WHOLE HEALTH
at People’s Community Clinic

TWO SMITHS, ONE QUEST
for criminal justice reform

ANATOMY OF A LESSON
to train health care teams

SCHOOL OF SOCIAL WORK AT THE UNIVERSITY OF TEXAS AT AUSTIN | SPRING 2017

Whole Health p. 2

Peoples Community Clinic. September 15, 1974
FROM THE DEAN

Back in my college days, in theology class, I read St. Augustine with much interest for his ideas on such topics as just wars, free will, pedagogy, and slavery. St. Augustine’s statement that there is “no saint without a past, no sinner without a future” came to mind as I read “Two Smiths, One Quest.” Doug Smith’s and Reggie Smith’s respective journeys from prison to advocacy for criminal justice reform are about personal redemption and challenging the stereotype that justice-involved individuals cannot contribute to society. Their stories also give testimony to the power of the inclusiveness of the social work profession — as Reggie says, “it takes a village.”

Taken more broadly, St. Augustine’s statement invites us to look back at the past and forge a future. I thought about this as I read through this issue. The story about our graduates’ involvement with People’s Community Clinic, all the way from early efforts to provide holistic healthcare to the full-fledged behavioral health services they offer now, is about creating a healthier future for a community. The article “Anatomy of a Lesson” shows how we at the Forty Acres are forging the future of healthcare right now, as we train social workers, doctors, pharmacists, and nurses to collaborate and communicate with each other for better, patient-centered care. Many other articles also envision a better future, whether it’s by mapping a pathway to end child maltreatment, finding ways to increase breast-cancer screenings in rural areas, or providing evidence that peer-recovery coaches are effective in helping individuals abstain from or reduce their substance use.

I am proud of the fact that our faculty, students, and alumni are leading the way to this future.

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

IN YOUR OWN WORDS

“I really appreciate the many changes made to the Utopian. The layout, photography, and content are much improved. The emphasis on alumni, students, and community is welcomed and lends a more personal feel to it. Thanks for all the good changes, and keep up the good work.”

John Pratt (MSSW ’77)

“I'm writing in regard to your great article about Elliott Naishtat. However, Elliott was in VISTA, not AmeriCorps, which didn’t begin until later. He was my VISTA trainer in January 1970.”

Mary Middleton (MSSW ’74)

@eliz_pena:
“Huge shout out to my friend & fellow @UTSocialWork grad school alum Emily Mares for fantastic Utopian cover story on @UrbanRootsATX”
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School of Social Work Dean
Luis H. Zayas

Editor and Director of Communications
Andrea Campetella

Photography
Shelby Knowles
Alan Pogue, cover

Art Direction/Design
UT Creative Services:
Donna Coffelt, Jennifer Singer
Maria Huang, Christine Yang,
Tillie Policastro, and Von Allen.
Project Manager: Laurie O’Meara

Contributors to this issue
Laura Turner
Laura Thain

The Utopian Editor
School of Social Work
The University of Texas at Austin
1925 San Jacinto Blvd
Stop D3500
Austin, TX 78712-1405
Email: utopian@utlists.utexas.edu
Phone: 512-471-1458

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people's community clinic
est. 1970
Robin Rosell (MSSW ‘82) was puzzled when she applied for her current job twenty years ago. “It just said ‘adolescent social work,’ it didn’t even say where the job was! But when I heard it was at People’s, I was kind of excited. The dad of one of my best friends was a minister, and I knew he had helped start the clinic in the basement of his church, off the main drag,” she remembers.

Rosell is referring to People’s Community Clinic — known simply as “People’s” by many Austinites — which started in 1970 as an all-volunteer, free clinic in the basement of the Congregational Church on Guadalupe Street across from The University of Texas at Austin campus.

As Rosell sees it, the clinic was part of the “hippie” movement in Austin at the time: “Doctors and nurses volunteered their service, and there were also social work students doing internships there. I think its beginning as an all-volunteer, free clinic still influences People’s to this day, which is probably one of the reasons why I’ve worked here for 20 years! It’s a very progressive place that provides holistic care.”

This holistic-care approach was reflected in an integrated behavioral health program, which People’s formalized in 2006 with funding from the Hogg Foundation for Mental Health.

Behavioral health encompasses both behavioral factors (such as the foods we eat and the lifestyle we have) that are related to chronic illnesses as well as mental health and substance use conditions and diagnoses. In integrated behavioral health settings like People’s, medical providers and behavioral health providers such as social workers and counselors work together to take care of the patient in a holistic way—body and mind.

Rosell, who started in the mid-1990s as the clinic’s sole social worker, now supervises a team of eight behavioral health specialists. They work closely with the medical staff at the clinic’s two Austin locations to identify and serve patients experiencing depression and anxiety, and to provide case and medication management.

Four members in Rosell’s team received their master’s from the School of Social Work with specialized training in behavioral health: Griselda Onofre (MSSW ’15), Evelyn Marquez (MSSW ’15), Carrie Torn (MSSW ’16), and Marianela Guzmán (MSSW ’16).

As part of their specialized training, the four of them completed their internships in health-care settings, took a pioneering interprofessional course with students from nursing and pharmacy, and took another course on motivational interviewing—a well known evidence-based behavioral intervention.

“They are so perfectly trained for this kind of setting. Integrated care didn’t even exist when I was going to school, so I really appreciate the skills they come with,” Rosell says.
For the social work graduates, People’s provide an ideal work environment. “I really appreciate that mental health is integrated at People’s. Many times, clinics are good at taking care of the physical body without realizing how important mental health is. Here we emphasize mental health and the environment where the client is, and that it’s really important to help people move forward,” says Marianela Guzmán, who is at the clinic’s Center for Women’s Health.

Carrie Torn works at the main clinic, which People’s opened earlier this year in North Austin. The gleaming modern building was designed with integrated care in mind. The patient exam rooms surround an open space where interprofessional care team members can interact easily. “It’s really an open flow space where we, as providers from different disciplines, are interacting with each other. I’m available for on-site consults, where I might be screening for behavioral health needs or referring patients to services,” Torn says.

Since the main clinic opened earlier this year, the behavioral health team has doubled in size. Evelyn Marquez, also at this location, does mostly one-on-one counseling. As are her fellow graduates, Marquez is bilingual in Spanish, which is an essential skill at People’s. “We see mostly Hispanic clients, that’s our largest client population, and many are monolingual. And although I have patients who are bilingual, sometimes they need to turn to a Spanish word to best describe their feelings. I think it’s really comforting to patients to be able to do that with us,” Marquez says.

