

INSIDE THIS ISSUE:
**APA Division 16
 School Psychology**
**2003
 CONVENTION
 PROGRAM**
 IN TORONTO



APA Division 16 School Psychology
Vol. 57, No. 3

The School Psychologist

AMERICAN PSYCHOLOGICAL ASSOCIATION

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TORONTO, CANADA





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The School Psychologist

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PRESIDENT'S MESSAGE

Membership in Division 16: What Good Is It Anyway?

Elaine Clark
University of Utah



Elaine Clark

“Why would a person want to join Division 16, or for that matter, the American Psychological Association?”

While at the annual conference of the National Association of School Psychologists (NASP) this past spring, I spent time at the Division 16 booth speaking with a number of individuals about membership. It forced me to think about the obvious question: Why would a person want to join Division 16, or for that matter, the American Psychological Association (APA)? When APA asks association members this question the typical response is “insurance.” The fact that there are almost as many non-division members of APA who claim an affiliation with school psychology as there are members of the division, however, suggests that people are finding less reason to join Division 16. The good news, and the bad, is that it’s not just us; data from Division Services indicate that half of all APA members do not belong to any division. Perhaps being a division president makes it easier to see the value of membership. Several times a week I receive emails from members of Division 16, especially the Executive Committee (EC), who are involved in activities of APA that represent the interests of all school psychologists, regardless of membership. I can understand, however, how difficult it is to appreciate the full benefit of membership when you are not aware of all the work that is being done (don’t worry, I won’t start forwarding all the emails just to convince you). I would like to just mention what I believe to be one of the greatest benefits of membership in Division 16; that is, the visibility of School Psychology in APA and the representation that this affords us.

I recognize that many of you do not feel that APA adequately represents our interests in children and families. Trust me, conversations that I have had with other child division presidents indicate you are not alone. The perception is that issues that pertain to children are raised too late in discussions; therefore, they have little impact on what APA is doing to advance mental health services across the nation. Of particular concern is that children and families who need services the most are at the greatest risk for not receiving them. Fortunately, there are visible signs that change is occurring within the organization. In recent years, presidents who have research and practice interests in children’s needs have been elected; this includes our

current president, Robert Sternberg. There has also been a growing number of child divisions, including two newly formed divisions, 53 (Child and Adolescent Psychology) and 54 (Pediatric Psychology), and the formation of a child interest coalition. The coalition is being established with the help of the Office of Policy and Advocacy in the Schools (OPAS). The purpose is to ensure a strong and cohesive voice on behalf of children’s needs. Joining us in the coalition are Divisions 53 and 54, as well as 7 (Developmental Psychology), 15 (Educational Psychology), 37 (Child, Youth and Family), and 43 (Family Psychology).

In addition to working on shared interests with the coalition, Division 16 will continue to work hard to ensure that our unique interests are represented in APA through ongoing contact with the OPAS staff; a group whose primary focus is psychological practice in schools, and our presence on APA boards and attendance at various committee meetings. Currently, we have division representatives on the Board of Educational Affairs, Board of Professional Affairs, Council of Representatives, and Committee on Accreditation. In addition, EC members are present at the consolidated meetings and represent us at many others throughout the year (e.g., Committee for the Advancement of Professional Psychology, State Leadership Conference, Coalition for Psychology in Schools and Education, and Education Leadership Conference). We want to insure that APA is involved in public education and advocates for the presence, and the preparation, of school psychologists. The division recognizes the importance of our being at the table when issues arise so that we can weigh in on these and help craft what is going to be done. We cannot discount the influence that APA has. It is the single most powerful body representing psychology, and we need them to represent our interests when they meet with other national mental health organizations and go up on Capitol Hill to lobby for legislation that directly impacts what we do. This includes IDEA and No Child Left Behind. APA is also able to influence federal funding to support critical programs, including our training of graduate students in school psychology. To benefit from all these and other activities, we must remain visible



APA DIVISION 16: SCHOOL PSYCHOLOGY 2003 CONVENTION PROGRAM TORONTO, CANADA

Thursday, August 7, 2003

11:00 – 11:50 am: POSTER

**SESSION School Psychology:
Developmental, Multicultural, and
Professional Issues**

12:00 – 1:50 pm: SYMPOSIUM

(co-sponsored by BEA and Division 16)

**Psychologists Leave No Child Behind:
An Interdivisional Call To Action**

Participants: Robert Sternberg, Ph.D., Jane Conoley, Ph.D. (representing Division 16), Mary Brabeck, Ph.D. (representing Division 17), Patricia Alexander, Ph.D. (Division 15)

Chair: George DuPaul, Ph.D.
(Symposium for CPE units)

2:00 – 3:50 pm: SYMPOSIUM

**ADHD and Academic Achievement: Promoting
Success Through the School Years**
(Symposium for CPE units)

2:00 – 3:50 pm: DIVISION 16 EXECUTIVE COMMITTEE MEETING

Chair: Elaine Clark, Ph.D.

Friday, August 8, 2003

8:00 – 9:50 am: SYMPOSIUM

**The Division 16 Task Force on
Psychopharmacology, Learning, and Behavior**
Chair: Tom Kubiszyn, Ph.D.
(Symposium for CPE units)

10:00 – 10:50 am: POSTER SESSION

**Intervention and Consultation in School
Psychology**

12:00 – 12:50 pm:

PRESIDENTIAL ADDRESS

**Psychology's Response and Responsibility to
Children in Troubling Times**

Speaker: Elaine Clark, Ph.D., President, Division 16

2:00 – 2:50 pm: INVITED ADDRESS

**Learning From Research: The Effective Tools
of Behavioral Skill Instruction**

*Speaker: Brian K. Martens, Ph.D.,
Syracuse University*

3:00 – 4:50 pm: SYMPOSIUM

**Secondary School Reform and Assessment:
Equity and Outcomes for Students with
Disabilities**

Chair: Jeff Braden, Ph.D.

4:00 – 4:50 pm: SYMPOSIUM

**Use of Instruction-Based Assessment in
Preventing and Treating Learning Disabilities**

Chair: Stephen Peverly, Ph.D.
(Symposium for CPE units)

Saturday, August 9, 2003

8:00 – 9:50 am: SYMPOSIUM

**Revised Ethical Principles: Implications for
School Psychology**

Chair: Rosemary Flanagan, Ph.D.
(Symposium for CPE units)

10:00 – 10:50 am: INVITED ADDRESS

Every Program has a Story

*Speaker: Sylvia K. Rosenfield, Ph.D.,
University of Maryland, College Park*

11:00 – 11:50 am: POSTER SESSION

**School Psychology: Intervention and
Research Issues**

1:00 – 1:50 pm: SYMPOSIUM

**School Psychology Futures Conference:
Plans and Beginning Actions**

Chairs: Rick Short, Ph.D. & Patti Harrison, Ph.D.

2:00 – 3:50 pm: DIVISION 16 BUSINESS MEETING: Ceremony for Award Recipients of 2003

Chair: Elaine Clark, Ph.D.

4:00 until...

DIVISION 16 SOCIAL HOUR

Sponsored by Riverside Publishing

Sunday, August 10, 2003

9:00 – 10:50 am: SYMPOSIUM

**Cognitive and Social Mechanisms in
Adolescent Bullying**

Chair: Susan Swearer, Ph.D.
(Symposium for CPE units)

10:00 – 11:50 am: SYMPOSIUM

**Multiple Manifestations of Comorbidity of
Anxiety in Children**

Chair: Thomas J. Huberty, Ph.D.

11:00 – 11:50 am: SYMPOSIUM

**Lessons Learned from Implementing the Safe
Schools/Healthy Students Initiative**

Chair: Michael Furlong, Ph.D.

12:00 – 12:50 pm: AWARD SYMPOSIUM

**DIVISION 16'S YEAR 2002
AWARD RECIPIENTS DISCUSS RESEARCH
AND PRACTICE**

Tanya Eckert, Ph.D.: Social Validity and Brief
Experimental Analysis: The Contributions of
Assessing Students' Preferences and Variations in
Execution

Jonathan H. Sandoval, Ph.D.: School Psychology
and Educational Reform: Are We at the Table?

Kevin Fenstermacher, Ph.D.: TBA

DIVISION 16 PROGRAM 2003 AP A CONVENTION

Time	Thursday	Friday	Saturday	Sunday
8:00 - 8:50				
9:00 - 9:50		Symposium: Psychopharmacology, Learning, & Behavior	Symposium: Revised Ethical Principals	
10:00 - 10:50		Poster Session: Intervention & Consultation	Invited Address: Sylvia Rosenfield	Symposium: Anxiety in Children
11:00 - 11:50	Poster Session: Developmental, Multi-cultural, & Professional Issues		Poster Session: Intervention & Research	Symposium: Adolescent Bullying
12:00 - 12:50		Presidential Address: Elaine Clark		Award Symposium
1:00 - 1:50	Symposium: Interdivisional Task Force: Leave No Child Behind		Symposium: Futures Conference	
2:00 - 2:50	Executive Committee Meeting	Invited Address: Brian Martens	Business Meeting – Suite Closed	
3:00 - 3:50		Symposium: School Reform and Assessment 3 - 4:50		
4:00 - 4:50			Social Hour	
5:00 - 5:50				

Division 16 Hospitality Suite Schedule 2003 AP A Convention

Fairmont Royal York
Toronto, Canada

Suite Sponsors: AGS, Psychological Corporation, PAR, Riverside, Society of School Psychology, American Academy of School Psychology, American Board of School Psychology, and Division 16

Wednesday August 6

3:30 pm – 5:30 pm:
**APA-NASP Task Force on Evidence-Based
Practices**

Contact: Dr. Karen Stoiber

5:30 pm – 7:00 pm:

Women's Committee

Contact: Drs. Ann Teeter & Karen Stoiber

7 pm – 10 pm: Open

Thursday August 7

8 am – 12 pm:
**Student Affiliates in School Psychology
Convention**

Contact: Convention Chair, Meredith Cohen

12 pm – 2 pm:
The School Psychologist

Contact: Editor, Dr. Vinny Alfonso and
Associate Editor, Dr. Linda Reddy

2 pm – 3 pm: OPEN

3 pm – 4 pm:
**Preparing for a Career as an
Academician in School Psychology**

Contact: Dr. Amanda Nickerson

4 pm – 5 pm: **SASP Officer Meeting**

5 pm – 6 pm:
**Division 16's Committee on Ethnic
Minority Affairs**

Contact: Dr. Frank Worrell

6 pm – 9 pm:
**Society for the Study of School
Psychology Board Meeting**

Contact: Dr. Dan Reschly

Friday August 8

8 am – 12 pm:
**American Board of School
Psychology/American Academy of
School Psychology**

Contact: Dr. Ron Davis

12 pm – 1 pm:
**Division 16 Presidential Address
- Suite Closed**

1 pm – 3 pm:
School Psychology Synarchy

Contact: Dr. Walt Pryzwansky

3 pm – 5 pm:
CDSPP Meeting

Contact: Dr. Bill Strein

5 pm – 7 pm:
**Society for the Study of School
Psychology reception for SPRCC**

Contact: Dr. Dick Abidin

Saturday August 9

8 am – 12 pm: Open

12 pm – 2 pm:
School Psychology Quarterly Meeting

Contact: Dr. Rik D'Amato

2 pm – 4 pm:
Division Business Meeting Suite Closed

4 pm – 5:50 pm:
Division 16 Social Hour

Location: Royal York Hotel

Sunday August 10

8 am – 12 pm: Open

DIVISION 47: SPORT AND EXERCISE PSYCHOLOGY PRESENTS

The 25th Annual Running Psychologists' APA 5K "Ray" Race and Walk

Saturday, August 9, 2003

The annual race and walk at the 2003 Toronto Convention of APA will be held on Saturday morning, August 9th, at 7AM. Final information on the venue for the race will appear in the APA Monitor on Psychology, the Division 47 web site (www.psyc.unt.edu/apadiv47), and in your convention packet. If you pre-register, you will be notified via email or post.

Trophies will be awarded to the overall men and women's winners and to the top three in each 5-year age group, from under 25 to over 75. The top three male and female finishers who hold membership in Division 47 will receive awards. The top three finishers who are current Psi Chi members also will receive awards, as will the top three current or past Psi Chi National Council members. To honor the exhibitors at our meeting who provide excellent raffle prizes for us, a special award also

will be given to the highest finishing male and female exhibitor.

Pre-registration will run until August 1st - which means that the entry form and fee must be received by that date. Please give us all the requested information including age and gender so that the race numbers can be labeled appropriately and save us time in determining your category for the results. THE ENTRY FEE FOR PRE-REGISTERED RUNNERS IS \$20.00, which includes a commemorative shirt, raffle chance, and post-race refreshments. PAST AUGUST 1ST, CONVENTION AND DAY-OF-RACE REGISTRATION FEE IS \$25.00. Pre-registration for students is \$10.00 and convention/day-of-race student registration is \$14.00. PLEASE pre-register to help us avoid too many convention and day-of-race registrations. Make your check payable to: **Running Psychologists.**



Division 47 members receive a discounted race entry of \$10 as a value-added benefit of division membership. If you are an APA member and wish to apply for division membership with this entry form, check the block on the form below and remit the discounted entry fee (\$10) plus the Division dues (\$22 for members, \$8 for student affiliates). We will forward your application to APA for processing.

The 6th Annual Pre-Race Pasta Dinner will be held on Friday evening, August 8th, at 6:00 - 8:00 PM. Please mark your entry form to reserve a place at the party. You may prepay when you pick up your race materials at the convention.

You may pick up your race number, shirt, and

raffle ticket at the business meeting of Running Psychologists on Friday morning at 8AM (see the program for room number) or at the APA Division Services booth in the main Convention Area, beginning Thursday afternoon.

Sponsored by: APA Insurance Trust - Psi Chi - American Psychological Association - Division 47

I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of you accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Running Psychologists, Division 47 and the American Psychological Association, the City of Toronto, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures, and recording, or any other record of this event for any legitimate purpose. I HAVE READ THE ABOVE RELEASE AND UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK.

2003: The Maple Leaf Ramble - The 25th Annual APA "Ray" Race & Walk

NAME: _____
First MI Last

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ TELEPHONE: _____

PASTA PARTY? Y / N HOW MANY? _____ SHIRT SIZE: S M L XL

AGE ON AUG. 9th: _____ BIRTHDATE: _____ GENDER: _____

CURRENT DIVISION 47 MEMBER? Y / N

SPONSOR OR EXHIBITOR Y / N ORG. NAME: _____

PSI CHI MEMBER? Y / N PAST OR CURRENT PSI CHI NATIONAL COUNCIL MEMBER? Y / N

I WANT TO JOIN DIVISION 47 Y / N APA Status: Member _____ Fellow _____ Assoc _____ Stud. Aff _____ Affiliate _____ APA Member # _____

Member _____ Sponsor _____
Exhibitor _____ Student _____
Friend/Dependent _____

Make check payable to:
Running Psychologists
Receipt before Aug. 1st: \$20
(Student fee: \$10)
On-site: \$25/\$14
Div 47 Members only: \$10

Signature _____ Date _____

Please return to: **Suanne Shocket, 9625 Surrey Ct., Suite 210, Manassas, VA 20110-4408; Email: sshocket@compuserve.com**

Collaborative Practices of New York State Early Childhood School Psychologists

Florence Robinson

Brooklyn College, City University of New York

Karyn A. Sweeny, Barbara A. Mowder, and K. Mark Sossin

Pace University-New York City

“School psychologists are becoming one of the increasingly important service providers for young children at risk or with disabilities, and their families.”

ABSTRACT

Collaboration and consultation between school psychologists and other professionals has the potential to ensure comprehensive and integrated services for young children with disabilities and their families. Partnerships at the early childhood level often result in enhanced outcomes for children, as well as providing support and resources for professionals. This research sponsored, in part, by the New York Association of Early Childhood and Infant Psychologists (NYAECIP) examines practices of school psychologists working with children zero to five years of age. Demographic variables of school psychologists working with young children, the types of services available to young children, and the populations served including issues related to children's age, socio-economic status, and ethnicity are investigated. Findings examine the frequency of collaborative and consultative contacts with other professionals. Barriers to collaborative/consultative practice and training are examined and implications of this research for training and further study are explored.

INTRODUCTION

Professionals from various disciplines assist young children with disabilities in their cognitive and social-emotional development (Ramey & Campbell, 1984; Ramey & Ramey, 1998; Slaughter-Defoe & Rubins, 2001; Woodhead, 1998; Zigler & Styfco, 2000). School psychologists are becoming one of the increasingly important service providers for young children at risk or with disabilities, and their families (Mowder, 1994; Power, Du Paul, Shapiro, & Parrish, 1995). In educational settings, school psychologists often work closely with psychiatrists, special and general educators, speech and language pathologists, occupational and physical therapists, and in some instances applied behavioral analysis (ABA) interventionists (Mowder, 1996).

Most professionals argue that in order for young children with disabilities to succeed, and for psychologists to have an impact on the largest number of children, a model that emphasizes

indirect service delivery (e.g., collaboration and consultation) must be incorporated into school psychology practice (Kagan & Rivera, 1991; Meisels & Shonkoff, 1990; Winton, 2000). Much of the early childhood special education and school psychology literature encourages professionals to utilize collaborative models in order to ensure that comprehensive and integrated services are available to young children with special needs (Bailey, 1996; Meisels & Shonkoff, 1990; Poulsen, 1996; Shonkoff & Meisels, 2000; Widerstrom & Bricker, 1996; Winston, 2000). Indeed, the Reauthorization of the Individuals with Disabilities Act (1997), as well as New York State's Early Intervention (EI) legislation, requires family involvement along with a multidisciplinary determination of eligibility.

New roles are emerging in which professionals working with young children must go beyond their discipline-based boundaries to ensure comprehensive service delivery (Bricker & Widerstrom, 1996; Linder, 1993; Winton, Catlett, & Houck, 1996). Thus, school psychologists are advised to include interdisciplinary collaboration and consultation in their practice (Bailey, 1996; Lowenthal, 1996; McCollum & Stayton, 1996; Mowder, 1996). Interdisciplinary collaboration and consultation in schools encompasses shared decision-making and co-responsibility for outcomes (Caplan & Caplan, 1993). In the context of early childhood education and care, partnerships among professionals and families require familiarity with the roles, terms, and practices of other professionals (Bricker, 1996; Lowenthal, 1996). However, most school psychologists receive limited coursework in these areas (Flanagan, Sainato, & Genshaft, 1993; Helkamp, Zins, Ferguson, & Hodge, 1998). Traditionally trained school psychologists are not likely to meet the current and future needs of young children (Meisels & Shonkoff, 1990).

