Social Justice

Advocating for Youth Experiencing Trauma

By Meredith Weber, Mackenzie Freeman, Justina Yohannan, Yahaira “Yari” Diaz, Stephanie Miodus, & Aigner Allen

The increased awareness of the detrimental consequences of trauma exposure has led researchers to identify best practices for integrating trauma-informed approaches to child and family services (Guevara et al., 2021). The foundations of trauma-informed care include the awareness of the widespread impact of trauma, integrating knowledge of trauma and recovery into all parts of a system, and avoiding retraumatization of those affected by trauma through thoughtful implementation of trauma-informed practices, procedures, and policies (National Child Traumatic Stress Network [NCTSN], 2017).

Relevant factors in creating trauma-informed practices and policies include consideration of intergenerational trauma and societal inequities such as bias and racism that contribute to the widespread experience of trauma in minoritized youth and their families. A trauma-informed approach as a universal design supports students to reach their potential in school both behaviorally. [continued on page 21]

Awards

April Turner Named NASP’s 2022 School Psychologist of the Year

By Elsa Arroyos

The National Association of School Psychologists takes great pleasure in announcing that April Turner is our 2022 School Psychologist of the Year. The School Psychologist of the Year Award recognizes excellence in the provision of school psychological services by a field-based practitioner.

April Turner, PhD, NCSP, is currently the school psychological services supervisor at the Maryland State Department of Education. Prior to moving into this position just a few months before the NASP 2022 Annual Convention, she served as a school psychologist in Baltimore City Public Schools (BCPS) for 9 years. April earned her PhD from the University of Nebraska-Lincoln in 2012, and in 2020 completed a master’s degree in educational administration from Loyola University in Baltimore.

Throughout her career, April has been a tireless advocate on behalf of children, the profession, and the systems necessary to support student success. As a practitioner, April’s work within general and special education has addressed individual and systemic barriers to a student’s ability to [continued on page 29]

Professional Practice

Moving Beyond Self-Care: What Happens if Your Oxygen Mask Isn’t Dropping?

By Kimberly Yanek, Erin Scherder, Christopher Haines, Susan Barrett, Scott Huebner, & Mark D. Weist

“Put on your oxygen mask first, then you can help those around you.” This common recommendation for managing our own stressors and well-being requires that we first take care of ourselves before we can begin to help others. This sentiment assumes a preexisting system that drops an “oxygen mask” for someone to access when in distress or crisis. What happens if the oxygen masks aren’t dropping? What happens if your level of distress means you need help “putting on your own oxygen mask?” Who would come to your aid? Education systems often promote messages about the importance of self-care and offer activities to support well-being before or after hours. What if education systems were organized to support teacher well-being, which includes the ability to navigate stress, through both prevention and meaningful response efforts like “dropping the oxygen masks” when needed? Thus, we focus on systems change strategies in this article, based on research indicating that systems change is fundamental to reducing distress and improving the overall well-being of educators and administrators (Greenberg et al., 2016).

Defining Stress

There is no one agreed upon definition of stress, mostly because individuals experience and respond to stress very differently. One that may resonate with many educators is: “a condition or feeling experienced when a person perceives that demands exceed the personal and social resources the individual is able to mobilize” (American Institute of Stress n.d.). Most comprehensive definitions of stress include the consequences of unhealthy, [continued on page 13]

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The Power of a Student–Adult Relationship

By Laurie Klose

I hope this issue of Communiqué finds you all charging forward toward the end of this school year. Many school psychologists complete their academic year in May, but no matter when your school year closes, most people are quite busy and many feel overwhelmed at the thought of completing all their tasks in a timely manner. Remember that attention to professional boundaries and professional well-being are critically important to one’s mental health and the ability to do one’s work effectively.

As I write this message, it is my son’s 21st birthday. The advantages that my child brought to the system are important to acknowledge and discuss with him. It is also important to acknowledge the opportunities that he has been afforded by his family, parents’ educational level, and his race. It’s interesting to me that, while my son is very aware of this privilege, he would identify a very different primary factor for his successful navigation of the educational system: a few key teachers who made all the difference in how he sees himself as a student, as an artist, and as a person.

At the NASP convention, several sessions that I attended emphasized the importance of relationships between adults in schools and the children and teens with whom they work. Considerable empirical support documents the effectiveness of strong student–adult relationships in mitigating risk factors for school difficulties. And it is not only social–emotional outcomes that are improved as a result of positive relationships, but academic achievement outcomes as well.

Cook et al. (2018) describe the Establish–Maintain–Restore model for promoting enhanced student–teacher relationships, and demonstrated significant positive outcomes in both mental/behavioral health outcomes and academic performance. School psychologists supported teachers in these efforts by providing important professional development and ongoing professional support. This type of intervention has the potential to impact large numbers of students in any given school year. Imagine a world where every school committed to fostering positive relationships between the adults and the students in a building.

The possibilities are astounding!

The truly incredible thing about student–adult relationships is that we can transform previously untapped resources into effective interventions. As school psychologists, we can support administrators, support staff, maintenance staff, clerical staff, and noninstructional personnel in developing and maintaining positive relationships with students by making ourselves available for questions, ideas, encouragement, and whatever may arise. This type of work can be very rewarding in that we are able to see the impact of a positive relationship, and we can be confident that the long-term impact of the relationship can be tremendous.

A school psychologist can also be the person who creates the relationship that makes a life-long difference. I can remember a particular student with whom I created an ongoing, supportive relationship that was not specific to services delivery or an IEP requirement or a formal mentorship. In general, I accepted this student for who they were and focused on how that student made coming to school a little bit more fun. It was simple on my part and did not require scheduling, documenting, goal monitoring, or anything other than an occasional check-in, a genuine concern, an accepting attitude, and a commitment to being a person that this teen could count on. It mattered. Because this student had some limitations in communication, their parent was the one to articulate the impact of the relationship. The parent talked about the student looking forward to coming to school for the first time, sharing school experiences for the first time, and a general improvement in the student’s overall mental state. I keep a picture of this student in my office to remind me of how something so easy for me could make such a tremendous difference.

I challenge you to seek out that student who needs an adult who truly sees them and be willing to give them the most important things: time, support, and acceptance. You can be that person, and you will receive as much or more than you give.

Considerable empirical support documents the effectiveness of strong student–adult relationships in mitigating risk factors for school difficulites. And it is not only social–emotional outcomes that are improved, but academic achievement outcomes as well.

Reference

Organizing for Mental Health

Where I live, May is a beautiful month: lilac, dogwood, and apple blossoms. It’s a celebration of creation that I love to see every year.

In the professional realm, Communiqué has the honor of celebrating the creativity and hard work of its members. This is recognized by the NASP Awards ceremony at the convention. I’m sure you noticed the front page photo of April Turner, our School Psychologist of the Year. Don’t stop there: Look inside at page 16 to learn about all the other award winners—what an inspiring group of people! Please congratulate all of them on their accomplishments.

Inside you will find (in addition to convention coverage, book reviews, spotlights on students and early career colleagues, and tech news) articles about advocacy, self-care, student–adult connections, cognitive assessment of children with cerebral palsy, bilingual liaisons in schools, state laws and court decisions regarding dyslexia, teleconsultation, youth suicide, funding opportunities through the Woodcock Institute, and a closeup on systemic interventions being tried in the Monongalia County Schools to implement the organizational principles of the NASP Practice Model.

You will want to read about the innovations of this district, which was recently recognized by the NASP Excellence in School Psychological Services program!

The front-page article on Moving Beyond Self-Care notes that school staff members are often encouraged to pursue self-care on an individual basis to help relieve the stress that is endemic in all school organizations these days. But “our school systems cannot remain dependent on telling people to use self-care.” Instead, what is required is an organizational response.

What impressed me about the school psychologists in Monongalia County was their effort to intentionally build into the structure of the system, supports for school staff, including themselves. These supports move beyond their programs of staff wellness and self-care, and feature practices specifically designed to help school psychologists, including professional learning communities; enhanced visibility, partnerships, and connections within the school and community; and flexible assignment of school psychologists determined by their interests and skills. It seems to me that this approach has numerous advantages to both the students and the school psychologists themselves.

I know this is an incredibly busy time of year. Even if you don’t yet have organizational staff supports in place to mitigate stress levels at your school, remember to check in with yourself frequently and be generous in using your own stress management strategies. If nothing else, get outside and enjoy the flowers!

—John E. Desrochers
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Schools have a responsibility to examine organizational systems, practices, and policies to identify ways to allocate resources in ways that promote teacher well-being. Schools should understand the importance of teacher well-being, the impact on workforce and student outcomes, and the ways in which systems are supporting or hindering well-being.

—Yanek, Scherder, Haines, Barrett, Huenber, & Weist, page 13
Cognitive Assessment in Early Childhood for Unilateral Cerebral Palsy

By Briana E. Paulman, Wendi L. Johnson, Heather Roberts, & Angela Shiekh

School psychologists are often called upon to contribute to an assessment of young children with cerebral palsy (CP). Using two case studies, this article reviews cognitive profiles found among these children and discusses issues related to their assessment.

According to international consensus, CP is a group of disorders affecting movement, posture, and balance as a result of nonprogressive disturbances occurring in the developing brain, comprising the most common motor disability among children (Vitrakas et al., 2020). The prevalence of CP has remained relatively stable, with an average of 2.11 out of 1,000 live births (Oskoui et al., 2013). There are several subtypes of CP: spastic, dyskinetic, and ataxic. Spastic CP is the most common type. Spasticity is a form of hypertonia or increased muscle tone which results in stiff muscles, making movement difficult. Spastic CP is the result of damage to the motor cortex and pyramidal tracts of the brain that connect the motor cortex to the spinal cord.

The dyskinetic forms of CP manifest variable movement that is involuntary (outside of one’s control). Dyskinetic CP is characterized by slow, twisting, writhing, or repetitive movements. Dyskinetic CP results from damage to the basal ganglia of the brain, which is responsible for regulating voluntary movements. Ataxic CP is the least common form of CP and is characterized by issues with balance. Ataxic CP is caused by damage to the cerebellum which controls balance and coordinates movement. Spastic CP is further divided based on the severity of impairment, including hemiplegia, diplegia, and quadriplegia. Diplegia is a kind of symmetrical paralysis that impacts two corresponding parts of the body, such as both arms; hemiplegia involves the loss of sensation and movement on one side of the body; and quadriplegia involves paralysis in all four limbs. Unilateral CP affects limb functioning on one side of the body while diplegic and quadriplegic CP result in bilateral impairment (Stadskleiv et al., 2018). Gross motor functioning is typically assessed using the Gross Motor Function Classification System (GMFCS; Palisano et al., 1997). The GMFCS assesses mobility, balance, and posture. Functioning is classified into one of five levels based on the severity of each of these domains; minor limitations are assigned Level I and severe limitations are assigned Level V. Fine motor functioning is typically assessed using the Manual Ability Classification System (MACS; Eliasson et al., 2006). The MACS assesses hand functioning in daily activities and reflects typical performance. Classification levels are similar to those of the GMFCC. Knowledge of these classification systems is beneficial in order to understand the impact that CP may have on the child’s performance in the educational setting.

The manifestation of CP can change over time and may include deficits in cognition, communication, behavior, and perception (Rosenbaum et al., 2007). This variability in presentation may necessitate periodic updating of assessment data as the child’s needs manifest differently in the educational setting.

COGNITIVE FUNCTIONING IN CEREBRAL PALSY

Cognitive functioning is rarely the focus of research studies (Sigurdardottir et al., 2008), given that CP is classified as a motor disability. However, CP has been found to affect cognition in a variety of ways. Cognition can describe both global intellectual functioning (i.e., intelligence) and specific abilities, including visuo-perceptual, memory, attention, and executive functioning (Stadskleiv et al., 2018). Understanding cognitive functioning is important when considering neurodevelopmental disorders that may be comorbid with CP, such as intellectual disability (ID). Cognitive assessment with children with CP often proves challenging due to the lack of standardized assessments designed specifically for those with CP. Traditional, standardized measures may be difficult to administer in this population due to motor constraints, potentially making reliable assessment of cognition difficult (Stadskleiv, 2020). Furthermore, of those individuals who are able to complete an intellectual measure, the scores may be an underrepresentation of the individual’s actual cognitive functioning due to tasks requiring fine motor actions or speed (Reid et al., 2018).

The heterogeneity of the presentation of CP also proves challenging when examining cognitive functioning. In a meta-analysis of cognitive functioning in children aged 0–18 years, 81–86% of children with unilateral spastic CP were reported to have an IQ greater than 70, followed by 67–78% of children with bilateral CP (Stadskleiv, 2020). Of those with quadriplegia CP, 90–100% had an IQ of less than 70, suggesting that greater motor impairment may be related to greater cognitive impairment. Similarly, an additional study found that 60% of children with CP had an IQ greater than 70, with spastic unilateral and diplegic CP resulting in better cognitive outcomes than quadriplegic and dyskinetic CP (Sigurdardottir et al., 2008).

In one study specific to cognitive functioning in toddlers with CP, it was found that about half of participants were significantly delayed while the other half were within normal limits (Enkelaar et al., 2008). Furthermore, motor and mental functioning appeared to develop concurrently. Of those participants whose mental and motor functioning did not develop together, mental functioning appeared to be favored (Enkelaar et al., 2008). This is consistent with literature stating that motor functioning is positively associated with intellectual functioning (Dalvand et al., 2012); stronger motor abilities were found to be related to higher levels of intelligence. A population-based study that examined both motor and cognitive functioning found that the rate of ID in children with a GMFCS Level IV–V was almost three times the rate of those at Level I–II (Reid et al., 2018). This information suggests that cognitive functioning should be examined in relation to gross motor function.

When examining potential cognitive deficits, it is also important to understand what is considered typical cognitive development for early childhood. Specifically, memory recognition abilities are typically achieved around 4 years of age while immediate memory capacity increases with age (Anderson et al., 2019). Furthermore, preschool age children typically hold 3–4 “chunks” of information at a time. Children ages 2–3 years can typically match objects and pictures, point to various body parts, follow single commands, and use two- to three-word sentences (Anderson et al., 2019). Children ages 3–5 years start to recognize letters and numbers and have a more extensive vocabulary. Younger children also take longer to perform cognitive processes, although speed of processing increases with age (Anderson et al., 2019).

These skills are identified as typically emerging during this developmental period, but it is important for school psychologists to keep in mind that cognitive functioning in early childhood can be variable regardless of disability status.

ASSESSING COGNITIVE FUNCTIONING

Many considerations go into selecting a cognitive assessment measure for all students, not just those with CP. However, when discussing special populations, such as those with disabilities like CP, the availability of instruments may narrow. Specifically, practitioners may wish to choose to eliminate instruments or tasks that require motor skills, such as block construction tasks or tasks with many ma...
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nipulative. Furthermore, certain processing speed tasks that involve fine motor skills, like writing, may not be a feasible option. Selecting an instrument designed for early childhood assessment is a further confounding factor. Several go-to measures may include traditional cognitive measures, such as the Woodcock-Johnson Tests of Early Cognitive and Academic Development, Fourth Edition (WJ ECAD-IV; Schrank et al., 2015), Wechsler Preschool and Primary Scale of Intelligence, Fourth Edition (WPPSI-IV; Wechsler, 2012), or the Kaufman Assessment Battery for Children, Second Edition, Normative Update (Kaufman & Kaufman, 2018).

However, a more appropriate measure for a student may be a developmentally based instrument that also assesses cognitive functioning, such as the Bayley Scales of Infant and Toddler Development, Fourth Edition (Bayley-4; Bayley & Aylward, 2019), Mullen Scales of Early Learning (Mullen; Mullen, 1995), or Differential Ability Scale, Second Edition (DAS-II; Elliot, 2007).

