

Addressing Barriers

New ways to think . . .

Better ways to link

to Learning

Volume 8, Number 1
Winter, 2003

Inservice for all school staff on matters related to addressing barriers to learning is critical to ensuring “no child is left behind.”

Needed: A Greater Role for Learning Support Staff in Inservice at Every School

Every message about education indicates the desire and need to ensure that no child is left behind. Clearly, for this vision to come true, all school staff must enhance their understanding of how to address barriers to student learning.

That’s why learning support staff must be part of the inservice picture. Unfortunately, as with so many other facets of their work, the part such staff play in inservice at schools is marginal at best. It is time to change this state of affairs. It is time to take proactive steps toward playing a greater role in inservice at every school.

Easy to say; hard to do.

As another aspect of the Summits’ Initiative for *New Directions for Student Support* (see info on page 8 of this newsletter), we are focusing on ways to increase learning support staff responsibility for facilitating inservice learning. Our Center is involved with staff already making efforts along these lines, and we want to work with others who are ready to do so.

Inside

- C *Need resources? technical assistance?*
See pages 5 and 6.
- C See pages 9-11: Ideas into Practice, Lessons Learned, & *What do I do tomorrow?*
- C On page 12: *Commentary*

This article is intended to encourage greater discussion of the need to expand the nature and focus of inservice. It also is meant as an aid in enhancing current efforts. Outlined is an expanded framework for designing inservice to increase the understanding school staff have of barriers to learning and how to address them. After reading what we have to say, let us know your ideas for advancing this effort.

Changing Current Approaches to Inservice

For the most part, the tendency is to think about inservice as something that only happens at staff meetings after other school business is addressed or at special workshops and classes. And, the main focus naturally is on how to teach academics better. Concerns about addressing barriers to learning are discussed on occasion, but usually only when school staff experience some problem as pressing. Generally, the focus on barriers to learning and teaching is marginalized. Support service staff often are not even invited to participate at these sessions.

While understandable, the current state of affairs is grossly inadequate for pursuing the vision of leaving no child behind. Clearly, a change in the way schools approach inservice is needed. And, staff who provide learning support are essential to meeting this need.

The bottom line is that inservice policy and practices must be modified. Prevailing policy and practice do not reflect the reality of what school staff must learn so that more students connect with promising instructional practices. Inservice must

- C enhance understanding of factors that interfere with effective student learning and productive teaching
- C spell out what can be done to address such barriers.

The goal is to increase the capability of all school staff to 1) promote healthy development, 2) prevent

(cont. on p. 2)

problems, 3) respond as early after problem onset as feasible, and 4) play a role in improving how severe and pervasive problems are handled.

To make the case for expanding inservice, support staff can point to school data that underscore factors contributing to low achievement scores. Examples include absences, tardies, bullying, and teacher referrals for help in responding to common learning and behavior problems. This information should be followed with proposals to change job descriptions for learning support staff so they can play a formal role in planning and implementing inservice activity that addresses such matters.

Given the need, inservice planners must broaden thinking about the who, when, and how of inservice learning. To these ends, the Center has developed a brief guide that highlights ways to think about

- C delivery systems
- C ensuring a good instructional match
- C finding relevant content resources
- C accounting for all students.

The guide, *Enhancing School Staff Understanding of Mental Health and Psychosocial Concerns*, can be downloaded at no cost from (<http://smhp.psych.ucla.edu>). This article covers the main points. The guide itself has five appendices with illustrative examples of relevant materials for inservice and their sources.

The intent is to provide a starting point. We make no attempt to be exhaustive. Creative users certainly will come up with other useful guidelines and ideas.

Inservice Delivery Systems

Exhibit 1 outlines seven inservice delivery systems. The first three are *info dissemination* mechanisms; the fourth is the traditional *presentation/workshop* approach; the last three encompass what we call *collegial* mechanisms. Clearly, these are not mutually exclusive, and hopefully other strategies will come to mind as efforts are made to improve inservice.

Ensuring a Good Instructional Match

*Just enough material, in just the right format,
at just the right time, with just the right amount
of personalized follow through.*

Successful inservice calls for good teaching. Good teaching always revolves around the concept of a good “match” or good “fit” – that is, meeting the learner where they are in terms of both motivation and capability.