Partnerships at multiple levels of early education often result in enhanced problem solving and decision-making. Collaboration combines diverse perspectives and expertise to solve

CONTINUED FROM PAGE 74

Collaborative Practices of New York State Early Childhood School Psychologists

problems, which improves decision-making and assists in providing timely responses to changing circumstances (Korinek & McLaughlin, 1996). School psychologists' collaborative/consultative role has the potential to create positive outcomes for young children and their families, in addition to providing support and resources for other professionals in early childhood settings (Winton, 2000). Recent thinking on collaboration acknowledges that it is a social process in which professional interdependence, cooperation, and the mutual exchange of ideas potentially enhances professional learning and performance (John-Steiner, 2000; Sandoval, 1996).

Bailey (1996) summarizes the literature on early childhood collaboration by outlining four major themes that underlie the rationale for a collaborative approach.

It is argued that 1) the complex nature of many disabilities requires high level of specialization, but the rapidly expanding knowledge base means that no one person or discipline has access to all of the information needed; 2) services need to be integrated; 3) a process is needed to build shared ownership and commitment to goals and services; and 4) decisions made by a group generally are superior to decisions made by an individual. (p. 4).

The consultation literature in school psychology has grown considerably over the past 30 years to include collaboration more recently, a technique that continues to gain acceptance in school psychology. However, the distinctions between collaboration and consultation are often unclear. Variations between the two techniques are often ambiguous and create confusion in research (Brown, Pryzwansky, & Schulte, 2001). Although the terms collaboration and consultation embrace somewhat different assumptions, there is considerable overlap between the two. Indeed, the common characteristics of collaboration and consultation result in hybrid service delivery models, specifically collaborative consultation (Idol, Nevin, & Paolucce-Whitcomb, 2000; Kampwirth, 1999) and collaborative school consultation (Dettmer, Thurston, & Dyck, 2002).

Within school psychology, a collaborative approach to consultation that is collegial and non-directive, rather than expert driven is recommended (Friend & Cook, 2003). In terms of similarities, both collaboration and consultation are voluntary relationships between and among professionals

requiring equally valued participation and mutually defined goals. Both techniques result in client improvement, and enhanced professional functioning for participants. The major distinction involves the acceptance of responsibility for client outcomes (Caplan & Caplan, 1993). Collaboration replaces consultation when school psychologists are also members of the school staff, since they are often involved in direct service to the client as well as collaborative work with school staff. Thus, as staff members, school psychologists accept responsibility for client outcomes, while attempting to get others to understand and behave differently toward the client (Brown, Pryzwansky, & Schulte, 2001). The relationship between collaboration and consultation is complex, and a full understanding of these nuances is incomplete (Friend & Cooke, 2003). Thus, in the current research, the terms were combined and a definition was presented to respondents to reduce confusion and broaden the research scope to capture this indirect service delivery role.

Although collaboration/consultation in early childhood services for children birth to five years is desirable and best practice encourages school psychologists to work closely with professionals from other disciplines using team models (Mowder, 1996), little research has thus far examined current collaboration/consultation practices of school psychologists with other professional groups in early childhood settings. Indeed, previous research establishes that psychological consultation at the early childhood level is rare (Bagnato & Neisworth, 1987; Paget, & Kovaleski, 1987; Mowder, 1994; Mowder, Underspan, Goode, & Pedro, 1993; Widerstrom, Mowder, & Willis, 1989).

As a consequence of the limited research in early childhood collaboration/consultation practices, and consistent with the overall goals of NYAECIP (see, for instance, www.nyaecip.org), this survey was developed. NYAECIP members, as part of the Research Task Force, decided to explore school psychologists' consultative/collaborative contacts, in conjunction with training and a number of demographic variables, as well as other concerns regarding early childhood school psychology practice in New York State (NYS). The purpose of this research, therefore, is to help establish early childhood school psychology indirect service practice dimensions and, in addition, provide data on potential professional needs in terms of training and professional development. While limited to

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school psychologists in one state, this research is significant since New York has the single largest number of school psychologists according to the NASP Directory.

The following were the specific questions addressed through this study:

1. What are the demographic characteristics (e.g., age, gender, training) associated with NYS early childhood school psychologists?
2. What services do school psychologists offer young children and their families? How often do early childhood school psychologists provide collaboration/consultation regarding young children with diverse ethnicities and socioeconomic backgrounds?
3. How frequently do NYS early childhood school psychologists collaborate/consult with professionals from other early childhood professional disciplines?
4. Are there barriers that NYS early childhood school psychologists identify which inhibit collaboration/consultation in early childhood settings?
5. Do NYS early childhood school psychologists have training in collaboration/consultation? If so, what did that training involve and how was the training secured?

METHOD

This research project represents a major research effort by NYAECIP, which also was supported by the Psychology Department at Pace University-New York City. The Research Task Force developed an overall research agenda, with one aspect being the determination of early childhood psychological practice in New York State.

Participants

The NYAECIP survey for school psychologists was mailed to all NYS members of two major organizations in the field of school psychology; one state and one national organization. Members of the New York Association of School Psychologists (NYASP) and NYS affiliates of the National Association of School Psychologists (NASP) were contacted by mail. After eliminating duplicate memberships, NASP and/or NYASP members, not including student or associate members, were surveyed. Thus, the sample consisted exclusively of NYS school psychologists. In a cover letter from the NYAECIP president, school psychologists were asked to complete the survey if any of their practice included working with children birth through five years of age. Those not serving this population were

asked to return a blank survey.

Instrument

The Infant and Early Childhood Psychology Survey was developed by the Research Task Force of NYAECIP during the fall of 2000. The Task Force constructed the survey in order to explore various aspects of early childhood school psychology in NYS. With regard to this research, the survey asked respondents to provide information related to personal demographics, practice, training, collaboration/consultation, and continuing education needs. The survey yielded data concerning early childhood school psychology collaboration/consultation practices as related to demographic variables, training, and practice issues.

More specifically, participants were asked to report collaborative/consultative contacts with other professionals including special educators, speech and language pathologists, occupational therapists, physical therapists, psychologists, psychiatrists, neurologists, pediatricians, and applied behavior analysis interventionists. Collaboration/consultation was defined as engagement in regularly scheduled conferencing to establish mutually defined goals, problem-solve, evaluate child and family progress, and readjust service plans. The survey also explored training in collaboration/consultation and potential barriers to such practice. Personal demographics included factors such as age, gender, ethnicity, years of practice, degree, credentials, and practice setting. In addition, questions regarding early childhood school psychology practice and client characteristics were asked.

In order to ensure content validity and reliability of responses, three university trainers in school psychology and two doctoral-level school psychologists in school practice with young children piloted test questions and provided feedback to researchers. One trainer and both practitioners work in the New York City area, one trainer works in a moderate-sized city upstate, the other in the northwestern part of NYS. These professionals provided comments on the scope of the survey, as well as wording and question construction, consistent with recommended procedures in survey construction (Creswell, 2002; Fowler, 2002). Over approximately six months, the Research Task Force members revised the survey consistent with professional feedback.

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Collaborative Practices of New York State Early Childhood School Psychologists**Procedures**

Each NYASP and NYS member of NASP received the NYAECIP Infant and Early Childhood Psychology Survey by January 2001, along with a postage-paid, preaddressed return envelope. Both mailing lists were examined to assure that school psychologists belonging to both organizations received one survey. The survey was sent to 2286 potential participants and 812 members returned surveys from January through March 2001; this represents a 36% return rate. Of those returning the survey, 595 respondents stated that they did not work with children from birth through five years of age and, thus, they did not supply data for analysis. There were 214 early childhood school psychologists who completed and returned surveys; these returned surveys represent the usable data in this research project.

The return rate is comparable to other school psychology survey research (Fowler & Harrison, 2001). And, to some extent, the number of respondents indicating early childhood practice may approximate practitioner involvement in service provision with young children and their families in NYS. That is, 214 of the total of 812 indicated involvement in early childhood school psychology practice, or approximately 26% of the respondents. A 1999 survey of NASP members found 23.3% of school psychologists reported some involvement with early childhood educational settings (Curtis, Hunley, Walker, & Baker, 1999). However, few of the respondents to that survey spent 100% of their time with this population.

RESULTS**Demographics of Early Childhood School Psychologists**

School psychologists involved in the lives of young children are overwhelmingly female (80.4%) and Caucasian (90.5%). Hispanic (5.7%) and African American (1.9%) practitioners are underrepresented in this work. In addition, Asian/Pacific Islanders and those identifying themselves as multi-ethnic make up less than 1% of respondents. Approximately 62% have practiced between 0 and 10 years, and relatively few school psychologists have been practicing over 20 years. The mean age of respondents is 41 years, with a range from 26 to 68 years. The majority are non-doctoral (63.3%) and state certified (67%) school psychologists, and work in either public or private schools. Although 12.7% responding psychologists report a specialization other than school psychology, the researchers

assume that these individuals are NYS certified school psychologists since they cannot work in schools without state certification. Of the 211 individuals responding to the survey, 11.2% hold bilingual certification. (See Table 1 for a detailed description of participants.)

Services Provided by School Psychologists

School psychologists provided information regarding the kinds of services they make available to infants (0-1 years), toddlers (1-3 years), and preschoolers (3-5 years) (See Table 2 for a full description). The overwhelming majority of school psychologists spend their time with preschoolers in contrast to children younger than three years. Across each age group, school psychologists performed evaluations more than any other service.

Table 1
Frequency Distributions Related To Demographic Information

Variable	n	Frequency	Percent
Gender	214		
Males		42	19.6
Females		172	80.4
Ethnicity			
African-American/Black	211 ^a	4	1.9
Caucasian	191	90.5	
Hispanic/Latino		12	5.7
Asian/Pacific Islander		2	0.9
Multi-Ethnic		2	0.9
Years Practicing	210^a		
0-5 years		69	32.9
5-10 years		61	29.0
10-20 years		47	22.4
> 20 years		33	15.7
Degree	214		
Non-Doctoral		136	63.6
Doctoral		78	36.4
Area	213^a		
School Psychology		186	87.3
Non-School Psychology		27	12.7
Credentials	212^a		
State License		11	5.2
State Certification		142	67.0
Both License and Certification		59	27.8
Location of Practice			
Private Practice	214	40	18.7
Public School	212 ^a	125	58.4
Private School	212 ^a	47	22.0
Agency	214	32	15.0
Hospital	214	12	5.6
Diagnostic Center	214	9	4.2
University/College	214	14	6.5

^an < 214 because respondents did not answer the question or answered no to various questions.

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School psychologists have long been considered the “gatekeepers” of special education and across all age groups, generally spend much of their time in evaluation and assessment, with significantly less time being spent collaborating/consulting with other professionals (Bradley-Johnson, Johnson, & Jacob-Trimmi, 1995; Ysseldyke, et al., 1997). Parent guidance and consultation was the second most provided service across all three age groups. Very few school psychologists engage in neuropsychological evaluation or family therapy.

Professional collaboration/consultation was a

Home-based early intervention. Of 214 respondents, 18.4% (n = 33) engage in collaboration/consultation with other professionals while providing home-based Early Intervention (see Table 3). Few psychologists provide home-based services to 0 to 3-year-olds, perhaps because NYS Early Intervention regulations do not require a psychologist to administer developmental evaluations and further limits the participation of psychologists outside of school settings. School psychologists working in home-based Early Intervention report collaborating/consulting most with special educators and speech and language pathologists. For example, many respondents (42.5%, n = 13) delivering home-based Early Intervention services consult/collaborate either weekly or daily with special educators; an additional 18.2% (n = 5) collaborate/consult with special educators on a monthly basis. In addition, school psychologists (36.4%, n = 10) collaborate/consult with speech and language pathologists on a weekly or daily basis, and an additional 24.2% (n = 7) do so on a monthly basis.

When “never” and “annually” categories were combined, over 80% of school psychologists acknowledge rarely, if ever, collaborating or consulting with medical professionals, including

neurologists, pediatricians, and psychiatrists. Combining never and annual categories, school psychologists seldom collaborate/consult with two other professional groups: 72.9% (n = 24) never or annually consult with Applied Behavior Analysis (ABA) interventionists and 72.9% (n = 22) never or annually with other psychologists. Infrequent collaboration/consultation with ABA interventionists may be due to the relatively low incidence of autistic spectrum disorders in the population. Even though the incidence of autism disorders has increased over the years, current NYS estimates suggest rates of approximately 20 children in 10,000 diagnosed with autistic disorders (New York State Department of Health, 2000). Caution is required here due to the low number of responding school psychologists working in home-based settings.

Facility-based early intervention. Seventy-six respondents (40.6%) acknowledge collaborating / consulting with other professionals in Early Intervention facility-based settings (see Table 4).

Table 2
Populations Served and Services Offered by School Psychologists

Service	Populations		
	Infants (0-1) N = 34 %	Toddlers (1-3) N = 91 %	Preschoolers (3-5) N = 198 %
Psychological Evaluation	13.7	38	84.9
Neuropsychological Evaluation	1	1.5	7.3
Child Psychotherapy	1	9.3	39.5
Behavioral Interventions	2.9	23.9	68.8
Parent Guidance/Consultation	8.3	27.3	71.2
Parent-Infant/Toddler Psychotherapy	1.5	3.9	N/A
Family Therapy	2.4	6.4 ^a	16.6
Professional Consultation	6.8	20.5	57.1

Note. n = number of psychologists working with each population. n = 205 unless otherwise indicated. Percentages do not sum to 100 because respondents could endorse more than one service.

^an = 204.

service provided by more than half the school psychologists working with preschoolers (57.1%, n = 113). Professional collaboration/consultation is only provided by approximately 1/5th (20.5 %, n = 19) of those working with toddlers, and less than 1/10th (6.8%, n = 2) of those working with infants. For the purposes of this question, neither professional collaboration/consultation nor the other service areas were specifically defined.

Frequency of Psychological Collaboration/Consultation

The frequency of psychological collaboration/consultation with early childhood professionals was discerned across four settings (home-based Early Intervention, facility-based Early Intervention, preschool special education, and private practice). Responding school psychologists provided information concerning frequency of collaboration/consultation with other professionals such as educators, psychologists, therapists, and physicians.

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Collaborative Practices of New York State Early Childhood School Psychologists**Table 3**
Frequency Distributions Relating to Collaboration/Consultation and Home-Based Services

Professional	n	M	SD	Never %	Annually %	Monthly %	Bi-Monthly %	Weekly %	Daily %
Special Educator	30	2.83	1.49	9.1	9.1	18.2	12.1	36.4	6.1
Speech/Language Pathologist	28	3.00	1.19	-	9.1	24.2	15.2	30.3	6.1
Occupational Therapist	27	2.22	1.63	21.2	3.0	21.2	12.1	21.2	3.0
Physical Therapist	30	1.83	1.70	33.3	9.1	12.1	15.2	18.2	3.0
Psychiatrist	30	0.07	0.25	84.8	6.1	-	-	-	-
Psychologist	30	0.83	1.53	63.6	9.1	3.0	3.0	9.1	3.0
Pediatrician	28	0.25	0.65	69.7	12.1	-	3.0	-	-
Teacher	29	1.69	1.83	42.4	3.0	9.1	9.1	21.2	3.0
Neurologist	30	0.13	0.57	84.8	3.0	-	-	-	-
ABA Interventionist	33	1.03	1.65	63.6	9.1	9.1	3.0	9.1	6.1

Note. *n* = those participants who responded yes to consulting with various professionals.

School psychologists working in facility-based settings collaborate/consult more with special educators and speech and language pathologists than other early childhood professionals. When “weekly” and “daily” categories are combined 50%, (*n* = 35) of respondents collaborate/consult often with special educators and 46.1% (*n* = 30) regularly collaborate/consult with speech and language pathologists. Three times as many school psychologists in facility-based Early Intervention collaborate/consult daily with special educators and speech and language pathologists than those working in home-based settings. Proximity to other professionals in facility-based programs may create more opportunities for collaboration/consultation than in home-based programs. Approximately 80% of respondents never or annually collaborate/consult with medical professionals (e.g., physicians). Little collaboration/consultation takes place between

school psychologists and ABA interventionists or other psychologists within facility-based programs. When the never and annual categories are combined, 81.6% (*n* = 59) and 68.8% (*n* = 49) rarely consult or collaborate with ABA interventionist and with other psychologists, respectively.

Center-based special education preschool. One hundred and eighteen respondents (64.8%) report engaging in collaboration/consultation while providing center-based services through the Committee on Preschool Education (CPSE) (see Table 5). Respondents report weekly and monthly collaboration/consultation on a consistent, and nearly equivalent, basis with special educators (37.3%, *n* = 48), speech and language pathologists (42.4%, *n* = 45), occupational therapists (44.1%, *n* = 47), and physical therapists (36.4%, *n* = 40). However, collaboration/consultation occurs more often on a daily basis with special educators and

Table 4
Frequency Distributions Relating to Collaboration/Consultation and Facility-Based Services

Professional	n	M	SD	Never %	Annually %	Monthly %	Bi-Monthly %	Weekly %	Daily %
Special Educator	69	3.12	1.63	10.5	6.6	13.2	10.5	31.6	18.4
Speech/Language Pathologist	65	3.29	1.33	1.3	9.2	14.5	14.5	30.3	15.8
Occupational Therapist	68	2.57	1.58	14.5	10.5	14.5	13.2	32.9	3.9
Physical Therapist	70	2.07	1.71	28.9	7.9	13.2	15.8	22.4	3.9
Psychiatrist	71	0.42	0.91	71.1	11.8	6.6	1.3	2.6	-
Psychologist	71	0.89	1.52	62.3	6.5	10.4	1.3	7.8	3.9
Pediatrician	67	0.40	0.85	67.1	11.8	5.3	2.6	1.3	-
Teacher	67	2.21	1.99	32.9	5.3	7.9	7.9	21.1	13.2
Neurologist	69	0.32	0.72	69.7	17.1	1.3	1.3	1.3	-
ABA Interventionist	73	0.55	1.20	75.0	6.6	5.3	1.3	7.9	-

Note. *n* = those participants who responded yes to consulting with various professionals.

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Collaborative Practices of New York State Early Childhood School Psychologists**Table 5**
Frequency Distributions Relating to Collaboration/Consultation and Center-Based Services

Professional	n	M	SD	Never %	Annually %	Monthly %	Bi-Monthly %	Weekly %	Daily %
Special Educator	112	3.30	1.72	10.2	9.3	10.2	7.6	27.1	30.5
Speech/Language Pathologist	107	3.12	1.67	9.3	11.0	11.0	7.6	31.4	20.3
Occupational Therapist	107	2.43	1.72	19.5	11.9	13.6	8.5	30.5	6.8
Physical Therapist	107	2.26	1.77	23.7	13.6	9.3	10.2	27.1	6.8
Psychiatrist	109	0.37	0.86	70.3	16.9	1.7	0.8	1.7	0.8
Psychologist	110	1.25	1.84	57.6	7.6	5.1	0.8	14.4	7.6
Pediatrician	104	0.34	0.95	72.0	11.9	-	0.8	1.7	1.7
Teacher	109	2.23	1.98	31.4	10.2	8.5	5.9	21.2	15.3
Neurologist	107	0.21	0.63	77.1	11.0	1.7	-	-	0.8
ABA Interventionist	113	0.44	1.11	78.8	5.1	5.1	0.8	5.1	0.8

Note. *n* = those participants who responded yes to collaborating with various professionals.

speech and language pathologists than for occupational and physical therapists.

