



Canadian Association of School Psychologists
L'Association canadienne des psychologues scolaires

Canadian Psychological Association

Société canadienne de psychologie

PSYCHOLOGISTS IN EDUCATION / PSYCHOLOGUES EN EDUCATION

JOINT NEWSLETTER

Winter Issue 2013

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Editorial Board Members

Troy Janzen, Ph.D.,
Editor,

Donald Saklofske,
Ph.D., CPA
Psychologists in
Education Past Chair &
CASP Vice President

Message from the Chair, Words from the President

Could be the effect of the extreme winter weather we have endured this year, but I find a fair amount of déjà vu in my remarks to you. Most of this message will be a follow-up on the last one. The planning for the 2013 CPA Convention (in Québec City!) continues. Our section has accepted over 80 submissions, mostly posters but also a mix of symposia, workshops, and conversation sessions. Alan Leschied of Western University will be our section keynote speaker. The title of his talk is *School Based Mental Health: Such a Great Idea, Why Didn't I Think of That!* I'm looking forward to this conference.

The Canadian Journal of School Psychology [CJSP] continues to be the crowning achievement of CASP. Be on the lookout for the March 2013 issue. The topic is school-based mental health strategies. The guest editors are Alan Leschied, Gord Flett, and Don Saklofske.

As to my continuing transition to Chair of the ED section, I still intend to follow-up on my few words at the last section annual meeting: Three committees will be struck as follows:

- 1) Revision and updating of the Section By-laws;
- 2) Student awards, including CPA convention travel support;
- 3) Use of the proceeds from the CANSTART project.

Please regard this as a call for nominations – including self-nominations.

The CASP membership drive, spearheaded by Juanita Mureika, is underway. Read the sales pitch, and then fill out the appended membership form.

Congratulations are in order to Dawn Hanson on acclamation to a second term on the CPA Board. If you haven't done it, **vote** for **Donald H. Saklofske** to join Dawn on the CPA Board of Directors.

**Joseph Snyder, Ph.D.,
CASP President &
current Chair CPA
Psychologists in ED**

**Juanita Mureika,
L.Psych., CASP
Membership
Coordinator & Chair-
elect CPA
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And that's not all, folks: Our amazing newsletter continues getting better and better, thanks to Troy!

Joseph Snyder
Chair, Psychologists in Education
President of CASP

Message from the Editor

This issue will focus on several feature articles that explore the role of the school psychologist. First we have an article from Dr. Janine Montgomery from the University of Manitoba exploring the role of the school psychologist in addressing mental health in schools. The focus is on the school psychologists' role in prevention and social emotional learning. Second is a reprint of an article that was originally published by the Psychologists Association of Alberta. This article explores the role of school psychologists and is cleverly entitled "More than WISC-Jockeys." This article by Coranne Johnson and Jacqueline Pei was written in response to Alberta Education's adoption of an Inclusive Education funding model.

We also are pleased to announce the launch of a new piece to our newsletter! The piece is entitled "Snapshots in Educational Psychology Research." This piece will outline recently completed research or research in progress from researchers from Canadian Universities. This was spearheaded by one of our graduate student editors Ashley Vesely. Thanks Ashley! This section is our new feature as part of the Student's Voice. We welcome any feedback on this addition.

Also, all school psychologists will want to be aware of some recent research exploring the factor structure of the WISC-IV and WAIS-IV. Check out the News and Notes section to see where you can find more information.

We hope you enjoy this edition of the newsletter!

Troy Janzen, Ph.D., R. Psych. (AB),
CPA/CASP Joint Newsletter Editor
troy.janzen@ualberta.ca

Feature Article

What can we do about mental health in schools?

by J.M. Montgomery PhD, Associate Professor, University of Manitoba

The Canadian Mental Health Association suggests that 1 in 5 Canadians will

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have mental health problems in their lifetime (Health Canada, 2002); 70% of those cases will begin in childhood (Government of Canada, 2006). While establishing actual prevalence rates is a difficult endeavor (see Simpson et al,

employing preventative mental health strategies early is critical for the health of our students.

