Teacher Perceptions of the Role of School Psychologists: Needs and Expectations

by

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TEACHER PERCEPTIONS OF SCHOOL PSYCHOLOGY

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TEACHER PERCEPTIONS OF SCHOOL PSYCHOLOGY

Abstract

Teachers working in Nova Scotia were surveyed to determine their perceptions and knowledge of school psychologists and the services they deliver in the province. Teachers’ service needs were also examined. Results of the study indicate that teachers value the psychological services that school psychologists currently provide, but strongly desire an increase in the time dedicated to these services. According to nearly half of the teachers, school psychologists were currently on-site and available for services at their school approximately one day per week. Teachers indicated that they would like school psychologists to be more visible than this, reporting three days per week as ideal. A considerable number of teachers were uncertain about how accessible school psychologists currently were at their school. Teachers were aware of the considerable amount of time school psychologists spend dedicated to psychoeducational assessments, yet favoured an increase in the amount of time school psychologists spend in other service roles. Specifically, teachers expressed a desire for more comprehensive mental health services, especially in the areas of behavior support, prevention, and counselling. Most teachers reported being somewhat knowledgeable about school psychologists’ training and considered school psychologists to be primarily specialists in behavior, but noted that they also received training in cognitive disability, mental health, student learning, and research. Practical implications for school psychologists and school psychologist/teacher collaboration are discussed.
CHAPTER ONE

Literature Review

Introduction to Mental Health

Mental health in childhood and adolescence is a state of well-being that is defined by the attainment of expected social, emotional, cognitive, and developmental milestones and by establishing secure attachments, developing positive relationships with others, and possessing the coping skills needed to deal with life’s challenges (Hoagwood, Jensen, Petti, & Burns, 1996; Mental Health Commission of Canada, 2012). Fostering the social and emotional wellness of children is critical to healthy child development and can help reduce the risk of developing mental health problems and illness later in life (Mental Health Commission of Canada, 2012). Mentally healthy children and adolescents are more resilient, free from disabling symptoms of psychopathology, and function well at school, home, and in their communities (National Association of School Psychologists, 2006). However, many children have mental health problems that interfere with typical development. Recent data indicate that mental health problems are currently the leading health concern affecting Canadian children (Mental Health Commission of Canada, 2012; Waddell, McEwan, Shepherd, Offord, & Hua, 2005). Seventy percent of mental health problems have their onset during adolescence and by age 17, 14 to 25 percent of adolescents will have one or more clinically significant mental health disorders that will interfere with their development and impair their functioning (Canadian Institute for Health Information, 2009; Costello, Mustillo, Erkanli, Keeler, & Angold, 2003; Kutcher, 2009; Waddell, Shepherd, Chen, & Boyle, 2013). This means that 800,000 Canadian children aged 4 to 17 years will experience significant distress associated with mental health problems such as depressive disorders, anxiety disorders, attention-deficit hyperactivity disorder (ADHD), conduct
disorders, pervasive developmental disorders, schizophrenia, and bipolar disorder (Canadian Institute for Health Information, 2009; Waddell et al., 2013; Waddell, Offord, Shepherd, Hua, & McEwan, 2002). Despite more than a decade of research confirming the benefits of mental health prevention and early intervention, Canada could be doing more to help its children and youth. Promotion and early identification followed by effective intervention reduces the demand for services in the mental health system, as well as in other sectors, such as education and the criminal justice system (Mental Health Commission of Canada, 2012). Although 70 percent of mental health cases that appear in youth can be addressed through early prevention and intervention, only one out of five children with a diagnosable mental health condition receives any form of intervention, and worse, only one to two percent are treated by a professional with specialized training in mental health (Canadian Mental Health Association, 2014; Costello et al., 2003; Saklofske, Schwean, Bartell, Mureika, Andrews, Derevensky, & Janzen, 2007). Statistics on child mental health disorders are similar in the United States (e.g., Gutkin, 2009). It is estimated that nearly half of the United States’ population will develop a mental disorder over the course of their lifetime (Centers for Disease Control and Prevention, 2011) and of those experiencing mental illness, nearly 60 percent will not receive treatment (Kessler, Berglund, Demler, Jin, & Walters, 2005). For many of those who do receive treatment, they will receive mental health care from someone who has been inadequately trained to provide those services (Wang, Lane, Olfson, Pincus, Wells, & Kessler, 2005).

**Outcomes for Untreated Mental Health Disorders**

If efforts are not made to successfully prevent and treat mental health problems early in childhood, the implications are profound (Waddell et al., 2005). Depending on the severity of symptoms, mental health concerns can place children onto life trajectories that significantly
affect health and well-being. In general, children with any mental disorder are at an increased risk of impaired functioning and having a mental illness in adulthood, which could result in a decrease in their quality of life (Costello et al., 2003). Specifically, children who are not identified and treated early have been shown to be at greater risk for poor academic functioning, substance abuse, unemployment, criminal behaviour, and poverty (Fergusson & Woodward, 2002). Even more alarming is the fact that an estimated 90 percent of children who commit suicide have a mental health disorder (United States Department of Health and Health and Human Services, 1999).

As children with emotional and behavioural disorders age, the severity of their symptoms intensifies and related behaviour problems, such as criminal behaviour and substance abuse, are more likely to emerge if they do not receive intervention. The likelihood of developing other psychiatric disorders also increases (Mihalas et al., 2009). For example, children diagnosed with conduct disorders are eight times more likely to have been diagnosed with Attention Deficit Hyperactivity Disorder (ADHD) as adolescents and those diagnosed with ADHD are twice as likely as their peers without ADHD diagnoses to be diagnosed with an anxiety or substance abuse disorder in adulthood (Mental Health Commission of Canada, 2012). Estimates suggest that the number of federal offenders with serious mental health problems entering the correctional system has increased by 60 to 70 percent since 1997. Clearly, early identification and intervention could have beneficial effects with respect to reducing the number of youth who end up in the criminal justice system (Mental Health Commission of Canada, 2012). Unfortunately, because many children at risk of mental health difficulties are not identified at an early and critical point, their prognosis is poor and they will be disadvantaged long-term
(Waddell et al., 2005). Taken together, the evidence clearly indicates that early identification and intervention is crucial for children and youth at risk of mental health difficulties.

Forty percent of all children experience educational consequences and are at risk of failing to succeed due to mental illness, poverty, family circumstances, and inadequate health care (Adelman & Taylor, 2000). Specifically, the relation between mental illness and academic outcomes is overwhelmingly negative. Poor mental health increases the risk that a student will fail more courses in school, be retained more often, have lower grade point averages, be absent from school more frequently, and drop out of high school (Mihalas et al., 2009). Meldrum, Venn, and Kucher (2009) noted that feeling stigmatized, socially isolated, and unhappy are likely reasons that youth with mental disorders drop out of school, which only further impedes their social development and well-being.

**Mental Health in Schools**

Given the statistics noted above, it is clear that mental health care is not just the concern of the health care system. One in five children in the average classroom will suffer from some form of mental disorder (Kucher, Venn, & Szumilas, 2009). Given that children and youth spend a substantial amount of time in school, the educational context provides a unique opportunity for the provision of initiatives related to positive mental health. Using school as a venue for mental health services is convenient, cost efficient, and provides access to the greatest number of children and youth in need of support (Stewart, 2008; Waddell et al., 2005). For the majority of children who have mental health problems, or who are at risk for these conditions, the school system has emerged as the primary provider of mental health services. In the United States, it has been estimated that 70 to 80 percent of children who receive mental health services receive them in school (Burns, Costello, Angold, Tweed, Stangl, Farmer, & Erkanli, 1995). As
children enter into adolescence, schools may be even more instrumental as a prevention and intervention site than the home context, given the powerful impact that the support of teachers and school personnel have in the educational setting (Stewart, 2008; Stewart, Sun, Patterson, Lemerle, & Hardie, 2004).

Schools can be an important location for mental health promotion, early identification and intervention, and for providing empirically validated treatments. A report released by the Canadian Council on Learning (2009) acknowledged that, although poor mental health is a significant risk to academic development, schools are well positioned to implement public health strategies designed to prevent and detect mental health disorders. However, the current delivery model is primarily focused on providing psychological support and services to children with only the most severe and recognizable conditions and does not address those children who have less severe difficulties or who are at-risk of developing mental health difficulties. Specifically, there is an excessive reliance on remediation strategies rather than prevention services and instead of early intervention, the provision of professional resources is typically postponed until after psychological problems have become manifest and a child is in full-blown crisis (Albee, 2005). This is particularly disheartening considering the strong empirical support for the value of school-based prevention in reducing the rates of mental health problems, such as depression, anxiety, behavioural disorders, and poor academic achievement (Gutkin, 2009). Increasing a focus on the delivery of primary prevention services could create more effective schools and classrooms, thereby leading to greater psychological health and better academic achievement for all students (Strein, Hoagwood, & Cohn, 2003).

Educators and practitioners from both the education and health sectors have recognized the importance of mental health on learning outcomes and the potential roles that schools can
play in the promotion of positive mental health for all students, including those already identified in need of services and those at risk for mental health problems in the future (Aldinger, Zhang, Liu, Pan, Yu, Jones, & Kass, 2008). However, services provided for students with mental health difficulties or disorders are often fragmented and lack the collaboration from professionals from different disciplines that is necessary to ensure good outcomes. Additionally, teachers often lack the necessary knowledge or skills to meet the needs of students with mental health issues and many students are not identified and or given appropriate supports soon enough (Mihalas et al., 2009). In a survey conducted by the Canadian Teachers’ Federation (2011), working in collaboration with the Mental Health Commission of Canada, most of the 3900 Canadian teachers sampled reported that they had not received any professional development in mental health, yet over 96 percent of teachers reported that they would be interested in learning more about this area. They acknowledged that their lack of appropriate training could hinder their abilities to recognize, understand, and implement strategies related to mental health to students in need. Further, 89 percent of the teachers noted a shortage of mental health professionals in schools. Additional barriers to the provision of mental health services, as reported by the teachers surveyed included a lack of financial resources allocated for school-based mental health services, an insufficient number of community-based mental health professionals, and a lack of coordinated services between the school and the community (Canadian Teachers’ Federation, 2011).

Clearly, there is a need for greater investment in the mental health of children and youth and improved coordination among health, education, and mental health services if the effect of mental health problems on multiple facets of functioning is to be reduced. If children are to receive appropriate and timely developmental and educational experiences, it is critical that
mental health become a fundamental part of the education agenda (Canadian Teacher’s Federation, 2011). Whereas teachers can be part of the solution, they need the assistance and support of practitioners who are trained to assess and understand mental health and the factors experienced by children at risk for poor school outcomes (Mash & Dozois, 1999).

**School Psychologists: Mental Health Experts**

Among all other mental health professionals and school personnel, school psychologists are well positioned to create and implement theoretically sound, evidence-based mental health initiatives in schools. They are uniquely trained to integrate their knowledge of psychology and evidenced-based practices to child development, school curriculum, and the learning outcomes of students (Canadian Psychological Association, 2014; Cole & Siegel, 2003; Mureika, 2007; Nastasi, 2000; National Association of School Psychologists, 2000a). Moreover, because school psychologists possess expertise in mental health and education, they have been recognized as being uniquely qualified to serve as mental health specialists in the school setting (Nastasi, 2000; NASP, 2006). Nastasi (2004) highlights the school psychologist’s role as one that facilitates prevention initiatives, the development and implementation of classroom-based programs, small-group and individual interventions, and educational programs for teachers, parents, students, and community members. In addition, the school psychologist is adept at referring to and coordinating with other levels of care (e.g. community based mental health services) when longer term or specialized services are required.

