An Examination of African American Adolescent Males Coping with Mental Illness

Abstract

Capstone paper2

This capstone paper is an examination of African American adolescent males coping with mental illness. Trauma-Focused Cognitive Behavior Therapy (TF-CBT) was used to examine human behavior and the social environment, social welfare policies and services, direct practice, research evaluation, issues of social justice, diversity, and ethics and values. The purpose of this paper is to demonstrate our knowledge and application skills in the practice area of children, youth, and families. As a group, we have identified the clients presenting problem and the client strengths. We have examined how African Americans are affected by mental illness compared to others. We have reviewed recent statistics that highlight the percentage of African American males who have a mental illness. Lastly, this paper gives an overview of the challenges African Americans with mental illness face.

Introduction

Anyone can experience mental illness; however, African Americans experience more severe forms of mental health conditions due to unmet needs and other barriers ("African Americans | NAMI: National Alliance on Mental Illness," 2020). African Americans may also distrust that they may not receive culturally appropriate treatment. According to recent statistics, African Americans are twenty percent more likely to experience severe psychological distress than whites ("Black & African American Communities and Mental Health," 2020). A diagnosis of PTSD is more significant for African American youth that are exposed to violence by over twenty-five percent ("African Americans | Anxiety and Depression Association of America, ADAA," 2020). Factors such as exposure to violence and homelessness increase African American chances of having a mental illness ("African Americans | Anxiety and Depression Association of America, ADAA," 2020).

Mental illness is a topic that is not discussed regularly among African Americans. The lack of knowledge may lead people to believe that it is a personal weakness ("African Americans | NAMI: National Alliance on Mental Illness," 2020). African Americans may not discuss mental illness and seek treatment because of the shame and stigma associated with mental illness ("African Americans | NAMI: National Alliance on Mental Illness," 2020). Mental illnesses may also go untreated due to the inability to recognize the signs and symptoms ("African Americans | NAMI: National Alliance on Mental Illness," 2020). There is limited information on mental health issues, which makes it challenging to find help ("African Americans | NAMI: National Alliance on Mental Illness," 2020). African Americans rely heavily on spiritual belief for strength and support ("African Americans | NAMI: National Alliance on Mental Illness," 2020). Instead of turning to health care professionals, African Americans depend on faith, family, and

social communities for emotional support ("African Americans | NAMI: National Alliance on Mental Illness," 2020).

According to Samuel (2015), African American adolescent males are less likely to utilize mental health services. The mental health stigma is always associated with shame and personal inadequacy (Samuel, 2015). This is very relevant to those involved with the juvenile justice system (Samuel, 2015). Findings have proved that mental health stigma, ineffective treatment, fear, and mistrust of mental health providers are barriers to service (Samuel, 2015). According to Samuel (2015), there has not been an explanation as to why African American adolescents use mental health services after being released from juvenile justice facilities. However, there are approximately 100,000 juvenile offenders released annually into the community without proper mental health treatment (Samuel, 2015).

Adolescents who do not utilize mental health services after being released usually demonstrate impaired reasoning and adjustment problems (Samuel, 2015). These adolescents cannot contribute to the social and economic life of society (Samuel, 2015). According to Samuel (2015), adolescents identified that violence, street crime, and neglected neighborhoods are the leading causes of mental health problems. According to Samuel (2015) study, African American adolescent males have had negative views about mental health treatment, which resulted in not receiving professional help. The challenges of African American adolescent males coping with mental illness will be examined by incorporating the core competencies and practice behaviors.

Client System

The purpose of this integrative paper is to examine the prevalence of mental illness amongst African American adolescent males. This paper will be based on the analysis of a client, utilizing the Council on Social Work Education (CSWE), Educational Policy and Accreditation Standards (EPAS) competencies to demonstrate the acquisition of knowledge, values, and skills for advanced generalist social work practice. Due to confidentiality laws, all the participant's name have been changed to protect their privacy. We must protect the privacy rights of all clients; therefore, sensitive information is respected and will not be disclosed.

Client Identifying Information

Brandon Taylor is a 15-year-old African American teen born in Jackson, MS. He is a 9th-grade student who attends Capital City Alternative School (CCAS). Brandon was attending Powell Middle School but was having issues with attendance and fighting. These issues resulted in multiple disciplinary actions, and ultimately, he was referred to the alternative school to keep up with his studies. Brandon is currently living with his grandmother Eunice Gray at the Lincoln Garden Apartments. Mrs. Gray has cared for Brandon for the past six years since his mother dropped him off and has never returned. Brandon does not have any contact with his biological parents currently. He occasionally attends the Greater Fairview Baptist Church with his grandmother. Brandon also attends Hinds Behavioral Health Services for youth due to behavior issues in school as well as at home. He was previously diagnosed with Attention-deficit/Hyperactivity Disorder and engaged in an Individualized Educational Program (IEP).

Presenting Problem / Reason for Referral

Brandon was referred to our offices by his grandmother Mrs. Gray who states "I am just worried about my grandson's wellbeing because Brandon is getting out of hand sometimes he stays out all night and hangs with the wrong type of friends, he even has started to argue with me, right now it is just getting really hard to reason with him." Mrs. Gray also states that she is not sure how often Brandon has engaged in alcohol or drugs but "he has come into the house, and I have smelt it on him a few times for sure" Mrs. Grey's referral to our offices stem from Brandon being recently accused of armed robbery and has pending charges against him. Brandon is currently being held within the Juvenile Detention Center. The criminal justice department will decide if Brandon will be charged as an adult upon his next court appearance scheduled for April 24, 2020.

Client's Perception of the Problem

When speaking to Brandon, he believes that his grandmother loves him and expresses his love for her as well, but believes she is overprotective stating that "she is always in my business and she needs to understand that I can take care of myself, she don't need to know where my every move is cause my own momma and daddy ain't worried like that." When Brandon was questioned about his new charges, he stated, "yeah, I got caught up, but they don't have me on nothing like a camera or nothing like that, so I'm not going to be locked up anyway. What you and everybody need to understand is that I got to take care of me, sure my grandma gives me a place to sleep because my momma and daddy took off on me, but I can handle my own."

Social Workers Perception of the Problem

After observing Brandon in multiple therapy sessions, it seems as if Brandon is detaching himself from the current issue and believes that he cannot be charged as an adult because he was not caught on camera. Brandon does not understand the seriousness of the crime committed, and

his current age puts him at risk for possibly being charged as an adult. It is evident from speaking to him that he is angry that he has not seen or spoken to his parents in the past six years and believes that since they do not care enough then, he has to care for himself instead. Brandon's anger is projected in the school environment, especially towards those in authority.

