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The School Psychologist

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In this column I ask you to contemplate a number of issues pertaining to assessment for screening purposes. For example: How should we as school psychologists be thinking and practicing with respect to screening for achievement, behavior, and mental health problems? And, what should we be doing professionally to advance the practice of school-based, screening-focused assessment in the interest of prevention and early intervention with these problems? Because screening is a critical foundation of school-based prevention, addressing these questions are more important than ever before. As illustrated in the following paragraphs, however, screening assessments, the resulting data, and support for the enterprise are not without complications.

Consider the following information and the range of concerns that it might raise: According to the results of the 2006 State of Connecticut School Health Survey of 6,600 high school students:

• one in six students reported being hit, slapped or physically hurt by a boyfriend or girlfriend
• 28% reported consuming five or more alcoholic drinks within a few hours time during the previous month
• and, one in eight students reported attempting suicide in the previous year

An initial consideration is that some people would rather we not have the information in the first place. Take for example the anti-screening campaign of the Citizen’s Commission on Human Rights. At the National Association of School Psychologists Convention in Anaheim this year, leaflets emblazoned with the words “Say NO Teenscreen…Stop drugging our children” were distributed by demonstrators outside the convention hotels. Why would anyone argue against mental health screening? According to a recent article on the website of the National School Boards Association entitled “There is a growing opposition to mental health screening at public schools”…some anti-screening groups, including the Church of Scientology and Concerned Women for America, view the programs as a government attempt to usurp parental authority and as a plot by pharmaceutical companies to expand their markets to school children. Another concern is indicated by a headline in the St. Louis Post Dispatch (Monday, December 12, 2005): Screening Prompt Fears of False Labels.

Other potential concerns include that such screening information could lead to some participating teens being prescribed psychotropic medication as part of a treatment regimen, or some of them being labeled as mentally ill, and finally that screening may lead to no follow-up whatsoever. There may even be some “kernels of truth” here, such as:

• the use of psychotropic medications in the treatment of children and adolescents in 2002 was five times more prevalent than a decade earlier (see Offuson et al., 2006)
• students, parents, teachers, and school administrators do not fully understand the purpose(s), use(s), limitations, and potential benefits of large scale screenings such as Teen Screen
• accepted professional screening practice typically does not lead to the provision of a diagnosis, but rather a recommendation of further professional evaluation and follow-up for those individuals indicated; however, we know very little about the adequacy and effectiveness of such follow-up activities—especially in terms of school psychology and school psychologists’ involvement.

Yet the picture is not all problematic. For example, a very important study appeared in the Journal of the American Medical Association last year (Gould et al., 2005). In the research reported, a team of researchers set out to examine whether asking about suicidal ideation or behavior during a screening program actually had problematic effects, such as creating distress or increasing suicidal ideation among high school students. The study involved more than 2000 students in New York State, divided into two groups: one completing a survey with suicide questions, the other a survey with no suicide questions. Primary results indicated the two groups did not differ on distress levels, rates of depressive feelings, or reports of suicidal ideation, either immediately after the survey or 2 days later. These results also held true for students considered to be at-risk for adjustment and mental health problems. The authors concluded there was no
evidence of iatrogenic effects resulting from the suicide screening, and that screening in high schools is a safe component of youth suicide prevention efforts.

Further, in a news release that accompanied the reporting of the aforementioned Connecticut data, it was reported that the researchers had found good evidence that parental monitoring can be a protective factor for adolescents. In that document, State Department of Education Commissioner Betty Sternberg, Ph.D. was quoted as saying “…Students who say that their parents usually know where they are turn out to be approximately 30% less likely to have attempted suicide, experience dating violence, have sexual intercourse or smoke marijuana, and 50% less likely to drink alcohol or smoke cigarettes.”

Group-level screening of students in our schools is critical to both the prevention of problems and early intervention with problems. It also is critical to the ability of school psychologists to improve student outcomes on a broad scale. School psychology and school psychologists have contributed to this activity with important work and tools. For example, many school psychologists now use Curriculum-Based Measurement and its derivative, the Dynamic Indicators of Basic Early Literacy Skills (see for instance Shinn, et al., 2002; Simmons et al., 2002) to screen for academic problems. Similarly, in screening for behavior problems we frequently see the use of the Systematic Screening for Behavior Disorders (Walker & Severson, 1999) tools. These and similar tools provide a solid foundation for screening related activities of direct relevance to students in our schools. However, more work remains to be done.

Future work should help us continue to evaluate and learn about barriers to screening and about how screening can lead to improved outcomes for children. I hope that as we conduct this work we will do so with a heightened awareness of the consequences (both positive and negative) of our screening efforts. Other important future considerations regarding screening include examining the language that we use, the types of follow-up that screening prompts, and the range of prevention and intervention options that result. Such efforts hold the promise of improving our collective abilities at prevention and early intervention with a range of problems experienced by children and adolescents.

References


Gifted Identification: Measuring Change in a Student’s Profile of Abilities Using the Gifted Rating Scales

Steven I. Pfeiffer, Alper Kumtepe and Javier Rosado
Florida State University

Abstract
This article reports on the application of a methodology to measure reliable student change over time using the Gifted Rating Scale. The Gifted Rating Scale is a new teacher rating scale based on a multidimensional model of giftedness. The methodology incorporates the standard error of prediction (SEp) model that takes into consideration regression effects and the reliability of the scales of the Gifted Rating Scales. Tables bracket Gifted Rating Scales posttest scores at the .90 and .95 confidence level to afford practitioners a choice with how certain they want to be that a student has demonstrated true change over time with one or more of the scales on the Gifted Rating Scales. A case example illustrates the use of the SEp table for the GRS-Preschool/Kindergarten Form. Implications are provided for best practices in gifted screening and evaluation.

One important element in serving the gifted is being able to accurately identify gifted students.

Recently, a new screening instrument has been developed for use in gifted identification, the Gifted Rating Scales (GRS; Pfeiffer & Jarosewich, 2003). The GRS includes a Preschool/Kindergarten Form (GRS-P) for ages 4:0 to 6:11 and a School Form (GRS-S) for ages 6:0 to 13:11. The GRS-P consists of five scales with 12 items each; the GRS-S consists of six scales with 12 items each. Developmental considerations were taken into account when designing the scale; the two forms share a similar format but item overlap is only 29%. The GRS-S includes a sixth, leadership scale.

The GRS is based on a multi-dimensional model of giftedness. The test incorporates the Munich Model of Giftedness and Talent (Zigler & Heller, 2000) and the typology that appears in the U.S. Department of Education Report, National Excellence: A Case for Developing America’s Talent (Ross, 1993). The scale is intended to complement an IQ test and other procedures used in gifted identification (e.g., auditions, portfolio review, nonverbal tests). Standardization of the GRS was co-linked to standardization of the new Wechsler Intelligence Scale for Children-Fourth Edition and Wechsler Preschool and Primary Scale of Intelligence-Third Edition.

Development of the GRS followed a carefully prescribed set of steps. Final item selection was guided by factor structure, item mean scores, consideration of parent education level, gender and ethnicity, inter-rater and test-retest reliability, and expert opinion.

What follows is a brief description of each of the scales: The Intellectual Ability scale measures a teacher’s perception of a student’s verbal and/or nonverbal mental skills, capabilities, and intellectual competence. The Academic Ability scale measures a teacher’s perception of a student’s skill in dealing with factual and/or school-related material. The Creativity scale measures a teacher’s perception of a student’s ability to think, act, and/or produce unique, original, novel or innovative thoughts or products. The Artistic Talent scale measures a student’s potential for, or evidence of ability in...
drama, dance, drawing, singing, and/or playing a musical instrument. The Leadership Ability scale measures a student's ability to motivate others toward a common or shared goal. Items rate understanding social dynamics and displaying strong interpersonal communication and conflict resolution skills. The Motivation scale refers to a student's drive or persistence and ability to work well without encouragement. The motivation scale is not viewed as a measure of giftedness.

Each item is rated on a 9-point scale divided into three ranges: 1-3 Below Average, 4-6 Average, and 7-9 Above Average. The authors provide a classification system that indicates the likelihood that a student might be gifted, based on their T scores. The GRS does not presume to determine whether the child is gifted or not. The higher the student's T score on one or more gifted scales, the higher the probability that they are gifted. A T score below 55 (below 69%) indicates a low probability of being gifted, a score between 55-59 (69-83%) moderate probability, a score between 60-69 (84-97%) high probability, and a score above 70 (98+%) a very high probability. The manual emphasizes that test users should always look for other evidence to corroborate a classification of gifted, consistent with the guidelines in Standards for Educational and Psychological Testing (AERA, 1999). An analysis of the national standardization sample employing diagnostic efficiency and receiver operating curve statistics supports the validity of this classificatory scheme, particularly the intellectual and academic ability scales (Pfeiffer & Jarosewich, in press; Pfeiffer, Petscher, & Jarosewich, in press).

**Purpose of the Study**

In screening and evaluating gifted students, school psychologists frequently find that one or more academically precocious students come close but do not quite make the district or state cut-score. In other instances, a student may be on the bubble with a lack of corroborating evidence to support classifying the student as gifted. Quite often, typically underrepresented groups of gifted students—those who come from families where English is not the primary language spoken in the home, those from rural and/or low income families, and those of color— seem to show exceptional promise and yet do not score high enough on traditional measures to qualify for gifted programs (Ford, 1998; Naglieri & Ford, 2003; Pfeiffer, 2001).

The above diagnostic issues illustrate the dilemma that school psychologists often face with the uncertain decision of what to do when a bright student does not qualify for a gifted classification. In addition, school psychologists are uncertain how to measure change resulting from attending a gifted program. For these reasons, we developed statistically and conceptually sound, and easy-to-use, tables to augment clinical decision making in those instances when one is evaluating change using the GRS scales.

