

Chapter 1

School-Based Family Counseling: An Overview

"Psychology and education are two phases of the same reality and the same problem."

- Alfred Adler

Overview: This chapter defines School-Based Family Counseling (SBFC) and describes its unique strengths and possible applications. The chapter lays out the foundation for the ensuing chapters, each showing the myriad ways in which the model serves children, families, schools and the greater community.

SBFC: A Definition

SBFC is an approach to helping children succeed at school and overcome personal, interpersonal, and family problems. SBFC integrates counseling approaches used in schools and with families within a broad based systems meta-model. It is used to conceptualize the child's problems in the context of all her/his interpersonal networks: family, peer group, classroom, school (teacher, principal, other students), and community. When a child is referred to the SBFC professional, the child's problem may involve one or all of these interpersonal networks. However, irrespective of the level of interpersonal network affected, the SBFC professional will relate positively with the child's family in order to reinforce positive change with the child. Moreover, the SBFC professional will also help bring about changes necessary with the school system in order to help realign the school with the needs of the child, just as he/she would help by responding to the needs of the child when the family system is in disarray.

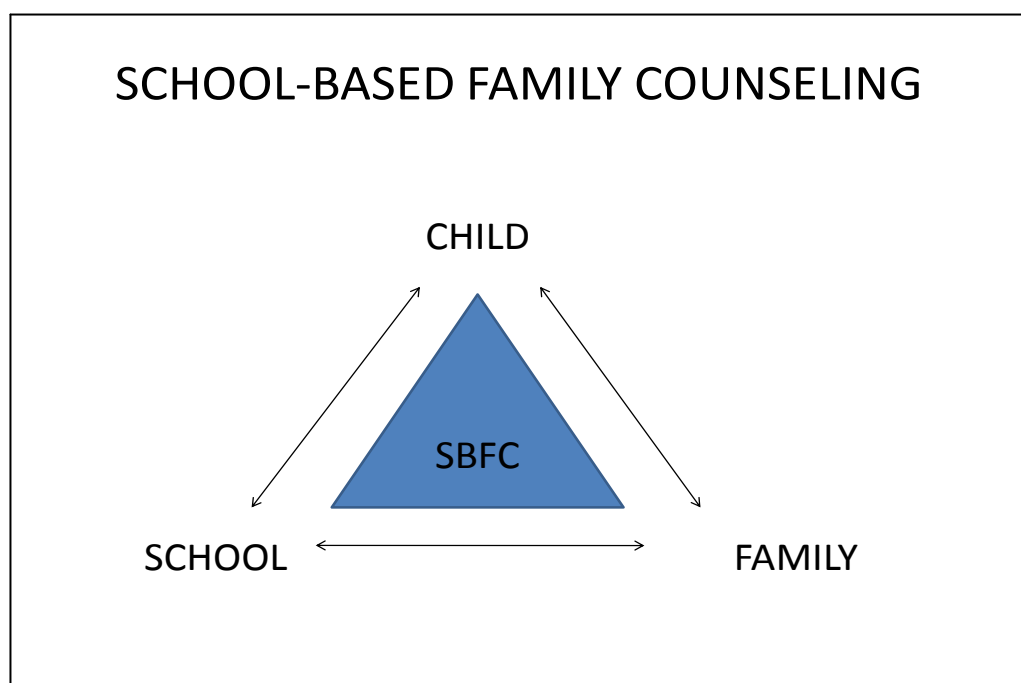


Figure 1.1 The Central Role of Family and School

A SBFC approach may be used by any mental health professional (e.g. counselor, family therapist, psychologist, school psychologist, social worker, school social worker, psychiatrist, nurse, or physician) or educator (e.g. principal or teacher). While not all of these professionals will be trained to the same level of skill in each SBFC modality, each is in a position to help a child by working with the child's two most important systems: home and school. For example, a teacher could help a shy child to integrate more effectively with her class by seating the child near a friendly peer. In addition, the teacher could meet with the parents and encourage them to help the child with homework. These two interventions in the child's school and home environments could just as easily have been made by a school or an agency mental health professional using a SBFC orientation.

