

Ester Cole Maria Kokai (Editors)

Consultation and Mental Health Interventions in School Settings

A Scientist - Practitioner's Guide





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Preface

Writing books is advisedly called a labor of love, and of course this volume is no different. This is the third volume published by Hogrefe, focusing on the utilization of the comprehensive and original consultation and intervention model in school psychology first conceptualized by E. Cole and J. Siegel (1990). The expanded second edition in 2003 was developed and published a few years after Dr. Siegel's untimely death. The model, which has been taught and used internationally to promote growth goals and inclusive services in education, has remained current over the years. This third book edited by E. Cole and M. Kokai, Consultation and Mental Health Interventions in School Settings: A Scientist-Practitioner's Guide, combines theoretical frameworks, evidence-based applied research, and approaches to consultation practices and training. It also includes practical resources and tools for hands-on applications. We have brought together American and Canadian academics and leaders in school psychology committed to the development of impactful and responsive changes in school-based mental health services.

In the spirit of J. R. R. Tolkien, who wrote "All we have to decide is what to do with the time that is given to us," we have pointed out opportunities and expectations for psychologists to broaden their competencies as related to their role concerning effective interventions in educational settings. The interlinking of primary, secondary, and tertiary prevention/intervention initiatives on behalf of students, families, and teachers promises to service more diverse populations in a more cost-effective manner.

This volume is published during a period of ever-growing social challenges, amplified by an international health pandemic. Crises, however, can provide learning opportunities to adapt, collaborate and promote equity, diversity, and inclusion. In this context, schools are hubs in the heart of communities and reflect the need for wide-ranging services by school psychologists as members of coordinated multidisciplinary teams.

Although inevitably education and mental health systems are subject to competing budgetary allocations in different jurisdictions, organizational reforms continue to require clear strategic planning, monitoring, ongoing consultation, and the implementation of corresponding services. As described in the essays in this volume, systematic training and collaborative team-building, as well as collective effort in performance, are paramount. This book offers school psychologists and other mental health practitioners ways of continually adapting their evolving knowledge and consultation skills in order to promote and improve the well-being of those they serve in the school milieu.

The hallmark of this book envisages advocacy for the utilization of comprehensive psychological services based on a model that is clear, easy to apply, and to follow. We hope that international readers in both academia and inservice settings will find it useful.

Ester Cole and Maria Kokai

Dedication

To my beloved David Cole and our grandsons Elliot, Nolan, Noah, Aaron. They teach us through learning about an inclusive world, and brighten life each day anew. – E. C.

To my parents for inspiring me with their dedication to teaching, and to my family for their support and inspiration. – M. K.

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Foreword

We are currently living through a challenging period. The challenges of this period are heavily impacting schools at every level, including their students, teachers, families, and communities. As this book goes to press, the COVID-19 pandemic is exploding, although vaccines to contain it are on the horizon, a sign of hope for the future. Also compelling is the racial reckoning happening across the world. The call for social justice has permeated psychology, including within school psychology, with increased attention to the evils of racism and inequality. Given the world we live in, never have mental health services in schools been more essential than now. During the pandemic and the societal unrest over racism, so many children have had their schooling and their lives interrupted, and many are traumatized, calling for attention now and in the future. The need for school psychology services, at all levels, will increase exponentially.

When Ester Cole invited me to write the foreword for this book, I readily agreed, because I knew she and her colleagues were addressing many of the issues we will be facing for decades to come, as well as providing a handbook of practices that will support schools in delivering positive mental health outcomes. Earlier, she and Judith Wiener had written a chapter for the book I coedited with Chryse Hatzichristou (*The International Handbook of Consultation in Educational Settings*, 2017). Their purpose in that chapter was to integrate direct and indirect service provision in the service of mental health concerns in multicultural school systems. Although their work was in the Canadian educational context, the implications for use in other countries was clear.

