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So You Want Higher Achievement Scores? It's Time to Rethink Learning Supports



School systems are not responsible for meeting every need of their students. But when the need directly affects learning, the school must meet the challenge.

- Carnegie Task Force on Education

A sk any teacher:

"Most days, how many of your students come to class motivationally ready and able to learn what you have planned to teach them?"

We ask that question everywhere we go. The consistency of response is surprising and disturbing.

In urban and rural schools serving economically disadvantaged families, teachers tell us they are lucky if 10 to 15% of their students fall into this group. In suburbia, teachers usually say 75% fit that profile. Although reliable data do not exist, most would agree that at least 30 percent of the public school population in the U.S. are not doing well academically and could be described as having learning problems. It is not surprising, therefore, that teachers are continuously asking for help.

Help is Fragmented, Counterproductively Competitive, and Marginalized

There seems little doubt about the need for schools to help address external and internal factors that are barriers to learning and teaching. Recognition of this need has resulted in a great deal of activity, considerable expenditure of resources, and an unsatisfactory status quo. Over the years, awareness of the many barriers to learning have given rise to legal mandates and a variety of counseling, psychological, and social support programs, as well as to initiatives for school-community collaborations. Currently, the No Child Left Behind Act has set in motion events that will require even more attention to providing "supplemental services."

Viewed as a whole, one finds an extensive range of programs and service oriented to students' needs and problems in schools. This encompasses a focus both on directly reducing barriers and helping to create buffers against them (i.e., protective factors). Some programs are provided throughout a school district, others are carried out at or linked to targeted schools. Some are owned

and operated by schools; some belong to community agencies.

Interventions may be offered to all students in a school, to those in specified grades, to those identified as "at risk," and/or to those in need of compensatory education. The activities may be implemented in regular or special education classrooms and may be geared to an entire class, groups, or individuals; or they may be designed as "pull out" programs for designated students. They encompass ecological, curricular, and clinically oriented activities designed to reduce problems such as substance abuse, violence, teen pregnancy, school dropouts, and delinquency.

Unfortunately, in most school districts, efforts to address barriers to learning and teaching are planned, implemented, and evaluated in a fragmented and piecemeal manner. They also are marginalized in policy and practice and counterproductively competitive. This state of affairs stems from the specialized focus and relative autonomy of a district's various organizational divisions, such as curriculum and instruction, student support services, activity related to integration and compensatory education, special education, language acquisition, parent involvement, intergroup relations, and adult and career education. It is common for such divisions to operate as relatively independent entities. Thus, although they usually must deal with the same common barriers to learning (e.g., poor instruction, lack of parent involvement, violence and unsafe schools, inadequate support for student transitions), they tend to do so with little or no coordination, and sparse attention to moving toward integrated efforts. Furthermore, in every facet of a school district's operations, an unproductive separation often is manifested among the instructional and management components and the various activities that constitute efforts to address barriers to learning.

While schools can use a wide range of persons to help students, most school-owned and operated services are offered as part of what are called pupil personnel services or support services. Federal and state mandates tend to determine how many pupil services professionals are employed, and states regulate compliance with mandates. Governance of their daily practice usually is centralized at the school district level. In large districts, counselors, psychologists, social workers, and other specialists may be organized into separate units. Such units overlap regular, special, and compensatory education.

The result is a tendency for student support staff to function in relative isolation from one another and from other stakeholders. A great deal of the work is oriented to discrete problems, and there is an overreliance on specialized services for individuals and small groups. In some schools, a student identified as at risk for grade retention, dropout, and substance abuse may be assigned to three counseling programs operating independently of each other. Such fragmentation is costly and works against developing cohesiveness and maximizing results.¹

School districts provide a variety of learning support activities. However, it is common knowledge that few schools come close to having enough resources to respond when confronted with a large number of students experiencing barriers to learning. Many schools offer only bare essentials. Too many schools cannot even meet basic needs. Primary prevention often is only a dream.

Thus, at many schools, teachers simply do not have the supports they need when they identify students who are having learning and related behavior problems. Clearly, prevailing school reform processes and capacity building (including pre- and inservice staff development) have not been effective. Thus, it is not surprising that so many schools continue to struggle. The simple psychometric reality is that in schools where a large proportion of students encounter major barriers to learning, significant increases in test score averages are unlikely over the long-run until student support programs are rethought and redesigned.