When “never” and “annually” categories were combined, again there is little collaboration/consultation with medical professionals. More than 84% of school psychologists working in this setting never or annually collaborate/consult with a medical professional. The pattern of infrequent collaboration/consultation remained constant with ABA interventionists and other psychologists: 83.9% (*n* = 95) of respondent school psychologists never or annually consult/collaborate with ABA interventionists and 65.2% (*n* = 72) never or annually collaborate/consult with other psychologists.

Private practice. Respondents were overwhelmingly certified school psychologists (67%) and not licensed for independent practice. Therefore, only 18.3% (*n* = 31) of respondents

acknowledge involvement in private practice with children aged 0 to 5 and engage in collaborative/consultative practices (see Table 6). Private practitioners rarely consult/collaborate with any other professionals on a daily or weekly basis. However, they do report more involvement with psychiatrists and pediatricians on a monthly basis than did school psychologists working in other settings.

Barriers to collaborative/consultative practice. Over 85% of respondents acknowledge valuing consultative/collaborative practice. While they may believe that collaboration/consultation is important in school psychology practice they report barriers that often prevent its use (see Figure 1). Frequently mentioned barriers include time and proximity to other professionals; however, the responses to questions relating to collaboration/consultation

Table 6
Frequency Distributions Relating to Collaboration/Consultation and Private Practice

Professional	n	M	SD	Never %	Annually %	Monthly %	Bi-Monthly %	Weekly %	Daily %
Special Educator	24	1.75	1.51	22.6	12.9	19.4	6.5	16.1	-
Speech/Language Pathologist	26	1.54	1.68	38.7	3.2	19.4	6.5	12.9	3.2
Occupational Therapist	25	0.80	1.41	54.8	6.5	9.7	3.2	3.2	3.2
Physical Therapist	26	0.69	1.41	64.5	-	9.7	3.2	3.2	3.2
Psychiatrist	25	0.76	0.97	45.2	12.9	19.4	3.2	-	-
Psychologist	29	0.59	1.09	67.7	6.5	12.9	3.2	3.2	-
Pediatrician	25	0.88	1.13	41.9	16.1	16.1	3.2	3.2	-
Teacher	22	1.18	1.50	35.5	12.9	6.5	6.5	9.7	-
Neurologist	26	0.27	0.53	64.5	16.1	3.2	-	-	-
ABA Interventionist	29	0.45	1.15	77.4	3.2	6.5	3.2	-	3.2

Note. *n* = those participants who responded yes to collaborating with various professionals.

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barriers include more in the "other" category than any other category. Unfortunately, the respondents did not specify what the "other" barriers are, even though there was an opportunity on the survey to do so.

Collaboration/consultation training. School psychologists report a variety of training venues where they acquired their consultative/collaborative skills (see Table 7). Few school psychologists took graduate courses or practica in collaboration and/or consultation. Subsequently, most learned

Table 7
Consultation Training (N = 207)

Training	n	%
One full course	81	39.1
Two or more full courses	50	24.2
Practicum	66	31.9
Internship	102	49.3
Embedded in a course	26	12.6
My own reading	99	48.1
On the job experience	145	70.0
Workshop	71	34.5
No training	7	3.4

collaborative/consultative skills on the job (70%, n = 145), followed by internship experiences (49.3%, n = 102), and own reading (48.1%, n = 99). Chi-square analyses were performed to determine if there were any differences between those who had one or more full courses in consultation as compared to those who did not take formal courses. However, due to the skewness of the sample and the low cell counts there were no interpretable correlations.

Collaboration/consultation practice related to child/family socio-economic status and ethnicity. Correlations between school psychologists engaged in consultative/collaborative activity and the socio-economic status and ethnicities of the children served were examined (see Tables 8 and 9). Variations occur in relation to where the services are provided. Psychologists engaging in collaborative/consultative practice in home-based settings tend not to work with lower middle-class children ($p < .01$). Collaborative services in center-based settings tend to be associated with children from low socio-economic backgrounds ($p < .01$). Those psychologists in private practice tend to collaborate/consult less in relation to children from low and lower middle SES backgrounds than in relation to children in the middle socio-economic range.

No significant correlations were found between psychologists delivering home-based and facility-based services Early Intervention services and the ethnicities of children served by collaboration/consultation practice. Psychologists collaborating/consulting with other professionals in center-based preschools appear to do so less in relation to multi-ethnic children than children from other ethnic groups, since there is a significant negative correlation between these services and multi-ethnic children. Psychologists in private practice tend to use consultative/collaborative skills more often to help Caucasian children ($p < .05$) than children from other ethnicities since there is a significant correlation between private practice and working with Caucasian children.

CONCLUSIONS

School psychologists working with children in Early Intervention, preschools, and private practice collaborate/consult most with special educators and speech and language pathologists. This finding may be related to the large numbers of special educators employed in the majority of these settings, as well as special educators' significance in the lives of young children with disabilities. Special educators spend a considerable amount of time providing direct services to children in classrooms, and ultimately tend to be at the center of young children's school experience. Beyond direct service delivery, special educators also often coordinate services, establish goals, form liaisons with families, and monitor children's progress. Special educators are usually the key direct service delivery practitioners in a school or agency with natural access to related-service personnel. The most common recommendation in preschools is for related services, typically speech and language therapy (Lucas-Myers, 2000). As with special educators, the sheer numbers of speech and language pathologists as well as their proximity to school psychologists in the workplace may provide ample opportunities for collaboration/consultation. This seems likely since respondents consider proximity a major barrier to collaboration/consultation activities.

School psychologists collaborate/consult least with medical professionals including psychiatrists, pediatricians, and neurologists. Although collaboration with medical professionals is considered essential, especially in the treatment of young children (Wachtel & Compart, 1996), such activity does not occur frequently in early childhood settings. However, this finding should be read with caution considering the limited number of

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Collaborative Practices of New York State Early Childhood School Psychologists**Table 8**
Correlations Among Consultation and Socioeconomic Status

Collaborative Services	Low	Low Middle	Middle	Upper Middle	Upper
Home-Based	-.118	-.214**	.134	-.063	.024
Facility-Based	-.041	-.049	-.031	.020	.040
Center-Based	.246**	.079	-.085	.088	.126
Private Practice	-.215**	-.162*	.208**	-.007	-.048

* $p < .05$ ** $p < .01$ **Table 9**
Correlations among Consultation and Ethnicities Served

Collaborative Services	African American	Caucasian	Asian	American Indian	Hispanic	Multi Ethnic
Home-Based	.093	.012	.023	-.012	-.103	-.111
Facility-Based	.106	-.077	.044	.032	.007	-.062
Center-Based	.115	-.096	.083	.053	.023	-.200*
Private Practice	-.014	.162*	-.100	-.088	-.070	-.065

Note. There were no significant correlations between psychologists working in home-based services and facility-based services and the ethnicities of the children they work with. However, psychologists who collaborated in center-based services through the Committee on Special Education worked with less multi-ethnic children ($p < .05$) and those psychologists who had their own.

* $p < .05$

respondents working in some settings. School psychologists' proximity to medical professionals may, in part, account for limited collaboration/consultation between the two groups. However, the lack of collaboration/consultation and communication between health care providers and early childhood educators is well documented (Habersang, 1994). This is particularly unfortunate since many children with special needs present medical challenges that result in common concerns for both groups. Much of the collaboration/consultation that occurs in special education preschools focuses on children from low and low-middle socio-economic backgrounds. Poverty is related not only to reduced educational outcomes but also to health problems for children (McCormick, Gortmaker, & Sobel, 1990). Mutual concerns among professionals are certainly evident, but not commonly addressed.

The majority of training in collaboration/consultation for school psychologists working in early childhood is obtained on the job, during internship, or through one's own reading. Although there is general agreement that a team approach to service delivery represents best practice for working with young children, Bricker and Widestrom (1996) argue that most disciplinary training in early

childhood does not prepare professionals to work collaboratively with those from other disciplines. A working conference of clinicians and academic researchers from eight fields interested in early childhood concluded that training programs should offer students greater depth of experience working with professionals from other disciplines (Bailey, Simonsson, Yoder, & Huntington, 1990). Participants agreed that, in the context of early childhood, students should become familiar with terminology, roles, academic preparation, clinical experiences and expertise of other professionals, as well as collaboration/consultation skills.

Although pre-service exposure may be vital to collaboration/consultation, acquiring an appreciation for collaborative practice goes

beyond the graduate school classroom and pre-service observation and participation in practicum and internship experiences. Efforts to compare practitioner demographics such as gender, age, ethnicity, years of practice, to amounts and directions of collaborative activity were not generally fruitful. Thus, it may be that collaborative/consultative practice has less to do with the individual school psychologist than with early childhood settings. Encouraging schools to become collaborative workplaces is vital since the influence of the workplace is powerful, especially for novice professionals. Enculturation into a school's ideology influences practice may be more so than explicit instruction in specific concepts, skills, and procedures (Driver, Asoko, Leach, Mortimer, & Scott, 1994; Schoenfeld, 1992). It then becomes essential that schools and agencies arrange time and structures for their staff to meet. Yet, time constraints, a major barrier to collaborative practice found in the current research is not unique obstacle that inhibits collaborative practice (Dettmer, Thurston, & Dyck, 2002; Keyes, 1991; Rosenfield & Gravios, 1996).

LIMITATIONS OF THE STUDY

Although return rates of less than 50% provide

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Collaborative Practices of New York State Early Childhood School Psychologists

questionable data from which to generalize, many surveys suffer from low return rates (Reschly & Wilson, 1995). The seemingly low return rate in the current study, a possible biasing factor, may have resulted from several issues. First, people who have a particular interest in the subject matter of the survey are more likely to return a mail survey (Fowler, 2002). It is impossible to ascertain the numbers of school psychologists currently working with children 0 through 5 years of age. However, there is reason to surmise that relatively few school psychologists do and thus, have little interest in infant-toddler and preschool issues. Membership data from the American Psychological Association (1999) indicates that from a membership base of 159,000, a total of 128 members cited preschool and daycare issues as an area of primary interest. In the current research, numbers of returned surveys indicate that psychologists having no contact with children 0 to 5-years of age outnumbered those having contact by almost 3:1.

Using professional organization members to solicit information about a population may represent another source of bias (Curtis et al., 1999). Fagan (2000) estimates that 70% of all school psychologists belong to NASP while 75.4% of school psychology practitioners belong to their state associations (Curtis et al.). Although these national percentages are high in several studies found regional differences among many aspects of school psychology practice and practitioner characteristics (Hosp & Reschly, 2002; Lund, Reschly, & Martin, 1998). Prior studies yielded inconsistent findings pertaining to generalizability of results drawn from NASP membership (Smith, 1984).

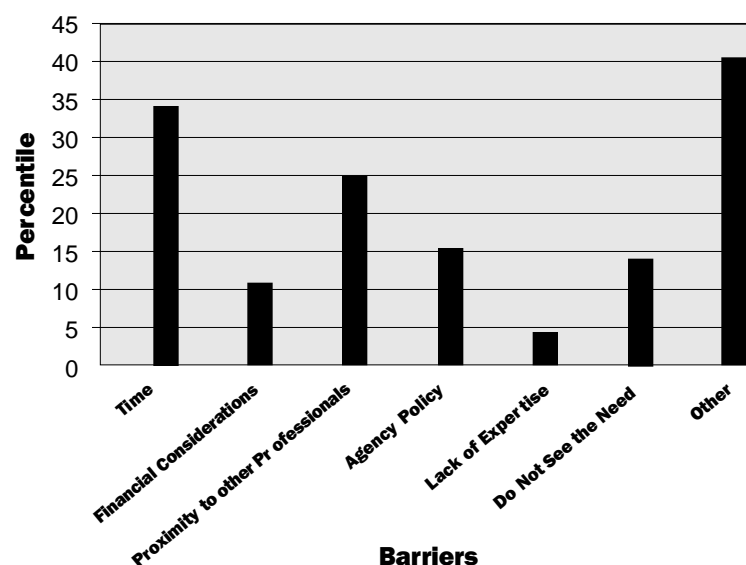
IMPLICATIONS FOR RESEARCH

Consultation and collaborative activities as they relate to improved outcomes for young children have an intuitive appeal, but currently available data are insufficient to support such a viewpoint. More research in varied early childhood settings is necessary to establish the benefits of collaborative/consultative practice among professionals. Such research would be most useful if it came not only from psychology, but also from the other professions involved in the education and care of young children.

Collaboration/consultation involves more than individuals from various fields around a table engaged in discipline-based discourse. These services require participants to share discipline-based perspectives with the goal of reaching a new,

comprehensive understanding of a young child. Collaborative/consultative practice requires a professional commitment to communication, role flexibility, and shared ownership to support young children and their families. Therefore, this service area requires study of individuals and the contexts in which they learn the relevant skills to become professionals as well as their later professional practice. Qualitative studies within natural contexts examining these complex relationships between institutions and professional service providers are necessary in order to fully understand the nature of collaborative/consultative relationships toward the goal of being able to enhance services to young children and their families.

Figure 1
Barriers to Collaboration/Consultation Practice



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Division 16's Conversation Series: Selective Views of Its History and Development

William P. Erchul
North Carolina State University

Inspired by a recent retrospective program about CBS's 60 Minutes (or was it American Idol on Fox?), I decided to document some of the history behind Division 16's *Conversation Series*. As someone who has been fortunate to serve the *Series* in various capacities since it began, I saw the writing activity as both manageable and interesting.

For the uninitiated, *The Conversation Series* is a longstanding project of the Division's Publications Committee, overseen by the Vice President of Publications, Communications, and Convention Affairs. At the core of the *Series* are focused, videotaped interviews with leaders in school psychology on professionally important topics.

Accompanying each interview is a study guide that contains biographical information about the interviewee(s), annotated references, and study/discussion questions. Since 1990, approximately 50 individuals have been interviewed and, at this time, 24 videotapes are available for purchase. (Please see www.indiana.edu/~div16/conversation_series.htm for a comprehensive listing of people and topics.)

Alex Thomas (1993) previously regaled us with a personalized account of his experiences with the *Series*, so the time seems right for a second look. Alex's humorous recollection focused on how he and others worked over several years to plan and conduct interviews with noted professionals on topics that would nicely round out his plans to teach courses in consultation, social-emotional assessment, and roles and functions in school psychology.

The approach taken for this article is to describe certain highlights in the history and development of *The Conversation Series*. Helping me to recall events were three other past VP-PCCAs (Anthony Cancelli, Patti Harrison, and Susan Sheridan) as well as Marvin Fine and Alex Thomas. It was my pleasure to, well, "interview" them via telephone in May. Below I will quote liberally from our conversations.

THE GENESIS

"It was Marvin Fine's original idea," said Anthony Cancelli (VP-PCCA, 1990-92).

Marvin Fine, Professor Emeritus from the University of Kansas (now in private practice in

Albany, NY), noted that in the late 1980s he pitched the premise of the *Series* to colleagues at a national convention. He even had piloted the project himself, videotaping Roy Martin and some others at an APA convention, but with mixed results.

"We got a terrific video but, for some reason, we were picking up a rock radio station! So when we played it back, it was horrible." A second try in a professional studio resulted in terrific audio but terrible video. Technology, or, more accurately, the battles with it, is a topic to which we'll return several times.

Enter Anthony Cancelli. In early 1990, Marvin and Anthony were having lunch shortly after Anthony had become the Division's VP-PCCA. Marvin spoke of an "up close and personal"-type of a program, where known people would be interviewed mainly to enhance the content of beginning courses in school psychology. Anthony agreed that this was a good project, and the two developed a list of potential people to interview. The first theme targeted was consultation and the then expanding role of school psychologists.

Marvin stated, "I thought that we ought to publicize contributions of Division 16 in school psychology, and recommended to the leadership to do an interview, tape it, market it at a reasonable price, and let it be Division 16's contribution. The idea was picked up on and I did the organizing of it, contacting Walt Pryzwansky, Joel Meyers, Tom Kratochwill, Sylvia Rosenfield, and Jane Conoley. Because the most opportune time to get these folks together was at the convention, it coincided with Gerald Caplan being there." As the Division's Convention Program Committee Co-Chair in 1990, I had arranged for Gerald Caplan to give an invited address at the convention in Boston. He later



Left to right, Marvin Fine, Bill Erchul, and Anthony Cancelli

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consented to be videotaped and thus was added to the emerging taping schedule.

THE FIRST TAPING – AUGUST 1990

At the convention, Marvin interviewed Jane, Tom, Joel, Walt, and Sylvia in separate, one-on-one interviews as well as in a group format. I interviewed Gerald in what I later learned was his only filmed interview. Despite the historical importance of these interviews, the video and audio fidelity of the tapes was rather low. Although one camera was of relatively high quality, the other was of much lower quality. In terms of audio, “We didn’t even have separate, directional mics, only those attached to the cameras,” said Anthony.

To his credit, Anthony had contacted APA’s Publications Committee earlier that year to see if they could assist. He was told that they could do a professional quality taping but would charge \$10,000-15,000, an unaffordable fee. That’s when Anthony decided to bring two camcorders from Fordham University, even though the consumer video technology then was much more primitive than today.

I remember the atmosphere before the Caplan taping as a mixture of chaos and excitement (see photo). There was a sense that something important was to occur but, then again, no one present had an advanced understanding of video production. Case in point—shortly before filming began, there was only one cameraperson!

Enter Alex Thomas. Alex was literally called in from the hallway to run one camera while Anthony ran the other. “This was a project that was right up his alley,” Anthony said. Alex went on to be the on-camera interviewer for all *Series* interviews conducted between 1991 and 1997, earning him the title, “the Larry King of School Psychology” (at least in my estimation). Marvin, reflecting on the 1990 taping session, said, “It gave students a very historical perspective and a human view. You show the young students and they see folks who are some of the leaders in the field and it puts a real human face on them.”

THE MORE THINGS CHANGE...

Instead of continuing this description of events in strict chronological order, I would like to step back and describe several aspects of the *Series* that illustrate its evolution. These are the participants; locations at which interviews have been filmed, edited, duplicated, and distributed; and, of course, technology.

It is difficult to construct an accurate list of every person who has been associated with The

Conversation Series, so apologies are extended in advance to those whose names are not mentioned here. The involvement of Marvin Fine and Alex Thomas has been noted already. The Division’s VP-PCCAs since 1990 have been Anthony Cancelli, Patti Harrison, Sue Sheridan, David McIntosh, and myself.

