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## EVALUATING THE PERCEPTIONS OF PRESCHOOL TEACHERS AND ADMINISTRATORS ON MENTAL HEALTH SERVICES IN THE SCHOOL SETTING

Celia Tavarez

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EVALUATING THE PERCEPTIONS OF PRESCHOOL TEACHERS AND  
ADMINISTRATORS ON MENTAL HEALTH SERVICES IN THE SCHOOL  
SETTING

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A Project  
Presented to the  
Faculty of  
California State University,  
San Bernardino

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In Partial Fulfillment  
of the Requirements for the Degree  
Master of Social Work

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by  
Celia Tavarez  
June 2020

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June 2020  
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## ABSTRACT

Mental health can impact a child's success in many aspects, including in the school setting. School settings are very often the only place that provide an opportunity for families to be able to receive mental health services for their children. It is imperative that schools meet the mental health needs of the children who attend their schools. This research project examines data and information gathered from educators and school administrators to help us understand their experiences, successes, and/or displeasure about the services that are offered or not offered within the agency they work for. The literature review discusses the definition of school based mental health services, statistics pertaining to access and the need for school based mental health, barriers to accessing mental health services in the school setting, and stigma relating to accessing mental health services. A constructivist approach was utilized in the creation of this project. This study was conducted using face to face interviews with 11 participants to develop a qualitative analysis. Four major themes emerged from this study: 1) Respondent overall understanding of mental health; 2) Early signs of mental health; 3) Training opportunities provided within the study site; and 4) Barriers to mental health access. An action plan was developed that includes the following: Identifying services that are already put in place and services the site may still be lacking to appropriately serve the needs of population being served and bringing awareness through discussion and communication.

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## CHAPTER ONE

### ASSESSMENT

#### Introduction

Chapter one addresses the assessment portion of this study. The research focus is to understand the perceptions of educators and administrators on the availability of mental health services in the preschool setting and create an action plan that will allow for needed change. The research was conducted using a constructivist approach which will be explained throughout this chapter. A literature review is included which describes statistical information and the need for mental health services in this setting. Along with this information, this chapter will explain the theoretical orientation used in this study. Finally, the contributions to social work practice at the micro and macro level will be discussed throughout this chapter.

#### Research Statement/Focus/Question

Mental health services are an essential component of a child's well-being. When it comes to the school setting, access to mental health services can mean having a chance of a successful future. Research suggests that students who receive social-emotional, and mental health support achieve better academically (Frauenholtz, Williford, & Mendenhall 2015). Children spend a greater amount of their time in the schools they attend than any other formal institutional structure. Because of this, schools play a major role in helping to identify what are the best

practices to use while serving the children they work for. Mental health affects a child's development, their interactions with peers, their social interactions with other individuals, behavioral expectations, and even their academics.

Schools can be a great resource for children who are impacted by mental health issues. Schools can offer access to services otherwise not attainable to families and supportive services. Mental health services in the preschool setting are particularly important to help address problems and implement early interventions before they become increasingly worse. Research suggests that 10% to 22% of preschoolers present significant behavior problems (Rich and Eyberg, 2001).

Untreated mental health in children can cause long term outcomes such as child and family distress, poor treatment adherence for physical health problems, and continued mental health problems into adulthood.

The purpose of this study is to evaluate the perceptions of preschool teachers and administrators on mental health services in the school setting and create a group of strong individuals who will work to maintain positive interactions between the study site and the members who attend which will help reflect the information presented in this study relating to mental health services in the school setting.

### Paradigm and Rationale for Chosen Paradigm

For the purpose of this research, a constructivism approach was used. According to Morris (2014), the constructivism paradigm seeks to understand the

human experience as a subjective reality. This approach recognizes that every individual sees and understands the world subjectively and no one outside the experience can fully understand. In contrast to other paradigms, researchers using this approach must gather data by collaborating with those “involved in a particular human experience” (Morris, 2014). This construction is called “hermeneutic dialect” which according to Morris (2014), seeks out individual interpretations which are compared and contrasted and can change throughout the experience. As best described by Morris (2014) “data is unique to its time and place.”

To fully understand the perspective of the educators and administrators that will be participating in this research study, the researcher participated by engaging and building a relationship with participants to comprehend the views and perspectives of key players and other crucial sources. Doing so, allowed the researcher to gain a better understanding of the issues present and resulted in direct data from the source itself. Additionally, engaging with key players offered them the opportunity to create and take action in relevance to their goals relating to mental health within their agency. This was done through presenting the topic for conversations to be started, sharing of ideas, service implementation, and informative discussions among those involved.

### Literature Review

Because of the nature of the constructivist approach in this research, the literature review will be viewed as a critical component of the research focus. Per

Morris (2014), the literature in the constructivist approach “influences the development of the focus” while mutually working with participants and the researcher. To gain a more in-depth perspective and understanding of the services provided and needed in the focus site, literature reviewing what school based mental health services are, statistics, barriers, and stigma will be included in this section.

### School Based Mental Health Services Definition

According to Doll, Nastasi, Cornell, and Song (2017), school based mental health services are services that are provided by school-employed personnel or community-employed providers in the school setting. Personnel who usually play a role in providing services include psychologists, counselors, and social workers. These professionals are usually trained in school system functioning and learning, as well as how students’ behavior and mental health impacts their ability to be successful in school. Areas of focus in school based mental health services include but are not limited to individual and group counseling, curriculum and instruction, learning disabilities, school safety and risk/crisis response, effective discipline, consultation with educators, families, and community providers.

School based mental health services range from minimal support services to a comprehensive, integrated program of prevention, identification, and treatment within a school. An article written by the American Academy of Pediatrics (2004) describes school based mental health services as a 3-tiered

model of services and needs. Tier 1 includes preventative mental health programs that targets the entire school population. Preventative programs include programs that focus on reducing risk factors and building skills such as resilience. Tier 2 consists of targeted services that focus on students who have one or more identified mental health need but functions well enough in daily activities. Tier 3 focuses on the needs of children with severe mental health diagnoses and symptoms. Services are usually done by a multidisciplinary team to target multiple levels in a child's treatment.