Contributing factors that led to the problem

Brandon was ten years old when his mother, Belinda Thomas, dropped him off and was due to return after her shift at work and has never returned. Repeated calls to Brandon's mother have gone unanswered, and Mrs. Grey has not tried to contact her daughter in a few years. She maintains the same telephone number just in case Brandon's mother ever tries to reach her. Mrs. Grey has not had any contact with Brandon's father, Mr. Turner, since Brandon was a toddler. Mrs. Grey recalls Brandon continually asking about the return of his mother, but she could only say, "Son, I do not know when your mom will be back."

Brandon was 13 years old when he began to experience behavioral issues at school. It started with continually moving out of his seat during class, loud outbursts, and difficulty staying on task. After repeated parent/teacher conferences, Mrs. Grey decided to get Brandon evaluated where he was medically diagnosed with Attention-Deficit/Hyperactivity Disorder. Brandon was assessed and began an IEP plan that would keep him on track but allow him to learn at a pace that was conducive to his style of learning and continued success. Last year Brandon began skipping school and getting into repeated fights and was ultimately referred to Capital City Alternative School.

Clients' resources and strengths

Brandon's primary resource is Mrs. Grey, who is his grandmother. He also has built a rapport with his mental healthcare worker Ms. Thomas whom he reports is friendly and "knows

how to talk to people and understand me." Brandon also refers to his church youth leader Caleb as being "cool and, sometimes he comes over to the house just to talk about me staying on track at school, he has taken me out to eat a few times which was cool, and we played basketball too, but when he starts talking that church stuff I just tune him out cause I ain't ready for all that." Brandon's strengths include his resilience, supportive grandmother, church youth leader, and he is still hopeful that one day he will see his mother again.

Human Behavior and the Social Environment

This section seeks to explain Brandon's physical behavior within his social environment while utilizing a practical theory to understand him. Within the social work, arena being able to understand human behavior within one's social environment is essential competency because this knowledge enables the social worker to be able to introduce culturally competent intervention plans and/or diverse methods that will fit the client system. Social workers understand that each client is different and present with various issues and needs, so utilizing an effective social work theory is also essential to positive outcomes. Looking at the client system, Brandon is connected to the educational system with a workable IEP program in place. He is connected to the mental health system and on a regular medication regimen. He is also connected to the juvenile justice department awaiting an upcoming court date with a probation officer assigned to his case. Since Brandon is connected to diverse systems within his immediate environment, utilizing Ludwig von Bertalanffy's systems theory can better assist social workers in developing an effective intervention plan.

The systems theory presented by Ludwig von Bertalanffy and others tells a story of how individuals interact in diverse parts of his/her environment, and how the individual is affected by the environment in which he or she lives. Von Bertalanffy used the systems theory to understand

bio-organisms better, but this theory has been utilized by diverse fields to explain behaviors or happenings (Friedman & Allen, 2010). When applying Von Bertalanffy's systems theory to the client's behavior and their interaction with the social environment, one can understand how the two are interrelated. Therefore, this paper seeks to carefully look at African American males that are coping with mental illness through the lenses of the systems theory carefully.

The systems theory is understood through the utilization of specific key terms that assist a worker in understanding the diverse dynamics involved between a client and his or her environment. When utilizing the systems theory, a worker must understand that there are many aspects of a client's complicated situation, and one cannot just assess the problem itself but must understand why a client behaves the way he or she does. Assisting a client in understanding the reasons behind the behavior is the key to effective change (Kirst-Ashman & Hull, 2018).

When assessing our client Brandon, he is experiencing diverse issues at home with his grandmother; his behavior at school has caused him to be referred to an alternative school, he has just received a recent diagnosis of a mental disorder, and a run-in with the law has caused Brandon to become entangled with the juvenile justice department. The systems theory takes into account all of the diverse systems that Brandon is involved in his social environment to understand better the behaviors that he is exhibiting.

An essential key term associated with the systems theory is a system. A worker needs to understand what a system is and what a system consists of. A system is made of diverse parts that make one network; it can be made up of a family, group, or peers. This system must also have a joint give and take relationship between one another (Barker, 2014).
Brandon lived with his mother until the age of ten, and then she just disappeared. Currently,

Brandon's mother is no longer caring for him; Brandon and his grandmother Mrs. Grey are considered a family system. For the past five years, Brandon has been living with his maternal grandmother, and she has become his primary caregiver.

A second important key term in the systems theory is homeostasis. For a family system to maintain homeostasis, it must be able to balance diverse crises. Homeostasis is a family's ability to remain healthy, stable, and grounded (Kirst-Ashman & Hull, 2018). According to Mrs. Grey, Brandon's grandmother, ever since Brandon turned thirteen years old, she has been noticing gradual changes in Brandon's behavior. It started with his behavior within the school environment and has evolved, ending in a nwe charge of armed robbery. Mrs. Grey states that Brandon's behaviors have gotten so far out of hand that she is no longer able to talk to him calmly. Brandon seems to be exhibiting behaviors that suggest he is unable to maintain homeostasis.

When children constantly misbehave, parents, teachers, or social workers try to understand the deeper issue that may be the initial cause of the behavior. According to Grohol (2019), a psychological defense that some children use to show their feelings through behavior issues is called "acting out" (para. 6). The immediate question needing to be answered: What is causing Brandon to act-out in class? Since the classroom environment is where he first exhibited the behavior, his teacher tried everything that she could do within her means as an educator to provide an atmosphere that was conducive to learning, sharing one's feelings, and having an open-door policy for students that just wanted to open up to her about anything. When these methods produced no proven results in the way Brandon was acting in the classroom, she reached out to his grandmother.

A family system is also impacted by several diverse transactions between the system and one's environment. These transactions are called inputs and outputs (Kirst-Ashman & Hull, 2018). Families are in a constant loop of receiving information or inputs and giving information or outputs within society. Mrs. Grey first noticed that Brandon was having issues at school when his teacher notified her of his constant behaviors within the classroom. Without this interaction between these two systems, they would not be able to assist Brandon in his studies. The same is true for Mrs. Grey's interaction with the mental health facility when seeking to understand Brandon's behaviors at school.

A system's outputs can also be seen as progress made because of inputs gained and planned interventions. Outputs can be the positive or the negative manifestations of an intervention (Zastrow & Kirst-Ashman, 2016). Deciding to sign Brandon up for alternative school was an intervention measure so that he would not fall behind in school. The decision to have Brandon evaluated because of the different behaviors he was displaying was, yet another intervention planned to help her grandson stay on track. The output of these measures could be evaluated by Brandon's ability to focus on his studies at school and continue to modify his behaviors through counseling and taking his prescribed medication.

One of the strengths of utilizing the systems theory is that it allows social workers to be active participants in a collaborative team that comes together for the betterment of each client. Brandon's teacher reached out to Mrs. Grey as Brandon's guardian, and together they worked out a plan to keep Brandon on track even though he ultimately had to be transferred to another school. Brandon's intervention plan was to find out the root of his behavior within the class setting through observation. The systems theory seeks to "look beyond the individual to

understand factors at multiple levels of clients' social systems… contributing to their struggle" (Social Work Degree Center, 2019, para. 13).

