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Written Testimony Submitted in Conjunction with the Hearing on
“Caring for the Vulnerable: The State of Social Work in America”

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Submitted by:

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The Institute for the Advancement of Social Work Research thanks Chairwoman McCarthy, Ranking Member Platts, and the honorable members of the Subcommittee on Healthy Families and Communities for the opportunity to respectfully submit the following written remarks. As executive director of the Institute for the Advancement of Social Work Research (IASWR), I am honored to present this testimony to you on behalf of IASWR and our supporting organizations, the Association of Baccalaureate Social Work Program Directors (BPD), the Council on Social Work Education (CSWE), the Group for the Advancement of Doctoral Education (GADE), the National Association of Social Workers (NASW), the National Association of Deans and Directors (NADD) and the Society for Social Work and Research (SSWR). IASWR was founded in 1993 by the social work profession to work to build the knowledge base for social work practice through development of research and research capacity and by enhancing the connections between research and practice.

This is a critical time for our most at-risk members of our nation, and thus I want to commend you for calling for this landmark hearing, *Caring for the Vulnerable: The State of Social Work in America*. Holding a hearing about the social work profession brings both increased recognition of the essential programs under the jurisdiction of the Subcommittee and the importance of attracting the best and the brightest social workers to provide the services authorized under those programs. The July 26, 2008 *Washington Post* includes a story about Cedric Jennings, a young man who went from Ballou High School in Washington, DC to Brown University. It suggests that he could be doing “greater” things than working as a social worker at the DC Child and Family Services Administration. He says:

“People are asking what you do now, and you say, 'Social work -- I'm a case manager.' People are like, 'That's it?' I'm like, 'It's so much more than what you think.' ‘I’ve had colleagues recently tell me, 'Cedric, it's admirable that you're doing what you're doing, but you should be doing something else. You should be doing greater things.' I feel that way. But I feel what I'm doing now is great in its own way”
(<http://www.washingtonpost.com/wp-dyn/content/article/2008/07/25/AR2008072503379.html>).

As the Subcommittee considers the many programs under its jurisdiction that serve abused and neglected children, older persons that are often isolated and alone, and adolescents trying to find their way in the world, it is important, in developing programs and policies to think about who will be staffing them. Will it be people with the competencies and qualifications to know what to do? Is it the best and the brightest who will be attracted to working with foster children, or with parents who abuse their children? I am sure that we all hope that it will be. We need to see the choice that a rising star makes to choose the social work profession as a great decision, because our society’s most vulnerable children, youth, older people and their families deserve the best service from the best workers. As a social worker I am so proud of Cedric Jennings choice.

Perhaps if people knew more about social work we would see it as more attractive and more important than working for a brokerage firm. So let me take this opportunity to share with you some of the ways that the profession of social work contributes to our knowledge of what works

for those in our society who may need some greater support, some mentoring, protection from abusive family members, or poor care in a long term care facility.

Perhaps one of the greatest challenges that the social work profession faces today is that its value to society, to the individuals, families and communities it serves, and to the social worker itself – is undervalued and in some ways devalued. However social work is a complex field of work, needing to help meet people’s needs, often with limited resources and multiple competing demands. For example, it is a well researched social work intervention that helps a young Latina woman who has had a positive screen for breast cancer, make sure she goes back and gets a follow-up mammogram (Ell, K., Vourlekis, B., Lee, P.J., Xie, B. (2007). Patient Navigation and Case Management Following an Abnormal Cancer Screen: A Randomized Clinical Trial. *Preventive Medicine*, 44: 26-33.). And it is a social work intervention, developed by Michael Sherraden and colleagues that promotes the development of individual development accounts so that poor people, in the United States and in other countries can begin to develop assets (<http://gwbweb.wustl.edu/csd/>). It is the social work research of a young minority scholar, Sean Joe, on suicide among African Americans, that was recently highlighted at a meeting of National Advisory Mental Health Council (<http://www.nimh.nih.gov/about/advisory-boards-and-groups/namhc/2007/january/council-minutes.pdf>).

