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## School–Community Relations: Policy and Practice

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School personnel long have understood that if schools are to function well and students are to learn effectively, factors that interfere with students' learning and performance must be addressed. Some efforts have been made to do so. These include reforms designed to enhance school–community relations. Effective school–community connections have the potential to expand opportunities for improving the quality of youngsters' lives and their expectations for a positive future by addressing barriers to learning and promoting healthy development.

The litany of barriers to learning is all too familiar to anyone who works with students in schools. Too often, available resources are insufficient to the task of providing basic developmental and learning opportunities. Thus, youngsters bring to school a variety of problems stemming from restricted opportunities associated with poverty, difficult and diverse family circumstances, poor language skills, inadequate health care, and more. How many are affected? Figures vary. Harold Hodgkinson (1989), Director of the Center for Demographic Policy, estimated that 40% of young people are in very bad educational shape and at risk of failing to fulfill their promise. Relatively few of these children start out with internal factors (psychological and/or biological) predisposing them to trouble. The majority end up having difficulties because they have experienced a range of external barriers that interfere with their succeeding at school (e.g., violence, drugs,

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## ENSURING SAFE SCHOOL ENVIRONMENTS

*Exploring Issues—Seeking Solutions*

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frequent school changes, and a host of problems that confront recent immigrants and families living in poverty).

Ultimately, addressing barriers to learning must be approached from a social policy perspective. Fundamental systemic reforms are required that can improve practices for supporting and enabling learning. As discussed in this chapter, a major facet of all this is the development of a comprehensive, integrated continuum of community and school programs (Adelman, 1996b; Schorr, 1997).

### ENHANCING SCHOOL-COMMUNITY CONNECTIONS TO ADDRESS BARRIERS TO STUDENT LEARNING

Initiatives to link community resources with each other and with schools are under way across the country. Along with such initiatives has come an increasing emphasis on establishing *collaboratives* involving school, home, and community as one way to provide more support for schools, students, and families (Adler & Gardner, 1994; Schorr, 1997). The interest in such collaboration is bolstered by the renewed concern for countering widespread fragmentation of school and community interventions (Dryfoos, 1994). The hope is that, by integrating available resources, a significant impact can be made on a myriad of "at risk" factors. There is much to learn from these efforts.

Various levels and forms of collaboration are being tested, including statewide initiatives in California, Florida, Kentucky, Missouri, New Jersey, Ohio, Oregon, and Utah among others. The aims are to improve coordination and eventually integrate many programs and enhance their linkages to school sites. To these ends, major demonstration projects across the country are incorporating as many health, mental health, and social services as feasible into "centers" (including school-based health centers, family and parent centers) established at or near a school. They adopt terms such as school-linked and coordinated services, wraparound, one-stop shopping, full-service schools, and community schools (Adelman, 1996a; Dryfoos, 1994). There are projects to (a) improve access to health services and access to social service programs, such as foster care, family preservation, child care; (b) expand after-school academic, recreation, and enrichment, such as tutoring, youth sports and clubs, art, music, museum programs; (c) build systems of care, such as case management and specialized assistance; (d) reduce delinquency (preventing drug abuse and truancy, providing conflict mediation and reducing violence); (e) enhance transitions to work/career/postsecondary education; and (f) enhance life in school and community, such as programs to adopt a school, use of volunteer and peer supports, and building neighborhood coalitions.

With respect to a host of concerns, then, there is considerable interest in developing strong relationships between school sites and public and private community agencies. Such interest meshes nicely with the renewed at-

tention given to human service integration over the past 20 years. Major aims include reducing fragmentation of effort and, in the process, evolving better ways to meet needs and use existing resources.

### **Orientations to School—Community Initiatives**

In analyzing school–community initiatives, Franklin and Streeter (1995) grouped them as informal, coordinated, partnerships, collaborations, and integrated services. These categories are seen as differing in terms of the degree of system change required. As would be anticipated, most initial efforts focus on developing informal relationships and beginning to coordinate services. The following are a few examples of different orientations to connecting schools and communities.

*School-Linked Services.* With a view to improving access to and for clients, community agencies have developed the notion of school-linked services. A nationwide survey of school board members reported by Hardiman, Curcio, and Fortune (1998) indicates widespread presence of school-linked programs and services in school districts. For purposes of the survey, school-linked services were defined as “the coordinated linking of school and community resources to support the needs of school-aged children and their families” (p. 37). The researchers concluded that school-linked services are used in varying degrees to address many educational, psychological, health, and social concerns, including substance abuse, job training, teen pregnancy, juvenile probation, child and family welfare, and housing. Not surprisingly, the majority of schools report using school-linked resources as part of their efforts to deal with substance abuse; far fewer report such involvement with respect to family welfare and housing. Most of this activity reflects collaboration with agencies at local and state levels. Respondents indicate that these collaborations operate under a variety of arrangements: “legislative mandates, state-level task forces and commissions, formal agreements with other state agencies, formal and informal agreements with local government agencies, in-kind (nonmonetary) support of local government and nongovernment agencies, formal and informal referral network, and the school administrator’s prerogative” (Hardiman et al., 1998, p. 38). About half the respondents note that their districts have no policies governing school-linked services.

In some instances, initiatives for school-linked services involve enough community agencies that they are described as “full-service schools.” Communities that have developed “systems of care” also strive to encompass school programs and services in their wraparound efforts.

*Youth Development Programs.* In addition to involvements related to school-linked services, schools are connecting, for example, with the grow-

ing youth development movement. This movement encompasses concepts and practices aimed at promoting protective factors, asset building, wellness, and empowerment. It embraces a wide range of stakeholders, including families and community-based and -linked organizations such as public and private health and human service agencies, schools, businesses, youth and faith organizations, and so forth. In some cases, institutions for postsecondary learning also are involved, but the nature and scope of their participation varies greatly, as does the motivation for the involvement. Youth development initiatives encourage a view of schools not only as community centers where families can easily access services, but also as hubs for community-wide learning and activity. Increased federal funding for after-school programs at school sites is enhancing this view by expanding opportunities for recreation, enrichment, academic supports, and child care (Larner, Zippiroli, & Behrman, 1999).