2012), the impact on Canadians is undeniable. A synthesis of direct and indirect costs of mental health issues in Canada suggests the cost for Canadians is approximately **14.4 billion dollars a year** (see Stephens & Joubert, 2001). Given the impact on the population as a whole and the knowledge that mental health concerns often begin while kids are in schools, employing preventative mental health strategies early is critical for the health of our students.

As a discipline, school psychology recognizes the impact of mental health on problems like school violence. However, recent Canadian estimates suggest that school psychologists spend only 3.4% of their time working with children who have identified behavioral issues and emotional problems, while 70% stated that they would like to spend increased time working with these students (Jordan, et al, 2009). Moreover, the same study identified that approximately 70% of school psychologists would like to focus more on primary prevention “promoting well-being ...for all students” (p. 256). This suggests a **disconnect between what we know we should spend more time doing, and what we are actually doing in practice.**

Even though Canadian school psychologists recognize the importance of the preventative services they can provide and contribute to, there appear to be

The major issues that likely keep practitioners from being more involved in ‘prevention’ and fostering optimal mental health outcomes in students are related to (1) policy, (2) funding, and (3) time allotments/constraints.

factors impeding this. The major issues that likely keep practitioners from being more involved in ‘prevention’ and fostering optimal mental health outcomes in students are related to (1) policy, (2) funding, and (3) time allotments/constraints. In most provinces, policies mandate the identification of students with ‘exceptionalities.’ Funding structure typically follows policy,

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requiring specific forms of assessment to identify exceptional learners and thereby activate funding. Even in the era of RTI, standardized assessment often provides essential information to school teams that facilitates educational planning, placement and staffing options, diagnostic implications, and links to the respective research bases that inform intervention.

Some might suggest that the answer is to shift our activities from assessment (and testing) to more proactive and consultative roles. In an ideal world, where we have already prevented the development of ‘disorder’, this would be a tenable solution. However, in the current context time constraints would mean moving away from assessment, which would then leave students requiring these services without appropriate identification and programming. This could create another gap in our already tenuous mental health strategy in schools. Moreover, shifting our activities to those already performed by others in school systems (e.g. co-teaching interventions in classrooms, conducting one-on-one or small group interventions, etc.) will only exacerbate the problem we have with waiting lists, and deprive schools of the specialized services ONLY school psychologists are trained to do. Until such time as the policy, funding and time allocation issues are resolved, this situation is unlikely to improve.

So, what can we do to improve the mental health situation for Canadian students?

Prevention strategies utilize research-based approaches to assessing mental health. **Large-scale early screening with subsequent intervention** may help to triage referrals and as a bonus, assist in the design of appropriate interventions. However, identification of potential mental health problems among apparently ‘healthy’ students is often a very unpopular practice and, in my experience, I find that school divisions are often concerned that using mental health screens may label children. As such, they avoid this and instead are forced to wait for more symptoms to develop. As trained school psychologists, we know the logic here is faulty. Regardless, **we have some education to do here.**

Social emotional learning (SEL) approaches offer us preliminary evidence (see Jones & Bouffard, 2012; Weissberg & O’Brien, 2004) to improving the situation, and provide various approaches to addressing mental health through building student (and staff) awareness of emotions and targeting skill development of socialization. Social emotional learning teaches self-awareness, social awareness, self-management, relationship skills, and responsible decision-making –all important development goals that may act to buffer the emotional problems many of our student’s experience. I propose that some innovative and emerging approaches (see below) fit within SEL, and though research is limited, the potential for these approaches is not.

Are there promising approaches that have a high likelihood of improving mental health in schools?