Monthly Focus on a Matter that Matches the Rhythm of the School

Schools have a yearly rhythm – changing with the cycle and demands of the school calendar. There is the Season of Hope as the school year starts; then comes homework discontent, conferences of concern, grading and testing crises, newspaper attacks, worries about burnout, and the search for renewal. In keeping with all of this, each month support staff can provide some ideas and activities the school can use to enhance support for students, their families, and the staff. These can be incorporated into any of the above delivery mechanisms. Examples of topics for a monthly focus are: September – Getting off to a Good Start; October - Enabling School Adjustment; November - Responding to Referrals in Ways That Can “Stem the Tide”; December – Re-engaging Students: Using a student's time off in ways that pay off! Also, special days, weeks, or months can be used to focus on problems such as depression, suicide prevention, substance abuse, etc.

(Examples can be found on the Center website – <http://smhp.psych.ucla.edu>)

Each delivery system shapes the types of activities that can be used to create a good match for learning. In addition, windows of opportunity periodically appear. When they do, it is helpful to have a “tool kit” of materials at hand that allow for an immediate response. (Sources for expanding a school’s “tool kit” are covered in the next section.) However, good tools are not enough. The following three guidelines are fundamental to ensuring a good instructional match.

It's About Motivation

The first set of concerns in creating a good match are motivational. Staff need to be attracted to learning more about addressing barriers to learning and teaching. At the same time, it is clear there are competing demands on the amount of time staff

(text cont. on p. 4)

Exhibit 1

Inservice Delivery Systems***Information Dissemination Mechanisms**

(1) ***Mail Boxes, Bulletin Boards, and Electronic Communications.*** Easily digested materials can be distributed through staff mail boxes, displayed on bulletin boards, incorporated into websites, sent as emails, and so forth. When the information also is appropriate for students and families, it can be distributed in classrooms, at other sites throughout the school and community, and sent home.

(2) ***Newsletters.*** Addressing barriers to learning (including MH and psychosocial concerns) need to be at least a periodic if not regular feature in all newspapers associated with the school. A special newsletter related to such matters also is a possibility.

(3) ***Special Displays.*** Identify, create, and use every available place that provides an opportunity to display information, ideas, resources, etc. This includes existing bulletin boards and other display areas, as well as working to create new bulletin boards and display areas. Places for displays include classrooms, halls, staff rooms, student libraries, cafeterias, auditoriums, multipurpose rooms, front offices and waiting areas, administrative and support staff offices, parent centers, gymnasiums, recreation areas, and any other place staff (students and parents) will see the material.

Presentation and Workshop Mechanisms

(4) ***Staff Meetings and Workshops.*** These are the traditional forms of inservice. The challenges here are to expand what is focused upon and to get a fair share of time on the schedule for addressing barriers to learning.

Collegial Mechanisms

(5) ***Teaming to Capture Teachable Moments for Mentoring and Cross Training.*** Whenever problems arise and support staff are brought to the table, there are opportunities to teach others and to learn from them. Examples of such times arise whenever support staff are involved in discussing and/or taking action related to common school problems (e.g., daily problems related to attendance, discipline, bullying, drugs, pregnancy), crisis events, or a specific child's behavior, emotional, and learning problems. At such times, a support staff member may be working with administrators, other support staff, regular and special ed teachers and aids, staff who supervise recess, lunch, and before and after school activities, front office personnel, family members, and so forth. While the focus often is on a specific event or individual, the opportunity is not only to enhance understanding of how to deal with the specific case but how to clarify some general principles and rethink practices to prevent and correct subsequent problems. This form of inservice may take different forms, including consultation, mentoring and tutoring, and modeling while teaming together to address problems. For teachers, a powerful way to learn could be for support staff to work with them in the classroom for a period of time while new approaches are learned and instituted.

(6) ***Integrating Material into Health Education and Other Regular Coursework.*** In addition to formal health education, almost every subject taught in a classroom provides an opportunity to enhance understanding of psychosocial and mental health concerns. Support staff can use this delivery system if they team with teachers to plan the lessons and, as feasible, teach the material.

(7) ***Lunch "Brown Bags" and Office Hours.*** Informal and optional opportunities for sharing, teaching, and learning include offering periodic presentations and interchanges during lunch (e.g., perhaps bringing in community expertise to stimulate interest and show the breadth of support available or focusing on a specific reading/topic) and holding a regular open "office hour" each week for staff who want to learn more.

*See the Center document entitled: *Enhancing School Staff Understanding of MH and Psychosocial Concerns* for examples related to the various delivery systems. It can be downloaded at no cost from the Center's website -- <http://smhp.psych.ucla.edu>

can devote to such content. Excessive time demands can counter positive motivation. So, it is important to ensure that the time set aside for inservice (including released time from the classroom) is distributed appropriately and that staff are credited equitably (salary point credit, certificates of accomplishment). Then, the focus turns to ensuring that topics and content reflect staff interests and especially the problems they confront each day in the classroom. And, a strong thread in all inservice activity should be an emphasis on capturing teachable moments.

