

Addressing Barriers

to Learning

New ways to think . . .

Better ways to link

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If we want to bring ... quality, equity, and new life to our system – we must trust in a vision and a process of change.

Dwight Allen

Sustainability & Scale-up: It's About Systemic Change

Well conceived and implemented innovations are essential to strengthening students, schools, families, and communities. Many new initiatives, however, are pursued primarily as specially funded projects and demonstrations. When the funding ends, more often than not much of what was put in place disappears. The history of schools is strewn with valuable innovations that were not sustained, never mind replicated. Naturally, financial considerations played a role, but a widespread “project mentality” also is culpable.

A common tendency is for those involved in a project to think about their work only as a project providing a discrete program or set of services. And, it is common for others to view the work as temporary (e.g., “It will end when the grant runs out.”). This mind set leads to the view that new activities are time-limited, and it contributes to fragmented approaches and the marginalization of the initiative. It also works against the type of systemic changes that sustain and expand innovations.

The consistent failure to sustain has increased interest in understanding how to institutionalize and diffuse effective innovations. Our interest in these matters has evolved over many years of implementing demonstrations and working to replicate innovations

This issue of the newsletter is devoted to matters related to *advancing the field*. We focus on:

- C Sustainability & Scale-up*
- C MH in Schools: Where's the Field Going?*
- C Advancing the Field: Everyone can play a role*

on a large scale (see references at the end of the article). By now, we are fully convinced that advancing the field requires escaping “project mentality” and becoming sophisticated about sustainability and scale-up.

Defining Sustainability

The process of large-scale replication often is called diffusion, replication, roll out, going-to-scale, or scale-up. We use the terms interchangeably here.

A dictionary definition indicates that *to sustain* is “to keep in existence; to maintain; to nurture; to keep from failing; to endure” (American Heritage Dictionary, 1994). Another way to view sustainability is in terms of *institutionalizing system changes*. As Robert Kramer (2002) states: “Institutionalization is the active process of establishing your initiative – not merely continuing your program, but developing relationships, practices, and procedures that become a lasting part of the community.”

Sustainability of What? Making a Strong Argument

Few will argue with the notion that something of value should be sustained if it is feasible to do so. Thus, *the keys to sustainability are clarifying value and demonstrating feasibility*. Both these matters are touched upon in what follows.

One of the most pressing concerns to the staff of a specially funded project is sustaining their jobs when the project ends. The desire for maintaining one's job is more than understandable. The problem is that this is the weakest argument for sustainability that can be offered, especially when budgets are tight. Policy makers are constantly confronted with requests to maintain and add more personnel. Their decisions are supposed to be based on evidence of institutional need and

priorities. For this reason, requests that simply advocate sustaining *all* facets of a complex, expensive project meet with resistance. Decision makers want to hear which facets are really necessary to achieve outcomes and which are nice but unessential.

Strong arguments are framed within a “big picture” context. Compelling arguments

- focus on *specific functions* that are essential to achieving highly valued outcomes and that will be lost when a project ends
- connect those functions with the overall vision and mission of the institutions asked to sustain them
- clarify cost-effective strategies for maintaining the functions.

For example, as we work on developing innovations to better meet the needs of students experiencing learning, behavior, and emotional problems, we always clarify how often the educational mission is thwarted because of insufficient learning supports. We underscore that leaving no child behind means providing a range of learning supports for the many who aren’t benefitting from instructional reforms. We delineate the host of barriers interfering with development and learning, including *external* factors arising from neighborhood, family, school, and peer determinants. Then, we use the umbrella concept of a comprehensive, multifaceted *Enabling or Learning Support Component* to provide a coherent big picture context for each practice and the gap it fills in addressing barriers to learning. Finally, we discuss cost-effectiveness by focusing on systemic changes designed to restructure and redeploy how existing student supports are conceived and implemented so that fragmentation is reduced and resource use enhanced.

About Scale-up

Arguing for sustaining demonstrations of good innovations is essential to advancing the field. But, only sustaining demonstrations at one or two schools is insufficient to meeting the needs of the rest of the schools in a district. Ironically, good demonstrations can add to the inequities experienced across a district.

Advancing the field means working for both replication and scale-up. Think about the best model you know for improving the way schools address barriers to learning. Let’s assume this prototype has demonstrated cost-effectiveness. Providing every student in a district with an equal opportunity to succeed at school involves

replicating the approach at every school. Issues and problems about adoption fidelity come to the forefront at this point. (*What is involved in assisting a school as it implements new approaches?*) Additional concerns arise when the aim is to go to scale (e.g., replication at every school in a district).

