staff members] have done here—educating teachers so people appreciate the challenges."

This attitude is reflected and shared at the very top levels of school leadership. "We are not reinventing the wheel anymore," says Winchester's assistant principal, discussing why the school has been successful in integrating social-emotional learning and important stress management supports for students. "If you are not well from an emotional standpoint, then we certainly can't expect you to perform in this environment, which is stressful and competitive."



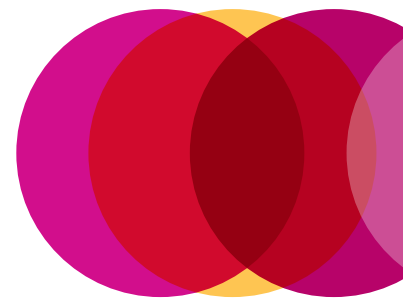
“[The program] builds credibility ... It builds in a lot of trust.”

KRISTEN WOOLLAM,  
TRANSITION CLINICIAN AND DIRECTOR  
WINCHESTER HIGH SCHOOL



## FINDING #2 SPOTLIGHT

### Westborough High School



Throughout the school day at Westborough High School, words like “black and white thinking,” “mindfulness,” and “emotion regulation” make their way into conversations, whether it’s in the BRYT program, math class, or the library.

These are the tools and language of dialectical behavior therapy (DBT), a framework that entered the school through Westborough’s BRYT program, the Center for Student Success (CSS), and is now infused throughout the entire school system.

DBT helps students manage strong emotions, cope with stress, and make better decisions. Its focus on skill-building—mindfulness, interpersonal effectiveness, tolerating distress, and emotional regulation—is helping the entire school community develop a more nuanced, patient, and empathetic understanding of situations and relationships.

Westborough students are exposed to DBT skills instruction as part of their ninth- and 10th-grade health and wellness coursework. “Soon after students arrive in high school, we are all speaking a common language, and we are better equipped to deal with difficult situations,” says Courtney Balacco, CSS’s clinical coordinator.

Balacco works with teachers to connect DBT tools and language to the curriculum. It’s not that teachers are becoming therapists, she notes, but that staff now have a shared vocabulary to identify situations where specific DBT skills can and should be applied. A teacher can encourage a student struggling with a challenging assignment, for example, to apply distress tolerance skills and work through exactly how to apply these and other tools in their DBT tool kit.

“It’s so much more powerful than a single health class or fact sheet on an abstract topic like depression or anxiety,” says Balacco.

Principal Brian Callaghan is a firm believer in the equal importance of mental health and academics and goes to great lengths to ensure that one does not override the other.

Callaghan engaged the full staff in crafting best practices for supporting social and emotional learning in their classrooms. A formal document adopted at the end of the 2018 school year includes assurances that every teacher, for example, will “maintain a mindset that cherishes learning, growth, and development of the whole child.” Faculty will use “language and statements that are nonjudgmental and that focus on effort and quality of the work and encourage students to self-reflect.”

“We’ve normalized mental health supports,” says Callaghan. “Everyone can feel it. The spiral goes up, not down.”



"We've normalized mental health supports.  
Everyone can feel it."

BRIAN CALLAGHAN, PRINCIPAL  
WESTBOROUGH HIGH SCHOOL







## FINDING #3

# BRYT CREATES COLLABORATIVE NETWORKS

On a systemic level, BRYT builds collaborative networks across schools and throughout the community, harnessing the collective power of school leaders, parents and guardians, community partners, and providers involved in a child's treatment and education.

Driving this is the third key component of the BRYT model—staff. Virtually all schools participating in this case study identified staffing as a key part of BRYT's success in nurturing a positive mental health culture. Notably, BRYT staff members often fulfill multiple roles: as a point of direct support for students transitioning back to the classroom, as a central point of contact for teachers seeking to learn the best ways to support students, and as a resource for parents seeking to understand the challenges their children face.

BRYT staff interviewed for this study articulated a powerful understanding of the work required to support student success across a school's complex ecosystem. Within fast-moving schools, communicating clearly is a critical component of that work. BRYT programs create a central system that serves students and a channel through which program staff can communicate with administrators, counselors, school nurses, and teachers.

