Florida Mental Health Institute Research Library

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Mental health services research & policy collection: ARL Collection Initiative

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ARL COLLECTION INITIATIVE BUSINESS PLAN

MENTAL HEALTH SERVICES RESEARCH & POLICY COLLECTION

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I. EXECUTIVE SUMMARY

Mental illness is a significant international public health issue. Mental, neurological, and behavioral disorders are common to all countries and cause immense suffering. People with these disorders endure social isolation, poor quality of life, and increased mortality. Further, these disorders are the cause of staggering economic and social costs. With the increase in natural and man-made disasters, the incidence of mental illnesses has grown exponentially, creating large at-risk and vulnerable populations. Both the United Nations and the World Health Organization stress the importance of treating mental illnesses to improve population health by focusing on vulnerable and at-risk populations.¹

An ARL-level mental health services research and policy collection will support, not only the international and national goals of improving mental health; it also positions USF (USF) within the renowned health services research community, becoming peers with other major university health services research centers. These include Johns Hopkins University (Bloomberg School of Public Health), University of North Carolina at Chapel Hill (Cecil G. Sheps Center for Health Services), Northwestern University (Institute for Policy Research), Boston University (Center for Psychiatric Rehabilitation), University of California, Los Angeles (UCLA Center for Health Policy Research). All of these universities have major health services research and policy foci, advanced degree programs, research agendas, and ARL Libraries.

The further development of the mental health services research and policy collections, with the foci on disaster mental health and vulnerable populations and the improved access to related mental health services research grey literature, directly supports USF's stated goals. It expands the university's capacity for world-renowned interdisciplinary research. It supports globally competitive undergraduate, graduate, and professional programs addressing significant societal and public health issues. It advances local and global engagement initiatives by faculty and community partners to strengthen and sustain healthy communities and to improve the quality of life. ARL-quality collections and services would fulfill the goals of the USF Library system: to establish interdisciplinary research services, expand and develop electronic, print, and multimedia collections of excellence, and enhance use of special collection resources of national distinction.

I. BACKGROUND & CURRENT STATUS

The USF Louis de la Parte Florida Mental Health (FMHI) Institute is one of thirteen mental health services research facilities in the United States (see Appendix 1). Created in 1974 by the Legislature to expand the state's knowledge about how best to serve the mental health needs of Florida's citizens, the Institute embodies the process of 'research to knowledge to practice.' The Institute is directed by the state legislature to respond to the most pressing of all mental health issues, to solve real-world problems, and to direct its resources and those of its public and private partnerships toward meeting community needs. Home to five national research and training centers, the Institute conducts hundreds of community-based studies each year in close collaboration with consumers, family members, providers, and government partners throughout the United States.

The FMHI Research Library at the USF has supported mental health services and policy research since 1974. Its core monographic and serial collections focus on managed behavioral health, health care reform, outcomes and accountability, behavioral health services research, and public health policy that is unique within the state university system and the nation. The FMHI collection was created for policy-makers, health services researchers, practitioners, and the consumer community with an interest in strengthening mental health systems, with a clear focus on translating research to practice, and best practice to policy. Further, it was noted as a small but distinctive collection by the ARL counselor during his preliminary review of the USF Library system.

The Library's original *Long Range Planning Document* (1974) included traditional bibliographic, interlibrary loan, and reference services. Today, the FMHI Library services far exceed the standard triad, with expansion into more complex research support services, including literature reviews, selective dissemination of information (SDI), grants reviews, and meta-analytic methodologies. In 1976, FMHI Library was one of the first libraries in the state university system to provide online searching capability, with access to the National Institute of Mental Health Clearing House. In 1987, it added Grateful Med, the National Library of Medicine's online search system for medical information, affording access to more than 6,000 journals.

The next decade brought various computer-based collections (CD-ROMs) until the advent of the internet, when, in 1991, FMHI Library became the first USF Library to provide end-user internet access with its gopher. Then the Library's electronic selective dissemination program, the "Loop" was introduced, covering grants information, legislative news, research news, table of contents of special topic journals, and routing of the first electronic psychology journal, *Psycology*. The following year, FMHI Library debuted its Mosaic homepage, which enhanced access to the Library's holdings via

Netscape. By 2000, Library staff created an online streaming video database as part of the university's NSF Internet 2 project grant and, in 2004, the Library developed a webbased training directory as part of a SAMHSA grant.

In addition to its academic constituency, the FMHI Library serves as a seminal resource to numerous state agencies and their staff, professional practitioners, private and public sector organizations serving individuals with serious mental illnesses, substance abuse and addictive disorders, and developmental disabilities within Florida and nationally. It also serves the larger mental health consumer population, which is comprised of persons with psychiatric disabilities, members of their families, and advocacy groups and organizations (see Appendix 2).

COLLECTIONS

In 1974, the FMHI collection consisted of a 3,000 volume reference collection with an additional 3,287 monographs and 232 periodicals, cataloged with NLM classification and MeSH. The collection scope ranged from neurophysiology and psychology through social welfare and sociology to religion and philosophy as well as materials on psychosomatic medicine. Also acquired were other informational formats, including microforms, 35 millimeter filmstrips, and videotape recordings. In those early years, a separate patient library was modeled after the public library for skills training for the Institute's over 1,000 patients, cataloged in Dewey to facilitate daily living skills training with the clients and their therapists. Book and journal donations came from individuals as well as from the state offices and other institutional facilities.

Since 1985, when the Institute became part of USF, its Library continued its emphasis on evidence-based approaches to mental health care strategies that are effective and appropriate as well as cost-effective and sustainable. It continues collecting works on policy formulation and service delivery in public mental health and in other health and human service sectors at the state, national, and international levels. The staff and patient collection has merged, with over 40,000 print monographs, 200 print journals, and access to hundreds more monographs and journals online, accessible via the USF Libraries' catalog. Currently an estimated 6000 monographic items, most of which are FMHI publications, remain uncataloged, thus with very limited accessibility.

With the Institute's emphasis on taking research to practice, today's collection integrates parent, family, and consumer materials with academic and research materials. All the collections have been converted to the Library of Congress classification and subject headings. The Library has also been the beneficiary of a number of significant collections from private donors and state commission papers (see Appendix 3).

The FMHI Library's core monographic and serial collections focus on managed behavioral health, health care reform, outcomes and accountability, behavioral health services research, and public health policy that is unique within the state university system and the nation. The FMHI collection was created for policy-makers, health

services researchers, practitioners, and the consumer community with an interest in strengthening mental health systems, with a clear focus on translating research to practice, and best practice to policy.

Much of the grey literature housed in the Library is archival, including Institute publications and a number of small historical collections specific to mental health issues in Florida, such as the Child Welfare Commission Papers, the Chiles Commission Papers on Maternal and Child Health, and two collections donated by Colleen Bevis, a well-known child advocate in Florida and Charles Mahan, a former Director of Health for the state of Florida. These archival materials have provided valuable fieldwork and independent study experiences for graduate students from the School of Library and Information Science at USF, including the recent cataloging of the Florida Commission on Mental Health and Substance Abuse papers, the first of the collections to be digitized.

Other significant collections include:

- The Streaming Video Database in Support of Mental Health Education and Training resulting from an Advanced Networking Infrastructure and Research Grant of the National Science Foundation (#ANI-9810154) awarded to USF. A searchable database of on-line video archives was developed, capable of being viewed across a number of network bandwidths ranging from 56 kb/sec. up to 1Mbit/sec, to further the dissemination of knowledge about various mental illnesses and to lessen the stigma associated with them. [http://www.fmhi.usf.edu/library/projects/i2.html].
- The Directory of Web-based Training Resources for Mental Health and Substance Abuse Professionals Working with Children and Adolescents, a federally-funded subcontract of the Substance Abuse and Mental Health Services Administration (SAMHSA) Human Services Workforce Project.

 This is an online directory of web-based training resources made available by federal agencies, technical assistance centers, and other private and public providers intended for the publically-funded human services workforce serving children and adolescents with behavioral health disorders within community-based service delivery systems. This directory has been in continuous use since 1999, and was demonstrated nationally at the March 2000 Annual meeting of Internet2 in Washington D.C. [http://www.fmhi.usf.edu/samhsa/].
- The Advocacy Center for Persons with Disabilities Recovery Collection, a joint project recently announced by the Advocacy Center for Persons with Disabilities, Inc., the FMHI Library, and the Florida Peer Network. This specialized research collection includes first-person accounts, handbooks, and reference works of interest to individuals with psychiatric disabilities within the state of Florida, including classics of consumer/survivor literature such as

a http://lib.fmhi.usf.edu/advocacycenter

On Our Own by Judi Chamberlin, On Our Own, Together by Sally Clay, Common Threads from the Florida Peer Network, as well as reference guides such as the DCF Baker Act handbook.

SERVICES

There are three challenges in offering library services to mental health services researchers. The first challenge is to be cognizant of what information is needed and to interpret the data within its socio-economic framework, describing it and making it accessible to the user community. The second challenge is to reinterpret traditional patron interactions in an increasingly online service environment, using applications that 'push' information to the patron. The third challenge is to configure instruction and instructional support to meet the needs of a variety of users, including librarians, so all users achieve appropriate levels of information competencies. To meet those challenges, the FMHI Library offers a number of individualized services to its faculty, staff, and students, including literature reviews, current awareness and selective dissemination of information (SDI), grants research, document delivery/interlibrary loan, and instruction.

LITERATURE REVIEWS: There is high demand for literature reviews in support of research projects, grant applications, technical reports, and scholarly publications. These target current reviews of the literature, update previously conducted literature review, and write methodologies for literature reviews in grant proposals. Each literature review is carefully documented as to databases searched, subject headings/key terms, and project scope. Staff also assist in the development of white papers, the provision of cite checks, and critical review of manuscripts.

One example of an extensive search of the literature was conducted on the relationship among family violence, child abuse, juvenile crime, criminal behavior, and school behavior problems to provide both a historical and an interdisciplinary view of the work done in the areas of violence and its relationship to subsequent behavioral, delinquency, and criminal tendencies. A copy of the results was given to all members of the Florida Inter-University Consortium for Child and Family Studies to be used as a base for reports and analyzes as designated in the state contract. Library staff then worked with the investigators awarded the grant, ran searches, and provided advanced training on databases and bibliographic software to manage the literature review.

<u>CURRENT AWARENESS AND SDI:</u> Staff establish table of contents alerting services for faculty as well as weekly search updates from a variety of USF, government, and other online databases. "The Loop" is the library's current awareness tool, which highlights behavioral health law and policy, services research, treatment, and news. Subscribers include USF faculty, mental health professionals, legislative and agency personnel, mental health advocates, and persons with mental illnesses and their family members.

GRANT SUPPORT/COLLABORATION: The FMHI Library staff explore and disseminate possible grant opportunities for faculty as well as contributing content to grant applications. Often a FMHI librarian is written into grants and contracts specifically to provide literature reviews, critical review of draft reports, and to provide SDI/current awareness for specific topical areas over the period of a grant/contract. In 2008, for example, 30% of library staff is assigned to grant –supported activities. Library staff also maintain a grants database, documenting every grant/contract application that Institute faculty and staff prepare for submission (see Appendix 4).

<u>DOCUMENT DELIVERY/INTERLIBRARY LOAN</u>: Document delivery and interlibrary loan services are heavily used by FMHI faculty and staff. The last fiscal year (2007-2008) saw a 37% increase in the number of borrowing requests, primarily due to the increase in student users (Lending: 1122 items; Borrowing, 2042 items).

<u>INSTRUCTION</u>: The FMHI Library provides one-on-one, small group, in-class instruction, and on-line instruction on how to effectively use information resources, conduct literature reviews, customized to specific goals outlined in faculty syllabi. Library instruction also incorporates applicable information literacy skills to achieve targeted student-oriented outcomes.

REFERENCE AND RESEARCH SERVICES: The FMHI Library routinely handles reference and/or research requests from mental health professionals, Florida agency and legislative staff, other state agency staff, and consumer/family member/advocate requests. In response to many of these requests, staff have created fact sheets, compilations, chronologies, and statistical reports. A variety of specialized library services, including literature reviews, syntheses, weekly news updates on topical areas, and tables of contents services, are available to our external constituency. For the sake of brevity, the following table reflects the breakout of reference questions by our major non-USF patron groups.

Table 1. Number of Transactions by Patron Type by Yea

	Total Trans-	USF & other academic	Florida	FL	Other state/ national agency	CSX/ family member/
YEAR	actions	settings	agency	legislative	staff	advocate
2003-2004	18000	12197	1697	51	42	4013
2004-2005	17500	11797	1593	42	87	3981
2005-2006	17320	12471	1212	36	74	3527
2006-2007b	16100	11965	1121	29	58	2927

^b Full-time library staff reduced due to serious illness event

Table 2. Percent of Major Themes

42%	Best practices in X field c	
26%	Statistics;	
20%	Treatment/clinical,	
12%	Law and legal issues	

OTHER SERVICES: Increasingly researchers work and teach in a collaborative online environment and greatly benefit from bibliographic citation software management programs (ProCite, EndNotes, and RefWorks). Training sessions lead faculty and staff through the process, from strategizing the search to gathering the resources to creating databases, encompassing "cite while you write" skills so users can effortlessly incorporate references into a manuscript as they write.

The FMHI Library provides promotion and tenure review support services, such as information on journal rankings and impact factors, citation analyzes of publications, tracking of monographic publications, indexing and abstracting sources, and reports across national and international libraries, among others. Such qualitative and quantitative indicators are fundamental to institutional review of individual research throughout the promotion process and are often highlighted in annual reports to the Provost.

Library staff were also involved in the creation of a Globalization Portal (GP) prototype, a partnership among globalization researchers, librarians, and information technology experts across four universities - the George Washington University, the University of California -- Los Angeles, The University of Hawai'i-Manoa, and USF -- to establish an electronic site where researchers can identify, evaluate, access, and use a wide range of globalization resources.^{2,3}

Programming

Examples of current FMHI programming are:

- The "3-I's" Distinguished Lecture Series which brings accomplished national experts to the University to profile their scholarship and research activities, with a focus on "insight, innovation and impact,"
- The "Brown Bag" series that showcases faculty research over informal lunches,
- The "Getting Grants" series that focuses on increasing faculty capacity for obtaining federal funds to support their research, and
- The Senior lecture series of the Osher Lifelong Learning Institute at USF.

In addition, several national and state conferences are hosted by the Institute. These include the Research and Training Center for Children's Mental Health annual

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^c Fields: mental health, psychology, social work, corrections/criminal justice, psychiatry and nursing, and public health. Primary subsets: training and professional development issues; adoption, diffusion and barriers to implementation; and higher education

conference (national, 22^{nd} year), the National Crisis Intervention Team (CIT) Conference (national, 2^{nd} year), the annual HIV Conference (state/regional, 16^{th} year) hosted by the USF AIDS Education and Training Center, and the Florida Coalition for Optimal Mental Health and Aging (state, 10^{th} year). FMHI and the USF Collaborative for Children, Families & Communities host an annual Fall Art Exhibition to showcase the work of Tampa-Bay area artists with mental and physical disabilities. The FMHI Library hosts several small art collections year-round by persons with mental disabilities; occasionally the art is displayed in the Library.

FACILITIES & INFRASTRUCTURE

The FMHI Library is housed in an approximately 7100 square foot area at the FMHI MHC building, and includes an ADA accessible front entrance, and other specified accommodations. A second entrance is from the main MHC core. Seating is available for fifty patrons, with open seating, five carrels, and two study rooms. There are two public access desks and three staff offices, with limited archival storage and processing space.

Supported by FMHI's IT group, the Library provides access to seven public access computers as well as an on-site wireless network. Due to its location in a HIPAA-compliant facility, network printers and copiers are addressed by FMHI IT staff in concert with USF Tampa Library staff.

PURPOSE

INTERNATIONAL, NATIONAL, AND STATE PERSPECTIVES: The World Health Organization (WHO) defines mental health as "a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community."

Research estimates that 14% of the global disease burden is due to mental disorders. Further, the WHO estimates that about half of mental disorders begin before the age of 14,7 from which approximately 20% of the world's children and adolescents suffer, with similar types of disorders being reported across cultures. Further, mental illnesses also increase the risk for developing many physical illnesses and are major risk factors for communicable and non-communicable diseases and unintentional and intentional injury. At the same time, many health conditions increase the risk for mental disorder, and complicate diagnosis and treatment.

