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Serving Seniors
Tele-health project brings life-changing mental health services to older adults with the simple touch of a button—and a lot of passion from professor Namkee Choi.

Survivors’ Voices
Professor Marilyn Armour’s recent study on the ultimate penal sanction in Texas and Minnesota lets us listen and learn from homicide victim survivors’ experiences.

Viewpoint

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A few Sundays ago I was at Ginny’s Little Longhorn Saloon on Burnet Road enjoying the live country music, watching patrons dancing the two-step, and noticing the Longhorn paraphernalia everywhere. After Ginny’s, I went for a bite at one of the food trucks parked close to campus, on East 26th Street. My Sunday could not get more Austin than this.

The city reports that about one hundred people move into the Austin area everyday. Motivations include great music, fantastic food—even if delivered from a truck window—a booming tech industry, and of course, our world-class university. As a recent transplant who already feels like a local, I love Austin because it allows you work hard and play hard.

Twice a year, the Utopian brings you some of the hard work that we do at the School. We are proud of the talent and dedication of our faculty, whose innovative research enhances individual, family, and community well-being in Austin and beyond. This issue looks at the work of Namkee Choi and Marilyn Armour, veritable examples of public-spirited research that transforms lives and fulfills the university’s promise that “what starts here changes the world.” Professor Choi is producing needed knowledge in the cutting-edge area of tele-health, and at the same time is bringing needed mental health services to homebound seniors in Central Texas. Professor Armour has just completed a groundbreaking study on the impact of the ultimate penal sanction on homicide survivors in Texas and Minnesota that, for the first time, lets the voices of survivors be heard.

We are also hard at work to serve social work professionals and advance the key areas for opportunity we have identified for our School. Military social work is one of those areas, and we are proud to have sponsored one of the most comprehensive training conferences on this subject. The need for social workers in military settings is set to grow as troops return from overseas postings—the Department of Veterans Affairs has recently opened a new outpatient clinic in Austin that is the largest in the country. We want to make sure our profession is ready to serve military veterans as well as active-duty members and their families.

One can’t talk about the work we do at the School without mentioning Mary Velasquez, who has recently stepped down as Associate Dean for Research and Director of the Center for Social Work Research. Thanks to Professor Velasquez’s tireless efforts for the past seven years, we have a top-notch research infrastructure and we have become nationally known as leaders in health-related research.

This reputation has, no doubt, been instrumental in recruiting some of the country’s brightest new researchers and educators. We are thrilled that, among those moving into the Austin area everyday, there are five new faculty members joining us this year. Associate Professor Esther Calzada comes to us from New York University School of Medicine, bringing with her great expertise on early development of Latino children. Assistant Professor Angela Nonaka, whose work focuses on language socialization and Deaf studies, came from the university’s Department of Anthropology. Fresh from a postdoctoral fellowship at Brown University, Assistant Professor Chris Salas-Wright will enhance the School’s research on the etiology and prevention of adolescent substance abuse. Assistant Professor Ahmed Whitt, who arrived from The University of North Carolina at Chapel Hill, adds to our expertise on adolescent mental health and behavioral outcomes. Assistant Professor Susanna Snyder joined the School from the Episcopal Divinity School in Cambridge, MA, bringing her expertise on the area of forced migration and faith-based organizations. Not new to Austin is Professor David Springer, who is rejoining us after serving as Dean for a year at Portland State University in Oregon, and who remains a member of UT Austin’s Academy of Distinguished Teachers.

For all the hard work we did during the past semester, we also found time to play and gather together to recognize and celebrate our alumni and friends. Your support and loyalty enable us to lead social work practice and research, and to produce professional social workers that are among the finest in the nation. And thanks to your generosity, we had much to celebrate. Our good friends Norma and Clay Leben have established a Professorship in Child and Family Behavioral Health that enables us to continue leading in the field of play therapy methods. The St. David’s Foundation renewed its trust in our work with a grant to the GRACE program that will fund fellowships for MSSW students specializing in gerontology. Thanks to the Amherst Foundation, we now have an endowed presidential fellowship for MSSW students interested in the field of addiction and recovery. These are a few salient examples of the generosity of our alumni and friends who make our work possible. We are deeply grateful to all of you who care about and support the School.

Sincerely,

Luis H. Zayas, Ph.D.
Dean and Robert Lee Sutherland Chair in Mental Health and Social Policy

From Dean Luis H. Zayas
Our Neighborhoods Affect Our Food Choices and Our Health

by Catherine Cubbin

We know that conditions within our homes are important for our health. We might be less aware of the fact that neighborhood conditions can also have major health effects. Neighborhood environments can be overtly hazardous—for example, polluted or crime-ridden. They also can severely limit the choices and resources available to individuals. For example, an individual’s ability and motivation to exercise and avoid smoking and excessive drinking can be constrained by living in a neighborhood with no safe areas for exercise, intensive alcohol and tobacco advertising, and plentiful liquor and tobacco stores. By the same token, neighborhood environments can encourage healthy behaviors with elements like sidewalks and playgrounds, good schools and employment opportunities, adequate police protection, and efficient transportation.

A neighborhood’s ability to promote health is closely related to poverty and segregation. It might surprise you that the number of people affected by poor neighborhood conditions in the United States is quite large: nearly one fifth of all Americans live in neighborhoods with high concentrations of poverty. This number rises to nearly half for African Americans while it’s only one in ten among Whites. Even among families with similar incomes, African Americans and Hispanics live in neighborhoods with higher concentrations of poverty than Whites.

Food access is a primary example of how a poor neighborhood can hinder health. In the United States, we are paying increasing attention to lack of access to healthy, affordable foods. We have good reasons to be paying attention to this issue: over one-third of American adults are obese, and 15% of households are food insecure.

Research on food access has shown that, for example, proximity to supermarkets—which typically sell fresh produce—is linked with lower obesity levels. Conversely, proximity to small convenience stores—which generally sell cheap foods high in fat, salt, and sugar—has been linked with higher obesity levels. People with low incomes in rural areas face additional challenges, such as limited selection and transportation, higher prices, greater distances, and lack of nutritional information.

Texas has one of the highest obesity levels of any state, and higher than average levels of food insecurity. As part of the effort to stave off obesity, Texas has participated in two initiatives from the Centers for Disease Control (CDC) that seek to improve community health. Texas Putting Prevention to Work, a program implemented by Texas AgriLife Extension, was designed to develop statewide utilization of schools as sustainable, central community access points for fresh fruits and vegetables and safe places for free physical activity. In our evaluation of the program, we found that half of all parents surveyed in six low-income, rural towns reported that they were food insecure, and that food insecurity was significantly associated with their obesity levels. One parent described her situation this way: “I’d like to have more fruits in my kitchen so that I could change my kids’ lifestyle, but because of the economy most of the time I opt to buy the cheaper food that goes further.” Her comment illustrates that economic hardship constrains parents’ ability to provide healthy food for their families.

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Texas is currently participating in the CDC’s Community Transformation Grant (CTG) program, which is designed to improve community health through tobacco-free policies, active living and healthy eating, and clinical preventive services to prevent chronic disease. Texas AgriLife Extension is implementing a CTG in a primarily rural, Hispanic county with high poverty levels on the U.S.-Mexico border. The strategies related to food access include a mobile farmer’s market that sells locally grown produce and accepts SNAP benefits, community gardens and park
improvements, and a strong coalition of committed community members representing multiple sectors, including government, business, health care, and school districts. We conducted a needs assessment for this program and found that most of the county could be considered a “food desert,” that is, an area that lacks access to affordable, healthy food; few tobacco control policies were in place; many of the few existing parks were in need of major improvement; and significant barriers existed to accessing needed preventive services. These are all needs the coalition is currently addressing and that we will evaluate in the coming years.