*Strengthening Families and Neighborhoods.* Going beyond school-linked services and youth development, Schorr (1997) approached community-school initiatives from the perspective of strengthening families and neighborhoods. Based on her analysis of promising partnerships, she concluded that a synthesis is emerging that "rejects addressing poverty, welfare, employment, education, child development, housing, and crime one at a time. It endorses the idea that the multiple and interrelated problems ... require multiple and interrelated solutions" (p. 319).

### Current Status of School-Community Initiatives

In surveying school-community initiatives, Melaville and Blank (1998) stated that the numbers are skyrocketing and the diversity in terms of design, management, and funding arrangements is dizzying and daunting. Their analysis led them to suggest (a) the initiatives are moving toward blended and integrated purposes and activity and (b) the activities are predominantly school based and the education sector plays "a significant role in the creation and, particularly, management of these initiatives" (p. 100) and there is a clear trend "toward much greater community involvement in all aspects" (p. 100) of such initiatives—especially in decision making at both the community and site levels. They also stressed that "the ability of school-community initiatives to strengthen school functioning develops incrementally" (p. 100), with the first impact seen in improved school climate.

Findings from our work (e.g., Center for Mental Health in Schools, 1996, 1997) are in considerable agreement with other reports. However, we also stress that the majority of school and community programs and services still function in relative isolation of each other. Most continue to focus on discrete problems and specialized services for individuals and small groups. Moreover, because the primary emphasis is on restructuring com-

munity programs and colocating some services on school sites, a new form of fragmentation is emerging as community and school professionals engage in a form of parallel play at school sites. Thus, ironically, whereas initiatives to integrate health and human services are meant to reduce fragmentation (with the intent of enhancing outcomes), in many cases fragmentation is compounded because these initiatives focus mostly on *linking community services to schools*. It appears that too little thought has been given to the importance of *connecting community programs* with existing programs operated by the school. As a result, when community agencies colocate personnel at schools, such personnel tend to operate in relative isolation of existing school programs and services. Little attention is paid to developing effective mechanisms for coordinating complementary activity or integrating parallel efforts. Consequently, a youngster identified as at risk for substance abuse, dropout, and suicide may be involved in three counseling programs operating independently of each other.

Based on the evidence to date, fragmentation is worsened by the failure of policymakers at all levels to recognize the need to reform and restructure the work of school and community professionals who are in positions to address barriers and promote development. Reformers mainly talk about "school-linked integrated services"—apparently in the belief that a few health and social services will do the trick. Such talk has led some policymakers to the mistaken impression that community resources alone can effectively meet the needs of schools in addressing barriers to learning. In turn, this has led some legislators to view linking community services to schools as a way to free up the dollars underwriting school-owned services. The reality is that even when one adds together community and school assets, the total set of services in impoverished locales is woefully inadequate. In situation after situation, it has become evident that as soon as the first few sites demonstrating school-community collaboration are in place, community agencies find they have stretched their resources to the limit. Another problem is that the overemphasis on school-linked services is exacerbating rising tensions between school district service personnel and their counterparts in community-based organizations. As "outside" professionals offer services at schools, school specialists often view the trend as discounting their skills and threatening their jobs. At the same time, the "outsiders" often feel unappreciated and may be rather naive about the culture of schools. Conflicts arise over "turf," use of space, confidentiality, and liability. Thus, collaboration still is not the norm.

In general, efforts to enhance school-community connections are based in policy initiatives that not only lack cohesiveness, but are formulated in an ad hoc manner that leads to piecemeal and fragmented practices. Not surprisingly, the fragmentation has worked against effectiveness.

More fundamentally, problems arise because prevailing approaches to school reform continue to *marginalize* all efforts designed to address barri-

ers to student learning (Center for Mental Health in Schools, 1997). Marginalization in policy leads to marginalization in practice. The consequences are seen in the lack of attention given to addressing barriers to learning in consolidated plans and program quality reviews and the lack of efforts to map, analyze, and rethink resource allocation. The effects of marginalization also are seen in the ongoing disregard for the need to restructure what schools and communities already are doing to prevent and ameliorate youngsters' problems. This results in the continued failure to reframe the work of professionals whose job it is to deal with students' behavioral, learning, and emotional problems. All this tends to maintain the token way such matters are dealt with in preservice and continuing education for administrative and line staff. Given this state of affairs, it is not surprising how little is known about effective processes and mechanisms for building school-community connections to prevent and ameliorate young people's problems. Clearly, a great deal more work is needed on the problem of connecting the resources of schools, families, and communities.

Nevertheless, a reasonable inference from available data is that school-community collaborations can be successful and cost effective over the long run. They not only improve access to services, but they also seem to encourage schools to open their doors in ways that enhance recreational, enrichment, and remedial opportunities and family involvement.

### **Moving Beyond the Notion of School-Linked Services and Full Service Schools**

Though not prescriptive, analyses of deficiencies related to current policy underscore the need for new directions and for bold thinking in formulating new directions. Inspiration can be found in emerging trends and innovative "big picture" analyses for enhancing the well-being of youngsters (Adelman & Taylor, 1993, 1997, 1998a, 2000; Dryfoos, 1998; Schorr, 1997).

For example, the growing youth development and community school movements clearly expand intervention efforts beyond services and programs. They often include a focus on ensuring that services are available. However, they also encompass (a) programs for community and social capital mobilization and (b) initiatives to build community policies and structures to enhance youth support, safety, recreation, work, service, and enrichment (Burt, 1998; Cahill, 1998; Catalano & Hawkins, 1995; Dryfoos, 1998; Schorr, 1997). In some cases, institutions for postsecondary learning also are involved, but the nature and scope of participation varies greatly. By moving beyond school-linked services, such initiatives encourage a view of schools not only as community centers where families can easily access services, but also as hubs for community-wide learning and activity. Increased federal funding for after-school programs at school sites is enhancing this view by expanding opportunities for recreation, enrichment,

academic supports, and child care. Adult education and training at school sites also help change the old view that schools close when the youngsters leave. Indeed, the concept of a "second shift" at school sites is beginning to spread in communities across the country.

All this is moving in the right direction. However, even more comprehensive approaches are needed.