Figure 1.2 Definition: SBFC Professional, SBFC Counselor

Any mental health professional or educator who uses SBFC skills to help a child

Figure 1.3 12 Professionals who do SBFC

Counselors
Family Counselors
Mental Health Counselors
Principals
Psychiatrists
Psychologists
Social Workers
School Counselors
School Nurses
School Psychologists
School Social Workers
Teachers

The term “school-based” is not meant to refer to the site at which the counseling occurs. Rather, it is meant to refer to the focus or primacy given to promoting school success. There are six basic types of School-Based Family Counseling, depending on whether the family counseling occurs at the school or at a community agency (see Table 1.1). School-sited SBFC is conducted on site at the school and the school-based family counselor is identified as a member of the school staff. This is in contrast to the traditional school counseling model in which the counselor is not trained to provide therapeutic interventions for the family. Agency-sited SBFC is conducted at an agency site by the school-based family counselor, who receives client referrals from parents and schools. However, the agency-sited SBFC counselor is intimately “linked” with the school, often spelled out in agreements or memoranda of understanding documents. The point here is that the agency-sited school-based family counselor is regarded as a member of the school’s support team, and he/she will visit the schools in order to foster a personal connection with school staff and with parents. This is in contrast to most traditional family therapy and community counseling models, in which the counselor is not trained to work in school systems.

The specific skills typically required of the school-based family counselor are shown in Table 1.2. As can be seen from this table, the skill set required of the school-based family counselor covers specific school counseling skills (such as, career counseling and guidance groups), as well as specific family counseling skills (such as, couples counseling and family counseling). Of the 23 skill/competency areas listed, 10 are held in common by both school counselors and family counselors.

The Need for SBFC

The need for SBFC arises from the challenges of traditional school counseling and family counseling (agency based) models in dealing with children who are failing at school because of family problems. A survey of the student clients of SBFCs in San Francisco (Gerrard, 1990) showed that over 85% of the children referred by teachers, parents, or self-referred had significant problems at home. The family problems included: marital discord, parents divorcing, custody problems, substance abuse, older siblings involved in gangs, sexual and physical abuse, parental neglect, single parents overwhelmed by economic and emotional problems, spouse abuse, and chaotic families with little parental control. Carlson and Sincavage (1987) conducted a survey of 110 members of the National Association of School Psychologists and reported that family variables were seen as highly relevant to children's school problems. Crespi and Hughes (2004) describe some of the crises affecting adolescents in schools: alcohol and drug addiction, teenage pregnancy, divorce, abuse, and family discord. The authors present an argument for school-based mental health services for adolescents as a way to offset restrictions imposed by managed care. Stinchfield (2004) describes research that indicates that traditional office-based therapy is not always effective with at-risk families and advocates family-based therapy that includes involvement of school personnel.

There is considerable research demonstrating that dysfunctional families (characterized by conflict, anxiety, low cohesion, and emotional problems of parents) are associated with a variety of problems affecting children. These problems include: behavior problems (Henderson, Sayger & Horne, 2003; Morris, Silk, Steinberg, Sessa, Avenevoli & Essex, 2002); deliberate self

Table 1.1 Six Types of SBFC Service Delivery Programs

Program Type	Site of Counseling	Main Accountability of SBFC Personnel	Personnel Providing SBFC	Administrative Control of Program
1. School-sited: In-service Training	School	School	School Counselor School Psychologist School Social Worker Teacher	School
2. School-sited: Family Therapy Staff	School	School	Family Therapists	School
3. School-sited: University-School Collaborative	School	School	Family Therapy Graduate Students	School/ University
4. School-sited: Agency-School Collaborative	School	School	Family Therapists	School/Agency
5. Community-sited: Agency	Community: Agency	Agency	Family Therapists	Agency
6. Community-sited: Private Practice	Community: Private Office	Family Therapist in Private Practice	Family Therapist	Family Therapist

Program Type	Clinical Control of Program	Advantages	Disadvantages	Examples
1. School-sited: In-service Training	School	Low cost, Utilizes existing personnel	Extensive in-service training required	Nicoll (1992) Merril, Clark, Varvil, Sickle & McCall (1991) Bemak & Cornely (2002)
2. School-sited: Family Therapy Staff	School	Utilizes experienced family therapists	Requires hiring of new personnel	Kramer (1977), Kronick (2005)
3. School-sited: University-School Collaborative	University	Cost effective for schools and parents	Inexperience of graduate students	Albaum (1990), Hillis, Gerrard, Soriano, Girault, Carter & Hong (1991), Carter (2003)
4. School-sited: Agency-School Collaborative	Agency	Cost effective for Schools	Parents pay fee	Barksdale (1979) , Blatt & Starr (1977), Klein (2004)
5. Community-sited: Agency	Agency	Utilizes community resources	Parents pay fee, Reluctance of families to participate	McGuire & Lyons (1985), Long & Burnett (2005)
6. Community-sited: Private Practice	Family therapist	Utilizes community resources	Parents pay fee, Reluctance of families to participate	Freund & Cardwell (1977), Wetchlet (1986)

Note: The term “School-Based” in “SBFC” refers to the critical importance of the role of the school rather than the school site, specifically.