The concept of a continuum of direct and indirect services is especially critical at this time. As has been documented, many school psychologists find it difficult to work as a consultant; in addition to their overwhelming assessment role, their lack of consultation training, and their focus on the deficits in individual students rather than an ecological perspective hamper the use of consultation in their practice. In the process of developing consultation-based services in schools, I found practitioners for whom it was an either-or struggle. One school psychologist insisted on continuing to test the same students for whom he was providing consultation services to the teacher, exhausting himself in the process. The underlying beliefs about the etiology of student concerns as within the student often preclude examining the larger context of a student's difficulties, and prevention is too frequently not a high priority. A crisis such as is now emerging due to the pandemic and the calls for social justice provide a new context for rethinking our services as school psychologists.

The poet Shel Silverstein wrote a delightful children's story *The Missing Piece* about a little creature with a circular shape that is missing a piece of itself, who sets out to find its missing piece. While direct services continue too often to be how school psychologists

Foreword

spend the major portion of their time, increasingly school psychologists recognize that there is a missing piece, that consultation would contribute at multiple levels of their work. Although consultation is considered a "foundational skill" in the school psychology literature, integrating consultation into a broader mental wellness/mental health practice model has been difficult to achieve. Ester Cole and Maria Kokai, the editors of this book, provide a conceptual base that includes the missing piece, pulling together the complete circle of practice with consultation embedded into a mental health model. Thus, an impressive and currently highly relevant goal of this book is to demonstrate how the foundational skill of consultation enhances the school psychologist' broader mental health role.

In the opening chapter of this book, Drs. Cole and Kokai make a compelling case for why this long overdue integration needs to be in place, and demonstrate how combining the tiers of primary, secondary, and tertiary intervention with a continuum of direct and indirect service delivery might work. Later chapters in their book provide a roadmap for how school psychologists could address a variety of individual and systems-level concerns and issues to enhance mental health, based on the concepts provided by Ester Cole and Maria Kokai. The first section, titled *Addressing Student Needs*, brings a multitier perspective to specific student concerns. Even though these chapters focus on diagnostic categories, the authors' perspective is on the larger contexts, the ecology of the student in the school, family, and community. They recognize systems in which students live, the role of multiple stakeholders, and the need to work with educators in a consultative role. The authors in this book bring to the task an inclusive and broad perspective. *School Level Interventions*, the second section, addresses issues at a more systems level, examining how to think about and intervene in some of the larger concerns with which our schools are now coping, such as working with immigrants and refugees.

The chapters in this book will prove useful as we face the consequences of the pandemic and social justice movement. Our entire concept of how schools operate is being challenged. The need for a mental health systems perspective has never been greater. Whenever you have a severe disruption, it is an opportunity for change. School psychology will not be whole until indirect and direct services are effectively integrated into a more ecological model that is embedded in the larger context in which school operate. In this unique time, this book contributes multiple ways that we can begin to achieve that goal.

Sylvia Rosenfield, PhD Professor Emerita University of Maryland College Park, MD

Reference

Cole, E., & Wiener, J. (2017). Revisiting Canadian consultation models in school psychology: Just the same, only different. In C. Hatzichristou & S. Rosenfield (Eds.), *The international handbook of consultation in educational settings* (pp. 35–53). Routledge. https://doi.org/10.4324/9781315795188-3

1 A Comprehensive Model for Consultation and Intervention in School Settings

Maria Kokai and Ester Cole

The complexities of emerging issues and global modes of communication underscore the needs of multicultural societies to utilize psychological knowledge in order to impact innovative and cost-effective services. In education settings, calls for reforms, demands for increased accountability, and the growing acknowledgment of the relationship between learning, mental health, and socialization continue to pose challenges for busy practitioners and for those who provide training for future school psychologists. Competing service priorities in diverse communities with scarce resources further impact the field.

