

Tales and Trails from Consultation: Improving Interdisciplinary Teams and Collaborative Practices for School Social Workers and Teachers

Mery Diaz

Abstract: Interdisciplinary team collaboration has garnered increasing attention. When team processes are effective, they serve to reduce service fragmentation and duplication of services, particularly in urban school settings. Additionally, interdisciplinary teams promote new professional interactions between teachers and school social workers that reduce feelings of isolation when addressing social, emotional, and behavioral issues of children. This reflection focuses on the author's experience facilitating interdisciplinary team development, her observations of the contexts and group work processes that support collaboration and those that create barriers, and finally, the consequential impact on the teacher and school social worker relationship.

Keywords: Collaboration; interdisciplinary teams; urban schools

Initiation by Fire

In 2006 on a cool March Wednesday afternoon, my co-worker Mark and I walked into the Bronx high school we had been assigned that spring. The building had a somewhat ominous feeling on this day, although we had been there before. The high school, a once thriving institution, was set inside a large pre-war structure and proudly displayed a history of notable alumni that seemed to trickle off by 1970's. As consultants, Mark and I had been to the school on a couple of occasions to meet with the principal and to set goals for our work with the child study team—a team that addressed academic and behavioral issues of students. We worked for a non-profit organization that partnered with high need low-income public schools in order to develop and improve systems for addressing academic and behavioral issues of children. Part of our work involved establishing or reorganizing interdisciplinary teams. Mark was the educational counterpart on our team. An experienced retired public school administrator, he was now consulting as an advisor to public school principals. I had started my new role as social work consultant just a month before, after having worked in direct practice as mental health therapist with children, adolescents, and families in a variety of settings. The principal at the school directed us to go forward in joining the team without any prior introduction to school staff.

Our goal that Wednesday was to introduce ourselves to the members of the child study team meeting, an already established team, and to begin outlining the parameters of our future work together. We were there to support their work and to offer resources and knowledge that could assist in developing strategies for students with academic and socio-emotional challenges. We were the “good guys” for sure.

Despite having two previous meetings canceled and a no-show team at our last scheduled meeting, Mark and I were quite optimistic that this time things would be different. The principal had assured us of member participation and that the group understood the purpose of our joining the meeting. Enthusiastically, we brought gourmet cookies and refreshments, along with a few handouts containing fancy graphics detailing our organization's mission and model for addressing student needs through interdisciplinary teaming. To our surprise, all the members attended the meeting.

Something, however, told me not all was right. The social worker, the team's leader, barely uttered a hello, avoided eye contact, and did not readily respond to our small talk. The psychologist, a man sitting very still at the end of the table, held a quite severe expression. Two teachers, a man and a woman, were fidgety but attempted nervous small talk in any case. What stood out most to me, however, was the small detail of no one eating the cookies. A small detail for sure, but in most settings

where much like mental health settings most welcome these little treats as gestures that are few and far between, participants happily dive into them without much prompting.

Mark proceeded with an introduction providing details of his past professional experience and highlighting some skills that he thought would be of service to the team. I followed by detailing my professional background. Before I was done, the psychologist balked, “None of that matters. You are not welcomed to our team!” I was taken aback, surprised, and made a quick mental review about anything that I might have said to prompt this reaction. Everyone was silent. He continued, “I am not sure what you are doing here or who sent you to observe us? In fact! I want to see your identification cards. I do not know what your agenda is here, but we are not going to be a part of it, and you need to leave.”

That was my first and rather abrupt introduction to the essential factor of *trust*, or lack thereof, within interdisciplinary teams. After the psychologist asked us to leave, Mark and I still tried to explain our roles and goals. Without success, we left the school premises feeling deflated and confused. After a final discussion about the event with the principal who disclosed she was also unclear about our purpose, we never regained an invitation to the team, and we were left only with a story that would make for good watercooler conversation for years to come. “But we even brought cookies!” we would jest, eventually separated enough from the event that we could have a chuckle.