The National Association of School Psychologists (NASP), a non-profit association in the United States, whose mission is to support and represent school psychology and enhance the educational competence and mental health of all children, has adopted and promoted a set of guiding standards for the preparation, credentialing, and professional practice of school
psychologists (NASP, 2012). The Standards for Training and Field Placement Programs in School Psychology (NASP, 2000a) contributes to the development of effective services by outlining the knowledge and comprehensive training experiences needed to demonstrate entry-level competency in a number of domains of professional practice in school psychology. According to the Standards, within the domain of Prevention, Crisis Intervention, and Mental Health, school psychologists should be trained to deliver or contribute to prevention and intervention programs that promote the mental health and overall well-being of students (NASP, 2000a). In addition to the set of standards on mental health training, NASP published a statement on the provision of mental health services in schools. Within the position paper, NASP advocated for the implementation of comprehensive mental health services in schools in an effort to help students overcome learning barriers (NASP, 2003b). The National Association of School Psychologists (2006) stated that school psychologists have the training and skills to implement prevention, intervention, and outcomes evaluation that link mental health to education and behaviour. The Canadian Psychological Association (CPA) has similar school psychology guidelines to those developed by NASP, emphasizing the breadth of a school psychologist’s skill set and their unique expertise in evidence-based practices to address the mental health needs of students (Canadian Psychological Association, 2007). Given the recognition of NASP and the CPA within the field of school psychology and these organizations’ influence on graduate training programs, school psychologists should be well qualified to provide comprehensive mental health services in an educational setting.

School Psychology in Nova Scotia

In Nova Scotia, the practice of psychology is regulated by the Nova Scotia Board of Examiners (NSBEP) and all registrants wishing to use the title psychologist in Nova Scotia must
meet NSBEP’s requirements (Psychologists Act, 2000). The title of psychologist is protected by the Nova Scotia Psychologists Act, a law that oversees the practice of psychology and provides title protection for registered psychologists and for individuals on the Candidate Register (Psychologists Act, 2000). To become registered, psychologists must possess a graduate degree in psychology, which includes extensive education, training, and supervised work experience in the registrant’s declared area(s) of competency (Psychologists Act, 2000). Graduate programs (i.e., masters or doctoral) are a minimum of two years in length, with post-degree supervision ranging from one to four years, depending on the degree held by the registrant. To practice in a school setting in Nova Scotia, psychologists are expected to meet the requirements for registration as a psychologist and demonstrate the specialized skills and training that would qualify them to work in a school setting (Psychologists Act, 2001). Specifically, the school psychologist has training in a wide range of areas including prevention, assessment, consultation, intervention, research and program development, advocacy, staff and parent education, systems change initiatives, and mental health care (Cole & Siegel, 2003; Sheridan & Gutkin, 2000).

School psychologists have always been concerned with the mental health of children, as evidenced by the early efforts of school psychologists to establish comprehensive services for children in schools (Fagan & Wise, 2007). Recently, school psychology literature has encouraged school psychologists to respond proactively with respect to providing mental health services (for examples, see Herman, Merrell, Reinke, & Tucker, 2004; Natasi, Varjas, Bernstein, & Pluymert, 1998; Phelps & Power, 2008; Sheridan & Gutkin, 2000) and to provide a continuum of mental health services, addressing primary prevention (i.e., promoting general mental well-being and preventing the onset of problems) as well as implementation of secondary (i.e., minimizing difficulties once they occur) and tertiary services (i.e., stabilizing disabilities and
working to ensure that basic and needed services are provided to those who can be expected to manifest one or more disabling conditions over some years. However, despite the broad training requirements in mental health specified by federal and provincial associations and licensing bodies, as well as the applied experiences gained in practicum and internship settings, school psychologists are often limited in the services they can provide, with many arguing that their skills are underused in the school setting (Gilman & Gabriel, 2004; NASP, 2003a; Sheridan & Gutkin, 2000).

**Discrepancy Between Actual and Desired Roles of a School Psychologist**

The primary roles and functions of the school psychologist have been debated for decades and school psychologists themselves have expressed frustration with their often narrowly defined and limited role (Cole & Siegel, 2003; Corkum, French, & Dorey, 2007; Gilman & Gabriel, 2004). As such, school psychologists frequently cite a desire to expand their scope of service in the school setting (Cole & Siegel, 2003; Corkum et al., 2007; Reschly & Wilson, 1995). Traditionally, school psychology has been limited to a gate-keeping role; that is, school psychologists have been predominantly committed to the referral, testing, and placement of students for special education services (Corkum et al., 2007; Fagan, 2002; Sheridan & Gutkin, 2000). Given their extensive training and expertise in cognitive and academic testing, as well as identification of learning difficulties and disabilities, the school psychologist provides an essential service to the school and the student (Cole & Siegel, 2003; Weiss, Saklofske, Prifitera, & Holdnack, 2006) and psychoeducational assessment is an important tool to identify a student’s strengths and weaknesses and to make recommendations for services and follow-up. Unfortunately, however, the school psychologist is often marginalized into an assessment-only role and does not often have the opportunity to provide other services, such as intervention and
consultation (Fagan, 2002). This is unfortunate because, as previously discussed, school psychologists are equipped with a diverse skill set that extends beyond assessment and these skills can be of considerable benefit to school personnel, parents, and students.

School psychologists have not always devoted the majority of their time to assessment, however. To illustrate this point, Thompson (1983) noted that school psychologists in Canada dedicated only 33 percent of their time to psychoeducational assessment activities; yet despite his predictions that school psychologists would experience a decrease in the time dedicated to this role, school psychologists in Nova Scotia have more recently reported that they spend between 50 to 55 percent of their time conducting assessments (Corkum, French, & Dorey, 2007; Reschly, 2000; Thompson, 1983). Nastasi (2000) and Sheridan and Gutkin (2000) also predicted that school psychologists would broaden their service delivery in the 21st century with increased efforts in prevention, intervention, and counselling services. However, the role of the school psychologist is still significantly oriented toward assessment, and the provision of other professional services is not occurring as frequently as some individuals in the field had anticipated (Corkum et al., 2007; French & Mureika, 2002; Jordan, Hindes, & Saklofske, 2009).

There is little dispute that assessment should remain an integral part of a school psychologist’s efforts given their specialized skill set in this area; however, school psychologists have indicated a strong desire to expand their role and increase the time they spend in alternative service roles (Cole & Siegel, 2003; Corkum et al., 2007; Curtis, Hunley, & Grier, 2002; Curtis, Walker, Hunley, & Baker, 1999; Desimone, 1999; Fagan & Wise, 2007; Hanson, 2004; Jones-Wilson, 1994; Reschly & Wilson, 1995). For example, a 1991-1992 survey of 1089 NASP members and practitioners showed that school psychologists devoted more than one-half of their time (55 percent) to psychoeducational assessment, with considerably less time devoted to direct
intervention, problem-solving consultation, systems-organizational consultation, and research evaluation (Reschly & Wilson, 1995). Curtis, Hunley, Walker, and Baker (1999) conducted a national study examining the demographic characteristics and professional practice of practicing school psychologists. Twenty percent (N=1,922) of all regular members of NASP were surveyed regarding demographic variables in addition to tasks completed as a part of their daily practice during the 1994-1995 academic year. Researchers concluded that 97.4 percent of psychologists engaged in consultation, 88.8 percent provided in-service programs, 86.4 percent engaged in individual counselling, 53.5 percent conducted group sessions, and 77.8 percent provided in-service education. Psychoeducational assessment and related special education services consumed the majority of their time.

More recently, a study conducted by Bramlett, Murphy, Johnson, Wallingsford, and Hall (2002), surveyed a sample of 370 NASP members regarding the roles of school psychologists. The participants were asked to indicate the amount of time they engaged in the following activities: assessment, consultation, interventions, counselling, conferencing (e.g., meetings with teachers and parents), supervision, in-service, research, parent training, and other. Overall, results indicated that the largest amount of time was spent on assessment (46 percent), followed by consultation (16 percent), direct interventions (13 percent), and counselling (8 percent), conferencing (7 percent), supervision (3 percent), in-service (2 percent), research (1 percent), and parent training (1 percent). Results also indicated that 49 percent of psychologists reported providing behavioural consultation, 6 percent provided mental health consultation and 45 percent indicated that they used other forms of consultation, which were not identified. Types of referrals psychologists reported as being most common were difficulties in the areas of reading (57 percent), written expression (43 percent), task completion (39 percent), mathematics (27
percent), conduct (26 percent), motivation (24 percent), defiance (17 percent), peer relationships (16 percent), listening comprehension (14 percent), oral expression (11 percent), mental retardation (10 percent), truancy (8 percent), and violence (6 percent). The least common referral to school psychologists was for internalizing disorders such as depression, anxiety, social withdrawal, and suicidal ideation.

Similar results were obtained in a study examining the counselling practices of 242 school psychologists (Yates, 2003). School psychologists were randomly selected from the NASP database and asked about their current scope of practice. When asked questions regarding actual time spent on various roles and desired time spent in the areas of assessment, research, counselling, consultation, prevention, and administration, respondents indicated they wished to spend less time on assessments and administrations and more time dedicated to research, counselling, prevention, and consultation services. Respondents indicated spending the majority of their time in assessment (49.8 percent), followed by consultation (18.5 percent), administration (17.7 percent), counselling (17.2 percent), prevention (9.4 percent), and research (4.6 percent).

Addressing the discrepancy in actual versus desired mental health service provision, Luis (2005) obtained a sample of 463 school psychologists and NASP members. Over half of respondents reported providing assessment and diagnosis (93.5 percent), behaviour management consultation (86.8 percent), academic consultation (82.5 percent), individual therapy/counselling (59.8 percent), and crisis intervention (58.1 percent). Other mental health services provided by practitioners included designing/administering individual service plans (46.2 percent), social skills training (38.2 percent), staff development (37.8 percent), and group therapy/counselling (30.7 percent). The least frequently reported mental health services were research and evaluation
(13 percent), vocational counselling (5.4 percent), and substance abuse counselling (4.3 percent). Consistent with Yates’ (2003) results, the mental health services that comprised most of practitioners’ time were assessment and diagnosis (31.5 percent), followed by academic consultation (9.4 percent), behaviour management and consultation (8.4 percent), and individual therapy/counselling (7 percent). Although many participants indicated providing interventions such as social skills training and group therapy/counselling, only a small amount of time was spent providing such services (2.2 percent and 2.1 percent, respectively). The majority of participants (74.3 percent) indicated that they would like to provide more mental health services in the school setting.

Curtis et al. (2008) solicited participation from NASP members, obtaining a final sample of 1748 school psychologists. Respondents indicated spending the majority of their time in special education activities, such as evaluations for special education eligibility. The majority of respondents indicated that they provide consultation services (96.4 percent) and more than half of participants (53.7 percent) indicated that they provided individual counselling for 1 to 15 students. An additional 17.7 percent of participants indicated that they provided individual counselling for 15 or more students; however, 28.6 percent of participants indicated that they did not provide individual counselling for any students. Far more school psychologists (60.1 percent of participants) indicated that they did not provide any group counselling services. Of the psychologists sampled, 67.1 percent provided in-service programs in their schools.

The Role of the School Psychologist in Canada

The status, roles, functions, and aspirations of the profession of school psychology in Canada have also been examined. A study by Corkum and colleagues (2007) surveyed school psychologists working in Nova Scotia about the professional functions they currently provide
and their preferred roles for the future. Consistent with other study results in this area (e.g., Curtis et al., 2002; Curtis et al., 1999; Desimone, 1999; Hanson, 2004; Jones-Wilson, 1994; Reschly & Wilson, 1995), school psychologists in Nova Scotia indicated that they dedicated the majority of their time to psychoeducational assessments. In addition to traditional roles in psychoeducational assessment, consultation with school personnel, behavioural assessments, and individual counselling were strongly endorsed as their most commonly practiced functions. It was found that only between 1 and 25 percent of their time was spent engaged in in-servicing, consultation with mental health professionals, prevention, supervision, and group counselling. Notably, psychologists reported significant changes in the practice of school psychology, including more job positions, more specific training, a greater demand for psychoeducational assessments, and an expansion into intervention, prevention, and consultation roles. However, school psychologists reported a strong desire to further increase the time dedicated to prevention, consultation, and counselling, thereby decreasing the time dedicated to psychoeducational assessment services. Despite their proficiency in evidence-based practices and the value that their skills could have in the development and implementation of intervention strategies, psychologists reported that very little time was allotted to research. Further, only 20 percent of their time was spent devoted to intervention services (Corkum et al., 2007).