I would like to particularly highlight social work research in relation to two of the key programs that the Subcommittee has under its jurisdiction and then I will provide some broader background related to state of social work research today.

Child Abuse and Neglect Prevention and Interventions

Under the provisions of the Child Abuse Prevention and Treatment Act there is a small provision that supports research. The Office of Child Abuse and Neglect, as part of that, every few years issues a request for input on the research agenda. Unfortunately, there are limited resources to actually carry-out all of the research that is needed.

One of the highly significant social work research studies that has been supported over several years by the Children’s Bureau and other public and private funders is the Family Connections program, developed by social work researcher Diane DePanfilis of the University of Maryland School of Social Work. Recognizing that prevention of child neglect requires supportive interventions, Dr. DePanfilis took her many years of practice, working in child protective services (CPS), and turned it into a neighborhood-based family intervention program that is now being replicated with other populations in Baltimore and in several sites around the country. Family Connections “targets families with children between the ages of 5 and 11 who are considered to be at risk for child abuse and neglect but have no current CPS involvement. Staff members work with families on problem-solving, positive discipline methods, coping strategies, developing social supports and community connections, and opportunities for positive family interactions through community activities” (http://www.family.umaryland.edu/ryc_best_practice_services/family_connections.htm).

Implemented through a CAPTA-supported field initiated research grant, it was the only evidence-based program designated as “demonstrating effectiveness” in the Children’s Bureau’s *Emerging Practices in the Prevention of Child Abuse and Neglect* (Thomas, Leicht, Hughes,

Madigan, Dowell, 2003, available from <http://www.childwelfare.gov/preventing/programs/whatworks/report/index.cfm>).

Many model programs are developed in communities across this country; however we have not invested in high quality program evaluation or in implementing them with a rigorous research design. Yet our concern with what works, for whom and under what conditions calls for more rigorous research when developing new programs.

Another example of social work research that is changing practice is through a Children's Bureau's grant to the University of Kentucky College of Social Work to implement the Southern Regional Quality Improvement Center on Child Protection. One of the goals of the center was to "Develop and implement research and demonstration projects to promote innovation, evidence-based practice improvements, and advancement of knowledge" (<http://www.uky.edu/SocialWork/trc/indexqic.html>). The work led by Crystal Collins-Camargo, who just recently moved to the University of Louisville, has significantly contributed to our understanding of the importance of high quality supervision of child welfare workers and the need for other workplace supports that impact service delivery.

These innovations like Family Connections and the Quality Improvement Centers are two models of service improvement that strengthen the connections between research and practice and enhance university/agency/community partnerships. They could be replicated in each state, building the research base for what works and improving agency practice. Currently, however we have just a few model efforts that often take many years to get into practice.

Meeting the Needs of Older People and Their Families

Since the passage of the Older Americans Act in 1965 we have seen the creation of a broad array of community-based services that address the housing, information, care coordination, family caregiving and social needs of our older citizens. At least 4 of the 10 heads of the Administration on Aging (AoA) have been social workers, including the first director, William Beechil, as well as Lennie Marie-Tolliver, Fernando Torres-Gil and Jeanette Takamura. The launching of the family-caregiver program in 2000 was a significant advance, using findings from research to create new policy efforts. In addition, research of social workers, for example Carol Austin, Ronald Toseland, Nancy Wilson, Kevin Mahoney and others have significantly enhanced the evidence-base on care management/case management practices and the evidence-based for preventing maltreatment and isolation of older persons.