**Method**

The methodology that we adopted is based on comparing a student's original GRS scale score(s) with a range of scores that take into account the variability expected by both regression to the mean and measurement error. We calculated standard error of prediction (SEP) scores to create confidence bands for T scores so that practitioners could compare a second set of GRS T scores with an original set of T scores. We used the SEP rather than the SEM because it is preferable in providing an unbiased estimate of population measurement error (Atkinson, 1991).

Technically speaking, a student's obtained score on any measure is not the best estimate of her/his true score because of the phenomenon of regression toward the mean (Lord, 1956). SEP-based confidence bands are bracketed around a student's predicted true score and not around her/his obtained score because of the pernicious phenomenon of regression toward the mean. This phenomenon is common in gifted assessment because students typically score at or near the ceiling. Following the formula provided by Atkinson (1991), we calculated the SEP for GRS T scores,

\[ SE_p = SD \sqrt{1 - r} \]

where the SD is 10 and r is the internal reliability coefficient (Cronbach & Furby, 1970) for each GRS scale. The GRS reports high levels of internal consistencies across both forms, with r's ranging from .97-.99 for all GRS-P and GRS-S scales across the entire age range (Pfeiffer & Jarosewich, 2003). We then multiplied the SEp by 1.64 (90% level of significance) and by 1.96 (95% level of significance) to obtain a range of T scores that bracket the estimated true score at the .10 and .05 levels of significance. Posttest confidence ranges were calculated for scores ranging from a T score at the mean (50) to a T score three SD above the mean (80). These values appear in Table 1 for the GRS-P.
Participants

Data used to generate Table 1 was obtained from the GRS standardization sample. The Psychological Corporation provided the authors with data files that included the data for the entire GRS standardization sample. The sample consisted of 975 children selected from across the country to match the U.S. census by ethnicity and by parent education level (U.S. Bureau of the Census, 2000). More detailed information on the standardization sample is available in the user manual (Pfeiffer & Jarosewich, 2003).

Using the GRS to Measure Change

Table 1 provides posttest confidence ranges for GRS-P pretest-posttest T score comparisons. The Table provides initial or pretest T scores ranging from the mean to 3 SD above the mean. As mentioned above, the GRS reports high levels of internal consistencies across both forms, with r’s ranging from .97-.99 for all GRS-P and GRS-S scales across the entire age span, 4:0-13:11 (SEM’s ranged from 1.0-1.73) (Pfeiffer & Jarosewich, 2003, pp. 29-30). In creating the posttest confidence ranges, we used the decision rule of providing the most conservative confidence range (i.e., we always used the lowest reported internal reliability coefficient for a given scale when the reliability coefficient varied by age).

To use the Table, first determine which scale(s) the child’s teacher rated. For example, assume that you are working with a kindergarten student. In early fall, her teacher completes a GRS-S record form, and she obtains a T score of 65 on the Academic Ability scale. Assume further that the school district has agreed that a GRS cut score of T ≥ 70 on the Academic Ability, Intellectual Ability or Creativity scale is the minimal criterion to ‘trigger’ a comprehensive gifted evaluation. The teacher completes a second GRS-P in the spring and the student now obtains a T score of 70 on Academic Ability. Table 1 allows the user to determine whether this student’s second score demonstrates real change. Table 1 brackets posttest score confidence ranges at two levels of confidence (.95 and .90). The far left and right columns provide initial T scores. Recall that the student originally obtained a T score of 65 on Academic Ability. We first find the T score of 65, and then locate the column with the confidence range we want to use. Assume that we have decided a priori to use a .95 confidence level for gifted screenings. For an initial T score of 65, the posttest confidence interval for Academic Ability is 60-69. In this instance, the student’s most recent T score of 70 on Academic Ability falls outside the SEp range. We can conclude, with 95% confidence, that the student’s second score is different from her original score. In addition, the student’s new score meets the criterion to trigger a more comprehensive gifted evaluation.

The following hypothetical case illustrates the application of the SEp methodology. The case is fictitious; however, it is based on the use of this methodology in an actual school district. This case highlights the use of the GRS as a screening tool. The gifted coordinator of an urban school district was concerned that, over the past few years, the numbers of students referred for gifted consideration had declined. Of particular concern was the fact that very few minority group students were referred for the gifted program. In consultation with a university faculty member (the first author), the gifted coordinator invited the kindergarten teachers to complete the GRS-P on all their students. In addition to the GRS-P, teachers were asked to submit one classroom product per student that depicted each student’s “academic or intellectual ability.” A gifted screening initiative committee that consisted of a school psychologist, two first grade teachers, the university faculty member, and the district gifted coordinator was formed.

The committee developed a simple rubric to rate each of the student products on a scale of 1-4. It was decided that any student who obtained a 3 or 4 on the rubric and a T score ≥ 60 on either the GRS-P Intellectual or Academic Ability scales (“high probability” GRS classification) would be recommended for a more in-depth gifted evaluation (a group nonverbal test and an individual, short form IQ test). The committee predicted that 10-20% of kindergarteners would be identified by this screening procedure.

Thirteen percent of the kindergarteners qualified as a result of the screening procedure. However, a small group of students obtained 4’s on
### Table 1
**GRS-P Posttest Confidence Ranges for Pretest-Posttest T-score Comparisons**

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Note: 90% CI = 90% confidence interval; 95% CI = 95% confidence interval
A single test score should never be used alone in making any diagnostic or classificatory decision (Pfeiffer, 2002). The case of Javier illustrates the obvious benefit of using multiple screening measures.

Javier, a six-year-old, 1st generation Hispanic male, qualified for a gifted classification system (Petscher & Jarosewich, in press; Pfeiffer, 2002). Interestingly enough, only four states, Hawaii, Pennsylvania, Virginia and Washington, refer to the use of multiple criteria for gifted identification (Stephens & Karnes, 2000). There is no one best test or test battery for screening or classifying gifted. Authentic assessment, review of portfolio material, auditions, tryouts and interviews complement teacher ratings in providing important data when used as part of a comprehensive gifted evaluation.

Discussion

An issue that has generated considerable discussion in the measurement literature is the topic of just how much change is needed to be considered meaningful. The question addresses the practical importance of statistical effects. The child therapy literature has grappled with this conceptual issue— even large effect sizes can be clinically insignificant (Jacobson, Roberts, Berns, & McGlinchey, 1999).

Gifted classification systems are not nearly as refined or researched as the multi-axial DSM classification system. It remains difficult demarcating exactly where normal ends and abnormal begins (one reason for the category subclinical). Presently, the distinction between gifted and not gifted is even more blurry. This is an important challenge facing the gifted field (Gagné, 1998; Pfeiffer, 2003).

The GRS classification system indicates the likelihood that a student might be gifted. The higher the student’s T score on one or more of the scales, the higher the probability that they are gifted in that domain. The classification system proposes that a T score below 55 (below 69%) is unlikely to reflect giftedness; a score between 55-60 (69-83%) suggests moderate probability; a score between 60-69 (84-97%) high probability; and a score above 70 (98%) very high probability. To be considered diagnostically meaningful, the second T score should exceed the posttest confidence range and be ≥ 60 (high probability) or ≥ 70 (very high probability of gifted). Recent validity studies provide preliminary validation for this gifted classification system (Pfeiffer & Jarosewich, in press; Pfeiffer, Petscher & Jarosewich, in press; Ward, 2005).

A single test score should never be used alone in making any diagnostic or classificatory decision (Pfeiffer, 2002). The case of Javier illustrates the obvious benefit of using multiple screening measures. Overall predictive accuracy is increased with the use of technically sound multiple measures (Pfeiffer, 2002). Interestingly enough, only four states, Hawaii, Pennsylvania, Virginia and Washington, refer to the use of multiple criteria for gifted identification (Stephens & Karnes, 2000).
References


Single-Session Treatment: A Counseling Paradigm For School Psychology

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Abstract
A paradigm shift to focus on single-session treatment is suggested in this article, addressing the long evident gap between the expressed desire of school psychologists for more emphasis on counseling services and the reality of what is now required in the typical workday. The authors, two practitioners and a practitioner-trainer provide support for the efficacy of a single-session delivery model along with an adaptation of an RTI approach to determine when outside referral is warranted.

The delivery of counseling services is among the continuing dilemmas in the practice of school psychology. Although clearly not our primary service responsibility (Bramlett, Murphy, Johnson, Wallingsford, & Hall, 2002) practitioners say they want to increase the prominence of counseling in their work (Hosp & Reschly, 2002) and in fact have been expressing this desire for more than a decade (Reschly & Wilson, 1995).

Other education professionals (Gilman & Gabriel, 2004) see the delivery of counseling services as an appropriate task for the school psychologist. In a recent survey of pre-service teachers (Astramovich & Loe, in press), the school psychologist was identified more often than the school counselor as the professional in the school most likely to provide mental health counseling.

If a substantial number of practicing school psychologists would like to spend more time in the delivery of counseling services, and if other education professionals see this as an appropriate activity for the school psychologist, why isn’t it happening? The obvious answer, not enough time in the workday, is most likely the correct answer. Practitioners cannot ignore commitments to other vital services. Extending the workday to allow more attention to counseling services is not a viable option.

The intent of this paper is to suggest that there is another choice, an approach that could help resolve the dilemma about how counseling services can be integrated into, and receive more attention in, the practice of school psychology. It is not a new idea, but does require re-framing of typical views about the nature of counseling, and perhaps generalizing the response to intervention (RTI) concept to the delivery of counseling services.

The essence of this approach rests on:

• The viability of a single-session modality as the foundation of counseling service delivery in a school psychology practice, and
• The utility of an intervention response criterion to determine when or if a referral to an outside professional is warranted.

