11

School-Wide Approaches to Addressing Barriers to Learning and Teaching

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Everyone wants higher test scores. Everyone wants to close the achievement gap. The call is for widespread school improvement, increased discipline, reduced school violence, and, of course, leaving no child behind.

None of it means much if such calls do not result in school-wide changes in the numerous schools where too many students lack an equitable opportunity to succeed. If the intent is to leave no child behind, essential improvements must be made in how schools address barriers to learning and teaching. To these ends, this chapter focuses on how student supports need to be reframed so they play a more significant role in addressing factors that result in so many students not doing well at school.

Addressing Barriers to Learning and Teaching

Over the years, awareness of the many external and internal factors that are barriers to learning and teaching has given rise to legal mandates and a variety of psychological, counseling, and social support programs, as well as to initiatives for school-community collaborations. Enactment of the No Child Left Behind Act and the 2004 reauthorization of the Individuals with Disabilities Education Act accelerated awareness of the need for schools to respond appropriately each day to a variety of barriers to learning and teaching.

Although reliable data do not exist, many policy makers would agree that at least 30% of the public school population in the United States are not doing well academically and could be described as having learning and related behavior problems. The percentage is higher in urban and rural schools serving students from low-income families (Center for Mental Health in Schools, 2005a).[1]

It has long been acknowledged that many factors negatively and profoundly affect learning (Dryfoos, 1990; Hawkins & Catalano, 1992; Huffman, Mehlinger, & Kerivan, 2000). Moreover, the resulting problems are exacerbated as youngsters internalize the debilitating effects of performing poorly at school and are punished for the misbehavior that is a common correlate of school failure. Schools that can't effectively address barriers to learning and teaching are ill-equipped to raise test scores to high levels (Adelman & Taylor, 2002, 2006a). Because of all this, school policy makers have a lengthy, albeit somewhat reluctant, history of trying to assist teachers in dealing with factors that interfere with schooling.

What Schools Do to Provide Student Supports

Currently, there are about 91,000 public schools in about 15,000 districts in the United States. Over the years, most (but obviously not all) schools have instituted programs designed with a range of learning, behavior, and emotional problems in mind. Some directly budget student support programs and personnel. Some programs are mandated for every school; others are carried out at or linked to targeted schools. In addition to those owned and operated by schools, services, programs, and personnel are brought to school sites by community agencies (U.S. Department of Education, 1996).

Student supports may be offered to all students in a school, to those in specified grades, or to those identified as at risk. The activities may be implemented in regular or special education classrooms or as "pullout" programs, and may be designed for an entire class,

groups, or individuals. They encompass ecological, curricular, and clinically oriented activities designed to reduce barriers directly and create buffers against them (i.e., protective factors). Interventions to address barriers generally focus on response to crises, early intervention, and some forms of treatment. Focus may also be on prevention and enhancement of healthy development (e.g., promotion of positive physical, social, and emotional development) through use of health education, health services, guidance, and so forth—though relatively few resources are usually allocated for such activity.

While schools can use a wide range of persons to help students, most school owned and operated services are offered as part of what are called pupil personnel services or support services. Federal and state mandates tend to determine how many pupil services professionals are employed, and states regulate compliance with mandates. Governance of daily practice usually is centralized at the school district level. In large districts, psychologists, counselors, social workers, and other specialists may be organized into separate units. Such units overlap regular, special, and compensatory education.

It should be stressed that, while a variety of student support activity exists in any school district, it is common knowledge that few schools come close to having enough resources to respond when confronted with a large number of students experiencing a wide range of factors that interfer with learning and performance. Many schools offer only bare essentials. Too many schools cannot even meet basic needs. Primary prevention often is only a dream. Given all this, it is not surprising that teachers, students, and their families continually ask for help. And, given how student supports currently operate, it is not surprising that few feel they are receiving the help they need.

Fragmented, Marginalized, and Counterproductively Competitive Student Supports

At the school level, analyses of the current state of affairs consistently find that the majority of programs, services, and special projects designed to address barriers to student learning are viewed as supplementary (often referred to as auxiliary services), operate on an ad hoc basis, and are planned, implemented, and evaluated in a fragmented and piecemeal manner (Adelman & Taylor, 1997, 2006a; Dryfoos, 1994; Gardner, 2005). This results in a tendency for student support staff to function in relative isolation of each other and other stakeholders, with a great deal of the work oriented to discrete problems and an

overreliance on specialized services for individuals and small groups. In some schools, a student identified as at risk for grade retention, dropout, and substance abuse may be assigned to three counseling programs operating independently of each other. Furthermore, an unproductive separation often is manifested in every facet of school operation between those focused on instruction and those concerned with addressing barriers to learning. Such fragmentation not only is costly in terms of redundancy and counterproductive competition, it works against developing comprehensive, multifaceted, and cohesive systems to serve the needs of most schools (Adelman, 1996; Adelman & Taylor, 1997, 1998).

Widespread recognition of the piecemeal nature of learning supports has produced some planning to enhance coordination. Better coordination is a good idea. But it doesn't address the fundamental systemic problem, which is that school-owned student supports are *marginalized* in policy and practice. Thus, while there is a good deal of observable activity in schools, the efforts are not a significant focus when it comes to planning school improvements. This is particularly ironic given the aura of dissatisfaction that surrounds current learning supports.

Most school improvement plans currently pay little attention to substantially enhancing the way schools provide student supports. At best, most reformers have offered the notions of establishing family resource centers and full-service schools to link community resources to schools and enhance coordination of services (Dryfoos, 1994). Connecting school and community resources is another good idea. But community involvement at schools is also marginalized, and when not done properly, it compounds the problems of fragmentation and counterproductive competition. These problems arise when the focus is primarily on coordinating *community* services and co-locating them at schools, rather than braiding resources and integrating the services with the ongoing efforts of school staff.

Leaving no child behind means addressing the problems of the many who are not benefiting from instructional reforms. Available evidence makes it clear that much more fundamental, systemic changes are needed. Because of the complexity of ensuring that all students have an equal opportunity to succeed at school, policy makers and practitioners need an operational framework to guide development of a comprehensive, multifaceted, and cohesive enabling/learning supports component (Adelman, 1995, 1996; Adelman & Taylor, 1994).

However, rather than address the problems surrounding school-owned support programs and services, policy makers seem to have become enamored with the concept of school-linked services, as if

adding a few community health and social services to a few schools is a sufficient solution. The social marketing around "school-linked, integrated services" has led some policy makers 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 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 their resources stretched to the limit.

