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The opinions expressed in this magazine are those of the individual and not necessarily those of the University of Chicago or SSA.

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AM DEEPLY HONORED TO SERVE the School of Social Service Administration as the new chair of the Visiting Committee and have long admired the work of former chairs Valerie Jarrett and David Vitale. Their dedication to SSA, along with the leadership of former dean Jeanne Marsh, guided and helped enable the School to thrive and grow into its second century.

Dean Neil Guterman and I both share a vision for the Visiting Committee to become more national in terms of its membership and scope. It is important that SSA extend its reach beyond the civic environment in Chicago so as to tap into the diverse talent and expertise of civic leadership that exists throughout the country. Part of my work will be devising methods with Neil to build a national committee and keep it focused and engaged.

I have many reasons to be honored to serve as chair, including personal ones: My daughter is a doctoral student at SSA, and my father, William, was a member of the Visiting Committee from 1955 to 1995. My father, who was also an attorney, became interested in working with SSA while serving as president of the Board of the Juvenile Protective Association in Chicago.

When I attended the University of Chicago Law School, I had many friends at SSA and was impressed by their work and dedication towards making a difference in the world. I was concerned that there was not, at that time, a focus at the Law School on the ability of the law to make a difference in the lives of the most vulnerable. This fueled my desire to help in any way that I could to advance the efforts of those who work for social justice—in social work, social policy and the law.

SSA is a synthesis of an academic institution and a hands-on learning environment. This mixture of the practical and theoretical provides students with a rigorously developed analytic framework while preparing them for hands-on work with individuals, families and communities. All schools of social work integrate classroom instruction and fieldwork, but none combine the two with an interdisciplinary focus the way SSA and the University of Chicago do. That’s why I volunteer for this great institution.

Peter Darrow
Chair, SSA Visiting Committee


We have recently heard a great deal in the public discourse about growing economic disparities in the U.S., mixed with a heavy dose of language about “unaffordable” government programs. Some have characterized what they see as a deepening paradox in the U.S., wherein we have recently made progress toward greater social inclusion, placing value on “equality of opportunity,” while simultaneously we appear to be increasingly tolerant of “inequality of condition” for our citizens.

Such paradoxes are deeply troubling when we acknowledge that differential life conditions have profound real-world consequences for us all. Those at the lower end of the socio-economic spectrum face far higher risk for shorter life spans and debilitating and costly medical conditions such as heart disease, diabetes, cancers, autoimmune diseases, respiratory illnesses and mental illnesses, along with greater risk for exposure to accidents, violence and other potentially lethal hazards. Further, such consequences spawn their own dire consequences, in a downward spiral of damage and cost.

The detriment wrought by such conditions extends from those immediately affected, to their families and communities, and to us all. For example, the University of Chicago Crime Lab, directed by SSA faculty members Jens Ludwig and Harold Pollack, has conservatively estimated that the problem of violent crime costs the wider U.S. economy about one trillion dollars per year, factoring in lost worker productivity, medical costs, mental health costs, costs to government vis-à-vis the criminal justice system and so forth.

Tackling such deep, complex and costly social problems to strengthen both individuals and our broader society is what SSA is all about. SSA remains at the vanguard of shaping, testing, analyzing and rethinking social policies and practices that directly affect our community’s most vulnerable citizens and the wider society. We carry out research in a way that is engaged in the world. The programs, research and projects that we’ve covered in this issue of SSA Magazine strive to tangibly improve children’s learning, keep people healthy, make neighborhoods better places to live and make families stronger and more resilient. At SSA and in the field of social work, those clear intrinsic benefits are why we do this work.

There is another tangible benefit for this kind of work. In today’s political climate, sometimes the refrain is that social justice and social welfare for our fellow citizens are just too expensive. America no longer has, the argument goes, the capacity to afford such luxuries.

The fact is, the policy and practice strategies we test, evaluate
and disseminate in the classroom, when delivered effectively and efficiently, also save public dollars from being wasted down the road on more intensive and expensive health care, mental health and criminal justice interventions.

Take, for example, the work being done by Susan Lambert, Heather Hill, Julia Henly and Marci Ybarra, all of whom are involved in our new interdisciplinary scholar network investigating employment instability and family well-being, covered in the feature story “Many Disciplines, One Goal.” By finding ways to make low-wage work mesh better with family life, more workers can keep their jobs, more businesses can avoid the cost of finding and training new workers, and more families have less stress and more time together. Each of these outcomes has clear economic benefits.

As a second example, studies in my own field and that of SSA faculty member Sydney Hans that examine early home visitation services for vulnerable families have found an array of benefits to children and families served, and an average savings to the public of five dollars for every dollar spent on such services over the longer term due to a reduced subsequent need for public assistance, child welfare, juvenile justice and criminal justice services.

When you read this issue’s “Conversation” about public health’s role in limiting obesity and other chronic health issues and our feature story about how treatment of diabetes will change under the new Affordable Care Act, be mindful of the many dollars that will be saved in medical and social costs down the road from these preventative efforts as well. When you’re attuned to these kinds of cost benefits, the same underlying truth is clear: The case for better schools, more efficacious social services and smarter social welfare policies isn’t only that they promote individual and family well-being. They also strengthen the wider societal fabric, reduce more severe problems and interventions, save the public dollars and save lives. It’s “win-win.”

We need to be able to bring this hard evidence to debates on the utility of social welfare programs. SSA’s distinctive interdisciplinary approach to understanding and addressing deep social problems uniquely positions us to make the case for multiple benefits—including economic ones—of the programs and interventions we study, and we look forward to helping to lead the movement in this direction.
A Healthy Collaboration

Public health has traditionally focused on issues like preventing an outbreak of an infectious disease and ensuring clean water. Recently, the field has increasingly turned its attention to promoting healthier behavior to fight obesity and inactivity. The Building a Healthier Chicago initiative, for example, is using a social ecological model to tackle the interpersonal, institutional, community, environmental, social and public policy factors that influence health. The program is a collaboration among the American Medical Association, the Chicago Department of Public Health, and the U.S. Department of Health and Human Services—Region V.

For this Conversation, Colleen Grogan, a professor at SSA, sat down with James Galloway, the assistant U.S. surgeon general, acting regional director and regional health administrator for HHS’s Region V, to talk about how Building a Healthier Chicago operates, how public health is changing, the role of community organizations in public health, and more.

Grogan is the co-author of Healthy Voice/Unhealthy Silence: Advocating for Poor Peoples’ Health, and her latest book, which will re-examine the government’s role in the U.S. health care system, will be released later this year. She is the co-director for SSA’s Center for Health Administration Studies and the faculty chair for the Graduate Program in Health Administration and Policy.

A rear admiral in the United States Public Health Service, Galloway is a board certified physician in internal medicine and cardiology. He was the senior cardiologist nationally for the Indian Health Service and the director of the National Native American CVD Prevention Program, and he is the author of Primary Care of Native American Patients: Diagnosis, Therapy and Epidemiology.

Grogan: We’ve talked in the past about Building a Healthier Chicago, and some of our SSA students are doing their field placements in your office downtown. So I’ve heard a little about the work. To me, the most exciting part of the project is the collaboration and real connection to the community. How’s that going?

Galloway: It’s going very well. We grew from a small group about four years ago. In that first meeting with about twenty stakeholders, we really focused on wellness in general: activity, improved nutrition, and blood pressure control and prevention. Since that time, we’ve grown, but we’re still trying to make sure that we touch where people live, work, play, pray and learn. And we’ve gotten some great guidance and support out of Washington with our First Lady’s “Let’s Move” initiative.

I also think it’s important to point out that the Affordable Care Act [ACA] includes a powerful focus on wellness as a serious and integral component of Medicare, Medicaid and insurance, and that it supports coverage without copays for evidence-based prevention activities such as mammography, colonoscopy, cholesterol and blood pressure checks.

We have enthusiastically incorporated Let’s Move, which really fits with our view that it’s the leaders of the township, the school board, the parents, or the child himself or herself who are at the heart of these changes. Working with the business sector has also been exciting to me, because I think the integration of business and public health is the way of the future in many ways.

Grogan: That’s interesting. Business has been developing and enacting all of these health and wellness programs, but are you thinking of business involvement in the community? Do you see it more involved with public health policy?

Galloway: All of the above. I think many multinational corporations clearly understand the benefits of worksite wellness, including the approximate three-to-one return on investment across the nation, for instance, or the fruits and vegetables that are being sold now in drugstore chains like Walgreens in food deserts and in other areas. The impact there is potentially tremendous. There are many similar examples of corporate social responsibility initiatives within private enterprise.

If we can assist in these efforts so that there’s a benefit to the companies to engage their employees’ families in

Our view is that it’s the leaders of the township, the

Many small and middle-sized organizations and companies don’t have the resources, the time or energy, to be able to do this, or may not be aware of the benefits. So approximately 100 members of Building a Healthier Chicago have developed a worksite wellness committee that includes the Chicago Chamber of Commerce, the Midwest Business Group on Health, the American Heart Association, our academic partners and many others. This committee has developed a whole toolkit that offers no or low-cost interventions for small and middle-sized companies to start the same kind of worksite wellness programs at their sites.

And some of the multinationals have found that engaging the families of their employees for disease control, disease management and prevention options is also clearly beneficial. We’re taking it a step further and looking at the customer base. Look at the impact of Wal-Mart’s four-dollar prescription wellness, in addition to their customers, and then potentially even coordinate these efforts, in a broad sense, with developing accountable care organizations, [the health care model where providers are reimbursed by outcomes for a population, as compared to fee-for-service], we could potentially recognize great impact. The development of the accountable care organizations, although not yet finalized, has a tremendous amount of promise.

Grogan: That makes a lot of sense to me because we have such a fragmented system. So it’s interesting to hear you talk about connecting the employers and the employees to the accountable care organizations, and then bring in the families, because exercise and diet are so much a part of the family culture. If we just focus on an employee, when they go home to a family or a neighborhood, the behaviors we’re suggesting may not have the
comprehensive approach, working with school-based improvement, but with an integrated process, living as a community-level initiative, focusing mostly on school wellness integration. Building a broader collaborative. With Building Healthier Chicago, how have you been able to tap into some of those organizations?

**Galloway:** Well, we have developed numerous collaborations with these organizations through several levels. One is with the organizations of health in the communities we work in—the hospitals, the clinics, the federally-qualified health centers [FQHC]. These organizations are often integrated pretty broadly throughout the community, although not always equitably. And there are a number of community organizations we work directly with. We have a physician advisory council made up of many of the clinical and public health leaders in Chicago as well as a CEO council that provides us with guidance and expertise from many leading companies in the Chicago area. Our stakeholders meetings, for instance, are open broadly to everyone who may be interested to come, spend some time and learn about what we were trying to do and to see how they could help.

**Grogan:** For me this all is interesting because I’ve been doing research for a book that touches on the history of the public health movement at the turn of the century. I look at what happened in the federal Public Health Service and local and state health departments, and examine how and why they grew over time.

Already by 1910 or 1920, major public health leaders are saying, ‘Now we have sanitation and we need to attend to that, and we know we need to build research institutions for advances in things like bacteriology. But we also need to focus on chronic disease.’ They knew even back then that cancer and heart disease were among the top five killers in 1920. Of course infant mortality was still high, and infectious disease was high, but even then, they were saying we really need to think about chronic disease and health behaviors, encouraging all the kinds of things you’re doing and talking about now.

**Galloway:** You may recall when Dr. Richard Carmona, our prior Surgeon General, was selected. It was right around 9/11. He was called in to testify in front of Congress about issues of health and safety related to weapons of mass destruction and all the various horrendous things that could happen by terrorists and others. He spent several hours testifying in Congress and masterfully answered all their questions about anthrax, bioterrorism and other major concerns. As he was leaving, he had a surrounding group of reporters who asked him which of these threats—bioterrorism, terrorist attacks, dirty bombs, anthrax, etc.—
Planning with the Full Picture
With a new blueprint, teaching and learning make a comeback at the Chicago Public Schools

The education plan released by the Chicago Public Schools last April identifies just one goal, and it’s not to raise test scores. It directs the district’s administrative and instructional personnel to “improve schools so that all students become powerful and creative thinkers, responsible global citizens, self-confident individuals and effective, literate communicators.”

That’s a big-picture view of the purpose of education that Terry Mazany, president of the Chicago Community Trust, wanted guiding decisions when he accepted the job as CPS’s interim chief executive officer in 2010. “But there was a consensus among leadership at CPS that the district had lost this meaningful and coherent vision for education,” he says.

To re-establish that vision and a new education plan to go with it, Mazany needed first to fill a position that had been vacant for nearly a year, that of chief education officer. “The education side had been badly fragmented,” he says, “I knew I needed somebody who had unimpeachable credibility, someone hugely respected.”

He called on Charles Payne, SSA’s Frank P. Hixon Distinguished Service Professor. Payne, who was already serving in Mazany’s kitchen cabinet, found the move from occasional adviser to full-time executive difficult to imagine, but still more difficult to refuse. “It’s one of those things that it’s really hard to say no to: ‘Do something for the children,’” Payne says with a laugh. “At the same time, given that the problems are systemic, you think, the chances of one or two people making any difference are not all that good.”

Whatever his misgivings, Payne signed on because he and Mazany shared a belief in the power of an overarching vision. “It’s important to be explicit about what we think we’re doing, what our goals are,” Payne says.

