Perspectives on Social Work

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It is with great pleasure that we bring to our readers the Fall 2008 issue of *Perspectives on Social Work*. These are stimulating times for doctoral students, and particularly for doctoral students in the field of social work. This election has the potential for bringing important social and economic change, and we watch with great anticipation. Regardless of what happens, some barriers will have been broken. It is indeed exciting for us in this field, and it is exciting to be able to contribute through research and scholarship. We are very proud of being able to offer this forum to our fellow doctoral students in social work throughout the United States.

This is also a particularly exhilarating time for *Perspectives on Social Work*. Not only have we extended our call for papers to the entire nation, but our peer review process now includes invited reviewers from other universities in the United States. We are very pleased with the way *Perspectives* has matured over the years.

We would like to welcome Felina Franklin to the Editorial Board. We are thrilled about Felina's participation with *Perspectives on Social Work*. We would also like to extend our warmest thanks to our invited reviewers who make this journal possible through their selfless dedication to service: Sheree Ahart, Darla Beaty, William Cabin, Ada Cheung, Jennifer Herring, Larry Hill, Peter Kindle, Grace Loudd, Thang Luu, Byron Parker, Eusebius Small, Josephine Tittsworth, Venus Tsui, and Yolanda Villareal.

We are looking forward to an exciting electoral season, but in the meantime, we trust that our readers will find this issue useful and informative.

Best regards,
Editorial Board

The 4th Annual University of Houston Graduate College of Social Work
Doctoral Student Symposium
March 27, 2008

The editors are pleased to present the abstracts of the presentations given at the 4th annual Doctoral Student Symposium at the University of Houston, Graduate College of Social Work. The purpose of the annual symposium is to give the doctoral students an opportunity to present their research interests to their peers, professors, and the community. This was the first year that the Doctoral Student Symposium was opened to doctoral students from other universities.

Disseminating Doctoral Research: The Evolution of a Doctoral Student-Run Journal
Saralyn McIver, LMSW, and Kara Lopez, LMSW
University of Houston

Doctoral students have innovative ideas but due to inexperience with the publishing process and the lack of a platform, many great papers are banished to the dark and lonely file drawer. *Perspectives on Social Work*, a doctoral student–run journal, provides a unique opportunity for doctoral students to showcase their work. However, after the journal expanded its call nationwide, it became evident that change in the editorial process was needed to keep pace with rapid growth in submissions. Additionally, change in the review process was necessary to improve and protect diversity and fairness. The purpose of this presentation is to discuss procedural and structural modifications that moved the journal forward in its ability to optimally

disseminate diverse doctoral work. The implications for social work doctoral research and dissemination are far reaching and will be the cornerstone of this presentation.

Responding to Bio-Psychosocial Consequences of Natural Disasters on Child and Adolescent Survivors: School-Based Interventions with the Silent Victims of Hurricane Katrina
Byron Parker, LMSW
University of Houston

This abridged paper presentation provides an overview of the impact of trauma on children and adolescents; statistical analysis of children and adolescents who evacuated to, and enrolled in schools in Houston and surrounding areas; problems associated with the integration of Hurricane Katrina Impacted (HKI) and Internally Displaced Students (IDS) in Houston and surrounding area school districts; an Innovative Intervention Strategies Model (IISM); and a proposal for a multi-dimensional re-adjustment curriculum for public and private schools.

A Randomized Control Experiment of an Early Mental Health Intervention Program
Larry E. Hill, LMSW
University of Houston

A randomized controlled pilot experiment was conducted to determine the efficacy of a preventative mental health program for maltreated children entering the foster care system for the first time. Foster care youth (n = 46) were randomly assigned to a treatment (n=23) or control (n = 23) group. They were assessed using four standardized instruments that measured anxiety, depressive symptomology, negative externalized behaviors, and self-esteem immediately after entry into the foster care system and after six months. The results indicated that after six months, there were no statistically significant differences between the treatment and control group on the standardized measures. The results suggest that mental health professionals should use randomized controlled experiments to determine the efficacy of their programs.

Outcome Based Evaluation for a School-Based Parenting Program with Implications for Social Policy
Menyuan L. Smith, MSW
Clark Atlanta University

Parents are influential change agents for their elementary school-aged children. Often, however, parent service providers fail to use a culturally-centered lens in recognizing the importance of parents' needs, strengths, and perceptions. Parenting programs that advertise as "evidence based" are frequently grounded in Eurocentrism that fails to reflect diverse populations. This study was designed to examine the effectiveness of a school-based parenting program that services Hispanic and African American populations through culturally sensitive applications. This intervention was designed to help improved participants' parenting knowledge and skills to promote school success for children in grades K-3rd. A mixed-methods design was utilized to measure the program's effectiveness; specific measures include a curriculum pretest-posttest, client satisfaction survey, and focus group. This study utilizes an Afrocentric Research Agenda that rejects hegemonic conceptualization and disseminates findings from a worldview which includes parents as decision-makers and partners in policy development for parenting service programs and curriculum development.

Social, Economic, and Political Inequality among Foreign Workers

Ada Cheung, LMSW
University of Houston

Foreign workers are defined as people who hold an H-1B visa. This H-1B visa is a non-immigrant visa category in the United States under the immigration & Nationality Act. It allows U.S. employers to seek help from skilled and talented foreigners. However, the gaps in this policy are cause for concern about inequality. Foreign workers are often exploited in social, economic, and political arenas, causing inequality. These exploitations include working in abusive environments, lower wages, the prolonged process of green card (permanent residency) application, tax deductions discrimination, and lack of political representation. This presentation will cover the historical background of the H-1B policy, discuss how H1-B implementation causes social, economic, and political inequality, and will provide tentative suggestions for promoting change.

The Impact of Cultural-Competency Training on Caseworker Perception

Shaun W. Johnson, MSW
Clark Atlanta University

The purpose of this explanatory study is to examine the impact of Cultural-Competency Training on caseworker perception of family need in the placement of African American children. Cultural-Competency Training is a teaching model designed to train child welfare workers in a culturally-based practice. Family need is defined as social supports, economics, and housing/living arrangements. This study is based upon the assumption that cultural competence among case workers plays a significant role in their placement of African American youth.

This study uses an explanatory mixed methods design to measure cultural competency training on caseworkers' child placement behaviors. The researcher uses a pre-test/post test and focus groups for data collection. The researcher assumes that Cultural-Competency training will have a positive impact on the placement of African American children. The implications for social work practice are a reframing of policy research and training guidelines for child welfare workers to work effectively with African American children.

Addressing Urban and Rural Cost-of-Living Differentials Through at Minimum-Wage Policy Initiative

Elena Delavega, MSW
University of Houston

The minimum wage has been derided both as an interference with free markets that has the potential to harm the economy, and as insufficient and falling short of a living wage. In addition, differentials in urban and rural cost of living render the minimum wage too high for certain areas, maximizing the potential for economic disruption, and too low in others, which results in even greater hardship for the families of the working poor. A random sample of Texas counties shows a significant correlation between population size and average weekly wages, which results in the current minimum wage being a much lower proportion of the average weekly wage in an urban area compared to rural areas. Moreover, cost of living varies widely between urban and rural areas as evidenced by housing costs, and this further affects the effect of wages on wellbeing. This paper proposes implementing a policy of a tiered minimum-wage structure according to population size.

Dímelo (Tell Me About it): What Influence Do Culture and Religion Have on HIV/AIDS Beliefs?
Moctezuma Garcia, MSW
City University of New York- Hunter College

The HIV/AIDS epidemic continues to grow and disproportionately affect Latinos. The following proposal explores the implication of culture and religion on beliefs related to HIV/AIDS and homosexuality in the general Latino community in New York City. The research methodology for the study is quantitative and non-experimental. The independent variables are acculturation and religion. The dependent variables are spiritual well-being, HIV/AIDS knowledge, empathy towards people with HIV/AIDS, and homophobia. A total sample of 300 adult Latino males and females will be recruited from religious and non religions settings in New York City to complete a self-administered survey. Findings from this research proposal will contribute to the social work literature, increase understanding of how social structures influence HIV risk behavior, and provide social workers with information on how to strengthen HIV interventions addressing Latino populations.

