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School Social Work and Autism Competency: A Mixed-Methods Assessment of Pennsylvania

School Social Workers

A Dissertation Presented to

the Faculty of the Doctor of Social Work Program of

Kutztown University|Millersville University of Pennsylvania

In Partial Fulfillment of the Requirements for the Degree Doctor of Social Work

By Jami Imhof, LCSW-C

March 2023

This Dissertation for the Doctor of Social Work Degree

by Jami Imhof

has been approved on behalf of

Kutztown University|Millersville University

Dissertation Committee:

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Dr. Janice Gasker, Committee Chair

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Dr. Mary Rita Weller, Committee Member

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Dr. John Vafeas. Committee Member

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Dr. Steve Lem. Committee Member

March 22, 2023

## **ABSTRACT OF THE DISSERTATION**

School Social Work and Autism Competency: A Mixed-Methods Assessment of Pennsylvania

School Social Workers

By Jami Imhof, LCSW-C

Kutztown University|Millersville University, 2023

Directed by Dr. Janice Gasker

Autism is a neurodevelopmental disorder which currently affects 1 in 44 individuals in the United States. Autism manifests as symptoms that impact the areas of communication, social interaction, and behavior (Centers for Disease Control and Prevention, 2020). Symptoms may create challenges in the school setting, requiring social work intervention. School social workers must be knowledgeable about autism as well as how to best support autistic students. A mixed methods study was conducted among 84 school social workers in Pennsylvania to understand current autism knowledge via an online survey. Ways in which social workers have learned about autism, as well as what they need to support autistic students was explored through responses to qualitative items on the survey. Scores on the 10 point abbreviated ASDKP-R ranged from 20% to 100% ( $M=62.7$ ,  $SD=15.7$ ). While a below average score was revealed, most participants ( $n=63$ ) indicated that they would like to increase their knowledge and skills regarding autism related topics.

*Keywords: school social work, autism, neurodiversity*

## DEDICATION

This dissertation is dedicated to all first-generation college graduates who have persevered to obtain their degree.

## ACKNOWLEDGEMENTS

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To the DSW cohort, you all are amazing! I truly appreciate each one of you. I cannot wait to see what you accomplish after graduation. I look forward to reading your publications and attending your conferences. I know you all will do big things!

To my husband, Chris – thank you for all of your support over the last three years. I appreciate all the times you entertained the kids so that I could have a quiet house and concentrate on schoolwork. To my children, Klarissa and Franz, you both are so patient and caring! I love all of the pictures you have drawn for my desk, so I could look at them while I was either writing or in an online class. Now that I am finished with school, we have a lot more time for fun things! And lastly, to my cat, Kiki – she usually made an appearance while I was in an online class, or sat on my lap while I was working on the computer. She was by my side throughout the entire DSW program.

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## Chapter 1: Introduction

According to the Centers for Disease Control and Prevention, Autism Spectrum Disorder (ASD), or autism, is a neurodevelopmental disorder which currently affects 1 in 44 individuals in the United States. Autism manifests as symptoms that impact the areas of communication, social interaction, and behavior (Centers for Disease Control and Prevention, 2020). Symptoms may create challenges in the school setting, requiring social work intervention.

To support autistic<sup>1</sup> students in the school setting, a competent understanding of autism must be a part of the social worker's skillset. Understanding the symptoms of autism, challenges that may require social work intervention, and evidenced-based interventions to serve autistic students allow a social worker to appropriately serve autistic students in the school setting.

### Overview of Autism

Understanding how autism affects a student in the school setting is a part of supporting healthy development. Being knowledgeable of symptoms of autism, diagnostic criteria, as well as differences in how autism manifests in males and females are some of the components that can create competence for a school social worker in addressing the needs of autistic students.

***History of Autism.*** In the 1940's, Leo Kanner began to diagnose children with autism in Baltimore, Maryland; he documented eleven cases of children and teenagers who displayed symptoms of the disorder (Parisi & Parisi, 2019). There have been documented cases in 1700's ("feral" children who most likely wandered away from home) and 1800's (at a school for developmental disabilities), but Kanner's work was the first in the United States that provided

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<sup>1</sup> Self-advocacy groups, such as the Autistic Self Advocacy Network (ASAN), have stated preference for identity-first usage (Brown, 2011). The APA Publication Manual states that it can be "permissible to use" identity-first language when a group states preference (American Psychiatric Association, 2020, p. 137).

detailed features and characteristics of the disorder (Rosen, et al., 2021). Kanner, a psychotherapist at Johns Hopkins University, coined the term *autism* from the Greek word *autos*, or *self*, to describe the social withdrawal he observed in his patients (Al Ghazi, 2018).

During the same time period, Hans Asperger worked in Germany, where he diagnosed children with autism; his work is controversial due to his referrals of patients to Nazi German clinics. Asperger and a clinician who worked with him, George Frankl, were the first to write about *high functioning autism*, or what is referred today as level one autism (low support needs) in terms of an autism diagnosis (Muratori, et al., 2021). Asperger referred to his patients as having *autistic pathology* and drew similarities to schizophrenia due to the symptoms of social withdrawal. He also noted that other characteristics were not reminiscent of schizophrenia (absence of hallucinations), and he was able to observe symptoms in children as young as two years of age (Al Ghazi, 2018). As the field of child psychiatry grew in the 1960's, researchers focused on the area of autism and etiology. In the 1970's, child psychiatrist Michael Rutter conducted the first genetic study of autism in the United Kingdom. Rutter also described the three main areas that were affected by autism: communication, social interactions, and behavior (Evans, 2013). Work by psychiatric researchers in the mid-20<sup>th</sup> century led to autism being included in the Diagnostic and Statistical Manual of Mental Disorders in the latter part of the century.

***Autism in Previous DSM Editions.*** Autism first appeared in the Diagnostic and Statistical Manual of Mental Disorders, 3<sup>rd</sup> edition, in 1980. With the removal of *childhood schizophrenia*, a category of *pervasive developmental disorders* was introduced, which included a diagnosis of *infantile autism* (Evans, 2013). When the text revision was published in 1987, *autistic disorder* replaced infantile autism, to reflect the disorder across the lifespan. In the DSM-III-TR,

diagnostic criteria were included in three main categories: *qualitative impairments in reciprocal social interaction; impairments in communication; and restricted interests/resistance to change and repetitive movements* (American Psychiatric Association, 1987).

With the 1994 publication of the DSM-IV, as well as the text revision in 2000, Asperger's disorder and pervasive developmental disorder were included as individual diagnoses under the umbrella of autism spectrum disorders. Asperger's disorder was added as a result of documented cases of differences among patients with a diagnosis of pervasive developmental disorder and autism (Rosen, et al., 2021). Asperger's disorder was differentiated from autism disorder, as there were no delays in communication, which would otherwise be observed in autism. The disorder was also noted to consist of social interaction difficulties and restricted interests, with the absence of cognitive delays (American Psychiatric Association, 1994). While a patient could experience difficulties in social and occupational settings, it was viewed more positively compared to autism, which was (and is) stigmatized as a "significant disability" (Hosseini & Molla, 2021).

***Autism in the DSM-5 and Text Revision.*** Autism is a neurodevelopmental disorder which affects 1 in 44 individuals in the United States; males are diagnosed at a rate four times higher than females. There is no singular cause of autism, but research suggests a strong genetic component. Other risk factors include the presence of some chromosomal abnormalities (such as Fragile X syndrome), birth complications, parents conceiving at an *older* age (CDC does not specify age considered to be *older*), as well as having an autistic sibling (Centers for Disease Control and Prevention, 2020). The Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> edition (DSM-5) states that a person must have deficits in the areas of social interaction, communication, and behavior to be diagnosed with autism. Social interaction deficits include

developing and maintaining relationships as well as difficulty with social-emotional reciprocity. Due to restricted interests, an autistic individual may be more concerned with discussing their interests, rather than being engaged in a reciprocal conversation about another person's interests. An autistic person may not initiate social interactions or continue to engage in an interaction or activity. Children may be observed to be engaged in *parallel play*; rather than interacting in a cooperative activity, they may play in the same physical space as another child but be engaged in a solitary activity (American Psychiatric Association, 2022).

Communication deficits manifest in receptive and expressive verbal and nonverbal language. Autistic individuals often have difficulty recognizing social cues such as gestures and facial expressions. They may also have difficulty understanding verbal communication styles such as metaphors and sarcasm. Behavior deficits include four different types: repetitive behaviors, fixed interests, difficulty with transitions, as well as sensory issues. *Repetitive behaviors* consist of self-stimulatory behaviors, or stimming, which may look like hand-flapping, making repetitive vocalizations, or twirling in circles while walking. While neurotypical people may also stim (such as bouncing a leg while sitting, or clicking a pen), autistic stimming may be more noticeable to a stranger who is unfamiliar with the autistic individual. *Fixed interests* may dominate a conversation, but can also consume time and thoughts, with other topics or activities being uninteresting to a person. An autistic individual becomes an "expert" of their interest as they may read or watch media related to their topic. Autistic individuals may also prefer a predictable routine and may exhibit emotional and behavioral difficulty with an unexpected or unplanned change in routine. Sensory issues can manifest as hyposensitivity or hypersensitivity, with autistic individuals becoming overstimulated (or under stimulated) in certain environments (American Psychiatric Association, 2022).

Symptom severity is also outlined by the DSM (American Psychiatric Association, 2013). Although there is previous literature that refers to *high-functioning autism* and *low-functioning autism*, self-advocacy groups caution against referring to the levels as mild, moderate, or severe, due to the misconceptions and stigma that may come from labeling individuals as such.

While only two out of the four behavior challenges must be experienced to receive a diagnosis, all of the social and communication deficits must be experienced. Revisions to the DSM-5 were released in 2022, including minor revisions to autism criteria. Previously, in the DSM-5, autism diagnostic criteria stated that the symptoms are persistent and manifested by the categories described above. DSM-5 TR created a minor change to language including symptoms should be manifested in *all* categories, in an effort to clarify diagnostic criteria (American Psychiatric Association, 2022). When the DSM-5 was published in 2013, the previous individual diagnoses were condensed under a single diagnosis of autism spectrum disorder. Symptoms are categorized into three levels of severity which are dependent on low, moderate, or high levels of support that is needed. Level 1 indicates that an individual would *require support* and may experience difficulties with some changes in their routine or difficulties with social interaction skills. Level 2 symptoms would *require substantial support*, and behaviors may be noticed by someone who is otherwise unfamiliar to the autistic individual. Level 3 symptoms *require very substantial support*, with the autistic individual experiencing behaviors that would impact their daily functioning (American Psychiatric Association, 2013). The DSM-5-TR does not define what support looks like for autistic individuals diagnosed at each of the three levels.

***Autism in Females.*** While the DSM notes that the symptoms should be present early in life, it is not uncommon for a person, especially females, to receive an autism diagnosis in adulthood.

Females are more likely to *mask* or *camouflage* symptoms of autism in an attempt to fit in socially. A female is more likely to attempt to hide, or mask, autistic characteristics in an attempt to appear neurotypical and gain acceptance by peers. Females with autism may experience difficulties with decoding subtle behaviors and nuances in language; these difficulties can make autistic females stand out from neurotypical peers (Cook, et al., 2017). The sole act of masking can also create anxiety due to the emotional toll of attempting to appear neurotypical. Males tend to externalize symptoms more frequently, such as experiencing behavioral outbursts when frustrated or a higher incidence of maladaptive behaviors (such as self-injurious behaviors). Females are more likely to internalize their challenges, resulting in depression or anxiety. Due to the differences in how symptoms are manifested, males are more likely to draw attention and be diagnosed earlier compared to females (Hull et al., 2020). Females who are diagnosed at a younger age may display a delay in development, such as communication. Those diagnosed at later ages may not require a high level of behavior or communication support, but may display difficulties with social interactions, compared to their peers (Corcadden & Casserly, 2021).

### **Roles of School Social Workers**

School social workers can be found in a variety of educational settings, including public, nonpublic, private, and residential schools. Autistic students may attend any of these settings; some students may have an existing diagnosis, while others may not yet be diagnosed as autistic. Understanding the social work values that guide all licensed social work practice can help to inform school social work as well. Social work standards for practice in the school setting are outlined by the National Association of Social Workers, as well as the National Practice Model by the School Social Work Association of America. The guidelines by the organizations provide role clarification in addition to the job duties outlined by individual jurisdictions.

***Social Work Values.*** The National Association of Social Workers (NASW) established a Code of Ethics in 1960 as a guideline for an ethical professional framework for social workers.

According to the preamble of the code, the core values of the social work profession are “service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence” (NASW, n.d.). The core values reflect the work that is done by practitioners, but having an established code that is guided by specific values helps to focus practitioners’ work in the field. Creating a code and declaring values that are important to the field of social work also create a more cohesive profession by stating shared professional values. When social workers hold the above stated values in high regard and with fidelity, others (including clients) can expect consistency in the professional behavior of the practitioner.

Familiarizing oneself with the NASW Code of Ethics can help social work students to form professional identities before officially serving clients as a licensed social worker. Since the Code of Ethics applies to licensed social workers nationwide, a social work student will be able to learn about expectations of professional social work behavior no matter which university they have attended.

***NASW School Social Work Standards.*** The National Association of Social Workers (NASW) has created standards for school social workers to clearly define their roles in the school setting. The standards collectively outline responsibilities that social workers may have in their school building, above and beyond the roles dictated by their individual job description. *Ethics and values* state licensed social workers employed in a school setting are expected to adhere to the values of the field and abide by the NASW Code of Ethics in their work with students. Through the standard of *qualifications*, it is recommended that school social workers hold an MSW



degree from a CSWE-accredited program. Jurisdictions may have varying qualifications, such as advanced licensure or certification, above and beyond the required MSW degree (NASW, 2012).

NASW standards also dictate that school social workers conduct *assessments* to support the student and their social, emotional, behavioral, and academic success in the school setting. This may take the form of classroom observations to gather behavioral data for a Functional Behavior Assessment or interviewing a parent to collect information about a child's strengths and needs. Once information is collected, a social work *intervention* in the school setting may be found appropriate. Social workers must be aware of current evidenced-based practices to use individually with students as well as the school environment as a whole. Another standard to consider as school social work role includes *decision making and practice evaluation*. Data collected by the school social worker will be used to justify goals and interventions used in the school setting (NASW, 2012). For example, a social worker who proposes a social interaction goal on a student's Individualized Education Plan (IEP) should provide data to justify the goal and school-based interventions for achieving the goal.

A standard of *record keeping* in the school building stipulates social workers will maintain "timely, accurate and confidential records" relevant to the students on their caseload (NASW, 2012, p.10). Social workers should be aware of any state and local policies related to maintaining student records. *Workload management* reminds social workers to manage their time during the school day in an efficient manner, addressing priorities while continuing to carry out other duties as assigned (NASW, 2012).

The standard of *professional development* dictates that a school social worker participates in training to enhance professional skills. NASW outlines a standard of *cultural competence* which states a social worker *develop specialized knowledge and understanding of client groups*

*they serve* (NASW, 2012). A school social worker has the opportunity to work with a multitude of groups that have unique needs, including autistic students. It would be likely impossible for a school social worker to become an expert on all groups of students in the school setting but gaining a basic (or in their career, advanced) knowledge of autism can create impact on autistic students' needs in the school setting. Being a culturally competent social worker encompasses awareness and knowledge of disabilities, including autism. Some of the ways providers can improve upon their competence in serving clients with disabilities included training, as well as exploring beliefs about the population that is served, as well as exploring any stigma (Butler, et al., 2016). Stereotyping and assumptions may be made by a social worker due to a lack of knowledge or experience around autism; by increasing educational opportunities in this area, clients can be served with respect and competence. NASW also encourages social workers to engage in *interdisciplinary leadership and collaboration*. To effectively serve autistic students, social workers must collaborate with other service providers; related services (such as speech or occupational therapy services) in the school setting, as well as community providers, can provide information for the student's intervention plan. By asserting oneself as a leader in the school community, the school social worker may provide training on a topic that may help to serve the student. Lastly, social workers are expected to *advocate* in the school setting, not only for their students but for fair and just school policies (NASW, 2012).

***National School Social Work Practice Model.*** School social work is a specialized area in which some jurisdictions require certification to work within the school setting. According to the School Social Work Association of America (SSWAA), the role of a school social worker may include participating in special education meetings, delivering counseling services, modeling

social interaction skills, referring parents to community programs, and providing case management services (SSWAA, 2020).

SSWAA has created a national model for school social work in an effort to establish roles within a school setting, as well as to create consistent practices across undergraduate and graduate education as well as for professional social workers in the field (Frey et al., 2013). The model states that there are three main practice areas, each practice area encompassing various roles for a school social worker.

The first practice area consists of providing “evidence-based education, behavior, and mental health services” (Frey et al., 2013, p. 132). Similar to the NASW standard of intervention, the practice model advises school social workers to evaluate interventions with students for efficacy. Social workers must be able to justify using an intervention to target a goal for students. The second practice area suggests that school social workers are responsible for promoting a school climate which promotes an environment that fosters academic success (Frey et al, 2013). School social workers may find themselves on multidisciplinary teams that work to create positive school climates.