To have only one counseling session with a student in a school setting is not particularly unusual, nor is being attentive to the response to an intervention. Unique in this approach, however, is that one session is suggested as the target for all counseling interventions in the school setting with the student’s response to the session as the determining factor for what comes next.

The Problem
Fagan (2002) stated that specific roles and functions of the school psychologist now include early childhood assessment, child abuse, crisis intervention, vocational and career development, reading disabilities, curriculum based assessment, giftedness, secondary and post secondary settings, among other areas, in addition to traditional services.

As an example, I (William) have multiple schools, and I am also on my region’s crisis team. At one of my assigned schools, a high school with approximately 3000 students, it is typical to have two or three students a week come to see me about a “crisis”, in addition to those students on the referral or working list. Between meetings, assessments, working with behavioral problems, classroom interventions, and students referred with difficulties, many additional students seek me out for assistance. Often they have already spoken with...
teachers and/or a counselor, but they want to talk to the school psychologist. Some of the students who have come to me have expressed that it is now “cool” or “in” to have a consultation with the school psychologist. While I am glad that seeking assistance is being seen more often as socially acceptable, this only adds to the problem of having enough time to do my job well.

As a school psychologist working in the elementary schools, I (Renee) also see many children who need various levels of mental health interventions and services. I have made it a point to conduct groups once per week with students who need social skills or anger management training. Unfortunately, my caseload does not leave me with enough time to do more extensive mental health interventions. I spend the majority of my time assessing students for special education. Many teachers approach me about students who are clearly in need of counseling, but I am unable to do much more than consult with the teachers on these cases.

A Potential Solution

Single-Session Treatment

Clearly, given a traditional view of counseling and how it should be delivered, there simply is not enough time for increased attention to this service. Even the newer brief modalities typically assume scheduling at least five individual sessions. Our experiences are typical; there is not enough time available.

Perhaps the need, then, is to challenge the traditional view of what is required to provide an effective counseling intervention, particularly in the school setting. A surprisingly well-kept secret in the delivery of counseling services is the extent to which appropriate assistance can be accomplished in a single counseling session with perhaps only a very brief follow-up encounter to monitor progress (Silverman & Beech, 1984). Even in traditional counseling, a remarkably large number of clients do not return for a second session, reporting that the initial session was sufficient to allow them to comfortably return to their regular lives (Talmon, 1993).

Single-session counseling approaches have demonstrated efficacy in a variety of settings with a variety of problems. For example, Curtis, Whitaker, Stevens, and Lennon (2002) noted the utility of the single session in the context of a family systems model. A single-session intervention was effective in treatment of earthquake-related posttraumatic stress disorder (Basoglu, Salcioglu, Livanou, Kalendal, & Acar, 2005). Patterson, Shaw, and Semple (2003) found that a single-session behavioral intervention significantly increased the frequency of safe sex practices in persons who were HIV positive. Paniak, Toller-Lobe, Reynolds, Melnyk, and Nagy (2000) found that a single-session educational and reassurance-oriented intervention was as effective as a more extensive rehabilitation counseling approach in treating patients with mild traumatic brain injury. McCambridge and Strang (2004) concluded in a multi-site study that a single-session treatment using motivational interviewing was effective in reducing substance abuse. Littrell, Malia, and Vanderword (1995) studied the effectiveness of single-session counseling in a high school setting and reported success in perceived goal attainment and in reducing self-reported distress levels.

Our suggestion is not for the single-session approach to be just another tool in the repertoire, but that it would become the primary approach to service delivery. In effect, the school psychologist would structure each initial counseling intervention session as if there would be only one primary treatment session. The goal in the session would be to create conditions for essential problem solving in that session with intent that this would be followed only by a brief follow-up to monitor progress and reinforce positive responses.

A view of counseling as a series of weekly 45-50 minute sessions is well ingrained, both as portrayed in the popular media and perhaps in the training program. But, this “dosage rate” does not rest on a solid base of empirical investigation. The approach being recommended here appears particularly well suited for the time constraints in school-based practice. Clearly, most school psychologists do not have time available to commit to a series of traditional counseling sessions. A structure for intervention, however, that requires a single session without a 50-minute time limit and a follow-up that could be as short as 5-10 minutes is a very different story.

In a large scale study, Frank and Frank (1991) concluded that successful outcome of counseling (therapy) appears to rest on only three key factors or “active ingredients.” These three factors could be identified as the “3 Rs” of successful counseling: relationship, re-framing, and ritual.

...successful outcome of counseling (therapy) appears to rest on only three key factors or “active ingredients.” These three factors could be identified as the “3 Rs” of successful counseling: relationship, re-framing, and ritual.

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effective, it is essential for the clinician to build a therapeutic alliance, communicating factors such as empathy, genuineness, and unconditional positive regard.

The re-framing factor involves helping the individual to see possible solutions rather than insurmountable difficulties, and the third factor, the ritual, requires creating a condition in which the individual experiences more than just a conversation with a friend who is a good listener.

Arguably, each of these three conditions can be accomplished in a single treatment session. Quickly establishing sufficient rapport for a student to provide maximum performance on a cognitive test is a standard practice for the school psychologist and is conceptually quite comparable to the condition in counseling termed the “therapeutic alliance.” A variety of problem-solving strategies are available with a common theme of creating conditions so the student sees the problem in a different light. The “something different” in the ritual factor can be accomplished in a number of ways, including the closure activities of written message (Sklare, 1997) or a written “prescription” (Jones, Crank, & Loe, in press).

Accepting this approach does bring a dimension of urgency to the role of the school psychologist in conducting a counseling session. The luxury of allowing treatment goals to emerge over a series of sessions is replaced by a requirement for the goals to be formulated early in the initial session. Skillful communication of the empathic understanding necessary to establish a therapeutic alliance and identify the needed change must begin immediately. An alliance strong enough to allow probing and sometimes confrontation to clarify and specify the specific goals must be developed early in the session.

Critics may contend that the outcome of this pressure would be a premature focus on surface problems, ignoring deeper, severe underlying issues. We believe that the likelihood is contingent on the skill of the school psychologist and is not an inevitable or even likely outcome of the method. We also believe that the question itself rests on an assumption that counseling should be a one time event during which all current and potential problems are identified and solved before the process is terminated. If counseling is conceptualized instead as a resource made available when there is a need, a student who returns later for assistance with a different problem is evidence of the success of the initial intervention.

Predictions of disastrous results when a more focused therapy approach is implemented date back to when alternatives to Freudian psychoanalysis were emerging. Evidence of negative outcomes, including substitution of more serious symptoms, is remarkably absent (Paul, 2001).

**Intervention Response**

Obviously, not all interventions can be accomplished with a single-session limitation. The argument here is to conceptualize counseling services in the practice of school psychology as a single session plus a brief follow-up, with the expectation that a referral to an outside provider could then occur if treatment goals are not met.

A critical question is when an outside referral is warranted, and the literature in our field is surprisingly silent regarding guidance for referrals. It is typical, for example (Adelman & Taylor, 1997), to emphasize the importance of linking schools to community mental health services to facilitate referrals. Referring is recommended (Maguire & Guishard-Pine, 2005) when there are psychiatric disturbances, particularly with evident risk of harm to self or others, that go beyond the scope of the practitioner’s capabilities in either time or training. What is missing is guidance for those cases in which the school psychologist clearly has the skills to provide the service, and the question is whether it is appropriate to do so.

The RTI model for disability determination has emerged as a major source of discussion and debate in our discipline, frequently depicted in a framework with three tiers for levels of needed intervention (Hopf & Martinez, 2006). Borrowing this framework for a mental health perspective, the first tier could represent the majority of the school population, children and adolescents who do not present with mental health needs. The middle tier includes cases in which there is uncertainty about whether the needs can be sufficiently addressed in the school setting. In the top tier are the students whose mental health needs are so extensive that it is clear from the beginning that they require more services than the school could provide.

The question about when to refer thus primarily relates to those in the middle tier. The answer, essentially comparable to what is being proposed in the basic RTI approach, is that the need for referral is contingent primarily on the student’s response to the single-session treatment.
Summary and Discussion

Kuhn (1962) defined a scientific paradigm in terms of what is to be observed, the kinds and structure of questions to be asked, and how the answers are interpreted. As school psychology practitioners and trainer-practitioner, we believe the time has come for a paradigm shift in the delivery of counseling services. If we continue to interpret counseling as a process that requires a lengthy time commitment, multiple weekly sessions in 45-50 minute segments, school psychologists in the year 2020 are likely to continue wanting to do more counseling but being unable to find the time. More importantly, many children and adolescents who could have benefited from the services will be left to cope on their own.

A single-session modality is feasible with a variety of counseling theories. The theory guides the goal development and the role of the provider, not the number of sessions required for the goal to be attained. Even in a busy practice it is usually possible to set aside 60-00 minutes for an extended single-session treatment session with a follow-up often requiring as little as 10-15 minutes. The support for such an approach is in the literature. We simply have to change the way we think about what is to be observed, how we structure the session, and how we interpret the data that emerge from it. Consistent with our training and the tenets of our profession, we make decisions about referrals based on measurement of the treatment outcomes, not on the basis of how busy we are.

In an ideal setting, there would be a system that is just as effective for helping and/or referring students for mental health issues as there is for students who are struggling with academic issues. We believe that making a single-session approach the goal and the norm for the school psychologist in delivering counseling services would be an important step toward the ideal.