Locating evidence-based practices: A hands-on demonstration for clinicians
Eili Kaganoff, LCSW
University of Houston

In light of the recent trend of evidence-based practice and research-supported treatments in mental health, there is a need to disseminate current research outcomes and implications to mental health practitioners in the public. Treatment outcomes are available in specific books as well as on electronic databases, some of which are free to the public. Clinicians involved in the practice of psychotherapy must have the knowledge and training to navigate through such resource and identify current best practice treatments. The following presentation will provide social workers in the community with a "hands-on" demonstration on the Cochrane Library, PsycInfo, and Medline databases in order to identify evidence-based and research-based treatments in order for clinicians to be able to provide the highest quality of care and services the their clients. Additional resources (books and articles) regarding the identification of evidence-based practices will also be covered.

Labels and Diversity: What's in a Name
Panel Presentation
Darla Beaty, LCSW, Ada Cheung, LMSW, Venus Tsui, MSW, Gabriel Fosu, LMSW, Elena Delavega, MSW, Joy Malbrough, LMSW, and Josephine Tittsworth, LMSW
University of Houston

Social workers engage people from varied backgrounds: representing diversity in ethnicities, religions, sexual orientation, cultures, gender, and age, to name a few. How people of different populations are referred to in print and in person can make a difference in that person/group experiencing alienation or inclusion. This panel discussion will highlight the history of and current politically correct use of terminology to refer to aspects of a person's identity, whether it is race, gender variance, age, or cultural origins. Each panelist will discuss a particular population and the words used to identify, label, or describe members of that group. This is relevant for social workers modeling sensitive techniques for others in practice, research, and educational settings.

The relevance of the community food security movement for social work

Kara Lopez, LMSW
University of Houston

Hunger and food insecurity issues have traditionally been examined from an individual and household level perspective. A recent line of research examines food security from a broader perspective that combines social, environment, policy, and economic concerns. The concept of community food security has arisen out of the need to address broader issues of food security at the community level, and has been defined as "a situation in which all community residents obtain a safe, culturally acceptable, nutritionally adequate diet through a sustainable food system that maximizes self-reliance and social justice" (Hamm & Bellows, 2003). This presentation will offer a conceptualization of how individual, household, and community food security are inextricably tied to social justice and the environment. Community food security will be explored through a conceptual framework that integrates social work ethical concerns for social justice with ecological-systems theory. Implications for food policy, community practice, and research will be explored.

The Personal is Social: What Children Adopted by Gay Men Can Teach Us About Families and the Politics of Difference

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City University of New York- Hunter College

Families headed by openly gay and lesbian parents are increasing in the U.S. Gay men and lesbians choosing to adopt children are part of an ongoing evolution and expansion of family forms. Research on gay and lesbian families has focused on determining if children raised by non-heterosexual parents are different from those raised by heterosexual parents. Consequently, little is known about the unique strengths, needs and subjective experiences of these children. Through analysis of in-depth interviews conducted with young adults adopted by gay male parents, this study describes the experiences of these children. The focus is participants' experiences during pre-adolescence and adolescence. Using Queer Theory as a framework, this study aims to depict the influences of heteronormativity on the daily lives of youth raised by homosexual parents. The findings of this study have potential implications for social work practice with gay and lesbian families and theories of adolescent development.

A Need for Change: Policy and Services for Male Victims of Domestic Violence

Venus Tsui, MSW
University of Houston

Attacks on men have long viewed as a lesser concern in society. Although the Violence Against Women Act (VAWA) of 2000 and 2005 do not deny services or assistance to male victims of domestic violence, government and state-level discrimination, and bias against men prevail across the country. Despite the pressing needs of male victims, very few services are being provided to them. In this presentation, the gaps in current policy and services for male victims of domestic violence will be explored. Bias and discrimination against male victims as well as the consequences of domestic violence on men and everyone in the family will also be examined. Finally, an advocacy piece for change in policy and services to address the unique needs of abused men and implication for education and further research will be highlighted.

The Impact of School Characteristics on
Passing and Failing Status of Public Elementary and Secondary Schools

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University of Denver

Social policies for children and youth have experienced frequent philosophical shifts and taken considerably different directions in the past century (Jenson & Fraser, 2006). Many social policies have been created in reaction to certain events or situations. A reactive approach to policy-making has led to inconsistent and fragmented policies and programs that often fall short of addressing the complex individual and social problems that confront many children, youth, and families (Jenson & Fraser, 2006). In 2002, President George W. Bush signed into law the *No Child Left Behind Act* (NLCB). This landmark legislation serves as a powerful example of a reactive approach to policy development and has altered significantly the role of the federal government in public education.

The NCLB requires that all federally funded schools develop standards of performance to improve student achievement and to evaluate these standards to ensure student success (US Department of Education, 2003). NCLB also stipulates that schools that fail to demonstrate Adequate Yearly Progress (AYP) towards full proficiency will face strict corrective action, including reorganization, financial penalties, and school closure (Smith, 2005). Proponents of this legislation provide three underlying purposes of these reforms: 1) to increase educational attainment and economic output in a globalized economy; 2) to decrease inequities in educational opportunities; and 3) to create impartial assessment mechanisms (Hursh, 2005). Further, proponents assert that due to the end of industrialization and the rise of globalization students of color and/or who live in poverty must succeed educationally so that individual and national prosperity continues to thrive (Hursh, 2005).

A Public Health Approach to Policy-Making

Recent developments in our understanding of the onset and persistence of child and adolescent problems demand new ways of thinking about policies and programs for children and youth (Jenson & Fraser, 2006). Based on a risk and resilience framework and ecological systems theory, a public health approach to policy-making requires consideration of the pattern of risk and protection across multiple dimensions in a child's life, including individual, family, peer, school, and community level factors. As risk accumulates across these dimensions, normal development is disrupted and the onset of problem behaviors, such as delinquency, drug use, and school failure, becomes more likely (Jenson & Fraser, 2006). For example, risk factors associated with school failure include special education status, behavioral problems, and reading deficits at the individual level; family conflict and poor attachment at the family level; antisocial behavior and attitudes at the peer level; and poverty at the community level. School level factors capture the largest number of factors related to school failure, including large school size, limited resources, high staff turnover, inconsistent classroom management, higher percentages of poor and minority students, higher student-teacher ratios, insufficient curricular and course relevance, inconsistent adult leadership, and high truancy and dropout rates (Frey & Walker, 2006). Social policies are more likely to be effective when they address the numerous influences that contribute to the onset and persistence of child and adolescent problem behaviors (Jenson & Fraser, 2006).

Criticisms of NCLB

   Many investigators argue that the NCLB has failed to improve educational opportunities for minority and economically-disadvantaged populations (Altshuler & Schmautz, 2006; Escamilla, Chavez, & Vigil, 2005; Gerstl-Pepin, 2006; Hursh, 2005; Lipman, 2003; Smith, 2005). For example, several authors have suggested that NCLB has contributed to adverse conditions in public schools and has exacerbated many of the school level risk factors, such as limited resources, high staff turnover, higher student-teacher ratios, insufficient curricular and course relevance, inconsistent adult leadership, and higher truancy and dropout rates (Hursh, 2005; Smith, 2005). Although such criticisms of NCLB are readily available, many of these critiques are based only on reviews of literature (Altshuler & Schmautz, 2006; Hursh, 2005; Smith, 2005) or utilize qualitative methods to understand the context of the lived experiences of poor and minority students (Gerstl-Pepin, 2006; Lipman, 2003). Thus, few studies have used quantitative methods to unpack the effects of school level risk factors, such as minority enrollment, socioeconomic status, truancy and dropout rates, on AYP determinations; and none have explored the influence of these factors at the school level. One recent article that did empirically examine the impact of NCLB on bilingual education was conducted by Escamilla and colleagues (2005). In this study the authors triangulated student achievement data and qualitative interview data from teachers and administrators about their perceptions of Spanish-speaking students. Results revealed that the perceptions of teachers and administrators largely supported the notion that Spanish-speaking students were a primary reason for schools failing to meet AYP despite student achievement data suggesting that these students were some of the highest performers on the standardized tests.

