

## School Psychology in India: A Vision for the Future

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The field of school psychology in India is in a nascent stage of development and is yet to receive recognition as an independent discipline within the psychology. At present, the mental health needs of about 150 million Indian school children are grossly underserved. Although the Government of India is implementing several initiatives to ensure enrolment of children in schools, a similar drive to look after their mental health in school environments is urgently needed. A major concern that has emerged in recent years is the glaring lack of services for children's educational and psychological well-being. In this paper, we discuss basic issues related to the development of school psychology in India. The primary objectives of this paper are: (i) to explore Indian perspectives of educational settings, (ii) to examine the nature and scope of training for school psychology professionals, and their role and functions in school settings, and (iii) to charter the prospects of the International School Psychology Association and the Indian School Psychology Association in the development and promotion of school psychology in India. We first outline approaches to training and service provision used in several Western nations, and in particular, noting the role of professional organisations in developing guidelines for school psychology training and practice. In our conclusion we underscore the importance of school psychology in India, the role of school psychologists in contributing to the psychological and academic well-being of school children, and therefore the urgent need for support from policy-makers in advancing the field in India.

**Keywords:** school psychology, school psychology training, child mental health, school psychology survey, school psychologists, Indian School Psychology Association

School psychology is an area within psychology that is concerned with the educational and psychological well-being of children in academic settings. While school psychology training and practice is well established in developed nations, this area has received little recognition in India. The roles and functions of school psychologists vary across countries, and are developed in accordance with the educational policies of that nation. School psychology training and practice is regulated through universities and federal agencies, together with professional

associations in the fields of psychology and education (Oakland & Cunningham, 1992). Professional organisations are typically responsible for developing guidelines for effective implementation of school psychology practices, which are continually updated. For example, the School Psychologists' Association of Western Australia (2010) highlights the following areas of expertise among school psychologists:

- Identifying and assessing mental health issues and providing follow up support or referral to other mental health services

- Conducting assessments in learning, social, emotional and behavioural domains and communicating assessment results to key people, such as parents and teachers and relevant professionals

- Providing expert advice and direct intervention in the management of critical incidents

- Assisting in the design and evaluation of effective prevention, intervention and support programs for individuals, groups and school populations

- Providing counselling and intervention for a range of issues affecting children and adolescents

- Providing professional learning for staff on a range of topics, and conducting workshops for parents and small group interventions for students

- Consulting with parents, teachers, school administrators, external agencies and other members of the school community in regard to interventions, services and support for students

- Understanding and conducting research in areas relating to school psychology practice

Others have noted that school psychologists are also involved in conducting initial evaluation to determine eligibility and the educational needs of the student when a student is referred for special education services (Prasse, 2002). Once the student receives special education services, he/she is re-evaluated by school psychologists to ascertain continued eligibility. Some other job functions of school psychologists include activities related to prevention, intervention, consultation, research, mental health services, family support, training, and administration (Fagan & Wise, 2000).

Cross-national surveys such as the International School Psychology Survey (Jimerson et al., 2006) that collected data from various countries including Albania, Cyprus,

Estonia, Greece and Northern England, indicate some variability in the most common activities of school psychologists across countries. However, psycho-educational evaluations or counselling of students were consistently among the highest endorsed activities for all countries. Counselling students, consultation with teachers/staff and consultation with parents/families, psycho-educational evaluations and primary prevention programs were each ranked in the top three by two or more countries, and administrative responsibilities were consistently ranked as the least optimal role. Professionals in most countries also noted that providing primary prevention programs and conducting staff training and in-service programs took up a minimal amount of their time. Most surveys show that school psychologists typically tend to be young, female and share similar conceptions about the field (Oakland & Cunnigham, 1992).

