Social work education and training in mental health, addictions and suicide: a scoping review protocol

To cite: Kourgiantakis T, Sewell K, McNeil S, et al. Social work education and training in mental health, addictions and suicide: a scoping review protocol. BMJ Open 2019;9:e024659. doi:10.1136/bmjopen-2018-024659

ABSTRACT

Introduction Social workers are among the largest group of professionals in the mental health workforce and play a key role in the assessment of mental health, addictions and suicide. Most social workers provide services to individuals with mental health concerns, yet there are gaps in research on social work education and training programmes. The objective of this scoping review is to examine literature on social work education and training in mental health, addictions and suicide.

Methods and analysis Using a scoping review framework developed by Arksey and O’Malley, we will search for literature through seven academic databases: PsycINFO, Sociological Abstracts, CINAHL Plus, Social Sciences Abstracts, Education Source, ERIC and Social Work Abstracts. Two independent reviewers will screen articles utilising a two-stage process. Titles and abstracts will be reviewed in the first stage and full texts will be reviewed in the second stage. Selected articles that meet inclusion criteria will be charted to extract key themes and they will be analysed using a qualitative thematic analysis approach.

Ethics and dissemination This review will fill a knowledge gap in social work education and training in mental health, addictions and suicide. Ethics approval is not required for this scoping review. Through dissemination in publications and relevant conferences, the results may guide future research and education in social work.

INTRODUCTION

Mental health and addiction concerns affect millions of individuals worldwide. They are the leading cause of the global burden of disease1,2 and are among the primary causes of disability around the world.3 In the USA, one in five adults (43.6 million) report a form of mental illness across a 1 year period, and there are >21.5 million individuals with substance use disorders.4 With respect to co-occurring disorders, research shows that >50% of individuals seeking help for an addiction also have a mental health concern, and 15%–20% of individuals seeking mental health services also have an addiction.5 Individuals with mental health and addiction concerns have elevated risks of suicidal ideation and completion, and mental illness is the greatest risk factor for suicide among children and adolescents.6

As one of the core professions of the mental health workforce in the USA and worldwide,7,8 social workers have a key responsibility to screen, assess and treat mental health and addiction concerns. The WHO reports social workers as one of the key professions in mental healthcare across 149 countries.9 In the USA, 37% of licensed social workers list mental health as their top area of practice and specialisation, but even when this is not the primary area of practice, most social workers across various sectors are working with individuals with mental health and addiction concerns.10 A survey by the National Association of Social Workers in the USA reported that 96% of social workers serve clients with mental health concerns, 87% work with individuals with substance use disorders and 93% serve individuals with co-occurring mental health and substance use disorders. This indicates that social workers across a broad range of specialities such as education, criminal justice, health, child welfare...
and private practice provide services to individuals with mental health and addiction concerns. Social workers have a valuable contribution to mental healthcare in interprofessional teams with a focus not only on the individual with mental illness but also families and communities. Social workers address psychosocial needs and they also advocate and empower individuals coping with mental health and addictions.

Concerns have been raised internationally about the gaps in social work education and training in mental health, and the discrepancies between what is taught in the classroom and what is needed in field education and practice. Research has also shown that the curricula of many social work programmes have limited emphasis on mental disorders, addictions and suicide prevention and intervention. A survey of 598 social workers found that 76% reported that they received no training on suicide while in graduate school. This lack of training is linked with low confidence and high levels of anxiety and stress for students and social workers working with clients at risk of suicide. Low levels of knowledge, skills and confidence impact the degree to which students and social workers assess suicide risk, as well as signs and symptoms of mental health concerns, and substance misuse. An Australian study found that social workers ‘lack mental health literacy’ defined as difficulty identifying signs and symptoms of mental health concerns and risk factors and not possessing enough knowledge of evidence-based treatments. (Cesare and King, p1766)

The addictions research indicates that many social workers are insufficiently trained to implement evidence-informed addiction treatments across various health and social service settings. This has been attributed in part to the lack of consistent and systematic integration of addiction courses in social work programmes. A 2015 American study found that only 2% of graduate social work programmes have a required course in addictions, in stark contrast to counselling programmes where this is required in 69% of programmes. This finding was supported by another study that also emphasised the importance of building faculty expertise in order to develop more addiction content in social work curricula. A review of Canadian social work programmes found that there were no required addictions courses in any of the programmes, and two-thirds of the graduate programmes do not offer any elective courses in addictions.