Chairs of the Publication Committee during this time have included Jeff Braden, Sue Sheridan, Pam Carrington Rotto, David McIntosh, and Melissa Bray. Others involved with the *Series* more recently include Bill Strein and Lea Theodore. There have been, of course, numerous graduate students who have nobly served the cause. Since 2000, our video technicians/consultants have been James Laing, David Marini, Clark Thompson, and James Whiteman.

To put these people in context, it is important to realize each vice-presidential era has gone about *The Conversation Series* largely in its own way. For example, in their 1998 productions, Sue Sheridan and Pam Carrington Rotto pioneered a “companion series” format in which interviews with psychologists were paired with related videotaped case study material. Similarly, the current approach to production assigns one team member to serve as a “subject matter expert” interviewer who, in effect, becomes the producer for the interview he or she conducts.

It is also interesting to note who has been the subject of an interview. Although the vast majority of interviewees have appeared just once, perhaps it is significant to note that Tom Fagan and Tom Kratochwill have been interviewed four times each. Another aspect relevant to the evolution of the *Series* is where the interviews have been filmed, edited, duplicated, and distributed. For the most part, interviews themselves have been taped at APA conventions. Thus, sessions have occurred in Boston (1990), San Francisco (1991, 2001), Washington (1992), Toronto (1993), Los Angeles (1994), New York (1995), and Chicago (1997, 2002). Two “off-site” shoots have taken place in Muncie (2001) and Madison (2002).

In terms of the specific “studio” facility at the conventions, Sue noted, “We literally would bring our own equipment and use Alex Thomas’s hotel room. Sometimes he would upgrade to a suite and sometimes we got a little money from the Division to help him out with that.” For many years now, the Division’s hospitality suite at APA has been home to the *Series*.

With a few exceptions, post-production and tape distribution have followed the location of the

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VP-PCCA. These sites have been New York, Miami (OH), Tuscaloosa, Salt Lake City, Lincoln, and Muncie. Although the video post-production process remains mysterious to most school psychologists, I believe all of us can relate to the tedious task of videotape duplication and mailing. As Patti Harrison remarked, "When I was VP, I acquired the management of the sales and distribution. [It occurred] out of my office; it was very makeshift. We did not have a good system at all for that. If someone wanted to order, they sent the order blank to me and I would just take the original tape over to our video office on campus. I think I paid them \$5 to reproduce it. After a while I started taking it to a commercial company...because they were a little less expensive. And then I would ship it out to the person. As I got an order, I would do it."

A final and rather obvious way *The Conversation Series* has evolved is through its use of technology. Although all interviews in the *Series* have been filmed using an "isolated multi-camera shoot" format (i.e., two cameras recording in isolation, later synchronized during editing), what separates the more recent productions from the earlier ones is their noticeably higher technical quality.

With regard to audio, sessions held during the early years relied on camera-mounted microphones that seemed to record camera motor and room noise nearly as well as participants' voices. Fortunately, by the mid-1990s, lavalier mics were routinely fitted to individuals' jacket lapels. In a trend paralleling advances in consumer electronics, video quality also improved markedly during the 1990s.

But maybe the greatest leap forward in technology occurred in 2001 when digital audio and video recording was introduced to the *Series*. Not only were sounds and images on the master tape made clearer, but also more precise, computer-based editing became possible.

THE MORE THEY REMAIN THE SAME...

Though perhaps not consciously, the individuals behind *The Conversation Series* have tried to keep certain elements relatively constant over time in order to unify the separate productions and maintain the appearance of an ongoing series. Some of these elements are apparent in the *Series's* overall purpose, interviewer's opening question, accompanying study guide, and theme music. Those I spoke to noted a certain enduring consistency of purpose for the *Series*. Key aspects of this consistency are providing an educational experience and personalized exposure to well-known school

psychologists as well as archiving these psychologists' work for the future.

"By my understanding of its use, it is a series that would be shown to students in programs, very often to entering students. I still think that not only is the content valuable, but also seeing the people who have published create a greater sense of intimacy with the field. I think that this helps to give people a familiarity and a little more esprit de corps." (Marvin Fine)

"[Its purpose was] to provide a resource for graduate classes...to identify important topics in the field and provide a resource for graduate classes so that students could see the actual people leading and paving the way in school psychology." (Patti Harrison)

"One of the main goals early on was to develop materials that could be used for training purposes and, at the same time, to archive some prominent people in our field, capturing their messages for historical purposes. That [latter purpose] was a side-effect, though, I think." (Sue Sheridan)

A second unifying element has been the opening interview question: "How/Why did you get into school psychology? Alex explained how this interviewing tactic came about. "It was like giving a Draw-A-Person or Bender-Gestalt to a kid. Instead of starting off with, What's the meaning of life?," it was an easier question. I also thought it was a way for people to personalize, because everybody's got a different story and serendipity plays such a role in the development of the careers of so many people. I just thought that would be an interesting off-shoot or sidelight. It was a non-threatening way to open up and to ease into whatever the subject specialty was of the individual."

Following Alex's departure from the *Series* in 1998, the opening question has been modified slightly: "How did you come to the topic we're discussing today?" It is a little more specific while retaining much of the original flavor. A standard closing question also has been added: "What does the future hold for this area?"

A third unifying element is the study guide that accompanies each videotape. Again, Alex's impact is evident. He said, "You've got raw footage, so why not then integrate that footage with a sequential course of study for students and CPD credit for practitioners? What, then, are some resources to read and some guiding questions that you might be able to answer by viewing the videotape?"

Immediately following the 1990 tapings, Alex proposed that three essential components be

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included in each *Conversation Series* study guide: (a) a 50 to 75 word biography of the interviewee; (b) three to six briefly annotated articles, chapters, or books that the interviewee has authored or co-authored; and (c) three to five questions that the reader should be able to answer regardless of which references they have read.

This basic format is still used today. If anything, the study guides have been lengthened somewhat to include more annotated references and, when applicable, to incorporate material from multiple interviewees.

A fourth unifying element is the theme music that plays over the opening and closing credits of each interview. To be clear, it must be stated that although recorded background music has been a part of each tape since 1991, this music has not been the same until relatively recently.

By way of explanation, when developing videos like those in the *Series*, it is typical to pay a fee to use a recorded musical selection for the described purpose. For the videotapes that were released 1991-98, it is not clear how this aspect of production was handled. Like so many other things, it probably was different for each vice president's production group.

Consequently, when I became VP-PCCA in 1999, I felt the *Series* needed a true theme song that would be free of any legal questions and future licensing fees. The result is "Give 'n Take," a jazzy blues tune influenced by the music of John Mayall, Dave Brubeck, and the Ventures. It was composed and recorded in my home studio with Steve Thomas and Marc Walker accompanying me. The song is included on the 10 productions since 2001, and obviously I hope it continues to be a unifying element for the *Series*.

SOME HEADACHES FOR PARTICIPANTS...

Respondents were not shy about sharing their less-than-positive experiences and, not surprisingly, the bulk of these experiences concerned technology. Regarding the technical side of the *Series*, "The devil is in the details," said Marvin. Alex continued, "I do remember the first time that we did it was in San Francisco. Sue Sheridan and I would be running all the time to Radio Shack to pick up little pieces of equipment." Sue specifically remembered that one trip occurred late on a Saturday night with the objective of purchasing a small TV monitor to ensure they would see what was to be filmed the next day.

Several had stories to tell that involved turning off air conditioners, telephones, and/or refrigerators to minimize extraneous noise during filming but

then forgetting to turn them back on, sometimes to disastrous effect. Or trying to restore a blown hotel circuit caused by power-hungry high intensity lights. But not all headaches have been technology-based. Alex once had to halt an interview to answer a knock on the door from room service, only to tell the employee he had the wrong room. Church bells on Sunday mornings and traffic noises also have created unwanted distractions during filming. Transporting lights and recording equipment to and from conventions was mentioned by several people as a difficult and stressful, but necessary, activity.

From these and other experiences, Sue aptly concluded, "It is a costly endeavor, not only in terms of producing videos and supplementary materials, but also 'person-costs' in terms of hours, energy, effort, and forethought."

...BUT BIG PAYOFFS FOR ALL

"It takes a lot of energy and a lot of time to do [*The Conversation Series*]. But I had this spittle around my mouth because I could see the possibilities." (Alex Thomas, active in *Series* 1990-98)

As this quote suggests, those contacted remembered many more positives than negatives. In addition to the readily apparent educational and archival benefits of the videotapes, individuals spoke mainly about the rich human element inherent to the *Series*.

"I was struck by the overwhelming degree of cooperation that I got from everyone we had do this. Everybody thought it was a good idea, everybody worked well with each other. People were very open and willing to discuss." (Anthony Cancelli)

"One of the real benefits for those involved is the connections that you make. When you're putting together a cast of characters—the best people in our field who are doing work in a particular area—making the overture, the connection, the invitation, requires the development of a personal relationship with that person. To coordinate all that affords great opportunities, especially for relatively junior people who are getting established in the field." (Sue Sheridan)

The last words on history are given to Alex: "What I liked about it is what I like about school psychology—people have an idea and the field is receptive to it. You can develop the products and most of the stuff is done without compensation other than the internal compensation, a feeling that you've contributed to the profession. That's been a real kick for me."

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Division 16's Conversation Series: Selective Views of Its History and Development**THE FUTURE**

For those of us who are currently active in *The Conversation Series*, the future is now. Five new videotape productions have just been released (please see accompanying sales flyer with a special limited time offer). Also, the current *Series* work group members (Melissa Bray, David McIntosh, Bill Strein, Lea Theodore, and myself) are gearing up to conduct a new round of interviews at APA this summer.

What will the future bring to *The Conversation Series*? Technology undoubtedly will play an increasingly larger role, and discussion concerning the dissemination of interviews via DVD and Internet downloads has been ongoing. Perhaps last fall's Futures Conference—with its effective demonstration of the power of technology—will influence the trajectory of the *Series*. Maybe the *Series* holds promise as a digital distance-learning format for continuing education. As new people sign

on, these and other innovative ideas are likely to be implemented.


CONCLUSION

In closing, I would like to emphasize what a special initiative *The Conversation Series* represents for Division 16. As Patti Harrison eloquently stated, "I think that it's a wonderful resource. No one else has this resource. Some commercial publishers have videos on various and different content areas...but no one has really picked up on this as a resource in general school psychology with special topics. It's something that's unique to the Division and I think the Division should really play it up and do more with it if they can."

Long live *The Conversation Series*!

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Providing Mental Health Services in Cyberspace: Issues and Guidelines for School Psychologists

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The rapid growth of the telecommunications infrastructure has fundamentally changed the way people seek and receive information. In the mental health field, video and audio conferencing, email, chat rooms, and more may now be used to provide mental health services to clients. Services include web pages that provide information about a particular practitioner's services, online assessment, virtual support groups, instruction, research, and computer-assisted, self-help health education (Wallace, 1999). While only 3% of psychologists now provide services over the Internet (Williams, 2000), this number is likely to increase. Consumers are demanding easier access to information, managed care companies seek ways to reduce healthcare costs, and the availability of technology is spreading.

Licensing boards and professional associations have begun to address concerns about the ethical and legal issues associated with the provision of mental health services through high technology. The Texas (TSBEP, 1999) and Louisiana (LSBEP, 1999) licensing boards have issued opinions on providing services over the Internet or through other broadcast media. The Texas Board urged caution in delivering services in such a manner to ensure that the appropriate ethical standards with respect to confidentiality, privacy, and the like were preserved. The Louisiana Board issued an advisory opinion that assessment and/or intervention by these means was questionable ethically. At a national level, the Association of State and Provincial Psychology Boards (ASPPB) is in the process of releasing model regulations for the practice of telehealth. In the professional arena, the National Board for Certified Counselors (NBCC, 1999) issued *Standards for the Ethical Practice of WebCounseling (Standards)*, a supplement to their *Code of Ethics* (1997). The *Standards* address such issues as security of communications, preservation of records, verification of client and counselor identity, consent to treat, possible technology failures, and range of practice. The National Association of School Psychologists' *Principles for Professional Ethics* (NASP, 2000) also addresses the ethical issues in the use of computer technology, vesting full responsibility with the individual school

psychologist. Finally, the American Psychological Association (APA) formed two groups to address the range of issues involved in telehealth—the Work Group on Professional Practice Issues in Telehealth, a subunit of APA's Board of Professional Affairs and the Technology Applications Advisory Group of APA's Board of Directors. In a rapidly evolving field, some believe the professions must develop standards of telehealth practice or face regulations by outside authorities (Foxhall, 2000).

School psychologists who are considering providing mental health services in cyberspace would be wise to review a few basic issues of practice, including available research and the ethical and professional guidelines of their field. The following issues seem particularly relevant.

COMPETENCE

Because of the recent application of technology to the provision of mental health services, few school psychologists are trained in service delivery by interactive video or e-mail technologies. Little research has been done to establish the critical aspects of interventions through these media, and most school psychologists have been trained to rely on such indicators as nonverbal communication to evaluate client behavior. E-mail communications are fraught with misunderstanding and may provide too little information upon which to make judgments. The anonymity of the Internet also masks the identity of providers. Sites should clearly identify who is the service provider and indicate the individual's competencies for providing such a service.

Case example. A school psychologist has a client complete an interview questionnaire online about his personal history as well as some standard measures of ability and behavior.

Following further face-to-face testing, the school psychologist writes a report listing recommendations for the student's educational plan. When the school building level committee meets to review the student's case, the psychologist learns new information that causes her to doubt the validity of the online assessment. When evaluations are completed online, appropriate precautions must

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be made to ensure that patients provide truthful, complete responses to all questions. Although clients can and sometimes do reveal as much or more to a computer than to the provider, the provider also gains additional information in face-to-face questioning of patients. Evasive answers or denials may become suspicious when accompanied by incongruent body language. A school psychologist who has not received appropriate training in online assessment and its limitations can make the errors that impact the overall assessment or planned intervention.

CREDENTIALING

ASPPB (1997) has taken the position that the jurisdiction where the client resides, not where the therapist is located, governs the interaction; yet, states are not regulating practice by practitioners in other states if those practitioners are not providing services onsite. Internet addresses do not usually provide information about the address of either the sender or the recipient.

Case example. A school psychologist has been serving as an online expert for a website that offers advice on parenting to subscribers. A question is posted one day from an adolescent who reports that her stepfather has been sexually abusing her for a period of months. She asks for help from the psychologist who responds by recommending that she seek help from her school psychologists or guidance counselor, from a minister, or from another family member that she feels she can trust. Child protection laws frequently require that a practitioner report suspected instances of child sexual abuse. Yet, in this case the psychologist may not even know the location or identity of the minor female. In addition, the actual reporting requirements may vary among states; following the guidelines of the psychologist's state of practice may not meet the requirements of the state in which the identified client resides.

INSURANCE

Liability insurance policies need to be checked to ensure coverage for telehealth. Just as a car insurance policy may be invalid in other jurisdictions, no coverage for telehealth should be assumed. From the consumer standpoint, medical insurance may not pay for telehealth services, particularly in the absence of the traditional claim forms, fee statements, or face-to-face meetings.

Case example. A multidisciplinary team of mental health practitioners at a major university has received a grant to provide telehealth interventions

to adolescents who are receiving follow up care after having been homebound due to chronic health problems. Teleconferencing equipment is installed in the students' homes through which weekly conferences are held involving all the members of the team, the students, and their families and local care providers. While the equipment is provided free of charge, the students are expected to pay a given rate for the telehealth consultations. When one of the families files a claim with their insurance company for reimbursement, the claim is denied. The company indicates it will not pay for services that are not face-to-face. While teleconferencing and other means of telecommunication offer the potential to reach underserved populations, practitioners must work with insurance companies and managed care organizations to insure that payment will be made for reasonable amounts of care. Clients should also be advised at the onset of treatment of the possibility that this type of care may not be covered and that they should check with their provider for clarification. Alternative treatment possibilities should be discussed.

CONTINUITY OF CARE

Minimum standards of care generally provide that practitioners make plans for emergency care, follow up on client progress, keep adequate records for an extended period of time, and provide for appropriate procedures in the event of termination. If a client resides in another state, what provisions are there for crisis care or for monitoring treatment compliance? If the client chooses to seek professional help from another practitioner, how are the records accessed and transferred?

Case example. A school psychologist is employed by a professional agency to provide family therapy to clients seen at one of the agency's facilities. Client records, including diagnostic information, are housed on the agency's server. The school psychologist has been seeing a single mother and her two children for grief counseling following the death of the husband and father in an auto accident. Some time after termination and about a year after the fatal accident, the mother decides to relocate the family to another state, where her parents reside. She asks that the therapist forward copies of the records to another therapist in the new town. This example illustrates the need to archive records and to provide means of transferring electronic information to subsequent service providers. While transfer of client records is a routine matter among mental health practitioners,

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special issues arise when the records are stored electronically, including compatibility of systems and inclusion/exclusion of certain communications. For example, are all email communications (which are written documents) part of the record? Or would they be considered more akin to oral communications in a therapy session, which are not usually recorded verbatim?

PRIVACY AND CONFIDENTIALITY

Most information technology professionals acknowledge that privacy and confidentiality cannot be assured over the Internet. In addition to the threat of hackers, most individuals do not have adequate safeguards on their home or work computers to protect others in that environment from viewing confidential communications. Worse yet, sites that respond to specific questions with individual responses expose clients to exploitation. Beyond sharing personal information online, sites may attach "cookies" to visitors, tracking their visits to other sites and monitoring their consumer activity. School psychologists are urged to check a site's policies on privacy before sharing information online.

Case example. A school psychologist has been seeing an adolescent female for counseling. One of the student's issues is the abusive relationship she has with her boyfriend. In an email to the psychologist, the student reveals that she is thinking of terminating the relationship. Her mother subsequently reads her email and calls the psychologist, angry that she was uninformed about the risk to her daughter. While the email message was intended to be a private communication between therapist and client, the privacy of such messages cannot be guaranteed. Clients need to be cautioned about leaks of privacy in communications over the Internet.

CLIENT IDENTITY

It is very difficult to establish a client's true identity over the Internet. As news reports of pedophile activity on the Internet unfortunately demonstrate, individuals often mask their identity to those with whom they communicate. Establishing a therapeutic relationship requires an honest sharing of information to be helpful to the client and to prevent the practitioner from untoward relationships.

