



THE FELLOW

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Peer Review

*Community Based
Participatory Research at
the Mwai Clinic:*

*Development of the ART
Survey by*

Heather Klusaritz

Page 2

Significantly Statistical Did You Know...

Page 3

Peer Cites Sources & Tips

Page 4

New Innovations & Collaborations for the DSSC

As the Spring Semester begins, we take time to reflect on the events of the past several months. First, our colloquia co-chairs, Francis Barchi and Sungkyu Lee, organized two very successful colloquia that were attended by doctoral students and faculty. In October, Dr. Carol Spigner, standing faculty here at the School of Social Policy & Practice, spoke about her experience as the co-chair of The Philadelphia Child Welfare Review Panel and about the Panel's findings. She also discussed the process of using research to inform policy and how complicated it can be to implement change in government agencies. In December, the colloquium featured Dr. Paul Root Wolpe, who is a Senior Faculty Associate in the Center for Bioethics, an Associate Professor of Sociology in Psychiatry in the Department of Psychiatry at the University of Pennsylvania, and also holds a number of additional joint appointments across the university. Dr. Wolpe used the controversial issue of stem cells to illustrate the complicated interplay between politics, interest groups, researchers, and policy development. The December colloquium was the first doctoral student colloquium that offered Continuing Education Units (CEUs).

Excitement has also been in the air at SP2 as numerous faculty candidates have been interviewing for three open tenure-track positions. The doctoral students have been actively involved in this process--from attending the interesting job talks to meeting in small groups to get to know the candidates better. We look forward to continuing our involvement next semester and picking up tips for when it our turn to be on the job market!

Thanks to the generosity of the SP2 community, the second annual Winter Essentials Drive, in collaboration with the SP2 Student Council, was as successful as last year! With locations in three places on campus, we were able to collect several carloads of blankets, coats, warm clothing and toiletries to be donated to New Visions, a day shelter in Camden, New Jersey. We hope to continue this tradition every year as an integral part of our commitment to give back to the community.

Finally, as can be seen from the contributions in this issue of the Fellow, the doctoral students have also been very busy pursuing their academic interests. We hope you enjoy this issue of The Fellow and we look forward to the many activities that the Spring semester holds.

Sincerely,
Sara Wiesel Cullen
Kristie A. Thomas
DSSC Co-chairs



*A donation drop-box for the
Winter Essentials Drive*

The official peer-reviewed publication of doctoral students at the School of Social Policy & Practice at the University of Pennsylvania

PEER REVIEW

We all work hard writing papers for class, and many papers are worthy of more than just a letter grade. *The Fellow* provides an outlet to share unpublished manuscripts, essays, book reviews and editorials with colleagues in an effort to distribute ideas, spark debates, obtain feedback, encourage journal submissions, and support interdisciplinary collaborations. Full references are available upon request to the authors.

Community Based Participatory Research at the Mwai Clinic: Development of the ART Survey

by Heather Klusaritz | hklusar2@sp2.upenn.edu

This past summer I traveled to Mchinji, Malawi as a UPenn Global Health Framework Fellow. My work in Malawi was linked to the Social Networks Project (SNP) of the Population Studies Center of the University of Pennsylvania. In affiliation with the Malawi College of Medicine and Kamuzu College of Nursing, SNP operates a number of longitudinal social-demographic field projects. SNP has had an established research presence in Malawi since 1998, and enjoys strong relationships with the Colleges of Medicine and Nursing, as well as many health professionals at the district hospitals and HIV/AIDS-oriented NGO's.

Malawi is a flourishing environment for researchers of all fields because of the stable government, small land area, and high rate of HIV/AIDS. Recent estimates of the national HIV prevalence for the Malawian adult population range from 12.7-14 percent (Joint United Nations Programme on HIV/AIDS, 2006; Population Reference Bureau, 2007). As a result of this devastatingly mature epidemic, international funding for treatment and prevention efforts as well research is abundant. Despite progress in improving access to HIV/AIDS testing and treatment programs, the political, socioeconomic, and cultural factors which influence the spread of HIV are not well understood and rigorous evaluations of these programs has not been undertaken.

