Episode 256—Dr. Lawrence Palinkas: Translation and Implementation of Evidence-Based Practice

[00:00:08] Welcome to inSocialWork, the podcast series of the University at Buffalo School of Social Work at www.inSocialWork.org. We're glad you could join us today. The purpose of inSocialWork is to engage practitioners and researchers in lifelong learning and to promote research to practice and practice to research. We educate. We connect. We care. We're inSocialWork.

[00:00:37] Hi from Buffalo. I'm Peter Sobota. As this episode is published Lin Manuel Miranda is wrapping up a three week run of his musical Hamilton on the island of Puerto Rico. 2017's Hurricane Maria ravaged the island and resulted in the deaths of over 3000 people. Today the folks in Puerto Rico continue to deal with the human and environmental consequences of Maria and are striving for resilience in the face of that enormous natural disaster. The mental health problems and the inequality based hardships borne by the people of Puerto Rico and their ongoing needs are no doubt of interest to our guest. In this episode our guest, Dr. Lawrence Palinkas discusses his research seeking to identify the best ways to not only develop evidence based practices for helping people, but also making sure that these practices are implemented and are improving outcomes. Coming from a transdisciplinary and social justice framework, Dr. Palinkas describes his interest in solving social problems that are rooted in cultural differences with special emphasis on promoting evidence based practices and social responses to extreme environments within the context of social welfare services. Bridging research to practice, Dr. Palinkas argues that building relationships amongst researchers, practitioners, and the people they serve, will result in shared understandings, better implementation of evidence based practices, and new more effective practice settings and cultures. Lawrence Palinkas Ph.D. is the Albert G. and Francis Lomas Feldman professor of social policy and health and chair of the Department of Children Youth and Families in the Susan to Work School of Social Work at the University of Southern California where he also holds secondary appointments as Professor in the departments of anthropology and preventative medicine. Dr. Palinkas was interviewed in November of 2018 by our own Dr. Louanne Bakk, Clinical Assistant Professor and Director of the DSW program here at the UB School of Social Work. And, related to the idea of implementation science, the UB School of Social Work will launch a part time fully online Doctor of Social Work degree program in fall of 2019 that will focus on helping licensed practitioners to bridge research and practice and implement that knowledge in clinical and practice settings.

[00:03:00] I'm here with Dr. Larry Palinkas, who will be talking to us today about implementation science. And Larry thanks so much for joining us. What I'd love to do is begin by asking you to tell us just a little bit about yourself and how long have you been in the field of social work?

[00:03:15] Well I should probably begin with full disclosure, I wasn't trained as a social worker and my involvement in the field of social work actually began in 2005 when I was recruited to be part of the faculty of the School of Social Work at the University of Southern California. Yet even though I was trained as an anthropologist I suppose that the same issues that motivate people to become social workers motivated me to be an anthropologist. Actually I decided at a very early age to become an anthropologist when my family moved from Canada to the United States and I was amazed at how little Americans knew about culture, and not only their own culture but the culture of other people. And this was particularly at the height of the Vietnam conflict when we were fighting in a foreign country but knew very little about the Vietnamese. So I entered into the field with the idea of being an applied anthropologist, not only in the sense of teaching other people about culture but solving social problems that were rooted in cultural differences and I suppose that made me an ideal fit with social work when I joined the faculty at USC.

[00:04:26] I was going to say that. Just thinking about your background and really where you came

from from this seems to me to be a natural fit for the field of social work. So could you tell me a little bit about the focus of your research?

[00:04:39] Well my career has spanned many different areas and many different topics but at the present time I've tried to narrow it down to two major thrusts or two major areas of interest. The first has to do with the dissemination and implementation of evidence based practices with a particular focus on child welfare and child mental health. But I've also become involved in the American Academy of Social Welfare and Social Work Initiative to create grand challenges to address major problems, Social problems. The one that I had elected to focus on deals with the social responses to climate change and other changing physical environments that create inequality and disparities in a wide variety of areas of social life.

[00:05:29] Very interesting, very interesting. I'm just curious what drew your interest into those areas.

