

Linking regulation of practitioner school psychology and the United Nations Convention on the Rights of the Child: The need to build a bridge

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School Psychology International

2014, Vol. 35(1) 67–84

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DOI: 10.1177/0143034313508878

spi.sagepub.com



Abstract

In 2014, the 25th anniversary of the United Nations Convention on the Rights of the Child presents an opportunity for school psychology to evaluate its achievements relevant to the Convention, as well as its current and future strategic adherence to the Convention's principles. With analysis of key school psychology documentation from the UK, it is shown that for school psychologists the achievements and strategy relating to the international Convention have been directly, albeit implicitly, supported from 'top down', by the post-ratification governance processes and structures of national level agencies which operate school psychology preparation, statutory professional regulation, and non-statutory professional quality enhancement. On account of their use of a scientist-practitioner model, school psychologists are positioned to make a unique contribution to enacting the Convention's agenda and from recent Convention evaluations five priority areas for strategic development in relation to the Convention are identified. An account of the authors' commissioned work following a non-accidental child death in the UK illustrates how school psychologists can make significant contributions to Convention priorities from 'bottom up' as a result of significant contemporaneous events at local or national level. Implications of the 'top down' and 'bottom up' linking of school psychologists' work with the CRC agenda are discussed with reference to both the national and international school psychology communities and regulatory bodies.

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Keywords

Contribution, Convention on the Rights of the Child, evaluation, regulation, school psychologist, UK

An international treaty on the rights of the child

The UN Convention of 1989 represents an international treaty of unprecedented philosophical, moral, and political significance and scope and is currently ratified by more than 190 States (Britto & Ulkuer, 2012). The Convention is founded upon four general principles: Non-discrimination (Article 2); devotion to the best interests of the child (Article 3); the right to life, survival, and development (Article 6); and the right to express her or his views freely and to be heard (Article 12) (UN, 1989). Through clusters of provisions, the Convention identifies child-specific needs and rights and protects those rights by setting standards relevant to healthcare, family life, education, legal, civil, and social services. Concrete examples of its provisions include a child's right to have birth registered, to a name and nationality, to health and education, and to protection from abuse in the family (UN, 1989).

Once ratified by a State party, the UN Committee on the Rights of the Child (hereinafter referred to as the Committee) provides observations and recommendations on each State party's mandatory five-yearly report on implementation of the Convention within the State party. In addition, the Committee also provides 'General Comments' on pertinent thematic subjects of general interest, such as 'The Aims of Education' (UN, 2001) or the Rights of the Child to Protection from Corporal Punishment and other Degrading Forms of Punishment (UN, 2006). Further to these, the UN has adopted three optional Protocols adjunct to the Convention which involve child sale, prostitution and pornography; the role of children in armed conflict; a communications procedure providing for children to seek justice from the UN directly where they are unable to seek justice from within their own country (UN, 2011). The enactment of the Convention involves a long term and ongoing process of development, refinement, and interpretation, involving a reciprocal and interactive relationship between the UN and the Convention's States parties. For example, following the Convention's 2006 Optional Protocol regarding corporal punishment, the Committee expressed concern within its concluding observations upon the UK 2007 Periodic Report, at the 'failure of State party (i.e. UK) to explicitly prohibit all corporal punishment in the home and emphasizes its view that the existence of any defence in cases of corporal punishment of children does not comply with the principles and provisions of the Convention' (UN, 2008, paragraph 40). The UK governmental response to the Committee's recommendation for a British Bill of Rights with a section devoted to child rights (UN, 2008, paragraph 11), stimulated considerable public debate (e.g. *The Guardian*, 2008). Evaluation of the impact of the Convention, therefore, is about both relevant processes relating to children's rights as well as outcomes which protect, or testify to, those rights.

