

PRINCIPALS' FAMILIARITY AND USE OF SEL INTERVENTIONS

SOCIAL-EMOTIONAL LEARNING INTERVENTIONS:
FAMILIARITY AND USE AMONG NYS ELEMENTARY SCHOOL PRINCIPALS

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Abstract

As defined by the Collaborative for Academic, Social, and Emotional Learning (CASEL, 2012), social-emotional learning (SEL) involves the acquisition of skills necessary to: identify and manage one's emotions, relate to and establish relationships with others, and make positive and healthy decisions. With only 40% of kindergarten students demonstrating the social-emotional skills needed to be both academically and socially successful upon school entrance (Yates et al., 2008), explicit instruction targeting SEL is needed. As this instruction requires systems-level implementation and decision-making practices, members of these decision-making bodies can include several different school personnel, who may have varying levels of familiarity and previous use of SEL programs. Because the school principal is responsible for overseeing the implementation of school-wide programs (NYS Education Department, 2014), obtaining information regarding their familiarity and use of SEL programs, as well as their decision-making practices is needed. Consequently, the present study examined the extent to which principals participate in SEL decision-making practices; the selection procedures and decision making methods they use to select SEL programs; and their levels of familiarity, past use, and current use of CASEL approved SEL programs. The relationship between principal demographic characteristics and familiarity and use of SEL programs was also evaluated using survey methods. Analysis of descriptive statistics, frequency data, and three multiple regression analyses indicated that most NYS elementary school principals participate in SEL program decision-making. Additionally, they use a variety of methods for learning about programs and deciding upon programs. Overall, however, NYS elementary school principals have little familiarity, past use, or current use with CASEL-approved programs, suggesting a need for increased dissemination and professional development regarding these programs and resources.

Chapter 1

Introduction

Suicide rates among students 10 to 24 years of age continues to be one of the four leading causes of death among this age group. Additionally, mental health diagnoses among youth and young adults (grades 9-12) are at an all-time high (Eaton et al., 2012). Thus, today's youth require a strong need for immediate social and emotional interventions. While the primary focus of schools is on academic learning, there is an increasing pressure for schools to identify ways to assist students in managing content that may trigger strong emotions and mastering *social and emotional competencies*—teaching individuals how to manage social and emotional demands in daily life (Elias et al., 1997; Greenberg, Weissberg, O'Brien, Zins, Fredericks, Resnik, & Elias, 2003). The idea of fostering social-emotional development is not new. In fact, Elias et al. (1997) argued that the development of social-emotional skills are a pivotal challenge faced by education systems, families, and communities throughout the country. Regardless of the understanding that social-emotional competencies are critical components in healthy development, research continues to identify that only 40% of students entering kindergarten manifest the social-emotional skills needed to be both academically and socially successful (Yates, Ostrosky, Cheatham, Fetting, Shaffer, & Santos, 2008). Consequently, the amount of attention this topic has gained continues to increase, and published social-emotional curriculums continue to be developed.

The Development of Social-Emotional Learning

Social-Emotional Learning (SEL) is defined as “the process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish

and maintain positive relationships, and make responsible decisions” (CASEL, 2012, p. 4). The SEL movement began in the late 1980’s when Howard Gardner introduced a theory on multiple intelligences. In this theory, Gardner identified eight different types of intelligence including: visual-spatial, logical-mathematical, linguistic, musical, bodily-kinesthetic, naturalistic, interpersonal, and intrapersonal. Closely relating to SEL, *intrapersonal intelligence* involves increasing self-awareness in order to navigate the demands of one’s life, and *interpersonal intelligence*, the ability to manage social relationships and interactions with others (Gardner & Hatch, 1989). To expand upon these concepts, Goleman (1995) suggested that by taking an active role in learning more about one’s emotional state, an individual can become more adept at navigating interpersonal relationships. Goleman and a group of professionals affiliated with the Collaborative for Academic, Social, and Emotional Learning (CASEL) worked in tandem with the University of Illinois at Chicago Social and Emotional Learning Research Group to provide a definition and resources regarding SEL (CASEL, 2012).

Given the unlimited frequency of social interactions children are exposed to in school settings, it is not surprising that school settings were identified as critical locations for actively engaging students in SEL instruction and development. Several different organizations, including the New York State Education Department (NYSED) and the Collaborative for Academic Social and Emotional Learning (CASEL), provide support for development of SEL among school-age students. Specifically, New York State adheres to the philosophy of *educating the whole child* (NYS Education Department, 2011), which includes instruction in not just academic areas, but also social and emotional domains. Serving as an important resource not just for NYS, but at the national level, CASEL was created for the dissemination of tools for effectively teaching these SEL competencies to students in schools (CASEL, 2012).

Since the mid-1990's, CASEL has continued to disseminate SEL research and programs, and is now recognized as the leading organization for integrating SEL interventions within schools. CASEL defines social-emotional learning as consisting of five key competencies (CASEL, 2012 p. 9):

1. **Self-Awareness:** Self-awareness is the ability to accurately recognize one's emotions and thoughts and their influence on behavior. This includes accurately assessing one's strength and limitations and possessing a well-grounded sense of confidence and optimism.
2. **Self-Management:** Self-management is the ability to regulate one's emotions, thoughts, and behaviors effectively in different situations. This includes managing stress, controlling impulses, motivating oneself, and setting and working toward achieving personal and academic goals.
3. **Social Awareness:** Social awareness is the ability to take the perspective of and empathize with others from diverse backgrounds and cultures, to understand social and ethical norms for behavior, and to recognize family, school, and community resources and supports.
4. **Relationship Skills:** Relationship skills refers to the ability to establish and maintain healthy and rewarding relationships with diverse individuals and groups. This includes communicating clearly, listening actively, cooperating, resisting inappropriate social pressure, negotiating conflict constructively, and seeking and offering help when needed.
5. **Responsible Decision-Making:** Responsible decision-making is the ability to make constructive and respectful choices about personal behavior and social interactions

based on consideration of ethical standards, safety concerns, social norms, and realistic evaluation of consequences of various actions, and the well-being of self and others.

CASEL Programs

Beyond defining the components of SEL, CASEL also identifies programs that can assist schools across the country in accomplishing the goal that students will graduate with the emotional skills necessary for navigating complex societal demands. Beginning in 2003 with the *Safe and Sound* publication, CASEL compiled a database of programs available for SEL instruction for children and youth throughout development (CASEL, 2003). This was later revised to account for more rigorous inclusion criteria, along with rating frameworks. The result was CASEL's 23 *SElect Programs* that are designed to teach students the social-emotional skills necessary to be well rounded individuals (CASEL, 2012). Using strict inclusion criteria (i.e., well-designed and classroom-based, implementation support, and evidence-based), SEL programs have shown significant positive correlations between SEL competencies and various social, emotional, and academic outcomes (Denham & Brown, 2010; Durlak, Weissberg, Dymnicki, Taylor, & Schellinger, 2011). For example, meta-analytic data indicated that students who were provided with SEL instruction had significantly better academic achievement and prosocial behavior than students who were not provided the curriculum. Additionally, reduced internalizing difficulties and conduct problems were found within the students who received explicit SEL instruction from teachers (Durlak et al., 2011).

Social-Emotional Learning Initiatives

While CASEL continues to focus their efforts on identifying and evaluating the effectiveness of various social-emotional curricula, several other advancements are also

occurring within the SEL field. In 2004, Congress acknowledged the importance of SEL in schools through the amendment to the *Individuals' with Disabilities Education Act* and in the same year, Illinois became the first state to adopt stand-alone K-12 standards for SEL.

Meanwhile, in NYS, the Schools Against Violence Education (SAVE) Act was passed in 2004 (NYS Education Department, 2004). Two years later, New York's Children's Mental Health Act sparked collaboration between mental health providers and school districts to ensure development of SEL in children. The Children's Mental Health Plan of 2008 was then developed to determine the most important allocation of resources, including SEL funding, for NYS agencies (NYS Office of Mental Health, 2008). Most recently, NYS has amended Part 100.2(j) and (New York State School Counselor Education, 2017) and Education Law 804 regarding health education (NYS Education Department, 2018). The amendments mandate that all students must have a counseling or guidance plan which is supported by implementing a core general education SEL curriculum (New York State School Counselor Association, 2017) and mental health education and literacy in all schools (NYS Education Department, 2018). This could also be implemented in part through the use of school-wide SEL programs.

In addition to NYS, 48 other states had implemented social-emotional learning standards for early childhood and prekindergarten programs by 2011, suggesting a national trend. To continue the momentum, the National Association of State Boards of Education (NASBE) provided a summary of several SEL-related factors, including an overview of the field, its evolution, and its research base in their 2013 article entitled *Social-Emotional Learning*. Additionally, a bipartisan group of U.S. Representatives introduced the Academic, Social, and Emotional Learning Act (HR 4223) aimed at supporting SEL programs in the nation's public schools in 2013 (NASEB, 2013). While this act was referred to a subcommittee, it has yet to be

passed. The U.S. Department of Education, however, has recommended that schools utilize a multi-tiered approach to SEL in order to meet the needs of all students (IDEA, 2004).

Positive Behavioral Intervention Support (PBIS) is often the term associated with efforts to implement the multi-tiered approach to social-emotional instruction. According to the NYS Positive Behavioral Intervention Support Technical Assistance Center (NYS-PBIS-TAC), PBIS is defined as an evidence-based systems-level approach to creating and maintaining positive school climates that allow teachers to teach and students to learn (2011). Given the complexities of implementing such practices in schools, the NYS-PBIS-TAC has provided the resources necessary to identify the state of current practices, and the areas in which a school needs to improve. The inspiration of a pyramid model for the multi-tiered approach comes from the public health model of promotion, prevention, and intervention and includes three levels of mediation (i.e., universal, secondary, and tertiary) (CSEFEL, 2013). As the universal level aims to promote appropriate development in all children, the importance of making sure practices are being implemented with fidelity is critical. Consequently, CASEL has volunteered to serve as a resource for reviewing current practices within districts in order to help identify whether or not they are meeting standards for teaching practices surrounding all five of the social-emotional key competencies.

Implementation Challenges

Regardless of CASEL's research dissemination efforts, schools continue to have difficulty implementing SEL programs. This may be due to the resources required for implementation. Programs often require financial commitment, as well as time for training and implementation. Additionally, implementer perception of support, self-efficacy, and burnout has also been shown to impact implementation fidelity (Elias, Zins, Graczyk, & Weissberg, 2003;

Greenberg, Domitrovich, Small, & Jacobson, 2009). NYS schools seem to reflect this challenge. In fact, while more recent data is not available, and additional data is needed to better understand where current practice lie, 2008 data indicated that 53% of NYS schools have not begun or are only in the early planning stages of SEL program implementation (NYS Education Department, 2008). Furthermore, data from 2011 indicated that most NYS districts are only fulfilling one of the seven recommended approaches for SEL with several districts not fulfilling any approaches at all (NYS Education Department, 2011). These approaches included continued outreach to families and community; attention to school climate and school relationships; age appropriate instruction for skill acquisition, programs outside of the school day; alignment of personnel, practices, and policies for student support; collaboration between schools and community providers; and development of administrators, instructors, and support staff. Failure to implement these recommendations in full are likely the consequence of several different barriers to SEL implementation.

In one analysis of SEL practices in NYS, a significant barrier that was identified was that NYS schools are more reactive than proactive in their SEL practices. Specific areas of concern included planning, universal programming, collaborative partnering, and professional development (NYS Education Department, 2008). Another barrier identified in NYS is that SEL implementation is viewed as a way of preventing problems only in particular types of students. Specifically, the focus in most schools is not on SEL development among *all* students, but instead, focused on intervention for children at-risk for problem behavior (NYS Education Department, 2008). Thus, while CASEL (2012) programs require direct SEL instruction for all students, the common view of SEL programming in NYS prevents schools from addressing SEL

at a foundational level and may contribute to many districts only implementing certain components of SEL programs.

Failure to address school-wide SEL programming at all levels may result in a significant problem with implementation fidelity. Fidelity difficulties are compounded by a lack of professional development opportunities as the quality of delivery and participant responsiveness are linked to program implementation fidelity (Carroll, Patterson, Wood, Booth, Rick, & Balain, 2007). This may be a particular problem in NYS given the fact that 34% of schools indicated that they had yet to begin professional development in regard to SEL programming (NYS Education Department, 2008). Lack of professional development regarding SEL programming is a barrier that may result in inaccurate program implementation.

While implementation fidelity serves as one barrier to effective SEL programs being implemented in schools, perhaps the greatest barrier is the current status of legal requirements regarding SEL practices. Despite the efforts made by several organizations (e.g., CASEL, 2012) and professional recommendations (Elias et al., 1997) for the need for explicit instruction in SEL skills, NYS has not yet legally mandated SEL programs in schools. Initially, NYS only posed voluntary guidelines surrounding social-emotional development and learning standards in schools (Children's Mental Health Act, 2006), and according to NYS Education Department (2008) data, schools have yet to reach their full potential with regard to fostering SEL, despite the significant positive correlation it has with improved academics (Durlak et al., 2011). Perhaps this is because the requirement for implementation of SEL programming in NYS schools has only been proposed as a Senate bill and has yet to be passed as law (S.2420, 2013).

Another barrier that may contribute to SEL program implementation is the selection of knowledgeable personnel to serve as members of SEL teams that select programs and assist with

implementation practices. Previous research indicates that school psychologists lack the knowledge and awareness for implementing SEL interventions in schools (McKevitt, 2012). Consequently, the need for professional development for not only teachers, but other school personnel (e.g., principals) appears warranted. While this information has yet to be assessed empirically, understanding the knowledge of all decision-making parties will assist in answering the question as to whether there is a global need for professional development within districts.

Further, the duties associated with being a principal includes the responsibility to implement, monitor, and analyze standards and programs (Bureau of Labor Statistics, 2016), one of which could be an SEL program. Although the research is dated, research suggesting that school principals play an integral part in academic program improvements has been identified (Leithwood & Montgomery, 1982), and therefore, their ability to participate within the implementation of a SEL programming also lends itself to analysis. However, up to this point, research has failed to identify the extent of principals' familiarity of SEL competencies, practices, and resources available to implement a SEL program within schools. Consequently, the present study is being conducted in order to inform the field by answering the following research questions:

Research Questions

1. To what extent do NYS elementary school principals participate in school-wide SEL decision-making practices?
2. What are the levels of familiarity, past use, and current use among NYS elementary school principals regarding CASEL approved SEL programs?
3. What selection procedures would NYS elementary school principals use to learn about SEL programs and interventions?

4. What decision making practices are most important to NYS elementary school principals when choosing SEL programs and interventions?
5. Are there differences in the characteristics of principals related to their familiarity of CASEL approved SEL programs?
6. Are there differences in the characteristics of principals related to their past use of CASEL approved SEL programs?
7. Are there differences in the characteristics of principals related to their current use of CASEL approved SEL programs?

Chapter 2

Review of Literature

Social-Emotional Learning Defined

In today's society, where mental health concerns and school violence are at an all-time high, it is imperative to address the social-emotional needs of children in school settings. The idea of exploring multiple aspects of an individual's functioning, including one's social and emotional skills, dates back to Gardner's theory of multiple intelligences (Gardner & Hatch, 1989). In this theory, Gardner posited that an individual's capabilities need to be interpreted beyond a single point of intelligence, and include several varying intelligences that consolidate to pronounce a person's innate abilities. One such intelligence is *intrapersonal intelligence*, which involves increasing self-awareness in order to navigate the demands of one's life. *Interpersonal intelligence* is also included in Gardner's theory and relates to the ability to manage social relationships and interactions with others. In his text, *Emotional Intelligence: Why it Can Matter More than IQ*, Goleman (1995) expanded upon these concepts by suggesting that taking an active role in learning more about one's emotional state can cause an individual to become more adept at navigating relationships with those around him or her. He based this theory on the concept of *emotional intelligence* and argued that it included mastery of self-awareness, self-management, social awareness, and managing relationships.

In 1997, Elias and colleagues coined the concept *social and emotional competence* which is defined as "the ability to understand, manage, and express the social and emotional aspects of one's life in ways that enable the successful management of life tasks such as learning, forming relationships, solving everyday problems, and adapting to the complex demands of growth and development" (Elias et al., 1997, p. 2). Expanding upon this concept, researchers within the

Collaborative for Academic, Social, and Emotional Learning (CASEL) identified five sets of cognitive, affective, and behavioral competencies that comprise social-emotional aptitude.

These competencies correspond with what Goleman (1995) identified as the fundamentals of emotional intelligence and include: self-awareness, self-management, social awareness, relationship skills, and responsible decision making (CASEL, 2012). Consequently, *social-emotional learning* (SEL) is defined by CASEL as an individual's ability to recognize and manage emotions (self-awareness and self-management), while demonstrating care and concern for others (social awareness) well enough to establish positive relationships (relationship skills) and make responsible and ethical decisions in difficult situations (responsible decision making) (CASEL, 2012).

A National Problem

In early fall of every year, thousands of children will step aboard a school bus for the first time in order to travel to a kindergarten destination. During this time, some students may experience feelings of joy, excitement, and happiness, while others may be overwhelmed and experience feelings of worry, apprehension, or fear. Developmentally, 60% of young children will be entering school with the cognitive skills necessary for success, but only 40% of young children manifest hold the social-emotional skills needed to successfully navigate their social world at the kindergarten level (Yates et al., 2008). One specific SEL deficit is self-management of behavior. Using data from 1,200 parents surveyed during the Harris Interactive online national poll, researchers concluded that 14% of children show behavioral problems during their kindergarten entrance (Montes, Lotyczewski, Halterman, & Hightower, 2012). This may be due to the fact that 50% of students are faced with overcoming family and/or community characteristics that put them at a higher risk for social, emotional, and behavioral difficulties

(e.g., parent with lower than a high school education, poverty, English is not primary language, unmarried parents, and/or single parent households) (Zill, Collins, West, & Hausken, 1995).

When faced with these environmental risk factors, research has shown that children are also at an increased risk for developing learning difficulties while in school (Montes et al., 2012; Zill et al., 1995). Notably, 50% of students entering kindergarten are faced with at least one family characteristic that puts them at a disadvantage to learning, while 15% of students are raised in a household that encompasses at least two risk factors (Montes et al., 2012). Although attending pre-kindergarten programs such as Head Start have been utilized in order to help assimilate children with disadvantages into the social situations regularly encountered during kindergarten, not all families can enroll their students in these federally-funded programs due to income guidelines and lack of program availability. Consequently, many children fail to acquire the social-emotional skillsets necessary to be successful at school entry. Further, significant deficits in individual functioning are often identified at a young age and persist throughout adolescence. Current trends in mental health diagnostics, risky behaviors among children and adolescents, and school violence rates provide insight into the need for explicit instruction regarding appropriate ways to navigate and cope with the complex social demands encountered in schools.

Historically, the Center for Disease Control and Prevention (CDCP) has conducted several national surveys in order to identify risky behavioral trends across America with the hopes of being able to prevent these trends from continuing. In one such study, 72% of all deaths among youth and young adults aged 10 to 24 years of age result from four causes: motor vehicle crashes (26%), other unintentional injuries (17%), homicide (16%), and suicide (13%) (Eaton et al., 2012). According to results from the 2013 national Youth Risk Behavior Surveillance System (YRBSS)—which is also conducted by the CDCP—a significant amount of

high school students are engaging in behaviors associated with the leading causes of death.

Utilizing an 86 question survey targeting risky behaviors, the CDCP analyzed data obtained from a nationally representative sample of students in grades 9 through 12. Overall, results from the study concluded that while operating a motor vehicle within 30 days prior to the survey, 64.7% of respondents texted or e-mailed, 34.9% drank alcohol, and 23.4% used marijuana (Kann et al., 2014). In terms of sexual behavior, 46.8% of respondents report having had sexual intercourse with 24% of those having occurred within 3 months of the survey. While this adolescent sexual behavior is likely typical, risky sexual behavior with regard to having multiple sexual partners and lack of protection was also reported. Of the 46.8% of sexually active participants, 15% report having had sexual intercourse with more than four partners throughout their lifetime and nearly 40% had not used a condom during their most recent sexual experience (Kann et al., 2014).

While it is evident that many youth engage in risky behavior off school property, violence and victimization has also occurred in school settings. In order to investigate these incidences, the CDCP (2015) compiled data from 1993 to 2015 in order to identify how violence on school property has changed over time. Each year, tens of thousands of students complete this survey. To operationally define *school violence* the CDCP specified the location as “anywhere on school property, on the way to or from school a school sponsored event, or during a school-sponsored event” (Center for Disease Control and Prevention, 2016, p. 1). Although results indicate a continuous decrease in the number of students carrying weapons, being threatened or injured with a weapon, and/or engaging in physical altercations while at school, there has been a steady increase in the number of students failing to attend school due to feeling unsafe either at school or on their way to school. Additionally, 15.5% of respondents reported

being electronically bullied, 20.2% report being bullied on school property, 5.6% did not attend school for at least one day because they felt unsafe, and 31 homicides occurred in school (Center for Disease Control and Prevention, 2016).

Further, the CDCP also collects data regarding mental illness by using the Mental Health Public Surveillance System. Results indicate that between the years of 2005 and 2011, there has been an increase in mental health concerns among children and adolescents (ages 3-17), with high prevalence rates being identified for a variety of disorders. Specifically, data from parents indicate that among nearly 13,000 youth: 6.8% are diagnosed with Attention-Deficit Hyperactivity Disorder (ADHD), 3.5% have conduct or behavioral problems, 3.0% are diagnosed with anxiety, 2.1% have depression, 1.1% are on the autism spectrum, and 0.2% are diagnosed with Tourette syndrome (Perou et al., 2013). The National Alliance on Mental Illness (NAMI, 2010) estimates that these numbers equate to roughly four million children and adolescents who currently suffer from a serious mental disorder causing significant functional impairments at home, school, and with peers. It is important to note that 50% of mental health disorders begin prior to age 14 years and 75% begin prior to age 24 years. Specifically, two thirds of those who are eventually diagnosed with ADHD, social phobia, separation anxiety disorder, and oppositional defiant disorder present with symptoms between the ages of 8 and 15 years of age (Child Mind Institute, 2016). Unfortunately, NAMI also estimates that only 20% of children suffering from mental disorders are currently receiving mental health services in order to help treat the symptoms associated with these disorders. Thus, nearly 80% of youth are not receiving services (National Alliance on Mental Illness, 2010). This may be associated with the cost of services; estimated costs for treating mental health disorders and behaviors in those who are less than 24 years of age is nearly \$250 billion annually (Perou et al., 2013). Given this

barrier to seeking mental health treatment for youth, the risk for adolescent and adult social, emotional, and behavioral problems is likely to increase across the lifespan.