Good mental health is important for success in school and in life. It "is not simply the absence of mental illness but also encompasses social, emotional, and behavioral health and the ability to cope with life's challenges. Left unmet, mental health problems are linked to costly negative outcomes such as academic and behavior problems, dropping out, and delinquency" (National Association of School Psychologists [NASP, 2016, p. 1]). A significant amount of research indicates a positive relationship between mental health and academic achievement (e.g., Bradshaw et al., 2010; Jones et al., 2015; Valdez et al., 2011). Furthermore, Datu and King (2018) indicate that there is evidence pointing to reciprocal effects between mental health and academic achievement, i.e., mental health predicting future academic achievement, and academic achievement predicting future mental health. At the same time, data from a range of different sources show an increase in the prevalence rate of mental health problems in children and youth (e.g., Comeau et al., 2019; Haidt & Twenge, 2019; Mental Health Commission of Canada, 2015; Mercado et al., 2017; Twenge et al., 2019).

Schools are seen as ideal settings through which children and youth can receive mental health services, including mental health promotion, prevention, and intervention (Cole, 1992; Lean & Colucci, 2010, 2013; NASP, 2016; National Center for Mental Health Promotion and Youth Violence Prevention, 2009; Pan-Canadian Joint Consortium for School Health, 2013; World Health Organization, 2005). Research studies provide ample evidence that fostering positive mental health in students enhances academic growth; in addition, a number of programs have been shown to strengthen academic competencies through social and emotional learning (e.g., Brackett et al., 2012; McCormick et al., 2015). For example, it has been found that social–emotional learning (SEL) programs increase self-confidence, positive behaviors, school engagement, and academic performance in

Table 1.1. A model for psychological services in schools

Recipients of service	Goals of service			
	Primary prevention/ intervention	Secondary prevention	Tertiary prevention/ intervention	
	Identify resources, provide and analyze evidence-based information; program for all students	Consult about effective programs for students "at risk"	Support for students whose problems significantly interfere with their adaptation to school	
The organization				
School system or school				
Provide information, consult, advise				
School staff				
Teachers or ad- ministrators				
Provide information, consult, advise				
Students/parents (Mediated)				
Provide information, consult, advise				
Students/parents (Direct)				
Group and individual counseling				
Assessment				
Consultation				

provided directly, they may also be carried out by others such as educators, with consultation from psychologists. The model presented in Table 1.1 includes 12 cells. Its organizational structure allows for setting goals and specifies services; activities by psychologists that incorporate both traditional roles such as assessment and counseling; as well as more indirect and systems-oriented interventions. This book describes examples of divergent services responsive to identified local needs, made possible by the multidisciplinary collaborations suggested by the model.

2 Autism Spectrum Disorder

Carolyn Lennox and Jessica Brian

Introduction

Children with autism spectrum disorder (ASD) often present with pervasive and complex behavioral, mental health, and learning needs. These challenges require direct and consultative services from school psychologists and other support professionals (e.g., speechlanguage pathologists, occupational therapists, social workers, and board-certified behavior analysts). School services that are interdisciplinary and address multiple settings (school, home, and community) can create networks of support for these students (Fallon et al., 2016). With current ASD prevalence estimates of approximately 1–1.5% of the student population (Ofner et al., 2018), there is a high demand for consultation services. This demand has continued to grow, as many school boards/districts move to an inclusion model for children with ASD (Crossland & Dunlap, 2012; Montgomery & McCrimmon, 2017). Many classroom teachers may not have had a great deal of experience with or knowledge of evidence-based practice with students who have ASD (Anderson et al., 2018). Given the wide range of challenges that may be associated with educating children with ASD (i.e., varying academic, social, emotional, and behavioral needs) it is critical that this gap in teacher training be addressed (Anderson et al., 2018).

A useful conceptual framework for consultation in schools addresses each of primary, secondary, and tertiary prevention and intervention (Cole & Siegel, 1990, 2003; Cole & Wiener, 2017). A core feature of this model is to collectively assess, plan, and intervene based on the complex needs of all stakeholders at home, school, and in the larger educational system. The conceptual model will be used to discuss guided consultative services within the school board/district for students with ASD.

