

FACING THE FIGHT

TUHSC Leads the Charge in Battling Behavioral/Mental Health Issues in West Texas

BY KARA BISHOP

ILLUSTRATIONS BY AMANDA WARREN



She sat in her classroom closet with six students during her conference period. Students she'd found wandering the halls unsure of what to do. They'd never experienced a high-level lockdown before. But, then again, neither had she. Lights out. Doors locked. She knew very little of what was going on, other than administration suspected a student had brought a gun to school. Possibly more than one student. Possibly more than one gun. The doorknob to her classroom rattles, the door opens, "Is anybody in here?" She says nothing and signals the students to be silent.

They hear footsteps walking away, then quickly coming back. "Is there anybody in here? This is the SWAT team."

"We're here, in the closet."

"OK, do not move, we will come back and get you."

The classroom door slams shut.

Ninety minutes later, the SWAT team returns to let them out. She exits first with hands behind her head and is immediately frisked by an officer. One by one the students exit in the same fashion — she was allowed to frisk the girls herself. "Put your hands behind your head and walk in a straight line," is the only communication she gets.

They start walking — she tells me later it felt like marching — in a single-file line, hands behind their heads, surrounded by the SWAT team armed with machine guns. All of a sudden, motion is detected at the end of one of the hallways as they come to an intersection. "Get down!" There's more inaudible shouting as she throws herself on the floor — it was just another police officer. They keep moving. Finally, after what seems like the longest, completely silent seven minutes of her life, she's outside. They get to the tennis courts where a paramedic hooks her up to a nebulizer; she hasn't been able to use her inhaler in three hours. She sits on the tennis court for another three hours before she's cleared to go. She texts me to say she made it home — I remember her routine of praying for safety every morning as she's walking to the school entrance — and I stop and thank God my mom is safe.

THE DILEMMA The lockdown lasted roughly six hours. No one was hurt. No guns were fired. A peaceful ending compared to so many other threats turned gruesome realities at schools in other parts of Texas and across the nation.

School shootings are a constant topic of conversation with parents, teachers, students and politicians all demanding a solution. Following the Santa Fe High School shooting last spring, Gov. Greg Abbott mentioned a program during his press conference that he thought could help divert such a tragedy in the future: the Telemedicine, Wellness, Intervention, Triage and Referral (TWITR) Project developed and operated by the TTUHSC F. Marie Hall Institute of Rural and Community Health.

"May 18, 2018, changed my life," said Billy U. Philips Jr., PhD, MPH, TTUHSC executive vice president of rural health, director of the institute and leader of the TWITR Project. "The shooting at Santa Fe High School turned the TWITR Project from an academic endeavor to something very personal in an instant. Had I not come to TTUHSC, likely as not, my children would have been at that school; 10 years ago, we owned a farm about one mile from the high

school and many of the children in the 4-H group we led in the (Santa Fe) community were there, and one of them did perish (in the incident)."

Five minutes after the governor spoke about TWITR, Philips' phone began to ring. It's been ringing ever since. Reporters, school administrators — more than 100 school districts have reached out to Philips for access to the program to date — public health professionals and politicians all bombarding him with questions about TWITR. Can it really stop school shootings? Can TWITR be offered to my school? Is screening students in the schools a good idea?

Additionally, Philips and his team have responded to four public information requests — extensive in nature — with explicit transparency for government officials who may be trying to spot error or inconsistency.

The people behind TWITR are not looking for shooters. They're not looking to deter school shootings, either, although it could be a byproduct of what they are focused on, which is serving as a behavioral health resource for the needs of students. They're aiming to provide hope to students and parents alike who don't see a way out of their struggles — a resource to those with nowhere else to turn.

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TWITR PROJECT LAUNCHED After the Sandy Hook Elementary School shooting in 2012, Gov. Rick Perry and Texas Tech University (TTU) System Chancellor Kent Hance decided the state of Texas needed a plan to serve student behavioral health needs.

“Somehow my name came up,” Philips said. “I had worked in telemedicine as an epidemiologist, so they wanted me to put together a preventive care program using this technology. When Dr. (Tedd L.) Mitchell (TTUHSC president and now TTU System chancellor) asked me if we could do this, I said it would take something about like a miracle, but we’re on it. And many miracles have happened since then.”

The primary purpose of the TWITR Project is to screen, assess and provide referral services to students in schools where there are either vacancies in the counselor core, case overloads or a scarcity of mental health referral resources. It’s classified as a secondary prevention program since the process involves screening. When discussing the role TWITR could potentially play in schools, Philips’ team needed to answer whether or not it was even necessary, which they did by facilitating a needs assessment, Philips said. It established a profound need in the area and the project was rolled out in 2014 after six months of development.

The TWITR Project currently operates in 14 school districts within 60 miles driving distance of Lubbock. It’s funded by the Office of the Texas Governor Criminal Justice Division Juvenile Justice Grant Program, the Texas Health and Human Services Commission and TTUHSC matching funds. In 2018, the institute received a one-year \$360,885 grant from the Texas Health and Human Services Commission, matched by a portion of TTUHSC funds, to begin what has been coined the “Amarillo expansion.” As of press time, five school districts in the Panhandle are participating.

