

A CLUSTER HIRE TEACHING PROPOSAL
ADDRESSING URBAN HEALTH CRISES IN HOLYOKE AND
SPRINGFIELD, MASSACHUSETTS THROUGH RESEARCH, TEACHING
AND CLINCIAL TRAINING

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PRINCIPAL PROPOSERS

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EXECUTIVE SUMMARY

We seek three new faculty hires over the next two years, one each in Anthropology, Psychology and Public Health to anchor a research/teaching/clinical training initiative in urban health in Holyoke and Springfield. These new hires will help to coordinate related but disparate UMass efforts in public health and civic engagement in the Pioneer Valley, enhance the efficacy of our efforts to ameliorate community health crises, create new, sustainable partnerships between UMass and community based agencies, expand our abilities to garner research funds, create new revenue streams and improve our capacity to provide innovative and effective hands-on education and training to both undergraduate and graduate students and promote cross campus collaborations that transcend the conventional disciplinary divisions that tend to hold us back.

They will do this by weaving together in a unique collaboration the efforts of three independent programs, the Institute for Applied Psychology (currently a pilot program in the College of Social and Behavioral Sciences), the nascent undergraduate major in Public Health Sciences and the Community Engagement Program of Commonwealth College.

The proposal draws on demonstrated excellence at UMass in the fields of public health and civic engagement. While primarily a proposal for teaching and training, this teaching is to be grounded in a high impact research program aimed at ameliorating the health crises that afflict our neighboring cities. It builds on UMass' national recognition for excellence in community based teaching and learning and addresses the demand on the part of Millennial students for education grounded in real world experiences and for hands-on training in practical skills. It has the potential to garner large research grants from established funding sources and over time to generate revenue streams from continuing education and professional training initiatives. It offers a unique, creative and highly interdisciplinary collaboration, building across four deaneries among the proposers and with the potential to draw additional collaborators from across the campus once the project is up and running. It requires little in the way of additional facilities and those that are necessary are readily available.

INTRODUCTION

We seek three new faculty hires over the next two years, one each in Anthropology, Psychology and Public Health to anchor a research/teaching/clinical training initiative in urban health in Holyoke and Springfield. These new hires will help to coordinate related but disparate UMass efforts in public health and civic engagement in the Pioneer Valley, enhance the efficacy of our efforts to ameliorate community health crises, create new, sustainable partnerships between UMass and community based agencies, expand our abilities to garner research funds, create new revenue streams and improve our capacity to provide innovative and effective hands-on education and training to both undergraduate and graduate students and promote cross campus collaborations that transcend the conventional disciplinary divisions that tend to hold us back.

The proposal draws on demonstrated excellence at UMass in the fields of public health and civic engagement. While primarily a proposal for teaching and training, this teaching is grounded in a high impact research program aimed at ameliorating the health crises that afflict our neighboring cities. It builds on UMass' national recognition for excellence in community based teaching and learning and addresses the demand on the part of Millennial students for education grounded in real world experiences and for hands-on training in practical skills. It has the potential to garner large research grants from established funding sources and over time to generate revenue streams from continuing education and professional training initiatives. It offers a unique, creative and highly interdisciplinary collaboration, building across four deaneries among the proposers and with the potential to draw additional collaborators from across the campus once the project is up and running. It requires little in the way of additional facilities and those that are necessary are readily available. We will discuss each of these aspects of the proposal in turn.

The proposal builds on three existing initiatives at UMass:

- a) The Institute for Applied Psychology (IAP): a pilot project, funded by the Graduate School and the University Outreach Program Innovation Fund, and currently based in the College of Social and Behavioral Sciences. The IAP provides low cost mental health services to under-served residents of the Pioneer Valley and to the UMass campus and offers post-graduate training and certification for mental health workers.
- b) The nascent undergraduate major in Public Health Sciences. This program is the most recent and the fastest growing undergraduate major at UMass/Amherst. The interdisciplinary curriculum has been designed to be flexible enough to prepare students for the diverse and growing opportunities

present in the health and medical fields.

- c) The Civic Engagement Program of Commonwealth College -currently combining the pedagogies of community service learning and community based research with active collaborations with community based organizations in Holyoke, Springfield and other communities.

We propose a formal collaboration among the three-abovementioned entities to coordinate the following efforts.

Primary Mission:

- a) HIGH IMPACT RESEARCH - conduct high impact research with high funding potential (focusing on NIH, NIMH, NSF, HUD and CNCS but also private foundations) that will address the existing health crises in Holyoke and Springfield.
- b) CLINICAL TRAINING - provide practical/clinical/field training for both undergraduates and graduate students in a range of community health domains including (but not limited to), mental health counseling, epidemiology, community health education, population studies, environmental health, health policy health economics, social justice, and forensic sciences.
- c) RESEARCH TRAINING - coordinate the training of undergraduates and graduate students in the conduct of the research mentioned above, providing hands-on learning opportunities currently in great demand among UMass students and providing a critical mass of engaged scholars committed to mentoring the next generation of community based researchers as well as a nexus for fostering research collaborations.
- d) PARTNERSHIP - serve to broker sustainable and mutually beneficial partnerships between our campus and community based organizations. These partnerships will be grounded in community based research and teaching in the abovementioned fields.

Those involved in the collaboration will undertake these activities in order to accomplish the following additional objectives.

- e) CIVIC MISSION -fulfill the civic/land grant mission of UMass by bringing the resources of the University to bear on the multiple community health crises facing the neighboring cities of Holyoke and Springfield.
- f) COORDINATION OF DISPARATE EFFORTS ON CAMPUS- among a wide range of interested faculty and students across the campus who are

already wrking on issues of urban health in the Pioneer Valley creating efficiencies and increasing efficacy.

