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ADOLESCENT GIRLS WITH EMOTIONAL DISTURBANCE

**UNVEILING THE VOICES: LIVED EXPERIENCES OF ADOLESCENT GIRLS WITH
EMOTIONAL DISTURBANCE IN SPECIAL EDUCATION**

A Dissertation

submitted by

JASMIN R. HAGEN

ADOLESCENT GIRLS WITH EMOTIONAL DISTURBANCE

In partial fulfillment of the requirements

for the degree of

Doctor of Philosophy

LESLEY UNIVERSITY

May 2024

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Dissertation Final Approval Form

Division of Counseling and Psychology

Lesley University

This dissertation, titled: Unveiling the Voices: Lived Experiences of Adolescent Girls with Emotional Disturbance in Special Education as submitted for final approval by Jasmin R. Hagen under the direction of the chair of the dissertation committee listed below. It was submitted to the Counseling and Psychology Division and approved in partial fulfillment of the requirements for the degree of Doctor of Philosophy Degree at Lesley University.

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ACKNOWLEDGMENTS

To the participants:

Thank you for letting me into your worlds and for bravely sharing your experiences with me. Your experiences matter.

Dr. Mageary, my dissertation chair:

Thank you for your unwavering commitment to my learning and growth. You were instrumental in seeing this study through. Your honesty and kindness are bar none. I feel so honored to have had your guidance and leadership during this journey. Thank you.

Dr. Gere, my committee member:

Thank you for shepherding me through the program as challenges arose. Your expertise and practical wisdom have been invaluable in developing my ideas.

Dr. Arches, my committee member:

Thank you for fostering my interest in human connections and community engagement years ago and for coming full circle on this academic journey. Your work and career inspire and motivate me to play the long game.

To my beloved family:

Thank you to my dearest Daniel, you have been my constant companion and cheerleader throughout this long and laborious process. Your love, sense of humor, endless patience, and abundant snacks kept me anchored and full. Thank you to my supportive family and friends, for your endless encouragement, interest in my study, and belief in me.

To my mentors:

Thank you for the countless hours of supervision and guidance my dear Judy Bongiorno. Your big and generous heart inspires me daily and your institutional knowledge and wisdom are

truly invaluable. Joe Theriault, you have believed in me since the exit interview on Keene Pond.

Thank you for investing the time and energy into our relationship and working alongside me each step of the way. Thank you to my editor, Jean Graves. You lit the path when things felt bleak. You helped me find my footing and restored my confidence.

To my Crossroads Connections:

My summers with Crossroads paved a clear path towards working with marginalized communities and learning alongside them. Thank you for igniting that passion and nurturing my development. Thank you to my Crossroads school community that continues to shape my world and professional identity. It is because of our collective work that this study materialized and has meaning.

To my darling doctoral Lesley cohort:

This would have been impossible without your support, camaraderie, and laughter over the past four years. I had hoped that this experience would foster community and connection; it exceeded my expectations. You welcomed my vulnerability and embraced me. Your love, nurturance, compassion, and *hot tips* will be cherished.

DEDICATION

This work is for all the girls who are making their way through special education. I am inspired by you, honored to know you, and grateful to learn with you.

ABSTRACT

This dissertation addresses a significant gap in existing research by exploring lived experiences of cisgender female adolescents (Grades 7–12) diagnosed with emotional disturbance (ED) in the U.S. Current statistics indicate that 28% of students in special education with an ED diagnosis are girls; yet, their perspectives remain largely absent from scholarly discourse. Rooted in critical constructivism, critical feminist theory, and dis/ability studies and critical race theory (DisCrit), this qualitative study aims to elucidate insights that can enhance academic success and elevate high school graduation rates for this demographic. This research investigates the experiences of seven participants from New England, representing both self-contained and inclusion special education settings. Participants engaged in interviews and vision board exercises in order to examine the question, “How do cisgender female adolescents with ED experience either a self-contained classroom or an inclusion setting tailored to their disability?” The analysis reveals four key findings: negative school experiences; meaningful relationships and connection to nature and animals; school staff attunement to student mental health and trauma; and creative pursuits and the hope for the future. This research contributes to a deeper understanding of the experiences of adolescent girls in special education with ED and offers implications for interventions, teaching practices, policies, and future research endeavors. Findings underscore the necessity of incorporating student voices into development of educational practices, ultimately fostering a more inclusive and effective learning environment for this marginalized population.

Keywords: special education, disabilities, emotional disturbance, adolescence, substantially separate, hybrid model.

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CHAPTER 1: INTRODUCTION

The civil rights and disabled rights movements of the 1950s, 1960s, and 1970s are intrinsically connected to the creation and evolution of special education legislation in the United States (Aron & Lopreset, 2012; Longmore & Umansky, 2001; Smith & Kozeski, 2005). As grassroots activists and parents fought for disability rights, tension grew and was fraught with pushback. Ultimately, the disability movement prevailed and promoted litigation and legislation to ensure all students had access to education through legislative change (Longmore, 2020; Spaulding & Pratt, 2015). Only one in five children with disabilities attended school in 1970 (Katsiyannis et al., 2001; U.S. Department of Education, 2020). After much lobbying and litigation, the Education for All Handicapped Children Act (EAHCA) was passed in 1975. It was later renamed the Individuals with Disabilities Education Act (IDEA) in 1990. In the 2020–2021 school year, over seven million students, or 15% of all public-school children, received special education services under the IDEA (National Center for Education Statistics, 2022).

The EAHCA focused on how students were identified for services and how they were educated. It also examined how schools implemented evaluation of interventions, provided rights and due process for children and their families, and authorized funding to provide incentives and compliance from states (EAHCA, 1975). In response to federal funding, the federal government and individual states partnered to educate students with disabilities (Huefner, 2000; Katsiyannis et al., 2001). This era of educational reform was guided by societal and cultural trends that shifted public perceptions of people with disabilities (Carey, 2009; Spaulding & Pratt, 2015; Trent, 1994). Consequently, disability was successfully framed as a civil rights issue, and education reform continues through federal mandates, education, evaluation, and research (Dybwad, 1968; Spaulding & Pratt, 2015).

Disability studies scholars recognize how IDEA advanced the progression from granting eligibility of services to children with disabilities to providing meaningful and measurable services (Katsiyannis et al., 2001). However, tension remains among scholars, educators, and activists on the effectiveness of the legislation (Burke, 2013; Kauffman et al., 2018; Kirby, 2016). There are also concerns regarding student access to and participation in education (King Thorius & Tan, 2016). Specifically, scholars argue that IDEA frames disability as a deficit and justifies excluding some children from general education (Reid & Knight, 2006), thereby perpetuating a hegemonic practice (Reid & Weatherly Valle, 2004). Furthermore, a disproportionate number of students of color are represented in special education (Hanni, 2020). Scholars criticize this disproportionality “as a means of reproducing societal discrimination and inequalities” (Thorius & Stephenson, 2012, p. 26). Black and African American students are also overrepresented in the category of emotional disturbance (Council for Children with Behavior Disorders, 2013; Donovan & Cross, 2002). Additionally, longitudinal studies, including the Special Education Elementary Longitudinal Study (SEELS), the National Longitudinal Transition Study-2 (NLTS2), and the National Adolescent and Child Treatment Study (NACTS), reveal relatively small gains in academic achievement, social interactions, and long-term adult outcomes for students with ED (Wagner et al., 2006). These studies and attitudes leave one questioning the efficacy and equality of special education services.

Data indicate that 28% of students in special education diagnosed with an emotional disturbance diagnosis (ED) are girls (Office of Special Education Programs, 2020).

Throughout this dissertation, I use the federally supported term, *emotional disturbance*.

However, during the participant recruitment process, I used the term *emotional impairment (EI)*, as it is the codified language in the state of Massachusetts.

Research indicates a clear need for special education and highly specialized services to meet the diverse needs of students (Hocutt, 1996). Indeed, students with ED have the lowest graduation rate among all students in special education (Wagner et al., 2005). Significant gaps exist in our understanding of the school-based experiences of girls with ED. Few studies look at the intersectionality of special education and ED for girls. This dissertation sought to understand the lived experiences of girls with ED who receive special education services in an urban school district in Massachusetts. The analysis of their experiences may shape and influence future interventions, teaching, policy, and interventions.

The voices of students with ED who are actively in special education are largely missing from the research. Engaging adolescents about their experiences will better inform educational practices; and research centered on girls will amplify their voices and lead to more effective gender-informed practices. The present research aims to draw attention to underrepresented voices that are often silenced (Tierney, 1994). Critical feminist epistemological assumptions support me to recognize the multiple realities and consider how educational approaches and interventions could be reconstructed based on the diverse needs and realities of this population. Additionally, disability studies and critical race theory in education (DisCrit) and trauma theory will serve as tools for discernment that anchor my analysis. I also use stigma theory, relational cultural theory, and ecological systems theory to investigate how trauma, special education stigma, and school relationships impact the academic success of girls with ED.

It was essential for me to embrace a position of hope throughout the research process and to hold onto the possibilities for discovery when acknowledging and inviting difference into the dialogue. The present work is rooted in bell hooks' (1990) notion that "the shared space and feeling of yearning opens up the possibility of common ground where all these differences might

meet and engage one another” (p. 13). This study seeks to explore how cisgender female adolescents, grades 7–12, who have qualified for an individual education program (IEP) under the classification of emotional disturbance, experience either a self-contained classroom setting or an inclusion setting to specifically address their disability. The purpose of this question is to learn directly from students what it is like for them to be in school and receive support for ED. I want to explore this topic of inquiry, as it has been understudied and the student perspective has not been valued.

Definition of Key Terms

A term used throughout this dissertation is *special education*. Special education is a specially designed, free instruction created to meet the needs of children with disabilities (IDEA, 2004, § 300.39). *Disabilities* are defined as intellectual disability, a hearing impairment (including deafness), a speech or language impairment, a visual impairment (including blindness), emotional disturbance, an orthopedic impairment, autism, traumatic brain injury, or other health impairment, a specific learning disability, deaf-blindness, or multiple disabilities, and needs special education and related services (IDEA, 2004, §§300.304). The present research focuses on students with emotional disturbance.

Emotional disturbance occurs when a student’s behavior, interpersonal relationships, mood, physical symptoms, or fears of school impacts their academic functioning and academic success in school (IDEA, 2004, § 300.8.c.4). Different states use different terms to refer to emotional disturbance, but for continuity I will use ED throughout. This definition will be explored in greater detail in Chapter 2.

When I refer to *adolescence*, I indicate the stage of development that encompasses middle school through high school (Curtis, 2015). At this point in their development, adolescents

are becoming more independent, can see varying viewpoints and perspectives, and are developing principled moral judgment (Byrnes, 2003; Curtis, 2015; Smetana & Turiel, 2003).

I refer to special education students as being in either an inclusion classroom, a substantially separate classroom also known as self-contained classroom, or a hybrid classroom. IDEA (2004) mandates that children are served in the Least Restrictive Environment (LRE). In the *inclusion* model, students receive all their special education services in the general education classroom with support (IDEA, 2004). Students who are in *substantially separate* classrooms have a modified curriculum, modified accommodations, smaller class sizes, and a lower student/teacher ratio (IDEA, 2004). A student is in a *substantially separate* classroom or program as it is determined necessary for the student to make adequate progress *on social/emotional and/or academic goals*. In the *hybrid* model, students spend time in both special education and general classrooms (IDEA, 2004). In this study, I determined each participant's educational setting by asking each participant about their school environment.

Research Design

My research was directly informed by my professional career and my personal experiences. In my clinical sessions, I use different art media to support students in processing their lives and trauma. In my personal life, I use the process of creating art to soothe, regulate, and communicate. Qualitative research is personal in nature and the researcher is the “instrument of inquiry” (Patton, 2015, p. 3). This research uses a phenomenological approach to focus on the human experience (Wertz et al., 2011), and specifically to explore experiences of girls in special education with ED. Participants were engaged in art-informed research and individual interviews to understand the lived experiences of being in school with an ED diagnosis. All data were

reviewed and analyzed multiples times to identify themes. The methodology and theoretical underpinnings are discussed in detail in Chapter 3.

The present research focuses on communicative structures, style, and how communication relates to the holistic human experience (Carspecken, 1996). Paulo Freire (1970/2018) paid close attention to dialogue and warned others to not just deposit ideas and consume them but to truly engage in dialogue, which becomes an act of creation between people. This focus is essential as there are endless way to communicate and interpret what is being said and left unsaid.

In an effort to engage with the participants, I implemented an arts-informed methodology to enhance my research. Students with ED may need various avenues to communicate their experiences. Arts-informed research was deployed “to enhance understanding of the human condition through alternative (to conventional) processes” (Cole & Knowles, 2007, p. 59).

Furthermore, I embraced a loving and caring attitude for participants throughout the journey. Tierney (1994) instructed researchers to build capacity for empathy within our work by connecting with the participants. In doing so, research participants truly open up and share authentically. Freire (1970/2018) insisted that “dialogue cannot exist, in the absence of a profound love for the world and people ... Because love is an act of courage, not of fear, love is a commitment to others” (p. 89). Empathy and love will assist me in staying grounded and connected to the research and my goals. My desire to learn from and alongside students with ED is a long-standing professional commitment. Having spent my career in public education directly working with students with ED, this topic is of great value to me.

Inspired by Gay (2000), I sought to cultivate an understanding of the students within their specific educational setting as an example of multidimensional learning. Thus, I had to

acknowledge my role as an insider. I can see the value in the knowledge and experience I bring to this research topic and that my positionality is vital to produce good research (Ross, 2017). Nonetheless, I purposefully engaged with reflexivity to enhance the research data and research process (Ross, 2017). Explicitly, as the researcher, “I was called to contemplate horizons of significance, embodiment, and *being-in-the-world*” of each participant (Frechette et al., 2020, p.5). In doing so “new understandings are created through the bridging of the researcher’s and the participant’s horizons of significance” (Frechette et al., 2020, p. 5). Furthermore, I paid close attention to my emotional responses throughout the process and captured them in my journaling. I considered the participants emotions and my own, noted the unspoken body language and what it conveyed, and documented them in my journal. This practice helped me attune to the research and be more receptive. Finally, I enlisted peers with whom I debriefed and processed my experiences as a researcher and doctoral student.

Social Justice

I am deeply committed to addressing social inequities, resisting injustice, and working towards change for women. This commitment is reflected in the framing of this research within epistemological philosophies that focus on critical constructivist, feminist, and DisCrit approaches. Further, using arts-informed research as a methodological enhancement challenges notions that knowledge creation is “discovered by the intellectuals—researchers and theorists—and held by them until its implications are determined and passed on for consumptions” (Cole & Knowles, 2007, p. 60). Arts-informed research seeks to “connect the work of the academy with the life and lives of the communities through research that is accessible, evocative, embodied, empathetic, and provocative” (Cole & Knowles, 2007, p. 60). This research aims to connect the findings back to the student participants, their families, and school communities to enhance

student outcomes. This research is inextricably linked to social responsibility and could have transformative potential. Indeed, a review of relevant literature shows that this research and social justice considerations are intimately interconnected.

Researcher Positionality

Beginning in first grade, I received special education services for a learning disability. I remember experiencing feelings of relief when I was pulled from class for extra attention. The time felt like a gift. However, in the fourth grade, a classmate teased me for the support and hissed that I only won a book writing contest because I was given unfair treatment. I remember feeling embarrassment. I wondered, “Was he right? Or was he just jealous?”

As I progressed through middle school, the academic support services disappeared. I managed to do well by relying on effort alone, being a dutiful rule follower and teacher’s pet. I put a lot of effort into sustaining authentic relationships with teachers to offset my learning differences. These tactics worked throughout high school as well. Despite having serious processing issues in math, I attended daily 6:30 a.m. tutorial sessions my senior year of high school. My teacher was extremely patient and kind and met me with enthusiasm every morning. While I never earned an A in math, I did pass with a B+ and was selected to be on the cover of *Newsweek* magazine that highlighted our school for being one of the best in the nation. Having deep and meaningful relationships with my teachers reinforced that connection and support was my path forward to achieving success.

When I initially enrolled in college, I was excited for classes. However, I was soon plagued by regular nightmares that left me utterly exhausted and riddled with achievement anxiety. The stress became so overwhelming that I sought counseling services and visited the on-campus clinic. I was granted extra time on my tests and issued a post-traumatic stress disorder

diagnosis. In counseling, I explored my childhood trauma and developed techniques to manage my anxiety symptoms and eventually sailed through my freshman year.

Through this first counseling relationship in college, I began to understand my trauma and its impact on my life. In the safety of her office, I was able to freely talk about secrets and shame that I had been carrying around and slowly acknowledged how they impacted my functioning. I came to understand how the trauma I experienced directly fueled my anxiety and impeded my ability to focus, learn, and retain classroom content. My therapist called me a renaissance woman and marveled at my success, despite my tumultuous school years and homelife. My relationship with my campus therapist awakened me and encouraged me to try challenging things even though I might fail.

My personal educational experiences directly influenced my career. I have spent my professional career devoted to students in special education with an ED diagnosis. Many of these students also have specific learning disabilities and mental health diagnoses. As a therapist, I build rapport with each student and aim to support their academic and social emotional progress. I am privileged to watch students move through their adolescence as my school serves students in grades six through twelve. However, many students struggle to make progress, leave the school district, need more support, are arrested, drop out, or even die before graduation.

Over 14 years working in public education, fewer than 20% of students in my program are girls. These girls can face criticism, isolation, and rejection by their male peers. The girls I work with have the same ED diagnoses as the boys, but their presentation and needs are different. For example, while all students on my caseload struggle to build and maintain healthy relationships, girls are more likely to seek out (and sometimes demand) more individualized attention when necessary. Likewise, nearly all the girls I have worked with sought out

therapeutic check-ins beyond the allotted weekly sessions determined by their IEP. A canceled clinical session (due to illness, a crisis, or a mandatory meeting) is often interpreted as a personal insult, and the girls become territorial when someone else is meeting with me. Regularly, the girls will ask about other students and want to gossip. They tend to access their feelings more readily and express themselves through artwork, writing, crying, screaming, and music.

I am motivated to explore and understand the issues girls with ED face in schools. I am eager to learn from them and magnify their voices and experiences. Although I have worked with girls with ED for over a decade, this research will center them as the experts in their own lived experiences. Being heard and validated in therapy was healing to me and helped me find my voice and professional passion. I believe that the research process will similarly empower students and amplify their too often marginalized voices.

As I consider my research question and my professional identity it is incumbent that I reflect on my own experiences and how they inform my approach and bias. I am White, cis-gender woman who grew up poor in the rural Ozarks, received special education services, and have an extensive trauma history. All these factors impacted my development as a person and a scholar. My experiences have led to bias towards school systems and how they identify and support girls in special education for ED. I am aware that by researching schools I can be triggered when gender and class are explored. I also acknowledge that as White woman I am afforded many privileges and that my experiences are unique to a particular time and setting. I am aware of my own experiences with school. I attended nine different schools during my primary and secondary education. I received special education services in elementary school and advocated myself for services in college. These interventions were positive investments. Presently, I am in a doctoral program, while working full time in public education.

I have spent my entire professional career working in an educational system as a clinical social worker. My career has undoubtedly influenced my interest in this research. I am comfortable in this system. I am regarded as an expert when I am with students or their families, yet I acknowledge that students and families are the experts in their own lives. This power is also present when I must file concerns of abuse or neglect with the Department of Children and Families. I recognize that these power dynamics are historical and have been upheld through the educational and institutional systems; I have been complicit in these systems. Thus, I am paying careful attention to my privileges and developing more critical awareness.

As a clinician, my work is focused on building rapport, establishing healthy therapeutic relationships, and helping people recognize their inherent value and worth. I am careful to maintain firm boundaries and acknowledge issues of transference in my work. In my interviewing approach, I took seriously the admonition that “interviewer self-disclosure may also serve to reproduce or even amplify the existing power imbalance; in this case, through placing emotional burden on the research participant” (Abell, 2006, as cited in Ross, 2017, p. 333). I was determined not to burden participants with my own emotions or put my “research participant in the position having to do emotional work” (Abell, 2006, as cited in Ross, 2017, p. 333). Therefore, I avoided self-disclosure around my own experiences of trauma and special education. Reflexivity was a significant tool to guide my work and unpack the potential harm that could occur while building rapport. Ultimately, I embraced the understanding that “the researcher’s role is listener, learner, or observer not counselor or therapist” (Rosetto, 2014, as cited in Ross, 2017, p. 331).

Finally, as a White person interviewing mostly Black and Brown adolescents, I am aware that my race contributes to power imbalances and may present barriers. Therefore, building

“rapport is essential to gain and sustain entry and connotes the quality of the relationship between researcher and participant” (Suzuki et al., 2007, p. 298). I prioritized authentic engagement by looking to the research participants as experts in their own lives.

CHAPTER 2: LITERATURE REVIEW

This chapter offers a review of literature, covering the special education category of emotional disturbance (ED) in depth. Specifically, it focuses on understanding the school-based experience of girls with ED. The subject is worthy of study, as 28% of students in special education diagnosed with ED are girls (Office of Special Education Programs, 2020). The actual number of girls with ED is likely much greater due to under-identification and misdiagnosis (Novak et al., 2020; Young et al., 2010). In part, researchers believe that girls are more likely to internalize ED-related behaviors, reducing the likelihood of being identified compared to male peers (Demmer et al., 2017; Kann & Hanna, 2000).

Furthermore, educational outcomes for students with ED as their primary disability are abysmal, despite access to special education services (Freeman et al., 2019). Students with ED have the highest dropout rate out of any disability category; in fact, half of them end up dropping out of school (Carlson et al., 2020; Wagner, 2005) and only about 15% pursue higher education (Hehir, 2016). In addition, girls with learning disabilities have scored higher for depression (Maag et al., 1992). Studies correlate depression to suicide, suggesting that girls with ED may also be at greater risk for self-harm (Bender et al., 1999; Maag & Behren, 1989; Katsiyannis et al., 2001; Wright-Strawderman & Watson, 1992). Research also suggests that women who received special education services make lower wages and become parents earlier (Aapola et al., 2005; Blackorby & Wagner, 1992). Research also indicates that the risk for suicide is significantly higher for middle school aged girls in special education or eligible for special education services (Clark et al., 2021). While further research is needed for all populations affected by ED, the focus of the present research is students who identify as girls. Understanding

and centering this underrepresented population is critical if we want to address their unique needs.

While there are qualitative and quantitative studies that focus on emotional disturbance, a dearth of research centers experiences of girls with ED. Quantitative studies help to show how pervasive ED is, expose the breadth of problems in determining eligibility for ED, issues of bias, and the need for an updated federal definition of emotional disturbance (Kauffman & Bader, 2013; Scardamalia et al., 2018). However, they do not capture the details of the girls' experiences the way that qualitative studies would. In extant qualitative literature, the following themes were identified: the role of family dynamics and early childhood traumas and their influence, issues in maintaining friendships, the need for healthy adult relationships and role models, challenges in being able to identify boundaries, conflicting feelings about the need for special education services, the desire to appear normal, the positive influence of gender-responsive programming, the effects of the school environment, reflections on student privacy in revealing their status as special education students, personal strength, revealing one's LD status to friends and family, ableism, receiving a diploma versus an IEP diploma, gendered experiences at work, intersectionality, and acts of resistance (Ferri & Connor, 2010; Srsic & Hess Rice, 2012; Whitlow et al., 2018). These themes capture the issues girls with ED face while navigating their academic careers.

According to the federal definition laid out in the Individuals with Disabilities Education Act of 2004,

- (i) Emotional disturbance means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

- (A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.
- (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
- (C) Inappropriate types of behavior or feelings under normal circumstances.
- (D) A general pervasive mood of unhappiness or depression.
- (E) A tendency to develop physical symptoms or fears associated with personal or school problems.

(ii) Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance. (IDEA, 2004, § 300.8.c.4).

Barnette (2012) stressed the need for proper criteria for identifying and treating students with ED. Indeed, approximately 20% of American students present with a mental health diagnosis; yet only 1% meet the criteria for the federal definition of ED. A possible reason for this discrepancy is a definitional difference between ED and a mental health diagnosis. ED is an educational definition used in special education, and to qualify the ED must pervasively interfere with a student's educational achievement (Kutash et al., 2006). By contrast, a mental health diagnosis is based on criteria in the *American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR)* and determined by a mental health professional. Different U.S. states also use different terminology and categorical labels. Indeed, researchers identified 15 varying terms for emotional disturbance (Kidder-Ashely et al., 2000; Tibbets, 2014). As a consequence of differing operational definitions, a child may be found eligible for ED in one state but not in another (Cline, 1990).

