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## Trauma-Informed Care (TIC) Interventions: An Evidence-Based Practice Project

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# Trauma-Informed Care (TIC) Interventions: An Evidence-Based Practice Project

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## Introduction

### Evidence Based Practice

Evidence based practice is defined as the integration of knowledge from professional and clinical expertise, patient/client unique values and circumstances, and best research evidence (Straus, Richardson, Glasziou, & Haynes, 2005). The EBP courses in the St. Catherine University occupational therapy programs emphasizes skill building in finding, analyzing, and synthesizing research.

### A definition of Evidence-Based Practice (EBP)



(Straus, Richardson, Glasziou & Haynes, 2005)



### The EBP Project

Occupational therapy graduate students at St. Catherine University complete an EBP project in partial fulfillment of the requirements for a course on Evidence-Based Practice.

### The EBP Process

- Begins with a practice dilemma
- Dilemma is framed as an EBP question and PICO  
P (population/problem) I (intervention) C (comparison group) O (outcome(s) of interest)
- Background learning
- Search for the best evidence
- Initial appraisal and critical appraisal of the evidence
- Summary of themes from the evidence
- Recommendations for practice
- Next steps – implementation in practice

### **Six EBP Projects: Trauma and Trauma Informed Care**

1. Descriptive and risk factors
2. Trauma and health outcomes
3. Screening and assessments
4. Perspectives and experiences
5. Interventions for individuals with a history of trauma
6. Training and programs for health professionals

### **EBP Practice Dilemma: Trauma and Trauma Informed Care**

#### ***Hypothetical EBP Case Related to Trauma and Trauma Informed Care***

The overall focus on trauma and trauma informed care was chosen because of its increasing attention in the news and healthcare priorities. Recognition of trauma and provision of trauma-informed care in health, community, and education settings are important. Peter Levine, a clinical psychologist stated, “The effects of unresolved trauma can be devastating. It can affect our habits and outlook on life...It can take a toll on our family life and interpersonal relationships. It can trigger real physical pain, symptoms, and disease...” and “The paradox of trauma is that it has both the power to destroy and the power to transform and resurrect.” (Levine, n.d.)

Trauma and trauma-informed care was a particularly challenging topic for the EBP projects for several reasons. First, most of the literature is interdisciplinary and so it required looking for resources outside of occupational therapy for evidence. Second, the literature on trauma and trauma-informed care is still emerging. There are quite a few gaps in research that still need to be addressed. Third, we had to acknowledge in our class that some students may have a history of trauma. At the beginning of our class, we talked about the importance of being aware of our feelings regarding this topic and knowing when to get support. That is why we also provided a list of national and Minnesota resources related to trauma.

#### ***Background Information on Trauma and Trauma Informed Care***

Trauma has been defined as: “results from an **event**, series of events, or set of circumstances **experienced** by an individual as physically or emotionally harmful or life-threatening with lasting adverse **effects** on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being” (SAMHSA, 2014). The key attributes of trauma include:

- **Event:** The event is actual or a threat that may include features of physical or psychological harm, life-threatening, and/or child neglect.
- **Experienced:** An unique label, meaning, and disruption is identified.
- **Effects:** The immediate or delayed, short or long term effects can be named.

There are many different types of trauma and many populations who may be affected by trauma. Trauma is associated with (NCTSN, 2014, <https://www.nctsn.org/what-is-child-trauma/trauma-types>):

- Bullying
- Community violence
- Complex trauma
- Disasters
- Early childhood trauma
- Intimate partner violence
- Medical trauma
- Physical abuse
- Refugee trauma
- Sexual abuse
- Terrorism and violence
- Traumatic grief

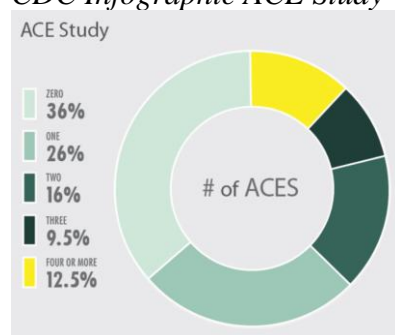
Estimates of adult exposure to trauma vary. Approximately 6 in 10 men and 5 in 10 women have had trauma and 90% of people seen in behavioral health have a history of trauma (SAMHSA, n.d., <https://www.integration.samhsa.gov/clinical-practice/trauma>).

