



Addressing Barriers

to Learning



New ways to think . . .

Better ways to link

Volume 12, Number 3
Summer, 2007

Evidence-Based Practices in Schools: Concerns About Fit and Implementation

As Tom Vander Ark has sagely noted: *Effective practices typically evolve over a long period in high-functioning, fully engaged systems*

Historically, schools have been confronted with yet another project, another program, and another initiative. Many of these aim at addressing learning, behavior, and emotional problems and making schools safe and drug free.

Added to the picture in recent years has been the demand that schools adopt practices that are evidence-based.* Increasingly, terms such as science-based or empirically-supported are assigned to almost any intervention identified as having research data generated in ways that meet “scientific standards” and that demonstrates a level of *efficacy* deemed worthy of application.

A somewhat higher standard is used for the subgroup of practices referred to as evidence-based *treatments*. This designation usually is reserved for interventions tested in more than one rigorous study (multiple case studies, randomized control trials) and consistently found better than a placebo or no treatment.

Currently, most evidence-based practices are discrete interventions designed to meet specified needs. A few are complex sets of interventions intended to meet multifaceted needs, and these usually are referred to as programs. Most evidence-based practices are applied using a detailed guide or manual and are time-limited.

Concerns and Controversies

No one argues against using the best science available to improve professional expertise. However, the evidence-based practices movement is reshaping public policy in ways that have raised concerns.

A central concern is that practices developed under highly controlled laboratory conditions are being pushed prematurely into widespread application based on unwarranted assumptions. This concern is especially salient when the evidence-base comes from short-term studies and has not included samples representing major subgroups with whom the practice is to be used.

Until researchers demonstrate a prototype is effective under “real world” conditions, it can only be considered a promising and not a proven practice. And, even then it must be determined whether it is a best practice.

With respect to the designation of *best*, it is well to remember that best simply denotes that a practice is better than whatever else is currently available. How *good* it is depends on complex analyses related to costs and benefits.

As the evidence-based movement has gained momentum, an increasing concern is that certain interventions are officially prescribed and others are proscribed by policy makers and funders. This breeds fear that only those practitioners who adhere to official lists will be sanctioned and rewarded.

(cont. on p. 2)

Inside	Page
>Center News & Resources	8
>Research-base for a Comprehensive System of Learning Supports	10
>Using Data Wisely	12

For purposes of our discussion here, we start with the assumption that there is evidence that a practice is a good one, and someone is advocating that a school use it to enhance efforts to address barriers to learning and teaching. In such cases, the question for school decision makers is: How well does it *fit* into efforts to improve schools? And, if the answer is positive, the problem becomes how to *implement* the practice in an optimal way.

Policy and practice analyses conducted by our Center have explored concerns about fit and implementation. We briefly highlight some major points here.

Another Intervention – Where and How Does it Fit?*

In isolation, evidence-based interventions tend to be viewed only in terms of advancing the state of the art. From a systemic and public policy perspective, however, introducing any new practice into an organization such as a school has to be justified in terms of how well it fits into and can advance the organization's mission.

For schools trying to improve how they address barriers to learning and teaching, we suggest the concern at this time must be on ensuring that a proposed practice contributes to developing a comprehensive system of student supports. From this perspective, school decision makers must consider matters such as whether the practice is designed to

- replace an essential, but ineffective practice
- fill a high priority gap in a school's efforts to meet its mission
- integrate into school improvement efforts
- promote healthy development, prevent problems, respond early after problem onset, or treat chronic problems
- help a few or many students
- integrate into a comprehensive continuum of interventions rather than become another fragmented approach

To appreciate the importance of these matters, it is helpful to understand the current state of affairs related to student support in schools and what is needed to do a better job. Much of our Center's ongoing analytic work focuses on these concerns. A brief summary is offered here.

Current State of Affairs

Most school districts offer a range of programs and services oriented to student needs and problems. Some are provided throughout a school district, others are carried out at or linked to targeted schools. Some are owned and operated by schools; some are from community agencies. The interventions may be for all students in a school, for those in specified grades, for those identified as "at risk," and/or for those in need of compensatory or special education.