It's About Building on Current Strengths

Everyone knows something about barriers to learning and MH and psychosocial concerns. Some of what people know is useful; some isn't. As with most learning situations, school staff involved in inservice situations respond more positively when we build on what they have learned already and what they can use immediately. (The oft heard reaction during inservice sessions is: *Yes, but ... how will that help me on Monday?*)

Thus, in planning inservice priorities, it is important from a motivational perspective to address fundamental needs as perceived through the eyes of school staff. In planning inservice activities that help them meet their needs, it is important to build on their current capabilities. At the same time, it is essential to frame the needs within the context of a broad understanding of the causes of and ways to correct student problems.

It's About Personalizing the Material and Facilitating Active Learning

Ultimately, the best match is achieved when a learner is highly motivated to learn and is enabled to do so actively. To create such a match, the ideal is for staff to have options and choices related to content and processes so that inservice can be personalized. This includes varied opportunities for motivated application so that staff can practice what is learned and for timely follow-ups to help consolidate learning. Clearly, no one delivery system can do the job. Indeed, it often will require use of all seven delivery mechanisms. (Again, see Exhibit 1.)

Finding Relevant Content Resources

Just as using a range of delivery systems is essential, so is use of various formats for sharing

information, ideas, and resources. For instance, when there is an immediate "need to know," Fact Sheets, Practice Notes, and specific "tools" are useful. When there is sustained interest, indepth materials are needed. When addressing barriers to learning is a major priority for the school, a range of resources compiled into a campaign and/or course are called for to cover the topic and maintain interest and momentum (e.g., see the example, offered on page 2, of a monthly focus that matches the rhythm of the school year).

The support staff at a school are the logical ones to amass, over time, a "tool kit" of content resources on the wide range of relevant topics. This can be done with relative ease through the internet. Some sites provide ready access to a wealth of resources on almost any topic relevant to the inservice agenda. Ours is one. Moreover, not only does our website provide access at no cost to Center developed documents, it offers direct links to a world of resources obtainable from others.

Some easy ways to proceed are:

- (1) Log on to <http://smhp.psych.ucla.edu>
- (2) On the top of the homepage click on the button "First Visit"
- (3) Go to the section entitled: *Finding Information and Getting Technical Assistance*. There you will find descriptions of such Center features as:
 - C Quick Finds (These offer a fast way to access Center technical information and resources using a large menu of topics. When you click on a topic, you are provided with access to Center developed materials and links to materials available from other sources.)
 - C Search Engines (Through our search engines you can search our website and the Center databases for documents, consultation cadre members, and lists of other organizations and websites.)

You will also find information on how to download Center documents.

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Center News



***SUMMITS' INITIATIVE:

New Directions for Student Support

The Executive Summary and full report from the National Summit are online. (Click on the *Summits'* button on the Center website's home page). Already, the following organizations have come aboard as co-sponsors of this initiative:

- C School Social Work Association of America
- C National Association of State Boards of Education
- C National Association of Pupil Services Administrators
- C National Alliance of Pupil Service Organizations
- C National Association of School Psychologists
- C National Association of School Nurses
- C Johns Hopkins Graduate Division of Education
- C Johns Hopkins Center for the Prevention of Youth Violence
- C Education Development Corporation
- C Collaborative for Academic, Social, and Emotional Learning
- C Coalition for Community Schools
- C Center for School Mental Health Assistance
- C Center for Cooperative Research and Extension Services for Schools
- C California Center for Community School Partnerships

Other organizations are welcome to explore the possibility of being co-sponsors. The first regional summit is scheduled for March 10th in Baltimore. The second will be in Chicago in late spring. The first state summit is scheduled for Minnesota in March. Those interested in helping organize a *New Directions* summit in their state can contact us, and we will be pleased to assist with the process.

We hope all who read this will share some thoughts about how to use the momentum generated by the Summits' Initiative to move the agenda forward.

Center Staff:

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

What's good for some of us is ultimately good for all of us.

Robert Sternberg

***NEW RESOURCES

- > *Enhancing School Staff Understanding of Mental Health and Psychosocial Concerns* – A guide for providing inservice at schools (see lead article in this newsletter).
- > *Guidelines, Frameworks, Standards* – This new Quick Find was developed in response to the many requests for info on guidelines and standards for pursuing MH in schools.
- > *School Interventions to Prevent and Respond to Affect and Mood Problems* – A Quick Training Aid for inservice or use as a self-tutorial.

