

Trauma-Informed Care in Early Childhood System: A Systematic Review

Heather Cook, Emily Holm Tobin, Cinthia Palomino, Min Hwangbo, & Gail E. Joseph



Abstract

Research has shown a detrimental impact of trauma exposure on children’s development and overall mental and physical well-being. With the introduction of the newly enacted Family First Prevention Services Act, it is imperative to develop statewide guidance on how to implement TIC programs for children and families.

Based on the literature review, we state the following questions:

- What is the working definition of Trauma-Informed Care (TIC)?
- What are the evidence-based models for TIC in early learning settings?
- What are the funding sources of these evidence-based models for TIC?
- Based on these results, how can we implement these models in a cost-effective and sustainable manner?

The resources reviewed in this proposal were focused on children birth to five in various care settings including center-based care, home-based care, and school-based programs. This includes the evaluations of evidence-based models implemented in early childhood settings as well as statewide and community level interventions.

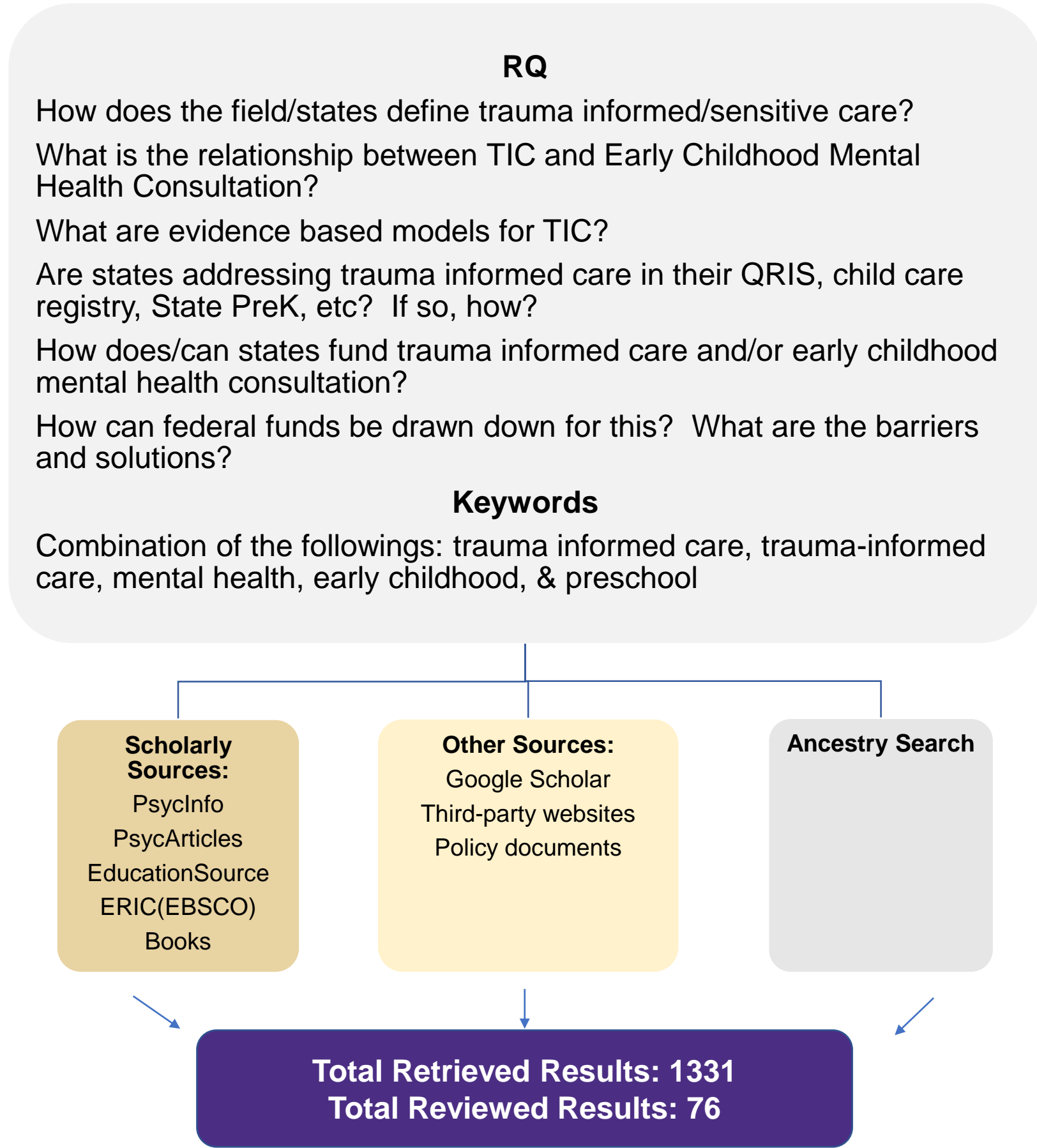
In most cases, TIC was considered as a community-based approach to support all actors of the targeted system including children, families, and providers.

