THE ROLE OF THE PSYCHOLOGIST WORKING WITH SCHOOL AGE CHILDREN WITH AN INTELLECTUAL DISABILITY

A Brothers of Charity Guidelines document for psychologists working in Special Schools in the Southern Services

Seamas Feehan, Yvonne McCarthy & Caitriona White (June 2003)
Mission Statement for the psychologist in the Brothers of Charity (Southern Services):

Psychologists shall honour and promote the fundamental rights, dignity and worth of service users. We work to create an understanding of the service user as a person so that existing resources are used optimally and that additional resources can be acquired in order to assist the person to live as an equal and valued member of society.

Contents

Mission Statement 1

Introduction:

The Changing Perspective 2
The Values and the Vision 2
Principles and Developments 4

Role of the Psychologist 6
1. Casework 8
2. Research & Evaluation 11
3. Organisational Support 11
4. Professional Responsibilities 12

References 13
INTRODUCTION

The Changing Perspective
The role of the psychologist has changed fundamentally over the past 35 years. Following the Commission of Enquiry on Mental Handicap (1965) and the expansion of specialist provision, the role of psychological assessment in the identification and placement of children with learning disabilities became paramount. Traditionally therefore, psychological assessments were primarily employed to assist in the diagnosis of children. These assessments contributed in turn to decisions about school and vocational placement. However, this type of psychological assessment and the reliance on psychometric tools in particular, have a limited use for the identification of the day-to-day needs of the child in the school or in the family. It is apparent since that time that the diagnostic model of assessment does not reflect the totality of the child's and of the family's experience.

The role of the psychologist has moved towards a systemic and collaborative model. This means that the psychologist engages in a collaborative process with the people in the child's bio-psycho-social system i.e. the student, the teachers and educational systems, the family and community along with other professionals involved with the child. The collaborative and team model is a more effective way of working with the school system. The role of the psychologist is best delivered within a dedicated multi-disciplinary team.

The Values and the Vision
Psychology is an autonomous profession and the psychologist works within a system of mutually, autonomous disciplines. The psychologist occupies a pivotal position within the services for people with learning disabilities. Psychologists strive toward a unique and positive vision in working to achieve services of the highest quality. The dynamic vision of the psychologist is derived from a developmental perspective, a scientific approach to the applied study of learning and behaviour, and a wide understanding of the varied influences on organisations and systems generally.
The psychological approach focuses on personal experience, cognition, emotions and behaviour, personal strengths and support needs. This allows for the setting of positive goals, rather than concentrating on deficits or problems. Intervention is based on developing personal strengths and identifying support needs. Effective case management and service user interventions based on this approach, require careful planning, structure, monitoring and evaluating. Psychology applies existing theories and also develops new models. Psychologists working in the services for children with a learning disability are likely to come from a variety of professional backgrounds. The relevant professional training could include clinical, community, counselling or educational psychology. Due to their diverse backgrounds, psychologists have played a significant role in the development of new approaches to working with people who have disabilities.

Fulfilling relationships are essential for personal growth, and psychology has studied interpersonal relationships at many different levels and in many different settings. These studies provide a solid, research-based knowledge foundation which allows them to help staff, families and children, in every aspect of their development.

Psychological practice has been influenced by a rich philosophical base and from the results of empirical research. Training in Psychology is rigorous and empirical. Psychology is concerned with developmental, interactive functioning on many levels. The psychologist's approach to dealing with all facets of functioning together with their understanding of organisational systems place them in a unique position to work in a thorough and wide reaching way to combat the environmental, physical and social barriers which create the experience of disability. Psychologist's practice is characterised by responsibility, competence, integrity and impartiality.
Principles and Developments

The principles and developments that have influenced the change in psychology practice include:

- **Normalisation**: The recognition that people with disabilities should have choice, live with dignity, participate and contribute to the community and grow in relationships (O'Brien 1989).

- **Inclusion**: Promoting equality and breaking down barriers which create the experience of disability by working with families to adapt schools and organisations to enable people with learning disabilities to be equal members of society. The value and practice of ‘inclusion’ is linked to the Social Model of Disability where disability is viewed as *not* being located within the individual but as an interaction between the person and the social and physical world which is designed for non-disabled people. Services have a role in reducing the restrictions the person faces and supporting them to lead their own life rather than trying to “fix” them. This means promoting equality and breaking down barriers, which create the experience of disability by working with families to adapt schools and organisations to enable people with learning disabilities to be equal members of society.

- **Research**: In general the findings of comparative outcomes for children attending mainstream school highlight the benefits to the student with a learning disability of being educated along with non-disabled peers in terms of social and academic performance (Baker et al 1994). Positive gains in general development and attitude in non-disabled classmates of children in mainstream schools is also borne out in the literature (Haring 1990). While comparative research findings are fraught with methodological difficulties, much of the literature now focuses on guidelines for effective inclusion (Stainback & Stainback 1996). However, much remains to be done to reduce relative social isolation and increase enjoyment in living. Effective work is also influenced by nationally and internationally acknowledged good practice.
• **Special Schools:** In a 1991 submission to the Irish Government's Review Committee on Special Education, the Psychological Society of Ireland identified the need for a clear, specific and unequivocal recommendation that all children with special needs should be educated within the mainstream school system with their peers of the same age. Since that time, there has been a large increase in the provision of special needs assistants and specialist resource teaching to children with special needs in mainstream schools. While many families now exercise their choice to have their child with special needs educated within a mainstream school, other families continue to enrol their child within special schools. Special schools continue to play an important role in the education of children with special needs. The psychologist supporting the child within the special school system can play an important role in promoting the need for the child to have opportunities for inclusion within the wider community.

