# Educator Perspectives of a School-University Partnership for Mental Health

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ABSTRACT: School-university partnerships (SUPs) have been used for decades to address a variety of university and k-12 school needs, including teacher training and research (Allen et al., 2013; Bebas, 2016; Walsh & Backe, 2013). While beneficial, their use in other areas such as school-based mental health services have largely been neglected. Additionally, research on SUPs has traditionally focused on university partners' perspectives of the partnership, with k-12 educator ideas remaining relatively unexamined (Coburn & Penuel, 2016). Using semi-structured interviews, the current study investigates educators' views of a SUP for supporting student mental health. Results of the study indicate educators in a Midwestern school district believe a partnership for mental health to be beneficial but have concerns related to longevity of the partnership. In addition, participants expect support for students, families, school staff, and the school as an outcome of the partnership. Implications for practice and directions for future research are discussed.

#### NAPDS Essentials

Essential 3: Professional Learning and Leading

Essential 4: Reflection and Innovation

Essential 8: Boundary-Spanning Roles

Essential 9: Resources and Recognition

School-university partnerships (SUPs) have the potential to address a broad array of needs including enhancing pre-service teacher training (Allen et al., 2013; Bebas, 2016) and educational practices such as literacy (Peters et al., 2018), science education (Smith & Trexler, 2006), college readiness for high school students (MacDonald & Dorr, nd), and Response to Intervention (Edl et al., 2009). Despite the potential breadth of partnerships, most SUPs focus on one of three areas-teacher training and development, development and evaluation of teaching practices and strategies, and service learning-and are often situated in urban environments with a goal of closing the achievement gap (Walsh & Backe, 2013). While these areas are important, other aspects of research to practice, such as schoolbased mental health (SBMH) services (Hooper & Britnell, 2012; Short et al., 2012), and training for non-teaching professionals (e.g., school psychologists) remain sparsely examined (Whitcomb et al., 2021).

#### Current Status and Gaps in the Research of SUPs

SUPs have only recently begun attempting to meet schools' needs rather than having partnerships driven by the needs of the university (Walsh & Backe, 2013). While SUPs vary based upon setting, needs, and often evolve over time, the ultimate goal for a SUP is engagement of a collaborative partnership between a

school district and university in which mutual trust, a shared vision, and reliability are the foundation (Causton-Theoharis et al., 2011). While these components are the ideal, SUPs often fall short of reaching these goals for a variety of reasons.

Walsh and Backe (2013) outline some challenges present in the successful engagement of a SUP. First, school districts and universities operate under different structures and cultures. Second, university researchers may want to focus on specific or narrow research agendas whereas a school district may be looking to examine an idea outside the realm of expertise or of little interest to the researchers. Further, researchers may often fail to "give back" to the schools in terms of sharing data and outcomes related to the topic of study (Hooper & Britnell, 2012). Additionally, because university researchers are often "offsite" and external to the educational setting being studied, the pace at which the research study is implemented or evaluated may take place slower than what educators expect (Walsh & Backe, 2013).

An important component of evaluating a SUP is to gather perspectives related to those working within a partnership. Trent and Lim (2010) found some teachers felt marginalized and unable to fully engage in the process set forth by the partnership. The university consultant, in this instance, was viewed as an outsider, and ultimately, the teachers voiced that the partnership was deemed a "waste" and a failure (Trent & Lim, 2010).

Indeed, even when some teachers are in support of the SUP, those who are not can contribute to a negative environment related to the work, thus posing a barrier to successful implementation (Causton-Theoharis et al., 2011). Other perspectives highlight the challenges presented in engaging in a training model where turnover of trainees is frequent or university-affiliated personnel share information or ideas that are not practical to implement in the school-based educational setting (Whitcomb et al., 2021).

To date, there is a dearth of literature examining school staff's perspectives related to SUPs. Most research literature shares the perspectives of the "U" in the SUP relationship-the researchers themselves involved in the partnership, and rarely reflect the perspectives of the "S" in the SUP relationship—the schools and educators engaged in the work (Coburn & Penuel, 2016). There is also very little research examining how SUPs can support SBMH services in schools and how SUPs or professional development schools (PDSs) can reflect the training of broader school personnel beyond pre-service teachers (Whitcomb et al, 2021). Research has long demonstrated the benefit of PDSs, or schools in which university faculty work with school personnel to prepare pre-service teachers, provide professional development to current teachers, and conduct research (Dolly & Oda, 1997; Kochan, 1998). However, in addition to the limited focus on preparing current teachers, researchers have highlighted the challenges of using PDSs to focus on student mental health (Hooper & Britnell, 2012), calling for future research to explore SUPs as a context ripe for PDSs promoting mental health knowledge and trauma-informed practices amongst all teachers (Anderson et al., 2015).

#### SBMH in Schools

SBMH services have been identified as the comprehensive services delivered within a school in which the diverse array of mental health needs of children are the focus (Doll et al., 2017). While nearly 25% of youth experience some type of significant mental health need each year (Kase et al., 2017), less than 25% of students that need some type of mental health treatment actually receive it (Tyler et al., 2017). There is often a significant delay between when the time the mental health need is identified and the time treatment is actually received—some estimates indicate this may be as delayed as 10 years. However, when mental health services are provided directly in schools, nearly 80% of students who need mental health support actually receive it through school (National Association of School Psychologists [NASP], 2016; Rones & Hoagwood, 2000). Conversely, when referrals are made to community mental health centers, only 13% of individuals follow through with services (Catron et al., 1998).

