

ENEWS: A Monthly Forum for Sharing and Interchange

November, 2003 (Vol. 8 #2)

Source: UCLA SCHOOL MENTAL HEALTH PROJECT/
CENTER FOR MENTAL HEALTH IN SCHOOLS

WHAT IS ENEWS? (For those who don't know) This is another link for those concerned with enhancing policies, programs, and practices related to addressing barriers to student learning and to promoting mental health in schools. It augments the other ways our Center shares information and facilitates interchange/networking.

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Feel Free to Forward This to Anyone

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WHAT'S HERE THIS MONTH

**Emerging Issue

>Different Agendas for Mental Health in Schools

**News from Around the Country

**This Month's Focus for Schools to Address Barriers to Learning

>November: Responding to referrals in ways that can "stem the tide"

**Recent Publications Relevant to

>Children's Mental and Physical Health

>Family, Community & Schools

>Policy, Law, Ethics, Finances & Statistics

>Major Outcome Evaluations

**Upcoming Initiatives, Conferences, Workshops

**Calls for Grant Proposals, Presentations, & Papers

**Updates from the two National Centers focusing on Mental Health in Schools

**Other Helpful Resources

**Requests/Information/Comments/Questions from the Field

**Training & Job Opportunities (including fellowships and scholarships)

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To post messages to ENEWS, E-mail them to smhp@ucla.edu

If you were sent ENEWS indirectly, you can be added to our list at no charge by sending an E-mail request to Listserv@listserv.ucla.edu. Leave the subject line blank and in the body of the message type Subscribe mentalhealth-L.

To remove your name from the mailing list type Unsubscribe mentalhealth-L.

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**Emerging Issue

>>Different Agendas for Mental Health in Schools

Around the country, indeed, around the world folks are talking about mental health in schools. But what's being talked often differs in fundamental ways. This not only tends to confuse many stakeholders, it seems to be a source of increasing conflicts in the field.

The differences can be traced to the fact that the enterprises being discussed differ. This leads to varying perspectives and attitudes related to mental health in schools. In turn, this results in divergent agendas for policy, practice, research, and training.

It would help if folks using the term took some time to clarify, analyze, and discuss the implications of different agendas. To catalyze such activity, we have tried to group agendas in terms of the primary interests of various parties with respect to mental health in schools. We come up with seven major interests at work each of which can be subdivided. (While some are complementary, many are not. Thus, it is not surprising that competing interests come in conflict with each other.) Here's how we group the different interests:

- (1) Efforts to use schools to increase access to kids and their families for purposes of
 - (a) conducting research related to mental health concerns
 - (b) providing services related to mental health concerns.
- (2) Efforts to increase availability of mental health interventions
 - (a) through expanded use of school resources
 - (b) through co-locating community resources on school campuses
 - (c) through finding ways to combine school and community resources.
- (3) Efforts to get schools to adopt/enhance specific programs and approaches
 - (a) for treating specific individuals
 - (b) for addressing specific types of problems in targeted ways
 - (c) for addressing problems through school-wide, "universal" interventions
 - (d) for promoting healthy social and emotional development.
- (4) Efforts to improve specific processes and interventions related to mental health in schools (e.g., improve systems for identifying and referring problems and for case management, enhancing "prereferral" and early intervention programs)

- (5) Efforts to enhance the interests of specific disciplines, contractors, businesses, etc. that are
 - (a) already part of school budgets
 - (b) seeking to be part of school budgets.

- (6) Efforts to change (e.g., rethink, reframe, reform, restructure) the way student supports are conceived at schools
 - (a) through enhanced focus on multi-disciplinary team work (e.g. among school staff, with community professionals)
 - (b) through enhanced coordination of interventions (e.g., among school programs and services, with community programs and services)
 - (c) through appropriate integration of interventions (e.g., that schools own, that communities base or link with schools)
 - (d) through modifying the roles and functions of various student support staff
 - (e) through developing a comprehensive, multifaceted, and cohesive component for systematically addressing barriers to student learning at every school.

- (7) Efforts to reduce school involvement in mental health programs and services (e.g., to maximize the focus on instruction, to use the resources for youth development, to keep the school out of areas where family values are involved).

To begin the discussion, let us know what your primary interest is and your concerns about areas of conflicting agendas. (email ltaylor@ucla.edu)

Or you can contact us by phone (310/825-3634) Toll Free (866-846-4843) or fax (310/206-8716) Or Write: Center for Mental Health in Schools Department of Psychology, UCLA, Los Angeles, CA 90095-1563

We look forward to your comments. We will post them on our website's Net Exchange <http://smhp.psych.ucla.edu> for others to read and respond.

