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# BARRIERS AND FACILITATORS OF SCHOOL SOCIAL WORKERS PROVIDING EVIDENCE-BASED PRACTICES

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# BARRIERS AND FACILITATORS OF SCHOOL SOCIAL WORKERS PROVIDING EVIDENCE-BASED PRACTICES

## **Abstract**

**Objective:** The purpose of this study was to identify the barriers and facilitators of providing evidence-based practices (EBP) in the school setting. This correlational study tested the hypothesis that school social workers who perceive a positive organizational climate for implementation of EBP, have a positive attitude towards EBPs, are familiar with EBP, have access to regular supervision in which EBP is discussed, and have a smaller workload will be more likely to engage in the EBP process and utilize evidence-based practice in their work.

**Methods:** Four-hundred-twenty-six currently employed school social workers completed the online survey. The anonymous online survey included questions on the sociodemographics of the respondents and the school(s) in which they worked. Respondents completed multiple Likert-scale questions including: Engagement in the EBP Process, Utilization of Evidence-based practice, Implementation Climate Scale, Attitude Towards Evidence-based Practice, Familiarity with Evidence-based Practice, Access to Supervision, and Workload. Hypothesis was tested with multiple regression analysis.

**Results:** Findings show a statistically significant relationship for attitude towards EBP, familiarity with EBP, access to supervision, and discussion of EBP in supervision with engagement in the EBP process. Familiarity with EBP and access to supervision were statistically significant in relation to utilization of EBP. Hypotheses were partially supported.

**Conclusion:** This study expands upon prior studies in the field by clearly identifying the specific barriers and facilitators to increasing engagement in the EBP process and utilization of EBPs in the school setting. Furthermore, this investigation is the first quantitative look at both engagement in EBP process and utilization rates of specific EBPs that are applicable in the school setting. Professional development opportunities in order to increase school social workers' familiarity with EBPs is fundamental to increasing both engagement in the EBP process and utilization of EBP in their work. The field must also look closely at access to supervision, including the frequency as well as discussion of EBP during supervision.

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## **First Advisor**

Phyllis Solomon, PhD

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Ann Marie Mumm, PhD

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PROVIDING EVIDENCE-BASED PRACTICES

BARRIERS AND FACILITATORS OF SCHOOL SOCIAL WORKERS PROVIDING  
EVIDENCE-BASED PRACTICES

Maureen Rosenplanter

A DISSERTATION

In

Social Work

Presented to the Faculties of the University of Pennsylvania

In

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Phyllis Solomon, PhD  
Dissertation Chair

Sara S. Bachman, PhD  
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Dissertation Committee  
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### **Dedication**

This dissertation is dedicated to the school social workers who are every day on the front line of providing support to the many students, families, and colleagues in their community. Their level of dedication to the work is inspiring. While handling high caseloads, crisis calls, unending paperwork, and countless meetings, the fact that so many found the time to participate in my survey, is much appreciated.

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To my parents who have provided their unending support in every endeavor I've chosen to pursue, I can't say thank you enough. You instilled in me a love of learning, a belief in striving for more, and the determined spirit to not give up. Thanks a million! To my husband, Dan, who is the greatest partner for all of life's adventures, thank you for your encouragement, for taking on more to lighten my load, inserting laughter over the many revisions, engaging in endless conversations about class topics, and the many coffee and donut deliveries to fuel the process. I need to also thank my family and friends for their patience, love, and understanding over the past few years.

To my work team, you have carried me through the days where I was ready to give up. Thank you for always checking in, offering support, and encouraging me. I can't imagine better colleagues and supervisors.

The biggest thank you goes to my students. Thank you for always pushing me to grow in new ways, for sharing your stories with me, and reminding me on a daily basis of why I love this field. Each of you are the inspiration and motivation for this work.

## Abstract

### Barriers and Facilitators of School Social Workers Providing Evidence-Based Practices

Maureen Rosenplanter, University of Pennsylvania

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**Objective:** The purpose of this study was to identify the barriers and facilitators of providing evidence-based practices (EBP) in the school setting. This correlational study tested the hypothesis that school social workers who perceive a positive organizational climate for implementation of EBP, have a positive attitude towards EBPs, are familiar with EBP, have access to regular supervision in which EBP is discussed, and have a smaller workload will be more likely to engage in the EBP process and utilize evidence-based practice in their work.

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## PROVIDING EVIDENCE-BASED PRACTICES

### **Chapter 1. Background and Significance**

#### **Statement of the Problem**

School social work is a specialized field within the social work profession. Social workers in the school setting are instrumental in providing for the social and emotional support of students, families, and staff. These services are provided in a variety of ways including individual counseling, group counseling, family support, referrals to community resources, consultation with teachers and administrators, advocacy, education of school staff and parents regarding social and emotional concerns, and more.

There is ongoing discussion about the role and responsibilities of the social worker within the school system. This role can vary from state to state, district to district and even from school to school within a single district. The role ambiguity creates confusion surrounding the expectations of social workers for themselves, as well as those from teachers, administrators and parents. As identified by Altshuler and Webb (2009), “school social work lags behind school counseling and school psychology in carving out a self-defined niche with consistent expectations and responsibilities” (p 215).

The role of the school social worker has changed over the past century. Educational policy and the increased focus within the social work field on evidence-based practices has impacted the role of the school social worker (Altshuler & Webb, 2009; Frey, et al, 2012; Kelly, et al 2015). There is increased demand for the social worker to implement preventative school-wide services that are developed from evidence-based practices. Research of school social workers’ responsibilities showed that “school social workers maintained a service role defined by individualized, intensive services and that respondents did not report attending to organizational or contextual issues impacting student functioning” (Kelly, et al, 2015, p 175).

In the educational setting, there is a demand for a multitier model for all school support services, including services to support the social and emotional well-being of students. In the public school setting, this is referred to as a multi-tiered system of support, such as response to intervention (RtI) model. This approach requires three tiers of responses beginning with tier one evidence-based prevention work to benefit the whole school, tier two that focuses on the use of small group and short term interventions to reduce problematic behaviors, and tier three that focuses on individual interventions for the most challenging and in need students (Frey, et al, 2012).

In addition to the call for multi-tiered system of support based services, in 2013 School Social Work Association of America released a national practice model for school social workers. This model includes three domains that should be addressed within a school social worker's role in the educational setting:

- (1) provide evidence-based education, behavior and mental health services
- (2) promote a school climate and culture conducive to student learning and teaching excellence
- (3) maximize access to school-based and community-based resources (SSWAA, 2013).

A quantitative research study by Kelly, et al (2016) looked at the implementation of this practice model in the field and found that “despite the calls for school social workers to be more involved in prevention work, this aspect of the national model appears the least frequently implemented” (p 26). The research found that school social workers had some access to evidence-based resources (predominantly by attending a workshop or accessing an evidence-based practice website). However, the study did not explore the frequency to which those practices were then implemented. Further research is necessary in this area to ensure that school

social workers not only access, but also are able to implement evidence-based practices within the school setting.

According to the National Center for Education Statistics (2016), there are an estimated 55.6 million children attending public and private schools throughout the United States. School social workers are the frontline interventionists for children's mental health as they have access to students who may or may not be connected with any other community-based mental health system for addressing social and emotional well-being. School social workers therefore need to be not only informed of the current evidence-based practices in the field, but also be implementing those interventions. Identifying the specific barriers and facilitators of school social workers adhering to the national model of practice that emphasizes the use of evidence-based practice will have implications for training of school social workers, the job description of school social workers, and evaluation practices that focus on these areas of implementation. Ensuring that social workers in the field are engaged in an active process of providing evidence-based practice at multiple levels will strengthen the growth of students.

To fill the research gap, this researcher utilized an online survey sent to currently employed school social workers throughout the United States to examine the following research question:

To what degree are the utilization and engagement in the process of evidence-based practice by school social workers explained by a) the social worker's perception of organizational climate for implementation of evidence-based practices, b) the social worker's attitudes toward evidence-based practice, c) the social worker's familiarity with evidence-based practice, d) access to supervision, e) access to supervision in

which EBP is discussed, f) the background of a social worker's supervisor, and g) the school social worker's workload?

### **The Role of School Social Workers**

There is a need for school social workers to be providing high quality intervention for students, staff, and families within the school setting. The use of evidence-based practices from the social work field must be implemented within the educational context of a multi-tiered method. In what ways do school social workers utilize evidence-based practices within their role? What are the specific barriers to the school social worker's role in utilizing evidence-based practice? The reasons why evidence-based practice are not more frequently utilized by social workers within the school setting is speculated about in multiple studies, but there is not yet enough evidence to point to one reason over another (Kelly et al, 2010; Kelly et al, 2015; Kelly et al, 2016; Bates, 2006). This literature review looks at research related to the history of the school social worker role, the social worker role within the multi-tiered model, the use of the evidence-based practices by the school social worker, and the current knowledge surrounding barriers and facilitators of the school social worker role.

The evolution of the school social worker role is one that can be followed from when the first social workers became employed in schools during the 1920s until the most recent changes in educational policy requiring an increased focus on the social-emotional wellbeing of children (Altshuler & Webb, 2009; Kelly et al, 2015; Stone, 2015; Richard & Villarreal Sosa, 2014; Kelly et al, 2016). First introduced to the school system as a caseworker to help with assessments and connections to community resources, the school social worker role changed in the 1950s to a more clinical, direct practice role (Costin, 1969; Altshuler & Webb, 2009; Kelly et al, 2015). In

1969, Costin conducted the first major study focusing specifically on the tasks related to the school social worker's role. The quantitative study was conducted using a mail questionnaire with tasks of school social workers listed with a 4-point Likert scale from which respondents were asked to rate the importance of the task and the ability to assign the task to someone with less qualifications. The study used a stratified systematic sample through which the researcher first separated the names of school social workers by state and then within each state selected the fourth or second individual dependent upon the number of names on that list for a total of 368 selected to be invited to participate and resulted in 238 respondents. Only 40 states were represented in the study and the sociodemographic composition of the study sample was not discussed. Also, the sample only included social workers who were currently members of the National Association of Social Workers, and consequently excluded those social workers who worked in schools but were not members. Through factor analysis, results from the study found that the role of the social worker focused primarily on direct clinical service to individuals and small groups (Costin, 1969).

