This paper describes a project designed to improve the delivery of psychological services in elementary schools. One component of the project involves individual undergraduate college students as "associates." As an associate, the student contributes to, or performs, all measures offered by the given school for children evidencing problems. Therapeutic collaboration with individual teachers is the associates' main responsibility. Although outcome measures did not evidence any program impact in comparison with control schools, it was found that the associates were performing competently, gaining acceptance by school personnel and establishing good rapport with families. This paper concludes with suggestions for the further training of such paraprofessionals.
A Psychological Services Program for Elementary Schools
Coordinated and Operated by College Undergraduates

Anthony Taylor
State University of New York, Cortland

My paper is concerned with a mental health delivery system, now operating in three elementary schools in Cortland, which relies very heavily upon college students who are at different levels of responsibility. I will present an overview of the delivery system in terms of its structure, call attention to some significant features and circumstances associated with it, and selectively focus on the more novel unit of the system by sketching its implementation, refinements (past and future) and evaluation.

The delivery system consists of two components: a companionship therapy unit of the conventional type (which I will just call the companion program), and what I originally called the psychological services associate unit but which is now simply labeled the facilitator unit. The two components or arms, are coordinated with one another, and in fact, are very definitely interlocking or meshed on a functional level. Both units are staffed exclusively by college undergraduates who receive college credit for manning their posts in what is designated by the Psychology Department at Cortland as an academic field study program.

I will touch on the character of the companion program very briefly. There have been, and are, many such programs around the

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country with the same basic character and format. Involved is the assignment of laymen to patients or clients on a one-to-one basis. Such programs go back to the early 1960s, although isolated programs without any solid evaluation go back even further. As is the case with my companion unit, the most frequently used layman has been the undergraduate. Probably the bulk of the programs have been directed toward hospitalized psychotic patients with Cowen and his people certainly pioneering in their deployment in schools (Cowen, Izzo, Miles, Teleschow, Trost, & Zax, 1963): The Associate or Facilitator Program, on the other hand; that is, the second system component, to my knowledge, at least, is unique. It may be best explained in the following round-about way which depicts the overall system. Students in the companion program are assigned to different program schools. In each of these program schools, along with the companion students there is also assigned a single college student who the previous academic year, for one of the semesters, had been a companion student in one of the program schools. Now as a student facilitator for the entire academic year the student is not assigned to a single problematic child (like each companion student), but instead assumes a much more ambitious position as the cornerstone and coordinator for whatever measures the school is prepared to take for helping maladjusting children. The facilitator has a number of tasks, and the main ones for this year will be listed briefly. Actually, three of the four main duties were carried out by the facilitators for each of the preceding two years.

1. The facilitator collaborates with individual teachers in trying to figure out what steps should be taken with problem
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or troubled children. This is considered the central or most important function. The notion for this particular duty was probably subconsciously hatched by my reading the report of Sarason and his associates with their New Haven School consultation project (Sarason, Levine, Goldenberg, Cherlin, & Bennett, 1966). In their book describing the project, the point was underscored that teachers tend to be isolated in their remedial efforts, and it seemed to them (the consultants) that they (the teachers) might be helped greatly by someone who had the time and interest to listen to them, as the teachers advanced their own notions, their own tentative remedial formulations, for coping with disruptive or otherwise problematic children. In other words, they (the consultants) saw significant value in someone serving as a sounding board and source of encouragement for teachers.

2. The facilitator, for the first time this year, has become the workshop leader for those students in the companion program who are assigned to children in the facilitator's own school. Their workshop responsibilities are multiple. In the first place they function as skill trainers. As openers, this year they followed closely Ivey's micro-counseling training program (Ivey, 1971), but the three facilitators, each assigned to a different school, among themselves produced their own common "ovisual training tapes rather than "go" with the commercial package. This first year the skill training aspect of the workshops was relatively brief and was completed by about the seventh week. At that time, with the completion of training, the companion students then made initial contact with their assigned children. Each facilitator shifted from a mostly trainer role
to that of moderator as the workshops changed over in character to weekly discussion group sessions, in which the companion students shared their problems and progress in helping their children.

3. The facilitator serves as the school representative both to the community, including the different care agencies (such as the Department of Social Services and the Mental Health Center), and to the families of maladjusting children.

4. The final main duty entails administering and scoring tests that might ordinarily be given by teachers; for example, learning disability tests; and usually they discuss the test results with the individual teachers.

