



**NAMI Ask the Expert:**  
Collaborative & Proactive Solutions:  
Ending Punitive Disciplinary Practices and Disproportionality  
*Featuring: Dr. Ross Greene*

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**Dan Gillison, Chief Executive Officer, NAMI** ([00:00:00](#)):

Thank you very much, Teri. Good to be with you all on today. Good afternoon, good midday to many of you. We're excited about today's session. And on behalf of NAMI, our board, our board president, Shirley Holloway, and our staff, as well as all of our leaders in the field and all of the field leaders who are doing so much for so many, we really appreciate them and wanted to say hello to them as well. Today's session is going to be incredibly valuable. I love the title of Collaborative and Proactive Solutions because that's what we're all very interested in. I just wanted to welcome everyone to today's session and now hand it off to our chief medical officer, Dr. Ken Duckworth. Ken?

**Ken Duckworth, Chief Medical Officer, NAMI** ([00:00:53](#)):

Good afternoon, everybody. Thank you for joining us. The context of our requesting Dr. Ross Greene, a clinical psychologist founding member of Lives in the Balance, and a long time friend of NAMI, he's helped us with a lot of pieces that relate to NAMI basics and other creative things. This is the fifth in our help not handcuffs series. As you know, the last four Ask the Expert webinars have been devoted to jail diversion, to best practices in mobile crisis, to talking to the people at cahoots, which is a national model of non-punitive intervention with people who request help.

**Ken Duckworth** ([00:01:38](#)):

Of course, the 988 number, which is an advocacy challenge for us all, now that is going to be a number you can dial for suicide prevention and hopefully crisis response. Dr. **Ross Greene** is completely consistent with that. He has the added value of thinking primarily about children and adolescents. His approach is proactive, thoughtful, and it's a great honor to have Dr. **Ross Greene** here. I hope you enjoy it. If you're interested in the other sessions on keeping people out of correctional settings, they're right on the website. Dr. Ross Greene, thank you.

**Ross Greene** ([00:02:22](#)):

Ken, thank you so much. It's good to be back helping out with NAMI. I'm very glad to be here and very glad that NAMI has given people the opportunity to hear about collaborative and proactive solutions. Let me preface what I'm about to say by saying that I'm going to angle my talk toward some of the social issues, especially in the United States, but also in other places that have been there for a very long time, but that have really grabbed our attention recently because of some very unfortunate events that unfortunately don't seem to stop happening.



**Ross Greene** ([00:03:11](#)):

In the context of kids, there are events that don't stop happening that don't always make the news. I'm sure many of you are familiar with what's known as the school to prison pipeline. Many of you are aware of disciplinary practices in schools that we badly need to end, and that there is federal legislation that's been submitted to try to end, including the Keeping All Students Safe Act, which would largely get rid of restraint and seclusion in our schools. Another bill would end the use of corporal punishment in our schools. That one is called the Protecting Our Students in Schools Act. This is now active legislation that is being considered.

There's the Counseling Not Criminalization Act, which would direct a lot of funding toward counseling instead of toward school resource officers. These are pieces of legislation that the nonprofit that I founded Lives in the Balance is very actively engaged in trying to see through. It's not easy. The bad news as well, of course, is that a lot of the punitive exclusionary things we do to kids we do disproportionately to kids who are black and brown.

And so I'm going to be talking about the CPS model, collaborative and proactive solutions in that context, because here's what I'm finding. A lot of good work being done these days on equity and anti-racism and social justice, I do view this as a social justice model. This is giving kids voice, this is giving kids agency, this model does. But I find that in a lot of places, we need a paradigm shift because there are still some very old obsolete ways of thinking about kids and especially the ones who exhibit concerning behavior that are still standing in the way. A lot of the practices that flow from those ways of thinking are still getting in the way and are still very popular unfortunately. We need a paradigm shift.

What I've been talking about quite a bit these days are the components of the paradigm shift that I think needs to occur so that we're giving all of our kids a fair shake, even the ones who have social, emotional, and behavioral challenges, which is, of course, the population I've been working with for a very, very long time. What I'm going to do first is go through the components of the paradigm shift, then I'm going to give you some technicalities of the collaborative and proactive solutions model, just how do these components of a paradigm shift play out in real life.

The paradigm shifts may feel a little bit abstract, but we bring them to life every day, in prisons and general and special education schools and inpatient psychiatry units and residential facilities and families. This is about as practical as it gets. But if we're going to help the kids we are losing better than we're helping them now in many places, here's paradigm shifting component number one. We need to stop focusing on their concerning behavior, which sounds crazy because it's their concerning behavior that's the reason we think they need our help. You help them better if you're not focused on their concerning behavior and you help them some better when you're not trying to modify that behavior. You help them better when you are instead focused on the problems that are causing those behaviors and solving them.

This is a problem-solving model. I find that care givers are much more helpful when they are in the mode of problem solver rather than behavior modifier. That's what I find. You might be wondering, "Well, wait a second. If we're not modifying the behavior, how will the behavior improve?" Well, what the research tells us, and there's a fair amount of it that's accumulated on the collaborative and proactive solutions approach at this point is that when you are busy solving problems in the ways that I'm about to describe with kids, their behavior improves every bit as much as it would have if all you were busy doing was trying to modify their behavior.

**Ross Greene** ([00:08:13](#)):

But if all you're busy doing is modifying their behavior, those problems do not get solved. What kind of problems are we talking about here? I'll talk about the behaviors in a second, but what are we talking about here? The expectations, kids are having difficulty meeting that cause their concerning behavior. Mundane stuff like if you're a parent, your kids having difficulty brushing teeth before going to bed at night, that causes meltdowns millions and millions of families every night, difficulty completing a particular homework assignment, difficulty is a big one, getting off the technology to come in for dinner, difficulty turning off the technology by 9:00 PM at night, difficulty... Like I said, pretty mundane stuff.

When kids have difficulty meeting those expectations, they exhibit concerning behavior. What does that concerning behavior communicate? I'm stuck. There's an expectation I'm having difficulty meeting. In other words, the behavior is the signal, the fever. You've all heard the cliché, behavior is communication. Now, you know what behavior is communicating. I'm stuck. There's an expectation I'm having difficulty meeting. By the way, the expectations kids have difficulty meeting at school that frequently cause their concerning behavior, really not a whole lot less mundane, difficulty coming back into the classroom after recess, difficulty sitting next to Suzy during circle time, difficult to complete in the double digit division problems on the worksheet in math, difficulty getting along with Trevor on the school bus, difficulty agreeing with Billy on the rules of the four square game at recess.

