

**PROCEEDINGS OF THE**  
**13<sup>th</sup> OXFORD SYMPOSIUM IN**  
**SCHOOL-BASED FAMILY COUNSELING**

**Brasenose College, University of Oxford, August 9<sup>th</sup> to 14<sup>th</sup>, 2015.**

**SYMPOSIUM PARTICIPANTS**

Dr. Stephen Adams-Langley

Place2Be, UK

*Award for outstanding contribution to School-Based Family Counseling, 2015*

Mr. John Agudelo

The Mulberry Bush School, UK

Dr. Carol Buchholz Holland

North Dakota State University, USA

Ms. Amanda Carlow

Red Cloud Indian School, USA

Dr. Michael Carter

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Dr. Hans Everts

University of Auckland, New Zealand

Dr. William Garner

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Dr. Nancy Iverson

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South Calgary Health Centre, Canada

Dr. Teresita José  
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Dr. Michael Kelly  
Loyola University, USA

Ms. Showka Moghaddam  
GOAL, USA

Ms. Sheena Sattarpour  
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Dr. Marcel Soriano  
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Dr. Nurit Toren  
University of Haifa, Israel

Judge Susannah Walker  
Rodney Stoke, UK

Master Caroline Willbourne  
Inner Temple, UK

Dr. Betsy Wisner  
Our Lady of the Lake University, USA

## PROCEEDINGS

In 2015 these proceedings take the form of Abstracts of presentations made. More information may be obtained about presentations by writing directly to the authors involved. The following presentations were made:

*A Place2Be: What works in promoting emotional well-being and responding to mental health problems in school?*  
by Stephen Adams-Langley ([stephen.adams-langely@place2be.org.uk](mailto:stephen.adams-langely@place2be.org.uk))

### Abstract

Place2Be is the largest provider of school based mental health and parent counseling in the United Kingdom. The therapeutic model will be presented and critically examined with reference to a framework of effective approaches to emotional and psychological well-being for children, parents and school staff. The school based family counseling model promoted by Professor Katherine Weare will be employed to examine the effectiveness of early intervention by the Place2Be.

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*Mulberry Bush School at 67*  
by John Agudelo ([john.agudelo@mulberrybush.oxon.sch.uk](mailto:john.agudelo@mulberrybush.oxon.sch.uk))

### Abstract

In the seven years since my previous presentation at the Oxford Symposium the Mulberry Bush School has implemented important changes to create opportunities for the children's families, carers and professionals to play more active roles in our pupils' treatment programs. In 2011 the family and therapy teams were merged into the Therapies and Networks Team. This has enabled the School to maintain a better oversight of the different needs of pupils and to bring together a combination of internal expertise and external strengths and resources to improve outcomes.

This presentation highlights the importance of contextualising the traumas and difficulties characteristic of the children who come to us, and of expanding the therapeutic horizon so as to engage their carers and professionals in a collaborative way. In the postmodern world that we live in, apportioning blame no longer makes sense. Using systemic thinking as one of our main theoretical tools has given us a better understanding of the therapeutic task and its inherent complexity.

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**Applying the solution-focused approach in schools**  
by Carol Buchholz Holland ([carol.e.buchholz@ndsu.edu](mailto:carol.e.buchholz@ndsu.edu))

**Abstract**

Many traditional counseling approaches spend a great deal of time focusing efforts on discovering the explanations for why problems occur in order to resolve problems. In contrast, the solution-focused approach redirects attention and energy to focus on identifying what possible solutions may exist and what strengths individuals already possess. During an interview with Victor Yalom, Insoo Kim Berg stated “Instead of problem solving, we focus on solution-building. Which sounds like a play on words, but it’s a profoundly different paradigm.” This shift in thinking can have a significant positive impact on interactions between students, parents/guardians, and/or school-based family counseling professionals such as counselors, teachers, and administrators. The adoption of the solution-focused approach continues to increase in schools for a good reason. It is time-limited, non-threatening, non-judgmental, and action-oriented. This presentation provides an overview of the solution-focused approach, and key solution-focused questions and skills. Unlike most other counseling approaches and theoretical orientations, the solution-focused approach can easily be adapted for a variety of applications within schools. The solution-focused approach is also a perfect fit for school settings because it provides a common strength-based language that can be used both inside and outside of a traditional counseling session. In addition to using this approach in individual, family, and group counseling sessions, school-based family counseling professionals can apply solution-focused principles in classrooms, parent/teacher conferences, and teacher consultation. Examples of these school-based applications will be described. Furthermore, school-based family counseling professionals can advocate for the creation of solution-focused schools (A.K.A. “solution-building” schools) which promote positive school climates by emphasizing the strengths and resources of the school communities. An example of a solution-focused school will be shared during the presentation.