Much extant literature explores ED manifestations (Tibbets, 2014; Wagner, 2005); identity in students with ED (OSEP, 2020); stigma associated with special education (Campbell & Deacon, 2006; Pryor & Reeder, 2011); school ecology (Politzotto, 2019); academic outcomes of students with ED (Hehir, 2016; Wagner, 2005); and external factors that contribute to ED (Bremness & Polzin, 2014; Cook et al., 2005). However, few studies recount the experiences and characteristics of girls with ED. Indeed, most studies center experiences of and interventions for boys (Oswald et al., 2003). Generalizations across gender do not account for biological, emotional, and cultural differences (Bell et al., 2004; Burke et al., 2003; Hipwell & Loeber, 2006). Therefore, this literature review will explore themes related to girls with ED and highlight gaps in the research. It will illustrate why researchers must further delve into this topic and center the voices of girls and their lived experiences with ED in schools.

The first section of this literature review elucidates how my theoretical framework is informed by stigma theory, ecological systems theory, relational cultural theory, trauma theory, and DisCrit. The structural systems and cultural values that impact students with ED are of special importance to me as a researcher, and those concepts shaped the selection of literature reviewed herein.

Next, major themes and subthemes of ED are investigated through empirical research in multiple traditions. Existing qualitative studies, for example, offer perspectives on how schools and faculty interact with students with ED. Quantitative studies capture broader trends in the data to guide understanding of ED. Search terms included emotional impairment, adolescence, special education, and mental health, while narrowing the literature specific age to adolescence. I included research specific to qualitative data collection and utilized search terms such as marginalized groups and minority groups. Databases that were utilized for all the sources were

accessed through Lesley University Library's online portal and Google Scholar. EBSCO Host, JSTOR, PubMed, ScienceDirect, APA PsycInfo, ResearchGate, SAGE, and Academia were used to access peer-reviewed articles. The literature review concludes with an examination of current methodological approaches.

Theoretical Framework

Critical feminist epistemological assumptions underpin my theoretical framework. My theoretical framework is informed by ecological systems theory, cultural-relational theory (CRT), trauma theory, stigma theory, and DisCrit. I discuss each of these theories in the following sections.

Ecological Systems Theory

Urie Bronfenbrenner (1977, 1979) developed ecological systems theory (EST) to explain how a person develops in the interchange with the environment. Bronfenbrenner proposed a system of four nested structures: the *microsystem*, *mesosystem*, *exosystem*, and *macrosystem*. These four systems range from the smallest and closest to the individual to larger and more complex systems (Riemer et al., 2020). A person's *microsystem* is composed of the people with whom they have direct contact. For children and adolescents, the microsystem typically consists of their home and school environment (Ibrahim & El Zaatari, 2020). The relationship between a child and teacher is "crucial for child development" (Bronfenbrenner, 1979, p. 56). The *mesosystem* consists of two or more microsystems coming together, such as a parent interacting with a child's schoolteacher. The *exosystem* incorporates settings that influence a person without their direct participation. An example would be educational policy that impacts a school's curriculum (Neal & Neal, 2013). The *macrosystem* is abstract, as it includes "broad cultural influences and ideological patterns that characterize a given society or social group that have

long-ranging consequences” (Riemer et al., 2020, p. 93). These systems are layered and can be fluid. In 1986, Bronfenbrenner added the *chronosystem* “reflecting change or continuity across time that influences each of the other systems” (Riemer et al., 2020, p. 94). Ecological systems theory is relevant to understanding girls with ED as it will illuminate the nature of relationships, hierarchies, systems, structures, and the influence of culture and time.

It is important to first consider the *microsystem* of students with ED—including their friends, classmates, teachers, and faculty—to learn about their immediate relationships and experiences in school. Next, it is incumbent to study the *mesosystem*. Reimer et al. (2020) said of Seidman’s mesosystem observations that this system is the most complex, “in that it encompasses the arenas of between-system social relations” (Riemer et al., 2020, p. 93). The relationships between a student’s family and school and other systems such as welfare, social services, juvenile justice, religion, and extracurricular coaches or mentors provides another layer of understanding about the student experience, how these systems relate to one another, and if they act as supports or burdens. Taking note of the *exosystems* deepens understanding of how the inner systems are interrelated and influenced by broader systems and structures. Finally, the *chronosystem* points to the history of special education and its evolution. In the present project, EST guided my understanding of how participants experienced school on multiple levels and how the school environment influenced them. Further, EST informed development of the questions I asked during participant interviews.

Relational-Cultural Theory

Relational-cultural theory (RCT) is multicultural and feminist in nature, born in response to Jean Baker Miller’s clinical practice with women (Miller, 1976). RCT originally focused exclusively on marginalized women but is now considered relevant to everyone regardless of

gender or cultural background (Lenz, 2016). RCT was innovative in its call for interconnectedness, in contrast to theories that emphasized individuation, separation, and autonomy (Comstock et al., 2008; Jordan, 2017). Its central tenet is that humans are wired for connection (Jordan, 2017), and emotional connection leads to emotional growth and healthy development (Sassen et al., 2005).

RCT promotes “five good things” (Miller, 1988, p. 4): a sense of connection, feeling empowered to act in relationships, greater knowledge of self and other, enhanced sense of self-worth, and a desire for more connection. Thus, RCT is relevant to girls with ED because their placement in special education often hinges on their ability to interact and form relationships with others (IDEA, 2004, § 300.8.c.4). These principles align with self-regulation goals students with ED often pursue (IDEA, 2004).

RCT also acknowledges power within relationships. Power imbalances can occur when person or group is placed outside the norm and can lead to disconnection (Jordan, 2017). For example, students with ED may be placed outside of an inclusion classroom if the education team believes they require a different environment to make academic progress. Being removed from their peers may lead to social disconnection. In turn, disconnection can lead students with ED to internalize problems, pathologize themselves, and spiral into shame and isolation (Jordan, 2017).

RCT aligns with my critical and feminist epistemology, as it investigates systems and structures that influence relationships. It acknowledges the macro-level social, political, and cultural influences that affect functioning and growth (Jordan, 2017). RCT posits that relationships promote healing (Kress et al., 2018), thus supporting relational interventions for

girls with ED. This theory aided me in understanding the phenomenon of student relationships with peers and faculty, and how they influence academic success or failure.

Trauma Theory

Trauma theory encompasses a wide range of theories and treatment modalities. For this research, I focus on childhood trauma, attachment, complex trauma, adverse childhood experiences, racism, and intergenerational and historical trauma.

Childhood Trauma

According to the Substance Abuse and Mental Health Services Administration (2018), two thirds of American students will experience at least one traumatic event by the age of 16. Judith Herman's 1992 book *Trauma and Recovery* is a foundational work in trauma theory. Herman (1992) described the origins of trauma:

Traumatic reactions occur when action is of no avail. When neither resistance nor escape is possible, the human system of self-defense becomes overwhelmed and disorganized.

Each component of the ordinary response to danger, having lost its utility, tends to persist in an altered and exaggerated state long after the actual danger is over. (p. 34)

Building on this understanding, Herman (1992) identified posttraumatic stress disorder (PTSD) as the consequence of a traumatic event that produces feelings of helplessness and terror (Zaleski et al., 2016). Additionally, Herman (1992) proposed that psychological outcomes for trauma survivors are often influenced by the society in which such trauma occurred. This declaration marked an important shift for trauma survivors because it shifted the blame from the survivors to the perpetrators, and changes the assumption that survivors are weak or defective (Zaleski et al., 2016). Thus, Herman's work helped destigmatize trauma.

Trauma and Attachment Theory

Trauma theory and attachment theory are closely related. Attachment relationships begin at birth and last the life span (Bowlby, 1978). Bowlby (1978) focused on the significance of the caregiver in a child's development. If a primary caregiver is unavailable, absent, abusive, or neglectful, children are likely to have insecure attachments (van der Kolk, 2005; Pleines, 2019) and develop maladaptive behaviors including excessive anxiety, anger, aggression, and depression (Bloom, 2013; van der Kolk, 2005). Students with ED have significant challenges in developing healthy relationships and tolerating frustration or discomfort (IDEA, 2004). Helping students with ED create secure and safe attachments with school personnel is paramount for students' progress in the school setting.

Bloom (2013) theorized that while only a small number of parents who are abused then abuse their children, attachment styles are often passed down, "become[ing] organizing themes of relationships" (p. 97). Children may then relate to others in a dysfunctional manner, leading to troubled relationships laden with attachment issues. A traumatized caregiver may not be able to provide a sense of safety or reassurance for the child and may also impact how they interface with their child's school. When families of students with disabilities trust the educational system, the school can leverage "a family's resources to improve the education services for the child with a disability" (Olivos et al., 2010, p. 29). The school and family can make decisions jointly regarding goals for the child (Friend & Cook, 2007; Turnbull & Turnbull, 2001). However, an insecure attachment to the institution of schooling is also possible. Interactions with the school might threaten the family's sense of identity and safety (Olivos et al., 2010). This dynamic may be even more pronounced for culturally and linguistically diverse families and those who have experienced systemic trauma because of their race, gender, sexual identity, or immigration status (Harry, 2008). Researchers urge educators to examine school practices, pay attention to bias and

harm, and focus on collaboration despite institutional and personal barriers (Harry et al., 1995; Lynch & Hanson, 2004; Olivos et al., 2010). Scholars insist on “a more democratic and collaborative model, where true parity exists and parents are considered equal in the process” (Olivos et al., 2010, p. 37).

Complex Trauma

Complex trauma is “the experience of multiple, chronic and prolonged, developmentally adverse traumatic events, most often of an interpersonal nature and early life onset” (van der Kolk, 2005, p. 402). However, other scholars note that complex trauma may also impact the individual in various bio-psycho-social-spiritual ways at any age (Bremness & Polzin, 2014). Complex trauma is currently not represented in the *DSM-5-TR* but more scholars and practitioners are writing about the phenomenon. For example, Cook et al. (2005) argued that the concept of PTSD does not fully capture the results of complex trauma exposure.

Children exposed to complex trauma may be impaired across multiple domains, including attachment, biological functioning, affect regulation, dissociation, behavioral control, cognition, and self-concept (Cook et al., 2005). Children and adolescents who have experienced complex trauma may exhibit behaviors related to ED, such as disruptive outbursts, shutting down, and significant depression, anxiety, or anger (Tibbetts, 2013; Wagner, 2005; National Child Traumatic Stress Network, n.d.). Trauma challenges their normative assumptions about trust and safety and can diminish their sense of power and control (Herman, 1997).

Adverse Childhood Experiences

Adverse childhood experiences (ACEs) are an underlying factor for complex trauma. ACEs include physical, psychological, and sexual abuse, and exposure to substance use or domestic violence during the key developmental years of childhood (Karatekin & Hill, 2019).

One of the largest investigations into child abuse and neglect, the CDC-Kaiser Permanente adverse childhood experiences study, took place in southern California between 1995 and 1997 (Centers for Disease Control and Prevention, 2021). Over 17,000 surveys revealed startling rates of ACEs by age 18. For example, almost 20% of respondents reported being sexually abused, 20% reported being physically abused, and 11% reported being emotionally abused. ACEs also highly correlate to depression, suicide attempts, alcoholism, sexual promiscuity, drug abuse, physical inactivity, sexually transmitted diseases, domestic violence, cigarette smoking, and obesity (van der Kolk, 2005). Finally, the more ACEs reported, the more likely a person is to experience serious health conditions later in life (van der Kolk, 2005).

Racism

Over the past 150 years, many student-led movements have sought to confront injustices and promote diversity related reforms (Rhoads, 2016). Yet, the legacy of racism continues to be part of the educational fabric in the United States. One way that academia has historically devalued racial minorities is by promoting the genetic deficit model or biological determinism (Plomin, 2018; Sanini, 2019), which argues that racial minorities are genetically inferior. Once such biological theories grew unacceptable after World War II (Turiel, 2020), the cultural deficit model emerged. It purported that racial minorities had less upward mobility due to cultural shortcomings (Dupree & Boykin, 2021). The United States government published reports that Black people were lazy and lacked self-regulation, rather than naming slavery, Jim Crow, and discriminatory policies as the culprits (Dupree & Boykin, 2021). These harmful stereotypes remain in the public consciousness (Williams & Eberhardt, 2008; Zou & Cheryan, 2017). Thus, it is necessary to also consider the role racism plays in schooling and the identification of students with ED.

Today, approximately 79% of elementary and secondary teachers identify as White, marking a less racially and ethnically diverse group than the student population (Schaeffer, 2021). However, research from the National Center for Education Statistics also indicates that schools with bigger percentages of racial or ethnic minority students do have a greater number of teachers who are Hispanic, Black, or Asian American (Taie & Lewis, 2022).

Research confirms that children of color experience higher levels of stress, depression, and suicidal ideation compared to White peers (Cholewa et al., 2014), and that their sense of self is diminished when they experience or perceive racism (Wong et al., 2003). It is critical to be vigilant in noticing when stereotypes surface in the research with students. However, research has also found that a connection to their ethnic group acted as a “promotive and protective factor by both compensating for and buffering against the impact of perceived discrimination” for adolescent African Americans (Wong et al., 2003, p. 1223).

Intergenerational and Historical Trauma

Intergenerational trauma was initially studied with Holocaust survivors and their offspring (Fast & Collin-Vézina, 2010) and theorizes that PTSD is passed down from one generation to next (Pleines, 2019). Researcher and social worker DeGruy (DeGruy & Leary, 2005) introduced the concept of post-traumatic slave syndrome (PTSS) to explain the lasting, multigenerational trauma experienced by the African American community. DeGruy and Leary espoused that African Americans must work against “vacant esteem, ever-present anger, and racist socialization” (p. 154).

The concept of historical trauma extends the idea of intergenerational trauma. It was introduced by Brave Heart (1998) based on research with Lakota people (Fast & Collin-Vézina, 2010). The Lakota experience of trauma is historical because “the Lakota have an extended sense

of ‘family,’ [so] their grief is also expanded to include larger numbers of deceased” (Fast & Collin-Vézina, 2010, p. 130). Historical trauma impacts biological, psychological, environmental, and social means, therefore perpetuating intergenerational cycles of trauma (Brown-Rice, 2013).

Stigma Theory

Stigma happens “when elements of labeling, stereotyping, separation, status loss, and discrimination co-occur in a power situation” (Link & Phelan, 2001, p. 367). It is woven into the fabric of social interactions and is linked to social control (Bos et al., 2013). Overt stigma appears as aversion to interactions, avoidance, social rejection, discounting, discrediting, dehumanization, and depersonalization, while subtle stigma is conveyed through nonverbal expressions of discomfort (Bos et al., 2013). Stigmatization is linked to popular stereotypes that justify excluding and avoiding members of the stereotyped group (Major & Obrien, 2005). Social hierarchies and power constructs influence social inequalities and are driven by existing hegemonic factors like education, and social, economic, and political power (Bos et al., 2013). Chapters four and five will further explore the implications of stigma within special education.

Dis/ability Critical Race (DisCrit)

DisCrit scholars examine systemic inequities and their impact on daily life as “social constructions of race and ability” (Annamma et al., 2016, p. 11). The seven tenets of DisCrit include: a) focusing on how racism and ableism uphold ideas of normalcy; b) troubling singular notions of identity such as race *or* disability *or* gender; c) emphasizing the social constructions of race and ability; d) privileging voices of marginalized populations; e) considering the legal and historical aspects of dis/ability and race; f) recognizing that that gains for people labeled with

dis/abilities usually happened when they converged with the interests of White, middle-class citizens; and g) supporting activism and resistance (Annamma et al., 2016, p. 19).

Mendoza et al. (2016) proposed the use of the associated concept of *cultural mediation* to “comprehend more deeply the process of *how* inequities are mediated by ideologies and are indexed and perpetuated in routine interactions, including individual and collective actions and language practices” (p. 71). Further, the concept of cultural mediation helps us to ascertain that dominant ideologies are explicitly linked to cultural and historical contexts (Mendoza et al., 2016) and are part of our daily and institutional practices (Wertsch & Toma, 1995).

DisCrit lens and cultural mediation reveal how schools have been shaped by history (Mendoza et al., 2016; Moll, 1998) and that history continues to be part of the present day as “social inheritance” (Cole, 1998, p. 291). For example, IQ testing was utilized to create a fictitious racialized intellectual hierarchy in United States at the turn of the 20th century (Selden, 1999). Testing directly impacted “schooling structures, practices, and perceptions of race and ability” (Mendoza et al., 2016, p. 73) and “reinforced an intimate relationship between race, intelligence, and ability in modern-day school structures” (p. 74). A DisCrit lens sheds light on the “legal and historical aspects of dis/ability and race and how both have been used separately and together to deny the rights of some citizens” (Annamma et al., 2013. p, 14). DisCrit recognizes that dis/ability, ableism, racism, class, and race cannot be separated and are woven into our society, as seen in our education systems and upheld through structural power (Annamma et al., 2016).

Empirical Literature Review

My search revealed that research on ED in girls is limited. I wanted to focus on research from the past two decades, but there is a notable absence of current research. I chose to focus

primarily on research that was qualitative in nature, as it offers rich description and details that help understand the issues faced and imagine appropriate interventions. Selected quantitative studies are included to broaden the understanding of the nature and scope of ED.

Delimitations and Organization

The review is organized by themes that connect the findings to one another, reveal differences, and point to what is missing in the research. The themes explored will first center experiences of girls with ED in the school setting. Then, emotional disturbance will be further examined, followed by studies dealing with trauma and how it manifests specifically in girls with ED. Stigma and bias within special education will be considered next. The review will finish with studies contributing to understanding of the influence of the school environment on girls with ED.

Centering Girls with Emotional Disturbance

Gathering research that centers girls with ED revealed major gaps. Gender bias in education appears to be an ongoing issue, despite calls for further research (Gage et al., 2012; Oswald et al., 2003; Hess Rice et al., 2008). This section centers the experiences and intersectionality of gender and ED within special education by studying the invisibility of girls with emotional disturbance, statistics of girls within special education, marginalization of girls within the research, student voice, and working with girls with ED.

Statistics of Girls in Special Education

ED is largely invisible unless one is familiar with the school context and school placement (Green et al., 2005). Statistical information about students with ED is inadequate, in part, because demographic reporting is not standardized across studies (Schroeder-MacKay et al., 2021). According to the Office of Special Education Programs (OSEP), in the 2018–2019 school

year, 5.6% of students had ED—with a range of 1.6% to 17.36% of students from state to state. According to OSEP (2020), 28% of students in special education diagnosed with ED are girls. Furthermore, OSEP (2020) reports that Black or African American students are twice as likely to be identified with ED; and Hispanic and Latino students are less likely to be identified with ED (2020). However, it appears that research has yet to address the intersectional impacts of race and gender.

Girls, Emotional Disturbance, and Trauma

Trauma is not one of the criteria for ED, so qualifying for emotional disturbance does not confirm that a student has experienced trauma. Therefore, it is challenging to quantify students in special education with the diagnosis of ED who also have experienced trauma. Additionally, the list of criteria for ED “does not capture the students whose trauma experiences have resulted in hypervigilance, impulsivity, aggression, and acting out when feeling unsafe” (Scardamalia et al., 2018, p. 572). However, qualitative research on girls suggests trauma is an issue for girls with ED (Srsic & Hess Rice, 2012; Whitlow et al., 2018).

Marginalization in the Research

Girls have been and continue to be underrepresented in the research of special education (Hess Rice & Yen, 2010; Srsic & Hess Rice, 2012; Whitlow et al., 2018). Girls receive disproportionately fewer special education services than boys, and boys outnumber girls by at least two to one in every disability category across race, ethnicity, and class (Arms et al., 2008; Ferri & Connor, 2010). Sadker and Sadker (1994) posited that girls are marginalized in the classroom and overshadowed by boys. Alternatively, girls with ED may be perceived as having teenage girl drama, rather than needing support and services (Gage et al., 2012; Hess Rice et al., 2008; Oswald et al., 2003)

Another issue related to girls' marginalization in special education is that society continues to value male intellectual development more than female intellectual development (Arms et al., 2008). This may be why boys are more likely to receive services for intellectual disabilities, learning disabilities, and ED. In a widely cited article, Susan Vogel (1990) asserted that girls who were identified for services were more severely impaired than boys and score lower on assessments—a bias that remains an issue. Even when girls and boys present with the same characteristics, boys are offered interventions and services at higher rates (Froschl et al., 1999). Another concern is that girls with ED dropout in disproportionate numbers (Wagner, 2005), and thus may be underrepresented in school-based research.

Student Voice

There is a dearth of qualitative research that centers the voices of girls with ED. Most ED research is quantitative and centered on boys (Whitlow et al., 2018). Hence, only a few studies were available for review. Corbett (1998) posited that some student voices are not heard because of “a lack of conventional communication resources, a hesitant or inarticulate delivery and a marginalized social status” (p. 54). The following section of the literature review centers girls with ED and highlights their voices.

Voices From Those Not Heard

Whitlow et al., (2018) studied the experiences of three adolescent girls identified with ED in a partial inclusion school setting. While the study provides insight, it is limited in scope. It included only three adolescent girls, all of whom were White and living in rural communities. The study's methods were semi-structured interviews with the students, parents, and teachers; multiple observations; and analysis of documents related to the students' special education status. Five themes emerged around feelings and behaviors in school: a) the role of family

dynamics and early childhood traumas; b) struggles with friendships; c) identifying boundaries; d) connecting with an adult; and e) conflicting feelings about special education (Whitlow et al., 2018, pp. 49–50). These findings give insight into the experience of girls with ED and are themes to further study. Specifically, the participants' difficulty with peer relationships is consistent with ED criteria (IDEA, 2004, § 300.8.c.4).

Another finding speaks to the girls' agency. Despite the challenges, participants were able to make meaningful connections with special education staff (Whitlow et al., 2018, p. 50). Such relationships with adults are considered prosocial. Both the parents and the girls spoke positively about staff providing details about time, nurturance, and kindness the staff offered. The study provides avenues for research to explore the nature of school-based relationships and how they might be nurtured.

Girls with Emotional Behavioral Disorder in a Gender-Responsive Support Group

Srsic and Hess Rice (2012) studied the perceptions of five adolescent African American girls diagnosed with ED. The participants attended a self-contained day school for students with ED run by Girls Study Group (GSG), a federally supported program to combat girls' delinquency and reduce crime (Zahn et al., 2008). The girls participated in Girls Circle; a 10-week support group intended to support their social-emotional development (Srsic & Hess Rice, 2012). The researchers observed the girls in school, observed their weekly groups, and conducted three semi-structured interviews with the girls. The first interview took place before the group began, the second during the group, and the third after the group concluded. Many themes emerged, illustrated with direct quotes from the participants, including friendship, connectedness, the ability to have and maintain relationships, and how they saw themselves. Five subthemes included the appearance of normalcy, the influence of negative experiences, the lack

of opportunity for female relationships and role models, the positive influence of gender-responsive programming, and the effects of the environment (Srsic & Hess Rice, 2012, p. 634).

Based on their qualitative data, the authors made the following recommendations. Attention and implementation of gender-responsive programming could be effective in reaching and supporting this population along with earlier implementation of supports like Girls Group to help girls with ED develop healthy connections and relationships. Additionally, support groups should run for longer than 10 weeks, as students benefit from ongoing support. Finally, the physical environment created for the girls mattered as “feeling special was not a sentiment often experienced by these girls with ED and providing an environment that stimulated this emotion cultivated an atmosphere of appreciation that encouraged respect, trust, and openness” (Srsic & Hess Rice, 2012, p. 642).

Narratives of “the Special Ed. Girl”

Ferri and Connor’s study drew on research Connor (2008) conducted for his book *Urban Narratives: Portraits in Progress—Life at the Intersections of Learning Disability, Race, and Social Class*. His purpose was to present eight student profiles with learning disabilities and center their experiences from their perspective and provide a critical intersectional analysis of power, culture, and institutional domains. From the 2008 study, Ferri and Connor (2010) culled the narratives of five American, female Black and/or Latina participants, aged 18-20. Each participant had a learning disability (LD) and was taking part in a vocational training program for special education paraprofessionals. Emotional disturbance was not a consideration in the study.