As inadequate as school-owned student support services are at most schools, the resources invested in student support staff (e.g., school psychologists, counselors, social workers, nurses) usually exceeds to a considerable degree what local public agencies can afford to link to a school. Moreover, schools have other resources they can use to meet the challenge of ensuring all students have an equal opportunity to succeed at school. Besides traditional "pupil service personnel," student support is provided by compensatory education personnel (e.g., Title I staff), resource teachers who focus on prereferral interventions, and staff associated with a variety of school-wide programs (e.g., after school, safe and drug-free school programs).

Thus, while school-linked services might provide more referral resources for a few students in such locales, the number of students in need of support far outstrips what publicly supported community agencies can make available. Awareness is growing that there can never be enough school-based and linked support services to meet the demand in many public schools. Moreover, it is becoming more and more evident that efforts to address barriers to student learning will continue to be marginalized in policy and practice as long as the focus is narrowly on providing "services."

Another problem is that overemphasis on school-linked services exacerbates 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, competition rather than a substantive commitment to collaboration remains the norm.

Reframing Student Supports

Reframing how all resources for student/learning supports are used can lead to

- more effective deployment of existing resources (by minimizing fragmentation, redundancy, counterproductive competition, and policy marginalization)
- reframing student supports as *learning supports* that address barriers to student learning and realigning support staff roles and functions to develop comprehensive, multifaceted, and cohesive approaches
- fully integrating learning support programs and staff into the school improvement agenda at every school
- revamping infrastructures to weave resources together and provide mechanisms for enhancing and evolving how schools address barriers to student learning

# Toward Ending the Marginalization of Student Supports

Some policy makers have come to appreciate the relationship between the way student/learning supports are provided and limited intervention efficacy. (For the rest of this chapter, student supports will be referred to as learning supports.) For the most part, however, "reforms" have focused on the problem of fragmentation. This bypasses the underlying systemic issue, namely, that addressing barriers to learning and teaching remains a marginalized aspect of policy and practice. Fragmentation is likely a symptom, an inevitable by-product of the marginalization. So it is unlikely that the problem of fragmentation will be resolved appropriately without concerted attention in policy and practice to ending the marginalized status of learning supports.

Unfortunately, concern about marginalization is not even on the radar screen of most policy makers. This is reflected not only in school improvement planning, but in consolidated plans and certification reviews and the lack of efforts to map, analyze, and rethink how resource for learning supports are allocated (Center for Mental Health in Schools, 2005b). As long as educational decision makers ignore the need to end the marginalization and make fundamental systemic changes, the potential impact of learning supports for large numbers of children and adolescents cannot be demonstrated.

Analyses by our research group indicate that school reform is currently dominated by a two-component systemic model (Adelman,

1995, 1996; Adelman & Taylor, 1994, 1997, 1998). That is, the primary thrust is on improving instruction and school management. While these two facets obviously are essential, ending the marginalization of efforts to effectively address barriers to learning and teaching requires establishing a third component as primary, essential, complementary, and overlapping (Figure 11.1).

Figure 11.1   Moving from a Two- to a Three-Component Model for School Improvement
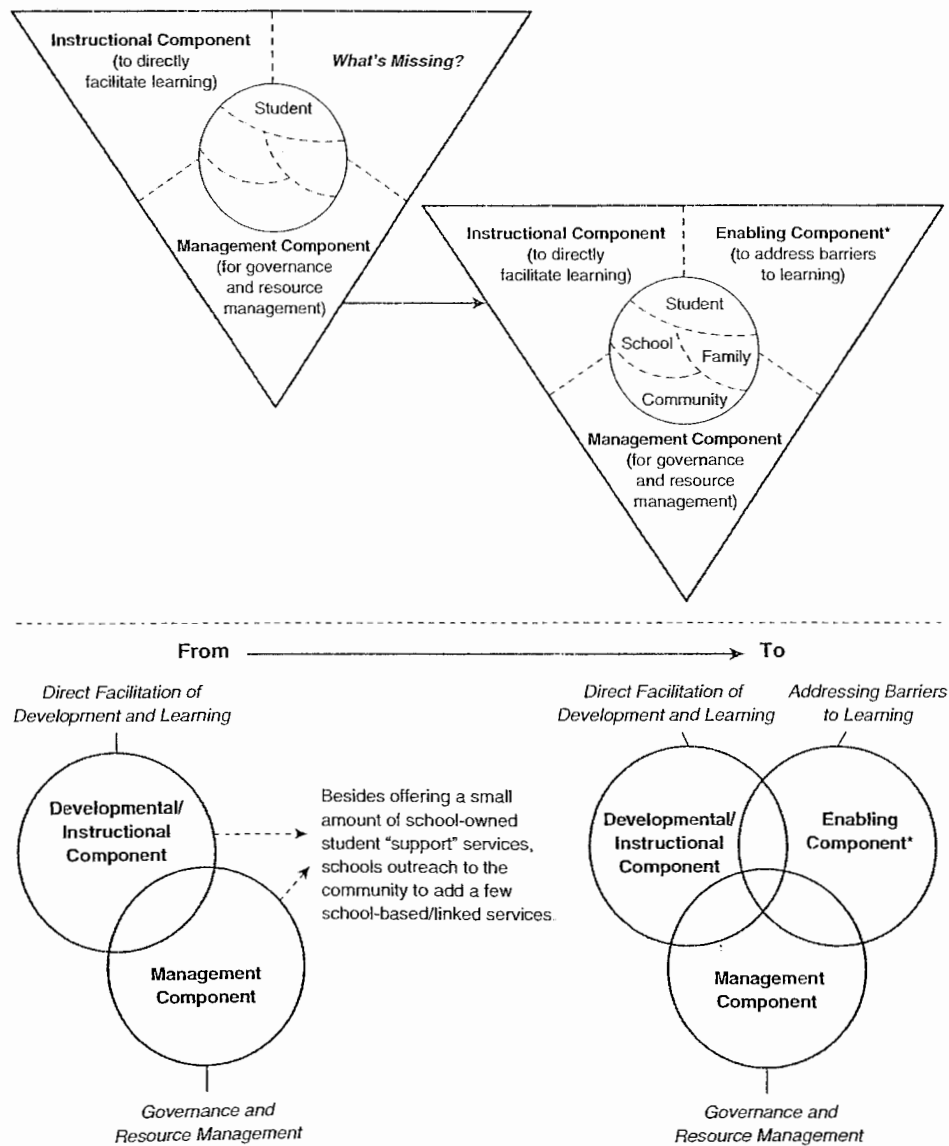
*The third component (an enabling or learning supports component) is established in policy and practice as primary and essential and is developed into a comprehensive approach by weaving together school and community resources.