[00:05:34] Oftentimes it's a function of serendipity which has motivated my research, but certainly with respect to child welfare and child mental health, I think my interest in this area really stems from the realization that we've been devoting a great deal of effort to solving major problems dealing with growing up, and not only here in America but throughout the world, and those problems often manifest themselves in the development or incidence of mental health problems like depression and anxiety or behavioral health problems like Attention Deficit Hyperactivity Disorder, conduct disorders in school. And even though we've spent hundreds of millions of dollars trying to develop solutions to these problems we haven't done a very good job of actually getting youth serving systems to use them routinely or use them as they were developed. And so I've been focused on the fact that there seems to be a disconnect between coming up with all these wonderful treatments, programs and initiatives, but actually using them in routine practice. And it's so important for this population not only because it's estimated one out of every four or five youth have a mental health problem at any one point in time. But the fact that very few of those youth actually get the services they need. So it's estimated about 20 percent. Then the interest in climate change really came about through work that I had done before I even entered the field of social work that focused on how people adapt to extreme environments. I've done work in places like the South Pole and Antarctica or I've run experiments on how people interact on the International Space Station with the idea of knowing that humans have historically been a very adaptable species is there something that social workers can do to contribute to the adaptations to climate change that is occurring right now? So I think that led to a concern as well as the fact that the health and well-being of future generations is a social justice issue and unless we begin to start developing strategies for helping communities and vulnerable populations adjust now, we're only contributing to those inequalities in the future.

[00:07:55] Yes, and I think it's just not developing strategies that are effective strategies because I know a number of different approaches but they may not always be the best to deal with the problem.

[00:08:03] Exactly. And not only developing effective strategies but making certain that those strategies are used, hence the implementation phase.

[00:08:12] Absolutely. I know you touched on this a little bit but could you go into a little bit more detail about the problems that you're trying to address in these two areas?

[00:08:19] So as I said, it's estimated about one out of every four or five youth experience a clinically significant mental health problem. And the fact is that some populations of youth are greater risks. For example if you're in the child welfare system, which you normally enter into

because of abuse or neglect. About 50 percent of those kids usually have a mental health problem that needs to be addressed. The same is true if you've been involved in the criminal justice system. It's estimated 70 percent of those youth have mental health or behavioral health problem. And if we're not solving the problem at that level they grow up to be adults with mental health or behavioral health problems who then raise the next generation of children with those problems. So it's really the need to break a cycle. That's the problem that I'm trying to...

[00:09:12] The problem just continues to evolve over time.

[00:09:15] Right. And certainly with respect to climate change as we're seeing both with the hurricanes that impacted Florida and North Carolina a few months ago, the wildfires that last few weeks have affected communities in California, that climate change is resulting in more people being exposed to more disasters of greater severity. And we just don't have a good handle on how to prepare communities for that and what kinds of services we should be delivering to those communities once they occur. We've also see a number of people even if they've not experienced a hurricane if they live in an area that's been affected by prolonged drought and their economic livelihood is devastated, they end up having to move. And in fact it's now been estimated for every one person who's been displaced by civil conflict, like the conflict in Syria, three are being displaced due to climate change.

[00:10:08] Oh my gosh, I was not aware of that.

[00:10:10] So what kinds of services do they need and how do you deliver them? I think above all climate change is a social justice issue because vulnerable populations are affected more by climate change. Climate change is likely to result in more people being vulnerable and the fact that they lack the resources to rebuild, to move away, makes the issue of equity much more prominent and trying to address the needs of this population.

[00:10:39] So given their social standing its going to impact them at a greater level than it would otherwise for other populations.

[00:10:44] Very much so. Right.

[00:10:46] It sounds like two very large problems. What are you doing to address these or solve these problems?

[00:10:51] So much of my work to date has been in identifying the barriers to successfully implementing evidence based practices. Sometimes those barriers exist at the level of the individual social worker, the way they were trained, their attitudes about adopting new practices, their belief in the efficacy of these practices. Sometimes that relates to the organization and there is no money to send people to be trained or it doesn't fit with the philosophy or culture of the organization. And sometimes it's a function of the interventions themselves. They can just place too many demands on staff in order to do well. I've also been looking at developing and evaluating strategies that are designed to overcome these barriers and facilitate successful implementation. So bringing practitioners and researchers together in partnership started learning collaborative, we're building networks for example, are strategies that I've been focusing on. And then a lot of my work has been on developing innovative methods, understanding implementation and measuring implementation process and outcomes. With respect to the grand challenges, similarly I am interested in developing and evaluating evidence based practices to meet the needs of disaster impacted communities and populations, developing similar and implementing similar practices for displaced populations. And even in the area of using sustainable development to create healthy communities, how do we implement programs that can reduce the disparities that occur in that process as well.