Table 1.2. Examples of Different Skills/Competencies Performed by the School-Based Family Counselor Shown as Traditional Skills Taught to Family Counselors and to School Counselors in North America

Counseling Approach	Traditional Skill/Competency Taught
School Counseling and Family Counseling (skills common to both)	<ul style="list-style-type: none"> Child counseling Group counseling Child advocacy Child assessment Parent consultation Awareness of ethical issues Referral to community resources Program evaluation Multicultural counseling Community intervention*
School Counseling	<ul style="list-style-type: none"> Teacher consultation Teacher education (e.g. classroom discipline) Career counseling Guidance groups Classroom meetings School law Academic planning
Family Counseling	<ul style="list-style-type: none"> Family counseling Couples counseling Family assessment Family law Parent education Parent support groups

*emerging skill area

harm (Evans, Hawton & Rodham, 2005); delinquency (Coll, Thobro, & Haas, 2004; Cashwell & Vacc, 1996); depression (Schneiders, Nicolson, Berkhof, Feron, van Os & de Vries, 2006; Sigfusdottir, Farkas & Silver, 2004; Sourander, Multimaki, Nikolakaros, Haavisto, Ristkari, Helenius, Parkkola, Piha, Tamminan, Moilanen, Kumpulainen & Almqvist, 2005); risky peer behavior (Goldstein, Davis-Kean & Eccles, 2005; Jeltova, Fish & Revenson, 2005); social isolation (Elliott, Cunningham, Linder, Colangelo & Gross, 2005); substance abuse (Henry, Robinson & Wilson, 2004); and suicide attempt (Yip, Liu, Lam, Stewart, Chen & Fan, 2004; Wild, Flisher & Lombard, 2004; Hacker, Suglia, Fried, Rappaport & Cabral, 2006).

These negative effects of the family on children extend to the school. According to Crespi, Gustafson and Borges (2006) school psychologists are increasingly being confronted with students affected by family problems: "With one in six children raised in alcoholic families, with divorce impacting approximately 60% of families, and with such issues as...parental neglect, as well as sexual and physical abuse affecting large numbers of children and youths, many practitioners are interested in interventions which can directly affect children in school settings." (p.67). Researchers have documented the negative effects on children's academic performance caused by lack of family support (Lagana, 2004; Chiam, 2003; Ponsford & Lapadat, 2001); marital disruption and divorce (Sun & Li, 2002); mother absence (Heard, 2007); and parental loss (Abdelnoor & Hollins, 2004). Other researchers have noted the positive correlation between children's aggression at school and variables such as: family aggression (Fitzpatrick, Dulin & Piko, 2007; Miller, Miller, Trampush, McKay, Newcorn & Halperin, 2006) and negative home experiences (Fryxell & Smith, 2000).

There are also a number of studies focusing on how healthy family functioning helps children succeed at school. Zimmer-Gemback and Locke (2007) found support for a Family Primacy Model exemplified by adolescents with more positive family relationships using more effective coping strategies at home and at school. Lambert and Cashwell (2004) state that preadolescents who perceived effective communication with their parents had low school-based aggression. Steward, Jo, Murray, Fitzgerald, Neil, Fear & Hill (1998) found that students who used family members for solving problems had higher GPA's than students who did not rely on their families. Amatea, Smith-Adcock, and Villares (2006) describe a family resilience framework that school counselors can use to help families promote students' learning.

Resmini (2004) points out that in some cases for a particular child the school itself may function like a dysfunctional family exposing the child to abuse and neglect by peers and teachers. Resmini states: "Some schools can bear a strong resemblance to the proverbial dysfunctional home, particularly for the student who has learning differences or different interests. Teachers often are taxed by the large number of students in their class, and therefore they are apt to ignore the needs of the student with differences." (p.222). Resmini recommends a family systems approach be used to assist these children both at home and at school.

