









The Importance of Considering Childhood Adversity Patterns When Working with Youth in Residential Care

Chanelle Gordon, Ph.D. and Patrick Tyler, Ph.D. Child and Family Translational Research Center



What is Childhood Adversity (CA)?

"Experiences that are likely to require significant adaptation by an average child and that represent a deviation from the expectable environment (p. 363, McLaughlin et al. 2016)"

This can include:

- Maltreatment (e.g., abuse and neglect)
- Exposure to violence
- Negative familial or socio-ecological circumstances (e.g., parental separation or loss, poverty, racism)



Childhood Adversity & Youth in Residential Programs



Youth in residential programs have high rates of traumatic experiences that include abuse and neglect.

It is estimated that up to two-thirds of youth have experienced at least one-type of maltreatment and they are more prone to CA than their peers.

(Briggs et al., 2012; Pane et al., 2015).



Childhood Adversity & Youth in Residential Programs

	<u>Total</u>	<u>Girls</u>	<u>Boys</u>	<u>a</u>
Poor Parental Anger	61%	66%	59%	*
Physical Abuse	28%	35%	25%	**
Sexual Abuse	18%	38%	8%	***
Neglect	58%	64%	55%	***
Parent Partner Violence	24%	27%	22%	>.05
Parental Marital Discord	58%	60%	57%	>.05
Mental Illness in Family	35%	45%	31%	***
Substance Abuse in Family	59%	62%	57%	>.05
Criminal Parent	39%	46%	36%	***
p<.05, ** p<.01, ***p<.001				

(Tyler, Patwardhan et al., 2019)



Childhood Adversity & Youth in Residential Programs

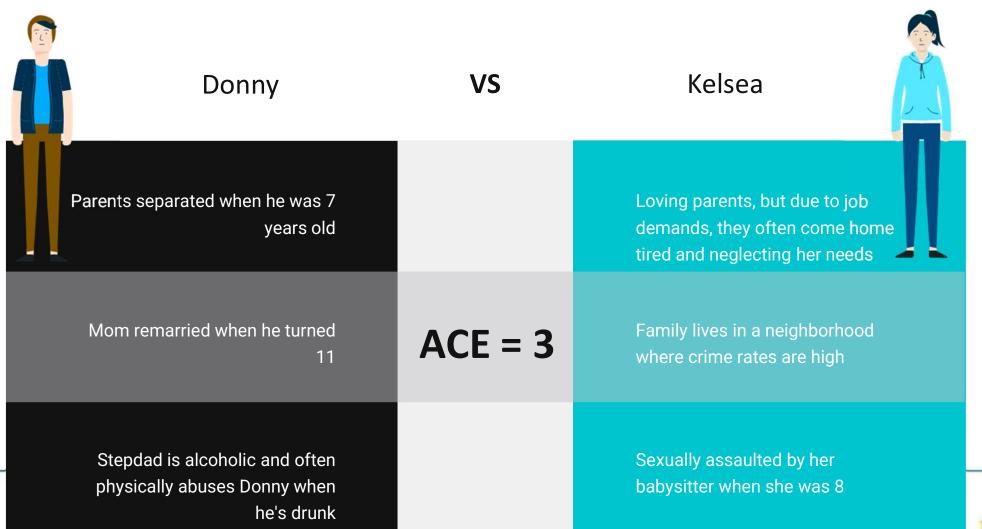
The traumatic stress that often results from CA is related to other psychiatric conditions and self-injurious behavior (Harr et al., 2013).

There is evidence of a dose-response between CA and functioning, and exposure to CA can hamper the effectiveness of the mental health services youth receive (Boyer, 2009).



