



APA Division 16 School Psychology
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AMERICAN PSYCHOLOGICAL ASSOCIATION

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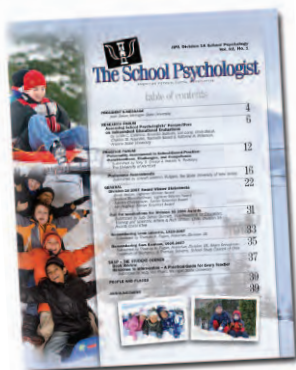


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Michelle Athanasiou, Ph.D.
Applied Psychology & Counselor Education
Campus Box 131
University of Northern Colorado
Greeley, CO 80639
(970) 351-2356 (w)
(970) 351-2625 (f)
michelle.athanasiou@unco.edu



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The APA Division 16 publishes *The School Psychologist* as a service to the membership. Four issues are published annually. The purpose of TSP is to provide a vehicle for the rapid dissemination of news and recent advances in practice, policy, and research in the field of school psychology. Articles up to approximately 15 double-spaced manuscript pages will be accepted; however, brief articles, approximately 6 to 12 double-spaced manuscript pages, are preferred. Test reviews, book reviews, and comments for The Commentary Section are welcome. All submissions should be double spaced in Times New Roman 12 point font and e-mailed to the Editor. Authors submitting materials to *The School*

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Michelle Athanasiou, Ph.D.
Applied Psychology & Counselor Education
Campus Box 131
University of Northern Colorado
Greeley, CO 80639
(970) 351-2356 (w)
(970) 351-2625 (f)
michelle.athanasiou@unco.edu

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Division 16 Executive Committee

President

Frank C. Worrell, Ph.D.
Cognition and Development
Graduate School of Education
University of California, Berkeley
4511 Tolman Hall
Berkeley, CA 94720-1670
(510) 643-4891 (w)
(510) 642-3555 (f)
frankc@berkeley.edu

President Elect

Jean A. Baker, Ph.D.
434 Erickson Hall
Michigan State University
East Lansing, MI 48824
(517) 353-5047 (w)
(517) 353-6393 (f)
jbaker@msu.edu

Past President

Gary Stoner, Ph.D.
School Psychology Program
School of Education
361 Hills House South
University of Massachusetts, Amherst
Amherst, MA 01003
(413) 545-1527 (w)
(401) 265-8925 (c)
(413) 545-1523 (f)
gstoner@educ.umass.edu

Secretary

Vincent C. Alfonso, Ph.D.
Graduate School of Education
Fordham University
113 West 60th Street
Room 1121A Lowenstein
New York, NY 10023
212-636-6410 (w)
212-636-7826 (f)
alfonso@fordham.edu

Treasurer

Bonnie Nastasi, Ph.D.
School Psychology Program
Walden University
Home address:
1750 St. Charles Ave. #402
New Orleans, LA 70130
(860) 235-8829 (w)
bonnastasi@yahoo.com
bnastasi@waldenu.edu

Vice President of Professional Affairs (VP-PA)

Linda Caterino, Ph.D.
School Psychology Program
Division of Psychology in Education
Tempe, AZ 85287
(480) 965-3384 (w)
(480) 965-0300 (f)
linda.caterino@asu.edu

Vice President of Membership

Lea Theodore, Ph.D.
City University of New York,
Queens College
Graduate Program in School Psychology
65-30 Kissena Blvd.
Flushing, NY 11367
(718) 997-5360 (w)
(718) 997-5428 (f)
Lea.Theodore@qc.cuny.edu

Vice President of Education, Training, & Scientific Affairs (VP-ETSA)

Judy Oehler-Stinnett, Ph.D.
Oklahoma State University
434 Willard Hall
School of Applied Health and
Educational Psychology
Stillwater, OK 74078
(405) 744-9450 (w)
(405) 744-6756 (f)
jos@okstate.edu

Vice President of Publication, Communications, and Convention Affairs (VP-PCCA)

Tammy Hughes, Ph.D.
Duquesne University
Department of Counseling,
Psychology, and Special Education
102C Canevin Hall
Pittsburgh, PA 15282
(412) 396-5191 (w)
(412) 396-1340 (f)
hughes@duq.edu

Vice President of Social and Ethical Responsibility & Ethnic Minority Affairs (VP-SEREMA)

Karen Callan Stoiber, Ph.D.
Department of Educational Psychology
University of Wisconsin-Milwaukee
2400 East Hartford Ave.
Milwaukee, WI 53211
(414) 229-6841 (w)
(414) 229-4939 (f)
kstoiber@uwm.edu

Council Representatives

Cindy Carlson, Ph.D.
University of Texas at Austin
Educational Psychology Department
1 University Station D5800
Austin, TX 78712
(512) 232-4835 (w)
(512) 471-1288 (f)
cindy.carlson@mail.utexas.edu

Randy Kamphaus, Ph.D.
College of Education
P.O. Box 3965
Georgia State University
Atlanta, GA 30302-3965.
(404) 413-8101 (w)
rkamphaus@gsu.edu

Council Representatives (continued)

Deborah Tharinger, Ph.D.
University of Texas at Austin
Educational Psychology Department
SZB 504
Austin, TX 78712
(512) 471-4407 (w)
(512) 471-1288 (f)
dtharinger@mail.utexas.edu

SASP Representative

Amanda Siebecker
114 Teachers College Hall
University of Nebraska-Lincoln
Lincoln, NE 68503
(402) 472-1192
mandasiebecker@yahoo.com

Historian

Thomas K. Fagan, Ph.D.
Department of Psychology
University of Memphis
Memphis, TN 38152
(901) 678-2579 (w)
tom-fagan@mail.psy.memphis.edu

Editor,**School Psychology Quarterly**

Rik D'Amato, Ph.D.
Applied Psychology &
Counselor Education
University of Northern Colorado
Greeley, CO 80639
(970) 351-2208 (w)
(970) 351-2625 (f)
rik.damato@unco.edu

Editor-Elect,**School Psychology Quarterly**

Randy Kamphaus, Ph.D.
College of Education
P.O. Box 3965
Georgia State University
Atlanta, GA 30302-3965.
(404) 413-8101 (w)
rkamphaus@gsu.edu



Presidential Greeting, December, 2008

Jean Baker
Michigan State University

“...My professional allegiance is to professional psychology, and there is a lot of work to do on behalf of children and schools between, as well as within, organizations.”
...

Greetings and welcome to a new year in the Division. Your officers are Frank Worrell (Past President), Tammy Hughes (President-elect), Tanya Eckert (Treasurer), Vinny Alfonso (Secretary), and I am delighted to serve as your President. Our hardworking Vice Presidents and Council representatives are listed on the Division 16 website (http://www.indiana.edu/~div16/committee_members.html) and in each issue of this newsletter. Please do not hesitate to contact any of us with issues, suggestions or concerns.

We will have two major initiatives this year. The first involves greater connectivity between the Division and other facets of APA. For example, we are exploring some joint convention programming with the other child-oriented divisions to coincide with President Kazdin's mental health emphases. Developing programs and policies that address children's needs takes a coordinated push to work more effectively with APA organizational and operational structure. Attached is an organizational chart that details all our partners at APA. We have great working rapport with the Policy and Advocacy in the Schools office in the Practice Directorate, but how well do we influence issues in the Science Directorate or governmental affairs? How well do you know APA beyond the Division? As you can see, the “work” of APA is done under the direction of the CEO by many offices and directorates who organize the legions of volunteers it takes to keep professional psychology strong. Your participation, ranging from committee service to election as a council member, is encouraged. Contact the VP in charge of your interest area - I encourage you to get involved. Many individuals serve APA committees selflessly, but a more concentrated effort is needed for us to be proactive in addition to responsive to our parent structure.

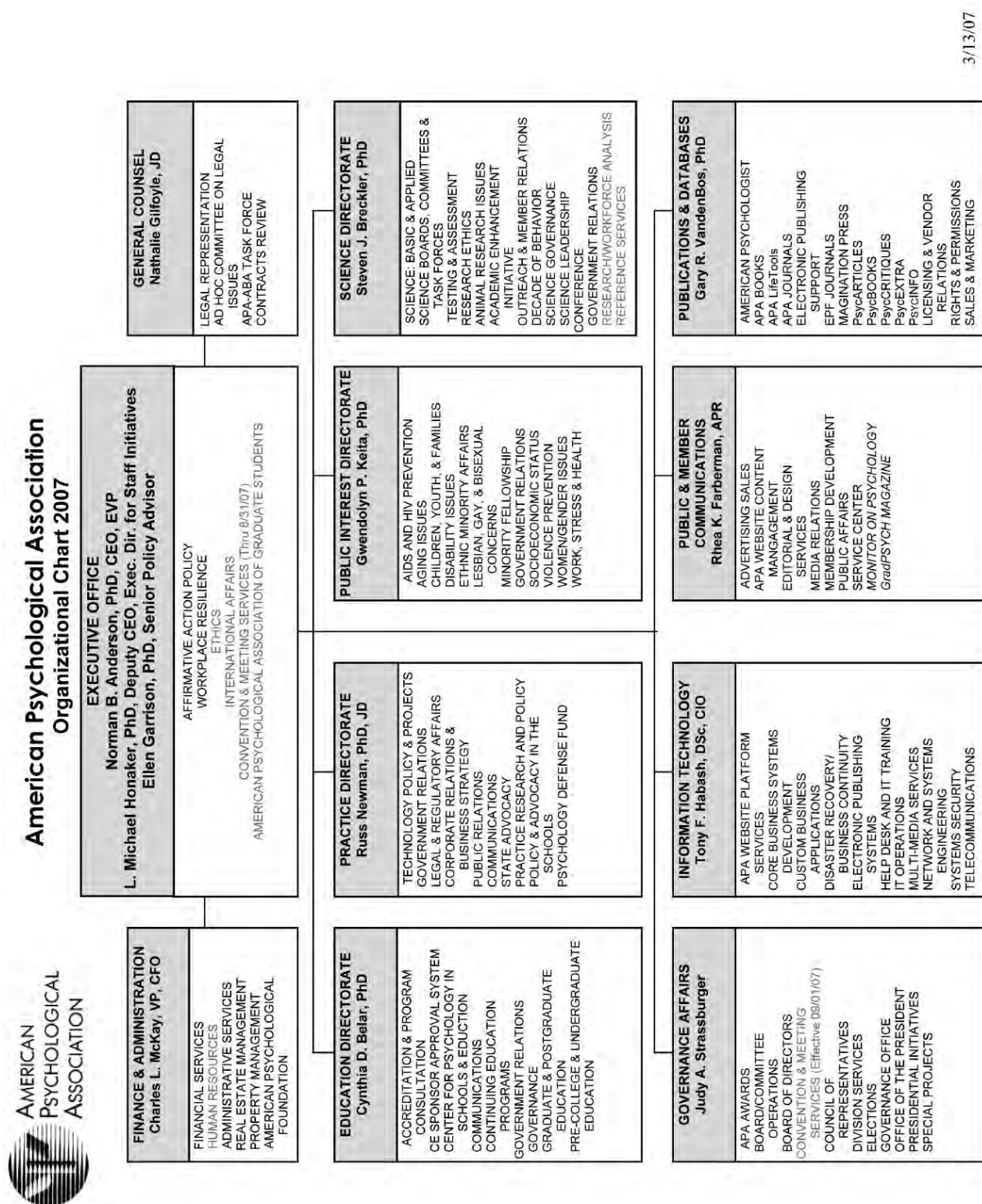
The second initiative involves connections with other members of our school psychology community. I assume the Presidency at a time of unsettled waters among the school psychology community regarding licensure and scope of practice issues. It is hard to predict how the Model

Licensure Act proposed changes will resolve. However they do, it is fair to say the process has been contentious and difficult for the Division as well as our NASP partners. Connections need to continue to be built with our non-doctoral colleagues and a seat recovered at the table for them. My professional allegiance is to professional psychology, and there is a lot of work to do on behalf of children and schools between, as well as within, organizations. I look forward to forging common initiatives with NASP and sharing in their common interests.

It promises to be a good year for the Division. Come along for the ride!

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Presidential Greeting





Assessing School Psychologists' Perspectives on Independent Educational Evaluations

Linda C. Caterino, Amanda Sullivan, Lori Long, Emily Bacal, Charles M. Kaprolet, Rachelle Beard, and Kathrine K. Peterson
Arizona State University

“students with a disability have the right to obtain an independent educational evaluation (IEE) when parents disagree with a district’s educational recommendations for their child (IDEA, 2004).”

This study surveyed practicing members of a state school psychology organization to provide information on school psychologists’ perceptions of independent evaluators’ qualifications, necessary components of an independent educational evaluation, and appropriate criteria for a diagnosis of learning disability. Results indicated that a number of qualifications are regarded as essential for independent evaluators, especially assessment experiences with children with specific learning disabilities (SLD), current knowledge of the nature of SLD, training in a broad variety of cognitive assessment instruments, and understanding of special education law. A review of district records, including response to intervention, assessment of academic achievement and cognitive abilities were regarded as the most important components of an independent educational evaluation. Clinical judgment was selected as the most important criterion for learning disability diagnosis. Implications of these findings on school-based and private practice are discussed.

Introduction

Under the Individuals with Disabilities Education Act, students with a disability have the right to obtain an independent educational evaluation (IEE) when parents disagree with a district’s educational recommendations for their child (IDEA, 2004). Federal laws define an IEE as “an evaluation conducted by a qualified examiner who is not employed by the public agency responsible for the education of the student” (IDEA, 2004). While the law states that once a parent request is made the agency must provide information where an IEE may be obtained and the agency’s criteria for an acceptable IEE, the criteria for an acceptable independent evaluator are not provided in the Federal law and, as a consequence, may vary by state. The purpose of this survey was to

determine school psychologist’s perceptions regarding various aspects of independent educational evaluations for specific learning disability (SLD) determinations.

While few guidelines concerning independent educational evaluations and qualifications for evaluators exist, it is suggested that independent educational evaluators should be knowledgeable about current federal and state regulations, understand issues related to the scope and utility of an evaluation, and be able to present findings to a team that can be supported during mediation and due process (Etscheidt, 2003; Imber & Radcliff, 2003).