When children's problems are seen through the lens of the education researcher (Adelman & Taylor, 2011), the focus becomes one of looking for the "barriers to student achievement". These indeed are often the same barriers described above with respect to the family. However, beyond the family system, research accumulated over the past twenty years by the National Clearing House based at UCLA's School Mental Health Project (see

<http://smhp.psych.ucla.edu/temphome.htm>) suggests that the problems are not always due to dysfunctional families, but may lie in the way school systems are structured as well as the way support services, including counseling, targets problems after they impact the child's learning, then apply "counseling" interventions that amount to band aids to a serious wound. This is not to say that counseling is not seen as important, but rather that traditional school interventions are piecemeal approaches that lack an understanding of the three contextual systems that are critical to optimal child development, the family, the school and the community. Thus when Johnny experiences a hostile, adversarial divorce between his/her parents, the negative effects of this hostility, turmoil and instability weigh heavily on his/her ability to function well in school. SBFC counselors, on the other hand, are skilled at working with all three systems, often generating school and community support since they "see" the wisdom of involving key stakeholders in the helping process.

School counselors, who typically have no training (or only one survey course) in family counseling, are not equipped to intervene effectively with the families of these students. Family counseling is one of the more difficult forms of counseling and learning to do it well requires extensive training and supervision. When school personnel determine that there is a family problem affecting a student, they often refer the family to a community mental health agency for family counseling. Most school principals are familiar with the phenomenon of families that are referred for family counseling, but they fail to go. Many of these "resistant" families are involved in a power struggle with school personnel. The families resent being sent for therapy because of the implicit message that the family (i.e. the parent) is sick or irresponsible. While seeing a therapist may be a sign of social status or trendiness with some people, with many, especially with minority families, therapy holds a stigma. "Seeing a therapist" is viewed within these families' communities as a sign one is "crazy." Family therapists who are themselves very familiar with the concept of triangulation (in which two family members form a coalition against a third family member, who is often the family scapegoat or "identified patient") are often perceived by parents as involved in a triangulation in which the school and the family therapist are in a coalition and "ganging up" on the parents. SBFC minimizes this triangulation because the school-based family counselor is not seen as a "third party" but rather is viewed as part of the school system. The SBFC counselor is an advocate for the child, the family, and the school. The counseling focus is on working with parents and families to help their children succeed in school.

Strengths of SBFC

School-Based Family Counseling has six strengths:

- Systems Focus
- Strength-based
- Partnership with Parents
- Multi-culturally sensitive
- Child Advocacy role
- Promotion of school transformation

Systems Focus

SBFC emphasizes that students are part of multiple systems: family, school, peer group, and the larger community. Family and school, however, play a critical role especially at the primary

and middle school levels. These represent critical periods where change can be more easily implemented to help children. They are also the levels where appropriate interventions can have optimal positive results. What is unique about the SBFC systems orientation is its emphasis on family systems theory which is change focused and connected to practical family counseling techniques for implementing change. Likewise, family systems theory recognizes the interdependence of various systems in our society--be they the school, the family, or the community context—as well as the vulnerability of the child depending on these systems for his/her development. Because of the flexibility of family systems theory, it can also be used to conceptualize relationship dynamics in the “school family.” Evidence of the growing, albeit not always enthusiastic recognition of “systems” thinking in our society is the preface to the document, “Creating Caring Relationships to Foster Academic Excellence: Recommendations for Reducing Violence in California Schools (Dear, Soriano et al, 1995). This document was the summation of three years’ worth of research on school violence and the degree to which the educational community is prepared to respond to acts of violence in schools. The Preface states in part, “The problems in the schools are but a reflection of the problems in society; the solution to those problems lies in understanding the systemic nature and interdependence of schools, families and communities.” (Dear, Soriano et al., 1995).