***REVISED AND UPDATED RESOURCES

- > *Social and Interpersonal Problems Related to School Aged Youth* (Introductory Packet)
- > *School-Based Client Consultation, Referral, and Management of Care* (TA Packet)
- > *School Interventions to Prevent Youth Suicide* (TA Sampler)
- > *Protective Factors/Resiliency* (TA Sampler)
- > *Students and Psychotropic Medication: The School's Role* (Resource Aid Packet)

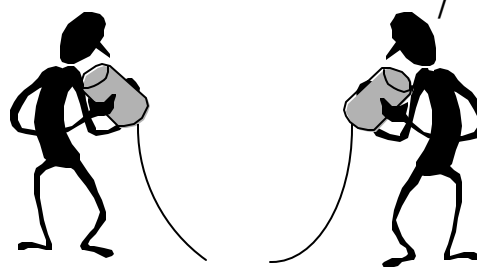
See the full list of resources on the Center website at – <http://smhp.psych.ucla.edu>.

All Center resources can be downloaded from the website at no cost. Hardcopies can be ordered for the cost of copying and mailing.

***CENTER'S IMPACT EVALUATION

Many thanks to all who responded!

Do you have a few minutes to respond to my questionnaire?
Well that depends on whether all your questions are that silly?



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Want resources?
Need technical assistance?

Contact us at:

E-mail: smhp@ucla.edu Ph: (310) 825-3634

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

Or use our website: <http://smhp.psych.ucla.edu>

If you're not receiving our monthly electronic newsletter (ENEWS), send an E-mail request to:

listserv@listserv.ucla.edu

leave the subject line blank, and in the body of the message type: **subscribe mentalhealth-L**

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

Exchange info on MH practices in school and network with colleagues across the country by joining the **Weekly Listserv for School MH Practitioners and the Center's Consultation Cadre**. Contact the Center to sign up – E-mail: smhp@ucla.edu

Also, if you want to submit comments and info for us to circulate, use the insert form in this newsletter or contact us directly by mail, phone, E-mail, or the Net Exchange on our website.

DO YOU KNOW ABOUT?

“School-Based Violence Prevention Programs” by J. Mytton, C. DiGiuseppi, & D. Gough (2002), *Archives of Pediatric and Adolescent Medicine*. (<http://archpedi.ama-assn.org>)

“School Effectiveness Findings” by M. Rutter & B. Maughan (2002), *Journal of School Psychology*, 40 (www.sciencedirect.com)

“Psychological adjustment of urban, inner-city ethnic minority adolescents” by R. Taylor, E. Seaton, & A. Rodriguez (2002), *Journal of Adolescent Health*, 31 (supplement) (<http://www.medicinedirect.com/journal/journal/previous?sdid=5072&volume=31>)

“Ensuring Safe School Environments: Exploring Issues – Seeking Solutions” by M. Fishbaugh, T. Perkeley, & G. Schroth (Eds.) (2003), Laurence Erlbaum Associates.

“The Role of the School's Social Environment in Preventing Student Drug Use” by E. Schapps & D. Solomon (2003) & “Creating School and Community Partnerships for Substance Abuse Prevention Programs” by H. Adelman & L. Taylor (2003).

The above 2 articles are in the *Journal of Primary Prevention* (www.kluweronline.com)

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Stay tuned to:

>the *President's New Freedom Commission on MH* –

www.mentalhealthcommission.gov

>the reauthorization of the *Individuals with Disabilities Education Act (IDEA)* –

<http://edworkforce.house.gov/issues/107th/education/idea/idea.htm>

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The Eighth National Conference on Advancing School-Based Mental Health Programs

The University of Maryland, Baltimore, Center for School Mental Health Assistance, in partnership with The Policymaker Partnership of the National Association of State Directors of Special Education hosts

Mental Health in Schools: Doing What Works!

October 23-25, Hilton Portland Hotel, Portland, Oregon

Keynote Speaker: Clemens Hosman, Professor of Mental Health Promotion and Prevention of Mental Disorders, Mijmegen, The Netherlands

For information, see <http://csmha.umaryland.edu>

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Among the various Center resources useful for inservice efforts are:

- C Continuing Education Modules, Training Tutorials, and Quick Training Aids
- C Guidebooks & Guidelines
- C Newsletter articles
- C Special Resource Packets & Aids.

The Center makes all its packets and technical assistance info available electronically, mostly in Adobe Acrobat PDF files that are easy to view, navigate, print, or copy on a hard drive for a quick and easy reference. (See the Center website for the list of available resources.)

Should you not find what you need through our Quick Find and other search mechanisms, we have designed a *Gateway to a World of Resources*. This is a links "map" that provides quick access to a wealth of relevant sources on the internet.

