Overview of Trauma-Informed Screening and Assessment within Child Welfare Settings

Cassandra Kisiel, Ph.D.
Northwestern University-Feinberg School of Medicine

Jim Henry, Ph.D.
Southwest Michigan Children’s Trauma Center

Lisa Conradi, Psy.D.
Chadwick Center for Children and Families

Learning Objectives

- Overview the prevalence and impact of trauma within child welfare settings.
- Define trauma-informed screening and assessment practices for child welfare.
- Describe rationale and benefits of conducting effective trauma-informed screening and assessments
- Identify lessons learned and strategies for application of screening and assessment within child welfare settings.

Prevalence of Trauma—United States

- In 2009, child protective services (CPS) departments across the country received 3.3 million referrals involving the alleged maltreatment of 6 million children.


U.S. Prevalence, cont’d

- One in four children/adolescents experience at least one potentially traumatic event before the age of 16.1
- In a 1995 study, 41% of middle school students in urban school systems reported witnessing a stabbing or shooting in the previous year.2
- Four out of 10 U.S. children report witnessing violence; 8% report a lifetime prevalence of sexual assault, and 17% report having been physically assaulted.3
- The majority of traumatized children experience multiple, co-occurring, and often chronic forms of trauma or adverse experiences.1
- High prevalence rates of chronic, and multiple interpersonal traumas were observed within an NCTSN sample of youth in foster care.4


Impact of Trauma in the Child Welfare Population

- A national study of adult “foster care alumni” found higher rates of PTSD (21%) compared with the general population (4.5%). This was higher than rates of PTSD in American war veterans.1
- In an Illinois study of youth entering CW, the number of clinically significant posttraumatic stress symptoms and broader MH symptoms increased as the number of trauma experiences increased.2


Frequency of Traumatic Experiences for Children & Adolescents in Foster Care in an NCTSN Sample (N=2,251)

Greeson et al., 2011
Impact of Trauma in Child Welfare Population, cont’d

- A study of children in foster care revealed that PTSD was diagnosed in 60% of sexually abused children; in 42% of the physically abused children; and in 18% of foster children who did not have either type of abuse (but possibly exposure to domestic or community violence).  

- In study of complex trauma in youth in foster care referred for treatment through the NCTSN, youth with multiple interpersonal traumas had significantly higher rates of posttraumatic stress, internalizing problems, and clinical diagnoses.  


Frequency of Significant Traumatic Experiences on Entry into Illinois Child Welfare (N= 4,272)

- Some children carry multiple diagnoses and/or are misdiagnosed, potentially resulting in:
  - Some combination of diagnoses that fail to acknowledge of role of trauma (e.g., Bipolar, ADHD)
  - Treatment plans and interventions that may not be matched to underlying trauma-related needs (e.g., unnecessary psychopharmacological interventions)
  - Foster parents and others with an inappropriate understanding and expectations of the child
  - Poor treatment outcomes

Assessing and Treating Children in Child Welfare

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Trauma-Informed Screening and Assessment

- Screening?
- Assessment?
- Psychological Evaluation?

These terms are often used interchangeably, but what are they? When it is appropriate to use one vs. the other?
Definitions of Trauma-Informed Screening and Assessment

- **Trauma-informed screening** refers to a brief, focused inquiry to determine whether an individual has experienced specific traumatic events or reactions to trauma.

- **Trauma assessment** is a more in-depth exploration of the nature and severity of the traumatic events, the impact of those events, current trauma-related symptoms and functional impairment.

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Trauma Screening

- Done by front-line workers, such as Child Welfare and, in some cases, mental health.
- Usually includes questions regarding a child’s exposure to trauma and his/her symptoms.
- Designed to be BRIEF and often helps caseworkers and providers determine if a child needs trauma-focused mental health treatment.
- Examples of screening measures:
  - UCLA PTSD Reaction Index
  - Child Welfare Trauma Referral Tool
  - Traumatic Events Screening Inventory

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Trauma Assessment

- Usually done by a mental health provider to drive treatment planning.
- A good trauma assessment usually occurs over at least 2-3 sessions of therapy and includes a clinical interview, use of objective measures, behavioral observations of the child, and collateral contacts with family, caseworkers, etc.
- Domains covered include:
  - Basic demographics
  - Family history
  - Trauma history (comprehensive, including events experienced or witnessed)
  - Developmental history
  - Overview of child problems/symptoms.

