

THE UNIVERSITY OF TEXAS AT AUSTIN
SCHOOL OF SOCIAL WORK
SOCIAL WORK RESEARCH METHODS

Course Number:	SW 385R	Instructor's name:	Catherine Cubbin, PhD
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Semester:	Spring 2013	Office Phone:	(512) 232-8374
Meeting Time:	Thurs 5:30-8:30pm	Office Hours:	Thurs 12:30-1:30; & by appt
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Standardized Course Description: This Foundation course is designed to help students gain an understanding of and appreciation for the use of research as a tool for professional evidence-based practice. Students are introduced to the concepts and skills underlying a systematic approach to social work research, including basic research terminology, the scientific method in social work, the value of research in social work, research ethics and the social work value base, problem formulation and conceptualization, measurement, research designs to evaluate programs and practice, sampling, alternative quantitative and qualitative data gathering and analytic techniques, and preparation and use of research reports. The emphasis in the course is on equipping students with the research knowledge and skills they'll need to engage in the evidence-based practice process at all levels of social work practice. As part of that process, they will learn how to critically appraise sources of scientific evidence and how the criteria for that appraisal will vary depending upon the purpose of the research.

Standardized Course Objectives: Upon completion of this course, students will be able to:

1. Formulate answerable evidence-based practice research questions; **(PB22)**
2. Efficiently conduct advanced searches of electronic bibliographic databases and other sources to find evidence bearing on evidence-based practice research questions; **(PB22)**
3. Critically appraise sources of scientific evidence and explain how the criteria for that appraisal will vary depending upon the purpose of the research; **(PB22 & PB41)**
4. Discuss why research evidence needs to be integrated with practice expertise and idiosyncratic client preferences, circumstances and values in the evidence-based practice process; **(PB22)**
5. Design evaluations as part of evidence-based practice. **(PB21 & PB41)**
6. Explain how both qualitative and quantitative research processes apply in evidence-based practice; **(PB22 & PB41)**
7. Define basic qualitative and quantitative research concepts and describe the basic principles of causal inference, and their relationship to the various types of research designs; **(PB22 & PB41)**
8. Describe key concepts in measurement bearing on evidence-based practice, such as sources of measurement error, reliability and validity, and measurement equivalence across cultures. **(PB22 & PB41)**
9. Find measurement instruments applicable to evidence-based practice, sources of evidence bearing on the suitability of those instruments for specific practice scenarios, and critically appraise those sources from the standpoint of measurement principles and cultural sensitivity. **(PB22 & PB41)**

10. Describe the logic of probability sampling procedures, issues in the use of non-probability sampling procedures, how sampling issues bear on conducting evidence-based practice research at mezzo and macro levels of practice, and the implications of sampling for appraising and integrating sources of evidence in guiding practice decisions; (**PB22 & PB41**)
11. Describe how particular values and sensitivity to ethical issues influence the conducting of research; (**PB21, PB22 & PB41**)
12. Give examples of the issues that diversity (e.g., gender, ethnicity, culture, age, sexual orientation, race, class, and physical or mental ability) raises in the conduct of research and in appraising and utilizing research to guide practice decisions; (**PB21, PB22 & PB41**)
13. Critically appraise how social work commitment to equity and social justice influences and differentiates the social work research process. (**PB21**)

The School of Social Work has been continuously accredited by the Council on Social Work Education (CSWE) since 1952. In order to maintain our accreditation status, we engage in ongoing curriculum assessment to demonstrate compliance with CSWE's Education Policies and Accreditation Standards (EPAS). Several required courses in our curriculum are part of this ongoing assessment, including this course. Below is a list of the specific Educational Policies (EP) and Practice Behaviors (PB) that are assessed in this course. The complete EPAS can be optioned from your Student Handbook.

EP2.1.6: Engage in research-informed practice and practice-informed research.

PB21 Use practice experiences to inform scientific inquiry

Objectives 5, 11, 12, 13

Assignment: Paper; exams 1 and 2

PB22 Use research evidence to inform practice

Objectives 1, 2, 3, 4, 6, 7, 8, 9, 10, 11, 12

Assignment: Paper

EP2.1.10d: Evaluation.

