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A NOTE FROM THE PRESIDENT

FRAN DOUGLAS, PSYD
Austin, Texas
TPA President 2021

Today marks the one-year anniversary of the official announcement that the world was in a pandemic. Some of us are playing the “what were you doing when you heard the news of the pandemic?” game today. I know that I had just returned from Washington, DC after visiting Capitol Hill and attending APAs Practice Leadership Conference. I have not taken another trip or spent the night away from home since then. No one needs me to remind them of the anxiety, isolation, financial devastation, illness, grief and loss of the past year. Not to mention the political strife and divisiveness that roiled our country and turned neighbors against neighbors and family members against each other. On top of this was the snow, freezing temperatures, and water and power outages. How have we survived?

There has been a tedium during the past year as days and weeks passed with an eerie similarity that conjured up images of Bill Murray in the movie Groundhog Day. Murray plays a TV weatherman with a less than optimistic outlook on life and relationships, who ends up reliving the same day over and over again, caught in a perpetual time loop. The monotony and inability to break out of the time loop causes him to become desperate and hopeless as his painful existence continues with no end in sight. Sound familiar?

When I first tried to watch Groundhog Day, I could not bring myself to stick with the whole movie. The repetition of watching Murray futilely doing the same things over and over were too much for me. My workdays were filled with listening to the traumas of my clients so I craved entertainment that was lighthearted and escapist. But when I gave it another go some years later, I was able to stick with it as Murray becomes first suicidal, in despair over his cursed existence, until ultimately accepting the potential inherent in having a re-do every day until he gets things right, including the ability to actually relate genuinely to another person for the first time.

In the week following our Texas deep freeze, APA President, Dr. Jennifer Kelly and APA CEO, Dr. Arthur Evans, sent a letter to TPA expressing their sympathy and best wishes for the recovery of all Texans. They included the brochure, “Road to Resiliency” (APA, 2012) as a resource. I am sure that many of you, like me, have given that brochure to countless clients over the years struggling with the aftermath of trauma and disaster.

It was a wonderful reminder of the three simple principles to assist those trying to recover from a disaster: self-care, connection with others, and finding a sense of purpose. Psychological literature is replete with theory and research on effective coping. Albert Bandura was one of the first theorists I read as an undergraduate who led me to fall in love with psychology. Recently, I viewed a presentation by Ervin Staub and his work on active bystander training with the police, a method he has also used in Europe and Africa with trauma victims (Staub, 2018). The role of social support and relationships is crucial when addressing the needs of trauma victims and those who serve them.

Which brings me back to Groundhog Day. Bill Murray's character was eventually able to break out of his time loop when he learned to connect to others. Through these connections, he found purpose in his everyday repetitive existence.

I believe this is what Texas psychologists have done as well during the past year. Researchers began to study the psychological impact of the pandemic, and shared this information with the public to facilitate coping and self-care. Practitioners pivoted to provide telehealth services to their clients already in treatment with them as well as the many new people who developed emotional difficulties and sought services as a result of the pandemic and the political strife dividing the country. When TPA put out a request for members to provide pro bono services, our members volunteered. When racial unrest brought even more distress, TPA members responded by becoming part of our racial justice task force. TPA members responded with enthusiasm to our virtual convention of 2020. Our legislative agenda prioritized supporting bills to continue and/or expand reimbursement for telehealth, including audio only services. All of these efforts are a testament to the resilience of Texas psychologists. They also demonstrate the work of recovery by making connections and finding meaning and purpose during our collective “Groundhog Day”.

Today I attended virtual Capitol Hill meetings organized again by APAs Practice Leadership Conference. Along with colleagues Dr. Melody Moore, Dr. James Bray, and Ms. Ayli Carrero, and TPA Executive Director, Jessica Magee, I advocated for increased appropriations for the Graduate Psychology Education program and the Minority Fellowship Program. Both programs help to train psychologists and provide services to underserved areas in Texas and to underserved populations. We asked for support for telehealth parity for private insurance plans, something we can’t do at the Texas legislature. We also asked for permanent audio-only services under Medicare, and for ending the in-person requirement for telehealth under Medicare. Despite the virtual format, these visits were gratifying. They left us feeling hopeful about increased access to telehealth and continual support for vital psychology training programs to address mental health delivery disparities. I tell you this to share my efforts to find purpose and connection during these difficult times.

Even though January 2021 quickly dashed all of our expectations that things would be better when 2020 was behind us, spring has come to Texas and we are beginning to dare to feel...
more hopeful. But we still have a long way to go. I hope that you will consider sharing what you have done to stay connected and purposeful during the past year by submitting a proposal to our 2021 convention or an article to the Texas Psychologist. The theme of the convention is Advocacy and Engagement. I also hope that you will consider advocating for psychology and increased access to services for Texans by supporting TPA Grassroots efforts during the legislative session. Please share how you have used the science of psychology to be an advocate for your patients and clients and to advance social justice issues in Texas. Never underestimate the power of your everyday advocacy. It promotes the recovery of us all.

Let me leave you with a quote from Ervin Staub, Ph.D. on his work with trauma victims in Europe and Africa:

“Inevitably, we were deeply affected by such suffering, by the stories we were told, by the visible, palpable pain of people. Empathy is natural, inevitable, and necessary. But in a world of suffering, for me, being actively engaged in trying to help was redemptive. I believe that not only for me but also my associates, what made it possible not to be overwhelmed by the pain was, first, our ongoing efforts to help, balancing empathy and compassion with a focus on what felt like our meaningful and hopefully significant work, and second, connections to associates and the people we worked with.”