To participate in the process of drafting a plan, the pair tapped more than 120 educators, parents and community activists, as well as an external advisory board drawn from education, business, government, foundations and higher education. Work groups primarily composed of CPS district and area personnel and school principals focused on three key priorities: instruction, assessment and professional community; creating safe, respectful and supportive climates for student learning and partnerships with families and communities; and developing effective leadership at all levels. Participants regularly met to discuss the issues and draft goals and strategies, spelling out necessary actions at the school, area and district levels.

The resulting plan, “Elevating Our Vision for Learning: Improving Schools for All,” both raises the bar for education in the 21st century and reinstates teaching and learning as the district’s core business. Its research-based ideas about school improvement are backed by examples of best practice from the U.S. and abroad, giving educators a vital touchstone for their work.

“Schools have been told for a number of years now, ‘Get your test scores up, we don’t give a darn how,’” Payne says. “Our emphasis on the development of the whole child is crucial, as is the notion of creating a global citizenry.”

Along with a discussion guide, the final plan was distributed to central office personnel and principals, local school councils, and parent and community groups. When incoming CEO Jean-Claude Brizard came to CPS, he was given a copy as well. “Jean Claude didn’t need a document like this for guidance,” Mazany says, “but perhaps it saved him a clash with the prior culture. It did bridge from one administration to the next.”

The new administration has already taken action consistent with the report’s recommendations: budget priorities, new schools, an emphasis on higher standards, broadening the curriculum, recognizing the limitations of the ISAT, even the development of school leadership.

With an up-to-date education plan and a new administration in place, Payne’s only note of caution concerns the pace of change. “I’m worried about the supercharged atmosphere, the sense that everything has to happen at once. There are so many folks in power who want to see some results right away. I’m worried about that.”

— Patricia Nedeau
History

Channelled

Knowing how evidence-based practice began leads to better implementation

To work best, evidence-based practice in clinical work benefits from a solid understanding of the theory and history of the concept and the nuts-and-bolts of real-world implementation.

That’s the underlying idea behind From Task-Centered Social Work to Evidence-Based and Integrative Practice: Reflections on History and Implementation, a new book co-edited by David and Mary Winton Green Professor Tina Rzepnicki, Senior Lecturer Stanley McCracken (both SSA alumni) and Harold Briggs, A.M. ’80, Ph.D. ’88, a professor at the Portland State University School of Social Work. Released by Lyceum Books, the book is a series of essays written by leading evidence-based practice scholars in two parts.

The first section delves into the development of evidence-based practice and its application across areas of social work theory. Beginning with the task-centered model in the late 1960s, contributors outline the various approaches that researchers and practitioners have cultivated, including the personal practice model, cognitive behavioral therapy and psychodynamic theory. The second half of the book explores applications of EBP in the implementation of programs and interventions.

The book’s essays are largely drawn from the speakers at a symposium for SSA’s Centennial in 2009, and all the authors have some association with the School. “Tina and I were trained by [SSA faculty members] William Reid and Laura Epstein, who founded the task-centered approach. That framework is how we approach the work: research and practice are one activity,” McCracken says. “That’s what we do at SSA—apply social science to real-world problems.”

The approach outlined in the book emphasizes the need for evidence to come from the field as well as academia, and the need to account for organizational and dissemination constraints early in the implementation process. While firmly rooted in past developments that led to the contemporary evidence-based practice approach to social work, the book also looks toward a future of innovations that aggregate evidence from a variety of sources.

Like the symposium itself, the book is aimed at a varied audience of scholars, practitioners and program managers. “A number of papers are out there that raise implementation issues. This book is different in that it discusses strategies to deal with the issues,” Rzepnicki says. “A big motivation for us was to highlight the things in implementing program development that make it messy, and to have the authors address how they have dealt with those issues.” — James Baatz

Come Together

How one union organized to unite African-American and immigrant workers

Conventional wisdom says that there is inevitable tension between working-class African-American and immigrant workers because they’re in direct competition in the labor market. But that’s not necessarily so, according to SSA Associate Professor Virginia Parks, who points to success by a Chicago union in bridging the divide.

“When you look at the wage rates, the percentage of the population living in poverty, the types of jobs they do, there’s actually a wider gap between native-born Latinos and immigrants than there is between immigrants and African-Americans,” says Parks, who has recently finished a manuscript, “Contesting the Racial Division of Labor: Representation and Union Organizing Among African-American and Immigrant Workers,” with Dorian T. Warren, an assistant professor at Columbia University.

Parks and Warren’s research focused on organizing activities of Chicago’s hotel union, UNITE HERE Local 1. Immigrants represented 41 percent of workers in the hospitality industry in Chicago in 2000, and African Americans 23 percent. In addition to ensuring that union leadership reflected the ethnic and racial breakdown of the workforce of each site, UNITE worked to find common cause between the two groups, including activities that emphasized the common history of migration.

The union also looked for opportunities to balance its support of each group’s goals. Because its immigrant members were passionate about immigration reform, UNITE organized and advocated on behalf of the issue at the federal level, for example. For African Americans, who were understandably less concerned about immigration rules, the union pushed in contract negotiations in 2006 for hiring practices that would add more African Americans to the workforce through outreach to the community, training programs and more.

“Job displacement has been an issue for African-American workers in this sector, so getting provisions in the contract was a very important step,” Parks says. “We know from research that anything that formalizes hiring practices helps African Americans because these practices guard against discrimination.”

After similar contract negotiations in Boston and Las Vegas, partnerships with the local government has helped those cities move further toward enacting the provisions than in Chicago, at least so far. “But from my experience watching the union, it’s clear that the efforts have had an effect. Both groups understand each other better, and they turn out to support each other’s interests,” Parks says. “It takes a lot of effort, a lot of organizing to make it happen, but it can happen.”

— Carl Vogel

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Communication Revolutionaries

A new study looks at what the Internet offers women living under hardships of a military occupation.

NADERA SHALHOUB-KEVORKIAN REMEMBERS the crowding, the shouting, the waiting and the sensation of being in “a very trapped space” when she was stuck at a military checkpoint outside Jerusalem. When she took out her laptop to work, local youths pressed close around the car. “I heard them say, ‘I wish I had that computer. I would tell the world what was happening,’” she recalls.

The experience launched Shalhoub-Kevorkian, a professor of law and social work at Hebrew University of Jerusalem, on an inquiry into the use of telecommunication under conditions of military occupation. Now, in a study entitled “E-Resistance among Palestinian Women: Coping in Conflict Ridden Areas,” she shows how young Palestinian women use computers and cell phones to deal with isolation and powerlessness in everyday life on the West Bank.

“...The use of modern communications technology for political empowerment has been much discussed in connection with the Arab Spring. Shalhoub-Kevorkian’s study suggests that the same technology can also serve important therapeutic purposes, helping young women cope with poverty, patriarchal society and the hardships of a military occupation that restricts movement, divides people from family and friends, and introduces an inescapable uncertainty and fear into their lives.”

“It’s about human suffering,” says Shalhoub-Kevorkian. “How can you use technology to reduce human suffering in conditions of constant uncertainty?”

Shalhoub-Kevorkian sought the views of 112 female college students aged 17 to 21 from Jerusalem and the West Bank, and of 17 Palestinian mental health workers, most of them women. Her study shows that young Palestinian women use technology

Mental Health and Public Assistance

After welfare reform, more recipients have symptoms of depression

FIFTEEN YEARS ON, researchers have learned a lot about the effects of the 1996 welfare reform legislation: caseloads fell by more than half, more single mothers went to work, and poverty rates fell—although other factors, including a then booming economy, also contributed to these changes.

Less is known about the consequences of welfare reform for the physical and emotional well-being of welfare recipients. Now, a new study finds more signs of mental illness among welfare recipients than before the reform.

Sunshine Rote and Jill Quadagno, researchers at Florida State University, studied data from more than 5,000 women taking part in the National Survey of Drug Use and Health, one of the few surveys that reports on welfare status, alcohol dependence and depressive symptoms. They asked a simple question: Did welfare reform change the characteristics of welfare recipients with respect to depressive symptoms and alcohol dependence? Before welfare reform, welfare recipients as a group did not differ from other poor women in prevalence of these factors. After welfare reform, the researchers found, there was still no difference in alcohol dependence. But they did find that recipients reported more symptoms of depression than poor women in general.

Rote and Quadagno reported their findings in “Depression and Alcohol Dependence among Poor Women: Before and after Welfare Reform.” Their conclusions don’t necessarily imply that new welfare rules are making women depressed. Rather, the results seem to show that women with mental illnesses are not coping as well as healthy women with the new rules, which are aimed at moving single mothers off welfare into job training, education and permanent employment.

In other words, welfare reform has succeeded in moving many poor mothers into jobs, but it has struggled to help some of the neediest women. “It left the most vulnerable, in terms of mental health, on the rolls,” Rote says. Moreover, she says, the welfare system is failing to give these women the help they need. One implication of their research, Rote says, is the need for better mental health care in the welfare system, including better screening for mental health problems.

“I don’t think they’re completely ignored,” she says. “I just don’t think they’re a huge part of what case workers are looking for.”

much like young women anywhere: to keep in touch with family and friends, to carry on romantic relationships, and to look for jobs and educational opportunities. But the difficulties of life under military occupations give communications technology a heightened significance. Shalhoub-Kevorkian writes that Palestinian women use the Internet and cell phones to preserve and strengthen social ties in circumstances where movement is severely restricted. The Internet also gives young women who might otherwise be marginalized an opportunity to seek information and to communicate with others.

One young woman told Shalhoub-Kevorkian that the Internet had become her “breathing pipe.” “If soldiers prevent me from leaving Al’Ezariyyeh [her village],” the young woman said, “I do not feel restricted or under siege. I can chat with my friends, hear their news and hardships, get any material I missed while at home, and even send messages and documents from my home, without getting the soldier’s permission and without being harassed and dragged into their nasty checkpoints.”

In some ways, Shalhoub-Kevorkian suggests, technology makes possible new forms of activism. One woman described how she used her cell phone to record the expulsion of her family and demolition of her home, then used a computer to tell the story to human rights groups and appeal for help. “I felt that the Internet became my only way to fight back,” she said. Shalhoub-Kevorkian also found an unsettling ambiguity about Internet use. The women said that while being online seemed a safe harbor, they worried that it could lead them into danger. Some told stories of how Israeli security forces used information posted on the Internet against them or their families, even leading to the imprisonment of family members. Some said they lost their residency rights in Jerusalem because of information posted on social networking sites. “People are very scared,” Shalhoub-Kevorkian says. “On the one hand people are using technology a lot, but they are also aware that they are under constant surveillance.” In the end, Shalhoub-Kevorkian asks if communication technology really empowers individuals, or only seems to do so.


All in the Family
For young single mothers, whether living with their parents is helpful or stressful may be influenced by race and ethnicity

NEW RESEARCH suggests that grandparents’ involvement can cause stress for single mothers with young children. Whether they’re likely to do so depends on the circumstances of their involvement and, perhaps surprisingly, on the racial and ethnic characteristics of the family.

“There’s a kind of bias to think having grandparents involved in a child’s life is great,” says Emily Greenfield, author of the paper “Grandparent Involvement and Parenting Stress Among Nonmarried Mothers of Young Children.” “And in a lot of circumstances it’s true. But in other contexts it may be a problem.”

Greenfield, an assistant professor at Rutgers University, examined data from 1,118 single mothers who took part in the Fragile Families and Child Wellbeing Study, a national survey that followed a sample of urban, unmarried women with children born between 1998 and 2000. The mothers’ average age was about 21, and most of the time the child in question was the first born.

About a third of the mothers lived with their parents. In Latino families, Greenfield discovered, this reduced parenting stress. But the opposite was true with African-American families.

When the mothers lived in separate households, greater contact between grandparents and grandchildren produced the opposite effect. Latino mothers felt greater stress, while African-American mothers felt less. (The study found no significant differences in stress among white mothers.)

Greenfield’s study does not explain the causes of the increased stress, although it controls for obvious factors like education and employment. But she has some ideas. She says Latino families tend to value interdependence and frequent interaction between generations and tend to have clearly delineated roles. Latina mothers living with their parents may find that it gives them support without undermining their role as mothers. Inter-generational dynamics in African-American families may differ, Greenfield says. Single mothers who live with their parents may experience greater stress because of role confusion or conflict over parenting strategies.

The findings are consistent with other studies of African-American families that find a link between poor parenting and adolescent mothers living with their parents. Indeed, parental stress affects more than just parents; it’s a risk factor for problems with children, including behavioral issues and poor cognitive development.

Grandparents are a growing presence in American family life. People are living longer, making multi-generational families more common, and the recession has led many family members to move in together. From 2000 to 2010, the number of children living with grandparents grew 40 percent or more in almost half the states. Greenfield says social workers and policy makers need to keep in mind the complexities of extended families. Grandparents and other members may indeed be a source of family strength, but not under all circumstances. “It’s important to think about context,” she says.

Smarter Social Policy

SSA alum Frank Farrow has spent his career making big plans work at the community level

BY PATTI WOLTER

Anyone working with low-income children, families and communities is all too familiar with the typical solutions for local problems proposed by federal agencies, national foundations and global corporations: Top-down, “if-you-build-it-they-will-come” projects. But those working in and with local communities know the limitations of that approach. “You can’t just come in and dictate with charts and everything, ‘We know how to make your life better,’” says Sili Savusa, a community organizer and family center coordinator at Southwest Youth and Family Services in White Center, a community outside of Seattle.