Many of the clients come to People’s with significant histories of trauma. “Anywhere between 85 to 90 percent of the cases involve some horrendous history of trauma that clients have experienced in their countries of origin, on their way here, or even while here. This trauma has effects on both their physical and mental health. There is also secondary trauma to our staff, so I’m trying to build as much support as I can for them,” Rosell says.

Despite the challenges, working with Latinos and mental health in an integrated clinical setting is rewarding. “I love what I’m doing! Serving the Latino community, especially as a Latina and a woman myself, I love serving in this capacity,” says Griselda Onofre.

Onofre does mostly one-on-one counseling at the clinic’s Center for Women’s Health, and many of her clients are expecting mothers. “I might be younger than some of the woman who come here and I do not have children,” she adds. “But at the same time I see that look in their eyes, like they are saying ‘this person is one of us, she understands me, and she is here to help me.’ I enjoy every single moment of it!”
Social Workers and Technology

Jonathan Singer (MSSW '96) is the creator of the Social Work Podcast, which covers everything from direct practice to research, policy, and education. The podcast started in 2007, and today it gets about 60,000 unique monthly visitors. Singer is an associate professor at Loyola University Chicago, and a strong advocate for social workers to embrace technology and help define its social uses.

On Becoming “The Guy Who Knows About Technology”

When I was doing my master’s, I was at the computer lab, and the guy next to me was in a chat room. I asked him, “Dude, what’s that?” He explained and then said, “You know, as students, we can create our own webpage.” And for the next two hours he showed me how to use source code, copy and paste that into text, and upload into the server. And there it was, my webpage! I was not just using the Internet but creating content on it! For the next couple of years, as I told people I could do this, I became the guy that knew about technology. And because people asked me questions, I had to find answers, and so I ended up learning a fair amount and creating the first web presence for a bunch of organizations in Austin.

On Starting the Social Work Podcast

I was teaching at the University of Pittsburgh while doing my PhD, and I realized how differently I read textbooks after 10 years of experience in the field. I thought that the information would be more useful to my students after they graduated, so I was looking for ways to make it available to them. First I thought about posting summaries of my lectures online. And then the idea of a podcast dawned on me. I was listening to This American Life on podcast instead of having to catch the show as it was on the radio, and that was kind of exciting. So one night I searched for the domain name socialworkpodcast.com and, of course, it was available.

On the Most Popular Podcast Episode

I think that would be episode 53 from 2009, “Prochaska and DiClemente’s Stages of Change Model for social workers.” And the recent episode on recovery high schools, with Lori Holleran Steiker, has more than 20,000 unique downloads.

On Social Workers and Technology

I’m a strong advocate for social workers to lead not only in using technology but also in being at the table to talk about what technology should be used for, what technologies we would like to have. Why have psychologists and not social workers been tapped by Facebook to serve as advisors on their suicide response plans? Why aren’t social workers collaborating with start-up companies that create apps for consumers of social services? So, I’m not advocating for social workers to be on Facebook or swap faces on Snapchat. I’m advocating for them to think about technology as a tool, get involved in the development of technology applications, and make sure they become available in ways that do not put consumers at a disadvantage or risk.

On What Is Needed for Podcasting

I still use a fantastic digital recorder I got about 10 years ago. I do most of the interviews in person, and I literally hold the digital recorder one inch from their faces, to make sure I get good audio. And then it’s just cleaning up the file, editing, and posting online. In the last couple of years, I have seen several social workers embark on podcasting, and I think it’s wonderful. We all bring our own different perspectives. So if anybody is reading this and says, “Oh, I can do that,” my advice would be to go for it!
A CLASSIC PUBLIC HEALTH PARABLE GOES LIKE THIS: A family is fishing downstream in a river, and suddenly a drowning person comes floating by. They pull the person out of the water, but then another drowning person comes by. As they are pulling that person out of the water, another comes by. The family then stops and asks, what is happening? They walk upstream, and they see that there is a cliff with a beautiful view of the river. But there is no fence, and people get distracted with the view and fall down. The family decides to stop people from falling by working with the community to build a fence.

For Amanda Barczyk (PhD ’11), this public health parable captures the holistic thinking that she learned at the School of Social Work: sometimes we need to look beyond the individual level (each drowning person) and take a larger view to identify and minimize risk factors (the cliff) and strengthen protective factors (the fence).

As associate director of research at Dell’s Children Trauma and Injury Research Center, Barczyk and her colleagues are “thinking upstream” to stop child maltreatment in Travis County before it occurs. To inform prevention programming, the center’s research team has mined Child Protective Services data on substantiated cases of child abuse and neglect between 2003 and 2012. They helped visualize the results with maps that depict the county areas most affected, changes over time, and distribution of services.

The research shows that child maltreatment in Travis County follows an “East Austin Crescent Pattern” (MAP No.1). This pattern corresponds with risk factors at the community level that include poverty, lack of educational opportunity, community violence, family violence, and student obesity.

“Parents living the stress of poverty and lack of opportunity are more likely to commit child abuse,” says Karla Lawson, the research center’s director. “We can mitigate some of these stressors by bringing opportunity to areas of Travis County with higher rates of child maltreatment. Improving affordable housing, transportation, employment, mental health and addiction services—these things can actually protect children from abuse and neglect.”

When the researchers mapped mental health and substance-use services, however, they found that they are inequitably distributed (MAP No.2). Services are primarily located west of Interstate 35, while the areas at highest risk for child maltreatment are located east of the interstate.

“Our final goal is to mobilize already existing community groups, resources, and leaders towards preventive actions,” says Barczyk. “Child maltreatment crosses many sectors—housing, schools, law enforcement, healthcare, and so on—and to prevent it we need a coordinated, community-wide effort.”

Access the report and maps at www.dellchildrens.net/tirc

Thinking Upstream to End Child Maltreatment in Travis County

Access the report and maps at www.dellchildrens.net/tirc
MAP No. 1

Substantiated reports of child maltreatment for children 0-14 years of age, Travis County, Texas from 7/1/2009 to 6/30/2012

Description: This map depicts the highest concentrations of substantiated reports of child maltreatment for children 0-14 years of age. It focuses on the post economic recession time period (7/1/2009-6/30/2012). There are 5,554 substantiated reports of maltreatment represented in this map.