PB41 Critically analyze, monitor, and evaluate interventions

Objectives 3, 5, 6, 7, 8, 9, 10, 11, 12

Assignment: Paper; exams 1 and 2

I. Teaching Methods

The primary means of instruction will be interactive lectures, in-class exercises in small groups (which may be based on brief homework assignments), and class discussions from the assigned readings. Students will be expected to have done the assigned reading before class and to actively participate in class and collaborate with one another.

II. Required Text and Readings (Students are responsible for the material in the assigned readings whether or not the material is discussed in class.)

Required text:

Rubin, A. & Babbie, E. (2008). *Research methods for social work*, 7th edition, Belmont, CA: Brooks/Cole.

Recommended texts:

Rubin, A. (2008). *Practitioners guide to using research for evidence-based practice*. New York: John Wiley & Sons.

Rubin, A. (2010). *Statistics for Evidence-Based Practice and Evaluation*. Belmont, CA: Brooks/Cole.

Required journal articles: All of the following articles are available on the course Blackboard

- Bradshaw, W. & Rosenborough, D. (2004). Evaluating the effectiveness of Cognitive-Behavioral Treatment of residual symptoms and impairment in Schizophrenia. *Research on Social Work Practice*, 14 (2), 112-120.
- Elliott, C. (2008). Guinea-Pigging. *The New Yorker*, January 7, 36-41.
- Fischman, J. The pressure of race. *The Chronicle of Higher Education*, September 12, 2010.
- Frieden, T.R., and Collins, F.S. (2010). Intentional Infection of Vulnerable Populations in 1946-1948, *JAMA* 304 (18), 2063-2064.
- Maxwell, J.C. (2008). Are we becoming more alike? Comparison of substance use in Australia & the United States as seen in the 1995, 1998, 2001, & 2004 national household surveys. *Drug & Alcohol Review*, 27, 473-481.
- Nichols, P. (2009) Next door but invisible. *Penn Arts & Sciences Magazine* Fall/Winter, 18-24.
- Padgett, D. K., Gulcur, L. & Tsemberis, S. (2006). Housing first services for people who are homeless with co-occurring serious mental illness and substance abuse. *Research on Social Work Practice*, 16(1), 74-83.
- Rubin, A., & Parrish, D. Validation of the Evidence-Based Practice Process Assessment Scale. *Research on Social Work Practice* 2011:106-118.

III. Websites that are relevant to this course

<http://www.campbellcollaboration.org> (meta analysis of the effects of interventions in the social, behavioral, crime and justice, and educational arenas)

<http://www.cochrane.org/reviews> (meta analysis of the effects of health and mental health interventions)

http://www.psych.org/psych_pract/treatg/pg/prac_guide.cfm (practice guidelines for psychiatrists for each psychiatric/mental/cognitive disorder)

<http://evidencebasedprograms.org> (Social programs that work)

IV. Grading and Course Requirements

Accumulated points and grading scale

100-94 = A	93-90 = A-	89-87 = B+	86-84 = B	83-80 = B-	79-77 = C+	76-74 = C
73-70 = C-	69-67 = D+	66-64 = D	63-60 = D	<=59 = F		

Course requirements and grade assignment: Two exams (50%), one paper (40%), and class participation/attendance (10%)

1. Two multiple-choice tests will cover all materials assigned and/or discussed in class this semester. 25 points each, 50 points total, closed book: 2/28/13 & 4/18/13.
2. Two-person research proposal (16-18 pages, excluding title page, references and appendices, double-spaced; Due: 5/7/13) and class presentation during the last 2 weeks (4/25/13 and 5/2/13) of the semester (30 points for the written proposal and 10 points for class presentation): For this paper, two students are required to team up and write up a plan to conduct a research project on **a program/service/intervention** for a chosen problem. Refer to the guidelines below. Since both group members will receive the same

points based on the grade of the paper, it is very important for them to work together. In case the work load was questionably unbalanced, the instructor may assign a lower grade to an individual. Each group will have a 15-minute presentation of its work to the class. For in-depth learning and application of research procedures that are discussed in this course, students are strongly encouraged to select quasi-experimental or experimental research designs. It is strongly recommended that each group make a thorough presentation, so that the professor can provide feedback to improve the group's research proposal.