Participant narratives related to the economic, political, educational, and ideological forms of oppression they faced and their acts of resistance. The narratives revealed their acute

awareness of the hegemonic norms of race, class, gender, and ability. Themes included reflections on revealing their special education status, personal strengths, ableism, graduation, intersectionality, and acts of conscious and unconscious resistance (Ferri & Connor, 2010). As high school graduates, thus being older than participants in other studies, they offered a different developmental perspective for the literature review. Further, each participant was also motivated and pursued vocational training post high school. Despite not disclosing what their specific learning disabilities were, their narratives are laden with hope as they successfully completed high school and were engaging in training. This study highlights that special education interventions can contribute to academic success.

Emotional Disturbance

Cullinan et al. (2004) studied the characteristics girls with and without ED. The study included 689 girls in elementary, middle, and high school from all regions in the United States who identified as Caucasian or African American. The data was collected using the Scale of Assessing Emotional Disturbance (SAED). The SAED asks evaluators to rate participants regarding five characteristics of ED: a) inability to learn, b) relationship problems, c) inappropriate behavior, d) unhappiness or depression, and e) physical symptoms and fears (IDEA, 2004). In this case, educators, primarily teachers, completed a 10-item rating scale about their students. Girls with ED were found to have a high level of comorbid ED characteristics, such as depression coupled with anxiety (Cullinan et al., 2004). Takeaways from Cullinan et al. (2004) are limited by the fact that findings were highly subjective and based only on teacher opinions. Furthermore, the incidence of some characteristics, like depression, may have been underestimated by teachers.

Hess Rice et al. (2008) conducted qualitative research among school professionals working with girls with ED to understand their perception of their students. The participants were asked: “how do professionals who work with students with ED perceive gender differences in the expression of this disability?” (p. 555). The authors identified four themes, noting that “girls’ problems are hidden, girls’ minority status in special education leads to isolation, when girls are physical/aggressive it means something different, and girls are isolated from their female peers physically and emotionally” (Hess Rice et al., 2008, p. 555). These characteristics need further exploration but also suggest that girls with ED have unique characteristics, challenges, and needs that differ from those of boys.

External Factors and Emotional Disturbance

Students with ED are at increased risk for mental health issues, substance abuse, and involvement in the juvenile justice system (Quinn & Poirer, 2004; Malmgren & Meisel, 2004). Research suggests that students with ED may live in households with multiple risk factors, including poverty, a one-parent household, and maltreatment, among others (Wagner et al., 2006). For example, Lee and Jonson-Reid (2009) analyzed data from child welfare offices and special education files of 471 youth, comparing student outcomes of children with child welfare services with and without ED. They concluded that most students in the welfare system with ED experienced more school behavioral issues, including dropout, disciplinary action, and serious mental health crises. The authors urged increased collaboration among schools, welfare systems, and caregivers, and advocated for children in the welfare system to have access to mental and behavioral healthcare. Troubling behaviors need to be understood within the context of children’s environments (Hart et al., 2010). In doing so, systems are held accountable.

Eligibility for Emotional Disturbance

To qualify for special education services, a student must be observed and tested during an evaluation period. Once the student has been evaluated a team is created, including educators and the parent(s). The team meets to discuss the testing findings and determine eligibility for special education services. Eligibility for ED is a team decision, but school psychologists wield the power to decide whom to interview, which evaluations to administer, and how to analyze the results (Scardamalia et al., 2018). In a post hoc analysis, 179 school psychologists from Texas were recruited to review a mock special education report to “examine influences on decision making” (Scardamalia et al., 2018, p. 574). Participants needed to determine if a child was eligible for ED by selecting one or more ED criteria, completing a demographic survey, and responding to a few open-ended questions. Data revealed significant inconsistencies in evaluating children for special education services (Scardamalia et al., 2018). The school psychologists often disagreed on whether a child was eligible for services and/or met criteria for ED. The results from the quantitative data indicated extremely poor reliability ($\alpha = 0.201$). In addition, the school psychologists did not agree on how to apply the criteria for eligibility and were unable to agree on qualitative descriptions on why they felt the child either did or did not meet ED criteria. Such evidence indicates eligibility determination is subjective and vulnerable to error (Hanchon & Allen, 2017; Scardamalia et al., 2018).

Trauma and Special Education

Finding qualitative research on students with trauma in special education specifically diagnosed with emotional disturbance is challenging. Trauma is not one of the criteria for ED. However, researchers can inquire about specific trauma experiences in qualitative studies. Whitlow et al. (2018) conducted qualitative research with girls with ED and identified “trauma,

losses and absence of secure attachments” (p. 49) in early childhood for girls with ED through data obtained in the interviews.

Consequences of Trauma

Adverse childhood experiences and trauma are linked to numerous health issues as discussed earlier in this review. Trinidad (2021) posited that ACEs also impact social functioning and relationships in adolescence and young adulthood. Using longitudinal data obtained through the University of Michigan’s Institute for Social Research’s Data Center, 1,155 individuals from 2007 and 2017 were investigated to determine if early childhood ACEs predicted poor behavior in young adulthood. Trinidad divided the participants and their families into three categories (advantaged, disadvantaged, or in the middle) based on socioeconomic position, racial-ethnic identification, and neighborhood and school safety. Trinidad found that ACEs “operate within social contexts that alleviate or exacerbate their negative impacts” (p. 6). He cautioned others to not be simplistic in their analysis of how trauma impacts a child and that there are “nuanced differences in the interaction between ACEs and youth contexts” (p. 6). Additionally, the impact of trauma “may be partly explained by the context of how and where peers are made, underscoring the role of ecological systems” (p. 7). Trinidad’s work emphasizes the social aspect of ACEs and trauma children experience.

Metzler et al.’s (2017) longitudinal study included 27,834 noninstitutionalized adults from ten different U.S. states surveyed during the 2010 *Behavioral Risk Factor Surveillance System*. The research revealed the culminative impact of ACEs on education, employment, and income of adults who experienced multiple ACEs. The study found that ACEs are connected to education, employment, income, and impact life opportunities. This is important because early child adversity is associated with generational poverty (Metzler et al., 2017, p. 146).

Assessment of Trauma in Schools

When schools fail to implement screening and comprehensive interventions, adolescent development is at risk (Frydman & Mayor, 2017). The 2015 Every Student Succeeds Act included a provision for school based mental health services that were trauma-informed and evidenced based, but school administrations ultimately determine when and if interventions are provided. To adequately assess students for trauma and provide more intensive supports, schools may employ multitiered systems of support (MTSS), universal protocols and screenings. One such tool is the brief *Child Trauma Screen* (CTS). CTS has been peer reviewed and is considered reliable with good psychometric properties (Lang et al., 2021). Another tool is the *Survey of Children's Exposure to Community Violence* (Richters & Saltzman, 1990) which is free and convenient. It has been used in schools (Rosario et al., 2003; Scarpa, 2001) and with students who have experienced community violence (Ceballo et al., 2001). These are just two of many screening tools that schools have at their disposal.

It should be noted, assessing children for trauma can be controversial. Some schools avoid universal screening, as it is perceived as too invasive and because it could lead to mandated reporting for abuse or neglect (Reinbergs & Fefer, 2018). Additionally, schools will have to respond with interventions to support the student and there may be budgetary, staffing, or curriculum restraints that hinder such interventions (Maynard et al., 2019). Nevertheless, Reinbergs and Fefer (2018) observed that communities and school leaders are more receptive to screening after a specific, shared trauma such as a natural disaster or armed conflict.

Stigma and Bias Regarding Emotional Disturbance

There is legitimate concern about the stigma and exclusion commonly associated with disability labels. Stereotyping and stigma associated with a disability can have lasting negative

psychosocial consequences (Green et al., 2005). The ED label not only solidifies the perception that a student is different but assigns social significance to that difference (Ferri & Connor, 2010). Students with ED may be educated in separate classrooms, programs, or schools per their Individual Education Program (IDEA, 2004). The segregation is easy to see, making students with ED vulnerable to stigmatization, loss of social status, and the judgement of their peers (Ferri & Connor, 2010; Whitlow et al., 2018). There is evidence that adults, too, have negative perceptions of academic and behavioral skills of students with disabilities (Eisenberg & Schneider, 2007). According to Eisenberg and Schneider (2007), “children’s self-esteem and self-confidence have been shown to be highly sensitive to the perceptions expressed by peers, family, and teachers” (p. 390). Stigma and bias may take many different forms, which include ableism. Ableism is rooted in discrimination and oppression (Hehir, 2016). As Ostiguy et al. (2016) insist:

ableism is not solely about the experiences of people with disabilities as targets of discrimination, but rather the about the interaction of institutional structures, cultural norms, and individual beliefs and behaviors that together function to maintain the status quo and exclude people with disabilities from many areas of society. (p. 304)

The binary between able and disabled is common in the Western world (Kronick, 1977) and is perpetuated through legal definitions and access to services (Ostiguy et al., 2016). Therefore, one reason students with ED are not engaged in early interventions is due to labeling and stigma (Kauffman, 1999).

Effect of Stigma on the Experiences of Girls with ED

Stigma is a complex process relating to power, dominance, and exclusion (Campbell & Deacon, 2006). It maintains inequalities between groups and enforces conformity to ingroup

norms (Bos et al., 2013; Major & O'Brien, 2005). Stigma is central to power dynamics and “exists when labeling, negative stereotyping, exclusion, discrimination, and low status co-occur in a power situation that allows these processes to unfold” (Link & Phelan, 2001, as cited in Major & O'Brien, 2005, p. 395).

Scholars recognize two types of stigmas: public stigma and self-stigma. *Public stigma* is society's response to someone with stigmatizing attributes, while *self-stigma* is the “internalized psychological impact of public stigma” (Bathje & Pryor, 2011, p. 161). *Identity threat* occurs when people believe they are at risk if their social identity is threatened (Major & O'Brien, 2005). For instance, Ferri and Connor (2010) interviewed five urban Black and/or Latino young adult women who reflected on their experiences in special education. The women acknowledged the stigma associated with special education and described how they attempted to keep that part of their identity a secret. They went to great lengths to maintain their social status and avoid stigma. Moreover, this period of development typically values peer opinion and approval, making scrutiny more present (Orben et al., 2020). DisCrit theorists urge us to consider the interlocking systems of oppression Black girls with disability may experience (Annamma et al., 2018; Crenshaw, 1989), further underscoring the potential negative impacts of stigma on this population.

Educator Bias

A critical ecological viewpoint considers a child's participation in multiple, interacting systems when determining eligibility. Algozzine (2017) suggested that school practitioners employed a very narrow microsystemic ecological view to determine if a child had emotional disturbance. He further posited that this limitation is problematic as informant ratings and self-reports are the primary sources to identify eligibility. Kauffman and Badar (2013) also noted that

ED eligibility appears related to how irritating teachers and administrators perceived interactions with the student to be. In such cases, school officials fail to consider other environmental factors that might contribute to ED.

Hess Rice et al. (2008) found girls were treated differently in education and gave examples of teacher bias, gender role assumptions, fear for girls being in classrooms with mostly boys, learning differences, and how girls relate to their teachers. These findings were based on qualitative research conducted via semi-structured interviews with 15 professionals, including ten teachers, two administrators, two school counselors, and one graduate student special education intern; ten were women and five were men (Hess Rice et al., 2008). The professionals described their experience working with girls with ED as distinctively different than working with boys with ED. They used different language to describe girls with ED, and their collective tendency was to avoid girls with ED (p. 555).

Family Bias

Research indicates that families experience complicated feelings regarding their child being evaluated and provided services through special education for ED. Specifically, one parent stated, “special education kind of has the, I don’t know if ‘stigma’ is the right word here, but it’s thought of as where mentally challenged kids go to get extra help um ... it is not what Elizabeth needs” (Whitlow et al., 2018, p. 51). This statement reveals the misunderstanding of who qualifies for special education, the stigma of qualifying for special education, and apprehension around being labeled. Without a full understanding of ED and how students are eligible for services, parents are confused by this label and associate it with intellectual impairments.

Despite legislation, improved care, and access to information, people with intellectual disabilities have been teased and excluded across generations and cultures (Gordon et al., 2004).

Associating ED with intellectual disabilities may prevent students from accessing interventions. Further, studies reviewing social rejection and social stigma consistently posit that mental health and intellectual dis/abilities are the least socially acceptable disabilities (Gordon et al., 2004). Additionally, political attitudes influence stigma. Right-wing authoritarianism is correlated to mental health stigma, negative stereotypes, and intentional social distancing in the United States (DeLuca et al., 2018). These attitudes and beliefs are deeply ingrained in our society. Addressing stigma regarding special education is necessary in order to ensure students have access to resources, interventions, and services to make academic progress.

School Environmental Influence

Bronfenbrenner's (1979) ecological systems theory has implications for educational practice. The school is part of the student's immediate microsystem. Schools can be places for community and deter students from engaging in high-risk activities, increase prosocial behavior, and fight mental health issues "by improving self-concept while decreasing emotional distress" (Grover et al., 2021, p. 342). Educators also must consider culturally responsive education practices as they work with students of color. It is critical that schools acknowledge that there is often cultural discontinuity between home and school, especially for African American and Latino American students (Cholewa et al., 2014). A common practice of many marginalized populations is to adopt the "specific linguistic styles based upon one's audience" known as codeswitching. (Taryn, 2019, p. 113). Koch et al. (2001) postulate that codeswitching is the foundation of assimilation into White American culture. Students are therefore obliged to codeswitch to meet the hegemonic standards of education.

Inclusion Versus Separate Setting

U.S. Students must be taught in the Least Restrictive Environment (LRE), a practice mandated by the Individuals with Disabilities Act. During the special education eligibility determination process the team determines which setting is most appropriate for the student (IDEA, 2004). The team may reconvene at any point to adjust placement as needed. While inclusion is the overarching goal, some school districts lack qualified and certified teachers to deliver services within the general education setting (Hehir, 2016). Ableism continues to be centered and the dominate group remains at the fore despite mandates that call for equity and inclusion. When dis/abled students are not centered and valued, negative consequences will follow. Students will not receive their specialized services and supports and will subsequently not make adequate progress on their academic or self-regulation goals.

Between and Betwixt: Navigating Both Settings

Where students with ED are educated matters. A sense of belonging is critically important for students and their social and psychological wellness and functioning (Allen et al., 2021). Further a sense of belonging leads youth to actively engage in social and psychological treatment. Turner (1975) coined the phrase “betwixt and between” to refer to the transitional state a person may be in and how that position can be detrimental as they “have no space to belong to” (Turner, 1982, p. 27). We may apply this concept to students who are in the process of becoming eligible for special education services as we know there is a longer lag time for girls to be identified and receive interventions (Gage et al., 2012; Hess Rice et al., 2008).

Students with ED bring to school their invisible experiences from previous academic settings. They experience more changes in their education placement than other disability groups and are four times more likely to be suspended than students in other disability groups or students in the general education setting (Wagner, 2005). Research indicates that half of students

with ED end up dropping out of school and that students with ED have the highest dropout rate out of any disability category (Wagner et al., 2005).

Relationships With School Staff

Students with ED have great deficits in building and maintaining healthy relationships with peers and staff (IDEA, 2004). RCT fits well within my area of research as it applies to people who have been ignored and marginalized and subsequently their voices have been silenced. RCT seeks to restore human connection and focuses on healthy relationships. Beck-Cross and Cooper (2015) reported a close connection with at least one adult in school can have a positive and significant impact on a student's emotional well-being. Whitlow et al. (2018) found in their case study of three girls with ED that each girl had a positive connection with one adult in school, which they reported as beneficial. When explored further, special education staff had more time to cultivate relationships with these girls. The girls identified feeling connected and close with their special education teachers and faculty but not with their inclusion teachers.

RCT also focuses on healing isolation and disconnection. Students with ED may feel ostracized due to their disability and experiences of rejection or marginalization within regular education settings. When students are marginalized feelings of shame, fear, self-blame, unworthiness, and even psychological impairment may occur (Cholewa, 2014). Authentic and healthy relationships are paramount for healthy development and RCT posits that "people need to be in connection in order to change, to open up, to shift, to transform, to heal, and to grow" (Jordan and Hartling, 2002, p. 54). Relational cultural theory addresses the intersectionality of race, gender, and disability and acts as a vehicle to promote healthy relationships for students with ED.

Research indicates that culturally responsive teaching that integrates the ecological perspectives and a strengths-based view of students of color leads to positive academic outcomes (Cholewa et al., 2014). Student ecological systems are dynamic, and how school staff acknowledge, and honor different perspectives can influence academic success. Culturally responsive teaching encourages educators to design curriculum and instruction from the “perspective of students’ diversity as strengths rather than deficits” (Kieran & Anderson, 2018, p. 1202).

Chapter Summary

This literature review provided insights into the complexities of ED and adolescent girls. Research indicates that ED is poorly defined and inconsistently diagnosed—especially for girls—and girls receive fewer and later referrals for ED than boys. Questions persist about the characteristics of ED in girls and how ED manifests. More research is needed to ascertain the relationship between trauma and ED in adolescent girls. Much remains to be learned about how girls with ED are perceived by educators, particularly related to intersectional issues of gender, race, and dis/ability bias.

Likewise, this review acknowledges the intersectionality of race and dis/ability and the social, political, and cultural contexts that continue to uphold inequities within education. Extant research does not sufficiently explore the intersectionality of race and disability in understanding girls’ experiences. The present research explores these intersections and delves into various forms of trauma to gain a better understanding of their impact on girls and how they affect student achievement and success.

The social environment has emerged as a principal factor for further study. How girls with ED experience their placement in special education within the school needs investigation.

When students are marginalized feelings of shame, fear, self-blame, unworthiness, and even psychological impairment may occur (Cholewa, 2014). Larger environmental systems also deserve attention. Risk factors like child welfare involvement are important to contemplate when interviewing participants and considering interventions. Fortunately, there should also be opportunities to explore positives in the girls' environments, such as the protective features of relationships with school staff and peers.

By investigating the ideas and perspectives of girls with ED, the present study elevates the voices of a marginalized group of students within special education, filling a gap in the current body of literature. Doing so will position them to have greater input in their educational journey and acknowledge their lived experiences.

CHAPTER 3: METHODOLOGY AND RESEARCH DESIGN

The purpose of the present study is to examine the relationship between female high school students, their special education disability, and the community in which they learn. Specifically, it is designed to elicit insights that could lead to improved academic success and higher high school graduation rates for girls with emotional disturbance. It seeks to answer the question, “How do cisgender female adolescents, Grades 8–12, who have qualified for an individual education program under the classification of emotional disturbance, experience either a self-contained classroom setting or an inclusion setting to specifically address their disability?”

In this chapter, I review my epistemological lens and positionality, before describing the rationale for my research design founded on critical constructivism, critical feminist theory, and DisCrit. I then review my strategies for data collection and analysis and conclude with a review of ethical and social justice considerations.

Epistemology

This section explores the epistemological philosophies that frame this study. As described in my literature review (Chapter 2), my epistemological stance draws on ecological systems theory, cultural-relational theory (CRT), trauma theory, and stigma theory. However, my deepest commitment is to addressing social inequities, resisting injustice, and working towards change for women. Therefore, I highlight critical constructivist, feminist, and disability (DisCrit) approaches.

Critical Constructivism

A critical constructivist approach “emphasizes understanding the contingent nature of knowledge to induce a more critical reflection about various educational institutions and practices” (Bentley et al., 2007, p. 10). I acknowledge and hold complexity and plurality, reject

universal claims, and “question configurations of power shored up when academics narrowly police the boundaries of accredited knowledge” (Hawkesworth, 2010, p. 693). Thus, this study is designed to foster rich dialogue between the researcher and participants, privileging student stories over dominant narratives of knowledge production.

Understanding individual experience will inform the development of practical solutions for special education interventions. Further, critical theory aims to “disrupt and challenge the status quo” (Ponterotto, 2005, p. 129), work toward transformation, and reflect “a belief in a constructed lived experience that is mediated by relations with social and historical contexts” (p. 130). As a critical researcher, I aim to “promote liberation, transformation, consciousness raising, and social change” (Levitt, 2021, p. 12).

Fine (2018) has led me to use *critical bifocality*, looking beyond institutional borders to consider race, class, and historical and structural contexts. Hence, I will investigate how systems of power silence girls with ED more broadly; and explore why they are often marginalized in research. Inspired by Freire’s (1970/2018) efforts to center marginalized voices, alternate discourses regarding female students in special education were sought in order to construct and explore new knowledge on the topic. Indeed, this approach was designed to promote a sense of empowerment among participants, as their voices and experiences are sought and acknowledged.

Critical Feminism

As a critical feminist, I am committed to acknowledging the oppression of women, valuing women, and striving for social change that benefits women (Prilleltensky & Nelson, 2002). I pay close attention to power relations connected to sexuality, gender, race, and the oppressive systems that permeate daily life as well as formal institutions and the hegemonic norms that guide them (hooks, 2000). I work to critically evaluate emerging systems of power

that are often dormant or invisible within the mainstream context (Hawkesworth, 2010). In my mission to be socially just and accountable, critical feminist theory helps me to develop research practices that enhance the feminist goals of progressive social transformation, change, and activism (Sprague, 2016). This is reflected in the study's efforts to understand and "uncover cultural and institutional sources and forces of oppression" (Marshall, 1997, as cited in Rossman, 2016, p. 28).

Disability Studies and Critical Race Theory (DisCrit)

The tenets of DisCrit are crucial in developing my own critical framework and perspective as an activist, a scholar, and a researcher. DisCrit critically examines the achievement and opportunity gaps from both a disability and critical race theory lens to understand both the historical and contemporary issues in education (Connor et al., 2016). Using DisCrit theory requires that I recognize "interlocking marginalizing processes which target multiple dimensions of identity" (Annamma & Morrison, 2018, p. 72).

In the research process, I sought to acknowledge and understand the multiple identities and positionalities of each research participant by asking questions and creating a vision board that embraces their authentic selves. Instead, I eschewed assumptions and viewed participants as experts in their own lives. In interviews, I acknowledged the influence of the desired norm (e.g., White, cis-gender, heterosexual, able-bodied, male). I asked participants what it has been like for them to be pressured to be closer to the norm in school, and I conducted each interview with curiosity and acknowledged how challenging school may have been for them, responding respectfully and compassionately. Throughout the process, I challenged my own biases and looked for ways it might show up in my research and data analysis.

Research Design

This study applied qualitative principles and methods to understand the experiences of adolescent girls within special education with ED. Narrowing my focus on this specific population through qualitative research contributed to “practical solutions to human problems” (Wertz et al., 2011, p. 83). Qualitative research moves “toward discovering what is happening in a particular situation with a particular person or group” (Agee, 2009, p. 434). The present study focused on a marginalized population to understand participant experiences (Marshall & Rossman, 2016), emphasizing the “importance of context, setting, and participants’ frames of reference” (Marshall & Rossman, 2016, p. 101).

Phenomenological Inquiry

Phenomenology was an appropriate method for this inquiry, as it focuses on the essence of human experience, attempts to elaborate on how people exist in the world, and is evolving, flexible, and adaptable (Wertz, 2011). Furthermore, phenomenology illuminates the self within an experience and employs “descriptive conceptual tools and terminology relevant to the rigorous investigation of human experience ... and consequently often evoke[s] an immediate resonance and recognition” (Wertz, 2011, p. 130). Phenomenology resonates with me because of its emphasis on “the precious value of and dignity of real persons ... [and] the tiniest details of experience and ... understanding them better by relating them together in the ever-changing holism of experience” (Wertz, 2011, p. 135). To a dismissive onlooker, adolescent girls can be written off as silly, dramatic, and childish. By using a phenomenological approach, I sought to bring awareness to what emerges for girls at a particular time in a particular context by attending to the details, and by acknowledging their complex understanding of and relationship to a given experience. My data analysis process included multiple readings, reflections, and exploration of

the transcripts to develop an understanding of the experience of girls with ED in special education. A phenomenological approach guided my understanding of the various viewpoints and stories each participant shared in interviews (Englander, 2019).

Being grounded in phenomenology, I suspended scientific assumption (Ashworth, 2015), gained descriptive access, and analyzed the meanings of special education settings (Wertz, 2005). This approach centered the participants' lived experience: "how they perceive it, describe it, feel about it, judge it, remember it, make sense of it, and talk about it with others" (Patton, 2002, as cited in Marshall & Rossman, 2016, p. 17). I consciously examined student experiences from their perspectives, rather than through predefined theoretical categories (Ashworth, 2015). I prioritized lived experience over document analysis and was committed to amplifying the voices of this marginalized group. Further, phenomenology insists that researchers remain "true to the facts" (Groenewald, 2004, p. 44). Based on my professional experience, I understand that many educational documents are subjective and bias-laden, and I maintained this understanding throughout my research.