Jordan et al. (2009) surveyed Canadian school psychologists and other professionals outside the designation of school psychologist, but who were providing similar services (e.g. educational psychologists) about their current professional roles and functions and their desired practices. The respondents of this national survey indicated that they spend 50 to 75 percent of their time devoted to cognitive assessment-related activities and 25 to 50 percent of their time was spent on the provision of behavioural and emotional assessment. Thirty-six percent of the
respondents indicated that they would like to increase the amount of time dedicated to behavioural and emotional assessments and, interestingly, 17.5 percent desired an increase in the delivery of intellectual assessment activities. Respondents reported that as little as no time to as much as 50 percent of their time was dedicated to prevention and intervention services and the majority of this time was spent in tertiary prevention. However, 69 percent of respondents indicated that they wished to provide more primary prevention to benefit the well-being of all students. About half of the respondents wanted more time to consult with teachers and parents. Finally, school psychologists in this survey appeared to spend little time doing research, but one-quarter to one-third of respondents said they would like to do more research. However, research was not ranked highly in comparison to other roles despite being regarded as important.

Summarizing the literature on the roles of school psychologists, Reschly (2000) concluded that, in addition to their primary role in the provision of assessments, school psychologists engage in intervention (20 percent), consultation (17 percent), system consultation (6 percent), and program evaluation (2 percent). School psychologists have reported that they would like to decrease the amount of time they dedicate to assessment activities to approximately 25 to 30 percent, thereby increasing the time they can spend fulfilling these other functions (Corkum et al., 2007; Reschly & Wilson, 1995). In conclusion, although there is some variability in the time they dedicate to the delivery of various mental health services, the provision of assessment-related services continues to be the major function of school psychologists today. Furthermore, the majority of researchers have found that most school psychologists wish to decrease the time they spend in this role in favour of other mental health services, such as prevention, consultation, intervention, research, and counselling.
Barriers to the Provision of Mental Health Services

Although there appears to be a consensus among school psychologists that they would like to deliver more diverse services, there does not seem to have been a notable reduction in the discrepancy between actual and ideal roles reported over the last decade. Numerous factors have limited the expansion of a school psychologist’s role in Canada. Due to the discipline’s relatively modest size, the role and skill set of the school psychologist is often misunderstood (Fagan, 2002; Fagan & Wise, 2007). For example, the National Association of School Psychologists is large and influential in the United States, whereas in recent years, membership in the Canadian Association of School Psychologists (CASP) has been low and is small in comparison to other national organizations. As a result, CASP is not as effective as it could be with respect to representing and advocating on behalf of practicing school psychologists (Jordan et al., 2009). A lack of strong leadership, common training and legislation, and a unified standard of practice in Canada prevent school psychology from being a cohesive and nationally recognized discipline. However, the establishment of the Professional Practice Guidelines for School Psychologists in Canada (CPA Section of Psychologists in Education, 2007) is a hopeful step toward consolidating a professional identity as a school psychologist nation-wide.

A heavy workload and an increase in assessment and other service referrals result in longer waitlists for both immediate and long-term services (Hann, 2001). Caseloads appear to be quite variable across provinces in Canada, but the ratio of psychologists to students in need generally exceeds the numbers recommended by NASP, which suggests that the ratio of school psychologists to students be 1:1500 (Corkum et al., 2007; Jordan et al., 2009). In Nova Scotia, however, it is not uncommon for one school psychologist to service multiple schools and 3000 to 4000 students disbursed across 12 different schools (Hann, 2001). In other provinces, the ratio
may be as high as 1:10 000 (Saklofske et al., 2007). With many students wait-listed for psychoeducational assessment, psychologists employed in Nova Scotia’s school boards struggle to find time to provide other services and to be as visible as they should be in their assigned schools (Corkum et al., 2007; Hann, 2001). As a result, educators may have an unfavourable or incomplete understanding of the roles of a psychologist if, after a referral is made, contact is limited to brief meetings and recommendations made via a psychological report (Gilman & Medway, 2007; Sheridan & Gutkin, 2000). Further, a school psychologist’s ability to function as an integral part of a school team is significantly affected when the psychologist’s role is limited to tester, impairing the ability to deliver a more comprehensive service (Watkins, Crosby, & Pearson, 2001).

Although many school systems have now moved beyond a model that simply referred, tested, and placed children into a special education program, more comprehensive service delivery is often limited by legislative mandates, government cutbacks, and a lack of support from school personnel (Cole & Siegel, 2003; Corkum et al., 2007; Fagan & Wise, 2007; Gilman & Medway, 2007; Hann, 2001; Mureika, 2007). Consequently, functions that could be served by a school psychologist may be misunderstood and delegated to other professionals, such as psychometrists, school counsellors, resource teachers, and speech-language pathologists (Fagan & Wise, 2007; Gilman & Medway, 2007; Hann, 2001). For example, a study conducted in the United States by Gilman and Medway (2007) found that teachers often misperceived many of the roles and functions of the school psychologist. Instead, teachers considered services, such as individual and group counselling, crisis intervention, in-service training, and curriculum development as being solely provided by the school counsellor. In addition, teachers generally were more knowledgeable about the role of the school counsellor as compared to that of the school psychologist. Gilman and Medway (2007) suggested that this may be the result of the
frequent contact teachers have with the school counsellor as opposed to the school psychologist. Relative to these other school personnel, school psychologists are more likely to have acquired more extensive training in specific disabilities, behaviour analysis, research methods, prevention measures, and the implementation of evidence-based practices within the classroom setting, as well as mental health assessment and diagnosis (Canadian Psychological Association, 2014; National Association of School Psychologists, (n.d.). However, it should be noted that despite the call for an enhancement in the school psychologist’s role in the delivery of school mental health services, students’ needs will be best met through the collaboration of all of these highly trained and experienced professionals, working together across disciplines.

The role of the school psychologist is largely dependent upon the services school personnel believe psychologists should deliver and can deliver, as well as how much independence the psychologist is afforded with respect to fulfilling his or her responsibilities (Gilman & Gabriel, 2004; Watkins et al., 2001). This critical issue is vital to the identity, role definition, and job security of school psychologists (Gilman & Medway, 2007; Hann, 2001). Sandoval and Lambert (1977) suggested that teachers provide particularly valuable insight about the psychological services needed within the school setting and it has been argued that if role expansion efforts are to succeed, examining educators’ understanding of the diverse roles and functions of school psychologists, as well as teachers’ perceptions of school psychology is essential (Watkins et al., 2001).

As previously discussed, Corkum et al. (2007) established that school psychologists in Nova Scotia wish to decrease the time they spend in a psychoeducational role and to increase the time they dedicate to other services, particularly prevention. However, no studies that we are aware of have solicited input about the perspectives of teachers with respect to the role of school psychologists.
psychologists in Nova Scotia. Given school psychologists’ desire for role expansion, it will be impossible to change how school psychologists are used in the school system until teacher perceptions of school psychology are assessed. If educators are unaware of the services that psychologists can deliver in the school setting, they are less likely to prioritize service needs and are more likely to underuse valuable psychological knowledge and skills. The support of educators could have an important effect on school psychology role reform efforts (Gilman & Medway, 2004)
CHAPTER TWO

Teacher Perceptions of School Psychology: Needs and Expectations

Continued debate about the roles and functions of school psychologists has focused on how the profession can expand beyond its emphasis on assessment-related activities to a broader service-delivery model so that the needs of students can be better served (Cole & Siegel, 2003; Corkum, et al., 2007; Gilman & Gabriel, 2004; Jordan et al., 2009; Mureika, 2007). Although the goal of a school psychologist’s role is ultimately to address the needs of students, sometimes providing best outcomes for students can be accomplished through the provision of consultation services to teachers, administrators or to the school system as a whole (Cole & Siegel, 2003). However, in the school setting, important decisions concerning a student are typically made by teachers and parents; as such, the school psychologist must often facilitate change by influencing the decisions of others (Cole & Siegel, 2003). A student’s classroom teacher is the person who interacts with him or her most; therefore, teachers have the greatest potential to facilitate change for the student (Cole & Siegel, 2003). Further, the teacher may be the first to recognize a student’s need for psychological services and initiate a referral to the professional he or she believes to be most qualified to intervene.

A disconnect between the preferred and actual roles of school psychologists may occur as a result of teachers’ misperceptions of the role of a school psychologist or as a result of school psychologists’ misperceptions of the services teachers desire most. Whereas the role of a school psychologist is a diverse one, teachers may not fully understand the functions of a school psychologist and the breadth of services that he or she can provide. In addition, because a school psychologist may be restricted to predominantly testing functions within a school district, teachers may have misperceptions about their professional competencies and capabilities.
Misperceptions may be problematic because if teachers are not accurately informed about school psychologists’ roles and competencies, this could affect their use of a valuable professional resource and the appropriate seeking of psychological services. If the perception is that assessment is the primary and sole skill of a school psychologist, the degree to which teachers solicit the other useful services that school psychologists are trained to deliver and desire to provide is likely to be affected. In turn, a narrow or even faulty perception of the skill set of the school psychologist may influence the expectations of others and dictate the services a school psychologist provides. This can lead to many students not getting the mental health services they need in a timely manner and can minimize the school psychologist’s effectiveness in the delivery of services.

Promoting awareness about the competencies of school psychologists and developing better relationships with teachers may lead to greater understanding and acceptance of school psychology practices and make school psychologists more effective service providers. In an effort to strengthen the relationship between teachers and school psychologists, it is necessary to determine what school psychologists can do to help the teachers who seek psychological services for their students (Cole & Siegel, 2003). Cole and Siegel (2003) suggest that the most effective method of accomplishing role expansion may be through collaborative consultation, a process in which educators and psychologists coordinate their efforts to resolve educational problems, while demonstrating mutual respect for the other’s professional contributions. It is beneficial to both parties to determine whether teachers are aware of the diversity of services that school psychologists are competent to provide. Because teachers may be the school psychologist’s most overlooked yet valued ally, advocacy efforts may be ineffective if the attitudes and needs of teachers are not first understood (Gilman & Medway, 2007; Watkins, et al., 2001). In addition, if
collaboration between school psychologists and teachers is to be successful, teachers must regard
the services of school psychologists as valuable and effective (Gilman & Gabriel, 2004).

As previously indicated, the breadth of a school psychologist’s capabilities remains
largely overlooked by teachers (Gilman & Medway, 2007; Sheridan & Gutkin, 2000) and
relegating school psychologists to the role of assessor could have detrimental effects (e.g.,
referrals for mental health difficulties being made to professionals with little training in assessing
for and intervening in mental health difficulties). Misperceiving the services provided by the
school psychologist within the educational setting is detrimental to the school psychologist’s
future roles and to the working relationship between teachers and school psychologists
(Ehrhardt-Padgett, Hatziychristou, Kitson, & Meyers, 2004; Sheridan & Gutkin, 2000). A review
of the available literature indicates that the majority of studies assessing teachers’ perceptions of
school psychology and school psychologists were conducted well over a decade ago. The extant
literature suggests that educational professionals have limited knowledge about the discipline
and primarily perceive school psychologists as testing experts (Abel & Burke, 1985; Gilman &
Gabriel, 2004; Gilman & Medway, 2007; Watkins, et al., 2001). However, in an early
investigation of this subject, Medway (1977) reported that teachers’ perceptions of the role of
school psychologists were in fact, not consistent with their actual roles. Participants believed that
school psychologists spent more time interviewing, counselling, and consulting with teachers,
and much less time writing reports and providing assessment services than was actually the case.

In a more recent study by Gilman and Medway (2007), regular education teachers and
special education teachers were asked to rate their perceptions of a school psychologist’s roles
versus a school counsellor’s roles. Results indicated that 71 percent of regular education teachers
believed that the school psychologist’s function was predominately as an assessor, whereas they
believed that school counsellors (i.e., guidance counsellors) provided most other psychological services (i.e., interventions such as counselling, crisis intervention, in-service training, and curriculum development). Further, regular education teachers were significantly less knowledgeable about school psychology than special education teachers and were less likely than special education teachers to implement the suggestions made by a school psychologist. Even when a referral to the school psychologist was made, the regular teachers indicated that they did not feel actively included in the collaboration process. The researchers explained these findings by suggesting that, since special education teachers generally have more contact with school psychologists, they likely have more knowledge of the breadth of services a psychologist can provide and therefore feel more included in the decision making process (Gilman and Medway, 2007). Similarly, Leach (1989) found a significant difference in the perception of school psychologists’ roles among school staff who had little contact with their school psychologist and those who were in more frequent contact. Although both the principals and the teachers sampled endorsed more traditional roles, such as assessment, there was a correlation between their overall satisfaction with the quality and quantity of school psychologist’s services and contact time. Abel and Burke (1985) and Gilman and Medway (2007) also reported a relation between the frequency of contact among consumers of school psychological services and consumer satisfaction with the school psychologist.