But that doesn’t mean big institutions aren’t important components to community change. The challenge can be getting those institutions to talk not just to each other but also to the people they serve. That communication is, at its core, the job of Frank Farrow, A.M. ’71, and the organization he heads, the almost 30-year-old Center for the Study of Social Policy, based in Washington, D.C.

The Center for the Study of Social Policy may not sound like the kind of organization that would put on-the-ground community work at its heart—after all, the words “study” and “policy” are in its title. Its goal, however, is to make sure that policies and efforts to help in-need families and children are grounded in rigorous science and real-world research. CSSP’s theory of change puts families and children in the center of a multifaceted model that includes building protective factors for families, reducing risk factors for children, strengthening local communities and connecting all of this to systems change and policy—and infusing it with a fierce commitment to equity across lines of race, ethnicity and culture.

“I don’t think it’s possible to make a difference in families’ lives if you don’t work on all these levels,” Farrow says. “We draw on high academic standards and research, but use that knowledge base for the very applied work of rough-and-tumble policy, action and application.”

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Both of Farrow’s parents worked in social services jobs. His dad for the state of Pennsylvania and his mother for the Multiple Sclerosis Society of Central Pennsylvania, and he decided after graduating from Yale University with a major in English that he would follow in their footsteps. “I chose SSA for graduate school because it seemed to have the strongest sequence and focus on community organization. I was interested in learning about strategies for making change that involved mobilizing and applying pressure through citizen action,” he says. “What expanded my thinking was SSA’s then-growing focus on policy and systems thinking and the ability to ‘toggle back and forth’ among policy work, gaining knowledge of community dynamics and processes, and innovative forms of direct service.”

At SSA, Farrow found a group of faculty members, with former Dean Harold Richman at the helm, who encouraged community work but demanded that students understand the policy implications and theory as well. After Farrow graduated, he spent several years in social policy and regional planning and evaluation in the Chicago and Hartford areas before returning to Chicago to pursue a Ph.D. and run the University’s Woodlawn Social Service Center, a multi-purpose facility run in coordination with The Woodlawn Organization. The Ph.D., however, never happened. “I became much too involved in trying to develop new services in Woodlawn,” Farrow says.

In 1980 Richman suggested Farrow take a few months to go to Washington, D.C., to work with policy activist Tom Joe and another SSA alum, Judith Meltzer, A.M. ’71, who at the time were helping the Carter White House develop a welfare reform agenda for the new administration. “A couple of months turned into a year,” Farrow says, “and became the early work of the Center for the Study of Social Policy, which was originally created as a policy arm of the University, with Harold Richman serving as a co-founder.” CSSP became an independent nonprofit in 1982. Except for four years as the director of the Social Services Administration in the Maryland Department of Human Resources in the mid-’80s, Farrow has served in some capacity at CSSP ever since, and he became the director in 2001.

The SSA roots and Harold Richman’s vision for the organization still gird CSSP today, Farrow notes. “SSA at its best does several things: It keeps a human heart at the center of its work and tries to prevent policy
from disconnecting from the realities of people’s lives. When I worked in Woodlawn, at the same time I was having intense policy seminars with Harold Richman. Those might seem like two different worlds, but they shouldn’t be,” he says.

CSSP keeps the SSA connection alive in many ways, including having a number of alumni as former and current staff at the center. Farrow has been an enthusiastic participant in the annual Washington Week career program for current SSA students, and this year he and his colleagues put together the first annual Harold District of Columbia, New Jersey and Georgia. Using new science about brain development, early trauma, resiliency and youth development, CSSP is helping states incorporate protective factors into early care, education and child welfare programs.

In the Seattle area, CSSP’s role with the Annie E. Casey Foundation’s 10-year, multi-million dollar Making Connections initiative helped the White Center community improve families’ incomes and children’s health and education. Farrow served as the director of the initiative at Casey from 2003 to 2009 (while also serving as CSSP’s and board trustees, that’s the trick. In reality, they are equally committed to better results for kids and families, but they have different perspectives. It’s easy to say ‘establish a results culture,’ but to understand the investment that requires in community capacity and in building trust among multiple players, that’s still challenging,” Farrow says.

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“For me, Frank was really instru-

mental in helping Casey understand the pace in which communities exist and seeing that the foundation isn’t coming in all gangbuster with the answers of what’s best for the communities,” Savusa says. “He assured that the foundation sought community involvement in a genuine way.”

Savusa’s work with Casey as a resident leader contributed to her eventual election to the area’s school board, and during the initiative White Center was able to boast 3,000 residents placed in new jobs and a 5 percent increase in the number of children reading by third grade. She notes that CSSP’s efforts have helped sustain the community’s work, too. “CSSP helped us find a lot more money for our community—not just Casey, but from Starbucks, Gates—by building partnerships with other funding sources. They’ve been good brokers and good allies,” she says.

Farrow is quick to point out that exciting to Farrow today includes a commitment to promoting equity on many fronts. “We have made ‘becoming an anti-racist organization’ part of our purpose because in this country race trumps even class as affecting what opportunities people have and can pursue. We felt we couldn’t tackle the community work that we do without making this commitment as an organization and looking deeply at our own practices,” he says.

“Our work is about using the best science, the best research, the best community experience and translating it into strategies that help people make change for themselves,” Farrow says in conclusion. “That can be in a community setting or in large, too-often impersonal social service systems. Doing that together with the inspired, committed people we work with—that’s the joy of this work.”

Richman Public Policy Symposium, the first in a series of forums intended as a way to honor the former dean.

“Harold had the gift of holding very high expectations for the young people he worked with, and simultaneously provided practical advice, helped us make important life choices, and always urged us to act with a fierce sense of integrity. I was just one of many other young people—literally thousands, I think—whom he inspired,” Farrow says.

TODAY, THE CENTER for the Study of Social Policy is involved on the ground around the country. CSSP works with more than half a dozen city and state child welfare systems in a variety of ways, including serving as the court-appointed monitor and technical advisor for class action reform in the director) and CSSP provided technical assistance to the 10 participating communities.

“For Making Connections and other work CSSP does, we help communities identify where they are and where they can achieve success on a range of outcomes,” says Deputy Director Judith Meltzer. “One of the hallmarks of our work is resident engagement. We provide technical assistance, help neighborhoods develop community advocacy groups to provide feedback, and create partnerships between public and private agencies to use this feedback to improve services like food stamps, child care and employment.”

Farrow points out that part of the job is also facilitating conversation between grantees back to the highest levels of the foundation. “To make [the work] make sense to parents and neighborhood leaders and to CEOs, one of our best practices is bringing all the partners to the same table. It’s exciting to know that we’re always in partnership with that’s the trick. In reality, they are equally committed to better results for kids and families, but they have different perspectives. It’s easy to say ‘establish a results culture,’ but to understand the investment that requires in community capacity and in building trust among multiple players, that’s still challenging,” Farrow says. “The erosion of resources and institutions and skills in distressed communities happened over generations, and you can’t expect communities to put that back together without investing in capacity.”

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in all its work, CSSP has a lot of partners. “We never work alone. We are always in partnership and believe that is the only way change happens,” he says. Meltzer adds that Farrow himself is a crucial part of CSSP’s success. “Frank’s real genius is that he is a big picture thinker. He is able to conceptualize in very imaginative and important ways how to put things together to produce change, and he is able to develop and sustain coalitions of people in order to bring them together around an idea,” she says.

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The work that’s particularly
In SSA’s new Interdisciplinary Scholar Networks, researchers from disparate fields work together to build a stronger whole.

Many Disciplines, One Goal
H INK ABOUT ALL THE FACTORS that can influence a young adult’s decisions about risky sexual behavior. There’s the relationship with the partner, parental advice, logistical opportunity, cultural norms, peer standards, psychological needs and fears, an understanding of the possible consequences, and, of course, the underlying biology of desire.

A similar mix of dynamics is woven into almost any issue that social workers confront, from homelessness to early education. Humans are extraordinarily complex, and the social constructs we operate within are as complicated. It’s why social work is naturally an interdisciplinary enterprise. “For social workers there is always a discourse about the need to understand the multiple factors that contribute to complex social problems. As a result, much of our work, in both practice and research, is inherently interdisciplinary,” explains Assistant Professor Alida Bouris.

SSA has long recognized this reality in its scholarship. Professors at the School have backgrounds and training in social work, sociology, psychology, anthropology, public health, political science, economics, geography and more, and SSA researchers routinely draw on a variety of social sciences in their work. For example, Assistant Professor Heather Hill, who studies how parents’ employment impacts their children, says her understanding of the questions she explores would be incomplete if she failed to draw on the work done in multiple disciplines.

“We have a deep understanding here at SSA that bringing together both the theory and the methods of various disciplines offers a more complete picture of why social problems develop and how public policy can resolve those issues,” Hill says. “For example, from economics I get the most complete understanding of the labor market, how jobs are designed and how incentives work to affect individuals’ behaviors about choosing a job. But from developmental psychology I get a much more detailed and nuanced understanding of how children’s development is affected at different ages by the family context, the macro context of the economy and societal-level forces.”

Unfortunately, traditional academic settings are far from conducive in integrating knowledge across fields. Different disciplines have different research paradigms and nomenclature, and there are few structures available to help bridge these divides. Furthermore, a researcher can be discouraged from drawing too much from multiple disciplines out of fear that she might blur her scholarly identity. Recognizing these realities, the University of Chicago has made a commitment to work across fields, including several projects with an interdisciplinary focus, including the Center for the Study of Race, Politics and Culture and the Center for Human Potential and Public Policy, as well as an ongoing series of workshops for graduate students with an interdisciplinary focus.

Building on SSA’s history of scholarship that breaks down academic silos and the University’s interest in interdisciplinary work, SSA Dean and Mose & Sylvia Firestone Professor Neil Guterman launched a new program this year that encourages collaboration at a structural level. The Interdisciplinary Scholar Networks offer research funding and a range of other administrative supports to spur teams of SSA faculty to develop platforms for reaching across disciplinary and institutional boundaries.

The first two new Interdisciplinary Scholar Networks housed within SSA began operating in the fall, each focused on advancing knowledge and contributing to innovative solutions to a specific social problem. One is centered on the causes and consequences of employment instability; the other will explore the disproportionate impact of HIV and other sexually transmitted infections (STIs) on the most vulnerable and marginalized populations in the U.S. and abroad.

“The concept grew out of the fact that we at SSA deal with such deep problems—poverty, unemployment, homelessness, mental illness, substance abuse, violence—that are all messy, complicated and multiply-caused,” Guterman says. “Therefore one discipline rarely has a corner on an explanation that can generate really robust solutions. So the idea was to bring together the greatest minds across disciplines to generate ideas that are more comprehensive, more integrated and de-siloed.”
orking across disciplines is one of those lofty ideals that is preached more than practiced in many academic settings, according to researchers and administrators alike. Issues like competition for grant funding and determining which conferences to attend or which journals to publish in create disincentives, and it can be challenging for a young tenure-track scholar to contribute depth in their own discipline while also being methodologically ambidextrous.

“The reward and incentive structure in academia is not based on working across disciplines,” says Laurie Garduque, a program director at the John D. and Catherine T. MacArthur Foundation. “It’s designed so that individuals become specialists in specific areas with a paradigm that is specific to a particular field. So a sociologist doesn’t necessarily step outside of her research paradigm to think like a psychologist.”

To try to encourage just that sort of scholarly cross-pollination, the MacArthur Foundation has maintained a number of interdisciplinary research networks focused on a wide range of issues, from law to neuroscience, for more than 35 years. Its original interdisciplinary venture was a program devoted to human development and mental health. According to Garduque, the foundation’s board of directors believed that the best way to affect mental health policy and research was to provide a mechanism for convening practitioners, academic researchers, mental health advocates, state commissioners and judges to gather around the table to help frame the issues and ask research questions that inform both policy and practice. “The implication of this kind of collaborative approach is that it’s more transparent and makes the research more immediately accessible and useful,” Garduque says.

Initially, MacArthur tried to foster collaboration by creating centers at universities to bring scholars from various disciplines together. “People said they were going to work together,” Garduque recalls, “but in the end they remained in their silos.” So the MacArthur board shifted gears, creating a new infrastructure to lure individual scholars working in certain problem areas who felt they had reached the limits of their own research, training and background and sincerely wanted to work across disciplines. “We look for the psychologist who feels that he or she needs to work with a sociologist to understand the context or the political scientist or an economist to explain the phenomenon,” Garduque explains.

The MacArthur example, in many ways, is one of the models on which the SSA Interdisciplinary Scholar Networks are based. Guterman had also briefly initiated an interdisciplinary working group before leaving the faculty of Columbia University, where groups of colleagues across the New York-based campus met periodically to discuss the problem of child maltreatment. But the Columbia enterprise yielded no ongoing tangible work. “What we didn’t do much of there was collaborate,” Guterman recalls. “We just talked to each other.

“One of the reasons that I came to the University of Chicago and SSA is that this is such an exciting interdisciplinary environment with a wonderful interdisciplinary ethos,” he says. “People across disciplines do interact frequently and the thinking is enriched rather than polarized by that. But there are rather strong centrifugal forces that pull colleagues away from one another and into their silos. I wanted to develop a vessel through this initiative to bring scholars together deliberately to try to overcome some of that inertia.”

