Increase the Percent of SFUSD Students with a Caring Adult Relationship

The above chart shows the percentage of 7th, 9th, and 11th grade SFUSD students who reported having a caring adult relationship in the school environment between school years 2008-09 and 2015-16.

Data Definition & the San Francisco Trend line

Data for this indicator comes from the California Healthy Kids Survey (CHKS), a statewide survey of resiliency, protective factors, risk behaviors, and school climate. CHKS is administered to all local education agencies in the state of California. The chart above shows CHKS responses for San Francisco Unified School District (SFUSD) 7th, 9th, and 11th graders.

CHKS survey items used for this indicator ask whether youth have caring adults at the school they attend. As a result, the survey items used for this measure do not assess whether youth have caring adult relationships outside of the school they attend. The researchers who developed the CHKS note that the caring adult relationship survey items may not be the most accurate measure of the presence of a caring adult relationship. Much of the field research on the benefits of caring adult relationships goes beyond teachers and school staff to include a broad range of adults in the community. DCYF is considering the development/identification of a data source that measures caring adult relationships in the community.

In the 2015-16 school year, 36% of SFUSD 7th grade students reported that they had caring adult relationships in school, this represents a slight increase from 31% in 2008. In 2008, 27% of 9th grade students reported caring adult relationships - notably lower than 7th or 11th grade students. This number increased slightly in 2009 to 28% and stayed consistent through 2013, however in 2015 the percentage dropped to 24% - less than one quarter of students. In comparison, 11th grade students
were more likely to report a caring adult relationship at school. In 2008, 31% of 11th grade students had a caring adult relationship which declined slightly in 2009 to 29% and then returned to 31% in 2013. Mirroring 9th graders, the 11th grade students saw a decline in 2015, with 28% reporting a caring adult relationship in school. In each grade level, the differences between percentages reported year to year are slight. However, it is important to note that for all years, less than one third of youth reported a caring adult relationship in school.

**Story Behind the Curve**

Many factors influence whether youth report having a caring adult in their lives. The following section outlines some high level changes supported by City departments and SFUSD that are believed to support youth in developing caring adult relationships. Additional factors shown to affect the development of caring adult relationships are also included in this section.

**Policy and Practice Shifts in San Francisco**

**Mental Health Services Act.** In 2004 California voters approved the Mental Health Services Act (MHSA). MHSA provided funding to expand access to and delivery of mental health services throughout the state. The San Francisco Department of Public Health organized MHSA funding into seven service categories. Of the seven service categories, School-Based Mental Health Promotion and Mental Health Consultation & Capacity Building are most relevant to the development of caring adult relationships.

School-Based Mental Health Promotion is a collaboration of community-based organizations and San Francisco Unified School District (SFUSD) K-12 school campuses that applies best practices that address non-academic barriers to learning. Mental health consultation and capacity building services include case consultation, program consultation, training and support/capacity building for staff and parents, referrals for specialized services (e.g., developmental and learning assessments, occupational therapy, help with Individualized Education Plans, and psychotherapy), therapeutic play groups, direct psychotherapeutic intervention with children and families, crisis intervention, parent education and support groups, and advocacy for families.¹

**The Wellness Initiative.** A partnership established between DCYF, SFUSD, and DPH in 1999 led to the formation of the Wellness Initiative, which now provides a range of school-based mental health services to students at 19 San Francisco High Schools. Wellness Centers provide coordinated physical health, mental health, substance use and reproductive health education services to students in a safe and welcoming place. Additionally, Wellness Centers provide professional development for school staff on adolescent health, trauma, and social-emotional learning.²

**Mentoring for Success.** In 2005, SFUSD established a mentoring program in response to low rates of reported caring adult relationships and opportunities for meaningful participation in school and high rates of suspension. Mentoring for Success is a school based mentoring program that provides students with highly qualified and effective mentors who engage students in asset building activities to build skills for school success, improved attendance, and high self-esteem. In 2016 there were 690 students being mentored at 43 schools across San Francisco.³

**CORE Districts.** In 2013, San Francisco and five other California districts (Fresno, Long Beach, Los Angeles, Oakland, and Santa Ana) were granted a waiver from the federal accountability system, No Child Left Behind. In its place, the six districts – forming a consortium known as CORE – installed the
School Quality Improvement System. A key component of this new system is the School Quality Improvement Index (SQII), which measures school quality based on a variety of academic and non-academic metrics, including interpersonal relationships. The annual Culture-Climate Survey provides a key source of data for each school’s Balanced Score Card – a two-year plan for student achievement. School site administrators, school site councils, and leadership teams review survey data to make program decisions toward the goal of improving interpersonal relationships, which are addressed through Restorative Practices, Positive Behavioral Intervention Supports (PBIS), and partnerships with CBOs, among other strategies.