The unsolved problems don't tend to be earth shattering. The behaviors can be earth shattering. These days I don't slice the pie of concerning behaviors by psychiatric diagnosis. I just don't think that's the best way to slice the pie. I actually don't think we need to slice the pie. But if we needed to slice the pie of concerning behaviors, I would slice the pie into two pieces. There are lucky ways of communicating that you're having difficulty meeting certain expectations, and there are unlucky ways of communicating that you're having difficulty meeting certain expectations.

Now, I use the terms lucky and unlucky for a particular reason. Others might say internalizing versus externalizing. I use lucky and unlucky to make a very important point. Otherwise, it's an artificial distinction, but it has a lot to do with how that kid's going to get treated. What are lucky ways of communicating that you're having difficulty meeting certain expectations, whining, pouting, sulking, withdrawing, crying? Why are those ways of communicating that you have difficulty meeting expectations lucky? Well, those ways aren't going to get you popped into time out, not going to get you held after school, not going to get you held in from recess, not going to get you a detention, suspension, expulsion, not going to get you hit.

Spanking is still extraordinarily popular in American families. We're talking in the millions here. Spanking is in the form of paddling, in the form of corporal punishment, is still way too popular in American public schools in 19 different states. Here in the year 2021, people are still hitting kids on the butt with a piece of wood close to 100,000 times every school year. Those lucky ways of communicating that you're having difficulty meeting certain expectations are not going to get you pinned to the ground by two to four big adults in what is commonly known as a restraint, not going to get you thrown into a locked or blocked padded room seclusion that may have been a Freudian slip because we do this stuff more, as I've already said, to kids who are black and brown, not going to get you arrested at school, referred to the police, but best of all.

**Ross Greene** ([00:12:59](#)):

Those ways of communicating that you're having difficulty meeting certain expectations are highly likely to elicit empathy, nurturance, support from your caregivers. Lucky you kid, not so with the unlucky variety, and that's the variety I've been working with for a very long time. What are unlucky ways of communicating that you're having difficulty meeting certain expectations? You already know, but here's a sampling, screaming, swearing, hitting, spitting, kicking, biting, throwing, destroying, running. There's worse. There's more, just a sampling. Why are those ways of communicating that you're having difficulty meeting certain expectations unlucky? Well, at the mild end, those ways aren't going to get you held in from recess, held after school timeout.

Now, we're getting more severe, detention, suspension, expulsion, hit, pinned, thrown, arrested, but worst of all. Those unlucky ways of communicating that you are having difficulty meeting certain expectations are far less likely to elicit empathy, nurturance, support from your caregivers. That's why I call them unlucky and lucky. By the way, that's true even though. A field of research known as developmental psychopathology has been telling us for a very long time that whether your behaviors are lucky or unlucky, they are communicating the exact same thing. I'm stuck. There's an expectation I'm having difficulty meeting. The things we do to kids by mere virtue of the fact that they are communicating that they're having difficulty meeting certain expectations in ways that are unlucky are unconscionable and unnecessary and place them in the pipeline to prison, as you might imagine.

If we're going to be focused on problems, not behaviors, we're going to need different assessment methodology to help us identify those unsolved problems. By the way, unsolved problems are also known as problems that have yet to be solved, also known as problems that are waiting to be solved. If all we're focused on is the behavior that's being caused by those problems, the problems will remain unsolved because behavior modification strategies don't solve problems, they just modify the behaviors that are being caused by those problems.

The assessment tool that we use in the collaborative and proactive solutions model is called the assessment of lagging skills and unsolved problems. I will be introducing it to you before we're done here over the course of the next 45 minutes or so. It is free. You can find it in an editable fillable form on the Lives in the Balance website, the website of the nonprofit I founded. Another thing you'll find on the Lives in the Balance website, a documentary film, an award winning documentary film called The Kids We Lose. 90-minute feature length documentary film produced by Lives in the Balance. It's brutal, but worth watching. It's not on the Lives in the Balance website yet, but you'll be able to watch it free in about a week when the brand new Lives in the Balance website launches. That's paradigm [inaudible 00:17:00] component number one, that one always takes the most time. But boy, is it important? We've been focused on the wrong thing. We've been talking about the wrong thing. We've been treating the wrong thing.

Component number two, now that we're in the problem-solving business, we need to think about what kind of problem solvers we want to be. We adults tend to be real keen on problem-solving of the unilateral kind, that's where the adult decides what the solution is and imposes it on the kid. It's not what you're doing in this model. In this model, we operate on a very important assumption. You want to solve a problem with a kid? You're going to need a teammate. You're going to hit a partner. Who's your partner? The kid. By the way, generally speaking, that kid is going to be delighted to help you out. That kid's been wondering for a very long time, how come we adults keep trying to make things better without the kids' input, without the kids' ideas, without information from the kid, without the kid's sign off? This is problem-solving of the collaborative kind. It's something you're doing with the kid, not to the kid.

**Ross Greene** ([00:18:20](#)):

Now, there are some typical questions that usually pop up in response to paradigm shift component number two, like what if the kid won't talk? What if the kid can't talk? We solve problems with reluctant talkers all the time. We find every reluctant talkers do talk, generally speaking. When you're no longer talking with them about their concerning behavior and are instead talking about the problems that are causing those behaviors, they'll talk. The kids who are non-speakers are communicating. They just aren't communicating through our preferred modality, the spoken word, but they too can be engaged in solving the problems that affect their lives. We're going to collaborate even when it seems more difficult. That's paradigm shifting component number two.

I didn't spend as much time on this component number one, but it is no less huge. Talk about huge, here's paradigm shifting component number three. Now that we are solving problems with kids and now that we are solving them collaboratively, we have to think about our timing. As you all know, a great deal of the intervention that takes place with kids with concerning behaviors takes place in the heat of the moment emergently, reactively. Just after the kid exhibits concerning behavior, but way, way after a problem has set that behavior in motion, 99.9% of what you're doing in this model is planned, proactive. What questions pop up with that component? How can we be planned and proactive if we never know when the kid's going to blow, when the kids always get upset from out of the blue, when the kid is so unpredictable?

Here are the answers. The kid's not unpredictable, the kid's not getting upset from out of the blue, you know exactly when the kid's going to get upset. If you answer two questions right up front, and those two questions are why, and when, as in, why do some kids respond so poorly to problems and frustrations? When do kids exhibit concerning behaviors? Let's answer those two questions. But I should let you know those are the very two questions that are answered by the assessment of lagging skills and unsolved problems. The answer to the question why has been provided to us by the research that has accumulated on kids with concerning behaviors over the last 40 to 50 years.