Gilman and Medway (2007) suggest that such limited perceptions of the competencies of school psychologists may be influenced by the amount of time that school psychologists currently spend on assessment-related services. In turn, this limits the services assigned to psychologists in the school setting (Adelman & Taylor, 2003; Gilman & Medway, 2007; Jordan, et al., 2009; Mureika, 2007) and teachers may not identify school psychologists as an available
resource (Cole & Siegel, 2003). If school psychologists are to expand their roles to include more intervention, consultation, and research, it is necessary that alliances with school personnel be established (Adelman & Taylor, 2003; Nastasi, 2000). With the current demands imposed on teachers, along with school psychologists’ desires to diversify their roles, it is important to identify how school psychologists can best accommodate the needs of teachers and create the most positive outcomes for the students they serve (Gilman & Gabriel, 2004; Gilman & Medway, 2007; Nastasi, 2000; Watkins, et al., 2001). An appeal for support should begin by soliciting input regarding teacher perceptions of school psychology and using this information to inform educators about the scope of practice of the school psychologist (Adelman & Taylor, 2003; Gilman & Gabriel, 2004; Gilman & Medway, 2007; Nastasi, 2000).

Educational professionals have indicated that they would like school psychologists to become more involved in consultation (Anthun, 1999; Cheramie & Sutter, 1993), counselling (Anthun, 1999; Hartshorne & Johnson, 1985), prevention (Anthun, 1999), and in-service training (Sneft & Snider, 1980). Watkins et al. (2001) solicited school staff feedback on the services currently provided by school psychologists and the services that they most wanted from them. Participants indicated that they were generally pleased with the performance of the school psychologist; however, increased focus on assessment, special education input, consultation, counselling, crisis intervention, and behaviour management were especially needed. Additionally, staff expressed the need for a more visible presence of psychologists in their school. Participants acknowledged school psychologists’ large workload and sometimes expressed their frustration with a system that limits them from obtaining the services that they need (Watkins, et al., 2001). These results demonstrate that the services provided by psychologists are highly valued and as such, school staff would like psychologists to play a more
active and diverse role in the school setting. Such support may prove instrumental to school psychologists’ lobbying efforts for role expansion (Watkins et al., 2001).

Some research suggests that educators would also like school psychologists to provide additional services on top of the assessment services they already provide. Specifically, Abel and Burke (1985) found that school staff wanted psychologists to deliver diverse services such as behavioural interventions, community organization development, consultation, parent education, and intervention and prevention services in addition to assessment services. Similar to the responses of the school staff sampled by Abel and Burke (1985), a sample of Norwegian teachers and administrators wanted school psychologists to maintain their current roles in assessment and deliver a multitude of other services, particularly more consultation and prevention services (Anthun, 1999). However, although some educators have indicated that they desire a diversification of school psychologists’ roles, role expansion is still constrained by misperceptions about school psychologists’ professional competencies; namely, that their proficiency is limited to psychometric functions. Such false beliefs make it difficult for school psychologists to exercise a broader practice within the school setting.

Zucker and Terjesen (2007) conducted a survey study of teachers and parents to determine their perceptions of school psychologists, school psychologists’ functions, and whether they considered their current delivery of service to be effective. From a list of 31 functions related to the school psychology profession, participants were asked to rate how often their school psychologist performed each function and how often they would like them to perform each function. The most highly endorsed primary functions of school psychologists as indicated by teachers were special education placements, report writing, and attending faculty meetings. However, the primary desired functions of school psychologists as endorsed by
teachers included assessment-related activities, interviewing students, providing individual and group therapy, attending school team meetings, presenting to committee on special education, evaluating individual education plans (IEPs), providing special placement review, and participating in crisis interventions. Zucker and Terjesen (2007) also reported that teachers wanted the school psychologist to dedicate more time in classrooms, consulting with parents and teachers, attending school board and parent organization meetings, and conducting behavioural observations. In contrast, parents were less likely to endorse any of the 31 functions as currently performed or desired for the future, but some of the parents sampled reported that they desired an increase in the time that school psychologists spent report writing, providing teacher training, group therapy, and engaging in more school activities with the staff and students within their assigned schools. The authors suggest that because teachers have more contact with school psychologists than parents, they are more aware of some of the functions performed by school psychologists. This illustrates the need for consumer education about the professional capabilities of school psychologists. In addition, these authors propose that, based on the desired roles as reported by the teachers sampled, school psychologists should increase the amount of time dedicated to consultation services and increase the services delivered to the school population as a whole.

It is well documented that the mental health of Canadian children and youth is a major concern in this country and, currently, mental health services are not being provided to all of those in need, nor is the service delivery as effective as it could be (Mental Health Commission of Canada, 2012; Saklofske et al., 2007). The school context has been identified as a logical setting in which to provide mental health services to young people and given the unique training and knowledge of school psychologists about both mental health and the educational needs of
students, they are in a good position to provide an essential service to schools and students (Canadian Council on Learning, 2007). However, as previously discussed, teachers and other school personnel often have misperceptions about the roles and functions of school psychologists and continue to primarily perceive them as test experts. As a result, the diverse skill set of school psychologists is often underused in schools, thereby decreasing their effectiveness in the delivery of services.

The Current Study: Research Objectives

Corkum, et al. (2007) provided valuable insight into the actual and desired roles of school psychologists in Nova Scotia. Their results established that school psychologists in the province desire a reduction in the amount of time that they dedicate to assessment-related activities and an increase in the time spent delivering other services, namely prevention. Considering this desire for role expansion, it has been suggested (see Gilman & Gabriel, 2004; Gilman & Medway 2007; Watkins, Crosby, & Pearson, 2001) that it will be impossible to change how school psychologists are used in the school system until teacher perceptions are assessed. Most of the literature that has examined teacher perceptions of the school psychologist is dated and has been conducted predominantly in the United States. No known studies have examined teacher perceptions and knowledge of school psychology in Nova Scotia.

The current investigation is therefore concerned with teacher perceptions and knowledge of school psychology in Nova Scotia. Specifically, it is not clear whether teachers have accurate expectations of the role of the school psychologist and under what circumstances it is appropriate to seek the services of the school psychologist. With this in mind, the present research had five primary objectives. First, we sought to investigate what services teachers value most from school psychologists. It was hypothesized that because they would be largely unaware of the school
psychologist’s various areas of training, teachers would value most the school psychologist’s expertise in psychoeducational assessment. Second, the study explored whether there were services that teachers need from the school psychologist that were not currently being provided. Based on past literature, it was expected that teachers would identify the limited role of the school psychologist as an impediment to a desire for more comprehensive service delivery. Third, we sought to examine what teachers perceive the school psychologist’s role to be comprised of. We hypothesized that teachers would view school psychologists as predominantly specialists in diagnostic testing. Fourth, the study explored under what circumstances teachers would refer to the school psychologist. It was predicted that teachers would most often refer students to the school psychologist for psychoeducational testing. Lastly, the study examined what teachers know about the professional competencies and capabilities of school psychologists. It was expected that beyond the school psychologist’s specialization in psychoeducational assessment, teachers would be generally unaware of the scope of practice or depth of training of the school psychologist.

Exploring perceptions at the provincial level will enable school psychologists to monitor the needs and expectations of teachers with respect to the psychological services that are currently being offered, to evaluate possible areas for change, as well as to identify the psychological services that are most valued and needed by educators. The information gathered from this study may then foster initiatives that educate teachers about school psychology and the valuable services that psychologists can offer in the school setting; thus, opening the door for greater collaboration between the professions.
Method

Participants

One hundred fourteen elementary, middle, and high school teachers completed an online survey. At the time of the study, all teachers were employed in elementary, junior high or high schools in one of four Nova Scotia school boards (see Table 1). These school boards included the Chignecto-Central Regional, Conseil Scolaire Acadien Provincial, Halifax Regional, and Southwest Regional (comprised Tri-County District and South Shore District) school boards. For the purposes of this study, elementary school is defined as grades primary through 5, junior high school as grades 6 through 9, and high school as grades 10 through 12. The sample was also comprised of several guidance counsellors, resource/program support teachers, and school principals and administrators. Some participants were currently enrolled in the Master of Education program at Mount Saint Vincent University. Substitute teachers and student teachers were not permitted to participate in the study, as they typically do not teach a consistent group of students and they are less likely to use the psychological services provided by school psychologists. Finally, they are typically not responsible for initiating referrals for school-based mental health services.

Ethical clearance for this study was granted by Mount Saint Vincent University Research Ethics Board and the Director of Education Services and the Coordinator of Student Services of Chignecto-Central Regional School Board (in lieu of an ethics board).

Measures

The study used an online survey adapted from the questionnaire developed by Corkum, French and Dorey (2007). Permission to adapt the questionnaire was granted by the researcher. The current survey was developed using Lime Survey Software, which is hosted on Mount Saint
Vincent University’s web server. Before participants could begin the survey, teachers were presented with an information and consent form and consent was obtained (see Appendix A). The survey took approximately 20 minutes for participants to complete (see Appendix B).

The first part of the survey asked teachers to provide relevant demographic information, such as sex, school board in which they were employed, type of community in which they taught (i.e., rural vs. urban), grade level currently taught, number of years of teaching experience, and educational history. The second section of the survey focused on the teacher’s previous experiences with school psychologists and the teacher’s service needs. Participants were asked to indicate whether they had ever accessed a school psychologist’s services, would consult with a school psychologist for psychological services, how often they typically refer a student for school psychology services during the school year, and how likely they were to implement recommendations made by a school psychologist. Participants also identified any services that teachers need from school psychologists that were not currently being provided. Teachers were asked to indicate the number of days per week that the school psychologist currently spends at their school as well as the amount of time that the teacher would like to have the school psychologist available for services.

In the third section of the questionnaire, teachers were asked to indicate their knowledge of school psychologists’ training by responding to a series of Likert-type questions.

**Procedure**

A list of instructors from the Master of Education programs at Mount Saint University was obtained from the Director of Graduate Education. Instructors were contacted by email (see Appendix C for instructor email script) and permission was sought to visit their classes to provide the MEd students with information about the study (Appendix D) and to distribute a link
to the survey. The Coordinator of the Curriculum Studies program at Mount Saint Vincent University also agreed to send the study information and link to off-campus Curriculum Studies professors to pass on to the teachers in their classes (see Appendix E for the email script). In addition, permission was granted to distribute recruitment posters to schools in the Chignecto-Central Regional School Board (Appendix F). Finally, an email outlining the details of the study, along with the website address link was sent to principals and school administrators in the Chignecto-Central Regional School Board. If they chose to do so, principals could distribute information about the study and the survey login information to their staff.

A consent form and all other pertinent information about the study were provided when teachers accessed the survey website. After reviewing the details of the study, the teachers who consented were then asked to complete the questionnaire. Participants were able to withdraw from the study at any time by quitting the questionnaire application on the website. Due to the nature of the survey software, participants were required to complete the questionnaire in its entirety in a single session, as it was not possible to save their responses and return to the survey at a later time. The questionnaire was anonymous; therefore, neither the investigators nor the school boards were aware of whether an individual decided to participate or to withdraw from the study. As compensation for their time and participation in the study, participants were eligible to be entered into a draw for one of three gift certificates to local stores (i.e., Chapters or Scholar’s Choice) valued at 50 dollars each. The gift certificates were awarded after data collection was completed.
Results

Demographic Characteristics of the Sample

Typical of the sex distribution that is characteristic of Canadian teachers (Turcotte, 2011), the sample was largely female (n=77; 87.5 percent). The teachers were predominantly recruited from Chignecto-Central Regional School Board (n=93; 81.6 percent), but teachers from Halifax Regional School Board, Conseil Scolaire Acadien Provincial, and Southwest Regional (comprised of Tri-County District and South Shore District School Boards) also participated in the study. The majority of the teachers taught elementary school (n=43; 37.8%); however, the junior high and high school teachers were also well represented in the sample (n=38; 33.3%). An option of ‘Other’ was available for teachers within the demographic item of ‘Grades Taught’, as only grades primary to high school were included in the response set. In total, 30 teachers indicated that their teaching position was not defined in the response options provided. One individual indicated that they served as both a principal and resource teacher, while five participants occupied a principal/administrative role. Twelve resource/program support teachers completed the questionnaire. Four individuals taught grades 5 and 6 split class, seven participants indicated a wide variety of grade levels, and one individual stated that he or she taught a split class, but did not specify grade. The majority of teachers taught in a rural area and had been employed in the teaching profession for 11 to 20 years (see Table 1 for complete demographic information/data).