My research interests focus on access to care for marginalized populations, specifically access to primary, preventive care and my time in Malawi was spent working on a project under development at the Mchinji District Hospital Research Center. Invest in Knowledge Initiative (IKI), a United States 501(c)3 nonprofit organization operating in Malawi, was founded in 2005 by U.S. graduate students. IKI established a research office at the Mchinji District Hospital, approximately 15 kilometers from the Malawi-Zambia border in order to invest in education, capacity, and to build local expertise in social, economic, and health research (IKI, 2007). IKI's Malawian project management, data collection, and data entry team works collaboratively with U.S. investigators. One of IKI's current undertakings is to work more closely with the clinical staff of the District Hospital to develop collaborative research projects that benefit the hospital and its patients. This endeavor is loosely based on the Community Participatory Research (CBPR) model and its first joint effort is the development of a survey based out of the hospital's

anti-retroviral treatment (ART) center, the Mwai Clinic.

Mwai Clinic is staffed by a physician, clinical officers (providers who in the role of a physician assistant), nurses, and a clinic clerk. It was essential to get "buy-in" from all members of the clinic staff, not only because of their expertise in VCT uptake and ART enrollment, but also because IKI has a strong commitment to engage the clinicians in research that is meaningful to them and that will help them to improve patient services. Part of our charge in working with the Mwai clinicians, was to build relationships between IKI and Mwai staff that would extend beyond this first project, and to foster a sense of "ownership" of the survey project on the part of the Mwai staff. This was not to be yet another survey project, where foreign investigators come over with their team with a ready made survey and employ Malawians for a few months out of the year to help answer the sociological questions of the foreign researchers. This survey was to be collaborative; one that answers questions of interest to foreign researchers, but first and foremost to answer questions the Mwai clinicians had with the primary goal of improving clinic service provision. Through weeks of relationship building we were able to engage all of the Mwai staff in the survey development process.

The survey working group met on a weekly basis for survey development, translation, piloting and after many iterations, we came to consensus on the final survey. The questions were driven almost entirely by issues of health care services the Mwai staff wanted to investigate including sexual behaviors, HIV/AIDS knowledge, general health care utilization, and knowledge and experience with ART clinics. Two survey sections were developed by the Global Health Framework Fellows including one on side effects and adherence to ART regimens and another on access to general, preventive health care services pre- and post-commencing ART.

The establishment of a CBPR model for research at IKI and the ART survey development were constructive learning experiences in that they provided a true picture of the logistical considerations necessary to plan, implement and conduct health research fieldwork in a developing nation. We were exposed to and learned tremendously about all facets of the process: the importance of developing relationships, the importance of investing in education and infrastructure, the importance of culture in driving work ethic and flow, financial constraints, to handling computer-crashing viruses in the middle of nowhere, how to handle staffing issues when projects compete for personnel resources, and how to set aside our Western mindset of time. All of these lessons were invaluable and will serve as a guide in future global research endeavors.

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SIGNIFICANTLY STATISTICAL

The Queen of Statistics-Regression Analysis: Part 1

The highlight of inferential statistics may be regression analysis. Regression analysis simply refers to a statistical technique that analyzes the relationship between one dependent variable and one or more independent variables. Generally, in regression analysis, an independent variable and a dependent variable are regarded as cause and effect, respectively. A number of social phenomena result from various causes. Thus, in order to examine the casual relationship of a given social phenomenon, researchers should consider diverse factors that may affect the phenomenon. Regression analysis makes it possible to separate the effects of various independent variables on a dependent variable so that researchers can examine the unique contribution of each independent variable, controlling for the effects of other independent variables. This “statistical control” function is especially important for many social science studies, since in many cases social scientists are forced to use non-experimental design.

In experimental design, unlike non-experimental design, researcher can control the effects of other factors (or extraneous variables) through random assignment (or randomization), and therefore can focus on the “pure” effect of an interesting variable. For example, suppose that a researcher wants to investigate the impact of a job training program on employment among unemployed people. The best way to do that is to provide the job training program with some people (experimental group) and withhold it from others (control group). And then, a researcher may evaluate the effectiveness of the program by comparing the employment rates between two groups. For a valid experiment, a researcher has to make sure that people in the two groups are exactly same, except for the job training program participation. Employment can be affected by various factors such as gender, age, education level, and so on. Random assignment, coupled with large sample size, equalizes all possible characteristics of two groups by “probabilistic control” so that a researcher can examine the effect of the job training program, controlling for other covariates. What an ideal story!