As can be seen in Figure 11.1, we designate the component addressing barriers to learning as an Enabling Component; others who have adopted it use terms such as a Learning Supports Component (e.g., Iowa, 2004). The concept of an enabling or learning supports component is formulated around the proposition that a comprehensive, multifaceted, integrated continuum of enabling activity is essential in addressing the needs of youngsters who encounter barriers that interfere with their ability to benefit satisfactorily from instruction. The concept embraces healthy development, prevention, and addressing barriers. This third component not only provides a basis for combating marginalization, it establishes a focal point for developing a comprehensive learning supports framework to guide systemic changes. Its usefulness for these purposes is evidenced in its adoption by various states and localities. (Information about these trailblazing initiatives is online at http://smhp.psych.ucla.edu/summit2002/wheresithappening.htm.)

Toward a Comprehensive School-Wide System of Learning Supports

Problems experienced by students generally are complex in terms of cause and needed intervention. Therefore, in designing school-wide learning supports, school and community leaders must work together to develop a high-functioning, comprehensive, and multifaceted system.

How comprehensive and multifaceted? Table 11.1 outlines a proposed set of guidelines for a school-wide student support component.

In effect, the intention, over time, is for schools to play a major role in establishing a full range of interventions, including systems for

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

As illustrated in Figure 11.2, the desired interventions can be conceived along a continuum. Such a continuum encompasses efforts to enable academic, social, emotional, and physical development and address learning, behavior, and emotional problems at every school. Most schools have some programs and services that fit along the entire continuum. However, the tendency to focus mostly on the most severe problems has skewed things so that too little is done to prevent

Table 11.1   Guidelines for a School-Wide Student Support Component

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1. **Major Areas of Concern Related to Barriers to Student Learning**

    1.1 Addressing common educational and psychosocial problems (e.g., learning problems; language difficulties; attention problems; school adjustment and other life transition problems; attendance problems and dropouts; social, interpersonal, and familial problems; conduct and behavior problems; delinquency and gang-related problems; anxiety problems; affect and mood problems; sexual and/or physical abuse; neglect; substance abuse; psychological reactions to physical status and sexual activity; physical health problems)

    1.2 Countering external stressors (e.g., reactions to objective or perceived stress/demands/crises/deficits at home, school, and in the neighborhood; inadequate basic resources such as food, clothing, and a sense of security; inadequate support systems; hostile and violent conditions)

    1.3 Teaching, serving, and accommodating disorders/disabilities (e.g., learning disabilities; attention deficit hyperactivity disorder; school phobia; conduct disorder; depression; suicidal or homicidal ideation and behavior; posttraumatic stress disorder; anorexia and bulimia; special education designated disorders such as emotional disturbance and developmental disabilities)

2. **Timing and Nature of Problem-Oriented Interventions**

    2.1 Primary prevention

    2.2 Intervening early after the onset of problems

    2.3 Interventions for severe, pervasive, and/or chronic problems

3. **General Domains for Intervention in Addressing Students' Needs and Problems**

    3.1 Ensuring academic success and also promoting healthy cognitive, social, emotional, and physical development and resilience (including promoting opportunities to enhance school performance and protective factors; fostering development of assets and general wellness; enhancing responsibility and integrity, self-efficacy, social and working relationships, self-evaluation and self-direction, personal safety and safe behavior, health maintenance, effective physical functioning, careers and life roles, creativity)

    3.2 Addressing external and internal barriers to student learning and performance

    3.3 Providing social/emotional support for students, families, and staff

4. **Specialized Student and Family Assistance (Individual and Group)**

    4.1 Assessment for initial (first level) screening of problems, as well as for diagnosis and intervention planning (including a focus on needs and assets)

    4.2 Referral, triage, and monitoring/management of care

    4.3 Direct services and instruction (e.g., primary prevention programs, including enhancement of wellness through instruction, skills development, guidance counseling, advocacy, school-wide programs to foster safe and caring climates, and liaison connections between school
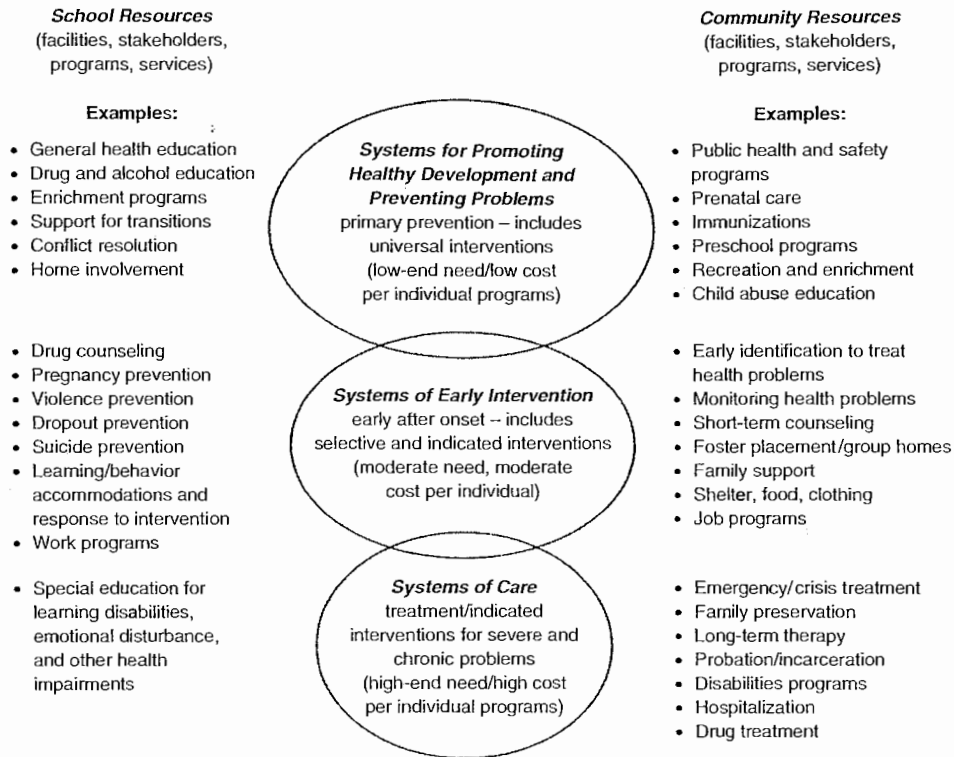

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Table 11.1 (Continued)