- g) COORDINATION OF DISPARATE EFFORTS OFF CAMPUS AMONG DOZENS OF COMMUNITY AGENCIES AND UMASS FACULTY AND STUDENTS. – The project will enhance collaborations among scholars with interests in research that has a direct, applied impact on members of the local and campus community and help to eliminate conflicts and inefficiencies that result from so many parties working independently.
- h) REVENUE - Create new revenue streams through continuing education and post-graduate certification.
- i) CUTTING EDGE, INNOVATIVE TEACHING –We will build on UMass' nationally recognized accomplishments in the pedagogy of civic engagement, using techniques that have proven to maximize learning, promote transformation, increase retention and generate maximum student satisfaction. These activities will enhance the UMass brand and provide modeling for others on campus who wish to adopt a pedagogy grounded in community engagement.
- j) UNDERGRADUATE MARKET DEMAND – The pedagogy of civic engagement will provide the kinds of real-world hands-on training that is in high demand among high achieving Millennial students.
- k) UNDERGRADUATE RESEARCH SKILLS - Demand for hands-on research and apprentice opportunities on the part of our top students currently exceeds supply. The proposal addresses this by specifying that the new hires would have responsibilities for designing and supervising undergraduate community based research projects, including year-long Honors capstone projects.
- l) THE UMASS BRAND – the project brings innovative, exciting, participatory education together with meaningful, potentially high profile, high impact scholarship, with the execution of a civic mission at a time when President Obama is calling for greater public engagement and specific initiatives to address the impacts of poverty and injustice and when the current generation seems to have embraced the call (National Service Plan Fact Sheet 2008, New York Times 2009).
- m) THE STIMULUS – the project has the potential to address mandates associated with the Obama stimulus, particularly those that call for programs aimed at the abatement of poverty and its impacts as well as those that promote civic engagement (Whitehouse 2009)

- n) PUBLIC ADVOCACY AND THE DISSEMINATION OF SCHOLARLY KNOWLEDGE to local, state and federal agencies and representatives will be an aim of these collaborations. We also aim to promote the understanding of applied research among local practitioners and laypersons.

THE INSTITUTE FOR APPLIED SOCIAL SCIENCE (IASS)

Our proposal emerges out of a pilot project for an Institute for Applied Psychology, originally proposed and directed by Professor Christopher Overtree and originally funded by the UMass Graduate School and the Program Innovation Fund of University Outreach. That project was undertaken in order to provide for the creation of revenue-generating continuing education programs and professional training programs, and to promote grant acquisition, training, service and research opportunities in our local communities. The Institute emerged from internal discussions within the Department of Psychology which has embraced a model of scholarly engagement that emphasizes the interrelatedness between clinical applied research, outreach and intervention in the local community, and the provision of quality clinical training. The goal was to develop a self-sustaining institute that would position collaborators to promote the health and well being of our local communities in a way that strengthens the University through increased revenue and publicity. This proposal builds on that original vision, expanding the range of research and teaching to be undertaken and the diversity of stakeholders to be involved.

We imagine that the new Institute for Applied Social Science (IASS) would be one of several possible sites of collaboration for the mission outlined above and that some of the new hires would serve as new core faculty of the Institute, connecting an existing group of committed faculty across multiple colleges. While all of the new hires would be based in their home departments and would have primary research and grant writing responsibilities there, we imagine that all would be able to enhance existing synergies as well as create new ones across the campus whether they work within the IASS or not. These new faculty would have the opportunity to join the impressive list of IASS allied faculty (see list of faculty included at the institute affinity dinner hosted by Dean John Mullin)¹ to

¹ADMIN: John Mullin, Nigar Kahn, Sharon Fross, ANTHROPOLOGY: Art Keene, COMMUNICATION: Leda Cooks, Erica Scharrer COMMUNICATION DISORDERS: Mary Andianopoulos, Jane Baran, Pat Mercatis, Shelly Velleman, COMMONWEALTH COLLEGE: John Reiff, CONTINUING EDUCATION, Bill McClure, EDUCATION : Mary Lynn Boscardin, Amanda Marcotte , Bill Mathews, LEGAL STUDIES: Janet Rifkin, MANAGEMENT: Bob Marx, NURSING: Joan Roche, M. Christine King, Genevieve Chandler, PSYCHOLOGY: Bob Feldman, Hal Grotevant, Maureen Perry-Jenkins, Chris Overtree, Melinda Novak, Jerry Meyer, Michael

help build on already existing collaborations. The Institute represents one of several opportunities to build collaborations connected to community health in Holyoke and Springfield. The work of the Institute has already begun and we view our proposal for a cluster hire as independent of our vision to expand the work of the Institute. But we do suggest that the Institute represents an ideal place to maximize the benefits of a cluster hire.