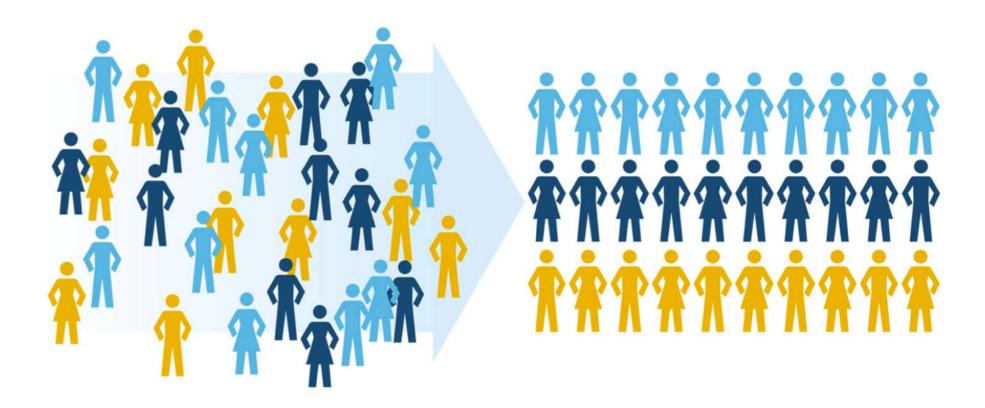
How Childhood Adversity is Studied

The cumulative risk method is a common approach, but it has some disadvantages





Latent Class Analysis offers a more person-centered approach



LCA = A measurement model that classifies individuals into types, or latent classes, based on their response pattern on a set of variables (e.g., ACEs items)



Profiles of Childhood Adversity and Associated Psychopathology in Youth Entering Residential Care

Gordon, Nguyen, Mitchell, & Tyler (2022)

Youth at intake...

Latent Class Analysis identified 5 profiles of childhood adversity from ACEs:

- 35% Low Exposure
- 25% Family Dysfunction (e.g., alcoholism/substance use, parental discord)
- 15% Neglect/Emotional Abuse
- 16% High Exposure without Sexual Abuse
- 10% High Exposure with Sexual Abuse

Odds based on sex:

• Girls were 2 times more likely for neglect and 8.6 times more likely for High Exposure with Sexual Abuse



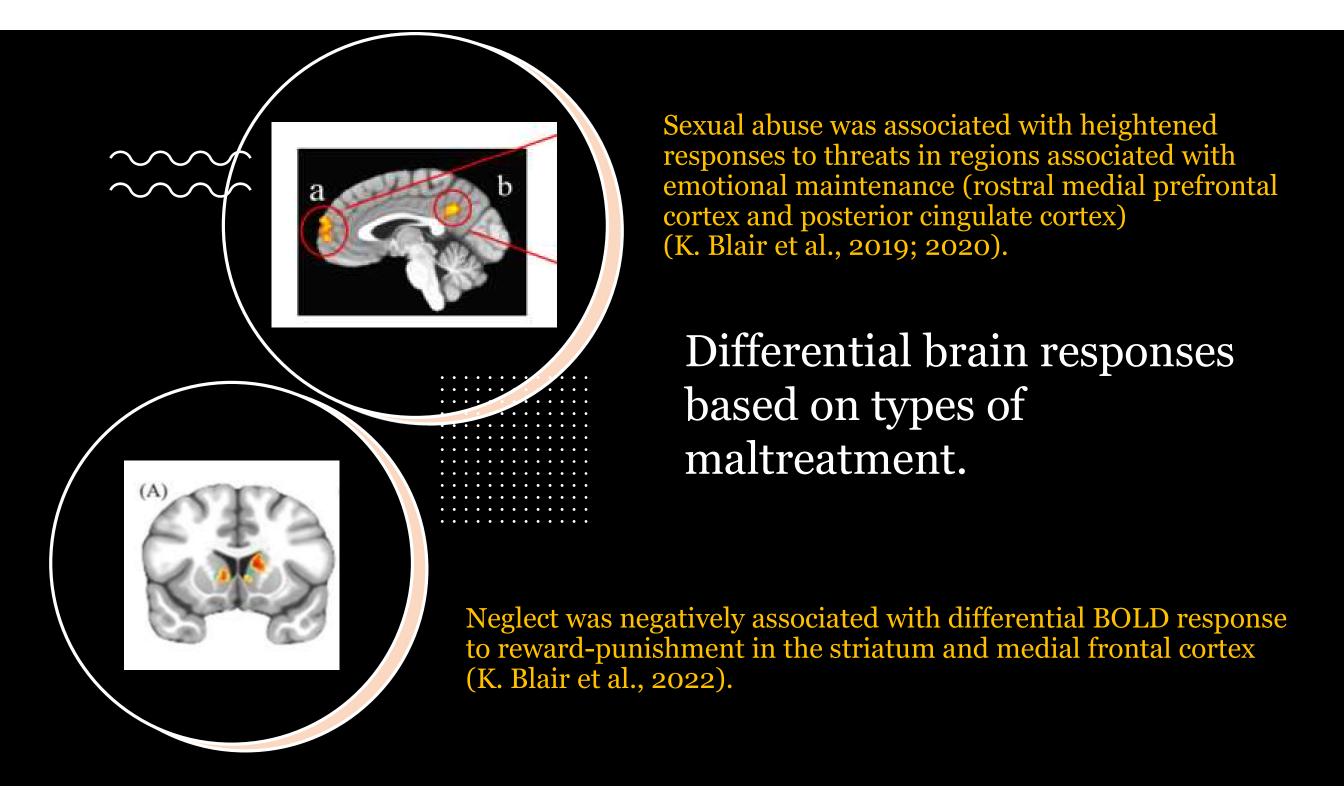
Profiles of Childhood Adversity and Associated Psychopathology in Youth Entering Residential Care