The majority of the community-wide TIC initiatives have focused on the child welfare system. In combination with TIC evidence-based interventions, several models have yielded positive outcomes on children’s mental health. States secured funding from federal agencies including ACF and SAMHSA through formula and discretionary funding, yet most states seek additional funding to continue services.

Trauma-Informed Care in the Early Childhood Education

We define trauma-informed care (TIC) in the Early Childhood Education (ECE) system as an iterative and comprehensive approach that begins with trauma risk awareness and prevention. It is based on the understanding that trauma is pervasive, in which all parties (including children, care providers, family members, and social services) engage in care with the goal of supporting and empowering the affected or at-risk child while recognizing potential for and actively seeking to prevent trauma.

Literature Review Process



Findings

- Based on the literature review, most TIC early childhood initiatives have used **two or more evidence-based models** and in specific communities or cities. Very few of these interventions have been implemented as a statewide initiative in early childhood care settings.
- Not all evidence-based models are **early childhood specific** or trauma-informed care (TIC) specific. i.e. The Early Childhood Mental Health Consultation (ECMHC) is early childhood-specific and centered on mental health, but it is not focused on trauma-informed care per se. Also, the Attachment, Self-Regulation, and Competency (ARC) framework is trauma-focused, but its target population ranges from 2 to 21 years old.
- A consultation-based model such as ECHMC would be particularly helpful in increasing awareness and **knowledge** of parents and teachers/child care providers on children’s mental health and to help them learn **strategies** for how to deal with children’s challenging behaviors (including developing individualized behavior support plans). However, this model does not include **direct services** for either the child or the parent, such as **counseling** or **therapy**.

Evidence Based Models

System-Level / Multi-tiered Model

Out of 5 models reviewed, 3 had empirical studies supported their effectiveness:

- Early Childhood Mental Health Consultation (ECMHC)
- The Attachment, Self-Regulation, and Competency (ARC) Framework
- The Head Start Trauma Smart (HSTS) Model

Targeted Individual / Family Interventions Model

10 Evidence-Based Individual/Family Interventions were found:

- Attachment and Biobehavioral Catch-up (ABC) for infants
- Child Parent Psychotherapy (CPP)
- Early Pathways
- Let’s Connect
- Parent-Child Interaction Therapy (PCIT)
- Promoting FIRST Relationships
- Strengthening Family Coping Resources (SFCR)
- Trauma Assessment Pathway (TAP)
- Trauma-focused Cognitive Behavioral Therapy (TF-CBT)
- Thinking for a Change (TFAC)