Strength-Based

Unlike the traditional paradigm for professional education whereby training and practice of professionals is done “irrespective” of other professionals, SBFC relies on the familiarity, respect and understanding of various professionals who have an interest in the child and his/her family. SBFC requires significant distancing away from the “silo” training model that results in separate interventions that may directly or indirectly undermine efforts of other professionals. Like the proverbial “blind leading the blind” counselors who “counsel” the child, but fail to work with the parents or with the teacher(s) (who may be unaware of the child’s home ordeals) may actually do more harm than good, as the intervention with the child may fail to address the root of the problem. Also, unlike therapy models based on the DSM, SBFC is not pathology-based, but rather strength-based. SBFC is a strength-based approach in that the focus of counseling is on promoting wellness and student success. When parents, guardians, and other family members are approached by the SBFC counselor it is in order to help a child succeed in school. This is in sharp contrast to the school contacting the family and recommending they “go for counseling” in order to deal with “family problems” that are having a negative effect on the student. This normalizes and de-pathologizes the counseling situation for the child and family.

Partnership with Parents

Increasingly ,government professional licensing bodies have published research showing the importance of effective partnerships with parents. For example, in the document entitled, “Preparing Educators for Partnerships with Families”, the California Commission on Teacher Credentialing states: “A growing number of citizens and educators believe that any workable solution to the problems facing education must include a re-conceptualization of the ways schools work with families and communities. Family involvement in the education of children is known to be critical for effective schooling. Collaboration between schools and homes has repeatedly been found to improve students’ achievement, attitudes toward learning, and self esteem. School-home partnerships benefit not only students, but families, schools and

teachers.” (Ammon, 1998, p. 3). SBFC counselors “walk the talk” by essentially adopting the paradigm that says, the client is the child and family; and the intervention must be inclusive of involvement with the family, the school and the community. Parents and guardians are approached as true partners and persons of authority and wisdom who are in a unique position to provide guidance to the student and the school. This view has much in common with the CBT view of the importance of the “therapeutic alliance.” However, this goes a step further in framing this counselor-parent/guardian alliance as fully collaborative in helping a third party: the child. That is, the parents are approached as “co-helpers.”

Multi-culturally Sensitive

Considerable research has shown that western individualistic models of helping are culturally inappropriate with many collectivist cultures, including Asian, Latino, African and Middle Eastern, among others (Sue & Sue, 2008; Hong, Garcia & Soriano, in press). For example, a majority of Mexican immigrants do not share the Western assumptive set that when one has a family problem, one goes to a therapist. Instead, the assumptive set of most traditional Mexicans is to seek guidance from a family elder, from a priest or even a “curandero” (an indigenous healer). Thus counselors offering “therapy” or “counseling” meet with great resistance, even when the problems are significantly stressful. However, an SBFC counselor understands that while a Mexican client may resist “counseling” he/she would eagerly seek “educational help” for his/her child or adolescent. Thus the reframing of “counseling” into a psycho-educational model of service reaches both parents and their children.

Going to a school or agency to consult with the counselor on how to help one's child succeed in school is something that many parents are willing to accept (especially if the counselor emphasizes that she/he needs the parents' help). This normalizes the counseling and reframes it in a way that de-stigmatizes coming for counseling. As the school-based family counselor works with the parents and family to help the child, trust is built which permits the counselor to eventually work on other family's issues affecting the child. School-based family counseling is a multi-culturally sensitive approach because it engages parents and families as partners with the school-based family counselor in working to promote the success of the child at school (Soriano, 2004).

Child Advocacy Role

The ethical standards for professional conduct in the helping professions require the clinician to take a stance as an advocate for the client. This is particularly so in the case of the most vulnerable member in a family, a school or in the community: this is the child. Moreover, as society becomes increasingly complex and taxing on families, schools and communities, abuse and neglect of children continues to be an underreported but growing problem. Often this is not necessarily with malicious intent, but due to overwhelmed parents and educators. In SBFC the client is the child, the family, and the school. The SBFC counselor acts as an advocate for all three. However, emphasis is given to being an advocate to the child because children are more vulnerable than families or schools. This requires a balancing act by the SBFC counselor who must act in the child's best interests while also acting in the best interests of the family and the school. In essence, the SBFC professional is multilingual and multi-visional; he/she learns the language of schools, the language of counseling and the language of families, while

understanding the world view of each of them.