There has been a call for social work programmes to better prepare students for clinical practice and in response to this call a summit was organised by the American Council on Social Work Education. Educators and researchers at this summit made recommendations that social work programmes ensure that students learn ‘a baseline set of professional expectations and skills’ in the classroom to be more adequately prepared for clinical practice. (Council on Social Work Education, p9) This paper outlines the protocol for a scoping review examining the literature on social work education and training in mental health, addictions and suicide. The objectives of this scoping review are to (1) scope the extent, range and nature of literature on social work education and training in mental health, addictions and suicide (2) synthesise the existing literature to provide an overview of education and training initiatives in social work for mental health, addictions and suicide and (3) identify gaps to guide future research, education and practice.

**METHODS AND ANALYSIS**

We will conduct a scoping review to map and synthesise the literature on social work education and training in mental health, addictions and suicide. This study will follow a scoping review framework developed by Arksey and O’Malley, and will also follow recommendations on scoping studies by the Joanna Briggs Institute and Levac et al. This scoping review follows guidelines described in the PRISMA Extension for Scoping Reviews (PRISMA-ScR) to enhance methodological and reporting quality (see online supplementary appendix A for PRISMA-ScR checklist). Colquhoun and colleagues expand on the original definition of scoping reviews and define a scoping review as ‘a form of knowledge synthesis that addresses an exploratory research question aimed at mapping key concepts, types of evidence, and gaps in research related to a defined area or field by systematically searching, selecting and synthesizing knowledge’ (p 1292–1294). A scoping review is a suitable method for this study because it allows researchers to map available evidence on the topic being examined. For this review, we will map the available evidence on social work education and training in mental health, addictions and suicide and identify any existing gaps in knowledge. To conduct this review, we will follow a five-step framework outlined by Arksey and O’Malley including (1) identifying the research question, (2) identifying relevant studies (developing the search), (3) study selection, (4) charting the data and (5) collating, summarising and reporting results.

**Stage 1: identifying the research question**

Scoping reviews aim to cover a breadth of evidence with broad research questions that clearly define concepts, population and outcome of interest or context. The research questions for this scoping review were developed in consultation with a research team that consists of three faculty members who teach social work practice in mental health in a social work programme (TK, EL, KA), two social workers in clinical leadership roles at a local mental health and addiction treatment centre (MM, DK), one social sciences librarian (JL) and two doctoral students in research assistant roles (KS, SM). According to Colquhoun et al., research questions should be developed in conjunction with the purpose for conducting the scoping review. The purpose of this review is to map available evidence on social work education and training in mental health, addictions and suicide. Social work students lack knowledge and skills in assessing mental health, addictions and suicide risk, and researchers posit
that this is linked to inadequate education and training in social work programmes. Through consultation with our research team, we developed the following research questions: (1) What is the current state of literature on social work education and training in mental health, addictions and suicide? (2) What are the specific areas of focus for education and training in the literature? (3) How are mental health, addictions and suicide taught in educational or clinical settings? (4) What key teaching and training recommendations can be identified from this review?

Stage 2: identifying relevant studies

A research team member who is a social sciences librarian (JL) developed the initial search strategy in consultation with the rest of the team. We constructed it in Ovid PsycINFO (1806-) using a combination of text keywords and psychological subject headings (see table 1). We will send the PsycINFO search strategy to a librarian colleague at the university’s science-speciality library for peer review using the Peer Review of Electronic Search Strategies framework. We will incorporate feedback into peer review using the Peer Review of Electronic Search Strategies framework. We will include literature written in English and French and we are not placing any date restrictions. To be included in this review, the following inclusion criteria must be met: (1) focus on social work education and training in mental health, addictions and/or suicide in the classroom or in a clinical setting, (2) social work training or education activity targets social work students and/or social workers, (3) mental health concerns include depression, anxiety, bipolar disorder, schizophrenia, psychotic disorders and personality disorders, (4) suicide includes self-harm and (5) addictions include alcohol, drugs and gambling. We will translate the peer reviewed search into the other databases by converting the database syntax and controlled vocabulary (if available) to each database. This may require slight adjustments to the original search if new and relevant controlled vocabulary terms are discovered. To ensure our search strategy has not missed any articles, we will also conduct a hand search of reference lists of the selected articles.

