

Psych *perspectives*



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Fall

2005

President's Letter

By
Debra Layne

Greetings all! I sincerely hope that this letter finds each of you well and enjoying a wonderful beginning to a new school year. It is hard to believe that summer has come and gone and we are embarking, once again, on a delightful, yet often challenging, journey throughout a new school year.

I begin by stating that I am honored to be serving as your President for this 2005-2006 term. I am also honored to be serving with such a wonderfully experienced and hardworking group of individuals. We are truly blessed to have so many talented, generous, and committed members among our ranks who promote and enhance our profession.

Though I feel that I know most of you quite well, given my time within this profession and my service to the State Association through such roles as Treasurer and President-Elect, I would like to introduce myself and share a few tidbits of information with those of you whom I may not have had the opportunity to meet as of yet. I work as a full-time School Psychologist in the Putnam County School (PCS) System. I am currently beginning my fifth year with PCS. I served one year, prior to obtaining employment in PCS, as a Contracted School Psychologist within the Mingo County School (MCS) System. I hold a Master's Degree in Diagnosis and Intervention Psychology and an Education

Specialist Degree in School Psychology – both from Marshall University Graduate College. I hold National Certification with the National Association of School Psychologists as well as I hold a Level I License in School Psychology from the WV State Board of Examiners of Psychologists. Regarding my personal life, I reside with my husband and our dog in a town near where I work. My husband and I are expecting our first child, a girl, in early November.

Just as major changes are occurring within my personal world, they are also occurring within our professional worlds. This is such an exciting time for the field of School Psychology. As I write this letter, a Response to Intervention (RTI) pilot project is taking place within our state under the guidance of the WV Department of Education (Dr. Lynn Boyer, Executive Director of the Office Of Special Education, WV State Department of Education and Linda Palenchar, Coordinator of Learning Disabilities, WV Department of Education). Eleven elementary schools throughout our state are participants in this year long project. I am extremely proud to say that Winfield Elementary, a school which I serve within my own county, is a

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participant and I am the Project Coordinator working with our dedicated members of the team – Patricia Homberg, Special Education Director, Karen Fragale, Assistant Principal, and Beverly Racer, Educational Diagnostician – not to mention our committed and extremely capable staff of teachers. If you haven't heard of RTI or Dibels yet ... or would just like to know more about this project ...please join us at our Fall Conference which will be held in Martinsburg, WV, on October 23, 24, and 25, and you may learn more. Visit the State Association Website at www.wvspa.org for program information and a great deal of other helpful information.

Given that the field of School Psychology is changing, my question to you is, "Are you changing with it?" As a State Association, we are feverishly working toward "retooling the toolkit" of our members. We have offered and continue to offer up-to-date topics/trainings at our state conferences as well as periodic workshops outside of the conference venue. However, we can not accomplish this task without you.

This organization is you! We need and welcome your service and input. There are so many ways in which you can become involved -- becoming a member, serving as an executive board member, serving on a task force/committee with the board, contributing your ideas/newsworthy notes to our newsletter, visiting and promoting our website, contributing items for our website (e.g., photos, articles), etc.

As a final thought, I leave you with a quote from Peter Senge: "You can't force commitment, what you can do ... You nudge a little here, inspire a little there, and provide a role model. Your primary influence is the environment you create." Ψ

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Ed Morgret, Wood County School Psychologists, Nancy Cooper Award Recipients

Ed Morgret was selected as the Outstanding School Psychologist of the Year for 2005. Ed is the lead school psychologist for Hampshire County Schools.

Wood County Schools was selected for the Outstanding Delivery of School Psychological Services. Robert Childers, Gary Battin and Nancy Cooper, Wood County School Psychologists, accepted the award.

Nancy was also awarded the Special Friends of Children Award. Nancy also announced that she was retiring.