In developed nations, the expectations for more professionalism within school psychology are substantially higher in developed countries than in less developed nations. The growth of school psychology as a profession is closely linked to a country's economic resources and its commitment to use these resources to promote the education of all children. Countries with well developed systems of education that legally mandate the provision of education to all children, including special education services for students with chronic, severe, and complex learning and behavioural disorders, tend to have well established school psychology practices. Another feature in such countries that contributes to effective school psychology practice is the ratio of school psychologists to school children. In the US, for example, 1 school psychologist per 1,000 students was recommended by the National Association of School Psychologists (NASP) in 2000. Only one out of four school psychologists had that ratio in 1995 (Curtis et al., 1999), but based on NASP's

recommendation, the percentage of school psychologists working at a ratio of 1:1000 school psychologists to students, improved from 17.9% to 35.7% (Curtis, Grier, & Grier 2002).

Currently countries such as Australia, Canada, Israel, New Zealand, the United States, and most Western European countries have well developed and regulated training programs and professional practices (Farrell, 2007). In contrast, the governments of developing nations such as India, Pakistan, and Zimbabwe lack the economic resources to adequately fund general education, enhance existing practices in school mental health or develop new strategies for school psychology services. In addition, because of the general lack of awareness of the importance of addressing mental health issues in academic settings in India, school psychology services in government-funded schools are almost non-existent. With few employment opportunities in schools, the only options for mental health professionals remains the psychology departments in colleges and universities and the private settings such as private schools, private clinics, and non-governmental organizations (NGOs).

School education in India is a challenge to policy-makers, educators, families and communities. Some of the difficulties include: lack of awareness of commonly occurring mental health and learning problems among children; lack of sufficient resources for school-based psychological services; a burgeoning school population; a dismally low number of professionals providing psychological services; social stigma of mental illness; and, highly variegated social and cultural practices across the nation. These factors add to the complexity of developing school psychology services in India. However, the quest for establishing services that address school children's mental health needs is now gaining increased momentum. The time is ripe for engaging in

discourse on the status of school psychology in India and envisioning goals for the development of this field. In this paper we seek to: (i) explore Indian perspectives of educational settings; (ii) examine the nature and scope of training for school psychology professionals, and their role and functions in school settings; and (iii) describe the future role of the International School Psychology Association (ISPA) and the Indian School Psychology Association (InSPA) in the development and promotion of school psychology in India.

### **Analytical Discussion**

#### **(i) School Education in the Indian Context**

Establishing a schooling system catering to about 150 million children is in itself a significant achievement. The education system in India at present is one of the largest such systems in the world. While traditional Indian schooling and pedagogical practices are ancient and steeped in rich history, modern schooling in India has its roots in British education. At present, schools in India are categorised as primary (from 1<sup>st</sup> to 5<sup>th</sup> standard), upper primary (6<sup>th</sup> to 8<sup>th</sup> standard), secondary (9<sup>th</sup> and 10<sup>th</sup> standards) and higher secondary (11<sup>th</sup> and 12<sup>th</sup> standards). Not all children in India attend schools; however, and many do not achieve literacy. Currently, India constitutes about 22% of the world population, but Indians constitute 46% of the world's illiterate population.

India's educational achievements while relatively better than its South Asian neighbours Pakistan and Bangladesh in certain educational indicators, still lag behind other nations with which it is increasingly compared, such as China, especially in terms of secondary school participation and youth literacy rates (Kingdon, 2007). The new policies for the poor sections of society appear to enhance school participation in India. The 2006 Annual Status of Education Report (ASER) showed that about 94% of all

elementary school age children (6-14 years) were enrolled in school, reflecting considerable progress compared to enrolments in the early 1990s (Duraismy, 2002; Kingdon, 2007). Gross enrolment at the primary stage has crossed the 90% mark (92.92% overall) and 90.93% for girls. Drop-outs have shown a steady decline at the primary stage from 59% in 1980-81 to 39% in 2001-02. Even the completion rates for standards 1 to 10 have shown improvement; the drop-out rate has fallen from 82.5% in 1980-81 to 66% in 2001-02 (NCERT, 2006).

