

## **From The Editors**

We are pleased to present the Spring 2011 Issue of *Perspectives on Social Work*. Submissions for the issue represented a wide range of topics from a diverse array of doctoral students. We have seen the quality of submissions rise and our job has become more difficult as we have had to select fewer articles to be published from among so many interesting and worthy choices. We appreciate the efforts of all doctoral students who have submitted manuscripts, as well as those who have contributed to our peer review process by reading and commenting on the submissions. This journal would not be possible without the contributions of the writers and reviewers as well as the members of the Editorial Board.

Furthermore, we would like to give a special thanks to those who accepted our invitation to review submissions for this issue. With your numerous personal commitments and deadlines, we appreciate your efforts in reviewing articles during a busy semester. The invited reviewers for this issue include: Rhonda Patrick, Roberta Leal, Grace Loudd, Gargi Bhowmick, Saralyn Mciver, Huysu Kim, and Nadia Kalinchuk. Outside reviewers are invaluable members of the review process and must be acknowledged for their support in *Perspectives on Social Work*. The invited outside reviewers for this issue include: Ray Woodcock (Indiana University-Purdue University), and Marva Augustine (Indiana University).

We thank you all for your dedication and hard work in making *Perspectives on Social Work* a success!

Best regards,  
Monique Pappadis, David V. Flores, & Traber Giardina

## CV Builder

University of Houston, Graduate College of Social Work  
*Perspectives on Social Work* congratulates the following doctoral students on their accomplishments during fall 2010 through spring/summer 2011.

### **Elizabeth McIngvale, LMSW**

Elizabeth has launched a self-help website for Obsessive Compulsive Disorder ([www.ocdchallenge.org](http://www.ocdchallenge.org)).

#### Presentations

**McIngvale, E.**, McIngvale-Brown, L., McIngvale, L. (July 30, 2011). A family's story with OCD, San Diego, CA. Van Kirk, N.,

**McIngvale, E.**, Putman, K. (2011, July 29). Working with OCD following your own battle: rewards, challenges, and directions, OCF National Conference, San Diego, CA.

**McIngvale, E.**, McIngvale-Brown, L. (2011, July 28). Support groups: From formation to Implementation, OCF National Conference, San Diego, CA.

**McIngvale, E.** (2011, June 11). Support Groups; How to build and maintain them. OCD Texas quarterly meeting, Houston, TX.

**McIngvale, E.** (2011, March 3). Evidence based practice. 7th Doctoral social work student research symposium, Houston, TX.

**McIngvale, E.** (2010, December 3). Living with OCD: My personal & professional experiences. 13th fall psychiatric symposium, Knoxville, TN.

**McIngvale, E.** (2010, October 16). Keynote Address. Life with OCD: From sufferer to advocate. Presented at the kickoff meeting for the OCD Texas Organization, Austin, TX.

**McIngvale, E.** (2010, August 5). Overcoming OCD through Creativity. Presented at the TAVAC (Texas Association of Vocational Adjustment Coordinators), The Woodlands Waterway Marriott Hotel, The Woodlands, TX.

### **David V. Flores, MSW, MPH, CPH**

David is the recipient of the 2011-2012 Doctoral Fellowship Award in Clinical Training from the Council on Social Work Education's Minority Fellowship Program (MFP), sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), 24,000 per year up to three years.

#### Presentations

**Flores, D.V.** & Torres, L.R. "*El Lado Oscuro:*" *The Dark Side of Social Capital in Aging Mexican-American Heroin-Using Men*, Oral presentation at the 2011 Annual Conference of the Society for Social Work and Research, January 12-16, 2011, Tampa, FL.

**Flores, D.V.** *From Bench to Practice: Translational Research with Hispanic Clients.* Translational Research: A Social Work Perspective in Research, 7<sup>th</sup> Annual Doctorial Symposium, University of Houston Graduate College of Social Work, March 3, 2011, Houston, Texas.

**Monique R. Pappadis, M.Ed., CHES, CCRP**

Monique was recently inducted into the TIRR Research Council as an Investigator for her contributions to the field of rehabilitation. TIRR Memorial Hermann is one the top rehabilitation and research hospitals in America.

