

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

<b>Course Number:</b>	SW 385R	<b>Instructor's name:</b>	Namkee G. Choi, PhD, MSW
<b>Unique Number:</b>	62734	<b>Office Number:</b>	3.122D
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\*(Please send e-mail messages to both addresses for quick response.)

**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: Papers 1 & 2

**PB22** Use research evidence to inform practice

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

Assignment: Paper 1

**EP2.1.10d: Evaluation.**

**PB41** Critically analyze, monitor, and evaluate interventions

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

Assignment: Papers 1 & 2

## **I. Teaching Methods**

The primary means of instruction will be informal lectures, in-class exercises in small groups, and class discussions from the assigned reading. 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. (2011). *Essential research methods for social work*, 3rd edition, Belmont, CA: Brooks/Cole.

**Recommended text:**

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

**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. Available: <http://rsw.sagepub.com/archive/>

- Brophy, G. (2000). Social work treatment of sleep disturbance in a 5-year-old boy: A single case evaluation. *Research on Social Work Practice, 10*(6), 748-758. Available: <http://rsw.sagepub.com/archive/>
- DeRigne, L. (2010). What are the parent-reported reasons for unmet mental health needs in children? *Health & Social Work, 35* (1), 7-14.
- Edmond, T., Sloan, L., McCarty, D. (2004). Sexual abuse survivors' perceptions of the effectiveness of EMDR and eclectic therapy. *Research on Social Work Practice, 14* (4), 259-272. Available: <http://rsw.sagepub.com/archive/>
- Esbensen, F-A., Osgood, D. W., Taylor, T. J., Peterson, D., & Freng, A. (2001). How great is G.R.E.A.T? Results from a longitudinal quasi-experimental design. *Criminology & Public Policy 1* (1), 87-117.
- Fraser, M. W., Day, S. H., Galinsky, M. J., Hodges, V. G., & Smokowski, P. R. (2004). Conduct problems and peer rejection in childhood: A randomized trial of the making choices and strong families program. *Research on Social Work Practice, 14* (5), 313-324. Available: <http://rsw.sagepub.com/archive/>
- Gellis, Z. D., McGinty, J., Tierney, L., Jordan, C., Burton, J., & Misener, E. (2008). Randomized controlled trial of problem-solving therapy for minor depression in home care. *Research on Social Work Practice, 18* (2), 107-116. Available: <http://rsw.sagepub.com/archive/>
- Hoffman, S. G., & Smits, J. A. G. (2008). Cognitive-behavioral therapy for adult anxiety disorders: A meta-analysis of randomized placebo-controlled trials. *Journal of Clinical Psychiatry, 69* (4), 621-631.
- Lundahl, B. W., Kunz, C., Brownell, C., Tollefson, D., & Burke, B. L. (2010). A meta-analysis of motivational interviewing: twenty-five years of empirical studies. *Research on Social Work Practice, 20* (2), 137-160. Available: <http://rsw.sagepub.com/archive/>
- MacMmaster, S. A., Rasch, R. F. R., Kinzly, M. L., Cooper, R. L., & Adams, S. M. (2009). Perceptions of sexual risks and injection for HIV among African American women who use crack cocaine in Nashville, Tennessee. *Health & Social Work, 34* (4), 283-291.
- Padget, 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. Available: <http://rsw.sagepub.com/archive/>
- Pasupuleti, S., Allen, R. I., Lambert, E. G., & Cluse-Tolar, T. (2009). The impact of work stressors on the live satisfaction of social service workers: A preliminary study. *Administration in Social Work, 33*, 319-339.
- Rodriguez, N., & Webb, V. J. (2004). Multiple measures of juvenile drug court effectiveness: Results of a quasi-experimental design. *Crime & Delinquency, 50* (2), 292-314.

### **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> (meta analysis of the effects of health and mental health interventions)
- [http://www.psych.org/psych\\_pract/treatg/pg/prac\\_guide.cfm](http://www.psych.org/psych_pract/treatg/pg/prac_guide.cfm) (practice guidelines for psychiatrists for each psychiatric/mental/cognitive disorders)
- <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-	59 and below = F

**Course requirements and grade assignment:** Two quizzes, two papers, and class participation

1. Two--mid-term and wrap-up--tests (**To assess PB 22 and 41:** 15 points each, 30 points total, closed book;

3/1/11 & 4/26/11): Two multiple-choice tests will cover all materials assigned and/or discussed in class this semester.