Mrs. Grey worked with Brandon at home and decided to take him to be evaluated by a doctor. Once he was evaluated Mrs. Grey worked closely with Brandon's teacher to develop an IEP plan that would work best for Brandon's learning style, and his mental health social worker to closely monitor his progress with his medication regimen. According to a study conducted by Hampden-Thompson & Galindo (2017), having a working partnership between a child's school and family network is imperative to the child's overall progress in school.

The system's theory has some good qualities when it comes to assessing families that are engaged with multiple systems within one's community. Still, there are also some weaknesses of this theory. One of the weaknesses is that the system's theory is that "it is not always easy to evaluate" (Social Work Degree Center, 2019, para. 15). The reason for this is because there are so many agencies that are involved with the client it is hard to gauge which intervention is effectively assisting the client to be his/her best self.

<div align="center">**Social Policy**</div>

Social Workers and Policy Practice

Social workers wear many hats when engaging with children, youth, families, communities, and even organizations. Some of these roles may be to educate a client regarding services, advocate for social equality, mediate an issue between a client and agency, coordinate a meeting, and/or initiate an action, to name a few (Zastrow & Kirst-Ashman, 2016, p. 53-54). Social workers engage in policy practice because of various injustices seen within the written policies of an agency or society. These injustices can include oppressive measures that stop certain individuals from accessing services within the community. Social workers are also tasked

to engage in policy practice, especially when policies have not been enacted that assist in the equality of services for certain individuals of society (NASW, 2017, p. 30). When it comes to client's that are involved within the juvenile justice system, this paper will point out, the research has already been analyzed and completed so that advocates can petition policymakers to make the necessary changes needed to fix this broken system.

In 1974, the federal Juvenile Justice and Delinquency Prevention Act (JJDPA) was enacted (American Bar Association, n.d., para. 1). This policy was and continues to be very influential to diverse stakeholders because it has our youth in mind. As society pushes more and more of the underserved and disadvantaged youth into the prison system, advocates must continue to push for change by rallying together with one voice to stop the injustice. This policy stands to protect the country's youth from just being locked up to a more goal-focused intervention strategy that would guide the youth and assist them in making better choices. According to the American Bar Association (n.d.), the salient issues of the JJDPA is to "end detention or jailing of non-criminal status offenders, reduce racial and ethnic disparities and improve the jail removal and sight and sound core requirement" (para.7-9).

Juvenile Justice and Prevention Act (JJDPA)

The Juvenile Justice and Delinquency Prevention Act (JJDPA) was newly sanctioned in 2018 formulated on the ideations that individuals engaged with the juvenile justice system deserve to be protected, the system needed to be held accountable by more stringent guided policies as well as allowing public safety workers to continue safeguarding public welfare within neighborhoods (Coalition for Juvenile Justice, n.d., para. 1). The JJDPA is in partnership with the youthful offender treatment programs to better optimize efforts of society (American Bar Association, n.d., para.1) The JJDPA also supports an extensive and comprehensive youthful

offender consulting organization within all regions of the United States (Coalition for Juvenile Justice, n.d., para.2). It provides financial support from the government for the curtailment and treatment of youthful offenders, along with the advancement of the juvenile justice system and delivery methods (Juvenile Justice and Delinquency, n.d., para.2). The engagement process of this bureau is steadfast in its efforts to continued education, specialized collaborations along with continued inquiries and assessments to ensure positive outcomes within diverse regions served (Coalition for Juvenile Justice, n.d., para.2).

There are specific reasons that juvenile rights need to be protected. Several cases have been publicly played out within the media regarding juveniles being charged with heinous crimes. Some juveniles arrested were deprived of the right to call legal guardians or legal defense while being interviewed by detectives for long periods, and after being convicted, some of these youth remained detained for months and only discharged because the genetic fingerprinting correlated someone else (Berkovich, 2014, p. 562-564). These are just a couple of reasons why the Juvenile Justice and Delinquency Prevention Act was developed; specifically, because the juvenile's rights were being violated. As a direct result of the newly implemented JJDPA, the detaining deputy was responsible for informing the legal guardians of the juvenile, explain his/her legal entitlements while in police custody, and letting guardian know the specifics of why juvenile was being restrained (Berkovich, 2014, p. 564). The JJDPA helped protect the rights of juveniles wrongly accused and interrogated, but it was still oppressive in many ways.

Rationale and Policy Analysis

Research has proven that if a Caucasian and an African American were to commit the same crime, the African American would serve a longer prison sentence (Crane & Ellis, 2004, p. 22). The restraint, confinement, and the admission of youth entering juvenile justice courts are

biased when it comes to African Americans. An example of this would be that some courts are more sympathetic to juveniles with a dualistic parent system compared with a juvenile in which there is only a single parent in the home (Crane & Ellis, 2004, p. 25). These are just two oppressive issues that give rise to the reasons behind the JJDPA, why it was adopted, and the need for continuous change within this system. Knowing and understanding the need for advocacy within the Juvenile Justice system or any oppressive system within our society that is proven to be oppressive to diverse individuals is why policymakers need to understand the needs of individuals within diverse communities and the oppressive systems that they are being faced with.

Researchers have concluded that juveniles being presented to the juvenile court system for committing crimes have had previous mental health diagnosis or need to be screened for any signs of mental illness. One set of researchers found that over 68% of juveniles that were in custody met the conditions for having mental disorders (Zeola, Guina, & Nahhas, 2017, p. 168). These researchers also link attention deficit hyperactive disorder (ADHD) to diverse juvenile delinquent acts committed within socially impoverished neighborhoods (p. 168). Sometimes a young person with mental issues, family disruptions, and possibly live in an impoverished neighborhood, can allow associates and childhood friends to influence decisions that can put him or her at risk for entering the juvenile justice system. These types of issues speak to the need for a continued unified and collaborative union between local school systems, mental health agencies, and the juvenile justice system to put a stop to the school-to-prison pipeline.

Application of Policy

Utilizing all the data previously stated, it is apparent that Brandon and his grandmother can benefit from a collaborative effort to get Brandon some assistance through advocacy,

education, and community-based efforts. When looking at the educational system, Brandon was attending Powell Middle School until he started exhibiting disruptive behaviors, getting into fights. After repeated suspensions, he was ultimately expelled from school. The educators did not recognize that Brandon was exhibiting a stressful situation at home for which he did not know how to express himself and therefore began to act out. The only measures taken against him were punitive and not therapeutic to find the reasons behind the behaviors. The school social worker in this environment was not referred to until the issues were too far out of hand, and Brandon was in the process of being referred to an alternative school.

