Verification is an essential part of safe medication administration, yet errors persist in healthcare delivered inside and outside the hospital. In Emergency Medical Services, paramedics are faced with unique environmental and situational complexities that do not exist inside the hospital walls, and the barriers for error prevention are limited and can be brittle. Further, some of the conventional methods for creating safety such as the five rights of medication administration have neither a theoretically informed design, nor empirical support. Yet, medication errors are primarily attributed to lack of verification.

The data collected supports the conclusion that paramedics believe they are verifying prior to the administration of a medication, with many of them executing the five rights method as they were taught (a set of mental considerations). These data suggest that medication errors persist in spite of the conventional method, and a new method should be designed and informed by human factors.
Evaluating the Relationship Between Experiential Avoidance and Value-Congruent Behaviors

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Experiential avoidance (EA) is a process by means of which an individual attempts to change the form or frequency of unwanted negative cognitions, emotions, memories, somatic sensations and/or the contexts that they occur in. There is cumulative evidence providing support for EA as a core pathogenic process underlying emotional and behavioral disorders. From a functional contextualistic perspective, EA represents a functional response class underlying these psychological vulnerabilities. However, there is little directed effort to study whether EA displays sufficient temporal and situational stability (generalized psychological vulnerability) or is more contextually controlled. EA also serves as a barrier for engaging in actions that are consistent with value domains such as family and intimate relationships that are important to a person. This study aims to explore the degree to which EA represents a generalized psychological vulnerability by investigating the relationship between EA and engagement in or avoidance of value-congruent behaviors.

Debt Stress: How Older Adults' Health is Affected

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This study investigated the impact financial stress has on the quality of older adults’ physical and mental health. Older adults often face circumstances that contribute to higher stress levels and experience the negative effects of stress. 201 community dwelling older adults responded to the 53-item questionnaire. Variables examined financial stress from a subjective point of view, as well as self-rated health, measured by the Short Form Health Survey (SF-12v2). Participants completed either an internet-based survey or a face-to-face interview. The results indicated that overall there is a strong correlation between one’s financial stress level and physical and mental self-rated health. This finding suggests that managing debt stress is important for older adults to address. While people focus on debt elimination and management, it is also important to use health-promoting strategies to reduce the stress that arises because of financial obligations. These data should be used to develop stress prevention strategies aimed at the needs of the aging population.