The last practice area, according to the national model, is to connect students and families with resources, both within the school and the community (Frey et al., 2013). Because social workers may provide case management services, when necessary, knowledge of resources within the school jurisdiction as well as in the community is needed. School social workers may be in a position to refer students and families to resources when there is some kind of crisis (such as homelessness) or a new diagnosis that a student and family is learning to navigate.

## **Statement of Purpose**

Social work students as well as professional social workers must have exposure to autism information to be prepared to serve autistic clients. Social work education can improve in preparing competent social workers for field work by exposing them to the information needed to serve clients (Williams & Haranin, 2016). The goals and outcomes of this study have implications on the area of social work education – both at the university level and continuing education opportunities for licensed social workers in the field. About 3% of licensed social workers specialize in serving clients with a developmental disability (Haney & Cullen, 2018). An increase in educational opportunities focusing on developmental disabilities (such as autism) could help to attract more social workers to serve this population.

## **Problem Statement**

There is a lack of research focusing specifically on school social workers who serve students with an autism diagnosis (Oades, 2021). School social workers are in a unique situation because they offer both clinical and case management services to students and families. Professional education can be a path for school social workers to acquire knowledge and skills to serve autistic clients, but the opportunities must exist. Hesitation to serve autistic clients has also been documented. Social workers who have had professional or personal (such as a friend or family member) interaction with a disabled client, or have taken a university course on disability, scored higher on scales measuring attitudes towards the population. Social workers who do not have knowledge or lack interactions with the population may continue to express negative attitudes and beliefs of working with autistic clients (Holler & Werner, 2018).

The study collected survey data (both quantitative and qualitative) on school social workers' competency on the topic of autism. Using competencies developed for school social workers as a guide for survey development, the aim of the study is to answer the following questions:

1. What is the social worker's current level of knowledge on the topic of autism?
2. How have social workers learned about autism?
3. What knowledge and/or skills are needed for school social workers to effectively serve their autistic students?

Survey responses can fill gaps in knowledge that are needed for social workers to serve their autistic students. The responses may also demonstrate the need for autism education, both at the university level for students and professional continuing education for practicing social workers. Responses gathered from survey participants may also have an impact on curriculums for school social work certification programs.

### **Overview of Methodology**

Through the use of survey research, this writer will evaluate how knowledge on autism has been gained (personal experience, formal classes, work experience, etc). Survey questions developed will be based on the *Questionnaire on Autism* (Mavropoulou & Padeliadu, 2000) and the *ASD Knowledge Questionnaire* (Giannopoulou et al., 2019). The results of the study may have some impact regarding the need for educational opportunities for social work students and licensed social workers who are practicing in the field. Understanding how social workers gain that knowledge, especially the opportunities for education, are crucial to ensuring that the field of social work has adequate opportunities for education on the topic of autism.

Research participants will be licensed school social workers in the state of Pennsylvania, where this writer's university is located. This writer has no conflict of interest with participants, due to residing and working in another state. Surveys will be sent to social workers via email, using mailing lists made available to this writer. Responses will be anonymous; the writer will not be able to see which email addresses are associated with individual responses.

### **Reflexivity Statement**

This writer is a licensed, clinical social worker who has worked in the Baltimore-Washington, DC metropolitan area since 2007. The majority of this writer's professional experience has been in a variety of school settings, including a nonpublic special education school located on the campus of a residential group home setting, two nonpublic special education schools, and a public school.

As a school social worker, this writer has served students on the autism spectrum since 2011. They also have a young, autistic nephew. Throughout the autism community, there is a preference for *identity-first* (autistic student) language, rather than *person-first* (student with autism) language. In the past, this writer has used person-first language when referring to students. After reading more literature written by autistic authors and providers, this writer has learned why identity-first language is important to this particular group. Self-advocacy groups, such as the Autistic Self Advocacy Network (ASAN), have stated preference for identity-first usage (Brown, 2011). This writer does not identify as autistic, but in an effort to respect autistic voices, identity-first language will be used throughout this paper.

## Chapter 2: Literature Review

### Introduction

The following chapter includes a synthesis of existing literature on the topics of how social workers are trained, clinical strategies utilized in school social work, as well as existing measurement tools and professional certifications available. The researcher will also present the theoretical framework which guides the research study in this dissertation.

A literature review of professional journals was conducted using the EBSCO and Google Scholar search engines. Keywords included *social work, school, autism, neurodiversity, special education, counseling, mental health*. Boolean operators AND/OR were applied to keywords; publication date was not limited to a specific range. There is a lack of existing literature specific to autism and school social workers; due to this issue, articles related to autism and K-12 education in general appeared more frequently compared to school social work and autism.

### Training of Social Workers

With the current rate of autism in the United States, a school social worker is at an increased chance of interacting with a student that has autism; because a social worker in the school setting may work with both general education and special education students, a competent understanding of autism must be a part of the social worker's working knowledge. Social work students must have exposure to understanding developmental disorders such as autism, as well as practicing social workers who may be serving autistic clients. Social work education can improve in preparing competent social workers for field work by exposing them to the information needed to serve clients; continuing education opportunities can also be an option for practicing social workers to improve their autism competency.

***Autism Education in Higher Education.*** Training in the area of autism for social workers can come through formal education or professional experience. A social worker may be better prepared for some of the challenges they may encounter with clients with an autism diagnosis if they have some basic understanding of the disorder. A long-term goal for the field of social work would be to “increase the capacity of the social work profession to best support people on the autism spectrum through practice, research, and advocacy” (Bishop-Fitzgerald et al., 2018, p.12). Hiring autistic professors in higher education can incorporate lived experiences into disseminating information on autism. Having knowledgeable faculty in this area would be a first step to imparting knowledge to students. Researchers also suggest incorporating more course availability on autism at both the BSW and MSW levels, as well as opportunity to interact with autistic clients. This could include field placement opportunities in community settings (including special education schools) that would give students the experience to work with clients on the spectrum. At the PhD level, the researchers recommend that a mentoring network be available to social workers whose research interest is in the area of autism.

A 2016 study focusing on training in autism found that half of the 53 participants had received training in autism through their education, either classes or internship. The participant population was comprised of marriage and family therapists as well as social workers; it was found that marriage and family therapists were “more likely to report training in ASD...through their professional education” at a rate of 60%, compared to social workers reporting 26%. The study also found that only about 15% of the participants’ supervisors had training in the area, and 22% reported that their employer hosted training on autism. This can lead the reader to believe that more training opportunities in the workplace could benefit clinicians who serve autistic clients (Williams & Haranin, 2016).



To identify the gap in coursework for social workers regarding disabilities (especially autism), Mogro-Wilson et al. introduced an elective class for Master's level social workers which focused on "micro and macro competencies and inclusion of an empowering, strengths-based, family focused, interdisciplinary and lifespan approach" (2014, p. 65). The course featured interdisciplinary guest speakers (such as occupational, physical, and speech-language therapists), and was offered twice during the course of the study (15 participants in the first group, 20 in the second). Course evaluations were taken (student rating average 9.5 out of 10), and the course was added permanently. In this article, the researchers point out that among 93 schools of social work, "27% included disability content in their curricula" (2014, p. 64). Considerations for those course offerings should include how much content is devoted to the area of autism. According to the Council on Social Work Education (CSWE) data on MSW programs, 3.6% of accredited programs offer a certificate program to prepare serving clients with a disability, 1.8% of students gain experience with the population through field education, and 1.1% of accredited MSW programs offer the opportunity to specialize in serving disability populations (Fuld, 2020).

***Practical Autism Training.*** Higher education is not the only setting in which social workers learn about autism. Social workers may be employed in settings that provide opportunities for training to effectively serve autistic clients. A 2019 study in Norway evaluated participants' knowledge of autism gained after participating in a training program. The study also recognized that the staff would benefit from ongoing, practice-based training to remain competent in the field. One way that school social workers can receive the ongoing training in the field of autism is through continuing education opportunities; since most states require that social workers

renew their license every two years, it would be beneficial to seek out social work-specific trainings in the area of autism to maintain competency (Ozerk et al. 2019).

In continuing to analyze how professionals learn about strategies to work with clients with autism, a study by Silva et al. in Brazil evaluated how providers at a psychiatric facility were trained in the area of autism (2018). The study consisted of 14 interdisciplinary participants, including an educational psychology specialist. During the training sessions, staff participated in lectures and watched videos containing examples of symptoms. Participants completed questionnaires as well as responded to open-ended questions about using strategies for particular symptoms presented. Results revealed that staff “exhibited increased knowledge in all 13 subjects” that were evaluated through pre-tests and post-tests (Silva et al., 2018). The study did point out that at times, staff did have to leave the training early to attend to issues that were occurring on the unit, and therefore were not able to participate in complete trainings at times. Methods of training for social workers in the area of autism would be a consideration due to the type of setting, to potentially avoid any issues such as participants’ leaving for work-related obligations. This should be a consideration for professional development in a school building while students are still present. It could be considered to use professional development days as an opportunity for social workers to receive training opportunities in the area of autism.

***Use of Supervision.*** Social workers who are supervisors in the school setting may be in a position to provide learning opportunities to their supervisees in supporting autistic students. The goal of social work supervision is to support and grow skills needed to support students. For example, case presentations can help school social workers discuss challenging situations and gain knowledge from colleagues (Necasova, 2018). Individual and group supervision can allow social workers to gain necessary skills that are specific to the school specialty. Supervision of

other social workers in a school setting encompasses part of the social worker role, although qualifications and training of supervisors may differ among jurisdictions (Richard & Villareal Sosa, 2014). Incorporating information on autism for school social workers can lead to more competent and effective leaders when social workers are promoted into a supervisory role. The supervision process can help social workers gain knowledge and strategies to serve specific populations within the school setting.

### **Clinical Strategies**

One role a school social worker may be tasked with is to model and encourage the use of socially appropriate interaction skills among students, most often between autistic students and those who are neurotypical. In a study by Yazici and McKenzie, the researchers evaluated the “socio-communicative skills” among special education students in Turkey who had a diagnosis of autism (2020). Some of the strategies recommended included peer education (between a student with ASD and a neurotypical student), educational games, reviewing school rules, visuals, and family involvement. There are cross-cultural considerations when reviewing this study, for example (as the study points out) the use of eye contact in American culture compared to other cultures. Eye contact can be an uncomfortable behavior for autistic individuals, yet some therapists encourage it through their work with clients. Reviewing strategies in the US as well as other countries can strengthen the reliability of the strategies, that are found to be effective across many different cultures.

As counseling can be a significant part of a social worker’s role in the school, a student with autism may present with different learning needs rather than traditional “talk therapy.” Some of the strategies for group work, which could be used in the individual setting as well, as appropriate, include incorporating the use of visual strategies including videos, role plays, and art

activities (Cisneros & Astray, 2020). It is important for school social workers to be mindful of the ways in which a person with ASD learns and communicates, most importantly, incorporating the use of visuals in therapy sessions.

### **Existing Tools and Certifications**

***Measuring Autism Knowledge.*** There are several measurement tools in existence to measure a person's knowledge on autism. The *Questionnaire on Autism* developed by researchers Mavropoulou and Padelidu in 2000 and used in an English study to evaluate social workers previous knowledge of autism (Preece & Jordan, 2006). The areas the questionnaire measured included etiology, diagnostic characteristics, and treatment of autism. The researchers recognized that while there is work in educating professionals on autism, training material (such as questionnaires) are not always relevant to targeting a social work audience; some items were changed on the tool to be more appropriate to administer to a social work participant population.

The *ASD Knowledge Questionnaire (ASD-KQ)* includes 24 self-reported questions. Participants' responses are based on a 5-point Likert scale (including "Don't Know" as an option); the higher the participants' score is on the questionnaire indicates more knowledge on the area of autism (Giannopoulou et al., 2019). This questionnaire was initially developed to administer to Greek teachers to measure their level of knowledge on autism, accompanied by a training seminar on autism. While this study did not include social workers, the model of training and survey could be applied to school social workers to evaluate effectiveness of workshops.

A Norwegian study conducted a project on improving competency in autism among primary and secondary educational staff. Staff included teachers, counselors, and child/family workers. The intervention consisted of in-person meetings over the course of two school years.

The meeting goals consisted of various topics related to the topic of autism, case studies, and examining policies that can affect the population. There was also a pre-test and post-test completed by participants. Results showed that there were varying degrees of knowledge gained throughout the study; the most significant improvement in competency was among special education teachers (Ozerk et al., 2018).

***State Qualifications.*** States may have varying requirements for social workers to work in a school setting. For example, any social worker who is employed at a Maryland (where the researcher is employed) public school or a nonpublic special education facility can apply for a School Social Worker certification through the Maryland State Department of Education (MSDE). The applicant also must show an active, valid license issued by the Maryland Board of Social Work Examiners (BSWE). The certificate is approved for five years as a Professional Certification. A social worker must take an Introduction to Special Education university-level course within those five years before renewal of the certification. If the social worker took the course while attending university, the social worker does not have to take the course again. If the course is taken within the first five years, the social worker can apply for an Advanced Professional Certificate - School Social Worker. This is the highest-level certification for school social workers in the state of Maryland (MSDE, n.d.). While the course on special education may include information on autism, it may be minimal as there are other topics covered, including policies and resources as well as responsibilities related to school social workers (such as Individualized Education Plan, or IEP, documentation). Because a school social worker has up to five years to complete the course, they may not take it within their first few years of serving students. If they encounter a student on the spectrum, they may not have enough knowledge or resources to be prepared to serve the student.

Pennsylvania has a similar requirement that a social worker employed in a school setting must hold an MSW from a CSWE accredited program. The social worker must also be certified as a licensed social worker (LSW) or licensed clinical social worker (LCSW) through the Pennsylvania Department of State, Bureau of Occupational Affairs. Beginning in 2023, school social workers will have to show proof of a valid School Social Worker Specialist Certification or be in the process of earning the certificate by being enrolled in an approved program (Department of Education, 2021). Higher education institutions may offer the certification program to social workers employed in a school. For example, the program offered at Kutztown University of Pennsylvania consists of 16 credits; students who are currently enrolled in an MSW program may enroll in the certificate program concurrently (Kutztown University of Pennsylvania, 2021). Certification programs include information related to special education; specific information related to autism may vary among programs and specific offerings related to working with students who have a disability.

***Certifications.*** School social workers may seek out training on their own that focuses on autism. This may occur through continuing education workshops, conferences, as well as seeking out materials such as books and websites that can help them to become a more informed practitioner. Certification programs that may be of interest to school social workers include the Autism Spectrum Disorder Clinical Specialist (ASDCS) and the Certified Autism Specialist (CAS). Training to earn the ASDCS certification is tailored for professionals who have advanced clinical licensure in their respective field, including social work. A minimum of 18 credits in autism-related trainings must be completed to earn initial certification, and 12 credits must be completed every two years to maintain active certification (Evergreen Certifications, n.d.). For social workers who are not working in a clinical setting, there is the option to earn a Certified Autism

Specialist certificate. A social worker must hold a master's degree and have at least two years of experience serving autistic clients. The 14-credit training course consists of topics on comorbidities, behavior modification, program development, early childhood identification, and parent communication. The certification is valid for two years and can be renewed by taking an additional 14 credits of autism related training (IBCCES, n.d.).

There are also autism certificate programs which are offered through higher education institutions. Typically, the programs offer coursework related to educating autistic students. While classroom-based staff may find the information relevant to their roles in the school setting, a school social worker may find the information relevant to their role as well. School social workers may be placed in special education programs where they serve a higher number of autistic students compared to a general education setting and may seek out autism-specific coursework.

***ABA Therapy.*** When maladaptive behaviors prevent a student from being successful in the school setting, one of the roles that a school social worker may undertake is creating and implementing behavioral interventions. A functional behavior assessment (FBA) and behavior implementation plan (BIP) may be facilitated by the school social worker, with input from the classroom team, parent, and student. This task may lead a school social worker to pursue further training in analyzing behavior, as well as certification as a Board-Certified Behavior Analyst (BCBA). Applied Behavior Analysis, or ABA, guides the work by BCBA's. It has been a form of behavior modification that autistic children are often referred to as a way to "treat" maladaptive behaviors. Self-advocacy groups, such as the Autistic Self-Advocacy Network (ASAN), have provided statements on trauma autistic individuals have experienced as children during ABA therapy (ASAN, 2017). There is also literature to reflect autistic experiences with

ABA therapy in research, including individuals becoming dependent on prompts and reinforcements rather than becoming more independent (Sandoval-Norton, et al., 2021). School social workers would benefit from being aware of how the larger autistic community views certain interventions that may be viewed as harmful. Gaining knowledge of evidence-based strategies, whether they are viewed positively or negatively, can help the social worker make an informed and ethical decision about applying interventions in the school setting.

### **Theoretical Framework**

Several theories help to inform the topic of autism competency in the field of school social work. Ecological systems theory (Bronfenbrenner, 1994) explains how systems interact with each other, as well as how the systems can influence each other. It is the overarching theory that informs how students interact with their school environment as well as their family. Understanding this theory assists social workers in understanding student needs, challenges, and supports in different environments. Social learning theory and transformative learning theory explains how professional social workers are motivated to learn new skills and information, as well as supporting adult learning needs. These two theories are necessary in understanding the learning needs and styles of professional social workers before introducing competencies for supporting autistic students.