> and home; crisis intervention and assistance, including psychological and physical first-aid; prereferral interventions; accommodations to allow for differences and disabilities; transition and follow-up programs; short- and longer-term treatment, remediation, and rehabilitation)
>
> 4.4 Coordination, development, and leadership related to school-owned programs, services, resources, and systems—toward evolving a comprehensive, multifaceted, and integrated continuum of programs and services
>
> 4.5 Consultation, supervision, and in-service instruction with a transdisciplinary focus
>
> 4.6 Enhancing connections with and involvement of home and community resources (including but not limited to community agencies)
>
> **5. Ensuring Quality of Intervention**
>
> 5.1 Systems and interventions are monitored and improved as necessary
>
> 5.2 Programs and services constitute a comprehensive, multifaceted continuum
>
> 5.3 Interveners have appropriate knowledge and skills for their roles and functions and provide guidance for continuing professional development
>
> 5.4 School-owned programs and services are coordinated and integrated
>
> 5.5 School-owned programs and services are connected to home and community resources
>
> 5.6 Programs and services are integrated with instructional and governance/management components at schools
>
> 5.7 Program/services are available, accessible, and attractive
>
> 5.8 Empirically supported interventions are used when applicable
>
> 5.9 Differences among students/families are appropriately accounted for (e.g., diversity, disability, developmental levels, motivational levels, strengths, weaknesses)
>
> 5.10 Legal considerations are appropriately accounted for (e.g., mandated services; mandated reporting, and its consequences)
>
> 5.11 Ethical issues are appropriately accounted for (e.g., privacy and confidentiality; coercion)
>
> 5.12 Contexts for intervention are appropriate (e.g., office, clinic, classroom, home)
>
> **6. Outcome Evaluation and Accountability**
>
> 6.1 Short-term outcome data
>
> 6.2 Long-term outcome data
>
> 6.3 Reporting to key stakeholders and using outcome data to enhance intervention quality

Figure 11.2   Interconnected Systems for Meeting the Needs of All Students

School Resources
(facilities, stakeholders,
programs, services)

Community Resources
(facilities, stakeholders,
programs, services)

Examples:

- General health education
- Drug and alcohol education
- Enrichment programs
- Support for transitions
- Conflict resolution
- Home involvement

**Systems for Promoting
Healthy Development and
Preventing Problems**
primary prevention – includes
universal interventions
(low-end need/low cost
per individual programs)

Examples:

- Public health and safety
  programs
- Prenatal care
- Immunizations
- Preschool programs
- Recreation and enrichment
- Child abuse education

- Drug counseling
- Pregnancy prevention
- Violence prevention
- Dropout prevention
- Suicide prevention
- Learning/behavior
  accommodations and
  response to intervention
- Work programs

Systems of Early Intervention
early after onset -- includes
selective and indicated interventions
(moderate need, moderate
cost per individual)

- Early identification to treat
  health problems
- Monitoring health problems
- Short-term counseling
- Foster placement/group homes
- Family support
- Shelter, food, clothing
- Job programs

- Special education for
  learning disabilities,
  emotional disturbance,
  and other health
  impairments

Systems of Care
treatment/indicated
interventions for severe and
chronic problems
(high-end need/high cost
per individual programs)

- Emergency/crisis treatment
- Family preservation
- Long-term therapy
- Probation/incarceration
- Disabilities programs
- Hospitalization
- Drug treatment

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 of early intervention,* and *systems of care.*

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

or intervene early after the onset of a problem. As a result, most approaches reflect a "waiting-for-failure" strategy.

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 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.

Operationalizing the Continuum: Reframing How Schools Address Barriers to Learning

An additional framework helps operationalize the concept of an enabling or learning supports component in ways that coalesce and enhance programs to ensure all students have an equal opportunity to succeed at school. A critical matter is defining what the entire school must do to enable *all* students to learn and *all* teachers to teach effectively. School-wide approaches to address barriers to learning are especially important at any school where large numbers of students are affected or that is not yet paying adequate attention to considerations related to equity and diversity. Leaving no child behind means addressing the problems of the many who are not benefiting from instructional reforms.

Various pioneering efforts have operationalized such a component into six programmatic arenas (see Table 11.2). In essence, these six arenas constitute the curriculum or content of an enabling or learning support component (Adelman, 1996; Adelman & Taylor, 1998, 2006b). This curriculum encompasses programs to

- *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 to moderate learning and behavior problems)
- *support transitions* (i.e., assisting students and families as they negotiate school and grade changes and many other transitions)
- *increase home and school connections*
- *respond to, and where feasible, prevent crises*
- *increase community involvement and support* (outreach to develop greater community involvement and support, including enhanced use of volunteers)
- *facilitate student and family access to effective services and special assistance as needed*

Combining the six content arenas with the continuum of intervention tions illustrated in Figure 11.2 provides a full intervention picture to

Table 11.2   "Content" Areas for a Component to Address Barriers to Learning

1. Classroom-based approaches encompass

   - Opening the classroom door to bring available supports in (e.g., peer tutors, volunteers, aids trained to work with students-in-need, resource teachers, and student support staff work in the classroom as part of the teaching team)
   - Redesigning classroom approaches to enhance teacher capability to prevent and handle problems and reduce need for out-of-class referrals (e.g., personalized instruction, special assistance as necessary, developing small-group and independent learning options, reducing negative interactions and overreliance on social control, expanding the range of curricular and instructional options and choices, systematic use of prereferral interventions)
   - Enhancing and personalizing professional development (e.g., creating a learning community for teachers; ensuring opportunities to learn through co-teaching, team teaching, and mentoring; teaching intrinsic motivation concepts and their application to schooling)
   - Curricular enrichment and adjunct programs (e.g., varied enrichment activities that are not tied to reinforcement schedules; visiting scholars from the community)
   - Classroom and school-wide approaches used to create and maintain a caring and supportive climate
   - Emphasis at all times is on enhancing feelings of competence, self-determination, and relatedness to others at school and reducing threats to such feelings.

2. Crisis assistance and prevention encompasses

   - Ensuring immediate assistance in emergencies so students can resume learning
   - Providing follow-up care as necessary (e.g., brief and longer-term monitoring)
   - Forming a school-focused crisis team to formulate a response plan and take leadership for developing prevention programs
   - Mobilizing staff, students, and families to anticipate response plans and recovery efforts
   - Creating a caring and safe learning environment (e.g., developing systems to promote healthy development and prevent problems; bullying and harassment abatement programs)
   - Working with neighborhood schools and community to integrate planning for response and prevention
   - Capacity building to enhance crisis response and prevention (e.g., staff and stakeholder development, enhancing a caring and safe learning environment)

3. Support for transitions encompasses

   - Welcoming and social support programs for newcomers (e.g., welcoming signs, materials, and initial receptions; peer buddy programs for students, families, staff, volunteers)

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Table 11.2 (Continued)

- Daily transition programs (e.g., before school, breaks, lunch, after school)
- Articulation programs (e.g., grade-to-grade—new classrooms, new teachers; elementary to middle school; middle to high school; in and out of special education programs)
- Summer or intersession programs (e.g., catch-up, recreation, and enrichment programs)
- School-to-career/higher education (e.g., counseling, pathway, and mentor programs)
- Broad involvement of stakeholders in planning for transitions (e.g., students, staff, home, police, faith groups, recreation, business, higher education)
- Capacity building to enhance transition programs and activities

