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A Counseling Paradigm: Thinking Outside the Box

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The question often comes up at IEP meetings when related services are the subject of negotiation. "Our student needs counseling. Why don't you offer it?"

Fair enough! Let's explore the reasons. Years ago, we decided to forgo the usual formal structure of one-on-one therapy sessions as a strategy for providing guidance and counseling in our program. Instead, we pioneered an alternate approach.

The students at Community School are in need of many interventions - structure, limits, remedial instruction and classroom modifications - all of which must coalesce to produce the most beneficial and therapeutic environment possible. That they also need counseling is apparent to all. The question is what kind of counseling and how should it be provided? Do these children

need a weekly 50-minute session, or would small, frequent contacts be more effective?

Because our population is composed of children who are bright and whose motivations and attitudes are relatively intact, we have evolved a 'population specific' approach to the provision of guidance services. Guidance, or counseling, is embedded in the program as a whole. We, in fact, operate in a therapeutic milieu using a number of strategic interventions.

Because of their learning and attention issues, our students are at risk for certain emotional and psychological difficulties. In addition, various processing disabilities have an impact on how our children internalize their school experience. These difficulties may also impede social development. A history of school and social failures causes students to enter our program with low

self-esteem and a damaged concept of self.

Because of the above concerns, Community School has implemented a continuum of services that range from diagnostic to prevention to treatment, and finally to maintenance. This approach ranges from school-wide to individual. Consultation with and advisory services to parents may also be a part of this continuum.

Our interventions are based on integration of respected and accepted theory and research, and, for us, are thoroughly tested in our setting. We take all factors into account when determining student goals for behavior change and the choice of interventions. The school setting enables us to observe children in this most important arena of their everyday lives, giving us access to diagnostically relevant information that may never come to the attention of the off-site therapist.

The program for behavior change and individual guidance in use reflects these observations. It provides for broad expectations and lays out ground rules for appropriate school behavior. Mainstream schools usually do not address such basic rules to the degree that we find necessary. They go by the assumption that, by fourth or fifth grade, appropriate school behavior is internalized. Those individuals who have not done so are treated separately. In contrast, our students usually require both more time and more concrete guidelines to internalize the same behavior.

There are certain social skills that children usually assimilate at an early age. These might include recognizing emotions and intent, regulating anger, sadness, and even joy, organizing social information and evolving effective plans of action. The great majority of our students do not do this automatically. In order to help them make the transition from school rules to every-

day life, class meetings and social groups can provide an opportunity for self-examination and self-talk. Appropriate social scripts can be improvised and taught. As important, these methods provide our students the opportunity to practice regulation of behavior and the ways to navigate through everyday social problems.

It is in the nature of the developmental problems our students experience that they sometimes have difficulty adjusting to age appropriate developmental tasks. They can thus benefit from a forum where they can listen to viewpoints from both peers and a professional therapist. As a result of these interventions, students whose behavior may have been problematic in their mainstream schools adapt in a relatively short time. Some may even become model students, earning the highly prized GOLD CARD.

A behavior system is in place to help our students stay within structure. It is designed to reinforce appropriate in-class behavior such as being prepared, attending to task, facing the speaker, completing the assignment and so forth. Points are earned for displaying these appropriate behaviors and the Gold Card is the ultimate recognition of that. Students are able to use their points to “purchase” short-term and long-term class or group incentives. A number of other highly desirable awards and incentives rounds out the system.

Conversely, students also earn penalty points for inappropriate behaviors. These penalty points are serious consequences for misbehavior and may accrue against earning desired incentives. At the very least, they provide a warning and hold students to account. Referrals for inappropriate behavior may lead to more focused counseling or other interventions. A minority of our students, for all the familiar reasons, will require more individualized strategies. In these

cases our first step is to deal with the problem in the setting in which it occurred. This is accomplished through a variety of practices. Among our options are class meetings, teacher consultation and individual and small group work.

The class meeting is a democratic forum, not unlike a town meeting, in which all the members of the class - students and teachers alike - participate, along with a counselor. Students decide most of the topics to be discussed and problem solving is a primary focus. A specific format is followed. It guides the students in first defining the problem, then generating possible solutions and finally reaching consensus. By using this format repeatedly and successfully in connection with real life problems that are important to them, the children begin to internalize the problem solving procedures.

When dealing with social conflicts our preference is to consult with the child's teacher first. The classroom is usually the place problems occur, and the teacher is usually the child's main source of support and direction. We discuss with the child's teacher various strategies that may be appropriate and can be used with confidence and professionalism.

Teachers understand that they need to focus on behavior and student conflict and are brought into the therapeutic process to play an important role. They come to understand that they are able to make an indispensable contribution to alleviate the stress to some degree. Thus, teachers can become adjunct therapists.

When needed, the staff may modify, adapt or plan a totally unique system for a child's special difficulty using our understanding of the child's motivation for the behavior and the natural consequences such behavior elicits. In so doing, we are using differential reinforcement and contin-

gency contracting most efficiently.

Ultimately a student may need to be seen individually in a setting that more closely resembles the classic therapist-client model. At times a student's ego strength is either too fragile or too volatile to negotiate a sensitive issue in a group setting without support. Students may also require help in developing social skills, which when acquired, endow them with the confidence to deal with various interpersonal conflicts. Role plays, rehearsals, stress management techniques and even shadowing are useful in helping students interpret situations more realistically and modulate emotions more effectively.

Group work serves a variety of purposes in our program. Small groupings of carefully selected students is a useful format for allowing students to develop conflict resolution skills, to gain a sense of camaraderie and to reduce feelings of isolation that children with disabilities often experience. These small groups allow students to work on issues they have in common.

The time out room also has an important function in our program. It serves two purposes, mainly. It provides a place for students to go when they feel that they may become disruptive and need to calm down or if they feel the need to speak to a counselor about a problem. It also provides a place for teachers to send students who are either being or are threatening to be disruptive. When needed the T.O. session is combined with counseling support or structured intervention.

When a more diagnostic picture of a student's behavior is sought or when routine interventions have not been successful, a more clinical approach may be needed. With the permission of the parents, the student can be given an

Integrated Visual and Auditory Continuous Performance Test. This computerized test compares the child's visual and auditory attention abilities to those of children of the same age and gender. The information received from this test helps to determine whether behavioral and learning issues primarily stem either from attention or from processing difficulties, giving parents and staff more information in designing effective interventions.

Finally, we recognize that in order for many of our goals to become reality a school wide atmosphere that encourages kindness and mutual respect needs to be established. We are therefore very committed to achieving a bully free envi-

ronment in our school. Because of the long-term consequences of bullying for our students' future, this issue has a very high priority. By our direct and immediate action to deal with bullying behaviors, our students learn alternate ways of interacting with their peers. On-going training with staff to help them recognize and deal with teasing, bullying and various other forms of student disrespect is integral to this commitment.

Our students respond well to the encouragement, support and guidelines they receive from our staff. By eliminating negativity and failure and maintaining high expectations with consistency and support, we encourage our students toward success.

The Professional Monograph Series

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