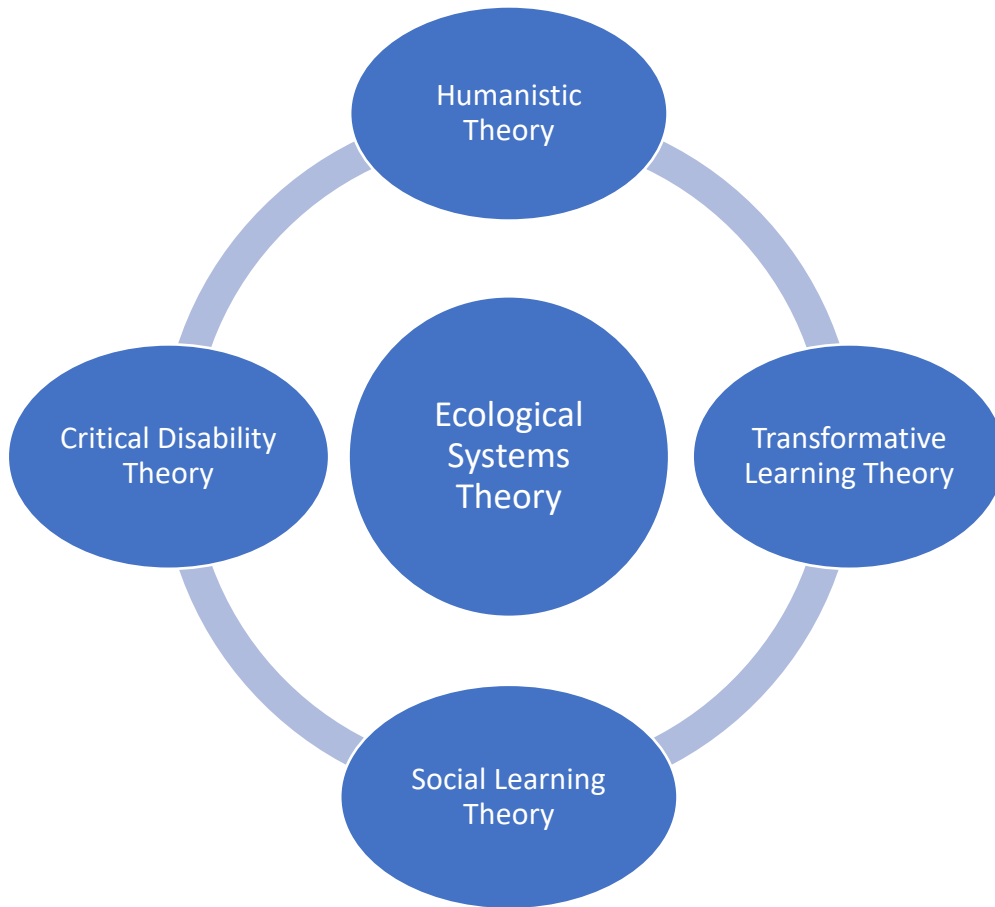
Humanistic theory and critical disability theory inform competent social work strategies and interventions in a manner that respects the neurodiversity of the students served. Operating from a strengths-based perspective, the school social worker can adopt affirming practices in working with autistic students. Using the framework described in this paper to guide school social work, the social worker can ensure that practices and strategies used with students are



delivered in an ethical and respectful manner. These theories help to inform competencies for school social work, later discussed in the Recommendations section.

**Figure 1**

*Theoretical Framework for Autism Competency in the School Social Work Setting*



***Ecological Systems Theory.*** Ecological systems theory is relevant to school social work as the theory can inform roles in different settings. Ecological systems categories include school support practices, home support practices, and community support practices (Thompson et al., 2019). Case management and clinical skills are necessary to carry out job duties in these

categories. A school social worker may provide individual interventions to a student, involve families in school-wide events, as well as create partnerships with community agencies that may benefit students and/or families. Ecological systems theory can also be considered as a framework for supporting special needs and social interactions in the school setting. The theory provides explanation for how the individual's needs may be impacted by inclusion (or exclusion) of social activities with peers in the school setting. Understanding how the autistic student interacts with others in various systems will help to guide appropriate interventions.

Ecological systems theory also explains how larger systems can impact students. The school environment influences students based on social interactions, academic challenges, support from staff and opportunities for extracurricular activities. The family environment impacts the student in a way that may impact the student (positively or negatively) during the school day (Fearnley, 2020). Awareness of ecological systems theory and the impact on students helps to inform social work practice in terms of case management services for the family and school-based supports for the student. Although existing literature on school social work services primarily focuses on case management rather than micro-level interventions (Rafter, 2022), case management services can be a valuable intervention impacting student success in the school setting.

***Humanistic Theory.*** Humanistic theory can be applied to school social workers to understand the individual needs when working with an autistic student experiencing challenges in the school setting. It also places value on creating strong relationships between social worker and client. Working from a relationship-based practice, social workers can respond to individual needs of students (Frost & Dolan, 2021). By placing more attention on the relationship, social workers may be able to move away from using a medical model to analyze a student's situation, and

place attention to the individual student. Humanistic theory reminds practitioners that individual experiences are important to consider in work with clients. According to the Diagnostic and Statistical Manual of Mental Disorders, there are three levels of severity of autism which present a wide range of symptoms (APA, 2013). Autistic students may have different challenges, some requiring more intensive behavioral support while others require minimal social support. In addition to case management, a school social worker may deliver IEP counseling services to autistic students in the school setting. A school social worker who is working closely with a family may also be in a situation to provide family counseling with the student and their caregivers. By integrating cognitive behavioral theory with a humanistic approach to counseling, school social workers can help both staff and families to use the most appropriate strategies to assist the child being successful in the school setting (Hannon, 2014).

Individual symptoms must be considered to create school-based behavioral interventions that are motivating and successful for the student. Working from a humanistic perspective also helps to work from a strengths-based perspective which can help autistic students cope with stressors in the school setting, as their neurotypical peers may be faced with similar stressors as well (Hannon, 2014).

In terms of strategies that social workers can use to serve autistic students, it is suggested to shift away from the medical model. Rather than a socially perceived “hierarchy”, all groups are equal, and symptoms of autism are just another unique characteristic. When shifting thought about clients and their diagnosis, a social worker may be able to look at the client needs from a different perspective (Haney, 2018).

***Social Learning Theory.*** Social learning theory can be applied to the identified problem to address the need for school social workers to learn about the topic of autism. Social learning

theory reminds practitioners that “behavior can be altered,” including behaviors that professionals demonstrate in the field (Weisner & Silver, 1981). If a school social worker is employed by a school and does not have a model of evidenced-based strategies to use in their work with autistic students, they may not know how to address challenges presented in the school setting. But if a school social worker has a network of professionals to model strategies, they can learn methods to apply to their work with students to increase their success in the school setting.

School social workers who are employed in special education settings may have more of a chance to model evidenced-based strategies compared to professionals in other settings. A special education school may have a higher population of autistic students, especially students who may have more intensive academic, behavioral, and/or social needs that a typical general education school cannot meet. School social workers in these settings may be able to learn best practices from each other (especially social workers who are new to the setting) and collaborate on student cases. Because social learning theory looks at aspects not only of the behavior itself, but environmental factors as well, the theory helps to explain if a school social worker is knowledgeable on the topic of autism when considering the type of school setting they are employed in.

***Transformative Learning Theory.*** Transformative learning theory applies to ways that adults can learn. Research may focus on the theory as it applies to a classroom setting, but transformative learning can occur in the field setting as well. The theory examines ways that learners can change their previous perspectives on a topic, based on new information being presented. Reflective practices, including critical thinking, are strategies that are encouraged while examining various points of view on a topic. Transforming previously held beliefs may be

difficult for some, but it is not impossible. The ability to critique perspectives and consider new information to change a perspective can be a fair evaluation of a learner's ability to think critically, both in the classroom and in the field. Being receptive to new information, whether in a conversation or reading a publication, can be a sign that the person is willing to learn and has the flexibility to adapt to more effective strategies to better serve their clients (Nohl, 2015).

Social work educators may witness the transformative learning process in the formal classroom setting, especially when reflective practices are encouraged among their students. Role play situations can be a great exercise for students to start the transformative process. After a role play is finished, allowing the students involved in the role play to share their experience of how it felt to be the "client" or the "therapist" can help students understand situations they may encounter in the field. Allowing other classmates to comment on the role play can lend different perspectives to the role play situation based on information provided by their peers. Considering the perspectives of what their peers observed can help the student shift their thinking about what they could do next time a similar situation occurs with a client. In one study with social work students, when students were given the opportunity to engage in a transformative learning process, half of the participants shared that their views had changed after learning more about the topic (Lorenzetti et al., 2019). When a social work educator allows this type of reflection to occur in the classroom, the process can lend itself to transforming the ideas of the student that can someday be beneficial to the clients that will be served.

***Critical Disability Theory.*** A theoretical perspective that has borrowed frameworks from other theories focusing on marginalized populations (gender, race, sexuality) is the critical disability theory (CDT). The theory has grown from the disability rights movement, evaluating the stigma and oppression an individual experiences as a result of their disability (Fuld, 2020). CDT affirms

the experiences of those with physical and cognitive disabilities, but with “invisible” disabilities as well. Practicing from a CDT-affirming perspective involves the following:

*-Ableism is invisible.*

*-Epistemic violence is experienced by the disabled.*

*-Ableism creates a binary view...when it is more accurate to consider a continuum.*

*-Disability is a socially constructed phenomenon.*

*-The disabled have a right to autonomy and self-determination.*

*-The medical industry commodifies the disabled (Procknow et al., 2017).*

CDT can help social workers to evaluate “problematic cultures of service delivery” in schools as well as among community providers, as well as to acknowledge stigma and social oppression that the population experiences (Fuld, 2020, p. 512). Providing social work intervention through a CDT lens can help to ensure that strategies are chosen and delivered in an ethical, harm-reducing manner.

### **Gaps in Literature**

There appears to be a need of educational opportunities both for practicing social workers as well as social work students. During the literature review process, several articles were located that acknowledged the need for incorporating a disability curriculum (not specific to autism) into social work programs, both at the undergraduate and graduate levels. In the Mogro-Wilson et al. study, the researchers point out that among 93 schools of social work, “27% included disability content in their curricula” (2014, p. 64). That percentage does not specify how much of the information contained autism-specific information. Literature on critical disability theory also highlights the need for social workers to be educated on disability (Thomas-Skaf & Janney, 2021). Autism information would be beneficial to include in both BSW and MSW curricula

(Bishop-Fitzgerald et al., 2018). For doctoral students, it is recommended that mentors be available to social workers whose research interest is in the area of ASD. It appears that course offerings related to autism and developmental disabilities is not widespread, but it is unknown how many students demand the access to the information.

While studies focus on school-based staff and knowledge of autism, social workers are not often included. The Ozerk et al. (2018) study measuring did not include social workers, rather focusing on other professionals working in the school setting. Due to the nature of the school social work role, research may reveal information and needs that are different compared to other school-based professionals that work with autistic students.

### **Conclusion and Implications**

The goals and outcomes of this study have implications on the area of Social Work Education – both at the university level and regarding continuing education opportunities for licensed social workers in the field. The researcher would like to evaluate the level of previous education social workers have received in the area of working with clients on the autism spectrum. Through the researcher's professional experiences in supervising school-based social workers in an outpatient mental health setting, there was a lack of knowledge in serving students with an autism diagnosis. There appears to be a need of educational opportunities both for practicing social workers as well as social work students. While only about ¼ of universities offer disability content in their social work courses, it is unknown how much of that information includes autism content. Licensed social workers may be unprepared to serve their clients if they have never been given even brief, introductory information on ASD. Social work education can improve in preparing competent social workers for field work by exposing them to the information needed to serve clients. Gaining a competent understanding of ASD will help social

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workers be more effective in serving the needs of their students and families. Understanding how social workers gain that knowledge, especially the opportunities for education, are crucial.



## Chapter 3: Methodology

### Introduction

School social workers provide students and families with a variety of services, including clinical counseling, case management, and crisis intervention. Understanding the unique needs of autistic students is essential to ensure that this population of students is provided with a service delivery method that helps them learn best. There is a lack of research focusing specifically on school social workers who serve students with an autism diagnosis (Oades, 2021). Understanding what school social workers know about the topic of autism will help to inform what type of support and resources are needed. The study aims to evaluate the level of knowledge school social workers have on the topic of autism. The study will also explore how school social workers have learned about autism, their experience serving autistic students, and any skills or knowledge they need to serve autistic students in the K-12 public school setting.

School social workers are in a unique situation because they provide both clinical and case management services to students and families. Professional education can be a path for school social workers to acquire knowledge and skills to serve autistic clients, but the opportunities must exist. One goal for the field of social work would be to “increase the capacity of the social work profession to best support people on the autism spectrum through practice, research, and advocacy” (Bishop-Fitzgerald et al., 2018). Hesitation to serve autistic clients has also been documented. Social workers who do not have knowledge or lack interactions with the population may continue to express negative attitudes and beliefs of working with autistic clients (Holler & Werner, 2018).

The purpose of this study is to gain an understanding of the current knowledge school social workers possess on the topic of autism. The study will also explore social workers’ needs

in terms of skills or knowledge required to appropriately provide services to autistic students in the school setting. This chapter will provide a rationale for the chosen study design, a description of the research context and participant population, data collection and analysis methods, as well as limitations to the study.

### **Research Design**

Exploratory mixed methods will be used in the study to explore the topic. Quantitative items will be based on the *Autism Spectrum Knowledge Scale, Professional – Revised* (ASKSP-R) (McClain et al., 2019). The qualitative portion of the study will consist of open-ended questions for participants to provide written responses regarding skills or knowledge on the topic of autism that they would like to learn more about. Since the topic of school social work and autism is one that appears to be lacking substantial research, an exploratory design may be most beneficial in determining the current knowledge and what is needed by social workers serving autistic students.

### **Research Setting**

The study will take place in the state of Pennsylvania, focusing on PK-12 schools. The public school system in Pennsylvania serves 1.7 million students across 500 school districts. According to the Pennsylvania Department of Education, school district sizes range from 200 students to 140,000 students (n.d.). While collecting contact information for school social workers from school websites, it was noted that some districts are as small as two schools, while other districts consist of several schools at the elementary, middle, and high school level. While there are many school districts in the state, not all districts employ a school social worker.

Research will be conducted through surveys that are emailed to participants. A contact list has been developed using faculty contact information listed on school websites. There will be

no interaction between participant and researcher, other than email communication if a participant has a question or concern.

### **Research Participants**

The target population for research participants in the study are licensed social workers who are currently employed at a PK-12 school in the state of Pennsylvania. No vulnerable populations will be involved in the study. Research participants must adhere to Pennsylvania Department of Education staffing guidelines to be a certified *School Social Worker (PK-12)*. This includes active social work licensure (LSW or LCSW) issued by the Pennsylvania Department of State. There are school employees who provide case management and social services to students and families as a certified *Home and School Visitor*, but this certification does not require active social work licensure (Pennsylvania Department of Education, 2011). This study will only include social workers who are currently working in a Pennsylvania school setting and have an active social work license, no matter what their certification is through the Pennsylvania Department of Education.

Beginning in August 2023, all school social workers in Pennsylvania will be required to hold certification as a *School Social Worker, Education Specialist (PK-12)* or be enrolled in a school social work program to actively work towards the certification. The certification continues to require a school social worker to possess a current social work license (LSW or LCSW), issued by the Pennsylvania Department of State (Pennsylvania Department of Education, 2021). Participants in the research study may be enrolled in a school social work program at time of participation in the study, to meet the requirement for the updated school social work certification.

## **Recruitment**

All participants were recruited via email. The researcher obtained a list from a previous DSW graduate from Kutztown University several years prior; the student had created a list of email contacts for school social workers in Pennsylvania to assist with their own recruitment efforts. The list was provided to this researcher, who spent a considerable amount of time cross-checking the staff list with current school social workers listed on school websites. It should be noted that since the original list was created in 2019, it appears that districts across the state have hired more school social workers. About 100 additional staff contacts were added to the email list, bringing the total number of contacts that will be invited to participate to 656. Due to both licensed social workers and other professionals being able to hold a Home and School Visitor certification, it is not consistently clear by looking at a school website which professionals are licensed social workers. Once the new School Social Worker, Educational Specialist certification becomes active in 2023, the certification will provide clarity between which staff are licensed social workers and staff holding other professional degrees. Snowball sampling was also used; the researcher requested interested participants to forward recruitment emails to social workers who may not have their contact information listed on a school website.

A recruitment flier was emailed to all email addresses on file; school social workers interested in participating in the study were able to access links for informed consent and the survey. Electronic signatures collected for informed consent will be stored separately from the survey responses. Participants were able to follow an online link to complete the survey via Survey Monkey. Participants did not have any contact with the researcher during the course of the research study. If any participants experienced any level of emotional stress during the

survey, participants were able to request referrals to counseling resources or to debrief their reactions to the study.

The survey was sent via email to potential participants early in October; the survey was intended to be available for six weeks, closing in mid-November. This timeframe attempted to solicit as many participants as possible. The initial goal was to recruit about 75 participants who complete the survey. Recruiting school social workers at the start of a new school year is not ideal, but the researcher has a limited time to complete the study in. Reminder emails with links to informed consent and survey were sent on a biweekly basis during the six-week period.