A recent survey conducted by Schrank and colleagues (2006) assessed the opinions of Fellows of the American Academy of School Psychology regarding the components of an IEE for specific learning disabilities (SLD), evaluator qualifications, and the diagnostic criteria used in determining the presence of SLD. Respondents were asked to choose the most important components of an IEE from a list of 20 possibilities. The Fellows indicated that cognitive assessment (95%), student interview (94%), consultation with parents (96%), assessment of academic achievement (94%), teacher consultation (94%), assessment of academic achievement (94%) and review of student records, including Response to Intervention (RTI; 96%) were all critical components of an IEE. Additionally, respondents reported that experience in the assessment of SLD children (100%), current knowledge of the nature of learning disabilities (98%), training with a broad variety of cognitive assessment instruments (98%), and professional level ability to communicate assessment results in written form (96%) are essential competencies for evaluators. The majority of the Academy of School Psychology Fellows (94%) reported that clinical judgment was the most important criteria for diagnosis of SLD. In addition, the respondents emphasized that an IEE for SLD

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Perspectives on Independent Educational Evaluations

should not be limited by district or state departments of education policies.

Federal laws do not specifically define professional qualifications of independent evaluators. The recent Schrank et al. (2006) study that evaluated opinions regarding competencies for evaluators only assessed the views of Diplomates in School Psychology and did not seek input from other school psychologists. One of the goals of the present study was to expand this survey to a broader population of school psychologists.

Method

Participants

The sample consisted of 115 school psychologists from a southwestern state. Participants were recruited from the 335 attendees of the Arizona Association of School Psychologists annual convention held in the fall of 2005. Completion of the survey was voluntary. The participants reported the following qualifications: licensed psychologist (35.7%), certified school psychologist (74.8%), Diplomates in School Psychology (13.9%), and Nationally Certified School Psychologists (34.8%). One hundred and seven respondents reported gender and of these, 71% were female. Of the respondents, 102 (88.7%) listed school-based practice as their primary employment, 5.2% listed universities, 1.7% listed private practice, and 1.9% reported a primary hospital affiliation. The participants also provided their highest degree earned: 37.4% reported completing a Ph.D., 5.2% an Ed.D., 5.2% a Psy.D., 16.5% an Ed.S., 21.7% a M.A., and 5.2% a M.Ed. Seven participants did not provide this information. Most of the participants (73.9%) completed a graduate major in school psychology; 11.3% in clinical psychology, 5.2% in counseling psychology, 9.1% in another field, and 3.5% did not report their major. The participants' years of experience in school psychology ranged from 0 to 33 years (*mean* = 14.23 years).

Procedure

The five-item survey created by Schrank et al. (2006) was also employed in this survey. Permission was obtained from the senior author of the study. This survey addressed overall professional opinions regarding IEE and the diagnosis of SLD. Participants responded to the following items:

1. What qualifications or knowledge must examiners possess to be qualified to conduct an IEE?
2. What are the necessary components of an

independent educational evaluation for SLD?

3. What are the principle criteria used to diagnose SLD in an IEE?
4. Should an independent diagnosis for SLD be limited by the criteria or procedures outlined by the school district?
5. Should an independent diagnosis of SLD be limited by the criteria or procedures outlined by the state department of education?

For the first question, respondents were given a list of 19 possible qualifications for an independent examiner; for the second, they were provided with 20 potential components of an IEE and for the third, they were given seven possible criteria that could be used to diagnose learning disabilities in an IEE. They were then asked to check the items that they thought were most important. For questions 4 and 5 participants were asked whether or not they endorsed the statements provided regarding district and state procedures.

Results

The survey was distributed to 335 school psychologists; 115 were returned completed, for a response rate of (34%). The percentage of participants endorsing each item of the checklist was calculated based on the total number of responses received for that particular item (i.e., 111 to the necessary qualifications item, 115 to the necessary components item, and 111 to the principle criteria item). Questions 4 and 5 were reported as the percentage of participants endorsing the statement, again based on the total number of responses to the item (i.e., diagnosis limited by school district, 103 total responses; and diagnosis limited by state department of education criteria and procedures, 99 total responses).

The results for questions 1-3 are shown in Tables 1-3. The majority of respondents (92.8%) indicated that an Independent Evaluator should have assessment experience with children with specific learning disabilities, current knowledge regarding the nature of SLD (91.9%), training in a broad variety of cognitive assessment instruments (91.0%), an understanding of special education law (87.4%) and training in a broad variety of academic achievement assessment instruments (85.6%). Only 10.4% of respondents indicated that Board certification in school psychology or other specialty of ABPP was necessary, and teaching experience with children with learning disabilities and a doctoral degree in school psychology or other specialty relevant to specific learning disabilities

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Perspectives on Independent Educational Evaluations**Table 1****Percentage of Respondents Endorsing Qualifications as Necessary in Independent Evaluators in Rank Order (*n* = 111)**

Qualifications	Percentage	Rank
Assessment experience with children with SLD	92.8	1
Current knowledge of the nature of SLD	91.9	2
Training in a broad variety of cognitive assessment instruments	91.0	3
Understanding of special education law	87.4	4
Training in a broad variety of academic achievement assessment instruments	85.6	5
Professional level ability to communicate assessment results in written form	84.7	6
Experience in direct school psychological services	81.1	7
Understanding of APA and/or NASP ethical codes	79.3	8
Classroom observation skills	78.4	9
Training in response to intervention (RTI)	73.9	10
State Department of Education certification as a school psychologist	72.1	11
Understanding of local education agency special education policies	63.1	12
Availability to attend due process hearing or otherwise defend their assessment	60.4	13
Ability to testify in court as an expert witness	41.4	14
Nationally Certified School Psychologist	23.4	15
Licensure for independent practice by the state department of health or board of psychologist examiners	19.8	16
Teaching experience with children with SLD	17.1	17
Doctoral degree in school psychology or other specialty relevant to SLD	17.1	17
Board certification in school psychology or other specialty of the ABPP	10.4	19

were tied in 17th position, with only 17.1% of the participants endorsing these qualifications. Interestingly, only 19.8% of the survey respondents listed licensure for independent practice as necessary, placing this qualification in the 16th position.

The respondents indicated that the most important components of an evaluation were: review of school district records including RTI (96.5%); assessment of academic achievement (94.6%); assessment of cognitive ability/processes (92.2%), consultation with the teacher (92.1%), observation of the student in the classroom (91.3%) and consultation with parents (91.3%). Screening for neuropsychological problems (48.7%) and the determination of a psychological diagnosis according to the DSM-IV TR criteria (34.7%) were considered to be the least important components of an IEE.

The majority of respondents (76.4%) endorsed

clinical judgment (integration of quantitative and qualitative data by an experienced clinician and the presence of multiple diagnostic markers) as the most important criteria in making a diagnosis of SLD. The presence and severity of an explanatory cognitive processing deficiency was ranked second (74.6%), with the presence and severity of an ability/achievement discrepancy third (73.0%). Response to Intervention was ranked as the fourth most important criteria in making a diagnosis of SLD (67.6%).

The majority of respondents did not believe that an independent diagnosis of SLD should be limited by the diagnostic criteria or procedures outlined by a school district (75.7%) and a similar percent (76.76%) indicated that the diagnosis of SLD should not be limited by the diagnostic criteria or procedures outlined by the state department of education.

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Perspectives on Independent Educational Evaluations**Table 2****Percentage of Respondents Endorsing Assessment Components as Necessary in an Independent Evaluation in rank order (*n* = 115)**

Assessment Components	Percentage	Rank
Review of school district records, including RTI	96.5	1
Assessment of academic achievement	94.6	2
Assessment of cognitive ability/processes	92.2	3
Consultation with teacher(s)	92.1	4
Observation of student in classroom	91.3	5
Consultation with parents	91.3	5
Suggestions for meeting educational needs	88.7	7
Interview with student	87.8	8
Assessment and/or screening for associated problems, other etiologies	80	9
Report from teacher	80	9
Educational diagnosis (i.e., IDEA)	78	11
Language use and exposure assessment	73	12
Assessment of exclusionary factors	68.7	13
Attendance at school multidisciplinary meeting	68.7	13
Specific placement recommendations	56.6	15
Rating scale from teacher(s)	53	16
Evaluation of acculturation	52.2	17
Rating scale from parents	50.4	18
Screening for neuropsychological problems (e.g., sensory-motor functions)	48.7	19
Psychological diagnosis (i.e., DSM-IV TR)	34.7	20

“Best practices would indicate that Independent Educational Evaluators conducting evaluations outside of the school district should be licensed for independent practice, unless state law clearly indicates the contrary.”

Discussion

In accordance with Schrank et al. (2006), the majority of the respondents endorsed the same three items (i.e., assessment experience with children with SLD, current knowledge of the nature of SLD and training in a broad variety of cognitive assessment instruments) as the most important qualifications for independent educational evaluators, although the exact order of these three qualifications differed. While licensure was considered important by 66% of the respondents in the Schrank et al. (2006) study, it was only considered necessary by less than 20% of the respondents in the present study. This discrepancy is understandable given that licensure status is required for all Diplomates, but is not required for certification as a school psychologist, and less than 36% of the respondents in this survey were licensed. Additionally, it is not surprising that half of Schrank et al.'s (2006) endorsed ABPP status as a required credential for independent evaluators, in contrast to

just 10% of the current sample.

In the present survey, the top five components considered to be necessary in an independent educational evaluation were: review of school district records including RTI data; assessment of academic achievement; assessment of cognitive/ability processes; consultation with teacher and observation of student in the classroom and consultation with parents. This is in contrast to the Schrank et al. study (2006) where the assessment of cognitive abilities and processes was ranked first, interview with the student second, consultation with parents third, assessment of academic achievement fourth and suggestions for meeting educational needs, fifth. In the present study, review of records including RTI was first, but only seventh in the Schrank study which may represent the emphasis placed on RTI in the state. For example, there is an RTI task force with regular meetings and frequent trainings with district school psychologists. However, it is interesting to note that

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Perspectives on Independent Educational Evaluations

“It is important for school psychologists who desire to become independent educational evaluators to know the legal requirements of their state and to understand what school psychologists may consider to be essential components of an independent educational evaluation.”

while record review including RTI was considered an important component of an IEE evaluation, training in RTI was not considered an important qualification for IEEs (ranked 10th). Cognitive assessment was considered to be important by both groups, first in the Fellows survey and third in the current survey. In addition, in the present study, school psychologists ranked interviews with parents and students of lesser importance than did the Academy Fellows, which may represent time constraints experienced by the Arizona school psychologists given the shortage of school psychologists in their state. Interestingly, in a state with a high percentage of minorities and English Language Learners students, neither language nor

fourth by both the Arizona school psychologists and the Academy Fellows. Furthermore, there was little support for limiting the diagnosis of learning disabilities by district or state criteria or procedures, perhaps in an effort to keep the evaluation completely “independent.”

The results of this study provide insight into several issues in the field of school psychology. First, while nationally RTI is viewed as an alternative to the ability-achievement discrepancy as a qualification criterion for learning disabilities (VanDerHeyden, Witt, & Gilbertson, 2007), it appears that practicing school psychologists in this survey and Fellows of the American Academy of School Psychology still view cognitive assessment and an

Table 3
Percentage of Respondents Endorsing Criteria for Diagnosis of SLD (*n*=111)

Principle Criteria	Percentage	Rank
Clinical judgment (integration of quantitative and qualitative data by an experienced clinician; presence of multiple diagnostic markers)	76.4	1
Presence and severity of an explanatory cognitive processing deficiency	74.6	2
Presence and severity of an ability/achievement discrepancy	73.0	3
Response to Intervention	67.6	4
Ability/achievement consistency model	35.4	5
Number of years behind grade level	24.5	6
Underachievement cutoff model (achievement level cutoff scores)	15.3	7

acculturation factors were ranked in the top 10 necessary components of an independent educational evaluation, with endorsement by only 73% and 52.2%, respectively.

When diagnosing SLD, clinical judgement or the integration of both qualitative and quantitative data and the presence of multiple diagnostic markers was considered to be the most important criteria in both surveys, which suggests that school psychologists consider the use of more one data source to be important in completing an evaluation and that they believe that professional judgment cannot be completely replaced by strictly quantitative criteria. Interestingly, the presence and severity of a cognitive processing deficit was considered to be the second most important criterion and the presence of an ability/achievement discrepancy was ranked third. Response to Intervention as criteria for an IEE of specific learning disabilities was only ranked

achievement ability discrepancy as more important criteria for the diagnosis of a learning disability in the context of IEE.

Second, there appears to be a mismatch between the ethical and legal criteria for Independent Educational Evaluators and what is considered appropriate practice by the school psychologists in this study and, to a much lesser extent, Fellows of the Academy. Only 66% of the Fellows and 19.8% of the Arizona school psychologists rated licensure in psychology by the state department of health or board of psychologist examiners as a requirement for Independent Educational Evaluators. Certification by the State Department of Education, a requirement for employment as a school psychologist in Arizona, was ranked 11th and endorsed as a necessary qualification for evaluators by only 72.1% of the respondents to this survey.

Perspectives on Independent Educational Evaluations

This raises questions regarding whether or not IEEs are considered to be part of psychological practice, which is limited to licensed psychologists, and whether school psychology can be practiced outside of the boundaries of the school itself if the evaluator is not a licensed psychologist. Since the survey was conducted in Arizona, the Arizona Statutes of the Board of Psychologist Examiners (www.psychboard.az.gov/statutes.pdf) were consulted. The statutes are quite stringent and state that not only can a person who is not licensed as a psychologist be enjoined from practicing psychology (32-2083 A. 1.), but that "it is a class 2 misdemeanor for a person not licensed pursuant to this chapter to engage in the practice of psychology" (32-2084 A.). The practice of psychology is defined as "the psychological assessment, diagnosis, treatment or correction of mental, emotional, behavioral, or psychological abilities, illnesses or disorders ..." (www.psychboard.az.gov/statutes.pdf 32-2061. A. 8.). Certainly, an independent educational evaluation which employs a cognitive assessment measure would clearly be classified under the psychological assessment of mental abilities. The Arizona Association of School Psychologists also state in their website (www.aasp-az.org) that it would be illegal for non-licensed school psychologists to perform private independent educational evaluations. However, they do make the caveat that if the school psychologist was contracted to perform the evaluation "through the employment of a school or district, this practice is acceptable" (see www.aasp-az.org).