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***Strategies for reducing barriers to entry for school-based family counseling***  
by Michael Carter ([mcarter@calstatela.edu](mailto:mcarter@calstatela.edu)), William Garner ([billgarner299@gmail.com](mailto:billgarner299@gmail.com)),  
Brian Gerrard ([gerrardba@outlook.com](mailto:gerrardba@outlook.com)), Peter Geiger ([ptrgeiger@aol.com](mailto:ptrgeiger@aol.com)) and Marcel  
Soriano ([msorian@aol.com](mailto:msorian@aol.com))

**Abstract**

This presentation reviews the history of inter-professional conflict in mental health, and describes examples related to barriers to entry affecting SBFC. Reasons for these “guild-enhancing” behaviors are discussed and constructive discussions explored.

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*Open heart, open mind: Working together to vanquish youth suicide*  
by Nancy Iverson ([niverson7@earthlink.net](mailto:niverson7@earthlink.net)) and Amanda Carlow ([anrcarlow@yahoo.com](mailto:anrcarlow@yahoo.com))

### **Abstract**

*“We’ve got to stop burying these kids.”* (From *Indian Country Today*, 2/19/15: “Spate of Youth Suicides Shake Pine Ridge Reservation.”)

In a two month span from mid-December, 2014, and to mid-February, 2015, five Oglala Sioux youths between the ages of 12 and 15 committed suicide on the 3,500-square-mile Pine Ridge Reservation in South Dakota. The youth suicide epidemic is not unique to Pine Ridge; American Indian and Alaska Native youth 15 to 24 years old are committing suicide at a rate more than three times the national average for their age group of 13 per 100,000 people. For these youths, suicide has become the second-leading cause of death (after accidents). In the Great Plains, the suicide rate among Indian youth is the worst: 10 times the national average. Amanda Carlow, K-8 Guidance Counselor and Coach at Red Cloud Indian School, Pine Ridge, South Dakota, and Nancy Iverson, pediatrician and director of PATHSTAR, will explore the Native youth suicide epidemic with regard to statistical data, family, school, community, and societal impact, and programs offering assistance, with particular attention to the role and function of the Red Cloud School counseling department.

The Pine Ridge Indian Reservation is noted for many tragedies and sadness. Many of the youth and younger generations wear blinders. They are selling themselves short and ending their lives before the “real” living has even begun. Programs, resources, and activists (young and old) are striving to make life on the reservation much more than a rolling obituary. With her narrative that includes not only experiences as a school counselor and community activist but also personal background, Carlow will relate what led her to her journey of working to inspire change and resurrecting HOPE—hope that there is a better future and that our youth can be part of that. Significant traumatic events that affect school communities are sadly not uncommon. These events range from natural disasters to terrorist activities. This presentation is a review of the academic literature relevant to the issue of school-based counseling in time of crisis. The provocation for such a literature review has a personal basis to it. In January 2013 a team from a New Zealand secondary school with which the author is associated was visiting a school in Kenya. Two days before the team was due to return home, several members of the team were involved in a mini-bus accident, and three Kiwi and one Kenyan adult members of the team were killed, and several students injured. The impact on the school and the families was significant and the physical and emotional impact of the event is still being felt more than a year later. The focus of the review is around discussion of the integration of the various groups – students, staff, families, and the wider community – who are affected by crisis in the therapeutic process.

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*School-based family counselling and therapy: A reconceptualization of the model  
by Heather José-Bragg ([hjbragg@telus.net](mailto:hjbragg@telus.net)), Teresita José ([titajose@telus.net](mailto:titajose@telus.net))  
and Peter Geiger ([ptrgeiger@aol.com](mailto:ptrgeiger@aol.com))*

**Abstract**

***Part I – Purposeful professional development and good therapy***

Therapy outcomes are increasingly becoming a focus for different stakeholders on several levels. These are, on a macro level: funding bodies providing the means to provide counseling and therapy; on the mezzo level: agencies that provide direct services to a specific population and which are funded based on continued favourable outcomes; and on the micro level: service consumers such as individuals and families that seek and receive counseling and psychotherapy.