Trauma that is associated with childhood is often labeled an adverse childhood experience (ACE). ACEs are defined as potentially traumatic events in childhood (0-17 years) that may include:

- “violence, abuse, or neglect; witnessing violence in the home; and having a family member attempt or die by suicide...
- growing up in a household with substance misuse, mental health problems, or instability due to parental separation or incarceration of a parent, sibling, or other member of the household.” (CDC, 2019, n.p., <https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/aboutace.html>)

A history of ACEs is reportedly quite common in the adult population (see Figure 1). It is estimated that almost 2/3 of adults have had an adverse childhood experience and 2 in 10 people have had three or more ACEs (CDC, 2016).

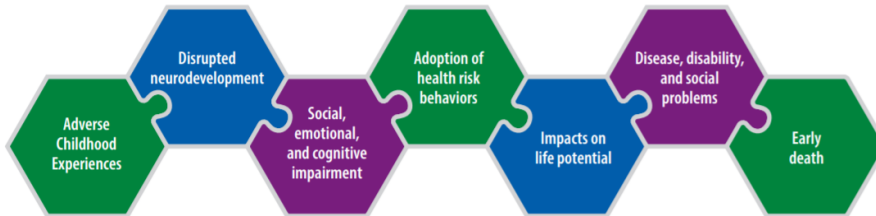
Figure 1  
*CDC Infographic ACE Study*



Note. (CDC, 2016, <https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/ace-graphics.htm>)

Trauma in childhood has a ripple effect on later life (see Figure 2). ACEs may disrupt development, contribute to other impairments, influence risky behaviors, change life potential, influence later health problems and may even be a factor in early death.

Figure 2  
*CDC Infographic Preventing ACEs*



Note. CDC, 2019, n.p., <https://www.cdc.gov/violenceprevention/pdf/preventingACES-508.pdf>

Preventing ACEs is a major priority of public health media campaigns by the Centers for Disease Control and Prevention (CDC, 2019,

<https://www.cdc.gov/violenceprevention/pdf/preventingACES-508.pdf>). Prevention emphasizes:

- Supports for families
- Social norms
- Strong starts
- Skill building to handle everyday challenges
- Connections to caring adults and activities
- Early interventions

The EBP projects from the Fall, 2019, Evidence-Based Practice course provide a snapshot of research studies on trauma and ACEs. Ongoing research in major studies of trauma may be followed in the:

- CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) Study
- Behavioral Risk Factor Surveillance System (BRFSS)
- World Health Organization: ACE International Questionnaire (ACE-IQ)

Trauma-Informed Care (TIC) has been proposed as a framework for professionals and organizations who work with individuals having a history of trauma.

A professional who implements characteristics of TIC:

- Realizes the impact of trauma
- recognizes the signs and symptoms
- responds through policies, procedures, and practices
- resists re-traumatization.

The six principles of TIC are:

- Safety
- Trustworthiness and transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice and choice
- Cultural, historical, and gender issues



The occupational therapy focus on trauma and trauma-informed care has been relatively recent for the American Occupational Therapy Association (AOTA) even though many practitioners have addressed trauma within their own work setting. The AOTA has four publications that may be of interest to occupational therapy practitioners:

- Understanding and applying trauma-informed approaches across occupational therapy settings. (Fette, 2019)
- AOTA's societal statement on stress, trauma, and posttraumatic stress disorder (Champagne, et al., 2018).
- Occupational therapy's role in mental health promotion, prevention, & intervention with children & youth childhood trauma (AOTA, 2015)
- A trauma-informed approach distinct to occupational therapy: The TIC-OT Model (AOTA, 2018)

### **Appraisals of Best Evidence, Themes, and Recommendations**

After searching and finding evidence available from library databases and alternative sources, students conducted an initial appraisal to evaluate the quality and relevance of the evidence and select the best research for further review. Then they conducted critical appraisals of the best formal reviews of primary research (e.g., systematic reviews, meta-analyses) and/or primary/original research studies. One of the steps in the CAP process is to evaluate the strength or level of the research design and the types of conclusions that are possible from each design.