Health Education Publications

Sander, A. M., Moessner, A. M., Kendall, K. S., **Pappadis, M. R.**, Hammond, F. M. & Cyborski, C. M. (2010). *Sexual functioning and satisfaction after traumatic brain injury: An educational manual*. Houston, TX: Baylor College of Medicine.

Presentations

**Pappadis, M. R.** (2011, June). Culturally competent data collection: Addressing culture and language to improve data quality. In J. Wright's: *TBI Data Collection in the 21<sup>st</sup> Century: Advances and Issues*. Symposium conducted at the 3<sup>rd</sup> Federal Interagency Conference on Traumatic Brain Injury, Washington, D.C.

**Pappadis, M. R.**, Sander, A. M., & Struchen, M. A. (2010). *Impact of traumatic brain injury on quality of life and self-concept: Perspectives of survivors in an ethnically diverse sample*. Poster presented at the 2010 American Congress of Rehabilitation Medicine – American Society of Neurorehabilitation (ACRM-ASNR) Joint Educational Conference, October 21 – 23, Montreal, Quebec, Canada.

**Pappadis, M. R.** (2010, September 16). Qualitative research: Immersing yourself in the experience. Presented at TIRR Memorial Hermann, Houston, TX.

Publications

**Pappadis, M. R.**, Sander, A. M., Struchen, M. A., Leung, P., & Smith, D. W. (2011). Common misconceptions about traumatic brain injury (TBI). *Journal of Head Trauma Rehabilitation, 26*(4), 301-311.

Sander, A. M., **Pappadis, M. R.**, Clark, A. N., & Struchen, M. A. (2011). Perceptions of community integration in an ethnically diverse sample. *Journal of Head Trauma Rehabilitation, 26*(2), 158-69.

Struchen, M. A., **Pappadis, M. R.**, Sander, A. M., Burrows, C. S., & Myszka, K. A. (2011). Examining the contribution of social communication abilities and affective/behavioral functioning to social integration outcomes for adults with traumatic brain injury. *Journal of Head Trauma Rehabilitation, 26*(1), 30-42.

**Tawana Cummings, MSW**

Presentations

Hill, C. & **Cummings, T.** (2011). Health disparities for black men. Ninth Annual Disparities in Health in the Global Context Summer Workshop. UT MD Anderson Cancer Center, Houston, TX, June 20-25.

**Traber Davis Giardina, MA, MSW**

Publications

- Davis Giardina, T.**, and Singh, H. (2011). Should Patients Get Direct Access to Their Lab Test Results? An Answer with Many Questions. *JAMA*. Nov 28. [Epub ahead of print].
- Singh, H., **Davis Giardina, T.**, Forjuoh, S.M., Reis, M.D., Kosmach, S., Khan, M.M., & Thomas, E.J. (2011). Health Record-Based Surveillance of Diagnostic Errors in Primary Care. *BMJ Quality & Safety*. Oct 13. [Epub ahead of print].
- Singh, H., **Davis Giardina, T.**, Petersen, L.A., Smith, M., Wilson, L., Dismukes, K., Bhagwath, G., & Thomas, E.J. (2011). Exploring Situational Awareness in Diagnostic Errors in Primary Care. *BMJ Quality & Safety*. Sep 2. [Epub ahead of print].
- Tamuz, M., **Davis Giardina, T.**, Thomas, E.J., Menon, S., & Singh, H. (2011). Rethinking resident supervision to improve safety in the intensive care unit: From hierarchical to interprofessional models. *Journal of Hospital Medicine*. 6(8); 445-452.

**Translational Research: How Does the Social Work Profession  
Translate Research into Effective Practice?  
The 7<sup>th</sup> Doctoral Social Work Student Research Symposium  
Abstracts**

**Advancing translational research:  
Building bridges and engaging social work practice  
through institutional collaborations**