The National Association of School Psychologists (n.d.) reports that only seven states allowed for the practice of school psychology in the private sector by certified/non-licensed school psychologists. These exemptions were for only limited practice, with only one state, Kansas, specifically stating that certified school psychologists can be Independent Educational Evaluators. Nationally, there does not appear to be a standard of practice regarding this issue. Best practices would indicate that Independent Educational Evaluators conducting evaluations outside of the school district should be licensed for independent practice, unless state law clearly indicates the contrary.

Finally, the questions regarding whether or not IEEs should be limited by specific state or district criteria are also interesting. While the evaluation should be by definition, independent and not unduly

influenced by district policies, state legislation and procedures may need to be taken into consideration. Since school psychologists practicing within school districts are constrained by state criteria, there could be a significant discrepancy in diagnosis or recommendations if independent educational evaluators do not follow similar guidelines. But, as some states move toward eligibility requirements based exclusively on RTI data, independent educational evaluators may be challenged to provide independent data documenting the student's weekly educational progress or their response to specific educational interventions. This may lead to a different definition and process for independent educational evaluations in the future.

In summary, this study examined the perspectives of school psychologists on independent educational evaluations for specific learning disabilities. Their views on the qualifications for evaluators, necessary components of evaluations and the criteria for making a diagnosis of SLD were assessed. Legal ramifications regarding the qualifications of potential evaluators were discussed, as well as potential issues relating to changing eligibility requirements for learning disabilities. It is important for school psychologists who desire to become independent educational evaluators to know the legal requirements of their state and to understand what school psychologists may consider to be essential components of an independent educational evaluation.

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Personality Assessment in School-Based Practice: Considerations, Challenges, and Competence

Tony D. Crespi and Natalie N. Politikos
The University of Hartford

“...approximately 4.5 to 6.3 million children and adolescents in the United States have a serious emotional disturbance that undermines functioning and presents risk for their future.”

Schools are facing a growing array of socio-emotional and mental health issues in children. Marsh (2004) noted, for instance, that approximately 4.5 to 6.3 million children and adolescents in the United States have a serious emotional disturbance that undermines functioning and presents risk for their future. Still, this news is not new. Almost a decade has passed since Roberts et al. (1998) noted that children and adolescents represent a large segment of the population with unmet mental health needs, and Ysseldyke, Dawson, Lehr, Reschly, Reynolds, and Telzrow (1997) reported that the “student population entering the American classroom is more challenging than at any time in our recent history” (p.1).

Given the serious problem of socio-emotional difficulties in school-age youth, psychological evaluations represent an important vehicle for assessing and diagnosing children’s emotional issues. In fact, Hodges (2004) noted that psychological evaluations can be critical in accessing services and describing socio-emotional functioning. Still, looking at emotional issues, personality assessment represents one of the more challenging aspects of assessment.

As we examine the challenging aspects of personality assessment, it is important to note that Stedman, Hatch, and Schoenfeld (2001) reported that training in objective personality testing and projective personality testing is important in the broad field of professional psychology, in addition to training in cognitive assessment. Personality assessment has a long history in the field of psychology. Childs and Eyde (2002) observed, for example, that the Boulder Conference in 1948 identified personality appraisal as one of the core areas of professional practice. Unfortunately, not all school psychologists embrace personality assessment as a key component in conducting a comprehensive evaluation. Furthermore, the more subjective nature of certain personality assessment techniques, the extensive training required, and the concern of the validity of findings as they pertain to litigation have further curbed this domain of

assessment. This article examines the effective use of personality assessment tools, with particular attention to issues of co-morbidity. Guidelines for effective practice are also offered.

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Assessment of emotional/behavioral/psychiatric disorders in children is complex. After all, many children meet diagnostic criteria for multiple disorders (Angold, Costello, & Erkanli, 1999). Looking at Attention Deficit Hyperactivity Disorder (ADHD), for example, Szatmari, Offord, and Boyle (1989) found that 44% of children with ADHD also met diagnostic evidence for a second disorder, and 33% met criteria for two or three additional disorders. In the case of depression, it is common for children to be diagnosed with co-existing disorders such as anxiety, ADHD, Oppositional Defiant Disorder (ODD), and Obsessive Compulsive Disorder (OCD) (Kessler, Avenevoli, & Merikangas, 2001). School psychologists engaged in assessment and diagnosis, then, may find it challenging to comprehensively assess the issues. At the same time, while most would never use a single subtest to measure global intelligence, within personality assessment, single measures are studied with regard to diagnostic value and found lacking. In actual practice multiple assessment tools are typically used to assess and diagnose socio-emotional issues.

Given the complexity of mental health issues in children and the extensive comorbidity observed, both initial and reevaluations should use multidimensional and comprehensive assessment approaches. Wingenfeld (2002), in a critical examination of comorbidity found that unidimensional measures may only reflect one disorder and miss coexisting disorders.

Within school psychology, personality tests and projective tests have been noted to be “extremely” helpful in identifying social-emotional disorders (Knauss, 2001). It is increasingly important to identify classes of disorders within the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV; APA, 2000) as well as consider categories used in

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special education. Unfortunately, the author notes that despite her value, many school psychology training programs do not include coursework in these areas and, as a result, many school psychologists do not use projective assessment measures. In a basic way, personality testing can be useful for school psychologists. Garb, Wood, Lilienfeld, and Nezworski (2002) indicated for example, in their critical review of projective testing, that the Rorschach can be helpful in detecting a thought disorder, the Thematic Apperception Test (TAT) can be helpful in detecting Borderline Personality Disorder, and projective drawings have been helpful in screening mental disorders.

It might be suggested, though, that while emotional disturbance is high in children and adolescents, and while personality assessment is deemed valuable, not all school psychology interns or all graduates enter the field prepared to conduct this component of psychological testing. Certainly this seems troubling, as a lack of adequate preparation suggests weaknesses in comprehensive assessment of socio-emotional issues. Evans and Rey (2001) indicated that the recent rash of school shootings alone has thrust psychologists into a key role in assisting in preventing extremes of juvenile violence, with greater requests to become more involved in assessment and treatment of youth deemed at-risk for violence. The majority of children referred in their investigation were noted to exhibit problems consistent with diagnoses of ODD and ADHD, both predictors of later serious and violent juvenile offending.

With regard to personality assessment, it is clear that the bulk of the research considers whether a single instrument is successful in identifying or predicting specific behavioral problems. This type of approach is lacking in two notable regards. First several personality measures, such as the TAT, might be best conceptualized as observational tools and/or assessment techniques rather than projective tests. Second, issues of validity and reliability often are applied without a full understanding of the way the measure is constructed and how it yields meaningful data. Finally, practitioners typically utilize multiple personality measures in an attempt to gauge overlapping signs and diagnostic symptoms rather than relying on single measures. Practitioners and supervisors should consider each component in turn.

Looking at the first two issues, the TAT is an

ideal tool to illustrate these points. To start, in a critical discussion on the use of the TAT, Cramer (1999) noted that different cards "pull" for different themes – indicating that scores for one picture for one person may be quite different for another picture with another person with different conflicts. Looking across cards, the use of reliability measures such as coefficient alpha would be an inappropriate statistic to use with this type of instrument. Similarly, test-retest measures are not appropriate, as initial exposure may modify responses as individuals have lost "surprise" and novelty. In addition, developmental changes as well as internal and external factors can change responses. Hence, it is inappropriate to apply the same psychometric properties and psychometric standards to this assessment method as to, for example, measures of intelligence. The TAT is, then, a personality technique, and can and possibly should be examined within this framework. We suggest that the TAT can be used reliably and with validity but it must be used and understood within the context of a projective technique built within a storytelling narrative framework (Cramer, 1996, 1999).

Used as described by Cramer (1996, 1999), and within the idiographic framework from which it was intended, the TAT can reveal attitudes, psychopathological processes, and motivations. Yet, Rossini and Moretti (1997) noted that much of the literature on the TAT is not discussed in classes teaching the technique, suggesting that preparation is superficial. These authors suggest the following: 1) the TAT might not be called a test but considered a projective interviewing tool, 2) clinicians using the TAT should read from the extensive literature on the TAT to deepen interpretation skill, and 3) for professional psychologists in general, there is a need for a contemporary TAT manual, as well consensus on approved readings and syllabi.

For school psychologists assessing emotional disorders, multiple sources and multiple methods should be a standard for practice, if the practitioner is to obtain a meaningful profile. Certainly different personality measures make different contributions and reflect different client weaknesses. Such can be said, though, of any assessment measure. In the future, research combining behavior rating scales, projective measures, and objective personality measures, along with a range of cognitive and processing assessment tools may be viewed as most useful and productive in assessing complex psychological disorders in children.

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“Children’s mental health problems represent a critical challenge for society.”

Considerations Relevant to Personality Assessment

Consideration #1: School Psychologists should conduct comprehensive psychological assessments exploring all components of cognitive, socio-emotional, personality, and intellectual processing, as this models a best practice approach to thoughtfully considering contemporary personality difficulties such as emotional disturbance.

Professional practice standards support the use of comprehensive evaluations. Nevertheless, many educators and practitioners do not fully understand that while a learning disability (with no behavioral nor emotional components), as example, might be present in elementary school. Subsequent evaluations must continue to use a comprehensive model as a range of further learning, emotional and behavioral disorders might arise in later years.

With children demonstrating varied disorders, and with problems arising at different life ages and stages, a comprehensive assessment model, one also taking into account how cognition informs emotion and vice versa, can be valuable. How does self-image change with LD? For a child with ADHD, how does cognition and emotionality interplay? A comprehensive assessment can address these and other questions.

Consideration #2: School psychologists should thoughtfully consider issues of co-morbidity in examining possible emotional disorders in children and adolescents.

Contemporary research has provided substantial documentation that emotional disorders in children often do not occur in isolation (Carlson & Waterman, 2002). Rather, multiple emotional disorders often can emerge over the developmental trajectory. Assessment and diagnosis must attend to this information. Training programs should consider balancing the teaching of intellectual and cognitive assessment skills to their graduate students with a range of complimentary personality measures and models.

Consideration #3: School psychologists should include multiple personality measures in conducting a psychological evaluation which might assess personality issues.

To properly take into account psychometric strengths and weaknesses, measures should be selected drawing from different theoretical models and designs. An instrument such as the TAT, as an example, should be complemented by personality measures using differing models. A TAT might be balanced, as example, by an MMPI-A, Sentence

Completion Test, and a behavioral rating scale, or semi-structured interview (i.e., KSADS). This type of an approach would include a nice balance of what we would consider objective and subjective measures.

Consideration #4: School Psychologists should read extensively from the literature on personality assessment in order to minimize error and maximize precision and caution.

Different components of personality tests can “pull” for different issues – indicating that scores for one TAT picture, for example, for one person may be different for another picture with another person with different conflicts. Consistency across results, then, is not expected. In addition, developmental changes in children as well as internal and external factors can change responses across the lifespan. School psychologists need to understand these points and read more extensively in the personality assessment literature to maximally develop skills to competently interpret evaluations.

Consideration #5: School psychologists wishing to utilize instruments including the Rorschach, Thematic Apperception Test, and the House-Tree-Person Technique should obtain training in the interpretive aspects of each technique and be well versed in their strengths and weaknesses.

Practitioners should understand that not all personality measures and techniques are equally viable and valuable. Contemporary practitioners should study the various psychometric limitations of each technique, as well as populations that might best be served by use of each technique. For example, WHAT test has been shown to provide WHAT insights about WHAT population?

Conclusions

Children’s mental health problems represent a critical challenge for society. With 4.5 to 6.3 million children and adolescents demonstrating a serious emotional disturbance that undermines functioning (Marsh, 2004), school-age children represent a high risk for mental health issues.

Within this context, school psychologists are in an unprecedented position from which to offer assistance. Hodges (2004) noted that psychological evaluations can be critical in accessing services, describing current functioning, serving as a baseline, and generally maximizing treatment utility. Given that psychological assessment remains a cornerstone of professional practice for school psychologists, personality assessment must be

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understood as one important component to a comprehensive evaluation addressing socio-emotional issues.

Unfortunately, not all school psychologists are competent or confident in this area of practice. Given the number of children with emotional issues, though, practitioners need to consider further training and a greater understanding of the role personality assessment can play in helping children. Developing professional guidelines for personality assessment is one vehicle that may be helpful. Continuing education workshops on personality assessment is another important tool. In combination, this can result in enhanced skills for school psychologists.

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Please email all submissions for The Commentary Section to: michelle.athanasiou@unco.edu.





Preference Assessments

Joseph D. Salerno
Rutgers, the State University of New Jersey

“A preference assessment can best be defined as structured choice-making procedures presented by an instructor to a student.”

Formalized preference assessments, which utilize repeated use of the same procedures and rely on the collection of data, originated as an applied behavior analysis technique. This assessment methodology is historically associated with the evaluation and treatment of individuals with developmental disabilities such as autism, but more recent studies have examined the utility of preference assessments with other populations including children diagnosed with attention-deficit hyperactivity disorder (ADHD; Northup, George, Jones, Broussard & Vollmer, 1996; Northup, Jones, Broussard, & George, 1995) and older adults with dementia (LeBlanc, Cherup, Feliciano, & Sidener, 2006).

A preference assessment can best be defined as structured choice-making procedures presented by an instructor to a student. The results of this assessment can be used to identify preferred items or activities, which can then be utilized as reinforcement to increase adaptive behaviors or decrease problematic behaviors. Identifying preferred items or activities is often necessary to motivate members of clinical populations. In particular, the qualitative impairments in social interaction that characterize autism and pervasive developmental disorders can result in an unwillingness to work for either verbal praise or the intrinsic reward of accomplishment (American Psychiatric Association, 1994), thus the need for tangible rewards. The necessity of finding an accurate way to assess the preference of individuals with autism and other severe developmental disabilities may be one reason that most formal preference assessment literature has focused on individuals who are severely impaired or low in cognitive functioning.

The term “low-functioning” is a relative one, and the assessment of preference can be used with a wide variety of children and adults who are experiencing difficulty performing tasks—either in school or in a job setting. Preference assessment is an important method for determining what is rewarding for an individual and what he or she might be willing to work for, and an important tool in the school psychologist’s arsenal of assessment methodologies. This article will focus on several studies which involve the formal preference assessment utilized with the most impaired

members of the child and adolescent population.