#### *Initial Appraisal*

- Quality of the evidence
  - type of evidence and research design
  - investigator qualifications and journal/publication/website
  - journal/publication/website
- Relevance of the evidence

#### *Critical Appraisal*

- Appraisal of methods, results, and implications
- Classification of type of research study
  - Reviews of primary research (e.g., systematic reviews, meta-analyses)
  - Qualitative studies
  - Psychometric studies
  - Primary quantitative research studies
    - Level 1: randomized controlled trials
    - Level 2: two groups, nonrandomized/cohort and case control
    - Level 3: nonrandomized, pretest/posttest and cross-sectional
    - Level 4: single subject
    - Level 5: case report

After completing initial and critical appraisals, themes are summarized related to the EBP question and other findings that emerged from the evidence. Recommendations for practice and reflection on participating in an EBP project are identified in the conclusions.

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**All EBP Projects are available at <http://sophia.stkate.edu/>.**

**EBP Question**

What are the characteristics and effectiveness of trauma-informed care (TIC) approaches on health and participation (well-being, quality of life) outcomes for populations who have experienced trauma?

## Executive Summary


### Minnesota Occupational Therapy Association Continuing Education Presentation

### Trauma-Informed Care (TIC) Interventions

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### EBP Question

What are the characteristics and effectiveness of TIC approaches on health and participation (well-being, quality of life) outcomes for populations who have experienced trauma?



### Background Learning

- TIC principles include: safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and cultural, historical, and gender issues (SAMHSA, 2014a)
- Interventions include Cognitive Behavioral Therapy (CBT), collaborative care, and prolonged exposure (Foa et al., 2013; Gatchel et al., 2013)
- Occupational therapy role emphasizes impact of trauma on development, functional performance, safety, and participation (AOTA, 2018)

### Examples of Evidence Resources

**Governmental and Major Foundations**

- SAMHSA: TIC in Behavioral Health Services Manual (SAMHSA, 2014a)
- Minnesota Association for Children's Mental Health

**OT Specific Resources**


- AOTA Societal Statement: Stress, Trauma, and Posttraumatic Stress Disorder (AOTA, 2018)
- CE Article: Understanding and Applying Trauma-informed Approaches Across Occupational Therapy Settings (Frost, Lamberti-Pasculli, & Weaver, 2019)

**Interprofessional Journals, Databases, Organizations**

- PsycINFO
- Journal of Trauma and Treatment

### Examples of Search Process

Databases Use	Most Helpful Search Strategies	Most helpful keywords
<ul style="list-style-type: none"> <li>- ScienceDirect</li> <li>- PubMed</li> <li>- Cochrane Library</li> <li>- PsycINFO</li> </ul>	<ul style="list-style-type: none"> <li>- Using Medical Subject headings (MeSH)</li> <li>- Finding other relevant articles from reference lists</li> </ul>	<ul style="list-style-type: none"> <li>- Trauma</li> <li>- Well-being</li> <li>- Program</li> <li>- Mental health</li> </ul>



### Initial Appraisal of Best Evidence

Type of Study	Percentage
Primary Research Studies	40%
Reviews of Primary Research	45%
Conceptual/Theoretical Articles	15%

- Primary Research Studies - 16 articles
- Reviews of Primary Research - 18 articles
- Conceptual/Theoretical Articles - 6 articles