Believe it or not, that 40 to 50 years of research can pretty much be summarized in one sentence. Here it goes, why do some kids respond so poorly to problems and frustrations? Because they're lacking the skills to respond more adaptively to those problems and frustrations. Key word, skills, missing word, motivation. There isn't any research telling us that kids have concerning behaviors because of poor motivation, which begs the question then why are we putting so much time and energy into trying to motivate them? Unmotivated is not what they are. There is a mountain of research telling us they're lacking skills. You'll see a bunch of those skills when we turn our attention to the assessment of lagging skills and unsolved problems.

But the global skills we're talking about here are skills like flexibility, adaptability, frustration tolerance, emotion regulation, problem-solving, those kind of skills. That research is compelling. When do kids exhibit concerning behaviors? Believe it or not, we've actually almost already covered that when they're having difficulty meeting certain expectations. Thank goodness, the assessment of lagging skills and unsolved problems is going to help us answer the question why, lagging skills. Thank goodness, the assessment of lagging skills and unsolved problems is going to help us answer the question when, unsolved problems.

Once you know why, once you know when, and by the way, it should take you 45 to 50 minutes to complete the assessment of lagging skills and unsolved problems for a particular kid, once you know why and once you know when. This is a very predictable kid. Intervention can be almost exclusively proactive because you now have the information that's been missing, lagging skills, unsolved problems. We've known what this kid's concerning behaviors have been for a very long time, we don't have to spend a whole lot of time talking about that. We've known what psychiatric diagnoses, the kid meets criteria on the basis of those behaviors for a very long time.

**Ross Greene (00:23:53):**

I don't think we need to spend a whole lot of time talking about that. What we should be talking about is the information that's been missing, lagging skills, unsolved problems. This is an important slide. To drive home this point about being proactive, we have this slide depicting the sequence of restraint and seclusion. Quite frankly, it's the sequence of all punitive exclusionary disciplinary practices. But as you've already heard, Lives in the Balance is trying very hard to see if we can help pass laws that will get rid of restraint and seclusion.

The problem, of course, is that there are many people who are still believing that they are necessary and that they promote safety. We'll put those to bed with this slide two. But the main point of this slide is to make clear graphically what's early crisis prevention and what's late crisis management. The colors of the bubbles are actually meaningful, in blue, everything that's early, in late... excuse me, in red, everything that's late. You don't want to be late, you want to be early. What's early? Crisis prevention, figuring out what expectations the kid is having difficult meeting. What are the kid's unsolved problems and solving those problems proactively so that you never find yourself in the red?

If that's what we mostly did in most places where you would find kids with concerning behaviors, there wouldn't be any more restraints, seclusion, there wouldn't be any more paddling, there wouldn't be any more of a whole lot of things that don't do any good anyhow. The problem is that that is not what mostly gets done in a lot of places. When a kid is having difficulty meeting an expectation, what is the prototypical first adult response to a kid who's having difficulty meeting an expectation? Red bubble number one, insist harder, push harder, founded on the belief that pushing kids harder elicits better performance and we all want better performance out of every kid except for one thing. It hasn't been my experience that pushing kids harder to meet expectations, we already know they cannot reliably meet elicits better performance.

My experience is that doing that elicits red bubble number two, behavior, behavior that communicates to us something we already knew, the kid's having difficulty reliably meeting that expectation. We knew that already. I want to make a very important point here. The behavior is late, behavior is late. The unsolved problem that's causing the behavior happened a while ago. The behavior is late and interventions that are focused on behavior are interventions that are focused on what's late. If the behavior is of the unlucky kind, based on our crisis prevention training, we adults are going to come to the conclusion that the kid is becoming escalated.

Wait a minute, if you're now late, how can that be crisis prevention? You've now stumbled upon red bubble number three, what are you going to do based on your crisis prevention, but really crisis management training? You're going to deescalate the kid. You're not very late. That can't possibly be crisis prevention. If your de-escalation strategies do not get the job done and they frequently don't, and why don't they because you're already late, what does your crisis prevention, but really crisis management training tell you to do next? Put the kid in a restraint or seclusion. You are now very, very late, founded on the belief that restraint and seclusion keep us and the kids safer.

I'm aware of no data, whatsoever, telling us that restraint and seclusion keep us safer. In fact, yet another kid died being restrained about three months ago in the United States of America. There's got to be a better way and the better way is proactive. The better way has us early not late focused on problems and solving them, not behaviors and modifying them. Paradigm shifting component number four is the mentality of the model. Many of you who know this model probably think of this as the key theme of the model, kids do well if they can. This is the belief that if this kid could do well, the kid would do well. If the kid's not doing well, something must be getting in the kid's way. What's getting in the kid's way? What the research tells us is getting in the kid's way? Lagging skills, unsolved problems.



**Ross Greene (00:29:41):**

The problem, of course, is that kids do well if they can is not what we've been thinking for most of human evolution. Of course, we didn't have the research that's accumulated over the last 40 to 50 years for most of human evolution, but we do have it now. What have we been thinking for most of human evolution and in many places still do, kids do well if they want to, kids do well if they can, and kids do well if they want to are two completely different mentalities. They have completely different implications for what you're thinking about this kid and what you're doing with or to this kid to try to help this kid.

Let's think about kids do all if they want to for a few minutes because this sure is popular. If you have a kids do all if they want to mentality, and you're working with a kid who's not doing well, then the reason you think the kid isn't doing well is because the kid doesn't want to do well. Why would the kid not want to do well? Well, we've got that covered or at least people who think that way have that covered with some very popular characterizations like attention seeking, manipulative, coercive, unmotivated, limit testing, all validating the belief that somehow doing poorly is working out better for the kid than doing well would.

That makes no sense, but it's a very popular way of thinking. Let me just talk you out of one or two of these just to make the point. How is doing poorly working out better for the kid than doing well would? Well, because he's getting attention for doing poorly. You mean the kid has the skills to seek attention in the right way, but the kid is choosing to seek attention the wrong way because that's making their life go better? I've never seen it. I'm open to it. I've never seen it. I've about 2,000 kids with concerning behaviors in at this point in my career. I haven't come across one who had the skills to seek attention the right way, but was choosing to seek attention the wrong way because it was making their life go better. Plus, if you think a kid is getting attention by doing poorly, what intervention is going to make perfect sense?

A very commonly recommended one, ignore the kid so as to take all of the reinforcement out of the kid's concerning behavior. What if that's wrong? What if instead the kids concerning behavior is simply the means by which the kid is communicating, that there are expectations the kid is having difficulty meeting? Can't ignore that. Let me cover one other one. The kid is unmotivated, I would never say that about anybody. Why not? Because here's what I've learned. The minute we take a closer look, what are this kid's lagging skills? What are this kid's unsolved problems? We find that unmotivated doesn't even come close to capturing what's really going on with this kid.