Considerable activity is generated by separate, special initiatives and projects. Prominent among these are initiatives for positive behavioral supports, programs for safe and drug free schools, full service community schools and Family Resource Centers, School Based Health Centers, the *Safe Schools/Healthy Students* projects, the *Coordinated School Health Program*, efforts to address bi-lingual, cultural, and other diversity concerns, compensatory and special education programs, programs to promote social and emotional learning, and more.

As we have facilitated the work of the *National Initiative: New Directions for Student Support*, we have heard widespread concerns raised about "flavor of the month" initiatives being introduced by schools, districts, and states. While all are well-intentioned, the tendency is to introduce them in an ad hoc and piece meal manner and as add-ons.

It is commonplace for those staffing the various efforts to function in relative isolation of each other and other stakeholders, with a great deal of the work oriented to discrete problems and with an overreliance on specialized services for individuals and small groups. This contributes to widespread fragmentation, counterproductive competition, and wasteful redundancy. And, this compromises efforts to achieve cost-effectiveness.

In sum, looked at as a whole, a significant amount of activity is taking place and substantial resources are being expended. However, it is widely recognized that most schools don't come close to having enough resources to meet their needs. Moreover, it is clear that the whole enterprise is *marginalized* in policy and practice.

Moving Forward in New Directions

Schools confronted with a large number of students experiencing barriers to learning pay

dearly for the current state of affairs. While specific evidence-based practices might be helpful, a few more services or programs will not equip most schools to ensure that all youngsters have an equal opportunity to succeed at school. Policy and practice analyses indicate that such schools need to develop a *comprehensive system of student supports*.

Development of a comprehensive support system is guided by a unifying intervention framework. And, it is such a framework that provides a conceptual context for evaluating how well any proposed practice will fit with efforts to develop such a system.

With this in mind, our Center has outlined a framework that encompasses (1) a continuum of integrated intervention systems and (2) a multifaceted and cohesive set of content arenas.

The intent, over time, is for schools to play a major role in establishing a full continuum of integrated intervention *systems*, including

- systems for promoting healthy development and preventing problems
- systems for intervening early to address problems as soon after onset as is feasible
- systems for assisting with chronic and severe problems.

While most schools have some programs and services that fit into one or more of these three levels of concern, the work is not coalesced into integrated systems. Moreover, the tendency to focus mostly on the most severe problems has skewed the process so that too little is done to prevent and intervene early after the onset of a problem. As a result, public education has been characterized as a system that “waits for failure.”

The continuum of integrated systems spans the full spectrum of intervention efforts and envelops individuals, families, and the contexts in which they live, work, and play. It encompasses the principle of using the least restrictive and nonintrusive forms of intervention required in responding appropriately to problems and accommodating diversity. Also, the focus is on root causes and minimizing tendencies to develop separate programs for each observed problem. This enables coordination and integration of resources to increase impact and cost-effectiveness.

In our work, we operationalize the continuum into a component to address barriers to learning and teaching (e.g., an enabling or learning supports component). Such a component helps to coalesce and enhance programs to ensure all students have an

equal opportunity to succeed at school. Critical to this is defining what the entire school must do to enable *all* students to learn and *all* teachers to teach effectively. School-wide approaches are especially important where large numbers of students are affected and at any school that is not yet paying adequate attention to equity and diversity concerns.

Note that addressing barriers to school learning involves two major considerations: (1) helping students around barriers *and* (2) engaging/re-engaging them in classroom instruction. It should be evident that interventions that do not accomplish the second consideration generally are insufficient in sustaining student involvement, good behavior, and effective learning at school.