   To further understand the impact of NCLB on schools, the current study explores factors associated with failure to meet AYP. Particular emphasis is placed on minority and poverty composition of schools in an attempt to understand the impact of NCLB and accountability-based testing on schools with higher rates of minority and low income students.

Method

Sample

    In 2004, 1,667 public schools in Colorado served 766,657 students in elementary and secondary school settings (Colorado Department of Education, 2005). The general student population was 63.5% White and 26.2% Hispanic, with 10.3% representing other minority groups. Approximately 32% of the student population participated in the free and reduced lunch program in 2004. AYP results from the 2004 -2005 academic year were obtained for 1,514 schools. For this analysis, 853 elementary schools and 661 secondary schools were used to examine the impact of certain school level risk factors on AYP status. At the secondary school level, 261 (39.5%) of schools failed to meet AYP. At the elementary school level, 115 (13.5%) failed to meet AYP. Table 1 details the mean percentages of minority enrollment, free and reduced lunch participation (used as a proxy of socioeconomic status), truancy and dropout rates by secondary and elementary schools.

Table 1

Descriptive Statistics for Secondary and Elementary Schools

	Secondary Schools			Elementary Schools		
	N	M	SD	N	M	SD
% of Minority Students	585	32.99	24.85	839	39.32	28.22
% of Free & Reduced Lunch	584	35.95	22.77	839	43.06	27.61
Truancy Rate	565	1.41	2.30	839	0.94	1.23
*Dropout Rate	374	5.11	9.75			

*Dropout rates not available for elementary schools.

Measures

The Colorado Department of Education (CDE) generates yearly reports that summarize AYP determinations and demographic characteristics by district and individual schools. Aggregate data from the 2004 -2005 academic year were used to explore the relationship among school level risk factors and AYP determinations.

Data Analysis

Independent samples t-tests were conducted to assess statistically significant group differences between passing and failing schools across the four independent variables. Logistic regression models were fitted to explore if certain school characteristics increase the likelihood of failing to meet AYP. Logistic regression applies a maximum likelihood estimation after transforming the categorical dependent variable into logits (the natural logs of the probability of the dependent occurring or not) (Garson, 2008; Hosmer, & Lemeshow, 1989).

Results

T-tests results indicate significant group differences between passing and failing schools across minority composition and free and reduced lunch participation. Equal variances cannot be assumed for minority and free and reduced lunch participation at the secondary level and for free and reduced lunch participation at the elementary level. At the secondary school level, the mean level of minority enrollment at failing schools was significantly higher than that of passing schools, $t(414.9) = 14.4$, $p < .001$. Additionally, failing schools had a significantly higher percentage of students participating in the free and reduced lunch program than passing schools, $t(473.8) = 7.5$, $p < .001$. Similarly, at the elementary school level, failing schools had significantly more minority students than passing schools, $t(851) = 16.0$, $p < .001$; and significantly more students participating in free and reduced lunch, $t(168.1) = 14.5$, $p < .001$. Meaned group percentages across elementary and secondary schools and standard deviations are presented in Table 2 for minority enrollment and Table 3 for free and reduced lunch participation.

Table 2

Descriptive Statistics for Minority Enrollment

	Secondary Schools			Elementary Schools		
	N	M	SD	N	M	SD
Pass	331	21.40	16.84	738	34.01	24.52
Fail	254	48.11	25.51	115	73.57	25.77

Table 3
Descriptive Statistics for Free & Reduced Lunch Participation

	Secondary Schools			Elementary Schools		
	N	*M*	*SD*	*N*	*M*	*SD*
Pass	331	29.87	19.50	738	38.70	25.91
Fail	254	43.90	24.28	114	70.97	21.49

Results of logistic regression models (Table 4) indicate that certain characteristics of schools in Colorado are associated with failing to meet AYP. In secondary schools, for each percentage increase in minority enrollment, the odds of failing to meet AYP increases by 7.4%. Furthermore, as the percentage of truancy rates increases by one, the odds of failing to meet AYP increases by 24.7%. Free and reduced lunch participation and dropout rates are not associated with increased odds of failing to meet AYP. In elementary schools, for each percentage increase in minority enrollment, the odds of failing to meet AYP increases by 5.2%. Again, free and reduced participation is not associated with failing to meet AYP.

Table 4
Relationships Among School Level Risk Factors and AYP Determinations

	Secondary Schools				Elementary Schools			
	Est	SE	df	Odds Ratio	Est	SE	df	Odds Ratio
CONSTANT	-1.89***	.27	1	.151	-4.77***	.35	1	.008
Minority	.07***	.01	1	1.074	.05***	.01	1	1.052
Free/Reduced Lunch	-.02	.01	1	.983	.01	.01	1	1.004
Truancy Rate	.22*	.09	1	1.247	-.05	.09	1	.956
Dropout Rate	-.02	.01	1	.982				

***$p<.001$; *$p<.05$

Minority composition and free and reduced lunch participation are moderately correlated at the secondary and elementary levels ($r = .773$; $r = .821$ respectively) revealing a slight problem with multicollinearity. Multicollinearity can inflate the standard error and affect the reliability of the logistic regression coefficients. While the effects of multicollinearity in this sample appear to be minimal as the correlations do not exceed .90 (Tabachnik & Fidell, 2007), these predictors included in the same model may affect the reliability of the coefficients. This phenomenon may account for the lack of association between free and reduced lunch participation and AYP determinations.

Discussion

The current study explored the relationship among school level risk factors (i.e., minority composition and free and reduced lunch participation) for failure to meet AYP in an attempt to better understand the impact of NCLB. Findings show significant group differences between passing and failing schools across minority enrollment and free and reduced lunch participation at the elementary and secondary school levels. Schools failing to meet AYP have significantly higher percentages of minority students and students participating in free and reduced lunch programs. Results also reveal that as minority enrollment increases the likelihood of failing to meet AYP also increases. Although significant group differences were found between passing and failing schools, results indicate that the percentage of students receiving free or reduced lunches did not increase the odds of failing to meet AYP. Contrary to other evidence that

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accountability based testing mechanisms unfairly penalize poor and low income students (Gerstl-Pepin, 2006; Prince et al., 2006), these findings suggest that schools in Colorado with higher rates of participation in free and reduced lunch programs do not appear to be at greater odds of failing to meet AYP.

Based on these results, it appears that schools with higher minority enrollment fail to meet AYP at greater rates than schools with lower minority enrollment. This suggests that NCLB, with its focus on accountability and standards-based testing, has not reduced educational disparities for minority students in Colorado. As most African American and Hispanic students attend schools that are largely minority in enrollment (Schiller, 2004), the results of this study create cause for concern about the success of NCLB, in its current form, in addressing educational disparities.

Implications for Oppressed Populations

Educational attainment is one of the most important factors in combating poverty and other social issues that currently face the social welfare system (Schiller, 2004). Participation in the workforce, type of job or occupation, the frequency and duration of employment, and wages are all influenced by the amount and quality of education (Schiller, 2004). However, because of the variation in access to and quality of educational opportunities, certain groups of students are not given the opportunity to gain the "cultural capital" necessary to become effective participants in today's globalized and technology-driven economy (Lipman, 2003, p. 342). The disparities in education and subsequent inequalities in workforce participation may be perpetuated, instead of alleviated, by NCLB because of its focus on a single accountability mechanism. As purported by Byrne (1987) and Gil (1992), only significant modifications to the education system, that account for the historic discriminatory policies and practices as well as the underlying influence of poverty, will change the outlook for poor and minority populations. Additionally, educational policy must address the numerous influences that contribute to the onset and persistence of child and adolescent problem behaviors in order to be effective (Jenson & Fraser, 2006).