Simple Assessment of Preference

The most straightforward form of assessing preference is simply asking the client child to identify his or her preference for an item or activity used for reward, a technique which is in actuality a preference assessment methodology that many teachers and caregivers engage in naturally. This strategy, of course, is dependent on the individual being able to communicate verbally. Even if the person questioned in such a manner is capable of understanding what is asked and providing a verbal answer, the clinician should keep in mind that these questions may not always be answered accurately.

Cohen-Almeida, Graff, and Ahearn (2000) compared tangible preference assessments in which items were placed before a student to verbal choice in which items were not present and the student was simply asked, “Do you want X or Y?” The students who participated in this study were diagnosed with mental retardation, behavior disorders or both conditions. All six participants in this study had demonstrated comprehension of two-step instructions and sentences using conjunctions. For four of the six participants in the study, both of the assessment methods yielded the same high preference items and for five out of six participants there was agreement on the lowest preference items. But for one individual in this study there was little correlation between the two assessment methods. Therefore, results of verbal assessments of preference may not always match tangible choice selections.

Another method of assessing preference sometimes used with individuals with communication impairments relies on pictorial selection of the preferred item. Higbee, Carr, and Harrison (1999) compared the reinforcing strength of stimuli selected via pictorial representations with selection of the tangible item in two individuals with mental retardation. Utilizing a single-case design and a multiple stimulus without replacement procedure, the authors found that for the two individuals in their study, stimuli selected by tangible assessment were more potent reinforcers than those chosen by pictorial selection. Because pictorial selection can utilize the same basic methodology as tangible selection, it is useful to conceptualize tangible

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preference assessment methods as representative of preference assessments while keeping in mind that there can be variations on this theme.

Northup, George, Jones, Broussard and Vollmer (1996) published a study which compared both verbal and pictorial stimulus choice preference assessments to a survey preference assessment which consisted of a simple 3-point scale. In this study, four verbal children diagnosed with ADHD were asked if they liked a specific item a little, a lot, or not at all in the survey preference assessment. In the verbal stimulus choice preference assessment, these same items were presented entirely verbally (e.g., "Would you rather ___ or ___?") and in the pictorial stimulus choice assessment pictures which demonstrated the various stimuli were used. Survey results did not agree with the verbal or pictorial stimulus preference assessments. Specifically, the survey method rated items as high preference, did not identify low preference stimuli, and did not specifically agree with subsequent tangible assessments of reinforcer strength. The verbal and pictured methods identified distinct high and low preferences and agreed with subsequent reinforcer assessment.

Simple preference assessment through behavioral measurement can be contrasted with direct observation as a means of determining preferred items. Clinically, many practitioners have utilized direct observation of free play for determining client preferences. This works by simply presenting an array of tangible items and noting which ones the child plays with during an observation period. When this method of direct observation was compared with other methods of preference assessment in a sample of nine children with ADHD it was found that overall, assessment methods disagreed more than often than they agreed. All three methods of preference assessment (forced choice, observation, and verbal response to a question asking which one does the child want to "work for") agreed on the preferred toy for only one child (Northup, Jones, Broussard, & George, 1995).

Behavior analysts have developed several formal methods of tangible preference assessment which include single operant or stimulus preference assessment (Pace, Ivancic, Edwards, Iwata, & Page, 1985), paired or forced-choice preference assessment (Fisher, Piazza, Bowman, Hagopian, Owens, & Slevin, 1992) and multiple stimuli without replacement preference assessment (MSWO; DeLeon & Iwata, 1996; DeLeon, et al., 2001). Since these methods have shown the most utility with

individuals with the greatest impairments, the focus of the remainder of this report will be to compare these three methods, examine the strengths and limitations of each, and offer recommendations to the school psychologist for clinical practice.

Single Operant or Stimulus Preference Assessment

A study by Pace et al. (1985) described single operant or stimulus preference assessment. The term single operant or single stimulus refers to the single item which is presented to the participant in this study. This study included six inpatients with profound retardation between the ages of 3 and 18 who were described as having an absence of self-help skills or ability to follow instructions. While two of these patients were non-ambulatory, none showed obvious sensory impairments. In the first experiment, which was run in a group activity room with three to seven patients and two to three staff present, 16 different stimulus items were presented (including a light box, a mirror, a tape-recorded song, a beeper, coffee, a dried hibiscus flower, juice, a piece of graham cracker, a vibrating cylinder toy, a paper fan, a heating pad, an ice pack, a swing, a rocking chair, hand clapping, and a hug). The last two items were "given" to the patient by the experimenter either performing the clapping within the patient's hearing or encircling the patient with his or her arms and patting the patient's back. In each of the eight assessment sessions, four predetermined stimulus items were presented five times (20 trials per session) in a counterbalanced order so that each of the 16 stimulus items were presented at least 10 times. Data were collected on whether the participant approached the item within five seconds. If the participant did, he or she was given five seconds of access to the object or experience. If no approach was made the participant was prompted to sample the item. The therapist prompted by ensuring that the child made eye contact with the item and showed it functioning. After prompting, the item presentation probe was repeated. The data indicated that all of the participants in this experiment differentially approached assessment stimuli. Patterns of responding were idiosyncratic—there was no consistency between child approach to any of the stimuli.

There is a difference between a preferred item and a reinforcer. The first is simply an item which is chosen when given a choice to do so or not, while a reinforcer is an item which actually functions as

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something that a person is willing to work for in order to obtain. To assess whether items identified by the single operant or stimulus preference assessment procedure above actually functioned as reinforcers, a second experiment was performed in Pace et al. (1985) to measure whether items identified as preferred by this procedure could also increase the frequency of a response if the item is provided contingent upon that response.

The same six individuals with profound mental retardation participated in this experiment as in the previous one. Items were classified as preferred stimuli if the item was approached on at least 80% of the trials of the single operant or stimulus preference assessment and were classified as non-preferred stimuli if they were approached on 50% or less of the trials. Each session in this experiment consisted of 10 trials, in which the therapist presented a vocal direction and modeled the target response (reach, look, raise your hand, touch my hand, and say "eat" were used as adaptive behaviors which were exhibited at low levels prior to assessment for these children). In baseline, these requests were presented at a 10-second interval with no consequences for compliance. During the preferred condition a preferred item was delivered for five seconds contingent upon the target response. In the non-preferred condition a non-preferred item was delivered for five seconds contingent upon the target response. Conditions were arranged in a reversal design with the order of conditions varied across subjects. The results indicated that contingent use of preferred stimuli increased target behavior relative to baseline and non-preferred conditions. These results held when conditions were shifted from baseline to preferred, nonpreferred to preferred, and preferred to nonpreferred. There was one exception to these results among the six individuals in this experiment: A nonpreferred stimulus of a hug increased the target behavior of looking. The experimenters hypothesized that it is possible that this may either represent a lack of correspondence between the preference assessment and reinforcer value or this result may have been caused by the development of social reinforcers over the sessions in which the novel experimenter became more familiar and reinforcing to the participant.

The Pace et al. (1985) article was one of the first attempts to systematically examine preference. It also described a simple and relatively quick way to increase a target behavior by using preferred

items. In a variation of this method (Roane, Kelly, & Fisher, 2003), individuals who present with automatically reinforced problem behavior can be provided access to items that are hypothesized as capable of competing with the problem behavior while data are collected on the engagement of both problem behavior and engagement with the competing item. Items that effectively compete with the problem behavior can then be used in treatment. This procedure, called competing items assessment, has been used in published studies of treatment of object mouthing (Roane et al., 2003) in which stimuli found to successfully compete with object mouthing (including bubble gum, marshmallows, and hard candy) were provided by a fanny pack the individual was given to wear. Providing these stimuli non-contingently was found to reduce object mouthing, which when combined with object ingestion can form the potentially life-threatening condition of pica.

While single-operant or stimulus preference assessment and its associated competing items assessment can be a useful preference assessment method due to its ability to detect quickly and easily detect a preferred item, a criticism of this method is that it can have a high rate of over-identification of preferred items (Fisher et al., 1992). A number of stimuli can be identified by this method, but not all are equally useful as reinforcers. Generally it is noted that this method does have a high rate of over-identification of preferred items—stimuli which are identified as preferred but are not necessarily equally useful as reinforcers. For that reason, Fisher et al. (1992) developed a technique with greater selectivity.

Paired or Forced-Choice Preference Assessment

In an experiment by Fisher et al. (1992), four children with mental retardation of ages 2 to 10 years were presented the same items in the same single operant or stimulus format as the first experiment of the Pace et al. (1985) study. Fisher and colleagues then had these children take part in what they called a paired or forced-choice preference assessment. In this procedure each stimulus item from the same list of items utilized in the initial experiment was presented concurrently with another stimulus item from that list. If the child approached either one of the two items, he or she was given five seconds of access to that item. If neither was approached, the child was prompted to

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sample each item and then both were presented for another five seconds. Attempts to approach both items were blocked. Results indicated that all of the items which were rated as preferred in the paired or forced-choice preference assessment (determined by dividing the number of times each item was selected by the number of times it was presented and then finding the highest ranked items) were also identified as preferred using the single operant or stimulus preference assessment. This indicates that the two assessment methods agreed on high preference items. The two methods not only agreed with each other as to which items were highly preferred, but the paired or forced choice method refrained from identifying items as highly preferred which were not also identified as highly preferred by the single operant or choice method. However, the method designed by Pace et al. did rate stimuli as highly preferred which were not rated as highly preferred by the Fisher et al., method.

Two groups of stimuli were then used in the second phase of this study. Items which were rated high in both the single operant or stimulus method and the paired or forced choice method and items which were rated high in the single operant or stimulus method. These items were provided contingent on adaptive behavioral responses which assessed reinforcer effectiveness. The results indicated that the items identified as highly preferred by both the single operant or stimulus preference assessment and the paired or forced choice preference assessment worked better as reinforcers (e.g., increased adaptive behaviors) than items identified as high in only the single operant or stimulus preference. Indeed some of the items identified as highly preferred by the single operant or stimulus method did not function as reinforcers at all (Fisher et al. 1992).

The advantages of the paired or forced-choice method include its ability to identify relative preferences between stimuli (which one is most reinforcing, which one is second most reinforcing, and so on). Compared to the single operant or stimulus preference assessment this method refrains from over-identifying stimuli as reinforcing when they are not, all of the stimuli identified as preferred by the Fisher et al. (1992) procedure were also identified as preferred by the Pace et al. (1985). While the Pace et al. study identified stimuli as preferred that turned to not be reinforcing none were so identified by the paired or forced choice preference assessment alone. Fisher et al. (1992) did

mention that the single operant or stimulus method "may still be preferable with extremely low functioning individuals who have difficulty making reliable choice responses" (p. 494).

Multiple Stimulus Without Replacement (MSWO)

DeLeon and Iwata (1996) evaluated three procedures for preference assessment first of which was the paired or forced-choice format described above. They also devised a method in which all the items that would be assessed would be presented together on a table before the participant with each item approximately 5 cm apart. There were two variations of this method, the first in which, after the participant was prompted to select an item and interacted with it for a short period of time, the item was removed from selection. This is referred to as multiple stimulus without replacement (MSWO). The second method required that the item which was interacted with, was placed back into the array for selection on another trial. This is called multiple stimulus with replacement (MSW). In both procedures, the sequence of items was rotated after each trial by taking an item at the end of the line of items and shifting it to the opposite side and moving the items to fit them all on the table. Results suggested that the paired or forced-choice preference assessment and the MSWO both showed moderate to high levels of agreement with correlational means of .81 and .83, between each other. There was less agreement between these two methods and the MSW method with a mean of .57.

In the second experiment, which involved four participants of the reinforcement effects of items selected as preferred in each procedure, items that had been identified in both the paired or forced-choice procedure and the MSWO procedure functioned as reinforcers. But items that had not been selected by the MSW procedure but were identified by the other two preference assessment procedures were identified as reinforcers. Thus the MSWO procedure was as effective as the paired or forced-choice procedure at selecting reinforcers, but as the authors noted accomplished this in a shorter period of time.

DeLeon et al. (2001) directly compared MSWO to paired or forced-choice preference assessment and proposed that MSWO and other brief assessments of preference functioned best to detect momentary or transient changes in preference with stimuli already selected as preferred by a more

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Preference Assessments

lengthy assessment. The procedures utilized in this research comparison suggest a useful method that can be utilized clinically by practitioners in school settings. This study began with a simple assessment of preference by having the primary caregivers of five individuals with developmental disabilities produce a list of items that they believed functioned as reinforcers for the five children or young adults under their care. All of the five students presented with severe behavioral problems; their ages ranged from 8 to 25 years old. A paired or forced-choice preference assessment using these items was performed with each child or young adult at the beginning of the instructional program and MSWO preference assessments were performed prior to instruction each day to determine daily preferences. On days when the daily MSWO differed from the paired or forced-choice assessment results obtained at the beginning of the program a reinforcer assessment session was conducted by placing three identical task sets in front of the participant with the stimulus item selected by the MSWO behind one task set and the stimulus item selected by the paired or forced-choice assessment behind the second task set while the third task set had nothing behind it. The individual was instructed to "work for what you want."

Data collected over the course of the study indicated that the most highly preferred item on the paired or forced-choice assessment was not usually the top ranked item on the MSWO procedure. But on most of the daily assessments the top four most preferred items identified by MSWO contained the most highly preferred item on the paired or forced-choice preference assessment. In the reinforcer assessment trials which were conducted on days when the MSWO differed from the paired or forced-choice assessment results, the MSWO item tended to be selected as the most potent reinforcer.

The brevity of a MSWO is one of its main advantages over the paired or forced-choice preference assessment. Additionally, it is a method that is more sensitive to transient fluctuations in preference and can be easily performed in a classroom on a daily basis. Its use is contraindicated in cases where an individual has trouble selecting objects out of a large array.