Stage 3: study selection

In accordance with recommendations by Levac et al., we will use a transparent, iterative process as we search the literature and refine the search strategy. This is a two-stage screening process that will have two independent reviewers for both stages. In the first stage, the reviewers will screen titles and abstracts, and in the second stage full texts will be screened. A third reviewer will be included when needed to arrive at consensus.

We will include literature written in English and French and we are not placing any date restrictions. To be included in this review, the following inclusion criteria must be met: (1) focus on social work education and training in mental health, addictions and/or suicide in the classroom or in a clinical setting, (2) social work training or education activity targets social work students and/or social workers, (3) mental health concerns include depression, anxiety, bipolar disorder, schizophrenia, psychotic disorders and personality disorders, (4) suicide includes self-harm and (5) addictions include alcohol, drugs and gambling. We

Table 1

| Concept | Search terms |
|---------|--------------|
| 1. Social work | exp social workers/OR exp social casework/OR (social adj3 (work* OR casework* OR (case-work*)])* (work* OR (case adj3 work*))* OR (social work* OR social casework*) |
| 2. Education | social work education/OR curriculum/OR teaching/OR counselor education/OR graduate students/OR exp experiential learning/OR MSW.tw.OR BSW.tw.OR undergrad.tw.OR graduat.tw.OR master.tw.OR bachelor.tw.OR teach.tw.OR train.tw.OR instruct.tw.OR educat.tw.OR curricul.tw.OR student.tw.OR practica.tw.OR practicum.tw.OR (field adj3 (placement* OR experien* OR educat*)) OR service learning.tw.OR internship.tw. |
| 3. Mental health | exp mental health/OR exp mental disorders/OR (mental* OR psycholo* OR affective) adj3 (health OR ill* OR function* OR disorder* OR condition* OR status) OR psychos.tw.OR psychotic.tw.OR postpsychotic OR (post-psychotic) OR hallucin.tw.OR parano.tw.OR deliri.tw.OR bipolar.tw/OR mania.tw.OR manic.tw. OR hypomani.tw.OR rapid cycling.tw.OR depress.tw.OR dysphoric.tw.OR melancholic.tw.OR dysthyemic.tw.OR (affective OR mood) adj3 (disorder* OR symptom*) OR (adjustment disorder*) OR (anxiety OR anxious OR anxiety) OR OCD.tw.OR phobi.tw.OR panic.tw.OR fear.tw.OR obsess.tw.OR compuls.tw.OR OCD.tw.OR (post-trauma* OR post trauma* OR posttrauma* OR PTSD) OR (stress adj3 (disorder* OR condition*)) OR schizophrenia.tw.OR schizoaffective.tw.OR personality adj3 (disorder* OR difficult*) |
| 4. Addictions | exp addiction/OR exp drug addiction/OR exp alcoholism/OR pathological gambling/OR addictive.tw.OR alcoholi.tw.OR (alcohol OR drink* OR (drug* OR substance*) OR (gambl* OR betting OR wagering)) adj3 (dependen* OR disorder* OR misuse* OR use OR user* OR using OR abuse* OR consumption OR addict* OR patholog* OR problem* OR compulsive* OR impulsive* OR crave* OR craving*) |
| 5. Suicide | suicide/attempted suicide OR exp self-injurious behavior/OR (self adj1 (harm* OR injur* OR inflict* OR mutilat*)) OR suicid.tw. |

The concepts will be combined as follows: (social work) AND (education) AND (mental health OR addictions OR suicide). Search terms that end in a slash are psychological subject headings. Search terms that end in tw are free text keywords that will be searched in PsycINFO's text word database fields which are title, abstract, table of contents and key concepts.
will exclude literature that focuses on (1) mental health, addiction and/or suicide interventions for patients/service users/clients. In addition to inclusion and exclusion criteria, an article review form will be used in all stages of study selection asking reviewers to assess each article using the following questions:
1. Does the article focus specifically on social work education and/or training?
2. Does the article focus on social work education and/or training specifically in mental health, addictions or suicide?
3. Does the education or training programme target social work students or social workers?

