

Undergraduate Research Symposium May 19, 2017 Mary Gates Hall

Online Proceedings

POSTER SESSION 2

Commons West, Easel 40

1:00 PM to 2:30 PM

Socioeconomic Status and National Mental Health Disparities: The Moderating Role of State Policies

Kayla Lowe, Senior, Social Welfare

Mary Gates Scholar, UW Honors Program

Mentor: Melissa Martinson, Social Work

A recurring relationship between low socioeconomic status (SES) and poor health outcomes has been substantiated in recent research, both at individual and broader geographic levels. Research increasingly suggests that increased social spending and the expansion of the welfare state has the potential to address SES disparities in health. Yet, some studies have concluded that welfare expenditures merely correlate with child health outcomes, failing to significantly impact adult health disparities. This study examines the intersectional relationships between state-level SES, state social and healthcare policies, and state-level mental health status. The primary aims are to first verify the kind of relationship that exists between SES and mental health outcomes for state populations, and then to detect whether state policy can moderate this relationship. State-level SES, social welfare generosity, and mental health outcomes are mapped using Geographic Information Systems (GIS). It is expected that this study reveals state social welfare expenditures as having a weak moderating influence on the relationship between SES and mental health outcomes. These findings form the foundation for future research which will use a multilevel approach to understanding the various intersections between individual-level SES, state-level SES, individual-level health, and social welfare generosity.

SESSION 2A

POWER MADE VISIBLE: IMAGE, IDENTITY, NARRATIVE ACTIVISM

Session Moderator: Julie Villegas, English

MGH 171

3:30 PM to 5:15 PM

* Note: Titles in order of presentation.

Seeing Red: Maoist Rumors, Hidden Transcripts, and the End of the 2014 Everest Climbing Season

Ian D Bellows, Senior, International Studies

UW Honors Program

Mentor: Maya Magarati, School of Social Work

Himalayan adventure travel is a burgeoning industry in some mountainous regions of Nepal. The development of a trekking and expedition mountaineering infrastructure has created vital employment opportunities in remote areas and allowed visitors to embark on life-changing explorations. However, with the rapid, uneven, and largely unregulated growth of this industry have come environmental and resource challenges, the creation of new economic and social arrangements, and renewed questions of equity and safety. This intersectionality revealed itself dramatically on April 18, 2014, when a serac collapsed on Mt. Everest's Khumbu Icefall and killed 16 Nepali high altitude workers. After several contentious days of deliberation and protests at Base Camp, the climbing season effectively ended when rumors began to circulate that attempts to continue climbing would be met with violence by individuals purportedly associated with the Communist Party of Nepal (Unified Marxist-Leninist). In this investigation, I combine the theoretical framework of James Scott's transcript theory with the interpretive frame of Susan Birrell's treatment of Everest as a text to be read and analyzed to show how rumors of Maoist involvement, though unsubstantiated, encapsulated specific anxieties and dominant preconceived notions about the structure and function of the Himalayan adventure travel industry. A traumatic and seemingly incomprehensible event created an ambiguous space where dominant discourses could be anonymously engaged with and challenged even as they shaped events in real time, a process of recontextualization that blurred the boundaries between a jointly-constructed public transcript of heroic adventure and hidden transcripts that portray far more polarized and nuanced views of sociopolitical orderings. My research reveals how spread of this particular rumor at a particular moment in time betrays both the discursive power of Everest itself and reveals quite unconsciously the essential structural features that order the social, economic, and political life of the remote Himalaya.

SESSION 2D

THE HEALTH OF THE PUBLIC

*Session Moderator: Clarence Spigner, Health Services
MGH 234*

3:30 PM to 5:15 PM

* Note: Titles in order of presentation.

Racial Disparities in Washington State Healthcare: The Case of Total Knee Replacement Surgery

*Winifred Clarke (Clarkie) Hussey, Senior, Social Welfare
UW Honors Program*

Mentor: Gunnar Almgren, School of Social Work

Previous research demonstrates that patients of color are significantly less likely than white patients to receive total knee replacement surgery (TKR), a generally effective and safe treatment for end-stage knee osteoarthritis. These disparities have been found for adults of all ages and of racial/ethnic backgrounds including Black, Latinx, Asian-American/Pacific Islander, multiracial, and First Nations patients (although research has concentrated on Black-white disparities and seniors), and persist even when controlling for insurance type and income. This study investigates utilization rates of TKR in Washington State in 2013 in four different geographic area types (rural low-income, rural higher-income, urban low-income, and urban higher-income), comparing rates for each group by calculating odds ratios. In order to focus on the role of race in physician-patient interactions, odds ratios will be adjusted with logistic regression for age, gender, overall “comorbidity burden” as calculated by the Deyo index, insurance type, and median income in the patient’s zip code. Data for the study comes from the 2013 Washington State Inpatient database, which is derived from hospital billing records and includes roughly 85% of all hospitals in the state. It is important to note that hospitals’ methods of demographic information collection are frequently inaccurate, and findings for First Nations patients in particular cannot be interpreted with confidence. Regardless, Black, Latinx, Asian-American/Pacific Islander, multiracial, and First Nations patients are all expected to have lower odds of receiving TKR compared to white patients, a finding which will strengthen the growing conclusion that racial disparities exist independently of access factors and thus that physician-patient interactions likely play a role. No prediction about differences in racial disparities by geographic area type is offered, but these results may lead to new hypotheses about the pathways of the disparities.