Given its scope and widespread international adoption, it is perhaps surprising that independent evaluation of the impact of the Convention beyond the UN has been relatively sparse (e.g. Doek, 2009; Morlachetti, 2010; Veerman, 2010). There has been no specific evaluation of the impact of the Convention within school psychology at national or local levels, which is possibly best explained by Britto and Ulkuer's (2012) model of proximal and distal Convention 'duty bearers', which interposes both national and local government between the international community and the level of community services, at which school psychologists might be assumed to be located. Britto and Ulkuer's (2012) model conceptualizes a translation of specific principles of the Convention, through national and local governance structures, to school psychology practice [the role of other international communities, such as the European Union [EU], is also emphasized by Herczog (2012)]. Indeed, the Convention itself does place a duty on States parties to 'undertake all appropriate legislative, administrative, and other measures for the implementation of the rights recognized in the present Convention...to the maximum extent of their available resources...' (UN, 1989, Article 4). In 2010, the UK government outlined in detail how legislation underpins the implementation of the Convention (HM Government, 2010), detailing children's fundamental rights in the UK pertaining to mental health and education, including special educational needs; psychology services, however, were not specifically referenced, even though State party support for the availability of appropriate psychological services for children is indicated in Articles 23 and 39 of the Convention.

Notwithstanding any available direct national government support for Convention implementation through psychological services, there is a duty upon States parties, through Article 42 of the Convention, to support implementation more distally at local levels by making the Convention widely known. Mechanisms for doing this may be various, but it is certain that for specific professional groups, such as school psychologists, a significant impact would be made through mandatory preparatory education, governing body regulatory frameworks, and professional associations. It is significant, then, that from a survey of 192 UN member states, Jimerson, Skokut, Cardenas, Malone, and Stewart (2008) found that: 15% (29 States), including the United States (US), Australia, Canada, and Scandinavian countries, had regulations (or laws) that require 'school psychologists' to be registered or credentialed; 21% (42 States), including Belgium, Iceland, Netherlands, Russia, Switzerland, and the UK had some professional associations of school psychologists; 32% (62 States), including Botswana, Namibia, Latvia, Ukraine, and Portugal, had curriculum-specific university programs that prepare school psychologists (note that since these data were collected, the UK has legally enacted mandatory registration of school psychologists). We propose here that the significance and enactment of Convention principles to school psychology practice would be supported primarily through such national structures which link to preparatory education, governance of professional practice, and professional association.

Convention on the Rights of the Child within UK school psychology preparation, governance, and professional association

In the UK, the government reported in 2010 a range of measures to promote the Convention at local levels, identifying that for ‘adults who work with children and young people, training and development is underpinned by the Common Core of Skills and Knowledge for the Children’s Workforce . . . which sets out the skills and knowledge needed by everyone who works with children, young people and families [and] . . . references the Convention . . .’ (HM Government, 2010, p. 19). However, this common core is guidance rather than a mandatory framework and so may not be reflected in frameworks and guidance specific to school psychologists.

In order to evaluate how the Convention is directly enacted within UK school psychology practice through the provisions of preparatory education, regulation, and professional association, a qualitative, directive content analysis was undertaken across a range of documentation relevant to school psychology preparation, governance, and professional association within the UK (Hsieh & Shannon, 2005; Schwadtz, 1997). The content analysis of each complete document was undertaken in two stages: A first stage of surface coding which identified within each document explicit references to the Convention; a second stage of coding entailing both surface and latent categorizations of written text segments which identified elements (e.g. principles, standards, directives) which could be clearly linked with one or more of the four general principles of the Convention (Hara, Bonk, & Angeli, 2000). Categorizations of text from each document were made independently by the authors, each of whom is experienced in qualitative data analysis, is a registered UK school psychologist, and has a thorough knowledge of school psychology practice and governance in the UK (inter-rater reliability coefficient = 0.96). The findings of the documentary content analysis are summarized in Table 1.