REFERENCES


Call for submissions

The Texas Psychologist is seeking submissions for upcoming issues.

We are seeking content in the following areas: Independent Practice; Ethics; Multicultural Diversity; Forensic Issues; and Student and Early Career.

Collaborations with students are encouraged. 1000–2000 word count; APA Style.

Send to Nicole.Dorsey@hcjpd.hctx.net • rolling deadline.
LOOKING BACK, LOOKING FORWARD

A NOTE FROM THE TEXAS PSYCHOLOGICAL FOUNDATION

MICHAEL G. DITSKY, PHD
TPF President
Private Practice, Sugar Land, Texas

One of my favorite lines from Kurt Vonnegut’s Slaughterhouse-Five is “And so it goes,” in other words “we must move on.” Most, if not all, of us have been in the time frame of moving on after suffering through months of COVID-19 aggravation, desperation, and isolation. Occasionally, however, it is good to look back. And so, we had a virtual convention in November 2020 that was a huge success! The Foundation was very much present in awarding grants, judging the Poster Competition, and presenting a workshop for students and early career psychologists.

Dena Goldstein, TPA’s Marketing Director, created a Foundation page that celebrated outstanding student contributors for the 2020 Convention. TPF increased the viability and visibility of students by granting Honorable Mentions in its Award and Poster Competition categories. One of TPF’s agendas was to track its student Board Members and Award winners.

Dr. Megan Mooney conferred the President’s Award to Kyle McCall and Patrick Stanford-Galloway, both TPF Board Members, for their contributions to TPA. When Mr. McCall was asked what he has been doing since receiving his award, he very humbly said “working and going to school.” You may have seen him recently on Facebook feeding cattle in Michigan. Mr. Stanford-Galloway, on the other hand, has been providing assessment services for Texas A&M’s Counseling and Assessment Clinic as well as conducting Special Education evaluations for Bryan ISD.

Sakina Ali, last year’s Roy Scrivner Gay, Lesbian, Bisexual award winner, has been working on her dissertation that attempts to understand the roles of acculturative stress, attitudinal familism, and depression for South Asian college students. She provides therapy at the Warriors Research Institute at Baylor, Scott, and White. In August she will begin her internship at the University of Utah’s Counseling Center.

Rebekah Urban, the 2020 winner of the Jennifer Ann Crecente Memorial Grant, has been accepted at Oklahoma State University to begin her PhD in counseling psychology this fall. Her thesis, Development and Preliminary Validation of the Gender Inclusive Rape Myth Acceptance Scale, has been turned in as a manuscript for potential publication.

Haley Conroy, winner of the Research Proposal Award for her paper Perceived Discrimination and Anxiety Among Black Youth, is a member of the University of Houston’s Child Temperament, Thoughts, and Emotions Lab and a clinical psychology doctoral student.

As TPF looks forward, its Board looks for ways to fulfill TPA’s current president Dr. Frances Douglas’ vision of Advocacy and Engagement. As an example, Patrick Stanford-Galloway and Dr. Amanda Venta, both TPF Board Members, are collaborating to create a Student Senate for TPA.

TPF is renewing and offering this year the Manuel Ramirez, III, award for an ethnic minority graduate student completing her or his dissertation. TPF is also sponsoring an Ethics Education three-hour Workshop at this year’s convention in Austin. Sam Knapp, EdD, will be presenting on his latest APA publication Suicide Prevention: An Ethically and Scientifically Informed Approach (2020). Other events sponsored by TPF are in their formative stages.

Although Kurt Vonnegut’s novels portray a fatalistic worldview, his biographer noted that in God Bless You, Mr. Rosewater, may be found the need for community, engagement, and kindness. One of the most important missions of TPF is to do just that, build a strong community of psychologists at all levels through TPA. We must move on.
Novel Collaboration Meets Pressing Mental Health Needs in Houston’s Food and Beverage Industry Workforce While Addressing Clinical Training Gaps Caused by COVID-19

By Jesse Walker, Carla Sharp, PhD, & Amanda Venta, PhD
University of Houston

Individuals employed within the food and beverage industries have historically dealt with greater physical and mental health risks than the general population due to long hours, work in stressful environments, and limited access to employee-subsidized health insurance (Cheang, 2017; Jenkins, 2019). Additionally, across employment sectors, hospitality workers have the highest instances of illicit drug use and the third-highest instances of heavy alcohol usage (Bush & Lipari, 2015). To add to these health risks, many within Houston’s food and beverage industry suddenly found themselves without work roughly one-month into the Coronavirus Disease 2019 (COVID-19) pandemic. By the end of April 2020, 120,000 industry jobs had been lost in total (Workforce Solutions, 2019). The negative effects of sudden loss of employment (e.g., financial stress, development or worsening of mental health problems) have been well established (Brand, 2015) and many Texans found themselves facing these difficult realities. As the pandemic progressed, national reports demonstrated a dramatic rise in substance use (Czeisler et al., 2020), among other mental health problems. For many, particularly those working in food, beverage, and hospitality industries that would remain shuttered for months to come, the possibilities for finding new employment remained grim. For them, the health risks present before COVID-19 were compounded by new stressors, and their pre-existing difficulty accessing affordable mental health services through their employers were exacerbated by job loss and few prospects for re-employment.

