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The Gevirtz School

DEPARTMENT OF COUNSELING, CLINICAL, AND
SCHOOL PSYCHOLOGY

RESEARCH FESTIVAL 2020



THURSDAY, NOVEMBER 12, 2020

8:25AM-12:20PM



November 12, 2020

Land Acknowledgement Statement

We would like to honor the directives offered by Mia Lopez, Chairperson of Coastal Band of the Chumash Nations, by paying our respect and by acknowledging the Chumash people, traditional custodians of the land on which CCSP's Research Festival 2020 takes place. We understand the importance of recognizing this area's rich history and culture, both past and present, as well as the significance of Native American peoples' place in the learning and research activities of this university.

Andrés J. Consoli & María Sánchez Gonzalez, Faculty and Staff Co-Hosts



Veronica Franco, M.S. (she/her/ella)
Counseling Psychology

Understanding the Connection: The Transmission of Mexican American Cultural Practices and Wellbeing



Erick Felix (he/him)
Counseling Psychology

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Understanding clinician adaptations to Parent-Child Interaction Therapy: A mixed-methods study



Corinna Klein, MSW (she/her)

Clinical Psychology

Improving the Quality of Children's Mental Health Care with Progress Measures: A Mixed-Methods Study of Therapist Attitudes



Danny Feinberg (he/him/his)

School Psychology

Rasch Analysis of the Parental Engagement of Families from Latino Backgrounds Self-Report Measure (PEFL): Exploration of the validity of a recently developed, culturally-contextualized measure and implications for the measurement of parental engagement in Santa Barbara County.



Tameisha Hinton, M.S. (she/her)

School Psychology

Examining the Social Emotional Health Survey-Secondary for Use With Latinx Youth



Sepideh M. Alavi, M.A. (she/her)

Clinical Psychology

Secondary Trauma and Organizational Factors for Health Care Providers Following Disaster

Veronica Franco, M.S. (she/her/ella)

Understanding the Connection: The Transmission of Mexican American Cultural Practices and Wellbeing

Abstract

The current qualitative study explores cultural practices Mexican American individuals identify as helping their wellbeing and is designed to help understand how this process occurs in the context of emerging adulthood. Cultural practices influence individuals' worldviews and ways of connecting with the world (Knight et al., 2010). Particularly, cultural values are central to the everyday lives of many Mexican Americans (Morgan Consoli & Llamas, 2013) and serve as a blueprint for how Latinx learn to engage in the world (Gonzales, et al., 2008).

The transmission of culture is described as the process by which cultural practices from one generation to the next are passed down (Carranza, 2013; Hughes et al., 2006; Hynie, Lalonde, & Lee 2006). Among Latinx the act of passing down cultural practices has been documented through the transmission of values, beliefs, and practices that take place through individuals daily routines in which culturally specific language is spoken and food, music, and traditions are observed (Hughes et al., 2006). Ethnic identity, the presumed result of ethnic socialization, has also been positively associated with wellbeing among Latinx (French & Chavez, 2010).

Wellbeing varies across different cultural groups. Many Mexican Americans have a more collectivist perspective and cultural values such as *familismo*, *respeto*, and *confianza* have been attributed to individual's wellbeing (Germán, Gonzales, & Dumka, 2009; Gonzales et al., 2008; Hernandez et al., 2016, among others). Literature highlights that many Latinx conceptualization of wellbeing include having harmonious social relationships and family as fundamental parts of their lives (Hernandez et al., 2016).

However, the majority of the extant literature on culture practices and wellbeing among Latinx has been conducted in the context of higher education (for example, Iturbide, Raffaelli, Carlo, 2009; Gloria et al., 2009; Morgan Consoli & Llamas, 2013). Research demonstrates that one's social context such as family responsibilities, socioeconomic status, and geographical location have significant implications for emerging adulthood (Sanchez, et al., 2010). Therefore, it is important to understand how contextual factors influence Latinx, emerging adult wellbeing.

Nine participants were recruited via sampling through email listservs and community contacts. Criteria for participants included self-identifying as Mexican American between the ages 18 and 25, currently not enrolled in higher education, and willingness to discuss their cultural practices and wellbeing. Interviews last approximately one and a half hours and were audio-recorded with the consent of the participants. Following the semi-structured interview, participants were asked to fill out a brief demographic questionnaire.

