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Social Work Students with Mental Health Concerns in Field Education: Eliminating Barriers and Creating Supports

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Social Work Students with Mental Health Concerns in Field Education:

Eliminating Barriers and Creating Supports

by

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Abstract

This Banded Dissertation focuses on social work field educator perceptions and practices with students with mental health concerns in field practicum. This dissertation is comprised of three scholarly products. The first product is a conceptual paper describing the integration of the Social Model of Disability and Empowerment Perspective as a lens for assessing and supporting social work students with mental health concerns in field practicum. The second product is a report of the findings of an exploratory research study conducted with 123 field educators regarding their perceptions and practices with students with mental health concerns in field practicum. The findings indicate field educators appeared to hold positive perceptions about students with mental health concerns. In addition, students whose field educators were aware of their mental health concerns successfully completed field practicum at higher rates than students whose field educators perceived them to have possible mental health concerns. Training to increase awareness about mental health concerns, practice-related accommodations, and resources may be beneficial. The third product is an overview of the poster that presented the findings of the research survey during the Council on Social Work Education Annual Program Meeting held November 16-20, 2020. This Banded Dissertation adds to the scholarly discourse of working with students with mental health concerns in social work field practicum.

Keywords: accommodations, field education, impairment, mental health, social work students

Dedication/Acknowledgements

My family empowered me to complete my education. I dedicate this dissertation in memory of my mother, Barbara Rozier, who taught me to be a strong person, and to always push on until I reach the places I want to go and accomplish the goals I set for myself. I also dedicate this dissertation to my father, Robert Rozier, Jr., who has always been nothing but supportive. And finally, I dedicate this dissertation to my husband, William Mathis, and son, David-Anthony Weathers, for their love, understanding and patience as I made this journey.

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Social Work Students with Mental Health Concerns in Field Education:

Eliminating Barriers and Creating Supports

According to the World Health Organization (WHO), a mental health disorder can present in cognitive, emotional, behavioral, and social ways (2018). Mental health concerns can include addiction, intellectual, learning, mood, personality, psychotic, and trauma-related concerns. Medications and therapy can manage many concerns. Some mental health concerns are chronic and debilitating, thereby negatively impacting capacity and quality of life. Other mental health concerns are situational and temporarily impair performance and social interaction. A mental health disorder becomes a disability when resulting impairments limit or restrict activity or participation in task completion or interactions with others (WHO, 2001). This includes impairments that can affect educational attainment for students with a mental health disability, defined as a disability in an educational setting. In the literature, educators, practitioners, and researchers reference mental health disabilities, mental health concerns, mental health impairment, mental illness, psychiatric disorders, and psychiatric disabilities. Throughout this Banded Dissertation, mental health disabilities, mental health disorders, mental health impairment, mental illness, psychiatric disorders, and psychiatric disabilities will be referred to as mental health concerns. This Banded Dissertation seeks to add the limited scholarly discourse of the signature pedagogy of social work education regarding student mental health concerns in field practicum. The work recommends considerations for promoting and sustaining inclusive learning environments in effort to ensure all students, capable of learning and practice, have the opportunities and supports needed regardless of impairments.

The number of students with mental health concerns has steadily increased over the past three decades (Barnard-Brak et al., 2010) with approximately 11 % of post-secondary students

having a mental health concern (Coduti et al., 2016; Neuman & Madaus, 2015). The number of

students reporting mental health concerns or exhibiting symptoms of such is increasing in the

United States (Kucirka, 2017). Findings from the 2018 National College Health Assessment

indicated 10% of post-secondary students reported having at least one mental health concerns;

11% reported having two or more mental health concerns; and 17% reported experiencing

symptoms of anxiety and depression (American College Health Association, 2018). Section

504 of the Rehabilitation Act of 1973 and the American Disabilities Act (ADA) of 1990

requires educational institutions to provide equal access to education for primary, secondary,

and post-secondary students with a disability (United States, 1978). As a result, more students

with disabilities are prepared to enter post-secondary education (Belch, 2004; Howlin et al.,

2014; Kim & Lee, 2016). Thus all disciplines, including social work must consider the potential

needs of students with mental health concerns.

Numerous studies have explored the experiences, accommodations, and performances of

students with physical and learning disabilities (Hartrey et al., 2017). However, research

regarding students with mental health concerns is limited. Studies regarding social work

students in this area appear even more limited (Hearn et al., 2014). Thus, additional research

exploring the experiences, needs, accommodations, and strategies for supporting social work

students is not only in social work classrooms, but also in field education is essential.

Various factors can negatively impact social work students' field experiences. Students

with various types of disabilities report experiencing stigmatization or discrimination in their

field placements (Lund et al., 2014; Nolan et al., 2015; Kiesel et al., 2018). Fear of

stigmatization and discrimination can lead to shame, lowered self-esteem, and increased

anxiety. These feelings may, in turn, decrease the likelihood of disclosure of disabilities to field

educators. In a study exploring training experiences, school psychologists reported deciding not to disclose their mental health concerns to their field sites to avoid discrimination and additional barriers during their graduate internships and post-doctoral placements (Lund et al., 2014). Another negative experience reported by students was pre-judgments about student ability and pre-selection of field sites without student input (Coriale et al., 2012; Nolan et al., 2015). Students who do not have a voice in decisions regarding their learning experiences can be disadvantaged as their specific needs and interests may not be considered. Thus, learning experiences are limited based on the perceived capacity of students with disabilities instead of their actual individual capacity. An additional negative experience reported by students was the use of language that served to define them in a negative light (Hearn et al., 2014). Positive experiences expressed were by students who perceived their field instructors to be receptive and accepting of the students and their mental health concerns created a sense of empowerment (Kiesel et al., 2018). Empirical research specific to field experiences is limited, and even more so in social work field education. Research exploring negative and positive practices to foster students' ability to work to their potential will clearly benefit students as well as field educators.

Students with mental health concerns can face multiple barriers which in turn may lessen their willingness to seek accommodations. Hartrey et al. (2017) describe a barrier as a structural barrier or needless condition that impedes the academic progress of students with mental health issues. Students reported several reasons for deciding not to disclose their mental health concerns. First, fear of stigmatization was the most cited reasons for students choosing not to reveal their mental health concerns (Collins & Mowbray, 2005; Kris-Matthews et al., 2007; Martin, 2010; Salzar, 2008; Weiner & Weiner, 1996). Students do not want to be labeled, singled out, or isolated. A second barrier is a previous negative disclosure experience. A

negative experience can hinder a student's willingness to disclose an impairment or seek accommodations (Doughtery et al., 1996; Martin, 2010). When students feel they must defend their requests for accommodations; feel interrogated; or feel as if they are a burden, they are less likely to disclose their mental health concerns in the future. A third barrier cited in the literature is a lack of information about mental health concerns and mental health services (Collins & Mowbray, 2008; Becker et al., 2002). Services certainly will not be considered if students do not know of their existence and rights to receive the services. Additional barriers include students not seeing themselves as disabled (Collins & Mowbray, 2008); active symptoms (Kris-Matthews et al., 2007); and failure of students to recognize the symptoms of mental health concerns (Quinn et al., 2009). Research regarding strategies for removing barriers to student disclosure would be beneficial and would hopefully increase the number of students seeking accommodations and services.

Academic accommodations are reasonable modifications or adjustments to assignments, activities, or the environment which allow individuals with disabilities equal access and opportunity to participate in academic studies (U.S. Department of Education, 2007). Research supports the supposition that academic accommodations and academic achievement are positively correlated (Glenmaye & Bolin, 2007; Kim & Lee, 2016; Schreuer & Sachs, 2014). Students who utilize academic accommodations tend to have more positive outcomes (Kim & Lee, 2016). A gap exists in the literature regarding the exploration of accommodations for students with mental health concerns (Kim & Lee, 2016; Hartrey et al., 2017). Research to identify beneficial accommodations specific to students with mental health concerns will benefit students in field practicum.

Research indicates faculty appear to have more positive attitudes and beliefs regarding students with physical disabilities (Murray et al., 2008), than students with mental health concerns (Becker et al., 2002; Watson et al., 2017). Even though studies found faculty reported positive attitudes and beliefs about students, their reported practices were not consistent with positive views. For instance, faculty reported willingness to make lesser accommodations, but less willingness to make significant accommodations (Murray et al., 2008). An example of a lesser accommodation is early notification of deadlines, and a significant accommodation is flexible attendance when needed. Faculty also rated students with mental health concerns with more negative attributes than other students (Watson, 2017). These discrepancies between positive views and practices can impact on student persistence and degree attainment. The discrepancies in faculty views and practices may be the result of a lack of information and experience in working with students with mental health concerns. Thus, additional information specific to social work students with mental health concerns in field practicum is needed.

There are several factors for consideration in working with social work students with mental health concerns. First, addressing the barriers identified in the literature that students face and building a culture of inclusivity may address student reluctance in disclosing concerns, requesting accommodations, and interacting with faculty and field sites. Next, the research demonstrates academic accommodations benefit students with disabilities in the classroom. However, little information exists regarding how to translate or develop appropriate accommodations for students with mental health concerns in field practicum. For students to benefit from academic accommodations, students need information about accommodations, supports, and processes for accessing them. Finally, the importance of faculty awareness of mental health concerns, accommodations, and additional support services is essential to faculty

capacity to recognize, intervene, and support students in field practicum. This Banded

Dissertation explores the educational and professional issues regarding social work students

with mental health concerns in field practicum through the integrated lens of the Social Model

of Disability and the Empowerment Perspective.

Conceptual Framework

This Banded Dissertation focuses on social work students with mental health concerns in

field practicum. The Social Model of Disability and the Empowerment Perspective were used in

the conceptual framework to explore field educators' perceptions and practices in assessing,

teaching, and evaluating student performance. The Social Model of Disability is integrated into

the conceptual framework for this Banded Dissertation to explore field educator perceptions and

practices which may negatively impact social work students with mental health concerns. The

Empowerment Perspective is integrated into the framework as a lens for engaging students in

the assessment, planning, and decision-making process that positively support the progression

of social work students.

The Social Model of Disability posits that impairment and disability are different in that

impairments are limitations of physical functions and disabilities are imposed by societal

structures; and individuals with disabilities are a marginalized, oppressed group in society due

to society's responses or failures to eliminate structures of exclusion (Oliver, 1990, 1999, 2004).

While the Social Model of Disability focuses on physical disabilities, it appears appropriate to

use as individuals with mental health concerns are subjected to significant exclusions. Barriers

or structures of exclusion include physical, socio-economic, and cultural prejudice, bias, and

discrimination in society. The Social Model of Disability assumes individuals experience

disability the same in that regardless of the impairment, individuals experience some form of

marginalization or oppression (Anastasiou & Kauffman, 2013; Berghs et al., 2016). In addition,

the model assumes disability is the result of external factors, therefore the removal of barriers

and exclusion will eliminate disabilities (Shakespeare, 2010). Thus, disability is a social

construct resulting from economic, political, and professional structures in society (Baron et al.,

1996).

According to David Hosking (2008), disability is the result of the intersection of

impairment, the individual's response, and the social environment's response to the impairment.

Challenging assumptions and presumptions about disability is essential to freer and fuller access

and participation in society (Devlin & Pothier, 2006). There are several factors of the Social

Model of Disability that must be considered. First, the Social Model of Disability does not

consider the limitations of physical impairments or internal factors. Individuals with

impairments can experience restrictions and adverse effects directly tied to the condition of their

bodies (Goering, 2015) or mental health concerns. Second, the temporal nature of some mental

health impairments can change with situational contexts or treatment. Third, chronic or

uncontrolled mental health impairments may not easily resolve or stabilize. Fourth, impairment

can vary in severity from person to person and can change over time with situational triggers.

Incorporating the Empowerment Perspective into this conceptual framework provides a

mechanism for addressing the limitations of Social Model of Disability.

Integrating the Empowerment Perspective is essential to the conceptual framework as it

recognizes the importance of promoting individual agency in using strengths, resources, and

resilience to realize and build on individual capacity. The Empowerment Perspective promotes

gaining the power to participate in the world by providing input or exerting influence.