Changes in educational policy and legislation, including the 2001 No Child Left Behind Act (P.L. 107-110) and the reauthorization of 2004 Individuals with Disabilities Education Improvement Act (P.L. 108-446), emphasized the need for highly qualified staff, the use of evidence-based practices in the school setting, stressed the value of data collection and highlighted the importance of primary prevention (Altshuler & Webb, 2009; Sabatino et al, 2013; Kelly et al, 2010; Kelly et al, 2015; Kelly et al, 2016). In response to this need for school social workers to adapt to the changing educational policies and to clarify their role, the School Social Work Association of America created a National School Social Work Practice Model (Kelly et al, 2016; School Social Work Association of America, 2013). The purpose of this

model was to create role clarity which would help school social workers identify their role within the educational setting and therefore better advocate for their role in the system (Kelly et al, 2016; School Social Work Association of America, 2013). The first aspect of the model is to “provide evidence-based education, behavior, and mental health services through the implementation of multi-tiered programs and practices, monitor progress, and evaluate service effectiveness” (School Social Work Association of America, 2013).

In 2015, the Every Student Succeeds Act (ESSA) (P.L. 114-95) was signed and reinforced the need for evidence-based practices in the school setting. “ESSA is the first federal education law to define the term ‘evidence-based’ and to distinguish between activities with ‘strong’, ‘moderate,’ and ‘promising’ support based on the strength of existing research” (West, 2016, para. 2). The act specifically highlights the need for the use of evidence-based practices in school settings that are determined to be underperforming and it allows for federal funds to be used to implement evidence-based interventions as well as to research programs that are untested. As the federal government urges states to encourage more evidence-based programs in their schools, social workers also must ensure that they are engaged in evidence-based interventions.

### **Evidence-based Practice Within Multi-Tiered System of Support Model**

The Response to Intervention (RtI) model was adopted by many states as the multi-tiered model to provide not only academic, but also behavioral and social-emotional support for students (Berkeley et al, 2009; Tan et al, 2016). This model prescribes a tiered approach with leveled interventions at the primary, secondary, and tertiary levels. Primary interventions target all students and the school-wide community. Researchers have identified the primary

intervention tasks of a school social worker as including school-wide social skills development, research based social-emotional curriculum, school training or support services, and community/parent engagement (Kelly et al, 2010; Sabatino et al, 2013; Avant & Lindsey, 2015; Kelly et al, 2015; Kelly et al, 2016). Secondary interventions include small group intervention, mentoring programs, and check-in intervention programs (Kelly et al, 2015). Tertiary interventions focus on highly individualized interventions such as direct individual counseling and behavior plans. Response to Intervention requires the use of evidence-based practices (EBP) in these interventions, as well as progress monitoring data collection to determine the success of intervention or need for a different intervention.

Research has established the ways in which the Response to Intervention model fits with the school social worker role and highlights the need for primary prevention (Kelly et al, 2016; Kelly et al, 2015; Richard & Villarreal Sosa, 2014; Avant & Lindsey, 2015; Kelly et al, 2010; Sabatino et al, 2013). The goal of primary prevention is one that multiple studies highlight as valued by school social workers, yet is utilized the least often on the job (Kelly et al, 2010; Kelly et al, 2015; Kelly et al, 2016; Allen-Meares, 1994).

Despite the calls for tiered levels of intervention and research supporting the effectiveness of preventative measures or primary intervention, multiple studies demonstrate a lack of time spent in this area of intervention. In 2010, Kelly et al conducted a National School Social Work Survey, which found that respondents spent 28.4% of their time on primary intervention (Kelly et al, 2010). Kelly states “Given the strong support for theoretical and empirical primary prevention, it is disturbing to find such a small percentage (11 percent) of our sample delivering social skills curriculums within the context of the classroom or the entire school (that is, social skills as a tier 1 intervention) all or most of the time” (Kelly et al, 2010, p

206). In a 2015 study, Kelly et al (2015) found that respondents spent 16.4% of their time on primary intervention (a decrease from the 2010 survey) and 65.91% of their time on secondary and tertiary interventions (Kelly et al, 2015).

As to what interventions are being utilized, respondents to a survey conducted by Kelly and Lueck (2011) highlighted parental engagement as their most frequent primary prevention activity, followed by facilitating small groups and engaging the community. Within the survey, school social workers reported that their most preferred Tier 3 intervention was individual counseling, which concurs with findings from previous studies regarding where the most time is spent.

### **Organizational Climate for Evidence-Based Practice in Schools**

Sabatino et al (2013) explored the current literature to provide a conceptual framework for the implementation of evidence-based practice using the lens of Response to Intervention within the school setting. The authors explained that evidence-based practice “weaves together the client’s real-world issues, research evidence, and the school social worker’s knowledge and practice wisdom to guide decision making” (Sabatino et al, 2013, p 214). The article highlights the importance of the organization’s influence that can either facilitate or hinder the use of evidence-based practices. While school social workers may generally feel that preventative work has more long-term effects, they also note that organizational factors prevent them from implementing these interventions (Isaksson & Sjostrom, 2017). In a small qualitative study, Michelle Bates examined school social workers’ opinions and experience with evidence-based practices. One respondent shared that the setting in which the practice was conducted limited the use of evidence-based practice in that “so much of the research, and the stuff we do is around

clinical issues, but we're not a clinical setting" (Bates, 2006, p 100). The respondents all noted a push within the organization for data to show that their interventions created change, showing that there is some demand for accountability within the climate of the school setting.

In a qualitative study using two focus groups of school social workers during a summer research institute, Phillippo et al (2017) found that "school-based working conditions influenced how participants carried out their daily work" (p 278). The participants discussed multiple expectations from various sources within the district as well as from state and federal policy that shaped their decision practices.

Implementation science research has shown that specific organizational factors, such as the climate for providing evidence-based practices in the agency setting, are correlated with implementation of evidence-based practice and individual worker's attitudes towards evidence-based practices (Ehrhart et al, 2014). The setting of an organization determines the expectations and norms for the work completed by individual workers. As stated by Aarons et al, "The best unique predictor among the culture and climate dimensions of clinicians having positive overall attitudes toward EBPs is working in a proficient organizational culture" (2012, p 10).

### **Attitude Towards Evidence-Based Practice**

School social workers seem to understand the benefits of using evidence-based practices as a way to increase their own certainty and professional credibility within the field (Bates, 2006). Results of research on school social worker tasks by Allen-Meares (1994) found a correlation between perceived importance of a task and the frequency with which it is performed. This quantitative survey gathered demographic information of respondents as well as ratings for the viewed importance of a task, how often the task was performed and whether the task was

mandated or preferred. Although the survey did not assess the perceived importance of utilizing evidence-based practices in the school setting and the frequency in which it is utilized, it does demonstrate the concept that school social workers are more likely to engage in a practice that they value.

There appears to be both a hesitation and a desire for evidence-based practice within the school social work role. Research has found some ambivalence toward manualized evidence-based treatment. Isaksson and Sjostrom, professors at the Department of Social Work at Umea University in Sweden, found one of the themes identified in their interviews was ambivalence toward manualized evidence-based treatment. As noted by one interviewee, “You attend courses and try to learn some new methods...But at the end of the day you often mix and match; you don’t really adhere to a clear-cut method. You pick up some things here and other things there, based on what kind of pupils you see and what needs there are and what you think could work” (Isaksson & Sjostrom, 2017, p 195).

In a SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis by Raines (2006), results taken from a panel of school social work experts showed that 36% of respondents felt that consuming and engaging in research was a weakness of school social work. The findings show a need for those in the field to engage more with evidence-based practices to enhance the role and tasks in the school setting. As one respondent stated, “too many school social workers continue to engage in practice wisdom only and have not taken the movement toward practice evaluation and evidence-based practice seriously” (Raines, 2006, p 137). This concept of practice wisdom versus evidence-based practice is a commonly identified barrier to the adoption of an evidence-based model of practice.

**Familiarity with and Access to Evidence-Based Practice**

Avant and Lindsey (2015) utilized a mixed-methods questionnaire focused on the social worker's perspective of RtI, the training received in regard to RtI, and the RtI supports that are provided within their school. The online survey was distributed to school social workers in Illinois, where RtI is mandated by the state. Two of the challenges to the Response to Intervention model commonly discussed were difficulty quantifying effectiveness and finding evidence-based interventions. As one respondent stated, "Sometimes it is difficult to implement interventions that would support pre and post-tests for progress monitoring" (Avant & Lindsey, 2015, p 285).

During two focus groups, Phillippo et al (2017) found that while many participants discussed wanting to utilize evidence-based models and interventions, they also described difficulty in finding such resources. One participant stated, "It would be nice to have a pool of curriculum for interventions or practices we can pull from to have this fidelity. I don't know if there is such a thing" (Phillippo et al, 2017, p 277).

Multiple studies have found that school social workers most frequently use online evidence-based practice websites and databases to determine EBPs to use within practice in interventions (Kelly et al, 2015; Kelly et al, 2016). There is no research as to how often school social workers use the information from the resources in their daily practice (Kelly et al, 2016). Research found that 84% of respondents felt unprepared to use universal screening, over 43% felt unprepared to monitor fidelity of interventions, 61% felt unprepared to assess through direct observation, while over 55% reported having no access to any clinical supervision, and nearly 50% reported having no access to online evidence-based practice websites (Kelly et al, 2016).