Implications for Social Work Practice

Given our ethical obligation to social justice, our understanding of complex systems, and our ability to organize diverse groups, social workers are poised to be the perfect vehicle to affect and encourage changes to the existing NCLB policy. Social workers must understand the implications for clinical and community practice. Clinical practitioners working with school-aged children of color need to examine the effects of accountability-based testing on diverse client populations at an individual level. From a community practice perspective, social workers must engage in a public dialogue with committed educators, students, families, and communities about what is in the best interest of our children and the future of this country and give voice to these perspectives within the current political power structures.

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Older Women with Psychoactive Medication Abuse
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The older population of the United States has dramatically increased over the past few decades; currently, approximately 13% of the nation's population is categorized as *older adults* (persons over 65 years old). Moreover, it is expected that both absolute number and percentage of older people in the population will continue to increase. The number of persons over age 65 is projected to reach more than 70 million by the year 2030 and to constitute approximately 21% of the U.S. population (American Society on Aging, n.d.).

As people age, they suffer from multiple chronic diseases that require long-term medical treatment and use of multiple medications (Linjakumpu et al., 2002). Older adults are the largest consumers of prescription (Barnea & Teichman, 1994; Francis, Barnett, & Denham, 2005; National Institute on Drug Abuse, 2005; Oslin, 2004) and over-the-counter (OTC) medications (Lumpkin, Lowrey, Strutton, & Kouzi, 1991; Memmott, 2003). In particular, older women are the main recipients of prescription (Kaufman, Kelly, Rosenberg, Anderson, & Mitchell, 2002; Simoni-Wastila, Ritter, & Strickler, 2004; Szwabo, 1993) and OTC medications (Kaufman et al.; Thomas, Straus, & Bloom, 2002), many of which adversely interact with alcohol (Blow, 2000; Blow & Barry, 2002). It has been estimated that 11% of older women (who outnumber older men 21.6 million to 15.7 million; Administration on Aging, 2008) have misused psychoactive medications at last once (National Center on Addiction and Substance Abuse, 1998).

The misuse of alcohol and medications is detrimental to women as they age due to specific sensitivity to alcohol and medications (Blow & Barry, 2002). For instance, consumption of benzodiazepines with alcohol is more likely than consumption of benzodiazepines alone to lead to impaired judgment, respiratory failure, falls, and accidents (Center for Substance Abuse Treatment, 1998).

Several studies (e.g., Blow, 2000; Simoni-Wastila et al., 2004; Simoni-Wastila & Yang, 2006) have identified that older women, compared to older men, are prescribed and take more psychoactive medications (e.g., benzodiazepines, nonbenzodiazepine sedative-hypnotics, antidepressants, and narcotics) for depression, anxiety, or sleep problems and are more likely to be long-term users of the medications. Continuous use of psychoactive medication as a coping mechanism is more likely to result in abuse or dependency in this population (Simoni-Wastila & Yang). For example, depression in older adults often results from losses related to aging. Loss, grief, or depression can trigger substance abuse by the elderly (Benshoff, Harrawood, & Koch, 2003; Widlitz & Marin, 2002), even for those who have no history of substance problems (Benshoff et al.).

Many psychoactive medications (e.g., benzodiazepines and opioid analgesics) have the potential for addiction (Simoni-Wastila & Yang, 2006) and these medications tend to be more misused or abused than other medications. Older adults take approximately 3 times more psychoactive medications than younger people (Sheahan et al., 1995). A significant number of women who abuse these medications also abuse alcohol (Simoni-Wastila & Yang). However, few studies have examined the epidemiology of abuse of psychoactive medications, alone or with alcohol (Blow & Barry, 2002; Simoni-Wastila & Yang). This article reviews consequences of psychoactive medication abuse, risk factors associated with psychoactive medication use and abuse among older women, and prevention approaches to ameliorate psychoactive medication abuse among older women.

Female gender appears to be a significant risk factor for abuse of psychoactive medications by the elderly population (Carlson, 1994; Finlayson, 1995; Simoni-Wastila et al., 2004; Szwabo, 1993). In particular, older women are prescribed and take more psychoactive medications and are more likely to be long-term users of these medications (Blow, 2001). Compared with older men, older women are more likely to live longer and alone; it has been estimated that almost half (48%) of older women age 75 years or older live alone (Administration on Aging, 2008).

Older women are likely to experience mental health problems as result of psychological, social, and financial problems (Szwabo, 1993). In this population, use of psychoactive medications is more likely to be associated with health disparity and associated psychosocial effects: recent divorce and widowhood, lower education and income level, depression and anxiety disorders, and poorer health status (Simoni-Wastila & Yang, 2006). In particular, due to the death of a spouse, older women may develop depression and social isolation that are associated with increased use of psychoactive medications or alcohol (Eliason, 2001).

Unfortunately, psychoactive medications such as anxiolytics and sedative/hypnotics are the significant cause of hospitalization due to adverse drug interactions; benzodiazepines most often lead to adverse consequences (U.S. General Accounting Office, 1995). Benzodiazepines are often prescribed to older adults for conditions such as insomnia, anxiety, and chronic pain (Shibusawa, 2006). Older women are more likely than men to consume psychoactive medications for the above stated reasons, and medication abuse and dependence are more

prevalent among older women than among older men (Adams, Garry, Rhyne, Hunt, & Goodwin, 1990).

Older women are more vulnerable to the cognitive impairment and residual sedation effects, motor vehicle accidents, and risk of frequent falls associated with most abusable prescription drugs, including benzodiazepines (Ensrud et al., 2002; Sheahan et al., 1995). Ensrud et al. found that community-dwelling older women who were currently taking psychoactive medications (e.g., benzodiazepines, antidepressants, anticonvulsants) had an increased risk of falls. This increased risk of falls was more prevalent in older women with a history of taking benzodiazepines or anticonvulsants. Older women with psychoactive medication abuse are more likely to suffer from multiple problems (e.g., alcohol problems, depression, anxiety, comorbid chronic physical conditions, chronic pain, and isolation) (Blow, 2000; Shibusawa, 2006).

Despite the rapidly expanding number of older women, little research on psychoactive medication abuse in this population has been conducted (Simoni-Wastila & Yang, 2006). More empirical studies should be conducted on psychoactive medication abuse and its adverse effects on older women, interactions of medications and alcohol, comorbid physical chronic illness, depression and anxiety as potential risk factors, and issues of relationships with family and social support among older women (Blow, 2000). In particular, an aging- and gender-sensitive screening tool should be designed for further assessment (Blow, 2000; Shibusawa).

Systematic prevention methods and treatments are necessary to identify potential psychoactive medications abuse in older women. Screening can be performed as a component of a regular check-up of physical and mental health (Blow & Barry, 2002). An emphasis on effective interventions/treatment by various health care professionals, including physicians, nurses, and social workers, working in interdisciplinary treatment teams, can improve training and service delivery options for older women who are at risk for psychoactive medication abuse (Blow, 2000). In particular, physicians and pharmacists can examine physical and mental conditions (e.g., insomnia, depression, or anxiety) associated with psychoactive medication use and select alternative medication(s) without potential addiction, along with psychosocial interventions. Older women with psychoactive medication abuse have more than medical needs; they also present psychosocial issues that can be addressed effectively by social workers and/or psychologists.

