



THOUGHT LEADERS IN SOCIAL WORK

CAPSTONE SHOWCASE

**Graduating DSW Students
Spring 2020 Cohort**

Friday, August 12, 2022

Barry University

Ellen Whiteside McDonnell | **School of Social Work**

**“ The projects presented in
this symposium resonate
with critical problems and
issues of our time. ”**

— John Murray, Ph.D.
Provost

Remarks from the Provost

On behalf of President Allen, our faculty, and all of the students enrolled at Barry University, I join the leadership of the School of Social Work in welcoming you to the inaugural Capstone Showcase Doctoral Symposium for the Doctor of Social Work program. This exciting event displays the impressive intellectual contributions of our DSW students, as they near the completion of their doctoral studies.

The projects presented in this symposium resonate with critical problems and issues of our time. The trauma-informed lens through which the programs in the School of Social Work are delivered provides a critical and necessary perspective that will serve our graduates well and position them to make significant contributions post-graduation.

I continue to be Barry-Proud of the past, current, and future accomplishments of our Social Work faculty, graduates, and current students. Enormous gratitude to the faculty mentors and all those who have supported our students through the rigorous process of doctoral study.

Warm Regards,

John Murray, Ph.D.
Provost





Remarks from the Interim Dean

On behalf of the Faculty, Administrators and Staff of the School of Social Work allow me to welcome everyone to the Doctoral Symposium and to learn from and enjoy this Capstone Showcase that summarizes the final Capstone projects of our DSW Graduates.

Throughout these past three, turbulent years, our doctoral students have launched pioneering cutting-edge scholarship to add to the knowledge base of our profession including areas of neurobiology of trauma, intergenerational trauma and resiliency, criminal justice, differential diagnosis, marginalized communities and trauma-informed/specific interventions.

A special heartfelt “Thank you” to our amazing faculty who have mentored our doctoral students throughout their matriculation. They never faltered and demonstrated grace and integrity during these challenging times - allowing for the transformative and mutual process of learning to unfold.

We wish all of the participants and guests attending Barry University School of Social Work’s Doctoral Symposium to have a meaningful experience. Thank you for supporting our students in this academic endeavor.

Warm Regards,

Maria Teahan, Ph.D.
Interim Dean
School of Social Work

Remarks from the Doctoral Studies Director

This year we are pleased to feature our inaugural cohort of DSW graduates and the presentation of their Capstone projects in this Capstone Showcase. Collectively, this landmark scholarship represents the thought leaders that Barry University's School of Social Work aims to produce.

The DSW students have drawn on three years of knowledge and skill development through the *Trauma-Informed Leadership and Practice* focus of the curriculum. The result is this compendium of *Practice Advances* that reflect practice enhancements from clinical protocols to national service delivery. They are submitting their Capstones as formal manuscripts to peer-reviewed journals for publication and dissemination. The students could not do this without the support of their Capstone Review Panels that include their Chairs and Second Readers.

We anticipate continued great scholarship and leadership from this cohort and are so proud of their work. Much appreciation to the faculty, administration, and the student's families, friends, and colleagues, who have been the "wind beneath their wings."

Warm Regards,

Mitch Rosenwald, Ph.D., LCSW
Professor and Director of Doctoral Studies
School of Social Work





NATTASHA CHARANIA ALY

Juvenile Justice: The Neuroplasticity of Adolescence and Benefits of Mindfulness-Based Interventions

The underutilization of evidenced-based practice in the Juvenile Justice System (JJS) is alarming. System-involved youth have a history significant for trauma, mental health issues, and suicidality. Neuroscience research shows mindfulness practices and training can rewire the brain through a process called neuroplasticity leading to improved affective, behavioral, physical, and social functioning. The JJS in the United States does not consistently incorporate mindfulness practices and training, missing a critical opportunity. This paper addresses the significance of neuroplasticity with specific attention to mindfulness-based practices that specifically target the concerns of the youth.

Chair: Dr. LaPorte

Second Reader: Dr. Rowlands

JONATHAN D. BEER

Technology-Based Programs Aimed at Reducing Loneliness and Social Isolation Among the Elderly: Implementing the Principles of Trauma Informed Care

Loneliness and social isolation have significant impact on mental and physical health and contribute to mortality in older adults. Information and communication technologies (ICTs) to alleviate loneliness and social isolation in this population have been described in the literature, but without the application of the Trauma Informed Care (TIC) principles. This paper proposes a practice advance employing the principles of TIC in programs that use ICTs to address loneliness and social isolation in older adults. In addition to user-friendly, relevant, and interesting content, programs should be rooted in TIC, since most participants likely experienced some trauma in their lives.