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**NEWS FROM AROUND THE COUNTRY

>ABOUT SUBSTANCE USE

>>Researcher asks:

"HOW MUCH TEEN-AGE DRUG USE IS ACCEPTABLE TO THE NATION?"

"Despite a two percent increase, the number of students using illegal drugs during the 2002-2003 school year remained consistent with the past five year average of 24% annual use and slightly lower than the 10 year average of 26%, according to the Pride Survey, the nation's largest, independent assessment of adolescent drug use, violence and other behaviors...' The question is how much teen-age drug use is acceptable to the nation,' said Dr. Thomas J. Gleaton, author of the study. 'If

one in four teens using drugs is acceptable, we have done well in controlling drugs over the past decade. If a quarter of our youth on drugs is unacceptable, we need stronger action to truly dent teen problems." (<http://www.pridesurveys.com>)

>>HYPOCRISY IN EFFORTS TO WARN STUDENTS ABOUT DRUG ABUSE????

"Drugs are bad, except when they're good... As adolescents in America experiment with drugs at every younger ages, the adults around often counter with dramatic presentations of the dangers of illegal drug use. But coming from with in a culture saturated with drugs yet also terrified of them, adults themselves may not understand how contradictory and confusing their guidelines can sound. For instance, kids are often told: Illicit drugs are bad and you should never do them; prescription drugs are fine and can be counted on to enhance fitness and happiness as long as a doctor prescribed them..." (Christian Science Monitor 9/30/03)

>SCHOOL-RELATED STORIES WITH IMPLICATIONS FOR THE MENTAL HEALTH AND GENERAL WELL-BEING OF STUDENTS AND SCHOOL STAFF.

>>LOCKED OUT AT A YOUNG AGE

From OP-Ed Columnist Bob Herbert: "...The latest data coming out of Chicago, which is roughly representative of conditions in other major urban areas, is depressing. The city's dropout rate is reportedly at an all-time high. And 22 percent of all Chicago residents between the ages of 16 and 24 are out of school and out of work. The term being used to describe these youngsters who have nothing very constructive to do with their time is 'disconnected youth.'...An incredible 45 percent of black men in Chicago aged 20 to 24 are out of work and out of school...There are nearly 100,000 people aged 16 to 24 who are out of school and out of work in Chicago, and about 5.5 million across the U. S. Instead of sending them a lifeline, we are making it ever more difficult for them to reconnect to the educational establishment and the job market. The recent increased federal involvement in the nation's public schools is having the perverse effect of driving up dropout rates as school administrators try to pump up their high-stakes test results by getting rid of struggling students..." (The New York Times 10/20/03)

>>LEARNING GAP STUDENTS FACE DOWNWARD SPIRAL

The Kentucky state Commission on Human Rights reports that too many students face a "downward spiral of high drop-out rates, poor job and life skills, and an overall low quality of life." The study is based on an analysis of 2001-2 CATS scores in 12 districts. "According to the report, disabled students had an average gap in scores of 25 percent or more overall compared to non-disabled students. Low-income students, as measured by those receiving free and reduced lunches, were less likely than their higher income counterparts to score proficient or higher on state tests; the gap was 20 percent. Between white students and their black and Hispanic peers, gaps were about 15 percent, double that in some subjects..."

(Herald-Leader 9/29/03)

>>LARGE DISTRICTS WHAT ARE THE MH IMPLICATIONS?

Although they represent less than 1% of all school districts in the U.S.A., the 100 largest public school district are responsible for the education of 23% of all public school students. The students they enrol are 69% minority and 54% low income (compared to 41% minority, 40% low income for all districts). Florida, Texas, and California account for 41% of the 100 largest districts. National Center for Education Statistics (<http://nces.ed.gov>)

>>LUNCH AT 9:21 -- AND STUDENTS ARE THE SARDINES

"John F. Kennedy High School, a sprawling eight-story building in the Bronx, has 4,590 students this year, 1,200 more than last. Lunch starts at 9:21 a.m. , and all three of the cavernous cafeterias are packed until it ends more than five hours later... At DeWitt Clinton High School in the Bronx, which has 4,600 students, 700 more than last year, the principal has given up her office for the first three periods of the day so that Latin and special education classes can be held there... At Christopher Columbus High School in the Bronx, which has 3,700 students, about 200 more than last year and 500 more than the year before, officials scrapped plans for overlapping sessions and took the drastic step of splitting the school into two separate shifts... Most upperclassmen go to school from 7:05 a.m. until 12.21 p.m., while most freshmen attend from 12:30 p.m. until 5:46 p.m..." (The New York Times, 10/14/03)

>>THE LAW DEMANDS HIGHLY QUALIFIED TEACHERS, BUT . . .