Teachers reported that the program helps them understand how much work students are able to handle at any given time, ensuring that the academic demands placed on returning students do not adversely impact their successful reintegration into the classroom. Nurses, in turn, stated that their work with students who have multiple, serious health problems is supported by the BRYT program.

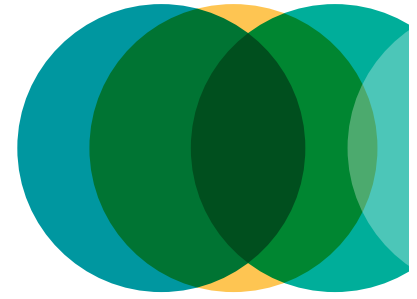
**“[BRYT] has helped students feel more connected to the school and the community. They know we’re in tune with what they need.”**

**ALGONQUIN REGIONAL HIGH SCHOOL COUNSELOR**



## FINDING #3 SPOTLIGHT

### Assabet Valley Regional Technical High School



At Assabet Valley Regional Technical High School, students build skills in manufacturing, engineering, construction, health care, transportation, and more, in addition to standard subjects offered at high schools across the country. Students graduate ready to start a job or pursue advanced study in a range of fields.

But students aren't the only ones developing specialized skills at Assabet Valley. Combining core tenets of the BRYT model with a special mental health first aid certification, Assabet Valley school adjustment counselor Kelly Viera is helping school staff develop the skills they need to support student mental health.

Assabet Valley's BRYT program, known as AV CARES, serves as the center of a growing network of staff that extends beyond one program or a select few professionals to better serve all students. Viera is using her position and leverage as the CARES program director to conduct regular mental health trainings across the school community.

"Most teachers have never had mental health training. They start to see what students are going through. They haven't understood why kids aren't functioning in class," says Viera.

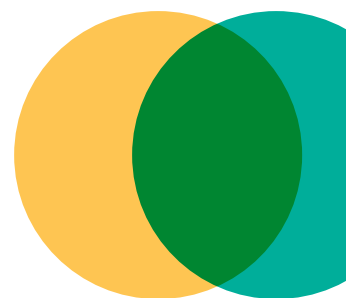
Viera is seeing a slow shift in faculty awareness and initiative: more staff members reaching out to her, visiting the CARES room to talk about their students, asking questions to gain clarification about symptoms, and learning how to work better and more collaboratively with students.

"We brought in the support staff because they are the front line," says Alyssia Berghaus, Assabet's student services director. "These are not necessarily skills that [administrators] have when they are hired. This training benefits the entire school community."

In her capacity as CARES program director, Viera has trained more than 60 school staff members—including the superintendent, school committee members, teachers, assistants, custodial staff—and hundreds of community members. The community trainings in particular have drawn a diverse group—parents, teachers from area schools, librarians, police officers, even driving school owners. "These are people who have zero mental health training, but who work with kids all the time," says Viera.

The number one goal, Viera says, is to establish a network that shares a common language and a broad understanding of the impact of mental health on young people and is ready to act.

"When a student is on crutches, people ask about it. When a student is having a bad day, people still wonder, 'Should I approach?'" says Viera. "We want everyone on the same page, knowing who to ask for help and how to take action."



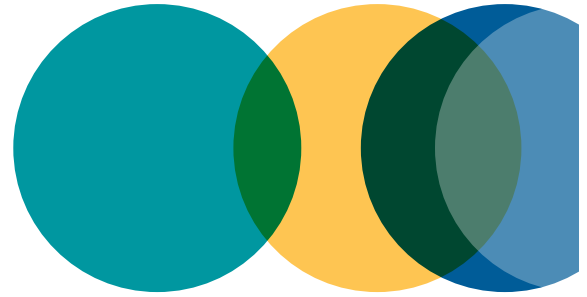
“We want everyone on the same page, knowing who to ask for help and how to take action.”

KELLY VIERA,  
ADJUSTMENT  
COUNSELOR,  
ASSABET VALLEY  
REGIONAL  
TECHNICAL  
HIGH SCHOOL



## FINDING #3 SPOTLIGHT

### Algonquin Regional High School



Sarah McNulty's energy is infectious. Students filter in and out of her office to talk excitedly about outstanding graduation requirements, discuss what's going on with their friends, or share good news about what's happening in their lives.

