Research Statement | Xiao Ding

The escalating mental health crisis among U.S. school-aged children is reaching a critical point, exacerbated by both pre-existing trends and the COVID-19 pandemic. A decade-long study from the CDC reports a sharp rise in high school students experiencing persistent sadness or hopelessness, climbing from 26.1% to 36.7%. Nationwide, two-thirds of students in grades 9-12 reported heightened difficulties in completing schoolwork and having experienced emotional abuse or physical abuse. Nevertheless, despite a dire need for crisis intervention serving youth and families, there remains a significant gap in empirically supported crisis prevention and early intervention strategies within the school mental health framework. As a clinical social worker and researcher who works extensively with children, youth, and families, my current research focuses on using solution-focused brief therapy to develop a proactive tier-2 evidence-based group intervention model addressing youth needs for mental health crisis intervention in the context of the school environment.

In the area of identifying mental/behavioral health service needs, I led a study examining changes in parenting protective factors among families vulnerable to child maltreatment who participated in an early childhood development program called Parents as Teachers (PAT). Our findings suggest that participants in PAT experienced positive changes in protective factors, and parental risk factors were linked to changes in parental resilience and children's social-emotional competence over time. This study highlighted the significant influence of protective factors, such as promoting parental resilience in reducing child maltreatment, and was published in *Children* and Youth Service Review. Furthermore, using consensual qualitative research methods, I have collaborated on a study about foster care dating violence called Learning about Healthy Relationships. I examined the interplay of risk and protective factors in youths who were aged out of the foster care system and ways to support them to feel safe and empowered to make informed decisions about their sexual health and relationships. We found that by focusing primarily on warning signs of abuse and the risks of being sexually active, caregivers and child welfare professionals are missing the opportunity to model healthy and trusting relationships, build skills for communication, boundary setting, and negotiating consent. More than anything, youth in our study thrived when they encountered authentic connections with a supportive adult who affirmed that they were worthy of love and being treated respectfully. These findings helped shape foundational aspects of the Texas Foster Youth Health Initiative, a multi-million-dollar grant to build relationships across child welfare and adolescent health systems and to develop and test cutting-edge interventions. The manuscript that came out of this project is currently in press in the journal Violence Against Women. As a final example, in partnership with the Texas Institute of Child and Family Wellbeing, I led two statewide surveys between the start of the COVID-19 lockdown (spring 2020) and the children and youth transitioned back to in-person learning (fall 2021). These two research studies explored the needs and gaps in serving children and families and the impact of mental health and social service delivery during the pandemic. Survey results indicated that even before the COVID-19 pandemic, the three areas that practitioners wanted support most were brief therapeutic interventions, trauma-informed interventions, and crisis response. Research findings of the two surveys were distributed at the 30th and 31st Texas School Social Workers' Conferences and presented as an oral presentation at the 2022 SSWR annual conference. The Texas School Social Work Network hosted training and workshops informed by this research to aid in clinical work with students K-12 and their

families. The work from the 2020 survey resulted in a first-authored publication in the *International Journal of School Social Work*, filling the gap in the literature regarding school social work practice status in Texas over the past three decades.

In the area of intervention, I first authored a book chapter about using the solution-focused approach to crisis intervention in The School Service Sourcebook 3rd edition (in press) in response to practitioners' calls for brief therapy and crisis interventions. This book chapter offers step-by-step guidance for practitioners to understand the co-construction language of solutionfocused brief therapy (SFBT) and apply techniques to help children who suffer from personal life crises due to the aftermath of the pandemic. Moreover, I co-authored a systematic review and meta-analysis of SFBT in community-based services that was published in Research on Social Work Practice. Our findings revealed a statistically significant treatment effect of SFBT on outcomes such as depression, behavioral health functioning, family functioning, and psychosocial adjustment. Importantly, we identified a statistically significant treatment effect in studies that incorporated four to nine techniques across all process categories. This delineates the fidelity and effectiveness parameters of utilizing SFBT for mental health interventions within community settings. Further, over my past three years practicing at a tier-1 (universal) solutionfocused alternative high school in Austin, Texas, I observed a disparity between school social workers' (SSWs) formal job descriptions and their actual roles. Although SSWs often collaborated with counselors and schoolteachers in combating crises, no existing research updated their roles in working in an interdisciplinary environment using evidence-based practices and a multi-tiered approach to serve students and families. Hence, I invited an international team of school researchers to work with me and first authored a scoping review on the state-of-the-art school social work practices. Our research highlighted the significance of tier 2 preventative groups in school social worker-led, school-based mental health services. The research was published in a high-impact journal, School Mental Health, and provided rationales to support my dissertation work to develop a tier-2 solution-focused group intervention model addressing youth in mental health crises.

In recognition of my scholarly work and future research trajectory, I was awarded the Harry Estill Moore and Bernice Milburn Moore Fellowship from the Hogg Foundation for Mental Health and the Solution-focused Brief Therapy Association Research Award to support my dissertation work. My dissertation builds upon my previous research using both quantitative and qualitative research methods in crisis intervention, solution-focused brief therapy, and exploratory studies on service needs and gaps. It's a pilot mixed-methods feasibility study of the implementation of the *Taking Charge-CR*, an SF structured treatment manual that I developed to address students' psychological distress, improve students' wellbeing, hope, solution-focused building skills, as well as academic motivation in response to the impact of COVID-19. My dissertation research will uniquely contribute to the school mental health field and offer practical implications for establishing proactive crisis intervention support in addressing the ongoing youth mental health crisis.

My long-term research plan includes securing federal, local, and private funding to support my efforts in enhancing access to crisis intervention and social work services in school settings, thereby improving students, educators, and families' mental wellbeing and behavioral health outcomes in the post-pandemic era. I intend to expand the pilot feasibility study from my

dissertation into a multi-site clinical trial. Additionally, I aim to foster relationships with community partners and school districts to amplify the impact of an interdisciplinary team-based brief crisis intervention model on children's mental health and academic performance. I also strive to use my research to identify and strengthen the intrinsic and environmental protective factors that boost resilience and mitigate trauma symptoms in children facing life crises. My plans include applying for the NIH R34 Planning Grant for the clinical trial and a K-Series award. Through collaborations with colleagues in special education and educational psychology, I will also seek grant opportunities from the U.S. Department of Education to continually support this essential line of research.