As a social work practitioner who facilitated groups in therapeutic settings, I was well versed in the dynamics of group practice. However, working in an organization led by educators for the purposes of consulting with schools, the language of group work was never present. Nor did I initially think about understanding teams through group work principles as I adjusted to the bureaucratic and hierarchical culture common in educational settings. That is, until we experienced roadblocks in our work, observed limited interdisciplinary collaboration among members, and noticed team goals not easily achieved. Other consulting teams in our organization experienced varying degrees of these interactions, and this meant that we had to conduct a

deep reflection of our approach. I realized Mark and I were not standing members of the team, but we tried to hit the pavement running without full understanding of the factors and context that would create challenges for our collaboration with the school and the teams. For two years, the Bronx high school had been deemed a “school in need of improvement” and under threat of closure. This is how we came to our work with the school at the directive of the city’s department of education. This fueled the fire of distrust and fear. The school eventually was phased out, so the fears of the team members were well founded.

Like *trust*, other critical factors of group work are present in the space inhabited by interdisciplinary teams, and these factors serve to support or create barriers to collaboration. Consequently, these factors also impact the interaction between outsiders and team members, as well as among existing team members. In this narrative I adduce personal experiences from my time as a social work consultant in one high need, urban, public elementary school while developing and facilitating an interdisciplinary team, and what I learned about effective interdisciplinary team processes. I will share my observations of team member interactions, focusing on the challenges of engendering effective team collaboration and the key factors that promote collaboration through the framework of group dynamics (Jacobs, Masson, & Harvill, 2012). Furthering the discussion, I will focus on the consequential collaborative relationship between school social workers and teachers.

In Context: High Poverty Urban Schools and Interdisciplinary Teams

Many children and disproportionately children of color, come to school reeling from the effects of poverty: high crime neighborhoods, disrupted family conditions, poor health conditions, limited educational resources at home, and limitations of non-English language households (Atkins, Frazier, Birman, Abdul-Adil, Jackson, Graczyk, Talbott, Farmer, Bell, & McKay, 2006). These conditions have a tremendous impact on student achievement and school culture (Ravitch, 2010). For urban schools, where a high concentration of poor minority students attend, limited resources (e.g., manpower, time, effective interventions, systems for effective school practices, and the parental supports

more abundant in suburban school settings) create challenges for addressing student needs and reducing the achievement gaps in academics (Warren, Bohanon-Edmonson, Turnbull, Sailor, Wickham, Griggs, & Beech, 2006; Ravitch, 2013). At the same time, there has been a paradigm shift in public education, one that focuses more heavily on accountability and high-stakes performance evaluations for teachers and administrators. In this light, the federal government has emphasized mandates for standardized testing, common core standards, and response to intervention, all the while schools experience more funding cuts, heavier demands on school personnel, and increasing job insecurity (Ravitch, 2013; Issurdatt, 2009).

The current education environment indeed adds tremendous pressure for schools to close achievement gaps and this pressure is most staggering for high need public schools as these are urged to “turn their schools” around through a variety of programs and interventions (Ravitch, 2013). A relationship between the social-emotional well-being of children and academic achievement has long been asserted, and many approaches have been developed to address this. Some of the approaches have been found to be more effective than others. Collaborative effort of school personnel, consequently, has been noted as one the most influential characteristics for addressing the challenging socio-emotional needs of students (Lynn, Mckay, & Atkins, 2003; Mckay, Stoewe, McCadam, & Gonzales, 1998). To this end, interdisciplinary teams have been considered as one system for collaboration with potential impact on school effectiveness, improved teaching, and improved responses to the overall needs of students (Bronstein, 2003; Mellin, 2009). Teamwork can provide a space for synergy and expertise of different disciplines, and that reduces isolation in the workplace. However, studies have also pointed to the limitations in the process of teamwork as limited collaboration can also be a challenge conflicts and tensions between members arise, moreover, teams retain a restricted focus in how they address student issues.