MAP No. 2

Substantiated reports of child maltreatment for children 0-14 years of age, Travis County, Texas from 7/1/2009 to 6/30/2012

with behavioral health services overlay

Description: This map depicts the highest concentrations of substantiated reports of child maltreatment for children 0-14 years of age during the post economic recession period (7/1/2009-6/30/2012). Mental health and substance use services are overlaid to show how their locations relate to areas of high concentrations of substantiated child maltreatment reports. 5,554 substantiated maltreatment reports are represented.
TWO SMITHS

ONE QUEST
Doug Smith and Reggie Smith didn’t have much in common until they both went to prison. They are now deeply involved in a movement of formerly incarcerated individuals advocating for criminal justice reform.

By Andrea Campetella
Photos by Shelby Knowles

DOUG SMITH (MSSW ’00) seemed to have everything going for him: a master’s degree, a passion for policy that he was putting to use at the Texas Capitol, and a family in the making. But everything can sometimes be too much. Doug, who had been diagnosed with anxiety and mood disorders, found himself drinking to cope with everyday stress. He was under the care of a psychiatrist, who prescribed medications to treat his symptoms. Before he knew how, Doug was on four different medications, one of them highly addictive, and was still drinking heavily.

“By about January 2006 I hit a point of real insanity and that’s when I went out to the streets for drugs. I found crack cocaine, and within two and a half years of that fateful decision I had completely obliterated my career, lost my family, lost the right to be close to my child without supervision, lost the house, and was on my way to prison because I had committed robbery in order to buy the drugs. That’s how far gone I was.”

Doug spent almost six years in prison, most of the time in the Huntsville unit, where the state carries out executions. He talks with quiet determination about this period in his life — one gets the sense that sharing the bad and the ugly is part of his recovery journey.

“I used to have a recurring dream that I would show up at social work conferences in my prison whites and try to avoid anyone seeing me,” he says as he flashes a pained smile.

While in prison, Doug decided to take any opportunity that could help with his recovery — for instance, he taught as a peer educator to change the cultural acceptance of sexual assault in prisons. During this time, he says, he learned to become a social worker in ways that he didn’t really understand before.

Doug was released on parole in 2014. He soon discovered how hard it was to re-enter society despite having a master’s degree, valuable job experience, and a family willing to provide him with housing and support.

He was under intense supervision from the parole division, which required him to wear ankle and GPS monitors, and obtain pre-approval from his parole officer for any movement — he could not, for instance, run an errand unless pre-arranged. Because of his criminal record, employers automatically rejected his job application, without giving him the chance to provide evidence of rehabilitation or even looking at his resumé.

“It took me five months to find a job, which was for $9 an hour, working at a warehouse in East Austin sorting used smartphones for sale in the Asian markets. I had to wear scrubs, because they had no pockets so I could not take anything, and I had to be wanded with a metal detector before I could leave. That was the type of occupation available to me.”

Having such a hard time reintegrating into society made Doug think of the many individuals he had met in prison who could not count on family support or higher education after being released. He eventually reached out to another graduate of the School of Social Work, Laura Sovine (MSSW ’01), who was then the chair of the Austin Re-Entry Roundtable.

“Next thing you know, I was introduced to the Texas Criminal Justice Coalition, a nonprofit that has been working since 1999 to reduce the number of incarcerated people in the state,
and I went from a $9 an hour job to lobbying the Texas legislature for reform.”

Since joining the coalition, Doug has worked on nine bills that are now law. He is also deeply involved with a larger movement of conservative and liberal groups — the Texas Smart-on-Crime Coalition — that seek to change what they see as the state’s ineffective and costly overreliance on incarceration.

The Texas Smart-on-Crime Coalition has a robust agenda for the 85th Legislative Session that includes items such as raising the age of criminal responsibility so that 17-year-olds can be treated in the juvenile justice system when appropriate, decreasing the over-use of incarceration by resorting to more effective solutions such as community-based treatment and decreased penalty levels, and increasing education and training to reduce re-incarceration.

When talking about this agenda, Doug conveys both wonky knowledge and deep passion: off the top of his head he can tell you Texas’ incarceration rate — “about 577 for every 100,000 adults, that’s higher than any other country in the world;” give you the number of people the state incarcerated in 2015 for possession of less than a gram of controlled substances — 7,000; and get emotional when talking about California’s #SchoolsNotPrison campaign — check online the campaign’s “Imagine” video and see if the last image, as Doug says, “gives you chills and makes you wanna cry.”

Doug is currently under minimum supervision, which means no ankle or GPS monitor and fewer meetings with his parole officer — although he is still subject to random drug tests and must receive permission to leave the state. He will be supervised until 2023, at which point he will regain the right to vote.

“This is my own journey, but there are many other formerly incarcerated people in Austin and around the state who are advocating for reform and are making a profound impact in their communities. It really shakes everyone’s stereotypes. We are on parole, but we are productive members of society and we have something to offer when it comes to developing policies that divert people from the criminal justice system.”

REGGIE SMITH (BSW ’16) took the stage as class speaker for the School of Social Work’s 2016 graduation ceremony with the urgency of a man in his fifties who has discovered he has much to do. He beamed resolve as he told his peers, “If change is to be, it begins with each and every one of us. And if we don’t take action now, then when?”

Reggie knows a thing or two about change. Six years ago he was in a federal prison in East Texas. His journey from prison to the graduation stage, he says, started when he came to the conclusion that what he had been doing for the past 20 years of his life was not really working for him.

“My social work professors would ask, what was your cognitive shift?” he says looking amused. “The question used to blow me away, it does not really work like that. But when I was in federal prison I did come to the conclusion that I didn’t want my next 20 years to be more of the same. I asked myself, do I want to keep cycling in and out of this system that is brutalizing me, do I want to keep hurting my family, do I want to keep hurting my community? The answer was no.”

From there, it was uncharted territory for Reggie. He had never really lived what he calls a “square life:” he was taken away from his home for drug possession during his teens, got arrested for firearm possession the day he turned 17, and was never out of prison for more than three years until his early forties. He had no formal education beyond a GED, no job experience, and a felony conviction that would make very hard to find a job or even a place to live.

“It’s so many pieces and so many fronts when you are getting out of prison. And you have to have your mind made up, because everyday is not going to be graduation day, if you know what I’m saying. It took me five years to get to that one day. And so many things happened that could have thrown me off the course.”

So, what made him manage to stay on course? And how much of his journey can be replicated? During our conversation, Reggie comes back again and again to these questions as the social worker he is, trying to figure out which elements from his own experience can help others in similar journeys.