The analysis summarized in Table 1 confirms that direct reference to the Convention is absent from a range of documentation relating to the preparatory education, regulation, and professional association of school psychologists in the UK. Given the significance of national policies in helping institutions and communities identify and meet the protection, survival, and development rights of children (Vargas-Baron, 2005), this may be a significant hindrance to furthering Convention objectives within school psychology practice. Notably, documentation from school psychology’s professional association (AEP, 2012) is more focused upon promoting employment rights of school psychologists, whilst that relating to standards of conduct, performance and ethics (HCPC, 2008) is more focused upon professional ‘wrongs’ (e.g. communication failures, client abuse, misconduct), than personal ‘rights’. Statutory standards of education and training (HCPC, 2012) focus upon training programme management, resources and links to national laws, rather than international laws/conventions, or professional outcomes or strategy. However, the present documentary analysis also shows that both preparatory education and

Table 1. UK school psychology preparation, governance and professional association documentation cross-referenced to Convention principles.

	Explicit reference	General principle 1	General principle 2	General principle 3	General principle 4
Preparatory education—British Psychological Society (BPS) Accreditation through partnership hand-book: Guidance for educational psychology programmes in England, Northern Ireland, and Wales (BPS, 2010)	X	Promote equal opportunities practice (p. 14)	Duty of care to safeguard (p. 17)	Promote psychological well-being (pp. 14, 15)	Engage CYP as participants (p. 17)
Regulatory governing body—Health and Care Professions Council (HCPC) Standards of Proficiency: Practitioner psychologists (HCPC, 2009)	X	Non-discriminatory practice (Standard 1a.2)	Act in best interests service user (Standard 1a.1) Duty of care (Standard 1a.5)	Promote psychological well-being, social and emotional development, raise educational standards (Standard 2b.2)	Understand approaches to consultation (Standard 3a.1)
Standards of Conduct Performance and Ethics (HCPC, 2008)	X	Equality of service provision (Standard 1)	Act in best interests of client (Standard 1)		X
Standards of Education and Training Guidance (HCPC, 2012)	X	X	X	X	X

(continued)

Table 1. Continued.

Explicit reference	General principle 1	General principle 2	General principle 3	General principle 4
Professional Association—Association of Educational Psychologists (AEP) Aims of the Association (AEP, 2013)	X Oppose all forms of unfair discrimination (Aim 7)	X	X	X
AEP Members' Handbook (AEP, 2012)	X	X	X	X

Key: General principle 1—non-discrimination (Article 2); General principle 2—devotion to best interests of the child (Article 3); General principle 3—right to life, survival and development (Article 6); General principle 4—right to express views and to be heard (Article 12) (UN, 1989).

statutory regulation documentation (BPS, 2010; HCPC, 2009) do reference standards which to some degree reflect all of the four general principles of the Convention. In fact, both preparatory education and regulatory school psychology documentations make substantially more references to client needs and best interests, than to rights per se, suggesting a possible tension between state/adult constructed viewpoints and those of children and young people. Furthermore, linking of the HCPC's (2009) standard of proficiency 3a.1 for 'understandings of approaches to consultation' to Convention principle 4 that children's views being expressed and heard, is a latent categorization which did not obtain complete inter-rater agreement.

Whilst this general pattern of findings from the documentary analysis suggests a shortfall pertaining to the Convention's Articles 4 and 42 which require party states to implement and promote the Convention as fully as possible, it also evidences a link, albeit implicit, between UK professional standards in school psychology and the provisions of the Convention. Given the evidence of the implicit, rather than explicit, nature of this link, together with the Convention's broad scope, a pertinent question can be asked about the most directly relevant aspects of the CRC for school psychology. Britto and Ulkuer (2012) report Multiple Indicator Cluster Survey (MICS) data in relation to the Convention, ranging from nutrition and home environment to caregiving and discipline practice. These data highlight areas which could have central relevance to school psychologists, such as family literacy, language stimulation, provision of toys, physical disciplining, and psychological aggression (Bornstein & Putnick, 2012); in other areas, such as infant mortality, exclusive breastfeeding, housing quality and water supply, other children's workers might be more directly involved in supporting children's rightful access to appropriate standards, though Britto and Ulkuer (2012) argue the importance of 'holistic policies and integrated programming approaches throughout the life cycle' (p. 94). Indeed, the authors link children's access to appropriate language stimulation and literacy interventions within technologically developing/developed countries to economic and health well-being. In addition Woods, Bond, Tyldesley, Farrell, and Humphrey (2011), evaluated the role of school psychologists in the UK in a broad range of child protection and safeguarding initiatives at both individual and organizational levels. Britto and Ulkuer (2012) also identify the particular challenges of promoting for younger children the Convention's Article 12 outlining children's right to meaningful participation.