Positive psychology offers a number of strategies for improving mental health and well-being. Although the research into these approaches (fitting within this

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construct) is in its infancy, there are a number of promising intervention frameworks to consider. **Researchers need to take on systematic investigations of these constructs, and that schools piloting such approaches can conduct applied research to understand how our particular populations are doing with these innovative strategies.**

- The study of **happiness** (see authentichappiness.org) in particular offers a vehicle for promoting positive outcomes. For example, if students can begin to identify their strengths, identify activities that make them happy, and begin to find ways they can use their skills to make others happy, they are more likely to feel like and be contributing members of communities.
- The study of **resilience** has also been instrumental in informing how to intervene in schools. By understanding kids who do well in spite of risk, resilience researchers offer a number of implications that can help us understand how to build protective factors for kids at risk.
- **Emotional intelligence** offers some opportunities to improve mental health outcomes through direct instruction about how to understand and interact with emotional information. While some preliminary evidence demonstrates this can be taught and is effective (see Bar-On, 2003), again, research in

I'd argue that school psychologists are not necessarily the best people to directly implement SEL programs, even with our training as mental health specialists. Instead, our time would be better spent advocating for these initiatives, offering PD to school staff (and parents) to give them the tools they need to implement proactive approaches.

children is limited.

- **Mindfulness** training also offers a promising approach to fostering happier, healthier students. While this research is in its infancy in kids, studies with adults have shown that this is an incredibly powerful tool, particularly for depression and anxiety, but there is also emerging research indicating it's usefulness in other clinical conditions (see Burke, 2009).

Giving children tools to cope with emotions via SEL programs will make positive adaptation even more likely (as a bonus, SEL programs have been found to improve academic outcomes and build key adaptive strategies; see Jones & Bouffard, 2012). Training for school staff is a key ingredient for success in SEL and **school psychologists can play an important role as**

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trainers and supporters of these initiatives. Helping staff (and parents) learn how to provide appropriate messages to students about emotions is one central feature of SEL for promoting positive wellbeing and healthy responses.

What is the role of the school psychologist in SEL and mental health in schools?

I'd argue that school psychologists are not necessarily the best people to directly implement SEL programs, even with our training as mental health specialists. Instead, our time would be better spent advocating for these initiatives, offering PD to school staff (and parents) to give them the tools they need to implement proactive approaches. In this way, the people who the children interact with most would be the ones implementing these strategies, and consistently reinforcing the content through their everyday interactions, which is more likely to promote generalization. Eventually, with good prevention, we may indeed be able to 'shift our activities' to more consultative/preventative roles, but we are not there yet, and our specialized services are in high demand.

Canadian school psychologists have identified preventative mental health activities that are shown to be effective are a priority for their practice (see Jordan et al., 2009). Thus, it seems that a major barrier to effective mental health focus in schools is somewhat external to our profession. It is likely that the way school systems are organized plays a role in the lack of 'actualization' we achieve as trained mental health professionals. Consequently, perhaps the answer lies in **advocacy within school systems** (with decision makers in particular), and **dissemination of knowledge** and **fostering skill building for our frontline school workers**. School psychologists can bring their knowledge of relevant literature (or better yet, research based web resources that are easy to digest) that supports initiatives to improve happiness and well-being to the attention of school officials. Professional organizations can play an advocacy role and establish these goals as priorities. School psychologists can **play pivotal roles in identifying research-based programs and gathering data in**

Ultimately, there are no easy answers to address the alarming state of mental health in our schools, but just because it's not easy doesn't mean it can't be done.

applied settings. I for one would be eager to see a position statement developed by school-based mental health professionals on promoting mental health, and ultimately well-being in schools.

Ultimately, there are no easy answers to address the alarming state of mental health in our schools, but just because it's not easy doesn't mean it can't be

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done. Fortunately for school psychology, we have a highly trained mass of individuals who are committed to improving the situation for Canadian students, and consequently, it really is up to us and within our potential to make a real difference on student well-being.

