

Center News



***NEW AND UPDATED RESOURCES

See the full list of Center resources online at – <http://smhp.psych.ucla.edu>. All the resources can be downloaded from the website at no cost. Hardcopies can be ordered for the cost of copying and mailing.

** *Integrating Agenda for Mental Health in Schools into the Recommendations of the President’s New Freedom Commission on Mental Health* – Prepared by the two national centers focused on mental health in schools, this brief now has been revised based on the feedback from the field. Our thanks to all who provided feedback. Feel free to copy and share this with others. Let us know if there are leaders to whom you want us to send a copy. Contact: ltaylor@ucla.edu

** *Resource Synthesis to Help Integrate Mental Health in Schools into the Recommendations of the President’s New Freedom Commission on Mental Health* – This synthesis highlights a set of readily accessed online resources. The document was just revised based on feedback from the field. (Thanks to all who responded.) Feel free to copy and share this with others.

** *Youngsters’ Mental Health and Psychosocial Problems: What are the Data?* – A common request to Centers such as ours is for info about the prevalence and incidence of youngsters’ problems. This report provides a synthesis of the best data and clarifies the limitations of what has been gathered so far.

** *Mental Health of Children and Youth: The Important Role of Primary Care Health Professionals* – This brief report is intended for primary care health providers. Specifically, it underscores why MH is a basic concern in the practice of all health professionals, sketches a broad definition of MH that focuses on strengths as well as problems, outlines a continuum of interventions, and highlights considerations related to working with families, schools, and communities.

Change is inevitable, progress is optional.

** *Mental Health of Children and Youth and the Role of Public Health Professionals* – This brief report highlights: a) why the mental health of children and youth is a major public health concern, b) the importance of viewing causal factors from a broad perspective, c) a continuum of intervention strategies for addressing the full range of problems, d) some considerations related to mental health promotion and prevention, e) a note about screening, and f) the value of connecting with schools.

** *Addressing Barriers to Learning: A Comprehensive Approach to Mental Health in Schools* – This continuing education module is designed as a direct aid for training leaders and staff and as a resource that can be used by them to train others. While accounting for individual case-oriented approaches to providing services, the emphasis is on a *systems* approach to enhancing mental health in schools. In particular, the focus is on pursuing the need for better mental health interventions within the context of moving toward a comprehensive, integrated approach to addressing barriers to student learning and promoting healthy development.

** *Revisiting Learning & Behavior Problems: Moving Schools Forward* – Between the covers of this book, you will find a big picture overview of what’s wrong with the way schools address learning and behavior problems, frameworks for rethinking current policy and practice and for moving in new directions, and specific practices for making schools more effective. Along the way, we stress how schools, families, and communities must collaborate to get there from here. Our approach involves analyses, commentary, conceptualizations, examples, and opinions.

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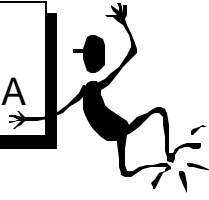
Let us know what you need. New resources can be developed and best practices identified. Also, let us know about the latest and greatest you encounter so we can update our resources and our colleagues across the country.

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Education is a method whereby one acquires a higher grade of prejudices.
Laurence J. Peter

Center Staff:
Howard Adelman, Co-Director
Linda Taylor, Co-Director
Perry Nelson, Coordinator
... and a host of graduate and undergraduate students

Where it's Happening Legislation Introduced in CA



California's Assembly Speaker Pro Tem, Leland Yee, has introduced a bill (AB 2569) to include the concept of a "**Comprehensive Pupil Learning Support System**" in the state's Education Code. The current version of the bill can be accessed online at http://www.leginfo.ca.gov/pub/bill/asm/ab_2551-2600/ab_2569_bill_20040220_introduced.pdf

Why Such Legislation is Needed

- C To date, the manner in which state law (in every state but Hawaii) addresses learning supports has resulted in a marginalized and fragmented set of activities at school sites (e.g., see the many categorical programs and related personnel and the multiple categories of pupil personnel services).
- C The problem has been compounded by legislation to connect community resources to schools.
- C In terms of resource use at the school level and at all other system levels, the result is gross inefficiencies in organization and daily operations (e.g., redundancy in resource use, poor coordination, failure to achieve economies of scale, counterproductive competition for sparse resources, and almost no accountability for the direct outcomes the resources are allocated to achieve). The problem is recognized but not effectively addressed by efforts to enhance program and service coordination.
- C In terms of impact on students, the result has been to limit effectiveness significantly in addressing barriers to learning and teaching – especially for students with learning, behavior, and emotional problems.