SESSION 2D

THE HEALTH OF THE PUBLIC

*Session Moderator: Clarence Spigner, Health Services
MGH 234*

3:30 PM to 5:15 PM

* Note: Titles in order of presentation.

Assessing the Learning Needs of Social Workers in Washington State: Working with Clients with Traumatic Brain Injury

*Larka Elizabeth (Larka) Angell, Senior, Social Welfare
UW Honors Program*

Mentor: Megan Moore, Social Work

An estimated 1.7 million people in the United States suffer a traumatic brain injury (TBI) each year. Depending on the location and severity of trauma, this injury to the brain may result in any number of seriously debilitating cognitive deficits, impaired physical functioning, mental health or behavioral problems. From the time an individual sustains a TBI, to the time of their discharge and/or referral to post-acute rehabilitative care, they will interact with many health-care service providers, including social workers. Social workers are in a unique position to contribute to positive health outcomes for clients in many stages of recovery, provide mental health services, discharge planning, vocational rehabilitation and more. However, the prevalence of knowledge and training about TBI among social workers is not known. In order to assess the extent to which social workers serve clients with TBI, and to define their knowledge of TBI and assess training needs, I, in collaboration with my mentor developed an anonymous survey and distributed it to social workers in Washington State. Respondents were asked to rate their level of familiarity with TBI in practice, note sources of knowledge and other information. The survey was distributed by email to 7,394 social workers registered with Washington State Department of Health, and I recorded and analyzed responses using both qualitative and quantitative data processing tools. Survey responses will be used to add to the current body of data on the state of social work practice with clients with TBI (in Washington State), and to inform training approaches and continuing education on TBI for social workers.

POSTER SESSION 3

Commons West, Easel 4

2:30 PM to 4:00 PM

Mediating Factors in the Association Between Male Childhood Sexual Abuse and Sexual Risk Behavior

*Sylvia Marie Woods, Senior, Social Welfare
UW Honors Program*

Mentor: Kelly Davis, Social Work

Childhood sexual abuse (CSA) in males is a significant public health concern in the United States. Male survivors of CSA are less studied than female survivors, despite current literature suggesting that the CSA experience may differ by gender. Multiple studies have found that CSA is associated with a range of negative long-term outcomes in both genders, including increased sexual risk taking in adulthood. Sexual risk taking is typically defined as behaviors which increase the likelihood of contracting a sexually transmitted infection (STI) or experiencing an unplanned pregnancy, having multiple sexual partners, using alcohol or other substances before sexual activity, and forgoing condom use. Past literature has highlighted several potential pathways from CSA to sexual risk behavior, including mental health, emotional regulation, and sexual motives. These factors are negatively impacted by CSA, and may in turn increase the likelihood of sexual risk behavior. The present study aims to evaluate (a) whether CSA and sexual risk taking are associated in a community sample of 321 adult males, and (b) whether the association between CSA and sexual risk taking is mediated by mental health, emotional regulation, and sex motives. Data was taken from self-report questionnaires. A T-test will determine whether CSA is associated with sexual risk taking in this sample. Mediation analyses will assess significant mediating factors linking CSA and sexual risk behavior. It is expected that CSA and sexual risk taking will be significantly associated, with survivors of CSA reporting more sexual partners and more unplanned pregnancies. Mental health, emotional regulation, and sex motives are expected to be significant mediators of the relationship between CSA and sexual risk taking. The present study has implications for practice and future research by indicating potential intervention and research targets for male survivors of sexual abuse.

versity and early behavioral indicators of risks for entering the juvenile justice system and the role of cultural connection and social support as protective factors against the negative effects of adversity across different ethnic groups. Data was collected using baseline and Wave 9 data from the Fragile Families and Child Well-being Study (N=4,898). The measured variables were parental adversity, cultural connections, and social support to investigate the relationship between childhood adversity and externalizing behaviors. Findings provide evidence towards the potentially increased risk and vulnerabilities of children exposed to multiple adversities in childhood towards later involvement in the juvenile justice system. This study showed that there is a positive relationship between childhood adversity and externalizing behaviors, where greater adversity was significantly associated with worse externalizing behavior ($p < .01$). Social support was a significant protective factor for all ethnic groups. Additionally, results show that cultural connection and social support are promising resources that could mitigate adversity's impact on behavioral risks and vulnerabilities of young children. Examining protective factors in the context of early exposure to adversity helps to identify potential targets for preventive interventions.

POSTER SESSION 3

Commons West, Easel 41

2:30 PM to 4:00 PM

Childhood Adversity: The Role of Social Support in Reducing Externalized Behaviors

Cynthia Piedra-Santos, Senior, Social Welfare, Law, Societies, & Justice

UW Honors Program

Mentor: Sharon Borja, Social Work

Early childhood experiences determine future success in well-being, school, work, and in the community. Adversity creates an accumulated number of risks that are potentially damaging and could contribute to greater vulnerabilities for negative health and social outcomes, including the likelihood of entering the juvenile justice system. Recidivism of offending from the juvenile into the adult years is higher for people who start offending at an early age. My research project focused on examining the relationship between childhood ad-