

BIOGRAPHICAL SKETCH

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NAME: Leibowitz, George S

eRA COMMONS USER NAME (credential, e.g., agency login): GLEIBOWITZ

POSITION TITLE: Professor

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.*)

| INSTITUTION AND LOCATION | DEGREE (if applicable) | Completion Date MM/YYYY | FIELD OF STUDY |
|---|---------------------------|----------------------------|----------------|
| State University of New York at Buffalo | BA | 1990 | Anthropology |
| University of Rochester, Department of Psychiatry, Family Therapy Training Program | | 1994 | Family Therapy |
| University of Denver | MSW | 2001 | Social Work |
| University of Denver | PhD | 2007 | Social Work |

A. Personal Statement

For the past 20 years, I have been working as an interdisciplinary researcher, forensic evaluator, national consultant and trainer, and licensed clinician (LICSW) in the related assessment and treatment of behavioral health, i.e. mood disorders, trauma and etiological models of victimization, resilience, integrated behavioral health, and health disparities among diverse populations, including the impact of the COVID-19 pandemic globally. In my current role as Professor and Doctoral Program Director at Stony Brook University's (SBU) School of Social Welfare (SSW), and in my previous roles as the Director of the Online Health Sciences Program at the University of Vermont (UVM), and Director of the Department of Social Work Department at UVM, I have been actively involved in inter-professional education, workforce development, faculty mentorship, and program development in integrated care. I currently serve as PD for the HRSA BHWET 17-70 grant (M01HP31334), and through leadership efforts on HRSA and SAMHSA funded projects, I have focused on creating and utilizing a skilled and resilient healthcare workforce, as well as work on co-occurring mental health and OUD/SUD. Specifically, I have designed and implemented SBIRT in existing team-based, primary health care settings and community behavioral health organizations, which involved cross-training social workers and nurse practitioners. Furthermore, I serve as cluster leader/PI for SBU on a PCORI grant investigating whether integration of evidence-supported Behavioral Health (BH) and primary care services, compared to simple co-location of providers, improve patient-centered outcomes in patients with multiple medical and mental (*ie*, depression) morbidities.

Previous academic and clinical professional experiences have positioned me to support large grants, and serve as mentor to emerging faculty in social work and the social, behavioral and health sciences. I serve as Chair of the Appointment, Promotion and Tenure Committee in the School of Social Welfare, and the School's Integrated Health specialization. I hold cross-appointment as Professor in the Department of Psychiatry and School of Nursing. Furthermore, I served as a subject expert exploring the link between trauma and recidivism among incarcerated populations. Other projects I have worked on have included a focus on understanding and addressing addictions and opioid use disorder and developed strategies for preventing overdose. For examples, Recently, our research team that include SBU Bioinformatics and Psychiatry submitted an NIH R01 application responding to NOT-DA-19-041, Notice of Special Interest (NOSI): The Application of Big Data Analytics to Drug Abuse Research, in which we propose to conduct a study to understand opioid use disorder and its precursor conditions Additionally, I am member of the evaluation team in collaboration with Sun River

(formally HRHCare) on Long Island, NY on a SAMHSA funded grant: *Targeted Capacity Expansion-HIV Program: Substance Use Disorder Treatment for Racial/Ethnic Minority Populations at High Risk for HIV/AIDS*. This grant involves implementing a number of strategies and interventions at three health centers including Substance Use Disorder (SUD) and Medication Assisted Treatment (MAT) services as well as expanded HIV & Hepatitis C screening, care & treatment; integrated BH/primary care. This work along with all my professional experience have a foundation in assessing, treating, and promoting mental and behavioral health especially as it relates to the intersection between depression, anxiety, and trauma, including the co-occurrence of substance abuse and antisocial behavior. Specifically, I have investigated whether maltreatment, substance abuse, and antisocial behaviors are potentially linked via motivational disinhibitory mechanisms that underlie impaired control centered in the hippocampus and amygdala are uniquely linked to maltreatment among youth I have also investigated the adverse emotional, physical and psychological consequences of PTSD among World Trade Center (WTC) responders with Dr. Sean Clouston at Stony Brook University (who also serves as member of the Executive Team for the CTSA Community Engagement Core). Additionally, our research on health disparities and resilience resulted in a recent NIH grant submission with Dr. Erica Diminich, Associate Professor, SBU Program in Public Health, entitled Stress, Immigration-related Trauma and Emotion: Identifying Markers of Resilience and Healthy Aging Among Foreign Born Hispanic/Latinos at Midlife. Such successful collaborations will continue and be strengthened in order to carry out the goals of the proposed **CTSA UM1 LINCATS proposal** as well as the **CTSA K12 Mentored Research Career Development Program Award**.