Statistical Information:

The National Institute of Mental Health (2010-2011) reported as estimate of 20% of children who have enough symptoms to warrant a formal mental health diagnosis. Despite this percentage, few children receive appropriate diagnosis and treatment. (Committee on School Health, 2004).

Riverside County, a county in Southern California, is the fourth largest county by population. It has a vast disparity of socio-economic populations that range from very low to very high. (Southern California County, 2013). About 40 % of the population in the southern California region speak a non-English language. It was estimated that in 2017, there was a 21.5 percent of persons with a bachelor's degree or higher education. (U.S. Census, 2017). It was reported that in the fiscal years of 2016-2017, there was an estimated 4.1% of children and youth between the ages of 3 to 11 to have at least one specialty mental health service (SMHS) visit in the southern California county with the highest group

representing this number being Alaskan Native or American Indian youth. In the fiscal year of 2016-2017, there was a 997-service continuance count (service for a period of 1 to 2 years), which was an increase from the previous years. (Department of Health Care Services, 2018).

Barriers:

Schools often act as a bridge between home and community and needed resources (Frauenholtz, Mendenhall, and Moon, 2017). Teachers are often the first responders when identifying children with mental health needs and linking them to services and programs necessary to meet those needs (Jorm et al., 2010). According to Weist, et al (2017), schools are in a good position to promote mental health services for children in need; however, there are many barriers that prevent this from happening.

Frauenholtz et al. (2015), showed that generally school staff and educators believed that they did not receive enough mental health training and therefore did not feel prepared to recognize children in distress. According to Powers et al. (2014), educators and staff often find themselves facing obstacles that impede implementing programs designed to meet the needs of children with mental health issues, including little to no training.

A report published by the American Academy of Pediatrics (2004) discussed several barriers to care for young children who are experiencing mental health issues. Although the need is often great, mental health professionals often enter the field with very little early childhood mental health

education. There is a shortage of specialists with adequate training and experience to meet the needs of children.

Stigma:

Children, youth, and families in need of services may encounter stigma (Liegghio, 2017). Liegghio (2017) points out the three different types of stigma that families of children receiving mental health can face. The first is family stigma which refers to the stigma that caregivers and other family members can face for the simple fact that they are “associated” to an individual with a mental health issue. The next type of stigma is called courtesy stigma, which refers to individuals experiencing prejudice or discrimination because of their relationship to the individual with a mental health issue. The last type of stigma is referred to as structural stigma which is described as the ways that social institutions and instructional processes create and contribute stereotypes, prejudices, and discriminations associated with mental health. Examples of these can include zero-tolerance policies and behavioral classrooms, which can perpetuate the notion that children with mental health issues are dangerous and should be removed from the classrooms (Liegghio, 2017).

School based mental health services are made up of different individuals who work towards the success of students through programs such as counseling, curriculum presentations, and referrals to community services. Mental health has increasingly impacted the wellbeing of children in and out of school. Barriers pertaining to mental health services offered at elementary school sites often

include lack of training for educators and school staff. Additionally, many families with children in need of services may feel stigmatized by institutions or individuals surrounding them. Parents may be discouraged from seeking treatment with their children due to their own perceived stigma or worries about mental health (Liegghio, 2017)

Conducting this study will allow participants at the study site to have a space where they can express their thoughts, experiences, and any concerns that may come up. In addition, conducting this study will allow for a conversation to get started. This conversation would provide an opportunity for individuals to discuss an issue that impacts the children they interact with on a daily basis.

### Theoretical Orientation

The constructivist approach seeks to create action based off the data that was discussed throughout the data collection process through the partnership between individuals (Morris, 2014). This idea generates the concept utilizing learning theory. Turner (2017) notes that “Social learning is based on the premise that much of our behavior is learned and changeable, knowledge of operant, respondent, and observational learning is used to beneficially modify client behavior.” Social learning theory supports this research because the discussion of mental health services is focused in the school setting. Mental health, in the school social work field using learning theory takes on a person in environment perspective. A basic assumption is that human behavior is the product of interactions between the individual and his/her environment. A child’s

environment is often a big indicator of how his/her mental health will build growing up.

#### Potential Contribution of the Study to Micro and/or Macro Social Work Practice

This study helps develop an understanding of mental health services, barriers to implementing mental health services in the school setting, and stigma that children and families face. The information gathered through this study, has helped contribute to the social work practice at the micro and macro level in various ways.

At the micro level, the information gathered through this research may be helpful for educators, administrators, and other school staff or key players to consider their interactions with children and families encountering mental health needs. It provided an opportunity for open communication between influential and significant individuals that want to seek for change.

The information in this study may help educators identify any barriers within their schools that might impact the successful implementation of a mental health program. They can then address the issues they deem to be most important with their administrators and other colleagues they work closely with. Doing so can help initiate the process of creating an action plan that will bring change to their institution.

In addition, this research may help educators, administrators, parents, and other individuals identify any stigma that is placed upon children and families with

mental health needs. They can then develop effective trainings or information sessions to eliminate misconceptions, stereotypes, and current policies that might create structural stigma and work together to develop appropriate strategies to help those in need. The participants in this group developed an interest in the subject matter and sought out training opportunities to develop a higher level of care for the children the care for.

According to Morris (2014), a “constructivist study leads to action by the study participants that addresses the issues raised during data collection.” At the macro level, this study may help administrators and other officials in position of power to push for a development of a system that works to meet the needs of the individuals they serve. Additionally, the information presented in this study may provide someone with the needed drive to seek a legislation that requires all schools to have mental health services in place that addresses the needs of students in all levels of necessity.

## Summary

Chapter one focused on the assessment portion of this study. It provided an explanation of why constructivism was selected as the approach to conduct this research and collect data. This chapter also included a literature review that covered several aspects that explained mental health services within the school settings. This portion provided clarity on what mental health services are, the barriers observed, and mental health stigma. Additionally, the system supported

by this study was discussed in this chapter. Finally, implications that could have an impact on the social work field were identified and discussed in both micro and macro practice.