Case example. A school psychologist who teaches part-time at a local university is asked to monitor a virtual support group developed for students coping with learning disabilities. Although the students all use monikers to protect their

identities, the information shared by one of the group members leads the counselor to suspect that one of the participants is the parent of a student she is seeing during the day at her full-time job. The school psychologist immediately notifies her supervisor of the possible dual relationship and asks to be replaced midway through the life of the support group. In a typical group therapy situation the identities of therapists and clients are known at the outset, and possible conflicts of interest may be addressed. When the identities are unknown, as may be the case in online communications, conflicts of interest are not so easily established. Having to switch monitors in the middle of the group experience, while unavoidable here, is disruptive to the treatment process.

FRUSTRATIONS WITH TECHNOLOGY

As anyone who has ever operated a computer knows, hardware crashes, connections fail, and communication breaks down. In such a situation, provisions for adequate backup care should be made available. Moreover, school psychologists must appreciate the ability of various clients to utilize high tech services. Individuals with developmental disabilities or psychoses as well as clients with certain types of personality disorders may be unable to be served in this manner. Not only is their facility with technology limited, but the characteristics of their disorders may impede directly their ability to profit from the services.

Case example. A school psychologist has been treating a male student for depression for about six months. The client was seen for a diagnostic workup, was referred to a psychiatrist for pharmacological evaluation, and received face-to-face, individual therapy once a week for four months. The student is now being seen monthly, supplemented by weekly email communications with the school psychologist. The school psychologist's computer recently crashed on the weekend, but was restored to functioning the following Monday. When the school psychologist logged on to read her email, she opened a message from the student, indicating that he planned to commit suicide that night. Clearly, computer failures will occur. What is unclear from this example is whether the school psychologist had made adequate arrangements with the student for just such situations. Clients should be advised of appropriate procedures to activate emergency care during periods of crisis—procedures that include fail safe measures for the psychologist.

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EQUALITY OF ACCESS

Families with incomes above \$75,000 per year are 20 times more likely to have access to Internet services than low income families. This "digital divide" denies services to those who are also least able to afford face-to-face mental health services. Moreover, research indicates that the availability of mental health providers is most limited in areas populated by persons with low incomes.

Case example. A school psychologist has developed a successful practice offering mental health information on the web. He regularly posts articles on new treatments and provides hyperlinks to other sites that offer additional information. Clients can subscribe to an online newsletter that delivers information to their desktop, if desired. A family practice physician refers a family to the school psychologist because one of their children is experiencing difficulty in school. The family has limited means and lacks Internet access at home. Clearly, the school psychologist must respond to the needs of clients with a variety of means, either by providing low cost, direct services or by referring the clients to colleagues who do. It is also likely that a client with the presenting issue of school problems who has limited means will not be a good client for Internet services, even as an adjunct to face-to-face contact.

LACK OF EFFECTIVENESS

Little or no research has been done to evaluate the effectiveness of telehealth services. Research has not yet determined whether services delivered via this medium are helpful, harmful, or neutral. Standards of care require that school psychologists utilize treatments with demonstrated research effectiveness.

Case example. A school psychologist recommends to a family that their daughter who is recovering from an alcohol addiction participate in an online therapy group composed of other substance abusers. The school psychologist obtains the necessary release forms, outlining the usual procedures and requirements for participating in group therapy but does not tell the student or her family that the online therapy group is experimental. The school psychologist has an ethical obligation to inform the client that online therapy groups are a new technique, whose effectiveness is not yet demonstrated. The school psychologist also has an obligation to inform the client of alternative therapies with demonstrated effectiveness.

RECOMMENDATIONS

In spite of these issues, telehealth offers a bright future for both school psychologists and clients. Services delivered via technology offers the potential to provide assistance to underserved populations such as rural residents, incarcerated juveniles, the home bound, and those with disabilities. Services delivered via telecommunications also offer access to quality information on mental health issues cheaply, easily, and with a minimum of self-disclosure. Such services can improve client education and participation in mental health services. Research, for example has demonstrated that clients are 30% more likely to disclose information on a computer than to a counselor in a face-to-face meeting. Given all these cautions, how can a school psychologist provide competent, ethical services in a high tech world? A few suggestions follow:

1. Review applicable licensing board regulations and guidelines of professional organizations to ensure compliance with legal and ethical rules of practice. As this is a rapidly developing field, take an inventory once per year of current standards of practice.
2. Check with your malpractice insurer to see what services are covered in your policy. Be sure that services provided over the web or through other electronic media are included in your coverage.
3. Avail yourself of continuing education opportunities in the area of telehealth. Look for workshops or home study materials that cover ethical and legal issues as well as practice issues.
4. Provide information to clients on your website and in written documents on the limits of confidentiality, on your credentials and competence to practice, or privacy, and on possible implications for billing and records keeping for services delivered over the web. Clearly indicate the types of services that can and cannot be delivered through various types of information technology. Be frank with clients about the effectiveness of services through electronic means. In the absence of demonstrated research, clients need to make informed choices about the type of service delivery methods they select.
5. Provide alternative access to services for clients for whom high technology is out of reach or inappropriate for their particular issues.

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6. Develop procedures to provide follow up care and emergency care for any clients who might access your services through electronic means. If electronic communication is limited to clients seen in face-to-face sessions, then state so in initial agreements with clients. Also, indicate to clients what alternative services are available should the technology fail.
7. Consult with other practitioners who are more experienced in these media about needed skills and client issues. Provide services slowly until you are confident that you can provide services that not only do no harm, but also lead to satisfactory outcomes for the client.
8. Carefully select materials or hyperlinks to include on your own website. Use the same care in referring clients to materials or other sites as you would in referring them to other care providers.
9. Remember that resources can quickly become obsolete. Make a commitment to update websites to reflect contemporary research findings and standards of care.
10. Proceed cautiously to implement new technologies until you can deliver services of high quality. Not only is that essential to good client care, it is also critical to client satisfaction.

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Specialization in Neuropsychology: Contemporary Concerns and Considerations for School Psychology

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What constitutes appropriate education and training for the school psychologist interested in practicing as a neuropsychologist? With formalized courses of studies ranging from two-hour in-services to two-year post-doctoral residencies, the training alternatives are broad. An additional component of this issue includes the interpretation of neuropsychological assessment data and making recommendations for increasingly complex decisions. A major question to be asked is "What are the potential harmful risks for the consumer—children, parents, community-based health care professionals, and school systems—given the current climate of growing shortages in school psychology, over production in clinical psychology, and loose and unstructured standards for respecialization?" Additional questions include: "What constitutes appropriate education and training in neuropsychology?" and "Is neuropsychology solely a doctoral and/or post-doctoral specialty or is this an appropriate practice arena for the school psychologist trained at the specialist level?" Consider these two case illustrations as a starting point for discussion:

Case #1: A High School Student with An Athletic Injury

A young boy experiences a head injury during a high school football game. The injury is a closed head injury whereby he readily regains consciousness. In the ensuing weeks, however, he displays severe headaches, poor concentration skills, and his classmates report assorted temper outbursts. His grades decrease. The family physician reports that the CAT scan is negative. The young boy is referred for a comprehensive psychological evaluation.

What training would be necessary to evaluate this youngster appropriately using a contemporary neuropsychological approach? Would practitioners lacking specialty training inadvertently miss or fail to identify such variables as frontal lobe contusions

as neurobehavioral in nature, acquired learning disabilities, or post-traumatic stress disorder? Indeed, the complications could be quite widespread and far-reaching in scope and magnitude.

Case #2 A Junior High Student Referred Following Years of Violent Abuse

A young girl in foster care is referred for a psychological evaluation. The record notes that she was repeatedly beaten for years by an abusive, alcoholic, father. It is known that he often hit her across the head and while no single occurrence ever, reportedly, resulted in a loss of consciousness, the cumulative effects are unknown. Recent intelligence test scores are in the low average range. Yet, group testing from elementary school had suggested above average to superior abilities. The girl denies problems, yet teachers describe a "flat" affect and elements of depression.

Would a practitioner be able to discern subtleties and symptomatology that can be attributed to a neuropsychological base, rather than falsely identify more traditional explanations for depressive affect? What education, training, and clinical supervision, then, are necessary to conduct a neuropsychological assessment on children? In these cases, the practitioner holds a Ph.D. in school psychology from an APA-accredited doctoral program and is appropriately credentialed as a Licensed Psychologist and Certified School Psychologist. The internship was completed in the schools and an additional post-doctoral residency on a children's psychiatric unit was completed. Moreover, graduate training included a course in clinical neuropsychology. Still, what education and training should be required for specialization and practice in neuropsychology? Many public schools are increasingly faced with intricate cases, the scope of which may include a request to conduct neuropsychological evaluations on children with complex, sometimes even intractable, problems. Moreover, such evaluations can be financially

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expensive, and result in inappropriate, costly, recommendations for local boards of education. As such, it can be advantageous to have school-based professionals with appropriate training in the specialty. At the same time, poorly trained or under-trained professionals can pose ethical, legal, and healthcare risks by providing inaccurate diagnostic and clinical services. Should standards for school neuropsychology – if such a term exists – be similar to standards used in hospital practice?

Neuropsychology: Background and Overview

One of the more engaging and important trends in professional psychology over the past two decades has been the growing recognition of the important contributions of a neuropsychological framework. Looking within school psychology, D'Amato, Hammons, Terminie, and Dean (1992) increased appreciation for neuropsychological perspectives of children's learning and behavior.

In terms of a general definition of neuropsychology, it is a practice and research specialty that deals with the relationship between the brain and behavior. As LaRue (1992) so well described, "the most significant benefit—and challenge—of a neuropsychological approach...is that it encourages an integrated explanation of behavior, combining hypotheses about altered brain function with an understanding of an individual's personality, current stressors, and social [family] relationships" (p. vii).

Given that directors of school psychology programs have long identified a need for training in neuropsychological theory, research, and assessment methods (i.e., Hynd, Quackenbush, & Obrzut, 1980), the development of a dialogue on the integration of a neuropsychological component to school psychology training is relevant and timely.

Consistent with D'Amato's (1990) emphasis on the heuristic value of a neuropsychological orientation to the practice of school psychology, we believe that a neuropsychological perspective is a comprehensive and potentially integrative framework around which school psychology assessment, research, and intervention can be organized. That is, pragmatically, whether interested in understanding genetic abnormalities, congenital/developmental disorders, learning disabilities, attention deficit hyperactivity disorder, childhood depression and anxiety disorders, neurodevelopmental bases to disorders, or the neuropsychological correlates of frontal and

temporal lobe damage arising from traumatic brain injuries, the benefits of specific education and training in clinical neuropsychology have been emphasized repeatedly over the past decade.

Indeed, many of the measures administered by school psychologists have evolved as part of neuropsychological assessment and some of the most contemporary applications of psychological assessment include the contributions of a neuropsychological framework. Taking a historical orientation, the application of a neuropsychological lens to the schools is not new. Hynd (1981) suggested that neuropsychological knowledge can be useful and relevant to most cases addressed by the school psychologist, but notes that school psychologists may actually not find apparent usefulness in this view because of a lack of familiarity with the professional neuropsychological literature. Subsequent survey data seems to echo this concern.

Hartlage and Golden (1990) summarized the neglect of neurological bases of learning and behavior by school psychology training programs this way:

Despite the heavy dependence of school psychology on a firm basis for understanding how the central nervous system works, the incidence of various types of disorders of the central nervous system, and the implications of these factors for daily school psychology practice, neurological components of most school psychology curricula occupy at best an insignificant part of the curriculum and in most training programs are totally neglected (p. 431). In a general way, not only is a neuropsychological perspective useful in the conduct of psychological assessment efforts, but also such an orientation can aid in direct service efforts. Neuropsychology training can:

- Facilitate teacher and parent education/consultation;
- Assist in developing neuropsychologically-informed special education decisions;
- Enhance referral use for neuropsychological services;
- Increase the ability to comprehend articles that have relied on neuropsychological concepts and methods in attempts to understand the etiology and behavioral or educational consequences of childhood developmental disorders;
- Protect against more simplistic and inaccurate habits (i.e., specific localization of brain functions or dysfunctions based on performance on a single psychological measure);

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- Serve as a bridge between clinically-based neuropsychologists and school-based psychologists in providing an interpretative explanation of specific test results and recommendations; and
- Provide a theoretical framework that appreciates the value of multidimensional batteries and the inherent complexities and difficulties of making inferences about brain integrity.

Neuropsychology Education and Training

Given that school psychologists assume considerable responsibility for psychological assessment services, the integration of appropriately training school psychologists that meet the guidelines and standards of the International Neuropsychological Society (INS)-APA Division 40 for doctoral and postdoctoral training in clinical neuropsychology can be challenging (Report of the INS-Division 40 Task Force on Education, Accreditation, and Credentialing, 1987).

The Report of INS-Division 40 Task Force on Education, Accreditation, and Credentialing in Clinical Neuropsychology (1987) notes that the Clinical Neuropsychology subspecialty is a doctoral-level practice specialty. Among the issues potentially important for school practice would be the neuropsychological bases of both verbal and nonverbal learning disabilities, pediatric traumatic brain injury, attention-deficit hyperactivity and other disruptive behavior disorders, prenatal exposure to alcohol and other substances, and childhood psychiatric disorders (i.e., depression, anxiety). Educational implications of developmental and acquired neurobehavioral syndromes would also be critical.

With a burgeoning of neuropsychologically-guided pediatric, developmental, and educational research, all well-trained school psychologists must have at least entry-level mastery of neuropsychological principles and methods. For example, Livingston, Stark, Haak, and Jennings (1996) noted that unilateral frontal lobe dysfunction in younger school-age children may result in attentional and behavioral impairments. Reitan and Wolfson (1996) observed that the neuropsychological consequences of learning disabilities override effects of age and education on psychological test performance in the 9 through 14-year age group. Thus, the complexity grows.

Credentialing in Neuropsychology

What markers define neuropsychology for the

public as well as other professionals? At present, there are a number of avenues to gain training in neuropsychology, including a number of post-doctoral programs available in various regions of the country. These training opportunities included both formal post-doctoral residency training as well as alternative training opportunities. The former includes residencies in APA-accredited sites such as the University of Virginia Medical School and the Institute of Living in Hartford, Connecticut. A post-doctoral Neuropsychology Certificate Program is offered through the Fielding Graduate Institute, a two-year program which includes regionally dispersed classes meeting two days monthly, 200 hours of case supervision and 1,000 hours of practicum training. The program culminates in an advanced professional certificate of proficiency awarded following the completion of a final evaluation that includes case presentations and evaluations. The Texas Women's University also offers a 1-year program including a summer institute of distance learning course work, monthly supervision, and a 750-hour practicum.

Since much diversity exists regarding what constitutes appropriate education and training for practice as a neuropsychologist, once again one asks "What are the potential harmful risks for the consumer- children, parents, and school systems- given the current climate of loosely specified training standards for respecialization?" To understand credentialing more clearly, consider APA's definitions and standards for training.

APA's Division 40 defines a clinical neuropsychologist as follows:

1. A professional doctoral-level psychology provider of diagnostic and intervention services with demonstrated competencies in the application of such principles for human welfare following successful completion of systematic didactic experiential training in neuropsychology and neuroscience at a regionally accredited university.
2. Two or more years of appropriate supervised training applying neuropsychological services in a clinical setting.
3. Licensing and certification to provide psychological services to the public by laws or the state or province in which s/he practices.
4. Review by one's peers as a test of these competencies.

From a credentialing perspective, the attainment of the American Board of Clinical Neuropsychology (ABCN) Specialty Diploma and

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the American Board of Professional Psychology (ABPP) Specialty Diploma is a traditionally accepted, time-honored, signpost of competence as a neuropsychologist, assuring that all of these criteria have been met. On the other hand, these credentials reflect post-doctoral markers of achievement. Meanwhile, at the non-doctoral level credentialing has largely remained undeveloped with one newly emerging fledgling board, the American Board of School-Neuropsychology (ABSNP), awarding a specialty certificate to both doctoral and non-doctoral practitioners.

As doctoral psychologists, what standards should be espoused? Is neuropsychology best conceptualized as a doctoral/post-doctoral specialty? Clearly the ABPP/ABCN Diplomas signify such a standard. On the other hand, with a potpourri of half-day workshops, consumers – including public schools – are increasingly receiving offers by contractual providers with widely disparate training. Certainly, left unattended, the risks for inaccurate diagnoses and interventions seem large.

Conclusions and Considerations

There is a growing understanding of the important contributions that a neuropsychological perspective can make to school psychological practice. While neuropsychology is generally conceptualized as a post-doctoral subspecialization in professional psychology – certainly a viable option for the doctoral school psychologist – the development of limited but focused coursework and training in neuropsychology for all practitioners raises new and interesting questions and concerns.

Neuropsychology training guidelines suggest that neither a single workshop nor a single course can possibly prepare school psychologists who are capable of comprehending and applying a wide-range of neuropsychological principles (which constitutes the goal of only a few select doctoral school psychology programs). This integration does have as its objective the development of a capacity to comprehend and apply basic neuropsychological principles and to instill thoughtfulness about the strengths and limitations of a neuropsychological perspective that may eventually lead to further specialized training.

How many school psychology programs benefit from a faculty member trained as a neuropsychologist? How many faculty teaching neuropsychology in school psychology programs meet contemporary standards in this exacting area of subspecialization? How many school

psychologists in practice have completed appropriate, formalized, training in neuropsychology? How many children have been inaccurately evaluated? Where do you and your colleagues stand?

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People & Places

**Compiled by Angeleque Akin-Little
University of the Pacific**

The School Psychology Program at **Lehigh University** is very pleased to announce that **Patricia Manz, Ph.D.** has joined the faculty as an Assistant Professor beginning in the 2003-2004 academic year. Dr. Manz completed her degree at the **University of Pennsylvania** in 1994 and recently served as a visiting faculty at Lehigh after 5 years of serving in various research and applied capacities at the **Children's Hospital of Philadelphia**.

The University of Northern Colorado

School Psychology Program faculty is pleased to report that **Dr. Robyn S. Hess** will be joining the School Psychology Program (in the Division of Professional Psychology) beginning fall semester 2003. Dr. Hess serves on the **Division 16 Executive Council as the Vice President of Social and Ethical Responsibility and Ethnic Minority Affairs**, a Section Editor of *School Psychology Quarterly*, and is a noted researcher in the area of school completion, stress and coping in children and adolescents, and culturally responsive educational and assessment practices.

Jeff Braden has accepted the position of Professor of Psychology affiliated with the School Psychology Program at **North Carolina State University**. He joins the current faculty comprised of Mary Haskett, Ann Schulte, Patsy Collins (Clinic Director), and Bill Erchul (Director of Training).

Steve Little has accepted the position of Chair of the Department of Educational School Psychology and Director of Programs in School Psychology at the **University of the Pacific**. He joins the current faculty comprised of Linda Webster and Rachelle Hackett.

Angeleque Akin-Little has accepted the position of assistant professor in the School Psychology Program at the **University of the Pacific**.