Karen Edgell, school psychologist for Marion County schools and former member of the West Virginia Board of Examiners of Psychology, was awarded a Certificate of Appreciation for her dedication and hard work on the board of examiners representing school psychologists. Ψ

Janet Martin-Day, Sarah Kendall: KCS School Psychologists of the Year By Charles Szasz

Janet Martin-Day and Sarah Kendall were selected as 2004-2005 School Psychologists of the Year for Kanawha County Schools. Janet Martin-Day has served as a school psychologist for 21 years. Janet was also a teacher for ten years.

Sarah Kendall has been employed by Kanawha County Schools as a school psychologist for 17 years. Sarah received her Ed.S. from the West Virginia Graduate College in 1988. Sarah was instrumental in obtaining a block grant to purchase weight room equipment for Capital High School to promote physical fitness. Sarah is currently the school psychologist for the Capital High School feeder school area. Ψ

Emotional and Behavioral Problems of Young Children: Effective Interventions in the Preschool and Kindergarten Years

By
Gretchen A. Gimpel and
Melissa I. Holland

Reprinted from
CASP Today, Summer 2005
Book Review

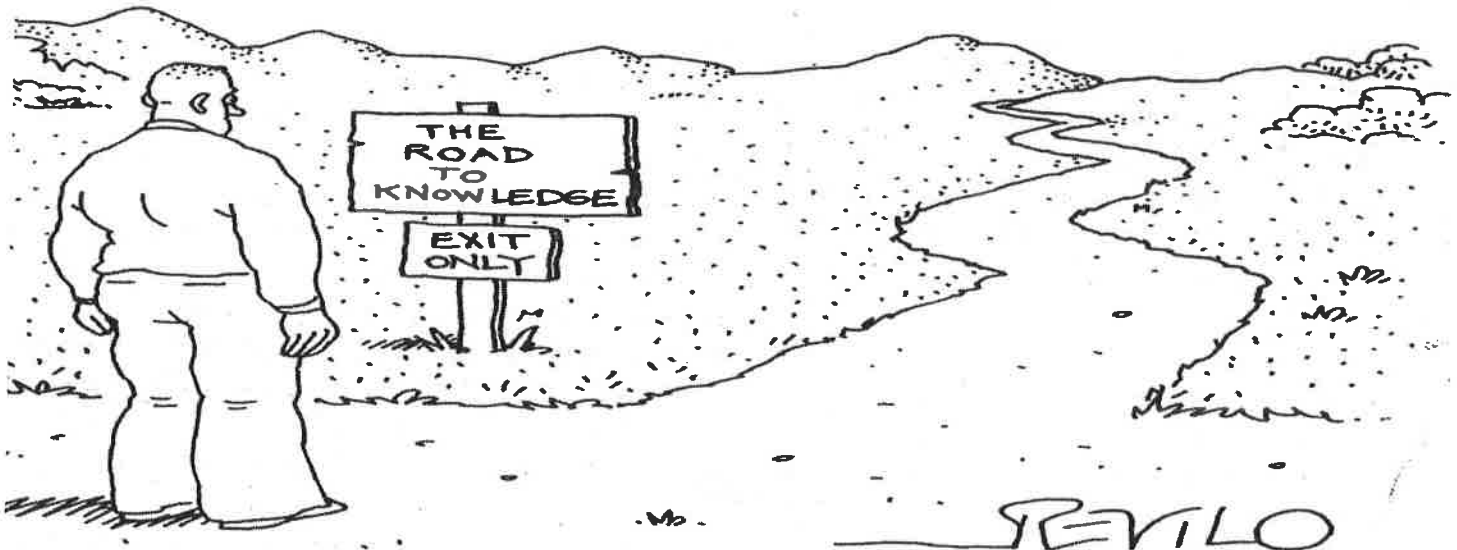
In *Emotional and Behavioral and Behavioral Problems of Young Children – Effective Interventions in the Preschool and Kindergarten Years*, the authors note that many children who exhibit emotional or behavioral problems in their early childhood years will continue to have such problems over time. Therefore, preschool/kindergarten is an ideal time to provide interventions.

