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### Training in pediatric school psychology: A model for interdisciplinary collaboration

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## **Training in pediatric school psychology: A model for interdisciplinary collaboration**

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## Background on Pediatric School Psychology

- Approximately 20% of children and adolescents are affected by a mental disorder (National Institute of Mental Health, 2005), 22% suffer from obesity, and an additional 10% suffer from asthma (Creer & Bender, 1995; Troiano, Flegal, Kuczmarski, Campbell, & Johnson, 1995).
- Educational reform emphasizes that schools must begin to address how mental and physical health issues are potential barriers to learning (Adelman & Taylor, 1998).
- An interdisciplinary approach is necessary to meet the multiple needs of children across systems (Power, Shapiro, & DuPaul, 2003).
- The National Institute of Mental Health (NIMH), American Psychological Association (APA), and the National Association of School Psychologists (NASP) have developed specific training guidelines for intersystemic collaboration (Power, DuPaul, Shapiro, & Kazak, 2003).
- Recently, pediatric school psychology training has been recommended to promote interdisciplinary collaboration and communication (Power, DuPaul et al., 2003; Shaw, 2003).
- To address this need, a collaborative partnership between the School Psychology Program at the University of Nebraska-Lincoln (UNL) and the Munroe Meyer Institute at the University of Nebraska Medical Center (UNMC) was developed to provide school psychology doctoral students with interdisciplinary leadership training.
- From this partnership, an interdisciplinary approach to working with children and families was developed through the application of CBC in a pediatric setting.

## Interdisciplinary Conjoint Behavioral Consultation

- Conjoint Behavioral Consultation (CBC) is an interdisciplinary service delivery model identified as "highly useful" to address the health needs of children and families across multiple systems (Power, DuPaul et al., 2003).
- CBC is a partnership-centered, indirect model of service delivery wherein *parents, educators, health professionals, and consultants work collaboratively* to meet a child's developmental needs, address concerns, and achieve success by promoting the competencies of all parties (Sheridan & Kratochwill, in press).
- The four stages of the CBC process include:
  - (1) conjoint needs identification;
  - (2) conjoint needs analysis;
  - (3) treatment implementation; and
  - (4) treatment evaluation.
- Research has demonstrated CBC to be an effective and acceptable model for addressing the needs of children who are at risk for academic, behavioral and/or social difficulties (Sheridan, Eagle, Cowan, & Mickelson, 2001).
- "The CBC model provides a framework for (1) aligning the family, school, and healthcare systems to facilitate the integration of children with health problems into school and (2) integrating systems of care into the problem-solving process" (Power, DuPaul et al., 2003, p. 89).
- Preliminary research has demonstrated that CBC can be an effective model for addressing the multiple needs of children in a pediatric setting (Sheridan et al., 2004).
- A more structured approach to training in interdisciplinary collaboration and CBC in a pediatric setting is warranted.

Table 1  
*Overarching Goals and Objectives of Conjoint Behavioral Consultation*

| Outcome Objectives  |  |
|---|--|
| 1. Obtain comprehensive and functional data over extended temporal and contextual bases.  |  |
| 2. Establish consistent treatment programs across settings.   |  |
| 3. Improve the skills, knowledge, or behaviors of all parties (i.e., family members, school personnel, and the child-client).       |  |
| 4. Monitor behavioral contrast and side effects systematically via cross-setting treatment agents.                                  |  |
| 5. Enhance generalization and maintenance of treatment effects via consistent programming across sources and settings.              |  |
| 6. Develop skills and competencies to promote further independent conjoint problem-solving between the family and school personnel. |  |
| Process Objectives  |  |
| 1. Improve communication, knowledge, and understanding about family, child, and school.   |  |
| 2. Promote shared ownership and joint responsibility for problem solution.  |  |
| 3. Promote greater conceptualization of needs and concerns, and increase perspective taking.  |  |
| 4. Strengthen relationships within and across systems.  |  |
| 5. Maximize opportunities to address needs and concerns across, rather than within settings.  |  |
| 6. Increase shared (parent and teacher) commitments to educational goals.   |  |
| 7. Increase the diversity of expertise and resources available.   |  |

Source: Sheridan, S.M. & Kratochwill, T.R. (in press). *Conjoint behavioral consultation: Promoting family-school connections and interventions*. New York: Springer.