At a national level, the United States affirms the importance of mental illnesses as a significant public health issue, starting with the "National Mental Health Act" (Public Law or P.L. 79-487), one of the first major organizational and financial commitments by the U.S. federal government to behavioral health policy and services research. In 1963, then-President John F. Kennedy's "Bold New Approach" message to Congress⁹ called for an intensified search for the etiology of mental disorders, strengthening resources and more highly skilled human resources in mental health; and improving programs which served individuals with mental disorders. The President's New Freedom Commission recommended a fundamental transformation of the Nation's approach to mental health care. The Commission envisioned a

"future when everyone with a mental illness will recover, a future when mental illnesses can be prevented or cured, a future when mental illnesses are detected early, and a future when everyone with a mental illness at any stage of life has access to effective treatment and supports -- essentials for living, working, learning, and participating fully in the community." ¹⁰

Florida's response to the national mental health legislation was to establish, in 1967, the Florida Mental Health Institute, to serve as its mental health services research facility. Located at USF, the Institute examines the gap between research -- what is

known about best practice and evidence-based medicine -- and policy and services delivery.

<u>DEFINITIONS & OVERVIEW</u>: Mental health services research is two-pronged.

Clinical research examines clinical treatments under highly controlled experimental conditions, by including factors such as costs, reimbursement mechanisms, treatment ideologies, and personal and organizational interests that affect how providers actually deliver services.

Service systems research is the study of the impact of the organization, financing, and management of health services on the quality, access to, and outcomes of care delivered efficiently, economically, and equitably. It encompasses a broad and eclectic set of questions and issues. These include identifying the nature and scope of local needs; matching local services to needs; structuring integrated care that reaches the consumer; allocating financial resources; economics and financing of care (cost-efficacy/effectiveness studies); and providing proper protections and incentives to use services appropriately. It also addresses legal and legislative issues; policy analysis; outcomes, impact, and implementation; recovery paradigms; civil rights; and stigma and strategies for changing attitudes.

Both areas encompass population studies (refugee, migration, & diaspora), epidemiology, population health, including disaster studies (man-made and natural that impact people's health) and apply quantitative, qualitative, and econometric methods of assessment.

Mental health policy encompasses all of these areas, whether it is at a local, state, regional, national, or international level, coordinating, through a common vision, all programs and services related to mental health. It defines the vision for the future mental health of a population, establishing coordinates for programs and services related to mental health across all governmental levels and service providers. Mental health policy is intricately linked to human rights legislation and standards, as well as the larger health policy and legislation area, and to national and international law. Mental health law or other legally prescribed mechanisms, such as regulations or declarations set standards for implementation, enforcement, and policy development.

WHY THIS COLLECTION: The Millennium Development Goals, which emerged from the United Nations Millennium Summit in 2000, are increasingly recognized as the over-arching development framework for health and mental health at the international level. Both the United Nations and the World Health Organization stress the importance of treating mental illnesses to improve population health by focusing on vulnerable and at-risk populations. In the United States, "FY 2009 Administration Research and Development Budget Priorities," published by the Executive Office of the President, Office of Management and Budget, federal emphases are placed on interdisciplinary and international social science research activities that "enhance the health of our Nation's

people to reduce the burden of illness and increase productivity while respecting the inherent dignity and value of every human life." $^{14 (p. 2)}$

Any population can become an at-risk population, i.e., everyone is potentially vulnerable (or at risk) to developing a mental health problem. However, the risk is greater for those with the least social status, social capital, and human capital resources. These individuals are often unable to prevent or ameliorate the origins and consequences of poor physical, psychological, or social health. With the many diverse cultures and the increase in refugee, immigrant, migratory, and displaced populations within the United States, the completeness and accuracy of information on the health status of vulnerable populations varies substantially across groups. Services research seeks to understand the prevalence and incidence of mental illnesses of these populations. Longitudinal and epidemiologic reviews of services and illnesses, for example, require the analysis of the course of individual disorders over time, which may be lost when they are presented embedded in general summary statistics.

In addition to persons with mental illnesses, substance abuse disorders, or developmental disabilities, vulnerable populations include persons who have HIV/AIDS, persons who are homeless (estimates now at one million plus men, women, or children homeless on any given night), an increasing proportion of immigrants who are refugees carrying with them the physical, psychological, and social wounds of war, children who have suffered physical, sexual, or emotional abuse, victims of domestic violence, perpetrators of intentional acts of violence towards oneself or others, among a host of populations who may suddenly find themselves now at risk. 17-21 Most recently, the numerous manmade and natural disasters, such as the Oklahoma City bombing, 9-11, Hurricane Katrina, the tornados in the Midwest of the United States, the recent earthquake in China, the cyclone in Mynamar, and the tsunami in Indonesia, have resulted in large numbers of displaced populations, which has the consequence of a significant burden of disease, socioeconomic vulnerability, and marginalized health care access. 22-25 Further, the mental and social health burdens present a formidable challenge for health infrastructures. Long-range and emergency recovery efforts must now understand at-risk and vulnerable populations in a more global context.²⁶ Services delivery must address international models of rights-based care, as well as new models of treatment, such as a tripartite framework of gateway, core and ancillary services, which parallel screening and assessment, treatment, and supportive services, including health promotion and training of health workers²⁷⁻²⁸ (see Appendix 5).

Within the behavioral, health, and social sciences, the health services and policy research conducted at the de la Parte Institute (FMHI), and across USF, provides greater insight into the relationship between environmental, biological, physiological and cultural influences in the provision of care to populations across the lifespan and across state, national, and international systems with a focus on at-risk, or vulnerable, populations.

PROJECT SCOPE

At a national level, academic and scientific collections play an important role in public health and safety and medical research. In the United States, Federal agencies are developing a coordinated strategic plan to identify, maintain and use current collections and to further collections research, to develop the capacity of Federal science policy decisions to achieve national goals^{14 (p. 7)} This same type of activity is seen across the nation-states of Europe,

"Access to and sharing of data are essential for the conduct and advancement of science ... publicly funded research data should be openly available to the maximum extent possible. To seize upon advancements of cyber-infrastructure and the explosion of data in a range of scientific disciplines, this access to and sharing of publicly funded data must be advanced within an international framework, beyond technological solutions." ^{29 (p. 135)}

Building openly accessible desktop collections, via the Internet, to distributed resources, enhances national and global collaborations, as well as contributes to the intellectual, analytical and investigative output of the public and private sector's academic, research, and scientific communities. The National Institutes of Health emphasizes data sharing is "essential for expedited translation of research results into knowledge, products and procedures to improve human health." With this in mind, ongoing evaluation is done of scientific collections supported or used by U.S. Federal and state agencies, private and public sector organizations, and international organizations. In addition to a commitment to continue the depth and scope of the tangible collection, the intent is to harvest content archived across these collections to increase government and public awareness of the importance and uses of content specific to mental health services research and policy.

The areas of emphasis address capturing international, national, and state level policy and research on mental health needs and services delivery to displaced populations. A variety of scholarly publications, data, and media can be harvested from public and private sectors, local and international partners, and further enhanced with metadata for global access.

There are two primary areas for development in the next three to five years. The first focal area is on services to vulnerable populations, starting with a focus on disaster mental health services. As defined in the overview section, this area will capture and build intellectual content on services delivery, policy, and population, including refugee, immigrant, migratory, and displaced populations within the United States and internationally. It will also contain information on the health status of vulnerable populations, including prevalence and incidence data, longitudinal and epidemiologic reviews of services and illnesses, and policy affecting and effecting practice and research. This focal area will strategically overlap in content with the

Genocide Studies Collection, but will be focusing on the impacts of trauma on children from a mental health services and policy perspective couched within a larger longitudinal and developmental framework.

The second focal area addresses the existing quantity of grey literature on international, state, and national task forces, committees, and agencies dealing with how best to deliver services to specific persons with mental illnesses, broadly defined in the definitions section. Much of this material is historical, ranging from the 1960s to current. Many of the Florida and national documents are not available through OCLC or through DocLine. These documents address public sector care and infrastructure care for children, adults, and the elderly. Since Florida historically has been a destination state, diverse ethnic and national status populations are addressed in these documents. Within the government documents center in the Tampa Library, there are numerous international, Federal, and Florida documents that are also unavailable online through their current catalog records (see Appendix 6). These items range in format from paper to microform. Grey literature will be sorted and prioritized, with first priority given to processing documents that directly enhance depth of collection in the vulnerable populations' focal area.

COLLECTIONS: The intent of this ARL initiative is to add approximately 12,000 items over the next three to five years to build a core collection of ARL quality in two content areas: Disaster Mental Health and Vulnerable Populations and Grey Literature in Mental Health. The Disaster Mental Health and Vulnerable Populations collection focuses on services to vulnerable populations affected by disasters. This area will capture and build further content at a national and international level. Search strategies using Library of Congress Subject Headings as well as Superintendent of Documents Headings can be used to search for relevant materials (see Appendix 7). Grey Literature in Mental Health concentrates on international, state, and national task forces, committees, and agencies existing in uncataloged materials at FMHI and the Policy Exchange Online collection at the Missouri Institute of Mental Health. To create these deep collections of distinction, we plan to:

- 1. Harvest, clean, and import the metadata
- 2. Acquire multi-disciplinary, relevant items in tangible and intangible formats (paper/media in print or OP and online); most relevant classification areas,

General LC Classification areas relevant to Initiative:							
BF	BF Psychology G Geography HM Sociology K Law						
C,D,E,F	C,D,E,F History GN Anthropology J Political Science R Medicine						

- 3. Receive permission from issuing agencies to digitize select items; create appropriate bibliographic control
- 4. Upload ALEPH bibliographic records OCLC, and

5. Address accessibility priorities, such as digitization projects, targeted cataloging, materials format conversions.

The two projects will include the following formats:

- 1. Monographs (print & digital)
- 2. Numeric and statistical data, including
 - a. Prevalence and incidence data,
 - b. Longitudinal and epidemiologic reviews of services and illnesses,
- 3. Media resources (digital and CD), and
- 4. Serials/journals (print & digital)

DISASTER MENTAL HEALTH AND VULNERABLE POPULATIONS

Disaster Mental Health and Vulnerable Populations will capture information from potential partners as noted above, as well as other academic partners identified through WorldCat collection analysis. Monographic, media, databases, and serial resources will be acquired to deepen the existing collection at USF. All materials (print and digital) will be cataloged into ALEPH. Digital resources then may be ported to DigiTool as an additional finding tool. A number of websites and existing online collections have been identified as to contain relevant documents for the collection (see Appendix 8). Using search terms such as "refugee" and "mental health," a survey of federal document items cataloged in the USF Library reveals a diverse collection of items. The number of items in the collection reflect collections in other academic libraries in the same topical areas, such as at Johns Hopkins University Library and at UNC Chapel Hill Library (see Appendix 9). In addition to the depth of the collection, a portal will be created that showcases resources and services. The Disaster Mental Health portal will:

- 1. provide a search of USF resources using calls to ALEPH,
- 2. contain RSS feeds.
- 3. provide a current awareness service ("disaster mental health loop") for users who prefer email delivery to the desktop or who have firewall restrictions,
- 4. enable calls to databases, such as Current Contents and PubMed, to showcase citations to weekly updated materials,
- 5. feature a "New This Week in the Collection" that showcases new books, journals, databases, maps, and web resources, and
- 6. host relevant open access journals.

This specifically supports the Genocide Studies Collection, addressing the impacts of trauma on children from a public health and mental health services and policy perspective, couched within a larger longitudinal and developmental framework.

GREY LITERATURE IN MENTAL HEALTH

Creating access to Grey Literature in Mental Health would begin with items (print and video) currently in the FMHI Library collection, especially those directly relating to disaster/vulnerable populations. All items will be cataloged in ALEPH. Digitized items may be ported to DigiTool as an additional finding aid. In the future the collection may contain documents from two possible partnership organizations: The Missouri Institute of Mental Health's Policy Information Exchange Online and selected, permissioned documents from the World Health Organization.

The Grey Literature in Mental Health collection will do the following:

- 1. Metadata creation
 - a. 5,000+ existing FMHI uncataloged state and national documents,
 - b. 1500+ uncataloged media in the FMHI Library, and
 - c. 5000+ items from the Policy Information Exchange Collection currently housed at the Missouri Institute of Mental Health.
- 2. Digitization
 - a. 5,000+ existing FMHI uncataloged state and national documents, and
 - b. 700+ uncataloged media in the FMHI Library
 - c. MIMH items in image .pdf format convert to searchable .pdf.

In addition to the FMHI and MIMH materials, there is the opportunity to curate the MHA collection as part of the larger Grey Literature Collection. The MHA collection would be a showpiece of the FMHI archives. MHA's archival collection is comprised of 54 archival boxes, 11 wooden crates, 5 brown boxes, and 12 vertical file cabinets. These boxes contain:

- i. The early 1900s correspondence between Clifford Beers and William James regarding the founding of the National Mental Hygiene Association (now MHA);
- ii. The a traveling photographic exhibit of the early 90's sponsored by Mental Health America and Tipper Gore, "Homeless in America: A Photographic Exhibit;" and
- iii. The historical documents of MHA and its earlier iterations.

The correspondence of Clifford Beers and William James discusses the foundation of "The Connecticut Society for Mental Hygiene." Although the Amherst College Archive and the Houghton Library of Harvard are two collections dedicated toward James' correspondence and James' family papers, neither collection has extensive correspondence between the two men. The primary collection dedicated toward Clifford Beers regarding his involvement in the creation of "The Connecticut Society for Mental Hygiene" is located at John Hopkins Medical Archives, within the Adolf Meyer collection. Again, William James' involvement is only mentioned as a footnote. Therefore, the collections of two major figures, James and Beers, at USF, would add

much to the history of mental health in the United States. Further, we will explore the possibility of creating a shared digital James and Beers collection with Amherst, Harvard, and Johns Hopkins.

In 1988, Tipper Gore, co-founder and chair of Families for the Homeless, partnered with the National Mental Health Association (NMHA) in 1998 to produce a major photographic exhibit entitled "Homeless in America: A Photographic Project," which toured the nation. Displayed at the Corcoran Museum of Art, there is very little information written about the Photographic Project. A 95 page photo-book, *Homeless in America* [HV4505.H652 1988], contains many of the pictures, the structure of the contributing organizations, and short excerpts about the main contributing photographers. Most of the information about the project is found through researching Tipper Gore. The *Homeless in America* sub-collection contains photographs, stories of the individuals interviewed for the project, and correspondence between the photographers, Ms. Gore, the Corcoran, and the NMHA. Of note is the 1999 10-year retrospective, "The Way Home: Ending Homelessness in America." Also hosted by the Corcoran Museum of Art, there may be the opportunity to collaborate with the Corcoran in a venture to exhibit memorabilia and ephemera. A partnership with the USF Museum of Contemporary Art may be another possibility.

For the ARL initiative, 125 linear feet of unsorted and un-cataloged offsite material pertaining to the interests of Mental Health America would be cataloged. This portion of the collection contains administrative and project documents. These include Charles Lord photos of asylums from the 1950s, old photos of Clifford Beers, photos from Annual Meetings in the 80s/90s, photos from past Key West Classics, leases from the first office of the association, old audits, framed photos of past board members, awards, old publications, *inter alia*.

Since the MHA centennial is February 2009, MHA is planning a major event in June 2009. The first steps for this collection would be to digitize the manuscripts of Beers and James, as well as selected historical documents in time for the centennial celebration. The project would then select other areas of the MHA archive to digitize and catalog during 2010 and 2011. This project may exceed the three- to five-year ARL timeframe. A website showcasing the collections would be jointly developed with MHA, ensuring that the research and outreach needs of the University and the Association are met.