### **Supervision in the School Setting**

The use of supervision of school social workers is an area that is highlighted within multiple studies from the school social work research. Richard and Villarreal Sosa (2014) noted that only 19% of the school social workers involved in their qualitative study in Louisiana were supervised by a social worker. As a part of the Kelly et al (2015) study, results showed that 55.3% of respondents received no supervision, 35.3% received some supervision and only 9.4% noted high rates of supervision. The lack of supervision is mentioned within school social work research as a missing aspect, but more information is needed to determine how this impacts the use of evidence-based practices by social workers in the school setting (Teasley et al, 2012; Richard & Villarreal Sosa, 2014; Avant & Lindsey, 2015; Kelly et al, 2015; Kelly et al, 2016). Supervision in the social work field is a key component of ongoing training and professional development. While access to specific workshops on evidence-based practice can expose a social worker to approaches and techniques to increase knowledge on evidence-based practice, ongoing supervision is essential in ensuring that the implementation of evidence-based practice is utilized in a consistent manner within the school setting. “Lack of structural support in adopting EB practices, such as clinical supervision, may be an especially important barrier to enacting change” (Accurso et al, 2011, p 94). In the results of a focus group study by Phillippo et al (2017), participants described peer consultation that was geared toward offering support rather than seeking and learning information.

### **Workload in the School Setting**

One study that did explore general barriers to school social work practice was a mixed-methods study conducted by Teasley et al (2012). The most commonly identified barriers

included time constraints, caseload, resources, administration, bureaucracy, and knowledge/awareness. The workload of school social workers impacts the time available to research evidence-based practice for individual cases. With a possible caseload of hundreds of students or other duties assigned by the school, a social worker's time may be spent responding to crisis intervention situations or attending meetings rather than implementing evidence-based practices with fidelity.

### **Rationale for the Current Study**

Although a National Model of Practice was established by the School Social Work Association of America and the U.S. Department of Education endorses a Response to Intervention method, the number of social workers actively adhering to these policies is not clearly known. The results of this research will offer deeper insight into the use of evidence-based practices within the school social worker role. The identification of barriers will better serve the schools of social work and the Departments of Education throughout the United States to address additional training or supports that may be necessary to ensure that evidence-based practices are utilized in school settings to support social and emotional growth of all students.

This research will not only help to determine the current level of engagement by school social workers in using evidence-based practices, but also hopefully highlight facilitators which lead to an increased engagement as well as particular barriers. This can lead to trainings, specific to school social workers and their supervisors, regarding ways to increase the use of these practices. School social workers must be adept at reviewing and critiquing research to determine the best practices for their work with students and families. As professionals, school social

workers must strengthen their knowledge of evolving evidence-based practices to support the districts in their goal of providing research-informed social and emotional learning.

Individual schools and districts will be able to use the findings from this research to further enhance the role of the school social worker. If there is found to be a gap in knowledge regarding evidence-based practices by school social workers, training can be provided to ensure that social workers understand the EBP process. If there are organizational supports missing, such as access to supervision or value displayed by the organization for using evidence-based practice, this can push districts to refocus efforts to target these areas.

There is a push from both the social work and educational fields for an increase in the use of evidence-based practices by school social workers. As social-emotional learning continues to grow as an area of focus in the educational setting, the role of the school social worker becomes more essential. Through a Multi-tiered System of Support model and the National School Social Work Practice Model, the expectations for evidence-based practice are established. Research in the field shows that despite this expectation, the majority of school social workers are not consistently utilizing evidence-based practices, in particular with regard to primary intervention. While there is research identifying common barriers to social work practice in the school setting, there is little exploration into the facilitators and barriers to the use of evidence-based practice in the school setting. This study will examine the ways in which school social workers' attitude towards evidence-based practices, the organizational climate for implementation of evidence-based practices, and other facilitators and barriers that may impact the implementation of evidence-based practices in the school setting.

Based on review of the literature related to school social work, this researcher hypothesizes that school social workers who perceive a positive organizational climate for

implementation of evidence-based practice, have a positive attitude towards evidence-based practice, are familiar with evidence-based practice, have regular access to supervision in which evidence-based practice is discussed, and have a smaller workload will be more likely to utilize evidence-based practice in their work and to engage in the evidence-based practice process.

## **Chapter 2. Methods**

### **Design**

The researcher conducted a correlational study to explore the proposed research question. This included the creation of an online survey that used already established scales to assess attitudes toward evidence-based practices, organizational climate, and implementation of evidence-based practices in the school setting. The study also examined the facilitators and barriers that may be related to the implementation of evidence-based practices in the school setting by school social workers.

### **Sample Size and Recruitment Procedures**

This study used a non-probability convenience of school social workers along with snowball sampling by having individuals forward the survey to colleagues who may not be members of such organizations. Prior school social work research studies utilizing an online survey found small to medium effect sizes in their studies using Cohen's criteria (Kelly et al, 2016; Kelly et al, 2015). Based on Cohen's criteria for a power analysis, with seven independent variables in the study and keeping the significance criterion at .05 and the statistical power of .80, a sample size of 414 respondents was needed for the study (Cohen, 1992). This sample size takes the average of the sample necessary for a small and medium effect size for multiple regression. This research is using psychometrically sound measures with high internal consistency therefore increasing the power of the research.

Through contacts at the School Social Workers Association of America, NASW Chapter organizations, and state wide chapters of School Social Workers, requests were made for the groups to share the link to the survey through email and/or social media to current members

throughout the United States. Snowball sampling was also used through direct email to include school social workers who may not currently be members of a national or state organization and requested that potential respondents also forward the survey to their colleagues who may meet the entrance criteria for participation in the survey.

Inclusion Criteria:

- Currently employed for at least one full school year as a school social worker in the United States
- Have a Bachelor's Degree, or higher, in Social Work

Recruitment for the research study began in the fall of 2018 and took three months. Four hundred twenty six respondents took the survey. Informed consent was included at the start of the online survey. A copy of the survey and recruitment letters are included in the appendix.

**Subject Payment**

At the completion of the online survey, participants were asked if they would like to proceed to an additional link for a chance to receive one of four \$25 Amazon gift cards. If the participant chose to enter the raffle, they provided their email address in a link separate from the survey to ensure anonymity of survey responses. The email addresses gathered from those entering the chance for compensation were kept in the Qualtrics computer program until the recruitment for the study was complete. One hundred ninety nine respondents entered their email addresses. An online random number generator was utilized to pick four unique numbers between 1 and 199. The numbers chosen were: 78, 93, 108, and 163. The email addresses chosen from the list were then sent an electronic Amazon gift card. At that time, all email addresses were deleted.

## Measures

### *Dependent variables*

Engagement in Evidence-Based Practice Process: Subscale four (Engagement in the EBP Process) of the Evidence-Based Practice Process Assessment Scale- Short Version (EBPPAS-short) (Parrish & Rubin, 2011) was used to measure the current level of engagement with evidence-based practice in the school setting. This subscale contains 8 items regarding the social worker's current level of engagement in using evidence-based research in practice with responses ranging from "never" to "very often." The EBPPAS-short version consists of 37 items with a 5-point Likert scale (Parrish & Rubin, 2011). The scale focuses on the respondent's viewpoint on evidence-based practices. There are four subsections within the scale including: 1) Familiarity/Self-efficacy with EBP, 2) Attitudes about the EBP process, 3) Feasibility of the EBP process, and 4) How Often Currently Engaged in the EBP process. A study was conducted by Parrish and Rubin (2011) to assess the scale's internal consistency reliability, criterion validity, and factorial validity. Internal consistency was found to have a Cronbach's alpha of .94 for the 37-item scale (Parrish & Rubin, 2011). The subscales showed strong internal consistency with self-efficacy having an alpha of .93, attitudes an alpha of .92, behaviors an alpha of .91, and feasibility an alpha of .74 (Parrish & Rubin, 2011). "Bivariate correlation coefficients were run between scale and subscale scores and prior education or training in EBP variables...all 25 correlations were statistically significant" demonstrating good validity (Parrish & Rubin, 2011, p 204). In this study, internal consistency was found to have a Cronbach's alpha of 0.88.

Utilization of Evidence-Based Practice: In addition to the engagement in evidence-based practice subscale, twelve Likert 5 point scale items on utilization of evidence-based practice, created by the researcher, asked specifically about frequency of utilization of common evidence-based practices with children and adolescents with responses ranging from never to very often. This scale includes evidence-based practices such as cognitive behavioral therapy, multisystemic therapy, and motivational interviewing. Respondents were also able to add other evidence-based practices currently used in their work. The total scale score for this measure was created by the mean of the twelve listed items. Internal consistency for this measure in the study was found to have a Cronbach's alpha of 0.79.

### *Independent variables*

Organizational climate for implementation of EBP: This was measured using two subscales of the Implementation Climate Scale (Ehrhart et al, 2014). The subscales used were Focus on EBP and Educational Support for EBP. This scale was tweaked by the researcher to use vocabulary appropriate for the school setting. These subscales contain 6 items related to the organization's overall value and access to training on evidence-based practice. The 5-point Likert scale responses ranged from "not at all" to "very great extent." The Implementation Climate Scale (ICS), created by Mark G. Ehrhart and Gregory A. Aarons (2014), is an 18-item 5-point Likert scale focused on measuring the organizational climate for the implementation of evidence-based practices. This survey focuses specifically on the organizational climate in relation to the implementation of evidence-based practices, rather than a measure of overall organizational climate. The

scale includes domains for “selection for openness, recognition for EBP, selection for EBP, focus on EBP, educational support for EBP, and rewards for EBP” (Ehrhart et al, 2014, p 6). “Internal consistencies for the final scales were strong (alpha = 0.81-0.91). Item analyses indicated that item-total correlations were high, ranging from 0.62 to 0.87” (Ehrhart et al, 2014, p 6). Cronbach’s alpha for this scale in this study was 0.91.

