


**First Look:  
The Intergenerational Effects of  
Trauma on  
Child and Family Outcomes**


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HORNBY ZELLER ASSOCIATES

## MAINE'S SYSTEM OF CARE CONTEXT

### Trauma Focus



Instead of asking "what is wrong with you?" a trauma-informed approach asks "what has happened to you?"

### Evaluation Tools Added

- Traumatic Events Screening Instrument (TESI)
- Lifetime Incidence of Traumatic Events (LITE; both parent and child versions)
- Trauma Symptom Checklist (TSC; both young children and youth versions)

## PRESENTATION FOCUS

- Types of Trauma and Their Impact
- Prevalence of traumatic experiences in THRIVE children and youth and their caregivers
- Effect of family's history of trauma on child and family outcomes
- Implications for Systems of Care


## TYPES OF TRAUMA AND THEIR IMPACT

## TYPES OF TRAUMA

- Historical: Affects Large Groups
- Interpersonal: Affects Individuals
  - Intra-familial
  - Extra-familial

## HISTORICAL TRAUMA

Did Barack Obama read Maria Yellow Horse Brave Heart's speech before addressing our country on race?



*Dr. Maria Yellow Horse Brave Heart*

## HISTORICAL TRAUMA THAT CROSSES GENERATIONS

Cumulative emotional and psychological wounding across generations, including one's own lifespan, because everything up to a minute ago is history –  
*Maria Yellow Horse Brave Heart*

**Healing Intergenerational Trauma**

1. Confront our trauma and embrace our history
2. Understand that trauma
3. Release the pain
4. Transcend the trauma

*She said it, he did it*

## LAKOTA PARENT SAYS

*I've never bonded with any parental figures in my home. At seven years old I could be gone for days at a time and no one would look for me. I've never been to a boarding school. All the abuse we talk about happened at my home. Maybe if it happened by strangers it wouldn't have been so bad—the sexual abuse, the neglect. Then I could have blamed it all on another race.*

## INTERPERSONAL CHILDHOOD TRAUMA

- Chronic rather than acute
- Associated with wide range of symptomatic reactions
- Significantly impacted by caregiver's response
- Frequently linked to intergenerational patterns of trauma transmission

## COMPARISON: HISTORICAL AND INTERPERSONAL TRAUMA

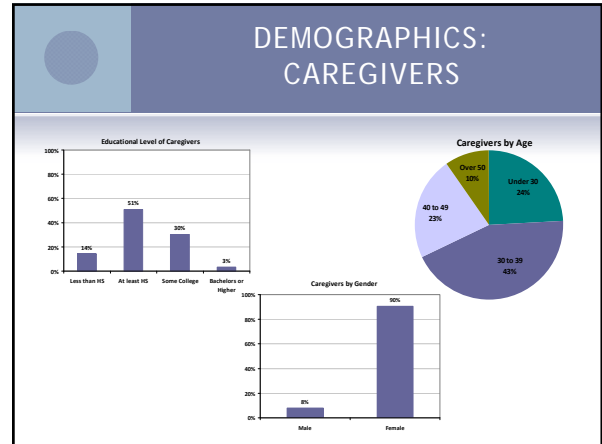
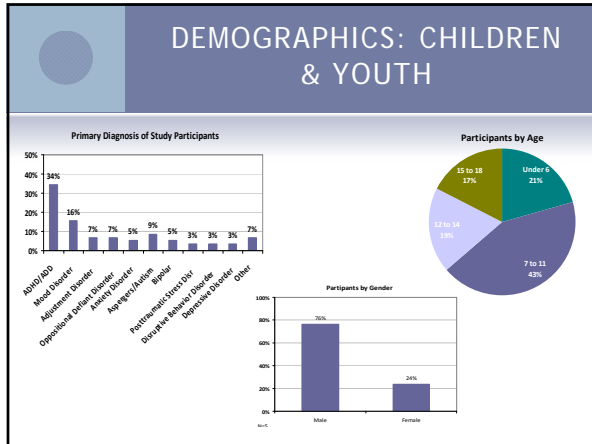
<b>Historical: Holocaust Survivor</b>	<b>Interpersonal: Abused Child</b>
<ul style="list-style-type: none"><li>● Traumatic events emerged from anonymous external source (Nazis)</li><li>● No breakdown in trust with attachment figures</li><li>● Child survivors had already established trust with parents, provided model for life after war</li></ul>	<ul style="list-style-type: none"><li>● Child abuse victims are violated by trusted parent</li><li>● Equally damaging is inability of non-offending parent to protect</li><li>● Damaged attachment bond</li><li>● No healthy behavior to model as adult</li></ul>