Further to this, there is a clear significance for school psychology of the Convention's more specifically educationally focused Article 29(1), which provides a goal-oriented, qualitative dimension to Article 28 which establishes children's basic right to access education (UN, 2001). Article 29(1) indicates that a child's education should be directed to develop: The child's personality, and mental and physical abilities; a respect for human rights, different cultures and civilizations, including the child's parents; the child as a responsible citizen, acting in the spirit of tolerance, equality, and friendship; a respect for the natural environment (UN, 1989). Notably, the UN General Comment on Article 29(1) (UN, 2001)

elaborates upon the aims of the Article, laying particular emphasis within education upon developing children's self-esteem, conflict resolution skills, and anti-racist attitudes, in ways which are child-centred, empowering and non-sexist (paragraphs 2, 8, 10, 11). The General Comment emphasizes not only the need for relevant developments through curriculum strategies, but the equal importance of homologous policies, pedagogies and ethos within schools, universities and communities (UN, 2001, paragraphs 18, 19). The broad implication from Article 29(1) and the associated General Comment (UN, 2001) is that there is a clear opportunity and imperative for school psychology at national and international levels to engage with programs and service delivery models which promote the development of children's identity and social interaction.

Of additional relevance for school psychology is Article 23 of the Convention which provides a particular highlight on the rights of the child with a disability, including, where possible, the free access to assistance to promote the disabled child's fullest possible individual development, participation, social integration, and self-reliance (UN 1989, Article 23, paragraphs 1, 2, 3). Article 23 also identifies the need, particularly in developing countries, for exchange of information about psychological interventions appropriate for the rehabilitation, education and vocational progression of children with disabilities (UN 1989, Article 23, paragraph 4). The UN General Comment on the Rights of Children with Disabilities (UN, 2007) further indicates the appropriateness of psychological services for children with disabilities and their families in promoting their child's learning and social capabilities, rehabilitation, recreation, and upbringing (paragraphs 41, 46, 51, 70).

Notwithstanding the attested interconnectedness of the specific articles of the Convention (UN 2001, paragraph 6), and the importance of integrated intervention programming in relation to the aims of the Convention (Britto & Ulkuer, 2012), it can be concluded then that there are five potentially significant and compatible priorities for school psychologists in relation to a State party's obligations under the CRC: Development of children's literacy; reduction of the abuse and physical punishment of children; optimization of children's participation rights; development of children's identity and social interaction; development and participation of children with disabilities.

School psychologists' distinctive contribution to Convention strategy

The issue of how school psychologists make an effective and distinctive contribution to raising and achieving a range of relevant outcomes for children is a perennial one, which extends beyond considerations specific to the Convention (Farrell, Jimerson, & Oakland, 2007; Farrell et al., 2006). Britto & Ulkuer (2012), however, identify a relevant strategic approach: 'Although much is known about interventions for physical health, there is much less by way of universally agreed on evidence for what works and how it works in providing care for children's

socio-emotional well-being and ability to learn and the concomitant optimal indicators to benchmark that progress' (p. 100).