If all else fails, request *Technical Assistance* from our Center staff and Consultation Cadre members. They can answer specific questions, assist with special topics, and identify resources

Accounting for All Students

In designing inservice, the following guidelines are meant to ensure what is taught accounts for all students, not just those with the most severe problems. The emphasis is on helping staff acquire a broad perspective for understanding the problems they are experiencing and what needs to be done in both the short- and long-run to enable all students to have an equal opportunity to succeed at school.

Guidelines for Inservice on the Causes of Problems

When discussing the *causes of problems*, it is essential to counter tendencies to view them too simplistically and in categorical terms. Thus, presentations that discuss causes should be designed with a view to ensuring that staff continue to learn more about

- C the full range of causes for emotional, behavior, and learning problems – contrasting problems caused by external factors from those caused by internal factors from those resulting from both external and internal causes

- how to differentiate commonplace behavior, emotional, and learning problems from true disorders and disabilities
- C how often problems are caused by multiple factors
- C how often youngsters have multiple problems
- C how the same problem behaviors (“symptoms”) may arise from different underlying causes and motives
- C how different problem behaviors may arise from the same underlying causes and motives.

Guidelines for Inservice on Interventions to Address Problems

When discussing *how to address problems*, it is essential to counter tendencies toward simplistic and categorical solutions to complex problems. Thus, each inservice activity should ensure that discussions are presented (a) from a system’s perspective and (b) with a commitment to personalizing interventions. In all this, there should be an emphasis on ensuring that a caring classroom and school-wide climate and culture emerge from the various intervention efforts.

The system’s perspective should encompass:

- C a “big picture” intervention framework – Such a framework should delineate the type of comprehensive, multifaceted continuum of interventions required to effectively address the full range of factors that interfere with school learning and teaching. That is, the emphasis should be on a continuum that encompasses promotion of healthy development, problem prevention, intervening as early after the onset of problems as is feasible, treatment and follow up support
- C how to integrate learning support as a necessary, high level priority in all school improvement planning
- C how to enhance teaming and collaboration as a necessary element of a comprehensive approach – in classrooms, school-wide, and with families and others in the community

(concluded on page 8)

- C how to apply the principle of “least intervention needed” in a sequential manner – focusing *first* on *changes in the classroom and school-wide environment* to address environmental causes; *then, if necessary, focusing on addressing other needs* with increased attention to specialized assistance for those few students and families whose problems remain chronic.

The commitment to personalizing interventions should encompass learning

- C how to ensure that motivational differences as well as differences in capability are appropriately accounted for – with a particular focus on intrinsic motivation and the need to address motivation as a readiness, process, and outcome consideration.

The overriding inservice guideline is: All efforts to enhance staff understanding of student/learning support should have as a major outcome enhanced *motivation* on the part of school staff to learn more and to use that learning in ways that lead to *more success, more often, with more students and their families.*

[Let us hear from you about ways we can better support your inservice efforts and about how we can work together to move such efforts forward.]

Clearly, support staff have much to contribute to the continuing education of all school staff. Unfortunately, the contribution is undercut when such personnel are marginalized at a school. By pursuing all windows of opportunity to provide informal inservice and to be at decision making tables to plan the formal inservice calendar, support staff increase their value to teachers and other staff. And, by doing so, they are laying the foundation for new directions that will end the marginalization of their work and ensure better outcomes for all students.

Summits' Initiative: *New Directions for Student Support*

On October 28, in response to widespread interest for mounting a nationwide initiative, our Center convened a national summit on *New Directions for Student Support*. The Executive Summary, full report, and accompanying resources are available at – <http://smhp.psych.ucla.edu>.

Over the coming year, we will organize three regional summits and promote state-wide summits. The first Regional will be in Baltimore in March. The second is planned for Chicago in the late Spring. Regional and state summits will be designed to encourage advocacy for and initiation of new directions and will build a leadership network. The focus also will be on delineating specific action steps for participants related to getting from here to there. At an appropriate time, we will invite the leadership network to host a national summit on student support for policy makers.

The Center will continue to identify and showcase efforts to move in new directions. In addition, we will enlist other centers, associations, journals, and various media to do the same and also encourage them to help amass and expand the research base for new directions.

At the same time, the Center and the growing leadership network will provide technical assistance and training for and foster mutual support among localities and states moving in new directions. This will allow for sharing of effective practices, lessons learned, and data on progress. A listserv will be established as one direct linking mechanism. Other sharing will be done through websites and various conferencing formats.

Ideas into Practice, Lessons Learned, & *What Do I Do Tomorrow?*

Everyone who works at a school knows how much more they need to learn. *Networking can help.* And, centers such as ours can be a useful part of this – both as a network member and as a facilitator for networking activity.