Whether the focus is on establishing a prototype at one site or replicating it at many, the systemic changes can be conceived in terms of four overlapping phases: (1) *creating readiness* – increasing a climate/culture for change through enhancing the motivation and capability of a critical mass of stakeholders, (2) *initial implementation* – change is carried out in stages using a well-designed infrastructure to provide guidance and support, (3) *institutionalization* – accomplished by ensuring there is an infrastructure to maintain and enhance productive changes, and (4) *ongoing evolution* – through use of mechanisms to improve quality and provide continuing support in ways that enable stakeholders to become a community of learners and facilitates periodic creative renewal.

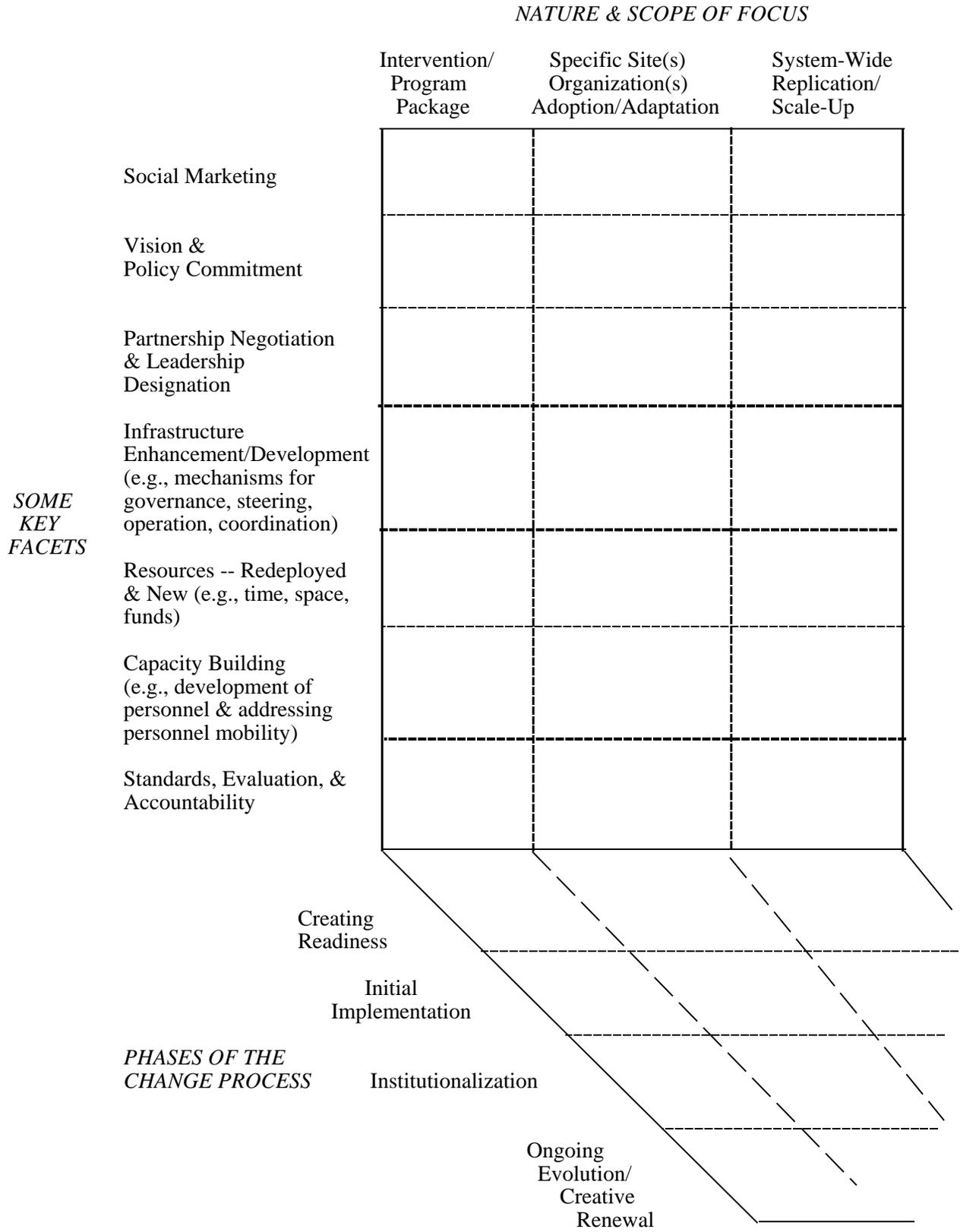
Efforts to replicate and scale-up often are inadequate because (a) key facets and specific tasks related to each phase of not pursued and (b) appropriate change mechanisms are not established. Key facets and tasks are highlighted later in this discussion.