## INTERGENERATIONAL PATTERNS

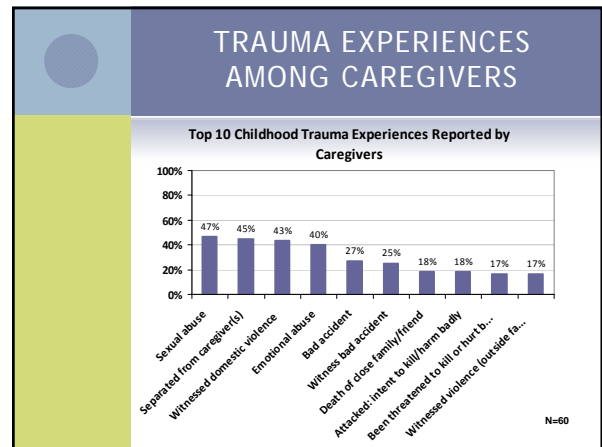
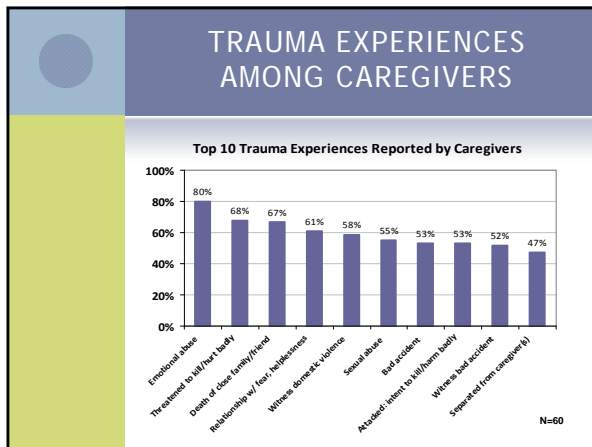
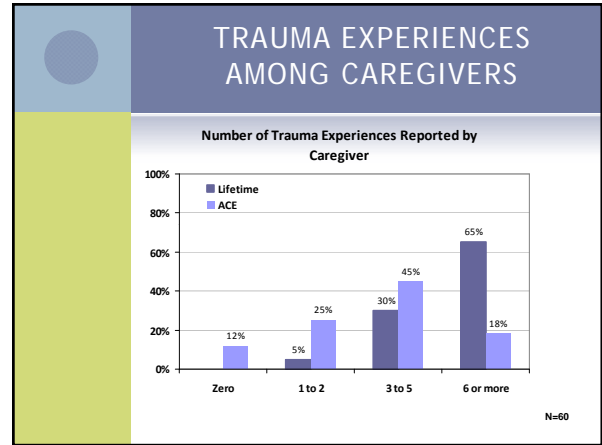
**Children who have been traumatized often become either:**