Chair: Dr. Shtompel

Second Reader: Dr. Rugganio



ASHLEY CHILDRESS

A Trauma-Informed Approach to the Hip-Hop Culture

The violence, sex and drug use often illustrated by hip-hop artists and songs paint a picture that has led to a controversial reputation. Despite the negativity, it has expanded into television, film, clothing, language and a style with undeniable influence. It is especially influential to teenagers and adolescents, who want to emulate the lifestyle. This paper examines the culture of hip-hop from a trauma-informed perspective. A pitch to embrace hip-hop in schools, by developing a curriculum that allows youth and adolescents to explore hip-hop in an expressive way, while educating them on trauma, is explored.

Chair: Dr. Smith

Second Reader: Dr. Robinson

SINIKIWE CHIWARA

Promoting the Well-Being of Neurotypical Siblings of Children with Autism through a Specialized Community-Based Group Modality

Over the past thirty years, the lived experiences of the neurotypical siblings of children diagnosed with autism have become of increasing interest to researchers. There is a need for an evidence-informed curriculum to guide practitioners as they implement interventions to promote the well-being of these siblings. This author proposes utilizing the six core concepts of acceptance and commitment therapy (ACT) to teach the siblings to cope with the internal feelings of discomfort that may be generated by the behaviors exhibited by the child with autism.

Chair: Dr. McMahon

Second Reader: Dr. Kryzak





CARLINE EMILE

Overcoming a Gap in the Trafficking Survivors Care Standards

Commercial sexual exploitation (C.S.E.) is an epidemic in the United States. The survivors experience devastating psychological effects from physical, psychological, and sexual abuse during and after trafficking. Research shows social workers and other clinicians lack knowledge and the impact of C.S.E. to help the survivors, resulting in a scarcity of proper interventions. It is recommended that a U.S. policy be established with effective interventions to promote recovery for this vulnerable group. The following proposal summarizes trafficking survivors' care standards and the benefits for the U.S. adopting an international policy in the Reauthorization Act of 2022, H.R. 6522, currently under development.

Chair: Dr. Smith

Second Reader: Dr. Naranjo



OSCAR GONZALEZ

Optimizing the Pediatric Patient-Centered Medical Home through a Trauma-Informed Integrated Behavioral Health Model

The need for mental health services in primary care settings to address the presence of trauma remains a present issue for pediatrics. Past literature has supported the compatibility of a Patient-Centered approach and Trauma-Informed Care (TIC) Principles to address trauma-related mental health needs. Yet, despite numerous professional guidelines highlighting these models, implementation of a specific Patient-Centered/TIC approach remains generalized. This paper will help conceptualize a specific model by presenting a Patient-Centered Trauma-Informed Medical Home that relies on social workers to deliver TIC-informed mental health services through an Integrated Behavioral Health model.

Chair: Dr. Nowakowski-Sims

Second Reader: Dr. Rosenwald

KRISTINA LEMBOVSKI

Polyvagal Theory in the Treatment of Complex Posttraumatic Stress Disorder: The Integration of Eye Movement Desensitization Reprocessing (EMDR) and The Safe and Sound Protocol (SSP)

Physiological dysregulation is a biological imperative to trauma-related pathogenesis. Chronic distress alters biobehavioral and neurocognitive function resulting in psychopathology. Complex trauma treatment combined with neurophysiological-based intervention aims to stabilize biobehavioral and physiological dysfunction. From a polyvagal perspective, traumagenic neurobiology triggers phylogenetic states of defense, disengaging the ventral vagal social engagement system. Herein exists the biological imperative in treating complex trauma with direct neural regulation during trauma processing, specifically in EMDR. Practical application of polyvagal theory, the Safe and Sound Protocol (SSP), combined with EMDR, suggests that direct neural regulation advances treatment by stabilizing physiological arousal during trauma processing.

Chair: Dr. Williams

Second Reader: Dr. Garcia

CAREN LONGSWORTH

Mitigating Secondary Traumatic Stress: An Organizational Approach

Many social workers experience secondary traumatic stress (STS), which is seen as an occupational hazard. Given the cost of STS and its contribution to social work turnover, it is important to support social workers to prevent STS. Social workers often experience long working hours, excessive job demands, and a poor work-life balance, which could have a detrimental effect on their well-being. Human service organizations can use organizational assessments, peer support, trauma-informed supervision, trauma training, and self-care initiatives to help mitigate STS and support social work staff.