Stage 4: charting the data

A data charting form will be developed by the research team and will be used to extract and sort key themes from the selected full-text studies and to categorise the data. The initial variables for data extraction were selected based on the research questions with definitions for each category. The preliminary variables include (1) authors, (2) year of publication, (3) journal, (4) format of paper (e.g., review, original research, teaching note, report), (5) educational or clinical setting, (6) mental health, addiction and/or suicide, (7) undergraduate/graduate social work students or social workers, (8) teaching and/or training method, (9) key findings (when applicable), (10) recommendations by the authors and (11) gaps, limitations or challenges reported in the article. The charting form will be piloted with the first five articles by the reviewers in consultation with the principal investigator. At this stage, we will refine the definitions for each variable and determine whether other variables should be included on the updated charting form. We will use a qualitative thematic analysis approach to identify themes across the selected studies. The reviewers will independently chart the data in an iterative manner by identifying themes, discussing and comparing the results, updating the charting form and consulting the third reviewer when there is disagreement or ambiguity. Data will be extracted into an Excel spreadsheet in Microsoft Excel software.

Stage 5: collating, summarising and reporting the results

In the final stage of the scoping review, we will analyse extracted data using a numerical summary analysis and qualitative thematic analysis. Results will be disseminated to researchers, educators and clinical social workers through publications and presentations at social work conferences. Members of the research team have well-established links with other schools of social work, accrediting social work bodies in Canada and the USA, and various mental health and addiction clinical settings.

Patients and public involvement

Patients and public were not involved in this project.

ETHICS AND DISSEMINATION

This paper presents the protocol for a scoping review of social work education in mental health, addictions and suicide. Ethics approval is not necessary as the data are collected from publicly available sources. This review will advance knowledge on social work education and training in mental health, addictions and suicide. Through dissemination in publications and relevant conferences, the results may guide future research and education initiatives in social work.

Collaborators

Anne Kirvan.

Contributors

TK and KS conceived the idea for the study and led the writing of the protocol. JL developed the search strategy and contributed to the writing of the protocol. All authors made substantive intellectual contributions to the development of this protocol and all authors critically reviewed the article (TK, KS, SM, JL, EL, KA, MM, DK, SM, KS, TK, JL and EL) edited the protocol. All authors read and approved the final version of the study (TK, KS, SM, JL, EL, KA, MM, DK).

Funding

This scoping review protocol was supported in part by the Ontario Association of Social Workers (OASW) Accelerator Grant 2018.

Competing interests

None declared.

Patient consent for publication

Not required.

Provenance and peer review

Not commissioned; externally peer reviewed.

Open access

This is an open access article distributed in accordance with the Creative Commons Attribution Non Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited, appropriate credit is given, any changes made indicated, and the use is non-commercial. See: http://creativecommons.org/licenses/by-nc/4.0/.

REFERENCES

1. Whiteford HA, Ferrari AJ, Degenhardt L, et al. The global burden of mental, neurological and substance use disorders: an analysis from the Global Burden of Disease Study 2010. PLoS One 2015;10:e0116820.
2. World Health Organization. Health in 2015: from MDGs, Millennium Development Goals to SDGs, Sustainable Development Goals. Geneva: World Health Organization, 2015:204.
3. University of Washington, Institute for Health Metrics and Evaluation. The global burden of disease: generating evidence, guiding policy. 2013. http://www.healthmetricsandevaluation.org/sites/default/files/policy_report/2011/GBD_GeneratingEvidence_Guiding%20Policy%20FINAL.pdf (accessed 31 May 2018).
4. Hedden SL, Kennel J, Lipari R, et al. Behavioral health trends in the United States: results from the 2014 national survey on drug use and health, 2014:64.
5. Canadian Centre on Substance Abuse. Substance abuse in Canada: concurrent disorders. Ottawa, Ont.: Canadian Centre on Substance Abuse, 2000. http://www.deslibris.ca/doi/223020. (cited 31 May 2018).
6. Alonso D, Gearing RE. Suicide assessment and treatment, second edition: empirical and evidence-based practices: Springer Publishing Company, 2018:453.
7. Heisler EJ. The mental health workforce: a primer: Congressional Research Service, 2018.
8. Manderscheid RW, Berry JT, eds. Mental Health, United States, 2004 (DHHS Pub No SMA-06-4195). Rockville, MD: Substance Abuse and Mental Health Services Administration, 2006.
9. WHO. Mental health atlas 2017. Geneva: World Health Organization, 2018.
10. Whitaker T, Weismiller T, Clark E. Assuring the sufficiency of a frontline workforce: a national study of licensed social workers. Executive Summary. Washington, DC: National Association of Social Workers.
11. Ashcroft R, Kourgiantakis T, Fearing G, et al. Social work’s scope of practice in primary mental health care: a scoping review. Br J Soc Work 2019;49:318–34.
12. Bland R, Renouf N. Social work and the mental health team. Australasian Psychiatry 2001;9:238–41.
13. Cesare P, King R. Social workers' beliefs about the interventions for schizophrenia and depression: a comparison with the public and other health professionals—an Australian Analysis. *Br J Soc Work* 2015;45:1750–70.