Schools have been identified as a logical and natural point of entry to provide mental health services to youth (Little & Akin-Little, 2013; Overstreet & Mathews, 2011). For instance, children are accessible in that they typically attend school on a daily basis and we can educate the "whole" child—academically,

behaviorally, and socioemotionally (Little & Akin-Little, 2013). This makes for an efficient mechanism through which children can be accessed to then receive services (Fitzgerald & Cohen, 2012; Little & Akin-Little, 2013). School-based services also significantly reduce barriers associated with receiving mental health services including increasing immediate access (e.g., reducing transportation barriers, reducing a need for a caregiver to take off work to attend an appointment), reducing financial costs (i.e., school services are typically "free" services provided by trained school personnel), and offer a means of providing follow-up with students after sessions take place or treatment ends (Little & Akin-Little, 2013).

One mechanism through which these services are provided are within the context of a multi-tiered system of support (MTSS). With roots in a public health model, MTSS is a process by which increasingly intensive, evidence-based interventions are provided to individuals through a data-based decision-making process (Cook et al., 2015). Universal services (Tier 1), such as an evidence-based classroom socioemotional curriculum, are put in place to prevent concerns and a universal screening process can take place where all students are screened, in this instance, for socioemotional or behavioral concerns (Eklund et al., 2018). If students are found to be in need of services or deemed "atrisk", services are provided at increasingly intensive levels of support (Eklund et al., 2018; NASP, 2015) at targeted (Tier 2) and intensive (Tier 3) levels. NASP (2015) clearly indicates interagency collaboration is critical to the success of implementing services to support students' socioemotional and behavioral well-being through delivery of intensive mental health interventions.

Despite schools being a natural and logical mechanism for delivery of services (Little & Akin-Little, 2013), little research has been done to examine the means by which university training programs—such as social work programs, school counseling programs, and school psychology programs—can be a mechanism to providing these SBMH services across all three tiers of an MTSS framework. Further, little attention has been given to gather teacher perspectives related to delivery of SBMH services by university personnel (Coburn & Penuel, 2016; Hooper & Britnell, 2012; Whitcomb et al, 2021).

#### **Purpose**

Given the novelty of studying SUPs for SBMH (Hooper & Britnell, 2012; Short et al., 2012), and the push to provide students with mental health support in the school context (Little & Akin-Little, 2013), we aim to garner school staff perspectives on a SUP intended to disseminate SBMH services using a trauma-informed MTSS framework. Prior to implementing components of a grant-funded SUP, the researchers' goal was to examine and understand educator perspectives regarding SUPs for SBMH. We posed the following research question to guide data collection and analyses: What are educator perspectives of SUPs for SBMH?

# Context of the Current Study

The district and the university-based research team began working together in the winter of 2019 to address the district's increasing student socioemotional, behavioral, and mental health needs. In October 2019, a 5-year, \$2.5 million-dollar grant was awarded by the U.S. Department of Education, cofacilitated by the district and the university, with the central goal to develop and implement a state-of-the-art trauma-informed multi-tiered system of support (TI-MTSS) while simultaneously supporting the training and development of school psychology graduate students enrolled at the university. While the grant itself is complex and multifaceted, one aspect of the work was for the school system to implement universal screening procedures for all students to identify students in need, and for school psychology students, under the training model of a practicum placement, to implement interventions across the three tiers previously mentioned while receiving supervision from licensed school psychologists. A key feature of the grant is to create PDSs focused on trauma-informed practices. The data presented here are a subset of a larger body of data collected via one-on-one interviews as outlined below and for the purpose of gathering baseline perspectives related to mental health within the district. The appendix outlines all interview questions.

## Methods

## **Setting and Participants**

The partnership between the school and university had a historical relationship of working together to implement a Response to Intervention framework for academic support dating back to the early-mid 2000s (Edl et al., 2009). The partnership faded over time due to a change in university faculty (ending approximately 2012), and upon arrival of a new faculty member in 2017, the relationship was renewed in 2019 to address the district's increasing socioemotional, behavioral, and mental health needs. Preliminary meetings with district and school leadership indicated a shortage of mental and behavioral health support within the corporation. Thus, the district and university reestablished the working partnership, ultimately obtaining a multiyear grant to support the work. Both entities agreed to collaborate in meeting the grant objectives for the duration of the 5-year-grant, with the plan to implement a sustainable system that would outlive grant funding. Prior to the grant, and the current study taking place, the only interaction that took place was between district leadership and grant researchers. Thus, the teachers interviewed for this did not have interaction with research personnel prior to participating in the interviews.

Participants were recruited from a primary and an intermediate elementary school in a small, Midwestern school district. Each school serves approximately 600 students: the primary school services grades kindergarten through second, and the intermediate school services grades third through fifth. Both buildings combined have approximately 90 full-time staff. The

majority of the student population at both schools (~90% of students) is White and about 35% of students are eligible for free and reduced-price lunch. According to the National Center for Education Statistics (n.d.), the school meets criteria of a "suburb: midsize" and residents are generally in close proximity—about 20 to 30 minutes—to the local university.

All educators, support personnel, office and custodial staff, and administrators in both buildings were invited to participate. To protect the anonymity of participants (e.g., so few males working in the building), we did not collect gender or racial participant demographics. A total of 71 staff members participated (n = 38 staff at the primary school and n = 33staff from the intermediate school). Across both schools, staff have been working at the schools between <1 year and 37 years, with an average of 10.2 years. Total number of years in the education field ranged between <1 year and 37 years, with a mean of 13.9 years in the field. Thus, participants had sufficient background regarding the school climate, student and staff needs, and the current status of mental health supports available in the school. Of the 71 interviewees, 43.7% were classroom teachers (n = 31), 22.5% were support staff (instructional assistants, library assistant, interventionist; n = 16), 18.3% were special education staff (including licensed staff such as speech language pathologist; n = 13), 7% were related arts teachers (e.g., Art, Physical Education; n = 5), 4.2% were administrators and office support staff (n = 3), and 4.2% were building support staff (e.g., custodian, cafeteria staff; n = 3). Tables 1 and 2 include detailed data regarding respondent demographics.