Implications for Social Work Practice and Research

Older women who are at risk of abusing opioid medications should be viewed by social workers as a vulnerable population. Social workers in the community, hospitals, or nursing homes often have the first to opportunity to detect that an older adult is at risk of medication abuse (Barnea & Teichman, 1994). However, social workers may fail to recognize psychoactive medication abuse in older women, possibly due to lack of awareness of medication misuse as a potentially important problem for older adults, failure to obtain accurate drug histories, reluctance to ask uncomfortable questions, and lack of initiation of action regarding medication abuse (Ondus, Hujer, Mann, & Mion, 1999). In addition, social workers have conducted very few empirically validated studies to guide their assessment and treatment of older adults who have been abusing psychoactive medications. Social workers are capable of providing a sound assessment, given proper and extensive training about psychoactive medications.

The lack of recognition by clinical social workers and family members (as well as older women's denial) of psychoactive medication abuse often prevents older women from receiving appropriate treatment. Therefore, with an increased number of older women at risk for

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psychoactive medication abuse, it is important for social workers to identify symptoms and signs of the medication abuse and to provide age-appropriate treatment through effective referrals to health care professionals. Treatment could include teaching older women to recognize risks and develop coping skills to overcome life stressors and emotional distress (e.g., a spouse's death and depression or loneliness associated with the loss). Raffoul (1986) identified five specific areas in which social workers can contribute to ameliorating medication misuse among older people: (a) identification of older people who are at risk; (b) assessment of the problem; (c) education of clients and family/significant others about use, misuse, and abuse of medications; (d) education of other professionals by communicating with them about clients' medication-taking behavior; and (e) evaluation of intervention outcomes.

Evidence-based treatment, such as cognitive-behavioral treatment (CBT), has been shown to reduce medication abuse in older adults (Schieffer et al., 2005). Older adults may benefit from CBT to cope with symptoms associated with depression, anxiety, or chronic pain (Shibusawa, 2006). In particular, CBT could identify thoughts and feelings as well as environmental factors that would aid older adults in understanding their life stressors, isolation, and depression. Individual therapy and group work may be effective in helping older adults to share their emotions with group members and reduce their dependence on psychoactive medications as a coping mechanism.

Social workers can enhance the effectiveness of their services to these clients by infusing clinical experience with knowledge derived from valuable research regarding psychoactive medication abuse in order to respond appropriately to older adults who have been abusing psychoactive medications. With the rapidly growing older population and changing health care systems, social workers are encouraged to focus on optimal approaches to assessment, diagnosis, treatment, and organizations of care that can meet the challenges of safeguarding the health of older adults who are at risk of abusing psychoactive medications, particularly older women. Psychoactive medication abuse in older women often results from life stressors; social workers may help these women to cope more effectively with life stressors. Generally, social workers are encouraged to be aware of possible behavioral problems related to substance abuse in the geriatric population so they can address issues of prevention of substance abuse.

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Application of Conflict Theory to Welfare Policy

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Conflict theory represents a useful perspective in the conceptualization of welfare policy. Frances Fox Piven and Richard A. Cloward (1971) theorized that government distributes financial assistance (e.g., welfare) in response to conflict (e.g., rioting by the poor masses). Thus, welfare is a mechanism of control used in an effort to squelch rebellious poor people's movements. The goal of this paper is to analyze the validity of Piven and Cloward's thesis through a review of empirical literature that supports and challenges this thesis. Conflict theory will be utilized in a discussion of how it may inform further research in the field of welfare policy.

Conflict Theory: Concepts, Principles, & Assumptions

Conflict theory seeks to explain the emergence of conflict, its varying forms, and its consequences (Allan, 2007; Strandbakken, 1996). The theory envisions power as the central feature of society presupposing that a conflict of interest arises between individuals and social groups. Lewis Coser, Ralf Dahrendorf, and Randall Collins are particularly useful when conceptualizing conflict theory.

Lewis Coser contended that the need for conflict is instinctually embedded in the human psyche and is a functional aspect of humans' daily lives (Allan, 2007; Coser, 1956). The inequitable distribution of scare resources (e.g., wealth, power, and prestige) may represent the catalyst for conflict (Allan, 2007; Bartos & Wehr, 2002). Building on Coser's belief that conflict is instinctual, Ralf Dahrendorf contended that conflict is ever-present in all interactions and is the foundation for all social change (Allan, 2007; Schellenberg, 1982). Contrary to Karl Marx, Dahrendorf believed that class extends beyond economic resources to authority and power in general. Power is a key component regarding the definition of societal roles, norms, and values (Allan, 2007). Those with power hold the ability to define these societal roles, norms, and values. Thus, these tenets may be expressed through welfare policy aimed at controlling certain societal subgroups. Dahrendorf contended that structure-changing social movements are often gradual and not necessarily grounded in class relations (Schellenberg, 1982; Strandbakken, 1996).

Randall Collins echoed Coser in his assumption that conflict is the result of the inequitable distribution of scarce resources, including economic, power, and status or cultural resources (Allan, 2007; Collins, 1993). These potential conflicts are actualized with heightened emotional, moral, and symbolic mobilization resulting in group solidarity. Conflict breeds subsequent conflict and countermobilization. The threat of countermobilization lends to heightened group solidarity and strengthened feelings of group membership.

Utility of Conflict Theory as Applied to Welfare Policy

Frances Fox Piven and Richard A. Cloward (1971) provided a historical context for the welfare boom of the 1960s. They contended that increased urbanization of poor African Americans to the North coupled with lack of employment opportunities led to relative deprivation and urban riots. In an effort to extinguish rioting and appease the unemployed, political leaders chose to widen social assistance eligibility requirements. The belief is that increased conflict (i.e., rioting of the poor) leads to increased government interventions intended

to decrease the level of conflict. In times of low conflict, social assistance levels decrease to expand the low-wage labor supply. To test the utility of Piven and Cloward's thesis, it is beneficial to examine the welfare rolls in concert with historical context to determine whether welfare rolls increased in response to heightened conflict.

Supports

Literature that supports Piven and Cloward's thesis would find that welfare rolls increase as a result of increased conflict. Subsequently, conflict would decrease due to heightened welfare enrollment. The research of Betz (1974), Isaac and Kelly (1981), and Schram and Turbett (1983) supported this theory's utility, while the research of Hicks and Swank (1983) showed mixed support for this theory's utility.

Betz (1974) studied the 43 largest cities in the United States to determine whether or not riots and government response (i.e., welfare) were correlated. Betz (1974) examined the percentage change of welfare expenditures for 23 major riot cities versus 20 minor or non-riot cities during the period of 1960 to 1969. He found that, on average, government expenditures increased by 6.2 percent in major riot cities and increased by 3.3 percent in minor or non-riot cities during this time period. Among the 16 cities that experienced riots in 1967, welfare expenditures increased at a rate of 57 percent from 1967 to 1968; whereas, welfare expenditures decreased by .3 percent for the control group during this same period. This evidence lends credence to Piven and Cloward's thesis.

Isaac and Kelly (1981) predicted that racial conflict severity would have a greater impact on welfare case rolls than conflict frequency. Further, they hypothesized that the federal government would respond at a greater rate than state or local governments. The researchers concluded that racially-focused rioting heavily influenced the expansion of welfare expenditures in the short-term, which supports Piven and Cloward's thesis. Additionally, riot frequency was found to have a greater impact on welfare case rolls than riot severity.

Schram and Turbett (1983) contended that civil conflict results in increased welfare assistance, which results in high implementation rates by high-conflict state governments. They found that conflict severity was a greater predictor of welfare growth than conflict frequency. Their research found that states, rather than cities, had the capacity to liberalize Aid to Families with Dependent Children (AFDC) requirements resulting in welfare as a method of social control.

Hicks and Swank (1983) hypothesized that urban riots were resolved by Community Action Agency activities that increased awareness of AFDC benefits and subsequent AFDC enrollment. The researchers found mixed support for Piven and Cloward's thesis holding that need, apart from conflict, generates caseload growth. Further, Piven and Cloward's thesis that welfare assistance and social conflict are related was strongly supported by Hicks and Swank (1983).

Challenges

Literature that challenges Piven and Cloward's thesis would find evidence contrary to the belief that welfare rolls are increased to decrease conflict. The research of Albritton (1979), Jennings (1983), as well as Chamlin, Burek, and Cochran (2007) do just that.