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School Psychologists: More than WISC-Jockeys

by R. Coranne Johnson, PhD, R. Psych., RCJ Psycho-Educational Services & Jacqueline Pei, PhD, R. Psych., University of Alberta

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Implications of Inclusive Education

Over the past five years, the Alberta government has undertaken a process of restructuring the delivery of special education supports and

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services. This process was initiated after the dismaying findings from the government's 2007 audit of severe disabilities files. The audit discovered that 44% of the 16,129 severe disability files did not contain all the required documentation. Furthermore, the government realised that there were wide variations in the interpretation and implementation of special education coding criteria; as a result, the province acknowledged that reform was needed (Alberta Education, n.d.). Consequently, Alberta Education began restructuring their special education framework with *Setting the Direction in Special Education*, a process that evolved into a broader examination of education - *Setting the Direction*, followed by the implementation phase termed *Action on Inclusion* that eventually became *Inclusive Education* – the creation of one inclusive system of education. Early in this process, the Psychologists' Association of Alberta (PAA) developed the position paper – **The Pivotal Role of Alberta School Psychology Services: A Response to Alberta Education's *Setting the Direction*** (2010) in which they advocated for a broader role for School Psychologists in Alberta Schools. Specifically, this paper outlined a role that would enable School Psychologists to provide services congruent with their training in child and adolescent development; principles of learning, behaviour and individual differences; social/emotional/behavioural and academic interventions; as well as assessment and program planning (CPA, 2007). As this Inclusive Education system is implemented, the resulting changes in practice will require "people to think and work differently" (Alberta Education, 2011). This means that School Psychologists will have an opportunity to expand their role and provide comprehensive services to schools. This shift in practice is congruent with school psychology research that has advocated for a reduction in formalized assessment and an increase in the time spent on problem-solving interventions, consultation and research (Harris and Joy, 2010; Hosp and Reschly, 2002).

Providing a Broad Spectrum of School Psychology Services

In their move towards an Inclusive Education system, Alberta Education has eliminated the need for formalized assessments every three years, and has shifted the focus from *assessment for diagnosis* to *assessment for instruction* (Alberta Education, 2012). This should free up the time for School Psychologists to expand their services beyond WISCing and provide students, families and educators with additional meaningful supports.

What does this look like? Through the *Guidelines for Professional Practice for School Psychologists* (2007), the Canadian Psychological Association (CPA) has described this evolution in school psychology services. The guidelines outline school psychology services across five domains of intervention.

1. Student-Focused Direct Intervention – This is the domain that most School Psychologists have traditionally worked in: formalized individual

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psycho-educational assessment, curriculum-based measurements, and diagnostic assessment of reading and mathematics skill development, with results informing identification, interventions, and program development. Additionally, student-focused approaches include the provision of individual therapy to students who are having school-related difficulties such as friendships, test anxiety, and bullying, as well as, offering group counselling (relationships, grief and loss, divorce). These targeted supports are often needed in schools and are a valued service that could be provided by School Psychologists.

2. Student-Focused Indirect Intervention – This area of intervention has been identified by teachers and School Psychologists as an important service to expand (Erchul & Sheridan, 2008; Johnson, 2007) and is typically referred to in school psychology literature as *consultation*. Teachers have stated that they require assistance beyond labeling students, and seek support with the planning and implementation of interventions, emphasizing that this support needs to be provided in a collaborative, rather than a directive fashion (Johnson, 2007). Teachers value School Psychologists' expertise in assessment of students, but recognize that they – as educators – have expertise in classroom interventions and have identified that they should be professional partners with psychologists (Knoetze & Vermoter, 2007). This intervention domain brings School Psychologists into the strategy implementation phase, giving them a role as partners with educators and families to devise academic and behavioural program plans and then to problem-solve during their implementation. There are numerous research-based consultation models that define how to work with parents and teachers to plan educational and behavioural interventions for individual students (Erchul & Martens, 2010).

3. School-Wide Intervention – When School Psychologists become involved in the broader service of the school they are better able to influence the development and implementation of universal strategies and supports (those that benefit all students). This aspect of service has the potential to enable School Psychologists to employ their unique array of skills in terms of preventative interventions, responsive supports, capacity building for teachers and parents, and program development.