Implementing and scaling-up a comprehensive prototype almost always requires *phased-in* change and the addition of *temporary infrastructure mechanisms* to facilitate change. One way to conceive a mechanism for change is in terms of well-trained change agents or organization facilitators. Such staff are needed to disseminate a prototype, negotiate decisions about replication, and dispense the expertise to facilitate implementation and eventual scale-up of a prototype. An organization facilitator can be trained to work with staff at the location in which the prototype is to be replicated for designated periods of time.

What’s Involved in Sustaining Valued Functions and Going to Scale?

The figure on the following page can be used as a framework for thinking about major matters for consideration in planning, implementing, sustaining, and going-to-scale. It also can be used as a template for establishing benchmarks for purposes of formative evaluation. As the figure illustrates, changes may encompass introducing one or more interventions, developing a demonstration at a specific site, or replicating a prototype on a large-scale. Whatever the nature and scope of focus, all the *key facets* outlined in the figure come into play.

New Initiatives: Considerations Related to Planning, Implementing, Sustaining, and Going-to-Scale



Each cell in the matrix warrants extensive discussion. Here, we must limit ourselves to highlighting some of the host of interacting concerns and activities involved in sustaining and scaling-up valued initiatives.

(1) The *nature and scope of focus* raises such questions as:

- What specific functions will be implemented and sustained?
- Will one or more sites/organizations be involved?
- Is the intent to make system-wide changes?

(2) With respect to *key facets*, whatever the nature and scope of the work, efforts for sustainability begin with

- articulation of a clear, shared vision for the initiative
- ensuring there is a major policy commitment from all participating partners
- negotiating partnership agreements, and designating leadership.

This is followed by processes for

- enhancing/developing an infrastructure based on a clear articulation of essential functions (e.g., mechanisms for governance and priority setting, steering, operations, resource mapping and coordination).

Pursuing the work requires

- strong facilitation related to all mechanisms
- redeploying resources and establishing new ones
- building capacity (especially personnel development and strategies for addressing personnel and other stakeholder mobility)
- establishing standards, evaluation processes, and accountability procedures.

And, throughout, there must be an ongoing focus on social marketing.

(3) Sustainability and scale-up processes must address each of the major phases of systemic change as described above.



(Thanks to an anonymous source)

A Few Guidelines

The following guidelines were formulated with a view to pursuing sustainability as systemic change. They are also applicable to the topic of scale-up.

- C To counter marginalization, translate interventions into functions that are essential to the institution's mission and accountability measures and frame them in terms of a comprehensive approach.
- C To avoid fragmentation and counterproductive competition among staff, design and implement new and expanded school-based activities in ways that integrate them fully with existing school programs, services, and personnel.
- C Use acquisition of extra-mural funding to leverage commitments for the type of systemic changes that will be essential to sustaining and scaling-up valued functions. (In doing so, establish clear priorities, and revisit memoranda of understanding – MOUs – to leverage stronger commitments.)
- C Focus first on the redeployment of current resources so that recommendations for systemic change are based on existing resources as much as is feasible. (This requires mapping and analyzing the available resource base.) Requests for additional resources are made only after it is evident that major gaps cannot be filled using existing resources more efficiently.
- C Design and establish an infrastructure that not only can carry out program functions, but also connects with decision making bodies and is capable of facilitating systemic change. For example, someone must be responsible for facilitating the creation of motivational readiness for any specific systemic change.
- C Use effectiveness data and information on cost-effectiveness in advocating for sustaining specific activities and approaches.
- C Identify a critical mass of “champions” to advocate and expedite and establish them as an active steering body.
- C Throughout, pursue social marketing and formative and benchmark evaluation.

Stages and Steps

As indicated in the figure, the phases of the change process are a major dimension of the framework. Although these phases are rather self-evident, the intervention steps are less so. Based on what we have learned from the literature and our own work, we delineate 16 key steps related to the first two phases of the change process (i.e., creating readiness and initial implementation). These are organized into four “stages.” The stages are conceived in terms of the need to intervene in ways that 1) develop a strong argument, 2) mobilize interest, consensus, and support among key stakeholders, 3) clarify feasibility, and 4) proceed with specific systemic changes (see Table).

Remember: The following formulation of stages and steps is designed to *guide* thinking about systemic change. It is not meant as a rigid format for the work. An overriding concern in pursuing each step is to do so in ways that enhance stakeholders' readiness, especially motivational readiness. A particularly persistent problem in this respect is the fact that stakeholders come and go. There are administrative and staff changes; some families and students leave; newcomers arrive; outreach brings in new participants. The constant challenge is to maintain the vision and commitment and to develop strategies for bringing new stakeholders on board and up-to-speed. Addressing this problem requires recycling through capacity building activity in ways that promote the motivation and capability of new participants.