What the Legislation Intends

“CHAPTER 6.4. **Comprehensive Pupil Learning Support System** 52060. (a) There is hereby established the Comprehensive Pupil Learning Support System (CPLSS). The CPLSS shall be implemented and administered by the department through existing resources that are available to the department for those purposes. (b) It is the intent of

the Legislature in establishing the CPLSS to provide all pupils with a support system to ensure that they will be productive and responsible learners and citizens. It is further the intent of the Legislature that the CPLSS ensure that pupils have an equal opportunity to succeed at school and to do so in a supportive, caring, respectful, and safe learning environment. (c) These goals shall be accomplished by involving pupils, teachers, pupil support professionals, family members, and other school and community stakeholders in the development, daily implementation, monitoring, and maintenance of a learning support system at every school and by braiding together the human and financial resources of relevant public and private agencies.”

Where's the Money?

First steps in developing a comprehensive learning support system would be made by reworking how current student support resources are used. This would encompass:

- C reframing the roles and functions of existing student support staff
- C reducing fragmentation and redundancy
- C reducing the overemphasis on expensive services. (As the in-classroom and school-wide approaches emerge, the need for out-of-classroom referrals will decline. This allows for rapid and early response when a student is having problems, and it enables student support staff to work more effectively in linking students up with community services.)

The systemic changes needed can be underwritten in many districts through the provisions in the *No Child Left Behind Act* and in the *Individuals with Disabilities Education Act* that allow use of some allocated funds to integrate programs and services. For example, funds can be used for a facilitator to enhance systems for student support in ways that lead to a comprehensive, integrated, and cohesive component at school, cluster, and district levels.

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The bill's author, Assembly Speaker Pro Tem Leland Yee, has asked that letters of support be sent to him at the following address:

Assemblymember Leland Yee
State Capitol, Room 3173
Sacramento, CA 95822

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Lessons Learned

Implementing a Student Learning Support System



Note: Hawai'i's schools know that leaving no student behind requires a three component approach to school improvement: (1) strengthening instruction, (2) building a comprehensive student support system, and (3) redesigning management and governance practices. The state's policy commitment to develop a *systemic* and nonmarginalized approach to student support makes it a pioneer. A key facet of the work stresses introduction of a resource-oriented infrastructure mechanism called the CSSS Cadre. The following description is excerpted from a brief by Dr. Shannon Simonelli, entitled *The CSSS Cadre: A Vital Mechanism for Coordinating Resources to Implement a School's Comprehensive Student Support System*.

As part of its continuing commitment to help schools develop an effective Comprehensive Student Support System (CSSS), the Hawai'i Department of Education is encouraging establishment of a CSSS cadre at each school. A key step in helping schools do so has involved providing targeted training to eight model schools across the state. These sites provided others an opportunity to observe, discuss, and learn from their successes and challenges as they each strove to establish CSSS Cadres.

As part of its CSSS infrastructure, every school uses a team approach to focus on the needs of individual students/families (e.g., a student support team, an IEP team). These student-centered teams focus on such functions as referral, intervention, and care monitoring or management.

In contrast to this case-by-case focus, a school's CSSS cadre takes responsibility for coordinating resources on a school-wide level to address barriers to learning and promote healthy development. This includes analyzing how existing resources are used and clarifying how they can be used even more synergistically and effectively.

Who participates in the CSSS Cadre?

Theoretically, when there are two people, you have a group. The CSSS cadre can begin with only two people and expand into an inclusive group of informed stakeholders who are able and willing. An effective Cadre draws from various stakeholders.

These school-wide resource coordinating cadres may have a small core group with various others included as needed. As schools continue to build their CSSS cadre, they consider the following players:

Principal/VP; counselor; service coordinator; school nurse, psychologist, social worker; behavioral health therapist; School Renewal Specialist; literacy, special education, and regular education teachers; representatives of parents and community agencies involved regularly with the school; student representation (when appropriate and feasible); and others who have a particular interest and ability to help with the functions.

It is important to integrate the CSSS cadre with the existing school infrastructure. For example, the team must be represented at administrative . . . and governance meetings, at Quality Assurance meetings, and at other appropriate complex level meetings.

What are the functions of the CSSS Cadre?

The CSSS Cadre performs essential functions related to the implementation and ongoing development of a school's Comprehensive Student Support System. Examples of key functions are:

- C Mapping, identifying, and analyzing resources at the school and in the community
- C Coordinating and integrating school resources & connecting with community resources
- C Recommending how resources should be deployed and redeployed
- C Developing strategies for enhancing resources
- C Identifying the most pressing program development needs at the school
- C Establishing priorities, planning, and facilitating ways to strengthen programs and developing new ones
- C "Social marketing" (e.g., a brochure or fact sheet about parent involvement offerings)

These functions are pursued within the frameworks that outline the six curriculum content areas of CSSS (classroom-focused enabling, home involvement, student and family assistance, crisis assistance and prevention, community outreach, and support for transitions) and the five level continuum of care (basic, informal, individualized, specialized, and intensive supports). Both components are needed to develop a comprehensive continuum of multifaceted programs and services that are integrated fully into the fabric of the school.