TWITR has three circuit-riding licensed professional counselors (LPCs) handling the project — one just moved to Amarillo full time to be more accessible to the school districts in this area. It’s important for the LPCs to be able to respond quickly to urgent situations and develop relationships with school personnel and students, Philips said.

TWITR BECOMES THE REVOLUTIONARY MODEL The TWITR Project tasked Philips and his team with pioneering a new model of mental health service delivery.

“It’s fair to say this is a revolutionary first-of-its kind model, though mental health screening in schools isn’t new,” Philips said. “Using LPCs was (an innovative) concept. Upon development of the program we discovered they were the least expensive, most appropriately trained and plentiful provider in mental health in West Texas.”

The team looked at LPCs who had good clinical experience, a history with the population age group — TWITR serves ages 12 to 18 — and since the school systems were uncharted territory for the institute, LPCs with experience working in schools was necessary to bridge the gap.

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I'M NOT A WEIRDO, AM I?!?

HOW IT WORKS The foundational component of TWITR taught to school personnel is recognition, which is the first step in referring a student. The institute provides recognition training to school personnel in participating school districts once a year.

Philips still remembers the first training meeting he did for Crosbyton Consolidated Independent School District (CISD).

“It stood out for a lot of reasons,” he said. “It was a January day, and I, just coming up from the Gulf Coast, had not dressed for the cold blizzard-like conditions of the day. As I carried my box of 32 folders into the school auditorium for the training, I was hoping I hadn’t brought too many (materials) and was wishing I had an overcoat. When I walked into the auditorium, I looked up and saw every single seat filled with every teacher, administrator, bus driver, grounds crew member, coach, guidance counselor and even a few parents from the PTA. They were so glad someone was coming to their school to help make the lives of their (children) better.”

Recognizing problems existing in and around a child after a traumatic event seems obvious, while noticing beforehand can be more difficult.

“Hindsight is 20/20,” Philips said. “However, proactivity has increased in the schools who work with us. We have gotten more referrals the first six weeks of this school year than we did all last year. Is it because there are more troubled students? No, not necessarily. It’s because teachers and school officials are knowledgeable on what to look for, and everyone is on board with using any tools they have at their disposal to (avoid) tragedy and provide help for our children.”

A referral comes from the counselor, teacher, administrator or sometimes parent, and is based on behavioral issues, a constellation of poor grades, absences, truancy, threats, delinquency and/or involvement with the justice system. Once referred, the assessment portion of the process begins while carefully following protocol.

“We follow school policy on checking in upon arrival, and TWITR protocol requires all students are screened with their parent or guardian present,” said Shawn Marie Parrott, LPC-S, senior mental health professional for TWITR and the LPC assigned to the Amarillo expansion.

During the initial visit, TWITR LPCs can request student records to assist in understanding the student’s academic and social history and to monitor changes in the student’s behavior throughout the school year. Philips said both the student and the parent or guardian sign multiple consent forms in their preferred language

THE DEBATE

Behavioral Health or Mental Health?

Industry professionals have differing opinions on the definitions of behavioral health and mental health, as well as which one should be the predominantly used term. Based on our research, *PULSE* chose the following definitions for this story, with the exception of source quotes:

- ★ **BEHAVIORAL HEALTH:** scientific study of the emotions, behaviors and biology relating to a person’s overall well-being, including mental health.
- ★ **MENTAL HEALTH:** mental illness, which could be impacted by behavioral health.

Do you have an opinion? Join the conversation by emailing Kara Bishop at kara.bishop@ttuhsc.edu. Comments may be shared in our online version.

while participating in the program. While some students may have mental illnesses, most situations involve something changing in the student’s life, which can be overcome without a long-term mental health intervention, Philips said.

The TWITR LPCs care about the student and their family — feeling a strong desire to strengthen the family unit and provide for the child’s needs. Parrott spent seven years working as a counselor for Lubbock County where she focused on counsel and education for the family. She now brings this style to students believing everyone deserves an outlet to tell their story.

“In my experience, the children and parents are willing to be screened with a sense of relief because they feel this is their last resort,” Parrott added.

Once the assessment is complete, the LPC consults with a child and adolescent psychiatrist to develop recommendations for the student based on their



assessment scores. These recommendations are then sent back to the family for evaluation and they are given as many referral options as possible. Parrott said that patient consultation with the psychiatrist via telemedicine is almost always recommended. This gives the psychiatrist a chance to see the student and ensure effective resources are found for them.

“Telemedicine works so well for TWITR because it provides easier access to care; convenient use for providers, patients and parents; and it reduces the amount of time students are out of class and parents are out of work,” Philips said. “Even when screening they don’t drive to Lubbock; we travel to them. Plus, it’s amazing to hear the clinicians relate how the students have an easier time telling their story (during a telemedicine session with a psychiatrist) when they’re not (in the same room) with a mental health provider.”