From the California Commission on Teacher Credentialing about reporting on the challenges districts face in trying to come into compliance with new federal law requiring "highly qualified" teachers: Districts are being forced to release teachers hired on emergency credentials. However, because there are not enough "qualified" teachers to replace them, districts say they will be forced to hire substitutes, who are permitted to serve just 30 days at a stretch. "Some districts already are hiring as substitutes those they laid off as emergency credentialed teachers."(Los Angeles Times 10/3/03)

>>TEACHERS WANT TO END MEDICAL DUTIES

"...Everyday in Jefferson County Public Schools, secretaries and teachers do the work that school nurses once did, providing an array of medicine and medical care to students. But they'd like that to stop." District teachers have filed a class-action grievance. The union argues, in part, that a section of the teachers' contract keeps them from having to do work out of their field. The district argues that the health and welfare of children are within teachers' role. (Courier-Journal, Louisville, KY)

(Note: see our website What's New, for a current news item posted each week.)

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"We are facing an unrecognized educational crisis in this country. Our wide and sometimes growing achievement gap confirms that we live with a two-tiered education system....We can no longer close our eyes and ignore the children who are being left behind." Rod Paige

(Cited in 10/08/03 Press Release announcing a series of measures to help promote educational excellence in secondary education)

"It's not mental illness, seething anger, a violent society or access to guns that makes teenagers open fire in a school. It's all of that and something more, experts say... A study of 37 school shootings from 1974-2000 by the U. S. Secret Service and the U. S Department of Education found that more than half the time, revenge was cited as a motive..." Star Tribune 9/26/03

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****MONTHLY FOCUS FOR SCHOOLS TO ADDRESS BARRIERS TO LEARNING**

Schools have a yearly rhythm changing with the cycle and demands of the school calendar. School staff can anticipate and plan for these predictable challenges and in doing so strengthen promotion of mental health, as well as prevention and early intervention of problems. See each of the 12 monthly themes for developing a proactive agenda online at <http://smhp.psych.ucla.edu> They also have been compiled into a document that can be downloaded at no cost.

The theme for November is: Responding to Referrals in Ways that Can "Stem the Tide." For details about this theme, see the section of this electronic newsletter that presents updates from our Center or go to the website.

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"Life is easier than you think; all that is necessary is to accept the impossible, do without the indispensable, and bear the intolerable."

Kathleen Norris

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****RECENT PUBLICATIONS (IN PRINT AND ON THE WEB)**

>CHILDREN'S MENTAL AND PHYSICAL HEALTH

"Who first suggests the diagnosis of attention-deficit/hyperactivity disorder?" (2003) L. Sax and K. Kautz. Annals of Family Medicine, 1:171-174.

"Effects of recess on the classroom behavior of children with and without attention-deficit hyperactivity disorder" (2003) CA. Ridgway, et al. School Psychology Quarterly, 18(3) 253-268.

"Bullying Prevention is Crime Prevention" (2003) <http://www.fightcrime.org>

"Moral emotions and bullying: A cross-national comparison of differences between bullies, victims and outsiders" (2003) E Menesini et al. Aggressive Behavior, 29(6) 515-530.

"What types of support do they need? Investigating student adjustment as related to emotional, information, appraisal, and instrumental support" (2003) C. Malecki and M. Demaray. School Psychology Quarterly, 18(3) 231-252.

"Trauma and violence in childhood: A U.S. Perspective" (2003) R Anderson, et al. Psychiatric Times, XX(10).

"Geographic disparities in children's mental health care" (2003) R Sturm, et al. Pediatrics 112(4) 308.