Albritton (1979) examined Piven and Cloward's thesis and the plausibility for alternative explanations for the association of conflict and caseload. The researcher examined possible relationships between "social disorders" (e.g., riots and crime) and welfare caseloads as well as

"social disorders" and increases in populations consisting of people of color. The researcher found no significant relationships between the aforementioned variables. Thus, Albritton (1979) contended that extraneous variables or chance alone may explain the association.

Jennings (1983) challenged Isaac and Kelly's (1981) two hypotheses, which are stated above. The researcher found that the Isaac and Kelly (1981) study measures lacked reliability, and that the study contained inconsistent variables. Jennings (1983) found that conflict (i.e., riots) *did* result in higher benefit levels; however, the level of need was found to be heavily associated with public assistance. Additionally, the researcher demonstrated that welfare gains did not diminish as conflict decreased.

Chamlin, Burek, and Cochran (2007) hypothesized that the transition from AFDC to Temporary Assistance for Needy Families (TANF) should result in two outcomes: (1) Increased labor supply above ongoing social processes and (2) Decreased welfare population size. The researchers found that the switch from AFDC to TANF had no effect on Wisconsin's labor supply, but that it briefly resulted in decreased welfare caseload. Moreover, the welfare caseload actually increased to pre-intervention levels six months after the introduction of TANF. Thus, these findings stand counter to Piven and Cloward's contention that government officials manipulate welfare policy to control the labor supply.

Informing Research in Welfare Policy

Conflict theory is useful in informing welfare policy research. As described above, conflict theory informed Piven and Cloward's (1971) thesis that government programs (i.e., welfare) are implemented to squelch conflict of the lower-classes. Only one article was found that explores this theory post-TANF. Research is needed that explores a correlation between level of conflict and TANF caseload. If Piven and Cloward are correct, then the decrease in welfare caseload combined with low-paying employment for welfare leavers would result in heightened conflict. Additionally, government officials would expand the welfare rolls to extinguish this heightened conflict.

Research is needed that examines the degree to which these government programs actually exacerbate social conflict. Therefore, research is needed that explores the degree to which conflict resonates around entitlement versus means-tested social programs. Research may explore the degree to which social welfare programs actually separate the lower and working classes. Conflict may arise between those that are poor and qualify for social welfare and those that are poor and do not qualify. Research could explore this divisiveness between subgroups and how this divisiveness impacts group solidarity and mass mobilization.

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Factors Influencing the Relationships between Grandparents and Grandchildren: A Literature Review

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The number of non-custodial grandparents as childcare providers has decreased over the past three decades while the number of custodial grandparents has increased dramatically (Fuller-Thomson & Minkler, 2001). However, grandparents are still considered a resource in the family because they provide alternative resources and role models for grandchildren (Bengtson, Burton, & Rosenthal, 1993). Social workers increasingly have examined the needs of custodial grandparents who face many stressors, but the profession lacks current knowledge about functions of non-custodial grandparents who are important supports for families, which is especially crucial as the number of multigenerational households grow. As maternal employment rates rise, mothers increasingly seek alternative caregivers for their children. In 2005, the U.S. Census Bureau reported that after fathers (24.7%), grandparents were most often alternative caregivers (28.3 %), followed by multiple arrangements (22.4%), and daycare centers (20.6%). Especially when children are young, mothers tend to choose grandparents as childcare providers.

While non-custodial grandparents may also struggle with the childcare burden as do custodial grandparents, the relationships among the former with the grandchild usually vary depending upon culture and family characteristics. This paper identifies factors that strengthen grandparent-grandchild relationships and attempts to understand those influences that weaken these relationships. This information will help social workers more successfully intervene with these families and promote healthy interactions among family members, specifically between grandparents and grandchildren.

Factors Affecting the Grandparent-Grandchild Relationship

Demographic changes

The decrease in the total fertility rate, the growth of the senior population, and the increase in the number of working women in the society may lead to more grandparents caring for children (Minuchin, Lee, & Simon, 2006). Vandell, McCartney, Owen, Booth, and Clarke-Stewart (2003) found from their three-year study that full-time mothers were more likely to use extended full-time grandparent care (more than thirty hours per week) than part-time grandparent care. Grandparents are perceived as the "national guard" of the family because they are always ready to step in if necessary (Silverstein & Ruiz, 2006). Thus, Silverstein and Ruiz described

grandparents as serving as "functional substitutes for parents who are no longer able or willing to fulfill their parental duties" (p. 602).

Gender

Gender influences the relationship between grandparents and grandchildren. Women are often perceived as kin-keepers who maintain relationships within the family (Lemme, 2002). Hence, grandmothers tend to feel more positive about their grandparenting role than grandfathers (Reitzes & Mutran, 2004). Maccoby (2003) indicated that parents tend to spend more time with children of the same sex, and establish a more intimate relationship with the same-sex children than they do with children of the opposite sex. In the study of Crouter, McHale, and Bartko (1993), mothers were equally involved with daughters and sons while fathers were more involved with their sons. Although it is not clear if the differences in involvement with daughters and sons can be applied to the grandparent-grandchild interaction, the power structure within the family may support Maccoby's findings.

While grandmothers tend to have more emotional interactions with their grandchildren, grandfathers tend to rely more on formal support systems (Hayslip Jr., Henderson, & Shore, 2003). According to Kolomer and McCallion (2005), custodial grandfathers have less depression symptoms than grandmothers because grandfathers have more support systems, such as a spouse, owning a home, and working outside of the home. In addition, grandfathers are typically better connected to formal social support systems than grandmothers.

Age

Younger grandparents who are usually healthier and have younger grandchildren who need more supervision tend to be more involved in their relationships with grandchildren than their older counterparts (Lemme, 2002). As grandchildren grow older and require less supervision, grandparents usually need to spend less time with them.

Grandparent-parent relationship

Relationships between grandparents and parents of the child are another factor that influences the grandparent-grandchild relationship. Welsh and Stewart (1995) mentioned that positive relationships of adult parents with their parents positively influenced children's well-being. However, if grandparents and parents experience emotional distance, the grandparent-grandchild interaction may also be limited. The experience of being a grandparent is related to the experience of being a parent (Reitzes & Mutran, 2004). In general, older parents tend to have less ambivalence toward children who are successful than younger parents, although older parents might feel more ambivalence toward unmarried adult children, those who have less education, and those for whom they provide financial support (Peters, Hooker, & Zvonkovic, 2006). In this regard, grandparents feel more stress in the relationship with adult children and their spouses who gave custody to the grandparents (Musil & Standing, 2005). Custodial grandparents often become stressed because adult children who forego their childcare responsibilities oblige grandparents to raise the children regardless of whether or not these older persons have agreed to take on this caretaking role. Compared to custodial grandparents, non-caregivers are more likely to express concerns related to their husbands than to their adult children, even though the percentage of grandparents being married is the same.

Parent-child relationship

The parent-child interaction also may be a factor that affects the grandparent-grandchild relationship. However, there has not been much research on how the parent-child interaction influences the relationship between the grandparent and the grandchild. Goodman (2007) found that the grandparent-grandchild relationship may be positive if the parent and the child are linked together. Goodman referred to this pattern as the child-linked family. In this family type, the grandmother had relatively low depression and high life satisfaction; the grandchild also had a low level of behavior problems even though the grandmother-parent relationship was not linked. On the other hand, in the isolated-child family where the grandmother was linked to both the grandchild and the parent of the child, and there was no linkage between the parent and the child, the child had the second highest level of behavior problems after those in the not bonded family. In a less cohesive family, the grandchild may suffer from poor relationships with his or her parents even if the grandmother tries to compensate for the adult parent's role. Grandmothers in these families often have higher levels of depression and lower life satisfaction than those in more child-linked families.