This conclusion links well with recent identification, internationally, of the distinctive contribution of school psychologists as scientist-practitioners in respect of services provided to children and young people (Fallon, Woods, & Rooney, 2010; Frederickson, 2002; Jimerson, Burns, & VanDerHeyden, 2007; Lane & Corrie, 2006; Lunt, 2000). Lane and Corrie (2006) provide detailed analysis of four inter-related core functions of the psychologist scientist-practitioner, which are: Effective judgement, reasoning and problem solving; psychologically grounded formulation; effective intervention planning and monitoring; self-evaluation. The authors acknowledge that the ways in which these skills are combined in different spheres or activities of applied psychology may differ: '... the scientist practitioner model is... an approach to professional practice that encompasses rigour, science, artistry and ingenuity' (Lane & Corrie, 2006, p. 3).

It is conceivable that different combinations or emphases of these scientist practitioner core functions may be relevant to any of the five significant Convention priority development areas. For example, in prioritizing improved literacy development it would be important to be able to evaluate available literacy measures and the contexts of literacy learning difficulty (effective judgement and reasoning); to understand the causal pathways of literacy learning difficulties (psychological formulation); to plan complementary intervention approaches that are linked to causes, delivered at appropriate levels of the organization, group and individual, and which are feasible within context (effective intervention planning); to evaluate formatively and summatively the effectiveness and efficacy of the intervention approaches (self-evaluation).

School psychologists deliver services through combinations of assessment, intervention, consultation, training, and research activities (Farrell et al., 2006), and the notion of a scientist practitioner poses different challenges within each sphere (Lane & Corrie, 2006). Recent conceptualizations of the scientist-practitioner model emphasize the psychologist's integration of roles of practitioner, consumer of research, and producer of research in the support of an evidence-based practice which is able to use and produce knowledge which is rigorous, objective, and generalizable alongside that which is subjective, holistic and applicable to the individual (Lane & Corrie, 2006; Crane & McArthur Hafen, 2002). Traditional knowledge hierarchies which privilege randomized control trials are not always appropriate to the questions being asked about an intervention: Single case studies or quasi-experimental trials may be relevant in the innovatory phases of an intervention, or at later phases where the generalizability of a tried and tested approach is being evaluated (Frederickson, 2002). From the Individuals with Disabilities Education Act (IDEA) in the United States, Knotek (2007) identifies the challenge to school psychologists in developing robust methods to evaluate school students' responses to intervention (RTI) for academic and behavioural goals: '... how will teachers integrate their prior understandings of a student-focused etiology of learning disabilities into an ecologically oriented instructional model? How will teachers

adopt “evidence-based interventions” that may work well under ideal conditions in a university learning laboratory, but are then implemented within the ecological complexity of their individual school sites?” (p. 53).

The scientist-practitioner model then may pose implementation challenges within a specific setting or problem scenario. Accordingly, Lane and Corrie (2006) emphasize the professional benefits of exploring and communicating how psychologists operate effectively as scientist-practitioners. The following section of this article presents a case illustration of the authors’ national-level scientist-practitioner contribution, using research and consultation functions, to one of the five identified school psychology priority development areas relating to the Convention. In light of the identified absence of explicit ‘top-down’ impetus for school psychology implementation of the Convention, the case illustration begins by exploring the ‘bottom up’ impetus for the psychologists’ scientist-practitioner contribution.

Case illustration of Convention-related school psychology priority ‘Reduction of the abuse and physical punishment of children’: Researching the effectiveness of solution focused brief therapy (SFBT) in child protection with children and families

Background and aims within the SFBT research project

In 2011, the authors conducted a UK government-funded research project to systematically review the international evidence for the effectiveness of solution focused brief therapy (SFBT) with children and families. The technical process and findings of this research are reported elsewhere (Bond, Woods, Humphrey, Symes, & Green, 2013; Woods, Bond, Humphrey, Symes, & Green, 2011), although the context of the project, its interpretive challenges, and its impact as a piece of research work by school psychologists merit further exploration.