In this study, I used an interpretive phenomenological analysis approach as an experiential researcher. This included paying close attention to ideography by "understanding particular experiences of particular people in particular circumstances" (Smith & Nizza, 2022, p. 8). I embraced ideography and focused on the account of each participant and resisted a nomothetic approach. In doing so, I located a pattern of convergence and "an analysis of the particular and different ways participants expresses that commonality" (Smith & Nizza, 2022, pp. 8–9).

Arts-Informed Research

Arts-informed research deeply enhanced my phenomenological study. Layering arts-informed research with interviews provided greater depth, inviting “a creative and imaginative rendition of the phenomenon being explored and the underlying qualitative method” (Cole & Knowles, 2011, pp.121–122). It encouraged connection, evoked feelings and emotions, and provided visual representation of student experiences. Such artifacts contribute to “connecting, in a holistic way, with the hearts, souls and minds of diverse yet defined audiences” (Cole & Knowles, 2011, p. 122).

In addition, students with ED may benefit from using other media beyond talking to express themselves. To this end, I included a vision board activity, as “vision boards tap into imagination and creative, non-linear thinking, and may free individuals to include subconscious wishes or dreams in their formation of consciously stated goals or aspirations” (Waakles et al., 2019, p. 2). Vision boards are also appealing, as students do not need to focus on answering the questions correctly but instead focus on engaging with the process and self-reflecting (Burton & Lent, 2016). Finally, vision boards are particularly helpful to those who have been limited by their marginalized identities such a race, gender, dis/ability (Burton & Lent, 2016) because they “amplify the voices that are not always included in the dominate discourse” (Waakles et al., 2019, p. 3).

Participants

I recruited participants from middle and high schools in one large city and nearby suburb in the northeast region of the United States. I extended my sample to 10 participants, ultimately reaching my goal to recruit seven participants.

Participant Demographics

Participants were girls in Grades 7–12. I focused on this stage of adolescent development because students at this age are familiar with transitions from middle school to high school and are becoming more socially independent (Curtis, 2015). During this time of development, a relativistic perspective may develop, alongside an increasing appreciation for the validity of multiple perspectives and more principled moral judgments (Byrnes, 2003; Smetana & Turiel, 2003). Coupled with these burgeoning characteristics, this stage of development allowed for rich interviewing.

Cisgender girls were centered in the present project, as girls' experiences are lacking in extant research. Therefore, this research sought to further learn about their unique experience (Hess Rice et al., 2012; Whitlow et al., 2018). Future research is warranted to elicit the perspectives and experiences of trans and nonbinary youth.

All participants receive special education services and have an IEP. All participants had ED per their IEP, and may have other disabilities as well. Participants were educated in substantially separate education settings and inclusion settings.

While the sample size is small, it was diverse by race, ethnicity, and socioeconomic status. I recruited a majority of girls of color from multiple racial, ethnic, and socioeconomic backgrounds. However, participants were not excluded based on their race, ethnicity, or socioeconomic status.

Settings for Data Collection

Participants were given a choice to interview at a public library, university library, or a public co-working space. Each space had a door with a glass window to ensure confidentiality.

Srisc and Hess Rice (2012) noted that girls participating in their research deeply valued the room where they met because it “allowed for the girls to feel comfortable and expressive” (p. 639).

Recruitment and Sampling Process

I used networking strategies to locate appropriate participants for this study. Emails and flyers were sent to clinical and special education coordinators who work with students in special education with emotional disturbance in an urban public school district and adjacent charter schools. The coordinators gave information to students and families who fit the criteria and expressed interest in the study. Participants under 18 years old needed parental consent to participate. I also reached out to professionals within my school network. I stated my purpose of the study, the voluntary commitment requested, and estimated timeline. Recruits were offered a \$25 gift card for participation. Candidates for participation were provided information and signed an assent form that they agreed to participate (see Appendix E). Their legal guardians received consent forms and confirmed, in writing, that their child could participate without the guardian’s presence (see Appendix D).

Data Collection and Management

Prior to data collection, I conducted a pilot exercise to practice and refine my research techniques. In this pilot study, formal data collection consisted of individual interviews and art-based responses. I conducted one interview with a female adolescent with an IEP listing ED. The participant also created a vision board (described below).

In this study, each participant was scheduled for a 60–90-minute in-depth, semi-structured, open-ended interview followed by creating a vision board. The interview was audio recorded with multiple devices. First, participants were given information defining a vision board as a collage of words, images, pictures, colors, and design that represent future hopes and

dreams, and may serve as motivation. Participants were encouraged to express who they are and where they see themselves in the future. The term *future* was not defined, giving students the freedom to determine their own timelines. Participants were invited to use an assortment of art materials, magazines, stickers, and decorative materials to craft their vision boards. Participants were encouraged to talk about their vision boards and were asked further questions about their school experiences. Each vision board was photographed, and participants took their vision boards home after their interview. All recordings, transcripts, and interview data are stored in a locked file cabinet on a password-protected computer, and only I have access to this information. Data will be destroyed after five years.

Data Analysis

I utilized several analytical tools for this study including reflexive journaling, transcription, data organization, coding with MAXQDA software, the artistic expression analysis chart, and conferring with peers and colleagues. The analysis was an iterative process.

Reflexive Journaling

I made journal entries after conducting interviews and reviewing the vision boards. I documented my immediate reactions and thoughts in a journal, attempting to avoid “considering how well they conform ... or [do] not conform to [my] preconceptions” (Wertz, 2005, p. 174). I reflected on how my prior attitudes might influence or interfere with the research.

Transcription

I utilized transcription software for each interview. I listened to each recording and checked for any errors in the transcripts and corrected them. After transcription, I kept an open mind and read the data multiple times to locate core ideas and deeper meanings (Yeh & Iman, 2007). Digging deeper, I began to notice “how parts are ordered and juxtaposed, noticing the

'negative spaces' of silence and omissions, and focusing on contradictions and inconsistencies" (Josselson, 2004, p. 18). I reread the data numerous times over eight months and journaled after each reading.

Coding

By sifting through the transcripts and data, I sought to locate the bigger picture (Saldaña, 2021). Organizing that data illuminated themes and helped track similarities and differences among participants. I utilized MAXQDA coding software to support my coding process by "identify[ing] all nonrepetitive and nonoverlapping statements relevant to the experience under investigation" (Hays & Wood, 2011, p. 291). I created lists and categories to "cluster invariant meaning units" (Hays & Wood, 2011, p. 291). I located "the multiple meanings and tensions in the textural descriptions and create a structure description" (Hays & Wood, 2011, p. 291), comparing the interviews and noting where themes intersect. After coding each interview, I then created a memo in response to the code which became the "researchers' narrative" (Saldaña, 2021, p. 80). I further analyzed my own memos to "summarize, integrate, and revise what has been observed and developed to date" (Saldaña, 2021, p. 67). This process was grueling and took multiple sittings for patterns to emerge. Over time, the identified codes and subcodes were grouped into categories and were then synthesized into high-level categories which emerged into themes (Amanfi, 2020). To further understand my data, I utilized what Saldaña (2021) refers to as codeweaving. I printed out all my codes and memos, cut them up, and moved them around to create a visual representation of the work to further assist my analysis. In so doing, I was able to "consider possible hierarchies, chronological flow and influences and affects" (p. 64); key concepts, themes, patterns, and codes emerged. The outcome of this work can be found Appendix F and helped shape my findings chapter. My data analysis was iterative and ongoing,

as “data is evolving rather than static” (Yeh & Inman, 2007, p. 391). With each layer of coding, the complexity emerged.

To analyze the vision boards, I first asked participants about the meaning of their work in the individual interviews. The verbal commentary helped concretize the meaning of the images. Freeman and Mathison (2009) posit that images have a living quality to them “that is often absent in verbal statements. What is lacking, however, is a road map, a way around the details of the drawing, what they mean, what they convey” (p. 159). Each board was reviewed by doctoral students and mental health clinicians with expertise in working with adolescents. Reviewers were given a digital copy of each vision board and asked to respond to them in writing. Eight reviewers provided feedback on vision board themes, including additions and omissions, colors, imagery, scale, repetition and patterns, and word choice. Reviewer feedback was organized in a spreadsheet. I used Freeman and Mathison’s (2009) coding guide to drive my coding. In utilizing a coding matrix, I captured and catalogued “the content of the drawing so that they [were] organized around particular themes” (Freeman & Mathison, 2009, p. 160). These themes were compared to themes from the interviews, peer feedback, and then narrowed down.

I reviewed the vision boards multiple times to unfurl meaning and journaled after each review of the board tracking what was new each time and noticing repetition of words, colors, images, and shapes. Freeman and Mathison (2009) coding matrix guided my analysis process in three steps. I first focused on the subject matter. With the first *literal reading* I noticed the physical features of each image, who or what was selected, and where it was placed on the board. This anchored my initial analysis and was captured in my journal and memos. For the *biographical reading* I considered how each image interacted with the other, how it related back to the participant, and any social implications the image may have. Participants gave explicit

reasons to why the selected words and images and their interviews also framed the biographical reading. For the *empathic reading* I considered what experiences are being invoked. This was vast, as each participant had their own unique journey and understandings. For the *iconic reading* I focused on how the images relate to the greater environment, cultural constructions, ideas and values. I noticed themes and began to create lists of emerging patterns. For the *psychological reading* I considered the emotional and mental state of mind of each participant. Noting how they presented the information and shared their vision board with.

I then moved onto examining the image creation. I began with the *technical reading* and contemplated the design features and if the images were scaled. For the *editorial reading* I studied what values and knowledge that was being communicated. For the *indexical reading* I considered how the image values are related specifically to the time and place. I looked for expressions that delineated time. Finally for the *spectatorship reading* I reflected on where I was in relation to the board and images. I journaled how my own experiences and positionality influenced my perceptions of each board.

My final area of focus was on the audience/viewer. I focused on how the board affected the viewer and what impact the images had on the viewer. I then moved on to consider how do the participants see themselves and do the images interact with what they described in their interviews. This analysis was necessary in ensuring I reviewed and accounted for all key aspects of each participant's vision board.

Deducing Categories

Once I determined my codes, I organized them into categories (Saldaña, 2013). Grouping occurred because they were alike, similar, or had something in common. This process was conducted for both the interviews and the vision boards.

Common Themes and Making Interpretations

To build a coherent interpretation, I knew “it is the process of the interpreter’s thought that is the subject of the presentation” (Josselson, 2004, p. 19). I worked to avoid “lopsided interpretations that represent the biases of the researcher or only few of the participants” (Morrow, 2005, p. 255). Throughout this stage, I sought for ways that data interpretation could “draw out aspects of the phenomenon that have not been considered previously ... [or] bring a wider systemic analysis to bear upon the understanding of a topic” (Levitt et al., 2017, p. 16). To enhance credibility and to address researcher bias I engaged in journaling after conducting an interview (Chenail, 2011). This helped me track choices I made and could reflect on the progression of my thoughts, and the evolution of ideas and meaning on each interview and artwork.

Validity Strategies

Data was gathered in variety of methods to ensure triangulation “to contrast the data and validate the data if it yields similar findings” (Groenwald, 2004, p. 46). In addition to interview data, I analyzed vision boards. Using the different data sets allowed for deeper understanding in understanding the experiences of each participant. Centering the research on girls and their experiences answers “calls for including children’s and youth’s perspectives as relevant and insightful in learning more about aspects of their world” (Marshal & Rossman, 2016, p. 161). In capturing their voices, experiences, and feelings we may then be able to foster changes to support their academic achievement and growth.

During the data collection, I was cognizant of the power dynamics and acknowledged that “research interviews occur at the request of the researcher, primarily to serve his or her goals rather than those of participants, and this dynamic creates an inescapable hierarchy of power and

potential influence” (Haverkamp, 2015, p. 153). Students may have felt like they must participate and not know how to decline. To counter that, I assured each participant that their participation was not connected to the school in any way. Furthermore, during each interview, I reminded myself to listen and hear each story objectively. I noticed when I felt defensive or wrapped up in my responses rather than fully listening and being engaged in the interview. I did my best to pause and refrain from asking leading questions and to ask for clarification as needed. Journaling was an essential tool I used after each interaction with a participant.

Credibility

I know my own experience and emotional connection to the topic had significant impact on how I conducted my research. Using my reflective journaling process, I worked to “not engage in data collection seeking only to confirm [my] own perspectives but instead strive to be open to all responses” (Levitt et al., 2017, p. 13). Further, I “bracket[ed] personal past knowledge and all other theoretical knowledge ... so that full attention can be given to the instance of the phenomenon that is currently appearing” (Patton, 2015, p. 117). To ensure credibility, I gathered data using a variety of methods, an interview and vision board. I triangulated different data sources, used thick and rich description to relay the findings, stated my own bias towards the study, and used peer debriefing (Creswell & Creswell, 2018, p. 201).

Reliability

Building rapport and a trusting relationship was paramount to this study. I prioritized my participants comfort and worked to ensure they felt comfortable with me to talk about their experiences openly and honestly. This study relied on participants’ ability to be vulnerable and forthcoming which will also increase trustworthiness of the data (Marshall & Rossman, 2016).

Every effort was made to faithfully report what participants but due to their status as minors and being in special education member checking was not part of my research process.

I engaged in frequent peer debriefing (Marshall & Rossman, 2016) to address and reduce my personal bias. This was a critical step in ensuring I was understanding the data. This helped me notice what was missed or was given less attention in my interviews. In doing this after each interview, my interview technique and questions were more refined, and I was more at ease. I also shared the vision boards with my doctoral cohort peers to illicit their impressions and how they interpreted the participants visions for their future. I did not utilize member checking because my participants are adolescents, and it would likely be ineffective (Marshall & Rossman, 2016). Further, when referencing my participants, I only used their pseudonyms with colleagues and members of my research committee. To screen my research process for reliability, I documented my procedures in detail and every step of the way (Creswell & Creswell, 2018). I carefully examined my records and codes for errors and corrected them.

Stakeholder Considerations

Participants are the primary stakeholders as this research explicitly centered their experience. The educational system and schools where the students attend are also stakeholders as the research may help them advance special education for girls with emotional disturbance. The findings may also help school-based clinicians and teachers understand and advocate for their students to ensure success in special education.

It is important to consider how study findings might be distributed to stakeholders. Participants of this study and their families were offered access to the findings of my final study. Furthermore, I also offered to meet to discuss the findings and what implications or actions could transpire based on the findings.

Ethical Considerations

Throughout the study, I followed the National Association of Social Workers (NASW) code of ethics and made “thoughtful decisions about how the Code applies in new areas of research” (Haverkamp, 2005, p. 149), in accordance with Institutional Review Board (IRB) standards. As part of the research process, I also completed training for protection of human participants in November 2020 (Appendix F). As the researcher, I have “an obligation to promote the best interests of the principal (the participant)” (Haverkamp, 2005, p. 151). Ethical considerations were considered at each stage, beginning with materials provided during recruitment and extending to procedures for data collection, retention, and analysis.

During data collection, I established a safety protocol with the families. In one interview, for example, I informed a participant that I would need to speak to their parent regarding the mental health of a sibling. Immediately following the interview, I spoke with a parent who informed me the sibling was safe and being treated. Based on this conversation, I determined that I did not need to report to the police or the Department of Children and Families. For each interview, I had a list of available outpatient clinical support as well as emergency service information for crisis support if needed. To maintain participant confidentiality, all recordings are stored in a locked office on a password protected computer. All participants took their vision boards home with them, and data analysis was conducted on a password-secured computer.

Social Justice Considerations

As a social worker, I am influenced and directed by National Association of Social (NASW) Code of Ethics which holds social workers accountable by explicitly stating “social workers must challenge social injustice ... pursue social change, particularly with and on behalf of vulnerable and oppressed individuals and groups of people” (NASW, 2017, p. 2). As noted

above, this project explicitly involves young women with disability/ED, with special attention paid to the experience of people of color. These populations have “been excluded from psychological research, stereotyped, and in some instances abused” (Lyons et al., 2013, p. 11), making them more vulnerable to academic failure. It was necessary for me to consider the sociopolitical context, the history of special education, and the widespread impact of individual and collective trauma experienced by marginalized people. As a researcher I needed to “analyze the interplay of these power dynamics in systems of privilege and oppression relative to the potential impact on various facets of this study” (Voith et al., 2020, p.172). These steps ensured that my research was rooted in social justice. I used a social justice paradigm to challenge traditional notions of universal truth, scientific neutrality, and researcher dispassion (Parry et al., 2013).

This research was influenced by four aspirations of socially just qualitative research: equity, access, participation, and harmony for culturally diverse populations (Lyons et al., 2013). I integrated the four aspirations into each step of my research including planning and development of my research question, data collection, data analysis and interpretation, and recommendations.

Since the conception of this study, I focused on equity, and prioritized research that centered the experiences of girls and how the findings may influence education practices to expand and support girls in special education. I engaged in respectful and ethical interviews and was aware of how my own input, privilege, and experiences may have influenced data and interpretation. I was careful to consider my own connections to the work and that access underpinned my recruitment of girls and framed the research as an opportunity to contribute to the greater discussion of special education, emotional disturbance, and academic achievement.

When the girls participated in the study and their quotes were utilized, they actively shaped the discussion which could impact their academic careers and lives. Finally, the research can be considered harmonious because this study puts the needs of the participants and community above the needs of the me, the researcher. In disseminating my findings and the knowledge from the participants, the knowledge may be considered simultaneously emancipatory and full of possibility for marginalized people (Johnson & Parry, 2022). In Chapter five I review implications and recommendations for research and practice that are practical. These four aspirations guided each step of research process in order to align with socially just research practices. Social justice research is a moral, ethical, and a political task (Johnson & Parry, 2022) and was at the fore of my research process and actions.

CHAPTER 4: FINDINGS

The present chapter presents findings from data collected during interviews with seven adolescent participants. The chapter opens with participant biographies to provide narrative context beyond what is captured in the data. Participants vision boards are included alongside biographies to offer additional insight into participant personalities and concerns. Following biographies, I examine themes and related subthemes emerging in the data, before offering concluding remarks.

Adolescent Biographies

The following biographies provide additional context for understanding the individual needs and experiences of each participant. Participants selected their own pseudonyms and identifying information was changed to protect their identity. Participant vision boards are included as a complement to demographic and biographical information.

Nessa

Nessa is a 14-year-old, Indigenous American girl, who is currently in the eighth grade at a public school in the greater Boston area. She receives special education services for emotional impairment (EI), and lives at home with her adoptive parents. Nessa expressed interest in the interview after learning about it from her therapist. She was accompanied by her mother and grandmother.

Nessa takes art classes, loves interior design and all things beauty related. She prioritizes self-care and is a member of a competitive cheerleading team. She spends up to 4 hours a day on Snapchat and enjoys meeting up with her friends from cheerleading. Despite moving around a lot when she was younger and being placed in foster care, Nessa loved elementary school and

shared fond memories of her teachers. However, middle school has been extremely challenging, and Nessa plans to transition to a private high school for ninth grade in hopes of a fresh start.

Nessa reported bullying and harassment at school throughout middle school, and she no longer attempts to socialize with peers in school. She reported being teased for her style, hygiene, skin, and body. Nessa described that the peer issues coupled with mandatory isolation due to COVID-19 exacerbated her mental health challenges and led to needing support through special education. She experienced an arduous eligibility determination process and severely delayed interventions. Nessa expressed interest in becoming a lawyer, as she reported a talent for arguing, or an interior designer because she is drawn to beauty. Nessa attends weekly outpatient therapy and is diagnosed with an eating disorder, posttraumatic stress disorder, anxiety, and depression. She takes medication daily.

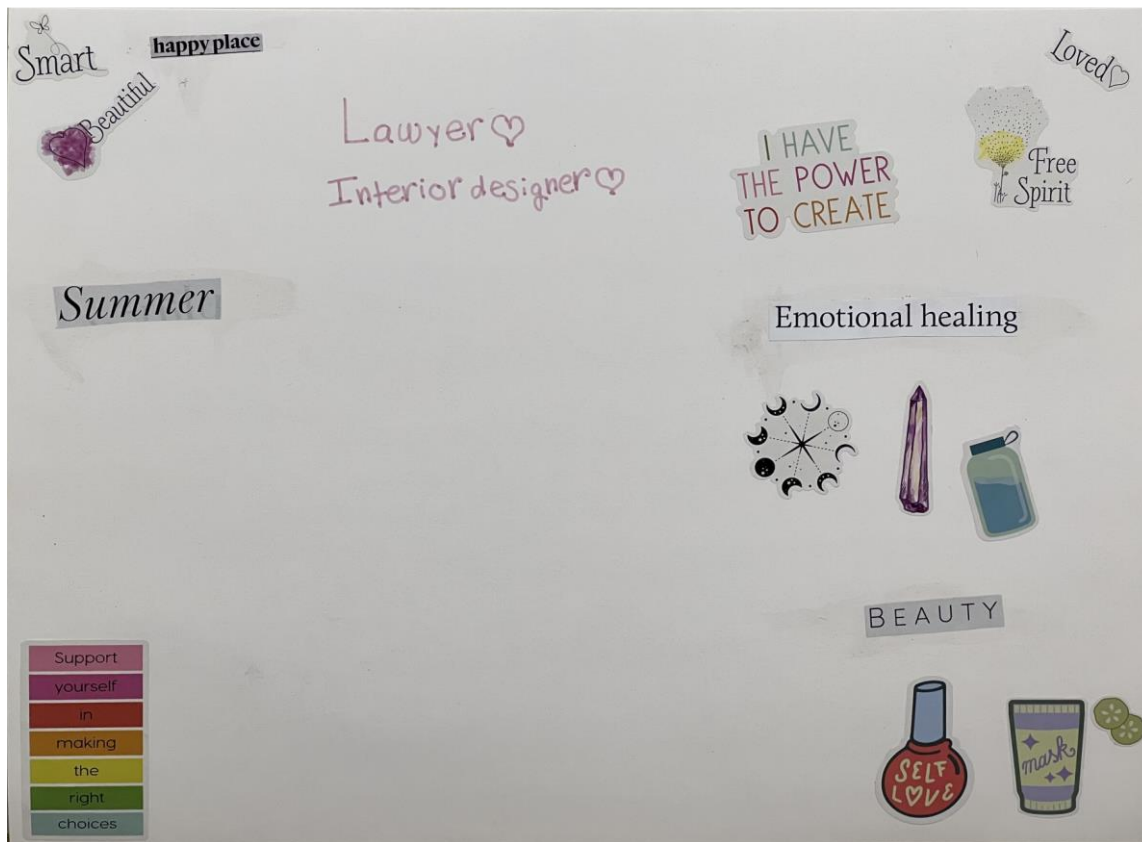
Nessa spent approximately 45 minutes crafting her vision board (see Figure 1). She selected a white posterboard and sifted through many magazines and selected four different texts. She utilized stickers with words and images and used marker to write two career aspirations. The vision board was sparse with all content along the edges leaving a big unfilled space. The board contains the words *power*, *support*, *emotional healing*, *loved*, and *free spirit*. In the bottom left corner, Nessa placed a sticker with the quote “support yourself in making the right choices,” aligning with her hope of a new beginning when she begins high school in a new place.

Nessa created two sections to her vision board. The first section is labeled emotional healing and depicts the moon phases, a crystal, and a water bottle. The image of the moon phases evokes a sentiment that change will occur and in time there are new prospects. Despite all the pain and mental health challenges Nessa spoke about, the vision board focused on renewal and what is to come. She remains optimistic and open. The second section is titled “Beauty” and

consists of red nail polish, a face mask and cucumber slice stickers. While these products are used for personal enhancement, when used they may transform a person into a more beautiful version of themselves. Nessa is actively hoping for a renewal, as she closes out the chapter of middle school and these beauty tools may symbolize tools she will use. In the top left corner, there is a small butterfly connected to word “smart.” Butterflies are a symbol for transformation, hope, and rebirth in many cultures (Gustafasson et al., 2015). The butterfly is in motion and may symbolize her “flight” to a new placement. While the board is not filled with many visuals, each selected word or image is powerful and allows for possibility.