3. Class attendance/participation (10 points): It is important for social work practitioners and leaders to be punctual in both meeting deadlines and in attendance. You are also expected to learn from interacting with the other students in the class. Thus, students are expected to attend all classes and to arrive on time. Students who miss multiple classes without medical documentation during the semester and/or show up late will lose points. Leaving class early will be counted as an absence unless the student provides a reasonable cause for doing so in advance (i.e., before the day of class) and receives the professor's permission. Students are expected to do assigned readings before the class time and actively participate in class discussions and group exercises.

V. University and School Notices and Policies

The University of Texas Honor Code: The core values of The University of Texas at Austin are learning, discovery, freedom, leadership, individual opportunity, and responsibility. Each member of the university is expected to uphold these values through integrity, honesty, trust, fairness, and respect toward peers and community.

Professional Conduct in Class: The professor expects students to act like professionals in class. This means students should arrive on time for class, be prepared to participate in the class discussion, and show respect for one another's opinions. We will not, nor should we, always agree with one another. In this environment we should be exposed to diverse ideas and opinions, and sometime we will not agree with the ideas expressed by others. However, the professor does require that students engage one another with respect and professionalism. Being a graduate student can be a stressful experience especially when you have multiple other roles such as being a spouse, parent, and adult child caregiver (role overload and role strain). As professionals, however, all of us must conduct ourselves within the boundaries of the accepted norms of civility, responsibility, and respect for others. Please at least be mindful of the negative impact of your unprofessional speech and conduct on your classmates and the professor.

Policy on Scholastic Dishonesty: Students who violate University rules on scholastic dishonesty are subject to disciplinary penalties, including the possibility of failure in the course and/or dismissal from the University. Since such dishonesty harms the individual, all students, and the integrity of the University, policies on scholastic dishonesty will be strictly enforced. For further information, the student may refer to the Web Site of the Student Judicial Services, Office of the Dean of Students (<http://www.utexas.edu/depts/dos/sjs/>).

Documented Disability Statement: Any student who requires special accommodations must obtain a letter that documents the disability from the Services for Students with Disabilities area of the Division of Diversity and Community Engagement (471-6259 voice or 471-4641 TTY for users who are deaf or hard of hearing). Present the letter to the professor at the beginning of the semester so that needed accommodations can be discussed. The student should remind the professor of any testing accommodations no later than five business days before an exam. For more information, visit <http://www.utexas.edu/diversity/ddce/ssd/>.

Religious Holidays: By UT Austin policy, students must notify the professor of a pending absence at least fourteen days prior to the date of observance of a religious holy day. If the student must miss a class, an examination, a work assignment, or a project in order to observe a religious holy day, the professor will give the student an opportunity to complete the missed work within a reasonable time after the absence.

Use of E-Mail for Official Correspondence to Students: Email is recognized as an official mode of university correspondence; therefore, students are responsible for reading their email for university and course-related information and announcements. Students are responsible to keep the university informed about changes to their e-mail address. Students should check their e-mail regularly and frequently—daily, but at minimum twice a week—to stay current with university-related communications, some of which may be time-sensitive. Students can find UT Austin's policies and instructions for updating their e-mail address at <http://www.utexas.edu/its/policies/emailnotify.php>.

Safety: As part of professional social work education, students may have assignments that involve working in agency settings and/or the community. As such, these assignments may present some risks. Sound choices and caution may lower risks inherent to the profession. It is the student's responsibility to be aware of and adhere to policies and practices related to agency and/or community safety. Students should notify the professor regarding any safety concerns.