The aforementioned cognitive measures have many benefits. They provide a more comprehensive understanding of the student’s cognitive profile, often providing a broad-based or overall score such as a Full Scale Intelligence Quotient or General Intellectual Ability (GIA) index, as well as information on additional broad abilities (e.g., verbal comprehension, visual-spatial processing). Furthermore, as the student gets older, it is easier to make comparisons between traditional cognitive measures than developmental measures. For example, a student’s scores on the WPPSI-IV and the Wechsler Intelligence Scale for Children, Fifth Edition (WISC-V; Wechsler, 2014) may be more comparable than those on a Bayley-4 and a WISC-V. Finally, while these measures use manipulatives (e.g., blocks or cards), this use is more limited with traditional cognitive measures than in the developmental measures. Moreover, many of the cognitive subtests can be limited to pointing or placing objects together.

While there are benefits, traditional measures may still be inappropriate for early childhood assessment with students with CP. Individuals with CP may hold more cognitive weaknesses or deficits than their typically developing peers (Stadsklev, 2020), and certain cognitive measures may not have a low enough basal for the student to achieve an actual score. The CP population may have such cognitive deficits that an assessment is unable to accurately represent the student’s true abilities. Finally, the results may be an underrepresentation of the student’s actual cognitive functioning due to tasks requiring fine motor actions or speed (Reid et al., 2018).

Alternatively, developmental measures, such as the Bayley-4, Mullen, and DAS-II, may be more appropriate for this population. Developmental measures allow the examiner to reverse enough to achieve an appropriate basal should the student exhibit lower cognitive functioning. Additionally, the use of manipulatives and certain tasks on these measures allow for informal observation (and formal, in the case of the Bayley-4) of fine and gross motor skills that may be impacting a student with CP. On the other hand, the use of manipulatives may prove to be a limitation of the developmental measures. Depending on the limitations of the student with CP, the student may not be able to complete some of the required tasks, such as manipulating small objects, building puzzles, and holding different objects. This may adversely affect the student’s overall performance.

These barriers to cognitive assessment with children with CP also highlight the importance of a multidisciplinary approach. School psychologists may choose to consult with an occupational therapist who would have a better understanding of any motor limitations the child may have. From there, the school psychologist can more appropriately choose the best measure for the student with whom they are testing. When working with children with cerebral palsy (CP), it is important to take into consideration the types of tests that are used and how those outcomes might impact educational performance.

**APPLICATION TO PRACTICE**

The following are two case study examples of a traditional cognitive assessment measure administered to preschool-age students with unilateral CP. These case examples were pulled from a separate study to highlight the importance of selecting an appropriate cognitive assessment measure. For this assessment, the WJ ECAD-IV was used to assess cognitive functioning.

**Case study #1.** John is a 3 year, 8-month-old male with mixed tone dystonic spastic right unilateral CP with his right upper extremity being his most affected limb. He is classified as GMFCS Level II, indicating he is independently ambulant with some motor difficulties. He is classified as MACS Level II, indicating he can handle most objects but may have reduced speed or quality. John has a history of neonatal seizures due to left hemisphere infarction occurring prenatally in the late third trimester, resulting in a CP diagnosis. He was born at 40 weeks’ gestation via cesarean section with no complications at birth. John demonstrated developmental delays in his language and motor milestones.

Results of the WJ ECAD-IV for John are displayed in Table 1. John exhibited a high average GIA, although variability was noted among his scores. Due to this variability, it was important to consider performance across individual tasks that comprise the GIA because this is often more representative of the child’s abilities. John had a relative and normative strength in his sentence repetition abilities, a task of short-term working memory, with his score falling in the superior range. He also demonstrated superior comprehension knowledge abilities; he was able to identify pictured objects. He displayed high average processing speed, or speed of lexical knowledge, by quickly stating names of pictures. His long-term storage and retrieval abilities also fell in the high average range in a controlled learning task; he was able to remember previously unrelated information in pairs. Alternatively, he exhibited a relative weakness in an auditory processing task of sound blending, falling in the low average range. Although this is considered a weakness for John, his score is still in the average range in relation to his same-age peers; therefore, it is considered a relative weakness and not a normative weakness.

**Case study #2.** Jane is a 2 year, 11-month-old female with spastic cerebral palsy and mild right hemiparesis of an upper extremity. She is classified as GMFCS Level I, indicating that she is independently ambulant with minimal motor difficulties. She is also classified as MACS Level II, indicating that she is able to handle most objects but may have reduced speed or quality. She was born at 30 weeks’ gestation via emergency cesarean section and admitted to the neonatal intensive care unit (NICU) but was later discharged and sent home in stable condition. At home, she was noted to have poor feeding and lethargy and was admitted to the hospital around 1 month of age. She was admitted to the NICU for ongoing management of group B streptococcus (GBS) meningitis. She experienced seizures controlled

### Table 1. WJ ECAD-IV Results by Cluster, Subtest, and Cognitive Ability

<table>
<thead>
<tr>
<th>CLUSTER AND SUBTESTS</th>
<th>COGNITIVE ABILITY</th>
<th>JOHNSON</th>
<th>JANE</th>
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<tr>
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<td>Standard Score</td>
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<td>Standard Score</td>
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<td><strong>EARLY ACADEMIC SKILLS</strong></td>
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with leviteracetam monotherapy. She had an MRI with abnormal results consistent with meningitis associated with hemiparesis and global developmental delay. She was diagnosed with CP and global developmental delays in fine and gross motor and speech.

Results of the WJ ECAD-IV (listed in Table 1) indicated that Jane exhibited a GIA in the very low range, although variability was noted among her scores (ranging from below average to average, with most falling in the low average range). Jane’s abilities are best represented by examining her performance on individual tasks. She exhibited a relative strength in her comprehension knowledge abilities where she was able to identify pictured objects and demonstrated an average word knowledge ability. She displayed low average short-term working memory where she was able to remember and repeat phrases spoken by the examiner. Jane exhibited low average visual processing abilities when asked to identify an image that had been distorted. She demonstrated low long-term storage and retrieval abilities and had difficulty recalling paired associations even with corrective feedback from the examiner. Both her auditory processing ability to blend phonemes and syllables and her processing speed consisting of quick lexical retrieval were low. Jane also demonstrated low fluid reasoning abilities, which was demonstrated by her difficulty using inductive reasoning to discover the underlying characteristics that govern a word relationship analogy.

Factors to consider: These case studies highlight the differences in cognitive functioning among preschool children with CP. Regarding motor functioning, while Jane had fewer motor restrictions, John displayed a higher cognitive profile on direct testing. Previous research has found that motor functioning is typically correlated with cognitive functioning (Dalvand et al., 2012; Enkelka et al., 2018); however, the results of these case studies suggest this is not always the case. Although cognitive and motor functioning typically develop together, it should not be assumed that this is true for all children with CP. Children with severe motor impairments may still have average cognitive abilities, while children with mild motor impairments may have impaired cognitive abilities. One study found that 6 of 38 children with a GMFCS Level IV to V had an IQ greater than 70 and no learning disabilities (Himmelmel et al., 2007). While this is a small sample, it provides further evidence of the variability in profiles across and within specific CP subtypes. Therefore, each child should be individually assessed throughout development to determine the most beneficial interventions for that particular child.

Furthermore, it may be more beneficial to examine strengths and weaknesses rather than overall cognitive functioning in children with CP because deficits in speed and fine motor abilities can impact results (Reid et al., 2018). For example, while Jane’s overall GIA would show that she is functioning in the fluid reasoning), the subtests that comprise each ability are limited. Thus, if a child does not perform well on one subtest, it may not necessarily indicate the child has a deficit or weakness in that area. Finally, children with CP should be tested early to identify any cognitive or learning deficits in the early developmental period. Early intervention is essential in addressing such deficits. In addition, frequent assessment across development would be beneficial to document domains of functioning and inform intervention.

SUMMARY

This article demonstrates the importance of school psychologists’ understanding of which type of cognitive or developmental measure is most appropriate when working with young children with CP. Cognitive profiles vary greatly within this population and motor impairments also need to be taken into consideration. School psychologists need to know the various strengths of a particular measure and determine if it is the best fit for the child’s level of motor and cognitive functioning. As shown in the case examples, a cognitive measure that does not allow for sufficient easy items to establish a basal based on the child’s age and developmental level might lead to relative weaknesses being missed when interventions could support that area of development. The following are specific takeaway from this review as important points to remember:

POINTS TO REMEMBER

- When working with a child with a motor disability like CP, school psychologists should consult with the occupational therapist at their site to provide a better understanding of any limitations the child may have.
- Perform informal observations, if possible, and gather as much data as possible on the student’s current level of performance and functioning in the educational setting.
- Understand the research on CP, specifically how profiles of cognitive functioning can vary based on the severity of motor limitations.
- Select a cognitive instrument that will best assess the student’s abilities where the child is currently functioning, whether that is a traditional cognitive measure or a developmental measure.
- Recognize that reporting strengths and weaknesses may serve to provide a better understanding and representation of the child with CP. Also, updated assessments may be warranted more often because the needs change frequently with a child with CP.

References

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Refining a Role for a School Bilingual Liaison in U.S. Public Schools

By Sahian Cruz & S. Andrew Garbacz

C ulturally and linguistically diverse families make up a large and growing part of the school community. According to the National Center for Education Statistics (NCES, 2018), almost a quarter of caregivers with children enrolled in America’s public schools were born abroad. Of families with children in public schools, 23.1% of those families speak a language other than English in the home. The number of immigrant families in the U.S. is projected to grow in the coming years, continuing a pattern of migration to the U.S. from countries around the world (Vespa et al., 2020).

For decades, trend predictions have anticipated the growing number of families arriving in U.S. school communities. Needlessly, schools have been slow to adopt resources and practices that will ensure that immigrant families feel welcomed. In states like California, Texas, and Florida, where large communities of immigrant families thrive and school demographics are rich with learners from diverse roots, schools have struggled to connect with culturally and linguistically diverse (CLD) caregivers (Sanders-Smith et al., 2020). As a result, voices from diverse perspectives continue to go unheard, further marginalized by an exclusionary environment. Adding to their struggle in building partnerships with CLD parents, many schools lack the supportive structures necessary to foster cultural empowerment. An example of cultural empowerment is the recognition and emphasis of cultural capital, the tangible and intangible resources unique to an individual’s culture and lived experience (Yosso, 2005). There are six forms of cultural capital: linguistic, aspirational, resistant, navigational, social, or familial. The sum of a person’s cultural capital is their cultural wealth. Cultural capital could be embraced by schools across areas such as academics, school environment, and evidence-based intervention practices within the school; instead, schools tend to favor Euro-centric cultural capital in such a way that reproduces broader societal stratification (Monkman et al., 2005). Through the use of policies and practices that neglect to incorporate the cultural wealth of all families in the community, schools perpetuate cultural erosion that is ultimately detrimental to diverse student groups (Valenzuela, 1999).

For example, policies prohibiting the use of home languages in schools can contribute to dissonance between the home and school environments for a child, while also gatekeeping the school community from CLD caregivers. Meanwhile, schools embracing the multilingual characteristics of their community have more success in connecting with families who speak a language other than English in the home (Tarasawa & Waggoner, 2015).

Immigrant families possess a wealth of knowledge with the potential to positively impact the educational environment, yet schools are missing those important perspectives by failing to remove barriers to linguistically diverse caregiver engagement (Tarasawa & Waggoner, 2015). It is not a question of desire, but instead one of access when it comes to minoritized caregiver’s involvement in schools (Turner & Kao, 2009). While most parents want to be involved with their child’s school, some hesitate due to a perceived unwelcoming environment, unfamiliarity with the school system, and worries that they will not be understood (Martinez-Cosio & Iannaccone, 2007; Qin & Salhan, 2014). As a result, White, English-dominant caregivers occupy the bulk of parent changemaker roles available in the schools. Exclusionary school communities are at a disadvantage because they miss out on the perspectives and ideas that could inform culturally responsive practices and a diversification of values in the space. Schools build barriers for CLD families, inadvertently eroding trust and perpetuating harm to these groups. In order to make change, schools must revisit and revise their family engagement practices to examine whether families from all roots have equitable access to the community. Authentic and caring relationships with CLD caregivers are essential to welcoming all families into the space.

Throughout this paper, we make use of the term culturally and linguistically diverse, or CLD, to refer to individuals who speak a language other than English at home. This is used in lieu of “minoritized,” as CLD captures the intersectionality of racially and linguistically minoritized identities. Furthermore, CLD is more inclusive for second and third generation people, who may not face citizenship-related barriers yet still struggle to access schools due to a dearth of integrated resources.

PRACTICES TO PROMOTE ENGAGEMENT AMONG CLD FAMILIES

In response to the increase in CLD families and children in U.S. schools, school professionals have developed and implemented numerous approaches with the intent to better engage CLD families and create inclusive school environments. For example, educational materials are often translated from English into other languages (Garbacz et al., 2018). There are two primary limitations with this approach. First, some schools do not have the capacity to translate materials into all languages spoken by families in their school community. Second, the translation process is not necessarily culturally responsive. In other words, though the material may be translated into a language a family can read, the material itself may not reflect beliefs and values of families from nondominant backgrounds. Another approach schools may use to support engagement of culturally and linguistically diverse families is to use an interpreter, either employed by the district or contracted from an external agency. However, the gap between best practices in use of interpreters and common practices used in schools is vast (Nahari et al., 2017). For example, interpreters may not have been properly briefed by school professionals prior to meeting with the family. In addition, interpreters may have insufficient knowledge in the cultural background of the family or lack familiarity with the school community and surrounding neighborhood. Thus, the role of a translator in schools is primarily passive; translators infrequently form connections with families. Another way that translation falls short of fostering engagement is that interpreters are most often present at specific meetings, such as meetings to discuss an Individualized Education Program. This use of interpreters undermines opportunities to foster authentic relationships with CLD families at school-wise events and pick-up and drop-off times. Translation and interpretation can provide critical support to culturally and linguistically diverse families, yet fall short of a true culturally responsive approach that focuses on the development of an authentic and caring relationship with families valuable to cross-cultural connections (Bal et al., 2014).

In addition to translation and interpretation, schools often make efforts to create a school atmosphere that is welcoming to all families (McIntyre & Garbacz, 2014). For example, schools may have “welcome” signs in different languages or include images that reflect diverse cultural practices among families and children in the school community. Some schools may create opportunities for children to share about their family culture during assemblies (Battistich, 2009). Despite these efforts, in practice school-wide approaches typically are designed by school professionals from dominant backgrounds, using existing school systems and practices, which are engrained with institutional racism and have perpetuated inequalities among families and children from culturally and linguistically diverse backgrounds (Powell & Golas, 2012). In addition, such approaches are often developed and implemented without an authentic role for families as leaders in a school community and in the absence of a family advocate or expert in cultural responsiveness. A lack of family involvement in development and implementation can undermine school professional efforts toward family engagement (Strickland-Cohen & Kyzar, 2019).