<u>SERVICES</u>: FMHI's existing services would be expanded to provide delivery of specific content for topics generated by this project. These include:

- 1. Increased reference and research services,
- 2. The generation of white papers, reports, and topical bibliographies summarizing current research and initiatives to be cataloged and digitized,
- 3. RSS feeds,
- 4. Current awareness, and

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d http://clinton2.nara.gov/WH/EOP/VP_Wife/megbio.html

5. Curriculum development for K-12.

<u>PROGRAMMING:</u> More formal programming (face-to-face and virtual) is planned to include description and use of the collections. This list also includes examples of possible programming for the MHA collection:

- 1. The Best Practice Series,
- 2. Statewide training of MH professionals,
- 3. The "Brown Bag" Series,
- 4. Institute sponsored and hosted conferences,
- 5. Art/Museum exhibitions
 - a. USF Museum of Contemporary Art
 - b. FMHI Library
 - c. Tampa Library
- 6. An annual research/study fellowship.
- 7. "Homeless in America: A photographic exhibit" Re-display the exhibit that traveled the museums of America, using photos from the collection along with a display case featuring the video documentary of the exhibit's creation as well as recent books and research relevant to homeless issues. Photos include background stories of the people pictured.
- 8. "Disasters and Mental Health" Informational and graphical focus on refugee and displaced populations and focus on specific populations (women, children, men, elderly, etc.) and national identities. Geo-spatial mapping will be keystone of the presentation.
- 9. "The Correspondence of Clifford Beers and William James Letters from the founders": A display presenting the original documents in storage and [with permission] copies of other significant letters in other collections [John Hopkins] along with biographical material of the men who began the National Mental Hygiene Association.
- 10. "The Origins of Mental Health America": With further information and illustrations related to the organization's development and impact on society's awareness of treatment issues.
- 11. "Trends in Mental Health": Trends in Mental Health": A rotating display on mental health, then and now, highlighting the change in issues and solutions over time, with extracted statements, reports, and biographies from the FMHI and MHA archives.

FACILITIES & INFRASTRUCTURE: The FMHI Library may run out of space in its current location by the end of the first year of this project with the possibility of physically adding the MHA archives, and certainly by the end of the second year of the project as the physical monographic and serial collections continue to grow. Current onsite conditioned storage options are not feasible nor does the acquisition of an adjacent

space appear possible. Use of the adjacent space would be ideal; however, construction modification may be more practical to create the type of space needed.

Although there are available acquisitions, processing and cataloging services, there is not enough capacity to acquisition and catalog FMHI's current uncataloged items (@11,000), and also take on a project of this scope to achieve the status of a deep, ARL-level collection within an optimal timeframe.

FMHI has limited format conversion and digitization capabilities based on current equipment and staffing. There is available web-based content development technical support in the Tampa Library. However, capacity to ramp up digitization efforts for a project of this scale and to marry it with the requisite cataloging and processing is essential.

Items under consideration include:

- 1. Separate building for MH collections adjacent to the Institute (approx. 7,000 sq. ft.),
- 2. Increased capacity for acquisitions, processing and cataloging services,
- 3. Increased capacity for web-based content development technical support,
- 4. Off-site storage consideration,
- 5. Digitization equipment needed,
- 6. Personnel specialists, and
- 7. Network services and capacity.

COMPARATIVE ANALYSIS & NICHE POTENTIAL

In 1989, there were thirty-three state-supported psychiatric research (mental health) institutes (not state psychiatric hospitals). More than half of these organizations were located within a university setting, and a similar number were involved in research, education, and direct clinical services. In 2008, there are thirteen such institutes across the United States. Home to six national and state research and training centers, et he de la Parte Institute, located at USF, is one of the thirteen remaining institutions. The only comparable institute with FMHI is the Missouri Institute of Mental Health (MIMH) that is affiliated with the University of Missouri-Columbia (also an ARL library).

Growing this collection supports a number of goals for the university. USF selected five research focal areas. Mental health is one of the areas. f Such a collection

Initial Areas of ARL Collection Emphasis: Mental Health and Policy Collection July 2008

^e Federal: The Technical Assistance Center on Social Emotional Intervention for Young Children, the National Technical Assistance Center on Youth Transition, the National Technical Assistance Center on Positive Behavior and Intervention Supports, the Research and Training Center for Children's Mental Health; National Implementation Research Network. State: the Florida/Caribbean AIDS Education and Training Center; the Florida Criminal Justice Mental Health and Substance Abuse Technical Assistance.

Personal communication from Junius Gonzales, Dean of the de la Parte Institute.

expands the university's capacity for world-renowned interdisciplinary research. It supports globally competitive undergraduate, graduate, and professional programs addressing significant societal and public health issues. It expands local and global engagement initiatives by faculty and community partners to strengthen and sustain healthy communities and to improve the quality of life. Mirroring the goals of the University, the USF Library system has focused on interdisciplinary research services; electronic, print, and multimedia collections of excellence; and special collection resources of national distinction. Further, the development of such a collection allows USF to be seen as a national leader in *conducting and translating mental health services research*, especially as it relates to policy formulation and service delivery in public mental health and in other health and human service sectors where persons with serious mental illnesses, substance abuse disorders, and developmental disabilities are served.

An ARL-level mental health services research and policy collection supports, not only the international and national goals of improving mental health, it also positions USF within the health services research community, becoming peers with other major university health services research centers. These include Johns Hopkins University (Bloomberg School of Public Health), University of North Carolina at Chapel Hill (Cecil G. Sheps Center for Health Services), Northwestern University (Institute for Policy Research), Boston University (Center for Psychiatric Rehabilitation), University of California, Los Angeles (UCLA Center for Health Policy Research), and the University of Missouri-Columbia (Missouri Institute of Mental Health). All of these universities have major health services research and policy foci, advanced degree programs, research agendas, and ARL Libraries.

The development of an ARL quality collection at USF leverages the existing collection currently housed within the FMHI Research Library, one of the two specialty libraries within the USF Library system, as well as targeted areas across the USF Libraries. It supports the Genocide Studies collection, also in development, through the Institute's Research Library focus on children and trauma through the lifespan at state, national, and international levels.

POTENTIAL PARTNERSHIPS

INTERNATIONAL

At the international level, there are numerous opportunities to partner. Of the many potential partners for the disaster mental health and vulnerable populations focus, there are three to be pursued initially: the World Health Organization Department of Mental Health, the United Nations ISDR and UNCHR, and the Pan American Health Organization's BIREME. Of most interest would be acquiring metadata and links to their materials on mental illnesses, substance abuse disorders, vulnerable populations, trauma, migration, displacement, and refugees, and disasters.

The FMHI Director has contacted Ian Coltart, WHO Press, about the possibility of harvesting their metadata and links to existing materials as well as the possibility of digitizing archival materials in microform or in print that are no longer available in those topic areas. He has asked for a list of items that would be desirable to digitize for this project.

Within the United Nations, there are a number of departments and divisions of interest to the disaster mental health foci. These include the International Strategy for Disaster Reduction, the Office for the Coordination of Humanitarian Affairs, the Central Emergency Response Fund, the Capacity for Disaster Reduction Initiative, and the UN Development Programme Crisis Prevention and Recovery. The same request has been sent to the United Nations Publications Office to see if the same process and permissions can be replicated with them for currently owned UN documents.

BIREME is a PAHO Specialized Center, established in Brazil since 1967, in collaboration with Ministry of Health, Ministry of Education, Secretary of Health of the State of São Paulo, and the Federal University of São Paulo. BIREME's Virtual Health Library (VHL), is accessible in four languages: Portuguese, Spanish and English through the Descriptors in Health Sciences thesaurus, modeled after the National Library of Medicine's (NLM) medical subject headings (MeSH). As a collaborator, we can contribute and expand the language of trauma and disability in BIREME, mapping to established headings and creating new records. There is also the possibility of acquiring the metadata for the English materials and adding them to the USF Libraries catalog.

FEDERAL AND NATIONAL

There are many potential federal partnerships. The Centers for Disease Control and Prevention (CDC) may be a possible partner in that their online publications could be harvested and added to the USF Library system collection. Their emergency preparedness and response site is a wonderful resource of materials, ranging from manuals to videos, addressing all forms of emergency and disaster situations. Other possible partners include the many agencies that deal with mental health and population health, such as the National Library of Medicine, the Center for Mental Health Services (part of the Substance Abuse and Mental Health Services Administration), and areas within the National Institute of Mental Health.

At the national level, a possible collaborator may be the National Association of State Mental Health Program Directors (NASMHPD), whose members are part of the State Mental Health Authorities and their directors at the national level. The association identifies public mental health policy issues and addresses policy implementation at a state level. Any emergency response action or systemic delivery of services to vulnerable populations within the United States would fall under the purview of the NASMHPD.

STATE

The Advocacy Center for Persons with Disabilities, Inc. (Tallahassee) and the FMHI Library are building a recovery-based collection for persons with mental illnesses. Founded with seed money from the Substance Abuse and Mental Health Services Administration Protection and Advocacy for Persons with Mental Illnesses grant, there are several peer networks interested in continuing to build the collection with grey materials published by organizations supporting persons with mental illnesses.

BROADER IMPACTS

Not only does this collection complement the ARL Initiative on Genocide Studies, it establishes the USF Library system as a major holder of significant materials addressing mental health services research on vulnerable populations, builds a robust collection on disaster mental health, and carves a niche in an often neglected area of archive collections. Such collections, with appropriate metadata and richness of description, can be easily parlayed into portals, drawing from and showcasing USF library print, media, and digital collections.

The mental health services research and policy initiative creates the opportunity for the USF Library system to become a producer of materials, using various GIS applications and the compilation of spatial datasets in interoperable formats. It also allows for ease in collaboration across disciplinary boundaries to create new methodologies and fields of knowledge. With more complex service settings, such as a state-wide disaster site, researchers and responders will move away from the traditional two-dimensional vertical overlay of spatial information and toward more complex, three-dimensional data visualizations, web-based map display, availability of data files, and metadata.

The USF Libraries can leverage this initiative to identify functionalities in the "new scholarship." New interoperable and semantic architectures, the internet, and data mining technologies have led to a renewed emphasis on discovery, dissemination, and exploitation. After all, "To catalog the world is to appropriate it," ³¹ (p. 245) allowing access and discovery far beyond an item's original scope.

This ARL initiative has the potential to impact organizations from the grassroots level to the international level, and all organizations in between. New programs and trainings continue to emerge in disaster mental health, disaster recovery, and disaster management. This ARL initiative will be a major resource for academic programs such as the University of Denver International Disaster Psychology program^g and the University of South Dakota Disaster Mental Health Institute degree and certificate programs, and for international trainings offered through the many divisions of the WHO, the UN, and other humanitarian and professional organizations. USF will benefit from the recognition of the excellence of its faculty and depth of its research holdings.

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http://www.du.edu/gspp/degree-programs/international-disaster-psychology/overview/index.html

<u>Management</u>

This is a large initiative that is, by definition, multi-disciplinary. The development of the disaster/displaced populations mental health initiative and grey literature component will require continuous oversight, strong partnerships with faculty and other mental health organizations (e.g., MIMH and MHA), and subject and system knowledge. Leadership can best be provided by the directors of the FMHI and the Tampa Libraries. To create a 'deep' disaster mental health collection will require ongoing, coordinated collection development activities, and to achieve the digitization processes prescribed will again involve shared responsibilities by various administrative/management leaders within the USF Library System.

ACCOUNTABILITY

Operational accountability for the project will be the responsibility of FMHI Library personnel and its Library director and/or project coordinator. Overall, accountability for the ARL initiative is dependent upon foundation support and/or funding provided by the University to the USF Library System.

STAFFING REQUIREMENTS

The optimal use of existing staff with identified expertise will be crucial to containing the costs of this project. Several in particular would be:

Existing Positions	Expertise

FMHI Director and Assistant Librarian	Subject expertise and knowledge, current collections, and the relevant resources/literature
FMHI Information Technology Support	All things technicalneeded for enabling access
Tampa Library Collection Development/ Collection Analysis	Current collections assessment relevant to initiative; selective acquisitions in background titles and resources as they are identified
Cataloging	Original cataloging of grey literature and new acquisitions; metadata for relevant digital materials
Digital Collections & Imaging	Scanning and digitizing of select materials
Website support	Creating website links to further accessibility
Communications Manager	Leadership in programming, marketing and public relations for project
GIS Librarian	Creating geo-mapping data to enhance information presentation, as needed
Acquisitions	Ordering/receiving of purchased titles and serials subscriptions
Preservation	Evaluation of preservation issues related to grey literature and archival materials

Additional ongoing and temporary staff are essential to bring this large project initiative to completion. For the disaster/vulnerable populations' mental health collection, projected estimates are that 3,000 to 5,000 items in both tangible and intangible formats will be acquired. For the grey literature component, approximately 12,000 items between the MIMH Library's PIE materials and the FMHI Library's grey literature will require various levels of processing.

Ongoing staff requests include professional positions that may be shared with work on the Karst and Genocide initiatives as well as temporary or outsourced positions. These include:

ONGOING STAFF		TEMPORARY STAFF	
Metadata Librarian	1	Graduate Assistant(s)	2
Digital Initiatives Librarian	1	Web developer and/or designer (Portal development)	1
Library Operations Supervisor	1	Metadata cataloger(s)	2
Library Specialist(s)	2		

With the University's recent departmental reorganization, the FMHI Library will need additional permanent staff to meet the anticipated increase in demand for services, research support, and also contribute to this project. New staff positions may also help mitigate the portions of Director's and the Assistant Librarian's assigned responsibilities redirected to this project (see Appendix 9).

MAJOR ACTIONS

- 1. Engage USF faculty
- 2. Establish partnerships
 - a. MIMH
 - b. MHA
 - c. State (Offices of Mental Health and Substance Abuse)
 - d. Federal (e.g., NIMH & SAMHSA) and national
 - e. International
- 3. Focus on collection analysis and development
- 4. Seek permissions to harvest relevant datasets from existing databases
 - a. Possible digitization projects
 - i. UN documents
 - ii. WHO documents
 - iii. BIREME
- 5. Identify relevant materials to be cataloged
 - a. Grey literature
 - b. Florida documents
 - c. Federal documents
 - d. International documents
- 6. Hire subject and technical expertise
- 7. Create customized web-portal, which may include
 - a. Disaster Mental Health and Vulnerable Populations documents, data, links to internal and external web-based resources
 - b. Grey Literature, including MIMH mirror site
 - c. MHA
- 8. Investigate journal hosting opportunities/scholarly depository options
- 9. Develop programming

<u>Timeline – Important Milestones</u>

Project	Grey Literature (@10,000 items)	Disaster MH and Vulnerable Populations (@2500 items)	MHA Archive (unknown)
		2008	
August	Grants submitted to NLM Project team identified Agreement signed with MIMH Grants submitted to NLM Grants submitted to NLM		Begin curation discussion for MHA materials
September	Record framework & db configuration sent from MIMH		
		rs identified	
		for necessary positions	
		ndards established	_
		comparisons run	
	Students recruited &	onversion discussion Partners contacted	
	trained	Faithers contacted	
	All items identified and	Sites identified	•
	prioritized	Permission letters sent	
October	Begin importing of Items into ProCite with OCLC #	Begin importing of Items into ProCite with OCLC # /URL	Ship items to FMHI for processing
	/URL coded in each record	coded in each record ons file created	-
		apture and/or store)	
		orldCat comparison	-
November		onographic purchases	1
		of Print Vendors	1
	Preparation	of grants begin	
	Scanning and cataloging of digitized documents begins.		
December	End of PIE data collection. Prepare list for Cataloging		

		2009			
Project	Grey Literature	Disaster MH and Vulnerable Populations	MHA Archive		
January	Cataloging begins	Cataloging begins	Beers and James manuscript digitization/cataloging starts		
February		on refining/defining user measules for site activity & query evalu			
March		Work on portal begins Grants submitted for conference support	Selected historical documents digitized and cataloged		
April			Tutorial work begins Web page created Documents completed		
Мау	Tutorial work begins	Article submitted to CRL News	Materials loaded and available via website for MHA centennial celebration		
		Usage data analyzed			
June	News release about the collection sent to selected agencies, listservs, and librarians.	News releases about the collection. Article in Oracle	News release about the collection sent to selected agencies, listservs, and librarians.		
July		Begin selective GIS	Article submitted to		
August	mapping & data visualizations		CRL News		
September	Introduce portal				
October	Approximately 1/3 of PIE completed	Begin program planning for Disaster MH conference	Next selection begun		
Navanak a :	Register for LibQual Preparation of LSTA and IMLS grants				
November December	Approximately 1/3 of Grey Lit completed	I A and IMLS grants			

	2010						
Project	Grey Literature	Disaster MH and Vulnerable Populations		MHA Archive			
January	Cataloging continues	Create library bro		Cataloging continues			
February	_	LibQual open	Call for papers				
March	_						
April			Review of				
May		LibQual closes	call	Next selection finished			
June	Article submitted to library and MH journals	Article submitted MH journals	to library and	Article submitted to library and MH journals			
July	Website review Usage data analyzed						
August		Final planning for	conference				
September	Grant submissions started	Disaster MH conf	ference	Next selection begun			
October	Article submitted to CRL News						
November	Approximately 2/3 of	Grant submissions started					
December	PIE completed						

	2011					
Project	Grey Literature	Disaster MH and Vulnerable Populations	MHA Archive			
January	Approximately 2/3 of		Digitization continues			
February	Grey Lit completed					
March	1					
April						
May			Next selection finished			
June	Usage data analyzed	Usage data analyzed	Usage data analyzed			
July	Article submitted to library and MH journals	Article submitted to library and MH journals	Article submitted to library and MH journals			
August		CD activity continues	Next selection begun			
September		Assessment				
October	Grey Lit completed					
November	PIE completed					
December	CD activity continues	CD activity continues				

RISK ANALYSIS

As with all important proposals, there are real challenges to be overcome in the accomplishment of such an ambitious project to achieve ARL quality in a specified area of the USF mental health services and polices collections. Some are perceived to be fairly low risk such as building discrete collections, digitizing grey literature in the public domain, and metadata harvesting. Others are expected to demand far greater attention and commitment, such as sufficient staffing, enhanced technologies, sustained financing, and policy issues.

