

Culture and Trauma Brief

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NCTSN Resources on Culture and Trauma

The Culture and Trauma Briefs series serves to support the NCTSN commitment to raising the standard of care for traumatized children, their families, and their communities by highlighting the diversity of needs and experiences of those children, families, and communities.

By its very nature, the National Child Traumatic Stress Network is committed to serving children whose needs are often overlooked. For too long, children who have survived trauma—from community violence, abuse, invasive medical procedures, or some other source—have not received the attention from child mental health services that their experiences demand. The NCTSN works to remedy that oversight by developing and delivering evidence-based interventions for traumatized children and their families.

While addressing the needs of these children, the Network recognizes that needs vary across communities. A broad understanding of culture leads us to realize that ethnicity, gender identity and expression, spirituality, race, immigration status, and a host of other factors affect not just the experience of trauma but help-seeking behavior, treatment, and recovery. With this in mind, the NCTSN has developed resources that address the issue of culture and child traumatic stress

NCTSN Culture and Trauma Briefs

Promoting Culturally Competent Trauma-Informed Practices

<http://www.nctsnet.org/nccts/asset.do?id=817>

Trauma among Lesbian, Gay, Bisexual, Transgender, and/or Questioning Youth

<http://www.nctsnet.org/nccts/asset.do?id=885>

Translation of English Materials to Spanish

<http://www.nctsnet.org/nccts/asset.do?id=909>

Each issue of the **NCTSN Culture and Trauma Briefs** series is an up-to-date consideration of an aspect of culture and trauma, written by clinicians, administrators, and researchers in the field. The *Briefs* aim to fill a void in the psychology literature by taking a trauma-informed look at race, ethnicity, spirituality, gender identification and expression, and other aspects of culture. The series also serves to support the NCTSN commitment to raising the standard of care for traumatized children, their families, and their communities by highlighting the diversity of needs and experiences of those children, families, and communities.

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NCTSN Culture and Trauma Fact Sheets and Reports

Facts on Trauma and Deaf Children

http://www.nctsn.org/nctsn_assets/pdfs/edu_materials/FactsonTraumaandDeafChildren.pdf

Addressing the Trauma Treatment Needs of Children Who Are Deaf or Hard of Hearing and the Hearing Children of Deaf Parents

http://www.nctsn.org/nctsn_assets/pdfs/edu_materials/Trauma_Deaf_Hard-of-Hearing_Children.pdf

While consideration of clients' race, ethnicity, and, increasingly, sexuality are foregrounded in discussions of culture and trauma, too often the needs of deaf and hard of hearing people and the hearing children of deaf parents are overlooked. These two publications from the National Child Traumatic Stress Network address that imbalance.

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Facts on Trauma and Deaf Children is the shorter of the two publications. It defines terms, cites statistics on the prevalence of trauma among the deaf, and makes suggestions to clinicians on adapting treatments for this population. The work closes with a discussion of policy issues—such as funding, developing, and researching interventions and creating community partnerships—that may improve trauma-related services for the deaf.

Building on the earlier, briefer work, *Addressing the Trauma Treatment Needs of Children Who are Deaf or Hard of Hearing and the Hearing Children of Deaf Parents* provides a wealth of information on these populations. It opens with a consideration of the many varieties of Deaf culture, whose nuances are often unknown by the population at large but that impact deaf people's experience of the world in general and of trauma in particular.

The second half of the publication is devoted to trauma among deaf children and hearing children of deaf parents—its prevalence and impact, and what therapists need to know to assess and treat survivors. The report considers how providers can help their clients access services beyond therapy that may assist them in recovery, and describes the use of a cultural consultation model of providing care.

Facts on Trauma and Homeless Children

http://www.nctsn.org/nctsn_assets/pdfs/promising_practices/Facts_on_Trauma_and_Homeless_Children.pdf

Often portrayed in the media as a problem limited to single men, many with psychiatric or substance abuse problems, homelessness is a phenomenon that affects families as well. Fully 40 percent of the homeless population is made up of families, typically single-mother families with preschool children. Homelessness is often both the result of traumatic events—such as domestic violence or residential fires—and a risk factor for trauma. People in families that are homeless are at increased risk of physical and sexual abuse, witnessing violence, and facing abrupt separation. What's more, the instability that homeless families face makes recovery from past trauma difficult.

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This publication describes the many challenges that homeless families face and offers suggestions for shelter administrators and staff to provide trauma-informed services to them. Such concrete measures as involving residents in the running of shelter activities, establishing clear and consistent boundaries, and avoiding provocation and undue assertions of power are some of the steps that shelter staff can take. Shelters can also work with other community agencies and advocates to provide information about the impact of trauma on children and families, and speed access to services and support.

Facts on Traumatic Stress and Children with Developmental Disabilities

http://www.nctsn.org/nctsn_assets/pdfs/reports/traumatic_stress_developmental_disabilities_final.pdf

Researchers estimate that about 1.8 percent of the U.S. population has a developmental disability and that anywhere from 1 in 250 to 1 in 1,000 is autistic. Research also suggests that the developmentally disabled are at higher risk for abuse, neglect, and crime than the general population. Abuse suffered by this population is less likely to be reported and investigated, and the disabled have more trouble accessing services.

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This publication reviews the literature on trauma and abuse in the developmentally disabled. It points to factors—such as trust in authority figures, isolation, and impaired ability to communicate—that may make them more vulnerable to trauma and less able to disclose these experiences to others. Finally, it offers suggestions for assessment and adapted treatment for developmentally disabled survivors of trauma.

Review of Child and Adolescent Refugee Mental Health

<http://www.nctsn.org/nccts/asset.do?id=380>

Mental Health Interventions for Refugee Children in Resettlement: White Paper II

<http://www.nctsn.org/nccts/asset.do?id=657>

The NCTSN Refugee Trauma Task force has produced two white papers on the mental health of child refugees. The first, *Review of Child and Adolescent Refugee Mental Health*, reviews the literature on this population, describing the stressors refugee children face both before and after leaving their home countries, and the coping strategies they utilize to deal with them. Interventions for refugee children—individual, family, and school-based—are discussed, and the authors make recommendations for working with, treating, studying, and acting on behalf of refugee populations in the United States.

The second white paper, *Mental Health Interventions for Refugee Children in Resettlement*, advocates for the importance of “practice-based evidence” in providing services to traumatized refugee children and their families. Noting that there is not a strong evidence base on which to make recommendations for treatment, the paper argues that practitioners and researchers should focus instead on studying “real world” services, documenting services that are currently provided, and studying outcomes for the clients they serve. This white paper examines a number of existing programs, describing their key elements, including provision of comprehensive mental health services, moving beyond a clinic-based model, strengthening access and engagement, and providing culturally competent care.

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Summary

This brief was prepared by Cybele Merrick, National Center for Child Traumatic Stress.

Since its inception, the National Child Traumatic Stress Network has been committed to culturally competent, evidence-based care for traumatized children, their families, and communities. The white papers, fact sheets, briefs, and reports the Network has produced demonstrate that commitment. Coupled with the Network's ongoing outreach to community partners and child-serving systems, this care can become a reality for all our nation's children whose lives have been touched by trauma.