

## *Recension d'ouvrages / Book Review*

D. S. Lean & V. A. Colucci (2010). *Barriers to learning: The case for integrated mental health services in schools*. Plymouth, UK: Rowman & Littlefield Education. 120 pp., ISBN 978-1-60709-638-2 (paperback)

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*Barriers to Learning: The Case for Integrated Mental Health Services in Schools*, which brings timely attention to the issue of increasing pediatric mental health problems, presents a need for integrated mental health resources in the school setting. The title of this book accurately summarizes the focus of the work: the issues that impede student learning and the solutions necessary to improve student achievement. Although Michael Fullan, in his preface, suggests that this book is a must read for education reformers, I would encourage a read by individuals interested in pediatric health and education. As the authors point out, silos exist in the present education system and creating understanding of the barriers among concerned stakeholders and their agencies can be achieved by reading this book.

The book, well organized into seven chapters, begins with a prologue where the authors capture the attention of the readers by presenting a vivid and realistic depiction of a typical school day in a non-integrated school system. The detailed account of each character, their behaviors and the particular barriers they faced, immediately drew my interest into the book.

In the first chapter, the authors outline the increase in mental health issues and distinguish the two classifications of support services presently available: school-based and school-linked. Further, they define barriers to learning as a temporary or permanent “factor, condition, or situation that obstructs or impedes academic progress,” resulting in mild to severe effects. A detailed conceptualization depicts two types of barriers to learning, biological-psychological and environmental-circumstantial, as well as two types of outcomes, negative and positive. This conceptualization (represented diagrammatically) depicts how a reduction and prevention of barriers can ameliorate student symptoms and increase student achievement. Additionally, these authors argue that a broad base of professionals, situated uniquely in a school, is necessary to make accurate diagnoses and to recommend appropriate early interventions. The authors also recommend a universal preventative approach to target interventions, based on locally predetermined student needs.

In the second and third chapters, the authors identify biological-psychological and environmental-circumstantial barriers to learning. The authors interestingly present the disorders and their descriptions in the order in which they are most likely to be referred, rather than by prevalence. They suggest that biological-psychological barriers to learning, which are the most common, are often the only barriers considered when students have difficulties because school systems are structured to primarily deal with these particular barriers. The author presents useful examples of environmental-circumstantial and biological-psychological symptoms, making the argument that more attention needs to be given to the former symptoms to protect against misdiagnosis and ineffective treatment.

Along with describing inadequate interventions, the fourth chapter lists examples of negative outcomes (bullying, school refusal, addictions, early school leaving, suicide, and youth violence) that occur when students receive inadequate interventions to address barriers to learning. In addition to these outcomes, the authors propose that students who are not facing barriers to learning may experience a negative multi-ripple process whereby their academic progress is also compromised because of inadequately addressing other students' barriers.

The fifth chapter of the book includes a brief literature review of present and proposed reforms in the education system, which more recently are driven by student achievement (through school leadership and pedagogy) and the mental health system. In addressing barriers to learning, the authors identify initiatives in special education and alternative education in both the United States and in Ontario. The literature presented refers to minimal progress being made in strategies to improve “school mental health” likely due to outcome measurements geared towards academic achievement. Using relevant literature and research, the authors make a case for the integration of mental health services in schools, highlighting the impact in improving accessibility, reducing stigma, improving social and emotional functioning, and improved achievement.

In chapter six, illustrations are presented to depict the variations in which school systems address barriers to learning. Furthermore, the authors outline the degrees in which leadership, support service professionals, and instruction are utilized. The limitations of school system methods are listed, including fragmented services, diverse outcome measures, selective client base, delayed treatment, and lack of comprehensive school-based mental health services. Discussion of mental health services in rural schools is limited to this chapter where the authors make the point that rural and small schools are less likely to have mental health services than their urban counterparts.

The authors summarize an evidence-based, population-based approach to address barriers to learning. This summary includes advantages, principles for best practices, as well as difficulties encountered with current government-sponsored, collaborative projects in schools. The chapter concludes with a list of sites and resources that promote school mental health; however, few schools utilize school-based support professionals. They conclude by presenting requirements necessary to yield positive outcomes utilizing population-based, school, mental health programs.

In the final chapter the authors note that although current literature and reports on closing the achievement gap propose integration of mental health programs into schools, four key complex issues exist: lack of structure and sustainability, existence of silos, issues of confidentiality

and informed consent, and a lack of a three-tiered, population-based approach. The authors address solutions to the above by proposing that an integrated system requires a core-group in each school of school-based, support service professionals. The purpose of their proposed model, the School-based Integrated Support Services Model (SISSM), is to facilitate the implementation of these services. Utilizing integrated professionals who have knowledge of both education and clinical services and a population-based approach would address all barriers of learning including students influenced by the Multi-Ripple Effect. The final illustrations depict the SISSM and the approaches necessary to implement the SISSM. The authors includes detailed discussion along with the necessary resources with the acknowledgement that implementation would take several years to establish.

Assessment terms such as response to intervention (RTI) and positive behavioral supports (PBS) are introduced in light of academic, behavioral, and mental health issues in the SISSM. RTI is a term used whereby students are assessed academically using curriculum-based approaches, and the overall goal of PBS is the prevention of problem behaviors. The authors conclude the chapter with useful suggestions for in-depth evaluation of SISSM, alternative research methods, and a guide to pilot project implementation.

The book concludes with an epilogue, a look at the two fictional classrooms introduced in the prologue, now having utilized the SISSM. The authors highlighted throughout this chapter the advantages of integrating the population-based approach, including early intervention necessitating less intensive interventions, increased efficiency in student and family interventions, and increased teaching time specifically with students who do not have barriers to learning. Academic outcomes include improved student motivation and student achievement.

Overall, the book is well written in a logical manner and through in-depth discussion, presentation of current literature, and illustrations, the underlying concepts necessary to understand the SISSM are clearly articulated. The purpose of this work,– to outline the services and the delivery needed to free “students to learn and teachers to teach” (p. 1) – provides an approach to ultimately close the achievement gap. Although achievement gap is a term commonly used, it would merit further explo-

ration and definition in the context of the theme of this book. Along with their model, Lean and Colucci deal with controversial issues such as schools considering themselves as primarily educational institutions; they argue that students cannot leave their mental health challenges at the door when they enter the classroom. They also suggest that teacher attrition may be due to inadequately addressing barriers to learning.

Greater details on how the integrated professionals would combat practical but real issues, such as obtaining parental consent and wait times associated with access to allied health professionals and health professionals, would help readers to understand how timely interventions could be achieved and barriers to learning decreased. This book would be more appealing and practical to a larger population if literature and background information pertinent to Canadian contexts were included, rather than limiting such information to primarily Ontario. Examples of current strategies utilizing integrated services used in Canada would also serve as a resource to readers. Despite these particulars, this book is a comprehensive source for all involved in pediatric well-being, presenting a thorough approach to address the issue of increasing pediatric mental health problems.