Attitude towards evidence-based practice: This was measured using subscale two of the EBPPAS-short version (Parrish & Rubin, 2011). This subscale contains 14 items related to openness to change, perceived importance of using research in practice, and willingness to adopt evidence-based practices. Internal consistency for this subscale in the study was found to have a Cronbach’s alpha of 0.86.

Familiarity with evidence-based practice: This was measured using subscale one of the EBPPAS-short version (Parrish & Rubin, 2011). This subscale contains 10 items related to the social worker’s understanding of how to engage in evidence-based practice through research as well as their confidence in understanding available research in the field. Internal consistency for this subscale in the study was found to have a Cronbach’s alpha of 0.92.

Access to supervision: The frequency of supervision and the background of who provides supervision was assessed. This was measured through the inclusion of specific questions on the survey related to supervision. 5-point Likert scale items related to the frequency of supervision which allowed for responses from “never” to “at least weekly” for access to

both direct supervision and peer supervision. The survey also asked the frequency with which the supervisor discusses the use of and offers support for evidence-based practices in the school setting.

Workload: To determine the average workload of each school social worker, questions were asked regarding the average hours of direct services (individual, group, and classroom) with students, services provided to staff, services provided to parents/guardians, time spent in school meetings, time spent in professional development, and the total number of hours worked per week on average. A final question asked respondents to list additional tasks in which they spend their time and the average amount of time dedicated to these tasks in a typical week. The workload was calculated by combining all hours listed by respondents to determine total number of hours worked per week and dividing that by the total time spent in direct service with students, staff, parents/guardians and time spent in meetings to obtain an average percentage of their week spent in direct service hours.

*Socio-demographic information:* Socio-demographic information was collected at the start of the survey regarding the current highest degree held by the school social worker, the number of years as a social worker in the current school setting, the number of years as a social worker in other school settings, the number of years as a social worker in other settings, whether employed directly by the school district or a community agency, and whether employed part or full time. Information on age, gender, and race was also collected. One question identified whether the respondent had specific training in evidence-based

practice implementation and if so, where that training was received. Information regarding the school setting, including whether a private or public school, grade levels, setting (rural, urban, or suburban) and the state in which the school is located was also collected.

### **Handling and Protection of Data**

The researcher was the only data collector for the research project. The researcher has completed CITI Human Subject Research training.

Contact information was not collected with the survey to ensure anonymity. Only participants who wished to have the chance to receive a gift card for completion of the survey entered their email address. This information was collected in a separate link from the original survey. Data from the completed surveys were kept in a password protected online account through the survey provider and were downloaded to SPSS for statistical analysis. Contact information of those entering for a chance to receive a gift card were kept by Qualtrics only until all recruitment was completed. At that time, the recipients of the incentives were chosen at random and all contact information for all those who provided such information was deleted.

### **Human Subjects**

Informed consent was obtained at the start of the online survey before participants were able to continue with the survey. As the survey results are anonymous, informed consent outlined that there will be no repercussion to the potential participant for choosing not to participate in the research study. It was further noted that data will only be presented in aggregate form so identification of respondents will not be possible.

The study was approved through the University of Pennsylvania Institutional Review Board prior to starting. Ethical guidelines for research with human subjects were followed.

There was minimal potential risk for participants taking the online survey as the information was anonymous. Participants chose to participate in the survey voluntarily by clicking on the agree button after reading the informed consent information and then clicking on the link to the survey. If at any time the participant chose not to continue with the survey, they could exit without penalty. This research study aimed to help understand the facilitators and barriers to implementing evidence-based practices in the school setting. The findings may help to determine what additional education or support may be important to enhance the implementation of evidence-based practices by school social workers.

### **Data Analysis**

Descriptive statistics were run for all responses to the survey to describe the sample. This included characteristics of the social work participants (age, gender, race, education, number of years working in the field) as well as the setting in which the participants worked (public or private school, school setting, and state).

Hypothesis testing was conducted with multiple regression analysis using SPSS software. Two models were tested, one with *Engagement in the EBP Process* as the dependent variable and *Familiarity with Evidence-Based Practice, Attitudes About Evidence-Based Practice, Implementation Climate, Access to Supervision, Access to Supervision to Discuss Evidence-Based Practice, Education of Supervisor, and Workload* were included in the model as independent variables. The second model included *Utilization of Evidence-Based Practice* as the dependent variable and *Familiarity with Evidence-Based Practice, Attitudes About Evidence-*

*Based Practice, Implementation Climate, Access to Supervision, Access to Supervision to Discuss Evidence-Based Practice, Education of Supervisor, and Workload as independent variables.*

### Chapter 3. Findings

#### Sample Characteristics

A total of 426 Social Workers participated in the study, the majority of whom identified as female (87.8%) and Caucasian (78.4%), with an average age of 43 ( $SD=11.53$ ). Most respondents were employed full time (93%), employed directly by a school district or school (87%), and had been at their current jobs for an average of 9 years ( $SD=7.93$ ). Only 30.5% of respondents reported having a supervisor with social work or school psychology degree, or clinical training such as counseling, or other mental health degree. See Table 1 for more detail.

**Table 1. Respondent Characteristics**

		N	%
Gender	Male	32	7.5
	Female	374	87.8
	Missing	20	4.7
Race/Ethnicity	African American	26	6.1
	Asian/Pacific Islanders	3	0.7
	Caucasian	334	78.4
	Latino/Hispanic	22	5.2
	Native American	1	0.2
	Multi-racial/ethnic	13	3.1
	Other	7	1.6
	Missing	20	4.7
Employment	Full-time	396	93
	Part-time	10	2.3
	Missing	20	4.7
Employer	School district or school	369	86.6
	Community agency	21	4.9
	Other	16	3.8
	Missing	20	4.7
Supervisor Education	Social Work, School Psychology, Other Mental Health or Counseling	130	30.5
	Education, Other, No Supervisor	296	69.5
		Mean	SD
Age		42.5	11.53
Years in current job		9.0	7.93

Most of the respondents held a Master's degree in Social Work (85.9%), with a substantially smaller percentage holding a Bachelor's (4.7%) or Doctoral (1.2%) degree. While respondents had an average of 12 years of experience in school social work practice ( $SD=8.78$ ) and 9 years of experience in social work practice in non-school settings ( $SD=9.16$ ), less than half (46.7%) held professional memberships in either the School Social Work of America Association (SSWAA) or the National Association of Social Workers (NASW). Three quarters of respondents (75.6%) had training in Evidence-Based Practice (EBP), as part of their social work curriculum (43.2%), an in-service training (47.2%), or a continuing education course (57.5%). Respondents were able to endorse multiple answers for how they received training in EBPs. See table 2 for more detail.

**Table 2. Respondent Education, Training, and Experience**

		N	%
Level of Social Work Education	Bachelor's degree completed	20	4.7
	Master's degree in progress	11	2.6
	Master's degree completed	366	85.9
	Doctorate in progress	5	1.2
	Doctorate completed	4	0.9
	Missing	20	4.7
Professional Membership	Member of SSWAA	88	20.7
	Member of NASW	122	28.6
	Member of Neither	227	53.3
Training in EBP	Yes	322	75.6
	No	82	19.2
	Missing	22	5.2
Location of EBP Training	In social work curriculum	184	43.2
	In-service training	201	47.2
	Continuing education course	245	57.5
		Mean	SD
Years of school social work practice		12.08	8.78
Years of social work practice in non-school setting		8.8	9.16

As shown in Table 3, the majority of respondents worked in a public school system (86.6%). Forty one percent of respondents worked in a suburban setting, 29.6% in an urban setting, and 25.8% in a rural setting. Almost 60% of respondents worked with Elementary School students (57.7%), 45.5% with Middle School students, 46% with High School students, and 25% with Preschool students. Respondents were able to give multiple responses if they worked with more than one grade-range. There was at least one respondent from every state in the United States, plus the District of Columbia, with 26.5% working in the Northeast, 37.3% in the Midwest, 20.4% in the South, and 12.2% in the West. Respondent schools had an average of 1283 students ( $SD=2238$ ).

**Table 3. School Demographics**

		N	%
Region of School	Northeast	113	26.5
	Midwest	159	37.3
	South	87	20.4
	West	52	12.2
	Missing	15	3.5
Type of School	Public School System	369	86.6
	Charter School	17	4.0
	Private School	12	2.8
	Other	13	3.1
	Missing	15	3.5
School Location	Urban setting	126	29.6
	Suburban setting	175	41.1
	Rural setting	110	25.8
	Missing	15	3.5
Grade Levels	Preschool	108	25.4
	Elementary School	246	57.7
	Middle School	194	45.5
	High School	196	46.0
		Mean	SD
Average number of students		1283	2238

### Descriptives for Independent and Dependent Variables

Table 4 provides means and standard deviations for each independent and dependent variable. All variables except *Workload* were measured on a 5-point scale. *EBP in Supervision* had the lowest average score across respondents (2.53,  $SD=1.40$ ) and *Familiarity with EBP* had the highest average (3.67,  $SD=0.65$ ). *Workload* was measured as the proportion of hours worked in service to students, teachers, family, or in meetings, with an average of 89% ( $SD=0.20$ ) of time spent in these activities.