## CHAPTER TWO

### ENGAGEMENT

#### Introduction

Chapter two reflects the engagement portion of this study. It describes the study sites, study participants, and gatekeepers. It highlights the steps the researcher took to prepare for the development of this study, including a description of how the research site was engaged and the issues the researcher encountered which include diversity, ethical, and political issues. Finally, this chapter explains the role of technology that was used in this study.

#### Study Site

The study took place in a preschool that is located in a county of Southern California. This study site services children at the preschool level and offers before and after school care for elementary age children. The services offered, include academic classes, after-school program, sports programs, community events, and meals to meet the health and nutrition needs of students. This site is staffed by agency employees that include a site director, a site supervisor assistant, administration secretary, and academic educators. These individuals work together to service children and their families surrounding the community.

According to their website, the children and families served at this school site are made up of mostly Hispanic and Latino groups. The families that are serviced in this site include a large English learner population and a high number

of children and families are considered socioeconomically disadvantaged. The organization services about 2, 800 local children and families in the surrounding communities.

### Engagement Strategies for Gatekeepers at Research Site

In a constructivist study, the engagement of key players and the gatekeeper is vital and essential for the success of the study. According to Morris (2014) constructivist projects require intense relationships and interactions with participants over a long period of time. It is important for the researcher to engage with the participants as a learner so that they can interpret their own data. The researcher will keep in constant communication through email, phone conversations, and in person visits. When doing so, the researcher will follow up with previous conversations, ask additional questions, and document every interaction.

The gatekeepers for this study initially included the site director and assistant director. Interaction began with a simple e-mail including information about the researcher, a description of the planned study and a basic outline of the study focus, any information relating to the discussion such as roles within the study, potential benefits of the study, an invitation to participate in the study, and contact information. The information included the research title, the purpose of the study, how the study will be conducted, and for how long the study is anticipated to last for.

## Self-Preparation

The researcher began by identifying important information regarding the research site. This was done by visiting the program website and reading educational material regarding the program. Additionally, school accountability reports were used to identify pertinent information regarding the study site such as demographics, organizational structure, and services offered.

One of the most important aspects of a constructivist study is to work as partners alongside the participants (Morris, 2014). In this study, most interactions with gatekeepers predominately took place with face to face meetings and conversations. The researcher sought to understand the views and perceptions of the participants through personal interviews and discussions in which the researcher was able to build establish and develop rapport.

The topic of counseling was discussed throughout the study. The discussions included topics on what services are available, needs, opinions, and perceptions of the researcher and all participants. It was possible for participants to use self-disclosure to strengthen their opinion or ideas. The possibility of difficult topics of conversation, strong emotions, or identified needs, were taken into consideration by the researcher and therefore the researcher prepared for this by creating a directory of community resources and service agencies within the local community that was available should participants request it. In addition, each participant was reminded of confidentiality in and out of group meetings and participation was completely optional. Moreover, the researcher provided a

space for self-disclosure and established rapport and a good relationship with participants during sharing. The researcher checked in with participants after the group meeting and followed up as needed or requested.

### Diversity Issues

The possibility of encountering diversity issues is high in a constructivist study. The researcher will be working with a variety of individuals who all have different backgrounds, ethnicities, demographic characteristics, cultural norms, etc. It is important that the researcher acknowledges, honors, and respects differences of each individual throughout the process. To ensure this, the researcher created and established a safe and comfortable environment where participants felt free to share their thoughts and ideas by discussing group guidelines and ensuring that all participants are respectful of one another. At the beginning of each meeting, the researcher reminded participants of these guidelines and emphasized the importance of respecting one another as they spoke. Additionally, all materials and informational pamphlets were available in the preferred language of the participants.

Other forms of diversity issues that needed consideration were differences in language or vocabulary. Although the researcher is fluent in both English and Spanish, it was important to work alongside another individual who could serve as a translator. Being prepared prevented miscommunication between the participants and the researcher. Additionally, while conducting the study, the researcher needed to be prepared for a possible difference in the

vocabulary of all participants. The researcher prepared by accommodating to the preferred vocabulary of the participants in order to increase the participants opportunity to interpret their own data and successfully fulfill the constructivist approach.

### Ethical Issues

To avoid unethical treatment of all participants, the researcher submitted a Human Subjects Review to the Institutional Review Board for approval before beginning the study. Confidentiality is an important aspect of the constructivist approach, although it can prove to be difficult due to the ever-changing focus of the study (Morris, 2014). Although a difficult task, it is imperative for all participants to be knowledgeable on the risks pertaining to participating in the study. The researcher developed a form describing informed consent which outlined the purpose of the study, the roles of participants, the role of the researcher, the risks pertaining to confidentiality, and the option to opt out at any given time during the study. Because participants were working in a group setting, broken confidentiality was taken into consideration. To prevent this from happening, the researcher verbally reminded participants about confidentiality and displayed a written reminder throughout the sessions.

### Political Issues

According to Morris (2014), study participants and the researcher must negotiate politics before the beginning of the study. Political issues can include

the sharing of power, commitment, and honesty. Before attempting to begin the study, the researcher communicated with gatekeepers to establish negotiations. Since the study included people in positions of power, such as administration staff, and educators who are normally not in a position of power, it was imperative that the individuals in positions of power agreed to the sharing of power during the length of the study. In addition, confidentiality was again discussed to determine potential impact to the study site. The researcher communicated this to the site administrators and participants. Individual interviews were conducted so that participants could feel confident sharing their information, experiences, and thoughts on the subject that was being discussed.

### The Role of Technology

Technology was an important tool that was used throughout this study. It was particularly important in the beginning stages of this research study. The researcher opted to establish initial contact with the gatekeepers through email software. This allowed the gatekeepers to have time to reflect on the purpose of this study and decide whether it was a good fit for their site without feeling pressured. Additionally, email served as the preferred contact method for all participants to receive simple notifications, updates, and reminders; however, the researcher encouraged face to face interactions and phone conversations if it was necessary or proved to be a better option.

## Summary

Chapter two described the engagement portion of this study. In this chapter, the study site and the clients served was discussed. The steps that the researcher took to prepare for the information gathering process was explained. Additionally, issues relating to diversity, ethics, and politics were examined and explained. The role of technology was explored in relevance to the research study.