There are other secondary duties performed by the facilitators. What I have listed are the most responsible, sensitive, and time absorbing.

Turning to the significance of the delivery system, speaking with community psychologists, my impression is that of greatest significance may be the school district agreeing to host the delivery system in the first place. The system extracts active involvement and cooperation from all school personnel, and most especially principals, of course; to whom the facilitator is directly responsible. In this hosting vein, also, recently the school district board has granted us the prerogative to adjust and develop the system at will, to expand the system to as many of the six elementary schools in the district as desired, and to dissociate the school district school psychologist from program schools as a separate professional agent, or even physically as a program-involved professional, if it would serve
the cause of shaping, operating, and evaluating the evolving delivery system. In other words, the Board, with the clear support of the school district administration has turned over the elementary school system in the area of mental health services, and without any strings attached. As I say, this may be the most significant aspect of the program. This degree of cooperation and receptiveness apparently is not commonly encountered, and for that reason I will say a few words about this fortuitous circumstance. In a sense, matters proceeded in reverse from how many programs are introduced. The delivery system was presented after a solid base of trust had developed at all levels within the school culture; from the school board and administrators to most of the principals and teachers. I wish I could say that there was a deliberate, sophisticated, long-term strategy for creating the very positive rapport (and also a greater sensitivity and responsibility to the emotional needs of children), but that was not the case. The climate of receptiveness for such an ambitious and complicated system occurred inadvertently, and simply was there to be capitalized upon when the two-component system was conceived as an idea.

Indeed, originally the schools were extremely cautious about any proposed program, however modest, when administrators were approached in 1972 with the proposal of establishing a conventional companion program as a field study adjunct to a course in counseling psychology. Only after a series of meetings that consumed four months, and included meetings attended by State Education Department officials (whose approval was viewed by local administrators as vital), was the program finally instituted.
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with all kinds of elaborate safeguards, such as the principals' prerogative of refusing to have any given student companions continue to see their assigned children. After three semesters and no significant incidents, the respect for the competence and reliability and good sense of the students (and the supervisor) was established, as was the sense that it is very important business to help troubled children. It was then that the facilitator component was proposed and accepted in one meeting.

Beyond its unqualified acceptance by the schools, a second significant feature of the project, not characteristic of many, is its low cost. This was deliberate. The system's operation represents no increase in costs for the typical school district. The basic model calls for the continued use of one psychologist but as a professional resource for nonprofessionals, and not usually as a one-to-one helping agent. Thus, its adoptability by many school systems is certainly feasible as an alternative to the conventional services of one or more school psychologists if, in fact, the new model proves to be superior.

Yet a third notable feature is that the college undergraduates, and especially the facilitators, are given a great deal of responsibility, and almost all have very successfully discharged their duties effectively and conscientiously. It may well be that the facilitators are to date those nonprofessionals in the mental health field who have been granted the greatest responsibilities.

A fourth significant characteristic of the system bears on its preventive aspects. For example, the system has come to the attention of the Division of Education at the college, and especially with the inclusion of paraprofessional training, the
Division has expressed interest in incorporating the companion program experience as a requirement in the curriculum for elementary education majors. Also in the area of primary prevention, almost all participants in both system units have, or will be, entering helping professions, and the program experience may demonstrate a positive growth impact upon the students. In the words of Egan (Egan, 1975), the system may be producing future higher-level helpers (and parents). Again, this would seem to be particularly possible with the initiation of skill training.

In terms of the expansion and refinement of the system in its two-component form, a major modification for the facilitator unit was due to the problem during the first year that many teachers were not choosing to confer with, or collaborate with, the facilitators. One big reason was found to be a sentiment held by some teachers that the facilitators were ill-equipped to offer real help in handling troublesome or disturbed children. Without elaborating, back then the facilitators had received some preparatory training, and did confer with me regularly as well as the school system psychologist. For example, they could implement contingency contracting. Also, resistance to the facilitators in some cases seemed traceable to a resentment of their being accorded a professional status of sorts with the teachers despite the fact that they were really students. Therefore, in an effort to counter both types of teacher reactions a new image of the facilitators was promoted the second year. No longer were they presented with the implication that they were trouble-shooters who would direct teachers toward handling children more skillfully. Instead, "downmanship," as Caplan would
put it (Caplan, 1970), was practiced by promulgating that the facilitators were students anxious to learn and help. Their subordinate and helping identity was accented by broadcasting that the facilitators would try to be helpful in any way to teachers. No request was off limits. Examples were suggested to the teachers: such as monitoring their classes if they (the teachers) wished to leave temporarily, securing tutors for individual children, and unburdening the teacher of disruptive children by taking them elsewhere in the school building. This girl/boy-Friday approach not only allowed the teachers to observe the capability of the facilitators but through the growing friendship provided a backdoor for promoting the desired collaborative relationship, regardless of what a given teacher's particular reluctances might have been originally about such a therapeutic alliance. Through this teacher-paced approach, which included acknowledging their priority needs first, it seemed reasonable to believe that more and more teachers would become inclined to discuss with facilitators children they were concerned about. Process data findings reported later indicate that the new approach was successful. Obviously this strategy extracted the price of involving the facilitators in activities not directly related to intervention efforts. On the other hand, in a sense, all roads seem to lead to Rome. A teacher under less pressure or strain is more likely, for example, to be in a mood that benefits the children in her class.