The Bronx high school experience was the beginning of my journey in gaining a deeper understanding of interdisciplinary team processes. Throughout this journey, I learned that the process

of developing trust was important in my own relationship to the teams and that the context in which teams exist matters. These are just a few of the factors that impact on teams. Ultimately, many barriers to developing truly collaborative teams exist. Conversely, there are also many processes that can support collaboration, and both impacts require unpacking in order to improve interdisciplinary team practices. Through my work as a consultant, I was well positioned to observe what took place in and around teams and as a social work practitioner to understand these interactions through the concept of group dynamics. Jacobs, Masson, and Harvill (2012) outline a number of generic factors that are essential to the function of groups and the types of groups that are impacted by these factors. In the case of interdisciplinary teams in schools, considered to be task groups, these factors range from the practical, such as meeting times, location, and membership to more process oriented ones such as engagement, purpose, and commitment. Through this framework of group work, I discuss my experience assisting to develop a team at a public elementary school.

Enabling Collaboration in Interdisciplinary Teams: The Promise School

In 2008, my new educational counterpart, Rob, and I were assigned to work with a public elementary school. The Promise School had signed on to work with our agency for a period of three years in order to develop and reinforce systems that addressed the social emotional needs of students (and this included the involvement of interdisciplinary teams). The principal had been at Promise for only two years by the time we began to work with him. He had heard about the work our agency had been doing with other schools in the area and reached out to us.

We had an opportunity to meet with him and other key staff over a summer retreat before the school year began in order to map out the work we would be undertaking together. It was a quite different experience to partner with a school than to be mandated upon one. We also met with the assistant principals, and the school social worker and guidance counselor. The school as our client, entered in discussions with us to develop shared goals, and this process resonated very strongly with my social work value of partnering and

collaborating with clients.

Leadership, Purpose, and Protocols

The Promise school, with a little over 1000 students, was a considerably large elementary school in light of the small schools movement under Mayor Bloomberg's tenure and control of New York City public schools. Promise had organized itself into four academies based on grade level with four assistant principals, each overseeing one of the academies. The school had a school social worker, a guidance counselor, and a related services team (psychologist, special education school social workers, and speech therapists) for students with special education needs. There was also an onsite community-based organization that provided mental health services for students. For a school of its size, the staff-to-student ratio may appear appropriate, and to be fair, Promise had resources many others in the area lacked. However, when urban school settings experience a little more than half of their students exhibiting disruptive and externalizing behavior that require disciplinary action compared with only 1-7% of students exhibiting similar behaviors in average school settings, the resources at Promise were still limited (Baker, Kamphaus, Horne, & Windsor, 2006; Walker, Horner, Sugai, Bullis, Sprague, Bricker, & Kaufman, 1996; Tolan & Henry, 1996). Similarly, the staff at Promise had identified behavioral problems and social-emotional concerns of students as significant issues for teachers in and outside of the classroom. The school did not have a dean of discipline, so the task of addressing behavioral concerns was relegated to the assistant principals, teachers, and in a less than ideal manner, frequently delegated to the school social worker and guidance counselor- the latter two being redirected from their crucial roles of addressing social emotional issues of children to a role that posed a conflict to their counseling functions.

The school agreed to develop two interdisciplinary teams to address separate, but intersecting academic (ACT) and social-emotional concerns (SET) of students. During the first year at Promise, the principal assigned a diverse set of staff members to the team. The standing members consisted of assistant principals, a school social worker, a guidance counselor, a school psychologist, a speech therapist, a special education social worker, and my

team. Teachers, the parent coordinator, and the school-based community organization social worker would be invited when students they serviced came up for discussion, as were parents and relevant outside service providers. Having had previous interactions with the core members of the team, I had begun working on establishing rapport. I was no longer a stranger or seen as an intruder that helped me learn about their thoughts regarding the team. Most shared that they felt the focus of the team would be to address significant issues for students, they had hopes for its success, and ultimately, the improvement of children's conditions. Others shared that they thought the team would be an avenue for placing special needs students in more appropriate settings. Contrary to this latter belief, the agency I worked for and Promise's principal intended the team to address student concerns through classroom interventions, school counseling services, and linkages to social service agencies, but not serve as a step for special education referral education which had its own set of protocols. A cohesive understanding of the team goal was not immediate and would take some time to gain.