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References


“Consistent with our training and the tenets of our profession, we make decisions about referrals based on measurement of the treatment outcomes, not on the basis of how busy we are.”
New Supreme Court Ruling: Schaffer v. Weast

Linda Caterino, Arizona State University, Amanda Sullivan, Arizona State University & Nicole Kulhavy Siqueiros, Maricopa County Superior Court

In the 30 years since the Education of all Handicapped Children Act (PL 94-142, 1975, now the Individuals with Disabilities Education Act [IDEA], PL 105-17, 1997) was enacted, the United States Supreme Court has heard few special education cases (Board of Education v. Rowley, 1982; Honig v. Doe, 1988; Cedar Rapids v. Garret F., 1997, etc.). On November 14, 2005, the Supreme Court made a controversial 6-2 ruling in the case of Schaffer v. Weast (126 S. Ct. 528), which is expected to have a substantial impact on school psychological services and special education law in the years to come. This case concerns to burden of proof in due process hearings, which is not addressed in IDEA. The November Supreme Court ruling holds that the burden of proof rests with the party seeking relief, whether it be the parents or the district, in due process hearings.

In the case involved Brian Schaffer, a student diagnosed with Attention Deficit Hyperactivity Disorder, learning disability, and speech/language impairment. Brian attended a private school from pre-kindergarten through seventh grade when school staff suggested to Brian’s parents that he needed to attend a school that might better meet his needs. Private evaluators agreed and recommended that Brian attend a “small, self-contained, full-day special education program.”

In November 2005, the Supreme Court held that “The burden of proof in an administrative hearing challenging an IEP is properly placed upon the party seeking relief” as it is in other legal proceedings, in an opinion written by Justice Sandra Day O’Connor. While the parents argued that having the school district carry the burden of proof would ensure that the child would receive a free and appropriate education, Justice O’Connor noted that IDEA has been repeatedly amended in Congress to ensure that it is appropriate for all children with special needs and to lower administration and litigation fees. The Court rejected the argument that placing the burden on the party seeking relief would work against the parents. Justice O’Connor acknowledged that while school districts do have a “natural advantage” in information and expertise over parents, IDEA provides a number of procedural safeguards to parents which operate to counterbalance such advantages.

In dissenting opinions, Justice Breyer stated that the burden of proof decision should be left to the states, and Justice Ginsburg argued that the burden of proof should rest with the district in all cases in order to “strengthen school officials’ resolve to choose a course genuinely tailored to the child’s individual needs.” Justice Ginsburg went on to comment that the district has the natural advantage when a dispute arises since it has better access to relevant information, greater expertise, and an affirmative obligation to provide the contested services. She also noted that, “Understandably, school districts striving to balance their budgets, if left to own devises, will favor educational options that enable them to conserve resources. School districts are charged with responsibility to offer to each disabled child an individualized education program (IEP) suitable to the child’s special needs.

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In the winter 2004 and winter 2005 issues of TSP, various luminaries debated the merits and limitations of the response to intervention (RTI) approach for determining eligibility for specific learning disability (SLD) under the IDEA. The two major and overlapping issues of disagreement were whether and, if so, to what extent 1) “psychological disorder” and 2) standardized testing each play a role in this determination. The discussion was not sufficiently informed with regard to the legal dimension of these two intertwined issues.

The interchange between the two sets of professional experts represents converse and questionable legal interpretations. For example, in the opening salvo, Hale, Naglieri, Kaufman, and Kavale (2004) referred to the “guidelines” of IDEA 2004 (pp. 6 & 9) in asserting that “[e]stablishing a disorder in the basic psychological processes is essential for determining SLD” (p. 9) and that “the only way that practitioners can adhere to the requirements of the law and document deficient psychological processes is to administer individual cognitive and/or neuropsychological measures” (p. 13). In response to the first of these two points, Fletcher and Reschly (2005) maintained that psychological processes disorder, while part of the “federal statutory definition of SLD (34 C.F.R. 300.7),” is not mandatory because it is a conceptual model separate from the identification criteria in “the regulatory definition adopted by most states in 1977 (34 C.F.R. 300.541)” (p. 12). In response to the second point, they contended that a reasonable interpretation of the relevant evaluation regulations do not require a “comprehensive evaluation” or even in-depth cognitive measures except to the extent that “screening information suggests mental retardation” (p. 14). They also interpreted the “inadequate instruction” exclusion in the present IDEA regulations as requiring “assessments of the student’s RTI” (p. 10). In their subsequent rejoinder, Kavale, Kaufman, Naglieri, and Hale (2005) clarified, without legal exegesis, that “our position does not assume that cognitive assessment … is a … requirement under IDEA” (p. 16) and “[w]e understand that the assessment of psychological processes is not mandatory under IDEA, but are suggesting that it should be in order to align the definition of SLD with methods used to identify these children” (p. 18). Perhaps the explanation is that they had merged their views as to legal requirements and professional norms in the opening assertions.

Similarly, in the parallel interchange, an overlapping pro-RTI group of Gresham et al. (2005) —at least in partial contradiction to the aforementioned position in Fletcher & Reschly (2004)—interpreted the IDEA as requiring a comprehensive evaluation for determining SLD eligibility, but they remained consistent in their position that the IDEA does not require “assessment of cognitive or perceptual processes as part of determining SLD eligibility” (p. 26). Indeed, they asserted that the 1977 IDEA SLD regulation effectively “rejected” (p. 27) such assessment, and, except to the extent they play a role in the exclusion for mental retardation, norm-referenced objective measures of cognitive processes are not part of the “RTI core in the comprehensive evaluation of SLD” (p. 28). In their response on behalf of the American Academy of School Psychology, Schrank et al. (2005) pointed to the unchanged statutory definition of SLD, which includes “the characteristic marker” (p. 31) of a processing disorder as legal support for their endorsement of an SLD identification approach that combines “psychometric measures of the basic cognitive processes” (p. 32) with RTI.
Basic Legal Principles

An impartial legal assessment of these various positions warrants a primer of basic legal sources. First, legislation has primacy over regulations. The regulations may, within the bounds of the enabling legislation, supplement but not supplant the legislation.

Second and similarly, in areas of overlapping authority such as special education, federal laws are supreme with regard to any conflicting state laws. Thus, as the IDEA’s administering agency has repeatedly recognized in its policy letters (e.g., Letter to Hartman, 1989; Letter to Lillie, 1990), state laws—whether statutes or regulations—may add to, not subtract from, the protections for students with disabilities established by the IDEA.

Third, legislative history, which consists of the transcribed statements on the floor and in the committees of the House and Senate, is a recognized source of interpretation of legislation where the language is ambiguous or silent.

Fourth, OSEP interpretations—whether the commentary accompanying the IDEA regulations or subsequent policy memoranda or letters—do not have the force of law; rather, although courts may defer to the agency’s expertise and find them persuasive, their weight is left to the courts’ discretion (Zirkel, 2003).

Fifth and conversely, under the IDEA, the published case law, initially from hearing and review officers and ultimately from courts, resolves the ambiguities and fills the gaps as applied to specific factual circumstances. The doctrine of stare decisis, or precedent, establishes the legal force of these decisions.

SLD Legislation, Regulations, and Case Law

Next, as detailed in a recent monograph (Zirkel, 2006), is the application of these basic principles to the legal demarcation of SLD eligibility under the IDEA. SLD is the only IDEA classification that the legislation defines. Said definition expressly refers to “a disorder in one or more of the basic psychological processes involved in understanding language” (IDEA, § 1402(30)). The rest of the definition specifies certain included and certain excluded disorders while explaining that “the disorder may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations.” The 2004 amendments left this definition unchanged.

In the original 1975 legislation, Congress required the development of regulations to establish criteria and procedures. The resulting regulations started by repeating the statutory disorder definition, including the disorder-related exclusions. Next the original regulations, which remained unchanged until the presently proposed version, set forth the discrepancy criteria, including seven areas that did not exactly square with the statutorily specified areas; for one quick example, spelling is not included. Finally, the regulations recited for all the recognized classifications, including SLD, the second essential element of the statutory definition of “child with a disability,” which is “by reason thereof, needs special education” (IDEA, § 1402(3)(a)).

The 2004 amendments of the IDEA, as its legislative history makes clear, represents a compromise in light of the increasing but incomplete knowledge base, neither prohibiting the use of the discrepancy model “if an LEA [so] chooses” (e.g., S. Rep. No. 108-85, 2003, p. 26) nor requiring the use of the RTI model. More specifically, the amendments provide that “[w]hen determining whether a child has [SLD] as defined under this Act, the local education agency shall not be required to take into consideration whether the child has a severe discrepancy between achievement and intellectual ability in [the seven enumerated areas]” (IDEA, §1414(b)(6)(A)). Conversely, the amendments expressly permit the LEA to “use a process which determines if a child responds to scientific, research-based interventions” (IDEA, §1414(b)(6)(B)).

As provided in more detail elsewhere (Zirkel, 2005), the proposed regulations go notably farther than the statute toward RTI and away from severe discrepancy. They do not even expressly mention severe discrepancy, with the closest language being the option in proposed § 300.309(A)(2) for “a pattern of strengths or weaknesses relative to intellectual development, that is determined by the team to be relevant to the identification of [SLD], using appropriate assessments consistent with [the evaluation regulations]” (IDEA proposed regulations, 2005, p. 35,864). On the other hand, for example, the proposed § 300.309(b) would require in any event at least a partial RTI process including “appropriate high-quality, research-based instruction in regular education settings … by [NCLB-qualified personnel] and ”[d]ata-based documentation of repeated assessments of achievement at reasonable intervals … during instruction” (IDEA proposed regulations).
Finally, a systematic analysis of the relatively extensive case law in the form of more than 80 published hearing/review officer and court decisions to date reveals that severe discrepancy has been the most frequent decisional factor in the legislative-regulatory framework, playing a primary role in 66% of the decisions (Zirkel, 2006). The next two most frequent factors, in terms of playing a primary role, were the need for special education (19%), the inadequate-instruction exclusion (15%), and the disorder of psychological processes (8%). In terms of playing a primary or secondary role, the disorder factor was second (24%) to severe discrepancy (78%), with the need for special education and the inadequate-instruction exclusion accounting for 22% and 19% of the cases, respectively.