Pioneering efforts have designed the component to address barriers to learning and teaching into six programmatic arenas. In doing so, they have moved from a “laundry list” of programs, services, and activities to a defined content or “curriculum” framework that captures the essence of the multifaceted ways schools must address barriers to learning. Encompassed are programs to

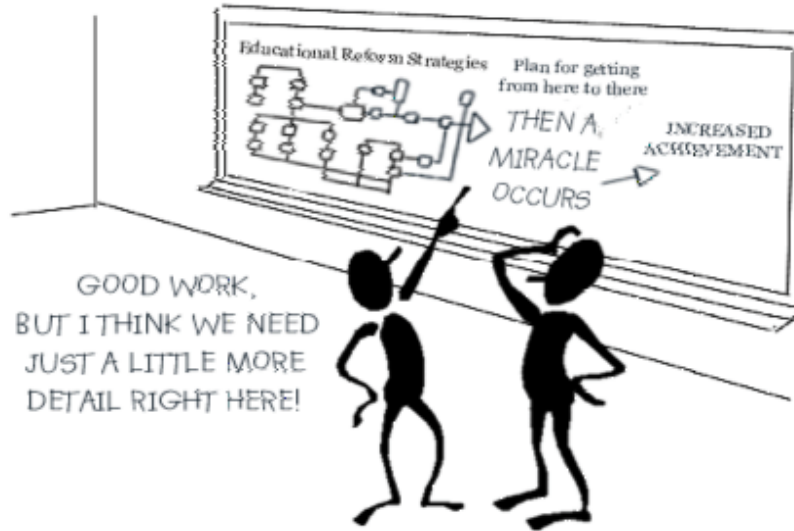
1. *enhance regular classroom strategies to enable learning* (i.e., improving instruction for students who have become disengaged from learning at school and for those with mild-moderate learning and behavior problems)
2. *support transitions* (i.e., assisting students and families as they negotiate school and grade changes and many other transitions)
3. *increase home and school connections*
4. *respond to, and where feasible, prevent crises*
5. *increase community involvement and support* (outreach to develop greater community involvement and support, including enhanced use of volunteers)
6. *facilitate student and family access to effective services and special assistance as needed.*

Combining the six content arenas with the continuum of integrated systems of intervention provides a comprehensive and multifaceted framework to guide and unify school improvement planning for developing a system of student/learning supports. The resultant matrix can be used in making decisions about how well any proposed practice fits.

(cont. on p. 4)

By now, it should be clear that for schools the need is not just to add evidence-based practices; it is to do so in ways that contribute to development of a comprehensive system for addressing barriers to learning and teaching..

This brings us to the implementation problem.



The Implementation Problem and Systemic Change***

When the decision is made to add any practice, implementation plans must be formulated for how best to integrate it into the organization. For schools, this should involve fully integrating it into school improvement plans – including plans to reframe student/learning supports and weave together school, community, and home resources. For school districts, additional concerns arise around planning for sustainability and equitable replication in all schools.

Clearly, this is a much more complex process than taking efficacious prototypes and moving them into the real world. Unfortunately, for the most part, the complexities have not been well addressed.

As the National Implementation Research Network has stressed,

... very little is known about the processes required to effectively implement evidence-based programs on a national scale. Research to support the implementation activities that are being used is even scarcer.

Early research on the implementation problem has focused on concerns about and barriers to matters such as dissemination, readiness, fidelity and quality of implementation, generalizability, adaptation, sustainability, and replication to scale.

All of these matters obviously are important.

However, the trend has been to analyze and approach the implementation problem with too limited a procedural framework and with too little attention to context. This has resulted in the tendency to skip by fundamental considerations involved in moving evidence-based practices into common use.

The deficiencies of many implementation efforts become apparent when the process is conceived in terms of the complexities of (1) *diffusing innovations* and (2) doing so in the context of *organized systems* that have well-established institutional cultures and infrastructures. We suggest, then, that it is essential to view the implementation problem from the vantage point of the growing bodies of literature on diffusion of innovations and systemic change. Already, the work in these two overlapping arenas is yielding a broader and essential perspective for advancing research associated with moving evidence-based practices into the real world.

