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Building Strong Family–School Partnerships: Transitioning from Basic Findings to Possible Practices

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Abstract

In the present article, we describe the translational process undergirding a particular aspect of family science: families working in partnership with schools to achieve mutual goals for children’s optimal functioning. In doing so, we illustrate a translational cycle that began with identifying problems of practice and led to the development of a family–school intervention (i.e., conjoint behavioral consultation) in a way that embraced families as partners in goal-setting and problem-solving. We discuss the evolution of the intervention from development to efficacy trials and practice guidelines. Key decision points borne out of practical relevance, empirical investigations, tests of mechanisms and conditions, and efforts pertaining to implementation and dissemination are illustrated. Finally, we highlight key research needed to advance the translation of the science related to conjoint behavioral consultation into widespread practice.

Keywords: Academic behaviors, conjoint behavioral consultation, family–school partnerships, problem behaviors, translational science

Over recent decades, family intervention work in schools has burgeoned. Parent engagement and family partnership interventions are becoming increasingly apparent in the educational and social science literatures, given evidence of their efficacy at promoting children’s learning, behavioral, and social–emotional outcomes. Whereas intervention scientists have uncovered

efficacious strategies to enhance parents' abilities to support their children's school-related goals through empirical methods such as experimental single case and randomized controlled designs, the ability for implementers to translate evidence-based strategies into feasible school-ready practices is not clear. Schools are often left with programs whose evidence is circumstantial and anecdotal at best, leading to short-lived program implementation and questionable results.

We conceptualize the process of translation research in much the same way as Mitchell Fisher, Hastings, Silverman, and Wallen (2010), who described it as "activities designed to transform ideas, insights, and discoveries generated through basic scientific inquiry and from clinical or population studies into effective and widely available clinical applications" (p. 293). To reach its goal of improving public health and wellness, translational research is best positioned when it effectively and efficiently addresses priority problems in real-world contexts. These include problems facing children in the contexts and systems within which they are situated—namely, families and schools. The translation cycle addresses problems in ways that require the utilization and integration of basic, efficacy, implementation, and dissemination methodologies implemented in a recursive fashion (see **Figure 1**).

The purpose of this article is to describe the translational process undergirding a particular aspect of family science—families working in partnership with schools to achieve mutual goals for children's optimal functioning. Thus, we illustrate how the identification of lived problems in schools led to the expansion of an evidence-based school intervention (i.e., behavioral consultation) in a way that embraced families as partners in goal-setting and problem-solving (i.e., conjoint behavioral consultation) for children with identified behavioral or academic problems. In this process, we describe the translational cycle moving this family-school intervention from development to efficacy trials and practice guidelines. The evolution of the intervention is chronicled to highlight translation science within the family intervention context. As such, we summarize key decision points borne out of practical relevance, empirical investigations, tests of mechanisms and conditions, and efforts pertaining to implementation and dissemination. The guiding frame for our work over the years continued to be one-dimensional, and focused on our desire to address problems of practice. Likewise, one primary goal—dissemination for the public good—clearly directed our evolving questions, methods, and decision-making.

Family interventions in schools present a unique problem of translation for many reasons. Many family interventions were initially developed, tested, and disseminated in traditional service agencies, such as clinics or outpatient settings. Family scientists typically consider family at the core of their interventions, and efforts are made to extend influences from the family core to other related systems such as schools. School-based interventions, however,