The team start-up required much pre-planning. I worked closely with the school social worker who was the in-house team facilitator, to develop the SET team. Rob would work with the literacy and math coaches to develop the ACT team, and it was intended that the two teams would communicate with frequency as many students required interventions in both areas. The SET team was designed to ultimately address the needs of a smaller group of students with behavioral and social emotional concerns, but first we had to gather and discuss information on all the students that had been identified with concerns. The school social worker and I began by triaging a list of students that had multiple school suspensions, excessive absences, those who were known to staff for behavioral issues, and those with other relevant social-emotional concerns (exhibiting disruptive or angry behavior, withdrawal and isolation, suspected of experiencing abuse or neglect, school phobia, or an inability to remain in class). Students were given a priority status from severe to minimal concerns and were then assigned a date to be brought up in the SET team. Key stakeholders would be sought to provide information on each student.

Teachers were provided with a referral document with information regarding student observations in the classroom, student strengths, concerns, and past classroom interventions. Outreach to parents or guardians and completion of social histories were pursued whenever possible— a challenge, when many parents whose children had been identified with concerns had a distrust of the school system themselves. Getting the information from staff in a timely manner would also prove to be a challenge and this was in part due to non-team staff's limited understanding of the team function or because they had yet to see any evidence of success. I often visited with teachers to discuss their students before the SET team met to review the referral forms with them. In that first year, some teachers were receptive, and other times I got the impression some thought the process was a waste of time. A handful of teachers would take very long to complete the referral form or would leave some forms incomplete. One third grade teacher told me she had implemented many of the interventions that would likely be recommended by the team, so there was no point in referring to the team. Selling the team as an effective process to overwhelmed and overworked teachers would be very challenging when it presented extra work on their part. We found, however, that the first number of teachers that used the team process would prove to be the most important promoters as they worked through interventions with the team and received support from related staff.

One first grade teacher in particular was a staunch supporter of the team after she found support addressing a student who had difficulty following directions and completing assignments. The student would get upset when being reminded to complete tasks, begin new work, and would storm out of the classroom. The student, as reported by the teacher, was bright and was academically on track, but she feared the behavioral issues would sooner or later impact his academic standing. The teacher outreached to the child's parent who appeared to be frustrated with being called so often about her child's behavior. The parent did not see any of these behaviors at home. The teacher discussed her system for addressing behavior which included a class chart that had student goals for the day; every time a student committed an infraction she would move a fish further down until the student lost

privileges. The school social worker and I suggested we would go into the classroom to observe the student to get a better sense of his response. The teacher agreed, but said we would not see anything other than what she had reported.

After our observation, we noted the student would react to changing activities, and the teacher agreed. We all came back to a second SET meeting and after some discussion, we began to identify moments that preceded the behavioral issues and moments when the student's behavior was appropriate. The team assessed that the student had difficulty with transitions. Many children can engage in challenging behavior in group settings and at school, but not at home, because the rules and routines may be more demanding in the different environments. The team suggested that the teacher minimize some transitions for the student and reduce waiting time for activities. Since the teacher also identified other potential students that could benefit from restructuring the class schedule, the assistant principal offered to help in developing a new schedule for the class. The teacher was also advised to note and verbally reward the student when he was engaging in appropriate behavior. The school social worker would meet with the teacher to implement a positive reinforcement system in the classroom rather than one that penalized students for negative behavior. The teacher would send a note to the parents home noting some positive behavior from the student. Finally, the school social worker and teacher would meet with the parent to discuss any concerns and support and engage the parent in reinforcing positive classroom behaviors. Things improved considerably for this teacher, and she would encourage her close peers to utilize the team.

In the subsequent years, the school social worker and guidance counselor would also implement a newsletter that included the goals of the team as well as an agenda for the coming school year. They would also present at the initial faculty meeting of the year and review the referral process. After which, they would provide each teacher with referral forms and asked them to identify anyone they were concerned about from the previous year. A pre-referral discussion would also take place as the school social worker and guidance counselor strengthen relationships with teachers and visited classrooms.

