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Author: Reschly, Daniel J.
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OVERVIEW

System reform in the heartland is the story of a decade-long effort to change the ways we think about children and youth who experience learning or behavior problems in educational settings. Changes in thinking, or paradigm shifts, are the basis for fundamental changes in the delivery system that affect professional roles, funding procedures, and criteria for determining the quality of services. In this paper, an overview of the changes in one state, Iowa, is provided (more detailed discussions of the Iowa reform appeared in Reschly & Tilly, 1993 and Tilly, Grimes, & Reschly, 1993).

PARADIGM SHIFT: INTERPRETING NATIONAL TRENDS AT THE STATE LEVEL

This fundamentally different way of thinking involves a shift from seeking the causes and solutions to learning and emotional/behavioral problems in inferred internal states of the individual, to an examination of behavioral discrepancies from typical or expected patterns of behavior (problem definition). These discrepancies are resolved through changes in the social and instructional environment, based on the application of principles of instructional design and behavior change. Problems involve a mismatch between current behaviors and expectations. Problem solutions entail a redirection toward improved academic competencies and heightened social/behavioral performance. In Iowa, we have sought to implement this model of service delivery at the state level.

The Iowa paradigm shift is far from new. Virtually everyone will recognize the Iowa approach as a social learning model that uses applied behavior analysis and other behaviorally-oriented interventions. However, the application of the [Iowa] model to all aspects of a system delivering services to children and youth, including those in compensatory and special education, is unusual if not unique. Before discussing system reform in Iowa further, it is important to note that not everyone in Iowa has adopted the paradigm and practices described here. Currently, our regional educational agencies have the option of either adopting this model or a traditional one involving conventional disability categories and the associated classification criteria that necessitate emphasis on internal deficits and standardized testing. In 1995-1996, it appears that about half of state agencies will be using the social learning or behavioral model described below.

"Guiding Principle: Student Outcomes"

The implications of an outcomes criterion are that the value of human services, such as school psychological services or special education, should be determined by client outcomes. This criterion has been applied to judgments about assessment procedures, bias in assessment, classification and placement, and system reform (Reschly, 1980, 1988). Activities and approaches that are functionally related to positive outcomes are worthwhile and useful. Conversely, activities and approaches not related to positive outcomes are questionable. The outcomes criterion requires us to think about context and what happens to children and youth after, or as a result of, the services we provide.

"Current Services and the Outcomes Criterion"

What do school psychologists do now? Recent survey data indicate that about two-thirds of their time is devoted to various aspects of special education classification and placement, in which half of this time is spent in assessment activities (Reschly & Wilson, 1995). Using the outcomes criterion, do these activities lead to demonstrable benefits for children and youth?

"Effectiveness of Special Education"

The single greatest flaw in what we do now is the fact that the benefits of current special education classification and program placement have small or no demonstrable benefits for students with mild disabilities. Therefore, of what value is classification and placement, the major focus of our current activities, if there are few or no identifiable benefits to children and youth?

"Non-functional and Stigmatizing Labels"

In most states, a specific disability must be designated as part of the classification and placement process. School psychologists usually are the key players in determining which disability is most appropriate for a specific student -- a complex and expensive process. Substantial evidence, however, indicates that the same treatment goals and teaching strategies are adopted regardless of the category of mild disability (Reynolds & Lakin, 1987). Furthermore, programs for low-achieving students (e. g., Chapter I) and special education for students with mild disabilities are highly similar; yet, often on the basis of a few points on a test, some students are called disabled (and more money spent on their education) while others remain in the general education program with little assistance.

"The Special Problem of Learning Disabilities"

Nearly every system reform discussion focuses more on learning disabilities (LD) than on any other disability area because LD constitutes a majority of the students in special education and, therefore, LDs represent a high proportion of the students with mild disabilities (U.S. Department of Education, 1992). Although there are many tantalizing findings in LD research, few generalizations can be made beyond the observation that students with LD have low achievement, most often in reading. Notably absent in the LD research and practice is evidence for validated differential treatment based on the LD diagnosis or the identification of reliable sub-types of LD. Two popular approaches in school psychology in treating LD students -- absent validated differential treatment, and diagnosis of underlying cognitive processes or neuropsychological status -- fail to meet the outcomes criterion.

"Treatment Validity of Assessment Procedures"

Although many standardized ability and achievement tests have good technical characteristics, most of them have little or no treatment validity, including the most widely used test in school psychology (Witt & Gresham, 1985). A number of other frequently used measures, especially the "draw a something" devices, have poor technical characteristics and no demonstrable relationship to treatment design or outcome. Other approaches find the same students eligible for special education and have the added advantage of being useful in the design, monitoring, and evaluation of treatments (e. g., Shinn, Tindal, & Stein, 1986).