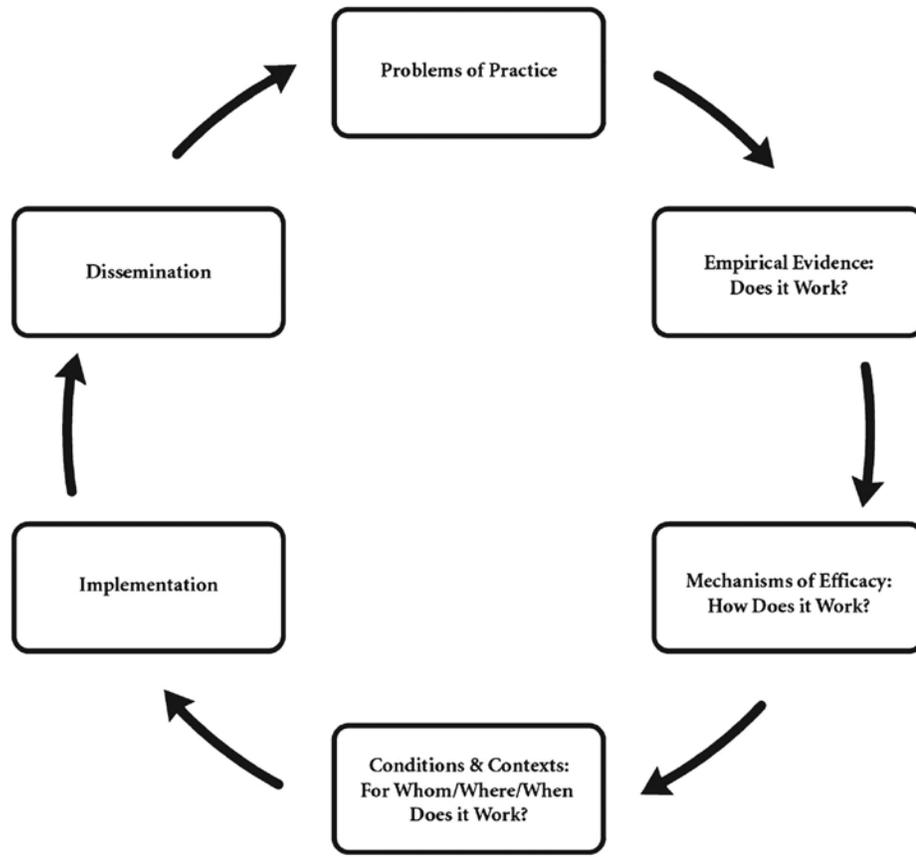


Figure 1. Graphic of translational sequence moving from problems of practice to implementation and dissemination.

approach similar goals from an alternative perspective, starting with the school at the core, with efforts to attract families into that system. Either way, the effective interface of families and schools is challenging. Just as families are entrenched in culture and history, schools are unique practice contexts given their very targeted and distinctive goals and structures, and their notoriously closed systems are challenging to modify. Services offered in schools, especially when they introduce people or purposes that are not germane to the task of educating students, are often met with resistance. Yet it is the case that the very mission of school systems—optimizing the learning opportunity and outcomes of children and adolescents—is best achieved when families are involved and engaged. Furthermore, challenges to learning are not typically confined to the school building; behaviors that interfere with learning often manifest in the family system as well (Achenbach, McConaughy, & Howell, 1987; McCombs Thomas, Forehand, Armistead, Wierson, & Fauber, 1990). Thus, when supported effectively, families can be important resources in the

face of challenges that interfere with students' learning. Strengths-based family interventions, capitalizing on families' unique strengths and perspectives, and numerous (often untapped) opportunities to support children's learning and healthy development, can be instrumental in enhancing the family system and the family-school interface. What is needed, then, are family-school interventions intentionally developed and tested to promote family strengths that take into account the unique structural and relational features inherent in schools as potential treatment agencies.

Conjoint behavioral consultation (CBC; Sheridan & Kratochwill, 2008; Sheridan, Kratochwill, & Bergan, 1996) is a structured, indirect intervention focused on enhancing individual students' social-emotional competencies and learning skills by enhancing family engagement and partnerships between families and schools. *CBC* is defined as "a strength-based, cross-system problem-solving and decision-making model wherein parents, teachers, and other caregivers or service providers work as partners and share responsibility for promoting positive and consistent outcomes related to a child's academic, behavioral, and social-emotional development" (Sheridan & Kratochwill, 2008, p. 25). **Table 1** outlines the objectives of each stage of CBC problem solving. The ultimate goal of CBC is to enhance individual students' trajectories toward positive and adaptive outcomes specific to targeted goals determined with mutual teacher and parent input. This goal is achieved through processes focused intentionally on strengthening the family-school connection and with structured practices that guide decision-making.

In CBC, parents and teachers actively participate as partners in setting goals and creating meaningful educational and social-behavioral plans for individual children. It is intended to support children who are already struggling with learning or behavioral problems as an indicated intervention to ameliorate issues that are interfering with their adjustment. The CBC intervention is most typically administered with the guidance of a consultant (e.g., school psychologist, behavioral specialist) via collaborative home-school interactions. The collaborative interactions are framed in a manner that allow the CBC team (consultant, teacher, parent) to address difficulties that may be interfering with individual students' learning and development, and strengthen relationships between families and educators. The most detailed and structured interactions take place in problem-solving meetings (i.e., Building on Strengths, Planning for Success, Plan Implementation, and Checking and Reconnecting) in which there are concrete opportunities to pinpoint specific needs and build child skills, make mutual decisions related to specific targets and goals, co-create plans and strategies to be used at home and school, and set and monitor performance criteria for students' success. A substantial amount of collaborative work also occurs between meetings, including data collection, plan implementation, trouble-shooting, and sharing of questions and ideas.

Table 1. Structural and relational objectives of consultant practices across conjoint behavioral consultation stages

