



UNIVERSITY OF MARYLAND
SCHOOL OF SOCIAL WORK

2007 Faculty Research Compendium

**UNIVERSITY OF MARYLAND
SCHOOL OF SOCIAL WORK
FACULTY RESEARCH COMPENDIUM**

AGING

Japanese and Korean Elders' Use of Traditional and Western Health Services in the U.S.: Cultural Values, Beliefs and Behaviors in Health Maintenance
Needs Assessment of the Mental Health Needs of the Elderly in Baltimore County
Social and Health Service Needs of Korean Older Adults in Howard County
The Effects of Appraised Caregiver Burden on the Utilization of Home and Community-Based Care among Primary Caregivers of Older Americans: Integrating the Health Behavioral and Caregiving Appraisal Models

CHILD WELFARE

A Study of the Impact of Long-term Abduction on Family Reunification
Assessment of Outcomes of Independent Living
Baltimore County DSS Aftercare Study
Child Abuse and Neglect Fellowships: Client Satisfaction, Resilience, Risk Assessment Training and Language Development
Child Welfare Accountability: Efficiency and Effectiveness of Child Welfare Services
Child Welfare Workforce Recruitment, Selection and Retention Study (Phase 1)
Cognitive-Behavioral Therapy for Physically Abused Children and Their Families
DHR Family Connections Program
Evaluating Programs and Services of the Woodbourne Center
Evaluation of Alabama's Implementation of a Family Centered Comprehensive Assessment Process for Children, Youth, and Families
Evaluation of Assisted Guardianship Demonstration Project
Evaluation of Child Welfare Managed Care Demonstration Project
Evaluation of the Excellence in Public Child Welfare Supervision Project
Evaluation of Family Facilitation in Prince George's County: A Longitudinal Follow-Up Study of Referred Cases
Exploring Experiences of a National Sample of Children in Foster Care
Exploring Screened out Reports of Child Abuse and Neglect in Maryland
Family Connections Family Strengthening Initiative
Family Connections with Intergenerational Families
Foster Care Court Workload Assessment
Foster Parent Reimbursement: Establishing Adequate and Reasonable Rates
Helping Families Prevent Neglect
Outcome Evaluation of a Therapeutic Visiting Pilot Project in Baltimore County
Perception of the Impact of Inadequate Funding on Child Welfare Decisions
Responding to Methamphetamine Using Families in Child Welfare
Review of Investigations of Suspected Instances of Child Abuse and Neglect in Out-of-Home Care
Supplemental grant to contribute to the cross-site evaluation of the replication of Family Connections

Systematic Review of Research on the Recruitment & Retention of Competent Child Welfare Staff

COMMUNITY DEVELOPMENT

Building and Bridging Diverse Neighborhoods in East Baltimore
Evaluation of the Grassroots Nonprofit Resource Mentoring Project
Target 21217: Building on the Success and Strengths of Community Resources to Improve the Lives of Youth and Families

CULTURE/DIVERSITY

Community Based Family Approach to Reducing Infant Mortality
Co-operative Planning Grant for Comprehensive Minority Cancer Services
Facilitating Access to Cancer Screening among Maryland Piscataway Conoy Tribe
Multicultural Organizational Development in Human Service Agencies
Program evaluation of services offered by the Evangelical Lutheran Church of America – Delaware Maryland Synod
The Effect of Religious Beliefs and Values on Gender, Roles, Identity, and Everyday Lives of Orthodox Jewish Women
The Maryland Regional Community Network Program to Eliminate Racial Disparities to Cancer Services
The Use of Traditional Chinese Culture and Values in Social Work Interventions in Hong Kong

EDUCATION

A Developmental – Relational Approach to Field Supervision
Assessing Child Welfare Competencies for Social Work Students Using Standardized Client Encounters
Educating Field Instructors about Students' Developmental Stages
Maternal and Child Health Center for Leadership in Public Health Social Work Education
Maternal and Child Health Social Work Leadership Training Program
Service Learning and Civic Engagement among Undergraduate Students
Social Work Doctoral Students' Experiences in Becoming Teachers
The Impact of Social Work Education on Critical Thinking Skills: A comparison of baccalaureate, masters and doctoral students
The Sexuality Content of Social Work Education Curricula

HEALTH

An Examination of an Ecological Model of Adjustment for Adolescent Siblings of Youth with Spina Bifida
Canadian Federalism and the Implementation of Provincial Health Care Plans
Control and Adherence Issues in Hypertension
HIV RISK REDUCTION AMONG LATINAS—PROJECT SEPA [SEPA:Salud, Educacion, Prevencion y Autocuidado, (Health, Education, Prevention and Self-Care)]
Hypertension Telemanagement in African Americans

MANDATED BENEFITS FOR CANCER/HEALTH INSURANCE COVERAGE FOCUS GROUPS

Maryland Mandated Cancer Insurance Benefits Focus Group
Maryland Patient Navigator Program Pilot Study
Patient Navigator Pilot Study
Person and Environmental Circumstances of Nursing Home Resident Fall Event (Pilot project)
Pregnancy Outcomes and Maternal Health
Project SAFe (Screening Adherence Follow-up)
Testing the effectiveness of adding a family treatment component to an existing support group for breast cancer patients experiencing post treatment fatigue
The Impact of Health Literacy, Social Support, Internet Use and Doctor Patient Relationships Relationship on Health Status and Health Service
U-56 Pilot Outreach Project-UMES
University of Maryland Center for Health Disparities Research, Training, and Outreach

HOMELESSNESS

Homeless Provider Survey of Primary Care Physicians in Maryland
Social Capital and the Homeless

HOUSING

Baltimore Affordable Housing Audit
Park Heights Healthy Homes Demonstration and Education Project

MENTAL HEALTH

A Family-Focused Intervention in the Treatment of Depression among African Americans
An Evaluation Study of the In-Home Intervention Project for Children in Five Maryland Counties
Internalized Stigma Pilot Project Description
Mental Health Services to Minority Persons with HIV/AIDS
Enhancing School-Based Mental Health Services for Inner-City Children and Families
Mental Health Promotion for Children and Adolescents in Foster Care in Schools

POLICY

The Federal Judiciary, the Supreme Court and the Issue of 'Death with Dignity': The Interface of Public Law and Bioethics
Long-Term Care Policy for Older Americans
Maryland Judiciary, Administrative Office of the Courts Collaborative Research Program – Evaluation of Truancy Courts in Maryland

SOCIAL WORK TREATMENT

Using qualitative methods to understand results from a group behavioral treatment intervention for persons with co-occurring disorders

SUBSTANCE ABUSE

Baltimore Needle Exchange Program Evaluation
An Assessment of the Needs for Treatment of Jewish Drug Abusers

Program for Drug Abusing Women

VICTIM SERVICES

Developing a Comprehensive Assessment and Evaluation System for Victim Services

AGING:

PROJECT NAME: Japanese and Korean Elders' Use of Traditional and Western Health Services in the U.S.: Cultural Values, Beliefs and Behaviors in Health Maintenance

ABSTRACT: The importance of complementary and alternative medicine (CAM) has increased as it is used in conjunction with conventional Western medicine by a growing number of people in the U.S. including older adults. The use of CAM is often culturally grounded in ethnic groups. Various Asian groups are known to use traditional healing methods rooted in their culture by relying on services provided by experts and self-care for the promotion of physical and mental health. Users of Eastern medicine have often reported benefits related to the holistic nature of health methods that attend to ailments of mind, body and spirit. Understanding such uses of traditional healing among older adults in ethnic minority groups is a salient issue due to the increase and diversification of older adults in the United States.

I will use an ethnographic approach and ask the following questions in this project: What are the health beliefs, values and behaviors of Japanese and Korean elders in the U.S. who use traditional health methods alone or combination with Western medicine? How do individual factors and their social environment affect their decision making in health care utilization? The social work profession can make a contribution by conducting culturally sensitive inquiries that help health care practitioners understand consumers' viewpoints as to motivations, perceptions and behaviors that are linked to the use of certain health care modalities. With better understanding concerning the patterns of health care use, providers can enhance health care delivery to ethnic older adults.

PRINCIPAL INVESTIGATOR: Mitsuko Nakashima, MSW, PhD

FUNDING SOURCE: John H. Hartford Foundation

AMOUNT OF FUNDING: \$100,000

PROJECT DATES: September, 2003 – August, 2005

PROJECT NAME: Needs Assessment of the Mental Health Needs of the Elderly in Baltimore County

ABSTRACT: A mental health needs assessment was conducted on the needs of the elderly in Baltimore County. Focus groups with current mental health providers (1 group) in Baltimore County and with persons currently using mental health services (4 groups), to better understand the salient issues related to the mental health needs of the elder.. A letter of invitation will be distributed to 2 community mental health centers and 2 congregate living residences selected by the BCBMH. The focus groups will center on to develop an understanding of the perceptions of the existing mental health services, barriers to accessing the existing services, and identifying areas of unmet needs.

PRINCIPAL INVESTIGATOR: Carmen Morano, PhD

Co-Investigator: Bruce R. DeForge, PhD

FUNDING SOURCE: Baltimore County Bureau of Mental Health (BCBMH).

AMOUNT OF FUNDING: \$11,000

PROJECT DATES: 2002

PRODUCTS:

Final Report

Morano, C.L. & DeForge, B.R. (2004). The views of older community residents toward mental health problems. *Journal of Mental Health and Aging, 10(1)*, 45-64.

Morano, C.L. & DeForge, B.R. (2002). *Mental Health Needs of Baltimore County Elders*. Final Report to Baltimore County Bureau of Mental Health.

PROJECT NAME: Social and Health Service Needs of Korean Older Adults in Howard County

ABSTRACT: The purpose of this study was to understand health and social service needs of older Koreans in Howard County, Maryland. Data for this study were collected through running 6 focus group interviews with older adults, caregivers and community leaders and service providers. Using constant comparative method assisted by Atlas-ti, a qualitative research software, the data were analyzed. The study participants defined themselves as “pure Koreans” who showed relatively high adherence to the norm and behavioral patterns of Korean culture. What elderly Koreans in Howard County wished was not too different from what their Caucasian counterparts aspired to have in their old age; that is being able to do what they want without being a burden to others, particularly to their offspring. Due to various changes associated with aging and immigration (e.g., language barrier, transportation difficulties, inability to afford services, declines in physical and cognitive functions, generational differences in the level of acculturation), many older adults could not do what they wanted freely and often forced to rely on other people to provide for their needs. Through the help of their informal support networks (e.g., spouse, children, grandchildren, friends), they had managed to provide for their needs at the cost of emotional distress. Older Korean residents in Howard County, thus, suggested bilingual social workers, bilingual staff members at public offices and Korean service agency were most needed in order to provide for their needs without relying on their offspring in particular and to protect their sense of well-being.

PRINCIPAL INVESTIGATOR: Mitsuko Nakashima, PhD

FUNDING SOURCE: DRIF

AMOUNT OF FUNDING: Approximately \$15,000

PROJECT DATES: July 2004 – December 2005

PROJECT NAME: The Effects of Appraised Caregiver Burden on the Utilization of Home and Community-Based Care among Primary Caregivers of Older Americans: Integrating the Health Behavioral and Caregiving Appraisal Models

ABSTRACT: Using a conceptual framework that integrated the caregiving appraisal model into the health behavioral model, this study examined how predisposing characteristics, care-recipient’s needs, enabling factors, objective burden, subjective burden, and system linkage contributed to the utilization of eight types of home and community-based care (HCBC) among caregivers of older Americans. The study used 1999 National Long-Term Care Survey and included a total sample of 1,082 caregiving dyads in the community. Utilization rates varied and

ranged from 33% for personal/nursing care to 4% for support group. The model was significant for all types of HCBC; however, hierarchical logistic regression showed a great variation in their predictive patterns. Albeit at different level, inclusion of caregiver burden-related variables improved the predictability of all types of HCBC utilization. Knowledge of services was also found to have a significant main effect on the utilization of all types of HCBC.

PRINCIPAL INVESTIGATOR: Banghwa Lee Casado

FUNDING SOURCE: The John A. Hartford Foundation, Doctoral Fellows Program

AMOUNT OF FUNDING: \$40,000

PROJECT DATES: September 2004 to August 2006

PRODUCTS:

Casado, B.L. (2006). The effects of appraised caregiver burden on the utilization of home and community-based care among primary caregivers of older Americans: Integrating the health behavioral and caregiving appraisal models. Unpublished doctoral dissertation, University of Houston

CHILD WELFARE:

PROJECT NAME: A Study of the Impact of Long-term Abduction on Family Reunification

ABSTRACT: Ten people who were missing for over five years due to either a family or a non-family abduction will be interviewed about their experiences with reunifying with their family members. Family members may also be interviewed. The purpose is to learn what can help the reunification process after a lengthy separation and to explore where implications can be developed for family theory in relation to reunification.

PRINCIPAL INVESTIGATOR: Geoffrey Greif, PhD, University of Maryland School of Social Work

FUNDING SOURCE: National Center for Missing and Exploited Children

AMOUNT OF FUNDING: \$29,500

PROJECT DATES: May 2007 - May 2008

PROJECT NAME: Assessment of Outcomes of Independent Living

ABSTRACT: The Outcomes of Independent Living project was a collaborative research project between the University of Maryland Center for Families, the Family Welfare Research and Training Group, and the Baltimore City Department of Social Services. The purpose of this project was to provide information on the outcomes of young adults who left out-of-home care in Baltimore City. Choice of outcomes was guided by the federal legislation in collaboration with Baltimore City Department of Social Service staff. The outcomes of interest included educational achievement, employment status, homelessness, parenthood, life skills, health risk behavior and criminal activity.

Explanatory domains examined included social support, spirituality, and stress.

A single cross-sectional study was conducted to assess the outcomes of a cohort of 186 young adults who left the out-of-home care of the Baltimore City Department of Social Services between October 1, 1999 and September 30, 2000. Administrative data related to employment and public assistance was collected for the 186 young adults. A computer-assisted self-

administered interview was also used to collect outcome data related to self-sufficiency including: educational attainment, employment, housing, parenthood, life skills, health care access, health risk behavior, drug abuse, and criminal activity. Descriptive findings of this study are similar to those from other studies of independent living outcomes. The cross-sectional design of this project prevented examination of causal relationships between outcomes and explanatory domains. Nevertheless, findings suggest that young adults may benefit from support in the following areas as they transition from out-of-home care to adulthood: housing, education, and employment. In addition, the findings provide additional support for the assertion that social support systems, both familial and peer, may play critical roles during this transition.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD

FUNDING SOURCE: Baltimore City Department of Social Services

AMOUNT OF FUNDING: \$128,523

PROJECT DATES: 2001 – 2003; 2003-Present (Secondary data analysis)

PRODUCTS:

Final Report

DePanfilis, D., & Daining, C. (2003). *Assessment of outcomes of independent living final report*. Study funded by Baltimore City Department of Social Services. Baltimore, MD: University of Maryland School of Social Work, Center for Families and Family Welfare Research and Training Group.

Dissertation:

Daining, C. (2005). *Resilience of Youth in Transition from Out-of-Home Care to Adulthood*. Doctoral Dissertation. University of Maryland School of Social Work.

Selected Presentations:

DePanfilis, D. Outcomes of Independent Living Project. *Presentation at the DSS Social Services Administrators Meeting*. Baltimore, February 25, 2003.

DePanfilis, D. Outcomes of Independent Living Project. *Presentation at the Independent Living Program Workgroup Meeting*. Baltimore, April 3, 2003.

Peer Reviewed Presentation

Daining, C. & DePanfilis, D. Resilience of Youth in Transition from out-of-Home Care to Adulthood. Presentation planned for the *2007 Annual Conference of the Society for Social Work and Research*, San Francisco, January 11-16, 2007.

Peer Reviewed Paper

Daining, C, & DePanfilis, D. (2007). Resilience of youth in transition from out-of-home care to adulthood. *Children & Youth Services Review*, 29, 1158-1178.

PROJECT NAME: Baltimore County DSS Aftercare Study

ABSTRACT: The Baltimore County DSS Aftercare Study was a collaborative research project between the University of Maryland Center for Families and the Baltimore County Department of Social Services. The project was designed to develop protocols for an exit summary/case review, a six-month follow-up interview, and an annual follow-up for 5 year with young adults who have left foster care/ kinship care. The outcomes of the project are guided by the Foster Care Independence Act of 1999. Both case record data and self-report data will be collected on outcomes including: avoidance of dependency, homelessness, non-marital childbirth, educational achievement, criminal activity, and high-risk behavior. The Center for Families also helped BCODSS develop a data system to facilitate data collection and management.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD
FUNDING SOURCE: Baltimore County Department of Social Services
AMOUNT OF FUNDING: \$24,916
PROJECT DATES: 2002-2003

PROJECT NAME: Child Abuse and Neglect Fellowships: Client Satisfaction, Resilience, Risk Assessment Training, and Language Development

ABSTRACT: This project provides fellowships for one faculty member and three doctoral student candidates to conduct research in child abuse and neglect. The four projects focus on different aspects of child maltreatment, including: 1) client satisfaction of foster parents who have received services from a local department of social services compared with those receiving services from a child welfare managed care entity; 2) identification of personal and interpersonal factors that contribute to resiliency of young adults who have left out-of-home care; 3) examination of the effectiveness of providing enhanced risk assessment training for department of social services employees; and 4) predictors of language development for children and youth who are in out-of-home care. Three projects will be completed using secondary data from projects conducted with foster care samples from a large urban jurisdiction. The fourth project will use an experimental design to test the effectiveness of providing enhanced risk assessment training to the social services agency employees who work with the foster care samples included in the other three projects. In combination, the four projects will contribute to policy, research, and practice in the area of child maltreatment and child welfare, especially as it applies to large urban jurisdictions that primarily serve minority populations.