Empowerment is a developmental process that increases self-esteem and efficacy in individuals,

and effects change in the environment to enable or facilitate individual agency (Parson, 1991). Since social work has historically produced leaders in addressing the needs of marginalized or isolated populations advocating for equal access to services, resources, and opportunities (Cole et al., 1995; Parsons, 1991; Stromwall, 2002), it is reasonable to assume social work should practice empowerment strategies with social work students with mental health concerns. Using the lens of the Empowerment Perspective, educators can recognize that recovery and symptom management are possible with many mental health concerns and engage students as partners in the educational experience. Field educators and students can work together in identifying barriers, strengths, and supports to address limitations and concerns and facilitate self-determination (Stromwall, 2002) and professional development.

To further the mission of social work and uphold the values of social justice and dignity and worth of students with mental health concerns, this Banded Dissertation integrated the lenses of the Social Model of Disability and the Empowerment Perspective to explore the impact of the perceptions and practices of field educators on student learning and performance. This Banded Dissertation begins to identify strategies for assessing, mentoring, teaching, evaluating, and supporting students with mental health concerns in the social work field practicum.

Summary of Banded Dissertation Products

This Banded Dissertation is comprised of three scholarly products. The first product is a conceptual paper. The second product is a descriptive research survey. The third product is a peer-reviewed poster presentation. The aim of all three products is to advance the understanding of field educators' perceptions and practices in supporting social work students with mental health concerns in field practicum.

Product One of this Banded Dissertation is a conceptual paper that integrates the Social Model of Disability with the Empowerment Perspective as a framework for working with social work students with mental health concerns. Based on the assumption that individuals with mental health concerns can be effective social workers, the framework strives to provide considerations for assessing barriers and supporting students in their learning experiences. The framework can be used to inform program policies to remove barriers, ensure students have learning opportunities with accommodations and supports, and field educators have clear guidelines for determining readiness to practice. The framework provides a positive lens for working with students, empowering field educators and students, and promoting inclusivity in social work education, which increases diversity in the profession.

Product Two of this Banded Dissertation is a descriptive research study that explored 123 field educators' perceptions of social work students with mental health concerns and their practices in implementing accommodations in field practicum and student performance. The findings indicated the field educators overall appeared to hold positive perceptions about students with mental health concerns; however, training to increase awareness about mental health concerns, accommodations, and resources may be beneficial. In addition, students whose field educators were aware of students' mental health concerns successfully completed field practicum at higher rates than students whose field educators only suspected they had mental health concerns.

Product Three of this Banded Dissertation is a paper that described the peer reviewed poster presented during the Council on Social Work Education's 2020 Annual Program Meeting held November 16-20, 2020. The poster presented the findings of the research survey conducted for the second product of this Banded Dissertation, which explored the attitudes, perceptions,

and practices of field educators regarding social work students with mental health concerns in field practicum. An audio recording was provided to supplement the poster. The poster presented perceptions that can impact practices; impaired behaviors observed by field educators; and accommodations field educators implemented to support students. Field educators were encouraged to assess for psychosocial environmental challenges to develop accommodations specific to student needs.

Discussion

Given the number of students experiencing mental health concerns is increasing in postsecondary education, social work programs should integrate universal design into their explicit and implicit curricula to promote inclusivity and social justice. While students with diagnosed mental health concerns may have impairments requiring short-term or long-term supports, some students will demonstrate readiness for social work practice, and some will not. Decisions can be made to determine if students need to have specific accommodations and supports, to take a leave of absence, or to explore a discipline more suited to the students' abilities. In addition, any student can experience transient impairment at any given time due to newly experienced physical, mental, and emotional symptoms triggered by temporary and situational stress requiring a period of support. Therefore, field educators can benefit from training and resources in supporting students who may be experiencing a range of mental health concerns.

While most research regarding postsecondary student experiences, needs, accommodations, and performance focuses on physical and learning disabilities (Hartley et al., 2017), the findings suggest accommodations support positive student outcomes (Glenmaye & Bolin, 2007; Kim & Lee, 2016, Schreuer & Sachs, 2014). Research focusing on mental health

concerns across disciplines is increasing. However, studies focusing on social work students is limited (Kim & Lee, 2016; Mazza, 2015; Watson et al., 2017), and even more so regarding field practicum. Finally, there are limited tangible guidelines for supporting social work students with mental health concerns in the literature.

Despite the limited literature specific to social work field practicum, a review of the literature across the three products of this Banded Dissertation finds field educators and students can benefit from using the integration of the Social Model of Disability and the Empowerment Perspective as a foundation for assessing needs, educating, implementing accommodations, and evaluating performance to determine readiness to practice. By normalizing impairments and eliminating barriers that create or maintain disability as framed by the Social Model of Disability, field educators can better partner with students as framed by the Empowerment Perspective to determine needs and plan accommodations and supports. Thus, field educator and student partnerships can increase opportunities for development and demonstration of self-awareness, self-regulation, as well as social work knowledge and skills.

Implications for Social Work Education

Eliminating barriers and implementing supports to increase opportunities for students with mental health concerns to fully participate in social work education is a social justice issue. Social work programs can promote inclusivity and social justice by developing guidelines for assessing and supporting students with perceived and confirmed mental health concerns through a universal design approach. Any student can experience mental health concerns that impair performance. Since impairment can be transient, chronic, and/or managed with treatment, policies should provide faculty and administrators guidelines to address impaired behaviors or performance of all students. Establishing policies and criteria to guide field educators in their

work with students is necessary for establishing consistency in creating enabling environments

for students with mental health concerns. Such policies are essential to creating a foundation for

evaluating students and determining their readiness for social work practice.

Since academic accommodations approved by university disability offices typically

apply to classroom settings, social work programs should consider close collaboration with

disability offices to develop accommodation options relevant to field practicum. Providing

training and resources regarding mental health concerns, impaired behaviors, and workplace-

related accommodations can increase the effectiveness of field educators in assessing, decision-

making, and planning accommodations for students. Having a baseline list of practice related

accommodations to consider implementing also can allow for adaptation and creation of

additional reasonable practice related accommodations to meet students' needs.

Exploration of the experiences of students with mental health concerns can benefit all

students within social work programs. By creating policies that eliminate barriers and increase

support strategies, social work programs can develop a community of inclusivity for all

students. The commitment to inclusivity can help reduce negative perceptions of mental health

concerns and increase student comfort level and willingness to seek accommodations and

support. If students feel at less risk of stigmatization, limitations, and discrimination, they may

be more open to sharing their concerns and needs or seek support and accommodations.

A mental health concern does not automatically preclude an individual from social work

practice. Thus, developmental objectives considered essential for all social work students are

self-awareness, self-regulation, and self-correction. Fostering student self-reflection and

empowerment can increase self-awareness and self-advocacy, enabling students to

communicate needs. Incorporating universal design in field curriculum and developing specific

strategies for working with students with mental health concerns to facilitate development of

self-awareness, self-reflection, and self-regulation will benefit all social work students, and will

facilitate the growth of students with mental health concerns who are not only capable of social

work practice but have more to offer because of their lived experience.

Implications for Future Research

Given the limited empirical literature regarding social work students with mental health

concerns, further investigation into the barriers and needs of students in field practicum is

warranted. First, since research regarding academic accommodations has focused on physical

and learning impairments, consideration must be given to exploring the experiences of students

with mental health concerns to determine opportunities for eliminating disabling barriers for

students in field practicum. Identification of barriers and needs from students' perspectives is

essential. Second, additional research on the impact of field educator perceptions and practices

on student performance is necessary. Since students spend more time with their field instructor

in field placements, exploration of their perceptions and practices with students with mental

health concerns could identify both helpful and harmful factors. Findings can inform training

content for new and experienced field instructors. And third, further identification and

exploration of the efficacy of accommodations specific to students with mental health concerns

in field practicum will assist field educators in supporting student development. Further

research in field education will move the signature pedagogy of social work towards increased

inclusivity and fairness while strengthening the training of students in field practicum or

preparing students to consider other professional disciplines if they are not suited for social

work practice.

Conclusion

Integrating universal design strategies in social work curricula, policies, guidelines, and trainings to normalize impairments of any kind will benefit all students by standardizing consideration of the transient and chronic mental health concerns of students in a way that is just and fair. Further research is needed in field practicum to provide information on best practices for working with students with mental health concerns. Student experiences in field practicum, field instructor experiences and practices, and efficacy of practice-related accommodations are areas for future examination. Training field educators in recognizing mental health concerns in practice settings; assessing for ways to eliminate barriers that create and sustain disability; implementing practice-related accommodations and available resources and evaluating for readiness to practice is essential in ensuring inclusivity of capable students with mental health concerns and fostering personal and professional growth. This Banded Dissertation contributes to the limited discourse regarding student mental health concerns in field practicum as more work is needed to support the signature pedagogy of social work education.

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**Supporting Social Work Students with Mental Health Concerns in Field Education:
A Conceptual Framework**

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Abstract

Diversity and inclusion are hallmarks of social work values. Social work education programs and field educators must protect and support qualified social work students with mental health concerns from oppression and discrimination. Despite the presence of students with mental health concerns in social work programs, research regarding this population is minimal. Given the mandates of Section 504 of the Rehabilitation Act, the Americans with Disabilities Act, and the National Association of Social Workers' Code of Ethics, guidelines to support students with mental health concerns in field practicum are essential. This paper presents a framework for integrating the Social Model of Disability and Empowerment Perspective in field education to ensure readiness to practice and practice-related accommodations for social work students with mental health concerns.

Keywords: student mental health, field education, social work, readiness to practice, accommodations

Supporting Social Work Students with Mental Health Concerns in Field Education:

A Conceptual Framework

Social work programs have a charge of promoting and protecting diversity and difference, thus they are responsible for ensuring the inclusion of capable students with mental health concerns in their programs. Over the past several decades, postsecondary institutions have experienced an increase in students with disabilities (Barnard-Brak et al., 2010), with 11% of students reporting a disability (Coduti et al., 2016; Neuman & Madaus, 2015). The number of students reporting mental health concerns or exhibiting behaviors indicative of possible mental health concerns continues to increase (Kucirka, 2017). The American College Health Association (2018) states that 10% of postsecondary students reported at least one mental health disorder; 11% reported two or more mental health disorders; and 17% reported anxiety and depression. A few possible factors may contribute to the increase of physical and mental health disabilities in student enrollment. For example, Section 504 of the Rehabilitation Act of 1973 mandates that schools evaluate and provide services to students with physical and mental disabilities. Likewise, the Americans with Disabilities Act (ADA) of 1990 and ADA Amendments Act of 2008 protects accommodations for students with disabilities. As a result, more students with disabilities pursue postsecondary education (Belch, 2004; Howlin et al., 2014; Kim & Lee, 2016).

Given the number of students reporting mental health concerns in higher education, it is reasonable to assume similar numbers, if not more students with mental health concerns, are enrolled in social work programs. Students with trauma histories and mental health histories often decide to pursue social work for several reasons, including a desire to give back to or be a part of the profession that helped them and a desire to help others (Branson et al., 2019,

McKenzie et al., 2020; Thomas, 2016). Research focusing on the evaluation and support of students in field practicum is minimal. In addition, field educators must consider paraprofessionals with mental health concerns working in mental health and other settings who seek social work degrees to advance their careers (Watson et al., 2018). Students with mental health concerns can experience subtle micro-aggressions and programmatic discrimination (Charles et al., 2017; GlenMaye & Bolin, 2007; Kiesel et al., 2018). This stigma can reduce their willingness to disclose their diagnosis and seek accommodations that may, in turn, negatively impact their educational experience and performance.

Social work programs have both legal and ethical mandates to ensure equal opportunities for all students. Two legal mandates that afford protection to individuals with disabilities are Section 504 of the Rehabilitation Act of 1973 and the ADA of 1990. First, organizations receiving federal support must ensure the access and inclusivity of individuals with disabilities to programming and resources and must prohibit discriminatory acts (U.S. Department of Health, Education, and Welfare, 1978). Second, Title I of the ADA (1990) requires reasonable accommodations and prohibits discrimination against individuals with disabilities. In 2008, an amendment to the Act specifically included mental disabilities and impairments.

While social work programs must balance preparing qualified candidates to enter the profession in order to protect the public, following the mandates of Section 504 of the Rehabilitation Act of 1973 and the ADA's requirements, social work programs should honor the spirit of the National Association of Social Workers' (NASW) Code of Ethics (NASW, 2017) to promote social justice, dignity and worth of individuals, and the empowerment of others. Field educators should treat students with mental health concerns respectfully; protect them from

discrimination; and create opportunities for personal and professional development for those who demonstrate the capacity to manage their mental health concerns without compromising on client service. Therefore, social work field educators can benefit from a framework that emphasizes fairness, equal opportunities, and empowerment in fostering and evaluating students' readiness to practice. A framework also can guide the development of appropriate practice-related accommodations in field practicum. This conceptual paper, which discusses a framework that integrates the Social Model of Disability and Empowerment Perspective for evaluating decision-making and supporting students in field education, can benefit field educators and students which in turn benefits clients. The framework promotes the fair treatment, relevant accommodations, and opportunities for students with mental health concerns. Recommendations for field educators will also be presented.