## CHAPTER THREE

### IMPLEMENTATION

#### Introduction

This chapter describes the implementation phase of this study. Particularly, it provides a description of members who participated in this study and how those participants were selected to participate in the study. In addition, this chapter outlines how data was gathered and analyzed by the researcher and what methods were used by the researcher to record the data collected. This chapter dives into the data analysis method. Next, this chapter explains how the researcher planned to communicate the findings of the study to the study site and study participants. Additionally, the researcher described the ongoing relationship with study participants for the purpose of providing needed support throughout the continuation of the action plan implemented by the group. Finally, the researcher's plan for dissemination is described in detail to explain how the researcher will follow up with social workers who might use the study in their practice.

#### Study Participants

The participants in this study consisted of preschool teachers and site directors. These are all people who engage daily with children and can determine if their needs are being met based on their experiences. According to a survey conducted by UCLA, the area in which the study site is located is populated

mainly with Latino and low-income individuals (2011). This fact might determine if all participants are of the same or have a similar cultural background. According to their website, the study services about 95 students. 97.5% of students are Hispanic/Latino. In this study site, the program director identifies as Hawaiian/Asian, 5 participants identify as Hispanic, 3 identify as Caucasian, 1 identifies as African American, and 1 identifies as African American and Hispanic.

### Selection of Participants

The most appropriate approach to select participants is through purposive sampling. This refers to a method in which we look for participants who will give the most complete data about the study focus. The approaches used for this study are maximum variation sampling and snowball or chain sampling.

Research study participants will be selected using a maximum variation sampling method which identifies and allows for the detailed description of individual cases as well as important patterns shared among cases with diverse groups (Morris, 2014). In a constructivist study, it is important to receive information from multiple sources with varying experiences that can be both different and similar.

The second method of participant selection will be snowball or chain sampling. This method is described as “a way of understanding and utilizing the networks between key people in relation to the study focus” (Morris, 2014). The researcher conducting this study met with participants that are highly involved in the study site. Participants were knowledgeable about the study subject and have had personal experiences that allowed for the increase of data gathered

during interviews and meetings. Additionally, an important aspect of this method of participant selection is the process in which participants are invited to identify other people who are experienced or knowledgeable about the subject being studied. In a constructivist study, it is important to engage participants and allow them to take a part throughout the stages of the study being conducted.

Both methods were implemented with stakeholders through constant engagement and communication and were expanded upon conducting follow up interviews and meetings with participants throughout the study. Additionally, the researcher identified other sources of relevant information such as peer reviewed journals and relevant text relating to the focus of the study. Members of the circle that were encouraged to participate were the site director, the director's assistant, and the educators.

### Data Gathering

The constructivist approach assumes that data gathering consists of constructivist interviews done with participants both individually and within the hermeneutic dialectic circle process. In this study, the process began by first interviewing every participant individually and then creating a draft joint construction followed by a member meeting to discuss, process, and refine the draft and clarify areas of agreement, disagreement, and develop an action plan. Doing both individual meetings and hermeneutic dialectic circles provided the convenience for members to have the opportunity of creating their own constructions, respond to one another's constructions, and ultimately clarify or

build on their own constructions. According to Morris (2014), in the constructivist approach, the researcher is considered the main and most important interview data-gathering instrument and therefore the questions that are asked should guide the focus of the study as it moves along.

The best system for conducting a constructivist interview, as described by Morris (2014), is to approach the interview with a blank slate and no preconstructed questions. Doing this, allowed the participants to share their perspectives and their beliefs regarding the study subject. Although this might be the best methodology, it also presented as a challenge for both the researcher and the participants. In order to minimize challenges the researcher had to prepare before going into an interview or meeting by developing a solid plan. Morris (2014) describes the blank page notion as anxiety inducing for the researcher and disconcerting for the participants. To ensure this did not happen during the study the researcher prepared the list of questions that were going to be asked.

The questions asked focused on different aspects of the study focus including the importance of the present, past, or future. Examples of questions that were asked are: Experience/Behavior Questions such as “If you suspect a child under your care has a mental health problem, what do you do?” Opinion/Values Questions such as “In your opinion, what is the definition of mental health?” Feelings Questions such as “Do you believe that being able to participate in continuing education relating to mental health or social services

would be beneficial to the work that you do?” Knowledge Questions such as “What are your observations relating to any barriers of mental health services within the community your school services?” Sensory Questions such as “What are early signs of mental health problems in children?” Background/Demographic Questions such as “What is your age?” (see Appendix A).

### Phases of Data Collection

The first phase of the data collection process pertains to the researcher preparing for the interviews ahead. Morris (2014) writes that in the constructivist approach the constructivist researcher is the primary interview data-gathering instrument and not the questions that would have been written down prior to the interviews. The researcher developed open ended questions that allowed the participants to evolve their constructions throughout the conversation. Although it is best to have an idea of what will be asked during the process, constructivist researchers are encouraged to anticipate the need to use intuition and thought during the process. Additionally, an important aspect of preparing for the interview, as described by Morris (2014) is the need to learn the vocabulary and terminology of the setting in which the study is being conducted. The researcher took this step by navigating the study site website, speaking with members before conducting the interviews, and identifying important and pertinent information relating to the study subject. This allowed the researcher to have a better understanding of the discussion with the interviewees.

The next phase of the data collection process was done when the researcher was granted permission from the gatekeepers to conduct the study. This was initiated by setting up an initial interview with the gatekeepers. Morris (2014) writes that interviews should first take place individually, then with a circle that includes all study participants. While interviewing the gatekeepers, they were asked to nominate other stakeholders who they believed would make a positive addition to the group and should be invited. After having done interviews with all group members, including those that were invited by others, then the Hermeneutic Dialectic Circle would have begun. This was not possible due to the COVID-19 Pandemic. All group members were provided forms through email that described informed consent, limits of confidentiality, and group norms and expectations. The researcher explained the information that was laid out on the forms and requested a confirmation of understanding from each participant through email communication.