Our evaluation efforts highlight the significant challenges that people in poor and rural neighborhoods face when trying to make healthy choices. Some of the lessons we have learned are that people are not generally aware of the neighborhood-level constraints that make it hard to be healthy, and tend to see health as only an individual choice. We have also learned that strategies to improve community health must be both sustainable and tailored to each community. Finally, strong commitment from policymakers, the private sector, and individual community members is critical for the success of any initiative aimed at improving community health through making healthy foods accessible to everyone.

Focus: Food Justice

Food access is an issue dear to the School’s alumni as well as its faculty. We talked with alumnus Max Elliott, MSSW ’12, the Executive Director and co-founder of Urban Roots, an Austin nonprofit that uses sustainable agriculture to transform the lives of young people and increase access to healthy foods. During the spring and summer months, East Austin high-school students receive paid internships to work at the Urban Roots sustainable farm. Urban Roots donates 40% of the harvest to local food pantries and soup kitchens, and sells the rest at local farmers markets, wholesale, and through a Community Supported Agriculture (CSA) program. For Max, it’s all about food justice.

How did you become interested in food access?

I have been interested in community engagement at least since high school. After working on a farm that had a strong educational component, I realized that food and farming were great tools to bring people together, celebrate cultural diversity and food traditions, and give people critical skills and empowering opportunities. As I saw the food movement grow, I also realized that there was a large segment of the population being left out. A turning point in this realization was my work in a community garden in New Orleans, in the Lower Ninth Ward. For many of the community residents, these were the only fresh vegetables that they were going to eat. They were growing food not as a hobby, but for sustenance. So, my interest in food access was really driven by the desire to ensure that everybody has access to healthy, sustainable raised, and fresh food. Food justice is a term that I use a lot.

How was Urban Roots started?

I was working in an afterschool garden project for a middle school, and I quickly realized that there was a great opportunity to scale up the impact. We did a lot of groundwork before launching Urban Roots. We researched best practices around the country; we held a community meeting to pose the project to local farmers, educators, and hunger-relief advocates; we also held focus groups with youth from East Austin schools. Thanks to all this prep work, when we got funding we already had partners with early buy-in.

How did your social work degree prepare you for the work you are doing?

It has been really essential. When I was working in New Orleans I realized that my training as a horticulturalist was not enough. I could teach people how to plant and to compost, but what the community really needed was developing capacity and leadership, and engaging youth. I was really doing social work, and I felt very unprepared. The clinical skills I acquired during my MSSW are at the core of the work I do at Urban Roots. As Executive Director, I developed a very cooperative and collaborative leadership style. At the farm, clinical skills are key to engage with the youth.

Learn more about Urban Roots and find out how to support it at www.urbanrootsatx.org


Dr. Catherine Cubbin is an Associate Professor at the School of Social Work and a Faculty Research Associate at the Population Research Center at The University of Texas at Austin.
Meeting the Mental Health Needs of Homebound Seniors Through Technology

School’s professor Namkee Choi marries research and community services in tele-health project

by Karen Kalergis

Technology is everywhere. You see the ubiquitous iPad, smart phone, or tablet in the hands of the five year-old in his car seat, the 15-year-old texting friends and the 35 year-old keeping up with the office while vacationing. In an innovative project, Dr. Namkee Choi is taking advantage of the widespread availability of technology to bring needed mental health services to homebound older adults.

Long before she joined the faculty at The University of Texas at Austin School of Social Work, Choi volunteered for Meals on Wheels, a federally funded program that delivers hot meals to homebound seniors. Her volunteer work with this program dates back to 1994 and continues to influence the research she does today as the School’s Louis and Ann Wolens Centennial Chair in Gerontology.

Choi’s volunteer work involved delivering meals as well as doing grocery shopping for seniors, a task she preferred because it gave her more time to sit and talk with her clients.

The idea for what would become her tele-psychotherapy project came from one of those conversations, during which Choi realized that she was delivering much more than a hot meal or groceries.

“Volunteering for Meals on Wheels really opened my eyes about the level of depression and social isolation that these older adults are experiencing,” Choi recalls. “The stories I heard were heart-breaking.”

Studies Choi has conducted supported what she saw first-hand as a volunteer: medically ill, homebound older adults are more vulnerable to depression than their mobility unimpaired peers. Isolation and multiple stressors, Choi explained, can contribute to the problem.

“When I say isolation, I mean they are isolated from meaningful social engagement or social activities, even if there are a lot of people coming to their house, such as home healthcare workers, other service providers, informal caregivers or helpers. Older adults depend on other people for so many things, but it can be very stressful to have all these helpers in your home all the time.
“Older adults really need great coping skills for their multiple life stressors. For low-income older adults, there is also financial stress. Daily self-care activities and keeping up with medical appointments for their chronic illnesses require lots of time and energy. Some also have family issues and strained relationships,” Choi explained.

Studies indicate that older adults who take multiple medications for their conditions prefer talk therapy to antidepressant medications. However, there is a stigma and discomfort attached to seeking psychotherapy.

“One of my first grocery-shopping clients in Austin, an 86-year old woman, kept telling me, ‘I am so depressed.’ But she was reluctant to go to any clinic-based therapy because she didn’t want to be seen doing so. In any case, she could not drive and could not afford other transportation, so she really had no way of getting to a therapy session,” Choi reflected.

Options that involve either transporting homebound older adults to clinics or the clinicians to homebound older adults’ homes are costly, and in-home psychotherapy programs are not widely available in most communities.

“There are some Internet-based, self-guided depression interventions or support groups that people can do on their own. However, low-income homebound older adults seldom access those because many of them do not have the Internet connection or sufficient Internet operational skills,” said Choi. “Most previous tele-mental health services were clinic-based and the patient still had to go to a clinic to see a psychologist or a psychiatrist who was located offsite.”

When Choi started thinking about how to help depressed homebound older adults, she was really keen on bringing the technology into the home.

“We have this wonderful technology,” she said. “We could easily bring it into their houses, and they would be able to participate in treatment in the privacy and comfort of their own home.”

Choi applied for a grant from the National Institute of Mental Health (NIMH), and in 2009, she was awarded a $680,000 grant for a 3-year project. The purpose of the grant was to test the feasibility and efficacy of tele-health Problem-Solving Therapy (tele-PST), compared to in-person PST and telephone support calls for depressed, low-income homebound older adults. This was the first study that evaluated delivery of PST via an in-home videoconferencing method.

In addition to NIMH funds, Choi received funding from the St. David’s Foundation and the Roy F. and Joann Cole Mitte Foundation that allowed her to include more clients in the study.

The technology Choi had in mind for tele-PST sessions was quite simple and easy to use. Participants were loaned laptop computers with freely accessible Skype video call installed and prepaid USB 3G wireless cards. They were also provided with a headset so their conversation could be more private. Sessions began with the therapist making a phone call to the participant to ask him or her to turn on the computer, so that the tele-PST session could start.

“PST is really a very simple evidence based treatment that many people didn’t even know about. By making it more available to people with our tele-PST project, more people benefited from its effectiveness.”