### Overview of Critical Appraisals of Best Evidence

**Primary Research**

- Statewide trauma-informed child welfare initiative (Dunne et al., 2018)
- Cognitive behavioral therapy for children sexually abused (Dunne et al., 2012)
- Treating Women with Co-Occurring Disorders and Histories of Trauma (Gatz et al., 2007)
- Comparing trauma-focused cognitive behavioral therapy with therapy as usual for youth (Jensen et al., 2014)
- Trauma-focused cognitive behavioral therapy for sexually exploited girls (O'Callaghan, McMillen, Shannon, Rafferty, & Black, 2013)

**Reviews of Primary Research**

- Trauma-informed care in inpatient mental health settings (Mullen, 2016)
- Mental health response to community disasters (Bano & Pfefferbaum, 2013)
- School-based social emotional interventions for refugee and war-traumatized youth (Sulivan & Simpson, 2016)




### Critical Appraisals 1 and 2:

The impact of a statewide trauma-informed child welfare initiative on children's permanency and maltreatment outcomes (Dunne et al., 2018)

- What are the characteristics of a statewide trauma-informed child welfare program?
- Findings support the use of the Massachusetts Child Trauma Project.

Trauma-focused cognitive behavioral therapy for children: impact of the trauma narrative and treatment length (Dunne et al., 2012)

- What are the outcomes of a trauma-focused cognitive behavioral therapy (TF-CBT) program that includes a trauma narrative (TN)?
- Findings support the use of TF-CBT and a TN component for enhancing behavioral functioning, parenting, and safety skills for children and their non-offending parents.




### Critical Appraisals 3 and 4:

Effectiveness of an Integrated, Trauma-Informed Approach to Treating Women with Co-Occurring Disorders and Histories of Trauma: The Los Angeles Site Experience (Gatz et al., 2007)

- Is a trauma-informed integrated treatment program for women with co-occurring disorders and a history of trauma effective in providing a sense of safety and increasing their use of coping skills?
- The findings suggest that Seeking Safety (a group CBT) creates a sense of safety, educate clients about the relationship between trauma and other symptoms, and helps clients learn new coping skills and find meaning in their lives.

A randomized effectiveness study comparing trauma-focused cognitive behavioral therapy with therapy as usual for youth (Jensen et al., 2014)

- Is TF-CBT an effective treatment for alleviating negative symptoms and improving quality of life in youth who have experienced trauma?
- Findings suggest TF-CBT to be a more effective treatment than therapy as usual for youth.



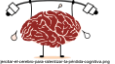
### Critical Appraisals 5 and 6:

A randomized controlled trial of trauma-focused cognitive behavioral therapy for sexually exploited, war-affected Congolese girls (O'Callaghan, McMillen, Shannon, Rafferty, & Black, 2013)

- What are the outcomes of TF-CBT on war-exposed girls who have experienced sexual trauma?
- Findings suggest that TF-CBT is effective in increasing well-being, specifically reducing trauma symptoms, depression and anxiety, and conduct problems, and improving prosocial behavior.

Trauma-informed care in inpatient mental health settings: A review of the literature (Mullen, 2016)

- What is the evidence regarding best practice for trauma-informed interventions in inpatient mental health settings?
- Health professionals should all be trained to work with trauma victims and should practice with the assumption that all clients have experienced trauma.




### Critical Appraisals 7 and 8:

A systematic review of school-based social emotional interventions for refugee and war-traumatized youth (Sullivan & Simpson, 2016)

- Are the use of school-based interventions effective in improving the mental health of refugee students?
- Cognitive behavioral therapy interventions had the most consistent outcomes for the students and is easier to implement in the schools.

Mental Health response to community disasters: A systematic review (North and Pfefferbaum, 2013)

- Are effective interventions in place for victims of trauma that coincide with the emergency medical response present in community disasters?
- Psychological first aid, psychological debriefing and crisis counseling were the most commonly and effective described interventions stated.



### Theme 1: Populations and Professions Involved in Interventions


Trauma-informed interventions have been used among several populations with approaches across disciplines.