This perspective underscores the need for framing the implementation problem as a *process of diffusing innovation through major systemic change*. Such a process encompasses both the complexities of facilitating systemic changes that lead to appropriate and effective adoption and adaptation at a particular site and the added complexities of replication-to-scale (see Exhibit).

Exhibit

Resistance, Reluctance, or Relevant Concerns?

The following matters are often heard in schools when efforts are made to introduce some evidence-based practices:

"I don't believe their 'evidence-based' intervention is better than what I do; they need to do the research on what I do before they claim theirs is better."

"That intervention is too narrow and specific to fit the problems I have to deal with."

"We wanted to use the grant money to enhance the work we already are doing, but we've been told we have to use it to buy evidence-based programs that we think don't really fit our needs."

"How do we know that if the school adopts this evidence-based program we will get the results they got in their research."

"We have so many things we have to do now, when are we going to have time to learn these new practices?"

"They make it sound like I am doing bad things. Soon, they will be suggesting that we are incompetent and need to be fired."

"I've heard that some of the highly touted science-based programs have been found not to work well when they are tried throughout a school district."

"I'm not taking the risk of giving up what I believe works until they prove their laboratory model does better than me out here in the real world."

While these are off-the-cuff remarks, some policy makers and practitioners have raised sophisticated concerns about the demand for adoption of evidence-based practices in schools. Some researchers have reacted by implying such concerns are anti-scientific and represent mindless resistance. All this has influenced interpretations of why it has been difficult to achieve prototype fidelity in schools (and clinics).

It is well to remember that it is a truism that not everyone is ready for major changes in their lives. At the same time, it is the case that not all concerns raised about proposed changes are simply resistance. The motivation for each of the above statements may simply reflect a desire not to change, or it may stem from a deep commitment to the best interests of schools and the students and families they serve.

Whatever the motivation, it is essential to understand that controversies and concerns about what practices are appropriate and viable almost always are major contextual variables affecting implementation. Their impact must be addressed as part of the process of implementation, especially in settings that have well-established institutional cultures and organizational and operational infrastructures. Researchers need to avoid the blame-game and appreciate the complexities of diffusing innovations and making major systemic changes. From such a vantage point, the focus shifts from "I'm right and they're wrong" to "What haven't I done to promote readiness for change?"

Some Key Facets of Systemic Change

Michael Fullan stresses that effective systemic change requires leadership that “motivates people to take on the complexities and anxieties of difficult change.” We would add that such leadership also must develop a refined understanding of how to facilitate systemic change.

Major elements involved in implementing empirically supported innovative practices in an institutional setting are logically connected to considerations about systemic change. That is, the same elements can be used to frame key intervention concerns related to implementing the practice and making systemic changes, and each is intimately linked to the other.

At any given time, an organization may be involved in introducing one or more innovations at one or more sites; it may also be involved in replicating one or more prototypes on a large-scale. The nature and scope of the activity and the priorities assigned by policy and decision makers are major influences on the implementation process. For example, the broader the scope, the higher the costs; the narrower the scope, the less the innovation may be important to an organization’s overall mission. Both high costs and low valuing obviously can work against implementation and sustainability.

Key facets in implementing major practices include social marketing, articulation of a shared vision for the work, ensuring policy commitments, negotiating agreements among stakeholders, ensuring effective leadership, enhancing/developing an infrastructure (e.g., mechanisms for governance and priority setting, steering, operations, resource mapping and coordination), redeploing resources and establishing new ones, building capacity (especially personnel development), establishing strategies for coping with the mobility of staff and other stakeholders, developing standards, and establishing formative and summative evaluation processes and accountability procedures. All of this requires careful planning based on sound intervention fundamentals.

Critical to implementation, sustainability, and replication to scale is a well-designed and developed organizational and operational infrastructure. This includes *administrative leadership* and *infrastructure mechanisms* to facilitate changes (e.g., well-trained change agents). Usually, existing infrastructure mechanisms must be modified to guarantee new practices are effectively operationalized.