Behavior Concerns Advice Line (BCAL): If students are worried about someone who is acting differently, they may use the Behavior Concerns Advice Line to discuss by phone their concerns about another individual's behavior. This service is provided through a partnership among the Office of the Dean of Students, the Counseling and Mental Health Center (CMHC), the Employee Assistance Program (EAP), and The University of Texas Police Department (UTPD). Call 512-232-5050 or visit <http://www.utexas.edu/safety/bcal>.

Emergency Evacuation Policy: Occupants of buildings on the UT Austin campus are required to evacuate and assemble outside when a fire alarm is activated or an announcement is made. Please be aware of the following policies regarding evacuation:

- Familiarize yourself with all exit doors of the classroom and the building. Remember that the nearest exit door may not be the one you used when you entered the building.
- If you require assistance to evacuate, inform the professor in writing during the first week of class.
- In the event of an evacuation, follow the professor's instructions.
- Do not re-enter a building unless you're given instructions by the Austin Fire Department, the UT Austin Police Department, or the Fire Prevention Services office.

Feedback on Learning: During this course the professor may ask students to provide feedback on their learning in informal as well as formal ways. It is very important for the professor to know the students' reactions to what is taking place in class, so students are encouraged to inform the professor on how her teaching strategies are helping or hindering student learning, ensuring that together the professor and students can create an environment effective for teaching and learning.

VI. Additional Class Policies Affecting Course Grade

Late Assignment Policies: Except in the case of extreme emergencies, and then only with the permission of the professor, late assignments will not be accepted without penalty. Students are expected to turn in all required assignments on the specified due date at the beginning of class. Electronic copies as e-mail

attachments will be allowed only for late assignments and under special circumstances when the student cannot be present in class.) Students will lose 3 points for each day that an assignment is late. If the due date is a problem, then the student must contact the professor and negotiate another due date at least **48 hours** **PRIOR** to the date specified in the course syllabus.

Computer and Other Electronic Device Use Policies: Using laptop and handheld computers and other electronic equipment (e.g. cell phone, text messaging, ear buds) in class will **NOT** be permitted except in the case of extreme emergencies and special circumstances that have been pre-approved by the professor. Students frequently use laptop computers in class to conduct tasks that are not related to the course contents (e.g., working on papers for other classes, checking e-mails, surfing Internet news) and resort to cell-phone texting while in class. Such behaviors are unprofessional and disruptive to other students and the professor. All communication devices will be turned off while in class, and can be used only during class breaks. Students who break the computer use and cell phone policies and who engage in any other tasks that are unrelated to the course (e.g., reading newspapers and articles for other classes, playing games) may be asked to leave the classroom.

VII. Course Schedule

Date	Description	Text/Readings
Week 1 1/17/13	Introduction to course	Rubin & Babbie, Ch. 1 Read description of www.campbellcollaboration.org/ www.cochrane.org/reviews/
Week 2 1/24/13	Evidence-based social work practice and policy; Philosophy and theory <i>Formation of teams for paper assignment</i>	Rubin & Babbie, Ch. 2-3
Week 3 1/31/13	Problem formulation Conceptualization and operationalization <i>Guest lecturer: Dr. Claire Margerison-Zilko</i>	Rubin & Babbie, Ch. 6-7 <i>Additional article to be distributed the week before class</i>
Week 4 2/7/13	Ethics and Politics Culturally competent research	Rubin & Babbie, Ch. 4-5 Read description of: www.utexas.edu/research/rsc/humanresearch Fischman (2010) in <i>The Chronicle of Higher Education</i> Frieden and Collins (2010)
Week 5 2/14/13	Measurement Constructing measurement instruments	Rubin & Babbie, Ch. 8-9 Rubin and Parrish (2011)
Week 6 2/21/13	Class exercises, practice questions, and review for mid-term Brief concept paper for research proposal due	Elliott (2008)