There are of course no easy, silver-bullet answers. But three main factors start shaping up as I hear Reggie meander through his personal story with sidetracks into contrasting criminal justice systems—Texas versus California—preventive evidence-based interventions—he is a big fan of the Sequential Intercept Model—and outrage at the fact that so many people with mental illness end up involved with the criminal justice system—Harris County jail, Reggie informs me, is the largest mental health facility in Texas.

One factor was the interaction with individuals who saw in Reggie a human being instead of an ex-felon: they treated him with respect, encouraged him, and gave him the information he needed to move forward. For instance, a staff member at
If change is to be, it begins with each and every one of us.

And if we don’t take action now, then when?

REGGIE SMITH

a community college who mailed a brochure to him instead of throwing away a letter with an impossible request from an inmate in federal prison. Or an advisor who told him yes, the program to become a Licensed Chemical Dependence Counselor accepted students who, like Reggie, had criminal backgrounds. Or an English professor who praised his writing and encouraged him to join an honors program. And perhaps most importantly, the social worker at a state agency who “stuck her neck out for him” in so many ways that Reggie still tears up when he talks about her.

“I’m lucky because I have a lot of mentors, people who along the way helped me and who want to see me succeed. So yeah, it takes a village,” he says.

Another factor was Reggie’s resolve to make the most of the very limited opportunities available to him when he was released under federal supervision six years ago. He took a job—the only one he could get, through a program for people with barriers to employment—sorting electrical cords for $7.25 an hour for a maximum of 36 hours a week, and without benefits. Once he was allowed to leave the transitional center he was released into, his first apartment—the only one he could get because of his criminal record—was in a complex with an open-air drug market, which, as he says, was not the most “conducive to someone who is trying to stop using drugs, to stop being involved in crime.” He adds, “I had to be strong and not get caught up in that, but you know, that does not always work.”

And the third factor was time.

“I finished my first six months at the job and then I got worried because I was going to school, and I was going to leave the structure I had: you get up in the morning, you check in, you have your schedule. In school I’m just another student and these people are oblivious of what is going on with my life, you have to stay focused. But then you get a year under your belt and you are ok, you are invested, then you have two years invested, then you start at UT Austin, and then you have three years…”

Reggie is now a peer policy fellow for Communities for Recovery. In this capacity, he is receiving intensive training, education, and experience to advance public policy to promote substance-use disorder treatment and mental health care to divert people from jail and prison.

“There is personal responsibility, but communities have a responsibility to individuals as well. We often talk about second chances for people, but actually our communities need a second chance, our politicians need a second chance, because the first thing that they did is not working. Thirty years of mass incarceration is not working.”

When asked what he is most excited about, he does not hesitate: the Underground Scholars Initiative, a program at UC Berkeley that recruits and supports students involved with the criminal justice system.

“I want to bring this program to UT Austin. I want to identify people just like I was identified, and get them through PhD programs so they become the experts. We need to have experts who also lived the experience; they need to be at these think tanks; we need a seat at the table. There should be nothing done about us without us. That’s the movement right there.”
ANATOMY OF A LESSON

By Andrea Campetella
Photos by Shelby Knowles
Foundations of Interprofessional Collaborative Practice” launched in fall 2016 with students and faculty from social work, nursing, and the two schools for which the course is mandatory — medicine and pharmacy. From day one, students work in teams and engage in discussion, decision-making, and role playing. Here we dissect one of the course’s early activities to give readers a peek into how future health professionals can learn how to work like a real team and put the patient at the center of care.

1. Tough decisions
How much to disclose about the severity of a disease to a patient? What to do when patient and caregivers have conflicting wishes? When facing ethical challenges like these, health practitioners resort to their respective professions’ code of ethics to guide their decisions. The rub is, members of an interprofessional team may privilege different principles when confronting the same situation.

This activity started with student teams discussing and defining four main ethical principles: autonomy (the right of competent adults to make informed decisions about their own care), beneficence (procedures must be provided with the intent of doing good for the patient), non-maleficence (procedures must not harm the patient or others), and justice (burdens and benefits of treatments must be distributed equally among groups).

2. Scenario and roles
Team members were assigned the roles of health-care practitioner, health-care colleague, and one of the above four ethical principles. All practitioners were given the same scenario: Penny comes for the results of her annual checkup the day before leaving the country for a career-changing opportunity. You have to tell her that her pap smear requires a follow-up. She wants to wait until she comes back in six weeks. What do you say? One option is using your personal connections to get Penny an early appointment for the follow-up.

3. Ethics-based arguments
The practitioner and the colleague listened and responded to the arguments their team members made on behalf of each of the ethical principles they represented. In one team, for example, autonomy argued that an abnormal pap smear was not a life-or-death situation, that Penny knew best what was good for her, and that the practitioner should let her go. Non-maleficence added that convincing Penny to stay for the follow-up would cause harm by ruining her career. Justice chimed in, noting that it was unfair to use personal connections to get an early appointment for a specific patient. Beneficence, in the meantime, argued that an early death would truncate Penny’s career more dramatically than anything else, and that she should stay for a follow-up.

4. Decision-making and consequences
After deliberating, health-care practitioners stood up and, one by one, explained and justified their decision to the whole class. It was eye opening to see that, just as in real life, team dynamics had caused practitioners to reach different conclusions. The personality and the force with which each team member argued on behalf of a specific ethical principle swayed practitioners in all directions. The two faculty members leading the session—one from medicine, one from social work—asked follow-up questions, elaborated on the ethical ramifications of each decision, and made students think on their feet.

5. Facing a (real!) patient
The activity continued with three escalated scenarios. In the last one, the practitioner faced an angry patient who felt her needs had been ignored, her trust violated, and her career ruined. Still arguing on behalf of their respective ethical principles, team members helped the practitioner and the colleague craft and rehearse what to say to a patient in a situation like this. Once more, it was eye opening to hear the diversity in the responses’ content and tone—all the gamut from “doctor-knows-better” speeches barely disguised as apologies to heartfelt explanations and mistake-admission.

To the students’ surprise, one of the course’s teaching assistants played Penny. Instead of simply delivering a rehearsed speech, students had the much tougher task of facing a person that responded to arguments and made her feelings known—just like in real life.
Research matters

Master’s student Lindsey Hollmann-Butz realized the importance of research when she found herself in a conference room with a number of executive directors from mental health agencies and representatives from the Texas government. They were all looking at reports that Hollman-Butz had helped prepare at the school’s Texas Institute for Excellence in Mental Health. The reports were used to improve the statewide implementation of Wraparound—a care coordination model that targets children with the most intense mental health needs—and the YES Waiver—which helps families pay for nontraditional mental health services.

