Specialization in Trauma-Informed Practice

This specialization is directed toward the acquisition of theory and skills to be utilized in settings dedicated to serving adults, children, families, and communities who have experienced trauma. Through this specialization, students will gain knowledge and skills for providing evidence-based, recovery-oriented, and trauma-informed care. Specific practices in which students will engage include: Clinical diagnosis, strength-based screening and assessment, person-centered planning, and interventions to specifically address individuals, families, and communities impacted by trauma.

**Required courses: 6 credit hours**

- SWRK 5742 Evidence Based Practices in Community Mental Health (3 credit hours; usually offered in Fall and in Spring)
- SWRK 5773 Approaches to Trauma Care (3 credit hours; usually offered in Spring and in Summer)

**Elective courses: 3 credit hours (choose one)**

- SWRK 5776 Trauma Services for Adults (3 credit hours; offered only in Fall)
- SWRK 5775 Trauma Services for Children and Adolescents (3 credit hours; offered only in Fall)

**Practicum Requirements: 6 credits hours**

A two semester, one-site, clinical field placement at a site providing direct service to individuals, families, or groups impacted by trauma in a health and/or mental health context.

*Students must also earn a "B" or better in the designated courses and successfully pass the 2 semester practica.*

**Application and Verification Process:**

Students should register in the Specialization as soon as possible upon beginning the MSW degree to ensure the Chair of the Specialization is assigned as their Faculty Mentor. Students interested in pursuing this specialization should notify the Chairperson of the Specialization of their intent to specialize prior to taking the required coursework. Students will be acknowledged upon completion of Specialization requirements.

For more information, contact Specialization Chair Dr. Monica Matthieu at 314-977-7139 or mmatthie@slu.edu.

Revised 2/2016 ACB
**TRAUMA-INFORMED PRACTICE SPECIALIZATION**

**Legal Name:** __________________________

**Banner ID:** ______________________________________

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<thead>
<tr>
<th>COURSEWORK</th>
<th>SEMESTER/YEAR COMPLETED</th>
<th>GRADE EARNED</th>
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<tbody>
<tr>
<td>SWRK 5742: Evidence Based Practice in Community Mental Health</td>
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<tr>
<td>SWRK 5773: Approaches to Trauma Care</td>
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<td>Choose one:</td>
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<td>○ SWRK 5775: Trauma Services for Children</td>
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<tr>
<td>○ SWRK 5776: Trauma Services for Adults</td>
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**CONCENTRATION PRACTICA SITE:** ______________________________

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<th>CONCENTRATION PRACTICA</th>
<th>SEMESTER/YEAR COMPLETED</th>
<th>GRADE EARNED</th>
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<tbody>
<tr>
<td>SWRK 5842: Clinical Practicum II</td>
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<td>SWRK 5843: Clinical Practicum III</td>
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**STUDENT AND SPECIALIZATION CHAIR MEET AND SIGN BELOW TO VERIFY COMPLETION OF MSW SPECIALIZATION REQUIREMENTS, THEN SEND TO MSW PROGRAM OFFICE FOR FURTHER REVIEW**

___________________________________________________  ____________
Signature of MSW Student atesting to completion of specialization requirements  Date

___________________________________________________  ____________
Signature of Trauma Informed Practice Specialization Chair  Date

___________________________________________________  ____________
Signature of Director of Field Education  Date

___________________________________________________  ____________
Signature of Director of MSW Degree Program  Date

Revised 2/2016 ACB