### **TOWARD COMPREHENSIVE, MULTIFACETED APPROACHES**

Based on our understanding of prevailing initiatives and related efforts for addressing problems experienced by young people, we submit the following propositions. We suggest that many specific problems are best pursued as an integrated part of a comprehensive, multifaceted continuum of interventions designed to address barriers to learning and promote healthy development. For another, we submit that comprehensive, multifaceted approaches are feasible only if the resources of schools, families, and communities are woven together. A corollary of this is that the committed involvement of school, family, and community is essential in maximizing intervention implementation and effectiveness.

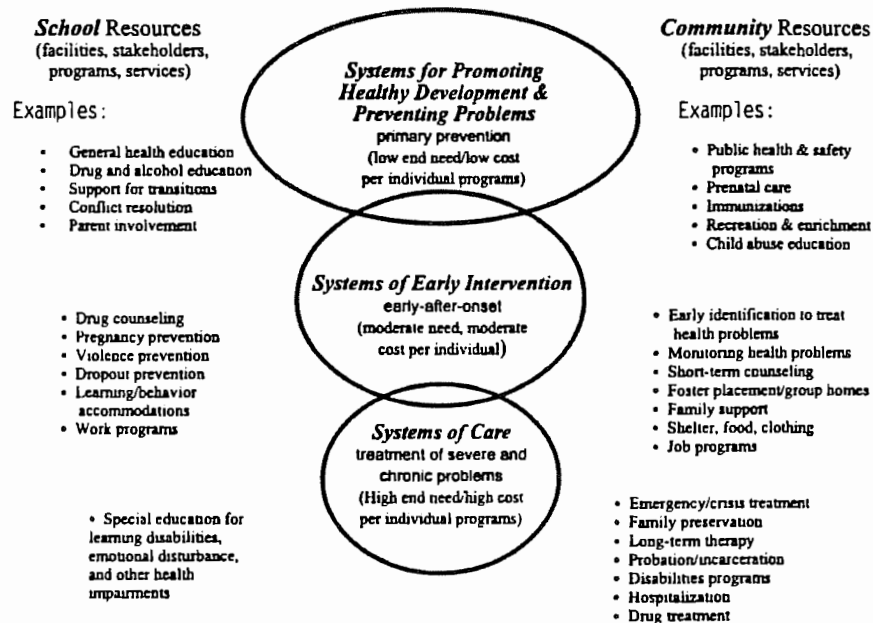
With these propositions firmly in mind, in this section we discuss two topics. Each represents a major arena for policy and practice to make the aforementioned propositions a reality. First, we place all initiatives for addressing barriers to learning within the context of a comprehensive and multifaceted continuum of braided interventions. Then, we explore the importance of thoroughly integrating such initiatives into prevailing school reforms.

#### **A Comprehensive and Multifaceted Continuum of Braided Interventions**

Problems experienced by students generally are complex in terms of cause and needed intervention. This means interventions must be comprehensive and multifaceted.

How comprehensive and multifaceted? As illustrated in Fig. 7.1, the desired interventions can be conceived as a continuum ranging from a broad-based emphasis on promoting healthy development and preventing problems (both of which include a focus on wellness or competence enhancement) through approaches for responding to problems early-after-onset, and extending on to narrowly focused treatments for severe/chronic problems. Not only does the continuum span the concepts of primary, secondary, and tertiary prevention, it can incorporate a holistic and developmental emphasis that envelops individuals, families, and the contexts in which they live, work, and play. The continuum also provides a framework for adhering to the principle of using the least restrictive and nonintrusive





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

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

FIG. 7.1. Interconnected systems for meeting the needs of all students. From various public domain documents authored by H. S. Adelman and L. Taylor and circulated through the Center for Mental Health in Schools at UCLA. Adapted by permission.

forms of intervention required to appropriately respond to problems and accommodate diversity.

Moreover, given the likelihood that many problems are not discrete, the continuum can be designed to address root causes, thereby minimizing tendencies to develop separate programs for each observed problem. In turn, this enables increased coordination and integration of resources which can increase impact and cost-effectiveness. Ultimately, as indicated in Fig. 7.1, the continuum can be evolved into integrated *systems* by enhancing the way the interventions are connected. Such connections may involve hori-

zontal and vertical restructuring of programs and services (a) within jurisdictions, school districts, and community agencies (e.g., among divisions, units) and (b) between jurisdictions, school and community agencies, public and private sectors, among clusters of schools, and among a wide range of community resources.

### **Integrating with School Reform**

It is one thing to stress the desirability of developing a full continuum of interventions; it is quite another to propose that schools should be involved in doing so. In the long run, the success of such proposals probably depends on anchoring them in the context of the mission of schools. That is, the recommendations must be rooted in the reality that schools are first and foremost accountable for educating the young. In particular, such proposals must reflect an appreciation that schools tend to become concerned about addressing a problem when it clearly is a barrier to student *learning*. Moreover, it is the entire constellation of external and internal barriers to learning that argues for schools, families, and communities working together to develop a cohesive, comprehensive, multifaceted approach. Indeed, to achieve their educational mission, schools need to address barriers to learning and to do so with more than school-linked, integrated health and human services. Addressing barriers involves comprehensive, multifaceted strategies that can be achieved only through strong school–community connections. School–community connections are particularly important in poverty areas where schools often are the largest piece of public real estate in the community and also may be the single largest employer.

As stressed earlier, however, the current situation is one where schools marginalize everything but efforts to improve teaching and enhance the way schools are managed. Therefore, we suggest that policymakers must move beyond what fundamentally is a two-component model dominating school reform.

Though improving instruction and the management of schools obviously are essential, our work points to the need for a three-component framework for reform (see Adelman, 1996a, 1996b; Adelman & Taylor, 1994, 1997, 1998a; Center for Mental Health in Schools, 1996, 1997, 1998, 2000). The third component is conceived as fundamental and essential for developing comprehensive, multifaceted approaches to enable learning by addressing barriers (e.g., thus we call it an enabling component).

When current policy and practice are viewed through the lens of this third component, it becomes evident how much is missing in prevailing efforts to enable learning, development, and teaching. The third component provides both a basis for combating marginalization and a focal point for developing a comprehensive framework for policy and practice. When such a component is elevated to a high policy level, it finally will be feasible

to unify disparate approaches to preventing and ameliorating psychosocial problems and promoting wellness, thereby reducing fragmentation.