If the school social worker began her assessment of what was going on with Brandon, she would have determined that Brandon needed therapy to express or vent out his feelings. After Brandon's teacher reached out to Mrs. Grey and acquired consent, she should have referred him to the school social worker. Brandon's teacher immediately referred Mrs. Grey to a mental health specialist to have Brandon evaluated instead. The school social worker would have been able to get to the root of the salient issues that Brandon was going through and the abandonment that he felt from his mother and would have been able to help him work through it. The mental health specialist diagnosed Brandon with Attention Deficit Hyperactivity Disorder (ADHD) and prescribed a therapeutic and medication regimen. At the time of his assessment at the agency, Brandon had been caught and detained at the detention center for allegedly committing armed robbery.

The school system allowed Brandon to fall through the gaps in services that could have been offered to him by thoroughly understanding the reasons behind his behavior. Once Brandon was evaluated and received an IEP plan, he was still ultimately expelled from school and sent to an alternative school. The Individuals with Disabilities Education Act (IDEA) stipulates that a

child who has been deemed in need of receiving services should not be dismissed or removed from his/her school setting (Willis, 2016). This school was in direct violation of the IDEA, and no one stood at Brandon's defense against the decision. Dealing with the rising mountain of rejection that Brandon was feeling from his mother, he now dealt with the rejection from the school and the friends that he made. Researchers propose that youth dealing with diverse mental incapacities suffer from self-perceptive deficiencies which affect their potential to identify and/or determine positive outcomes to dilemmas effectively, and this amplifies the threat of crime (Willis, 2016)

Practice

When working with individuals, families, and/or groups it is always important to remember that social workers we should communicate with passion, acknowledge and take action, respect and reassure the client(s), empathize and explain what is taking place, and eliminate any biases we may have towards the person or the situation. As social workers, our purpose is to empower and not judge.

Hinds Behavioral Health Services (HBSE) utilizes the trauma-focused-cognitive therapy or TF-CBT practice theory. Trauma-Focused-Cognitive Behavior Therapy is defined as

"a form of psychotherapy that integrates theories of cognition and learning with treatment techniques derived from cognitive therapy and behavior therapy which assumes that cognitive, emotional, and behavioral variables are functionally interrelated" (American Psychological Association, 2018).

TF-CBT is beneficial to Brandon because this intervention "is tailored to meet the needs of children and adolescents experiencing emotional and psychological difficulties" (GoodTherapy,

2020). More than 80% of traumatized children see improvement with this short-term treatment, that generally last 16 sessions (GoodTherapy, 2020).

TF-CBT is a combination of cognitive, behavior, and family therapy designed to allow the child(ren) and family to develop healthier communication skills (GoodTherapy, 2020). The goal is to modify distorted of unhelpful thinking and negative reactions and behaviors by focusing on ways to build positive problem-solving skills through stress management, new or kinship parenting, and communication skills (Psychology Today, 2020). When addressing issues of behavior, we want to focus on establishing the antecedent stimuli and consequences that shaped and maintained a given discrete behavior and a more complex behavioral repertoire (Baker, 2014). We also incorporate family therapy because this approach focuses on the whole system of the individuals and their interpersonal and communication patterns (Barker, 2014). His environment plays a major role in his actions.

One of the main reasons for implementing the TF-CBT theory is because it is an evidence-based treatment that has been

"evaluated and refined during the past 25 years to help children and adolescents recover from trauma. TC-CBT is a struggled, short-term treatment model that effectively improves a range of trauma-related outcomes in 8-25 sessions. It effectively addressed many trauma impacts, including affective (depressive, anger, anxiety), cognitive and behavioral problems as well as improving the participating parent's or caregiver's personal distress about the child's traumatic experience, effective parenting skills, and supportive interaction (TF-CBT, 2020).

This theory is also valuable because it correlates with Maslow's Hierarchy of Needs philosophy. Brandon's grandmother supplies him with his basic needs, but Brandon lacks psychological and self-fulfillment needs. The TC-CBT theory will allow us to assist Brandon in these areas.

Brandon's presenting problem(s) is his lack of psychological needs, such as; a sense of belongingness and love needs, esteem needs, and self-actualization due to being abandoned by his biological parents. His grandmother suspects he is abusing drugs and alcohol because he is staying out all night hanging with the wrong crowd. Also, he is accused of armed robbery with pending charges against him, and he could possibly be charged as an adult for the crime(s) he has committed. The TF-CBT theory will assist Brandon and his grandmother by utilizing techniques such as relaxing training, assertive training, problem-solving, and social skills training (American Counseling Association, 2008).

According to the Trauma-Focused Cognitive Behavior Therapy (2020), "TC-CBT been conducted in 21 randomized controlled trails in the U.S., Europe, and Africa and it has been documented that TF-CBT is superior for improving children's trauma symptoms and responses and is highly effective at improving youth posttraumatic stress disorder (PTSD), and effectively addresses cognitive and behavior problems." Even though Brandon is experiencing some difficulties in life right now, TF-CBT will assist him and his grandmother in achieving a more productive lifestyle.

With any type of treatment, there are limitations and advantages. According to the GoodTherapy (2020), "TC-CBT may not be appropriate for children and adolescents who have significant conduct or other behavioral concerns that were presented before his/her traumatic experience." In other words, if Brandon had had significant conduct or behavioral issues with no family or community support to assist to him, TF-CBT would not be as effective. But because

Brandon is resilient, he loves his grandmother and his grandmother loves him, he has Caleb from the church for support, he has a social worker that he trust and believes, and he has hope that one day his mother will return for him makes Brandon a prime candidate for TF-CBT therapy to him help. Individuals that have a supportive family and community network system have a greater chance of overcoming difficult obstacles.

Also, adolescents who abuse substances or who are suicidal may want to seek other stabilizing therapy approaches before using the TF-CBT therapy (GoodTherapy, 2020). It is vital that we treat the most prominent issues such as substance abuse and/or suicidal ideation because these issues will not allow for the individual to be accepting of the TF-CBT.

Some advantages to TF-CBT is the improvement of child PTSD, depressive, and anxiety symptoms, the improvement of child externalizing behavior problems (including sexual behaviors problems if related to trauma, enhancing parent-child communication, attachment, and ability to maintain safety, and reducing shame and embarrassment related to the traumatic experience (Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), 2020). TF-CBT has also demonstrated effectiveness in a variety of environments (clinical settings, foster care, schools, in-home) and with children and families from diverse cultural backgrounds experiencing different types of trauma (Child Welfare Information Gateway, 2018).

Some good practice skills that such be implemented when assisting individuals, children, families, and groups are active listening skills, critical thinking skills, setting boundaries, practicing empathy, communication skills, problem-solving skills, respect for diversity, and assessment skills. When we apply these skills, we are putting our clients first and providing them with good sound practice and problem-solving skills.