4. Home involvement in schooling encompasses

- Addressing specific support and learning needs of family (e.g., support services for those in the home to assist in addressing basic survival needs and obligations to the children; adult education classes to enhance literacy, job skills, English as a second language, citizenship preparation)
- Improving mechanisms for communication and connecting school and home (e.g., opportunities at school for family networking and mutual support, learning, recreation, enrichment, and for family members to receive special assistance and to volunteer to help; phone calls and/or e-mail from teacher and other staff with good news; frequent and balanced conferences—student-led when feasible; outreach to attract hard-to-reach families—including student dropouts)
- Involving homes in student decision making (e.g., families prepared for involvement in program planning and problem solving)
- Enhancing home support for learning and development (e.g., family literacy; family homework projects; family field trips)
- Recruiting families to strengthen school and community (e.g., volunteers to welcome and support new families and help in various capacities; families prepared for involvement in school governance)
- Capacity building to enhance home involvement

5. Community outreach for involvement and support encompasses

- Planning and implementing outreach to recruit a wide range of community resources (e.g., public and private agencies; colleges and universities; local residents; artists and cultural institutions; businesses and professional organizations; service, volunteer, and faith-based organizations; community policy and decision makers)
- Systems to recruit, screen, prepare, and maintain community resource involvement (e.g., mechanisms to orient and welcome, enhance the volunteer pool, maintain current involvements, enhance a sense of community)
- Reaching out to students and families who don't come to school regularly—including truants and dropouts
- Connecting school and community efforts to promote child and youth development and a sense of community

- Capacity building to enhance community involvement and support (e.g., policies and mechanisms to enhance and sustain school-community involvement, staff/stakeholder development on the value of community involvement, "social marketing")

6. Student and family assistance encompasses

- Providing extra support as soon as a need is recognized and doing so in the least disruptive ways (e.g., prereferral interventions in classrooms; problem-solving conferences with parents; open access to school, district, and community support programs)
- Timely referral interventions for students and families with problems based on response to extra support (e.g., identification/screening processes, assessment, referrals, and follow-up—school-based, school-linked)
- Enhancing access to direct interventions for health, mental health, and economic assistance (e.g., school-based, school-linked, and community-based programs and services)
- Care monitoring, management, information sharing, and follow-up assessment to coordinate individual interventions and check whether referrals and services are adequate and effective
- Mechanisms for *resource* coordination and integration to avoid duplication, fill gaps, garner economies of scale, and enhance effectiveness (e.g., braiding resources from school-based and linked interveners, feeder pattern/family of schools, community-based programs; linking with community providers to fill gaps)
- Enhancing stakeholder awareness of programs and services
- Capacity building to enhance student and family assistance systems, programs, and services

guide school improvement planning in developing a system of learning supports (Adelman & Taylor, 2006a, 2006b; Center for Mental Health in Schools, 2005c). The resulting matrix is shown in Figure 11.3. This matrix creates a unifying umbrella framework to guide the reframing and restructuring of the daily, school-wide work of all staff who provide learning supports.

The focus for an enabling or learning support component begins in the classroom, with differentiated classroom practices as the base of support for each youngster. This includes

- addressing barriers through a broader view of basics and effective accommodation of learner differences
- enhancing the focus on motivational considerations, with a special emphasis on intrinsic motivation as it relates to learner readiness and ongoing involvement, with the intent of fostering intrinsic motivation as a basic outcome
- adding remediation as necessary, but only as necessary

Figure 11.3   Matrix for Reviewing Scope and Content of a Component to Address Barriers to Learning

	Scope of Intervention		
Organizing Around the Content/ "Curriculum" (for address barriers to learning and promoting healthy development)	Systems for Promoting Healthy Development and Preventing Problems	Systems for Early Intervention (Early after problem onset)	Systems of Care
Classroom-Focused Enabling			
Crisis/Emergency Assistance and Prevention			
Support for Transitions			
Home Involvement in Schooling			
Community Outreach/ Volunteers			
Student and Family Assistance			

Accommodations for Differences and Disabilities

Specialized Assistance and Other Intensified Interventions (e.g., Special Education and School-Based Behavioral Health)

Note: Specific school-wide and classroom-based activities related to positive behavior support, the Centers for Disease Control and Prevention's "prereferral" interventions, and the eight components of Coordinated School Health Program are embedded into the six content ("curriculum") areas.

For individual youngsters, the intent of an enabling or learning supports component is to prevent and minimize as many problems as feasible and to do so in ways that maximize engagement in productive learning. For the school and community as a whole, the intent is to produce a safe, healthy, nurturing environment/culture characterized

by respect for differences, trust, caring, support, and high expectations. In accomplishing all this, the focus is on restructuring support programs and melding school, community, and home resources. The process is designed from the school outward. That is, the initial emphasis is on what the classroom and school must do to reach and teach all students effectively. Then the focus expands to include planning how the feeder pattern of schools and the surrounding community can complement each other's efforts and achieve economies of scale. Central district and community agency staff then restructure in ways that best support these efforts. At each stage, the framework presented in Figure 11.3 facilitates mapping and analyzing the current scope and content of how a school, a family of schools, a school district, and the community address barriers to learning and teaching at each level.

What's the Data?

Research on comprehensive approaches is still in its infancy. There are, of course, many "natural" experiments underscoring the promise of ensuring all youngsters access to a comprehensive, multifaceted continuum of interventions. These natural experiments are playing out in every school and neighborhood where families are affluent enough to purchase the additional programs and services they feel will maximize their youngsters' well-being. It is obvious that those who can afford such interventions understand their value.

Most *formal* studies have focused on specific interventions. This literature reports positive outcomes (for school and society) associated with a wide range of interventions. Because of the fragmented nature of available research, the findings are best appreciated in terms of the whole being greater than the sum of the parts, and implications are best derived from the total theoretical and empirical picture. When such a broad perspective is adopted, schools have a large research base to draw on in addressing barriers to learning and enhancing healthy development. Examples of this research base have been organized into the preceding six arenas (Adelman & Taylor, 2006a; Center for Mental Health in Schools, 2004a).

Rethinking Infrastructure

A well-designed and supported *infrastructure* is needed to establish, maintain, and evolve the type of comprehensive approach to addressing barriers to student learning outlined earlier. Such an infrastructure includes mechanisms for coordinating among enabling activities, for

enhancing resources by developing direct linkages between school and community programs, for increasing integration of school and community resources, and for integrating the instructional/developmental, enabling, and management components (Adelman & Taylor, 2006a; Center for Mental Health in Schools, 2005d).