Teacher Needs and Expectations of School Psychologists

Based on the results of the survey, 77.2 percent of teachers have accessed school psychology services at one time or another. Of these teachers, 44.6 percent reported that they occasionally referred a student for school psychology services and/or consulted with a school
psychologist during the school year, whereas 37.5 percent of teachers had never/rarely sought services. The remaining 17.9 percent of the teachers sampled had often to very frequently accessed school psychology services. Examination of the open-ended responses indicated that the teachers largely sought the school psychologist for psychoeducational assessment, as well as for assessment and support in the development of behaviour plans for students in need. Some of the teachers indicated that they liaised with the school psychologist as part of school-based, core team meetings and for general consultation and recommendations regarding students with learning, emotional, and/or behavioural challenges. Informants had also referred students for counselling and crisis management. Several teachers specified that the guidance counsellor typically managed school-based individual and group counselling and interestingly, one teacher stated that although they would like to refer students to the school psychologist for a variety of services, they had only initiated a referral for psychoeducational assessment due to limited resources.

According to nearly half of the teachers, school psychologists were on-site and available for services approximately one day per week (see Table 2). Notably, 40.5 percent of the teachers indicated that they were uncertain of how accessible the school psychologist currently was at their school. Nonetheless, most teachers desired an increase in the amount of time the school psychologist was present in their school, citing three days per week as ideal.

Short-answer responses generally indicated that teachers would like school psychologists to be at their schools more often and would prefer the referral process to be more streamlined. The majority of teachers (63.7 percent) reported that there are services that teachers and students need from school psychologists that are not currently being provided. According to many teachers, the service most lacking was the school psychologist’s time, with several teachers
noting that the school psychologist only comes to their school once a month. As one teacher stated, “There aren’t enough school psychologists. They are extremely busy and overworked. I know they would like to do more in the schools, but are often tied to paperwork and getting psychoeducational assessments done”. Several other participants echoed this sentiment.

Teachers acknowledged and sometimes expressed frustration with the school psychologist’s large workload and did not think it appropriate that teachers and students had to wait so long for testing services and support. This was evident in statements such as, “I would like to see psychologists be at the schools longer so they can get the testing done that needs to be done. I have a student that has been on the top of the list since September and she still has not been tested” and “Children get missed due to lack of support/time”. Further, one teacher felt that school psychologists were so overwhelmed with psychoeducational assessments, they were generally unable to provide other necessary mental health services. The teacher stated, “I think students have a wide range of emotional issues that are not being addressed, as the psychologists largely just do testing for academically struggling students”.

Several teachers indicated a need for the school psychologist’s role to expand beyond that of predominantly testing functions and to include more behaviour support, prevention, direct support for teachers and parents, counselling, and greater comprehensive mental health interventions for students. The desire for more comprehensive mental health services was evident in one teacher’s comment, “More counselling services need to be offered along with a need for more mental health issues to be addressed. There is just no time for this right now”. Teachers also indicated that they would like to learn more about the school-based psychological services available to students, as well as the breadth of the school psychologist’s role. One teacher acknowledged his lack of understanding, stating “I’m not really sure what services a
school psychologist can offer my students, I need to know what is available for them”, while another teacher expressed, “please let us know what services you provide (in some detail). This is not very clear to many teachers”. Further, one respondent provided valuable insight about her perception of the referral process, stating that “student testing or referrals are a difficult process, some teachers are unfamiliar/uncomfortable with the process and some parents are also reluctant”.

Although teachers would like school psychologists to be visible and available for services, results indicated that they value the services that are currently being offered by school psychologists. Specifically, more than half of the teachers sampled (56.1 percent) very frequently implemented the recommendations or accommodations that had been suggested by the school psychologist, while 29.8 percent often did so. Some teachers indicated that the recommendations were helpful and that it was their professional duty to implement the recommendations to support their students. As one teacher stated, “I work to implement all recommendations or accommodations that are suggested by the school psychologist as they are the expert and I trust their experience and knowledge”. Sometimes, however, teachers expressed dissatisfaction with the school psychologist’s psychological assessment report. Because the reports could be overwhelming for teachers, the respondents’ noted that at times, the recommendations were “overwhelming”, “not realistic or practical”, and “do not really pertain to the individual child but more the diagnosis that the child is given”. Teachers also indicated that they would find it useful to contribute to the development of the recommendations and could benefit from more direct instruction about how to successfully implement these strategies within the classroom. One teacher commented, “I never seem to be given a choice. But I would like the opportunity to sit down with the psychologist and discuss options/suggestions that would work best in my
classroom rather than being handed instructions and expected to follow them without my input taken into consideration”. Further, another teacher noted, “It would be valuable to have school psychologists more available for consult with regards to the recommendations they make and to assist teachers in the implementation of classroom accommodations and behavioural strategies”.

Teacher Knowledge and Understanding of School Psychology

Based on the results of the survey, 46 percent of teachers considered themselves to be somewhat knowledgeable about the services provided by school psychologists, whereas 38.1 percent indicated that they were pretty knowledgeable about school psychology services. As shown in Table 3, teachers understood school psychologists to be most trained in the area of student behaviour. The next most highly endorsed areas of specialty, presented in rank order, were in the areas of cognitive disability, mental health, learning, and research. With respect to training and level of education, the majority of teachers reported that they believed that school psychologists had obtained a master’s degree (89.5 percent), whereas 30.7 percent of teachers considered an internship component to be instrumental in a school psychologist’s training.

Teachers are aware that the school psychologist’s role is largely consumed by the assessment of students’ learning and academic needs. Of the teachers sampled, 42.5 percent indicated that the school psychologist spends 51 to 75 percent of his/her time testing (see Table 4), whereas 23 percent of teachers thought that school psychologists spent as much as 76 percent to 100 percent of their time providing assessment-related services. A smaller number of teachers (12.6 percent) believed that the majority of the school psychologist’s time was dedicated to behaviour and consultation with parents and school personnel, whereas less time was devoted to individual counselling, prevention, in-servicing, and group counselling.
Discussion

The present study examined teacher perceptions of the roles and functions of school psychology in Nova Scotia, as well as teacher needs and expectations for school psychological services. Given school psychologists’ desire to spend more time in the provision of mental health services, combined with a recognized need to improve access to children’s mental health services, it is important to understand the barriers that could potentially prohibit school psychologists from further diversifying their roles and functions and from delivering more comprehensive services (Corkum et al., 2007; Yates, 2003). Certainly, the increased demand for school-based psychological support and large school psychologist to student ratios makes it difficult to deliver comprehensive, quality services (Canadian Council on Learning, 2009; Canadian Teachers’ Federation, 2011; Corkum et al., 2007; Hann, 2001; Jordan et al., 2009). Moreover, as the role of the school psychologist continues to evolve, there may be a disparity between school personnel's perceptions of the role and functions of the school psychologist and how psychologists’ skills can be used in an effort to provide better learning outcomes for students. If educators have misperceptions about the breadth of skills possessed by school psychologists and the expertise they can provide to help meet the complex needs of students, school psychologists may be overlooked as a valuable resource and students’ needs will be unmet (Gilman & Medway, 2007; Sheridan & Gutkin, 2000).

Considering the abundance of literature encouraging school psychologists to expand their reach and fulfill the complex demands for mental health services in schools, it is necessary to consider the needs of the key stakeholders or partners in school-based mental health services (Sheridan & Gutkin, 2007). School psychologists specialize in child development, mental health, and learning; they understand classroom dynamics and they appreciate the multiple demands
placed on teachers (Cole & Siegel, 2003; National Association of School Psychologists, 2000a). School psychologists also recognize that teachers see students daily and are often the first to observe a problem and initiate service referrals to the appropriate professional (Gilman & Gabriel, 2004; Watkins et al., 2001). For this reason, it is imperative to evaluate gaps in teachers’ understanding of school psychology, speculate about what can be done to remediate any misconceptions about scope of services, and lastly, to evaluate possible areas for change. This will enhance the mental health agenda in schools and incite a more effective and efficient service delivery model (Gilman & Medway, 2004; Watkins et al., 2001).

The current study examined teacher needs and their expectations of the school psychologist. Most teachers have accessed school psychology services at some point in their career. Our findings indicate that the majority of teachers had occasionally sought school psychology services in the past, yet some teachers had rarely accessed their services if they had even accessed them at all. In Canada, it has been estimated that 1 in 5 children and adolescents has a mental health difficulty that requires intervention and formal supports (Waddell et al., 2002). According to this statistic, the teachers that comprised our sample likely work with numerous students who are currently in need of support; however, as the results of our study indicate, a sizeable number of them rarely consult with the school psychologist. This highlights a need for change. Generally, teachers report accessing school psychology services for psychoeducational assessment as well as for consultation about behavioural interventions. Many teachers were aware of the overwhelming caseloads and limited resources that limit provision of school psychology services and indicated that they were frustrated by current school psychologist to student ratios. Specific areas of frustration were time demands, long waitlists and the prioritization of assessment services over other important areas (e.g., behaviour problems,
mental health problems). These concerns could influence teacher resistance and their reluctance to access psychological services, particularly services unrelated to psychoeducational assessment. Further, teachers must manage considerable demands in the classroom; if they have expectations that are not consistent with the actual referral and consultation process, or the time it may take to see the outcome of their referral, they may not consider a referral to school psychology to be a good use of their time and resources. It is also possible that teachers in the current study who did not make referrals to school psychologists refrained from doing so largely because of the referral process itself. As evidenced by Waldron and colleagues’ (1998) study examining the differences between teachers who were more likely to initiate student referrals to the school psychologist as compared to low referring teachers, some teachers tend to refer to the school psychologist only after independently implementing a number of interventions. Increasingly, it is becoming more common for schools to use a process known as *prereferral assessment* in an effort to reduce the number of referrals received by school psychologists. Unlike the traditional process of referral, a team of school personnel are designated to identify students in need of services and intervene when possible, before a formal referral is made for school psychological services (Brandt, 1996).

Teachers’ desire for increased availability of the school psychologist, as well as the relation between school psychologist availability and teachers’ use of consultation has been shown in previous studies (Carner & Alpert, 1995; Gonzalez, Nelson, Gutkin & Shwery, 2004; Stenger, Tollefson, & Fine, 1992). Results of the current study provided further support for these findings. Specifically, the teachers in our study expressed a need for the school psychologist to be present on a more regular basis. Most teachers indicated that the school psychologist was on-site and available for services at their school one day per week; however, several teachers
indicated that the school psychologist was only available one day per month. The majority of teachers wanted the school psychologist more visible and available, with many indicating three days per week as ideal. Interestingly, a considerable number of teachers were unaware of how often the school psychologist frequented their school. Several studies have found that because teachers have very little understanding about what the psychologist does at their school, they typically do not have contact with them nor seek them out for consultation or referral (Duis, Rothlisberg, & Hargrove, 1995; Erchul, Raven, & Ray, 2001; Pohlman et al., 2001; Wilson et al., 1998); the current results appear to support these findings.