Networking with us:

The Center's diverse technical assistance and training activity enables self-guided learning, outreaches to deliver resources, and responds to direct requests.

- C Use the website at anytime to access our wide range of resource materials
- C Be sure you are on our mailing lists to receive both the monthly electronic newsletter (ENEWS) and this quarterly hardcopy newsletter
- C Contact the center whenever you need direct, quick assistance

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 To join these networks email us at:  
 smhp@ucla.edu  
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Networking through us:

Periodic face-to-face networking provide one form of interchange. But needs arise daily. So the Center continues to design ways to facilitate regular networking with colleagues.

- C Be part of the Practitioners' Listserv – a weekly opportunity for colleagues across the country to request and share information and ideas; the Center's Consultation cadre also is networked with this listserv
- C Use Net Exchange – this feature on our website encourages commentary, requests, and sharing at anytime
- C Use our gateways to online resources –
 >*Quick Find* search topics include direct links to relevant online materials and networks from a wide range of sources
 >*Gateway to a World of Resources* provides a categorized directory with direct links to key centers, agencies, associations, and listservs

What Practitioners Ask for: Some Recent Interchanges on the Practitioners' Listserv:

The following brief samples from the weekly listserv illustrate the value of regular networking and sharing among practitioners.

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*Request:* I am looking for classroom-based mental health and suicide prevention programs – best practices, curriculum, outcomes, and theory.

*Listserv Participant Response:* I want to draw your attention to the following commentary from "Adolescent Suicide: Perspectives on a Clinical Quandary" in the *Journal of the American Medical Association* (December 26, 2001):

"Zametkin et al ... present the humbling conclusions that major community suicide-prevention programs primarily carried out within schools as well as treatment efforts do not appear to prevent suicide. However, they rightfully warn that it is difficult to demonstrate effectiveness of

prevention programs and treatment efforts for rare events such as suicide. Of course, these negative findings do not mean that clinicians should not talk with parents, adolescents, and educators about this important subject. ..." (Available online at <http://jama.ama-assn.org/issues/v286n24/toc.html>)

*Center Response:* Using the best data available, schools must play a key role in trying to prevent suicide. Several of the Center's *Quick Training Aids* focus on this and related matters such as suicide prevention; bullying prevention; school-based crisis intervention (online at <http://smhpsychucla.edu>).

*Another Listserv Participant Responded:* There is a perspective ... that focuses upon the common causes of youth violence and self-destructive behavior ... and an emotional health education classroom program that addresses building student capacities to deal with the underlying sources of both of these types of harmful behavior. See <http://www.emotionalthonesty.com>

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Request: I'm on a committee looking at mental health in schools. Are there any protocols or models I should focus on and bring to the table?

Response: See the document developed by the Policy Leadership Cadre on Mental Health in Schools – *Mental Health in Schools: Guidelines, Models, Resources & Policy Considerations* (online at <http://smhp.psych.ucla.edu>)

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*Request:* What would you recommend a school use as accountability measures if it were to take its role in promoting social and personal development as seriously as it takes measuring achievement?

*Listserv Participant Response:* I think that what New Haven does with its Social and Health Assessment is impressive. This is an anonymous survey of all health and social areas given to kids every couple of years and provides a baseline and then standard of comparison to understand the progress of Social Emotional Learning in a district. This approach can include classroom climate, school climate, service opportunities, bully-victim items, and others that reflect a particular take a school might have.... I also think modification of report cards is necessary, as are the criteria used to observe teachers and evaluate and hire personnel... And, I think a portfolio approach around the key skill areas that a school or grade level is trying to effect is exceptionally important.

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Request: I am looking for some literature to hand out to teachers about self-harm, cutting, and self-mutilation. Several students have been referred...; some info would help our teachers.

Response: See the following online resources:

- >>Self-Injury: You are not the only one
<http://crystal.palace.net/~llama/psych/intro.html>
- >>Self Injury -- Information and Resources
<http://www.selfinjury.freesevice.co.uk>
- >> Helping those who hurt themselves
<http://www.TPRonline.org>

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*Request:* I am seeking info about reducing bias in special education.