PRINCIPAL INVESTIGATOR: Donna Harrington, PhD
FUNDING SOURCE: USDHHS, Administration for Children and Families, 90-CA-1723
AMOUNT OF FUNDING: \$130,000
PROJECT DATES: 2003 – 2005

PROJECT NAME: Child Welfare Accountability: Efficiency and Effectiveness of Child Welfare Services

ABSTRACT: The Maryland Child Welfare Accountability Act of 2006 requires that Maryland Department of Human Resources (DHR) develop and implement a system of accountability to measure the efficiency and effectiveness of certain child welfare services. The development of a quality assurance process was mandated for Maryland following the Federal Child and Family Services Review of child welfare services in 2003. As mandated by the Maryland legislation, in January 2007 the University of Maryland School of Social Work entered into a Memorandum of Understanding (MOU) with DHR to serve as the "entity with expertise in child welfare practices" to collaborate on key quality assurance and data analysis tasks as specified in the bill. Specifically, the bill requires that the consulting entity (UMB) collaborate with DHR on: 1) measurement of the efficiency and effectiveness of Maryland's child welfare system; 2) guidance on the quality assessment process developed by DHR; 3) collection and analyses of data collected by local departments; and 4) reports and analyses related to key child welfare outcomes required at the federal, state, and organizational level.

This collaboration includes technical review of DHR processes, consultation on existing quality assurance measures, and analysis of existing child welfare data available through Maryland's Children's Electronic Social Services Information Exchange (CHESSIE) system. This process

fulfills Federal mandates to develop quality assurance processes for the delivery of child welfare services. The purpose of this collaboration between DHR and UMB/SSW is to result in the implementation of an outcome-based system of accountability for measuring the efficiency and effectiveness of child welfare services for children and families in the State of Maryland as required by Federal law.

Objectives are: 1) to assess the current quality assurance process currently utilized by DHR's QA department and local social service sites; 2) to assist with the implementation of streamlined data collection, analysis, and reporting processes; 3) to provide technical consultation on QA processes including but not limited to a) development of computerized data collection instruments for on-site reviews, b) development of reports to stakeholders and local sites, c) selection of indicators for child welfare outcomes, d) on-site interview and review processes.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD

CO-INVESTIGATORS: Cathy Born, PhD, Sarah Kaye Faraldi, PhD, R. Anna Hayward, MSW, Terry Shaw, PhD.

FUNDING SOURCE: Maryland Higher Education Commission (MHEC)

AMOUNT OF FUNDING: \$433,072

PROJECT DATES: 1/1/2007 - 12/31/2007

PROJECT NAME: Child Welfare Workforce Recruitment, Selection and Retention Study (Phase 1)

ABSTRACT: Child welfare agencies need to identify and implement effective strategies to recruit and retain well-qualified staff that has the knowledge, skills and commitment to provide services to our nation's most vulnerable children and families. A first step in this process is a thorough understanding of the current workforce situation regarding qualifications, turnover rate, selection and retention strategies, and specific factors contributing to turnover and retention. This multi-method study is being conducted in collaboration with an advisory committee comprised of representatives from the Maryland Department of Human Resources and local Departments of Social Services across the state of Maryland.

PRINCIPAL INVESTIGATOR: Karen Hopkins, PhD

FUNDING SOURCE: Maryland Department of Human Resources

AMOUNT OF FUNDING: \$434,879

PROJECT DATES: July 2006 – July 2007

PRODUCTS:

Final Report

Hopkins, K., & Cohen-Callow, A. (2007). Maryland child welfare workforce recruitment, selection and retention study final report. Baltimore, MD: University of Maryland School of Social Work

PROJECT NAME: Cognitive-Behavioural Therapy for Physically Abused Children and Their Families

ABSTRACT: Because the prevalence of physical abuse is high and the consequences of maltreatment potentially harmful, effective treatment is important. Past non-systematic reviews of the literature have indicated that cognitive-behavioral treatment may be an effective strategy with families in which physical abuse has occurred. The objective of this study is to evaluate the effectiveness of cognitive behavioural therapy with parents who have perpetrated non-accidental physical abuse of their children on preventing the recurrence of physical child

maltreatment. This study is a collaboration between the University of Maryland School of Social Work's Center for Families, The Nordic Campbell Center of The Danish National Institute of Social Research, and the Virginia Commonwealth University School of Social Work.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, Ph.D.

Co-Investigators: Mogens Christoffersen, MSc, Jacqueline Corcoran, PhD, Clara Daining, PhD

FUNDING SOURCE: Nordic Campbell Center, The Danish National Institute of Social Research

AMOUNT OF FUNDING: \$12,000

PROJECT DATES: 09/15/05 – 12/30/07

PROJECT NAME: DHR Family Connections Program

ABSTRACT: University of Maryland Family Connections Program continues to serve families and their children as well as grandparent-headed households and their children residing in Baltimore City, now funded in part by the Department of Human Services. Services, including in-home clinical activities and group work, are provided by staff and interns supervised by clinical faculty members of the University of Maryland, School of Social Work Title IV-E Education for Public Child Welfare Program and program staff. Best practices intervention strategies are implemented based on the utilization of comprehensive clinical assessments and individualized service plans through the integration of standardized client-driven instruments and practitioner observations. The information will be used in the development of services, in partnership with the families, and in evaluating program outcomes. A major project deliverable will be a final summary report containing a narrative description of the project, summary data for the entire grant period and recommendations for "best practices."

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD, University of Maryland School of Social Work

CO-INVESTIGATORS: Fred Strieder, PhD and Clara Daining, PhD

FUNDING SOURCE: Maryland Department of Human Resources, Social Services Administration

AMOUNT OF FUNDING: \$ 268,701

PROJECT DATES: 7/1/2007-6/30/2008

PROJECT NAME: Evaluating Programs and Services of The Woodbourne Center

ABSTRACT: The Woodbourne Center is one of the oldest child welfare organizations in the country. Currently, this agency provides a variety of services including treatment foster care, residential treatment for adolescents and juvenile sex offenders, diagnostic and assessment services, and short-term respite care for youth in crises. Evaluation efforts will focus on several projects, including an assessment of the population served in these programs, trends in youth needs over time, and the research evidence for the program's treatment model of restorative practices and aggression replacement training. Exploratory work for future research will also be conducted.

PRINCIPAL INVESTIGATOR: Bethany Lee

FUNDING SOURCE: The Woodbourne Center

AMOUNT OF FUNDING: \$25,000

PROJECT DATES: September 2007-August 2008

PROJECT NAME: Evaluation of Alabama's Implementation of a Family Centered Comprehensive Assessment Process for Children, Youth, and Families

ABSTRACT: The Ruth H. Young Center (RYC) for Families and Children, in collaboration with ACTION for Child Protection and the Alabama Department of Family Services (state and local agency representatives), will evaluate the effectiveness of Alabama's Using Comprehensive Family Assessments to Improve Child Welfare services. The evaluation will include process, practice, and outcome components. A quasi-experimental nonequivalent comparison group design will be used to evaluate the effectiveness of the Protective Capacity Family Assessments (PCFA) as implemented in three pilot counties compared to three matched sites where the standard comprehensive family assessment and individualized service plan practices are implemented. The purpose of this evaluation is to implement a process, practice, and program evaluation of the Alabama Comprehensive Assessment Process (CAP). The mixed-method evaluation will use administrative and archival data; interviews with workers, supervisors, and other stakeholders; and integrate the evaluation of the process and outcomes in Alabama's ongoing Child and Family Services Review process.

PRINCIPAL INVESTIGATOR: Diane DePanfilis

CO-PRINCIPAL INVESTIGATORS: Sarah Kaye Faraldi & Terry Shaw

FUNDING SOURCE: ACTION for Child Protection under contract with the Alabama Department of Family Sources by Cooperative Agreement with the US Department of Health and Human Services, Administration for Children & Families

AMOUNT OF FUNDING: \$149, 205 per year for five years for a total of \$746,025

PROJECT DATES: November 2007 – September 2012

PROJECT NAME: Evaluation of Assisted Guardianship Demonstration

Project

ABSTRACT: The Guardianship Assistance Project is a 5 year study evaluating the effects on children, caregivers, and Maryland's child welfare system of providing a \$300.00 a month subsidy to relative caregivers who pursue the permanency plan of Custody and Guardianship of children in their care.

PRINCIPAL INVESTIGATORS: Donna Harrington, PhD (7/1/00 through 12/31/03)
Malinda Orlin, PhD (6/1/98 through 6/30/00)

FUNDING SOURCE: Maryland Department of Human Resources Social Services
Administration

AMOUNT OF FUNDING: \$1,170,224

PROJECT DATES: 1998 – 2003

PRODUCTS:

Final Report

Harrington, D., et al. (2003). *Maryland Subsidized Guardianship Demonstration Project Evaluation Final Report*. Submitted to the Maryland Department of Human Resources. Baltimore, MD: University of Maryland School of Social Work. (Contract # DHR SSA/OSS-98-008).

Selected Presentations

Mandell, M. B., Harrington, D., & Orlin, M. (November, 2001). The effect of subsidized guardianship on exits from kinship care: Results from Maryland's Guardianship Assistance Demonstration Project. Presented at the 23rd Annual APPAM Conference, November 1-2, 2001, Washington, DC.

Hong, G., Mandell, M. Harrington, D., & Warren, D. (January 2004). Exit rates and exit types for foster care children in a managed care delivery system. To be presented at the Society for Social Work Research (SSWR) Conference, January 2004.

Smith, P. L., Okundaye, J. N., & Harrington, D. (May 2002). The Training Process of the Maryland Guardianship Assistance Project (GAP): Effective Procedures for Multidisciplinary Collaborations. Presented at APSAC's 10th National Colloquium, May 29 – June 1, 2002, New Orleans, LA.

PROJECT NAME: Evaluation of Child Welfare Managed Care Demonstration

Project

ABSTRACT: The Child Welfare Managed Care Demonstration Evaluation Project is a 4 year study evaluating whether a managed care delivery system will have a positive impact on finding permanent homes and reducing length of stay of children in foster care.

PRINCIPAL INVESTIGATOR: Donna Harrington, PhD (7/1/00 through 11/30/03)

Co-Investigator(s): Donna Harrington, PhD (12/1/99 through 6/30/00)

FUNDING SOURCE: Maryland Department of Human Resources Social Services
Administration

AMOUNT OF FUNDING: \$1,454,292

PROJECT DATES: 1999 – 2003

PRODUCTS:

Refereed Journals

Lawrence-Webb, C., Feild, T., & Harrington, D. (In press). Permanency for children: An organizational analysis of first year start-up issues in a child welfare managed care organization. *Children and Youth Services Review*.

Selected Presentations

Hisle-Gorman, E., Panchanadeswaran, S., & Harrington, D. (January, 2002). Screening protocol for child maltreatment risk and reporting in evaluation research. Presented at the San Diego Conference on Child and Family Maltreatment, January 21-25, 2002, San Diego, CA.

PROJECT NAME: Evaluation of the Excellence in Public Child Welfare Supervision Project

ABSTRACT: Most child welfare experts agree that the key to competent provision of public child welfare services is the level of expertise and skill of the line supervisor. This is especially important when child welfare workers lack professional training, or even when professionally trained, but inexperienced social workers have not had specific preparation for public child welfare practice. Supervisors are the primary conduit for establishing and maintaining agency culture, maintaining practice standards, and ensuring that models of service delivery are implemented. In addition, supervisors tend to have longer tenure on the job than line workers, more focus and commitment to aggregate outcomes for families and children, and the potential to influence the practice of numerous practitioners. Investment in the development of supervisory resources is, therefore, one of the best investments for workforce development. The University of Maryland School of Social Work is designing, implementing, and evaluating an MSW professional education project with the purposes of (1) preparing 35 current public child welfare practitioners for future supervisory, leadership, and management roles in the public child welfare system; (2) providing a forum, process, and content (values, knowledge, skill competencies) resulting in the implementation of a competency-based public child welfare supervisory curriculum and field instruction program in the MSW program; and (3) providing child welfare supervisory strategies to improve child welfare outcomes. The Center for Families staff, as evaluators of the project, are implementing data collection of outcomes measures in an effort to assess the effectiveness of the specialized training received by the MSW students.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, Ph.D.

CO-INVESTIGATORS: Clara Daining, PhD, R. Anna Hayward, MSW.

FUNDING SOURCE: U.S. Department of Health and Human Services, Administration on Children, Youth, and Families, Children's Bureau

AMOUNT OF FUNDING: \$40,000

PROJECT DATES: 2004-2008

PROJECT NAME: Evaluation of Family Facilitation in Prince George's County: A Longitudinal Follow-Up Study of Referred Cases

ABSTRACT: The purpose of this project is to evaluate the impact of family facilitation (FF) in child protective services, family preservation, and foster care cases in terms of child safety and permanence among a sample of families involved with Prince George's County Department of Social Services (DSS). Family facilitation is a process that includes family and community members in decision-making around placement issues. The specific questions involved in this study measure whether involvement in family facilitation impacts rates of recidivism and out of home placement for families served by the child welfare system.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD
CO-INVESTIGATORS: Joy Swanson Ernst, PhD, Bethany Lee, PhD
PROJECT DATES: July 1 2007 to June 30 2008

PROJECT NAME: Exploring Experiences of a National Sample of Children in Foster Care

ABSTRACT: Every year, approximately 500,000 children are placed in foster care. These children often experience numerous placements, various levels of service provision, and several moves between foster homes and more restrictive settings (e.g., group homes, institutional facilities, and residential treatment facilities). This study seeks to develop a clearer understanding of the multiple pathways foster youth take by conducting secondary data analysis on the population of children served in foster care. Records of the approximately 500,000 children who were served are contained in the Adoption and Foster Care Analysis and Reporting System (AFCARS) dataset made available to the public by the National Data Archive on Child Abuse and Neglect (NDACAN).

PRINCIPAL INVESTIGATOR: Diane DePanfilis, Ph.D.

CO-INVESTIGATOR: R. Anna Hayward, MSW

FUNDING SOURCE: Unfunded

PROJECT DATES: 2004 – Present

PRODUCTS

Peer Reviewed Paper:

Hayward, R. A., & DePanfilis, D. (2007). Foster children with an incarcerated parent: Predictors of reunification. *Children & Youth Services Review, 29*, 1320-1334.

PROJECT NAME: Exploring Screened out Reports of Child Abuse and Neglect in Maryland

ABSTRACT: As an effort to explore the degree to which screening practices and decision are consistent with state policies (DHR, 1996), a collaborative evaluation was undertaken by the Department of Human Resources (DHR) Social Services Administration (SSA), the State Council on Child Abuse and Neglect (SCCAN), and the University of Maryland Center for Families (UMCFF). Each of 24 local Maryland jurisdictions were asked to submit copies of all referrals received in their jurisdiction during one month in 2001. Twenty-three jurisdictions submitted copies of their screened out referrals for May 2001 and Baltimore City Department of Social Services submitted all screened out referrals for November 2001. Data regarding the number of investigated CPS reports each jurisdiction received during those same months were also collected from the state wide Client Information System (CIS). IN all, 5,023 referrals were received by CPS agencies during the one-month study period and 1,811 referrals were screened out (an average of 36%). Findings of the study indicate that most of the time (82%), the correct screening decision was made.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD

FUNDING SOURCE: Maryland Department of Human Resources.

AMOUNT OF FUNDING: \$13,103

PROJECT DATES: 2001 – 2002; 2002-Present (secondary data analysis)

PRODUCTS:

Summary Report:

Maryland State Council on Child Abuse and Neglect (2003). Research Committee Report. *Child Protection Annual Report* (pp. 9-11). Baltimore: author. Available at www.dhr.state.md.us/crbc/pdf/child02.pdf.

Peer Reviewed Presentation:

Hayward, R. A., Woodruff, K., & Berry, S. Exploring CPS screening decisions at the local level: Characteristics associated with quality decisions. 10th National Data and Technology Conference, Making IT work: Linking data to practice and outcomes. Washington, DC, July 18-20, 2007.