This positivity and natural aptitude for connecting with others doesn't extend just to her students. As the school's adjustment counselor and BRYT program leader, McNulty's work regularly involves building a collaborative network of parents, students, and teachers working together toward success.

The Algonquin Regional High School BRYT program, known as ACCESS, has long focused on fostering healthy relationships with parents to encourage positive mental health for students, but this focus on expanding student support networks to encompass relationships between school staff and parents has spread beyond ACCESS. It is a practice all school staff are encouraged to follow, according to (now former) principal Tom Mead.

"We like to have staff who are adept at being a good liaison to parents, who have the door open to parent meetings," says Mead. "Our staff make those interfaces with parents on a regular basis. In some cases, those can be quick meetings, but all the better to create close ties with our community and our parents."

Advocating for meaningful family conversations isn't the only thing ACCESS has helped launch. The school's BRYT program has also spurred staff interest in dedicated places and space for staff members to talk about mental health.

"There has been a growing awareness of the needs of our students in terms of their social and emotional health," explains Mead. "We started our own health and wellness committee here at the school...to raise awareness of mental health issues and to adopt programming and approaches that embrace the needs of our students."

Connecting students and parents with community partners and tapping the school's ACCESS leadership to build and strengthen these relationships have also led to success for Algonquin families. Relationships with organizations like the Family Success Partnership, a group Mead describes as a large constellation of area providers, expand Algonquin's mental health support network even further.

"[Being] more collegial so that we can make quicker references to our parent organizations gives us a 24/7 approach [to mental health]," says Mead. This sense of collegiality starts with ACCESS and other staff members who work most directly with students impacted by mental health issues, but quickly spreads and benefits the larger school community as a whole.

"It takes the community to understand what we do," says McNulty. "We need to put ourselves out there and tell them what we know so slowly but surely, they begin to understand."

"In addition to our focus on teaching and learning is the acknowledgment that we can't fix everything for every student and family—we need this network that is out there in the towns to support us," says Mead. Collaborations with family and community networks strengthen mental health support throughout Algonquin High.





“We can’t fix everything for every student and family—we need this network.”

TOM MEAD, PRINCIPAL  
ALGONQUIN REGIONAL HIGH SCHOOL

4



## FINDING #4

# BRYT DRIVES INNOVATION AND FLEXIBILITY

Public schools have traditionally been structured in ways that unintentionally but systematically penalize and undercut students with serious mental health conditions, damaging their opportunities for learning, growth, and full participation in the school community. BRYT schools challenge staff to flip the paradigm, prompting changes in academic structures and the adoption of innovative policies and tools designed to be flexible and promote good mental health.

Powering these changes is a tailored combination of the three elements that distinguish BRYT—space, services, and staffing. Schools adapt the BRYT model to best meet their student populations' unique needs and leverage supports introduced through BRYT in ways that positively impact schoolwide culture around mental health.

With a BRYT program in place, all students are empowered to succeed, including students with mental illness. Staff members across schools contend that BRYT helps students learn self-advocacy skills so students feel more confident speaking up and working with teachers as part of a two-way relationship. Students are better able to explain the kinds of support and assistance they're looking for—and what's standing in their way. In turn, teachers have a greater understanding of what kinds of support students need and come to see that flexibility can remove barriers to student success without sacrificing quality of instruction or lowering expectations for academic work.

**"I see a huge change. It is impossible not to see the connection between mental health and people's lives. The culture here promotes progressive thinking and acceptance."**

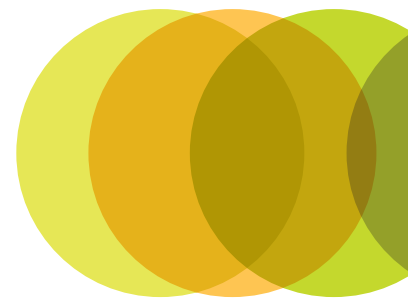
**HOPKINTON HIGH SCHOOL TEACHER**





## FINDING #4 SPOTLIGHT

### Hopkinton High School



For Hopkinton High School students, there is no shortage of remarkable opportunities. From spending school breaks abroad to learning from dynamic guest speakers who regularly present to classes to the more than 45 clubs ready to help students discover new passions, Hopkinton High is dedicated to powerfully shaping and extending learning for its students.