Promising School-Based Interventions

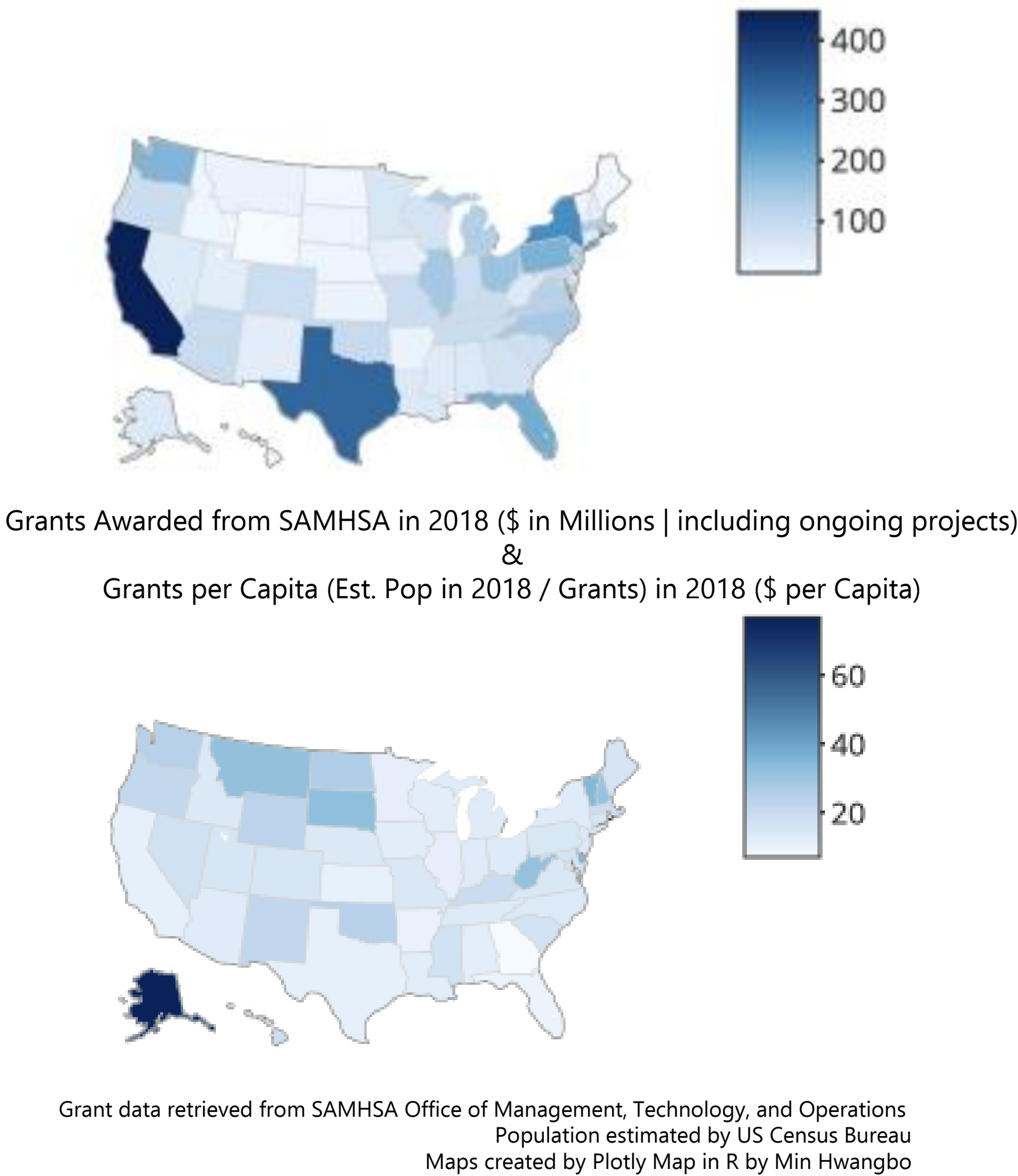
Circle Preschool Program (CPP): Intervention designed with a neurobiological and developmental perspective. The program is for children 3 to 5 who have experienced early severe trauma and Involves individual child and family sessions guided by a multidisciplinary team in the preschool.

Funding TIC System

The 2014 Substance Abuse and Mental Health Services Administration (SAMHSA) report stated recommendations for states to coordinate multiple sources of funding direct services including: crisis hotlines, emergency services centers, mobile crisis teams, residential crisis services, social detoxification with crisis stabilization services, walk-in services, etc.

Funding sources including general state funds, Medicaid funds (clinic/rehab./1115/1915(b)/1915(c), mental health block grant, local grant, private insurance, self pay, FEMA, or grant funding were reported to support the mental health and substance abused related services.

Yet, there was no indication if the above stated funds covered supporting families of impacted child or mental health of professionals and workforce environment.



As a major grantor of trauma-relevant activities in the United States, SAMHSA’s grant management system provides complete list of grant awards which can support rendering and visualizing data such as the above small multiples of maps.

The birds-eye view provides baseline information around how much funds have distributed across the state. To further analyze the impact of these funds, there is also a need to calculate per capita distribution of each service by counting citizens who are considered as at risk population. We recommend de-aggregating these at risk populations into age-specific groups, gender, ethnicity, regions, and socio-economic status.

By doing so, this will provide in-depth contextual information around equitable and appropriate distribution of the funds as well as how well these evidence-based models referenced in the prior section are accessible for those in needs and for those who are in-directly impacted.