When survivors turn into advocates

It is estimated that one in three women experience intimate-partner violence in their lifetime. Many women who survive feel called to work in agencies that advocate to end intimate-partner violence and provide services to victims. Researcher Leila Wood conducted in-depth interviews with advocate-survivors to understand how their past experiences of violence affect their advocacy work, and the extent to which such work allows them to experience post-traumatic growth—positive change after trauma. Results were published in Violence against Women.

Social Worker of the Year

The nonprofit Greater Austin Social Workers (GASW) selected clinical professor Sarah Swords as the 2016 Social Worker of the Year. Swords was chosen for her advocacy in geriatrics through her leadership of the GRACE program, her collaboration with the St. David’s Foundation to promote social work as a profession, and her dedication to educating new professionals.

Restoring Rundberg

A four-year, federally funded project has brought violent and property crime down in north Austin’s Rundberg neighborhood. The project, led by RGK Center Director David Springer, used innovative strategies like targeting crime “hot spots,” police walking beats to improve community-police relations, and community-based efforts to revitalize the neighborhood. School of Social Work faculty and students addressed specific needs in the area through short-term initiatives, including a photo-voice project in one of Rundberg’s middle schools, and community surveys to assess the neighborhood’s needs and the impact of efforts such as the walking beats.

Learn more at www.austintexas.gov/department/restorerundberg
How to increase breast cancer screenings

Patient navigators deployed as part of a state program have proved to be effective in increasing screening rates for breast and cervical cancer among women in rural areas in Texas. The state program combines cancer education through “pink parties” and contact with trained navigators who guide participants through a complex and often fragmented healthcare system, and help reduce screening barriers such as cost and transportation. Doctoral candidate Derek Falk and professors Catherine Cubbin and Barbara Jones conducted this research, which was published in the Journal of Cancer Education.

Why should we care about the health of people in Mexico?

The short answer, says Melissa Smith, is that we can learn much from resource-poor communities in the global South to promote the health of people living in poor and minority communities here in the United States. Smith, a family medicine physician and a senior lecturer at the School of Social Work, has developed a six-week summer program in Oaxaca, Mexico, where students learn about global health equity, improve their Spanish, and experience clinical interactions and community health initiatives in a different culture.

Food for thought

Many social work students don’t have the ability or resources to access food while they are on campus. To respond to this need, the Social Work Council, which represents social work students campus-wide, sponsors a food pantry in the student kitchen at the School of Social Work building.

Peer support to recover from addictions

Since 2010, Texas has invested in peer recovery coaches to provide long-term support for individuals struggling with addictions. Recovery coaches complete a 46-hour state-approved curriculum and then work with clients under the supervision of community programs. An evaluation from the School of Social Work’s Addiction Research Institute found that, after 12 months, 84 percent of Texans who signed up to work with peer recovery coaches were abstinent or had reductions in substance use. They had also increased their overall employment and decreased their overall healthcare service utilization. Read the full report at http://bit.ly/2l91U0t

Strong veteran families

Elisa Borah will evaluate a new veteran family treatment program being offered at the Steven A. Cohen Military Family Clinic in Addison, Texas, through Metrocare. The program, Strong Families: Moving Forward, addresses family members’ mental health needs, and strengthens couples and parent/child relationships within families who have recently left military service. Funding for the program comes from the Texas Health and Human Services Commission.

Looking for CEUs?

APRIL
18
Nonprofit Leadership Training
27-29
Maternal Mental Health Conference

MAY
10
Ethical Approach to Social Work Career Management

JUNE
23
Play Therapy Symposium

ONLINE
24/7
Self-paced seminars available anytime

More information and program options available at socialwork.utexas.edu/ceu or call 512-471-2886

New Public Safety Certificate

We have launched a new Certificate in Public Safety that prepares undergraduate social work students for careers in settings such as law enforcement, fire departments, and emergency medical services.
New AASWSW Fellows

Professors Cynthia Franklin and Mary Marden Velasquez have been selected as fellows of the American Academy of Social Work and Social Welfare. The academy, established in 2009, is a national, honorific society of distinguished scholars and practitioners dedicated to achieving excellence in the field of social work and social welfare. Franklin and Velasquez join eleven other AASWSW fellows inducted to the academy when they were part of the School of Social Work faculty.

Why does Solution-Focused Brief Therapy (SFBT) work?

Professor Cynthia Franklin and doctoral student Anao Zhang reviewed more than 30 studies that investigate why and how SFBT works. They found most empirical support for the therapy’s strength-oriented techniques and for the co-construction of meaning. Results are published in the Journal of Marital and Family Therapy.

Voter registration drive

Under the leadership of professor Ruth Fagan-Wilen, the School of Social Work registered approximately 350 UT Austin students last September. They were part of the 80,000 new registered voters that Travis County added for the 2016 presidential elections.

Busting the model minority myth

According to U.S. minority stereotypes, Asians are wealthy, highly educated, and problem-free. Data-gathering efforts like the U.S. Census can reinforce this stereotype because they pick up mostly English-speaking residents who tend to be better off. So when professor Yuri Jang set out to conduct a survey for the city of Austin on the needs of the city’s fast growing Asian population, she made sure that the survey was offered not only in English but also in six different Asian languages—Chinese, Korean, Vietnamese, Hindi, Gujarati, and Tagalog. About half of the 2,609 participants chose one of the translated versions, and the sample captured Asian immigrants struggling to make a life in Austin as well as more well-established Asian Americans. The city of Austin will use this data for future policymaking and fund allocating. Learn more: www.austin.gov/AsianLifeAustin

Outstanding poster

Master’s students Maya Williams and Samantha Guz received an “Outstanding” recognition for their poster “Mezzo level interventions for the school-to-prison pipeline” at the 40th Annual NASW Texas State Conference.

Living on the edge

Mexican Americans living along the U.S.-Mexico border experience higher rates of substance-related problems when compared to Mexican Americans elsewhere in the country. They also show lower rates of wanting or getting substance-abuse treatment. This research by Lynn Wallisch was published in the Journal of Immigrant and Minority Health.
U.S. citizen-children in mixed-status families

About 4.5 million of U.S.-born children live in “mixed-status families,” that is, they have parents and siblings who are undocumented immigrants. As in every other American home, these children experience their families as a unit that shares bloodlines, lineage, affection, and interdependence. The fact that they don’t share legal status, however, can be a source of psychological anguish and bring many disruptions to the child’s life, such as the deportation of a family member, economic insecurity, and frequent moves. Dean Luis H. Zayas and St. Edward’s University professor Laurie Cook Heffron (PhD ’15, MSSW ’02) explore these topics and offer suggestions for mental health professionals in the November issue of the American Psychological Association’s CYF News.