We also must be aware of any personal biases or prejudices we possess knowingly and especially those that we are unaware of. Some social service workers have been known for unfavorable projects attitudes and/or stereotyping clients through unrecognized biases, known as implicit social cognition (Bruster, Lanea, & Smith, 2019). We must be careful not to allow these biases known or unknown to affect the service we provide for our clients because they weigh heavily on our decision-making process. According to the NASW Code of Ethics (2017), our primary responsibility is to "promote the welling-being of client(s)."

Research & Evaluation

According to the NASW Code of Ethics, social workers must examine and stay updated with emerging knowledge relevant to social work and use evaluation and research evidence in professional practice (NASW,2017). Ethnic minority children continue to have unmet mental health needs (Kataoka, Novins, and DeCarlo Santiago, 2010). Although research regarding African American's diagnosed with ADHD is limited, there are some findings ("Culturally Competent Approaches to ADHD: Issues in African-American Populations", 2020). A past study found that African American youth has a diagnosis of ADHD only two-thirds as often as white youth ("Culturally Competent Approaches to ADHD: Issues in African-American Populations", 2020). Barriers such as insufficient financial resources, uninsured, and inadequate access to care have a major impact on African American families ("Culturally Competent Approaches to ADHD: Issues in African-American Populations", 2020).

Review of the literature

Due to the stigma regarding mental illness, treatment-seeking behaviors may result in delays or the absence of diagnosis ("Culturally Competent Approaches to ADHD: Issues in African-American Populations", 2020). African American children with ADHD are less likely to

be on prescribed medication ("Culturally Competent Approaches to ADHD: Issues in African-American Populations", 2020). African American youth are often affected by factors such as educational disciplinary procedures, high school drop-out rate, and juvenile justice involvement. Untreated ADHD and risks of intervention must be discussed ("Culturally Competent Approaches to ADHD: Issues in African-American Populations", 2020). In a national study, it was found that African Americans were more likely to receive a severe mental health diagnosis than their non-Hispanic White counterparts (Sinclair & Smith, 2016). According to Sinclair and Smith (2016) there has been a great increase in treatment outcome studies for adolescents with emotional and behavioral problems. It is important that culturally competent social workers become knowledgeable about different cultural values, norms, and customs of urban adolescents (Sinclair & Smith, 2016).

Application of Evidence Based Intervention

Trauma Focused Cognitive Behavioral Therapy (TF-CBT) can be used to assist African American adolescents and their families in creating positive support and empowerment (Phipps & Thorne, 2019. According to Phipps and Thorne (2019) due to the number of effective random control treatment studies, TF-CBT is evidence based. TF-CBT is a short time approach aimed at reducing negative affective responses, distorted cognitions, and maladaptive behaviors from trauma exposure (Phipps & Thorne, 2019). There are many studies that highlight the efficacy of using cognitive behavioral treatment with urban minority adolescents with anxiety and mood disorders (Sinclair & Smith, 2016). The effectiveness of cognitive behavioral treatment with African American adolescents with disruptive behavioral problems has been showed in the Lochman and Wells study (Sinclair & Smith, 2016). TF-CBT has also been effective with clients exposed to community violence (Phipps & Thorne, 2019).

Rationale for Evaluation

It is important that clinicians maximize the support of parents by engaging them in the treatment process (Phipps & Thorne, 2019). Adolescents between the ages three to eighteen have yielded positive results when using TF-CBT (Phipps & Thorne, 2019). A study was conducted using TF-CBT including 156 youth in a community mental health clinic from the age 10 to 18 (Phipps & Thorne, 2019). These adolescents presented with a variety of trauma history, however; those treated with TF-CBT results showed fewer PTSD symptoms, less depression, and greater improvements in functional impairment (Phipps & Thorne, 2019).

Summary

The adolescent male presented in this paper has experienced many traumatic events such as abandonment from his parents and community violence. He is now awaiting trial for armed robbery. Findings show that American adolescents between the ages of 16 and 19 years are at great risk for crimes such as robbery (Sinclair and Smith, 2016). For so long, the adolescent mental health has not been evaluated and treated. According to Sinclair and Smith (2016) minority adolescents that live in poor urban communities have higher mental health needs, however; they have limited access to mental health services. Therefore, TF-CBT would be beneficial as it will target the mental health symptoms of his experienced trauma. It is important that social workers establish rapport, a nonjudgmental relationship, and a sense of trust (Sinclair and Smith, 2016). There are many practitioners that are not prepared to work effectively with Urban American adolescents (Sinclair and Smith, 2016). This population face many social dilemmas, poverty, and community violence. These factors have led to behavioral and psychological outcomes for adolescents (Sinclair and Smith, 2016). Those working with

adolescents should always consider individual characteristics, stay up to date on current research on EBT, and think outside of the box (Sinclair and Smith, 2016).

Issues of Social and Economic Justice

According to the NASW Code of Ethics (2017), it is important that social workers challenge social injustice. On behalf of vulnerable populations social workers focus on issues such as poverty, discrimination, and other forms of social injustice. Brandon is an adolescent African American male that has experience neglect, violence, and emotional trauma. He is suffering from an untreated mental illness; all while being involved with the justice system. According to previous studies, those diagnosed with a mental illness are often stigmatized and discriminated against (Johnstone, 2001). They are also one of the most disadvantaged members of society (Johnstone, 2001). Many issues must first be addressed in order to reach justice for the mentally ill (Johnstone, 2001). Throughout this section, I will highlight issues of social and economic justice as it relates to African American adolescent males and mental illness.

According to Maslow's theory of motivation, basic needs must be met before more complex needs are addressed (Hopper, 2020). Maslow organized human needs into a hierarchy (Hopper, 2020). If someone is lacking a need, psychological needs must be met first (Hopper, 2020). After psychological needs are met, the next step is safety. A child may show signs of fear or anxiety when safety needs are not met (Hopper, 2020). Next in the hierarchy is feelings of love and belonging. This includes the need to feel loved in relationships, friendships, and belonging to a social group (Hopper, 2020). Esteem needs are next, which involves feeling self -confident and feeling valued by others (Hopper, 2020). If these needs are not met, they may experience feelings of inferiority (Hopper, 2020). Self- actualization is last on the hierarchy. This level refers to feeling fulfilled, however, the self-actualization is different for everyone (Hopper,

2020). According to Taylor (2003), he believes that justice belongs on the second level of safety needs. On this level, the need for justice would be consistent with the need for everyone to be treated fairly (Taylor, 2003). However, African American males are among those that are oppressed and discriminated against.