Figure 1

Nessa’s Vision Board



Hannah

Hannah is a White, bisexual, 14-year-old ninth grader at a Boston public high school, where she is enrolled in an inclusion special education program for students with emotional impairment who internalize their feelings. Hannah has chronic health issues that limit her mobility and have contributed to multiple hospitalizations. She lives at home with her father, twin brother, and cat. Her parents are separated, and her mom lives 45-minutes away. Hannah was interested in the study because of the art component and her desire to create. Hannah is a self-reported homebody, who likes to see her friends from middle school. She dreams of being outdoors and finds peace in nature. Hannah loves to write and uses art to express herself. She is adjusting to her new high school and reports liking the setting. She felt like the school system finally placed her appropriately after a “breakdown” that ended with long-term hospitalization. While she indicated that the staff at her previous school was inadequately trained to support students with emotional impairment, Hannah’s current program is meeting her social and emotional needs. When thinking of her future, Hannah focuses on healing and managing her mental health day by day. She has a robust treatment team and engages in both school counseling and outpatient therapy through the Department of Mental Health. Hannah is diagnosed with anxiety, depression, and post-traumatic stress disorder, with an extensive history of self-harm and documented suicide attempts. She takes medication daily.

Hannah spent nearly 90 minutes working on her vision board (see Figure 2) and opted for a natural wooden board instead of white posterboard. Her vision board is filled with stickers, and images and words from magazines. Hannah used warm colors that harmonize with the wooden grain of the board. Four images populate the bottom of the design: yellow paper butterflies, appearing to fly off the page; a picture of a couple watching the sun set on a mountain top; a

cartoon woman, daydreaming of a tropical place with her eyes closed; and a single woman exploring the wilderness in the winter as the sun sets. Together, these images depict the four seasons: butterflies in spring, sunset in fall, daydreaming in summer, and winter exploration. In Hannah's interview, she explained that her life is punctuated by time spent in the hospital to address her mental health. While the hospitalizations were necessary, her concept of time became hard to track. The four seasons ground her journey to wellness and the different seasons bring different challenges and triumphs. Further, Hannah acknowledged that "things take time" when changing schools, making friends, being in recovery, being in relationships, and being alive.

Hannah also used floral and blue watercolor washi tape and a small cluster of conversation stickers, noting "thank you" and "I am happy," alongside a flower, computer, and girl in a beauty mask. Hannah spoke about the positives and challenges she has online when interacting with others about health and recovery. She plastered "thank you" over the computer which could indicate that she grateful for connections on various social media platforms. And the person wearing a facemask may reflect the masks she wears to hide her pain. While facemasks are synonymous with beauty routines, the image may suggest masking her identity.

Hannah used words from magazines and stickers to add a layer above the images. The top layer is even with the images and creates a clean break in her collage. She added the words *recovery*, *important*, *world*, *discover*, and *feelings*. Coupled with the images, these words reflect her internal journey. The closed eyes may signal internal work, gratitude, her recovery, and the wisdom of understanding the importance of her own connection to her body. When asked about meaning of her board, Hannah reflected:

I don't think I'm ever going to be healed. I'm not ever going to not ever deal with this ever again. It's just kind of like managing it. Recovery sometimes seems scary because a lot of times I'm being forced into it like I don't have a choice. Other times, I want to get there because I'll have a sense of, I'll be more comfortable. Also, the hard thing with that is I feel like I'm not allowed to have bad days. Even if I'm out of the hospital and I'm doing better than I was, that doesn't mean I'm not going to slip up or I'm not going to have a bad day. When people are shocked when I say I have a bad day, and I'm like, 'Everyone has bad days.'

Figure 2

Hannah's Vision Board



Lores

Lores is a 17-year-old African American girl in the eleventh grade. She attends a public school in Boston and receives therapeutic counseling services and support through her individual education program (IEP). Lores lives at home with her mom and three siblings. She was detail-oriented when outlining her school journey. Lores reflected with ease and was openly proud of her progress in school over the years. She transitioned from a therapeutic day school to an inclusion setting during COVID. In eleventh grade, her family moved, and she transitioned to the Boston Public School district. Lores reports that eleventh grade has been her best school year yet, and she wants to improve her college prospects. She has friends, enjoys her alone time, and finds peace in a routine. She enjoys shopping and loves listening to music. Lores is diagnosed with attention deficit hyperactivity disorder, and post-traumatic stress disorder. At the time of this research, she only received school-based therapy.

Lores's vision board (see Figure 3) was completed on a white posterboard which took about 60 minutes to create. She made a border with washi tape and included a handful of images and words that take up most of the space. The board is not cluttered, and each image is purposeful. Lores described the board as being "minimalistic, but me at the same time."

A pop-art stylized depiction of Angela Basset fills the left side and spills off the board. Lores noted, "she's very iconic, especially in the Black community," continuing, "I want to put her because that's someone to idolize." Rather than trim the image to fit the vision board, she let it hang over the left side.

The board is anchored by an astronaut helmet with "she can STEM" scrawled across the mask and decorated with flowers. Lores reported that she admires astronauts and respects the

skillset others have, even if she does not share it. She was drawn to the “vibe” of the graphic.

Part of her vision is the representation of others doing “cool things.”

She included “Tiffany & Co.” because it represents her desire for the “finer things” in life. She also selected the text “oh, the places you’ll go” because she envisions upward mobility, and the phrase inspires her to keep going even when she is “doing the wrong thing or not being my best self.”

She included a motivational instruction on the bottom left corner:

Let go of procrastination. Sometimes we procrastinate when a task feels daunting or simply too big to tackle. The best way to stay on top of your goals and avoid future stress is to develop a plan with several short-term targets that can realistically be achieved.

By including this phrase, she hopes to remind herself not to put things off.

Lores handwrote “xoxo,” drew a heart, scribbled a friend’s name, and indicated that she finds peace, “by myself.” During the interview, Lores talked about attending college and becoming a lawyer to advocate for people. She was quick to state that she wants to seek justice for the “right people” and that her focus would be on women:

In a world where females are not really cared for the way they should be, I wouldn’t just want to be an advocate for the men because I feel like in most situations where females are undermined, you should stand with a female. I stand in that in my own life.

Lores’s vision board is centered on female empowerment and acknowledge her Blackness and identity as a Black woman.

Figure 3

Lores's Vision Board



Sadie

Sadie is a 16-year-old White girl in tenth grade at a private therapeutic school. When I met Sadie, she had just participated in an open mic and was learning to play ukulele. She also mentioned losing a significant amount of weight recently and now enjoys fashion. Sadie loves Korean pop music and anime. Due to escalating behavioral issues at home, Sadie lives at residential program and visits her mom, dad, non-binary sibling, and their three cats on weekends. Sadie feels great comfort when spending time with her animals and wishes they could be part of her life full-time; she misses them deeply when she is away from home.

During the vision board construction, Sadie detailed the progress she has made over the past sixteen months. Sadie has attended many public and private schools and reported traumatic incidents in public school. Sadie is diagnosed with autism, generalized anxiety disorder, and bipolar disorder. She takes medication daily and receives clinical services at school and in her residential program.

Sadie decorated a white posterboard with stickers and one cut-out picture of a K-Pop singer (see Figure 4). Spending 75 minutes crafting her board, Sadie used pastel colors, rainbow patterned stickers, and many images of animals, positive expressions, and her pseudonym. There were many positive self-affirmations such as “feel your feelings,” “chase your dreams,” “beauty is where you find it,” and “be positive.” Cats were the most repeated image on the board showing up 17 times, followed by 9 hearts, and 7 images of things you can eat.

Figure 4

Sadie’s Vision Board



Carmen

Carmen is a 17-year-old, African American girl, who recently transferred from a charter school in Boston to a public high school in Boston. Carmen receives services for emotional impairment through her IEP. She lives with her mom, adult sister, and multiple pets. Carmen reported that she often feels lonely and interacts with the world “differently.” With a history of shutting down, Carmen says she is shy and learns differently from her peers. When she is feeling isolated, her pets help calm her. After quitting her job at a grocery store, Carmen spends most of her free time at home and recently took up nail art. She reported access to educational support, but she is not actively receiving any clinical therapeutic services and does not need them.

Carmen spent 90 minutes on her vision board (see Figure 5) and nearly filled the entire white posterboard with images. Animals and nature dominate the space, with a small section dedicated to her horoscope. An elephant takes up a third of the board which Carmen explained represents her future peace. A blue butterfly sticker floats above the elephant, and a cat and mouse vignette appears in the upper right. A turtle and beach scene with a plane flying overhead represent her love for the beach and her travel pursuits. She included a decorated Christmas tree and teabag as those are “nice” and soothing. In the lower right corner, wildflowers with a butterfly sticker note the imperative to “find a bit of a nature.” Carmen included two heart stickers, a few flower stickers, and the peace symbol. Carmen explained that her board reflects her hopes of being in nature and finding peace.

Figure 5

Carmen's Vision Board



Sabrina

Sabrina is a queer, 17-year-old biracial (Black and White) eleventh grade girl. She attends public school in Boston and is enrolled in an inclusion special education program for students with emotional impairment who internalize their feelings and behaviors. Sabrina eats lunch with her clinicians and maintains daily check-ins and weekly counseling with her school social worker per her IEP. Sabrina rescheduled her interview four times but reported being excited to talk about her experience in school and make art. Sabrina loves music and uses it as a form of expression whenever possible. Sabrina engaged easily in the interview without any hesitation and spoke about the intersectionality of disability, race, and gender. She lives at home

with her mom and their dog in Boston. Sabrina shared the important role pets have played in her life, her love of New England, her numerous artistic pursuits, and her movie preferences. She reflected on her growth over the past five years, expressing a sense of accomplishment. Sabrina attends outpatient weekly therapy to address her post traumatic stress disorder, anxiety, and depression; and she no longer takes medication to treat her mental illness.

Sabrina spent nearly two hours crafting her white vision board, leaving only a few areas blank. Her board is filled with many images from magazines, cut-out phrases, and a handful of stickers. She used a marker to create a rainbow pattern at the bottom. A large jellyfish appears in the upper left corner and a harbor scene with boats occupies the right corner. The phrases on her board consist of “go where your energy is reciprocated, celebrated, and appreciated,” “I plan to use an article,” “feel good,” “What consumes your mind controls our life,” “take responsibility and accountability for your actions,” “I am creative,” and “real self-care.” The following words were also included: *artistic*, *money*, *grateful*, *awesome*, and *honey*. She also included a cartoon image of Russian stacking dolls attached to one another by strings. A butterfly is partially hidden by the word *artistic*, and there are a few references to food (matcha, a Dutch oven, honey, tea, and a pretzel). Stickers of flowers, peace signs, and hearts were also used.

Sabrina reported that most of her collages are random, but the vision board is focused. When asked about her quotes, Sabrina explained that “go where your energy is reciprocated, celebrated, and appreciated” is inspired by her older sister’s cross-country move. Sabrina added images and words that represent her mental health and the cycle of depression and anxiety she battles. The phrase “what consumes your mind, controls your life” is relevant, as she reported being in a depressive state. Further, she gave the example of trying to clean up her room over the weekend, “It’s just one of those things; like messy bed, messy head.”

Sabrina used the images of boats as they represent living in in New England and being near the coast. She finds great comfort in being from the Northeast and expressed aspirations to own a boat one day. She explained that being poor and living in a low-income area is burdensome:

I think it takes a toll on you, especially mentally, because there was a time where I was really stressed about rent, and I was 12. It's just I think it's a great goal to have and not just to have money, but to have confidence with money.

Of the quote “use an article,” she explained that she dreams of writing “things that mean something to people ... I really enjoy writing, and I think it's something I'm meant to do ... Writing affects so many people and that really resonates with my energy.” Another goal for Sabrina is to “continue to add to my toolbelt,” in order to better manage her mental health and her life. Finally, Sabrina said that the stickers are “like dopamine in my mouth. I think they're cute. They bring my mood up a lot.”

Figure 6

Sabrina's Vision Board



Shay

Shay is a 13-year-old Black girl in seventh grade. She attends a Boston public school, has an IEP, and learns in an inclusion setting. Shay lives at home with her mom, younger sister, and twin infant brothers in the metropolitan Boston area. This is Shay's second year in public school, after she relocated from the south shore of Massachusetts in sixth grade. Shay loves volleyball, making TikTok videos, and being with her friends. She expressed caring deeply for her siblings and her mom. Shay reported that she consults with her mom about all her decisions and does not trust most schoolteachers or staff. Shay reported that therapy has helped her improve her hygiene

and ease her anxiety. Shay has an outpatient therapist and mentor to address her PTSD and anxiety and she seeks out support from her school guidance counselor as needed.

Shay spent 45 minutes creating her vision on white posterboard. She labeled it with pastel stickers and cut out floral images to create a border on the left side. She reported loving flowers because of their vivid colors, and explained that the images on the right side represent her desire to become a fashion designer. The top image is a woman walking on the beach with her eyes closed; the middle image is a woman wearing a colorful outfit, perched on a stool in front of a large wall menu; and the bottom image is a boutique clothing rack. Other images center around food and represent her aspiration to be a chef. She included three images consisting of doughnuts covered in chocolate sauce, a pasta dish, and a box of chicken nuggets. Shay also added two stickers with phrases “practice” and “you are amazing,” which she explained as, “you just have to have confidence in yourself.” She finished her board with hand-drawn spirals. A sticker of a blue airplane in the upper left corner represents the one time she flew. Shay was very concrete in creation and explanation of her future goals.

Figure 7

Shay's Vision Board



Overview of Participant Demographics

Table 1 provides a snapshot of participant characteristics. All participants were eligible for special education services due to an emotional impairment. Additionally, five participants were diagnosed with post-traumatic stress disorder and all seven reported anxieties. Two participants live in a two-parent household, while five live in a single-parent household. Five of seven participants reported that COVID negatively impacted their education, and five out of seven participants identified middle school as incredibly challenging. All participants described artistic pursuits and interests that positively impact their lives. Six participants spoke about animals and nature or included images of them on their vision board.

Table 1

Participants at a Glance

Pseudonym	Age	Race	Diagnoses	Strengths	Challenges
Nessa	14	Native American, Mohawk Tribe	Eating disorder, PTSD, Anxiety, Depression	Cheerleading friends, art classes, adoptive parents, Snapchat, recovery, aid at school, new school on the horizon	COVID, bullying, frequent school transitions in elementary school, foster care, peer pressure, untrustworthy staff at current school
Hannah	14	White	Anxiety, depression, trauma, PTSD, Chronic Physical disability	Friends, recovery, health, nature, writing, reading, hospital interventions	COVID, misunderstood in school, long and multiple hospitalizations, parents' separation, mother's mental health
Sadie	16	White	Autism, GAD, ADHD, bipolar	Progress in residential home, cats, supportive parents, losing weight, positive attitude, hopes to attend college, dreams of being a voice actor	Annoying peers, issues with peers, being the only girl in SPED classes, Sibling issues, romantic issues with boys, seeking out attention negatively, COVID challenges, school-based trauma
Lores	17	Black	EI, PTSD, ADHD	Alone time, music, poetry, coping skills, shopping, strong Black women	Impact of COVID, negative friend group, being the only girl in SPED classes in middle school
Carmen	17	Black	EI	Animals, the beach, travel, supportive women in family, nail art	COVID, challenges at former school, shyness, isolation
Sabrina	17	Bi-Racial; Black and White	EI, PTSD, anxiety	Friends, strong women in family, film, music, identity	Identity issues, challenges in middle school, social anxiety, pet death
Shay	13	Black	EI, PTSD, anxiety	Friends, sports, Mom, teachers	Distrusts people outside of the home, chronic anxiety

Findings

Interview questions focused on participant experiences in school. Questions centered on emotional impairment (EI) diagnoses, academics, relationships with school staff and peers, and

their dreams for the future. While findings from vision boards seemed to change each time I viewed them, I reduced my tendency to make meaning based on the first interpretation (Morrow, 2005; Levitt et al., 2017). This method helped me unfurl meaning and led to the development of themes and subthemes I explore in the following sections.

The following section explores the robust themes guided by ecological systems theory. This journey starts with an analysis of the individual level and subsequently moves through each layer of the ecological system. To begin, I hone in on the individual by focusing on identity which involves nature and animals, creativity, mental health, and trauma. Next, I offer a review of the microsystem and mesosystem, noting the interplay between the environments. This encompasses both the home environment and the school environments and delves into school transitions, challenges in school, challenges with peer relationships, healthy peer relationships, and positive relationships in school. Findings then shift to the exosystem and the effects of stigmatizing experiences and COVID. Finally, I explore themes related to future goals, personal growth, and reflection in relation to the chronosystem and the passage of time.

The Individual

Identity is central to this study as each participant drew on their own personal experiences. Self-awareness, gender, and the implications of special education status were investigated in relation to how they shape the identities of girls with ED.

Self-Awareness

In describing their experiences in school, participants disclosed varying degrees of self-awareness. Sabrina has used therapy for years to unpack meanings and gain tools, noting, “I’ve had therapy since I was like four. It was just like a thing in our family to do, it’s like ‘Hmm, we’re all a bit messed up, we should probably give our kids therapy.’” Sabrina described therapy

as “natural” and part of her weekly routine and could laugh at the idea that it is part of her family culture.

Self-awareness has helped participants to better understand their needs, especially in challenging times. Two girls professed their need to sometimes be alone, with Lores asserting:

I like to be alone. I’m very passionate about being alone, just being in my own space ... I appreciate humans as a thing, but I appreciate people who understand that I need to be alone because they need to be alone too.

She described alone time as supporting her ability to cope during stressful times and aiding her self-regulation. Like other participants, this skill developed as she matured.

The girls demonstrated self-awareness and an understanding of what their needs were in using psychiatric medication. Medication is currently used by three participants. All three take their medication consistently and reported zero issues with compliance. Medication was described as a “necessary” tool that sometimes needs to be “tweaked” to ensure that they have mental clarity and stability. Sabrina described that, while the taking medication was once necessary, it “became very exhausting to not feel like myself.” Sabrina noted her concern with taking medication at a young age amid rapid development and not understanding how it may impact her development. She described that at age 14, she had the realization that she “didn’t really need meds” and went off them knowing she could always begin taking them again. Ultimately, she trusted and relied on her self-awareness to terminate usage “cold turkey,” as she was stable. Sabrina remains open to using medication again if warranted.

Lores exhibited self-acceptance in how her education and life is unfolding. She acknowledged that she had to repeat a grade due mostly to intense behavioral issues when she was younger. However, with confidence, Lores noted, “I definitely appreciate things, and I

wouldn't change a thing." Lores is aware of what her needs are and is pacing herself. She was able to hold the tension of her unknown future because she has another year of high school to determine her next steps.

Hannah expressed that her mental health status does not define her:

I think there just needs to be realization that everyone goes through it time to time.

People have it worse, but that doesn't make me crazy because everyone is depressed time to time. No one's going to sit here and be like, 'There wasn't one day in my life where I was upset.' That's unrealistic and they'd be lying.

Moreover, she asserted, "people just need to realize that it's okay not to know. It's okay not to be okay." Hannah has complex challenges, and she can hold the tension. She exhibits self-awareness and acceptance.

Carmen stated that she was different, when asked further questions, she responded with "I don't know. I just don't interact with the world like everybody else, I guess." While it was hard for her to describe the specifics, she was clear on the feeling of being different. Her self-awareness enables her to be self-accepting, which can promote autonomy and influence life decisions. Despite being different, Carmen later disclosed that she is becoming independent and embracing adulthood which are markers of success for her.

Gender

Research indicates that girls with ED are outnumbered by male counterparts (OSEP, 2020). Sadie and Lores both shared experiences of being the only girl in their special education classroom in elementary school. Lores described in this setting that she "developed a dominance ... I always had to stick up for myself." This eventually led her to assaulting a male peer who provoked her "saying slick little things." In reflection, she believes she was impulsive in that

moment. Sadie had a similar experience and explained that in elementary and middle school that her male classmates “were really rude to me because they felt because I was a girl they could be mean to me and get away with it.”

Gender representation mattered deeply to Lores, who shared that she must “stand with the female more because I just feel like in my opinion, a lot of females aren’t represented.” This perspective may have been influenced by her early educational experiences when there was an absence of girls in her classroom setting, and she was left having to defend herself. Further, Lores said, “I’d feel intimidated if I was with all boys and there were just no girls. I’d feel some type of way.” She is determined to “stand” with women.

The intersectionality of gender and mental health was brought up by two participants. Both Hannah and Sabrina felt stereotyped because of their gender and mental health. Hannah remarked, “being a girl with mental health issues is hard because most people think, ‘Oh, well, every girl goes through that. It’s not a big deal.’” This trivialization upsets her. Sabrina further noted the gender stereotypes around emotion and mental health: “I think having emotions is okay though. It’s just that it’s so stigmatized for women to the point where having any slight negative emotion is like saying someone’s out of our control.” Sabrina is aware of the stereotypes and their broad influence. The intersection of gender and mental health are woven together and are complex as they are influenced and perpetuated by the dominant culture. Sabrina and Hannah work to embrace their feelings and normalize their experiences.

Implications of Special Education Status

Multiple participants linked their involvement with special education to their identity. For example, Lores described having an IEP as “just part of my daily life” and “I know how to utilize it, especially outside of school.” Lores was very comfortable with having an IEP and

stressed that is “normal” and has been “beneficial.” Similarly, Sabrina stated that special education is part of her identity, “it feels like at this point I can’t ignore it being part of my identity ... I’ve never been good at articulating what I need and then having this kind of support kind of gives me time.” Furthermore, Sabrina stressed that having an IEP did not mean she was given special treatment, but instead given the support she needs to be successful.

While six of seven participants were open about their IEP being part of their identity, Shay acknowledged that she needs to have an IEP and stated, “you shouldn’t down yourself because you need extra help,” but she keeps it private. Shay is the youngest of the participants (age 13) and her identity formation is burgeoning. Younger adolescents are susceptible to harsh feedback and criticism from their peers if they are different or perceived differently in any way. To avoid rejection, shame, or stigma, Shay purposely keeps this aspect of her identity private.

Sabrina and Carmen acknowledged that having an IEP did make them “different.” Sabrina elaborated that she had been referred to as “the special kid” in a patronizing tone. Research indicates that special education can be used to insult others (Ferri & Connor, 2010). Sabrina equates their taunting to their misunderstanding of what special education is. Further she posits that the dominate ableist ideology permeates her school.

Hannah reported opinions of special education students shifts as you mature. She noted that in elementary school, students would harass her for being in separate classrooms. She remarked, “that’s not an insult at all. We need this kind of stuff, but that doesn’t make us different or crazy.” Hannah spoke about the assumptions people make because she is in a special education program. She acknowledged that she has different needs, but noted that special education services do not actually make her feel different.

Nature and Animals

Multiple participants brought up nature and how they are soothed by being outside. Sabrina described the comfort she has going for a walk with her dog and taking in her neighborhood. Carmen reported that she loves to go to the beach and finds peace there. Hannah finds nature to be very soothing and helps ground her when she feels distressed because “just being outside ... It’s just a reminder that you’re alive, sort of. Just thinking about what is actually happening because sometimes I feel like things aren’t real and that it’s a cycle.”

Six of seven vision boards incorporated images or words centering nature and/or animals. Participants included oceans, forests, mountaintops, flowers, and beaches both in cartoon form and photographs. Nature and animals were reported as being healing, offering peace, and bridging connection to their inner selves. Despite participants never meeting each other, six vision boards included butterflies or wings, and three of them included these images in the top left corner. This image symbolized change, hope, and a forward-looking orientation. The one board that did not have this image did have the words “oh the places you’ll go” prominently displayed.

Nature and animals can be very comforting for people (Smith, 2012), and three quarters of North American children live with a pet (Hodgson et al., 2015). In this study, every participant either has pets, longs for a pet, reported their love for animals, talked about nature or used some depiction of them in their vision boards.

Carmen reported that playing with her pets helped ease her isolation and loneliness. They are her “emotional support” animals and they console her. Her vision board housed an elephant that took up a vast portion of her board and she explained that the elephant represents peace.

Additionally, other animals (cat, mouse, turtle) and flowers were represented. She described these images as “nice.”

Sadie spoke of her beloved cat Boba, who won pet parade awards and offered her solace when she was home. She reported Boba’s death was very hard, and she mourned him like a human. There were many cat stickers on her board and her pseudonym pays homage to her cat. Sabrina adored her cat Lily and spent a lot of time processing the death of Lily in therapy and speaking about that process during her interview. She was fraught with guilt thinking she may have done something wrong: “What possibly could have killed her?” she asked, “Was it something I did?” She reflected, “being in such shock, I just started to blame myself. It would just haunt me.” Sabrina said that her cat’s death was worse than losing her grandparents, as she was so connected to her pet and was calmed by her. Sabrina is older and now has a valued dog that she cherishes, explaining, “she supports my mental health by being so attentive; it makes me realize if I’m really worked up about something. Then I just talk with her. I think it clears my head so much. It’s very nice.” Lores was the only participant who did not include an animal on her vision board. Despite Lores having a “very big fear of dogs,” she reported that she wants a French bulldog.