[Table 1 displays Intermediate School Participant Identification Codes and Demographics]

[Table 2 displays Primary School Participant Identification Codes and Demographics]

All procedures adhered to and complied with the university's Institutional Review Board's standards and requirements for the protection of human subjects. The analysis of the data was supported by grant funding and the authors do not disclose any financial conflicts as part of this study.

#### Study Design

At the primary school, participants were solicited for participation via an email drafted by the researchers and sent by the building administrator. Participants were emailed a link to a Google sheet to sign up for a 20-minute time slot to participate in a one-on-one interview with a member of the research team. Due to COVID-19 restrictions, interviews were conducted via Zoom in Fall 2020 and audio recording took place after receiving verbal consent to participate in the study.

At the intermediate school, interviews took place one-onone in the school building during Fall 2019. The school's administrator assigned each staff member an interview slot. Upon arrival at the interview site at the designated time, participants were informed of the study and asked to provide consent. If written consent was provided, the interview was audio recorded.

Table 1. Intermediate School Participant Identification Codes and Demographic Information

		Years at	Years in		
ID	Professional Title	Study School	Education		
IT-1	3rd Grade Teacher	4	6		
IT-2	3rd Grade Teacher	37	37		
IT-3	3 <sup>rd</sup> Grade Teacher	33	33		
IT-4	4th Grade Teacher	4	5		
IT-5	4th Grade Teacher	2	7		
IT-6	4th Grade Teacher	25	28		
IT-7	4th Grade Teacher	4	10		
IT-8	4th Grade Teacher	5	16		
IT-9	5th Grade Teacher	15	15		
IT-10	5th Grade Teacher	5	15		
IT-11	5th Grade Teacher	31	31		
IT-12	High Ability Teacher	21	23		
IT-13	High Ability Teacher	2	2		
IT-14	Related Arts Teacher	31	31		
IT-15	Related Arts Teacher	2	31		
IT-16	Related Arts Teacher	2	6		
IT-17	Related Arts Teacher	8	18		
ISPED-1	Special Education Teacher	2	3		
ISPED-2	Special Education Teacher	6	1		
ISPED-3	Special Education Teacher	4	6		
ISPED-4	Special Education Teacher	11	11		
ISPED-5	Special Education Instructional Assistant	1	2		
ISPED-6	Special Education Certified Staff	17	30		
ISPED-7	Special Education Certified Staff	32	32		
ISS-1	Cafeteria Staff	2.5	10		
ISS-2	Custodian	3	9		
ISS-3	Custodian	16	16		
IAS-1	School Administrator	1	18		
IAS-2	School Office Staff	23	25		
IIA-1	Instructional Assistant	5	11		
IIA-2	Instructional Assistant	22	22		
IIA-3	Interventionist	17	23		
IIA-4	Student Support Interventionist	12	12		

Note: I = Intermediate School; T# = Teacher; IA# = Instructional Assistant (E.g., Title 1 Teacher, Instructional Aide, Reading Assistant); SPED# = Special education personnel (e.g., Special Education Teacher, School Psychologist; Speech Pathologist, Occupational Therapist, etc.); SS# = Support Staff (e.g., custodian); AS# = Administrative Staff (e.g., administrator, Instructional Coach)

Across both schools, if participants did not provide consent, interviews were still conducted as a way to gather perspectives across as many staff members as possible. While their data are not included for analysis, aggregated data for consenters and non-consenters were provided via an executive summary to each school. Data from the intermediate school were transcribed by the team of researchers. A member of the research team, other than the original transcriber, was then assigned to check the transcription for accuracy and errors were corrected. Data were then coded by the team of researchers as outlined below. Individuals not involved in data collection or transcription were then assigned the file to code to minimize bias. Data from the

Table 2. Primary School Participant Identification Codes and Demographic Information

ID	Title	Years at School	Years in Education
PT-1	Kindergarten Teacher	6	13
PT-2	Kindergarten Teacher	9	9
PT-3	2nd Grade Teacher	7	14
PT-4	1st Grade Teacher	1	7
PT-5	1st Grade Teacher	19	20
PT-6	Kindergarten Teacher	11	15
PT-7	Kindergarten Teacher	8	15
PT-8	1st Grade Teacher	5	8
PT-9	2nd Grade Teacher	18	24
PT-10	Kindergarten Teacher	1	1
PT-11	1st Grade Teacher	3	7
PT-12	Kindergarten Teacher	6	8
PT-13	Kindergarten Teacher	13	13
PT-14	Related Arts Teacher	3	5
PT-15	Kindergarten Teacher	7	7
PT-16	Kindergarten Teacher	3	13
PT-17	2nd Grade Teacher	7	7
PSPED-1	Special Education Teacher	15	15
PSPED-2	Special Education Teacher	15	15
PSPED-3	Special Education Certified Staff	22	23
PSPED-4	Special Education Certified Staff	11	11
PSPED-5	SPED Teacher	1	5
PSPED-6	SPED Teacher	12	21
PIA-1	Instructional Assistant	13	15
PIA-2	Instructional Assistant	4	15
PIA-3	Instructional Assistant	< 1	1
PIA-4	Instructional Assistant	16	16
PIA-5	Instructional Assistant	14	15
PIA-6	Instructional Assistant	1	1
PIA-7	Instructional Assistant	5	5
PIA-8	Instructional Assistant	< 1	< 1
PIA-9	Instructional Assistant	5	5
PIA-10	Instructional Assistant	16	16
PIA-11	Instructional Assistant	11	15
PIA-12	Instructional Assistant	1	6
PAS-1	Instructional Coach	9	11
PAS-2	School Administrator	13	24
unknown	unknown		unknown

Note: P = Primary School; T# = Teacher; SPED# = Special education personnel (e.g., Special Education Teacher, School Psychologist; Speech Pathologist, Occupational Therapist, etc.); IA# = Instructional Assistant (E.g., Title 1 Teacher, Instructional Aide, Reading Assistant); AS# = Administrative Staff (e.g., administrator, Instructional Coach)

primary school were transcribed using a fee-based transcription service. Data were coded using the process outlined below by a subset of researchers from the original team. Again, individuals not involved in data collection were assigned to code the transcribed files to minimize bias.