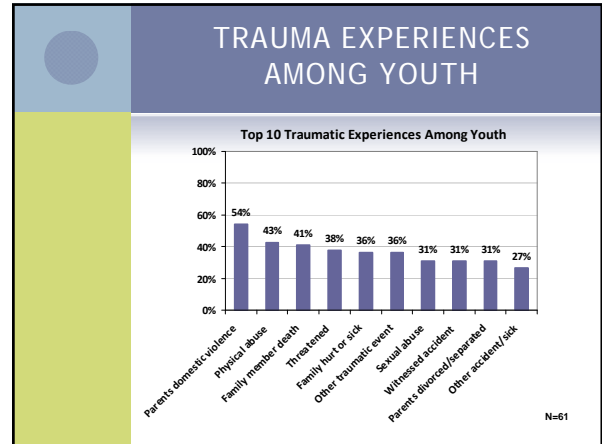
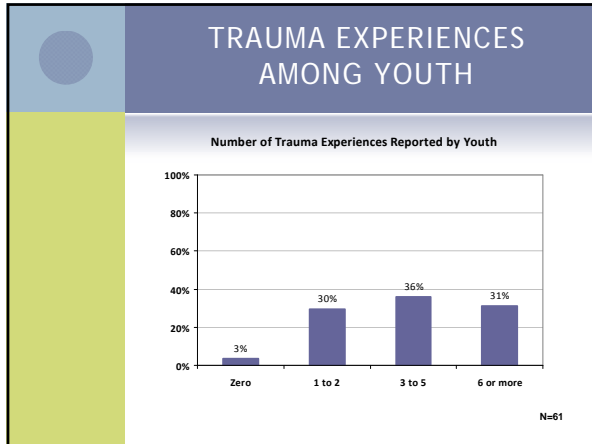
- Persecutors
- Victims *or*
- Rescuers

## THRIVE PARTICIPANTS: STUDY POPULATION



## PREVALENCE OF TRAUMA IN THRIVE CHILDREN AND THEIR CAREGIVERS

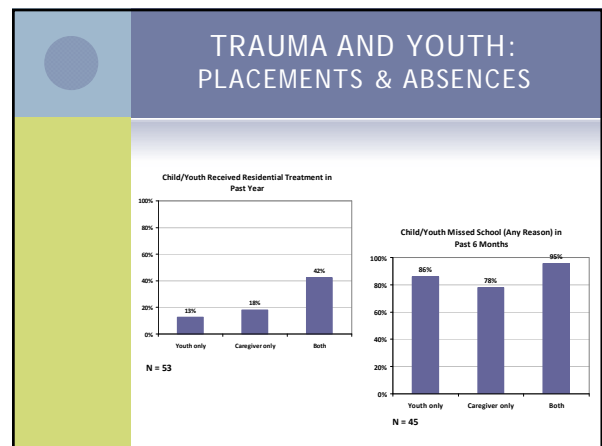
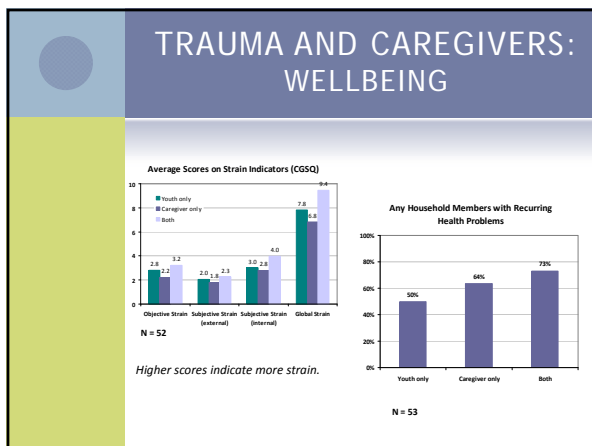