The trick, of course, is to take a closer look using the assessment of lagging skills and unsolved problems. The trick is to not leap to these cliches that are up on the screen right now as are explanations for why a kid isn't doing well. If this kid could do well, this kid would do well, something's getting in the kid's way, we've got to figure out what that is. By the way, it's not just kids who do well if they can. Parents do well if they can, teachers do well if they can. We all do well if we can. I think the assessment of lagging skills and unsolved problems should be the standard phrase, so I've got no stock in this financially.

These standard triaged pre-referral instrument in every school. I was going to say in North America, but it's translated into a lot of languages in every facility, every treatment facility, because no matter where this kid with concerning behaviors is winding up, pretty surefire bet the information that's been missing is still missing. That information is going to be identified with the assessment of lagging skills and unsolved problems in 45 to 50 minutes.

**Ross Greene (00:34:40):**

Finally, paradigm shifting component number five, doing well is preferable, why is that a big deal? Of course, to me, that's a statement of the obvious. Of course, doing well is preferable, like preference for doing well explains why almost all of us do well most of the time. We prefer it, so do kids with concerning behaviors. Kids with concerning behaviors prefer doing well to the difference between a well-behaved kid and a kid with concerning behavior is not that the well-behaved kid prefers doing well, and the kid with concerning behaviors doesn't. That is just incorrect. It's that the well-behaved kid has skills that that kid with concerning behaviors is lacking.

Picture two, kids sitting at the same table struggling with the exact same math assignment. Now, if they're struggling with a math assignment, pretty sure fire bet they're lacking math skills, but those are not the skills we've talked about in this model, math, reading, writing, spelling. What we talk about in this model, the skills that make it hard for kids to respond adaptively to problems and frustrations. Let's go back to our two kids at the table working on the exact same math assignment, both are struggling with it. One of them is very calmly raising their hand and saying, "Can I get some help over here?" The other kid is losing their mind. What explains the difference between those two kids? One has skills that the other is lacking. They're both lacking math skills. One of them has the skills to respond adaptively to that problem or frustration.

All right, we've made it through the five components that are related to the paradigm shift. I hope you all are hopefully noticing these five components would be a very big shift in a lot of places. It's a shift that very badly needs to occur for us to give every kid a fair shot, especially the ones I worry about the most, the ones with concerning behaviors. Now, I don't really want to overdo this, but let me make a few points. As someone who was trained in behavior modification strategies, by the way, early in my career, what are the limits of those strategies? We're talking here basically about rewarding signals you like so to see more of them and punishing signals you don't like so to see less of them. What are the limits of doing things that way?

Rewarding and punishing solves no problems, and hence, no skills. In fact, I find rewards and punishments to be distracting. They cause us to focus on signals, behaviors, rather than on the problems that are causing those signals. As I've already mentioned, there is significant disproportionality in the ways in which rewards and punishments, in particular, are administered in American public schools.

Here's my attitude, there wouldn't be disproportionality if we weren't using punitive exclusionary disciplinary practices. They're good for nobody, but there's the best way to get rid of disproportionality, stop using them. They weren't working for anybody. The fact that we are disproportionately applying them to certain kids is important, but we got to get rid of those procedures for all kids. And when we do that, disproportionality goes along with it. If we're going to be disproportional, better to be disproportional and solving problems with kids than in doling out detentions, suspensions, paddling, restraint, seclusion, arrests.

This slide comes to us from the Steinhardt Institute at New York University. It tells us that disproportionality is complex and it is complex. How do I and my colleagues at Lives in the Balance tried to knock out disproportionality? Our primary focal point while all of the bubbles are important and important to focus on and important to address, we tend to go after the two that are in the lower left, the orange and the green bubbles in the lower left at nine o'clock and ten o'clock, discipline policies and practices and interventions and referral mechanisms. We find that when we can address those two factors, get it hard, you can get rid of punitive exclusionary disciplinary practices in a school in about a year and a half and the disproportionality that probably went along with it. Everything on the screen is important. Those are the two we tend to focus on the most.



**Ross Greene** ([00:40:11](#)):

All right. What are the two most important roles? Now, we're going to get a little bit more technical for the rest of my time with you here before we do questions. What are the two most important roles a helper can play in the life of a kid who's struggling? Role number one, figure out what that kid's lagging skills and unsolved problems are using, and this is on the very next screen, the assessment of lagging skills and unsolved problems. As we've already heard, once you know what a kid's lagging skills and unsolved problems are, this is very predictable kid, intervention can be almost exclusively proactive.

What I say to educators and parents that I work with all the time and staff members in facilities, one of my favorite phrases for them is, "I'm going to get you out of the heat of the moment." Not much good happens in the heat of the moment. By the time you're here in the heat of the moment, you're in crisis management mode. I'm going to get you out of the heat of the moment. What is the most important tool I use to help them get out of the heat of the moment? The assessment of lagging skills and unsolved problems. Many parents and educators tell me that they are in perpetual survival mode, meaning that they are so overwhelmed by a kid's or many kids' behavior. They feel like they're barely keeping their heads above water.

In this model, you're really not focused on those behaviors, you're focused on the problems that are causing those behaviors. You're not in perpetual survival mode. You're too busy solving problems. A lot of them tell me that they're walking on eggshells. What does that mean? It means that they feel like they never know when the kid's going to blow. They're treading very carefully. In this model, you know exactly when the kid's going to blow and you've identified those unsolved problems. And once again, you're busy solving them.

Component number two, role number two, start solving those problems, but do it collaboratively and proactively. Because when you're solving problems with kids collaboratively and proactively, you got yourself a partner, a teammate, a kid. When you're solving problems collaboratively and proactively, you are engaging kids in solving the problems that affect their lives. I'm always asking, "Why would you want to leave the kid out of the loop on that?" When you're solving problems collaboratively and proactively, you and the kid are together coming up with solutions that are a whole lot more effective and a whole lot more durable because you're not flying solo.

Why were you flying solo? As I've already intimated, when you're solving problems collaboratively and proactively, then your process of solving problems collaboratively and proactively also enhances the skills the kid is lacking. By engaging kids in solving problems collaboratively and proactively, you're not just solving problems, you're not therefore just reducing concerning behaviors, you're not just improving communication, you're not just improving relationships. You are also enhancing the very skills the kid was lacking that were making it so hard for the kid to respond to problems and frustrations adaptively in the first place.

All right, there it is, assessment gold, the assessment of lagging skills and unsolved problems or ALSUP. And this is the newest rendition of the ALSUP. We call it the ALSUP 2020. If you're familiar with the ALSUP already, it is different than the one you may have used previously. It's got two sections. In the top section, lagging skills. Bottom section is where you're going to be writing in, or preferably if you're using the editable fillable format that you'll find on the Lives in the Balance website, typing in unsolved problems.