Recognizing that basic education is the fundamental right of every child, and is key to sustainable socio-economic development, the Government of India has taken several measures that are in large part, responsible for rising school enrolments. As mandated by the 86<sup>th</sup> amendment to the Constitution, the government has endeavoured to provide free and compulsory education to all children between the ages of 6 and 14 years. This initiative is geared to meeting the objectives of Universalization of Elementary Education (UEE) through *Sarva Shiksha Abhiyan* (SSA) or 'Education for All', the government's flagship programme for the achievement of the long cherished goal of 100% school enrolment and retention of children in schools. SSA is currently being implemented in partnership with State governments and seeks to provide quality elementary education including life skills to about 192 million school children.

In addition to meet the educational needs of children, the government also provides basic services related to children's nutritional health. About 38 million children between the ages of 0 to 6 years are receiving services catering to their nutritional, health, and pre-school education needs through the Integrated Child Development Scheme (ICDS). The ICDS is one of the world's largest integrated early childhood development programs. Services are provided through more than a million centres

across the country. Thus, overall, India is making strides towards achieving Early Childhood Care and Education (ECCE), crystallized in the Constitution of India (86<sup>th</sup> Amendment- Act, -2002), and which enjoins the State to provide early childhood care and education to all children until they complete the age of six years (NCERT, 2006).

While programmes such as SSA or ECCE cater to children's educational and physical health needs, the large-scale comprehensive and integrated programmes to address psychological and educational issues of children are entirely missing. Efforts to promote school mental health are limited to a few policy guidelines for the implementation of nation-wide school psychology services. However, in practice these guidelines are rarely implemented. Periodically, they are available to teachers and counsellors through international agencies such as the World Health Organization who publish manuals on promoting school mental health in different parts of the world, including India. These manuals seek to empower teachers and school counsellors by providing basic information about cognitive, social-emotional or behavioural difficulties that are commonly seen in school-age children. Teachers and school counsellors can refer to these manuals to identify various sources of academic difficulties among school children, and where possible and appropriate, provide remedial services (WHO, 2006).

In general, guidelines and training opportunities that help educators and general psychology professionals recognise and deal with academic difficulties are scarce. There is a dearth of qualified and trained school personnel and clinicians who can address basic behavioural problems, emotional disturbances, and learning difficulties of students (Paliwal, 1984). It is therefore incumbent upon the Central and State governments to formulate policies that recognize the importance of school