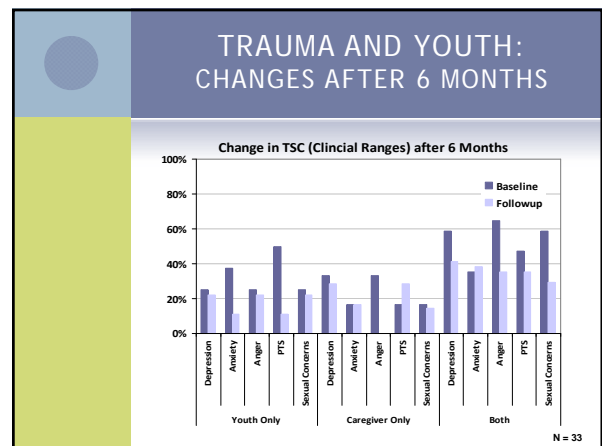
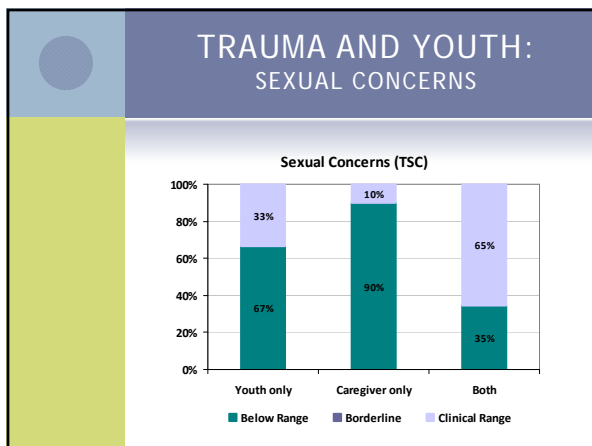
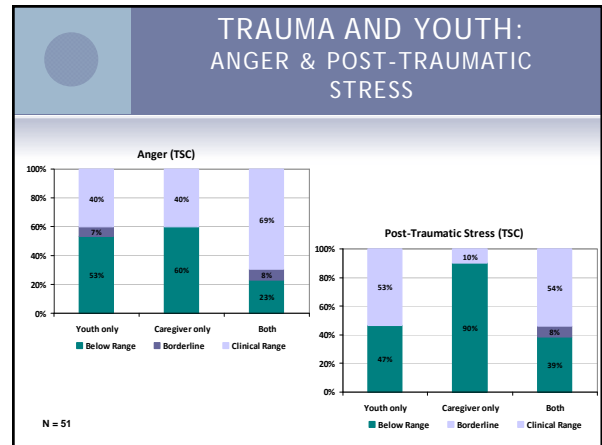
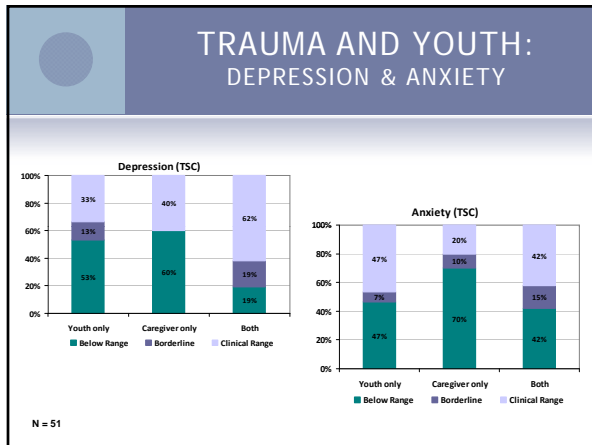
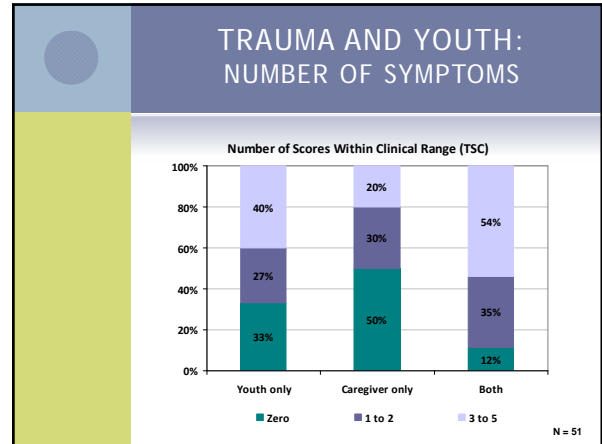
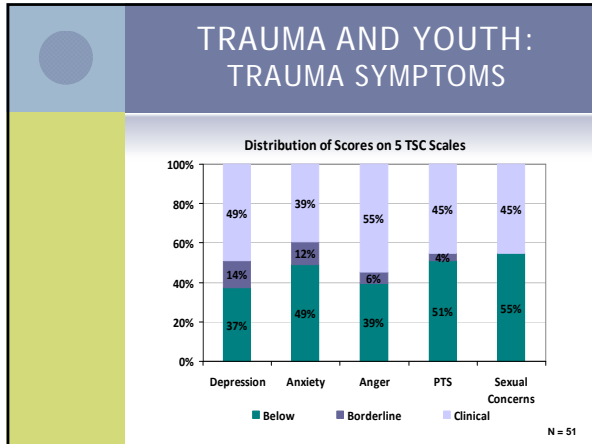