Collections	Permissions from external sources for repackaging data and digitizing
	Resolve the multiple-format (tangible and intangible) access integration
Services & staffing	Potential increase in demand for services from core-curricula audiences which have recently been reorganized within the university structure
	Collaboratively hiring, reallocating, and sustaining a broad range of professional expertise necessary to manage and prioritize three initiatives within three separately defined timeframes.
	Participant roles that accommodate the end user as well as the organizational structure 32,33.
Technology	Harness institutional technological infrastructure available in case of less than adequate Library technical support staffing and expertise.
	Interoperability and effective data quality controls, including portability, and data and semantic interoperability. ^h .
	Depth and richness of metadata for retrieval of complex topical resources.
	Compliance with federal Health Information Privacy and Accountability Act (HIPAA).
Financial and	Budgetary planning and appropriate financial support to sustain access, management, staffing, and preservation costs.
budgetary	Current status of the university budget
	Forecasted general revenue for Florida in FY 2009-2010
Legal and Policy	Ongoing interpretation of intellectual property, data redistribution rights, and derivative rights.
	Conforming to copyright law and intellectual property issues in play with grey literature that is not within public domain.
	For national and international projects, confidentiality clauses may exist in software licenses, use and access agreements for numeric or geospatial data, project documents, or funding arrangements.
	Contract terms and/or license language for countries or legal jurisdictions.
	Policies on institutional legal rights and responsibilities, non-disclosure and confidentiality agreements.

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^h Syntactical interoperability assures that there is a technical connection, i.e., that the data can be transferred between systems. Semantic interoperability assures that the content is understood in the same way in both systems, including by those humans interacting with the systems in a given context.

vi. BUDGET & FINANCIAL PROJECTIONS

EXPENDITURES

Perhaps the most difficult planning is, with any degree of accuracy, predicting the financial commitment level necessary for success. Further consultation with a selective spectrum of stakeholders as well as an honest assessment of what can be accomplished with existing staff are essential to lend credibility to these *very preliminary cost estimates below*. Considerable investments in resources, increased staffing, temporary expertise and outsourcing, at the outset as well as ongoing, will determine how and when Initiative goals are eventually reached.

Collections	Initial Investment	Recurring Costs
Electronic Resources	\$20,000	\$20,000 + 3%
(\$+% annual increase)		
Monographs, approx. 12,000-15,000 over 3 yrs.	\$780,000-	
(to include new publications and those identified	\$975,000	n/a
thru comparative collections analysis) @ \$65 per		
title		
Serials/Journals Subscriptions (11 identified)	Approx. \$3,140	\$3,140 + 3%
(\$+% annual increase)	Approx. \$5,000	
(may include backfiles)		
Documents, Florida GPO, UN	n/a	n/a
Database subset Harvesting	Est. \$2,000	n/a
TOTAL	\$810,140	\$24,835

^{*}estimates based on Bowker Annual, 2007; 52nd ed., pp. 474-482

Personnel (see Appendix 9)		Initial Investment	Recurring Costs
New Staff Ongoing:	Hrs/Wk	Est./Median Salary	Total
Metadata Librarian	n/a	49,966	49,966
Digital Initiatives Librarian	n/a	90,864	\$90,864
Library Operations Supervisor	40 hrs.	29,469	\$29,469
2 Library Specialists	40 hrs	\$23,616	\$47,232
		Subtotal	<i>\$</i> 217,521
Temporary			\$21,000
GAs (2)		\$10,500	
Database designer		\$78,655	\$78,655
Metadata cataloger(s)		\$49,966	\$49,966
_		TOTAL,	\$367,142

Programming	Estimated Cost
Informational brochure/design & printing	5,000
Lecture sponsorship	2,500
Graduate seminar	500
Online exhibits /development & design	4,000
Study fellowship award (annual)	2,500
USF Sponsored Conference	5,000
TOTAL fo	or Programming \$ 19,500

Facilities & Infrastructure	Estimated Cost
Server/server space for digital archiving and streaming audio-video	Not yet identified
Portal development (outsource?) and open access journal hosting	
(per title)	\$5,000
High speed scanner on-site	\$2,000
Networking & Electrical	Not yet identified
Shelving	Not yet identified
Software applications	Not yet identified
TOTAL for Facilities & Infrastructure	

A managina de la TOTAL	¢4 200 000
Approximated TOTAL	21.200.000
	T-)

Additional Funding Opportunities

FUNDRAISING

With the direction of the Dean of USF Libraries, assistance in fundraising will be handled as a joint effort between the Director of Development for the USF Library system and the new development person to be assigned to FMHI as part of the reorganization.

GRANTS

There are a number of grants opportunities to help fund portions of the collection. The National Endowment for the Humanities (NEH) sponsors *We the People* Challenge Grants in United States History, Institutions, and Culture and a joint NEH and German Foundation grant to name two. The IMLS and LSTA are two other organizations that may sources of funding to digitize the archival collections. As a regional member of the National Library of Medicine (NLM), FMHI Library is eligible to participate in NLM grant opportunities. The FMHI Library is currently in the process of preparing two submissions for an August deadline, one focusing on outreach to persons with mental illnesses and the other to build capacity for electronic health resources. Each will have capacity-building components to support the harvesting and digitization of disaster and grey mental health resources.

vii. Marketing & Dissemination

At an organizational level, the USF Library System's Associate Director of Communications will work closely with FMHI, in concert with USF Media Affairs, to determine the best venues for marketing the collection. Marketing will use traditional and non-traditional dissemination methods, which may include the following:

- 1. USF Media Affairs
- 2. Postings on the FMHI and USF Library news websites and newsletters
- 3. Pertinent electronic distribution lists for postings of new items added to the collection.
- 4. The generation of white papers, reports, and topical bibliographies, also to be cataloged and digitized,
- 5. An RSS feed,
- 6. A "disaster mental health loop" for the less technological users,
- 7. Publications in academic and practice journals across disciplines,
- 8. Presentations (virtual and face-to-face) across disciplines and users, and
- 9. "Brown Bags" and other seminars conducted for USF faculty and staff (including library faculty and staff).

As with all initiatives, outcomes must be evaluated on a number of criteria, including efficiency, effectiveness, decision-making impact, and equity. A combination of functionality, usability, and accessibility evaluation strategies applied iteratively to assess libraries from the perspective of patron needs also seems appropriate.³⁴ Effectiveness, cost effectiveness, cost benefit, and performance measurement are related to inputs, outputs and outcomes³⁵. However, traditional measures, such as volumes held, serial subscriptions, expenditures, and staffing are not correlated to output measures, typically transactions (reference circulation, interlibrary loan, and bibliographic instruction).³⁶ This is compounded by counting data downloads that can only measure what the library does have, not what it does not.

Quantitative and qualitative measures will be used to determine the implications of deeply collecting and fast-tracking this ARL collection in order to deal with all of the elements that must be addressed. Using quantitative indicators (e.g., frequencies of interactions) and qualitative indicators (e.g., effectiveness) will allow the USF Library system and the FMHI Library to increase their visibility and effectively restructure to meet the needs of their users.³⁷

ARL calculates a Membership Criteria Index formula and index for the university library members of ARL. The Membership Criteria Index is a summary measure of relative size among the university library members of the Association; its sole purpose is to serve as a membership criterion for those institutions. This index comprises the five quantitative data elements in which ARL university libraries most resemble one another, and does not attempt to measure a library's services, quality of collections, or success in meeting the needs of users. http://www.arl.org/stats/index/index.shtml

The five data elements include statistics such as total library expenditures and total staff expenditures as well as total expenditures for professional salaries, materials, and digital resources. A full discussion of the ARL Index measure can be found in Bruce Thompson's (2006, p.19) paper on the subject. Using quantitative indicators (e.g., frequencies of interactions) and qualitative indicators (e.g., effectiveness) will allow the USF Library system and the FMHI will also allow comparison with peer institutions and aid areas planning a new service to project staff, instructional, and technology demands. Examples of assessment activities include:

- 1. Achieve ARL targets,
- 2. Track items accessed through ALEPH (FCLA),
- 3. Analyze portal usage,

ⁱ Inputs are system resources, such as library budgets and finances, staffing, and print and digital resources. Outputs are the activities the system provides, such as transactions, hours of access, the availability, use, and usability of resources.

- 4. Quantify relevant volumes, subscriptions, and e-volumes acquired,
- 5. Track researcher production; including undergraduate, graduate, and faculty,
- 6. Code relevant reference questions [e.g., type, time, resources consulted],
- 7. Repurpose and measure existing operations and data to inform assessment.^j
- 8. Measure percent increase access to grey literature (pre- & post-initiative)
- 9. Collect and analyze use of online resources as part of public distribution requirements.³⁸
- 10. Quantify delivery of instruction, training and education, and professional development as meeting institutional or organizational competencies in the use of the collection.
- 11. Measure quality of service using the ARL service quality measure, LibQual+TM for users' perceptions of service quality on four dimensions: "Affect of Service", "Library as Place", "Personal Control", and "Access to Information."
- 12. Calculate impact of enhanced acquisitions and accessibility on interlibrary loan (lending and borrowing) and document delivery data request patterns.¹
- 13. Measure student learning as a model for library or service assessment (American Association of Higher Education's (AAHE) *Principles of Good Practice for Assessing Student Learning* or the ARL New Measures agenda.³⁹)
- 14. Assess relationship between library and sponsored research activities⁴⁰ within USF. Examine three indicators -- total research and development funding at a university (total R&D funding); total library expenditures (total Library dollars), and library expenditures in support of sponsored research as a percentage of total library expenditures (percent of Library dollars)⁴¹. Use of this collection by university faculty through citation analysis and usage analysis may provide a more concrete measure of how the library supports sponsored research.

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^j For example, the number of inter-organizational activities and reuse of materials by external organizations count as outreach or academic-community partnership activity.

^k The performance-only assessment is the most valid framework for gauging customer satisfaction when using LibQual+TM or SERVQUALTM ¹⁰⁰. By eliminating the difference scores, problems with reliability and validity are eliminated. Respondents need less time to complete the survey. Another suggestion is to use a shorter version of the LibQual+TM with performance-only ratings, as in the case of the SERVPERF, the performance-only variant of SERVQUAL.TM ⁹⁹

Document delivery is important to capture since, with specialized services, many research faculty and staff routinely receive items of interest without initiating a request.

IX. CONCLUSIONS

In today's research university, academic libraries must deal primarily with implementation of "complex philosophical and cognitive concepts in a computational environment." Further, transparent and integrated access to distributed and heterogeneous information and data sources is central to leveraging research.

Over the last year, the USF Library System has strategically reorganized to position itself to join the Association of Research Libraries (ARL) in order to support USF's goal of membership in the Association of American Universities (AAU). The USF Libraries Strategic Plan: 2007-2012 offers the following vision:

The overarching challenge for the USF Libraries is to carry the library system to the next level and by virtue of its collections of distinction, innovative services and talented staff become the next member in the Association of Research Libraries. To that end, this plan is intended to further the development of a vibrant library system, grow its collections, fortify infrastructure, strengthen its operations, improve facilities, and implement client-centered services worthy of an ARL library.

Building an ARL level mental health services and policy collection allows USF to

- 1. be recognized for a pre-eminent national collection of distinction,
- 2. illustrate its recognized expertise in the area,
- 3. establish strategic partnerships,
- 4. engage scholars across the world, and
- 5. produce new knowledge.

This business plan serves as a blueprint to achieve these goals.

Appendixes

- 1. Listing of Notable Mental Health Collections in the United States
- 2. Target Audience Profiles: USF and Other Audiences
- 3. Current FMHI Library Collection Development Policy
- 4. Themes of FMHI Major Grants and Contracts
- 5. Geographical Analysis of refugees/displaced populations
- 6. Listing of Potentially Relevant LC Classes; Thesaurus Search Terms, and Sudoc Headings
- 7. Selective Search of Relevant USF Holdings and Preliminary Search of Relevant WorldCat Holdings
- 8. Relevant Websites
- 9. Position Descriptions
- 10. Preliminary Suggested Serials ad Databases to Enhance the Collection
- 11. References

APPENDIX 1: LISTING OF NOTABLE MENTAL HEALTH COLLECTIONS, US

Table 1. Comparison of FMHI with 13 Mental Health Research Institutes in the U.S.

	·	Program Focus				
		Services Research	Clinical services	Clinical training MDs	Policy studies, law, analysis	
1.	Center for Psychiatric Research Maine Medical Center Research Institute & Spring Harbor Hospital	х	х	x		
2.	Dartmouth Psychiatric Research Center	x	x	x		
3.	Lebanon, NH Institute for Mental Health Research Phoenix, AZ	x				
4.	Institute of Psychiatric Research Indiana University School of Medicine, Indianapolis, IN	x	x	x		
5.	Langley Porter Neuropsychiatric Institute University of California, San Francisco	x	х	x		
6.	Missouri Institute of Mental Health University of Missouri-Columbia, MO	х			х	
7.	Nathan S. Kline Institute for Psychiatric Research	x	x	х		
8.	Orangeburg, NY New York State Psychiatric Institute New York, NY	x	x	x		
9.	Louis de la Parte Florida Mental Health Institute	х			х	
<u></u>	USF, Tampa, FL					
10.	University of Arkansas for Medical Sciences Little Rock, AR	x	X	X		
11.	Semel Institute for Neuroscience and Human Behavior	x	x	x		
12.	University of California, Los Angeles Washington Institute for Mental Health Research & Training	x	x	x		
13.	Washington State University, Spokane, WA Western Psychiatric Institute & Clinic University of Pittsburgh School of Medicine,	x	x	x		
14.	Pittsburgh, PA William S. Hall Psychiatric Institute University of South Carolina, Columbia, SC		x	x		

Table 2. Comparison of FMHI with Peer Mental Health Research Institutions in the U.S.

		Program Focus				
		Services Research & Policy Foci	Advanced Degree Programs	Research Agendas	ARL Library	
1.	Bloomberg School of Public Health Johns Hopkins University	x	х	x	x	
2.	Cecil G. Sheps Center for Health Services UNC at Chapel Hill	x	х	x	х	
3.	Center for Psychiatric Rehabilitation Boston University	X	х	X	х	
4.	Institute for Policy Research Northwestern University	X	x	X	х	
5.	Louis de la Parte Florida Mental Health Institute USF	x	х	X		
6.	UCLA Center for Health Policy Research University of California Los Angeles	х	х	X	Х	

1. University of South Florida

Scholarship, at the undergraduate, graduate, and faculty levels, within various schools and departments, as well as multi-disciplinary/multi-cultural studies, would benefit from this collection. The following departments have been examined as to the relevance of this collection: se could include, but are not limited to, Africana Studies Department, Aging Studies, Anthropology, Communication, Communication Disorders, Criminology, Government & International Affairs, Psychiatry, Psychology, Public Administration, Public Health, Rehabilitation and Mental Health Counseling, Social Work, and Business.

The Africana Studies Department hosts faculty members directly involved in the study of instances of genocide among populations and of issues related to forced migration and its related social and political stresses. Some of the faculty has made long and careful study of the recent and historical cultural violence in places across Africa such as Ghana. A mental health collection would allow for the study of related behavioral factors as well as cultural ones in the zones of conflict.