## Training in Interdisciplinary CBC

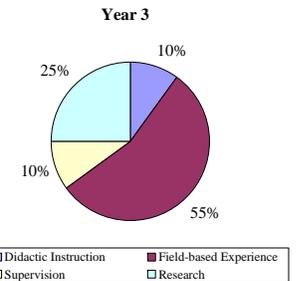
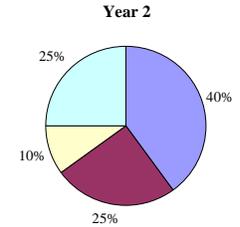
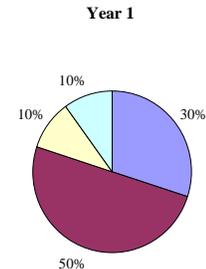
- The goals of this interdisciplinary training effort are to prepare school psychology doctoral students for a leadership role in:
  - providing culturally-sensitive, partnership-centered interdisciplinary collaboration services to address the complex needs of students with physical, developmental, and mental health needs;
  - delivering consultation services across medical, school, and family settings; and
  - conducting research related to interdisciplinary collaboration.
- At the completion of the training, doctoral school psychology students will acquire a specialization in partnership-centered interdisciplinary collaboration with:
  - knowledge* of medical/educational issues, roles of multiple service providers, systems supporting children with physical and mental health needs, and intervention options;
  - skills* in interdisciplinary consultation and collaboration, culturally-sensitive, partnership-centered services, and intervention design and evaluation; and
  - leadership* competencies related to research design, implementation, dissemination, systemic change, and capacity building.

➤ The interdisciplinary training process covers a three year span. See Table 2 for a description of the training elements and the following pie charts for time allocated to didactic instruction, field-based instruction, supervision, and research during each year of training.

Table 2  
*Description of Interdisciplinary Training Elements*

| Training Elements | Didactic Instruction (Topic examples)   | Field-based Experience                                     | Supervision   | Research  |
|-------------------|---|--|---|---|
| Year 1            | Behavioral consultation<br><br>Partnership-centered services<br><br>Intervention strategies   | Consultation cases in educational settings                 | Weekly with advanced doctoral graduate students                                 | CBC-related research  |
| Year 2            | Public policy<br><br>Developmental disabilities<br><br>Multicultural sensitivity              | Clinic observations<br><br>School observations             | Weekly with discipline advisor<br><br>Frequently with interdisciplinary advisor | CBC-related research<br><br>Interdisciplinary research projects |
| Year 3            | Discipline-specific practices<br><br>Family advocacy<br><br>Manuscript preparation and review | Consultation cases through Developmental Pediatrics Clinic | Weekly with discipline advisor<br><br>Frequently with interdisciplinary advisor | CBC-related research<br><br>Interdisciplinary research projects |

## Training Elements



## Challenges for Pediatric School Psychology Training

- Educators, psychologists, and medical professionals have different goals, language and approaches to working with children and families (Perrin, 1999).
  - Health reimbursement systems may not support many of the activities outlined as best practices by the NIMH, APA, and NASP training guidelines (Power, DuPaul et al., 2003).
  - Trained faculty need to provide students with intensive training in both interdisciplinary intervention and health-related issues, both of which are lacking in training programs (Power, Shapiro, & DuPaul, 2003).
  - Training in pediatric school psychology may require students to spend additional time in preparation to become psychologists (Power, DuPaul et al., 2003).
- ### Research/Future Directions
- Program evaluation research needs to investigate the outcomes (e.g., knowledge and skill level, future employment) of this specialized interdisciplinary training model.
  - Research needs to evaluate the effectiveness and social validity of interdisciplinary CBC to address the needs of children and to strengthen partnerships across family, school, and medical settings.
  - Identification of the role of specialized school psychologists in addressing cross-cutting issues across multiple systems (i.e., school reintegration, adherence to treatment programs, pharmacological management) is necessary.