The book reviews emotional and behavioral problems that may be exhibited by children during the preschool and kindergarten years. It gives an overview of disorders, including symptoms and prevalence and it cites a great deal of research, including predictors/continuity of such problems. One chapter is devoted to the assessment of young children, giving a thorough

overview of assessment measures and techniques including how to conduct a parent/teacher interview, tips for interviewing young children, rapport building, rating scales and structural observations. The remainder of the book provides detailed information regarding interventions for specific problems commonly seen in the early childhood years. The authors divided them into Externalizing Behaviors (including conduct problems, ADHD, Oppositional Disorder, temper tantrums), Internalizing Behaviors (including fears, Anxiety, Depression, Social Isolation) and Everyday Problems (feeding, toileting, sleeping problems). The final chapter addresses working with children who have been abused, including PTSD.

This book, provides step-by-step information on treatment/intervention for each problem behavior, citing best practices and research based findings. There are many handouts (parent training, behavior logs, feeling charts, etc.), which school psychologists can pull out and utilize right away. The authors give step-by-step guidelines for conducting parent trainings, school-based interventions, social skills interventions and behavioral techniques.

This book is an excellent resource for the beginning school psychologist, as it describes problem behaviors in non-technical terms and provides a great deal of practical, step-by-step guides to assessment/intervention. The more experienced school psychologist might find the book simplistic, but still an asset on your shelf, as there are excellent handouts and useful tips on a wide variety of problem behaviors. Ψ



Reading Strategies To Support All Readers

By

Lorene Reid, Ph.D,

Missouri Association of School Psychologists

Reprinted from The Tennessee School Psychologist

On January 8, 2002, President George W. Bush signed into law the No Child Left Behind Act of 2001. According to the U.S. Department of Education, there are four basic concepts that form the foundation of No Child Left Behind: (1) stronger accountability, (2) more freedom for states and communities to decide how to use Federal educational funds, (3) the use of scientifically based instructional programs, and (4) more choices for parents. As directed by NCLB, states must test children in grades 3 through 8 annually in reading and math. In this way, the states will be able to document their students' academic progress. One of the goals of this legislation is to provide quality instruction for all children in the United States so they will become proficient readers by the end of third grade.

In order to achieve this goal, teachers and school psychologists can collaborate to help struggling readers achieve success. As professionals, we can work with students to improve the five reading skills that are the focus of NCLB. These skills were identified in the Report of the National Reading Panel in 2001 as critical to early reading success. They include the following: (1) phonics, (2) phonemic awareness, (3) fluency, (4) comprehension, and (5) vocabulary Development. By using reading strategies that address these skills, we can help students become successful readers.

PHONICS

Phonics includes knowledge of the letters of the alphabet and the relationship between the letters of written language and the sounds of spoken language. Activities that promote student success including the following: learning the letters of the alphabet and learning the consonant sounds, blends, digraphs, and long and short vowel sounds.

PHONEMIC AWARENESS

This includes the knowledge that words are made of the smallest units of sound called phonemes and that phonemes are associated with letters such as in segmenting and blending. Activities that promote phonemic awareness are learning about rhyming words and alliteration, studying word families, and using a Word Wall to help children interact with words in a meaningful way on a daily basis. Making words with plastic or paper letters and putting words into categories (word sorts) are two activities that promote phonemic awareness.

FLUENCY

This involves reading that "flows smoothly" and accurately from the reader's lips. Reading specialists generally agree that there are five components of fluency: reading rate, accuracy, fluidity, phrasing, and expressiveness. Consequently, fluency involves grouping words together to make phrases that make sense, exhibiting automaticity while reading, and reading with expression. Strategies that aid fluency include: choral reading, repeated readings with a tape recorder, listening to books on tape, Sustained Silent Reading, echo reading, and Readers' theater. Another activity that positively impacts reading fluency is the modeling done by the teacher during read-alouds. During reading-alouds, children hear how a good reader sound and they observe examples of phrasing, proper intonation, and expressiveness.