[00:12:27] So could you give us some examples of how are doing this in your current research?

[00:12:32] Well yeah I can give you a few examples. I have a project now that's funded through the National Institutes of Health to develop a way of measuring the likelihood of sustaining prevention programs and initiatives that are funded by SAMHSA. So as you know SAMHSA funds a lot of states, communities, tribal entities, college campuses to implement prevention programs on things like suicide prevention or alcohol and substance abuse. And the intent of the measurement system is really to get a handle on how to you know a program continues to exist once that SAMHSA funding goes away and how do you predict the likelihood of that. But it's not just a matter of measurement but how do you then use the information you gained from those measures to provide feedback to a grantee to let them know how well they're doing and what they should be doing that would increase the likelihood of implementation.

[00:13:29] And what needs to change within that model?

[00:13:31] Exactly yes. So I'm doing that. Another project that I'm going with my colleague Fred Wilson who's based in Chapin Hall in Chicago where we're looking at developing a way of training child welfare agencies to use the administrative data that they routinely collect to make decisions about whether or not to adopt evidence based practices in their agencies and how to implement those practices. So it really stands on training them how to use research evidence and then looking to see whether that training actually produces a difference in child outcomes. So we'll be measuring child outcomes in terms of the classic trifecta and child welfare, safety, permanency and well-being.

[00:14:17] Well it sounds like taking existing data that they're already collecting and then actually giving them a means or a way to use that data to actively shape what they are doing with their clients afterwards. Which I know for myself being a practitioner for a number of years we always collect a great deal of data, but we don't always effectively use that data.

[00:14:36] Right, I know. Which sometimes makes you question what's the point of my filling out this form again?

[00:14:40] Yes, why am I doing this?

[00:14:42] Yes. A third project that I'm currently working on is in collaboration with a colleague of mine who is a psychiatrist at a site at the University of Washington. He's been long involved in evaluating the adoption of clinical guidelines established by the American College of Surgeons for screening and treatment of alcohol use disorders and PTSD in people who come to emergency room settings. And so he's been collecting information on the extent to which clinics adhered to those guidelines. But in the process of doing that we've come up with a way of conducting qualitative research that maximizes the efficiency and reduces the time involved in qualitative data collection and analysis. We call that technique RAPFCE for Rapid Assessment Procedure and Form Clinical Ethnography. It's kind of like intellectual Reese's Pieces where you're combining peanut butter and chocolate to create something that's better than either one alone. We're using techniques of rapid assessment procedures, which is the way of conducting ethnographic research in a fairly short period of time, with clinical ethnography, which is using people with clinical expertise to conduct participant observation and clinical field work. So we tag team with doctor Zatzick collecting data as a clinical expert and then my helping to evaluate it and analyze it as the mix method consultant to that project.

[00:16:13] I'm eager to hear what you learned from all of this work?

[00:16:17] Well everyone perhaps takes away something from this work which is related to their own interests or their own perceptions and their own perspectives on the challenges involved in implementation. I suppose I've come away from it with a very profound understanding and respect for the role that relationships play, not just in all social life but certainly in our efforts to solve the problems of social life. And so certainly I think that in a sense just like social work I considered to be a transrelational science. You have to build relationships in order to improve relationships and it takes relationship building among all of the different social workers who are involved in solving these problems. That's what makes a trans relational. And the same is true with implementation science. It takes building relationships between academic researchers, practitioners and policy makers in order to facilitate improvements and building relationships of the clients that we serve.

[00:17:20] So we need to move beyond some of the silos currently exist then within different settings and actually work more collaboratively to come up with some creative solutions.

[00:17:29] Yes, very true. I also see it as being a transaction. So our traditional model of change of any form, somebody comes up with a great idea, they disseminate it, people are naturally going to see how brilliant that idea is or how brilliant that intervention is and immediately start using it. It rarely works out that way.

[00:17:49] I was going to ask you, does it work out that way.