When six tele-PST sessions were completed, the laptop computers were moved to the next group of participants. Costs for the equipment and wireless service were covered under the NIMH grant.

Problem-Solving Therapy (PST), the intervention that Choi selected, is evidence-based and well-suited to low-income homebound older adults with multiple life stressors. PST, originally developed in England in the 1980’s, is grounded in the cognitive-behavioral theory of mental health. PST stems from the theory that people with deficits in problem-solving skills become vulnerable to depression because such deficits lead to ineffective coping attempts under high levels of stress.

During the 1990s, PST was adapted for delivery in fast paced primary care settings, where it could be delivered in four to six sessions of 30-60 minutes each. Choi’s collaborator, Mark T. Hegel from the Geisel School of Medicine at Dartmouth, is one of the first proponents of using PST in primary care settings, and developed training programs for its use in the United States. Hegel trained the two graduates from the School of Social Work who conducted the PST sessions for Choi’s project.

Participants for the study were recruited through referrals from case managers of Meals on Wheels and from four other aging-service agencies serving low-income, disabled older adults in central Texas. The main inclusion criteria were that they be homebound with moderately severe and severe depressive symptoms. Those with a high suicide risk, dementia, bipolar disorder, and/or presence of co-occurring alcohol or other substance abuse were excluded from the study, because PST has no or limited evidence base for these conditions.
Getting seniors to seek help for their depression first meant overcoming their sense of stigma related to mental illness. The program was referred to as "wellness at home." Choi also tried to overcome the stigma of depression in her conversations with prospective participants.

“I am a proponent of saying it out loud,” she said. "Depression is no different than any chronic disease … and it's treatable! I did telephone screening for most prospective participants, and I would say, ‘Name one person that you know who didn't have any depression in life.’ And the clients appreciated that. This is part of life in this earth so you don’t have anything to be ashamed about.”

During her calls, Choi saw that the use of technology could be a barrier. When the study was described to potential participants, being part of the tele-PST group was not first choice for many.

“I would tell them that they would be assigned to one of these three interventions: Tele-PST, in-person PST, or telephone support. And most of the people told me they hoped they got the in-person PST.”

Choi said that about half of those assigned to tele-PST had initial resistance to the technology, but that changed pretty quickly and almost all of tele-PST participants loved tele-delivery.

The study had a total of 214 participants, ranging in age from 50 to over 80. The 50-64 age group was included because Choi’s previous study found that a higher proportion of this younger group of homebound adults than those 65 and older suffered from depression and lack of health insurance.

The study ran for 36 weeks for each participant, with follow-up assessments administered at 12, 24, and 36 weeks. A modified Treatment Evaluation Inventory (TEI) was used to compare acceptability of tele-PST to that of in-person PST. The TEI scale measured items such as acceptability of the treatment, likeability of the procedures used, and negative aspects, such as any side effects or discomfort with the type of treatment.

Findings showed that both groups liked PST itself, with the tele-PST group reporting slightly higher TEI scores than the in-person PST group. The difference in TEI scores was statistically significant.

“First of all, they really liked the convenience of tele-PST,” said Choi. “They said, ‘Oh I don’t feel guilty about not cleaning my house. I can do it in my pajamas and I can still see the therapist as if she’s sitting right next to me.’”

The tele-delivery also addressed privacy issues.

“They said tele-PST was much better than going to a clinic where a lot of people may see them come in for services,” said Choi.

Still the biggest bonus of tele-PST was the technology itself, or what Choi calls the “cool” factor. Comments from study participants showed that they loved using the computer and the video conferencing system.

Results also showed a significant reduction in depression symptoms. Choi found great courage in the words of the participants’ themselves.

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**What Tele-PST Participants Said**

“I was very excited about receiving the computer and learning to use it. This was very new to me, and I am proud of myself. The computer therapy gave me confidence to try new things, and I was able to text my granddaughter back when she sent me a text message! … I feel empowered from the therapy and am able to repeat the PST steps and feel very comfortable using them when I encounter a problem.”

—84 year old woman

“Tele-PST was great. Didn’t have to go anywhere, and could do it at home. A lot of people that don’t know about this that need help could really use this help.”

—63-year old woman

“I enjoyed it. I looked forward to it. I loved the computer part … I was skeptical at first, but found it worked great.”

—67-year-old woman

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“I was just so awed by feedback from these older adults,” Choi explained, still marveling at the impact of the study. “About 90 percent of them said that it was a life changing experience for them. Some people cried as they talked about how much they’ve changed and how PST helped them get out of depression.”

The university-community link was also strengthened by the project as the participant feedback reached case managers and service providers at the agencies through which recruitment was done.

“Some service providers were initially hesitant when I approached them about collaborating with the university on this project,” Choi explained. “But they’ve changed. Their clients were saying to their case managers, ‘You remember you talked to me about doing that research project and you don’t know how it changed my life.’”

“All case managers who referred their clients to the study said hearing that from the clients was the turning point, and they want to see the project continue. So we have the buy-in of the clients and the social service providers and that’s exciting as we look to our next project.”

The fact that the project provided services in the process of conducting research was a plus.

“Dr. Roberto Rodriguez from the St. David’s Foundation told us that they don’t usually fund research projects,” Choi remembered. “But he said that the tele-PST project married the research with the service so that it had an immediate positive impact in older adults’ lives.”

Choi’s next step is a logical one. Since the tele-PST service has its roots in her work in the community, she is looking for funding that can help more aging agencies make this service available to their clients. Choi is planning to apply for funding to embed tele-PST therapists in aging-service agencies for increased effectiveness, efficiency, and acceptability. That approach can make a major difference on how many people can be exposed to and thus benefit from tele-PST.

“It would be much more effective and efficient,” said Choi. “Effective because the PST therapist will work directly with the case managers who know a lot more about the individual clients. We can even shorten the time to five rather than six sessions, because they’d have the case manager assessment as a starting point.”

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As Choi plans for another round of bringing services to people through technology, one can’t help but wonder if she still volunteers for Meals on Wheels.

Choi laughs as she responds. “I only stopped working directly with older adults delivering meals or helping them with grocery shopping last summer because I had to write this big grant.”

It doesn’t matter that she isn’t knocking on the doors of seniors any more. Choi’s work has brought life-changing services to them, with the simple touch of a button, and a lot of passion for making technology be part of the solution. ✨

“My work is based on actual contact with older adults and community volunteering, so it’s more than work to me. It’s my passion and it’s coming from my heart.”

— Namkee G. Choi, Professor and the Louis and Ann Wolens Centennial Chair in Gerontology
Research Lets Voices of Homicide Victim Survivors be Heard

by Karen Kalergis

Marilyn Armour, a faculty member and University Distinguished Teaching Professor, has completed a study assessing the ultimate penal sanction on homicide survivors. The two-state comparison followed families of homicide victims in Texas, a death penalty state, and Minnesota, a life without the possibility of parole (LWOP) state. Her study lets us hear the voices of victim survivors—those most affected when a homicide occurs and a sentence is rendered. In this interview with her, we learn about their experience and what helped them heal.

UT: You’ve done research on homicide survivors for a long time. What led you to do this particular study?

MA: Homicide survivors tend to be marginalized. They play on the sidelines. Often, they are not allowed in the court room because they may be called as witnesses. Somebody once said to me, “We’re bit players on a stage in a play that is about our lives.”