A clear divide, much debated, exists amongst psychotherapists and counselors in terms of the importance placed on either evidence-based or practice-based clinical approaches. The divide is seldom addressed in a manner admitting plurality, as now demanded by the increasing focus on clinical outcome. Where unaddressed and unresolved, the divide can leave a developing therapist experiencing incongruence between her preferred therapeutic approach, agency expectations and professional values, ethics, and standards; for the new therapist striving to provide good therapy through the application of theory into practice, this divide can create a barrier in professional development which can impact on therapeutic outcomes.

The following presentation will focus on my purposeful professional self-development through the lens of the dialectic between process and goals (Geiger, 2015). Rather than arguing for or against evidence-based or practice-based approaches, this presentation will aim to highlight the important shifts between process and goals in providing good therapy, identified as good therapeutic outcome.

***Part II - A multi-faceted case of child, parent and clinician development***

Complex cases present special challenges to the clinician in terms of what has been described (Geiger, 2015; Soriano, 2009) as the essential quality of the school-based family clinician: the ability to *look beyond*. In a complex case the clinician is pulled (Waller, 2009; José & Geiger, 2012; Geiger, in manuscript) to look beyond her preferred theory and treatment model in case conceptualization.

The dialectic between the clinician's preferred and non-preferred theoretical models occurs in the context of other dialectics: that between goals and process, and that between the developmental issues in the client base and the developmental issues in the treating clinician (José, José–Bragg, Pupp & Geiger, 2010; José–Bragg, 2015; Geiger, in manuscript).

Developmental treatment planning involves giving the client what she needs by choosing behavioral, cognitive and psychodynamic interventions (Dineros, 2003) at appropriate pivotal points in treatment. In the case presented the lead clinician's interventions target not only the developmental issues in the client base but also, in parallel, those of the assistant clinician. The case is resolved by facilitating second-order change in the family system and in the co-therapist.

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*Viewing 21<sup>st</sup> century American school social work through the lens of school-based family counseling: Results from the 2<sup>nd</sup> National School Social Work Survey.*  
by Michael Kelly ([mkell17@luc.edu](mailto:mkell17@luc.edu))

**Abstract**

*Purpose:* The 2nd National School Social Work Survey aims to update knowledge of school social work practice by examining how practitioner characteristics, practice context, and practice choices have evolved since the last national survey in 2008 (Kelly et al., 2010). The presentation will present initial findings from the survey, describe responses from the largest national survey of school social workers, relate the findings to the types of school-based family counseling (SBFC) service delivery programs (Soriano & Gerrard, 2013), and make suggestions for pre-service and in-service training of school social workers, particularly focused on increasing school social worker competence in using strength-based interventions e.g. solution-focused brief therapy and motivational interviewing as well as becoming proficient in the use of data-driven decision making to demonstrate the impact of their services.

*Method:* A non-probability, purposive sampling strategy was used to collect responses from as many practicing school social workers in the United States as possible. The survey was delivered in an online format and was in the field from February 3, 2014 to April 7, 2014. To capture responses from the largest number of practicing school social workers, a sampling strategy was applied at national, state, and local levels. At the national level, three national organizations distributed the survey (NASW, SSWA, and CWSE) alongside 30 state associations, six state departments of education, and 23 school social work social media groups. Lastly, we relied on snowball methods to reach individual practitioners at the local level. These efforts suggested the sampling frame consisted of approximately 8,500 practicing school social workers.

*Results:* Data were collected from 3,769 (a 44.3% response rate) practicing in 46 states and the District of Columbia. Descriptive data reveal respondents were consistent with the 2008 survey, and practice settings were also consistent with previous survey work, indicating that the most common setting for school social workers were elementary school settings (37%) and most school social workers (76%) were in either one school (45%), two or three schools (22% and 9% respectively). Initial analysis reveals school social workers struggle to implement evidence-informed and data-driven practices for students, teachers, and families at both prevention (Tier One) and more intensive levels of intervention (Tiers Two and Three), with respondents reporting large caseloads, proscribed roles, and inadequate community resources as major barriers to evidence-based practice. Despite calls for school social work to utilize progress monitoring tools and standardized measures to evaluate practice, 57% of respondents stated they do not use universal screening tools at all and 53% said they still don't use standardized progress monitoring instruments to track the effectiveness of school social work interventions. Additional survey finding analyses showed that school social workers with 10 or fewer years of experience report using evidence-based practices and data tools more frequently than those with 11 or more years of training, and that those with an MSW and in states with certification standards in place are engaging in school-wide strategies and engaging families with greater frequency than those without an MSW or in states without such practice standards, respectively, suggesting that some core components of school-based family counseling are more prevalent in states where school social workers have more advanced training.