African American males are often negatively stereotyped. During the adolescence stage, African Americans may increase their risk for exposure to racial discrimination as they spend more time in public places (Sellers, Copeland-Linder, Martin & Lewis, 2006). Research shows that experiencing racial discrimination is not uncommon for African American adolescents (Sellers et al., 2006). African American adolescents have reported being victims of racial discrimination in the classrooms by classmates and teachers (Sellers et al., 2006). In a sample study, African American adolescents were more likely to report that they experienced discrimination than other ethnic and racial groups (Sellers et al., 2006). Research with adolescents has showed a link between experiencing discrimination and behavior problems (Sellers et al., 2006).

The justice system is used disproportionally for youth of color (Liberman & Fontaine, 2015). African American boys and young men are more likely to live in disadvantage neighborhoods where crime is present (Liberman & Fontaine, 2015). African Americans also have unequal protection under law and unequal enforcement of the law (Liberman & Fontaine, 2015). Race has impacted the construction of a separate and punitive justice system for juveniles (Liberman & Fontaine, 2015). As a social worker, it is important to advocate for equal laws by participating in social change. According to Social Work Policy Institute (2017), it is important that social workers understand that racism is systematic and must be addressed by systematic

approaches. It is important that social workers understand systems and person-in-environment perspective as it can be beneficial to policy work (Social Work Policy Institute, 2017).

Diversity

Diversity is used to represent a varied assortment of characteristics that individuals possess which can include one's family upbringing, traditions or customs, or an individual's perspective on life (Barker, 2014). Diversity can also be described in terms of one's nationality, sex, or financial situation as well. According to the NASW's (2017), Code of Ethics "social workers should have a knowledge base of their client's cultures and be able to demonstrate competence in the provision of services that are sensitive to client's culture and differences among people and cultural groups" (1.05(b), p. 10). As social workers are in constant contact with diverse clients it is imperative that when working with a client, a worker must understand the client's background, history, personal traditions along with the similarities and differences of this culture.

Gaining this information about a client will better assist the social worker in continuous rapport building, effective communication skills, and developing intervention plans while identifying certain gaps in services. This information is also very helpful in gaining insight into the way an individual perceives assistance from diverse resources. Research reports that some African Americans are very hesitant when it comes to seeking help from diverse governmental systems (Lum, 2011, p. 288). Some "help-seeking behaviors can be defined as how a person view[s] seeking assistance from others, [how one] react[s] to assistance and the likelihood [of an individual] to seek assistance from others" (Holley, 2011, p. 14). The past experiences of a client can greatly impact one's perception of the worker when trying to assist a client and this is one of the reasons understanding diversity is so important.

When it comes to the client system and his family as it relates to the juvenile justice system, African Americans have been disproportionately represented in the juvenile justice system for centuries. According to Crane and Ellis (2004), "Caucasian males committed [in]to the juvenile justice system make up 37% while African Americans represent 63% of the total population committed [in]to the juvenile justice system" (p. 20-21). Rovner (2016) puts another spin on racial disparity utilizing research gathering in a 10-year period where racial disparities between African American juveniles have only gone down 2% while Caucasian rates went down by 8% when it comes to committing youth into the juvenile justice system (para. 3). These percentages are alarming to social workers working with the youth population that are entangled with the juvenile justice system. When social workers encounter clients that are being met with racial barriers, it is up to the social worker to confront the injustices that are being felt by clients, because social workers are committed to challenging social injustices within our social institutions (NASW, 2017).

Racial disparities against African Americans date back for centuries, and even in this present day and time it infiltrates the diverse systems in which individuals interact with on a daily basis. African Americans are still being met with a mentality within our social institutions that they are aggressive, lawbreakers, and need to be imprisoned (Equal Justice Initiative, 2020, para. 8). This type of ideology is false and has been unfounded, but it has continuously given birth to racial tension within society when it comes to African Americans along with other diverse cultures. Balko (2019), points out that racial disparity against African Americans exist and proven data shows that even though African Americans are more compliant to police, they are more likely to be "treated far worse than white people" (para. 2). Having a clear understanding of racial disparities within the justice system, allows social workers to understand

the need to become culturally competent in matters such as this because clients need someone to be able to be a voice to the local congressmen and women about the injustices clients face daily.

Assessing mental health services is yet another barrier for African Americans when seeking services. The National Alliance on Mental Illness (2020) reports that African Americans face barriers when assessing mental health services for various reasons which can include "a lack of understanding about mental health issues,… dependence on one's faith and spiritual [leadership] instead of seeking help,… or reluctance" (para. 11-13). These barriers can prevent African Americans from assessing much needed services such as the treatment plan and medication regimen that was laid out for Brandon in order for him to stay on track while in school. "According to the Health and Human Services Office of Minority Health, African Americans are 20% more likely to experience serious mental health problems than the general population" (NAMI, 2020, para. 5). Some members of the African American community talk to family members rather than going to a health care provider because they believe that mental illness brings on an unwarranted humiliation. Social workers working with African Americans in the mental health field should find it equally important to understand how individuals feel about seeking services and educate clients on the importance of getting checked and being a healthier version of themselves.

Ethics and Values

In a practice situation, ethics and values are important to remember. Not only must we know what codes and ethics are, but we must also be able to understand them to implement them in our profession. A code is "a set of rules about how people should behave or about how something must be done" (Collins English Dictionary, 2020). Codes are guidelines that are designed to help follow the rules and not cause harm to others or ourselves. Codes are also

designed to help us accomplish the task we have set before us by following the rubric created to help us accomplish the desired goal.

We also must keep in mind the importance of values. Barker (2014) defines values as, "the customs, beliefs, standard of conduct and principle considered desirable by a culture, a group of people, or an individual" (p. 447). As social workers, one group of people bound by a code known as the Code of Ethics, are pledged to uphold a set of rules designed to serve, protect, advocate, respect, and empower the less fortunate. The Code of Ethics also protects, educates, and teaches those bonded to uphold its principles and standards.

In this practice situation, the social worker must understand the guidelines established by the NASW Code of Ethics when working with adolescents coping with Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). It is important to understand the complicity of TF-CBT to better equip social workers to care for the needs of our client, his family, and the community because TF-CBT is experienced differently with each individual based on his/her life experiences and events which is why the knowing and understanding the National Association of Social Workers (NASW) Code of Ethics is highly important.

The primary mission of the social work profession is;

> "enhance human well-being and help- meet the basic needs of all people, with particular attention to the needs and empowerment of vulnerable people, oppressed, and living in poverty. We are to focus on individual well-being in social context, while bringing attention to the environmental forces that create, contribute to, and address problems in living" (NASW Code of Ethics, Preamble, 2008).