Data was analyzed using Constructivist Grounded Theory (Charmaz, 2014). This approach utilizes an iterative, inductive approach in data collection and analysis (Charmaz, 2014), and is grounded in a constructivist paradigm that focuses on co-created meaning between the researcher and the participants. Data analysis consists of an analysis team, including the primary investigator and two analysts. Preliminary analysis of six analyzed interviews is presented and emergent themes around definition of wellbeing, culturally specific practices, impacts of wellbeing, and forms of knowing one is well are presented. Limitations and implications of Mexican American emergent adult's wellbeing within research and practice are discussed.

Advisor: Melissa Morgan, PhD

Acknowledgments: Special thanks Melissa Morgan for her support in the conceptualization and development of research project and to Erick N. Felix and Abigail Giron who were part of my analysis team.

Please use this link to submit your feedback to the presenter.

The link for the Qualtric Survey.

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Erick Felix (he/him)

Mexican Immigrant Parents of U.S. Born Youth: An Exploration of Resilience

Abstract

Research across a variety of cultures confirms the universal importance of parenting for children's optimal development and adjustment (Keinhuis et al., 2010) and its contribution to positive outcomes in self-esteem and prosocial behaviors (Khaleque & Rohner, 2012). Studies on minority and Latinx immigrant families have historically not given enough attention to the contextual, racial, and cultural factors that contribute to parenting styles and child development in this population (Coll & Szalacha, 2004; Harrison et al., 1990; Harwood et al., 2002). The focus on parenting styles and child development in Latinx immigrant families has instead focused on comparative paradigms, viewing children of color and children of immigrant parents as deficient, often contrasting their own unique development with those of U.S.-born White children (Perreira, Chapman, & Stein, 2006). There is a continued need to revisit and examine parenting practices and youth development in Latinx immigrant families (Perreira, Chapman, & Stein, 2006), particularly Mexican immigrant families who account for over 60% of the Hispanic US population (U.S. Census, 2018).

Latinx immigrant families often experience socioenvironmental challenges, settling in low-income neighborhoods where community resources are scarce (Cruz-Santiago & Ramirez-Garcia, 2011) and navigating obstacles such as discrimination (Ayon & Garcia, 2019). Despite the adversities faced by Mexican immigrant families, they have demonstrated resilience after immigrating to the US (Gamble & Modry-Mandell, 2008; German et al., 2009). The current study will explore the experiences of Mexican immigrant parents raising U.S. born youth (ages 12-18) to gain a better understanding of the current environment they navigate. Four 40-60-minute interviews have been collected and analyzed with data collection ongoing until saturation. Participants had interviews in either Spanish or English. Participants who indicated interest and met criteria for the study were invited to schedule a time to meet for an interview. Interviews were conducted remotely via Zoom due to the COVID-19 pandemic after a consent process.

Boyatzis' Thematic Analysis (1998) was the qualitative approach used to identify themes. Researchers met to discuss and explore preconceived biases, assumptions, and notions before analysis in an effort to be transparent and stay true to the participant's words (Creswell & Poth, 2018). An analysis team of three researchers analyzed the transcripts independently and then the analysis team met to reach a consensus on coding and coding definitions. Preliminary themes include sources of strength in the US for parenting, parent's responsibility to pass on cultural values, and adversities they have experienced immigrating and raising a family in the US. Many immigrant parents described various sources of strength in helping them raise their children captured in such themes such as church community and family caretakers. Some participants indicated it is the parent's responsibility to pass on cultural values in the US including the family remaining united during adversities and maintaining a sense of cultural identity to persevere in the US. Participants also shared their unique immigration experiences, including the emotional pain from being separated from their family and the increasing difficulty in immigrating successfully to the US. Limitations, implications and future directions will be discussed.

Advisor: Melissa Morgan, PhD

Acknowledgements: My biological family, my academic family, and my hood family. This research project is for you, me-search as to how I have come this far.

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Kristina Esopo (she/her)

Exploring Latinx, LGBTQ+ Young Adults' Experiences Seeking Mental Health Services: A Qualitative Study

Abstract

Latinx, LGBTQ+ young adults experience challenges related to discrimination, stigma, and marginalization that produce mental health disparities, including elevated rates of depression, self-harm, suicidal ideation, and suicide attempts (Bostwick et al., 2014; Lytle et al., 2014; Rhodes et al., 2020; Toomey et al., 2017). Despite potential increased need for support, stigma of mental health among Latinx communities (Schmitz et al., 2019) and mental health providers' lack of attunement to their unique needs (Moore et al., 2020) may deter Latinx, LGBTQ+ young adults from seeking mental health services. There is a dearth of literature examining engagement and experiences with mental health services among this population (Filice & Meyer, 2018). In order to reduce mental health inequities and improve access to and quality of services for Latinx, LGBTQ+ young adults, it is important to gain a rich, contextualized understanding of their service use experiences.