ADVANCING BILINGUAL SCHOOL LIAISONS TO PROMOTE ENGAGEMENT

The shortfall of the current approach is evident in the way that different parents interact with the school. In general, parents from nondominant communities face more barriers than their White counterparts when attempting to access the same spaces at their child’s school (Turner & Kao, 2009). The challenges range from logistical barriers that keep parents from getting through the gates to feelings of being unwelcomed in the space (Okeke, 2014). While established family engagement practices have been helpful to some families, it is clear that schools must do more to make the school accessible and welcoming for immigrant families. To this end, schools might consider a bilingual community liaison to fill the missing link between school and home. Bilingual liaisons are employed by their school to encourage parent engagement and foster family-school collaboration (Miller et al., 2014). This role is similar to that of a cultural broker, an agent who shares a racial/ethnic and linguistic identity with some families in the school community and is employed by schools to assist with the transfer of cultural knowledge for informing awareness and practice in the schools (Yohani, 2013). Bilingual liaisons have similar goals and...
capacities, though they have the additional objective of setting the stage for two-way, collaborative relationships between empowered parents and school staff. These contacts can leverage their shared cultural wealth with families (e.g., language, values, and histories) to overcome common barriers to engagement. In schools already working with bilingual liaisons, immigrant parents have been able to work with the liaisons to resolve common challenges to school engagement, such as unfamiliarity with the U.S. school system (Martinez-Cosio & Iannacone, 2007). The example of exposing hidden curriculum for immigrant families is just one of myriad ways in which bilingual liaisons can facilitate parent involvement. Ultimately, bilingual liaisons serve as a connection between the school and CLD parents, who will feel more comfortable and empowered in the school environment (Wong-Villacres et al., 2019; Yohani, 2013). This sense of belonging opens the space to an influx of cultural wealth to inform school practice in the classroom and when engaging with families.

Although school interpreters and bilingual liaisons may have some overlapping priorities, the role of a bilingual community liaison differs significantly from that of an interpreter (Howland et al., 2006). Schools often work with contracted translators, bilingual staff, and sometimes even students themselves in order to communicate with parents who primarily speak another language. However, this model, where parents interact with other educational stakeholders through a third party, may feel clunky, awkward, and indirect, as it does not foster new relationships between caregivers and school staff. In contrast, bilingual community liaisons play an active role in building a bridge between school and home domains. They are school personnel uniquely positioned to strengthen the family-school partnership by engaging with the family directly rather than by proxy (Miller et al., 2014). Because CLD families are interacting with an institutional agent, they are not “othered” by their lack of connection with a figure at their child’s school.

Caregivers also benefit from building authentic relationships with school staff who share their cultural values and knowledge (Christenson & Reschly, 2010). An authentic connection between parents and institutional agents is characterized by two-way communication, respect, and shared goals (Anderson-Butcher et al., 2010; Nzinga-Johnson et al., 2009). Despite the growing number of minoritized educators entering the workforce, the majority of teachers and administrators in schools are White (NCES, 2019). In tandem with racism and xenophobia engrained in Eurocentric school norms, this means that White parents benefit from their automatic accessibility to the school. In contrast, bilingual community liaisons promote the goal of access equity for all families, as they can leverage cultural capital to authentically connect with CLD caregivers (Wong-Villacres et al., 2019). Cultural capital extends beyond language into shared values, such as cultural representations of education. When bilingual community liaisons interact with families, caregivers from systemically minoritized communities feel welcomed, informed, and empowered to further participate in the school community.

Through their connections with CLD families, bilingual community liaisons open the door to numerous benefits for minoritized people and the school communities supporting them. Like cultural brokers, bilingual liaisons can bring awareness to the resources needed by marginalized families in the community (Sanders, 2008). For example, upon learning about a particular family’s hardship, a bilingual liaison can collaborate with the school to offer support. While this example represents an indirect communication between caregivers and the broader school community, bilingual liaisons also serve to build a family’s involvement in the schools. Wong-Villacres and colleagues (2019) describe a scaffolded approach, in which the bilingual liaison first develops a strong relationship with CLD caregivers. This bond encourages the parent to continue visiting the school and building connections with other stakeholders, gradually leading to CLD caregivers feeling empowered to take on changemaker roles in the community. Schools must listen to these new voices which offer knowledge about diverse forms of cultural wealth and how it can inform culturally responsive practices. New perspectives will also present fresh ideas regarding how the school can foster a more welcoming school climate. A warmer, more welcoming school environment will continue the cycle of new caregiver engagement by bringing in other CLD caregivers who might have otherwise felt unwelcomed in the school community.

INTEGRATING BILINGUAL SCHOOL LIAISONS IN SCHOOL-WIDE CULTURAL RESPONSIVENESS

Bilingual school liaisons can serve a pivotal role in promoting authentic collaboration with CLD families, helping create inclusive school environments. However, if bilingual school liaisons are included as a separate activity or practice, their role may be siloed, limiting impact and undermining the goal of authentic collaboration. Thus, it may be most useful to think about a broader framework within which to integrate bilingual school liaisons.

A public health approach applied to U.S. public schools has led to the implementation of a multitiered system of support (MTSS) in schools. MTSS is a framework that allows school teams to build systems and practices that meet the continuum of student needs (Walker et al., 1996). School-wide systems and practices have been established to promote social, emotional, and behavioral success for students (Sugai & Horner, 2002). However, such approaches often minimize the role of families and are designed primarily by school professionals. Thus, a bilingual school liaison is needed to serve on school-wide teams to emphasize family culture and support positive family-school connections in designing and implementing these school systems (Garbacz et al., 2018).

There are a few guides available to better embed cultural responsiveness into MTSS (e.g., Bal et al., 2014; Leverson et al., 2021). These guides focus on a school-wide approach to interrogating school systems and practices for institutional racism and structural inequalities that are harming families and children. Such guides emphasize embedding cultural responsiveness into the systems, data, and practices that teams use to adapt, implement, and sustain programs and practices within their MTSS framework. For example, deep individual reflections through cultural interviews can uncover school professionals’ biases (Leverson et al., 2021). In addition, schools can embed approaches to systematically minimize the impact of those biases on students (McIntosh et al., 2017). School teams can examine their discipline data for evidence that students from certain races are disproportionately impacted by exclusionary discipline (Sandomierski et al., in press). Despite the utility in these approaches, their impact may be limited in the absence of family voice and a clear and present focus on families from culturally and linguistically diverse backgrounds.

Schools using a positive behavioral interventions and supports (PBIS) framework may also stand to expand their effectiveness in reaching and incorporating the voices of culturally and linguistically diverse families. Like MTSS, a PBIS framework incorporates a three-tiered system to better respond to the needs of students. As the name of this framework alludes, PBIS focuses on providing adequate behavioral supports for the benefit of students and the school climate (Sugai & Horner, 2002). PBIS also focuses on the incorporation of central, school-wide values which are

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regularly prompted via visuals or verbal reminders. Of course, the incorporation of such values begets questions about who is selecting the values as well as what such standards will look like in the school environment. When the majority of administrators and educators are White while the student population is more diverse, students of color are largely targeted for exclusionary practices (Betters-Bubon et al., 2016).

To combat the disparities in disciplinary outcomes, some have taken to the incorporation of cultural responsiveness within PBIS. While MTSS has few guides to integrate cultural responsiveness, culturally responsive positive behavior intervention and supports (CRPBIS) is the subject of a growing body of literature. Research has supported the use of learning labs, spaces where CLD caregivers gather with other educational stakeholders to provide feedback and brainstorm modifications for practices in schools (Bal et al., 2014; Bal et al., 2016). Learning labs and similar practices hold the promise of strengthening the school–family bond, especially for CLD families typically marginalized in American school systems. Bilingual community liaisons can fill the essential role of building authentic, two-way connections with CLD caregivers facing linguistic obstacles in an English-dominant problem-solving space. They can also facilitate the sharing of cultural capital to inform school practices and policies within a CRPBIS framework. Successful liaisons will bring CLD caregivers into changemakers roles typically inaccessible to minoritized groups (Wong-Villarces et al., 2019).

A bilingual school liaison is a critical part of a school-wide culturally responsive efforts. Bilingual school liaisons have expertise in cultural responsiveness and are knowledgeable about family culture and the broader school community and neighborhood. Thus, bilingual school liaisons serve a valuable role on school teams were systems, data, and practices are reviewed, and decisions are made. For example, bilingual school liaisons can support the development of an inclusive school environment and connect directly with immigrant caregivers (Strickland & Lyuytk, 2020). In addition, bilingual school liaisons can serve in a consultative role with school professionals who are examining and addressing their biases. Liaisons can also provide development opportunities for school professionals to increase knowledge and awareness about working with CLD families, which can help overcome language barriers that often impede family participation (Turney & Kao, 2009).

REALIZING THE VISION FOR BILINGUAL SCHOOL LIAISONS

School psychologists have a central role in realizing a vision for integrating bilingual school liaisons into U.S. schools. They can use their data-driven approach to show school and district administrators any extant disparities in academic, social–emotional, and behavioral outcomes for students from CLD families. Using those data, school psychologists can advocate for resources to promote a deep review of school-wide approaches. They can collaborate with other school professionals in the creation of a culturally responsive school-wide approach that support the development of a framework to support the continuum of student and family needs in a school community. School psychologists can also demonstrate the needs with regard to local expertise and family culture and languages to advocate for a bilingual school liaison as a central figure in adoption and sustained implementation of culturally responsive systems and practices. As school professionals embark on improving cultural responsiveness in their schools, bilingual school liaisons can support efforts of school professionals to explore and address their biases, which, if left unresolved, may undermine building-school-wide consensus toward a more inclusive school environment. Finally, bilingual school liaisons can form authentic connections with families and promote family inclusion in school teams to increase the likelihood that decisions about school systems and practices are made with families, and that families have a leadership role in building and sustaining shared school communities.

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Q&A WITH NATALIE LADUKE

Natalie LaDuke, PhD, LCP, NCSP, is the director of school mental health programs for the Greater Greenville Mental Health Association in South Carolina. In addition, she is the associate director of clinical training at Old Dominion University.

Describe the site where you work and how you decided on this type of placement.

Before joining TCSPP, I was a school psychologist in Cicero, Illinois, for three years. I decided to make the leap to academia after taking a part-time position as an adjunct professor. I loved working with graduate students and found my passion in teaching. I currently teach our practicum seminar classes and our System Theory class. I also coordinate all the placements for our EdS students. I work closely with graduate students through teaching, mentoring, and training.

What is your area of expertise? How have you developed skills in this area?

I consider myself a lifelong learner and am always trying to better myself. As a school psychologist, I have a strong interest in social-emotional learning, proactive Tier 1 mental health supports, and mental health screening for all students. I partnered with local universities to implement school-wide mental health screening and led the school's first-ever Tier 1 team. At TCSPP, I continue to stay involved in this work by teaching our systems class. I also have a growing interest in grief, including grief support for students and the neuropsychological impact of grief on children and adolescents.

How do you apply your areas of expertise in your daily work?

I recently passed the clinical psychologist licensing exam and would like to pursue more training in school neuropsychology. I am committed to addressing mental health needs at a systemic Tier 1 level, and I will continue to partner with districts to support this work. In all the classes I teach, I urge my students to think about problems in their schools systematically and to take an ecological approach to supporting students.

What specific aspects of NASP membership and involvement have benefited you in your career thus far? Why is membership in NASP important to you?

I am proud to be an NCSP and a NASP member! I regularly use resources from the NASP website in my classes, and we frequently discuss questions posed on the Communities in my practicum seminar classes. I recently attended the NASP convention in Boston and was inspired by the speakers and the work happening across our field. I was particularly energized by a session hosted by Dr. Silas Pinto (Wounds of Colonial and Racial Trauma), which further reminded me of the work we are all called to do in our schools, universities, and communities. I am grateful that NASP provides a space to learn, engage with peers, and grow our skills.

Beyond Self-Care

[continued from page 1]

The impact of teacher well-being is best understood as a process that is constructed in relation to the context, which for teachers is the school culture and environment (Brady & Wilson, 2021). Although well-intended, compulsory well-being activities and initiatives (e.g., teambuilding events, wellness fairs) can have a negative impact on teacher well-being due to the loss of personal time and perceived loss of autonomy (Brady & Wilson, 2021).

Teacher feedback on well-being efforts indicates their preference for efforts that focus on (a) decreasing workloads, (b) maximizing opportunities for autonomy, and (c) developing healthy relationships with colleagues and students, as well as supporting teacher efficacy (Brady & Wilson, 2021). Our school systems cannot remain dependent on telling people to use self-care. Instead, our systems need to be organized to provide both preventive efforts and "oxygen masks" for teachers when they find themselves unable to get their own.

In private industry, workplace wellness efforts and programs are growing, but the same is not true for educational organizations. Wellness programs in education, specifically those aimed to mitigate stress, remain low, with only 26% of schools providing stress management resources (Center for Disease Control and Prevention, 2016). Districts and schools have a responsibility to examine organizational systems, practices, and policies to identify ways to organize and allocate resources in ways that promote teacher well-being. Schools should understand the importance of teacher well-being, the impact on workforce and student outcomes, and the ways in which systems are supporting or hindering well-being (Hood, 2018).

Multitiered systems of support (MTSS) involve school-wide prevention approaches at Tier 1, early intervention for students at risk or showing early signs of problems at Tier 2, and more intensive intervention for students presenting more significant problems at Tier 3. MTSS is best articulated by the positive behavioral interventions and supports (PBIS) framework, used to organize and allocate resources to address the continuum of student needs by aligning outcomes, data, practices, and systems (Sugai & Horner, 2006). PBIS also has a long tradition of supporting staff through ongoing staff input and feedback, continuous professional learning and coaching, and a phased-based approach to data-informed implementation (Barrett et al., 2020). When implemented with fidelity, data indicate PBIS improves teacher self-efficacy, teacher perception of school safety, and organizational health (Bradshaw et al., 2008).

This article demonstrates how the multitiered public health prevention framework or MTSS can be used to organize well-being efforts across a continuum of what is provided for all (universal), some (targeted), and a few (intensive) staff members. By definition, the role of the school psychologist includes collaborating with others to support students and staff and facilitating connections among all members of a school community to foster healthy relationships and meaningful connections (National Association of School Psychologists, n.d.). In this article, we will illustrate ways in which educational organizations can examine the current state of well-being efforts and identify micro-movements to enhance current efforts by leveraging the strengths of school psychologists within a PBIS framework. Then we will illustrate ways in which school psychologists can support educational organizations to enhance teacher well-being using a public health prevention framework at the school and district levels.

A STORY FROM THE FIELD

We begin with an example from the third author (CH), illustrating how school mental health (SMH) professionals can use the MTSS to organize resources to enhance well-being efforts. The story begins with a group of school administrators asking a SMH professional a question, “Can you provide training to staff on how to address
the mental health needs of the adults in our building?” The SMH professional responded by supporting the administrators with training and by facilitating listening circles (Itzchakov & Kluger, 2018; Mehl-Madrona & Mainguy, 2014) in which administrators were encouraged to voice concerns and share collective responses to those concerns in a safe and supportive environment. The SMH professional advocated that the administrators then take the practice of listening circles back to their school faculty and staff meetings. School administrators openly processed multiple questions with the SMH professional:

“How can I do this with my school faculty and staff?” It’s straightforward and simple. Form a circle. Ask them all to share what the last few months have been like for them. Listen. Be sure everyone gets a chance to share. You can use this model with any question, any topic, or any current event.

“What if people talk too long?” Instruct everyone to take only 1–2 minutes so that everyone gets to share. If someone takes too long, remind them of the need to progress so that everyone gets a chance to talk.

“I’m not a therapist. What if they need something more than this group can help with?” Talk with the person at a later time. Offer them your Employee Assistance Program (EAP) or specific resources for getting their own counseling. Consider forming a voluntary support group of faculty and staff who need more time to talk and process than the meetings allow.

“What if I don’t have time to spend whole meetings on this?” Important events may require meetings dedicated to this purpose. Being proactive in responding will decrease the opportunity for adverse consequences that can arise if you don’t address the concerns. When you don’t have time for a whole-group discussion, break into small groups. When only 3 or 4 members need to share for 2 minutes each, the time needed for processing is 10 minutes or less.