#### Research Team

The research team consisted of two school psychology professors and eight school psychology graduate students. Each team

member was affiliated with the same university's school psychology graduate program that ascribes to a social justice orientation. Researchers intended to capture the perspective of as many school staff as possible to hear from staff in diverse roles with varying degrees of experience and education, in alignment with the goals of a social justice orientation. The research team included seven members who identify as White, one who identifies as Black/African, one who identifies as Filipino/ White, and one who identifies as White/Hispanic. Six of the 10 total team members conducted participant interviews, while 9 members participated in data analysis. Including team members with different levels of experience conducting qualitative research and differing backgrounds in every step of the data collection and analyses also aligns with the teams' social justice orientation. Transcribing and coding data took place over the course of several months utilizing the data analysis procedures outlined below.

#### **Data Analysis Procedures**

Establishing Quality. The researchers used a six-phase inductive thematic analysis approach (Braun & Clarke, 2006; Castleberry & Nolen, 2018). Employing thematic analysis minimizes researcher bias in the development of themes and prioritizes participant responses over researcher's thoughts about a particular topic. The inductive nature employed ensures the themes emerged from the data since the data are not examined using pre-existing codes (Braun & Clark, 2006; Castleberry & Nolen, 2018). Despite these efforts, we acknowledge our own positionality and theoretical lenses (i.e., school psychology and education researchers guided by efforts in social justice) can impact data analysis, as suggested by Braun and Clark (2020). We aim to establish credibility and trustworthiness, key aspects of a quality qualitative study, through our use of a thick, rich description of our methods and findings, and via crystallization practices (Tracy, 2010). By using multiple data sources (i.e., school staff in a variety of positions in two different schools), across multiple points in time (i.e., interviews one year apart), and multiple researchers (i.e., 10 total researchers), we expect our findings to be valid representations of participants' experiences with SUPs. To richly describe our data analysis procedures, we explicate each step of our process in alignment with recommendations by Braun and Clark (2006).

Thematic Analysis. Phase 1 of thematic analysis involves familiarizing and immersing oneself in the data (Braun & Clarke, 2006). This step involves each researcher reading and reviewing all data to become familiar with the "depth and breadth of the content" (Braun & Clarke, 2006, p. 16). All researchers read every transcript to ensure every researcher interacted with every transcript in some capacity. Phase 2 involved generating an initial set of codes. Research team members systematically reviewed the entire data set to highlight interesting aspects of the data that may later form themes across the data (Braun & Clarke, 2006). The coders highlighted as many interesting and potential themes as possible, making sure

to keep surrounding data to not lose context (Braun & Clarke, 2006). Once the coder reviewed each of the assigned transcribed files, small subgroups of coders met to discuss each transcript to agree upon final codes.

Phase 3 of the thematic analysis process involved searching for themes. During this phase, initial analysis of codes takes place to begin initial extraction into themes. The end result of this phase is a collection of initial themes, and sub-themes as appropriate, based upon the codes developed from Phase 2, ultimately resulting in providing the researchers with a "sense of the significance of individual themes" (Braun & Clarke, 2006, p. 20). Phase 4 involves the refinement of the initial themes developed in the previous phase to tell an overall story about the data. During this phase, initial themes are modified, combined, or deleted to ensure themes are distinct from one another, and also cohesive (Braun & Clarke, 2006).

Phase 5 emphasizes defining and refining themes to tell a story that describes the data (Braun & Clarke, 2006). Phase 5 concludes with theme names that will be used in the final analysis. The final themes were tested by checking that each code fits within a given sub-theme and that the themes reflect all data from the participant interviews, ensuring the final themes fit together and tell a story about the data (Braun & Clarke, 2006). The final phase, Phase 6, is the phase in which data extracts that capture the essence of the themes are combined with an analytic narrative to tell a story about the data (Braun & Clarke, 2006). Participants from the two schools' responses to the question "Where would you like to see a partnership between [school] and [university] head?" served as the focus of our analysis. See Ormiston et al. (2021) for additional themes emerging from the analysis of other interview questions.

#### Results

Participating educators perceived a SUP for student mental health as beneficial, despite a number of concerns. Two main themes were identified across all responses: staff attitudes towards the partnership and staff expectations of the partnership. Staff identified university personnel as experts on mental health but expressed a desire for training due to the described uptick in students needing mental health support. Concerns surrounded the longevity and consistency of the partnership, along with extra pressure on school staff to support practicum students and integrate them into the school culture. The themes and conclusions drawn from the data provide an answer to our research question: What are educator perspectives of SUPs for SBMH? Table 3 includes information on the frequency of themes and sub-themes and provides a frequency count of expanded themes and sub-themes across participants. Although quantification is not the aim of this qualitative study, we describe our results according to the frequency counts listed in our tables, with "few" referencing less than 5 participants, "some" referencing between 6 and 15, "many" referring to more than 15 participants, and the "majority" indicating over half of our 71 participants sharing in a certain perspective or belief.