Gordon, Nguyen, Mitchell, & Tyler (2022) Youth at intake...

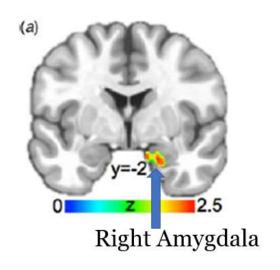
Associations with Clinical Functioning Compared to Low Exposure

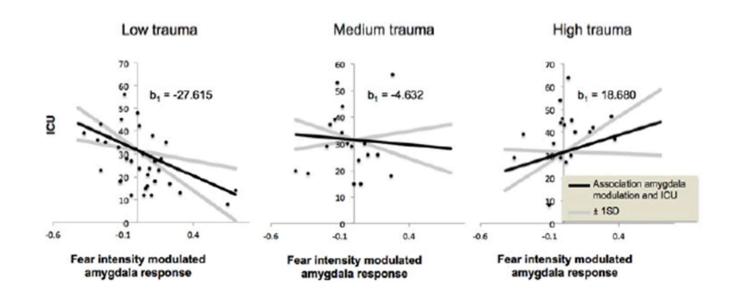
- Family Dysfunction was more associated with increased hyperactivity/inattention problems (*p* < .05).
- Neglect was more associated with increased hyperactivity/inattention (p < .01), increased conduct problems (p < .01), and less prosocial behaviors (p < .01).
- High Exposure with Sexual Abuse were more associated with trauma symptoms (p < .001) and emotional problems (p < .05).
- No significant difference for High Exposure without Sexual Abuse.





Maltreatment & Callous Unemotional Traits (Meffert et al., 2018)





Low Trauma/High CU Traits decreased amygdala response.

High Trauma/High CU Traits
Increased amygdala response



Racial/Ethnic Differences in Childhood Adversity in Youth Entering Residential Care

Gordon, Nguyen, Stephenson, & Tyler (in preparation) Black Youth at intake...

Five Patterns of Childhood Adversity from ACEs Identified in Black Youth

- 33% Low Exposure
- 31% Family Dysfunction
- 9% Familial Dysfunction with Sexual Abuse
- 14% High Exposure
- 14% Maltreatment

Associations with Clinical Functioning

Compared to the Low Exposure group:

- Familial Dys with Sexual Abuse was associated with higher trauma symptoms (p < .01)
- All exposure groups were associated with higher emotional (ps < .05) and conduct problems (ps < .01).
- Familial Dys with Sexual Abuse, High Exposure, and Maltreatment were associated with higher peer (ps < .05) and prosocial problems (ps < .05).