**Legal Assessment of Competing Positions**

As a relatively objective observer who—in contrast to the contending experts—is a legal specialist serving in a regular, albeit part-time, role as an impartial IDEA review officer, I find that the cited views are not sufficiently legally accurate. First, the pertinent provisions of IDEA 2004 are not “guidelines.” It is not clear whether the House and Senate had passed their respective versions at the time that Hale et al. (2004) wrote their position and whether the conference committee and President had acted at the time that Fletcher and Reschly (2005) reiterated the reference to guidelines in their rebuttal, but both before and after those final actions, the provisions were not guidelines. Second and related thereto, both before and after those final actions, the disorder language was an unchanged part of the statutory definition, thus having the binding force of legislation. Contrary to Fletcher and Reschly’s (2005) aforementioned assertion, this statutory definition—for which they cited the regulation rather than the legislation, probably because the regulation repeated the same language—is not superseded by what they confusingly referred to as “the regulatory definition adopted by most states” (p. 12). Rather, as an OSEP interpretation (Letter to Kennedy, 1990) opined and the case law (Zirkel, 2006) makes clear, they are partially correct that the disorder component is not mandatory, to the extent that other decisional factors, such as severe discrepancy or the need for special education, have played a proxy or ultimate role in terms of SLD eligibility. However, the hearing/review officers and courts have not generally adhered to the academic view of Fletcher and Reschly (2005) and others (e.g., Torgesen, 1979) that the classification criteria preempt the conceptual model; instead, the legislative definition and the regulatory form a framework or menu of decisional factors.

Third, the larger Gresham et al. (2005) group, rather than the Fletcher and Reschly (2005) subset, is closer to the mark in concluding that the IDEA requires a “comprehensive evaluation” for SLD eligibility. The present regulations require an evaluation “sufficiently comprehensive to identify all areas of the child’s special education and related services needs, whether or not commonly linked to the [child’s] disability category” (IDEA regulations, §300.532(h)) as well as mandating a “full and individual evaluation” (§ 300.531); “a variety of assessment tools and strategies” (§§532(b)); “no single procedure” (§ 300.532(f)); assessment “in all areas related to the suspected disability” (§ 300.532(g)), and the various additions for SLD, such as a specified classroom observation (§ 300.542).

The proposed regulations do not change any of these general evaluation requirements while fine-tuning the SLD additions, such as strengthening the specifications for the classroom observation (IDEA proposed regulations, 2005, p. 35,865).

Fourth, the verdict is mixed with regard to the use of what the commentators have variously referred to as standardized or in-depth cognitive assessments. The present regulations specifically mention standardized tests only in terms of requiring validation and training for “[a]ny standardized tests that are given to a child” (§ 300.532(c)(1)) and requiring a description in the evaluation report of variances “[i]f an assessment is not conducted under standardized conditions” (§ 300.532(c)(2)). The proposed regulations—in accordance with the IDEA 2004’s removal of the underlying reference to standardized tests—would delete these specifications altogether (IDEA proposed regulations, 2005, p. 35,863). As for cognitive assessments, the present IDEA general evaluation regulations similarly only refer conditionally to: 1) requiring test results to “accurately reflect the child’s aptitude or achievement level, or whatever other factors the test purports to measure” (§ 300.532(e)); 2) specifying that the aforementioned assessment in all disability-related areas include “if appropriate, … general intelligence [and] academic performance” (§ 300.532(g)); and 3) referring to the use of “technically sound instruments that may assess the relative contribution of cognitive and behavioral factors” (§ 300.532(i)). However, the present SLD
eligibility regulations, of course, add the specification of severe discrepancy between “achievement and intellectual ability” in one or more of the seven enumerated areas, along with the exclusion for mental retardation (§ 300.541). The proposed regulations would only delete the severe discrepancy standard, but still imply some sort of, albeit not a starring, role for cognitive testing by: 1) retaining the aforementioned general evaluation requirements; 2) continuing to require for SLD eligibility that “[t]he child does not achieve commensurate with the child’s age” in the same enumerated areas along with the added alternative of reading fluency (IDEA proposed regulations, 2005, p. 35,864); and 3) also requiring for SLD eligibility a choice of either the rather nebulous “pattern of strengths and weaknesses in performance or achievement, or both relative to intellectual development” or an RTI-based failure to meet “State-approved results” in one or more of the enumerated areas (IDEA proposed regulations, 2005, p. 35,864). Additionally, prior to the proposed regulations, OSEP opined that within the confines of the regulatory requirements “[w]hether evaluations are to be accomplished by means of testing or other evaluation materials is a matter left to the discretion of the [SLD eligibility determination] team” (Letter to Copenhaver, 1996, p. 643). Moreover, in a pair of pertinent decisions, the Ninth Circuit ruled that the use of standardized IQ tests for determining SLD eligibility was permissible for African-American students (Crawford v. Honig, 1994) and that, at least under California law, their use was not required for determining SLD eligibility more generally (Ford v. Long Beach Unified School District, 2002).

Finally, Fletcher and Reschly’s (2005) interpretation that the “inadequate instruction” exclusion in the present IDEA regulations requires “assessments of the student’s RTI” (p. 10) is inaccurate both with regard to that exclusion and RTI. The present regulations specify that entire “[l]ack of instruction in reading or math” (IDEA regulations, § 300.534(b)(1)) may not be the determinative factor for IDEA eligibility. The present regulations specific to SLD eligibility also fall short in establishing the condition precedent of “learning experiences appropriate for the child’s age and ability levels” (§ 300.541(a)). On the other hand, the proposed regulations would come closer by revising the general exclusion for reading, not math, to “[l]ack of appropriate instruction …, including the [NCLB-defined] essential components of reading” and by dropping the reference to ability levels from the aforementioned SLD eligibility prerequisite (IDEA proposed regulations, 2005, p. 35,864). In any event, the present regulations cannot reasonably be stretched to fit, as a requirement, the modern meaning of RTI. Although better described as an approach with several variations rather than a single model, RTI has a more specific meaning than simply instruction in reading or math or appropriate learning experiences (Batsche et al., 2005; National Joint Committee, 2005). Moreover, rather than referring more generally to RTI, Congress specifically described the process in terms of “scientific, research-based interventions” (IDEA, §1414(b)(6)(B)).

Final Thoughts

Not mentioned in TSP debate likely due to timing, the proposed regulations warrant a pair of additional observations. First, if they are finalized in their present form, the proposed regulations specific to SLD eligibility arguably extend beyond Congress’s intended limits, as revealed by the IDEA’s aforementioned language and legislative history. As the Supreme Court conditionally reasoned with regard to a § 504 regulation in another context, the proposed regulation’s shift in the IDEA 2004 delicate compromise between severe-discrepancy and RTI could “constitute an unauthorized extension of the obligations imposed by that statute” (Southeastern Community College v. Davis, 1979, p. 410). Interestingly, rather than relying on the legislative history of the IDEA, which took an indirect and tempered approach to the research to date, OSEP’s commentary prefacing the proposed IDEA regulations cited “Fletcher, et al., 2003” to support its strong recommendation of RTI (p. 35,802). Moreover, as is evident from juxtaposing the proposed regulations with IDEA 2004 in comparison to the juxtaposition of the present regulations with IDEA 1997, the other parts of the proposed regulations reflect Congress’s express new requirement that the regulations be limited to “the extent … necessary to ensure that there is compliance with the specific requirements of this [Act]” (IDEA, § 1407).

Second, to the likely extent that the final form of the regulations will at least further the present professional shift from a severe discrepancy to an RTI approach as a major but not sole step in determining SLD eligibility, a systematic survey of the case law (Zirkel, 2006) seems to point to an
Response to Intercontention: A Legal Discrepancy Analysis

enhanced role for the second essential element for eligibility—the need for special education. This added emphasis raises the thorny challenge of reaching "a more certain definition of special education" (Garda, 2005, p. 1124). Although an issue for IDEA eligibility generally, the problem is particularly pointed upon using RTI as initial steps for SLD eligibility. As Reschly rightfully asked at the end of the title of his 2005 article, after the multiple RTI tiers of scientific, research-based interventions, "then what?" Although he was referring to the final step in the eligibility evaluation process, this question also applies to the resulting formulation of FAPE. Circling back to restrict the answer, IDEA 2004 requires that the IEP's specification of special education "to the extent practicable" be based on what the NCLB (§ 7801(36)) defines as one of the hallmarks of scientifically-based research—"peer-reviewed research" (IDEA § 1414(d)(A)(i)(IV)).

References
Crawford v. Honig, 37 F.3d 485 (9th Cir. 1994).
Ford v. Long Beach Unified Sch. Dist., 291 F.3d 1086 (9th Cir. 2002).
Letter to Kennedy, 16 EHLR 1082 (OSEP 1990).

Please e-mail all submissions for The Commentary Section to: LReddy2271@aol.com

New Supreme Court Ruling: Schaffer v. Weast

The proponent of the IEP, it seems to me, is properly called upon to demonstrate its adequacy.”

In addition, the Court did not decide whether states may choose to override the default rule by placing the burden on the school district by state statute or regulation. The Court did not reach that issue because Maryland, the original site of the Schaffer case, did not have an explicit statute or regulation assigning the burden of proof to either party. But, in any state without a statute or regulation, the Supreme Court decision must be followed. Because Arizona statute does not assign the burden of proof to the school district, the Schaffer v. Weast decision applies to our state.

Since parents initiate most due process hearings, it is likely that the burden of proof will rest with them. This ruling will likely increase the chance that districts will prevail in due process hearings and reduce the number of frivolous due process hearings requested by parents. It has also been suggested that this ruling may result in a shift in the balance of power in IEP meetings.