PROJECT NAME: Family Connections Family Strengthening Initiative

ABSTRACT: The University of Maryland, Baltimore - Center for Families, Family Connections Program evaluated the process and outcomes of implementing the Strengthening Multi-Ethnic Families and Communities: A Violence Prevention Parent Training Program (SMEFC) with families at risk of child neglect. Families resided in the West Baltimore Empowerment Zone that is comprised of distressed neighborhoods filled with high levels of crime, violence, and substance abuse. In addition to the opportunity to participate in the SMEFC program, families received home-based intervention consisting of emergency assistance, individualized home-based counseling services, and service facilitation/ coordination. The intervention was designed to help families increase child safety and well-being and prevent child neglect within their families. It was hypothesized that this combination of services individualized to each family's specific strengths and needs, would reduce risk factors and increase protective factors, ultimately leading to the achievement of two outcomes: child safety and child wellbeing. A pretest-posttest nonequivalent groups quasi-experimental design was used to compare data on risk and protective factors and outcomes collected at baseline and case closure. Families in the intervention group that received home-based intervention and the family strengthening group were compared to two comparison groups that received home-based services only. Repeated measures analyses were conducted to test hypotheses that examined whether situational risk factors decreased over time, whether protective factors increased over time, and whether child safety and well-being outcomes increased over time. Analyses also compared risk and protective factors and outcomes between families who received home-based services and the SMEFC group with those who received home-based services only. Results indicated reduction in depressive symptoms and everyday stress for the group as a whole. Related to child safety, observational measures completed by social work interns indicated positive changes to physical and psychological care of children. Significant positive changes were observed in increases in seriousness scores (meaning more positive functioning) with respect to overcrowded household and arrangements for substitute care. Improvements in psychological care were noted with respect to caregiver consistency of discipline and caregiver teaching/stimulating of children. Related to child well-being, repeated measures suggested statistically significant decreases in home behavior as observed by interns. Overall, there were minor differences noted between families who received the SMEFC and home-based services compared to families who received home-based services alone but small sample sizes suggests the need to further explore these differences with larger samples.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD

FUNDING SOURCE: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention

AMOUNT OF FUNDING: \$173,347

PROJECT DATES: 1999 – 2002, 2002-Present (secondary data analysis)

PRODUCTS:

Final Report

DePanfilis, D. (2002). *Family Connections' family strengthening initiative final report*. Study funded by the U.S. Department of Health and Human Services, Substance Abuse Mental Health Services Administration, Center for Substance Abuse Prevention. (Cooperative agreement 1 UD1 SPO8766). Baltimore, MD: University of Maryland School of Social Work.

Refereed Paper:

DePanfilis, D., Okundaye, J., Glazer-Semmel, E., Kelly, L., & Swanson-Ernst, J. (2002). PRINCIPALS of the strengths perspective: Views from families and providers. *Family Preservation Journal*, 6(2), 1- 14.

Selected Presentations

(All available on the Family Connections Web site at www.family.umaryland.edu)

Glazer-Semmel, E. Strengths-Based Practice: A Community Speaks. *The Ninth National Colloquium of the American Professional Society on the Abuse of Children*. Chicago, OH June 2002.

Glazer-Semmel, E. M., Strengths-based practice: A community speaks. *Ninth National Colloquium of the American Professional Society on the Abuse of Children*, Washington, DC, June 20-23, 2001.

Glazer-Semmel, E. Strengths based practice: A community speaks. 9th Annual Governor's Conference on Child Abuse and Neglect. Baltimore, April 25-26, 2002.

Glazer-Semmel, E., & Sullivan, K. Strengthening multi-ethnic families and communities: A promising group model to enhance prevention. 9th Annual Governor's Conference on Child Abuse and Neglect.

Baltimore, April 25-26, 2002.

PROJECT NAME: Family Connections with Intergenerational Families

ABSTRACT: The University of Maryland, Baltimore - Center for Families will (1) replicate the deemed effective Family Connections (FC) program with intergenerational families who are at risk for neglect and (2) compare the relative and cost effectiveness of no treatment versus FC 3-month, FC-6 month, or FC- 6 month enhanced with legal and health services. **Design:** Using an experimental dismantling design, 200 eligible families will be randomly assigned to either no treatment or one of three FC intervention groups. Process and outcomes will be described and compared between groups.

Intervention: Social work services will be provided by MSW interns at Family Connections; health services will be delivered by the UMB School of Nursing; and legal services will be provided by law interns in the UMB Law School. **Teams:** A community advisory committee representing professionals, consumers, and intergenerational and faith based organizations will provide technical assistance on the implementation of the project. A research team will provide advice about the final selection of measures and the collection of cost data, confirm data analyses plans, and provide input to procedures for ensuring the fidelity of program implementation. An administrative team will ensure the accomplishment of all goals, objectives, and tasks. **Analyses:** Repeated measures, cost effectiveness, and cost-benefit analyses will be used to compare risk and protective factors and outcomes for all groups at 12 months following entry into the

program. **Expected Results:** It is hypothesized that families that receive any FC intervention will have greater change over time in risk and protective factors than families that receive no intervention. It is further predicted that enhanced FC will more likely lead to child safety, well-being, and permanency outcomes than any other intervention combination. **Dissemination:** Information about process and outcomes will be provided on a project web site throughout the 60-month project implementation.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD

CO-PRINCIPAL INVESTIGATOR: Clara Daining, PhD

FUNDING SOURCE: U.S. Department of Health and Human Services, Administration on Children, Youth, and Families, Children's Bureau

AMOUNT OF FUNDING: \$1,575,001 (US. DHHS) & \$195,000 (Annie E. Casey Foundation)
(9/30/03-9/29/08)

PROJECT DATES: 9/30/03-9/29/08

PROJECT NAME: Foster Care Court Workload Assessment

ABSTRACT: This study is to provide an assessment of judges and other judicial personnel required to efficiently and fairly process child welfare cases. Focus groups with judges, masters, lawyers and clerks in child welfare will be utilized.

PRINCIPAL INVESTIGATOR: Corey Silberstein Shdaimah, L.L.M., PhD.

FUNDING SOURCE: State of Maryland's Administrative Office of the Courts Foster Care Court Improvement Project.

AMOUNT OF FUNDING: \$14,729

PROJECT DATES: 2006-2007

PROJECT NAME: Foster Parent Reimbursement: Establishing Adequate and Reasonable Rates

ABSTRACT: This study, a collaboration between the University of Maryland School of Social Work, Children's Rights, and the National Foster Parent Association implemented methods to estimate costs associated with reimbursing foster parents for adequately meeting the basic needs of foster children in their care. The Adoption Assistance and Child Welfare Act of 1980 provides federal funding for foster care to the states if they meet certain requirements under a plan that must first be approved by the Secretary of the US Department of Health and Human Services. Among the state plan requirements that states must meet is that foster parents be provided foster care maintenance payments which the law defines as: "payments to cover the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, liability insurance with respect to a child, and reasonable travel to the child's home for visitation." Consumer Expenditure Survey data were used to develop templates for estimating costs to meet basic needs in each of these categories considering differential costs based on child's age and geographic location. The proposed "Minimum Adequate Rates for Children" (MARC) developed for each state and the District of Columbia based on cost of living adjustments. The proposed MARC for each jurisdiction may be used as a resource for adjusting base rates that meet the actual estimated costs of meeting the basic needs of children in foster care.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, Ph.D.

CO-INVESTIGATORS: Clara Daining, Ph.D. and Kevin Frick, Ph.D.

FUNDING SOURCE: Children's Rights Inc via support from the Annie E. Casey and the Ira W. DeCamp Foundations

AMOUNT OF FUNDING: \$74,072

PROJECT DATES: 2005 – 2007

PRODUCTS

Final Report:

DePanfilis, D., Daining, C., Frick, K., Farber, J., & Levinthal, L. (2007). *Hitting the M.A.R.C. Establishing foster care Minimum Adequate Rates for Children, Technical Report*. New York: Children's Rights, Inc.

DePanfilis, D., Daining, C., Frick, K., Farber, J., & Levinthal, L. (2007). *Hitting the M.A.R.C. Establishing foster care Minimum Adequate Rates for Children*. New York: Children's Rights, Inc.

Presentation:

Farber, Julie, DePanfilis, D., & Jorgenson, K. *Hitting the M.A.R.C., Establishing Foster Care Minimum Adequate Rates for Children*. Congressional Briefing, Washington, DC, Rayburn House Office Building, October 3, 2007.

PROJECT NAME: Helping Families Prevent Neglect

ABSTRACT: The Helping Families Prevent Child Neglect Project was a 5-year demonstration project implemented through collaboration between the University of Maryland School of Social Work, and University of Maryland School of Medicine, Pediatrics. The Helping Families Prevent Child Neglect Project offered home-based intervention to families at risk of neglect in order to test two premises: (1) treatment needs to be long-term and (2) parent groups enable needed connections and enhance parenting competency. Families enrolled in the Helping Families Prevent Child Neglect Project were randomly assigned to intervention groups that varied in terms of length of services (3 months vs. 9 months). Services were provided by the Center for Families Family Connections (FC) program FC integrated the following nine practice PRINCIPALS in their service delivery: community outreach, family assessment and tailored interventions, helping alliance, empowerment approaches, strengths perspective, cultural competence, developmental appropriateness, outcome-driven service plans, and emphasis on positive attitudes and qualities of helpers. The logic model that guided this evaluation suggests that locating in a high risk community; collaborating with formal and informal community organizations; attending to emergency and concrete needs; and providing individualized, strengths based intervention and social support will increase protective factors and decrease risk factors that will eventually lead to increased child safety and child well being. The study cohort included 154 caregivers and their families within the West Baltimore Empowerment Zone with children who were between the ages of 5 and 11. These caregivers were referred to Family Connections through their local community (schools, clinics, hospitals, community organizations, and self). Results of repeated measures analyses on data collected at intake, case closure, and 6 months following case closure suggested significant change over time for both groups: (1) reduction of risk factors (e.g., parental depressive symptoms, life stress, parenting stress); (2) increase in protective factors (e.g., social support, parenting attitudes, parenting satisfaction); (3) increase in child well-being (decrease in internalizing and externalizing child behavior); and (4) increase in child safety (improvements in physical and psychological care of children). Families who received intervention for 9 months experienced significantly greater change in two domains: parental depressive symptoms and child behavior. However, families who received longer services were somewhat less satisfied with services than families served for shorter periods of time.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD, MSW

Co-Investigators: Howard Dubowitz, MD, MS, University of Maryland School of Medicine, Esta Glazer-Semmel, LCSW

FUNDING SOURCE: U.S. Department of Health and Human Services, Administration on Children, Youth, and Families, Children's Bureau

AMOUNT OF FUNDING: \$650,000

PROJECT DATES: 1996 – 2002

PRODUCTS:

Final Report

DePanfilis, D. (2002). *Helping families prevent neglect final report*. Study funded by the U.S. Department of Health and Human Services, Children's Bureau 1996-2002 (Grant Number 90CA1580). Baltimore, MD: University of Maryland School of Social Work. Available on the Family Connections Web site at www.family.umaryland.edu/research/index.html.

Refereed Papers:

DePanfilis, D., Dubowitz, H., & Kunz, J. (Accepted, October 2007). Assessing the cost-effectiveness of Family Connections. *Child Abuse & Neglect*.

Girvin, H., DePanfilis, D., & Daining, C. (2007). Predicting program completion among at-risk families enrolled in a social work child neglect prevention intervention. *Research on Social Work Practice, 17*, 674-685.

DePanfilis, D., & Dubowitz, H. (2005). Family Connections: A program for preventing child neglect. *Child Maltreatment, 10*, 108-123.

Swanson Ernst, J., Meyer, M., & DePanfilis, D. (2004). The effects of structural characteristics of housing on adequacy of physical child care: An exploratory analysis. *Child Welfare, Special Issue on Housing and Homelessness, 83*, 437-452.

DePanfilis, D., Okundaye, J., Glazer-Semmel, E., Kelly, L., & Swanson-Ernst, J. (2002). Principles of the strengths perspective: Views from families and providers. *Family Preservation Journal, 6*(2), 1- 14.

Harrington, D., Zuravin, S. J., DePanfilis, D., Dubowitz, H., & Ting, L. (2002). The Neglect Scale: Confirmatory factor analysis in a low-income sample. *Child Maltreatment, 7*, 359-368.

Other Publications:

DePanfilis, D. (In press, 2006). *Child neglect: A guide for prevention, assessment, and intervention*. Washington, DC: U.S. Department of Health and Human Services, Administration on Children and Families, Administration for Children, Youth, and Families, Children's Bureau, Office on Child Abuse and Neglect.

DePanfilis, D. (2001). Child neglect: The need for differential program strategies. In Morton, T. D., & Salovitz (Eds.). *The CPS response to child neglect* (pp. 7-1 through 7-34). Duluth, GA: The National Resource Center on Child Maltreatment.

DePanfilis, D. (2001). Using research to select interventions and measure outcomes. In Morton, T. D., & Salovitz (Eds.). *The CPS response to child neglect* (pp. 8-1 through 8-32). Duluth, GA: The National Resource Center on Child Maltreatment.

Dubowitz, H. (Ed). *Neglected children: Research, practice, and policy*. Thousand Oaks, CA: Sage.

DePanfilis, D. (1999). Intervening with families when children are neglected. In H. Dubowitz (Ed). *Neglected children: Research, practice, and policy* (pp. 211-236) Thousand Oaks, CA: Sage.

Selected Presentations

(All available on the Family Connections Web site at www.family.umaryland.edu)

- DePanfilis D. Working with families to enhance protective factors and decrease risk factors: Positive improvements in child behavior. *Children Uniting Nations: Keeping the Promise to At-Risk Youth Washington DC Conference*, Washington, DC, October 3, 2006.
- DePanfilis, D. Design, implementation, and evaluation of Family Connections: A program for preventing neglect. *Children in a Changing World, Getting it Right – XVI International Society for the Prevention of Child Abuse and Neglect International Congress on Child Abuse and Neglect*, University of York, United Kingdom, September 3-6, 2006.
- DePanfilis, D., Hayward, R.A., & Daining, C. The impact of prior CPS reports on the efficacy of a neglect prevention program. *11th International Family Violence and Child Victimization Research Conference*, Portsmouth, NH, July 9-11, 2006.
- Morano, C., Zuravin, S., Harrington, D., & DePanfilis, D. (January 2004). Predictors of caregiver ability to provide for the physical and psychological care of their children. To be presented at the Society for Social Work Research (SSWR) Conference, January 2004.
- DePanfilis, D. Family intervention strategies to prevent child maltreatment in high risk communities. Social work contributions to public health bridging research and practice in violence prevention and treatment: Lessons from child maltreatment and domestic violence. Meeting sponsored by the Institute for the Advancement of Social Work Research (IASWR) and the US Centers for Disease Control (CDC), Atlanta, July 8-9, 2003.
- DePanfilis, D., & Dubowitz, H. Family Connections: Promoting safety and well-being in families at risk for neglect. 8th International Family Violence Research Conference, July 13-16, 2003.
- DePanfilis, D., & Dubowitz, H. Increasing safety and well-being of children: Results of a selective prevention intervention. 11th Annual Meeting of the Society for Prevention Research: Research to Policy. Washington, DC, June 11-13, 2003.
- DePanfilis, D., & Dubowitz, H. Increasing protective factors and decreasing risk factors to achieve child safety and well-being outcomes among families at risk for neglect. 17th Annual San Diego Conference on Child and Family Maltreatment. San Diego, February 3-7, 2003.
- DePanfilis, D., & Dubowitz, H. Child neglect: Confronting the challenges. Advanced APSAC Institute, 17th Annual San Diego Conference on Child and Family Maltreatment, San Diego. February 3, 2003.
- DePanfilis, D., Daining, C., Ting, L., Park, E., & Haynes, K. Increasing safety and well-being for families at risk for child neglect: Preliminary results from a five-year demonstration project. Seventh Annual Conference of the Society for Social Work and Research, Washington, DC, January 16-19, 2003.
- Ernst, J. S., Meyer, M., & DePanfilis, D. The effects of structural characteristics of housing on adequacy of physical child care: An exploratory analysis. Seventh Annual Conference of the Society for Social Work and Research, Washington, DC, January 16-19, 2003.

- Koverola, C., Harrington, D., DePanfilis, D., & Daining, C. Increasing social support through an intensive home based child maltreatment intervention program. 14th International Congress on Child Abuse and Neglect. Denver, July 7-10, 2002.
- DePanfilis, D., Daining, C., & Park, E. Outcomes of the helping families prevent child neglect project. 9th Annual Governor's Conference on Child Abuse and Neglect. Baltimore, April 25-26, 2002.
- DePanfilis, D., & Glazer-Semmel, E. Child neglect: Promising strategies for early intervention. 10th Annual Colloquium of the American Professional Society on the Abuse of Children. New Orleans, May 29-June 1, 2002.
- DePanfilis, D., Daining, C., Park, E., & Haynes, K. Designing and implementing computer assisted interviews. 5th National Child Welfare Data Conference - Making it Work: Using Data for Program Improvement, National Resource Center for Information Technology in Child Welfare. Arlington, VA, April 12, 2002.

PROJECT NAME: Outcome Evaluation of a Therapeutic Visiting Pilot Project in Baltimore County

ABSTRACT: In collaboration with the University of Maryland, School of Social Work Title IV-E Education for Child Welfare Program, Baltimore County DSS piloted a project of therapeutic visiting between parents and young children (0-6). The University of Maryland, Center for Families provided consultation on the design and implementation of a measurement approach for evaluating the outcomes of this project.

The goals of the visitation intervention included: (1) enhancing the parent-child attachment; (2) teaching parenting skills; and (3) providing child development information to families. The outcomes of the project focused on time frames for achievement of permanency for children serviced in the project. It was hoped that the planned interventions would impact positively upon the timelines, expediting the achievement of permanency plans. Specific activities of the Center for Families included developing a computer-assisted interview that was administered to the participants of the Therapeutic Visiting Project before and after their participation in the project. The interview was designed to assess changes in selected variables that influence placement decisions and permanency outcomes as perceived by caretakers such as stress, physical and mental health, substance abuse, parenting attitudes, and social support. In addition, during the posttest, clients were asked questions regarding their satisfaction with their foster care worker. The Center for Families also helped BCODSS develop a data system integrating their existing FACTS database with the interview data. The data system included a strategy for scoring the interview's scales.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD

FUNDING SOURCE: Baltimore County Department of Social Services

AMOUNT OF FUNDING: \$25,000

PROJECT DATES: 2001 - 2002

PRODUCTS:

Final Report

DePanfilis, D., Daining, C., & Wechsler, J. (2002). *Therapeutic visiting pilot project technical assistance final report*. Report prepared by the University of Maryland Center for Families for the Baltimore County Department of Social Services.