Literature Review

This paper presents a framework to assist field educators in identifying, evaluating, and supporting social work students with mental health concerns in field practicum. A review of the empirical literature yielded research that is focused primarily on physical and learning disabilities. While scholarly inquiry into social work students with mental health concerns is increasing, coverage in the literature remains limited. In addition, research that explores field experiences and performance in social work field education is very limited. Therefore, the following literature review discusses the impact of faculty awareness and perceptions of students with disabilities, readiness to practice, and academic accommodations.

Faculty Awareness and Perceptions

Research indicates that faculty tend to have more positive attitudes and beliefs regarding students with physical disabilities (Murray et al., 2008) and mental health concerns (Becker et al., 2002; Watson et al., 2017). Even though studies have found that faculty report positive attitudes and beliefs about students, their educational practices are inconsistent. For instance, Murray et al. (2008) found that while faculty reported positive views about students with learning disabilities, they reported a willingness to make lesser accommodations but less willingness to make more significant accommodations. Watson et al. (2017) found that while a faculty reported positive views about students with mental health concerns, they also rated students with mental health concerns more negatively than other students. These discrepancies between positive views and practices can significantly impact students' degree attainments. Future research should explore the inconsistency in reported beliefs and practices of faculty regarding students with mental health concerns.

The discrepancies in faculty perceptions and practices may result from a lack of information or experience of working with students with mental health concerns. First, Brockelman and Scheyette (2015) found a significant number of faculty that reported familiarities with mental health concerns but failed to recognize mental health issues in their students. Faculty may not recognize the signs of mental health issues due to a lack of information, and if they lack awareness of the mental states of their students, they cannot offer support. Next, Becker et al. (2002) found that while many faculty members believed students with mental health concerns could succeed in their academic pursuits, a sizable number reported less positive beliefs in this and were less knowledgeable about mental health concerns, university support services, and resources to support students. Becker et al. (2002) also expressed concern that 8% of the faculty reported beliefs that students with mental health

concerns were dangerous, and that they were uncomfortable working with these students. Brockelman et al. (2006) found that if faculty had knowledge of mental health diagnoses through a diagnosis for either themselves, their family, a close friend, or a previous student, then they were more likely to report positive perceptions of students with a mental health diagnosis. Thus, a lack of information or experience appear to play a critical factor in faculty perceptions and comfort levels.

The lack of information regarding the nature of disabilities, accommodation requirements, and available support services may impact faculty perceptions and practices with students with learning disabilities. By exploring the relationship between learning disability training and faculty attitudes toward students with learning disabilities, Murray et al. (2009) found that faculty that had completed disability-related workshops or courses reported more positive views of students with learning disabilities than those who only had read disability-related literature. Moreover, those who had completed either type of disability-related training reported more positive views than those without prior training or information. The phenomena described here may also occur regarding mental health concerns. If institutions train educators in disabilities, mental health concerns, and strategies for assisting students, then misperceptions and fears in working with this population may decrease, thus allowing supportive educational relationships to form. While social work field educators will have had some training in mental health as a part of their degree programs, training in how student mental health concerns can present in academic and field settings would be beneficial. Field educators who are informed about mental health concerns are better prepared to examine students' readiness to practice.

Readiness to Practice

Determining readiness to practice, fitness to practice, professional suitability, and gatekeeping are interchangeable terminologies to describe the responsibility assigned to helping professionals. While variations of the definition of readiness to practice exist, the most basic components of the definition include professional behavior; competencies; and the physical, mental, and emotional capacity to conduct social work practice (Lo et al., 2018; Todd et al., 2019). Regardless of the terminology, social work educators are responsible for determining which students demonstrate a readiness for practice.

A review of the literature from the time of Mary Richmond and the Charity Organization Societies to today's Council on Social Work Education's Educational Policy and Accreditation Standards finds that ensuring qualified individuals are prepared for social work practice is a priority (Mazza, 2015). Conflicting views across social work programs about readiness to practice are evident in the literature. Concerns exists due to the fear of litigation and when readiness to practice should be evaluated (Sofronoff et al., 2011) to the fear of dishonoring social work's values and not operating from a place of strengths and beliefs in an individual's capacity to change when working with students with impairments or disabilities (Barlow & Coleman, 2003; Mazza, 2015).

Role of Field Educators

Field educators have dual responsibilities of advocating for students and ensuring the academic integrity of the learning experience when creating student learning opportunities and making decisions regarding student readiness to practice. Field educators must exercise diligence when assessing students' readiness to practice to avoid excluding those with mental health concerns from the profession, while screening those who appear significantly impaired. Reliance on general university policies is not enough, as policies tend to focus on academic

performance and classroom behavior, leaving readiness to practice and potential for professional success unaddressed. For this reason, social work programs need clear policies and protocols for evaluating readiness to practice. Evaluation should occur throughout students' academic careers rather than at just one point in time (Sofronoff et al., 2011). Thus, field education evaluation of readiness of practice should be continuous throughout the field experience.

Process for Evaluation

The process of readiness to practice decisions varies across programs, from reliance on broad university policies, to reliance on agency field instructors, to formal evaluation processes (Barlow & Coleman, 2003). Readiness to practice processes should be more than a means to terminate students from programs; they should be evaluative and interventive. Watkinson and Chalmers (2008) distinguished professional suitability from impairment, arguing that professional suitability considers the ability to perform required tasks while managing emotional responses to situations, and impairment results in an individual's ability to assess their level of functioning and their mental health or physical condition's impact on their ability to practice. Since mental health concerns can cause impairment, evaluating readiness to practice should be an ongoing process in the efforts to not just monitor students' functioning, but also to promote self-reflection and self-regulation skills to prepare students for practice after graduation.

Lo et al. (2018) evaluated a student-centered approach to evaluating readiness to practice, which engages students through active listening, motivational interviewing, and positive feedback to identify issues and develop strategies for positive development. This approach honors social work's values and practices. Lo et al.'s (2018) findings indicated that

while clinical educators in practice settings had concerns about students' capacities to self-declare issues, the process reinforced professionalism; used a collaborative approach to make determinations; and identified supports that were needed. Social work students with the capacity to engage in the process should have the opportunity to grow. Students who do not demonstrate the capacity to engage in the process are, at the least, fairly evaluated before being terminated from social work programs and counseling about other disciplines.

Frequency of Evaluation

The continuous evaluation of readiness to practice can occur through faculty–student interactions and strategies to support students' well-being in achieving academic success. For example, Kucirka (2017) found that it is important to develop relationships with students early so that recognition and intervention can occur when students begin experiencing new or increasing mental health concerns. Providing support and self-care strategies helps students learn when to request assistance to avoid putting clients at risk, while allowing faculty to assess students' capacities for self-reflection and self-regulation. Todd et al. (2019) proposed a conceptual framework based on critical disability theory and social disability theory using reflective questions to assess student mental health concerns. Specific questions can facilitate both faculty and students' decision-making processes across the field education process, including in the pre-practicum planning phase, the practicum phase, and the post-practicum phase. Todd et al. (2019) indicated that reflective questions grounded in the literature, disability theories, and school policies can help social work programs determine the appropriate decisions for students demonstrating marginal or failing performances in social work programs. Example questions included the following: "Are limits and possibilities of accommodation outlined for students?"; "What training have field supervisors received on accessibility issues?"; "Are

students informed of and provided with sufficient time and support to meet core competencies

required during their placement?"; and "What resources does the university have to support

students?" (Todd et al., 2019, p. 11). Determining readiness to practice is a complex process;

thus, field educators need to view students holistically rather than by considering their

diagnoses only when determining their readiness to practice. Field educators with a good

understanding of readiness to practice are better prepared to consider appropriate

accommodations to offer students or initiate the process of counseling students regarding other

educational opportunities.

Academic Accommodations

Academic accommodations are the reasonable modifications to assignments, activities,

and the environment of students with disabilities (U.S. Department of Education, 2007).

Practice related accommodations can include redesigning workstations, altering job

responsibilities, adjusting schedules, utilizing assistive devices, and so on. Social work

programs must develop clear requirements and standards that assess students' capacities or

potential for meeting standards and must develop accommodations to support students in their

degree completion (Cole & Cain, 1996; Cole et al., 1995). Research indicates accommodations

and academic achievements are positively correlated (Glenmaye & Bolin, 2007; Kim & Lee,

2016; Schreuer & Sachs, 2014). However, there is a gap in the literature that is specific to

accommodations for mental health concerns (Kim & Lee, 2016; Hartrey et al., 2017), and the

literature is limited for social work (Kiesel et al., 2018) and field practicum. Field educators can

work together with students to identify and create opportunities for optimal learning and

practice using a framework to guide teaching and learning.

Conceptual Framework

From a review of the literature, it is evident that accommodations and support in field education may increase the rate of qualified social work students with mental health concerns earning social work degrees and entering the social work profession. A supportive framework could positively impact field educators' perceptions and practices in assessing, teaching, supporting, and evaluating students' performances. In developing practice-related accommodations and supports, field educators should consider the tenets of the Social Model of Disability and Empowerment Perspective. From these standpoints, field educators can then better support and evaluate students' readiness to practice. Engaging students in assessing barriers and decision-making can lead to the development of the appropriate and reasonable practice-related accommodations for field practicum and referral to support services as needed before and during the field experience (see Figure 1).

Figure 1

Conceptual Framework for Supporting Students with Mental Health Concerns

Empowerment Perspective   Social Model of Disability
Individual Agency   Identify Barriers

Decision-Making and Counseling

Accommodations and Support Services
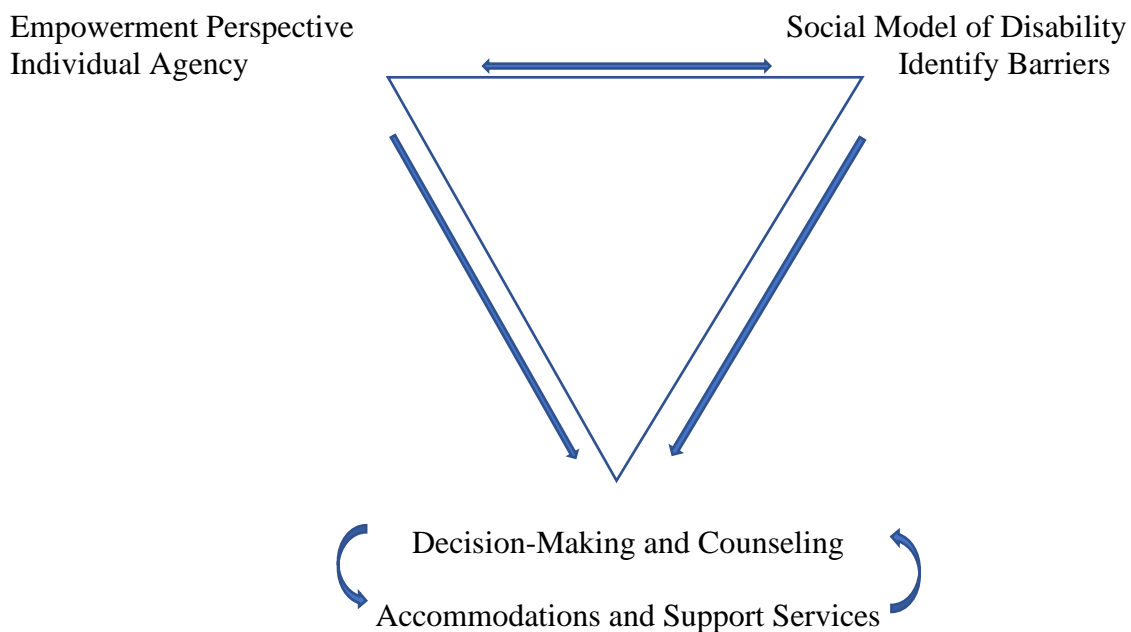
In accordance with the mission of social work in upholding the values of social justice,

dignity and worth, and competence of students with mental health concerns, this conceptual

framework uses the lens of both the Social Model of Disability and the Empowerment

Perspective to explore the barriers that students experience in field education and the impact of

field educators' perceptions and practices on students' learning and performances. It is

paramount for the goal of identifying strategies for assessing, mentoring, teaching, evaluating,

and supporting students with mental health concerns to be based on students' capacities rather

than solely on their mental health concerns.