<i>Stage of CBC</i>	<i>Structural Objectives</i>	<i>Relational Objectives</i>
Needs identification: "Building on Strengths"	<ul style="list-style-type: none"> • Guide parents and teachers to jointly identify and define child's needs and priorities in behavioral terms. • Guide parents and teachers to jointly establish a procedure to collect baseline data across settings (i.e., home and school). 	<ul style="list-style-type: none"> • Establish joint (parent and teacher) responsibility in goal-setting and decision-making. • Use open-ended questions and active listening. • Use inclusive language to foster shared responsibility. • Summarize and validate concerns of parents and teachers, pointing out similarities across settings. • Validate shared goals of supporting the child. • Identify strengths of the child, family, and school. • Increase communication and knowledge regarding the child, goals, concerns, and culture of family and school.
Needs analysis: "Planning for Success"	<ul style="list-style-type: none"> • Evaluate information collected across settings. • Support parents and teachers as they collaboratively develop appropriate goals for priority behavior across settings. • Discuss what is happening before and after the priority behavior, as well as specific patterns that occur, during the focused time/setting. • Guide the collaborative development of a plan that builds on strengths and competencies to address priority behavior across settings. • Reaffirm information collection procedures. 	<ul style="list-style-type: none"> • Facilitate shared understanding of problems and potential solutions. • Encourage and validate sharing of parents' and teachers' perspectives of the behavior and plan ideas. • Foster an environment that facilitates "give-and-take" communication across settings. • Summarize and validate contributions for plan development. • Express the importance of parents' and teachers' roles in the success of plans.
Plan implementation across home and school	<ul style="list-style-type: none"> • Support parents and teachers as they implement agreed-upon intervention across settings. • Address questions, provide feedback, make immediate modifications to plan as necessary. • Work toward changes in behavior or skills in the desired direction. 	<ul style="list-style-type: none"> • Communicate about strategies as they are being implemented across settings. • Increase continuity in addressing child's needs across settings by supporting fidelity of cross-system plan implementation.
Plan evaluation: "Checking and Reconnecting"	<ul style="list-style-type: none"> • Determine whether the goals for the priority behavior have been met. • Evaluate which aspects of the plan were effective or not. • Discuss continuation or termination of plan. • Schedule additional interview if necessary, or terminate consultation. 	<ul style="list-style-type: none"> • Continue to provide opportunities for open communication and collaborative decision-making across settings. • Reinforce parents' and teachers' joint efforts in addressing needs. • Discuss parents' and teachers' perceptions of the plan and process. • Reinforce parents' and teachers' strengths and competencies for addressing the child's future needs. • Establish means for caregivers and teachers to continue to partner.

Adapted from Sheridan and Kratochwill (2008).

Foundations: Problems of Practice Leading to Family–School Intervention

This line of work, linking families and schools in a partnership-based intervention, was born out of experiences when the first author worked as a school psychologist. Working in the schools with young children at risk for mental health problems and school failure illuminated clear divides between schools and families. Oftentimes, this divide created substantial problems for families who needed access to information, services, and support. At worst, it created discontinuities for children and thwarted their ability to achieve to their fullest potential. Unfortunately, the tools within the psychologist's armamentarium (e.g., standardized assessments, classroom observation protocols, school records) were incapable of capturing the fundamental strengths and challenges facing students and their families. It was not until home visits and detailed family interviews were added to the toolkit that we were able to begin forming a true understanding of the child's life experiences and realities, and parents' concerns and dreams, to create meaningful and relevant academic and behavioral plans to help students with social-emotional problems.

As a response, we modified previously validated teacher-focused consultation strategies routinely used only with teachers in school settings (Kratohwill & Bergan, 1990) to include parents in joint and collaborative problem-solving. The full integration of families into the intervention moved the practice from one directed solely from a behavioral tradition to embrace an ecological orientation. Moving from a traditional school intervention involving teachers only to one that invited families to actively and meaningfully participate in problem-solving and plan development required the adaptation of school-based strategies. Modifications to traditional approaches to behavioral consultation and the development of methods for bringing together parents and teachers who jointly and collaboratively identified cross-system targets, influences, and plans were necessary. To address this problem of practice, we embraced the need to move from a purely behavioral orientation, with its technical strengths on functional relations and empirically supported child-focused tactics, to one that embraced an ecological-systems orientation with emphasis on relationships among environments.

Ecological theory (Bronfenbrenner, 1979, 1991) recognizes the interconnected, overlapping influences on a child's learning and development. Accordingly, children's learning is viewed as a result of the child and family systems interacting in reciprocal fashion with the school and schooling system, along with other immediate and distal systems (Rimm-Kaufman & Pianta, 2000). The primary, immediate system within which children function is the *microsystem*, and the main microsystems in a child's life are the home, child-care, and school (e.g., classroom) settings within which they are

physically situated. The microsystem represents the relationship of the child within an immediate setting (e.g., home *or* school) at a point in time. The interconnections among microsystems represent the *mesosystem*, which affects the child through relationships, communication patterns, and other bi-directional exchanges (i.e., home *with* school). The mesosystem represents the interactions and shared responsibilities across home and school that are key to successful relationships. All of these are influenced by more distal, contextual features of the environment (*exosystems*) and the extended cultural, economic, and political contexts (e.g., values, norms, policies) within which they are embedded (*macrosystems*).

Appreciation for the importance of the mesosystem as a potential support net for children was pivotal in the development and evolution of CBC. Early in CBC's development, we focused on making ecological-systems theory concrete by using a highly structured approach to intentionally strengthen the important relationships in a child's life that are responsible for their learning and well-being—namely, parents and teachers. Relative to the traditional school services method of addressing issues at the level of a uni-dimensional microsystem (i.e., school *and/or* home), CBC put into practice cross-system supports (e.g., school *with* home) to encourage positive and healthy developmental trajectories for children at risk.