A well-designed organizational and operational infrastructure ensures local ownership of innovations and a critical mass of committed stakeholders. Mechanisms pursue processes that overcome barriers to stakeholders working productively together and use strategies that mobilize and maintain proactive effort so that changes are implemented and renewed over time.

Whether the intent is to establish a prototype at one site or replicate it at many, systemic change can be viewed as involving four overlapping phases: (1) *creating readiness* – increasing a climate/culture for change through enhancing both the motivation and the capability of a critical mass of stakeholders, (2) *initial implementation* – change is phased in using a well-designed infrastructure for providing guidance and support and building capacity, (3) *institutionalization* – accomplished by ensuring there is an established infrastructure to maintain and enhance productive changes, and (4) *ongoing evolution and creative renewal* – through use of mechanisms to improve quality and provide continuing support in ways that enable stakeholders to become a community of learners who creatively pursue renewal.

Unsuccessful implementation and failure to sustain are associated with not addressing infrastructure deficits in ways that ensure the major tasks related to these four phases are accomplished effectively.

About Readiness for Systemic Change

One of the most flagrant systemic change errors is not giving sufficient attention and time to creating readiness. Effective systemic change begins with activity designed to create readiness in terms of both motivation and capability among a critical mass of key stakeholders.

Organization researchers in schools, corporations, and community agencies have clarified factors related to creating an effective climate for institutional change. In reviewing this literature,

we have extracted the following points as most relevant to enhancing readiness for change:

- a high level of policy commitment that is translated into appropriate resources, including leadership, space, budget, and time;
- incentives for change, such as intrinsically valued outcomes, expectations for success, recognition, and rewards;
- procedural options from which those expected to implement change can select those they see as workable;
- a willingness to establish mechanisms and processes that facilitate change efforts, such as a governance mechanism that adopts ways to improve organizational health;
- use of change agents who are perceived as pragmatic – maintaining ideals while embracing practical solutions;
- accomplishing change in stages and with realistic timelines;
- providing progress feedback;
- institutionalizing mechanisms to maintain and evolve changes and to generate periodic renewal.

Enhancing readiness for and sustaining change involves ongoing attention to daily experiences. Stakeholders must perceive systemic changes in ways that make them feel they are valued and contributing to a collective identity, destiny, and vision. From the perspective of intrinsic motivation theory as outlined by Ed Deci and Richard Ryan, both individual and collective work must be facilitated in ways that enhance feelings of competence, self-determination, and connectedness with and commitment to others and must minimize conditions that produce psychological reactance. From the perspective of theories about enhancing a sense of community and fostering empowerment, there is growing emphasis on understanding that empowerment is a multi-faceted concept. In this context, Stephanie Riger distinguishes “power over” from “power to” and “power from.” *Power over* involves explicit or implicit dominance over others and events; *power to* is seen as increased opportunities to act; *power from* implies ability to resist the power of others.

Concluding Comments

Those who set out to implement evidence-based practices in schools are confronted with a complex set of tasks related to demonstrating “fit” and implementing systemic change. There are a myriad of political and bureaucratic difficulties involved in making institutional changes, especially with limited financial resources. The process rarely is straight-forward, sequential, or linear. Clearly, a high degree of commitment, relentlessness of effort, and realistic time frames are required.

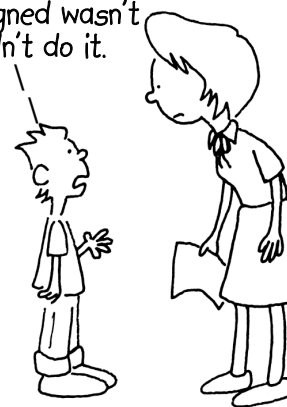
We need not belabor any of this here. Our intent only is to foster greater appreciation for and more attention to concerns about fit and implementation as related to evidence-based practices. A more sophisticated approach to these matters is essential to improving schools in general and addressing barriers to learning and teaching in particular.