• **Advocacy and Rights:** The struggle for justice and citizenship for people with disability has seen the growth of citizen advocacy groups and of service user participation in the services. In addition to having “voices and choices”, there is now an awareness that service users and their families need to influence the policies and practices that directly affect their lives.

• **Legal Developments:** Since the 1980s, international legislation has focussed on how inclusion for people with learning disabilities can be supported through organisational structures, curriculum development, parental involvement and the assessment of resources. These include the Education Act (1998) which endorsed the need to promote inclusion of all children in mainstream schools and in society in general; recent court cases and legal actions such as the Sinnot (2001) and O’Donoghue (1993) judgements and the Education (Disabilities) Bill 2002.
ROLE OF THE PSYCHOLOGIST:

The role of the psychologist can be looked at under four headings:

- Casework and this is sub-divided into Assessment, Positive Behaviour Support, Therapeutic Work, Consultation, Family Support, and Liaison with other bodies.
- Research and Evaluation;
- Organisational Support;
- Professional Responsibilities.
To be effective, the psychologist needs to work at the individual casework level, at a group level and at a systems level. While the work of each psychologist will vary from time to time and place to place, the role of a particular psychologist needs to maintain a balance between these core aspects of the role: Casework; Research and Evaluation; Organisational Support and Professional Responsibilities. Adequate protected time needs to be allocated for all aspects of the psychologist's workload and role. The psychologist reports professionally to the Head of the Psychology Department.

Referrals for work may come from family members, teachers, residential care staff or other members of the multidisciplinary team. Occasionally, a child with a learning disability may also self refer. Referrals are processed in consultation with the School Principal and with the multidisciplinary team. Following referrals, a clinical decision by the psychologist is required on the priority status of each individual referral and work by the psychologist will proceed from that basis. The psychologist has autonomy to decide the most effective use of the psychology resource. In casework, psychologists consider various factors when prioritising their work. Amongst these factors include the following:

- Children at risk of a deterioration in their quality of life or in psychological wellbeing;
- When there is distress in the family, the school or the child care system in coping with the child;
- Children in residential care may be at a disadvantage in terms of emotional security as their care is shared by a number of familiar (and unfamiliar) carers in comparison to those children who are reared within a family home; and
- Children in transition such as new students to a school; children for whom a transfer to a mainstream school is being considered; children moving from a junior to a senior cycle curriculum; and children who are leaving school for a potential vocational or training placement.

Collaboration and consultation between the school authorities, the employing agency and the psychologist is essential for good practice. Periodically, there is a need to review the work and the working methods in order to maintain good working relationships and to
deliver an effective service to the children. Where the issue involves an ethical dilemma, there is a resolution protocol in the Code of Ethics of the Psychological Society of Ireland (PSI) that may be employed by the psychologist.

In practice, each psychologist will create an individual role in the school. This role is created from a synergy of four factors:

a) The general climate of culture and expectation (formal and informal) under which the psychology service operates;

b) The needs of the individual children, the staff, teachers and families;

c) The training, skills, experience and interests of the individual psychologist him or herself;

d) Current research and good practice.

1. **Casework**

   This can involve a variety of direct and indirect interventions with students. It involves identifying strategies to develop the child’s potential, to educate the child more effectively and sometimes to manage the child more effectively. These strategies may include changing the environment in which the child is taught and sometimes in which the child lives. Good practice indicates that such strategies follow from an assessment of each individual and his or her environment.

   Casework will include interventions such as:

- **Assessment**

  The psychologist ideally takes a holistic approach or overview of all aspects of the person’s functioning in life rather than of one discrete aspect of functioning. Therefore the assessment concerns are with the person’s cognitive, emotional, social, interpersonal and intra-personal capabilities; participation and functioning in the community; personal independence and self care skills. Self determination, choice and control over her or his world and access to resources and support are important issues for exploration in assessment. Evaluation of interventions carried out with the person is an integral focus of
assessment. Assessment therefore addresses the nature of supports and resources in the person’s family and community as well as the person’s functioning. Comprehensive assessments are preferably carried out over time. The purposes of assessments vary considerably and the means by which assessments are carried out are multifaceted. Assessments are carried out in collaboration with the service user, teachers, carers, parents and other significant people in the service user's life. Assessments may include the use of psychometric tests but will not exclusively rely on the application of psychometric tests. Typically, psychological assessments will contribute to the development of Individual Educational Plans and Individual Care Plans. Psychologists acknowledge the value of other disciplines' contributions to assessments. Best practice indicates that collaboration between the disciplines is essential for comprehensive assessments, which identify the needs of the service user.