The researcher lives in Maryland, but as they attend Kutztown University, they have become familiar with the school social work profession in the state of Pennsylvania. The researcher used convenience sampling, recruiting only Pennsylvania school social workers due to the researcher's familiarity with Pennsylvania school social work regulations. The researcher is also involved with the Center for the Study of School Social Work at Kutztown University; participation in meetings with the Center has provided opportunities for the researcher to learn about regulations and meet stakeholders who have an interest in Pennsylvania school social work.

Overall risk to participants is minimal to none, but it should be noted that there may be a chance of psychological risk. Any participant that has a close (such as familial) connection to the research topic may experience a minimal level of psychological distress when entering responses to qualitative items. The potential for psychological risk is minimal due to the nature of the research topic. Since the researcher is a licensed clinical social worker, participants may debrief if needed. They may also contact the researcher if they feel that they need counseling resources to address any psychological distress that may be experienced while responding to survey items.

There is also minimal to no confidentiality risk. Any participant that includes written statements in response to qualitative items may potentially be revealed if they use words/phrases/language that are particularly unique and/or identifying. This may be a risk to confidentiality if particularly unique phrases are reported in findings of qualitative themes. Informed consent will outline confidentiality, and if participants feel unsure about confidentiality of survey application, they have the option to discontinue their participation.

Participants will not directly benefit from their participation in the research. The study has the potential to inform future higher education curricula and professional development offerings for school social workers on the topic of autism. The potential benefits of research findings outweigh the potential of minimal risks involved.

### **Data Collection Methods**

Data was collected in the form of surveys, using the Survey Monkey application to administer an online survey. This method was chosen to be considerate of participant availability. Given the timing of the survey (at the start of the school year), an online survey that can be completed at the convenience of the participant was expected to elicit a higher rate of participation compared to scheduling live interviews and/or groups with participants. Recruiting school social workers for a study at the start of a new school year may create a challenge for some participants, who may be busy with professional obligations at their assigned school. Social workers who cover multiple schools may not have additional time to devote to participating in a survey that does not contribute to their work tasks.

The goal of the quantitative portion of the survey was to understand what the current level of autism knowledge is among school social workers. Due to personal and professional experiences, there was expected to be a wide range of scores on the quantitative portion. Open-

ended, qualitative questions were utilized to explore how social workers have learned about autism, whether it is through personal connections (such as a friend or family member), formal coursework/training, or professional experience. The qualitative portion also sought to understand what a social worker feels that they need (in terms of support, skills, knowledge, etc.) to appropriately serve autistic students at their assigned school.

Regarding the quantitative survey portion, several previously developed scales were considered. Mavropoulou and Padeliaou's *Questionnaire on Autism* and the *ASD Knowledge Questionnaire (ASD-KQ)* (Giannopoulou et al, 2019) have previously been administered to school staff (not including social workers); in order to make the survey questions appropriate for the participant population in this study, survey questions would require revision to target school social workers rather than classroom-based instructional staff.

The *Autism Spectrum Knowledge Scale, Professional – Revised (ASKSP-R)* (McClain et al., 2019) was identified for use in the study due to the ability to be used across a variety of populations of professionals in the autism field. At the time of the research study, there were no measurement tools specific to measuring autism knowledge among social workers. Existing literature that focuses on school-based professionals and autism knowledge overwhelmingly focuses on classroom teachers as the primary participant population. The ASKSP-R was tested on school psychologists, speech pathologists, and audiologists. Researchers who created the tool acknowledged that there are limitations due to not testing on all school-based professional fields. It should be noted that school social workers are also considered to be related services professionals (due to the nature of their role in the school setting), as are the professional fields that tested the measurement tool. Due to the nature of services provided to students compared to

classroom-based staff (teachers, paraeducators), social workers may provide similar responses as psychologists, speech pathologists and audiologists.

The chosen scale measures the level of knowledge that a professional has on the topic of autism, through a series of 25 multiple choice questions. In an effort to elicit rich responses from participants on the qualitative portion, and to attempt to avoid respondent fatigue, the entire 25 item survey was not administered in this study. Questions that were most relevant to school social workers and basic autism knowledge were chosen for inclusion to this researcher's study. Descriptive statistics were used to report results from quantitative survey items, as well as demographic information on participants.

The qualitative portion of the study consisted of open-ended questions that participants provided written responses to, regarding skills or knowledge on the topic of autism that they would like to learn more about. Participants also shared various ways that they have learned about autism. Qualitative participant responses were analyzed to determine themes among responses that contribute to the findings of this study.

To evaluate validity and trustworthiness of the survey prior to sending to research participants, a small sample of social workers were used to pilot the survey. Social workers involved in the pilot test consisted of school social workers employed at public school district in Maryland, some of whom have experience serving autistic students. Master's level social work interns were also included in the pilot. The researcher requested feedback from the participants in the pilot; the researcher was especially concerned with the amount of time and effort needed to complete the survey. Pilot surveys were completed in five to ten minutes. No participant in the pilot survey raised questions or concerns about the survey.



## **Data Analysis**

A grounded theory approach was used to guide the research and data analysis process of qualitative items on the survey. Grounded theory is a “flexible yet systematic mode of inquiry, directed but open-ended” which can help to glean results from an understudied topic (Charmaz, 2009). Data from qualitative items was uploaded to nVivo software to analyze themes. The results are expected to better understand what social workers need in terms of serving autistic students in school settings. Understanding how social workers have (or have not) learned about autism is important to understand, as it can help to explain the current knowledge on autism as a whole. Qualitative responses may also explain any gaps in autism knowledge, as well as needed skills to serve autistic students.

Because the research topic is not one that there is much literature on, participants will be relied on to guide the theme of the study. Participants bring unique perspectives to the study to provide information on a topic that has not received a lot of attention in school social work. There are studies that focus on what teachers know about autism, but school social workers appear to be consistently excluded from school-based studies (Giannopoulou, 2019; Mavropoulou & Padeliaou, 2000). It is unclear what social workers know and do not know about autism as they have not been exclusively included in existing studies on the topic.

Quantitative data was uploaded to SPSS and Excel software for data analysis. Descriptive statistics was used to report on the quantitative items. Correlations that appear in the quantitative data are discussed in the Findings section of this paper. Specific interest to this study include if there is any linear relationship between scores on autism knowledge and years of school social work, as well as overall autism knowledge scores compared to total years working in the field of social work, regardless of placement in a school setting or another setting.

## **Limitations**

Limitations of the study include sampling school social workers from only one state. Due to states having various requirements for school social work employment, limiting study participants to only one state could impact the views on what social workers need to serve specific student populations. Excluding school social workers who may be placed at private schools may also add to the survey responses in a manner that could add more generalizable results. Differences in autism resources in urban areas of Pennsylvania compared to more rural areas may also impact the knowledge base on autism among school social workers. This may be due to the availability of community agencies that serve autistic clients, as well as resources for autistic students within the school districts. The researcher relied on snowball sampling to include social workers placed at cyber schools, as it appeared that contact information and names of social workers placed at these schools was not readily available on school websites. It is also not clear by reviewing school district information if social workers assigned to in-person schools also serve students at cyber schools.

Respondent fatigue was a concern in this study; due to the nature of including both quantitative and qualitative items, participants may not include detailed responses in an effort to complete the survey quickly. There were also participants (n=4) who did not respond to all survey items; due to incomplete responses, those data sets were deleted. There is a chance that qualitative interviews would elicit a richer dialogue on the topic, and qualitative items on this survey may be explored further in future studies with a smaller participant population. This can be a consideration for future studies, especially to help inform future professional development offerings designed for school social workers.

The timing of the study was not ideal, as it was at the beginning of the school year. The researcher hoped that by recruiting participants in October and November will provide enough time for social workers to be acclimated to their work routine at school. Social workers who are new to the school setting may not participate due to learning routines within the school setting. Social workers who are placed at several different schools or placed in settings that are understaffed may choose to decline participating in the research. School social workers who do not have an interest in the topic of autism may also not be inclined to participate in the study.

### **Positionality Statement**

The researcher first started to work with autistic students in the special education setting in 2011; through supervision, consulting with other staff, professional development trainings, as well as continuing education opportunities, the researcher developed knowledge and strategies to be able to serve students with an autism diagnosis. In addition to a clinical social work license (in the state of Maryland), the researcher earned an additional credential of Autism Spectrum Disorder Clinical Specialist (ASDCS). School-based work has provided the opportunity for the researcher to work with autistic students with a wide range of needs (minimal support to more intensive support needs), as well as serve in the capacity of case manager for families.

During work as a school-based supervisor in the outpatient mental health environment, the researcher noted that the area of social work needs to encourage social workers in the school setting to educate themselves on the topic of autism. While supervising Master's-level school-based social workers, two supervisees had autistic students on their caseload. Both social workers did not have any prior experience working with the population. Individual supervision sessions focused on recognizing symptoms and strategies to include during therapy sessions, as well as locating resources for families. The researcher recognizes the need to introduce social

workers, especially those new to the field, to the topic of autism and how to serve clients based on their needs. The researcher has facilitated a number of in-house professional development workshops on school social work and autism; they have also facilitated workshops for outpatient mental health clinics and presentations at professional conferences on the same topic.

The researcher also has a personal connection to autism; they have a young nephew who was diagnosed at the age of three years. The researcher has observed how early diagnosis and services have positively impacted the child, especially regarding communication skills. The diagnosis has also been the catalyst for other family members to learn about autism and the importance of understanding neurodiverse needs versus placing neurotypical expectations on an autistic child. The researcher would like to include full transparency about personal and professional experience with autism. Professional experiences of the researcher helped to guide the dissertation topic prior to their nephew's autism diagnosis.

## Chapter 4: Findings

### Introduction

School social workers currently employed in the state of Pennsylvania responded to an online survey via Survey Monkey during October and November 2022. Participants responded to quantitative survey items related to autism knowledge, specifically knowledge pertaining to serving autistic students in the PK-12 school setting. The quantitative items were taken from the *Autism Spectrum Knowledge Survey for Professionals – Revised* (ASDKP-R). A total of 10 questions were taken from the original 25 item measurement tool. Qualitative survey items focused on gaining information regarding participant experience with autistic students, as well as training needs related to autism knowledge and social work skills.

This chapter will review participant demographics, including licensure and experience working in the school setting. This section will also report on data collected from the survey, such as scores on the ASDKP-R and needs of social workers. Findings from both the quantitative and qualitative items will be reported.

### Participant Demographics

All study participants worked at a PK-12 school in the state of Pennsylvania. An invitation to participate in the research was sent to a total of 656 school social workers in Pennsylvania. A total of 88 participants responded to the survey. Responses that contained one or more skipped questions were removed from the total data set, leaving a final total of  $n=84$ . Most participants that responded were female ( $n=74$ ) with no transgender or non-binary participants. The rest of the participants indicated that they were male ( $n=10$ ). Ages ranged from 25 years to 64 years ( $M=43.26$ ,  $SD=9.65$ ). Racial and ethnic data were not collected on participants. The study focus ed on the body of knowledge that participants' hold on the topic of autism, rather

than individual demographic characteristics ascribed to each participant. Because the study did not focus on inequities and differences among racial and/or ethnic groups of the participants, the researcher focused on collecting other demographic items (Flanagin et. al, 2021).

**Table 1**

*Participant Gender*

	n	%
Gender		
Male	10	11.9
Female	74	88.1
Transgender	0	0
Non-Binary	0	0
Total	84	100.0

**Table 2**

*Participant Age*

	n	%
Age (in years)		
25-29	8	9.5
30-39	22	26.2
40-49	30	35.7
50-59	20	23.8
Over 60	4	4.8
Total	84	100.0

At the time of survey completion, all participants were social workers (licensed in the state of Pennsylvania) who were employed at a K-12 school setting. Table 3 displays educational degrees obtained by participants. The majority (n=78) had obtained a master’s degree in social work as their highest level of education. There were a small portion (n=6) of participants that obtained a DSW degree, with no participants earning a doctoral degree in any other field other than social work. There were also no participants that identified having their highest level of

education in a field other than social work. Data was not collected on other educational degrees obtained, such as a bachelor’s degree obtained in a non-social work field prior to obtaining an MSW. Only data on the participants’ highest level of education was collected.

**Table 3**

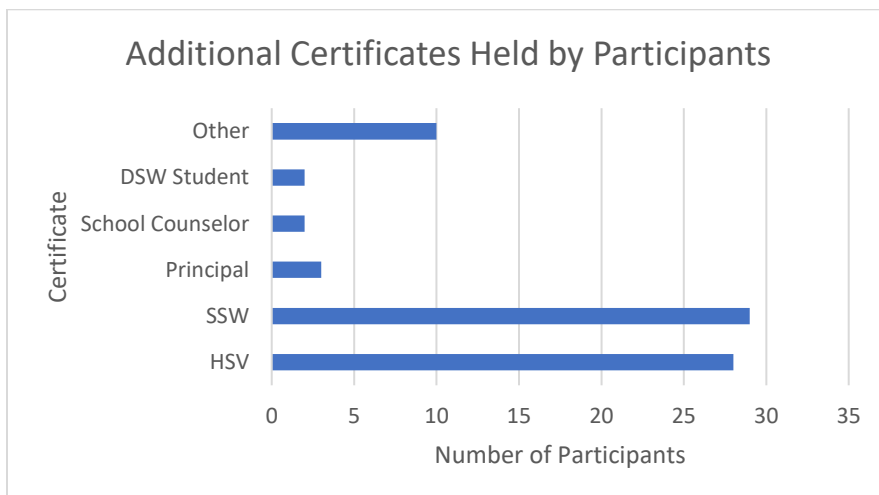
*Educational Levels of Study Participants*

	n	%
Highest Degree		
MSW	78	92.9
DSW	6	7.1
PhD	0	0.0
Other	0	0.0
Total	84	100.0

In addition to social work licensure, participants were asked to list any certifications that they hold that are currently active (Figure 2). Due to Pennsylvania state requirements for being employed in a school system, most listed an active School Social Worker certificate (n=29), a Home and School Visitor certificate (n=28), or both (n=19).

**Figure 2**

*Additional Certificates Held by Participants*



Other certifications (n=10) were listed by participants, both relevant to their role as a school social worker as well as eligible certifications that could be utilized outside of the school setting. Participants that held certifications for other school staff roles included principal certification (n=3), School Counselor K-12 (n=2), special education (n=1), and a Pennsylvania Department of Education certification in Social, Emotional, and Behavioral Wellness (n=1). One participant identified that they hold *multiple certifications in grief, crisis, and suicidality* but did not state what those specific certifications are. Another participant shared that they hold a certification as a licensed social worker in a neighboring state, as well as in Pennsylvania. Other certifications held by school social workers include certifications related to trauma (n=2) and a *Certified Juvenile Sexual Offender Treatment Specialist*. Some participants (n=21) did not respond to this survey item; it can be assumed that they do not hold any additional certifications other than what is minimally required to work in a school in Pennsylvania.

Participants held a wide range of experience working as a licensed social worker, from nine months to 37 years (M=13.2, SD=8.86). Participants were also asked to share how long they have been working in a school setting. Responses ranged from nine months to 28 years (M=12.5, SD=7.4). This data shows that the social workers who participated in this study have spent most of their social work career working in a school setting.

The minimum licensure requirement for a social worker to work in a Pennsylvania public school setting is the Licensed Social Worker certification (LSW). Table 4 displays social work licensure among survey participants. The majority of participants (n=63) currently hold this license, while one participant currently holds a provisional social work license. The participant did not add any details about this, but a provisional license may be held due to moving between jurisdictions after applying for licensure reciprocity. Less than ¼ of participants (n=20) currently



hold Pennsylvania’s advanced social work licensure (LCSW). For the purposes of creating an exhaustive list of options for participants, an “Other” option was available, but there were no participants that identified they held an active license other than the other three options.