As noted, *development* of comprehensive school-wide approaches require shifts in prevailing policy and new models for practice. In addition, for significant systemic change to occur, policy and program commitments must be demonstrated through effective allocation and redeployment of resources. That is, finances, personnel, time, space, equipment, and other essential resources must be made available, organized, and used in ways that adequately operationalize policy and promising practices. This includes ensuring sufficient resources to develop an effective structural foundation for system change, sustainability, and ongoing capacity building (Center for Mental Health in Schools, 2005e).

Key Mechanisms

To ensure sufficient resources, existing infrastructure mechanisms must be modified in ways that guarantee new policy directions are translated into appropriate daily practices (Center for Mental Health in Schools, 2005f). Well-designed infrastructure mechanisms ensure local ownership, a critical mass of committed stakeholders, processes that overcome barriers to stakeholders effectively working together, and strategies that mobilize and maintain proactive effort to allow implementing of changes and renewal over time. From this perspective, the importance of creating an atmosphere that encourages mutual support, caring, and a sense of community takes on another dimension.

Institutionalization of comprehensive, multifaceted approaches necessitates restructuring the mechanisms associated with at least six infrastructure concerns. These encompass processes for daily (a) governance, (b) leadership, (c) planning and implementation of specific organizational and program objectives, (d) coordination and integration for cohesion, (e) management of communication and information, and (f) capacity building. Properly redesigned infrastructure changes, for example, ensure integration, quality improvement, accountability, and self-renewal of an enabling or learning support component.

In redesigning mechanisms to address these matters, new collaborative arrangements must be established and authority (power) redistributed—easy to say, extremely hard to accomplish. Major systemic changes obviously require ensuring that those who operate

essential mechanisms have adequate resources and support, initially and over time. Moreover, there must be appropriate incentives and safeguards for individuals as they become enmeshed in the complexities of systemic change.

Learning Supports Resource Team

In schools, the administrative leadership is obviously key to ending the marginalization of efforts to address learning, behavior, and emotional problems. Another key is establishing a mechanism that focuses specifically on how learning support resources are used at the school. In some schools as much as 25% of the budget may go to problem prevention and correction. Every school is expending resources to enable learning; few have a mechanism to ensure appropriate use of existing resources and enhance current efforts. Such a mechanism contributes to cost-efficacy of learner support activity by ensuring all such activity is planned, implemented, and evaluated in a coordinated and increasingly integrated manner. It also provides another means for reducing marginalization. Creation of such a mechanism is essential for braiding together existing school and community resources and encouraging services and programs to function in an increasingly cohesive way. When this mechanism is in the form of a "team," it is also a vehicle for building working relationships and can play an expanded role in solving turf and operational problems.

Resource-oriented mechanisms have been designated by a variety of names including *Resource Coordinating Team*, *Resource Management Team*, and *Learning Supports Resource Team*. For purposes of this discussion, we will use the last of these. We initially demonstrated the feasibility of such teams in the Los Angeles Unified School District, and now they are being introduced in many schools across the country (Lim & Adelman, 1997; Rosenblum, DiCecco, Taylor, & Adelman, 1995). Properly constituted, such a team provides on-site leadership for efforts to address barriers comprehensively and ensures the maintenance and improvement of a multifaceted and integrated approach (Adelman & Taylor, 2006a, in press).

One of the primary and essential tasks a learning supports resource-oriented mechanism undertakes is enumerating school and community programs and services that are in place to support students, families, and staff. A comprehensive "gap" assessment is generated as resource mapping is compared with surveys of the unmet needs of and desired outcomes for students, their families, and school staff. Analyses of what is available, effective, and needed provide a sound basis for formulating priorities and developing strategies to link

with additional resources in other schools, district sites, and the community and enhance resource use. Such analyses also can guide efforts to improve cost-effectiveness.

In a similar fashion, a learning support resource-oriented team for a complex or family of schools (e.g., a high school and its feeder schools) and a team at the district level provide mechanisms for larger-scale analyses. This can lead to strategies for cross-school, community-wide, and district-wide cooperation and integration to enhance intervention effectiveness and garner economies of scale. For those concerned with school reform, such resource-oriented mechanisms are a key facet of efforts to transform and restructure school support programs and services.

When we suggest a learning supports resource team, some school staff quickly respond, "We already have one!" When we explore this with them, we usually find what they have is a *case-oriented team*—that is, a team that focuses on individual students who are having problems. Such a team may be called a student study team, student success team, student assistance team, teacher assistance team, and so forth.

To help clarify the difference between resource- and case-oriented teams, we contrast the functions of each (Table 11.3).

A resource-oriented team exemplifies the type of mechanism needed to pursue overall cohesion and ongoing development of school support programs and systems. As indicated, its focus is not on specific individuals, but on how resources are used. In pursuing its functions, the team provides what often is a missing link for managing and enhancing programs and systems in ways that integrate, strengthen, and stimulate new and improved interventions. For example, such a mechanism can be used to (a) map and analyze activity and resources to improve their use in preventing and ameliorating problems; (b) build effective referral, case management, and quality assurance systems; (c) enhance procedures for managing programs and information and communicating among school staff and with the home; and (d) explore ways to redeploy and enhance resources—such as clarifying which activities are nonproductive, suggesting better uses for resources, and establishing priorities for developing new interventions, as well as reaching out to connect with additional resources in the school district and community.

Minimally, a resource-oriented team can reduce fragmentation and enhance cost-efficacy by assisting in ways that encourage programs to function in a coordinated and increasingly integrated way. For example, the team can coordinate resources, enhance communication

Table 11.3 Contrasting Team Functions

A Case-Oriented Team	A Resource-Oriented Team
Focuses on specific *individuals* and discrete *services* to address barriers to learning	Focuses on *all* students and the *resources, programs, and systems* to address barriers to learning and promote healthy development
Sometimes called: • Child Study Team • Student Study Team • Student Success Team • Student Assistance Team • Teacher Assistance Team • IEP Team	Possibly called: • Resource Coordinating Team • Resource Coordinating Council • School Support Team • Learning Support Team
Examples of functions: • Triage • Referral • Case monitoring/management • Case progress review • Case reassessment	Examples of functions: • Aggregating data across students and from teachers to analyze school needs • Mapping resources • Analyzing resources • Enhancing resources • Program and system planning/development—including emphasis on establishing a full continuum of intervention • Redeploying resources • Coordinating and integrating resources • Social "marketing"

among school staff and with the home about available assistance and referral processes, and monitor programs to be certain they are functioning effectively and efficiently. More generally, this group can provide leadership in guiding school personnel and clientele in evolving the school's vision, priorities, and practices for learning support.