Creativity

All participants agreed to create a vision board as part of the interview process. During the interview, each participant described creative pursuits they enjoy and dedicate time to. These were described as hobbies, passions, and self-regulation strategies. Creative outlets included makeup application and nail art, drawing, playing musical instruments, watching films, cooking, writing and poetry, listening to music, dance, and interior design. However, writing was the most common creative expression noted by participants. Lores reported, “I don’t really talk about

things, or even when I do have a problem, I don't talk about things. ... I feel like I use writing as a form of art." Hannah dabbles in painting and uses writing to track quotes, inspiration, and feelings regarding her mental health. She stated that her art process is erratic, where she goes "through phases where I can do it a lot, and then I don't."

All vision boards employed text from magazines and handwritten words. Some of the selected words were direct and to the point "feel your feelings" or "this is my vision board," while other words were open to interpretation and more ambiguous "use an article." Art and creative pursuits serve different purposes for participants. Sabrina uses art to reduce stress and connect more deeply with her thoughts. Her shelves are filled with crafts at home she has created. She loves studying music and rewatching old films for comfort and to find new hidden things she has missed.

Three participants spoke about the influence of music on their lives. Sadie is drawn to upbeat music and is working to learn to play the ukulele. She gave many details about musicians she loves and how they connect her to her peers. These connections help with socialization which is challenging for her. Lores reported that people are usually judged for the music they listen to, "especially if you are in a certain type of place." Lores further explained that because she is Black, people have preconceived notions of what she should listen to. Nevertheless, Lores challenges stereotypes and chooses music based on the artist. When people "push back" on her musical preferences, her rebuttal is simple, "you're missing out."

Mental Health and Trauma

All study participants reported ACEs in this study. Six reported that the mental health challenges they faced directly impacted their experience in school. Research indicates the impact of trauma varies from person to person (Winfrey & Perry, 2021). This study did not seek to

understand how trauma impacts school functioning, but rather the experience of girls with emotional impairment. However, each participant's traumatic experiences coupled with mental illness have impacted their school functioning.

Five of seven participants are diagnosed with post-traumatic stress disorder. Six participants are diagnosed with an anxiety disorder. Nessa reported she was diagnosed with post-traumatic stress disorder after severe and persistent school bullying which led to a "loss of pleasure and nightmares" that disrupts her sleep and functioning regularly. She also experienced being removed from her biological family, multiple foster home placements, and adoption which occurred during her early childhood. Hannah is diagnosed with post-traumatic stress disorder after experiencing physical assaults in school coupled with intense family instability. Sabrina is diagnosed with depression, dissociative anxiety, and post-traumatic stress disorder and detailed her ruminations and limitations rooted in her mental health. Shay and Lores are diagnosed with post-traumatic stress disorder, but did not elaborate on its origins. Trauma and its many iterations have impacted every participant in this study.

Sadie is not diagnosed with post-traumatic stress disorder but with anxiety and bipolar disorder. However, Sadie described a traumatic event of being locked in a school "safe room" for five hours that made her very upset and left her feeling unsafe. Shay spoke about suffering from anxiety which leads to uncontrollable crying and shaking. Shay has been in counseling for years to address anxiety, PTSD, and "other things" she chose not to disclose. Carmen reported the death of her father, pervasive loneliness, and feeling different but did not mention any formal mental health diagnosis.

When participants were asked directly if their mental health played a role in their education, six of seven participants confirmed it did. When asked to elaborate, three participants

spoke about being stigmatized and feeling othered by staff and peers. Nessa reported that when she began to experience severe and debilitating panic attacks in school, she would “run out of the classroom.” She was then punished for elopement rather than helped by school staff to understand and address her anxiety. When asked to describe her interactions regarding mental health in school, she struggled to express herself: “I can’t explain it. It’s just a lot.” She reported that stress in school (i.e., bullying, COVID, poor peer interactions, negative staff interaction) contributed to her diagnosis of PTSD and anxiety, and that she developed an eating disorder.

Hannah reported that peers “romanticize” inpatient hospitalization stays which she attributes to social media. She feels like people do not understand the fullness of mental health and that despite having a robust treatment team, it took a lot of time, hospitalizations, medications, and time away from her home to stabilize and be healthy. Furthermore, both Hannah and Sabrina have struggled with peers believing they receive “special treatment” via their IEP. Both girls reported that they are not interested in trying to explain their disability. Sabrina is appalled by how “ableist” her peers are and noted that it has changed how she interacts with them.

Interplay of Microsystems and Mesosystems

This section reviews the findings in the microsystem and how they interconnect with other systems creating the mesosystem. The microsystems do not function independently but in conjunction with the systems they come in direct contact with. This section will explore the

home environment, the school environment, school transitions, challenges in school, challenges with peer relationships, healthy peer relationships, and positive relationships in school.

The Home Environment

Transitions in the home were noted as challenges by numerous participants. This included moving, foster care placements, parent infidelity, divorce, parental and sibling mental health issues, a sibling's gender transition, physical fights with siblings, siblings and family members moving out of state, death of a family pet, and the complication and isolation of COVID. Many of these home-based challenges continue to impact each participant and their ability to focus on schoolwork and move towards their goals.

Sabrina struggled when her beloved sister moved across the country. When her sister moved out as she entered middle school, her major mental health issues intensified, and school avoidance began. In reflection Sabrina said, "at the time, I felt betrayed; now that I'm older, I can see, and I can realize that she was moving for own benefit." However, the move felt like a loss and Sabrina missed many days throughout middle school falling into a deep depression.

Sadie had a turbulent relationship with her non-binary sibling and disclosed that she worries about their mental health constantly. Further, past physical altercations have soured their relationship to the point that "they got scared of me. They are still upset, holding the grudge against me ... they told me they ... they'd rather me not be alive." Their dysfunctional relationship was part of the reason Sadie left home to live in a group home.

Keeping family secrets came up for two participants. Hannah was aware of her mother's affair and kept the secret for two years before disclosing it to her father, which resulted in an immediate separation. Hannah wrestles with guilt and wonders "if I didn't say anything, then maybe it would have had nothing to do with me." Hannah reports that the incident impacted her

mental health and changed her world. She is now not as close with her mom due to physical proximity which makes their relationship “difficult” because “she doesn’t hear everything” and does not fully understand the complexity of her life. Shay reported that in her home her mom can be very stressed out and that they agree to keep secrets as they do not trust outsiders. Shay reported that she has been taught when you disclose things, “they may betray you.”

Throughout the interviews, girls were encouraged to talk about their support system. For some girls, they acknowledged their families and caregivers as playing pivotal roles in their lives. Six of seven participants live at home with one to two caregivers and one participant lives in a group home. Despite not living in the home with her family, Sadie reported receiving a lot of family reassurance, and she acknowledged how lucky she was to have two parents. Three participants relied on support from older female siblings, aunties, or grandmothers who lived in the home or visited frequently. These women were described as understanding, kind, available, and relatable. Carmen reported that her grandma “always calls me and tells me about the different jobs I could get. We talk about driving because I’m scared to get my permit, and she always tells me not to limit myself.” Carmen reflected that she has put limits on herself but with family support, she is working to push past those limits. Shay aspires to be like her mom and much of her identity and interests are directly shaped by her mom. She also reported that her mother “can tell I’d be having anxiety sometimes” and is able to support her as needed.

Hannah acknowledged that her relationship with her dad is complicated, noting, “we fight a lot, but I tell my dad almost everything ... he’s the one I turn to out of both of my parents just because he’s closer, and he’ll know more of the information because I told him so.” The proximity to the parent in her home makes a difference for Hannah and allows them to connect consistently and honestly.

The School Environment

All participants spoke about the environment of their school and how it contributed to their learning. Every participant attended multiple schools over the course of their academic career ranging from kindergarten to eleventh grade. School environments included public schools, charter schools, substantially separate therapeutic programs within public schools, public therapeutic days schools, private therapeutic schools, and residential schools. Five participants recently settled into their new school, one was anxiously awaiting their next school placement, and one participant had been in the same school for six years. These numerous education moves threaten a student's academic achievement and impacts graduation rates (Wagner et al., 2005).

School Transitions

Lores reflected on the many transitions in her academic career. These coincided with natural shifts of moving from elementary to middle to high school but became more complicated when she moved placements because of her special education needs and progress. In middle school, Lores began "taking advantage of the therapeutic people," and the tools they offered which helped her to positively respond to redirections. This was a departure from aggressive and acting-out behaviors that plagued her in middle school. She reflects that she "grew up" and stopped "carrying on." Her improvements allowed for her to transition to a new school setting with less restrictions. Lores's next transition from a therapeutic day school to a public high school was much more challenging. She reported that while she was ready to transition to the least restrictive school setting that the new "environment definitely did have an impact on me, whether I realized it at the moment or not. It was a lot going on. Very chaotic, in a new crowd, not knowing how to place myself correctly." Lores elaborated that she was negatively influenced

by peers, she started new bad habits, and her grades dropped. This transition also coincided with COVID which will be addressed later in this chapter. Her most recent transition occurred because her family moved to a new town. She reported that the transition has been better than the last and that she has acclimated.

Nessa and Lores reported loving their elementary school teachers and had fond memories of that time. The transition to middle school was fraught with challenges including bullying and aggression for both. Hannah and Sabrina reported that the transition to middle school was difficult. Sabrina received specialized programming per her IEP in the sixth grade whereas Nessa reported that she would have benefitted from more support to address her mental health needs and emotional impairment during this time. More intensive specialized support was offered to Hannah in the ninth grade.

Carmen and Shay attended a few different schools, and both reported that their current school is a much better fit. However, Carmen did not experience a good fit until the tenth grade whereas Shay experienced this in the seventh grade.

Sadie has attended many schools including public schools, substantially separate therapeutic programs within public schools, public therapeutic days schools, private therapeutic schools, and currently attends a residential school. Sadie reported major problems in each setting, beginning in elementary school and continuing throughout middle school, that led her to new school placements until she reached a residential placement in high school. Sadie reports doing well in her current placement.

Satisfaction with school translated to stability and success. When the girls were in transition to a new school or working to qualify for special education, they struggled to be safe in

schools and make academic progress. While transitions may be inevitable, the process was detrimental to participants in this study.

Challenges in School

Negative relationships or interactions with school staff were a persistent issue voiced by participants. Some of the described incidents that left deep-rooted scars that manifested into mental health disorders including eating disorders, anxiety, and post-traumatic stress disorder. Other interactions were shaming and stigmatizing for participants and eroded connection and a sense of belonging.

Sadie had a particularly horrific experience of being locked in a “safe room” in fourth grade. She was left in the safe room until she was calm; she spent five long hours in isolation. This was a damaging incident that Sadie endured and one that she recalls vividly. This incident was the catalyst that led Sadie to a private therapeutic school. Unfortunately, she attended multiple private schools before she found a good fit.

Some participants described unhelpful school support. Hannah reported bullying to her school counselor who dismissed her concerns unless they were caught on camera. Consequently, Hannah feels like the identified support staff are untrustworthy and she avoids them. Nessa reported that her vice principal, school counselor, and a technology teacher all made her feel “bad.” Sadie described being disrespected, when staff do not call her by her preferred name despite several requests. She also described that the tone and volume of staff matter. Sabrina reported that negative staff interactions leave her “feeling drained and negative.”

Hannah longed for school to feel normal and to be fully accepted. She reported that “teachers give us too much; or they don’t push us at all; or they don’t put in any accommodations.” Nessa, Hannah, and Carmen reported barriers to support. Nessa reported that

the IEP process was “terribly slow” and that accommodations “never happened” even though “it’s part of my IEP.” Further, Carmen reported that her math teacher felt “some type of way” because she needed extra support to get caught up. She felt stigmatized because she needed the extra support and her teacher seemed irritated to provide it.

Furthermore, one participant felt like their school was not transparent with available resources, which prevented access to special education. Hannah reported feeling frustrated that she did not have access to special education in middle school when her mental health began to decline. She reported that qualifying for special education was an arduous process. Further, she was unaware that there were public specialized programs for emotional impairment and explained her shock, “what do you mean there are different programs? I didn’t know.” Hannah also has a physical disability, which impacts her mobility and ability to access the school building where her clinician works.

Challenges with Peer Relationships

All participants described challenges with peers. While peer conflict is normal, six of seven participants described incidents that impacted their functioning, safety, or esteem. Sabrina described that she was out of school a lot due to mental health issues and therefore missed connecting with peers in middle school. This loss translates into “weaker bonds” with classmates today. Nessa and Hannah both described poor peer relationships in middle school which led to acute loneliness, depression, maladaptive coping skills and hospitalizations. Sadie was physically isolated in elementary school and as she entered therapeutic day schools, she felt lonely as she was the only girl in her classes. While the IEP connects students with support and services, the process, and protocols of receiving the services do not appear to account for loneliness, isolation, extended time out of school, and developing positive peer relationships.

Missing a lot of school created gaps in Sabrina's social skills. She reported feeling haunted by past interactions that she misunderstood. She also spends an excessive amount of time and energy understanding social interactions with new and unfamiliar people. There have been times when she was convinced that "nobody likes me" and that she has made many assumptions that have negatively impacted her social life. These assumptions also kept her safe from actual rejection.

Being the only or one of a few girls in a special education classroom was universally described as being challenging for participants. Sadie focused on numerous negative peer interactions that were initiated by boys that she described as "bullying." Loes reported being "aggressive" with her male peers up until the sixth grade. At the same time, Saddle and Nessa both described negative interactions with female peers that were cruel and painful. These included being taunted for their skin color, clothing, general appearance, and hair. Nessa reported that she doesn't "really make friends anymore. I can't trust anyone in school anymore."

Healthy Peer Relationships

During adolescence, it is common for people to seek out the approval from their peers. Beyond approval, young people benefit from healthy and supportive friendships (Jordan, 2017). A key marker of emotional impairment is the challenge of forming healthy and appropriate relationships (IDEA, 2004, § 300.8.c.4). Still, participants did bring up the support they receive from their peers. While Nessa struggles with healthy relationships in school, she reported having friends outside of school on her cheer team and that they offer reassurance. Hannah reported connecting with a senior who is also in the same special education program, noting that it is "so nice just knowing someone who knows the school." This new peer connection facilitated her comfort in the school environment. Sabrina noted, "I've started hanging out with my friends a lot

more this year and always regretted not doing it more when I was younger.” As she has matured and engaged in therapy, Sabrina has gained more confidence hanging out with peers. These connections are of great value.

Positive Relationships in School

Shay, Sabrina, Lores, and Hannah described positive experiences with school personnel describing them as “kind” and being available to vent and process. Shay reported that her teacher/coach is an incredible support and “always inspires us to do our best.” Sabrina believes her mental health and education are equally supported by school staff. Time and time again, her teachers provided resources for career exploration and internships. She reported that she trusts her teachers and that “they genuinely want me to succeed.” The feeling that her staff want her to succeed is critical for Sabrina.

Hannah has access to a therapist at school per her IEP and reports a positive relationship. She described that her therapist is nice “she just listens. Sometimes I know I can tell her stuff without her making a bigger deal than it, because I feel like a lot of people, they try to fix the problems when you can’t; you just need to listen.” Sabrina described a similarly positive relationship with her in-school therapist:

No matter what, he’ll support me in something. If he’s concerned about something whether it be my grades or just like how it seems how I’m doing, he’ll like reach out and I can always have like a check-in. I can just pop in really quickly during a class and be like, ‘Hey, this thing is bothering me.’ Especially when I was younger in the school, I needed more check-ins outside of school and he was pretty much always there for that. I’d say that’s a really good relationship.

Despite experiencing school failure, Carmen reported that her teachers and support staff “did their best they could for me” and that “they really tried.” Carmen was unable to articulate ideas of how her previous school staff could have supported her academically but said she “was really close with them.” These relationships were the only positive attribute she could assign to her previous school. Nessa also stated that once she was assigned a paraprofessional to support her in the eighth grade that she instantly felt some relief because her paraprofessional “knows how to be loving.” The nurturance and care provided by this one person was monumental for Nessa.

Lores reported that “I’ve always had teachers where I can communicate or feel I can go be vulnerable with them or express myself.” Further, Lores described that her school counselor felt familial which made the connection easier and natural. When asked more about what made her familial, she shared she is a young, Black, woman. Research corroborates this point, documenting how representation of ethnic and racially-similar adults in children’s lives matters (Cholewa et al., 2014, Kieran & Anderson, 2018). Lores also expressed this in her vision board through using an image of a Black woman and referring to her as “iconic.”

Exosystem Explored

The exosystem is made of environmental elements that impact a child. In this section, the exosystem is incorporated into the analysis in relation to how it impacts a child’s microsystem and consequently their development. This study revealed that stigmatizing experiences related to dis/ability, and special education were experienced and that COVID has left an indelible mark on society.

Stigmatizing Experiences

Participants reported feeling stigmatization because of their mental health issues, status in special education, and being female. Carmen described feeling stigmatized “all the time” by her teachers stating that her math teacher “knew that I was different and that I couldn't do what everybody else could do.” She expounded “if he just talked to me and actually tried to guide me through it, I could actually get it. He was trying to switch my class and I just got there. That set me the wrong way.” Carmen’s interaction with her math teacher illustrates that his attempt to remove her from class felt like a rejection. Student removal from class can impact a student’s esteem and connection (Jordan, 2017). For Carmen, this interaction impacted her relationship and positioned her in a negative mindset despite others telling her his intentions were good. His actions and responses to her needs had a critical impact on her. Lastly, Carmen reported that having an IEP was “embarrassing,” and that she did not disclose this to others. She noted, “I didn’t want to risk it,” as she was concerned people would judge her.

Despite programming to support students with emotional impairment, special education stigma still occurs among school staff. Hannah reported that a teacher refused to let her sit down when he realized she was in the emotional impairment program: “He thought I should be with someone who can understand me. I was like, ‘I’m not crazy; I can sit in a classroom for half an hour ... you’re making that assumption, that I’m crazy.’” Hannah described being very embarrassed “because the kids didn’t even know who I was, so I’m like great, that’s a great first impression.” Being called out was humiliating for Hannah and made her feel defensive.

Lores reported that while she accepts her need for special education programming “it’s not a conversation starter” and that it is easier to “admit I had issues in kindergarten before I bring up the fact that I [still] have an IEP.” Lores felt more comfortable speaking about issues in latency and distanced herself from those issues as a young adult. Lores said when she was

younger, she never told people about IEP and thought of “SPED” as an insult that she would hurl at peers. Finally, Lores referred to special education as “different, not regular.”

Impact of COVID

The impacts of COVID have deeply effected students in numerous ways including increasing mental health challenges and creating a perceived lack of support from adults in school (Chu & Lake, 2021). In this study, each participant was asked about their experience with COVID and its impact on their life. Hannah shared when lockdown began and school closed, “it was a weird feeling. At first you were excited, but then you were really concerned. Then it actually sunk in, schools canceled. That hasn’t happened before.” For Hannah, the isolation significantly impaired her mental health and self-harming behaviors. COVID created chaos and uncertainty for many people and upended their sense of normalcy and routine unprecedentedly. The sudden shutdown of schools took away Hannah’s “safe space” and control and forced her into unknown terrain.

A few participants lamented that learning online was challenging. There were distractions at home, and they wanted to socialize with their family, they hated using Zoom and struggled to engage in any meaningful way, or they were consumed with online gaming and avoided online work. No participants reported school failure, but three reported rapid declines in mental health. Mental health declined for many young people during the pandemic due to social and physical isolation, health concerns, anxiety, loss of routines and prior mental health issues (Meherali et al., 2021). Two participants spoke of numerous hospitalizations that occurred during the pandemic due to the emotional pain of severe isolation. Both participants developed maladaptive coping skills (eating disorder and cutting) which continue to haunt them today. Learning from home “didn’t work out,” as Nessa noted, “It [was] also hard because not only did you not see

anyone, you didn't even talk anyone either." Further, Hannah attempted suicide many times with three attempts resulting in hospitalizations. Both Hannah and Nessa were already in a vulnerable space with their mental health and the sudden onset of COVID exacerbated their symptomology. Nessa reported that despite the pandemic being over, the persistent loneliness and anxiety has lingered.

For Lores, when the school shutdown occurred her problems "disappeared." Not going into school was perceived as positive as she was no longer tasked with schoolwork, an intense schedule, or her peers. She was unable to identify any issues resulting from the pandemic. However, when she was infected with COVID in the tenth grade and was forced to miss time from school, she felt intense disconnection as many things changed over her two-week absence. Lores attributes her current "bad habits" of poor attendance and tardiness to the last impacts of her COVID related absences. These bad habits continued to plague her as she navigated her new school.

Hannah spoke about the profound loss of her youth and how she missed middle school. During her eighth-grade graduation, her "principal made a speech about how we were the kids that spent our entire middle school years during COVID. We didn't have middle school. Everything was shut down before we had a chance to actually see it." COVID directly impacted the development of adolescents. Participants missed opportunities, rituals, celebrations, and practices that usher them through middle and high school.

Chronosystem

The chronosystem guides the exploration of future goals, material objects, career aspirations, state of being, and personal growth and reflection findings. This section explores the

aspirations of the participants and where they see their future selves while also reflecting on their own evolution.

Future Goals

All participants were given instructions to create a vision board and answered questions about their future goals. Some participants were very concrete listing their career aspirations and objects to acquire, while others explored feelings and emotional states they hope to achieve. As the girls looked ahead, an acknowledgement of change resounded. Five girls discussed the changes they were looking forward to in the next stage of their life (high school or post-secondary). Nessa was hopeful that leaving behind her middle school and beginning high school in a new school would be the fresh start she desperately needed. She exuded much hope and optimism. Hannah was just beginning to feel settled in her new high school. She was optimistic that the recent transfer mid-way through ninth grade would be the fresh start she needed. The three eldest participants brought up college prospects and expressed relief and gratitude for one more year of high school to prepare for their futures.

Material Objects

Two participants highlighted the importance of material objects. Loes said, "I don't want to do simple things in life. I want more out of life." Loes emphasized acquiring wealth and material objects through designer logos and a photo of Angela Bassett. In the interview, she spoke about the influence of iconic Black women like Michelle Obama and Angela Bassett. She reported that these women are incredibly influential in the Black community and guide her. Sabrina spoke about her desire to be a part of a yacht club and included a picture of a harbor filled with boats. Material objects represent security for her. Sabrina recalled times when her

family financially struggled and reported that she dreams of a different life where she does not have to worry about money.

Career Aspirations

Three participants had clear traditional career dreams. Loes described a future career as a lawyer representing women and not the “wrong people,” like sex offenders. Hannah shared that she also wanted to become a lawyer and help “people who are going through tough times. I want to help; I want to be there.” If being a lawyer does not come to fruition, Nessa loves “beautiful things” and reported interior design as a second career choice. Shay is also considering a career in interior design or becoming a chef. Sabrina envisions being an entrepreneur and proprietor of a tattoo business or a full-time writer while Sadie wants to explore voice acting.

State of Being

Three participants expressed that in their future, they will have more mental clarity, peace, and confidence. Two participants did not pinpoint a future career. Hannah reported that she does not anticipate being cured but rather being able to self-manage her illness. Carmen hopes for peace and self-confidence in her future life and used an image of an elephant to symbolize this aspiration. Nessa envisions her future being full of possibilities once she moves on to a new school.

Personal Growth and Reflection

In reflecting on the development of their lives, six participants noted significant changes in their behaviors, mindsets, and emotional health. Sabrina admitted “I haven’t taken a lot of responsibility in the past, especially, when I was younger.” Thus, she included the phrase “take responsibility and accountability for your actions” on her vision board. Five participants described early adolescence as fraught with challenges including significant change. Towards the

end of her interview, Carmen was focused on not letting her own self-doubt take over, and on being independent and taking care of herself. She reflected, “I’m getting older, and life is going to be hard, and I need to stop my old ways. Not everybody is always going to be there to hold my hands, so I have to hold my own hands sometimes.” Lores reported that she matured towards the end of middle school, as she wanted to get out of her therapeutic day school. She said, “I was on my A-game. I completely changed to a different person because I really did want to go to a regular high school with regular children.” Sadie described her newfound ability to simply ask for help, and how this has had a profound impact on her ability to function and interact with others constructively. Hannah reported that she does not believe she will ever be “healed” and for her it is learning to “manage” her mental health. She hopes that she will be well, but pointedly stated, “everybody has bad days.” Further, Sabrina acknowledged the complexity of her experiences “I have a lot of layers to my identity and how people see the different layers and depending on how long they've been in my life and how much I trust them and how much they really matter to me.”