How to improve school performance

Professor Esther Calzada helped develop ParentCorps, a program that teaches young children skills such as expressing their emotions, and coaches parents and teachers in how to encourage positive behaviors. Recent research in New York City public schools that serve predominantly poor students shows that by second grade, children at schools with ParentCorps were half as likely to have clinically significant mental health problems, compared to peers at non-participating schools, and had higher academic performances. Results were published in JAMA Pediatrics. Calzada hopes to bring this evidence-based program to Texas schools.

Summer camp champion

When master’s student Leah Mesches started working at Camp Champions, the organization had a small scholarship program — roughly $15,000 went towards for campers in need of financial help. As part of her final social work internship, in 2016 Mesches set up the Champions Education Foundation, which has expanded available scholarship funds to over $200,000.
‘97

Mitch Sudolsky, MSSW ‘78, has returned to UT Austin as a full-time clinical social work professor after 13 years of adjunct teaching.

‘86

Therese Harmacek, MSSW ’86, coordinates services for elderly and disabled clients in Travis County as a contract case manager for Humana.

Rachel Fusco, MSSW ‘95, is associate professor and chair of the direct practice concentration in the School of Social Work at the University of Pittsburgh. Her research focuses on the mental health of children in the child welfare system.

Herschel Knapp, MSSW ’95, is writing his seventh textbook for Sage Publications, Intermediate Statistics Using SPSS (2017). He earned his doctoral degree in social welfare from UCLA in 2001, and is now a research analyst for Dignity Health.

‘96

Patricia Brubaker, MSSW ‘96, has been the clinical mental health supervisor at the Travis County Sheriff’s Department for the past 13 years. Her staff of 12 provide services for incarcerated individuals with mental illnesses. She looks forward to retiring this spring.

Jacqueline Corcoran, PhD ’96, MSSW ‘89, is a professor in the School of Social Work at Virginia Commonwealth University and the author of 14 textbooks, including Motivational Interviewing in Social Work (Oxford University Press, 2016). She has also written several novels.

‘97

Lee Gustafson, PhD ’97, MSSW ’92, BSW ’91, is chair of the Social Work Department and director of the MSW program at the College of St. Scholastica in Duluth, Minn.

‘98

Keith Warren, PhD ’98, MSSW ’94, is an associate professor in the College of Social Work at Ohio State University. He uses social network analysis to research the role of mutual aid in substance abuse treatment and mental health.

Matthew T. Theriot, MSSW ’99, BSW ’97, is the interim vice provost for faculty affairs and associate provost for teaching and learning innovation at the University of Tennessee in Knoxville.

‘99

Danielle Hayes, MSSW ‘01, is co-founder of Therapy Austin, a reduced-fee counseling agency that provides mental health services to adults.

Roxanne McKee, MSSW ‘01, is the mayor of Rollingwood, Texas. She previously served two terms as alderwoman on the Rollingwood City Council.

Susan Schoppeley, PhD ‘01, is the associate director of the School of Social Work at Radford University in Virginia. She researches organizational climate and culture as they relate to client outcomes and the implementation of new interventions in agency settings.

Christa Soileau, BSW ‘01, recently celebrated two years as a therapist in private practice.

‘01

Theresa Moran, MSSW ‘02, BSW ‘01, celebrated her fifteenth year with Child Protective Services. She recently completed a guide for the children of incarcerated parents that will be available through the Texas Inmates Family Association and NASW-Texas Chapter.

Tonya Lippert, MSSW ‘03, co-authored Transforming ADHD: Simple, Effective Attention and Action Regulation Skills to Help You Focus and Succeed (New Harbinger Publications, 2017). Lippert, who received her PhD from The University of Texas at Dallas, lives in Portland, Oregon, and works for Kaiser Permanente. She also writes children’s books, a blog mainly about ADHD (tonyalippertblog), and loves to be with her preschool daughter Frances and teenage son Roan (who was born while she was working on her master’s degree).

Teri Schroeder, MSSW ‘03, is the co-director and co-owner at Just Mind, in Austin. She was married in 2014 and works with her husband and 18 other clinicians.

Michelle Zadrozny, MSSW ‘03, launched a private practice through Plumeria Counseling. She also runs a consulting business designing and implementing employee assistance programs for small businesses and nonprofits to increase employee retention and loyalty.

‘02

Alexandra Huffman, MSSW ‘05, has been elected regional board member for NASW-Texas Chapter. She is a clinical social worker at UT Southwestern Medical Center in Dallas.

Tiffiny Carpenter, MSSW ‘06, is the director of clinical intervention services at Cal Farley’s Boys Ranch. She has a 2-year-old son named Everett, and continues to supervise social work interns from UT Austin.

Carolyn Haney, MSSW ‘06, founded WeViva in 2011 to provide affordable fitness and nutrition classes to people in low-income communities. She has three children and loves living in Austin and practicing social work every day.

Julie Wheeler, MSSW ‘06, is the intergovernmental relations specialist for Travis County. She came to the position from the office of Travis County Commissioner Karen Huber, where she served as the constituent relations director.

Katie Milosovich Bryant, MSSW ‘07, welcomed a son, MJ, into her family last year. His older sisters Elliot and Dylan are just as in love. She recently celebrated her tenth year as the school social worker at Westlake High School.

Cara Edmond, MSSW ‘07, is a single mother of two and serves as the director of institutional effectiveness and community relationships at the AOMA Graduate School of Integrative Medicine, where she is also an adjunct faculty member. In addition, she performs crisis intervention in the Seton healthcare system. In her free time, she practices yoga, cooks like crazy, and is grateful everyday for her master’s degree.

Vanessa Vorhies Koldnick, MSSW ‘07, earned her PhD from the School of Social Service Administration at the University of Chicago. She is a senior researcher at Thresholds in Chicago and a co-investigator with the Transitions Research and Training Center at the University of Massachusetts, where she partners with providers and state systems to develop services for at-risk transition-age youth with serious mental health challenges.

‘03

Krisel Gilbreath, MSSW ‘09, celebrates her first full year working in private practice after five years of agency work and two years working at a group counseling practice.