Table 3. Frequency of Expanded Themes and Sub-Themes Across Participants

			Theme:	Staff At	titudes	Towards	the Partne	ership		
	Primary School				Intermediate School					
	Т	SPED	IA	AS	SS	Т	SPED	IA	AS	SS
Partnership as beneficial										
Availability of support					1		1			
University student training		2		1					1	
SUP personnel as experts	1	1					2			
Mental health support	12	3			2	8			1	1
Staff professional development	5	2			2	4	1		1	1
Concerns about the partnership										
Funding		1				1	1			
University student turnover						1				
Consistency of support/ continuity of services	2	2		1		4	2	1		
Awareness of school culture							1			
Office/ personnel in the building					1		1			
. 1	Theme: Staff Expectations of the Partnership									
_	Primary School				Intermediate School					
	Т	SPED	IA	AS	SS	Т	SPED	IA	AS	SS
Systems-level support										
Establishing/ developing systems	1		1	1		2	2		1	
Prioritizing SEL	1					1				
Staff support										
Professional development	2	1			2	7			2	1
Trained personnel	9	2			1	6	4		1	2
Student support										
Trained mental health staff		3			3	5	2			2
Preventative services & earlier interventions	1				2	3				
Diversity in student support					1	1				
Family support										
Services for families						1				
Resources for families		1			2	1				
"Including" families	1								1	

Note: T = Teacher; IA = Instructional Assistant (E.g., Title 1 Teacher, Instructional Aide, Reading Assistant); SPED = Special education personnel (e.g., Special Education Teacher, School Psychologist; Speech Pathologist, Occupational Therapist, etc.); SS = Support Staff (e.g., custodian); AS = Administrative Staff (e.g., administrator, Instructional Coach)

#### Staff Attitudes Towards the Partnership

The main theme of staff attitudes towards the partnership describes participants' expressed feelings about the partnership. Participants viewed the partnership as beneficial but voiced certain concerns about continuity.

Partnership as Beneficial. Some participants viewed the partnership as a largely positive endeavor undertaken by the school (e.g., PT-9, PT-12, PT-14, IT-17, ISS-2). Positive sentiments expressed by staff included feelings of excitement and happiness about the collaboration between institutions. Some of the positive sentiments surrounded the partnership in general because of the quality of personnel (including mental health professionals and graduate students) and the possibilities they perceived to be associated with the partnership. For the intermediate school, where the partnership was still in the planning phase at the time of the interviews, these sentiments

were related to what was regarded as the potential, while the sentiments of staff in the primary school's related to their ongoing experience with the partnership, albeit in its initial stages. One special education teacher (I-SPED 2) said, "I feel like the more...[university] students that we have, the better we can meet our kids' needs...I'm excited about this potential partnering and how we're working together... Good experience for all of us!" Another participant (PT-11) stated, "I appreciate all you guys have done this year already...[to] know that we have extra resources this year."

Many school staff, mostly general education teachers, regarded the partnership as positive because of the wealth of support it could provide for both students and staff (PT-10, PT-11, PT-18, IT-3, IT-16). The partnership was perceived as beneficial for some by enabling staff to collaborate with other professionals (PSS-9, PT-9, IT-2), increasing the diversity of the

population of students receiving support, students' receptiveness to the assistance, and allowing for earlier intervention (PSS-1, IT-9, IT-13). One special education teacher (P-SPED 5) expressed satisfaction with the SUP saying, "I really like the idea of the team being able to come into the classroom and teach different techniques to students."

Further, staff members in both schools cited the increasing number of students with mental health needs, the intensity of demands currently placed on students in schools and increasing expectations of schools as the basis for their sentiments. A few staff believed mental health support for students outside school to be limited (PSS-4, ISS-2), making it important to address student needs within the school day. One instructional assistant (IIA-4) said, "...schools are just responsible for so much more...A lot of agencies can't get involved but no matter what, we are...we're expected to do so much with so little hands and...we don't turn kids away...," capturing the sentiment that schools provide comprehensive services to students, despite limited resources.

The partnership was further seen as a means to provide relief for staff. Some staff cited mental health support as an important component because of the reassurance it provided about the priority of their own mental health. For instance, one participant (PT-7) stated, "...it is amazing that we have that support available to us...even the [socioemotional leadership team] said...we could go take a break and they would take over our class. That was amazing for teachers to hear."

A few staff members also regarded the partnership as beneficial because of the location of partnership personnel on site rather than externally, which they felt would help with providing firsthand insight into student needs (PSS-3). In connection with this, participants also viewed the partnership as useful because of the opportunity to provide practical experience for university students. An instructional assistant (IIA-2) said, "We're hoping that you guys will be in here at least being able to get students...sometimes it's just all a lot of book learning...paper looks great, but then it doesn't always work that way."

Concerns About the Partnership. Despite their largely positive sentiments towards the partnership, some staff voiced concerns, sometimes based on previous experience with university partnerships. In fact, the same number of participants who viewed the partnership as beneficial, also expressed concerns. Continuity appeared to be an important consideration for some staff members in both schools, who expressed a desire for the partnership to persist beyond the availability of grant funding (PSPED-1, PT-2, IT-6). Multiple staff members seemed to view such programs as transient and were worried about the impact of discontinued funding on the partnership.

I know that the SEL [socioemotional learning] support that we have right now...is funded through a five-year grant. And I would just love for what we have now to be able to continue beyond the five years, because I feel like we are going to get used to this...So if there is a

way for that, if there's a partnership between the [university]...to help continue that beyond that grant and be able to continue those services, I think that would be wonderful. - P-SPED 4

In expressing their concern about continuity, a special education teacher (I-SPED 6) cited a previous experience where an existing partnership was discontinued because university partners seemingly lost interest in the project; thus, "...continuing is important because we've had programs come in from [University] before where they were with us for a few years and then... we were dropped."