[00:17:51] Yeah not so much. And so one can think if this really does involve a partnership or collaboration, both have to get something out of that partnership. And part of what they get out of that is what they contribute into it. Sounds like any relationship marriage or otherwise you get out of it what you put into it, correct? In this sense, in the implementation sense each brings to that collaboration a certain expertise, certain knowledge certain ways of doing things which provides an opportunity to teach their partners, much like people who develop these practices teach a therapist, social workers, clinicians to use but they're also having the opportunity to learn from that experience as well. So there is much that practitioners and policy makers have to teach academics. And unless we begin to realize that we really won't move very far in our efforts to implement evidence based practices, because it's not really an equitable relationship and it's not a mutually beneficial relationship. And then because of that opportunity I also see implementation as transformational. It gets researchers to think differently about what it is they're trying to do and how to go about doing it in much the same way that their intent is to get practitioners and policymakers to think differently. So when you begin to develop shared understandings about the problem and the solution is when you begin to effect building a new culture. One that is associated with a greater likelihood of producing better outcomes.

[00:19:25] Well it seems like each are coming with their own distinct view of the situation but by sharing we're more effectively solving the problem, yes?

[00:19:32] Yes.

[00:19:33] What theories inform your work?

[00:19:34] Well initially I was taken with a theory that came out of the field of rural sociology called Diffusion of Innovations and it was developed by sociologists by the name of Everett Rogers and came about by learning from the experiences of introducing new ways of growing corn in Iowa. But that theory has actually been applied in a number of settings and nowadays in the field of implementation science Diffusion of Innovations underlies a lot of the models and frameworks that we use to understand the challenges or barriers to successful implementation and identifying strategies to overcome those barriers. So there are dozens of these different consolidated framework

for implementation research, for example. The Exploration Preparation Implementation and Sustainment framework, or EPIS framework, the National Implementation Research Network, NIRN has its own framework. I've kind of drawn from my training in anthropology that looks at the role that transactions play in social change in general to understand how innovations and the implementation of innovations occur in social service settings so that a transactional theory of implementation or a transactional model of implementation is what I have been moving towards as I've learned more and more from the work that I've been doing.

[00:21:00] So that sounds like that's the primary theory you've been using?

[00:21:02] It has emerged as such, yeah.

[00:21:05] Why did you get involved in doing this kind of research?

[00:21:07] Well as I said, I really see raising healthy kids as the foundation to raising a healthy society or having a healthy functional society is the biggest challenge that we face, and creating solutions that no one uses seems like a waste of money, a waste of potential for breaking that cycle of impaired youth and the dysfunctional society that raises them. I've been concerned about the welfare of our kids and despite the naysayers of climate change, seeing it firsthand now and thinking about the likely consequences when my children, my grandchildren become adults, where they're going to have to face. That's nothing I can turn my back on. And as I said, my prior research has really focused both on how you ensure the best quality delivery of services, whether it's to children who are in child welfare system and have been put into foster care or whether you're talking about an astronaut on a long duration mission and how do you provide support to them and to the family that they leave behind. These are things that I feel very strongly about because seeing that people in need of services and the failure to get the services they need has strongly motivated this interest.

[00:22:27] I share your concern. Just from my background in watching people really going on with unmet needs throughout a long period of time. Now I also can relate issues that you talk about children who are growing up because it ultimately is going to impact their whole aging process. I work more on the other end of the spectrum, the older adults, and what we know from theory research is that when someone is disadvantaged early on, the problems aren't met it just carries through the whole life course.

[00:22:52] Yes.

[00:22:53] And it's going to impact how well the age ultimately. So I had asked why you got involved but why should social workers even care about someone you shared with us today?

[00:23:03] Well if you'd really don't want to do what's best for your clients this is not a profession you want to be in. So they want to do and it's obvious, that's what motivates people to go into the field, that's what keeps people engaged. But it's clear that any single evidence based practice may not be best for every client, and every circumstance with the same client. So many of the things that describe that we've developed might not work for everyone and it might not work in every instance. At the same time it seems to me a little point of continuing to use something that we have no evidence that it works. And there are times when people have used things that we know don't work out, not only don't work but can produce harm. So we want to make social workers secure in the knowledge that what they're doing is the best possible choice that they can make, that there's evidence supporting that choice and give them a feeling that they're likely to generate a successful outcome when they make that particular choice.