The current study aims to explore how Latinx, LGBTQ+ young adults make sense of their experiences seeking and receiving mental health services. Seven young adults who self-identified as Latinx and LGBTQ+, were between the ages of 18 and 24, were living in California, and had experience with mental health services, were recruited to participate in the study. Participants were recruited via social media posts and emails distributed through LGBTQ+/Latinx community centers and organizations. After obtaining consent, participants completed a brief demographic questionnaire and engaged in a 60-90-minute semi-structured interview with the researcher, using the online video platform Zoom. Interview questions explored general experiences seeking support, contextual factors shaping their views toward mental health services, past experiences with services, and barriers to accessing services.

Interview transcripts were analyzed using Smith et al.'s (2009) Interpretive Phenomenological Analysis (IPA), a qualitative, phenomenological approach that focuses specifically on how participants make sense of their lived experiences. Based on guidelines outlined by Smith et al. (2009), within-case analysis consisted of: 1) data immersion through reading and re-reading each transcript; 2) free textual analysis, noting the content of what participants share, how they interact with the research, and thoughts regarding a budding conceptual framework that ties experiences together; 3) identification of emergent themes; and 4) clustering and organizing themes based on shared meaning. After mapping themes for each individual case, cross-case analysis consisted of looking for patterns across cases with the intention to create a master table of superordinate themes.

Though data analysis is ongoing, preliminary findings suggested three superordinate themes related to the meaning of Latinx, LGBTQ+ young adults' experiences with mental health services: Barriers to Seeking Services, Shifting Views of Services, and Quality of Connection with the Therapist. Implications and future directions will be discussed. Together, results from this study seek to inform future efforts to increase access to and quality of mental health services for Latinx LGBTQ+ young adults.

Advisor: Tania Israel, Ph.D.

Acknowledgements: I would like to thank Tania for her mentorship and unwavering support throughout this process; Melissa Morgan for her guidance in designing a qualitative research study; my partner, friends, and colleagues for walking alongside me every step of the way; and a special thanks to each of the participants who were willing to share their experiences with me.

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Emily Ferguson (she/her/hers)

Social Interaction Skill Intervention for Autistic Adults with Intellectual Disability and Limited Language: A Pilot of the SKILL Program

Abstract

There is a dearth of research that focuses on social intervention efforts for adults on the autism spectrum with intellectual disability and limited conversational language. Using a multiple baseline experimental design, this pilot investigation of the Socialization Knowledge for Individuals with Limited Language (SKILL) program evaluated a novel peer-facilitated program specifically designed to target social interaction skills for this population. Findings from five pilot participants yielded evidence of social improvements across specific verbal skills (on-topic conversational contributions and responses) and nonverbal behaviors (eye-contact, active listening), as evidenced by coded social conversation probes and parent-report measures. These findings demonstrate the promise of a group socialization intervention for a population that is notably underrepresented in autism intervention research.

Advisor: Ty Vernon

Acknowledgements: I would like to thank my advisor for providing critical insight and support for the design and implementation of this intervention. I am also grateful for the Koegel Autism Center's dedicated team of behavior coders and peer facilitators who made this research possible. Finally, we greatly appreciate the commitment and input from the participating SKILL families.

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Mei-Ki (Maggie) Chan (she/her/hers)

Profiles of Social Support and Psychological and Academic Functioning Among Adolescents

Abstract

Social support is empirically linked to improved psychological and academic functioning for adolescents. Latent profile analysis was conducted to explore the typologies of social support profiles indicated by family, peer, and school support separately among early ($n = 27,399$ 7th grade) and late ($n = 27,984$ 11th grade) adolescents and how each profile related to psychological and academic functioning. The moderating effect of gender was also examined. Results indicated five social support profiles across both grade levels, with psychological and academic functioning differentiated by the profiles. The results showed three convergent profiles (i.e., *High*, *Moderate*, and *Low Support*) and two divergent profiles (i.e., *Minimum Peer Support* and *Minimum Family Support*). The profiles of *Minimum Peer Support* and *Minimum Family Support* showed the lowest functioning in all domains across grade levels, whereas the *High Support* profile showed the highest psychological health and academic performance. Moderating effects of gender were observed in the associations between social support profiles and psychological functioning and were more prominent among 7th than 11th graders. Findings suggest the impact of social support is determined by the combinations of different support sources, age, and gender. The social support profiles and their associations with students' personal characteristics and outcomes may inform practitioners in identifying vulnerable groups and planning interventions.