Of critical importance are also the linkages of AoA with the Centers for Medicare and Medicaid Services, National Institute on Aging, the Agency for Healthcare Research and Quality, the Department of Veteran's Affairs and the Health Resources and Services Administration. Social work researchers such as Rosalie Kane, Roberta Greene, Mercedes Bern-Klug, Maria Aranda, Charles Imlet, Ellen Netting, Sheryl Zimmerman and Andrew Scharlach, have been funded through these agencies and other sources to study long term care, especially the necessary strategies to improve the psychosocial care and well-being of residents in nursing homes, the role of nursing home ombudsman, and adult protective services. Meeting the needs of an increasingly diverse elder population is particularly important. Many of the studies undertaken by the John A. Hartford Foundation-supported Social Work Faculty Scholars and Doctoral

Fellows (www.gswi.org) address issues related to the impact of racial, cultural, linguistic and ethnic diversity on service access, service delivery and adherence. Social work researchers are studying caregiver needs, including the use of computers and telephones to provide needed supports to caregivers of persons with Alzheimer's Disease, and family health education interventions in order to reduce isolation and promote psychosocial well-being.

About Social Work Research

The Institute for the Advancement of Social Work Research (IASWR) was founded in the 1993 with impetus from the recommendations of an National Institute of Mental Health (NIMH) supported Task Force on Social Work Research (TFSWR) that recognized the importance of an entity dedicated to working with key stakeholders to build social work research capacities, to disseminate findings from social work research and to represent social work research within the national scientific community (see *Building Social Work Knowledge for Effective Services and Policies*, available at www.iaswresearch.org). Although much has been accomplished over the last 15 years, there is a lot more to be done. As noted above, social work researchers make significant contributions to services to the most vulnerable members of our society.

Social work research addresses psychosocial problems, treatment of acute and chronic conditions, and community, organizational, policy and administrative issues. Covering the lifespan, social work research benefits consumers, practitioners, policymakers, educators, and the general public by examining prevention and intervention strategies for health and mental health, child welfare, aging, substance abuse, community development, managed care, housing, economic self-sufficiency, and family well-being; studying the strengths, needs, and interrelationships of individuals, families, groups, neighborhoods, and social institutions, and providing evidence for improved service delivery and public policies. *While examination of these issues are not specific to the social work domain, social work's **person-in-environment** perspective often provides a unique approach to examining the complex variables and interactions that have implications at the individual practice and policy levels.*

Over the past 15 years, a major focus for social work research has been connected to the National Institutes of Health (NIH). From its inception, NIMH supported training of social workers and social work research efforts, but the TFSWR recommendations resulted in expanded efforts to support social work research at NIMH and to build visibility about how social work researchers could contribute to the priorities of other NIH institutes. These efforts resulted in the funding by NIMH and the National Institute on Drug Abuse (NIDA) of 15 research development centers between 1993 and 2000 at 14 schools of social work. This stimulated early career support for doctoral students and post doctoral fellowships as well as a growing number of social work researchers receiving career K awards as well as researcher-initiated RO1 awards.

Expanded research efforts went beyond these schools and as of July 2008, IASWR has identified 641 grants to social work researchers from 16 institutes between 1993 and early 2008. The Directory of Social Work Research Grants Awarded by NIH is available on IASWR's website, (<http://www.charityadvantage.com/iaswr/NIHSWRDatabasemarch3008.pdf>) and is a useful resource to government entities and the research community. It demonstrates the great extent to which social workers are studying problems that occur in real world settings and developing interventions to address service delivery in schools, in social service settings and to address the

mental health needs of elders in community living arrangements. Addressing health disparities and working with diverse communities is a hallmark of social work research. As universities inaugurate NIH funded Clinical and Translational Research Centers, they have increasingly looked to engage social work researchers and schools of social work in their efforts to engage community partners in research.

In 2003, recognizing the value of social work research contributions to NIH's overall mission, NIH developed a plan for social work research http://obsr.od.nih.gov/Documents/Publications/SWR_Report.pdf and has been working to implement the nine recommendations of that plan. NIH noted that "Social work research as it relates to the health of individuals sheds light on the behavioral and social determinants of wellness and disease and helps to develop effective interventions for improving health outcomes. In recognition of this fact, OBSSR facilitates increasing the contribution of social work research to the broad mission of the NIH" (p. 5). In 2007 NIH provided a report to Congress describing the progress that had been made since the 2003 plan development. IASWR works closely with NIH and the NIH social work research working group that was developed from the plan, implementing conference presentations and training