The commission for the work emanated from a serious case review (SCR) of a child death through parental/carer abuse in England in 2007. The reason for the focus upon SFBT was related to its use as part of the intervention by social workers with the child’s mother prior to the child’s death and there was, understandably, a degree of scepticism from commissioners about any use of SFBT in the context of child protection work. The researchers were awarded the commission on the basis of their scientific research background, previous relevant research, and experience as specialist psychologist practitioners (using consultation, assessment, intervention) in the field of child protection and safeguarding.

Though the initial commission was rescinded on account of revised spending priorities and a full national review of child protection procedures, government commissioners restarted the research in November 2010 in direct response to awareness of a forthcoming television broadcast (December 2010) which focused upon the case of the child’s death and featured footage of the child’s social worker using SFBT with the child’s mother.

Three conclusions can be drawn from this background. First, although research may often not be viewed as, or aim to be, 'high stakes' in relation to practice (Jones, 1998; Lane & Corrie, 2006), this particular piece of research, which originated from practice and was commissioned to practitioner researchers, was clearly of high practical significance to government regulators, practitioners, and trainers in SFBT. It follows that although the apparent primary aim of the research was to evaluate the evidence of effectiveness of SFBT with a range of child and family problems, its critical aims were identified as the interpretation of such evidence in relation to practitioners' use of SFBT and the regulation of SFBT practice within child protection. Second, the commissioning of psychologists to provide expert opinion on this high stakes problem related specifically to the unique background of the psychologists' roles in specialist practice and scientific methodology, bearing testimony to the utility of the scientist-practitioner model in promoting positive outcomes for children. Third, this research project had a political dimension in that its outcomes have implications for the governance of practitioner processes, which might find it difficult to assimilate conclusions or recommendations which are not easily encapsulated by rules or protocols. Notably, constructive incorporation and utilization of the political dimension to school psychology practice and research have been identified as both necessary and useful to promoting its impact (British Psychological Society, 2002; National Association of School Psychology, 2006).

Scientist practitioner issues within the SFBT research project

Woods et al. (2011) detail the technical process of the SFBT research project, though five issues can be highlighted in light of considerations of the school psychologist's scientist-practitioner contribution (Woods & Bond, 2012). First, there are considerations about the interpretation of published research evidence (scientist practitioner principle: Effective reasoning and judgement; Lane & Corrie, 2006). The evaluative frameworks utilized within the particular review process are comprehensive, and so within the space and style constraints of a single journal article, most relevant research reports could be found to have deficiencies; furthermore, the majority of research was reported by practitioners, whose research corresponds more closely to the demands of their practice context than their research design aspirations. These considerations relate in turn to the level descriptors used to identify 'best evidence' in relation to SFBT intervention; different evaluative frameworks may produce different evaluations and different threshold criteria for 'high', 'medium' and 'low' quality research reporting could have been adopted. It follows that an evidence base evaluation that may be described as 'limited' in one context can be described as 'promising' in another.

One particular issue within the SFBT project concerned the communication of the relative and complementary value of large scale quasi-experimental research and case study evaluations, with the former tending to be seen as too broad to be useful (e.g not all SFBT clients made improvements; range of intervention lacking descriptive detail or rationale), whilst the latter could be seen as lacking

transferability value, despite encapsulating complex description and convincing causal information. A further issue related to the need to explain the unavailability of evidence comparing ‘matched’ participants within child protection cases, since as part of ethical practice, those clients who would receive SFBT intervention would be those who were likely to benefit from it, and would differ in this respect from those who did not receive an SFBT intervention.

Second, there was an issue of identifying salient issues within the presenting problem (scientist practitioner principle: Formulation; Lane & Corrie, 2006). It emerged that there needed to be a separation between the question of using SFBT within the context of child protection casework for any variety of purposes (e.g. child behaviour difficulties), and the much more critical concern about the direct use of SFBT focusing upon an area of family functioning that placed the child at significant risk of harm (e.g. parental care level). Interest in the research endeavour focused then very sharply on developing understanding and interpretations relating to a relatively small proportion (less than 3%) of the reviewed evidence. In reality, this focus became the ‘critical success factor’ of the project (Muller & Jugdev, 2012).