*See *Annotated Lists of Empirically Supported Evidence-based Interventions for School-aged Children and Adolescents* at – <http://smhp.psych.ucla.edu/pdfdocs/aboutmh/annotatedlist.pdf>

**References for the section on “Another Intervention – Where and How Does it Fit?” are online in a Center report *Another Initiative? Where Does it Fit? A Unifying Framework and an Integrated Infrastructure for Schools to Address Barriers to Learning and Promote Healthy Development* – <http://smhp.psych.ucla.edu/pdfdocs/infrastructure/anotherinitiative-exec.pdf>

***References for the section “The Implementation Problem and Systemic Change” are online in the Center series of information resources on enabling system change entitled *Diffusion of Innovations and Science-Based Practices to Address Barriers to Learning & Improve Schools* – <http://smhp.psych.ucla.edu/whatsnew/fact.htm>

The homework you assigned wasn't evidence-based, so I didn't do it.



Center News



Partnership with Scholastic, Inc. for Leadership Institutes

As reported previously, Scholastic has asked us to partner with them as they pursue an initiative called "Rebuilding for Learning." Our emphasis is on rebuilding *learning supports*. The intent is to guide policy makers and administrators as they respond to the imperative for developing a comprehensive system of learning supports to address barriers to learning and teaching at every school.

As a first phase, we are currently preparing a set of introductory leadership materials; then, we will provide a series of Leadership Institutes for high level policy maker and administrator organizations with whom Scholastic works.

We have done an initial draft of the material and have revamped a tool kit to support efforts to rebuild systems for learning supports. The tool kit is already online (see <http://smhp.psych.ucla.edu/toolkit.htm>).

Ongoing Initiatives to Promote Policy and Practice Discussions

>*Reauthorization Agenda*. The *Elementary and Secondary Education Act* (No Child Left Behind Act) reauthorization hearings have not specifically focused on addressing barriers to learning and teaching. The Center is working to encourage addition of such an agenda item – see <http://smhp.psych.ucla.edu/pdfdocs/congress%20letter.pdf>

>*Call to Action Campaign*. See recent work at – <http://smhp.psych.ucla.edu/summit2002/outreachcampaign.htm#call>

>*National Initiative: New Directions for Student Support*. See current status at – <http://smhp.psych.ucla.edu/summit2002/currentstatus.htm>

New Resources

>Online Clearinghouse Quick Find
>>*Response to Intervention*
<http://smhp.psych.ucla.edu/qf/responsetointervention.htm>

>Center Policy & Practice Analysis Brief
>>*Youth Gangs and Schools*
[http://smhp.psych.ucla.edu/pdfdocs/policyissues/Youth gangs & Schools.pdf](http://smhp.psych.ucla.edu/pdfdocs/policyissues/Youth%20gangs%20&%20Schools.pdf)

Want resources? Need technical assistance? We can help!

Contact us at: E-mail: smhp@ucla.edu Ph: (310) 825-3634 Toll Free Ph: (866) 846-4843
Write: Center for Mental Health in Schools, Dept. of Psychology, UCLA, Los Angeles, CA 90095-1563
Or use our website: <http://smhp.psych.ucla.edu>

If you're not receiving our monthly electronic newsletter (ENEWS),
send your E-mail address to – smhp@ucla.edu
or subscribe online – <http://lists.ucla.edu/cgi-bin/mailman/listinfo/mentalhealth-L>

>For access to the latest Center developed resources, go to – <http://smhp.psych.ucla.edu/review.htm>

>Exchange info on MH practices in school and network with colleagues across the country by joining
(1) the **Weekly Listserv for School MH Practitioners** and/or (2) the **Center's Consultation Cadre**.
Sign up by email at smhp@ucla.edu or by phone – Toll Free (866) 846-4843

>Also, **phone, fax, E-mail, or snail mail us if you want to submit feedback, request resources, or send comments and info for us to circulate**

FOR THOSE WITHOUT INTERNET ACCESS, ALL RESOURCES ARE AVAILABLE BY CONTACTING THE CENTER.

