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University-School Partnerships: 10 Lessons Learned Over the Past 10 Years

Danielle C. Swick, Joelle D. Powers, and Janet Cherry

Abstract

There are multiple examples in the literature of universities and school districts coming together to form partnerships to effectively meet the needs of children and adolescents. University-school partnerships can be mutually beneficial to both types of institutions for several reasons, including the opportunities they provide for sharing resources and conducting meaningful, evidence-based, practice-informed research. While university-school partnerships are critical for identifying points of intervention in schools and for improving children's physical health, mental health, and academic outcomes, substantial barriers exist to forming successful partnerships. Potential partner institutions need information on how to create trusting and mutually beneficial university-school partnerships. This paper summarizes 10 lessons learned over the past 10 years from a successful university-school partnership and provides tangible ideas and strategies for others who hope to engage in similarly successful partnerships.

There are multiple examples in the literature of universities and school districts coming together to form partnerships to effectively meet the needs of children and adolescents (e.g., Bosma et al., 2010; Cottrell et al., 2017; Swick & Powers, 2018). University-school partnerships can be mutually beneficial to both types of institutions for several reasons. First, in times of diminishing resources for both university systems and school districts, partners can benefit by coming together to pool their resources (Muro et al., 2015). Public schools continuously face funding cuts and often lack sufficient trained staff to deliver quality academic and other services (e.g., health and mental health care) to their students. Through university-school partnerships, these entities can come together and share resources (e.g., time, money, knowledge) to create a common vision and mutual goals to better meet the needs of students.

Second, universities and schools can partner to conduct meaningful, evidence-based, practice-informed research. Universities can offer their knowledge of best practices for conducting methodologically sound evidence-based research, while schools can bring their equally important knowledge of students' most pressing needs and their sense of what kinds of research would be truly impactful (López Turley & Stevens, 2015). At times, research conducted by university members does not have an applied focus and therefore is not especially relevant to real-life issues such as students' academic, health, and mental health

needs. However, a university-school partnership provides a space to conduct community-engaged research in which on-the-ground community members (school staff in this case) are actively involved in the applied, practice-informed research process. These partnerships can thus result in the examination of timely and relevant issues faced by schools.

While university-school partnerships are critical for identifying points of intervention in schools and for improving children's physical health, mental health, and academic outcomes, substantial barriers exist to forming successful university-school partnerships. First, schools may not view working with researchers as mutually beneficial; in particular, they may have been subject to previous negative experiences with universities that disincite them to see future involvement with universities as helpful (Henrick et al., 2016; Hooper & Britnell, 2012; Muro et al., 2015). Universities often try to conduct research in schools without the foundation of a true partnership in which all voices are valued and heard at the table. For example, university members may push their own research agenda on the school without considering the school's goals and needs. Additionally, they may discuss research on a theoretical level that involves complex research terms, and they may fail to provide the specific and tangible recommendations that schools are often seeking. Further, while some university researchers may help incorporate their research findings into a long-term plan for the

school, other university researchers may disengage from the school setting when their research is over, without any attention to how the benefits of their research can be sustained over time.

Second, limited funding is available to support school-based research conducted by university-school partnerships, which makes federal, state, and local grants more competitive and harder to come by (López Turley & Stevens, 2015; Powers & Swick, 2017). Mutually beneficial, trusting, and effective university-school partnerships can take years to form, and often funds are not provided for the entirety of the time it takes to build these relationships. Additionally, many grant sources explicitly exclude funding for infrastructure costs (López Turley & Stevens, 2015). For example, if one goal of a university-school partnership is to develop a school-based mental health program, funds may not be applicable to infrastructure costs such as repurposing space to serve as a confidential area for one-on-one counseling. A scarcity of funds can introduce challenges when trying to bring together multiple partners. Therefore, university partners must know how to form successful partnerships, without necessarily having the external funding to do so.