As for Brian, Montgomery County offered a different and more appropriate IEP for the 2001-2002 school year, which the parents accepted. Now 21, Brian is attending college.

The full opinion of the Court can be accessed at www.supremecourts.gov/opinions/05pdf/04-098.pdf
The stated goal of this text is to help professionals “make effective decisions about children with special needs” (Sattler & Hoge, 2006, p. 2). Consistent with this directive, the authors provide a comprehensive review of best practices in evaluation methods, essential assessment skills, and ethically sound interpretation of data that informs interventions. The breadth and depth of information included in the fifth edition of *Assessment of Children: Behavioral, Social, and Clinical Foundations* is commendable. The authors provide a scholarly review of each step in the clinical assessment process from the initial interview and observation stages through formal administration of psychological tests to empirically-based recommendations in the final report. This volume provides an excellent fundamental text for graduate students as well as a vital desk reference for the accomplished practitioner.

**Content Overview**

The text is organized in six sections: Foundations; Interview Methods; Behavioral Observations; Behavior, Personality, Family, and Sensory Motor Abilities; Children with Special Needs, and Report Writing. The chapters are particularly well designed for instruction, as each begins with clearly delineated topic headings, learning goals, and objectives. Additional teaching tools and resources include numerous schematic figures that provide an easy format for visualizing theoretical concepts and tables with organizational frameworks for diagnostic scales. Many of the tables are well suited for intervention progress monitoring (e.g., behavioral observations, self-monitoring forms), and permission to reproduce for personal use is often noted by the authors. The chapters conclude with study questions and a succinct summary of the main points by topic headings to facilitate retention of key concepts. An accompanying *Instructor’s Manual, Assessment of Children: Behavioral, Social, and Clinical Foundations, Fifth Edition* is also available with multiple-choice questions for examinations.

**Foundations.** Four chapters in this section provide theoretical perspectives for understanding assessment within the broader context of epidemiological influences, special education categories, and professional regulations with sensitivity for the unique needs of individual children. A foundational overview of statistical and psychometric constructs of test instruments includes norm-referenced measurement, reliability and validity measures, as well as an emphasis on the importance of appropriate representativeness in the standardization sample. The effects of classification and labeling in securing services for children are discussed along with research indicating the stronger influence of specific classroom achievement on teacher expectations (Kirsch, 1999). The last chapter provides a significant, detailed discussion of assessment for culturally and
linguistically diverse students.

**Interviewing methods.** Chapters five through seven outline clinical interviewing techniques with many practical suggestions for establishing rapport, asking probing questions, handling resistant interviewees, and decisions on the validity of information obtained. Structured interviewing and sentence completion techniques are discussed and the authors note the value of gathering cross-informant interview information. There are supplemental resources for this section in the appendices including semi-structured interview forms.

**Behavioral observations.** The focus of chapters eight and nine is direct observational methods. Interval, event, and narrative recording techniques, as well as published coding systems, are described. Multiple data collection forms are provided, and there are practice exercises for students. These coding processes are particularly important to current paradigm shifts in school psychology practice as they can be easily applied during the progress monitoring of intervention outcomes in a response-to-intervention model (RTI), particularly for behavioral goals.

**Behavior, personality, family, and sensory motor abilities.** Best practices in evaluation of students’ needs require knowledge of the psychometric properties of instruments when selecting appropriate assessment measures (American Educational Research Association, 1999). This section (i.e., chapters 10 through 13) provides a critique of several of these components for major assessment instruments utilized in the evaluation of children. Rating scales, projectives, and sensory-motor perception methods are included. The first chapter starts with broad omnibus measures and narrow construct measures are reviewed in subsequent chapters. Information on scales and type of scores each instrument yields are provided as well as standardization, reliability, and validity data. There are several tables which cross-reference scales by form (e.g., BASC-II and Achenbach forms) providing a synopsis of the entire measurement system that are a helpful resource for experienced practitioners. The last chapter provides detailed information on functional behavioral assessment, including interview and A-B-C data collection forms. The inclusion of case study examples directly linked to intervention plans will provide students with good applied examples for RtI practice.

**Children with special needs.** This text dedicates 11 chapters to addressing the specialized needs of children and youth including giftedness and disabilities. Diagnostic measures and assessment issues for antisocial behaviors, anxiety, depression, substance abuse, suicidal risk, attention-deficit-hyperactivity disorder (ADHD), specific learning disabilities (SLD), mental retardation, visual/hearing impairments, autism spectrum, and brain injuries are reviewed. Notably several chapters contain sections on intervention directly related to assessment data. In addition, there is information from a rehabilitation perspective that will be helpful in collaboration between clinical and school settings when students with brain injuries transition back to the classroom environment.

**Report writing.** The final chapter highlights elements of writing psychological reports including integration of data, conclusions, and recommendations. A sample report is included.

**Summary**

The provision of psychological and psycho-educational evaluation services for children and youth is an important trust with long-term consequences for their academic achievement and mental health well-being. Therefore, it is important that novice practitioners acquire a sophisticated understanding of core principals and methods for empirically-based assessment decisions. In addition, it is important for experienced clinicians to remain current on assessment-related research and the psychometric properties of newer instruments. The necessary components to serve both of these goals are contained in this volume. This text remains the gold standard in best assessment practices, an exemplary guide for clinical foundations in the disciplines of child and school psychology.

**References**


Thursday, August 10, 2006

8:00 AM - 9:50 AM
Symposium (S):
Experimental Evaluation of Instructional Consultation
Teams—Year 1
Morial Convention Center
Meeting Room 274

8:00 AM - 9:50 AM
Symposium (S):
Has School Psychology Lost Its Way?
New Rules for Accountability
Morial Convention Center
Meeting Room 275

10:00 AM - 11:50 AM
Symposium (S):
Contemporary Conceptual Frameworks for Psychologists Working in Schools
Morial Convention Center
Meeting Room 277

12:00 PM - 1:50 PM
Symposium (S):
Innovations in Treating ADHD in Schools—Behavioral and Ecological Approaches
Morial Convention Center
Meeting Room 262

2:00 PM - 2:50 PM
Poster Session (S):
Assessment—Psychological, Cognitive, Social, Behavioral, and Academic Achievement
Morial Convention Center
Halls E & F

3:00 PM - 3:50 PM
Poster Session (S):
Systems, Consultation, Policy, Preparation, and Family
Morial Convention Center
Halls E & F

Friday, August 11, 2006

8:00 AM - 9:50 AM
Symposium (S): Teacher–Student Relations—Prevention Versus Escalation of School Aggression and Violence
Morial Convention Center
Meeting Room 271

10:00 AM - 10:50 AM
Presidential Address (N): [Stoner]
New Orleans Marriott Hotel
La Galeries 3

11:00 AM - 12:50 PM
Executive Committee Meeting (N): [Executive Committee Meeting]
New Orleans Marriott Hotel
Mardi Gras Ballroom F

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APA Convention –
Dr. Nadine Lambert’s Memorial Hour

Division 16 is sponsoring a Memorial hour for Dr. Nadine Lambert on Friday, August 11 from 1 to 1:50 pm in the La Galeries 3 of the New Orleans Marriott Hotel

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2:00 PM - 2:50 PM
Invited Address (S): [DuPaul]
Morial Convention Center
Meeting Room 262

3:00 PM - 3:50 PM
Poster Session (S):
Prevention, Intervention, and Instruction
Morial Convention Center
Halls E & F

4:00 PM - 5:50 PM
Symposium (S):
Response to Intervention (RtI) Implementation Considerations—Reliability, Validity, and Fairness
Morial Convention Center
Meeting Room 338

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Saturday, August 12, 2006
8:00 AM - 9:50 AM
Symposium (S): School Psychology as Public Health Practice
Morial Convention Center
Meeting Room 353
10:00 AM - 10:50 AM
Poster Session (S): ADHD, Learning Disabilities, Autism, Medical and Health Issues, and Behavioral Problems
Morial Convention Center
Halls E & F
11:00 AM - 11:50 AM
Invited Address (S): [Kame enui]
Morial Convention Center
Meeting Room 260
12:00 PM - 1:50 PM
Invited Symposium (S): and Awards
Morial Convention Center
Meeting Room 260
2:00 PM - 3:50 PM
Business Meeting (N): [Business Meeting]
New Orleans Marriott Hotel
Bissonet Room
4:00 PM - 5:50 PM
Social Hour (N): [Social Hour]
New Orleans Marriott Hotel
Bissonet Room

Sunday, August 13, 2006
8:00 AM - 9:50 AM
Symposium (S): Reconciliation in LD Identification—Integrating RTI and Cognitive Processing Approaches
Morial Convention Center
Meeting Room 271
10:00 AM - 11:50 AM
Symposium (S): Ecological Correlates of Child Temperament—Teacher and Classroom Variables
Morial Convention Center
Meeting Room 252
12:00 PM - 12:50 PM
Poster Session (S): Social, Emotional Aggression, and Bullying
Morial Convention Center
Halls E & F
12:00 PM - 1:50 PM
Symposium (S): Assessment of Autism Spectrum Disorders in Schools—Complex Case Issues
Morial Convention Center
Meeting Room 252

Dr. Russell Barkley Full-Day Workshop “A New Paradigm of ADHD”
APA’s Psychologically Healthy Workplace Awards

Linda A. Reddy, Division Federal Advocacy Coordinator

At the State Leadership Conference in Washington, DC (March), I had the opportunity to attend APA’s Psychologically Healthy Workplace Award ceremony. APA recognized several organizations for their commitment to programs and policies that promote employee health and well-being while enhancing organizational functioning. This award program includes recognition at the state- and national-level.