Social Model of Disability

The Model of Social Disability began evolving in the 1970s during the disability

movement in the United Kingdom in reaction to the negative impact of the Medical Model of

Disability. The Medical Model of Disability defines disability as "a condition for diagnosis" and

relegates individuals into passive roles following "the experts" (Stromwall, 2002). This model,

however, does not consider individual experiences (Matthews, 2009). In 1976, the Union of the

Physically Impaired Against Segregation, an organization of individuals with disabilities,

published *The Fundamental Principles of Disability* to argue that the Medical Model of

Disability fails to address their personal experiences of disability and inclusivity (Oliver, 2004).

Efforts to illuminate the injustices against individuals with disabilities and calls for disability

equality training initiated the development of the Social Model of Disability (Oliver, 1999).

Propositions of the Social Model of Disability

The Social Model of Disability makes five main assertions. First, impairment and

disability are distinctly different. Second, impairment refers to physical functions, and disability

refers to reactions of social organizations. Third, disability results from social and economic

structures, not pathology. Fourth, society oppresses individuals with disabilities. Fifth, disability

is not a tragedy. Individuals with disabilities should not be summarily treated as impaired

(Oliver, 1990, 1999, 2004), and society should not summarily treat individuals with disabilities

as if they are impaired. True, there are differences in abilities, yet it is society that should

mitigate and eliminate barriers to avoid marginalizing or excluding individuals (Shakespeare,

2010), as it is the barriers that create the impairments.

Limitations of the Social Model of Disability

Several concerns about the Social Model of Disability have been identified in the

literature. First, the model focuses on physical impairments and disability without considering

the internal factors or real limitations of physical impairments. Second, the model fails to

consider the temporal nature of some mental health impairments based on situational contexts

or treatment. Third, the model fails to clearly address the differences between impairment and

disability (Owens, 2015). Fourth, chronic or uncontrolled mental health impairments may not be

easily resolved or stabilized. Fifth, the model assumes that individuals experience disability in

the same way (Anastasiou & Kauffman, 2013; Berghs et al., 2016). Finally, the model assumes

that disability results from external factors; thus, the removal of barriers should mitigate or

eliminate disabilities (Shakespeare, 2010). Based on the propositions of the Social Model of

Disability, almost everyone with impairments or disabilities experiences oppression and

discrimination.

While the Social Model of Disability focuses on physical disabilities, it appears

appropriate for use with individuals with mental health concerns as they too can experience

systematic exclusion. The model examines the structural, socio-economic, cultural bias, and

discriminative barriers of exclusion, which individuals with mental health concerns can

experience (with the exception of physical barriers). In contrast, the Empowerment Perspective

focuses on strengths and assets.

Empowerment Perspective

The goal of the Empowerment Perspective can apply to any individual and group that is

engaged with empowering others within social work. Solomon (1976), one of the first to assert

Empowerment Perspective's place in social work practice, argued that Empowerment Practice

includes helping individuals to perceive their ability to affect change or solve problems; views

social workers as resources and collaborators; and views power structures as changeable. Given

that disability results from the intersection of impairment, the individual's response, and the

social environment's response to impairment (Hosking, 2008), incorporating the Empowerment

Perspective recognizes the importance of promoting individual action in using strengths,

resources, and resilience to build individual capacity. Field educators should engage with

students as partners and focus on wellness, competence, and strengths to address problems,

identify opportunities for building knowledge, and develop skills (Perkins & Zimmerman, 1995;

Solomon, 1976).

Components of the Empowerment Perspective

The Empowerment Perspective considers processes and outcomes to reduce and

eliminate discrepancies in groups (Boehm & Staples, 2002; Guitiérrez et al., 1995; Zimmerman,

2012). Empowerment is a developmental process that increases self-esteem and efficacy in

individuals and effects change in the environment to enable or facilitate individual agency

(Parson, 1991). Throughout history, social work leaders have addressed the needs of

marginalized populations and have advocated for equal access to services, resources, and

opportunities (Cole et al., 1995; Parsons, 1991; Stromwall, 2002). Therefore, it is reasonable to assume that social work educators would practice empowerment strategies with social work students with mental health concerns. Social work education can be a model for other disciplines for the inclusion of students with disabilities and mental health concerns by providing guidelines for working with qualified students who must complete field experiences. The outcomes of Empowerment Perspective practices include positive feelings of self-efficacy, personal growth, better social interactions, overall improved quality of life (Guitiérrez et al., 1995), and a critical awareness of self, needs, and resources (Zimmerman, 2012).

By using the Empowerment Perspective, field educators can work from the viewpoint that recovery and symptom management for many mental health concerns are due to the advancements in treatments. A review of the literature finds support for the concept of mental health recovery and states that it is possible through the management of and planning for relapse (Carpenter, 2002) and the promotion of positive experiences and personal growth (Jones & Ludman, 2018; Lusczakuski et al., 2016; Silver et al., 2011). Field educators also can assist students with mental health concerns by identifying and supporting students' capacities to address concerns to facilitate self-determination (Stromwall, 2002) and professional development. By promoting an individual's capacity to address barriers, create supportive environments, identify commonalities in individuals, and recognize the impact of an individual's experiences, individuals can become empowered (Payne, 2005). Field educators can help students identify commonalities, create resources, and lean confidently into their identities to reach their full potential in social work programs and careers.

Discussion

The conceptual framework presented in this paper addresses the need for methods for engaging, identifying, evaluating, and supporting students with mental health concerns. Social work programs are one of the entities responsible for gatekeeping for the profession. Thus, field educators are responsible for educating potential social workers and identifying students who demonstrate a lack of readiness to practice for counseling to take a leave of absence or consider other disciplines that may be better suited to their capacities. Balancing the protection of individual rights and conferring social work degrees only to individuals capable of practice can be a challenge to social work programs. Both legal mandates and social work values significantly require the due diligence of field educators. The framework provides protection for students with mental health concerns from undue restriction or elimination from programs and opportunities while ensuring students are ready to enter the profession.

The supportive framework can be applied to all social work students to identify barriers for readiness to practice. Field educators can utilize the framework to engage and empower students in identifying economic, environmental, physical, relational, or social barriers to their readiness to practice; and they should consider potential practice-related accommodations and natural support systems and support services needed, which may mitigate or eliminate barriers to decrease impairment and increase capacity for learning and practice. If students' mental health concerns are known prior to or at the time field practicum begins, field educators and students can assess for barriers to determine opportunities for practice-related accommodations, and arrange support services for students, as well as address any needs of field educators in supporting students. In addition, students who choose not to disclose their mental health

concern or who begin exhibiting impaired behavior can be engaged in the support framework. Field educators can engage any students who need support in being ready for practice.

The framework also is not a one-time sequential process. Since mental health concerns can be chronic or transient, the process is a continuous cycle of engaging students in assessing impairments, identifying barriers, and planning, and implementing practice-related accommodations and support services. Student impairments and readiness for practice can change over time as mental health concerns can improve with treatment or deteriorate due to side effect of medications, change in effectiveness of medications, or a new trauma experience. Thus, continuous assessment of barriers and the effectiveness of accommodations and support services will inform decision making regarding readiness to practice throughout the field placement. Accommodations and support services may need to be adjusted or added, leave of absences initiated, or placement terminated.

Using the lens of both the Social Model of Disability and the Empowerment Perspective, field educators can be instrumental in fostering student agency in eliminating barriers and mitigating impairment through inquiry, coaching, and reinforcing students' primary roles in the process. In addition, field educators can engage and assess student readiness for practice, develop accommodations; and provide support for students who appear ready to practice or initiate discussion about other career opportunities that may be better suited to students.

Field Educators

The framework has significant implications for field educators. To evaluate readiness to practice, field educators need distinct guidelines to ensure all students receive equitable treatment. Equitable practice requires alignment with social work values. Several scholars agree on the significance of knowledge when working with students with disabilities (Brockelman &

Scheyette, 2015; Brockelman et al., 2006; Murray, 2008; Watson et al., 2017). It is important to

note that while field educators will have basic mental health knowledge through their degree

attainment, some field educators may not immediately recognize how mental health concerns

present in students and practice settings. Increased knowledge can positively impact field

educators' perceptions and practices. Clarity about what, why, and how to evaluate and support

students is crucial to supportive practices with students with mental health concerns.

Training in working with students with mental health concerns will benefit field

educators in their work. Regardless of experience, there is value in training for all field

educators including field directors, coordinators, liaisons, agency field instructors, and task

supervisors. To practice within the supportive framework, field educators need an

understanding of the framework, protocols, and resources. Recommended topics for training

include the following:

- Legal mandates: Section 504 of the Rehabilitation Act of 1973 and the ADA of 1990;

- The relevance of social work values in working with students with mental health
  concerns;

- The Social Model of Disability and the Empowerment Perspective and their applications
  to students with mental health concerns;

- Mental Health Recovery concepts;

- Potential indicators of mental health impairment behaviors;

- Readiness to practice (evaluating and fostering the development of self-regulation and
  self-reflection);

- Accommodations relevant to mental health concerns in field practicum;

- Anti-oppressive practice strategies;

- Protocols developed by the social work program.

Field directors should compile and develop resources and tools for working with students with mental health concerns.

Field directors can collaborate with university disability services, student services, and field consortia to develop resources for training with field educators. Resources should include information such as common mental health concerns, manifestations of impairments, specific strategies, practice-related accommodations, and university resources available to students. An assessment checklist may assist faculty, agency field instructors, and students in determining readiness to practice from a Strengths Perspective. A proposed checklist includes a review of basic communication; interpersonal, cognitive, and physical abilities; emotional and mental abilities; professional performance skills and accommodations (behavior, self-awareness, and ethics) (Urwin et al., 2006); and should focus on expected standards for practice. The more knowledge and resources field educators attain, the more effective they will be in engaging, assessing, evaluating, and supporting students with mental health concerns in field practicum. By supporting field educators with policies and resources, social work students will be offered relevant accommodations and supports or provided counseling and assistance in considering other career paths as soon as needs and barriers are identified thereby increasing the likelihood of positive student outcomes.

Social Work Programs

The supportive framework has implications for social work programs and specifically field education. To increase inclusivity within social work programs, efforts need to be made to eliminate "otherness" by normalizing differences for all students. Regarding students with mental health concerns, social work programs need guidelines for incorporating the Social

Model of Disability and the Empowerment Perspective to focus on readiness to practice, self-reflection, and self-regulation capacity, more than focusing on diagnosis when developing guidelines for evaluating student status. Concrete guidelines will assist field educators in their work and inform students of what they can expect in terms of support. Providing field educators and agency field instructors with more clarity around readiness to practice criteria and methods for supporting students is essential for eliminating disabling learning environments and creating supportive learning environments (Lafrance et at., 2004). Offering orientation to the supportive framework for training through workshops or webinars for distance field educators will strengthen the skills of both students and outcomes of social work programs.

Another implication is the importance of collaborating with university disability services in developing relevant accommodations that are specific to field practicum for students with mental health concerns. Examples of practice-related accommodations include extended time to complete required hours if a student needs a shorter daily time onsite, periodic breaks, written or recorded instructions for assignments, prompts, verbal cues, checklists, extra time to complete tasks, quiet workspaces, and a support person or animal (Job Accommodation Network, 2019).

Previous research regarding the efficacy of accommodations for students with disabilities indicates that accommodations positively correlate with student performance (GlenMaye & Bolin, 2007; Kim & Lee, 2016; Schreuer & Sachs, 2014). Based on the literature, it is reasonable to assume that practice-related accommodations specific to mental health concerns will similarly support student learning and performance in field practicum. Field educators are in a prime position to help students identify barriers, needs, and recommend accommodations. Social work programs should garner the collective knowledge and experience

of students, field educators, and disability services to develop a baseline listing of

accommodations for field practicum, understanding that field educators can develop for

additional accommodations to support students' unique needs in strengthening self-regulation,

self-reflection, and readiness to practice. While the conceptual framework was discussed in the

context of field education, it may be applied to social work education in general. Both social

work field educators and classroom educators need to be aware of students' experiences during

their academic careers.