"An experimental study of the effectiveness of in-home crisis services for children and their families: Program outcomes". (2003) M. Evans, et al. Journal of Emotional and Behavioral Disorders, 11(2) 92-102. Summarized at http://rtckids.fmhi.usf.edu/rtcpubs/datatrends/summary_89.pdf

"Toward a healthy future: Medicaid Early and Periodic Screening, Diagnostic and Treatment Services for poor children and youth" (2003) National Health Law Program (<http://www.healthlaw.org>)

"Treating adolescents for substance abuse and comorbid psychiatric disorders" (2003) P. Riggs <http://www.drugabuse.gov/perspectives/index.html>

"Characteristics of effective school-based substance abuse prevention." (2003) D. Gottfredson & D. Wilson. Prevention Science 4(1) 27-38.

"Report on Teen cigarette smoking and marijuana use" (2003) http://www.casacolumbia.org/usr_doc/teen_cigarette_smoking_and-marijuana_use.pdf

"Treatment Manual #5: Brief strategic family therapy for adolescent drug abuse" (2003) (<http://www.drugabuse.gov/txmanuals/bsft/bsftindex.html>)

"Mental health assessments in juvenile justice: Report on the Consensus Conference." (2003) G. Wasserman, et al. Journal of the American Academy of Child and Adolescent Psychiatry, 42(7) 752-761.

>FAMILIES, COMMUNITY & SCHOOL

"High school and beyond: The system is the problem and the solution" (2003) M. Tucker. http://colosus.ncee.org/pdf/acsd/global/promo/gates_paper.pdf

"The why's of class size: Student behavior in small classes" (2003) J. Finn, et al.

Review of Educational Research, 73(3) 321-368.

"Stressed out in the classroom" (2003) S. Black. American School Board Journal, October, 2003. [Http://www.asbj.com/current/research.html](http://www.asbj.com/current/research.html)

"Boredom in the classroom what it means and what to do about it" (2003) http://www.ascd.org/publications/ed_lead/200309/strong.html

"Deciding to teach them all" (2003) C. Tomlinson. Educational Leadership, 61(2) 6-11.

"What extras do we get with extracurriculars: Technical research considerations" (2003) D. Chaplin and M. Puma. ([Http://www.urban.org/url.cfm?ID=410862](http://www.urban.org/url.cfm?ID=410862))

"Case studies of local implementation of the No Child Left Behind Act" (2003) Center on Education Policy. [Http://www.edpolicy.org/research/nclb/index.php](http://www.edpolicy.org/research/nclb/index.php)

"Investing in children, youth, families, and communities: Strengths-based research and practice" (2003) K. Maton, et al. <http://www.apa.org>

"Research links education levels with well-being of communities and states" (2003) Education Commission for the States (<http://www.ecs.org/clearinghouse/47/47/4747.pdf>)

"Pathways to getting ahead" (2003) L. Beeferman, et al. <http://www.centeronhunger.org>

"Schoolwide planning to improve paraeducator supports" (2003) M Giangreco, et al. Exceptional Children, 70(1) 63-79

"Identifying and addressing the needs of children in grandparent care" (2003) <http://www.urban.org/urlprint.cfm?ID=8561>

>POLICY, LAW, ETHICS, FINANCES & STATISTICS

"A longitudinal analysis of shifting policy landscapes in special and general education reform" (2003) K. Furney, et al. Exceptional Children, 70(1) 81-94.

"Policy statement on mental health and use of alcohol and other drugs, screening, and assessment of children in foster care" (2003) Academy of Child and Adolescent Psychiatry and the Child Welfare League of America (<http://www.aacap.org/publications/policy/collab02.htm>)

"Violence in U. S. public schools: 2000 Survey on Crime and Safety" (2003) <http://nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2004314>

"Indicators of school crime and safety: 2003" (2003)

<http://nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2004004>

"State networks of local comprehensive community collaboratives: Financing and Governance Strategies" (2003) E. Bryant and C. Cohen, Finance Project
<http://www.financeproject.org>

"Rethinking scale: Moving beyond numbers to deep and lasting change" (2003)
C. Coburn. Educational Researcher, 32(6) 3-12.

"Summary health statistics for U. S. children: National Health Interview Survey, 2002" (2003) http://www.cdc.gov/nchs/data/series/sr_10/sr10_213.pdf

"Prevalence of school policies, programs, and facilities that promote a healthy physical school environment" (2003) S. Jones, et al. American Journal of Public Health 93(9) 1570-1575
<http://www.cdc.gov/nccdphp/dash/publications/schoolguidelines.htm>

"Building Constituencies for Public School Reform" (2003) <http://scs.aed.org>.