Advisor: Dr. Jill D. Sharkey

Acknowledgment: I am grateful for the guidance provided by Dr. Sharkey, Dr. Nylund-Gibson, and Dr. Dowdy on this project. The dataset used in this project was generously shared by Dr. Furlong, Dr. Nylund-Gibson, and Dr. Dowdy.

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Adrian M. Valadez (she/her/hers)

Implicit Internalized Binegativity: Measurement Design and Development

Abstract

Bisexual individuals report higher rates of mental illness, substance use, and physical violence compared to their heterosexual counterparts. One potential contributor to these disparities is *Internalized Binegativity (IB)* – a bisexual-specific form of internalized stigma. Internalized constructs such as IB have typically been measured using self-report (explicit) questionnaires in which participants must respond to subjective items regarding their feelings about themselves as members of a stigmatized group. However, the use of self-report measures and the various pitfalls associated with them is addressed extensively in measurement research. In regard to self-stigma and internalized constructs it remains unclear to what extent self-report measures accurately capture internalized stigma.

While explicit measures are still readily used to measure internalized constructs, an alternative approach used by some stigma researchers has been to implement implicit tests instead. Implicit Association Tests (IAT's) have commonly been used to examine attitudes towards groups of people by requiring participants to sort images or words into categories with positive and negative connotations. Several studies have explored the use of implicit tests as measures of self-stigma among marginalized populations such as overweight college women, injectable drug users, and individuals with severe mental illness. These previous research studies show promising results regarding the use of implicit measures to capture new dimensions of internalized self-stigma and predict mental health-related outcomes.

The current study reviews the development and initial testing of a novel implicit measure (BiAT) based on an existing implicit test for attitudes towards bisexuality. In order to explore the potential uses of the BiAT, our research questions focused on demonstrating the convergent, discriminant, and predictive validity of the measure. A total of 284 bisexual, pansexual, and queer participants were recruited via MTurk and asked to complete one of two components (Bisexual versus Straight or Bisexual versus Gay/Lesbian) of the BiAT. Additionally, participants were asked to respond to a series of outcome measures related to levels of depression, anxiety, alcohol and drug use, and psychological well-being.

Results indicated that participants demonstrated a significant implicit bias. Specifically, participants exhibited an implicit preference towards heterosexuality compared to bisexuality. Interestingly, participants also demonstrated an implicit preference towards bisexuality compared to homosexuality.

Results also demonstrated that the BiAT was likely measuring internalized constructs that may not be captured in self-report measures alone. Additionally, the BiAT seemed to be successful in discerning social desirability bias- a common limitation of self-report measures. Interestingly, the novel measure appeared to be inconsistent in its use for predicting mental health outcomes. While the implicit preference for Bisexual versus Straight did not significantly contribute to the predictions of mental health outcomes, the implicit preference for Bisexual versus Gay/Lesbian showed promise in predicting alcohol use among participants.

Advisor: Dr. Tania Israel

Acknowledgment: I would like to thank Tania for her wonderful mentorship and my RISE family (Kristina, Chongzheng, Jackie, Sam, Caitlin) for commiserating (and sometimes celebrating!) with me. Thank you to my partner, friends, and other loved ones for the much-needed emotional support and the reminders to keep pushing (with some rest, here and there). This project has been funded by the American Psychological Association, Division 44, Malyon-Smith Scholarship.

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Jason Fly (He/Him/His)

Factors Associated with Treatment Dropout at a Trauma-Focused Community Mental Health Clinic