That kind of scenario can be very hurtful to survivors. But also hurtful is the linkage we make between the offenders’ sentence and what we think helps survivors. The death penalty in particular but also LWOP gets argued today as necessary because they provide a therapeutic benefit to survivors. We say we need to do this for them or in their name or the victim’s name. So we cloak society’s call for retribution contending that the punishment will be beneficial to the survivors. “It’s the least that they deserve given what they have been through.” We put this on their backs with the justification that it will bring them closure.

Most homicide survivors will tell you almost to a person that there is no such thing as closure. They are being assigned a role, if you will, which fundamentally is not reflective of where they actually are. So it seemed time to add the survivors’ voice and to ask them directly how the offenders’ punishment affects their lives. What type of impact—positive, negative, neutral—does it really have? The impetus for the study was, let’s stop making conjecture and go to the survivors themselves.

UT: How did you structure the project so you could gather that information?

MA: In order to compare the impact of the ultimate penal sanction in two states, I had to look at impact very broadly, covering the length of time during which survivors were involved in the criminal justice process. In Texas, that’s on average 10 years 8 months, and includes the trial, appeals process, and execution. And then we needed to add some time to pick up the post-execution experience. It is not enough to just look at the time of the execution and ask “How was it for you?” How people experience that execution is conditioned to some extent by what it has been like for them between conviction and execution. And it is also important to ask “What happened after the execution?” That’s all impact.

In Minnesota the time trajectory is very different. They have the trial and the appeals and that’s it. Once the appeals occurs, and the original finding is upheld, that ends it. The offender is in prison for the rest of his or her life. For most of the Minnesota participants in the study, they were done in about two years. So to compare impact we had to look at the same time points in both states, even though Minnesotans had completed the process sooner.
We did interviews with victim survivors all over both states. We administered a measure of what’s called “complicated grief,” and asked participants at different points in time about their reactions to their loved one’s death. Then we compared Texas and Minnesota victim survivors at those same time points, for example, 5 years after the death, 10 years, etc.

**UT:** You said that it is important for us to hear the voices of victim survivors. What did they say?

**MA:** People in both states talked about relationships with the prosecution, how they felt very well tended to in the time before the trial, particularly in Texas. Prosecutors and their staff spent a great amount of time talking with them. They felt that truly these people were their friends. They also talked about cordial relationships with the defense team, primarily in Texas. Experiences were positive where survivors felt fine about how the defense attorney responded to them in court or handled the trial, meaning they didn’t feel like the victim was put down or used as an excuse for why offenders did what they did. Those survivors had better scores on complicated grief. The same was true for positive interaction with the murderer’s family. That was a surprise. It’s not that there was lots of positive contact with the murderer’s family, but when it did happen it had a clear impact. Most of the positive contact was based on outreach from the victim survivors toward the murderer’s family. For example, the daughter of the homicide victim happened to know the sister of the murderer from high school. After the trial there were tears, hugs—obviously the victim survivor felt that justice had been done, but also felt tremendous empathy for the offender’s sister and for what her family was going through. At the same time, the offender’s sister desperately wanted to say to the victim survivor how sorry she was about what her brother had done. Based on the scores we saw, I would say that there is clearly a healing impact when there is opportunity for this kind of engagement. I think there’s wisdom in this for prosecutors and defense attorneys.

Our criminal justice system is based on an adversarial model, which is built around the idea of representing your client or representing the state as zealously as you can. This arrangement is supposed to help lift out the truth for some sort of justice to happen. But when we take that principle to such extreme that one side stands for good and the other side stands for bad, the players in the system, including survivors, can never cross to the other side without being seen as traitors.

That process creates walls so that some of what many need to happen in the middle can’t happen. This research shows that when that overlap can happen constructively, it has real healing potential. However, it very hard to get to when the adversarial system is as thick and as embedded as it is.

**UT:** What were some of the similarities you found in victim survivors in both states?

**MA:** One similarity that was very striking was the amount of engagement with the murderer in victim survivors’ minds.

“I guess we want to talk to him [the murderer] to see if what we believe is remorse is really remorse. Is he really feeling this? You know people say you forgive somebody. I know for a fact I never will . . . He definitely needs to be responsible and acknowledge his part in what happened. I guess I want that. And I think if he does that, if they let him out well . . . there’s less chance that he’s going to land back in some prison again. That’s what I hope.” — **Homicide victim survivor**

This means that, during the trial, survivors kept one eye on the murderer all the way through—how they look, how they dress, where they’re looking in the courtroom, what their family looks like, do they even have family present. Survivors have no opportunity for any engagement or interaction with the murderer nor do they want it, except when they are giving the victim impact statements. But they stay there, glued to their seats, because this may be the only time when they can observe the person who took the life of their loved one, when they can glean information from every little possible hint and nuance. After the trial, there’s no more contact other than the conversations they have in their minds with the murderer. And they have countless conversations—they wonder what their life is like in prison, they wonder if they feel remorse… The conversations go on and on.

We found that this mental engagement is pretty active. And that was true in both states. Obviously more so in Texas, simply because the legal system keeps the case alive for a longer period.
This is an important piece in terms of implications, because we don’t give much credibility to that relationship. Victim survivors are supposed to be glad that the case is over and get on with their lives. And in fact they do, but they are still engaged in conversations with the offender, because that person has become part of probably the most horrible and significant thing that’s ever happened in their lives. It doesn’t go away.

When survivors had opportunity to find out that there was some sort of remorse or that the offender was suffering in prison, this seemed to be helpful or satisfying for them.

This is impressionistic, but it says that there is this huge vacuum with no knowledge or information, no answers to questions… Survivors are hunting for the pieces that will put it together, and that’s what the conversation that goes on in their minds is all about. To me this was very powerful because again, “thou shalt not ever meet,” and yet survivors are pretty hungry for information that only the offender has, and which might begin to put puzzle pieces together.

UT: What are the implications of this study for criminal justice policy and victim services?

MA: Most of the implications relate to what we make available to survivors so that the journey is easier for them. For example, in Texas the cases awaiting execution that were 8 to 17-18 years old were all stuck in the appeals process. Survivors were in limbo waiting for findings from the Supreme Court, test results on possible mental retardation, etc. This situation of being stuck creates an extremely detrimental scenario for survivors and puts them in a position that I call “ambiguous loss.”

Ambiguous loss refers to situations where what you think you have in front of you is not quite what you have in front of you. Somebody with Alzheimer’s, visually, is still the same person that you’ve always known. But as the disease progresses, you’re not sure how much of that person is still present. That’s ambiguous loss, it doesn’t resolve itself because you can’t know definitively one way or the other. Ambiguous loss creates a nightmare for people because they can’t accurately as certain outcomes.

People who are stuck in the middle of the appeals process are dealing with ambiguous loss. They don’t know if the execution will happen at all, and they don’t know how long they have to wait to find out.

One family I interviewed was within an hour of the execution when the appeals court ruled in favor of the offender. So they are back to a new appeals process. This couple is in their late 70’s-early 80s, and in very poor health. They live with the likelihood that they will die never having seen this resolved. Their daughter, who lived through this growing up, will now inherit the unresolved saga and live with it for who knows how many years of her life.

That’s the type of impact we need to pay more attention to—how the sentence imposes ambiguous loss on victim survivors, and what survivors aren’t getting to help them move forward.

UT: You delivered the keynote address at a Restorative Justice Conference held in February by Marquette University, School of Law, which was one of the sponsors of this study. Tell us about that.