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Psychological Evaluation

- Conducted by Psychologists
- Multiple methods of data collection
  - Objective and projective measures
  - Collateral interviews
- **Specific questions - often done for the court**
- Types of evaluations include:
  - Child custody evaluations
  - Competency evaluation
  - Juvenile Justice – Amenability to treatment
  - Risk Assessment
- Unclear standards and practices across the country about when to refer children for psychological evaluations

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Trauma-Informed Screening and Assessment Practices: Rationale and Importance

- **Psychological Evaluation** designed to answer a specific referral question.
- **Trauma Assessment** if a child has a history of trauma and is currently displaying trauma symptoms, referral for a trauma mental health assessment is warranted.
- **Trauma Screening** universally administered to determine a child’s trauma history and related symptoms.
Why Screen for Trauma?

- CW workers are already asking about the child's traumatic exposure and symptoms, although they may not identify them as such.
- Caseworkers that have conducted trauma screenings can identify the types of events or situations that may potentially trigger symptoms for the child. This information can be conveyed to the foster parent and can ultimately help the foster parent manage the difficult behaviors and minimize placement changes.
- Trauma screening plays a critical role in case planning and referral to the appropriate mental health services, if appropriate.

Why is Trauma-Informed Assessment Important?

- Identify high risk clients
- Identify salient symptoms
- Determine if timing of therapy is appropriate
- Help guide treatment goals
- Help therapist select appropriate evidence-based interventions
- Gather information not disclosed during an interview
- Assess changes in symptoms over time
- Support legal system in assessing children's safety and best interests
- Identify systemic needs and strengths
- By tracking improvements, data may support sustainability in funding

How Clients/Families in CW Benefit from Assessment

- Validating need for initial and/or ongoing treatment
- Helping client identify treatment goals
- Helping clients see “they are not alone” – but also highlight areas in which their symptoms are out of the norm
- Help client understand how other people view them (cross-informant data)
- Help clients identify strengths and resources
- Help client see they are making progress

What to Assess: Key Components and Perspectives

Child
- Developmental history
- History of trauma/adverse experiences
- Needs/symptom presentation - including risk behaviors and functional impairment
- Strength and resources/supports
- Perception of trauma and coping mechanisms

Caregiver/Family
- Relationships/allegiances
- Caregiver needs/problem presentation
- Knowledge of child/ability to support and supervise
- Strengths and resources/supports
- Perception of trauma and coping mechanisms

Environment/System
- Levels of system involvement (child welfare, legal)
- Cultural perception or understanding of the trauma
- Deficits or contributions to problems
- Areas of Support

Need for Comprehensive Assessment Strategies for Childhood Trauma

- Thoroughly assess for range of traumas/adverse experiences
- Gather information on multiple dimensions relevant to adaptation from trauma - including but not limited to PTSD
- Gather information on strengths for child, caregiver, and family to utilize in the context of treatment/service planning
- Provide a rational framework for understanding complex needs and strengths associated with child trauma
- Utilize assessment data in clinical decision making, making appropriate diagnoses, and effective treatment and service planning
- Match appropriate type and level of services to child needs/strengths
- Use assessment data to inform systems planning and policy/reform efforts related to child trauma in CW settings

Use of Screening and Assessment Information in Clinical Practice

1. To support caseworkers, therapists and supervisors serving CW clients in understanding and addressing complex reactions to trauma
2. To facilitate enhanced communication and trauma-informed planning between CW and MH providers to address the multiple needs and build strengths
3. To monitor treatment progress and address treatment, services and placement decisions over time
Use of Assessment Data in Systems Planning

- Can be used to ‘make the case’ for using a ‘trauma lens’ in our work within child welfare
- Suggests the importance of conducting a comprehensive assessment including trauma experiences, needs and strengths as a standard part of CW practice
- Highlights the link between trauma experiences and a range of emotional/behavioral issues that may otherwise be targeted in isolation

Commonly used Trauma-Informed Screening and Assessment Strategies within Child Welfare

- Trauma Screening Checklist – A brief screening checklist designed to assess for trauma experiences and reactions to trauma in children across different age groups.
- Child Welfare Trauma Referral Tool – A screening/assessment tool designed to help child welfare workers make more trauma-informed decisions about the need for referral to trauma-specific and general mental health services.
- Child and Adolescent Needs and Strengths (CANS) - Trauma Version – A comprehensive, trauma-focused and strengths-based assessment strategy; it is also an information integration and treatment/service planning tool.