Each of the networks is headed by a team of SSA faculty members who serve as principal or co-principal investigators, working with a network of disparate scholars, policy makers and other stakeholders both from within the University of Chicago and from peer institutions. The networks are designed to establish new activities—collaborative empirical studies, new scholarly journals, commissioned volumes or conferences—that reward rather than penalize scholars for interdisciplinary work. The funding used to launch the networks is viewed as seed money for an incubatory phase. Ultimately, it will be incumbent upon the scholars involved in the networks to develop mechanisms to
ensure their own long-term sustainability.

“These new scholar networks will connect theory to practice in the highest intellectual tradition of the University,” says University of Chicago Provost Thomas F. Rosenbaum, “while at the same time linking some of our most influential social welfare researchers with leading scholars across the nation. I look forward to the creation of a powerful new tradition at SSA.”

THE EMPLOYMENT Instability, Family Well-being and Social Policy Network (EINet), one of the new Interdisciplinary Scholar Networks, is designed to enhance the capacity of the field to study the causes and consequences of unemployment, underemployment and other forms of employment instability, and to assess interventions that are designed to improve employment conditions and mitigate the effects of instability on families. The topic is ripe for the kind of collaborative approach its members hope to take.

“Employment instability is, by nature, an interdisciplinary problem,” says Susan Lambert, an associate professor at SSA whose research focuses on the “work” side of work-life issues, primarily studying low-skilled, hourly jobs. “You have to be able to understand the broader labor market trends, and you have to understand the decisions and non-decisions that shape what goes on in the labor market. And in order to understand all that, you need a spectrum of scholars.”

SSA’s Lambert and Hill serve as the co-principal investigators of the network, and Associate Professor Julia Henly and Assistant Professor Marci Ybarra sit on a 12-member steering committee that includes scholars from the Center for Economic and Policy Research, the Center for Law and Social Policy, the Congressional Budget Office, CUNY, Penn State, UCLA, the University of Washington School of Social Work, and the University of Chicago’s Harris School of Public Policy Studies. The network has three key objectives: examining the nature, sources and ramifications of employment instability; designing and evaluating workplace interventions to decrease employment instability; and furthering knowledge on the design and implementation of policies and programs to effectively buffer families against employment instability.

“Public policy has focused on trying to get people into work. We haven’t focused very much on trying to increase the stability of work or the stability of income,” Hill says.

One overarching issue that EINet PIs have identified as central to their mission is the development of better research tools: National data aim to get a snapshot of the state of employment in the country but fail to fully capture the unpredictable and variable work schedules experienced by many low-wage workers.

“For many purposes, what the existing surveys measure makes perfect sense,” Henley says. “But national surveys tend not to capture what worklife is like for people in non-standard jobs, where they may work four hours one day and six hours the next, and where start times aren’t based on a traditional 9 – 5 schedule. So one of the things we hope to accomplish with the Network is to develop a new set of survey questions for capturing this kind of...
unpredictability. That will give us a much clearer understanding of the reality for many low-wage workers.

The other new network, the STI/HIV Intervention Network (SHINE), seeks to establish a sustainable network of scholars and community partners who will develop and disseminate multi-level interventions that will help stop the spread of HIV/STIs among racial and ethnic minorities and reduce the existing disparities in the incidence and prevalence of HIV in the fourth decade of the pandemic. SSA Associate Professor Dexter Voisin is SHINE’s principal investigator, and Bouris and Assistant Professor Matt Epperson are co-principal investigators.

As with the employment instability network, SHINE’s network of 10 scholars from social work, psychology, public health, nursing and medicine bring different perspectives and their own active networks of research partners and collaborators to the table. Even within SSA, that dynamic is on display; Voisin’s work has focused on HIV prevention among minority youth and the intersection between community violence and HIV risk. Bouris’ research has focused on the development of family-based interventions to prevent HIV and STIs among adolescents and young men who have sex with men. And Epperson’s work has targeted the spread of HIV in populations involved in the criminal justice system.

In the early years of the HIV/AIDS pandemic, the PIs in this network maintain, much of the research and preventative work done to stem the disease was concentrated in the public health or biomedical spheres. SHINE will attempt to bring the variety of disciplines together—including social work, a relatively recent entry in this arena—to address the many factors that contribute to the behaviors that facilitate the spread of HIV and other STIs. “The focus is to not just take a unilateral approach to HIV prevention,” Epperson says, “but to incorporate three approaches to intervention: behavioral, biomedical and structural, meaning looking at ways to develop interventions that have greater impact among high-risk subpopulations.”

Epperson knew early on in his career that to gain a fuller understanding of those who are in the criminal justice system and their travails he would need to draw on the research of variety of disciplines, from sociology to epidemiology. He finds the disciplinary sampling enriching. “I am energized by the interdisciplinary approach,” he says. “Sometimes what seems innovative and different to people in one discipline is actually well known in another discipline. That type of exposure can really enrich one’s research.”

SHINE’s integrated approach will draw upon social work’s examination of the behavioral and structural issues that have made communities of ethnic and racial minorities more susceptible to HIV while also working with prevention scientists and public health professionals to examine how behavioral and structural approaches can support the adoption and appropriate use of biomedical interventions. “A lot of the prior work in this area focused mostly on the individual, so environmental factors have not been sufficiently attended to,” Voisin says.

Forging community partnerships is also central to the vision that the PIs have for the SHINE network. “In terms of HIV prevention, the chasm between research and practice is large,” Voisin says. “[SHINE] presents us with a real opportunity as a school and an institution to pull together the best of biomedical research, the best of social work and the community partners to take a more integrated approach to addressing this issue.”

In this and many other ways, the launch of SSA’s new Interdisciplinary Scholar Networks merely formalizes and adds resources to the School’s already vigorous collaborative climate. “Knowledge for knowledge’s sake is not what social work research and certainly not what SSA is about,” Guterman says. “We’re about knowledge for bettering human life and solving deep social problems like poverty and violence.”

Though still in their infancy, the two networks are already generating a level of excitement among their participants about the opportunities they afford. “I’m looking forward to connecting with people in the field whose papers I might read but who otherwise I might not get to meet,” says Henly, who adds that the networks also provide a vehicle for SSA to proselytize about the collaborative nature of the work that goes on at the School.

“SSA has been interdisciplinary for a long time, but not necessarily on the radar,” Henly says. “This is a great opportunity to promote that aspect of our work in a way that will benefit our students, our faculty and the populations we serve.”
BETSY RUBINSTEIN EXPLAINS what diabetes can mean to someone living in poverty by giving an example of a 62-year-old African-American man who had been referred to the Chicago-based Heartland Alliance’s supportive housing program. When he had learned he had type 2 diabetes, his brief encounter with the medical system had only given him the diagnosis and a glucose meter.

“He hadn’t been talked through the process of managing his diabetes in a way that made sense to him or fit with his life experience. He had that one meter but didn’t know how to use it and hadn’t been checking his levels,” says Rubinstein, A.M. ’10, manager of program development at Heartland Human Care Services. As a result, the man’s diabetes had progressed to the point where he needed to have a foot amputated.

“He began receiving services from our community health nurse only after his diabetes had led to an amputation. But if we had worked with him earlier, that likely could have been avoided,” Rubinstein says.

“If you go into Cook County’s Stroger Hospital, you will find people who have had strokes, who have had lower limb amputations, who have had very serious medical problems because of complications from diabetes, many of which did not have to occur,” says Harold Pollack, SSA’s Helen Ross Professor. “And because of the way health care has worked in this country, for many of them, they also have added financial obligations that will be difficult for them to pay.”

One of the many anticipated outcomes of the new federal health care law, the Patient Protection and Affordable Care Act, is a realignment of how medical care approaches chronic diseases like diabetes. Once the act is fully implemented in 2014—assuming that a Supreme Court decision or legislative repeal does not scuttle it—a complex mix of insurance reform, new programs and incentives for increased collaboration will have the potential to profoundly change how diabetes affects people living in poverty.

For conditions like diabetes, a disease that progresses silently
but relentlessly, the differences include an expanded role for community-based social service agencies and social workers. “The most vulnerable populations have experienced poverty for awhile,” says Nadeen Israel A.M. ’10, policy associate at Heartland Alliance. “We understand the populations, we have established relationships and we speak their language. That’s crucial in having the goals of the Affordable Care Act realized. We won’t achieve the ACA goal of higher quality care at a lower cost without involving community-based social service agencies.”

More than 8 percent of the American population—25.8 million children and adults—either have diabetes or showed some evidence of the disease through clinical testing, according to the American Diabetes Association. African Americans, Mexican Americans and American Indians are notably more likely than whites to be diabetic. Common complications include heart disease, stroke, high blood pressure, blindness, kidney disease, neuropathy and amputation.

Getting ongoing care is crucial, says Lee Seftenberg, A.M. ’97, a former medical social worker at University of Chicago Hospitals, who knows firsthand: She was diagnosed with type 1 diabetes while at SSA. Seftenberg wears an insulin pump, watches her diet carefully and uses test strips to check her blood glucose level five to eight times per day. She points out that without insurance, these supplies would get very expensive quickly.

“And seeing a doctor on a regular basis is very important; it’s recommended that I go every four months. Living with diabetes is a very delicate balance, and it takes a lot of education and a lot of knowledge to know how to regulate it,” says Seftenberg, who volunteers as a support group facilitator for the American Diabetes Association. “Preventative care is very important because this is a hidden disease. You’re not always seeing the symptoms, even though it’s doing destruction to your body.”

Prevention of complications and management of chronic health care issues has not been a traditional strength of the American medical system. “Providing good diabetes care requires highly skilled team care—dieticians, social workers, nurses—so people get the right care, at the right time, from the right person,” Pollack says. “The Affordable Care Act represents an effort to better orient the system toward prevention. Right now, there are many Americans who don’t have their blood glucose checked because they don’t go to the doctor, in part because of the cost.”

Emily Close, a social worker for pediatric endocrinology at Comer Children’s Hospital, says that she sees how the costs associated with managing diabetes can become a burden. “Even for the people who do have insurance but are still really stretched thin financially—if you’re not able to purchase food or pay your electric bill because you are scraping by to afford your medical supplies—stress management is a factor,” she says.

The Affordable Care Act’s biggest influence on diabetes in poor neighborhoods will be through Medicaid, which is currently available to poor people in certain categories, like children and pregnant women. In 2014, ACA extends Medicaid to anyone under age 65 living in a household under 133 percent of the poverty line. In Illinois, Israel estimates, this would add another 500,000 to 800,000 people to the state’s current Medicaid roll of about 2 million.

The effects of this expanded coverage would be significant. Pollack cites research on patients’ overall treatment and care before and after age 65—when they reach Medicare eligibility. “In the particular case of diabetes, when people become...
eligible for Medicare, we see improvements in their [blood sugar] levels and blood glucose levels,” he says. “People are getting better care, and there are concrete measures of improved health status. Medicare is not a cure-all, but it is valuable.”

What Medicaid covers will also change. Now, the program pays for diabetics’ costs after they become disabled according to Medicaid criteria, but not before, Close says. Under the ACA, Medicaid would pay for preventative services around health and wellness, which may include nutrition and fitness education, to help stave off the onset of diabetes or keep it under control if it’s already taken hold.

“Diabetes is a manageable condition, but many patients can’t manage it, so they become disabled—and then qualify for benefits. But it didn’t have to be that way,” Close says. “I’m hopeful that if reform is carried out that it will help diabetes to be a manageable condition, not this lethal condition that it currently can be.”

While the changes to Medicaid are still on the horizon, the Affordable Care Act already has put into place guarantees against insurers denying people coverage due to pre-existing conditions and requiring young adults up to age 26 to be able to stay on their parents’ insurance. “People with pre-existing conditions, including those related to diabetes, [now] have much greater protections against insurers,” Pollack says, while the latter provision “is important for a group of people with juvenile diabetes.”

Diamond Shapiro figures the biggest impact of health care reform on an organization like Access, which bills patients on a sliding scale based on ability to pay, will be for the 60,000 patients they treat each year who are uninsured. “Our utilization by uninsured patients is slightly lower due to the core economics of their personal lives,” she says. “If more patients have insurance, more will come to us and be able to use not just doctors’ care but other chronic care services. We think that will translate into better health status.”

In more traditional hospitals, however, the incentives to provide primary care can run into hard economic realities. Many hospitals make more money from visits to the emergency room than through day-to-day preventative care. “The hope is that we’re addressing those incentives in health care reform so preventative work is rewarded,” Grogan says. “The ACA bill tries to do that, but it does not mandate it. We still will have private health insurance, and it is not clear whether insurance companies will change their reimbursement schemes to sufficiently reward preventive care.”

The Act also promotes “demonstration projects”

The ACA also contains funding for primary care community health centers in lower-income communities, which will increase on-the-street availability and accessibility of health care, and promotes integration of health providers with social service agencies that understand and have connections with low- and moderate-income populations.

“You need people on the ground, primary care workers at health care centers, to make sure their patients have their insulin levels right,” says Colleen Grogan, a professor at SSA and co-chair for the School’s Center for Health Administration Studies.