With regard to mental illness, major depressive episodes are also increasing among adolescents. In the years 2012 to 2013, 8.76% of NYS adolescents aged 12 to 17 reported experiencing at least one major depressive episode within the past year. This rate increased to over 10% by the 2013 to 2014 school year and indicated a statistically significant difference from the prior year's data (Lipari, Hughes, and Williams, 2016). Additionally, while only based upon children in New York City, the New York City Department of Health and Mental Hygiene (2016) indicated that 11% of all hospitalizations for children and adolescents were for psychiatric reasons. This rate depicted a substantial increase in psychiatric-related hospitalizations from previous years. Among children ages 3 to 12 years, hospitalizations were highest due to symptoms of depressive disorders (42%), ADHD (20%), and disruptive behavior disorders (15%). For adolescents (ages 13-17), depressive disorders (53%), bipolar disorder (12%), and schizophrenia or psychotic disorders (10%) were the leading reasons for psychiatric hospitalizations. Based upon these statistics, one could conclude that there is a large population of students in schools that are in need of social and emotional development and/or mental health treatment.

Among NYS students, adolescent drug and alcohol use has also been depicted as problematic. Specifically, data from the years 2010 to 2012 indicated that approximately 20% of adolescents between the ages of 12 and 20 years participated in binge alcohol use among adolescents within the month prior to being surveyed (Substance Abuse and Mental Health Services Administration, 2014). Additionally, adolescent marijuana use appears to be problematic in NYS. Hughes, Lipari, and Williams (2015) indicated that approximately 8% of

NYS respondents aged 12 to 17 years reported use of marijuana within the month prior to being surveyed. While there was a slight decrease from 2012 to 2014, NYS data are still higher than the national average (7.22%).

Schools' Involvement in Addressing a National Problem

Given the high prevalence of mental health problems and substance use among children and adolescents today, it is imperative that we not only intervene upon these difficulties, but also prevent such problems by providing opportunities for development of SEL skills. Due to the large amount of time students spend in school, as well as the professional resources available, educational settings can be seen as optimal locations for the implementation of SEL instruction and interventions. Consequently, years of research has been compiled to assess the effectiveness of using the school setting as a means for universal and targeted development of SEL skills.

Meta-analytic support. The most informative data regarding the implications of SEL practices comes from a 2011 meta-analysis of 213 school-based, universal, SEL programs involving 270,034 school-age children with no preexisting behavioral, emotional, or academic problems. To be eligible for this meta-analysis, inclusionary requirements for the research studies were as follows: 1) written in English; 2) published or unpublished by December, 2007; 3) targeted students between five and 18 years of age without learning or adjustment problems; 4) included a control group; 5) emphasized one or more SEL skills; and 6) provided information so that effect sizes could be analyzed. Research studies were excluded if they: 1) selected students with preexisting difficulties; 2) promoted achievement through educational programs, instruction strategies, or academic assistance; 3) focused on physical health; or 4) provided programs outside of the classroom. Within this meta-analysis, three independent variables (i.e., intervention format, use of SAFE [sequenced, active, focused, and explicit] practices, and

implementation problems) and six dependent variables (i.e., social and emotional skills, attitudes towards self and others, positive social behaviors, conduct problems, emotional distress, and academic performance) were evaluated (Durlak et al., 2011). Intervention format referred to who provided the intervention services (i.e., teacher, non-school personnel, and multicomponent, such as teacher and parent or teacher and school system). The second independent variable, SAFE practices, was defined as either having met all four (i.e., sequenced, active, focused, and explicit) requirements (i.e., SAFE programs) or not (i.e., other programs). Implementation problems referred to whether or not programs were delivered in the manner in which program developers intended. Using these three independent variables, researchers tested four hypotheses: 1) SEL programs would yield significant results across skill, attitudinal, behavioral, and academic domains; 2) teachers could effectively implement programs; 3) multicomponent programs are more effective than single component programs; and 4) program outcomes would be moderated by recommended training practices (SAFE practices). Through the use of various online resources and exclusion criteria for articles consisting of students with preexisting behavioral, emotional, or academic problems, studies were selected for the review, and operational definitions for each dependent variable and their assessment measure were developed.

After researchers excluded studies that did not meet their inclusionary criteria, there were several important findings. The comparison results between treatment conditions and control groups yielded small to high (range = 0.14 – 0.87) significant effects, across all six of the dependent variables. Most of the total effect sizes ranged from 0.22-0.27. Although not all studies included within the meta-analysis specifically utilized academic performance as a dependent variable, approximately 135,396 students were included in determining correlations

between program participation and academic achievement (defined as standardized test scores and subject grades in reading and mathematics), and an 11 point average academic achievement increase was identified (Durlak et al., 2011). Thus, as social and emotional skills increase, academic achievement also increases. A second important finding was related to teacher implementation of SEL programs in the classroom. When interpreting whether programs facilitated by teachers were more effective than programs implemented by non-school personnel, teacher-based programs yielded positive effects in all six outcome categories, with effect sizes ranging from 0.20 to 0.62, while non-school personnel yielded significant positive effects in only three outcome measures (i.e., improved SEL skills [ES = 0.87], improved prosocial attitudes [ES = 0.14], and reduced conduct problems [ES = 0.17]). Additionally, only the programs that were administered by school personnel (e.g., teachers [ES = 0.34] or multicomponent with teachers and other school personnel [ES = 0.26]) showed significant academic improvements (Durlak et al., 2011). Thus, the authors argued that these results are likely observed because school personnel, especially teachers, develop stronger relationships with students and improve upon their own social-emotional competence when being immersed into SEL program implementation. Additionally, it could be hypothesized that when teachers are directly responsible for administering aspects of social and emotional interventions, the likelihood they continue to reinforce the learning principals on a daily basis increases, as well, and therefore, student outcomes may be more dramatic than if they were instructed by someone else. Lastly, utilizing SAFE practices produced small to moderate (range = 0.24 - 0.69) significant effects for all six outcome variables, whereas programs not coded as SAFE achieved significant effects in only three (i.e., attitudes [ES = 0.16], conduct problems [ES = 0.16], and academic performance [ES = 0.26]) of the six outcomes variables (Durlak et al., 2011).

With regard to implementation problems, when implementation problems were identified in research studies, significant results, with small effect sizes were observed for only attitudes (ES = 0.19) and conduct problems (ES = 0.15). When no problems were found within the studies, significant effects were found across all six dependent variables, with effect sizes ranging from 0.27 to 0.86. Articles were also categorized separately if they failed to mention whether or not there were implementation problems. Interestingly, within this category, all of the outcome variables were significant (ES range = 0.17 – 0.58).

In summary, meta-analytic results of 213 school-based SEL programs indicate that in comparison to control groups, students who participate in a SEL program fare significantly better across domains. When comparing all of these outcome variables, SEL skills were represented by the highest effect sizes, all of which fell within the moderate to high range (0.57 – 0.86). Similar, small effects that ranged from 0.14 to 0.35 were observed for the remaining five dependent variables. Additionally, when implementing interventions, teacher involvement is critical and can yield more significant improvement in youth when compared to non-school personnel-directed or multicomponent programs. Furthermore, based on this meta-analysis, sequenced, active, focused, and explicit SEL instruction shows a significant improvement in a student's social and emotional skills, their attitudes and behavior, and within their overall academic performance.

Additional research support. Although, due to exclusionary criteria, they may not have been included in the meta-analysis previously described, additional research supports the positive correlation between the various skill sets associated with social-emotional development and an individual's academic success. For example, researchers investigated the academic and social implications of emotional knowledge in an earlier study (Izard, Fine, Schultz, Mostow,

Ackerman, & Youngstrom, 2001). Researchers defined emotional knowledge as one's ability to recognize and label other students' emotional expressions. Overall, in both short- (age 5 years only) and long-term (between ages 5 and 9 years) time frames, higher accuracy in the identification of others' emotional expressions was significantly related to more adaptive social behaviors, as well as higher academic competence. Specifically, emotional knowledge among preschoolers was correlated with their academic and social competence as assessed in preschool using standardized measures. Further, level of preschool emotional knowledge was related to third grade teachers' evaluations of academic and social competence in children, where those with higher levels of emotional knowledge at 5 years of age were evaluated as having higher levels of academic and social competence at 9 years of age (Izard et al., 2001). Consequently, emotional competence impacts academic achievement and also the development of social competence, justifying the importance of explicitly teaching social awareness skills to individuals with skill deficits in this area.

Even earlier, Welsh, Parke, Widaman, and O'Neil (2000) also justified the importance of social competence. Their study indicated a relationship between academic and social competences and how it changes across time in grades first through third. Through longitudinal data collection on 163 children from eight elementary schools in Southern California, academic and social competence was assessed through peer and teacher ratings. In order to assess academic competence, researchers examined report cards and teachers completed ratings within the areas of mathematics and oral language. Peer ratings of social competence included tasks in which classmates were asked to identify who they would and would not like to play with by sorting cards or circling a representative number. The data was then standardized to form each child's social acceptance score. Additionally, teachers were asked to complete a rating scale that

assessed each child's likability by his or her peers through a 5-point Likert Scale. Further, both students and teachers were asked to nominate up to three individuals who showed prosocial or aggressive characteristics within their classroom. Results indicated a significant positive relationship between academic and social competence across the first three years of schooling. Specifically, academic competence in first grade was related to social competence in second grade and then, academic competence in second grade was related to third grade social competence. Social competence in second grade was also significantly related to third grade academic competence. Therefore, if one's academic competence was high in first grade, their social competence was depicted as high in second grade and if this was maintained throughout second grade, both academic and social competences were high in third grade. Additionally, students who showed poor academic performance during the previous school year were significantly more likely to have social difficulties during the following year—regardless of whether poor social competence was previously identified or not (Welsh et al., 2000). Consequently, this relationship between academic and social competence, in which academic and social competencies seem to impact each other, implies that it is imperative to utilize tier one screening procedures to determine areas of weakness, both academically and socially, early in students' academic careers. In doing so, schools should consider focusing not just on academic or social competence of young children separately, but both areas together, in order to promote the development of well-rounded students.

In the aforementioned research, academic and social competence was based upon student and teacher perceptions of others. However, an individual's perception of themselves can also be a determining factor in whether or not one performs well academically (Guay, Marsh, & Boivin, 2003). Through use of the Self-Perceptions Profile for Children (Harter, 1985, as cited

in Guay et al., 2003), as well as teacher ratings in the areas of math, reading, and writing, researchers identified a significant correlation between a child's academic self-concept and their academic achievement in grades two, three, and four. Researchers also identified that the correlation between variables strengthens as individuals become older and therefore, more self-aware (Guay et al., 2003). Thus, when students have poor self-concepts surrounding their academic abilities, their academic achievement is also typically unsatisfactory. This research also supports the causal ordering relationship between academic self-concept and academic achievement identified in Pajares' (2003) research surrounding academic self-efficacy, motivation, and achievement in writing. Consequently, achievement appears to be impacted by how one perceives their own academic abilities. Academic self-efficacy first influences academic motivation, which then influences academic achievement. Additionally, the relationship between one's perception of academic abilities and level of academic performance strengthens over time—justifying the need for sequenced and continued support across all academic years in order to ensure positive relationships between these two constructs.

In addition to evaluating the longitudinal relationship between academic and social competence and academic achievement, early identification of negative perceptions of self is also critical. However, among younger children, the research focus is often not on self-concept, but rather an individual's ability to regulate one's own behavior. For example, the effectiveness of early intervention programs for behavioral regulation was assessed by McClelland, Connor, Jewkes, Cameron, Farris, & Morrison (2007). Through use of the Head-to-Toes tasks (which taps into inhibitory control, attention, and working memory), researchers questioned the extent to which preschoolers with more advanced behavioral self-regulation skills would have stronger literacy, math, and vocabulary skills than those with less developed self-regulation skills.

Researchers used the Head-to-Toe task which involves children being asked to play a game in which they are instructed to do a predetermined substitute behavior from what the experimenter stated. For example, if the experimenter said to touch their heads, the child should touch their toes as the examiner previously identified this behavioral change in their instructions. After four practice tests, students underwent 10 test items in randomized order and students' capacity to correctly follow directions (i.e., behavioral self-regulation) was rated. Researchers utilized standardized assessments (i.e., Woodcock-Johnson—III Test of Achievement) to quantify individual achievement levels. After controlling for school site, gender, and other background variables, researchers found a significant achievement gap in the areas of literacy, math skills, and vocabulary. Specifically, students with higher behavioral regulation abilities, as compared to those with low behavioral regulation skills, performed substantially better in the areas of literacy, math, and vocabulary (McClelland et al., 2007). Authors concluded that based on these results, screening practices should include the investigation of one's behavioral regulation—with skill-based services being explicitly taught to those demonstrating significant skill deficits.

Though it is not one of CASEL's SElect programs, Ashdown and Bernard (2012) demonstrated positive outcomes associated with a skill-based program in which children were explicitly taught social-emotional skills with an SEL program entitled *You Can Do it! Early Childhood Education Program*. This program was utilized to help provide a framework for direct teacher instruction in the areas of confidence, persistence, organization, and emotional resilience. The impact of the program was assessed based upon children's well-being and academic achievement. After randomly assigning students to either the intervention (i.e., experimental) or non-intervention (i.e., control) group, the intervention group completed the 10 week program. Findings illustrated statistically significant mean differences between the groups

with an overall increase in social-emotional competence for students who participated in the treatment compared to those who did not participate (Ashdown & Bernard, 2012). Given the mean global improvements shown to intervention participants, researchers' argued for the need for the direct implementation of social-emotional learning programs at the universal level.

However, carrying out these programs across large settings can be a challenging process because it requires strategic planning on the part of the school, as well as increased job responsibilities for faculty and staff.

Educational Initiatives

The inclusion of school-wide social-emotional curriculum at a systems-level has been recommended by many professional organizations and is included in several legal mandates. A timeline of the major federal and NYS SEL regulations can be found in *Appendix A*.

NASP recommendations. One professional organization that has voiced support for the use of multi-tiered approaches to SEL programming is the National Association of School Psychologists (NASP). According to NASP (2008), the best way to avoid social-emotional, behavioral, and/or mental health issues preventing students from achieving academically is to ensure six guiding principles are followed. First, schools need to have high expectations as well as high quality instruction available for all students. Next, positive and supportive climates need to be established. Access to school-based mental health services is also recommended as is building connections between schools, families, and the community. The final two principles include providing initial and continued professional development opportunities and establishing accountability among students and school personnel. These guidelines in conjunction with SEL programs create the best opportunity for students to learn.

Federal regulations. The earliest relevant federal regulation, the Elementary and Secondary Education Act (ESEA), was signed into law on April 9th, 1965 with several reauthorizations having taken place since its inception. In addition to initiating a commitment to equal access to quality education, ESEA has consistently mandated that funds be authorized for professional development, instructional materials, resources needed to support educational programs, and the promotion of parent involvement. Through congressional amendments and reauthorizations, ESEA was later referenced as No Child Left Behind (NCLB, 2002).

Under the NCLB revisions, achievement accountability fell heavily on individual school districts, and therefore, the development of state assessments in basic academic skills were initiated. The federal government has also allocated funds through NCLB to increase the collaboration of services between schools and mental health agencies for eligible children receiving child care, Head Start, or preschool services (NCLB, 2002). Within this act, an eligible child is identified as any child that has: been abused, maltreated, or neglected, has been exposed to violence, is homeless, has been removed from academic institutions, is enduring severe poverty living conditions, was exposed to parental substance abuse, has encountered significant peer relationship problems, is of low birth weight, or has cognitive deficits or is developmentally disabled. There are a variety of potential avenues for financial disbursement including, building community connections, transportation and other ancillary costs, assessment procedures, training opportunities, and additional mental health services for eligible children within the school. One major stipulation to receiving this specific funding is that a local educational agency can only utilize these funds when services being used cannot be paid for using other federal, state, or local public resources (NCLB, 2002).

NCLB was reauthorized once again in 2015, this time being referenced as the Every Student Succeeds Act (ESSA), with the focus being on the adoption of college and career readiness standards (ESSA, 2015). This act also provides flexibility for educational leaders to redefine student success and to design school-wide systems and programs to support all aspects of children's learning and development, including social-emotional skills that are critical for success in both school and in life.

Due to the negative impact deficits have on a student's academic achievement, social-emotional learning has become a secondary focus within the educational system. So much so that prior to ESSA, social-emotional needs were incorporated into the 2004 congressional amendments that were made to the Individuals with Disabilities Education Act (IDEA, 2004), which focuses on serving students with disabilities in school settings. Under the 2004 reauthorization of IDEA, Congress acknowledged the term *Positive Behavioral Intervention Supports* (PBIS) and the unique place it has held in special education law and preventative actions within schools. Due to the financial difficulties facing schools today, Congress further recognized that, to encourage implementation of PBIS, funding needed to be provided for training faculty and staff in the use of PBIS. Thus, IDEA (2004) allocates additional support for the use of PBIS by authorizing states to use professional development funds to target training methods that directly teach PBIS strategies.

Positive behavioral intervention supports. The Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS TAC, 2017) was created in order to define, develop, implement, and evaluate a multi-tiered approach that improves the capacity of states, districts and schools to establish, scale-up, and sustain a PBIS framework. According to the PBIS TAC, PBIS is a systematic approach to proactive, school-wide behavior based on a multi-

tiered model. PBIS is centered on the core belief that all students can learn and succeed and that schools, in partnership with families and communities, are responsible for providing the support necessary in order to ensure both academic and social growth. Through use of evidence-based programs, practices, and strategies, PBIS targets all students in school and aims to improve not only problematic behaviors, but also academic achievement, school climate, safety, and social-emotional skills.

At the primary level, schools focus their attention on providing an environment that is safe, respectful, and welcoming, and an environment that is supported by school-wide, research-based, interventions aimed at preventing mental health concerns from arising. Once school-wide expectations and interventions have been put into place and students' progress has been monitored for a designated period of time, measurable data is used to determine whether the desired effect has been obtained. For students failing to respond to primary prevention interventions, more intensive services may be utilized within the secondary level of PBIS.

The focus of the secondary level is to engage in targeted group interventions for those students whose lack of response to primary prevention strategies place them at risk for problem behaviors. This group of individuals participate in more specialized interventions with the intention of improving skills and decreasing their risk for problem behaviors. Once again, progress is monitored, and data is used to determine whether a student's behavior is improving. If behavior improvement is not observed, a continuation of services or a more individualized approach is required within the tertiary tier of the model.

Within the tertiary level of interventions, best practices recommends that schools conduct a Functional Behavioral Analysis (FBA) in order to identify whether an individualized Behavior Improvement Plan (BIP) is needed to help supply appropriate replacement behaviors in addition

to a comprehensive action plan when intervening with a student. In addition to a FBA and BIP being developed for those students with the highest of needs, the wraparound process has been identified as an essential component for ensuring support is provided and growth is made within students at the tertiary level of need (Bruns & Walker, 2015).

The wraparound process is a collaborative, team-based approach to service and support planning (Bruns & Walker, 2015). Individuals within the team include the identified child, parents/caregivers, other family and community members, mental health professionals, educators, and anyone else with knowledge of the student. The purpose of the team is to create, implement, and monitor a strength-based, systematic plan that meets the individual needs of the child throughout all settings. Effective methods for creating such plans, as well as recommendations of components that should be included within them, has been studied and synthesized within the National Wraparound Initiative's *Resource Guide to Wraparound* (Bruns & Walker, 2015).

Unsuccessful federal initiatives. Despite the enhancements made in schools to address social-emotional development and learning, such as the use of PBIS, some attempts to support SEL at the federal level have been unsuccessful. Specifically, on four separate occasions, bills referenced as the Academic, Social, and Emotional Learning Act have been presented to Congress in order to provide financial and developmental awareness for SEL programming (Academic, Social, and Emotional Learning Act, 2009; 2011; 2013; 2015). Specifically, the Academic, Social, and Emotional Learning Act of 2009 began the efforts of increasing SEL programming through its suggestions on authorizing grant funding to state and local agencies to establish a National Technical and Training Center for Social-Emotional Learning and develop state-level SEL standards and programs in schools (Academic, Social, and Emotional Learning

Act, 2009). The 2011 proposal contributed to the efforts by specifically indicating a need for teachers and principals to be provided with training regarding how to measure both academic and behavioral growth by addressing SEL needs of students regardless of whether federal funding is provided (Academic, Social, and Emotional Learning Act, 2011). As the momentum grew for the use of SEL programming in schools, the 2013 and 2015 proposals looked to add proper SEL definitions, including competencies and programmatic structures for effective implementation. Cumulatively, these efforts looked to further SEL awareness at the national level. However, due to the fact that these bills were not passed by Congress, it was up to individual states and agencies to follow through with the recommendations. This can be evidenced by the development of the NYS-PBIS-TAC as well as the efforts by CASEL, as further described below.

New York State regulations. In addition to the federal regulations, NYS has imposed additional legislation aimed at reducing school violence while simultaneously preventing mental health concerns from arising. In 1999, Governor Pataki created a task force on school violence, leading to the creation of the Safe Schools Against Violence in Education (SAVE) Act (NYS Education Department, 2004). Under the SAVE Act, schools were asked to reflect upon their current safety protocols and to develop concrete plans for dealing with threatening situations occurring within the district or school (NYS Education Department, 2004). A large number of topics were included in this legislation, including district-wide school safety plans, building-level emergency response plans, code of conduct updates, teacher/principal authority, violence reporting, character education, health curriculums, fingerprinting, child abuse reporting, teacher discipline, court notifications, and violence prevention training (NYS Education Department, 2004).