Intermediate school staff had additional concerns surrounding continuity related to personnel. A few participants expressed worries related to the need for teacher buy-in to ensure sustainability of the partnership and the use of university students to deliver services to their students. One school staff stressed the importance of demonstrating to teachers that the partnership was beneficial for their students and career and would ease their burdens.

...I just really hope that this partnership is gonna be one that is sustainable and long lasting...there's programs that are brought into the schools and it comes from the top and they come in and they say "here, this is a new program...you're getting trained in it, teachers." And the teachers are like, "okay, here's another one, it's just going to be here for a while...it's just one thing else I have to do." Without the buy-in, there's no real understanding about why [we are] doing this...So, without that understanding and buy-in, um, it's very difficult to have a program that's sustainable because the teachers don't implement it with fidelity... - I-SPED 6.

With regards to the use of university students for providing services, some staff worried about the turnover they associated with this population. A few staff members were concerned about the impact of continued changes in personnel on the ability to form relationships with students (IT-17). Concern was also expressed, by a few, about the level of expertise of the university students to be provided by the partnership (ISPED-6). Additionally, staff voiced frustration about having to take away from their lesson preparation time when paired with students who were not knowledgeable. A general education teacher (IT-7) expressed a desire for "students that either have experience or, um, people that oversee the students…Because the whole point is to try to make it easier."

#### Staff Expectations of the Partnership

The main theme of staff expectations of the partnership illustrates tangible and intangible elements expressed by participants as desired outcomes of the partnership. When asked about their vision for the partnership, many school staff

agreed on the need for various levels of support within and outside of school. In particular, different school staff wanted support for students, staff, and families, as well as systems-wide support. At the systems level, some participants from each school expected the partnership to provide a model of student mental health support that could be continued beyond the partnership's duration. They expressed desires for a school-wide system that established procedures for identifying and providing services for students with mental health needs, provided consistent terminology and curricula that could be used across the schools, and increased coordination among staff members (PSPED-4, PT12, IT13). This sentiment was captured by an administrative staff member (IAS-1), "I think it's just...getting the knowledge and, um getting a system in place."

When reflecting on the MTSS that was beginning to be implemented, an instructional assistant (PIA-11) imagined a model similar to the response to intervention (RTI) system for student academic support would be beneficial for meeting these needs: "...I like the idea of having, like, an RTI model in place for behavior. I think that's something that's really needed." Related to the model, a few staff wanted partnership personnel that were integrated into the school (PSS-3). A couple staff members wished for partnership personnel to have a stationary location within the building where they could consistently be found when staff had questions. To that point, a general education teacher (IT-5) noted, "It would be wonderful if there were people in the building...just having somebody that's always there [be]cause we don't..." Additionally, one staff member (I-SPED 6) specifically wanted university students who came into their building as partnership personnel to learn the culture of the school, including ideal times to approach staff, to increase their utility within the building: "...I think it's important...when you guys come into this school that um you become a part of our school and learn about our school culture..."

At the staff and student level, participants primarily communicated expectations of the partnership providing trained mental health personnel as a means of support. The availability of trained mental health personnel was viewed as a way to grant relief to existing school staff by some participants, who they felt were overextended from having to play multiple roles in their work with students while meeting academic accountability standards (PT-16, PSS-6, ISPED-1). Many staff members across schools and roles expected having trained mental health personnel available to help with addressing the needs of the increasing number of students with mental health needs, while removing the onus of meeting those needs from them.

It's knowledge and human resource, of just people to take on that task. When I'm trying to get somebody to learn how to read who's behind or someone who just has no number sense and we're worried just about the academic, it is kind of another layer of stress to take on their social emotional [socioemotional]. We really do

feel like parents. We're trying to be everything to these kids, because we love them. But it's draining. - PT-9

Related to relief for staff through trained mental health personnel, one general education teacher (IT-16) expressed a desire for mental health support for school staff, "...teachers are some of those people that just shove their own feelings so deep down to focus on everyone else and I just think it would be helpful to have staff outreach as well..."

Trained mental health personnel were also viewed as a resource for collaboration. Some school staff expected to partner with mental health personnel to enhance their own socioemotional-related work with students (PSS-9, ISS-1, IT-6). This included desires for assistance with generating ideas for activities and lessons, speaking to students with complex needs, and teaching socioemotional lessons. Additionally, teachers expressed desires for collaboration between university students and existing school mental health staff in supporting students, as well as university student presence in the classroom. These expectations were based on a seeming awareness of what was feasible regarding the presence of mental health staff within the classroom and a desire to extend the support students receive outside, into the classroom. A general education teacher (IT-2) suggested the SUP "get as many people as possible here and then even work with us, the teachers... to expand, especially let's say if a child has been seeing someone...what can we do then, to bring it back...and keep that going..."

For students, many school staff, including general and special education teachers, expected having readily available mental health personnel through the partnership to aid in increasing access to resources across settings. Citing the growing number of students with needs, many staff members expected this improved access to occur through direct services such as interventions, counseling, and mentorship programs for individuals and groups, through which they believed students could be taught skills for identifying and coping with their emotions (IT-10). A few staff also expected mental health personnel to provide resources students could use outside school and improve students' awareness of the availability of resources in general (PT-12). Some staff members at each school anticipated the availability of mental health personnel would result in students receiving earlier interventions and more preventative services. Additionally, staff expected mental health personnel to aid with increasing the consistency of student support across the school and throughout students' tenure.