With concern for the well-being of those working in service industries growing, a well-established, Houston-based non-profit organization took action. The Southern Smoke Foundation is a crisis relief organization serving people who work within the food and beverage industry to provide and connect individuals with financial and mental health resources across the country. Southern Smoke has a history of making significant contributions to the Houston area, having launched an Emergency Relief Fund to provide financial assistance to industry employees following Hurricane Harvey in 2017. With the COVID-19 pandemic exacerbating the need for mental health services among those working in service industries, the Southern Smoke Foundation moved quickly to extend their current work and offer help to those most affected across the state.

About one month into the pandemic during April 2020, Dr. Carla Sharp, then Director of Clinical Training for the University of Houston’s Clinical Psychology doctoral program, was contacted by Mental Health America. Their representative was interested in cultivating partnerships with mental health providers who would be willing to support Southern Smoke’s initiative. As a result of the pandemic, Southern Smoke had been inundated with emergency requests for help in financial, housing, and health/mental health support domains. Their hope in connecting with the University of Houston was to facilitate pro-bono, virtual mental health services for food and beverage workers via the university’s clinical training programs. Of course, university students were also dealing with disrupted and postponed in-person clinical placements, so an immediate, virtual option for service provision was appealing not only as a method of responding to an emerging mental health crisis, but also as a method of ensuring continued training opportunities for students.

Jesse Walker, a second-year clinical psychology student at the University of Houston, was indeed feeling the stress of disrupted clinical training during the early stages of the COVID-19 pandemic. While we, as mental health providers, collectively scrambled to adapt to a virtual environment, University of Houston’s timely partnership with Southern Smoke began to relieve these anxieties. This unique partnership has allowed for countless Houstonian food and beverage workers to receive necessary mental health treatment, and simultaneously has provided valuable clinical experience to trainees.

This unique partnership has allowed for countless Houstonian food and beverage workers to receive necessary mental health treatment, and simultaneously has provided valuable clinical experience to trainees.
with children and families. Clients served through Southern Smoke have expressed sincere gratitude and thanks for this initiative, as they otherwise would not have received treatment due to financial constraints and other barriers. Many patients have also expressed newfound appreciation for mental healthcare, as receiving services has reduced their stigma towards pursuing treatment. For students, the initiative has provided invaluable training.

The positive impacts of the Southern Smoke Foundation’s collaboration with Mental Health America of Greater Houston and University of Houston are abundant. The project was able to successfully streamline free telehealth mental health services for food and beverage industry workers across the state of Texas as of summer 2020. Regardless of employment status, those in need can now receive consistent, customized mental health treatment or general mental health support. Based on the success of the program, Southern Smoke hopes to replicate this model through other university clinical psychology programs in order to provide additional assistance to food and beverage industry employees nationwide.

REFERENCES


N100 and Academic Achievement in Juvenile Delinquents in Response to Reading Intervention

Leandro M. Ledesma¹, Marina A. Zhukova², Lisa K. Chinn¹, Elena L. Grigorenko³
¹University of Houston
²University of Houston, St. Petersburg State University
³University of Houston, St. Petersburg State University, Baylor College of Medicine, Yale University

Learning disabilities (LD) are disproportionately reported in youth involved with the juvenile justice system, JJY (Keilitz & Dunivant, 1986). The Individuals with Disabilities Education Improvement Act defines LD as disorders that represent great difficulties in the acquisition of reading, writing, listening and mathematics (2005). A previous study utilizing the Education Placement Screener for Youths in Detention on juveniles in Connecticut demonstrated that a staggering 90% had phonological decoding (PD) deficits (Hart et al., 2012; Grigorenko et al., 2015). Based on these observations, the University of Houston GENES:IS lab, directed by Dr. Elena Grigorenko, created an intense reading intervention that focused on improving PD and reading comprehension (RC) in JJY.

Reading performance can be assessed at behavioral and neurophysiological levels. Event-related potentials (ERPs) gathered from electroencephalogram (EEG) testing can index auditory and verbal processing ability (Miles & Stelmack, 1994). The N100, which is a negative polarity ERP that elicits to an auditory stimulus, is typically weaker in individuals with learning disabilities relative to controls (Bhat et al., 2018). In cortical auditory evoked response studies, Gilley and colleagues (2006) showed that most children with learning problems had abnormal N100 peaks and delayed latencies compared to controls. Bhat and colleagues (2018) also reported that neurotypical adults had left hemisphere lateralization of the N100, which was not present in adults with LD. However, hemispheric lateralization results have been inconsistent, since Johnson & Hautus (2010) and Johnson et al. (2013) reported larger N100 amplitudes and shorter N100 latencies in the right hemisphere of neurotypical adults. Furthermore, while studies have investigated ERP differences in samples with LD none that we are aware of have investigated N100 differences in JJY, who are at high risk of having these disabilities.

The objective of this study was to explore the N100, its lateralization, and its association with academic achievement scores.

METHODS

PARTICIPANTS

We collected data from 24 juveniles (23 males; mean age = 15 yrs 0 m; SD = 1.68 yrs) from multiple post-adjudication residential centers in Harris County, Texas, during the years 2017-2020. This study is an interim analysis and data collection is ongoing. The inclusion criteria were: a) being 14-16 years old at time of enrollment; b) having no uncorrected vision or hearing impairments that prevented testing; and c) having no previous diagnosis of intellectual disability. Additionally, participants needed to demonstrate a reading level below third grade on two standardized assessments (KTEA-II pseudoword decoding subtest and TOWRE-2 phonemic decoding efficiency subtest).