PROJECT NAME: Perception of the Impact of Inadequate Funding on Child Welfare Decisions

ABSTRACT: Child welfare involvement and decisions in Philadelphia are examined through intensive interviews with lawyers, judges, child protective services workers and other involved in child welfare cases. This study is in collaboration with Community Legal Services Family Advocacy Unit.

PRINCIPAL INVESTIGATOR: Corey Silberstein Shdaimah, L.L.M., PhD.

FUNDING SOURCE: University of Maryland Designated Research Initiative Funds

AMOUNT OF FUNDING: \$16,207

PROJECT DATES: June 30, 2006 - July 1, 2007

PROJECT NAME: Responding to Methamphetamine Using Families in Child Welfare

ABSTRACT: Methamphetamine manufacture, use, and addiction and the effect on children and families, are serious problems confronting child welfare agencies across the nation. Similar to the crack epidemic of the 1980's, the "meth problem" increases the risk of child maltreatment, impacts family functioning, and seriously threatens the safety and well-being of children. This study is reviewing the literature in an effort to better understand the impact of methamphetamine on children and families and to identify promising practices for working with families affected by methamphetamine use, abuse, and addiction.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, Ph.D.

CO-INVESTIGATOR: R. Anna Hayward, MSW

FUNDING SOURCE: Unfunded

PROJECT DATES: 2004 – Present

PRODUCTS

Monograph:

DePanfilis, D., & Hayward, R.A. (2006). *Ongoing child protective services (CPS) with methamphetamine using Families: Implementing promising practices*. Prepared for the National Resource Center for Child Protective Services, A program of the USDHHS, Children's Bureau. Available at http://www.nrc cps.org/PDF/Ongoing_CPS_with_Meth_Using_Families_Implementing_Promising_Practice10302006.pdf

Newsletter article:

DePanfilis, D., & Hayward, R. A. (2007). Responding to methamphetamine use, abuse, and addiction by families. *The APSAC Advisor*, 19(3), 13-19.

PROJECT NAME: Review of Investigations of Suspected Instances of Child Abuse and Neglect in Out-of-Home Care

ABSTRACT: The specific aim of this archival case review was to evaluate a representative sample of New Jersey Division of Youth and Family Services (DYFS) Institutional Abuse Investigation Unit (IAIU) files to determine the degree to which investigations of reports of child abuse and neglect in out-of-home care settings were investigated pursuant to professional standards, including New Jersey laws, policies, and standards. A simple random sample of 129 IAIU files out of a total of 1295 (10%) was drawn to represent the universe of available IAIU investigations of allegations of child abuse and neglect in out-of-home care between 1999 and 2002. Findings indicated systematic deficiencies in the quality of investigations and the research team identified problems with the decision-making in 25% of the cases. Results of this study

contributed to a consent decree to reform the DYFS response to reports of abuse or neglect in out-of-home care in New Jersey.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, PhD

FUNDING SOURCE: Children's Rights

AMOUNT OF FUNDING: \$35,518

PROJECT DATES: 2003, 2003-Present (Secondary Data Analysis)

PRODUCTS:

Final Report

DePanfilis, D. (2003). *Final report. Review of IAIU investigations of suspected children abuse and neglect in DYFS out-of-home care settings in New Jersey*. Study funded by Children's Rights, Inc. Baltimore, MD: University of Maryland School of Social Work, Center for Families and Institute for Human Services Policy.

Refereed Journal

DePanfilis, D., & Girvin, H. (2005). Investigating child maltreatment in out-of-home care: Barriers to good decision-making. *Children & Youth Services Review, 27*, 353-374.

Presentation

DePanfilis, D. (2003). DePanfilis, D. Investigating child maltreatment in out-of-home care: Barriers to good decision-making. International Symposium on Decision-Making in Child Welfare, University of California, Berkeley, December 4, 2003.

PROJECT NAME: Systematic Review of Research on the Recruitment & Retention of Competent Child Welfare Staff

ABSTRACT: The delivery of health and human services, especially in child welfare, is significantly affected by the ability of service delivery organizations to recruit and retain competent, committed staff. Concerns about child welfare staffing and the need to address recruitment and retention issues are long standing. The purpose of this 12-month collaborative study is to conduct a systematic review of research on the effectiveness of strategies to recruit and retain professionally trained social workers in child welfare agencies. A comprehensive search strategy is locating published and unpublished research studies of training programs, policy initiatives, educational partnerships, recruitment initiatives, and other strategies geared to recruit and retain professionally trained social work personnel in child welfare. This study is a collaboration between the University of Maryland School Of Social Work's Institute for Human Services Policy and the Center for Families. End products will include a collection of research briefs that will be widely disseminated to the field.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, Ph.D.

FUNDING SOURCE: Institute for the Advancement of Social Work Research through a grant from the Annie E. Casey Foundation

AMOUNT OF FUNDING: \$56,650

PROJECT DATES: 2004 – 2005 (funded), 2005 – Present (Secondary data analysis)

PRODUCTS:

Final Report

Zlotnik, J., DePanfilis, D., Daining, C., & McDermott Lane, M. (2005). *Conditions and strategies that influence the retention of staff in public child welfare: A review of research*. Funded by Annie E. Casey Foundation. Washington, DC: Institute for the Advancement of Social Work Research (IASWR).

Monographs

Zlotnik, J. L., DePanfilis, D., Daining, C., & McDermott Lane, M. (2005). Retaining competent child welfare workers: Lessons from research. *IASWR research brief 1 child welfare workforce series*. Washington, DC: Institute for the Advancement of Social Work Research.

Zlotnik, J. L., DePanfilis, D., Daining, C., & McDermott Lane, M. (2005). Professional education for child welfare practice: Improving retention in public child welfare agencies. *IASWR research brief 2 child welfare workforce series*. Washington, DC: Institute for the Advancement of Social Work Research.

Zlotnik, J. L., DePanfilis, D., Daining, C., & McDermott Lane, M. (2005). Understanding retention in child welfare: suggestions for further research and evaluation. *IASWR research brief 3 child welfare workforce series*. Washington, DC: Institute for the Advancement of Social Work Research.

Peer Reviewed Presentation

Zlotnik, J. L., & DePanfilis, D. Retention of child welfare staff: Implications for social work education and research, *Social Justice through Social Reform, Council on Social Work Education 52nd Annual Program Meeting*, Chicago, February 16-19, 2006.

COMMUNITY DEVELOPMENT:

PROJECT NAME: Building and Bridging Diverse Neighborhoods in East Baltimore

ABSTRACT: The President's Office of the University of Maryland, Baltimore, with involvement from the University's Schools of Social Work, Medicine, Law, and Nursing, engaged in a Community Building Initiative in East Baltimore. This Initiative was a collaborative effort between the University, the catchment area's community based organizations, neighborhood associations and residents, and the City of Baltimore. The Initiative's theme was "diversity as strength," meaning that the area's multiculturalism was an asset, even if not a fully realized one. The overall focus was to facilitate collaboration among community organizations and across neighborhoods in both their service delivery and grassroots organizing efforts. The project includes all, or significant parts of, these neighborhoods in East Baltimore: Patterson Park, Jonestown, East Harbor Village, Upper Fells Point, McElderry Park, Baltimore-Linwood, Butcher's Hill, Washington Hill and Dunbar-Broadway. Community members participated in, and are represented by, a range of diverse organizations and associations within these neighborhoods. A Community Advisory Committee (CAC) comprised of members of many of these organizations met monthly during the past two years to coordinate the initiative's activities. Qualitative evaluation data from the grant include individual interviews and focus groups with project stakeholders and ethnographic observations of numerous meetings and events completed during the project. Dr. Meyer is currently conducting final interviews with project stakeholders to explore in greater depth findings from preliminary analysis of this data.

PRINCIPAL INVESTIGATORS: Megan Meyer, PhD and Cheryl Hyde, PhD.

FUNDING SOURCE: Department of Housing and Urban Development

AMOUNT OF FUNDING: \$200,000

PROJECT DATES: 9/2004-12/2006

PROJECT NAME: Evaluation of the Grassroots Nonprofit Resource

Mentoring Project

ABSTRACT: This research will evaluate a new program of the Social Work Community Outreach Service – the Grassroots Nonprofit Resource Mentoring Project (RMP). The RMP works with grassroots nonprofit agencies as they pursue organizational capacity building. The RMP provides an assessment and action plan for the agency, and then matches that agency with an organizational mentor that assists with the action plan. The evaluation will compare agencies that receive RMP assistance with nonprofits that have not (though are also engaged in capacity building efforts), in order to determine the effectiveness of this organizational change model.

PRINCIPAL INVESTIGATORS: Cheryl Hyde and Karen Hopkins

FUNDING SOURCE: School of Social Work; other sources currently being sought

AMOUNT OF FUNDING: \$18,000

PROJECT DATES: July 2003 – December 2006

PROJECT NAME: Target 21217: Building on the Success and Strengths of Community Resources to Improve the Lives of Youth and Families

PROJECT DESCRIPTION: The partners in this project have been working together and meeting with community leaders in West Baltimore over the past year with the overall mission of improving the quality of life for youth receiving foster care services. The result of these deliberations is the proposed demonstration program targeted to youth in foster care in zip code 21217 (Baltimore City). The partnership goals include providing mental health training and support for the youth, their foster and biological families, and public agency staffs responsible for providing foster care and education. The demonstration program will encompass the following: workshops and support for the families, the associated foster care agency staff, and school staff (including teachers and guidance counselors); mental health services for youth in the school setting, which include support services and an intervention specifically developed for trauma-exposed adolescents; a mentoring program led by neighborhood churches and community organizations; and dedicated services by members of public and community-based agencies serving this neighborhood. Youth in foster care who attend Harlem Park or Booker T. Washington Middle School and their families will be eligible to participate in the initiative. The eligible youth will be identified initially by the Department of Human Resources as foster care youth. After the youth are identified, the youth's caseworker and foster parents will be contacted and informed of the intervention to determine if they are interested in participating. Consent for participation will be obtained from both the caseworker and the foster parents, and assent will be obtained from the youth. A project steering committee will be established at the beginning of the project to provide oversight throughout the project's duration. Participants in the steering committee will be drawn primarily from the lead partners in the project and the Faith-Community Partnership. The goal of the Faith-Community Partnership (FCP) is to build a community in West Baltimore of families, youth and a consortium of faith, education, health, mental health, and social service organizations that will focus on promoting the school and life success of its youth and community residents. A diverse Community Advisory Board of families, youth, congregants from churches, child and adolescent system (education, mental health, child welfare, juvenile justice) staff and leaders, government officials, business leaders and advocates guide the development of the community and coordinate outreach and broad training initiatives. The project steering committee will also include youth currently in foster care or who have recently aged out, and family representatives.

PRINCIPAL INVESTIGATOR: Michael Lindsey, PhD

FUNDING SOURCE: Baltimore Community Foundation (*in review*)

AMOUNT OF FUNDING: Pending

PROJECT DATES: 2007-2009

CULTURE/DIVERSITY:

PROJECT NAME: Community Based Family Approach to Reducing Infant Mortality

ABSTRACT: The objective of this study is to use community based participatory research to assist the residents in East Baltimore with developing priorities for research which focuses on Sudden Infant Death Syndrome.

PRINCIPAL INVESTIGATOR: Alice Thomas, Ph.D.- Sojourner Douglas College

Co-PRINCIPAL INVESTIGATOR: Llewellyn Cornelius, PhD, University of Maryland School of Social Work

FUNDING SOURCES: National Institutes of Health –National Institute of Child Health and Human Development- 1U13HD055874-01

AMOUNT OF FUNDING: \$90,000

PROJECT DATES: 2007-2010

PROJECT NAME: Co-operative Planning Grant for Comprehensive Minority Cancer Services

Abstract: The overall mission of this Partnership is to address the disparities in cancer morbidity and mortality in Maryland's minority populations on the Eastern Shore region and in Baltimore City through cancer research and outreach. African Americans, both nationally and in Maryland, have increased cancer incidence and mortality and lower survival rates for a number of cancers. The long-term goals for this partnership are as follows: 1. Create a stable, long-term, and collaborative relationship of mutual benefit between UMES and UMGCC in cancer research and cancer disparities research. This relationship will increase the emphasis on problems and issues relevant to the disproportionate cancer rates in minorities in Maryland especially in Baltimore City and on the Eastern Shore; 2. Improve the effectiveness and breadth of UMES and UMGCC research activities designed to benefit the minority populations in Maryland's underserved areas; 3. Build and stabilize the independent, competitive cancer research capacity, cancer research training, and career development programs at UMES; and 4. Evaluate Partnership intervention activities and assess the overall effectiveness of the Partnership in each institution. UMES is an 1890 land grant institution and a Historically Black Institution (a Minority-Serving Institution -- MSI) located in Princess Anne, Maryland (the lower Eastern Shore), a diverse and largely rural community with a large minority population. UMGCC is the multidisciplinary cancer center of the University of Maryland and is located in Baltimore City. UMGCC serves Baltimore City as well as the entire State of Maryland, and has a P20 cancer center planning grant from NCI).

PRINCIPAL INVESTIGATOR: Llewellyn J. Cornelius, PhD, Kelley Mack, PhD (UMES), and Claudia Baquet, M.D., M.P.H., (University of Maryland School of Medicine).

FUNDING SOURCE: National Cancer Institute

AMOUNT OF FUNDING: University of Maryland, School of Social Work portion \$175,000

PROJECT DATES: August 2006-July 2007

PROJECT NAME: Facilitating Access to Cancer Screening among Maryland Piscataway Conoy Tribe

ABSTRACT: The purpose of this study is to conduct a health needs assessment among members of the Maryland Piscataway Conoy TRIBE to identify barriers to cancer screening and other health services. Data on health insurance, the type of services provided by their regular provider, the cultural competence of their regular provider and history of recommended cancer screening will be obtained from two hundred adult members of the Maryland Piscataway Conoy TRIBE. A snowball sample approach will be used to collect this data whereby respondents will refer the survey administrators to other eligible adults in their community for inclusion in the study. This data will be supplemented by data that focuses on their exposure to environmental factors that are related to cancer. This data will be compared to published data to see how the respondents from the Maryland Piscataway Conoy TRIBE fare in relation to other Maryland residents. Findings from this study will be used by the Maryland Piscataway Conoy TRIBE to highlight the need for services in this community and to obtain funding for other pertinent research.

PRINCIPAL INVESTIGATORS: Llewellyn J. Cornelius, PhD.

FUNDING SOURCES: The University of Maryland Statewide Health Network

AMOUNT OF FUNDING: \$99, 862

PROJECT DATES: June 2006- July 2006

PRODUCTS:

Cornelius, LJ, (2006). Final Report: Facilitating Access to Cancer Screening among Maryland Piscataway Conoy Tribe, University of Maryland Statewide Health Network (UMSHN)

PROJECT NAME: Program evaluation of services offered by the Evangelical Lutheran Church of America – Delaware Maryland Synod

ABSTRACT: This project involved survey research with over 181 churches throughout Delaware and Maryland. A total of 425 general members and 109 clergy responded to the survey. Currently, results are being disseminated to the larger research community through peer-reviewed presentations and papers.

PRINCIPAL INVESTIGATOR: Jodi Jacobsen, PhD, University of Maryland School of Social Work

FUNDING SOURCE: Evangelical Lutheran Church of America– Delaware Maryland Synod

AMOUNT OF FUNDING: \$10,141

PROJECT DATES: January 2006 – November 2007

Final Report:

Jacobson, J.M., Rothschild, A., Mirza, F., & Wooten, N. (2007). The Delaware-Maryland Synod, Evangelical Lutheran Church in America: A church with a mission: A descriptive research study of rostered leaders and general members as they work to move from maintenance to mission. Final report submitted to DE-MD Synod, ELCA. Baltimore, MD: University of Maryland, School of Social Work.

PROJECT NAME: The Effect of Religious Beliefs and Values On Gender, Roles, Identity, and Everyday Lives Of Orthodox Jewish Women.

ABSTRACT: The purpose of the study is to examine how Orthodox women's unique religious beliefs and values affect their gender roles and everyday life. To date, little research has been conducted on the issue. A few studies focus on psychopathology in the Orthodox community, including anxiety, depression and domestic violence. Others use feminism to critique the Orthodox way of life. In contrast, this study aims to examine the strengths within the Orthodox

community and to offer a new paradigm of Jewish women's development to be compared and contrasted with the feminist theory of Self in Relation and with postmodern feminist theory.