Clearly, the many steps and tasks described call for a high degree of commitment and relentlessness of effort. Major systemic changes are not easily accomplished. Awareness of the myriad political and bureaucratic difficulties involved in making major institutional changes, especially with limited financial resources, leads to the caution that the type of approach described is not a straight-forward sequential process. Rather, the work proceeds and changes emerge in overlapping and spiraling ways.

When a broad range of stakeholders are motivated to work together, they come up with more creative and effective strategies than any manual can prescribe. Thus, while concepts and procedures are invaluable guides, building a cadre of stakeholders who are motivationally ready and able to proceed is the first and foremost consideration. The necessary motivation comes from the desire to achieve better outcomes; it comes from hope and optimism about a vision for what is possible; it comes from the realization that working together is essential in accomplishing the vision; it comes from the realization that working together effectively requires systemic changes that ensure each partner's assets and contributions are valued.

Table

Stages and Steps

Stage I: Preparing the argument for sustaining and scaling-up valued functions. Preparing a strong argument begins with ensuring that advocates understand the larger context in which any specific practice plays a role. This includes awareness of prevailing and pending policies, institutional priorities, and how existing resources might be redeployed to sustain (and scale-up) valued functions. Five steps in readying the argument are:

1. Developing understanding of the local “big picture” intervention context (e.g., amassing info to clarify the school-community vision, mission, current policies, major agenda priorities).
2. Developing understanding of the *current status* of efforts to accomplish goals related to the school-community vision (e.g., clarifying the degree to which current priorities are well-founded and the rate of progress toward addressing major problems and promoting healthy development).
3. Delineating functions, tasks, and accomplishments of specific practices with respect to contributing to the larger agenda and where the functions fit in terms of current policy and program priorities.
4. Clarifying which valued practices will be lost and articulating the implications in terms of negative impact on achieving larger institutional agenda.
5. Articulating cost-effective strategies for sustaining and scaling-up functions (e.g., focusing on how they can be integrated with existing activity and supported with existing resources, how some existing resources can be redeployed, how current efforts can be used to leverage new funds).

Stage II: Mobilizing interest, consensus, and support among key stakeholders. Steps involved in developing a critical mass of influential, well-informed, and potent stakeholder-advocates include:

6. Identifying champions and others committed to the functions and clarifying the mechanism(s) for bringing supporters together to steer and work for sustainability and scale-up.
7. Implementing a “social marketing” strategy to mobilize a critical mass of stakeholder support.
8. Implementing strategies to obtain the support of key policy makers (e.g., administrators, school boards).

Stage III: Clarifying feasibility. The preceding steps contribute to creating decision making readiness for sustaining and scaling-up valued functions. Next steps encompass clarifying how the functions are or can be an essential part of the larger school and community agenda. This raises considerations about infrastructure, daily operations, and the full range of systemic change concerns. Steps include:

9. Clarifying how the functions can be institutionalized through existing, modified, or new *infrastructure* and *operational* mechanisms (e.g., mechanisms for leadership, administration, capacity building, resource deployment, and integration of efforts).
10. Clarifying how necessary changes can be accomplished (e.g., mechanisms for steering change, external and internal change agents, and underwriting for the change process).
11. Formulating a longer-range strategic plan for maintaining momentum, progress, quality improvement, and creative renewal.

Stage IV: Proceeding with specific systemic changes. Because substantive change requires stakeholder readiness, it is essential to determine if the preceding steps accomplished the task. If not, it becomes necessary to revisit some earlier steps. Then, it is a matter of carrying out plans with full appreciation of the complex dynamics that arise whenever complex systems undergo change. Specific steps encompass:

12. Assessing and, if necessary, enhancing readiness to proceed with systemic changes.
13. Establishing an infrastructure and action plan for carrying out the changes.
14. Anticipating barriers and how to handle them.
15. Negotiating initial agreements, such as a memorandum of understanding.
16. Maintaining high levels of commitment to accomplishing necessary systemic changes (e.g., ensuring each task/objective is attainable, ensuring effective task facilitation and follow-through, negotiating long-term agreements and policy, celebrating each success, and facilitating renewal).

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Mental Health in Schools: *Where is the Field Going?*



Prediction is a risky business. A few matters are evident. For one, it is clear that the field of mental health in schools is in flux. For another, practitioners in the schools who are most associated with mental health concerns are realizing that changes are needed and are afoot. There is widespread agreement that a great deal needs to be done to improve what is taking place. And, at this point in time, no specific perspective or agenda is dominating policy, practice, research, or training.