PROCEDURE

Participants were enrolled in a 1:1 reading intervention program conducted by trained interventionists. The intervention consisted of 24 total 90-minute sessions that occurred three times a week for two months. Academic achievement data and N100 data were collected at three timepoints: before the start of the intervention (Pretest), after the 12-session mark (Midtest), and after the
24-session mark (Posttest). N100 recordings lasted 15 minutes during the EEG task described below.

**BEHAVIORAL ASSESSMENTS**

Academic achievement subtests from the KTEA-3 and TOWRE-2 were used to assess phonological performance. These were Letter & Word Recognition (LWR), Nonsense & Word Decoding (NWD), Letter Naming Facility (LNF), Word Reading Efficiency (WRE) and Phonemic Decoding Efficiency (PDE).

**EEG TASK**

Participants were presented with a cross-modal auditory and visual discrimination task. A computer screen presented a printed consonant (C) or a consonant-vowel-consonant (CVC) that matched or mismatched with a simultaneously presented auditory stimulus, creating four total conditions (C-Match, C-Mismatch, CVC-Match, CVC-Mismatch), and electrode clusters (LP, MP, RP, MO), with participant ID as a random factor on the intercept. Follow-up paired comparisons were made using Tukey tests in the emmeans package for R (Russel, 2020). In addition, the relations between behavioral data and N100 amplitude and latency across time were analyzed using correlational analysis. Behavioral data means were analyzed across time using repeated measures ANOVAs. Lateralization was analyzed by comparing N100 amplitude/latency between LP and RP clusters.

**EEG RECORDING**

Recordings were obtained from 64 Ag/AgCl active electrodes positioned according to the 10-20 International System. The EEG data were digitized at 1000 Hz. Recordings were preprocessed offline using BrainVision Analyzer 2.0 (Brainproducts Glitching, Germany). The EEG was filtered using a 0.1-50 Hz bandpass filter. Blinks were manually identified and corrected for using the oculocorrection function in BrainVision Analyzer 2.0. The data were segmented into epochs, from -100.00 ms before to 400.00 ms after the stimulus onset and baseline from -100 ms to 0 ms. Channels containing an excessive amount of artifacts were replaced using interpolation, and epochs with 15% noise or more were rejected. On average, each of the four task conditions had 35 segments and the attention stimulus had 14 segments.

**RESULTS**

**N100 AMPLITUDE AND LATERALIZATION**

The linear mixed-effects model found main effects in N100 amplitude for timepoints (F(2, 1081) = 14.019, p < 0.001), conditions (F(3, 1081) = 24.577, p < 0.001), and electrode clusters (F(3, 1081) = 46.018, p < 0.001). Interaction effects were only found between timepoints and conditions (F(6, 1081) = 2.638, p < 0.05). Therefore, there were no significant N100 amplitude changes across time. However, contrary to our expectations, there was a gradual decrease in the N100 amplitude from Pretest to Midtest in all four clusters. Follow-up tests on condition effects showed smaller N100 amplitude in C conditions compared to CVC conditions (C Match vs. CVC Match: t(3,1081) = 7.325, p < 0.001; C Mismatch vs. CVC Mismatch: t(3,1081) = 4.351, p < 0.001), but did not show differences between match and mismatch conditions. Electrode cluster follow up tests did not show differences between LP and RP; therefore, N100 amplitude lateralization was not present.

**N100 LATENCY AND LATERALIZATION**

The same model design was used to analyze latency differences. Main effects of condition (F(3,1081) = 2.856, p < 0.05) and electrode cluster (F(3,1081) = 2.856, p < 0.05) on latency were statistically significant. The main effect of timepoint and all interactions were not statistically significant. Although latency did not significantly change over time, means did gradually decrease from Pretest to Midtest in MP, MO and RP clusters, and later analyses with the full sample might show improvements in auditory processing. C conditions mean N100 latencies (C-Match = 171.701 ms, C-Mismatch = 171.483 ms) were earlier than CVC condition latencies (CVC-Match = 175.955 ms, CVC-Mismatch = 175.802 ms), likely due to differences in stimulus complexity. Latency was significantly earlier in both MP and MO electrode clusters than LP and RP (MO vs. RP: t(3,1081) = -3.126, p < 0.001; MP vs. LP: t(3,1081) = -3.998, p < 0.001), indicating earlier latency at midline compared to lateralized electrodes. Also, N100 latency means slightly increased in the LP cluster and decreased in the RP cluster across the intervention (LP: Pretest = 177.0 ms, Midtest = 177.8 ms, Posttest = 178.4 ms; RP: Pretest = 180.9 ms, Midtest = 175.5 ms, Posttest = 175.1 ms). These effects were not statistically significant; however, when data collection is complete for the full sample, these effects might become statistically significant if lateralization becomes more prominent across the intervention.

**BEHAVIORAL ASSESSMENT & CORRELATION**

Raw and standard scores from five subtests (LWR, NWD, LNF, WRE and PDE) were independently compared across time. Results showed no significant change in either raw or standard scores across time. However, there was a gradual increase...
Specifically, the goal was to investigate whether N100 amplitude, latency, and lateralization would change in response to a PD-based reading intervention program.