The School of Aging Studies is one of the nation's oldest and largest degree-awarding programs in Gerontology. Their faculty concentrate in three areas: Aging and Health; Cognitive Aging and Alzheimer's Disease; and Public Policy and Long-Term Care, with a particular emphasis on applied research. Their faculty and students are frequent users of the existing collection at FMHI and appreciate its multidisciplinary and applied focus. The School also hosts the USF Collaborative on Aging, which works to enhance USF's capacity and reputation as a university with campus-wide strength in aging research, education, and service. The School's academic programs include a minor in Gerontology, a Bachelor of Arts in Gerontology, and Bachelor of Science in Gerontology (focus: Long-Term Care Administration), a Master of Arts in Gerontology, interdisciplinary Ph.D. in Aging Studies program, and three Graduate Certificates in Gerontology, all of which would benefit from a collection addressing issues of mental health, caregiving, and quality of life.

The **Department of Anthropology** has several current research and curricular foci that would use the mental health and policy collection. The first, the *bio-cultural dimensions of human health and illness* asks, "How can anthropology inform ways of preventing or containing health disasters by changing the socio-cultural circumstances in which they flourish? How do cultural and biological factors combine to condition health and demography?" Two other areas, the *social and cultural constructions of race*, *ethnicity, and gender* and *community identity and heritage*, examine the construction of identity at the individual and community levels. A final area, *communication and representation in cultural mediation and education*, examines the education as institution, which addresses services and supports for students with disabilities as well as the school personnel – from aide to administrator -- who support the students. The construction of disability and the culture surrounding disability would be of great interest to faculty working in this area, which would be a continued growth area in the mental health and

policy collection. In addition, mental health services and policy affects socio-cultural and environmental factors in the incidence and response to health issues.

The **College of Business** would be interested in the financing and economics of health care delivery, especially in the use of socioeconomic factors to measure the dynamics of mental health as well as societal recovery from disasters and complex services delivery structures. For example, the examination of the performance of service providers from the standpoint of governmental agencies or the influence of cognitive, communal, and reputational mechanisms on the social, environmental, and economic decisions and the resultant outcomes for firms, industries, and stakeholders over time would be key areas for analysis in the health services delivery⁵³.

The **Department of Communication** offers a broad and integrated approach to communication studies, embracing the traditions of the humanities, the convergence of rhetorical and communication theory, and the use of a number of approaches to scientific and humanistic inquiry in performance interpersonal, health, organizational communication, as well as public and cultural communication. Within the Department, there would be several areas of emphases for the ARL collection. One would be the relationship between research and health policy from a policy process perspective, describing communication problems in the course of policy formulation, implementation and evaluation.⁵⁴ Another would be how best to frame social justice values and public health issues in contentious and controversial policy contexts. 55-59 The social construction of issues and how these constructions affect ethics, public and population health, and system delivery issues are also important foci for the department. 60-64 The personal story (narrative) of individuals as situated in place and time would be of great interest to Communication faculty as would be the critical study of social issues⁶⁵⁻⁶⁸ Systemic issues, such as reflexivity and complexity in large-scale disaster relief efforts, would be examined by faculty.

Within the **Department of Communication Sciences and Disorders**, the interdisciplinary research currently conducted into the behavioral aspects of communication disorder research would benefit from a collection emphasizing mental health, adding valuable literature to the field. The relationships between mental illnesses and communication disorders are well documented. Prizant et al. show a significant incidence of "speech, language, and communication disorders in children referred to psychiatric and mental health settings for emotional and behavioral problems" and that "children referred to speech and language clinics for communication disorders have been found to have a high rate of diagnosable psychiatric disorders." ⁶⁹ It is critical to review developmental perspectives, patterns of symptoms, and studies of prevalence when working with children who are victims of trauma. 70,71 Children with speech and language impairments are at increased risk for having experienced abuse, neglect, and trauma and how maltreatment may vary across cultures. The impact of exposure to both prenatal and postnatal trauma indicates support for the presence of sensory modulation disorders among traumatized children. 72,73 Westby's review of the international literature on maltreatment provides frameworks for identifying what constitutes maltreatment across

cultures; how cultural variations in discipline practices impact maltreatment; and professionals' roles in treatment when they encounter children who have experienced abuse, neglect, or trauma.⁷⁴

The **Department of Criminology** at USF supports faculty research and instruction across a broad range of topical areas within the discipline including: juvenile justice and delinquency, policing, substance use and abuse, macro-level models of criminal behavior, theoretical criminology, criminal ethnography, victimology, and radical criminology. Reflecting the diverse scholarly activities of the department, faculty members have experience from several social science and human service fields, such as: sociology, criminology, political science, public administration, law, and social work. As noted on the Criminology Department website^m "faculty are dedicated to ensuring that the perspectives of the academic criminologist, the criminal justice professional, the offender, the victim, and society are each critically examined within an academic/scholarly framework." An important aspect within the diverse research and instruction program practiced by the faculty in the department are behavioral and mental health factors of individual and population groups. Faculty members, such as Drs. Richard Dembo and Kathleen Heide, incorporate behavioral assessment research and apply best practices in their criminology research. Focal areas include evaluation of youth drug intervention programs and investigation of youth and violence.

The **Department of Government & International Affairs** is involved in a number of research endeavors that would benefit from a mental health and policy collection especially as it relates to refugee and immigrant populations. Often the complex social milieu that comprises zones of political conflict has as a consequence occurrences of forced migration among participating populations and at worse incidences of genocide. Faculty focus their research across areas of conflict in Africa and Asia and study the varied political factors of different peoples living in such conditions. A specialized mental health collection would help further faculty research in the public health aspects of the peoples involved.

The **Department of Psychology** supports faculty research in social psychology, social relationships between ethnic groups, and industrial psychology. Recent research trends include occupational health psychology and examining interpersonal conflict within organizations. Incorporating research materials from a mental health collection would expand the spatial focus of the research into national and international areas.

Recent work in the **Department of Rehabilitation and Mental Health Counseling** includes a number of areas of interest in the proposed ARL collection.

Recent work includes studies of patients with a diagnosis of posttraumatic stress disorder or bipolar disorder as the most likely diagnostic groups to benefit from participation in an extended care psychiatric rehabilitation program. Other work examines competency-related characteristics, technology transfer, organizational network analyzes, specific coping skills training for mood management, and assistive technologies. Crisis and

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m http://criminology.usf.edu/

interactional communication strategies for hostage negotiators and systemic clinicians, a recent area of research, seems very appropriate to this collection endeavour. ^{79,80}

The School of Social Work at USF supports curriculum and research programs that strive to develop in students an understanding of the dynamics of human behavior in individual, group and organizational contexts. Some of the factors that comprise the social dynamics include: the influences of the socio-economic environment upon those behaviors; the development of social welfare systems and institutions; and the social, economic, and political processes affecting policy development and program implementation. ^{75,81-84} Behavioral and mental health policy research is an integral part of the of the social work research program as it provided an important evaluative framework aspect to researching the processes of using basic social research skills, particularly related to the processes of problem solving, planning, and evaluation.

Research faculty and staff at the **Dr. Kiran C Patel Center for Global Solutions** have as an essential theme to their work a goal of supporting research and educational programs that promote sustainable, healthy communities in a globalizing world. The Center's mission has a spatial focus on social, natural and economic environments in different parts of the world. The combination of research programs specializing in the three themed areas, will lend support to a third theme of the Center, defined as contributing to the sustainability and health of communities impacted by globalization. An integral part of building healthy communities is supporting the behavioral and mental healthcare needs of the individuals comprising communities. Organizations such as the World Heath Organization have identified mental health care as important aspects of the overall health care of people across different regions, and especially in regions experiencing strife, forced migration, and natural disasters. A mental health care collection would thus be an integral part of the USF Patel Center's effort at building healthy communities.

The clinical and emergency care aspects of disaster mental health and dealing with vulnerable and traumatized populations will be a primary interest for the **School of Nursing** and the **Department of Psychiatry** in USF Health. Also, within USF Health, the **College of Public Health** has focused on population health issues and the effects of disasters on all age groups, including collaboration with Dr. Brown on hurricanes and response teams. Topics include detection of somatization and depression in Middle Eastern countries, measures of social support, strategies and sequential designs for preventive trials, and health behavior and depression correlates. Examine the effectiveness of an intervention in real world settings and to test and extend both theory of etiology and theory of intervention are also of interest to researchers in CoPH ^{89-91 92} as well as identification and detection of population risk factors ⁹³⁻⁹⁶

With over 500 faculty and staff, the **Louis de la Parte Florida Mental Health Institute** is very interested in the expansion of its existing collection to accommodate the two focal areas of the ARL Initiative. In addition to its research and teaching, there are a five national/international technical centers and a number of other federal, foundation, and state funded centers that provide services, assistance, and training.

The Technical Assistance Center on Social Emotional Intervention for Young Children (TACSEI), funded by the U.S. Department of Education Office of Special Education Programs, focuses on children 0 to 5 years of age to increase the awareness and implementation of positive, evidence-based practices and to build an enhanced and more accessible database to support those practices [http://challengingbehavior.fmhi.usf.edu/]. Faculty include Drs. Glen Dunlap, Lise Fox,

Dianne Powell, and Karen Blase.

The National Technical Assistance Center on Youth Transition is one of five national sites funded by the federal Substance Abuse and Mental Health Services Administration. The Center provides and coordinates training and consultation with the other sites to build capacity in the development, implementation, and enhancement of transition practices, systems, and outcomes for young people with emotional and

behavioral difficulties who are between the ages of 14 and 25 as they enter adulthood [http://ntacyt.fmhi.usf.edu/]. Faculty include Drs. **Hewitt Clark** and **Nicole Deschênes**.

The National Technical Assistance Center on Positive Behavior and Intervention Supports, funded by the Office of Special Education Programs, addresses the behavioral and discipline systems needed for successful learning and social development of students. The Center provides capacity-building information and technical support about behavioral systems to assist states and districts in the design of effective schools [http://www.pbis.org/main.htm].

The Florida Criminal Justice Mental Health and Substance Abuse Technical Assistance Center assists counties in projecting and measuring the effect of interventions on the county's population at risk for involvement with the criminal justice system. They also serve as a clearinghouse for information and resources including best practices for addressing the needs of people with mental disorders who enter the criminal justice system; and report to the legislature annually on the impact of the grant program on problems associated with mental disorders and the criminal justice system [http://www.floridatac.org/].

The Research and Training Center for Children's Mental Health, created in 1984 to address the need for improved services and outcomes for children with serious emotional and/or behavioral disabilities and their families. The Center is jointly funded by the National Institute on Disability and Rehabilitation Research, the U.S Department of Education, and the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration [http://rtckids.fmhi.usf.edu/].

The USF Center for HIV Education and Research is located within USF's Louis de la Parte Florida Mental Health Institute and is jointly sponsored by the Division of Infectious Diseases in the Department of Internal Medicine at the USF College of Medicine and the USF College of Public Health. The Center serves health care professionals throughout Florida by providing education and information on the transmission, control, treatment, and prevention of HIV and AIDS and by conducting related research and community outreach. During its twenty years of operation, the USF Center has provided training to more than 200,000 health and mental health care providers. [http://www.usfcenter.org/index.asp].

The Florida/Caribbean AIDS Education and Training Center, part of the Center for HIV Education and Research, is one of eleven regional centers (and more than 130 associated sites) that conduct targeted, multi-disciplinary education and training programs for health care providers treating persons with HIV/AIDS. The Florida/Caribbean AETC serves Florida, Puerto Rico, and the U.S. Virgin Islands.

The Center for Autism and Related Disabilities (CARD-USF) at USF is a community-based project that provides information and consultation to individuals diagnosed with autism spectrum disorder and related disabilities. CARD at USF is one of six regional CARD sites funded by the Florida State Legislature and offers instruction and coaching to families and professionals through a training and assistance model [http://card-usf.fmhi.usf.edu/].

The National Implementation Research Network (NIRN) works to close the gap between science and service by improving the science and practice of implementation in relation to evidence-based programs and practices [http://nirn.fmhi.usf.edu/].

The Medicaid Drug Therapy Management Program for Behavioral Health includes the development of Florida specific best practice guidelines and their dissemination through a variety of methods created and implemented by the prescriber community. Designed as an extension and elaboration of the former Behavioral Pharmacy Management Program, MDTMP is being implemented by FMHI, through its agreements with Florida's Agency for Health Care Administration (AHCA), the Department of Children and Families (DCF) and its subcontractors [http://flmedicaidbh.fmhi.usf.edu/].

The Policy and Services Research Data Center informs public policy and program development through the compilation, integration, and analysis of administrative and other data of statewide Medicaid claims, mental health service claims funded by state and general revenue, adult corrections, juvenile justice, child welfare, and examinations under Florida's civil commitment law and data generated by private services agencies. The PSRDC also serves as the host and analytic service for data generated by several county agencies in Pinellas County.

The Center for the Study of Children's Futures is dedicated to promoting the health and well-being of Florida's children through data, research, analysis, and community involvement. Since 1993, it has published the Florida KIDS COUNT project and other topical publications based on national, state, and county level data [http://cscf.fmhi.usf.edu/].

Since 1997, the **Baker Act Reporting Center**, in collaboration with Agency for Health Care Administration (AHCA), has received statewide data on involuntary civil commitments of the mentally ill or Baker Act examinations since 1997. Housed within the Policy and Services Research Data Center, the Baker Act Reporting Center currently has records for over a half million civil commitment examinations. The Center produces an annual report for the Agency for Health Care Administration and other reports for the state legislature, treatment providers, and researchers

The Florida Center for Inclusive Communities (FCIC) at USF was established in October 2005 through a University Centers for Excellence in Developmental Disabilities Education, Research, and Service grant award from the U.S. Administration on Developmental Disabilities [http://flfcic.fmhi.usf.edu/index.htm]. The Center develops both pre-service and in-service training programs for professionals and community members who provide supports and services to individuals with developmental disabilities.

Florida's Center for the Advancement of Child Welfare Practice was established to provide needed information and support to Florida's professional child welfare stakeholders. Funding is provided through a contract with Department of Children and Families. The Center's mission is to support and facilitate the identification, expansion, and transfer of expert knowledge and best practices in child welfare case practice, direct services, management, finances, policy, and organizational development to child welfare and child protection

[http://centerforchildwelfare.fmhi.usf.edu/Pages/Default.aspx].

ImPact: Promoting Achievement through Consultation & Training Center promotes self-sustaining coalitions of public and private partners collaborating in the development, support, and implementation of state of the art training and consultation delivery systems designed to impact the full spectrum of human service agencies with emphasis on prevention/intervention and recovery [http://mhlp.fmhi.usf.edu/web/impact/index.htm].

The Child Welfare Training Academy is responsible for training and certification of Child Welfare Trainers and administration of the State of Florida's Child Protection Professional Certification Program [http://cwta.fmhi.usf.edu/].

Colleen Clark, Ph.D., is a founding Board Member and current Coordinator of the National Trauma Consortium. Dr. Clark and Marion Becker, Ph.D., were principal investigators on the Triad Women's Project of the Women and Violence Study. Dr. Clark, Norin Dollard, Ph.D., and Andrea Blanch, Ph.D., are founders of the USF/Community Trauma Research Group, which provides opportunities for individuals and organizations to meet and address the issues of trauma and the wideranging impact it has on people's lives. Formed in 2006 to provide a forum to promote trans-disciplinary approaches to prevention, intervention and research on trauma across the lifespan and to understand its biological, psychological and societal effects, it supports the *Many Faces of Trauma Series*. To date, participants have looked at traumatic stress as a result of child physical and sexual abuse, interpersonal violence, disasters, and war [http://facesoftrauma.fmhi.usf.edu/index.html].

In addition to its centers, the Institute has a number of faculty and staff working on issues related to trauma and survivors of violence. Of the over 500 faculty and staff at the Institute, this section highlights just a few of the areas and researchers that would be interested in seeing such a collection be developed.

Dr. Norman Poythress deals with diagnosis and treatment issues surrounding the mergence of psychopathy. Psychopathy is defined as an antisocial or dissocial personality

disorder. It is characterized by a continual seeking of instant (psychological) gratification in criminal, sexual, or aggressive impulses and the inability to learn from past mistakes. Persons suffering from extreme trauma, such as child soldiers or children pressed into violent activities, often are diagnosed with antisocial or dissocial personality disorder and evince psychopathic behaviors as children, and these behaviors often escalate as the child transitions into adulthood.

Understanding why genocide is perpetrated is also a critical component. **Dr.**Randy Borum is a Senior Consultant to the U.S. Secret Service, helping to develop, refine and study behavior-based protocols for threat assessment and protective intelligence. He also serves on the Forensic Psychology Advisory Board for the FBI's Behavioral Science Unit. He was the principal investigator on the Psychology of Terrorism initiative for an agency in the US Intelligence Community, and now serves on the United Nations' Roster of Experts in Terrorism. He is also a trainer for the Bureau of Justice Assistance (BJA) State and Local Anti-Terrorism Training (SLATT) program, the only ongoing training and technical assistance counterterrorism initiative specifically designed for state and local law enforcement and prosecution authorities.