Now, let me just tell you a little bit about this instrument. The first thing I'm going to tell you is that on the Lives in the Balance website, there is a video teaching you how to use it. I strongly recommend that you watch it. It's about 35 minutes long. And when the new website launches, which I thought would be launched by now, but these things always take longer than you thought they would, I think the new website is going to be up by either the end of this week or the beginning of next.

**Ross Greene** ([00:44:54](#)):

There's a video on there showing an ALSUP meeting. All free, by the way. None of this costs you money on the Lives in the Balance website. Here's what I say about the lagging skills section. It's not an exhaustive list of lagging skills. It's a representative list of lagging skills. There's 18 of them there. If I had tried to be exhausted about all of the skills the research tells us, kids with concerning behaviors could be lacking. It also would be 8 to 10 pages long. You don't need 8 to 10 pages of lagging skills to get the right lenses on. 18 lagging skills will do the trick. And that is the primary purpose of the lagging skill section, lagging skills, not lagging motivation.

Engaging people in the process, caregivers and the process of identifying a kid's lagging skills can actually be extremely persuasive. It can help them move from attention-seeking, manipulative, coercive, unmotivated limit testing to the specific skills this kid has been lacking all along. Thank goodness, you finally identified them. Now, you have the right lenses on. Once again, lagging skills, not lagging, motivation.

The bottom section, as you already know, is where you're writing in unsolved problems, all of the expectations this kid is having difficulty reliably meeting, you're not spending any meeting time talking about why the kid is having difficulty meeting the expectation. You're not going to know why the kid is having difficulty meeting the expectation. You may think you know why, you could theorize about why, but your number one source of information on what's making it hard for a kid to meet a particular expectation as you shall learn soon, actually you're learning it now, is the kid. The kid is your number one source of information on what's making it hard for the kid to meet a particular expectation.

In the unsolved problems section, if you work in a school or a facility, there are four prompts that will help you identify the kid's unsolved problems. If you're a parent or working in a clinic with parents, there are other prompts that are going to help you identify the kid's unsolved problems. You want to write in as many unsolved problems as you can. They're all real. Don't be surprised if after you watched the video teaching you how to write unsolved problems, that's the main purpose of the video, lagging skills are easier to tackle off, unsolved problems are a little tough to write in because of some guidelines that go along with writing unsolved problems, guidelines that have you wording the unsolved problems in a way that increases the likelihood that the kid will actually want to help you understand what's making it hard for them to meet a particular expectation because the wording of the unsolved problem on the ALSUP is going to translate directly into the words that you're going to use when it comes time to introduce the unsolved problem to the kid.

Poorly worded unsolved problems often cause the problem-solving process to come to a dead stop before it even gets started. I call that failure to launch. Here's what some well-worded unsolved problems sound like. They all begin with the word difficulty, by the way. The word difficulty is followed by a verb. You'll learn this in the video, difficulty agreeing on the rules of the four square game with Billy at recess, difficulty coming back into the classroom after recess, difficulty completing the double digit division problems on the worksheet and map, difficulty brushing teeth before going to bed at night, difficulty turning off the Xbox to come in for dinner, difficulty... this will not be a well-worded one, turning off the Xbox to participate in some other facet of life besides life behind the screen. That's where you're writing those in.

Please watch the video. It's going to help you a lot. Here's what you hope happens during an ALSUP meeting, whether it's in a school, or a clinic, or a prison, or an inpatient unit, or a residential facility, or a group home. You hope light bulbs go on, you hope people say, "Wow," as in, "Wow, this kid really is lacking a lot of skills." That is a beautiful wow moment, especially when it is uttered from the lips of someone who wasn't thinking that when they walked into the meeting. "Wow, no wonder what we've been doing hadn't been working." That is a beautiful wow moment, especially when it is uttered from the lips of someone who came into the meeting thinking we should just keep doing what hadn't been working for the last three years.

This next one often comes with a rather shaken up look attached. "Wow, I'm feeling bad about how I've been treating the kid. Now, what's that caregiver all shook up about?" Well, they are now simultaneously reflecting on how they've been treating the kid and what they now know about the kid and they are coming to the recognition that the two do not square up. That'll shake up more wow moments. You're saying the kid only gets upset when these unsolved problems pop up, that's right. You're saying these unsolved problems don't pop up. We know they're coming. Well, that's right. Any unsolved problem you've written in on the assessment of lagging skills and unsolved problems is by definition predictable, or you wouldn't have been able to write it in. And you're saying that if we solve these problems with the kid, the kid won't get upset about them anymore. You're saying we can solve those problems proactively, not reactively. I'm going to get you out of the heat of the moment.

All right, your next goal, and then we'll talk about how you're going to be solving those problems is prioritizing. If you've identified 40 or 50 unsolved problems with this kid, first of all, congratulations. I think you just did this kid the favor of a lifetime. You finally memorialized all of the expectations. This kid's been having difficulty meeting many of them for a very long time. Staring at a long list of unsolved problems can be very sobering for caregivers. It causes some interesting reactions like, "Wow, I didn't realize it was this many. Wow, if I had this many unsolved problems, I don't think I'd get out of bed in the morning." Some kids don't. If I had this many unsolved problems smacking me in the face when I wake up in the morning, I don't think I'd go to school. Some kids don't.

Can he meet all of these expectations? Apparently not. How strongly do we feel about all of these expectations and what are we doing? Good reactions, very good reactions. By the way, another common phrase of mine when I'm working with people who are trying to stop restraining excluding kids is I hate seeing kids get restrained and secluded over expectations we already know they cannot reliably meet. That just makes no sense whatsoever. No matter how many unsolved problems this kid has, 20, 30, 40, 50, you're not going to be able to work on them all at once, which means your next goal is to prioritize. What unsolved problems are you going to try to solve? And which ones are you going to set aside for now? Got to prioritize. Which ones should you pick? Here's my algorithm. Any unsolved problems, setting in motion safety issues should be a high priority, safety first. Safety's a big deal.

If you don't have safety issues, you're either going with frequency, the unsolved problems that are setting in motion concerning behaviors most often or gravity, the unsold problems that are having the greatest negative impact on the kid's life or the lives of others. How do you keep track? The second sheet of the model also available for free on the Lives in the Balance website. It's called the problem-solving plan. It's going to help you keep track of what unsolved problems you're working on right now with a kid, who's working with those unsolved problems with the kid, and help you keep track of the process of solving the problem, which you are about to hear me describe. All right. We're going a little fast here, I know, but you've got all those free resources waiting for you on the Lives in the Balance website to fill in the blanks.

