

SHP Student Interns for Research and Scholarly Activities Application of Project Proposal Form

Instructions:

Please fill out the form and return via email to Michele Sisco (<u>mcoral@shp.rutgers.edu</u>) by March 25, 2024. Please fill each box to the right of each required field. If you are sending attachments, please ensure your contact information is added to all your forms.

Faculty Contact Information:

| Date submitted: | 3/18/24 | |
|---------------------|---|--|
| Faculty Name: | Weili Lu, PhD | |
| Department/Program: | Department of Psychiatric Rehabilitation and Counseling | |
| | Professions | |
| Telephone number: | 9088892453 | |
| E-mail: | luwe1@shp.rutgers.edu | |

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| Project Title: (56 | CBT for PTSD among persons with PTSD enrolled in Supported |
|---|--|
| characters max) | Employment/Supported Education programs: Does therapy improve employment/educational outcome? |
| Hypothesis: | Integrating Supported Employment/Supported Education (SE/SEd) and PTSD treatment has the potential to improve services to persons with psychiatric disabilities with comorbid PTSD. Our proposed study will examine the efficacy of integrated CBT for PTSD program and SE or SEd services provided to individuals with a high representation of underserved minorities. This proposed study for individuals with psychiatric disabilities seeks new knowledge in helping this population get the assistance they need to complete educational goals, be gainfully employed and have a better quality of life. The overall objective of this summer project is to help public rehabilitation service systems maximizing opportunities for successful community participation for people with psychiatric disabilities by helping individuals with undiagnosed and untreated PTSD to achieve optimal educational/employment outcomes. |
| Description: (Include design, methodology, data collection, techniques, data analysis to be employed, evaluation and interpretation methodology for research component) | The existing dataset will be analyzed using SPSS as well as SAS in order to develop the main outcome manuscript. Specific tasks would involve preparing references, analyzing the main outcome data under the supervision of Dr. Lu, and preparing tables for publication. The student agrees to meet with Dr. Lu on average once a week in order to be supervised for the data analysis portion of the research work. |
| Specific Student Responsibilities: | Student will be trained in utilizing SPSS as well as SAS to analyze data. The student will analyze the main outcome data and assist with the development of the main outcome manuscript. Student will make tables and prepare results section for publication under |

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| | supervision. | | | | | |
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| Start / end date of | | | | | | |
| project: | | | | | | |
| | | | | | | |
| Educational: | | | | | | |
| WHAT OTHER | The student may help develop posters for SHP research day in | | | | | |
| EDUCATIONAL | 2025. | | | | | |
| OPPORTUNITIES ARE | | | | | | |
| AVAILABLE TO | | | | | | |
| STUDENTS? | | | | | | |
| (e.g., journal club, | | | | | | |
| seminars, clinic, rounds) | | | | | | |
| WHERE DO YOU PLAN TO | The findings will be published in a peer-reviewed journal and the | | | | | |
| PRESENT OR PUBLISH | findings will be used as pilot data for future grant applications. | | | | | |
| THE FINDINGS WITH THE | | | | | | |
| STUDENT? | | | | | | |
| (e.g., national or state | | | | | | |
| meetings, newsletter or | | | | | | |
| journal, SHP poster day) | | | | | | |
| | | | | | | |
| CHECK ALL APPROPRIAT | E BOXES BELOW AND PROVIDE REQUESTED | | | | | |
| INFORMATION. | | | | | | |
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| This project is: X clinical | ☐ laboratory ☐ behavioral ☐ survey ☐ educational | | | | | |
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| Other: ple | ease specify | | | | | |
| | | | | | | |
| | se of human subjects (including chart review, retrospective studies | | | | | |
| and questionnaires). | | | | | | |
| | | | | | | |
| Pending Approv | ed X IRB Protocol Number: Pro2020002327 (Active) | | | | | |
| Pro20140000913 (Archived) | | | | | | |
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| IRB approval must be obtained by June 2024 | | | | | | |
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| DocuSigned by: | Kenneth J. Gill 3/21/2024 10:57:55 EDT | | | | | |
| Signature of Department Cha | | | | | | |
| Signature of Department Cha | air Date | | | | | |
| OP For internal use | | | | | | |
| OR-For internal use | | | | | | |
| Form: (1) | | | | | | |
| Reviewed date: | | | | | | |
| Date processed on website: | | | | | | |

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