The school psychologist's indispensable role within a school includes preventive activities that are responsive to the needs of contemporary society as well as the changes in services necessitated by health care and educational reform. While these impending reforms evoke uncertainty, they also lead to opportunity. There is presently an opportunity for psychologists in schools to expand their more traditional and already essential roles of secondary and tertiary prevention and to provide primary prevention in schools. In a futuristic school, theoretically and empirically-based activities would be planned and executed by school psychologists. The activities would emanate from three models of primary prevention: (1) community; (2) environmental; and (3) individual. Community primary prevention occurs in the interactions between school and community whereas environmental primary prevention takes place within the school and involves social system analysis and modification as well as person-environment fit. Individual primary prevention focuses on the fostering of individuals' skill and competence within the classroom. Examples illustrating primary prevention in each of these three areas, focusing on programs involving violence, are presented. (JBJ)
Chapter Twenty-Two

Fantasy, Reality, Necessity,
and the Indispensable School Psychologist

Judith L. Alpert & Lynn Rigney

School psychology is an integral member of two broad fields: psychology and education. Both fields are in transition. Health care reform and education reform are ongoing. As change occurs, tension, reactions, and opportunities arise for health care, for education, and for the field of school psychology.

Over a decade ago, the first author offered her fantasy of the future of the field of school psychology (Alpert, 1985). It was a utopian description. The fantasy involved an enlarged role and function for the psychologist working in the school. It involved the psychologist engaging with community problems and primary prevention in addition to the more traditional work of school psychologists. The fantasy of yesterday could become reality today. In fact, perhaps the fantastical role of yesterday is a necessary role for the school psychologist today. Both education and health care reform are consistent with the fantastical role. School psychologists can be critical in realizing better, safer, and more community involved and concerned schools.

Similarly, at no time in our nation's history has there been a more challenging time to be a psychologist. It is a time of pruned services, managed care, and restricted benefits. Little psychological care is being provided. This is an era of cutbacks in many services, including hospital and outreach community services. Children who may previously have received attention from these settings may now be receiving little, if any. It is difficult to undo psychological and educational damage once it has passed a critical point. Further, such attempts at undoing are costly and time consuming. Psychologists in schools are in the compulsory public institution that reaches all of this nation's children. These reductions create a need for preventive and psycho-educational services.

A broader role for school psychologists, including preventive activity, is consistent with the contemporary reform movements. Such activities are harmonious with both the contemporary education reform initiatives and with health care
reform. Emphasis in the school-related portions of the enacted Health Security Act of 1994, for example, focused on health rather than mental health, prevention rather than treatment, social problems rather than education or psychological problems, and integrated communities rather than solely schools (Talley & Short, 1994). School psychologists can be critical in helping to focus on these issues.

Prevention is frequently divided into three types: primary, secondary, and tertiary. Typically, psychologists working in the schools focus on tertiary prevention and to a lesser extent on secondary prevention. In general, secondary prevention involves early treatment of disease while tertiary prevention involves attempts to minimize long-term effects. Primary prevention involves efforts to prevent dysfunction before its occurrence. Such efforts are targeted for a multitude of unknown people before the onset of disorder. Mass orientation, education, and preproblem state separate primary prevention from other types of prevention. Primary prevention in mental health and education in schools addresses many of the broader social ills that impair children from learning.

Within the professional fantasy (Alpert, 1985), the function of the school was defined as preparing its inhabitants to live within and to contribute to the community. Most schools, however, operate as a separate entity, and its inhabitants have relatively little opportunity to take from or to give to the social surroundings. In the utopian vision, the boundaries between the school and the community are fluid. The school is the center of activity for the entire community. School psychologists are instrumental in a process that restructures relationships between professionals and those they serve. They work to empower and foster contribution from community members, parents, teachers, and children.

School psychologists trained in mental health and organizational consultation have process skills as well as skills in collaboration and program development. They can help school staff and community members determine the needs of the community and school. Skilled in developing, implementing, and evaluating interventions, the psychologist can facilitate programs, develop networks, and serve as a resource across institutions to improve learning and mental health environments for children, families, and society.

The school psychologist's indispensable role within a school includes preventive activities that are responsive to the needs of contemporary society as well as the changes in services necessitated by health care and educational reform. In the futuristic school, theoretically and empirically-based activities would be planned and executed by school psychologists. The activities would emanate from three models of primary prevention: community, environmental, and individual (Alpert, 1985). Community primary prevention occurs in the interactions between school and community whereas environmental primary prevention takes place within the school and involves social system analysis and modification as well as person-environment fit. Individual primary prevention focuses on the fostering of individuals' skill and competence within the classroom.

Primary prevention should be part of the school psychologist's role. The following are a few examples illustrating primary prevention activity. Some of the programs described below are presently being implemented in schools across the country. While the prevention efficacy of most of these programs has not been demonstrated, they have face validity. Further, while most of the examples included in this paper involve violence, programs dealing with other concerns could and, in fact, should be developed in schools. Out of concern about the increasing violence in our society, we selected examples which are related to the prevention of violence.
Community Primary Prevention

The school can serve the child, the family, and the community. The well-being of every individual in society is important. Presently the school building is under-utilized during the week days, evenings, and weekends. The programs described here involve a greater utilization of the school building and school personnel. They serve broad populations as well.