“How can I add this one more thing to my plate?” When schools feel like supportive workplaces, school professionals feel valued. Stress levels are reduced. Turnover is reduced. Strategies that support the mental health of your faculty and staff by allowing them to talk, connect, and feel heard will ultimately reduce the number of “things” on your plate. We are proactively allocating your time rather than reacting to employees’ “issues.”

“How much do I share as a leader? I feel reluctant to talk about my own feelings.” Creating a safe and supportive school environment begins with administration. Faculty and staff will need you to model this and to go first. Professional boundaries are important, but don’t let them stop you from sharing your humanity with your team. They will likely feel less stressed, if they know you relate to their feelings, and they know how to help you.

“What if I need help leading this?” SMH professionals, such as school psychologists, can help you lead the discussion. They can also debrief with you after group processing and talk with you one on one.

CONNECTIONS FROM THE STORY TO SCHOOLS’ MTSS

As reviewed above, PBIS is a research-based application of MTSS. The SMH professional utilized his time building the capacity of administration to facilitate a listening circle for all staff, a universal strategy. Through dialogue, existing resources available for some (e.g., small groups engaged in listening circles or support groups) and a few (e.g., individual resources available through the EAP) were uncovered.

In addition to using PBIS to organize and deploy resources, implementation of PBIS with fidelity has been shown to improve overall organizational health with the most notable impacts identified as a shared commitment to student success, an increased sense of compassion for staff, positive relationships among colleagues, and improved ability of school leaders to advocate for necessary district resources to support staff and students (Brady et al., 2008). These noted impacts on organizational health and other outcomes of PBIS implementation (e.g., improving teacher self-efficacy) are significantly related to improved job satisfaction and reduction of emotional exhaustion/stress for educators (Brouwers & Tomic, 2000; Grayson & Alvarez, 2008; Skaalvik & Skaalvik, 2011). These outcomes also reflect research on teacher preferences for educational organization well-being efforts (Brady & Wilson, 2021). Additionally, PBIS can only be implemented with fidelity when all stakeholder voices and choices (staff, students, and families) are included and reflected in implementation efforts (Sugi & Horner, 2006). The research and implementation efforts for PBIS provide educational organizations opportunities to develop well-being efforts that include teacher preferences for autonomy, healthy relationships with colleagues and students, and support for teacher efficacy (Brady & Wilson, 2021).

Using the PBIS framework allows for well-being efforts to be embedded into the school culture and for opportunities to decrease workloads through alignment and integration work inherent throughout approaches. School psychologists can help facilitate the employment of resource mapping to identify opportunities to align, integrate, add, or eliminate practices that are not effective (Center on Positive Behavior Interventions and Support, 2017). Recently, The National Center on PBIS published a brief entitled “Using PBIS to Build a Culture of Wellness for All” (Barrett et al., 2021) that offers specific, additional considerations to address well-being efforts through the interaction of individual and organizational needs using PBIS. See the publication for strategies to use at both the district and school level.

CONCLUSION

Systematic support of educator wellness requires an organizational response. Our educational systems are stressed, but the individual is currently solely responsible for mitigating the impacts of organizational stress. Although well-intentioned, the current self-care activities proposed can be harmful. In actuality, the oxygen mask teachers are requesting is a reduction in workload, more autonomy, and healthy relationships with colleagues and the students they serve. Engaging adults through active learning and relationship building, as reflected in the listening circle example, provide opportunities to support educator well-being. Implementation of initiatives using a public health prevention model is one example of a systematic approach to improving organizational health in relation to job satisfaction, stress reduction, and teacher efficacy.

Originating from a public health model, PBIS is a preventive approach that can be adapted to fit any given context, making it a logical approach to implementing well-being efforts for staff. The role of the school psychologist is to support all stakeholders, including staff, students, and families. School psychologists are well-positioned in schools and districts to work with leadership teams to support organizational changes in policies, practices, and systems to meet staff needs that reflect the aforementioned teacher preferences for well-being initiatives. Using PBIS provides school psychologists and educators with an efficient, effective method for instituting organizational change to deliver the oxygen needed to support and maintain a healthy workforce.

References


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The NASP Government and Professional Relations Committee each year recognizes people who have shown outstanding performance as champions and advocates for education and mental health services for children and families. Three awards are given each year: the Special Friend of Children Award, the Outstanding Advocate Award, and the Certificate of Appreciation.

**SPECIAL FRIEND OF CHILDREN AWARD.**
The Special Friend of Children Award recognizes policy makers, elected officials, and other public servants or members of the community who have proven to be outstanding champions at the national level for the improvement of education and mental health services for children, youth, and their families. This year, two such champions were recipients of this award: Senator John Tester and Congresswoman Judy Chu.

**Senator John Tester,** the senior senator for the state of Montana, serves as chairman of the Senate Veterans’ Affairs Committee. He is also a member of the Senate Commerce, Indian Affairs, Banking, and Appropriations Committees. Senator Tester has been a long-standing advocate for children, families, and education and an important supporter of NASP’s policy priorities related to improving ratios and access to mental health services in schools. He is the lead sponsor of the Increasing Access to Mental Health in Schools Act, which if enacted would help more students receive the supports they need to be successful in school and in life. He is also a supporter of the Equality Act and the IDEA Full Funding Act.

**Congresswoman Judy Chu,** 27th Congressional District in California, currently serves on the House Ways and Means Committee, which has jurisdiction over legislation pertaining to taxes, revenues, Social Security, and Medicare. On that committee, she is a member of the Subcommittees on Health, giving her oversight over healthcare reform and crucial safety net programs, Worker and Family Support, and Oversight. She is the lead House sponsor of the Increasing Access to Mental Health in Schools Act, and also cosponsors critical legislation like the Keeping All Students Safe Act, the Safe Schools Improvement Act, and the Save Education Jobs Act.

2022 OUTSTANDING ADVOCATE AWARD. The Outstanding Advocate Award recognizes individuals or groups who demonstrate effective advocacy efforts at the state or local levels to improve education and mental health services for children, youth, and their families. Congratulations to Kathryn “Kate” Salveson from the Lake Washington School District in Redmond, WA, a tireless advocate for equity and inclusion in all areas of her school community. And congratulations to Katya Sussman-Dawson, a doctoral student at the University of Missouri and advocacy cochair for the Missouri Association of School Psychologists, for leading advocacy efforts around dyslexia, school vouchers, and special education criteria.

2022 CERTIFICATE OF APPRECIATION. The Certificate of Appreciation is awarded to NASP members who have clearly shown their advocacy efforts to improve education and mental health services for children, youth, and families in their states. Congratulations to Jonathan Solomon, a school psychologist for the Howard County Public Schools in Maryland and a tireless advocate for ensuring that the mental health needs of his students and staff are met and for reducing the stigma of mental illness, and to Lauren Rich, the assistant director at the Blind School Campus Programs for the Utah School for the Deaf and Blind, and a long-time advocacy leader for the Utah Association of School Psychologists.

NASP-ERT Minority Scholarship Awards
The NASP-ERT Minority Scholarship Program has been a cornerstone of NASP’s commitment to promote equity, diversity, and inclusion in our field since 1995. As such, the scholarships help to advance racial and social justice for people from historically minoritized populations. The addition of this year’s scholars brings the total number of scholarships awarded to 87.

Congratulations to our 2022 Minority Scholarship Award recipients: David Ifediba, California State University-Long Beach; Brianne Kanu, Northern Arizona University-Flagstaff; Bryanna Kinlicheene, San Diego State University; Obad Narcise, Fairleigh Dickenson University, NJ; and Heena Panjwani, Baylor University, TX. Listen to a podcast interview with the scholars and be inspired on the NASP website (https://www.nasponline.org/2022-minority-scholars-video).

Paul H. Henkin Memorial Scholarship Award
The Henkin Scholarship Award recognizes excellence in applied research or program design by a recently credentialed school psychologist. Congratulations to Miu E. Hart, recipient of the 2022 Henkin Scholarship Award for her poster presentation at the Boston convention, “Arts-Based Mindfulness and School Connectedness in Racially Diverse Elementary Students.”

NASP Graduate Student Research Awards
Helping to develop top-notch researchers is a priority for NASP, and the purpose of the Graduate Student Research Awards. Award recipients demonstrate an exceptional ability to conduct high quality research that furthers the mission and goals of the association and has the potential to positively impact the field. Congratulations to Adelle Sturges, Lehigh University, Bethlehem, PA; Elaine Scents-Zapico, California State University-Long Beach; and K. Leigh Monahan, University of Wisconsin-Milwaukee.

School Psychology Review Article of the Year
This award is granted annually to an author or group of authors of an article based on its contribution to research and practice in school psychology, contribution to advancing the profession of school psychology and the broader domain of child-oriented psychology, and potential to influence policy development for children. Congratulations to Anne Gregory, David Osher, George G. Bear, Robert J. Jagers, and Jeffrey R. Sprague, authors of “Good Intentions Are Not Enough: Centering Equity in School Discipline Reform,” the 2021 Article of the Year.

Excellence in School Psychological Services (ESPS) Recognition Program
The ESPS program recognizes school districts throughout the country that are working to implement the NASP Practice Model. The program focuses on the six Organization Principles defined in the model as critical to enabling school psychologists to practice their comprehensive role across all 10 Domains of Practice. Appoquinimink School District in Delaware was awarded the Promising recognition for 2022. Districts with this designation have a plan for meeting the recommended ratio in the future and provide evidence that school psychologists offer at least some services beyond special education compliance.
In July 2021, the National School Psychology Certification Board (NSPCB) added a requirement of 3 hours of continuing professional development (CPD) related to equity, diversity, and inclusion (EDI) for renewal of the NCSP credential. Monitoring will begin with the renewal process in July 2024.

**Context**

The NSPCB acknowledges that over the past 2 years, while we have been under the shadow of the coronavirus pandemic, a harsh truth arose: Social justice is still not a reality for all people in America. Early in the pandemic, there were many reports of inadequate healthcare for those living in communities of color as well as disproportionate rates of COVID-19. And then the world stood still while the video of George Floyd losing his life at the hands of a police officer in Minneapolis, Minnesota went viral. Earlier in 2020, Ahmaud Arbery and Breonna Taylor also lost their lives unjustly. This ignited a firestorm of marches and calls for laws and policies to protect disenfranchised communities. Additionally, hundreds of students from independent schools across the country started the “Black @” movement, detailing examples of injustice, racism, discrimination, and other harsh treatment. Lastly, Asian American elders were targeted and abused for no other reason than their race. Our children, families, and communities are hurting. What can we do?

**A Continuing Commitment to Social Justice**

School psychologists’ participation in continuing professional growth and development is long recognized as necessary to adhere to NASP professional ethics and practice standards. Aligning with NASP 2020 professional standards, school psychologists should always include a lens of social justice in professional growth and practice. NASP resources provide direction, supporting school psychologists in operationalizing the application of the constructs of EDI and social justice. Supporting documents include but are not limited to NASP’s vision, core purpose, core values, and strategic goals (see, specifically: Strategic Plan 2017–2022 and the NASP Practice Model: Improving Outcomes for Students and Schools).

Joining NASP’s commitment to and recognition of diversity, equity, inclusion, and social justice; aligning with 2020 professional standards of the National Association of School Psychologists; and reflecting call to action guidance from numerous professional documents (e.g., School Psychology Unified Anti-Racism Statement and Call to Action), the NSPCB added a requirement of 3 hours of CPD related to EDI for renewal of the NCSP credential. School psychologists are encouraged to access NASP resources available to support planning and actions for professional development, including but not limited to self-assessment, the EDI resource page, the position statements that may guide a personal planning approach, and a variety of online and professional conference learning opportunities. CPD requirements for renewal may be met with any appropriate CPD activity category in the CPD guidelines. In order to fulfill this requirement, applicants are encouraged to develop awareness addressing areas of shortcomings, participate in CPD related to the diversity represented within the districts and communities they serve, and expand their cultural competence through an intersectional lens.

**Awareness of Areas of Personal Need for CPD**

Applicants are encouraged to develop awareness addressing personal areas of shortcomings in EDI toward social justice as they consider continuing professional development goals, perhaps beginning with the Self-Assessment Checklist for Personnel Providing Services and Supports to Children and Their Families. The self-study provides a method for understanding the kinds of values and practices that display cultural diversity and cultural competence in human service settings. Three key areas are addressed: physical environment, materials, and resources; communication styles; and values and attitudes. Individual responses to the survey may potentially help guide school psychologists regarding personal areas of growth and development, leading to the development of a plan for completing the CPD requirements.

**Focus on the Communities We Serve**

Participation in CPD applicable to the communities served is another critical aspect for applicant consideration. NASP recognizes a breadth of topics on EDI, encompassing an ever-evolving range of subject matter (e.g., race, ethnicity, religion, socioeconomic status, gender, gender identification, gender expression, sexual orientation, disability status, health condition, language proficiency, immigration status). The relevance to constituents with whom you work (i.e., students, families, school staff, and community) is another important consideration in planning CPD activities. For instance, a school psychologist may benefit from learning more about supporting constituents with issues that may impact students’ right to safe and supportive schools and communities including race, ethnicity, religion, socioeconomic status, gender (identification and expression), sexual orientation, disability status, health condition, language proficiency, and immigration status. Another consideration might be helping school staff to understand research related to EDI by providing workshops or training on the most current research. Becoming more educated about family–school partnerships specific to EDI may support proficient work with families.

NASP’s position statement on School–Family Partnering to Enhance Learning: Essential Elements and Responsibilities provides a useful guide. Opportunities for professional development may include expanding beyond families and schools to consider the interrelationships between families, the school, and the community.

**Expansion of Cultural Competence**

Lastly, improving knowledge and skills for making connections across cultural areas and to have an intersectional lens is important for school psychologists. Each community served is multifaceted, and managing a myriad of identities that intersect is necessary. Learning to view identities and associated challenges through a lens that allows for multiple truths to be present is both difficult and necessary. Only then will school psychologists be able to offer the level of support that can lead to a lifelong change.

The National School Psychology Certification Board remains fully committed to supporting applicants to apply appropriate activity categories in the CPD guidelines as they plan for and complete CPD activities relevant to EDI. The professional categories for CPD provide a variety of opportunities to participate in continuing growth to meet the renewal requirement of 3 CPD hours relevant to EDI toward social justice, applied to renewal submissions in July 2024. The NSPCB continues to encourage applicants to employ reflective planning and thoughtful actions to obtain professional growth in EDI and social justice, complete self-assessment, consider constituents and diversity of communities in developing an intersectional lens, develop a personal professional growth plan, and complete activities for growth aligned with the NASP 2020 professional standards.

**NASP Resources (available on NASP website)**

- School psychology unified anti-racism statement and call to action.
- Self-assessment checklist for personnel providing services and supports to children and their families.
- Diversity and social justice.
- National certification renewal.
- Resolution: Affirming the rights to safe and supportive schools and communities for all students.
- Strategic plan 2017–2022.
- School-family partnering to enhance learning: essential elements and responsibilities.
- NASP practice model: Improving outcomes for professionals.

The professional standards of the national association of school psychologists.
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www.nasponline.org/publications
Dyslexia: State Laws and Court Decisions

By Perry A. Zirkel

Not too long ago, the keynote speaker at our Lehigh University Special Education Law Symposium, who was a prominent IDEA official at the Department of Education, casually commented to me that dyslexia had replaced autism as the leading lobbying force for exceptional learners at the federal and state levels. Regardless of the exactitude in that estimate of political priorities in the broad prek–12 school context that includes but is not limited to the IDEA and Section 504, dyslexia has indisputably been increasingly evident in legislation at the state level and in litigation in federal courts.