Racial/Ethnic Differences in Childhood Adversity in Youth Entering Residential Care

Gordon, Nguyen, Stephenson, & Tyler (in preparation) Hispanic Youth at intake...

<u>Four</u> Patterns of Childhood Adversity From ACEs Identified in Hispanic Youth

- 42% Low Exposure
- 25% Familial Dysfunction
- 17% Maltreatment
- 16% High Risk

Associations with Clinical Functioning

Compared to the Low Exposure group:

- Maltreatment and High Risk were associated with higher trauma (ps < .05) symptoms and emotional problems (ps < .05).
- Maltreatment was associated with higher conduct (p < .05), hyperactivity/inattention (p < .05), and prosocial problems (p < .01).



Racial/Ethnic Differences in Childhood Adversity in Youth Entering Residential Care

Main takeaways for Black and Hispanic Youth at intake...

- CA Patterns appear to be different for Black and Hispanic youth.
- The associations between these patterns and clinical functioning are also differ depending on a youth's racial/ethnic identity.

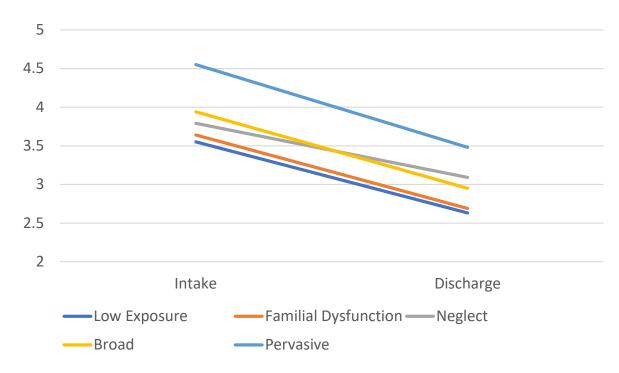
Gordon, Nguyen, Stephenson, & Tyler (in preparation)



The Moderating **Roles of** Childhood **Adversity on Program Outcomes in Residential Care** in a Diverse Sample

Tampke, Gordon, Ringle, Nguyen, Ende, & Tyler (in review) Youth during care...

No differences in emotional problems were found for CA patterns across intake to discharge. Everyone experienced parallel decreases.



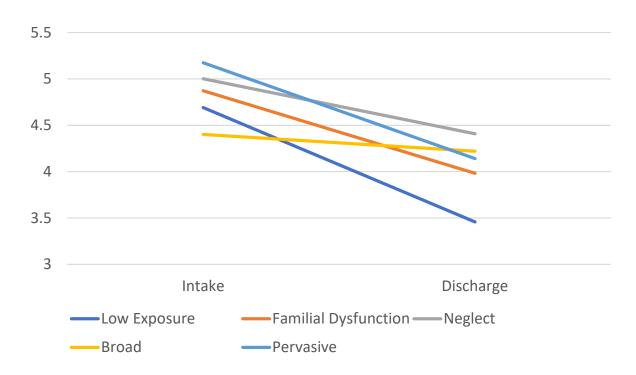
Note: there were slight changes in the CA patterns due to small size in this follow-up study



The Moderating **Roles of** Childhood **Adversity on Program Outcomes in Residential Care** in a Diverse Sample

Tampke, Gordon, Ringle, Nguyen, Ende, & Tyler (in review) Youth during care...

Differences in conduct problems for CA patterns from intake to discharge



Note: there were slight changes in the CA patterns due to small size in this follow-up study



The Moderating Roles of Childhood Adversity on Program **Outcomes in Residential Care** in a Diverse Sample

Tampke, Gordon, Ringle, Nguyen, Ende, & Tyler (in review) Youth during care...