Beyond expanded training and technical assistance, in December 2005 NIH released 3 social work program announcements using the R03, R01 and R21 mechanisms. *Research on Social Work Practice and Concepts in Health* (PA 07-292, PA 06-082, PA 06-083). The research encouraged covers:

"innovative, theory-driven empirical research on social work practice, concepts and theory as these relate to the NIH public health goal of improving health outcomes for persons with medical and behavioral disorders and conditions. Areas of interest include studies that characterize the usual and/or "best" practices of social workers and how these relate to health outcomes, studies establishing the efficacy and effectiveness of health-related interventions and services delivered by social workers, aspects of health-related social work services that are unique to specialty health care settings (e.g., clinics, hospitals, nursing homes, hospices, etc) and non-specialty health care settings (e.g., social service agencies, schools, jails and prisons, etc.), the nature and impact of routine prevention or clinical practice, and factors related to successful dissemination and implementation of social work services and interventions with proven effectiveness."

(<http://grants.nih.gov/grants/guide/pa-files/PA-07-292.html>)."

Ensuring a Diverse Research Workforce in Social Work

Throughout the profession's history there has been specific attention to addressing issues of disparities and inequitable treatment. In addition there have been efforts to develop a diverse research workforce. For over 30 years the NIMH has supported a Minority Research Fellows program targeted to social work researchers, psychologists, psychiatrists and sociologists. This program, run in social work by CSWE has created more than a generation of minority researchers from African American, Native American, Hispanic and Asian communities. The PhD graduates have gone on to be deans and leaders in the profession. In recent years there has been an increased focus on research career development, and a growing number of recipients have moved from minority fellowship, to NIH dissertation awardee, to Post Doc, to K award, and are heading to RO1 research careers.

Due to the concern across professions that there are insufficient mechanisms to recruit, support and sustain minority researchers, IASWR has been a key participant in a Consortium of Social Sciences Association-initiated national effort to engage professional and scientific societies in actions to enhance diversity in the scientific workforce (http://www.cossa.org/communication/diversity_workshop/diversity.html). A February 2008 leadership retreat and a survey of more than 200 societies created a set of action steps that organizations can do together and in conjunction with federal research funding agencies such as NIH and the National Science Foundation.

Important research development programs for undergraduates have also been beneficial to social work researchers. Although limited in number and scope, at least 3 BSW programs have had students participate in the NIMH Career Opportunities in Research (COR) Honors Undergraduate Research Training Grant in recent years.

Evidence-Based Practice

Building the research base to inform practice and creating linkages between the research and practice communities is extremely important. With support from the NIMH, the IASWR is working with NIMH and key social work and service provider stakeholders to promote partnerships to integrate evidence-based practices into social work education and research (<http://www.iaswresearch.org/>). In addition, we are involved with NASW and other social work representatives in promoting initiatives to understand the organizational, staffing and training needs to implement researched interventions into real world settings.

Future Directions

Attention to performance measures, accountability, and a focus on outcomes reinforces the need for a robust social work research enterprise. Even with the investments that have been made, many research questions remain and limited funding often precludes critical practice questions from being answered. Furthermore, the continued concerns about health disparities; the linkages between poverty and health, educational and social outcomes; and the need for research on the implementation of social interventions in complex systems and with diverse communities and settings drives the need for more sophisticated research studies. The social work profession is uniquely positioned to be a catalyst for transporting research to practice and to developing practice-based research questions.

Furthermore in social work, there is a need for greater support for doctoral and post doctoral research. The projected growth of the profession and the increasing number of social work education programs coupled with the need for more research suggests that action steps must be implemented to attract people into social work and then toward research and teaching careers. In many fields, post doctoral research is seen as a critical step in developing a research career. In social work, currently there are limited such opportunities and there are pressures on doctoral graduates to move into teaching and academic settings immediately. Thus while much has been accomplished, there is much more to do.

IASWR looks forward to working with the Subcommittee on your important deliberations to ensure health families and communities and welcomes any questions that you might have.