Week 7 2/28/13	MID-TERM EXAM (1.5 hour) Guest lecturer: Dr. Marilyn Armour	<i>Additional article to be distributed the week before class</i>
Week 8 3/7/13	Causal inference, experimental designs and quasi-experimental designs Mid-course evaluation	Rubin & Babbie, Ch. 10-11 Padgett et al. (2006)
Week 9 3/14/13	**SPRING BREAK**	
Week 10 3/21/13	Single case evaluation designs Program evaluation	Rubin & Babbie, Ch. 12-13 Bradshaw & Rosenborough (2004)
Week 11 3/28/13	Sampling Survey research Part 1 of research proposal due	Rubin & Babbie, Ch. 14-15 Maxwell (2008)
Week 12 4/4/13	Analyzing existing data	Rubin & Babbie, Ch. 16 <i>Additional article to be distributed the week before class</i>
Week 13 4/11/13	Qualitative research Review for final exam	Rubin & Babbie, Ch. 17-18 Nichols (2009) in <i>Penn Magazine</i>
Week 14 4/18/13	FINAL EXAM (The rest of the class time will be used to discuss research paper proposals)	
Week 15 4/25/13	Presentation of research proposals	
Week 16 5/2/13	Presentation of research proposals Course instructor survey	

****FINAL RESEARCH PROPOSAL PAPERS ARE DUE BY 5/7/13 AT NOON****

VIII. Description of Assignments and Suggested Formats:

In-class, closed-book, mid-term and wrap-up tests:

For each test, there will be 50-75 multiple-choice and true/false type questions.

Guidelines for a Group Research Proposal (16-18 pages, double-spaced): please use section headings in your proposal): The purpose of this paper is to provide students with the opportunity to conduct a comprehensive review of the literature to identify the intervention, program, or policy that has the best effects for a chosen problem/issue; and then to provide students with the opportunity to apply what they are learning about research methods by planning an evaluation of a program/service/intervention for a chosen problem/issue

(which they are likely to encounter in their practicum settings). Research and evaluation projects are almost always done in groups, and the students will have to learn how to produce a proposal in collaboration with other people. The students will apply the following research process in the proposal writing: (1) Formulation of answerable research questions that will contribute to promoting evidence-based social work practice; (2) literature review of the chosen problem and critical appraisal of the efficacy and effectiveness of the evidence-based program/service/intervention; hypotheses generation; (3) research design (quasi-experimental or experimental design; description of the procedures of implementing evidence-based program/service/intervention; sample inclusion/exclusion criteria, planned methods of subject identification, screening, recruitment, and retention; fidelity monitoring methods; selection of measures of outcomes and other variables; and data collection methods); (5) anticipated findings and their implications for social work practice, programs, and/or policies; and (6) anticipated limitations of the study with respect to its research design and methods of data collection.

Title Page: Descriptive title, group members' names, date, and a very brief (one paragraph) synopsis. (1 point)

Introduction/Background (1.5 pages; 3 points): Briefly state the purpose of the paper and then provide an overview of the target problem/issue related to social work practice. Include some statistics regarding the prevalence of the problem. A brief review of relevant literature related to the problem focusing on its etiology and effects is also necessary. State the specific research question(s) that you will be examining. Then, describe the significance of the chosen question(s) to evidence-based social work practice.

A few examples of problems might be: abusive parents (prevention or treatment), traumatized children or adults, war veterans with PTSD, welfare or healthcare reform, community development, family preservation, substance abuse, homelessness, depression among nursing home residents, preventing hospitalization among individuals with chronic brain disorders, end-of life issues, marital problems, runaways, school dropout, HIV/AIDS prevention, caregiver burden, and many more – these are just some illustrations to help you consider what you may want to choose. Important – these are NOT just clinical examples. For instance, regarding abusive parents, an agency administrator may need to decide what programs to implement in her agency. Likewise, a community organizer might need to choose a community development strategy that has the best chance to succeed.

Literature Review (7-8 pages; 10 points):

- (a) Describe the search strategies that you used to identify possible studies—article data bases, internet search engines, websites, and search terms used.
- (b) Describe the criteria that you used to select the studies to be included in your paper examining the best scientific evidence supporting its effectiveness for the practice problem/issue in question.
- (c) Provide a systematic summary of the results of the outcome studies that tested the effectiveness of the identified intervention. (Please note that this section is NOT a summary of each outcome study of the identified intervention that you have reviewed, but it should be a synthesis of the studies' findings.)
- (d) Discuss the major methodological strengths and/or weaknesses of the key studies you reviewed. Show that you can distinguish those studies that are sufficiently sound methodologically to guide

practice from those whose methodological weaknesses imply the need for more rigorous research before evidence-based practice implications are warranted.