*Alexis Rose & Nadia Kalinchuk  
University of Houston*

*Translational research provides a promising mechanism for reducing health disparities (Dankwa-Mullan, I., et al. 2010). The Kaiser Health Disparities Project recently revealed that despite women's unique social determinants, such as reproductive health concerns and engagement of the healthcare system, health disparity data often obscures gender differences (The Kaiser Family Foundation, 2009). The Institute of Medicine (2010) recommends translational research in women's health as a means to decreasing barriers to care, a critical step in reducing health disparities. This work will explore the conceptual framework and methodological underpinnings of an interdisciplinary research-education collaboration between two institutions, one academic research institution and one bio-medical research institution. The researchers use a conceptual model to suggest that such research partnerships are critical to reducing health disparities among women, fostering translational research, providing evidence-based social work practice in a bio-medical setting, and putting effective interventions into practice.*

References

- Dankwa-Mullan, I., Rhee, K. B., Stoff, D. M., Pohlhaus, J., Sy, F. S., Stinson Jr, N., & Ruffin, J. (2010). Moving toward paradigm-shifting research in health disparities through translational, transformational, and transdisciplinary approaches. *American Journal of Public Health, 100*(S1), S19-S24.
- Dankwa-Mullan, I., Rhee, K. B., Williams, K., Sanchez, I., Sy, F. S., Stinson Jr, N., & Ruffin, J. (2010). The science of eliminating health disparities: Summary and analysis of the NIH summit recommendations. *American Journal of Public Health, 100*(S1), S12-S18.
- Institute of Medicine. (2010). Committee for women's health research: Progress, pitfalls and promise. Washington DC: Institute of Medicine of the National Academies. Retrieved December 20, 2010, from <http://www.iom.edu/Reports/2010/Womens-Health-Research-Progress-Pitfalls-and-Promise.aspx>.
- Kaiser Family Foundation. (2009). Putting women's health care disparities on the map: Examining racial and ethnic health disparities at the state level. In Disparities Policy Project. Retrieved December 20, 2010, from <http://www.kff.org/minorityhealth/upload/7886.pdf>.

**Why do Adolescents hurt themselves?:  
A qualitative study of the triggers, functions,  
and healthy alternatives to self-harm\***

*James Pease  
University of Denver*

*Studies have consistently shown high rates of self harm and suicide attempts among adolescents, yet much remains to be learned about the reasons for self harm and the relationship to suicidal intent. This phenomenological, qualitative study of youth (ages 12–17) sought to identify the triggers, functions and healthy alternatives to self harm. In interviews with adolescents who self-harm, social workers frequently ask; what purpose does hurting yourself serve (function), what was going on right before you hurt yourself (triggers), and what else can you do besides hurting yourself (healthy alternatives)? This study is particularly relevant to translational research because the a priori research questions were guided by questions asked in clinical interviews of adolescents who self-harm. Using a template analysis approach, the researchers created a hierarchical analysis starting with three a priori codes informed by the research questions, and a second level of codes that emerged from the data. Analysis of the functions of self harm revealed multiple and sometimes conflicting themes, especially in relation to suicidality. Of the 29 participants, 20 communicated a wish to commit suicide as a reason for self-harm. Yet all but 4 of the suicidal participants reported other purposes for self harm, as well. The most prominent triggers involved interpersonal issues, especially conflict with parents. Common internal triggers were feelings of sadness, failure, boredom, guilt, anger and hopelessness. External triggers included problems with school, parental divorce, and being in trouble. Healthy independent alternatives included visualization and relaxation techniques, journaling, and exercise. Healthy interactive techniques included connecting with friends and finding someone to empathize with them. This study advances our understanding of the functions of, triggers for, and healthy alternatives to self harm in a diverse, high-risk, mostly Hispanic sample. Findings are consistent with previous research on non-suicidal self injury. This research provides empirical evidence that practically and directly informs clinical work with adolescents who self-harm. Overall, this study has important implications for patients, families and providers because it improves our understanding of the reasons for self harm and offers healthy alternatives for high risk youth.*

\*Approved by the Institutional Review Board (IRB) of the University of Denver, Protocol #2008-0769

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- Laye-Gindhu, A. & Schonert-Reichl, K. A. (2005). Nonsuicidal self-harm among community adolescents: Understanding the "whats" and "whys" of self-harm. *Journal of Youth and Adolescence*, 34, 447–457.
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**Understanding the demand:  
How to effectively combat sex trafficking in the U.S.**