Finally, universities need more information on how to create trusting and mutually beneficial university-school partnerships (López Turley & Stevens, 2015). University faculty typically do not receive formal training on how to form successful community-based research partnerships. While they often form research collaborations with other university partners, they do so less often with community partners such as schools. Therefore, the purpose of this paper is to summarize 10 lessons learned over the past 10 years from a successful university-school partnership and to provide tangible ideas and strategies for others who hope to engage in such partnerships. The goal is twofold: to positively contribute to the knowledge base on community-engaged school-based research and to give current school practitioners and administrators the opportunity to learn from our pitfalls, mistakes, and successes. Our hope is that schools who wish to implement mental health interventions to support their students have an easier time and smoother transition into such efforts because of the lessons we learned over the past decade.

While the findings presented in this paper may not be entirely novel or innovative, they are clearly relevant for community-based engagement and research in schools. Alongside our 10 lessons, we include citations for other interventions and

evaluations with similar findings. By replicating important findings from previous studies, we further highlight critical information for school practitioners and administrators who may be considering similar mental health services to support vulnerable students on their own campuses.

Method

Description of Program

The authors of this article have worked together doing school-based intervention research for over a decade. In 2009, they developed a university-school partnership between a university and an urban school district in the southeastern United States that resulted in the successful implementation, evaluation, and refinement of a school-based mental health program. The program focused on bringing mental health services into elementary schools in a high-risk and low-resource school district, and its ultimate goal was to improve the academic and socio-behavioral outcomes of students with mental health challenges.

At each of the seven elementary schools that offered the program, there was a program team consisting of a program manager, a parent liaison, and a school psychologist. The program managers were all licensed mental health professionals who provided direct services to students at their schools and made referrals to outside agencies when the students' needs exceeded what could be provided at the school. The parent liaisons conducted home visits and helped connect families to community resources. The school psychologists conducted psychoeducational assessments, identified appropriate evidence-based interventions, and helped to develop and implement curricula for group counseling sessions. All seven program teams were supervised by the program director, who was a licensed clinical social worker and who is also a co-author of this paper. The program teams coordinated a range of services, including home visits, individual and small-group counseling, classroom observations, staff consultation, tutoring and mentoring, behavioral plans and individualized educational plans, and referral to outside community agencies for more intensive services. All services provided through the program were 100% free to the students and their families. Of all participating students, 64% were male and 36% were female, while 81% were African American, 5% were White, 10% were Hispanic/Latino, and 4% identified as other races. While individual data were not collected on participants' socioeconomic status, all participating

students came from Title I schools (that is, schools in which children from low-income families make up at least 40% of enrollment).

Data Collection

The information presented in this paper was collected as part of a larger evaluation project intended to assess the effectiveness of the school-based mental health program (Powers et al., 2016; Swick et al., 2015; Wegmann et al., 2017). This project was approved by the university's institutional review board. For the larger project, data were collected from students, teachers, and administrators via focus groups, interviews, surveys, and reviews of existing records. For the current case study, information was collected in two ways: (a) monthly processing meetings with the school-based mental health program teams and (b) ongoing debriefing conversations with the program director. First, each month, the university partners would meet in person with the school-based mental health program teams (including the program managers, school psychologists, and the parent liaisons) and the school-based mental health program director. At each processing meeting, attendees discussed the successes and challenges that occurred that month in implementing the mental health program at their respective schools. Additionally, the program team provided feedback to the university partners and program director about any barriers they were experiencing and any additional support they needed from the university partners, the program director, or other school personnel in order to be successful.

Second, in addition to these processing meetings, the university partners had ongoing in-person meetings, phone conversations, and email exchanges (at least once a week) with the program director to discuss successes and challenges of the program and the university-school partnership. The wealth of information gleaned from these meetings with the program teams and the program director led to the lessons learned that are presented below. The lessons were agreed upon by the university partners and the program director. These 10 lessons provide tangible ideas and strategies for others who plan to engage in similar successful university-school partnerships.