(e) Include a table summarizing each study's design, findings, and other relevant information.

(f) Explain why the chosen intervention had the best evidence, and why that evidence was superior to other possible answers that you found in your search (including why the chosen intervention would be feasible to implement and a good fit in light of the characteristics of the clients or problem/issue you have described). To discuss the superiority of the chosen intervention, you obviously need to briefly describe other interventions that have been proposed or tested for the selected problem and why they had less or worse evidence than the selected intervention.

(g) Describe the identified evidence-based intervention for the problem/issue. For example, if you identified motivational interviewing (MI) as having the best scientific evidence for heavy/binge drinking among young adults, describe the theory base of MI and other background related to MI development, principles, components, and processes/steps of MI, and other relevant information on MI (e.g., range of problems and subjects for which MI has been applied). Please remember that the intervention that you selected should have emerged from a review of recently published outcome studies that tested the intervention and systematic reviews (if any) of its effectiveness.

Methods: (5-6 pages; 10 points):

(a) Following the critical appraisal of current status of knowledge, provide a conceptual/theoretical framework guiding your evaluation. Examples may include learning theory, systems theory, role theory, life course perspective, and so on. Theories are essential to provide the foundation for your assumption (study hypotheses) about why the program/service/intervention is likely to help your clients achieve an outcome or outcomes that they set out to achieve.

(b) State your evaluation hypotheses. (e.g., A 12-week cognitive behavioral therapy will reduce depressive symptoms 50% more than usual care [case management as usual] among disabled older adults at 3-month and 6-month posttests; Emancipated foster youths who receive housing subsidy for the first year will be more likely to continue their education and/or maintain stable employment than their peers who do not receive housing subsidy.) Provide a rationale (using your theoretical framework) for believing that your independent variable(s) (e.g., CBT vs. CM as usual care) will be related to your dependent variable(s)—outcomes (e.g., level of depressive symptoms). If appropriate, identify moderating and/or mediating variables relevant to your hypotheses. Also cite other variables you wish to control for and explain why.

(c) Describe the best research design that can be used (e.g., two-arm quasi- or true-experimental; mixed-method design; longitudinal survey/interview design). Explain why the chosen design is the most appropriate for the evaluation (may need to discuss the weaknesses of alternative designs), and specify strengths and limitations of the chosen design.

(d) Describe what your intervention is (e.g., 12-week manualized CBT focusing on cognitive reframing and behavioral activation and homework assignments; housing subsidy consisting of deposit and monthly rent payments); who is providing the intervention and where?; how are you going to select and train the therapists?; and how will the intervention fidelity be adhered to and monitored? How would you apply/adopt the intervention for your target problem/issue? Explain/justify/modify your intervention plan based on the evidence you have found in your review.

(e) Study site(s) and sample inclusion/exclusion criteria, subject recruitment, enrollment, and retention in the study: What are your study sites? What are the steps/strategies that you will use to identify, screen, and recruit subjects for the study? How will you assign the subjects into the experimental vs. control groups? What will you do to minimize dropout among subjects?

(f) Measures and data collection: Describe measures (e.g., Beck Depression Inventory; months of continuous employment, number of courses taken at post-secondary educational institutions) for your variables. Discuss its reliability and validity from previous validation studies. Describe data collection techniques to be used: self-report at the time of interviews; mailed questionnaires; participant observation coding of agency records; etc. Who will collect data and how often? Provide a brief rationale for your choice of data collection method as compared to alternative choices and reliability and validity considerations. Describe pretesting (or pilot testing) procedure for your data collection instruments, if necessary, to be utilized. Also discuss how you will adhere to the ethical guidelines when collecting data.