## EFFECT OF FAMILY'S TRAUMA HISTORY ON CHILD AND YOUTH OUTCOMES

### COMPARATIVE GROUPS

Category	N
Youth reports 3 or more trauma events (but not caregiver)	16
Caregiver reports 3 or more childhood trauma events (but not youth)	11
Both caregiver and youth report 3 or more trauma events	26





## IMPLICATIONS FOR SYSTEMS OF CARE (SOC)

### PRACTICE IMPLICATIONS

- **Take into account parent and/or primary caregiver trauma history in all aspects of SOC**
  - **Development:** Create a trauma-informed service environment through outreach, education and training for key stakeholders and partner agencies.
  - **Practice:** Select and implement trauma-specific practices that include both youth and family experiences.
  - **Evaluation:** Incorporate tools that capture both youth and family experiences and trauma-specific outcomes.
  - **Policy:** Implement local/state policies that support trauma-informed approach, practice and evaluation.

### MAINE: DEVELOPMENT

- Developed collaborative relationship with Child Welfare, Juvenile Justice, Mental Health Service Providers and Local Schools
  - Governing council, committees, co-trainers, trauma-champions, community collaborative
- Provide Targeted Education and Training on Trauma-informed Approach
  - 2-day Trauma Informed Training for Child Welfare workers with nationally recognized trauma experts
  - On-going and as-needed Technical Assistance to organizations and agencies regarding Trauma-informed Approach

### MAINE: PRACTICE

- A representative group of youth, family and Thrive members selected 2 EBTs to implement:
- **Trauma-Focused Cognitive Behavioral Therapy**
  - Participated in 1-year Learning Collaborative offered by National Traumatic Stress Network
  - Implemented a 1-year Local Learning Collaborative to train and support over 30 clinical staff at 8 partner agencies
- **Child Parent Psychotherapy**
  - Created 1-year Learning Collaborative to train and support 18 clinical staff

### TRAUMA-FOCUSED COGNITIVE BEHAVIORAL THERAPY (TF-CBT)

- Address the unique needs of children with Post Traumatic Stress Disorder (PTSD) or other problems related to traumatic life experiences
- Caregiver-child relationship targeted
  - provide knowledge and skills related to processing the trauma;
  - manage distressing thoughts, feelings, and behaviors;
  - enhance safety, parenting skills, and family communication.

### CHILD PARENT PSYCHOTHERAPY

- Trauma problems in young children addressed through primary attachment relationships, generally parent(s)
- Caregiver-child relationship targeted
  - Enhance supportive, protective and responsive parenting
  - Restore child's sense of safety and trust in parent

## MAINE: EVALUATION

- Conducted inventory of available trauma metrics
  - Selected 3 trauma measurement tools for local evaluation (added to evaluation interviews) to capture caregiver and youth trauma experiences
- Release quarterly CQI reports that include aggregate trauma history and outcomes of participants and caregivers
- Developed, piloted and implemented the Trauma Informed Agency Assessment (TIAA)

## MAINE: POLICY

- State promoting its support for Trauma-informed Approach and Trauma-specific practices
- On-line Trauma Informed Agency Assessment (TIAA) required of all agencies contracted with CBHS
- Changes to Medicaid Billing to support EBTs
  - Allows clinicians to bill for meeting privately with parents as part of child/youth treatment
  - Automatically extends treatment timeframe for youth enrolled in TF-CBT

## CONCLUSIONS

- How do we adopt a universal precautionary approach to trauma?
  - identify trauma early
  - work with young mothers and fathers
  - ensure that parents get mental health care
  - take away the shame and stigma associated with trauma
  - create a structure for this conversation using trauma language and trauma theory
  - offer both trauma-*informed* and trauma-*specific* services
- **Consider how your family organizations and youth organizations can support and lead this conversation!**

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