DISCUSSION
This study explored N100 and behavioral performance on reading tasks in adolescents with learning disabilities living in the juvenile justice system. Specifically, the goal was to investigate whether N100 amplitude, latency, and lateralization would change in response to a PD-based reading intervention program. Previous studies showed that typically developing children have larger N100 amplitudes compared to children with LD (Gilley et al., 2006; Bhat et al., 2018). Smaller N100 peaks in children with LD therefore suggest less mature or abnormal auditory processing (Papageorgious et al., 2009). Thus, we expected to see an increase in N100 in response to the reading intervention; however, we found no change in N100 amplitude across the intervention. However, this was an interim analysis, and we will test again for this effect with the full sample, when the data collection is completed. Consistent with previous work, our sample showed no N100 amplitude lateralization at the start of the study in parietal regions, which is typically observed in populations with learning disabilities (Johnson et al., 2013). However, N100 amplitude for both right and left hemispheres remained consistent across time, showing no lateralization change associated with the intervention.

Latency was also expected to change across time, since studies reported shorter latencies in typically developing children relative to children with LD, indicating more efficient auditory processing ability (Gilley et al., 2006; Bhat et al., 2018). Our results showed no significant difference in N100 latency across time; however, there was a gradual non-significant decrease in latency from the start to the half-way point of the intervention in the mid occipital, mid parietal and right parietal region. We anticipate that this effect might become statistically significant when the full sample is collected and analyzed. While also not statistically significant, N100 latency in the right parietal cluster decreased across time. This trend could further indicate improvement in auditory processing, which is also consistent with latency lateralization results found by Johnson & Hautus (2010), but not Bhat et al. (2018).

Lastly, five behavioral subtests that are closely related to phonological competency were measured across time. We hypothesized that these behavioral scores would improve in response to the reading intervention. Although none of the tests significantly changed across time, NWD and WRE raw score means trended toward increasing with the intervention. This gradual increase is not surprising, since a significant difference may be difficult to achieve in a timespan of two months without the full sample. Lastly, LWR and PDE subtests correlated with N100 amplitude and latency, indicating that the N100 may be a valuable biomarker for measuring changes in these skills.

CONCLUSIONS
The current study was an interim exploratory analysis of the N100 in post-adjudicated JJY enrolled in a PD-based reading intervention. Data collection is still ongoing, with a planned sample size of 192 youth. While our results did not show statistically significant improvement of the N100, there were promising trends toward gradual changes in latency and behavioral score performance. Additional participants may give the statistical power needed to see statistically significant results in the future, and results suggest that intervention may benefit these youth.

For additional information regarding this study, please contact Dr. Elena Grigorenko at elena.grigorenko@times.uh.edu

REFERENCES


Conceptualizing Methodological Challenges and Solutions When Working with Refugee Youth Through Self-Determination Theory

Molly Michaels, MA, Savannah Krantz, & Sunita Stewart, PhD
University of Texas Southwestern Medical Center

Studies of refugee populations in a variety of settings and samples have grown as the number of refugees worldwide has exponentially increased. This area of social research has numerous methodological and ethical challenges (Obijiofor et al., 2018). Methodological challenges in conducting research with refugees mainly note a lack of engagement due to language barriers and the validation of measures with refugee cultural groups (Jacobsen & Laundau, 2003; McMichael, Nunn, Gifford, & Correa-Velez, 2014). However, these studies have not used a framework for conceptualizing how to conduct research with refugee populations to empower refugee research participants and increase data collection accuracy. As we reflected on lessons learned from a qualitative study completed in collaboration with the International Rescue Commission (IRC) and refugee community, we have found the Self-Determination Theory (SDT; Ryan & Deci, 2000) as a helpful conceptualization for research with refugee populations. In this article, we seek to use the principles from SDT to conceptualize methodological challenges and solutions when working with a refugee population.

SDT proposes that all people have an innate drive to develop a unified sense of self (Deci & Ryan, 1985; Ryan & Deci, 2000). To achieve a unified sense of self, three critical needs must be satisfied: autonomy, competence, and relatedness. Research in cross-cultural populations must support the universality of these needs (Nalipay et al., 2020). Satisfying these three psychological needs leads to autonomous motivation, or behaving with a sense of volition, willingness, and congruence. SDT emphasizes that individual needs must be met to decrease passivity and enhance engagement with others. SDT is a promising approach to address the needs of refugee youth in research, as passivity and engagement are sources of methodological problems in research with this population.

**Enhanced initiative and responsibility within participants will yield more accurate reporting and quality data for researchers**

The benefits of applying the principles of SDT to researching refugee youth are twofold. On one hand, it is of ethical importance for research to empower and enhance, not to undermine, roads of satisfaction and well-being for participants (Turan et al., 2019). Research settings may unknowingly uphold harmful factors such as excessive control, non-optimal challenges, and alienation, which lead to lack of motivation and disengagement (Ryan & Deci, 2000). On the other hand, implementing more thoughtful SDT-informed methods also benefits the researcher. Enhanced initiative and responsibility within participants will yield more accurate reporting and quality data for researchers to better understand and support this group. We aim to achieve both by exploring refugee youths’ specific needs and solution-oriented methods of research.

**REFUGEE YOUTH METHODOLOGICAL IMPACTS & SDT-BASED SOLUTIONS**

There are several difficulties that may surface when researchers try to identify, access, and design ethical research for refugee youth. Below we will identify some common challenges conceptualized through the SDT framework and correspondingly propose solutions that seek to empower refugee youth as well as increase engagement and data accuracy in research.