[00:24:01] And it sounds like even training them to step back and think about what they're doing with a particular client and whether or not this is truly effective. And whether we need to modify or change what we're doing.

[00:24:12] Yes. I also think that one of the things that social workers are really really good at doing is bringing people together. And implementation is an issue or an approach that I see requires bringing different stakeholders together. So whether it's researchers and practitioners, whether it's practitioners and their clients, that's what social workers do. And that's what they have the potential of doing in terms of leading the field and not simply being a participant in it.

[00:24:42] And it's something that comes natural to us I believe.

[00:24:44] Yes.

[00:24:44] So how can social workers become involved in solving some of these problems?

[00:24:49] Well much of the field of implementation science is increasingly being viewed as transdisciplinary, where you bring people together who represent different disciplines like social work, sociology, psychology, Management Science, Public Health to solve common problems. Somebody needs to manage though those interactions, because as we all come with different ideas, different philosophies different approaches to problem solving and social workers, I think given their training in mediation and conflict resolution are ideal for leading these efforts. Not merely having a place at the table but directing the activity of these groups. I think we can also ensure that disparities aren't being perpetuated by our efforts to solve these problems. So the fact is we're dealing often with problems that are the consequence of economic social educational income disparities. But many times those solutions can end up either ignoring or perpetuating those disparities. And somebody needs to be there to ensure that that doesn't happen. And I think social workers play a very important role in that respect.

[00:26:02] I know oftentimes policy is created or programs are created based on one model that don't take into account some life factors that may have happened or disparities that may have occurred throughout the life course. So this seems like a way that we can actually help to resolve some of those issues moving forward. So what's next for you?

[00:26:19] Well one of the areas I'm increasingly becoming involved in now is how we translate not only from research to practice but translate that evidence based practice from the United States elsewhere.

[00:26:32] Oh, interesting.

[00:26:35] So we're starting a study now in El Salvador that is essentially designed to reform the child welfare system there and in so doing hopefully reduce the number of youth who have either been exposed to violence or perpetuate violence in El Salvador, which as you know has one of the highest homicide rates in the world and a lot of gang violence. Doing a similar project in Africa where we're working with colleagues at Columbia University to establish what we call an implementation hub. So not only are systems of care here in the United States trying to deal with implementing new programs and practices but even in very low resource settings like Mozambique for example, one of the poorest countries in the world, the idea of delivering mental health services using community health workers is a potential solution to the lack of availability of services or the lack of access to services. In a more research rich country like Norway I'm involved in a project that is looking at addressing the mental health needs of refugees from Syria and Afghanistan, Somalian war-torn countries that are also countries affected by climate change. In fact climate change may

have perpetuated the civil conflict in Syria, for example. But how you get them into the mental health system and then what you do with them once you've gotten them in. So there is a possibility of using interpersonal therapy as a way of treating depression in a niche refugee populations. So I'll be collaborating with colleagues in Bergen Norway on that. And then, right now I've just finished writing a book on the science of delivering evidence based practice to at risk youth. I signed another book contract to write a book about public health and population displacement related to climate change so providing illustrations of how communities have been impacted by both disasters as well as long term climate change and what their needs are in terms of service delivery.

[00:28:41] It sounds like you've got some very exciting and very important endeavours that you're about to move into, or if you haven't already, some of these.

[00:28:50] Well hopefully it'll take me to some new and interesting locations.

[00:28:53] I think it will, it definitely sounds that way. So is there anything else you'd like to share with our listeners before we conclude?

[00:28:59] Just that I'm happy to participate in a podcast like this and that I think certainly for a social work audience that may have not seen themselves as doing something other than what they were trained to do, that the social work training is a lifelong experience and as much as people who have funded that experience through research have come to realize, sometimes it takes serious consideration about the challenges involved in putting all of that training into practice and anything that we can do to make that easier and make it a more enjoyable experience I think really drives the work and implementation science.

[00:29:42] Yes, I try to instill that in my students as I'm sure you do as well, that it is really a lifelong process learning and there's always so many more opportunities to learn and improve what we're doing in the field of social work. Thank you so much for your time, and it really was an honor and privilege to have the opportunity to talk with you.

[00:29:57] Well it was my pleasure as well.

[00:29:59] You've been listening to Dr. Lawrence Palinkas discuss the translation and implementation of evidence based practice on inSocialWork.

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