>MAJOR OUTCOME EVALUATIONS

>>"Student health risks, resilience, and academic performance in California: Year 2 Longitudinal Analysis" (2003) T Hanson and G Austin.
<Http://www.wested.org>.

>>"First reports evaluating the effectiveness of strategies for preventing violence: Early child home visitation." (2003) R Han, et al. Morbidity and Mortality Weekly Report 52(41) 1-9 <http://www.cdc.gov/mmwr/pdf/rr/rr5214.pdf>

(Note: The Quick Find topic search menu on our website is updated regularly with new reports and publications such as those listed above. Currently there are over 100 topics with direct links to our Center materials and to other online resources and related centers. <Http://smhp.psych.ucla.edu>)

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"Resilience means the personal and community qualities that enable us to rebound from adversity, trauma, tragedy, threats, or other stresses and to go on with life with a sense of mastery, competence, and hope"

New Freedom Commission on Mental Health

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**UPCOMING INITIATIVE, CONFERENCES, WORKSHOPS

>Family and Youth Service Bureau Second National Youth Summit, 11/6-8, Washington, DC (summit@ncfy.com)

>Public Education Network Annual Conference, 11/9-11, Washington, DC,
<http://www.publiceducation.org>

>National Organization on Adolescent Pregnancy, Parenting and Prevention,
11/10-13, Arlington, VA <http://www.noapp.org>

>Solving the Mystery of After Schools, 11/14-15, Princeton, NJ
(<http://www.njsacc.org>)

>Federation of Families for Children's Mental Health, 11/20-23, Washington, DC
(<http://www.ffcmh.org>)

>American Foundation for Suicide Prevention, 11/22, Los Angeles, CA
(psychsem@aol.com)

>Creating Communities of Learning: No One Left Behind, National Community
Education Association. 12/3-6, New Orleans, LA, <http://www.ncea.org>

>Youth Crime Prevention Conference, 2/14-17, Arlington, VA
(<http://128.121.17.146/ncpc/ncpc/?pg=5882-7518-11844>)

>National Association of Secondary School Principals, 2/27-3/1, Orlando, FL
<http://www.nassp.org>

>National Student Assistance Conference, 3/11-14, Coronado Spring, FL
<http://www.nsac.info>

>National Association of School Psychologists, 3/30-4/3, Dallas, TX
(<http://www.nasponline.org>)

>Stigma and Group Inequality: Social Psychological Approaches, 4/3, Claremont,
CA (shana.levin@claremontmckenna.edu)

>National Assembly on School-Based Health Care, 6/17-19, New Orleans, AL
(<http://www.nasbhc.org>)

(For more conference announcements, refer to our website at
<http://smhp.psych.ucla.edu> Go to Contents, then click on Upcoming
Conferences. If you want to list your conference, please email smhp@ucla.edu)

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"Until we can say the words 'public health' and everybody thinks of that as
including mental health, we will not have a complete health-care system."

Richard Carmona, U. S. Surgeon General

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**CALLS FOR GRANT PROPOSALS, PRESENTATIONS, & PAPERS

>GRANTS:

****See new "electronic storefront for Federal grants" at
<http://www.grants.gov>

>>U. S. Department of Education <http://www.ed.gov>
>>>Graduate Assistance in Areas of National Need Program (CFDA #84.200A) Due 11/7

>>The Gang Resistance Education and Training Program <http://www.atf.gov/great>
>>>Department of Justice, Applications must be received on or before 11/30

>>Health Resources and Services Administration <http://www.hrsa.gov>
>>>School Based Health Centers (HRSA-04-033) Due 12/1 (and 5/1)
>>>Adolescent Health Resource (HRSA-04-057) Due 1/5
>>>National Center for on School-Based Health Care (HRSA-04-058) Due 1/5
>>>Integrated Health and Behavioral Health Care for Children,
Adolescents and their Families (HRSA-04-059) Due 2/2

>>Substance Abuse and Mental Health Services Administration
<http://www.samhsa.gov>
>>>Knowledge Dissemination Conference Grant (PA-03-002) Due 1/10

>>Center for Disease Control and Prevention <http://www.cdc.gov>
>>>Programs to Improve the Health, Education, and Well-Being of Youth
People (04010) Due 12/8.

>CALLS FOR ABSTRACTS FOR CONFERENCES:

>>UCLA Extension offers Child Psychopathology (Online) October 20 - November 10
For more information, please contact Helen Williams at hwilliam@uclaextension.edu
or call 310-825-7729, visit <http://www.uclaextension.edu>

>>Proposal for Building on Family Strengths Conference (5/6-8, Portland,
OR) Due 12/5 gordonl@pdx.edu.