THE PERSONNEL

We seek candidates for new hires who have a commitment to a strong integration of their research, teaching and public service agendas. The new hires will have responsibility for consolidating the loose collaborations among the three-abovementioned programs. Each would be appointed in a specific department with research and teaching responsibilities based in the home department and varying according to the job descriptions outlined below. Each would be responsible for generating a teaching and research program based in Holyoke and Springfield and for obtaining funding to support the research. And over time, some would contribute to developing revenue generating instruction for the IASS - either through the offering of continuing education/professional certification courses or through developing curricula for others to teach. In addition, each new hire would have a commitment to teach one community service learning and/or community based research course in Commonwealth College each year (cross listed with their own department). To summarize, we expect each of the new hires to bring the following assets to their work at UMass.

a) They would bring specific skill sets necessary to expand community based research and teaching in Holyoke and Springfield. Such skills include previous experience in community engagement and community based teaching, cultural competencies for working in urban and particularly in Latino communities, previous experiences with specific community health challenges such as those faced by Holyoke and Springfield (e.g. HIV/AIDS, teen pregnancy, diabetes, obesity, food insecurity, environmental racism, community violence) and a demonstrated record of grantsmanship.

b) They would have dedicated responsibilities for integrating their research and their teaching and for teaching at least one field-based class grounded in community service learning or community based research each year - underscoring community engagement as an organizing principle of their work and meeting student demand for faculty who will mentor research or teach real world/skills-based courses. They would thus help to ameliorate the current shortage of faculty necessary to meet the demand for research

Constantino, Dave Scherer, Sally Powers, UNIVERSITY HEALTH SERVICES: Harry Rockland Miller

mentors, clinical supervisors, capstone instructors honors professors and teachers of community engagement courses.

c) They would have outreach responsibilities, serving as coordinators and brokers to involve allied faculty and programs in the work of the Institute and to connect partner organizations in Holyoke and Springfield with other UMass faculty.

D) Some would have evolving responsibilities for developing courses or curricula that would contribute to the revenue streams of the Institute (see below).

We suggest that we need A MINIMUM of three new hires to jumpstart this project. The hires, as noted above, would bring specific skills and fulfill duties not adequately covered by faculty currently working in Holyoke and Springfield in independent or ad hoc projects. Because the skill sets sought in these hires are complementary and because the Institute (as one possible locus of their efforts) is currently in a pilot stage, these people would ideally be brought onboard simultaneously. And while we understand that budgeting requires that most new hires be at an entry level, we also note that the skills we are looking for, particularly the experience in civic engagement, are more common in more seasoned faculty. Thus, if possible, it would be beneficial if some of the positions could be advertised with the level of experience left open. We provide brief job descriptions for the three lines below. These are general manifestations of our visions. Should we be awarded a cluster hire we would want to refine these descriptions in consultation with our home departments. It is important to note that one of the primary features of the Institute is that it would be able to gather the expertise of multiple faculty across different departments. The new hires would enable us to close some of the gaps of our existing allied faculty. Below are preliminary job descriptions for the cluster hire.

URBAN ANTHROPOLOGIST - We seek an urban anthropologist (at either the Assistant or Associate Professor level) with a sub-specialty in medical anthropology and ideally some experience working in Latino communities. The applicant should have an established record of teaching excellence with some experience in civic engagement or community service learning as well as a strong record of publication and grants. The applicant will be appointed in the Anthropology Department but will have duties in the Institute for Applied Social Science where she/he will serve as a cultural broker for teaching and research in the cities of Holyoke and Springfield, MA. Duties will include negotiating/brokering community partnerships on behalf of Institute researchers, building cultural competencies among the students and staff of the Institute and preparation of students and faculty for fieldwork in Holyoke and Springfield. In addition, the applicant will engage in outreach work helping to connect Institute faculty with allied faculty and programs across the campus. The applicant will teach two courses/term at either the undergraduate or graduate

level. These will include one undergraduate service learning or research based course in the Commonwealth Honors College and cross-listed in the Anthropology Department. Classes will ideally include an introduction to urban fieldwork. The applicant will be expected to start her/his own research project in Holyoke and/or Springfield related broadly to issues in urban health and to pursue funding for that project.

ASSISTANT PROFESSOR OF PUBLIC HEALTH - we seek an Assistant Professor in Community Health Education for the Department of Public Health with a strong record of research and publication, demonstrated success at grant writing, experience in community service learning and a commitment to developing the undergraduate major. We will consider candidates with any research specialty but the candidate must, be willing to undertake long-term community based research in the cities of Holyoke and/or Springfield MA. Teaching responsibilities include a minimum of four graduate or undergraduate courses/year and will likely include one service learning/community based research course annually to be cross-listed with the Commonwealth Honors College. Teaching responsibilities will also include preparation of undergraduate public health majors for urban field work and for advising students within the major on developing research, service and practicum opportunities with the cities of Holyoke and Springfield.

ASSISTANT or ASSOCIATE PROFESSOR OF CLINICAL PSYCHOLOGY - We seek an Assistant or Associate Professor in Clinical Psychology, with experience conducting psychotherapy research in community settings with culturally diverse populations. The candidate should have a strong record of research, publication, a record of successful grant writing, and will undertake a research program focusing on community mental health research in Springfield and Holyoke. Duties will be split between the Department of Psychology and the Institute of Applied Social Science. Teaching responsibilities include a minimum of 3 courses per year, one of which will be a clinical practicum course for the graduate program in Clinical Psychology, and at least one service-learning course at the undergraduate level. Responsibilities will also include being a liaison between mental health agencies and fostering connections between UMass and local health and mental health agencies. Candidates should be licensed or licensed eligible in Massachusetts as a Clinical Psychologist and Health Services Provider.

THE NEED

The proposal addresses pressing community needs while also meeting substantive educational needs on the UMass campus, fulfilling the campus' civic

mission and enhancing the UMass brand. We will address each of these needs briefly below.