Limitations of Preference Assessments, Recommendations for Practice and Conclusion

In addition to the limitations already mentioned for each specific preference assessment method,

there are some questions about design across the various studies examined in this review. Compared to usual practice in psychology, all of these studies utilized very small sample sizes. While it is not uncommon in applied behavioral analysis for such small samples to be used in single-subject design, use of such limited subject pools leads to questions about the applicability of results across a diversity of clientele. In addition, the studies imply that preference assessments are typically conducted by the typical instructional staff (on a daily basis with the MSWO) during an individualized instructional time. Staff resources, ability to consult with school psychologists who have the necessary experience and training may not be available to the extent needed to implement preference assessments in settings where most school psychologists function. There is a need for more research addressing both these design issues and further research should be conducted on preference assessments utilizing non-tangible items and individuals who are functioning at a comparatively higher level than those discussed in the studies in which preference assessments were first designed.

Even with these limitations, it can still be concluded that the quantitative assessment of preference through structured methods that use tangibles can be a particularly useful technique for determining preferences for individuals who have difficulty reliably expressing their preferences through other methods. In particular, a preference assessment procedure utilized by DeLeon (2001) can form a specific recommendation for practitioners. This method utilizes simple collection of suggestions from caregivers, followed by more in-depth paired or forced-choice preference assessment which is followed up with a daily MSWO, may be suggested as a model for practice by non-researchers. The implications of the utilization of such a procedure clinically or in school settings include increased learner motivation resulting from utilizing the most preferred stimuli as the reward for work. Using items that are preferred can lead to more effective intervention design and faster results than using items whose qualities as a potential preferred item are unknown or limited.

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Please email all submissions for The Commentary Section to: michelle.athanasiou@unco.edu.

Fun Photos

Which school psychologist is driving this boat?



*Dr. Thomas Kratochwill
(Crew Chief) and his boat
racing crew.*

Statements from the 2007 Division 16 Award Winners

The winners of the 2007 awards were presented at the annual APA convention division business meeting in San Francisco. Each award winner was recognized for his or her outstanding work that benefits our field and the public we serve. The winners will give a presentation during a special symposium, to be held at the 2008 convention in Boston. In this issue, Scott Ardoyn and Jessica Blom-Hoffman, winners of the Lightner Witmer award, describe their current research projects, while Jan Hughes and Sandra Christenson, winners of the Senior Scientist award, also summarize their work and provide additional comments. The next issue of *TSP* (spring 2008) will contain comments from Jack Cummings, winner of the Jack Bardon award, and Kara Giron Wisniewski, outstanding dissertation award winner.

Assessing and Promoting Generalization Effects within an RtI Framework

Scott P. Ardoyn
University of South Carolina

My first exposure to the field of school psychology came as a junior in college when I assisted Dr. John Northup in the evaluation of reinforcement assessment procedures and school based functional analysis in the medication evaluation of children with ADHD. I continued learning about school psychology during my senior year, when I worked with Drs. Joseph Witt and George Noell in their pursuit to understand the variables that promote the integrity with which teachers implement interventions. I then attended Syracuse University where I had the joy of learning from and conducting behaviorally based assessment and intervention research with Drs. Brian Martens and Tanya Eckert. They not only provided me with the skills to conduct research, but they also infected me with the joy that they both experience when learning from and teaching others to conduct research. I also had the pleasure while at Syracuse of being trained by Drs. Seth Aldrich and Jim Wright in applying my knowledge when providing school-based assessment and consultation services. Following graduation from Syracuse University, Dr. Joseph Witt again provided me with an opportunity to work with him in implementing his Response to Intervention (RtI) model. This opportunity allowed me to employ my skills in behavioral assessment and intervention at the system level, as well as to develop two lines of research related to RtI: (a) assessment of procedures for evaluating absolute changes in students' reading skills, and (b)

development of alternative procedures for promoting the generalization of reading interventions.

The change from the traditional IQ-Achievement discrepancy (IAD) model to an RtI model requires a shift in the theoretical focus of assessment, from traditional psychological assessment to behavioral assessment. Evaluation of a student within an IAD model involves determination of whether there is a significant difference in the constructs of intelligence and achievement within a child. Because constructs cannot be directly measured, samples of student behavior are collected as signs of the larger constructs of intelligence and achievement through the administration of norm-referenced measures. Behavior is viewed as stable, and variation is treated simply as error.

Within an RtI model, eligibility for special education is based upon students' response to empirically validated instruction. Initially assessments are conducted to evaluate the quality of general instruction provided to the student and to identify the target student's academic/behavioral skills and deficits. These data are used in the selection of target skills/behavior and type of interventions to be implemented. Once intervention(s) is implemented, changes in student skills/behavior are monitored as a means of determining whether intervention modifications are necessary. A student's eligibility for special education is based primarily upon whether intervention resulted in sufficient change in the measured skills/behavior(s). Thus within an RtI model, the skills/behaviors assessed are themselves of central importance and changes in behaviors are desired.

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Curriculum-Based Measurement- Reading (CBM-R)

CBM-R is a measure of students' oral reading fluency that integrates traditional and behavioral assessment methodology (Deno, Fuchs, Marston, & Shin, 2001). This integration allows for its use in identifying students in need of intervention relative to peers as well as evaluating absolute changes in student performance. CBM-R is therefore seemingly ideal for use within an RtI model as it can be used to both identify students who are not benefitting from instruction and to monitor changes in reading skills. Most researchers have evaluated CBM-R within a traditional psychometric framework, in which a student's performance is compared to others. For instance, Ardoin et al. (2004) provided evidence that student performance on one CBM-R probe can explain variance in students' relative performance comparably to more time consuming and expensive group administered norm-referenced achievement tests. While such evidence of the validity of CBM-R is necessary, it is not sufficient for supporting the use of CBM-R in measuring absolute changes in student performance (i.e., progress monitoring) as a function of intervention.

Disillusioned by the variability in a student's scores observed when using CBM-R progress monitoring procedures, I decided to devote my attention to evaluating and improving CBM-R procedures for monitoring absolute changes in students' skills. In this pursuit I have identified a source of variation in student performance, as opposed to treating it as error, by demonstrating that readability formulas are insufficient for developing equivalent level probe-sets (Ardoin, Suldo et al., 2005). Use of CBM-R probes that are not equivalent in level of difficulty results in absolute changes in student performance being a function of changes in passage difficulty as opposed to changes in a student's skills. In an examination of the CBM-R universal screening procedures, Ardoin and Christ (in press) found that variability in passage difficulty might result in minimal difference when estimating relative changes in performance, but vast difference in estimating absolute changes in student performance. Other findings from this study included the importance of administering three probes per universal screening and the necessity of administering the same probes across tri-annual universal screenings. Only by administering the same passages across screenings can we be certain

of their equivalence.

Given the failure of readability formulas to control for passage difficulty, I collaborated with Dr. Theodore Christ with support from the Society for the Study of School Psychology in examining alternative behavioral approaches for selecting equivalent probes. Students in Christ and Ardoin (accepted, pending revision) read 50 CBM-R passages within one week. Four passage-sets consisting of 20 passages each were then developed by selecting passages (a) randomly, (b) with the closest readability formula, (c) with the closest mean fluency across students, and (d) with the smallest Euclidean distances across students. Results suggested that for making decisions regarding relative performance there was little difference across the four passage sets; however, when predicting absolute changes in performance, precision was substantially greater for the passage-sets developed based upon students' reading of passages (mean and Euclidean distance). Data from these studies and those to come, (e.g., Ardoin & Christ, in progress) provide clear evidence that much of the variability observed in student performance is a function of variability in passage difficulty. It is imperative that researchers address the need to develop improved passage-sets and examine alternative procedures for estimating absolute changes in performance across short periods of time (Ardoin, 2006).

Promoting Generalization

In addition to evaluating procedures for improving CBM-R, I have used CBM-R procedures as a method for evaluating the generalization of fluency based reading interventions. Although extensive evidence exists demonstrating the benefits of having students repeatedly read passages, researchers have not adequately examined procedures to increase the likelihood that providing intervention on one passage will result in benefits on similar materials. I have therefore evaluated methods based upon the principles of applied behavioral analysis (Ardoin & Daly, 2007) for promoting generalization effects of repeated reading interventions. For example, across multiple studies I examined the use of employing multiple exemplars (Ardoin, 2006; Ardoin, McCall, & Klubnik, 2007) As opposed to having students read only one passage multiple times, students read multiple passages, each containing a high percentage of words found in corresponding passage(s). Although generalization effects were

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observed, they were not as substantial as desired and I therefore conducted follow-up studies in which procedures were employed to ensure the development of greater stimulus control for practiced words (Ardoin, Carfolite, Klubnik, & McCall, submitted; Ardoin, Klubnik, Carfolite, & Roof, submitted). Immediate and maintenance effects were assessed on both high and medium word overlap passages. Procedures resulted in improvements in generalization across time as well as across stimulus materials as compared to traditional procedures, with greater effects being apparent on high word overlap passages.

Linking Assessment with Intervention

CBM-R passages are intended to measure differences in a student's reading skills as a function of interventions implemented on other materials and thus in essence are generalization passages. Unfortunately, unlike the generalization passages employed within the repeated reading studies there is no control over the extent to which skills/words trained during intervention overlaps with CBM-R probes. Although interventions must be developed so that they generalize across materials, it unreasonable to expect generalization effects to be apparent on CBM-R passages within short periods of time or for passages to be developed that correspond with every intervention implemented. Failure of researchers to evaluate the accuracy and sensitivity of measurement tools for evaluating

absolute changes in individual students' skills/behavior will amount to data collected within an RtI model having little more treatment utility than data collected within an IAD model.

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Promoting Healthy Eating Behaviors through Family-School Collaboration in Urban Schools

Jessica Blom-Hoffman, Ph.D., NCSP
Northeastern University

In recent decades the problem of childhood overweight¹ has become an epidemic (US Department of Health and Human Services, 2001). Nationally, 18.8% of children and 17.4% of adolescents are overweight (Ogden, Carroll, Curtin, McDowell, Tabak, & Flegal, 2006). Although children and adolescents from all racial and ethnic groups are impacted by this health problem, African Americans, Mexican Americans (Ogden et al., 2006), and Native Americans (Broussard et al., 1991) are disproportionately affected. Excess bodyweight is associated with a number of medical and psycho-

social problems including diabetes, heart disease, cancer, depression, and social stigmatization (US Department of Health and Human Services, 2001). The obesity problem has proven to be a complex and difficult one to address. It requires working across systems and taking a social-ecological perspective to generate solutions that promote healthy eating and physical activity behaviors.

My primary career goal centers on investigating the design and implementation of programs that facilitate the development of healthy eating behaviors in children. My work involves partnering with families, school staff, health care providers and community groups to develop and evaluate programs that are theoretically-grounded, culturally-responsive, and evidenced-based. My doctoral training in the pediatric school psychology specialty track at Lehigh University and subsequently the Children's Hospital of Philadelphia, where I completed my pre-doctoral internship and post-

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doctoral fellowship helped me to think broadly about the field of school psychology. I was encouraged by Drs. George DuPaul, Ed Shapiro and Tom Power to consider how school psychology intersects with public health and how school psychologists can use our knowledge base in school ecology, family systems, behavioral interventions, cultural awareness, collaboration, and program evaluation to impact children's healthy development. Personal influences that led to my involvement in this area include my mother's focus on healthy eating and my husband's interest on nutrition as it relates to athletic performance.

Unfortunately, health education research has shown that the provision of knowledge by itself is insufficient to facilitate behavior change (e.g., Blom-Hoffman & DuPaul, 2003). Instead, programs grounded in behavior change theory are important to develop and evaluate (Baranowski, 2006). Previous school-based, nutrition education research has shown that programs based on social learning theory are effective in changing students eating behaviors (Howerton et al., 2007). The programs that I have developed, implemented, and evaluated are conceptualized within this framework. They have focused on the interaction between the individual and the environment in influencing behavior change. Direct and symbolic modeling, goal setting, and reinforcement have been incorporated (Blom-Hoffman, Kelleher, Power, & Leff, 2004; Blom-Hoffman, in press).

In addition to being grounded in health behavior change theory, the nutrition education programs I have developed are reflective of the culture of the school and community in which they are implemented. In the urban environments in which I work, there is low availability and accessibility of fruits and vegetables due to socio-economic factors (e.g., supermarkets not being located in the communities, transportation issues related to getting to the supermarkets, and food pricing). Conversely, there is high availability and accessibility to fast food establishments, which sell large quantities of calorie-dense foods at low cost. These urban areas are diverse in terms of the many cultures represented in the communities. Accordingly, the foods depicted in program materials need to be familiar to children, teachers and families, and information needs to be provided in a language that is accessible to the families. I have incorporated participatory research methods into my work, which means that I have developed program materials with ongoing feedback from

program consumers (e.g., teachers, parents, children, and community-based nutrition experts) using a partnership framework. In addition, take home materials are translated into families' native languages whenever possible.

The third component of my work is a focus on conducting rigorous, controlled program evaluations. Generating evidence is particularly important for program sustainability and dissemination. Both process and outcome data are collected and analyzed on an on-going basis. These data are shared with program stakeholders to help interpret findings and to make decisions about program modifications.

In September 2004 I was awarded a 5-year early career grant (K23 award) from the National Institutes of Child Health and Human Development entitled, "Promoting Fruit and Vegetable Consumption in Schools." This project involves the development, implementation and evaluation of a longitudinal, school-based, nutrition program in the Boston Public Schools. The Athletes in Service Fruit and Vegetable Promotion Program is implemented entirely by staff in the Boston Public Schools and involves many individuals in the schools engaged in a number of small activities (see Blom-Hoffman, in press). The controlled evaluation is being conducted in four elementary schools, and the participants include a cohort of nearly 300 kindergarten and first grade students who are being followed through third and fourth grades. The program includes school-wide, classroom, lunchroom, and home components. The family component, which was developed through an iterative, partnership-based process with feedback from parents and nutrition experts, involves a series of interactive children's books that have simple messages for parents and children to discuss and to help them set goals (Blom-Hoffman, Wilcox, Dunn, Leff & Power, 2007). Currently, the program is in its third year of implementation. Data analyzed from the first two years of implementation indicate the program has been implemented with good integrity, is acceptable to children, lunch aides, teachers, and parents, and is associated with increased fruit and vegetable consumption in the school lunch (Blom-Hoffman, Franko, Power, Stallings, Dai, & Thompson, 2007).

