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***COALITION FOR COHESIVE POLICY IN
ADDRESSING BARRIERS TO
DEVELOPMENT & LEARNING***

The Policy Problem and a Resolution to Guide
Organizations Working Toward Policy Cohesion

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COALITION FOR COHESIVE POLICY IN ADDRESSING BARRIERS TO DEVELOPMENT AND LEARNING

The Policy Problem and a Resolution to Guide Organizations Working toward Policy Cohesion

The Policy Problem:

No comprehensive, multifaceted, and integrated continuum of interventions exists for addressing barriers to development and learning

A comprehensive, multifaceted, and integrated continuum of interventions is needed to address barriers* to development and learning in order to enable good school instruction and positive opportunities for child and youth development. Such an approach is essential in enabling (a) many schools to enhance their effectiveness and (b) many homes and communities to improve the general well-being of youngsters. At present, there is no policy framework for establishing such a comprehensive and unified approach.

Existing efforts are too marginalized, limited, and fragmented

One of the major deficiencies in current policy is the tendency to marginalize concerns about addressing barriers to development and learning, especially in discussions of school reform. This has resulted in initiatives that are too limited in nature and scope to counter such barriers effectively. Because existing policies have been enacted in an ad hoc and piecemeal manner, intervention practices are fragmented.

Existing policy needs to be reworked to weave current community and school reform initiatives into a cohesive approach

Existing policies and practices must be revisited with the aim of weaving school and community initiatives into a cohesive continuum of interventions. Furthermore, concerns about addressing barriers to development and learning warrant a higher level of policy priority so that interventions can be expanded, as necessary and feasible, to ensure that neighborhoods and schools can create, implement, and maintain comprehensive, multifaceted, and integrated approaches.

*The term “barriers” encompasses all external and internal factors that interfere with development and includes such factors as community and school violence, problems in the home, racial and ethnic conflicts, substance abuse, the inequities in opportunity arising from poverty, poor health, and disabilities. The type of comprehensive, multifaceted, and integrated continuum that is required to address such a range of barriers is illustrated in the attached Exhibits.

Working toward Policy Cohesion: A Resolution to Guide Organizations

It is the intent of organizations participating in the *Coalition for Cohesive Policy in Addressing Barriers to Development & Learning* to play a significant role in evolving the type of comprehensive, multifaceted, and integrated approaches that are essential for meeting the complex needs of the society and its citizens. Each participant recognizes that accomplishing this aim requires ending the marginalization and fragmentation of policies, practices, and research related to addressing barriers to development and learning. Thus, each organization strives to pursue its specific mission in ways that are consistent with enhancing comprehensive and cohesive approaches. In working toward these ends:

I. Each participating organization resolves to

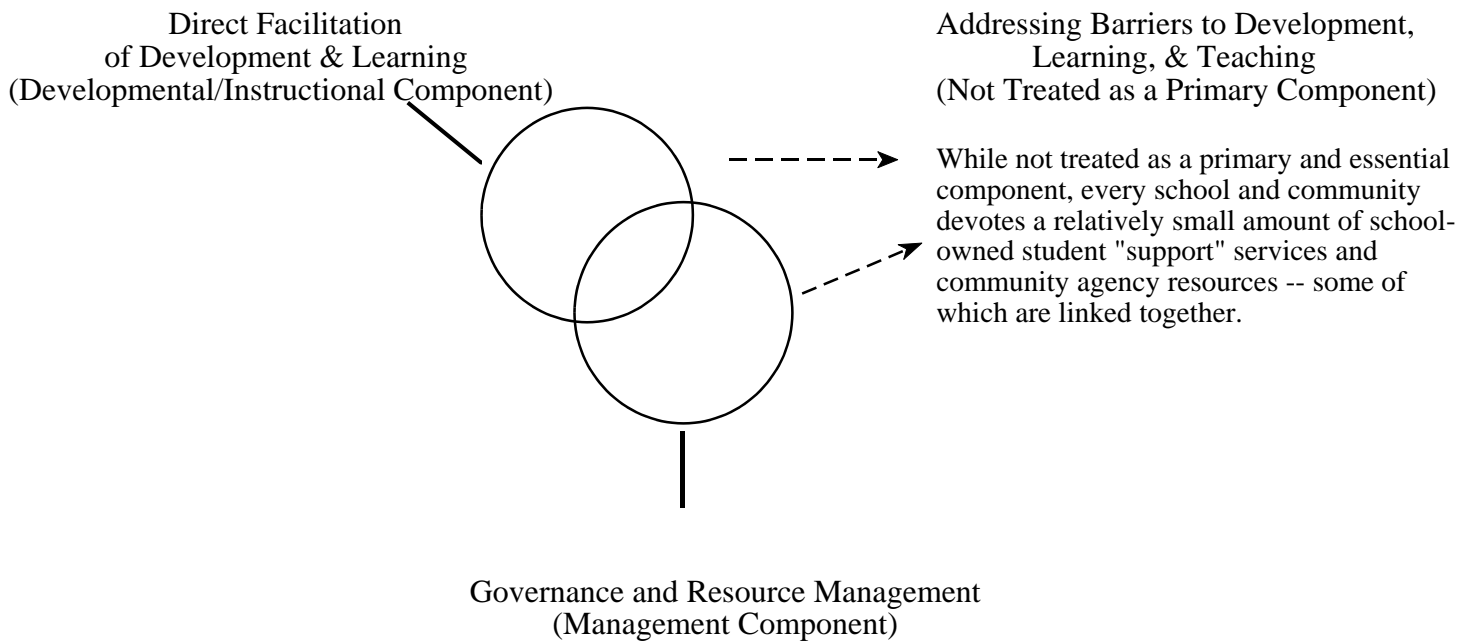
- conduct an ongoing review (mapping and analysis) of its current policies and initiatives with the objective of enhancing cohesiveness and identifying gaps
- rework existing policy and initiatives to ensure they are conceived and implemented in a cohesive manner,
- ensure new policies and initiatives are designed to enhance comprehensive and cohesive approaches.

II. At the same time, each participating organization resolves to encourage policy makers at all levels to

- review (map and analyze) their current policies and initiatives with the objective of enhancing cohesiveness and identifying gaps related to addressing barriers to development and learning,,
- rework existing policy and initiatives to ensure they are conceived and implemented in a cohesive manner,
- ensure all proposed policies and initiatives are designed to enhance comprehensive and cohesive approaches,
- elevate the priority assigned to addressing barriers to development and learning so that such efforts are treated as a primary and essential facet of existing initiatives to reform schools and community agencies,
- adopt a unifying component and an overarching framework to guide local development of a comprehensive, multifaceted, and integrated continuum of school and community interventions for addressing barriers to development and learning (see attached illustrations -- Exhibits A, B, and C),
- provide appropriate support for capacity building, over time, to ensure that existing and new initiatives can be evolved into such a component at the neighborhood/school level.

Exhibit A

A Two Component Model for Reform and Restructuring



A Three Component Model for Reform and Restructuring

Establishes a component for addressing barriers to learning and development which is treated as primary and essential and which weaves together school and community resources to develop comprehensive approaches for doing so

