

Prevention and Schools

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Prevention of learning, behavior, and emotional problems, although a long-standing concern, clearly is not a high priority in school improvement policy and practice. This resource highlights where prevention fits in the continuum of school-community interventions and suggests how to raise prevention efforts to a high priority.

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While advocacy grows for schools to play a greater role in preventing educational, psychosocial, physical, and mental health problems, prevention in schools remains a relatively limited enterprise – usually funded as discrete projects and with “soft” money. Moreover, programs in place are so fragmented that they often produce inappropriate redundancy, counterproductive competition, and work against the type of *systemic collaboration* that is essential for establishing connections among school interventions and between school and community resources. This state of affairs increases costs, reduces effectiveness, and is perpetuating widespread *marginalization* of prevention initiatives.

It is common for prevention in schools to be developed in isolation of the rest of the full intervention continuum (i.e., not as one subsystem to be integrated within the continuum).^{*} There also is a continuing tendency to focus interventions mainly on students, thereby deemphasizing the role of environmental factors in causing student problems.

What exists is a vicious cycle of unsatisfactory policy, research, practice, and training. And, the cycle is likely to continue as long as prevention is viewed narrowly and as a separate enterprise.

Some Fundamental Points about Prevention and Schools

We addressed prevention and schools some years ago in a journal article entitled *Moving Prevention from the Fringes into the Fabric of School Improvement*¹ and, more recently, in a chapter entitled *Placing Prevention into the Context of School Improvement*.² Given the renewed advocacy, it is time to stress once again the following fundamental points about prevention and schools:

- Promotion of positive growth (including enrichment opportunities) can contribute to prevention but also stands alone as the essential foundation for human development.
- To avoid “blaming the victim,” prevention efforts must pay substantial attention to addressing school, home, and neighborhood factors that play a significant role in causing and maintaining educational, psychosocial, physical, and mental health problems. Thus, while prevention focuses on benefitting people, improving environmental conditions also is a fundamental concern.
- Prevention efforts are occurring in schools and communities, and these efforts must be integrated and coordinated and, where they overlap, resources should be woven together. Moreover, schools and communities must collaborate in new ways, and the efforts must be fully integrated into school improvement policy, planning, implementation, and accountability.

*Prevention is one
subsystem in a
integrated school-
community
continuum*

^{*}In education, the intervention continuum often is described simply in terms of tiers or levels of school intervention. In contrast, the points highlighted here and graphically illustrated on p. 13 stress that such tiers/levels are better conceived as a set of integrated, overlapping subsystems that embrace both school and community resources.

- Primary prevention in school is part of one subsystem within a full intervention continuum and advocacy for prevention needs to account for the whole continuum.³ In schools and in public health initiatives, primary prevention is referred to as universal intervention because the focus is on populations and general environmental conditions rather than individuals (e.g., all or large segments of students in a district, at a school).
- Secondary prevention is part of an intervention subsystem introduced as early after problem onset as feasible. The aims are to prevent the problem from worsening and minimize negative side effects. In schools and in public health initiatives, secondary prevention is referred to as selective and indicated intervention because the focus is on specific groups and environmental conditions directly affecting them.
- Tertiary prevention is part of a subsystem for treating severe-chronic problems, with the aims of keeping them from worsening and minimizing negative side effects. Often referred to as indicated interventions and provided in a *system of care*, the focus is on designated individuals, their families, and surrounding environmental conditions.
- Properly conceived, implemented, and embedded, initiatives such as *Response to Intervention* can play a role in promoting positive development and in primary, secondary, and tertiary prevention.

About Embedding Prevention into School Improvement Policy as Part of a High Priority for Addressing Factors that Interfere with Learning and Teaching*