My future work will continue to demonstrate ways school psychologists can contribute to school-based health promotion in a participatory, theory-driven manner that utilizes data to evaluate program effects. Recently, I have become involved with another Boston-based project that connects corner

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stores and middle schools to promote healthier beverages for students. This project, which applies community-based participatory approaches to program planning and evaluation, involves partners from the Boston Public Schools, local corner store owners, hospital and university-based health providers, professionals from the Boston Public Health Commission, the New England Dairy and Food Council, and the Hood Food Corporation. This project promotes water, low fat milk, and 100% fruit juice as healthier alternatives to sugar sweetened beverages in school and corner store environments. Evidence-based, comprehensive, multi-systemic approaches targeted toward children are needed to halt and to reverse the obesity epidemic. My career has been and will continue to be devoted to this mission.

Footnote:

¹ Childhood overweight is defined as a body mass index (BMI-for-age) that is > the 95th percentile based on gender and age specific normative data. At risk for overweight is defined as a BMI-for-age that between the 85th-95th percentiles. Additional information on calculating BMI for children and adolescents can be found at:
http://www.cdc.gov/nccdphp/dnpa/bmi/childrens_BMI/about_childrens_BMI.htm

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Reflections on Student Outcomes – The Essential Aspect of Programmatic Inquiry

**Sandra L. Christenson, Ph.D.,
University of Minnesota**

and ever thanks . . . My response to the past 19 years as a faculty member in the School Psychology Program at the University of Minnesota. I believe individuals are cognizant of my two lines of research: family-school partnerships and school completion/dropout interventions. What may be less apparent is how they are inter-related, both theoretically and in research studies. The ultimate goal of my research is the strong desire to improve academic, social, and emotional outcomes for learners, especially those most alienated or disengaged from traditional supports for learning. Therefore, the paramount questions for me have been: Do and how do family-school partnerships or engagement enhance student outcomes?

Theoretical Underpinnings

We have all heard that “the whole is greater than the sum of the parts.” Without a doubt, Bronfenbrenner’s (1979) developmental-systems theory and the requirement for evidence-based practices have been most influential in my work. I conceptualize understanding children’s development and learning performance automatically from the reciprocal relationship among multiple contextual influences and contributing factors, including families, school personnel, and peers. My application of systems thinking is represented by accounting for the continuity of socialization messages from parents and teachers, the cumulative effect of positive learning experiences for some students and yet not others, and the comfort level some families have and yet others do not have with our schooling practices. I am concerned about equity and opportunity to learn for students. I am driven by the notion of competence enhancement for students as well as building the capacity of systems to elicit the best response from students or finding ways for students to meet the standards of the school

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environment. In addition, my work with Check & Connect (www.ici.umn.edu/checkandconnect), which has recently met the evidence standards of the U.S. Department of Education's What Works Clearinghouse (WWC, 2006; www.whatworks.ed.gov), underscores the necessity of strong theory (e.g., relationships, resilience, cognitive behavioral) and randomized designs to establish the effects of school-based interventions.

History of Research/Scholarship

I was fortunate to be a graduate student at the University of Minnesota and to be advised by Dr. James Ysseldyke, who was the Director of the Institute for Research on Learning Disabilities (IRLD). My interest in student engagement, the unifying construct for the two lines of research, began with examination of academic engaged time while working as a Research Assistant at IRLD. To the many and varied discussions held about research studies at IRLD, I added the need to examine the effect of home environments on student outcomes, including special education classification (Christenson, 1990). Very importantly, I was intrigued by the role of out-of-school time for differences in students' in-classroom learning performance. Over time, my focus was directed toward the role of context for measuring and understanding student performance and for designing instructionally relevant interventions. Jim Ysseldyke and I developed the Functional Assessment of Academic Behavior (FAAB); however this ecological assessment framework grew from The Instructional Environment Scale (TIES) (classroom factors) to TIES-II (classroom and home factors) to FAAB (classroom, home and home-school partnership factors). TIES-II and FAAB occurred as evidence (primarily correlational) improved for inclusion of additional factors (Ysseldyke & Christenson, 2002).

The components of constructive family-school relationships are many and varied; some are more easily quantified (e.g., two way communication), while others are more elusive. Trust between home and school readily became a component of interest when implementing Check & Connect. We were working with marginalized students and their families. Despite the elusive nature of trust, I adopted a genuine scientist-practitioner orientation; namely, if trust were important I needed to articulate a theoretical base, develop a strategy for measuring trust, collect data, and assess the effect of home-school trust on student outcomes. Writing

with graduate students, improving the scientific foundation of our assessment and intervention practices, and ensuring clarity in definitions for partnership, relationship-based terms (e.g., trust) was my job as a professor. Two articles, which illustrate my commitment to these points, were the master's and doctoral theses of Kim Adams (Adams & Christenson, 1998; 2000).

The centrality of trusting relationships for optimizing learning outcomes for students is integral to Check & Connect, a model of student engagement. For the past 17 years, I have been involved in six different applications of Check & Connect as well as the advancement of the construct of student engagement. Creating and sustaining relationships with parents who are alienated from our schools and schooling practices (often referred to as "uninvolved" or "hard to reach" parents by educators) delivered many lessons about partnering with families. In particular, the notion that a concerted effort and paying attention to a process for developing family-school partnerships, while far too often ignored, were indispensable (Christenson & Sheridan, 2001). How we reach out – and how persistently we reach out – makes a difference in forming the family-school connection to foster some students' academic, social, and emotional learning.

The beauty of programmatic inquiry is that it provides a context for ongoing discovery – in this case, the expansion of the construct of engagement. In our initial work on Check & Connect, our dependent variables would be categorized as indicators of academic (e.g., credits earned, work completion rates) or behavioral (e.g., attendance) engagement. At the same time, many of the Check & Connect secondary level students were reporting to their mentors that: they won't do the work anymore, they can't do the work, their teachers don't care about them, they had no friends at school, and the work was not important anyway. As a researcher, I speculated that we were missing important variables, namely cognitive (relevance and control of school work) and psychological (sense of belonging and school connection with others) engagement. The students' overall comments, literature reviews on the effect of cognitive and psychological engagement, and the expertise of several graduate students have resulted in a measure of these engagement subtypes (Appleton, Christenson, Kim, & Reschly, 2006), an increased understanding of the seminal nature of relationships

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Statements from the 2007 Division 16 Award Winners

for engagement (Anderson, Christenson, Sinclair, & Lehr, 2004), and identification of both universal and individualized interventions based on enhancing students' engagement academically, behaviorally, cognitively, and psychologically (Christenson et al., in press; Reschly & Christenson, 2006). It is our collective hope that the multi-dimensional aspect of engagement serves as a helpful heuristic for creating an assessment-to-intervention link to foster the desired school completion outcome – high school graduation with academic and social competence sufficient to open post secondary enrollment options for students.

Engagement also applies to parents. I have been working with three other graduate students and a leader in family-school partnerships for a local school district to understand the link between the role of parent engagement and student motivation – all for the intended purpose of designing and assessing the efficacy of a family intervention.

Concluding Remarks and my ever thanks...

My interest in intervention stems from the inequity I have observed for students – inequity due to circumstances of students' lives that reduce opportunity to learn. I believe schools are a context for children's development and we can address inequity by partnering with families (family-school partnerships at a dyadic and systems level), providing persistent support for students showing early warning signs of disengagement (Check & Connect), and intervening early and intensively on critical alterable variables (indicators of engagement). My work is driven by the simple question: What changes are necessary in contexts to improve outcomes for youth? As a scientist-practitioner, theory building is critical; using sound theory and prior evidence to design interventions is critical; methodology is critical – experimental studies in schools whenever feasible must be increased; all while we organize interventions so they are useful to practitioners.

In closing, it is a tremendous honor to be the recipient of the APA Division 16 Senior Scientist Award. However, borrowing from William Shakespeare in the *Twelfth Night*, I say to my current and previous graduate students, and my School Psychology and research colleagues “and ever thanks . . . I can no other answer make, but, thanks, and thanks, and ever thanks.” In so many ways, this is your award too.

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Statements from the 2007 Division 16 Award Winners**Reflections of Division 16
2007 Senior Scientist
Recipient Jan Hughes****Jan Hughes, Ph.D.,
Texas A&M**

Being named co-recipient of the 2007 Senior Scientist Award is a great honor for which I am deeply grateful. The opportunity to pursue interesting research questions with talented and passionate colleagues and graduate students is its own reward; to receive recognition from one's peers for that work brings me great satisfaction and joy. I am truly thankful to the Senior Scientist Award Committee for their appreciation of my work and to my current and former colleagues, mentors, and students for joining with me in the quest for understanding children and their development, and to my family for their non-faltering and wholehearted support.

When asked to write this article, instructions were rather sparse. I could summarize my research or give advice to early career researchers. I have opted to do a bit of both.

The Summary

I did not begin my research career with the intention of conducting a "program of research" for which I would be nationally known. These are the words I use in mentoring junior faculty today. However, I doubt I had heard the phrase "program of research" for the first 15 years after earning my Ph.D. in School Psychology from the University of Texas. In my view, that was probably a good thing. Consequently, my research topics have been driven primarily by my curiosity and available opportunities, including willing collaborators and funding opportunities.

Despite the diversity of topics in my research portfolio, I have maintained a consistent focus on the role that psychological theory plays in understanding children's development and in developing and evaluating interventions for children's psychosocial problems. A utilitarian theorist rather than a purist, I value theory as a tool for organizing and understanding facts and solving particular problems.

My interest in social relations and learning was sparked by my dissertation advisor, Dr. Jere Brophy, a developmental psychologist. My early work on teacher consultation was much influenced by my belief that teacher-student relationships are critical

to children's learning and behavior. Later, with colleague and clinical psychologist Tim Cavell, I investigated the role of teacher-student relationships in the prevention of conduct problems. We documented that a supportive teacher-student relationship ameliorates children's risk for behavioral maladjustment and academic failure and that the quality of this relationship is particularly important to the school success of ethnic minority students. My more recent research has identified the mechanisms responsible for the impact of teacher-student relationship quality on achievement and child characteristics that moderate this influence.

I trace my interest in understanding how individuals' thinking affects their behavior to Albert Bandura, whose work I devoured as a graduate student. In my book, *The Clinical Child Interview*, I applied developmental theories to the task of understanding how children's thinking about important events and people in their lives contributes to their behavioral difficulties and how such an understanding informs treatment. In later empirical studies with colleague Tim Cavell, we investigated the role of social cognition in childhood aggression. We demonstrated that a positive self concept is a risk factor, not a protective factor, for aggressive children, and we developed a measure of aggression-relevant social cognition that not only predicted teacher- and peer-rated aggression but also explained the indirect of harsh parenting on aggression via its influence on children's social goals and social information processing.

I believe intervention research is an excellent way to test theories. Our research team found that grouping aggressive children for purposes of providing psychosocial skills training may actually increase children's aggression, due to negative peer influences in group treatment on children's beliefs about aggression's legitimacy and effectiveness. Consistent with the ecological and systems theories, we have investigated the role of school context in intervention effectiveness, finding that two different interventions for aggressive children were differentially effective in schools that differed in level of school adversity.

For the past 7 years our research team has been following two cohorts of children who entered school when they were in first grade. In this prospective, longitudinal research we apply developmental theories to understanding the causal processes responsible for the impact of grade retention on students' psychosocial and academic functioning and identifying factors that moderate

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Statements from the 2007 Division 16 Award Winners

that impact. This study has provided a rich opportunity to investigate the interactive influence of peer, family, child, and school characteristics on students' school performance over time. We have identified school processes that explain why initial differences in school readiness skills become magnified rather than minimized with additional years of schooling.

The Advice

Find good collaborators. Select people you enjoy spending time with, who will tell you when your ideas are half-baked but will listen anyway, whose expertise complements rather than overlaps yours, and who are more interested in the work than in the credit.

Be an opportunist. Research is easier –and often better– when you have funds with which to do it. One must often be creative in figuring out how to do the research about which one is passionate while addressing funding priorities. I conducted research on the prevention of childhood aggression with funding targeted for drug prevention and research on social relations in the classroom with funding to study the effects of grade retention on achievement. By stretching to address national funding priorities, I believe my research has become less insular and more interdisciplinary.

Do not try to do it all (at least not at the same time). I became serious about research only after a good run at clinical practice, professional service, and administration. I enjoyed each role but came to the realization that I would not reach my personal goals as a researcher unless I got more serious about it. It was liberating to exercise this freedom to choose to do some things and not to do other things. We each have this opportunity to reinvent ourselves. Looking back, I am glad for the journey. Looking ahead, I am glad that I still have choices to make.



Call for Nominations for Division 16 2008 Awards

Judy Oehler-Stinnett, Ph.D. VP-ETSA
Rich Gilman, Chair Awards Committee

CALL FOR NOMINATIONS: Lightner Witmer Award

I. Each year the Division of School Psychology presents the Lightner Witmer Award to young professional and academic school psychologists who have demonstrated scholarship which merits special recognition. Continuing scholarship, rather than a thesis or dissertation alone, is the primary consideration in making the award. While a specific scholarly work may be salient in the evaluation of a nominee, it is not likely that a single work will be of such exceptional character that it would be the basis of the award. Similarly, numerous papers, articles, etc., will not by themselves be a sufficient basis for the award. Instead, the Lightner Witmer Award will be given for scholarly activity and contributions that have significantly nourished school psychology as a discipline and profession. This will include systematic and imaginative use of psychological theory and research in furthering the development of professional practice, or unusual scientific contributions and seminal studies of important research questions that bear on the quality of school psychological training and/or practice. In addition, there should be exceptional potential and promise to contribute knowledge and professional insights that are of uncommon and extraordinary quality. Nominees must be (a) within seven years of receiving their doctoral degree as of September 1 of the year the award is given; and (b) be a Fellow, Member, Associate, or Student Affiliate of Division 16.

II. **Five sets** of materials should be forwarded on each nominee including a vita, at least three supporting letters, reprints, other evidence of scholarship, and contact information for the nominee, nominator, and letter writers (as indicated on the Division 16 website) so that they may receive results. All nominations and related materials should be submitted by March 15 to the Chair of the Lightner Witmer Award Committee Amanda VanDerHaden, PhD, 102 Ashton Court, Fairhope, AL 36532. For questions, please contact Dr. VanDerHeyden at amanda@education.ucsb.edu.