Last topic, how are we going to solve those problems? In the real world, you got three options. I call them plan A, plan B, and plan C. In this model, you're only using two of them, B and C. Plan A is only up there as a reference point because at least at this point in human evolution, it's still very popular. You're almost never using plan A in this model. Notice unsolved is underlined at the top. That's because if a problem isn't unsolved, you don't need a plan. It's not an unsolved problem. The kid is brushing their teeth as well and as often as you'd like them to before going to bed at night. You don't need a plan. It's not an unsolved problem. It's a met expectation. No plan needed.

**Ross Greene (00:55:05):**

Kid is going to school as well and as on time and as often as you'd like them to. You don't need a plan. It's not an unsolved problem. It's a met expectation. No plan needed. But if there's any expectation that kid is having difficulty reliably meeting, you need a plan and you got three options. But in this model really only two, B and C. Let's start with C. Plan C is actually a very important plan in this model. It's where you are setting aside a particular unsolved problem at least for now. Many people hear that and they think giving in, no, there's no giving in in the entire model. Giving up? No giving up in the entire model. Prioritizing, there is prioritizing in the model.

Plan C is what you are consciously, deliberately, and proactively deciding. That problem is gone for now. That expectation is gone for now. We got bigger fish to fry. Not only is that not giving in or giving up, that is magnificent. I hate seeing kids get mistreated over expectations. We already know they cannot reliably meet. You can't work on everything at once. If you try working on everything at once, you will end up solving no problems at all.

Plan C is also very stabilizing because any expectation you have removed for now won't set in motion concerning behavior. That leaves us with only two other plans, A and B. Both represent a way to solve a problem with a kid. One massive difference between them, with plan A, you're solving the problem unilaterally, with plan B, you're solving the problem collaboratively. You know which plan you're using in this model, B, are we allergic to plan A in this model? No, not allergic. We just don't think it's a very good idea. Not a very good way to solve problems. Plan A is about power. Power causes conflict. Plan B is about collaboration. Collaboration brings people together. But if a kid is about to dart in front of a speeding car in a parking lot, you're not doing plan C. You're not saying, "You know what? I got bigger fish to fry here."

You're not doing plan B, you're too late. I've noticed you're doing plan A. You yank on the kid's arm, you save the kid's life. If the kid blows up, so be it. But if three weeks later the kid is now darted in front of a speeding car in a parking lot 17 additional times and you've yanked 17 additional times, well, I'd agree with the assessment that plan A is working at saving the kid's life. But I would take issue with people believing that plan A is working at solving that problem. It's not. You're going to need a different plan. If you believe that this kid is not yet capable of safety in parking lots, or if you got bigger fish to fry, higher priority unsolved problems, you're going to use plan C for now and the kid's not going to find themselves in a parking lot anytime soon.

If you believe that the kid can master parking lot comportment at this point in their development, or that it is a high priority, you're going to do plan B. See, the problem is not that we caregivers sometimes use plan A, that's not the problem. The problem is that a lot of caregivers use plan A a lot and we stick with it even when it's clearly not working. All right, I think I've got one more slide then we're moving on. I'm skipping plan C for now, actually for the whole presentation.

How do you solve a problem collaboratively? There are three steps. Whether you're doing this with a kid or another adult or whoever, three steps that are involved in solving a problem collaboratively. Remember, you're doing this proactively because you've already identified unsolved problems and you've already prioritized. Step number one, the empathy step. This is where you are gathering information from the kid about what's making it hard for the kid to meet a particular expectation. As I always say, the empathy step is where the kid gives us the information with so badly needed. The empathy step gives kids voice. The empathy step gives kids agency.

**Ross Greene (01:00:15):**

Here's an empathy step. This is a funny one. I was doing a podcast with a father who does father podcasts. I guess this was a year and a half or two years ago. I'm sure it was pre-COVID, but hard to keep track of time during COVID, I found. There's pre-COVID and there's post-COVID, which hopefully we are in now, hopefully in enough places. This father was telling me about his three-year-old daughter who was having difficulty brushing her teeth before going to bed at night. As we adults so often do, he was telling me, he thought he already knew what was making it hard for his daughter to brush her teeth before going to bed at night.

He was sure, as we adults so often are, that it was the taste of the toothpaste. He's telling me this story. 9 or 10 different flavors of toothpaste later, who knew there were that many flavors, his daughter was still having difficulty brushing her teeth before going to bed at night. Finally, he tells me. He did the empathy step. I'm thinking, "Finally. People think these three steps take too much time, and you went through 9 to 10 flavors of toothpaste before you got to this? I'm going to save your time." What did he find out from his three-year-old daughter, yes you can do plan B with three-year-olds, two-year-olds. He found out that when he was brushing her teeth with the electric toothbrush before she went to bed at night it was getting water all over her face and she hated it.

I said to him, "Well, now, there's a concern that 9 or 10 different flavors of toothpaste could never address." The definable concern. Step is where the adult is entering their concern into consideration on the same unsolved problems. We adults have very important concerns to regrettably. We often try to get those concerns addressed the use of plan a. Now you are getting that exact same concern addressed through use of plan B, same concern, completely, completely living approach to getting it addressed. What would the father's concern have been about his daughter? Having difficulty brushing her teeth before going to bed at night, he might have said something like if you don't brush your teeth before you go to bed at night, then the bacteria from all the food you've been eating all day sits on your teeth. And that could cause cavities. And it hurts a lot to get cavities filled.

And quite frankly, I don't really feel like spending the money, the invitation. This is where kid and adult are collaborating on a solution, but a solution that must meet two criteria, gotta be realistic. Meaning both parties can truly do what they're agreeing to do. That's big, even bigger. It's gotta be mutually satisfactory. Meaning the solution has to address the concerns of both parties. Here's what I've been saying a lot lately and world history bears me out on it. If the solution is not realistic and neutrally satisfactory, I promise you this problem is still unsolved. It's going to come back and haunt you, which is why here in these United States of America, we are still dealing with unsolved problems that are 300 or 400 years old, and they're not solved yet. While in other parts of the world, they're still dealing with unsolved problems that are 80 to 2000 years old. They're not solved yet.

By the way, you're giving the kid the first crack at the solution. Here's what the invitation would sound like. "I wonder if there's a way for us to make sure that we don't get water all over your face when I'm brushing your teeth before you go to bed at night and also make sure that the bacteria don't sit on your teeth all night and that you don't get cavities which hurt a lot to get filled and cost me a lot of money." You're then giving the kid the first crack at the solution. You've got any ideas? This father was telling me this story his three-year-old daughter did. She said, "Could we wrap a towel around my face when you're brushing my teeth with the electric toothbrush, that way my face won't get all wet and I won't get cavities." Who won? Both. Who lost? Nobody. Whose authority was undermined? Nobody's. They were solving that problem collaboratively.