**Table 4**

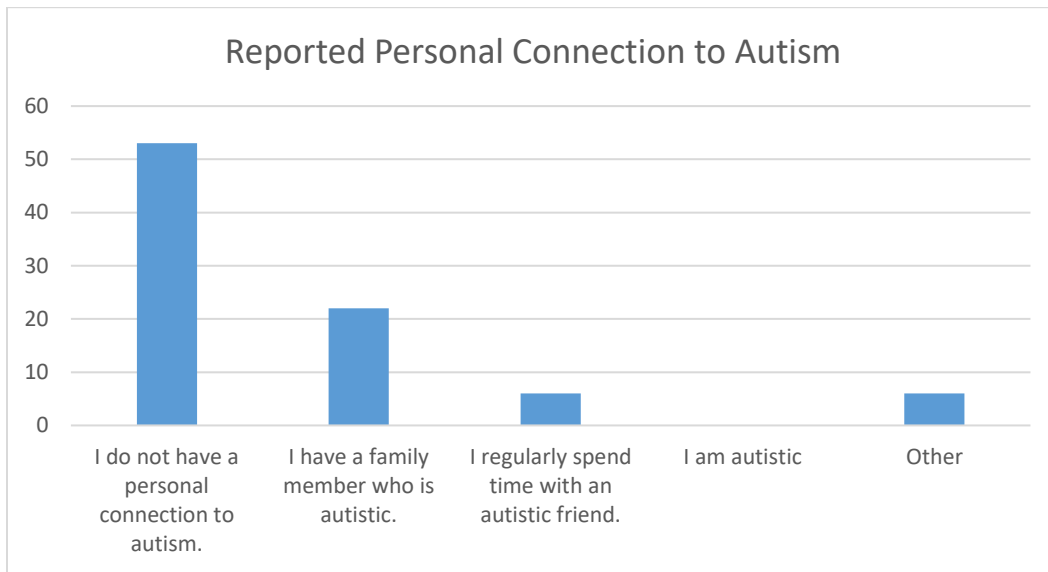
*Current Participant Social Work Licensure*

	n	%
PSW	1	1.2
LSW	63	75.0
LCSW	20	23.8
Other	0	0.0
Total	84	100.0

Participants were also asked to indicate if they have any personal connection to autism. There were zero participants who identified that they are autistic themselves. The researcher was hopeful to incorporate autistic voices into the findings of the research, as this population may have a different perspective on school social work needs compared to neurotypical participants. Participants had the option to identify more than one personal connection to autism; there was also an *Other* option that participants could write a short response. This item was included as having a personal connection to autism can contribute to an individual’s motivation to learn more about autism, as current literature reflects. Figure 3 below displays the responses to the survey item.

**Figure 3**

*Reported Personal Connection to Autism*



There were a few participants ( $n = 6$ ) who wrote responses in the *Other* category. Most of those participants ( $n = 5$ ) described their connection to autism as professional, rather than personal. One participant identified that they work with *many students with autism* but did not share an approximate number of students. Another participant identified that they have worked in *autism support*; the participant did not distinguish whether this role was in a school setting or in a different field. One participant identified that they have an autistic family member *but have very limited contact* with that individual. The participant did not further clarify what it meant to have limited contact with the family member and/or why that is the case.

**Research Question 1**

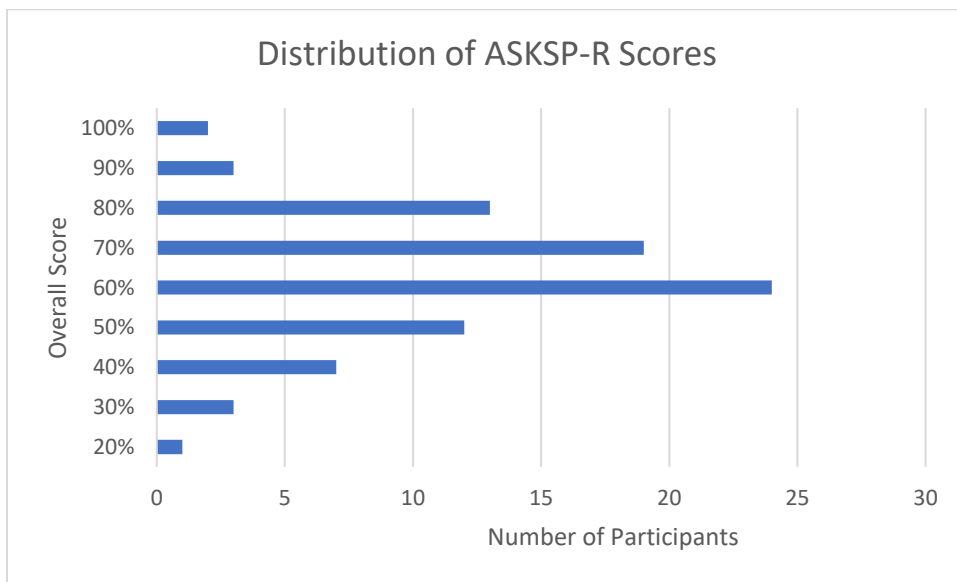
*What is the social worker's current level of knowledge on the topic of autism?*

Participants responded to quantitative survey items related to autism knowledge, specifically knowledge pertaining to serving autistic students in the PK-12 school setting. The

quantitative items were taken from the *Autism Spectrum Knowledge Survey for Professionals – Revised (ASDKP-R)*. The ASKSP-R is a 25-point measurement tool which evaluates a school-based professional’s level of knowledge on autism. The tool has been tested on school professionals such as psychologists, occupational therapists, and speech and language pathologists. A total of 10 questions were taken from the original 25 item measurement tool. The 10 questions were chosen due to their topic best aligning with school social work roles. Questions that were omitted included items pertaining to international or global autism rates as well as items that contained reference to the DSM-5. A more recent edition of the DSM was updated and released in March 2022. The more recent version of the DSM, the DSM-5-TR, contains updates to autism which are not reflected in the current version of the ASKSP-R. The survey was also abbreviated to avoid respondent fatigue, as this research also incorporated qualitative items which required responses.

**Figure 4**

*ASKSP-R Score Distribution*



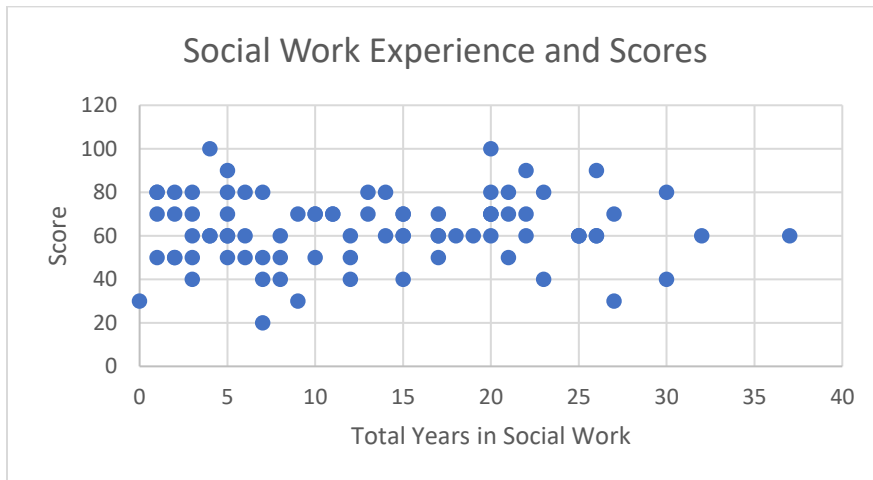
Scores on the 10-point abbreviated ASDKP-R ranged from 20% to 100% (M=62.7, SD=15.7). Figure 2 above depicts a frequency distribution of all scored responses. There was the option of choosing *Don't Know* as a response if a participant was unsure of an answer; these responses were given a grade of 0. There were no survey questions that all participants answered correctly; there were at least one or more participants who responded incorrectly to each item. One item (*Autism spectrum disorder diagnoses are primarily based on...*) only had one participant respond incorrectly; they identified *Don't Know* as their response to this survey item. This particular participant also answered two out of 10 survey items correctly; it is unclear if the participant was rushing through the responses to the survey, or if the survey responses accurately reflect their current knowledge on autism.

There were three survey items which participants collectively displayed a need for an increase in general autism knowledge. The first item on the survey (*Autism spectrum disorder is approximately \_\_\_\_ times more likely to be diagnosed in boys than girls*) revealed a low correct response rate, with 34 participants responding correctly. The second item on the survey contained the lowest correct response rate (*Current estimates suggest that autism spectrum disorder affects approximately \_\_\_\_\_ percent of the population*), with 13 participants answering correctly. The third survey item which contained a low number of participants providing a correct response (n=38) has possible impact on service delivery to siblings within the same school and/or school district. The survey item (*Siblings of children with autism spectrum disorder are...*) aimed to evaluate respondents' knowledge of higher rates of autism among children who have a sibling who are also autistic. If a social worker does not understand that autism rates are higher among siblings and immediate family members, they may not be attuned to another sibling's needs in the school setting if they are autistic but undiagnosed.

Figure 5 below depicts the participant scores on the ASKSP-R compared to total years of experience in the social work field.

**Figure 5**

*Distribution of Total Years in Social Work and Score*



Participants were asked to identify their total years working as a licensed social worker, including settings other than schools. Total years in the field of social work ranged from nine months to 37 years ( $M = 13.2$ ,  $SD = 8.9$ ). Table 5 below displays the descriptive statistics for total years of experience in the social work field and scores on the ASKSP-R.

**Table 5**

*Descriptive Statistics – Total Social Work Experience, Scores*

<b>Descriptive Statistics</b>					
	N	Minimum	Maximum	Mean	Std. Deviation
TotalSW	84	0	37	13.21	8.991
Score	84	20	100	62.74	15.781
Valid N (listwise)	84				

A regression analysis was conducted to evaluate if the total years in the social work field (independent variable) influenced the score on the ASKSP-R (dependent variable). Table 6 below displays the regression model for the variables.

**Table 6**

*Regression Model – Total Years in Social Work, ASKSP-R Score*

**Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.165 <sup>a</sup>	.027	.015	15.65938

a. Predictors: (Constant), YrsSSW

**ANOVA<sup>a</sup>**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	71.099	1	71.099	.283	.596 <sup>b</sup>
	Residual	20599.139	82	251.209		
	Total	20670.238	83			

a. Dependent Variable: Score

b. Predictors: (Constant), TotalYrsSW

**Coefficients<sup>a</sup>**

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	61.378	3.087		19.885	<.001
	TotalYrsSW	.103	.193	.059	.532	.596

a. Dependent Variable: Score

A linear regression model was used to test if the years of experience working in school settings were a significant predictor of higher scores on the ASKSP-R. The fitted regression model was  $ASKSP-R \text{ score} = 61.4 + .10 (\text{total years in social work field})$ . The overall regression was found to be not significant ( $R^2=.003, F(1, 82) = .6$ ).

In reviewing the ANOVA data within the linear regression, there was no significant effect of total years in the school social work field on overall ASKSP-R scores ( $F(1, 82) = .29$ ).

Participants were also asked to identify how many years of experience they have working in school settings. Years of experience ranged from nine months to 28 years ( $M = 12.3, SD = 7.5$ ). Figure 6 below displays the distribution of years of school social work experience and scores on the ASKSP-R.

**Figure 6**

*Total Years of School Social Work Experience and Score*

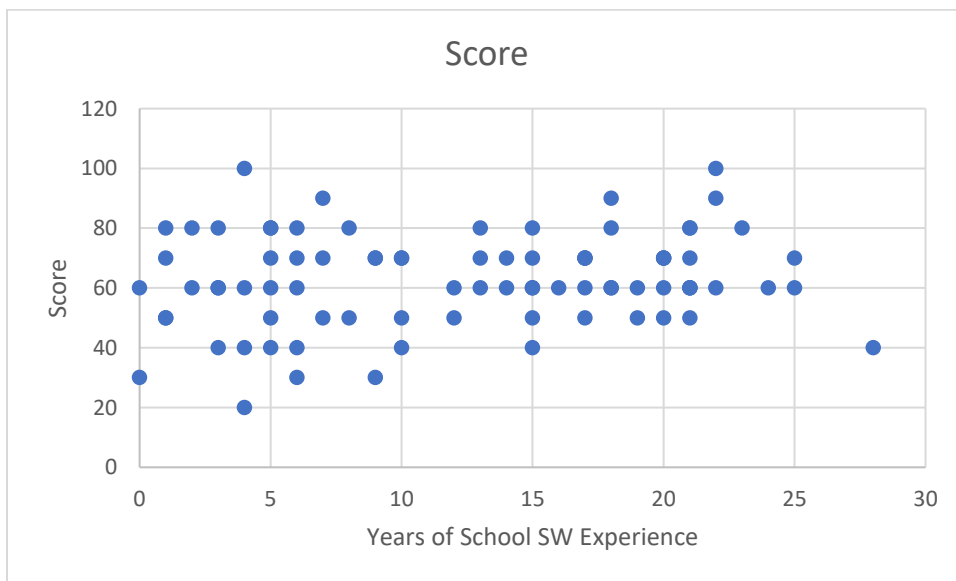


Table 7 below displays the descriptive statistics of the ASKSP-R scores compared to the years of experience participants reported working in a school setting.

**Table 7**

*Descriptive Statistics – Years of School Social Work Experience, Scores*

<b>Descriptive Statistics</b>					
	N	Minimum	Maximum	Mean	Std. Deviation
YrsSchSW	84	.00	28.00	12.2619	7.49638
Score	84	20.00	100.00	62.7381	15.78097
Valid N (listwise)	84				

As with the scores and total years of social work experience, a linear regression model was also conducted to assess if the years working in a school setting (independent variable) influenced the score on the ASKSP-R (dependent variable). Table 8 below displays the regression model used to analyze total years working in a school setting and ASKSP-R scores.

**Table 8**

*Regression Model –Years in School Setting, ASKSP-R Score*

<b>Model Summary</b>				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.165 <sup>a</sup>	.027	.015	15.65938

a. Predictors: (Constant), YrsSSW



**ANOVA<sup>a</sup>**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	562.499	1	562.499	2.294	.134 <sup>b</sup>
	Residual	20107.739	82	245.216		
	Total	20670.238	83			

a. Dependent Variable: Score

b. Predictors: (Constant), YrsSSW

**Coefficients<sup>a</sup>**

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	58.480	3.290		17.775	<.001
	YrsSSW	.347	.229	.165	1.515	.134

a. Dependent Variable: Score

A linear regression model was used to test if the years of experience working in school settings were a significant predictor of higher scores on the ASKSP-R. The fitted regression model was ASKSP-R score = 58.5 + .35 (years in school social work). Findings indicate a moderate positive linear relationship between years in a school social work setting and ASKSP-R scores ( $R^2=.03$ ,  $F(1, 82) = 2.3$ ).

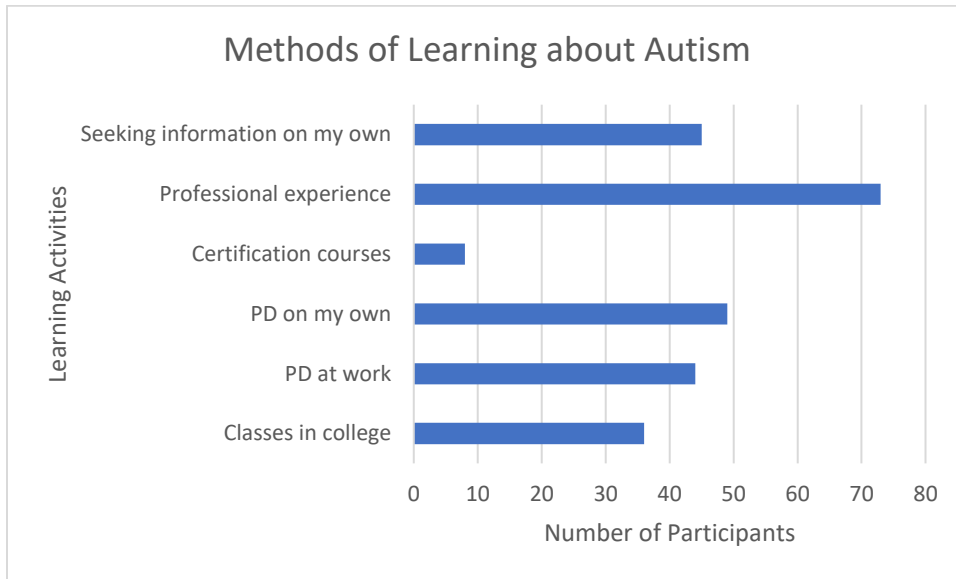
## Research Question 2

*How have social workers learned about autism?*

The survey aimed to understand how participants have learned about autism. A survey item with the option to choose multiple responses collected data on methods of learning about autism. Figure 6 below displays participant responses to the survey item regarding learning activities participants have engaged in to learn about autism.

**Figure 7**

*Methods of Learning about Autism*



The majority of participants (n=71) identified that they have learned about autism through their professional experience. It should be noted that the survey item did not further explore if this professional experience was gained as a licensed social worker or under a different job title. The results of this research also revealed a significant relationship between years of social work experience in a school setting and higher scores on the ASKSP-R, compared to total years of social work experience. This finding is significant because it may point to two different reasons for the finding. First, the finding may reveal the need for more autism content in social work programs, as participants reveal they are learning more about autism in the world of work compared to their coursework. Second, this may suggest that the area of school social work provides more of an opportunity for learning about autism compared to other fields of social work. Recommendations for improving autism knowledge will be further discussed in Chapter 6 of this paper.

Considering higher education as a method of gaining autism knowledge, some participants (n=35) identified that they have learned about autism in college courses. Data on undergraduate versus graduate learning was not collected. The survey also did not ask participants to identify how much of their college course was devoted to autism content. A small number of participants (n=8) identified that they have learned about autism by taking a certification course related to autism content.

Slightly more participants (n=49) indicated that they have learned about autism by attending professional development workshops on their own, compared to participants who indicated that they have learned about autism by attending employer-sponsored trainings (n=44). A similar number of participants (n=45) indicated that they have learned about autism by seeking out information on their own due to their personal interest. The majority of participants (n=63) indicated that they would like to learn more about autism. This finding reveals that social workers are motivated to learn more autism-related content and skills to improve service to autistic students.