The gap between the proposed method for improved school-based service delivery (i.e., consultation with teachers and increased access to mental health services) and the reality of current practice must be addressed. Teacher reports indicating that they are often unaware of the school psychologist’s presence attest to the fact that currently, school psychologists are not able to spend significant amounts of time in one setting. Additionally, this finding indicates that educators’ perception of the profession of school psychology and the support that a school psychologist can offer is perhaps inaccurate. If teachers are largely unaware of the role of the school psychologist, they are unlikely to seek consultation and support. This being said, previous findings have shown that, although some teachers may be unaware of the supports available to them, they welcome support when offered. In fact, when exposed to consultation with school psychologists, teacher perceptions of the process were positive (Lepage, Kratochwill, & Elliott, 2004; MacLeod, Jones, Somers, & Havey, 2001). Such research emphasizes a responsibility for school psychologists to increase the profile of their profession in teacher training programs and in schools. Increasing the profile of the profession at this early stage will ensure that teachers understand the profession and the services offered by the school psychologist.
Although teachers would like school psychologists to be more visible in schools, the results of the present study indicate that the teachers who are using school psychology services value the psychologist’s input. The majority of teachers who responded to the survey indicated that they make an effort to implement the school psychologist’s recommendations in their classrooms. Consistent with previous findings (see Bagnato, 1980; Groth-Marnat, 2009; Harvey, 2006; Mallin, Beimcik, & Hopfner, 2012; Wiener, 1987), teachers reported that psychological reports could be overwhelming and that recommendations were often too vague or lengthy and, at times, difficult to implement. Teachers suggested that more time be dedicated to assisting teachers with the implementation of recommendations within the classroom and including teachers in their development. This clearly illustrates the importance of shorter, more concise psychological reports and recommendations that are individualized, rather than disorder-specific, and easily integrated into the classroom. Suggestions such as these make it clear that, in addition to providing teachers with information about the role of the school psychologist, the profession of psychology must learn from other professions and provide information and service in a meaningful and effective manner.

Results of the current study indicated that over half of the teachers who responded to the survey expressed a desire for school psychology services that were not currently being provided, with the most essential service being the school psychologist’s time. A common theme throughout responses to open-ended questions was that more psychologists were needed in schools and that teachers were frustrated with the long waits lists for psychological services in schools. Further, teachers acknowledged that school psychologists were typically so overwhelmed with psychoeducational assessments that other essential mental health services were overlooked. These findings are somewhat consistent with findings from a recent study of
school psychologists’ desired roles (Corkum et al., 2007). Specifically, school psychologists in Nova Scotia reported a desire to decrease the amount of time dedicated to assessment services in favour of a more comprehensive role, particularly in the area of prevention. Consistent with this study, the results of the current study indicate that teachers would also be in favour of role expansion for school psychologists, particularly in the areas of behaviour support and the delivery of preventative services. Teachers reported a need for more direct support for parents and teachers, more counselling intervention, and more comprehensive mental health services. These results are promising with respect to school-based service delivery in the future. Although teachers acknowledge that the school psychologist’s role is often predominantly in the area of assessment/testing, they still perceive them to be the professionals who are best suited to offer more comprehensive services. If school psychologists take the initiative to address questions regarding their narrow roles, role strain, and the challenge of teacher-school psychologist collaboration, opportunities for forging positive relationships are likely to result, as well as the increased use of school psychology services. Teachers in the current study clearly expressed frustration with the current model for school-based service delivery and the inability to currently meet the growing demands of students’ mental health issues. Further, they indicated that they value and require school psychology services. By working together with teachers, it is possible that school psychologists could significantly affect policy in this province to increase psychological service provision in schools.

The majority of teachers who responded to our survey reported being at least somewhat knowledgeable about the services delivered by school psychologists. This is an important and encouraging finding, as teacher understanding of school psychologists’ training and experience can be influential and has been found to be related to their satisfaction with the school
psychologist (Short, Moore, & Williams, 1991). Generally, teachers in the current study believed school psychologists to be primarily specialists in behaviour, but that they also received training in cognitive disability, mental health, learning, and research. The majority of teachers indicated that a master’s degree was necessary to be employed as a school psychologist; however, given that we did not differentiate between the MA and MEd degrees, it is not clear whether all teachers are aware that school psychologists hold master’s degrees in psychology. Nonetheless, these findings are encouraging and indicate that teachers are aware of the specialized training and expertise possessed by the school psychologist.

Corkum et al. (2007) found that school psychologists in Nova Scotia spend approximately 50 percent of their time dedicated to psychoeducational assessments. Again, examination of the data from our study indicated that teachers are aware of the significant amount of time school psychologists spend in a testing role; in fact, many teachers overestimated the amount of time that school psychologists spend fulfilling assessment services. Similar to school psychologists’ perceptions of their current roles in Corkum et al.’s study, the teachers who participated in our study believed that school psychologists spent less time providing individual counselling, prevention, in-servicing, and group counselling services. However, the teachers desired more comprehensive school psychology services, notably in the areas of behaviour consultation, counselling and prevention. Some of the teachers indicated that they would like to learn more about the psychological services available in schools, as well as the training involved in becoming a school psychologist. As previously discussed, this illustrates that teachers are not necessarily resistant, but in fact, they desire an increase in awareness and involvement in school-based mental health services. Teachers in the present study also noted that school psychologists appear to be so overwhelmed with assessments that comprehensive mental
health services were lacking. According to the Nova Scotia Department of Education, there are approximately 80 psychologists employed by school boards in Nova Scotia, whereas there are over 138,000 students currently enrolled in schools across the province. Of the students in need of psychological support, 18 percent will be left untreated (Association of Psychologists of Nova Scotia, n.d.). If school psychologists were working in school settings with more acceptable student to practitioner ratios, they could more regularly provide the prevention and intervention services that teachers have indicated are needed in schools. In addition, increased awareness about the school psychologist’s role may be facilitated through initiatives and reform efforts that focus on educating teachers about school psychology; in addition to striving to better inform them (and parents) about consultation and the referral process for psychological services, ensuring that they are actively involved from the point of referral and onward. Because of the need for more accessible mental health services for children and because school psychologists are trained in mental health and well positioned to act as a liaison between health and education sectors, school psychologists must assert their competence in fulfilling this role, striving to bridge the gap that currently exists. Teachers want to be more involved and they desire an increase in support from school psychologists when implementing recommendations. Teachers also expressed a greater need for follow-up after recommendations were made; indicating the psychologist needed to better monitor student progress. These efforts will foster quality communication and more cohesive service delivery, opening the door for greater collaboration between the professions. Further, exploring teacher perceptions will allow school psychologists to understand what is needed to increase the profile of school psychology in the province’s school districts.
Implications for school psychologists

The role of the school psychologist continues to adapt to the increasing demands of mental health service provision in educational settings; however, school psychologists consistently report that they would like to advance beyond a role that is largely consumed by formal assessment (Corkum et al., 2007; National Association for School Psychologists, 2010; Reschly, 2000). It has been recognized that school psychologists are unlikely to expand their roles without the support of teachers; therefore, given teachers’ desire for a better understanding of the school psychologist’s role and an increase in the time the school psychologist dedicates to more comprehensive school-based services, future role expansion strategies must encourage school psychologists to become active in educating educators about their expertise and training, as well as the full extent of services they can provide. Current practice could incorporate distributing written materials, such as brochures and posters to teachers that outline the wide range of services the school psychologist is capable of providing. Given that some teachers reported they had not sought the school psychologist for services nor were aware of how often the school psychologist was available, school psychologists should make the effort to be visible where teachers perform their duties in schools and work to meet and establish rapport with teachers, students, other school personnel and parents. Brief in-services with school personnel, led by the school psychologist could help to clarify the school psychologist’s roles and functions and provide an opportunity for professional contact and collaboration with the teachers they serve. A forum for dialogue would give all groups the opportunity to share their vision for school-based mental health services and to generate goals for the school year. The data from this study may also be used to influence school psychology and education training programs. A major finding in this study was that most teachers consider the school psychologist to be a
valuable resource to staff and families, but emphasized a need for more behaviour consultation, prevention, and counselling services. Further, teachers indicated a desire to learn more about mental health and the role of school psychologists in the delivery of school-based mental health services. It will be critical to ensure that current and future school psychologists are prepared for an expanded role, particularly in the areas of consultation and prevention. School psychology training programs could also place a greater emphasis on facilitating psychoeducation and training in mental health for school personnel. Teacher training programs would benefit from increasing the amount of training and professional development teachers receive in mental health; specifically, teachers need to be able to recognize the signs and stressors that warrant intervention and referral, be aware of the psychological services available in schools, and learn strategies for managing students’ mental health needs in the classroom.

**Limitations and future directions**

In summary, the goal of the present study was to identify and present teacher perceptions of the role of school psychology in Nova Scotia, as well as the needs and expectations of teachers with regards to school-based psychological services. The current study was designed to be a preliminary descriptive examination of teacher perceptions of school psychologists in the province; however future studies should examine teacher perceptions more systematically using experimental design. Specifically, understanding teacher decision making processes with respect to referral to the school psychologist, as well as examining teacher perceptions of the outcome of the referral process would be meaningful contributions to the literature. Considering that the practice of school psychology varies across school districts, in the current study, the underrepresentation from teachers in school districts outside of Chignecto-Central Regional School Board could have yielded different results with a broader examination of the perceptions
of teachers in other school boards. Due to the manner in which we categorized the demographic question which asked teachers to indicate the grade(s) he/she taught, we were unable to accurately explore whether differences existed in the perceptions of teachers versus other school personnel (i.e. resource teachers, guidance counsellors, principals). School grades were categorized in a way that did not reflect the job positions of all teachers and school personnel and the question did not permit teachers to select more than one option. For example, some teachers indicated that the grade categories did not apply to them, but failed to specify a more accurate description of their position. As a result, we were unable to explore this question in a meaningful way. Future research could directly compare the perceptions of teachers and other school personnel in the same study to more carefully investigate whether differences exist in their knowledge of school psychology, as well as the frequency in which they solicit school psychology services. Many studies, the present one included, have addressed the perceptions and needs of teachers who have accessed school psychology services, but further research is needed into why some teachers are not accessing services and what they perceive to be needed for them to initiate student referrals or consultation with the school psychologist. Lastly, future researchers could look at whether teacher knowledge of school psychology services relates to better learning outcomes for students.

Findings from our study can provide further insight into best-practice recommendations for school-based mental health services. Considering the results of this study, which identified teachers’ desire for more comprehensive and easily accessed school psychology services, in conjunction with the findings from the Corkum et al. study (2007), which emphasized school psychologists’ desire for role expansion, collaborative efforts between the professions should be aimed at improving the effectiveness of their professional relationship, enhancing resource use,
and collaborating to advocate for the improvement and expansion of school-based mental health services. Further, preventative mental health programs need to be a priority in schools. School personnel need to be better trained to recognize stressors that may lead to mental health problems, as well as signs of mental health concerns that warrant immediate intervention. It is also necessary to have the roles of all school personnel delivering mental health services in schools better understood and more clearly defined for parents and teachers. With respect to role expansion, considering school psychologists’ current role strain, it is simply not possible for school psychologists to meet all of the expectations outlined by teachers. Thus, to better meet the needs of teachers and students, it is necessary to advocate at the governmental level for additional funding for school-based psychological services. With additional resources, more school psychologists could be hired and their caseloads reduced so as to be comparable to the ratios expected of other student services professionals. Lowering ratios would afford school psychologists the ability to offer a broader range of resources, including prevention, to a smaller number of students and to maximize the opportunity for visibility in schools. School staff would be granted more time to use the psychologist as a resource; teachers could consult with the school psychologist on best practices and solicit help when implementing recommendations.