PRINCIPAL INVESTIGATOR: Shoshana Ringel, PhD

FUNDING SOURCE: Designated Research Initiatives Fund (DRIF), University of Maryland School of Social Work

AMOUNT OF FUNDING: \$5,000

PROJECT DATES: March – July, 2003

PROJECT NAME: The Maryland Regional Community Network Program to Eliminate Racial Disparities to Cancer Services

ABSTRACT: This Community Network builds upon and expands two existing Networks in Maryland, the NCI supported Maryland Special Populations Network and the state tobacco settlement supported "Statewide Health Network". The Maryland Regional Community Network (MRCN) will serve as the principal infrastructure in the state with the mission "...to reduce and eventually eliminate cancer health disparities in Maryland's rural and underserved communities." This Community Network Program is comprised of a headquarter organization, the UMSOM, six formal community regional subcontractor partners, and one academic partner, the UMES, an HBCU and Minority Serving Institution. Regional partners will focus on five geographic regions of the state, UMES, and a statewide Native American contract for both Maryland indigenous Tribes and Tribes that have migrated to the state. There are two overall goals that guide the research, outreach and education, policy analysis and training for this Network. The overall goals are: Goal A: To significantly improve access to and utilization of beneficial cancer control interventions in Maryland communities which experience cancer health disparities; Goal B: To train a cadre of well-trained researchers. Specific aims for this Maryland Regional Community Network support the cross cutting, multidisciplinary and interdisciplinary community-based research, community education and outreach and training activities. Five broad aims guide the methods and activities of this Network. The overall aims for this Network are: Specific Aim 1) To develop a robust and sustainable community based regional infrastructure, which fosters enhanced community capacity in Maryland focused on reducing and eventually eliminating cancer health disparities; Specific Aim 2) To foster, conduct and apply results of culturally relevant and appropriate community based research and evidence-based community education and outreach on cancer health disparities; Specific Aim 3) To develop and implement training programs consistent with the overall goals of this CNP, which will result in an increased cadre of well-trained and culturally sensitive cancer health disparities researchers; Specific Aim 4) To foster sustainability and credibility of this CNP; and Specific Aim 5) To leverage additional resources to support CNP research, education and outreach, and policy formulation. This infrastructure will support community participation and sustainability of efforts to eliminate cancer health disparities as well as foster greater adherence to cancer prevention, screening, detection and treatment guideline for Maryland's underserved communities

PRINCIPAL INVESTIGATORS: Llewellyn J. Cornelius, PhD, Claudia Baquet, M.D., M.P.H., (University of Maryland School of Medicine).

FUNDING SOURCE: National Cancer Institute

AMOUNT OF FUNDING: University of Maryland, School of Social Work portion \$110,000

PROJECT DATES: May 2005- April 2010

PROJECT NAME: The Use of Traditional Chinese Culture and Values in Social Work Interventions in Hong Kong

ABSTRACT: A case study of comprehensive case managed services regarding pregnancy, maternal health and infant development.

CO-PRINCIPAL INVESTIGATORS: Cecilia Chan, PhD, University of Hong Kong
Howard Palley, PhD

PRODUCTS:

Refereed Journal

Chan, C. & Palley, H. A., (2005). The Use of Traditional Chinese Culture and Values in Social Work Interventions in Hong Kong. *Health and Social Work, 30*(1), 76-79.

EDUCATION:

PROJECT NAME: A Developmental – Relational Approach to Field Supervision

ABSTRACT: Dr. Deal is collaborating with Dr. Susanne Bennett from The Catholic University of America National Catholic School of Social Service in conducting a study of a 16-hour field instructor training model that focuses on educating field instructors in the process of student development and the supervisory relationship. One doctoral student serves as my GRA on this project.

PRINCIPAL INVESTIGATOR: Kathleen Deal, PhD, University of Maryland School of Social Work

FUNDING SOURCE: n/a

AMOUNT OF FUNDING: unfunded

PROJECT NAME: Assessing Child Welfare Competencies For Social Work Students Using Standardized Client Encounters

ABSTRACT: The purpose of this study is to evaluate the effectiveness of an educational intervention using standardized clients to simulate client experiences in order to help Master's and undergraduate level social work students learn and demonstrate child welfare skill competencies. This is a pretest/posttest one-group design. All 45 participants will conduct interviews with standardized clients at two times--at the beginning of the fall '06 semester and at the end of the spring '07 semester. The literature demonstrates that standardized clients have been utilized to measure medical students' knowledge base and assess their clinical skills for the past 30 years. This practice has not been readily integrated in social work education. Standardized clients provide an occasion for students to learn skills in a safe environment, develop and utilize practice skills, and receive feedback. The use of standardized clients can also provide an opportunity for a discussion between the social work student and the standardized client to discuss similarities and differences in their perceptions of the interviews.

PRINCIPAL INVESTIGATOR: Caroline Burry, PhD

FUNDING SOURCE: Title IV-E, University of Maryland, School of Social Work

AMOUNT OF FUNDING: \$3,000

PROJECT DATES: 2006-2007

PROJECT NAME: Educating Field Instructors about Students' Developmental Stages

Abstract: Field instructors who volunteered to attend a 12-hour seminar based on learning normative stages of MSW students' professional development and supervisory strategies based on students' developmental needs were assigned to experimental (n=14) and control groups (n=24). Both groups were given pre- and post tests consisting of 12 open-ended questions about student developmental characteristics and supervisory strategies based on two vignettes using a crossover design. At the time of the post-test, students of both groups of field instructors were given a questionnaire regarding the educational approaches and methodologies used by their field instructors. Data analysis is currently underway.

PRINCIPAL INVESTIGATOR: Kathleen Deal, DSW

Co-Investigator: Jennifer Clements

FUNDING SOURCE: None

AMOUNT OF FUNDING: N/A

PROJECT DATES: 2002-2004

PRODUCTS

Peer Reviewed Paper:

Deal, K. H. & Clements, J. (2006). Supervising students developmentally: Evaluating a seminar for new field instructors. *Journal of Social Work Education, 42*(2), 291-306.

PROJECT NAME: Maternal and Child Health Center for Leadership in Public Health Social Work Education

ABSTRACT: The Center for Maternal Child Health Education Training Grant provides scholarships for selected MSW students enrolled in the University of Maryland School of Social Work who have leadership potential and are committed to promoting the health of children, youth and families, especially mothers. This grant develops and implements continuing education regarding child, youth and maternal health practice for social workers in the Mid-Atlantic region, and nationally. It also develops and distributes child, youth and maternal social work educational resources and products and curriculum modules for infusion into health specialization courses in MSW programs.

PRINCIPAL INVESTIGATOR: Edward Pecukonis, PhD

CO- INVESTIGATOR: Bruce DeForge, PhD (Project Evaluator (funded 5%))

FUNDING SOURCE: U.S. Department of Health and Human Services Maternal Child Health Bureau

AMOUNT OF FUNDING: Approximately \$715,000 over 5 years (\$141,000 for FY 2006-2007)

PROJECT DATES: 2002-2007

PROJECT NAME: Service Learning and Civic Engagement among Undergraduate Students

ABSTRACT: Dr. Jodi Jacobson initiated this project when she was teaching an undergraduate course on community service with families. For the past three years, students complete a pre- and post-test to assess impact of the class with regard to their view on service learning through civic engagement. She was the sole investigator until she left Towson University Fall 2006, when Dr. Oravec took over to oversee data collection. Dr. Jacobson's role in this study as co-principal investigator is to manage and analyze data, and interpret findings.

PRINCIPAL INVESTIGATORS: Dr. Linda Oravec, Towson University and Jodi-Jacobson, PhD, University of Maryland, School of Social Work

FUNDING SOURCE: Unfunded
AMOUNT OF FUNDING: n/a
PROJECT DATES: 2004-Present

PROJECT NAME: Social Work Doctoral Students' Experiences in Becoming Teachers

ABSTRACT: This study is a multi-year qualitative study that is designed to assess how social work doctoral students learn to and adapt to teaching. Dr. Jacobson's role in this project as co-principal investigator is to conduct the qualitative interviews and work with Dr. Oktay to analyze data and interpret findings.

PRINCIPAL INVESTIGATOR: Julianne Oktay, PhD, University of Maryland School of Social Work

CO-PRINCIPAL INVESTIGATOR: Jodi-Jacobson, PhD, University of Maryland, School of Social Work

FUNDING SOURCE: Silberman Fund

AMOUNT OF FUNDING: \$18,685 submitted but not funded

PROJECT DATES: 2003-2008

PROJECT NAME: The Impact of Social Work Education on Critical Thinking Skills: A comparison of baccalaureate, masters and doctoral students

ABSTRACT: Dr. Deal is currently collecting data for this study on the campuses of UMB, UMBC, and Hood College. One doctoral student serves as my GRA on this project.

PRINCIPAL INVESTIGATOR: Kathleen Deal, PhD, University of Maryland School of Social Work

FUNDING SOURCE: n/a

AMOUNT OF FUNDING: unfunded

PROJECT DATES: Data collection and data analysis are completed.

PRODUCTS: An manuscript describing results of the study is in process.

PROJECT NAME: The Sexuality Content of Social Work Education Curricula

ABSTRACT: A study was undertaken as to the content regarding sexuality in the curricula of undergraduate and Masters level curricula of accredited schools in the United States and Canada. Both Anglophone and Francophone programs were included in the Canadian version of the study; the questionnaire, first developed in English, was translated into French and utilized for this purpose. Pre-testing was conducted and input to the instrument utilizing senior social work educators noted for their expertise in the teaching of human sexuality and/or in substantive aspects of sexology. Permission was obtained from the IRB at UMB, and standard procedures were utilized both to assure confidentiality and to follow-up the mailed questionnaire. Data were computer analyzed utilizing SPSS software. An overall response rate of 26 % was obtained. There exists agreement among faculty, administrators and the staff of the study that sexuality, broadly defined or narrowly defined, are largely neglected by professional curricula in social work education.

PRINCIPAL INVESTIGATOR: Paul Ephross, PhD, David Skiba, University of Maryland, Baltimore County, and Ilsa Lottes, PhD, University of Maryland, Baltimore County

FUNDING SOURCE: DRIF grant, University of Maryland, School of Social Work

AMOUNT OF FUNDING: \$2,140

PROJECT DATES: 2004-2005

PRODUCTS:**Selected Presentations:**

Ephross, P. & Skiba, D. The Sexuality Content of Social Work Education Curricula. *Presentation at the XVII Meetings of the World Assembly of Sexology*. Montreal, Quebec, Canada, July 2005.

HEALTH:**PROJECT NAME: An Examination of an Ecological Model of Adjustment for Adolescent Siblings of Youth with Spina Bifida**

ABSTRACT: Based on an integrated risk and resilience and family-centered care model, this cross-sectional national study tested an ecological model of adjustment for 224 adolescent siblings of youth with spina bifida. The central hypotheses evaluated whether a set of ecological variables (stress appraisal, satisfaction with family functioning, warmth and conflict in the sibling relationship, and peer support) predicted sibling self-concept, prosocial behavior, and behavior difficulties. The model was significant across the adjustment outcomes with greatest amount explained variance noted in self-concept. Significant individual risk and protective factors were observed at several layers of sibling life, and there were divergent predictors of self-concept and behavior. Findings from this research suggest family-centered care may be enhanced by clarifying and supporting sibling perception of the impact of spina bifida, promoting a healthy family milieu characterized by communication sharing, growth opportunities, and positive sibling interactions, and encouraging opportunities for peer socialization.

PRINCIPAL INVESTIGATOR: Melissa H. Bellin, PhD.

FUNDING SOURCE: National Institutes of Health Predoctoral Fellowship for Students with Disabilities

AMOUNT OF FUNDING: \$23,552

PROJECT DATES: June 2005 to May 2006

PRODUCTS:

Bellin, M. H. (2006). An examination of an ecological model of adjustment for adolescent siblings of youth with spina bifida. Unpublished doctoral dissertation, Virginia Commonwealth University.

Peer Reviewed Presentations

Bellin, M. H., An examination of an ecological model of adjustment for adolescent siblings of youth with spina bifida. Presentation planned for the *2007 Annual Conference of the Society for Social Work and Research*, San Francisco, January 11-16, 2007.

Bellin, M. H., & Sawin, K. J., Family-centered perspective in spina bifida: The sibling experience. Presented at the *33rd Annual National Spina Bifida Association of America Conference*, Atlanta, June 25-28.

Bellin, M. H., Correlates of self-concept in adolescent siblings of youth with spina bifida. *Presented at the 2006 Spina Bifida Research Symposium: Current Strategies*, Chicago, May 10-12.

PROJECT NAME: Canadian Federalism and the Implementation of Provincial Health Care Plans

ABSTRACT: An analysis of the operation of Canadian fiscal federalism and the unique responses of Canadian provinces and territories with respect to the organization and implementation of health care services.

PRINCIPAL INVESTIGATOR: Howard Palley, PhD

Co-Investigator: Pierre-Gerlier Forest, PhD, LaVal University, Quebec City, Canada

PRODUCTS

Refereed Paper:

Palley, H., & Forest, P. (2004). Canadian fiscal federalism, regionalization and the development of Quebec's health care system. *New Global Development: Journal of International and Comparative Social Welfare*, 20 (2), 87-96.

PROJECT NAME: Control and Adherence Issues in Hypertension

ABSTRACT: Purpose: The purpose of the study is to examine the psychosocial aspects of adherence to hypertension treatment in a community sample. Control of hypertension has been a major public health concern. Over time, uncontrolled blood pressure can lead to increase risk of stroke, renal failure, and heart disease. Poor adherence to medical treatment has been suggested as the major reason for the lack control in blood pressure. Many believe that poor adherence is due to the patient's resistance to medical treatment, the adverse effects of anti-hypertensive medications, or the patient's inability to follow drug regimens. However, poor adherence may be due to social and psychological factors, such as the ability to cope, the level of self-efficacy, the degree of psychological well-being, the amount of trust in physicians, the emphasis placed on somatic symptoms, the level of life satisfaction, and the self-perception of their own adherence to medical treatment. Methods: We are recruiting adults (individuals 18 and older) in Baltimore City, Western, and Eastern Maryland who have hypertension (diagnosis of hypertension or blood pressure 140/90 mmHg or greater) to respond to a computer-assisted telephone interview (CATI). Only one person per household will be interviewed. There are no restrictions on gender or race/ethnic origins of the respondents. Through random-digit-dialing, we hope to get a representative cross-section of the population in each of the three regions, Baltimore City, Western and Eastern Maryland. It is possible that some people may not be excluded because they may lack a telephone. Also a qualitative questions sub-sample of 60 individuals (20 from each region) will be asked to answer several open ended questions.

PRINCIPAL INVESTIGATORS: David L. Stewart, M.D., M.P.H., University of Maryland School of Medicine

Bruce R. DeForge, PhD

FUNDING SOURCE: UMB Tobacco Restitution Funds

AMOUNT OF FUNDING: \$150,000

PROJECT DATES: May 2001 to 2003.

PRODUCTS:

Refereed Journals

DeForge, B.R., Stewart, D.L., Zhan, M., & Graham, L. (2005). Psychosocial factors in hypertension control. *Journal of the Association for Academic Minority Physicians*, 16(1), 59-63.

Selected Presentations

Stewart, D.L., DeForge, B.R., Zhan, M., & Graham, L. (2003). *Hypertension Control in Baltimore City, Western Maryland and Eastern Shore*. Inaugural Scientific Forum on Cancer & Other Tobacco-Related Diseases, Sponsored by Cigarette Restitution Fund to the University of Maryland Medical Group (University of Maryland School of Medicine, University of Maryland Baltimore, and University of Maryland Medical System), Baltimore, Maryland (April 10-11, 2003).

Stewart, D.L., DeForge, B.R., Graham, L., & Charleston, J. (2002). *A Community-Based Cardiovascular Risk Reduction Program, 20-years After Initial Funding*. Poster presented at the annual meeting of the International Society of Hypertension in Blacks (ISHIB), Miami, Florida, (June 8-12, 2002).

PROJECT NAME: HIV RISK REDUCTION AMONG LATINAS—PROJECT SEPA [SEPA:Salud, Educacion, Prevencion y Autocuidado, (Health, Education, Prevention and Self-Care)]

ABSTRACT: HIV/AIDS prevention for Latinas is urgently needed. The AIDS pandemic has continued to increase among women, especially women of color. In Chicago, AIDS is the leading cause of death among Latinas age 25-44 years. No research has documented the effectiveness of a culturally-tailored intervention for adult Latinas. The specific aim of this study is to evaluate the effectiveness of a culturally-specific intervention, Project SEPA, in increasing HIV prevention behaviors for inner city Mexican and Puerto-Rican women. The content and learning strategies of Project SEPA are based on the integrated social learning model of AIDS prevention shown to be the most effective in increasing Aids prevention behaviors, modified to take into account the special needs of Latinas related to gender inequality and cultural values and practices. The culturally-relevant issues of unequal power, based on the cultural value of Machismo/Marianismo conflict management and prevention of violence, are specifically addressed. Community-based peer groups are especially compatible with Latino culture. The conceptual basis for the intervention aims to facilitate later replication of the intervention in different communities. The intervention will be using a randomized pre-test/post-test comparison design and follow-up assessments immediately and 3 and 6 months after completion of the intervention. Approximately 768 sexually-active Mexican and Puerto- Rican women aged 18 to 40 years will be recruited into the study. Because individual women (in the intervention condition) are nested within groups, the design requires the use of multi-level (or hierarchical analysis. Any initial group differences can be adjusted for using pre-test measures as co-variables in the regression models. The major aim of the study is having an intervention that is culturally specific to the needs of Latinas. Additional aims include having a randomized control group and the longitudinal design with data collection points at pre-test, post-test, 3 month follow-up and 6 month follow-up. The design also controls for historical effects and language by randomizing within waves and within language groups.