The Nature of ASD

ASD is best understood as a neurodevelopmental condition that emerges early in life and affects development and adaptive functioning across the lifespan (Lai et al., 2020). Current conceptualizations of ASD include recognition of both associated disabilities and differences (encompassing varying strengths and challenges). The core characteristics of ASD

5 Depression – Addressing Students' Needs

Samanta Boddapati and Mary Fristad

Depressive disorders and suicide are increasing among children and adolescents (Comeau et al., 2019; Ruch et al., 2019; Twenge et al., 2019). Recent 12-month prevalence studies of depressive disorders estimate occurrence in 7-8% of 13-18 year-olds and approximately 2-3% among those under age 13 (Avenevoli et al., 2015; Ghandour et al., 2019), with lifetime prevalence estimates of 11% for adolescents aged 13-18 (Avenevoli et al., 2015). Depressive disorders in youth are linked to greater impairments in social functioning (e.g., peer and adult relationships), academic performance, and substance use (Jaycox et al., 2009; Luk et al., 2010). In addition, depressive disorders are more likely to increase the risk for suicidality and nonsuicidal self-injurious behaviors (Avenevoli et al., 2015; Knorr et al., 2016). Suicide is the second leading cause of death in the US for 10- to 19-year-old youth (Curtin & Heron, 2019; Ruch et al., 2019). These findings underscore the need for an evidence-based, multitiered system of supports (MTSS) in schools that spans from prevention to treatment, as well as fosters opportunities for school psychologists to integrate and collaborate with other mental health providers to comprehensively address depressive disorders in school-aged youth (American Psychological Association, 2019; National Association of School Psychologists, 2016).

Depressive disorders are characterized by a set of symptoms that may include persistent sad or irritable mood; loss of interest (anhedonia); feelings of worthlessness or guilt; changes in sleep, appetite, and/or psychomotor activity; fatigue; impaired concentration; and suicidal or morbid ideation (American Psychiatric Association, 2013). These symptoms may manifest as developmentally inappropriate tantrums, grumpy, or sullen mood. In a school setting, impaired concentration is particularly notable and often, along with impaired mood, the reason for referral.

Notably, studies demonstrate gender differences between boys and girls during child-hood (American Psychological Association, 2019). However, starting in adolescence and continuing into adulthood, suicide rates for females rise precipitously, at a 1.5- to 4-fold higher rate (American Psychiatric Association, 2013; Avenevoli et al., 2015). While females are more likely to attempt suicide, males are more likely to die by suicide. However, recent suicide rates from Wide-ranging Online Data for Epidemiologic Research records from 1975 to 2016 indicated not only a narrowing in the gap of death by suicide between males and females but also an increase in the use of more lethal means by females (Ruch et al., 2019).

Table 6.1. A model for psychological service in schools related to anger and self-regulation

Recipients of service	Primary prevention/intervention: program for all students	Secondary prevention/intervention: program for students "at risk"	Tertiary prevention/intervention: program for students whose problems significantly interfere with their adaptation to school
The organization	Programs and policies to promote self-awareness, self-management, responsible decision-making, social awareness, and relationship skills Effective screening to identify students who need more than Tier 1 supports	Recognition of the need for more intensive supports to address the behavioral health of particular students (proactive rather than a reactive model) Provision of appropriate resources to allow for higher levels of service delivery to students with emerging mental health care needs Clear organizational structures that provide teachers with direction about how to obtain additional services for students	Recognition of the need for more intensive supports (possibly through community collaboration) to support the behavioral needs of particular students Commitment to training schoolbased mental health professionals to support students with significant mental health concerns and their families
School staff	Knowledge of SEL and how to integrate strategies into daily classroom life Skills in de-escalating student anger Skills in identifying the antecedents and consequences of student anger to promote effective problem-solving	Teacher knowledge of the varied roles of school-based mental health support staff at the school and what each professional can do to assist with students of concern Teacher skills in progress monitoring interventions	School-based mental health provider knowledge of how to intervene with students with significant mental health concerns, including an understanding of the complexity of anger/aggression and how to engage in individual problem-solving to get to the root of concerns