Change in Lethality Behaviors Across First 12 Months

• Compared to low exposure youth, youth with the <u>neglect</u> CA pattern (p < .01) and youth with the <u>pervasive</u> CA pattern (p < .01) engage in more lethality behavior

Change in Aggressive Behaviors Across First 12 Months

• Compared to low exposure youth, youth with the <u>neglect</u> CA pattern (p < .01) and youth with the <u>broad</u> CA pattern (p < .05) engage in more aggressive behavior

This suggests that those with a neglect CA Pattern may be particularly vulnerable. Research indicates that additional behavioral intervention and support focused on improving prosocial behavior may be beneficial for these youth (McLaughlin & Lambert, 2017)



Elements of Trauma-Informed Care



Create safe & nurturing environments.

Screen & assess for trauma exposure & symptoms.

• Teach & reinforce prosocial skills increase protective factors and reduce risk factors.

Empower youth & families & promote self-efficacy.

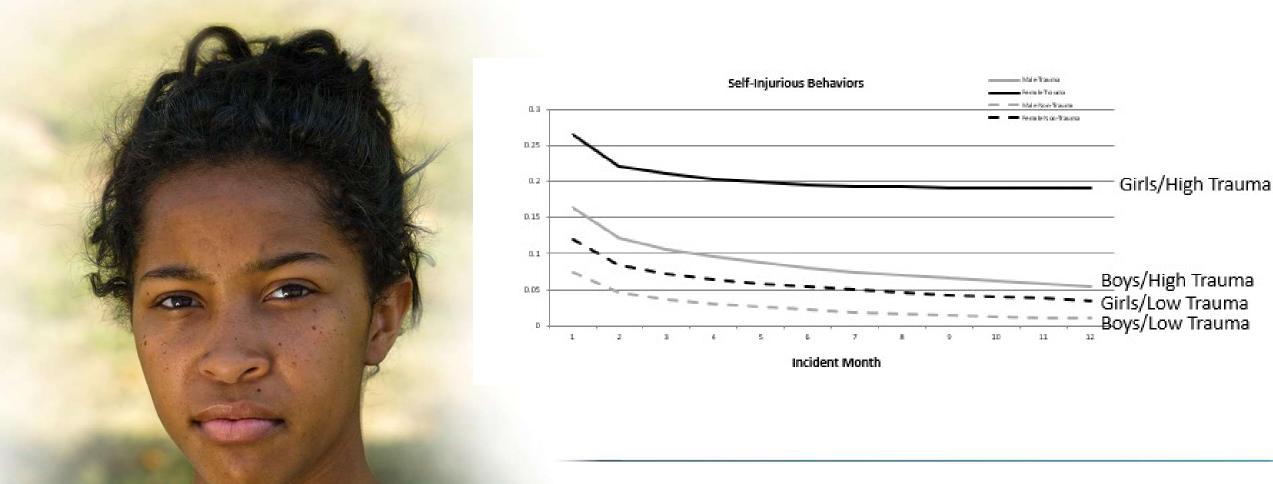
(Branson et al., 2017; U.S. DHHS, 2014; Ford et al., 2008; Tyler et al., 2019, 2021)





Youth Needs and Response to Trauma-Informed Group Homes (Tyler, Patwardhan et al., 2019)

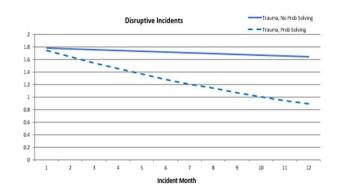
N = 1096

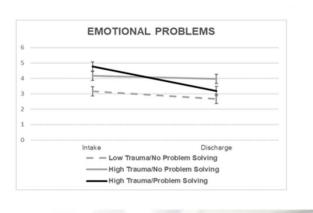




Teaching Prosocial Skills

Problem-Solving (Tyler et al., 2021)