However, we are detecting an emerging view. That view is calling for much more than expanded services and full service schools. It is focused on enhancing strategic collaborations to develop comprehensive approaches that strengthen students, families, schools, and neighborhoods and doing so in ways that maximize learning, caring, and well-being. And, it involves the full integration of MH concerns into a school's efforts to provide students with learning supports. This means connecting various MH agenda in major ways with the mission of schools and integrating with the full range of student learning supports designed to address barriers to learning. Moreover, given the current state of school resources, the work must be accomplished by rethinking and redeploying how existing resources are used and by taking advantage of the natural opportunities at schools for countering psychosocial and MH problems and promoting personal and social growth.

The emerging view recognizes that schools are not in the mental health business. Indeed, it is clear that many school stakeholders are leery of mental health, especially when the focus is presented in ways that equate the term only with mental disorders. They stress that the mission of schools is to educate all students. Advocates of the emerging view stress that when students are not doing well at school, mental health concerns and the school's mission usually overlap because the school cannot achieve its mission for such students without addressing factors interfering with progress. This is especially the case in schools where the number of students not doing well outnumbers those who are.

The emerging view, of course, requires major systemic changes. Such changes will require weaving school owned resources and community owned resources together to develop comprehensive and

cohesive approaches. Efforts to advance MH in schools also must adopt effective models and procedures for helping every school in a district. This means addressing the complications stemming from the scale of public education in the U.S.A.

The emerging view also is focusing on promoting the well-being of teachers and other school staff so that they can do more to promote the well-being of students. As is the case for students, staff need supports that enhance protective buffers, reduce risks, and promote well-being. Every school needs to commit to fostering staff and student resilience and creating an atmosphere that encourages mutual support, caring, and sense of community. Staff and students must feel good about themselves if they are to cope with challenges proactively and effectively.

The ideal is to create an atmosphere that fosters smooth transitions, positive informal encounters, and social interactions; facilitates social support; provides opportunities for ready access to information and for learning how to function effectively in the school culture; and encourages involvement in decision making. For any school, a welcoming induction and ongoing support are critical elements both in creating a positive sense of community and in facilitating staff and student school adjustment and performance. School-wide strategies for welcoming and supporting staff, students, and families at school *every day* are part of creating a mentally healthy school – one where all stakeholders interact positively with each other and identify with the school and its goals.

New Online from the Center (go to
"What's New" at <http://smhp.psych.ucla.edu/>)

>>*Sustaining School-Community Partnerships
to Enhance Outcomes for Children and Youth:
A Guidebook and Tool Kit*

>>*Addressing Barriers to Student Learning &
Promoting Healthy Development: A Usable
Research-Base* (a briefing document)

>>*About Empirically Supported Therapeutic
Relationships* (an information sheet)

**Always do right.
This will gratify
some people and
astonish the rest.**

Mark Twain

Center Staff:

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



Advancing the Field: Everyone Can Play a Role

When it comes to advancing the field, many forces are at work. Below we highlight the role our Center currently plays, and then we discuss ways in which we encourage others to enhance their role.

The Role of Our Center

A variety of centers are contributing to moving the field forward. (See our *Gateway* for names and links: http://smhp.psych.ucla.edu/gateway/gateway_sites.htm) The guiding principles and frameworks for our Center's work emphasize ensuring (1) mental *health* (MH) is understood in terms of psychosocial problems as well as disorders and in terms of strengths as well as deficits, (2) the roles of schools, communities, and homes are enhanced and pursued jointly, (3) equity considerations are confronted, (4) the marginalization and fragmentation of policy, organizations, and daily practice are countered, and (5) the challenges of evidence-based strategies and achieving results are addressed. From this perspective, we focus on improving practitioners' competence and fostering changes in the systems with which they work through analyses of the current state of affairs and generating policy and program models for advancing the field.

Impact evaluation data indicate the Center's work is helping enhance ongoing efforts related to MH in schools and is generating new ways of understanding and addressing system, program, and person problems. Systemic outcomes attributed to the Center's work include fundamental changes in policy and system-wide infrastructure and practices and a variety of capacity and network building endeavors. Examples include: system-wide efforts to embed MH in schools under the umbrella of a comprehensive student support component for addressing barriers to learning and promoting healthy development; resource mapping and analysis as an intervention; creation of new infrastructure mechanisms such as learning support resource-oriented teams and school community collaboratives; pursuit of sustainability in terms of systemic change, and much more.

Of special significance is the Center-sponsored initiative for *New Directions for Student Support*. Begun in 2002, this nationwide initiative is on the way to becoming a leading catalytic force for changes in policy and practice across the country. The initiative is co-sponsored by a growing list of over 30 groups, including most of the associations representing school-owned student support staff.

