

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION MINORITY FELLOWSHIP PROGRAM AT THE AMERICAN NURSES ASSOCIATION

THE STATISTICS STUDY GROUP

Introduction

The Substance Abuse and Mental Health Services Administration (SAMHSA) Statistics Study Group (SSG) at the American Nurses Association (ANA) was created to ensure the success of the Minority Fellowship Program (MFP) Fellows as pioneering scientists and clinicians committed to improving health care for ethnic minorities in local and global communities. The SSG Model is designed to assist the Fellows and stakeholders with conceptualizing the purpose, structure, process and outcome measures that are embedded in the SSG. Participants in the SSG range from MFP Fellows in pre-doctoral programs to MFP alumni, all committed to the generation of science, theory, and the evaluation of best practices in the prevention and treatment of substance abuse and mental health disorders across the life span and in a variety of settings.

Purpose

The SSG Model depicts the purpose of the MFP SSG that is entwined with the mission of the SAMHSA MFP: generate nurses who are recognized for excellence in creating, transmitting, and utilizing knowledge and skills to improve the health of people in local and global communities. The SSG was organized in January 2006. The Fellows who participate in the MFP SSG are matriculating in pre- and post-doctoral programs at various colleges and universities throughout the United States. Other participants may be MFP alumni who wish to enhance their research and statistical acumen.

The SSG Domains: Process and Outcome

As indicated by the SSG Model, there are three domains involved in the achieving the desired outcome—the activities in the SSG, the cohorts, and leadership roles. These domains follow a linear progression that is guided by public policy and evidence-based practice. Public policy is also evident through out the Model, reflecting its influence in each of the three domains. Public policy, ensconced throughout the SSG Model, will assist the Fellows to promote and support leadership excellence in education, scholarship, research, and clinical practice that address health disparities in local and global communities. The Model also offers opportunities for the Fellows to galvanize their knowledge and skills sets that are required to translate theory, research and evidence-based practices into tangible approaches designed to improve the health of underserved populations in the world community.

DOMAIN ONE

After about three months of assignments and discussions related to scientific inquiry, it was determined that a weekly electronic class (eClass) was needed to assist the Fellows with the acquisition of knowledge and skills in scientific research and translation. Hence, the first domain [2nd major box in the Model] was established as it depicts the activities that are used to achieve the desired outcomes of the SSG initiative: weekly eClasses, teleconferences, homework assignments, emails, partner dialogue, and so

forth. These activities are repeated each week, and reinforced overtime, as needed. A protocol was implemented to communicate the minutes (notes) of the eClasses to the participants. Included in this protocol are the date, a list of the participating Fellows, the topic, specific content, assigned readings, and references as indicated. Every week, a Fellow volunteers to be responsible for making the eClass notes available within 48 hours to the rest of the participants. These data are posted in the Fellows' Workroom and are available 24 hours each day on the website at www.emfp.org.

DOMAIN TWO

Pedagogical inclination is reflected in the second domain [3rd major box in the Model]. Current and future Fellows will be assigned to cohorts. Cohort One was created in January 2006 initially consisting of four Fellows. Currently, there are six individuals in each cohort, of which there are three. Cohort Two was implemented in April; and, in May 2006, the SSG became mandatory for all funded Fellows and the third cohort was established. Hence, most MFP Fellows are involved in a cohort. A partnership subsystem is at the foundation of the cohorts. Each Fellow in a designated cohort has a partner who supports, shares knowledge and skills, and reinforces rehearsals related to specific statistical tests or research designs, and other learning related activities. Every cohort has a weekly eClass and complies with the protocol implemented in domain one.

Within this structure are three facilitators who are nestled within the cohorts and available to the Fellows for critique, feedback, and online discussion. They are recent MFP graduates and/or post doctorates, who are junior faculty members at research universities. A PhD statistician and economist (Professor) leads the weekly eClass discussions, generates the assignments, and provides data for review and analysis.

DOMAIN THREE

In the third domain [4th major box in Model], the development of leaders with renowned expertise in the prevention and treatment of substance abuse and mental health disorders is anticipated and expected. During this development, the scholarly pursuits of the Fellows will contribute to their leadership development in education, practice, and research. As indicated by the Model, these achievements will lead into the fourth domain.

DOMAIN FOUR

The fourth domain [5th major box in Model] illustrates the concrete methods that are implanted in the SSG for the reduction and elimination of health disparities in local and global communities. Significantly, the SSG Model is entrenched in the relentless pursuit of the acquisition of knowledge and skills necessary for the successful completion of pre- and post-doctoral programs. The dissemination of these knowledge and skills sets can occur through a variety of methods, including publications and podium and poster presentations in local and global communities. At the core of the SSG Model is the capacity for the Fellows to strengthen leadership in a multitude of professional activities that expansively impact research, public policy, and practice. Specifically, they include the successful awarding of private and federal grants and contracts, life long learning and thriving in academic settings, achieving excellence in clinical practice, conducting research that advances the science in substance abuse and mental health disorders, and translating the science into service.

Conclusion

The SSG has been created to assure that the SAMHSA mission, its priorities and cross-cutting practices will be addressed in an exemplary fashion through the leadership of the MFP Fellows. Importantly, it is under girded with the belief that all individuals who suffer from the burden of substance abuse and mental health disorders should receive culturally competent and evidence based prevention and treatment interventions that are entwined in science and translated into best practices.