- Type of trauma experienced in children and adults (DeBruin et al., 2011; Bagheri, Anagha, Dennis, Pitts, & Sans, 2013)
- Mental health professionals and other professionals (Bano et al., 2018; Muskett, 2014; North & Pfefferbaum, 2013; Thomas, Crosby & Vandenhazer, 2019)
- Trauma-informed care internationally (Jensen et al., 2014; Kane et al., 2016; O'Callaghan, McMillen, Shannon, Rafferty, & Black, 2013)

### Theme 2: Characteristics of Effective Interventions

Various interventions are used to treat trauma.


- Cognitive-Behavioral Therapy (CBT) (Gatz, 2007; Jaycox et al., 2011)
- Other Interdisciplinary Interventions (e.g., creative expression, narrative therapy) (DeBlinger et al., 2011; Sullivan & Simonson, 2016)
- Occupational Therapy Interventions (e.g., sensory-based) (Carney-Mason, & Crook, 2019; Fraser, Mackenzie, & Verneil, 2017)



### Theme 3: Contributions of Interventions to Well-being and Quality of Life

Trauma-informed interventions have been shown to be related to improved quality of life and well-being in various populations.


- Improved mental health (Jensen et al., 2013; Jaycox et al., 2011)
- Improved ability to perform life skills (Gatz et al., 2007; Solomon & Chertman, 2012; Carney-Mason, & Crook, 2019)
- Improved sense of safety (DeBlinger et al., 2011; Barrio et al., 2018)



### Theme 4: Gaps in Research


Since trauma-informed approaches are still developing, there are significant gaps in research.

- Issue providing high level of evidence (North & Pfefferbaum, 2013; Thomas, Crosby, & Vanderhaar, 2010)
- Limited research involving interventions provided by occupational therapists (Fraser, Mackenzie, & Verneil, 2017)




### Recommendations for Occupational Therapy and Interprofessional Programs

- Improved research design are needed (e.g., large, less-homogenous samples)
- The outcomes of trauma-informed interventions should include a focus on mental health, life skills, & safety
- Practitioners should receive training in CBT to incorporate it into occupation-based practice
- There is a need to develop occupational therapy-specific interventions for trauma



### Summary and Reflection

- Sympathy vs. Empathy
- Teamwork
- Challenging yet rewarding experience



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## **Themes**

### ***Introduction***

Themes from a review of research provided characteristics and effectiveness of TIC approaches on health and participation outcomes for populations who have experienced trauma. Using the keywords trauma, interventions, mental health, and well-being a total of 40 articles were collected and initially appraised. Eight articles were then critically appraised. The themes described below were determined by analyzing commonalities of 16 primary research studies, 18 reviews of primary research and six conceptual/ theoretical articles. The first three themes include common features of trauma-informed care, the professions and populations involved, and how they relate to well-being and quality of life. The last theme identified gaps in research that are needed to improve interventions and increase representation in occupational therapy literature and practice.

### ***Populations and Professions Involved in Intervention Research***

Trauma-informed interventions have been studied in several trauma populations and across disciplines. Interventions were developed for populations of different ages having exposure to specific types of trauma. In the studies reviewed, populations included trauma related to community crisis, sexual and physical abuse, psychiatric conditions, human trafficking, war, and substance abuse. For examples, one randomized controlled trial used an intervention for children with experiences of sexual abuse that involved conjoint therapy sessions with a caregiver (Deblinger et al., 2011), while a systematic review examined the benefits of other therapeutic interventions for adults who experienced sexual abuse (Regehr, Alaggia, Dennis, Pitts, & Saini, 2013).

The majority of interventions in the reviewed studies were psychotherapies administered by mental health providers. However, other professionals such as emergency responders, teachers, nurses, and staff from state offices have participated in system approaches to trauma-informed care (Barto et al., 2018; Muskett, 2014; North & Pfefferbaum, 2013; Thomas, Crosby, & Vanderhaar, 2019). These professionals received trauma-informed training to identify individuals experiencing or at risk for developing a psychiatric disorder from traumatic stress (Barto et al., 2018; Muskett, 2014; North & Pfefferbaum, 2013; Thomas, Crosby, & Vanderhaar, 2019). A systematic review of mental health interventions identified psychological first aid as an early intervention tool that may be used by professionals in recent community crises (North & Pfefferbaum, 2013). Although psychological first aid has limited empirical research, it was created by experts to build a supportive and compassionate relationship with an individual in distress, provide education on symptoms of stress and coping strategies, and connect the individual to resources for further assistance (North & Pfefferbaum, 2013).

