

Trauma-Informed Care and Adolescents

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Introduction

This systemic review identified literature examining effects of incorporating trauma-informed care (TIC) focused on decreasing aggressive behaviors in adolescents and young adults into mental health settings. Primary research question: In survivors of abuse, does TIC in inpatient mental health settings improve overall mental health?

Methods

Studies: cross-sectional, mixed-methods, convergent, retrospective

Inclusion criteria:

- Young adults (aged 10–30 years)
- Victims of trauma or abuse
- Admitted to an inpatient mental health setting

Primary measures:

- Child post-traumatic stress disorder symptoms scale
- Trauma exposure screening
- Problem behavior frequency scale
- Depression symptom scale

Results

- About 70% adolescents and young adults; 30% adults
- Mostly females; some male and transgender participants
- Mostly Whites and African Americans; 10% Hispanic, Native American, or Pacific Islander
- Most adolescents experienced at least one traumatic event
- Diagnoses included:
 - Mental health disorders
 - Post-traumatic stress disorder
 - Depression
 - Suicidal ideation

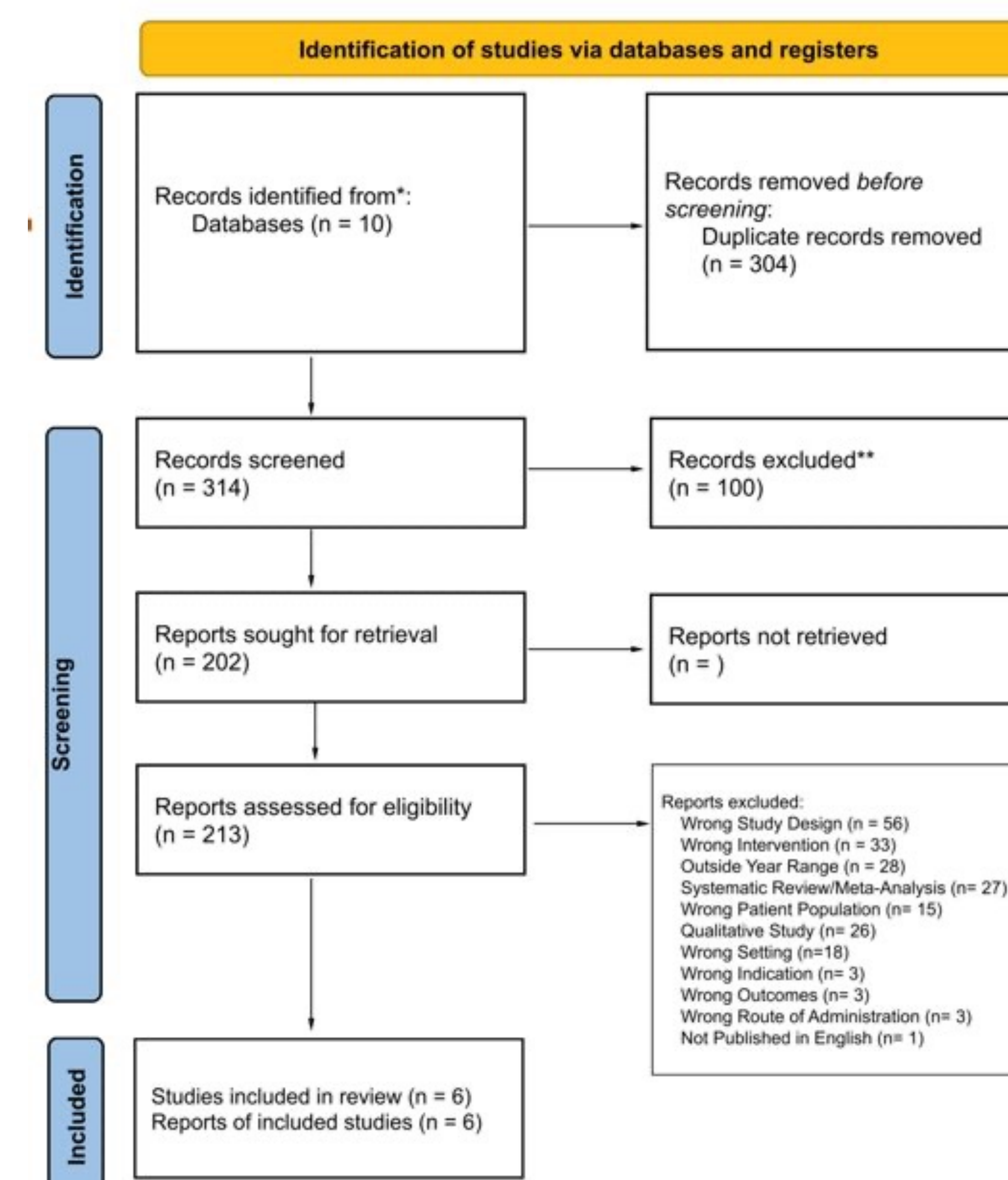
Discussion

Trauma-informed care:

- Reduced symptoms such as aggressive behavior that stemmed from sexual assault, abuse, neglect from or death of a family member.
- Well-trained providers can create a safe space for survivors of abuse to feel a sense of belonging.
- TIC improved academic outcomes, lifestyles, and physical, mental, and emotional health.
- TIC enhanced engagement, treatment adherence, and health outcomes.

Conclusions

TIC improved engagement, treatment adherence, and quality of care and detected and addressed signs and symptoms of trauma. There is a need for longitudinal studies that measure long-term effects of TIC.



References on request