As social workers, we are to foster our core values service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence. When assisting Brandon, we are providing a service. Service is the social worker's primary goal in helping people in need by addressing their social issues (NASW, Code of Ethics, 2008). When

addressing the social justice needs of Brandon, we must effect change by striving to ensure access to needed information, services, resources, equality of opportunities, and meaningful participation in decision making for all people (Brandon, his family, and the community). The dignity and worth of the person are critical because everyone wants to be treated with respect and valued. As social workers, we must treat each person in a caring and respectful fashion and be mindful of the individual's differences and cultural and ethical diversity (NASW, Code of Ethics, 2008). The importance of human relationships is also very important because building relationships with others help the social worker to local and available resources needed to assist their clients. The NASW (2008) says, social workers understand that relationships between and among people are an important vehicle for change; we are to engage people as partners in the helping process. Lastly, we must remember to practice with integrity and competence. Brandon and his grandmother are relying on the social worker to behave in a trustworthy manner, continuously being aware of the profession's mission, values, ethical principles, and standards and practice within our areas of competence and develop and enhance our professional expertise (NASW, Code of Ethics, 2008).

When working with Brandon and his family, all six core values of the NASW Code of Ethics served a meaningful purpose in aiding the Gray family. Now, we must evaluate and incorporate the key components of TF-CBT. According to Ramirez de Arellano, M.A., Lyman, D.R., Jobe-Shields, L., George, P., Doughtery, R.H., Daniels, A.S., Ghose, S.S., Huang, L., and Delphin-Rittmon, M.E. (2015), the key components of intervention for TF-CBT are psychoeducation, gradual exposure, behavior modeling, coping strategies, and body safety skills training. When we apply psychoeducation to the professional ethics and values of the NASW Code of Ethics, we are implementing, monitor, and evaluating policies, programs, and

interventions (NASW Code of the Ethics, Evaluation and Research, 2008) to promote the social well-being of our client and his family. When we incorporate gradual exposure and behavior modeling to the NASW Code of Ethics and values, we are striving to increase our professional knowledge and skills by applying them in practice but also practicing within our professional expertise (NASW Code of Ethics, Competence, 2008). Implementing coping strategies in the NASW Code of Ethics and values requires the social worker to be culturally competent and socially diverse. We should be recognizing the strengths that exist in Brandon's culture and be able to demonstrate competence in the provision of services that are sensitive to the client's needs (NASW Code of Ethics, Cultural Competence and Social Diversity, 2008).

In the social work profession, is it vital that we uphold our values, standards, and code of ethics by implementing them in every situation and executing them to the best of our abilities to ensure the well-being of the vulnerable population. We should always stayed committed to our client(s), remember, respect, and promote self-determination with our clients, provide services to the client only in the context of a professional relationship, understand the importance of cultural competence and social diversity, remember that privacy and confidentially is part of respecting the client, and provide a service that represents the social work practice with integrity and competence (NASW, Code of Ethics, 2008).

When we examine other professional codes, they are designed to fit the needs of that profession. For example, the business code of ethics is based on integrity, objectivity, professional competence, confidentially, and professional behavior (Code of Ethics and Professional Conduct, 2019). Their basic concept consists of building trust and credibility for the benefit of the company and the social work code of ethics is based on empowering individuals, groups, and organizations on a micro, mezzo, and macro level.

Conclusion

In this case study, Brandon, a 15-year-old African American male, is experiencing diverse issues at home with his grandmother. His behavior at school has caused him to be referred to an alternative school, he has recently received a mental health disorder diagnosis, and due to a recent encounter with the law, and now entangled with the juvenile justice department. Brandon has a lot going on the social workers plan on assisting Brandon and his family, he/she will have to be grounded in the social work core values, examine other theories that may help Brandon and his family, and most importantly, treat Brandon and his family with dignity and respect. Brandon needs someone that he can trust and is genuinely concerned about him and his future.

When assisting a child that has abandoned by his/her birth parents, this situation poses a traumatic and negative impact on the child's life. Social workers must build a trustworthy and integrity partnership with Brandon, his grandmother, and those that impact Brandon's life in a positive perspective (church group leader). It is vitally important that the social worker treats Brandon with dignity and respect while he is adjusting to new coping techniques and experiences. Building a trustworthy and integrity relationship with Brandon will benefit Brandon and the social worker if the social worker has to incorporate other IEPs.

The social worker must also be mindful that because this is a delicate issue for Brandon, she will have to be very invented about how she gets him to engage mentally and socially. No one wants to be stigmatized, but it is even more challenging to be a stigmatized African American, male, and an adolescent. Your men his age are trying to fit in with the crowd and not labeled as the social outcast. He has suffered enough but not being accepted by his parents, so he has to find a

way to fit in, and as the social worker, it is our job to assist him in finding himself by using the tools Brandon already poses.

Using evidence-based practice is essential in this practice situation because it helps social workers determine the best quality approach when addressing the needs of the client and his family. TF-CBT and Systems Theories are benefit Brandon because they both emphasize the importance of relationships among individuals, groups, organizations, and communities by developing healthier communication skills, changing the way an individual think, behaves, and responds to negative experiences. These skills will allow Brandon to build new and stronger relationships with people throughout his community and his life span.

All social workers must know that there is no such thing as a "one size fit all" theory. No one theory can or will fit everyone, but it is our job to find the best method or approaches to address the needs of our clients, one client at a time.

References

African Americans | Anxiety and Depression Association of America, ADAA. (2020). Retrieved

14 April 2020, from https://adaa.org/african-americans

African Americans | NAMI: National Alliance on Mental Illness. (2020). Retrieved from

https://www.nami.org/find-support/diverse-communities/african-americans

American Bar Association (n.d.) *Juvenile justice and delinquency prevention act*. Retrieved from

https://www.americanbar.org/advocacy/governmental_legislative_work/priorities_policy/

criminal_justice_system_improvements/juvenile_justice_delinquency_prevention_act/

American Psychological Association. (2018). Cognitive behavioral therapy (CBT). Retrieved

from https://www.dictionary.apa.org

Barker, R. L. (2014). Social work dictionary. (6th ed.). Washington, D.C.: NASW Press

Friedman, B. D. & Allen, K. N. (2010). 1 Systems theory. Frameworks for Clinical

Practice. Retrieved from Semantic Scholar

Balko, R. (2019 June 4). Another 'excuse' for police bias bites the dust. Retrieved from the

Washington   Post:

https://www.washingtonpost.com/opinions/2019/06/04/another-excuse-police-bias-bites-

dust/

Berkovich, Y. (2014). Ensuring Protection of Juveniles' Rights: A Better Way of Obtaining a

Voluntary Miranda Waiver. *St. John's Law Review, 88*(2), 561–595.

Betterteam. (2019). *Code of ethics and professional conduct*. Retrieved from

https://www.betterteam.com/code-of-ethics-and-professional-conduct

Black & African American Communities and Mental Health. (2020). Retrieved 14 April 2020,

from

https://www.mhanational.org/issues/black-african-american-communities-and-mental-health

Bruster, B.E., Lanea, T.Y., & Smith, B.D. (2018). Challenging implicit bias: preparing students

To practice with African American families. *Social Work Education*, 38(5), 654-665.