These changes will allow Access Community Health Network in Chicago, which offers primary and preventative care to more than 200,000 patients at more than 50 community health center locations in and around Chicago, to expand their coverage. “Diabetes is a chronic condition that requires a lot of learning, a lot of time spent not just with the doctor but with others in our health centers, like nutritionists,” says Linda Diamond Shapiro, A.B. ’77, A.M. ’78, M.B.A. ’88 (Booth), vice president of strategy, planning and external affairs at Access.

“If more patients have insurance, more will come to us and be able to use chronic care services. We think that will translate into better health status.”
A Healthier Neighborhood

A QUITE DIFFERENT APPROACH to lowering rates of diabetes for low-income women has recently been uncovered by a team of researchers: Move to a neighborhood with lower rates of poverty.

The study was the latest findings from Moving to Opportunity, a large-scale randomized clinical trial of the connections between neighborhood poverty and family well-being (see “The Science of Social Welfare,” in the Spring 2011 issue for more about MTO). Jens Ludwig, SSA’s McCormick Foundation Professor of Social Service Administration, Law and Public Policy, and a team of scholars from around the country published their findings in the October 20 issue of the New England Journal of Medicine.

MTO was directed at low-income families with children living in distressed public housing. Based on the results of a random lottery, some families were offered a chance to use a housing voucher subsidy to move into a lower-poverty community, while a control group received no special assistance. Ludwig’s team found that the rates of morbid obesity and diabetes were both about one-fifth lower for the women who moved into a lower-poverty neighborhood than in the control group.

“These findings provide strong evidence that the environments in low-income neighborhoods can contribute to poor health,” Ludwig says. “The results highlight the great importance of learning more about what specific aspects of the social or physical environment reduce the risk of diabetes and obesity; for example, greater access to grocery stores, more opportunities for physical activity, or feelings of greater safety and reduced psychological stress.”

that show best practices in care of diabetes and other ailments. “Maybe it means that a medical educator comes into someone’s house, looks in the cabinet and gives them advice on how to cook the right foods,” Pollack says. “Maybe it requires providing access to exercise in an unsafe community, so people can get out without feeling vulnerable to crime.”

States also have incentives to require providers who receive Medicaid to set up “medical homes” so patients have access to a group of providers at a single facility rather than going to different providers each time they’re sick. “This one place knows you and your family, you have a relationship, and that’s going to be followed through, even when you go to specialists, so you’re not lost in the system,” Grogan says. “This is the ideal. But we have a very fragmented system, so it will take a lot of restructuring to get from here to there.”

FOR SOCIAL SERVICE AGENCIES, these changes open up a number of roles in working with clients suffering from diabetes. For one, they can help diabetic clients know about the new options available through the ACA. When new government health care programs have been unveiled in the past, many potential patients have remained unaware of how they can benefit, even when there has been a dedicated outreach campaign.

“There’s going to be a need for social workers to become acquainted with the medical system and to advise their clients, community members, neighbors, how to best take advantage of what’s out there,” says Barbara N. Passman, A.M. ’69, senior social worker for adult ambulatory services at the University of Chicago Hospitals. “As social workers, we’re obligated to educate ourselves and become wise advocates for the families we serve and people in the general community who may be unfamiliar with new programs.”

Israel says she could see Heartland Alliance’s role expand to providing more prevention services and helping people sign up for and then get the most from Medicaid or the insurance exchange subsidies. “Community-based organizations need to be at the table as health insurance navigators—both in performing outreach and in helping uninsured individuals and families enroll in coverage,” Israel says.

Social workers may become involved with specific programs as well. “With a diabetic, it’s not just seeing the doctor,” Passman says. “It’s patient obligations and chores that go along with managing it. You must take your medication and insulin and watch what you eat.” With the new funding models, there may be more support for social workers to help patients understand and maintain their health.

The potential to systematically integrate behavioral health services into a primary care visit is what
excites Diamond Shapiro of Access. “Social workers are accessible behavioral health consultants. They are available to support the primary care encounter,” says Diamond Shapiro, who adds that the exchanges should also allow managed care companies to develop a “population health management approach,” where chronically ill patients can move from one type of facility or specialty to another seamlessly as their diseases progress. Illinois passed legislation last spring stating that half of all Medicaid participants will be enrolled in “coordinated care” by 2015, a term that’s somewhat loosely defined but based on the idea of purposefully connecting elements of the health care system that today can be completely out of touch—the emergency room, specialists, primary care physicians, mental health providers. Here too, Israel points out, a social worker’s perspective and skills are a great match. “As the rules are coming down from CMS [the Centers for Medicare and Medicaid Services] and Illinois is figuring out how its exchange will be set up, it’s an exciting time to think about new opportunities and how patients will benefit—but there still are a lot of question marks,” she says.

Heartland Alliance has laid groundwork for the types of partnerships that could arise around diabetes through the “Take Charge of Your Diabetes” program based at Rush University in Chicago. Aimed at those over 55 who have or are at-risk of diabetes or are caregivers for someone who does, the program meets once a week for six weeks at the hospital and in community settings in and around Chicago, focusing on healthy eating, physical activity, reducing stress and monitoring blood sugar.

Under the Affordable Care Act, such services can be reimbursed through Medicaid. “We want wellness and prevention services under the ACA to be as expansive as possible,” Rubinstein says. “Integration [of health care and social service providers] is important because community-based organizations have access to underserved communities and have the cultural and linguistic competency to meet the needs of diverse populations.” It will be up to individual states to further expand the definition of what can be reimbursed through Medicaid once the essential health benefits rules are finalized by the Department of Health and Family Services.

With increased funding, the ACA may also bolster the financial foundation of community-based health care organizations, which would be a positive step for public health, Pollack says. “Many of the sites that provide care for low-income people with diabetes are really struggling,” he says. “The Affordable Care Act can help us deal with that.”

“Getting your foot amputated is a hospital admission,” Israel says, “plus, what are that person’s chances now of getting and keeping a job? It ripples down.” So what might have happened to that 62-year-old African-American man if he had been diagnosed with diabetes in 2014? “It might not have gotten to the point where his foot had to be amputated,” Israel says. “When he goes to the doctor and gets the equipment, he could receive follow-up from a care coordinator in the community.”

“We would help him be able to better understand his condition” and give earlier recommendations on eating healthy and exercising, Rubinstein adds. “We would speak his language and meet him where he’s at. He would get to us faster, or even first.”

Part of Barbara Passman’s job at the University of Chicago Hospitals is to work with SSA interns. “There’s going to be a need for social workers to become acquainted with the medical system,” she says about the ACA.
The Network for College Success harnesses data, trust and leadership to improve Chicago high schools.

“Nothing quite like this has been done before,” says network founder Melissa Roderick, SSA’s Hermon Dunlap Smith Professor. “When some principals came to me and asked how we could make a closer link between their practice and what we found in research, we said we didn’t have some package to sell, some ‘answer’ that could just be applied. We were going to have to figure it out together.”

That was five years ago, and the basic structure of NCS was set: Principals from about a dozen diverse Chicago Public high schools meet regularly to talk about specific goals in school improvement, with an emphasis on instructional leadership and teacher supervision and development. Roderick and her colleagues pro-

HE MOST INFAMOUS MYTH in public policy is the magic bullet. Talk with anybody about how we can do a better job of treating or managing an issue—any issue—and sooner or later they’re likely to ruefully acknowledge that we must understand there is no one magic bullet to solve the problem.

But while the idea of a single solution may be widely dismissed in theory, it’s a myth for a reason. Often the reality is that policymakers and pundits have just enough attention to really get behind one big idea. Nowhere is this more true than in urban education, where reformers have advocated for one cure after the next: charter schools, smaller schools, smaller classrooms, performance-based compensation, high-stakes testing, new curriculum, new leadership, new teachers. The underlying idea is always, “This will fix our schools.”

The people at the Network for College Success know there is no magic bullet for the high schools that they partner with, and it shows. Instead of an ideological, one-size-fits-all formula, NCS—a partnership between SSA and the Chicago Public Schools—believes strongly in one-on-one coaching, data-driven decisions, professional learning communities, distributed leadership, evidence-based practice, trust, structure, and open communication—all working together and customized to fit each school’s unique situation.
provide insight from her research and other findings from the University of Chicago Consortium on Chicago School Research, as well as real-time data from CPS, to guide decisions. Network coaches work closely with key personnel at the schools to help it all come together.

Since then, the network has expanded to include counselors, teachers and other school administrators and added focus on specific topics like building in-school leadership teams, helping students find the right match for college, and keeping freshmen academically on track. But the basic formula has stayed the same. In a school system where only roughly half of the incoming freshmen will graduate, the results have been extraordinary.

Recognizing the potential impact of the NCS professional community, CPS consolidated all the network schools into one “area,” the district’s organizational unit, in 2009. By the end of that school year, NCS-Area 21 schools had the highest 9th grade on-track rate of the traditional high school areas and showed the greatest improvement from the previous year. NCS-Area 21 schools ranked first in growth of scores from the 9th to 10th grade state assessment, increased college scholarships earned by its graduates from $16 million to nearly $25 million, and led the district in increases in college enrollment, four-year college enrollment and selective college enrollment.

“What makes the network different is they have a very sharp focus and go into their partnerships with a real sense of purpose of what they want to accomplish,” says Allan Alson, the former superintendent at Evanston Township High School and an education consultant who serves as a member of the network’s advisory committee. “They’ve been successful and have established real staying power in keeping results moving forward.”

A NEW WAY

trust and leadership to improve Chicago high schools
bers and to people. The former is present in the data and research they use to guide decisions and measure results; the latter in relying on the school personnel to learn from and trust each other. The network doesn’t just incorporate both these strategies; it weaves them together.

Roderick’s research includes groundbreaking studies on how freshman academic performance is a telling indicator of drop-out rates and the Consortium’s report “From High School to the Future: Potholes on the Road to College,” which outlines the often hidden barriers for low-income high school graduates to attend college. “When policies and programs are being discussed in education, researchers are missing from the table,” she says. “One of our goals with the network is to help move all this important research into the field.”

Roderick also has a long relationship with the Chicago Public Schools, including serving as the CPS director for planning and development for several years. She helped push for the district’s On-Track system to measure the progress of each student throughout freshman year and for a CPS office dedicated to supporting students to attend and succeed in college. Both programs rely on gathering student data in real time and getting it out to the schools, and part of what NCS does best is envision how such information can have a greater impact.

“I’m really impressed with how the network uses data for particular issues in their schools,” says Elaine Allensworth, interim executive director of the Consortium on Chicago School Research, which produces customized school reports that NCS uses with its schools. “They’ve been a great help in thinking about what’s useful to the schools in our data and how to translate it into metrics that people can really understand and use to improve the school.”

Ask anyone in the network about its success, though, and they quickly point out that the human side of the process is just as important, if not more so, than the data. “We’re on the ground and in the schools, and we know them so well. They know we’ll find a way to match what they need with what we can offer,” says Mary Ann Pitcher, the network’s co-director. “There’s a lot of trust we’ve built in the network, both amongst our staff and with the schools. That doesn’t happen spontaneously, but it’s absolutely necessary for the work.”

The network also invests heavily in trust and accountability within the schools, and much of its work is dedicated to building distributed leadership and formal structures. “Being dependent on just hiring smart teachers and top-flight principals is a bad model,” Roderick argues. “There’s this idea that a school can find a Michael Jordan and it’ll be fine. But Michael didn’t win championships until he had a team around him and Phil Jackson worked out the triangle offense. We’re obsessed at the network with systems and structure because that’s how you build something that will last.”

Kenwood Academy, a neighborhood school on the South Side, is a good example. This school year, its Instructional Leadership Team of teachers, a model supported by the network, has taken big steps in sharing decision-making and responsibility throughout the building. “From the beginning we wanted to convince the teachers that the ILT was not something that the administration was pushing. It had to be teacher led,” says David Narain, Kenwood’s assistant principal. “And even last year there was some hesitancy, I think, as teachers were wondering if it could make a difference. This year, teachers are taking responsibility for professional development, for administering school-wide assessments and more. It makes a real difference for what we can accomplish at the school.”

Kenwood’s teachers say that it also took some time to build a level of trust with Sarah Howard, the NCS leadership coach, who regularly visits the school to hear what’s new and give feedback on progress. “I remember my first meeting with Sarah, I was defensive, kind of thinking, ‘Who are you to give this advice?’ Within a month, though, we had that connection,” says Jenny Greenblatt, a teacher at Kenwood and a member of its Instructional Leadership Team. “We saw
Solving the Drop-Out Crisis

MELISSA RODERICK HAS BEEN INTERESTED in the link between how well freshman do in high school and their graduation and drop-out rates for a long time—she wrote her dissertation on the topic. In 2003, based on years of research on the importance of freshman performance by Roderick and her colleagues at the Consortium on Chicago School Research, CPS started using a freshman On-Track measure in their accountability system. A student is on-track if he or she has no more than one F in a core subject during a semester and ends 9th grade with five full course credits. Following CCSR’s 2007 report “What Matters for Staying On-Track and Graduating in Chicago Public Schools,” the district added new freshmen academies and personnel in schools dedicated to finding ways to keep 9th grade students on-track.

As CPS pushed more and more resources to keeping freshmen on-track, however, Roderick found herself getting worried. The research certainly showed a correlation between a student keeping on-track freshman year and graduating. But what if it wasn’t causal? “There’s enormous pressure for this kind of research, where we’re working so closely with the middle achieving students, and we’re making plans based on our work, but what if we’re wrong?”