Does CBC Work?

With realization of the potential impact of family-school intervention, we embarked on some preliminary research to test the basic research question that is posed early on in most intervention outcome studies: "Is CBC effective at producing a desired change for children who are struggling in school?" For students to succeed in school, research has pointed to specific academic behaviors that encourage learning. Some students struggle with these academic behaviors (e.g., paying attention, staying on task, completing work and homework, accuracy) at home and school. Over 25 years, we have learned a great deal about the efficacy of well-defined and carefully implemented CBC strategies under controlled conditions. We began this line of work using single case experimental design (SCD) methodology, which is both rigorous and feasible to test field-based interventions in natural environments, monitor immediate responses, modify plans, and evaluate outcomes through well-defined targets, operationalized procedures, repeated measures, and systematic analysis of changes in the dependent variables (Kratochwill et al., 2013). In essence, it represents a type of "quick response" cycle because its flexible and responsive structure allows for manipulation of procedures to promote response to an intervention or enhance fit to a natural environment for a student. Likewise, intensive attention to individual

responses and variations heeds our understanding of the influence of natural environments and treatment agents—highly relevant in the translational process. Thus, this field-friendly experimental approach allowed us to carefully specify and manipulate our independent variable (i.e., CBC), document and assess intervention implementation (i.e., fidelity of consultant, parent and teacher practices), measure student outcome variables in a repeated fashion (e.g., frequency counts of target behaviors, such as problems completed, percentage of items answered correctly, duration of social interactions) across baseline and intervention, and analyze students' behavior change in terms of level, trend, and other meaningful metrics.

The first experimental CBC study used a multiple-baseline design to investigate the effects of CBC (and teacher-only consultation) on peer interaction behaviors for four socially withdrawn children (Sheridan, Kratochwill, & Elliott, 1990). We found positive effects for home-school plans implemented in the context of parent-teacher consultation, with generalized effects across home and school settings. Under conditions of teacher-only consultation, effects were localized to the school setting only, indicating the necessity of parent participation in the intervention. Furthermore, maintenance of effects appeared stronger under conditions in which both parents and teachers contributed to consultation and implemented interventions in both of their respective settings.

Simple adaptations to replicate and extend our questions and findings with new problems, samples, and contexts followed. Through a series of SCDs, our findings were replicated across unique target behaviors such as young children with academic performance deficits (Galloway & Sheridan, 1994), different samples such as middle school students with homework problems (Weiner, Sheridan, & Jensen, 1998), and distinctive disability groups such as children with attention-deficit/hyperactivity disorder experiencing social skills difficulties (Colton & Sheridan, 1998). With the use of experimental methodologies (predominantly multiple-baseline designs), we were confident in the potential of CBC for addressing student challenges.

The strength of SCDs as defensible research designs lies in the ability to replicate effects across samples, settings, and problem contexts. In the CBC literature, replications were evident across studies that evaluated its effects at having a positive impact on a range of academic behaviors, including homework completion and work accuracy (cf. Galloway & Sheridan, 1994; Power et al., 2012; Weiner et al., 1998) and the development of academic skills (Murray, Rabiner, Schulte, & Newitt, 2008). Positive case outcomes were also evaluated and confirmed for children who varied based on socioeconomic status, maternal education, number of adults in the home, and language spoken at home; effects were most pronounced for students presenting with greater levels of diversity (Sheridan, Eagle, & Doll, 2006).

An inherent weakness of SCDs is the lack of capacity for generalization due to small samples. To address translational issues associated with implementation, dissemination, and scalability, we started asking bigger questions that required larger samples and different forms of experimental control. Thus, large-scale intervention research, conducted in the context of randomized controlled trials (RCTs) introduced a second generation of CBC research. In the first large-scale RCT testing the efficacy of CBC in a suburban Midwest city, we found increases in behavioral competence and decreases in problem behaviors for students whose parents and teachers participated in CBC, relative to a “business as usual” control group (i.e., students receiving traditional school support or services solicited outside of the school). Specifically, Sheridan, Bovaird, Glover, Garbacz, Witte, and Kwon (2012) reported that students (kindergarten through third grade) whose parents and teachers participated in CBC demonstrated greater rates of teacher-rated adaptive skills (i.e., prosocial, desirable behaviors; $d = 0.39$), and parent-rated ($d = 0.42$) and teacher-rated ($d = 0.47$) social skills. Positive effects in the home environment were also noted; relative to a control group, greater rates of change were found for a number of disruptive child behaviors (i.e., arguing, defiance, noncompliance, and tantrums as assessed by parent daily reports; $d = -0.90$ to -1.54 ; Sheridan, Ryoo, Garbacz, Kunz, & Chumney, 2013). In a replication study conducted in rural Midwest school communities with kindergarten through third-graders (primarily White), Sheridan, Witte, Holmes, and Coutts (2017) found positive effects for CBC relative to a control group on teacher reports of students’ school problems (attention and learning problems; $d = -0.45$) and direct classroom observations of negative (motor movements, off task; mean $d = 0.45$) and positive (appropriate social, engaged time; mean $d = 0.35$) behaviors. Positive effects of CBC on children’s adaptive behaviors and social skills at home were noted by parents (i.e., $ds = 0.22$ and 0.56 , respectively) and as recorded in daily reports of behavior (aggressiveness, noncompliance, temper tantrums; ds range = 0.29 – 0.34 ; Sheridan, Witte, Holmes, Wu, Angell, & Batia, 2017).