MA: The study was seen as groundbreaking because of the attention given to victim survivors, and victim survivors took center stage at the conference. For once, the prosecutors, defense attorneys, wardens, judges, and clergy who were at the conference listened to victim survivors’ experience in ways that normally they don’t have to listen to or don’t even get the chance to listen to. It was very powerful.

The conference also provided a forum to hear from all the other people who are playing in these waters related to the ultimate penal sanction. Prosecutors, judges, defense attorneys and others talked about what the impact has been for them personally and professionally.

Victim survivors and their experiences, however, were at the center of the dialogue and kept the focus on the implications of both types of punishment on survivor healing.

UT: What does the study tell us about what helps victims in their journey to healing?

MA: The study provides a platform for victim survivors to share their experience and answer that question. The key piece here is really listening to what they have to say and learning from it, instead of setting things up as a victim rights vs. offender’s rights.

When we do that, there is potential for much stronger services that support the victim survivors better in their journey. Not something based on conjecture but on what they have to live with, and the impact in their lives. There is also some room for movement in how we look at the ultimate penal sanction, and that’s good as well.

Dr. Armour’s study is available in the Marquette University Law School Review, Fall 2012. Marquette has also made Dr. Armour’s keynote available from the Restorative Justice Conference in video and podcast. See http://law.marquette.edu/rji/conferences/9-conf.html
The conference “Civilian Social Work with Veterans Returning from Iraq and Afghanistan: Implications for Practice and Education,” sponsored by the School April 11–13, 2013, was among the most comprehensive in the country on this subject. The conference was organized by Allen Rubin, the School’s Bert Krueger Smith Centennial Professor in Social Work, who has recently published a book on military social work. Keynote speakers included Drs. Eugenia L. Weiss and Jose E. Coll, who co-edited the book with Rubin, and Major Maria Kimble, Program Case Manager at Central Texas Veterans Health Care System.

“The conference was designed to give social workers skills to serve those who have served our country,” explained Liz B. Nowicki, Director of the School’s Office of Professional Development. “The growing population of active duty personnel coming back from the war zones and the number of veterans who are retiring around military bases in Texas pose a real need for services for them and their family members.”

Nowicki said one of the conference’s most popular sessions focused on how technology is being used to provide mental health services to military personnel.

The session, “Virtual Reality Exposure Therapy for Military PTSD” was taught by Albert “Skip” Rizzo, Associate Director of the Institute for Creative Technologies, and a research professor in the Department of Psychiatry and School of Gerontology at the University of Southern California.

Participants liked the mix of modern technology and clinical practice evident in Rizzo’s description of interventions that use virtual reality to immerse veterans in war-like scenarios to help address psychological trauma.

Rizzo told participants that the use of virtual reality technology dates back to 1929, when it was used in aviation to test and train piloting ability. Virtual reality has been used in clinical settings since 1994 to address simple phobias such as fear of flying or of heights. In 2013, it is being used for a wide range of disorders from addiction to autism to PTSD.

Virtual reality interventions for PTSD use a form of exposure therapy, where the client is immersed in and interacts with a 3D environment similar to that of a war zone. In the example shown at the conference, the client used computer controls to steer a jeep into a village where a bomb suddenly exploded and killed a child, thus exposing the client to traumatic material similar to what he had experienced during his deployment.

Participants remarked that the presentation was informative but intense—a reference to the very loud sound of gunfire and explosions in the distance, a reality in war zones.

Rizzo noted that many service members are part of the digital generation and have experience with the gaming technology that is used in virtual reality interventions. He speculated that this familiarity with technology might result in service members being more likely to seek treatment or find this form of treatment more acceptable.

According to Rizzo’s estimates, the military has spent more than $21 million on clinical virtual reality to treat PTSD since 2005. He noted that, as a general rule, interventions originally developed for the military eventually get to the general population, and become more cost-effective as they become available in community-health settings.

Rizzo told participants that technology is not a “doc in the box.”

“There is a need to guard against the perception that virtual reality tools are designed to eliminate the need for a well-trained clinician,” he said. “Technology does not fix anyone. It is simply a tool for extending clinicians’ skills.”

According to Nowicki, the conference evaluations show that many of the attendees walked away from this provocative session with an increased awareness of how using technology could be part of their skill-set as social workers.
School Participates in University-Wide Scholarly Exchanges with Brazil

This past summer the Lozano Long Institute of Latin American Studies (LLILAS) coordinated a series of scholarly exchanges between faculty members from The University of Texas at Austin and their counterparts in universities throughout Brazil. The exchange culminated with a keynote event in the Brazilian Senate Chambers in Brasilia that included President Bill Powers.

The School of Social Work participated in these events by co-organizing a symposium in Porto Alegre with the Pontificia Universidade Católica do Rio Grande do Sul (PUCRS). The symposium, “Social Interventions for Vulnerable Populations: Experiences in Brazil and the United States,” was attended by over a hundred PUCRS students and faculty.

Drs. Marilyn Armour, Mary Velasquez and Dean Zayas presented at the symposium in Porto Alegre, and participated in the university-wide events organized by LLILAS in Brasilia.

Longhorn Leaders Program Celebrates 10 Years

Founded and run by Dr. Michel Lauderdale, the School’s Clara Pope Willoughby Centennial Professor in Criminal Justice, the Longhorn Leaders program engages students at The University of Texas at Austin to work with at-risk middle school students, helping them to stay out of trouble and stay in school.

As the program marked its 10th year this past April, it received commendations from the Texas Legislature, the Austin Crime Commission and the Austin City Council. It was lauded at a dinner with a guest list that included city and school officials, community leaders, and UT Austin coaches.

Junior OL Taylor Doyle and middle school students at the Longhorn Leaders anniversary reception
Exceptional Service

The School thanks James Schwab for his exceptional work leading the doctoral program for the past eight years. From recruiting the best applicants to providing doctoral students with strong support and holding them to high standards, Dr. Schwab was essential in keeping the School Ph.D. program to the highest levels of excellence. During his tenure, he strived to increase the financial resources available to Ph.D. students. He devised a plan for offering top applicants a four-year financial package. Dr. Schwab, who holds the Clara Pope Willoughby Centennial Professorship in Child Welfare and directs the Child and Family Research Institute, will keep serving the School in his position as Associate Dean for Academic Affairs.

The School also extends its sincere gratitude to Mary Velasquez, who after six years of exemplary leadership has stepped down as the Associate Dean for Research and Director of the Center for Social Work Research (CSWR). Dr. Velasquez strengthened the School’s research culture and raised the profile of the School nationally. Under her leadership, external funding for CSWR grew by 73% at its peak, and research collaborations and student-training opportunities were forged with the local medical community. Dr. Velasquez will continue at the School as Centennial Professor in Leadership and Director of the Health Behavior Research and Training Institute.

New Appointments

Cynthia Franklin has been appointed Assistant Dean for Doctoral Education. Dr. Franklin is internationally known for her work in school mental health practice, dropout prevention programs and solution-focused therapy. She is Editor in chief of the Encyclopedia of Social Work. Dr. Franklin was first appointed to the School faculty in 1989, and holds the Stiernberg/Spencer Family Professorship in Mental Health.

Noël Busch-Armendariz has been appointed Associate Dean for Research. Dr. Busch-Armendariz is a distinguished scholar specializing in the areas of interpersonal violence, refugees, victims of human trafficking and asylees, and international social work. As Principal Investigator of the Institute on Domestic Violence and Sexual Assault (IDVSA), she has directed research for the federal National Institute of Justice, Office for Victims of Crime, Office of Violence Against Women, Texas Office of the Attorney General, the Texas Association Against Sexual Assault, and the Texas Health and Human Service Commission.
Faculty News

Kathy Armenta has been appointed to the Management Board of the University of Texas Elementary School (UTES). Operated by UT Austin, UTES is a research-based demonstration school in the heart of East Austin that holds a track record of success in serving urban children.