Promotion of School Transformation

As stated earlier when quoting the California Commission on Teacher Credentialing (CCTC), “the problems in the schools are but a reflection of the problems in society” (Dear, 1995). The challenges facing students in public schools are intimately related to the problems facing educators. Any way one looks at the needs of children and adolescents, the structure of the school is not congruous with the life cycle reality of a developing child, a growing adolescent or a diverse, evolving family. This was captured in national milestone publications like “Lost in the Shuffle,” “Caught in the Middle” or “Second to None.” These are all professional documents and books stating that we essentially forgot to think of the child when configuring the structure of schools. Consequently, a major focus of SBFC philosophy is to put the child and his/her family back in the equation. In an ASCD Journal article, Rick Allen (2010) states: “Whether they call it “middle school” or “junior high school,” educator advocates who seek to shine the light on best practices for young adolescent students believe grades 5-9 are pivotal in students’ academic careers and should be a key element of school reform. In the last 10 years, with the intense focus on developing solid reading and math skills in early elementary students, lowering the high school dropout rate, and preparing students for college and careers, the needs of middle school students have been overlooked, say middle school experts” (Allen, 2010). Moreover, the SBFC professional knows that the same holds true for the structure of elementary and high schools. SBFC professional counselors are leaders whose vision, illustrated in Figure 1.1, includes the promotion of collaboration and true school reform that places the child and family first.

In SBFC the school, as well as the family, has an obligation to change in order to promote student success and resilience. Schools that have authoritarian or chaotic leadership in the classroom or in the school overall can have a destructive effect on children, as well as a demoralizing effect on teachers and others in the school. The SBFC counselor will not only assess the child’s behavior and the family’s structure and dynamics, but will also assess the organizational structure and dynamics of the child’s classroom and school. It is admittedly more difficult to promote school transformation, particularly if the SBFC counselor is an intern or recently graduated. Nevertheless, the SBFC counselor is in a unique position to initiate small but important changes with principals and teachers by virtue of the counselor’s SBFC systems skills.

SBFC: As A Philosophical Way of Life

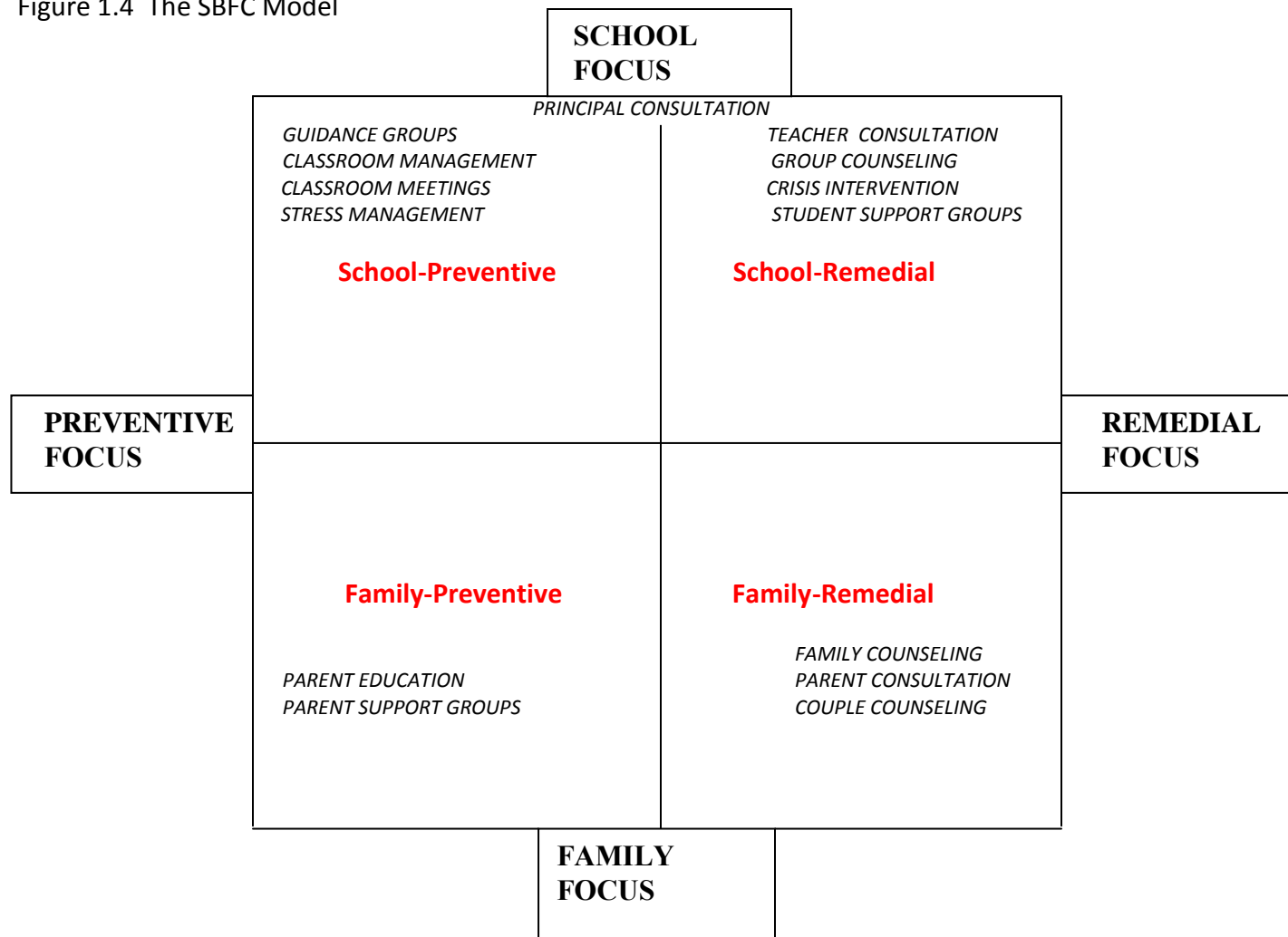
For those of us who work with children, whether at a school, an agency or in private practice, it is difficult to conceive of working with them without in some way first determining those adults who impact them in one way or the other. In some cases the impact is positive, as in my own case (MS) when as a young adolescent my teachers Mr. Menzies or Mr. Freeman took interest in me and took time to meet my family, thereby establishing a personal relationship that steered me in the right path, and turned me on to learning. In one case Mr. Freeman, my history teacher, counseled my mother about ways to navigate the school system, as she was a Mexican immigrant with little schooling in Mexico, let alone in the complexity of the US system of education. Thus when I work with children, I instantly seek to see them in the context of the school and the family, before any attempt to intervene with my counseling.