Emergence of a cohesive component to enable learning, of course, requires policy reform and operational restructuring that allow for weaving together what is available at a school, expanding this through integrating school, community, and home resources, and enhancing access to community resources by connecting and linking as many as feasible to programs at the school. We see expanded school reform as a foundation upon which to mesh resources for minimizing risk factors and fostering healthy development. At the same time, there must be a rethinking of community resources and how they can best be connected with schools.

It is important to reiterate that a component to address barriers is central to a school's instructional mission and current activity. In policy and practice, all categorical programs, such as Title I, safe-school and drug-free-school programs, and special education, can be integrated into such a comprehensive component. Of course, accomplishing this requires developing new types of mechanisms that can coordinate and eventually integrate school-community-home resources. This brings us to the topic of infrastructure.

### **BUILDING AN INTERVENTION INFRASTRUCTURE FROM LOCALITIES OUTWARD**

Effective school-home-community partnerships require an infrastructure of organizational and operational mechanisms to provide oversight, leadership, resource development, and ongoing support. They are used to (a) arrive at decisions about resource allocation, (b) maximize systematic and integrated planning, implementation, maintenance, and evaluation of existing activity, (c) reach out to expand formal working relationships, and (d) upgrade and modernize in ways that reflect the best intervention thinking and use of technology. These tasks require that staff at various levels adopt some new roles and functions and that families, youth, and other representatives of the community enhance their involvement. The work also calls for redeployment of existing resources, as well as finding new ones.

From the perspective of decentralization, the necessary infrastructure should not be conceived as a hierarchy that starts centrally and works its way down to localities. Rather, the process should be one of building from localities outward. That is, first the focus is on mechanisms at the school-neighborhood level. Then, based on analyses of what is needed to facilitate and enhance efforts at a locality, mechanisms are conceived that enable several school-neighborhood-home collaborations to work together to increase efficiency and effectiveness and achieve economies of scale. Then, systemwide mechanisms are (re)designed to provide support for what each locality is trying to develop. Such a process is highly supportive of the intent to evolve a comprehensive continuum of interventions that plays out

effectively in *every locality*. A few examples may help clarify these points and highlight some emerging ideas.

### **Site-Based Leadership and a Resource-Oriented Team**

No matter how well intentioned and motivated participants may be, creating school–community connections takes careful planning and the development of well-conceived mechanisms that ensure school–community–home partnerships coalesce effectively at the local level and are appropriately sanctioned and endowed by governance bodies. A school and its surrounding community are a reasonable focal point around which to build a multilevel organizational plan. Such a focus meshes nicely with contemporary restructuring views that stress increased school-based and neighborhood control.

First mechanisms include designated leadership at the school and a resource-oriented team (e.g., a Resource Coordinating Team) consisting of school and community partners (Adelman, 1993; Adelman & Taylor, 1998b; Rosenblum, DiCecco, Taylor, & Adelman, 1995). Properly constituted, a resource team steers the development of local partnerships and ensures maintenance and improvement of a multifaceted and integrated continuum of interventions. For example, with respect to substance abuse prevention, such a team can help reduce fragmentation and enhance cost-efficacy by analyzing, planning, coordinating, integrating, monitoring, evaluating, and strengthening ongoing efforts.

A resource-oriented team differs from those created to review students (such as a student assistance or success team, a teacher assistance team, a case management team). That is, its focus is not on specific cases, but on clarifying resources and their best use. Such a team provides what often is a missing mechanism for managing and enhancing systems to coordinate, integrate, and strengthen interventions. For example, the team can take responsibility for (a) identifying and analyzing activity and resources with a view to improving how problems are prevented and ameliorated, (b) ensuring there are effective systems to promote use of prereferral interventions, referral, case management, and quality assurance processes, (c) guaranteeing procedures for effective program management and for communication among school and community staff and with the home, and (d) exploring ways to redeploy and enhance resources—such as clarifying which activities are nonproductive and suggesting better uses for the resources, as well as reaching out to connect with additional resources in the school district, home, and neighborhood.

Creation of resource-oriented teams provides essential mechanisms for starting to weave together existing school, home, and community resources and encourage services and programs to function in an increasingly cohesive way. Such teams also are vehicles for building working relationships and can play a role in solving turf and operational problems, developing plans to en-

sure availability of a coordinated set of efforts, and generally improving the attention paid to developing comprehensive, integrated approaches for addressing barriers to student learning. Although a resource-oriented team might be created solely around psychosocial programs, such a mechanism is meant to bring together representatives of all major programs and services at a school and in the neighborhood. This includes such school personnel as guidance counselors, safe-school and drug-free-school staff, attendance and dropout counselors, psychologists, nurses, social workers, health educators, special-education personnel, after-school program staff, and bilingual and Title I program coordinators. It also includes representatives of any community agency that is significantly involved with schools and, of course, parents and older students. Beyond these, such a team is well advised to add the energies and expertise of administrators, regular classroom teachers, noncertificated staff, the local business community, the faith community, and others willing to make the commitment.

Where creation of "another team" is seen as a burden, existing teams can be asked to broaden their scope. At school sites, teams such as student assistance teams, teacher assistance teams, site-based management teams, and school crisis teams have extended their functions to encompass resource mapping, analyses, coordination, and enhancement. To do so, however, they must take great care to structure their agenda so that sufficient time is devoted to the additional tasks.

Most schools and agencies do not have an administrator whose job definition includes the leadership role and functions related to the aforementioned activity. Moreover, most principals or agency heads don't have time to add such a role to their job descriptions. Thus, we find it imperative that a school and agency establish policies and restructure jobs to ensure there is a *site administrative lead* whose job encompasses this role and its many functions. In addition, a *site staff lead* can be identified from the cadre of line staff who have interest and expertise with respect to school-community-home partnerships. If a locality has a center facility (e.g., Family or Parent Resource Center or a Health Center), the center's coordinator would be one logical choice for this role. Such leads must sit on the resource team and then represent and advocate the team's recommendations whenever governance and administrative bodies meet—especially at key times when decisions are made regarding programs and operations (e.g., use of space, time, budget, and personnel). Besides facilitating the development of a potent approach for developing school-community-home partnerships, administrative and staff leads carry out key functions in daily implementation, monitoring, and problem solving of such partnerships.