Although a resource-oriented mechanism might be created solely around psychosocial programs, it is meant to focus on resources related to all major learning support programs and services. Thus, it tries to bring together representatives of all these programs and services. This might include, for example, school counselors, psychologists, nurses,

social workers, attendance and dropout counselors, health educators, special education staff, after-school program staff, bilingual and Title I program coordinators, safe and drug-free school staff, and union reps. It also should include representatives of any community agency that is significantly involved with schools. Beyond these service providers, such a team is well-advised to add the energies and expertise of administrators, regular classroom teachers, noncertificated staff, parents, and older students.

Where creating "another team" is seen as a burden, existing teams, such as student or teacher assistance teams and school crisis teams, have demonstrated the ability to perform resource-oriented functions. In adding these functions to another team's work, great care must be taken to structure the agenda so sufficient time is devoted to the additional tasks. For small schools, a large team often is not feasible, but a two-person team can still do the job.

Properly constituted, trained, and supported, a resource-oriented team complements the work of the site's governance body by providing on-site overview, leadership, and advocacy for all activity aimed at addressing barriers to learning and teaching.

Not an Isolated Mechanism,
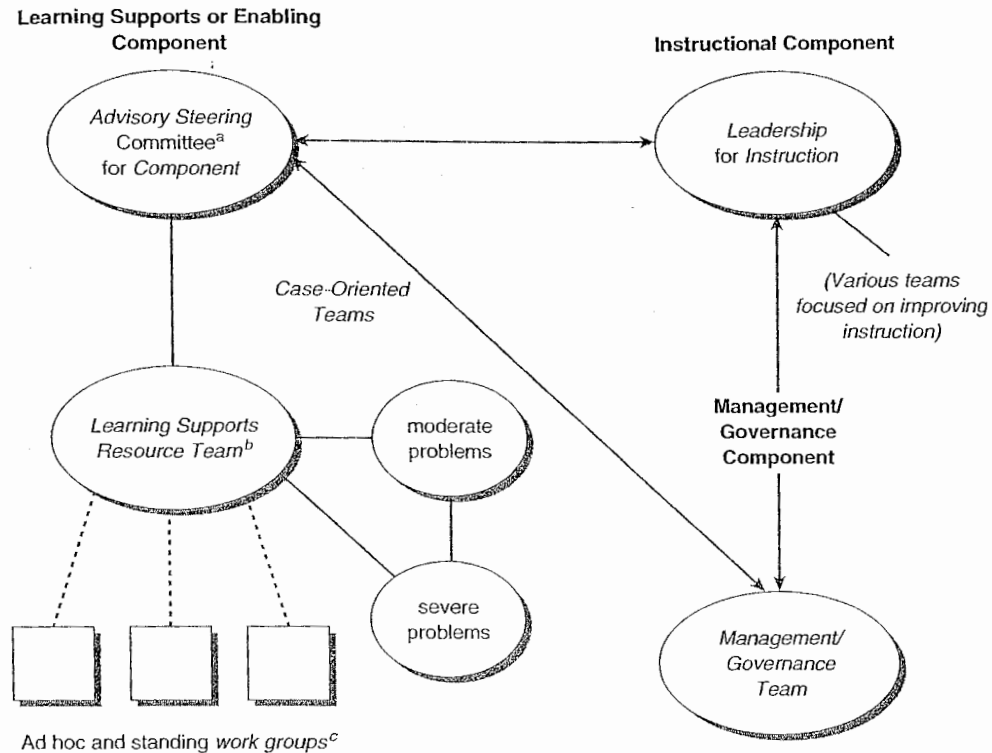## Part of an Integrated Infrastructure

Resource-oriented mechanisms at all levels cannot be isolated entities. The intention is to connect them to each other and be part of an integrated infrastructure. A learning supports resource team must be a formal unit of a school's infrastructure. And, it must be fully connected with the other infrastructure mechanisms at the school (e.g., those associated with instruction and management/governance). Figure 11.4 illustrates relationships of such a team to other major infrastructure units.

Having at least one representative from the resource team on the school's governing and planning bodies ensures the type of infrastructure connections that are essential if student and learning supports are to be maintained, improved, and increasingly integrated with classroom instruction. And, of course, having an administrator on the team provides the necessary link with the school's administrative decision making related to allocation of budget, space, staff development time, and other resources.

A Multisite Resource-Oriented Mechanism

Linking schools together is invaluable in maximizing use of limited resources. Schools in the same geographic or catchment area have

Figure 11.4   Learning Supports Resource Team as Part of an Integrated
Infrastructure at a School Site

Learning Supports or Enabling
Component

Instructional Component

Advisory Steering
Committee[a]
for *Component*

Leadership
for *Instruction*

Case-Oriented
Teams

(Various teams
focused on improving
instruction)

Management/
Governance
Component

Learning Supports
Resource Team[b]

moderate
problems

severe
problems

Management/
Governance
Team

Ad hoc and standing *work groups*[c]

a. A learning supports or enabling component advisory/steering commitee at a school site consists of a leadership group whose responsibility is to ensure the vision for the components are not lost. It meets as needed to monitor and provide input to the learning supports resource team.

b. A learning supports resource team is the key to ensuring component cohension, integrated implementation, and ongoing development. It meets weekly to guide and monitor daily implementation and development of all programs, services, initiatives, and systems at a school that are concerned with providing learning supports and specialized assistance.

c. Adhoc and standing work groups are formed as needed by the learning supports resource team to address specific concerns. These groups are essential for accomplishing the many

a number of shared concerns, and schools in the feeder pattern often interact with the same family because each level has a youngster from that family who is having difficulties. Furthermore, some programs and personnel already are or can be shared by several neighboring schools, thereby minimizing redundancy and reducing costs.

A multisite team can provide a mechanism to help ensure cohesive and equitable deployment of resources and also can enhance the pooling of resources to reduce costs. Such a mechanism can be particularly useful for integrating the efforts of high schools and their feeder

middle and elementary schools. This clearly is important in addressing barriers with those families who have youngsters attending more than one level of schooling in the same cluster. It is neither cost-effective nor good intervention for each school to contact a family separately in instances when several children from a family need special attention. With respect to linking with community resources, multischool teams are especially attractive to community agencies who often don't have the time or personnel to make independent arrangements with every school.

In general, a group of schools can benefit from a multisite resource mechanism designed to provide leadership, facilitate communication and connection, and ensure quality improvement across sites. For example, a multisite body, or what we call a *learning supports resource council*, might consist of a high school and its feeder middle and elementary schools. It brings together one or two representatives from each school's resource *team*.

The council meets about once a month to help (a) coordinate and integrate programs serving multiple schools, (b) identify and meet common needs with respect to guidelines and staff development, and (c) create linkages and collaborations among schools and with community agencies. In this last regard, it can play a special role in community outreach both to create formal working relationships and to ensure that all participating schools have access to such resources.