Tom Kubiszyn has been appointed professor and director of the new School Psychology Program at the **University of Houston**, in collaboration with the **University of Houston at Clear Lake**. His appointment begins in August 2003 and students will be admitted for the fall 2004 semester.

The School Psychology program at **Kent State University** is pleased to announce the addition of two new faculty members, beginning in Fall 2003. **Karla Anhalt's** general area of interest is cultural diversity as it pertains to development and services for children and adolescents. Prior to the move to Kent State, Karla had been an Assistant Professor at Texas A&M University since 2000. **Richard J. Cowan**, a 2003 graduate of the School Psychology program at University of Nebraska-Lincoln, has specialty interests in social skills training, applied research in conjoint behavioral consultation (CBC), and the treatment of autism spectrum disorders (ASD). Program Coordinator Cathy Telzrow notes, "Karla and Richard will make a great addition to the KSU team!"

BOOK REVIEW

Diversity Challenged: Evidence on the Impact of Affirmative Action

Carol Robinson-Zañartu
San Diego State University

Making the Case for Diversity in Higher Education

In a book that should become a standard for anyone interested in the issues of diversity in higher education, Orfield's (2001) *Diversity Challenged: Evidence on the Impact of Affirmative Action* published by Harvard University Press examines not only the rationale and impact of affirmative action, but produces data on the broader relationship "between more diversity in campus enrollment and enriched intellectual experiences" (p. 4). The data Orfield and colleagues examine are quantitative and qualitative. The issues they explore regard the impact of efforts to enhance diversity, including but beyond affirmative action, in secondary as well as in higher education. Their thesis is that schools with rich diversity offer a more expanded education and an intellectually richer campus environment. Orfield argues that political climates have influenced policy far too heavily, where data should have driven these decisions. With this book, he makes great strides toward filling the gap.

The challenge Gary Orfield posits is to develop and test good theory, to examine existing data, to conduct good research, and then to shape well thought-out policy. This then becomes the format from which chapters evolve. Contributing authors from the University of Michigan to Macalister College, UCLA to Harvard, and University of Pittsburgh to the Office of Civil Rights, add depth, detail, and perspective. Orfield's introduction not only presents his purposes, but previews some of the research findings, from the law school study that found students with diversity experiences showed that they could think about issues in more complex ways than those without the experiences, to the study that demonstrated financial and economic benefits, not only to the students, but to the nation. In addition, he introduces social policy concerns and positions; for instance, that basic services for populations in already poorly served and racially stratified communities require educated people who want to serve those communities; that a university "cannot really effectively teach about the realities of American history and society without reflecting the diversity within" (p. 9). In the final part of the

introduction, he discredits the "low SES solution" that just admitting students from poverty would enhance diversity sufficiently.

Summary of Content

Neal Rudenstine's opening chapter lays out the fundamental rationale for student diversity in higher education as its educational value, and traces historical and legislative precedents that contribute to understanding the issue not so much as one of affirmative action, but of valuing diversity. As then president of Harvard University, he draws heavily from Harvard's experience with enhancing diversity in ways other than affirmative action, per se, from its Civil War beginnings through the 1960s, as their policy on cohort selection emerged. While not the theme throughout the book, Rudenstine's position is clear that admissions policies should not have numerical targets, set-asides, or quotas. He proposes admission (as Harvard does it) by a multi-faced, multi-tiered process, giving attention to the nature of the whole and rooting it in a higher objective:

Admissions decisions are not isolated, atomistic events. They focus on individuals, but each decision is made in the context of others, where the pattern of the whole is also taken into account. This pattern contributes significantly to student diversity – and diversity, as we have seen, is strongly linked to the quality of learning (p. 43).

Palmer's chapter outlining a policy framework for conceptualizing the legal debate follows logically from Rudenstine's example. Palmer argues that diversity for diversity's sake will not win legal battles; rather, promoting racial diversity will hold legal water only as an "objective designed to further various goals of higher education" (p. 50). He then proposes an overarching policy which frames goals, specifically improving student learning, enhancing student civic values, and promoting student preparation for employment, that can be operationalized through concrete objectives, such as racial diversity in the student body and achieving a critical mass of students from different racial backgrounds. Sandwiched between the objective and the goals, however, is the much needed

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evidentiary link; that is, the evidence to demonstrate that the objective actually produces the goal. This, he reiterates throughout, is the critical research link that has begun to emerge, but that must be strengthened in higher education. He illustrates this need in the discussion of the Bakke decision, in which Justice Powell indicated that increasing minority enrollment in medical school to enhance the health services to the under-served community would have been a "compelling" reason had the evidence been there behind it. Today, that evidence does exist (and is one of many studies presented in this book); however, Palmer underlines the need for far more continuing research to be produced on the outcomes.

The legislation that has followed policy and driven practice is introduced by Orfield, and referred to throughout the book. Orfield traces the roots of affirmative action to the civil rights revolution of the 1960s, and features perhaps the two most salient cases prior to the upcoming Supreme Court decision on *University of Michigan: the 1978 Bakke decision (Regents of the University of California v. Bakke)*, and the 1996 *Hopwood v. Texas* decision, nearly two decades later. While several chapters weave in appropriate references to legal cases, Palmer's chapter is developed wholly to the subject. Palmer paints the heart of the current affirmative action conflict centered between the Bakke decision, in which Justice Powell found that a university's interest in securing the educational benefits that flow from diversity was a "compelling interest," and the Hopwood decision of the Fifth Circuit Court of Appeals, rejecting promotion of diversity as a compelling interest (and passing over the notion of educational interest). He proposes that another case decided in the same year as Hopwood, *Wittmer v. Peters*, established that non-remedial interests could be sufficiently compelling to justify strategies such as affirmative action. Although *Wittmer* occurred "outside the educational context, [Palmer demonstrates how it] provides a powerful rebuttal for Hopwood" (p. 82). In the Supreme Court case that now holds the nation's attention regarding affirmative action, *Gratz v. Bollinger*, a U.S. District Court had upheld the University of Michigan's affirmative action policy because of the evidence provided by the university that it had a compelling interest in promoting the educational benefits of diversity. Palmer's examples of "strict scrutiny," as well as his differentiation between "remedial interests" in overcoming the present effect of past discrimination and "non-remedial interest" in

realizing the educational benefits of diversity should help us conceptualize the arguments and decisions expected from the Supreme Court this summer.

Palmer closes with a charge to the higher education community to produce more outcomes data, which serves as the perfect bridge to the data-driven chapters that follow. Janet Ward Schofield packages her thoughtful presentation of some of the outcomes of desegregation research with K-12, by thematically pulling together those findings in a chapter on maximizing the benefits of diversity once you have it. She begins with known outcomes of school desegregation: academic progress for African Americans (some for Hispanics); cuts in dropout rates (concurrent, ironically, with greater suspension rates); and modest long-term occupational consequences for African Americans. In addition, she points out that very little research has focused on the effects on whites, but that some research indicates parallel findings, especially in the arena of social relationships. Schofield is very clear that desegregation alone does not insure positive outcomes, and that what occurs after students are in classes together is critical. For instance, she points to research that illustrates that minority students in predominantly white institutions without supports report higher levels of stress and alienation than white peers, and that their college attrition rate is higher.

This sets the stage for Hurtado's later chapter, which highlights the need for "appropriately supported" diversity experiences (e.g., equal status interactions, well-designed peer group work, and active learning pedagogies from faculty). Hurtado found gender differences (with female faculty far more likely to engage classes in cooperative learning, group projects, and field studies) and ethnic differences (with Latino and African American faculty more likely to engage in cooperative learning and group projects; American Indian faculty more likely to use field studies; and Asian American faculty most likely to use extensive lecturing). In addition, she found those group- and field-related strategies linked in significant relationship to several learning outcomes, from critical thinking to acceptance of diverse views.

Schofield's review of research on K-12 desegregation suggests "students' school experiences are influenced greatly by the assumptions of those in power, which are embedded in each institution's everyday policies and practices" (p. 101). She argues that it is only the approach of institutional pluralism (vs. business as usual,

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assimilation or pluralistic coexistence), which values and promotes the diversity it has solicited, in which the true educational gains are likely to be seen. To promote that institutional pluralism she suggests several principles or factors: (a) consistent support from those in power; (b) cooperation between members of diverse groups helps foster academic achievement as well as social skills; and (c) equal status for all members helps produce positive outcomes. She warns against re-segregation and against developing policy that would substitute class for race in attempting to equalize opportunity, pointing out that class-based admissions could be counterproductive to establishing positive race relations, and would likely guarantee that a much greater proportion of minority university students would come from low income families. Millem, in a later chapter, likewise asserts that just admitting minority students does not guarantee the climate, content, and faculty flexibility. In fact, he found that in many schools their routines did not change and they were more rigid. Millem also addresses how to increase the benefits of diversity beyond just admissions and stresses: "(a) campus climate; (b) content of curriculum; and (c) ability of faculty to adapt their teaching methods to the needs of students" (p. 234). Positive outcomes were found where leadership promoted climate changes and faculty was diversified.

Concluding Remarks

Although this volume stands as an important collection of data and positions on diversity and affirmative action, and because it was in some part a pre-emptive response to the imminent Supreme Court case, it does not compare affirmative action per se with more sophisticated approaches to not only seeking, but then supporting diversity efforts. Certainly the data would lead one toward the latter solution. In addition, Orfield might have laid out the rationale and challenges of the "opposition," with specific suggestions for the next generation of research. Although some findings do support diversity for its own sake, such as greater financial gains post-graduation to blacks given a chance at the most competitive colleges, most of the meaty outcomes data seem to emerge when specific efforts at maximizing diversity are implemented. More complex models and outcomes studies must follow. Let us hope, in the mean time, the Supreme Court does not dismiss the evidence as insufficiently compelling, or the argument of compelling interest as insufficiently significant to allow the time to

produce the data from which to refine the discussion.

Diversity Challenged... closes with powerful personal perspectives and reflections from over a 40-year period from Paul Gaston, Professor Emeritus from University of Virginia on his observations as a professor of the impacts of integrating and diversifying "Jefferson's campus." Clearly having diverse peers has greatly influenced the responses of the student body. Gaston's poignant examples and commentary make a highly readable and compelling close to this volume.

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Cognitive Assessment of Children with Autism Spectrum Disorders

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Cognitive Assessment of Children with Autism Spectrum Disorder

A gap between literature and practice exists in the use of cognitive assessments for students with autism spectrum disorder (ASD). Cognitive assessments may not be useful when making educational programming and evaluation decisions (Shriver, Allen, & Matthews, 1999), yet school psychologists continue to include such assessments as part of their standard assessment battery. Many standardized measures of intelligence are simply unusable for students with ASD (Lord & Schopler, 1988). The school psychologist, then, must be creative and considerate of the student's individual abilities. It is the psychologist's responsibility to provide suitable assessment and interpretation of test scores, while making decisions that are appropriate to the child's abilities. A brief overview of the assessment considerations for children with ASD, the challenges of administering cognitive assessments to this population, and implications for school psychologists are provided.

Assessment of Students on the Spectrum

For a variety of reasons it may be difficult to assess students with ASD. There is considerable heterogeneity among the population. ASD includes Autistic Disorder and the related pervasive developmental disorders, signifying an extensive array of differences among individuals who share a single diagnosis. Although individuals with ASD possess core features (e.g., repetitive, restricted range of interests and communication and social deficits) outlined in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV-TR; APA, 2000), individual differences in characteristics are present in multiple domains: measured IQ, social interaction, play skills, communication, sensitivity to sensory stimulation, and other areas. It is suggested that the core features of autism each exist on a continuum (Dalrymple, Porco, & Chung, 1993) allowing for infinite variability among students diagnosed. When assessing children with ASD or those suspected of having a pervasive developmental delay, it is important to note this

heterogeneity among the population (Shriver, Allen, & Matthews, 1999). Due to this variability in functioning, assessment strategies and the resulting educational plans should consider the uniqueness of the individual.

Even within individual children, highly inconsistent levels of functioning often exist. Splintered skills, or "islets of ability" (Wing, 1988), may exist even among individuals with very low adaptive functioning. For example, a student who cannot communicate verbally may be able to read. Therefore, each skill area must be independently assessed. Thorough, careful assessments provide information upon which a highly individualized intervention program can be based. Students with ASD are unable to succeed without such an individualized approach to learning (Mesibov, Troxler, & Boswell, 1988).

Challenges During Test Administration

Students with ASD face a variety of challenges during the typical assessment session. Any combination of the following may complicate the testing situation: poor communication skills, a limited ability to follow sequential directions, social deficits, lack of attention to task, difficulty adapting to novel environments and changes in routine, and disruptive behaviors.

Standardized measures of intelligence require the very response repertoire that is often lacking in children with ASD: receptive and expressive communication (Shriver et al., 1999). These students may not process auditory information in the same way as children without neurological impairment (Bruneau et al., 1999) and likely have impairments in complex language domains (Minshew, Goldenstein, & Siegel, 1997). Tests that are highly dependent on language comprehension, for example, may be biased against students with ASD (Watson & Marcus, 1999). Specifically, tests that require lengthy verbal directions and verbal responses are inappropriate. Even on the performance subtests of the various Wechsler Scales, receptive language skills are required. If the directions are clearly understood by the student, his/her inability or

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unwillingness to follow test directions may prevent him/her from appropriately responding. Multi-step directions are particularly problematic for students with such challenges. The communication deficit faced by all students with ASD puts them at a disadvantage on tests dependent on receptive and expressive language use.

In addition to language skill deficits, a student with ASD may lack social interaction and imitation skills. According to Cohen and Volkmar (1997), the social deficits of students with ASD may result in the following behaviors: discomfort when forced to failure to establish a joint frame of reference for an interaction, failure to observe social norms or to take the listener's perspective into account (or in the assessment situation, being unable to observe the social norms for appropriate test taking behavior), or reliance on prompts. Clearly, these factors are incompatible with standardized test administration and may be further complicated by inability to attend to the assessment tasks.

Implications for School Psychologists

Role of cognitive assessment. To make a diagnosis of ASD or in making educational programming decisions, Shriver, Allen, and Matthews (1999) argue that a cognitive assessment of a student with ASD may not be necessary for educational planning. Other researchers and practitioners, however, believe that cognitive assessment has its place. For example, Siegel, Minshew, & Goldstein (1996) wrote, "Such [intellectual] evaluations are of well-established value for such assessment functions as aiding in educational placement, and as a component of a neuropsychological evaluation" (p. 404). Even under ideal circumstances, the cognitive assessment of a student with ASD merely provides "descriptive baseline information about a child's present levels of performance on tasks that are believed to assess intelligence" (Shriver et al., 1999) (p. 554). Because of the limits inherent in such standardized measures of intelligence, the school psychologist may wish to minimize the use of cognitive assessments, make modifications to the testing environment, or choose alternative evaluation procedures.

Accommodations. Due to the sensory sensitivity of many students with ASD, they may respond with fascination or distress to sensory input in any modality (Wing, 1988). If possible, the testing room should be as free of visual and auditory stimulation as possible. Sometimes even the test materials can be distracting to the student, in which case the use of less stimulating visual materials

should be considered (Barnhill, Hagiwara, Myles, & Simpson, 2000). Adjusting the amount of sensory stimulation in the testing situation may create an environment in which the student can perform at a higher level.

The testing situation can be novel and frightening for even typical children, but is particularly so with individuals with ASD. Attempts should be made to familiarize the child with the examiner and the testing room prior to the testing day. It may be helpful for the examiner to meet with the child in the testing room prior to the evaluation date and engage in a pleasurable activity so that the child associates the person and the room with a positive experience. It could also help ease anxiety to allow the child's teacher, parent, or aide to sit in during the evaluation. For children with autism, testing requires a break in routine that may be difficult to handle. The child should receive adequate warning that an assessment period is going to be incorporated into the day. For example, if the child has a visual schedule, testing should be represented pictorially where it fits in the sequence of the day.

Accommodations can also be made during the test administration. Children with ASD tend to require more time to process information; therefore, it may be necessary to allow more time to complete tasks (e.g., Barnhill et al., 2000). Standardized directions are often lengthy and confusing, which is particularly problematic for children with receptive language difficulties. It would be helpful to shorten all directions and to make sure that the student clearly understands the task prior to initiating the subtest. Finally, if necessary, allow the child to choose an alternative means of responding including the use of signs or gestures.

Even when external factors are controlled, characteristics within the child may interfere with performance on assessments. The lack of motivation apparent in children with ASD may be the result of recurring failure at tasks (Koegel, Koegel, & Carter, 1999) and may hinder appropriate test taking behavior. To reduce the number of failures in a testing session, frequently intersperse new and challenging tasks with easier items. This may require administering items out of the standardized order or inserting non-test activities within subtests.

Positive reinforcement can increase motivation during the assessment session (Koegel et al., 1999). Reinforcers for students with ASD may differ from items other students would select. Seemingly uncooperative students may be willing to work for

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an item within their area of intense interest.

Students with ASD may need to be explicitly taught how to work for access to desired items, and such expectations may be established in meetings prior to the testing situation.

As discussed above, disruptive behavior may also interfere with the student's ability to respond. Koegel, Koegel, and Smith (1997) suggest assessing whether the student exhibits certain behavior that may interfere with the testing situation and then using positive reinforcers to reduce the rate of the interfering behavior. For a student who engaged in the obsessive, self-stimulatory verbal behavior of speaking in a "cartoon-like" voice, Koegel et al. allowed the voice only when responding to the test stimuli. Effective reinforcement of appropriate test-taking behavior may be warranted throughout the assessment session (Shriver et al., 1999).

The preceding modifications will likely improve the student's performance. When the administration of various intelligence assessments was altered to accommodate for motivation and attention variables, some students who previously scored in the mentally retarded range with standard administration could score in the average or low-average range of cognitive functioning (Koegel et al., 1997).

In sum, standardized conditions are not always possible when testing individuals with ASD. As a result, it may not be possible to use the assessment data to compare the child's performance with the normative sample. However, this does not mean that useful information was not gathered. When attempts are made to make the testing environment more suitable, a better picture of the student's strengths and weaknesses emerges. When accommodations result in a better sample of behavior, information more relevant for educational planning and programming is obtained. Of course, changes in standardized procedures need to be included in the psychoeducational report.

Alternative tests of cognitive ability. School psychologists may choose to administer nonverbal intelligence assessments to students with ASD, rather than altering the standardized administration procedures or foregoing the procedure all together. *The Test of Nonverbal Intelligence-Third Edition* (TONI-3) is a valid and reliable alternative that does not require the examinee to read, write, speak, or listen. The student responds by pointing to the correct response. Edelson, Schubert, and Edelson (1998) found that the *Test of Nonverbal Intelligence-Second Edition* (TONI-2) was useful in assessing

children with ASD. Because the TONI-2 does not rely heavily on auditory processing skills in the administration nor in the type of knowledge it assesses, verbal ability did not predict testability (Edelson et al., 1998).