Students with Mental Health Concerns

Social work programs also should explore the experience of social work students with

mental health issues to better understand the barriers and concerns regarding disclosure of

mental health concerns. Barriers can include fear of stigmatization, unjust limitations, and

discrimination. By addressing barriers to increase inclusivity, decrease "othering," and increase

the naturalness of difference, students with disabilities, impairments, or differences may feel

safer in disclosing their challenges and requesting accommodations. If a student feels more

comfortable with disclosure, field educators will have more opportunities to engage with their

mental health concerns.

Another implication for students is the importance of fostering the development of

heightened self-reflection, self-regulation, and a sense of empowerment so they will be

confident in requesting accommodations and support to successfully complete field practicum.

The opportunity to further develop self-awareness and self-advocacy skills as a part of the

education process will benefit students as they advance in their careers. Students will

communicate needs and plan for times when symptomology may increase and may require

action for both themselves and their clients' protection. Having a mental health concern does

not automatically assume the inability to practice. Students and practicing social workers need well-developed self-awareness and support from prepared field instructors and supervisors to support their growth in capacity, as they have much to offer their clients. To better educate future social workers and increase diversity in the profession, research to increase strategies in providing field instructions to students with mental health concerns is essential.

Recommendations for Future Research

The limited literature regarding students with mental health concerns in social work programs is reflected in the very limited literature on field practicum. The supportive framework for working with students with mental health concerns in field practicum brings to light several avenues for future research. Research exploring the impact of field educators' perceptions and practices in working with students with mental health concerns can provide directions for policies and training for field educators. Since research on accommodations primarily focuses on physical and learning disabilities, research identifying specific practice-related accommodations and their efficacy for students with mental health concerns will benefit students and field educators in applying the supportive framework. In addition, a qualitative study with students with mental health concerns, which explores their experiences with field educators, may provide a better understanding of students' needs in field practicum.

<div align="center">

Conclusion

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Students with mental health concerns that demonstrate capacity can successfully complete social work field education if educators use a supportive framework to support them. In line with legal mandates and social work values, field educators should collaborate with students using the Social Model of Disability and the Empowerment Perspective to develop

both practice related accommodations and supports that are specific to the barriers and needs of individual students. A supportive framework can prepare students to utilize new skills in their careers and strengthen the integrity of field education programs. Finally, the social work profession can benefit from the increased diversity in its ranks, which can help provide services to a diverse society. As an advocate of inclusion and empowerment, social work education can stand as a model for other disciplines in educating and supporting students with mental health concerns in the experiential components of their curricula.

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Field Educator Attitudes, Perceptions, and Practices Regarding Students

with Mental Health Concerns

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Abstract

The number of students living with mental health concerns entering higher education is increasing. However, the literature regarding students with mental health concerns in social work education is minimal and even more so limited in field education. This study surveyed 123 social work field educators recruited from the Council on Social Work Education Field Directors' List Serv and the Baccalaureate Program Directors' List Serv. The survey explored field educators' attitudes and perceptions regarding social work students in field practicum, and specifically focused on whether field educators with positive attitudes and perceptions provided accommodations more than field educators with negative attitudes and perceptions. Overall, findings suggested the field educators sampled held positive attitudes and perceptions about students living with mental health concerns. However, the strength of the correlations between attitudes and practices was weak to lower-moderate. Based on the findings, field educators may benefit from training to increase awareness about student mental health concerns, accommodations for field practicum, and resources.

Keywords: field education, accommodation, impairment, mental health, social work students

Field Educator Attitudes, Perceptions, and Practices Regarding Students with Mental

Health Concerns

Does having a lived experience of mental health concerns automatically mean social

work students are unsuitable for social work practice? The difference between an affirmative

answer or negative answer may depend on the grit of the student and the commitment of social

work educators. The number of students reporting mental health disorders or exhibiting

behaviors is increasing in the U.S. (Kucirka, 2017). According to the National College Health

Association (2018), 10% of college students reported having one mental health disorder; 1%

reported at least two mental health disorders; 39% reported experiencing depression; and 60%

reported experiencing anxiety. The number of students with mental health concerns in social

work programs is likely higher since some students decide to pursue a social work education

based on previous experience with mental health concerns and a desire to help others with

similar experiences (Branson et al., 2019; McKenzie et al., 2020; Thomas, 2016). Other

students develop mental health concerns during their academic careers resulting from trauma,

triggers, and significant stress. While students with mental health concerns may have academic

accommodations specified by schools' disability services, not all accommodations translate well

to field practicum settings. Information regarding strategies for supporting students with mental

health concerns is minimal (Curran et al., 2020; Mazza, 2015). Thus, exploring the implications

of field educators' perceptions about working with students with mental health concerns and

identifying strategies used to support students is an important step in determining the needs of

field educators and strategies to support students with mental health concerns. Mental health

concerns refer to psychiatric diagnosis as denoted in the *Diagnostic and Statistical Manual of*

Mental Disorders and behaviors indicating a possible psychiatric condition and student report of mental distress.

Field educators must be prepared to support students with mental health concerns for two primary reasons. First, Section 504 of the Rehabilitation Act of 1973 and the American Disabilities Act of 1990 protect students with disabilities from discrimination and mandates reasonable accommodations (U.S. Department of Education, 2007, U.S. Department of Health, Education, and Welfare. Office for Civil Rights, 1978). Students with mental health disabilities are afforded the same protections as students with physical and learning disabilities. Second, field educators should honor the social work values of social justice and dignity and worth of individuals described in the National Association of Social Workers' Code of Ethics (NASW, 2017). Field educators must be prepared to support students with formal accommodations and to support students appearing to experience mental health concerns. The U. S. Department of Education (2007) defines academic accommodations as reasonable modifications of assignments, activities, and environments providing students with disabilities opportunities to participate in the educational process. This author defines supports as informal reasonable adjustments field educators implement for students to meet learning objectives and referral to relevant support services. Field educators should empower students to work towards their full potential through practice related accommodations and supports to increase the likelihood of competency development and degree attainment.

Several studies investigated the experiences, needs, accommodations, and performance of postsecondary students with physical and learning disabilities (Hartrey et al., 2017). Research findings also support the supposition that academic accommodations and academic performance are positively correlated (Glenmaye & Bolin, 2007; Kim & Lee, 2016, Schreuer & Sachs,

2014). However, studies investigating mental health concerns are limited. While research

focused on social work students with mental health concerns is increasing, the research is still

very limited (Kim & Lee, 2016; Mazza, 2015). Furthermore, research specifically examining

accommodations to support social work students with mental health concerns in field practicum

is significantly limited.

Since little has been written about accommodations and supports for social work

students with mental health concerns in field practicum, this descriptive study used a survey to

examine field educator perceptions, experiences, and practices in implementing

accommodations and supports in field practicum. This study strives to add to the knowledge

base of social work field education and to offer directions for future study in field education

related to students with mental health concerns.

Literature Review

The number of students with mental health concerns enrolling in postsecondary

education is increasing (Kucirka, 2017). Thus, learning about faculty practice and support of

students with mental health concerns is important for fostering positive student outcomes.

Despite substantial research regarding students with physical impairments and disabilities in

postsecondary education, significantly less information on mental health concerns exists. In

addition, while inquiry into faculty perceptions, experiences, and practices with students with

mental health concerns is increasing across disciplines, including social work, information is

limited (Mazza, 2015; Watson et al., 2017). Literature specific to field education in social work

is even more limited. More research is needed to inform field educators of the challenges of

students with mental health concerns. Therefore, the following literature review discusses

faculty perceptions, faculty practices, and field accommodations regarding students with mental health concerns.

Faculty Perceptions

Research suggests that while faculty report positive perceptions about students with disabilities and a willingness to implement accommodations, their work with students is incongruent with their reported positive perceptions. Murray et al. (2008) found that while faculty reported positive expectations for student performance and willingness to provide accommodations, they did not typically encourage disclosure of disability status, express a willingness to provide more than minor accommodations, or spend additional time with students.

A factor that could influence faculty perceptions of students with mental health concerns appears to include a previous history of personal experience or knowledge of mental health concerns. Brockelman et al. (2006) found faculty with family, friends, or personal history of mental health concerns reported positive perceptions of students with mental health concerns. The findings support thinking that information about mental health concerns may benefit all faculty, informing how students may present in the classroom, practice-related accommodations, and supports. The findings also appear consistent with the work of Watson et al. (2017) whose findings suggest that social work faculty have positive perceptions about and interactions with individuals with mental health concerns, particularly faculty with a history of personal interactions with individuals with mental health concerns. However, faculty with negative perceptions and attitudes regarding individuals with mental health concerns can potentially have increased negative interactions with students and less likely to implement educational support. Also noted was the fact that faculty did differentiate between social work

students with mental health concerns and students without mental health concerns, describing

them in negative terms, which also applied to other students. Negative perceptions can lead to

restrictive and counterproductive faculty practices, putting students with mental health concerns

at a disadvantage in the classroom and field experiences.

Faculty Practices

Limited information about reasonable accommodations for students with mental health

concerns in field experiences appears across disciplines (Botham & Nicholson, 2013; King,

2019; Mazza, 2015 & Nolan et al., 2015; Wilbur et al., 2019). Two primary themes emerged

from the literature: lack of knowledge about mental health concerns and concerns with

providing accommodations. First, faculty awareness about mental health concerns and available

resources to assist students appears to impact faculty practices with students with disabilities

and especially mental health concerns. Research suggests that faculty with minimal knowledge

about student mental health concerns, strategies for supporting students, and resources available

to students are less likely to have positive expectations about students' abilities (Becker et al.,

2002) and less likely to support students (Mazza, 2015). Second, faculty perceptions of issues

around accommodations appear to impact faculty practices. Research exploring the issues and

concerns of practice educators in working with students' disabilities found the primary concerns

of faculty were that students with disabilities would require more time; faculty would need to

ensure students would meet proficiencies and gather more information for supporting students

with mental health concerns (Nolan et al., 2015; Wilbur et al., 2019). If faculty perceived an

increased demand of their time to support students with mental health concerns, in addition to

current workloads, concerns about lessening standards and the lack of or limited availability of

supports, faculty may be less willing to work with students with disabilities and mental health

concerns. Knowledge of specific strategies for supporting students with mental health concerns may help faculty see students in a more positive light and increase their confidence and capacity for assisting students. Mazza (2015) found that social work faculty aware of the impact of psychosocial and environmental challenges in students can recognize early indicators of emotional and mental distress; and they can become knowledgeable of more specific educational strategies to support students, resources available to support students are more likely to address student concerns. Faculty who are well-informed appear more likely to hold positive perceptions and expectations of outcomes for students with mental health concerns, and thereby more likely to support students.

Field Education and Students with Mental Health Concerns

Research findings suggest a consensus in thinking that many academic accommodations appropriate for classroom settings are not relevant for field settings (Mazza, 2015). Examples of academic accommodations that are not necessarily practice-related include additional wait times for responses and extended time for quizzes and exams. Affording practice-related accommodations and supports in field education promotes equity. Thus, all students should have the opportunity to demonstrate they have the capacity to sufficiently perform.

Research suggests three factors for supporting students with mental health concerns in field settings. First, early recognition of potential emotional/mental distress and early intervention are key in supporting students with mental health concerns (Kucirka, 2017). It was noted that indicators of anxiety and distress should be addressed as students often carry full workloads, including class work, field work, and personal obligations. Students can become easily overwhelmed, which reflects in their field performance. Second, communication and collaboration between field educators, practicum sites, and students is important as Botham &

Nicholson (2013) found poor communication and student fear of discrimination negatively impact outcomes. If students see faculty making efforts to create opportunities and provide supports, they may disclose their mental health concerns and challenges sooner to receive accommodations and supports navigating barriers and challenges to facilitate positive educational outcomes. And third, research suggests individualized accommodations increase positive outcomes. King (2019) found standard accommodations may or may not be helpful, but consideration of students' circumstances and needs before devising specific accommodations does make a difference in outcomes. Field educator awareness of indicators of mental and emotional distress and accommodations and strategies for supporting students in field education are important, increasing positive student outcomes and determining readiness for practice.

Method

The current descriptive study examined field educator perceptions and practices in providing accommodations to social work students with mental health concerns and their impact on student completion of field practicum. The study also explored of whether field educators with positive perceptions about students with mental health concerns are more likely to provide accommodations. The study used non-probabilistic, purposive sampling of social work field educators, using an online survey exploring work with students with mental health concerns. An online survey was selected for the study to increase the number of participants and provide anonymity. It is hoped the results of the study add to the limited knowledge about accommodations specific to mental health concerns in social work field practicum and provide further direction for future research.