Though regulations were put in place to address violence, it was not until 2006 that NYS passed the Children's Mental Health Act in order to increase the collaboration between school staff and mental health providers (Children's Mental Health Act, 2006). This act, required the collaboration between the NYS DOE and Office of Mental Health in order to develop guidelines in order to foster social and emotional development in youth (NYS Office of Mental Health, 2008). To expand upon this regulation, the Children's Mental Health Plan was developed in 2008 to encourage development of social-emotional skills by providing funding for: communicating a common vision, engaging all relevant agencies, inspiring youth, offering resources, and facilitating new partnerships (NYS Office of Mental Health, 2008). At the time, assessment indicated that schools were utilizing SEL practices in a reactive manner as a means for preventing specific problems rather than in a proactive manner by incorporating system-wide, universal programs for all students (NYS Education Department, 2008). Thus, there was a need for additional guidance related to the implementation of multi-tiered SEL practices for students at differing levels of social-emotional competency. Consequently, following the recommendations acknowledged within the Academic Social and Emotional Learning Act of 2009, NYS applied for federal grant funding in order to develop a state technical assistance center to promote PBIS practices in schools. After two years of development, the NYS-PBIS-TAC was launched in 2011 for the purpose of: training technical assistance providers, evaluating the effectiveness of PBIS in schools, disseminating PBIS research, creating PBIS curriculum, and providing professional development opportunities in all regions throughout NYS (NYS-PBIS-TAC, 2011).

Additionally, in order to add to the efforts of incorporating SEL practices into schools, the NYS Education Department identified guidelines and resources for educating the *whole child*

in 2011. When educating the whole child, districts need to ensure that students are: learning and practicing healthy lifestyles; learning material in an intellectually challenging environment that is both physically and emotionally safe for students and adults; actively engaged in learning, are connected to the school and broader community; are supported by qualified, caring adults; and are challenged academically to the point that they are prepared for the complexities of college and employment after graduating. To ensure that students are educated in the ways depicted above, the NYS Education Department also provided several areas that schools need to focus on in order to support children in the development of SEL skills. Seven approaches were identified as follows:

“(a) continual outreach to and inclusion of families and the surrounding community; (b) attention to school climate and to relationships among and between students and adult; (c) age-appropriate skill acquisition through character education, social-emotional learning and standards-based instruction; (d) after school, out-of-school, extra- curricular, service learning programs and mentoring; (e) alignment of district and school support personnel, policies, and practices -- in special and general education -- to assist all students; (f) cross-systems collaboration with community-based child and family services for students in greater need; and (g) appropriate ongoing development of professional and support staff and partners” (NYS Education Department, 2011, p. 5).

It is important to note that two years after the publication of the state guidelines (NYS Education Department, 2011), NYS proposed a bill to revise its education law to indicate that implementation of SEL guidelines was no longer voluntary, but *mandatory* for all school districts beginning in the 2013-2014 school year (S. 2420, 2013). This bill was referred to a subcommittee, but has yet to be passed and established as law. In the same year, the Dignity for

All Students Act (DASA, 2013) was enacted. Under DASA, NYS works to maintain the rights of all students by providing them with an environment that is free of discrimination and harassment. Not only does the act mandate accurate record keeping of incidents related to discrimination and harassment while on school property, it also works to encourage educators to incorporate into core subject areas the principles embodied by the Dignity Act. Specifically, this act indicates that students should not be subject to harassment or bullying by employees or students on school property or at school events. Additionally, students cannot be subjected to discrimination based on their actual or perceived: race, color, weight, national origin, ethnic group, religion, religious practice, disability, sexual orientation, gender (including gender identity or expression), or sex (Dignity for All Students Act, 2013). Although these efforts have held students accountable for their actions while on school property, schools need to continue working towards implementing empirically-based preventative programs that focus on fostering students' social-emotional development to the point that they can navigate the complex social environment appropriately.

The most promising legislation related to SEL occurred recently with the amendments to Education Law 804 regarding health education (NYS Education Department, 2018) and Part 100.2(j) regarding school counseling curricula (NYS School Counselor Association, 2017). The amendment to Education Law 804 requires mental health education and literacy in all NYS elementary and secondary schools, while Part 100.2(j) amendments require school counselors to ensure programs for all students to assist with social-emotional development (NYS School Counselor Association, 2017). In reviewing the requirements for both mandates, it is evident that they align closely with the SEL competencies identified by CASEL (2012). Therefore, while not explicitly mandated, SEL programming could be utilized to fulfill the key mental health literacy

components that are identified within the Education Law 804 amendment. For example, the first key component in the NYS mandate is self-management, which corresponds directly with CASEL's (2012) self-awareness and self-management SEL competencies. CASEL (2012) programs could also be implemented as core curriculum related to social-emotional development that is required by the amendment to Part 100.2(j).

Evaluation materials for practice. While some organizations have focused efforts on disseminating information regarding the legal and systemic demands school districts face when adopting a SEL mindset, others have focused on the evaluation of such services. Prior to engaging in implementation practices, it is crucial to identify current systemic practices and the changes that will need to be made in order to implement a program with fidelity. In order to help objectify this process, the NYS-PBIS-TAC has organized several evaluation instruments associated with implementing SEL practices (2011). The instruments provided are compiled according to the tiered PBIS model described above. Specifically, utilizing the NYS-PBIS-TAC website, users can select evaluations in the areas of: Early Childhood, Tier 1, Tier 2, and Tier 3. Access to the titles of these surveys from the NYS-PBIS-TAC website is located in *Appendix B: NYS-PBIS-TAC Survey Titles*. In addition to providing evaluation tools, the website describes what should occur at each tier, including information about conducting FBAs and developing behavior intervention plans in tier 3.

Social-Emotional Learning Programs

After conducting a needs assessment related to SEL practices, schools must develop action plans for addressing their needs. Often, curricular changes or development is needed in order to foster SEL activities across all tiers. This can be challenging as there are many different curricular programs for use in the development of SEL competencies by students. Consequently,

awareness of evidence-based and effective programs is imperative to the decision making process.

Collaborative for Academic, Social and Emotional Learning (CASEL). In addition to providing a thorough definition of social-emotional learning, CASEL is seen as the nation's leading organization in advancing practices regarding the development of academic, social, and emotional competencies. Since co-founded in 1994 by Daniel Goleman, CASEL has partnered with various foundations in order to advance the educational field and its knowledge surrounding the importance of social-emotional competencies and the impact it has on students' development. Their mission is to "help make evidence-based social and emotional learning an integral part of education from preschool through high school" (CASEL, 2012, p. 2).

One of CASEL's greatest contributions to the educational field is its identification and dissemination of the benefits of social-emotional competencies and the empirically-based programs that help teach various social-emotional skills. CASEL's research in this area began in 1997 when it introduced educators to the idea of social-emotional learning in the text *Promoting Social and Emotional Learning: Guidelines for Educators* (Elias et al., 1997). Following the release of this resource there was an increase in interest surrounding SEL and its place in schools.

Subsequently, CASEL began taking a more practical approach in the field through its supply of information regarding current implementation practices and the effectiveness of such practices on children. In 2003, CASEL released *Safe and Sound: An Educational Leader's Guide to Evidence-Based Social and Emotional Learning Programs*. Through interviewing experts in the field, reviewing the educational and psychological literature, and obtaining recommendations from national educational agencies and mental health organizations, CASEL

identified 242 SEL programs developed to foster the social-emotional competencies of students. After applying the following four selection criteria to these programs— (1) school-based with sequenced lessons intended for general student populations; (2) at least eight lessons in one of the program years; (3) the program instruction extends beyond one year; and (4) the program is nationally available—CASEL identified 80 SEL programs targeting school-age children and youth (CASEL, 2003). This was an important first step in supporting the use of evidence-based SEL practices within school settings.

In 2012, however, CASEL reassessed the field and identified new and more rigorous standards for SEL programming. In addition to the standards expressed in the 2003 guide, the 2012 guide required that programs be (1) well-designed, (2) evidence-based, and (3) include high-quality training and other implementation supports. To be considered well-designed, the program had to be classroom-based with specific lessons targeting all five areas of social and emotional competence. Additionally, the programs also needed to provide opportunities for practice throughout more than the first year of programming. To be considered evidence-based, programs had to include a carefully conducted evaluation with pre- and post-measures documenting a positive impact on either academic performance or other important student behaviors when compared to a control group. To be considered a program that had high quality training and other implementation supports, the program was required to have specific training standards, training teams, and manualized procedures for implementing the program. In the 2012 guide, CASEL's inclusionary criteria yielded 23 SElect programs. Within these programs, four targeted preschool-aged children, 16 were designed for use among children in elementary school (K-5), and three showed utility in both preschool and elementary schools. Individual

program descriptions, along with specific areas each program targets are available in *Appendix C: CASEL Program Descriptions* and *Appendix D: CASEL Programs Chart*.

CASEL's 2012 guide also assists researchers with their decision making process by providing a quantifiable approach through use of nine identifying variables and the extent to which each variable is targeted by individual programs. Specifically, CASEL assessed each of the 23 SElect programs by their: grade ranges, grade-by-grade sequencing, number of sessions, explicit instructional practices, integration into academic curriculum areas, teacher instructional practices, students' opportunities for practice, contextual reinforcement variables (i.e., classroom-wide, school-wide, family, and community), and assessment practices (i.e., self-report, observation, measuring student behavior). A three point Likert scale, where 1 represents minimal level, 2 represents an adequate level, and 3 represents an extensive level, was developed by CASEL to interpret the opportunities to practice skills and the contextual factors associated with prompting and reinforcing skill acquisition.

For example, to be considered a program that utilizes explicit instruction, lesson plans had to include specific examples of where and how social and emotional competencies are explicitly taught to students and the frequency of instruction. Meeting the criteria for integration with academic curriculum areas requires a program to cover core academic content while also developing social and emotional competencies. In order for a program to be effective in promoting teacher instructional practices, a primary focus regarding the creation of positive classroom experiences through pedagogical methods or classroom materials was required. Lastly, programs received a rating of either one, two, or three depending on the level at which practice occurred in only the classroom, the entire building, with family activities, and/or with specific

connections to community resources. Consequently, the same rating scale has been incorporated into the chart found in *Appendix D: CASEL Programs Chart*.

When deciding how to incorporate a SEL program into a school building, it is important to understand the theoretical differences between the 23 SElect programs and their approaches to improving social-emotional competence in students. Beyond the CASEL criteria described above, each of the programs identified vary considerably in their goals, activities, and overall design. This is because CASEL's 23 SElect programs can be adjusted to fit individual school needs through use of three conceptual frameworks identified by the National Association of State Boards of Education (NASBE, 2013). Specifically, NASBE indicates that schools can integrate SEL programming into the regular academic curriculum, use a stand-alone program to address a specific issue, or use a program to improve the classroom environment and/or school climate. For example, if a school is looking for a SEL program that can be easily integrated into the regular academic curriculum, Second Step may be a program worth investigating. Second Step is a program that "provides instruction in social and emotional learning with units on skills for learning empathy, emotion management, friendship skills, and problem solving" (CASEL, 2012, p. 60). Similarly, the Second Step program uses explicit instruction across 22 to 28 week lessons encompassing brain builder games, weekly themed activities, reinforcement activities, and home/school connective links. The program also connects the students' newly acquired skills with daily practice that directly corresponds with concepts from the academic curriculum—allowing for continuous reflection on social-emotional development. In contrast, if a school district is looking for a stand-alone program with the ability to teach specific topical areas to all grade levels, the Michigan Model of Health may be an appropriate choice. In this program, students are guided through 12 lessons that include lectures, discussions, simulations, and other

activities under the guidance of a trained professional. Depending on the age of participants, the students' curriculum may focus on topics such as nutrition, drug abuse, and various topics related to interpersonal intelligence, such as goal-setting and problem solving. Lastly, if a school district is looking to improve classroom cohesion or school climate, the MindUp program may best suit their needs. The MindUp program targets prekindergarten to eighth grade and utilizes 15 lessons to help students explore topics of self-awareness, attention, stress, and learning. The primary skill of focus within this program is meditation, and through teaching deep breathing and relaxation techniques, students learn what mediation looks like and utilize this skill to help decrease classroom disruptions, anxiety, and inattention.

Implications of Social-Emotional Learning Practices

Overall, much of the SEL literature, as well as legal mandates indicate that instruction on social-emotional competencies should be addressed in school settings. While this is important for districts to be aware of, the outcomes of utilizing the recommended SEL practices should also be focused on as district teams determine the level of attention they allocate toward implementation efficacy.

Guidelines for Integrating SEL in Schools. Given the difficulties with implementing a school-wide SEL program with fidelity, research-based guidelines began to be developed in the 1990s after CASEL demonstrated the complexities associated with implementing school- or district-wide SEL programs. In fact, CASEL's leading researchers coauthored 39 specific strategies designed to facilitate school personnel's development and evaluation of SEL programming in school settings (Elias et al., 1997). Later researchers condensed these guidelines into broad recommendations. For example, CASEL (2003) identified ten guidelines for SEL program implementation. Corresponding with these, Elias (2006) suggests that schools identify

ways to: incorporate social-emotional instruction into various school services, use goals to focus instruction, differentiate instruction to meet all students' needs, build empathy through promoting community and parent involvement, use explicit instruction gradually and systematically, help prepare and support school staff throughout the process, and also utilize evaluative procedures regularly in order to indicate whether changes are working. Furthermore, due to the legal mandates previously identified, NYS has also provided guidelines for selecting, implementing, and evaluating SEL programs. Specifically, NYS asserts that SEL development begins within students' homes, but is further facilitated at school. To further the enhancement of students' social-emotional skills, the state recommends that school districts: a) encourage family and community involvement; b) focus on both academic and social environments; c) provide developmentally-appropriate and standardized SEL instruction; d) offer opportunities to practice skills through extracurricular programs; e) make policies and procedures consistent and known; f) collaborate with outside agencies as needed; and g) facilitate continued professional development regarding SEL practices (NYS Department of Education, 2011). Overall, utilizing the guidelines recommended above should foster enhanced SEL opportunities within school settings. Without attending to several, if not all of these suggested practices, schools may fail to appropriately educate the whole child. Due to the number of recommendations and the need to foster a school climate where SEL is valued by all community members, collaboration is at the forefront of effective implementation and provides the greatest likelihood that all aspects of system change will be achieved.

Collaborative decision making. In order to utilize these guidelines in public school settings, decisions made regarding systemic changes—including the implementation of new programs—occur within groups of key personnel. Key members of these decision making

bodies often include administrators, psychologists, counselors, and teachers. Because each of these disciplines bring in a unique skill set to the decision-making team, the collaboration between all members allows for a comprehensive plan to be developed (Eagle, Dowd-Eagle, Snyder, & Holtzman, 2015). Thus, it is important for these individuals to have competency in the areas for which they are assisting with decision making. However, in considering several different types of historical school initiatives, researchers have indicated that personnel often require additional professional development in order to be better equipped for selecting and/or implementing new programs.

For example, previous research has indicated that teachers are imperative in effective implementation of SEL practices and should be the ones responsible for modifying the curriculum in order to meet the needs of students both with and without disabilities (Durlak et al., 2011). Unfortunately, when assessing the knowledge of graduate students from initial teacher education programs, researchers concluded that new teachers lacked confidence in their ability to academically and emotionally support students with disabilities in the general education classroom. This was likely due to the fact that most of the participants reported a lack of graduate training with regard to teaching opportunities within inclusive settings (Winter, 2006). While not always connected to servicing students with disabilities, SEL recommendations are relatively new, and therefore teacher education programs may not yet adequately foster the skills needed to implement a SEL curriculum. Consequently, teachers may lack confidence in SEL programming implementation, and therefore may not have the knowledge and/or skills necessary for participating in programmatic decision making.

Another professional typically involved in SEL decision-making practices is the mental health professional. However, mental health professionals in schools also seem to require

additional development and support in systems intended to foster students' SEL. Specifically, Sink (2016) reviewed the knowledge and roles of school counselors' in multi-tiered system of supports (MTSS), in both academic (commonly referred to as response to intervention; RTI) or behavioral (PBIS) frameworks, and indicated that MTSS competencies are often not a part of graduate training. Consequently, he suggested that graduate coursework regarding MTSS and how it corresponds with counselor education competencies should be taught explicitly. Because SEL programs should also be implemented using a MTSS framework, it is likely that given a lack of training in MTSS, in general, school counselors will be limited in their capacity to make informed decisions about social-emotional program selection.

Additionally, McKeivitt (2012) indicated that school psychologists also show a need for continued professional development regarding the selection and implementation of evidence-based SEL programs. In fact, McKeivitt (2012) found that over 70% of school psychologists reported they rely on professional development activities in order to learn more about SEL practices. These results are surprising due to the fact that the National Association of School Psychologists' (NASP) standards for graduate preparation within School Psychology programs include competencies in: 1) interventions and mental health services to develop social and life skills, 2) school-wide practices to promote learning, 3) preventative and responsive services, 4) data-based decision making and accountability, 5) interventions and instructional support, and 6) research and program evaluation (NASP, 2010). Having acquired all of these competencies in graduate school, school psychologists should graduate with the knowledge and skills necessary to effectively contribute in the SEL decision-making process. However, it is important to note that competency can be met through direct instruction only and the application of said competencies to school settings may not always occur.

Principals' Knowledge and Leadership in Schools

While other school professionals, such as teachers, counselors, and psychologists, seem to lack sufficient training in the use of social-emotional programs, it is the responsibility of principals, in addition to their other responsibilities, to understand the process of change in schools and manage it effectively. As identified by the National Association of Elementary School Principals (NAESP), one of the key competencies for elementary school principals includes ensuring that all school personnel, including themselves, have the professional development required in order to make appropriate decisions and carry out curriculum and programs effectively (2014).

Although ensuring school personnel are provided with professional development opportunities to enhance their skillsets may be challenging, school principals are generally well-equipped for handling such demands after receipt of their educational administration certification. According to guidelines provided for school building leaders by the NYS Education Department (2014), principals have the knowledge and abilities required to develop skilled and dedicated staff members. Further, an individual who holds an administration certification would have had to identify ways to promote professional learning communities through various avenues, including collaboration, professional growth, planning, sharing, and problem solving (NYS Education Department, 2014).

Passing the school building leader assessment also implies that school principals have “a deep and comprehensive knowledge of research-supported practices for curriculum, instruction, and assessment and knows how to develop and sustain a rigorous, standards-based, data-driven educational program that encourages and enables all students to be successful learners and all teachers to perform at a high level” (NYS Education Department, 2014, p. 4). While this

primarily includes academic curricula, the research training associated with the selection of academic programs relates to the practices needed for identification and implementation of school-wide SEL programs, as well. Specifically, it is expected that principals are aware of and capable of evaluating research-based and evidence-based programs (NYS Education Department, 2014), such as the SEL programs identified by CASEL (2012).

Thus, it is not surprising that school principals are regularly responsible for implementing, monitoring, and analyzing standards and programs (Bureau of Labor Statistics, 2016). Unfortunately, past researchers have indicated that regardless of the standards set forth by NYS, principals are not always provided the training opportunities to develop the skills needed to address school-wide programming. Specifically, principals are not always trained adequately in leadership or school management (Mathibe, 2007). Without these skills, principals may not be able to participate in programming decisions regarding SEL. This may be compounded by principals completing internship experiences in school settings where SEL programming is only in the early stages of development. In such cases, even when direct instruction has been provided, novice school principals may lack the opportunities to apply what they have learned in their degree programs to SEL program development in school settings prior to applying for independent administrative positions. In reality, this is only speculation; due to lack of research in this area, it is unknown how strong principals' SEL competencies are or how they make decisions regarding SEL programming.

Additionally, as principals' roles in schools change and responsibilities are increased (Bottoms & O'Neill, 2001; Bureau of Labor Statistics, 2016; Mathibe, 2007), they are likely to require additional professional development now more than ever before. This is particularly true when principals participate in decision-making bodies for programming that is newly mandated

or when direct instruction about the topic has not been previously provided. One such example is with regard to SEL programming, where principals should be serving as critical leaders in implementation practices. Because principals' familiarity and use of SEL interventions has not yet been assessed, it is imperative that future research addresses principals' competency in this area. This research should include assessment of how familiar principals are with SEL programs, as well as what resources they use to select them (e.g., consulting internet resources, research articles, non-academic references, books, and colleagues or relying on graduate training, past experiences, and professional development opportunities).

Present Study

Based upon the Center for Disease Control and Prevention's (CDCP) 2015 research, teens continue to show significant behavioral, mental health, and social-emotional deficits that do not promote healthy life styles. Rather than waiting to provide treatment after problems arise, prevention efforts during early childhood appear to be crucial as several mental health diagnoses develop in elementary school (Child Mind Institute, 2016). Consequently, with the help of organizations such as CASEL (2012), the national Technical Assistance Center on Positive Behavioral Interventions and Supports (2017), and the NYS-PBIS-TAC (2011), SEL programs have been reviewed, implementation materials have been made readily available, and self-evaluation tools have been developed. Additionally, research demonstrates a positive correlation between increased SEL competence and behavioral, social, and academic functioning (e.g., Durlak et al., 2011). Thus, it is not surprising that NYS has passed legislation that requires schools to incorporate social-emotional development practices into their educational programs (S. 2420, 2013). However, given this mandate, it is important to assess the awareness and understanding school personnel have regarding social-emotional practices. Although previous

research has explored the SEL knowledge of school psychologists, to date, there is no research assessing the familiarity and use of SEL programs among principals. Because principals are critical members of PBIS and decision-making teams, and assist with the development of implementation practices within schools, this study aims to fill an important gap in the literature regarding principals' familiarity, use, and resourcefulness when selecting social-emotional learning interventions. Specifically, this research will answer the following questions:

1. To what extent do NYS elementary school principals participate in school-wide SEL decision-making practices?
2. What are the levels of familiarity, past use, and current use among NYS elementary school principals regarding CASEL approved SEL programs?
3. What selection procedures would NYS elementary school principals use to learn about SEL programs and interventions?
4. What decision making practices are most important to NYS elementary school principals when choosing SEL programs and interventions?
5. Are there differences in the characteristics of principals related to their familiarity of CASEL approved SEL programs?
6. Are there differences in the characteristics of principals related to their past use of CASEL approved SEL programs?
7. Are there differences in the characteristics of principals related to their current use of CASEL approved SEL programs?

