Policy Recommendations
Youth created policies based on issues students of Chicago Public Schools have identified as barriers in their district.
This summer, the Chicago Public Schools Student Advisory Council focused on addressing the framing question of “How do students have a voice in the SEL practices in their schools?” The Council researched through a wide variety of methods: online research; interviews with Thrive Chicago, the Collaborative for Academic, Social, and Emotional Learning (CASEL), as well as CPS’ Office of Social and Emotional Learning, and Lurie Children’s Hospital Center for Childhood Resilience. The council also conducted site visits to Little Village High School and The Breathing Room to learn about trauma-informed practices. The council also created ideal schools, met with the CPS Office of Management and Budget and the Office of Local School Council Relations, and collaborated with the Student Voice and Activism Fellowship.

Our Research
Issue:

Despite state laws like Act 93-0495, also known as The Children’s Mental Health Act Of 2003 and yearly mandated Continuous Improvement Work Plans or CIWPs, CPS schools with high trauma levels have continued to create an environment which lacks support for students regarding trauma and SEL. Therefore, this recommendation provides the means for schools with high trauma to implement a leadership role to trained professionals whose focus would be to initiate the creation of a safer, more supportive environment for students.

Recommendation:

Our recommendation is that CPS should create a system of 12 pilot schools with a high trauma level and implement a Behavioral Health Team, also known as BHT, within these schools. This team would take on a leadership role on any matters related with SEL or trauma. They would be used as a center of support for Tier 2 and Tier 3 interventions as well as organizers for any kind of SEL related issues. We advise that the BHT also focuses on two other tasks -- training for teachers and staff and the implementation of student personal development days. These pilot schools would also be used a model system for other schools to rely on when adding BHTs in their own schools.

Action Steps:

1. Organize schools based on their trauma levels/area, resources, and type. Using this organization, we will pick 12 schools to be the pilot schools for an accurate BHT implementation.
2. Assess numbers of counselors and social workers within each school to see if schools have the capacity of a Behavioral Health Team (BHT).
3. Notify school admin about policies regarding creation of a BHT.
4. Once teachers and staff are notified, they apply to be a part of the BHT. The applications are reviewed by principals.
5. Once members are finalized, responsibilities are distributed.
6. BHT then begins training of teachers and staff members, beginning with one person from each department.
7. BHT is then in charge of planning the student personal development days.
   a. We suggest that when planning events, the BHT consults with the SVCs or at the least a student focus group to gain more personal views on issues pertaining to trauma related incidents.

How does this promote student voice in SEL?

Stated by the CPS Vision for Academic Progress “Our curriculum must evolve to include the courses demanded by today’s colleges and the skills demanded by today’s employers”. Methods that used to work in the past must be evolving to today’s standard of student care if CPS wants to continue to graduate it’s future citizens and workers. The Behavioral Health Team is an evolution of a support group which will help it’s students who are vulnerable to a system of violence and trauma turn them into professional adults and future stakeholders in today’s constant evolving world.
Research

- 93% of teachers find it SEL to be very/fairly important part of the “in-school experience”
- 95% think that SEL is teachable
- 97% think that SEL will benefit their students

However, it is also reported that teachers believe SEL training is taught to a mere minimum in schools.
- 44% (less than half) say that it is not implemented in a school wide programmatic basis
- 82% found further interest in implementing SEL training while more than half (61%) find it fairly/very interesting

CASEL has also proven that SEL significantly benefits students; in a 2017 meta-analysis study, it was illustrated that students who did participate in SEL programs showed a **11% increase** in academic achievement when compared with students who did not participate in SEL programs.

Furthermore, a 2015 study by CASEL researchers at Columbia University have discovered that SEL has a benefit-cost ratio of **11:1**, meaning that for every $1 spent on SEL, there is an $11 return.

Therefore, to further promote these benefits, we believe that BHT is the most efficient method when pursuing further SEL in schools. Based on a study by CPS in 2016, most Tier 2 and Tier 3 interventions occurred through BHTs. The only issue is, as mentioned previously, BHTs are not being implemented accurately.
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