The Leiter International Performance Scale-Revised (LIPS-R; Roid & Miller, 1997) is another option. The LIPS-R, which does not require the student to use or to understand speech, has few timed items and will not penalize students for slow responses. Shah and Holmes (1985) found the LIPS (Leiter, 1980) to have a high correlation with the *Wechsler Intelligence Scale for Children-Revised* (WISC-R) Full Scale and Performance Scale scores and low correlation with the Verbal Scale of the WISC-R. This suggests that the WISC-R may underestimate the overall intellectual abilities or that the LIPS overestimates abilities.

It should be noted that nonverbal tests of cognitive ability still require the ability to follow directions that are offered using nonverbal cues. Individuals with ASD often have difficulty understanding gestures and other forms of nonverbal communication. Therefore, it is up to the examiner to determine whether the student has adequate understanding of this alternative form of communication prior to proceeding with nonverbal tests of intelligence.

Alternative assessment procedures. As argued above, using standardized cognitive assessment with individuals with ASD, even if verbal responding is not required, is often problematic and may not be necessary to meet an assessment goal. There are other procedures that can provide useful information about the child's functioning. Observation, verbal reports from parents and teachers, and direct interaction (including direct skills assessment) with the students with ASD can often provide the most valuable information for diagnosis, examination of individual strengths and weaknesses, and educational planning (Shiver et al., 1999). Criterion-referenced tests and curriculum based assessment offer an additional means of identifying progress within an individual instead of comparing the child to a normative sample. Finally, school psychologists should seek the assistance of other professionals including speech and language pathologists, physical therapists, and occupational therapists to help to identify further strengths, weaknesses, and educational needs.

Summary and Conclusions

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Students with ASD are unique individuals, who present a variety of abilities and challenges in the assessment situation. Specifically, expressive and receptive language deficits and social and motivational difficulties can result in insufficient assessment information to aid in educational planning. Cognitive assessment may not be necessary to determine strengths and weaknesses, and the school psychologist may elect to make accommodations or use alternative forms of cognitive assessment in order to acquire the best possible profile of the student for educational planning. Alternative forms of assessment including observation, parent and teacher reports, direct interaction, and non-normative evaluation of individual progress offer a viable solution when the child is deemed "untestable" when standardized measures are attempted. Testing individuals with ASD can be a difficult task, and it is up to the school psychologist to have an assessment strategy that will result in the best possible educational outcome for the student.

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Membership in Division 16: What Good Is It Anyway?

and vocal as a division. You can help to ensure that school psychology remains a vital part of American psychology, and that psychology remains vital for the schools by helping division 16 remain in the forefront of APA's thinking. I can immediately think of two ways to do this, besides serving on the EC and representing school psychology at APA meetings. First, submit your best scholarly work to school psychology journals, especially, *School Psychology Quarterly*, and second, regularly attend the annual APA convention. I recognize that this year is rather unusual in terms of the convention; in fact, many of you are probably planning a backyard barbeque right now instead of packing for Toronto. I do, however, want to take a few more minutes of your time to highlight this year's meeting.

Thanks to our convention co-chairs, Angeleque Akin-Little and Tammy Hughes; the Vice President for Publications, Communications, and Convention Affairs, David McIntosh; and SASP's convention chair, Meredith Cohen, an outstanding division program has been planned. Included in the current newsletter are schedules for various events (Division 16 program, SASP's mini-convention, and the Hospitality Suite). As you may know, when APA changed its convention format we lost a number of hours. Our convention chairs have worked hard to ensure that as many members as possible have an opportunity to present their scholarly work. I hope that you are able to attend many of the excellent poster sessions and symposia. Please be aware that we are co-sponsoring with the Board of Educational Affairs an interdivisional symposium, "Psychologists Leave No Child Behind: An Interdivisional Call To Action." Robert Sternberg is the chair and Jane Conoley will represent school psychology's perspective. Other distinguished Division 16 speakers at the meeting this summer include Brian Martens and Sylvia Rosenfield, both of whom will be giving an invited address, and recipients of the 2002 Division 16 awards: Tanya Eckert, Jonathan Sandoval, and Kevin Fenstermacher.

I would also like to encourage you to come

early and attend the 10th annual pre-convention Institute for Psychology in the Schools sponsored by OPAS. The topic this year is: "Resilience: Inoculating Children From the Inside Out." The institute is being held on Wednesday, August 6th from 1 to 5. Further information about the Institute and other APA convention programming can be found on APA's website: www.apa.org/convention/. Finally, please feel free to attend any of the Division 16 activities. This includes the Business meeting that is held on Saturday, August 9th between 2 and 4, and the Social Hour that takes place immediately afterward in the Hospitality Suite. This year, the social is being sponsored by Riverside Publishing. Please help us thank Riverside and all the other sponsors for their generous support of this year's convention: American Guidance Service, The Psychological Corporation, PAR, Society for the Study of School Psychology, American Academy of School Psychology, and American Board of School Psychology. And again, thank you to the convention chairs and committees for your tireless efforts on our behalf.

I hope to see you in Toronto.... if not, Honolulu in 2004!



www.apa.org/convention/

Student Affiliates of School Psychology (SASP)

Accolades, Applause, and Adieu to SASP

Gena N. Ehrhardt-Padgett
SASP President
Indiana State University
Children's Resource Group

Almost three and a half years ago, two of my classmates and I had to make a weekly trip to Indianapolis from Terre Haute in order to attend a class. During the drive, we discussed ways on how to solve the world's problems, how to maintain some sense of a social life while attending graduate school, and how to prepare for our preliminary examinations. We had just received an email message from the SASP listserv asking people to run for office at the national level. Although we optimistically submitted our nominations, we were very unsure of the outcome. Needless to say, the day I submitted my nomination, an incredible adventure began, and from that moment on, I have been involved with SASP at the national level. This truly has been one of the most amazing experiences of my life.

The reason I enjoyed my involvement with SASP was because I worked with terrific people. My classmates were inspirational, and were always there to help out when the load became heavy. I am fortunate that I belong to a cohort of team players who were supportive, and offered their time and talent. I am also grateful that the departmental faculty at Indiana State University believed so strongly in professional development that they provided the means for me to travel and represent SASP on several occasions. Former SASP presidents, Carla Egyed, Matt Turner, and especially Dave Shriberg trailblazed a path for me, and made my tenure as president so much easier.

This year's SASP officers were especially strong, and several of them took a leadership role in order to make SASP better. Because of their initiatives, SASP has improved the database listing existing SASP chapters and members. Information

about APA-approved training programs and a link to school psychology internships can be found on the SASP website, and overall communication among students has improved. SASP News has expanded to several pages with informative articles that broach a variety of professional topics. SASP News continues to be published quarterly with issues that just keep getting better. The SASP convention has been amazing. Last year's convention was so informative and interesting that many of the students who attended expressed interest in returning this coming year. This year's convention includes poster presentations, panel discussions, research presentations, and professional development sessions. The topics are all exciting, and the SASP convention certainly personalizes the experience for school psychology students who concurrently are attending the APA convention.

I have been also fortunate to work with very supportive members of the Division 16 Executive Committee, ISPA, NASP, CDSPP, and APA. Because these organizations have been so supportive, SASP has been able to improve opportunities for graduate students in school psychology. The International School Psychology Association (ISPA) has projects available for students interested in researching topics at an international level. SASP was able to participate in the Future's Conference, and as a result, SASP has been involved with organizations and conferences regarding the delivery of mental health services to students in schools. This also includes participating in the School Psychology Leadership Roundtable, which is a continuation of the work started at the Future's Conference. With the support of Division 16 and APA's Office of Policy & Advocacy in the Schools, SASP has initiated closer

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2002-2003

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Student Affiliates in School Psychology (SASP)

ties with APAGS, and now the Division Student Representative Network (DSRN) has been established, replacing former liaisons so that student organizations such as SASP may collaborate more effectively with APAGS. NASP also has invited SASP to present at their Student Reception so that students can engage in organized professional efforts.

In all, I believe that SASP has accomplished much this year, and I am honored to have worked with so many individuals who have made visions realities. And now as I bid adieu, know that it has been my honor to serve at the national level at SASP, and I thank all of you for my three incredible years in SASP. I am optimistic that my successor, John

Eagle, will continue guiding and building SASP into a stronger organization for students. We have started projects such as creating a Diversity Recognition Award so that student chapters will be recognized for their culturally affirming ideals and training efforts. In order to help newly established chapters, we are in the process of creating a mentorship program. SASP always has been an organization receptive to fresh ideas, and as these and other new projects are realized and fulfilled, I believe that SASP will continue being one of the strongest organizations serving students in psychology.

It's Better Than We Thought: School Psychology is an Equal Player

Teri Nowak
University of Kentucky
SASP Liaison

I had the wonderful opportunity to attend APA's Spring 2003 Consolidated Meeting in Washington, DC (technically Crystal City, Virginia) March 28-30, 2003. After some key interactions among Gena Ehrhardt-Padgett, SASP President; Barry Anton, APA Board of Directors; Steve DeMers, APA Member at Large; and Chris Loftis, APAGS Chair, a representative of SASP was invited by APAGS to the spring meeting. My appreciation goes to Division 16, specifically Elaine Clark, Division 16 President, and to Steve DeMers for their support.

Working with the American Psychological Association of Graduate Students (APAGS) Committee members for 2 1/2 days gave me insight into the larger picture of APA and the input students have to APA. The APAGS Committee is a high caliber group that does an amazing amount of work each year. In its 15th year of existence, APAGS

recently won voting privileges on the APA Council of Representatives, and is now a member (albeit non-voting) of the APA Board of Directors. APAGS member representation appears to cross multiple areas of study within psychology, although this did not seem to be an issue among members. It was refreshing to interact with peers, all of whom have an equitable approach toward the various areas of psychological study. It was one of the few times I have not felt as though I had less status for being in school psychology. In fact, there are two members of the APAGS Committee who are in school psychology programs. Instead of pushing individual division agendas, however, members work as a team to do what they feel is best for all graduate psychology students.

Check out **SASP's web page** at:
www.saspweb.org

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Student Affiliates in School Psychology (SASP)

Although everyone supports a team approach, concern has been expressed by some members of Division 16 that issues specific to school psychology may not be addressed. For example, in addition to the chair, chair-elect, and past chair positions, voting members of the APAGS committee include six members-at-large, each with a different focus. Foci include diversity, general, research/academic, education, practice, and communications. Within any of these foci, issues arise that apply to students in school psychology. When approaching these issues from a generalist perspective, however, concerns specific to school psychology may be overlooked or not addressed in order to gain group consensus.

To alleviate such concerns and to increase communication between APAGS and the divisions, the APAGS Committee chose to change how it has historically interacted with division student organizations. Members voted to eliminate the existing liaison structure to divisions and replace it with the Division Student Representative Network (DSRN). DSRN strives to be a fair policy that gives every division an equal opportunity to connect with APAGS. APAGS recognizes that liaison relationships are a bi-directional interaction that helps APAGS Committee members to prioritize their work while keeping graduate students informed and updated on issues that affect psychology in general and, more specifically, student issues.

Having an opportunity to participate in the discussion leading up to the vote allowed me to understand APAGS' reasoning behind the DSRN. I believe this is a positive move that encourages interaction between APAGS and the divisions. Because SASP was the only student organization represented, SASP was viewed as being at the forefront of the direction in which APAGS wants to head.

While we celebrate the APAGS Committee's work toward recognizing SASP and other division student organizations, we need to take a moment and think about the benefits as well as the issues regarding SASP's involvement with APAGS' DSRN. In the near future, APAGS plans on sending a questionnaire to each student organization. In order to answer the questions, we as a group will need to think about the roles and responsibilities of the SASP Liaison position. I see this as a benefit, because the questionnaire will help facilitate our discussions. APAGS suggests that this be a two-year term. I agree with this because it takes a while to establish contacts, and for the liaison to be able to

move SASP and our school psychology agenda forward, there needs to be some stability in this position. An issue that we will need to address is how to financially support the SASP Liaison to take three trips to attend a DSRN training during convention, a fall strategic planning meeting, and the spring consolidated meeting.

Having closer ties to APAGS means that we have the opportunity to highlight school psychology issues and bring them to the committee's attention for consideration. Encouraging closer ties, however, also can stretch SASP members' financial resources. For example, a school psychology student currently can join Division 16 without joining APA. This would need to change. We will need to look at our high dues, relative to other divisions, and develop some sort of "package deal" in which school psychology students will be able to afford to reap the benefits that SASP and APAGS have to offer. (Note that when students join APA, they automatically become members of APAGS.)

SASP is graduate students' connection to resources on school psychology-specific issues and an avenue for networking with colleagues of like interest. SASP offers many benefits to school psychology students.

- A national link to information, resources, and services targeting issues that apply to school psychology students.
- A national network of local chapters with mentoring opportunities for new chapters.
- A listserv that attempts to focus on specific issues of children and youth as well as provide broad information that impacts the field of school psychology.
- The SASP Newsletter is published quarterly and contains well-written student-submitted articles on current issues and hot topics. It is an excellent avenue for students to begin their publishing careers.
- The annual SASP Convention held during the APA Convention is a format for students to present their scholarly work. This also is an excellent avenue for students to begin their professional speaking careers.
- Opportunities to show leadership abilities and collaborative skills by holding an office in SASP or working on a committee.
- Scholarships and awards are available for students based on their research, on diversity, and on travel needs to the convention.

Being a member of APAGS provides students

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with additional information, resources, and services for psychology students in general.

- APAGS has recently changed from a student-developed newsletter to a professional magazine, gradPSYCH, that looks somewhat like the APA Monitor, only more student friendly. The first issue premiered in May 2003.
- A members-only section is being developed on APAGS' website that will contain online chats related to gradPSYCH articles as well as more accessible documents and resources that are not available to nonmembers.
- A practitioner portal (<http://www.apapractice.org>) is available for practitioner-oriented APAGS members.
- Multiple scholarships and awards are available to graduate students.
- Free resource guides for ethnic minority graduate students, students with disabilities, lesbian, gay, bisexual and transgender students, and women.
- The APAGS Internship Workbook, now in its 5th edition is being transformed into an APA publication titled, Internships in Psychology: The APAGS Workbook for Writing Successful Applications and Finding the Right Match.
- APAGS ACT (Advocacy Coordinating Team) focuses on national and state legislation that affects psychology.

So, how do we maximize resources for students while not requiring them to pay an exorbitant amount of money? If establishing close ties to APAGS is a priority, what can we do to help students receive the benefits that SASP and APAGS have to offer? We need to look hard at SASP's organization and maintain those things that work and re-assess those procedures that act as barriers to doing what is best for students.

In alignment with the goals of Dr. Robert Sternberg, president of APA, we want to reduce prejudices of groups in APA; by interacting, we learn to find our commonalities for the greater cause of psychology. This attempt to unify people in APA, while recognizing different strengths of each group, helps all people.

Additional info from the APAGS meeting that may be of interest to school psych students:

COMMUNICATION

- When you receive gradPSYCH, look it over with an eye to school psychology issues and give APAGS feedback, via their website, as to what

you would like to see in future publications.

- Consider having SASP's listserv under APA to strengthen the SASP/APAGS connection. This will allow information that is posted to the APA student listservs also to be posted on SASP's listserv. Currently, I forward the emails from the many listservs I am on to the SASP listserv.
- APAGS recently sent campuses with APAGS ACT College Representatives a bulletin board in which APAGS information can be posted. Look for one on your campus.

CONVENTION

- At the APA convention, try to attend Food for Thought Breakfasts; only 20 – 25 members can sign up. This event is arranged so that small groups of students have breakfast with a famous psychologist of whom students will be able to ask questions. The breakfast is FREE.
- For those students interested in academia, there will be an academe career workshop at the conference that will focus on finding and keeping academic positions.
- Next year's APA convention (2004) is in Hawaii. APA is concerned about students being able to afford to attend. Look for an article soon in the gradPSYCH about affordable travel. APA is trying to set up a system to allow students to stay with local students or in the dorms. The convention committee is working hard to provide some unique opportunities as an attraction to travel to the 2004 convention (besides that it is in Hawaii). For example, dolphin therapy with some direct observation (and possibly hands-on practice?); and bringing in a "big-time" keynote speaker (think really big.) Plan early to attend; you really need to have a sense of whether you will be able to go by Christmas 2003.

INTERNSHIP BEFORE AND AFTER GRADUATION

- There is a big problem with the number of psychology students looking for pre-doctoral level APA-approved internships and the number of sites available. There are more students than sites. Additionally, there are problems with the low salaries many post-doctoral internships pay. APAGS is involved with providing feedback to the task force that was developed to address these issues.
- APAGS is working closely with the ad hoc

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committee on early career psychologists (ECP) to address issues such as the low salaries and licensure concerns. Since state licensure determines post-doctoral requirements, there is no consistency across states as to required licensing hours. Many of the issues are multifaceted and need the collaborative efforts of stakeholders from various groups.

TRAINING

- Advanced Training Institutes are offered each summer for 2 weeks of intensive training. One-third of the available slots are open to graduate students. Look for more information about these on APA's website.
- A Competencies Conference was held this past November, in which participants looked at training issues relevant to the field of psychology. Lists of expected skills/knowledge were created for multiple domains (i.e., ethics, supervision, assessment, professional development, research, consultation, intervention, diversity) and goals for the future were developed. Look for multiple articles coming out about the future direction of training based on this conference.
- The Consensus Conference on Combined and Integrated Doctoral Training in Psychology will be held May 2-4, 2003. The conference is sponsored by the APA Education Directorate, James Madison University, the Consortium of Combined and Integrated Doctoral Programs in Psychology (CCIDPP), and the APA Division 29. They are looking into a combined school, counseling, and clinical program of study. APAGS is involved in providing input from a student perspective. Look for upcoming publications from this group. (Did you know that there are currently 11 APA-Accredited combined doctoral programs in the US?)

PUBLIC RELATIONS/EDUCATION

- Exploring Behavior Week is coming up. The focus is on educating middle school and high school students. Local chapters who are interested in spreading the word about school psychology can access FREE materials on the web for a 1-hour presentation on psychology. The materials are broad-based with room to tailor them to your specific area of psychological study (e.g., school psychology).

SPECIFIC AREAS OF INTEREST

- Recently the American Psychological Association/National Association of School Psychologists (APA/NASP) Inter-Organizational Committee (IOC) was disbanded after 25 years of existence. Communication and cooperation between the two organizations is encouraged through alternative mechanisms. An APAGS agenda item reflected some of the confusion this move created and discussion ensued as to what relationship should exist between APAGS and NASP's newly forming student interest group. Currently, Division 16 sets up an information booth each year at NASP and provides information about APA and SASP.
- Students can be a member of the Advancement of Psychology group for \$10.00 and will receive APA's advocacy newsletter and information.
- APAGS-CEMA (committee on ethnic minority affairs) has a grant program that sponsors National and Regional Multicultural Networking and Specialized Training events. The program provides seed funds to local ethnic minority graduate student organizations for the development and production of mentorship programs, regional conferences, and other educational workshops. Each year CEMA offers a total of five \$500.00 awards in the form of grants to provide financial assistance and support for the development of projects that improve the overall training and experience of ethnic minority graduate students.