**Table 1. Enrolment of school education**

| S. No. | States/ Uts       | Board of Intermediate Secondary Education | Pre-Degree Junior Colleges/ Higher Sec Schools | ISCED-3 High/Post Basic Schools | ISCED-2 Middle/ Sr Basic Schools | ISCED-1 Primary/ EGS Jr Basic Schools | ISCED-0 Pre-Primary Schools* | /Institutions imparting pre-school education under ICDS |        |
|--------|-------------------|---|--|---------------------------------|----------------------------------|---------------------------------------|------------------------------|---|--------|
| 1      | Andhra Pradesh    | 2   | 4032   | 16937                           | 17957                            | 62464                                 | 419                          | 0   | 78757  |
| 2      | Arunachal Pradesh | 0   | 97   | 163                             | 664                              | 1561                                  | 2122                         | 2033  | 4058   |
| 3      | Assam             | 3   | 748  | 5072                            | 13023                            | 31042                                 | 5651                         | 0   | 34793  |
| 4      | Bihar             | 3   | 795  | 2951                            | 16245                            | 45980                                 | 0                            | 1   | 39331  |
| 5      | Chhattisgarh      | 4   | 2184   | 2042                            | 14066                            | 34034                                 | 0                            | 820   | 28165  |
| 6      | Goa               | 1   | 82   | 375                             | 442                              | 1253                                  | 0                            | 0   | 1112   |
| 7      | Gujarat           | 1   | 2805   | 5523                            | 23927                            | 17443                                 | 0                            | 0   | 41968  |
| 8      | Haryana           | 1   | 2675   | 3420                            | 3196                             | 13602                                 | 0                            | 26  | 17444  |
| 9      | Himachal Pradesh  | 1   | 1664   | 1300                            | 5009                             | 11517                                 | 347                          | 14  | 18248  |
| 10     | Jammu & Kashmir   | 1   | 473  | 1025                            | 5202                             | 13369                                 | 0                            | 0   | 16409  |
| 11     | Jharkhand         | 1   | 225  | 1429                            | 9996                             | 19818                                 | 0                            | 95  | 28587  |
| 12     | Karnataka         | 2   | 3426   | 11835                           | 27570                            | 28871                                 | 0                            | 0   | 53552  |
| 13     | Kerala            | 2   | 2380   | 3145                            | 3042                             | 6802                                  | 0                            | 0   | 31800  |
| 14     | Madhya Pradesh    | 2   | 4675   | 4997                            | 38107                            | 98463                                 | 0                            | 0   | 67607  |
| 15     | Maharashtra       | 1   | 4575   | 15762                           | 26863                            | 42467                                 | 2960                         | 55449   | 76198  |
| 16     | Manipur           | 2   | 103  | 701                             | 769                              | 2563                                  | 0                            | 1   | 7639   |
| 17     | Meghalaya         | 1   | 98   | 676                             | 2259                             | 6618                                  | 1464                         | 0   | 3195   |
| 18     | Mizoram           | 1   | 82   | 508                             | 1090                             | 1752                                  | 122                          | 0   | 1549   |
| 19     | Nagaland          | 1   | 69   | 337                             | 465                              | 1662                                  | 0                            | 0   | 3242   |
| 20     | Orissa            | 2   | 1088   | 7434                            | 20013                            | 49765                                 | 10976                        | 0   | 40983  |
| 21     | Punjab            | 1   | 1780   | 2330                            | 2477                             | 13238                                 | 0                            | 2   | 20169  |
| 22     | Rajasthan         | 3   | 5358   | 8309                            | 34211                            | 55361                                 | 0                            | 8   | 50209  |
| 23     | Sikkim            | 0   | 53   | 111                             | 221                              | 772                                   | 0                            | 1149  | 982    |
| 24     | Tamil Nadu        | 1   | 4582   | 2990                            | 8629                             | 29364                                 | 0                            | 5923  | 50433  |
| 25     | Tripura           | 1   | 290  | 423                             | 1021                             | 2151                                  | 206                          | 0   | 7315   |
| 26     | Uttar Pradesh     | 1   | 8000   | 7518                            | 42201                            | 127247                                | 4072                         | 0   | 145607 |
| 27     | Uttarakhand       | 1   | 1335   | 1027                            | 4263                             | 15356                                 | 1279                         | 0   | 8611   |
| 28     | West Bengal       | 4   | 3954   | 4686                            | 1283                             | 49913                                 | 320                          | 0   | 86829  |
| 29     | A&N Islands       | 0   | 52   | 44                              | 64                               | 226                                   | 0                            | 25  | 672    |
| 30     | Chandigarh        | 0   | 57   | 69                              | 11                               | 30                                    | 0                            | 0   | 370    |
| 31     | D&N Haveli        | 0   | 10   | 34                              | 108                              | 174                                   | 0                            | 0   | 6090   |
| 32     | Daman & Diu       | 0   | 9  | 19                              | 24                               | 50                                    | 0                            | 25  | 219    |
| 33     | Delhi             | 3   | 1303   | 465                             | 640                              | 2569                                  | 0                            | 51  | 102    |
| 34     | Lakshadweep       | 0   | 9  | 4                               | 4                                | 21                                    | 0                            | 10  | 87     |
| 35     | Puducherry        | 0   | 98   | 163                             | 112                              | 309                                   | 0                            | 533   | 564    |
|        | India             | 47  | 59166  | 113824                          | 325174                           | 787827                                | 29938                        | 66165   | 972896 |

Source: NCERT (2006) Seventh All India Education Survey of 2002-03, <http://www.gov.ua.nic.in/NScheduleData/main3.aspx>.

psychology in supporting and enhancing children's educational achievement and psychological well-being. Given the large size of the student body in India (see Tables 1

and 2) our conservative estimate of the number of school psychologists needed to serve the needs of the school-going population in India today, is about two million.