More generally, the council provides a useful 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 assessments, resource maps, analyses, and recommendations for reform and restructuring. Specific areas of initial focus would be local, high-priority concerns, such as addressing violence and developing prevention programs and safe school and neighborhood plans.

Representatives from learning supports resource councils can be invaluable members of planning groups (e.g., service planning area councils, local management boards). They bring information about specific schools, clusters of schools, and local neighborhoods and do so in ways that reflect the importance of school-community partnerships.

When a family of schools in a geographic area collaborates to address barriers, the schools can share programs and personnel in many cost-effective ways. This includes streamlined processes to coordinate and integrate assistance to a family that has children at several of the schools. For example, the same family may have youngsters in the elementary and middle schools, and both students may need support during a family crisis. This might be accomplished by

assigning one counselor and/or case manager to work with the family. Also, in connecting with community resources, a group of schools can maximize distribution of scarce resources in ways that are efficient, effective, and equitable.

Creation of resource-oriented mechanisms at schools, for families of schools, and at the district level is essential for weaving together existing school and community resources, enabling programs and services to function in an increasingly cohesive and cost-efficient way, and developing a full continuum of interventions over time. Such mechanisms are seen as vital in reducing marginalization and fragmentation of student and learner supports through transforming current approaches for addressing barriers to student learning and promoting healthy development.

Establishing and building the capacity of resource-oriented mechanisms, of course, are not simple tasks. As a result, it is essential to think in terms of a phase-in process (Center for Mental Health in Schools, 2005f). And, because establishing such a team involves significant organizational change, staff assigned to accomplish the tasks must have the skills of a systemic change agent. We designate this type of change agent as an *organization facilitator* (Adelman & Taylor 2006a; Lim & Adelman, 1997; Rosenblum, DiCecco, Taylor, & Adelman, 1995).

A Few Implications

Early in the 21st century, the following state of affairs is evident:

- Too many kids are not doing well in schools.
- To change this, schools must play a major role in addressing barriers to learning.
- However, support programs and services as they currently operate are *marginalized* in policy and practice and can't meet the needs of the majority of students experiencing learning, behavior, and emotional problems.
- Rather than address the problems surrounding school-owned support programs and services, policy makers seem to have become enamored with the concept of school-linked services, as if adding a few community health and social services to a few schools is a sufficient solution.

Given all this, it is not surprising that many in the field doubt that major breakthroughs can occur without a comprehensive, multifaceted, and integrated continuum of interventions. Such views add

impetus to major initiatives underway that are designed to restructure how schools address learning, behavior, and emotional problems.

Everyone who wants to ensure that all students have an equal opportunity to succeed at school needs to understand the full implications of all this. The bottom line is that limited efficacy seems inevitable as long as the full continuum of necessary programs is unavailable and staff development remains deficient; limited cost-effectiveness seems inevitable as long as related interventions are carried out in isolation of each other; limited systemic change is likely as long as the entire enterprise is marginalized in policy and practice.

A major shift in policy and practice is long overdue. We must rethink how schools, families, and communities can meet the challenge of addressing persistent barriers to student learning and, at the same time, enhance how all stakeholders work together to promote healthy development. We all need to press for policy establishing an enabling or learning support component as a primary and essential facet of school improvement that is fully integrated with the instructional component. In this respect, it will be useful to move boards of education toward establishing a standing subcommittee focused specifically on ensuring effective implementation of the policy for developing a component to address barriers to student learning at each school (Center for Mental Health in Schools, 2004b).

We must, then, all play a role in guiding and facilitating the development of such a school-wide component in ways that effectively address barriers to learning and teaching (and support the promotion of healthy development) at every school. In doing so, we must think in terms of

1. *phasing-in* development of the component's six programmatic facets at every school;

2. *expanding standards and accountability indicators* for schools to ensure this component is fully integrated with the instructional component and pursued with equal effort in policy and practice;

3. *restructuring* at every school and district-wide with respect to
   - redefining administrative roles and functions to ensure dedicated administrative leadership that is authorized and has the capability to facilitate, guide, and support the systemic changes for ongoing development of such a component at every school
   - reframing the roles and functions of pupil services personnel and other student support staff to ensure development of the component

- redesigning the infrastructure to establish a team at every school and district level that plans, implements, and evaluates how resources are used to build the component's capacity; and

4. *weaving resources into a cohesive and integrated continuum of interventions over time.* Specifically, school staff responsible for the component must collaborate with families and community stakeholders to evolve systems for (a) promoting healthy development and preventing problems, (b) intervening early to address problems as soon after onset as feasible, and (c) assisting those with chronic and severe problems.

To these ends, it will be important to move pre- and in-service programs for school personnel toward including a substantial focus on the concept of an enabling or learning supports component and how to operationalize it in schools in ways that fully integrate with instruction.

All of the preceding requires substantive organizational and programmatic transformation. Thus, key stakeholders and their leadership must understand and commit to the changes. And the commitment must be reflected in policy statements and creation of an organizational structure at all levels that ensures effective leadership and resources. The process begins with activity designed to create readiness for the necessary changes by enhancing a climate/culture for change. Steps include:

1. building interest and consensus for establishing a comprehensive, multifaceted component to address barriers to learning and teaching;

2. introducing basic concepts to relevant groups of stakeholders;

3. establishing a policy framework that recognizes such a component is a primary and essential facet of the institution's activity; and

4. appointing leaders for the component who are of equivalent status to the leaders for the instructional and management facets, to ensure commitments are carried out.

The next decade must mark a turning point for how schools and communities address the problems of children and youth. In particular, the focus must be on initiatives to reform and restructure how schools work to prevent and ameliorate the many learning, behavior, and emotional problems experienced by students. This means reshaping the functions of all school personnel who have a role to play in addressing barriers to learning and promoting healthy development.

There is much work to be done as public schools across the country strive to leave no child behind.

Note

1. Many resources related to this chapter are accessible at the Center for Mental Health in Schools at UCLA website, http://smhp.psych.ucla.edu/.

Discussion Questions

1. Think carefully about all the programs, practices, and services that exist in your school for the purpose of strengthening students' behavioral, emotional, and social competence. What are these programs, which staff members contribute to them, and what proportion of the school's resources are engaged in these learning supports?

2. What is the difference between your school's student assistance team and the learning supports resource team that Adelman and Taylor describe?

3. What evidence do you see of service fragmentation in your school, and what steps might be taken to overcome it?

4. What advantages and disadvantages do you anticipate in collaborative school-community efforts to support children's learning and development?

5. In your own school, what evidence do you see of a climate for change suggesting that the school might be prepared to establish stronger learning supports? What evidence do you see that your school might resist change? What could you do to foster a stronger climate for change?

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