**Table 4. Descriptives of Workload, Utilization, Engagement, Supervision, Climate, Familiarity and Attitudes Regarding EBP**

	Mean	SD	Min	Max
Workload	0.89	0.20	0	1
Utilization of EBP	3.00	0.65	1	4.91
Engagement of EBP	3.00	0.70	1	5
EBP in Supervision	2.53	1.40	1	5
Supervision Average	2.70	0.94	1	5
Implementation Climate	2.81	0.88	1	5
Familiarity with EBP	3.67	0.65	1	5
Attitude towards EBP	3.66	0.45	2.36	4.93

Table 5 displays the relationships among all continuous independent and dependent variables. *Supervision* and *EBP Supervision* had the strongest relationships ( $r=0.61$ ,  $p<0.01$ ). *Engagement in EBP* and *Utilization of EBP* were also highly correlated ( $r=0.43$ ,  $p<0.01$ ). The weakest relationships were between *Attitude Towards EBP* and *Supervision* ( $r=0.12$ ,  $p<0.05$ ), *Attitude Towards EBP* and *Utilization of EBP* ( $r=0.17$ ,  $p<0.01$ ), and between *Supervision* and *Utilization of EBP* ( $r=0.19$ ,  $p<0.01$ ). *Workload* was the only variable that was not significantly correlated with any other variable.

**Table 5. Relationships Among Independent and Dependent Variables**

	Attitude	Utiliz	Engage	Familiar	EBP		Implement	Work
					Superv	Superv		
Attitude	1							
Utilization	0.17**	1						
Engagement	0.34**	0.43**	1					
Familiarity	0.39**	0.30**	0.58**	1				
EBP Super	0.21**	0.25**	0.41**	0.29**	1			
Supervision	0.12*	0.19**	0.35**	0.25**	0.61**	1		
Implementation	0.30**	0.20**	0.27**	0.23**	0.36**	0.31**	1	
Workload	-0.05	-0.04	-0.01	-0.06	-0.08	-0.05	-0.02	1

\*  $p < 0.05$ ; \*\*  $p < 0.01$

Table 6 provides the percentages, mean, and standard deviation for each of the responses for engagement in the evidence-based practices process. Only 17.05% of respondents reported that they are engaging in all steps of the EBP process often or very often in their work. Over half (51.45%) of the respondents are often or very often using the Internet to look for best research evidence to guide their decisions in practice. Over 50% of respondents never or rarely inform students or guardians about evidence supporting alternative interventions and nearly 60% never or rarely involve students in deciding whether the intervention they will receive is a supported evidence-based practice.

**Table 6. Engagement in the EBP Process**

	Frequency					Central Tendency
	Never	Rarely	Some of the time	Often	Very Often	M (SD)
I use the Internet to search for best research evidence to guide my practice decisions	2.02%	9.83%	36.71%	41.33%	10.12%	3.48 (0.88)
I read about research evidence to guide my practice decisions	2.89%	10.98%	45.38%	34.39%	6.36%	3.30 (0.86)
I read research-based practice guidelines to guide my practice decisions	3.18%	19.36%	42.49%	29.77%	5.20%	3.14 (0.90)
I rely on research evidence as the best guide for making practice decisions	2.31%	16.76%	47.40%	28.61%	4.91%	3.17 (0.84)
I inform students/guardians of the degree of research evidence supporting alternative intervention options	13.01%	37.28%	32.66%	13.58%	3.47%	2.57 (0.99)
I involve students in deciding whether they will receive an intervention supported by the research evidence	22.83%	33.82%	26.30%	13.29%	3.76%	2.41 (1.09)
I evaluate the outcomes of my practice decisions	5.49%	13.01%	37.28%	34.39%	9.83%	3.30 (1.00)
I engage in all steps of the EBP process	13.01%	30.35%	39.60%	14.45%	2.60%	2.63 (0.97)

Table 7 shows the percentages for the frequency of utilization of evidence-based practices by respondents as well as the mean and standard deviation for each item in the scale. About half of the respondents (49.71%) endorsed using data collection to monitor progress of their interventions often or very often in their work. The most frequently utilized practices were solution-focused brief therapy (M=3.67), cognitive-behavioral therapy (M=3.64), and trauma-focused cognitive behavioral therapy techniques (M=3.48). Prolonged exposure was the least utilized EBP with 54.39% of respondents reporting that they never used this technique (M=1.65).

**Table 7. Utilization of EBPs**

	Frequency					Central Tendency
	Never	Rarely	Some of the time	Often	Very Often	M (SD)
I use data collection to monitor progress in response to interventions	6.40%	13.37%	30.52%	33.43%	16.28%	3.40 (1.10)
I use a curriculum/manual for interventions that is research-based	12.24%	16.33%	32.36%	30.32%	8.75%	3.07 (1.14)
I use cognitive behavioral therapy techniques	3.78%	6.69%	31.10%	38.66%	19.77%	3.64 (0.99)
I use trauma-focused cognitive behavioral therapy techniques	4.96%	13.70%	28.86%	32.94%	19.53%	3.48 (1.10)
I use prolonged exposure therapy	54.39%	31.58%	9.94%	2.63%	1.46%	1.65 (0.87)
I use multi systemic therapy	23.24%	20.00%	28.53%	22.06%	6.18%	2.68 (1.22)
I use motivational interviewing	6.12%	10.50%	33.82%	33.53%	16.03%	3.43 (1.07)
I use dialectical behavioral therapy	34.21%	27.19%	22.22%	11.99%	4.39%	2.25 (1.17)
I use solution-focused brief therapy	4.68%	6.73%	26.90%	40.35%	21.35%	3.67 (1.03)
I am involved in the implementation of a school-wide social emotional learning curriculum that is research-based	22.51%	15.79%	16.67%	23.10%	21.93%	3.06 (1.47)
I provide trainings for school staff on research-based strategies that can be implemented in the school setting	25.36%	24.78%	28.28%	10.79%	10.79%	2.57 (1.27)

## Hypothesis Testing

This study hypothesized that school social workers who perceive a positive organizational climate for implementation of evidence-based practice, have a positive attitude towards evidence-based practice, are familiar with evidence-based practice, have regular access to supervision in which evidence-based practice is discussed, and have a smaller workload will be more likely to engage in and utilize evidence-based practice in their work. Two multiple regression models were tested, one with *Utilization of EBP* as the dependent variable and one with *Engagement in EBP* as the dependent variable. Overall, more of the variance in *Engagement in EBP* was explained ( $R^2=0.43$ ) by the combination of independent variables (Table 8) compared to the variance in *Utilization of EBP* ( $R^2=0.13$ ) explained by the same seven variables (Table 9).

Four of the seven independent variables in the *Engagement* model were significant predictors of *Engagement in EBP*. *EBP Supervision* was positively associated with *Engagement* although the magnitude of change was small with only a 0.08 of a point change in *Engagement* with every 1-point change in *EBP Supervision* ( $B=0.08, p<0.01$ ). *Supervision* was also positively associated with *Engagement* but again the magnitude of change in *Engagement* was small ( $B=0.09, p<0.05$ ). *Familiarity with EBP* was positively associated with *Engagement*, with a 1-point increase in *Engagement* with every ~2 additional points of *Familiarity* ( $B=0.48, p<0.01$ ). Finally, *Attitude Towards EBP* was positively associated with *Engagement*, with a 1-point increase in *Engagement* with every ~5 additional points of (positive) *Attitude* ( $B=0.19, p<0.05$ ).

**Table 8. Engagement in Evidence-Based Practice**

	B	Std. Error	b	t-value	95% CI	
					Lower	Upper
Supervisor Education	-0.003	0.06	0.00	-0.05	-0.13	0.12
EBP Supervision	0.08	0.03	0.16	2.90**	0.03	0.14
Supervision	0.09	0.04	0.12	2.23*	0.01	0.17
Familiarity with EBP	0.48	0.05	0.45	9.78**	0.39	0.58
Implementation Climate	0.03	0.04	0.04	0.78	-0.04	0.10
Attitude towards EBP	0.19	0.07	0.12	2.65*	0.05	0.34
Workload	0.15	0.15	0.04	0.97	-0.15	0.45
(Constant)	-0.14	0.30		-0.46	-0.74	0.46
$R^2 = 0.43$						

\* $p < 0.05$ ; \*\* $p < 0.01$ 

Two of the seven independent variables in the *Utilization* model were significant predictors of *Utilization of EBP* (see Table 9). *EBP Supervision* was positively associated with *Utilization* although the magnitude of change was small with only a 0.07 of a point change in *Utilization* with every 1-point change in *EBP Supervision* ( $B=0.07$ ,  $p < 0.05$ ). *Familiarity with EBP* was also positively associated with *Utilization*, with a 1-point increase in *Utilization* with every ~4 additional points of *Familiarity* ( $B=0.23$ ,  $p < 0.01$ ).

**Table 9. Utilization of Evidence-Based Practice**

	B	Std. Error	b	t-value	95% CI	
					Lower	Upper
Supervisor Education	-0.01	0.07	-0.01	-0.13	-0.16	0.14
EBP Supervision	0.07	0.03	0.15	2.13*	0.01	0.14
Supervision	0.00	0.05	0.01	0.07	-0.09	0.10
Familiarity with EBP	0.23	0.06	0.23	3.95**	0.11	0.34
Implementation Climate	0.05	0.04	0.07	1.15	-0.04	0.14
Attitude towards EBP	0.05	0.09	0.03	0.58	-0.12	0.22
Workload	-0.04	0.18	-0.01	-0.20	-0.39	0.32
(Constant)	1.69	0.36		4.74	0.99	2.39
$R^2 = 0.13$						

\* $p < 0.05$ ; \*\* $p < 0.01$

#### Chapter 4. Discussion and Conclusions

This study hypothesized that school social workers who perceive a positive organizational climate for implementation of evidence-based practice, have a positive attitude towards evidence-based practice, are familiar with evidence-based practice, have regular access to supervision in which evidence-based practice is discussed, and have a smaller workload would be more likely to engage in the evidence-based practice process and utilize evidence-based practice in their work. The results show that the hypothesis is partially supported. Results support that school social workers who have a positive attitude towards evidence-based practice, are familiar with evidence-based practices, have access to supervision, and discuss evidence-based practices in supervision are more likely to be engaged in the evidence-based practice process. Results also support that school social workers with increased familiarity with evidence-based practices and access to supervision in which evidence-based practices are discussed are more likely to utilize evidence-based practices in their work. Results suggest that those with higher *Engagement* scores also had higher *Utilization* scores. Therefore, the more a school social worker engages in the evidence-based practice process, the more likely they are to utilize specific evidence-based practices in their work.