### **Building Outward**

Conceptualization of the necessary local-level infrastructure helps delineate what supportive mechanisms should be developed to enable several

school-neighborhood collaborations to work together (Adelman, 1993; Center for Mental Health in Schools, 1999a, 1999b). Such a perspective also provides the necessary foundation for defining what is needed at systemwide levels to support localities.

Neighboring localities have common concerns and may have programmatic activity that can use the same resources. By sharing, they can eliminate redundancy and reduce costs. Some school districts already pull together clusters of schools to combine and integrate personnel and programs. These are sometimes called complexes or families of schools. Some cities and counties have developed local planning groups involving public and private agencies and community representatives. A multilocality *resource council* provides a key infrastructure mechanism for work at this level. Such councils can help ensure cohesive and equitable deployment of resources and also can enhance the pooling of resources to reduce costs. They can be particularly useful for linking schools and community resources and integrating the efforts of high schools and their feeder middle and elementary schools. Multilocality councils are especially attractive to community agencies who often don't have the time or personnel to link with individual schools. To these ends, one to two representatives from each local resource team can be chosen to form a council, meeting at least once a month. Specifically, such a council helps (a) coordinate and integrate programs serving multiple schools and neighborhoods, (b) identify and meet common needs for capacity building including staff development, and (c) create linkages and collaborations among schools and agencies. More generally, it provides a mechanism for leadership, communication, maintenance, quality improvement, and ongoing development of a comprehensive continuum of programs and services. Natural starting points for councils are the sharing of needs assessment, resource mapping, analyses, and recommendations for reform and restructuring. Specific areas of initial focus may be on such matters as community-school violence and substance abuse and developing comprehensive, multifaceted, and integrated prevention programs.

Local and multisite mechanisms are not sufficient. Systemwide policy guidance, leadership, and assistance are required. In establishing comprehensive approaches and partnerships, a systemwide *policy* commitment represents an essential starting point. Then, systemwide mechanisms must be established and must reflect a clear conception of how each supports local activity. Several systemwide mechanisms seem essential for coherent oversight and leadership in developing, maintaining, and enhancing comprehensive approaches involving school-community-home partnerships. One is a *systemwide leader* with responsibility and accountability for the systemwide vision and strategic planning related to (a) developing collaborations to evolve comprehensive approaches and (b) ensuring coordination and integration of activity among localities and systemwide. The leader's

functions also encompass evaluation, including determination of equity in program delivery, quality improvement reviews of all mechanisms and procedures, and ascertaining results.

Two other recommended mechanisms at this level are a *system-wide leadership group* and a *resource-coordinating body* (for a school district/community). The former can provide expertise and leadership for the ongoing evolution of an initiative; the latter can provide guidance for operational coordination and integration across the system. The composition for these should have some overlap. The systemwide resource coordinating body should include representatives of multilocality councils and planning bodies. The leadership group should include (a) key administrative and line staff with relevant expertise and vision, (b) staff who can represent the perspectives of the various stakeholders, and (c) others whose expertise (e.g., public health, mental health, social services, recreation, juvenile justice, postsecondary institutions) make them invaluable contributors.

### School Boards

Matters related to comprehensive approaches and school–community–home partnerships appear regularly on the agenda of local school boards. The problem is that each item tends to be handled in an ad hoc manner, without sufficient attention to the whole picture. One result is that the administrative structure in the school district is not organized in ways that coalesce its various functions (programs, services) for addressing barriers and promoting healthy development. The piecemeal structure reflects the marginalized status of such functions and both creates and maintains fragmented policies and practices. Analyses suggest that boards of education need a standing committee that deals in depth and consistently with these matters so they are addressed in more cohesive and effective ways that fully reflect how various resources and functions relate to each other (Center for Mental Health in Schools, 1998).

## THE CURRICULUM OF AN ENABLING COMPONENT

Adoption by school policymakers of an enabling component affirms the proposition that a comprehensive, multifaceted, integrated continuum of interventions is essential in addressing the needs of youngsters who encounter barriers interfering with academic progress (e.g., Adelman & Taylor, 1994, 1997; Center for Mental Health in Schools, 1999b). (Note: Enabling is defined as “providing with the means or opportunity; making possible, practical, or easy.”) The continuum presented in Fig. 7.1 helps guide development of such a cohesive, integrated approach.

Operationalizing the concept of an enabling component requires an additional framework. This framework outlines six areas of enabling activity we refer to as the component’s curriculum. This curriculum encompasses pro-

grams to (a) enhance classroom-based efforts to enable learning, (b) provide prescribed student and family assistance, (c) respond to and prevent crises, (d) support transitions, (e) increase home involvement in schooling, and (f) reach out to develop greater community involvement and support (see Fig. 7.2). Each of these is displayed in Fig. 7.2 and is described briefly in the following subsections. (For a fuller description, see Adelman, 1996a; Adelman & Taylor, 1998b.)