Also of major significance is the Center's ongoing work in connection with the field-defining document entitled: *Mental Health in Schools: Guidelines, Models, Resources, & Policy Considerations*. The guidelines (developed by the Policy Leadership Cadre for Mental Health in Schools) have been adapted into the first ever set of *Guidelines for Student Support Component*.

And, of particular importance at this point in time is the work the Center is doing to integrate MH in schools into the recommendations of the *President's New Freedom Commission on Mental Health*.

In all this, because systems are driven by their accountabilities, we have stressed the need to expand the accountability frameworks and indicators for schools and community agencies to better account for social-emotional development and learning supports. Such expanded data sets also have the potential to improve the evidence-base for school and community interventions.

The Center's emphasis for the future continues to be on maximizing policy and programmatic impact in ways that enable all students to have an equal opportunity to succeed at school. This involves us strategically in increasing resource availability and delivery systems, building state and local capacity, improving policy, and developing leadership.

What Role are You Playing?

Moving forward is dependent on a critical mass of stakeholders playing a role. Because it is hard to do so as an individual or as one group, our Center facilitates a variety of mechanisms enabling stakeholders to work together. Review the following and consider joining in to advance MH in schools (see newsletter insert).

Interested in policy? There is much to be done in the policy arena to advance the field, and it is evident that the pool of policy-oriented leaders must be expanded. Think about joining the *Policy Leadership Cadre for Mental Health in Schools* if you are interested in expanding, linking, and building capacity for *policy leadership* at national, state, regional, and local levels. Established after the Center's 1999 Leadership summit, the cadre focuses on policies for promoting social-emotional development and preventing psychosocial and MH problems, as well as those related to treatment of mental illness. Among its major contributions, the Cadre has developed the document: *Mental Health in Schools: Guidelines, Models, Resources, & Policy Considerations* and worked with the Center to ensure MH in schools is well integrated into work following-up the President's New Freedom Commission on MH (see <http://smhp.psych.ucla.edu/policy.htm>)

(cont. on next page)

>>Consider representing your organization in the *Coalition for Cohesive Policy in Addressing Barriers to Development and Learning*. Established in 1998, currently, 31 organizations are represented in this broad-based coalition of organizations. The Coalition's aim is to stimulate strategic efforts to foster policy integration and close policy gaps as ways to deal with the marginalization and fragmentation that dominates a great deal of prevailing practice. Last year, Coalition participants agreed to join with the Policy Leadership Cadre on tasks aimed at enhancing the emphasis on MH in schools related to the recommendations of the President's New Freedom Commission on Mental Health. (See <http://smhp.psych.ucla.edu/coalit.htm>)

>>Join in the *New Directions for Student Support* initiative as an advocate in your state and, if your organization is interested, as one of the over 30 co-sponsoring organizations. The focus is on rethinking policy, intervention frameworks, infrastructure, and systemic changes to revamp the student support facets of schools. This is seen as a necessary step in reinvigorating efforts to connect school and community resources for a comprehensive approach. This initiative is central to all efforts to enhance MH in schools and is a promising route to enhancing student and family access to prevention, early-after-onset interventions, and treatment. Currently, the initiative is focusing on strategically facilitating the development of state-based steering and work groups. (See <http://smhp.psych.ucla.edu/summit2002/ndannouncement.htm>)

Networking with Colleagues to Enhance Programs and Practices. Sign up for the *Practitioners' Listserv*. It's designed specifically for practitioners in schools. Each week, the Center responds to specific requests and shares info. Requests and responses are then put on the Center website to elicit additional responses. Currently, the weekly listserv goes to over 540 professionals around the country, and the list continues to grow. (See <http://smhp.psych.ucla.edu/pdfdocs/mhpractitioner/practitioner.pdf>)

>>Also, consider joining the *Consultation Cadre*. Over 275 professionals have volunteered to network with others to share what they know. Cadre members have expertise related to major system concerns (e.g., policy, funding, and system changes), a variety of program and processing issues, and almost every type of MH and psychosocial problem. They work in urban and rural areas across the country. Some run programs. Many work directly with kids in a variety of settings and on a wide range of problems. (See <http://smhp.psych.ucla.edu/consult.htm>)