Recruitment

Field educators in schools and programs accredited by the Council on Social Work Education (CSWE) were emailed invitations to participate in the study via the CSWE Field Director and Baccalaureate Program Directors (BPD) Listservs. The invitation included an explanation of the study, assurance of anonymity, confidentiality, and an advisory that participants may discontinue the survey at any time up until submission. Inclusion in the study required participants indicate they worked with at least one social work student with mental health concerns in the past year.

Data Collection

Qualtrics software was selected as the survey platform for its user-friendly design and security features. A 49-question survey was developed for this study, based on a review of the literature. After a pilot survey with peers, minor changes were made to the language of questions and response choices. The question format included 8 closed-ended questions, 11 multiple-choice questions, 4 multiple-selection questions, 25 Likert scale questions, and one optional open-response question. Recruitment and data collection took place over six weeks, from January to March 2020, and a reminder email was sent three weeks after the initial email.

The survey consisted of 10 sections. The first section of the survey included four closed-ended questions inquiring about participants' experience with students with mental health concerns. The second section included one multiple-response question inquiring of practice settings of students' placements. The third section of the survey consisted of 12 Likert scale questions exploring field educator attitudes and perceptions about social work students with mental health concerns. The fourth section of the survey consisted of a multiple selection question of 29 observed impairment behaviors attributed to confirmed mental health concerns or perceived mental health concerns. Twenty-nine behaviors were identified in the literature

(Collins & Mowbray, 2005). *Confirmed mental health concerns* were defined as being based on student reports of a mental health diagnosis. *Perceived mental health concerns* were defined as field educator impressions of a student's behaviors indicating a possible unreported mental health concern. Participants were asked to indicate all behaviors observed in students with confirmed or perceived mental health concerns. The fifth section of the survey consisted of 13 Likert scale questions exploring field educator facilitation of accommodations. *Educational accommodations* were defined as modifications in a student's learning environment, courses, or curriculum, enabling students with a disability or impairment to participate in educational pursuits (U.S. Department of Education, 2007). The sixth section of the survey consisted of a multiple-selection question inquiring of the types of accommodations or strategies field educators facilitated for students with mental health concerns. Twenty-one accommodations and strategies were found in the literature (Job Accommodations Network, 2019; Peters & Brown, 2009). The seventh section of the survey consisted of four multiple-choice questions inquiring of student performance in field practicum. The eighth section of the survey consisted of four closed-ended questions inquiring of field educators' personal familiarity with mental health concerns, whether confirmed or perceived. The ninth section of the survey consisted of seven multiple-choice questions inquiring of demographic information. The tenth section of the survey consisted of an optional open response question inviting participants to share additional information about faculty experiences working with students with mental health concerns in field practicum. This section was included in case the survey missed something of significance in the experiences and thus needed field educators to provide further direction for future study.

Data Analysis

Quantitative data were exported from Qualtrics into Statistical Package for the Social Sciences V. 26 (SPSS). Descriptive analysis was performed to analyze demographic information, practice settings, impaired behavior, and accommodations. Correlational analysis was performed to explore possible connections between field educators with positive perceptions and provision of accommodations. Statistical significance was set at .05 in line with commonly used level of significance used in social research (Rubin & Babbie, 2017). A two-tailed t-test was utilized.

Protection of Human Participants

Qualtrics software was used for the survey platform for its user-friendly design and security features. No identifying data were collected from participants. Participants were advised they may terminate participation in the study at any time up until submission of the survey. Survey data and analysis were stored on a password-protected, encrypted University cloud storage platform. The Institutional Review Board of the University of St. Thomas approved the study.

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Results

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The purpose of the study was to first explore field educators' attitudes and perceptions about and practices with social work students with mental health concerns. The findings presented a descriptive analysis of field educator experiences with students with mental health concerns, placement settings, and observed impaired behaviors. Second, field educators' attitudes and perceptions were explored. And third, field educators' practices in terms of accommodations and supports were disclosed.

Participant Demographics

Due to the constant changes in listserv membership, it was not possible to calculate the response rate. The sample size of the study was determined by the number of participants reporting they worked with at least one student with a mental health concern in the past year and completing the survey. Of 151 participants, two participants were excluded due to reporting no experience with students with mental health concerns. An additional 25 participants were excluded due to failure to respond to at least one section of the study. The final number of participants included in the study was 123.

Participants were asked to provide demographic information, including their age, racial/ethnic identity, faculty position, years of experience, social work program level, and type of institution. Participants identified age ranges of 21-30 years to 81 or more years, with most participants being 31-40 years (24.2%); 41-50 years (30.8%); 51-60 years (30.0%). Participants represented multiple racial/ethnic identities, including African American (15.3%); Asian (1.7%); Caucasian (69.9%); Hispanic/Latino (2.5%); Native Peoples (.8%); Biracial/Multiracial (2.5%); and other people of color (8.3). Five participants opted not to identify their race/ethnicity. Participants represented a range of faculty positions and years of experience which was represented in five-year increments. Participants represented all social work programs levels and types of institution. A reasonable amount of diversity was evident across the sample population as indicated in Table 1.

Table 1

Participant Demographics

	n	%		n	%
Age			Years of Experience		
21-30 years	1	.8%	0-4 years	25	20%
31-40 years	29	24.2%	5-9 years	28	23.1%
41-50 years	37	30.8%	10-14 years	20	16.5%
51-60 years	36	30%	15-19 years	20	16.5%
61-70 years	0	0%	20-24 years	15	12.4%
71-80 years	10	8.3%	25 or more years	13	10.7%
81 or more years	7	5.8%	S.W. Program Levels		
Race/Ethnicity			BSW	43	43%
African American	18	15.3%	MSW	39	31.5%
Asian	2	1.7%	BSW and MSW	31	25%
Biracial/Multiracial	3	2.5 %	DSW/PHD	4	3.2%
Caucasian	86	69.9%	MSW and DSW/PHD	1	3.2%
Hispanic/Latino	3	2.5%	BSW, MSW, DSW/PHD	2	1.6%
Native Peoples	1	.8%	Type of Institution		
Other People of Color	5	8.3%	Private	46	38%
Academic Position			Public	72	59.5%
BSW directors	8	6.6%	Private and Public	3	2.5%
Department chair	4	3.3%			
Field coordinators	18	14.9%			
Field directors	71	58.7%			
Field liaisons	14	11.6%			
Field instructors	4	3.3%			
MSW director	2	1.7%			

**Field Educator Experiences**

Field educators worked with students who disclosed mental health concerns prior to practicum, during practicum, or never disclosed mental health concerns. Field educators also worked with students who demonstrated transient impaired behaviors which negatively impact functioning. Field educators reported working within the past year with students from when they perceived to have a mental health concern based on behaviors (99.2%) or with students they received confirmation of a mental health concern from students or another means (98.3%). In addition, 75.4% of field educators reported students perceived to have mental health concerns

successfully completed field practicum versus 92.2 % of field educators who reported students

with confirmed mental health concerns successfully completing field practicum. Reports of

termination and dismissal were lower for both perceived and confirmed mental health concern

groups, but the pattern remained consistent with students reported to be perceived with mental

health concerns to have higher dismissal and termination rate reports (20.3%) and (1.7%)

respectively.

Field educators reported student placements in a wide variety of practice settings as

indicated in Figure 1. The more frequent practice settings field educators reported included

Immigrant and Refugee Services (62.6%); Children and Family Services (56.9%);

Administration and Management (52.8%); Public Welfare (46.3%); and School Services

(46.3%).

Figure 2

Practicum Settings
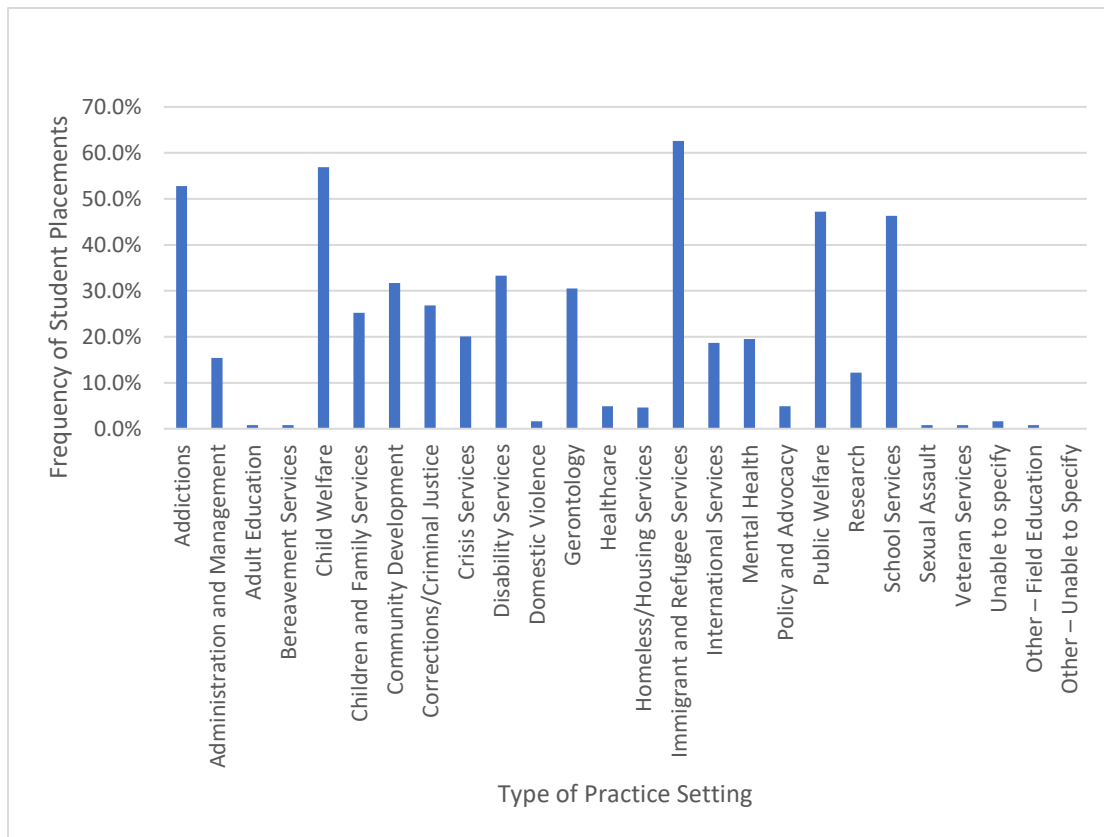
Field educators reported observing impaired behaviors in students perceived to have mental health concerns or have confirmed mental health concerns impacting student performance in field practicum. Of the 38 recorded impaired behaviors, 15 behaviors were reported by at least 50% of field educators as indicated in Table 2. The behaviors included Limited/Lack of self-awareness (68%); Excessive drowsiness (68.2%); Emotional lability (65.6%); Difficulty concentrating (64.3%); Difficulty accepting assistance (61.0%); Difficulty multitasking (60.4%); Difficulty completing assignments (59.1%); Overly reactive to changes (57.8%); Disorganized thinking (57.1%); Fluctuations in Mood (55.8%); Excessive fatigue (53.9%); Heightened anxiety (53.9%); and Excessive Absenteeism (51.9%).