Needed: A Policy Shift

Policy makers have come to appreciate the relationship between limited intervention efficacy and the widespread tendency for complementary programs to operate in isolation. Limited efficacy does seem inevitable as long as interventions are carried out in a piecemeal and often competitive fashion and with little follow through. From this perspective, reformers have directed initiatives toward reducing service fragmentation and increasing access to health and social services. They have paid special attention to the many piecemeal, categorically funded approaches, such as those created to reduce learning and behavior problems, substance abuse, violence, school dropouts, delinquency, and teen pregnancy.

By focusing mainly on the problem of fragmentation, reformers fail to deal with the overriding issue, namely that addressing barriers to development and learning remains a marginalized aspect of policy and practice. The fact is that the majority of programs, services, and special projects designed to address such barriers are viewed as supplementary (often referred to as auxiliary services) and continue to operate on an ad hoc basis. Fragmentation seems an inevitable by-product of this *marginalization*, but concern about the marginalization is not even on the radar screen of most policy makers.

The degree to which marginalization is the case is seen in the lack of attention school improvement plans and certification reviews give to matters related to addressing barriers to learning. It is also seen in the lack of attention to mapping, analyzing, and rethinking how the resources used to address barriers are allocated. In this last respect, it should be noted that educational reformers have ignored the need to reframe the work of school professionals who carry out psychosocial and health programs. All this seriously hampers efforts to reduce fragmentation and increase access. More to the point, it ensures that the help teachers and their students so desperately need will not be available on a large enough scale.

At most schools, community involvement also is a marginal concern, and the trend toward fragmentation is compounded by most school-linked service initiatives. This happens because such initiatives focus primarily on coordinating *community* services and *linking* them to schools, with an emphasis on *co-locating* rather than integrating such services with the ongoing efforts of school staff. Reformers mainly talk about "school-linked integrated services" – apparently in the belief that a few health and social services will be sufficient.

Such talk has led some policy makers to the mistaken impression that community resources alone can effectively meet the needs of schools in addressing barriers to learning. In turn, this has led some legislators to view linking community services to schools as a way to free the dollars underwriting school-owned services. The reality is that, even when one adds together community and school assets, the total set of services in impoverished locales is woefully inadequate. In situation after situation, it has become evident that as soon as the first few sites demonstrating

school-community collaboration are in place, community agencies find they have stretched their resources to the limit.

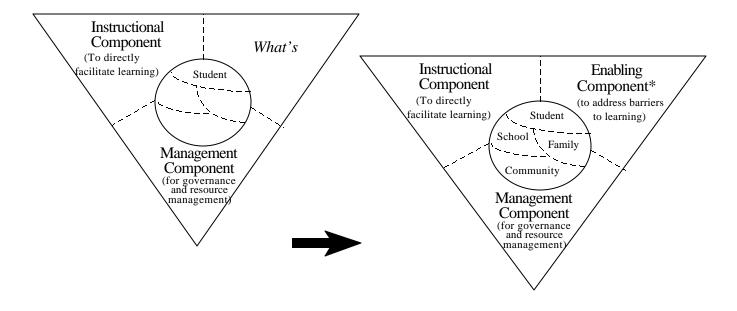
Another problem is that the overemphasis on school-linked services is exacerbating already strained relationships between school district service personnel and their counterparts in community-based organizations. As "outside" professionals offer services at schools, school specialists often view the trend as discounting their skills and threatening their jobs. At the same time, the "outsiders" often feel unappreciated and may be rather naive about the culture of schools. Conflicts arise over "turf," use of space, confidentiality, and liability. Thus, competition rather than a substantive commitment to collaboration remains the norm.

In short, policies shaping current agendas for school and community reforms are seriously flawed. Although fragmentation and access are significant concerns, marginal-ization is of greater concern. It is unlikely that the problem of fragmentation will be resolved appropriately in the absence of concerted attention in policy and practice to ending the marginalized status of efforts to address factors interfering with development, learning, parenting, and teaching.²

Toward Ending the Marginalization of Learning Supports

Increasing awareness of the deficiencies of existing reform initiatives is stimulating ideas for fundamental shifts in thinking about addressing barriers to learning. With respect to the marginalization of learning supports, a two-component model currently dominates school reform. That is, the primary thrust is on improving instruction and school management. While these two facets obviously are essential, effectively addressing barriers requires estab-lishing a third component as a fundamental facet of education reform and related school and community agency restructuring (see Figure 1).³ In policy and practice, all three components must be recognized as essential, complementary, and overlapping.