Abstract

Objective: Although the problem of dropout has long been an issue for the effective delivery of mental health services, most research has been done as a residual to the main analysis of treatment effects in randomized controlled trials (RCTs). Moreover, trauma-focused treatment may contribute to client dropout by exacerbating trauma symptoms. The current study seeks to elucidate any client characteristics that may contribute to dropping out of trauma-focused psychotherapy in a real-world community clinic setting, at the distinct times of treatment initiation, treatment engagement, and treatment completion. **Method:** Participants ($n = 853$) were invited in collaboration with California State University, Long Beach (CSULB) and The Long Beach Trauma and Recovery Center (LBTRC) through a supporting grant from the State of California's victim compensation fund. Adults ages 18 – 78 years old ($M = 36.36$, $SD 12.37$) were referred due to exposure as a victim, or family member of a victim of violence. Demographic data and a health profile questionnaire were collected at an initial intake interview, and every three sessions thereafter to track health outcomes progress. For the purposes of this study, measures examining depression symptoms, traumatic stress symptoms, quality of life, and mental health stigma were used as well as demographic data. Logistic regression models were used to assess factors associated with dropout rates at three different time points: Treatment initiation, treatment engagement, and treatment completion. **Results:** For this sample, 40.3% dropped out after an intake session and before attending at least three sessions. Of this group, education level was predictive of dropout, with less than or equal to eighth grade and ninth to eleventh grade predictive of dropout in this stage of treatment. Also, quality of life predicted dropout in the area of social relationships. In the engagement phase, 31.3% of participants dropped out before nine treatments. Once again, lower levels of education predicted dropout respective of the previously reported levels. Also, levels of perceived mental health stigma predicted dropout at this stage. No significant predictors of dropout were revealed after participants entered the completion phase of at least nine sessions. **Discussion:** Consistent with previous research, dropout rates in the current study were highest in the initial stages of clients entering into treatment. Education level and quality of social relationships seem to play a role, and could be considered in the initial clinical interview as areas of concern to increase retention in treatment. After clients have started to engage in treatment, education levels endure as a contributing factor in increased dropout. Because of this recurring client trait in the data, more attention could be made to address barriers in completing treatment with this in mind. Also, levels of mental health stigma increased likelihood of dropout, which may be addressed during treatment either during sessions as augments to the offered evidence-based psychotherapies (EBPs) or as integrated supplementary support through other programs in the community. Future study should address the effectiveness of EBPs in relation to dropout in community mental health settings for increased implementation and stronger retention rates in real-world settings.

Advisors: Dr. Erika Felix; Dr. Bitu Ghafoori (California State University, Long Beach)

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Dr. Bitu Ghafoori- Director of the Long Beach Trauma Recovery Center

Dr. Erika Felix and members of the Families and Stress lab: Haley Meskunyas, Natalia Jaramillo, Melissa Janson, and Jazzmyn Ward for their support and encouragement during this process. This research was made possible by a grant from the State of California Victim Compensation Board.

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Chloe (Yuexin) Zhang (she/her/hers)

Multicultural and International Training in School Psychology Programs: A Global Perspective **Abstract**

Purpose

This presentation will highlight the results of analyses of data from 24 countries and 85 programs featuring different school psychology training models. Leading proponents in their own countries provided important insights into international and multicultural training challenges faced by trainers and possibilities for advancing the field in a collaborative effort. This study extends the long-lasting endeavor in developing cross-national understanding among psychologists and contributes to the effort in preparing school psychologists with multicultural and international competencies.

Current study

The training of school psychologists has a significant impact on the nature of school psychology service in the future field. Scholarship in school psychology has continuously demonstrated the importance of providing multicultural training to preservice school psychologists. Multicultural training involves providing knowledge about different minority and immigrant groups, fostering self-awareness, and teaching multicultural skills to work with diverse populations. However, there are noticeable difficulties in adequately incorporating such a requirement into practice due to the insufficient structure and content of related training for school psychologists (Newell et al., 2010).

Likewise, research focusing on the international aspect in training remains relatively scarce, despite abundant scholarship documenting the benefits of understanding internationally the varied preparation of school psychologists (Fagan & Wise, 2007). Also problematic, even more limited is the practical guidance on international training, which involves providing knowledge about different minority and immigrant groups, provision of school psychology services in different countries, fostering self-awareness, and teaching multicultural skills to work with diverse populations in different educational settings.

The current study seeks to fill these gaps by evaluating different training models of school psychology programs around the world. The following provides a brief summary of the a) participants and procedures, b) analyses and results, and c) contributions.

Participants and Procedures

This study includes school psychology trainers from 24 countries ($n = 85$). The main focus is to explore the current initiatives of school psychology trainers about multicultural and international training in their programs and suggests the possibilities for future directions.

