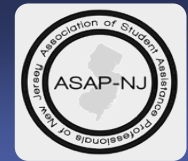


The Role and Value of a Student Assistance Coordinator



A strikingly large percentage of school-aged children in the United States are in crisis. Drug and alcohol abuse, violence, bullying, depression, suicide, stress and anxiety disorders, gambling, eating disorders, gang involvement, and other social/emotional issues threaten the well-being of all students, their families, and society as a whole. As the problems have escalated in recent years, so have the demands on schools throughout the country to address them. Legislators and government officials, boards of education, school administrators, teachers, parents, and students themselves, understand that school success is predicated on a safe and healthy learning environment, and that learning objectives are frequently undermined by psycho-social, emotional, and behavioral problems. Unfortunately, schools are poorly equipped to identify problem students, and particularly ineffective in preventing social/emotional problems from occurring or escalating. Furthermore, schools are limited in their ability to accurately assess the efficacy of classroom-based prevention and education programs.

The creation of the Student Assistance Coordinator (SAC) position in many school districts throughout New Jersey has been the most effective strategy to identify, address, and monitor individual students as well as coordinate and oversee district prevention/intervention efforts. The SAC is best suited to address student substance abuse, mental health and behavioral problems for the following reasons: they uniquely possess the specific training to identify and address these behaviors; they provide confidential services in more effective one-on-one settings without conflicting with the law or creating conflicts of interests for other faculty members; and, they can save school districts money and substantial resources by allowing other faculty members to focus on the responsibilities consistent with their skills, interests, and official job descriptions.

UNIQUE AND SPECIALIZED TRAINING

The New Jersey Department of Education has established specific criteria required for individuals to become certified Student Assistance Coordinators. These criteria ensure that the SAC is qualified to provide substance abuse/mental health prevention, intervention, counseling and related services. On-going professional development ensures that SACs remain up-to-date on current research, trends, techniques, and community resources. Professional development for all other school faculty members rarely, if ever, addresses these critical issues.

THE SAC VERSUS OTHER SCHOOL PERSONNEL

Interventions by non-SAC faculty members often create a conflict of interest for the faculty member and threaten student privacy. The New Jersey State Legislature has correctly identified the extent of non-academic challenges facing students today. For example, they have recognized that a significant number of young people are already involved in the abuse of alcohol and other drugs, and that many children and adolescents are at a high risk of developing alcohol and other substance abuse problems. As a result, legislation was created that mandates schools to provide both education and intervention with students experiencing substance abuse and other social/emotional issues (18A:40A-8). Each school district must determine the methods for addressing these issues. Without the SAC position, the inability to effectively intervene with these students will continue to prevent teachers from teaching, prevent students from learning, and draw vast amounts of time and other resources away from teachers, administrators, guidance counselors, and special services personnel - all in an attempt to address issues that they are not qualified to address. The costs are immeasurable: decreased academic performance and productivity, behavioral acting out and classroom disruptions, significant family, social, and legal problems, and potentially permanent consequences including premature death.

CONFIDENTIALITY

Students are by nature quite guarded regarding the disclosure of many issues (particularly drug/alcohol use) to adults. Many students worry about the conflict of interest in discussing personal issues with teachers, administrators, and guidance counselors when these are the very faculty members who grade them, discipline them, write their recommendation letters, and frequently communicate with their parents. Congress has recognized these obstacles, and created federal confidentiality regulations (42 CFR Part 2), providing student access to confidential treatment for alcohol and drug related issues. In the event that other issues surface, the SAC is best equipped to communicate the nature of the problem with both the student and their family, and develop an appropriate treatment plan, which might involve additional community resources when necessary.

SAC VERSUS TEACHER/COMMITTEE INTERVENTIONS

A comprehensive review surveying a wide body of research from 1994 – 2008 shows that individual interventions with children ages 12 – 19 years old are more effective than any other type of interventions, including factual knowledge, classroom-based programs, media efforts, and even family-based therapy, particularly in terms of reducing alcohol use.¹ Interventions by individual teachers are undermined by lack of knowledge, training, interest, or compensation. Large classroom size and limited individual access to students in confidential settings, as well as established FERPA regulations, limit teachers' access to information and limit students' willingness or ability to share information. Schools that attempt to provide intervention services through committees are limited in both the ability to gather detailed and relevant personal information and provide on-going services. Information obtained by committee is often restricted to behavioral observations (which can be misleading) and require significant time and effort to gather. With a trained intervention specialist, this information can be obtained quickly and effectively in counseling sessions, where the counselor is qualified and trusted by the student.

1 Brauser, D., Vega, C.P. "Individual Interventions May Be More Effective Than Family-Based Therapy in Reducing Teen Alcohol Abuse." *Archives of Pediatric and Adolescent Medicine*, January 2010.