A discussion of conventional assessment needs to at least touch on claims that benefits are derived from matching processing strengths to intervention methodology (teaching strategies). This is the classic Aptitude by Treatment Interaction (ATI) principle. Although ATI is an attractive and inherently sensible idea, its applications to school psychology and special education are to date non-validated (Arter & Jenkins, 1979; Cronbach, 1975; Good, Vollmer, Creek, Katz, & Chowdhri, 1993; Reschly & Ysseldyke, 1995; Teeter, 1987, 1989). Whether aptitude is conceptualized as cognitive processes, information processing modalities, or intact neurological areas, Cronbach's (1975) characterization of ATI is still accurate, "Once we attend to interactions, we enter a hall of mirrors that extends to infinity" (p. 119).

"Disjointed Incrementalism"

Disjointed incrementalism refers to the increasingly separate general and special education systems, and the myriad of special programs with separate funding streams and eligibility criteria, but which possess similar goals and clientele (Reynolds, Wang, & Walberg, 1987). The consequences of the current organization of services is the inefficient use of funds, uncoordinated programs, curricular discontinuity, and limited generalization of effects across settings.

"Quality of Interventions"

Basic intervention principles often are not implemented in IEPs, special education programs, and prereferral interventions; these interventions typically are not evaluated using individualized, treatment-sensitive measures (Flugum & Reschly, 1994).

"Disproportionate Minority Placement"

Disproportionate minority placement (DMP) may be the quintessential special education issue in the last quarter of this century. The issue is not going away (U.S. Department of Education, 1992). Most analyses of DMP have focused on testing and placement processes. Such analyses answer some questions, but miss the main issue; specifically, the effectiveness of special education programs for students with mild disabilities (Reschly, Kicklighter, & McKee, 1988).

"Summary"

System reform in Iowa is a response to problems in the current system, as well as an effort to implement advances in assessment and interventions that can dramatically change the delivery of services to children with learning and emotional/behavioral problems. By implementing these changes, Iowa psychologists who practice in schools are creating a revolution in school psychology.

ADVANCES IN ASSESSMENT AND INTERVENTIONS:

CHANGING PSYCHOLOGICAL SERVICES IN IOWA SCHOOLSAssessment has been, and will continue to be, a salient activity in the roles of Iowa school psychologists; however, vast changes have occurred in assessment purposes, techniques, and outcomes. Purposes focus more on interventions; specifically, what can be changed in environments to produce improved learning and behavior. Techniques increasingly involve the use of direct and frequent measures of behaviors to gather information in natural environments. These measures help define problems, establish intervention goals, monitor progress, and evaluate outcomes. Such measures also are used as the basis for determining whether or not students are eligible for more intensive instructional or social/emotional intervention programs, including special education.

"Problem-Solving Orientation"

Iowa practitioners now routinely apply one of the problem-solving approaches that have appeared in the literature, with slight variations often related to intended population or type of problem (Bergan & Kratochwill, 1990; Gutkin & Curtis, 1990; Knoff & Batsche, 1991; Rosenfield, 1987). The problem-solving methodology uses the short-run empiricism described by Cronbach (1975) as a promising replacement for interventions guided by assumed aptitude, by treatment interactions, or by disability designations.

Problem solving is an essential component of Iowa system reform. Problem solving in our applications involves precisely defined problems, direct measures of behavior, pre-intervention data collection, intentional application of instructional design and behavioral change principles, frequent progress monitoring with program changes as needed, and evaluation of outcomes through comparisons to initial levels of performance.

"Assessment Technology and Decision Making"

Significant advances in assessment technology permit greater emphasis on measures functionally related to interventions. The knowledge base for practice has improved substantially with the development of curriculum-based assessment and curriculum-based measurement (Deno, 1985; Howell & Morehead, 1987; Shapiro, 1989; Shinn, 1989). Parallel advances in behavioral assessment of social and emotional

phenomena have led to equally substantial improvements in practice in these areas (Alessi & Kaye, 1983; Shapiro & Kratochwill, 1988).

"Instructional Design"

Behavior assessment and instructional analysis are inextricably related in functional assessments of academic behaviors. The marriage of instructional design principles with behavioral intervention technologies has produced impressive outcomes for students. Use of this knowledge base, combined with frequent progress monitoring and formative evaluation (Fuchs & Fuchs, 1986), gives results that are markedly superior to traditional special education programs and to instruction based on matching teaching methods to presumed strengths in cognitive style, information processing, or neuropsychological status (Kavale, 1990).

"Behavior Change"

Behavior change principles are well established (Stoner, Shinn, & Walker, 1991; Sulzer-Azaroff & Mayer, 1991). In addition, characteristics of effective schools and effective teaching are well represented in the school psychology literature (e.g., Bickel, 1990). Although there is a solid knowledge base for assessment and intervention, the remedial programs for most children and youth do not apply to all, or even most, of this knowledge base.

SUMMARY

The most important goal in Iowa system reform is the improved application of the available knowledge on assessment, instruction, learning, and behavior change. Improvements in applications are facilitated by the movement toward non-categorical classification and the integration of diverse programs intended to serve children and youth. Reductions in the amount of time devoted to standardized testing for eligibility determination has provided expanded opportunities for school psychologists to be involved with new roles related to functional assessment, interventions, and evaluation of student progress.

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