Melanie Danielle Mino Heap, MSSW ‘09, married Andrew Heap on July 9, 2016, in Naperville, Ill. Since completing her degree at UT Austin, she has been working in the medical social work field. She works at AMITA Health Hinsdale Hospital with families on the Neonatal ICU, Mother/Baby and Pediatric Units.


Noelita Lugo, MSSW ‘09, has worked in the Texas Attorney General’s Office since graduation and was promoted to the position of director of family initiatives in 2015. She enjoys leading an interdisciplinary team to enhance core child support services.

Lisa Pokorny, MSSW ‘09, manages the survivor outreach services for the Army Community Service division of the Department of the Army in Fort Leavenworth, Kansas. In this capacity, she serves approximately 700 surviving family members in Kansas and Missouri.

Susan Woesnner, MSSW ‘09, is the director of safe sport at USA Swimming. She lives with her husband Ryan Mooney in Denver, where they welcomed their first child, Samantha, in December.

‘10

Katy Marvel, MSSW ‘10, is a primary program therapist at Merfield Achievement Center in Liberty Hill, Texas.

Belle Miller, MSSW ‘10, is a social worker with DaVita, a dialysis company. Since graduation, she married, moved to Kyle, and has an 11-year-old stepdaughter.

Virginia Cruz, MSSW ‘11, has opened a private practice, Career Counseling and Psychotherapy Services, in Austin.

Valeria Buentida, BSW ‘11, is a caseworker and event coordinator at Unidad Educativa Monte Tabor-Naza-
ret in Guayaquil, Ecuador.
Daniela Fragoso, BSW ’11, received her master of social work from the University of Houston. After graduating she worked as a legislative aide to Senator Rodriguez for the 84th Legislative Session and has now joined the Legislative Budget Board as a policy analyst.

Claire Woll, MSSW ’11, currently works as a pediatric social worker at a level 1 trauma hospital in the Texas Medical Center.

’12
Jill Apilado, MSSW ’12, has been serving clients in New York City since graduation and currently works as a therapist in the Bronx.

Alexandria Anderson, MSSW ’12, is celebrating her fifth anniversary as a school social worker in Pfluger ISD.

Sarah Lonsdale Bledsoe, MSSW ’12, has accepted a full-time therapy position with the Montrose Center in Houston, where she will provide therapy within the Anti-Violence and Chemical Dependency programs.

Janette Salcedo Cordero, MSSW ’12, has been promoted to the position of program coordinator for Travis County Social Services. She served as a senior counselor for Travis County Juvenile Probation for three years and oversees the counseling program in the detention facility at Gardner Betts. The counseling team provide crisis counseling and follow-up assessments.

’13
Kathryn Davis, MSSW ’13, recently celebrated three years as a family navigator and behavior therapist at the Tulane Center for Autism and Related Disorders in New Orleans.

Ashley Harmon, MSSW ’13, BSW ’12, recently received her LCSW and works for UT Austin Athletics Department as the mental health coordinator for all student athletes.

Linda Rangel, MSSW ’13, works for the School of Social Work’s Office of the Public Guardian at Barry University in Miami, Florida.

Codi Tanel, MSSW ’13, co-founded the nonprofit Service Learning Exchange, which creates opportunities for youth to use digital technology to connect and build a larger, more engaged community.

Ari Turrentine, MSSW ’13, is the vice president of operations Next Thing Co., which recently made headlines with their $9 computer.

’14
Elise Fleming, MSSW ’14, is a seventh-grade science teacher in Houston. She credits her social work education for helping her to build better relationships and become a more effective teacher.

Rebecca Quasebarth Nelluveli, MSSW ’14, BSW ’13, and Joji Nelluveli, BSW ’15, married on October 1, 2016.

Audrey Rodrigues-Herrmann, MSSW ’14, provides mental health services to children and families through Foundation Communities.

Lynde Ross, MSSW ’14, BSW ’13, is clinical director at the Refugee Center for Counseling in Franklin, Tenn.

Wendy Whipple, MSSW ’14, BSW ’13, works for Human Resources at UT Austin. She got married in April of 2016.

Sheena Yazdandoost, MSSW ’14, is a social worker at St. David’s Medical Center.

’15
Sok An, PhD ’15, published an article in a recent issue of Aging and Mental Health showing how social capital correlates with mental distress. Findings underscore the importance of community networks to positive health outcomes for the chronically ill and disabled.

Laurie Cook Heffron, PhD ’15, is an assistant professor in the School of Behavioral and Social Sciences at St. Edward’s University in Austin. Her research explores violence against women and migration.

Denise Martinez-Rivas, MSSW ’15, received her LMSW and currently works as a family advocate at the Center for Child Protection in Austin.

Cindy Mood, MSSW ’15, is the social services director at Walnut Hills Nursing and Rehabilitation in Austin. She also leads a monthly group for facility-involved social workers. She invites alumni to join by emailing her at cindy.eschliman@utexas.edu.

Holly Muirhead, MSSW ’15, is a youth engagement specialist for the Georgia Department of Behavioral Health and Developmental Disabilities.

Anne Roberts, MSSW ’15, works as a hospice social worker at Providence Health Services in Olympia Washington.

Carey Sebera, MSSW ’15, is the clinical director at Austin Recovery, which provides drug and alcohol treatment for individuals, families, and communities.

Emily Shryock, MSSW ’15, has been the assistant director of Services for Students with Disabilities at UT Austin since 2014. She was recently selected as the 2016 Employee of the Year by the Austin Mayor’s Committee for People with Disabilities.

Jamie M. Zapata, MSSW ’15, works as an investigator for the public defender’s office in capital murder cases, a role she feels is especially well-matched with the skills she has built as a social worker.

’16
Chelly Calandra, MSSW ’16, began working as a Child Protection Services legal advocate for the SAFE Alliance in January.

Denise Carpenter, MSSW ’16, is a second-grade teacher in Fort Worth.

Erin Childers, BSW ’16, is a street outreach specialist for Lifeworks. She came to the position from American YouthWorks in Austin.

Meghan Graham, MSSW ’16, BSW ’14, is a senior counselor with the Travis County Sheriff’s Office, where she is responsible for risk assessments and maintaining patient safety.

Rachel Holliman, MSSW ’16, works as a medical social worker in the Seton hospital system.

Angela Mancini, MSSW ’16, began working as an intellectual and disability service coordinator at Austin Travis County Integral Care last fall. She lives in Kyle, Texas.

Jasmine Matthews, MSSW ’16, accepted a position as youth services specialist at the SAFE Alliance, where she provides clinical case management to youth in the residential program.

