1. Services should take place in natural settings whenever possible and should adapt to, and take advantage of, those settings.

Stated differently, school-based services should also be school-oriented.

Reasons
- Behavior change is greatest when there is in vivo (real-life) practice of new responses.
- Services that are closely tailored to the setting are most likely to address the mismatch between the demands of the setting and the child's behavior.
- Adaptation to the goals, norms, and rhythm of the setting shows respect for the people with whom one is working (in effect, being a polite guest).
- Adaptation to the goals, norms, and rhythm of the setting also shows respect for the norms of the community (e.g., the community expects a focus on educational achievement in the schools).

Implications
- School-based services should routinely be directed toward changes in school-related attitudes and behaviors; an overarching goal of school-based services should be removal of barriers to learning (e.g., low motivation, embodied in a lack of enjoyment of school activities; low parental involvement).
- The school should be the primary but not exclusive referral source for school-based services.
- Services should accommodate and take advantage of the school schedule whenever feasible.
- Services should be focused on adaptation in ordinary school activities (e.g., classroom lessons; lunchroom conversations) and should build on the resources of the school (e.g., opportunities for civic engagement; potential relationships with staff and students).
- Services should promote generalization and long-term maintenance of behavior change.

Reasons
- Maximization of generalization and long-term maintenance of behavior change optimizes (a) the efficiency of services and (b) adaptation across settings and over time, thus reducing the incidence of social disruption and personal distress.
- Avoidance of prolonged or repeated treatment by its nature avoids prolonging or repeating and, therefore, exacerbating the intrusiveness of services.
Implications

- A focus of services should be the identification and engagement of people who will monitor and reinforce behavior change over the long term (for example, an extended family member, a teacher, a youth club worker, a public health nurse, and/or a clergyperson who are or could be connected to the family).
- To prevent draining of natural helpers, (a) help should be structured to be reciprocal, and (b) efforts should be made to increase support for helpful adults in the home, the school, and the community (e.g., teachers and other school staff should be recognized for “going the extra mile” to provide help to troubled students and their families, and efforts should be made to reduce barriers to helping [e.g., assistance in management of high stress]).
- Efforts should be made to build a shared worldview and common strategies among adults in the school (e.g., appropriate ongoing monitoring and humane responses at times of student distress—even if not specifically school-related—should become “natural”); toward that end, school administrators and opinion leaders in the faculty should be enlisted as allies in program development and marketing.

3. Services should emphasize the positive and should build on systemic resources.

Reasons

- Such an approach by its nature offers something to build from; it is solution-focused.
- Such an approach is reinforcing; it makes people feel better.
- Such an approach creates less resistance and, therefore, is less frustrating to all concerned.
- Such an approach minimizes stigma.

Implications

- Assessment should include a primary focus on assets of the child and the settings of which he or she is a part, particularly existing and potential constructive relationships for the child and the people working with the child.
- Efforts need to be made to shift the mindset of responsible adults toward a positive view; in some instances, this approach requires a culture change to alter, e.g., “professional gossip” about children with emotional disturbance.
- The adults in and related to the school (including those employed by other agencies) should think of themselves as a team; in determining responsibilities, the key question is not what one's professional role demands, but instead who has the skills or other attributes that best enable fulfillment of a service plan for a child and his or her family.

4. Services should focus in part on creation of systems to support positive family-school relationships.

Reasons

- Parent participation facilitates children's achievement.
- Parental monitoring of children's behavior is critical in the development and maintenance of positive peer relations and avoidance of delinquent behavior.
- Such effects are fostered by institutions and individuals offering family support.

Implications

- A primary initial focus of school-based services should be the development of a consensus throughout the school community that, even in difficult circumstances, parents are almost always resources for their children and that they are potential allies in services to help their children.
- Therefore, there should be a zero-reject policy in regard to services for parents as well as children; a primary objective is the elimination of overt or de facto exclusion of children and families from the school community.
- Teachers and counselors should regularly contact parents with good news about their children.
- Family involvement, including home visits, should be a routine element of therapeutic services.
- In comprehensible formats and in the spirit of partnership, parents should regularly be provided with information about ways that they can assist their children in education outside regular school hours.
- Home-based tutoring of children and mentoring and support for parents in facilitation of their children's education should be widely available.
- Coordination of school-family relationships, including development of resources for such efforts, should be a clearly designated part of at least one person's job in each school.
5. Services should reflect a long-term developmental view, consistent with the 13 or 14 years of school involvement that most children and their families have.

**Reasons**
- Services are most helpful when they match the problems faced by children of a given age and build upon their resources, including the community institutions developed for children of that age.
- The long-term involvement of the schools with children and their families enables (a) familiarity with the pupils and their families and, therefore, the capacity of school personnel to notice when causes of sorrow, anxiety, or joy are present and (b) sequential development of social-cognitive skills of children and leadership skills of their parents.
- Transitions between schools present particular challenges for children --- a fact reflected in developmental epidemiology of mental health problems.

**Implications**
- Services should be designed to sustain parent involvement on developmentally relevant tasks across the school years and to facilitate parents' and students' development as leaders.
- Services should support the fulfillment of developmental tasks (e.g., enhancement of elementary-school-aged children's skills in making friends).
- Services should reflect the age-related changes in incidence and prevalence of mental health problems (e.g., the marked increase (relative to younger children and to earlier generations) in transient depression among high school students, related, for example, to break-ups of dating relationships, a high-risk time for suicide attempts).

6. Service definitions, record-keeping rules, and other administrative procedures should flow logically from service principles.

**Reason**
- Humane, efficient, and effective service delivery is the essence of agency responsibility; agency procedures should be optimally consistent with that responsibility.

**Implications**
- Intake and other procedures should be no more intrusive than necessary to meet clinical needs.
- Flextime should be available to facilitate school-based professionals' assistance to families of working parents.
- Record-keeping should be linked to therapeutic purposes and related quality assurance; e.g., forms should facilitate staff's continuous application of a logic model to their work so that services are closely linked to their purpose.
- Personnel assignments should remain stable insofar as possible to facilitate stability of working relationships.
- Merit evaluations should reflect the conformance of providers' work with these principles.

7. Providers should have a commitment to evidence-based practice.

**Reason**
- In order to justify the intrusion into consumers' lives and the investment of public resources, services should be executed carefully in order to be maximally effective.

**Implications**
- Program design should reflect knowledge about causes and correlates of school-related problems in childhood and adolescence.
- Providers' use of time should bear a logical relation to scientific knowledge about the problems being prevented or alleviated.
- Providers should have a commitment to ongoing evaluation of their work and to use of the resulting knowledge in program improvement.
- Systems should be available for ongoing diffusion of knowledge and for supervision and consultation based on these principles.