Chapter 3

Method

This study was exploratory in nature and used descriptive survey methodology to assess principals' familiarity and use of social-emotional learning (SEL) interventions. In order to describe principals' familiarity and use, a survey design was implemented. This is the optimal approach for collecting responses that could result in a large sample size, which is important when exploring new lines of research; this gives all eligible participants the opportunity to participate. Furthermore, in contrast to other descriptive designs, such as interviewing, surveys require less of a time commitment for participants and allow them flexibility to complete the survey at their leisure. Potential barriers for use of survey designs include low participation rates given the number of survey requests professionals receive, non-representative samples, incomplete data collection (i.e., missing data), and misinterpretation of survey questions.

Participants

The Information and Reporting Services (IRS) system of NYS Education Department (NYSED) (2016) was used to identify the names and contact information for all principals. This resource provides public data regarding all NYS school districts, including public schools, charter schools, and private schools. Eligible participants included approximately 2,600 elementary principals in New York State (NYS) who were employed in an elementary school building or small, centralized (kindergarten through grade 12) district during the 2017-2018 school year. For this study, principals who serve elementary-age students (i.e., any variation of grades kindergarten through six) in public schools were eligible to participate. It is important to note that in some cases, particularly in smaller districts, a superintendent may have been acting as the school's principal. Because SEL skills need to be addressed early in childhood, and all of

the CASEL-approved programs are designed for elementary grade levels, this study focused on viewpoints of elementary principals. As a result, middle/junior high schools and/or high schools were removed from the database. Also, principals working in non-public (i.e., charter and private) schools were removed from the database due to the fact that non-public schools are not required to abide by the same legal mandates as public schools in order to receive funds.

After sending the electronic survey request to all eligible participants (i.e., 2632 principals), the final sample for this study included a total of 172 principals, which represents a 6.4% return rate. While the response rate is low, per Soper's sample size calculator (2018), having 172 participants was a large enough sample for adequate power to compute multiple regression analyses. Descriptive data regarding the schools that the sample came from are listed in Table 1. The sample included participants from all 10 regions in NYS. The largest percentage of principals came from New York City (26%), followed by Long Island (13%), Finger Lakes (12%), Western NY (9%), Capital District (9%), Hudson Valley (8%), Central NY (7%), Southern Tier (6%), Mohawk Valley (5%), and North Country (5%). The geographic densities of the schools within these regions included similar percentages of urban (37%), suburban (34%), and rural (29%) settings. Data regarding density indicates an underrepresentation of participants from rural settings as The New York Center for Rural Schools (2018) reports that approximately 52% of NYS schools are in rural or remote settings. A majority of the principals surveyed worked primarily in one (94%) school building, while 5% of the participants worked in two school buildings and 1% worked in more than two school buildings.

All participating principals worked full time and served a varied number of grade levels. The largest percentages (approximately 90%) of participants indicated that they served grades

kindergarten through grade four, while 80% reported serving students in fifth grade. In some cases, the principals (3%) also served additional, non-elementary grade levels, such as a principal in a district with one kindergarten through twelfth grade building. Significant variation in the number of students served within these settings was also observed. While the mean number of students served by the principals was approximately 439 students ($SD = 207.5$), the range spanned from 78 to 1300 students. Although the range was vast, approximately 75% of the principals reported serving a number of students (i.e., 231-650 students) that fell within one standard deviation of the mean.

When evaluating the individual participants' demographic characteristics (see Table 2), 71% identified as female, 28% male, and 1% selected the option prefer not to say. In relation to the total population of NYS public elementary school principals (67% female, 33% male), this sample appears to be representative by gender. With regard to race and ethnicity, the sample was primarily white (78%), followed by black or African American (13%) and Hispanic (13%). Both Asian and Native Hawaiian or Other Pacific Islander categories were identified by less than 1% of the sample. Half of the participants' highest academic degree was at the Master's level; 27.3% had a specialist degree and 22.1% had a doctoral degree. This may represent an overrepresentation of participants with doctoral degrees; the NYSED IRS (2016) data indicates that less than 4% of NYS elementary school public principals use Dr. as their salutation. Approximately 8% of the sample had a graduate degree in a mental health field.

Materials

The current study utilized a modified version of the *Social/Emotional/Behavioral Intervention Survey* (McKevitt, 2012). Although originally designed by McKevitt (2012) to evaluate school psychologists' knowledge and use of evidence-based social-emotional learning

interventions, modifications for the present study were made to allow for a better fit to assess principals' familiarity and use of SEL programs. Permission to utilize the survey was provided by the author.

Social-Emotional Learning Interventions: Survey for NYS Elementary School Principals.

The revised survey, the *Social-Emotional Learning Interventions: Survey for NYS Elementary School Principals* (Appendix D) is comprised of four sections that include: (1) demographics, (2) learning about and selecting evidence based interventions, (3) familiarity and use of existing evidence-based interventions, and (4) decision making about selecting SEL interventions. Demographic questions included background information about the respondents' school setting, including geographic region, the geographic density of the community, number of school buildings served, full or part time status, grade levels served, and the number of students in the elementary school. Additionally, the present survey asked questions related to demographic data at the individual level. These questions asked respondents to identify their gender, race/ethnicity, highest academic degree, and whether they held a degree in a mental health-related field. Three additional questions in the first part of the survey asked respondents to indicate what percentage of time they spend performing a variety of job responsibilities and to identify the percentage of time they participate in school-wide SEL decision-making processes as well as what organizations they consult with to learn about SEL programs.

The second section of the survey includes 10, four-point Likert-scale questions (i.e., never, sometimes, often, always) that assessed the frequency in which principals learn about and select evidence-based SEL interventions and programs. These questions asked respondents to identify how often they consume literature regarding evidence-based interventions (e.g., reading

research articles, books, journal articles) and how often they rely on various sources (e.g., colleagues, training, professional development) in order to choose interventions.

The third section of the survey inquired about elementary principals' familiarity and use of evidence-based interventions. All 23 SElect programs identified by CASEL's Resource Guide of 2012 are included. For each program, principals were asked to identify how familiar (i.e., not familiar, somewhat familiar, very familiar) they are with the program and their use of the program (i.e., never used, have used).

The final section of the survey measured the importance of various variables used to select interventions. Specifically, five prompts (i.e., research support, cost, time to implement, training required, and whether program worked for others) were provided and respondents were required to identify the importance of each attribute in selecting an intervention. They were also asked to rank the order of importance for all five options.

Procedure

McKevitt's (2012) survey that was designed to evaluate school psychologists' knowledge and use of SEL interventions was modified for this study. To better evaluate elementary school principals, two demographic questions were added to the current survey. The first additional question assessed geographic region and the second asked about the presence of a degree in a mental health field. The survey for this study also asked principals to identify the organizations for which they use as SEL resources. The most substantial change, however, was to the third section of the survey. While McKevitt (2012) identified 16 SEL intervention programs, the current study included all 23 SElect programs identified by CASEL's Resource Guide of 2012. This is in contrast to McKevitt's (2012) survey that included only seven CASEL programs. Pilot testing was conducted with three high school administrators/colleagues in order to obtain

information pertaining to the readability, comprehensibility, face validity, and time required to complete the survey. There were no recommended changes gained from pilot testing. Then, participants were identified from the NYSED IRS (2016) database. All eligible participants were contacted via email requesting their participation. The Participant Selection Letter (*Appendix E*) introduced the study, as well as its purpose, and indicated the inclusionary criteria the researcher used to allow for the participant to qualify for the study. At the conclusion of the email, there was an invitation to follow a link to the *Social-Emotional Learning Interventions: Survey for NYS Elementary School Principals* through a web-based survey provider, Google Forms.

Upon identifying that they consented to voluntarily participate in the study by reading the informed consent form and clicking *next*, the *Social-Emotional Learning Interventions: Survey for NYS Elementary School Principals* was presented. After completing the survey, participants were provided with a debriefing statement (*Appendix H*) reminding participants of the purpose and goals of the study, as well as the contact information for the authors. Within the debriefing statement, participants were also given the option to email the primary researcher if they were interested in receiving a copy of the survey results and/or participate in a drawing for one of two \$50 gift cards after conclusion of the study. By requesting a separate email rather than asking participants to include identifiable information with their responses, confidentiality of responses was maintained. Reminder emails were sent to all eligible participants two and four weeks following the original email distribution.

Variables

The variables for the present study are based on data from the *Social-Emotional Learning Intervention: Survey for Elementary Principals*. Because the first four research questions are descriptive in nature, there are no specific independent or dependent variables. For the final

three research questions, however, independent and dependent variables were used for analyses and are described below.

In order to answer the first research question pertaining to the extent to which NYS elementary school principals participate in SEL decision-making practices, the demographic question located in part one of the survey, which asks principals to indicate the extent to which they participate in SEL decision-making processes (using percentages from 0 = never participate to 100 = always participate) was analyzed as a continuous variable.

The second research question required variables for familiarity, current use, and past use. To evaluate principals' familiarity, a second descriptive variable was determined based upon individual program scores for the 23 *familiarity* questions of the third section of the survey. Using the same evidence-based SEL programs, two additional descriptive variables were principals' *past use* and *current use* of the 23 individual CASEL SElect programs. These variables were also assessed in part three of the survey.

In order to evaluate what selection procedures principals use to learn about SEL programs and interventions (research question 3), an additional descriptive variable identified the characteristics important to elementary principals when making decisions. It is based upon individual scores derived from questions in the second section of the survey, where participants indicated on a scale from 0 (never) to 3 (always) how often they rely on various selection procedures when making decisions.

The fourth research question asks what decision making practices are most important to principals and was evaluated using a descriptive survey question from part four of the survey which asked participants to identify the importance of various characteristics associated with

implementing SEL programs on a scale from 0 (not important) to 2 (very important). They were also asked to rank order the 5 characteristics from most important to least important.

The final three research questions aimed to identify the relationship between demographic characteristics and the (1) familiarity, (2) past use, and (3) current use of SEL programs among elementary school principals. In order to identify these relationships, the following independent and dependent variables were used. The independent variables included: (1) geographic density [i.e., Urban, Suburban, Rural], (2) type of graduate degree [i.e., Master, Specialist, Doctorate], (3) educational background in a mental health field, and (4) number of years serving as a principal. All of these variables were assessed in the first part of the survey. The first three independent variables were categorical, and therefore, were dummy coded for analysis. Specifically, three separate dummy variables (i.e., urban or not, suburban or not, rural or not) were developed for geographic density. Three dummy variables were also created for type of graduate degree (i.e., Master or not, Specialist or not, Doctorate or not). Educational background in a mental health field resulted in one dichotomous variable (i.e., mental health degree or not). The fourth independent variable (i.e., number of years serving as principal) was treated as continuous.

The three dependent variables were principals' *familiarity* with social-emotional programs, as well as principals' *past use* and *current use* of social-emotional programs. The questions pertaining to these variables were answered in part three of the survey. In addition to analyzing each individual program response, composite scores were obtained by creating three separate total scores for familiarity, past use, and current use of all 23 CASEL programs identified in section three of the survey. Composite scores were developed by adding together each rater's responses for all 23 CASEL programs. Because the range of familiarity scores

spanned from 0 (not familiar) to 2 (very familiar), total familiarity scores ranged from 0 (no recognition of any programs) to 46 (high familiarity with all programs). Dichotomous rating scales (i.e., used or had not used) yielded total past use scores that ranged from 0 (no use of any programs) to 23 (past use of all programs). The same dichotomous rating scale was also used to evaluate current use of programs and therefore, resulted in total current use scores that ranged from 0 (never used any programs) to 23 (currently using all programs).

Data Analysis

Once all raw data was entered into SPSS (IBM Corp., 2013), all nominal data was coded numerically. Descriptive statistics were used to analyze demographic characteristics of the principals who participated in the study. In order to assess the extent to which principals participate in SEL decision-making practices, which was the first research question, the continuous variable regarding principals' participation in decision-making processes regarding SEL interventions was interpreted based on the mean, median, range, and standard deviation.

To evaluate elementary principals' familiarity, past use, and current use of SEL programs, as pertained to the second research question, several descriptive analyses were conducted. First, principals' familiarity with SEL programs was analyzed by calculating percentages, in addition to means, medians, and standard deviations for familiarity with each of the 23 CASEL-approved SEL programs. Similarly, the extent to which elementary principals used CASEL-approved programs in the past, as well as their current use was evaluated using percentages for each program.

The third research question regarding the methods for learning about and selecting SEL programs was analyzed using individual percentages for each method provided in section two of the survey. Means, medians, and standard deviations for each question were also determined.

The final descriptive analysis was conducted to determine what characteristics of SEL programs are important to elementary principals when making decisions (the fourth research question). Individual percentages, as well as individual means, medians, and standard deviations were analyzed for each characteristic. Percentages were also calculated for each of the five characteristics using the rank score (i.e., 1-5) provided in order to assess the areas principals identify as being the most and least important in comparison to all of the other factors.

After analyzing the descriptive statistics, three separate multiple regression analyses (one for each dependent variable) were conducted in order to determine how the four independent variables (i.e., geographic density, type of graduate degree, educational background in a mental health field, and number of years serving as a principal) are related to each of the three dependent variables (i.e., familiarity of SEL programs, past use of SEL programs, and current use of SEL programs). In order to analyze each of the levels of the categorical independent variables in this analysis, geographic density included three separate dummy variables (i.e., urban or not, suburban or not, rural or not), type of graduate degree included three separate dummy variables (i.e., Master or not, Specialist or not, Doctorate or not), and educational background in a mental health field included one dummy variable (i.e., mental health degree or not). Number of years serving as principal was a continuous variable. Principals' familiarity, past use, and current use variables were all continuous and based upon total composite scores. Results of each of the regression analyses indicated the strength of the relationships between each independent variable and the dependent variable while controlling for all of the other independent variables in the model. For example, the first regression assessed the relationship between the demographic variables (i.e., geographic density, type of graduate degree,

educational background in a mental health field, and number of years serving as a principal) and principals' familiarity with the 23 CASEL-approved SElect programs.

Chapter 4

Results

The aim of the present study was to identify the extent to which elementary school principals participate in SEL decision-making practices, as well as what procedures they use to learn about and select SEL programs in their schools. Principals' familiarity, past use, and current use of CASEL approved SEL programs was also evaluated. Lastly, relationships between several demographic variables (i.e., geographic density, type of graduate degree, educational background in a mental health field, and number of years serving as a principal) and principals' familiarity, past use, and current use of CASEL approved programs was assessed.

Key Findings

This section will address the key findings, as they relate to each of the research questions in the present study. Results were yielded through the previously described descriptive and regression analyses.

Question 1: Principals' participation in SEL decision-making. The first research question assessed the percentage of time that NYS elementary school principals indicate they participate in decision-making practices regarding school-wide SEL interventions and programs. Overall, most of the principals reported participation in SEL decision-making practices. Specifically, 64% of respondents reported they are always (100% of the time) involved in SEL decision-making practices. Although not ideal, 90% of respondents indicated that they participate in at least 70% of the decision-making practices. Findings also showed that It is important to note that the range spanned from 0% participation to 100% participation ($M = 90.33$; $SD = 17.482$), indicating some variation in participation among respondents. Only one principal reported that he/she never participated in SEL decision-making practices, while an

additional 14 principals (8%) reported participating in 50% or less of the SEL decision-making processes in their buildings.

Question 2: Principals' familiarity, past use, and current use of CASEL programs.

The second research question evaluated NYS elementary school principals' familiarity, past use, and current use of each of the 23 CASEL-approved SElect programs. All familiarity, past use, and current use descriptives are located in Table 3 and frequencies are located in Table 4.

Familiarity of CASEL programs. Based upon a scale from 0 (not familiar) to 2 (very familiar) for each of the programs, NYS elementary school principals' familiarity is relatively low. Specifically, all but one program indicated mean values that were less than 1.0. This indicates that on average, respondents are less than somewhat familiar with the majority of programs in the survey. At least 75% of the respondents indicated that they were *not familiar* with 15 of the 23 CASEL-approved programs. Seventeen of the programs had 10 or fewer respondents endorse *very familiar*.

While the mean familiarity scores for the following programs indicate a lack of high familiarity overall, principals were most familiar with the Responsive Classroom (M = 1.4; SD = .645) and Second Step (M = .960; SD = .901) programs. With regard to the Responsive Classroom program, 48% of principals reported being very familiar with the program. Nearly 40% of participants reported that they were very familiar with Second Step.

Past use of CASEL program. NYS elementary school principals' past use of CASEL-approved programs was identified through a forced choice question where 0 indicated no use in the past and 1 indicated use in the past for each of the 23 programs. Descriptive data indicated that the sampled participants have used very few CASEL-approved programs in the past. Unfortunately, 78% of the program means were less than .10 with the highest mean being .56

(Responsive Classroom). This indicates that on average, most elementary school principals have not used CASEL-approved programs in the past. In fact, analysis of total past use scores indicated that 93% of the principals reported previously using five or fewer CASEL-approved programs. However, when respondents did report past use of a program, the same two programs that respondents identified being most familiar with were highlighted again for past use. The two programs, Responsive Classroom and Second Step, were endorsed as being used in the past by at least 40% of the respondents.

With regard to the Responsive Classroom program, 55% of respondents reported previous use ($M = .560$; $SD = .498$). Meanwhile, Second Step was previously used by 40% of respondents ($M = .400$; $SD = .492$). The past use and familiarity data for Responsive Classroom is interesting because results indicate that despite having used it in the past, some respondents did not feel very familiar with the program. Similarly, an equivalent percentage of principals reported familiarity and past use of Second Step.

Current use of CASEL programs. Given the fact that NYS elementary school principals are widely unfamiliar and have used very few programs in the past, it is not surprising that current use data also indicates that few programs are currently being used. Overall, about 91% of respondents indicated that they are using three or fewer CASEL-approved programs currently. Specifically, 36% endorsed current use of zero programs, while 64% of principals reported use of at least one program currently. Although this could seem promising, use of various programs is limited. In fact, 15 of the 23 programs are being used by 10 or fewer elementary schools. Furthermore, only two of the CASEL-approved programs indicated mean current use scores higher than .10 on a scale from 0 (not currently using) to 1 (currently using).

Again, Responsive Classroom ($M = .350$; $SD = .477$) and Second Step ($M = .350$; $SD = .477$) are the programs that are currently being used most frequently, with each of the programs being currently implemented by 59 of the 172 respondents. In comparison to past use data, it is not surprising that the same programs are being currently used most often. It seems likely that successful past use of a program would lead to choosing to use the program again in the future. It is important to note, however, that current use rates are lower than past use percentages, suggesting that some individuals who have used these two programs in the past have elected to not use the same program currently.

Question 3: Selection procedures for learning about SEL programs. The third research question is related to what NYS elementary school principals do in order to learn about SEL programs and interventions. Ten learning strategies/resources were investigated and was based off of a 4-point Likert scale that ranged from 0, which indicated *never* and 3, which indicated *always* for each strategy/resource. Descriptive and frequency data is provided in Table 5. Overall, it seems NYS elementary school principals use varied methods each time they need to learn about new programs, rather than resorting to just one approach. Mean scores for each of the 10 methods were below 2, indicating that on average, elementary school principals rarely endorsed any given method as being used every time they need to learn about an SEL program. In fact, when comparing respondents within one strategy, it was most often the case that the lowest number of endorsements fell within the *always* rating. Contrastingly, for all 10 of the learning methods, the highest percentage of participants (approximately 40-50%) endorsed that they *sometimes* used each method to learn about SEL programs and interventions. This data indicates that awareness of resources may be present, but selection procedures vary each time principals are tasked with learning about new programs.

When specifically assessing individual strategies, relying on past experience and relying on colleagues or supervisors were the most frequently used methods for learning about programs. While 54% reported *often* or *always* relying on colleagues or supervisors, 43% also indicated that they *often* or *always* personally review original publication materials for programs that are recommended to them. Similarly, 40% reported *often* or *always* relying on past experiences when learning about programs. In contrast, ratings that were most frequently rated as being *never* used by principals included: relying on graduate training (39%), consulting non-academic magazines or newsletters (27.9%), and relying on BOCES (22.7%) or non-BOCES (16.9%) professional development opportunities. Analysis of this data suggests that principals are most likely to consider their own or others' perceptions of programs to learn about SEL programs.

Additionally, although not an exhaustive list, Table 6 also indicates the frequencies for use of various professional organizations as resources for SEL. According to respondents, the NYS Education Department is the resource that most participants use (64%), followed by NYS PBIS TAC (39%) and Intervention Central (34.3%). CASEL is used by only 20.3% of participants, which may relate to the low familiarity, past use, and current use of the 23 CASEL SElect programs described above. Very few participants used the remaining organizations.

Question 4: Importance of decision making characteristics for choosing programs.

The fourth research question assessed what decision making characteristics NYS elementary school principals consider important when choosing SEL programs and interventions. The five characteristics included research support on effectiveness, time to implement, training required, cost, and previous program success for colleagues. Each characteristic was assessed on a 3-point Likert scale ranging from 0 (not important) to 2 (very important). Importance descriptives and frequencies are located in Table 7. Findings indicate that overall, each of the five characteristics

provided are at least somewhat important to NYS elementary school principals, with mean scores that ranged from 1.4 (colleagues success) to 1.8 (research support). This means that school principals are likely to consider all five factors when selecting programs. Very few participants endorsed *not important* for any of the five characteristics. When comparing specific characteristics, over 80% of participants indicated that research support is *very important* when selecting a SEL intervention program. This was followed by 65% who indicated time required for implementation was *very important* and 62% of participants that endorsed *very important* for the amount of training required.

An additional multivariate analysis of variance was conducted to determine whether participant characteristics (i.e., gender, type of degree held, presence of a mental health degree, and geographic density of the principal's school) impacted their importance ratings; results were not significant. Consequently, there was not a significant difference in importance ratings based upon participants' gender, type of degree, presence of a mental health degree or geographic density of their school.

When asked to rank the importance of the five characteristics from 1 (most important) to 5 (least important) (see Table 8), results indicate that while they indicate all factors are important, NYS elementary school principals have varied viewpoints regarding the rank order of importance of said characteristics. Overall, the largest percentage of participants endorsed research support as their most important characteristic, followed closely by colleagues' past success. It was important to note, however, that there are bimodal distributions in the rankings for each of these characteristics. For both research support and colleagues' past success, approximately 30% of participants endorsed the characteristic as their most important ranking, while an opposing 30% endorsed the characteristic as their least important ranking. In contrast,

among the remaining three characteristics (i.e., overall cost, implementation time, and training required), importance percentages clustered between rankings 2 and 4.