Communication with participants developed throughout the process. Because interviews with participants were open ended at the beginning of the process, participants had the opportunity to lead the direction of the focus pertaining to the topic that was being discussed. As the process continues to move forward, the focus becomes more structured and adds a spotlight on the subject matter. Initial questions that the researcher asked were based on demographics such as age, gender, level of education, family size, housing, income, etc. These questions were followed by open ended questions that

solicited the constructions of those being interviewed such as experience and behavior questions. These questions led to other significant questions or statements that elicited new and important information regarding the topic.

The next step of the data collection process is to close the interviews. This was done with each client individually, as well as during the Hermeneutic Dialectic Circle. The researcher began the last step by asking questions that evoked feelings of termination. The researcher then reviewed and summarized what was said during the interviews and followed up on notes. Following the interviews, the researcher gathered all the data collected and followed up with each interviewee to determine whether the transcript held any validity to the respondents. When moving on to other respondents it was very important to share the constructions of the previous interviewee as well as the researchers.

The last step to gathering data included the development of the Hermeneutic Dialectic Circle. This process would have allowed for all stakeholders to gather with one another and further explore and discuss the focus of the study. In addition, participating in this stage of the process, would have provided participants the opportunity to respond to each other's constructions and reevaluate their own. According to Morris (2014), this is done during the member check meeting which reflects the opportunity to highlight areas of agreement and disagreement and discuss any action steps that might need to take place. This process would have allowed for productivity during the interview process by allowing other members to add to the information that had

previously been gathered. To conclude the data gathering process, the researcher committed to send the final report to all group members. A small task was agreed upon by the researcher and participants and roles were implemented amongst each other.

### Data Recording

During each interview, the researcher communicated with each participant to explain the methods of data gathering. In order to collect the most accurate amount of information the researcher used a recording device, if there was consent from the participants. Although this might make participants feel uneasy (Morris 2014), it is one of the most reliable tools that a researcher can utilize to accurately collect verbal information and it is imperative that participants know the pros and cons before they make a decision.

Additionally, the researcher used a journal to document important pieces of information. The information included the researcher's thoughts, observations, and reflections; as well as other notable pieces of non-verbal information that could not be picked up by the recording device, if one was used. Utilizing this method helped the researcher with clarifying responses during the interview process.

These two methods were first cleared with each participant during their interviews. If they expressed that they did not want to be recorded or did not want the researcher to take notes, the researcher created a record of the interview immediately after the interview was done. Additionally, it was important to

evaluate the interview including the thoughts, feelings, and experiences for both the researcher and the participants. Morris (2014) writes that when recording interviews after the fact, one can use critical incident reporting method when writing down information pertaining to the interviews conducted. This method allowed for the researcher to highlight key information that was highly important to note and take into consideration based on what the participant said during their interview.

### Data Analysis

In this constructivist research study, data was conducted through qualitative analysis to analyze emerging themes and other data that transpired from the interviews conducted, which provided a comprehensive understanding of the information. According to Morris (2014), in a constructive study, the data analysis will depend on the sources of the data from the constructions developed from the hermeneutic dialectic circle. An analysis was completed after each interview.

One key aspect of the constructivist approach when analyzing data is that the researcher will identify “units” of information that appear during interviews (Morris 2014).

Having identified and created the units, the researcher began to work through the coding system by connecting all units who were similar or repeated. The researcher utilized an open coding system. The units that appeared were then built into categories and combined into one construction that was shared

with the hermeneutic dialectic group which was agreed upon by all group members. Once all group members agreed upon the construction, the researcher was able to determine that the construction is accurate.

### Termination and Follow Up

The conclusion of the study was agreed upon by all the group members who were part of the study. Termination was discussed throughout the study but was officially conducted during the final check in meeting. During this meeting, the researcher provided the group with a final constructivist report. The final report described the statement of joint construction at the point in time (Morris 2014). Additionally, for termination to be successfully enacted, the researcher should have handed out responsibility for the project to the group. The researcher will no longer participate; however, group members will have the ability to implement a plan for future action. The goal is to create relationships and build knowledge between group members so that they may carry out future development of the project (Morris 2014).

To follow social work termination protocol, the researcher needed to implement certain steps. First, the researcher needed to encourage the stakeholders to continue the constructivist approach to discussing items related to the project and to continue to move forward with action. Next, members were encouraged to implement a plan that works for all participants and one that they all agreed on. A strategy that was used by the researcher to implement during this phase was to arrange the next meeting without the intent to attend. Group

members then selected a facilitator for that meeting. Finally, the researcher provided a list with resources that stakeholders can utilize to address the issues that may have come up. The researcher also provided contact information in case group members ever have the need to consult as they move forward.

### Communication of Findings and Dissemination Plan

The formation of a dissemination plan is critical to the termination and follow up phase of the study. This process should have been done during the final hermeneutic dialectic circle so that all members were able to gain an understanding of the findings of the study; this was not possible due to the world pandemic of COVID-19. Instead, an email was sent to all members describing the initial research focus, any information gathered about the site and its participants, the selection process and methods of data gathering and analysis, a document describing the constructions and units formed and the final construction that was agreed upon by the members. Additionally, this email described the plan of action set forth by the group members and any roles established within the group.

The next step was to develop a dissemination action plan. Morris (2014) writes that research findings need to be transformed into guidelines for evidence based social work practice. This is done by creating a tool that allows the researcher to identify certain levels of rigor. In the constructivist study it is imperative that additional criteria for levels of evidence are also discussed. The constructivist study tends to be at the individual, family, organization, and

community levels of practice. All levels should be assessed for evidence-based practices regarding all levels of practice and each stage of the generalist model (Morris 2014). When working with social workers to determine whether they will use the study, it should be asked whether the process of data gathering transfer to their practice setting and whether the findings transfer to their practice setting (Morris 2014). This will help social workers determine if incorporating the findings into their work is the best option.

### Summary

This chapter covered the implementation portion of the study. In this section of the study, participant characteristics were described in detail. Moreover, participant selection methods were outlined and described as maximum variation sampling and snowball sampling. These referred to attaining information from different sources and inviting a diverse group of individuals to take a part in this study. Data gathering methods were also highlighted and included several examples of questions that might be utilized during the individual interviews and group meetings and it explained the utilization of qualitative data.