The Parable of a Boy and a Bully

In a school where bullying was common, one ringleader and his followers set out to harass a student who was heavier than most. "We can have some fun by calling him "Fatso," he said.

Day after day in the schoolyard the gang sought the boy out. "Fatso! Fatso!" they hooted at him. The boy took the matter so much to heart that he began to brood and spent sleepless nights over it. Finally, out of desperation, he told his teacher about the problem, and together they evolved a plan.

The following day, when they jeered at him, he told them:

From today on I'll give any of you who calls me "fatso" a quarter.

Then he put his hand in his pocket and, indeed, gave each boy a quarter. Well, delighted with their booty, of course the youngsters sought him out the following day and began to shrill, *Fatso! Fatso!*

The boy smiled at them. He put his hand in his pocket and gave each of them a dime, saying,
A quarter is too much – I can only afford a dime today.

Well, the boys went away satisfied because, after all, a dime was money too. However, when they came the next day to hoot, the boy gave them only a penny each.

Why do we get only a penny today? they yelled. . . . That's all I can afford, the boy said.

But two days ago you gave us a quarter, and yesterday we got a dime. It's not fair!

Take it or leave it. That's all you're going to get.

Do you think we're going to call you "Fatso" for one lousy penny?

So don't, the boy said. . . . And they didn't.

Moral: In the long run, bullying doesn't pay very well.

(Adapted from a fable presented by Ausubel, 1948)

Please see the insert and take a few minutes to help us with our yearly impact evaluation.

**School Mental Health Project/
Center for Mental Health in Schools
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Los Angeles, CA 90095-1563
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The Center for Mental Health in Schools is co-directed by Howard Adelman and Linda Taylor and operates under the auspices of the School Mental Health Project in the Dept. of Psychology, UCLA. Support comes in part from the Office of Adolescent Health, Maternal and Child Health Bureau, Health Resources and Services Administration. Co-funding comes from the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration. Both HRSA and SAMHSA are agencies of the U.S. Dept. of Health and Human Services.

How useful were any of these resources to you?

	TA/ Consultation	Training	Resource Materials*	Electronic Newsletter (ENEWS)	Quarterly Hardcopy Newsletter	Practitioners Listserv	Leadership Summit on New Directions for Student Support	Other Networking Facilitation**	Support for Program/ Initiative Enhancement	Support for Systemic Changes
Not at all										
A Little										
Somewhat										
Quite a Bit										
Not Used										

Your Capability Related to:

What has been the short-term impact or what impact do you anticipate?

	TA/ Consultation	Program Development	Practice	Policy	Training	Research	Networking	Initiating New Approaches & Ideas	Infrastructure Development	General Capacity Building
None										
A Little										
Somewhat										
Quite a Bit										
Not Yet										

What has been the longer-term impact?

	TA/ Consultation	Program Development	Practice	Policy	Training	Research	Networking	Initiating New Approaches & Ideas	Infrastructure Development	General Capacity Building
None										
A Little										
Somewhat										
Quite a Bit										
Not Yet										

*Resource materials refers to resource packets and aids, fact sheets, practice notes, guidebooks, concept papers, statements of principles and guidelines, critical issue and policy reports, continuing education modules, special training aids, published articles, chapters, and books, products related to research and development
 **Networking facilitation refers to opportunities created by the Center for interacting at regional and national meetings, through participation in coalitions and special cadres, through Center operated listservs, through task workgroups and other collaborative connections, etc.

Ways in which you have had contact with the Center: *(check all that apply)*

- Website
- Listserv (e.g., ENEWS, MH Practitioners, Policy Makers)
- Received direct mail or email
- Had contact at a presentation or special meetings
- Center staff came to us
- Center materials, special reports, publications, etc. came to us indirectly (e.g., shared by a colleague)
- We visited Center and/or a site with which the Center works
- Other (specify) _____

Satisfaction with Center *(circle rating)*

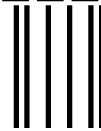
How easy was it to access the Center's resources?	Not at all	Somewhat	Very	Extremely Easy
How timely and appropriate was the Center's response to your requests?	Not at all	Somewhat	Very	Extremely Responsive
How well did the Center meet your needs?	Not at all	Somewhat	Very	Extremely Well

Based on your experience with the Center, would you use it again and/or recommend that others make contact?

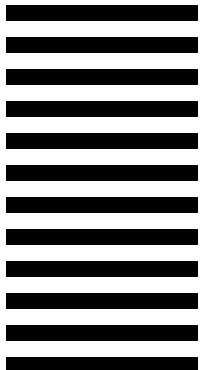
Yes No

Other comments?

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