Question 5: Principals' demographics and familiarity of CASEL programs. The fifth research question aimed to determine if there was a relationship between several demographic characteristics (i.e., school's geographic density, highest academic degree, mental health degree, and number of years served as principal) and principals' total familiarity scores. Results were analyzed using a multiple regression (see Table 9) and indicated that the model was not significant ($F(4,161) = 1.325$, $p = .263$), with an observed power of .457 (Soper, 2018). This suggests that there was a 54% chance that a type II error was made. A Type II error suggests that the null results may actually have significance if there had been more power. Geographic density ($\beta = .111$; $p = .163$), highest academic degree ($\beta = .111$, $.028$; $p = .720$), having a mental health degree ($\beta = .138$; $p = .084$), and number of years served as principal ($\beta = -.022$; $p = .785$) did not significantly impact level of familiarity with the 23 CASEL-approved programs.

Question 6: Principals' demographics and past use of CASEL programs. The sixth research question aimed to determine if there was a relationship between the same demographic characteristics (i.e., school's geographic density, highest academic degree, mental health degree, and number of years served as principal) and principals' total past use scores. Results were analyzed using a multiple regression (see Table 9) and indicated that the model was not significant ($F(4,155) = .673$, $p = .612$), with an observed power of .99 (Soper, 2018). This suggests that there was only a 1% chance that a type II error was made. Geographic density ($\beta = .025$; $p = .757$), highest academic degree ($\beta = .085$, $p = .298$), having a mental health degree ($\beta = .088$; $p = .285$), and number of years served as principal ($\beta = .007$; $p = .931$) did not significantly impact total scores regarding past use of the 23 CASEL-approved programs.

Question 7: Principals' demographics and current use of CASEL programs. The final research question aimed to determine if there was a relationship between principals' demographic characteristics (i.e., school's geographic density, highest academic degree, mental health degree, and number of years served as principal) and their total current use scores. Results were analyzed using a multiple regression (see Table 9) and indicated that the model was not significant ($F(4,158) = .873, p = .482$), with an observed power of .31 (Soper, 2018). This suggests that there was a 69% chance that a type II error was made. Geographic density ($\beta = .078; p = .331$), highest academic degree ($\beta = .105, p = .194$), having a mental health degree ($\beta = .047; p = .557$), and number of years served as principal ($\beta = -.055; p = .492$) did not significantly impact total scores regarding principals' current use of the 23 CASEL-approved programs.

Additional Analyses

Upon visual inspection of frequency data (see Figure 1 for frequency histogram) for principals' total scores for current use of the 23 CASEL-approved programs, it was observed that seven (4%) participants indicated that they were currently using between 6 and 20 CASEL-approved programs in their schools. Given the fact that each of these programs require substantial resources and using so many programs contradicts the philosophy behind the use of positive behavioral interventions and supports (PBIS), it seems highly unlikely that any given elementary school could sustain that many SEL programs simultaneously. Consequently, it is assumed that these particular respondents did not accurately respond to the prompt provided in the survey. Additionally, upon visual inspection, there were no trends observed among these participants; their personal and school demographics were highly varied. The decision to remove only these participants and not those with 5 or fewer programs identified was made based upon

logic, as well as the desire to ensure that no more than 95% of the participants be removed from the sample. To determine whether these outliers had an impact on the analyses, three additional multiple regressions (see Table 10) were conducted excluding data from the seven respondents that seemed to be outliers. For each multiple regression, the independent variables included geographic density, highest academic degree, number of years served as principal, and presence of a mental health degree. The dependent variables were the total familiarity score, total past use score, and total current use score. A separate regression analysis was conducted for each dependent variable.

The model for the relationship between principals' demographic characteristics and familiarity remained non-significant ($F(4, 154) = 1.707, p = .151$), overall. When evaluating individual differences among the independent variables, geographic density ($\beta = .041; p = .609$), highest academic degree ($\beta = -.042; p = .603$), and number of years serving as principal ($\beta = -.019; p = .818$) did not significantly impact familiarity total scores. In contrast, the presence of a mental health degree was significantly related to familiarity total scores ($\beta = .204; p < .05$), where those who had a mental health degree had higher familiarity total scores, while controlling for the other three independent variables.

Similar results were found for the regression with past use total scores as the dependent variable. Overall, the model was not significant ($F(4, 149) = 1.513, p = .201$). Geographic density ($\beta = -.066; p = .426$), highest academic degree ($\beta = .027; p = .747$), and number of years serving as principal ($\beta = .025; p = .765$) did not significantly impact past use total scores. However, as was the case with the total familiarity scores, the presence of a mental health degree was significantly related to past use total scores ($\beta = .183; p < .05$). Individuals who reported

holding a mental health degree had used higher numbers of CASEL programs in the past when compared to those without a mental health degree.

In contrast to the previous findings, a significant model was obtained when analyzing the relationship between principals' demographic characteristics and their current use scores ($F(4, 151) = 2.484, p < .05$). The model explained 3.8% of the variance (Adjusted $R^2 = .038$). Geographic density ($\beta = -.078; p = .336$), highest academic degree ($\beta = -.010; p = .897$), and number of years serving as principal ($\beta = -.097; p = .232$) did not significantly impact current use total scores. However, a significant relationship was obtained for the presence of a mental health degree and principals' current use total scores ($\beta = .208; p < .05$). Principals with mental health degrees reported currently using significantly more CASEL-approved programs than those without mental health degrees.

Chapter 5

Discussion

The primary purpose of this study was to determine the extent to which NYS elementary school principals' were familiar with and used the Collaborative for Academic, Social, and Emotional Learning (CASEL) approved social-emotional learning (SEL) programs. In addition to assessing elementary principals' participation in decision-making practices and ways in which they learn about and select programs, this study also explored how demographic variables (i.e., geographic density, type of graduate degree, educational background in a mental health field, and number of years serving as a principal) related to principals' familiarity, past use, and current use of CASEL approved programs.

Principals' Participation in SEL Decision-making

Overall, the results indicated that most NYS elementary school principals are regularly involved in the SEL decision-making practices within their schools. This is a very important finding because having administrative support when implementing a new program is critical for program success (Leithwood & Montgomery, 1982). Additionally, principals are often responsible for restructuring of curriculum and resources when new programs are introduced. For the restructuring to be done effectively, it is important for principals to support the use of new programs as principal participation and endorsement may improve the likelihood of resources being provided for faculty and staff to learn how to implement said programs. A key resource that is necessary for program implementation is professional development. Luckily, one of principals' key competencies, as identified by NAESP (2014) is to ensure the professional development required for all school personnel to make decisions and carry out curriculum and programs is provided. When determining what professional development opportunities are

available, principals who participated in the decision-making process should have more knowledge about new programs. As a result, they should be better equipped to select the appropriate resources and training that will be required for faculty and staff members to implement new programs effectively.

It is reassuring that principals are generally involved in the decision-making process because it can yield better resource allocation and subsequent program implementation. This finding is consistent with the NYS Education Department (2014) requirements of earning an administrative certification, which indicates that principals must demonstrate their ability to promote professional learning communities through collaboration, professional growth, planning, sharing, and problem solving. These skills easily relate to the decision-making process required for learning about and selecting SEL programs. In fact, having participation of an administrator, who has been specifically trained in these particular skills sets, and who also has the authority to invoke change in personnel responsibilities is necessary for program implementation. Consequently, the present findings are very promising given the fact that a majority of elementary school principals participate in the SEL decision-making process.

Principals' Familiarity and Use of CASEL Programs

While principals often actively participate in school-wide SEL decision-making initiatives, their low level of recognition and use of CASEL approved programs is concerning. Specifically, the overall findings of this study suggest that NYS elementary school principals lack familiarity with CASEL approved programs and thus, it is not surprising that they have used them infrequently. Qualitatively, when asked what, if anything, they had learned by participating in the study, several participants indicated that they had not realized how many SEL programs were available. Others noted that they had not ever heard of CASEL. Thus, it seems as

though the lack of familiarity and use of these programs is due to lack of exposure. Furthermore, this indicates a significant area of concern that warrants further research and professional development regarding SEL decision-making. McKevitt (2012) found that school psychologists also lack familiarity and use of CASEL approved programs. Perhaps identifying ways in which school personnel, particularly principals and school psychologists, can increase their knowledge of research-supported programs would in turn enhance the implementation of SEL programs, such as those approved by CASEL.

Although it is unfortunate that the participants in this study were widely unfamiliar with the majority of the 23 CASEL approved programs, two programs stood out as being more highly recognized and used by the participants. These two programs included Responsive Classroom and Second Step. Several factors may be involved as to determine why these two programs stood out from the other 21 programs. First, financial considerations may be related to selection of these programs. Cost-benefit studies indicated that in addition to several other programs, both Responsive Classroom and Second Step have been identified as being cost-effective where there was an \$11 average return to schools for every \$1 spent on these programs (Belfield, Bowden, Klapp, Levin, Shand, & Zander, 2015). These analyses, however, did not compare programs to one another. As budgetary constraints become more significant in many public schools, being financially responsible is necessary.

Beyond the financial benefits, endorsement of programs by recognized organizations also appears to relate to familiarity and use of programs. For example, Responsive Classroom and Second Step were both referenced by the NYS Education Department's Board of Regents (2018) when discussing the importance of allocating resources toward incorporating SEL in schools. Additionally, Responsive Classroom and Second Step were also endorsed as being highly

effective programs by the U.S. Department of Justice and Office of Juvenile Justice and Delinquency Prevention (OJJDP) (OJJDP, 2018). Such endorsements may increase the exposure to programs which in turn, may lead to choosing to implement them. It is important to note, though, that two other CASEL-approved programs (i.e., The Incredible Years and PATHS) were also endorsed by OJJDP (2018) as being highly effective, but were not as highly recognized by principals in this study.

In considering the familiarity and use of Responsive Classroom, in particular, there are a couple of factors that may appeal to public school principals. For example, connecting previously learned content to new content has been a widely recommended practice for many years (Piaget, 1973). Many of the 10 essential teaching practices (e.g., morning meeting, logical consequences, collaborative problem solving, positive language) identified by Responsive Classroom seem to correspond to what many teachers already do (CASEL, 2012). Thus, elementary principals may be more receptive to attempting to implement programs that correspond with known teaching practices. Utilizing these closely related programs may also increase a necessary buy-in component, intervention confidence, and ultimately the effectiveness of the implementation (Winter, 2006). If teachers only need to expand upon their current practices, rather than learn new practices, their acceptance and implementation of new initiatives is likely to be more effective. Additionally, as stated earlier, professional development is an important component to decision-making. Thus, principals may be more apt to use programs, such as Responsive Classroom, that will require less professional development for potential implementers.

With regard to increased familiarity and use of Second Step, it is hypothesized that part of this program's appeal to school districts may be the fact that it is the only program from the

2013 CASEL Guide that is also identified as an effective program in the 2015 CASEL Guide which was developed for the middle school (grades 6-8) population. Therefore, Second Step is unique in that it can provide explicit instruction of SEL competencies for a larger span of academic years and therefore, can be implemented more widely in a district. In turn, this may be viewed as a strong program for several reasons. First, the extended exposure to the same content or structure of content may be viewed as an optimal way for learning. Additionally, teachers and implementers may buy into a program that is being used more widespread across a school district. Further, use of the same program for elementary and middle school buildings may be a more cost-effective approach for SEL implementation than using two separate programs for the different populations. This theory, however, is not likely the only reason that Second Step is so widely recognized and used; especially since a majority of the participants reported that they do not use CASEL as a resource for SEL programming. Therefore, further assessment is needed to specifically discern what it is about Second Step that makes it so popular among NYS schools.

Principals' Selection Procedures

While recognition of specific programs due to endorsements, perceived ease of implementation and financial reasons is possible, principals can obtain knowledge about SEL programs from a variety of resources. Cumulatively, the present results indicate that NYS elementary school principals use a variety of procedures for learning about and selecting SEL programs. However, the frequency for which they use such methods is restricted. Very few participants indicated that they *always* use a specific procedure when learning about and selecting SEL programs. Thus, it seems as though they use a variety of approaches each time they are in search of a new intervention/program. This can cautiously be interpreted as a positive finding because it does seem important to assess new programs using varied methods of

information. This can be problematic, however, if principals are not actually using multiple strategies each time they are in the decision making process, but instead are really relying on just one method of investigation each time. For example, a principal may rely on a BOCES professional development opportunity in one instance and consult a non-academic newsletter on another instance. In such a case, using these methods in isolation may not lead to identification of the best program available for that particular school setting. Additionally, such varied research strategies that could be used in isolation, poses a difficulty in increasing exposure to evidence-based SEL programs. This would imply that all methods for dissemination of information would need to include the 23 CASEL approved programs to ensure that all principals obtain some sort of exposure.

While there was variation in use of all ten methods for learning about and selecting SEL programs, the strategies with the highest ratings were relying on colleagues or supervisors, followed by relying on past experience. This can be interpreted as advantageous given the fact that both of these methods imply that there has been direct observation of the implementation of a particular program by either the principal or someone the principal knows in the past. Having such anecdotal evidence is positive for confirming previous research findings, but used in isolation, is problematic. As with any personal experience, there is a threat of bias and if other strategies are not used to confirm success or failure of programs, one could make decisions without consideration of empirical evidence.

The varied selection procedures used by NYS elementary school principals may also relate to why Responsive Classroom and Second Step were identified as being used more often by principals than the other CASEL approved programs. Perhaps, it is the reliance on others and one's past that has led to these programs becoming so popular in every region across NYS. For

example, if a principal worked in school where Second Step was used because of the recommendations made by that principal's colleagues and then, the principal obtains a position at a new school, that person may recommend use of Second Step in the new building, due to past experience.

Given the reliance on one's past and others, it is not surprising that less than half of the participants indicated that they regularly review original publication materials for programs that are recommended to them. Perhaps this is related to the fact that only a small portion of the sample had obtained doctoral level degrees, where research practices would be enhanced due to educational requirements, including the completion of a research thesis or dissertation. However, to be certified in NYS, all principals must demonstrate the ability to evaluate research-based and evidence-based programs (NYS Education Department, 2014). Therefore, it may be the case that NYS elementary school principals have the skill sets required to consume and disseminate research, but are choosing not to, for reasons that need to be determined through future research. This is problematic because without personally conducting research on a recommended SEL program, it may not be possible to adequately understand the demographics that the program was developed to align with. As a result, a program could be selected that is not best fit for a particular school setting and that school's identified needs.

Important Characteristics when Decision-making

With regard to identifying the importance of various characteristics for making decisions about SEL programs, overall it seems as though NYS elementary school principals recognize the importance of all of the characteristics (i.e., cost, implementation time, training required, research support, and colleagues' success). Their prioritization of these characteristics, however,

varies by the individual. Of course, this is to be expected given the diverse settings and assorted needs within the schools that are served by NYS principals.

In evaluating the individual characteristics, it is interesting that while most of the NYS elementary school principals assessed in this study did not review original research regarding programs themselves, when asked to identify what decision making characteristics are important for choosing programs, the highest ratings were for research support. This implies that while participants recognized the need and importance of empirical data for SEL programs, they may not have had the motivation to conduct research themselves. Perhaps this is due to reliance on past experience and colleagues. Thus, not surprisingly, the second characteristic ranked most important was colleagues' past success. It is important to note, however, that while these were the highest percentages of participants, the rankings were so varied that these percentages only accounted for about one third of the sample. What was not expected, however, was the bimodal distribution in rankings for these characteristics; about one third of the sample rated research support and colleagues' past success as their least important ranking, as well. This is particularly concerning for the importance of research support. If principals see research support as being the least important characteristic, they may not find themselves exposed to empirically-based programs, such as those approved by CASEL. Because of this, it seems imperative to devise a way for principals to learn about and access CASEL programs. If NYS elementary school principals were to regularly consult the CASEL guides, they'd be more apt to be selecting SEL programs with a strong research support (since all CASEL programs have a strong evidence base) even if that is not their most important characteristic.

Influence of Demographics on Familiarity and Use of CASEL Programs

In addition to evaluating the nature of NYS elementary school principals' participation in SEL decision-making descriptively, it is important to also understand how demographic differences among principals relate to their familiarity and use of CASEL approved SEL programs. Unfortunately, the results of this study indicated that the principals' familiarity and use of CASEL approved programs was not related to their schools' geographic density (i.e., urban, suburban, or rural), nor the individual characteristics of highest academic degree, presence of a degree in a mental health field, or number of years served as principal. This suggests that principals' familiarity and use of CASEL programs were more heavily impacted by other factors, which may or may not be related to the individual principals' demographic characteristics. For example, it may be the case that personal interest in SEL more heavily influences familiarity and use of CASEL programs. In contrast, it could also be the case that other school factors, such as board of education priorities, are stronger predictors of principals' familiarity and use of programs. This would relate to one of Gay's (2016) barriers to PBIS program implementation, weakness in program leadership. When administrators were not committed to implementation and motivation, implementation integrity and teacher buy-in was low. Related to this study, if superintendents and boards of education are not in support of SEL programs, or do not feel there is a particular need within their district, principals may not bother to learn about SEL programs at all.

However, upon review of principals' current use scores, seven outliers with data that did not seem probable were identified. Given the assumption that these participants inaccurately completed at least this portion of the survey and removal of these participants would result in a decrease of less than 5% of the sample, their data was removed and analyses were run again. Upon reanalysis, results indicated that geographic density highest academic degree, and

number of years as principal remained not significantly related to familiarity and use scores. Presence of a mental health degree, however, was positively related to familiarity, past use, and current use scores for the sample without outliers. This suggests that the principals who had a mental health background (e.g., school counseling, psychology, social work, etc.) were more familiar and had used more programs (in the past and presently) than the principals who did not earn a graduate degree in a mental health field. Since mental health professionals are generally more concerned about social and emotional issues than academic ones, this finding seems like a logical result. This also implies that principals with mental health backgrounds may be unique in their prioritization of needs and programs within a school. In this case, they have a stronger knowledge base regarding CASEL approved programs, which in turn led to higher use of programs in their past and current school settings. Further assessment of this population of principals is warranted to fully investigate what contributed to their higher familiarity and use of CASEL approved SEL programs. Additionally, it would be interesting to see if principals with mental health degree backgrounds were more similar to their mental health professional colleagues (e.g., school psychologist, school counselor, school social worker) than their teacher or administrator colleagues. In assessing all school professionals that could serve on SEL decision-making teams, these comparisons could be conducted in the future.

Limitations

While the present study yielded interesting findings, there are some noteworthy limitations, as well. The limitations can be categorized in three ways: (1) sample flaws, (2) limited selection criteria, and (3) research design.

Sample. One such limitation is that the sample was imperfect in a few distinct ways. First, this study analyzed only NYS elementary school principals, rather than assessing principals

from across the United States. Thus, findings may not generalize to states where there are explicitly mandated SEL standards or more resources available.

Additionally, while all NYS elementary public school principals were recruited to participate, only 6.4% responded, suggesting that the findings should be interpreted with caution when generalizing to all NYS principals. This response rate is much lower than what is generally preferred but was large enough to have the power needed for analyses. Regardless, it may be the case that there is something unique about this small subset of principals which led them to participate and therefore, these individuals may not represent the entire population of NYS elementary school principals. Furthermore, the sample of participants in this study included only principals at the elementary school level and thus, comparisons to principals serving higher grade levels was not possible.

Due to the low response rate, there was also a very limited selection of participants who had earned degrees in mental health fields. This is surprising due to anecdotal data which led the researcher to believe there would be a larger population of principals who had mental health backgrounds. Within this sample, it is unknown whether the sample was not representative of the population or whether there are in fact very few principals with degrees in mental health fields.

Selection of participants and programs. In an attempt to expand upon McKevitt's (2012) research, this study purposefully included principals who, like school psychologists, were expected to commonly participate in SEL decision-making bodies. SEL decision-making teams, however, generally include several professionals from a school setting (NYS Education Department, 2008), many of which have yet to be investigated. While McKevitt (2012) evaluated school psychologists and this study assessed principals, it is important to assess other

decision-making bodies. Without assessing all members, it is not possible to evaluate the full extent of SEL decision-making teams' familiarity and use of CASEL approved programs.

While purposeful, because CASEL approved programs have rigorous standards for effectiveness, the inclusion of only CASEL approved programs could also serve as a limitation in this study. Specifically, a lack of familiarity and use of the 23 CASEL SElect programs does not necessarily mean that NYS elementary school principals have a lack of familiarity and use of *all* SEL programs. It may be the case, that those that were not familiar with the CASEL approved programs were in fact implementing other SEL programs that have not been evaluated by CASEL or did not meet CASEL's inclusion criteria. As a result, it is not clear whether the findings in this study imply a lack of program implementation all together or the use of programs that may or may not have as much empirical support as is required by CASEL's rigorous standards.

Survey Design. In addition to the sample and selection criteria limitations, another limitation stems from the nature of the electronic survey design. During analysis, it became apparent that a few participants may not have accurately read the instructions or that the instructions were unclear. Pilot testing was conducted to ensure clarity, but perhaps the directions were not as explicit as necessary. As a result, for one section of the survey, a few respondents' answers seemed highly unlikely. This is problematic because it is unknown whether their responses were correct in other sections of the survey or if other individuals made similar mistakes in ways that were not as obvious when reviewing the data.

Additionally, the goal of the research study was explicitly provided to participants; they were aware that their familiarity and use of SEL programs was being evaluated. Given such knowledge, respondents may not have felt comfortable sharing honest responses that could

indicate a lack of professional knowledge. By ensuring confidentiality, there was an attempt to limit this type of responding, but it is possible that participants remained concerned about presenting themselves in an unfavorable way. This could have been another reason for the outliers mentioned above, as well as the low response rate. However, it is not known whether accurate responding was or was not a factor that impacted the present findings.