For the legal currency of school psychologists, this article highlights the trends in state laws and judicial rulings specific to identification of and interventions for students with dyslexia.

LEGAL TRENDS

State laws. Beyond the brief mention in the IDEA legislation (§ 1401[30][B]) and the Section 504 regulations’ accompanying commentary (p. 22,686) that dyslexia meets one of the elements for eligibility under these respective federal laws and the definitions of dyslexia in state special education laws, the specifically pertinent statutory and regulatory activity in the prek–12 context has been in state dyslexia laws. As identified in more detail elsewhere, including advocacy organization websites (e.g., Dyslegia.com), these laws have significantly increased in their number and strength in recent years.

A recent analysis revealed that beyond the addition of definitions of dyslexia, all but a handful of states (e.g., Delaware, Hawaii, Idaho, and South Dakota) have adopted state laws that have added varying provisions beyond a definition of dyslexia (Zirkel, 2020a). At one end of the range, some of these state laws are limited to foundational provisions, such as a state dyslexia task force, teacher preparation or certification requirements, state education agency guidance, or a pilot project (e.g., Colorado, Illinois, Kansas, New York, North Dakota, Ohio, and Wisconsin). At the other end of the range, some of these state laws extend to specific requirements for screening and evaluation and for specialized interventions (e.g., Arkansas, Indiana, Louisiana, Mississippi, New Jersey, and Texas). The references in a few state laws to Section 504 or the IDEA (e.g., Arkansas and Texas), and in a larger cluster of these laws to the use of response to intervention or multitiered systems of supports illustrates the imprecise intersection with the identification and “free appropriate public education” (FAPE) obligations of these federal laws.

In this gradually expanding framework of state laws, the additions since the aforementioned analysis in 2020 include provisions for teacher preparation standards (Tennessee), specialized training and staffing requirements (Iowa), a network of certified dyslexia specialists (Arkansas), screening upon a licensed diagnosis of dyslexia until the student reaches third-grade proficiency in reading (Florida), universal screening in grades K–3 (Louisiana and Oklahoma), and required evaluations under the IDEA and Section 504 (Mississippi).

Judicial rulings. The litigation specific to prek–12 students with dyslexia has also increased in recent years. The two issues most specific to this diagnosis have been identification and interventions under the IDEA. The corresponding case law for these two issues under Section 504 has been much more limited.

IDENTIFICATION

The two overlapping identification issues under the IDEA, connected by the evaluation stage, are child find and eligibility. Although the plaintiff-parents often rely on the child’s diagnosis of dyslexia, the ultimate linchpin for the child find or eligibility claim is the ultimate criterion—the need for special education. A pair of Texas cases, in which the diagnosis of dyslexia was attributable to compliance with the identification provisions of the state’s strong dyslexia law, illustrate the key role of this ultimate criterion. In Lisa M. v. Leander Independent School District (2019), the student completed the dyslexia program under a 504 plan and subsequently proceeded to Grade 12 with a GPA of 3.45, while experiencing significant stress and receiving substantial support from school personnel and his parents. In response to the parents’ child find and eligibility claims, the hearing officer and, ultimately, the court ruled against the parents, without questioning or discussing the dyslexia diagnosis, because they failed to demonstrate that their child needed special education. In William V. v. Copperas Cove Independent School District (2020), the issue was less straightforward because the primary focus was the district’s exiting the student from IDEA eligibility upon the triennial reevaluation. The Fifth Circuit Court of Appeals ultimately concluded that the exiting determination was in violation of the IDEA because the services that the student continued to receive, including the Wilson reading program for his dyslexia, showed that he still needed special education. However, in an odd twist explained below in the Interventions section, the ultimate decision was that the parents were not entitled to relief.

A very recent federal appeals court decision, which focused on the interconnecting issue of evaluation, is particularly illustrative of the difference between the diagnosis of dyslexia and the broader requirements of the IDEA. In Crofts v. Issaquah School District No. 411 (2021), the district determined that the student was eligible for an IEP under the IDEA classification of specific learning disabilities (SLD), but one of the parents’ two claims was that the evaluation did not meet the IDEA’s requirements because it did not focus on the child’s dyslexia per a recent diagnosis that the parents had obtained from a private evaluation by a retired school psychologist and had shared with the district. Rejecting their claim, the court concluded that the district satisfied the IDEA by evaluating the student for SLD. The court’s specific reasons were that (a) the district’s multidisciplinary team duly considered the outside evaluation and (b) the parents failed to show any particular assessments or distinctive individual educational difficulties that would require the district “to make different findings, denominated by the term ‘dyslexia,’ in order to comprehensively evaluate [the child’s] needs” (p. 1096).

Corresponding litigation for dyslexia-based identification claims under the broader definition of disability under Section 504 is negligible. The likely reasons include overidentification in some states with strong dyslexia laws, such as Louisiana and Texas (Zirkel & Gullo, 2021). Although potentially causing other legal issues, such as lack of full implementation of resulting 504 plans, overidentification, as compared to underidentification, does not give rise to parents’ legal challenges. Other reasons are the added litigation hurdle of proving intentional discrimination and the generally lower awareness of Section 504 as compared with the IDEA.

INTERVENTIONS

Under the IDEA, the line of FAPE cases on behalf of students with dyslexia is long and wide, extending to the procedural and implementation categories. For example, in a Texas case, a federal district court ruled that an 8-month delay in amending the IEP of a child to provide dyslexia services was not a procedural violation based on the steps in concert with the state laws—screening in February, an IEP meeting in April to review the screening results, a dyslexia evaluation in May, and another IEP meeting directly after the summer break to add said services (Amanda P. v. Copperas Cove Independent School District, 2020).

Instead, the FAPE cases in which dyslexia plays a particular role tend to be in the substantive category based on methodology. The initial examples are the FAPE claims in the aforementioned identification cases. First, in William V. (2020), the appellate court ultimately ruled that the district’s existing decision was a procedural violation that amounted to harmless error. The reason was the court’s conclusion that the student’s progress with the services that he continued to receive, which included the Wilson program, met the standard for FAPE; thus, he had no substantive loss. Second, in the Crofts case, the parents extended their challenge from their dyslexia-specific evaluation claim to a corresponding FAPE challenge to the resulting IEP. Specifically, they claimed that the district’s failure to implement their preference for the Orton–Gillingham methodology was a denial of FAPE. Rejecting their claim, the Ninth Circuit followed the traditional approach of judicial deference to school authorities for methodological choices. Applying the generally applicable substantive standard for FAPE that the Supreme Court established in Endrew F. v. Douglas County School District RE-1 (2017), the Ninth Circuit concluded that the services that the child received, which included a multisensory approach to reading, were reasonably calculated for appropriate progress in the individual child’s circumstances. Regardless of whether Orton–Gillingham was better or best, the parents did...
Youth Experiencing Trauma

Youth Experiencing Trauma (continued from page 1)

and academically. While we know trauma is widespread among youth, trauma-informed practices that center equity and social justice, and which are proactive, benefit all students while also supporting those who may be experiencing traumatic stress—whether known by the school or not (Venet, 2021).

It is more likely than ever that school psychologists act as agents of social justice. Youth in schools around the world have experienced trauma in one or more of the following ways: directly, by watching someone else experience a traumatic event, by hearing about something happening to someone else, or by repeated exposure to a stressful experience. Trauma and trauma responses can also be cyclic in nature. As described by Parris (2021) in the introductory article in this series, stressors such as the COVID-19 pandemic, flawed immigration policies, and racial injustices across the country have disproportionately impacted Black and Brown communities. Schools play a critical role in responding to youth’s anxiety and depression rooted in trauma responses, and can serve to support or further harm students, especially students from minoritized communities (Jackson, 2021). Schools can serve as positive supports by building systems that focus on healthy relationships, trust, and respect. While many in the field acknowledge that the role of school psychologists’ work and training, there is limited focus on incorporating advocacy training into psychology graduate programs (Lating et al., 2009), although there are more recent calls for this (e.g., Malone & Proctor, 2019; Miles & Fassinger, 2021; Sullivan & Johnson, 2021) and increased opportunities for school psychology graduate students to be involved in NASP’s Public Policy Institute (e.g., Association of School Psychologists of Pennsylvania School Psychology Graduate Student Public Policy Institute funding). If introduced to advocacy during or after completing their graduate training, those in the field of psychology are uniquely positioned to address oppressive systems and commit to practices related to radical healing and equity (Neville et al., 2021), which includes being aware of and exploring specific ways to advocate for the rights of students with disabilities.


References

Campbell v. Board of Education of Centerline School District, 58 F. App’x 162 (6th Cir. 2003).
Crofts v. Issaquah School District No. 411, 22 F.4th 1048 (9th Cir. 2022).
ADVOCACY AT THE CLASSROOM LEVEL

Students can respond to stressful situations or traumatic events in internal and external ways. This can manifest itself in familiar behaviors seen in classrooms such as withdrawing from class activities, not completing class assignments, verbally disrupting the class, fighting or peer conflict, and talking to a teacher in a way that may be perceived by educators as disrespectful. How educators respond to student behaviors has an impact on students’ outcomes in and out of the school setting. The ways in which schools have traditionally intervened with challenging student behaviors has been reactive, exclusionary, and ineffective (e.g., detentions, suspensions, expulsions, involvement of law enforcement; Scott et al., 2003). These measures do not address the root of the underlying issues, nor do they teach adaptive skills and responses. Exclusionary discipline practices such as these can further inflict trauma and limit opportunities for restoration of harm done for all involved in such processes (NASP, 2021). Furthermore, race plays a role in our school discipline and skewed perceptions further contribute to racial disparities in the way we respond to students (Carter et al., 2017). School psychologists play a pivotal role in collaboration and consultation in student problem solving and are in a position to disrupt traditional systems and advance a social justice agenda (NASP, 2021). School psychologists can work with teachers and families to promote meeting students’ and families’ social–emotional needs and validation of their histories of trauma, including trauma associated with discrimination.

School psychologists are adept at using data to not only educate building staff about where there may be need for improvement in classroom practices in a school, but also to educate them about more effective, evidence-based practices. The NASP Position Statement, “Promoting Just Special Education Identification and School Discipline Practices” (2021), advises school psychologists of several alternatives to exclusionary discipline measures, such as PBIS and restorative practices, and advises: “Regardless of the system, the basic premises of (a) seeking stakeholder input (e.g., families, communities) to inform the disciplinary system, (b) data-based decision-making, (c) quality relationships, and (d) professional learning around bias will be crucial to promoting equitable discipline” (p. 5).

One such approach, restorative practices, is supported by NASP (2021, 2018) and the National Child Traumatic Stress Network (NCTSN, 2017), among others, and many districts across the country have made an effort to adopt such practices. Restorative practices provide a way to engage all parties affected by a student misbehavior and to promote accountability and healing through dialogue, conflict resolution, and the teaching of skills that are alternatives to violence or aggression (Chicago Public Schools, 2017). One of the core principles of restorative practices is that of logical consequences, such as having a student who arrives late to school stay later to make up the time (as opposed to an illogical and arbitrary consequence of missing more instructional time as a punishment). The Chicago Public Schools Office of Social and Emotional Learning, in conjunction with the Embrace Restorative Justice in Schools Collaborative, offer a toolkit for implementing restorative practices, both in classrooms for individual misbehavior of students and in the wider school community (https://blog.cps.edu/wp-content/uploads/2017/08/CPS_RP_Booklet.pdf). This toolkit may be a helpful resource to school psychologists working with educators in consultation as well as during professional development opportunities.

Utilizing a MTSS model, practitioners should also advocate for students who may be identified as needing more intensive interventions to address their needs. Practitioners should work to partner with outside community agencies that support students experiencing significant trauma or multiple traumas. School-based mental health professionals may have the experience or expertise to provide individual interventions, but there may be obstacles in adequately providing treatments in schools. Therefore, it is valuable for practitioners to collaborate in creating a referral list of community-based resources students, parents, or families can receive (NASP, 2015).

Advocating for trauma-informed practice in classrooms also means working with teachers to manage any secondary traumatic stress or other negative impact that they may experience (NCTSN, 2017), especially in light of increased workplace-related stress over the COVID-19 pandemic. As part of a school community, teachers and staff also need to feel safe and supported in order to engage most effectively with students and families.

SCHOOL-WIDE ADVOCACY

School policies must be focused on mitigating the impact of trauma rather than exacerbating and creating trauma (Jacobson, 2021). According to Matlin and colleagues (2019), trauma-informed care occurs through risk prevention and health promotion as well as implementation of interventions based on individual, relational, organization, and community or system factors. Along with fostering a safe and secure environment, school administrators are vital in educating teachers and support staff regarding the growing needs of students impacted by trauma. Supportive, nurturing relationships are critical to healing. Based on this premise, every person who has contact with a student can contribute to that healing process if that relationship is supportive (Hodas, 2006), which can make schools and school staff a powerful force of healing and resilience for students.

It is valuable for practitioners to advocate for students within a MTSS framework, as equity-centered trauma-sensitive schools require direct attention on multiple levels (Cole et al., 2013, p. 90). Practitioners should be committed advocates that aim to push through resistance and challenge in order to disrupt the status quo (Cole et al., 2013, p. 91). First, practitioners should continuously advocate for preventive supports and services for all students. Trauma is not something that cannot be avoided or predicted; therefore, it is essential that all students develop skills that will help them adjust if such experiences are encountered (NASP, 2015). Practitioners should advocate for the well-being and advancement of learning for all students by integrating trauma-sensitive tactics throughout the entire school (Cole et al., 2013, p. 90). Making sure that students have adequate services that incorporate and promote mental, physical, social, and emotional health is valuable in creating and improving school climate (NASP, 2015).

In order to establish a healthy school climate, it is important that all staff within the school are knowledgeable about the various ways trauma can impact students (Sahbinis et al., 2021), including historical oppression and racism, and intergenerational trauma, summarized in earlier articles in this series (Larez et al., 2022). When school personnel do not understand societal factors that impact their students, they are likely to blame students and families for their behaviors and experiences rather than acknowledging the systems in which the students and families function that are impacting them. This is especially relevant to students from minoritized backgrounds who have been subject to racist policies that have been a mechanism of suppression. White supremacy (Dutile, 2020). Many policies, particularly disciplinary policies, reinforce systems of oppression that support the school-to-prison pipeline; for example, the use of school resource officers in school discipline can promote the continued criminalization of student behavior that may be rooted in trauma and may lead to retraumatization rather than healing (Dutile, 2020; Joseph et al., 2020). It is our role as school psychologists to ensure that practices that oppress our minoritized or otherwise vulnerable students do not continue in the communities and schools in which we practice.

It may be valuable to advocate for school staff training that addresses relevant aspects of school climate, child development, and the value of developing healthy and meaningful adult–child relationships (NASP, 2015). Staff training will allow for staff to be more knowledgeable and reminded to watch for and identify early warning signs, common behaviors and trauma responses often exhibited across varying grade and developmental levels (NASP, 2015). Furthermore, it is also important to advocate for staff training that focuses on effectively intervening after a traumatic situation has occurred. These trainings can build awareness and compassion, and
help to identify students who may need additional assistance (NASP, 2015). In addition, it is valuable for practitioners to advocate for parent and caregiver training, as parent training can also be beneficial in supporting students (NASP, 2015).