COMPREHENSION

Comprehension involves making meaning from text and is the goal of all reading. Strategies that aid comprehension include the following: Anticipation Guides, graphic organizers such as KWL charts and webs, Reciprocal Questioning, Double-entry Journals, and Cloze Procedures. Anticipation Guides provide students with the opportunity to respond to a number of true/false statements about the topic that they are going to explore. By reviewing their answers, the teacher can get an idea of the student's prior knowledge about the topic. Also, the Anticipation Guides help the students focus their attention on the text and give them a purpose for reading as they look for information related to the guide.

Reciprocal Questioning is another activity that focuses on comprehension. In this activity, the teacher and students read a section or a chapter of a text. Then, before the teacher has the opportunity to ask the students

questions about the reading selection, the students ask the teacher questions. After the students ask their questions, the teacher is free to ask hers. This activity helps the students learn to formulate questions about a text and encourages higher-order thinking. It also gives the students the opportunity to take ownership of their learning as they pursue questions that are of interest to them. They become more active participants in the discussion of the story since they initiate the questions first, rather than always responding to the teacher's questions. This activity motivates the students to concentrate more on their reading so they will have the information necessary to formulate questions to ask the teacher.

Double-entry Journals are another way to motivate students to concentrate on making meaning from a text. In this type of journal, students draw a vertical line down the middle to each page to divide the page into two sections. In the section of the left, students copy sections of the text that they find interesting or thought provoking. On the right hand side of the page, students record their ideas, impressions, and questions related to this segment of the text. In this way, students respond to a text in a personal, interactive manner. They are encouraged to read more and to make sense of the text because they are making a personal connection to it. When they share their journal entries in class discussion, the students can see how their ideas/questions are similar to or different from those of their classmates.

Cloze procedures are also effective means to promote reading comprehension. In a cloze procedure, students are asked to fill in the blanks with appropriate vocabulary. In this activity, the teacher has written a series of sentences or paragraphs about a given topic and she has omitted words from the sentences. She may choose to omit words in regular intervals (every fifth word) or to omit only "key" vocabulary words. This is a good way to introduce very young students or English Language Learners to note taking as well as a way to reinforce vocabulary for all students.

VOCABULARY DEVELOPMENT

Vocabulary might best be described as words that students need to know to communicate efficiently and effectively about a topic. Learning new vocabulary words is always a challenge, but this is especially true after second grade when students are exposed to social studies and science. Many social studies and science chapters contain ten or more new vocabulary words.

In order to remember these words and to use them correctly, students need multiple opportunities to read the words, hear them, and use them in speech and in writing. Word Walls, Word Sorts, and Making Words are effective ways to learning vocabulary as well as to reinforce spelling and phonemic awareness. Cloze procedures are a good way to assess vocabulary since they require students to fill in blanks with appropriate words in order to make sense of the sentence.

Constructing Definition Word Maps is another way to learn new words. These word maps provide a framework for organizing information about a new vocabulary word. Here students focus on three aspects of the new word: (1) the category to which it belongs, (2) the attributes of the concept, and (3) a few examples to illustrate the concept. This information is arranged in a graphic organizer with the new word in a circle in the middle of the organizer. The category, the attributes, and the examples all branch out from this circle and form a web around the new word.

Another good way to learn new vocabulary is to make a Personal Word List. Here each student chooses unfamiliar words from a text. The student makes a chart with the following columns: (1) Word, (2) What I think it means, (3) Clues (context or structure), and (4) Definition from dictionary. After the student picks her words, she discusses with other students what the words may mean and tells why these words are important in this text. After discussing contextual and structural clues as to the words' meanings, the student finds the definition of the words in the dictionary and discusses how close her definition came to the one in the dictionary. This activity provides the students with the opportunity to have ownership of their vocabulary development. They choose the words themselves and use their prior knowledge and imagination to speculate about the meaning of the words before they actually look up the definition in the dictionary. They also have the opportunity to share their predictions about the meaning of the words with other students and to explain how they arrived at their predictions.