- **Preventative Intervention:** School Psychologists can proactively influence school environments, thereby preventing the development of more serious problems for some students. This work can be undertaken by collaborating with educators to identify research-based instructional strategies and provide remedial suggestions before students experience significant difficulties.
- **Responsive Supports:** School psychologists are the most extensively trained mental health professionals in schools. Therefore, School Psychologists can be an essential support for

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- students and staff following a traumatic event.
- **Capacity Building:** With the implementation of an Inclusive Education system, educators will need support to create more inclusive learning environments. School Psychologists can use their expertise in ecological influences and academic engagement to assist teachers in designing classrooms, both physically and instructionally, that engage ALL students in learning. Additionally, there is an opportunity to help educators learn about and effectively utilize universal instructional strategies (e.g., visual schedules) that are essential for the student with a learning disability and also helpful to the student who is sleep-deprived. School psychologists can support the learning of both parents and educators through presentations on a variety of topics ranging from **Parenting in the 21st Century to Universal Strategies to Support Students with AD/HD**.
- **Program Development:** Over the past fifteen years, Alberta schools have been introduced to *Positive Behaviour Supports* programming with variable success. School psychologists can utilize their expertise in social/emotional/behavioural development to assist with this program's implementation fidelity and the election of targeted and specialized intervention supports. With the introduction of an Alberta model of Response-to-Intervention, schools will need to devise and implement school-wide screening and assessment programs. Considering their extensive background in assessment, School Psychologists can provide guidance in developing and/or selecting valid and time-efficient assessment tools.

4. District/System-Wide Intervention – As an Inclusive Education system is being implemented, school districts will need to undertake a transformation in how to provide an engaging education to ALL students. School psychologists possess skills that enable them to provide services to the entire district through designing and implementing district-wide training programs (e.g. behaviour management, level A assessment), district screening programs (e.g. kindergarten entrance), and developing and implementing district intervention programs (e.g. social skills). As programs are implemented, School Psychologists can make use of their program evaluation knowledge by assisting with data collection to evaluate the effectiveness of system-wide interventions. As well, it is important to recognize that School Psychologists have a broad array of skills that prepare them to work collaboratively with other professionals as they advocate for the needs of students and it may therefore be advantageous for them to participate on multi-agency committees as wrap around services are implemented.

5. Research – In education, there is an expectation that teachers are engaging in action research and utilizing research strategies to demonstrate the effectiveness of educational strategies. As well, school

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districts cycle through *Alberta Initiative for School Improvement* (AISi) projects every three years. These research projects are designed by school districts to encourage and promote creativity and innovation that result in improved student learning. School psychologists can support school districts by sharing their understanding of various research designs and statistics to assist in the planning and conducting of investigations to improve student success.

Professional Responsibilities “School psychologists have an “ethical responsibility to become involved in programs aimed at problems ...broader than assessing and diagnosing what is wrong with a child.” (p. 488, Sheridan & Gutkin, 2000). With the implementation of an Inclusive Education system in Alberta, School Psychologist can fulfill the role that they have been trained for as articulated by the Canadian Psychological Association. There is a potential for School Psychologists to contribute in a broader way to the well-being of all Alberta students, and as such, School Psychologists are implored to embrace this professional responsibility through the provision of a full spectrum of school psychology services.

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Snapshots in Educational Psychology Research

This section of the newsletter showcases student and faculty research from Universities across Canada. These research highlights are intended to give a quick overview of some recent and ongoing studies within a number of graduate programs, as well as to potentially facilitate collaboration across the country. These briefs include a variety of topics that may be relevant to school psychologists in both research and practice.

Adolescents with high-functioning autism (HFA) make significant and meaningful gains in their social skills, quality of friendships, and social responsiveness, according to researchers at the University of California, Los Angeles. In this study, adolescents who received the UCLA PEERS Program, a parent-assisted social skills treatment program for adolescents with HFA, showed increases in several areas of social skills and decreases in autistic mannerisms when compared to the waitlist control group. Teachers' reports also revealed a significant improvement in social skills. Treatment gains were maintained at a 14-week follow-up assessment. (*Journal of Autism and Developmental Disorders*, Laugeson et al., online August 2011).