To encourage successful implementation of meaningful trauma-informed practices, it is necessary for relationships to be built with key stakeholders. As noted by Matlin and colleagues (2019), there are many diverse stakeholders involved in implementing trauma-informed practices, including community members, parents, students, policy makers (e.g., administrators), health care providers, and researchers. It is necessary to build relationships that respect others’ lived experiences as a type of expertise. If key stakeholders are not motivated to engage in the process, then attempts to implement trauma-informed practices are not likely to be successful; a shared vision on how to build the community in which the school psychologist practices will be most successful when trying to make lasting, positive change in policy and practices (Matlin et al., 2019).

Principles that promote trauma-informed care include adopting a social–emotional lens, knowing students, engaging in culturally responsive practices, shifting the perspective of discipline from a punitive one to one that includes an opportunity to teach more desired behaviors, and resisting the criminalization of behaviors in schools (Blitz et al., 2020). The 2021 NASP Position Statement, Promoting Just Special Education Identification and School Discipline Practices, calls for states to publicly share disaggregated data on school discipline, including suspension and expulsion, cross-referenced with race/ethnicity, disability status, and reason for the disciplinary measure, in an effort to identify disproportionate discipline practice. School psychologists can advocate at the school level by continually examining this type of school-wide data to assess any disproportionality in discipline and share it back with school administrators as a means of educating about the problem and ways to remediate it.

POLICY AND ADVOCATING BEYOND THE SCHOOL BUILDING

Given the impact on youth of discriminatory or misguided policies, there is a need to consider how school psychologists can take action and create change not only in school communities but through local, state, and federal policies. This engagement in advocacy is intertwined with NASP’s focus on supporting children, families, and school communities and is, in fact, considered an ethical responsibility of school psychologists. Specifically, the NASP 2020 standards contain Broad Theme IV: Responsibility to Schools, Families, Communities, the Profession, and Society, which states that school psychologists “…assume a proactive role in identifying social injustices that affect children and youth and schools, and they strive to reform systems-level patterns of injustice” (NASP, 2020, p. 53). This provides a call to action and a professional obligation to take on an advocacy role to reduce inequities and disparities. One way this can be addressed is through school psychologists advocating for the prevention of trauma through dismantling oppressive systems that cause harm, as well as for trauma-informed practices that address harm that has been caused.

School board meetings have become increasingly important venues in which to impact district-wide policies. Since the start of the pandemic, there has been an increased interest by the general public in school board meetings, many of which offered virtual participation. School psychologists, as mental health professionals and advocates for equitable practices that support students, can have immense impact by not only attending meetings and advocating for or against proposed policies, but also by providing the school community with important information and education around best practices in a number of areas. NASP provides resources to support advocacy by school psychologists, including tips for speaking at board meetings, and has an entire resource section on the NASP website for advocacy tools (https://www.nasponline.org/research-and-policy/advocacy/communications-strategies-and-resources). Speaking at meetings can also help to mobilize other allies in the community who can effectively write letters, speak at meetings, and add their voices to those promoting positive outcomes for students.

According to a recent analysis of health policies, between September 2017 and September 2019, the number of states which enacted policies calling for schools to provide professional development on trauma-informed care increased from 9 to 30 (ChildTrends, 2021). Other states have also required practices which may fall under the umbrella of trauma-informed care, such as use of restorative practices, climate surveys, and other measures to promote healthy and safe schools which foster student recovery and support. It is imperative that these measures help to create what Venet describes as “…a focus on our shared humanity to drive school-wide and system-wide change” (2021, p. 60). School psychologists can play a pivotal role in this effort.
According to a recent analysis of health policies, between September 2017 and September 2019, the number of states that enacted policies calling for schools to provide trauma-informed care has tripled since 2017 (Press release). The increase in states adopting trauma-informed policies is significant, as it reflects a growing recognition of the importance of providing safe and supportive environments for students. However, the number of states with comprehensive trauma-informed education policies continues to grow, with several states and school districts making substantial progress. This trend is likely to continue as more states and school districts recognize the benefits of trauma-informed education for all students. 

CONCLUSION

According to a recent analysis of health policies, between September 2017 and September 2019, the number of states that enacted policies calling for schools to provide trauma-informed care increased from 9 to 30 (ChildTrends, 2021). Other states have also required practices that may fall under the umbrella of trauma-informed care, such as use of restorative practices, climate surveys, and other measures to promote healthy and safe schools which foster student recovery and support. It is imperative that these measures help to create "a focus on our shared humanity to drive school-wide and system-wide change" (Venet, 2021, p. 60). School psychologists can play a pivotal role in helping to educate those shaping the policies about what is truly needed, as well as support and advocate for school districts and school staff in understanding how to best enact socially just, equitable, and meaningful trauma-informed care.

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Now, more than ever, it’s critical that graduate students be trained to properly support an increasingly diverse population of students and families.

Graduate educators can use this book to:
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– Sherrie L. Proctor, PhD, Associate Professor of School Psychology

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Using Teleconsultation in Schools

By Kait Gould, Rose Iovannone, Cynthia M. Anderson, Christine Hoffkins, Allyson Jordan, & Brenna Cavanaugh

School psychologists deliver a broad array of services within schools including consulting, training, chairing/facilitating teams, and evaluating students to qualify for services. Often, school psychologists are faced with competing demands and multiple barriers to effective service delivery. Fortunately, teleconsultation may reduce the impact of these barriers. In this article, we review several barriers to effective service delivery and identify ways that teleconsultation may be useful to mitigate those barriers.

BARRIERS TO SCHOOL PSYCHOLOGIST EFFECTIVENESS

Two primary barriers have been identified as significantly impacting school psychologist service delivery. These are critical staff shortages and limited resources.

National shortages. Although the National Association for School Psychologists (NASP) recommends a ratio of 1 school psychologist for every 500 students, the current average national ratio is 1:1,211, with considerable variation across states. In fact, some states have a ratio of 1 school psychologist for every 5,000 students (NASP, 2021). These higher ratios can have a negative impact on many areas, including increased school psychologist strain and burnout; inefficient and ineffective use of time, resources, and training; and, of course, a negative impact on student outcomes.

Competing priorities and travel constraints. School psychologists and other school personnel often must respond to multiple and competing demands on their time, such as direct service delivery, consultation, assessment, and team meetings. Though school psychologists are well equipped to serve in all of these roles, national shortages and therefore larger caseloads mean that time is a limited resource. In addition, some school psychologists work across buildings and must divide their time accordingly. Furthermore, some school psychologists support students who are served in out-of-district placements or alternative school settings, and others conduct home or community visits. In these scenarios, time required for travel cuts into the school psychologist’s already limited schedule. As a result, many school psychologists are struggling to effectively meet the needs of the students and staff they support, which ultimately may lead to strain and burnout (e.g., Proctor et al., 2005, Schilling et al., 2018).

USING TELECONSULTATION IN SCHOOLS TO MITIGATE BARRIERS

In the last decade, feasibility and acceptance of using teleconsultation to provide coaching, consultation, and other services has increased (see King et al., 2021 and von Hagen et al., 2021 for systematic reviews). Studies reporting acceptability metrics show that regardless of social validity measure used, high levels of acceptability from consultees are reported (King et al., 2021). Furthermore, outcomes are similar whether coaching/consultation supports are delivered via teleconsultation or face-to-face (e.g., Bice-Urback & Kratochwill, 2016; Gluekauf & Ketterson, 2014; Kraft et al., 2018).

To the extent that services can be delivered via teleconsultation, school psychologists may spend less time traveling, therefore allowing them to better fulfill their responsibilities (Beebe-Frankenberger, 2008), including attending meetings, providing counseling, collaboration with others, classroom consultations, and assessment. Additionally, teleconsultation may facilitate parent involvement. Application of teleconsultation within each of these domains are described in detail below.

Meetings. Using teleconsultation, a school psychologist can schedule meetings with teachers throughout the school district, regardless of their geographical location, thus expanding their reach to provide timely supports and increasing their efficiency in planning for the day’s activities (Fischer et al., 2017). Team meetings occurring across different buildings are also accessible through teleconsultation. A device and camera, such as a tablet or computer with webcam, could be set up in the meeting room, allowing the school psychologist, along with other stakeholders, to be present and contribute to meetings they may not otherwise be able to attend. An added benefit is that, for meetings requiring participation from individuals not in the same building (e.g., district administrators, parents), virtual meetings may result in greater flexibility of scheduling.

Counseling. A large body of research suggests that teleconsultation is appropriate and effective in areas such as medicine, psychology, and multidisciplinary care (see Snoswell et al., 2021 for a systematic review). Teleconsultation has been found to be as, if not more, effective than face-to-face delivery of psychotherapy (e.g., Backhaus et al., 2012; Berryhill, Culmer, et al., 2019; Berryhill, Hall-Tierney, et al., 2019), and this is the case for group therapy as well as for 1:1 work (Gentry et al., 2019). Though much of the available literature specific to schools (as opposed to community-based services) describes teleconsultation provided by school counselors, there is no reason to expect different outcomes of counseling if provided by a school psychologist. In fact, there is emerging literature citing school psychologists’ use of a webcam or telephone to support the mental health of students from remote locations (Reupert et al., 2021). In addition to providing individual services, school psychologists may consider providing group counseling services via teleconsultation.

Collaborating. Teleconsultation can also be used to connect students at school with outside community mental health providers, further supporting access to mental health treatment, particularly for underserved populations (North, 2020). In addition, school psychologists could use teleconsultation to meet with providers from outside organizations. For example, authors of this article routinely meet with educators via teleconsultation (and often in states other than the ones we reside in) to provide consultation and support.

Classroom observations and consultation. Consultation and coaching are perhaps the most important roles a school psychologist fulfills, and school psychologists can conduct classroom observations and provide coaching to teachers using teleconsultation. In fact, a recent systematic review showed that coaching via teleconsultation is as effective as face-to-face coaching (Kraft et al., 2018). Student and classroom observations can be completed using devices such as tablets or computers with webcams. Programs/devices like Swivl™ are very helpful for classroom observations because this technology can include wearable microphones and camera recordings that most schools have with their teachers, allowing the targeted individuals to remain in camera view. School psychologists can coach teachers in real time using such technology and support them in both classroom management and in implementation of interventions. Feedback and follow up regarding observations and coaching could also be done using teleconsultation technology.

Assessment. While many school psychologists may spend most of their time completing necessary testing and assessment for eligibility and review purposes, teleconsultation provides the opportunity to increase efficiency with assessment. Although teleconsultation may not be a feasible option for all types of standardized assessment, certain components of a comprehensive assessment may be done through teleconsultation. For example, teacher, parent, and student interviews could be completed by the school psychologist via teleconsultation. Furthermore, comprehensive assessments often include direct behavioral observations of the student, and a school psychologist may be able to conduct these observations via teleconsultation.

Parent involvement. Typically, in school settings, maintaining parent/caregiver involvement is challenging. The use of teleconsultation may allow more parents/caregivers to join in on their child’s counseling sessions or team meetings from their home or work. For example, in some of our own work we have encouraged parents to participate in team meetings virtually (e.g., by phone or video conferencing) and have found that parents are often more able to participate actively with these modalities available to them.

CONSIDERATIONS FOR USING TELECONSULTATION IN SCHOOLS

Though there are a variety of benefits to using teleconsultation that may lead to more effective and efficient service provision, it is crucial that steps are taken to protect privacy and confidentiality. For meetings, coaching, or counseling sessions...
that are delivered via teleconsultation, it may be necessary for school psychologists to provide explicit instructions that meetings should not be recorded, nor should any content be posted or shared with others. School psychologists should make every effort possible to ensure that privacy and confidentiality are maintained on their end, including using a private space without others present, closing the door to the space being used, or utilizing headphones. Though this may be less likely for other participants in the meeting space (parents, students, community providers), school psychologists may also consider recommending use of a private and quiet space and use of headphones when possible. The school psychologist should also seek active consent and assent from the participant to conduct the meeting or session in the current environment and via teleconsultation.

CONCLUSIONS

There are a number of ways that we have learned to utilize technology in order to support school psychologists. Due to the high demand for mental health services in schools and the time constraints faced by school psychologists, providing clinical services via teleconsultation may become the preferred way to meet competing demands efficiently. Though there is a strong literature base for the use of teleconsultation services to enhance the effectiveness of school psychologists.

References


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- Identify and address mental health concerns and suicide risk.

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NATIONAL ASSOCIATION OF SCHOOL PSYCHOLOGISTS

*In the above acronym, 2-S refers to Two-Spirit, referencing the Indigenous American culture with regards to gender identity.
LEADERSHIP IN ACTION

Spotlight on Monongalia County Schools
By Colleen McMahon

This year the NASP Communications Committee is excited to share that the Leadership in Action Spotlight will highlight the communication and advocacy efforts of teams and districts across the country in their purposeful pursuit of comprehensive implementation of the NASP Practice Model. In collaboration with the NASP Practice Model Committee, we hope to demystify the leadership and advocacy steps required to create systemic change by highlighting our 2021 Excellence in School Psychological Services (ESPS) recognition districts and the concrete actions taken to achieve change. The ESPS program focuses most significantly on the six organizational principles necessary to facilitate comprehensive school psychological services delivery across all 10 domains of practice. This includes working toward the recommended ratio of 1-to-500. There are four possible recognition levels: Emerging, Promising, Proficient, and Exemplary. Achieving and maintaining the 1-to-500 ratio is a requirement for earning Exemplary status. More about the ESPS program can be found at www.nasponline.org/esps.

MONONGALIA COUNTY SCHOOLS, WEST VIRGINIA

Monongalia County Schools (MCS), located in suburban Morgantown, West Virginia, serves approximately 11,500 students in 10 elementary schools, four middle schools, and three high schools, 40% of whom receive Free and Reduced Price Lunch. The MCS psychology department includes 10 school psychologist positions and one school psychology coordinator. The MCS psychological services department was honored with NASP’s Excellence in School Psychological Services Award in 2021 with an Emerging designation. An Emerging recognition is awarded to districts that provide evidence of the initiation of a foundation and infrastructure that would enable school psychologists to provide a comprehensive range of services by implementing all six organizational principles as articulated in the NASP Practice Model. Districts with this designation have a plan for meeting the recommended ratio in the future and provide evidence that school psychologists offer at least some services beyond special education compliance. MCS was specifically recognized for: their efforts to improve their ratio; evidence that school psychologists are already providing a broad range of services, including consultation, community collaboration, and use of problem-solving teams; and a critical commitment to staff wellness and self-care.

The MCS initial foray into NASP Practice Model implementation began as it does in many school districts, with the formation of student assistance prereferential multidisciplinary teams to address student learning and behavioral concerns before severe interference with learning and development. MCS efforts were led by an innovative district administrator, a former school psychologist who saw the numerous benefits of prevention services and school psychology services for all students. During this time, MCS psychological services built strong relationships with district, board, and county leaders to develop MCS school psychologists’ reputation as experts in the county regarding student learning, mental health, behavior, and disabilities. That reputation continues today based on the coordinated efforts of the current MCS psychological services director (a former school psychologist), school psychologists, and district and county administration. What worked in MCS to continue innovative implementation of the practice model was positioning former school psychologists as district administrators while building and maintaining shared service delivery goals and values and continued advocacy for the role of school psychologists in the district.

The MCS psychological services team believes that the best available psychological science informs policies, programs, and services. As a team, they advocate for school psychology and school psychologists. They believe that school psychologists advocate for children, their learning, and their social–emotional development. The MCS school psychology team identified several key factors that help them put their beliefs into action:

- School psychologist visibility and advocacy in the district.
- Consultation and collaboration.
- School psychologist assignments based on interests and strengths.
- Professional learning communities.
- Strong partnerships.
- Staff wellness and self-care.