Dr. Marion Becker focuses, in addition to trauma, on quality of life issues, specifically in depression and suicidal behaviors. She is the developer of the Wisconsin Quality of Life Index (W-QLI), a core development in quality of life outcomes research in mental health.

Resiliency research, that examines why some individuals are able to rebound from traumatic events and experiences, is a major area of study at the Institute. Faculty, who study resiliency, include Drs. Mary Armstrong, Roger Boothroyd, Amy Vargo, Yuri Jang, Hewitt Clark, Robert Friedman, Gregory Teague, Katherine Best, Svetlana Yampolskaya, Judith Jetson, and Katherine Lazear, Lisa Brown, and Kathryn Hyer, to name a few.

Disaster mental health currently at the Institute also involves assessment and intervention for older adults, mood and anxiety disorders, suicide, dementia, and long-term care. She consults and collaborates with federal, state, and local public health agencies and non-profit organizations providing disaster recovery services. State and Long-Term Care Facilities, and Services for Treating Older Residents' Mental Health (STORM) Project. She was recently appointed to the Disaster Mental Health Subcommittee of the Presidential Commission. This subcommittee will make recommendations to the Secretary of the U.S. Department of Health and Human Services (HHS) relating to catastrophic health events. Dr. Brown and Dr. Hyer recently received a major federal grant to continue work on disaster mental health.

With the recent addition of the Schools of Aging Studies and Social Work, and the departments of Rehabilitation and Mental Health Counseling, Criminology, and Communication Sciences and Disorders, the interest in traumatized and vulnerable populations throughout the life span would benefit from a focused research collection addressing these populations from an individual care perspectives as well as a larger, systemic perspective.

2. Other Audiences a. Florida

The Institute's Research Library routinely handles reference and/or research requests from mental health professionals, Florida agency and legislative staff, other state agency staff, and consumer/family member/advocate requests. State agencies currently use the mental health services and policy collection at the FMHI Library. These include the Agency for Health Care Administration, the Department of Children and Families, the Substance Abuse and Mental Health Program Offices, and the Department of Corrections. In addition, the Advocacy Center for Persons with Disabilities, Inc. offices in Tallahassee and in Tampa are frequent requestors of literature reviews and updates. Local agencies, such as the Hillsborough County Public Defender's Office and Self Reliance, Inc. Center for Independent Living, are also frequent users. The library's current awareness and SDI services are the most heavily used of our services. For many of these requests, staff create fact sheets, compilations, chronologies, and statistical reports. A variety of specialized library services, including literature reviews, syntheses, weekly news updates on topical areas, and tables of contents services, are standard services to our external constituency.

b. Federal Agencies

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services [CMHS] assesses and evaluates programs to better understand what works and why, with the intent to tailor successful programs to fit communities, improve outcomes and accountability of service systems, and improve individual quality of life.

The National Institute of Mental Health and the National Library of Medicine may also be interested in the depth of such a collection as might the Bureau of Indian Affairs.

c. National Associations

Mental Health America is the nation's oldest mental health organization. The Institute Research Library has provided reference and research services to them on a weekly basis since 2006. The Library verified and updated their *Media Guide*, which is a bibliography of research findings on topics of importance in the mental health community they use in their media contacts. This year the Library is providing research support to their Fundamental Health Campaign, a new national campaign.

Other organizations at a national level who would be interested in this collection include other peer and family organizations, such as the NAMI: The National Alliance on Mental Illness; the Harvard Program in Refugee Trauma; the International Society for Mental Health Online; the National Association of State Mental Health Program Directors; the National Center for American Indian/Alaska Native Mental Health Research; the National Coalition Of Mental Health Professionals And Consumers, Inc.;

the National Council for Community Behavioral Healthcare; and the American Academy of Experts in Traumatic Stress, an international, multidisciplinary network of professionals committed to the advancement of intervention for survivors of trauma.

d. International Associations

There are a number of international associations that would be interested in the resources and services of an ARL-level collection on vulnerable populations. These include, but are not limited to the World Health Organization's (WHO) Department of Mental Healthⁿ; the World Federation for Mental Health,^o who recently started their own disaster response initiative and has a center on transcultural mental health; the Pan American Health Organization (PAHO)^p; and UNESCO, with its focal areas of international migration and social transformation.^q

ⁿ http://www.who.int/topics/mental_health/en/

o http://www.wfmh.com/

p http://www.paho.org/

^q http://portal.unesco.org/en/ev.php-URL_ID=29008&URL_DO=DO_TOPIC&URL_SECTION=201.html

APPENDIX 3: CURRENT FMHI LIBRARY COLLECTION DEVELOPMENT POLICY

From POLICY NUMBER: 411
POLICY TITLE: Library Policy

The Louis de la Parte Florida Mental Health Institute (FMHI) Research Library exists to support the Institute's missions of research, public service, education, and training.

The Library collects and maintains a specialized collection of materials dealing with local, state, regional, and national level issues in mental health and associated social issues that support the Institute's research, education, training, and outreach efforts.

Specific areas of collection development include but are not limited to the following: behavioral & health services research; managed care, tests & measures; issues in aging and mental health, community mental health, mental health law and/or policy; epidemiology and policy analysis; child and family studies in mental health, autism and related disabilities; clinical and treatment information and issues; services delivery;, statistical and demographic information; consumer, advocacy issues, and disability issues; health care reform, and research design. Other areas of collection development will be defined as new research themes evolve.

The following formats will be collected: audiovisual, print, electronic media (CD-ROM, multi-media, web-based systems and resources, datasets, electronic journals, electronic books, software, etc.).

APPENDIX 4: THEMES OF FMHI MAJOR GRANTS AND CONTRACTS

Administrative & comparative data analysis Adoption and diffusion of EBPs Adult mental health

- Recovery
- Peer supports & programs
- Community support programs

Aging & mental health

- Aging in place
- Depression
- ALFs & residential care
- Wandering behaviors

Assessment & evaluation of services, programs, & systems
Applied behavior analysis

Children's mental health

- Autism spectrum and pervasive developmental disabilities
- Positive behavior support
- Transition services for youth with EBD
- Therapeutic settings
- Research to practice
- Systemic frameworks

Clinical assessment

Corrections

- Diversion programs
- Mental health courts
- Substance abuse courts
- Evaluation and assessment
- Forensic populations
- Juvenile justice
- Psychopathy

Disaster mental health Emergency services First responders

Ethics

Formularies

HIV/AIDS

Homelessness

Health disparities

Human services-- best practices

Inclusive schooling/communities Informatics

Law & Policy

- International research ethics
- International rights of children
- Involuntary commitment

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• Federal, state, and international

Managed care

- Medicaid & Medicare reform
- Insurance & benefits redesign
- Legislative and administrative changes

Services systems

School-based mental health services Suicide

Telehealth & associated technologies

Terrorism

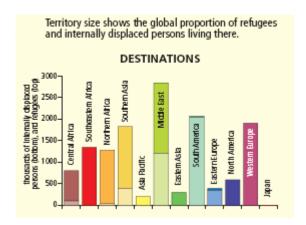
Trauma populations

Translational research and evidence based practices in complex systems

APPENDIX 5: GEOGRAPHICAL ANALYSIS OF REFUGEES/DISPLACED POPULATIONS

In 2003 there were an estimated 15 million refugees and internally displaced persons. The Middle East and South America are the regions in which most displaced people live; Pakistan, Iran and Germany are the territories that provide asylum to most people from outside their borders.

Rank	Territory	Value	Rank	Territory	Value
1	Bosnia Herzegovina	8.5	11	Guinea	2.2
2	Armenia	7.7	12	Burundi	2.1
3	Azerbaijan	6.9	13	Zambia	2.1
4	Georgia	5.1	14	Sri Lanka	2.0
5	Colombia	4.7	15	United Republic of Tanzania	1.8
6	Djibouti	3.9	16	Chad	1.8
7	Serbia & Montenegro	2.6	17	Sweden	1.6
8	Congo	2.5	18	Puerto Rico	1.5
9	Iraq	2.4	19	Islamic Republic of Iran	1.4
Q	Afghanistan	2.4	20	Denmark	1.4



Newman, M. & SASI Group (2006). Refugee destination. Sheffield, England; Ann Arbor, MI: University of Sheffield; University of Michigan. Retrieved 11 July 2008 from http://www.worldmapper.org/posters/worldmapper_map13_ver5.pdf.

APPENDIX 6: LISTING OF POTENTIALLY RELEVANT LC CLASSES; THESAURUS SEARCH TERMS, AND SUDOC HEADINGS

Library of Congress Subject Headings

Subject Heading: Mental health
Used for: Emotional health

Older Subject Headings: Mental hygiene

Broader Subject Headings Health: Happines, Public health

Related Subject Headings: Mental illness, Psychiatry, Psychology, Psychology, Pathological **Reference:** subdivision Mental health under names of individual persons and literary authors, and under classes of persons and ethnic groups, e.g. Women--Mental health Afro-Americans-

-Mental health]

Narrower Subject Headings: Child mental health Interviewing in mental health, Mental health education] Orthopsychiatry] Personality] Relaxation] Self-actualization (Psychology) Social psychiatry] Stress (Psychology)] Volunteer workers in mental health

Topical Sub-Headings: -- Bibliography - International cooperation] -- Nutritional aspects [Expand] -- Religious aspects

Geographical Sub-Headings: -- United States

Subject Heading: Forced migration

Used for: Compulsory resettlement Ethnic cleansing Involuntary resettlement Migration, Forced Relocation, Forced Resettlement, Involuntary

Broader Subject Headings: Migration, Internal

Reference: subdivision Relocation under ethnic groups

Narrower Subject Headings: Death marches

Subject Heading:

Refugee

Refugee camps *Used for:* Displaced persons camps

Refugee camps -- Egypt Refugee camps -- Gaza Strip Refugee camps -- Germany. Refugee camps -- Germany (West)

Refugee camps -- Honduras Refugee camps -- Lebanon

Refugee camps -- West Bank

Refugee children . Used for: Child refugees; Children, Refugee

Refugee children -- International cooperation

Thesaurus search terms:

Mental Health and Refugee Populations	Women's Mental Health	Adults with Mental Illness
Healthy Environment	Mental Health Transformation	Mental Health Information
Immigration	Refugees	Refugee Assistance
Mental Illness Children	Mental Health Services	Mental Health Help
Substance Abuse	Community Needs	Refugee Resettlement
Refugee and Displaced		
Populations		

Possible Information Sources/Providers: Centers of Disease Control, Department of Health and Human Services, State Department, Bureau of Citizenship and Immigration Services, NIMH, National Institute of Mental Health, Office of Refugee Resettlement

Range List of SUDOC Headings and associated U.S. Govt. Agencies used to determine appropriate document source list for grey literature search purposes.

HE 20.400 Substance Abuse & Mental Health Services Administration

HE 20.3000 National Institutes of Health

HE 20.6200 National Center for Health Statistics
HE 20.7000 Centers for Disease Control & Prevention
HE-- Health and Human Services Department:

Consumer Affairs Office	Aging Administration
	Aging Administration
Social Security Administration	Public Health Service
President's Council on Physical Fitness and	National Center for Health Care Technology
Sports Indian Health Service	Culestanas Abusa and Mantal Haalth Caniasa Administration
	Substance Abuse and Mental Health Services Administration
Toxic Substances and Disease Registry Agency	National Institutes of Health
National Cancer Institute	National Heart, Lung, and Blood Institute
National Institute of Allergy and Infectious	National Institute of Diabetes and Digestive And Kidney Diseases
Diseases	National institute of biabetes and bigestive And Nidney biseases
National Institute of Child Health and	National Institute of Dental Research
Human Development	National institute of Dentar Research
National Library of Medicine	John E. Fogarty International Center for Advanced Study in the
Trational Elbrary of Wedleine	Health Sciences
National Eye Institute	National Institute on Aging
National Institute of Arthritis and	National Institute on Drug Abuse
Musculoskeletal and Skin Disease	Transmar montate on pray reads
Food and Drug Administration	Center for Veterinary Medicine
Center for Food Safety and Applied	Center for Devices and Radiological Health
Nutrition	3
Center for Drug Evaluation and Research	Center for Biologics Evaluation and Research
Quality Assurance Bureau	National Center for Health Statistics
Health Care Policy and Research Agency	Centers for Disease Control and Prevention
National Institute for Occupational Safety	National Center for HIV, STD and TB Prevention
and Health	
National Center for Environmental Health	National Center for Chronic Disease Prevention and Health
	Promotion
National Center for Infectious Diseases	Toxic Substances and Disease Registry Agency
National Center for Injury Prevention and	National Immunization Program
Control	
Substance Abuse and Mental Health	National Institute of Mental Health
Services Administration	
National Institute on Drug Abuse	National Institute on Alcohol Abuse and Alcoholism
Health Resources and Services	Primary Health Care Bureau
Administration	
Maternal and Child Health Bureau	Bureau of Health Professions
Health Resources Development Bureau	Health Care Financing Administration
Medicaid Bureau	Health Standards and Quality Bureau
Program Operations Bureau	Data Management and Strategy Bureau
President's Committee on Mental	Children, Youth and Families Administration
Retardation	
Head Start Bureau	Children's Bureau
Family and Youth Service Bureau	Native Americans Administration
Developmental Disabilities Administration	Child Support Enforcement Office
Administration for Children and Families.	

Source: FDLP Desktop. List of Classes and Related Files. http://www.access.gpo.gov/su_docs/fdlp/pubs/loc/index.html

APPENDIX 7: SELECTIVE SEARCH OF RELEVANT USF HOLDINGS AND PRELIMINARY SEARCH OF RELEVANT WORLDCAT HOLDINGS

Disaster Mental Health

Table 1. Tampa Library Holdings
Catalog search for Federal Government Document Items

Search Type	All Items	Online Items
Refugee keyword - all formats Tampa Fed. Docs.	552	79
Refugee subject	402	60
Emigration and Immigration subject - all formats	1079	280
Political Refugee keyword all formats	103	15
Political Refugee subject	96	12
Human Rights- keyword all formats	1212	358
Human Rights- subject	655	242
Mental Health keyword - all formats	2441	334
Mental Health- Subject	710	114
Disaster Mental Health Services- keyword	25	4

Table. 2 University of Florida Library Holdings Catalog search for Federal Government Document Items

Search Type	Items	Online Items
Refugee keyword - all formats UF Fed. Docs.	688	47
Refugee- subject	507	44
Emigration & Immigration subject- all formats	1263	250
Political Refugee keyword - all formats	134	9
Political Refugee subject	126	12
Human Rights keyword	1406	341
Human Rights subject search	720	236
Mental Health keyword all formats	2624	222
Mental Health- Subject	815	86
Disaster Mental Health Services - keyword	23	2

Table 3: Johns Hopkins University Library Holdings Catalog Search for Federal Government Document Items

Search Type	All Items	Online Items
Refugee keyword - all formats Fed. Docs.	324	18
Refugee- subject	122	1
Emigration & Immigration-subject all formats	1174	180
Political Refugee keyword -all formats	53	5
Political Refugee -Subject	2	0
Human Rights keyword - all formats	1412	86
Human Rights Subject	801	51
Mental Health keyword - all formats	2186	352
Mental Health- Subject	632	134
Disaster Mental Health Services- keyword	12	7

Table 4. NorthWestern Libraries Holdings
Catalog search for Federal Government Document Items:

Search Type	Items	Online Items
Refugee keyword - all formats Fed. Docs	359	150
Emigration & Immigration keyword - all formats	1688	1648
Political Refugee keyword- all formats	57	2
Human Rights keyword - all formats	1571	194
Mental Health keyword- all formats	2687	927
Disaster Mental Health Services- keyword	14	12

Table 5. UCLA Library Holdings
Catalog search for Federal Government Document Items

Search Type	Items	Online Items
Refugee keyword - formats Fed. Docs.	134	12
Emigration & Immigration keyword - all formats	638	284
Political Refugee keyword- all formats	28	0
Human Rights keyword -all formats	442	73
Mental Health keyword - all formats	833	113
Disaster Mental Health Services- keyword	7	1

Table 6. UNC Chapel Hill Library
Catalog search for Federal Government Document Items

Search Type	Items	Online Items
Refugee keyword -I formats Fed. Docs	134	16
Emigration & Immigration keyword - all formats	811	104
Political Refugee keyword- all formats	17	0
Human Rights keyword - all formats	253	52
Mental Health keyword - all formats	894	108
Disaster Mental Health Services- keyword	7	0

Table 7. Comparison of Library Monograph Holdings by LC range Using OCLC WorldCat Pt.1

LC Headings	LC range	USF Library System	Johns Hopkins University Library	UNC Chapel Hill Library	Northwestern University Library	UCLA Library	Univ. Of Fl. Library	Boston Univ. Library
Disasters- Psychological Aspects	BF 789.D5	13	7	18	13	26	12	11
Forced Migration— Case Studies	HV 640	59	88	176	124	175	117	66
Refugees— Developing Countries	HV 640.4.D4 4	4	8	12	16	21	12	7
Refugee— Policy—U. S.	HV640.4. U54	13	5	20	16	31	19	11
Emigration and immigration-U.S.	JV6455	58	62	92	71	110	82	52
Poor— HealthCare— Case Studies.	RA418.5. P6	27	24	35	39	70	41	13
Health Risk Assessment- govt. policy- U.S	RA427.3	22	13	14	32	35	31	4.