Table 2

Impaired Behaviors Reported by Field Educators

Behaviors	N = 123
Limited/Lack of self-awareness	68.8%
Excessive drowsiness	68.2%
Emotionally labile	65.6%
Difficulty completing assignments	64.3%
Behavior changes	61.0%
Difficulty multitasking	60.4%
Difficulty accepting assistance	59.1%
Overly reactive to changes	57.8%
Disorganized thinking	57.1%
Fluctuations in mood	55.8%
Excessive fatigue	53.9%
Heightened anxiety	53.9%
Excessive absenteeism	51.9%
Difficulty concentrating	48.7%
Slowed response time	48.7%
Grandiose thinking	47.4%
Difficulty relating to others	46.1%
Excessive lateness	44.8%
Limited coping skills	42.2%
Difficulty accepting feedback	40.9%
Difficulty recognizing problems	37.7%
Easily distracted	37.0%
Limited/Lack of impulse control	37.0%
Paranoid thinking and behavior	37.7%
Limited/Lack of self-regulation	31.8%
Difficulty following instructions	28.6%
Lack of initiative	24.0%
Memory issues	5.8%
Attendance issues	.60%
Hygiene concerns	.60%
Inappropriate Boundaries	.60%
Lack of adherence to medication regime	.60%
Lack of awareness	.60%
Reluctance to participate	.60%
Violent behavior	.60%
Under the influence	.60%
Threatening behavior	.60%
Unable to specify	.60%

Attitudes and Perceptions

Field educators responded to statements exploring attitudes and perceptions about students with mental health concerns in field practicum. While 26% and 28% of field educators indicated Strongly Agree and Agree respectively with the statement that "All students with mental health concerns have potential for successful completion of field practicum," 25% and 72% indicated Strongly Disagree or Disagree with the statement that "Students with mental health concerns have little to no potential for successful completion of field practicum," Similar patterns occurred with the statements, "Students with mental health concerns can never be considered emotionally stable," and "Students with mental health concerns should not be admitted to social work programs". For these last two statements, no field educators indicated any level of agreement or neutrality for the statements. While field educators indicated 26% and 40% Strongly Agree and Agree respectively to the statement, "Students with mental health concerns should be treated the same students with physical limitations or learning difference," 43% indicated Strongly Disagree and 44% indicated Disagree with the statement "Students with mental health students should be subjected to different standards than other students." Field educators responded affirmatively to statements that students should be assisted. For the statement, "Field educators should make efforts to provide reasonable supports to students with mental health concerns," 56% indicated Strongly Agree and 35% indicated Agree. And finally, for the statement, "Field educators should facilitate student development of self-awareness, self-regulation skills, and contingency plans regarding mental health concerns," 60% indicated Strongly Agree and 29% indicated Agree.

Field educators responded to several statements developed to explore their attitudes in working with students with mental health concerns. In general, field educators indicated strong

positive attitudes for working with students. For the statement, "I am willing to work with students with mental health concerns."73% indicated Strongly Agree and 26 % indicated Agree with none disagreeing. With similar results for the statement, "I am willing to make accommodations for students with mental health concerns," 62% indicated Strongly Agree and 34% Agree.
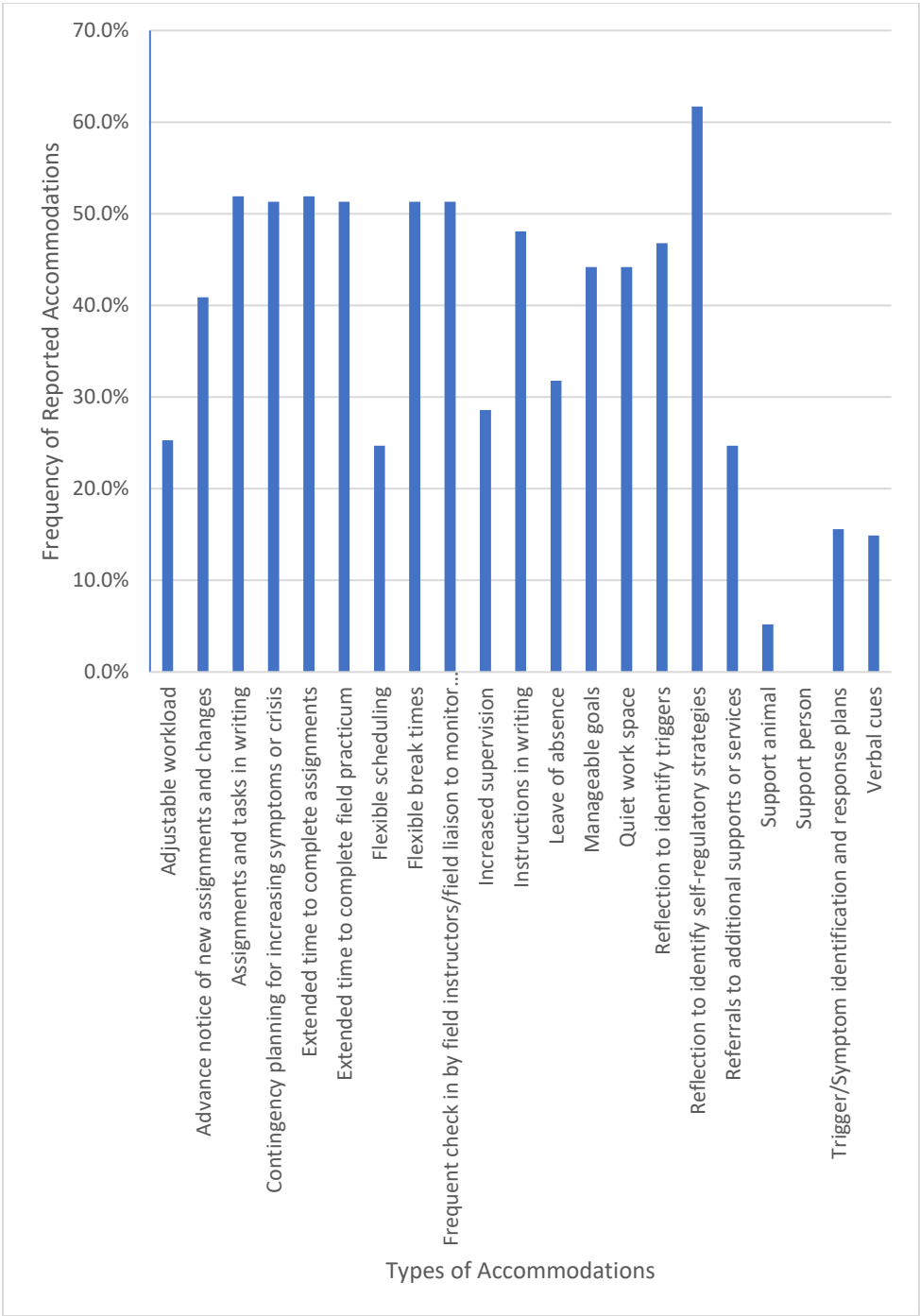
Practices

Field educators responded to a series of statements about facilitating accommodations. The results indicated most field educators reported providing accommodations and supports to students. For the statement, "I have made accommodations for students with mental health concerns," 57% indicated Strongly Agree and 31% indicated Agree while only 2% indicated Disagree. For the statement, "I have created supports for students beyond official accommodations letters," 37% indicated Strongly Agree and 42% indicated Agree. Responding to "I have spent more time providing guidance, support, and monitoring progress of students with mental health concerns than other students," 50% indicated Strongly Agree and 37% indicated Agree. Finally, for the statement, "I have advocated with field agencies on behalf of students with mental health concerns," 29% indicated Strongly Agree and 49% indicated Agree.

Field educators were asked to indicate accommodations implemented with students with mental health concerns in field practicum as shown in Figure 2. A diverse range of accommodations were reported. The most reported accommodations included Reflection to identify self-regulatory strategies (61.7%); Contingency planning for increasing symptoms or crisis (51.9%); Extended time to complete assignments (51.9%); Extended time to complete practicum (51.3%); and Frequent check-in by field instructors/field liaisons to monitor changes in thinking, mood, and behavior (51.3%).

Figure 3

Accommodations

Attitudes/Perceptions and Practices Correlation

Pearson Correlations between field attitudes and perceptions and practices in providing accommodations were conducted. While no significant correlations between attitudes and perceptions with practices of field educators was evident for most of the indicators, the following lower moderate significant correlations were found: Willing to work with students with mental health concerns, Willing to make accommodations with students with mental health concerns, Have spent more time with students; and Willing to advocate for students. First, Willing to work with students with mental health concerns was negatively correlated with the following attitudes and perceptions: Attitude 3 - Only certain types of mental health concerns have potential for successful completion of field practicum ($r = -.312$, $p < .001$); Attitude 4 – Students with mental health concerns have little to no potential ($r = -.391$, $p < .001$); Attitude 5 – Students with mental health concerns can never be considered emotionally stable ($r = -.308$, $p < .001$); and Attitude 6 – Students with mental health concerns should not be admitted ($r = -.464$, $p < .001$). Attitude 11 – Field educators should make efforts is positively correlated ($r -.399$, $p < .001$). Second, Willingness to make accommodations was negatively correlated with the following attitudes and perceptions: Attitude 4 – Students with mental health concerns have little to no potential ($r = -.399$, $p < .001$); Attitude 5 – Students with mental health concerns can never be considered emotionally stable ($r = -.359$, $p < .001$); and Attitude 6 – Students with mental health concerns should not be admitted ($r = -.399$, $p < .001$). Attitude 11 – Field educators should make efforts is positively correlated ($r = .456$, $p < .001$). Third, Have spent more time with students with mental health concerns was negatively correlated with Attitudes 4 and 5. Attitude 4 – Students with mental health concerns have little to no potential ($r = -.327$, $p < .001$); Attitude 5 – Students with mental health concerns can never be considered emotionally

stable (r = -.305, p < .001). And fourth, Have advocated for students had a weak, negative

correlation (r = -.300, p < .001).

Discussion

This study reported the descriptive results of a survey exploring the attitudes,

perceptions, and practices of social work field educators regarding students with mental health

concerns. The question of whether field educators with positive attitudes and perceptions about

students with mental health concerns are more likely to provide accommodations was

examined. In general, findings indicated that field educators described positive attitudes or

perceptions about students with mental health concerns, and field educators provided

accommodations and supports to facilitate student development. Despite the findings, it was

noted the strength of the correlations between attitudes and perceptions, and accommodations

were in the weak to lower moderate ranges. These findings were counter to the findings that

99.3% and 98.3% of field educators reported facilitating accommodations in general for

students with perceived and confirmed mental health concerns, respectively.

These findings corroborated the study of Murray, Wren and Keys (2008) in which

faculty reported positive perceptions about students but were inconsistent in their practices in

providing accommodations with students. Another explanation for the weak correlations could

be the phenomena of social desirability with social work faculty reporting positive attitudes and

practices because it is what is expected of faculty and especially expected of social workers. If

this is the case, Mazza's (2015) findings, that when social work faculty became aware of early

indicators of emotional and mental distress, faculty can create opportunities to help students

meet psychosocial and environmental challenges, are important to consider.

With most field educators reporting they worked with a student with a perceived and confirmed mental health concern in the past year, it was noted that while 92.2% of students with confirmed mental health concerns were reported to successfully completed field practicum, only 75.4% of students with perceived mental health concerns successfully completed field practicum. This difference may be a result of students' decisions to delay or not disclose their mental health concerns nor seek accommodations, therefore limiting field educators' knowledge and capacity to support them. And finally, it should be considered that field educators may not have extended accommodation if there was no confirmed mental health concern. The findings were in line with the findings of Mazza (2015) that when social work faculty are aware of students' concerns and needs, they can respond accordingly. Thus, students whose field educators were aware of student mental health concerns may have been more likely afforded more accommodations and supports.

Strength and Limitations

The study has several strengths. First, the sample size is good for a survey. Second, the demographic representation of participants is diverse. Third, the survey allows for a broader participant sample as opposed to geographic and time restrictions, which would accompany data collection via interviews. Fourth, the anonymity may have fostered honest responses. And fifth, the information collected provides a foundation for future research.

Addressing the limitations that could impact the significance of the findings of the study are important to consider before considering implications. First, 17.8% of the study's participants were eliminated from the analysis due to either indicating they had not worked with students with mental health concerns, or they opted not to complete the items about attitudes and perceptions on students with mental health concerns which was essential to the study.

Elimination of this group of respondents could have biased the findings. Second, the study's sample population consisted primarily of field directors, field coordinators, and field liaisons. The attitudes and perceptions and practices of agency field instructors was essential in understanding this phenomenon. Third, this study was a cross-sectional design that used descriptive and correlational analysis, so causality could not be established. It is also not possible to determine if social desirability impacted the results. Fourth, participants may have had difficulty clearly recalling information about students and interventions implemented. Fifth, extraneous variables could have impacted faculty perceptions and practices. Despite the limitations, the study provided a beginning point for an important discourse in social work field education.

Implications for social work education

The findings of the study suggested field educators may benefit from targeted training aimed to impact perception and increase knowledge. Field educators (faculty and agency field instructors) may benefit from training to increase awareness about mental health concerns in students to debunk myths and misunderstandings about student capacity and potential. Field educators also may benefit from training about signs of behavior concerns in educational and practice settings, supportive strategies, accommodations specific to field practicum, and available resources. In fact, the research recommends consideration be given to incorporating trainings and creating processes to address mental health concerns as a part of universal design of social work curriculum, as mental health concerns can be transient or chronic experiences.