**Figure 8**

*Professional Experience with Autistic Students*

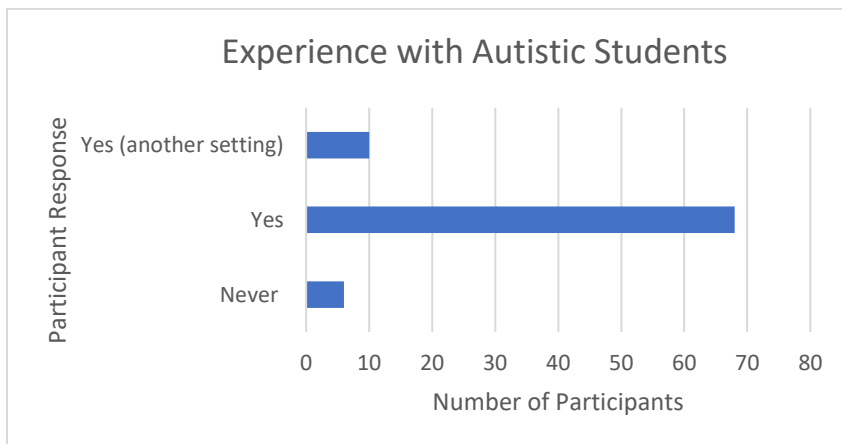


Figure 7 displays participant responses regarding their professional experience serving autistic students. Participants indicated if they have ever worked with autistic students (n=68), if they have worked with autistic individuals in a different setting, but not in a school setting (n=10), and never worked with autistic individuals (n=6). This is important to understand from a supervisory viewpoint, as a school social worker who has never worked with autistic individuals may require more support from their supervisor or coworkers when they encounter an autistic student. It should be noted that the participants in the latter category may have in fact worked with an autistic individual, they may not have been aware of their diagnosis or may have not yet received an autism diagnosis.

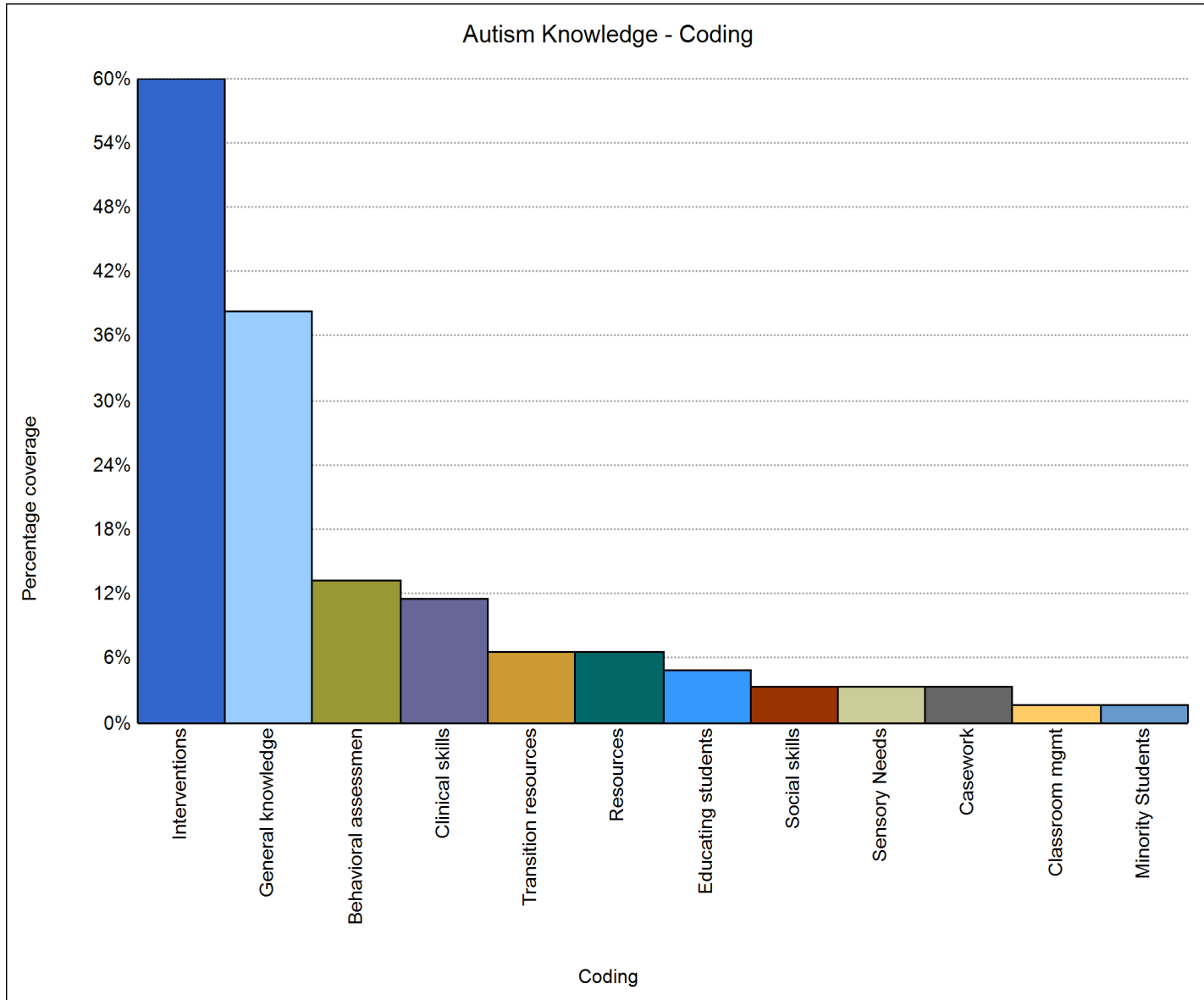
### **Research Question 3**

*What knowledge and/or skills are needed for school social workers to effectively serve their autistic students?*

Some of the qualitative, open ended items on the survey aimed at understanding the needs of participants to provide effective social work services to autistic students. Participants were asked if they would like to learn more about autism, and if so, what they would like to know more about on the topic. The majority of participants (n=63) identified that they would like to learn more about autism. Participants (n=60) shared specific items they would like to learn more about pertaining to autism content; open-ended responses were analyzed using nVivo software. Themes identified while reviewing participant responses are displayed in the figure below.

**Figure 9**

*Themes Identified Among Social Work Needs*



In analyzing qualitative data, the theme of providing *interventions* to autistic students was the most commonly occurring theme. One participant shared that they would like to learn more about *therapeutic interventions for private practice*. While the aim of this study was to focus on the needs of school social workers, the researcher wanted to acknowledge that this is a learning

need identified by a participant who also works in a school setting. Participants identified wanting more knowledge on autism content in general. Participant responses, such as *anything*, were coded as general autism knowledge, as the participant did not note any specific or detailed learning needs.

A theme of *behavioral assessments and interventions* also appeared in participant responses. This was coded separately from *interventions* if participants noted specifically that they wanted to learn about interventions to address interfering behaviors in the school setting. Specific behavioral needs that participants identified in the research include:

*Current behavioral assessments...*

*Behavior and interventions that support positive classroom behavior...*

*I need to know more about how to support a student with autism and how to do behavioral modification and environmental modifications to allow for the most appropriate learning environment.*

Improving *clinical skills* appeared as a need for learning; while some social workers may deliver mezzo-level interventions (such as classroom-based interventions or grade-level interventions), some school social workers may be responsible for delivering IEP counseling services. Providing therapeutic services to autistic students may look different based on their learning needs, and social workers have identified that this is an area that they would like to improve upon. This was coded separately from the generic *interventions* code, as some participants specifically identified motivation for improving therapeutic skills. Social workers who identified wanting to learn more about interventions may have in fact referred to clinical interventions, but as they did not include specific intervention needs, these two areas were coded separately.

Themes of *classroom management* and *educating autistic students* were coded separately as well, as participants identified managing the environment to better support autistic students among the theme of *classroom management*. Classroom-based staff, such as teachers and paraeducators, would be primarily responsible for educating students, but one participant identified that they would like to learn more about this area. *Casework with families* appeared among two responses. One participant identified that they would like to learn more about *how to advocate with families*.

One need that appeared as a theme was general *resources for students*, while other participants identified wanting to learn more about addressing *sensory needs* and *social skill interventions*. One participant noted that they would like to learn more about *interactive play opportunities* for autistic children, but did not specify if this is in the school setting or in the community. Only one participant identified wanting to learn more about how to best serve autistic students who belong to a minority group. The participant's response included wanting to learn about *autism in marginalized populations- information on supporting minority populations*. This finding will be further discussed in the Recommendations chapter of this paper.

## **Summary**

The findings discussed in this chapter include an overview of participant demographics, participant knowledge on autism, how participants have learned about autism, and any learning needs that they may have. Some of the findings can have an impact on the fields of school social work and social work education, while there are areas that need to be studied further in future research addressing autism knowledge among school social workers. Years of school social work experience only had a minimal amount of increased impact on ASKSP-R scores compared to overall experience in the field of social work, but neither variable made a statistically significant

impact as a predictor of increased autism knowledge. Qualitative findings can be significant findings as the topics that schools social workers want to learn more about can inform future workshop offerings.

## **Chapter 5: Analysis and Synthesis**

### **Introduction**

This chapter will analyze the findings of this study compared to the current state of school social work and service delivery to autistic students in the state of Pennsylvania. There will be a reflection on the various ways in which social workers learn about autism, and how those methods can incorporate information on autism to ensure effective and ethical service delivery to autistic students. This chapter also will discuss possible motivation that drives participants to seek out additional training on their own.

### **Note on Honoring Autistic Voices**

The researcher wanted to acknowledge and honor autistic social worker voices and reporting on their suggestions for supporting autistic students. When research is conducted on the topic of an underserved or oppressed population, members from that group should be represented so that their voices are reflected in research findings. Among a total of 88 school social workers who initially responded to the survey, there were no social workers who identified that they are autistic. Information in previous chapters in this paper noted that it is not uncommon for women to receive autism diagnoses well into adulthood for various reasons. It is also becoming more common and accepted in the autism community to acknowledge self-diagnosis, due to barriers in obtaining a formal diagnosis. There is the possibility that some of the participants are autistic and have not yet received a diagnosis. If a participant has received an autism diagnosis or has self-



identified as being autistic, there could have been hesitation to reveal their diagnosis in the survey, even though the survey results are anonymous.

Incorporating autistic social workers' suggestions for serving autistic students would be valuable information to this study. Autistic social workers may share varying views on what needs would benefit school staff in serving autistic students, compared to neurotypical (allistic, or someone who is not autistic) school social workers. It should also be acknowledged that school social work interns were not included in this study; autistic students placed in a school setting for a BSW or MSW field placement may also have valuable information to add that would impact service delivery to autistic students.

### **Motivation for Learning**

Reasons for seeking out autism knowledge was explored in this study. Social workers shared their motivation for seeking out more knowledge on the topic, ranging from professional learning needs to personal reasons. Those social workers who have an intrinsic motivation to learn more about autism, due to their own drive to add to their professional development, may be more inclined to seek out additional training. Social workers who also feel a sense of duty to their autistic students and to ensure they are using the most effective strategies may also be inclined to seek out additional training to learn evidenced-based practices. Some social workers may also have had previous experience, whether a former student, client, or even a friend or family member, which contributes to their motivation to seek out training on autism.

The findings of this study appear to be promising, as most participants (n = 63) identified that they would like to learn more about autism. Most of those participants (n=60) also provided specific learning needs they would like to improve upon regarding autism content. Only one participant identified that they would not like to learn about autism. The participants who

identified that they are motivated to learn more shared areas that they would like to improve upon on a variety of autism-related topics. Participants (n=49) identified seeking out professional development opportunities on their own related to autism content. Cognitive-behavioral theory can explain the motivation for seeking out information independently, without the direction of their employer to do so. Participants (n=45) also identified seeking out information on their own, that was not in the form of a professional development workshop. This could involve completing an internet search to learn more about autism or asking a coworker a question to better understand how to serve autistic students. A discussion on the learning needs of the participants in this study is included later in this chapter.

### **Certifications and Licensure**

The only required current certification is the School Social Worker Certificate, as stipulated by the Pennsylvania Department of Education (2021). As of 2023, the School Social Worker Certificate is required to be employed in a school setting in the state; certificate programs include some level of coursework on serving students with disabilities. The coursework has to meet requirements set forth by the state as well as competencies set forth by NASW. Specific courses vary by institution offering the certification program; it is difficult to determine overall how much of a certification program would include autism-specific information in the coursework on delivering services to students who have a disability. In reviewing the framework for the certification programs, there is reference to the social work role and supporting students with a disability, but there is no differentiation among disabilities (Pennsylvania Department of Education, 2020). Students who have a disability and receive services via an Individualized Education Plan, or IEP, are provided with a disability code as required by the federal Individuals with Disabilities Education Act, or IDEA. Autism is a code

on its own, while there are 13 other disability codes that a child may receive special education services under. A child may be autistic while also meeting criteria for other disabilities, at which time there may be a discussion among the IEP school team if the child should receive services under a code of *multiple disabilities* (IDEA, 2018). As the Pennsylvania Department of Education will require the *School Social Worker Certification* beginning in August 2023, universities across the state are offering certification programs to meet this requirement (Pennsylvania Department of Education, 2021). While the programs will offer content related to disabilities, content specifically focused on autism may vary between universities. A number (n=21) of participants identified that they were not interested in learning more about autism. Because the intrinsic motivation is not a factor among those participants, creating a certification program which does encompass some autism content will ensure that school social workers are exposed to basic information required to understand autistic students.

Requiring coursework related to serving students with disabilities is some progress, but more improvements in social work education and professional social work preparation are needed to move towards competency. Once the new certification requirement goes into effect, a social worker new to the school setting will have to obtain the certification by meeting coursework requirements in a certification program. Social workers who are already licensed (LSW or LCSW) and have worked as a social worker in a Pennsylvania school for at least one year before August 2023 can apply for the certification without taking the additional certification coursework (Pennsylvania Department of Education, 2021). Professionals that fall into this category may not have the opportunity to receive information on autism, due to not having to fulfill the additional education requirements. If a social worker is not motivated on their own to

seek out the information, they may not be equipped to serve autistic students as effectively as social workers taking the School Social Worker Certification coursework.

This study found that a variety of other certifications were listed by participants, both relevant to their role as a school social worker as well as eligible certifications that could be utilized outside of the school setting. Certifications that elevate a social worker's understanding of trauma, emotional, and behavioral challenges may be able to be applied to autistic students. There were also participants who shared that they have a principal certification (n=2); moving into a leadership role within a school building could impact professional development offerings for not only school social workers, but all school staff. These findings speak to the flexibility of the social work degree, specifically in the school setting.

Licensure requirements to work in a school setting vary among states. In Pennsylvania, a social worker may be employed at a public PK-12 setting if they have a minimum of a Licensed Social Worker license, or LSW. This licensure can be obtained after completion of a MSW program and successfully passing the Association of Social Work Board's (ASWB) exam (Pennsylvania Department of State). One participant identified holding a license in another state; there were no other participants that indicated they currently hold a social work license in any jurisdictions other than Pennsylvania.

### **Higher Education**

University-level coursework is one way in which school social workers can be exposed to information on autism-related topics. Most participants (n=78) in the study identified that their highest level of education was the MSW degree. The researcher did not investigate what types of undergraduate degrees that the participants obtained; it is unknown if the participants have obtained undergraduate social work education as well, or education in different fields of study.

The survey asked participants to identify how they have learned about autism, with the option to choose multiple options. Considering higher education as a method of gaining autism knowledge, 41.7% of participants (n=35) identified that they have learned about autism in college courses. Data on undergraduate versus graduate learning was not collected. The survey also did not ask participants to identify how much of their college course was devoted to autism content. Listening to one lecture compared to participating in multiple classes which contain autism content may yield different results in learning about autism related topics.

The terminal degree previously was considered to be the Master of Social Work. With an increase in universities offering DSW programs, more social workers may consider furthering their education. Obtaining a doctoral degree may provide the school social worker with the opportunity to conduct and share research on the topic of autism; this may impact the schools that they serve as well as school staff in their building. Participants may have the option to seek out a program in which they have the opportunity to focus on coursework, research, or field education with a focus on serving neurodiverse clients.

### **Continuing Education**

In the state of Pennsylvania, licensed social workers must take a total of 30 continuing education units to renew their license every two years. If a social worker has to meet this requirement, seeking out workshops on autism may be an option for gaining autism knowledge and expanding their skillset. Participants were asked if they would like to learn more about autism, and if so, what they would like to know more about on the topic. The majority of participants (n=63) identified that they would like to learn more about autism. Participants (n=60) shared specific items they would like to learn more about pertaining to autism content; open-ended responses were analyzed using nVivo software.

The issue of continuing education can be problematic as the social worker must be motivated enough to learn about autism to seek out the information. Not all school social workers may be inclined to attend trainings on the topic of autism on their own. This relates to the previous discussion explaining social workers and their motivation for seeking out trainings on a particular topics. This study found that 58.3% of participants (n=49) shared that they sought out professional development on the topic of autism on their own. While this rate appears to be high, there could be contributing factors that reflect about one out of every two school social workers pursuing courses on their own that contains autism content. Social workers who are interested in the topic of autism may have been more likely to respond to this researcher's emails recruiting participants. The researcher also did not explore how recently the professional development had occurred. A social worker may have taken a course several years ago on the topic of autism, which may not be relevant to current information. The DSM-5-TR was released in March 2022, which contains changes to diagnostic criteria for autism. If a social worker has not received any updated or recent trainings, the autism information they may possess is not current. If a social worker is indeed interested in maintaining current knowledge on autism, as evidenced by the rate of social workers who seek out training on their own, they may make the effort to seek out current and timely trainings.