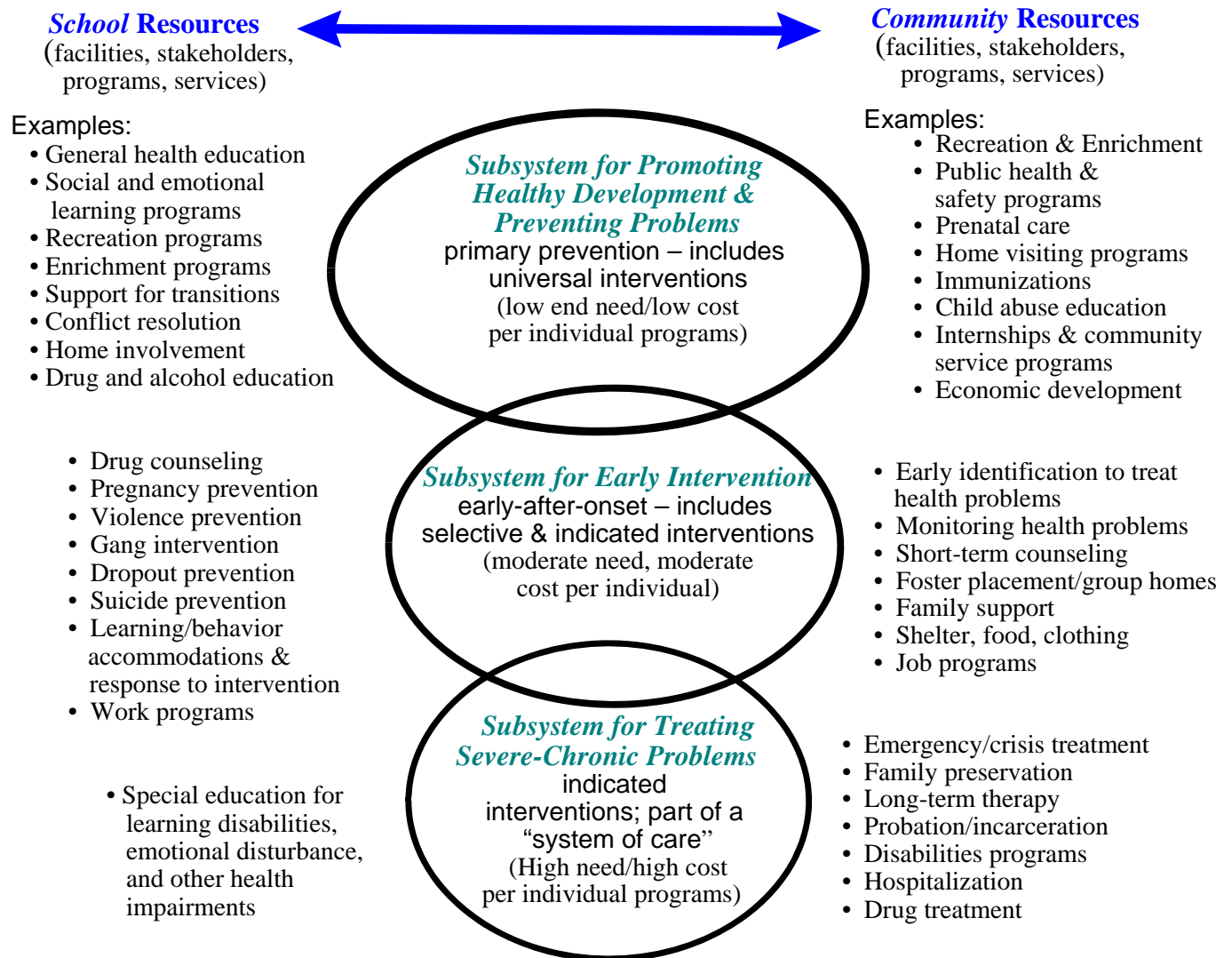
Prevention of learning, behavior, and emotional problems, although a long-standing concern, clearly is not a high priority in school improvement policy and practice. It is one thing to advocate for prevention; it is quite another to convince school policy makers to integrate a comprehensive approach to prevention as part of their school improvement agenda. We have found that such an argument must be framed broadly in the context of the mission of schools (which, of course, is to educate the young).

In pursuing their mission, school policy makers focus primarily on direct ways to improve instruction. This emphasis is fostered by current accountability demands stemming from federal legislation. As a result, the trend is for school improvement planning to marginalize attention to many preventable and correctable interfering factors. This is the case for both internal and external barriers to learning. Fortunately, relatively few youngsters start out with internal dysfunctions or disabilities that lead to learning, behavior, and emotional problems. For many children and adolescents, however, a range of external factors is interfering with schools accomplishing their mission.

Anyone who works with young people is all too familiar with the litany of factors that can interfere with learning, development, and teaching. Such factors are strongly related to the achievement gap and to student (and teacher) dropouts. It is the impact of so many interfering factors that argues for schools and communities offering a much more comprehensive focus on prevention and doing so in the context of full continuum of interventions that is fundamentally integrated into school improvement.

*Various states and districts are currently moving in the direction of embedding prevention into a comprehensive approach that is fully integrated into school improvement policy and practice. (See *Transforming Student and Learning Supports: Trailblazing Initiatives!* <http://smhp.psych.ucla.edu/pdfdocs/newsletter/summer14.pdf>)

Exhibit. **Intervention Continuum of Interconnected Subsystems****



**As federal policy expands to make RTI and PBIS school-wide practices, reference to multiple tiers of intervention are common. The simplicity of the tiered presentation is appealing and helps underscore differences in levels of intervention. However, focusing simply on levels of intervention, while essential, is insufficient. Three basic concerns about the formulation are that it mainly stresses levels of intensity, does not address the problem of systematically connecting interventions that fall into and across each level, and does not address the need to connect school and community interventions. As a result, it has done little to promote the type of intervention framework that policy and practice analyses indicate is needed to guide schools in developing a unified and comprehensive system of student and learning supports.

References

- ¹Adelman, H.S. & Taylor, L. (2000). Moving prevention from the fringes into the fabric of school improvement. *Journal of Educational and Psychological Consultation*, 11, 7-36.***
- ²Adelman, H. S. & Taylor, L. (2010). Placing Prevention into the Context of School Improvement. In B. Doll, W. Pfohl, & J. Yoon (eds) *Handbook of Youth Prevention Science*. New York: Routledge.***
- ³Adelman, H.S. & Taylor, L. (2012). Mental Health in Schools: Moving in New Directions *Contemporary School Psychology*, 16, 9-18.***

***See references at <http://smhp.psych.ucla.edu/materials/recentchapters.htm>