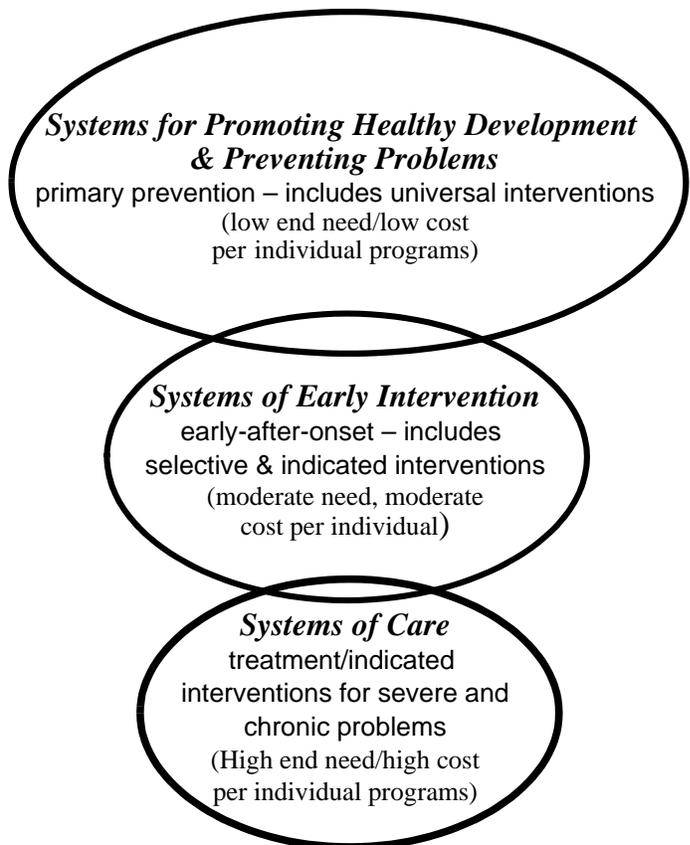
Each of the above provides a context in which you can help advance the field. See the insert to this newsletter and let us know what context fits your interests and abilities.

Advancing Mental Health in Schools

Any effort to enhance interventions for children's mental health must involve schools. Schools already provide a wide range of programs and services relevant to MH and psychosocial concerns. And, schools can and need to do much more if the mandates of the *No Child Left Behind Act* and the *Individuals with Disabilities Education Act* and the recommendations of the *President's New Freedom Commission on Mental Health* are to be achieved.

The emerging view seems to be that MH in schools must be embedded into the basic mission of schools. To this end, all of us must help develop well-integrated, comprehensive, multifaceted support systems that enable students to learn in ways that assure schools achieve their mandates. By doing so, we will ensure that MH in schools is understood as essential to the aim of leaving no child behind.

There are many policy implications related to all this. At the core is the need to ensure that policy proceeds within the context of a full continuum of intervention – ranging from the Public Health agenda for developing systems to promote healthy development and prevent problems to the treatment agenda focusing on systems of care for treating individuals with severe and chronic problems. This continuum is illustrated below:



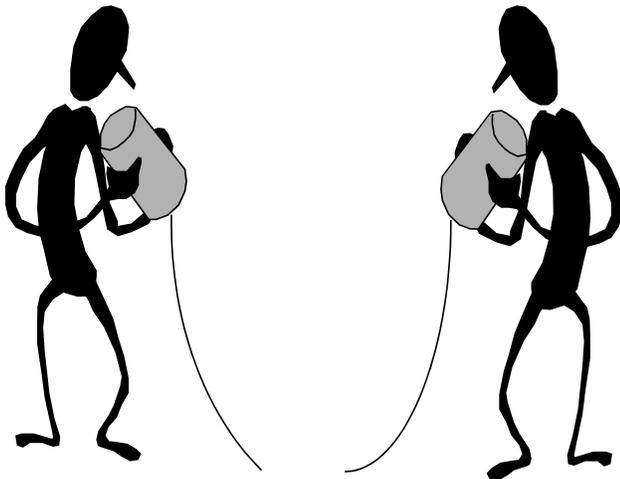
Throughout the above continuum of interconnected *systems* of intervention are policy concerns related to advancing the field of MH in schools. These include:

- ensuring mental *health* is understood in terms of psychosocial problems as well as disorders and in terms of strengths as well as deficits
- countering the marginalization and fragmentation of MH in schools
- assuring equity of access to opportunities (e.g., resources, programs, interventions)
- increasing availability of opportunities
- designing and implementing appropriate interventions (e.g., accommodating diversity, using science-based theory and evidence, applying high standards to improve quality and guide evaluation and accountability)
- ensuring the roles of schools/communities/homes are enhanced and pursued jointly

Clearly, we all have a role to play in advancing the field; clearly, a comprehensive approach provides the umbrella under which we can work together to leave no child behind.

With all the budget problems, we have to do everything on a shoestring.

Are you saying you still have a shoestring?



The Field Moves Forward

Several recent actions illustrate progress in advancing the field.