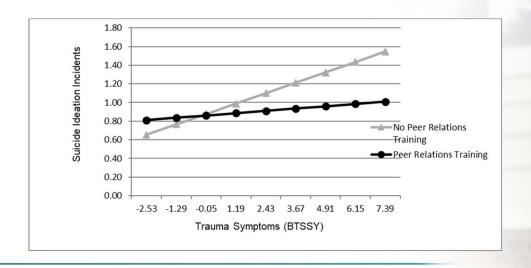


BOYS TOWN

ATHLETICS

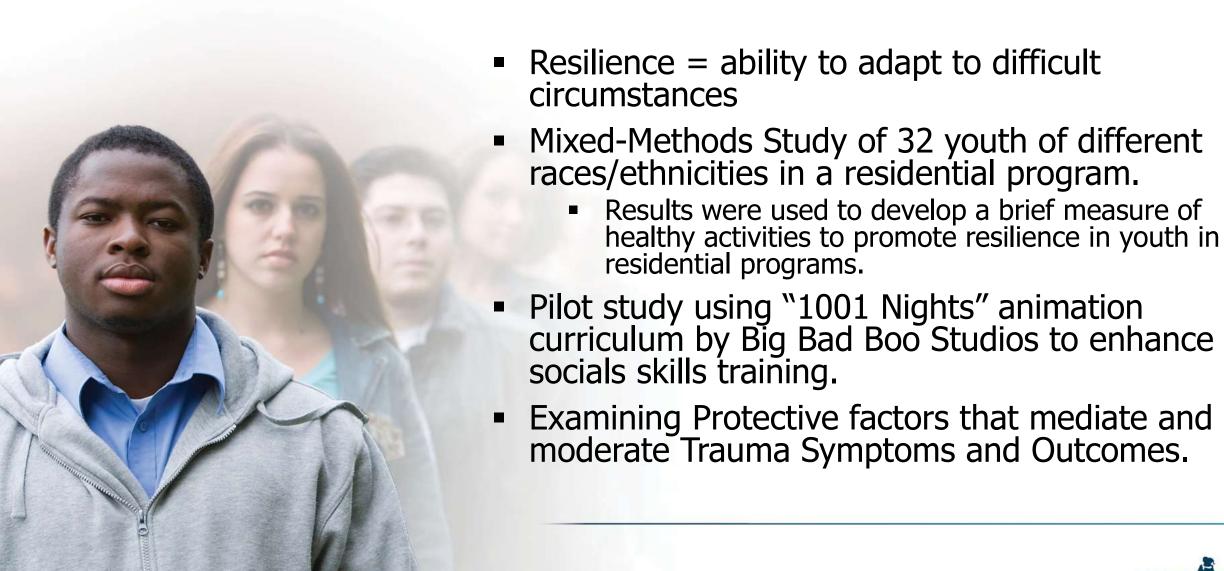
H

Peer Relations (Tyler et al., 2022)





Current Studies on Resilience & Protective Factors





Summary

- Different CA patterns are associated with distinct clinical functioning at intake and during residential care in youth.
- CA patterns and their associations can differ for minority youth.
- The distinctions we found emphasize the importance of screening for CA exposure at intake to a residential program and considering a youth's pattern of CA exposure in the development of their treatment plan.
- Trauma-informed care that emphasizes the development of prosocial skills and self-efficacy in youth may help reduce the links between CA and poor clinical functioning.



Discussion and Questions



References

Blair, K., Aloi, J. Crum, K., Meffert, H., White, S., Tyler, P.,...Blair, R. J. (2019). Associations of different types of childhood maltreatment with emotional responding and response control among youth. *JAMA Network Open*, *2*(5), 1-15. doi:10.1001/jamanetworkopen.2019.4604

Blair, K., Aloi, J., Bashford-Largo, J., Zhang, R., Elowsky, J.,..., & Blair, R. J. (2022). Different forms of childhood maltreatment have different impacts on the neural systems involved in the representation of reinforcement value.

Developmental Cognitive Neuroscience, 53. doi.org/10/1016/j.dcn.2021.101051.

Blair, K., Bashford-Largo, Shah, N., Lukoff, J., Elowsky, J., ...R. J. Blair. (2020). Sexual abuse in adolescents is associated with atypically increased responsiveness within regions implicated in self-referential and emotional processing to approaching animate threats. *Frontiers in Psychiatry*. doi.: 10.3389/fpsyt.2020.00345.

Boyer, S. N., Hallion, L. S., Hammell, C. L., & Button, S. (2009). Trauma as a predictive indicator of clinical outcome in residential treatment.