However, in West Texas, there are people at TTUHSC who aren’t satisfied with the status quo — who are working around the clock on positive solutions to grim realities.

TELEMEDICINE BENEFITS

Technology provides high quality video while remaining HIPPA compliant.

Can link a psychiatrist familiar with the student’s medication to the primary care physician who isn’t.

Cuts wait times for serious situations from weeks to days and in a few cases, minutes.

TWITR GAINS ACCESS TO STUDENTS One of the biggest challenges when designing the program was getting into the schools, Philips said. The team had to find a way to build trusting relationships with school administrations to offer service. They found an opportunity in state-mandated protocol to provide personnel with annual suicide prevention training. Youth Mental Health

First Aid is an approved program by the Texas Education Agency (TEA) for this mandate, and the institute team is certified to teach the course.

“We decided to offer (the schools) our services, and while conducting the training, we mentioned TWITR as a preventive measure they could implement,” Philips said.

Shallowater Independent School District (ISD) was one of the first schools to sign up.

“We joined because we are continuously looking for additional services for our students,” said Kenny Border, EdD, Shallowater ISD superintendent. “An increase in low socioeconomic students and families in Texas schools obligates (the school) to serve as a vehicle to help with physical needs, which must be met prior to educational needs.”

Border said the biggest benefit to TWITR is it bridges a gap between the school setting and community resources, while also providing the school with access to telemedicine. The duty he feels toward his students stems from years of working in a school district of troubled elementary children, and he said school personnel have a responsibility to protect the well-being of their constituents.

He’s not the only one who feels this way.

“I’m a huge advocate of TWITR — it’s part of our progressive response to addressing student need,” said Chris Smith, Brownfield Independent School District superintendent. “(We) understand the importance and significance of working with our kids, detecting things earlier and getting them (professional) support.”

WHY STUDENTS NEED TWITR When I walked through the doors of the Crosbyton CISD administration building, I was instantly reminded of the small rural school I grew up in. The atmosphere evoked a sense of small-town family and, turns out, this hit closer to home than you would expect. Shawn Mason, CISD superintendent and his wife, Stacy, the school counselor are warm and friendly with a strong love for their students. They share a common bond extending past the marriage union. They are educators who pour their souls into Crosbyton CISD students.

“(Children) do what is expected of them,” Shawn said. “You lower your expectations, that is what you’ll get. If a teacher shows they love the students, then those students will work their hearts out for the teacher.”

As the district counselor, Stacy wants to show the students she cares so they’ll have an outlet in her. However, she is also grateful for the additional support TWITR provides her as well as the students.

“I drop everything to take care of a student in need,” Stacy said. “However, I’m kind of a bandage in a way. I can stop the bleeding, but my care doesn’t extend beyond ‘first-aid’ care, which is why TWITR is so valuable to us.”

TWITR’S FUTURE Currently, West Texas has multiple issues to address in the mental and behavioral health arena. Provider shortage, stigma and treatment options are just a few areas of concern. The state Legislature believes the TWITR Project has been an effective solution thus far, which is why the Texas House of Representatives Committee on Public Education included TWITR as a recommendation in their report prepared in response to the Santa Fe High School shooting.

Philips is against TTUHSC running TWITR as a state-wide model. TWITR is not a one-size fits all solution and would need tweaking depending on each region’s conditions and circumstances. However, he would like to teach the model to schools throughout the state, since the institute has a wealth of experience in developing a model and demonstrating that it works.

He has high hopes the state Legislature will give the TEA the funding it needs to provide these services to all Texas students. As he says, “Then we can get out of the business of running TWITR and into the business of teaching TWITR.”

Philips added that his team is currently working on developing TWITR-based training programs in the TexLa Telehealth ResourceCenter — a federally funded program design to provide technical assistance and resources to new and existing telehealth programs throughout Texas and Louisiana.

THE TWITR SOLUTION The revolutionary LPC component has worked well, and, while operations have been in place for several years now, Philips emphasized the program’s frequent evaluation including updates and maintenance.

“We’ve tried hard to keep it current, perfected and operated with a high degree of fidelity — we don’t want to miss a child who is seriously ill,” he said.

If you look at numbers, news articles and listen to news stations, our national situation is bleak. Mass shootings in general are increasing in number and intensity; bullying, truancy, detention and dropout rates are all areas of concern. However, in West Texas, there are people at TTUHSC who aren’t satisfied with the status quo — who are working around the clock on positive solutions to grim realities. The fight to foster optimal adolescent mental and behavioral health in West Texas and beyond is at hand. Philips, who calls himself an optimist, put it this way:

“It’s (TWITR) not about school shootings — it’s about the welfare of students.”

“However, I’m kind of a bandage in a way. I can stop the bleeding, but my care doesn’t extend beyond ‘first-aid’ care, which is why TWITR is so valuable to us.”



Read more about TTUHSC’s response to mental and behavioral health needs online at ttuhsc.edu/alumni/pulse.