Children with High Functioning Autism Spectrum Disorders (HFASD) demonstrate greater impairment in cognitive flexibility in comparison to typically developing children as measured by a parent rating scale, finds research out of the University of Calgary. Results from this study also revealed that there was no significant relationship between cognitive flexibility and resiliency in children with HFASD or in typically developing children. Participants included 15 children between the ages of 8 to 12 with HFASD, and 15 age- and gender-matched typically developing children. Parents of the child

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participants completed the Behaviour Rating Inventory of Executive Functioning to compare the cognitive flexibility abilities of children with HFASD and typically developing children. The child participants also completed the Resiliency Scales for Children and Adolescents (self-report measure) to compare children with HFASD and typically developing children on positive outcome/resiliency factors. However, the main purpose of the study was to investigate whether intact cognitive flexibility abilities were associated with resiliency in children ages 8 to 12 years-old with HFASD. The results revealed that no such relationship currently exists and that future research is needed in this area. (*Completed MSc Thesis*, Altomare, A., August 2012).

All aggression is not bullying: Mislabelling all forms of aggression as bullying is hurting our kids suggests a developing study by a researcher at Western University. Bullying and youth aggression is widely recognized as a pervasive problem facing youth and educators. A major obstacle to the development of effective bullying programs is the erroneous labelling of all forms of aggression under the umbrella term “bullying.” This research addresses the differences between bullying (where the intention is to hurt) and the strategic social aggression youth utilize to build their social hierarchies. The different etiologies and goals have vastly different implications for addressing the behaviours. (*Ongoing study*, Hogarth L. A.)

Early childhood intervention during sensitive periods of brain development can positively affect children’s developmental skills. Research from the University of Windsor suggests that early Childhood Educators (ECEs) are in a position to aid in this early identification and intervention. Using evidence-based practice is important, yet the alignment of multiple tools to inform practice is not always carried forward in early childhood. The *Early Childhood Education Act* has no standardized procedure regarding the observation, monitoring, screening/reporting of children. The researcher designed a *Pre-Intervention Developmental Report* to record identified concerns, take observations, and plan for follow-up, connected with two highly used instruments, the ELECT and the ASQ-3. ECEs utilized this report and a multiple-focus group study was employed with seven ECEs at a newcomer reception centre. It was reported that documenting discrepancies helped ECEs create intervention goals and potentially fill the gap between current levels of development and what is considered typical. Implications were also made regarding how newcomer children exhibit domain related skills differently than the milestones that were presented on the trajectory. (*Completed MSc study*, Iantosca, J. A., May 2012).

Rejection sensitivity increases the likelihood of expecting, perceiving and overreacting to rejection, suggests a study from the University of British Columbia (Downey, Lebolt, Rincon, & Freitas, 1998). Children high in rejection sensitivity are more likely than their peers to perceive signs of rejection in what others would consider to be neutral or ambiguous situations. Consequently these youth are at risk of reacting to this perceived rejection in ways that their peers

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would deem to be inappropriate. Children with angry expectations of rejection are more likely to respond with anger to a perceived rejection whereas children with anxious expectations of rejection are more likely to internalize the perceived rejection, feel socially hopeless, and withdraw. This study will gather self-report, parent-report, and teacher-report data from approximately 150 Grade 7 students from a local school district in western Canada. This research will address the relationship between level of rejection sensitivity and internalizing and/or externalizing problems in early adolescents, and we will analyze these data by gender. (*Ongoing study*, Yew, A., Taschuk, A., & Miller, L. D.)