Use of Screening and Assessment in Child Welfare:
Practice Applications and Lessons Learned

Summary of Existing Challenges: Use of Assessment Information in Practice

- Not enough time/sufficient resources to gather comprehensive assessment information
- Competing needs of families versus completion of assessment
- Difficult to capture information across various areas of need as well as strengths with time/resource limitations
- Assessment-based needs identified for the treatment versus family-identified needs for treatment
- Often a disconnect between “research” tools and how to translate these into a meaningful way into clinical practice
- Not always clear how assessment data can be useful to all roles at an agency (e.g., administrators, supervisors, clinicians, etc.) which may limit “buy in” to the assessment process.
- Training of professionals on use of assessment information both within and outside the trauma/mental health field

What have we learned?
Highlights from the NCTSN Child Welfare BSC

- CW agencies recognize the importance of conducting a trauma screening, but struggle to find the right kind of screening to use
- Trauma screening should be comprehensive enough to gather the information, but not too taxing on time.
- More training needs to be conducted on trauma and how to screen, no matter the type of tool that is used.
- Training should include management of vicarious trauma issues that may emerge.
- Clarification of the roles regarding screening and assessment needs to occur.
- Critical that screening information is passed to the mental health provider to facilitate common dialogue between child welfare and mental health.

Prior to Embedding a Screening or Assessment Process

- Provide broad training on child traumatic stress
  - Offer training on different trauma types (sexual abuse, physical abuse, exposure to domestic violence, emotional abuse, etc.) and various traumatic stress reactions that children may exhibit
  - Identify and utilize existing to assist child welfare systems in training on these topics, including the Child Welfare Trauma Training Toolkit.
- Establish a relationship with your mental health partners
  - Work with them to build their capacity to provide trauma-focused mental health treatment when appropriate.
- Establish processes to prevent and address secondary traumatic stress
  - There are a number of existing resources to help systems integrate addressing STS into their policies and practices, including The Resilience Alliance.
General Recommendations for Trauma Screening and Assessment Practices

- Embed trauma screening practices into the already existing system in a more formalized manner.
- Always ask questions of the mental health provider regarding their ability to conduct a trauma assessment and offer trauma-focused services.
- Gather information on mental health symptoms as well as strengths to best inform treatment/service planning and delivery.
- If, after a comprehensive assessment process, it is determined that a child does not currently display symptoms related to their traumas, he or she may not need to be referred for trauma-focused treatment.
- Assess the functioning of the caregiving system in order to determine the needs of parents and caregivers and their capacity to support the child in his or her recovery from trauma.

Upcoming Presentations for Screening and Assessment Webinar Series

- Trauma Screening and Assessment Measures for Child Welfare
  Lisa Conradi, James Henry, Cassandra Kisiel - May 17, 2012

- The Application of Trauma Screening/Assessment in Child Welfare Settings Part I: Systems-Level Applications
  Jason Lang, Marilyn Cloud - July 26, 2012

- The Application of Trauma Screening/Assessment in Child Welfare Settings Part II: Direct Service Level Application
  George (Tripp)Ake, Beth Barto, Mary K. Jankowski - August 16, 2012

- Parent Screening Measures
  Claude Chernobib, Erika Tulberg - September 27, 2012

Resources

- California Evidence-Based Clearinghouse for Child Welfare = www.cebc4cw.org
- TAP Online Training = www.taptraining.net
- CANS Resources and Training Information = www.praedfoundation.org
- National Child Traumatic Stress Network = www.nctsn.org
- NCTSN Measure Review Database = http://www.nctsn.org/resources/online-research/measures-review