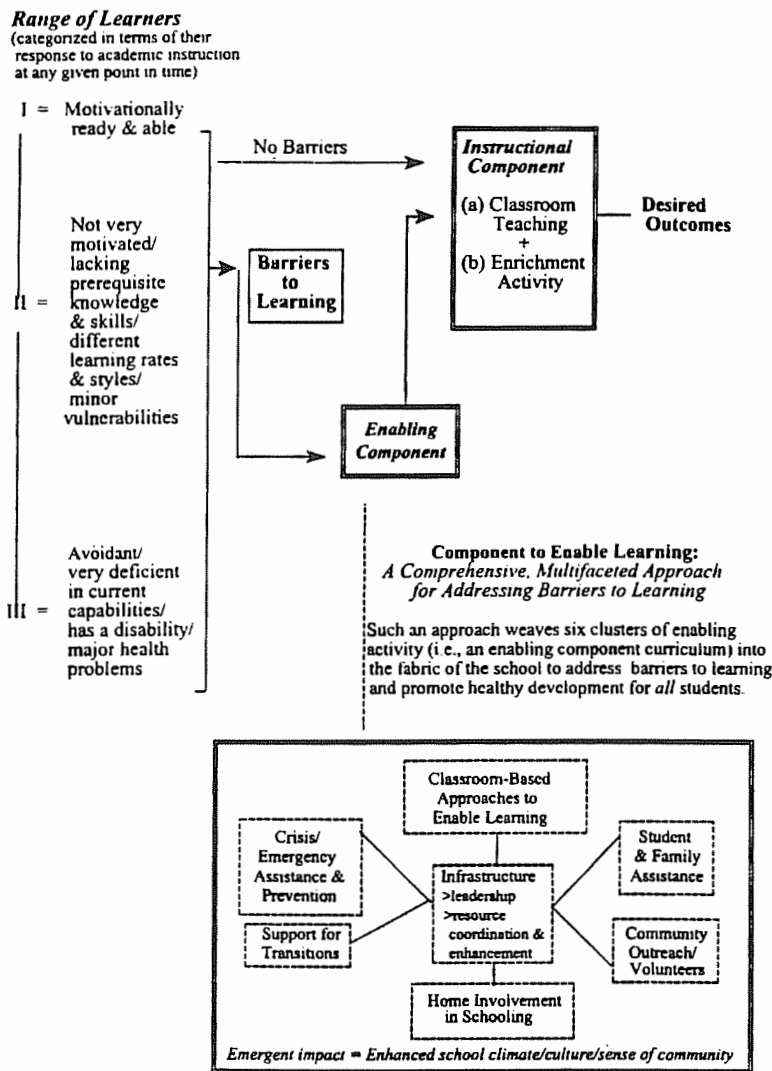


FIG. 7.2. An enabling component to address barriers to learning and enhance healthy development at a school site. (From various public domain documents authored by H. S. Adelman and L. Taylor and circulated through the Center for Mental Health in Schools at UCLA. Adapted by permission.)



*Classroom-Focused Enabling.* Programmatic activity to enhance classroom-based efforts to enable learning is accomplished by increasing teachers' effectiveness in accommodating a wider range of individual differences, fostering a caring context for learning, and preventing and handling a wider range of problems when they arise. Such efforts are essential to increasing the effectiveness of classroom instruction, supporting inclusionary policies, and reducing the need for specialized services. Work in this area requires systematic programs to (a) personalize professional development of staff; (b) develop the capabilities of paraeducators, assistants and volunteers, (c) provide temporary out-of-class assistance for students, and (d) enhance resources in the classroom.

*Support for Transitions.* Students and their families are regularly confronted with a variety of transitions (e.g., changing schools, changing grades, inclusion from special education, before- and after-school transitions, school-to-work or postsecondary education). Examples of transition programs include (a) schoolwide activities for welcoming new arrivals and ensuring ongoing social supports, (b) articulation strategies to support grade transitions and special-education transitions, (c) before- and after-school and vacation activities to enrich learning and provide recreation in a safe environment, and so forth.

*Home Involvement in Schooling.* Among the programs included here are activities to (a) address the learning and support needs of adults in the home, (b) help families learn how to support students with schoolwork, (c) improve communication and connections between home and school, and (d) elicit collaborations and partnerships from those at home to meet school and community needs.

*Crisis Assistance and Prevention.* Schools must respond to, minimize the impact of, and prevent crises. This requires systematic programs for (a) emergency response at a school and community wide, and (b) minimizing risk factors to prevent crises related to violence, suicide, child abuse. A key mechanism in this area is development of a crisis team trained in emergency response procedures. The team can take the lead in planning ways to prevent crises by developing programs for conflict mediation and enhancing a caring school culture.

*Student and Family Assistance.* This one area encompasses most of the services that are the focus of integrated service models. Social, physical, and mental health assistance available in the school and community are integrated to provide personalized services. Systems for triage, case, and resource management increase consistency and effectiveness.

*Community Outreach for Involvement and Support.* Most schools do their job better when they are an integral and positive part of the community. For schools to be integral, steps must be taken to create and maintain collaborative connections. Outreach can be made to (a) public and private agencies, (b) higher education, (c) business and professional organizations, (d) churches, and (e) volunteer service organizations. One facet of all this outreach is establishment of programs designed to recruit, train, and maintain volunteers to assist students in school programs.

From a psychological perspective, the impact of developing sound programs related to each area is establishment of an atmosphere that encourages mutual support and caring and creates a sense of community. Such an atmosphere can play a key role in preventing learning, behavior, emotional, and health problems. Caring begins when students and families feel they are truly welcomed at schools and have a range of social supports. School and community programs that promote cooperative learning, peer tutoring, mentoring, human relations, and conflict resolution enhance a caring atmosphere.

The usefulness of the concept of an enabling component as a broad unifying focal point for policy and practice is evidenced in its adoption by various states and localities around the country, such as the California Department of Education (1997) and the Los Angeles Unified School District (1995), whose version is called a *Learning Supports* component, and the Hawaii Department of Education (1999), whose version is called a Comprehensive Student Support System. The concept of an enabling component also has been incorporated into the New American Schools' Urban Learning Center Model (1998) as a break-the-mold school reform initiative. The U.S. Department of Education recognized the Urban Learning Center Model as an important evolving demonstration of comprehensive school reform and has included the design in federal legislation as one of 22 outstanding models that schools are encouraged to adopt. (See Table 7.1 for a description of these pioneering initiatives.)

## **POLICY SUPPORT FOR SCHOOL–COMMUNITY CONNECTIONS**

Ironically, policy simply calling for interagency collaboration to reduce fragmentation and redundancy with a view to greater efficiency may, in the long run, be counterproductive to improving school–community connections. In too many instances, school-linked services result only in colocating community agencies on school campuses. As these activities proceed, a small number of students receive services, but little connection is made with school staff and programs.