Innovative school-wide classroom management intervention significantly reduces student misbehaviour. Based on Positive Behaviour Intervention Support (PBIS) theory, Dr. Alan Edmunds at Western University uses a student-teacher negotiated rules, rewards, and consequences approach called Dynamic Classroom Management (DCM) to establish a common behavioural frame for each classroom and for all non-teaching spaces. Behavioural incident data collected from teachers and administrators at five weeks and five months post-intervention is compared to baseline pre-intervention data. Across all schools (5) in two different boards, the data consistently reveal marked reductions in in-class behaviour problems, referrals to the principal, and suspensions and expulsions. Educators also noted positive changes to classroom and school climate in all schools. This joint project between UWO and Ontario school boards is supported by funding from the Knowledge Network for Applied Education Research (KNAER). (*Ongoing study*, Edmunds, A. & Edmunds, G.).

Teacher efficacy and wellbeing may be enhanced by increasing emotional intelligence through training, suggests collaborated research from Western University and the University of Calgary. Given that teaching can be a profession of high occupational stress, leading to job dissatisfaction and decreased mental health, a current study is examining the effectiveness of an emotional intelligence program on improving effective stress management and resilience in teachers, such that teacher efficacy can be augmented. It is suggested that some core factors of teacher efficacy can be subsumed under the competencies comprising EI, and that EI-program training can improve individual EI. Noting the empirically supported influence of effective teachers on desirable student outcomes, this support for teachers' physical, personal, and professional wellbeing would appear to be key to 'successful education.' (*Ongoing study*, Saklofske, D., Vesely, A., Nordstokke, D.).

Informant reports add incrementally to the understanding of the self-critical perfectionism-depression connection, according to a multi-source longitudinal study conducted by researchers at Dalhousie University. Targets (N = 155) completed measures of self-critical perfectionism at Wave 1 and Wave 2. Informants (N = 588) completed informant specific measures of self-critical perfectionism at Wave 1. Self- and informant reports displayed convergent validity. In addition, informant reports contributed incrementally to the prediction of depressive symptoms over time. These results highlight the interpersonal nature of self-critical perfectionism. Informants appear to have

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valuable information about the problematic personality traits of self-critical perfectionists, which augments our understanding of the perfectionism-depression link. (*Personality and Individual Differences*, Sherry, S. B., Nealis, L. J., Macneil, M. A., Stewart, S. H., Sherry, D. L., & Smith, M. M., in press). In light of the traumatic event in Connecticut this past December, we wanted to include a piece that is relevant to the understanding and processing of such tragic events and conveys our support of those doing research in prevention and intervention in this area.

It's time for YOU to be a member of CASP

By Juanita Mureika, L.Psych., CASP Membership Coordinator

Canadian school psychology and school psychologists from the largest boards to most remote areas of Canada are facing some of the most serious challenges in our history. The Mental Health Commission of Canada has targeted children's mental health as a priority. We know that 20% of the population suffer from diagnosable mental health conditions, and most mental health problems arise during school years. Teachers are not trained to identify or intervene with these issues – but school psychologists are! Teachers rely on school psychologists to help them serve these troubled students. However, many boards are cutting psychology positions in a dangerously misguided attempt to balance budgets. Clearly, this is an era of exciting opportunities and possibilities that we can and must address to ensure the continuation of the critically important role of school psychology in all areas of education.

Now is the time to work together to promote our profession. School Psychologists need a national voice to protect and promote the essential services they provide in schools. The **Canadian Association of School Psychologists (CASP)** is more than 25 years old and is experiencing a much needed revival and growth. CASP is fully committed becoming truly representative of school psychologists in Canada.

We invite you to join CASP now, or to renew your membership

(http://www.cpa.ca/CASP/Member_App_CASP_2013.pdf), to participate as a member of school psychology's national representation group and to become a part of the proactive and dynamic initiatives currently underway to raise the profile of our profession and to serve the students, teachers, parents, and schools of Canada.