Figure 1. Moving from a two to a three component model for reform and restructuring.



^{*}The third component (an enabling component) is established in policy and practice as primary and essential and is developed into a comprehensive approach by weaving together school and community resources.

The component to address barriers provides both a basis for combating marginalization and a focal point for developing a comprehensive framework to guide policy and practice. Its usefulness for these purposes is evidenced in its adoption by various states and localities around the country. For example, the California Department of Education and the Los Angeles Unified School District call it a *Learning Supports* component. The Hawai'i Department of Education calls its version a Comprehensive Student Support System. Some states are referring to such a component as a "Supportive Learning Environment." The concept also has been incorporated into the New American Schools' Urban Learning Center Model as a break-themold school reform initiative. This model is among those included in the federal initiative supported through the U. S. Department of Education to encourage comprehensive school reform.

Toward a Comprehensive, Multifaceted, and Cohesive Continuum of Learning Supports

Problems experienced by students generally are complex in terms of cause and needed intervention. Therefore, in designing learning supports, schools and communities must work together to develop a comprehensive, multifaceted, and cohesive continuum of interventions.

How comprehensive and multifaceted? As illustrated in Figure 2, the desired interventions can be conceived along a continuum spanning primary, secondary, and tertiary prevention. The range stems from a broad-based emphasis on promoting healthy development and preventing problems (both of which include a focus on wellness or competence enhancement) through approaches for responding to problems earlyafter-onset, and extending on to narrowly focused treatments for severe/chronic problems. The continuum incorporates a holistic and developmental emphasis that envelops individuals, families, and the contexts in which they live, work, and play. It also provides a framework for adhering to the principle of using the least restrictive and nonintrusive forms of intervention required to appropriately respond to problems and accommodate diversity.

Because many problems are not discrete, the continuum can be designed to address root causes, thereby minimizing tendencies to develop

separate programs for each observed problem. This enables increased coordination and integration of resources that can enhance impact and cost-effectiveness. Ultimately, as indicated in Figure 2, the continuum can evolve into integrated *systems* by enhancing the way the interventions are connected. Such connections may involve horizontal and vertical restructuring of programs and services (a) within jurisdictions, school districts, and community agencies (e.g., among divisions, units) and (b) between jurisdictions, school and community agencies, public and private sectors, among clusters of schools, and among a wide range of community resources.⁴

Reframing How Schools Address Barriers to Learning

An additional framework helps to operationalize the concept of an enabling or learning supports component in ways that coalesce and enhance the types of programs schools must pursue to ensure all students have an equal opportunity to succeed at school. It is critical to define what the entire school must do to enable all students to learn and *all* teachers to teach effectively. Schoolwide approaches to address barriers to learning are especially important where large numbers of students are affected and at any school that is not yet paying adequate attention to considerations related to equity and diversity. Leaving no child behind means addressing the problems of the many who are not benefitting from instructional reforms.

Various pioneering efforts have operationalized such a component into six programmatic arenas. Based on this work, the intervention arenas are conceived as

- C *enhancing regular classroom strategies* (i.e., improving instruction for students who have become disengaged from learning at school and for those with mild-moderate learning and behavior problems)
- C supporting transitions (i.e., assisting students & families as they negotiate the many school-related transitions)
- C increasing home involvement with schools
- **C** responding to, and where feasible, preventing crises

Figure 2. Interconnected Systems for Meeting the Needs of All Children

- < Providing a Continuum of School-community Programs & Services
 - Ensuring use of the Least Intervention Needed