Results: 10 Lessons Learned Over the Past 10 Years

1. It helps to have connections to gain entry into the school.

Gaining entry into school settings can be challenging for several reasons. As noted previously, many districts initially mistrust researchers and

their projects because schools have felt taken advantage of in the past. School employees are ultimately motivated by and evaluated on long-term student success. If they feel that someone has come into their setting to work with their students without the same values, it becomes problematic, and schools will both disengage and be less likely to partner with researchers in the future.

Schools also have very clear priorities dictated by federal policy and law (including educational outcomes such as end of grade/course test scores, attendance, behavioral goals, and special education mandates). District educators and administrators may not view external research as an important use of their limited time and resources given all that they are already held accountable for, making it even more difficult for researchers to gain entrance into a school system.

Having a connection with a district employee can be an asset in gaining access to schools (Bartlett et al., 2017; Mishna et al., 2012; Muro et al., 2015; Wanat, 2008). An individual already working within the system may know the correct people to contact to initiate any kind of partnership discussion. These connections may accelerate important conversations and meetings that can lead to a partnership. For our project, one of the authors had previously been employed by the partner school district and was a known and trusted entity. This led to an expedited process for meeting with the correct people within the district.

2. Be well versed in the hierarchical structure of a school system and how decisions are made.

School districts can have incredibly tight organizational structures that affect communication and decision-making (Hooper & Britnell, 2012; Mishna et al., 2012). It can be challenging for universities to gain access to the school district administrators who ultimately have the authority to approve partnerships between school districts and universities. For example, to get permission to establish a partnership between the district and our university, we needed final approval from the district superintendent. Even with prior connections to the district, it took several phone calls and meetings with other district employees (program directors, executive directors, and an assistant and associate superintendent) before we could even get a meeting with the superintendent. After that, it took a meeting with the president of the district board of education to gain final permission. Once we gained this approval to partner, our relationship with these

decision-makers was relegated primarily to annual presentations on the program evaluation results at district board meetings. For researchers with no connections, this process may be daunting. However, it would not have been appropriate for us to reach out first or directly to the superintendent or board president. We needed to go through channels of communication and decision-making that were culturally appropriate for the district and its hierarchical structure.

Over the course of the project, we continued to actively partner with the school social workers, psychologists, and parent liaisons that provided direct services to students and their families within the intervention schools. We were also frequently in contact with school principals. However, our key partner within the district was the program director, who was charged with overseeing and managing the intervention. We were in frequent communication with her throughout the duration of the project. The program director was a school social worker who had been promoted to a district administrator position, and she already oversaw numerous programs for disadvantaged and at-risk youth. She harbored a wealth of knowledge in terms of who was the right person to contact and when. Thus, she was critical to have as our primary internal connection.

3. Funding is limited. Be prepared to do “pro bono” work for a while or provide your own funding until the possibility of school funds arises.

Financial support for nonacademic interventions is often incredibly limited within a district, and these budget lines always seem to be stretched thin (López Turley & Stevens, 2015; Parsons et al., 2013). Compounding this issue is the dearth of federal grant support available for the development and evaluation of health and mental health services in schools. Although we entered our university-school partnership with an established memorandum of agreement, we ended up providing additional services at no cost throughout the length of the project. For example, we provided mental health training to staff at the school sites so they could better recognize signs and symptoms of mental health struggles in their students (Powers et al., 2014b). We attended and presented at numerous district board meetings to provide project updates. We met with school principals, social workers, psychologists, and parent liaisons at their request and included their feedback in our evaluation and reports (Blackman et al., 2016). While we did not have funding or a course release to cover these

additional services in our faculty roles or workload, these efforts functioned as an investment in the partnership. Being available and willing to provide these small pro bono services also helped foster trust between the partners.

One of the authors obtained a grant to fund our 1-year pilot intervention, which we conducted at one elementary school within the district. The school district did not meaningfully invest in the intervention until evaluation results (i.e., improvements in students’ academic performance) were provided and proved to be of significant value to them (Powers et al., 2014a). It was after seeing results and hearing from the school principal and staff at the pilot site that the district chose to invest in and expand the programming to six additional elementary schools. While the district investment was welcomed, it also increased the amount of pro bono work needed to support the increase in schools and staff.