Third, with the focus established as being firmly upon the direct use of SFBT to reduce recurrence of maltreatment, there was an uncomfortable realization that the basic question of the effectiveness of SFBT within child protection was not actually the one which related to the problems of the use of SFBT within the SCR of the child’s non-accidental death (scientist practitioner principle: Effective intervention planning; Lane & Corrie, 2006). In reality the intervention failure had not been related to the implementation of SFBT per se, be it an effective intervention on that occasion or not, but rather to the integration of the SFBT intervention within the wider casework plan and risk management. Given the fundamental inappropriateness of an entirely solution-focused approach within a child protection case (Woods et al., 2011), part of the problem-solving process between the school psychologist researchers and commissioners of the work was to agree that the search for research on an exclusively or free-standing SFBT approach to child protection work is inappropriate. At the same time, it was important not to dismiss the potential relevance of SFBT to child protection, either by misunderstanding or expediency, and to establish the more appropriate question of whether, how and when SFBT might be an effective part of a co-ordinated child protection plan including comprehensive risk management (Antle, Barbee, Christensen, & Martin, 2008).

Fourth, the SFBT project required extensive consideration of the implications of broad definitions of evidence-based practice which require the integration of best available research evidence with clinical expertise in the context of client characteristics, culture, and values (American Psychological Association, 2006) (scientist practitioner principle: Effective intervention planning; Lane & Corrie, 2006). Such contemporary definitions of evidence-based practice present a challenge to the view that knowledge from research can be applied to people and situations in a linear, ‘top-down’ fashion (Berliner, 1992). In the context of the SFBT project, this issue related particularly to concerns about the transferability of research findings to the

complexity of child protection work, where individual families often evidence multiple, long-term problems (Munro, 2011). Much debate surrounded the psychologists' conclusion that '... on the basis of a thorough knowledge and understanding of a particular child and family ... it is plausible that in some cases, SFBT may, as part of a comprehensive package of ongoing assessment and intervention, facilitate positive change in parenting where children are considered to be suffering, or be likely to suffer, significant harm' (Woods et al., 2011, pp. 49, 51). Inconveniently, this highlighted that, despite the imperfect evidence base for the effectiveness of SFBT, the intentions of the social worker shown applying SFBT in the case of the child who had died might not be indefensible. Interestingly, the psychologists were able to actively support this conclusion with reference to government's own child protection review which conceptualized evidence-based practice as 'not simply a case of taking an intervention off the shelf and applying it to a child and family ...' but rather '... drawing on the best available evidence to inform practice at all stages of the work and of integrating that evidence with the social worker's own understanding of the child and family's circumstances and their values and preferences' (Munro, 2011, p. 92). Thus, the psychologists were able to assert that 'research evidence in relation to the effectiveness of an intervention such as SFBT with particular types of child and family problems, provides a starting point, rather than the final word, for effective and safe practice' (Woods et al., 2011, p. 53).

Fifth, the need to develop understanding of the implications of the issues outlined above required the psychologists to commit to a process which critically evaluated how they were using scientific method to answer a question from practice (scientist practitioner principle: Self-evaluation; Lane & Corrie, 2006). In order to maintain a viable collaboration it was necessary not only to understand the nature of the presenting problem and appropriate answers to the salient questions therein, but also to understand, and respond constructively to, the reason for the concern about the problem by the commissioners at that point in time (BPS, 2002). Although the presenting problem in this commission was apparently relatively straightforward, entailing easily accessible and controllable data gathering, a very high level of, sometimes challenging, discussion was needed between the psychologists, the commissioners, and the project advisory group, in order to arrive at agreeable answers to the questions posed; this challenge links well with Argyris' (1999) imperative that knowledge be made 'actionable' and 'useable' for practitioners and policy makers. Furthermore, the commitment to developing mutual understanding was viewed by the psychologists as an ethical imperative since, although the questions asked were difficult to answer usefully, the task of doing so was critically important for the provision of appropriate child protection services.