So Roderick began looking into whether On-Track leads to graduation for a significant number of students. The results from her initial research are so strong that she has broadened the scope to look at a wider set of schools. “If we’ve got this right, it’s like we’ve solved the high school dropout crisis in America,” she says.

Looking closely at the data, Roderick and her team have found that when there’s been an improvement in freshman On-Track performance, the results are persistent, even after the attention and focus in freshman year is over. One of the first schools to noticeably move the needle for On-Track performance was Kenwood Academy. A 14 percentage point increase in the number of 9th graders on track in 2008 remained a 14 percentage point increase for the cohort the next year in 10th grade, and a 16 percentage point increase in the number of 11th graders with 17 or more credits at the end of that year.

Drilling down, the research showed the attention was having an effect for all types of students. When the ninth grade student cohort who had not done well on the major standardized test for 8th graders improved their On-Track from 45 percent to 66 percent at Kenwood, in 10th grade they increased from 30 percent to 54 percent. The middle achieving students had a 7 percentage point increase in 9th grade translate to a 8 percentage point increase in 10th. And the highest performing kids had a 18 percent 9th grade increase maintain as a 18 percentage point rise in 10th grade.

Roderick has found similar sustained success at three other CPS schools that were able to move the On-Track percentage in 2008, and initial indications look as good for another four schools that moved significantly in 2009. Her research team has combed through the data looking at things like the distribution of failing grades across classes and changes in attendance—factors that could call into question the validity of the change—and they’ve been consistently satisfied with the results.

“These aren’t just network schools; 40 CPS high schools have shown an increase in On-Track thanks to the attention that’s being paid to freshman performance,” Roderick says. “We’ve just got funding to expand this research—we’re going to look at more schools and be able to see if these kids are actually graduating from the earliest cohorts. We’re very excited about this work.”

### School-wide Rate

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<td>10th grade on-track</td>
<td>50%</td>
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<tr>
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<td>51%</td>
<td>67%</td>
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### Cohorts of incoming students, organized by 8th grade test scores

#### LOWER-ACHIEVING STUDENTS

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#### MIDDLE-ACHIEVING STUDENTS

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<td>76%</td>
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<tr>
<td>10th grade on-track</td>
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#### HIGHER-ACHIEVING STUDENTS

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</tr>
<tr>
<td>10th grade on-track</td>
<td>68%</td>
<td>86%</td>
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how she was making us better leaders and pushing us to function better as a group.”

“The way our relationships and data interact is critical,” says NCS co-director Sarah Duncan. “In education, data is often used punitively, to show people they’re doing things wrong. We built trusting relationships in the meetings with leaders and at the schools so that we can talk candidly about what the data is showing, so we can really get at what it will take to change the numbers.”

ALTHOUGH THE NETWORK’S underlying strategies and philosophy have remained constant, its programs have steadily grown over the last five years. Six months into the project, for example, the network heard that the principals simply didn’t have time to handle everything the schools needed, and so the distributed leadership program was launched.

Eighteen months later, in response to the “Potholes” report, NCS began the College Counselors’ Collaborative to support counselors in moving students through the college search, application and enrollment process. The network’s latest program is Pipeline Project 3.0, a two-year-old effort using the same tools—data, peer learning, coaching and schoolwide structures—to increase the number of highly qualified students who enroll in and graduate from selective colleges and universities.

“If a student here doesn’t fill out a FAFSA form [for federal student aid], they’re not going to college, unless they hit a gold mine,” says Mary Corral, the chair of the counselor department at Hancock High School, a NCS neighborhood school where 91 percent of the students are Hispanic and 95 percent are low-income. To ensure that all students have filed, Corral’s team has a system built on using real-time information from CPS and strategies and support from NCS workshops and meetings. They have a similar process in place so every student applies to at least three colleges and the most capable students apply to five, with a mix of standard, safety and reach schools.

Hancock’s students have also benefited from a two-year-old partnership between the network and the Associated Colleges of the Midwest, a coalition of small liberal arts colleges that are interested in increasing their student diversity. Although tuition is often high at these colleges, they also typically offer more financial aid, making them more affordable for low-income students, and offer a student-centered environment. The result is students who are more likely to stay in college and graduate.

“College choice is everything. But when you go to neighborhood high schools, most of the counselors have come up through the teacher ranks and they

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The Strength of a Neighborhood School

THE STAFF OF THE NETWORK FOR COLLEGE SUCCESS have deep experience with charter schools—nearly every staff member founded and/or led a small, charter school in Chicago before joining the network. Yet one of the biggest lessons they want observers to take from the network is that large traditional high schools can succeed.

“We got involved with small schools and charters because we wanted to show that urban high schools can work. And we did that,” Melissa Roderick says. “But charters have to spend a lot of their time working to raise money; that’s not necessarily sustainable, especially on a large scale. And a lot of the charter lessons can’t easily be transferred—it’s different getting 60 kids to fill out a FAFSA form than 225 kids.”

Pitcher points out that approximately 80 percent of CPS’s high school students go to a neighborhood school. “To make urban education work for most kids, we’ve got to make neighborhood schools work. The network is one opportunity for us to say, ‘We’ve learned a lot and we can move it to the other 80 percent of the students,’” she says.

For those who say the urban neighborhood school simply can’t improve, look at Hancock High School, where the percentage of 9th grade students on-track increased more than 19 percent over four years, to 80 percent. Or Kenwood Academy, which has been listed as a Top 100 High School in the country by Newsweek.

“We believe in the people at traditional high schools. We know they have the capacity to change these schools,” Roderick says. “The systems and distributed leadership that we emphasize are ways to do that.”
don’t know about schools like Grinnell and what they offer,” Roderick says. “Our work with ACM helps the students who can get into these schools to know they exist and to get the financial support to attend.”

Corral says that more than 20 of Hancock’s graduates are now attending ACM colleges like Coe, Lake Forest and Monmouth. “The ACM network is very influential here,” she says. “And our department has grown a lot since we joined the network. It has been instrumental in helping us become a cohesive group.”

In 2009 NCS also started a project focusing on CPS’s On-Track system for freshmen. The network provides each school with a customized report from the Consortium that compares CPS metrics for the freshman class over time and with other CPS schools. In typical network fashion, the report is only the first step in a dialogue and support to address what the data shows.

“With the On-Track indicator you know that say 200 kids in your building are off-track and it’s only the 10th week of school. What are you going to do about that?” Duncan says. “We help them carefully look at the data and see if course failures are concentrated in math class or mostly in courses after lunch or for more boys than girls. Then together we figure out strategies to turn that around.”

Not surprisingly for NCS, the data leads back to a personal connection. If a student isn’t doing well in first-period English, the reason might be that he simply misses too many classes. “Someone from the school calls home and maybe hears that his mom simply can’t get him up and out in the morning,” Roderick says. “So they suggest he programs his cell phone to be an alarm, and he starts making it to class more often. If that works, I guarantee that kid is not dropping out. You’ve got the parent, because they know that someone cares about them at the school. All this data is really about segmenting and focusing on individual kids and what they need.”

Here are changes at CPS this year, with a new administration led by CEO Jean-Claude Brizard, and so the Network for College Success is changing as well. With a new district organizational structure, Area 21 was disbanded, and the schools in NCS now fall into four of the five new high school networks.

“It’s certainly a shift. While we were all in one area, the work and goals of NCS and the area could be tightly aligned,” Pitcher says. “But this way allows our schools to share what they’ve learned with the schools in their new networks.” Kenwood, for example, has already hosted a guided visit for 16 colleagues from other high schools to show how they use an internal learning walk as a way to get a better idea of how instruction is improving at their school.

NCS is now consulting with CPS’s central office on topics like instructional improvement and fostering professional learning in schools. “They’ve been really supportive of our experiences and results with high schools, and we’ve been really appreciative of their level of openness and collaboration in working together on high school improvement efforts,” Pitcher says.

The network is also starting this academic year as the lead partner to Hancock and Wells Community Academy, as the schools have begun a three-year “transformation” process. Eight schools were selected for the $48 million program, which is targeted at providing social and academic support. “It’s an opportunity to deepen and broaden our work and scope at these two schools,” Pitcher says. “In everything we do, we’re ready to try something new, build on the ideas and structures that have worked so far.”

In a 2007 Consorium paper titled “A New Model for the Role of Research in Supporting Urban School Reform,” Roderick and her co-authors wrote that effectively supporting the search for solutions in schools “requires researchers to ask questions that address the core problems facing practitioners and decision makers and to see themselves less as ‘outside evaluators’ and more as a resource that engages interactively with educators and reformers to build capacity for reform.” With the Network for College Success, she has found a committed set of colleagues to do just that.
SSA Honored for Academics, Field Education

A Safe Haven Foundation recognized Dean and Mose & Sylvia Firestone Professor Neil Guterman for his and SSA’s efforts to aid Chicago’s populations battling homelessness, poverty and crisis at the foundation’s 2011 Champions for Recovery Awards on September 20. On behalf of SSA, Guterman received the award, which stresses his and the School’s leadership in academics. A Safe Haven is a social business enterprise that empowers families and individuals experiencing homelessness or crisis to achieve sustainable self-sufficiency.

SSA was also honored by the Lawyers’ Committee for Better Housing on September 22 for contributions in field education made by students in the areas of affordable housing and advocacy for low-income tenants facing serious housing issues. The keynote speaker was Andy Mooney, Chicago commissioner of housing and economic development.

Faculty Expansion

SSA is pleased to announce a faculty expansion and invites applications for multiple positions at the assistant, associate or full professor levels. The School is particularly interested in candidates with an international perspective whose scholarship focuses on global processes and issues conceived broadly, ranging from domestic to international social welfare concerns and from micro to macro levels of analysis. For more information and to apply, please visit www.ssa.uchicago.edu/ssa-announces-expansion-its-faculty-ranks.

SSA Student Awards

SSA student awards were given at the 2001 hooding ceremony during graduation on June 10. Darrah Sipe received the Wilma Walker Honor Award for outstanding work in the first year and promise for future achievements in social work. Kristen Oshyn won the Sonia Berz Honor Award, given to a master’s student for outstanding work and promise in the field of aging. Erica Young was given the Evelyn Harris Ginsburg Memorial Prize, awarded to a master’s student for outstanding work and promise in work in schools. Shermin Moledina and Saleem Penny were awarded the Solomon O. Lichter Memorial Prize for master’s students based on scholarship and professional leadership.

SSA students also earned awards from outside organizations this year. Christina Andrews received the Robert L. Schneider ISP Dissertation Award from Influencing State Policy at the Council on Social Work Education’s (CSWE) annual meeting. Her dissertation examines the potential implications of Medicaid’s expansion under the Affordable Care Act on accessibility and organization of substance abuse treatment in the United States.

Doctoral student Tasha Keyes received the University of Chicago’s Jane Morton and Henry C. Murphy Award, which recognizes three non-graduating student leaders who have made exceptional and unique contributions to the University community.

Doctoral student Benjamin Roth was selected as the 2011-12 recipient of the Eileen Blackey Doctoral Fellowship from the National Association of Social Workers Foundation. The Blackey Fellowship is awarded to a social work doctoral stu-
dent engaged in dissertation research in welfare policy and practice.

Holton to Lead Aging Agency
Lecturer John Holton has been named as the director of the Illinois Department on Aging by Governor Pat Quinn. Holton served as associate director of the Division of Mental Health at the Illinois Department of Human Services from 2007 to 2010. Previously, he served as site director for the Harvard University School of Public Health’s Project on Human Development in Chicago’s Neighborhoods.

SSA Hosts Students from Tata Institute
Associate Professor Robert Chaskin moderated the discussion “Cross-National Perspectives on Community Development” on November 4 at SSA, where visiting students from the Tata Institute of Social Sciences (TISS) and SSA students who participated in a study abroad and field placement experience at TISS this summer presented their observations and engaged in a comparative discussion about urban poverty and community development in Mumbai and Chicago. Marilyn B. Rusnak, A.M. ’71, supported the exchange program.

Social Entrepreneurs
The University of Chicago’s Booth School of Business and its Polsky Center for Entrepreneurship named winners of its first-ever Social New Venture Challenge, an offshoot of the school’s business competition, the New Venture Challenge. SSA master’s student Angela Aifah was a team member for Waste to Watts, which tied for second place and received $5,000. Waste to Watts repurposes electronic waste to create uninterrupted power supplies.

SHINE Starts
The STI/HIV Intervention Network (SHINE), held its inaugural event for the public on Thursday, October 20. Ralph DiClemente, the Charles Howard Chandler Professor at Emory University’s Rollins School of Public Health, presented “The State of HIV/STI Prevention Among Adolescents: Directions for Future Research.”

Teach-In: Combating Corporate Greed
SSA hosted “Debt, Austerity, Corporate Greed and What You Can Do About It,” a national/local teach-in via streaming video, on April 5. Moderated by Frances Fox Piven and Cornell West, the event featured Jeffrey Sachs of Columbia University, Heather McGhee of DEMOS and Richard Trumka of the AFL-CIO.