A multicultural international training survey was distributed digitally to program trainers around the world through the International School Psychology Association (ISPA). The survey includes 3 sections (i.e., institution and program description, training/curriculum, and program) that consist of 33 questions. The section of institution and program description inquires information about program name and location, type (i.e., master, doctoral or other non-doctoral programs), years to complete, accreditation or approval, faculty and scholars with international backgrounds, and international students. Section two encompasses multicultural and international training philosophy and missions and important components of different training models (i.e., courses and methods to develop multicultural and international competence among students). Section three features the program attitude toward multicultural international training and support needed to advance the existing training in the program.

Analyses and Results

Statistical analyses included descriptive summaries, graphs, and text analysis to study various patterns of responses across programs around the world regarding the existing international and multicultural training models. Comparisons are also made across programs from different regions. Results reveal a lack of multicultural training effectiveness in one-third of the programs in this study. For instance, approximately 22 percent of the responses reported that their programs do

not have any or have very little multicultural components incorporated into their training models. Nearly half of the respondents rated the degree to which their programs deliver multicultural training as “somewhat,” indicating a lack of strong multicultural training in most of these programs.

Such a gap is even more apparent in the landscape of international training. Data showed that little did trainers state positively about the delivery of such training in their programs. Only 3 indicated having a strong international training component, and 95 percent of the respondents deem such a component as missing.

There are several common appeals based on international trainers’ responses on future directions: 1) international and student collaboration (i.e. study abroad program and collaboration on practical training); 2) international research projects (i.e. implementing joint programs); and 3) visiting scholars (i.e. staff exchange). These results highlight multiple possibilities for advancing multicultural international training in the field of school psychology and suggest both practical and meaningful ways moving forward for school psychology trainers.

Contributions

This presentation seeks to inform practice and science regarding the cultivation of tomorrow’s school psychologists. The analyses presented on international multicultural training in school psychology programs will enlighten future international training practice and reinforce the collaborative relationships among school psychology trainers.

Advisor: Dr. Shane Jimerson

Acknowledgment: I would like to thank Shane for all his support, academically and personally, without which I would definitely not make it to this far. I also greatly value our Team Awesome (Mihya and Allie) for always being there for me to navigate all the ups and downs. And many thanks to my dear family and friends for they are my support system which motivates me to continue and not give up. I also received a lot of assistance from the international colleagues associated with the International School Psychology Association (ISPA) with this project, especially Dr. Chryse Hatzichristou from the University of Athens.

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Erika Luis Sanchez (she/her/ella)

*Understanding clinician adaptations to Parent-Child Interaction Therapy:
A mixed-methods study*

Abstract

Background: Parent-Child Interaction Therapy (PCIT) is an evidence-based practice, which has been shown to successfully reduce disruptive behavior and physical maltreatment among youth ages 2-7 years old. Culturally adapted PCIT has also demonstrated effectiveness with ethnic minority families. However, barriers to disseminating adapted models remain. Implementation science recognizes that adaptations occur naturally when evidence-based practices are transported into the community; for instance, to meet the complex needs of clients in these settings. Thus, it is important to understand how community clinicians make adaptations and whether adaptations are consistent with those that have been shown to be effective in research trials, which typically aim to augment client engagement, or if adaptations represent drift from core components of the interventions.

Methods: This mixed-methods study aimed to investigate community clinician adaptations of PCIT, using the Lau et al. (2018) Augmenting and Reducing Adaptations Framework. Surveys were collected to gain a breadth of understanding about clinician adaptations, and qualitative interviews were conducted to gain a depth of understanding about the content, reasons for adapting, and impact of cultural considerations. Clinicians (N = 314) who received training in and were delivering PCIT at the time of the study were recruited via PCIT listserves to complete a survey collecting demographic information, professional background, workload, and experiences delivering PCIT.