Table 8. Comparison of Library Monograph Holdings by LC range Using OCLC Worldcat. Pt.2

	LC range	USF Library System	Johns Hopkins University Library	UNC Chapel Hill Library	Northwestern University Library	UCLA Library	Univ. Of Fl. Library	Boston Univ. Library
Mental Healthcare U.S.	RA 790.6	119	61	113	106	223	104	76
Managed Healthcare Plans U. S.	RA 413	29	61	44	71	127	38	28
Community Health Services- Developing Countries	RA441. 5	13	24	29	43	47	35	23
Mental Health Policy History-U.S	RC443	5	5	7	7	9	4	6
Disaster Victims - Mental Health	RC 451.4 D57	5	4	7	4	11	8	6
Political Refugees— Mental Health	RC451. 4.P57	3	4	4	3	5	4	4
Refugee— Mental Health Services-U.S.	RC451. 4 R43	2	5	7	6	9	7	4

APPENDIX 8: RELEVANT WEBSITES

Disaster Mental Health and Vulnerable Populations

- 1. World Health Organization
 - a. Child and adolescent health and development

http://www.euro.who.int/childhealthdev

b. Children's health and environment

http://www.euro.who.int/childhealthenv

c. Disaster preparedness and response

http://www.euro.who.int/emergencies

d. Mental health

http://www.euro.who.int/mentalhealth

- e. Disasters
 - i. Technical guidelines for health action in crises: http://www.who.int/hac/techguidance/pht/mentalhealth/en/index.html
 - ii. Manual: Mental Health Refugees http://www.who.int/hac/techguidance/pht/mentalhealth/Mental_Health_of_Refugees_inEnglish.pdf
- f. Refugees http://www.who.int/topics/refugees/en/
- g. Statistics http://www.who.int/topics/statistics/en/
- h. Collections http://www.who.int/library/collections/en/
- 2. United Nations
 - a. UNHCR Statistical Online Population Database http://www.unhcr.org/statistics/45c063a82.html
 - b. UN/ISDR Library on disaster risk reduction (Inter-Agency Library on Disaster Reduction) [http://www.unisdr.org/eng/library/lib-index.htm]
 - c. UN OCHA (Office for the Coordination of Humanitarian Affairs)
 - i. Information Management Toolbox [http://www.humanitarianinfo.org/IMToolbox/]
 - ii. IASC products (harvest metadata)
 - iii. Integrated Regional Information Networks (IRIN)
 - 1. PlusNews (HIV/AIDS)
 - 2. IRIN Radio
 - 3. IRIN Films
 - iv. Central Emergency Response Fund (CERF) Reports [http://ochaonline.un.org/cerf/FieldReports/CERF2006country/tabid/1930/Defa ult.aspx]
 - v. ReliefWeb [http://www.reliefweb.int/rw/dbc.nsf/doc100?OpenForm]
 - 1. Humanitarian Library (harvest metadata) [http://www.reliefweb.int/rw/lib.nsf/doc205?OpenForm]
 - 2. Map Centre
 - a. Disaster Maps
 - b. Humanitarian Profile Maps
 - c. Location Maps
 - vi. Capacity for Disaster Reduction Initiative [http://www.unisdr.org/cadri]
 - 1. Directory of academic programs worldwide addressing emergency/disaster

- d. UN Development Programme Crisis Prevention and Recovery [harvest]
- 3. Centre for Research on the Epidemiology of Disasters(CRED)
 - i. EM-BIB Documentation Center [http://www.cred.be/cred1/index.htm]
 - ii. (Université Catholique de Louvain, Brussels)
- 4. Centro Regional de Información sobre Desastres (CRID)
 - a. Virtual documentation centre library (–Spanish + English) [http://www.crid.or.cr/crid/ing_index.shtml]
- 5. Harvard University
 - a. International Humanitarian Law Research Initiative (IHLRI) [http://ihl.ihlresearch.org/] (Incredible resource pages)
- 6. Leeds University Center for Disability Studies
 - a. Disability Archive [http://www.leeds.ac.uk/disability-studies/archiveuk/titles.html]
- 7. Benfield UCL Hazard Research Centre [http://www.benfieldhrc.org/disaster_studies/disability&disasters/d&d_index.htm]
- 8. Institute of Development Studies, Sussex
 - a. Eldis online development documentation site [http://www.eldis.org/go/country-profiles]
- 9. University of Cambridge Centre for Architectural and Urban Studies
 - a. Shelter Centre Library (resources on transitional settlements and reconstruction) [http://www.sheltercentre.org/shelterlibrary/index.htm]
- 10. National Organization on Disability, Emergency Preparedness Research Paper Directory [www.nod.org/emergency]
 - a. Interactive Map of Disability & Emergency Preparedness Resources
- 11. National Rehabilitation Information Center (NARIC) [http://www.naric.com/]
 - a. REHABDATA (1956 to present)
 - b. NIDRR Project Database. (1993 to present)
 - c. NARIC Knowledgebase (groups, journals, web)
- 12. American Industrial Hygiene Association
 - a. OEHS Library Central [http://www.oehslibrary.org/]
- 13. Natural Disaster Hotspots (World Bank)
 - [http://geohotspots.worldbank.org/hotspot/hotspots/disaster.jsp]
- 14. ICIMOD portal Sharing Knowledge on Disaster Preparedness in the Himalayan Region [http://www.disasterpreparedness.icimod.org/publications.php] (harvest)
- 15. Capacity Building for Disaster Risk Reduction in Recovery Management: Database of Available Resources Worldwide(International Recovery Platform) [http://irp-capacitybuilding.delnetitcilo.net/home]
 - a. [http://www.adrc.or.jp/irp/db_good_practices.html]
- 16. Migration Policy Institute http://www.migrationinformation.org/datahub/index.cfm
- 17. The Development Research Centre on Migration, Globalisation and Poverty http://www.migrationdrc.org/index.html
 - a. Series, publications, country reports
- 18. International Organization for Migration
 - a. http://www.iom.int/jahia/jsp/index.jsp
 - b. Publications, serials, video
- 19. U.S. Committee for Refugees and Immigrants
 - a. Interactive map, publications, serials
 - b. http://www.refugees.org/
- 20. Refugees International

- a. http://www.refugeesinternational.org/
- b. Videos, Country information

APPENDIX 9: POSITION DESCRIPTIONS

Database Developer/Administrator – Oracle (SHARED POSITION)

This position will manage a distributed 24x7 database environment employing multiple-site Windows and UNIX clusters. The individual will design and configure database architecture; manage the development process; perform monitoring and performance tuning; support Oracle tools and packages including reporting applications; perform database troubleshooting; and manage corruption, backup and disaster recovery.

Successful candidates will minimally possess a Bachelor's degree in Computer Science or related field and five years experience in Oracle database administration administering Oracle 9i and 10g databases and Application servers. Further preferred qualifications include Oracle Enterprise Manager 10g Grid Control, Oracle Real Application Cluster, MS SQL 2000, 2005 and MySQL development and administration; database security and auditing, database architecture, database management, monitoring multiple databases, database performance management and tuning, database fault analysis and resolution, database backup and disaster recovery procedures, database security.

*Median Salary: \$78,655

Geospatial/GIS Analyst (SHARED POSITION)

This position will augment our current GIS/Data Librarian with specific emphasis on performing a variety of organizational, analytical, and presentation tasks and is responsible for determining specific project needs including GIS data acquisition, cartography, modeling, and metadata requirements. This individual designs and develops complex GIS database models and templates; writes, edits, installs, verifies and edits programs for accessing, maintaining, linking and populating databases; develops and presents GIS system and cartographic mapping elements; integrates GIS elements with other technology for web based dissemination; responds to difficult inquires from end-users, developers, contractors, and other customers regarding GIS requirements; transposes complex data from records maps, CAD drawings, county landbase maps, and other source documents into GIS and/or related database; participates in the development, maintenance and implementation of policies and procedures that ensure the accuracy of GIS information is maintained; and assists in writing procedures for utilizing GIS software and applications.

Successful candidates will minimally possess a Bachelor's in Geography, Computer Science, or a related field and five years experience with ESRI GIS applications including ArcGIS and ArcIMS (or similar application). Further preferred qualifications include academic preparation in a geoscience discipline and experience with g.net environments.

*Median Salary: \$51,883

Metadata Librarian (SHARED POSITION)

This position will plan and manage metadata production for digital projects and collaborate with appropriate staff and working groups to advise on the application of current and emerging metadata schema to facilitate access to digital collections. The librarian will investigate and develop applications for improving access to digital collections and facilitate metadata scheme specification and adaptation and be responsible for metadata import and production. The librarian will also coordinate the formulation and implementation of policies and standards for descriptive, technical and

administrative metadata that are used to support the production, management of and access to digital collections.

Successful candidates will possess an MLS from an ALA-accredited graduate program and a minimum of two years' experience working with metadata in a digital library environment including a working knowledge of non-MARC metadata schemes, thesauri, ontologies, tools and formats such as XML, OAI, METS or VRA Core, etc. Further preferred qualifications include knowledge of institutional and open repository issues and metadata harvesting protocols.

*Median Salary: \$49,966

Digital Librarian / Projects Manager

(SHARED POSITION TO MANAGE ALL 3 ARL INITIATIVES)

This position will manage the content, policies, production, and bibliographic control of digital collections. The incumbent will research, evaluate, test and recommend various methodologies, standards, and software used in the creation of digital collections and their long-term preservation; contribute to best practice documentation; provide expertise to others in the library and in the university in the creation of digital collections; and participate in grant writing and training initiatives.

A major focus of the position is project management. The incumbent will define the scope of work for assigned projects and develop statements of work, work breakdown structures, task estimates, and specific tasks and milestones; identify assumptions and constraints (technical, schedule, resource, and budget) for the project; define performance expectations and provide feedback to team members and provide input for performance appraisals; develop risk assessments and response plans for the project; manage relationships with the project team; manage the project budget; facilitate team and stakeholder meetings; communicate all pertinent information to the Libraries' administration and all stakeholders; and monitor, control, and communicate to the Libraries' administration the status of projects, with attention to resource utilization, project costs, risk management, and the performance of the project team.

Successful candidates will possess an MLS from an ALA-accredited graduate program and a minimum of two years' experience building successful digital collections and managing complex projects. Further preferred qualifications include formal training or certification in project management skill and techniques.

*Median Salary: \$90,864

Library Specialist/ Digitization Support

At present, it is difficult to estimate the number of FTE required to meet the demand for digitization that will emerge as the Karst studies collection emphasis develops. Due to this focuses heavy reliance on grey information sources, the need will be substantial, perhaps requiring as many as three full time employees. These positions will digitize materials for inclusion in the collections as defined by the Digital Librarian in collaboration with stakeholders.

*Median Salary \$23,616

*Salary estimates mirror those in the Karst initiative

APPENDIX 10: PRELIMINARY SUGGESTED SERIALS AND DATABASES TO ENHANCE THE COLLECTION

Journal Title	ISSN	Publisher	Format	Freq.	Cost est.	Annual Subs.
American Journal of		Weston Medical				_
Disaster Medicine	1932-149X	Publishing	Print	6x/yr		457
AWR Bulletin	0001-2947	?	Paper	4x/yr	Χ	586
Crisis	n/a	?	?	?	Χ	150
Int'l Committee of	m / n	?	2	?	V	25
the Red Cross Forum Int'l J of Mass	n/a	r International	?	ſ	Χ	25
Emergencies &		Sociological				
Disasters	0280-7270	Assn.	Print	?		55
International Journal				•		
of Refugee Law	1464-3715	Oxford U. Press.	Online	4x/yr		390
	0953-8186	(Print & online)	Print			
Journal of						
Emergency		Weston Medical				
Management	1543-5865	Publishing	Print	6x/yr		273
Journal of Immigrant	155/ 205/	Harris Maria	O !!	4/		
& Refugee Studies	1556-2956	Haworth Press	Online	4x/yr		2/5
Journal of Migration	1556-2948	RMIT Informit	Print			365
& Refugee Issues	1832-0643	service	Online	3-4x/yr	Χ	300
a heragee issues	1032 0043	York University,	OTHITIC	5 47/ yi	Λ	300
Refuge	0229-5113	Canada	?	?	Χ	100
		US Committee				
		for Refugees				
Refugee Reports	0884-3554	and Immigrants	Online	2x/year		Free
Refugee Survey	1000 10/7	0 (111 0	D ' .	4 /		010
Quarterly	1020-4067	Oxford U. Press	Print	4x/yr		312 (Both Print
	1471-695X	(no database access?)	Online			& online)
	1471 0757	American	OTHITIC			a orimic)
		Academy of				
		Experts in				
Trauma Response	?	Traumatic Stress	Print	?	Χ	125
				Subtotal:		\$3,138
DATABASES						
PAHO Electronic						
Collection						252
PsycCritiques						700
APA Electronic						
Library						3000
PsycExtra						3150
				Subtotal:		\$7,102
				TOTAL		\$10,240

XI. REFERENCES

- 1. Miranda JJ, Patel V. Achieving the Millennium Development Goals: does mental health play a role? PLoS medicine 2005; 2:e291
- 2. George P. Ed., editor. The Globalization Research Network data portal project: A library-scholarly community partnership. 2003; 529-533. Orlando, FL: International Institute of Informatics and Systemics. Available http://www.patelcenter.usf.edu/assets/pdf/dpp_paper.pdf.
- 3. Heron SJ, Hanson A. Callaos N, editor. From subject gateways to portals: The role of metadata in accessing international research. 2003; 529-533. Orlando, Florida: International Institute of Informatics and Systemics.
- 4. Prince M, Patel V, Saxena S, Maj M, Maselko J, Phillips M R, et al. No health without mental health. The Lancet 2007; 370:859-877.
- 5. Das-Munshi J, Goldberg D, Bebbington PE, Bhugra DK, Brugha TS, Dewey ME, et al. Public health significance of mixed anxiety and depression: beyond current classification. The British journal of psychiatry: the journal of mental science 2008; 192:171-7.
- 6. World Health Organization. The world health report 2002: Reducing risks, promoting healthy life. Geneva, Switzerland: World Health Organization, 2002.
- 7. World Health Organization. Preventing chronic diseases: a vital investment: WHO global report. ed. Geneva, Switzerland: WHO, 2005.
- 8. World Health Organization. The world health report 2001 mental health: New understanding, new hope. Geneva, Switzerland: World Health Organization, 2001.
- 9. Kennedy JF. Message from the President of the United States relative to mental illness and mental retardation. Washington, DC: U.S. Government Printing Office, 1963.
- 10. President's New Freedom Commission on Mental Health. Achieving the promise: Transforming mental health care in America: Final report. Rockville, MD: The Commission, 2003.
- 11. Freeman M, Funk M. Monitoring and evaluation of mental health policies and plans. 2007; Geneva, Switzerland: World Health Organization.
- 12. Mechanic D. Policy challenges in modern health care. New Brunswick, NJ: Rutgers University Press, 2005.
- 13. Freeman M, Pathare S. WHO resource book on mental health, human rights and legislation. Geneva, Switzerland: World Health Organization, 2005.
- 14. Marburger JHIII. M-07-22: Memorandum for the heads of executive departments and agencies: Subject: FY 2009 administration research and development budget priorities. Washington, DC: Executive Office of the President, Office of Management and Budget. Retrieved May 26, 2008 from http://www.whitehouse.gov/omb/memoranda/fy2007/m07-22.pdf, 2007, August 14.
- 15. Aday LA. Health status of vulnerable populations. Annual review of public health 1994; 15:487-509.

