

Summaries of research on mental health services for children and adolescents and their families

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Source: Kutash, K., Duchnowski, A. J., Sumi, W. C., Rudo, Z., & Harris, K. (2002). A school, family, and community collaborative program for children who have emotional disturbances. *Journal of Emotional and Behavioral Disorders*, 10(2), 99-107.

This article describes the development and evaluation of a school-based program for students with emotional disturbances served in a special education setting. Results of studies in the children's mental health field point to two recent trends. First, the wraparound approach to providing integrated services to children with serious emotional disturbances is one of the most frequently used community-based treatment approaches for this population of children, with 80% of all state directors of children's mental health reporting the use of this approach in their state (Burns and Goldman, 1999). Secondly, an epidemiological study conducted in North Carolina indicated that children are most likely to receive needed mental health services through the school system rather than the specialty mental health system (Burns, 1995), which lead Burns to conclude that the school system is the de facto mental health system.

These two trends influenced Kutash and colleagues to: (a) design and implement a training program to develop a school-based wraparound program (*the School, Family, and Community Partnership*), (b) test the implementation of the model in a middle school, and (c) measure the longitudinal effects of the program on youth who were placed in special education due to emotional and behavioral disturbances in the areas of emotional, social/behavioral and academic functioning.

Kutash et al. detailed the training program developed for school staff and community members as well as procedures used to ascertain if the training was effective. Participants were assessed before training began, immediately after training concluded, and at six months post-training on their level of knowledge of the wraparound approach and general information regarding children with serious emotional disturbances. Results indicated that the training program increased the knowledge level of staff and their level of mastery was maintained six-months post training.

A major component of the Partnership Program is the School, Family, and Community Team. This team focused on the student and the family and included various school personnel, child-serving agencies, community representatives, extended family members, and informal supports. The purpose of this team was to integrate the various services the child received and to use the expertise of all members, including the child and family, in a collaborative setting. The team regularly worked together to develop the School, Family, and Community Plan, which identified the barriers to learning for the student and developed activities to remove them. The plan detailed strengths, needs, barriers, and actions present in the various life domains of each student.

Additionally, a measure of fidelity was developed to assess the degree to which the program concepts and principles were used and applied by school staff in partnership meetings with parents and students. An examination of the fidelity ratings of program implementation indicated that almost three-fourths (72%) of the model's concepts were being implemented during the two year operation of the program. Further, the authors examined the relationship between the amount of fidelity of implementation for a student and their outcomes over time. Correlational analyses indicated that over time, higher ratings of fidelity were associated with higher gains in reading skills, but not math skills, emotional functioning or impairment. This focus on fidelity is an important advance for the field.

The analysis of student outcomes concentrated on the 23 participating middle school students. These students were predominantly white males who were on average 11 ½ years of age at the beginning of the study. Data were collected at entry, 12 and 18 months post-entry. There were no significant changes in

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students' levels of academic achievement in the areas of math or reading, number of days absent from school, or percentage of time spent in a special education environment. Discipline rates, however, did significantly decrease over time. While measures of emotionality and impairment as measured by the CBCL and CAFAS improved over time, the improvements were not statistically significant. A comparison group at another school was initially identified as part of the research design, however, substantial attrition of students prevented comparison of the two groups. Students in the comparison group were transferred to more restrictive educational environments (such as an alternative school) at a higher rate than the students in the target group, leaving these two groups too dissimilar to compare.

The Partnership Program provided a solid step in the direction of implementing a wraparound approach, interagency collaboration, and enhanced family involvement in a single intervention. The program was successful in reducing student discipline referrals. The lack of strong effects on emotional functioning and impairment may have been due in part to the inability of the Partnership Program to increase the use of mental health services from community agencies. Academic outcomes also were not significantly improved. The authors suggest an evaluation of the curriculum and instructional methods used in order to better understand the educational process for students who have ED.

References

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