## WHAT CAN PARENTS DO TO HELP?

Actions speak louder than words. Demonstrate your respect for human life in the way you treat your child.

Be more involved with your child's activities.

Be selective in choosing entertainment. Avoid excessively violent television, movies, and music. Avoid programming which displays people in a negative light.

Teach your child about the history of your family, stressing hardships that have been overcome and positive qualities of character inherent in your family.

Teach your child about his or her own unique nature and that no one can take his or her place.

Teach your child that pain and problems are temporary and that patience and endurance are positive aspects of mature character which can be learned only by experience. Teach your child about the dangers associated with drug and alcohol abuse.

Demonstrate how much value you place upon your child's life by responding to his or her legitimate needs with sensitivity, respect, and compassion. Hug your child and tell your child, "I love you."

BE A GOOD ROLE MODEL FOR YOUR CHILD!!

## HOW CAN YOU KNOW IF A PERSON MIGHT BE HAVING PROBLEMS?

Watch for changing patterns of appearance, performance, and behavior.

#### **WHAT ARE SOME CLUES?**

Deterioration in physical appearance and health;
Drop in grades;
Increase in tardiness, absenteeism;
Moodiness;
Withdrawing from or changing friends;
Possession of drugs or paraphernalia;
Odor of drugs or "cover-up" scents;
Talk of death or suicide;
Giving away possessions;
Sudden good mood, following a depression.

#### **HOW CAN I HELP?**

Watch for signs.

Listen; refrain from judging.

Encourage the person to talk to a trusted adult. Go with the person if necessary. Do NOT promise "not to tell." If you think it's serious, trust your feelings. Remember, you are not a counselor. Refer to the SAP Team if someone needs help.

## STUDENT ASSISTANCE PROGRAM



Mifflin County School District Federal Programs Office

> Strodes Mills ELEMENTARY SCHOOL

## WHAT IS THE STUDENT ASSISTANCE PROGRAM?

S.A.P. identifies students having difficulty in school because of problems related to substance abuse or emotional difficulties. The **Student Assistance Program** has many resources that can help students overcome difficulties, improve their outlook, and decrease barriers to learning.

#### **SAP IS**

An identification team An intervention team A referral team

#### **SAP IS NOT**

A counseling team A treatment team A discipline team

#### <u>Safe and Drug-Free Schools (SADFS)</u> <u>Program or Elementary (ESAP) Student</u> <u>Assistance Program</u>

A SADFS program and ESAP operates at the **elementary level**. Students demonstrating aggressive/violent behavior or students who are at high risk for future substance abuse and/or violent behavior may be referred to the respective ESAP team at the elementary building level.

## STUDENT ASSISTANCE TEAM MEMBERS AT YOUR SCHOOL

Frank W. Miller, Principal Brooke Marker, School Counselor Kim Tierney, School Psychologist Abbigail Richey, School Nurse Julie Yoder, Lead Teacher

## WHOM CAN YOU REFER TO SAP?

Any student who you think may be having problems may be referred. You may even refer yourself if you would like help.

#### WHO CAN MAKE REFERRALS?

Teachers, Counselors, Principals, Parents, Guardians, Relatives, Students, Community Members, Anyone Who Cares

## HOW DO YOU MAKE A REFERRAL?

Drop a referral form in the Main Office, or contact a SAP team member.

## WILL EVERYONE KNOW MY PROBLEMS?

NO! Strict rules of confidentiality apply to all phases of the Student Assistance Program, to those who refer others and to those who are referred. The only exception is if the student is in immediate danger of hurting himself/herself or someone else. Those who refer always remain confidential.

## School and Community Resources

Strodes Mills Elementary 248-7154 Youth Advocate Program, Inc. 514-8247 Clear Concepts 242-3070 Center for Behavioral Health 242-7264 Juniata River Center 248-8540 MC Children & Youth 248-3994

**Your Name: (Optional)** 

# Student Assistance Program Confidential Referral Form

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Date:
_
Student for whom you are concerned:
Reasons for your concern:

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Please place in the Counselor mailbox or return to the office.