While previous studies have found that the climate of the organization for support of evidence-based practices are correlated with the worker's attitude toward evidence-based practices and the implementation of evidence-based practices (Ehrhart et al, 2014), these findings were not supported in this research. The implementation climate of the school setting did not have a significant influence on the degree of either engagement in EBP process or utilization of evidence-based practices.

Workload also was not found to explain the degree of engagement in the EBP process or utilization of evidence-based practices. School social workers on average spent about 89% of their work week engaged in direct practice to students, parents/families, teachers, or attending required meetings. This left 11% of the week dedicated to professional development opportunities and other duties.

The variables in the study explain 43% of the variance for engagement in the EBP process and 13% of the variance for utilization of evidence-based practices. This demonstrates that there are other key factors that were not included in the study that would particularly enhance explaining the utilization of evidence-based practices. Additional variables should be explored in future research.

### **Engagement in EBP Process**

This study provides the first quantitative look at what factors increase the rate of engagement by school social workers in the use of the evidence-based practice as a process in the school setting. Engagement in the evidence-based practice process examined the respondent's frequency of examining research evidence to help guide their practice decisions and evaluating their own practice. Overall, respondents showed engagement in evidence-based practice process some of the time. The results from this study support prior research in the field, showing that while the expectations for evidence-based practice are established by both the SSWAA practice model and federal regulations, the majority of school social workers are not consistently engaged with evidence-based practices (Kelly et al, 2016).

As a whole, results indicate low rates of engagement by school social workers in the evidence-based practice process. As noted in prior studies, the Internet continues to be a source

that school social workers turn to for access to research about evidence-based practices. Results also support similar findings that school social workers are utilizing progress monitoring at least some of the time (Kelly et al, 2016). This demonstrates that school social workers are searching for ways to access evidence-based practice and are attempting to engage in the evidence-based process of monitoring effectiveness of their interventions, although not consistently.

### *Engagement and familiarity*

Results show that higher rates of familiarity with evidence-based practices is significantly related to the degree of engagement in the evidence-based practice process. This indicates a need to focus on the education and training of school social workers, specifically in the area of evidence-based practices. The more information they receive, the more likely they are to engage in the process. For school social workers, this means providing specific information on how to utilize evidence-based practices in the school setting. As found in this study as well as prior school social worker studies, school social workers are commonly looking to Internet sources in order to gain access to evidence-based practices (Kelly et al, 2016). The findings from this investigation build upon previous research by Avant and Lindsey (2015) and Phillippo et al (2017) that highlighted school social workers reporting access to finding research and ways to monitor progress as barriers in their implementation of evidence-based practices. The more that school social workers understand how to access and utilize the research, the more likely they are to engage in the process. As there are online databases such as the “Center for MH in Schools and Student/Learning Supports” (n.d) and “School Social Work Network” (n.d), specific to school social workers and mental health professionals for information on evidence-based

practices, there needs to be further efforts to get information regarding these resources to school social workers in the field.

Nearly 30% (29.18%) of respondents noted that their school or district does not provide any access to evidence-based practice training materials, journals, etc. While three quarters of social workers (75.6%) noted previous training in evidence-based practices, providing ongoing support and training in not only where to access current research, but also how to incorporate the research into their practice decisions and how to evaluate those outcomes with more consistency will potentially improve engagement in the EBP process. Trainings specific to what the evidence-based process looks like within the school setting would likely help to increase school social worker's familiarity with best practices and therefore increase engagement.

### *Engagement and attitude*

School social workers showed an overall positive attitude towards the evidence-based practice process. Eighty-four percent of respondents agreed that the use of evidence-based practices helps to improve students' outcomes. These results support previous findings from Bates (2006) that social workers understand the importance and value of evidence-based practices. It shows that there is not a feeling of ambivalence as found by Isaksson and Sjoström (2017) in their qualitative research regarding school social workers attitudes toward the idea of manual-based evidence-based practices. While the results indicate an overall positive attitude towards EBPs, it is important that the full process of evidence-based practices needs to be discussed and encouraged in the training of school social workers. This means describing how evidence-based practice process is more than manualized work and can have a strong impact on the effectiveness of work the school social workers can implement.

*Engagement and supervision*

Access to supervision and the discussion of evidence-based practices in supervision are positively associated with an increase in the degree of engagement in the evidence-based practice process. Only a small percentage of respondents had access to supervision at least once a week (16.43%). Results from this study support prior investigations which highlight the low rates of supervision available to school social workers (Teasley et al, 2012; Richard & Villarreal Sosa, 2014; Avant & Lindsey, 2015; Kelly et al, 2015; Kelly et al, 2016). This study moves the field forward in that it is the first in the school social work field to investigate the relationship between supervision and evidence-based practices. It confirms previous work by Accurso et al (2011) which pointed to a lack of clinical supervision as a barrier to the implementation of evidence-based practices. Supervision is a critical aspect of the social work field. Many school social workers are the only one in their field within their school building or perhaps in the district. This makes access to a supervisor challenging, however the use of peer supervision is an option that schools and districts must consider. School social workers need to engage with others in conversations surrounding evidence-based practices and how to incorporate them into their work. School administrators can support these efforts through allocating time during the school week for these supervision groups to take place. While weekly supervision may not be feasible, increasing supervision opportunities to at least once a month will increase the rate of engagement in these practices. As results suggest, the more frequently respondents met with their supervisors, the more likely they were to discuss evidence-based practices.

### **Utilization of Evidence-Based Practices**

Beyond engagement in the evidence-based practice process, this study is the first to quantitatively examine rates of utilization of specific evidence-based practices by school social workers. The listed interventions included evidence-based practices at a variety of levels both in direct service to students and families, as well as in providing training to school staff in research-based strategies that could be implemented. The results show that school social workers use some evidence-based practices more frequently than others. Cognitive-behavioral therapy, trauma-focused cognitive-behavioral therapy, solution focused brief therapy, and motivational interviewing were the most frequently used interventions among study participants. Prolonged exposure, dialectical behavioral therapy, and multi-systemic therapy were the least frequently utilized interventions. The training by school social workers of other staff within the building on research-based strategies that could be implemented was also rarely utilized while implementation of school-wide researched based social emotional learning curriculum was utilized on average some of the time. Although previous research identified these primary intervention areas as important to the school social worker role (Kelly et al, 2010; Sabatino et al, 2013; Avant & Lindsey, 2015; Kelly et al, 2015; Kelly et al, 2016), results in this study are additional support for prior evidence that frequency rates remain low (Kelly et al 2010; Kelly et al 2015). The strongest positive association was between familiarity with evidence-based practices and utilization of evidence-based practices. Discussion of evidence-based practices in supervision was also positively related to the degree of utilization of evidence-based practices. This highlights a need to look further at the training and resources available to school social workers in order to increase their familiarity of the specific evidence-based practices. Given the range of implementation rates, a focus on lesser utilized practices should be explored by schools

of social work as well as supervisors of school social workers. In particular, additional training to increase school social workers' familiarity with preventative services in the school setting must be an ongoing focus in both education and supervision.

### *Utilization and familiarity*

Familiarity with evidence-based practices was found to increase the frequency of utilization of specific evidence-based practices by school social workers. The more education and training one has with regard to individual interventions, the more likely they are to use those interventions in their work. This is a key finding that offers support for ongoing educational opportunities and trainings for school social workers in specific evidence-based interventions and the populations for whom they are most effective. While preventative work is found to be effective in the school setting, there is limited training for social workers in how to engage in these tasks prior to their employment in the field. Exposure to school-wide social emotional learning must be included in the curriculum for social work students who would like to work in a school setting. Social work students must also gain training in how to effectively communicate strategies that may benefit clients to professionals from other fields. While school social workers are in a non-clinical setting, their background and expertise in addressing individual and systemic issues within the school setting must be highlighted as an essential aspect of the job. With knowledge of systems theory and behavioral interventions, a social worker is highly trained in how to address many of the social, emotional, and behavioral needs identified in the school setting. With the education and knowledge of how to conduct such trainings, social workers will likely increase the frequency of utilizing this practice in the field.

*Utilization and EBP Supervision*

Clinical supervision is critical for the carry over of skills into daily practice. While access to supervision alone was not correlated with higher rates of utilization of evidence-based practices, discussion of evidence-based practices in supervision was positively correlated. This means that simply having access to supervision is not enough. The supervision needs to consist of ongoing discussion related to evidence-based practices, including how research can guide practice decisions and how to monitor progress. This further supports findings from Phillipppo et al (2017) that peer consultation may be a more supportive-base rather than a focus on particular learning and clinical feedback. As administrators look at increasing supervision for school social workers, there needs to also be an expectation that the supervision is used as a time to look at various aspects of evidence-based practice. In particular, this supervision can focus on the use of relevant research to specific cases, discussion of how to incorporate evidence-based interventions in their work, and how to monitor effectiveness of interventions.

**Implications for Practice**

This study expands the literature on the use of evidence-based practices in the school social work setting. As these research findings indicate, familiarity of evidence-based practices, supervision, discussion of evidence-based practice in supervision, and attitude towards evidence-based practices are positively related to the degree of engagement in the evidence-based practice process. Familiarity of evidence-based practices and discussion of evidence-based practices in supervision were positively correlated with utilization of evidence-based practices. These are important factors for school administrators, policy makers, and school social work supervisors to

examine when wanting to increase the use of evidence-based practices to support the mental and emotional well-being of students.

