Personal Consultation Statement

Fall 2000

Philosophy

Medway (1979) defined consultation as a process of collaborative problem-solving between a mental health professional (consultant) who is responsible for providing some form of psychological assistance to a client (p.276). I believe Kampwirth's (1999) definition of consultation as a collaborative process in which a trained, school-based consultant assists one or more consultees in efforts to make decisions and carry out plans that will be in the best educational interest of their students to be more appropriate.

School psychologists work in various capacities as a consultant. These include consultation, education, intervention, and prevention (NASP, 2000). While involved in consultation, school psychologists can often suggest healthy and effective alternatives to teachers, parents, and administrators about problems in learning and behavior. They can help others understand child development and how it effects learning and behavior, as well as help to strengthen the working relationships between educators, parents, and community services. In the role of an educator, school psychologists can develop programs on topics such as: teaching and learning strategies, classroom management techniques, working with students who have disabilities or unusual talents, substance use and abuse, crisis management, and parenting skills. When implementing interventions, school psychologists work face-to-face with children and their families. They help solve problems in learning and adjustment. They provide counseling

for children and families. School psychologists provide social skills training, behavior management, and other strategies to help children do well in school. Also, school psychologists help families and schools deal with crises such as death, illness, or community trauma. When setting up preventions, school psychologists help to identify potential learning problems. They design programs for children who are at-risk of academic failure. They provide parents and teachers with the skills to cope with disruptive behavior. School psychologists help to foster tolerance, understanding, and appreciation of diversity in the school community. They also work with school community to develop school-wide initiatives to make schools both safer and more effective.

Problem-solving is the primary focus of consultation. Consultants work to solve the learning and behavior problems exhibited by students (Kampwirth, 1999). The focus of consultation is to provide services to one or more clients, improve psychological and educational needs, and, by doing so, lighten burden of the consultee. I prefer indirect service delivery rather than direct service delivery. Indirect service delivery is when the psychologist provides suggestions to the teacher, the consultant, who then implements it with the student. This empowers the teacher with the skills necessary to help their student(s).

Kampwirth (1999) believes the consultant-consultee relationship to be "pivotal" to effective consultation. As a trained mental health professional, a consultant must possess good communication and interpersonal skills such as attending, active listening, being empathetic, being assertive, questioning. Authentic, honest communication is essential for successful consultation. Some regular educators are concerned that they are overburdened with too many issues and demands and cannot keep up with the pressures that they already have (Kampwirth, 1999). It is important to make every effort to understand the current pressures on teacher

consultees and not waste their time. By getting inside the consultee's world, you help to make the consultee comfortable with you. I feel that it is important to make it clear to the teacher that I prefer to work collaboratively. In the NASP Communiqué (Volume 29, 1), Betty Connolly said, "In some cases, the individuals providing consultation lacked an understanding of the educational system and the need for collaboration -- to the detriment of students in school settings." Both the consultant and the consultee must subscribe to the consultation process in order for it to work.

A meaningful consultative interview should take place. In this interview, consultation team members are able to communicate and clarify the problems/concerns. An evaluation of previous interventions can be made. The consultant can gain teacher information and involvement in generating hypotheses. This begins to establish a collegial and collaborative atmosphere

I like the straight forward behavioral consultation model of Bergan (1977). The first step is problem consultation, followed by problem analysis, then plan implementation, and finally problem evaluation. I feel that this model would be appropriate with smaller, more simplistic concerns. For more complex issues, I prefer Gutkin and Curtis' (1990) generic model of the consultation process. This is a more thorough, in depth process. As in the behavioral model, define and clarify the problem/concern. Second, analyze the impinging forces on the problem. Third, brainstorm alternative strategies. Fourth, evaluate and chose among the strategies. Fifth, specify the consultant/consultee roles responsibilities. I think that this is a very important step. Next, implement the chosen strategy. Finally, evaluate the effectiveness of the chosen strategy.

The various methods of consultation do not yet have a lot of empirical support as service delivery models (Hughes, 1994). There is a needs for more follow-up data. Despite this, I feel

that no matter which strategy is chosen there are keys to successful interventions. Consultees must believe themselves capable of implementing the chosen strategies. They must also be able to execute the treatment correctly and maintain its integrity. The chosen intervention should be congruent with all professional responsibilities and fit easily into the natural ecology of the consultee's day-today procedures. With all of these components in mind, I believe that appropriate and effective consultation procedures can be provided.

References

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