How Does CBC Work?

Our goal toward broad public dissemination and impact increasingly required that we turn our attention to questions about processes undergirding CBC’s effects. A hallmark of translational research is uncovering operative mechanisms, including how the intervention works (i.e., what is responsible for its effects), variables that may influence uptake of the intervention, and individual differences surrounding outcomes. Thus, we started to become more interested in variations in treatment effects. In the SCD paradigm,

because we look intensively at single participants and their response to interventions, individual differences are among the most important and interesting under study. Variations in treatment effects begin to suggest both processes (i.e., mechanisms) that may be at work and contextual factors that influence uptake. We began asking questions about how, and under what conditions, CBC works.

Early CBC research found that, aligned with ecological systems theory, consistencies across home and school were enhanced when parents and teachers worked in a collaborative problem-solving manner, and treatment gains for students were more robust and long-lasting relative to conditions when they worked in isolation from one another. When only teachers engaged in problem-solving, positive student behavioral outcomes were experienced only at school (i.e., they did not generalize), and they failed to maintain (Sheridan et al., 1990). Galloway and Sheridan (1994) found that both children whose parents participated in CBC and those who intervened by gaining information via manualized instructions only demonstrated increases in homework completion and accuracy. However, similar to earlier research (Sheridan et al., 1990), the patterns of student performance were stable and consistent only in the CBC condition—that is, when parents and teachers worked together in joint, collaborative problem-solving meetings and communicated actively and directly about a mutual set of goals and plans. When parent involvement was confined to one-way (school to home) communication as indicated in a manualized condition, gains were less pronounced and more short-lived. Furthermore, consumer satisfaction was enhanced when parents and teachers worked together. In our RCTs, greater improvements in the parent–teacher relationship were found for CBC participants relative to controls (Sheridan et al., 2012; Sheridan, Witte, Holmes, Coutts et al., 2017). In fact, in the absence of CBC, relationships between parents and teachers of students with behavioral problems deteriorated over time (Sheridan et al., 2012; Sheridan, Witte, Holmes, Wu et al., 2017).

These findings added credibility to our developing notion that relationships between parents and teachers (i.e., the mesosystem)—not simply enhanced home or school supports (i.e., the microsystem)—contributed to positive student outcomes. We began developing a theory about *relationships* between parents and teachers, and not simply parents' involvement in intervention implementation, that contributed to the effects of CBC. That is, more than simply imposing structural and tactical features of problem-solving and cross-setting behavioral interventions, we began to theorize that the conjoint and collaborative nature of the meetings wherein parent and teachers build trust, exchange ideas, share responsibility, and expect accountability—the true tenets of a relationship—may be partly responsible for positive intervention effects.

Thus, we began to test actively the relationship between home and school (rather than separate, albeit complementary roles; Christenson & Sheridan, 2001) as potentially operative in producing the positive effects of CBC. Whereas healthy relationships within the home (e.g., parent–child, sibling relations) and out of home settings (e.g., teacher–student, peer–peer) influence children in very direct ways, in theory the mesosystem (i.e., interactions between microsystems such as the home and school and relationships among individuals therein) and the relationships of individuals across social contexts (i.e., teachers and parents; homes and schools) were recognized as a potentially potent pathway for treatment effects.

Interest in exploring the parent–teacher relationship as a salient variable influencing (and being influenced by) CBC led us to introduce self-report measures (i.e., parent- and teacher-report forms of the Parent–Teacher Relationship Scale–II; PTRS–II; Vickers & Minke, 1995) into our research. The systematic use of the PTRS–II in the context of many early SCD studies enabled us to explore the construct in a deliberate way. Aggregating across 48 cases of children aged 6 and younger derived from separate small-*N* designs and SCDs, we found statistically significant improvements in parents' ratings of communication and their overall relationship with teachers following CBC (Sheridan, Clarke, Knoche, & Edwards, 2006).

However, because controlling human relationship quality is difficult within SCDs, we set forth on studies using complementary designs that allowed us to examine hypotheses about the mediating role of parent–teacher relationships on the effects of CBC. Research with large numbers of participants was increasingly necessary to ensure sufficient statistical power to test such relations, and this theory was examined using multilevel models and mediation analyses.

In two RCTs, we tested the parent–teacher relationship as a potential mechanism through which CBC exerted its effects. Across studies, the parent–teacher relationship was found to mediate the effect of CBC on children's adaptive and social skills (Sheridan et al., 2012; Sheridan, Witte, Holmes, Wu et al., 2017) and school problems (Sheridan, Witte, Holmes, Coutts et al., 2017). In other words, the parent–teacher relationship is an operative feature in partnerships, at least partially responsible for the effects of partnership problem-solving practices on student outcomes.