Discussion

It has been shown here through case illustration that school psychologists can, through their role as 'scientist-practitioners', make a distinctive and significant contribution to the achievement of the Convention-related priority to reduce

child abuse (Britto & Ulkuer, 2012; Lane & Corrie, 2006). A similar case illustration, entailing research, assessment, and intervention, can be cited in relation to UK school psychologists' ongoing work in relation to the Convention-related priority to develop children's literacy (Barrett et al., 2002; Reason, Frederickson, Heffernan, Martin, & Woods, 1999; Reason & Stothard, 2013; Reason & Woods, 2002; Woods, 2002; Woods, Stothard, Lydon, & Reason, 2013). Common to both these cases is that, in the absence of explicit links between the Convention and governance of school psychology preparation, regulation or quality assurance, a significant factor in the psychologists' involvement was the need and ability to respond to significant contemporaneous events at a national level (i.e. review of a non-accidental child death, and school psychologist professional negligence litigation respectively) (also Farrell et al., 2006). The present analysis shows therefore that the link between school psychology practice and the Convention is largely implicit and driven from 'bottom up', rather than strategically from 'top down'. This state of affairs arguably falls short of Convention articles requiring States parties to fully implement and promote the Convention and its aims, placing them at risk of being 'lost in translation' from international/national legislation designed to enact the Convention and school psychology practice situated at county, district or local levels (Britto & Ulkuer, 2012; HM Government, 2010).

In order to connect firmly the work of school psychologists to the aims of the Convention, the authors propose that the current implicit links between the two should form the basis for a professional endeavour to develop an explicit bridge. This would require significant intra-professional development work which would ultimately result in explicit references to the Convention within school psychology preparation, regulatory, and quality assurance documentation. This in turn would correspond to developments in school psychology training programmes and service delivery strategies. The present analysis has identified five Convention-related development priorities for school psychologists but a broader analysis may identify more such priorities. The impetus for development work to link the practice of school psychologists to the aims of the Convention could be resourced through the relevant quality assurance bodies at national level. In the UK, the British Psychological Society has an impressive track record in the commissioning of expert school psychology working parties and task groups to influence the strategic direction of professional practice in relation to a range of issues such as dyslexia, anti-racism, and children in public care (British Psychological Society, 2013; Reason et al., 1999). A powerful catalyst for bridging school psychology governance to the Convention could also emerge from international school psychology communities, such as the International School Psychology Association (ISPA), whose international agenda parallels the international accord of the Convention itself.

A final question, however, can be asked about the value of the endeavour to make an explicit bridge between the Convention and school psychology: What benefits could be gained for the time invested? We propose two such benefits. First, an explicit Convention-related mandate within school psychology, linked

with national and local priorities, would support State parties' responsibilities to enact the Convention and would ultimately be useful to a State party's Convention reporting requirements (UN, 1989, Article 44). In the same way that school psychologists may have pioneered within educational services the value to practice of 'research' and 'ethical sensitivity', a need to foreground the Convention in relation to their work in education and social care settings has the potential to make the aims and operation of the Convention more widely known, understood, and operationalized (UN, 1989, Article 42). A second reason to embark upon development work to instil explicitly the aims of the Convention within school psychology governance concerns ethicality and professional identity. Theory and research in relation to school psychologists' role definition abounds (Frederickson & Miller, 2008); Fallon et al. (2010) acknowledge the established core functions of the school psychologist's role, but identify strong contextual influences upon the varieties of work in which school psychologists become engaged. Notably, recent increase in the UK of financial devolution of local government budgets for school psychology services has increased professional awareness of the ethical dilemmas that a 'free market' may present to school psychologist practitioners and services (Association of Educational Psychologists, 2011). A fundamental question of what school psychology is about, other than being scientist-practitioners and maintaining a healthy finance balance sheet, may come into ever sharper focus. The authors propose here that the Convention provides school psychology with a framework to develop its legitimate mission and inspiration.

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