School districts and policy makers with goals to increase engagement in EBPs and utilization of EBPs, need to consider ways to increase school social worker's familiarity with evidence-based practices. Continued training on the steps of the EBP process, how to understand research evidence, and how to evaluate outcomes of practice are areas that warrant continued focus. It's helpful that over 75% of respondents noted that they did have training in EBP, with just over 40% receiving training about EBP in their undergraduate or graduate social work curriculum. Over half (57.5%) of respondents reported participating in continuing education courses related to EBP training.

School administration should consider the use of professional development time and other staff development opportunities to discuss and help familiarize school social workers with the process of using research in their practice and how to evaluate that research. There are free resources available online regarding the use of EBPs in the school setting such as the "Center for MH in Schools and Student/Learning Supports" (n.d) and "School Social Work Network" (n.d). Allowing professional development time to be dedicated to accessing and discussing these databases will potentially increase the familiarity and therefore engagement with and utilization of EBP without an additional cost to the district or school. As demonstrated by the research, increasing that level of familiarity with the process will increase the social worker's engagement in both the process of EBP and in utilization of specific evidence-based practices. The more familiar a social worker is with EBP, the more likely they are to use it according to this study.

Access to supervision is another area that requires investigation by school districts and educational policy makers. As noted earlier, the more frequently respondents met with their

supervisors, the more likely they were to discuss evidence-based practices. The discussion of evidence-based practices in supervision was positively correlated with both engagement in the evidence-based practice process and utilization of evidence-based practices. With nearly half (46.9%) of respondents identifying that they meet with a supervisor in their district to discuss cases and interventions never or just once a year, more of a focus needs to be placed on ways to incorporate supervision into the role of a school social worker. On a positive note nearly 75% of respondents (74.9%) meet with other mental health providers in their district to discuss cases and interventions at least once a month or more frequently. School social workers must use current research to advocate for access to supervision in their school or district. Discussion should focus on the value of supervision and how it will potentially allow for districts and schools to reach their goal of providing evidence-based support for school-based mental health and social emotional learning for students. The use of peer supervision does not cost the district any additional funds other than allowing one hour per month for members of the group to meet. According to the research, the potential benefits highly outweigh the costs. Establishing at minimum, monthly supervision with a supervisor or peer supervision groups within a district is likely to increase the use discussion of evidence-based practices which is likely to increase engagement in the EBP process and utilization of EBPs. The lack of access to supervision is a barrier to school social workers engaging in the evidence-based practice process.

Colleges and universities should consider ways in which social work students who desire employment in the school setting need to receive training specific to the setting. One way for this to be accomplished would be to establish setting-based field practicum seminar groups, as the research shows low rates of supervision once in the field. Students learning about specific evidence-based practices applicable to the school setting has the potential for increased

engagement and utilization of EBPs once working in the field. Such educational instruction needs to include explicit instruction in utilizing interventions in a multi-tiered model that are evidence-based.

### **Limitations and Strengths**

This study includes a large sample size of 426 school social workers from a variety of school settings and locations. All respondents completed the survey voluntarily. A limitation of the study is that the data collected is self-reported by those electing to participate in the survey and there is the possibility that respondents may respond in a socially desirable way. The measures in this study were quite strong. While the explained variance for utilization of evidence-based practices was relatively low (13%), the explained variance for engagement in the evidence-based practice process was strong (43%). As there is no central list of all employed school social workers, there may be missing participants that would provide additional or different perspectives on this same topic. However, as there was at least one respondent from every state in the United States, the study does provide perspectives from school locations throughout the United States, as well as from both private and public school settings.

While this study is not generalizable to all school social workers, it does provide insight for school social workers as to potential gaps or supports missing in school settings for which they can advocate to best align their role with the National Model of Practice and engage in evidence-based practices as required by the Every Student Succeeds Act (P.L. 114-95). As school social workers provide services to a variety of ages and populations, there is not one conclusive list of evidence-based practices that school social workers should implement. The evidence-based practices listed in the research are general and some may apply more readily to

the school setting than others. However, this is the first nationwide school social work survey that examined both engagement in evidence-based practice process and the implementation rates of specific evidence-based practices which are applicable in the school setting.

### **Future Research**

Future research may explore further the relationship between the educational background of a school social worker's supervisor and the correlation to the discussion of evidence-based practices. Research may also employ a randomized controlled trial design in relation to the use of supervision by assigning school social workers to different types of supervision and assess the impact on utilization of evidence-based practices. Additional randomized controlled trials should be considered, such as assigning school social workers to groups with a variety of ways to increase familiarity of evidence-based practices, including providing training and access to materials related to evidence-based practices to school social workers to determine impact on both engagement in the evidence-based practice process and utilization of evidence-based practices.

Future research may also examine other variables that conceivably can account for more of the variance in the utilization of evidence-based practices. These variables may include specific organizational factors for preventative services, such as time to provide staff training and administrative views on the role of the school social worker, and knowledge of how to utilize specific evidence-based practices. Further research may also examine which EBPs are most applicable specifically to the school setting.

**Conclusion**

There are an estimated 55.6 million children attending public and private schools throughout the United States (National Center for Education Statistics, 2016). School social workers are the frontline interventionists for children's mental health and therefore need to be not only informed of the current evidence-based practices in the field, but also be implementing those interventions. This research study shows that despite calls from the National School Social Work Practice Model created by the School Social Work Association of America and the Every Student Succeeds Act (ESSA) (P.L. 114-95) established by the federal government to be utilizing evidence-based practice, school social workers engage in the evidence-based practice process and utilize specific evidence-based practices, on average, only "some of the time." Administrators and policy makers must examine the potential facilitators and barriers that will help to increase school social workers' engagement in and utilization of evidence-based practices.

There is a need for increased training in and access to evidence-based practice information. Professional development opportunities need to focus on how school social workers can become involved in evaluating their own practice, finding relevant research, and understanding how to evaluate the strength of available research to help guide their practice decisions. Access to research and evidence-based practice guidelines need to be made available through the school system. This can be done through encouraging participation in professional learning communities (PLC) specific to school social workers. This includes forming PLCs that span more than one district for those who work in more isolated settings. School social work organizations should also focus their efforts on getting more information about evidence-based practices into the hands of currently employed school social workers in ways that are meaningful

and easy to incorporate into their daily work. Research briefs would be an effective method of ensuring current information about evidence-based practices are shared with those working in the field. Schools of social work must also look at the coursework that provides social work students with information specific to work in the school setting. This includes specifics in how evidence-based practices fit within the school setting, including the preventative and training work that can and should be done school-wide.

There must also be a focus on increasing the rate of supervision given to school social workers, either through individual supervision or through the use of peer supervision groups. Supervision is essential in the field of social work. Although working in a non-clinical setting, school social workers are expected to provide clinical evidence-based services to students and families, as well as staff. While some school social workers may develop informal supports in the school setting from colleagues, there is a distinct difference between a supportive group and one that is focused on learning and practice in the field. The ongoing support of supervision, with a focus on evidence-based practices, has the potential to increase rates of engagement in and utilization of evidence-based practices.

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**APPENDIX- Survey**

University of Pennsylvania, School of Social Policy and Practice  
Informed Consent Form

Investigator: Maureen Rosenplanter, LICSW, mrosenp@sp2.upenn.edu

**Informed Consent:**

You are being asked to participate in a research study. This is not a form of treatment or therapy. Your participation in the study is voluntary, meaning that you can choose whether or not to participate, and you may discontinue your participation at any point by exiting the survey. There is no penalty for choosing not to participate in the study or for choosing to discontinue participation. You are unlikely to benefit from this study in any way other than knowing that you have contributed to knowledge about school social work practice. Information gained from this study may benefit other school social workers, as districts and social workers may improve their services and environmental support based on the findings of this study.

**What is the purpose of the study?**

The purpose of the study is to learn more about the use of evidence-based practice implementation by social workers in the school setting.

**How long will I be in the study?**

The study is an online survey and should take approximately 15-20 minutes to complete. This is a one time survey with no additional components.

**What will I be asked to do?**

You will be asked some demographic information and then will be asked to complete a series of items by clicking on the response option that most closely corresponds to what is accurate for you. These items will be related to your familiarity of evidence-based practices, use of common evidence-based practices, the push for the use of evidence-based practices in your school, workload, and access to supervision in the school setting.

**What are the risks?**

There are minimal foreseeable risks to this survey. Your participation in the survey is voluntary and no identifying information is asked. The survey responses are totally anonymous. Results of this study will be published, but all data will be reported in aggregate form and there is no way that you can be identified.

**Will I be paid for being in this study?**

If you complete this survey, you may enter your email address for a chance to win one of four \$25 Amazon gift cards. Your email address is entered after the survey is completed and is delinked from your survey responses.

**By clicking “I agree” below, you are indicating that you have read, understood, and agreed to the information provided above. You are also indicating that you are currently employed as a school social worker with at least one full year of experience in the school setting and**

**have a Bachelor's Degree, or higher, in Social Work. If any of these items are not true for you, please discontinue participation in the study at this time.**

I agree

### **School Demographic Information**

I work for a (choose one):

Public School System

Charter School

Private School

Other (please specify)

The school I work at is located in a (choose one):

Urban Setting

Suburban Setting

Rural Setting

The grade levels I work with include (choose all that apply):

Pre-K

Elementary School

Middle School

High School

Other (please specify)

The total number of students enrolled at the school(s) I serve: \_\_\_\_\_

My school is located in:

\*Drop down with States listed

**Respondent Demographic Information**

Highest level of Social Work Education (choose one):

Bachelor's degree in social work completed

Master's degree in social work in progress

Master's degree in social work completed

Doctorate in social work in progress

Doctorate in social work completed

Sex

Female

Male

Race/ethnicity

African American

Asian/Pacific Islanders

Caucasian (non-Hispanic)

Latino/Hispanic

Native American

Multi-racial/ethnic

Other

Age: \_\_\_\_\_

Member of (choose all that apply):

NASW (National Association of Social Workers)

SSWAA (School Social Work Association of America)

Neither

How many years have you completed in your current job? \_\_\_\_\_

Including your current position, how many years of school social work practice do you have?