School Resources Community Resources (facilities, stakeholders, (facilities, stakeholders, programs, services) programs, services) Systems for Promoting Healthy Development & Examples: Examples: Preventing Problems General health education primary prevention includes C Public health & safety C Drug and alcohol education universal interventions programs **Enrichment Programs** (low end need/low cost C Prenatal care Support for transitions per individual programs) **C** Immunizations Conflict resolution C Pre-school progrms Home involvement C Recreation & enrichment C Child abuse education C Drug counseling C Pregnancy Prevention Systems of Early Intervention C Early identification to treat C Violence prevention early-after-onset – includes health problems C Dropout prevention C Monitoring health problems selective & indicated interventions C Suicide Prevention Short-term counseling (moderate need, moderate C Learning/behavior C Foster placement/group homes cost per individual) accommodations and response to C Family support C Shelter, food, clothing intervention **C** Work Programs C Job programs C Emergency/crisis treatment Systems of Care Special education for Family preservation treatment/indicated learning disabilities, Long-term therapy inteventions for severe and Probation/incarceration emotional disturbance, and Disabilities programs chronic problems other health impairments Hospitalization (High end need/high cost C Drug treatment per individual programs

Systemic collaboration* is essential to establish interprogram connections on a daily basis and over time to ensure seamless intervention within each system and among *systems of prevention*, *systems of early intervention*, and *systems of care*.

^{*}Such collaboration involves horizontal and vertical restructuring of program sand services

⁽a) within jurisdictions, school districts, and community agencies (e.g., among departments, divisions, units, schools, clusters of schools)

⁽b) between jurisdictions, school and community agencies, public and private sectors; among schools; among community agencies

- C increasing community involvement and support (including enhanced use of volunteers)
- C facilitating student and family access to specialized services when necessary.

This framework provides a unifying, umbrella to guide the reframing and restructuring of the daily work of all staff who provide learning supports at a school.⁵

Where Do We Go From Here?

Policy action is needed to guide and facilitate the development of a potent component to address barriers to learning (and support the promotion of healthy development) at every school. The policy should specify that such an enabling or learning support component is to be pursued as a primary and essential facet of school improvement and in ways that complement, overlap, and fully integrate with the instructional component.

Guidelines accompanying the policy need to cover the following:

- The component should be programmatic designed to (a) enhance classroom based efforts to enable learning, (b) support transitions, (c) increase home involvement in schooling, (d) respond to and prevent crises, (e) provide prescribed student and family assistance, and (f) outreach to develop greater community involvement and support.
- (2) Accountability indicators for schools should be expanded to ensure the component is pursued with equal effort in policy and practice.
- (3) *Restructuring* should be undertaken at every school and district-wide to
 - C redefine administrative roles and functions to ensure there is dedicated administrative leadership that is authorized and has the capability to facilitate, guide, and support the systemic changes for ongoing development of such a component at every school.
 - C reframe the roles and functions of pupil services personnel and other student support staff to ensure development of the component

- C redesign the infrastructure to ensure there is a team at every school and district-wide that plans, implements, and evaluates the use of resources for building the component's capacity.
- (4) Over time, through collaboration with families and community stakeholders, school staff responsible for the component should weave resources into a cohesive and integrated continuum of interventions to evolve systems for (a) promoting healthy development and preventing problems, (b) intervening early to address problems as soon after onset as feasible, and (c) assisting those with chronic and severe problems.
- (5) Boards of education should establish a standing subcommittee focused specifically on ensuring effective implementation of the policy for developing a component to address barriers to student learning at each school.
- (6) All *pre-* and *in-service* programs for school personnel should include a substantial focus on the concept of an enabling/learning support component and its operationalization at a school.

Notes:

¹See: Adelman, H.S., & Taylor, L. (1997). Addressing barriers to learning: Beyond school-linked services and full service schools. *American Journal of Orthopsychiatry*, 67, 408-421.

²See: Adelman, H.S., & Taylor, L. (2000). Looking at school health and school reform policy through the lens of addressing barriers to learning. *Children's Services: Social Policy, Research, and Practice, 3*, 117-132.

³See: Adelman, H.S. (1996a). Restructuring education support services and integrating community resources: Beyond the full service school model. *School Psychology Review*, 25, 431-445.

⁴See: Adelman, H.S., & Taylor, L. (2002). Building comprehensive, multifaceted, and integrated approaches to address barriers to student learning. *Childhood Education*, 78, 261-268.

⁵Extensive work has been done in delineating each of these arenas for intervention. For a brief overview see any of the above references. For surveys covering each arena, see *Addressing Barriers to Learning: A Set of Surveys to Map What a School Has and What It Needs* – a Resource Aid Packet from the Center for Mental Health in Schools at UCLA (downloadable on the internet at http://smhp.psych.ucla.edu)