This study also found that 51.2% (n=43) of survey participants shared that they have learned about autism through professional development sponsored by their employer. As is the case with seeking out trainings independently, the research did not explore how recently the trainings were facilitated. Some participants (n=10) indicated that they have worked with autistic individuals in settings other than schools; the research did not explore whether professional development offerings on autism were facilitated by their current employer (the school) or a



among participant responses. Transition services include services available to young adults in the community, which support the transition from high school to adulthood. This theme was unexpected as PK-12 school social workers would provide services to students, and after graduation would no longer be involved in providing services to the individuals. As the theme of *transition services* appeared in the findings, it is apparent that school social workers are concerned about adult services available to their students once they leave the school setting.

Some of the identified learning needs that emerged from the research include behavioral interventions, addressing sensory needs and social skills of students, and improving school social worker's clinical skills. These topics would all be appropriate to address in professional development opportunities in the school setting. Continuing education workshops outside of the school setting would also be an appropriate manner to deliver the information to school social workers. Social workers have identified that they would like to learn more about autism, and have specified what they need information on, but the opportunities for learning must exist for the school social workers to be able to improve their knowledge and skills.

### **Professional Experience**

School social workers who are employed by a school that serves a larger number of students on the spectrum, such as a special education facility, may receive on the job training regarding information and evidenced based practices to use with students. Experience in this type of setting may help a social worker to also develop competency in autism through their work experience. This study found that the majority of research participants (n=71) have learned about autism through their professional experience, or on the job training. This finding can have implications for higher education curricula and continuing education offerings on autism; if the majority of social workers are learning about autism once they are on the job, rather than in



university or professional classes, they may not be receiving information on the most effective and ethical practices for serving autistic clients. This is also important information for school systems to be aware of. If it is known that social workers learn about autism through their work experiences, this can provide justification for professional development offerings on autism. This is an especially impactful finding not only for social workers in schools, but also for social workers serving autistic clients in other types of settings. This finding can impact ways in which newly hired social workers are trained in settings that serve autistic clients; creating a comprehensive and current training program for social workers is necessary to ensure that employees can effectively serve autistic clients.

As previously discussed, there were also participants (n=2) in the study who identified holding a current principal certification through the Pennsylvania Department of Education. Becoming a school leader can help to guide staff who may be experiencing challenges serving their students; an individual with a social work background and autism knowledge could share resources for classroom-based staff. School social workers also may be in a position to provide professional development to their colleagues in the building; sharing information on autism could benefit other school staff in their interactions with autistic students.

Two of the participants identified that they work part-time in private practice, in addition to their role as a school social worker. It is unknown if other participants hold part-time roles in other types of settings, as only two indicated as such. Social workers who are employed simultaneously in two fields may have the opportunity to learn and gain skills relevant to autistic individuals that can be generalized to their students in the school setting.

## **Autism Knowledge**

Participants responded to quantitative survey items related to autism knowledge, specifically knowledge pertaining to serving autistic students in the PK-12 school setting. The quantitative items were taken from the *Autism Spectrum Knowledge Survey for Professionals – Revised* (ASDKP-R). A total of 10 questions were taken from the original 25 item measurement tool. The ten questions were chosen due to their topic best aligning with school social work roles. The survey was also abbreviated to avoid respondent fatigue, as this research also incorporated qualitative items which required responses. Scores on the 10-point abbreviated ASDKP-R ranged from 20% to 100% (M=62.7, SD=15.7).

As the average score on the ASKSP-R was approximately 60%, it can be assumed that there is a gap in knowledge on the topic of autism. If the responses were a graded assignment in a university course, the average grade would be equivalent to a D, or below average (Kutztown University, n.d.). The number of autistic individuals in the US continues to increase due to advocacy, awareness, and advances in autism research (Zeidan et al., 2022). If a school social worker has not received education on the topic of autism through university coursework or through professional experiences, they have the option to seek out continuing education to gain the necessary skills to effectively serve autistic students.

Out of the 84 participants that completed the research study in its entirety, one participant shared that they have never learned about autism. This participant did identify that they are willing to learn more about autism, specifically identifying that they would like to gain general autism knowledge. The other participants shared that they have learned about the topic of autism through a variety of methods, including coursework, professional work experience, and seeking

out information based on their personal interest of learning more. Participants had the option to identify more than one method of how they have learned about autism.

As the majority of participants (n=71) identified that they have learned about autism through their professional work experience, or on the job training, this is an especially important finding to consider for school social workers. School staff who are supervising school social workers would benefit from possessing autism knowledge so that they can share accurate and timely interventions and resources with their supervisees. If supervisors are not knowledgeable on this topic, they have the duty to understand where they can refer their supervisees to so that the social worker can obtain information and resources to serve autistic students and their families.

Participants (n=2) also identified other ways in which they have learned about autism. One participant identified that they have learned about autism due to *personal experiences with a family member*. Another participant shared *when I started working with children with autism, there were no college level courses or professional development*. The same participant also shared that they learned about autism by reaching out to colleagues, such as *psychologists, OT/speech therapists* as well as their own reading on the topic. This is particularly interesting as it speaks to the importance of interprofessional collaboration in a school setting. While school staff work in the same building, professional staff such as social workers, school psychologists, occupational therapists, and speech therapists all have different types of training and experience serving autistic students. By engaging in collaboration, practices can be shared in a team setting to develop a plan to best serve autistic students who are in need of intervention in the school setting.

## **Summary**

The findings of this study were further discussed in this chapter in regard to the impact on research focusing on school social workers and autism topics. Findings on the three main research questions and the current literature and findings on autism research and school social work in Pennsylvania were synthesized. Further studies on the topic of school social work and autism knowledge may build on this study, as questions requiring further research were also discussed.

## **Chapter 6: Conclusion and Recommendations**

### **Introduction**

Based on the findings of this study, this chapter will discuss recommendations to increase understanding of autism among school social workers. While the study only included school social workers in the state of Pennsylvania, the following recommendations can be generalized to school social workers in any geographic area in the United States. The recommendations are limited to the United States as US federal policies that impact autistic students and existing competencies from US-based professional organizations were used as a reference.

Recommendations include autism competencies for school social workers. While the National Association of Social Workers and the School Social Work Association of America have school social work competencies currently in place, neither organization provides thorough guidance on providing services to neurodiverse students in the school setting. Recommended learning opportunities, including university curricula recommendations, Council on Social Work Education's Educational Policy and Accreditation Standards recommended language on neurodiversity, and continuing education opportunities will be discussed.

### **Recommended Autism Competencies for Social Workers**

Autism competencies for professionals exist, but there appears to be an absence of competencies developed specifically to the unique school social work role. School social workers have the opportunity to support autistic students in the school setting as well as provide resources to their families. Social workers are often the bridge between students, families, and community service providers; they must be equipped with the knowledge to appropriately support autistic students throughout their educational career. Organizations such as NASW and

SSWAA have competencies for school social workers, but their recommendations are vague in terms of serving students with a disability.

NASW outlines a standard of *cultural competence* which states a social worker *develop specialized knowledge and understanding of client groups they serve* (NASW, 2012). A school social worker has the opportunity to work with a multitude of groups that have unique needs, including autistic students. It would be likely impossible for a school social worker to become an expert on all groups of students in the school setting but gaining a basic (if not later in their career, advanced) knowledge of autism can create beneficial impact on the student and their needs in the school setting. As there are 1 in 44 individuals in the US that are autistic, a school social worker is likely to encounter an autistic student.

There are existing autism competencies for professionals who serve autistic clients. At the time of this paper, there were no existing competencies for the social work or school social work audience. A set of competencies for educational staff created by the Autism Education Trust in England provides recommendations for those professionals working in the classroom. The competencies focus on four areas: *the individual pupil* (recognizing student needs and awareness of strengths), *building relationships* (with families, staff, as well as other students), *curriculum and learning* (providing material in a way that student learns best), and *enabling environments* (creating school environments for success of the student). Each area is broken down into areas of *core* competencies and *advanced* competencies. The material is most relevant to classroom teaching staff, especially in the area of curriculum and learning (Whitemeyer et al. 2012). While school social workers may be aware of classroom accommodations for learning, the social work interventions may be more specific to social, emotional, or behavioral functioning, rather than academic performance. A school social worker who has learned about

autism, guided by a specific set of competencies for a social work audience, can transfer the information and skills learned to serving autistic individuals outside of the school setting.

Including a set of competencies specific for school social workers serving autistic students helps to guide social work practice in the school setting. This creates a more focused and specific manner for social work education to ensure that autistic students are served in a way that they learn best. The recommended competencies below may be applicable to school social workers that are in general education as well as special education settings. Since autism is very much a spectrum and can manifest in different ways among individuals, the school social worker may build on the competencies to best meet the individual student needs.

***Competency #1 - School social workers must serve autistic students using anti-oppressive practices.***

Autistic individuals have experienced oppression through some practices that have historically, as well as currently, been accepted as a widely used practice. As licensed social workers bound by the NASW 2021 Code of Ethics, our duty is to incorporate client needs and wishes into interventions, strategies, and goals. It is also the social worker's responsibility to share factual information with families and students who may seek out interventions to assist with challenges experienced by their autistic child. By understanding practices that are viewed as oppressive by the autistic community, social workers can incorporate strategies that help to minimize harm and further reduce trauma to marginalized populations.

If a strategy, intervention, or resource that was previously recommended to autistic clients is later found to be harmful and oppressive, it is our ethical duty as social workers to refrain from further recommendation. Being aware of any trauma that autistic individuals have

experienced from current and/or previous oppressive interventions should be screened for and refer for therapy, if necessary.

Working from the critical disability theory (CDT) can help social workers to evaluate “problematic cultures of service delivery” in schools as well as among community providers, as well as to acknowledge stigma and social oppression that the population experiences (Fuld, 2020). Providing social work intervention through a CDT lens can help to ensure that strategies are chosen and delivered in an ethical, harm-reducing manner.

***Competency #2 – School social workers must be knowledgeable of symptomatology and co-occurring conditions that may affect autistic students.***

Because a social worker in the school setting may work with both general education and special education students, at least a basic understanding of autism must be a part of the social worker’s toolkit. Understanding how symptoms can manifest in the school setting can help to better understand the student and their needs. Being aware of issues that can impact autistic students at school, including masking, sensory processing issues, bullying issues stemming from social interaction challenges, and co-occurring disorders (such as anxiety) is necessary to understand as these can have a negative impact on an autistic student and their success throughout the day. Being aware of individual needs and how a student requires support in the school setting is required to deliver ethically responsible social work services, whether those services are counseling, case management, or consultation with staff.

There were some changes made to autism in the DSM-5-TR; social workers who serve autistic students must be aware of most current information regarding how autism is diagnosed and discussed (American Psychological Association, 2022). Symptoms are categorized into three



levels of severity which are dependent on low, moderate, or high levels of support that is needed. Level 1 indicates that an individual would *require support* and may experience difficulties with some changes in their routine or difficulties with social interaction skills. Level 2 symptoms would *require substantial support* and behaviors may be noticed by someone who is otherwise unfamiliar to the autistic individual. Level 3 symptoms *require very substantial support*, with the autistic individual experiencing behaviors that would impact their daily functioning (American Psychiatric Association, 2022). The DSM-5-TR does not define what support looks like for autistic individuals diagnosed at each of the three levels. Using language surrounding support needs, as opposed to referring to an individual as “low-functioning” or “high-functioning,” is not only consistent with current DSM terminology, but is also an affirming practice.

***Competency #3 – School social workers must be aware of strategies that benefit autistic students.***

Knowledge on best practices for serving autistic individuals can be acquired through a variety of methods. Supervision, colleagues in the school building, and continuing education can provide clinical strategies for use in school settings. Seeking out resources may take more effort on the part of the social worker but may be necessary in order to serve an autistic student in a respectful and ethical manner.

As counseling can be a significant part of a social worker’s role in the school, a student with autism may present with different learning needs rather than traditional “talk therapy.” Some of the strategies for group work, which could be used in the individual setting as well, as appropriate, including the use of visual strategies such as videos, role plays, and art activities (Cisneros & Astray, 2020). It is important for school social workers to be mindful of the ways in

which a person with ASD learns and communicates, most importantly, incorporating the use of visuals in therapy sessions.

Collaborating with the student and family is also necessary. The student can help to guide interventions, and they can share strategies that have worked especially well in the past. If a social worker is neurotypical, it is especially important to listen and respect students' wishes about what they do not like. Collaborating with the family is important to provide consistency between school and home. The student may receive services outside of the school day; the student and/or family may share strategies that work well at home. Since the demands at home and school are different, not all strategies may work across both settings, but it is important to be aware of what has been trialed (Imhof, 2021).

***Competency #4 – School social workers must be aware of federal and local policies that may impact autistic students.***

Federal policies, such as the Individuals with Disabilities Education Act (IDEA), stipulate what a student is eligible for in terms of services in the school setting. Under the Individuals with Disabilities Education Act (IDEA), children with a documented disability are entitled to educational access, just as their non-disabled peers have access. The students who are protected under the act can access the educational curriculum with the addition of modifications and accommodations (per the IEP) to their educational programming. Each IEP is unique to the needs of the student, as documented in the school setting. For students that consistently experience challenges in the school day due to their needs, they may qualify for an IEP.

If a student does not qualify for an IEP, they may be able to qualify for services under a 504 plan to help accommodate any needs related to autism. Because the “definition of disability

is broader than the IDEA’s definition” in Section 504 of the Rehabilitation Act, a student may be eligible for accommodations during the school day, such as “a quiet space if the child becomes upset at school” or allowing sensory breaks (Children’s Mental Health Matters, n.d.). The services and accommodations on 504 plans and IEP’s are not a recommendation; these are legally-binding documents that school staff are required to follow to ensure that a student receives what they need to be successful in the school setting.

***Competency #5 – School social workers must be willing to collaborate with other professions, when necessary, for the benefit of autistic students on their caseload.***

To effectively serve autistic students, social workers must collaborate with other service providers; related services (such as speech or occupational therapy services) in the school setting, as well as community providers, can provide information for the student’s intervention plan. By engaging in collaboration, practices can be shared in a team setting to develop a plan to best serve autistic students who are in need of supports in the school setting. Communication with outside providers (with consent) can help to ensure consistency in service delivery to the individual.

There may be a variety of team members included in team meetings to discuss shared students and their support needs. If there are team members who also serve other school sites, consider schedules and methods of meeting (in-person versus virtual). Each provider and classroom-based staff may have a different experience with the student, depending on expectations and type of setting within the school building. All stakeholders should be included to develop supports for shared students (Imhof, 2023).

***Competency #6 – School social workers must utilize supervision, case consultation, and continuing education to improve service to autistic students.***

Social workers who are supervisors in the school setting are in a position to provide learning opportunities to their supervisees in supporting autistic students. The goal of social work supervision is to support and grow skills needed to support students. For example, case presentations can help school social workers discuss challenging situations and gain knowledge from colleagues (Necasova, 2018). Individual and group supervision can allow social workers to gain necessary skills that are specific to the school specialty. Supervision of other social workers in a school setting encompasses part of the social worker role, although qualifications and training of supervisors may differ among jurisdictions (Richard & Villareal Sosa, 2014). Incorporating information on autism for school social workers can lead to more competent and effective leaders when social workers are promoted into a supervisory role. The supervision process can help social workers gain knowledge and strategies to serve specific populations within the school setting. School social workers in school settings may be able to learn best practices from each other (especially social workers who are new to the setting) and collaborate on student cases.

**Recommended Learning Opportunities**

School social workers can create positive change and implement evidenced-based strategies with students and families when they have the training to do so. Social work education can improve in preparing competent social workers for field work by exposing them to the information needed to serve their future clients in an affirming manner. Social workers may also learn skills from colleagues through on-the-job experiences. Professional learning experiences,

such as in-house professional development and continuing education workshops, are opportunities for school social workers to learn skills applicable to autistic students.

### ***University Curricula Recommendations***

It is recommended that students be exposed to autism-related topics through both required and elective courses offered at the university level. The information can benefit any social work student, not only those that are interested in working in the school setting. Students at both the BSW and MSW levels can benefit from a diverse curriculum which incorporates the opportunity to learn about autism. By creating opportunities for learning about autism, students are better prepared when working with autistic individuals and their families in their field experience and as practitioners' post-graduation.

An article by Bishop-Fitzgerald et al. discusses the need for university faculty to be knowledgeable on the topic (2018). The researchers suggest a long-term goal for the field of social work, which would be to “increase the capacity of the social work profession to best support people on the autism spectrum through practice, research, and advocacy” (Bishop-Fitzgerald et al., 2018). This encompasses their challenge for several areas related to education of social workers, including “hire faculty within schools of social work whose research focuses on autism spectrum disorder” (Bishop-Fitzgerald et al.,2018). Having knowledgeable faculty in this area would be a first step to imparting knowledge to students. Universities have the responsibility to evaluate their faculty and areas of expertise while also reviewing curricula to ensure that it meets the standards set forth by the CSWE.