Implications and Future Research

Prior researchers have indicated that there is substantial pressure for schools to address SEL competencies by delivering SEL programs (Elias et al., 1997; Greenberg et al., 2003). CASEL (2012) has identified 23 SEL programs and Durlak et al.'s (2011) meta-analysis shows that there are several positive outcomes of using such programs. Similar to McKeivitt's (2012) research with school psychologists, the present findings indicate that NYS elementary school principals also lack familiarity and use of SEL programs. Additionally, most of the surveyed principals rely on colleagues or past experience when learning about SEL programs, indicating that they generally utilize anecdotal evidence rather than empirical data.

The primary implication of these findings is that NYS elementary school principals seem to require support for selecting and implementing school-wide SEL programs. With regard to selection of programs, marketing strategies would best be received if disseminated and made available through multiple modalities. The principals in the present study used various methods for obtaining information about SEL programs, some of which may naturally exclude particular types of programs. For example, an empirically-based program may not be regularly promoted in a nonacademic magazine or newsletter. Thus, including CASEL-approved programs in such resources would be valuable. Additionally, the assessment of strategy use among other members of SEL decision-making teams, such as teachers, could provide more insight regarding where

resources could be allocated for marketing and professional development. It may be the case that other SEL team participants who have yet to be surveyed consult different types of resources more often than their administrative colleagues.

Additionally, dissemination of SEL program resources to all school personnel appears warranted. In this study, many of the NYS elementary school principals relied on their colleagues during the SEL decision-making process. To ensure that all participating colleagues on SEL decision-making teams are knowledgeable of research supported programs, they too must have familiarity with said programs. Professional development opportunities for learning about CASEL approved programs and resources would be highly beneficial for all parties. Prior to doing so, however, the future research identified previously is necessary. It would be advantageous to determine what other team members know prior to investing resources into training.

Regardless of decision-making teams' awareness of SEL programs, professional development trainings could also address the barriers to PBIS implementation that were identified in Gay's (2016) interviews with teachers, PBIS coaches, and administrators. It seems particularly important for principals to recognize that when implementing programs, barriers come in the following forms: 1) confusion about priorities of initiatives and tasks among teachers, 2) negative student motivation and participation, 3) philosophical differences with the program where some believe program components should be the responsibility of families, 4) peer influence such that buy-in decreased when colleagues disliked the program, 5) memory failure that prevented compliance with program requirements, 6) weakness in program leadership in the form of lack of administrator commitment and supervision, and limited professional development. After sharing the types of barriers, principals can then determine what barriers are

most likely to occur in their own schools and possibly prevent them. Further, principals will have more awareness of problems that could arise during implementation. Future researchers could also explore large samples of schools in a longitudinal approach to investigate risk factors for particular barriers. For example, it may be the case that peer influence is more problematic when implementing SEL programs in smaller school districts where faculty and staff may have multiple job responsibilities to fill already.

In addition to the results of this study, along with the compilation of the research embedded in this manuscript, principals may also reference the National Implementation Research Network's (NIRN) stages of implementation that are cross-disciplinary and apply to a broad spectrum of program types (Fixsen, Naoom, Blase, Friedman, & Wallace, 2005) as a means for implementing new programs in schools. Additionally, it is the author's recommendation that due to lack of familiarity and use of CASEL approved programs, principals could consider the following seven stage process. First, principals must convene a team and determine roles and responsibilities, as well as define the problem (e.g., no SEL program in school). Second, principals must investigate the current practices occurring within the building that are addressing this problem, which may include use of resources from the NYS-PBIS-TAC (2011). They should also identify the various resources (both in and out of the building) that can be used to address the problem (e.g., CASEL, mental health services). Third, faculty and staff need to be educated on the CASEL competencies surrounding SEL and developmentally appropriate standards per grade level need to be created. It is recommended that principals and decision-making teams refer to state standards, such as those in Illinois (Illinois State Board of Education, 2018) and incorporate these into their curriculum. Fourth, principals should request that faculty and staff reflect on these standards quarterly and indicate children's progression

through the standards; evaluation can be tracked and shared with parents on their report cards. This data can then serve as a baseline measure for schools while simultaneously serving indirectly serving as instruction for caregivers regarding SEL and standards. Fifth, after reviewing data, decision-making teams could explore and select a SEL program that specifically targets competencies that are deemed lacking within the district while keeping in mind training requirements, cost, time, research support, and previous program success. Sixth, counselors within the building can be utilized to create designated group options that will aim to provide additional instruction surrounding the CASEL competencies to those individuals not responding to the school-wide program efficiently. This can also serve as a way of ensuring that the new amendments to Part 100.2(j) (New York State School Counselor Association, 2017) are being met. Finally, in addition to the information on the report cards, the principal and colleagues could determine ways to educate and collaborate with community and families surrounding additional ways to promote competencies within the household as well as determine whether or not the skills students are acquiring are translating to out-of-school responsibilities. It is expected that use of such a program, in combination with professional development and addressing barriers of implementation would greatly improve principals' decision-making, as well as their familiarity and use of SEL programs, including those approved by CASEL. Of course, continued assessment of this process through future research would be beneficial for dissemination of how this process worked.

An additional recommendation for future research is to utilize the findings of this study as a baseline measure for a longitudinal study. As advancements in the field of SEL learning, including the development of new mandates continue to occur, it is suspected that the familiarity and use of CASEL approved programs will improve over time. This is particularly true for NYS,

given the recent amendments made to Education Law 804 regarding health education (New York State Education Department, 2018) and NYSED Commissioner's Regulation Part 100.2(j) (New York State School Counselor Association, 2017). Within these amendments, the use of CASEL approved SEL programs could be utilized to meet the new standards. Thus, a longitudinal study that further explored potential growth in knowledge of CASEL programs would be interesting.

Additionally, given the new mandates in NYS, it would be interesting to assess the decision-making practices, as well as familiarity and use of CASEL programs in a national sample. It is suspected that in states where mandates for SEL programming have been long-established, principals would have more familiarity and use of the 23 CASEL SElect programs than principals from states without mandates or those like NYS where mandates related closely to SEL competencies have been recently implemented. Future research would be necessary to confirm this hypothesis.

In future state-level or national studies, researchers could also ask participants to identify any non-CASEL approved programs that they are familiar with, have used in the past, or are currently using in an open-ended format. Doing so would better describe the state of SEL program familiarity and use among elementary school principals, and could be connected back to state differences based upon the presences of SEL mandates. This line of research would also be beneficial in further evaluating the importance of research support held by elementary school principals. For example, it may be the case that there is a relationship between lower importance rankings for programs' research support and the use of non-CASEL approved SEL programs.

Conclusion

Overall, the results of this study indicate that NYS elementary school principals have a limited awareness of the 23 CASEL approved programs. Furthermore, past and current use of

most of these programs is also limited. This is unfortunate given the fact that the CASEL SElect programs could be used as a means for complying with the recent mandates requiring comprehensive mental health literacy and counseling curriculums in schools (New York State Education Department, 2018; New York State School Counselors Association, 2017). In connection with mental health literacy, after accounting for outliers, this study also implied that principals with degrees in mental health-related fields had higher levels of familiarity and use of CASEL approved programs. This suggests that training programs for future principals could consider expanding upon the importance of SEL in schools. While this would benefit future principals, for current principals, varied methods of dissemination of information about CASEL approved programs is warranted. This is particularly true since the participants in this study used a variety of strategies for learning about and selecting SEL programs, but still requested more information from the primary researcher about CASEL programs and SEL standards in other states after completion of the study. Given the fact that new mandates surrounding SEL and mental health continue to be created, it appears as though principals' responsibilities to oversee implementation of initiatives is only going to become greater. Therefore, continued professional development on the most effective and efficient ways to carry out these responsibilities is suggested and will hopefully lead to early identification and interventions for students with SEL deficits. In summary, the next steps for research and development of principals' familiarity and use of CASEL approved programs includes: (1) increased dissemination of information regarding SEL programs in various modalities, (2) additional training opportunities regarding programs, and (3) the development of specific SEL standards at the state and possibly school district level.

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Table 1

Participants' Schools Demographics

Characteristic	Frequency <i>N=172</i>	Percent
Region		
NYC	45	26.2
Long Island	22	12.8
Finger Lakes	19	11
Western	16	9.3
Capital District	15	8.7
Hudson Valley	14	8.1
Central	12	7.0
Southern Tier	11	6.4
Mohawk Valley	9	5.2
North Country	9	5.2
Geographic Density		
Urban	63	36.6
Suburban	59	34.3
Rural	50	29.1
Number of School Buildings		
One	161	93.6
Two	9	5.2
More than two	2	1.2

Table 1 Continued

Participants' Schools Demographics

Characteristic	Frequency	Percent
	<i>N=172</i>	
<i>Grades served</i>		
Pre-Kindergarten	90	52.3
Kindergarten	155	90.1
First	161	93.6
Second	159	92.4
Third	157	91.3
Fourth	154	89.5
Fifth	138	80.2
Sixth	49	28.5
Seventh	18	10.5
Eighth	18	10.5
Ninth	5	2.9
Tenth	5	2.9
Eleventh	5	2.9
Twelfth	5	2.9

Table 2

Participant Demographics

Characteristic	Frequency	Percent
<hr/>		
Gender (N=172)		
Female	123	71.5
Male	48	27.9
Prefer not to say	1	0.6
Race/Ethnicity (N=172)		
White	134	77.9
Black/African American	22	12.8
Hispanic	13	7.6
Asian	1	0.6
Native Hawaiian/Other Pacific Islander	1	0.6
Highest Degree (N=171)		
Masters	86	50.0
Specialist	47	27.3
Doctoral	38	22.1
Mental Health Degree (N=172)	14	8.1

Table 3

Familiarity, Past Use, and Current Use of CASEL Approved Programs Descriptives

Program	Familiarity		Past Use		Current Use	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Al's Pals	.176	.429	.040	.185	.010	.108
Caring School Community	.330	.539	.080	.267	.020	.152
Competent Kids, Caring Communities	.290	.538	.060	.236	.030	.169
High Scope Educational Approach for Preschool	.190	.472	.050	.212	.000	.000
I Can Problem Solve	.150	.385	.030	.169	.020	.132
The Incredible Years Series	.100	.353	.030	.169	.020	.152
Michigan Model for Health	.130	.427	.050	.212	.030	.169
Mind-Up	.300	.540	.080	.276	.060	.246
Open Circle	.210	.486	.060	.247	.030	.169
PATHS	.510	.635	.150	.362	.080	.275
Peace Works	.330	.573	.060	.247	.030	.169

Table 3 Continued

Familiarity, Past Use, and Current Use of CASEL Approved Programs Descriptives

Program	Familiarity		Past Use		Current Use	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Positive Action	.170	.424	.040	.199	.040	.185
4 Rs	.450	.669	.140	.350	.090	.292
Raising Healthy Children	.300	.497	.040	.199	.010	.108
Resolving Conflict Creatively	.270	.542	.080	.276	.030	.169
Responsive Classroom	1.40	.645	.560	.498	.350	.477
Ruler Approach	.350	.654	.120	.323	.060	.235
Second Step	.960	.901	.400	.492	.350	.477
Social Decision Making/ Problem Solving Program	.310	.576	.090	.293	.050	.224
Steps to Respect	.240	.517	.080	.267	.030	.169
Too Good for Violence	.250	.584	.080	.267	.070	.256
Tools of the Mind	.120	.378	.040	.199	.040	.185
Tribes Learning Communities	.240	.494	.030	.169	.020	.132

Table 4

Familiarity, Past Use, and Current Use of CASEL Approved Programs Frequencies

Program	Not	Familiarity		Past Use		Current Use	
		Some N (%)	Very	No N (%)	Yes	No N (%)	Yes
Al's Pals	148 (86.0)	20 (11.6)	4 (2.3)	164 (95.3)	6 (3.5)	169 (98.3)	2 (1.2)
Caring School Community	122 (70.9)	44 (25.6)	6 (3.5)	157 (91.3)	13 (7.6)	167 (97.1)	4 (2.3)
Competent Kids, Caring Communities	129 (75.0)	36 (20.9)	7 (4.1)	160 (93.0)	10 (5.8)	166 (96.5)	5 (2.9)
High Scope Educational Approach for Preschool	146 (84.9)	20 (11.6)	6 (3.5)	162 (94.2)	8 (4.7)	171 (99.4)	1 (0.6)
I Can Problem Solve	149 (86.6)	21 (12.2)	2 (1.2)	165 (95.9)	5 (2.9)	168 (97.7)	3 (1.7)
The Incredible Years Series	158 (91.9)	11 (6.4)	3 (1.7)	165 (95.9)	5 (2.9)	167 (97.1)	4 (2.3)
Michigan Model for Health	156 (90.7)	10 (5.8)	6 (3.5)	162 (94.2)	8 (4.7)	166 (96.5)	5 (2.9)
Mind-Up	128 (74.4)	37 (12.5)	7 (4.1)	156 (90.7)	14 (8.1)	160 (93.0)	11 (6.4)
Open Circle	142 (82.6)	24 (14.0)	6 (3.5)	159 (92.4)	11 (6.4)	166 (96.5)	5 (2.9)
PATHS	97 (56.4)	62 (36.0)	13 (7.6)	143 (83.1)	26 (15.1)	157 (91.3)	14 (8.1)
Peace Works	124 (72.1)	39 (22.7)	9 (5.2)	159 (92.4)	11 (6.4)	166 (96.5)	5 (2.9)

Table 4 Continued

Familiarity, Past Use, and Current Use of CASEL Approved Programs Frequencies

Program	Not	Familiarity		Past Use		Current Use	
		Some N (%)	Very	No N (%)	Yes	No N (%)	Yes
Positive Action	145 (84.3)	24 (14.0)	3 (1.7)	163 (94.8)	7 (4.1)	165 (95.9)	6 (3.5)
4 Rs	112 (65.1)	43 (25.0)	17 (9.9)	145 (84.3)	24 (14.0)	155 (91.1)	16 (9.3)
Raising Healthy Children	123 (71.5)	46 (26.7)	3 (1.7)	163 (94.8)	7 (4.1)	168 (97.7)	2 (1.2)
Resolving Conflict Creatively	133 (77.3)	31 (18.0)	8 (4.7)	155 (90.1)	14 (8.1)	166 (96.5)	5 (2.9)
Responsive Classroom	15 (8.7)	74 (43.0)	83 (48.3)	75 (43.6)	95 (55.2)	112 (65.1)	59 (34.3)
Ruler Approach	129 (75.0)	26 (15.1)	17 (9.9)	150 (87.2)	20 (11.6)	161 (93.6)	10 (5.8)
Second Step	73 (42.4)	33 (19.2)	66 (38.4)	101 (58.7)	68 (39.5)	111 (64.5)	59 (34.3)
Social Decision Making/ Problem Solving Program	129 (75.0)	33 (19.2)	10 (5.8)	154 (89.5)	16 (9.3)	162 (94.2)	9 (5.2)
Steps to Respect	137 (79.7)	28 (16.3)	7 (4.1)	157 (91.3)	13 (7.6)	166 (96.5)	5 (2.9)
Too Good for Violence	142 (82.6)	17 (9.9)	13 (7.6)	156 (90.7)	13 (7.6)	159 (92.4)	12 (7.0)

Table 4 Continued

Familiarity, Past Use, and Current Use of CASEL Approved Programs Frequencies

Program	Not	<u>Familiarity</u>		<u>Past Use</u>		<u>Current Use</u>	
		Some N (%)	Very	No	Yes	No	Yes
Tools of the Mind	154 (89.5)	15 (8.7)	3 (1.7)	163 (94.8)	7 (4.1)	165 (95.9)	6 (3.5)
Tribes Learning Communities	135 (78.5)	32 (18.6)	5 (2.9)	165 (95.9)	5 (2.9)	168 (97.7)	3 (1.7)

Table 5

Selection Procedures used by Principals

Selection Procedure	<i>M</i>	<i>SD</i>	Never	Sometimes	Often	Always
			N (%)			
Rely on Graduate Training	.800	.764	67 (39.0)	77 (44.8)	24 (14.0)	4 (2.3)
Consult Magazines/Newsletter (non-academic)	.900	.693	48 (27.9)	97 (56.4)	24 (14.0)	3 (1.7)
Rely on BOCES PD	.970	.674	39 (22.7)	103 (59.9)	27 (15.7)	3 (1.1)
Rely on non-BOCES PD	1.06	.704	29 (16.9)	110 (64.0)	24 (14.0)	8 (4.7)
Consult Internet	1.26	.661	11 (6.4)	116 (67.4)	35 (20.3)	10 (5.8)
Consult Research Articles (academic journals)	1.31	.670	13 (7.6)	100 (58.1)	52 (30.2)	7 (4.1)
Consult Books	1.38	.729	11 (6.4)	98 (57.0)	48 (27.9)	14 (8.1)
Review Original Publication of Recommended Programs	1.44	.832	18 (10.5)	80 (46.5)	54 (31.4)	20 (11.6)
Rely on Colleagues/Supervisors	1.62	.720	5 (2.9)	75 (43.6)	73 (43.4)	19 (11.0)
Rely on Past Experience	1.67	.757	4 (2.3)	75 (43.6)	67 (39.0)	26 (15.1)

Table 6

Professional Organizations Principals Use

Organization	Frequency	Percent
	<i>N=172</i>	

NYSED	110	64.0
NYS PBIS TAC	67	39.0
Intervention Central	59	34.3
CASEL	35	20.3
What Works Clearinghouse	31	18.0
No Organizations Used	24	14.0
CSEFEL	12	7.0
OSEP	9	5.2
National Wraparound Initiative	2	1.2

Table 7

Importance and Ranking of SEL Decision Making Characteristics Frequencies and Descriptives

Characteristic	<i>M</i>	<i>SD</i>	Not	Some	Very
				N (%)	
Colleague Past Success	1.42	.622	12 (7.0)	75 (43.6)	84 (48.8)
Overall Cost	1.47	.556	5 (2.9)	81 (47.1)	85 (49.4)
Training Required	1.61	.500	1 (0.6)	64 (37.2)	106 (61.6)
Implement Time	1.65	.490	1 (0.6)	57 (33.1)	112 (65.1)
Research Support	1.80	.425	2 (1.2)	29 (16.9)	139 (80.8)

Table 8

Importance and Ranking of SEL Decision Making Characteristics Ranking

	1	2	3	4	5
Characteristic	N (%)				
Research Support	51 (29.7)	10 (5.8)	16 (9.3)	17 (9.9)	61 (35.5)
Overall Cost	19 (11.0)	43 (25.0)	36 (20.9)	38 (22.1)	28 (16.3)
Implement Time	12 (7.0)	36 (20.9)	61 (35.5)	36 (20.9)	9 (5.2)
Training Required	23 (13.4)	40 (23.3)	41 (23.8)	45 (26.2)	18 (10.5)
Colleague Past Success	48 (27.9)	29 (16.9)	9 (5.2)	30 (17.4)	52 (30.2)

Table 9

Regression Analysis Results for Total Sample

DV	β	t	p
Familiarity ($N=162$)			
Geographic Density	.111	1.403	.163
Type of Degree	.028	.359	.720
MH Degree	.138	1.738	.084
Number of Years	-.022	-.273	.785
Past Use ($N=156$)			
Geographic Density	.025	.310	.757
Type of Degree	.085	1.044	.298
MH Degree	.088	1.074	.285
Number of Years	.007	.087	.931
Current Use ($N=159$)			
Geographic Density	.078	.976	.331
Type of Degree	.105	1.306	.194
MH Degree	.047	.589	.557
Number of Years	-.055	-.689	.492

Table 10

Regression Analysis Results without Outliers

DV	β	t	p
Familiarity ($N=155$)			
Geographic Density	.041	.513	.609
Type of Degree	-.042	-.521	.603
MH Degree	.204	2.529	.012*
Number of Years	-.019	-.231	.818
Past Use ($N =150$)			
Geographic Density	-.066	-.798	.426
Type of Degree	.027	.323	.747
MH Degree	.183	2.225	.028*
Number of Years	.025	.299	.765
Current Use ($N=152$)			
Geographic Density	-.078	-.965	.336
Type of Degree	-.010	-.129	.897
MH Degree	.208	2.570	.011*
Number of Years	-.097	-1.200	.232

Note. * indicates significant finding

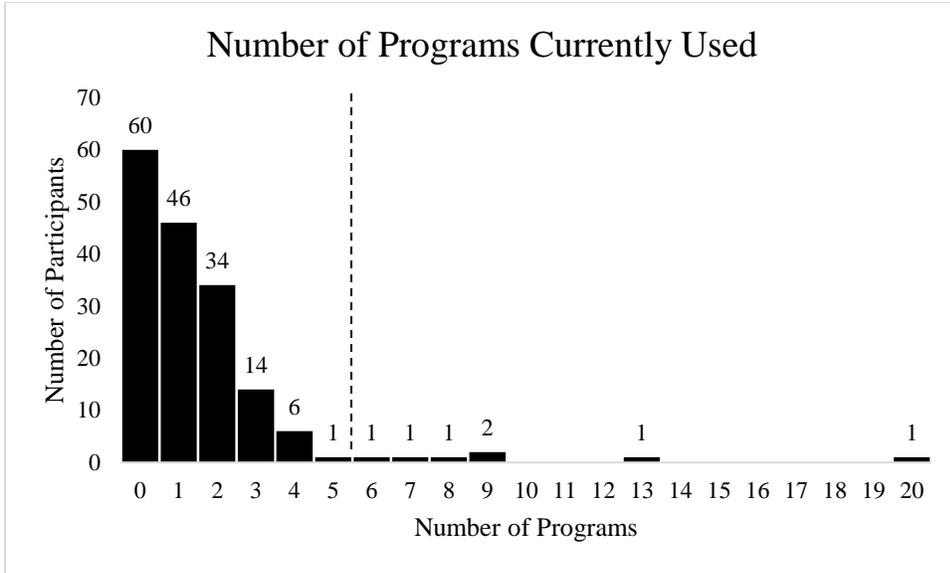


Figure 1. Frequency histogram of the number of participants who endorsed currently using between 0 and 20 CASEL approved programs.