14. Estreet A, Archibald P, Tirmazi MT, et al. Exploring social work student education: The effect of a harm reduction curriculum on student knowledge and attitudes regarding opioid use disorders. *Subst Abus* 2017;38:369–75.

15. Renouf N, Bland R. Navigating stormy waters: challenges and opportunities for social work in mental health. *Australian Social Work* 2005;58:419–30.

16. Sharpe TL, Jacobson Frey J, Osteen PJ, et al. Perspectives and appropriateness of suicide prevention gatekeeper training for msw students. *Soc Work Ment Health* 2014;12:117–31.

17. Wilkey C, Lundgren L, Amodeo M. Addiction training in social work schools: a nationwide analysis. *J Soc Work Pract Addict* 2013;13:192–210.

18. Ramon S, Shera W, Healy B, et al. The rediscovered concept of recovery in mental illness: a multicountry comparison of policy and practice. *Int J Ment Health* 2002;38:106–26.

19. Eck SM, Newhill CE, Watson AC. Effects of severe mental illness education on msw student attitudes about schizophrenia. *J Soc Work Educ* 2012;48:425–38.

20. Gellis ZD, Kim EG. Training social work students to recognize later-life depression: Is standardized patient simulation effective? *Gerontol Geriatr Educ* 2017;38:425–37.

21. Senreich E, Straussner SLA. The Effect of MSW Education on Students’ Knowledge and Attitudes Regarding Substance Abusing Clients. *J Soc Work Educ* 2013;49:321–36.

22. Almeida J, O’Brien KHM, Girona CM, et al. Development, implementation, and evaluation of a comprehensive course on suicide in a master's of social work program. *J Soc Work Educ* 2017;53:727–36.

23. Feldman BN, Freedenthal S. Social work education in suicide intervention and prevention: an unmet need? *Suicide Life Threat Behav* 2006;36:467–80.

24. Singer JB, Slovak K. School social workers' experiences with youth suicidal behavior: an exploratory study. *Child Sch* 2011;33:215–28.

25. Sacco P, Ting L, Crouch TB, et al. SBIRT training in social work education: evaluating change using standardized patient simulation. *J Soc Work Pract Addict* 2017;17(1-2):150–68.

26. Rustett JL, Williams A. An exploration of substance abuse course offerings for students in counseling and social work programs. *Subst Abus* 2015;36:51–8.

27. Graves G, Csiernik R, Foy J, et al. An examination of canadian social work program curriculum and the addiction core competencies. *J Soc Work Pract Addict* 2009;9:400–13.

28. Council on Social Work Education. *Educational policy and accreditation standards*, 2015.

29. Arksey H, O’Malley L. Scoping studies: towards a methodological framework. *Int J Soc Res Methodol* 2005;8:19–32.

30. Joanna Briggs Institute. Joanna Briggs Institute Reviewer's Manual. 2015th edition. South Adelaide, Australia: The Joanna Briggs Institute, 2015.

31. Levac D, Colquhoun H, O’Brien KK. Scoping studies: advancing the methodology. *Implement Sci* 2010;5:69.

32. Tricco AC, Lillie E, Zarin W, et al. PRISMA extension for scoping reviews (prisma-scr): checklist and explanation. *Ann Intern Med* 2018;169:467–73.

33. Colquhoun HL, Levac D, O’Brien KK, et al. Scoping reviews: time for clarity in definition, methods, and reporting. *J Clin Epidemiol* 2014;67:1291–4.