The Magic Square is another activity that helps students add to their vocabulary knowledge base. In this activity, the student works with two columns of information: (1) vocabulary words that are listed as A, B, C, etc. and (2) definitions of the words that are arranged from 1 to 10. The student matches the correct word and definition and records the number of the definition that goes with each letter on the magic square.

When the student has recorded all of the numbers in the correct letterbox of the Magic Square, the sum for each row across and each column down will be the same. This number/sum is the Magic Number. Most students will agree that this activity is a good way to review vocabulary before a test.

In conclusion, No Child Left Behind is the name given to the Federal Legislation that was passed by Congress in 2001. The name given to this legislation says it all. With the enactment of this legislation comes a challenge to provide quality reading instruction that will help every child become a successful reader. Through the use of reading strategies that address the five reading skills that are the focus of No Child Left Behind, teachers and school psychologists can work together to help students become proficient readers.

For more information about No Child Left Behind, call 1-800-USA-L EARN and request "Reading Tips for Parents" or visit the US Department of Education website at <http://www.nclb.gov> Ψ

All Psych Referrals Are Not Created Equal

By

Barry T. Christian, Ph.D.

Reprinted from New Mexico Association of School Psychologists

In some districts, up to 50% of the students recently referred for initial school psychology evaluations have not qualified for ED or other special education services. These students often present garden variety social and conduct problems which make them the squeaky wheels at school...but not special education qualifiers. Each inappropriate referral for an evaluation requires 5 to 10 clock hours each of direct and indirect time. When schools have poorly defined referral criteria, the losers are the case load students and those with serious problems waiting to be identified.

And, yes, there is even a lighter side to this dark situation. After diligent research (not), we have assembled the "Top Ten Wackiest Reasons for Referral" to be stuffed in the school psychologist's box. Perhaps these will help us tolerate our own marginal referrals.

Okay, beginning with Number 10, here we go... your imaginary drum roll goes here.

This student really needs a school psych eval because...

10. Recent divorce, attorney told parent the school would do an eval.
9. There is a stack of disciplinary referrals on this kid and our principal is having fits. Please expedite.
8. We found out he lived in Bernalillo County for two years, needs eval.
7. The team feels he is not a self-actualized global citizen, may have problems entering first grade.
6. Counselor believes there may be something spooky going on here.
5. Grandma wants a school psych eval because she doesn't trust the mental health people anymore.
4. Aunt's hairdresser saw a kid just like him on Oprah. She believes he may be bipolar, or borderline, or something with a "B". Please eval.
3. Parent requested eval...wants to know when he will get his SSI check.
2. She started getting those really disgusting tattoos in strange places. Needs eval.

And our number 1 wacky referral problem:

1. He missed qualifying for LD so we thought we would try a psych eval.

Looks like there is still plenty of educating to be done out there. Have a great fall! Ψ



"Considering the heredity factor, it's not a bad report card, huh?"

Too Small, Too Soon: Low Birth Weight & Preterm Infants

By

Dr. Lola Heverly

Reprinted from *The Florida School Psychologist*, Vol. 4, Issue 4, September 1998

Low birth weight is the term used to describe infants who are born too small, and preterm birth is used to describe infants who are born too soon.

- Low birth weight (LBW): under 2500 grams or 5 pounds, 8 ounces;
- Very low birth weight (VLBW): under 1500 grams or 3 pounds, 5 ounces;
- Extremely low birth weight (ELBW): under 100 grams or 2 pounds, 3 ounces;
- Preterm birth: birth after fewer than 37 weeks of gestation;
- Very preterm birth: birth after fewer than 32 weeks of gestation.

Because of advances in neonatal care, many infants who weigh only 750 grams (1 pound, 10 ounces) at birth can now survive, however, they may experience significant long-term health and developmental problems. Also, infants born at 24 or more weeks of gestational age survive. Only 15% of infants at 23 weeks of gestational age survive, and almost none of the infants born at 22 weeks gestation survive (Allen, Donohue, & Dusman, 1993). More than three quarters of infant deaths are caused by babies being born too small or too early (Paneth, 1995).