**COMMUNICATION GAPS**

Communication gaps are a fundamental challenge that refugees face when participating in research. Conceptualized through an SDT lens, refugee youths’ sense of autonomy can be strengthened through bridging communication gaps. According to SDT, autonomy is a psychological need to have a feeling of control and choice, and people are more autonomous when they act in accord with their authentic interests or integrated values (Deci & Ryan, 1985, 2000). Previous research with refugee populations has shown that experience in an autonomy-supportive environment, such as meeting the language levels of participants, is associated with well-being cross-culturally (Chirkov, Ryan, Kim, and Kaplan, 2003). These steps are essential to increase the likelihood that participation in research will allow these youth to act in accord with their authentic interests and values. SDT allows us to understand how bridging these communication gaps not only increases the quality of the data, but also has the potential
There is a growing science of cultural adaptation of instruments that extend beyond the standard practice of forward and backward translations...

to empower the refugee youth who are participating through increasing their sense of autonomy.

LANGUAGE FLUENCY
The spectrum of language fluency and reading capacity among refugee youth varies widely. While some participants may be highly fluent in English, others may be operating at a lower level. It is important that researchers gather data from refugee youth across this spectrum to obtain a representative sample. However, instruments that have been validated in mainstream populations are often not translated and validated in understudied samples, limiting the data quality obtained from these groups. These language barriers threaten competence as they impede on the participant's ability to understand the question or instructions, which is essential for performance. SDT theorists have suggested that positive and informational feedback promotes the basic need for competence (Deci & Ryan, 1985). Instruments validated in many cultures, available in several languages, accommodating a range of educational backgrounds should be considered. One example is the WHO Well-Being Index (WHO, 1998). The National Child Traumatic Stress Network also provides a resource of appropriate instruments. (National Child Traumatic Stress Network, 2015).

TRANSLATING OPERATIONALIZED CONSTRUCTS
Another challenge that researchers may face is finding valid measures that are normed in the context of the refugee youth. Measures may have poor construct validity due to issues translating operationalized constructs and being normed in Western, predominately English-speaking populations. Cultural concepts and contexts may not translate perfectly, leading to misunderstanding. There is a growing science of cultural adaptation of instruments that extend beyond the standard practice of forward and backward translations that should be consulted to ensure equivalence of the constructs (Acquadro et al., 2018).

ESTABLISHING RAPPORT & TRUST
An important factor in obtaining accurate data is establishing rapport with the participant. Because refugee families have dissimilar backgrounds from the researcher, building a sense of trust and connectedness with the youth and parent is often challenging. While rapport is a critical component of reporting accuracy, it also contributes to relatedness, the SDT principle representing the need to experience a sense of belonging and connectedness with a group, culture, or others to achieve internalized motivation (Ryan and Deci, 2000). To prioritize relatedness, the researcher should reserve ample time for introductions and conversations before the study begins. In addition, a method of research that increases relatedness is storytelling: a qualitative measure shown to be effective in understanding the dynamic nature of people's needs in social work (Suárez et al., 2008), and even specifically in adult refugee women (Lenette et al., 2013). Because storytelling allows participants to use their individual perspective to contextualize their response, the researcher can better relate as they journey through their story. In parallel, the participant's trust of the researcher increases as they reveal details.

CONSENT & CONFIDENTIALITY
Concepts of confidentiality and privacy may be foreign or misunderstood by refugee youth, so reiterating one's sense of choice in participation is crucial when conducting research. SDT postulates that the need for autonomy is satisfied by providing choices, offering meaningful rationales, and acknowledging feelings. In the research setting, explaining and contextualizing the purpose of research and role of the participant may enhance autonomy. Satisfying refugee youths' need for autonomy may decrease passivity in research by ensuring that their participation is in line with their authentic values.

CULTURAL STIGMA
Another challenge of researching refugee youth is the possibility for cultural stigma around mental health or mistrust of perceived authorities to hinder trust between the participant and researcher. Because refugee youth come from various countries with different perceptions of mental health, research, and authority figures, it is crucial that the researcher discusses these topics with the participant from a Western perspective to avoid hindering engagement and relatedness before collecting data. Another methodology shown to combat cultural stigma is the employment of a cultural broker: a member of the study team fluent in each culture's values and practices, whose role is to bridge cultural gaps between the researcher and participant. Because belief systems related to health and wellness, help-seeking behaviors, and illness are especially diverse across cultures, cultural brokers are useful in providing cultural translation (Wenger, 1995). They also facilitate relatedness between subject and researcher by limiting skepticism, misunderstanding, and even friction between the two.

CROSS-CULTURAL AWARENESS
Cross-cultural differences present a challenge to the researcher, as it becomes necessary to make cultural inferences while collecting data from refugee youth. According to James Spradley (1979), qualitative interviewing
allows the researcher to make cultural inferences from what people say, how they act, and the artifacts they use. In the context of refugee youth, researchers must make cultural inferences in order to obtain an informed response. A solution to ensure that the researcher is capable of making accurate inferences is to train assessors on cross-cultural awareness. Another method that enhances cross-cultural awareness is Participatory Action Research (PAR), which aims to empower participants through reflection and data collection (Bentacourt et al., 2015; Collins et al., 2018). PAR is conducted with the subject rather than on the subject, as the researcher integrates into the community to collect data. This method enhances the researcher’s cross-cultural sensitivity as they learn community values firsthand, rather than interpreting the data from an outsider’s perspective. PAR also satisfies the SDT-based need for competence because subjects take part in collecting and disseminating results, which bridges the power inequality commonly present in research settings.