Though challenges exist, the findings of this study are encouraging. Teachers and school psychologists acknowledge the need for change and appear ready to rise to the occasion. Given the rising prevalence of mental health disorders among school-age children in this country, school personnel must develop a cohesive and evidence-based approach to school-based mental health and mobilize their efforts to insist that the education sector become better equipped and adequately supported to address the mental health needs of young people.
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Table 1

Demographic Statistics for the Total Sample

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>%</th>
</tr>
</thead>
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<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>11</td>
<td>67.5</td>
</tr>
<tr>
<td>Female</td>
<td>77</td>
<td>9.6</td>
</tr>
<tr>
<td>Prefer Not To Answer</td>
<td>26</td>
<td>22.8</td>
</tr>
<tr>
<td><strong>School Board</strong></td>
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<td></td>
</tr>
<tr>
<td>Chignecto-Central Regional</td>
<td>93</td>
<td>81.6</td>
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<tr>
<td>Conseil Scolaire Acadien Provincial</td>
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<td>.9</td>
</tr>
<tr>
<td>Halifax Regional</td>
<td>14</td>
<td>12.3</td>
</tr>
<tr>
<td>Southwest Regional (Tri-County District and South Shore District)</td>
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<td>5.3</td>
</tr>
<tr>
<td><strong>Community</strong></td>
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<td></td>
</tr>
<tr>
<td>Urban</td>
<td>25</td>
<td>22.7</td>
</tr>
<tr>
<td>Rural</td>
<td>85</td>
<td>77.3</td>
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<tr>
<td><strong>Grade Taught</strong></td>
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<td></td>
</tr>
<tr>
<td>Primary-1</td>
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<td>11.4</td>
</tr>
<tr>
<td>2-3</td>
<td>15</td>
<td>13.2</td>
</tr>
<tr>
<td>4-5</td>
<td>15</td>
<td>13.2</td>
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<td>6-9</td>
<td>16</td>
<td>14.0</td>
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<tr>
<td>10-12</td>
<td>22</td>
<td>19.3</td>
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<tr>
<td>Other</td>
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<td>26.3</td>
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<tr>
<td><strong>Years Experience</strong></td>
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<td></td>
</tr>
<tr>
<td>0-10</td>
<td>40</td>
<td>35.4</td>
</tr>
<tr>
<td>11-20</td>
<td>44</td>
<td>38.9</td>
</tr>
<tr>
<td>21-30</td>
<td>26</td>
<td>23.0</td>
</tr>
<tr>
<td>31+</td>
<td>3</td>
<td>2.7</td>
</tr>
<tr>
<td><strong>Highest Degree Obtained</strong></td>
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<td></td>
</tr>
<tr>
<td>Bachelor of Education</td>
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<td>49.1</td>
</tr>
<tr>
<td>Master of Education</td>
<td>53</td>
<td>46.5</td>
</tr>
<tr>
<td>Master of Arts/Master of Science</td>
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<td>1.8</td>
</tr>
<tr>
<td>Doctoral</td>
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<td>0</td>
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</table>
Table 2

*Teacher Perceptions of School Psychologists’ Actual and Preferred Availability*

<table>
<thead>
<tr>
<th></th>
<th>1 Day</th>
<th>2 Days</th>
<th>3 Days</th>
<th>4 Days</th>
<th>5 Days</th>
<th>Don’t Know</th>
<th>Mean Days</th>
<th>SD</th>
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<tr>
<td>Actual Availability of School Psychologist</td>
<td>55</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>45</td>
<td>1.27</td>
<td>.735</td>
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<tr>
<td>Preferred Availability of School Psychologist</td>
<td>17</td>
<td>23</td>
<td>29</td>
<td>3</td>
<td>25</td>
<td>16</td>
<td>2.96</td>
<td>1.421</td>
</tr>
</tbody>
</table>

*Note.* The statistics of teacher perceptions of the school psychologist’s current availability, as well as the number of days teachers would like the school psychologist to be available are reported in frequencies and percentages.
Table 3

*Frequencies of Teacher Knowledge of School Psychologists’ Areas of Training*

<table>
<thead>
<tr>
<th></th>
<th>Research</th>
<th>Mental Health (i.e. anxiety, depression)</th>
<th>Learning</th>
<th>Behavior</th>
<th>Cognitive Disability</th>
</tr>
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<tr>
<td>Yes</td>
<td>79</td>
<td>101</td>
<td>100</td>
<td>104</td>
<td>102</td>
</tr>
<tr>
<td></td>
<td>(69.3%)</td>
<td>(88.6%)</td>
<td>(87.7%)</td>
<td>(91.2%)</td>
<td>(89.5%)</td>
</tr>
<tr>
<td>Not Selected</td>
<td>35</td>
<td>13</td>
<td>14</td>
<td>10</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>(30.7%)</td>
<td>(11.4%)</td>
<td>(12.3%)</td>
<td>(8.8%)</td>
<td>(10.5%)</td>
</tr>
</tbody>
</table>
### Table 4

*Teacher Perceptions of School Psychologists’ Time Dedicated to Various Professional Duties*

<table>
<thead>
<tr>
<th>Professional Duty</th>
<th>0%</th>
<th>1%-25%</th>
<th>26%-50%</th>
<th>51%-75%</th>
<th>76%-100%</th>
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<tbody>
<tr>
<td>Psycho-educational Assessment</td>
<td>1</td>
<td>13</td>
<td>25</td>
<td>48</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>(.9%)</td>
<td>(11.5%)</td>
<td>(22.1%)</td>
<td>(42.5%)</td>
<td>(23%)</td>
</tr>
<tr>
<td>Behavioral Assessment/Management</td>
<td>5</td>
<td>59</td>
<td>33</td>
<td>13</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>(4.5%)</td>
<td>(53.2%)</td>
<td>(29.7%)</td>
<td>(11.7%)</td>
<td>(.09%)</td>
</tr>
<tr>
<td>Intervention/Counselling (Individual)</td>
<td>18</td>
<td>82</td>
<td>4</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>(16.7%)</td>
<td>(75.9%)</td>
<td>(3.7%)</td>
<td>(3.7%)</td>
<td>(0%)</td>
</tr>
<tr>
<td>Intervention/Counselling (Group)</td>
<td>34</td>
<td>65</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>(33.3%)</td>
<td>(63.7%)</td>
<td>(2.0%)</td>
<td>(1.0%)</td>
<td>(0%)</td>
</tr>
<tr>
<td>Consultation: Parents, Principals, Teachers</td>
<td>4</td>
<td>68</td>
<td>27</td>
<td>10</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>(3.5%)</td>
<td>(60.2%)</td>
<td>(23.9%)</td>
<td>(8.8%)</td>
<td>(3.5%)</td>
</tr>
<tr>
<td>Prevention</td>
<td>43</td>
<td>52</td>
<td>6</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>(41.7%)</td>
<td>(50.5%)</td>
<td>(5.8%)</td>
<td>(1.9%)</td>
<td>(0%)</td>
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<tr>
<td>In-Servicing/Workshops/Seminars</td>
<td>31</td>
<td>74</td>
<td>6</td>
<td>1</td>
<td>0</td>
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<tr>
<td></td>
<td>(27.7%)</td>
<td>(66.1%)</td>
<td>(5.4%)</td>
<td>(.9%)</td>
<td>(0%)</td>
</tr>
</tbody>
</table>

*Note.* The statistics of teacher perceptions of school psychologists’ time dedicated to various professional duties are reported in frequencies and percentages.
Appendix A

Information and Consent Form for Teachers

CONSENT FORM

Study Title: Teacher Perceptions of the Role of School Psychologists: Needs and Expectations

Principal Investigator:
Anita Reader, BA (Honours)
Graduate student in School Psychology
Mount Saint Vincent University

Supervisor:
Sara King, Ph.D R.Psych
Assistant Professor of School Psychology
Mount Saint Vincent University

Introduction
You have been invited to take part in a research study. This form gives you information about the study. Before you decide if you want to take part, it is important that you understand the purpose of this study. Taking part in this study is voluntary (your choice). Informed consent starts with the initial contact about the study and continues until the end of the study. If you have any questions or concerns that this form does not answer, the principal investigator and research supervisor will be happy to give you further information. You do not have to take part in this study and you may withdraw from this study at any time.

Purpose of Study
We are conducting a study at Mount Saint Vincent University (Halifax, Nova Scotia) to find out more about teacher understanding of the school psychologist’s role and professional competencies and to gain a better understanding of what services teachers desire from school psychologists. We hope that your contribution to this study will allow us to monitor the needs and expectations of teachers with regards to the school psychology services that are currently being offered, as well as to identify the psychological services that are most needed by educators. We are asking part-time and full-time elementary, junior high, and/or high school teachers employed in a Nova Scotia school board and enrolled in a Master of Education program at Mount Saint Vincent University to participate in this study. Our study has been approved by the Mount Saint Vincent University Research Ethics Board.

Study Design
If you decide to participate in this study, you will be asked to complete an online questionnaire. The website was designed on a secure server through Mount Saint Vincent University. The questionnaire will take about 20 minutes to complete. The questionnaire will ask you a series of questions about your education and career as a teacher, how often you access school psychology services during the school year, how often you would like to have a school psychologist at your school and available for services, and how likely it is that you would implement
recommendations made by the school psychologist. Other questions will ask you how knowledgeable you consider yourself to be about the services offered by school psychologists and school psychologists’ educational background and areas of training. These questions will include multiple choice and short answer questions. The second section asks you to indicate the percentage of estimated time that you believe a school psychologist currently spends in a number of service-provision roles as well as the amount of time that you would prefer the school psychologist to spend in each of the roles. All participants will be completing the same questionnaire series.

**Potential Harms**
We do not foresee any risks or harm for you in taking part in this study. If any issues do arise as a result of your participation in our study, you are encouraged to contact the principal investigator, Anita Reader, at Anita.Reader@msvu.ca or the research supervisor, Dr. Sara King, at (902) 457-6552 or sara.king@msvu.ca.

**Potential Benefits**
There will be no direct benefits to you from taking part in the study. However, you will be helping the researchers to learn more about what teachers know about the role of school psychologists and the psychological services that are most needed by educators. What we learn through this study may help to identify possible areas for change with respect to school psychology services; thus, making service delivery more efficient and effective and to foster a greater collaboration between educators and school psychologists.

**Alternatives to Study**
Participation in this study is completely voluntary (your choice). You do not have to take part in this study.

**Withdrawal from Study**
You may decide to withdrawal from this study at any time. There are no risks involved with withdrawing from this study at any point. Your teaching career or current teaching position will not be affected by this study. If the study is changed in any way, which could affect your decision to continue, you will be told about the changes and you may be asked to sign a new consent form. Should you decide to withdraw from the study, all data collected up to that point will be discarded and not used in the study. However, once the online survey is complete, it will not be possible to remove your data. If you decide that you no longer wish to participate, you should exit the survey before hitting “submit”.

**Costs and Reimbursements**
The study will be at no cost to you. If you choose, your name will be entered into a prize draw to win one of three $50 gift certificates to Chapters or Scholar’s Choice (your choice), as a thank you for participating in the study.
Confidentiality
Your confidentiality (privacy) will be protected throughout the study and after the study is complete. You will not be named in any reports or publications based on this research. Only an ID number will be used on the questionnaire you complete. No member of your affiliated school or school board will be aware whether or not you decide to participate in the study. All information collected from you will be stored in a locked cabinet at Mount Saint Vincent University (in the research supervisor’s office). Computer-based data will be password protected and encrypted to ensure privacy. Only researchers immediately involved in the research will have access to the information you give us. All studies conducted at Mount Saint Vincent University are subject to a potential audit by the Mount Saint Vincent University Research Ethics Board. Should an audit be conducted, your privacy will continue to be protected to the maximum extent of the law. If the results of the study are published in a scientific journal, the publication will not contain any identifiable information.

Please note that, if any issues do arise as a result of your participation in our study, you are encouraged to contact Dr. Sara King at (902) 457-6552 or sara.king@msvu.ca.

Research Rights
By clicking on the box below, you show that you have understood to your satisfaction the information regarding participation in the research project, and agree to participate in the study. In no way does this waive your legal rights nor release the investigator(s) or involved institution from their legal and professional responsibilities. You are free to withdraw from the study at any time without jeopardizing your teaching position within your affiliated school board.

If you have questions about research in general or this particular research study, at any time during or after your participation, you may contact Anita Reader (Anita.Reader@msvu.ca) or Dr. Sara King (902-457-6552 or sara.king@msvu.ca). You also have the option of contacting the University Research Ethics Board (UREB) at Mount Saint Vincent University. The UREB contact information is 902-457-6350 or Brenda Gagne (brenda.gagne@msvu.ca).

Following completion of the study, study results can be made available upon request. Please contact the principal investigator, Anita Reader, at Anita.Reader@msvu.ca, if you wish to have a copy of the results.

Contact Information
The Primary Investigator is Anita Reader. If you have any questions or comments concerning your enrollment in the study, please email Ms. Reader at Anita.Reader@msvu.ca. Dr. Sara King is the Research Supervisor and can be reached at her Mount Saint Vincent University office at 902-457-6552.
Prize Draw Information
Please click below to indicate your interest in being included in the prize draw for a Chapter’s or Scholars Choice gift certificate.