Open House Chicago
Over the October 15 weekend, SSA’s Mies Building was one of five University of Chicago buildings featured by “Open House Chicago.” Sponsored by the Chicago Architecture Foundation, the event featured more than 100 architectural sites of interest in 15 different communities, and allowed participants the rare opportunity to visit, and in some cases tour, architecturally or historically significant sites.
Samuels’ Sabbatical

Associate Professor Gina M. Samuels is on sabbatical for the 2011-12 academic year as researcher in residence with the Annie E. Casey Foundation. Samuels’ research examines identity development among transracial adoptees and the aging out of young adults from foster care.

Faculty Speaking

In March, Assistant Professor Alida Bouris spoke on the panel “Hispanic Children’s Health Prevention, Oral Health and Behavioral Health” at the National Hispanic Medical Association Conference in Washington, D.C.

Associate Professor Gina Samuels presented “Pregnant Potential: Missed Opportunities in Working with Young Parents with Foster Care Backgrounds” as part of the Family Planning and Contraceptive Research Lecture Series on April 28 at the University of Chicago Medical Center.

Helen Ross Professor Harold Pollack presented the keynote speech “The Politics of Family Planning and Reproductive Health Services in Health Care Reform” at the Reproductive Justice & Health Care Reform: The Impact of Reform on the Reproductive Health of Underserved Women and Youth conference, hosted by The Section of Family Planning and Contraceptive Research & the Center for the Study of Race, Politics and Culture at the University of Chicago on Thursday, May 12.

Professor Mark Courtney was a panelist for Chapin Hall’s Thursday’s Child Forum and webcast. He presented “Extending Foster Care to Age 21: Implications for Providers, Impact on Budgets” on May 12.

Professor Curtis McMillen delivered the annual Rhoda Sarnat Lecture at SSA in June, “Diagnostic Overload, Medication Mayhem and Alphabet Soup: Children’s Mental Health Services Today.”

At the European Social Policy Association in Valencia, Spain in September, Associate Professor Evelyn Brodkin co-presented “The Politics of Governance and Labour Market Reforms: Comparing Pathways to Reform in Denmark and the U.S.”

New Professors Join SSA Faculty

Roberto G. Gonzales

Assistant Professor Roberto G. Gonzales joins SSA from the University of Washington, where he was an assistant professor of sociological work and an adjunct assistant professor of sociology. His scholarly interests include immigrant incorporation and adaptation, the transition to adulthood of vulnerable populations, urban poverty, youth civic involvement, and Latino communities and families.

An alumnus of the master’s program at SSA, Gonzales also has an undergraduate degree in sociology from Colorado College and master’s and doctoral degrees in sociology from the University of California, Irvine. He says that his interest in undocumented immigrant youth began when he was working in Chicago’s West Town neighborhood.

“I met a lot of young people who came to this country at very early ages and as they grew up, they weren’t really defined by their legal status: They could attend K-12 schools and had the same experiences as their peers,” Gonzales explains. “But as they reach their later teenage years, they confront roadblocks for work, driver’s licenses, financial aid for college. The process of ‘learning to be illegal’ tremendously impacts these young people’s coming of age, identity formation, friendship patterns, aspirations and expectations.”

After meeting youth in similar situations in Los Angeles, Gonzales started the West Coast Undocumented Young Adults Research Project, through which he has collected in-depth qualitative data on more than 200 undocumented young adults who have lived in the U.S. since childhood. He is working on a book that outlines his findings, and he plans on extending his research to both better understand the mental health implications and compare how activism around the issues has grown in LA and Chicago.

“I first came to SSA because I enjoyed the ability it afforded me to both be in the community and in knowledge production, and I’m excited to be back for the same reasons,” Gonzales says. “SSA and the University of Chicago have such storied histories with settlement house work and the early studies of immigrant settlement and adaptation that defined the field; this is a great place to be for an immigration scholar.”

Miwa Yasui

Assistant Professor Miwa Yasui comes to SSA after completing a National Institute of Mental Health Postdoctoral National Research Service Award Individual Fellowship. Yasui received her undergraduate degrees in comparative culture from Sophia University in Tokyo and in psychology at the University of Oregon, and a Ph.D. in clinical psychology at the University of Oregon. A licensed clinical psychologist, Yasui has been actively engaged in clinical practice with children and youth for several years.

Yasui’s research focuses on the role of culture on development and how this understanding can enhance the lives of culturally diverse families. Her studies include observing the ethnic-racial norms, values, practices and beliefs in discussions between African-American and American-Indian parents and their early adolescent children about the experience of discrimination. “I found that whether and how parents socialize their children about the salience of the family culture and further how they transmit messages on proactively coping with socio-cultural
and the Nonprofit Sector: Community Building in a Gentrifying Chicago Neighborhood.” Assistant Professor Jennifer Mosley chaired and presented at the panel, “A Longitudinal Study of Human Service Nonprofits: Challenges and Opportunities.”

Several SSA faculty presented at the Association for Public Policy and Management conference in Washington, D.C. in November: Associate Professor Evelyn Brodkin and doctoral student Matt Spitzmueller presented “On the Front Lines of Human Need: A Street-Level Study of Nonprofit Community Mental Health Services.” Associate Professor Julia Henly sat on the panel “Child Care Among Vulnerable Families: Issues in Policy, Participation, and Education.” Assistant Professor Marci Ybarra co-presented “The Relationship between State-Level Characteristics and Child Care Subsidy Policy Choices” and “The Characteristics of Families with Unstable Care Arrangements: What Are the Implications?” Assistant Professor Jennifer Mosley presented “The Role of Intermediary Organizations in Shaping the Advocacy Relationship between Nonprofit Service Providers and Government” and co-presented with Professor Colleen Grogan and Associate Professor Scott Allard on “Spatial Mismatches and Unmet Political Needs: The Access of Low-Income Residents to Organizations Playing a Community Representative Role.”

Several SSA faculty spoke at the Association for Research on Nonprofit Organization and Voluntary Action conference in Toronto in November: Associate Professor Robert Chaskin presented “Policy Engagement and Systems Change in the New Communities Program” and “Mixed-Income Stressors played a critical role in the well-being of these adolescents,” she says. “Youth who received more messages from parents on preparation for bias or discrimination reported less depression and problem behavior, but the promotion of mistrust from the parents—cautioning them about other ethnic groups—was related to higher depression and at-risk behavior.”

Yasui’s post-doctoral work included developing an intervention that helps clinicians enhance alliance with their client by discussing the cultural influences on a client’s world through ecological factors such as family, community and church. “Current literature on treatment engagement highlights the significantly lower treatment participation rates for ethnic-minority families,” she says. “While many factors play into this difference, for some families, distance in cultural views and backgrounds may increase challenges for clients to connect with a clinician, especially if a client is not from a similar background—for example, the same ethnic, racial or socioeconomic background.”

This year, Yasui is teaching courses in evidence-based practice and cognitive-behavioral theory and practice. “I love the interdisciplinary nature of the School. The faculty members are each involved in varied work but with a common goal, focusing on disadvantaged populations, and from so many different disciplines,” she says. “It’s so diverse, and it really expands your horizons as a scientist.”

Marci Ybarra

Assistant Professor Marci Ybarra joins SSA from the Gerald R. Ford School of Public Policy at the University of Michigan, where she served as a Ford Foundation Postdoctoral Fellow. Ybarra earned her bachelor of social work and master of social work with a concentration in community practice from Wayne State University in Michigan, and she holds a Ph.D. in social welfare from the University of Wisconsin-Madison. Ybarra’s research is concerned with the impact of public supports on the well-being of low-income families. In Wisconsin, she investigated why women who were eligible for welfare either declined or entered the program, finding factors that included the lack of paid family leave as an impetus to entry and the time delay to receive benefits as a deterrent to participation. “I also found in a small qualitative study with 20 welfare applicants that 20 percent of the women who did not follow through on joining had a reading or learning disability,” she says. “When a woman reported very inaccurate policy information about the program, they were part of that 20 percent.”

Her latest study continues a line of research on childcare vouchers for low-income families, including a new project to look at survey data in Los Angeles to examine how issues such as cultural preferences, neighborhood context and available resources impact how undocumented and mixed-status immigrant Latino parents choose childcare—and how the types of care they choose influence their children’s well-being.

Ybarra’s interest in how public policy impacts low-income families stems from her time at Wayne State, when she interned for the Detroit City Council. The office wasn’t able to accommodate a woman who was hoping to do her mandated work participation to receive welfare benefits at the site. “I wanted to know what other options someone seeking welfare would have, and I learned that they weren’t that abundant,” says Ybarra, who’ll be teaching courses in social policy and intervention this year at SSA. “I’m interested in examining how the welfare state and child care work or don’t work together to support low-income families, single mothers in particular.”

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Urban Schooling,” on November 10 at Rutgers-Newark.

Assistant Professor Jennifer Bellamy co-presented the Think Tank “Evidence-Based Practice Partnerships with Community Agencies: Can We Identify a Triple-Win Model?” at the Council for Social Work Education annual program meeting in October in Atlanta, where she also co-presented the paper “Exploring University-Agency Partnerships for Evidence-Based Practice (EBP) Through Individual Expert Perspectives and Experiences.” Bellamy participated in a clinical round table presentation, “Bridging the Gap: Dissemination of Evidence-Based Practices from the Lab to the Clinic,” during the Association for Behavioral and Cognitive Therapies Convention in Toronto in November.

Associate Professor Waldo E. Johnson Jr. presented “Male Roles within the African-American Family and Kinship Network: Historical Perspectives, Contemporary Challenges and Future Opportunities” at the Carter G. Woodson Institute’s 30th Anniversary Symposium on April 8, the Social Determinants of Health Disparities Conference at Duke University on August 9 and the Council for Opportunity in Education’s Annual Pre-conference Workshop.

He also presented “Special Approaches for Attracting, Engaging and Retaining Low-Income Black Males” at the Washington Hilton on September 25, the American Public Health Association annual meeting in Washington, D.C., and the University of Illinois Chicago Institute for Research on Race in Public Policy 2011 Fall Policy Symposium in mid-November.

Senior Lecturer Stanley McCracken presented “Substance Use in Older Adults,” on August 7 at the Levy Senior Center in Evanston; “Psychiatric Disorders in Older Adults,” on August 26 at the Glen Lake Terrace Nursing and Rehabilitation Center in Waukegan; “Motivational Interviewing” on September 14 at the Salvation Army Family and Community Services in Chicago and on November 13 at the National Hemophilia Foundation Conference, Chicago. He presented “Alzheimer’s Disease: Definition, Diagnosis, Progression, Screening and Treatment” on September 15 at the Brentwood North Rehabilitation and Nursing Center in Riverwoods; “Substance Abuse and Misuse” on October 7 at the Joliet Community Hospice in Joliet; “Alzheimer’s Disease and Other Dementias: Overview and Current Thinking” on October 27 at the Illinois Alcohol and Other Drug Abuse Professional Certification Association Fall Conference in Rend Lake, and “Spirituality in Social Work Practice” on November 2 at the Glen Healthcare Network in Skokie.

Assistant Professor Roberto Gonzalez presented “Learning to be Illegal: Undocumented Youth and the Confusing and Contradictory Routes to Adulthood” on September 16 at the University of Pennsylvania’s Department of Sociology – Race, Ethnicity and Immigration Colloquium Series in Philadelphia; “Waking up to a Nightmare: Policy, Politics and the Troubled Road Ahead for Undocumented Immigrant Students” on October 3 at Cornell University’s Institute for Social Sciences in Ithaca, N.Y.; and “Where Do We Go from Here? Dreaming, Organizing, and Local Level Strategies to Integrate Undocumented Youth” on October 26 at the National Immigrant Integration Conference in Seattle.

New Faculty Grants

SSA’s faculty have recently received a number of new research and program grants.

Associate Professor Scott Allard for “Places in Need,” Russell Sage Foundation

Dean and Mose & Sivula Firestone Professor Neil Guterman for “SSA Violence Prevention Program,” Nathan Cummings Foundation


Helen Ross Professor Harold Pollack for “Intellectual Disability and the American Medical Welfare State,” Robert Wood Johnson Foundation

Herman Dunlap Smith Professor Melissa Roderick for “School Improvement Grant,” Department of Education, Illinois State Board of Education and Chicago Board of Education and for “Network for College Success,” Boeing Foundation and Chicago Community Trust
the alumni community

Alumni Weekend 2011

MORE THAN 400 SSA ALUMNI RETURNED to campus on June 2-4 to participate in Alumni Weekend, started with a kick-off networking mixer at Little Branch Café, coordinated by Katherine Suberlak, A.M. ’07 and D. Michael Coy, A.M. ’06.

Nearly 100 alumni and SSA students from student groups and programs attended the affinity night receptions, including Student Government Association, Feminist Student Association, Pan Asian Student Association, African American Student Association, the Elephant (Diversity Committee), Community Schools Program and School Social Work Program. CW Chan, A.M. ’71, Julie Garfield, A.M. ’10 and Quenette Walton, A.M. ’04 shared their perspectives on diversity in the field during an enlightening panel sponsored by the Elephant.

The Class of 1971 celebrated 40 years of social work practice at a dinner hosted at the home of Deputy Dean for Curriculum Karen Teigiser, A.M. ’71, and distinguished alumni of 1961 and earlier shared memories of SSA during the annual 50+ Lunch, which Teigiser also hosted.

Butler Award Nomination for New Alumni Weekend

SSA’s Alumni Weekend, traditionally held in June, is moving to October 19-20. More details will be sent to alumni in the spring.