Expected Findings, and Implications (2 pages; 3 points):

What do you believe you will find? Assuming your hypotheses are supported or refuted, what are the implications of such findings for 1) theory, 2) practice, 3) policy, and 4) future research? Same points also need to be discussed for qualitative research. Briefly summarize (and discuss) the strengths and limitations of your study. How will you disseminate your study findings?

Project TimeLine and Budget (1 page; 2 point):

Provide a timeline (with monthly or quarterly tasks) for the project. Also provide a rough estimate of expenses for personnel, intervention, subject incentives, data collection and analysis, and other resources needed to conduct the study. Include a brief justification for each item.

References (1 point):

There is no specific minimum number of studies that you need to review; however, because this is a team project, your literature search should be thorough. Please follow the APA format of in-text citing and referencing the articles, books, and documents that are cited in the body of the proposal.

Appendices: Any document you consider important, copies of survey questionnaire, interview schedule, and/or measurement instruments. Label each of them as a separate appendix. It is expected that each proposal will include appendices.

Appendix: Writing tips for reporting reliability and validity of measures in the Methodology Section of a group research proposal

1. For each scale or measurement instrument that has been validated, please remember to cite reliability and validity from previous studies.
2. For both your self-constructed and validated scales, please describe:
 - Number of items
 - Rating scheme (e.g., 5-point Likert scale; dichotomous “yes” or “no” scale)
 - Maximum and minimum possible scores

- If applicable (in the case of validated clinical symptom measures), clinical cut-off points (e.g., normal range versus clinically significant range): This will be very useful because it will provide a meaningful context for discussing your findings. That is, you may be able to state that the baseline scores showed clinically significant symptoms while the scores toward the intervention phase showed that your symptoms were reduced to normal ranges.

Please see the following examples:

Example 1. The Acculturation Rating Scale for Mexican Americans-II (ARSMA-II) comprises two scales designed to measure cultural orientation and modes of acculturation among Mexican Americans. The 30-item first scale, which contains a Mexican orientation subscale and an Anglo orientation subscale on a 5-point Likert scale, measures the level of integration and assimilation by assessing English and Spanish language and media use, childhood and current friendships, contacts with Mexico, preferred racial/ethnic identification, and dietary practices. The scores range between 30 and 150, with higher scores representing higher degrees of acculturation. The 18-item second scale measures separation and marginalization as modes of acculturation by assessing acceptance of Anglo versus Mexican and Mexican American ideas, values, attitudes, behaviors, and friends. The ARSMA-II has been found to have excellent concurrent and predictive validity, as well as Cronbach's alphas ranging from .68 to .91 (Cuellar et al., 1995). The original ARSMA and ARSMA-II have been used in studies with older Mexican American samples (see Bundek, Marks, & Richardson, 1993; Gonzalez, Haan, & Hinton, 2001).

Example 2. To measure the level of depressive symptoms, I have chosen the 15-item short-form Geriatric Depression Scale (GDS; Sheikh & Yesavage, 1986) which had response categories of 0, "No" and 1, "Yes.". The short-form is less likely to cause undue burden on frail subjects of the study. The GDS has shown Cronbach's alpha and split-half reliability coefficients of .94 for a sample of community-living older persons and those hospitalized for depression (Brink et al., 1986; Yesavage et al., 1989). The GDS scores between 0 and 4 represent no depressive symptoms, those between 5 and 11 represent mild-to-moderate level of depression, and those higher than 11 represent severe depressive symptoms.

3. Examples of measurement errors are: (1) measures may have been too lengthy (especially in the case of validated scales); (2) possible testing effect due to repeated measuring; (3) research reactivity; and (4) inaccurate recollection of past events or mood.

4. Examples of steps that you can use to maximize treatment fidelity and internal validity: (1) adherence to the schedule of intervention (e.g., exercising 5 times a week, 30 minutes each time as planned; carrying out 15-minute cognitive writing every night as planned); and (2) adherence to practice guidelines or manuals or by implementing all segments/components of intervention (e.g., cognitive reframing, positive reinforcement, breathing, and so forth). In your paper, please describe if and how you have adhered to these steps.