Holyoke²:

Holyoke, located just 15 miles south of UMass, is perennially ranked as the poorest community in the Commonwealth and the sixth poorest city in the nation. Nearly 30% of the population lives below the poverty line (twice the national average). The per capita annual income in Holyoke is \$15,913 for all residents compared to \$25,952 across the Commonwealth; among Latinos in Holyoke, the average annual per capita income is \$7,757. Forty-two percent of Holyoke's population is Latino. The percentage of people with less than a high school education is twice as high in Holyoke as in the state (30% vs. 15.2%), and conversely, the percent of people who have graduated college is half as much (16.9% vs. 33.2%). These figures have been exacerbated by the recent economic crisis. While the situation in Holyoke has deteriorated without abatement over the last several years and while many essential support services are facing severe cuts or elimination, social service agencies from around the Commonwealth continue to relocate clients in Holyoke – leading the mayor to refer to his city as the Commonwealth's warehouse for the poor (Badkahn 2008). Widespread poverty combined with poor housing stock and declining funding for human services or for grant-funded grassroots interventions have exacerbated a wide range of community health problems in the city. The health challenges facing Holyoke are profound. Holyoke leads the Commonwealth (or shares the lead with Springfield) in a variety of pathologies including incidence of AIDS/HIV, teen pregnancy and high school dropouts. The infant mortality rate in Holyoke was three times higher than the state rate in 2007 (11.3/per 1,000 births vs. 4.9). The percentage of births to teen mothers was almost four times higher: 20.5% vs. 5.9%. The rate of newly diagnosed AIDS cases in Holyoke was 600% higher in Holyoke than the rest of the state (62.8 vs. 11.1) Holyoke residents have a higher rate of poorly managed diabetes, with higher mortality rates and greater number of hospitalizations than state averages. At a rate of 802 per 100,000, hospitalization rates for Holyoke Latinos for diabetes are nearly triple the state rate of 297. Holyoke also manifests a high incidence of crime, violence, food insecurity, under-nutrition and obesity.

SPRINGFIELD: Like Holyoke, Springfield ranks as one of the poorest cities in the Commonwealth and ranks among the worst for a variety of indicators of community health. Per capita annual income in Springfield is \$15,232 for all residents, compared to \$25,952 across the Commonwealth. In Springfield, 20.3%

² Dan Gerber compiled data on health indicators in Holyoke and Springfield from departmental colleagues. Individual sourcing and attribution are available on request.

of the population is African-American and 27.2% is Latino. Among African-Americans in Springfield, per capita income is \$13,263 and among Springfield Latinos, it is \$8,885. In Springfield, the percentage of all people living in poverty is almost 3 times higher than the state rate. The percentage of people with less than a high school education is almost twice as high in Springfield as the state (26.6% vs. 15.2%), and conversely, the percent of people who have graduated college is half as much (15.4% vs. 33.2%). According to an August 9, 2008 report in Forbes Magazine, Springfield ranked 7th among the top ten fastest dying cities in the US, based on the economy and unemployment, loss of manufacturing, and the mortgage market (Zumbrun 2008).

Springfield's black and Latino families fare poorly in comparison to their peers across the Commonwealth on numerous health indicators. The infant mortality in Springfield in 2007 was double the state rate (9.8 vs. 4.9). The percentage of births to teen mothers was more than 3 times higher (18.6% vs. 5.9%) and the percentage of mothers not receiving adequate prenatal care more than twice as high (32.5% vs. 15.8%). There are significant health disparities by race in terms of overall mortality ratios: 21.2 per 100,000 (White), 35.4 (Black), 26.6 (Hispanic). With roughly 30% of the city's total population, two neighborhoods, Mason Square and North End, are particularly hard-hit, with child poverty rates well above 30% and as high as 70% in some small areas. The predominantly African-American residents of Mason Square neighborhood and Latino residents in the North End are at increased risk of developing chronic disease and obesity.

Significant disparities are evident in Springfield on many indicators of chronic metabolic diseases (per 100,000 population): (1) hypertension hospital discharges: 75.7 in Springfield vs. 38.7 for the state; (2) heart disease death rates: 206.8 vs. 182.5, (3) diabetes hospital discharges: 274.2 vs. 132.5, and (4) diabetes death rates: 26.1 vs. 17. State health data show that age-adjusted rates of diabetes mortality are 52.3 per 100,000 in Springfield, versus 35.3/100,000 for Massachusetts (Massachusetts Citizens for Children 2006). BRFSS³ data from 2005 show that the adult obesity rate in Springfield is more than 50% higher than the state of Massachusetts (32% vs. 20%). Health disparities related to type 2 diabetes mellitus, obesity and cardiovascular disease are concentrated among the 50,000 black and Latino residents (30% of the city's total population) living in Mason Square and North End neighborhoods, respectively.

The multiple crises in Holyoke and Springfield represent a disaster in our own backyard. And the solutions require a comprehensive approach to community health that explores macro forces that impact health like poverty, racism and environmental justice and their connections to more proximate causes (drug use,

³ Center for Disease Control's Behavioral Risk Factor Surveillance System.
<http://www.cdc.gov/BRFSS/>

birth control, nutrition, gangs, etc) (Link and Phelan 1995, Phelan and Link 2005, Geronimus and Thompson 2004, Geronimus 2000). While there are already several UMass faculty and staff working in these communities their efforts are largely unconnected and uncoordinated. The recent COPC grant issued by HUD to UMass Extension (\$350,000) was an effort to begin to coordinate research, service and clinical intervention efforts from across the Five Colleges with a network of community based agencies. But much remains to be done. The IASS can be a significant force in sustaining that effort.