Innovation goes beyond exciting presentations and inspiring cultural exchanges, however, to encompass a topic closer to home—student mental health. Staff at Hopkinton High School are successfully demonstrating the importance of adopting flexible, schoolwide pro-mental health policies, starting with a pioneering way to track assignments and mark student progress introduced by START, Hopkinton's BRYT program.

Previously, when students returned to school after a mental health-related absence, teachers and other staff struggled to coordinate efforts to facilitate student re-entry.

"It was hard to communicate with others about what I should do," says one teacher. He wondered how others were handling grades, assignments, and missed work when students were out for prolonged periods of time.

To address this concern, echoed by many school staff, Hopkinton's START program created an online system that continually tracks and updates students' attendance, day-to-day functioning, schedules, and academic expectations. Anyone on the staff can see what's going on with a student in real time: what work was missed, what is required, and what is waived.

"Things move quite fast with all these pieces, and START put them under one roof. The coordination is huge," says principal Evan Bishop.

"The work tracker is so helpful. I can see how much a student has to do for all of their classes, so it reminds me that they have a litany of things, and we can help them focus on the essential pieces," adds another Hopkinton teacher.

It's an excellent reminder, says a third teacher, "that these are children and that they have other issues outside of your own classroom. It also takes the onus off you of having to track students who need extra help. And it is better for the kids."

Beyond introducing ways to track assignments and more accurately chart students' progress, START is also challenging staff to adopt a mindset that promotes flexibility when thinking about expectations for students.

"Teachers are more willing to accept that kids have anxiety and that it can be overwhelming. Overall, we are more aware of how much we ask students to do and recognize when students are anxious versus lazy," says one Hopkinton teacher.

START is proving that these innovative, flexible approaches that accommodate students' mental health needs result in student success. "We have moved away from the pass/fail unless it is absolutely a last resort," says Lisa Winner, the START program coordinator. "We looked at the grades of students who had been through the START program and we saw that they are actually doing quite well compared to the student body. They are still able to excel—something I think the majority of teachers now understand."





“Teachers are more willing to accept that kids have anxiety and that it can be overwhelming. Overall, we are more aware of how much we ask students to do and recognize when students are anxious.”

HOPKINTON HIGH SCHOOL TEACHER





# CONCLUSION

Hearing a former BRYT student speak is inspiring. Many are quick to talk about the support they received in the program and the power of finding a stigma-free and inclusive space within their own school.

Equally powerful is witnessing how the same impacts that individual BRYT students are quick to cite are now evident throughout BRYT-program schools. These schools are creating more inclusive environments where students don't feel judged, often using the same frameworks and networks that individual BRYT students know make all the difference when it comes to creating a positive mental health culture.

Starting with dedicated classroom space that serves as a physical marker of the important role that good mental health plays in a school's success, BRYT is lessening stigma and making sure that all students are welcome at school and that supports are readily available to them.

Physical space also makes it possible to deliver comprehensive, integrated services, in connection with BRYT's MTSS-backed model of integrating social-emotional learning best practices with targeted mental health supports designed to help students directly involved in BRYT and beyond. This makes it easy for anyone in a school to take action and better understand how to support all students' needs.

And with dedicated staff members who, thanks to their involvement with and connection to BRYT, can serve as the center of a network designed to support student mental health, relationships are strengthened both in schools and with key

community partners to create a united web of individuals better prepared to keep students' best interests top of mind.

But the true power comes in the unification of these three core concepts of space, services, and staffing. BRYT is designed to help schools address student mental health needs in ways that are innovative and flexible and allow both students and staff members to excel.

BRYT programs are ultimately equipping schools to work with mental health needs in ways that are comprehensive and collaborative and lessen burdens on an individual team or small group of staff.

"There was no systematic way of dealing with one-off cases and no formalized process," says one Hopkinton teacher. "They have real expertise in START ... the pressure was taken off me. There are competent people who can come to me and let me know what is happening."

This excitement about learning from and growing thanks to core BRYT teams, all to strengthen and benefit the entire student population, is shared across programs. It is a sentiment that emerges time and time again in conversations with school leadership about the impact BRYT has had on their schools.

