Annotated Bibliography

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Arvidson, J., Kinniburgh, K., Howard, K., Spinazzola, J., Strothers, H., Evans, M., . . . Blaustein, M. (2011). Treatment of complex trauma in young children: Developmental and cultural considerations in application of the ARC Intervention Model. *Journal of Child & Adolescent Trauma, 4*(1), 34-51. doi: 10.1080/19361521.2011.545046

This article focuses on an evidence-informed practice used to treat children with complex trauma. This article discusses (ARC) which stands for attachment, self-regulation, and competency. It also discusses how this treatment is flexible for the professionals that choose to use this treatment when helping children who has been exposed to complex trauma. The method used in this research was with children ranging from ages 3 to 12 at an outpatient clinic. The average age of the children who actually participated from this clinic were about 7 years old. The children were from different racial and cultural backgrounds and each of them was exposed to multiple traumatic experiences. The treatment consisted of 50 sessions and of the 93 children at this particular clinic only 50 actually completed the program due to many of them relocating with their families. The findings suggest that this treatment has promising outcomes with children who are in the system and they found that this treatment has a higher success rate with finding these children permanent placement in homes. This article recommends that formal research is conducted on the ARC model that includes controlled clinical trials to test the program for efficacy and effectiveness in the future.

This article is relevant to my research because it describes an intervention that can be used to treat children who are exposed to complex trauma. It gives in debt details of the program and how to implement it into practice.

Dauber, S., Lotsos, K., & Pulido, M. (2015). Treatment of complex trauma on the front lines: A preliminary look at child outcomes in an agency sample. Child and Adolescent Social Work Journal, 32(6), 529-543. doi: 10.1007/s10560-015-0393-5

This article focuses on a study conducted in an agency and focused its research on one group of children within the agency who have been exposed to some type of complex trauma. The trauma included anything from physical abuse, sexual abuse, neglect and those who have witnessed some form of domestic violence. The methods used in this study was sampling of 31 individuals who enrolled in the Trauma Recovery Program (TRP) at an urban child welfare treatment agency. The individuals completed three months of treatment and two standardized assessments. The study used research supported approaches such as attachment-based approaches, cognitive-behavioral approaches, and creative arts approaches. The results of this study showed major improvements in symptoms of anxiety, depression, anger dissociation and sexual concerns which declined following treatment. This article recommended that more research be conducted on this topic in the future for effectiveness.

This article relates to my research in finding out if certain approaches or interventions completed with children effectively reduce the signs of trauma in children.

Richards, M., Lewis, G., Cornelli Sanderson, R., Deane, K., & Quimby, D. (2016). Introduction to special issue: Resilience-based approaches to trauma intervention for children and adolescents. *Journal of Child & Adolescent Trauma, 9*(1), 1-4. doi: 10.1007/s40653-016-0081-4

This article discusses several reports on the topic of resilience-bases interventions for children and adolescents, who were exposed to trauma. It focused on the resilience in those children who were still able to succeed and continue to strive for excellence in life while being in a toxic or traumatic environment. This article highlights resilience-based interventions for children and adolescents exposed to trauma or toxic stress, in addition on how to incorporate intervention development and implementation with a strengths-based approach. The approach used in one study was focused on developing and enhancing the client’s strengths, self-determination, and hope. Another approach used was a training approach used in a residential shelter for migrant youth. Their research findings suggested that using system wide interventions while working with these traumatized children resulted in fewer behavioral incidents in the children. The findings also suggested that the Child and Family Traumatic Stress Intervention (CFTSI), along with a brief family strengthening intervention can reduce trauma symptoms during the peritraumatic period which is usually within 30-45 days of the traumatic event.

This article is relevant to my research because it provides useful information to the professionals who are designing, implementing or in my case evaluating trauma interventions for children.

Salloum, A., & Overstreet, S. (2012). Grief and trauma intervention for children after disaster: Exploring coping skills versus trauma narration. *Behaviour Research and Therapy, 50*(3), 169-179. doi: https://doi.org/10.1016/j.brat.2012.01.001

This article focused on a study that was conducted on 70 African American children ranging in ages from six to twelve years old. The study was conducted to evaluate the different effects the Grief and Trauma Intervention (GTI) had on these children with or without coping skills. The methods used were they had selected children who had been exposed to or experienced some type of trauma in their lives. They were either exposed to violence, the actual hurricane exposure and some were even exposed to death. The children were assigned to two groups. The first group was GTI with coping skills and narrative construction (GTI-CN) and the second group was GTI with coping skills (GTI-C). They completed pre, post, three month and twelve month follow up assessments. Each group had eleven sessions with a parent meeting that was conducted in their homes. The findings reported that building coping skills in children with trauma related symptoms or distress would work just fine without the trauma narrative. It recommended more research to be completed on the efficacy of interventions with children who has experienced trauma.

This article is relevant to my research because it gives evidence of a study that uses a specific type of intervention with children who have trauma related issues.

Schneider, S. J., Grilli, S. F., & Schneider, J. R. (2012). Evidence-based treatments for traumatized children and adolescents. *Current Psychiatry Reports, 15*(1), 332. doi: 10.1007/s11920-012-0332-5

This article focuses on the psychotherapeutic treatments that are evidenced-based proven to treat children and adolescents who have experienced trauma. This article discusses several different evidenced-supported trauma focused treatments for children and adolescents describing the actual treatment, the population it serves such as the children different age ranges, the different types of trauma, and the length and format of the treatment. The findings of this article suggests that these evidenced based interventions have progresses and are proven to work, it also noted that more research is needed to determine when the inclusion of trauma-focused components are critical to the treatment outcome.

This article is relevant to my research because it lists several proven evidenced based treatments that are available to use to help these children heal from any and all possible types of trauma. It can be alternatives to treatments that have not been implicated in some agencies.