PRINCIPAL INVESTIGATOR: Nilda Peragallo, DrPH, RN, FAAN

Co-Investigators: Bruce R. DeForge, PhD, Elias Vasquez, PhD, R.N., Patricia O'Campo, PhD, Sun Mi Lee, PhD, MPH, Young Ju Kim, RN, MSN, Lilian Ferrer, PhD, Rosina Cianelli, PhD, Ricardo Rivero, MD, and Marie Talashek, PhD

FUNDING SOURCE: National Institutes of Health (NIH), National Institute of Nursing Research (NINR) (Grant number: NIH/NINR RO1 NR04746-04).

PROJECT DATES: 9-30-1998 to 8-30-2003

PRODUCTS:

Final Report

Submitted to NINR November, 2003

Refereed Journals

- Kim, Y., Peragallo, N., & DeForge, B. R. (2006). Predictors of program participation in a HIV risk reduction intervention for low-income Latino women. *International Journal of Nursing Studies*, 43, 527-534.
- Peragallo, N., DeForge, B.R., O'Campo, P, Lee S.M., Kim, Y.J., Ferrer, L., & Cianelli, R. (2005). HIV Risk Reduction Intervention among Low Income Latino Women: Project SEPA. *Nursing Research*, 54(2), 108-118.
- Peragallo, N., DeForge, B.R., Khouri, Z, Rivero, R., & Talashek, M. (2002). Latinas' perspective on HIV/AIDS: Cultural issues to consider in Prevention. *Hispanic Health Care International (HHCI)*, 1(1), 11-23.
- Peragallo, N., DeForge, B.R., Khouri, Z, Rivero, R., & Talashek, M. (2002). Latinas' perspective on HIV/AIDS: Cultural issues to consider in Prevention. *Hispanic Health Care International (HHCI)*, 1(1), 11-23.

Selected Presentations

- Kim, Y.J., Peragallo, N., DeForge, B.R., O'Campo, P, & Lee S. M. (2004). *Predictors of program participation and dropout in a HIV risk reduction intervention for low-income Latino women*. Accepted as a poster presentation to the Society of Behavioral Medicine, Baltimore, MD (March 25, 2004).
- DeForge, B.R., Peragallo, N., O'Campo, P, Lee S.M., Kim, Y.J., Ferrer, L., Cianelli, R. & Yali, P. (2004). *Effects of an HIV risk reduction intervention on depression and self-esteem among Latino women in the US*. Paper submitted to the XV International AIDS Conference, Bangkok, Thailand (July 11-16, 2004).
- Peragallo, N., DeForge, B.R., O'Campo, P, Lee S.M., Kim, Y.J., Ferrer, L., Cianelli, R. & Yali, P. (2004). *HIV risk reduction intervention among low income Latino women: Project SEPA*. Paper submitted to the XV International AIDS Conference, Bangkok, Thailand (July 11-16, 2004).
- Vasquez, E., Peragallo, N., DeForge, B.R., O'Campo, P, Lee S.M., Kim, Y.J., Ferrer, L., Cianelli, R. & Yali, P. (2004). *The impact of acculturation on the effects of an HIV risk reduction intervention among Latino women in the US*. Paper submitted to the XV International AIDS Conference, Bangkok, Thailand (July 11-16, 2004).
- DeForge, B.R., Peragallo, N., O'Campo, P., Lee, S.M., & Kim, Y.J. (2004). *Depression among Latinas in the United States*. Poster presented at Eighth Annual Conference of the Society for Social Work and Research (SSWR), New Orleans, LA (January 15-18, 2004).
- Peragallo, N., Yali, P., Lee S.M., DeForge, B.R. & Vasquez, E. (2004). *Effects of a HIV Behavioral Prevention Intervention for Mexican and Puerto Rican Women*. Paper submitted to the 15th International Nursing Research Congress Sigma Theta Tau International (July 22-24, 2004).
- Peragallo, N., O'Campo, P, DeForge, B.R., Lee S.M., Kim, Y.J., Ferrer, L., & Cianelli, R. (2004). *SEPA Effects of Risk Reduction Intervention and Prevention Program for Mexican Women in U.S*. Paper accepted to the annual meeting of the Southern Nursing Research Society (SNRS), Louisville, Kentucky (February 19-21, 2004).
- Peragallo, N., DeForge, B.R., Lee, & O'Campo, P. (2002). *Developing a Culturally Sensitive HIV Risk Reduction Intervention in Latinas*. Paper presented at 13th International Research Conference (Australia July 2002).

DeForge, B.R., Peragallo, N., Lee, Sun Mi. (2002). *Predicting Depression among Latinas in The United States*. Poster presented at XIV International AIDS Conference, Barcelona Spain (July 7-12, 2002).

Peragallo, N., DeForge, B.R., Lee, O'Campo, P. & Sun Mi (2002). *SEPA: HIV risk reduction intervention for US Latinas*. Poster presented at XIV International AIDS Conference, Barcelona Spain (July 7-12, 2002).

PROJECT NAME: Hypertension Telemanagement in African Americans.

ABSTRACT: Studies employing telecommunication technologies have been successful in affecting the major components of chronic disease care including physician practice patterns, patient adherence to therapy, and patient-provider communication. To date there have been no studies evaluating a coordinated approach that simultaneously employs all of these components in an integrated framework linked to primary care practices. In this study we propose to evaluate a multicomponent telemanagement system providing an integrated support both to clinicians and patients in following hypertension treatment guidelines promulgated by JNC 7 Report. The Internet-based Home Automated Telemanagement (HAT) system implements a multi-component chronic disease management model which includes regular patient assessment, disease-specific education, control of patient adherence to treatment plans, promotion of therapeutic lifestyle changes, comprehensive patient-provider communication and computerized decision support. In this proposal we will (1) refine the HAT System to fully implement the multidisciplinary model for telemanagement of hypertension in African Americans (2) evaluate in a randomized controlled trial the magnitude of clinical impact of HAT on hypertension control rates in African Americans and examine cost-effectiveness of the proposed approach. Patients will have the HAT units (Internet-enabled computer connected to a blood pressure monitor and weight scale) installed in their homes and will be instructed how to use it. They will be asked to do self-testing on a regular basis and to answer questions on their computer screen (symptoms, medication use, and other self-care actions). Each HAT session will include (1) patient assessment (objective measurements such as blood pressure and body weight, which are automatically downloaded to the computer, and patient-reported parameters such as patient symptoms and medication use), (2) interpretation and advice according to individualized treatment plan generated by patient's physician, (3) structured hypertension education, (4) patient counseling and health behavior adjustment (based on main constructs of Social Cognitive Theory, such as behavioral capability, self-efficacy, outcome expectations and reinforcement), (5) social support (virtual patient groups, communication with social worker). Overall, 550 African Americans with hypertension will be enrolled from 50 primary care clinics and will be followed for 18 months. The main study outcomes will be proportion of treated patients that achieve blood pressure goals meeting JNC 7 recommendations, and mean change in systolic and diastolic pressure. We will also explore HAT impact on physician awareness and adherence to JNC 7 guidelines, and patient ability to reach lifestyle modification goals recommended by the JNC 7 Report. Finally, we will perform cost-effectiveness analysis of the HAT intervention in the African American patients with hypertension.

PRINCIPAL INVESTIGATORS: Joseph Finkelstein, M.D., PhD. Department of Epidemiology and Preventive Medicine, School of Medicine, University of Maryland.

CO-INVESTIGATOR: Bruce DeForge, PhD.

FUNDING SOURCES: National Institute of Health

AMOUNT OF FUNDING: \$3,524,620

PROJECT DATES: July 2005-May 2009

PRODUCTS:

Selected Presentations

Castro, H.K., DeForge, B.R, Hise, M.K., & Finkelstein, J. (2006). Views and Expectations of Using Technology to Support Self-Care in Hypertensive African American Patients Paper submitted to American Heart Association (AHA) Scientific Sessions 2006, (November 12-15) Chicago IL.

PROJECT NAME: Maryland Mandated Cancer Insurance Benefits Focus Group

ABSTRACT: This project focus on examining the perceptions of consumers regarding a scheduled of health insurance benefits for cancer related services. A series of four focus groups were scheduled to review a booklet that consumers would typically examine in looking at mandated health insurance benefits.

PRINCIPAL INVESTIGATORS: Llewellyn J. Cornelius, PhD.

FUNDING SOURCES: The University of Maryland Statewide Health Network

AMOUNT OF FUNDING: \$10,000

PROJECT DATES: July 2005- June 2006

PRODUCTS:

Cornelius, LJ, (2006). Final Report: Maryland Mandated Cancer Insurance Benefits Study. University of Maryland Statewide Health Network (UMSHN)

PROJECT NAME: Patient Navigator Pilot Study

ABSTRACT: The objective of this pilot study is to implement a one year statewide patient navigator program to channel patients into the health care delivery system for cancer screening and treatment 2006-2007.

PRINCIPAL INVESTIGATOR: Dr. Claudia Baquet (IUMB, School of Medicine -685 W Baltimore- Rm 618 Baltimore MD 21201)

CO-PI- Llewellyn Cornelius, PhD, University of Maryland, School of Social Work

FUNDING SOURCES: University of Maryland, School of Medicine-(Maryland Cigarette Restitution Fund Program)

AMOUNT OF FUNDING: \$300,000

PROJECT DATES: 2006-2007

PROJECT NAME: Person and Environmental Circumstances of Nursing Home Resident Fall Event (Pilot project)

ABSTRACT: Center for Collaborative Intervention Research (CCIR)

Falls are a common problem in the elderly population, with approximately one-third of community dwelling elders falling annually. Significant morbidity and mortality is also associated with fall events, as well as increased costs to the health care system. Falls are the leading cause of injury-related deaths and the leading cause of injury-related visits to emergency departments. In the United States, annual healthcare cost resulting from falls in older adults is estimated to be more than \$20 billion. Approximately 50% of elderly nursing home (NH) residents fall annually, with at least 16% of these events being attributed to environmental or accidental factors. Despite environmental factors being noted contributors to fall risk in NH residents, tools designed to assess risk in these settings tend to focus primarily on person factors (e.g. cognitive impairment or incontinence). With a recent emphasis on the importance of using

post-fall assessments, to reduce the risk of future falls, some NHs have begun to implement them. However, the psychometric properties of these post-fall assessments have not been established, most critically their ability to predict future falls. Given these noteworthy gaps in the literature, the purpose of the proposed pilot will be to develop a person-environment after fall assessment (PEAFA) tool designed for use by licensed NH nurses. Specific aims of this study of falls in elderly nursing home residents include: (1) To identify person and environmental circumstances and high fall risk activities of fall events. (2) To develop a Person-Environment After Fall Assessment (PEAFA) tool. (3) To perform feasibility and preliminary psychometric testing of the PEAFA. *Phase 1: Pre-constructive* (Specific Aim 1): In the first phase, data will be analyzed from focus groups previously conducted with licensed (registered nurses [RNs] and licensed practical nurses [LPNs] and unlicensed (certified medication aides and geriatric nursing assistants) NH nursing staff. The focus group strategy acknowledges informants as experts, allowing for a comprehensive description of fall events and the “person-environment” circumstances from the nursing staff’s view. Analysis will result in decisions related to domains for inclusion in the PEAFA tool to be used by licensed NH nurses. Participants of the two focus groups of licensed nurses were representative of the target population for whom the PEAFA tool will be designed. *Phase 2: Constructive* (Specific Aim 2): In the second phase, the number of items, dimensionality, format, and administration method of the PEAFA tool will be determined based on a series of sequential discussions among research team members, an advisory committee, a nursing practice panel meeting and an expert review panel. The advisory panel (study investigators, a senior faculty advisor, consultants, and other significant contributors including the Director of Nursing from a Baltimore area NH, a Physical Therapist, and a Geriatrician), will generate a pool of items derived from the domains identified by the analysis of the focus group data and review of current literature. After a draft version of the PEAFA tool is generated, a nursing practice panel consisting of five licensed nurses (three RNs and two LPNs) will provide feedback related to face validity. Finally, an expert panel consisting of a geriatrician and a nurse renowned in the study of NH falls and a NH environmental specialist will be employed in the formal assessment of content validity. Final revisions will be made to the PEAFA tool which will be pilot-tested in Phase 3.

PRINCIPAL INVESTIGATOR: Elizabeth E. Hill, Ph.D., R.N., School of Nursing, Johns Hopkins University.

CO-INVESTIGATOR: Bruce DeForge, PhD, University of Maryland, School of Social Work

FUNDING SOURCES: National Institute of Nursing Research

AMOUNT OF FUNDING: \$20,000

PROJECT DATES: May 2006-December 2007

PRODUCTS:

Hill, E.E., Nguyen, T.H., Shaha, M., Wenzel, J., DeForge, B.R., & Spellbring, A.M. (2007).

Nursing home staff perspectives of resident fall events: Theory-driven content analysis. *Research in Nursing & Health* (Submitted).

Presentations

Hill, E.E., Nguyen, T.H., Shaha, M., Wenzel, J., DeForge, B.R., & Spellbring, A.M. (2007). *A Theoretically Driven Content Analysis of Nursing Home Falls: A Nursing Perspective*. Paper submitted to the Gerontological Society of America, San Francisco, CA (November 16-20, 2007).

Hill-Westmoreland, E.E., Spellbring, A.M., Gruber-Baldini, A.L., Ryder, P.T., & DeForge, B.R. (2005). *Person and Environmental Circumstances of Nursing Home Resident Fall*

Events. Paper accepted at the 16th International Nursing Research Congress Sigma Theta Tau International, Hawaii's Big Island, Hawaii (July 14-16, 2005). **(Pilot work)**

PROJECT NAME: Pregnancy Outcomes and Maternal Health

ABSTRACT: An analysis of the use of traditional health care practices and cultural norms in the treatment of patients in Hong Kong.

CO-PRINCIPAL INVESTIGATORS: Elizabeth Bowman, PhD, Army Research Centers, Aberdeen, MD; Howard Palley, PhD, University of Maryland School of Social Work

PRODUCTS:

Refereed Journal

Bowman, E., & Palley, H. (2003). Improving adolescent pregnancy outcomes and maternal health: A case study of comprehensive case-managed services. *Journal of Health and Social Policy*, 18(1), 15-42.

PROJECT NAME: Project SAFe (Screening Adherence Follow-up)

PROJECT ABSTRACT: Project SAFe tested a systematic evidence-based case management approach to improve patient cancer screening follow-up adherence. The target population was medically under-served low-income, ethnic minority women with abnormal breast and cervical screens. Controlled clinical trials had demonstrated the efficacy of interactive health education counseling and systems navigation for improving abnormal screening follow-up adherence. The SAFe project adapted these interventions for delivery in different service systems and diverse populations, added mental health screening and assessment, and included more intensive psychosocial counseling for women with special needs. Key study questions concerned the effectiveness, feasibility and utility of SAFe case management and identification of patient, provider and health system barriers and facilitating processes to implementing SAFe in "real world" health care systems. Tested in three separate studies in multiple sites, SAFe case management improved patient adherence significantly over site baseline rates, non-enrollee rates, and control group rates, with adherence rates improving from 6% to 25%. The project developed a fully specified SAFe TOOL KIT for dissemination.

PRINCIPAL INVESTIGATOR: Kathleen Ell, D.S.W., USC School of Social Work

CO-PRINCIPAL INVESTIGATOR: Betsy Vourlekis, PhD

Co-Investigator: Deborah Padgett, PhD, NYU School of Social Work

FUNDING SOURCES: Centers for Disease Control and Prevention; State of California, Department of Health, Cancer Detection Division

AMOUNT OF FUNDING: \$1.5 million dollars

PROJECT DATES: 10/1/97-9/30/02

PRODUCTS

Refereed Journals

Vourlekis, B.S., Ell, K., & Padgett, D.K. (2001). Educating social workers for health care's brave new world. *Journal of Social Work Education*, 37, 177-191.

Ell, K., Vourlekis, B., Nissly, J., Padgett, D., Pineda, D., Sarabia, O, Walther, V., & Blumenfield, S. (2002). Integrating mental health screening and abnormal cancer screening follow-up: An intervention to reach low-income women. *Community Mental Health Journal*, 38, 311-325.

Ell, K, Vourlekis, B., Muderspach, L., Nissly, J., Pineda, D., Padgett, D., Sarabia, O., & Lee, P-J. (2002).

Abnormal cervical screen follow-up among low-income Latinas: Project SAFE. *Journal of Women's Health and Gender-Based Medicine*, 11, 639-651.

Ell, K., Padgett, D., Vourlekis, B., Nissly, J. Pineda, D., Sarabia, O. Walther, V., Blumenfield, S., & Lee, P-J. (2002). Abnormal mammogram follow-up: A pilot study in women with low income. *Cancer Practice*, 10, 130-138.

Vourlekis, B., Ell, K., Padgett, D., Pineda, D., & Lee, P-J. (In press). Evidence-Based Assessment for Cancer Abnormal Screen Follow-up Care. *Health and Social Work*.

Other Publications

Case Management the SAFE Way: A Toolkit for Evidence-Based Case Management to Improve adherence to Abnormal Cancer Screen Follow-up, 2003. [Available at the SAFE Web site: www.usc.edu/dept/socialwork/research/safe/].

PROJECT NAME: Testing the effectiveness of adding a family treatment component to an existing support group for breast cancer patients experiencing post treatment fatigue

ABSTRACT: Designed to test the effectiveness of adding a family treatment component to an existing support group for breast cancer patients experiencing post treatment fatigue. The study uses a mixed-method design. Dr. Oktay is responsible for the qualitative component.