Chair: Dr. Nowakowski-Sims

Second Reader: Dr. Ferrante





KERRY PIERRE-PHILIPPE

Trauma-Informed Care with Marginalized Populations in Integrated Healthcare: Core Social Work Competencies

Health status is significantly impacted by cultural, environmental, and individual factors. These social determinants of health contribute to health disparities. This paper provides a proposed framework for developing core trauma-informed competencies for social workers to work effectively with disadvantaged populations in integrated healthcare settings. This will require social workers to more broadly conceptualize trauma with vulnerable groups and consider the impact of different traumatic experiences on patients' health status. Advancing trauma-informed principles will help social workers to examine the factors that intersect with traumatic experiences and enable social workers in integrated healthcare settings to provide more culturally responsive interventions.

Chair: Dr. Tedrow

Second Reader: Dr. Corbel

TYRINA PINKNEY

Preserving Staff in the Workplace: Proposing Policies that Incentivize Self-Care

Employees suffer in the workplace due to long hours, demanding schedules, heavy workloads, interoffice conflicts, and, in recent years, a surge in uneasiness among coworkers due to the emergence of COVID-19. Controversial policies in the workplace have intensified, in part because of the precarious nature of the disease, resulting in drastic changes in work environments. Additional stressors outside of the workplace pose hazards that may lead to burnout, compassion fatigue, and high turnover. This paper explores the use of trauma-informed policies to incentivize employee self-care practices using an organizational self-care framework/approach to achieve this objective.

Chair: Dr. LaPorte

Second Reader: Dr. Mendez



DONNA PRITCHARD

Closing The Health Gap: Access To Healthcare Coverage For Undocumented Immigrants

Undocumented immigrants are forced to migrate from their country to the United States and reside here without legal documentation. Many undocumented immigrants are employed and perform jobs the general population is unwilling to perform. They contribute taxes to enhance our economy and receive inadequate healthcare services due to a lack of access to healthcare coverage. Many have encountered complex trauma due to discriminatory pressures before migration, during their journeys, and after migrating. Elected officials and policymakers at all levels of government must implement new policies for undocumented immigrants to access healthcare coverage and close the ominous healthcare gap.

Chair: Dr. Naranjo

Second Reader: Dr. Osby

DANIELA RICCELLI

Reducing Trauma Exposure for Unaccompanied Immigrant Children

The immigration processing system for unaccompanied children (UC) in the United States is traumatizing. In current detention settings, children are exposed to an unwelcoming environment, harsh treatment, and a lack of trauma-informed (TI) staff prepared to address the children's complex needs. A TI-first placement for UC will reduce the risk of complex trauma and future repercussions. In addition, governmental staff may engage in due processing under the supervision of TI staff. Despite the significant coordination efforts this might take, reducing trauma exposure is a financial investment by supporting the children's emotional and mental health now and in the future.

Chair: Dr. Naranjo

Second Reader: Dr. Garcia





VON MARIE RODRIGUEZ

Transforming Trauma through Social Emotional Learning and Expressive Arts: The Power of Digital Storytelling in School Settings

Adverse childhood experiences (ACEs) negatively affect social-emotional development. Literature on trauma-informed care (TIC) recognizes behavioral responses to trauma as a symptom, not a problem. Yet, school personnel increasingly see lingering effects of trauma in classrooms. Like TIC, social-emotional learning (SEL) literature suggests that SEL empowers students to recognize emotions while gaining necessary life skills. This practice advance proposes a blended curriculum using SEL skills to help narrate their experiences through digital storytelling and expressive arts. This intervention will assist students in creatively channeling daily struggles while building healthy relationships and appreciating the power and resilience embedded in each story.

Chair: Dr. LaPorte

Second Reader: Dr. Ferrante



MARIA SILVA

Trauma-Informed Self-Care in Hospital Settings: A Post-COVID Necessity

Since Spring 2020, healthcare providers have been on the frontlines of the coronavirus (COVID-19) pandemic providing direct care to patients. Providers must consider how trauma-informed self-care can improve mental health for all healthcare workers. The federal “Dr. Lorna Breen Health Care Provider Protection Act” encourages healthcare providers to use best practices that are evidence-based or evidence-informed to improve mental health. However, there is a dearth of scholarly information on trauma-informed self-care in the hospital setting. Self-care practices encourage healthcare providers in the hospital setting to adopt and implement trauma-informed self-care by practicing mindfulness-based practices and enhancing resilience techniques.