For the State-Level Psychologically Healthy Workplace Award – over 42 state psychological associations (including Canada) are recognizing organizations for their programs and/or policies.

For the National Psychologically Healthy Workplace Award – nominees are selected from the pool of previous state-level awardees. Candidates are evaluated in the following categories: employment involvement, health and safety, employee growth and development, work-life balance, and employee recognition. Other factors may include communication in the organization, employee attitudes and opinions, and impact of employee well-being on organizational functioning.

For more information see: www.phwa.org

Among the pool of state-level awardees, APA also selects candidates for the APA Best Practice Honors.

For 2006, six organizations were recognized for the National Psychologically Healthy Workplace Award. Green Chimneys School in Vermont was among the winners. Green Chimneys School, part of a larger residential and day treatment campus, operates as a year round K-12 special education program for emotionally disturbed children. For more information about Green Chimney School see: www.phwa.org/awards/nationalwinnerview.php?id=9

Ten organizations also were recognized for APA Best Practice Honors.

If you know of any schools or organizations that deserve recognition for their efforts in these areas, nominate them by contacting your state psychological association. See www.phwa.org/howtoapply for information on how to nominate programs and apply for these awards for your state.

Call for Nominations for APA Division 16 Fellows

The Division of School Psychology requests your nomination of individuals for Fellowship status in APA. Nominations to initial Fellow Status are reviewed by the Division 16 Fellows Committee and forwarded to the APA Membership Committee, which has the responsibility of making recommendations to the APA Board of Directors. The APA Council of Representatives then elects individuals to Fellow status upon recommendation of the Board. Nominees must hold a doctoral degree, have been an APA member for at least one year, be engaged in the advancement of psychology, and have at least 5 years of professional experience after the doctorate. Election to Fellow status requires evidence of unusual and outstanding contributions or performance in the field of psychology. Fellow status requires that a person’s work have had national impact on the field of psychology beyond a local, state, or regional level. Three letters of endorsement from current APA fellows will be required in support. Anyone, including a candidate herself or himself, may nominate a school psychologist as a candidate. Upon receipt of a nomination, necessary information will be sent to the candidate who will prepare and return a formal application with supporting material to the Division Fellows Committee.

For more information please contact Dr. Steven Little at slittle2@waldenu.edu. Nominations are due by October 1, 2006. Send nominations to Dr. Steven Little at (before September 5) 7400 Northrop Drive, #264, Riverside, CA 92508; (after September 5) 152 Shady Acres Rd., Tupelo, MS 38802.
Many years ago, the first author started collecting books specifically on school psychology. Among the first gathered were from the 1960s, a period of strong literary growth in school psychology. The “classics” of the era are pretty well known to experienced school psychologists trained in the decade just before the founding of the National Association of School Psychologists (NASP). These books included Mary Alice White and Myron Harris’ The School Psychologist (1961), Paul Eiserer’s The School Psychologist (1963), Susan Gray’s The Psychologist in the Schools (1963), Roger Reger’s School Psychology (1965), and James Magary’s School Psychological Services in Theory and Practice: A Handbook (1967). The authors came from varied backgrounds, but most had academic positions with early school psychology training programs, and/or were visible in the leadership of the APA Division of School Psychology. Reger was something of an exception, being a school psychologist for a school system in Michigan.

Another exception was a book by the Coordinator of Guidance and a practicing school psychologist in Cheyenne, Wyoming, Wilma Hirst’s (1963) Know Your School Psychologist. I corresponded with her and other authors of that period in order to complete my collection. I had been unable to get a copy from the publisher and thanks to then NASP Wyoming Delegate, Don Austin, I was able to locate Dr. Hirst in Cheyenne and secure a copy. Her book differs from most others of the period by being very practical and service oriented. Writing at a time when APA had about 18,000 members and the Division of School Psychology had about 700, her focus was on services to the child. Although involvement in research and the community were much desired, she described the “purposes and objectives of the school psychologist” as follows:

The school psychologist helps ascertain if the child is developing and utilizing his academic abilities to the fullest extent. He helps uncover causes of failure in this development and utilization of the child’s academic talent, and suggests ways of overcoming obstacles in the learning process. He helps school children discover and develop special interests and abilities. He helps children in the tremendously important task of becoming socialized—of learning to live and work with other people—of becoming an individual the rest of humanity can not only tolerate but also admire. (p. 3)

Much of the book is devoted to chapters on the areas of child exceptionality and problems commonly found in the school setting, and how services are enhanced through school and community services. It’s a book about doing school psychology, not what the field is aspiring to become through policies, training, and credentialing. There is no overriding philosophy other than the focus on child study.

Family Background and Education

Wilma Elizabeth Ellis Hirst was born on July 6, 1914 in Shenandoah, Iowa, a city in the extreme
southwestern part of the state with a current population of less than 6,000. Her parents were Lena Donahue Ellis and James Ellis. Her father worked as a furrier before the time of automobiles and later rented horse carriages; her mother was skilled in making crafts. Wilma’s family was described as “quite poor” in those days and she taught herself to read by age four. Raised in that area of Iowa, she graduated from Thomas Jefferson High School in Council Bluffs and attended Graceland College Normal School in Lamoni, Iowa for two years and graduated in 1934. A Graceland College representative was able to confirm that the college was a two-year school until the mid-1960s but had no other information specific to Wilma Ellis. For a short while, she taught in one-room schools while living with a local minister and his wife.

She married Clyde Hirst in 1936 and they moved to Cheyenne, Wyoming. With a strong interest in education, she completed the A.B. degree in education (1948) at Colorado State College, the M.A. degree in general psychology (1951) at the University of Wyoming, and the Ed. D. degree in educational psychology (1954) at Colorado State College. For most of her graduate education, she commuted back and forth from Cheyenne and Greeley. According to the university’s website, the institution has been known as State Normal School (1889-1911), Colorado State Teachers College (1911-1935), Colorado State College of Education (1935-1957), Colorado State College (1957-1970), and the University of Northern Colorado since 1970. Her dissertation research, “The Effect of a Seventh Grade Remedial Reading Program on Pupils’ Academic Progress Through High School,” was no doubt connected to her remedial reading position in Wyoming, and the research was published upon graduation (Hirst & Luker, 1954).

The family told how Wilma was the only woman in her doctoral graduating class and that she had been discouraged by some faculty from completing her Ed.D. A photo was taken of all the new doctorates at the time of graduation, and the photographer asked her husband to get in the picture instead of her, thinking that no women would be getting such a high degree.

**Employment History**

Wilma’s employment history is gathered from former APA directories as well as family information. Directory entries are not always consistent, but the following is considered a reasonably accurate employment chronology. She was a teacher in Cass County School District (1934-1935); Crescent School District (1935-1936); the Laramie County School District (Cheyenne, WY 1946-1948); a remedial reading instructor in its McCormick Junior High School (1948-1954); Director of the Campus School and Associate Professor of Education at Nebraska State Teachers College (Kearney, 1954-1956); then returned to Laramie County School District where she served as school psychologist and head of the Department of Special Education (1956-1957), then school psychologist and
Coordinator of Guidance (1957-1964), Director of Research and Special Projects and then head of Pupil Personnel Services from 1965 until her retirement on July 1, 1984. In her last position, she was responsible for special education, speech therapy, nursing, hearing specialist, school psychology, social work, and guidance counselor services. According to The World Who's Who of Women (1976), during several summers (1957-1972) Wilma was a visiting professor at the University of Southern California, University of Nebraska-Lincoln, University of Oklahoma, and University of Wyoming, as well as in Afghanistan (1969) and Brazil (1974).

Her retirement culminated almost 40 years of service to Laramie County (WY) schools and 50 years in the field of education. It is possible that Wilma was the first school psychologist in Wyoming, taking employment there before state certification or licensure appears to have existed. Late in her career, Wilma brought together her knowledge of school psychology and school administration in, Effective Psychology for School Administrators (Hirst, 1980). Of the books I am familiar with in the history of school psychology, this is the only one that is written for school administrators. Her humanistic behavioral approach to school administration is as important today as then. In addition to being a full-time, district-based school psychologist, she was active in district research, and carried her results to publication (see, e.g., Hirst, 1969, 1970).

Affiliations and Memberships

According to her obituary in the Wyoming Tribune Eagle (November 24, 2005), Wilma was a member, elder, and deacon of the First Presbyterian Church, 50-year member of Oak Leaf Chapter 6, Order of Eastern Star, Alpha Delta Kappa (honorary teachers group), and Daughters of the Nile (a non-denominational Masonic group). She also belonged to Zonta (business women) and Retired Teachers of the Wyoming Educational Association and the National Education Association.

Wilma became an associate member of APA in 1956, a regular member in 1958, and belonged to both Division 15 (Educational Psychology) and 16 (School Psychology). She was very active in the Wyoming Psychological Association, serving as its president in 1963. She helped to wage the struggle for independent practice licensing of psychologists in Wyoming which was enacted in 1965. She was the 3rd person issued a license in Wyoming, and likely the first school psychologist to hold the clinical psychology license. State Department of Education certification of school psychology workers in Wyoming appears to have begun in the period 1955-1960. Her graduate work and teaching credentials likely made her eligible for its earliest school psychology certifications (Hodges, 1960; Gross & Bonham, 1965); she was certificated as a school psychologist in 1961, later as a director, and held lifetime certification. As additional evidence of her distinction, Wilma received the diploma in school psychology from the American Board of Professional Psychology on June 6, 1970. Wilma was also active in the early history of the American Association of School Psychology Boards (now the Association of State and Provincial Psychology Boards), serving as its secretary-treasurer from 1970-1971 to 1972-1973 (see Carlson, 1978). Having started in 1981, Wilma was never a member of the Wyoming School Psychology Association (originally named the Wyoming School Psycho-Educational Association), nor was she a member of the National Association of School Psychologists (NASP).