Table 7.2 for an outline of a sample session). Using such a strengths-based approach is essential to build resilience and capacity in students through teaching a variety of mental health and well-being skills. Furthermore, these sessions will also build capacity for students to be able to respond appropriately and supportively to peers' disclosure of unhealthy coping. As detailed below, adapting existing social emotional learning curricula for use at this level is ideal.

Table 7.2. Primary prevention: sample healthy coping workshop outline

Part 1:	Part 2:	Part 3:
Psychoeducation	Skills-building	Support and help-seeking
Provide information about stress and coping, both generally and for students specifically • What is stress? What is coping? • What are the stressors and difficulties students face? Contrast healthy and unhealthy coping (contextualize NSSI as one of other types of unhealthy coping) • What are some common examples of healthy coping (e.g., exercise, listening to music, meditation, etc.)? • What are some common examples of unhealthy coping (e.g., anger outbursts, alcohol/substance use, NSSI, avoidance, oversleeping, etc.)?	Teach strategies to enhance healthier coping Build your "toolbox" of strategies and skills to manage stress • Examples: thought challenge (cognitive behavioral therapy), calming breath, progressive muscle relaxation, mindfulness exercises, self-care Resource sharing • Provide resources for further practice of stress management strategies	Provide resources/support within and outside the school on what to do or where to go if students or their friends are engaging in unhealthy coping Build capacity around help-seeking How to reach out for support Resource sharing Where can students go in school, community, on- line?

Final resource handout provision

• Provide both online and in-person resources for each section above as handouts

NSSI = nonsuicidal self-injury.

Over the past few decades, there has been a growing recognition of the need for schools to incorporate social and emotional learning (SEL) within the curriculum to increase students' abilities to understand and regulate emotions, improve social skills, and promote well-being (e.g., Collaborative for Academic, Social, and Emotional Learning, 2013).

One example of an SEL universal school program that is particularly useful when seeking to prevent NSSI is the Dialectical Behavior Therapy Skills in Schools: Skills Training for Emotional Problem Solving for Adolescents (DBT STEPS-A; Mazza et al., 2016). The DBT

Assessment

If we accept the premise that *all children*, and not just children with disabilities, have the right to a FAPE, the logical conclusion is that schools should serve the needs of children who are gifted and talented just as they serve the needs of students with disabilities. In other words, just as students with disabilities sometimes need academic supports to maximize their potential, children who are gifted and talented sometimes need enrichment or acceleration to maximize their potential, including providing an individualized education plan, if necessary. Some US states and Canadian provinces (e.g., Pennsylvania; Ontario) include gifted education under special education, acknowledging that the common curriculum does not meet their educational needs, although many do not. But how do we determine what an appropriate education is? The answer to this question will depend on the domain in which the student is talented and the student's stage on the talent development trajectory, both of which require appropriate assessment. See Box 9.1 for some general considerations for assessment adapted from Worrell and Erwin (2011).