For Whom and Under What Conditions Does CBC Work?

The effectiveness of CBC has been examined and documented across a range of student grade levels (e.g., preschool, elementary, and middle school), student concerns (e.g., academic behaviors, disruptive behavior problems, and

social skills), contexts (e.g., Midwestern urban and rural; Sheridan et al., 2012; Sheridan, Witte, Holmes, Coutts et al., 2017), treatment settings (e.g., outpatient pediatric; Sheridan et al., 2009), and households (including those functioning at the poverty threshold; Taverne & Sheridan, 1995). This level of investigation has allowed us to conclude that CBC's effects have been replicated, but no real understanding of interactions between the intervention (with its complex relational and structural elements) and deeper contextual, systemic, interpersonal, or organizational variables was available.

Investigating moderators of an intervention's effects allows scientists and practitioners to understand which subgroups benefit most from the intervention, under which conditions, to understand practical relevance. Moderators have an amplifying or dampening effect on the outcome of interest and thus create subgroups (or settings, systems, etc.) for whom the intervention is more or less effective. This information can guide recommendations on the target audience or setting under which the intervention can have the greatest impact for practitioners and policymakers.

The meaning, preference, and utility of interventions—all variables necessary for translation—are often unveiled through designs that allow us to determine empirically the conditions under which an intervention works. Family scientists are increasingly concerned with understanding whether treatments can be expected to function similarly across different families, in certain contexts, or under various conditions. This line of inquiry requires researchers to hypothesize and test conditions under which interventions can be expected to work.

Early in our CBC work, we began to explore whether we could discern variables that influenced outcomes. Sheridan, Eagle, Cowan, and Michelson (2001) aggregated more than 52 SCDs of students with a variety of presenting concerns and disorders and found that a model fitting age and symptom severity predicted school effects relatively well. Specifically, older students (aged 11 years and older) with less severe symptoms and younger students (5–7 years of age) with more severe problems before CBC experienced the greatest improvements.

Our earlier findings led us to explore variables that may moderate (either amplify or depress) the effects of CBC in a more systematic manner. Using data from our first randomized trial, we explored the role of age, severity, disability and family risk as moderators of CBC's effects. With this sample of urban students with behavioral concerns, age and severity did not moderate CBC's effects as expected. Cumulative risk, however, amplified its effects such that as levels of family risk increased, behavioral problems (non-compliance, teasing, tantrums) decreased (Sheridan et al., 2013). Family risk (i.e., fewer than two adults in the home, maternal education less than high school diploma, and living on a household income less than 150% of the poverty threshold) moderated the effectiveness of CBC on parents' competence

in problem-solving and children's total problem behaviors, teasing, and tantrums. These results suggest that for parents and children in families at great risk, children had the greatest declines in disruptive behavior and parents had the greatest increases in problem-solving competence (in the CBC group compared with the control group). Thus, those families most in need benefited most from participation in CBC.

This confluence of information led us to realize that CBC gives families who may have been disconnected from or disenfranchised with schools a meaningful way to engage with educators and students, but only when they engage. On one hand, anecdotal information collected from families in our research suggested the personal relevance and importance of family members having the opportunity to share their goals and perspectives as parents who have a wealth of firsthand knowledge about their child, family, culture, and beliefs. Comments such as "no one has ever asked me what I thought or wanted before" were not uncommon. On the other hand, up to approximately 33% of parents invited to participate in our randomized trials failed to respond, indicating a disconnect between what was being offered or how it was being communicated and what was perceived as priorities for families. This led us to believe in the importance of tapping the cultural responsiveness of CBC and examining its efficacy with a specific group of underrepresented families (in our case, Latinos) as a next step in our sequence of problem-focused translation.

Practical Considerations: From Evidence to Guidelines for Family-School Interventions

Our ongoing efforts to understand whether CBC works, how, for whom, and under what conditions have created a juxtaposition that is not likely foreign to other translation scientists. Indeed, translation of evidence-based interventions has been plagued with the reality that rarely do the conditions of experimentation (i.e., well-defined samples, highly controlled implementation procedures, minimization of extraneous factors) mimic the real-world environment in which we hope to practice. We have learned many lessons through our SCDs and RCTs that both informed the way our intervention has unfolded and led to implications for broad-based implementation and dissemination. Thus, we next offer a number of practice considerations based on lessons learned over decades of intervention work.