>>Abstract for "From Science to Services: Emerging Best Practices for People
in Contact with the Justice System" (conference 5/12-14, Las Vegas) due 12/16
http://www.gainsctr.com/pdfs/Call_for_Papers.pdf.

>CALLS FOR PAPERS

>>Special Issue of Journal of Community Practice "Youth Participation and
Community Change" Due 7/1. jcp@wayne.edu.

>>Counseling Around the World, Journal of Mental Health, Due 1/31

Rangzen@aol.com

>>Challenges to Community Cohesion, Viability, and Place Attachment,
American Behavioral Scientist, Due 2/2 Lmtigges@wisc.edu.

(Note: If you want to Surf the Internet for Funds, go to <http://smhp.psych.ucla.edu>.
Click on Quick Find, scroll down Center Responses to FINANCING AND
FUNDING. Provides links to funding sources and our Quick Training Aid on
Financing Strategies to Address Barriers to Learning)

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"The trouble with being in the rat race is that even if you win, you're still a rat."
Lily Tomlin

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**UPDATES FROM THE TWO NATIONAL CENTERS FOCUSING ON
MENTAL HEALTH IN SCHOOLS

^^^ Updates from our Center at UCLA

>New Toll Free Number: 866-846-4843 so those without access to the internet
can connect with us for technical assistance and resources and to share
information. 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.

>New Materials (download from website or order hard copies)

>>"Addressing Barriers to Learning: A Comprehensive Approach to Mental
Health in Schools" The five units of this continuing education module are
designed for training leaders and staff and as a resource that can be used to train
other stakeholders. Units of this module explore

- I. Introductory Concepts related to Mental Health in Schools
 - II. Policy Considerations
 - III. Reframing how schools address barriers to learning, including mental
health concerns
 - IV. Rethinking Infrastructure (leadership and mechanisms)
 - V. System Change: Moving Schools Forward
- Concluding comments include "New Directions: Where's It Happening?"

>>"About Infrastructure Mechanisms for a Comprehensive Learning Support Component"
This brief reading explores mechanisms that allow a learning support
component to function and work effectively, efficiently, and with full
integration with other major components of school improvement.

>>Guidelines for a Student Support Component This resource was
developed as part of the Summits Initiative: New Directions for Student Support.

It provides indepth exploration of the rationale for the each of the six guideline areas of a Student Support Component and outcomes that might be expected in each area. The six areas are:

1. Major areas of concern related to barriers to student learning,
2. Timing and nature of problem oriented interventions,
3. General domains for intervention in addressing students' needs and problems
4. Specialized Student and Family Assistance (Individual and Group)
5. Assuring Quality of Interventions,
6. Outcome evaluation and accountability

*****For updates on the Summits Initiative, go to the Center website's homepage and click on the green button labeled Summits for New Directions.

>>November Monthly Theme This month's focus for schools to address barriers to learning is "Responding to referrals in ways that can 'stem the tide.'" In previous months, a supportive school will have taken steps to welcome and provide social supports, to ensure that students have made a good adjustment to school, and to address initial adjustment problems as they arise. (See the themes for September and October.)

Now come the referrals for students who are manifesting behavior, learning, and emotional problems. These referrals bring with them a need to take steps to "stem the tide" through further enhancement of what takes place in the classroom and at school to prevent and address problems as soon as they arise. If your school staff has developed a good referral system, it is essential to take steps to counter the "field of dreams" effect. ("Build it and they will come")

As described on the Center website, the key here is for the school team that processes referrals to do three things as they review each student:

- >>>Determine the best course of action for helping the student
- >>>Analyze the problem with a view to ways the classroom and school might change in order to minimize the need for similar referrals in the future
- >>>Take steps to assist in implementing classroom and school changes that can prevent problems.

*****For more, see Ideas for Enhancing Support at your Schools at <http://smhp.psych.ucla.edu>

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Topics such as the above are an important focus for discussion on the Center's Mental Health in Schools Practitioner listserv. Each week specific examples of strategies are explored with input from those working in and with schools. To join, email smhp@ucla.edu and ask to be added to the Practitioner listserv.