When interviews were conducted, the researcher then transcribed the information and analyzed the common trends among all participant information and a construction was built in which is referred to by participants to agree upon. Termination is also described in this chapter as an important step to the success of the project. This is where the researcher follows the generalist model practice

and concludes involvement in the continuation of the project. Group roles were given to participants to continue to follow through with the action plan implemented. Finally, research results and findings are shared with group members and participants and a dissemination plan concludes the study.

## CHAPTER FOUR

### EVALUATION

#### Introduction

This chapter includes an analysis of the data gathered from interviews. A total of 11 participants completed individual interviews. The ages of the participants ranged from 21 years old to 50 years old. 5 participants were Hispanic, 3 participants were Caucasian, 1 participant was African American, 1 participant was African American and Hispanic, and 1 participant was Asian/Hawaiian. 10 participants were female, and 1 participant was male. It is important to note that 5 participants have been in their position for over 5 years, 4 participants have been in their position for over 1 year, and 2 participants have been in their position for over 5 months. Therefore, participants possessed a clear understanding of the issues pertaining to this study site.

#### Data Analysis

The following major themes emerged from participant responses: their overall understanding of mental health, possible early signs of mental health within the population they serve, training opportunities provided within the study site, and possible barriers to mental health access within the community that is serviced by this study site.

## Understanding of Mental Health

A high number of participants reported their understanding of mental health to be related to a child's emotions or feelings. Several participants reflected on the idea that mental health encompasses the ability to take care of one's feelings. One participant stated:

“Mental health can mean one's ability or inability to manage and understand their feelings and emotions” (Interview #11, January 13, 2020).

Participants also stated that mental health pertains to the psychological aspect in a child's life and how they take care of their own emotions. A participant noted:

“Mental health deals with your psychological and emotional well-being.” (Interview #12, January 8, 2020).

Moreover, several participants' responses included a consideration of the lack of emotional self-care. Participant # 4 stated “Mental Health reflects a lack of social emotional self-care, not being able to manage one's own emotions.” (Interview #4, January 13, 2020). Participant #11 added “Mental health can reflect a child's inability to self-regulate.” (Interview #11, January 8, 2020).

In general, participants had an overall understanding of what mental health encompasses. Most participants discussed mental health dealt with one's emotions and the psychological well-being of an individual. Additionally, participants discussed mental health as it relates to self-care and a person's ability to manage their feelings and emotions.

## Signs of Mental Health

Participants reflected on what constitutes early signs of mental health problems in children, including what they may behave like. Among participants, there was a common theme that was identified to express what children's behavior may look like when discussing mental health problems. Participants often pointed out very specific negative behaviors, such as hitting another individual, biting, or kicking others, as possible signs of mental health issues. One participant stated:

“Early signs of mental health in children might be challenging behaviors like hitting, biting, etc.” (Participant #4, January 13, 2020).

Other participants responses expressed the same sentiments and ideas in regard to suggesting several negative behaviors that indicated what a child who might be affected by mental health problems might be displaying in their behavior.

Participant #10 stated:

“It is hard to tell as their brains are skill growing and developing. Perhaps mood swings, violent outbursts, uncontrollable emotions, or inability to cope with everyday stressors, like trauma and effects of their home life.” (Participant #10, January 13, 2020).

Additionally, other participants discussed additional behaviors that might be a possible reflection of displayed early signs of mental health problems in children.

Participant #12 stated:

“Early signs of mental health problems in children could be separation anxiety, anxiety, being unable to self-regulate, self-physical abuse, physical tantrums, and hitting others.” (Participant #12, January 8, 2020).

In general, most participants distinguished and recognized behaviors such as hitting, kicking, or biting, and other challenging behaviors as a possible early sign of mental health problems in children. Participants mostly seemed to agree that an early sign of mental health in children was their behavior. Several behaviors that may be displayed by children were identified and discussed as possible reflections of mental health issues.

### Training

Training opportunities seemed to be well-received by participants. Most participants stated having an opportunity to participate in trainings relating to mental health in their current position. Additionally, participants all discussed the benefits of being provided the opportunity to attend trainings in the subject matter. Some participants expressed barriers that explained possible difficulty or hurdles to participating in trainings.

Participant #4 stated:

“Yes, there is always something to learn and if we get a child that has a mental health problem, we will know what to do and how to help.” (Participant #4, January 6, 2020).

Several participants reflected on how training on mental health could provide an opportunity for growth in the area and how it would personally help them in their position. Participant #10 stated:

“Yes, I am able to participate in trainings through my program of study and I get extra time off for classes if needed. I feel myself and all educators could use more information and knowledge in this area.” (Participant #10, January 13, 2020).

Participants pointed out that they were able to participate in trainings; however, it was not a part of the trainings they are typically required to take as part of their job position. Participant #11 stated:

“Education relating to mental health of social services topics is voluntary. I do believe that being able to participate in continuing education relating to mental health is beneficial to the work that we do. There is a rise in children needing mental health services.” (Participant #11, January 8, 2020).

In this particular study site, training on the subject of mental health is not mandatory, required, or even offered as part of the program. 10 out of 11 participants for this study expressed the opportunity and possibility to participate in trainings offered through their positions. Unfortunately, training regarding mental health within this age group is often voluntary or exclusively meant for

older children in the school setting. Trainings on the subject are sometimes offered through outside agencies and staff in this site are notified however, they are not encouraged or provided with any motivations to personally or voluntarily attend.

### Barriers

At least one participant expressed concerns regarding the lack of services that are offered within the community that is serviced in this study site. One participant suggested that services are not available within the community and the community is limited to what services they can access due to lack of availability.

“There are not really any barriers, it is just something that is not really offered or available for the community.” (Participant #10, January 13, 2020).

On the other hand, another participant noted that barriers of mental health services within the community the school services relate more to the lack of training opportunities that are offered to educators. Participant #11 stated:

“Although we see more children in the classroom with mental health issues, our teachers are not offered classes at the local community college, or trainings dealing with mental health services for children.” (Participant #11, January 8, 2020).