Safe and Supportive Schools Policy. In 2014 the SFUSD School Board adopted the Safe and Supportive Schools Resolution with the goal to transform the district’s approach to discipline that disproportionately affects minority youth to address disproportionality and disparities in the issuance of office referrals, suspensions, expulsion referrals, and expulsions. Through this resolution, SFUSD has committed to providing staff with tools to positively engage students through full implementation of School-Wide Positive Behavior Intervention and Support and Restorative Practices, including trauma-informed practices that establish high behavior expectations of students in a bias free and culturally competent school community.

Key Factors that Impact the Development of Caring Adult Relationships

Trauma/ACES - Adverse Childhood Experiences (ACEs) and other types of trauma can greatly impact how youth relate to others and can inhibit the development of healthy relationships. This is also true of adults, whose own experiences of trauma and/or lack of supportive relationships may impact their ability to develop caring relationships with youth. According to survey data, one in ten San Francisco youth have experienced three or more ACEs.

Access to Health Services - Youth with or without trauma who are experiencing unmet mental or physical health needs may have a difficult time engaging in school and thus connecting to potentially caring adults.

Teacher/Staff Context - In both school and community-based program settings, research shows that the ratio of teachers or staff to youth affects the development of relationships between youth and adults. When this ratio is high (many youth per adult) opportunities for one on one connection are limited, which in turn limits opportunities for trust-building and for youth and adults to get to know each other. Additionally, adults who interact with youth at school and in the community may have a harder time developing caring relationships when they are experiencing stress. A great deal of research supports the prevalence of stress and burnout among teachers and social service providers. The stress experienced by teachers and program staff is one contributing factor to high rates of turnover. When these adults leave their positions, the relationships they have built with youth are disrupted.

School Climate and Structure - School climate refers to the quality and character of school life. School climate is based on patterns of students’, parents’ and school personnel’s experience of school life and reflects norms, goals, values, interpersonal relationships, teaching and learning practices, and organizational structures. Caring adult relationships are interrelated to school climate; the presence of these relationships supports a positive climate and in turn, a culture that promotes caring more broadly supports the development of caring relationships between adults and students.
What Works: A Selection of Best Practices to increase the Development of Caring Adult Relationships

Research suggests that youth with strong relationships with a caring, non-parental adult is linked to improved academic outcomes, increased self-esteem, and decreased depression. The following is a collection of practices that have been shown to impact the development of caring adult relationships.

Professional Development for Teachers and Staff. Research indicates that professional development such as training, coaching, and supervision, is key to the development of positive relationships between youth and teachers, service providers, and volunteer mentors. Staff and teachers who are well versed in youth development, and understand the culture and background of the youth they serve are better able to building meaningful relationships. xi

Youth Programming Characteristics. School and community based programs that have the following characteristics have been shown to support the development of caring adult relationships: low youth to staff ratio; a developmental rather than prescriptive approach - providing youth with opportunities to choose activities; providing ample unstructured time for socializing, relationship and trust-building; employing and retaining staff in full-time (vs. part time) positions; hiring staff who have shared interests (and to a lesser extent shared cultural background) with youth. xiii

Mentorship. Mentors are able to help identify when a young person is in trouble, offer advice, share life experience, and help them navigate challenges and achieve goals. Studies have shown that high quality mentorship has a positive impact on absenteeism, college enrollment rates, career success, relationships and mental health. xiii

Selected References for more Information on the ‘Story Behind the Curve’ and highlighted ‘Best Practices’

i San Francisco Department of Public Health. Mental Health Services Act Programs.  
https://www.sfdph.org/dph/comupg/oservices/mentalHLth/MHSA/PEIServices.asp

ii San Francisco Wellness Initiative. https://sfwellness.org/


iv CORE is a nonprofit organization that seeks to improve student achievement by fostering highly-productive, meaningful collaboration and learning between its California’s largest school districts: Fresno, Garden Grove, Long Beach, Los Angeles, Oakland, Sacramento, San Francisco, and Santa Ana Unified. Together these districts serve more than one million students and their families.
http://coredistricts.org/core-index/

http://web.sfusd.edu/partners/ops/Resources%20for%20Schools%20and%20Districts%20Staff/SSS%20report%20May%204th%202012pm.pdf