Results: Clinicians were 25.8% ethnic minority and 73.8% White. Most clinicians had a master's degree (72.1%), were licensed (74.2%), and were PCIT-certified. To evaluate types of adaptations clinicians engaged in when providing PCIT, clinicians completed the Adaptations to Evidence-Based Practices Scale, which has a two-factor structure measuring Augmenting and Reducing adaptations. Results suggested clinicians engaged in Augmenting adaptations more extensively ($M = 2.33$, $SD = 0.81$) than Reducing/Reordering adaptations ($M = 1.31$, $SD = 0.41$), $t(314) = 25.20$, $p < .001$). Clinicians with a greater PCIT caseload reported both greater Reducing scores ($R^2 = .07$, $b = 0.05$, $SE = 0.02$, $p = .003$), and greater Augmenting scores ($R^2 = .05$, $b = 0.07$, $SE = 0.03$, $p = .029$). Qualitative interviews with 23 clinicians were conducted to triangulate findings and expand on the reasons and context for engaging in different types of adaptations. Clinicians delivering PCIT in another language (e.g., Spanish) were oversampled to focus on cultural adaptations that were made for ethnic minority families. Thematic analysis mirrored quantitative findings in that adaptations to augment PCIT were much more commonly discussed by clinicians than reducing adaptations. Particularly, clinicians discussed engaging in both augmenting adaptations (such as integrating or incorporating other interventions into PCIT and tailoring PCIT delivery) and reducing adaptations (such as removing or skipping PCIT components) in response to the clinical diagnoses or presentations the child or parents dealt with. Augmenting adaptations including tailoring (e.g., reframing of PCIT components, translating PCIT terminology to match family's cultural background) were more specifically discussed as relevant when clinicians talked about working with Spanish-speaking families. Results from this study will provide an in-depth understanding of community clinician adaptations to PCIT within community-based care. Implications and future directions for the implementation of PCIT with ethnic minority families in community settings will be discussed.

Advisor: Miya Barnett

Acknowledgements: The clinicians who participated in the study. My advisor, Miya Barnett, the graduate students and undergraduate research assistant in the PADRES Lab.

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Corinna Klein, MSW (she/her)

Improving the Quality of Children's Mental Health Care with Progress Measures: A Mixed-Methods Study of Therapist Attitudes

Abstract

Routine progress monitoring has been identified as a critical component of patient-focused treatment. Monitoring progress systematically provides clinicians with crucial information about treatment progress, informs the course of treatment, and ensures that clients who are not responding to treatment are quickly identified. It has been suggested that training clinicians to use progress measures may be more feasible than providing training in evidence-based treatments (EBTs), as the former can be applied across diagnoses, treatment settings, and theoretical orientations. Despite the proven usefulness of progress measures, most clinicians report not implementing them in routine practice. Therapists rely significantly more on clinical intuition than on validated assessments in evaluating patient progress, despite evidence that therapist judgement is often an inaccurate barometer of client progress. Research is needed that identifies what characteristics of progress measures are more appealing to clinicians, and how these factors impact their implementation in routine practice.

In behavioral parent training programs, which are best practice treatments for child behavior disorders, progress measures offer essential information about parenting skills, parental stress, and child symptomatology. Specifically, in Parent-Child Interaction Therapy (PCIT), an assessment-driven protocol, clinicians monitor progress throughout treatment using two distinctive assessment types (i.e., parent report measures and behavior observations), making PCIT an ideal model in which to investigate preferred components of progress monitoring. The current study investigates clinician attitudes towards progress measures in children's mental health treatment and identifies factors that promote clinician use of progress measures in care. This mixed method study investigates clinician attitudes towards two types of progress measures in PCIT and routine practice. Quantitative analyses of a survey distributed to clinicians ($n = 324$) indicated that clinicians expressed more positive attitudes towards behavior observation assessments ($EMM = 4.42, SE = .06$) and parent report assessments ($EMM = 4.26, SE = .06$) in the context of PCIT than measures used in routine practice ($EMM = 3.86, SE = .06$), $F(2, 610.30) = 146.01, p < .001$. Results indicate that clinicians view two types of routine measures favorably when working with parents, both behavior observation measures and parent reports of child symptomatology. Clinician race/ethnicity was significantly related to measure-specific attitudes, $F(2, 293.337) = 3.43, p = .034$. Qualitative interviews highlighted how perceptions of measure reliability, type of data offered, ease of use, utility in guiding sessions and motivating clients, and embeddedness in treatment protocol impact therapist preferences. These findings have significant implications for efforts by community agencies to implement progress monitoring in the services they offer families and should shape future efforts to increase the use of progress measures in routine care for parents and families.

Advisor: Dr. Miya Barnett

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Danny Feinberg (he/him/his)

Rasch Analysis of the Parental Engagement of Families from Latino Backgrounds Self-Report Measure (PEFL): Exploration of the validity of a recently developed, culturally-contextualized measure and implications for the measurement of parental engagement in Santa Barbara County

Abstract

Parental engagement, defined as “the multiple ways that parents support their children’s education and learning,” has emerged as a key protective factor for children’s academic success (McWayne, Melzi, Limlingan, & Schick, 2016). Historically, parental engagement has been defined by researchers without recognition of how cultural differences may impact measurement of the construct. The lack of recognition of the profound role that culture plays in shaping parental behaviors combined with an underrepresentation of non-white faculty in academia has led to a homogenization of the construct along white, middle-class lines. Unfortunately, this has resulted in a lack of representation for parents from diverse cultural backgrounds in the development of the construct, especially for those from low-income, immigrant, or ethnic minority backgrounds. Research has demonstrated that when there is a mismatch between the cultural values of school leadership and the families of their students, this mismatch can contribute to further marginalization of those families and students (Lareau & Horvat, 1999). If we are to serve all students in our educational system, we must be inclusive of the cultural values of their families, especially in the way that we measure critical constructs like the engagement of parents in their children’s education.