School psychologist visibility and advocacy in the district. The MCS psychologists indicated that one advantage to their service delivery is that they were always viewed as professionals who worked to help all students, with and without disabilities. They attribute this unique view to the work of the former MCS psychology department coordinator who advocated for the profession and the impact school psychologists can have in a district when they are not limited to delivering eligibility determination services. Advocacy for school psychologists’ services began with basic relationship building with teachers, related service personnel, building administrators, and district leaders in curriculum and special education. Relationship building and effective practice (teacher, student, and parent) outcomes created acceptability for general education interventions in an MTSS model and school psychologist involvement in all aspects of student education.

Consultation and collaboration. The district’s broad view of school psychologist service delivery created a climate of consultation and collaboration with teachers, administrators, and parents across all grade levels and education...
ADHD, early childhood assessment, MTSS (elementary level) and MTSS interventions have been recognized for their focused efforts toward student wellness and self-care. The program provides comprehensive and innovative services for student well-being and mental health issues. The program's goals include promoting preventive interventions and counseling services. School psychologists' strong advocacy efforts have helped reduce stress associated with the helping professionals. They use a holistic approach to address these challenges.

School psychologists' assignments. Two of the 10 MCS school psychologists are assigned to school buildings, a departure from the typical building-based assignments in most districts. Helped by the shared vision with the district school psychologists, assignments are based on individual practitioner interests and strengths, such as educational technology, behavioral assessment, mental health, and social–emotional learning. Of the most challenging aspects of being a school psychologist is the expectation of competence and expertise across every domain of professional practice and service delivery. An innovative method to address this challenge may be found in the exploration of specialized expertise in school psychology departments. MCS psychologists, and recipients of their services, have found that collaboration builds the competence of all practitioners and that leveraging unique personnel expertise is an efficient and effective way to implement all components of the practice model. Future MCS ESPS applications will include information regarding the process of aligning school psychologist interests and strengths with district assignments. To fortify these strengths and services to the district, the MCS psychology department developed professional learning communities (PLC).

Professional learning communities. The MCS psychology department formed programmatic groups at two levels (elementary and middle/high) to discuss and study topics relevant to specific schools, developmental level of students, and differences in assessment tools and software. These PLCs emphasize collaboration and competency development in diagnosing and treating students with ASD and ADHD, early childhood assessment, MTSS (elementary level) and MTSS intervention implementation, EBD and at-risk assessment, and alternative education (secondary level). Future PLCs will build on the needs of students, staff, and families in the district and the expertise of MCS school psychologists.

Strong partnerships. Another MCS psychology department strength, noted from the ESPS Recognition application, is a set of strong external partnerships. Current partnerships include Marshall University, Monongalia County Social Services, and local advocacy agencies.

Staff wellness and self-care. The MCS psychological services department was recognized for its continued efforts toward staff wellness and self-care. MCS addresses wellness and self-care in several ways. First, they use a national web-based wellness curriculum to provide education and support for health and well-being. The program provides simple and effective recommendations to improve sleep, nutrition, and reduce the stress associated with the helping professions. Second, school psychologists created a wellness resource package for colleagues. They committed to expanding student services to prevent and reduce the impact of behavioral and mental health issues to improve student outcomes and staff well-being and safety. Finally, meetings at every level (psychology, school, district) include discussing shared experiences and empowering staff to support one another’s well-being.

PLANNING FOR CONTINUED SUCCESS

The MCS psychology team reported building on their Emerging ESPS recognition and advancing their school psychological services to implement the NASP Practice Model fully. Their plan includes improved documentation to capture the student outcomes at all levels resulting from their comprehensive service delivery, particularly for preventive interventions and counseling services. School psychologist activity logs will be revised to accommodate quantitative (frequency of consultative and intervention services versus student testing) and qualitative (identifying themes for daily wellness practices) data collection. MCS school psychologist job descriptions will now be based on the six NASP Organizational Principles. A job satisfaction survey is being developed to be administered to MCS school psychologists. Finally, MCS school psychologists will increase their involvement in MCS strategic planning.

SUMMARY

The MCS school psychology department and coordinator Angela Hayes earned the 2021 Emerging Excellence in School Psychological Services Award recognition for comprehensive and innovative service delivery. MCS school psychologists created a positive climate for student learning and well-being, a supportive environment for staff development and wellness, and an innovative example of contemporary school psychology practices.
Reflections on the Boston Convention

By Kelila Rotto

Thank you to everyone involved for making the NASP 2022 Annual Convention one for the books! Whether you came to Boston or joined via the Boston Express, we felt the power of knowledge sharing and community building among all who participated. It was particularly fun to see everyone pool their experiences through social media. Attendees contributed takeaways from their favorite session, their visions for the future of the field, and resources that allow them to do the hard work they do every day. If you could not join us in Boston or via the Boston Express, NASP members can still enjoy some key highlights of the convention online.

On the second day of the convention NASP President Laurie Klose helped to welcome attendees to Boston and to the convention. In her remarks, she recognized the hard times school psychologists have been struggling with. In the midst of the pandemic and other societal stressors, supporting students and taking time to fuel our passion for the profession has been particularly difficult. As an exciting surprise, Boston Public School Superintendent Brenda Costias shared the news that there will be an increase in support for students in Boston Public schools made possible by increasing the funds to hire more school psychologists. Next school year, Boston Public Schools will reach the NASP recommended ratio of one school psychologist per 500 students. To see more of Laurie’s remarks and her introduction of the NASP 2022 School Psychologist of the Year, NASP members can watch a live recording from the event (https://www.nasponline.org/professional-development/nasp-2022-annual-convention/past-conventions/2022-presidents-remarks).

Dr. Temple Grandin joined us this year to deliver the keynote address. She shared her expertise, personal experiences of being a person living with autism, and her understanding of the human mind. Dr. Grandin described how people in her life helped tailor their teaching to help her learn and the ways in which educators and school psychologists can support the learning and healthy development and well-being of students with autism. A full recording of the keynote address is available to NASP members (https://www.nasponline.org/professional-development/nasp-2022-annual-convention/past-conventions/2022/keynote-address). Later, Dr. Grandin took time to speak with attendees and sign books in the exhibit hall.

Along with the many school psychologists who snapped a picture, if you were at the right place at the right time, you might have seen our fan favorite friend Gumby wandering the exhibit hall. He seemed to like hanging around the NASP Connect booth taking pictures and even advocating for school psychologists! The exhibit hall is always one of the most popular features of the NASP convention. Exhibitors join us to share with school psychologists their products, services, and organizations all geared to supporting the work school psychologists do.

While we had fun walking around the exhibit hall and meeting with colleagues, we know this was only part of the experience. The comprehensive role of a school psychologist can be complex. School psychologists are leaders and changemakers in schools and communities. Sessions at this year’s convention were aimed at discussing all these issues and the role school psychologists play in equity and social justice to support all students in school and at home. As one example, the NASP Social Justice Committee hosted a session touching on advancing social justice through trauma informed services. Other specific sessions focused on the NASP Excellence in School Psychological Services program, which recognizes schools implementing a system-wide and sustainable infrastructure that enables school psychologists to provide a comprehensive range of services.

In our eyes, the Boston convention was a success. The way in which we shared information, visited with colleagues, and reinvigorated passion for the profession was once again inspiring. It was great to see more than 3,700 of you in person with us, with more joining in remotely as attendees via the Boston Express. If you would like to view any of the documented sessions from our virtual program, sessions will be available for purchase in the Online Learning Center by early summer 2022.

In addition to all of this, the advocacy team noted that more than 3,000 letters were sent to Congress informing legislators about the importance of the field of school psychology and why improving ratios in schools is so important. Everyone is looking forward to our next convention, to be held in Denver, Colorado.

Kelila Rotto is NASP Manager for Communications and Social Media.
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Youth Suicide Statistics

By Stephen E. Brock

All rates indicate number per 100,000 in the population.

2019 YOUTH RISK BEHAVIOR SURVEILLANCE SUICIDAL IDEATION AND BEHAVIORS:
- 18.8% seriously considered suicide (17.2% in 2017)
- 15.7% made a suicide plan (13.6% in 2017)
- 8.9% attempted suicide (7.4% in 2017)
- 2.5% suicide attempt required medical attention (2.4% in 2017)

2020 YOUTH SUICIDE DEATHS
(2019 deaths, cause of death rank, and rate in parentheses)

<table>
<thead>
<tr>
<th>Age in Years</th>
<th>Number of Deaths</th>
<th>Cause of Death Rank</th>
<th>Suicide Rate</th>
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<tr>
<td>7</td>
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Note: Among youth 5 to 18 years, COVID-19 ranked as the 11th leading cause of death in 2020 (N = 118).

OTHER YOUTH SUICIDE STATISTICS
- More males than females (5 to 18 years) died by suicide in 2020.
  - Gender ratio 2.55 male suicides (N = 1,564) for each female suicide (N = 613)
- More females than males (5 to 18 years) engaged in nonfatal self-harm in 2020.
  - Gender ratio 3.2 female self-injuries (n = 103,540) for each male self-injury (n = 32,249)
- In May 2020, during the COVID-19 pandemic, Emergency Department (ED) visits for suspected suicide attempts began to increase among adolescents aged 12-17 years, especially girls. During February 21-March 20, 2021, suspected suicide attempt ED visits were 50.6% higher among girls aged 12-17 years than during the same period in 2019; among boys aged 12-17 years, suspected suicide attempt ED visits increased 3.7%.
- More nonfatal self-injuries than suicide deaths in 2020 (5 to 18 years).
  - Females: 1 suicide death for every 169 nonfatal self-harm-injuries
  - Males: 1 suicide death for every 21 nonfatal self-injury
- 47% of 14 to 18 year old suicides employed a firearm.
  - 55% of 14 to 18 year old male suicides employed a firearm
- 23% of 14 to 18 year old female suicides employed a firearm
  - When a person uses a firearm in an attempt to die by suicide, death is the result 85% of the time, compared to 3% of fatalities that follow a drug overdose.

Suicide by firearm rate (all ages, all genders) = 7.37
- Suicides by firearm rate (14-18 years, all genders) = 4.10
- Suicides by firearm rate (14-18 years, males) = 7.01
- Suicides by firearm rate (14-18 years, females) = 1.07

Source Notes
2. CDC (2022, February): https://wxisqars.cdc.gov/fatal-reports
5. Yard et al. (2021, June): https://www.cdc.gov/mmwr/volumes/70/wr/pdfs/mm7024e1-H.pdf
The Woodcock Institute and Opportunities for Students, Practitioners, and Graduate Educators

By Daniel C. Miller & Denise E. Maricle

Texas Woman’s University offers a unique combination of programs and opportunities, not only to its students and faculty, but to researchers and practitioners across the country. To a significant extent, these programs owe their existence to the professional and financial support of Dr. Richard W. Woodcock and the Woodcock Institute for the Advancement of Neurocognitive Research and Applied Practice. We hope that this article will raise awareness among our colleagues of the opportunities available to students, practitioners, and graduate educators for dissertation support, training, professional development, and research funding.

THE WOODCOCK INSTITUTE FOR THE ADVANCEMENT OF NEUROCOGNITIVE RESEARCH AND APPLIED PRACTICE

In the past, Dr. Woodcock graciously donated a portion of his test royalties to the Woodcock–Munoz Foundation (WMF), a nonprofit organization founded to support training and research in psychoeducational assessment by awarding research grants and providing training materials at no cost to practitioner-based programs in school and clinical psychology. In 2015, the WMF board of directors agreed to wind down the WMF operations and transfer their assets to Texas Woman’s University (TWU) in Denton, Texas, with the establishment of an endowment in Dr. Woodcock’s name. The initial $10 million gift was the largest donation to TWU in its history. Since the establishment of the Richard W. Woodcock Endowment Fund, the monetary value of the endowment has grown to nearly $25 million due to additional test royalties and continued generous gifts from Dr. Woodcock.

As part of the initial gift to the university, the Woodcock Institute for the Advancement of Neurocognitive Research and Applied Practice (aka Woodcock Institute) was established, and Dr. Dan Miller (former president of the National Association of School Psychologists; NASP) was named as the inaugural executive director. Dr. Woodcock believed that endowing and housing an institute at TWU would support and contribute to his mission and legacy. The mission of the Woodcock Institute is to promote interdisciplinary research into the cognitive profiles of individuals with diagnosed exceptionalities (learning disabilities, neuropsychological conditions, behavioral and psychiatric disorders, and giftedness), the advancement of effective clinical assessment practices, and the dissemination of research findings through direct professional development opportunities and publications, and applied evidence-based assessment.

TEXAS WOMAN’S UNIVERSITY AND THE WOODCOCK INSTITUTE

Although coed, TWU is the nation’s largest university primarily for women. Enrollment at TWU across three campuses (Denton, Dallas, and Houston) is about 16,000 students. TWU is a very diverse university and is typically ranked as being one of the top 10 most diverse universities. The Woodcock Institute is housed on the Denton campus in Woodcock Hall.

A factor contributing to Dr. Woodcock’s selection of TWU for endowment and the establishment of an institute bearing his name and legacy was its programs in school psychology. TWU has both a specialist program and a doctoral program in school psychology. The specialist program is conditionally approved by NASP, and the doctoral program is accredited by the American Psychological Association. TWU’s doctoral program in school psychology has a unique niche in school psychology training, as students are able to obtain specialized training in school/pediatric neuropsychology. Faculty within the school psychology programs have worked with Dr. Woodcock on research projects and dissemination of research in assessment through publications and presentations.

In 2020, the Woodcock Autism Assessment Clinic (WAAC) was established in partnership with the University of North Texas’ Kristin Farmer Autism Center in Denton, Texas. WAAC has provided unique interdisciplinary training opportunities and experiences for graduate students from TWU’s school psychology, speech and communication, and occupational therapy graduate programs. “There is a real need in the local community for autism assessments. Private practice psychologists often have a waitlist at least 6 months out, and many families can’t afford to wait that long for a diagnosis,” said Wendi Leigh Bauman Johnson, PhD, associate professor of school psychology and director of WAAC. The clinic has provided graduate students with invaluable real-world experiences in working with an interdisciplinary team evaluating children suspected of being on the autism spectrum.

FUNDING ACTIVITIES OF THE WOODCOCK INSTITUTE

The Woodcock Institute has several funding opportunities for trainers of school psychologists, doctoral students, and practitioners. These funding opportunities include research grants (awarded semiannually), the Richard W. Woodcock Dissertation Award (awarded semiannually), and a National Solution-Oriented Conference (awarded occasionally). The majority of the research grants are awarded to university faculty members who are conducting research consistent with the mission of the Woodcock Institute. The grant recipients are not limited to TWU and come from multiple disciplines across many U.S. universities including, but not limited to school psychology. For example, in the last two funding cycles (2019–2020, 2020–2021), researchers from the University of North Texas, Temple University, Kent State, University of South Carolina, University of Kansas, Northern Arizona University, Indiana University–Bloomington, the University of Florida, Utah State University, and Texas Woman’s University have been grant recipients. Research topics vary widely, but a few recently funded projects include “Validation of the WJ IV Tests of Cognitive Abilities and the Automated Neuropsychological Assessment Metrics in a Tele-Neuropsychology Setting,” “Neurocognitive Impairments and the Role of MeCP2 in Autism Spectrum Disorder,” and “Validating Biofeedback Interventions and Objective Biomarkers in Post-Concussion Syndrome.”

School psychology practitioners do not typically have time to conduct original research due to their normal job duties. However, school districts are often a repository of massive amounts of assessment data which could be aggregated and analyzed to answer important questions about school psychology service delivery and the effectiveness of educational interventions. It is important for practitioners to know that grant funds may be used to pay for release time for school psychology practitioners to work on a research project in addition to other research expenses.

