

Research Statement for Hayden C. Dawes

My program of research centers on developing and evaluating interventions that promote mental health among multiple marginalized populations, particularly lesbian, gay, bisexual, transgender, and queer (LGBTQ+) people of color (POC). This area of interest has developed over the last 10 years through my experiences doing advocacy, clinical practice, and research. I have developed varied methodological skills and capacities in multiple forms of inquiry, including advanced qualitative, quantitative, and mixed methods, to support my program of research. With clinical research overlooking LGBTQ+ POC, I endeavor to use these skills to address this pressing and emergent area.

Pilot Intervention for LGBTQ+ Young Adults of Color's Mental Health

LGBTQ+ POC experience alarming mental health disparities and face an inadequate mental health system to address their needs due to structural racism, heterosexism, and cissexism. Consequently, my dissertation focuses on responding to the unique mental health stressors that impact LGBTQ+ POC.

My innovative three-manuscript dissertation uses a rigorous mixed methods design to uncover foundational knowledge on *self-permission* (the degree to which an individual allows themselves to use self-determined thoughts, feelings, and behaviors for well-being) with an examination of a pilot study of an online mental health community intervention for LGBTQ+ young adults of color utilizing a self-permission practice (i.e., *Radical Permission*). These manuscripts include (1) a thematic content analysis of self-permission tweets during the COVID era, (2) a feasibility pilot intervention study with a convergent mixed-methods study design, (3) a preliminary efficacy analysis of the intervention's primary outcomes (i.e., anxiety and depression) and secondary outcomes (e.g., self-compassion, coping, community connectedness) with a convergent mixed methods design. In this dissertation, the applicability of an online community using self-permission practices for LGBTQ+ young adults of color is illustrated.

Preliminary findings indicate that the intervention demonstrates promise in intervening in mental health symptoms. Furthermore, using technology to create an online community shows how traditional clinical interventions can be augmented with digital technologies. This intervention approach provides a solution to the public mental health crisis of limited access and availability to affirmative providers and communities. To further scholarship in self-permission practice, I have a manuscript on self-permission slip practice that is currently under review, with plans for an auto-ethnographic essay to describe my journey with the practice.

Following the pilot of this intervention, I plan on using the preliminary findings to revise the intervention protocol and apply for an R21 grant with the National Institutes of Health to conduct a small-scale randomized controlled trial of my intervention. Multiple funding bodies (e.g., National Institutes of Health, Patient-Centered Outcomes Research Institute, William T. Grant Foundation) prioritize this critical work, especially because of the increased attention to the mental health of LGBTQ people and POC. Additionally, with collaborators, I plan on developing self-permission practices for other high-need priority populations, such as self-permission for post-partum parents and self-permission for men of color.

Other Research Endeavors

I have other research interests outside of intervention work. To better understand the mental health care and substance use treatment landscape for LGBTQ+ POC, I led a systematic review published in the *Journal of the Society of Social Work in Research* that elucidates their experiences in navigating and receiving behavioral health care. That research illuminated LGBTQ+ POC's challenges to receive affirming treatment, such as payer source issues, difficulty finding providers knowledgeable about issues related to being an LGBTQ+ person of color, and the need for non-Euro American mental health approaches. Community strengths were also identified, including the skillful use of identity disclosure to protect personal resources and peer recommendations to assist in identifying community-vetted providers who were competent and affirming.

Although my research focuses on the mental health needs of LGBTQ+ POC, I have other additional research endeavors. For instance, I'm co-PI on a qualitative research study, *Unequal Beginnings*, that aims to understand the experiences of first-generation minoritized Ph.D. social work students. From the findings, we are developing recommendations for social work academics on how Social Work doctoral programs can become more responsive to the needs of first-generation students of color who experience structural inequities. We hope that this research assists in diversifying Social Work academia.

Continuing My Research and Conclusion

To build upon my prior and current research, I plan to develop partnerships and collaborators in an academic environment. Through my experience with the Robert Wood Johnson Foundation's Health Policy Research Scholars program, I've gained experience in cross-discipline research projects. For example, I have recently collaborated with a fellow social work researcher and a Boston University public health economist to examine the telehealth mental health utilization of Women of Color during the COVID-19 pandemic. To continue leveraging these abilities to form research relationships, I notice potential collaborators in multiple disciplines. Being at a University would allow me to drive my research agenda to help bolster the well-being of LGBTQ+ POC communities using evidence.