>>On the legislative scene, the speaker pro tem of the California Assembly introduced a bill that embeds mental health in schools into the emerging view described in this newsletter. The intent of the bill, which will be reintroduced in the next legislative session, is to develop a *Comprehensive Pupil Learning Support System*. See the proposed bill online at <http://smhp.psych.ucla.edu/summit2002/ab2569.pdf> This bill builds on the Hawai'i legislation mandating a *Comprehensive Student Support System* in every school in the state. (See <http://smhp.psych.ucla.edu/pdfdocs/wheresithappening/hawaii.pdf>)

>>A recent example of action by a school board comes from the Multnomah Education Service District (MESD) in Oregon. In July, the board established a Learning Supports policy that includes the following statements:

- The Board ... resolves that components to address barriers to student learning and enhance healthy development be fully integrated with efforts to improve instruction and management/governance . . . and be pursued as a primary and essential component of the MESD education reforms
- In keeping with the Oregon Quality Education Standards for best practices, the Board adopts the term learning supports as a unifying concept that encompasses all efforts related to addressing barriers to learning and enhancing healthy development.
- The Board will direct administrative efforts toward aligning, deploying and redeploying current funding and community resources related to learning support efforts in order to initiate development of comprehensive and systematic components of learning supports for schools.
- The Board directs the Superintendent to ensure those responsible for professional and other stakeholder development throughout the District to incorporate a substantial focus on learning support . . . into all such training and development activities.
- The Board will direct administrative efforts to allocate funds in ways that fill gaps related to fully developing comprehensive and systematic components of learning supports for schools.

(cont. on p. 12)

The Field Moves Forward (continued from p. 11)

>>A new group named, the *School Mental Health Alliance*, recently issued the following statement to build consensus. To date, it has been endorsed by over 20 major organizations representing education, health, and mental health. (For more info, contact lhunter@childpsych.columbia.edu.)

“Both academic and non-academic barriers to learning exist. Well-documented non-academic barriers include a host of community, family, school, peer, and individual factors that contribute to behavior, emotional, and learning problems. A large body of research underscores the urgency of removing these non-academic barriers to student learning. Moreover, an impressive science-base supports school-based strategies for doing so.

The positive impact that promoting social, behavioral and emotional development and addressing barriers to learning can have on children’s futures is well known. Strategies exist for optimizing positive development so all children can succeed in school. *We know what to do and can make a difference.*

Failure to act has consequences. The burden of suffering caused by insufficient attention to students’ social, behavioral and emotional development has contributed to leaving too many children behind at the same time that federal legislation calls for just the opposite. Research on the links between education and health demonstrates that early identification and treatment of children’s mental health problems can reduce personal and social costs associated with these problems and can improve children’s social, emotional, and academic outcomes.

To attain the promises of the No Child Left Behind Act, the legal mandates of the Individuals with Disabilities Education Act, and the goals and recommendations of the President’s New Freedom Commission on Mental Health, it is imperative that schools and communities work together to improve education, promote social-emotional competencies and mental health, and identify and treat mental health problems among youth. Integration of mental health programs and services in every school will ensure that all students are assured equitable opportunities to achieve educational success.”

Please see the insert and take a few minutes to provide us with some feedback, make a request, and/or join a network

**School Mental Health Project/
Center for Mental Health in Schools
Department of Psychology, UCLA
Los Angeles, CA 90095-1563
PX-55**

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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.

Response (Newsletter, Fall, 2004)



Indicate below if you wish to be part of:

(1) *Policy Leadership Cadre for Mental Health in Schools*

Yes__ No__

List others you wish to nominate. Indicate name of person(s) and contact info.

(2) *Coalition for Cohesive Policy in Addressing Barriers to Development and Learning*

Yes__ No__

List others you wish to nominate. Indicate name of person(s) and contact info.

(3) *Consultation Cadre*

Yes__ No__

List others you wish to nominate. Indicate name of person(s) and contact info.

(4) Do You Want Your State to Organize a State Summit for
New Directions for Student Support?

Yes __ No__

Below are some people the Center should contact to see if they are interested:

Name

Contact Info

(5) If you have any resource requests, list them below.

(6) As always, we welcome your feedback on any facets of the Center's operations.

Your Name _____ Title _____

Agency _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Fax (____) _____ E-Mail _____

Thanks for completing this form. Return it by FAX to (310) 206-8716 *or* in a separate envelope.

Contact us at: E-mail: smhp@ucla.edu Phone: (310) 825-3634; Toll Free (866) 846-4843

Write: Center for Mental Health in Schools, Department of Psychology, UCLA, Los Angeles, CA 90095-1563

Website: <http://smhp.psych.ucla.edu>

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