Each research grant is approximately $50,000 and awarded semiannually. Deadlines for application are March 1 and October 1 of each year. Information and application procedures are located and explained on the institute’s website.

Graduate students in school psychology, clinical psychology, education, and other affiliated professional fields may be interested in the Richard W. Woodcock Dissertation Award. This grant awards up to $5,000 to support related expenses related to dissertation completion (such as paying for statistical consultation, materials needed to collect data, etc.). Three awards are available each year, with one award reserved for a TWU doctoral student, and the other two available to students from any relevant program. Information and application procedures are found on the institute’s website. The deadline for application is September 15.

To support continuing education initiatives and a mission focus on advanced neurocognitive research and applied practice, the Woodcock Institute sponsors continuing education initiatives. Currently these initiatives are restricted to TWU, but outside entities with interesting proposals should contact the institute to discuss the possibility of cosponsorship. Two National Solution-Oriented Conferences have been held to date: “Diversity in Deaf Education: A National Perspective” and “A Working Conference to Advance Occupational Therapy in Research and Practice for Cognition and Dementia.” The institute awards up to $25,000 to sponsor a National Solution-Oriented Conference. Additionally, the Woodcock Institute offers a distinguished lecture series grant of up to $5,000 to bring a nationally recognized speaker to campus.

As with all organizations, the Woodcock Institute has felt the impact of the pandemic and its associated disruptions. With the pandemic receding, more opportunity to expand the institute’s activities and reach is in sight. For more information about the Woodcock Institute visit: https://twu.edu/woodcock-institute.
With over 150 real-world case studies in this book, school psychologists can:

- Build knowledge on ethical principles and apply them in practice.
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Susan Jacob | Barbara Boile Williams | Leigh Arristead
Graduate Training in Supporting K–12 Students Experiencing Homelessness

By Laura A. Alba & Bhawandeep K. Bains

Children and adolescents experiencing homelessness face increased risk for socioemotional challenges, chronic absenteeism, high mobility, poor academic performance, and homelessness in adulthood (Cutuli et al., 2013; Milburn et al., 2009; Moore et al., 2020; Sulkowski, 2016). These youth may additionally be exposed to adverse childhood experiences including emotional, sexual, and physical abuses as well as exposure to violence and parental substance use (Sulkowski, 2016). Given these challenges, it is paramount that youth experiencing homelessness receive comprehensive support to promote academic success and overall well-being. The McKinney–Vento Act mandates schools to provide students experiencing homelessness or residential instability with access to a stable education by removing barriers to enrollment and attendance (National Center for Homeless Education [NCHE], 2014).

Despite this federal legislation guaranteeing students the right to attend school without proof of residency (NCHE, 2014), it does not seem that graduate training programs consistently present information about homelessness in coursework. Laura previously worked in a practicum setting serving many individuals experiencing homelessness or residential instability. School personnel often had difficulties reaching parents due to frequent updates to their contact information, with this becoming especially concerning during attempts to conduct evaluations for special education. The school staff would frequently refer to these students as the “McKinney–Vento kids.” This introduction to “McKinney–Vento” piqued our interest in the term and led us to question why our graduate classes overlooked this topic.

Upon examining our course materials, we recognized a paucity of assigned readings exploring youth homelessness and subsequently analyzed various publications from our field. For example, the Best Practices in School Psychology series dedicates one chapter (“Best Practices in Working With Homeless Students in Schools”) to this topic, and it does not discuss intersectionality. A brief search of the Journal of School Psychology yielded only 4 results from over 35 years (1986–2021) in one of our most prominent journals, with only six of these articles explicitly exploring homelessness. Similar searches in other journals resulted in one article (School Psychology Review, Contemporary School Psychology) or no articles (Journal of Applied School Psychology). Much more attention to this topic is needed to ensure that school psychologists and school psychology students are well equipped to support youth experiencing homelessness and have a comprehensive understanding of the McKinney–Vento Act.

RECOMMENDATIONS FOR TRAINING

Society views students experiencing homelessness as having criminal intentions, poor hygiene, lack of motivation, and social irresponsibility (e.g., Kidd, 2007). Furthermore, intersectionality is an important consideration as African American, Latinx, LGBTQ+, and transgender communities experience homelessness at higher rates, and individuals with culturally diverse identities are met with increased stigma when experiencing homelessness (Hallett & Skrla, 2016; Kidd, 2007; Smith-Maddox et al., 2020). These stigmas spur distrust and poor mental health among students needing school-based support (Kidd, 2007). Therefore, graduate training should explicitly address these stereotypes and encourage trainees to collaborate with this population. Increasing knowledge and training in supporting all students experiencing homelessness is a prerequisite to dismantling stigma, promoting healthier school climates, and using equitable and ecologically valid practices.

Social support and school belonging are protective factors against maladaptive outcomes for students experiencing homelessness (Dang et al., 2014; Sulkowski & Joyce-Beaulieu, 2014). Some of these students report having positive self-esteem, emotion regulation strategies, and a sense of agency, accomplished by resisting negative stereotypes and rejecting narratives associating them with criminality (Kidd & Shahr, 2008; Masten et al., 2015; Tooils & Hammack, 2015). School psychologists can build upon this resilience by fostering safe school environments and promoting self-advocacy skills. We must have knowledge of any potential protective factors to capitalize on these unique strengths and support the development of individualized interventions.

We can advocate for marginalized groups through our skills in consultation, assessment, intervention, and systems-level change. Embedding topics such as youth homelessness into our coursework will allow for assessment and intervention with cultural humility. As future practitioners, we must consider these points when selecting assessment tools for special education eligibility evaluations and discussing multitiered systems of support or positive behavioral interventions and supports for general education. Our training also should cover laws that impact this population.

Classes in school consultation are well equipped to teach us how to establish collaborative relationships with homeless community liaisons and school social workers. To embark on social change, we also need to identify efficient and meaningful ways to collaborate with students experiencing homelessness, as these interactions can result in valuable information regarding common structural barriers. By working alongside these students and eliciting their input, we can plan for strategies to prevent and help students overcome obstacles.

RECOMMENDATIONS FOR THE FIELD

For students experiencing homelessness, schools offer stability and consistent resources (e.g., free meals, social support). School psychologists need to collaborate with other school professionals to ensure that staff use equitable practices to serve these students. Nevertheless, researchers must investigate homelessness and the associated risk for adverse childhood experiences to enable the provision of evidence-based supports for this population. Our Best Practices in School Psychology chapters on systems-level change are critical for training future scholars and practitioners; a chapter on supporting students experiencing homelessness through systems-level change and additional resources on this topic are warranted. NASP offers great resources for graduate classes and can provide inspiration for future work.

References


Laura A. Alba and Bhawandeep K. Bains are both 5th year students at the University of California at Riverside in the School of Education.
Telehealth Assessment in School Psychology—Part 1

This is the first year attending the NASP convention where I have seen several recruiters for school telehealth providers. I was struck by how many telehealth assessment products test publishers were highlighting. This is strong evidence that there is a robust demand from school districts for telehealth assessment, and publishers are rushing to provide instruments that can be administered remotely.

It helps to remember that prior to the pandemic, the state of telehealth assessment was quite limited. Various publishers had made it possible to remotely administer behavior rating scales and have those automatically scored through the publishers’ platforms. School psychologists could do remote observations streaming through videoconference platforms. As for psychological testing, Houghton Mifflin Harcourt (HMH) had exclusively licensed the Woodcock-Johnson (WJ-IV) tests to Presence Learning to use on their online platform.

Otherwise, school psychologists had to cobble together a way to administer the paper and pencil versions of tests through a videoconference platform. It was very hard to test in this manner. I even talked to some school psychologists who worked for virtual schools in their state at the time. They arranged for physical locations for in-person testing for their virtual students rather than try to do it through telehealth.

Telehealth assessment was immature when the pandemic hit and the immediate solutions when everyone was on lockdown were imperfect. However, there has been a lot of progress in the past couple of years. Every major publisher has published guidance on how to do telehealth assessments using their products. The PAR and Pearson resources are particularly good for school psychologists who are considering remote administration.

Some of the major concerns when conducting telehealth assessments have been the equivalency between remote vs. in-person administration and how to create an adequate testing environment in students’ homes. The issue of the testing environment has largely been resolved as students have returned to in-person schooling. In this case, the school is able to create an environment conducive for remote assessment.

As for equivalency, there have been several white papers written for a variety of online instruments. This is quite an expansion beyond a small pilot study that had been completed for the WJ-IV prior to the pandemic. While there is still debate regarding equivalency in the professional literature, publishers have decided there is enough evidence to forge ahead with their online assessment products.

Riverside Insights (formerly HMH) was one of the first to license its assessment for online administration. Its exclusive license to Presence Learning has expired, and they are preparing their own online administration for the brief Gf-Gc WJ-Cognitive in the next few months. They were demonstrating this at the convention. The online version isolated individual items and made it cleaner than previous efforts. The representative reported that there were no plans on doing an equivalency study or creating new norms for the instrument because the publisher’s test experts did not deem the transition to online administration a significant enough change.

PAR continued to tout its own online intelligence test in the Reynolds Intellectual Assessment Scales, Second Edition (RIAS-2) which has been on the market for over a year. I discovered that the RIAS-2 was not normed for digital administration but rather used equivalency correlations and was modified by excluding the speeded processing sub-tests. PAR also specifies videoconference platforms that are used for remote administration of the RIAS-2 need to be able to share screens and have a drawing tool. This means Chromebooks that many students have will not work and it may be necessary for a school to have a touchscreen computer that can meet administration requirements.

Dan Florell, PhD, NCSP, is a professor at Eastern Kentucky University and a contributing editor for Communiqué.
The Positive Youth Development (PYD) approach is gaining momentum internationally. The movement investigates the protective factors related to positive outcomes in the lives of young people, including internal and external assets, supports, and characteristics. Youth.gov provides the following definition of PYD:

An intentional, prosocial approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances young people’s strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths. The perspective emerged in the 90s and is linked with positive psychology. PYD is now a focus across the fields of psychology, education, social services, social work, public health, research, and policy across the world.

The focus of PYD programs is frequently large, underresearched cultural groups and efforts attempt to engage youth as stakeholders and partners in the project of improving their quality of life. PYD adopts a wide range of social, emotional, cognitive, academic, and behavioral aspects of development, and this book is an important contribution to the movement away from deficit views of adolescence and the medical model of psychopathology towards an understanding of development as plasticity. Adolescent development is seen as growth, and the PYD model promotes psychosocial competence, empowerment, resilience, thriving, and optimal development.

This handbook is a unique, comprehensive collection of research on positive development among youth and emerging adults. Each chapter provides meaningful evidence for positive associations among the main constructs investigated. The introductory chapter by Dimitrova and Wiium sets the stage by outlining the primary goals and contributions of the text:

- Advancement of the theoretical and empirical knowledge base on PYD in global contexts
- Refinement of methodological issues and measurement in underresearched contexts
- Integration of PYD scholarship with relevant research, policy, and practice

The editors provide a summary of the developmental assets model and the 5Cs, 6Cs, and new 7Cs model to help the reader grasp the theoretical framework and pave the way for the rest of the volume, which provides the empirical studies to support this expanded model. The 5Cs of positive youth development are Competence, Character, Connection, Confidence, Caring, while the 6th is Contribution, and the 7th is Creativity.

Structurally, the volume is divided into two parts and the research covers a broad swath of constructs and fields including positive, developmental, cross-cultural, social, and community psychology, as well as adolescent well-being, child and family studies, prevention and education, intercultural relations, counseling, intervention, and implementation science.

Part I (Positive Youth Development: Advancing Research, Policy and Practice in Global Contexts) comprises 17 chapters describing research on the newly developed models, conceptualizations of the 7Cs model, and PYD across the globe. Part II (Positive Youth Development: Applications and Interventions) begins with a description of a nine-country project followed by chapters on innovative approaches, interventions, applications, reviews, and programs across a diverse range of underresearched countries. Each chapter includes research applications, findings, and valuable insights for future research, policy, and practice. The volume includes examples from an impressive span of countries across the globe (38 countries across six continents: Albania, Australia, Belize, Brazil, Bulgaria, Canada, China, Colombia, Finland, Ghana, India, Indonesia, Iceland, Indonesia, Italy, Jamaica, Jordan, Kenya, Kosovo, Lithuania, Macedonia, Malaysia, Mexico, New Zealand, Norway, Pakistan, Peru, the Philippines, Romania, Serbia, Slovenia, South Africa, Spain, Thailand, and the United States). In total, the chapters document the responses of more than 22,000 youth and emerging adults.

Rather than a country by chapter or cluster by topic approach, the book includes a range of empirical studies on key constructs, many of which involve multiple countries and cultures. The range of topics provides an interesting insight regarding which constructs are relevant and applied in specific cultures. In addition to examining the 7Cs, the studies examine a range of topics including mindfulness, addiction, environmental awareness, risky behaviors, school climate, mentoring, parental relationships, academic achievement, identity development, and radicalization. Cross-country comparisons and collaborations are included in many of the chapters in both parts of the book. Readers will likely be drawn to countries, constructs of interest, as well as the list of renowned authors.

The chapters describe young adults from different socioeconomic groups and explore variations in cultural, contextual, individual, and group characteristics. The studies expose the phenomenon of adolescent transition to independence and identity exploration. Key factors such as family support, environmental resources, interpersonal skills, and academic achievement are examined in relation to the role they play in helping young people thrive. Path models are used to illustrate how external assets can be positively related to risky behaviors, whereas internal assets can be positively associated to academic achievement. Subjective states of happiness, gratitude, and optimism are also explored. Each chapter describes a local context, a new approach observed, the specifics and universals to be considered, and the implications for research, policy, and practice. Chapter 35 tackles the question of PYD in the digital age and the risks and opportunities it brings. The studies also provide a list of the most recent relevant research for the specific constructs examined.

In addition to contributing new research to the field on emerging models of PYD, the handbook has several notable features. It includes a range of theoretical and methodological approaches (cross-cultural, multinational, experimental, longitudinal, mixed methods). Combined with participants from diverse cultural, ethnic, and sociodemographic backgrounds, this enlarges the field of research exponentially. Each case adds to the methodological range of measurement in PYD, particularly in underresearched contexts, as the authors document the psychometric properties of assessment used across different communities and cultures. The vast majority of the research uses cross-sectional and correlational data, and the authors acknowledge the limitations of any causal inferences on major findings. The issue of construct invariance is also discussed clearly in

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Send Us Your Legal Questions

We are inviting you to send in questions about legal issues related to your practice as school psychologists. Perry Zirkel, university professor emeritus of education and law at Lehigh University, will answer selected questions in his Communique column, Ask Perry.

Questions that will be considered should be: (a) related to the practice of school psychologists as employees (not in private practice); (b) amenable to an answer relevant on a generalizable basis (i.e., based on federal law or a state law that is not special to your particular state); and (c) subject to sufficient case law to allow a definitive (and not just speculative) answer. Questions may be about IDEA/Section 504 or about the wider duties and obligations of school psychologists.

Interested? Send your questions to John Desrochers, editor of Communique at desroc@optonline.net. Include your name and tell us your job title and where you work. Mr. Zirkel will review the questions as they come in and choose which ones to answer in his column based on his judgement about how broadly relevant the question is to our field.

Mr. Zirkel is a renowned impartial legal specialist specializing in education law and, in particular, special education law. Take advantage of this opportunity to expand your knowledge of legal issues related to school psychology and send in your question today.
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