Your contact information for the draw will not be connected in any way to the data you provide in the questionnaire, nor to the consent form you sign, and you will not be identified in the study using contact information from the draw. Your contact information for the draw will be kept in a password-protected and encrypted file and will be destroyed after the draw is complete.

Participant Consent
I have read this information and consent form and have had the chance to ask questions which have been answered to my satisfaction before signing my name. I understand the nature of the study and I understand the potential risks. I understand that I have the right to withdraw from the study at any time without affecting my teaching position in any way. I understand that I am able to save and print this Consent Form for future reference. I freely agree to participate in this research study and indicate my consent by clicking the box below.
Appendix B

Psychological Service Needs Survey for Teachers
Within Nova Scotia

Please complete the entire questionnaire.

1. Please indicate your sex.
   - Male
   - Female
   - Prefer not to answer

2. Which school board do you currently work for?
   - Annapolis Valley Regional
   - Cape Breton-Victoria Regional
   - Chignecto-Central Regional
   - Conseil Scolaire Acadien Provincial
   - Halifax Regional
   - Southwest Regional (Comprises Tri-County District and South Shore District School Boards)
   - Strait Regional
   - Other _________________________________________________________

3. In which type of community do you practice?
   - Urban
   - Rural

4. What grade do you currently teach?
   - Primary-1
   - 2-3
   - 4-5
   - 6-9
   - 10-12
   - Other
   - Please Explain_______________________________________________________
5. How many years’ teaching experience do you have?

- □ 0-10
- □ 11-20
- □ 21-30
- □ 31+

6. Highest Degree Obtained:

- □ Bachelor of Education
- □ Master of Education
- □ Master of Arts/Master of Science
- □ Doctoral

7. Have you ever accessed a school psychologist’s services?

- □ Yes
- □ No

If so, what services did you require from the school psychologist?

Please Explain: _____________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8. If you have not already, would you consult with a school psychologist for psychological services? Please check all that apply:

- □ Psycho-educational Assessment (Comprehensive psycho-educational evaluations and other assessments to help in determining children’s learning/academic needs)
- □ Behavioral Assessment/Management (Assessment of and aid in development and modification of student behavior management plans for home and school)
- □ Intervention/Counseling (Individual)
- □ Intervention/Counseling (Group)
- □ Consultation (Interviewing teachers or working with school personnel and parents to develop intervention plans and provide information)

If you would not consult with a school psychologist for psychological services, who would you seek for these services? Why?

Please Explain: _____________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
9. How often do you refer a student for school psychology services or consult with a school psychologist during the school year?

☐ Never/Rarely (Less than 15% of the time)
☐ Occasionally (16-40% of the time)
☐ Often (41-65% of the time)
☐ Very frequently (More than 66% of the time)

10. How often is a school psychologist at your school and available for services?

☐ 1 Day per Week
☐ 2 Days per Week
☐ 3 Days per Week
☐ 4 Days per Week
☐ 5 Days per Week
☐ Don’t know/Not sure

11. How often would you like to have a school psychologist at your school and available for services?

☐ 1 Day per Week
☐ 2 Days per Week
☐ 3 Days per Week
☐ 4 Days per Week
☐ 5 Days per Week
☐ Don’t know/Not sure

12. Are there any services that teachers and students need from school psychologists that you believe are not currently being provided?
Please Explain: ______________________________________________________
__________________________________________________________________

13. How likely are you to implement recommendations or accommodations that have been suggested by a school psychologist?

☐ Never/Rarely (Less than 15% of the time)
☐ Occasionally (16-40% of the time)
☐ Often (41-65% of the time)
☐ Very frequently (More than 66% of the time)

Please Explain: ______________________________________________________
__________________________________________________________________
14. How knowledgeable would you say you are about the services that can be provided by school psychologists?

☐ No knowledge
☐ Somewhat knowledgeable
☐ Pretty knowledgeable
☐ Extremely Knowledgeable

15. Based on your understanding and/or experience, in what area(s) do you understand school psychologists receive training?

☐ Research
☐ Mental Health (i.e. anxiety, depression)
☐ Learning
☐ Behavior
☐ Cognitive Disability

16. What training and level of education do school psychologists have? Please check all that apply.

☐ Bachelor Degree
☐ Masters Degree
☐ Doctoral Degree
☐ Internship

17. As a teacher, please estimate the amount of time that you think a school psychologist spends in the following areas of practice.

<table>
<thead>
<tr>
<th>Category/Activity</th>
<th>Amount of Time Spent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Psychoeducational Assessment</strong> (Comprehensive psychoeducational evaluations and other assessments to help in determining children’s learning/academic needs.)</td>
<td>☐ 0%</td>
</tr>
<tr>
<td><strong>Behavioral Assessment/Management</strong> (Assessment of and aid in the development and modification of student behavior management plans for home and school)</td>
<td>☐ 0%</td>
</tr>
<tr>
<td>Category/Activity</td>
<td>Amount of Time Spent</td>
</tr>
<tr>
<td>-------------------------------------------------------</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Intervention/Counseling (Individual)</td>
<td>□ 0%</td>
</tr>
<tr>
<td></td>
<td>□ 1%-25%</td>
</tr>
<tr>
<td></td>
<td>□ 26%-50%</td>
</tr>
<tr>
<td></td>
<td>□ 51%-75%</td>
</tr>
<tr>
<td></td>
<td>□ 76%-100%</td>
</tr>
<tr>
<td>Intervention/Counseling (Group)</td>
<td>□ 0%</td>
</tr>
<tr>
<td></td>
<td>□ 1%-25%</td>
</tr>
<tr>
<td></td>
<td>□ 26%-50%</td>
</tr>
<tr>
<td></td>
<td>□ 51%-75%</td>
</tr>
<tr>
<td></td>
<td>□ 76%-100%</td>
</tr>
<tr>
<td>Consultation with: Parents, Principals, and Teachers</td>
<td>□ 0%</td>
</tr>
<tr>
<td>Prevention</td>
<td>□ 1%-25%</td>
</tr>
<tr>
<td></td>
<td>□ 26%-50%</td>
</tr>
<tr>
<td></td>
<td>□ 51%-75%</td>
</tr>
<tr>
<td></td>
<td>□ 76%-100%</td>
</tr>
<tr>
<td>Inservicing/Workshops/Seminars</td>
<td>□ 0%</td>
</tr>
<tr>
<td></td>
<td>□ 1%-25%</td>
</tr>
<tr>
<td></td>
<td>□ 26%-50%</td>
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<tr>
<td></td>
<td>□ 51%-75%</td>
</tr>
<tr>
<td></td>
<td>□ 76%-100%</td>
</tr>
</tbody>
</table>
### Any Other Services (Please Specify)

- [ ] 0%
- [ ] 1%-25%
- [ ] 26%-50%
- [ ] 51%-75%
- [ ] 76%-100%

*Thank you for taking the time to complete this questionnaire.*
Appendix C

_Instructor Email Script_

Hello,

My name is Anita Reader and I am a graduate student in the school psychology program, conducting my thesis research under the supervision of Dr. Sara King. We are conducting a study at Mount Saint Vincent University to find out more about teacher understanding of the school psychologist’s role/professional competencies and to gain a better understanding of what services teachers desire from school psychologists. This study will help us understand the needs and expectations of teachers with respect to the school psychology services that are currently being offered in local school boards, as well as to identify the psychological services that are most needed by educators.

We are asking part-time and full-time elementary, junior high, and/or high school teachers employed in a Nova Scotia school board and enrolled in a Master of Education program at Mount Saint Vincent University to participate in this study. Our study has been approved by the Mount Saint Vincent University Research Ethics Board. If possible, would you be willing to allow me to speak with your graduate education classes for about 5-10 minutes in January? This would allow me to introduce the study, to recruit participants, and to provide students with a link to my study, should they choose to participate.

Thank you in advance for your time.

Sincerely,

Anita Reader
Appendix D

Description of Study Script

My name is Anita Reader and I am a graduate student in the school psychology program, conducting my thesis research under the supervision of Dr. Sara King. We are conducting a study at Mount Saint Vincent University to find out more about teacher understanding of the school psychologist’s role and professional competencies and to gain a better understanding of what services teachers desire from school psychologists. This study will help us understand the needs and expectations of teachers with respect to the school psychology services that are currently being offered in local school boards, as well as to identify the psychological services that are most needed by educators.

We are asking full-time elementary, junior high, and/or high school teachers employed in a Nova Scotia school board and enrolled in a Master of Education program at Mount Saint Vincent University to participate in this study. Participants must be employed as full-time teachers in a school board in Nova Scotia. The online study takes about 20 minutes to complete and can be completed in your spare time and at your earliest convenience. Participation in the study is completely anonymous, and neither the school board nor the investigators will be aware whether you decide to participate or not. Our study has been approved by the Mount Saint Vincent University Research Ethics Board.

If you would like to learn more about this study, please provide your email on the sign-up sheet. This does not mean that you have to participate in the study only that more information will be given to you. Once you have read this information, you can decide whether or not you would like to participate in the study. Once an email has been sent to you, the sign-up sheet will be shredded.

If you choose to participate, your name will be entered into a prize draw to win one of three $50 gift certificates to Chapters or Scholar’s Choice (your choice), as a thank you for participating in the study.

Thank you in advance for your time.
Appendix E

Email Sent to Course Instructors

Dear Course Instructor

As part of my MA thesis in School Psychology under the supervision of Dr. Sara King at MSVU, I am recruiting practicing teachers to complete a short online survey. If you are able, I would very much appreciate it if you would send the email below to students registered in your graduate education course.

Should you have further questions or concerns, please do not hesitate to contact me by email at anita.reader@msvu.ca or my supervisor, Dr. King, at sara.king@msvu.ca or by phone at (902) 457-6552.

Many thanks in advance,

Anita Reader, BA
Graduate Student in School Psychology

Note: Email for Students (please forward or paste into a new email):

My name is Anita Reader and I am a graduate student in the school psychology program, conducting my thesis research under the supervision of Dr. Sara King. We are conducting a study at Mount Saint Vincent University to find out more about teacher understanding of the school psychologist’s role and professional competencies and to gain a better understanding of what services teachers desire from school psychologists. This study will help us understand the needs and expectations of teachers with respect to the school psychology services that are currently being offered in local school boards, as well as to identify the psychological services that are most needed by educators.

We are asking full-time elementary, junior high, and/or high school teachers employed in a Nova Scotia school board and enrolled in a Master of Education program at Mount Saint Vincent University to participate in this study. Participants must be employed as full-time teachers in a school board in Nova Scotia. The online study takes about 20 minutes to complete and can be completed in your spare time and at your earliest convenience. Participation in the study is completely anonymous, and neither the school board nor the investigators will be aware whether you decide to participate or not. The ethical components of this research study have been reviewed by the University Research Ethics Board and found to be in compliance with Mount Saint Vincent University’s Research Ethics Policy.

If you would like to learn more about this study, please click on the link provided below. This does not mean that you have to participate in the study only that more information will be given to you. Once you have read this information, you can decide whether or not you would like to participate in the study by clicking on a box to indicate your consent.
If you choose to participate, your name will be entered into a prize draw to win one of three $50 gift certificates to Chapters or Scholar’s Choice (your choice), as a thank you for participating in the study.

Thank you in advance for considering this request.

Anita Reader

[study link here]
Appendix F

Email Script

Hello! You are receiving this email because you have indicated an interest in participating in the study examining teachers’ understanding of the role of school psychologists.

The study will consist of one online questionnaire that we ask you to complete on your own time. The study will take approximately twenty minutes to complete. The questions need to be completed all at once, as there is no way to save your answers and return to complete it at a later time.

In appreciation for your time commitment, you will be entered into a draw to receive one of two Chapters gift cards. Thank you for your participation in this study! Please click on the web link below to begin the study.

[Study link here]

Sincerely,

Anita Reader, BA
Graduate Student in School Psychology
Faculty of Education
Mount Saint Vincent University

Sara King, PhD, RPsych
Assistant Professor (School Psychology)
Faculty of Education
Mount Saint Vincent University