Culture

The grandparent-grandchild interaction is immensely dependent upon the culture and its view of grandparents. Therefore, differences exist among Caucasian, African American, Hispanic, and Asian American grandparents (Julian, McKenry, & McKelvey, 1994). Julian, McKenry and McKelvey (1994) indicated that Caucasian families more often emphasize individual differences and emotionally detached relationships than non-Caucasian families. In the Caucasian culture, people are basically equal regardless of age. Thus, Caucasian people seek to be independent from others, and this tendency continues during the senescence period (Lemme, 2002). Hence, Caucasian older adults tend to become more depressed when they become providers of childcare than non-Caucasian grandparents (Taylor, Washington, Artinian, & Lichtenberg, 2007).

In contrast to Caucasian families that emphasize individual relations with others, Asian, African, and Hispanic people tend to pursue collateral relations with people (Gladding, 2002). Minuchin, Lee, and Simon (2006) also state that extended family networks are important for African-Americans. The extensive kin network of African-American families provides both economic and emotional support to their members. Hence, African-American older adults are more likely than Caucasian families to take grandchildren, nieces, or nephews into their homes (Mitchell & Register, 1984). According to Gladding, African-American families are open in family roles and are thus less likely to stereotype roles based on age or gender. Hence, compared to Caucasian families African-Americans tend to be less reluctant to become primary caregivers for grandchildren when they are needed. Similar to African American culture, Hispanic culture and Asian culture emphasize extended family functions and respect toward elders even though variations exist within these ethnic groups.

Conclusion

Non custodial grandparents may consider providing child care for their grandchild as a joy and/or burden depending upon their culture and family characteristics. Wheelock and Jones (2002) stated that grandparenting affects the well-being of grandparents because the grandparenting experience leads to a feeling of being loved. Many grandparents enjoy the rewards that come from closely interacting with their grandchildren. These grandparents feel

emotionally satisfied when they take on a caregiving role. On the other hand, childcare is sometimes just as stressful for non-custodial grandparents as it is for custodial grandparents. It is important that social workers understand the different needs of custodial versus non-custodial grandparents. This understanding may improve social work practice that meets the needs of these different families. Goodfellow and Laverty (2003) found that caring for grandchildren is a physically and emotionally exhausting job for grandparents. Grandparents sometimes complain about the physical challenges involved with caring for grandchildren versus just being with them all the time. In addition to the physical difficulties, these grandparents voiced some emotional challenges such as disempowerment and family obligations that sometimes troubled them. McGowen, Ladd, and Strom (2006) stated that co-resident grandparents had a lower level of life satisfaction than non-resident grandparents even though the co-resident grandparents had higher satisfaction scores than custodial grandparents. Lack of free time is another factor that can create stress for non-custodial and custodial grandparents. We need more research about non-custodial grandparents who, until recently, have been neglected by social work researchers.

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Predictive Factors of Secondary Traumatic Stress for Social Workers

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Since the 1980s, when trauma researchers studied victims of disaster, Secondary Traumatic Stress (STS) has emerged as a growing issue in social work practice settings (Figley, 1983). Figley (1999) defines STS as "the natural consequent behaviors and emotions resulting from knowing about a traumatizing event experienced by a significant other and resulting from helping or wanting to help a traumatized or suffering person" (p.10). Social workers who interact with traumatized populations (defined as any population that has experienced such trauma as violence, crime, natural disaster, or war) are strongly vulnerable to STS (Canfield, 2005; Ochberg, 1988). Working with traumatized clients not only challenges the emotional balance of social workers, but also makes them more vulnerable to overwhelming anger and/or sadness (Herman, 1992).

The symptoms of STS, which parallel those of PTSD, include the following: (1) re-living the client's traumatic event through thoughts, feelings, and imagery; (2) avoiding or feeling numb to emotions that remind one of the event; and (3) experiencing heart palpitations, sweating, or sleep disturbances. STS is triggered when helping professionals empathetically engage with their clients who have endured traumatic histories and/or experiences (Canfield, 2005; Ochberg, 1988).

STS can have dire professional consequences for social workers. Social workers with STS may not be able to do their jobs effectively; many then choose to leave the social work profession (Harris, 1995; Pearlman & Saakvitne, 1995). Moreover, STS can lead to a high turnover in the workplace, forcing social services agencies to function with inadequate staffing. Lowering the incidence of occupational stress symptoms would enable such agencies to retain more experienced staff to better serve their clients.

In the last decade, most of the STS literature examined the salient factors, contributing to the development of STS in helping professionals. The purpose of this paper is to identify the predictive factors of STS based on the previous literature and to clarify the preventive strategies. A comprehensive literature review of documents identified through the Academic Search Premier (via EBSCO), Psych-Info and PILOTS (Published International Literature on Traumatic Stress) database identified the following factors of STS among social workers: 1) level of

exposure to traumatized clients; 2) case type; 3) personal trauma history; 4) workplace support; 5) direct trauma exposure in the workplace (client violence). In this paper, each predictor of STS through the literature review is explained and recommendations are described based on the predictive factors.

<div align="center">Predictive Factors of STS</div>

Direct Exposure to Traumatized Populations

Direct exposure to traumatized populations is recognized as a predictor of STS (Baird & Jenkins, 2003; Pearlman & MacIan, 1995; Schauben & Frazier, 1995; Schwartz, 2008). Previous studies assert that social workers who have more exposure to traumatized clients (including number of hours per client and percentage of caseloads) experience higher levels of STS (Baird & Jenkins, 2003; Pearlman & MacIan, 1995; Schauben & Frazier, 1995). According to a study by Schwartz (2008), 182 licensed social workers who spent 75% or more of their time doing trauma- related work had substantially higher levels of STS than their colleagues who spent less time involved in trauma-related work.

Case Type

Evidence showed that the level of STS for helping professionals is different depending on the type of the clients' trauma. Some researchers have found that STS for helping professionals dealing with sexual assault is more severe than that for other field workers (Baird & Kracen, 2006; Good, 1996; Kassam-Adams, 1995; Pinsley, 2000). Treating sexual assault survivors often involves retelling very painful and graphic traumatic experiences to a therapist who is expected to remain empathic, supportive, and non-judgmental (Pinsley, 2000). Unlike emergency response teams whose exposure to trauma victims is of a short duration, sexual assault workers bear witness to years of sexual abuse and other traumas (Baird & Kracen, 2006). The findings of the research suggest that treating victims of sexual assault imposes greater demands on therapists than treating other types of traumatized clients such as those with chronic disease or victims of natural disaster (Baird & Kracen, 2006; Pinsley, 2000). Kassam-Adams (1995) studied 100 psychotherapists in outpatient mental health agencies in Virginia and Maryland and found that therapists in her sample who had a higher percentage of clients sexually abused or assaulted in their caseload tended to report more STS symptoms.

Personal Trauma History

Some research indicates that clinicians reporting their own personal trauma history show increased STS symptoms (Folette, Polusny, & Milbeck, 1994;Good, 1996; Kassam-Adams, 1995, 1999; Wrenn, 2005). Workers who have unresolved trauma or issues relating to their own victimization may find these issues triggered by their involvement with client's traumatic material (Danis, 2003; Figley, 1996; Rando, 1984). Wrenn (2005) found that having a childhood trauma history increased the risk of STS. He surveyed 250 social workers from the Illinois chapter of the National Association of Social Workers. Especially, it was found that when the social workers' personal trauma history was similar to the clients' trauma experience, secondary exposure to client trauma increased levels of STS.

Workplace Support

Previous literature on STS has identified workplace support, including the levels of supervision and co-worker coherence, as a predictive factor for STS (Dickes, 1998; Randall,

<div align="center">26</div>

Altmaier & Russell, 1989; Slattery, 2003; Van de Water, 1996). After surveying the psychological symptoms of 79 domestic violence advocates in Massachusetts, Slattery (2003) found that more co-worker cohesion and quality of clinical supervision in the work environment leads to fewer reported STS symptoms.