Much of the team energy during the first year, however, also went into establishing clear and essential protocols: consistent meeting dates and times; established location of the meeting; team member attendance; and ensuring the completion of required student information for case presentation. These protocols are important decisions that depend on the availability of resources, goal of the team, and ultimately affect the life of the team (Jacobs, Masson, & Harvill, 2012). Often, when groups are not seen as the primary function of the agency they can be relegated to less than ideal spaces or moved around, which ultimately creates instability and devalues the team function. At Promise, the school social worker, as the in-school team facilitator working in concert with the guidance counselor, was instrumental in establishing these routines, by emailing agendas to the team, maintaining records, and reviewing paperwork. An attendance sheet with expected members was created, and meetings were rarely, if ever, canceled even in that first year. The group leader attitude demonstrated commitment to the team to other team members.

Another significant factor for the development of the team was the administrative support from the principal. Although the principal was not present in all the meetings, the team did meet weekly in his office. This provided another emphasis on the value of the team, privacy of discussion for sensitive student information, and helped in troubleshooting team issues. On a handful of occasions, the related service providers did not attend the meeting. At the beginning of one of our meetings the school social worker, guidance counselor, and I were having a brief discussion about how to improve attendance when the principal walked in. He looked at the attendance sheet for the team members and then proceeded to call the missing team members to tell them the meeting was about to start. The missing members came to that meeting and were present at all subsequent meetings, highlighting the importance of administrative support for the work teams undertake. Administrative presence sent the unequivocal message that it was a valued process for addressing student needs. It also served to reinforce that all standing team members were important to the process. It was clear though that at the time the related service providers did not see the value of their role on the team and that was something that we had to address together.

Jacobs, Masson, & Harvill (2012) note that members should feel that they are owners of the team, that the team purpose is clear, and that the process has relevance for them. In the early stages of the team, the members who identified with the mission of the team and understood their contributions were the most vocal in discussing cases. However, not all members felt this way, in particular, the related service providers who appeared to be more turf-oriented, spoke only about the children they serviced and not about children that were out of their purview. One strategy we implemented to ensure that all members contributed was to institute a type of "round-robin" approach so that each had an opportunity to contribute to assessing the student cases. This process would be repeated when the intervention portion of the case came up. What started off as mechanistic and conscious act became an unconscious activity for the team-members by the middle of the second year. This proved to be extremely useful in that the related service providers who would initially only enter the team discussion when it pertained to familiar students with special education services, would soon contribute to the brainstorming sessions for all the students that came up with the SET team. Also, the team was able to gain from diversity of perspectives about student concerns given the different disciplines at the table.

Other processes remained underdeveloped during this time as well. Follow-up on the status of cases was not consistent for all students. Sometimes a team member would not follow through on their part of the intervention plan, and feedback from external interventionists such as mental health practitioners was not received in a timely manner. In order to work through these challenges we would adapt the referral and follow-up forms documentation to clearly identify members who would undertake and act on behalf of a case, and we would also assign case-coordinators to support and follow-up with interventions prior to bringing up a student for review. Admittedly, not everyone liked this process initially, but it was eventually seen as helpful in troubleshooting interventions and actions. For example, there was a 10-year-old girl who required multiple interventions. The student had been struggling academically and was at-risk for repeating the year; she presented somewhat unkempt a number of times a week, was withdrawn

and isolated, and had trouble relating to peers. While not overly defiant in the classroom, she often did not follow directives. The teacher had also noticed that at one point the student had glasses, but she no longer brought these to school. The school social worker had been able to bring in the parent who disclosed she had been struggling to care for a number of children in the home of which many had behavioral and academic problems and had no real support from relatives. The parent had a history of depression but was not receiving any services and welcomed any support and resources that the school recommended. The SET team recommended a home-based family support program and the school social worker was to make a referral to a known provider and monitor the services. The SET team outlined classroom behavioral strategies for the student's classroom teacher to implement and the assistant principal was identified as the person to help her do so. The student was also referred to the ACT team where a recommendation of at-risk academic interventions to be provided as push-in classroom supports. The guidance counselor would include the student in a four-week socialization group. There would be a referral to the school nurse for helping the student with health and hygiene issues and referral to the on-site school clinic for medical follow-up, including an eye exam. These multiple interventions and linkages required a high level of coordination and monitoring that can often be a challenge in light of the volume of children's needs that must be addressed. Thus, the case-coordinator role was essential.