Chapter Summary

Chapter Four presented the findings from the individual interviews and vision boards. Participant introductions were provided to give the reader a sense of individual participants, highlighting their self-described strengths and challenges. Next, a detailed summary was provided of categories, emerging themes, and subthemes within the context of girls with ED in special education. Ecological systems theory guided the presentation of themes beginning with the individual by focusing on identity, nature and animals, creativity, mental health, and trauma. Followed by a review of the microsystem and macrosystem home and school environments. The school environment contained various subthemes that were then explored in detail. The

exosystem recognized the intersectionality of gender, dis/ability, race, and stigma. and the effects of COVID. Finally, their personal growth and reflection were explored in relation to the chronosystem and the passage of time. These findings provide detailed experiences of voices that are missing from the current body of research.

In the next chapter, I offer an analysis of key findings presented alongside current research. The chapter offers implications for theory and recommendations for practice, and acknowledges study limitations. A final reflection and conclusion is also provided.

CHAPTER 5: DISCUSSION

Based on participant data, I explore three overarching themes of connection, control, and disconnection. *Connection* encompasses meaningful relationships with people, nature, animals, and school staff attunement to mental health and trauma. *Control* focuses on how participants garnered control, aspects of mental and physical control, and how creative pursuits fostered control. *Disconnection* centers relationships and the impact of negative school experiences.

Connection

The literature suggests that the most common description of belonging within an educational setting is the student's feeling of being accepted, respected, and valued (Goodenow & Grady, 1993). Being in school provides students with consistency which can support belonging (Allen et al., 2021; Gray et al., 2018; Walton & Cohen, 2007). A desire to connect was apparent in participant interviews, as they pointed to the importance of receiving support from peers, family members, school counselors, teachers, and pets. Participants also connected with different aspects of their identity, including race, ethnicity, special education status, creative talents, and gender. Connection with nature, animals, and creative pursuits were also discussed.

Connection with school and people at school were important to five participants. For example, Hannah described school as her "safe place," despite her many struggles with classroom content. When school went remote during the COVID-19 pandemic, Hannah's emotional and mental health diminished gravely; she became isolated, suicidal, and was hospitalized multiple times. In her current school, Hannah is making new peer connections and has a supportive school-based clinician. She reports having hope and having gained skills to keep her safe, even when bad days are inevitable.

Other participants described connections with school faculty as supportive and reassuring. Nessa trusts her paraprofessional aide in school to provide support with problems and said, “I just love her so much.” Similarly, Carmen noted that “the teachers are very easy to talk to.” She also noted a strong bond with the school itself, as both her grandmother and father graduated from the school she attends. As Carmen explained, “my dad died before I got to ever meet him ... It feels like a close family connection there.”

Shay reported strong connections to the new school to which she transferred mid-way through the sixth grade, noting, “there’s a lot of kind people, and people that act just like me.” Shay attended class in an inclusion setting which fostered connection and belonging. Further, she felt like her peers were just like her, as they had the same interests and mirrored her “personality.” Similarly, Lores stated, “I feel like school is definitely a place where I belong.” However, Lores also articulated a sense of deep inner-connection and peace when she is alone. She is conscious of her inner-world and expressed contentment with herself and that she experiences connection within.

Meaningful Relationships with People, Nature, and Animals

Mirroring findings from studies conducted by Srsic and Hess Rice in (2012) and Whitlow et al. (2018), healthy relationships were critical to participant survival. Participants identified diverse faculty as key resources in their schools and reinforced that girls with ED crave connection and benefit from social-skill support. Participants reported that they felt loved and nurtured by adults who made themselves available consistently and authentically, including paraprofessionals, counselors, clinicians, teachers, and coaches. These staff also encouraged participants to explore their futures and develop dreams and aspirations. French (2019) affirms “a staff member’s interpersonal presentation may be the lynchpin to the entire process of

effecting meaningful change for students with emotional behavioral disturbance” (p. 372).

Participants also described healthy friendships that blossomed when they became stable and emotionally available for connection. The development of healthy relationships made the school environment more comfortable and safer, which led to deeper connections and space for students to accept and use critical feedback to learn (Brown & Campione, 1998; Caprara et al., 2000; Cohen & Steele, 2002; Walton & Cohen, 2007). Staff who avail themselves to students create connection and safety, which supports academic success and regulation needed to attend to school (Jordan & Hartling, 2002).

Meaningful relationships and closeness to nature and animals were identified as bridge towards connection for participants. In particular, the importance of animals was an unexpected finding in both interviews and vision boards. Scholarly literature supports this, with Bradshaw (2017) theorizing that animal companions support personal interactions, enhance social networks, and provide a connection to the natural world especially for city dwellers. All but one participant had a pet. Participants took great comfort in their animals, which symbolized peace, connection, and freedom on their vision boards. The animals were vital companions for three girls, who repeatedly struggled to engage socially with peers and school staff. Similarly, Nimer and Lundahl (2007) revealed that animals can support students in educational settings by decreasing the negative impact of learning disabilities, psychiatric disorders, and managing the impact of trauma. Participants in the present study reported that when they were unable to establish healthy peer connections, pets eased their social anxiety and loneliness.

Participants described nature as helping “break the cycle” of the daily grind, offering the chance to feel part of a bigger world outside of school. Kellert and Wilson’s (1995) biophilia hypothesis posits that humans are instinctively drawn to connect with nature. Kahn and Kellert

(2002) further argue that nature and green spaces provide children with opportunities for discovery, creativity, risk taking, mastery, and control, which positively influence different aspects of brain development. Nature also impacts health, as Jimenez et al. (2021) found “evidence for associations between exposure to nature and improved cognitive function, brain activity, blood pressure, mental health, physical activity, and sleep” (p. 13). In this study, three participants were focused on cycles found in nature (i.e., the moon cycle, seasonal cycles, and menstrual cycles). Acknowledging the cycles anchored participants in knowing that life is not stagnant, which gave them hope. Notably, five participants attend schools in congested cities without consistent access to nature, even as it is a source of renewal and peace for them. Thus, accessibility, exposure, and engagement with nature are explored as implications for practice later in this chapter.

School Staff Attunement to Student Mental Health and Trauma

The present study highlighted the positive impact of school staff who are attuned to student mental health and trauma. A turning point for each participant occurred when they connected with an adult they could trust at school. This connection occurred in middle school or high school with various people (i.e., clinicians, teachers, paraprofessionals, and coaches). Participants described feeling “seen” and accepted for who they were — even though school was hard, and academics were not always their focus. Once feeling seen and understood, they were better positioned to respond to and seek support. They no longer masked their identity or apologized for shortcomings in school. These trusted adults understood that it was critical to listen and understand their complex histories.

Berriman and Thomson (2016) explain that “young people are driven by a dual emotional imperative: seeking to navigate between the potential emotional pleasures derived through praise

and recognition, whilst simultaneously attempting to avoid the anxiety and distress of being exposed to criticism” (p. 13). According to participants, the adults rejected negative assumptions and took time to get to know them and understood that “internalizing conditions impact students’ cognition, academic performance, and social emotional functioning” (Firestone & Cruz, 2022, p. 246). These connections were healing and paved the road for these students to move forward educationally. For some participants, these connections also facilitated mental health interventions that aided in their stability and recovery. Based on these findings, relational attunement should be at the fore of educational practices and priorities for students with ED as participants’ stories underscore the value in doing so.

Control

Schall et al. (2014) asserted that a person’s locus of control can influence personal agency and behavioral action and that one’s internal locus on control is connected “to more adaptive characteristics and performance that shape social and academic outcomes” (p. 464). Indeed, Openaker (2022) later noted that when people self-regulate and manage their emotions, they “are better able to act in accordance with their values, manage stress, deal with conflict, persist in difficult times, see the good in others, and achieve their goals” (p. 2). Students with ED often have difficulty regulating their emotions (IDEA, 2004, § 300.8.c.4). While many participants reflected on the theme of control and the tension of wanting to be in control, six participants explicitly spoke about their desire for control, and the challenges they experienced in trying to gain it.

Garnering Control

Carmen reported a pattern of shutting down rather than asking for support in class. She reported constantly feeling “under pressure” and barely passing. She described a time in which,

during an emotional outburst, Carmen told her mom, “I just can’t go back” to school. With her mother’s support, she “quit” her charter school and transferred to a nearby public high school. She reports rather than shutting down, she now seeks help and support from faculty she trusts. Additionally, the connections she fostered with teachers provides her with a sense of comfort, and she is able to engage in the work more successfully. Once Carmen experienced greater control, she used her agency to make changes in her academic setting.

Another form of control was silence. When Nessa experienced negative school staff interactions, she chose to act as if “didn’t feel like it,” rather than explain her needs. In being silent, she exerted control over the situation. When speaking about her vision board, Nessa reported she has “the power to create my own life.” This optimism was also evident when Nessa spoke about attending a new school next year. She believes the school will offer opportunities and a fresh start that will help her enjoy school. This sentiment was mirrored on her vision board, as she left a large blank space to fill as she chooses.

Four participants stressed the need for space in a controlled environment. For example, Lores reported gaining more coping skills and tools to regulate her emotions. To regain control, she takes space to process and “be left alone until I can be myself again.” This can be challenging in school, as some interpret this behavior as simply skipping classes when she needs time to process, access her coping skills, and regulate. Lores maintains control by being deliberate in her day-to-day life, noting, “I have very set things that I do, and it’s not much.” When in control, Lores sets limits and gives herself boundaries that help her feel safe. Hannah also stated she becomes anxious without breaks from classwork, which can lead to outbursts. In one incident, the lack of physical control led to a long physical restraint in school and subsequent inpatient hospitalization. This episode activated a new special education intervention as hers was

amended, and a more comprehensive IEP was created. Hannah's lack of control eventually led to more interventions which activated greater support.

By contrast, Sadie reported that she would manipulate others to purposely get attention. Sadie intentionally made false suicidal and homicidal statements, and made-up scenarios about people dying "because I wanted people to feel sorry for me." Sadie attempted to control how other people interacted with her by creating false stories. In this example, Sadie relied on maladaptive skills like manipulation to control how others viewed her.

Mental and Physical Control

Three participants reported feeling out of control due to their mental health issues. Of her poor attendance in middle school, Sabrina noted: "I physically could not get up ... it was debilitating." She was later hospitalized for behavioral health issues she described as "out of my hands." Her school refusal may present as a willful choice, but due to her EI diagnosis, Sabrina had a limited number of adaptive coping skills to regulate her feelings and attend school. Behavior is often thought of as a choice yet students' trauma-related needs can be mistreated as attentional or behavioral issues in the school setting. This misconception is often attributed to educational practitioners' lack of awareness (Firestone & Cruz, 2022; Perry & Szalavitz, 2007). Further, Carmen included the phrase "what consumes your mind controls our life" on her vision board, which is interpreted as the impact of her mental health.

Hannah likewise discussed being hospitalized and offered, "when we make the decision [to be hospitalized], sometimes we don't have a choice ... I lose everything." There is lot of tension as she relinquishes her control. Without professional help, Hannah's life is on the line, as she has attempted suicide multiple times. Yet, when she seeks out hospital-level care, Hannah forfeits control of many aspects of her life (including access to her phone, her schedule, and

decisions regarding her length of stay). During the interview, she wanted to offer others hope and encouragement who are battling their mental illness. However, in sharing her experiences, she was met with hostility and stated, “this isn't the way the world should be. I know it is what it is, but that’s not how it should be.” Hannah demonstrated her desire to be known and to share her story and is frustrated by how she is perceived. We see this also in her vision board (Figure 3) in that she references her own healing and recovery and states “everybody has a story.” Hannah wants to be known as someone with experience and wisdom in managing mental illness and instead was dismissed. The desire to have control shows up in real life and in online platforms.

Sabrina spoke at length about her identity as a woman and not having control. Specifically, she expressed frustration with her monthly menstrual cycle and how the cycle constantly reminded her that she does not have control. To validate her experience as a female, she has sought female doctors and therapists. Only Sabrina brought up the impact of menstruation, but the theme correlates with autonomy and bodily control.

Creative Pursuits Foster Control

Creative activities were reported by every participant and were described separately as “coping skills,” “healthy strategies,” “learned skills,” “hobbies,” and “ways to relax.” Creative pursuits were an avenue for participants to feel in control and helped them regulate their feelings and adapt as needed. Participants identified writing, playing music, cooking, painting, crafting, nail art, interior design, pottery, make-up, and dance as activities that fostered stability and led to emotional regulation.

As Noble (2023) noted, “imagination operates as a gateway between [the] conscious and unconscious mind, allowing what’s otherwise inaccessible ... to merge, to be engaged with and expressed” (p. 30). Creative pursuits were generative for participants, who had tangible

artifacts to explore, reflect, and build upon. When shared, such artworks present opportunities to exchange ideas, forge connections, and build intimacy. Vision boards revealed desires for peace, harmony, recovery, complexity, and wealth. Six vision boards referenced movement through images of wings or the phrase “oh, the places you’ll go.” Notably, three vision boards had a butterfly in the upper left corner, as participants hoped for growth and movement in their lives.

Participants were not always able to access these activities in school but sought them out in their free time. Such pursuits can be done in solitude, which can strengthen internal connections and make them more available to connect with others (Murthy, 2021). The vision boards were a bridge for connecting to and explaining themselves, and a positive exploration of their possible futures. In sharing their vision board, each participant was able to be seen, recognized, and witnessed.

Each participant identified goals and desires for their future lives. This was clearly articulated in the interviews and crafted on their vision boards. Snyder et al. (2000) identified three interrelated factors for hope: goals, agency, and pathways. Each board clearly represented participant hopes and dreams for the future. The wings on the vision boards symbolized their own agency to take flight and forge their path. Images of animals and nature suggested that nature is connected to hope. Based on the culminative findings of this study, when girls with ED were seen and accepted by staff, and felt understood and cared for, they could tap into their creativity and were able to imagine life beyond their present circumstances. Their hope was palpable.

Disconnection

Six participants brought up disconnection and how it impacted their lives. Carmen grappled with self-doubt and reported that she was entrenched in a pattern of belief that she was

not good enough or smart enough to make academic gains. The fear greatly impacted her relationships, as she felt like a “burden on some people” and that she was “different.” Her internalized fear can be tracked throughout her middle and high school years, and she reported that it only lifted recently. Sabrina’s fear was triggered by her many absences in middle school which “alienated” her from schoolwork and peers. Sabrina explained, “I would just convince myself that these people don’t want to hang out with me ... I was scared of people.” On her vision board (Figure 7), a single jellyfish floats above the rest of images. The image evokes loneliness and isolation, as while jellyfish may be found in schools, they are often considered loners (Morsing, 2017). Hannah, Nessa, Carmen, and Loes all echoed the feeling of being lonely or socially disconnected. Similarly, Sadie expressed loneliness in a classroom full of boys. She ruminated on uncertainty about her future due to past behavioral incidents that occurred years ago. Sadie noted, “I was bad ... I had no control ... I want to go to college, but I missed all the fourth grade.” Sadie is internalizing her early academic issues as failures that limit her future academic prospects. This is characterized as “reactive adaptations” and they are beginning to be internalized as her emergent identity (Velez & Beale Spencer, 2022, p. 80). Despite all her growth, Sadie is disconnected from her progress and continues to worry that her failed fourth grade will impact her prospects for college. Furthermore, in her vision board she expresses an abundance of gratitude but did not list any or depict future career aspirations.

Sabrina evoked fear in relation to images she selected for her vision board. She remarked “it’s really funny how things manifest. Fears have manifested into things that I really like to put in my art.” The stacking dolls in her collage embody her anxiety around her layered identity and how she may hide or mask her true feelings or self to the world. These disconnections erode their connections and influence the desire to control situations.

The Impact of Negative School Experiences

While individual experiences varied, the impact of negative school experiences was common among participants. They described their middle school years as “challenging,” “lonely,” and “painful,” as they dealt with bullying, mental health crises, family turmoil, death, and the yearslong COVID-19 pandemic. Two participants reported that their behaviors were “out of control” in elementary school, which led to placement in separate, therapeutic special-education programs for ED. While both girls felt they needed such an intervention, they reported that the path to support had a negative effect on their esteem and self-image. In the process of receiving support, one student reported a horrific 5-hour long intervention where she was placed in a room alone. Research indicates that solitary confinement can have long-term psychological repercussions (Kazemian & Walker, 2018). Similarly, Conley et al. (2007) confirm that students in special education for emotional disturbance have lower self-esteem than their peers in inclusion classrooms. Further, two participants reported stress around being the only girl in their therapeutic program. Data suggests that gendered expectations shape girls’ lives, exerting pressure beginning in early adolescence (Mmari et al., 2017). Specifically, participants felt isolated, lonely, and disconnected.

Five participants also identified negative experiences with school personnel. They resisted further engagement with staff, as a means of protection from judgment, bias, or criticism. Furthermore, having special education services sets students apart as stigma and ableism were referenced by multiple participants and is evident in the research (Ferri & Connor, 2010; Whitlow et al., 2018). Ableist attitudes promote prejudice and discrimination stemming from the belief that able bodies are superior (Dunn, 2021). This ideology “can significantly

impact students' self-perceptions as well as their overall academic achievement" (Tejpar & Butler, 2023, p. 151).

Two participants were very clear about consciously resisting interaction with their teachers, which gave them a sense of agency, but also contributed to feelings of isolation. Loneliness was common among participants, as children "need strong relationships in order to feel a secure sense of belonging" (Murthy, 2021, p. 24). Participants reflected that negative school experiences directly impacted their connection and sense of belonging, mental health, social skill development, school attendance, and conduct reports; and it further impeded their focus and desire for learning. Such experiences fostered disconnection, fear, and frustration in the educational system, and contributed to a sense of personal hopelessness.

Implications for Theory

Findings from the present research suggest meaningful implications for several theoretical perspectives, including ecological systems theory, DisCrit, stigma theory, trauma theory, and cultural-relational theory.

Ecological Systems Theory (EST)

EST aided in my understanding in how each participant experienced school and their relationships with faculty, staff, and peers. In this study participants primarily reflected on their immediate relationships rather than the influence of the macrosystem or exploration of the chronosystem. By design, schools have the infrastructure to support children in navigating their academic, social, and emotional needs (Sanchez et al., 2018). Every participant made note of the people in their immediate microsystem (i.e., peers, school faculty, and peers). Further, school itself was described as "safe" and "part of my routine." Four participants mentioned the importance of their outpatient mental health providers, with two participants noting that their

outpatient therapy positively affected their ability to succeed in the school environment. This layer of support represents the mesosystem within the context of the EST.

However, it is unclear if the participant microsystems and mesosystems interacted to provide the best treatment to the girls in this study. Collaboration is a critical step to ensure that girls with ED are receiving wraparound mental health support (Lee & Jonson-Reid, 2009). It deeply benefits girls with ED to have these various systems communicate and collaborate to create the best outcomes.

The structure of schools shifted dramatically in March 2020 due to U.S. COVID-19 safety measures. Six of seven study participants admitted to suffering during this uncertain time because the immediate shutdown coupled with the prolonged school closures was destabilizing. When a community (school) collapses, the implications can be dire. Two participants were hospitalized multiple times because of repeated and severe self-harm and suicidal behaviors. They reported that the isolation and loneliness caused by COVID led to unbearable suffering. Indeed, researchers and neuroscientists believe that “loneliness is an aversive state that motivates us to take action that minimizes damages to one’s social body” (Cacioppo et al., 2014, p. 7). However, girls with ED are not always equipped with the social skills to “take action,” and their loneliness was compounded as by forced isolation. In this sample, the systems to support children and the structure of EST were not enough to ensure participants' wellbeing during adverse experiences.

Barriers to accessing special education is also a concern within the ecology of schools. Two participants noted that they had no idea that special education programs existed to serve students with emotional disturbances; and that it took time to be assessed and gain access to much-needed interventions and support. To be effective, systems of support should be working

in tandem, yet the present study provides evidence of disconnection which exacerbates problems and access to vital support.

Through the lens of EST, we consider how schools evolve, how they are influenced, and by whom. The landscape of education has slowly changed and can be viewed as homogenizing agents. Ohito and Oyler (2022) posit that “schooling continues to be oriented toward obedience and compliance with the teacher and the text as authorities. Children and youth learn that (sanctioned) knowledge comes from either the teacher or the text, and never beyond or despite these bodies” (p. 184). Such learning is prescriptive and does not account for the diversity of the learner, cultural context, and marginalized or intersecting identities. Finally, given the rise of artificial intelligence, climate change, political unrest, the influence of social media, and call to action for social justice, we must study how the educational exosystem is impacted by these factors and how in turn they affect girls in special education with ED. EST has educational implications at every level and should be studied as schools consider and implement interventions to support girls with ED.

Cultural-Relational Theory (CRT)

CRT was relevant to this study, as participants emphasized positive experiences with school faculty which created pathways to academic success and emotional grounding in the school environment. In this study, all seven participants reflected on positive and empowering experiences with school staff. Students specifically referred to school faculty as “loving,” “caring,” and “always believing” in participants. In turn, their commitment enabled participants to persevere in school, despite long odds. bell hooks reminded us that “when we choose to love, we choose to move against fear, against alienation and separation. The choice to love is a choice to connect, to find ourselves in the other” (hooks, 2000, p. 125). These connections were

particularly powerful after girls experienced hostility, rejection, or felt stigmatized by school staff. These relationships were emotionally corrective and were imperative for the participants to feel autonomous and capable of managing the demands of school. When school staff, across content and departments, connect with students and their unique experiences, identities, and cultural influences, the students benefit demonstrably.

Trauma Theory

Six of seven participants reported a trauma history and all experienced adverse childhood experiences. Despite trauma not being a qualifying factor for girls being diagnosed with ED, all participants were managing the impact of a traumatic event, childhood trauma, post-traumatic event, or ongoing and complex trauma. Trauma can directly impact a person's esteem, attachment, readiness for learning, attention, relationships, and bodily functions. When any of these are out of alignment people can become dysregulated and struggle to maintain in the classroom. Rather than approaching children from a deficit model, trauma theory informs clinicians, educators, and faculty to step behind the behavior and understand what is happening and how to help children regulate. Integrating trauma theory into special education practices will support the education of girls with ED.

Stigma Theory

Stigma theory highlighted the power dynamics between participants and specifically teachers or faculty who did not understand their special education and mental health needs. Nessa, Hannah, Sabrina, Sadie, and Carmen all described incidents where an educator minimized the severity of their mental health needs, dismissed their special education accommodations, or attempted to exclude them from general education. Upon examination, participants were disempowered, misunderstood, under-supported, and stigmatized by staff assigned to provide

direct support. These interactions reinforced hegemonic norms that are divisive and exclusive. When students do not feel supported in school, they begin to disengage and disappear. Stigma based on one's special education status hinders progress in school—a situation that is even more problematic for girls (Ferri & Connor, 2010; Whitlow et al., 2018).

Two participants homed in on the challenging elementary school years. In reflection, one participant distanced herself from her younger self, by reporting she is now “unrecognizable.” She became visibly uncomfortable in the interview and seemed embarrassed when speaking about her behavior in elementary school and how she acted out. Another participant, Sadie, continued to worry about failing the fourth grade and how it will impact her college prospects and future goals. Despite all her growth, Sadie is still deeply ashamed of a grade-school failure.

Further, three participants were not identified and given an IEP to address an emotional disturbance until they were in eighth, ninth, or tenth grade. This delayed identification for services was impactful, as the window for support drastically narrows over time. It is critical that we understand the patterns, reasoning, and potential bias for delayed identification and services for ED. Without immediate interventions, students suffer, and their academic achievement is compromised (Darney et al., 2013).

Dis/ability Critical Race Theory

DisCrit is important to this study because participants spoke explicitly about navigating dis/ability, ablism, and classism. This was most noticeable when participants explained that they wished to be seen as “normal” by attending “big classes” in “regular schools” with “regular kids.” Further, to avoid shame and stigma, three Black participants hid their special education diagnoses from their peers. One participant reflected that because of her class and race, she would not fit in at an Ivy League school. DisCrit undergirds these experiences and the

internalized self-stigma and public stigma woven into their conscious and unconscious thoughts and beliefs about themselves. The theory showcases how the intersections of disability and race impact their access to special education, their experience in special education, and how special education impacts their future.