Chair: Dr. Naranjo

Second Reader: Dr. Ferrante

NYSSA TAI

The Importance of Gender-Responsive Assessment with Incarcerated Populations

In recent decades, increased female incarcerations have shifted the general population of prison system. Understanding disparities surrounding these incarcerated women can help improve their treatment plan and reform them post-release. This paper aims to propose a standardized gender-responsive assessment that complements jail and prison settings to increase the care and focus on identifying inmate needs to support further reform. By focusing on gender differences and gender inequalities, this paper recognizes the need to support incarcerated populations by obtaining relevant data.

Chair: Dr. Rosenwald

Second Reader: Dr. Rowlands

RAUNAK TEJANI

Trauma-Informed Schools, Changing the Way Schools Discipline

This article advocates for trauma-informed care practices in primary and secondary school settings. Schools' zero-tolerance discipline policies attach consequences and infractions to students for disruption, outbursts, and other behavioral issues throughout the school day. As a result, students who cannot regulate their feelings during school may face disciplinary actions. This article addresses strategies to provide trauma-informed care in classrooms through expressive arts and mindfulness exercises the school staff utilizes to provide a trauma-informed approach to students and teachers. This article will also look at changes to school zero-tolerance policies.

Chair: Dr. LaPorte

Second Reader: Dr. Garcia





GLORIA VALDIVIESO

The Comorbidity between Trauma and Chronic Pain: Blending EFT, Bilateral Stimulation, and Mindful Breathing

Research and anecdotal evidence from clinical practice suggest high comorbidity between trauma and chronic pain. Unresolved trauma has the potential to generate anxiety and dissociation, both associated with chronic pain. This manuscript recommends a combined protocol using the unique benefits of evidence-based interventions: emotional freedom technique (EFT), bilateral stimulation (BLS), and mindful breathing to treat traumatized individuals with pain. Given the prevalence and lack of integrative interventions for trauma and chronic pain, additional scholarly inquiry is essential to develop. Refining evidence on such blended methods should be the focus of future research to encourage practitioners' training and increase service delivery.

Chair: Dr. Williams

Second Reader: Dr. Goodman



ALEX WRIGHT

Addressing Barriers to Mental Health Treatment Utilization Among Black and Hispanic Veterans: Minority Mental Health Engagement Team

Black and Hispanic Veterans face multiple barriers to mental health treatment engagement. Negative stigma, cultural competency concerns, perceived racial bias, and time constraints contribute to lower engagement than White Veterans. The paper addresses the barriers to minority mental health utilization and provides innovative practice advances to increase health equity for Hispanic and Black Veterans to close the health gap. Practice advances include increase mental health utilization and engagement include cultural competency and racial bias training, implementation of minority support groups, addressing stigma via culturally-focused marketing, extended mental health treatment hours, and offering a racial match of mental health providers.

Chair: Dr. Ferrante

Second Reader: Dr. Bryant

LATOYA WRIGHT

Reinventing the Transition Navigator Role in Congenital Heart Disease Programs: Trauma-Informed Care and Social Work

Adults with congenital heart disease (ACHD) experience gaps in healthcare that result in negative health outcomes. Gaps in care occur when patients are transitioning from pediatric to adult providers. Transition programs are necessary for successful transfer in care. The national accreditation standard for transition requires nursing to facilitate the transition process. There is no current literature that supports social workers as lead facilitators in ACHD transition programs. The transition navigator role should be fulfilled by social workers in ACHD transition programs. Utilizing social workers and implementing trauma-informed principles will improve transition rates, increase medical compliance and decrease mortality rates.

Chair: Dr. Tedrow

Second Reader: Dr. Mendez

PETER YOUNG

Amalgamated Trauma and Substance Misuse Treatment for Women in Inpatient Care

An innovative clinical practice is introduced to encourage the amalgamated approach integrated with trauma-informed care practice to reduce possible re-traumatization while strengthening a therapeutic alliance. Limited literature on substance misuse and trauma shows women's interconnectedness. Many treatment facilities only utilize interventions that address trauma or substance misuse but not in the inpatient residential setting. Most interventions cannot compensate for dual diagnosis and have elongated treatment times that are not conducive to a favorable outcome. The amalgamated approach centers around women with trauma and substance misuse in the inpatient setting for four-six weeks.

Chair: Dr. Lewis

Second Reader: Dr. Ferrante



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