In summary, the SBFC approach to counseling is a social justice approach aimed at empowering children, families and schools, and the communities in which they exist.

How to Use This Book

This book is organized around the SBFC model (see Figure 1.4). The SBFC model illustrates the primary focus of SBFC: on the family and on the school; on prevention and on remediation. The SBFC model shows the four quadrants: School-Remedial, School-Preventive, Family-Remedial, and Family-Preventive. These four quadrants delineate the four areas in which SBFC counselors typically work. School counselors typically work on the school side. Family counselors typically practice on the Family side. SBFC counselors use an integrated approach working across all four quadrants. The SBFC model is an intervention model that directs attention to specific types of helping interventions.

Figure 1.4 The SBFC Model



Family-Remedial: This refers to interventions that focus on promoting family change when family problems are having a negative effect on a student. It also refers to interventions that promote family support to help a student, even when the family is not a source of stress for the student. Examples include: Parent/Guardian Consultation (Parents/Guardians), Couple Counseling (Parents), Conjoint Family Counseling (Family), and Family Counseling with Individuals (Student or family member). Part III presents chapters for working remedially with families.

School-Remedial: This refers to interventions that are required in a school after a problem has clearly developed. Examples of problems include: a bullying incident affecting the entire school or classroom; death of a teacher or student; an incident of violence occurring at school; a group of students all dealing with a similar problem (e.g. parents divorcing). Examples of interventions include: Workshop on Cyberbullying (Students and Teachers), Crisis Intervention (School); Support Groups (Student). Part IV presents chapters for working remedially with students.

Family-Preventive: This refers to interventions that help parents, guardians, and families to develop skills that prevent future problems. Examples include: Family Communication Skills Workshop (Family), Parenting Skills Workshop (Parents and Guardians). Part V presents chapters for working preventively with parents, guardians, and families.

School-Preventive: this refers to interventions that focus on teaching students and/or teachers skills that could prevent future problems. Examples include: Social Skills Training; Stress Management (Students) and Classroom Discipline; Stress Management (Teachers). Part VI presents chapters for working preventively with schools.

Part VII Special Applications in SBFC contains detailed examples of cases and unique programs designed as interventions across the four quadrants of the SBFC Model. As a SBFC counselor you will typically work in at least two SBFC quadrants at a time when there is a serious problem affecting a student. Depending on the nature of the problem experienced by a student or students you may end up working in all four quadrants. What we find helpful about this model is the simple way it keeps us focused on working systemically with home and school. This is the heart of the SBFC approach: the integrative use of interventions linking family and school.

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