As the SASP Liaison, I enjoy keeping you informed about a wide range of topics. It is, however, quite an effort to maintain a balance between overwhelming you with too much information and not sending you something that matches your specific interests. If you should have any questions that refer to general psychology/APA issues to local advocacy concerns, please feel free to contact me at tmnowa0@uky.edu.

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Student Affiliates in School Psychology (SASP)**SASP CONVENTION SCHEDULE****Thursday, August 7, 8 am - 12 pm****Division 16 Hospitality Suite, Fairmont Royal York
Toronto, Canada****8:00 Welcome****8:05 Panel I: Identity & Intervention:
Examining the possibilities.****Pathways youth development
program: Affective education
for urban youth.***Jocelyn Mackey, Howard University***Global and academic self-concept
in Trinidad and Tobago
adolescents.***Michael Starks, Pennsylvania State
University***8:40 – 8:45 Presentation of Research
Awards****8:45 Panel II: Assessment & Application****Differential diagnoses of
dementia and depression.***Robin Schifano, Samuel Sabaka,
Christopher Ruhe, Annie Butin,
Tasha White, Jenny Kardatzke,
Timothy Hanchon & Kenneth McCoy,
Ball State University***The use of mental chrometric
tasks in cross-battery
assessment.***A. Alex Beaujean, Andy Koop, &
Sean McGlaughlin, University of
Missouri, Columbia***Factors influencing parent
involvement in children's
education.***Jennifer Lupiani & Abigail Harris,
Fordham University***9:35 – 9:50 Poster Presentation****Pre-service teachers' consultation
model preferences.***Jennifer McGrady, Pennsylvania State
University***Efficacy of school-based crisis
interventions for diverse
population.***Chien-En A. Jan, University of Florida***Examining the relationship
between self-concept and at-risk
status among adolescents.***James Stephens & Frank Worrell,
Pennsylvania State University***9:55 Panel III: Professional Issues****Graduate preparation of school
psychologists: Themes from the
Futures Conference.***Jenny Noble, Michele Ridge-Custer, &
Joann Vitzum, Indiana University***Experiences of female school
psychology professors: A panel
discussion.***Cynthia Hazel, University of Northern
Colorado & Gena Ehrhardt, Indiana
State University***11:05 – 12:00 Roundtable Discussion:
Securing an APA, or Final Year
Internship as a Graduate Student
in School Psychology.**

A Place for Projective Assessment in School Psychology Practice?

Rosemary Flanagan
Adelphi University

Surveys of school psychologists (e.g., Curtis, Hunley, Walker, & Baker, 1999) indicate that a significant portion of working time is devoted to conducting psychoeducational assessments. Although IDEA requires an assessment of a child's social-emotional functioning when conducting an evaluation for special education eligibility, school psychologists may provide less attention to the assessment of these domains as compared to the assessment of cognitive functioning, as evidenced by patterns of frequency of test usage (e.g., Hutton, Dubes, & Muir, 1992; Kennedy, Faust, Willis, & Piotrowski, 1994). This situation is believed to exist for two primary reasons. First, the referral questions posed more often emphasize academic as opposed to social-emotional difficulty, thereby rendering simple frequency counts as misleading and, perhaps giving the impression of decreased importance of social-emotional or personality assessment for children in school settings. Second, limited attention is given to developing skill in personality assessment in specialist-level training programs (Culross & Nelson, 1997), as training is typically limited to one semester. A recent survey of school psychologists already in the field for five years (Fowler & Harrison, 2001) indicates that approximately 70% of those sampled would have preferred more training in personality assessment. Taken together, these reasons suggest that University-based training in personality assessment for school psychologists may be limited in scope, and consequently, practitioners may not feel competent in the use of these devices.

The situation for the child clinical psychologist is somewhat different, in that more attention is given to developing skills in personality assessment in the training program. The assessment of child and adolescent personality is often linked to the theoretical orientation of the psychologist, with behaviorally oriented practitioners favoring objective measures, and those who are psychodynamically oriented tending to prefer projective measures. Cognitive-behavioral practitioners often use behavior rating forms and self-report inventories, and generally eschew projectives. The main reasons appear to be the weak empirical validity of projectives (e.g., Lilienfeld, Wood, & Garb, 2001) and the perception that these

measures are associated with psychodynamic theory. This viewpoint is limiting in that studies strongly suggest (Mc Clelland, Koestener, & Weinberger, 1989) that objective and projective tests are each effective in the assessment of different aspects of functioning that do not appear to overlap. One implication of this work is that both types of assessment are needed to provide an understanding of personality. Objective tests more effectively assess self-attributed motives, which reflect characteristics that one tends to attribute to oneself, while projective tests more effectively assess implicit motives, which reflect long-standing patterns in one's psychological repertoire (Mc Clelland, et al., 1989).

In this paper, a view of personality assessment is proposed making that activity compatible with school psychology practice. This view will consider the current trend in school psychology toward greater evidence-based practice (Kratochwill & Callan-Stoiber, 2000), the desirability of treatment validity (Gresham & Witt, 1997) in practice, and qualify the concerns surrounding the psychometric properties of projective personality assessment (e.g. Batsche & Peterson, 1983), so as to ultimately propose a balanced perspective.

Considerations in Assessment Practice

School psychologists are in a unique position to assess children's social-emotional, or personality functioning. A plethora of data and techniques are available for this purpose. Anecdotal reports, school records, formal and informal observations, disciplinary data, interviews, as well as psychometric tests and projective instruments are used to accomplish this task. School psychologists are in the unique position of having ready access to historical information that can be used to delineate the assessment strategy and be incorporated into the conclusions drawn from the data. Considerable confidence may be placed in such evaluations because data are gathered over a period of years, resulting in conclusions drawn based on multiple observations. This access to data often lessens the need for intensive individual assessment, which is more commonly used in clinical psychology practice, as an individual is presented for

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assessment in a setting that does not have ready access to an array of resources. In those settings, the main use of personality assessment devices, as opposed to interviews, is to expedite the assessment process (Arnold, 1962).

Popular in current school psychological practice are behavior rating forms, and in particular, multiple informant devices that allow one to gather data from one or more respondents and integrate the information obtained, so as to provide a view of the child's functioning that reflects the view of significant adults in the home and at school, in addition to the child's perceptions of his or her functioning. One such instrument is the Behavior Assessment System for Children (BASC; Reynolds & Kamphaus, 1992), which for purposes of this discussion, will be used as a case in point. Those familiar with the BASC already know that considerable information may be obtained in regard to school and interpersonal functioning as well as areas of clinical difficulty. The efficiency with which the BASC can be administered and scored is highly valued by busy school psychologists. Independent reviews of the BASC have been favorable (Flanagan, 1995; Sandoval & Echandia, 1994).

Despite the large amount of information that multiple rating forms potentially provide, these data are limited to numerical levels of the constructs assessed, which are based upon scores reflecting the responses to a series of questionnaire items. These numerical levels (which may or may not be within normal limits) represent the impression of the rater, whether this is the child, a parent or a teacher. Information about the conditions that might lead to varying levels of these constructs is not readily provided, such as under which set of conditions will a child tend toward greater anxiety. Such contextual information may be obtained in an unsystematic manner by reviewing the responses to the scale that measures a particular construct by conducting an item analysis. In addition, constructs such as interpersonal relations, that reflect a skill rather than a quality of affect, such as anxiety, are usually assessed with rating scales. Again, highly useful information is obtained about the raters' perception of competency, but this is not a direct assessment of the actual skill.

A Role for Projectives?

Some school and clinical psychologists (e.g., Flanagan & DiGiuseppe, 1999; Ronan & Gibbs, 2000; Teglasi, 1998) are viewing projective methods in a positive manner. One application is to use

projectives in a performance-based context to assess problem solving (Teglasi, 1998). Consider the directions that are typically given when administering the Thematic Apperception Test (TAT; Murray, 1943). The respondent is presented with a picture that might be interpreted in various ways (referred to as ambiguity in the projective testing literature) and is asked to tell a story with a beginning, middle and an end, and to discuss what the characters are thinking and feeling. This bears similarity to someone being asked to solve a problem. It is highly desirable to know the process by which an individual solves problems. A more complete picture is provided when this information is taken in conjunction with the numerical levels of functioning obtained from an objective measure. Thus projective assessments, such as the TAT, might be used to gather what is tantamount to an observation of social problem solving in what now becomes a standard situation. This is a potential bridge connecting projective assessment to thinking processes and possibly real world functioning, as the antecedents and consequences of the event in question would be sought. This is in contrast to the more common use of the TAT by psychodynamically-oriented practitioners to explore and interpret the content of one's fantasy repertoire (Karon, 1981), as opposed to the study of overt behavior and skills.

The interpretation of assessment data so as to link assessment to intervention is compatible with school psychology practice in general, which advocates the use of a problem-solving model (e.g., Tilly, 2002). Ronan and Gibbs (2000) have already developed a manual for the Personal Problem-Solving System that provides scoring criteria for narratives provided by individuals for particular TAT cards. Their purpose in developing the manual was to specifically assess the problem-solving skills of depressed individuals, and have used the TAT as a means of evaluating the efficacy of cognitive-behavioral interventions for depression. Similarly, Flanagan and DiGiuseppe (1999) suggested that the data obtained from an assessment using the TEMAS Thematic Apperception Test (TEMAS; Costantino, Malgady, & Rogler, 1988) could be helpful in intervention planning. Moreover, such a conceptualization makes it possible for school psychologists to do the same thing as clinical psychologists who have a cognitive-behavioral theoretical orientation as a matter of course (e.g., DiGiuseppe, 1991), which is to link assessment to intervention. Teglasi (1998) outlined the notion that

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A Place for Projective Assessment in School Psychology Practice?

in order for personality assessment to be effective, it should ideally be viewed in an integrated context along with intervention.

Future Directions

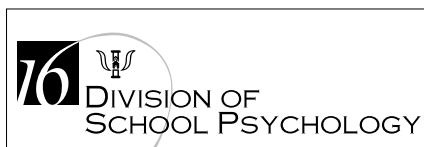
The use of projectives in school psychological practice was discussed at the meeting of the Trainers of School Psychologists, held at the NASP Convention. The panelists represented a variety of opinions ranging from opposing the use of these devices to recognizing that they have utility in some situations. The opinions were moderate, reasoned, and qualified. For example, no one suggested that projectives be used as the sole determinant of whether a youngster meets the criteria for severe emotional disturbance. Some suggested that projectives are useful when the youngster appears guarded, or uncomfortable with more direct methods of assessment, in that drawing and story telling are more play-like than test-like. Jack Naglieri offered a position that could be acceptable to many as he noted that what might be most important is the manner in which these devices are used. That position is also consistent with the more recent work of Garb, Wood, Lilienfeld, and Nezworski (2002), who have on other occasions been highly critical of projective assessment (e.g., Lilienfeld, et al., 2001). There is wide agreement that clinical judgment and skill are critical variables in the use of projective assessment, which was previously noted by Vane and Guarnaccia (1989), and who further noted that it is difficult to teach the clinical skills that guide the interpretation of projectives. The questions of the panelists and the comments offered during the discussion with the audience suggest that the sentiment of some present was that there is room for diversity of opinion and practice. The spirit of the discussion might be the importance of not losing sight of the limitations of the data, and to generate impressions accordingly.

There appears to be a place for varied opinions on the use of projectives. Admittedly, there is little research by school psychologists in this domain and perhaps there should be a research agenda to investigate the utility of the positions and ideas presented. Although a rationale for using projective assessment in school psychology practice has been offered, there has been no mention of how this might be done systematically. That is, a research agenda that could be compatible with the notion of evidence-based practice. The primary reasons to utilize projective assessments would not be to determine whether a youngster is anxious or

depressed, because rating scales are available that do such tasks effectively and in a psychometrically sound manner. However, projective assessments may have a role in providing supplementary information, so as to expand upon the data provided by objective assessment. The use of multiple strategies is not a matter of using a less valid device to support a more valid device, but rather a matter of using different types of devices to obtain different types of information. Among the possible types of information that may be obtained is information regarding reasoning, thinking, the processes invoked in executing specific behaviors, the conditions under which the behaviors in question occur, and whether these behaviors serve the child well or not. That variety of information is useful for informing treatment, differing markedly from the information that will assist in diagnosis, such as a score. The aim is to expand what is known so that therapeutic targets can be operationalized, facilitating a link to evidence-based interventions and their evaluation, and consequently suggest treatment validity for our assessment methods. Some may argue that similar information may be obtained by interview methods, providing the respondents are generally cooperative and forthright. Nevertheless, clinical judgment enters the picture in that the practitioner makes a determination of the value of the data obtained. However, what is the practitioner to do about the child who responds minimally to interview questions or the child who randomly fills in a questionnaire, but will tell a story when presented with a picture? Given the psychometric limitations of the interview process (Sattler, 1998), it seems appropriate to consider that research is needed to compare the utility of interviews and projective measures in different practice situations. In advance of sufficient research being conducted in this area, practitioners wishing to use projective assessments should consider using these in conjunction with objective assessments, keeping in mind the limitations of the data and reporting data in a manner that is appropriately qualified as to its limits. The issue then becomes more a matter of how projective measures are used rather than whether they are used at all.

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Postgraduate Training for School Psychologists: Where Art Thou?

Stephen Hyman
Adelphi University

The recent national conference on the Future of School Psychology sponsored by Division 16 of the American Psychological Association (APA) addressed many important directions that school psychology, as a profession, should be taking to meet the mental health and learning needs of children. Of course it is imperative that school psychologists continue to develop programs and extend services to the children, parents, and faculty with whom we work. In addition, we as a profession should be giving consideration to providing opportunities for practicing school psychologists to receive relevant, practical, advanced training to facilitate the ongoing personal and professional growth that is vital in this demanding profession.

Graduate school programs prepare school psychologists to develop the skills and knowledge required to understand and assess the psychological, neurodevelopmental, and educational functioning of children. We apply this knowledge to enhance the ways that children learn. As effective as graduate school training is, it is generally recognized that for school psychologists, as is true for most professionals, on the job experience leads to an expansion of roles and responsibilities. The evolving school psychologist often seeks further training to widen his/her professional talents. Advanced education is often found in courses, workshops, and conferences that are helpful and even inspiring but often are limited in scope. Some school psychologists enroll in postdoctoral or postgraduate programs. These are usually organized for mental health professionals who are interested in utilizing their skills in clinics, hospitals, or clinical private practice settings. But where are the comprehensive postgraduate programs that are specifically designed for school psychologists?

This article is intended to stimulate interest in advanced training opportunities for practicing school psychologists. Some questions that preface this topic are: Would practicing school psychologists be interested in enrolling in comprehensive postgraduate programs specifically for school psychologists who seek to expand their skills? Would they enroll in such programs at their own time and expense? And finally, if they are interested, where can they find programs that are relevant to the practical application of the many services they

are called upon to provide?

School psychologists enrolled in the one year Postgraduate Program in Psychodynamic School Psychology at Adelphi University are providing their answers to these questions. The experience of the participants in this program, which is now accepting candidates for its third year of classes, will be reported upon here. It is hoped that our model at Adelphi will motivate others to develop and to participate in similar programs. The Postgraduate Program in Psychodynamic School Psychology is, to my knowledge, the only program that is intended to provide comprehensive advanced training specifically for school psychologists who are currently working in the profession. The program's full enrollment of 12 candidates in each of its first two years of classes attests to the interest that exists for this kind of educational opportunity. Senior school psychologists who are analytically trained and who utilize a contemporary psychodynamically informed perspective in their work in the schools developed the program. Emphasis is placed upon translating psychodynamic understanding into recommendations, advice, evaluations, and decisions that are designed to be concrete and practical in schools. Ours is a psychodynamically oriented curriculum. Other theoretical orientations could also be the underpinning for relevant postgraduate programs.

School psychology is a stimulating, often frustrating, and always challenging profession. This awareness provided the impetus to design and implement the program at Adelphi. The fact that school psychologists are a daily presence in the lives of all of the children and families in our communities makes us a specialty that is quite unique in psychology. From this vantage point, we are often the mental health professionals who are called upon to respond, usually immediately and directly, to the ever-changing stresses, traumas, and motivators in our society. We personify psychology in action. With this concept in mind, the curriculum in the Adelphi Postgraduate Program includes courses, case seminars, and supervision based upon the recognition that a child's functioning in school is influenced by a number of factors including emotional, cognitive, social, neuro-developmental, familial and societal. The faculty includes school

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psychologists who have personal experience in adapting psychodynamic principles to the practice of school psychology. Continual focus is placed upon responding to the realistic world of the school psychologist.

In addition to the content of the courses, a significant benefit for candidates comes from the collegial interaction and support that is inherent in the program. Participants work in public, private, and special education settings. They see children at different grade levels, in suburban, urban, economically advantaged, and disadvantaged districts. They must respond to the needs of people from diverse ethnic and educational backgrounds. What a wealth of experiences the candidates bring with them! These experiences serve to stimulate and expand the professional development of all participants.

Class members have in common enough practical experience to recognize how demanding and isolated it can be in the "trenches" of the

schools. They have sought the program with an awareness of many job related stresses including:

Coping with the pressures of meeting the expectations of the many, often competing, voices that must be responded to daily in the school;

Managing the many resistances to change that are encountered from individuals and from the school institution itself;

Developing the ability to be an articulate collaborator and an effective team member;

Serving as an emotional container for the anxieties of the people we work with as well as for the extended school community; and

Establishing and maintaining a sensible, deliberative emotional environment in a setting that often presses for immediate action.

The combination of courses and case seminars that are both theoretical and clinical allows for a sharing of viewpoints and an exploration of alternative intervention strategies. Once a week class meetings over the course of a year fosters the

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development of respectful and stimulating collegial interchange. These features of the program afford the participants an opportunity to grow as school psychologists and as individuals. Indeed, embodied in the format of the program is a learning environment that fosters the development of the unique talents of each of the participants. It is fitting that school psychologists should learn and grow in the kind of nurturing environment that we strive to create in our schools.

The enthusiastic interest that the participating school psychologists have shown in the Adelphi

Postgraduate Program in Psychodynamic School Psychology should serve as a signal that practicing school psychologists are seeking professional advancement and are open to programs that focus on their daily work in the schools. This is a need that should be recognized by training institutes and should be welcomed as our profession grows to actualize the rich contribution we make to our schools and to our society.

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