2. Class participation (To assess PB 21, 22, and 41: For the weeks the articles listed above are assigned: 10 points total): Each student is required to read the articles assigned for the week and bring at least one question or comment related to each article (e.g., What are possible measurement errors when teachers assessed their students' progress?; How may the availability sampling used in the study limit the generalizability of the findings?) to class to be discussed. (The written questions must be submitted to the professor at the beginning of the class, but the student needs to keep a copy for discussion in class.)
3. Two-person evidence-based practice review paper (To assess PB 21, 22, and 41: 10 pages for text only, double-spaced: 25 points for the paper and 5 points for class presentation: Due: 4/5/11): For this paper, two students are required to team up to conduct a comprehensive literature review. The literature review needs to focus on the question **“What intervention, program, or policy has the best effects for a chosen problem?”** Refer to the guidelines in section VIII. 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. Each dyad must attached a paragraph or two describing the work each member did to produce the paper. In case the work load was questionably unbalanced, the instructor may assign a lower grade to the individual. On the paper due date, each group will have a 5-minute presentation of its work to the class.
4. Four-person group research proposal (To assess PB 22 and 41: 12-15 pages for the text only, double-spaced; Due: 5/8/11) and class presentation during the last week (5/3/11) of the semester (25 points for the written proposal and 5 points for class presentation): For this assignment, a 4-person student group is required to write up a plan to conduct a research project that will **evaluate a program/service/intervention** for a chosen problem. Each group may use the same problem that they focused on in Paper 1--the EBP paper. (That is, two dyadic groups that reviewed CBT as an effective intervention for depression in adolescents may form a group and work on a proposal for a pilot study to examine how a short-term CBT may/may not work for depressed GLBT youth served by an agency in town.) 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. Refer to the guidelines in section VIII. In addition to the group research proposal, each group will have a 15-minute presentation of its work to the class. This presentation will be graded in and by itself. 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 before the group submits the final version a week later. Since all the group members will receive the same points based on the grade of the group project, it is very important for all the group members to work together. In case any group member has not done his/her share of responsibilities, the other group members should send the professor a memo detailing the individual's lack of contribution. Upon receipt of such a memo, the instructor may assign a lower grade to the individual.

## 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 will 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**

**Class Attendance and Participation Policies:** It is important for social work practitioners to be punctual in both meeting deadlines and in attendance. Thus, students are expected to attend all classes, if at all possible. Students are permitted **one** excused absence. A student will be considered absent if she or he arrives more than 15 minutes late to class or does not come to class without medical documentation. Students who miss two classes, without medical documentation, during the semester will lose 3 points, those who miss three classes will lose 6 points, and those who miss more than three classes will lose 10 points. Leaving class early will be counted as an absence unless the student provides a reasonable cause for doing so in advance 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.

**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. (If at all possible, please turn in paper copies of assignments. 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 (NON)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. 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 Sudoku and other games) will be asked to leave the classroom.

## **VII. Course Schedule**

<b>Date</b>	<b>Description</b>	<b>Text/Readings</b>
Week 1 1/19/11	Introduction to course Introduction to evidence-based practice and policy	Rubin & Babbie, Ch. 1-2 Read description of <a href="http://www.campbellcollaboration.org">www.campbellcollaboration.org</a> and <a href="http://www.cochrane.org">www.cochrane.org</a>
Week 2 1/26/11	More on evidence-based social work practice and policy; Conceptualization; Development of research	Rubin & Babbie, Ch. 3-6