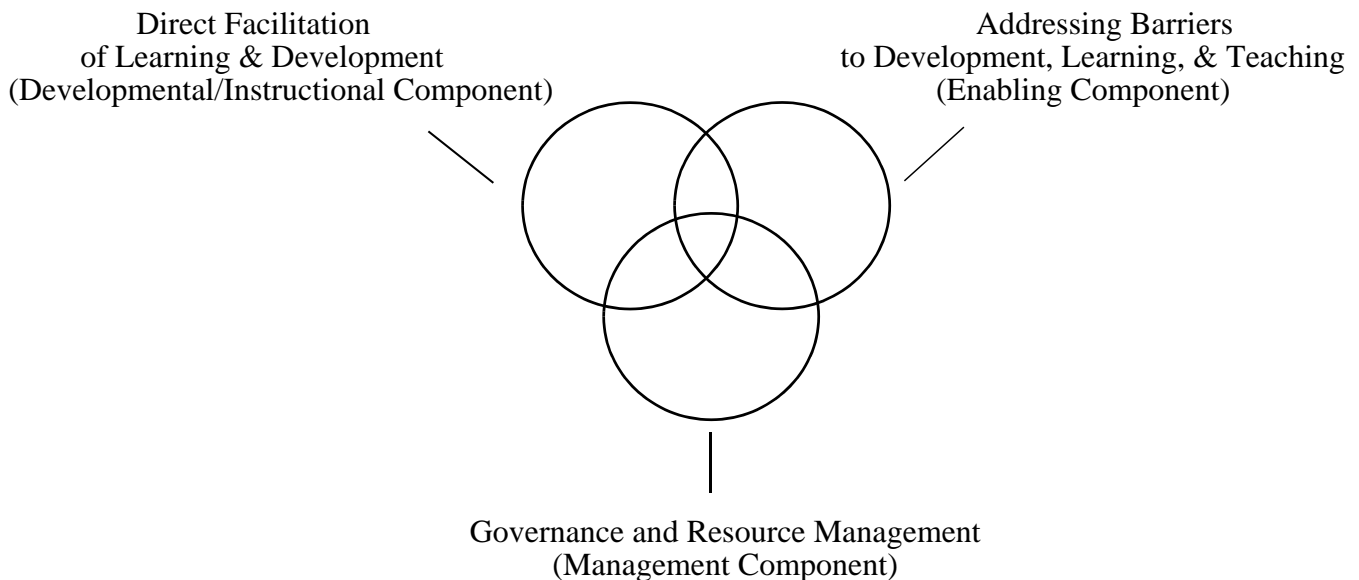


Exhibit B. From primary prevention to treatment of serious problems: A continuum of community-school programs to address barriers to learning and enhance healthy development.

***Intervention
Continuum***

Examples of Focus and Types of Intervention

(Programs and services aimed at system changes and individual needs)

**Primary
prevention**

1. *Public health protection, promotion, and maintenance to foster opportunities, positive development, and wellness*

- economic enhancement of those living in poverty (e.g., work/welfare programs)
- safety (e.g., instruction, regulations, lead abatement programs)
- physical and mental health (incl. healthy start initiatives, immunizations, dental care, substance abuse prevention, violence prevention, health/mental health education, sex education and family planning, recreation, social services to access basic living resources, and so forth)

2. *Preschool-age support and assistance to enhance health and psychosocial development*

- systems' enhancement through multidisciplinary team work, consultation, and staff development
- education and social support for parents of preschoolers
- quality day care
- quality early education
- appropriate screening and amelioration of physical and mental health and psychosocial problems

**Early-after-onset
intervention**

3. *Early-schooling targeted interventions*

- orientations, welcoming and transition support into school and community life for students and their families (especially immigrants)
- support and guidance to ameliorate school adjustment problems
- personalized instruction in the primary grades
- additional support to address specific learning problems
- parent involvement in problem solving
- comprehensive and accessible psychosocial and physical and mental health programs (incl. a focus on community and home violence and other problems identified through community needs assessment)

4. *Improvement and augmentation of ongoing regular support*

- enhance systems through multidisciplinary team work, consultation, and staff development
- preparation and support for school and life transitions
- teaching "basics" of support and remediation to regular teachers (incl. use of available resource personnel, peer and volunteer support)
- parent involvement in problem solving
- resource support for parents-in-need (incl. assistance in finding work, legal aid, ESL and citizenship classes, and so forth)
- comprehensive and accessible psychosocial and physical and mental health interventions (incl. health and physical education, recreation, violence reduction programs, and so forth)
- Academic guidance and assistance
- Emergency and crisis prevention and response mechanisms

5. *Other interventions prior to referral for intensive, ongoing targeted treatments*