Noël Busch-Armendariz has been invited to be a full member in the National Institute of Justice’s Standing Review Panel that focuses on Violence Against Women, and includes Teen Dating Violence, Intimate Partner Violence, and Sexual Violence.

Yessenia Castro was invited to speak at the 8th Annual Texas Conference on Health Disparities, “Intersection of Smoking, HIV/AIDS, and Cancer,” held in Dallas on May 30–31, 2013.

Catherine Cubbin was awarded a Special Research Grant from The University of Texas at Austin Office of the Vice President for Research. The grant is to conduct the study “Examining Relations Between Residential Segregation, Political Empowerment, and Adverse Birth Outcomes Among all US Births from 2008–2010.”

Susan De Luca received a research grant from the Hogg Foundation for Mental Health to conduct a mixed-methods study of adolescents receiving treatment in response to suicide attempts at a large Central Texas hospital.

Monica Faulkner was invited to serve on the Implementation Task Force for the Texas Blueprint: Transforming Education Outcomes for Children and Youth in Foster Care. The Supreme Court of Texas has charged this Task Force with prioritizing the recommendations in the Texas Blueprint and developing an implementation plan.

Miguel Ferguson was featured as one of the Texas 10 in the Alcalde, March/April 2013 issue. Nominated by alumni, the Texas 10 are among the best and most inspiring professors at The University of Texas at Austin.

Rowena Fong was appointed to the CSWE Commission on Educational Policy, which is currently working on EPAS 2015. Dr. Fong was also invited to join the Board of Directors of the North American Council on Adoptable Children, a national advocacy group for children and families whose mission includes adoption support, education, information sharing, and leadership development.

Cynthia Franklin is the Editor in Chief of the online Encyclopedia of Social Work recently launched by Oxford University Press. In April 2013 she led a Mental Health Awareness Symposium organized by the Dallas Chapter of the Texas Exes.

Lori Holleran Steiker was awarded an Outstanding Faculty/Staff Award by the University of Texas Longhorn Center for Civic Engagement. She was honored at the 2013 Tower Awards Ceremony this past May.

Yuri Jang was awarded a pilot study from the UT School of Nursing’s St. David’s Center for Health Promotion and Disease Prevention Research in Underserved Populations. Dr. Jang’s project, titled, “If You Build it, Will They Come?: Feasibility of an Internet Intervention for Older Ethnic Minorities,” will explore web-based education on aging with Korean Americans.

Barbara Jones received the Social Worker of the Year Award from the Association of Pediatric Oncology Social Workers for her practice excellence within childhood cancer centers. She also received the Outstanding Education and Training Award from the American Psychosocial Oncology Society, which recognizes leaders who enhance the field of psychosocial oncology through educating and training new investigators and clinicians.

Molly Lopez was awarded a contract from the Texas Department of State Health Services with funding originating from the Substance Abuse and Mental Health Services Administration (SAMHSA). Dr. Lopez will evaluate an initiative to develop, promote, and implement effective community practices in two Texas communities for children and adolescents exposed to traumatic events.

Jane Maxwell was among the ten faculty members selected during the spring season by UT Athletics’s Professors of Excellence program. This program honors dedicated University faculty with an in-venue video-board presentation at half-times that introduces the faculty member and explains how their work and research is impacting communities on a local, national, and global scale.
Yolanda Padilla was an invited speaker at the 7th International Conference on Social Work in Health and Mental Health, in Los Angeles, California, June 23–27. Dr. Padilla has also been invited to join the Grand Challenges for Social Work Executive Committee. This is an initiative of the American Academy of Social Work and Social Welfare to define the themes that should guide social work research for the coming decade.

Beth Pomeroy was selected a 2013 Regents’ Outstanding Teaching Award Recipient. This is the Board of Regent’s highest honor to faculty members who have demonstrated extraordinary classroom performance and innovation in undergraduate instruction. Dr. Pomeroy was also selected the 2013 Social Worker of the Year by the Capital Area Branch of the National Association of Social Workers/Texas.

Michele Rountree was appointed to the newly created Council of the Status of Women Faculty at The University of Texas at Austin. Dr. Rountree was also appointed to the CSWE Commission for Diversity and Social and Economic Justice.


Sanna Thompson was an invited speaker at the 7th International Conference on Social Work in Health and Mental Health, in Los Angeles, California, June 23–27. She presented on resiliency and maltreatment as predictors of Posttraumatic Stress Disorder among homeless emerging adults.

Mary Velasquez was invited to give a keynote address at the McCombs Healthcare Initiative Symposium, “Innovation in Healthcare Delivery Systems: Focus on Social Issues,” April 11th.

**New Faculty**

Associate Professor Esther Calzada joined the School from New York University School of Medicine, where she was also the Associate Director of the Center for Early Childhood Health and Development. Dr. Calzada studies the early childhood development of Latino children with a focus on identifying malleable risk and protective factors for academic and mental health problems.

Assistant Professor Angela Nonaka joined the School from the Department of Anthropology at The University of Texas at Austin. Dr. Nonaka specializes in language socialization, sign languages and Deaf studies. She has conducted extensive international fieldwork, including experience as a researcher and lecturer at Ratchasuda College (Thailand) and Tsukuba College of Technology (Japan).

Assistant Professor Christopher Salas-Wright joined the School from Brown University, where he was a postdoctoral fellow at the Center for Alcohol and Addiction Studies. His area of expertise is the etiology and prevention of adolescent substance abuse, and he has conducted extensive research with Salvadoran youth.

Assistant Professor Susanna Snyder joined the School from the Episcopal Divinity School in Cambridge, Massachusetts. Her work is at the intersection of social sciences and theology, focusing on issues of forced migration, religion and faith-based organizations. She is the author of *Asylum-Seeking, Migration, and Church* (Ashgate, 2012).

Distinguished Teaching Professor David Springer rejoined the School after serving as Dean for a year at Portland State University in Oregon. Dr. Springer was an esteemed member of our faculty from 1997 to 2012, and we are delighted to have him back. His areas of expertise are juvenile justice systems and the delivery of community-based services to youth. His work spans across direct practice, community building, system reform, research, and leadership.

Assistant Professor Ahmed Whitt joined the School from the University of North Carolina at Chapel Hill. His research focuses on the influence of neighborhood contextual factors on adolescent mental health and behavioral outcomes.
Class Notes

What’s new? If you have personal or professional news to share with other alumni and the SSW community, please send us an email to utopian@utlists.utexas.edu

80s
Louisa Hefty, MSSW ’81, formerly Managing Director at United BioSource Corporation, is now an Independent Consultant in Washington, D.C., who works with her previous employer and other pharmaceutical companies on reimbursement and access projects.

David Banks, MSSW ’86, works as a Health Scientist Administrator for the National Institute of Nursing Research at the National Institutes of Health. He is also a Colleague Professor at the University of Maryland. Dr. Banks has published collaborative articles on blood donation, domestic violence, elder care, HIV/AIDS, and substance abuse in journals such as the American Journal of Public Health, the Journal of Black Psychology, and Transfusion.