... And here are some good reasons:

- CASP is strategically placed to be a strong voice for Canadian school psychology
To professionally support and advocate for school psychologists nationally and locally
- CASP and the Psychologists in Education Section of the Canadian Psychological Association (CPA) have a close reciprocal relationship that includes the joint publication of our *Newsletter*, providing updates

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- on Canadian issues and activities as well as input from members.
- CASP members participate in various key local and national initiatives such as the CPA task force on publicly funded psychology positions in Canada, with the aim of securing positions and improving working conditions for psychologists who work in public service.
- CASP members are involved in all areas of school psychology from research to teaching, administration to practice.
- CASP is an Affiliate Member of the *International School Psychology Association*, allowing us the opportunity to work with psychologists in other countries to promote the profession globally. CASP members receive the newsletter of the ISPA, as well.
- CASP has established an electronic discussion board to enable members to exchange ideas, research articles, and concerns with the larger group – our attempt at a cross-country check-up and dialogue. Please post your views and information of interest to : <http://canschoolpsych.wordpress.com/>
- CASP members receive the print version of the *Canadian Journal of School Psychology*, published by SAGE 4 times a year. *A very special issue on school mental health is in the works.*

This is the best time to **join CASP**, or **renew** a membership, and to grow with the association and with school psychology across Canada as you pursue your career. Click on the links or fill out the attached 2013 CASP membership form. Student membership price is **\$50**; regular membership is **\$65**. We look forward to welcoming you as a member of your national professional school psychology association!

NEWS & NOTES

- The MARCH 2013 SPECIAL ISSUE of **the CANADIAN JOURNAL OF SCHOOL PSYCHOLOGY** addresses the role of schools in a new mental health strategy for children and adolescents. There are 9 invited papers by outstanding Canadian leaders in children's mental health as well as an introduction by the guest editors (Alan Leschied, Gordon Flett, Don Saklofske) and a foreword by the Honorable Michael Kirby. This issue is of considerable importance for school psychologists and provides progressive views on the significant role of psychologists in leading mental health change in Canada.
- The forthcoming APRIL 2013 issue of the **JOURNAL OF PSYCHOEDUCATIONAL ASSESSMENT** will present a collection of papers examining the factor structure of both the WISC-IV and WAIS-IV. As these two tests remain among the most often used measures for assessing intelligence, it is essential that clinicians keep current with new developments around their use and interpretation. Books by Prifitera, Saklofske, & Weiss (2008) on the WISC-IV and by Weiss, Saklofske, Coalson and Raiford (2010) on the WAIS-IV have provided a solid foundation for the clinical use of these tests. However, there is good



evidence from the lead papers in the JPA issue that a five factor structure may provide another basis for interpreting the Wechsler tests. Two articles by Weiss et al. show the results from a re-examination of both 4 and 5 factor models and this is followed by in-depth discussions from well known psychologists including Canivez, Flanagan, Goldstein, and Kaufman. The 13 articles in this special issue guest edited by Dr. R. Tobin will be of particular interest to school and clinical psychologists.

- A remarkable conference of direct relevance to School Psychologists (the 4th Brain Development & Learning Conference) will be held July 24-28, 2013 in Vancouver, BC. For a 2-page description:

www.devogneuro.com/pdf_of_email.pdf

For the 10-page brochure:

www.braindevelopmentandlearning.com/Brochure2013all.pdf

Conference Website: www.braindevelopmentandlearning.com

- Trainers in school psychology, I encourage you as well as your students to get involved and contribute to the newsletter!
- School Psychologists: Share this newsletter with your colleagues.
- Join or Renew your CASP Membership today!



Application for Membership

Members can renew and new Members can join for 2013 with this one form. Just select "Renewal" or "New member for 2013". Members for 2013 will receive all 4 issues of the Canadian Journal of School Psychology published in that year.

New member? Referred by: _____

Name _____
Mailing Address _____
City _____
Province _____
Postal Code _____
Phone (Office) _____
(Home) _____
Fax _____
E-mail _____
Employer _____
Title _____
Registration(s) _____

Current memberships in psychological associations:

Highest degree(s) in psychology held:

Program and university if currently a student:

