Restructuring Education Support Services and Integrating Community Resources: Beyond the Full Service School Model

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Abstract: Major gaps in initiatives to restructure education and community health and social services are highlighted. To address gaps and accelerate reform beyond the full service school model, the enabling component is introduced as a unifying, policy-oriented concept. Examples of current efforts to operationalize the concept are outlined. Implications for school psychologists are stressed in terms of changing roles and functions.

School psychologists are caught up in the frenzy of reforms sweeping schools and community-based service agencies. No one questions the need for reform, but many are concerned about current directions. In this regard, the following discussion briefly highlights major gaps in the movements to restructure education and community health and social services. Then, with a view to accelerating reform by addressing the gaps, the concept of the enabling component is delineated.

Gaps in the Movements to Restructure Education and Community Health and Social Services

The movement to restructure schools often makes reference to school-lined services. However, initiatives to link community health and social services to schools do not stem from educational reform. They emerge from efforts to restructure community services. Both arenas of reform have the potential to make things better for students, their families, schools, and society; both have critical deficiencies.

What's Missing in School Reform?

Few would deny that schools must deal

with factors interfering with students' learning and performance. Indeed, the literature on school restructuring is filled with statements affirming that such factors must be addressed if the educational mission is to succeed (see Barth, 1990; Elmore & Associates, 1990; Lieberman & Miller, 1990; Newmann, 1993; Task Force on Education of Young Adolescents, 1989). Moreover, at state and national levels, the need for services that enable students to benefit from instruction is clearly acknowledged by the educational bureaucracy, including such bodies as departments of education, the Council of Chief State School Officers, and associations of school boards. To a degree, recognition also exists that such activity should be organized into a comprehensive, integrated approach (Government Accounting Office, 1993). However, despite widespread recognition of need, the school reform movement continues to pay scant attention to education support programs and services. That is, major leaders of comprehensive educational restructuring rarely go beyond advocating for reforms in curricula, instruction, and the way schools are managed. Even when they do discuss the problem of addressing barriers to student learning, they seem content simply to call for

My colleague Linda Taylor's contributions are reflected throughout this work. In addition, many other persons (too many to name) will recognize their contributions to this work. Hopefully, I have expressed adequate appreciation to them at other appropriate times, and they will feel some sense of satisfaction in seeing this work published. Support for aspects of this work came from the U.S. Office of Education's School Dropout Assistance Program.

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"coordinated services" and "school-linked services." Fundamental restructuring considerations related to reforming and weaving together school and community resources remain ignored. Thus, it is not surprising that relatively little has been done at any administrative level to establish the leadership and infrastructure required for essential reform of school-owned and operated psychosocial and health programs and their linkage with community services.

The need to restructure education support programs is evident from observing school operations. Factors such as categorical funding and the lack of effective mechanisms for coordination and integration result in piecemeal design of delivery systems and disjointed implementation of programs and services. In some schools, for example, a student identified as at risk for dropout, suicide, and substance abuse may be involved in three counseling programs operating independently of each other. Functionally, much of the activity focuses on individuals and small groups and is carried out in a "clinical" fashion (Adelman, 1995). Organizationally, practitioners at a school site operate in relative isolation and usually are not included in new governance bodies as schools move toward school-based management and shared decision making. Relatedly, time for on-the-job professional education remains exceedingly limited (National Education Commission on Time and Learning, 1994), and little or no attention is paid to cross-disciplinary training and interprofessional education (Lawson & Hooper-Briar, 1994; U.S. Department of Education, Office of Educational Research and Improvement, American Educational Research Association, 1995). In addition, aides and volunteers working in this area still receive little or no formal training before or after they are assigned duties.

All this contributes to maintaining an enterprise that is narrowly focused, fragmented, and oriented to discrete problems and specialized services; and one that is not a prominent part of a school's organizational structure and daily functions. Based on their status in the administrative structure, it seems reasonable to conclude that the prevailing view of pupil services, in policy and practice, is that they are desirable,

but not essential. Because of their devalued status in the educational hierarchy, such auxiliary or support services too often are among those deemed dispensable as budgets tighten. Indeed, many districts have cut back a significant portion of their pupil services' staff in recent years, thereby further limiting the ability of schools to address barriers to learning and enhance healthy development.

As districts move to decentralize authority and empower all stakeholders, realignment is likely with respect to how pupil service professionals are governed and how they are involved in school governance and collective bargaining (Hill & Bonan, 1991; Streeter & Franklin, 1993). However, if the restructuring of education support programs and services continues to be a low priority, emerging realignments probably will not encompass important reforms and may even exacerbate current deficiencies.

Problems with Initiatives to Reform Community Services and Link Them to Schools

Deficiencies comparable to those found with respect to school-owned programs and services also are evident in community agencies. Concern for addressing fragmentation has renewed the movement to enhance coordination and integration of community health and human services. The hope is to better meet the needs of those served and to serve greater numbers using existing resources. To these ends, community agencies are being encouraged to enhance accessibility through better linkages with schools and, where feasible, to make schools a context for a significant segment of the basic programs and services that constitute a comprehensive system of care (e.g., Adler & Gardner, 1994; Cahill, 1994; Dryfoos, 1993, 1994; Government Accounting Office, 1993; Hooper-Briar & Lawson, 1994; Koppich & Kirst, 1993; Kusserow, 1991; Melaville & Blank, 1993; Sheridan, 1995).

One result of "school-linked services" initiatives is that a variety of school-community collaborations are being tested around the country. Dryfoos (1994, 1995) reviewed the trend under the rubric of *full*

service schools. To illustrate the trend, she described one middle school's efforts to enhance student and family access to health and social services. First, partnership agreements were developed with communitybased agencies to bring additional practitioners to the campus (these included a mental health professional, a part-time student assistance counselor, and a DARE police officer). Then, with some grant support, the school implemented an interagency case management team and established an on-site resource center for primary health and dental care. Most of the grant support was used for personnel, such as a project coordinator who oversees the case management team, a neighborhood services worker who facilitates school and service provider linkages, and a youth development worker who is responsible for peer programs and linking students to community youth-serving programs. With increased resources, the on-campus services now include interventions for mental health, substance abuse (prevention and treatment), family support and parenting education, health and dental screening and assessment, child welfare services, and academic support and tutoring. Off-site referrals continue to be made for extensive dental treatment, health services, and mental health help, as well as for temporary shelter, food, and clothing. Plans call for an expanded facility to house an increasing range of community agency service providers, including probation officers and outreach workers.

Dryfoos's (1994) analysis of full service schools stressed that:

Much of the rhetoric in support of the full service schools concept has been presented in the language of systems change, calling for radical reform of the way educational, health, and welfare agencies provide services. Consensus has formed around the goals of one-stop, seamless service provision, whether in a school- or community-based agency, along with empowerment of the target population ... most of the programs have moved services from one place to another, for example, a medical unit from a hospital or health department relocates into a school through a contractual agreement, or staff of a community mental health center is reassigned to a school, or a grant to a school creates a coordinator in a center. As the program expands, the center staff work with the school to draw in additional services, fostering more contracts between the schools and community agencies. But few of the school systems or the agencies have changed their governance. The outside agency is not involved in school restructuring or school policy, nor is the school system involved in the governance of the provider agency. The result is not yet a new organizational entity, but the school is an improved institution and on the path to becoming a different kind of institution that is significantly responsive to the needs of the community. (p. 169)

A primary focus of the full service school model is on development of mechanisms to enhance service access, improve case management, coordinate resources, reduce redundancy, and increase efficacy. The tendency is to approach all this from the perspective of enhancing access to community services by bringing as many as feasible to a school site. By focusing mainly on linking community services to schools, the school-linked services movement tends to disregard the tremendous resources already in schools and the true scope of the problem of coordinating resources. That is, this emphasis downplays programs and services owned and operated by schools, as well as overlooks the importance of weaving together and reconfiguring school and community resources. In turn, this colludes with the misguided view of some legislators who think that linking community resources to schools will suffice in countering factors that interfere with learning—thereby freeing up the dollars underwriting schoolowned services for use elsewhere. The movement also produces tension between school-based staff and their counterparts in community-based organizations because the emphasis on linking up with the "outside" is viewed by many pupil service professionals as discounting their skills and jeopardizing their jobs (Mintzies, 1993). Such tension is a major impediment to enhancing coordination between community and school services.

In general, available data suggest that school-community collaborations hold great promise for enhancing availability and access (see reviews by Crowson & Boyd, 1993; Knapp, 1995; Marzke, Chimerine, Morrill, & Marks, 1992; Wagner et al., 1994). At

the same time, such collaborations are fraught with problems and may even lead to policies that jeopardize the limited resource base for assisting students and families. Successful school-community collaborations are described as requiring the empowerment of children and families and the capability to address diverse constituencies and contexts (White & Wehlage, 1995). Programmatically, it is suggested that success requires ensuring that school and community efforts are designed to complement and enhance each other in ways that evolve a comprehensive, integrated approach to address barriers to learning and enhance healthy development (Adelman, in press). And, it can be added that the goal of comprehensiveness is incompatible with cutting back on existing resources.

The Enabling Component: Moving Beyond the Full Service School Model

Filling gaps in current reforms requires: (a) restructuring school-operated education support programs and services; (b) increasing coordination and integration of community-based health and social services; (c) enhancing connections between community and school services; and (d) evolving school and community programs into a comprehensive, coordinated, and increasingly integrated set of interventions for students and their families. Toward these ends, a new concept focused on enabling learning and dubbed the enabling component has been formulated as a guide for policy, research, theory, and practice (Adelman, in press; Adelman, 1995; Adelman & Taylor, 1994).

Webster's dictionary defines enabling as "providing with the means or opportunity; making possible, practical, or easy; giving power, capacity, or sanction to." As operationalized so far, the concept of an enabling component represents basic organizational and programmatic rethinking of all schoolbased and linked activity meant to address barriers that interfere with teaching and learning and related efforts designed to promote healthy development. The following presentation underscores why such a new concept is called for, delineates its nature, and places it in the context of restructuring

education. The discussion reflects work that is an ongoing part of several major restructuring initiatives, including one of the nine national "break the mold" models supported by the New American Schools Development Corporation (Learning Center Model, 1995).

A Unifying, Policy-Oriented Concept

Schools committed to the success of all children must have an array of activity designed to *enable learning* by addressing barriers to learning. No one is certain of the exact number of students who require assistance in dealing with the many factors that can interfere with learning and performance. There is consensus, however, that significant barriers are encountered by a majority of students whose families are poor.

Most schools and many community services use highly circumscribed intervention models in approaching barriers to learning. The primary strategy generally is to refer individual cases for specific health and social services-which often leads to narrow and piecemeal interventions and inevitably overwhelms available resources. No one denies the validity of many of these referrals. At the same time, it is evident that an overemphasis on providing services for individuals is an insufficient strategy for addressing the full range of factors causing poor academic performance, dropouts, gang violence, teenage pregnancy, substance abuse, racial conflict, and so forth.

By way of contrast, comprehensive models recognize that an extensive continuum of community and school interventions is required to ameliorate complex problems. Such a continuum ranges from programs for primary prevention and earlyage intervention, to those designed to treat problems soon after onset, to treatments for severe and chronic problems. The range of interventions allows for approaching problems developmentally (i.e., from before birth through each level of schooling and beyond) and with a range of activity, with some focused on individuals and some on environmental systems. Included are preschool and early school adjustment programs, as well as programs designed to promote and maintain safety at home and at school, promote and maintain physical and mental health, improve and augment ongoing social and academic supports, intervene prior to referral for intensive treatments, and provide intensive treatment (Adelman & Taylor, 1994). The scope of activity, of course, underscores why development of formal mechanisms for long-lasting interprogram collaboration is necessary (Adelman, 1993).

The concept of an enabling component is meant to encapsulate a comprehensive intervention perspective. It is formulated around the proposition that a comprehensive integrated continuum of enabling activity is essential in addressing the needs of the many youngsters who encounter barriers that interfere with their benefitting satisfactorily from instruction. Operationalization of the concept calls for meshing together school and community enabling activity to address specific problems experienced by students and their families. This includes programs to promote healthy development and foster positive functioning as the best way to prevent many learning. behavior, emotional, and health problems and as a necessary adjunct to corrective interventions.

At a fundamental policy level, the concept of an enabling component paves the way for understanding that school restructuring agendas should encompass three primary and complementary components: instruction, enabling, and management. The message for policy makers is: For school reform to produce desired student outcomes. school and community reformers must expand their vision beyond restructuring instructional and management functions and recognize a third primary and essential set of functions is involved in enabling teaching and learning. Adoption of such a vision means restructuring education support services and programs in ways that move (a) from fragmented, categorical, and specialist-oriented approaches toward a comprehensive and cohesive programmatic approach, and (b) from viewing activity in this arena as supplementary toward a policy that establishes the component as primary and essential. Clearly, all this represents a move beyond the concept of full service schools.

In general, the concept of an enabling component is meant to provide a broad unifying notion around which those concerned with restructuring education support programs and services can rally. Evidence of its value as a concept is seen in the key role it played in convincing the Los Angeles Unified School District to initiate a fundamental restructuring of its support services (LAUSD, 1995) and in the fact that the state legislature in California was persuaded to incorporate it in a proposed urban education bill (AB 784).

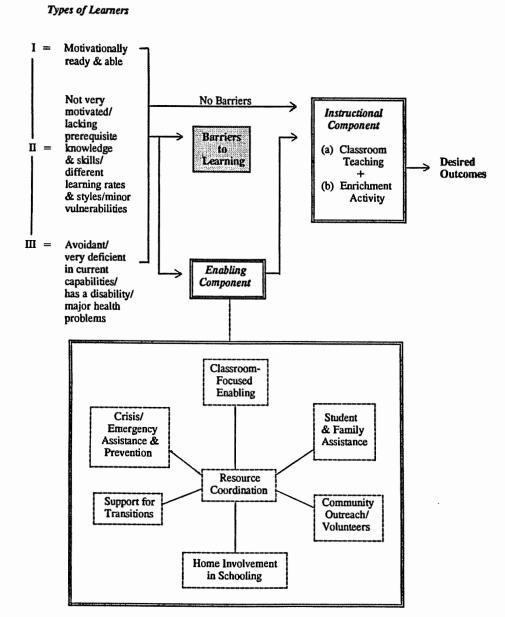
After policy makers recognize the essential nature of a component for addressing barriers to learning, it should be easier to weave together all such activity (including special and compensatory education) and elevate the status of programs designed to enhance healthy development. It also should be less difficult to gain acceptance for fundamental policy shifts to reshape programs of pre- and inservice education.

Toward Operationalizing the Concept

Operationalizing an enabling component requires formulating a carefully delimited framework of basic programmatic areas and creating an infrastructure for restructuring enabling activity. The infrastructure encompasses mechanisms for restructuring resources in ways that enhance each programmatic area's efficacy. It also includes mechanisms for coordinating among enabling activities, for enhancing resources by developing direct linkages between school and community programs, for moving toward increased integration of school and community resources, and for integrating the instructional, enabling, and management components. To clarify some of this, what follows is a brief discussion outlining (a) a framework that delineates six programmatic areas, and (b) mechanisms for restructuring education support programs from the school outward.

Six areas of programmatic activity. Based on analyses of existing school and community activity, my colleagues and I clustered enabling activity into six interrelated, basic programmatic areas (Adelman,

Figure 1. An enabling component to address barriers to learning and enhance healthy development.



in press; Adelman & Taylor, 1994). As graphically represented in Figure 1 and outlined in Table 1, these encompass interventions to (a) enhance classroom-based efforts to enable learning, (b) provide prescribed student and family assistance, (c) respond to and prevent crises, (d) support transitions,

(e) increase home involvement in schooling, and (f) outreach to develop greater community involvement and support (including recruitment of volunteers).

In organizing an enabling component, it is the content of each of the basic areas that guides program planning, implementation,

Table 1 Six Interrelated Clusters of Programmatic Enabling Activity

Classroom Focused Enabling

When a teacher encounters difficulty in working with a youngster, the first step is to see whether there are ways to address the problem within the regular classroom and perhaps with added home involvement. The focus is on enhancing classroom-based efforts to enable learning by increasing teacher effectiveness for preventing and handling problems in the classroom. This is accomplished by providing personalized help to increase a teacher's array of strategies for working with a wider range of individual differences. For example, teachers learn to use peer tutoring and volunteers to enhance social and academic support and to in crease their range of accommodative strategies and their ability to teach students compen satory strategies; and as appropriate, they are provided support in the classroom by resource and itinerant teachers and counselors. Two aims of all this are to increase mainstreaming efficacy and reduce the need for special services.

Work in this area requires (a) programs for personalized professional development, (b) systems to expand resources, (c) programs for temporary out-of-class help, and (d) programs to develop aides, volunteers, and any others who help in classrooms or who work with teachers to enable learning. Through classroom-focused enabling programs, teachers are better prepared to address similar problems when they arise in the future. (The classroom curriculum already should encompass a focus on fostering socioemotional and physical development; such a focus is seen as an essential element in preventing learning, behavior, emotional, and health problems.)

Student and Family Assistance

Some problems, of course, cannot be handled without special interventions, thus the need for student and family assistance. The emphasis is on providing special services in a personalized way to assist with a broad range of needs. To begin with, available social, physical, and mental health programs in the school and community are used. As community outreach brings in other resources, they are linked to existing activity in an integrated manner. Special attention is paid to enhancing systems for triage, case and resource management, direct services to meet immediate needs, and referral for special services and special education resources and placements as appropriate. Ongoing efforts are made to expand and enhance resources. As major outcomes, the intent is to ensure special assistance is provided when necessary and appropriate and that such assistance is effective.

Work in this area requires (a) programs designed to support classroom-focused enabling, with specific emphasis on reducing the need for teachers to seek special programs and services, (b) a stakeholder information program to clarify available assistance and how to access help, (c) systems to facilitate requests for assistance and strategies to evaluate the requests (including use of strategies designed to reduce the need for special intervention), (d) a programmatic approach for handling referrals, (e) programs providing direct service, (f) programmatic approaches for effective case and resource management, and (g) interface with community outreach to assimilate additional resources into current service delivery.

Crisis Assistance and Prevention

The intent here is to respond to, minimize the impact of, and prevent crises. Desired outcomes of crisis assistance include ensuring immediate emergency and follow-up care is provided so students are able to resume learning without undue delay. Prevention activity outcomes are reflected in indices showing there is a safe and productive environment and that students and their families have the type of attitudes and capacities needed to deal with violence and other threats to safety.

Work in this area requires (a) systems and programs for emergency/crisis response at a site, and throughout a school complex and community (including a program to ensure follow-up care), and (b) prevention programs for school and community to address school safety and violence reduction, suicide prevention, child abuse prevention, and so forth.

(Table continues ...)

(Table 1, continued)

Support for Transitions

This area involves planning, developing, and maintaining a comprehensive focus on the variety of transitions concerns confronting students and their families. Anticipated outcomes are reduced alienation and increased positive attitudes and involvement related to school and various learning activities.

Work in this area requires (a) programs to establish a welcoming and socially supportive school community, especially for new arrivals; (b) counseling and articulation programs to support grade-to-grade and school-to-school transitions, moving to and from special education, going to college, moving to postschool living and work; and (c) programs for before and after-school and intersession to enrich learning and provide recreation in a safe environment.

Home Involvement in Schooling

Efforts to enhance home involvement must range from programs to address specific learning and support needs of adults in the home to approaches that empower legitimate parent representatives to become full partners in school governance.

Work in this area includes (a) programs to address specific learning and support needs of adults in the home, such as ESL classes and mutual support groups; (b) programs to help those in the home meet their basic obligations to the student, such as instruction for parenting and for helping with schoolwork; (c) systems to improve communication about matters essential to the student and family; (d) programs to enhance the home-school connection and sense of community; (e) interventions to enhance participation in making decisions that are essential to the student; (f) programs to enhance home support related to the student's basic learning and development; (g) interventions to mobilize others at home to problem solve related to student needs; and (h) intervention to elicit help (support, collaborations, and partnerships) from others at home with respect to meeting classroom, school, and community needs. The context for some of this activity may be a parent center which may be part of a Family Service Center facility if one has been established at the site). Outcomes include indices of parent learning, student progress, and community enhancement specifically related to home involvement.

Community Outreach for Involvement and Support (including a focus on volunteers)

Outreach to the community is used to build linkages and collaborations, develop greater involvement in schooling, and enhance support for efforts to enable learning. Outreach is made to (a) public and private community agencies, universities, colleges, organizations, and facilities; (b) businesses and professional organizations and groups; and (c) volunteer service programs, organizations, and clubs. Outcomes include indices of community participation, student progress, and community enhancement.

Work in this area requires (a) programs to recruit community involvement and support (e.g., linkages and integration with community health and social services; cadres of volunteers, mentors, and individuals with special expertise and resources; local businesses to adopt-a-school and provide resources, awards, incentives, and jobs; formal partnership arrangements); (b) systems and programs specifically designed to train, screen, and maintain volunteers (e.g., parents, college students, senior citizens, peer and cross-age tutors and counselors, and professionals-in-training to provide direct help for staff and students—especially targeted students); (c) programs outreaching to hard-to-involve students and families (those who don't come to school regularly, including truants and dropouts); and (d) programs to enhance community-school connections and sense of community (e.g., orientations, open houses, performances and cultural and sports events, festivals and celebrations, workshops and fairs).

evaluation, personnel development, and stakeholder involvement. The intent is to blend a continuum of programs—from primary prevention to treatment of chronic problems—and a continuum of interveners, advocates, and sources of support (e.g., peers, parents, volunteers, nonprofessional staff, professionals-in-training, professionals). Thus, the emphasis throughout is on collaboration—cooperation, coordination, and, where viable, integration—among all enabling activities, as well as with the instructional and management components.

If feasible, a *Center* facility provides a useful focal point and hub for enabling component operations. Also as feasible, the integrated use of advanced *technology* is highly desirable (e.g., a computerized system to organize information, aid case management, and link students and families to referrals).

Restructuring from the school outward. An appropriate infrastructure must be developed for an enabling component to function. Organizational and operational mechanisms at school, complex-cluster. and systemwide levels are required for oversight, leadership, resource development, and ongoing support. Well-designed mechanisms provide the means for (a) arriving at decisions about resource allocation, (b) maximizing systematic and integrated planning, implementation, maintenance, and evaluation of enabling activity, (c) outreaching to create formal working relationships with community resources to bring some to a school and establish special linkages with others, and (d) upgrading and modernizing the component to reflect the best intervention thinking and use of technology. All this calls for new roles and functions for some staff and greater involvement of parents, students, and other representatives from the community. It also calls for redeployment of existing resources as well as finding new ones.

From a decentralized perspective, the focus is first on school level mechanisms related to basic programmatic areas. Then, based on analyses of what is needed to facilitate and enhance school level efforts, mechanisms are conceived for groups of schools and the entire system. Awareness of

the myriad political and bureaucratic difficulties involved in making major institutional changes, especially with limited financial resources, leads to the caution that the type of large-scale restructuring described below is not a straightforward sequential process. Rather, the changes emerge in overlapping and spiraling phases.

(1) School level mechanisms. A programmatic approach for addressing barriers to learning must coalesce at the local level. Thus, the school and its surrounding community are a reasonable focal point around which to build a multilevel organizational plan. Moreover, primary emphasis on this level meshes nicely with contemporary restructuring views that stress increased school-based and neighborhood control.

From a school's perspective, there are three overlapping challenges in moving from piecemeal approaches to an integrated enabling component. One involves weaving existing activity together, including curricula designed to foster positive social, emotional, and physical development. A second entails evolving programs so they are more effective. The third challenge is to reach out to other resources in ways that expand the enabling component. Such outreach encompasses forming collaborations with other schools, establishing formal linkages with community resources, and attracting more volunteers, professionals-in-training, and community resources to work at the school site.

Meeting the above challenges requires development of well-conceived mechanisms that are appropriately sanctioned and endowed by governance bodies. For example, with respect to the six programmatic areas outlined in Table 1, specific schoolbased mechanisms must exist so that all are pursued optimally in daily practice and are maintained over time. One way to conceive the necessary mechanisms is in terms of school-based program teams. The functions of each team are to ensure programmatic activity is well-planned, implemented, evaluated, maintained, and evolved. In forming such teams, identifying and deploying enough committed and able personnel may be difficult. Initially, a couple of motivated and competent individuals can lead the way

in a particular program area-with others recruited over time as necessary and/or interested. Some teams might even consist of one individual. In some instances, one team can address more than one programmatic area or may even serve more than one school. Many schools, of course, are unable to simultaneously establish mechanisms to cover all six areas. Such schools must establish priorities and plans for how they will phase in their restructuring of enabling activity. The initial emphasis, of course, should be on weaving together existing resources and developing program teams designed to meet the school's most pressing needs, such as teams focused on student and family assistance, crisis assistance and prevention, and classroom focused enabling.

In addition to program teams, a separate on-site organizational mechanism for resource coordination addresses overall cohesion among programmatic areas. This mechanism also can be a team. Such a school-based enabling component coordinating team can reduce fragmentation and enhance cost-efficacy of enabling activity by assisting program teams in ways that encourage them to function in a coordinated and increasingly integrated manner (Rosenblum, DiCecco, Taylor, & Adelman, 1995). Properly constituted, this group also provides on-site leadership for an enabling component and ensures the maintenance and improvement of such a component.

Schools require assistance in establishing and maintaining an appropriate infrastructure for enabling activity. A specially trained organizational facilitator represents a mechanism that embodies the necessary expertise to help (a) develop essential school-based leadership, (b) establish program and coordinating teams, and (c) clarify how to link up with community programs and enhance community involvement (Adelman, 1993; Adelman & Taylor, 1993a, 1993b, 1994). Current restructuring efforts in the Los Angeles Unified School District suggest that a facilitator can rotate within a group of 10-12 schools to phase-in an appropriate infrastructure for enabling activity at each site over 1 year. Then, the facilitator can move on to another group of schools. After moving on, plans call for the facilitator to return periodically to assist with maintenance, share new ideas for enabling activity, help with development of additional programs, and contribute to related inservice. Work to date suggests that a relatively small cadre of organization facilitators can phase-in desired mechanisms throughout a relatively large district over a period of several years. School psychologists who have been redeployed and trained for these positions adapt quite easily to the functions and report high levels of job satisfaction.

Efforts related to developing an enabling component for the Learning Center Model (1995) help clarify some of these points. The first step for the organization facilitator was to help policy makers understand the need to restructure the school's support programs and services. This led to adoption of the enabling component concept by the site's governance body and to an agreement about the role the organization facilitator would play in helping staff implement reforms. The process of restructuring began with assignment of an assistant principal to function as the component's administrative leader and establishment of a coordinating team consisting of the school's pupil service personnel, the administrative leader, and several teachers. As a focal point for restructuring, the organization facilitator helped the team map and analyze all school resources currently being used to address barriers to student learning. The six interrelated areas described in Table 1 provided a template to organize mapping and analyses. By clustering existing activities into the six areas, the team was able to consider a new programmatic vision for the school's efforts to address barriers to learning and enhance healthy development. By analyzing activities from this perspective, the team identified essential activities, major programmatic gaps, redundant efforts, and several long-standing activities that were having little effect. Decisions were made to eliminate redundant and ineffective activity and redeploy the resources to strengthen essential programs and begin to fill gaps.

Pupil services staff played key roles in mapping, analyzing, and redeploying resources. And with restructuring has come

expanded roles for such staff. Besides continuing to provide job-specific services, pupil service personnel are part of teams developing programs to fill major gaps related to each of the six areas. Such staff will be the backbone of efforts to enhance enabling activity carried out by others, such as teachers, classified staff, parents, volunteers, peer interveners, and professionalsin-training. For example, several are part of a team developing an inservice package for the school's regular classroom teachers that focuses specifically on improving classroom-based efforts to enhance the functioning of students with mild-to-moderate learning, behavior, and emotional problems. When this new teacher capacity building effort is initiated, pupil service staff will play a role in implementing inservice workshops and in working directly with teachers in their classroom to establish new approaches.

As one facet of the school's community outreach, the organization facilitator has trained staff how to bring community resources to the site in ways that do not displace essential school resources. This is accomplished by integrating the community as part of the enabling component-linking each available community resource to one or more of the six areas either to fill a gap or enhance the school staff's efforts by becoming part of an ongoing program. To ensure coordination and integration, all community agencies working at the site are asked to have a representative participate on the Enabling Component Coordinating Committee.

(2) Mechanisms for clusters of schools. Conceptualization of the necessary school-level infrastructure helps clarify what supportive mechanisms should be developed at school, complex-cluster and systemwide levels. For example, neighboring schools often have common concerns and may have programmatic activity that can use the same resources. By sharing, they eliminate redundancy and reduce costs. To these ends, representatives from each participating school can form an interschool coordinating council. Such a mechanism can 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, the group can play a special role in community outreach both to create formal working relationships and 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 an enabling component. Organization facilitators also can assist in the development and maintenance of such councils, as well as helping to identify and develop other needed multisite mechanisms.

(3) Systemwide reorganization. School and multisite mechanisms are not sufficient; systemwide policy guidelines, leadership, and assistance are required. With respect to the concept of an enabling component, a district policy commitment represents a necessary foundation. Optimally, the policy should place development of a comprehensive, integrated approach for enabling learning on a par with instruction and management.

Then, the district must adopt a prototype and create necessary systemwide mechanisms for operationalizing an enabling component. Development of systemwide mechanisms should reflect a clear conception of how each supports school and complex-cluster level activity. Three systemwide mechanisms seem essential in ensuring coherent oversight and leadership for developing, maintaining, and enhancing an enabling component. One is a systemwide leader with responsibility and accountability for the component. This leader's functions include (a) evolving the districtwide vision and strategic planning for an enabling component, (b) ensuring coordination and integration of enabling activity among groups of schools and systemwide, (c) establishing linkages and integrated collaboration among systemwide programs and with those operated by community, city, and county agencies, and (d) ensuring integration with instruction and management. The leader's functions also encompass evaluation, including determination of the equity of enabling efforts, quality improvement reviews of all mechanisms and procedures, and, of course, ascertaining outcome efficacy.

Two other recommended mechanisms at this level are a *systemwide resource co- ordinating council* and a *design team*. The former can provide guidance for operational coordination and integration across groups of schools; the latter can provide expertise and leadership for the ongoing evolution of an enabling component.

In sum, the concept of the enabling component is proving its value as a unifying concept for influencing policy and is currently being operationalized and imple mented. In the coming years, it will evolve based on feedback from evaluative research focused on the total restructuring effort at school, cluster, and systemwide levels.

Implications for School Psychologists

Over the next decade, initiatives to restructure education and community health and human services will reshape the work of all pupil service professionals. Currently, such personnel can improve intervention efficacy through enhancing coordination and integration of health and social services. With respect to operationalizing an enabling component, they can help schools and communities create a comprehensive, integrated approach for addressing barriers to learning and enhancing healthy development. By working to restructure all education support programs and services, not only can they improve the state of the art, they will provide a safety net of care for generations to come.

Consistent with changing roles and functions is the view that specialist-oriented activity and training must be balanced with a generalist perspective (e.g., Henggeler, 1995). Emerging trends designed to counter overspecialization include granting waivers from regulatory restrictions and enhancing flexibility in the use of categorical funds. Relatedly, there are proposals and pilot programs focused on cross-disciplinary training and interprofessional education to better equip service professionals to assume expanding roles and functions.

These trends recognize underlying commonalities among a variety of student problems and are meant to encourage expanded use of generalist strategies in ameliorating them (Carnegie Council on Adolescent De velopment, 1995). Relatedly, the intent is to foster less emphasis on intervention ownership and more attention on accomplishing desired outcomes through flexible roles and functions for staff (see Adelman & Taylor, 1994; Lawson & Hooper-Briar, 1994; Lipsky & Gartner, 1992; Young, Gardner, Coley, Schorr, & Bruner, 1994).

Although their range of knowledge and skills already makes school psychologists invaluable assets, the movement toward and beyond full service schools clearly calls for functions that go beyond direct service and traditional consultation (Knoff & Batsche, 1991; Reschly & Ysseldyke, 1995). Reform provides both a challenge and an opportunity for all pupil service professionals to play multifaceted roles-providing services and much more. For this to happen, however, steps must be taken to ensure that such staff are not completely consumed by their daily caseloads. Education reformers have found it essential to restructure teachers' time to enable their meaningful participation in reform efforts; obviously, the same accommodations must be made for pupil service personnel (National Education Commission on Time and Learning, 1994).

How should the role and functions of school psychologists be restructured? All who work to address barriers to student learning must have the time, continuing education, and opportunity not only to provide direct help but to act as advocates, catalysts, brokers, and facilitators of reform. And, it should be emphasized that these additional duties include participation in school and district governance, planning, and evaluation bodies.

The position of organization facilitator described above illustrates how selected pupil service professionals can be redeployed and educated to play a key role as agents for systemic change. In this role, school psychologists already are demonstrating their ability to help a district restructure its support services. Their expanded functions include creating readi-

ness for change, helping schools develop mechanisms for mapping, analyzing, and redeploying relevant school resources, and working with complexes of schools to evolve long-lasting collaborations with community resources.

Conclusion

One of the eight national education goals seeks schools that are free of drugs, alcohol, and violence; another aspires to ensure all children are ready to learn; a third calls for promoting partnerships that will increase parent involvement and participation in promoting the social, emotional, and academic growth of children. Recognition of these matters is welcome. However, in the absence of a comprehensive model for restructuring education support activity, efforts to meet such goals are likely to produce additional piecemeal approaches thereby exacerbating what already is an overly fragmented enterprise.

Support for this concern is found in the various initiatives designed to foster schoollinked community health and human services. As stressed throughout this article, initiatives for integrating community services and linking them to school sites represent a useful, but grossly inadequate response for addressing the many complex psychosocial problems interfering with instruction and learning at school. By focusing primarily on community services and downplaying a role for existing school resources, these initiatives help perpetuate an orientation that overemphasizes individually prescribed services and results in fragmented community-school linkages. This seems incompatible with developing a truly comprehensive, integrated approach.

A related concern, of course, is that the primary emphasis in restructuring education continues to be on the instructional and management components of schooling. Thus, attention is paid mostly to matters such as curriculum and pedagogical reform, standard setting, professionalization of teaching, decentralization, shared decision making, and parent partnerships. Concentration on such matters is necessary but certainly not sufficient given the nature and scope of barriers that interfere with school

learning and performance among a large segment of students. It seems evident that the prevailing narrow and inadequate edu cational reform focus is perpetuated by the conceptual and resultant policy void surrounding the topic of restructuring schooloperated interventions that address barriers to teaching and learning. As long as the movement to restructure education primarily emphasizes the instructional and management components, too many students in too many schools will not benefit from the reforms. Thus, the demand for significant improvements in achievement scores will remain unfulfilled.

Policy makers and reform leaders have yet to come to grips with the realities of barriers to learning. The concept of an enabling component is offered as a unifying focal point in advocating for new policy priorities and greater attention from reformers. Effective operationalization of the concept into a comprehensive, integrated approach will, of course, require additional theoretical, research, and program development activity. Such work is long overdue and calls for efforts comparable to those expended on restructuring the management and instructional components of schooling. Although all this means investing a considerable amount of social capital, over the long run, the benefits accrued should far outweigh the costs.

References

Adelman, H. S. (1993). School-linked mental health interventions: Toward mechanisms for service coordination and integration. *Journal of Community Psychology*, 21, 309–319.

Adelman, H. S. (1995). Clinical psychology: Beyond psychopathology and clinical interventions. Clinical Psychology: Science and Practice, 2, 28–44.

Adelman, H. S. (in press). Restructuring education support services: Toward the concept of an enabling component. Kent, OH: American School Health Association.

Adelman, H. S., & Taylor, L. (1993a). School-based mental health: Toward a comprehensive approach. The Journal of Mental Health Administration, 20, 32-45.

Adelman, H. S., & Taylor, L. (1993b). Organization Facilitator Guidebook. Los Angeles: Early Assistance for Students and Families Project: Copies available from the School Mental Health Project, Department of Psychology, UCLA.

- Adelman, H. S., & Taylor, L. (1994). On understanding intervention in psychology and education. Westport, CT: Praeger.
- Adler, L., & Gardner, S. (Eds.). (1994). The politics of linking schools and social services. Washington, DC: Falmer Press.
- Barth, R. S. (1990). Improving schools from within: Teachers, parents, and principals can make a difference. San Francisco: Jossey-Bass.
- Cahill, M. (1994). Schools and communities: A continuum of relationships. New York: The Youth Development Institute, The Fund for the City of New York.
- Carnegie Council on Adolescent Development. (1995).