Commitment, Feedback, and Reflections

Engaging members in the process of teaming is challenging. Members want to know that the time and energy invested will pay off. Members want opportunity to voice suggestions about the team and in turn have a responsive team facilitator. They also want to understand and feel comfortable with the parameters of their role. Jacobs, Masson, and Harvill (2012) identify these processes as member commitment, attitudes towards leadership, and reflection of roles.

Over the course of time, most team members in the SET team at Promise felt that the interdisciplinary nature of addressing student issues provided support for managing the work, and ultimately that it had an impact on their students. Not all members felt this

way, and it was crucial to making adjustments. During the second year, in order to be more efficient with time, the SET team members decided that the assistant principals would alternate their attendance to the meetings every week. This was done so that those whose academy students were not on the agenda could use this time to attend pressing administrative duties. One assistant principal whose attendance was already limited, and whose demeanor and lack of contribution to the team indicated that she was not aligned with the team function. Ultimately opted to leave the team. She found it more useful to address student issues in her academy directly and to use the time she spent in the team meetings instead attending to other matters. While her disinterest and eventual exit from the team may have appeared to undermine its value, members that do not align with the purpose of the team may need to leave in order for the team to be more effective, positive, and cohesive.

The team also addressed the length of sessions and reflected on member roles. As the number of cases decreased over time due to initial triaging of cases from highest-risk to low in the first year, and with the reorganization of meeting by academies, the amount of time necessary from the team meeting went from three hours to 45 minutes per academy. As mentioned before, feedback was enhanced through redesign of referral forms and by creating a case coordinator role. Initially, the case coordination was delegated to the school social worker and the guidance counselor, but was later extended to other members of the team as were the recording of the meeting minutes and form updates. A review of all cases would be held every three months to ensure that all interventions were in place, to discuss student's ultimate progress, and whether cases should be closed or remain open with a new set of interventions.

As programmatic processes were resolved by the third year of the team's existence, team members were also beginning to think about and intervene outside of their discipline-driven roles. For example, an assistant principal might spend lunch time with a student that required either acknowledgment for behavioral progress or positive behavioral interventions when they struggled with peer-interactions in the lunch room. A gym teacher would serve as a mentor for a student who had

trouble with social interactions. The school social worker might help a parent understand instructions provided by a teacher for helping their child with homework. Members were beginning to see themselves outside of the strict parameters of their job titles. According to the literature, breaking through the barriers of the rigidity of disciplines is a main feature of collaboration (Mellin, 2009; Bronstein, 2003). This process was particularly evident and powerful between teachers and the social worker at Promise, who were implementing truly collaborative interventions to meet student needs.

School Social Workers and Teachers

Alone we can do so little; together we can do so much.

— Helen Keller

As the number of students coming to school manifesting complex issues increases, so increases the focus on schools to do more. As such, teachers certainly face multiple demands in their classrooms and are expected to be many things to the children. They teach for which they sometimes have limited preparation and resources to do so (Hennessy & Green-Hennessy, 2000). One writer summarizes these sentiments:

An issue that cannot be neglected is the acknowledgement that funds, resources, and staffing for public schools continue to be less than ideal, which leads to the expectations that teachers should just “do more.” Teachers must not only be good teachers and motivate their students, but also, rally parents, ensure safety, and identify children who may need services for mental health or behavioral problems, in addition to countless other duties. (Williams et al., 2007, p. 104)

School social workers, consequently, are being prompted to support teachers in addressing social-emotional concerns of children (Lynn, McKay & Atkins, 2003). Teachers are also seen as an important role that school social workers must, both, support and collaborate with. Franklin (2002) movingly behooves the social work field:

As we explore new roles in the 21st

century, we must revisit our mission as social workers and see the opportunities that exist for us to meet the human needs. For example, teachers are perhaps the most important and yet the greatest neglected of school personnel who could benefit from our services and help. (p. 130)

Indeed collaboration and support are perceived as inherent in school social work practice and significant to school social work’s ecological framework (Kane, 1975; Graham & Barter, 1999). Reasonably, a strong focus on collaborative capacity between the two disciplines has developed and also an interest in the vehicles by which to support these goals (Lachini, Anderson-Butcher, & Mellin, 2013; Berzin, McManama O’Brien, Frey, Kelly Alvarez, & Shaffer, 2011; Diaz, 2011) has grown. As a consultant, I was able to observe how interdisciplinary teams became a vehicle for school social worker and teacher collaboration and the consequent impact of effectively addressing student needs.