Unfortunately, research in “real life” is never that smooth. In reality, the only available source to evaluate the effectiveness of job training program may be the administrative data or retrospective interview (To be honest, even obtaining these dataset is a matter of luck for many researchers). With these non-experimental studies, a researcher does not have options for ensuring that those who get the job training program and do not are similar in terms of personal characteristics. Let’s suppose that younger and higher

educated males are more likely to get a job regardless of job training program participation. Then a researcher has to control these three variables to examine the exact effect of job training program. How to do that? The direct and simple way is to select people who have the same condition and compare the employment rate between job training group and non-training group. For instance, a researcher may pick up 30 years-old and high school graduated men. Then s/he makes two groups (those who get the job training and those who do not) among them and compares the employment rate between these two group. As both groups consist of the same people in terms of age, education level, and gender, a researcher can assume that the difference of employment rates comes from job training program participation, the only difference between two groups. It looks good and works well theoretically. This method, however, is inefficient, considering sample size. Whenever a researcher adds control variables, the available sample size dramatically decreases. For example, even though a researcher collects the information of 1,000 people, s/he might find at best 10 people who are 30 years-old and high school graduated men. Since small sample size reduces statistical power and produces unreliable results, this limitation is a serious one. Then what is the alternative? The reason regression analysis has retained its popularity over 30 years is that it can splendidly deal with this problem. Regression analysis “statistically” controls for the effect of extraneous variables without reducing sample size. So regression analysis is regarded as the most representative multivariate analysis in which three or more variables are analyzed simultaneously. Recently, there are more sophisticated multivariate analyses such as Event History Analysis (EHA) and Hierarchical Linear Modeling (HLM). These advanced statistics, however, take root in the basic logic of regression analysis. With this perspective, no one can deny that regression analysis is the queen of statistics. Next time, we’ll see the beauty of regression analysis and how it works.

**Kim is a 4th year Ph.D. student & author of "Applied regression: Data analysis for social science," a book recently published in Korea.*



Did You Know...

The habit of double-spacing after sentences is a holdover from the days of typewriters. Double-spacing is neither necessary nor approved by APA format when using common word processors and fonts. If you are still in the habit of double-spacing in your papers and need to correct it, then try the “find and replace” tool in MS Word. Find “ “ (double space) and replace with “ “ (single space).

PUBLICATIONS

Mellow, J., Schlager, M. D., & **Caplan, J. M.** (in press). Using GIS to evaluate post-release prisoner services in Newark, New Jersey. *Journal of Criminal Justice*.

Jemmott, L. S., Jemmott, J. B., Hutchinson, M. K., & **Cederbaum, J. A.**, O'Leary, A. (in press). Translating research into practice: STI/HIV risk-reduction interventions in clinical practice settings. *Journal of Obstetrics, Gynecologic, and Neonatal Nursing*.

Teitelman, A. M., Ratcliffe, S. J., & **Cederbaum, J. A.** (in press). Parent-adolescent communication about sexual pressure, maternal norms about relationship power and STI/HIV protective behaviors of minority urban girls. *Journal of the American Psychiatric Nurses Association*.

Teitelman, A. M., Ratcliffe, S. J., **Dichter, M. E.**, & Sullivan, C. M. (in press). Recent and past intimate partner abuse and HIV risk among young women. *Journal of Obstetric, Gynecologic and Neonatal Nursing*.

Wittenberg, E., **Joshi, M.**, **Thomas, K. A.**, & McCloskey, L. A. (2007). Measuring the effect of intimate partner violence on health-related quality of life: A qualitative focus group study. *Health and Quality of Life Outcomes*, 5, 67.

Kim, T. K., & **Zurlo, K.** (in press). How economic globalization affects the welfare state? Focusing on the mediating effect of welfare regimes. *International Journal of Social Welfare*.

Polsky, D., Jha, A., Lave, J., Pauly, M., Cen L., **Klusaritz, H.**, Chen, Z., & Volpp, K. (in press). Short- and long-term mortality after an acute illness for elderly whites and blacks. *Health Services Research*.

Rubin, D., Downes, K., O'Reilly, A., **Mekonnen, R.**, Luan, X., & Localio, R. (in press). The impact of kinship care on behavioral well-being for children in out-of-home care. *Archives of Pediatrics & Adolescent Medicine*.