4. Speak in a language that everyone understands.

Different organizations or fields often have their own “languages” or sets of terms that are specific to them. Individuals from universities are engulfed in a world of research and therefore often use complex research terms in their communication. While schools certainly understand the importance of research, it is essential for university partners to be able to communicate with their school partners about research in broadly understandable terms (Hooper & Britnell, 2012; López Turley & Stevens, 2015; Witteman et al., 2018). For example, when we work with school districts, we provide them with yearly reports on the outcomes of our research. While we often use complex statistical models to examine our data (e.g., hierarchical linear modeling), we make sure to present the outcomes of our modeling in a very straightforward fashion. For example, we provided graphs of children’s academic and socio-emotional outcomes over time alongside bullet points emphasizing the major findings. Presenting the findings in this way also allowed the schools to use the results in their own promotional materials (e.g., their website and newsletter) or when presenting to parents. We also held an in-person meeting with stakeholders at the school to review the findings. These meetings provided a time for us to summarize findings and for the stakeholders to ask questions, and they often resulted in very fruitful discussions around lessons learned and directions for future intervention.

5. Transparency is key.

Especially at the formative stages of university-community partnerships, transparency between the partners is key (Brown et al., 2018). When a university is approaching a school about a research-practice partnership, individuals from the university should discuss the projected benefits and challenges of the partnership for each entity involved (López Turley & Stevens, 2015). In our university-school partnership, we were very clear about what we as faculty members stood to gain from the project. For example, we explained that in addition to teaching, one of our primary roles as faculty members is research, which includes procuring funding, conducting the research, and disseminating the research findings. We talked about how we are evaluated by our number of publications, and we were open with the school stakeholders about how we wanted to publish the results of our research with them and present at conferences. We outlined this process and made sure to emphasize that we would always include the school stakeholders along the way, whether engaging them as authors/presenters or asking them to review the papers/presentations before they were submitted for publication. We also made it very clear what the school would get out of the university-school partnership. We discussed how the university would provide the funds for the first year of the project through a grant, so the school district would not be burdened by cost. The district would also receive additional school mental health staff via the project and much-needed mental health services for the children at their schools.

6. A memorandum of agreement is a must.

After initial discussions about how each stakeholder envisions the partnership, it is essential to develop a memorandum of agreement (MOA; López Turley & Stevens, 2015; Parsons et al., 2013). This process clarifies the roles of each stakeholder and establishes a framework for the relationship. The MOA is a critical first step in the partnership process and provides tangible evidence that a shared and mutually agreeable partnership can be established between different stakeholders. These stakeholders may include, but are not limited to, the district superintendent (or assistant superintendent), the school administrator responsible for the on-site coordination of the research initiative, any community agency the school and university are partnering with for the research initiative, and the university faculty researcher(s). In our project, each partner

articulated its desired outcomes for the school-based mental health evaluation project. In addition, the MOA articulated when, how, and where the results of the evaluation would be disseminated.

7. Be accommodating in terms of logistics.

Both school and university personnel are extraordinarily busy, and often their work schedules are not in direct alignment. School staff may have very little flexibility in meeting times because they are on the front lines with students from around 7:30 a.m. until 3:30 p.m. Therefore, university partners need to be very sensitive to the constraints of school personnel and must be flexible in terms of meeting times (Henrick et al., 2016). We would offer to meet with school partners either early in the morning before school started or right after school ended. We also always held meetings at the school site, recognizing that this was much more convenient for the school staff.

8. Have a well-balanced team.

It is important that the university team working with the school is well-balanced in terms of the skills it brings to the table (Blackman et al., 2016; Bosma et al., 2010; Short et al., 2012). It is particularly helpful to include individuals who are well versed in the operations of schools as well as individuals who are familiar with conducting research in school-based settings. In our partnership, one of us had previously been a school social worker and administrator at the school district level, and one of us had several years of experience conducting community-based engaged research. Therefore, the team brought a balance of relevant school-based clinical skills and the ability to effectively conduct research with community partners.