	hypotheses; and operationalization; Formation of teams for paper assignments	
Week 3 2/2/11	Levels of measurement; Reliability and validity in measurements; Sources of measurement error	Rubin & Babbie, Ch. 7,8
Week 4 2/9/11	Causal inferences in group designs/criteria for inferring effectiveness; Introduction to experimental/quasi-experimental designs	Rubin & Babbie, Ch. 11
Week 5 2/16/11	Critical appraisal of experimental designs: Statistical significance, effect size, clinical significance <b>Questions about articles due (See #2 in Section IV above).</b>	Fraser et al. (2004); Padget et al. (2006); Gellis et al. (2008)
Week 6 2/23/11	Critical appraisal of quasi-experimental designs <b>Questions about articles due</b>	Esbensen et al. (2001); Rodriguez & Webb (2004);
Week 7 3/1/11	<b>MID-TERM TEST (&lt; an hour)</b> <b>The remainder of the class time should be utilized by the dyad for EBP paper.</b>	
Week 8 3/8/11	Critical appraisal of systematic reviews and meta-analysis <b>Questions about articles due</b>	Hoffman & Smits (2008); Lundahl et al. (2010)
Week 10 3/22/11	Single-subject designs; Introduction to surveys and interviews; <b>Questions about articles due</b>	Rubin & Babbie, Ch. 12;9 Bradshaw& Rosenborough (2004); Brophy (2000)
Week 11 3/29/11	Introduction to sampling; Analyzing available records	Rubin & Babbie, Ch. 10;15
Week 12 4/5/11	<b>Paper 1 due; Paper 1 class presentation</b> Ethics and Social Work research: At whose expense? Viewing of documentary: The Deadly Deception;	Rubin & Babbie, Ch. 16 <a href="http://www.utexas.edu/research/rsc/humanresearch">www.utexas.edu/research/rsc/humanresearch</a>
Week 13 4/12/11	Qualitative research; Critical appraisal of qualitative and mixed methods research methods; <b>Questions about articles due</b>	Rubin & Babbie, Ch. 14 MacMaster et al. (2009); Edmond et al. (2004)
Week 14 4/19/11	Critical appraisal of non-experimental quantitative studies (surveys and others); PASW introduction (at the IT classroom) <b>Questions about articles due</b>	Pasupuleti et al. (2009); DeRigne (2010)
Week 15 4/26/11	<b>WRAP-UP TEST (coverage will be those following the mid-term test) (The rest of the class time will be used for a meeting of group members for the group research proposal.)</b>	
Week 16 5/3/11	Presentation of group research proposals	
5/8/11	<b>Group Research Proposal due 5:00 pm: Bring the proposal to the instructor's office.</b>	

### **VIII. Description of Assignments and Suggested Formats:**

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

For each test, there will be 30 (0.5 point each) multiple-choice and true-false type questions. The professor provides opportunities for many in-class practice tests. The test questions will resemble the questions in the in-class practice tests.

***Guidelines for a Dyadic Evidence-Based Practice Review Paper (10 pages for text, double-spaced; please use section headings in your paper):***

The purpose of this paper is to provide students with opportunities to conduct a comprehensive review of literature to identify **the intervention, program, or policy that has the best effects for a chosen problem.**

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

**Introduction/ Overview of the target problem (1 page; 3 points):** Briefly state the purpose of the paper and then provide an overview of the target problem (of a real client or a fictional client or a group of clientele that you make up or a real or made up macro situation) related to social work practice to which the rest of your EBP paper will apply. (Since all of you are or will be in your practicum sites, it would be beneficial for you to choose a problem of the clientele that you are working with or expected to work with as an intern. Please use 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. A few examples of problems might be: abusive parents (prevention or treatment), traumatized children or adults, war veterans with PTSD, welfare 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.

**Description of the intervention, program, or policy that you have identified as having the best effects (1.5 pages; 4 points):** In this section, you need to describe the identified evidence-based intervention for the described clinical or macro level target problem. 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.

**Search methods and criteria (1 page; 3 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 in question. These criteria should reflect appropriate implementation of all Steps of the Evidence-Based Practice process (as described in class and in the required/recommended texts on evidence-based practice). Information discussed in the text and in class will show what is meant by the “best” evidence that fits a particular client, problem, or situation.

**Results (5 pages; 12 points):** (a) 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 client or situation 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. (b) 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.) (c) 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.

**Intervention plan (1.5-2 pages; 3 points):** So, given the scientific evidence of effectiveness of the identified intervention, how would you apply/adopt the intervention for your target problem? Explain/justify your intervention plan based on the evidence you have found in your review.

***Important – Do Not just select an intervention plan in advance and then restrict your literature review exclusively to that intervention. Instead, review recent outcome studies on whatever interventions have been tested for your selected problem, and then select and describe the chosen intervention based on that review.***

### **References:**

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.

***Guidelines for a Group Research Proposal (12-15 pages, double-spaced;*** please use section headings in your proposal):

The purpose of this research proposal is to provide students with the opportunity for application of their learning in research method by planning a small-scale 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 (please remember that for this section you can apply the literature review that you conducted for the EBP paper); (3) choice of 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; selection of measures of outcomes and other variables; intervention/delivery fidelity monitoring methods; and data collection methods); (4) data analysis 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.

Some examples of problems/issues that students in previous years focused are: Iraqi war veterans with PTSD; youth gangs; depression in older adults (focusing on Katrina evacuees); food insecurity in low-income neighborhoods; supportive services for emancipated youth (from foster care); substance abuse; post-adoption adjustment; runaway youth; parental skills deficits; teen pregnancy; and domestic violence.