I would love to have a school psychologist just stationed in our building because it's so big. Because like we stretch them across. So, if we had one that was consistent that, I mean, those kids can get their minutes— their therapy minutes instead of, oh, I'm going to— they're going to meet with them once every

two weeks or something. Something that was more consistent. I think that would be amazing. - P-SPED 1

Other support desired at the staff level related to training. A few staff members viewed university personnel as the "experts" on mental health (PT-16, ISPED-1). Participants who were interviewed felt they were not sufficiently equipped to respond to students' mental health needs, despite their best efforts. For example, one teacher (PT-15) said, "...I still think it would be like you guys are the experts in that...We know the classrooms side really well...the psychologists know the other side really well..." Some staff also wanted to know how to recognize concerning behaviors and how to intervene or respond (PT-2, IT-1, IT-2, IT-10). Training was viewed as a means of acquiring tools for teaching students and increasing confidence in their response. Staff also regarded training as a way to improve consistency in their delivery of mental health support and to enhance their awareness of available mental health resources within their schools. One special education teacher (P-SPED 1) indicated, "...it would be great for the [university] to provide professional development for the teachers... since we are kind of that first contact."

At the family level, a few staff wanted psychoeducation and resources for parents on how to parent more consistently as well as how to support their children (PSS-11), with the aim of increasing consistency across settings. An administrative staff member (IAS-1) suggested, "there's a lot of things we can do here but the kid's only here for, you know, seven to eight hours so...getting parents resources to...kind of follow through with like what's trying to happen in school at home." A couple staff members believed some of the problems students had at school were likely caused or exacerbated by their home life (PT-1). They felt some students struggled because of what they were exposed to at home or due to unstable home lives, "...kids are acting out because of what they're seeing at home" (PT-6). Therefore, a few staff members hoped the partnership would include families by assessing families' mental health needs and providing services for parents such as parenting groups, addiction counseling, and anger management (PT-2).

Overall, staff's expectations of the partnership appear indicative of their recognition of the need for support at various levels to effectively address mental health needs.

# Discussion and Implications for Practice

The purpose of the current study was to examine educator perspectives of a SUP for mental health through semi-structured interviews with staff from a primary and intermediate school in a Midwestern state. Across both schools, educators perceived a partnership for student mental health as beneficial, despite concerns about longevity, and expected multilevel support as an outcome of the partnership. Two main themes, namely staff attitudes towards the partnership and staff expectations of the partnership, helped to encapsulate participants' responses.

School staff associate many benefits with partnering with a university to support student mental health, including access to mental health experts, diversified and earlier support for students, increased support for staff, and practical training opportunities for university students. These positive sentiments appeared to exist regardless of the stage of the partnership at the school and to largely focus on how stakeholders-staff, students, and families—of the school would benefit from the partnership. Of note was participants' recognition of the vital role schools play in providing mental health services for students (NASP, 2016; Rones & Hoagwood, 2000), which formed the basis for some staff's support for the partnership. Teachers accurately recognized the growing incidence of mental health disorders in students and the resultant impact on students' academic success (Perfect & Morris, 2011). They also endorsed the findings of previous research that indicates parental resources and wellbeing can impact child outcomes (Waldfogel et al., 2011) as parents are not always capable of detecting their children's mental health needs, due to limited mental health literacy (Frauenholtz et al., 2015; Frauenholtz et al., 2017). Staff expectations of student and family support buttress calls for comprehensive reform of SBMH services to widen the scope of such services (Dowdy et al., 2015).

Similar to results of the study by Reinke et al. (2011), while school staff believed they and their school should play a role in supporting student mental health, they viewed university personnel as the experts. This perception may emerge from previous experiences with the older model of SUPs, which situated university personnel as experts that provided school staff with knowledge about pedagogy and content (Crawford et al., 2008). However, the perception may also result from staff's own knowledge about mental health. Staff did not consider themselves to be adequately trained in recognizing and supporting student mental health needs and felt uncomfortable speaking with parents and students about mental health. This is in line with research on barriers to provision of mental health services in schools, which indicates many teachers do not get mental health training during their education and do not feel adequately equipped to offer mental health assistance to students (Atkins & Rodger, 2016; Reinke et. al., 2011), despite the increased demands of their role (Richards et. al., 2016).

School staff's feelings of inadequacy surrounding their knowledge around mental health coupled with the growing incidence of student mental health disorders and the need to meet ever increasing accountability standards has implications for staff well-being and the PDSs as a whole. Participants in the current study's indications of feeling drained by the multiplicity of demands that accompany their role is reminiscent of research on teacher welfare linking role stress to teacher burnout (Richards et. al, 2016). Participants' expectations of and advocacy for professional development and training in mental health support is an encouraging sign of their willingness to play an active role in service delivery, which is essential for sustainability (Herbert et al., 2018). However, SUPs focused on addressing mental health needs in schools must work to develop school staff's skills and competence surrounding student mental

health. Additionally, partnerships focused on student mental health within PDSs would do well to factor support for staff mental health into their service delivery to reduce role stress, and consequently, teacher burnout.

School staff's expectations of the placement of trained mental health personnel and systems level approaches to identifying and supporting student needs within schools may provide another means of relief. Staff expectations in this regard and their perceptions of associated benefits are backed by research. NASP (2016) suggests an MTSS framework to support mental and behavioral health care is essential for effectively addressing students' needs. NASP (2016) also highlights the importance of adequately staffing schools with trained mental health personnel for achieving this goal. School psychologists are uniquely trained to provide evidence-based mental health assistance across various levels of support within schools (Shernoff et al., 2017). However, a nation-wide shortage of school psychologists has resulted in increased caseloads beyond the NASP recommended ratios (Schmitz et al, 2021). Increased caseloads and misperceptions about school psychologists' abilities has limited their role to evaluating special education eligibility in many schools, a situation Hanchon and Fernald (2013) suggest may be mediated by practica and internships that additionally emphasize training in counseling.