\_\_\_\_\_

How many years of social work practice, not in a school setting, do you have?

\_\_\_\_\_

Are you employed full-time or part-time?

\_\_\_\_\_ Full-time

\_\_\_\_\_ Part-time

Are you employed directly by the school/school district or by another community agency?

\_\_\_\_\_ School district/School

\_\_\_\_\_ Community Agency

\_\_\_\_\_ Other

Have you had any training specific to the implementation of evidence-based practices? If no, skip; If yes, please indicate what type of training you have had (check all that apply):

\_\_\_\_\_ School in-service training

\_\_\_\_\_ Continuing education credit course

\_\_\_\_\_ Included in social work curriculum

\_\_\_\_\_ Other (please specify): \_\_\_\_\_

### Familiarity with the Evidence-Based Practice (EBP) Process

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I know how to skillfully apply the steps of the EBP process.	SD	D	N	A	SA
2. I understand how to formulate questions about practice that can be answered with research evidence.	SD	D	N	A	SA
3. I feel confident in my ability to find the best research evidence to guide my practice decisions.	SD	D	N	A	SA
4. I know how to find systematic reviews.	SD	D	N	A	SA
5. I understand how to appraise the research evidence pertaining to my practice question.	SD	D	N	A	SA
6. I can differentiate between very weak evidence and very strong evidence.	SD	D	N	A	SA
7. I know what factors to consider in addition to the research evidence when making practice decisions.	SD	D	N	A	SA
8. I understand how to evaluate the outcomes of my practice decisions.	SD	D	N	A	SA
9. I understand what is meant by the term research-based practice guidelines.	SD	D	N	A	SA
10. I know how to use the Internet to facilitate my search for research evidence.	SD	D	N	A	SA

### Attitudes About the Evidence-Based Practice (EBP) Process

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. EBP is nothing more than a way to cut treatment costs.	SD	D	N	A	SA
2. EBP helps improve students' outcomes.	SD	D	N	A	SA
3. Engaging in EBP hinders the use of practitioner judgment.	SD	D	N	A	SA

4. Practitioners who engage in the EBP process show greater concern for student well-being than practitioners who do not engage in EBP.	SD	D	N	A	SA
5. Engaging in the EBP process makes practice too mechanistic.	SD	D	N	A	SA
6. The EBP process allows enough room for considering unique student circumstances or preferences.	SD	D	N	A	SA
7. The judgment of esteemed colleagues or supervisors offers a better basis than research evidence for improving practice.	SD	D	N	A	SA
8. EBP helps students meet their goals.	SD	D	N	A	SA
9. Engaging in the EBP process hinders the practitioner-student relationship.	SD	D	N	A	SA
10. Trying to engage in EBP is more ethical than refusing to engage in it.	SD	D	N	A	SA
11. I know what is best for my students without examining the research evidence.	SD	D	N	A	SA
12. Experienced practitioners should disregard research evidence when it conflicts with their intuition.	SD	D	N	A	SA
13. Engaging in the EBP process will improve one's practice.	SD	D	N	A	SA
14. Engaging in the EBP process means using interventions that won't apply to the kinds of students I see.	SD	D	N	A	SA

**Engagement in the EBP process**

Statement	Never	Rarely	Some of the time	Often	Very Often
1. I use the Internet to search for the best research evidence to guide my practice decisions.	1	2	3	4	5
2. I read about research evidence to guide my practice decisions.	1	2	3	4	5

3. I read research-based practice guidelines to guide my practice decisions.	1	2	3	4	5
4. I rely on research evidence as the best guide for making practice decisions.	1	2	3	4	5
5. I inform students of the degree of research evidence supporting alternative intervention options.	1	2	3	4	5
6. I involve students in deciding whether they will receive an intervention supported by the research evidence.	1	2	3	4	5
7. I evaluate the outcomes of my practice decisions.	1	2	3	4	5
8. I engage in all steps of the EBP process.	1	2	3	4	5

**Utilization of Evidence-Based Practice**

Rate in terms of how often you use each of these practices in your work in the school setting.

Statement	Never	Rarely	Some of the time	Often	Very Often
1. I use data collection to monitor progress in response to interventions.	1	2	3	4	5
2. I use a curriculum/manual for interventions that is research-based.	1	2	3	4	5
3. I use cognitive behavioral therapy techniques.	1	2	3	4	5
4. I use trauma-focused cognitive-behavioral therapy.	1	2	3	4	5
5. I use prolonged exposure therapy.	1	2	3	4	5
6. I use multisystemic therapy.	1	2	3	4	5
7. I use motivational interviewing.	1	2	3	4	5
8. I use dialectical behavioral therapy.	1	2	3	4	5
9. I use solution-focused brief therapy.	1	2	3	4	5
10. I am involved in the implementation of a school-wide social-emotional curriculum that is research-based.	1	2	3	4	5
11. I provide trainings for school staff on research-based strategies that can be	1	2	3	4	5

implemented in the school setting.					
12. Other (please list)*	1	2	3	4	5

\* List other evidence-based technique used and select frequency of use.

### Implementation Climate Scale

Statement	Not at all	Slight extent	Moderate extent	Great extent	Very great extent
1. One of the district's/school's main goals is to use evidence-based practices effectively.	1	2	3	4	5
2. People in this district/school think that the implementation of evidence-based practices is important.	1	2	3	4	5
3. Using evidence-based practice is a top priority in this district/school.	1	2	3	4	5
4. This district/school provides access to conferences, workshops, or seminars focusing on evidence-based practices.	1	2	3	4	5
5. This district/school provides evidence-based practice trainings or in-services.	1	2	3	4	5
6. This district/school provides evidence-based practice trainings materials, journals, etc.	1	2	3	4	5

### Supervision

Statement	Never	At least once a year	At least two times a year	At least once a month	At least once a week
1. I meet with a supervisor in the school district to discuss my cases and interventions.	1	2	3	4	5
2. I meet with other school mental health providers in the school/district to discuss my cases and interventions.	1	2	3	4	5
3. I meet with a supervisor outside of the school district to discuss my cases and interventions.	1	2	3	4	5
4. The use of evidence-based practices is discussed in supervision.	1	2	3	4	5

Which of the following best describes the educational background of your supervisor? (Choose all that apply)

\_\_\_\_\_ Social Work

\_\_\_\_\_ Education

\_\_\_\_\_ School Psychology

\_\_\_\_\_ Other (please list)

\_\_\_\_\_ Other Mental Health/Counseling

\_\_\_\_\_ No immediate supervisor

### **Workload**

On average, how many hours in a typical week are you paid to work (Only hours you are contracted or scheduled to work, not hours you may spend after the school day)? \_\_\_\_\_

On average, how many hours in a typical week do you provide direct services to individual students? \_\_\_\_\_

On average, how many hours in a typical week do you provide direct services to students in small groups? \_\_\_\_\_

On average, how many hours in a typical week do you provide direct services to students in a large group as part of a classroom intervention? \_\_\_\_\_

On average, how many hours in a typical week do you provide direct services to teachers/staff(consultation, collaboration, training)? \_\_\_\_\_

On average, how many hours in a typical week do you provide direct services to parents/guardians/families (consultation, training, phone calls) for in a typical week? \_\_\_\_\_

On average, how many hours in a typical week do you spend attending building meetings (IEP, 504, Child Study, Student Intervention Teams, etc)? \_\_\_\_\_

On average, how many hours in a typical week do you engage in professional development (trainings, workshops, reading journals, supervision, etc)? \_\_\_\_\_

What other activities do you do that were not captured and for how many hours in a typical week do you spend on those activities? \_\_\_\_\_

Thank you for participating in this study.

**APPENDIX- Recruitment Letters****Letter to be emailed to School Social Workers**

Hello, my name is Maureen Rosenplanter. I am a public school social worker in Massachusetts and also a graduate student enrolled in the Doctorate in Clinical Social Work Program at the University of Pennsylvania.

I am reaching out to request your participation in my dissertation research study on the implementation of evidence-based practices by school social workers. Participants must be currently employed as a school social worker, having completed at least one full year of experience in the school setting, and have a Bachelor's degree or higher in Social Work.

Involvement in this research study includes completing an anonymous online survey regarding familiarity with evidence-based practices, organizational climate, access to supervision, workload, and use of evidence-based practices. The survey will take approximately 15-20 minutes to complete. You may reach the survey by clicking on the link below:

<insert link>

Whether or not you choose to participate, please forward this email to any of your colleagues whom you think qualify for this study.

If you have any questions or concerns, I can be reached by telephone at 978-621-4844 or by email at [mrosenp@sp2.upenn.edu](mailto:mrosenp@sp2.upenn.edu).

Thank you for your participation!

Maureen Rosenplanter, LICSW

### **Letter to be Emailed to Organizations**

Hello, my name is Maureen Rosenplanter. I am a public school social worker in Massachusetts and also a graduate student enrolled in the Doctorate in Clinical Social Work Program at the University of Pennsylvania. I am currently a member of NASW and the School Social Work Association of America.

I am reaching out to request your assistance with recruiting participants for my dissertation research study on the implementation of evidence-based practices by school social workers with members of your organization. Participants must be currently employed as a school social worker, have completed at least one full year of experience in the school setting, and have a Bachelor's degree or higher in Social Work.

Involvement in this research study includes completing an anonymous online survey regarding familiarity with evidence-based practices, organizational climate, access to supervision, workload, and use of evidence-based practices. The survey will take approximately 15-20 minutes to complete. Participants may access the survey with the link below:

<insert link>

If you have any questions or concerns, I can be reached by telephone at 978-621-4844 or by email at [mrosenp@sp2.upenn.edu](mailto:mrosenp@sp2.upenn.edu).

Thank you for your assistance!

Maureen Rosenplanter, LICSW