# Part I

# Center for Mental Health in Schools Framework

# INTRODUCTION

This manual is designed to be a resource for mental health professionals providing broad-based mental health services in schools. It is based on the work of mental health professionals employed by the Wilder Foundation who worked within St. Paul Public Schools, St. Paul, MN. The material can be used by school mental health employees or by co-located, outside agency staff. This manual emphasizes the mental health framework developed by Howard Adelman, Ph.D., and Linda Taylor, Ph.D., of the Center for Mental Health in Schools (CMHS), University of California at Los Angeles. Their approach addresses barriers to student learning by facilitating system changes within schools.

# **Programs**

This manual focuses on the services provided by the Wilder Child Guidance Clinic staff assigned to the three Achievement Plus and the five Safe Schools/Healthy Students programs based in St. Paul Public Schools. Achievement Plus is a local public/private partnership focused on improving student achievement in three schools through standards-based curriculum and instruction, extended learning opportunities and learning supports for students and families. Safe Schools/Healthy Students was a federally funded grant in five participating schools; the grant supported collaboration between St. Paul Public Schools and several community agencies. The goal of the grant was to promote a safe and healthy learning environment in these schools. Both of these programs used the framework of the Center for Mental Health in the Schools to address barriers to learning and increase student-learning supports.

# Content

The goal of this manual is to provide practical ideas, concrete examples and resources to help mental health professionals reduce barriers to student learning. It highlights the successes and challenges program staff had in implementing the framework of Adelman and Taylor.

# Part I

<u>Chapter 1</u> summarizes the Center for Mental Health in Schools' (CMHS) approach to working in schools.

<u>Chapter 2</u> provides more detailed descriptions of each component of the CMHS framework. This section describes the goals of each component, keys to successfully reaching them, and the challenges, which might hinder progress. These components include:

- Crisis Prevention and Intervention.
- Classroom Focused Enabling or Learning Supports.
- Student and Family Assistance.
- Home Involvement in Schooling.
- Support for Transitions.
- Community Involvement.

# Part II

<u>Chapter 3</u> focuses on how a mental health professional can engage a school in system's change from a mental health perspective. It covers some basic things to do: form alliances, set goals and priorities to integrate student supports into academic efforts.

<u>Chapter 4</u> addresses the similarities and differences between community-based mental health and school-based mental health. This section looks at a variety of issues including each setting's focus, data privacy and confidentiality, supervision, and documentation.

# Part III

The **Appendix** contains specific examples of the tools used in working with schools. References to the work of Howard Adelman, Ph.D., and Linda Taylor, Ph.D., co-directors of the Center for Mental Health in Schools, Los Angeles, CA, are listed in the Appendix, including materials specific to each of their key components. Included in the Appendix are:

- Sample surveys to assess priority issues in the school, adapted from the work of Adelman and Taylor.
- Outlines and materials for staff and/or parent presentations.
- Samples of referral forms, permission letters to parents, flyers for announcements, welcome signs, etc.
- Ideas for psycho-educational groups and outlines for some specific groups.
- Lists of helpful resources.
- Bibliography.

The following story is used as a metaphor by the Center for Mental Health in Schools (CMHS) to help illustrate the need for systemic change within our schools.



# The Bridge Metaphor

In a small town, one weekend a group of school staff went fishing together down a river. Not long after they got there, a child came floating down the rapids calling for help. One from the group on the shore quickly dived in and pulled the child out. Minutes later another, then another, and then many more children were coming down the river and drowning. Soon every one in the group was diving in and dragging children to the shore, resuscitating them, and then jumping back in to save as many as they could. But, there were too many. For every one they saved, several others floated by and drowned. All of a sudden, in the midst of all this frenzy, one of the group stopped jumping in and was seen walking away. Her colleagues were amazed and irate. How could she leave when there were so many children to save? About an hour later, to everyone's relief, the flow of drowning children stopped, and the group could finally catch their breath. At that moment, their colleague came back. They turned on her and angrily shouted:

"How could you walk off when we needed everyone here to save the children?"

# She replied:

"It occurred to me that someone ought to go upstream and find out why so many kids were falling into the river. What I found is that the old wooden bridge had several planks missing, and when some children tried to jump over the gap, they couldn't make it and fell through into the river. So I got someone to fix the bridge."

Adelman and Taylor, Resource Oriented Teams. *Key Infrastructure Mechanisms for Enhancing Education Support*, 2001; Center for Mental Health In Schools at UCLA. UCLA Center for Mental Health in Schools, Department of Psychology, PO Box 951563, Los Angeles, CA 90095.

# Chapter 1

# Summary of the Center for Mental Health in Schools Framework

The framework developed by the Center for Mental Health in Schools (CMHS) is under the leadership of Howard Adelman, Ph.D., and Linda Taylor, Ph.D., and is especially useful in addressing the complex problems schools face in serving today's youth. What is so special about *this* approach? It has the potential to go beyond the co-location of school and mental health services, which tends to look like parallel-play. The Center for Mental Health in the Schools focuses on the integration of school support services with prevention and early intervention efforts to address the social, emotional, and cognitive needs of all the children within the school (*see Figure 1, page 7*).

The work of Adelman and Taylor is part of the school reform effort. It encourages schools to coordinate their resources (support staff, support programs, etc.,) both within a school and across a district. The Center recommends identifying a staff person within a school as a Resource Coordinator, someone who knows the range of services available to support students' learning. This coordinator also understands how to access services, identify gaps in services and develop plans to fill those gaps. The Resource Coordinator, by working with a team from the school, creates or enhances prevention efforts that address adjustment issues commonly faced by all students so that more serious problems can be avoided or reduced. Examples of this type of work are covered under the six components of the Adelman and Taylor framework. (see Figure 2, page 8).