**DISCUSSION**

In this study we discussed how an increased understanding of adolescent refugee needs through the domains of SDT can lead to more culturally aware and efficacious methodology. We examined how refugee youth’s autonomy could be enhanced through research methodology that accounts for communication barriers and bicultural identities and contextualizes confidentiality and privacy to increase the participant’s sense of choice. We discussed how SDT contextualizes the need for competence and how researchers may face challenges in the availability of instruments that account for linguistic differences, cultural norms in a refugee youth population, and acculturation challenges particularly prevalent in refugee youth. Lastly, we highlighted how refugee youth's need for relatedness may be impacted by the way research is conducted, which often influences data collection and validity.

To demonstrate the importance of using the domains of SDT to contextualize methodological needs, we proposed solutions to tailor methodology to the refugee’s needs in their host country.

**To demonstrate the importance of using the domains of SDT to contextualize methodological needs, we proposed solutions to tailor methodology to the refugee’s needs in their host country.**

Research questions that have relevance, improve the accessibility of the research to participants thereby enhancing competence, and enhance trust in the process promoting the need for connection.

Limitations should be considered when implementing SDT as a framework for addressing methodological challenges and solutions in refugee youth populations. Although there is research presenting the ethical challenges of researching refugee youth, our paper adds to the literature by presenting conceptualized solutions to address these challenges. Future studies should explore this conceptual framework through empirical studies to support its utility.

Second, we have used a broad brush in capturing the challenges of studies with refugee youth. The challenges and solutions that we highlighted in this paper are not exhaustive and may vary depending on the specific sample of participants or the type of research being conducted. In light of these limitations, we recommend future researchers to further explore how methodology can increase empowerment and accessibility in diverse samples of refugee youth. A “best practice” model using high methodological and ethical standards for conducting research with refugee youth has not yet been developed. An SDT framework shows promise for developing best practices and centralizing the needs of refugee youth while leaving flexibility for practical research execution depending on the type of research.

Additionally, future research should examine the diverse systems in refugee post-migration communities. While SDT focuses on the individual, methodological needs and challenges for refugee populations are vast and interwoven between systems. A better understanding of these socio-environmental systems could increase awareness of methodological challenges and build sustainable SDT-informed solutions.
The SDT framework has potential to improve our ethical standards in research as well as increase participant initiative, participant, and empowerment. It is our hope that future studies will use this framework when designing and implementing qualitative and quantitative research with refugee youth populations.

REFERENCES


Texas Psychologists’ Evaluation of Wards for Guardianship Revisited

Michael G. Ditsky, PhD; Private Practice, Sugar Land, TX & Gabriele Trupp, MA; Sam Houston State University

Guardianship refers to the legal process by which it is determined if an individual no longer has the ability to make decisions for oneself regarding a variety of matters and, if not, designates someone to make those decisions for the individual. If someone is designated incapacitated to exercise personal, property, or both responsibilities, they became a “ward.” Texas statutes regarding wards are found in the Texas Estate Code Chapter 1101 and note the court may appoint a physician to examine the proposed ward. Furthermore, Texas Code 1101.104 notes that psychologists are only clearly permitted to conduct these examinations in cases of intellectual disability. The following paper revisits the extensive qualifications of psychologists to conduct evaluations for guardianship, not just in cases of perceived intellectual disability, and addresses the importance of allowing psychologists this ability alongside physicians, due to the growing need for competent evaluators of guardianship.

AREAS WHERE TEXAS STATUTES ALLOW PSYCHOLOGISTS TO CONDUCT EVALUATIONS

Psychologists who are duly trained and experienced in Texas enjoy the ability to conduct evaluations for a variety of legal purposes. The most notable is in the evaluation of competency to stand trial (CST) found in Chapter 46B of the Criminal Code. Chapter 46C and specifically 46C:102 refers to qualifications of both physicians and psychologists in evaluation cases regarding the insanity defense or Not Guilty by Reason Insanity (NGRI) plea. Another clear instance in which psychologists may exam an individual is N-648, the Medical Certification for Disability Exception, in which the person is applying for U.S. Citizenship and requests an exception to the English and civics testing requirements for naturalization because of physical or developmental disability or mental impairment. The form is found under U.S. Citizenship and Immigration Services.

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Department of Disability Services (DDS). As part of the CE, the mental status examination must be conducted by a licensed physician or licensed psychologist. Once a patient has been determined to be disabled and awarded benefits, an individual may apply through DDS to become that patient’s guardian.

EVALUATIONS FOR GUARDIANSHIP

There are many areas of focus during an evaluation of guardianship, including the psychological consequences of guardianship, the assessment on specific functions relevant to the individual, and how an individual’s weaknesses may be alleviated by a guardian (Melton et al., 2018). The American Bar Association on Law and Aging and the American Psychological Association (2006) describe six elements of a comprehensive assessment of capacity: 1. Medical condition, 2. Cognition, 3. Everyday functioning, 4. Values and preferences, 5. Risk and level of supervision, and 6. Means to enhance capacity.