Direct Trauma Exposure in Workplace (Client Violence)

Social workers might experience direct trauma in the line of duty in addition to being exposed to the trauma of their clients under their care. In a recent survey, more than half (57.6%) of the social workers questioned admitted to receiving such threats (Dalton, 2001). According to some studies, threats and/or abuse from a client or a member of a client's family are predictors of STS for social workers (Dalton, 2001; Horwitz, 1999; Newhill, 1995; Spencer & Munch, 2003; Wrenn, 2005). For example, in the study by Cornille and Meyers (1999), which assessed STS symptoms among a sample of 183 child protective service (CPS) workers, it was found that the majority of the CPS workers (78%) had been assaulted or threatened by a client while on the job. The study showed that having experienced the trauma on the job by CPS workers contributed to increasing STS symptoms in the CPS workers.

Conclusion and Recommendations

Because direct exposure to traumatized populations and severe cases, personal trauma history, inadequate workplace support, and client violence are predictors of STS, it is imperative that social agencies take steps to reduce these factors. Based upon the information presented in this paper, three recommendations are offered for ways to prevent STS in social workers (Joslyn, 2002; Nelson-Gardell & Harris, 2003): (1) Administrators of social agencies should establish support systems, including regular supervisory meetings, to give social workers an outlet for their emotions; (2) Agency administrators should more carefully monitor each social worker's caseload and then rotate social workers out of particularly tough assignments to reduce the degree of exposure to traumatized clients and severe cases; and (3) Agency administrators should institute in-service training sessions that teach social workers the skills needed in treating STS. It is vital that individual social workers make an effort to lessen the effects of STS. To do so, four strategies are recommended. First, self-care techniques of self-reflection and self-monitoring allow social workers to better assess their feelings and reactions to trauma exposure. Second, the informal support from trusted colleagues lets social workers share their experiences and perhaps see things from a different perspective. Third, psychotherapy (talking with a trusted supervisor and/or going to a psychotherapist or a support group) provides the individual social worker with professional help. Finally, individual workers can avoid STS by setting realistic goals and by maintaining healthy boundaries in relationships with others (Badger, 2001). The implementation of these strategies will enable both agency administrators and individual workers to avoid the pitfalls of STS and, in turn, improve the support and care they give to traumatized populations.

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Bookworm's Corner

Book Review
Krebs, N. & Pitcoff, P. (2006). *Beyond the Foster Care System: The future for teens.*
New Brunswick, NJ: Rutgers Press.
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In *Beyond the Foster Care System: The future for teens* Betsy Krebs and Paul Pitcoff provide significant insight into the current foster care system's inability to prepare teens for adulthood. The authors illustrate some of the inadequate policies and programs currently in place through the revealing stories of teens transitioning from foster care to adulthood. A compelling argument is made suggesting that expectations for teens in foster care are far too low and efforts need to be made to empower these individuals through new policies and programs that have historically been absent from the field of child welfare. By chronicling the challenges and barriers of the foster youth the authors provide a face to the current foster care crisis in the United States.

The contents are presented in eight chapters, each of which introduces a number of policy and practice challenges through the personal accounts of youth. The stories portray an inflexible system, in which many professionals have become both desensitized and overwhelmed by the pressures and expectations of their responsibilities. A common theme in most accounts was the system's inability to tap into the personal resources of youth, such as their insight, resilience, and intellect, to not only better prepare themselves for independence, but also to utilize the experience and insight of the teens in developing more effective independent living policies.

The story of Teresa is an unfortunate account that provides a unique view of the child welfare system through the eyes of a lawyer new to foster care. This lawyer would later help to create an agency solely devoted to educating and advocating for teens in foster care. Teresa is a young lady living in a group home who has two family members who both have a strong desire and willingness to provide care for her. Teresa is never united with either family member due in large part to the unwillingness of the professionals working the case to make the necessary accommodations for the family members. A determination was eventually made that it would be in Teresa's best interest to remain in her group home. It was in this same group home that Teresa would later become the victim of sexual assault.

The stories of Carlos and Jenny shed light on the fact that many teens in foster care often times are not made aware of their rights to things such as education, privacy, employment, and family. These accounts also point to the fact that most foster youth know that they need things such as education and independent living skills; however, current efforts to provide such things are inadequate at best.

We meet Xaranda, and a group of young ladies who will eventually become her colleagues, in chapter 4. The experiences of this group of young ladies truly serve as the most inspiring and revealing aspect of the text. Their story provide significant insight into the unjust

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and discriminatory policies facing teen mothers in foster care, but equally as important the accounts illustrate the levels of resiliency, creativity, and competence that teens in foster care possess. Xaranda is a pregnant teen, who like many other pregnant teens in foster care, finds herself nearing her due date without knowing where she and her baby will be placed, or if they will even be placed together. She contacts the Youth Advocacy Center in hopes of attaining assistance in securing a placement for both she and her baby. She would eventually become a very influential member of a group of young mothers in foster care who would work diligently to confront child welfare administrators and policy makers on a number of obstacles and injustices that they and numerous other teen mothers have encountered. The authors do a remarkable job of illustrating the irony in that many child welfare professionals likely felt that these young ladies were not capable of caring for their children, however, these same individuals were successful enough in their advocacy efforts that they would compile enough evidence to consider a class action law suit against the state due to their unjust policies concerning teen mothers in foster care.

We meet Leonard at one of the Youth Advocacy Center workshops educating teens on the importance of advocating for their rights. Shortly after emancipating from foster care Leonard finds himself, homeless, unemployed, and alone. The irony in Leonard's story is that he was largely considered one of the "good kids in foster care," who had a lot going for him. Leonard's descent is an unfortunate illustration of just how difficult it is for teens leaving the foster care system, as they often times have little or no support and only enough resources to sustain for a short period of time.

Two chapters are dedicated to further explaining the importance of teaching teens to advocate for themselves, as well introducing some of the unique methods that the Youth Advocacy Center has utilized in educating and empowering youth. A very strong argument is made to allow teens to investigate and figure out on their own whether or not to pursue certain goals and careers. The authors explain that it is very common for teens in foster care to be discouraged from certain careers that professionals and foster parents consider too lofty or unattainable.

The foster care system is largely considered to be a system that is both inflexible and stagnant. The authors provide an account that exhibits some of the foster care system's resistance to change, through a series of exchanges that took place with a group of administrators and social workers at a foster care agency. The staff members were reluctant to embrace a new and unfamiliar program, even though the existing programs were clearly ineffective and outdated. This account is likely far too familiar to many child welfare professionals, foster parents, and child care administrators.

Krebs and Pitcoff do an astounding job of exposing some of the most pressing issues facing teens in foster care through the stories and experiences they have encountered, however, little existing research on outcomes of emancipated foster youth is presented in the text to support their arguments. The use of existing literature would have likely served as a strong complement to the teen's accounts, due in large part to the fact that that the research coincides with the stories presented. According to the Casey National Foster Care Alumni Study when compared to the general population former foster children have significantly higher unemployment rates (12.9% vs. 3.7%), graduate college at much lower rates (10.8% vs. 24.4%), and are nearly twice as likely to become parents as teenagers (Pecora et al., 2006). Similarly, findings from another foster care alumni study found that over 23% of alumni had not completed high school, and less than half were currently employed. Nearly a third of alumni in this same

study had been arrested in the past year, and they were far more likely than then the general population to be victims of crime (Courtney & Dworsky, 2006). While the authors do not utilize the existing research to strengthen their argument, there is no question that both foster youth and professionals in the field would argue that Krebs and Pitcoff provide an accurate assessment of the current state of foster care in the United States. *Beyond the Foster Care System* serves as an aide and wake up call to professionals and policy makers in the foster care system. The unique and insightful stories would also serve as a helpful resource for anyone who has an interest in the aging out process or teens in foster care. In chronicling the experiences and challenges of foster youth the text is highly effective in providing a voice to a population that is often times underserved, overlooked, and underestimated.

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