Also, certain important changes have been introduced during the present year (that is, from the second to the third year), and as a result of different findings gathered over the first
two years. One major change includes a two-semester, rather than one-semester, relationship by companions with their individual child. The second innovation, already cited, of workshops for the companion students, are held weekly, and replaced one-hour daily discussion sessions held during the first two years. Previously, professors had served as moderators; now the student facilitators do; and also the latter function as trainers. Since the end of the skill training phase, as a rule I visit each group for about one hour at each weekly session. In addition, the individual companion students are encouraged to meet with me individually, and some have. The facilitators meet with me at least twice a week as a group.

The paraprofessional training program has been introduced because of an absence of evidence, at least with the instruments used, that motivated undergraduates have an innate therapeutic impact. However, not to be overlooked, is an important silver lining to the findings. Namely, the big "no effect" applies for the other direction as well: there was no evidence that the students affected adversely the children when largely left to their own helping devices.

The future elaborations for the system can be summarized tersely as most importantly including greater training of both facilitators and companions, particularly in behavior modification techniques and influencing skills, and also crisis intervention techniques of the generic type; and systematic study of family dynamics, especially of the lower socioeconomic class. It has been our experience that most of the children who are identified as problematic come from disorganized families in that class.
Parallelizing this progression in training for the next several years will be an increased emphasis on more active involvement with the family members of problematic children, especially with preschool children, and this has the spirit of primary prevention to it.

In concluding this paper, I would like to say at least a word about evaluation of the facilitator component. A variety of measures have been used, both of the process and outcome variety, but it is possible to mention only some.

Questionnaires were completed by facilitators and teachers (and also principals) at the end of each program year, seeking a variety of information useful for planning the next program year. For example, teachers specified why they did not collaborate, or did not collaborate more, with facilitators.

Process data has been systematically collected by facilitators on especially prepared forms, and in this way a picture has been provided of what they do, and with whom, and to what degree. By way of illustration, interactional findings with teachers will be summarized. The heart of the facilitator program is intended to be the therapeutic alliance of facilitators and teachers. Earlier in the paper difficulty was described in this respect during the first year, and facilitator identity, and role adjustments, were made for the second year. Several types of measurements were possible from data recorded by facilitators both years. Testable predictions for whether the program, and its modifications, were succeeding included: (a) progressively more teachers would collaborate with the facilitators as time elapsed within each program year, (b) there would be more total time devoted to discus-
sions with teachers as each program year advanced, (c) the total number of teacher contacts would likewise increase as a function of program time, and (d) the second year facilitators, because of the adjustments already cited, would surpass the first year facilitators on all three interactional indices.

No significant findings were found associated with the time variable within each year. On the other hand, the second year facilitators worked with more teachers and spent more total time talking with them as a group. However, the analysis for the total number of meetings failed to yield significance between the two pairs of facilitators. Of course, the time the pairs of associates were expected to be at the schools both of those years was the same (approximately 14 hours per week).

Outcome data, examined with the use of control schools, has yielded some significant findings—a scatter of them—but as a body the findings have not built a convincing enough case yet for this new approach for providing services. Part of the difficulty has been problems with the evaluation process itself, and mention of a special category of outcome measures, so-called institutional reactions to crisis, will sound the final note for the paper. Crises here mean children who become disruptive or disturbed, and examples of possible institutional reactions include temporarily removing the child from the classroom or the teacher conferring with the principal about the problematic child. Without exception, this array of variables were of no value, usually because they were not reliably collected, or their frequency levels proved to be too low.
References