CDs with the complete application including letters of recommendation with the full 5 copies only will be accepted.

CALL FOR NOMINATIONS: Outstanding Dissertation Award

Each year the Division of School Psychology presents an Outstanding Dissertation in School Psychology Award to a school psychology student who has completed a dissertation which merits special recognition and which has the potential to contribute to the science and practice of school psychology. The Outstanding Dissertation Award is to be given for an outstanding dissertation on a topic that has the potential to contribute to school psychology as a discipline and profession. The outstanding dissertation is on a topic that has the potential to impact the science or practice of school psychology, such as research on underrepresented topics and/or populations in the school psychology literature or an original contribution to a traditional area. The research should clearly address and test hypotheses based on important theoretical and empirical questions; the methodology should be sound and sufficient to test the questions posed; and the writing quality addressing these issues as well as implications for practice and future research should be excellent.

Nominees must have successfully completed their dissertation defense by December 31 of the previous calendar year. Nominees must be (a) have been a student member of Division 16 at the time they completed the dissertation; and (b) be a Fellow, Member, Associate, or Student Affiliate of Division 16.

III. Materials to be forwarded on each nominee should include five copies of: the nominee's vita, supporting letters (minimum of two from members of the dissertation committee), the dissertation, and contact information for the nominee, nominator and letter writers so they may receive results (as indicated on the Division 16 website). All nominations and related materials should be submitted by March 15 to the committee chair, Rob Volpe, Ph.D., Dept. of Counseling and Applied Educational Psychology, 203a Lake Hall, 360 Huntington Ave., Northeastern University, Boston, MA 02115-5000. For questions, please contact Dr. Volpe at r.volpe@neu.edu.

CDs with the complete application including letters of recommendation with the full 5 copies only will be accepted.

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Call for nominations for Division 16 2008 Awards**CALL FOR NOMINATIONS:
Senior Scientist in School Psychology
Award**

Each year the Division of School Psychology presents a Senior Scientist in School Psychology Award to a mature professional and academic school psychologist who has demonstrated a program of scholarship which merits special recognition. A sustained program of scholarship of exceptional quality throughout one's career is the primary consideration in making the award. The award recipient's program of work should reflect systematic and imaginative use of psychological theory and research in furthering the development of professional practice and/or consistent empirical inquiry that bears on the quality of school psychology training and practice. The program of scholarly work should be of exceptional quality in its contribution to the scientific knowledge base of school psychology training/practice. Nominees must be either 20 years past the granting of their doctoral degree or at least 50 years old by December 31 in the year nominated.

Five sets of material should be forwarded on each nominee, including a vita, supporting letters (minimum of three), five major papers or publications, and contact information for the nominee, nominator and letter writers so they may receive results (as indicated on the Division 16 website). All nominations and related materials should be submitted by March 15 to the committee chair, Thomas Power, Ph.D., Children's Hospital of Philadelphia, Department of Psychology, 34th & Civic Center Blvd., Philadelphia, PA 19104-4399. For questions, please contact Dr. Power at power@email.chop.edu.

CDs with the complete application including letters of recommendation with the full 5 copies only will be accepted.

**CALL FOR NOMINATIONS:
Jack Bardon Distinguished Service Award**

The Division 16 of the American Psychological Association presents an annual award in honor of Jack Bardon, whose professional contributions broadly spanned a conceptual framework for the training, role and definition of school psychology and growth of the profession in consultation and organizational issues (Eidle, Hyman & Meyers, 1997). He helped bring the profession to maturity during a major expansion period. The Jack Bardon Distinguished Service Award is given to mature professional and academic school psychologists who

have continued this important work through voluntary professional service that goes above and beyond the requirements of the position the person holds and who has demonstrated an exceptional program of service across a career that merits special recognition. A sustained program of service to the profession of school psychology throughout one's career is the primary consideration in making the award.

The recipient of the Jack Bardon award is a distinguished figure within the profession with a history of sustained contributions and accomplishments. They should meet both criteria I and II.

I. Major leadership in the development, delivery or administration of innovative psychological services or development and implementation of policy leading to psychologically and socially sound preservice and/or CPD training and practice in school psychology; and sound evaluation of such training and service delivery models and policies.

II. Sustained professional organization contributions including holding offices and committee memberships in state and national professional organizations such as Division 16 and significant products from those contributions that further the profession of school psychology. Examples include creation of and revisions to policy and practice manuals based on innovative guidance; guiding major policy or legislative initiatives; mentoring of new professionals into organizational contributions; administering dissemination of professional materials through such publication editing or convention programming; and representing psychology to the public and government through service on boards and commissions. The Jack Bardon Distinguished Service Award is to be given for sustained service to the profession across a number of years and not for service in one office or major task force.

Nominees must be either 20 years past the granting of their doctoral degree or at least 50 years old by December 31 in the year nominated.

Five sets of material should be forwarded on each nominee, including a vita, supporting letters (minimum of three), five major papers of publications, and contact information for the nominee, nominator and letter writers so they may receive results (as indicated on the Division 16 website). All nominations and related materials should be submitted by March 15 to the committee

Remembering Leon Lebovitz, 1925-2007

Submitted by Thomas K. Fagan, Historian, Division 16

Dr. Leon Lebovitz, long-time contributor to professional psychology in Tennessee, died on Wednesday, August 22, 2007 following a long illness and complications of kidney disease. Born in Chattanooga on September 24, 1925, Leon was the son of immigrant parents, Isaac and Eunice Lebovitz who came to America from Russia, and for a while they operated a Kosher delicatessen in Chattanooga. He completed his elementary and secondary education in Chattanooga. After taking courses in chemical engineering at Georgia Tech University, he received his B.A. degree in psychology in 1948 at the University of Chattanooga. He received his M.A. and Ph.D. degrees in clinical psychology at the University of Tennessee-Knoxville in 1951 and 1958, respectively; his dissertation was on achievement motivation (Lebovitz, 1958). He attended UT-K on an assistantship and was mentored by Dr. T. Ernest Newland in what is arguably the first school related psychology graduate program in Tennessee. When Newland left for a position at the University of Illinois, Leon remained in Tennessee to complete his doctorate. During his training he worked for a Veteran's Administration Hospital in Memphis and completed an internship at a Chicago VA Hospital (Harris, 1997). He became an associate member of APA in 1952 and regular member in 1958, belonging to the Divisions of School Psychology (16) and Clinical Psychology (12). From 1953-1961 he served as psychologist for the Oak Ridge School System. He also worked at the Daniel Arthur Rehabilitation Center from 1959-1964, and the Oak Ridge Mental Health Center 1957-1964. From 1964-1966 he was employed at the UT Medical School's Child Development Center and as a psychologist for the Memphis Board of Education 1964-1967. He then

became Director of the Division of Psychological Services for the Memphis Board of Education from 1967-1975. He was then Director of the Southeast Mental Health Center from 1976 until his retirement in the early 1990s. During his career he also served as an adjunct professor for the then named Memphis State University.

Leon was central to the establishment of school psychology in Tennessee. He was among the earliest psychological services providers to school children in East Tennessee and was working before licensure and certification of such psychologists were required. Leon served as the first president of the Tennessee Association for Psychology in the Schools (now Tennessee Association of School Psychologists) in 1971-1972. The association's records indicate that Pat Shockley was asked to be the first TAPS president but due to pregnancy she declined and suggested that Leon Lebovitz be named since he had been the first certified school psychologist in the State. In addition to his service as president of TAPS, Leon earlier served as president of the Tennessee Psychological Association (TPA) in 1967. His TPA presidential address was published in the *Journal of School Psychology* (Lebovitz, 1968-69). Leon is the only person to have served as president of both TPA and TAPS/TASP. The original name of the school psychology association (TAPS) reflected the thinking of Leon and others at the time that it was "wiser to form a group that would promote school psychology rather than promoting school psychologists" (Harris, 1997). From the perspective of psychology's politics, Leon's positions on licensing and practice were clearly aligned with those of the APA and the two-levels of licensure used by the

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Call for nominations for Division 16 2008 Awards

chair, Linda Reddy, Ph.D., Graduate School of Applied & Professional Psychology, 152 Frelinghuysen Rd., Busch Campus, Rutgers State University of New Jersey, Piscataway, NJ 08854. For questions, please contact Dr. Reddy at LReddy@rci.rutgers.edu.

CDs with the complete application including letters of recommendation with the full 5 copies only will be accepted.

Remembering Leon Lebovitz, 1925-2007

Tennessee Board of Examiners. However, he viewed school psychology as distinct from clinical psychology and predicted it would become "a major scientific and professional sub-discipline of psychology" (Lebovitz, 1968-69, p. 9).

During his years with the Memphis City Schools, Dr. Lebovitz was the driving force in the creation of the Memphis City Schools Mental Health Center, a school district-based comprehensive service facility spread across the entire school district. Trained with a mix of clinical and school psychology and special education (see, e.g., Smith, May, & Lebovitz, 1966), Leon believed that school psychology needed to offer more than assessment to the schools, and that a comprehensive mental health center could expand the roles and functions to intervention, including consultation. Licensed in both clinical and school psychology and an American Board of Professional Psychology diplomate in school psychology, Leon was a member of the Tennessee Board of Examiners in Psychology from 1969 to 1974 and served as Vice Chairman and Chairman during this period. In 1974, Dr. Lebovitz was presented with TPA's Distinguished Psychologist Award. In granting the award, then President Dr. Jaswant Khanna noted: "Dr Lebovitz has established the authenticity of school psychology as a profession by his personal model. He is a leader, innovator, and a pioneer in the State" (Khanna, 1974, p. 11).

Leon had a distinguished military service record. He enlisted in the Army for World War II at the age of 17 and was awarded the Purple Heart and Bronze Star, surviving the Rhineland and Ardennes Campaign and served under Patton during the Battle of the Bulge. He met his wife, Gladys, while interning at the Kennedy Hospital in Memphis, and they were married in 1950. They returned to East Tennessee where Leon worked with the Oak Ridge schools before moving to Memphis in 1964.

Leon was preceded in death by his two brothers, Wolfe and Herman. He is survived by his wife Gladys, two daughters Karen and Sarah, and a son Daniel, and two adopted daughters Lucretia Marshall and Felicia Williams. He had a strong interest in fixing things and was fairly skilled in carpentry, plumbing, and electrical work. A memorial service was held in Memphis at the Church On The River, Friday, August 31, 2007.

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Appreciation is expressed to Adam Schepman, Dr. Vickie Brewer, Dr. Connie Paul, Dr. George McCoy, Sally McCoy, and Daniel, Karen, and Sarah Lebovitz for their assistance in gathering information for this tribute.

Note: This tribute also appears in the newsletters of the Tennessee Association of School Psychologists and the Tennessee Psychological Association.



Remembering Sam Bonham, 1925-2007

Submitted by Thomas K. Fagan, Historian, Division 16, Adam Schepman, and Thomas Stevens

Samuel J. Bonham, Jr., known to his friends as "Sam," died on August 10, 2007 of congestive heart failure in Sarasota, Florida. He was 82. His parents were Samuel Jeremiah Bonham, a superintendent of schools in Niles, Ohio, and Helen Marie Bonham, a homemaker until World War II who became a supervisor of female staff at the Lordstown, Ohio ammunition plant. The Niles school district named an elementary school after his father. Although his father's middle name was Jeremiah, Sam was given only the initial "J" for a middle name. Sam was born on April 12, 1925 in Bellefontaine, Ohio. After graduating from Niles High School he attended Purdue University (1943-1945), served in the U. S. Navy (1945-1946), earned his B. S. in education (1948) and M. A. in psychology (1949) at Ohio University. He completed additional graduate work at summer institutes at The Ohio State University, Teachers College-Columbia University, and Harvard University. The Harvard institute in 1964 on pupil personnel services likely encouraged him to coauthor with Dean Hummel Pupil Personnel Services in Schools: Organization and Coordination (Hummel & Bonham, 1968).

Sam's employment history reflects a person of well defined goals, organization, and accomplishments in Ohio education. Sam served as school psychologist for the Summit County Public Schools (Akron, 1949-1952). At the time of his hiring in 1949, only 29 Ohio school districts were served by one or more school psychologists (Bonham & Grover, 1961). Sam then served as Coordinator of Guidance and Psychological Services for the Cleveland Heights Public Schools (1952-1956); Director of Pupil Personnel Services for the Montgomery County Public Schools (Dayton, 1956-1960); Chief Psychologist for the Division of Special Education, Ohio Department of Education (Columbus, 1960-1965); Administrative Assistant in the Division of Special Education (1962-1965); and finally as Director of the Division of Special Education from 1965 until his retirement in 1982. While retired in Venice, Florida, he served as Assistant to the President of CRR Publishing Company of Alexandria, VA and was active in the Venice Presbyterian Church, the local community, and his retirement village.

Much of Sam's career was spent with his wife, Martha Jane Venturi Bonham who helped to raise Sam's three children from his first marriage of 17

years to Elizabeth Truitt (deceased). Martha and Sam met in 1965 and were married in 1969. Martha Bonham also had a distinguished career in education and served as director of the Franklin County Resource Center which serviced 57 Ohio school districts. He is survived by his wife, Martha, to whom he was married for 38 years; his sons, Jim, a paramedic trainer and evaluator in Lee County, Florida, and John, General Manager-U.S. for Courier Express in Atlanta, Georgia. He was preceded in death by his oldest son, Sam, in 1999. According to his wife, Sam enjoyed tennis, swimming, river boating, grandchildren, bridge and other card games.

Sam was an active participant in several areas of professional development. He aspired to and brought leadership as his career developed. He was a past-president of the National Association of State Directors of Special Education, the Ohio School Psychologists Association, Kent Area School Psychologists, and the Cleveland Area School Psychologists. He was a member of the Council for Exceptional Children, National Association of Pupil Personnel Administrators, Council of Administrators of Special Education, and the Division of School Psychology in the American Psychological Association. He encouraged, edited, or authored numerous publications, especially those produced by the Ohio Department of Education's Division of Special Education; others appeared in Journal of School Psychology, and the OSPA newsletter. Sam delivered many conference presentations to school psychology and special education groups.