**Ross Greene** ([01:04:58](#)):

Plan is about power. Power causes conflict. Plan B is about collaboration. Collaboration brings people together. By the way, that is a true story, but I've used the same three steps on unsolved problems that people would consider to be far more impactful, like unsafe sex, or elicit use of substances, or not coming in from curfew, or driving under the influence. Same three steps, no matter what the problem. Let's see what I have left. I've got two questions left and then we'll do questions from you. Here's my questions for you. Why do the problems that affect kids' lives so often cause conflict between us and them? Now, you know the answer. They don't have to. They're just problems.

It all comes down to how you're going about trying to solve those problems. Plan A is one way, plan B is another. It is to the great misfortune of us and our children that our definition of authority for a very long time has been plan A. What a shame, and finally, important to think about, because some of the research that's accumulated on the model tells us that when you're solving problems collaboratively and proactively with kids, you are teaching a lot of the skills that define the better side of human nature, like empathy and taking another person's perspective and resolving disagreements without conflict.

Now, one more question, are the ways in which we are going about parenting, teaching, disciplining, and interacting with our kids teaching the skills on the better side of human nature? In a lot of places, the answer is no. Now, you've just spent about an hour listening to one man's side is about what you could be busy doing instead. I think I am ready for questions. Here are the four websites related to this model that will help you out. Ken, I'm ready.

**Ken Duckworth** ([01:07:21](#)):

Ross, thanks so much. Appreciate your perspective. The first question go straight to how do we convince schools to bring more support resources like counselors and fewer police style resource officers? NAMI is a practical [crosstalk 01:07:45] and I want to just take that one right from the get go.

**Ross Greene** ([01:07:48](#)):

Yup. Can we help schools understand better what's really behind concerning behavior? And that's step number one. And that's what the assessment of lagging skills, unsolved problems does for us. When people understand that kids maladaptive reactions to problems and frustrations are about lagging skills, and when people understand that what kids are reacting to is unsolved problems, then it becomes crystal clear that those things, generally speaking... There's some great school resource officers out there. But generally speaking, those are not things we would expect police officers to be leading the charge on. That's step number one. But the other thing I would say is this, it all depends on what that school counselor's going to be doing. If all that school counselor's going to be doing is using rewards and punishments on the kid, might as well keep the school resource officer because they might be doing same thing

**Ken Duckworth** ([01:08:48](#)):

Got it. Okay, here's a sweet question. What drew you to this work personally? I think the related unstated question is how do we clone you?

**Ross Greene** ([01:09:00](#)):

Oh, that's not like that.



**Ken Duckworth** ([01:09:01](#)):

That's my addendum to the question about what drew you to this work, this very creative approach you have with kids. Can we just develop that a little bit?

**Ross Greene** ([01:09:11](#)):

You know what? I take the fact that as a psychologist, I'm in one of the helping professions very seriously. What I found a long time ago that what I was taught to do wasn't helping a lot of the kids that I was supposed to be trying to help. And that in somebody who's in one of the helping professions should instigate us to think about what could I be doing instead. Now that in my case required a little bravery because I was afraid of the arrows that were going to be slung at me by people who were trained the way I was. But here's the cool thing about having been trained the way I was. I don't actually get many arrows slung at me by people who were trained the way I was because I understand where they're coming from and I'm speaking to them. I know where they're coming from and I know that I made the transition that they can too. Here's where I thought that question was heading. I thought that question was, "Ross, were you behaviorally challenging?" The answer is no, not unlucky. My concerning behaviors were more of the lucky variety. I was an anxious separation, anxious cry, baby. That's what you would have seen me looking like a very long time ago.

**Ken Duckworth** ([01:10:24](#)):

You would have well responded to this kind of model because it has a universality. Would you agree with that?

**Ross Greene** ([01:10:35](#)):

I don't view lucky versus unlucky any differently. The research tells us whether a kid is communicating that they're having difficulty meeting expectations in ways that are lucky or unlucky. It's the same lagging skills frequently. The only reason I split the pie that way is because of how we treat these kids. But the other thing that drew me to this population is I like underdogs and these kids are underdogs.

**Ken Duckworth** ([01:11:01](#)):

Yes, great. I was involved in a lot of restraint reduction work in Massachusetts. When I presented the idea to the staff, they said, "Wait a second, you're going to take away my tool to control behavior." And of course, the child learns nothing and gets retraumatized when they are exposed to that. I had a couple ideas that I worked with hospitals, but I had power over them. I was the commissioner, I could ruin them. They had to listen to me, but I was really nice to them. So it was a kind of collaboration and we got very good results. I wanted to know how you achieve this in schools when you're not the superintendent of schools, rather you're a menschy clinician working with parents who want their children treated better.

**Ross Greene** ([01:11:49](#)):

Well, sometimes [inaudible 01:11:50] inviting me in to help them out. The truth is there is pressure on schools these days to stop hitting kids. We don't have the legislation passed yet, but the pressure is still being brought to bear, stop laying hands on kids, stop hitting them. And so schools are somewhat energized in many places to stop doing those things either because of policy or just because of conscience. What I've always said, though, is no one wants to restrain or seclude a kid. I didn't want to restrain or seclude kids. Back in the day when I was restraining and secluding kids, which is extremely long time ago, I hated it, which what I was trying to do. Let's train them differently. And here's the cool part. I find that when we train people differently, they can't believe what they used to do to kids.

**Ken Duckworth** ([01:12:42](#)):

It's a whole frame shift.

**Ross Greene** ([01:12:45](#)):

It is.

**Ken Duckworth** ([01:12:45](#)):

The question comes in, how does this model apply with adults? Is it the same model applied with bigger words, or is this again a strategy... all the same strategies writ older, or how do you change it for working with adults?

**Ross Greene** ([01:13:09](#)):

The chronological age of the human being is not determined what this looks like. It's the same three steps. What I will say is that if you're doing this with someone who is psychotic, which I've done in Maine state hospital, it's called Riverview, we've done it in adult prisons. It looks no different. The main variable that makes it look a little bit different is if the human being of whatever age, big or small, is having difficulty participating in the process through the spoken word. Then we have to make adjustments. Beyond that, these big words, little words, big problems, little problems means nothing to me.

**Ken Duckworth** ([01:13:54](#)):

Question, is the problem of restraining children getting better, getting worse, or staying the same? The legislation, of course, implies that there's some movement and momentum. You're traveling around the nation, you're looking at the school's culture. You're concerned about the punitive nature of schools. If we're accelerating and improving, how fast is the vehicle moving?