- 16. North CS. The Oklahoma City bombing study and methodological issues in longitudinal disaster mental health research. Journal of trauma & Dissociation: the official journal of the International Society for the Study of Dissociation (ISSD) 2005; 6:27-35.
- 17. Birman D, Beehler S, Harris EM, Everson ML, Batia K, Liautaud J, et al. International Family, Adult, and Child Enhancement Services (FACES): A community-based comprehensive services model for refugee children in resettlement. The American journal of orthopsychiatry 2008; 78:121-32.
- 18. Druss BG, Hwang I, Petukhova M, Sampson NA, Wang PS, Kessler RC. Impairment in role functioning in mental and chronic medical disorders in the United States: results from the National Comorbidity Survey Replication. Molecular psychiatry 2008;
- 19. Druss BG, Wang PS, Sampson NA, Olfson M, Pincus HA, Wells KB, et al. Understanding mental health treatment in persons without mental diagnoses: results from the National Comorbidity Survey Replication. Archives of general psychiatry 2007; 64:1196-203.
- 20. Silove D. The challenges facing mental health programs for post-conflict and refugee communities. Prehospital and disaster medicine: the official journal of the National Association of EMS Physicians and the World Association for Emergency and Disaster Medicine in association with the Acute Care Foundation 2004; 19:90-6.
- 21. Geltman PL, Grant-Knight W, Ellis H, Landgraf JM. The "lost boys" of Sudan: Use of health services and functional health outcomes of unaccompanied refugee minors resettled in the U.S. Journal of immigrant and minority health / Center for Minority Public Health 2007;
- 22. Greenough PG, Lappi MD, Hsu EB, Fink S, Hsieh YH, Vu A, et al. Burden of disease and health status among Hurricane Katrina-displaced persons in shelters: a population-based cluster sample. Annals of emergency medicine 2008; 51:426-32.
- 23. Bloodworth DM, Kevorkian CG, Rumbaut E, Chiou-Tan FY. Impairment and disability in the Astrodome after hurricane Katrina: lessons learned about the needs of the disabled after large population movements. American journal of physical medicine & rehabilitation / Association of Academic Physiatrists 2007; 86:770-5.
- 24. Wang PS, Gruber MJ, Powers RE, Schoenbaum M, Speier AH, Wells KB, et al. Mental health service use among hurricane Katrina survivors in the eight months after the disaster. Psychiatric services (Washington, D.C.) 2007; 58:1403-11.
- 25. Laugharne J, Janca A, Widiger T. Posttraumatic stress disorder and terrorism: 5 years after 9/11. Current opinion in psychiatry 2007; 20:36-41.
- 26. Larrance R, Anastario M, Lawry L. Health status among internally displaced persons in Louisiana and Mississippi travel trailer parks. Annals of emergency medicine 2007; 49:590-601, 601.e1-12.
- 27. Feldman R. Primary health care for refugees and asylum seekers: a review of the literature and a framework for services. Public health 2006; 120:809-16.
- 28. Duley MG. The next pandemic: anticipating an overwhelmed health care system. The Yale journal of biology and medicine 2005; 78:355-62.
- 29. Arzberger P, Schroeder P, Beaulieu A, Bowker G, Casey K, Laaksonen L., et al. Promoting access to public research data for scientific, economic and social development. Data Science Journal 2004: 3:

- 30. Office of Extramural Research. NIH data sharing policy. Rockville, MD: National Institutes of Health. Available http://grants2.nih.gov/grants/policy/data_sharing/, 2003.
- 31. Harley JB. Barnes TJ, Duncan JS, editors. Deconstructing the map. 1992; New York, NY: Routledge.
- 32. Harvey F, Tulloch D. Local-government data sharing: Evaluating the foundations of spatial data infrastructures. International Journal of Geographical Information Science 2006; 20:743-768.
- 33. Tulloch DL, Shapiro T. The intersection of data access and public participation: Impacting GIS users' success? URISA Journal 2003; 15:(APA II)55-60.
- 34. Bertot JC, Snead JT, Jaeger PT, McClure CR. Functionality, usability, and accessibility: Iterative user-centered evaluation strategies for digital libraries. Performance Measurement and Metrics 2006; 7:17-28.
- 35. Vickery B, Vickery A. Information science in theory and practice. London, England: Butterworth, 1987.
- 36. Kyrillidou M . From input and output measures to quality and outcome measures, or, from the user in the life of the library to the library in the life of the user. Journal of Academic Librarianship 2002; 28:42-46.
- 37. Hanson A, Ruscella P, Arsenault K, Pelland J, Perez D, Shattuck B. Khosrow-Pour M, editor. Library management and organizational change. 2005; 1838-1843. Hershey, PA: Idea Group Publishing.
- 38. Steinhart G. Libraries as distributors of geospatial data: Data management policies as tools for managing partnerships. Library Trends 2006; 55:264-284.
- 39. Dow RF. Using assessment criteria to determine library quality. Journal of Academic Librarianship 1998; 24:277-281.
- Smith KR. New roles and responsibilities for the university library: advancing student learning through outcomes assessment. ed. Washington, DC: Association of Research Libraries. Retrieved November 2006 from http://www.arl.org/stats/newmeas/outcomes/HEOSmith.html, 2000.
- 41. Anonymous editor. Academic research library support of sponsored research in the United States. 2001; ()105-111.
- 42. Schuurman N. Formalization matters: Critical GIS and ontology research. Annals of the Association of American Geographers 2006; 96:726-739.
- 43. Crampton JW. The political mapping of cyberspace. ed. Chicago, IL: University of Chicago Press, 2003.
- 44. Paisley WJ. Dervin B, Voigt MJ, editors. 1980; 2, 114-165. Norwood, NJ: Ablex.
- 45. Borgman CL. The invisible library: Paradox of the global information infrastructure. Library Trends 2003; 51:652-675.
- 46. Marcum DB. Research questions for the digital era library. Library Trends 2003; 51:636-651.
- 47. Atkins DE, Droegemeier KK, Feldman SI, Garcia-Molina H, Klein ML, Messerschmitt DG, et al. Revolutionizing science and engineering through cyberinfrastructure: Report of the

- National Science Foundation Blue-Ribbon Advisory Panel on Cyberinfrastructure. Washington, DC: National Science Foundation. Available http://www.nsf.gov/cise/sci/reports/atkins.pdf [Also known as the Atkins Report], 2003.
- 48. Henry CHM. Alliance for the 21st century library: Proposal to monitor and analyze transformations in academic disciplines. Proposal to the Council on Library and Information Resources. Retrieved November 2006 from http://cohesion.rice.edu/library/alliance/emplibrary/NewProject.doc, 2003.
- 49. Cogburn DL. HCI in the so-called developing world: What's in it for everyone. Interactions 2003; 10:80-87.
- 50. Anonymous editor. Personal digital libraries: Creating individual spaces for innovation. 2003;
- 51. O'Donnell JJ. Avatars of the word: From papyrus to cy berspace. Boston, MA: Harvard University Press, 1998.
- 52. Ravindranathan U, Shen R, Gonçalves MA, Fan W, Fox EA, Flanagan JW. Prototyping digital libraries handling heterogeneous data sources: The ETANA-DL case study. In: Heery R, Lyon L, editors. Research and advanced technology for digital libraries: 8th European conference, ECDL 2004, Bath, UK, September 12-17, 2004, proceedings. Berlin, Germany: Springer-Verlag GmbH, 2004:186-197.
- 53. Barnett ML. Finding a working balance between competitive and communal strategy. Journal of Management Studies 2006; 43:1753-1773.
- 54. Orosz E. The impact of social science research on health policy. Social science & medicine (1982) 1994; 39:1287-93.
- 55. Dorfman L, Wallack L, Woodruff K. More than a message: framing public health advocacy to change corporate practices. Health education & behavior: the official publication of the Society for Public Health Education 2005; 32:320-36; discussion 355-62.
- 56. Roscoe LA, Schonwetter RS. Improving access to hospice and palliative care for patients near the end of life: present status and future direction. Journal of palliative care 2006; 22:46-50.
- 57. Roscoe LA, Malphurs JE, Dragovic LJ, Cohen D. Antecedents of euthanasia and suicide among older women. Journal of the American Medical Women's Association (1972) 2003; 58:44-8.
- 58. Cissna KN, Anderson R. Dialogic rhetoric, coauthorship, and moments of meeting. In: Weigand E, editor. Rhetoric and dialogue. Amsterdam, The Netherlands: John Benjamins Publishing Company, in press:
- 59. Anderson R, Cissna KN. Fresh perspectives in dialogue theory. Communication Theory 2008; 18:1-4.
- 60. Fassin D. Public health as culture. The social construction of the childhood lead poisoning epidemic in France. British medical bulletin 2004; 69:167-77.
- 61. Bartesaghi M, Castor TR. Social construction in communication: Revisiting the conversation. In: Beck C, editor. *Communication Yearbook*, 32. Mahwah, NJ: Erlbaum, In press:
- 62. Joffe S. Public dialogue and the boundaries of moral community. The Journal of clinical ethics 2003; 14:101-8.

- 63. Eisenberg EM, Baglia J, Pynes JE. Transforming emergency medicine through narrative: Qualitative action research at a community hospital. Health Communication 2006; 19:197-208.
- 64. Eisenberg EM. Building a mystery: Toward a new theory of communication and identity. Journal of Communication 2001; 51:534-552.
- 65. Ellis C. The ethnographic I: A methodological novel about autoethnography. Walnut Creek, CA: AltaMira Press, 2004.
- 66. Bochner A. Narrative's virtues. Qualitative Inquiry 2001; 7:131-157.
- 67. Jorgenson J, Bochner A. Vangelisti A, editor. Imagining families through stories and rituals. 2004; 513-538. Mahwah, NJ: Lawrence Erlbaum.
- 68. Jones SH. Denzin NK, Lincoln YS, editors. Autoethnography: Making the personal political. 2005; 3rd ed., 763-792. Thousand Oaks, CA: Sage.
- 69. Prizant BM, Audet LR, Burke GM, Hummel LJ, Maher SR, Theadore G. Communication disorders and emotional/behavioral disorders in children and adolescents. Journal of Speech and Hearing Disorders: J Speech Hear Disord 1990; 55:179-192.
- 70. Brauner CB, Stephens CB. Estimating the prevalence of early childhood serious emotional/behavioral disorders: challenges and recommendations. Public health reports (Washington, D.C.: 1974) 2006; 121:303-10.
- 71. Rogers-Adkinson DL, Stuart SK. Collaborative services: children experiencing neglect and the side effects of prenatal alcohol exposure. Language, speech, and hearing services in schools 2007: 38:149-56.
- 72. Atchison BJ. Sensory modulation disorders among children with a history of trauma: a frame of reference for speech-language pathologists. Language, speech, and hearing services in schools 2007; 38:109-16.
- 73. Coggins TE, Timler GR, Olswang LB. A state of double jeopardy: impact of prenatal alcohol exposure and adverse environments on the social communicative abilities of school-age children with fetal alcohol spectrum disorder. Language, speech, and hearing services in schools 2007; 38:117-27.
- 74. Westby CE. Child maltreatment: a global issue. Language, speech, and hearing services in schools 2007; 38:140-8.
- 75. Rank MG, Chaffin I, Figley CR, Lawrence T. The treatment of posttraumatic stress disorder in an extended care psychiatric rehabilitation program. Work (Reading, Mass.) 2008; 30:113-21.
- 76. Gum AM, Cheavens JS. Psychiatric comorbidity and depression in older adults. Current psychiatry reports 2008; 10:23-9.
- 77. Moore KA, Peters RH, Hills HA, LeVasseur JB, Rich AR, Hunt WM, et al. Characteristics of opinion leaders in substance abuse treatment agencies. The American journal of drug and alcohol abuse 2004; 30:187-203.
- 78. Chisolm TH, Noe CM, McArdle R, Abrams H. Evidence for the use of hearing assistive technology by adults: the role of the FM system. Trends in amplification 2007; 11:73-89.
- 79. Charles LL. Disarming people with words: strategies of interactional communication that crisis (hostage) negotiators share with systemic clinicians. Journal of marital and family

- therapy 2007; 33:51-68; discussion 69-76.
- 80. Charles LL, Ticheli-Kallikas M, Tyner K, Barber-Stephens B. Crisis management during "live" supervision: clinical and instructional matters. Journal of marital and family therapy 2005; 31:207-19.
- 81. Barrow FH, Armstrong MI, Vargo A, Boothroyd RA. Understanding the findings of resilience-related research for fostering the development of African American adolescents. Child and adolescent psychiatric clinics of North America 2007; 16:393-413, ix-x.
- 82. Black K, Osman H. Concerned about client decision-making capacity? Considerations for practice. Care management journals: Journal of case management; The journal of long term home health care 2005; 6:50-5.
- 83. Roberts JM. The parameters of prejudice: knowledge of ethics and age bias. Journal of gerontological social work 2008; 50:65-79.
- 84. Rowe W. Cultural competence in HIV prevention and care: different histories, shared future. Social work in health care 2007; 44:45-54.
- 85. Reid WM, Ruzycki S, Haney ML, Brown LM, Baggerly J, Mescia N, et al. Disaster mental health training in Florida and the response to the 2004 hurricanes. Journal of public health management and practice: JPHMP 2005; Suppl:S57-62.
- 86. Becker SM. Detection of somatization and depression in primary care in Saudi Arabia. Social psychiatry and psychiatric epidemiology 2004; 39:962-6.
- 87. Perrin KM, Burke SG, O'Connor D, Walby G, Shippey C, Pitt S, et al. Factors contributing to intervention fidelity in a multi-site chronic disease self-management program. Implementation science: IS 2006; 1:26
- 88. Perrin KK, Daley EM, Naoom SF, Packing-Ebuen JL, Rayko HL, McFarlane M, et al. Women's reactions to HPV diagnosis: insights from in-depth interviews. Women & health 2006; 43:93-110.
- 89. Brown CH, Wang W, Kellam SG, Muthen BO, Petras H, Toyinbo P, et al. Methods for testing theory and evaluating impact in randomized field trials: intent-to-treat analyzes for integrating the perspectives of person, place, and time. Drug and alcohol dependence 2008; 95 Suppl 1:S74-S104
- 90. Wahi MM, Parks DV, Skeate RC, Goldin SB. Reducing errors from the electronic transcription of data collected on paper forms: a research data case study. Journal of the American Medical Informatics Association: JAMIA 2008; 15:386-9.
- 91. Buhi ER, Goodson P, Neilands TB. Out of sight, not out of mind: strategies for handling missing data. American journal of health behavior 2008; 32:83-92.
- 92. Dagne GA, Brown CH, Howe GW. Hierarchical modeling of sequential behavioral data: examining complex association patterns in mediation models. Psychological methods 2007; 12:298-316.
- 93. Becker S, Al Zaid K, Al Faris E. Screening for somatization and depression in Saudi Arabia: a validation study of the PHQ in primary care. International journal of psychiatry in medicine 2002; 32:271-83.
- 94. Graven SN. Early neurosensory visual development of the fetus and newborn. Clinics in

- perinatology 2004; 31:199-216, v.
- 95. Pracht E, Langland-Orban B. Trends in avoidable hospitalizations for children in Florida from 1992 to 2003. Journal for healthcare quality: official publication of the National Association for Healthcare Quality 2007; 29:22-30.
- 96. Vandeweerd C, Paveza GJ, Fulmer T. Abuse and neglect in older adults with Alzheimer's disease. The Nursing clinics of North America 2006; 41:43-55, v-vi.
- 97. Brown LM, Schinka JA. Development and initial validation of a 15-item informant version of the Geriatric Depression Scale. International journal of geriatric psychiatry 2005; 20:911-8.
- 98. Brown LM, Hyer K, Polivka-West L. A comparative study of laws, rules, codes and other influences on nursing homes' disaster preparedness in the Gulf Coast states. Behavioral sciences & the law 2007; 25:655-75.
- 99. Hyer K, Brown LM, Berman A, Polivka-West L. Establishing and refining hurricane response systems for long-term care facilities. Health affairs (Project Hope) 2006; 25:w407-11.
- 100. Landrum H, Prybutok VR. A service quality and success model for the information service industry. European Journal of Operational Research 2004; 156:628-642.