*Implications:* The Second National School Social Work Survey reflects a field that has remained consistent and lagging behind calls to implement evidence-informed and data-driven practices at all three tiers of the MTSS model (Dupper et al., 2014; Kelly et al., 2015). The need to better integrate pre- and post-service training in strength-based and data-driven practices are noted, as well as possible recommendations for ways to overcome barriers that school social workers report facing. A training institute that the presenter has led since 2005 (the Family and School Partnerships Program at Loyola Chicago) will be featured as an example of effective post-service training.

### *References*

- Dupper, D. R., Rocha, C., Jackson, R. F., & Lodato, G. A. (2014). Broadly trained but narrowly used? Factors that predict the performance of environmental versus individual tasks by school social workers. *Children & Schools, 36*(2), 71-77.
- Gerrard, B. A., & Soriano, M. (2013). *School-Based Family Counseling: Transforming family-school relationships*.
- Kelly, M. S., Thompson, A. M., Frey, A., Klemp, H., Alvarez, M., & Berzin, S. C. (2015). The State of School Social Work: Revisited. *School Mental Health, 1*-10.
- Kelly, M. S., Berzin, S. C., Frey, A., Alvarez, M., Shaffer, G., & O'Brien, K. (2010). The state of school social work: Findings from the national school social work survey. *School Mental Health, 2*(3), 132-141.

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***An application of school-based family counseling:  
Crisis work with the developmentally delayed  
by Sheena Sattarpour ([sheenasattarpour@aol.com](mailto:sheenasattarpour@aol.com))***

### **Abstract**

Working within the area of crisis intervention, this presentation addresses the application of School Based Family Counseling principles to working with those diagnosed with mild, moderate, or severe intellectual disability. This application addresses the entire circle of support, which includes the family, care facility, medical practitioners, and educational or work program settings. The goal is train and work with this circle to support clients from escalating maladaptive behaviour, and to help them return to their baseline behaviors.

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***Parents' educational involvement: Multiple dimensions, multiple antecedents  
by Nurit Toren ([ntoren@edu.haifa.ac.il](mailto:ntoren@edu.haifa.ac.il))***

### **Abstract**

Schooling involves three partners: the educational system (e.g., teachers, counselors), students, and parents. Given the close contacts among them, this presentation will explore four issues: (1) the dimensions of parents' educational involvement, (2) the unique contribution of each dimension to students' functioning at school, (3) the antecedents of parents' educational involvement, and (4) how schools can improve the parent-school relationship and make it more meaningful.



Of the many ways in which parents are involved in their children's schooling, I will focus on four dimensions: home-based and school-based parents' educational involvement, parental knowledge, and volunteering. Along these lines two questions arise:

(1) What matters more? Israeli research findings show differences in how each of the four dimensions is linked to adolescents' (both boys and girls) school functioning, indicated by self-evaluation and academic achievements.

(2) What are the motivational antecedents of parents' involvement in their children's schooling? Over the years researchers have pointed to several variables pertaining to parents, school and students which prompt parents' educational involvement. In this presentation I will discuss two additional antecedents: classroom atmosphere and parent-teacher trust relationships.

Discussion will briefly summarize the findings presented here and, based on them, examine ways and means to improve the school-parent partnership.

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***The voice for the child***  
**by Susannah Walker ([walker.owlsnest@gmail.com](mailto:walker.owlsnest@gmail.com))**

**Abstract**

I am honoured to be speaking to you today. School based counselling has in my experience been a valuable service, which has supported children going through family difficulties. As far as the family court system is concerned it can provide a confidential, freely available and non-stigmatising opportunity for children and young people. My talk is not academic or scholarly but my aim is to pose some questions and have some discussion on the theme of "The voice for the child".

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***The process of personal transformation for alternative school students  
in a school-based mindfulness skills program***  
**by Betty Wisner ([blwisner@ollusa.edu](mailto:blwisner@ollusa.edu))**

**Abstract**

This presentation examines the experiences of students as they participated in a mindfulness skills program integrated into an alternative high school curriculum. Students completed initial and final questionnaires, written journal entries, and personal interviews (N=19; 10 boys and 9 girls; ages 15-17). Data analysis yielded an experiential process through which personal transformation likely occurs. Findings suggest that mindfulness promotes a surface level self-awareness (i.e., observing the self through attention), which facilitates self-regulation of thoughts, behaviors and emotions. This promotes a deeper level of socio-emotional self-awareness, which results in improvements in relationships with peers, parents, and teachers, and the development of trust in others. Implications for using the study conclusions when planning school-based mindfulness programs and school-based family counselling programs are offered.

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