Development of a comprehensive, integrated approach that effectively addresses barriers to learning requires cohesive policy that facilitates

TABLE 7.1

## A Few Exemplars of Efforts to Restructure Student Supports and Integrate Them With School Reform

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*New American Schools' Urban Learning Center Model.* This is one of the comprehensive school reform designs federal legislation encourages school to adopt. It incorporates a comprehensive, multifaceted, and integrated approach to addressing barriers to learning as a third component of school reform—equal to the instructional and governance components. This third enabling component is called “Learning Supports.” In addition to focusing on addressing barriers to learning, there is a strong emphasis on facilitating healthy development, positive behavior, and asset building as the best way to prevent problems. There is a major emphasis on weaving together what is available at a school, expanding these resources through integrating school/community/home resources, and enhancing access to community resources through formal linkages. A key operational infrastructure mechanism is a resource-oriented team that clarifies resources and their best use. The elements of the learning supports component at each school involve: classroom-focused enabling to ensure a potent focus on commonplace behavior, learning, and emotional problems, support for transitions, crisis assistance and prevention, home involvement in schooling, student and family assistance, and community outreach for involvement and support.

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*Hawaii's Comprehensive Student Support System.* This is the umbrella concept under which the state's Department of Education is developing a continuum of programs/services to support a school-academic, social, emotional, and physical environments so that all students learn. The system provides five level of student support: basic support for all students, informal additional support through collaboration, services through school-level and community programs, specialized services from the Department of Education and/or other agencies, and intensive and multiple agency services. The aim is to align programs and services in a responsive manner to create a caring community. Key elements of the program include personalized classroom climate and differentiated classroom practices, prevention/early intervention, family involvement, support for transitions, community outreach and support, and specialized assistance and crisis/emergency support and follow-through. This range of proactive support requires teaming, organization, and accountability. To help achieve all this, a cadre of school-based and complex level Support Service Coordinators are being trained.

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*Los Angeles Unified School District.* Several years ago, the district formulated a Strategic Plan for Restructuring of Student Health & Human Services. The goals were to (a) increase effectiveness, and efficiency in providing learning supports to students and their families, and (b) enhance partnerships with parents, schools, and community-based efforts to improve outcomes for youth. Building on the same body of work that was used in developing the Urban Learning Center model, the plan called for a major restructuring of school-owned pupil services in order to develop a comprehensive, multifaceted, and integrated “Learning Supports” components to address barriers to learning. Key operational infrastructure mechanisms are a school-based resource team and a cluster coordinating council that focuses on clarifying resources and their best use—all of which are concerned with developing the key elements of the learning supports component at each school. To facilitate restructuring, a cadre of change agents called Organization Facilitators was developed. The plan called for these change agents to assist in establishing the infrastructure at each school and for the high school feeder pattern with the aim of enhancing resource use, as well as integrating other resources from the community.

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*Community Schools.* As exemplified by the Children's Aid Society, Community Schools in New York City is a partnership between the Children's Aid Society, the New York City Board of Education, the school district, and community-based partners. The focus is on a model that is designed to help strengthen the educational process for teachers, parents, and students in a seamless way. The approach combines teaching and learning with the delivery of an array of social, health, child, and youth development services that emphasizes community and parental involvement. Current demonstrations provide on-site child and family support services—from health care clinics and counseling to recreation, extended education, early childhood programs, job training, immigration services, parenting programs, and emergency assistance.

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Note. For more exemplars, see <http://smhp.psych.ucla.edu>. Go to Contents, scroll to Policy Leadership Cadre for MH in Schools, click, and then access the document *Mental Health in Schools: Guidelines, Models, Resources & Policy Considerations*.



blending of many resources. In schools, this includes restructuring to combine parallel efforts supported by general funds, compensatory and special-education entitlement, safe-school and drug-free-school grants, and specially funded projects. In communities, the need is for better ways of connecting agency resources to each other and to schools. The end product should be cohesive and potent school–community partnerships. With proper policy support, a comprehensive approach can be woven into the fabric of every school. Neighboring schools can be linked to share limited resources and achieve powerful school–community connections.

Based on our understanding of the state of the art related to the body of literature that has relevance for creating schoolhome–community partnerships, we can extrapolate some guidelines (Adelman & Taylor, in press). Our intent in doing so is to further underscore the type of policy and systemic changes that researchers and practitioners must be prepared to address if they want to significantly reduce the rates of psychosocial problems that permeate school and community. The guidelines are as follows:

- Move existing *governance* toward shared decision making and appropriate degrees of local control and private-sector involvement—a key facet of this is guaranteeing roles and providing incentives, supports, and training for effective involvement of line staff, families, students, and other community members.
- Create *change teams and change agents* to carry out the daily activities of systemic change related to building essential support and redesigning processes to initiate, establish, and maintain changes over time.
- Delineate high-level *leadership assignments* and underwrite essential *leadership/management training* regarding vision for change, how to effect such changes, how to institutionalize the changes, and how to generate ongoing renewal.
- Establish institutionalized *mechanisms to manage and enhance resources* for school–community partnerships and related systems (focusing on analyzing, planning, coordinating, integrating, monitoring, evaluating, and strengthening ongoing efforts).
- Provide adequate funds for *capacity building* related to both accomplishing desired system changes and enhancing intervention quality over time—a key facet of this is a major investment in staff recruitment and development using well-designed and technologically sophisticated strategies for dealing with the problems of frequent turnover and diffusing information updates; another facet is an investment in technical assistance at all levels and for all aspects and stages of the work.
- Use a sophisticated approach to *accountability* that initially emphasizes data that can help develop effective approaches for collaboration in providing interventions and a results-oriented focus on short-term

benchmarks and that evolves into evaluation of long-range indicators of impact. (Here, too, technologically sophisticated and integrated management information systems are essential.)

Such policy would allow personnel to build the continuum of interventions needed to make a significant impact in addressing the learning, health, and general well-being of all students.

### CONCLUDING COMMENTS

Collaboratives involving the school, home, and community are sprouting in a dramatic and ad hoc manner throughout the country. They have the potential for improving schools, strengthening neighborhoods, and leading to a marked reduction in young people's problems. Or, such "collaborations" can end up being another reform effort that promised a lot, but did little. Whereas it is relatively simple to make informal linkages, establishing major long-term partnerships is complicated. They require vision, cohesive policy, and basic systemic reforms. The complications are readily seen in efforts to evolve a comprehensive, multifaceted, and integrated continuum of interventions. Such a continuum clearly involves much more than linking a few services, recreation, and enrichment activities to schools. Major processes are required to develop and evolve formal and institutionalized sharing of a wide spectrum of responsibilities and resources. And, the intent must be to sustain such partnerships over time.