 Great transitions: Preparing adolescents for a new century. New York: Carnegie Corporation.
- Crowson, R. L., & Boyd, W. L. (1993). Coordinated services for children: Designing arks for storms and seas unknown. American Journal of Education, 101. 140-179.
- Dryfoos, J. G. (1993). Schools as places for health, mental health, and social services. *Teachers College Record*, 94, 540–567.
- Dryfoos, J. G. (1994). Full-service schools: A revolution in health and social services for children, youth, and families. San Francisco: Jossey-Bass.
- Dryfoos, J. (1995). Full service schools: Revolution or fad? Journal of Research on Adolescence, 5, 147-172.
- Elmore, R. F., & Associates. (1990). Restructuring schools: The next generation of educational reform. San Francisco: Jossey-Bass.
- Government Accounting Office. (1993). School-linked human services: A comprehensive strategy for aiding students at risk of school failure. Washington, DC: U.S. General Accounting Office.
- Henggeler, S. W. (1995). A consensus: Conclusions of the APA Task Force report on innovative models or mental health services for children, adolescents, and their families. *Journal of Clinical Child Psy*chology, 23, 3-6.
- Hill, P., & Bonan, J. (1991). Decentralization and accountability in public education Santa Monica, CA: Rand.
- Hooper-Briar, K., & Lawson, H. (1994). Serving children, youth and family through interprofessional collaboration and service integration: A framework for action. Oxford, OH: The Danforth Foundation and the Institute for Educational Renewal at Miami University.
- Knapp, M. S. (1995). How shall we study comprehensive collaborative services for children and families? Educational Researcher, 24, 5-16.
- Knoff, H. M., & Batsche, G. M. (1991). Integrating school and educational psychology to meet the ed-

- ucational and mental health needs of all children. Educational Psychology, 26, 167-183.
- Koppich, J. E., & Kirst, M. W. (Eds.). (1993). Integrating services for children: Prospects and pitfalls. Education and Urban Society, 25, entire issue.
- Kusserow, R. P. (1991). Services integration for families and children in crisis. Document No. OEI-0990-00890. Washington, DC: U.S. Department of Health and Human Services.
- LAUSD. (1995). Plan for restructuring student health and human services. Los Angeles: Author
- Lawson, H., & Hooper-Briar, K. (1994). Expanding partnerships: Involving colleges and universities in interprofessional collaboration and service integration. Oxford, OH: The Danforth Foundation and the Institute for Educational Renewal at Miami University.
- Learning Center Model. (1995). A design for a new learning community. Los Angeles: Los Angeles Educational Partnership.
- Lieberman, A., & Miller, L. (1990). Restructuring schools: What matters and what works. Phi Delta Kappan, 71, 759-764.
- Lipsky, D. K., & Gartner, A. (1992). Achieving full inclusion: Placing the student at the center of educational reform. In W. Stainback & S. Stainback (Eds.), Controversial issues confronting special education: Divergent perspectives (pp. 3–12). Boston: Allyn and Bacon.
- Marzke, C. H., Chimerine, C. B., Morrill, W. A., & Marks, E. L. (1992). Service integration programs in community settings. Falls Church, VA: Mathtec, Inc.
- Melaville, A., & Blank, M. (1991). What it takes: Struc turing interagency partnerships to connect children and families with comprehensive services. Washington, DC: Education and Human Services Consortium.
- Mintzies, P. M. (1993). The continuing dilemma: Finding a place for the social work profession in the schools. Social Work in Education, 15, 67-69.
- National Education Commission on Time and Learning. (1994). *Prisoners of time*. Washington, DC: U.S. Government Printing Office
- Newmann, F. M. (1993). Beyond common sense in educational restructuring: The issues of content and linkage. *Educational Reviewer*, 22, 4–13, 22.
- Reschly, D. J., & Ysseldyke, J. E. (1995). School psychology paradigm shift. In A. Thomas & J. Grimes (Eds.), Best practices in school psychology-III (pp. 17–32). Washington, DC: National Association of School Psychologists.
- Rosenblum, L., DiCecco, M. B., Taylor, L., & Adelman, H. S. (1995). Upgrading school support programs through collaboration: Resource coordinating teams. Social Work in Education, 17, 117–124.

- Sheridan, S. M. (1995). Fostering school/community relationships. In A. Thomas & J. Grimes (Eds.), Best practices in school psychology-III (pp. 203–212). Washington, DC: National Association of School Psychologists.
- Streeter, C. L., & Franklin, C. (1993). Site-based management in public education: Opportunities and challenges for school social workers. Social Work in Education, 15, 71–81.
- Task Force on Education of Young Adolescents. (1989). Turning points: Preparing American youth for the 21st century. Washington, Dc: Carnegie Council on Adolescent Development.
- U.S. Department of Education, Office of Educational Research and Improvement, and American Educational Research Association. (1995). School-linked comprehensive services for children and families: What we know and what we need to know. Washington, DC: Author.

- Wagner, M., Golan, S., Shaver, D., Newman, L., Wechsler, M., & Kelley, F. (1994). A healthy start for California's children and families: Early findings from a statewide evaluation of school-linked services. Menlo Park, CA: SRI International.
- White, J. A., & Wehlage, G. (1995). Community collaboration: If it is such a good idea, why is it so hard to do? Educational Evaluation and Policy Analysis, 17, 23–38.
- Young, N., Gardner, S., Coley, S., Schorr, L., & Bruner, C. (1994). Making a difference: Moving to outcome-based accountability for comprehensive services. Falls Church, VA: National Center for Service Integration.

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