9. Provide opportunities for school leaders to present and publish.

In early meetings with the district leaders, we discussed the opportunity to publish and present on evaluation results from the project. We made a commitment to never publish or present on information that school stakeholders had not reviewed, and we offered to write and present work together if there was an interest on their part. District leaders were very interested in copresenting opportunities, but fewer were interested in publishing. Even though they did not want to help author publications, we ensured that their experiences, perspectives, and voices were clearly represented, and they always reviewed papers before publication.

We presented all results to district administrators primarily through annual school board meetings over the course of the project. On several occasions, we then disseminated results through articles, chapters, and conference presentations coauthored with the program manager (including the current paper). It was incredibly valuable to have her voice included in all that we collaborated on together. Her involvement was especially well received by audiences, as she could so easily share engaging stories of students and their families from all aspects of the intervention. These experiences and opportunities were also valuable for her career advancement—like they are for university faculty—since they often highlighted her leadership in a more local way.

10. Maintain the connection if the project ends.

A long-standing partnership with a particular school district can end for a number of reasons, but even if a partnership ends, it is critical to maintain connections with your community partners if possible (Smith & Petosa, 2016). In our university-school partnership, after 7 years of the school district funding the mental health initiative, a change in upper-level administration led to a change in priorities at the district level, and therefore the mental health initiative was cut from the budget. Even though the project ended within that school district, we continued to stay in touch with our school partners. We checked in frequently via email with the administrator of the program, and we continued to present together at national conferences. When the administrator of the program ultimately took another position at a different school district, we began to discuss working together on strengthening and evaluating mental health services in the new district.

Conclusion

Successful university-school partnerships can have multiple benefits for all stakeholders involved, including universities, schools, students, and the larger community. However, multiple barriers can impede the successful formation of effective university-school partnerships. This paper highlighted lessons learned over the past decade from a successful university-school partnership to provide tangible ideas and strategies for others who hope to engage in such partnerships.

While this project replicates important findings from previous studies, a few limitations should be noted. First, due to the case study approach used to document this partnership,

the generalizability of the results may be limited. While the lessons discussed here can most likely be applied to other contexts, caution should be taken. For example, the current case study was based on a project that took place in an urban school district, and it is possible that the lessons gleaned from this project may be unique to this setting (e.g., they may or may not be applicable to a rural setting). Second, the data for the lessons were obtained from multiple discussions that took place during regular project meetings with project staff and the project director. While this resulted in a wealth of information, a systematic review of documents was not conducted to obtain the data (because such documents were not available).

Future research should continue to investigate whether the lessons learned from this study generalize to other settings. The authors of this article currently have other successful partnerships with other school districts, including a rural district in the Pacific Northwest region of the United States and a rural district in the southeastern United States. The authors intend to continue to document lessons learned from these partnerships to determine if additional lessons can be drawn from rural districts. Further studies that investigate lessons learned from university-school partnerships should also consider using a more rigorous research design. For example, a formal document review of meeting agendas and minutes could be conducted to determine common themes.

Finally, the current study highlights important implications for practice. For school practitioners and administrators who have never collaborated with researchers, it is understandable that brokering such a relationship might be daunting or cause concern. However, the examples here of lessons learned from a long-term and mutually positive partnership might encourage a school to consider collaboration more seriously. Forging partnerships with academic researchers to access interventions for students may be an even more attractive or easy option for schools and districts with colleges or universities nearby. Many faculty are required to conduct research in order to maintain their positions or get promoted, so being contacted by a potential partner for a research collaboration would likely be a very welcome discussion. It is our hope that these findings from a decade-long university-school partnership will positively contribute to the literature on school-based mental health and encourage new and ongoing university-school partnerships that help schools better support their vulnerable students.

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