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

**Introduction (1 page; 2 points):** Describe the purpose of the study and the specific research question(s) that you will be examining. Then, describe the significance of the chosen questions to evidence-based social work practice with reference to one or a few of the following criteria: (a) Adding to the knowledge base for evidence-based practice by testing the efficacy or effectiveness of promising interventions; (b) Testing efficacy or effectiveness of existing interventions for a critical or underserved population (e.g. rural older adults, racial/ethnic minority groups, GLBT groups); and (c) has implications for the practical and effective solution of a specific problem(s) that is prevalent.

**Literature Review, Theoretical Framework, and Hypotheses for the Evaluation (2-3 pages; 6 points):**

For literature review, what is the essence of the previously published works relevant to this contemplated evaluation? What is the current state of our knowledge about the efficacy and effectiveness of the intervention on the outcome(s) that you plan to focus on? What are major methodological strengths and deficits of the previous studies? In which areas is essential knowledge lacking for the evidence-base of the intervention? You are not expected to make an exhaustive review of the literature -- perhaps 8-12 articles will be adequate. One to three non-research articles are acceptable out of the 8-12 chosen.

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.

State your evaluation hypotheses. (e.g., A 12-week cognitive behavioral therapy will be more efficacious than usual care [case management as usual] in reducing depressive symptoms by 50% 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.

**Research Design (6 pages; 12 points):**

**Design:** (a) Describe the best research design that can be used (e.g., two-arm quasi- or true-experimental; mixed-method design; longitudinal survey/interview design); (b) 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.

**Program/service/intervention:** (a) 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?

**Study site(s) and sample inclusion/exclusion criteria, subject recruitment, enrollment, and retention in the study:** 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?

**Measures and data collection:** (a) 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; (b) 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.

**Data Analysis; Expected Findings, and Implications (2 pages; 1 point):**

**Data analysis:** Discuss applicable coding. How will you analyze your data and test your hypotheses? If applicable, which statistical tests will you perform? (For this section, please refer to the analysis methods sections of the research articles—especially those that used experimental designs-- that we reviewed in class.)

**Expected findings:** What do you believe you will find and why?

**Implications of the study:** 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 that you have already identified in the previous sections. How will you disseminate your study findings?

**Project Time Line and Budget (1 page; 1 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.

**References (1 point):** 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 (2 points):** Any document you consider important, copies of survey questionnaire, interview schedule, and/or measurement instruments. Label each of them as a separate appendix. If you cannot find a hard copy of any instrument (as some authors require payment for the copies), please attach a copy of any on-line description of the instrument that you can find or an article that described the instrument.

**IX. Bibliography (Recommended readings):**

- Campbell, D. T. & Stanley, J. C. (1963). *Experimental and quasi-experimental designs for research*. Chicago: Rand McNally.
- Cook, T. D. & Stanley, J. C. (1979). *Quasi-Experimentation: Design and analysis issues for field settings*. Boston: Houghton Mifflin.
- Corcoran, K & Fischer, J. (2000). *Measures for clinical practice (Vols I and II)*. New York: The Free Press.
- Gibbs, L. & Gambrill, E. (1999). *Critical thinking for social workers* (revised edition). Thousand Oaks, CA: Sage.
- Glisson, C. (2007). Assessing and changing organizational culture and climate for effective services. *Research on Social Work Practice, 17* (6), 736-747. Available: <http://rsw.sagepub.com/archive/>
- Herek, G. Kimmel, D. C., Amaro, H., & Melton, G. B. (1991). Avoiding heterosexist bias in psychological research. *American Psychologist, 46* (9): 957-963.
- Kish, L. (1965). *Survey Sampling*. New York: John Wiley.
- Martsch, M. D. (2005). A comparison of two group interventions for adolescent aggression: High process versus low process. *Research on Social Work Practice, 15* (1), 8-18.
- O'Hare, T. & Sherrer, M. V. (2005). Assessment of youthful problem drinkers: Validating the drinking context scale (DCS-9) with freshman first offenders. *Research on Social Work Practice, 15* (2), 110-117.
- Padgett, D. K. (1998). *Qualitative methods in social work research*. Thousand Oaks, CA: Sage.
- Rubin, A. & Babbie, E. (2008) *Research methods for social work* (6<sup>th</sup> ed.). Belmont, CA: Brooks/Cole.

Strauss, A. & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. Newbury Park, CA: Sage.

Thompson, L. (1992). Feminist methodology for family studies. *Journal of Marriage and the Family*, 54, 3-18.

Tyson, E. H. & Glisson, C. (2005). A cross-ethnic validity study of the shortform assessment for children (SAC). *Research on Social Work Practice*, 15 (2), 97-109.

Unrau, Y. A., Gabor, P. A., & Grinnell, R. M. (2001). *Evaluation for human services*. F. E. Peacock

### **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 Bundeck, 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 measurements 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.