Residential Treatment for Children and Youth, 26, 92-104.

Branson CE, Baetz CL, Horwitz SM, Hoagwood KE. Trauma-informed juvenile justice systems: A systematic review of definitions and core components. Psychol Trauma. 2017 Nov;9(6):635-646. doi: 10.1037/tra0000255. Epub 2017 Feb 6. PMID: 28165266; PMCID: PMC5664165 Briggs, E. C., Greeson, J. K., Layne, C. M., Fairbank, J. A., Knoverek, A. M., & Pynoos, R. S. (2012).
Trauma exposure, psychosocial functioning, and treatment needs of youth in residential care:
Preliminary findings from the NCTSN Core Data
Set. Journal of Child & Adolescent Trauma, 5(1), 1-15.

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*, 14(4), 245-258.

Ford, J. D., Chapman, J. F., Hawke, J., & Albert, D. (2007). *Trauma among youth in the juvenile justice system: Critical issues and new directions*. National Center for Mental Health and Juvenile Justice.

Retrieved from https://www.courts.ca.gov/documents/BTB25-1G-02.pdf

Gordon, C., Nguyen, P., Mitchell, A. & Tyler, P. (2022). Profiles of childhood adversity and associated psychopathology in youth receiving residential care. Psychological Trauma: Theory, Research, Practice, and Policy. Advanced online publication.

McLaughlin, K. A., & Sheridan, M. A. (2016). Beyond cumulative risk: A dimensional approach to childhood adversity. *Current Directions in Psychological Science*, 25(4), 239-245.

Meffert, H., Thornton, L., Tyler, P., Botkin, M., Erway, A., Kolli, V., . . . Blair, R. (2018). Moderation of prior exposure to trauma on the inverse relationship between callous-unemotional traits and amygdala responses to fearful expressions: An exploratory study. Psychological Medicine, 48(15), 2541-2549. doi:10.1017/S0033291718000156

Pane, H. T., Farmer, E. M., Wagner, H. R., Maultsy, L. T., & Burns, B. J. (2015). Patterns of maltreatment and diagnosis across levels of care in group homes. *Child Abuse & Neglect, 42*, 72-83.



References

Tyler, P. M., Aitken, A. A., Ringle, J. L., Stephenson, J. M., & Mason, W. A. (2021). Evaluating life skill training for youth with trauma symptoms in group homes. Psychological Trauma: Theory, Research, Practice & Policy, 13(1), 104-113. doi: 10.1037/tra0000589

Tyler, P. M., Patwardhan, I., Ringle, J. L., Chmelka, M. B., & Mason, W. A. (2019). Youth needs at intake into trauma-informed group homes and response to services: An examination of trauma exposure, symptoms, and clinical impression. American Journal of Community Psychology, 64, 321-332. doi:10.1002/ajcp.12364

Tyler, P. M., Mason, W.A., Chmelka, M.B., Patwardhan, I., Dobbertin, M., Pope, K., Shah, Niraj, Abdel-Rahim, H., Johnson, K., & Blair, R.J.R. (2019). Psychometrics of a Brief Trauma Symptom Screen for Youth in Residential Care. Journal of Traumatic Stress., 32, 753-763. doi:10.1002/jts.22442

Tyler, P. M., Hillman, D. S., Ringle, J. L. (2022). Peer relations training moderates trauma symptoms and suicide ideation for youth in a residential program. Journal of Child and Family Studies, 31:447-458. doi: 10.1007/s10826-021-02193-x

Tyler, P. M., Thompson, R. W., Trout, A. L., Lambert, M. C., & Synhorst, L. L. (2017). Important elements of aftercare services for youth departing group homes. Journal of Child and Family Studies, 26(6), 1603-1613. doi:10.1007/s10826-017-0673-0

U.S. Department of Health and Human Services. (2014). Trauma-informed care in behavioral health services. (SMA Publication No. 14-4816). Retrieved from https://store.samsha.gov/shin/content//SMA14-4816.pdf