Interventions that address trauma have been used globally. Intervention research has been conducted in the Democratic Republic of Congo, Zambia, Norway, India, and Canada (Jensen et al., 2014; Kane et al., 2016; O'Callaghan, McMullen, Shannon, Rafferty, & Black, 2013). One randomized controlled trial looked at the ability and effectiveness to adapt trauma-focused cognitive behavioral therapy (TF-CBT) to treat Congolese girls that were culturally different from Westernized populations (O'Callaghan, McMullen, Shannon, Rafferty, & Black, 2013). Another study compared TF-CBT with typical therapy using a randomized effectiveness study in Norway (Jensen et al., 2013). Lastly, a systematic review of school-based interventions directed towards refugee and war traumatized youth from twenty-six countries included the United Kingdom, Australia, Iran, and India (Sullivan & Simonson, 2016). Applying research on a global

level shows that trauma-informed care is not only needed in U.S. health systems, but internationally.

### *Characteristics of Effective Interventions*

The most common intervention in trauma-informed care research was cognitive behavioral therapy (CBT). The findings suggested that CBT was as or more effective in comparison to other interventions (Deblinger et al., 2011; Jensen et al., 2013; O'Callaghan, McMullen, Shannon, Rafferty, & Black, 2013; Sullivan & Simonson, 2016). Trauma-focused cognitive behavioral therapy (TF-CBT) is a type of CBT that was especially prominent in research. TF-CBT was designed to manage the negative effects of traumatic experiences in children and adolescents and consists of 12-15 sessions that include a group component (Jensen et al., 2013; Kane et al., 2016). TF-CBT was shown to be more effective, when caregivers were involved in treatment (Dorsey et al., 2014). Typical components of TF-CBT includes psychoeducation, parent training, teaching relaxation, affective modulation, cognitive processing, working through the trauma narrative, and improving safety and coping skills (Jensen et al., 2013; O'Callaghan, McMullen, Shannon, Rafferty, & Black, 2013; Sullivan & Simonson, 2016). Cognitive processing therapy, another form of CBT, was described as a 12-session manualized intervention with goals of reducing PTSD symptoms and increasing functional performance (Speicher, Walter, Chard, 2014; Wachen et al., 2019). This therapy includes individual and group programming that focuses on identifying maladaptive beliefs, increasing self-awareness of thoughts and feelings, and creating safe opportunities for clients to successfully participate in activities (Speicher, Walter, Chard, 2014). TF-CBT and cognitive processing therapy were two primary types of CBT that have been examined in trauma intervention research.

Other intervention approaches that have relevance for occupational therapy and interprofessional teams include creative expression (Sullivan & Simonson, 2016) and narrative therapy (Deblinger et al., 2011). Creative expression gives individuals an outlet to express their feelings and process emotions, and narrative therapy provides externalization of a traumatic event to increase self-awareness. Although the evidence is preliminary, interventions like these may have promise in improving mental health, life skills, and safety associated with a traumatic event.

Two occupational therapy research studies suggest that the development of occupational therapy-specific interventions are still in the early stages, but have promise for improving outcomes for trauma. Both studies published in *The Journal of Occupational Therapy in Mental Health* described trauma interventions that have been performed by occupational therapists. A scoping review examined sensory-based interventions and found that they are potentially an important component for treatment with children and adolescents who have experienced complex trauma (Fraser, MacKenzie, & Versnel, 2017). Additionally, a primary research study of occupational therapy services at a transitional home for women who were survivors of human trafficking found that traumatic experiences can limit participation in meaningful roles and weaken occupational competence (Cerny, Maassen, & Crook, 2019). These studies suggest that client-centered, occupation-based therapy may be effective in supporting recovery from trauma.