**Table 2. Enrolment of school education**

| S.No. | States/UTs        | Grand Total Enrolment from classes Pre-Primary to classXI |                  |                  |
|-------|-------------------|---|------------------|------------------|
|       |                   | Boys  | Girls            | Total            |
| 1     | Andhra Pradesh    | 7844057   | 7271436          | 15115493         |
| 2     | Arunachal Pradesh | 202528  | 175554           | 378082           |
| 3     | Assam             | 3478476   | 3291042          | 6769518          |
| 4     | Bihar             | 10130499  | 7338117          | 17468616         |
| 5     | Chhattisgarh      | 2856024   | 2497858          | 5353882          |
| 6     | Goa               | 131836  | 120751           | 252587           |
| 7     | Gujarat           | 6414890   | 4793585          | 11208475         |
| 8     | Haryana           | 2490714   | 2117246          | 4607960          |
| 9     | Himachal Pradesh  | 813631  | 723866           | 1537497          |
| 10    | Jammu & Kashmir   | 1134756   | 948774           | 2083530          |
| 11    | Jharkhand         | 3913941   | 3449295          | 7363236          |
| 12    | Karnataka         | 5753964   | 5359419          | 11113383         |
| 13    | Kerala            | 2857548   | 2789218          | 5646766          |
| 14    | Madhya Pradesh    | 10607579  | 8998864          | 19606443         |
| 15    | Maharashtra       | 12432264  | 10813872         | 23246136         |
| 16    | Manipur           | 387024  | 355990           | 743014           |
| 17    | Meghalaya         | 498315  | 498919           | 997234           |
| 18    | Mizoram           | 128771  | 119756           | 248527           |
| 19    | Nagaland          | 249612  | 230120           | 479732           |
| 20    | Orissa            | 4039268   | 3686886          | 7726154          |
| 21    | Punjab            | 2297573   | 1936795          | 4234368          |
| 22    | Rajasthan         | 8783710   | 6556931          | 15340641         |
| 23    | Sikkim            | 80433   | 80368            | 160801           |
| 24    | Tamil Nadu        | 7321144   | 6911460          | 14232604         |
| 25    | Tripura           | 431876  | 402436           | 834312           |
| 26    | Uttar Pradesh     | 23848562  | 20665568         | 44514130         |
| 27    | Uttarakhand       | 1197941   | 1097222          | 2295163          |
| 28    | West Bengal       | 8256844   | 7729230          | 15986074         |
| 29    | A&N Islands       | 44557   | 41560            | 86117            |
| 30    | Chandigarh        | 105782  | 86167            | 191949           |
| 31    | D&N Haveli        | 35423   | 29091            | 64514            |
| 32    | Daman & Diu       | 18854   | 16297            | 35151            |
| 33    | Delhi             | 1871427   | 1631306          | 3502733          |
| 34    | Lakshadweep       | 8681  | 8169             | 16850            |
| 35    | Puducherry        | 146240  | 139312           | 285552           |
|       | <b>INDIA</b>      | <b>130814744</b>  | <b>112912480</b> | <b>243727224</b> |

Source: NCERT (2006) Seventh All India Education Survey of 2002-03, <http://www.gov.ua.nic.in/NScheduleData/main3.aspx>.

## (ii) Mental Health of School Children in India

The mental health of school children is a primary concern for school psychologists. Children and adolescents constitute roughly 40% of India's population. About 10-13% of them suffer from behavioural, learning or developmental disorders (Srinath, 2000). Thus in terms of sheer numbers, approximately 48 million children across the

country may be at risk and need help for a variety of cognitive, social-emotional or behavioural problems. Data from a small number of surveys conducted on the mental health problems among school children in India show that the prevalence of such problems ranges from 3% to 36%. The most commonly reported problems in these studies include mental retardation, conduct disorder, attention deficit hyperactivity disorder (ADHD), and enuresis (Bhola & Kapur, 2003). A recent epidemiological survey by the Indian Council of Medical Research indicated that the prevalence rate of mental health problems among children aged 0-16 years was about 12.5%. Among the 4-16 years age group, researchers noted that specific isolated phobias, non-organic enuresis, hyperkinetic disorders (such as ADHD) and conduct disorder were the most frequently reported (Srinath et al., 2005).