PRINCIPAL INVESTIGATORS: Julianne Oktay, PhD., University of Maryland School of Social Work and Kathy Helzlsouer, PhD., Mercy Medical Center.

FUNDING SOURCES: American Breast Cancer Foundation

PROJECT NAME: The Impact of Health Literacy, Social Support, Internet Use and Doctor-Patient Relationships Relationship on Health Status and Health Service

ABSTRACT: The objective of this study was to examine the relationship between health literacy, social support, doctor-patient relationships, the use of the Internet to obtain health information on health status and on health services. A cross-sectional survey was implemented to assess the impact of health literacy, social support, doctor-patient relationship, and the use of the Internet on a person's health status and health services utilization in past year. Men and women, 18 years or older, were drawn from the University of Maryland Baltimore, Department of Family Medicine's clinical practice. Participants received \$20 for completing the interview. The questionnaire included: demographic items, the Rapid Estimate of Adult Literacy in Medicine (REALM), Short Test of Functional Health Literacy in Adults (S-TOFHLA), Social Provision Scale (social support), scales on doctor-patient relationships (Trust in Physicians Scale), MOS General Adherence, and the use of the Internet to find seek out information on health topics. The dependent variables were the SF-12 (physical and mental health status) and question about health services utilization over the past year (doctor visits and emergency room visits). Three hundred thirty one individuals were interviewed: 17% (57) men and 83% (274) women, 56.8% were never married, and most were African American (86.7%) The average completed years of education was 12.2 (SD=2.4), with nearly three quarters earning a high school diploma or better. A third of the respondents had high blood pressure (33.8%) while 19% had high cholesterol, 17.8% had asthma and 17.5% had diabetes. About 69% scored in the high school level of health literacy on the REALM, however, the average score was 56, which put it health literacy score in the 7th and 8th grade level. On the S-TOFHLA most respondents (82%) were functioning on an adequate level for health literacy. A small portion of respondents (29.6%) used the Internet to look for health related or medical information. Regression equations were developed to predict health status (Physical and Mental), doctor visits and emergency room visits. The major

variables predicting physical health status as measured by the SF-12 were age ($b = -.326$), general adherence ($b = .52$), Blue Cross/Blue Shield health insurance ($b = 3.919$), and S-TOFHLA ($b = 2.648$). The major variables predicting mental health status as measured by the SF-12 were general adherence ($b = .709$) and trust in physicians ($b = .214$). The major variables predicting doctor visits were age ($b = .022$), Medicaid ($b = 1.503$), Blue Cross/Blue Shield health insurance ($b = -.636$), and S-TOFHLA ($b = -.450$). The major variables predicting visits to the Emergency Room were general adherence ($b = -.028$), Blue Cross/Blue Shield health insurance ($b = -.415$), and S-TOFHLA ($b = -.353$). The findings indicate that age was negatively related to health status indicating that older people reported poorer physical health status as compared with younger people. Respondents who took the medical advice of health providers, had Blue Cross/Blue Shield health insurance, and had a higher score on the S-TOFHLA reported better physical health status. Respondents who took the medical advice of health providers and had more trust in their physicians reported better mental health status. Older respondents, those with Medicaid reported going to the doctor more often, while those who had Blue Cross/Blue Shield health insurance and had a lower score on the S-TOFHLA reported going to physician less. Respondents who went to the Emergency Room more had lower scores on the S-TOFHLA, took the medical advice of health providers less, and were less likely to have Blue Cross/Blue Shield health insurance. Thus, health literacy had an influenced a person's physical health status, the level of contact with their physician and the use of the Emergency Room.

PRINCIPAL INVESTIGATORS: Bruce DeForge, PhD

CO-PRINCIPAL INVESTIGATORS: David L. Stewart, M.D., School of Medicine, University of Maryland

FUNDING SOURCES: University of Maryland's Statewide Health Network Field Outreach Projects Grant

AMOUNT OF FUNDING: \$55,000

PROJECT DATES: July 2004-December 2004

PRODUCTS:

Final Report

DeForge, B.R., & Stewart, D.L. (2005). *The Impact of Health Literacy, Social Support, Internet Use and Doctor-Patient Relationships Relationship on Health Status and Health Service.* Final Report presented to the University of Maryland's Statewide Health Network (UMSHN), Field Outreach Projects Grant.

Selected Presentations

DeForge, B.R. (2006) *Health Literacy.* Presented to the Primary Care Research Fellowship Program, University of Maryland School of Medicine and Johns Hopkins University, General Pediatrics Research Center (April 12, 2006)

DeForge, B.R., & Stewart, D.L. (2005). *The Impact of Health Literacy, Social Support, Internet Use and Doctor-Patient Relationships Relationship on Health Status and Health Service.* Presented at the Third Annual Scientific Forum on Cancer and Other Tobacco-Related Diseases, Sponsored by Cigarette Restitution Fund to the University of Maryland Medical Group (University of Maryland School of Medicine, University of Maryland Baltimore, and University of Maryland Medical System), Baltimore, Maryland (June 6-7, 2005).

PROJECT NAME: U-56 Pilot Outreach Project-UMES

ABSTRACT: The overall mission of this Partnership is to address the disparities in cancer morbidity and mortality in Maryland's minority populations on the Eastern Shore region and in Baltimore City through cancer research and outreach. The objective of the Pilot project is to use community based participatory research principles to develop a community based African American cancer disparities research intervention in rural Somerset County, Maryland.

PRINCIPAL INVESTIGATOR: Llewellyn Cornelius, PHD, University of Maryland School of Social Work

FUNDING SOURCES: National Institutes of Health-National Cancer Institute

AMOUNT OF FUNDING: \$160,000

PROJECT DATES: 2005-2007 (Possible support through 2008).

PROJECT NAME: University of Maryland Center for Health Disparities Research, Training, and Outreach

ABSTRACT: The objective of this grant is to establish the University of Maryland Center for Health Disparities Research, Training, and Outreach, a partnership between two University System of Maryland institutions, the University of Maryland School of Medicine (UMSOM and designated institution) and the University of Eastern Shore (UMES collaborating and Minority serving institution).

PRINCIPAL INVESTIGATOR: Dr. Donald Wilson

CO-INVESTIGATOR: Llewellyn Cornelius, PhD, University of Maryland, School of Social Work

FUNDING SOURCES: National Institutes of Health- National Center on Minority Health and Health Disparities

AMOUNT OF FUNDING: \$1,326,000.

PROJECT DATES: 8/1/03-7/31/08

HOMELESSNESS:

PROJECT NAME: Homeless Provider Survey of Primary Care Physicians in Maryland

ABSTRACT: Objective: A survey of primary care physicians in the State of Maryland to inquire about the health care they provide to low-income and homeless persons.

Sample: A proportional sample of 500 primary care physicians was randomly selected from a mailing list of licensed physicians acquired from the Office of Primary Care, Department of Health and Mental Hygiene, State of Maryland. The mailing list was separated into three specialties: internal medicine, family medicine, and pediatrics. The list contains names and addresses (street, city, state and zip code) of practicing physicians in Maryland. In addition, a survey was sent to county health officials (n=15) and directors of community health centers (n=75). Procedure: The 17-item questionnaire was mailed to physicians with a stamped self-addressed return envelope. Each individual was assigned an identification number for mailing purposes. After four weeks, individuals who have not returned the questionnaire were sent another in the mail asking for them to complete and return it as soon as possible. No further contact was made after the second mailing. No identifying information was included in the database. Questionnaire: The questionnaire asked respondents what county their practice is located, whether the practice is urban, suburban or rural, and what medical specialty do they identify with (Family Medicine, Pediatrics, General Practice, Internal Medicine). A screening

question was asked whether they provide health care to underserved individuals, low income/poor individuals, and/or homeless individuals. If they did not care for any of these individuals, then they are instructed to return the questionnaire. If they provided care to these individuals, then they were asked to answer several more questions regarding how many homeless people they cared for, the typical acute and chronic diseases they treated in this population, whether they employed any special support staff to care for homeless patients, what agencies they used in the care for homeless patients, if they received any special funds to care for homeless individuals, who in their office would be available for training specific to the needs of homeless individuals, what they believed are the 5 most important needs of your homeless patients, how well trained do they feel they are in addressing the needs of homeless patients, what resources would they find helpful in caring for your homeless patients, and what kinds of topics and skills are important to include in a curriculum targeted for safety-net providers who care for homeless individuals.

PRINCIPAL INVESTIGATORS: David Stewart, MD, MPH., University of Maryland School of Medicine

Bruce R. DeForge, PhD

Angie Battaglia, MS

FUNDING SOURCE: State of Maryland, Department of Health and Mental Hygiene (DHMH), Office of Primary Care.

PROJECT DATES: 2001-2002

PRODUCTS:

Final Report

Stewart, D.L., DeForge, B.R., Battaglia, A., and Graham, L. (2003). Survey of Maryland Primary Care Physicians about Providing Healthcare to Homeless Individuals

PROJECT NAME: Social Capital and the Homeless

ABSTRACT:

The purpose of this study is to collect data that addresses the various aspects of social capital in individuals who are either homeless or at risk for homelessness. Building on the work of Coleman (1994), who hypothesized that the family provides the core and/or the building block for developing social networks, we will apply this model to persons who are homeless. Moreover, Coleman (1994) argued that social capital and human capital complement one another. Coleman (1994) argued that those people who lack social capital have eliminated their opportunity to share the human capital (the skills and knowledge the other people possess) and the physical capital (the material resources available within in a community) that the other significant people in their community possess. Many people who are homeless have lost contact and/or families may have terminated contact because of perceived lack of support for established values, i.e., the person who is homeless is perceived to not want to work, does not take the responsibility, and/or engages in some noxious set of behaviors, such as substance use and/or mental illness. Helping people who are homeless repair broken relationships and forge new ones poses a significant challenge. Social capital for the most part focuses on social cohesion and trust, social/economic resources in the community, interpersonal trust, reciprocity and mutual aid, appraisal, belonging, solidarity and tangible support. A community with strong bonds is especially important resource for the poor, because social capital can be used as a substitute for human and physical capital (World Bank, 2002). The World Bank has funded efforts to improve the social capital of several impoverished and developing countries to combat poverty and it

seuale. Research Design: We are planning to conduct a cross sectional survey of homeless men and women who use two homeless service providers in Anne Arundel County: Severna Park Assistance Network (SPAN) and North County Emergency Outreach Network (NCEON)
Sample: We are planning to recruit 200 individuals who are currently using the services of either SPAN and/or NCEON. The individuals must be 18 years of age and older and either currently homeless or at-risk for homelessness. There are no restrictions on gender, race, or ethnic background for participation.

Data Analysis: The initial analysis will focus the description of the various components of social capital that homeless and at-risk-homeless individuals experience. Each scale will be derived according to their scoring algorithm and its psychometric properties assessed (internal reliability using Cronbach's alpha). We plan to develop a structural equation model that will begin to explain the potential impacts that limited social capital may have on physical and mental health, housing, employment, use of services and spiritual well-being.

PRINCIPAL INVESTIGATOR: John R. Belcher, PhD, MDiv

Co-Investigators: Bruce R. DeForge, PhD

David A. Zanis, PhD

FUNDING SOURCE: Designated Research Initiative Funds (DRIF), University of Maryland

AMOUNT OF FUNDING: \$19,078

PROJECT DATES: 7-1-2003- 6-30-2004

PRODUCTS:

Refereed Journal

DeForge, B.R., Belcher, J.R., O'Rourke, M. & Lindsey, M. A. (In Press). Personal resources and homelessness in early life: Predictors for depression in consumers of homeless multi-service centers. *Journal of Human Behavior in the Social Environment*

Belcher, J.R., DeForge, B.R. & Zanis, D.A. (2005). Why has the Social Work profession lost sight of how to end homelessness? *Journal of Progressive Human Services, 16(2)*, 5-23.

Selected Presentations

Belcher, J.R., & DeForge, B.R. (2004). *Social Capital: A Central Concept in Resolving Homelessness* Presented at the conference, "Building Comprehensive Services for the Homeless." Sponsored by the Chesapeake Health Education Program (CHEP) and the Veterans Administration Medical Center (VAMC), Perry Point (March 17, 2004).

HOUSING:

PROJECT NAME: Baltimore Affordable Housing Audit

ABSTRACT: To survey housing problems and opportunities for the city of Baltimore for the Baltimore Community Foundation

PRINCIPAL INVESTIGATOR: Steven Soifer, PhD

Co-Investigators: Diane Bell, Danise Jones-Dorsey, Pat Payne, Susan Williams, Mitch Klein

FUNDING SOURCE: Baltimore Community Foundation

AMOUNT OF FUNDING: \$130,000

PROJECT DATES: January - May 2003

PRODUCTS:

Final Report

Affordable Housing Opportunity Audit: Creating Affordable Housing in Safe Communities in Greater Baltimore.

PROJECT NAME: Park Heights Healthy Homes Demonstration and Education Project

ABSTRACT: This pilot project proposes to develop, demonstrate and promote cost-effective, preventive measures to reduce multiple safety and health hazards in houses which produce serious diseases and injuries to children under the age of 18 years. Year two funding is likely to be awarded, contingent upon the demonstration of the feasibility and the cost-effectiveness of the first year pilot. The objectives of this pilot project are to 1) develop and implement a cost-effective protocol to screen homes for environmental hazards that are known to exist in older, inner-city homes 2) develop interview schedules to assess residents' health status, access to health care, and knowledge and behaviors related to these environmental hazards; 3) build community-based capacity to assess, reduce, and evaluate reduction of environmental hazards in homes; 4) develop, implement and evaluate cost-effective protocols for creating "Healthy Homes" by reducing environmental hazards to human health and educating resident about ways in which they can reduce their exposure to these risks; 4) develop, implement and evaluate an education program to sustain the maintenance of Healthy Homes in Park Heights; 5) through partnership with the Association of Community Organization for Reform Now (ACORN), design a model for reproducibility of this Healthy Homes program for use in other inner city neighborhoods throughout the U.S.; and, 6) evaluate the impact of the program in promoting health among residents of Park Heights.

PRINCIPAL INVESTIGATOR: Claudia Smith, PhD, RN

Co-Investigators: Barbara Sattler, PhD, RN, Carol O'Neil, PhD, RN, Bruce R. DeForge, PhD, Dennis Livingston, Albert Donnay and Association of Community Organization for Reform Now (ACORN)

FUNDING SOURCE: Department of Housing and Urban Development (HUD)

AMOUNT OF FUNDING: \$485,000

PROJECT DATES: September 2002 to August 2003

PRODUCTS:

Final Report

MENTAL HEALTH:

PROJECT NAME: A Family-Focused Intervention in the Treatment of Depression among African Americans

ABSTRACT:

PRINCIPAL INVESTIGATOR: Linda Rose, Ph.D. (Johns Hopkins School of Nursing). **CO-**

INVESTIGATOR: Michael Lindsey, PhD, University of Maryland School of Social Work (10% effort)

FUNDING SOURCE: Submitted to: National Institute of Mental Health.

AMOUNT OF FUNDING: unfunded

PROJECT DATES: Date submitted: February 2007.

PROJECT NAME: An Evaluation Study of the In-Home Intervention Project for Children in Five Maryland Counties

ABSTRACT: In partnership with the University of Maryland, School of Social Work, the Systems Evaluation Center at the University of Maryland, School of Medicine, and the Anne Arundel County Mental Health Agency, Inc., the overall goal of this research proposal will be to refine and prepare for more rigorous evaluation the In Home Intervention Program (IHIP-C). This program provides behavioral health services for children and families in 5 Maryland counties (Anne Arundel, Charles, Prince George's, Calvert, and St. Mary's) to improve family functioning and prevent out-of-home placements, and to assist children in the reduction of anti-social behaviors. This study involves the following two interconnected projects. The first project is a formative research study to refine the IHIP-C model. A major goal of this project is to work with key personnel involved with the intervention to specify the IHIP-C model, and to confirm its implementation procedures. The second project will be developed from the first and examines, through a quasi-experimental approach, the IHIP-C Program as an intervention that: 1) improves family functioning, thus preventing the need for out-of-home placements, and 2) reduces child anti-social behaviors.

PRINCIPAL INVESTIGATOR: Michael Lindsey, PhD

FUNDING SOURCE: Anne Arundel County Mental Health Agency, Inc.

AMOUNT OF FUNDING: \$150,000

PROJECT DATES: June 1, 2006 - May 31, 2009

PROJECT NAME: Internalized Stigma Pilot Project Description

ABSTRACT: Negative stereotypes about people who have serious mental illness (SMI) are all too common. Internalizing these messages is common and detrimental to the coping, motivation, empowerment and recovery of people with SMI. Therefore, our research team has developed a six-session class-type intervention designed to help veterans with SMI resist and counteract this negative internalization. We intend to use the pilot results to refine the intervention and make it available to assist others with SMI in the future. The proposed study is a first pilot of this new intervention. Through it we seek to assess the feasibility and acceptability of the intervention among veterans with SMI, to seek their input to refine and improve the class and to measure the effect of class participation on several standardized measures of relevant variables.

PRINCIPAL INVESTIGATOR: Alicia Lucksted, PhD

Co-Investigators: Aaron Murray-Swank, PhD, Jennifer Boyd Ritsher, PhD, Bruce DeForge, PhD, Amy Drapalski, PhD, and Richard Goldberg PhD

FUNDING SOURCE: U.S. Department of Veterans Affairs (VA): Mental Illness Research, Education and Clinical Center (MIRECC)

AMOUNT OF FUNDING: \$30,000

PROJECT DATES: July 2007-June 2008 received approval (pilot project)

PROJECT NAME: Mental Health Services to Minority Persons with HIV/AIDS.

