Trauma Sensitivity Training to Improve Mental Health Outcomes of Children in Foster Care in Los Angeles County, California Taylor Trapp, BSPH (c) Kenon Williams, BSPH (c) Nicholas Fleming BSPH (c)



Background

- 40-80% of children in foster care suffer from psychiatric disorders.¹
- Disorders include depressive episodes, anxiety disorder, and drug & alcohol dependence, experienced disproportionately.¹
- Due to systemic racism and homophobia, children of color and those within the LGBT+ community are overly represented in foster care.

Problem Statement

Poor mental health outcomes among children in the California foster care system, indicated by 40% prevalence of mental health issues,² and are exacerbated by mental health care that is provided after a crisis has already happened.

Goals and Objectives

Goal 1: Improve identification of traumatic events by Social Workers

- Objective: Increase the number of Adverse Childhood Experiences (ACEs) and other traumatic events recorded by social workers by 20%

Goal 2: Improve sensitivity of caregiving adults to childhood trauma

- Objective: Increase referrals by social workers to mental health professionals by 5%

Inputs

Funding

Trauma sensitiv training curricu

Computers for Implicit Association Tes

Access to PEAR screener & resources

> 1. McCann, M. (2019, November 1). Mental health and foster care. Retrieved September 19, 2022, from https://www.ncsl.org/research/human-services/mental-health-and-foster-care.aspx

3. Obzerova, A. (2019) Father and toddler daughter in therapist office during counselling assessment meeting [.jpg]. iStock Photo 4. Cases, C. (n.d.). No More Trash Bags for 30,000 Kids in Foster Care. photograph.

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Logic Model

	Outputs			Impacts &
	Activities	Output of activities	Short-term	Intermediate term
ivity ula sts RLS	Trauma Sensitivity training for prospective foster parents Participant Implicit association evaluation Anti-racism & LGBTQ discrimination Training PEARLS Training PEARLS Resource Pack	PEARLS implementation. Increased Trauma Sensitivity Decreased implicit bias	More ACEs recorded by Social Workers Decrease in housing instability Increased parental support	More referrals mental healthca Short term spike mental health disorder diagnos Increase in men healthcare utilization

References

2. Vasileva, M., & Petermann, F. (2016). Attachment, development, and mental health in abused and neglected preschool children in Foster Care: A meta-analysis. Trauma, Violence, & Abuse, 19(4), 443–458. https://doi.org/10.1177/1524838016669503

Acknowledgements

& Outcomes

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Long-term

Less mental health crises

Improved mental health outcomes

Increase trauma sensitivity & understanding

Decrease disparity in mental health outcomes associated with bias

Decrease in race, gender and/or sexuality bias

Phase 1: Preparation

• Design trainings to include all participants input. Include Pediatric ACEs and Related Life Events Screener (PEARLS) for teaching and integrating into workflow.

Phase 2: Implementation

Conduct trainings & collect data

Module 1: General trauma sensitivity training

Module 2: Racial & gender bias training focuses

Module 3: Training for PEARLS screeners *

• Data integrated to broaden understanding of lessons learned

*(Social Workers only)

- care
- gender issues
- trauma.



•Manuscripts will be published describing the training curricula as well as study outcomes •Trainings can be implemented by Department of Child Welfare Services across California counties Toolkit will be developed for Foster Parents

Program Description

Phase 3: Data collection and Analysis

Expected Outcomes

• Improve mental health of children in foster

• Increase sensitivity of caretakers to racial &

• Implement PEARLS screener by social worker

• Caregiving adults will have a better

understanding of the child's life through their

Dissemination