During Alumni Weekend, the School will confer the Elizabeth Butler Award to a recent graduate who has shown exceptional promise in the field of social work. We are currently seeking nominees: Successful candidates should show a strong commitment to social change, agency or community leadership, creativity in non-traditional or innovative approaches to practice, and contributions to the field through research and publications and/or demonstrated professional skills. For more information, please visit www.ssa.uchicago.edu/alumni-awards. All nominations are due March 1, 2012.

ALUMNI WEEKEND 2012

OCTOBER 19-20
SSA Stars Celebration

At the SSA Stars Celebration on Alumni Weekend, Charles Curie, A.M. ’79, and Jona Rosenfeld, A.M. ’56, Ph.D. ’62, received SSA’s Edith Abbott Award for distinguished service to society and outstanding professional contributions at the local, national and international levels.

The African American Student Association presented Terri Travis Davis, A.M. ’99 with the African American Alumni Award, and PCC Community Wellness Center accepted the Distinctive Innovation in Social Services Award for its Behavioral Health Program.

SCENES FROM THE SSA STARS CELEBRATION

1 : Edith Abbott Award winner Charles Curie, A.M. ’79
2 : Edith Abbott Award winner Jona Rosenfeld, A.M. ’56, Ph.D. ’62, with Alumni Association Board Vice-President Nicole Hrycky, A.M. ’04, (left) and President Jinnie English, A.M. ’99
3 : African American Alumni Award winner Terri Travis Davis, A.M. ’99, with masters students Sharise Tucker (left) and Akua Agyeman
4 : Alumni enjoy the SSA Stars Celebration
5 : Rosenfeld gives a hug to Nancy Orlinsky, A.B. ’51, Ph.D. ’59 (Social Sciences), a former research assistant
6 : Heather Hoffman, A.M. ’09, accepted the Distinctive Innovation in Social Services Award on behalf of the PCC Community Wellness Center
7 : Alumni listen to Neil Guterman’s remarks
8 : Robert Chaskin and John Schuerman
9 : Karen Teigiser (left) and Jennifer Bellamy meet with alumni
Alumni Updates

Anita Mackey, A.M. ’41, traveled from California to Chicago to celebrate her 70th year reunion during SSA’s 2011 Alumni Weekend.


Richard Calica, A.M. ’73, has been named director of the Illinois Department of Children and Family Services by Illinois Governor Pat Quinn. For the past 33 years, Calica has served as the executive director of the Chicago-based Juvenile Protective Association. He was chairman of the Governor’s Task Force on Family Preservation from 1993-1994 under Governor Jim Edgar and currently serves as chair of the DCFS Risk Assessment Advisory Committee. He has also worked at mental health centers and as an instructor at SSA.

Bernie Dyne, A.M. ’79, president and CEO of Perspectives Ltd. and a member of the SSA Visiting Committee, accepted the 2011 Alfred P. Sloan Award for Business Excellence in Workplace Flexibility for Perspectives, which has been recognized for five years running by the Sloan Awards for demonstrating an effective and flexible workplace and achieving organizational success. As a Sloan Award winner, Perspectives Ltd. ranks in the top 20 percent of employers nationally for flexible work programs, policies and culture.

Robyn L. Golden, A.M. ’81, director of older adult programs at Rush University Medical Center, delivered the keynote address, “Mental Health and Aging: A National Perspective on Practice, Research and Policy,” at the 1st annual Patty Black Conference, “Working with Older Adults—Current Trends,” on September 16 at the University of Illinois at Chicago. In October, Golden and colleagues at the Rush University Medical Center’s Community Caregiving Outcomes Alliance accepted the Rosalynn Carter Leadership in Caregiving Award from the former first lady. The award recognizes leadership in implementing innovative partnerships between community agencies and care giving researchers, bridging the gap between science and practice.

Debra Dyer, A.M. ’97, was appointed as deputy of affirmative action of the Illinois Department of Children and Family Services in September. Prior to this appointment, she served as the chief deputy general counsel of DCFS since July 2003. In this capacity, she directed and supervised the activities of staff attorneys engaged in conducting extensive legal research, writing legal opinions and drafting legislation and department procedures while assisting the general counsel in the development and implementation of legal strategies designed to minimize litigation risks. Dyer has also served as an assistant state’s attorney in the State’s Attorney Office of Cook County.

Evelyn Diaz, A.M. ’98, was appointed by Chicago Mayor Rahm Emanuel to lead the Department of Family and Support Services after serving an appointment by former Mayor Richard M. Daley as CEO of the Chicago Workforce Investment Council. Before joining CWIC, Diaz was the deputy chief of staff in the mayor’s office, where she served as the office liaison to the city’s human capital departments. Prior to working in government, Diaz was associate director of the Chicago Jobs Council, where she oversaw financial, administrative, policy and program operations. She will serve on Emanuel’s new Executive Council of the Early Childhood Task Force, aimed at helping the most at-risk children and increase the programs’ accountability.

Esther Franco-Payne, A.M. ’99, is program director for the Justice/Violence Initiative of Chicago Metropolis 2020, a business-based civic organization promoting long-term planning and smart investment in the Chicago region and working for better outcomes in the legal and corrections systems. Franco-Payne was recently appointed a commissioner for the Illinois Juvenile Justice Commission and participates on the Coordinating Council for the Illinois Models for Change initiative. She served on then Mayor-Elect Rahm Emanuel’s Transition Committee, concentrating on public safety.

Spruill D. Weber-White, A.M. ’01, was awarded the Handy L. Lindsay, Jr. Award for Inclusiveness in Philanthropy by the Chicago African Americans in Philanthropy and Donors Forum on March 8. For 15 years, White served as a senior program officer for human and community development for the John D. and Catherine T. MacArthur Foundation. Prior to that, White was the executive director of the Chicago Jobs Council and the Illinois Development Director for the United Negro College Fund. Before returning to Chicago, he was the president and CEO of the Seattle Urban League. He is a founding member of Chicago Blacks in Development. From January until June 2011, White was a visiting scholar at SSA, participating in the development of a year-long, graduate-level certification program for nonprofit social service agency leaders.

Natalie Haney Tilghman, A.M. ’04, the extended evening program field coordinator in SSA’s Field Education Office, won first place in The Atlantic Monthly Student Writing Contest for fiction for “Hidden Pictures.”

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Mose J. Firestone, A.M. ’43, died in July. He was 96. A pioneer in professionalizing clinical social work, Firestone was the chief of psychiatric social work at Mount Zion Psychiatric Clinic in San Francisco. He enrolled in SSA in 1941, rather than joining the U.S. Olympic gymnastics team. Upon earning his degree, he served in the military, becoming the chief psychiatric social worker for the European Command based in Stuttgart, Germany. Following his service, Firestone oversaw accreditation of the psychiatric sequence of the graduate school of social work at Indiana University. He then returned to the San Francisco area with his first wife, Ruth Lowenstein Firestone, A.M. ’43, and the two opened a private practice and established a school for underachievers.

Firestone served as president of the Northern California Association of Psychiatric Social Workers, chairman of the NASW Northern California Chapter, and president and CEO of the Los Angeles Retarded Children Foundation Child Development Center. He earned his A.B. from the University of California in 1938 and his Ph.D. from Lincoln University in 1948. In 2006, Firestone and his wife Sylvia established a professorship in SSA. Dean Neil Guterman was appointed SSA’s Mose & Sylvia Firestone Professor in 2007.

Stephen L. Angell, A.M. ’47, died on May 6. He was 91.

Alvin S. Levinson, A.M. ’47, died on February 3. He was 91. Levinson was executive director of the Northwest Indiana Jewish Welfare Federation and the Toledo Jewish Welfare Federation until 1984. In retirement, he was active in fund raising for nonprofit organizations.

SSA has recently learned of the death of Winifred De Vos McLaughlin, A.M. ’47, retired clinical social worker at the Lincoln Child Center.

Gladys Kruger, A.M. ’49, died on January 20, 2010. She was 87.

Katalin Paterson/Sarosy, A.M. ’50, died on May 1. She worked as a social worker in Berkeley, Cambridge (England), London, Cambridge (Mass.) and in Canberra, Australia with the Immigration Department, the Heart Foundation and the Parliamentary Library.

Christian Elliot Ledley, A.M. ’58, died during the week of July 4. She was 85. Ledley served in World War II in Great Britain, manning an AA gun. After the war, she earned her undergraduate degree at the University of Edinburgh in social work and enrolled in SSA. Ledley helped create Emergency Homes, Inc. (later Extended Hand, Inc.) to help families with no or substandard housing. She served as a tenant counselor for the Franklin Apartments in Tacoma Park, Md., and also volunteered at Senior Health Insurance Assistance Program, helping with Medicare and Medicaid questions. In 1996, Ledley established an SSA scholarship, which to date has helped 13 students with ties to Great Britain.

Mary Finney Lybarger Collins, A.M. ’60, died on June 8. She trained and supervised many successful social workers and psychotherapists, supervised counselors and psychotherapists, and practiced as a psychotherapist in the Wellspring Centre for Psychotherapy and Counseling in Edinburgh, Scotland.

Mary Katherine Mullins, A.M. ’70, died on June 14 in Louisville, Ky. Mullins received her B.S. from Ursuline College and worked with the late Rt. Rev. Msgr. H.J. Lammers at Catholic Charities for many years.

Janice Michelle Baum, A.M. ’75, died on May 23 in Jensen Beach, Fla. She was 61. Baum lived in Milwaukee from 1975 to 2000 and worked at the Children Service Society of Wisconsin. She served as president of the Milwaukee Ballet Friends, on the board of the Volunteer Center of Greater Milwaukee, as a member of the Junior League of Milwaukee and several other community organizations. In Baum’s memory, the family and their friends have established a scholarship in SSA. If desired, contributions may be made to the Janice Baum Scholarship.

Arthur C. Nielsen Jr. died on October 3 at the age of 92. The former president and chairman of the A.C. Nielsen Company, he established the Patricia McKnew Nielsen fellowship at SSA in honor of his late wife, Patricia “Patty” (McKnew) Nielsen, who passed away in July 2005.

The son of the founder of the company, Nielsen worked for the firm for his entire career after serving in the Army Corp of Engineers during WWII. He was instrumental in moving A.C. Nielsen into new fields and supporting its growth; he served on the boards of more than 20 companies and advised three presidents. Patty Nielsen was a leader of the SSA Visiting Committee and Development Council from 1981 until 2003 and she led SSA’s 75th anniversary celebration in 1983, heading the most successful fundraising effort for the School at the time. The Patricia McKnew Nielsen fellowship supports master’s students in their pursuit of the finest education for individuals who want to bring about positive change in the lives of those in need.
PRACTITIONERS HAVE access to an ever-growing arsenal of effective behavioral health interventions for concerns ranging from trauma to parenting, and technological advances have facilitated the identification, communication and synthesis of large amounts of research information. These exciting advances have emerged in the context of increasingly limited resources and a demand for accountability in social and health services.

Despite these pressures, opportunities and advances, the regular movement of findings from research into practice has proven to be challenging. In fact, the gap between research and practice is so wide that it has been characterized by the Institute of Medicine as a chasm. Research in healthcare suggests that only a fraction of clinical practices are based on evidence, and one study over 17 years found that an average of only 14 percent of scientific discoveries made it into usual practice. I would expect that number to be even lower for behavioral health interventions.

One approach to crossing the research chasm is evidence-based practice (EBP). Social work has talked about moving knowledge from the academy to the clinic for a long time, and the term evidence-based practice is often used loosely as shorthand for this concept. EBP, however, is a formal process, originally outlined in medicine in the late 1990s and later adopted in social work, that utilizes a specific framework to accomplish these goals.

Even though EBP is a relatively new approach to service delivery, its meaning has evolved and transformed over time. At the outset, the EBP process involved making practice decisions through a series of steps based on the intersection between best available research evidence, client needs and preferences, and practitioner expertise.

These steps emphasized the identification and evaluation of research evidence, but provided little guidance to practitioners related to implementation. For example, one critique of the early model of EBP is the lack of recognition of the realities of the practice environment and the complexity of the implementation process. Many evidence-supported interventions include expensive trainings and materials, require highly skilled clinicians, take time to implement, and are difficult to assess adaptations to fit diverse clients, communities and service providers. The list approach can also stifle innovation in the field by limiting practitioners who wish to develop and test novel interventions.

Fortunately, alternatives to the list approach to EBP and improvements to the original EBP process model are continuously being developed, along with training supports and other resources. I’m excited in particular about two new developments in the field.

The Transdisciplinary Evidence Based Behavioral Practice model (EBBP) integrates advances made in EBP across social work, nursing, medicine, public health and psychology, taking advantage of each of the allied health profession’s strengths and advances. Lead by Bonnie Spring at Northwestern University, the EBBP Project uses a team science approach, developed training and an online support toolbox for practitioners called PracticeWise (practicewise.com), to support the common elements approach.

I include information about both these emerging approaches when I teach, and I encourage others to take a look as well, especially practitioners in the field. To successfully cross the research-practice chasm, a multi-component, innovative and sustained effort is needed. It’s likely that it will take some time to build that bridge, but when done properly, social service clients will benefit from access to the best interventions and research we have available. In this way, the effort is well worth it.

Jennifer Bellamy is an assistant professor at SSA.
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