"It has allowed us to do more preventative work. Our time isn't being taken up by ACCESS students so we have been able to provide better services to other students," says an Algonquin High School guidance counselor. "We've had a little more time to work on the other things."





# SCHOOL PROFILES

## **ALGONQUIN REGIONAL HIGH SCHOOL**

Algonquin Regional High School serves 1,500 students from the towns of Northborough and Southborough, MA. Algonquin's ACCESS program was established in 2014 with the support of the MetroWest Health Foundation. In addition to developing great supports for kids in ACCESS, program founder and clinician/program leader Sarah McNulty has worked to build understanding and support for the program and for students struggling with mental health challenges throughout the school.

## **ASSABET VALLEY REGIONAL TECHNICAL HIGH SCHOOL**

Assabet Valley Regional Technical High School in Marlborough, MA, serves 1,000 students from seven towns in the MetroWest region. Assabet Valley was the second vocational/technical school in Massachusetts to open a BRYT program, launching AV CARES in 2014. The program has been a pioneer in systematically addressing the reintegration of students who fall behind in their academic classes as well as in their career/technical education programs ("shops"). The school has capitalized on the CARES program to engender shared understanding of and responses to student mental health across its community via a comprehensive mental health education program facilitated by program leader Kelly Viera.

## **HOPKINTON HIGH SCHOOL**

Hopkinton High School's START program, launched in 2014, is highly regarded not only for the quality of its "basic" BRYT program services, but also for the many innovations it has developed and shared with the BRYT network. In 2017, the START team (led by clinician/program leader Lisa Winner and adjustment counselor Jane Gomes) worked with the HHS math department head to create a statistical model to demonstrate that academic outcomes in math and science for students participating in START were as good as, and in many cases better than, those of the average HHS student. About 1,150 students are enrolled at Hopkinton High.





## **WELLESLEY HIGH SCHOOL**

Wellesley High School's Bridge program is the second oldest in the BRYT network, dating back to the 2006–07 school year, and has the longest-serving program team, clinician Lindsey Yamaguchi and academic coordinator Adam Diliberto. The many tools and resources Wellesley's Bridge team has developed over the years make it a model for programs across the state, so much so that Bridge holds a bimonthly open house for school and district visitors interested in learning more about BRYT. Adam is a highly regarded educator who collaborates with BRYT in planning and facilitating professional development for academic coordinators; Lindsey, a member of BRYT's statewide advisory group, worked with BRYT to develop the network's first parent leadership team. Wellesley High School serves a population of 1,500 students.

## **WESTBOROUGH HIGH SCHOOL**

Westborough High School's Center for Student Success (CSS) has had a profound impact on the school since the program was established in 2015. CSS has organized the school, which serves 1,100 students, around a shared understanding of youth mental health, integrated the language and practices of dialectical behavioral therapy (DBT) at all levels, and driven teacher professional development on mindfulness and distress tolerance. CSS operates an after-school program that provides a caring and supportive environment to any student who needs academic assistance, initiated a peer-to-peer support project among program parents, and is developing a parent education series on DBT. Program leader Courtney Balacco and clinician Stephanie Glenn serve as leaders and mentors to BRYT program staff across Massachusetts.

## **WINCHESTER HIGH SCHOOL**

Winchester High School started its Transition program in 2010. After experimenting with and adapting the model, Winchester High became the first school to successfully implement a hybrid program model in which staff and resources are shared between its BRYT program (Transition) and a longer-term special education program (Excel). The program is located in two adjoining rooms, and the program team (director/clinician Kristen Woollam and teacher John Fleming) jointly coordinate supports for students in each program. Winchester High School serves an average of 1,350 students each year.



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BRYT Director	BRYT Executive Leader

## LEARN MORE

For more information about BRYT or to explore bringing BRYT to your community, district, or school, please contact Paul Hyry-Dermith, BRYT Director, at [paul\\_hyry-dermith@brooklinecenter.org](mailto:paul_hyry-dermith@brooklinecenter.org)

Copies of this report are available at [www.brooklinecenter.org](http://www.brooklinecenter.org)

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- No talking about students that are not in the room
- If you are uncomfortable with a topic, say giraffe
- Remember that everyone's on their own goals at their





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