Comprehensive school-home-community partnerships represent a promising direction for efforts to generate essential interventions to address barriers to learning, enhance healthy development, and strengthen families and neighborhoods. They broaden resources and strategies to enhance caring contexts that support student success. Such partnerships must weave together a critical mass of resources and strategies to enhance caring communities that support all youth and their families and enable success at school and beyond.

Clearly, getting from here to there involves major challenges. From a local perspective, there are three overlapping challenges in developing partnerships for comprehensive, multifaceted programs. One involves weaving existing school resources together. A second entails evolving programs so they are more effective. For this to happen in optimal ways, there must be an extensive restructuring of all school-owned activity, such as pupil services, safe-school and drug-free-school initiatives, and special- and compensatory-education programs. There also must be full integration of such activity with the instructional and management components. The third challenge is to reach out to additional resources and broaden the range of partnerships (e.g., formally connecting school programs with assets at home and in the business and faith communities, as well as collabo-

rating with enrichment, recreation, and service resources in the neighborhood). It is through creating and maintaining collaborations with home and community that schools will not only enhance their effectiveness, but will also clearly be seen as an integral part of the neighborhoods in which they reside.

And, of course, addressing these challenges requires reframing the roles of professionals who work in schools and communities. Their new roles will entail multifaceted functions—providing vision and leadership that transforms how schools and communities address barriers to learning and enhance health development.

In highlighting the aforementioned matters, we have sketched out new directions for advancing policy and practice (and research). We have also noted that pioneering efforts are under way. It is encouraging that such important systemic changes are in the works.

## CHAPTER ACTIVITIES

### For Discussion

1. In the chapter, the authors offer the following propositions:

We suggest that many specific problems are best pursued as an integrated part of a comprehensive, multifaceted continuum of interventions designed to address barriers to learning and promote healthy development. For another, we submit that comprehensive, multifaceted approaches are feasible only if the resources of schools, families, and communities are woven together. A corollary of this is that the committed involvement of school, family, and community is essential in maximizing intervention implementation and effectiveness.

What do the authors mean by these statements?

2. What national policies and practices operate for/against effective school–community connections? Make two lists, one “for” and one “against.” Include a statement explaining each and the reason for its inclusion in one or the other list.
3. Do the same for state policies in your state.
4. Do the same for local policies in your district.

### Case Study

Mary began teaching in an urban school in a midwestern city of approximately 200,000 people. She returned to her hometown in a small college

town to student teach from a Big Ten university in a small college town because there were not enough student-teaching placements nearer to the university. Not expressing a preference for placement, she was assigned to an inner-city school in a neighborhood that was largely African-American and low in terms of socioeconomic status. During her semester of student teaching, a first-grade teacher resigned for personal reasons and Mary was offered the position contingent upon successful completion of her student-teaching experience.

Mary was White and had been raised by professional parents—her mother was a history teacher and her father a pharmacist—in an upper-middle-class neighborhood. Although beginning to teach in the same town, she soon discovered that her personal experiences and those of her students were widely disparate. She felt as if she were in foreign territory as indeed she was. During her early school years, Mary's parents had made sure that she ate her oatmeal before leaving for school. Her father always gave her loose change to spend at the school snack shop. Her mother took her to the best department stores to buy new outfits each season. For Christmas and birthdays, she was lavished with gifts. Mary had a personal relationship with her dentist due to all of the cavities that resulted from visits to her father's corner drugstore with its candy counter. The family doctor was a personal friend of her parents. During the summer, Mary and her family traveled extensively in the United States and Canada.

Mary's students were having quite different experiences as they grew up, in fact even at 6 and 7 years old, some of them had already lost their childhood. Many in her class lived in government projects constructed during the civil rights movement of the 1960s. Not constructed of the best materials in the first place, after 30 years, they were a nightmare. Boards covered windows where there had been fires. The halls and grounds were littered with trash. Needing paint, both inside and outside walls were dull, chipped, and cracked. Residents on the upper floors experienced roof leaks and residents on lower floors experienced leaks from faulty plumbing.

Many students in her class came to school unfed and dirty. Many were late having had to care for younger siblings before starting out. Getting to school could be harrowing, not only from the standpoint of school-age bullies, but also from drug dealers who hung out on street corners and in alleyways. Having arrived, the students were not necessarily ready and eager to learn. They were often tired, hungry, and not trusting of this young White woman who was their teacher. If they had an ear infection, or needed medication for ADD/ADHD, the chances were slim that there was money for either. The breakfast and lunch programs provided the only meals that some of the students had during the week, but often, ignored dental needs made eating painful.

Parents of her students were certainly not uncaring! Often, several parents would stop by before or after school to ask about their child's progress and



how they might help. Many however were nonreaders themselves. Sometimes the parents were not home to help and so the need for the students to care for their brothers and sisters. The parents were not out carousing; rather many were working two jobs to break the welfare cycle. One young mother in particular often asked Mary's advice on childrearing. She was a beautiful woman, slight with olive skin and huge eyes. She and her daughter were always immaculately groomed. She was a single parent with four children younger than Melvina who was in Mary's class. Mary was at a loss as to how to respond. She couldn't imagine being 19 with five children under the age of 6 and trying to raise them alone in this neighborhood!

Mary wondered where to begin! Should she focus on her classroom only and ignore the environment? But the children needed sound nutrition and health care. The parents needed support in their efforts to improve their own current reality and their children's future. How might the school and its neighborhood begin to work together to build a true school-community relationship that would benefit everyone?

1. Refer to Fig. 7.2. Think about Mary's students in terms of this diagram. What are the barriers that they face? Which of the following six curricular areas of an enabling component might Mary begin with in her efforts to address the barriers?

- Student and family assistance.
- Community outreach/volunteers.
- Home involvement in schooling.
- Support for transitions.
- Crisis/emergency assistance and prevention.
- Classroom-focused enabling.

Begin a plan for her to pursue.

2. Refer to Fig. 7.1. Which level on the continuum should Mary focus on at first? How can she work with others at the school and in the community to develop a comprehensive, multifaceted approach that encompasses each of the following levels?

- Systems for prevention.
- Systems of early intervention.
- Systems of care.

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