UMASS:

We have argued above and elsewhere that a pedagogy based in community engagement, one that emphasizes hands-on training of practical skills in the real world, when done well, creatively enhances the brand of the institution (National Service Learning Clearinghouse, Princeton Review 2005?). At UMass, we have won recognition for such work (see below) but the demand for such courses and training far exceeds the supply. Put simply, we need more faculty to teach the kinds of courses proposed. Here we offer just a few examples of the need:

Keene's ongoing research on UMass undergraduates (see e.g. Keene 2009) suggests that the number of students seeking formal research training or mentoring far exceeds the opportunities available. Finding a thesis sponsor, a spot at the bench in an active lab, or a spot in a praxis-based class, particularly one grounded in "hard research" has proven to be especially problematic for many Commonwealth College students. In addition, research on the Millennial generation's approach to college suggests that they bring an increasing vocational orientation to their studies and that they seek and are most satisfied with courses that provide hands-on training in skills that are "useful" in the real world. (see e.g. Howe and Strauss 2003, Clydesdale 2006, Keene 2009). We have found very high levels of satisfaction and higher levels of student commitment in our praxis-based courses (see e.g. Polin and Keene 2009) and argue that the University needs more of these to meet the unique learning orientations of the current generation. A primary aim of this proposal is to bring in three new faculty with active research agendas AND a commitment to mentoring both undergraduate and graduate research and praxis-based work. Each hire will have an obligation to teach at least one research-based course/year in Commonwealth College (cross-listed with and specified by their own departments). Some of the new hires will have responsibilities for developing praxis-based courses or curricula for continuing education/professional training.

The proposal will also give a boost to the nascent undergraduate major in public health, which is currently understaffed. The UMass major is currently one of a small number of undergraduate Public Health programs in the country and one of a handful of those based at a research institution. In May of 2007, the

Massachusetts Board of Education approved the UMass undergraduate major in "Public Health Sciences." This new major was created in response to the fact that, according to the Association of Schools of Public Health, more than 250,000 additional public health workers will be needed by 2020. An additional undergraduate Public Health major faculty member in coordination with other community service learning and community based research faculty in their department and on campus is in a unique position to bring in additional funding and help students become public health workers, educators, and policy makers. Natural disaster, poverty, and globally prevalent infectious diseases are on the rise. Just this Month (June, 2009) Congress passed a bill to spend 7 billion dollars for preparing for future flu pandemics. In addition, behavioral health issues such as obesity will soon overtake heart disease as our number one preventable killer, surpassing deaths due to tobacco use – another “lifestyle” health issue. And as issues such as pandemics, natural disasters, and the quality of public water supplies have become the purview of Homeland Security, funding opportunities for research and training and new employment opportunities (including those through Homeland Security) have burgeoned. The Department of Public Health continues to play a crucial role in addressing these issues and the new undergraduate major is poised to be on the cutting edge of such work.

Overtree, in his original proposal for the IAP, noted that the University has the potential to greatly expand its clinical training of community mental health workers, and he makes a strong case for doing that within the framework of a community engagement pedagogy. The training of community mental health workers would continue as the core mission of the IASS, meeting the market demand for such training while serving as the model for the broader range of allied health fields to be incorporated into the mission. A recent E-ventures market analysis solicited by UMass Continuing and Professional Education cited a roughly 15% growth rate in the market for Masters level mental health clinicians. Not surprisingly, the single most requested graduate program in UMass CPE is for Masters Programs in Community Mental Health Counseling, a license-eligible degree that UMass is well positioned to be a leader in providing. Not only is the market for this program expected to grow, recent class-action lawsuits (e.g., Rosie D. vs. Romney) have found the Commonwealth to be lacking sufficient resources to provide for the mental health needs of its citizens. The Patrick administration has called for more training programs for mental health workers. In developing his original proposal for the Institute of Applied Psychology, Overtree estimated a potential annual gross revenue of \$470,000 from tuition. Not only would the newly imagined IASS accomplish many of the goals outlined above, it would serve as an excellent home for much needed, and revenue generating Masters and Certificate programs in the health fields and could assist allied departments in building on the clinical training model initially envisioned for clinical psychology.

MEETING THE NEED:

UMass has the capacity to bring large-scale research efforts to bear on the problems of Holyoke and Springfield and to bring large numbers of students and graduate practitioners into the area to participate both in high impact research and in curricular and training based interventions that can directly transform the crisis of community health in our neighboring cities. At the same time the daunting challenges faced by the residents of Holyoke and Springfield provide an unparalleled opportunity for hands-on training in the real world for students who plan to pursue careers in a variety of health related fields and allied social sciences. Such work combines to fulfill the civic mission of our land-grant school and to enhance its brand as a civically engaged institution that provides cutting edge learning opportunities for its students.

One example is the Psychological Services Center (PSC), a community mental health center on the UMass Amherst Campus that embraces the totality of the UMass mission through excellent teaching, community outreach and a strong research program. The PSC was held up as a model of community engagement in UMass' recent Carnegie designation as a Community Engaged University, and has been actively involved with CSL. The PSC provides low-fee services to the more disadvantaged members of our local communities, and delivered over \$450,000 worth of free and reduced-fee mental health services in 2008 alone. Clinical services are provided in two contexts. First, graduate students working under faculty supervision are the primary treatment providers, embracing a CSL model of instruction and engagement. Second, all the activities take place in the context of a "treatment as usual" research paradigm. As a member of a national Practice Research Network, the PSC gathers outcome data on its services. By connecting these data with a national sample, the PSC has been able to participate in community research, providing essential data that bridge the gap between controlled clinical trials and clinical practice that occurs in naturalistic settings. This model was Dr. Overtree's inspiration for the Institute for Applied Psychology, namely taking the mission of simultaneously embracing teaching, research and community service to a larger venue, and into the extremely disenfranchised communities of Springfield and Holyoke.