In California, Latinx students constitute more than half of the school-aged population (Quirk, Grimm, Furlong, Nylund-Gibson, & Swami, 2016) and 77% of the Latinx population speaks a language other than English at home (Pew Research, 2014). Within the research literature on parental engagement, articles examining the construct within Latinx communities, specifically, are few, but research in this area is growing (Palacios, 2012; Suizzo, 2014; McWayne & Melzi, 2014; McWayne, Melzi, Limlingan, & Schick, 2016; McWayne, Foster, & Melzi, 2018). Recently, researchers developed and validated a culturally contextualized measure of parental engagement for Latinx parents of preschool children, The Parental Engagement of Families from Latino Backgrounds Questionnaire (PEFL; McWayne, Foster, & Melzi, 2018). The emic and qualitative approach that was used in the development of the PEFL resulted in a measure that claims to be uniquely qualified to be sensitive to nuanced, culturally-relevant parental engagement behaviors for Latinx parents of preschool children in ways that other measures are not (McWayne, Melzi, & Kaslow, 2014; McWayne & Melzi, 2014; McWayne, Foster, & Melzi, 2018).

The current project utilized a Rasch model to verify whether the PEFL functions similarly with Latinx-identifying preschool parents in Santa Barbara County, California, as it did when investigated by McWayne, Foster, and Melzi (2018) in the Northeast region of the United States. In addition, the present analyses tested for invariance between the English and Spanish versions of the PEFL. Responses on the PEFL from 168 parents of preschoolers in Santa Barbara County who identified as Latinx/a/o were included in the current project. Results and implications for culturally contextualized measurement of parental engagement are discussed.

Advisor: Dr. Matthew Quirk

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Tameisha Hinton, M.S. (she/her)

Examining the Social Emotional Health Survey-Secondary for Use With Latinx Youth

Abstract

Culturally responsive assessment practices include validated measures appropriate for use with diverse populations. Considering the increasing population of Latinx students in U.S. schools, measures need co-validated English and Spanish (SEHS) language forms. This study examined the Social Emotional Health Survey–Secondary with Latinx students who completed a form in either Spanish or English. With a matched sample of 1,404 Latinx students across 113 California schools, the analyses examined the factor structure, measurement invariance, and latent-trait factor means of students who completed the SEHS in either Spanish or English. The factor structure was invariant across groups with some latent mean differences observed. Educational practice implications are considered.

Advisor: Dr. Erin Dowdy

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Sepideh M. Alavi, M.A. (she/her)

Secondary Trauma and Organizational Factors for Health Care Providers Following Disaster
Abstract

Secondary trauma experienced by health care providers during natural disasters can impact health, mental health, stress, and burnout. As disasters increase in both frequency and lethality, it is critical to understand the psychosocial factors impacting providers at the front lines of disaster response in communities facing significant losses. Taking a socio-ecological perspective, the interaction between individual, community and organizational factors related to hospital disaster readiness, response protocols, and attention to secondary trauma, are critical to investigate. In the current study, 22 health care providers at a health care system participated in semi-structured in-depth interviews, approximately 9-12 months after a lethal debris flow occurred, subsequent to an extensive wildfire. Data were analyzed using grounded theory. Participants described organizational factors that were significant to their psychological well-being, including organizational preparedness in disaster response prior to the event, the challenges and benefits of debriefing in its aftermath, their experiences of recognition and acknowledgement for their unique contributions, embedded organizationally-sponsored support programs and resources, and organizational scaffolding to help health care providers balance work and time-off. Results also pointed to the challenges of translating scientific knowledge about secondary trauma prevention into practice. Recommendations and implications for implementing organizational strategies to reduce secondary traumatic stress and increasing psychological well-being among health care providers in disaster response will be discussed.

Advisor: Dr. Maryam Kia-Keating

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