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Contact us at SCHOOL MENTAL HEALTH PROJECT/
CENTER FOR MENTAL HEALTH IN SCHOOLS
UCLA Department of Psychology

Los Angeles, CA 90095-1563
Phone: (310) 825-3634; Toll Free: 866-846-4843; Fax 310-206-5895
Email: smhp@ucla.edu Website: <http://smhp.psych.ucla.edu>

^ ^ ^ FOR UPDATES FROM OUR SISTER CENTER: "Center for School
Mental Health Assistance," see their website at <http://csmha.umaryland.edu> or
contact Mark Weist, Director, CSMHA, University of Maryland at Baltimore,
Department of Psychiatry, 680 W. Lexington St., 10th fl., Baltimore, MD 21201.
Phone (888) 706-0980 Email: csmh@umpsy.umaryland.edu

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"Hope is a very unruly emotion."  
Gloria Steinem  
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****OTHER HELPFUL RESOURCES**

>Mental Health/Substance Abuse/Health

>>"National Dissemination Center for Children with Disabilities"
<http://www.nichcy.org>

>>"Identifying and Treating Attention Deficit Hyperactivity Disorder"
<http://www.ed.gov/about/reports/annual/osep/index.html#adhd-res>

>>"Data Trends: #84 Working relationships across diverse communities
#88 Review of the evidence base for treatment of childhood psychopathology"
<http://rtckids.fmhi.usf.edu/rtcpubs/datatrends/datatrendshp.htm>

>Parents, Schools & Communities

>>"Helping Parents Prepare for Parent-Teacher Conferences"
<http://www.sedl.org/connections/>

>>"Drug and alcohol use by high school seniors"
<http://www.ojp.usdoj.gov/bjs/dcf/du.htm>

>>"State-level school health policies database"
http://www.nasbe.org/healthyschools/states/state_policy.html

>>"Parent Resource Center handouts in Spanish"
<http://www.healthinschools.org/parents/downloads.htm>

>>"Programs for Teens" Child Trends' What Works series
http://www.childtrends.org/what_works/clarkwww/clarkwww_intro.asp

- >>"School Based Health Center Memorandum of Understanding"
<http://www.nasbhc.org/tat/toolkits.htm>
- >>"Tips on how to build sustainable leadership capacity at all levels"
<http://www.communitiesofhope.org/aboutus/whatweoffer/actiontips.asp>
- >>"Innovation Center for Youth and Community Development"
<http://www.atthetable.org>
- >>"Mentoring" <http://ojjdp.ncjrs.org/mentoring/index.html>
- >>"Vehicles for Change" <http://www.familyresourcecenters.net/>.
- >>"Parents as Teachers" <http://www.patnc.org>
- >>"Service Learning: Student's Guide and Journal for Elementary School"
<http://www.servicelearn.com>
- >>"Hope in the face of adversity"
http://www.casey.org/documents/prevention_report_1.pdf
- >>"Flexible School Facilities"
<http://designshare.com/research/locker/flexibleschools.asp>

(Note: for access to a wide range of relevant websites, see our "Gateway to a World of Resources" at <http://smhp.psych.ucla.edu>)

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****REQUESTS/INFO/COMMENTS/QUESTIONS FROM THE FIELD**

Related to impact of high stakes testing on students and staff:

"Re: Unintended but not unanticipated consequences...part of the piece that I think may be lacking is education in a nutshell type information on what are best practices in instruction in the core academic areas, what are research-based interventions, how to assess authentically that would give good data to target at-risk students. I am in the process of creating a series of "cliff notes" type booklets that summarize these areas and contain references to turn to to dig out solid interventions in those domains."

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Related to randomized research studies:

"As someone who is working on a randomized field trial in a school district (the non-ivory tower perspective) and as a graduate student in Survey Methodology( the ivory tower perspective), I must take issue with the points raised by the reviewer of the randomized research study. The author states that

"given that 'choice' alone has been found to be an evidence-based process, it also removes this possible contributor to success." It seems that the author is stating this as something negative, however, this is exactly the point of a randomized design. The objective is to remove all possibly confounding variables, so that in an ideal world, one can find a direct cause and an effect. Yes, perhaps a family who chooses to be in an intervention does better (however that is defined), but there are too many possibly confounding variables that you would never be able to come even close to certain of a cause and effect.