POTENTIAL REVENUE STREAMS:

In his initial proposal for the Institute for Applied Psychology, Overtree conducted marketing studies that projected that the smaller Institute could become self-sufficient based on revenues generated from continuing educational courses and professional certification courses to be supervised by the Institute faculty. Overtree estimated that once they became fully operational and sufficiently marketed that such training programs and courses had the potential to generate revenues of as much as \$470,000/year. Such revenue streams would have to be developed over time and Overtree suggested a stage model (rather than a timetable) that we summarize briefly here. The hiring of an additional clinical psychologist to the institute would expedite the process.

Stage I:

Envision administrative structure, and collaborative projects. Conduct preliminary outreach with community partners. Expand staff with new hires and by promoting collaborations with allied faculty. During this stage work proceeds under the aegis of the Psychological Services Center (PSC).

Stage II

Creation of the first revenue generating projects. Develop marketing materials. This stage involves establishing new partnerships and deepening existing partnerships. The PSC alone currently maintains active professional and training relationships with Hampshire College Health Services, Mt. Holyoke College Health Services, Amherst College Health Services, UHS at UMass, Cooley Dickinson Hospital, Baystate Medical Center, Wing Memorial in Worcester, Carson Center for Human Development, ServiceNet, Child & Family Services, Clinical Support Options, Allies in Recovery, Child Guidance, Springfield Juvenile Court Clinic, Cambridge Health Alliance, Bedford VA, VA Leeds, and Brown University Department of Neuropsychology.

One such research project currently under development (and with the potential for generating “seed” RTF funds) is an empirical examination of the efficacy of the award-winning “pressure vest,” a deep pressure touch stimulation garment which has been shown to have a calming effect in children with autism. Examining the effectiveness of this intervention in the treatment of autism is eligible for NIMH funding. It is important to note that this is a perfect example of the kind of research initiatives that can only be facilitated by multi-departmental partnerships, which the Institute can support. In this study, members of Industrial and Mechanical Engineering (technology development), Clinical Psychology (PI), and Communications Disorders (treatment providers) will be involved. It is hoped that developing these and other “small” programs will generate sufficient revenue stream to provide seed money for future initiatives, as well as to develop sustainability.

Stage 3: Grow revenue from smaller initiatives leveraging these relationships to create unique partnerships that enable UMass researchers and clinical faculty to expand their work in the local community, develop profitable research and clinical collaborations, and create additional training opportunities for students across campus (e.g., education, school psychology, clinical psychology, social work, community organizing, communications disorders, nursing).

Stage 4: When feasible, we envision some of the programs listed above to be developed into Masters level graduate programs run through the department of Continuing and Professional Education. Overtree had previously developed a

proposal to create a masters program in counseling psychology, leading to the Licensed Mental Health Counselor (LMHC) designation. This program was initially presented to the Psychology Department, which declined to pursue it as an independent initiative. We would like to revise this idea as a component of the "Institute," and potentially its greatest source of revenue. Additionally, there are ample opportunities for creating masters level programs for substance abuse, developmental disorders (e.g., autism), and forensic or police psychology, programs that could take both for-credit and not-for-credit forms. The State of Massachusetts has recently submitted a call for more masters level training in mental health fields, and these programs have been listed as areas for employment growth.

Revenue Streams Beyond Psychology

We see the potential for expanding these revenue generating courses and trainings within the related fields collaborating with the institute (for example offering in-service training for social workers, community health workers. Community organizers and even teachers). We have not been able to do the market analysis for such courses given the short time frame of the RFP. We do know that schools like Harvard, Drexel, Illinois, Illinois Chicago, and of course on-line specialists like University of Phoenix and Walden University, offer such programs at both the graduate and undergraduate level in community health and allied fields. UMass Public Health already has a partnership with University Without Walls to offer an undergraduate online degree in health and our Department of Public Health also has the second largest online program (MPH) on Campus after the professional MBA program. At first glance the market for technical and clinical training in public health and allied fields seems to be just emerging (recall the growth potential cited above) and there will be ample opportunity for the new hires to explore revenue generating options. Faculty allied with the Institute will benefit from the professional training model for mental health counseling proposed by Overtree whether they choose to pursue revenue creation in collaboration with the Institute or independently within their own departments.

PROVEN EXCELLENCE:

Grants:

We have noted that there are abundant funding opportunities from NIH, NIMH, NSF, HUD, Homeland Security and the Corporation for National and Community Service as well as from a variety of private foundations (e.g. Spencer, Kellogg, Robert Wood Johnson, Pew) for the kind of work proposed for the IASS and its allied faculty. Faculty at UMass have a demonstrated record of tapping into this kind of funding (see Table 1).

We have every reason to believe that such opportunities are expanding – in spite of (indeed as a result of) the bad economy and as a result of the priorities of the new administration in Washington (National Service Plan Fact Sheet 2008, Whitehouse 2009). This is particularly true for work in civic engagement where there has been an impressive expansion of funding for the Corporation for National and Community Service to fund both service based programs and research on outcomes. Keene and Reiff have been collaborators in over \$1 million in such grants over the last decade and have another \$500,000 of grant applications pending for the coming year.