Rebuilding Learning Supports

We have a number of concept papers and policy analyses that detail the intervention, infrastructure, and expanded accountability frameworks needed for moving forward in rebuilding learning supports.

We also have developed some brief Q & A documents to answers questions raised by policy makers and planners. One such document addresses the following frequently asked questions:

- 1) *Why is a Comprehensive Learning Supports System an imperative?*
- 2) *What needs to be done to make such a component a reality?*
- 3) *What does such a component need to look like at a school?*
- 4) *What's the research-base for such a component?*
- 5) *What will it cost?*

The document can be downloaded directly from our website at – <http://smhp.psych.ucla.edu/summit2002/q&a.pdf>

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We continuously compile info on new direction efforts to develop comprehensive approaches for addressing barriers to learning and teaching. (See *Where's It Happening? Examples of New Directions for Student Support & Lessons Learned* – <http://smhp.psych.ucla.edu/summit2002/wheresithappening.htm>

If you have been involved in developing a comprehensive new directions approach to student support, please send us the information so that we can include it.

Also, let us know if you are associated with a district that is ready to move forward and wants to explore ways we might be able to help.

Contact: ltaylor@ucla.edu

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Do Student Supports Improve Achievement?

This widely asked question often comes to our Center. That it is asked is quite understandable. However, the way it is asked reflects a gross lack of appreciation for the role and contribution of student supports.

Interventions designed to address barriers to learning and teaching are essential in and of themselves. But doing this is only the *step one* in what must be a two step process for enhancing academic performance and achievement test scores.

Improvement of academic achievement is not the direct outcome of step one interventions. The appropriate data for evaluating these interventions comes from indicators of the direct outcomes they are designed to accomplish. These include increased attendance, reduced bullying and other behavior problems, fewer inappropriate referrals for specialized assistance and for special education, and so forth. All these are critical, direct indicators of the worth of various student support programs and services. However, by themselves they cannot ensure that students will re-engage in classroom learning.

Step one interventions pave the way for *step two* interventions. These focus on re-engaging students in classroom instruction. Both steps are required if academic achievement is to be enhanced.

In the absence of step one interventions, it is unlikely that step two interventions will be effective. That is why we stress that the case for addressing barriers to learning and teaching does not rest on showing an immediate gain in achievement scores.

The right question, then, is: What is the combined impact of a comprehensive system designed to address barriers to learning and teaching **and** re-engage students in classroom instruction. And, it should be evident that such an impact can't be evaluated until such a system is developed and well implemented.

Although social change cannot come overnight, we must always work as though it were a possibility in the morning.

Martin Luther King, Jr.

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



Policy & Practice

Research-base for a Comprehensive System of Learning Supports

Commonly heard these days: *In God we trust; from all others demand data.* Increasingly, policy makers and others who make decisions are demanding: *Show me the data!*

Proposals for moving in new directions to improve schools are consistently met with demands from policy makers for data proving that the additional efforts will improve student achievement quickly (see discussion on page 9). Too often, essential changes are not made because of a narrow focus on limited data. It's time to broaden the focus. A compelling argument for change arises from combining three sets of findings: (1) the growing body of evidence that prevailing approaches are insufficient, (2) analyses showing what's missing, (3) the research suggesting the potential impact of a comprehensive, multifaceted approach to address barriers to learning and teaching.

The Need for New Directions for School Improvement

As schools strive valiantly to meet current accountability demands, reports from across the country continue to indicate

- modest immediate test increases followed by a longer-term plateau effect
- high student dropout rates
- high teacher dropout rates
- a continuing achievement gap
- a growing list of schools designated as low performing
- a growing toll on students from high stakes testing

There are many reasons for all this, one of which is the marked deficiencies in prevailing approaches to school improvement.

What's Missing?