Scholars recommend that all of these elements can be more accurately assessed through clinical interview and observation, psychometric assessment, and garnering information from collateral sources (Dudley & Edmonds, 2018; Melton et al., 2018). Clinical interview and observation include the assessment of the evaluatee’s behavioral patterns, psychometric assessment most commonly includes assessment of cognitive functioning, and all components include the imperative ability to competently consider how cultural factors affect both the evaluation and the outcome. Both the Uniform Guardianship and Protective Proceedings Act (1997) and the Uniform Guardianship, Conservatorship, and Other Protective Arrangements Act (2017) recommend that these evaluations be performed by physicians, psychologists, or other individuals who are qualified. However, as aforementioned, the State of Texas only deems psychologists qualified for guardianship cases in which intellectual disability is thought to be relevant.

Psychologists as Examiners across the U.S. and the District of Columbia Rothke, Demakis, and Amsbaugh (2019) conducted
The aging population in the U.S. is rapidly growing, with 16.3% of the population consisting of individuals aged 65 years and over (United States Census Bureau, 2019). In the U.S. one in 10 people age 65 and older suffers from Alzheimer’s disease, the most common cause of dementia, and the number of people affected by Alzheimer’s dementia is only expected to increase as the population continues to age at a rapid pace (Alzheimer’s Association, 2020).

There is a growing number of individuals burdened with forms of dementia and thus susceptible to financial and personal exploitations (Lichtenberg, 2016). The Elder Justice Act passed in 2010 was the first comprehensive legislation at the federal level to address the abuse, neglect, and exploitation of seniors. Psychologists are extensively trained in the assessment of cognitive and emotional functioning and the impacts of such on activities of daily living such as dressing, eating, and bathing, as well as instrumental activities of daily living such as driving, shopping, meal preparation, and management of finances. In reviewing Texas Statutes, Rothke and colleagues (2018) found that Estate Code 1101 indicated that psychologists may act as a sole examiner in cases involving intellectual disability but found the statutes “unclear in other cases” (p. 236). With the aforementioned increase in the aging population, the number of guardianship evaluations needed could rise further underscoring the need for competent individuals – including psychologists – to perform these evaluations.

CONCLUSIONS

Currently, the State of Texas only allows psychologists to perform guardianship evaluations when there is a perceived concern of intellectual disability. However, with extensive education and training, psychologists are uniquely qualified to perform guardianship evaluations with a more diverse array of populations and presenting problems. With the increase in populations that may need an evaluation for guardianship, such as individuals with dementia, it would be wise to increase the number of competent and eligible evaluators. Therefore, Texas would benefit by psychologists being granted parity with physicians in conducting these evaluations.

REFERENCES


Tex. Estates Code § 1101.103 (c).
Tex. Code of Criminal Procedure § 46B

2021 Legislative Session
Kevin Stewart, JD
March 15, 2021

The legislative session is officially underway! After months of delay due to the pandemic, the budget crisis, and most recently, the winter storm, committees have finally started hearing bills. For reference, the first bill hearings last session were towards the end of February, so we are at least a couple of weeks behind schedule. That does not seem too terrible on its face, but in a session limited to only 140 days, a couple of weeks can mean hundreds of dead bills that would have otherwise survived.

The other big event that occurred recently was the bill filing deadline, which was March 12th. All of the delays earlier on with bill filing were certainly made up for at the deadline. On the 12th, nearly 1000 bills were filed, which is truly incredible. There were not quite as many bills filed in the days leading up to the deadline, but it certainly was ramped up. While this session did not match the number of bills filed in typical sessions, it came surprisingly close.

There have been a ton of great bills filed, including some that apply specifically to psychology licensure. On the more general bills, HB 4 (Rep. Price), one of the Speaker’s priority items, would instruct Medicaid to expand reimbursements for telehealth services. It expressly includes audio-only behavioral health services. HB 515 (Rep. Oliverson) would require private insurers to reimburse telehealth services at the same rate that they reimburse in-person services. Lastly, HB 3396 (Rep. Meza) is a standalone audio-only behavioral health coverage bill within the Medicaid program.

Outside of our telehealth priority items, TPA was able to get nearly all of its legislative agenda introduced. HB 1697 (Rep. Raney) would create an exemption to the Licensed Sex Offender Treatment Provider licensure for psychologists who complete certain training requirements. HB 1462 (Rep. Goodwin) would allow properly trained psychologists to diagnose and prescribe. Last but certainly not least, HB 549 (Rep. Thompson) and SB 1143 (Sen. Zaffirini) would protect mental health providers from suit when they report someone who they believe is a danger to themselves or others.

We are extremely delighted with the results from bill filing, and we are excited to work with legislators and stakeholders this session on all of these important pieces of legislation. Without a doubt, this will be one of the most difficult sessions to pass bills in recent history, but the more things normalize around the capitol, the more optimistic we become. Please stay tuned for further updates and opportunities to engage with the capitol this session.
Case Management Referrals

When your clients with special needs have Medicaid, refer them to case management for help finding services.

Our case managers are licensed social workers or RNs. They understand your clients’ complex needs and can help access medical, behavioral health, educational and other services.

Children enrolled in Medicaid (Traditional Fee-for-Service and STAR) may be eligible. Clients enrolled in STAR Kids and STAR Health should first be referred to their health plan.

To refer your client, call Texas Health Steps at 1-877-THSteps (1-877-847-8377) or visit https://hhs.texas.gov/case-management-provider.