TABLE 1. A Sample of Major Grants Relevant to the Work of the Institute of Applied Social Sciences⁴

Funder	\$Amount	Department	PI	Year	Focus
NIH	2.2 million	Public Health	Chasen-Taber	00-05	Gestational Diabetes in Latina Women
Nation Cancer Institute	2.4 million	Psychology	Powers	00-05	Biosocial Factors in Depression
NIMH	700,00	Psychology	Powers		Adolescent Depression
American Diabetes Association	500,000	Public Health	Chasen-Taber	00-05	Gestational Diabetes in Latina Women
NIMH	1.2 Million	Psychology	Perry-Jenkins	02-03	New Parents' Mental Health
NIH	150,000	Public Health	Stanek	03-04	Drug and Sex Risk Reduction in Urban Middle Schools
NIH	1.2 million	Kinesiology	Freedson et. al.	08-10	Obesity and physical activity
Donahue Inst.	350,000	Public Health	DuFulvio		Safe Schools Initiative
River Valley Counseling	158,000	Public Health	Bigelow	01-06	Mental Health and HIV Services
Corp. for National and Community Service	376,000	Commonwealth College	Reiff/Keene	00-03	Citizen Scholars Program – Leadership for Civic Engagement

⁴ This table is the result of a quick survey of major grants awarded recently to UMass faculty that are exemplary of the kind of funding to be pursued by the proposed project. Because of the rather short time frame the sample is not comprehensive but rather illustrative.

TABLE 1: Continued

HUD	400,000	UMass Extension et. al.	Barshefsky ⁵	04-07	COPC (Community Outreach Partnership Center- Holyoke)
Corporation for National and Community Service	246,000 applied	ComCol/ Anthro	Reiff/Keene	09-12	Student Leadership in Civic Engagement
Spencer Foundation	325,000 applied	Anthro/ComCol	Keene/Reiff	10-12	Assessment of Civic Engagement at UMass

⁵ Reiff was a collaborator on the HUD/COPC grant.

NATIONAL RECOGNITION:

UMass -Amherst is recognized as the lead institution in the Commonwealth for leadership in teaching and learning based on community engagement. The campus was honored with the Carnegie classification of Community Engagement and Carnegie also recognized the Citizen Scholars Program in Commonwealth College as one of 21 model programs in political engagement (Colby et. al. 2007). Princeton Review (2005) recognized UMass-Amherst as one of 81 "Colleges with a Conscience" - enhancing our brand as an engaged campus that promotes active learning. For the past three years, the Corporation for National and Community Service has named UMass-Amherst to the U.S. President's Higher Education Community Service Honor Roll, for service-learning programs that innovatively and effectively integrate community service and academic work. All of the proposers have won multiple awards for combining teaching and service.

TEACHING EXCELLENCE:

There is a massive literature (e.g. National Service Learning Clearing House 2009, Eyler and Giles 1999, Eyler, 2001, Gelmon et. al. 2001, Astin et. al. 2000,) attesting to the efficacy of service learning and other community based pedagogies. Courses grounded in community engagement (encompassing community service learning, community based learning and community based research) have been shown to result in improved learning outcomes (including enhanced critical thinking, reflective and analytical writing, improved GPA and the acquisition of specific skills), increased retention, increased satisfaction with the educational experience, increased enthusiasm for and commitment to the school, experiences that the students regard as transformational as well as a firm grasp of praxis. CE courses tend to receive higher student evaluations than more conventional courses (Colby et. al. 2003). Service participation shows significant positive effects on all 11 of Alexander Astin's outcome measures: academic performance (GPA, writing skills, critical thinking skills), values (commitment to activism and to promoting racial understanding), self-efficacy, leadership (leadership activities, self-rated leadership ability, interpersonal skills), choice of a service career, and plans to participate in service after college. (Astin et. al. 2000). These findings are replicated in a number of recent studies using different samples and methodologies.

All of the home departments of the proposers have a demonstrated record of successful teaching and research collaborations with neighboring communities. For example, the Department of Public Health has had a long history of working with local communities and agencies and engages a broad range of constituents as partners in its research activities. These range from hospitals that serve community populations to neighborhood health centers, public health

prevention centers, statewide nutrition training sites, and a host of voluntary community organizations. Faculty recognize the value of community-based research and community service learning not only because communities need to be the beneficiaries of research findings and teaching, but also because involvement enhances the feasibility and validity of their research. The Department of Public Health has a number of strong community service learning courses. Three examples are: (1) In PUBHLTH 160 "My Body, My Health" in which every semester 460 students complete an 8-hour community service requirement which provides 7,360 community service hours to the region each year. (2) In the Program Evaluation course (PUBHLTH 622), 30 students each year develop and provide evaluation plans for 6-11 health agencies in the region. (3) In PUBHLTH 490a Health Training, the faculty obtained a ASPH School-Based Peer Health Education grant to have UMass students train selected high school students to become peer educators (topics to include team building, effective communication, sexual decision making, and how to prevent transmission of HIV/STI's).

EXISTING FOUNDATIONS, RESOURCES AND FACILITIES

Administration:

The Institute for Applied Psychology operated last year as a subsidiary of the Psychological Services Center (PSC) using some of its revenue, structure and the administrative assistance of its director. We envision that the core structure and mission of the IASS will, in the short run, continue to operate around the provision of mental health services, relying on PSC for structural support. As new faculty are brought onboard, we envision them taking an active role in adapting the IASS to our proposed expanded structure. Our intention is to not place any additional burden on PSC but rather to create cooperation and efficiencies among those faculty collaborating on health related work in Holyoke and Springfield. We imagine that in the early phases of the work that the Institute will operate as a collaborative and that duties will be shared among those faculty (and community partners) participating in its projects. As revenue from grants and courses are developed, some will inevitably be allocated to administrative infrastructure.

Facilities:

For the moment, no additional facilities are necessary to undertake the project. Most of the projected work will happen in UMass classrooms and on site in Holyoke and Springfield. We do not envision the need for brick and mortar facilities in either city, though the University's exploration of such a facility in Springfield could become a base for some of the Institute's activities in that city.