Overall, it appears that the reported psychiatric morbidity among school populations, is relatively low in comparison with rates reported in studies from Western countries. However, the lower prevalence of mental health problems in school children may not necessarily reflect a lower incidence of problems in India. The reasons for differences between Western and Indian prevalence rates may include variations in study design, analytic strategies, sample sizes, and choice of instruments; discrepancies between multiple sources of information (such as teachers and parents); adoption of Western measures that have not been adapted to local socio-cultural contexts; differences in conceptualization of mental health problems, and social stigma involved in reporting mental illness. Moreover, a few studies in India have focused only on problems such as learning disabilities, –that are typically assessed in school settings. Estimating the prevalence and burden of mental health problems is necessary for identifying and addressing these problems and developing school-based interventions.

As the data on mental health problems in schools become clear, school psychologists can use this information to work with teachers and parents to create awareness about commonly occurring problems and help parents and educators identify these problems early in the child's development.

Another area of concern to mental health professionals, educators and policy-makers is the alarming increase in reports on suicidal behaviours. According to the National Crime Records Bureau (NCRB), more than a third of all suicides in India were committed by youth aged 15 to 29 years. Many of these youth were high school or college students. About 9% of the 15 to 29 years age-group reportedly committed suicide due to failure in examinations or mental health problems. Even more worrying is that almost 3,000 children in the 0-14 years age group committed suicide, and failure in examinations or mental health problems were the reported causes for about 14% of these children. Overall, approximately 7,000 students in primary, secondary and post-secondary institutions committed suicide (NCRB, 2009). The staggering number of students in schools and colleges that commit suicide each year point to the dire need to identify students who experience a variety of academic and psychological problems and those at risk for suicidal behaviours.

These concerns bring to light the need for school psychologists in conducting timely assessments of mental health problems, suicide risk assessments where appropriate and necessary. In addition school psychologists can make a significant contribution to the well-being of children by working with the school administration to develop standard protocols for suicide risk assessment and intervention and suicide prevention policies. Strategies can also include the development and use of programs that focus on creating positive experiences for students in schools. Initiatives for

identifying at-risk students are needed to ensure that these students receive the support and intervention they need in a timely manner. National-level mental health policies as well as specific initiatives for suicide prevention are urgently needed. Such policies can provide schools with a framework for implementing their own school-wide mental health promotion measures. Currently only about 2% of the country's health expenditures are allocated to mental health, with an even smaller share of resources allotted for the promotion of mental health in schools. If children's psychological and academic outcomes are to be improved, the Government of India needs to make a much greater resource commitment at the Centre and State levels towards the promotion of school mental health.

### **(iii) School Psychology Surveys**

Initiatives for the development of school psychology and training of school psychologists have been building for more than four decades, and began with the United Nations Educational, Scientific and Cultural Organization (UNESCO), (Wall, 1956). Contribution from researchers such as Catterall (1977- 79), have extended these early initiatives through the development of goals to guide the provision of school psychology services. But over the last two to three decades, surveys conducted by local and international bodies, as well as data from independent researchers have helped shape the field of school psychology. Examples of such research include surveys that have been conducted by the International School Psychology Association (ISPA) since 1990. The ISPA survey consists of 46 items that address five principal areas: a) characteristics of school psychologists, b) training and regulation of the profession, c) roles and responsibilities, d) challenges, and e) research. These surveys have been conducted in countries such as Albania, Cypress, Estonia, Greece and Northern

England (Schmitz, 2005). Such research has helped shape the preparation of guidelines for training and practice in school psychology and the guidelines themselves are reflected in common goals that school psychologists should aspire to.