Personal

In a 1983 letter from Wilma, she referred to herself as a pioneer in school psychology and she certainly was. In addition to her long-standing professional contributions, Wilma enjoyed traveling, photography, and had traced her genealogy to the 1500s. Her daughter said she would want to be remembered for the help she provided children. She started programs for drop-outs and for special education. She was opposed to how the No Child Left Behind Act was managed because it overemphasized testing and underemphasized children's instruction. Her family said she never completed a book she was interested in writing, “Schoolmarm's Now and Then.”

After a stay of only one or two days, Wilma died at United Medical Center-West in Cheyenne, WY on November 20, 2005 from a ruptured aortic abdominal aneurism. Wilma was preceded in death by her husband, Clyde, and a brother, Wilbur Ellis, and a sister, Edna Ellis Cunningham. She is survived by her daughter, Donna Goss and her husband, Bob Goss, of Cheyenne, a granddaughter, and a greatgranddaughter.

Comments from fellow Wyoming school psychologists included, “Wilma was the best thing that ever happened to school psychs in Cheyenne. She strongly supported participation in WSPA activities of psychologists in Cheyenne but I do not know if she was a member…” (Dan Munn, personal..."
communication February 20, 2006); “I worked with Wilma years ago... she was a biggie in the Cheyenne schools as I recall” (Bob Bayuk, personal communication, February 20, 2006). According to a short biostatement in Hirst (1969), Wilma was then a board chairman of the Southeast Wyoming Mental Health Center (her photo appears with the bio). She also was on the Board of Directors of Good Will Industries (1976-1983), and Wyoming governors appointed her to the Wyoming State Board of Psychological Examiners from 1965 to 1974.

It is fair to say that Wilma was pretty much a life-long, dedicated Wyoman. Like many school psychologists of her era, she started out teaching school, worked her way through graduate school, ascended the ranks of her school system, balanced home life and career, and made contributions at several levels of practice and administration in her district as well as in the community. In 1983, shortly before her retirement, Wilma wrote to ask if Fagan was aware of places that might be interested in her personal papers. He suggested the Archives of the History of American Psychology (AHAP, University of Akron, OH) and possibly the Western History Research Center in Wyoming. We have no knowledge of what she did with her collection but it is not listed among those at AHAP nor other repositories we searched. Fagan never met Dr. Hirst and in all his travels across the United States, he never got to Cheyenne. He wishes he had done both.

References
Victor B. Elkin (1920-2006)

"I have made the statement privately and in public many times that there is no other function within the field of psychology which is more vital, more stimulating, more alive and more global than school psychology. With it, however, I have also recognized that there is probably no field more frustrating and what might seem like a contradiction, more limiting than school psychology. In the course of my professional life, I have functioned as a psychologist in a mental hospital, a general hospital, adult out-patient clinic, a child guidance clinic, as a university instructor, a private practitioner, and a school psychologist. Despite this being my second decade in school psychology, I can honestly state that none of my experiences provided me with the scope and breadth of function as that of school psychologist. This is true not only in the traditional role and function, but especially in the potential and emerging role of the school psychologist today." (pp. 2-3)

Victor B. Elkin (1965). An "old timer" looks at school psychology. Journal of School Psychology, 3(4), 2-6. Dr. Elkin received his PhD in clinical psychology from New York University in 1952 and served for many years as a school psychologist and Director of Psychological Services for the Long Beach, NY School System. He was born May 8, 1920 and died on February 4, 2006. He was a Fellow of Division 16 and ABPP in school psychology.

Nadine M. Lambert (1926-2006)

Born on October 21, 1926, Nadine was 79 years old. She earned her B.A. in psychology at UCLA in 1948, her M.A. in education at Los Angeles State U. in 1955, and her PhD in psychology at the University of Southern California in 1965. She worked for the California State Department of Education as a research consultant conducting demonstration research programs for emotionally handicapped children in 16 school districts in Southern California. In this capacity she served as a colleague of the renowned Eli Bower, contributing much to the efforts to establish mental health programs in the schools. She joined the faculty at UC-Berkeley in 1964 as Director of its School Psychology Program, and served on the Berkeley faculty to the present. Among her distinctions she served as president of the CASPP (1962-1963), held the Distinguished Service Award from Division 16 (1980), as well as the Division's Senior Scientist Award (2005), an APA award for Distinguished Professional Contributions to Applied Psychology as a Professional Practice (1986), and in 1998-1999 she received APAs award for Distinguished Contributions of Applications of Psychology to Education and Training. She had also served on and/or chaired the APA Board of Directors and the APA Board of Educational Affairs. If there was an important professional activity or board in school psychology, Nadine was almost always involved. She joined APA in 1956 and became a Fellow of divisions 15 and 16 in 1974. Although not a member of NASP, she was granted Honorary Membership in NASP in 1996. She regularly attended NASP and APA conventions. She was NASP’s Legends in School Psychology speaker at its 1998 convention. Her absence is an enormous loss to the school psychology community, although her presence will always be known.

Dr. Nadine Lambert receives the 2005 Senior Scientist Award from Cecil Reynolds, Division 16 President (2004-2005)

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School Psychology and Screening for Problems


People and Places

- The 100th anniversary of the University of Minnesota’s College of Education and Human Development includes the honoring of 100 Distinguished Alumni. Each department was invited to nominate graduates of the College who earned their degrees prior to 1990 and who do not currently serve on the faculty. Seven of the School Psychology program’s nominees were honored including: Drs. Beth Sulzer-Azaroff, Andrea Canter, Janet Graden, Paula Laidig, Douglas Marston, Robert Pianta, and Gerry Tindal.

- The School Psychology Program at Kent State University welcomes Dr. Frank Sansosti as a faculty member beginning Fall 2006. Dr. Sansosti graduated from the University of South Florida in 2005, and worked as a school psychologist and autism consultant for the District School Board of Pasco County Florida immediately prior to joining the KSU faculty.

- Dr. Amanda Clinton-Higuita has been selected as the new Associate Editor of The School Psychologist (TSP). Her position begins in 2007. Dr. Michelle Athanasiou will be the Editor of TSP in 2007.

- Dr. Joseph L. French, professor emeritus of education at Penn State, has been inducted into the College of Arts and Sciences Hall of Fame at Illinois State University. Dr. French and ten other inductees were honored during ceremonies held in February at the university’s campus in Normal, Ill. Of the current 44 members, he is the first psychologist to be inducted. French was in the presidential chairs of Division 16 (1975-1978) following three years on the division’s executive committee. He was a member of the division Fellow Review committee four times and the Distinguished Service award committee three times, chair of the Education and Training Committee (1981 – 1984), and chair of the Division Committee for the APA Centennial Celebration in 1993. In addition he was a member of the APA Committee on Accreditation (1982 –1985) and a member the APA Council of Representatives (1985 – 1987 and 1989 – 1991) representing Division 16. From 1986 to 1991, he was a member of the APA/NASP Interorganizational Committee. During that time, Penn State hosted a successful concurrent accreditation visit by APA and NASP/NCATE for the Penn State program in school psychology (that he directed from 1965 to 1997). He has made more than 30 program visits and six internship center visits for the APA CoA. Dr. French received the Penn State College of Education Career Achievement Award, the Award for Distinguished Contributions to the Science and Profession of Psychology from the Pennsylvania Psychological Association, Illinois State University’s Distinguished alumni Award for 1998, and in 2005 the Ethics Educators Award from the Pennsylvania Psychological Foundation.

- Dr. Valerie Cook-Morales, San Diego State University, was one of nine exceptional faculty members chosen to receive the 2006/2007 Alumni Association Awards for Outstanding Faculty Contributions to the University. The outstanding faculty awards, also known as the Faculty Montys, have recognized distinguished faculty members since 1972. Dr. Cook-Morales has been awarded over $12.8 million in grant funding to the San Diego State School Psychology program and the university. Her projects focus on preparing professionals to meet the educational needs of diverse students, including African-American and Hispanic students, as well as students who are English learners and students identified with emotional and other disabilities.

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Dr. Robert H. Woody, Ph. D., Sc. D., J. D., Professor of Psychology at the University of Nebraska at Omaha will be sworn in as a Law Enforcement Officer with the Florida Department of Law Enforcement (Capitol Police) this summer. He will also be teaching seminars for Florida School Resource Officers under the auspices of the Florida Office of the Attorney General and on the protection of personal and practice rights of psychologists for the Florida Psychological Association. Dr. Woody’s book, Search and Seizure: The Fourth Amendment for Law Enforcement Officers, is due to be released soon. Dr. Woody is a Fellow of Division 16, and served as the Director of School Psychology at the University of Nebraska at Omaha from 1987 through 2002.

Dr. Bonnie Nastasi has joined the faculty at Walden University in the position of Director, School Psychology program. Dr. Steven G. Little has also joined Walden University as a full-time faculty member in the School Psychology program.

The School Psychology Program at Lehigh University is pleased to announce that Dr. Robin (Phaneuf) Hojnoski, formerly of The University of Memphis, will be joining the faculty this August.

Richard W. Woodcock was awarded an honorary doctorate degree from Western Oregon University (WOU) on June 17, 2006. Woodcock was the recipient of the Doctor of Humane Letters for his many accomplishments in education and psychology and his long-standing support of WOU, where he was an assistant professor of psychology from 1957 to 1961.

Dr. Roy Martin was honored as the 2006 recipient of the Beeman Phillips Distinguished Graduate Award from the University of Texas School Psychology program in April. Dr. Martin, a Professor at the University of Georgia and a 1970 graduate of the UT program, spoke to students, faculty, and alumni on the topic “At the Intersection: Why School Psychology is a Satisfying Career.” The presentation was preceded by poster presentations of student research.

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