Through the SET team, the school social worker and teachers would discuss strategies for how to address individual student behaviors in the classroom. This process helped leverage their communication out of the team where consequently they communicated on student progress for students who had been recommended for counseling with the school social worker that reduced unrealistic expectations of their intervention’s impact on students. The school social worker and teachers also co-led family meetings with students’ guardians. Often, these functions are seen as role specific (Diaz, 2011), but because the team allowed room for discussion and exploration for how to best intervene with students, teachers and school social workers had the opportunity to build a bond that promoted mutual respect, and “we are on the same side” attitude.

At Promise, the interdisciplinary team discussions brought up student issues that individual teachers were challenged to address within their classrooms, as well as school-wide culture and behaviors that many teachers confronted. The individual challenges presented opportunities for the school social worker to collaborate with and support the teachers while the school-wide issues presented with a call for mezzo and macro level interventions for

the school social worker. A number of bullying incidents that had escalated throughout the school brought the need for a macro-level intervention that involved the collaboration of school social worker and a number of teachers. The school social worker and I researched conflict resolution programs that could be implemented within the classroom through a social-emotional learning structure. The school social worker brought one of the programs to the teachers she had been working with through the SET team. Three teachers were on board to pilot the program. The school social worker would deliver the conflict resolution program three times a week for a series of six weeks while the teacher was in the classroom.

Ultimately, the teachers would take over the conflict resolution curriculum with their students and would receive ongoing support from the school social worker to support the use of the skills in and outside of the classroom setting. This process involved trust and true collaboration because it required the teachers to open their classroom doors and provide time for the school social worker to deliver and experiment with a classroom intervention, and involved both the teachers and school social worker in the implementation and troubleshooting of the approach together.

The teachers and school social worker had fused their roles and eliminated the perceived restrictions. In this respect, the school social worker was able to see the classroom setting as an appropriate space for intervention, and the teachers were able to implement social-emotional skills. The teachers saw positive outcomes of this collaboration and the conflict resolution program and subsequently promoted the programs with their peers. This resulted in the implementation of the program in three new classrooms every year after the initial pilot process.

Being a part of the day to day activities of interdisciplinary teams and working closely with school social workers and teachers provided me with a unique view of the demands of their work. Additionally, I was able to see the conditions that supported their activities and those that created barriers. Working through teams provides schools with an efficient and effective way to leverage in-house staff in addressing student needs and also

readily provide support for one another. However, in order for teams and school staff to be truly collaborative the processes of collaboration must be consciously developed.

Conclusion

Interdisciplinary team collaboration has garnered increasing attention over the years as a structure that serves to address student functioning and reduce practice isolation. Particularly relevant for school social workers and teachers as primary interventionist, interdisciplinary teams that are effective in engendering collaborative practices can offer support for addressing the complex social-emotional issues of children. Given reductions in funding that more deeply affect high poverty urban schools, interdisciplinary teams can also help reduce the nimety, by decreasing fragmentation and duplication of services in these schools. Additionally, teams can serve to highlight discipline-driven skills and strengths, and develop mutual respect among professionals while harnessing the potential of newly created cross-discipline roles and interventions. For all the potential benefits of interdisciplinary teams, attention must be given to the processes that unleash these supports for students and school personnel. Several factors affect the capacity for interdisciplinary teams to be truly collaborative, and when addressed, teachers and school social workers can find a space to enhance their relational interaction to best meet the needs of students.

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About the Author: Mery Diaz, DSW, LCSW is Assistant Professor, Human Services Department, NYC College of Technology of the City University of New York (718-260-5135; mdiaz@citytech.cuny.edu)