Practicum experiences constitute an essential component of school psychologists' training and an additional benefit of SUPs for universities (Li & Fiorello, 2011; Shernoff et al., 2017). Yet, training practicum students puts additional pressures on the organizations within which they train, particularly depending on the level of the student's prior preparation and the availability of adequate supervision (Hatcher et al., 2012). Differences in interpretation of guidelines surrounding practicum training means that graduate students are not always receiving the necessary level of training and supervision (Li & Fiorello, 2011), which may place additional burdens on school staff. Given staff's expectations and views of university personnel as experts whose presence will help alleviate their burdens, placing graduate students who are not sufficiently trained and supervised within schools can cause frustration and mistrust of the partnership. Universities seeking to partner with schools to support student mental health while simultaneously providing training opportunities for graduate students must ensure their students receive adequate training and supervision for their intended roles.

Similarly, staff concerns about factors related to the longevity of the partnership, including graduate student turn over, teacher buy-in, funding, and continued university interest point to the need to be proactive about partnership sustainability. Frequent trainee turnover is a recognized challenge of SUPs (Whitcomb et al., 2021). Additionally, previous models of SUPs and school programs were viewed as transient, due to the tendency for universities to exit before meaningful collaborative work could occur (Crawford et al., 2008). Although current models of SUPs focus on authentic collaborations, remnants of the mistrust likely fostered by previous experiences appear to remain. To ensure school staff buy-in and longevity, sustainabil-

ity should be a major concern and planned out from the beginning of the partnership (Walsh & Backe, 2013). This may entail seeking supplemental funding early in the partnership, prioritizing the school's needs as the focus of the partnership, understanding school culture, and making plans for continuity of services that do not depend on specific graduate students.

Finally, the view of university personnel as experts speaks to the boundaries that can arise in such partnerships (Trent & Lim, 2010). Left unaddressed, these boundaries can undermine a partnership's efficacy. Participants' expressed desires for university personnel to integrate themselves into the school may serve as a means of closing the gap between university personnel and school staff. Open and continued communication about school needs is essential for averting the impact of such boundaries (Walsh & Backe, 2013). Teachers and other school staff are knowledgeable about problems within their school and can be an asset in decisions about student support (Vernon-Dotson & Floyd, 2012). University partners must make efforts from the onset of the partnership to place value on the expertise teachers and other existing school-based professionals bring.

# Limitations and Directions for Future Research

While this study offers a significant contribution to the literature, particularly because there is a lack of research related to SUPs and student mental health, there are some limitations to address. First, the data were collected across two time points. Due to the nature of grant implementation and scaling up efforts common in systems change in which implementation takes place over the course of several years (Bertram et al., 2015), the participants at the primary school were already bearing witness to the efforts of MTSS implementation at the intermediate school. This may have influenced their perceptions related to the services the university could provide. Additionally, the primary school interviews were conducted during the COVID-19 pandemic, and for this particular district, schools were still on a hybrid format when data were collected.

Mental health concerns that emerged as a result of the pandemic could have influenced educator perspectives. This also limited data at the primary school being collected via videoconferencing instead of in person, which could have affected the richness of participant responses. Although the research team members who conducted the interviews were university faculty and graduate students who are part of the partnership, the interviews took place before relationships between researchers and school personnel were established, likely limiting the influence of this dynamic on participants' responses. Finally, the demographics and locale of the school may limit generalization of the results. The schools are predominantly racially homogeneous across students and staff.

Future research can address a few of these concerns. First, we encourage replication of this study across more diverse populations and perhaps in locales that may extend the results. For instance, if a university is partnering with a school in an

urban city center how might that differ from a university-school partnership that takes place in a rural community? Additionally, it is important to not just gather educator perspectives, but to also gather perspectives of students and families. After all, the students themselves, in this project, are the ones receiving services from the university students. It is important to gather their perspectives about those relationships, perhaps exploring some of the concerns addressed by teachers in our current study related to turnover and longevity of relationships.

#### Conclusion

SUPs have the potential to address myriad school needs, including staff and students' mental health needs. As demonstrated by the current study, assessing staff perspectives on what the needs are constitutes a vital first step in (mental health) partnership development. While viewing their schools' partnership with the university favorably, staff voiced concerns and expectations that have been established by research as having implications for such collaborations. By evaluating staff concerns and perceptions of needs at the onset of SUPs, university faculty and district personnel involved in developing the partnership can allay staff's fears and ensure buy-in for partnership initiatives, thereby improving the chances of the partnership's success. Future research that explores educator and student perspectives with diverse populations and in different locales will be beneficial for expanding understandings of how best to approach implementing SUPs for mental health. SUP

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# **Appendix**

#### Interview Protocol.

1. Please tell me about your role in the school/district as it relates to the mental health needs of students.

- 2. What approaches, if any (including approaches that you may not directly be involved with) does SCHOOL take to support the mental health of its students?
- 3. What are the existing strengths of SCHOOL, if any, as it relates to supporting the mental health needs of its students?
- 4. What gaps, if any, are there in supporting the mental health needs of students at SCHOOL?
- 5. What metrics, if any, are in place to track whether an individual mental health intervention was successful?
- 6. What metrics, if any, are in place to track whether SCHOOL as a school is having a positive impact on the mental health of its students?
- 7. Where would you like to see a potential partnership between SCHOOL and the school psychology program at UNIVERSITY head?