Suggestions for future studies

Future research should address the limitations of the exploratory study including replication to see if the findings are replicable or if the findings change if the sample changes.

Consideration should be given to conducting the study with field instructors in field sites as opposed to school-based field educators, as agency field instructors spend more time with students providing one-on-one instruction and mentoring. Qualitative studies should be conducted with site field instructors could be beneficial to determine the factors that should be considered in the statements for a quantitative survey. Finally, student experiences with accommodations and support in field practicum must be explored for clearer understanding of their lived experience and development of supportive educational strategies.

Conclusions

Field education is a key component of social work education as the signature pedagogy. Therefore, it is essential that research, resources, and training be a priority, ensuring students with mental health concerns are supported by prepared and experienced field educators. First, field educators must be able to recognize when to use strategies and supports to empower students in field practicum and when to empower students to consider other career opportunities. Second, field educators must be prepared to work with the student learning to manage a chronic experience or a transient experience. Third, field educators must be objective and just. And fourth, more research is needed regarding mentoring students with mental health concerns in social work field education.

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Field Educator Perceptions of and Practices with Students with Mental Health Concerns:

Poster Presentation

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Abstract

This paper provides an overview of the virtual poster presented at the 2020 Council on Social Work Education Annual Program Meeting. The poster presentation was based on the findings of a research study conducted as the second product of the Banded Dissertation "Social Work Students with Mental Health Concerns: Eliminating Barriers and Creating Supports in Field Education". The poster reviewed the findings of an online survey completed by 123 field educators. The study explored the perceptions and practices of field educators working with students with mental health concerns in field practicum. The findings indicated field educators overall had positive perceptions about students with mental health concerns; are more apt to facilitate accommodation; and students with accommodations have more positive outcomes.

Keywords: field education, accommodation, impairment, mental health, social work students

Field Educator Perceptions of and Practices with Students with Mental Health Concerns:

Poster Presentation

The poster, "Field Educator Perceptions of and Practice with Students with Mental Health Concerns," was presented during the Council on Social Work Education (CSWE) Annual Program Meeting that was held virtually November 16-20, 2020. Objectives of the presentation were to help viewers consider the implications of faculty perceptions on practices, identify indicators of possible mental health impairment, and consider various accommodations appropriate in field practicum. Thus, the presentation provided a summary of an online research survey conducted in Spring 2020, exploring the perceptions and practices of field educators working with social work students with mental health concerns. The study is the second product of the Banded Dissertation, Social Work "Students with Mental Health Concerns: Eliminating Barriers and Creating Supports in Field Education".

As the number of students requiring accessibility and accommodations in post-secondary education increases (Belch, 2004; Howlin et al., 2014; Kim & Lee, 2016), it stands to reason that the number of students with mental health concerns increases. Students fall along a continuum: readiness or willingness to declare their mental health concerns and request accommodations; capacity for self-awareness and self-regulation; and readiness for practice. Based on social work's commitment to equal access to services, resources, and opportunities for marginalized populations (National Association of Social Workers, 2017; Stromwall, 2002), it is essential that field educators be knowledgeable in recognizing, developing, and implementing practice related accommodations specific to student needs. Field educators need an understanding of the types of accommodations specific for students with mental health concerns.

University disability service offices typically issue accommodations for classroom settings. The accommodations typically do not translate well to specific needs of field practicum settings. The limited research on accommodations related to students with mental health concerns in social work practicum (Jorgensen et al., 2018; Kim & Lee, 2016), prompted the preliminary study to learn more about the perceptions and practices of field educators as an initial step in determining ways to support students with mental health concerns.

This study recruited 123 field educators from the Council on Social Work Education (CSWE) Field Directors' Listserv and the Baccalaureate Program Directors' (BPD) Listserv to participate in an online survey that explored associations between field educator attitudes and perceptions and their practices with students with mental health concerns. The survey consisted of 49 questions inquiring about their experiences as field educators with students with mental health concerns; observance of impaired behaviors in students; accommodations facilitated; and overall student performance in field practicum. Field educators answered questions based on students they perceived or were confirmed to have mental health concerns. The concerns were transient or chronic in nature.

Field educators reported a wide range of observed or reported impaired behaviors and used a range of accommodations. Overall findings of the study indicated while 99% of field educators reported positive attitudes and perceptions of students with mental health concerns, the association between attitudes and perceptions and facilitation of accommodations was in the low to moderate ranges, which indicated there may be opportunities for faculty development. The findings also indicated students with confirmed mental health concerns successfully completed field practicum at a rate of 92.2% while students with perceived mental health concerns successfully completed field practicum at a rate of 74.4%. The findings corroborate

previous research that faculty perceptions can impact facilitation of practice related

accommodations in that faculty awareness of psychosocial and environmental challenges allows

for opportunity for development of accommodations specific to students' needs, thereby

increasing the likelihood of successful course completion (Mazza, 2015, 2015; & Murray et al.,

2008). See Figure 4.

The virtual conference platform did not allow for presenter and participant interaction.

However, participants viewing the poster had access to listen to a six-minute audio recording

summary of the research study.

Figure 4

Poster Presentation
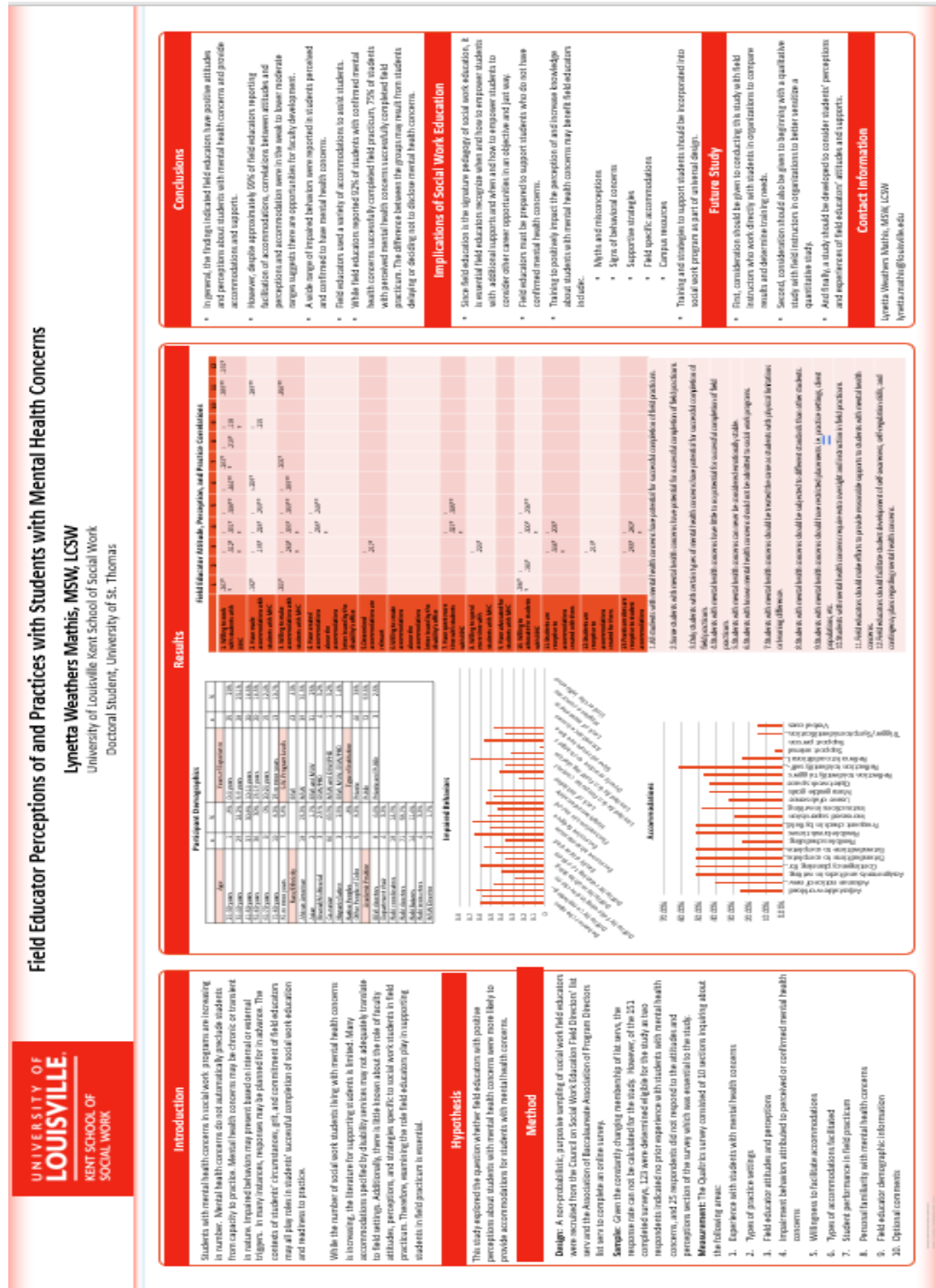
Audio Recording Script

Welcome to the poster presentation on Field Educator Perceptions of and Practices with Students with Mental Health Concerns.

My name is Lynetta Weathers Mathis, and I am the Director of Field Education at the University of Louisville Kent School of Social Work. I am also a doctoral student at the University of St Thomas, St. Paul, Minneapolis. This study was conducted as a part of my Banded Dissertation.

In this study, I recruited field educators subscribed to the CSWE Field Director's Listserv and BPD Listserv to participate in an online survey to learn more about the experiences of field educators with students with mental health concerns, impaired behaviors, accommodations, and student performance in field practicum. And specifically, I wanted to test the hypothesis that field educators with positive attitudes and perceptions about students with mental health concerns were more likely to provide accommodations and supports to students.

Of the 151 respondents to the survey, 149 met the eligibility criteria. Twenty-six respondents were excluded from the study due to not completing the section covering field educator attitudes and perceptions, which was essential to the study. This left a sample population of 123 participants.

The survey consisted of 10 sections with a total of 49 questions covering

1. Experience with students with mental health concerns

2. Types of practice settings

3. Field educator attitudes and perceptions

4. Impaired behaviors attributed to perceived or confirmed mental health concerns

5. Willingness to facilitate accommodations

6. Types of accommodations facilitated

7. Student performance in field practicum

8. Personal familiarity with mental health concerns

9. Field educator demographic information

10. Optional comments

The respondents were primarily field directors, field coordinators, and field liaisons, and they answered questions about students who they perceived to have mental concerns and students with confirmed mental health concerns. These concerns were chronic or transient in nature and were evident through a wide range of observed or reported impaired behaviors.

Field educators reported using a range of accommodations and supports. And overall findings confirmed the hypothesis that field educators with positive attitudes and perceptions about students with mental health concerns are more likely to provide accommodations. However, it was interesting to note that though approximately 99% of field educators reported facilitating accommodations for students with perceived and confirmed mental health concerns, the correlations between attitudes and perceptions and the provision of accommodations were in the weak to lower moderate ranges, which suggests there are opportunities for faculty development.

In addition, the findings that students with confirmed mental health concerns receiving accommodations successfully completed field practicum at a rate of 92.2% while students with perceived mental health concerns successfully completed field practicum at a rate of 75.4% is in line with previous research findings that students who receive accommodations and support are more likely to successfully complete coursework and degrees. In this study, the difference

between the two groups of students may be a result of student decisions to delay disclosure or not to disclose a mental health concern thus foregoing the benefits of accommodations.

Regarding implications for social work education, I believe field education is the heart of social work education. Field educators must be prepared to empower students with mental health concerns to seek and utilize accommodations or consider other career opportunities in an anti-oppressive way.

Field educators must recognize impaired behavior regardless of being aware of confirmed mental health concerns and must facilitate or create relevant accommodations and supports to foster student success.

Field educators can benefit from training to promote positive perceptions of students with mental health concerns to correct myths and misconceptions, increase knowledge of strategies and resources, and empower educators.

In fact, incorporating ways to address mental health concerns should be a consideration of universal design for all social work programs, as any student can experience a mental health concern and impairment at any given time during the program. As educators, we should provide the tools and modeling for fostering resilience and self-management.

In terms of future study, as participants were primarily field directors, field coordinators, and field liaisons, consideration should be given to replicating the study with field instructors who work directly with students in field sites.

Please feel free to contact me with questions regarding this study.

Thank you.

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