Charlesworth, J.R. (2008). *Helping adolescents manage anger* (ACAPCD-22). Alexandria, VA:

American Counseling Association.

Child Welfare Information Gateway. (2018). Trauma-focused cognitive behavioral therapy: A

primer for child welfare professionals (pp. 1-5). Retrieved from

https://www.childwelfare.gov

Coalition for Juvenile Justice. (n.d.) *Juvenile justice and delinquency prevention act*. Retrieved

from

http://www.juvjustice.org/federal-policy/juvenile-justice-and-delinquency-prevention-act

Collins English Dictionary. (2020). *"Code"*. Retrieved from https://www.collinsdictionary.com

Crane, K. D., & Ellis, R. A. (2004). Benevolent intervention or oppression perpetuated: Minority

overrepresentation in children's services. *Journal of Human Behavior in the Social*

Environment, 9(1/2), 19–38.

Culturally Competent Approaches to ADHD: Issues in African American Populations. (2020).

Retrieved 13 March 2020, from

https://www.psychiatrictimes.com/special-reports/culturally-competent-approaches-adhd-issues-african-american-populations/page/0/1

Friedman, B. D. & Allen, K. N. (2010). 1 Systems theory. Frameworks for Clinical Practice.

Retrieved from Semantic Scholar

GoodTherapy. (2020). Trauma-focused cognitive behavioral therapy (TF-CBT). Retrieved from

https://www.goodtherapy.org/learn-about-therapy/types/truma-focused-cognitive-
        behavioral-therapy

Grohol, J.M. (2019 June 3). *15 common defense mechanisms*. Retrieved from

https://psychcentral.com/lib/15-comon-defense-mechanisms

Hampden-Thompson, G. & Galindo, C. (2017). School-family relationships, school satisfaction

and the academic achievement of young people. *Educational Review, 69*(2), 248-265

Holley, L. D. (2011). Help-seeking behaviors of African American men. [PDF File]. College of

Education. Retrieved from https://via.library.depaul.edu

Hopper, E. (2020). Maslow Motivation Theory | the hierarchy of needs. Retrieved 25 March

2020, from https://the-happy-manager.com/tips/maslow-motivation-theory/

Johnstone, M. (2001). Stigma, social justice and the rights of the mentally ill: Challenging the

status quo. *Australian And New Zealand Journal of Mental Health Nursing*, *10*(4),

200-209. doi: 10.1046/j.1440-0979.2001.00212.xReferences

Kataoka, S., Novins, D. K., & DeCarlo Santiago, C. (2010). The practice of evidence-based

treatments in ethnic minority youth. *Child and adolescent psychiatric clinics of North

America*, *19*(4), 775–789. https://doi.org/10.1016/j.chc.2010.07.008

Kirst-Ashman, K.K. & Hull, G.H. (2018). Understanding generalist practice. Boston, MA.:

Cengage Learning

Liberman, A., & Fontaine, J. (2015). Reducing Harms to Boys and Young Men of Color from

Criminal Justice System Involvement. *Urban Institute*. Retrieved from,

https://www.urban.org/sites/default/files/publication/39551/2000095-Reducing-Harms-to-Boys-and-Young-Men-of-Color-from-Criminal-Justice-System-Involvement.pdf

Lum, D. (2011). Culturally competent practice: A framework for understanding diverse groups and justice issues (4th ed.). Brooks/Cole.

National Alliance on Mental Illness. (2020). African American mental health. Retrieved from NAMI:

https://namibuckspa.org/support/diverse-communities/african-american-mental-health/

National Association of Social Workers. (2017). *Code of ethics of the National Association of Social Workers*. Washington, DC: NASW

Phipps, R., & Thorne, S. (2019). Utilizing Trauma-Focused Cognitive Behavioral Therapy as a Framework for Addressing Cultural Trauma in African American Children and Adolescents: A Proposal. *The Professional Counselor*, *9*(1), 35-50. doi: 10.15241/rp.9.1.35

Psychology Today. (2020). Trauma-focused cognitive behavior therapy. Retrieved from https://www.psychologytoday.com

Ramirez, de Arellano, M.A., Lyman, D.R., Jobe-Shields, L., George, P., Dougherty, R.H., Daniels, A.S., Ghose, S.S., Huang, L., & Delphin-Rittmon, M.E. (2015). Trauma-focused cognitive behavioral therapy: assessing the evidence. National Center for *Biotechnology Information, U.S. National Library of Medicine* 65(5) 591-602. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1396183

Rovner, J. (2016 April 1). Racial disparities in youth commitments and arrests. Retrieved from The   Sentencing   Project:

https://www.sentencingproject.org/publications/racial-disparities-in-youth-commitments-and-arrests/

Samuel, I. (2015). Utilization of Mental Health Services Among African American Male Adolescents Released from Juvenile Detention: Examining Reasons for Within-Group Disparities in Help-Seeking Behaviors. *Child & Adolescent Social Work Journal*, *32*(1), 33–43. https://ecnhts-proxy.jsums.edu:3569/10.1007/s10560-014-0357-1

Sellers, R., Copeland-Linder, N., Martin, P., & Lewis, R. (2006). Racial Identity Matters: The Relationship between Racial Discrimination and Psychological Functioning in African American Adolescents. *Journal of Research On Adolescence*, *16*(2), 187-216. doi: 10.1111/j.1532-7795.2006.00128.x

Sinclair, M.M, Davis-Smith, B. (2016). Engaging urban African American adolescents in treatment. In McPhatter, A.R., Vakalahi, H.F., & Wells-Wilbon, R. (Ed.), *Social work practice with African Americans in urban environments* (pp.55-75). New York, Ny: Springer Publishing Company, LLC.

Social Work Degree Center. (2019). A brief introduction to social systems theory. Retrieved from https://www.socialworkdegreecenter.com/study/social-systems-theory-introduction/

Social Work Policy Institute. (2017). Maximizing Social Work's Policy Impact in a Changing Political Landscape.

Taylor, A. (2003). Justice as a basic human need. *New Ideas In Psychology*, *21*(3), 209-219. doi: 10.1016/j.newideapsych.2003.09.004

Trauma-focused cognitive behavioral therapy: national therapist certification program (2020). Retrieved from http://www.tfcbt.org

Willis, M. (2016). Utilizing Prosecutorial Discretion to Reduce the Number of Juveniles with

Disabilities in the Juvenile Justice System. *Brigham Young University Education & Law*

Journal, 2016(1), 191–215.

Zastrow, H.C. & Kirst-Ashman, K.K. (2016). Understanding human behavior and the social

environment. Boston, MA.: Cengage Learning

Zeola, M., Guina, J., & Nahhas, R. (2017). Mental health referrals reduce recidivism in first-time

juvenile offenders, but how do we determine who is referred? *Psychiatric Quarterly,*

88(1), 167–183.

Capstone paper40