*Melissa I. M. Torres  
University of Houston*

*The global sex trade is a booming multi-billion dollar industry. Houston, Texas is considered the hub of human trafficking in the United States of America – a nation fast becoming a sex trafficking vehicle. According to the Department of Justice, the I-10 corridor has been identified as the main route utilized by traffickers today. In an attempt to break down their growing sex trade, Swedish legislators began to prosecute johns, the men who pay women for sex, with stricter sentences than those previously used to prosecute the women selling sex. This is based on the basic business model of Supply and Demand. The sex trade is growing because of the market that continues to demand women who will be paid for sexual services. This presentation proposes that key factors be examined through the model of Supply and Demand within a conceptual framework of distributive justice. Three different studies were assessed in efforts to see what anti-trafficking measures have worked elsewhere. Sexist stigmas are also looked at in order to gain a better understanding of why such a crime is capable of steadily growing without many being privy to the events taking place around their cities and within their borders.*

**From Bench to Practice:  
Translational Research with Hispanic Clients**

*David V. Flores  
University of Houston*

*Assessing and treating mental health conditions in Hispanics has never been more important. Hispanics—the largest minority group in the country—are impacted by high prevalence rates of substance abuse, depression, & anxiety. Hispanic female adolescents have among the highest suicide attempt rates of any group. Unfortunately, evidence based interventions and treatments are limited in this population. Other mental health conditions such as impulse-control disorders, dysthymia, and post-traumatic disorder are on the rise in Hispanics. Moreover, specific biological markers in some Hispanic populations have been linked to the development of psychotic disorders. Identifying and treating mental health conditions in this population is a critical public health imperative. In addition to increasing mental health needs, Hispanics face formidable barriers to access to care. Thirty-six percent of Hispanics do not have insurance or a usual source of care. Hispanics are disproportionately impacted by many health and mental health disparities, among them substance abuse, depression, anxiety, and metabolic syndrome, and are less likely to be properly diagnosed or to utilize mental health services. Despite efforts to collect information on Hispanics, questions remain regarding the validity of this data, under-reporting, and reliability. Race may also affect access to social programs such as health care, housing, and education, and the quality of healthcare that Hispanics receive. In the case of Hispanics, specifically those less acculturated, incorrect diagnoses of mental health conditions are common and may result in poorer quality of life or increases in morbidity and mortality. Despite efforts to eliminate health disparities, they are persisting and progressing in areas such as treatment utilization, adequacy of services available,*



*expenditures made, and diagnosis of psychological disorders. Today, problems remain in assessing Spanish-speaking Hispanics, and even English speaking Hispanics who may be strongly bicultural but adhere to more traditional Hispanic values. Although Hispanics are the fastest growing minority population and will become a third of the U.S. population by the year 2050 there is insufficient research on their clinical assessment, treatment, and utilization of mental health services. The growth of the Hispanic population underscores three important considerations. First, providers must understand Hispanic cultural perceptions of mental illness and mental health services. Second, identifying targeted strategies for improving access and utilization of mental health services by Hispanics is imperative. And third, developing and dissemination of culturally competent, evidenced based practice treatment approaches with Hispanic clients and their families is the only way to effectively serve this population. The importance of translational research and its dissemination among clinicians and the Hispanic population is imperative to the health of this growing population.*

### **Using Evidence-Based Practice for Effective Social Work**

*Holly Casciani, Jacquelynn Duron, Traber Giardina, and Elizabeth McIngvale  
University of Houston*

*Effective social work practice may be measured by improvements in the lives of individuals, families, and communities served. Evidence-Based Practice (EBP) meets this aim as a process for achieving targeted goals. One definition for outlining how EBP reflects translational research states that “EBP is a process in which practitioners attempt to maximize the likelihood that their clients will receive the most effective interventions possible by engaging in [a five-step model]” (Rubin & Parrish, 2007). The process of integrating EBP is presented in the context of history and refinement of the model stemming from evidence-based medicine. The five-step model includes: 1) asking a question, 2) finding the best evidence, 3) evaluating the evidence, 4) applying information in combination with clinical experience and patient values, and 5) evaluating outcomes. Research conducted to validate the Evidence-Based Practice Process Assessment Scale-Short Version is presented to discuss current application of EBP in practice.*