Prevention programs are well suited for schools due to the schools’ physical and psychological access to children and their families. The school psychologist can be the prime communicator within the school and between the school and the community. The school psychologist can be the consultant, developer and coordinator of the programs. The following are some examples of community primary prevention.

Parenting Training Programs. Historically there has been relatively little parental involvement in schools. Parents need a forum to meet with other parents and to discuss such important topics as normal child development, parenting skills, and discipline techniques. Such a program could be particularly helpful to disenfranchised populations in which isolation is a chronic problem. The effort here would be to promote good parenting. With more effective parenting skills, frustration and consequent child abuse should be minimized. The leader(s) of such parenting groups could be the school psychologist, other school personnel, or volunteers from the community. School psychologists could help to organize the program and to support the leader.

Child Respite Center. Parents may need to have time away from their young children who do not attend school. Also, parents may need a break from school-age children during nonschool hours. If schools could broaden their hours and functions, children could be brought to the school building by overwhelmed parents. Such a program could result in the prevention of child abuse.

The child welfare systems are dangerously overburdened. Prevention is indicated. The school must become a more integral part of the community. The school psychologist could develop, implement, and promote such a program as well as facilitate the coordination of other services for children and parents.

Environmental Primary Prevention

Environmental impact on individuals and sensitivity to the person-environment fit is indicated (Alpert, 1985). Presently some schools offer after-school programs. Other schools do not. Our contention is that many more prevention programs could be offered and would be cost effective. An environment can be altered or, alternatively, an individual’s ability to deal with the environment can be enhanced. The examples below exemplify an environmental prevention approach.

Drop-out Prevention Programs in Junior and Senior High School. There are currently school programs which offer tutoring, counseling, or enrichment. Such programs can be conceptualized as preventive in that they may prevent school drop-out as well as education or mental health problems. Students who remain in schools longer and who have a positive experience in school, are more likely to continue their education. With more purpose and a greater potential for employment, they may also be less likely to engage in violent activity.

Adjustment to Environment Programs. There are numerous programs which could serve the function of helping children adjust to various environments. A child who needs minimal stimulation, for instance, could be taught techniques to tune out excess stimulation. Also, as another illustration, programs could assist children recently arriving from other cultures to adjust to our culture. School psychologists trained broadly in consultation have skills that enable them to develop, implement, evaluate, and consult around such programs and to engage with other
agencies and organizations.

**Designing Environments.** The school building can be altered in order to prevent or decrease the number of violent incidents. School psychologists can coordinate and organize safety team meetings in order to identify times of day and frequent locations where incidents occur. Student bathrooms, for instance, are often completely unsupervised and are a locale for fights and drug activities. The suggestion here is not to start a mini-police state within the school but, rather, to initiate discussion and awareness among school personnel to help prevent violence. A **buddy system** for younger children could be instituted, for instance, or random checks in the bathroom could be conducted by community volunteers trained in conflict resolution.

**Individual Primary Prevention**

Underlying individual primary prevention is the belief that individuals are vulnerable to maladjustment when they lack skills to solve personal problems and that the best defense is to help them build competencies and to develop adaptive strengths. Thus, individual primary prevention involves the teaching of skills to individuals, usually in groups, to facilitate adjustment. The school psychologist can be essential in developing and implementing skill and competence-fostering programs. The following are some examples of individual primary prevention programs.

**Sexual Abuse Prevention Programs.** There are numerous programs designed to educate children and adolescents around sexual abuse and date rape. These programs vary greatly and many are controversial. School psychologists should have the knowledge base and skill to consider the population, evaluate and modify existing programs, and develop a plan which meets the needs of a given group. School psychologists could also train school staff and parents to foster child/adolescent competence around these issues.

**Enrichment Programs.** Basic to enrichment programs is the belief that a variety of experience and the learning of skills will affect cognitive development and competence acquisition. Social problem-solving curriculum teach children and adolescents how to communicate feelings and needs in an appropriate, nonviolent way. Many of these programs provide for the opportunity to both learn and practice developing social skills.

**Conclusion: Back to the Future**

Over a decade ago, the first author described a futuristic school in which there was expansion of the role and function of school psychologists. Currently, this utopian futuristic fantasy has the potential to be realized. It is consistent with the ongoing reforms in education and health care. In addition to the more traditional activities of assessing and remediating educational, emotional, and behavioral problems, school psychologists can engage in primary prevention programs. They can be critical in the effort to establish better, safer and more community-involved schools.

In this brief chapter, we focused on violence as a means to illustrate the primary prevention role of school psychologists. Through the use of community, environmental, and individual primary prevention strategies, violence as well as other social concerns can be abated; individual and collective adjustment and learning can be facilitated. While the impending health care and educational reforms evoke uncertainty, they also lead to opportunity. There is presently an opportunity for psychologists in schools to expand their more traditional and already essential roles of secondary and tertiary prevention and to provide primary prevention in schools. Former fantasy can be present reality. In fact, it may be present necessity.
References

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Telephone: 202/872-6530
E-Mail Address: ret@apa.org
FAX: 202/872-6864
Date: 10/2/96