Adopt Guidelines, Tools, and Practices for "Real-World" Translation

Our work in schools has instilled in us the importance of matching not only priorities but also semantics (i.e., not only what we do but how we talk

about it with phrases, terms, acronyms, and jargon) with the agencies with whom we partner. As a concrete example, moving from a strict behavioral orientation to one that is more ecological in nature caused us to rethink the packaging of CBC. Specifically, feedback from study participants reacting to the title *conjoint behavioral consultation* recently encouraged us to change the intervention name to *Teachers and Parents As Partners* (TAPP; Sheridan, 2014), with practitioner-friendly manuals and materials available to aid implementation. Rather than retaining the original interview titles (e.g., Conjoint Problem Identification Interview; Conjoint Treatment Evaluation Interview), we now use more descriptive titles for parent-teacher meetings (e.g., Building on Strengths, Checking and Reconnecting).

The manualization of CBC has allowed for practice to occur in many training and practice contexts. Various materials for use in consultation sessions are now available in user-friendly manuals for consultants (Sheridan & Kratochwill, 2008) and teachers (Sheridan, 2014). These include parent-teacher problem-solving protocols, meeting agendas, home-school notes, behavioral plan forms, data collection tools, video models, and tips for implementation of each CBC stage. A project website contains narrated slides, video models, research briefs, and access to training modules for use by trainers and practitioners (*Teachers and Parents as Partners*, n.d.). A toolkit comprising research-based behavioral plan strategies to support children's development of prosocial skills, behavioral competencies, and school-related behaviors is available for practice.

Like most family intervention researchers, an inherent and long-term goal of our CBC research is to improve the lives of children and families by changing the manner in which supports are organized and delivered—in our case, in schools. To begin realizing this goal, we are learning that efforts to fold the process into natural school structures and practices such as existing Student Assistance Teams or multi-tiered systems of support models may be important to increase CBC's acceptability, allowing educators to see more easily the fit of the intervention into their daily operation. This is particularly important given that school specialists do not necessarily think about family intervention as front-line practice for school personnel. Normalizing the practice by integrating parents into the natural structures provided to struggling students is a useful contextual intervention. The buy-in of an effective administrator who provides structure and tangible support for teachers to be involved in parent-teacher problem-solving meetings and identify school-level staff who can carry out the consultant role is also important. Personnel training and support, competing programs and demands, and unexpected events can each preclude the ability of schools to roll out partnership intervention programs effectively; we now anticipate and address these to the greatest extent possible.

Create Continuities Across Home and School

CBC is an effective way to address a variety of problems related to academic outcomes through the improvement of academic skills. SCD research found that efforts to promote student academic and behavioral outcomes are stronger and long-lasting when implemented across home and school contexts. It behooves parents and teachers to be informed and aware of students' difficulties so that a problem can be averted as soon as there are signs of academic struggles. Continuity (i.e., intentional efforts to build consistent opportunities across home and school) has been shown to be important for the strength and stability of treatment effects (Barbarin, Downer, Odom, & Head, 2010; Crosnoe et al., 2010). The exchange of ideas and plan co-creation provides the tangible means for creating continuities across home and school. Unique and differential topographical and contextual features of classrooms and home settings suggest that certain strategies or their implementation may look different across home and school; what is most important is the transmission of consistent messages and expectations for behavior.

The structured problem-solving process that lies at the heart of CBC provides the opportunity for collaborative problem-solving in ways that promote continuity. A key aspect of collaboration is the ability to share and shape ideas and resources in ways that enhance the potential for addressing concerns across settings and that showcase the importance of collaboration. In practice, effective CBC consultants use strategies to introduce evidence-based options, brainstorm strategies, unify perspectives, and build consensus among participants, all in the spirit of collaboration. Research on interventions implemented in the context of CBC also suggests important activities for parents and teachers to support academic success. Thus, routinely integrated into CBC casework are plans to (a) establish structured learning opportunities across home and school, thereby creating continuities and cumulative supports to leverage generalized (cross-setting) success; (b) tangibly reinforce children's positive behaviors (including academic behaviors that are related to academic success, such as homework completion and ability to work independently) across home and school; and (c) create tools for ensuring two-way communication (such as home-school notes), wherein, on a regular and agreed-on schedule, parents and teachers communicate about students' goals, evidence of progress toward those goals, and messages about their shared work.

Focus on Structure and Relationships

To adequately and effectively translate the CBC and other family-school interventions requires us to determine its active ingredients (i.e., intervention

components that are responsible for its effects and both differentiate and predict positive outcomes; Abry, Hulleman, & Rimm-Kaufman, 2015; Sheridan, Rispoli, & Holmes, 2014). More than two decades of CBC research demonstrates convincingly the power of the parent–teacher relationship within the structured CBC intervention in producing positive student outcomes. This consistent and compelling finding is critical in suggesting at least one active ingredient in the CBC intervention that, when targeted, should indirectly produce positive intervention outcomes. Since the early CBC research (Sheridan et al., 1990) to more recent work (Sheridan et al., 2012; Sheridan et al., 2013), there is an obvious strengthening of our attention on relational features of the intervention (e.g., two-way communication) while also retaining the benefit of implementing the structural features of the intervention with fidelity (e.g., consistent home and classroom strategies). Our training packages (e.g., manuals, videos, case studies) attend to strategies for strengthening parent–teacher relationships as well as addressing student problems. Readers are again referred to Table 1, which contains an illustration of the structural and relational features of CBC.