ABSTRACT: Objective: The People Encouraging People (PEP) Minority HIV/AIDS Mental Health Program has received funding from the Department of Health and Human Services (DHHS), Substance Abuse and Mental Health Service Administration (SAMHSA) to provide comprehensive package of medical and mental health services to clients with HIV/AIDS living in the Lower Parks Heights community of Baltimore City. The evaluation of the PEP program will focus on its ability to provide HIV/AIDS clients with appropriate health and mental health

services that are delivered in a timely fashion, are appropriate, and are beneficial to the client. The overall cost of services will be examined. The PEP program's overall goal is to assure that 80% infected, affected or at risk persons in the Lower Park Heights community have been screened, referred for and provided substance abuse, HIV, mental health and social services in a holistic and comprehensive fashion. The project will reduce barriers to care for hard to reach populations and provide assistance to clients to prevent relapse. The PEP program will specifically target: African-Americans, homeless persons, prostituted women, substance abusers, and severely mentally ill and homebound individuals with HIV/AIDS.

Evaluation: The study design that the PEP program will use is a quasi-experimental, one-group pretest design with follow-up assessment. A process and outcome evaluation will be performed. A process evaluation is a form of program monitoring that determines if a program is delivering its intervention as intended to the target recipients (Rossi, Freeman, & Lipsey, 1999). The process evaluation will involve focus groups and interviews with clients, staff and community key informants. Outcome evaluation will assess the program's ability to change or impact a specific social and/or health condition (Rossi, Freeman, & Lipsey, 1999). We will use Patton's (1989) guide to evaluation in which we will "systematically collect information about the activities, characteristics, and outcomes of programs for use by specific people to reduce uncertainties, improve effectiveness, and make decisions with regard to what those programs are doing and affecting (p. 14)." The evaluation will help the project determine if the program's activities are being implemented as intended, to assess the effects on clients, to improve the program's services, to obtain future funding, to disseminate information and to meet requirements, such as from the federal government. This project has identified that it will serve 100 HIV/AIDS cases per year with the target population being African-American. The program's objective is to provide these clients with timely access to appropriate health and mental health services. The evaluation will determine if these services are delivered in a timely fashion, if they are appropriate, and if they are beneficial. The costs of services will be assessed. The project intends to conduct focus groups and unstructured in-depth interviews with clients, staff and citizens in the community. The focus groups will be invited in the sharing of ideas and experiences of people living with or affected by HIV/AIDS, medical providers, substance treatment providers, mental health providers, program planners, and other local experts.

PRINCIPAL INVESTIGATOR: Dimitrios Cavathas, MSW, People Encouraging People, Inc.

Co-Investigators: Bruce R. DeForge, PhD, and John R. Belcher, PhD, MDiv

FUNDING SOURCE: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services (CMHS) and Center for Substance Abuse Treatment (CSAT)

AMOUNT OF FUNDING: \$400,000

PROJECT DATES: 9/1/01-8/31/06

PROJECT NAME: Enhancing School-Based Mental Health Services for Inner-City Children and Families

PROJECT DESCRIPTION: Aggressive, disruptive behaviors account for the most commonly reported child mental health problems in the school environment. Aggressive, disruptive behavioral expressions are often precursors to more serious problems in schools, including school failure, suspensions and dropouts. Research indicates that children reared in resource poor environments have increased incidences of aggressive, disruptive behaviors. Urban, African American children are of particular interest given that they are: 1) more likely than youth from other groups to live in low-income families and to reside in neighborhoods characterized by high violence and drug exposure, factors linked

to the expressions of aggression and conduct-related problems; and 2) particularly unlikely to receive mental health treatment when it is needed due to negative perceptions of services or stigma associated with having a mental health problem. To address these issues among urban youth with identified behavioral problems in school and their caregivers, this project will rely on a strong theoretical model of behavior, the Unified Theory of Behavior (UTB) to identify the proximal factors associated with engagement in SMH services among a sample of African American youth and their primary caregivers. Application of the UTB to family engagement in SMH services will facilitate the target of core processes regarding family engagement, including relationships between families and clinicians, families' sense of self-efficacy, expectations and attributions regarding mental health services, etc. When targeted, these core processes might explain processes by which families become engaged, as well the development of targeted engagement interventions. There are two related studies in this project. Study 1 uses mixed methods (focus groups and a cross-sectional, descriptive study) with youth and caregivers to explore micro/macro-level processes, including mediators and moderators as outlined in the UTB, while Study 2 focuses on the development and testing of the engagement intervention. The intervention will be first piloted in an open trial and then tested in a small randomized controlled study.

PRINCIPAL INVESTIGATOR: Michael Lindsey, PhD

FUNDING SOURCE: National Institute of Mental Health (*in review*)

AMOUNT OF FUNDING: Pending

PROJECT DATES: 2007-2012

PROJECT NAME: Mental Health Promotion for Children and Adolescents in Foster Care in Schools

PROJECT DESCRIPTION: This project will assist efforts to transform mental health and child serving systems in Maryland by providing support to the improvement and expansion of mental health services for youth in foster care through service provision in schools. This purposeful effort to better connect high quality and evidence-based mental health services to youth in foster care in schools builds from a number of related initiatives and resources. These include the Blueprint Committee on School Mental Health, commissioned by the Mental Hygiene Administration and charged with improving mental health services in Maryland Schools, a strong statewide initiative to support schools through positive behavior intervention and support, and statewide resources and connections for this work through the Maryland School Mental Health Alliance (see www.msmha.org). In addition, the state holds one of two national centers aimed at advancing effective mental health services, the *Center for School Mental Health Analysis and Action* (CSMHA) at the University of Maryland (see <http://csmha.umaryland.edu>). The Goal of this grant is to assist the State of Maryland's Transformation Grant in its support of the Department of Health and Mental Hygiene, Mental Hygiene Administration (MHA), Department of Human Resources (DHR), and local Departments of Social Services, in collaboration with the Maryland State Department of Education (MSDE), the Maryland Department of Juvenile Services, and other state and local agencies and initiatives in integrating services and improving outcomes for children, adolescents, and graduates of Maryland's foster care system.

PRINCIPAL INVESTIGATOR: Mark D. Weist, PhD

CO-INVESTIGATOR: Michael Lindsey, PhD, Sharon Stephan, PhD, Nancy Lever, PhD

FUNDING SOURCE: Maryland Mental Hygiene Administration – Maryland Transformation Grant

AMOUNT OF FUNDING: \$150,000 annually

PROJECT DATES: 2007-2008

POLICY:

PROJECT NAME: The Federal Judiciary, the Supreme Court and the Issue of ‘Death with Dignity’: The Interface of Public Law and Bioethics

ABSTRACT: An analysis of the bioethical and constitutional law aspects of federal appeals court opinions and Supreme Court opinions related to death with dignity decisions. Also an examination of the role of the federal courts in shaping social policy.

PRINCIPAL INVESTIGATOR: Howard A. Palley, PhD

PRODUCTS:

Refereed Journal

Palley, H. (2003). The federal judiciary, the Supreme Court and the issue of ‘death with dignity’: The interface of public law and bioethics. *International Journal of the Humanities*. 1, 1109-1124.

PROJECT NAME: Long-Term Care Policy for Older Americans

ABSTRACT: An ongoing study of the current status and future prospects of long-term care policy for the elderly in the United States.

PRINCIPAL INVESTIGATOR: Howard A. Palley, PhD

PRODUCTS:

Refereed Journal

Palley, H. A. (2003). Long-term care policy for older Americans. *Journal of Health and Social Policy*, 16, 7-18.

PROJECT NAME: Maryland Judiciary, Administrative Office of the Courts Collaborative Research Program – Evaluation of Truancy Courts in Maryland

ABSTRACT: Truancy or unexcused absences among school-aged children, defined as a violation of a compulsory school attendance law is a serious national problem. Truancy is one of the four¹ major status offenses defined as acts or types of conduct that are offenses only when committed or engaged in by a juvenile and that can be adjudicated only by a juvenile court. The 2007 Maryland General Assembly established a juvenile reduction pilot program and required an evaluation of existing truancy courts in Maryland. The collaboration between the Administrative Office of the Courts and the Ruth H. Young Center for Families is intended to meet the requirements for this evaluation.

PRINCIPAL INVESTIGATOR: Diane DePanfilis, Ph.D.

CO-PRINCIPAL INVESTIGATOR: Clara Daining, Ph.D.

FUNDING SOURCE: Maryland Administrative Office of the Courts

AMOUNT OF FUNDING: \$105,000

PROJECT DATES: 6/1/2007-6/30/2008

SOCIAL WORK TREATMENT:

PROJECT NAME: Using qualitative methods to understand results from a group behavioral treatment intervention for persons with co-occurring disorders

ABSTRACT: This supplement to NIDA parent grant (R01) will begin data collection in June 2007 and is approved for 2 years. One master’s student and one doctoral student have been hired to assist with the start-up of the project this summer. Other funds will be available for

¹ Other status offenses include runaway, ungovernability (beyond the control of parents), and state liquor law violations.

interviewing subjects and transcription of interviews. In addition, student will obtain status at the VA to work on research which might create additional opportunities for them.

PRINCIPAL INVESTIGATOR: Deborah Gioia, PhD, University of Maryland School of Social Work

FUNDING SOURCE: VA MIRECC

AMOUNT OF FUNDING: \$16,000

PROJECT DATES: June 2007 -2009

SUBSTANCE ABUSE:

PROJECT NAME: Baltimore Needle Exchange Program Evaluation

Abstract Proposed is a continuing evaluation of the Baltimore Needle Exchange Program (NEP), to examine its impact on HIV seroincidence, levels of syringe sharing, health care utilization and referrals to drug treatment. Continued studies of the long-term impact of NEP, and specific components that optimize its effectiveness, are crucial for public health planning and informing policy. An important new aspect of our evaluation focuses on the effectiveness of NEP as a bridge to drug treatment. Based on our experience only one third of NEP attendees requesting referrals actually enter treatment, and 68 percent return to NEP to exchange needles within a year. We recently showed that IDUs who remain in treatment for at least one year are 5 times less likely to return to NEP taking into account levels of ongoing drug use. These data provide a powerful rationale for using a second-tiered intervention at NEP to reinforce the referral process and improve treatment outcomes. The specific aims of this project are: 1) To continue to compare rates of drug-related risk behaviors, HIV seroincidence and health care utilization patterns among participants and non-participants of the Baltimore NEP, and to evaluate innovative components such as i) van vs. pharmacy-based venues, ii) daytime vs. evening NEP services; 2) To determine whether a strengths-based case management (SBCM) intervention significantly improves rates of entry, re-entry and retention in drug treatment among NEP attendees referred to opioid-agonist drug treatment, 3) To determine the cost-effectiveness of a SBCM intervention aimed at improving outcomes achieved through referring NEP participants to opioid-agonist drug treatment programs. To meet Aim 1, comparisons of NEP attendees vs. non-attendees will be conducted using survival analysis and Poisson regression. Descriptive analyses will be used to compare IDUs accessing various types of NEP services. For Aim 2, we will conduct a randomized trial of SBCM vs. standard referrals (i.e., 200 subjects per arm). Follow-up will continue 18 months post-randomization. Logistic regression will be used to identify predictors of entry vs. non-entry, treating subject allocation as a covariate. Survival analysis will be used to compare retention across groups. For Aim 3, we will assess the costs of drug treatment with and without the intervention, and will determine whether the additional cost of SBCM is justified by the economic returns from lower rates of drug use, morbidity, economically motivated crime, and higher levels of employment. In meeting the above specific aims, the proposed study will have an important impact on policies surrounding NEP in the United States and elsewhere.

PRINCIPAL INVESTIGATOR: Steffanie A. Strathdee PhD

CO-INVESTIGATORS: Llewellyn J. Cornelius, PhD., Jackie Lloyd, PhD.

FUNDING SOURCE: National Institute on Drug Abuse

AMOUNT OF FUNDING: School of Social Work University of Maryland \$137,641

PROJECT DATES: July 1994-September 2004

PRODUCTS:

Cornelius, LJ, Lloyd JJ, Bishai D., Latkin CA, Huettner S, Brown M, Havens JR, Ricketts EP, Bankins, KA, Rapp CA, Strathdee SA (2006). The Treatment Retention Intervention: A case study of an Evaluation of a Case Management Intervention to Improve Treatment Outcomes for Injection Drug Users. *Journal of the Association for Academic Minority Physicians. Vol 17* (Summer): 44-53.

Strathdee SA, Ricketts EP, Huettner S, Cornelius L, Bishai D, Havens JR, Beilenson P, Rapp C, Lloyd JJ, Latkin CA. (2005) Facilitating entry into drug treatment among injection drug users referred from a needle exchange program: Results from a community-based behavioral intervention trial. *Drug Alcohol Depend.* 83(3) 225-232.

Lloyd JJ, Ricketts EP, Strathdee SA, Cornelius LJ, Bishai D, Huettner S, Havens JR, Latkin C.(2005). Social contextual factors associated with entry into opiate agonist treatment among injection drug users. *Am J Drug Alcohol Abuse.*;31(4):555-70.

Cornelius, LJ, Bishai, D., Latkin, C., Huettner, S., Brown, M., Pilibosian, E, Strathdee, SA. "A descriptive profile of HIV negative and HIV positive Needle Exchange Program recipients". *The 15th Annual Social Work and AIDS Conference*, May 29-June 1, 2003 (juried presentation).

PROJECT NAME: An Assessment of the Needs for Treatment of Jewish Drug Abusers

ABSTRACT: During the winter and spring of 2005 a study, undertaken under the auspices of THE ASSOCIATED: Baltimore's Jewish Community Federation, which was a needs assessment of recovering drug addicts in the Jewish Community of Metropolitan Baltimore for residential services commonly named "halfway houses." The study was an attempt to take a multiple-data-point perspective in order to focus on a real-world decision with the benefit of evidence gathered from a variety of research methods. Data were provided by interviews with influential professionals who treat drug addicts, religious leaders of all Jewish denominations in the community, professional social workers, educators, the staff of THE ASSOCIATED drug treatment agency, JADAS, and recovering drug addicts themselves, through two planned group meetings held in the community. In addition, a mailed questionnaire study was conducted of a selected sample of physicians, including psychiatrists, who are known for their interest in and skills at treating persons with addictive behavior patterns. Another survey was conducted of known residential treatment centers in Central Maryland for drug addicts. A person noted and identified as a liaison with refugees from the Former Soviet Union was interviewed in order to have the study findings benefit from his perspectives about the community he knows best. Finally, a population analysis was done of census tracts and zip codes which house the bulk of Metropolitan Baltimore's Jewish residents to ascertain the patterns of treatment at state facilities which serve these areas.

PRINCIPAL INVESTIGATOR: Paul Ephross, PhD, , Muriel Gray, PhD, Wallace Mandell, PhD of Bloomberg School of Public Health, Johns Hopkins University.

FUNDING SOURCE: Baltimore Jewish Community Federation

AMOUNT OF FUNDING: \$20,000

PROJECT DATES: 2004

PROJECT NAME: Program for Drug Abusing Women

PRINCIPAL INVESTIGATOR: Maureen Schuler, PhD, University of Maryland School of Medicine

Biostatistician: Donna Harrington, PhD

FUNDING SOURCE: National Institute on Drug Abuse

PROJECT DATES: 2001 – 2003

PRODUCTS:

Refereed Journals

Nair, P., Schuler, M. E., Black, M. M., Kettinger, L., & Harrington, D. (2003). Cumulative environmental risk in substance abusing women: Early intervention, parenting stress, child abuse potential and child development. *Child Abuse & Neglect*, 27, 997-1017.

Schuler, M. E., Nair, P., & Harrington, D. (2003). Developmental outcome of drug-exposed children through 30 months: A comparison of Bayley and Bayley-II. *Psychological Assessment*, 15, 435-438.

Selected Presentations

Schuler, M. E., Nair, P., & Harrington, D. (April 2003). Cognitive outcomes among drug-exposed children: Effects of an early home intervention from 3 to 6 years. Presented at the 2003 Biennial meeting of the Society for Research in Child Development, Tampa, FL.

VICTIM SERVICES:

PROJECT NAME: Developing a Comprehensive Assessment and Evaluation System for Victim Services

ABSTRACT: This project is a funded statewide initiative in the Commonwealth of Pennsylvania to examine and develop a comprehensive assessment and evaluation system for victim services. This endeavor at a state level is the first in the country. The grants from the Pennsylvania Commission on Crime and Delinquency, Richard King Mellon Foundation, Staunton Farm Foundation supported me in the past to hire a doctoral level student to conduct data entry and management and provided salary support for my statistical consulting. As the consultant and evaluator of this \$200,000 grant, Dr. Collins was successful transferring the IRB materials to the University of Maryland and is currently negotiating a way to bring funding to the University of Maryland for this project as she has presented the results from 2 of the 5 phases of data collection.

PRINCIPAL INVESTIGATOR: Kathryn Collins, PhD, University of Maryland School of Social Work (Consultant and Evaluator)

FUNDING SOURCE: Pennsylvania Commission on Crime and Delinquency, Richard King Mellon Foundation, Staunton Farm Foundation

AMOUNT OF FUNDING: \$200,000