

Post-Conference Workshops

Saturday, April 12, 2008

1:30 p.m.-5:00 p.m.

(Available for an additional fee of \$100)

1:30 p.m.-5:00 p.m.

Post-Conference Workshop #1

Community Based Participatory Research in Action

Karen M. Robinson, DNS, APRN, BC, FAAN, Beth Bonham, PhD, APRN, BC, Vicki Hines-Martin, PhD, RN, BC, Kay T. Roberts, EdD, RNC, FNP, FAAN, and Celeste Shawler, PhD, RN, CS

The purpose of this pre-conference workshop is to inform the audience of Community Based Participatory Research (CBPR) and how the methodology is utilized. CBPR actively involves the community being studied in the research. CBPR is typically used to study health issues of populations who are perceived as disenfranchised, difficult to study or poorly understood by society. Initially, a research topic that is significant to the community is identified with the aim of improving community health and ending health disparities. This pre-conference is designed to showcase how five faculty members incorporate CBPR in psychiatric mental health care across the life span and in multidimensional contexts. The following areas of research will be described.

A majority of youth who are detained in juvenile detention in the United States have mental health disorders. The disorders, undiagnosed prior to detention, are assessed and treated in a system that was never intended to do so. This presentation will describe how juvenile detention is a community-based intervention.

A website was developed to meet the physical and mental health needs of diverse populations using participatory action research. The web page functions as a portal for health information links targeting diverse populations, i.e., racial/ethnic minority, recent immigrant, and gay, lesbian, bisexual and transgender individuals.

An integrated mental health project utilized community participatory research by integrating members of the community in planning and implementation of the project. The Executive Director, two health ambassadors and lay community mental health advisors who lived in the community met with the project team on a regular basis. Informal support services provided to primary caregivers by their faith community served an unmet need. Family caregivers are often more willing to accept help from faith groups when compared to other sources. Traditional strategies of mobilizing help from faith groups will be compared to those of community participatory research.

The relationship of aging mothers and their adult daughters when the mothers have a health crisis was studied. Principles of community participative research were used to form focus groups to validate accuracy and to obtain more detail and depth about the lives of the two generations of women.

1:30 p.m.-5:00 p.m.

Post-Conference Workshop #3

Taking Charge from the Inside Out: Changing the Neural Pathways of Painful Emotions and Toxic Stress Patterns

Patricia Barry, MSN, PhD, CS

New findings in the field of neuroscience describe the plasticity or changeability of the neural networks of neurons that underlie painful and toxic emotions and stress. These toxic physiologic patterns have been conditioned in the body for months or years and can be resistant to cognitive behavioral interventions. This workshop will guide practitioners to know how to work with clients to use and develop a personalized four-step program to modify the conditioned physical patterns that activate the sympathetic nervous system (SNS) before the individual's cognition can override the rapid-acting toxic physical effects. Using the fight-flight-freeze model of SNS activation, the physiology of the freeze effect is explained. This knowledge will expand practitioner's understanding of the power of conditioned emotional responses and how to intervene with them in the clinical setting with populations of all ages. The content in this program includes specific written guidelines for nurse practitioners and educators to use when employing this methodology with clients. This program content also includes experiential use of the four step program for personal discovery of the participants and to deepen their understanding of how this model is used with clients. The Neurothymic Integration Method will be introduced experientially as an adjunct to clinicians' understanding of the effects of conditioned physiologic patterns and how they can be effectively addressed.