*Appendix A***Timeline of SEL Regulations**

Year (Regulating Body)	Regulation Name	Regulation Purpose
1965 (Federal)	Elementary and Secondary Education Act (ESEA)	-Equal access to quality education -Funding for professional development, instructional materials, resources for programs, and promoting parent involvement
1999 (NYS)	Safe Schools Against Violence in Education (SAVE) Act	-Develop plans for dealing with threatening situations in schools
2002 (Federal)	No Child Left Behind (NCLB)	-Result of amendments and reauthorizations of ESEA -Achievement accountability -Funding for collaboration between schools and mental health agencies
2004 (Federal)	Individuals with Disabilities Education Act (IDEA) Amendment	-Serves students with disabilities in schools -Acknowledges need and authorizes states to provide funding for PBIS
2006 (NYS)	Children's Mental Health Act	-Required collaboration between NYS DOE and Office of Mental Health -Develop guidelines to foster social and emotional development
2008 (NYS)	Children's Mental Health Plan	-Provide funding for resources and facilitation of new partnerships to increase social and emotional skills
2009 (Federal)	Academic, Social, and Emotional Learning Act of 2009*	-Suggested authorization of grant funds to establish a National Technical and Training Center for Social-Emotional Learning and develop state SEL standards
2011 (NYS)	New York State Positive Behavioral Intervention Supports Technical Assistance Center (NYS-PBIS-TAC) ⁺	-Train technical assistance providers -Evaluate PBIS effectiveness -Disseminate PBIS research -Create PBIS curriculum -Provide professional development
2011 (NYS)	NYS Education Department Guidelines for educating whole child	-Provide instruction and academic environment that is safe and engaging for students socially, emotionally, and academically
2011 (Federal)	Academic, Social, and Emotional Learning Act of 2011*	-Identified need for training regarding SEL to improve academic and behavioral growth in students
2013 (NYS)	S. 2420 *	-Mandatory implementation of NYS Education Department SEL guidelines

2013 (NYS)	Dignity for All Students Act (DASA)	-Provide students with discrimination- and harassment-free academic environments
2013; 2015 (Federal)	Academic, Social, and Emotional Learning Act of 2013; 2015*	-Created SEL definitions -Identified SEL competencies and structures for effective implementation
2015 (Federal)	Every Student Succeeds Act (ESSA)	-Result of reauthorization of NCLB -College and career readiness standards -Design programs to support all areas of learning and development, including SEL
2017 (Federal)	Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS TAC) +	-Develop, implement, and evaluate multi-tiered approach to PBIS
2017 (NYS)	Amendment to Part 100.2(j)	- School counselors are responsible for developing and instructing a counseling plan for all students (k-12) which includes social-emotional competencies and curriculum
2018 (NYS)	Amendment to Education Law 804	- Incorporate mental health education literacy into health education curricula in elementary and secondary schools

Note. * = bills that have yet to be passed by Congress; + = outcome of regulation, not regulation itself

Appendix B

NYS-PBIS-TAC Survey Titles

Early Childhood Evaluation Tools

Early Childhood Benchmarks of Quality (EC BoQ)
Early Childhood System-wide Evaluation Tool: Program-wide (EC SET-PW)
Early Childhood Self-Assessment Survey (EC SAS)

Tier 1 Evaluation Tools

Benchmarks of Quality (BoQ)
Data Audit Tool (DAT)
Multi-Tiered Action Plan (MAP)
PBS Implementation Checklist (PIC)
Phases of Implementation (PoI)
School Safety Survey (SSS)
Self Assessment Survey (SAS)

Tier 2 & Tier 3 Evaluation Tools

Benchmarks for Advanced Tiers (BAT)
Checklist for Individual Student Systems (CISS)
Monitoring Advanced Tiers Tool (MATT)
System Response Tool (SRT)

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Appendix C

The Collaborative for Academic Social-Emotional Learning (CASEL) Program Descriptions

The 4Rs program (Reading, Writing, Respect, and Resolution)

Provides read-alouds, book talks, and sequential, interactive skills lessons to develop social and emotional skills related to understanding and managing feelings, listening and developing empathy, being assertive, solving conflict creatively and nonviolently, honoring diversity, and standing up to teasing and bullying. 4Rs is a grade-specific program available for students in prekindergarten through eighth grade. Divided into seven units, each grade has approximately 35 Lessons — one a week throughout the year. Units also include extension activities, infusion ideas, recommendations of other books, and 4Rs Activity Sheets to reinforce students' understanding. The 4Rs program reinforces skills and concepts covered in each unit with a family Connection activity that students take home to complete with their caregivers and 4Rs "family Connections" parent workshops. Peer mediation and peace Helper programs are also available to support classroom- and school-wide programming. All 4Rs stories incorporate a variety of cultures, ethnicities, and backgrounds. Initial training for the 4Rs program typically lasts 25-30 hours and is required. 4Rs offers a train-the-trainer system to support sustainability.

Al's pals

Promotes resiliency in early childhood with explicit instruction to develop social competence, autonomy, and problem solving. Al's pals is designed for use with children three to eight years old. It includes 46 core lessons and 9 booster lessons. Each lesson lasts approximately 10-15 minutes, with two lessons implemented per week. Children learn to get along with others, use self-control, accept differences, resolve conflicts peacefully, cope, and make healthy choices. Al's pal's lessons incorporate SEL concepts into academic content areas typically taught in early childhood including numeracy, literacy, and the scientific method. Teachers learn ways to establish an accepting, caring, cooperative classroom environment that fosters children's positive social-emotional growth and development. In addition, the program offers extensive suggestions and materials for generalizing and practicing new skills in class beyond the lesson. Letters to parents, to be sent home after select lessons, are also designed to reinforce new skills. Al's pals provides brief. Suggestions for adapting the lessons based on different cultures represented in the classroom. Initial training for Al's pals is either done in-person (two days) or online (seven two-hour sessions). Training is required, and Al's pals offers a train-the-trainer system to support sustainability.

Caring School Community

A program designed for use in kindergarten through sixth grade, is organized around four core educational practices: Class Meetings (30-35 per grade), Cross-Age Buddies, Home side Activities, and Schoolwide Community-Building Activities. Class Meetings present a schedule of lessons and activities to be implemented throughout the school year. Forty Cross-Age Buddies activities promote bonding between pairs of older and younger students while at the same time supporting exploration of a wide range of academic subjects. Home side Activities are implemented once or twice a month. These are first reviewed in class, then completed at home with caregivers, and then reflected upon and concluded in class. Schoolwide Community-Building Activities are implemented throughout the school year to build relationships, share

knowledge, and promote pride in the school environment. Caring School Community offers suggestions to support English Language Learners, and Home side Activities are available in English and Spanish. Initial training for the Caring School Community program typically lasts half a day to two full days and is not required. Caring School Community offers a train-the-trainer system to support sustainability.

Competent Kids, Caring Communities

Designed to promote important life skills in students through an average of 35 separate sets of lessons for each year for kindergarten through fifth grade. Lessons follow a common structure, including an introduction to each that provides teachers with a research-based rationale. Opening questions are designed to motivate students and focus their attention. In addition to the classroom activities, one component promotes family-school collaboration, including sessions for families designed to be led by school or district leaders. Family sessions provide information on the social and emotional competencies the program is designed to promote. They focus on developing shared understanding and goals, joint decision making between schools and families, and positive school climate. The family-school collaboration component also includes activities to support new skills and concepts at home. Initial training for Competent Kids, Caring Communities typically lasts one to three days and is required. The program also offers a train-the-trainer system to support sustainability.

High Scope Educational Approach for Preschool

A comprehensive system of teaching practices and educational structures designed to enhance the learning environment and to support developmentally appropriate instruction in prekindergarten. The curriculum fully integrates academic, social, and emotional learning as part of the five dimensions of school readiness identified by the national Education goals Panel: approaches to learning; language, literacy, and communication; social and emotional development; physical development, health, and well-being; and arts and sciences. The High Scope approach emphasizes active participatory learning, positive adult-child interactions, an optimal learning environment, regular routines, and assessment. The daily routine established by the program incorporates a “plan, do, review” cycle that supports independent learning and assessment and includes both small- and large-group activities. The program encourages teachers to learn about students’ families by making a home visit prior to the child’s first day, as well as by incorporating home-based materials and activities. High Scope provides extensive strategies, suggestions, and professional development around supporting English Language Learners and working with a diverse population of students and families from various cultural and ethnic backgrounds. Initial training for High Scope varies from 2 to 20 days long, depending on needs and resources. Training is not required, and High Scope offers a train-the-trainer system to support sustainability.

The I Can problem Solve program

Teaches students how to generate alternative solutions, anticipate consequences, and effectively solve problems. It is designed for use in prekindergarten through the elementary grades and is divided into three sets of lessons for prekindergarten (59 lessons), kindergarten and primary grades (83 lessons), and intermediate elementary grades (77 lessons). The scripted lessons take approximately 20 minutes to implement and focus on both pre-problem-solving skills and problem-solving skills. Instruction introduces central concepts, which is then followed by

explicit skill instruction in social and emotional competencies. Dialoging is a central component of this program. Beyond the lesson, teachers are encouraged to infuse program methods to support positive student-teacher interaction into their regular classroom routine. To reinforce most lessons, the program provides parent pages as well as suggested strategies for connecting with core academic subject areas. Initial training for the I Can problem Solve program typically lasts one to two days and is required. I Can problem Solve offers a train-the-trainer system to support sustainability.

The Incredible Years Series

A set of three curricula for children, teachers, and parents. The Child training program (dinosaur Curriculum) focuses on developing skills to understand and recognize feelings, solve problems, manage anger, and develop and maintain friendships. The program is designed for use with children ages three to eight years old and includes approximately 60 lessons, dependent upon implementation, as the program provides multiple models for implementing in the classroom. Content is presented through puppetry or video vignettes followed by group discussion. Several activities reinforce the concepts learned and provide opportunities to practice skills. Each lesson ends with a homework activity that is completed at home with parents or caregivers, and several letters to parents are sent home during the course of the program as well. Parental involvement is strongly encouraged. Training for teachers focuses on developing classroom management skills and proactive teaching strategies. Training also emphasizes the importance of building positive relationships with students and teaching social skills and problem solving in the classroom. The Incredible Years Series also includes a separate training program specifically for parents. Initial training for the Incredible Years Child training program typically lasts 21 hours (three days) and is not required.

The Michigan Model for Health

Designed for use in kindergarten through twelfth grade, is the state health curriculum for Michigan. The program provides separate sets of lessons each year from kindergarten through sixth grade, with separate units to support health education topics including nutrition and physical activity; safety; alcohol, tobacco, and other drugs; personal health and wellness; and social and emotional health. The unit on social and emotional health includes 8-14 structured lessons each year that focus on making friends, identifying and understanding feelings, making decisions and solving problems, developing respect, and setting goals. Each consists of three parts: instruction, practice, and closure. Continued practice is encouraged, and most lessons provide strategies for infusing learned skills beyond the lesson. There are occasional take-home sheets and student assessments. Initial training for the Michigan Model for Health typically lasts one to two days. Training is offered and required in the state of Michigan and strongly encouraged in other states. Out-of-state training is dependent upon availability of trainers and support staff. The program offers a train the-trainer system to support sustainability.

The MindUp Program

Provides separate sets of lessons for three levels: prekindergarten through second grade; third through fifth grade; and sixth through eighth grade. Beginning after the third lesson, MindUp establishes core practices of deep breathing and attentive listening, which are then practiced several times a day throughout the school year. These practices are designed to enhance students' self-awareness, focus attention, promote self-regulation, and reduce stress. In addition there are

15 structured lessons at each level that span four units. Each lesson provides an explanation of how the content and objective of the lesson is supported by brain research. The lessons also include a “getting ready” activity, a MindUp warm-up, and detailed instructions to the teacher on how to engage students and support their exploration and reflection on the topic. In addition, there are suggestions for creating an “optimistic classroom.” throughout, the program works to promote generalization and support connections to academic instruction, and there are suggested lesson extensions to support social and emotional development, mathematics, physical education, health, science, literature, and journal writing. MindUp offers suggestions to support English Language Learners. Initial training for the MindUp program typically lasts one full day (seven hours), and regional and collaborative workshops last two to two and one-half days. Training is not required, and MindUp offers a train-the-trainer system to support sustainability.

The Open Circle Program

For use in kindergarten through fifth grade, is designed to equip teachers with effective practices for creating a cooperative classroom community and establishing positive relationships and effective approaches to problem solving within the classroom. The program has, on average, 34 structured lessons each year that cover relationship building and communication skills, understanding and managing emotions, and problem solving. Lessons begin with a review of the previous lesson, introduce new concepts, develop and practice new skills, provide homework/extension activities, and suggest connections to literature. Supplementary lessons are also provided to support each core lesson. The Open Circle program also has a separate unit on bullying, as well as separate components to support school-wide implementation and family involvement. Open Circle provides information on “Key Cultural factors” and “dimensions of difference and Similarity” to support implementation with diverse groups. The program provides frequent suggestions and reminders for teachers regarding cultural sensitivity and ethnic norms. Additional reading is recommended for teachers, and letters to parents/caregiver are available in English and Spanish. Initial training for the Open Circle program typically spans four seven-hour training days and also includes two two-hour on-site training sessions. Trainings are spread across the academic year and are required.

The Promoting Alternative Thinking Strategies (PATHS)

The program promotes peaceful conflict resolution, emotion regulation, empathy, and responsible decision making. PATHS is designed for use in prekindergarten through sixth grade, with separate sets of lessons for first through fourth grade and combined sets of lessons for use in preschool and kindergarten and in fifth and sixth grade. Each lesson is scripted, beginning with an introduction that states background and goals, implementation guidelines, suggestions for engaging parents, a list of common questions and answers, supplementary activities (some of which connect to academics), and/or family handouts. Each lesson ends with reminders and suggestions for generalizing learned skills beyond the lesson to the classroom. PATHS lessons incorporate a variety of cultures, ethnicities, and backgrounds. Parent letters and informational handouts are available in English and Spanish. Initial training for the PATHS program typically lasts two days and is not required. PATHS offers a train-the-trainer system to support sustainability.

Peace Works: Peacemaking Skills for Little Kids

Designed to promote conflict resolution skills with students in prekindergarten through second

grade. The implementation structure and number of activities varies by grade, with a range of 30-85 activities available. Scripted lessons and activities cover topics such as listening skills and cooperation, using “I-care language,” understanding and managing emotions, and taking responsibility. The program provides teachers with many strategies for infusing aspects of the program throughout the classroom and within core academic content areas. It also offers additional components for school-wide programs and partnering with families. Initial training for peace Works typically lasts five to six hours (up to 18 hours) and is not required. A train-the-trainer system to support sustainability is offered.

The Positive Action Program

Designed to promote a healthy self-concept and to establish positive actions for the body and mind. The program emphasizes effective self-management, social skills, character, and mental health, as well as skills for setting and achieving goals. The Positive Action classroom curriculum contains separate sets of lessons for use each year, from prekindergarten through twelfth grade. Each grade has approximately 140 sequenced lessons, all of which include a step-by-step script organized around a different theme. All content is based on a single fundamental philosophy: You feel good about yourself when you do positive actions (positive self-concept), and there is a positive way (positive actions) to do everything. Additional program components support classroom-wide, schoolwide, family, and community involvement. Positive Action offers separate units for bullying prevention, drug education, conflict resolution, and promoting a positive school climate that can each be added to the core program. Initial training for the Positive Action Program typically lasts one-half day to five days, dependent upon scope and sequence of implementation, and is not required. Positive Action offers a train-the-trainer system to support sustainability.

Raising Healthy Children

A school-wide approach designed for use with students in kindergarten through sixth grade, incorporates school, family, and individual programs to create a caring community of learners. The classroom component, Get-Alongs, includes eight classroom-based units with daily lessons and activities that span an eight-month period (approximately one unit per month). Academic integration strategies and recommended literature are also included. Teacher workshops on classroom management, instructional strategies, and social and emotional learning impact teacher practices in the classroom and throughout the school. School-wide implementation teams and ongoing coaching also facilitate this school-wide approach. Family involvement occurs through homework assignments that are part of the Get-Alongs units, family workshops, outreach, and other family activities. Initial training for Raising Healthy Children typically lasts one to three days and is required. Full implementation and training spans a three-year period. Raising Healthy Children offers a train-the-trainer system to support sustainability.

The Resolving Conflict Creatively Program

Includes sequenced, skill-building, classroom lessons (all titled Connected and Respected) designed to foster the creation of caring, peaceable school learning communities for prekindergarten through eighth grade. Lessons emphasize building relationships, understanding feelings, developing empathy, managing emotions, and developing social responsibility. The program offers 16 Connected and Respected lessons for each grade to be implemented in

workshop format. This facilitative approach includes a gathering, review of agenda, main activities and discussion, summary, and closing activities. Each lesson also includes suggestions for extension activities, infusion ideas, and connections to literature. In addition to the classroom lessons, the program includes a peer mediation and family component that are central to program implementation. A goal of the Resolving Conflict Creatively program is to address stereotyping and reduce racial/ethnic/gender put-downs in the classroom. A checklist is provided for each grade level to assist in addressing this. Initial training for the program typically lasts 24-30 hours and is required. The Resolving Conflict Creatively Program offers a train-the-trainer system to support sustainability.

The Responsive Classroom Approach

Designed to create classrooms that are responsive to children's physical, emotional, social, and intellectual needs through developmentally appropriate educational experiences in kindergarten through sixth grade. The approach incorporates ten essential teaching practices and practical strategies including morning meetings, rule creation, interactive modeling, positive teacher language, logical consequences, guided academic discovery, academic choice, classroom organization, collaborative problem solving, and guidelines for working with families. Teachers are encouraged to connect with parents individually on a regular basis in order to share updates and expectations about the child's development or to collaboratively address any difficulties the child may be experiencing. The Responsive Classroom approach incorporates many nonverbal signals (e.g., a chime or raised hand when students should pay attention) throughout the day. Extensive suggestions and strategies for including English Language Learners in morning meetings as well as recommendations for morning meeting activities that are especially conducive for ELLs are provided. Pamphlets on child development are available in Spanish, and the overview video has Spanish subtitles. Initial training for the Responsive Classroom Approach is conducted in two parts that each last four and one-half days (30 hours). Training is required, and a train-the-trainer system to support sustainability is offered.

The RULER Approach to Social and Emotional Learning

A school-wide approach designed for use in kindergarten through eighth grade to promote emotional literacy, which includes Recognizing, understanding, Labeling, Expressing, and Regulating emotions (the "rULER" skills). RULER implementation involves systematic professional development for the adults involved in the education of children (school leaders, teachers, support staff, and families) so that emotions become central to learning, teaching, and parenting. In the first year, teachers learn and then teach the "anchors" of emotional literacy: four tools that were designed to help both adults and students to develop their RULER skills, self- and social awareness, empathy, and perspective-taking ability, as well as to foster a healthy emotional climate. Subsequently teachers learn how to integrate the approach into their standard curriculum and experience The Feeling Words Curriculum, a language-based emotional literacy program for students. In addition, RULER has an interactive training program designed to provide adult family members with strategies for extending and promoting social and emotional development at home. Initial training for RULER typically lasts at least two days and is required. RULER offers a train-the-trainer system to support sustainability.

Second Step

Provides instruction in social and emotional learning with units on skills for learning, empathy,

emotion management, friendship skills, and problem solving. The program contains separate sets of lessons for use in prekindergarten through eighth grade implemented in 22 to 28 weeks each year. The Early Learning program in Second Step also includes a unit for transitioning to kindergarten. Second Step uses four key strategies to reinforce skill development: brain builder games (to build executive function), weekly theme activities, reinforcing activities, and home links. Teachers are encouraged to give children daily opportunities to practice. Second Step also connects new skills to other areas in the curriculum (e.g., literacy, arts, and dramatic arts) and provides a structure for each day of the week. The first day contains a script and main lesson. The second day includes a story and discussion. The third and fourth days involve practice activities in small and large groups. On the fifth day students read a book connected to the overall unit theme, and teachers send home a "Home Link" activity that gives students an opportunity to practice new skills with their caregivers. Second Step lessons and accompanying photographs incorporate a variety of cultures, ethnicities, and backgrounds. Home Link activities are available in English and Spanish. Initial training for Second Step typically lasts one to four hours and is not required.

The Social Decision Making/problem Solving Program

Covers approximately 30 topics each year designed to develop self-control, social awareness, and effective decision-making skills. The program contains separate sets of lessons each year for kindergarten through eighth grade. Sessions follow a structure that includes an introduction to the topic, modeling of the skill, opportunities for practice, reflection and discussion, and suggestions for practice beyond the structured lesson. Also included are tips for teachers to support effective pedagogy and instructional practices to promote social and emotional learning, as well as strategies for integrating new skills and concepts into core academic subject areas. The program provides frequent take-home activities and supplementary books for parents on the importance of social and emotional development. The program manual includes a section for frequently asked questions that address cultural relevance. Occasional suggestions for remaining sensitive to and aware of various cultures and ethnicities are included throughout the lessons. Initial training for the program typically lasts one to three days and is not required. The Social Decision Making/problem Solving program offers a train-the-trainer system to support sustainability.

Steps to Respect

A school-wide program designed for use in third through sixth grade. Implementation occurs in three phases: school administrators take stock of their school environment and bullying issues; then all adults in the building are trained; and finally classroom-based lessons are taught. The program provides 11 classroom lessons with two additional literature units that contain multiple lessons in each. These lessons focus on topics such as how to make friends, understanding and recognizing feelings, and dealing with bullying. Optional extension activities are provided at the end of each lesson for social and emotional skill areas as well as academic content areas. Family handouts are also provided for each lesson. Steps to Respect attempts to "eliminate any visibility of differences" so the materials can be applicable to a variety of cultures and ethnic backgrounds and can span a longer period of time and relevance. All images are represented in black and white, and the lessons incorporate a variety of cultures, ethnicities, and backgrounds. Initial training for the Steps to Respect Program typically lasts six to eight days and is not required.

Too Good for Violence

A violence prevention and character education program for students in kindergarten through eighth grade that teaches character-based skills such as respect, celebrating diversity, and understanding feelings and actions. The curriculum consists of seven scripted lessons that take 30-60 minutes EACH to implement. Infusion activities that integrate social and emotional skills with academic content areas are also provided in addition to recommended readings, videos, and home activities to be completed with parents or caregivers. Family and community involvement is emphasized, and suggested activities and recommendations for teachers are provided. Initial training for the program typically lasts five hours and is not required. Too Good for Violence offers a train-the-trainer system to support sustainability.