90s
Barri Rosenbluth, MSSW ’90, has been selected as one of the six distinguished finalists for the Phyllis Richards Austin Icon for Children Award. This award is given by the Austin Child Guidance Center, an organization dedicated to improving the mental health of children and their families. Barri serves as the director and co-founder of SafePlace’s Expect Respect program.

Jacqueline Corcoran, PhD ’96, MSSW ’89, is currently working as a Professor at Virginia Commonwealth University. She has published a number of textbooks, self-help books, and works of fiction, including Helping Skills in Social Work, Research Skills Workbook, and Maiming of the Shrew. A complete list of her publications can be found at her website, www.jacquelinecorcoran.com.

Deborah Sharp, MSSW ’98, BSW ’97, works as a Senior Social Worker at The University of Texas at Austin HealthPoint Employee Assistance Program. She also has a private practice in Austin, with a special interest in Chronic and Catastrophic Illness and Disability, Grief and Loss.

’00s
Amy Mizcles, MSSW ’00, became the executive director of The Arc of Texas in April 2013. Amy joined The Arc in 2001, and had previously served as director of governmental affairs and interim director. The Arc’s mission is to create opportunities for all people with intellectual and developmental disabilities to actively participate in their communities and make the choices that affect their lives in a positive manner.

Julia Caba, MSSW ’06, was featured on the cover of the May issue of Austin Woman Magazine. In the feature article, Julia talks about her passion for empowering girls as they approach their teen years, and about her work as the Executive Director of GENaustin, the Girls Empowerment Network of Austin.

Johnny S. Kim, PhD ’06, has joined the Graduate School of Social Work at the University of Denver as an Associate Professor. Johnny’s expertise includes school social work practice, solution-focused brief therapy, and Asian-American youth development.

Michael Costanzo, MSSW ’07, has founded the Adoption Law Center of Northern Virginia, PLLC, in Fairfax, VA. This is a full-service adoption law firm providing compassionate and responsive legal representation to individuals involved in every aspect of adoption (including adopting parents, birthparents, and children), and to adoption agencies and other organizations involved in helping families through domestic, international, and foster care adoptions.

Aiina De Triana, MSSW ’07, currently works as a Psychiatric/Forensic Mental Health Clinician at Unity Healthcare, Inc., a division of the Department of Corrections in Washington, D.C. She is in charge of the female Psychiatric Unit and provides crisis intervention and psychiatric treatment to males and females in General Population on an emergency basis. She also works as a PRN Mental Health Emergency Social Worker for the Department of Health Services in Arlington, VA.

Tracy Bannister, MSSW ’08, works for the International Association of Fire Fighters Foundation (IAFF) Charitable Foundation in Washington, D.C.

Nalini Negi, PhD ’08, received a National Award of Excellence in Research by a New Investigator from the National Hispanic Science Network on Drug Abuse. Nalini is an Assistant Professor at the University of Maryland.

Britt Urban, MSSW ’08, has been invited to serve as Youth Promoter in the Peace Corps’ Youth in Development Program in Latin America. Britt will coordinate and facilitate activities with youth with the aim of helping them build a positive self-identity, develop critical life skills, and create plans for their future success. She will also collaborate with community partners, parents, and educators to create strategies that strengthen youth support systems.

Amy Channugam, PhD ’09, MSSW ’96, received the University of Texas at San Antonio’s Social Work Department inaugural “Professor of the Year Award.” Amy is an assistant professor at UTSA specializing in children, families, and interpersonal violence.

’10s
Jacqueline Armstrong, MSSW ’10, has been enjoying her work as Development Officer at Interfaith Ministries of Greater Houston.

Michael McCarthy, PhD ’11, is the Mental Health Flight Commander for Shepherd Air Force Base in Wichita Falls, Texas. He has recently received the Air Force’s Biomedical Clinician Category III Officer of the Year Award. Michael received this award for his work as the Air Force suicide prevention program manager while on the Air Staff.

Katherine Sanchez, PhD ’11, MSSW ’92, was awarded the Early Career Stage Mentoring Program Award for NIDA Research from the National Institute on Drug Abuse. Katherine is an Assistant Professor at the School of Social Work at The University of Texas at Arlington. Her expertise includes integrated health care, treatment of mental health in primary care settings, and mental health issues of Latino populations.

Jodi Berger-Cardoso, PhD ’12, is in her second year as Assistant Professor at the Graduate College of Social Work at the University of Houston. Jodi’s research focuses on mental health disparities among Latinos.

Isabel Casas, MSSW ’12, is currently working in Austin as a Legislative Aide for Senator Judith Zaffirini. Her job covers several area-issues, including public education, criminal justice, jurisprudence, agriculture and rural affairs, and government organization.

Jeremy Goldbach, PhD ’12, MSSW ’08, is in his second year as Assistant Professor at the University of Southern California School of Social Work. Jeremy’s research interests involve cultural competence in prevention practice, with a focus on sexual and ethnic minority youth experiences.

Melissa McChesney, MSSW ’12, was featured in the March 11th issue of The Connection, a weekly newsletter from Texas Health and Human Services System. Melissa works as a policy analyst in the HSSC office of social services in Austin. The article highlights the important and diverse roles that professional social workers play in the system.
Susan Milam Selected 2013 Distinguished Alumna

Susan Milam, PhD ’94, MSSW ’83, is the recipient of the 2013 Charles I. Wright Distinguished Alumna Award presented by the School of Social Work and its alumni organization, the Social Work Alumni Network (SWAN). Milan received the award from Dean Luis H. Zayas at SWAN’s annual spring alumni reception.

“I am pleased that my social work degrees have enabled me to work successfully in both the public and private sectors throughout my career,” said Milam.

Milam’s distinguished social work career has included positions with the Texas Department of Family and Protective Services, Texas Medicaid Managed Care program, and the Austin/Travis County Health and Human Service. Since 2009, she has been the Director of Government Affairs of the National Association of Social Workers, Texas chapter (NAWS-TX).

Throughout her career, Milam has been actively connected to the School as an alumna and adjunct faculty member teaching public policy.

Let Us Help You Steer Your Career

The School’s DiNitto Center for Career Services (DCCS) has launched Steer Your Career, a new website that enhances the services offered to students, alumni and employers at no charge.

Powered by CSO Research’s Interfase system, this new site gives students 24×7 access to easily register, search jobs, make appointments, and manage multiple resumes, cover letters, and other employment related documents. Employers can quickly and easily post jobs on campus, choose to receive online applications directly from the system with current resumes attached, sign up for career fairs and much more.

You can access Steer Your Career through the DCCS website, www.utexas/ssw/dccs

Tuti Alawiyah, PhD ’13, has accepted a teaching job at the State Islamic University in Jakarta, Indonesia. She will continue her research on community engagement and women’s health and well-being through the Islamic University Research Center.

Emily Einsohn, MSSW ’13, is one of the four authors of the Texas Civic Health Index, a new report jointly released by the Annette Strauss Institute for Civic Life at The University of Texas at Austin and the National Conference on Citizenship, a congressionally chartered group that evaluates civic participation. The report provides a comprehensive, first-time look at civic and political engagement in Texas.

Paula Gerstenblatt, PhD ’13, has joined the University of Southern Maine as an Assistant Professor. Paula focuses her research on service learning in social work, community-university partnerships, publicly engaged scholarship, and arts-based research methods.