Additionally, participants called out their peers for upholding ableist values and beliefs. Other students often do not understand special education, IEP accommodations, and the negative impact of “othering” or excluding peers. Four participants experienced staff with ableist attitudes who shamed them for being in their inclusion classroom. Hannah stated, “where else am I supposed to go? I am on the roster.” Special education was created to provide opportunities for all students to learn, yet special education can exclude and pigeonhole already marginalized populations. Further, because girls with ED are often learning in inclusion environments, their staff may not be aware of the dominant hegemonic views they have unconsciously internalized, and how they may be causing harm to students.

Recommendations for Practice and Programming

The present study is one of few that centers the voices and experiences of girls with ED. My findings may be used to improve educational practices and promote academic engagement and success among girls with ED. The following recommendations grow out of findings from the present research.

Defining and Diagnosing Emotional Disturbance

The definition of ED needs to be rewritten to more accurately reflect the students given this special education diagnosis. Specifically, the definition needs to consider how trauma impacts a child’s brain development, processing, and general functioning. While school staff may learn about a student’s trauma history, they are not necessarily equipped to address

symptoms of trauma in the classrooms and schools. The exclusion of trauma from the ED definition implies that trauma does not impact a child's development and academics, which does not align with the data collected in this study.

A new definition should also consider updated criteria for ED. The criteria should be used universally in schools across United States to ensure that children who move districts or across state lines can maintain diagnoses and IEPs, and access services consistently and quickly at their new school. This change will support generating a sense of connection for students who transition districts that this study's participants highlighted as highly important, and also increase stakeholder accountability. Additionally, the process for determining eligibility of ED should be streamlined across states and diagnostic tools should be culturally responsive. Finally, teacher rating scales should account for potential bias.

Given the individual and collective trauma that students and school communities navigate, schools and districts should consider adopting a healing centered engagement (HCE) framework. Ginwright (2018) created strengths-based HCE to be "holistic involving culture, spirituality, civic action and collective healing" (p. xx). Ginwright's (2018) model focuses on individual, interpersonal, and institutional levels. In this approach, both PTSD and persistent traumatic stress environment (PTSE) are acknowledged, and Ginwright (2018) emphasizes that trauma exists in the environment, not in the individual.

Aligning institutions to work together to address and implement systemic change is necessary within school districts. Schools must consider the entire ecosystem and determine how policies, values, and practices may cause harm on individual, interpersonal, and institutional levels in special education. My findings align with the five healing centered principles that Ginwright (2018) outlines: culture, agency, relationships, meaning, and aspirations (CARMA).

Professional Development and Training

Educational staff need to be given the time to learn about the specific tools, strategies, and procedures that are most effective in working with children and adolescents with ED. Teachers develop their pedagogy and are held accountable to deliver core curriculum standards and meet annual benchmarks. However, some faculty lack the skills and knowledge to manage complex emotional and behavioral challenges that present among students in their classrooms and schools. If teachers are not taught practices to work with all students, the community suffers. Administration and school systems must recognize and believe in the value of training for teachers, paraprofessionals, deans, and clinicians.

Based on the present research, I recommend professional development that includes a framework that centers trauma-informed care and healing-centered engagement; psychological first aid training; an understanding of emotional intelligence; an integration of transformative social emotional learning; mindfulness training; de-escalation and safety-care training; and multi-tiered systems of support that address assorted needs of children with ED. These tools must be culturally responsive to ensure students feel like they belong and to combat stigma, discrimination, and disconnection. Trainings must be offered annually and include updated best practices that reflect current data and literature. Practices must be continuously evaluated for effectiveness. Further, because girls reported that both peers and faculty were biased and cast judgment on students who learned differently and present with ED, curriculum needs to be deconstructed and re-constructed to reflect the culture of students more accurately with emphasis on disability and how we understand it.

Girls with ED present differently than boys. Programs and staff need to shift their approach and tailor their interventions. A one-sized intervention does not fit all. In addition,

participants explicitly stated that being the only girl in the classroom was detrimental to their esteem and educational experience. When girls are placed in programs or classrooms, the administration must consider group dynamics with attention to gender.

Humane Education through Animals, Nature, and Creativity

Humane education programs are holistic and committed to promoting humane attitudes towards people, animals, and the environment. They provide “a comprehensive framework to assess the interconnected forms of social justice and oppressive systems and can instigate a move away from the dominant, sometimes hidden, beliefs of society” (Saari, 2018, p. 3). Future curriculum for girls with ED could explore the integration of animals within public schools. Further, humane education develops empathy, so children are able “to embrace what was previously categorised as other” (Jalongo, 2014, p. xvi). Humane education “aims to nurture reverence, respect, and responsibility to encourage positive action and choices that benefit nonhuman animals, the earth, and other humans” (Saari, 2018, p. 8). Incorporating humane education programs for students with ED could be further explored as a practice intervention.

Likewise, study findings suggested that participants in this study experienced a positive animals and nature. Schools could create or adopt targeted educational opportunities for girls with ED to be in nature. There is a plethora of adventure therapy programs and other outdoor-based interventions that indicate nature’s positive impact on students who are “significantly at risk for poor educational and developmental outcomes” (Flom et al., 2011, p. 122).

Integrating creativity and art into core class curriculum or through arts-based electives might provide students with ED an outlet for expression and regulation. A structured arts-based intervention supported by data could advance the experience. Coholic et al. (2020) located 27 studies that incorporated art as the primary modality for mindfulness interventions. These studies

showed effectiveness in managing stress, eating disorders, behavior disorders, PTSD, depression, and anxiety. Indeed, Jones and Lee (2022) investigated the effectiveness of a culturally responsive art-based mindfulness intervention called Let Art Unleash Great Happiness (LAUGH) with a diverse sample of elementary school students. Their study found that in utilizing iPad application designed to teach mindfulness practices and art creation students' moods, school connectedness, and joy for learning was enhanced.

Hope

In this study, hope sprang from a belief in themselves and was nurtured by the love and support of others. Connection was a key finding and a reminder that “we do not find the meaning of life by ourselves alone—we find it with another” (Merton qtd. in hooks, 2000, p. 223). Capitalizing on student hope is imperative. Faculty and staff could explore student interests and help them create goals and action plans to achieve their goals. Despite the countless hardships students faced, all participants were able to envision their lives in the future. They remained optimistic and dreamed of full lives with recovery and peace. Schools can be a bedrock of hope.

Limitations

This small-scale qualitative study provided insight into the experiences of seven girls ages 13-17 with ED in New England in the United States. Three of the girls identified as Black, one girl identified a bi-racial, one girl identified as Native American, and two girls identified as White. Despite this diversity, limitations existed. Future scholarship should investigate the experiences of girls in other locations throughout the United States as their environment, families, schools, socioeconomic status, race, and gender may influence their perspectives and responses. Future research could also explore the experiences of trans and non-binary youth with ED.

The girls who participated in this study either had a parent or school staff who told them about the study, encouraged them to partake, and provided consent. This disqualified girls who may not be actively involved in school, already dropped out, are not meaningfully connected to a parent or school staff member, or otherwise disappeared from school. Unfortunately, it is unclear how many girls with ED stop attending school. Therefore, this study does not capture the experiences of the most marginalized voices and is a limitation.

My own positionality created researcher bias which is a limitation of this study. Having 14 years of experience in the field of special education working with girls with ED cannot be ignored. My positionality influenced both my interest in this subject, as well as how I framed each question and carried out the research process. Further, my chosen epistemology of critical constructivist, feminist, and disability directly impacted how I analyzed the research in conjunction with ecological systems theory, CRT, trauma theory, stigma theory, and DisCrit. My findings are limited by my own experiences, the questions asked, my epistemology, my theoretical framework and how I analyzed and interpreted the data. Further, phenomenological studies are not generalizable and is a limitation for educators and schools seeking to use research to drive policy and educational reform.

This research only considered student perspectives. Participants were both minors and special education students, therefore it was an intentional choice not to conduct member checking. Future research could interview post-graduate women who were successful and navigated special education successfully or women who did not graduate. Future research could also interview the identified staff who support children with ED and how they differentiate their practices and interventions based on the students' gender, age, mental health presentation, and ED diagnosis.

Final Reflection

Findings from the present study further illuminated the experiences of girls in special education with ED. Participants articulated the complexity of their academic careers which highlighted both challenges and their belief in themselves through both interviews and vision boards. They experienced significant challenges and persisted. As Hannah put it, “it’s okay not to know. It’s okay not to be okay. It doesn’t make you different. It’s not okay to feel like that all the time, but it’s okay to feel like that.” The methodology and use of vision boards proved to be very useful in understanding their experiences, feelings, desires, and positionality of each participant. The vision board facilitated rich dialogue and understanding. In using an arts informed approach, the study did not privilege talking and writing and accommodated different learning styles and expression. With acceptance, nurturing, and understanding, girls with ED in this study reported having better educational experiences.

It was a privilege to interview and bear witness to each participant’s experience as human connections and relationships are treasured. The work fills me with hope and ignites passion, as I carry on in my own clinical practice working with girls with ED. In my quest to contribute to socially just research, I plan to share these findings with other educators and practitioners who work with girls with ED.

Utilizing vision boards provided me an opportunity to get to know each participant better. The themes that showed up in vision boards illustrated a different aspect of their experience and created a rich visual that kept their stories in motion. While it represents their aspirations for one moment in time, it conveyed feelings, beliefs, attitudes, joy, and identity. The vision boards were a tool for expressions that illuminated their experiences and provided a different depth of dimension to their lived experiences.

Concluding with this research, I close with my own vision board. As the research unfolded, I revised my board to represent my different feelings and responses. Initially my board was very small and comprised of only the grid with words. In the beginning of my analysis, I was so focused on their words. As this process was iterative, I added more layers to expound on my experience of conducting this research, the complexity, and my hope for girls with ED. The final response embodies the conclusion of this study (see Figure 8). Themes that emerge are the commitment to girls, the passage of time, persistence, the enormous undertaking contrasted with unwavering hope and love. The reflection is grounded by the face of a mountain and represents the scale and magnitude of understanding the experiences of girls with ED. The mountain face is dark, as there is still much to discover about this population as we strive to understand how to increase their academic success. To the right of the jagged mountain, there is a profile of a girl's face that looks upward. With hope and unwavering love for this population of learners, I remain resolute in my own commitment to serve girls with ED. Above the face is a flock of birds in flight moving up and over the mountain. Their movement symbolizes migration towards new processes, new ways of imagining, and new ways of navigating the intersectionality of special education, gender, and dis/ability. The birds do not fly in a pattern but are scattered to break free from the dominate ideologies that have shaped education and dis/ability and have been upheld through structural power (Annamma et al., 2016). Rather than a solo journey, this quest is comprised of many birds who are traveling together in order to move the work forward. The birds are in relation to one another and accountable to each other.

In the lower left corner, there is a brown hand holding a pencil drafting a note. The note's foundation is a crossword puzzle. The phrases "better together," "for some time it felt impossible," "made up of girls," "how I love," "you have to relinquish your thoughts and

expectations” and “how you do anything is how you do everything.” Much like a puzzle, each step of my dissertation process was interconnected, from determining my topic, to the theoretical frameworks utilized, to my epistemology, to the findings that reveal themes, and the implications for future study and practice. They all work in tandem to solve the puzzle. However, puzzle spaces are intentionally left blank as this research is evolving and there is room for more voices and experiences to be heard.

As this work concludes, I remain steadfast in my commitment and love for the students I work with and learn alongside. Amplifying the voices of marginalized girls centered me and guided me onwards in understanding and unraveling the data. This study offers insights and implications to holistically support girls in special education by attending to their emotional and mental health. My hope is that future scholarship will center the experiences of the students as curriculum, policy, and reform are created and enacted.

Figure 8

How You Do Anything



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APPENDIX A**Semi-structured Interview Protocol****Questions about vision board**

1. Tell me about your vision board (open ended but prompts below if needed.)
 - How does your board relate to bigger ideas? Values? Events? Culture?*
 - What do you want the vision board to communicate?*
 - How does your board portray you/your identity?*
 - What influences you?*
 - Did you leave anything off the board?*

Special education focus

2. What is it like being in special education?

Relationships at school

3. Tell me about people you have positive relationships with in school. It can be anybody.
 - How are these relationships nurtured?*
 - What makes these connections positive?*

Trauma

4. Young people go through hard experiences and difficult life situations. Have you experienced anything in your past or presently that has made school more difficult to manage? This could be personal, or something that has impacted your community.
 - How did this experience impact you?*
 - How do you manage this impact?*
 - Do you share these experiences with anyone at school?*

Stigma

5. Have school staff or student interactions ever made you feel rejected, ashamed, unwanted, or stigmatized?

Education & Future

6. Where do you see yourself in the future? This could be next year or after high school.
- What role does special education play in that?
 - Tell me something positive about school and having special education services.*
 - How does it make you feel now, thinking back?*

APPENDIX B

Recruitment Flyer & Email

The flyers will be sent with the email as an attachment.

RESEARCH STUDY

Seeking 8th-12th grade girls with an IEP for Emotional Impairment

Researchers want to hear about the experiences girls have in special education from their point of view.

All participants will receive a \$25 gift card + refreshments.

For more information contact Jasmin Hagen
Jhagen@lesley.edu



Your Voice Matters

Girls Research Study

Recruiting girls in Special Education with Emotional Impairment in grades 8-12.

Researchers want to know what it's like to be you! Students will participate in a focus group, art project, and an interview.

Participants will be given a \$25 gift card.

To learn more please contact Jasmin Hagen
jhagen@lesley.edu



Hello,

My name is Jasmin Hagen, LICSW. I am a doctoral student in Lesley University's Department of Counseling and Psychology, and I am seeking girls in grades 7-12 with an emotional impairment/emotional disturbance diagnosis to participate in a research study.

My IRB-approved research project will use individual interviews, and artwork to learn about what it is like being in special education. Students can be in inclusion classrooms, substantially separate classrooms, day schools or a hybrid. I am sending this to you because you may be able to identify students for this study and the research may interest you.

Why this research is important: There are few qualitative research studies that centers girls with emotional impairments. Yet, students with emotional impairments are more likely to drop out of school compared to any other students in special education. I am eager to understand the experiences of girls to consider interventions that may prevent school dropout.

Who I am? I am a doctoral candidate at Lesley University and am earning a degree in Counseling and Psychology. I also work in the Boston Public Schools as a clinical coordinator in a substantially separate emotional impairment strand. I have dedicated my career and my studies to supporting and empowering children and their families.

What would this research involve? The participation would involve up to 12 students in grades 7-12. I will arrange individual interviews with students which will include creating a vision board. The participants/students will be asked about their experience in special education. This study is IRB-approved by Lesley University to protect participants. The interview is completely confidential with all possible identifying material (such as school name) removed. Students will be given \$25 gift cards at the end of the interviews to show appreciation for their involvement. I am happy to share more information about the study and details of my professional work in this area if desired.

Afterwards: I would also like to share my results from the research if you are interested in receiving them.

What are the next steps? Interested or have questions? Please contact me at jhagen@lesley.edu or call the number below.

Thank you,



Jasmin R. Hagen, MSW
Doctoral Candidate
Division of Counseling and Psychology
Lesley University
Cambridge, MA. 02138
jhagen@lesley.edu
617-777-9522

APPENDIX C**Informed Consent****PARENTAL PERMISSION FORM**

Study Title: The experiences of girls in grades 7-12 who have an Individual Education Program for emotional impairment.

Principal Researcher: Jasmin Hagen, LICSW

If you have questions about your rights as a research study participant, you can email the Institutional Review Board at irb@lesley.edu.

Researchers' Statement:

Thank you for responding and agreeing or giving consent for your child to volunteer to be to participate in a qualitative study with Jasmin Hagen, LICSW for her dissertation. Jasmin Hagen is doctoral candidate at Lesley University. Her supervising faculty is Joe Mageary, PhD, LMHC. The researcher is interested to learn about how adolescent girls with emotional impairment experience special education. Specifically, how your student understands emotional impairment, how are they supported in school, what challenges they face in school, and what future goals they have. The research wants to understand what helps girls with EI experience academic success. Your child will participate in an arts-informed art project. They will then be individually interviewed. The researcher would also like to review your child's IEP.

What you should know about this study:

- This form explains what would happen if your child participated in this research study.
- Please read it carefully. Take as much time as you need.
- Please ask the researcher questions about anything that is not clear.
- You can ask questions about the study any time.
- If you choose not to have your child join the study, it will not affect their education.
- If you say 'Yes' now, you can still change your mind later.
- You can choose to have your child leave the study at any time.
- Your child would not lose benefits or be penalized if you decide not to have your child take part in the study or leave the study later.

What is the goal of this study?

- To understand the experiences of girls in Special Education with emotional impairment (EI) from their perspective.
- To learn from girls with EI how they understand disability and how they access support.
- To understand what supports girls with EI while they are in school and leads to success.

- To understand barriers girls with EI face in school and what those challenges look like and feel like.
- To understand how healthy relationships in school support their success.
- To understand and learn if trauma has impacted their ability to attend to school and be successful.

If I agree to have my child join this study, what would my child need to do?

1. Verify your child's special education diagnosis of emotional impairment and has an IEP.
2. Your child's participation will entail a one-on-one interview including creating a vision board that will be audio recorded which will last approximately 60 minutes to 90 minutes long.

The results of this research will be used in Jasmin Hagen's doctoral dissertation. Direct quotes from the interview may be used to clarify research conclusions and photos of your student's artwork will be used in the dissertation but all names and identifying information will be kept confidential. By signing this consent form, you give the researcher permission to use statements your child makes during the interview.

What are the potential benefits if my child joins this study?

The information gathered in the interview may help educators in how they provide support to girls with EI. This information may help schools modify practices to help address barriers and challenges that girls face in school. Your child will be given a \$25 gift card after participation. Further, it may be beneficial for your child as they may develop greater insight into their emotional impairment. They may also feel positively for contributing to research.

What are the potential harms or risks if my child joins this study?

By volunteering your child to participate you may develop greater insight about special education and emotional impairment. No risks are anticipated with your child's participation in this study. It is possible that discussing their experiences may bring up emotional or distressing reactions. Students will be directed to check-in with their school-based counselor/clinician so they can discuss these concerns with as needed. You may also call the Boston Emergency Service Team 1-800-981-4357 if your child becomes distressed.

Your student can stop the interview at any time. You may also withdraw your student from this study either during or after participation without negative consequences. Should your student withdraw, the data will be destroyed.

In the event that your child discloses that they are being harmed or have the intentions of harming someone I am a mandated reporter and will have to contact the Department of Children and Families.

How would you keep my child’s information confidential?

This information provided will be kept strictly confidential. The informed consent form will be kept separate from the interview data. Your child’s name and other identifying information will be changed to protect their identity. Recordings, transcripts, and interview data will be stored in a locked file cabinet or on a password-protected computer, and only I will have access to this information. Data will be destroyed after five years.

Who do I contact if I have problems, questions or want more information?

If you have any questions about this interview, research, and your child’s involvement, please ask the researcher before signing this form. If you have questions or concerns about your rights as a participant contact Jasmin Hagen 617-777-9522.

Your signature on this form would mean:

- The research study was explained to you.
- You had a chance to ask all the questions you have at this time. All your questions have been answered clearly.
- By signing this parental permission form, you do not give up any of your legal rights. The researcher(s) or sponsor(s) are not relieved of any liability they may have.
- You agree to have your child take part in this research study.

Please Note: If the person taking part in this research study is a foster child or a ward of the state, then please tell the researcher or their staff.

Name of Researcher: _____

Signature of Researcher: _____ *Date:* _____

Name of Parent: _____

Name of minor: _____

Signature of Parent: _____ *Date:* _____

There is a Standing Committee for Human Subjects in Research at Lesley University to which complaints or problems concerning any research project may, and should, be reported if they arise. Contact the Committee Chairpersons at irb@lesley.edu

APPENDIX D

Assent Form

Your Voice Matters

Project Title: The Experiences of Girls with Emotional Impairment in Special Education
 Investigator: Jasmin Hagen, LICSW

I am doing a research study about the experiences of girls in special education with emotional impairment. A research study is a way to learn more about people. If you decide that you want to be part of this study, you will be asked to complete an arts-informed project called a vision board and be interviewed about having emotional impairment. You would meet with me twice for approximately 90 minutes each time. These interviews will be audio and video recorded.

There are some things about this study you should know. You will be asked about your school experience with the expectation that you are answering questions openly and honestly. The conversations will be recorded, and you will create a piece of original artwork called a *vision board*. You will also provide me with feedback. Your answers will be used in my dissertation.

Not everyone who takes part in this study will benefit. A benefit means that something good happens to you. I think these benefits might be feeling empowered by contributing to the research. However, everyone who participates will get a \$25 gift card and a chance to make some artwork.

When the study is completed, I will write a report about what was learned. This report will not include your name or indicate that you were in the study. You will be able to choose a pseudo name.

You do not have to be in this study if you do not want to be. If you decide to stop after we begin, that's okay too. Your parents/guardians know about the study too.

If you decide you want to be in this study, please sign your name.

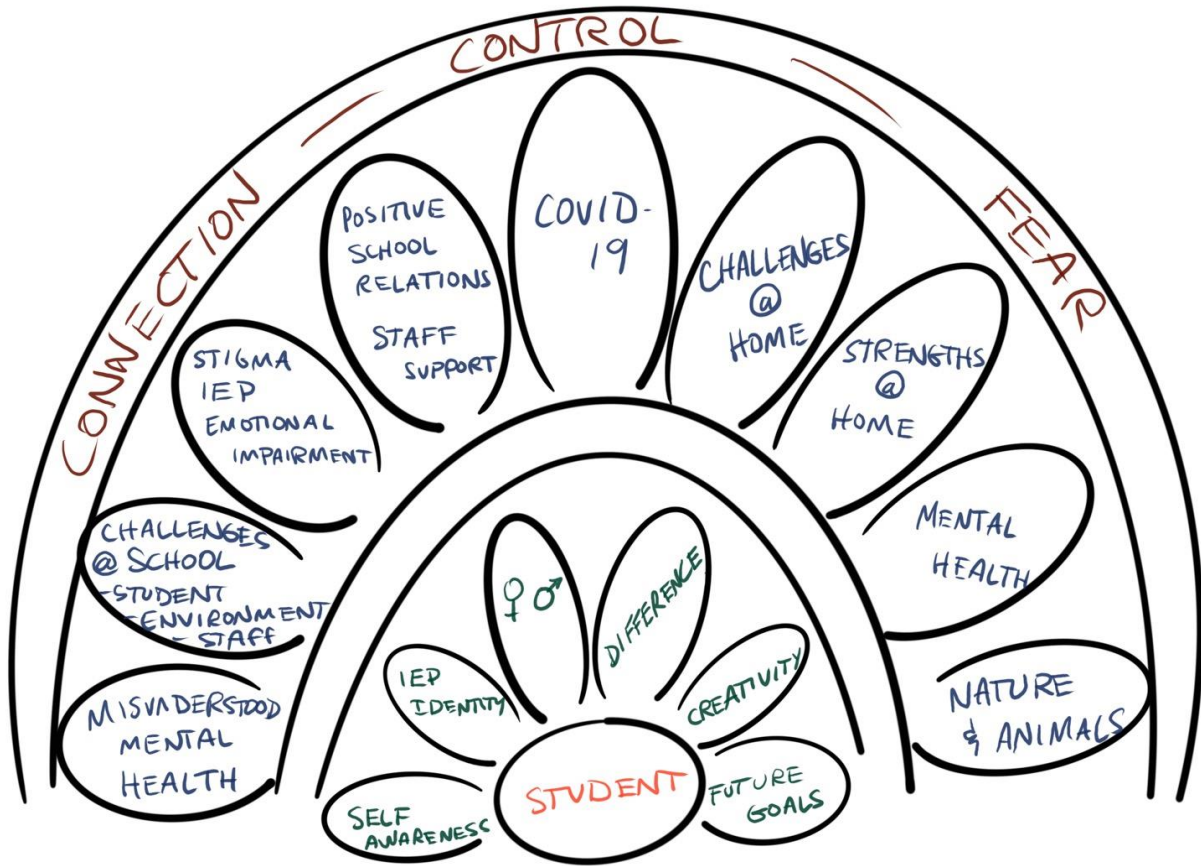
I, _____, want to be in this research study.

 (Sign your name here) 

 (Date)

APPENDIX E

Code Mapping



APPENDIX F

Protecting Human Research Participants Training



**CERTIFICATE
OF COMPLETION**

PHRP Online Training, Inc. certifies that

Jasmin Hagen

has successfully completed the web-based course "Protecting Human Research Participants Online Training."

Date Completed: **2020-11-16**

Certification Number: **2860078**



PHRP
Protecting Human
Research Participants
Online Training