Sam Bonham will be remembered for many things by those who knew him. According to Martha, Sam would want to be remembered for "making a difference in the lives of special needs individuals." She wrote, "When Sam saw a problem he was able to find a solution. Here at Bay Village Retirement Community Sam will always be remembered as the Chairman of the Board who changed the way finances were handled and the man who initiated the renovations of this beautiful facility. Residents are not assessed for any of the renovations due to Sam's teaching of how to use their budget." For example, the Village installed 1,300 hurricane windows at a cost of over 1.2 million dollars. He also prepared a report on moving the area sewage plant from the edge of the Gulf of Mexico to east of I-75 that was accepted and done



Remembering Sam Bonham, 1925-2007

by the Sarasota County Commissioners. On the occasion of Sam's 80th birthday, the former pastor of his church, Rev. Ben Jacobson, said, "I value you greatly as a leader without a personal agenda, as a man who had the courage of his convictions, and as a friend who was always willing to listen...You were on the right side of every difficult decision we had to make and I was blessed by your presence during my pastorate in Venice."

Colleagues who worked with Sam recall his many contributions. Frank New, Sam's immediate successor as state director, believes that Sam's greatest gift to special education in Ohio was the development of Ohio's Comprehensive Plan for the Education of the Handicapped in 1973 (Program Standards, 1973). "This planning effort moved us towards the concept that all children should not only receive an education but an appropriate education." Hal Barker, who worked for Sam when he was state director, was in awe of Sam's ability to master technical details. He described how Sam spoke without notes at a regional meeting of other state directors. "He spoke in sufficient detail and with such clarity that I found myself taking notes."

According to Thomas Stephens, Sam was a seminal figure in Ohio's Special Education Program and served as State Director for 16 years from 1965 to 1981. He was Ohio's fourth Director and his tenure was at a transformational time in the history of special education. The Education for All Handicapped Children Act (P.L. 94-142) was passed by the U.S. Congress in 1975 and companion Ohio Legislation (Am. Sub. H.B. 455) was enacted by the Ohio General Assembly in 1976. Sam ably guided Ohio's educators through the process that made special education a right for all handicapped children and required informed parental consent. His genius was in systems development and implementation. Under his leadership, the current Special Education Regional Resource Center network was put in place and a comprehensive state program was developed and operationalized. As the Director of Pupil Personnel in Montgomery County (Dayton) he instituted the first state paid internship for school psychology. That intern, Jerry Barnett, remembers Sam's great patience in guiding him. Jerry said that his training was better in counseling than in psychology but, because of Sam's ability to draw upon his staff psychologists' strengths, he experienced a very successful internship. He also was active in the Ohio School Psychologists Association serving as its President in 1956-1957. He was among the founders of the *Journal of School*

Psychology in 1963, when the journal was initiated under the auspices of the Ohio Department of Education.

Sam recognized early in the 1950's that, while school psychology was critical to the development of special education services, school psychology would need to broaden its scope of services. He along, with other pioneers, envisioned school psychologists as having three important roles: psychological examiners, child study advocates, and psychological and learning consultants to school personnel and parents. During his tenure as Director, he increased the number of training programs for school psychologists, the number of paid internships, and, as a result, the number of school psychologists in Ohio. The impact of Bonham's efforts can be observed in Farling (1969), Garwood (1978), and in OSPA's 50th Anniversary publication (Eberst, 1993).

Tom Fagan will remember Sam for his efforts to organize the Journal of School Psychology through the support of the Ohio Department of Education, his leadership in school psychology during the rapid growth of special education in Ohio in the 1960s and 1970s, and especially for his comments during an Ohio School Psychologists Association meeting in 1966 in Akron, Ohio. It was at that meeting where Sam and Jack Bardon addressed a large audience of school psychologists. Despite Bardon's wishes for the field to become something more than just pupil services workers attached to special education, Sam made it clear that there was a job to be done serving special needs children and, as the recently appointed Ohio Director of Special Education, it would be his responsibility to ensure that school psychologists, or someone else with similar skills, would fill the need. The published version of Sam's talk ended,

Today you have never had a more primary, a more visible, a more critical role. You are important. We cannot operate our programs for handicapped children without you. Most of special education in Ohio grew because of your leadership. In school district after school district, special education developed when you got there and not before. So now we've got to go on. The institution is demanding that we serve these children and go on we must, and I hope it will be with school psychology. (Bonham, 1967, p. 10).

For his numerous contributions, Sam was granted many awards. These included the OSPA's first recipient of the Clyde V. Bartlett Award in 1973, the Talisman Award from the Ohio Association for

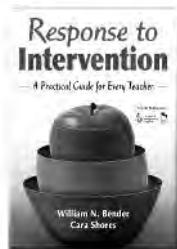


Book Review:

Response to Intervention – A Practical Guide for Every Teacher

by William N. Bender and Cara Shores

Reviewed by Andy Pham, M.A.
Michigan State University



With the recent focus on Response to Intervention (RTI) in schools, many school psychologists, teachers, and administrators are beginning to implement this framework across the country. Response to intervention is an approach for developing instructional practices based on student outcomes. National legislation, which includes No Child Left Behind Act (U.S. Department of Education, 2001) and the Individuals With Disabilities Education Act (IDEA, 2004), stresses the importance of providing high quality, scientific, research-based instruction and interventions, and hold schools accountable for the progress of every student in order to meet state-level standards annually. Though regulations do not necessarily require implementation of RTI in schools, they do allow an alternative method to the IQ-achievement discrepancy model for documentation of Specific Learning Disabilities (SLD). The RTI movement therefore represents a fundamental shift in how learning problems are conceptualized, and a monumental change in how students' needs are addressed through various assessment and intervention activities.

As with any type of systems-level change, there is a number of challenges schools face when using the RTI framework. One challenge is the apparent cultural change in the school with regard to how teachers assist students with learning difficulties in their classroom. Traditionally, when students struggle academically, their teachers would assist them, often through referral and assessment for special education services. The presumed advantage of this approach was that the students would receive the assistance that he or she needed through special education's additional resources (e.g., small group instruction, teachers with specialized training, etc.). However with RTI, many general education teachers will be expected to accommodate struggling students by developing and adapting instructional approaches to meet the students' needs. Many teachers may perceive this change as placing more burden on them.

Because implementing RTI can be a daunting task, school psychologists and staff need to collaborate with teachers to help them understand the goals and the process of RTI. Bender and Shore's (2007) book, *Response to Intervention: A Practical Guide for Every Teacher*, provides explicit information specifically for teachers about key concepts, characteristics, challenges, and strategies involved in the RTI process. This resource can also serve as a guide for graduate students, interns, practitioners, educators, and administrators who are interested in understanding or developing RTI in their schools. Some of the appealing features of this guide are the vignettes, outlines, and the clear, professional language used to communicate to readers the essential components of RTI implementation.

The first chapter provides an introduction and history of the development of RTI. It addresses reasons RTI evolved as an alternative and valid method of qualifying students for special education services under the category of a Specific Learning Disability. The chapter also introduces two models of RTI that are discussed in greater detail in the next two chapters: 1) the problem-solving model, and 2) the standard treatment protocol. Each is currently being researched and implemented in various school districts. The authors briefly describe both models and delineate strengths and weaknesses of each. The first chapter provides a solid background on the goals and process of RTI, and the important milestones that contributed to the need for developing the RTI framework. Research is reported concisely, and addresses the effectiveness of RTI in remediating academic (reading and math) problems in early elementary schools.

As mentioned, the second and third chapters focus on the implementation of the standard treatment protocol and the problem-solving model, respectively. The standard treatment protocol involves several separate educational interventions, progressing in intensity, prior to classifying a student with a learning disability (Bender and Shores, 2007). It is expected that many schools will follow this approach due to the use of research-based interventions to address groups of students and the

CONTINUED ON PAGE 38

Book Review: Response to Intervention

use of a three-tiered triangle, in which students are categorized based on how well they respond to intervention (Fuchs & Fuchs, 2006). The problem-solving model has many similarities with the standard treatment protocol, though one of its distinctive features is the development of a team that discusses the individual needs of students and selects interventions based on those needs. Many schools have similar problem-solving teams currently in place (e.g., child study teams), so this chapter provides useful information and guidance for adapting teams as they transition to RTI. These teams can develop more rigorous interventions to improve teacher accountability, since they are expected to carry out interventions and instruction with fidelity.

Vignettes and case studies are also presented in these chapters to illustrate the use of each model in schools. For example, case studies of the standard treatment protocol demonstrate how students' reading progress was monitored as intensity of interventions increased in each tier of the triangle. Though these cases are addressed specifically to teachers, the authors incorporate other school professionals as important in this model. Vignettes describing the problem-solving model as used in middle and high schools are included. These could particularly be useful for secondary level teachers and administrators, as there are limited research and knowledge about effectiveness of RTI in these schools. The authors, however, did not provide case studies of how the standard treatment protocol would apply in middle or high school settings, which would have been beneficial for those who would be using this approach at the secondary level.

The fourth chapter discusses how RTI can be used to improve the needs of all students. Issues that the authors focus on are the dramatic increase in cultural and linguistic diversity in schools, and how teachers can assist English language learners (ELL) or students living in poverty. The authors make a noteworthy point regarding the concentration of ELL students in specific areas of the country. For example, the structure of RTI can be different for a school district that provides language services for many students at varying levels of proficiency, compared to another school district that has only one student who speaks a different language (Bender & Shores, 2007). With the controversy of developing culture fair assessment and disproportion of ethnic minorities in special education, teachers can gain some invaluable knowledge about how to provide appropriate instruction for ELL students. Though there are too

many specific populations to discuss in a chapter, it would have been helpful to consider how RTI addresses needs of students with psychopathology or clinical disorders. With schools moving away from labeling students, the authors could have provided some guidance regarding how school psychologists or teachers should proceed when working with students who may be suspected of having emotional disorders, ADHD, autism, or other disorders that are often comorbid with learning disabilities.

The last chapter addresses several questions regarding the effectiveness of RTI. Some questions include: 1) whether RTI will decrease the prevalence of students with learning disabilities, 2) how teachers can differentiate students with learning disabilities and low achieving students, and 3) whether RTI should be the only method for identifying students with learning disabilities. The authors provide some thoughtful responses to these questions and propose other challenges that teachers, school psychologists, and researchers should critically analyze to determine how they may impact assessment and intervention, both of which are essential in determining school-wide, classroom, or individual progress.

Bender and Shores' *Response to Intervention: A Practical Guide for Every Teacher* is a well-written introductory guide for readers wishing to understand the evolution, processes, and challenges of RTI. Appendices provide an RTI needs assessment form, additional case studies, and a list of evidence-based curricula and resources. Throughout each chapter, reflection questions are used to help readers integrate the information about RTI with the reader's individual needs and experiences in the schools. As many schools continue to transition to the RTI framework, many teachers and staff will need knowledge and training to provide innovative instructional practices and services effectively. This book would be a great addition to teachers' or school psychologists' RTI toolkits.

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People and Places

■ The University of Missouri-Columbia School Psychology Program is pleased to announce the hiring of **Dr. Wendy Reinke**. Dr. Reinke, a 2005 graduate of the University of Oregon, comes to us most recently from Johns Hopkins

University, where she completed a post-doctoral fellowship in prevention science. She joined Craig Frisby, Cheryl Offutt, and Jim Koller on the school psychology faculty beginning in fall semester 2007.

Announcements

Earn a Doctorate at Vanderbilt while Working with Leading School Psychology Researchers to Develop Educational Measurement Tools

The new Interdisciplinary Program in Educational Psychology (IPEP) at Vanderbilt University's Peabody College is offering the opportunity for doctoral students with interests in school psychology, special education, and child clinical psychology to develop expertise in the design and validation of tests and assessments. Students in the program will enhance their knowledge and skills through an integrated examination of theories of learning and cognition, along with training in measurement and assessment methodologies, in preparation for research careers at universities, test companies, state departments of education, or large school districts.

The IPEP emphasizes the integration of learning research and measurement methods to enable the development of better assessments, which in turn can unlock new insights into what and how people learn. Students gain understanding of diverse perspectives on learning, as well as methods of assessing it. Students also have opportunities to propose and conduct research of their own that focuses on learning and development, or use of assessments that accurately characterize learning.

The IPEP is an interdepartmental community of scholars, rather than a free-standing degree program. Students participating in the program must be admitted to an existing Peabody department (Community Research and Action; Leadership and Policy Studies; Teaching and Learning; Psychological Sciences; or Special

Education), which will serve as their home department.

Students in the IPEP:

- Complete a three- to four-year sequence of coursework and seminars totaling 16 credit hours.
- Participate in colloquia featuring experts on learning, measurement, or assessment.
- Present a proposed or completed research project during the final year of the program.

Students within IPEP will be extremely well-compensated. As part of the Dunn Family Scholars Program, IPEP has obtained funding for three students per year to receive full tuition remission, a very competitive stipend, and an annual research account. Contact the program coordinator for specific admission deadlines and funding details. Acceptance into the IPEP will be based on (1) meeting the admission standards to Peabody College, (2) writing a statement of research interests compatible with the program's goals, and (3) obtaining a letter of support from the student's department advisor or an IPEP faculty affiliate. A cross-departmental admissions committee chaired by the program director makes admissions and funding decisions.

To apply to the IPEP or learn more about it, contact Stephen N. Elliott, Dunn Family Professor of Educational and Psychological Assessment, Vanderbilt University, Peabody #59, 230 Appleton Place, Nashville, Tennessee 37203-5721, Office Phone: 615-322-2538, Email: steve.elliott@vanderbilt.edu.

You may also visit IPEP at <http://www.vanderbilt.edu/lsi/ipep.html> or visit Peabody College of Vanderbilt University at <http://peabody.vanderbilt.edu/>.

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Remembering Sam Bonham, 1925-2007

Children with Learning Disabilities (1981), President's Award from Chapter 208 of the Council for Exceptional Children (CEC, 1978), Special Educator of the Year from the Ohio Federation of the CEC (1974), Certificate for Outstanding Service from the Ohio Inter-University Council on School Psychology (1971), and Director Emeritus of the Division of Special Education, Ohio Department of Education (1981).

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NEWSLETTER EDITORIAL STAFF

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McKee 248, CB131
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Greeley, CO 80639
(970) 351-2356 (w)
(970) 351-2625 (f)
michelle.athanasiou@unco.edu

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