GRANTS/AWARDS

Caplan, J. M. (Co-PI) and Kinney, S. (Co-PI) received a one year grant from the JEHT Foundation to (1) determine the effects of positive and negative victim and non-victim input on parole release decisions in NJ and (2) conduct a national survey of paroling authorities in the US.

Dichter, M.E. (PI) received a Dissertation Grant Awards for Doctoral Candidates for Violence-Related Injury Prevention Research in Minority Communities from the Center for Disease Control and Prevention, National Center for Injury Prevention and Control. The project is entitled "Impact of Intimate Assault Arrest on Battered Women's Safety and Service Needs"

PRESENTATIONS

Caplan, J. M. (2007, November). Parole release decisions: Effects of positive and negative victim and non-victim input. American Society for Criminology Annual Conference, Atlanta, GA.

Caplan, J. M., **Cullen, S.W.**, & **Matejkowski, J.** (2007, November). Understanding the Impact of Mental Illness on Parole Eligibility and Release Dispositions. American Society for Criminology Annual Conference, Atlanta, GA

Cederbaum, J. A. (2007, November). Maternal HIV status, mother-daughter sexual risk communication, and adolescent behavioral beliefs. American Public Health Association Conference, Washington, DC.

Dichter, M. E., Rhodes, K. Cerulli, C., Kothari, C. (2007, November). "I was scared to press charges": IPV victim preferences for prosecution. American Society of Criminology Annual Meeting. Atlanta, GA.

Dichter, M. E. (2007, July). Relationship between battering, violence, and danger among adult female emergency department patients. International Family Violence and Child Victimization Research Conference. Portsmouth, NH.

Greenspan, I. (2007, November). Examining effectiveness in advocacy organizations using Bourdieu's forms of capital: A case study of the Negev Bedouin in Israel. Association for Research on Nonprofit Organizations and Voluntary Action (ARNOVA), Atlanta, GA.

Meinhard, A., **Greenspan, I.**, Paterson, J., & Livingstone, P. (2007, November). Association for Research on Reports from the field: Personal experiences of volunteers with psychiatric disabilities, Nonprofit Organizations and Voluntary Action (ARNOVA), Atlanta, GA.

Kim, T. K. (2008, January). The impact of globalization on the welfare state, Society for Social Work and Research Conference, Washington DC.

Kim, T. K., & **Zurlo, K.** (2007, November). Analyzing multilevel data using hierarchical linear modeling in Social Work research. CSWE Annual Planning Meeting

Klusaritz, H. A. (October, 2007). Field Supervision: Using the Strengths Based Approach with Social Work Students. 53rd Annual Program Meeting Council on Social Work Education.

Zurlo, K. A., & Shin, H. (2007). Major Factors Affecting the Utilization of Senior Welfare Centers: The Case of Korea. Paper presentation at the Gerontological Society of America (GSA) Conference, November 17, 2007 in San Francisco, CA.

Zurlo, K. & **Kim, T. K.** (2007, November). Empirical analysis of the factors affecting the performance of program participants. CSWE Annual Planning Meeting.

PHMC & CHDB

The Philadelphia Health Management Corporation (PHMC) was created in 1971 by the Philadelphia Department of Public Health as a federal demonstration project in response to parties interested in community health issues, including individuals and organizations from the public, provider, payer, and political sectors. By 1972, PHMC established itself as an independent non-profit, public health organization focusing on the health of the community through outreach, education, research, planning, technical assistance and direct services.

In 1983, PHMC obtained support to create the Community Health Data Base (CHDB). The central component of the CHDB is the Southeastern Pennsylvania Household Health Survey, which is administered every two years. The CHDB also maintains U.S. Census and vital statistics data. The 2006 Household Health Survey includes responses from more than 10,000 households in the region, representing more than 13,000 adults and children. Major topic areas include, among others:

- Health Status
- Source of Care and Utilization of Services
- Personal Health Behaviors
- Social Capital
- Mental Health
- Safety & Violence

Access to the data is available to "members" of the CHDB. Membership includes an array of data products and services in addition to full access to all of the primary and secondary data collected and maintained by the Community Health Data Base. The University is a member of the CHDB and, as such, access is available to doctoral students by contacting Francine Axler at (215) 985-2521 or Francine@phmc.org.

From: <http://www.phmc.org/>
<http://www.phmc.org/chdb/householdsurvey.html>

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