Low Birth Weight/Preterm Facts

- In 1991, 7% of all infants in the United States were born too small, and 11% were born too soon (Wegman, 1993).
- In 1993, the US ranked 22nd in the world in infant mortality (Wegman, 1993).
- One family in 100 will suffer the loss of a child soon after birth.
- Low birth weight is considered an index of biological risk, because infants born low birth weight are more likely to have brain damage and/or lung and liver

disease.

- Low birth weight infants have higher rates of subnormal growth, adverse health conditions, and developmental problems.
- Rates of brain injury total approximately 7% for moderately low birth weight infants and increase to 20% among the smallest infants (Hack, Klein, & Taylor, 1994).
- Some of the less severe but more common developmental and physical delays reflect the fact that low birth weight children are disproportionately more likely to come from disadvantaged environments.
- Only 17% of all births are to African American families, yet 33% of all low birth weight babies are born to African American families.
- African American babies are twice as likely as Caucasian infants to be born low birth weight, to be born preterm, or to die at birth.
- Of the \$11 billion spent on health care for infants, approximately 35% (\$4 billion) of these dollars are spent on the incremental costs of low birth weight infants, with nearly half (\$1.8 billion) going to rescue the very tiniest babies.
- Charges for initial hospitalization for surviving infants weighing 500 to 600 grams at birth may average \$1 million (Pomerance & Gottlieb, 1993), and almost 70% die even with intensive care hospitalization.
- Premature babies given daily massage gain 47% more weight and are discharged from hospitals 6 days earlier, saving \$10,000 in medical costs for each child (University of Miami's Touch Research Institute).
- Cigarette smoking during pregnancy, low maternal weight gain, and low pre-pregnancy weight account for nearly 2/3 of all growth-retarded infants (Kramer, 1987).
- Cigarette smoking is the single largest modifiable risk factor for low birth weight and infant mortality. Up to 20% of all low birth weight births could be prevented if no pregnant woman smoked cigarettes (Chomitz, Cheung, & Lieberman, 1995).
- Low birth weight children score significantly lower on intelligence tests than do children of normal birth weight. These differences increase with decreasing birth weight (Breslau, Del-Dotto, & Brown, 1994).
- At school age, children who were born low birth weight are more likely than children of normal birth weight to have mild learning disabilities, attention

disorder, developmental impairments, and breathing problems, such as asthma (Hack, Taylor, & Klein, 1994).

- Approximately half of all very low birth weight children enroll in special education programs. Cerebral palsy, deafness, blindness, epilepsy, chronic lung disease, learning disabilities, and attention deficit disorder are all found more commonly in low birth weight infants (McCormick, 1993).

- Levels of achievement in reading, spelling, and math are lower for very low birth weight children than for full term children (Saigal, Szatmari, & Rosebaum, 1991).

- Researchers concluded that children with birth weights of less than 1000 grams have specific biologically based problems in attention (Klein, 1988).

- About 31% of low birth weight children will repeat a grade by 10, compared with about 26% of normal birth weight children (Corman & Chaikind, 1993).
Ψ

Addenda to Murphy's Law and Other Musings

(Source unknown)

Everyone has a photographic memory. Some don't have film.

He who laughs last, thinks slowest.

A day without sunshine is like, well, night.

Change is inevitable, except from a vending machine.

Back up my hard drive? How do I put it in reverse?

I just got lost in thought. It was unfamiliar territory.

When the chips are down, the buffalo is empty.

Ever feel like you are diagonally parked in a parallel universe?

How much deeper would the ocean be without sponges?

The 50-50-90 rule: Anytime you have a 50-50 chance of getting something right, there is a 90% probability you will get it wrong.

You can't have everything. Where would you put it?

Corollary: I started out with nothing, and I still have most of it.

Flashlight: a case for holding dead batteries.

A fine is a tax for doing wrong. A tax is a fine for doing well. Ψ



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