Personnel:

As noted above all of the proposers are award-winning teachers in CE. Keene and Reiff have been leaders (both within the Commonwealth and nationally) in developing CE pedagogy and curricula and are regularly engaged to do training for other campuses. Reiff was designated by Massachusetts Campus Compact as a master teacher/mentor for the other campuses in the region. Keene is former President of Educators for Community Engagement (the former national organization of service learning faculty) and sits on the editorial board of the *Michigan Journal of Community Service Learning*, the only refereed academic journal in the field. As co-authors of the proposal they offer their commitment to mentoring new faculty in the development and teaching of their courses and the design of new curricula.

Mentoring: All of the authors of the proposal are committed to mentoring the new hires across our respective home units, to aid them in their professional development and to support them in embracing and fulfilling the mission that we set out at the beginning of this proposal.

Allies:

The proposed work clearly shares kinship with a number of ongoing projects on campus. While we have not had the opportunity to do a comprehensive survey of ongoing work or to consult with many of our potential allies and collaborators, such alliances are readily imaginable. It is our hope that the IASS will become a nexus of collaboration, in much the same way that the Center for Research on Families (CRF) brings together like-minded scholars from across the disciplines. In addition to an array of projects within our own departments that share affinity with the work proposed here we see common cause with colleagues working in the CRF, The Program in Violence and Trauma Studies, UMass Extension (particularly with respect to their work on nutrition and food insecurity), the proposed Office of Community Service Learning (projected to run out of the Learning Commons) and with a variety of individual faculty including Professors Cooks, Shabazz, and Scherer of Communication who have been working on issues of media and violence among youth in Holyoke and Springfield, Professor Castaneda of Communication, who has been working on issues of school retention in Holyoke and Springfield, Professor Alhassan of Kinesiology, who has been studying obesity among youth in those cities and Professor Soules (IT/ComCol) who has been assisting networking processes among community agencies and Professors Velleman and Baran of Communication Disorders who have deftly incorporated community service learning into their undergraduate curriculum.

INTER/TRANS -DISCIPLINARITY

We envision our proposal as a unique trans-disciplinary collaboration. It proposes collaborative work in research and teaching across four deaneries. It proposes new hires that will have responsibilities in their own departments, and with the potential to extend their work well beyond the borders of their departments including potential collaborations with the IASS and within Commonwealth College and within our neighboring cities. The new hires are grounded in fields that have cultivated inter-disciplinary perspectives on the human condition. One mandate for new faculty is to foster collaborations and connect with like-minded faculty across the campus. If one aim of the RFP is to hire a new generation of faculty who are not rooted in their “silos”, then we suggest that we have come up with a plan for challenging the hegemony of silos.

ASSESSMENT:

The mission of the Institute is sufficiently broad that it would be ineffective to discuss specific measures of performance in this space. We do offer some general measures that summarize the benefits of the proposal. That is, if the participants are fulfilling the promise of the program, then, after a sufficient start-up phase, we might expect to see the following.

- 1) Each new hire has established a community based research project in the cities of Holyoke and/or Springfield, grounded in a sustainable partnership with a community-based organization and fully supported by external funding.
- 2) Each new hire will have established a battery of courses that help address the curricular needs of their individual departments, at least some of which are grounded in community service or community based research.
- 3) Each new hire has developed a satisfying collaboration with Commonwealth College.
- 4) The new hires (collectively) will have put in place a course or courses (or professional trainings) designed to prepare effectively, students and colleagues for urban fieldwork with special attention to the needs of Holyoke and Springfield and which include development of appropriate cultural competencies for working in a specific host community.
- 5) The IASS will have begun to generate some revenue from external curricula and all of the new hires will have begun the entrepreneurial work of planning revenue-generating opportunities either in collaboration with the IASS or in the context of their own departments.

- 6) The Institute will facilitate a coordination of community based health research and teaching (broadly defined) in Holyoke and Springfield and/or partner with existing networks such as the Holyoke Campus/Community Partnership Network or Holyoke Unites to facilitate conversations about partnership, collaboration and community need. This will be evident in a broad list of partners and colleagues collaborating with UMass and with faculty allied with the IASS and in the assessment of our partners and colleagues that community based work has become more effective.
- 7) The new hires will have produced (at least) preliminary research results that address the current health crisis in our neighboring cities.
- 8) Community engaged courses, designed or taught by new hires result in providing valuable curricular-based services (i.e. students from service learning courses providing needed service) to our neighboring cities.
- 9) Demonstration that such services have had a significant impact on ameliorating health crises.
- 10) Students affiliated with new hires' courses rank their experiences as valuable, transformative, effective and among their very best experiences at UMass.

Not to be ignored or underestimated is the extant work on assessment of community-based pedagogies. UMass scholars have been active in this field of assessment (e.g. Cooks and Scharrer 2006, Polin and Keene 2009) and Reiff and Keene are currently partners in a \$325,000 three campus grant proposal (with Stanford and Providence College) to conduct longitudinal assessment of community engagement programs and pedagogies on our campuses. We are well positioned to continue to be national innovators in such work and to seek national funding to support it and we are in a position to guide the Institute and its collaborators in building assessment into their practice. Because of our long running experience with assessment and evaluation within Community Service Learning, we anticipate building assessment into our work from the outset with more precise measures of performance devised for and incorporated into each specific research and teaching project .

SUMMARY:

We propose three new hires to serve as core staffing for a campus wide collaborative approach to the health crises in Holyoke and Springfield. Two of the new hires will share appointments with the new Institute for Applied Social Science (currently operating as a pilot project). Our proposal weaves together three independent projects under the umbrella of the Institute in order to

enhance their efficacy in producing high impact, nationally funded research, innovative effective teaching, and service to neighboring communities in need fulfilling UMass civic mission and providing innovative cutting edge learning opportunities for its students while at the same time enhancing its brand.

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