As this study revealed, most practicing social workers in the study (n=63) would like to learn more about autism. If social workers do not have an adequate knowledge base to serve

autistic clients, information, and resources to improve their skills must be available. Referencing the Mogro-Wilson et al. study, the researchers point out that among 93 schools of social work, “27% included disability content in their curricula” (2014, p.64). That percentage does not specify how much of the information contained autism-specific information. As the Pennsylvania Department of Education will require the *School Social Worker Certification* beginning in August 2023, universities across the state are offering certification programs to meet this requirement (Pennsylvania Department of Education, 2021). While the programs will offer content related to disabilities, content specifically focused on autism may vary between universities.

### ***CSWE EPAS Recommended Language on Neurodiversity***

The Council on Social Work Education (CSWE) is responsible for the accreditation of social work programs and guiding social work curricula through their Educational Policy and Accreditation Standards (EPAS). The Council on Social Work Education (CSWE) calls on social work educators to provide students with learning opportunities to explore issues related to diversity. The CSWE most recent EPAS publication in 2022 encourages accredited social work programs to educate future social workers “who are knowledgeable about the ways positionality, power, privilege, and difference affect practice areas, and how social workers challenge systems of oppression that affect diverse populations” (Council on Social Work Education, 2022).

Understanding neurodiverse populations (which includes autistic clients), clinical best practices, and practices that the population may view as oppressive is necessary. Competency #3 in the EPAS identifies disability as one of the “dimensions of diversity,” along with noting that intersectionality of multiple dimensions of diversity can adversely impact clients that social workers serve.

The CSWE EPAS outlines the accreditation standards that include university curriculum requirements. While the standards and educational policies make reference to *diversity*, this is a broad category that encompasses many dimensions that clients ascribe to. It is recommended that CSWE include language that specifically mentions *neurodiversity*. Neurodiversity is “an umbrella term, including dyspraxia, dyslexia, attention deficit hyperactivity disorder, dyscalculia, autistic spectrum and Tourette syndrome” (Clouder et al., 2020, p.757). The dimensions that encompass neurodiversity include differences in brain function, compared to a neurotypical individual, or someone who does not experience differences in their brain.

Including language on neurodiversity in future EPAS publications ensures that universities are incorporating acknowledgement and discussion of this content in their curriculum. Learning about brain differences that may affect clients can yield strategies and resources that also apply specifically to serving autistic clients. Noting EPAS language on *disability* is not adequate to ensure that neurodiversity is included in university education. Acknowledgement by CSWE ensures that content related to a neurodiverse client population is included in the classroom, as well as validating neurodiverse individuals as ones who deserve to be served by social workers with effective and ethical practices.

### ***Continuing Education Opportunities***

Licensed social workers may be unprepared to serve their clients if they have never been given even brief, introductory information on autism. Continuing education opportunities must be available so that social workers can competently serve clients in an anti-oppressive manner. If a social worker did not have the opportunity to gain autism information through university coursework, professional learning can be an opportunity for gaining skills needed to serve

autistic students. Information and resources presented in a workshop may encourage participants to seek out further information on their own. The issue of developing competency through continuing education can be challenging as the social worker must be motivated enough to learn about the topic to seek out the information.

Not all school social workers may be inclined to attend trainings on the topic on their own but have the duty to ensure that their services are delivered in a culturally competent manner. Referring to the NASW standards for school social work, licensed school social workers have the responsibility to continue professional education to provide services to students (NASW, 2012). According to the standard of professional development for school social workers, continuing education can be an avenue through which autism knowledge and skills are gained, but the opportunities must exist. School leaders may offer autism trainings for school social workers to learn introductory information about serving students with disabilities, including autism. As school social workers may be involved in working with students that receive special education services, professional development related to their role would be appropriate. District-wide trainings for school social workers create learning opportunities as well as a network of support for social workers; consultation with peers who have more experience serving autistic students can be a valuable learning strategy as well.

### **Conclusion**

According to the Centers for Disease Control and Prevention (CDC), autism is a neurodevelopmental disorder which is currently diagnosed in 1 in 44 children in the United States (Centers for Disease Control and Prevention, 2020). With increased screening of children and greater knowledge, education, and advocacy of autism, rates of diagnosis continue to increase across the country. Autism is thought of as a “spectrum,” meaning that there is a wide



range of symptoms and support needs; no two people with autism may require the same support or strategies. Autism primarily impacts the areas of communication, social interaction, and behavior.

With the current rate of autism in the United States, a school social worker is at an increased chance of interacting with an autistic student. Because a social worker in the school setting may work with both general education and special education students, a competent understanding of autism must be a part of school social work knowledge. Not all autistic students require special education support, but having a baseline knowledge of autism is necessary for social workers to deliver effective strategies to autistic students. Understanding the symptoms of autism, clinical best practices to serve autistic students, as well as knowledge of autism-related resources to share with families allow a social worker to appropriately serve students and their families.

Social work students must have exposure to understanding neurodivergent disorders, including autism, as well as practicing social workers who may be working with autistic clients. Social work education can improve in preparing competent social workers for field work by exposing them to the information needed to serve autistic clients, including securing field placements to provide students with opportunities to work with neurodivergent clients. Licensed social workers may be unprepared to serve their clients if they have never been given even brief, introductory information on autism. Continuing education opportunities must be available regarding autism-related content so that practicing social workers can competently and ethically serve clients.

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## Appendix A

### Survey Instrument – Consent Form

#### School Social Work and Autism Competency

##### Consent Form

***This research has been approved by the Kutztown University IRB - approval #03092022***

**If you are a current social worker employed at a PK-12 school in Pennsylvania, please continue reading. If you do not hold an active social work license and/or are not currently employed in a Pennsylvania PK-12 school, please exit the survey.**

##### **CONSENT FORM**

**You are invited to participate in a research study being conducted through Kutztown University. We ask that you read this form and ask any questions you may have before you decide whether or not you want to participate in the study. The University requires that you give your signed agreement if you choose to participate.**

**This study is being conducted by Jami Imhof, LCSW-C**

**Title of the Study:**

**School Social Work and Autism Competency**

##### **Purpose of the Study:**

**The study aims to evaluate the level of knowledge school social workers have on the topic of autism. The study will also explore how school social workers have learned about autism, their experience serving autistic students, and any skills/knowledge they need to serve autistic students in the K-12 public school setting. The study has the potential to inform future higher education curricula and professional development offerings for school social workers on the topic of autism.**

##### **Procedures:**

**If you agree to participate in this study, we would ask you to do the following things:**

**-Review this consent page. If you have any questions before participating in the survey, you may email the researcher.**

**-Survey participation will take approximately 10 minutes; survey questions consist of both multiple choice and written responses.**

**-If you have any questions or concerns once the survey is completed, please email the researcher.**

##### **Risks or Discomforts, and Benefits of Being in the Study:**

**The study has the following risks and/or discomforts:**

**Potential psychological risk: Any participant that has a close (such as familial) connection to the research topic may experience a minimal level of psychological distress when entering responses to qualitative items. The potential for psychological risk is minimal due to the nature of the research topic. The researcher is a clinical social worker, and can be contacted to debrief and/or receive referrals for counseling resources.**

**Potential confidentiality risk: Any participant that includes written statements in response to qualitative items may potentially be revealed if they use words/phrases/language that are particularly unique/identifying.**

**Participants will not directly benefit from their participation in the research. The**

*Consent Form Cont.*

**study has the potential to inform future higher education curricula and professional development offerings for school social workers on the topic of autism.**

**Confidentiality and Anonymity:**

**Records will be kept private and will be handled in a confidential manner to the extent provided by law. In any report or presentation, we will not include any information that will make it possible to identify a research study participant. You will remain anonymous.**

**Voluntary Participation:**

**Your participation is voluntary, refusal to participate will involve no penalty or loss of benefits to which you are otherwise entitled, and you may discontinue participation at any time without penalty or loss of benefits to which you are otherwise entitled.**

**Contacts and Questions:**

**The researcher conducting this study is:**

**Jami Imhof, LCSW-C (DSW candidate)**

**jimho298@live.kutztown.edu**

**Kutztown University, Department of Social Work**

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*Consent Form, Cont.*

School Social Work and Autism Competency

Consent Form (continued)

**You may ask any questions you have now. If you have questions later regarding the research study, you may contact the researcher listed above. If you have any questions or concerns about the rights of research participants, please contact the IRB Committee at Kutztown University at 484-646-4167.**

**Compensation:**

**There is no compensation to participants for their survey participation.**

**Future Research Studies:**

**Identifiers might be removed from the identifiable private information and that, after such removal, the information could be used for future research studies or distributed to another investigator for future research studies without additional informed consent from you.**

**Statement of Consent:**

**I have read the information described above and have received a copy of this information. I have asked questions I had regarding the research study and have received answers to my satisfaction. I am 18 years of age or older and voluntarily consent to participate in this study.**

**By clicking "next" to continue with the survey, you provide your consent to participate in this study.**



*Abbreviated ASKSP-R, Cont.*

5. In order to receive a diagnosis of autism spectrum disorder one must exhibit deficits in \_\_\_\_\_ and exhibit \_\_\_\_\_.

- Attention; social communication deficits
- Social communication; restricted and repetitive patterns of behavior, interests, and activities
- Intellectual/cognitive functioning; social communication deficits
- Social communication; sensory processing deficit
- Don't know

6. In the United States public school setting, children with autism spectrum disorder may be eligible for special education if

- A medical doctor (such as a pediatrician) independently determines it is necessary
- The students' disability has an educational impact
- The student says they want special education services
- Their teacher independently decides it is necessary
- Don't know

7. When assessing a bilingual child for autism spectrum disorder, it is important to obtain language information regarding:

- The child's native language development
- The child's English language development
- The child's English language development and native language development
- Information regarding the English language development of the child only between birth to 2 years of age
- Don't know

8. Autism spectrum disorder is a \_\_\_\_\_

- Neurodevelopmental Disorder
- Trauma-and Stressor-Related Disorder
- Disruptive, Impulse-Control, and Conduct Disorder
- Neurocognitive Disorder
- Don't know

9. Autism spectrum disorder diagnoses are primarily based on

- Behavioral observations and parent/caregiver interviews
- Neuroimaging
- Genetic testing
- Child interviews
- Don't know

10. Siblings of children with autism spectrum disorder are...

- Less at risk for developing the disorder
- At a higher risk for developing the disorder
- At no more or less risk for developing the disorder
- It is unknown if siblings of children with autism spectrum disorder are more or less at risk for developing the disorder
- Don't know



## Appendix C

### Survey Instrument – Autism Experience

School Social Work and Autism Competency

**Autism Experience**

**The following questions will explore your familiarity with autism and attempt to understand what school social workers need (if anything) to serve autistic students in the school setting.**

**\*Self-advocacy groups, such as the Autistic Self Advocacy Network (ASAN), have stated preference for identity-first usage (Brown, 2011). For the purpose of this study, the researcher will use identity-first language in the question formatting below.**

11. Do you have any personal connection to autism? Check all that apply.

I am autistic.

I have a family member who is autistic.

I regularly spend time with an autistic friend.

I do not have a personal connection to autism.

Other (please specify)

12. Do you currently work with autistic students?

Yes

No

I don't know if any of my students are autistic.

13. Have you worked with autistic individuals in the past?

Yes, I have worked with autistic students previously.

Yes, I have worked with autistic individuals in another setting (other than schools).

No, I have never worked with autistic individuals.

14. How have you learned about autism? Check all that apply.

<input type="checkbox"/> Classes in college	<input type="checkbox"/> Professional experience/on the job training while serving autistic individuals
<input type="checkbox"/> Professional development sponsored by my employer	<input type="checkbox"/> Seeking information on my own for my personal interest
<input type="checkbox"/> Professional development I have sought out on my own	<input type="checkbox"/> I have not learned about autism
<input type="checkbox"/> Courses in a certification program related to autism	
<input type="checkbox"/> Other (please specify)	

*Autism Experience, Cont.*

15. Do you want to learn more about autism?

- Yes
- No
- Don't know

16. If you chose "yes" to the question above, please explain what you would like to learn more about related to autism.

17. Do you feel that you are able to serve autistic students at your school in a way that they learn best?

- Yes
- No
- Don't know

18. If you chose "no" to the question above, what do you need to work with autistic students?

19. Are you aware of community agencies that provide autism-related programming that you can refer families to?

- Yes
- No
- Don't know

20. If you have any additional thoughts you would like to add on the topic of autism and school social work, please describe below.

## Appendix D

### Survey Instrument – Participant Demographics

#### School Social Work and Autism Competency

#### Participant Demographics

**Demographic information is collected to understand the participant population that is participating in the research study.**

21. What is your age?

22. I am (check all that apply)...

Male

Nonbinary

Female

Prefer not to answer

Transgender

23. What is your highest level of education?

Master of Social Work (MSW)

Doctor of Social Work (DSW)

Doctor of Philosophy (PhD) in Social Work

Other (please specify)

24. What is your current social work licensure level?

Provisional Social Worker (PSW)

Licensed Social Worker (LSW)

Licensed Clinical Social Worker (LCSW)

Other (please specify)

25. If you have any additional certifications and/or professional licenses that are currently active, please list below.

*Participant Demographics, Cont.*

26. How many years have you worked as a licensed social worker? If less than 1 year, please enter number of months.

Years

Months

27. How many years have you worked in a PK-12 school setting? If less than 1 year, please enter number of months.

Years

Months

## Appendix E

### IRB Approval Form



110 Old Main, PO Box 730, Kutztown, PA 19530

(484)-646-4167

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DATE: October 11, 2022

TO: Jami Imhof, KU Doctorial of Social Work

Dr. Janice Gasker, Department of Social Work

FROM: Jeffrey Werner, Chairperson Institutional Review Board

STUDY TITLE: Autism Competency and School Social Work

IRB NUMBER: IRB03092022

SUBMISSION TYPE: Initial Application

REVIEW TYPE: Exempt

EXEMPT CATEGORY: 2

ACTION: Approved

APPROVAL DATE: October 11, 2022

The Kutztown University IRB has approved the initial application for your research study. Your research study has been assigned the IRB Number IRB03092022. This number must be referred to in any future communications with the IRB.

In addition, the following language must be added to the consent form, "This research has been approved by the Kutztown University IRB – approval # IRB03092022."

Research approved as Exempt will have no expiration date. However, any revisions/changes to the research protocol affecting human subjects may affect the original determination of exemption and therefore must be submitted for review and subsequent determination.

Research must be conducted in accordance with this approved submission. You must seek approval from the IRB for changes and ensure that such changes will not be initiated without IRB review and approval, except when necessary to eliminate apparent immediate hazards to the subjects. You must submit the Application for Revisions / Changes form to the IRB, prior to making changes.

It is your responsibility to report all adverse events / unanticipated problems to the IRB. You must report adverse events that are unanticipated, regardless of seriousness, or report events that are more serious or more frequent than expected.

Records relating to the approved research (e.g., consent forms), must be retained for at least (3) three years after completion of the research. Refer to the IRB procedures regarding records.

Please go the IRB's website to review procedures and to obtain forms as needed. If you have any questions, please contact the IRB at 484-646-4167.

## Appendix F

### Recruitment Email

Greetings Social Workers,

You are invited to participate in a research study on School Social Work and Autism Competency. If you have completed the survey, your participation is greatly appreciated! The survey closes on Wednesday, November 23.

### Participant Requirements:

- Currently employed at a PK-12 school in Pennsylvania
- Active PA social work license

### Study Expectations:

- Complete online survey (approximately 10 minutes)
- Survey contains items on autism knowledge and what social workers may need to support autistic students
- Responses will be confidential; no identifying information will be shared

### Potential Benefits:

- Your responses can help to understand what school social workers know about autism.
- Sharing your thoughts on what is needed to support students may impact autism services in the school setting, as well as professional development for social workers.

### Questions?

Please contact Jami Imhof, LCSW-C, ASDCS (DSW candidate)  
at jimho298@live.kutztown.edu

**Ready to participate? Please click the link below.**

**<https://www.surveymonkey.com/r/JTGF962>**

*This research has been approved by the Kutztown University IRB – approval #03092022*

## Appendix G

### IRB Letter from Momentive (Parent Company of Survey Monkey)

Momentive Inc.  
www.momentive.ai

For questions, visit our Help Center  
help.surveymonkey.com

Re: Permission to Conduct Research Using SurveyMonkey

To Whom It May Concern:

This letter is being produced in response to a request by a student at your institution who wishes to conduct a survey using SurveyMonkey in order to support their research. The student has indicated that they require a letter from Momentive granting them permission to do this. Please accept this letter as evidence of such permission. Students are permitted to conduct research via the SurveyMonkey platform provided that they abide by our Terms of Use at <https://www.surveymonkey.com/mp/legal/terms-of-use/>.

Our SurveyMonkey product/tool is a self-serve survey platform on which our users can, by themselves, create, deploy, and analyze surveys through an online interface. We have users in many different industries who use surveys for many different purposes. One of our most common use cases is students and other types of researchers using our online tools to conduct academic research.

If you have any questions about this letter, please contact us through our Help Center at [help.surveymonkey.com](http://help.surveymonkey.com).

Sincerely,

Momentive Inc.