Box 9.1. Considerations for identifying and serving gifted and talented students

- 1. Is the goal of the gifted program in your school or district enrichment or acceleration, and on what basis was this decision made?
- 2. What domains (e.g., mathematics, language arts, science, music) is the gifted program targeting?
- 3. Is general intelligence being measured?
- 4. What domain-specific skills are important to measure?
- 5. Are the individuals being identified likely to have well-developed skills in the domain or do preskills need to be assessed?
- 6. Is the level of exposure to the domain likely to vary among students being assessed on the basis of SES or first language? If yes, what changes need to be made to your identification protocol?
- 7. Are the data used for identification being collected from multiple sources?
- 8. Do identification data include information on psychosocial factors such as interests, motivation, and self-regulation?
- 9. Are data from raters (e.g., teachers, parents) low-inference or behavioral in nature and collected using instruments that are less likely to be susceptible to halo effects?
- 10. Are scores on the instruments being used for identification have evidence of reliability and is there evidence in support of the validity of the inferences being made?
- 11. Is universal screening an option and are local norms available?
- 12. Who is providing the instruction and are they certified for teaching gifted students?
- 13. Is the curriculum in keeping with the curriculum standards proposed by the National Association for Gifted Children (NAGC) and the Council for Exceptional Children (CEC)?
- 14. Will the curriculum allow students from all backgrounds to see the contributions of individuals like themselves?
- 15. Will the program be sensitive to perceived belonging on the part of students from traditionally underrepresented groups?
- 16. How will the effectiveness of the program be evaluated?

Adapted from Worrell and Erwin (2011, p. 321)

Peer Commentaries

There has never been a more critical time for school-based mental health services, and this new edited volume will become a seminal contribution for those engaged in this work. It includes the critical roles of consultation, prevention, and promoting resilience in diverse populations – recognition that intervening during childhood, within schools and across sectors, can enhance equity and promote lifelong health and wellbeing. Leading experts discuss not only common conditions presenting in childhood and adolescence, but also traumatic experiences that can occur in school settings (e.g., bullying, mass shooting). Bravo to all who have contributed to this important new book!

Mary Ann McCabe, PhD, ABPP, Associate Clinical Professor of Pediatrics, George Washington University School of Medicine, Washington, DC, USA; Chair, Interdivisional Task Force for Child and Adolescent Mental Health, American Psychological Association (APA)

If you are seeking a comprehensive yet pragmatic text to expand your school psychology consultation and intervention competencies, look no further. Cole and Kokai offer an essential resource for trainees and seasoned school psychologists alike, masterfully weaving together chapters illustrating best practices for addressing a wide range of critical behavioral health, learning, and environmental challenges experienced by today's students. Experts have packed this edited volume with evidence-based and actionable strategies for effectively engaging in tiered school psychology prevention and intervention efforts. As integral members of multidisciplinary teams, school psychologists have much to contribute to ensuring that students receive the right level of service and that their educators and parents participate in the intervention process at the right time. Cole and Kokai's book will increase your skills in matching student needs to the appropriate level of care while enhancing your effectiveness as both a collaborator and a clinician.

Barbara Ward-Zimmerman, PhD, NCSP, Consultant, Child Health and Development Institute of CT, University of Connecticut; Board of Professional Affairs, APA; Chair, Child and Family Task Force, Connecticut Psychological Association; Chair, Integrated Primary Care Interest Group, Society for Health Psychology: Independent Practice, Storrs, CT, USA

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When I was growing up in the 1950s, the schools I attended were solely focused on academics. Children's report cards did include a grade for "behavior," but schools did not provide professional help to children with developmental, emotional, or social issues. During the COVID-19 pandemic, when most children do not benefit from in-person schooling, the public worry is primarily about delays in academic learning, access to meals for those who are eligible, and increased exposure to abuse in some families. However, as the book edited by Cole and Kokai on consultation and mental health intervention in school settings shows, in normal times, schools that are well resourced, can and do provide for a lot more than academic instruction, nutrition, or reduced exposure to family violence. Schools can be nurturing child rearing environments along multiple dimensions. This is important because children's development is shaped, for better or for worse, by their environmental contexts, including the family, school, community, and culture. Likewise, children's ability to cope effectively with life's challenges depends on supports available in these contexts. Therefore, Cole and Kokai's book, which specifies the details of how schools can optimally support the well-being of their students, is important. Schools that follow its guidance are expected to have a meaningful positive impact on their students' life trajectory.