Demands for accountability have been paired with a "no excuses" decree. This has made it difficult to discuss what's missing in efforts to improve schools and schooling. Despite this, there are data pointing to many factors that are associated with subpar student performance and the long-standing achievement gap.¹⁻⁶

A related set of findings supporting the need for new directions comes from policy analyses indicating that prevailing school improvement planning guides fail to adequately address barriers to learning and teaching. These analyses all indicate that student supports are fragmented and marginalized, and that there is no comprehensive, multifaceted, and cohesive approach for addressing barriers to learning and teaching.^{7,8}

Pathway Indicators of the Value of New Directions for Addressing Barriers to Learning

The concept of addressing barriers to learning and teaching highlights the need for schools to enable learning by effectively dealing with such barriers. A comprehensive system of student supports can enable learning by providing pathways for students around barriers and by moving them toward enhanced engagement in classroom learning.

The immediate and direct data of the effectiveness of student supports are indicators showing that students are on the right pathways. Improvements in academic achievement are long-term indicators. They are only attainable if enabling pathways are achieved; and such improvements clearly are dependent on the subsequent effectiveness of classroom instruction.

There is an extensive body of literature on the value of schools, families, and communities working together to provide student support interventions.⁹⁻¹³ Findings include improved school attendance, fewer behavior problems, improved interpersonal skills, increased bonding at school and at home, some indicators of enhanced achievement, and other positive outcomes for school and society.¹⁴

Because of the fragmented nature of available studies on student supports, the findings are best appreciated in terms of the whole being greater than the sum of the parts, and implications are best derived from a "big picture" perspective. When such a broad perspective is adopted, schools have a larger science-base to draw upon in addressing barriers to learning and enhancing healthy development.

The research-base supporting development of a comprehensive, multifaceted approach to addressing barriers to learning and teaching has been spotlighted.¹⁵ The findings are organized into the six arenas of an enabling/learning supports component:⁶ (1) enhancing classroom teachers' capacity for addressing problems and for fostering positive social, emotional, academic, and physical development, (2) enhancing school capacity to handle transition concerns confronting students and families, (3) responding to, minimizing

impact of, and preventing crisis, (4) enhancing home involvement, (5) outreaching to the community to build linkages and collaborations, and (6) providing special assistance to students and families.

It also is relevant to note data from the many “natural experiments” underscoring the promise of ensuring that all youngsters have access to a comprehensive, multifaceted set of interventions. These natural experiments play out in every school and neighborhood where families are affluent enough to purchase the programs and services they feel will maximize their youngsters' well-being. Those who can afford such interventions clearly understand their value. And, not surprisingly, most

indicators of well-being, including higher achievement test scores, are correlated with socio-economic status. Available data highlight societal inequities that can be remedied through cost-effective public financing.¹⁶

Taken as a whole, the research-base for initiatives to pursue a comprehensive focus on addressing barriers indicates the value of a range of activity that can enable students to learn and teachers to teach. The findings also underscore that addressing major psychosocial problems one at a time is unwise because the problems are interrelated and require multifaceted and cohesive solutions. In all, the literature supports the need for new directions, offers content for learning supports, and stresses the importance of coalescing such activity into a comprehensive, multifaceted approach.

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Results! Why, man, I have gotten a lot of results.

I know several thousand things that won't work.

Thomas Edison

Using Data Wisely

To know what to do is wisdom. To know how to do it is skill. To know when to do it is judgment. To strive to do it best is dedication. To do it for the benefit of others is compassion. To do it quietly is humility. To get the job done is achievement. To get others to do all of the above is leadership.

Author unknown

In their gut, teachers know teaching is not a cut-and-dried set of tasks, but a mix of evidenced-based practice, art, and intuitive judgments seasoned by a dash of luck.

Jane David & Larry Cuban

>The first step is to measure whatever can be easily measured.

That's okay as far as it goes.

/ >The second step is to disregard that which can't be measured or give it an arbitrary quantitative value.

That's artificial and misleading.

>The third step is to presume that what can't be measured easily isn't very important.

That's blindness.

>The fourth step is to say what can't be measured really doesn't exist.

That's suicide.



Statement attributed to Yankelovich

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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.

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