**Ross Greene** ([01:14:19](#)):

Not fast enough. Here's the deal. If we believe the data that are put out by the United States Department of Education office of civil rights, then these practices are slowly declining. There's just one problem. There's lots of evidence to tell us that schools aren't telling the truth about how often they're using these procedures. And so the reality is that we actually have no idea. The school systems that I work with are the ones that are energized to eliminate restraint and seclusion, which is how I know what can be done. What I also know is that there are many, many schools out there that are working with the exact same populations who would never dream of restraining and secluding kids and these are very safe environments. For me, this is a slam dunk. This is mostly about adult mentalities and how we're still training people to be crisis managers rather than crisis preventers.

**Ken Duckworth** ([01:15:16](#)):

Thank you. Question, do you have an example of a school or school system that has been able to transform their approach?

**Ross Greene** ([01:15:27](#)):

Using this model?



**Ken Duckworth** ([01:15:28](#)):

Using your model, yeah. Just for them to learn from or if it happens to be in their state.

**Ross Greene** ([01:15:34](#)):

Many hundreds. I live in Maine. A lot of the schools that I've worked with are in Maine because I'm nearby. If people want to be in touch with schools that have done this, just go to the contact form on any of the four websites and I'm happy to turn people on to principals who would be delighted to talk to them.

**Ken Duckworth** ([01:15:52](#)):

Oh, that's a fantastic offer because a lot of people who joined the experts want to make change and it's helpful to talk to people who are in the process of running things and changing things at the same time. Question, how similar is this to the peer support model writ large? This is my question. Are kids with plan A, plan B, plan C and do they operate it with each other? This is kind of the teaching the kids to fish question.

**Ross Greene** ([01:16:36](#)):

So far in the work that we've done so far, kids are learning to fish by solving problems with their caregivers. If you're asking me is it on my agenda to help kids learn to do this on their own, the answer is very much, yes. The bad news is I just haven't gotten around to it yet. I've been busy, but that's [crosstalk 01:17:01].

**Ken Duckworth** ([01:17:01](#)):

In your copious spare time with four websites, national and international travel to Australia to teach, yeah, I don't know why you haven't handled that. Anyway, Ross, I think that's a pretty good summary of the questions that we had. I want to thank you for the work you're doing, for the model you demonstrate. Restraint seclusions are really bad for kids and they teach kids nothing other than retraumatization. Your model is so much more proactive and engaged. I just want to salute your work and thank you for joining us today. I'm going to hand it back to the good **Dan Gillison**. Dan is our CEO of NAMI and he'll close today's session out. Dan?

**Dan Gillison** ([01:17:49](#)):

Thank you, Ken. Dr. Greene, we want to thank you profusely for your presentation today and your life's work.

**Ross Greene** ([01:17:56](#)):

Thank you.

**Dan Gillison** ([01:17:57](#)):

It's not lost on me. You're very welcome. But the thanks is from us to you. Proactive solutions, there's so much in our educational system that is reactive. We do address the symptom versus we're almost scared to get to the root cause. I think that what you started with in terms of we need a paradigm shift, things getting in the way, it's almost we have to get out of our own way. Thank you for the models that you shared. We look forward to going to all of your websites and you did mention [livesinthebalance.org](#) that there will be the documentary in about a week that we'll be able to see *The Kids We Lose*. We're looking forward to that and thank you for the heads up in terms of the power of that.



**Ross Greene** ([01:18:44](#)):

Let me just mention one more thing. Lives in the Balance, thanks to some of our donors is actually offering scholarships to schools to get trained in the CPS model and the schools have to meet the following criteria. They have to have very high rates of restraint, seclusion, detention, suspension, expulsion, paddling, and/or disproportionality. We want to make sure that cost is not an obstacle to treating kids better and to giving all kids a fair shake.

**Dan Gillison** ([01:19:19](#)):

This is fantastic. That's walking the talk and that's making sure the audio matches the video. Thank you for sharing that. We'll make sure we get that out. Very refreshing to hear from you today. As we look at what's happened in this last year and as young people start going back to school and educators start going back to being in the schools, we know that this is going to be critically important in terms of what are young people going to be dealing with. Prison to pipeline... it's school to prison pipeline is just absolutely incredible. Whatever we can do to alter that is critically important. This paradigm shift is really important.

**Dan Gillison** ([01:19:59](#)):

Thank you and want to thank all of our audience participants on today. We hope that you really got something out of this and that you will go and look at Dr. Greene's assets that he has shared with us and take advantage of those. We also want to reinforce to you that we will continue to have these experts and we will continue to bring the experts to you like we have on today. Let's look at the websites that we shared. If you could go to that slide again for me real quickly as we wrap up, I'd appreciate it because we don't want to lose those websites there. Jordan, I think you had those up, one slide back, [livesinthebalance.org](#), [CPS Connections](#), [theKidswelose.com](#), and [truecrisisprevention.org](#). We want to make sure that you see those and we'll also provide this to you after the session.

**Dan Gillison** ([01:21:00](#)):

Let's now go to the next session in terms of the dates. Thursday, the 15th of July, we will have Ask the Expert with Dr. Sidney Hankerson followed up by the 12th of August with Dr. Judith Cook, and then in September wrapping up the third quarter of the year will be Dr. Christine Moutier. Those are the next three, and we'll make sure that we communicate more about those as we get closer to those dates, but block those dates on your calendar. Next is NAMIcon 2021, July 27th and 28th. Registration is on [www.nami.org/convention](#). We really look forward to your participation. As the title says, bringing people together for mental health, the time is now. We're at an inflection point and the time absolutely is now. We're seeing new money from the federal government, we're seeing new interest in states and communities across the country. They're all searching for how to do what they know needs to be done. There's a great opportunity for everyone to get some information at NAMIcon in terms of information they can take back to their communities.

**Dan Gillison** ([01:22:12](#)):

Last but not least, we are a not-for-profit organization and we always welcome your donations. We do our work because of your donations. The last thing I want to say is about the webinar series itself in terms of making sure that you know it's to transfer information. However, it's not intended to provide medical advice on any specific topic. It is absolutely to or for a specific individual. It is in its biggest way a sharing of information.



**Dan Gillison** ([01:22:51](#)):

With that said, all of our Ask the Experts are only possible because of the production team. It's important that when we open the curtains and we start the sessions with our subject matter experts and Dr. Duckworth facilitates, there is a production team behind that body of work. We wanted to thank them. That is Jordan Miller, Teri Brister, Jessie Walthall, and Christina Bott. We want to thank them for their work. We hope all of you are closing out a great week and looking forward to a wonderful weekend. To all the fathers, happy Father's Day. We look forward to seeing you all at our next Ask the Expert. We wish you the very best and thank you for everything that you do and investing your time with us today. Be well.