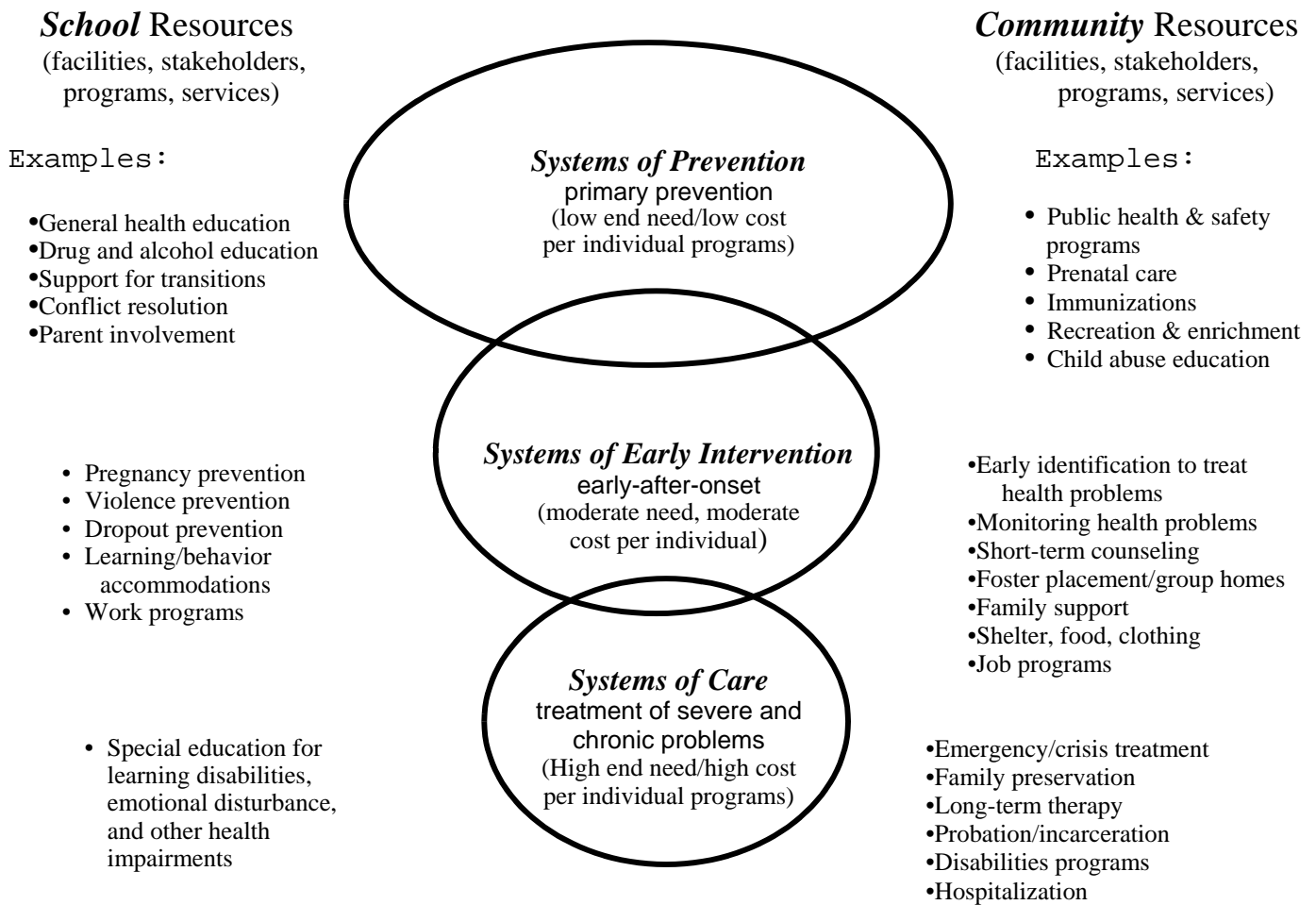
- enhance systems through multidisciplinary team work, consultation, and staff development
- short-term specialized interventions (including resource teacher instruction and family mobilization; programs for suicide prevention, pregnant minors, substance abusers, gang members, and other potential dropouts)

**Treatment for
severe/chronic
problems**

6. *Intensive treatments*

- referral, triage, placement guidance and assistance, case management, and resource coordination
- family preservation programs and services
- special education and rehabilitation
- dropout recovery and follow-up support
- services for severe-chronic psychosocial/mental/physical health problems

Exhibit C. Comprehensive, Multifaceted, Integrated Continuum of School and Community Programs & Services



Systemic collaboration* is essential to establish interprogram connections on a daily basis and over time to ensure seamless intervention within each system and among *systems of prevention, systems of early intervention, and systems of care.*

- *Such collaboration involves horizontal and vertical restructuring of programs and services
- (a) within jurisdictions, school districts, and community agencies (e.g., among departments, divisions, units, schools, clusters of schools)
 - (b) between jurisdictions, school and community agencies, public and private sectors; among schools; among community agencies