Tools of the Mind

An early childhood program for students in prekindergarten and kindergarten that promotes self-regulated learning and is designed to be embedded within the classroom. With a focus on early literacy, mathematics, and other cognitive competencies such as self-reflection, the program encourages teachers to scaffold student learning while encouraging use of mental “tools” through self-regulation activities, make-believe play, and a structured classroom environment that enable students to control their social, emotional, and cognitive behaviors. The Tools of the Mind Program also provides structures for family involvement and information for parents who wish to reinforce the activities with their children outside of the program. Initial training for Tools of the Mind typically lasts two days and is not required. A train-the-trainer system to support sustainability is offered.

Tribes Learning Communities

Aim to engage all members of the educational community — district and school administrators, teachers, family members, and community members — in ongoing, goal-oriented collaboration to create a caring and supportive environment that establishes positive expectations and promotes the active participation of all students from kindergarten through twelfth grade. The Tribes process includes four community strategies: attentive listening, appreciation/no put downs, the right to pass—the right to participate, and mutual respect. Key program structures and educational practices supported by the program include cooperative learning groups (comprised of three to six students) that work together throughout the entire school year and Community Circles, which provide opportunities for students to work together to solve classroom problems and build relationships. The curriculum also suggests a strategy for exploring academic content. Tribes materials incorporate a variety of cultures, ethnicities, and backgrounds throughout the text and images. Suggestions are provided for adaptation and sensitivity to students' ethnic backgrounds and cultural beliefs, as well as tailoring language to meet the needs of English Language Learners and students from diverse backgrounds. Program materials are available in English and Spanish. Initial training for Tribes typically lasts 24 hours and is spread across four days. Training is not required, and a train the-trainer system to support sustainability is offered.

Appendix D

CASEL Programs Chart

Name	Grade Range	GradBy-Grad Sequence	Sessions	Explicit Instruction	Academic Curriculum Integration	Teacher Practices	Opportunity to Practice Skills	Contexts that Promote and Reinforce SEL				Monitoring		Measuring Student Behavior
								Classroom-wide	School-wide	Family	Community	Self-Report	Observation	
All's Pals	PreK-3rd	Nb	45 Core+9 boosters	Yes	Yes	Nb	3	3	1	2	1	Nb	Yes	Yes
High Scope Educational Approach for Preschool	PreK	Yes	Nb	Nb	Yes	Yes	3	3	3	2	1	Yes	Yes	Yes
I Can Problem Solve	PreK-5th	Nb	59-83 Lessons	Yes	Yes	Nb	3	3	1	3	1	Yes	Yes	Yes
The Incredible Years	PreK-2	Yes	64 Lessons	Yes	Yes	Nb	3	3	1	3	1	Yes	Nb	Nb
PATHS	PreK-6th	Yes	40-52 Lessons	Yes	Yes	Nb	3	3	3	3	1	Yes	Yes	Yes
Peace Works: Peacemaking Skills for Little Learners	PreK-2nd	Yes	30-85 Activities	Yes	Yes	Nb	3	3	3	3	1	Nb	Nb	Yes
Tools of the Mind	PreK-K	Yes	N/A	Nb	Yes	Yes	3	3	1	3	1	Yes	Nb	Yes
4Rs	PreK-8th	Yes	35 Session	Yes	Yes	Nb	3	3	3	3	1	Yes	Nb	Yes
Caring School Community	K-6	Yes	30-35 class meetings	Nb	Yes	Yes	3	3	3	3	3	Yes	Yes	Yes
Competent Kids Caring Comm	K-5	Yes	35 Lessons	Yes	Yes	Nb	3	3	3	3	2	Yes	Yes	Yes
Mt High Model for Health	K-12	Yes	8-14 Lessons	Yes	Yes	Nb	3	3	2	1	1	Nb	Nb	Yes
MindUp	PreK-8th	Nb	15 Lessons	Yes	Yes	Nb	3	3	1	1	1	Yes	Nb	Yes
Open Circle	K-5	Yes	34 Lessons	Yes	Yes	Nb	3	3	3	3	1	Yes	Nb	Yes
Positive Action	PreK-12th	Yes	140 Lessons	Yes	Yes	Nb	3	3		3	3	Yes	Nb	Yes
Raising Healthy Children	K-6	Yes	N/A	Yes	Yes	Yes	3	3	3	3	1	Yes	Yes	Yes
Resolving Conflict Creatively Program	PreK-8th	Yes	16 Lessons	Yes	Yes	Yes	3	3	3	3	1	Yes	Nb	Yes
Responsive Classroom	K-8th	Yes	N/A	Nb	Yes	Yes	3	3	3	3	1	Yes	Nb	Yes
RULER Approach	K-8th	Yes	91 Lessons	Nb	Yes	Yes	3	3	3	3	1	Yes	Yes	Yes
Second Step	PreK-8th	Yes	22-28	Yes	Yes	Nb	3	3	2	2	1	Yes	Yes	Yes
Social Decision Making/Problem Solving Program	K-8th	Yes	30 Topics	Yes	Yes	Nb	3	3	2	2	1	Yes	Nb	Yes
Steps to Respect	3-8th	Yes	28 Lessons	Yes	Yes	Yes	3	3	3	2	1	Yes	Nb	Nb
Too Good for Violence	K-8th	Yes	7 Lessons	Yes	Yes	Nb	2	2	2	2	2	Yes	Yes	Yes
Tribes Learning Communities	K-12	Yes	N/A	Nb	Yes	Yes	3	3	3	3	1	Yes	Nb	Yes

Appendix E

Social-Emotional Learning Interventions: Survey for NYS Elementary School Principals

Brad Ervin, NCSP

Alfred University

Part I. Demographics

1. Gender: Male Female Other

2. Race/Ethnicity: White
 Black or African American
 Asian
 American Indian and Alaska Native
 Native Hawaiian and Other Pacific Islander
 Hispanic
 Other

3. What is your highest academic degree? (Check one):
 Master's Degree Specialist Degree Doctoral Degree
 Other (please describe) _____

4. Do you hold a graduate degree in any field of mental health service (e.g., school counseling, psychology, social work, etc.)?
 Yes, I hold a graduate degree in a mental health field
 No, I do not hold a graduate degree in a mental health field

5. For how many school years (counting the current one) have you been practicing as an elementary school principal? _____

6. Do you work full or part time? (Check one) Full time Part time

7. In what Region do you work? (Check One)
 Western Finger Lakes Southern Tier Central
 North Country Mohawk Valley Capital District Hudson Valley
 New York City Long Island

8. What is the number of school buildings in which you serve as the principal?
 1 2 More than 2

9. What grades do you serve? (check all that apply)
 Pre-K 2 5 8 11
 K 3 6 9 12
 1 4 7 10

** Note, if you serve as a principal for more than one school building, please answer the remaining questions based upon only the elementary school building in which you serve. If you*

serve in more than one elementary school building, please base your responses on the school for which you spend the majority of your time.

10. What is your school building's Geographic Density? (Check one)
 Urban Suburban Rural

11. What percentage of your school building's population is receiving free and reduced lunch? _____(1-100%)

12. Approximately how many students are in the elementary school building you work in? (please round to the nearest 10 students)
 Approximately _____ students

13. Using a percentage from 0% (i.e., never participate) to 100% (i.e., always participate), please identify the extent to which you participate in the decision-making process regarding school-wide social-emotional learning interventions/programs.
 _____(0-100%)

14. Please select the professional organizations that you use as a resource for SEL. (check all that apply)
 Collaborative for Academic, Social, and Emotional Learning (CASEL)
 Center for Social and Emotional Foundations for Early Learning (CSEFEL)
 OSEP Technical Assistance Center on Positive Behavioral Intervention Support
 NYS Positive Behavioral Intervention Support Technical Assistance Center
 NYS Education Department
 What Works Clearinghouse
 National Wraparound Initiative
 Other (please specify) _____

Part II. Learning about SEL Programs and Interventions

Directions. For the following items, please respond to the statements given by circling the degree to which the statement applies to your current practice. For all items, consider social/emotional/behavioral interventions for universal (all students), targeted (some at-risk students), and intensive (individualized) levels of intervention. Evidence-based interventions are defined in this study as treatments, interventions, or services for which experimental research has established as effective.

N = Never; S = Sometimes; O = Often; A = Always

1. I consult <i>internet resources</i> that list, rate, and describe evidence-based social/emotional/behavioral interventions to learn about and select evidence-based social/emotional/behavioral interventions.	N	S	O	A
2. I consult <i>research articles</i> from academic journals (i.e., peer reviewed) to learn about and select evidence-based social/emotional/behavioral interventions.	N	S	O	A

3. I consult non-academic (i.e., not peer reviewed) <i>magazines and newsletters</i> to learn about and select evidence-based social/emotional/behavioral interventions.	N	S	O	A
4. I consult <i>books</i> to learn about and select evidence-based social/emotional/behavioral interventions.	N	S	O	A
5. I rely on <i>colleagues and supervisors</i> to tell me about evidence-based social/emotional/behavioral interventions.	N	S	O	A
6. I rely on my <i>graduate training</i> when selecting evidence-based social/emotional/behavioral interventions.	N	S	O	A
7. I rely on my <i>past experiences</i> when selecting evidence-based social/emotional/behavioral interventions.	N	S	O	A
8. I rely on <i>non-BOCES professional development activities</i> (e.g., attendance at professional conferences, paid workshops) to learn about evidence-based social/emotional/behavioral interventions.	N	S	O	A
9. I rely on <i>BOCES-provided professional development activities</i> (e.g., attendance at conferences/workshops) to learn about evidence-based social/emotional/behavioral interventions.	N	S	O	A
10. When someone recommends a new intervention, I investigate its research support myself by reviewing original publication materials and articles.	N	S	O	A

Part III. Familiarity and Use of SEL Evidence-based Intervention Programs

Directions. Existing intervention programs that have strong research support for their effectiveness are listed and described below. For each of the following items, please rate (a) your level of familiarity with the intervention program, (b) the degree to which you have implemented or worked with others to implement the program, and (c) whether or not your building is **currently** using each program. For your convenience, a general description of each program is provided.

Program and Description	Level of Familiarity (check one)	Level of Use in My Elementary School (check one)	Currently Using in My School
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<p>1. AI's Pals <i>An early childhood intervention program based on a resiliency framework designed to develop personal, emotional, and social skills.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>2. Caring School Community <i>A program organized around four core educational practices: Class Meetings, Cross-Age Buddies, Homeside Activities, and Schoolwide Community-Building Activities</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>3. Competent Kids, Caring Communities <i>Designed to promote important life skills in students through an average of 35 separate sets of lessons for each year for kindergarten through fifth grade.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>

<p>4. High Scope Educational Approach for Pre-School <i>A comprehensive system of teaching practices and educational structures designed to enhance the learning environment and to support developmentally appropriate instruction in prekindergarten.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>5. I Can Problem Solve <i>A violence prevention program that helps children think of nonviolent ways to solve everyday problems.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>6. The Incredible Years Series <i>Focuses on developing skills to understand and recognize feelings, solve problems, manage anger, and develop and maintain friendships</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>7. Michigan Model for Health <i>Designed for use in K-12 grade, and it is the state health curriculum for Michigan.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>

<p>8. MindUp <i>Establishes core practices of deep breathing and attentive listening, which are then practiced several times a day throughout the school year.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
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<p>9. Open Circle <i>Designed to equip teachers with effective practices for creating a cooperative classroom community and establishing positive relationships and effective approaches to problem solving within the classroom.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
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<p>10. PATHS (Promoting Alternative Thinking Strategies) <i>Promotes peaceful conflict resolution, emotion regulation, empathy, and responsible decision making</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
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<p>11. Peace Works: Peacemaking Skills for Little Kids <i>Designed to promote conflict resolution skills in students</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
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<p>12. Positive Action <i>Designed to promote a healthy self-concept and to establish positive actions for the body and mind. The program emphasizes effective self-management, social skills, character, and mental health, as well as skills for setting and achieving goals.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>13. Raising Healthy Children <i>A program which incorporates school, family, and individual programs to create a caring community of learners.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>14. Resolving Conflict Creatively Program (RCCPP) <i>Lessons emphasize building relationships, understanding feelings, developing empathy, managing emotions, and developing social responsibility.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>15. Responsive Classroom <i>Designed to create classrooms that are responsive to children's physical, emotional, social, and intellectual needs through developmentally appropriate educational experiences</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>

<p>16. RULER Approach <i>Designed to promote emotional literacy, which includes Recognizing, Understanding, Labeling, Expressing, and Regulating emotions (the RULER skills).</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>17. Second Step <i>Provides instruction in social and emotional learning with units on skills for learning, empathy, emotion management, friendship skills, and problem solving.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>18. Social Decision Making/ Problem Solving Program <i>Designed to develop self-control, social awareness, and effective decision-making skills</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>19. Steps to Respect <i>Lessons focus on topics such as how to make friends, understanding and recognizing feelings, and dealing with bullying.</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but don't know a lot about it</p> <p><input type="checkbox"/> Very familiar/Heard a lot about it</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>20. Too Good for Violence <i>A violence prevention and character education program that teaches character-</i></p>	<p><input type="checkbox"/> Not familiar/Never heard of it</p> <p><input type="checkbox"/> Somewhat familiar/Heard of it, but</p>	<p><input type="checkbox"/> Never used it</p> <p><input type="checkbox"/> I have used it or have worked with others to implement it.</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>

<p><i>based skills such as respect, celebrating diversity, and understanding feelings and actions.</i></p>	<p>don't know a lot about it</p> <p>___ Very familiar/Heard a lot about it</p>		
<p>21. Tools of the Mind <i>A program that promotes self-regulated learning and is designed to be embedded within the classroom.</i></p>	<p>___ Not familiar/Never heard of it</p> <p>___ Somewhat familiar/Heard of it, but don't know a lot about it</p> <p>___ Very familiar/Heard a lot about it</p>	<p>___ Never used it</p> <p>___ I have used it or have worked with others to implement it.</p>	<p>___ Yes</p> <p>___ No</p>
<p>22. Tribes Learning Communities <i>Designed to engage all members of the educational community — district and school administrators, teachers, family members, and community members — in ongoing, goal-oriented collaboration to create a caring and supportive environment that establishes positive expectations and promotes the active participation of all students.</i></p>	<p>___ Not familiar/Never heard of it</p> <p>___ Somewhat familiar/Heard of it, but don't know a lot about it</p> <p>___ Very familiar/Heard a lot about it</p>	<p>___ Never used it</p> <p>___ I have used it or have worked with others to implement it.</p>	<p>___ Yes</p> <p>___ No</p>
<p>23. 4Rs (Reading, Writing, Respect, and Resolution) <i>Provides read-alouds, book talks, and sequential, interactive skills lessons to develop social and emotional skills related to understanding and managing feelings,</i></p>	<p>___ Not familiar/Never heard of it</p> <p>___ Somewhat familiar/Heard of it, but don't know a lot about it</p> <p>___ Very familiar/Heard a lot about it</p>	<p>___ Never used it</p> <p>___ I have used it or have worked with others to implement it.</p>	<p>___ Yes</p> <p>___ No</p>

<i>listening and developing empathy, being assertive, solving conflict creatively and nonviolently, honoring diversity, and standing up to teasing and bullying.</i>			
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Part IV. Characteristics for Selecting SEL Intervention Programs

Directions. For this final section, several dimensions to consider when selecting interventions are listed. For each dimension, please place a check mark next to the degree to which you believe it is important in your decision making about choosing to implement an intervention. **Then**, given items #1-5, circle (on a scale of 1 to 5, with 1 being *most* important and 5 being *least* important) where the dimension ranks in order of importance among those five items when selecting interventions. Be sure to use a rank number only once.

1. Research support for the program's effectiveness	<input type="checkbox"/> Not important <input type="checkbox"/> Somewhat Important <input type="checkbox"/> Very important	Rank order among items 1-5 (circle only one number): 1 2 3 4 5
2. The program's overall cost	<input type="checkbox"/> Not important <input type="checkbox"/> Somewhat Important <input type="checkbox"/> Very important	Rank order among items 1-5 (circle only one number): 1 2 3 4 5
3. Amount of time required for personnel to implement program	<input type="checkbox"/> Not important <input type="checkbox"/> Somewhat Important <input type="checkbox"/> Very important	Rank order among items 1-5 (circle only one number): 1 2 3 4 5
4. Amount of training required for those who will be implementing the program	<input type="checkbox"/> Not important <input type="checkbox"/> Somewhat Important <input type="checkbox"/> Very important	Rank order among items 1-5 (circle only one number): 1 2 3 4 5
5. Whether or not the program worked for colleagues	<input type="checkbox"/> Not important <input type="checkbox"/> Somewhat Important <input type="checkbox"/> Very important	Rank order among items 1-5 (circle only one number): 1 2 3 4 5

Please indicate what, if anything, you have learned about SEL learning programs or decision making by completion of this study. _____

**If you would like to receive a copy of the final written report of the results of this study or you have questions about this survey, please contact Brad Ervin (Bre2@alfred.edu).
Thank you for completing the survey!**

Appendix F

Participant Invitation Email

Dear Elementary Principal,

First, I would like to thank you for taking time out of your busy day to consider participating in my research study. As a practicing school psychologist who works closely with administrators, I understand how demanding your role in schools can be. However, I would not be asking you to complete another task if I did not think it would be highly beneficial to faculty and staff in elementary schools.

By participating in this study, you will be providing valuable information regarding your familiarity and use of social-emotional learning programs in your school(s), with the hopes of progressing the practices within New York State. Completion of this four-part survey research involves answering questions pertaining to demographics, research practices, familiarity and use of programs, and decision-making practices. It is estimated to take approximately 10 to 15 minutes to complete. After completion of the survey, you may elect to enter a drawing for one of two \$50 Amazon gift cards. If you are willing and able to participate in this study, please click the hyperlink below or copy and paste it into your internet browser.

{Insert Link Here}

Please consider completing the survey at your earliest convenience. Reminder emails may be sent in the upcoming weeks.

Thank you again for your consideration,

Brad Ervin, MA/CAS, NCSP
Alfred University

Appendix G

Participant Informed Consent Form

You are invited to be in a research study being conducted to assess elementary principals' familiarity and use of social-emotional learning programs within their schools. You have been selected as a possible participant because you were identified as a current elementary school principal in NYS. Please read this form before agreeing to be in this study.

Procedures. If you agree to participate in this study, you will be asked to complete the following questionnaires in full and be forthright in your answers. On the pages that follow, you will find a four-part survey. First, you will be asked to report demographic information about yourself and your role as an elementary principal. Then, you will identify what methods you have used when selecting social-emotional programs. The third section includes several social-emotional programs and you will be asked to identify if you are familiar with these programs and if you have ever used them. Finally, you will be asked to rank the importance of several characteristics when choosing social-emotional programs. While it is somewhat lengthy, most of the questions require you to choose from a series of options. Thus, completion of the study is estimated to take approximately 10 to 15 minutes.

Risks and Benefits of Being in the Study. In review of this study, there are no foreseeable risks for participation. While unlikely, if you do feel any discomfort, you are free to discontinue your participation at any time during the study simply by exiting the survey. In the unlikely event that this study causes mild distress, the researchers suggest that you consult with a mental health service provider in your immediate vicinity. Participation in this study will help further research regarding social-emotional learning programs in elementary schools. By participating in this study, you will be provided the option to enter a drawing for one of two \$50.00 Amazon gift cards.

Confidentiality. The records of this study will be kept private. In any sort of published report, any information that will make it possible to identify a participant will be removed. Research records will be kept in password-protected files and only the researcher will have access to the records.

Voluntary Nature of the Study. Your decision to participate in this study is completely voluntary and whether or not you choose to participate will not affect your current or future relations with Alfred University. If you decide to participate you are free to withdraw at any time without penalty.

Contacts and Questions. The researcher conducting this study is Brad Ervin. If you have questions about your participation in this study that you would like to ask before participating, please exit this survey and contact the researcher electronically at bre2@alfred.edu or the faculty sponsor electronically at oconnell@alfred.edu. You are also welcome to contact me after the completion of the study with any questions or if you would like to receive a copy of the research results. If you have any questions now, or later, related to the integrity of the research, (the rights of research subjects or research-related injuries, where applicable), you are encouraged to

contact Dr. Danielle Gagne, Chair of the Alfred University Human Subjects Research Committee, at (607) 871-2212 or electronically at HSRC@alfred.edu.

Statement of Consent. I have read the above information and I consent to participate in the study.

Electronic Signature

Date

Appendix H

Debriefing Statement

The purpose of this study was exploratory in nature and designed to assess elementary principals' familiarity and use of social-emotional learning programs within their schools. You were selected as a possible participant because you were identified as a current elementary school principal in NYS. By participating in the study, you reported demographic information about yourself and your role as an elementary principal. Then, you identified what methods you have used when selecting social-emotional programs. The third section included several social-emotional programs and you were asked to identify if you were familiar with these programs and if you had ever used them. Finally, you were asked to rank the importance of several characteristics when choosing social-emotional programs.

In review of this study, there were no foreseeable risks for participation. In the unlikely event that this study caused you mild distress, the researchers suggest that you consult with a mental health service provider in your immediate vicinity. Your participation in this study will help further research regarding social-emotional learning programs in elementary schools. Additionally, it is the hope of the researchers that you have learned something new selecting and using SEL programs that you can utilize in your school building.

The records of this study will be kept private. In any sort of published report, any information that will make it possible to identify a participant will be removed. Research records will be kept in password-protected files and only the researcher will have access to the records.

If you would like to receive a copy of the results of this study, please email the primary researcher, Brad Ervin (bre2@alfred.edu) directly.

You may also contact Brad Ervin or the faculty sponsor, Dr. Lynn O'Connell (oconnelm@alfred.edu) if you have any questions about this study. If you have any questions now, or later, related to the integrity of the research, (the rights of research subjects or research-related injuries, where applicable), you are encouraged to contact Dr. Danielle Gagne, Chair of the Alfred University Human Subjects Research Committee, at (607) 871-2212 or electronically at HSRC@alfred.edu.

By participating in this study, you also have the option of entering a drawing for one of two \$50.00 Amazon gift cards. If you would like to be entered in the drawing, please send an email to the primary researcher, Brad Ervin (bre2@alfred.edu).

Thank you again for your participation. You may choose to print this page for your records.