The author's second point, as I understand it, is that interventions in research studies should be more flexible. He or she characterizes the success rate of the standardized interventions as having a "limited success rate," yet does not provide data from less standardized interventions in research studies. I do not agree that this "traditional randomized design" goes against the "recommendations of the President's Commission, which calls for "a personalized, highly individualized health management program." I agree that it is important to "meet the needs of diverse racial or ethnic groups," but if the intervention becomes too personalized it would be nearly impossible to replicate, and therefore of little use to others interested in implementing it. One of the goals of a randomized research study, as I see it, is to be able to replicate the interventions that are studied in other settings. Personalizing an intervention to the extent implied by this reviewer would seriously compromise the ability to do this successfully."

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We were asked to share the following:

"...a new film entitled "5 Girls" ... profiles the lives of five teenagers....educators and community organizations use this film to generate dialogue...<http://www.wmm.com>"

"...a new mental health law website that may be of interest:
<http://www.mentalhealthlawyers.com>. "

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Sharing of information to benefit others is as far from self-promotion as doing good is from doing well.

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****TRAINING AND JOB OPPORTUNITIES**

<Program Director>

Child Adolescent Clinic Research, excellent for a post-doctoral researcher familiar with evidence-based treatments for youth and testing those treatments in clinical practice and community settings. Ph.D. in clinical psychology required.. UCLA, Los Angeles, CA. Contact John Weisz (bettencourt@psych.ucla.edu.)

<Project Manager>

Center for Health Improvement, Sacramento, CA. Children's healthy policy.
Http://www.chipolicy.org.

<Program Evaluator>

The Consultation Center, New Haven, CT. Masters degree with experience required. Cindy.crusto@yale.edu.

<School Nurse>

Lincoln County School District, Newport, OR <http://www.lincoln.k12.or.us>

<Evaluation/Research>

Casey Family Services, New Haven, CT. Doctorate required or five years research experience. Jobs@caseyfamilyservices.org

<School Psychology Faculty>

1. University of Houston, TX. Focus on resilience and prevention cognitive and motivations problems. Contact Robert McPherson, 491 Farish Hall, University of Houston, Houston, TX 77204-5029.
2. College of Education and Human Development University of Minnesota. Send application to Jim Ysseldyke, 204 Burton Hall, 178 Pillsbury Dr. SE, Minneapolis, MN, 55455-0211.
3. Department of Educational Psychology University of Texas at Austin. Review will begin 12.15. Contact Tim Keith (tim.keith@mail.utexas.edu)

For more information on employment opportunities see

<http://smhp.psych.ucla.edu>. Go to Contents, scroll down to Jobs. Following the listing of current openings, you will see links to HRSA, SAMHSA, and other relevant job sites.

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THIS THE END OF THIS ISSUE OF ENEWS

Below is a brief description of our Center at UCLA for more see our website
<http://smhp.psych.ucla.edu>

Who are we?

Under the auspices of the School Mental Health Project in the Department of Psychology at UCLA we established a Center for Mental Health in Schools in 1995. The Project and Center are co-directed by Howard Adelman and Linda Taylor.

Our group at UCLA approaches mental health concerns from the broad perspective of addressing barriers to learning and promoting healthy development. Activities include gathering and disseminating information, materials, development, direct assistance, and facilitating networking and exchanges of ideas. We demonstrate the catalytic use of technical assistance, internet, publications, resource materials, and regional and national meetings to stimulate interest in program and systemic change.

Specific attention is given to policies and strategies that can (a) counter fragmentation and enhance collaboration between school and community programs, and (b) counter the marginalization of mental health in schools. Center staff are involved in model development and implementation, training and technical assistance, and policy analysis. We focus on interventions that range from systems for healthy development and problem prevention through treatment for severe problems and stress the importance of school improvement and systemic change. There is an emphasis on enhancing collaborative activity that braids together school and community resources. The Center works to enhance network building for program expansion and systemic change and does catalytic training to stimulate interest in such activity. We connect with major initiatives of foundations, associations, governmental, and school and mental health departments.

Evaluations indicate the Center has had considerable impact in strengthening the network of professionals advancing the field of mental health in schools and in changing policies and practices.

For more information about the Center or about ENEWS, contact Center Coordinator Perry Nelson or Center Co-Directors Howard Adelman and Linda Taylor at: UCLA, School Mental Health Project/Center for Mental Health in Schools Box 951563 Los Angeles, CA 90095-1563 Phone (310) 825-3634 / Toll Free (866) 846-4843 / Fax (310) 206-5895 email: smhp@ucla.edu -- Website: <http://smhp.psych.ucla.edu>