Participants suggested and focused on the lack of services that are provided, as well as, the lack of trainings or educational opportunities that are provided to educators on the subject of mental health for preschool children. This

seemed to be a major barrier that most participants seemed to express concern with, in relation to the services they offer to their population of preschool age children. Participants often reflected on having limited resources as well as a lack of opportunities that can provide them with enough education or resources to provide for children and their families who might be struggling with mental health issues.

Mental health and services relating to mental health in the school setting seemed to be of high importance to the participants of this study. Services in any school setting can be a key component in the way that educators can provide the best opportunities and services to their population. Therefore, the participants concern about the need for educational and training opportunities on mental health services in the school setting for preschool age children within the community they service seems of particularly high importance.

### Summary

The study conducted opened up the opportunity for communication between staff and administration regarding what mental health is and how it plays into their role as educators and service providers. Most participants agreed that training and education opportunities were lacking in their positions and would find it helpful should they be available. Participants noted the importance of being able to implement strategies to assist their students who may be struggling with mental health or issues relating to mental health.

## CHAPTER FIVE

### TERMINATION AND FOLLOW UP

#### Introduction

This chapter discusses the termination process used to end the study. This chapter offers a reflection and overview of the research project completed in a preschool classroom. The ongoing relationship between the researcher and the participants is described. The researcher is aware that circumstances may have changed since conducting this research. Nonetheless, the goal of this study is to evoke discussions among staff members and community partners to establish relationships, activities, trainings, or programs. A dissemination plan is discussed.

#### Termination of Study

Termination of the study was conducted with each participant through phone conversations and email threats. In person meetings were not possible due to the sudden impact that the COVID-19 pandemic had. The researcher conducted check-in meetings with participants to allow for reflection and establish a formal end to the relationships. This provided an opportunity to hand over the responsibility of the project to the group and formally end the researcher's involvement in the project. For the study, participants were provided with an overview of the data collected and an opportunity for questions or

reflections was given. A small group of participants were identified to continue the work started by the study.

Participants were provided with an overview of the study results and a summary of the action plan established with identified participants. Each participant was also given a debriefing statement that marked the end of the study. Participants were provided with the researcher's contact information to allow for additional debriefing as needed or to answer any follow up questions.

#### Communication of Findings to Study Site and Study Participants

A final report was developed and provided to research participants through email. Participants were encouraged to contact the researcher should they have any questions or concerns regarding the report. The report included a description of the initial research focus which was mental health in the preschool setting, a description of the research site which is a preschool program through a community agency, a description of participants which were educators and administrators, a review of the data gathered, categories that were formed and identified, and a final construction that all members had agreed on during the check-in meetings, and a description of the action plan. The final report for this study will be made available to participants upon request. The final report will also be provided to the site administrators to have and provide to staff members as needed or requested.

### Ongoing Relationship with Study Participants

The researcher was able to establish a strong working relationship with the study participants. The researcher will continue to communicate with participants, specially the administrative team. This will be done through phone and email interactions. The researcher will establish a working relationship that includes providing support, resources, and assistance as needed and requested. Additionally, the researcher will be available for consultations to help with the action plan that was established by participants.

### Dissemination Plan

The information and findings collected through the study conducted, the action plan developed, and the individual constructions of participants will all be offered to the study site administrative team. Moreover, with the administrative approval, the information will be made available to other members of the agency who have a greater opportunity of creating or developing some form of change or providing guidance to the study site administration team. Strong efforts will be made to share the study results with other important members of the community through social media platforms which provide an opportunity for exposure. The information collected through this study will also be shared through other opportunities provided by CSUSB.

## Summary

This research project provided an opportunity for members of the community to discuss and determine factors that play a role in the work that they do and how they operate as an establishment. Additionally, this research project allowed participants to discuss services and resources that are available within their community, as well as services that might be lacking and how it impacts the population they serve. Participants who participated in this study expressed that they hoped to expand their training opportunities to include mental health within the school setting which would allow them to serve their population better.

Participants were provided with a copy of the preliminary study results. A more detailed report will be shared with administration and made available to all participants. Copies of the final report will be made available as requested. The researcher will continue to provide assistance and guidance as needed or requested. The dissemination plan includes a plan to present the study's findings through opportunities offered through CSUSB as well as sharing them with other members of the agency where the study was conducted. The purpose of this project was to help members of the community establish an understanding of the mental health services that are offered to address the needs of a certain population and develop a plan to improve services if needed.

APPENDIX A  
DATA COLLECTION INSTRUMENTS

Questionnaire  
(Developed by Celia Tavarez)

1. What is your age?
2. What is your gender?
3. What is your ethnicity?
4. What is your job title?
5. What is the highest degree or level of school you have completed?
6. How long have you been at your current position?
7. In your opinion, what is the definition of mental health?
8. What do you think are the causes of mental health problems in children?
9. What are early signs of mental health problems in children? (What might they behave like?)
10. If you suspect a child under your care has a mental health problem, what do you do?
11. Is there a part-time or full-time school counselor, psychologist, or school social worker who provides standard mental health or social services to students at this school?
12. In your position, are you able to participate in continuing education relating to mental health services or social services topics?
13. What are your observations relating to any barriers of mental health services within the community your school services?

APPENDIX B  
INFORMED CONSENT



California State University, San Bernardino  
Social Work Institutional Review Board Sub-Committee  
APPROVED 5/22/2017 VOID AFTER 5/21/2020  
IRB# SK1967 CHAIR Janet C...

College of Social and Behavioral Sciences  
School of Social Work  
INFORMED CONSENT

The study in which you are asked to participate is designed to evaluate the perceptions of preschool teachers and administrators on mental health services in the school setting. The study is being conducted by Celia Tavarez, an MSW student under the supervision of Dr. Armando Barragan, assistant professor in the School of Social Work, California State University, San Bernardino. The study has been approved by the Institutional Review Board Social Work Sub-Committee, California State University, San Bernardino.

**PURPOSE:** The purpose of the study is to evaluate the perceptions of school personnel on mental health services provided in the school setting.