Mary Held, PhD ’13, has joined the University of Tennessee, Nashville, as Assistant Professor. Her primary area of research is focused on immigration from Central America and global health and well-being. Additionally, she is interested in integrated health and behavioral health services and the provision of mental health services for vulnerable populations.

Jina Jun, PhD ’13, is a research fellow at the South Korean Health Ministry. Jina’s research interests include epidemiology of substance abuse among women, and maternal and child health.

Joy Learman, PhD ’13, has joined Meredith College in North Carolina as an Assistant Professor and Director of the BSW program. Joy’s expertise includes reproductive health, gender-based violence, and immigrants and refugees.

Katherine Montgomery, PhD ’13, MSSW ’08, is a postdoctoral fellow at the Center for Mental Health Research, George Warren Brown School of Social Work, Washington University in St. Louis. Katherine’s research interests include school-based interventions, delinquency prevention, and translation of evidence-based practices.

Farya Phillips, PhD ’13, is the Dean’s Post-Doctoral Fellow in Psychosocial Oncology at the School of Social Work at The University of Texas at Austin. She will work with Dr. Barbara Jones in the development of a gratitude-based intervention to assist families of adolescents who have a parent with advanced cancer.
School Expresses Appreciation to Supporters

This year, the School modified its traditional scholarship reception into a luncheon honoring individuals and families who have donated significant time and resources to the School.

The invitation list included Advisory Council and Campaign Committee volunteers, endowment representatives, and donors who gave $1000 or more during 2013, made 10 or more gifts or have included the School as a beneficiary in their estate plans.

Scholarship recipients had the opportunity to be recognized for their academic achievements as well as to express gratitude to the many people who support their education. Describing her path to becoming a social worker, Katy Waters, BSW ’13, said, “The Vincent J. DiNitto Endowed Scholarship is an expression of confidence in my potential as a leader in the social work profession. It was a true honor to receive this scholarship, and a tangible expression of how far I have come as a student.”

A surprise award was presented to an active and long-time volunteer, Mary Dodson, who has served on the Advisory Council, the alumni board and has represented the School on the Texas Exes Council.

More than 150 guests attended the luncheon and celebrated their connection to the School of Social Work.
New Endowments

New Professorship Established

Norma and Clay Leben are no strangers to supporting the School of Social Work. Clay received his PhD from the School in 1985, and since the day he crossed the stage Norma and Clay have remained ambassadors for the School through the donation of their time, energy and resources. Both have served on the School’s Advisor Council for more than a decade. In 2003, they established an endowment specific to play therapy methods. Norma specializes in Directive Play Therapy and has taught countless workshops pro bono to students and area practitioners. But they weren’t done yet.

After starting and operating a nonprofit therapeutic foster group home for ten years, Norma gained a deep understanding of helping young children with ADHD, learning disabilities, and sexual abuse trauma. She has always felt she had to share this knowledge with parents and social workers. The Lebens decided to make a gift of a lifetime and created the Norma and Clay Leben Professorship in Child and Family Behavioral Health. This professorship will support an outstanding professor in Social Work whose research, teaching, writing, lecturing, and other activities will be devoted to child and family behavioral health.

“With the 2003 Endowment for the Excellence in Play Therapy Methods our first goal of increasing awareness of play therapy methods in social work education at The University of Texas at Austin was partially achieved.” Norma and Clay said. “Now, with this Professorship, we are challenging ourselves and the School of Social Work to give more permanent leadership to the endowment. The Norma and Clay Leben professor, a respected expert and teacher in the field of child and family behavior, will guide play therapy studies, the annual play therapy symposium, and the selection of Leben Scholars.”

We thank Norma and Clay for creating a legacy that demonstrates their enduring commitment to the profession and to children and families in Texas and beyond.

Prestigious Endowed Presidential Fellowship Created

The School of Social Work has received a gift from the Amherst Foundation to create the Cole William Adams Memorial Endowed Presidential Fellowship (EPF). This is only the second EPF ever created at the School of Social Work and the first endowment dedicated to supporting master’s students interested in the field of addiction and recovery. The partners of Amherst created this EPF to honor Cole’s memory and to do something meaningful for his mother and fellow partner, Tracy Erwin. According to his friends and family, Cole greatly enjoyed helping others. Through this fellowship, his legacy of caring and kindness will carry on.

Jane Addams Endowment Donors Celebrated

In 2007, clinical professors, Jean Avera and Bonnie Bain anonymously established the Jane Addams Field Education Development Endowment. This fund has enabled the Field Office to bolster their activities through trainings, appreciation events and awards for field instructors. In 2010, Bain and Avera agreed to reveal their connection to the endowment in hopes of inspiring others to support the School. This spring, they were acknowledged for the first time publicly at the annual donor event. When asked why they decided to create this endowment, Bain said, “Because field is crucial to educating qualified social work practitioners, and for most of us, it is a life transforming experience.”

Jean Avera, Dean Luis Zayas, Bonnie Bain

Cole William Adams

Norma and Clay Leben

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Development
St. David’s Foundation Awards
Grant to GRACE Program

The St. David’s Foundation has awarded a $100,000 grant to the Gerontology Resources and the Aging Community in Education (GRACE) Program at the University of Texas at Austin School of Social Work. The grant for academic year 2013–2014 will fund fellowships for MSSW students doing field internships at agencies that serve older adults and their families in the central Texas area.

Clinical Assistant Professor Sarah Swords, GRACE Program Coordinator, is thrilled that the Foundation has renewed its commitment to the program, funding it at twice the level of last year’s grant.

“This will allow us to provide fellowships to more students at a higher level of funding and achieve our goal of increasing the number of professional social workers in practice with older adults,” said Swords. “By helping us support our students, the St. David’s Foundation demonstrates its commitment to strengthening the healthcare workforce in the area of aging.”

Memorial

The School of Social Work community mourned the passing of longtime friend, Ruth Herbert. Mrs. Herbert was the wife and partner of Dr. George Herbert, a pioneer in the field of social work education, faculty member and acting dean, 1977–78. Born in Hazard, Kentucky, Mrs. Herbert was a professional librarian at several university and community libraries and an avid volunteer. She is survived by her loving husband, two sons and their families.

Memorial contributions can be made to the George K. Hebert Scholarship at the School of Social Work. For more information, please contact director of development, Laura Wells at lwells@austin.utexas.edu or (512) 232-8376.

The Gift of Appreciation

In its 4th year, the Social Work Alumni Network (SWAN) Austin Chapter raised $1000 for a student scholarship through the Honor a Social Worker Tribute Card initiative. The impact of giving through this effort is twofold—it offers recognition to a deserving social worker and lightens the debt burden of a student. Thanks to all who participated this year!

In Observance and Celebration of National Professional Social Work Month

This donation supports social work student scholarships awarded by The University of Texas at Austin Social Work Alumni Network.
Recognizing Gifts Made in FY 2013

The UTOPIA society is comprised of alumni and friends who provided monetary contributions to the School of Social Work to assist in providing excellent educational programs for our students. Listed below are those who made contributions of $100 or more between September 1, 2012–August 31, 2013. Many others contributed their valuable time and talents to enhance the educational experiences of our students. We deeply appreciate the generosity of all of our supporters!

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Why I Give

I give to the School of Social Work to express my gratitude for the education I received, the experience I had, and the future it prepared me for. I was fortunate to be able to attend the School thanks to an alumni gift and I hope to pay it forward to give a future social worker the same opportunity. Hook ‘em!

—Susan Woessner, MSSW ’09
Director of Safe Sport, USA Swimming