- **Consultation**
  An integral part of the work is to act formally and informally as a consultant to service users, staff and family, interested individuals and bodies. Consultation may be about providing information and guidance on people’s problems. It may also be about helping individuals to clarify their issues and concerns and to identify their own solutions to their own problems. A rich body of theory and knowledge informs the process of psychological consultation.

- **Positive Behavioural Support**
  Psychologists work on multi-element, positive programming approaches. This process may involve intensive and long-term work. A comprehensive, multi-element intervention has many stages including a functional analysis of presenting problems, careful prioritisation of intervention goals, altering the environment which may be contributing to the presenting problems, teaching new skills to the child, creating additional supports to staff and family, providing more satisfying opportunities and choices for the child and ensuring regular reviews of all interventions. Ethics and research make it imperative that psychologists adopt positive intervention strategies, which protect and augment the
person’s strengths and sense of wellbeing. A positive intervention approach is more effective than interventions that rely on aversive consequences.

- **Therapy and Therapeutic Intervention.**
  To devise treatment strategies for children and this may involve therapeutic intervention that will develop their self esteem, self control, personal independence and general psychological wellbeing. Counselling and psychotherapy for individuals or groups is one such intervention.
  Programmes can be delivered to individuals directly or through groups. Such groups can be "natural groups" of students that already exist or they can be specifically created for a therapeutic, programme or assessment purpose. Examples of such programmes could include Reducing Isolation; Fostering and Developing Relationships; and Social Skills Training.

- **Family Support**
  Family support involves working with the parents or guardians and with siblings or other family members who have an important part in the person's life. It may involve enabling families to understand and provide for their family member's emotional and social needs and in so doing, to acknowledge the person's developmental level and personal wishes. It can be about helping to reduce the isolation that can sometimes occur with having a family member with special needs and a learning disability. Family support may also involve providing opportunities to support and educate siblings and to facilitate their involvement in programme planning for their brother or sister with a learning disability. Some families need to be empowered to advocate on the service user's behalf for services within and outside of the school in order to enhance the person's quality of life.
  The psychologist can offer emotional support to families around issues of concern for their family member. Families may also require support to create their own solutions to those issues which they perceive as problematic. Finally, family support can also be achieved by helping to create links with others who are interested in the concerns of people with learning disabilities. This could involve helping people to access educational and support groups or indeed to create such groups.
• Liaison with Statutory and other Voluntary Bodies.
This may involve attendance at statutory case conferences, membership of core groups, advocating on behalf of service users to bodies such as the Department of Education and Science, Health Board, and Support groups.

2. Research and Evaluation
To undertake research on matters of relevance to school age children such as parental expectations, models of good practice and the supports that are required by families to assist their child benefit from education. Research may be undertaken by an individual psychologist, jointly or as part of a clinical team. Publication of research is supported to allow for dissemination of information and good practice.

3. Organisational Support
Psychologists can play a key role in contributing to general service development. This includes:
• Staff Training. This may involve the design and delivery of courses, coordinating course provision and consulting with those individuals and agencies delivering training.
• Team Membership. Psychologists are important members of various teams. Protected time is required to formalise the membership and working methods of such teams. In order to contribute effectively to these teams, psychologists need to be kept informed about proposed developments.
• Reviews. In collaboration with other clinicians, family, teachers and carers psychologists contribute to reviews and plans for students.
• Service Development. Psychologists have expertise in the area of evaluation and are involved in identifying the needs of children and their families. This means that we can play a unique and pivotal role in the development of new and innovative services. An integral part of the psychologist’s work is the development of pilot projects which will lead to general developments in the services, over time.
4. Professional Responsibilities

- Continuing Professional Development. It is essential for psychologists to keep themselves up to date with relevant knowledge, research methods and techniques, through reading, peer consultation, attendance at conferences, inservice training, networking and continuing education.

- Supervision and Trainee Placement. All psychologists need to receive appropriate professional supervision in line with the responsibilities of the post. Senior psychologists may be required to provide sufficient and appropriate supervision for recently appointed basic grade psychologists and for trainees.

- Psychological Society of Ireland. Members of the P.S.I. have an obligation to share the responsibility for maintaining and developing the profession of psychology in Ireland. This will involve networking with other members on issues such as policy development.

- Community Awareness. There is a responsibility to continue to inform the general public about (people with) learning disability. This will help to overcome the societal barriers to inclusion. This can be achieved by challenging negative attitudes, confronting fears, educating people about rights and by promoting social contact within the community for people with disability.
REFERENCES

1. Psychologists in the Brothers of Charity: “Working with People who have an Intellectual Disability”.
3. The Irish Psychologist, June 1996.

Contact: The Manager
The Psychology Department
Brothers of Charity (Southern Services)
Lota
Glanmire
Co. Cork

Phone (021) 4821012

For further information, go to:
- Psychologists working in Early Intervention Services
• The Role of the Psychologist working with Adults with an intellectual Disability
• Psychologists in the Brothers of Charity (Southern Services) Intellectual Disabilities Services