*Center Response:* In responding to this request, we assume the concern is about ethnic minority over-representation in special education (as contrasted with over-representation of males or children in poverty). Here are some places to start in looking:

- >National Association of State Directors of Special

Education ("Project Forum") – resource guide describes approaches to help prevent and address disproportionate representation of racial and ethnic minority groups, <http://www.ideapolicy.org>

- >Civil Rights Project, Harvard,  
<http://www.law.harvard.edu/civilrights>

- >"Research Connections in Special Education," in *Improving Results for Culturally and Linguistically Diverse Students*. (Fall 2000, # 7). ERIC/OSEP Clearinghouse on Disabilities and Gifted Education, Council for Exceptional Children,  
<http://ericec.org>

- >Center for Minority Special Education,  
<http://www.utep.edu/~cmse/>

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Request: I am interested in policy on the MH needs of students who violate school alcohol policy. I am especially interested in school policies about alcohol use during school and school activities. In our area, violations are treated like criminal activity in the same category as loaded weapons at school, and students are punished with suspension on a first violation and expulsion on a second. I am trying to find school districts who are looking at zero tolerance of alcohol as a mental health alert rather than a criminal act and are diverting these students for screening. Please refer me to any research that speaks to best practices or model schools who are recognizing the mental health needs of students in zero tolerance issues.

Response: The Center's website Quick Find search menu links to relevant resources on this matter. For example, see the Quick Find on *Zero Tolerance* for articles that examine such policies. Note in particular:

- >"The Facts: Zero Tolerance (Alcohol)"

- >"Quick Guide to Preventing Suspensions and Expulsions" on alternatives to zero tolerance. (on the "Student Advocacy Center of Michigan" web)

Also see the one on *Discipline Codes and Policies*.

Substance Abuse Prevention and Intervention has links to such online publications as

- >"Intervention Helps College age drinkers" in the *Journal of Consulting and Clinical Psychology* (a 1999 summary of a study done by the University of Washington's Addictive Behaviors Research Center). The work indicates students who received brief intervention services reduced the amount of alcohol consumed and alcohol related problems such as fighting and vandalism.

- >"Preventing problems related to alcohol availability: Environmental approaches"

The Quick Find on *Juvenile Justice Systems and Mental Health* links to the Juvenile Detention Alternative Initiative site, which has 13 relevant publications including "Controlling the Front Gates: Effective Admissions Policies & Practices."

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*Common request:* I'm running a great project, but funding is ending. Where do I get another grant?

*General Response:* Regarding future funding of such programs, we always encourage looking at ongoing school funding streams. (Pursuing another time-limited grant is O.K., but not the best way to think about sustaining programs.). Several avenues are worth pursuing.

One source is a district's Title I funding. Title I encourages schoolwide programs. To use these funds, the case must be made that a program reduces problems that interfere with student learning. See the Finance Project document on the Title I guidelines (<http://www.financeproject.org>). Working with strong, ongoing efforts, such as Title I, also connects your work more closely with the school's instructional agenda by ensuring that it is (re)framed as promoting readiness, engagement, and re-engagement in learning.

A second source is the funding for special education, which often includes interventions to address problems early and for reducing referrals to special education for emotional and behavior problems. Can you make a good case that your programs do that? Look, for example, at available data (e.g., Did students in the program have fewer referrals to special ed or fewer disciplinary actions than comparable students not in the program?)

You may also want to take a look at our Center's Quick Training Aid *Financing Strategies to Address Barriers to Learning* (online).

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Common Request: What's available for needs assessment, intervention planning, and evaluating the impact of efforts to address barriers to learning (including MH and psychosocial concerns)?

General Response: We approach needs assessment from the standpoint of assessing the current status of what school and community have in place in terms of interventions and what is missing (thus needed). We suggest folks pursue this by doing some self-studies and mapping their resources. As tools for doing so, the Center has developed school and school-community self-study surveys and other mapping tools. These are compiled in a technical assistance packet entitled: *Resource Mapping and Management to Address*

Barriers to Learning: An Intervention for Systemic Change.

As to planning intervention and assessing impact, see the Center's Introductory Packet on *Evaluation and Accountability: Getting Credit for All You Do!* and the Sampler entitled *Evaluation and Accountability Related to MH in Schools*. Also, see *Accountability: Is it Becoming a Mantra?* in the Center newsletter (Winter 1998 – online).

We should stress that it is fairly easy to identify six or seven key student behaviors (increased attendance; decreases in tardies, office referrals, suspensions; improved grades (effort, conduct, and achievement); improved test scores, increased participation (such as in extramural activities). Note, however, that the most immediate and direct outcomes of interventions to address barriers to learning are not achievement test scores. What underlies the direct behavior changes is enhanced motivation and engagement/re-engagement in learning and participation at school. These factors and the immediate behavior changes are mediators in the process of improving student achievement.

And, with particular respect to MH interventions, we caution that it is unrealistic to expect that these alone can bring about complex changes in school performance. Therapy can enhance a student's resolve and skill for improving school performance and achievement. However, school and home support often are essential to follow-through. Thus, system changes also are a focus of efforts to address barriers to learning. When the school and home role is not part of the evaluation, findings of a weak relationship between therapy and school performance should be expected and are not a fair indicator of the impact of the individual-focused MH interventions.