Our research has borne out that without an intentional focus on positive and constructive home–school connections, the parent–teacher relationship for children with behavioral challenges deteriorates rapidly (Sheridan et al., 2012; Sheridan et al., 2013; Sheridan, Witte, Holmes, Wu et al., 2017). The most concrete way to work on strengthening relationships is to ensure two-way communication. Virtually all of our CBC intervention work now includes communication systems (e.g., home–school notes, texting) as a tangible element of cross-setting behavioral plans.

Focusing on relationships, there is a clear message that parents and teachers have unique expertise, each of which is essential to finding solutions to help students succeed. Parents have information about their child’s history, culture, and interests that is critical to broaden educators’ understandings; teachers have knowledge unique to the child in school-related contexts and of the classroom environment in which students must perform. As partners, teachers and parents together explore concerns, set goals, develop specific strategies, follow through on plans at home and school, determine the progress made by students, and agree on ways to continuously improve or maintain performance.

In sum, practices that focus on enhancing the relationship between home and school (i.e., the mesosystem) start with and act on the assumption that schools and families must work together to promote optimal experiences and opportunities for students, recognizing that a partnership will result in the best outcomes. This requires a substantial shift in how parents are approached by schools. When focused on relationships, parent and teacher interactions are characterized by two-way communication, collaborative

problem-solving, and genuine concern for co-constructing a plan that works for the student, family, and teacher.

Create Flexible Ways for Parents to Become and Stay Engaged

Years of conversations, observations, and troubleshooting has demonstrated the need for flexibility. The CBC process provides a structured framework for problem-solving, moving from systematically identifying and defining target behaviors to designing, implementing, and evaluating the effects of individualized treatment plans. Whereas fidelity to the process is of obvious importance, within the structure is room for individualization. “One size does not fit all,” a common tenet in our casework, is operationalized in several ways. Meetings are held at times and in places that are convenient for both teachers and parents, so flexibility in arranging teachers’ schedules is paramount. Behavioral plans developed and implemented for students are based on evidence-based interventions (e.g., differential reinforcement, skill building), but specific tactics used for their delivery are arranged on a case-by-case basis.

Research Needs to Advance Translation

The next step needed in CBC research is moving from efficacy to effectiveness trials, wherein we can test the effects of CBC on a larger scale. There is a need to evaluate the use of the training materials, manualized practice guides, implementation protocols, and intervention toolkits in authentic school and community contexts where research controls and external supports are not readily available.

To enhance uptake of family-school interventions like CBC in the face of complex school systems, it is necessary to determine the core, defining components (i.e., features that define an effective program and its implementation criteria; Blasé & Fixsen, 2013). A components analysis conducted in the context of a large-scale meta-analysis of family-school programs has begun to identify important structural and relational intervention features that, when present, produce positive effects (Kim, Sheridan, Beretvas, Smith, & Park, 2017). Specifically, structural features (i.e., home support for learning, parenting strategies) and relational features (i.e., communication, collaborative problem-solving) appear to be key components of effective family-school interventions. Much more work is needed in this area to clearly operationalize the critical elements of evidence-based family-school programs to distill those most important for broad dissemination and adoption.

There are likely other active ingredients and core components of CBC yet to be uncovered. The relative importance of each (e.g., whether it is

essential, desirable, or sufficient) can clarify for practice guidelines the intervention features required to maximize its potential for positive outcomes. Subsequent implementation analyses (e.g., dosage needed, quality of delivery) could help tailor CBC to specific parents, teachers, and students as well as the dynamics among them. Ultimately, this type of implementation data would yield important cost-benefit information and suggest potential adaptations to the intervention that may result in optimal effects at minimal cost in a manner that is responsive to the needs of students, teachers, and families.

To understand the scope and reach of an intervention's effects, it is necessary to uncover moderators or conditions under which we can expect more or differential levels of intervention effectiveness. For example, student characteristics such as age, grade, disability status, and behavioral severity may all affect the uptake of the partnership intervention. Family factors such as educational and cultural background, income status, and language may interact with the partnership approach and affect process and outcome. School and community variables such as resources, setting, size, and policies are also potential modifiers of the partnership intervention's effects. Revealing these will help us learn how to tailor intervention components.

Conclusion

Decades of family-school intervention research have produced a large and convincing body of work attesting to the efficacy of meaningful parental engagement in their children's developmental success. Many studies have now documented the strong relationship between constructive and intentional family-school practices and student success. Although our findings have added to the historic body of evidence demonstrating the importance of family-school interventions, complexities remain as to its translation to authentic school contexts devoid of researcher investment. A viable research agenda is one that seeks to address unique translational challenges by continually focusing on problems of practice while empirically determining the active ingredients and core components of family-school interventions, using methods that support continued translation into practice guidelines, and determining systemic conditions that align evidence-based practices with practice settings. Nuanced understandings of how and under what conditions family-school partnership interventions operate will be essential for further advancing implementation and translational research for this highly effective and fundamentally important intervention.

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