**DESCRIPTION:** Participants will be asked questions such as demographics, opinions on mental health services, barriers to accessing mental health services, previous experiences, etc.

**PARTICIPATION:** Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

**CONFIDENTIALITY OR ANONYMITY:** Responses will remain confidential and data will be reported in group form only. Information gathered will be kept in a locked cabinet file and disposed of after the project is complete.

**DURATION:** It will take approximately 60 minutes to complete individual interviews.

**RISKS:** A possible minimal risk that could impact the experience of participants in this study is the possibility of discomfort with questions that will be asked. To address this, the researcher will allow for participants to decline answering any questions that might bring up discomfort.

**BENEFITS:** There is a possibility that preschool administrators will use the information recorded to seek changes within their program. This might include providing mental health training to their teachers or partnering up with community mental health providers to implement mental health programs in their agency.

**CONTACT:** If you have any questions about this study, please feel free to contact Dr. Armando Barragan at 909-537-3501 (email: [abarragan@csusb.edu](mailto:abarragan@csusb.edu)).

**RESULTS:** Results of the study can be obtained through emailing the researcher, Celia Tavarez, at [00398871@coyote.csusb.edu](mailto:00398871@coyote.csusb.edu).

I agree to be audio recorded \_\_\_\_\_ Yes \_\_\_\_\_ No

This is to certify that I read the above and I am 18 years or older.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

909.537.5501 · 909.537.7029

5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

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APPENDIX C  
IRB APPROVAL LETTER

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**CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO**  
**SCHOOL OF SOCIAL WORK**  
**Institutional Review Board Sub-Committee**

Researcher(s): Celia Tavaréz

Proposal Title: EVALUATING THE PERCEPTIONS OF ELEMENTARY SCHOOL TEACHERS, ADMINISTRATORS, AND PARENTS, ON MENTAL HEALTH SERVICES IN THE SCHOOL SETTING

# SW1967

Your proposal has been reviewed by the School of Social Work Sub-Committee of the Institutional Review Board. The decisions and advice of those faculty are given below.

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Proposal is:

- Approved  
 To be resubmitted with revisions listed below  
 To be forwarded to the campus IRB for review

Revisions that must be made before proposal can be approved:

- Investigators' signature missing  
 Missing informed consent  Debriefing statement  
 Revisions needed in informed consent  Debriefing  
 Data collection instruments revision  
 Agency approval letter missing  
 CITI missing  
 Revisions in design needed (specified below)

  
\_\_\_\_\_  
Committee Chair Signature

5/22/2019  
\_\_\_\_\_  
Date

Distribution: White-Coordinator; Yellow-Supervisor; Pink-Student

## REFERENCES

- CA Dept of Education. School-based mental health services. (2004). *American Academy of Pediatrics*, 113(6), 1839–1845.
- Doll, B., Nastasi, B. K., Cornell, L., & Song, S. Y. (2017). School-based mental health services: Definitions and models of effective practice. *Journal of Applied School Psychology*, 33(3), 179-194.  
doi:10.1080/15377903.2017.1317143
- Frauenholtz, S., Williford, A., & Mendenhall, A. N. (2015). Assessing school employees' abilities to respond to children's mental health needs: Implications for school social work. *School Social Work Journal*, 39(2).
- Frauenholtz, S., Mendenhall, A. N., & Moon, J. (2017). Role of school employees' mental health knowledge in interdisciplinary collaborations to support the academic success of students experiencing mental health distress. *Children & Schools*, 39(2), 71-79. doi:10.1093/cs/cdx004
- Jorm, A. F., Kitchener, B. A., Sawyer, M. G., Scales, H., & Cvetkovski, S. (2010). Mental health first aid training for high school teachers: A cluster randomized trial. *BMC Psychiatry*, 10(1). doi:10.1186/1471-244x-10-51
- Liegghio, M. (2017). Our biggest hurdle yet: Caregivers encounters with structural stigma in child and youth mental health. *Families in Society: The Journal of Contemporary Social Services*, 98(4), 300-309. doi:10.1606/1044-3894.2017.98.35
- Morris, T. (2014). Practice informed research methods for social workers.

- National institute of mental health. Statistics. (n.d.). Retrieved from <https://www.nimh.nih.gov/health/statistics/index.shtml>
- Powers, J. D., Wegmann, K., Blackman, K., & Swick, D. C. (2014). Increasing awareness of child mental health issues among elementary school staff. *Families in Society: The Journal of Contemporary Social Services*, 95(1), 43-50. doi:10.1606/1044-3894.2014.95.6
- Rich, B. A., & Eyberg, S. M. (2001). Accuracy of assessment: The discriminative and predictive power of the Eyberg Child Behavior Inventory. *Ambulatory Child Health*, 7, 249–257.
- Riverside County. *Performance outcomes systems*. (2018, March 13). Retrieved from <https://www.dhcs.ca.gov/services/MH/Documents/33-20180409-Riverside-SUP-Final.pdf>
- Taras, H. L., Frankwoski, B. L., McGrath, J. W., & Mears, C. J. (2004). School based mental health services. *American Academy on Pediatrics*, 113(6), 1839-1845. doi:10.1542/peds.113.6.1839
- Turner, F. J. (2017). *Social work treatment: Interlocking theoretical approaches* (6th ed.). New York, NY: Oxford University Press.
- UCLA Center for Health Policy Research. (2011, November). Retrieved from <http://www.healthpolicy.ucla.edu/>
- US Census Bureau. (2017, December 11). Data. Retrieved from <https://www.census.gov/data/tables/2017/demo/education-attainment/cps-detailed-tables.html>

United States Census Bureau. Data access and dissemination systems (DADS).

(2013, October 05). Retrieved from

[https://factfinder.census.gov/faces/nav/jsf/pages/community\\_facts.xhtml?src=bkmk](https://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml?src=bkmk)

Weist, M. D., Bruns, E. J., Whitaker, K., Wei, Y., Kutcher, S., Larsen, T., Short, K. H.

(2017). School mental health promotion and intervention: Experiences from four nations. *School Psychology International*, 38(4), 343-362.

doi:10.1177/01430343176953