"Everyone understands the need to reduce behavior and emotional problems, absenteeism, drug abuse, drop-outs, teen pregnancy, violence and many other problems that interfere with learning and performing well at school. If schools are to improve and if students are to learn and succeed, such problems must be addressed. However most educational reforms focus primarily on the instructional and management components of schooling without giving sufficient emphasis to students' attitudinal and motivational problems that are unrelated to curriculum and instruction." (Adelman and Taylor, *The Enabling Component*, 1996, UCLA Center for Mental Health in Schools, Department of Psychology, P.O Box. 951563, Los Angeles, CA 90095, p. 3.).

Adelman and Taylor suggest that school reform requires three areas of the school work together: the school's administration, curriculum/instruction, and the learning support component, which addresses mental health related barriers to learning.

According to the work of Adelman and Taylor, school systems need to move away from referral to special education services as the *only* alternative for students who are not successful in the regular education classroom. Mental health providers within the schools also need to move away from focusing solely on students one at a time. What is good for children can be provided at the school level by all of the adults who interact with students. The CMHS' efforts are aimed at improving school climate, introducing early intervention programs to reduce barriers to learning and coordinating school and community support services. By systemically addressing the needs of all students, this approach allows for more effective special services to be provided for a well-defined sub-group of the student population.

Adelman and Taylor developed their framework to help school's meet the increasing needs of a diverse, urban student population. Many studies have indicated that only 10-15% of students come to school ready to learn. The majority of students arrive at school needing a range of learning supports to help them benefit from classroom instruction. Only a small percentage of these students truly need specialized accommodations. Adelman and Taylor's framework provides a guide to use existing support services to reach more students, to create programs when gaps in services are identified and to coordinate resources so that support services are not duplicated in a school.

Developing a learner support component in a school requires the assessment and coordination of the school's support services. The school's resources are first mapped so that the range of programs and supports already in existence are understood and can be easily accessed. The needs of students and staff are surveyed and gaps in services identified. If necessary, resources can then be re-allocated or developed to meet new/different needs. The CMHS has developed surveys for each of the six components identified by Adelman and Taylor.

The following chapters will explain the resource coordinating function and how to map resources and survey staff about needs for learner supports. Detailed information about the six components of the CMHS framework will be provided. Additionally, we will provide some guidelines for introducing this framework into a school and how to blend school and community resources across primary prevention, early intervention and services for students with high-end needs.

# Figure 1

# A Comprehensive, Multifaceted, and Integrated Approach to Addressing Barriers to Learning and Promoting Healthy Development

School Resources (facilities, stakeholders, programs, services)

# Examples:

- Enrichment & recreation
- General health education
- Promotion of social and emotional development
- · Drug and alcohol education
- Support for transitions
- Conflict resolution
- Parent involvement
- Pregnancy prevention
- · Violence prevention
- Dropout prevention
- Learning/behavior accommodations
- Work programs
- Special education for learning disabilities, emotional disturbance, and other health impairments

Systems for Positive Development &
Systems of Prevention
primary prevention
(low end need/low cost
per student programs)

Systems of Early Intervention early-after-onset (moderate need, moderate cost per student)

Systems of Care treatment of severe and chronic problems (High end need/high cost per student programs) Community Resources (facilities, stakeholders, programs, services)

# Examples:

- Youth development programs
- Public health & safety programs
- Prenatal care
- Immunizations
- Recreation & enrichment
- Child abuse education
- Early identification to treat health problems
- Monitoring health problems
- Short-term counseling
- Foster placement/group homes
- · Family support
- Shelter, food, clothing
- Job programs
- Emergency/crisis treatment
- Family preservation
- Long-term therapy
- Probation/incarceration
- Disabilities programs
- Hospitalization

Reference: "Addressing Barriers to Learning" Vol. 2 (4) 1997 Center for Mental Health in Schools, UCLA, used by permission of the authors.

# Figure 2

Creating this type of comprehensive systemic change within schools is challenging. The CMHS serves as a highly accessible and responsive technical assistance center. To this end, the CMHS has compiled a variety of resources and strategies by which to accomplish this task, broken down into six major areas of intervention. These six components are as follows:

#### I. Crisis Prevention and Intervention

- Promote overall safety.
- Put systems in place for preventing, responding to, and minimizing the impact of crisis situations.

# II. Classroom Focused Enabling

- Enhance the classroom teacher's capacity to address student problems.
- Reduce the need for special services outside the classroom.

#### III. Student and Family Assistance

- Educate the school staff in order to help them understand when assistance is needed
- Create a system by which to identify and coordinate services to students who require specialized assistance within the school and community.
- Provide therapeutic services to select individuals, groups and families.

# IV. Home Involvement in Schooling

- Create a welcoming school environment.
- Mobilize parents to problem solve.
- Develop programs to address specific parent learning and support needs.

#### V. Support for Transitions

• Enhance school capacity to handle a variety of transition concerns, e.g., transitions to a new school, between grades, to middle school from elementary, and transitions during the school day.

#### VI. Community Involvement

- Build linkages with community resources and increase the community's presence in the school.
- Assess and create opportunities for volunteers.
- Provide programming for youth from the community.