I will utilize my expertise in multiple research methods, track record of funded research and educational programs focused on community engagement with URGs and tribal communities addressing the social determinants of health and disparities and as a Site Principal Investigator of patient-centered clinical trials in order to serve as Module lead for the proposed **NIH SBU CTSA UM1 Community Engagement Module (C2)**. Moreover, my experience as Chair of the Appointment, Promotion and Tenure Committee, Doctoral Program Director, as well as experience with community needs assessments all scaffold my capacity to carry out the specific aims of this of this project. My commitment to delivering an innovative interprofessional curriculum and translational research includes leveraging longstanding partnership with leaders representing URGs as well as providing a rigorous research training program to PhD students and emerging faculty scholars in School of Social Welfare and other Schools in SBU Health Sciences trained in addressing structural inequalities in healthcare.

Ongoing and recently completed projects that I would like to highlight include:

M01HP31334

HRSA, Behavioral Health Workforce Education and Training (BHWET) Program

Leibowitz (PI)

2017-present

Integrated/Intra-professional Behavioral Health Workforce Education and Training (IBHET).

SAMHSA Targeted Capacity Expansion-HIV Program:

Debbie-Ann Ellington (PI); Role: Program Evaluator

2017-present

Substance Use Disorder Treatment for Racial/Ethnic Minority Populations at High Risk for HIV/AIDS

PCS-1409-24372

Patient-Centered Outcomes Research Institute (PCORI). Contract.

Littenberg (PI); Role: Cluster Leader/Site PI

2017-present

Integrating Behavioral Health and Primary Care for Comorbid Behavioral and Medical Problems.

B. Positions, Scientific Appointments, and Honors

Positions and Scientific Appointments

2019-present Director, Doctoral Program, SBU School of Social Welfare

2017-present Chair, Integrated Health Program, Stony Brook University, School of Social Welfare
2016-present Professor, Stony Brook University, School of Social Welfare
2016-present National Association of Rural Mental Health (NARMH)
2015-2016 Director of Health Sciences, UVM, College of Nursing and Health Sciences
2014-2015 Chair, Department of Social Work, UVM, Department of SW
2014-2016 Director and PI, Title IV E Child Welfare Training Partnership
2013-2016 Associate Professor (with tenure), UVM, Department of SW
2009-2013 Adjunct Assistant Professor, Doctoral Program, Smith College School for SW
2007-2013 Assistant Professor, University of Vermont, Department of Social Work
2007-present Consultant/Trainer, Vermont Department for Children & Family Services (DCF)
2007-present Clinical and Research Consultant, Northeastern Family Institute (NFI), Burlington, Vermont
2001-2007 Adjunct Professor University of Denver, Graduate School of SW, Denver, CO
1999-2007 Sex Offense Psychotherapist/Evaluator/Supervisor, Progressive Tx Systems, Denver, CO.
1999-2000 Social Work Supervisor, Family HomeStead, Denver, CO
1998-1999 Treatment Coordinator/Social Worker, Hogares Inc., Albuquerque, NM
1997-1998 Assistant Director, Jewish Board of Family/Children's Serv. Hawthorne Cedar Knolls, NY
1994-1996 Treatment Team Leader/Family Therapist, Edwin Gould Academy, Chestnut Ridge, NY
1994-1996 Director of Case Management, Center for Alternative Sentencing and Court Employment, NYC

Honors

2012 Richard P. Kluft Award for the Journal of Trauma and Dissociation 2011 Best Article
2008 Vice President, *Pi Gamma Mu (PGM) International Honor Society in Social Sciences*

C. Contributions to Science

Understanding the etiological and developmental factors that are associated with behavioral health and functioning are critical and the overarching focus of several empirical investigations and publications. Stemming from this line of inquiry, one of my primary aims has been to contribute to the prevention and intervention literature an understanding what underlies substance use disorders as well as the trauma-delinquency link that can be utilized to inform treatment. My work has focused on the intersection of mood, trauma, and behavior across the lifespan and the co-occurrence of substance use. For example, I have served as a clinical expert developing and disseminating efforts to better address mental health among aging incarcerated adults, as well as the role of substance use as mediating the relationship between cumulative trauma and force used in offending among adolescents.

- a. Maschi, T., & **Leibowitz, G.** (2018). Aging, stigma, and criminal justice: Toward human rights-based assessment and intervention. In W. T. Church II & D. W. Springer (Eds.), *Serving the stigmatized: Working within the incarcerated environment* (pp. 88–113). Oxford University Press.
- b. Maschi, T., Leibowitz, G.S., Morgen, K., & J. Rees (2018). Exploring the Relationship Between Cumulative Trauma and Recidivism among Older Adults: Does Race and Offense History Matter? *Traumatology*, 25(1), 11-20
- c. Levenson, J., Grady, M. & Leibowitz, G.S. (2016). Grand Challenges: Social justice and the need for evidence-based sex offender registry reform. *Journal of Sociology and Social Welfare*, 43 (2), 3-38.
- d. Marini, V., **Leibowitz, G.S.**, Burton, D.L., & Stickle, T.R. (2013). Victimization, substance use, and sexual aggression in male adolescent sexual offenders. *Criminal Justice & Behavior*, 20 (10), 1-15.