In India, the Indian Council for Social Science Research (ICSSR) has carried out periodic surveys on the state of the field of psychology in the country. These surveys cover aspects of the profession such as areas of focus, development and the amount and quality of psychological research undertaken (Jain, 2005). Since school psychology is not a well-established sub-discipline of psychology in India, there is a paucity of research on its current status. Surveys such as those conducted by ISPA can greatly contribute to understanding several areas of school mental health in India. For example, such research can provide information on how school psychology is perceived in India; the mental health needs of school children; the characteristics of professionals providing psycho-educational and counselling services in and out of school; regulation of school mental health services; challenges in providing services to school children; and prevalence of educational psychology/school psychology research. Such research is critical in informing strategies for the promotion and advancement of school psychology in India.

#### **(iv) School Psychology Training**

Training is a vital component of the development of school psychology as a profession in India. The recently founded professional organisation, Indian School Psychology Association (InSPA), an affiliate of ISPA, is launching the first training programme for school psychologists in 2012. The training programme, conducted in partnership with international experts has been designed to international standards while also being adapted to Indian settings. The training modules (InSPA, 2011) include:

acquisition of skills in school psychology; lectures with interactive components; demonstration and role play; skill practice and material preparation; practice workshop with primary and secondary school children; assignments and tests. The individual modules are as follows:

Module I: Theoretical framework of school psychology

Module II: Role of school psychologists, overview of ISPA standards and Code of Ethics

Module III: Understanding school settings in India: rules, acts, policies and the educational context

Module IV: Mental health of school children

Module V: Crisis intervention and assessment techniques

Module VI: Yoga and meditation for school children

Graduate and post-graduate students enrolled in Psychology degree programmes, graduate students in Education degree programmes, and teachers with a B.Ed or M.Ed are eligible to participate in this training programme. Successful participants will be able to carry out basic roles and functions of school psychologists such as identifying sources of difficulties, understanding learning disabilities, conducting assessments, creating safe learning environments, implementing techniques such as yoga and meditation as part of children's everyday school experience.

#### **(v) Future Role of ISPA and InSPA in Developing School Psychology in India**

The International School Psychology Association (ISPA) is the only international organisation representing school psychologists worldwide. It was established in 1972 and organises an annual colloquium every year in different countries. More than 28 school psychology associations are now



formally affiliated with ISPA. It has more than 500 individual members in around 40 countries on six continents. ISPA also strives to promote the development of school psychology in countries where the profession is just emerging. This process is facilitated by the ISPA colloquium, an annual gathering that brings together professionals from around the world, held each year in a different country.

Recently ISPA collaborated with InSPA to organise ISPA's 33<sup>rd</sup> International Conference at Vellore Institute of Technology in Vellore (InSPA, 2011). More than 300 delegates from 26 countries participated in the conference. Many presentations addressed the need for school mental health services in India and discussed recent research to highlight the need for school-based psychological services. Given that ISPA is leading the development of school psychology worldwide, particularly in nations without school psychology services, it is fitting that ISPA organised its conference in India for the first time.

Indian school psychology can benefit greatly from this new alliance between InSPA and ISPA. ISPA can guide the development of several Indian initiatives such as ISPA accreditation of training programs in school psychology, exchange of research, travel grants for Indian researchers interested in presenting findings to ISPA conferences, and continually provide support to Indian researchers and clinicians that are currently leading the mission to establish school psychology in India. Thus ISPA plays a key role in advancing InSPA's mission to develop and to promote Indian school psychology on a sound scientific ground (Ramalingam, 2011).

In a recent paper, Ramalingam (2011) has made several recommendations that emerged during meetings with InSPA members. The following recommendations are important to consider in the initial stages

of school psychology in India:

i. Central/State governments must mandate the provision of school psychology services in every school across the country.

ii. Researchers should be encouraged to investigate issues related to the development of school psychology.

iii. Universities should consider developing special post-graduate programs for students in Psychology or Education who wish to work as school psychology professionals.

iv. School mental health should be considered a priority area by governmental and private funding agencies.

v. Professionals currently providing psychological or special education services in India and other South Asian countries should consider membership to InSPA to strengthen the organisation's collective resources.

vi. Training programmes developed through ISPA and InSPA collaborations should be launched across the country.

vii. InSPA should take an active role in pressing the Central and State governments to establish a regulatory body such as a School Psychology Council (SPC). This regulatory body would be responsible for developing guidelines and policies, issuing licenses to qualified professionals and monitoring training programmes and professional practices of school psychologists.