Sarah L. Friedman, PhD, Research Professor, Department of Psychological and Brain Sciences, George Washington University, Washington, DC, USA

Cole and Kokai have assembled a wise and knowledgeable cadre of experts to guide our current and next generations, respectively, of school psychologists and related service colleagues in the application of consultation services and supports relative to an assortment of psychoeducational (e.g., dyslexia, depression, anger, and autism) and situational (e.g., bullying, mass shootings, cultural diversity, and student immigration) school realities. Each chapter addresses a prevention, strategic intervention, and intensive need continuum of practice and intervention, while also focusing on consultation as an ecological, outcome-driven, and multidisciplinary team effort.

Howie Knoff, PhD, President, Project ACHIEVE Educational Solutions, Little Rock, AR, USA; Past President, National Association of School Psychologists

The scientist practitioner approach is fundamental for promoting equity in school-based mental health services. This book is a valuable contribution, given the scant literature on providing sound recommendations on prevention, intervention, and assessment across the breadth of child and adolescent referrals. This book is invaluable as it provides clinicians and educators with critical tools and strategies to support the well-being of all youth.

Tara C. Raines, PhD, NCSP, Associate Professor, Director of Clinical Training, School Psychology, Morgridge College of Education, University of Denver, CO, USA

This edited book by distinguished authors presents a contemporary and progressive multidisciplinary framework for school psychological services to address the increasing needs of children and adolescents. Each chapter reflects the expanded consultation-collaboration model that leads into evidence-based team intervention and prevention. This book presents a clear and forward-looking description of best practices in school psychology for promoting the well-being of our children. All school psychologists and allied professionals should read this book from cover to cover.

Donald H. Saklofske, PhD, Professor, Department of Psychology, University of Western Ontario, London, ON, Canada

It is my great pleasure to provide a strong endorsement of the book Consultation and Mental Health Interventions in School Settings: A Scientist - Practitioner's Guide edited by Cole and Kokai. This book serves as a very accessible resource for mental health professionals working in a wide array of school contexts. The information is also a useful resource for mental health professionals working with children, youth, and their families in nonschool settings as they collaborate with schools to support children, youth, and their families. As whole the book covers a wide range of topics and areas of knowledge critical for mental health professionals working with children and youth in and out of the school setting. As an edited book the chapters also stand alone as resources on the individual topics addressed in the book. Its greatest strength for me is a strong focus on considering the system and context of the person when working to provide strong mental health support in school settings across all the topics addressed. Another valuable feature of the book is the strong focus on practice coupled with the empirical support for breadth of topics addressed throughout the book. It is truly a book for the scientist-practitioner. As such the book is great for graduate students in training, field supervisors looking for resources in supervising their students, as well as mental health professionals in the field looking to have a solid resource on their shelf to support them in their daily work.

Laurie Ford, PhD, Program Director, Training, School and Applied Child Psychology; Director, Early Childhood Education Programs; Associate Professor, Department of Educational & Counselling Psychology, and Special Education, Faculty of Education, University of British Columbia, Vancouver, BC, Canada

Reading the table of contents of this book, I was waiting with suspense for the whole text. There are many books on school psychology, so why is it a remarkable work among them? First of all, because it is one of the rare volumes giving the whole spectrum of the most important aspects of school psychology. This book has three outstanding virtues:

- Its structure is clear, logical, and consistent: The chapters always begin with the latest scientific results relevant to the actual topic, followed by knowledge relevant to schools, practical advice and methods for teachers and psychologists, and very useful case studies.
- The proportion of the chapters are well balanced, which could even be a hidden message: The topics are equally important for healthy school life.

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• There are some conceptional characteristics of this volume representing the modern approach of this field: priority of prevention, importance of cooperation with teachers, parents and other helper professions, and the breadth of topics concerning school life – not only problems but also potential opportunities such as social-emotional learning, as well as everything from learning problems to social behavior to the problems of minority pupils.

This is a really useful manual for practitioners, and at the same time a coursebook for students specializing in school psychology.

Katalin N. Kollár, PhD, Professor Honorary, University Lorand Eotvos, Budapest, Hungary