Kathryn Sauer, MSSW ’16, recently completed an externship with the Michael & Susan Dell Foundation and joined Mission Capital’s Aligned Impact Team in February.

Meg Scamardo, MSSW ’16, accepted a position as the Central Texas regional adoption caseworker at the Gladney Center for Adoption. The center will celebrate its 130rd anniversary this year, making it one of the nation’s oldest child welfare organizations.

Catarina Silva, BSW ’16, was accepted into UT Austin School of Social Work’s post-BSW graduate program and is currently earning her Master of Social Work.

IN MEMORIAM
Bettie Joyce Moore Girling
MSSW ’56
July 20, 2016

Frances Contreras Barraza
MSSW ’77
June 8, 2016

Ava Lynn Hardesty
MSSW ’79
February 7, 2016

Linda D. Weathersby
BSW ’88
April 21, 2016

FACULTY
Kathleen Lawrence Boas
September 15, 2016

Setsop Deliverantra, MSSW ’13, volunteered at the Gladney Center for Adoption and is currently working as an investigator for the public defender’s office in capital murder cases.

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**A secret campaign**

*Schwab Family Scholarship in Social Work*

When Jim Schwab announced he was retiring from the social work faculty after a career of more than three decades, his family wanted to give him a meaningful gift. “As my dad’s children, we feel very grateful for all he did for us and wanted to show him how appreciative we are,” says Jim’s youngest son, Casey Schwab. “We know how much he cares about the university. We thought that the best way to show our gratitude was to ensure the continuation of his influence on social work education after he retired.”

Casey, his siblings A.J. and Emily, and their mother Ruth launched a secret campaign to raise funds for a permanent endowment in Jim’s name. Thanks to contributions from more than 70 donors, the Schwab Family Scholarship in Social Work was established and announced at Jim’s retirement party last May.

“If you know my dad, you know he is quite humble and a man of few words,” Casey says. “At the party, when he said ‘thank you, this means a lot,’ we knew we had done something truly meaningful for him.”

**Back to the roots**

*Denise and Ray Nixon Fellowship for Excellence in Social Work*

After Denise Nixon first graduated from UT Austin, she started out as a case worker—knocking on doors and connecting families to resources. Years later, she and her husband Ray continue to care for their community by supporting nonprofits such as Serve West Dallas, where she has volunteered for more than 20 years.

In 2016, Denise and Ray created a fellowship for eight master’s students, and when meeting them for brunch they emphasized the importance of giving back to the community you come from.

The message resonated with Marisa Ortega: “I grew up in a low-income area in Dallas, and I am a first-generation college student. I want to go back and help people with the same roots I have in the same neighborhood I grew up in.” When asked about the fellowship, Ortega said: “For them to invest in my education ... it’s not just money ... it means a lot and helps us succeed.”

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**The “scholarship dean”**

*Dean’s Endowed Scholarship Fund*

Increasing student scholarships has been one of Dean Zayas’s top priorities since he arrived at the School of Social Work in 2012. He has good reasons for this choice: less than 15 percent of master’s students receive scholarships, and they graduate with an average debt of $48,000.

“I want to be known as the ‘scholarship dean’ when I’m done here,” Zayas says. “My goal is to leave a sustainable pool of scholarship support through endowments.”

Endowments provide sustainable support because the donated funds are invested, never spent. Each year, a distribution—just as dividends on a mutual fund—is awarded to deserving students.

Thanks to a few generous donors, in 2016 the Dean’s Endowed Scholarship Fund was established with $25,000—the minimum amount needed, per university regulations. Anyone can help grow this endowment over the years. A distribution just as dividends on a mutual fund is awarded to deserving students.

If you are interested in learning more about endowments, contact Laura Turner, director of development, 512-232-8376 or lauraturner@austin.utexas.edu
**A “valley kid” comes to UT Austin**

Kristin N. Ramos, 2015 - 2016 John and Jennifer Gates Endowed Scholarship in Social Work Fellow

I'm from the minute town of San Benito, in the Rio Grande Valley. Nothing has ever been expected of “valley kids” besides graduating high school and working to provide for our families. I’m proud to be a first-generation college student who always tries to go beyond what is expected, challenging the system and creating my own views.

I entered The University of Texas at Austin as a nursing major. I went through the motions, even made decent grades, but my passion was just not there. My true desire was to help people on a more emotional, psycho-social level. I quickly redirected my career to social work and knew that I was in the place I needed to be.

After I graduate I want to help pioneer new programs in schools to teach adolescents about healthy relationships—a necessity in under-served community like the one I was raised in.

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**Let’s bring UT Austin social work students to D.C.**

**A word from Jessica Shahin**

We social workers are among the most valuable professionals because we can do anything. We are problem solvers and critical thinkers, we can take on policy and implementation challenges, and we know how to present a full picture of impact on vulnerable populations and communities.

Because I believe in the value of these social work skills, I want to encourage current UT Austin students to think of careers in public administration, program development, and policy and budget analysis. That’s why I’m excited about Washington Week, a program-in-the-making at the UT Austin School of Social Work.

During one week every year, the school will bring selected students to the nation’s capital to engage in intimate discussions with officials in federal agencies, think tanks, national advocacy organizations, and legislative policy makers.

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**Why I give**

Evelyn Neely (MSSW ’67) remembers that when she was in school, tuition at UT Austin cost $25 a semester

“That was the cheapest part!” she says. “The most expensive part was room and board. Back then, there were only two houses for African-American students. I lived there during the week, and on weekends I went back to Houston, where my family was helping me take care of my two children.”

To pay for room and board, Neely relied on personal savings and a School of Social Work stipend that was earmarked for black students.

“Since that time I’ve always believed that you should help others when you have received help. My contributions to the school, though small, represent my commitment to that belief.”

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**Save these dates**

6 April
Alumni reunion at Scholtz Garten. More information at socialwork.utexas.edu/alumni

9 September
Annual Tailgate, Longhorns vs. San Jose State Spartans

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**WHY YOUR SUPPORT MATTERS**

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**A word from Jessica Shahin**

Jessica Shahin (MSSW ’93, BSW ’91) is associate administrator of the Supplemental Nutrition Assistance Program (SNAP) for USDA’s Food and Nutrition Service in Washington, D.C.
1992. HOME VISIT. Social work seniors Kelley Cochert and Richard James after a home visit for the Family Support Program. The School of Social Work developed this program with the Texas Department of Corrections to break the cycle of repeat offenses in parolees.