#### **(vi) Inclusion of School Psychology Academic Programmes**

As a pioneering initiative, a distance-learning institution, the Indira Gandhi National Open University (IGNOU), New Delhi, has introduced School Psychology as part of its Perspectives on Disability course within the Rehabilitation Psychology diploma programme. The suggested four units of the School Psychology component in the course are:

Unit 1. Psychological and educational foundations of school psychology

Unit 2. Psychological factors influencing learning, motivation and reinforcement

Unit 3. Gifted Children and scholastic backwardness

Unit 4. Inclusive education/ education for disabled.

Initiatives such as IGNOU's inclusion of school psychology in its programme highlight the increased recognition and awareness of the need for school mental health professionals in India. Another significant sign is the eagerness of the Sectional President of the Indian Science Congress Association (ISCA) to focus on school psychology. In this regard, ISCA has invited the first author to present a paper on school psychology at the 99<sup>th</sup> Indian Science Congress to be held at Bhubaneswar early next year. Furthermore, in India, school psychology is becoming popular in private settings in metropolitan cities like New Delhi, Mumbai, Chennai, and Bangalore. Many of the private schools that offer psycho-educational and counselling services to school children employ well-trained school psychologists. In addition, there are professionals in private clinics who provide mental health services in both government and private schools. The roles of these professionals in schools differ based on the needs of the school as perceived by the school administration. Although schools have now started employing qualified psychologists, there continues to be a chronic shortage of school psychologists. In fact, across countries psychologists, teachers, parents and professionals who work for other support services also agree that there is a shortage of school psychologists, and that because of this shortage, school psychologists are unable to respond quickly, and in some cases effectively, to the range of demands that are placed on them (Farrell, 2010).

### **(vii) A Future Vision**

As an independent organization, InSPA has the responsibility of conducting workshops on administering standardized assessments of cognitive ability, and social-emotional functioning; helping teachers and psychologists in taking clinically oriented interviews; and impart preliminary training on internationally recognized diagnostic procedures. Although there are several Indian tests in place, most of them have not been validated across the country. In general, tests developed in India have not been subjected to rigorous standardization procedures and do not have norms from diverse regions in India.

Several dedicated educators, clinicians, and members of the community have made concerted efforts to form a psychology council in India. However, as discussed above, there is a specific and urgent need to create a school psychology council in India. This Council would be responsible for developing guidelines for training programmes in school psychology and for the professional practice of school psychology, monitor and evaluate these programmes and professional activities, issue licences to qualified professionals, and mandate ethical principles for school psychology practices. Through continued research and evaluation, these guidelines would be updated regularly and reflect the changing needs of student populations as well as changes in the wider context of international school psychology.

### **Conclusion**

In this paper we discussed the roles and functions of school psychologists as viewed across countries and underscored the urgent need for development of school psychology training and practice in India that reflect international standards. We highlighted the role of organizations such as ISPA and InSPA in leading initiatives to engage educators, clinicians, and policy makers, in discussing,

developing and implementing strategies to advance school mental health. Children in India are now global citizens. The mental well-being of India's children is an integral part of India's overall socio-economic development. As India forges ahead in terms of economic prosperity, every child should have the right to avail of every opportunity to enrich the full range of educational experiences and improve their mental well-being to enhance prospects for the future. In this context, given the close association of education and social and economic access, agency and mobility, the role of school psychologists is especially relevant in the Indian context. We believe that school psychologists will play an extremely important role in improving the academic and mental health outcomes of millions of children across India in the future. Thus, every effort towards advancing school psychology must be supported by policy makers, planners, educators, political leaders and communities across India.

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