The connection between mood and age changes throughout the lifespan with evolving behavioral consequences. On the other end of the life spectrum, my work on mood, trauma, dissociation, and delinquent behavior among adolescents has informed my work and understanding of the evolution of mood disorders and subsequent treatment needs (several of these publications are the outcome of mentorship of emerging faculty and are co-authored with trainees).

- a. **Leibowitz, G. S.**, Laser, J. A., & Burton, D. L. (2010). Exploring the relationships between dissociation, victimization, and juvenile sexual offending. *Journal of Trauma & Dissociation*, 12(1), 38-52.
- b. **Leibowitz, G.S.**, Akakpo, T., & Burton, D.L. (2015). Comparison of non-sexual crimes committed by juvenile sexual offenders and delinquent youth in residential treatment in the USA. *Journal of Sexual*

Aggression: An International, Interdisciplinary Forum for Research, Theory and Practice.

DOI:10.1080/13552600.2015.1026854

- c. Yoder, J., Dillard, R., & **Leibowitz, G.S.** (2017). Cumulative family experiences and the role of sexual victimization: a comparative analysis between youth sexual and non-sexual offenders. *International Journal of Offender Therapy and Comparative Criminology*. Article first published online: November 20, 2017 doi: 10.1177/0306624X17738063
- d. Jencks J.W. & **Leibowitz G.S.** (2018). The impact of types and extent of trauma on depressive affect among male juvenile sexual offenders. *International journal of offender therapy and comparative criminology*, 62(5), 1143-63.

Primary care is integral to mental health care. Primary care is often the first place mental health challenges are identified, assessed and treated. Because of the important role primary care plays in the mitigation of mental health concerns, I have pivoted much of my attention in both my teaching and research to build and support an interdisciplinary integrated workforce and strive to understanding in what ways integrated behavioral health in primary care operates to improve patient outcomes. As local Principal Investigator on a large multi-site PCORI funded study investigating patient outcomes in the integration of evidence-supported Behavioral Health and primary care services among adults experiencing chronic comorbid conditions. Within this study, we were able to better understand how integrated behavioral health related to patient outcomes (ie, depression, anxiety, physical functioning) among several subpopulations including patients 65 and older.

Additionally, I have been working a part of an interprofessional team at Stony Brook University that include Family and Population Medicine, Computer Science, Public Health, and Biomedical Informatics using all payer hospital data on Long Island combined with census data to investigate geographic and sociodemographic differences in opioid poisoning (OP) levels, which almost doubled from 2010 to 2016, in order to tailor interventions for OUD. I co-led a 2019 study published in AJPM, with findings that OP has been more diverse by gender, age, economics and location. Conversely, on a national level the highest OP rates have been among young adults. Our team's methods and findings provide a foundation to build a public health-based framework for opioid epidemic research through integrative spatial-temporal based analytical methods for population studies. A forthcoming special issue will highlight the outcomes of MAT program at a large FQHC on Long Island focused on OUD among the medically underserved also incorporating findings concerning the impact of COVID-19. Finally, in collaboration with the health department in New Delhi and the Tata Institute for Social Sciences (TISS), Mumbai India, we investigated the prevalence of depression using the PHQ-9 and the community impact of the COVID-19 pandemic in India.

- a. Crocker, Abigail M., Rodger Kessler, Constance van Eeghen, Levi N. Bonnell, Ryan E. Breshears, Peter Callas, Jessica Clifton... **Leibowitz** et al. "Integrating Behavioral Health and Primary Care (IBH-PC) to improve patient-centered outcomes in adults with multiple chronic medical and behavioral health conditions: study protocol for a pragmatic cluster-randomized control trial." *Trials* 22, no. 1 (2021): 1-18.
- b. Schoenfeld, E.R.*, **Leibowitz, G.S.***, Wang, Y., Chen, X., Hou, W., Rashidian, S., Saltz, M., & Wang, F. (2019). Geographic, temporal and sociodemographic differences in opioid poisoning utilizing an all-payer hospital database: SPARCS 2010-2016. *American Journal of Preventive Medicine*. *first author shared equally
- c. **Leibowitz, G.S.**, Turner, W., Ramsey, K., Chinea, C. & Jenks, N. (in press). Lessening the impact of opioid misuse among vulnerable populations at an FQHC: Findings from a medication assisted treatment (MAT) program in New York. *Public Health Reports*.
- d. Das, S., Swain, S., **Leibowitz, G.S.**, & Tripathy, T. (2022). Assessment of depression in the community during the Covid-19 pandemic in India: A web-based cross-sectional study. *International Journal of Multidisciplinary Educational Research*, 11(15), 25-30. DOI: 2022/11.01.85