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Each week the Center shares questions and responses with practitioners and with our Consultation Cadre as another way to stimulate sharing of experiences and information. To sign up for the weekly Practitioners' Listserv and/or the Consultation Cadre send an email to [smhp@ucla.edu](mailto:smhp@ucla.edu).

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Teacher: **I can hardly read your work. You must write more clearly.**

Student: **Aw, what's the use! If I write any clearer, you'll complain about my spelling.**

COMMENTARY

In a recent article, Catalano, Hawkins, Berglund, Pollard, and Arthur conclude that those advocating for prevention and those advocating for positive youth development have similar recommendations for the future of youth programming, and progress would be enhanced through cooperation not competition (see the Journal of Adolescent Health, December 2002). We are pleased to see the emphasis on cooperation.

But, the discussion shouldn't end there. Both groups of advocates, as well as those who advocate for various forms of treatment for individuals with severe and pervasive problems, need to play a greater role in rethinking and redesigning the institutional contexts for intervention efforts.

This is not just a matter of enhancing implementation "fidelity" or even adapting a given intervention strategy to a specific setting. This is about pursuing major systemic reforms, over time, to end the marginalization and fragmentation of efforts to develop comprehensive, multifaceted approaches that weave resources into an integrated continuum of interventions. Such a continuum must encompass a cohesive set of *systems* designed to 1) promote healthy development, 2) prevent problems, 3) intervene early to address problems as soon after onset as feasible, and 4) assist those with severe problems.

The emphasis on systems reflects the reality that the complexities of enhancing the well-being of all children and youth requires *comprehensive packages of multifaceted interventions* that are *delivered in systematic and cohesive ways in various institutional contexts*. It also reflects the reality that the processes of "getting from here to there" encompass sophisticated approaches to systemic change. And, all of this involves the collaboration of stakeholders from the home, school, and neighborhood.

Researchers, policy makers, and practitioners need to recognize the full implications of all this. To do less is to maintain a state of affairs that is not only inequitable but also self-defeating.

Please respond to the enclosed brief feedback form.

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The Center for Mental Health in Schools is co-directed by Howard Adelman and Linda Taylor and operates under the auspices of the School Mental Health Project in the Dept. of Psychology, UCLA. Support comes in part from the Office of Adolescent Health, Maternal and Child Health Bureau, Health Resources and Services Administration. Co-funding comes from the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration. Both HRSA and SAMHSA are agencies of the U.S. Dept. of Health and Human Services.

Are you Taking Full Advantage of Opportunities the Center Offers to Support Your Work?



On our recent Impact Evaluation form, we asked about how useful our resources have been (i. e., Technical Assistance, Consultation, Training, Resource Materials, Electronic Newsletter, Hardcopy Newsletter, Networking Facilitation, Support for Program Enhancement, Support for Systemic Changes).

A few respondents commented:

“I didn’t know you offered all these things. I’m looking forward to using them more in my work!”

If you aren’t already taking full advantage of our resources, here’s some things you might consider:

ENEWS: If you are reading this, you receive our hardcopy newsletter. But, if you don’t also receive the electronic ENEWS each month, you may be missing out on up-to-date info about resources, publications, conferences, funding opportunities, and more. If you want the ENEWS, check below:

_____ Add me to the monthly email circulation of ENEWS

NETWORKING: Weekly networking is provided through the Mental Health in Schools Practitioner Listserv which offers a venue for requests and sharing. For those with special expertise, you can join our Consultation Cadre and become part of this national pool of professionals who share their expertise in response to requests. Consultation Cadre members also receive a copy of the weekly Practitioner Listserv and can respond as appropriate to the matters raised.

_____ Add me to the Mental Health in Schools Practitioner Listserv

_____ Add me to the Consultation Cadre

SUMMITS INITIATIVE – NEW DIRECTIONS FOR STUDENT SUPPORT: Are there key Support Services administrator in your locale who we should include in Regional and State Summits? If so, please provide names and addresses below:

Want Technical Assistance or specific resources? Indicate what you need below and we will contact you.

As always, we welcome your feedback on any facets of the Center’s Operations.

Name _____ Title _____
Agency _____
Address _____
City _____ State _____ Zip _____
Phone (_____) _____ Fax (_____) _____
Website _____ Email: _____

Return this form by fax to (310) 206-8716 or fold and mail.

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For further information, you can contact the center at: School Mental Health Project/Center for Mental Health in Schools,
Box 951563, Department of Psychology, UCLA, Los Angeles, CA 90095-1563
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fold on the dashed line, and seal at bottom)

Return to:

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