### ***Intervention Outcomes Related to Well-Being and Quality of Life***

Trauma-informed interventions have been shown to improve quality of life and mental well-being. Results of these studies showed trauma-informed care to be an effective intervention for improving mental health. Those who received trauma-informed care had lower depression (Jensen et al., 2013), lower general mental health problems (Jensen et al., 2013; O'Callaghan,

McMullen, Shannon, Rafferty, & Black, 2013), lower PTSD (Harris et al., 2011; Jaycox et al., 2011; O’Callaghan, McMullen, Shannon, Rafferty, & Black, 2013; Sullivan & Simonson, 2016), decreased stress (Deblinger et al., 2011; Jensen et al., 2013; Kane et al., 2017; Sullivan & Simonson, 2016), increased self-esteem (Sullivan & Simonson, 2016), and improved life skills (Kane et al., 2017; Regehr, Alaggia, Dennis, Pitts, & Saini, 2013; Sullivan & Simonson, 2016).

Secondly, the results of the studies reviewed showed trauma-informed care to be an effective intervention for improving the ability to perform daily life skills. Caution must be used in interpreting these findings because the designs included reviews of research and conceptual papers. Those who received trauma-informed care showed increased social participation (Gatz, 2007), prosocial behavior, coping skills (Gatz, 2007; Salloum et al., 2012), autonomy (Cerny et al., 2019), behavioural functioning (Deblinger et al., 201; Kane et al., 2017) self-esteem, creative expression, and improvement in school outcomes (Sullivan & Simonson, 2016). A study conducted by Gatz (2007) found that, “The women in the trauma-informed integrated treatment intervention group improved significantly more on posttraumatic stress symptoms and on the use of coping skills than the women in the comparison group. Improvement in coping skills was tied to treatment completion for women in the intervention condition” (p. 874). With regards to school outcomes, Sullivan and Simonson (2016) found that, “The magnitude and scope of behaviors affected varied across studies, but all authors reported some degree of improvement in student outcomes” (p. 16).

Lastly, the results of these studies suggested trauma-informed care may be an effective intervention for improving sense of safety and reducing maltreatment. Individuals who participated in trauma-informed care showed an enhancement in personal safety skills (Barto et al., 2018; Deblinger et al., 2011). Outcomes also included fewer reports of later maltreatment

(Barto et al., 2018; Deblinger et al., 2011). A study conducted by Deblinger et al. (2011) found that TF-CBT for young children was effective in enhancing a wide range of affective as well as parental and child safety skills.

### ***Gaps in Intervention Research***

Although trauma-informed approaches are still in early development, there is a need for future studies to be examined, conducted, and refined. A lack of high level of evidence in studies and limited research involving the best practice for occupational therapy are issues that need to be addressed.

There is no current, universal understanding of the characteristics of trauma-informed care interventions (Thomas, Crosby, & Vanderhaar, 2019). An interdisciplinary review examined the teaching practices and trauma-related in-services in schools and found no clear consensus or standard of how to implement trauma-informed practices (Thomas, Crosby, & Vanderhaar, 2019). A major limitation in intervention studies is that it is not feasible to have random assignment to groups or sampling. A systematic review on health response to community disasters explained difficulties conducting a scientific investigation during chaotic and pressured settings (North & Pfefferbaum, 2013). Convenience sampling in research often leads to a lack of representation of the entire population contributing to questionable generalizability (North & Pfefferbaum, 2013). Moreover, most studies of TIC approaches are pilot studies or in the conceptual stage (North & Pfefferbaum, 2013). There is also an ethical dilemma of withholding treatment from control groups creating difficulties with achieving strong internal validity.

Trauma-informed care is a relatively new area of practice for occupational therapists. More education in trauma interventions and the unique needs of children and adolescents in

particular is required (Fraser, MacKenzie, & Versnel, 2017). Only one occupational therapy scoping review discussed sensory-based interventions for children who had experienced trauma (Fraser, MacKenzie, & Versnel, 2017). Also, advanced training is needed to ensure that the impact of trauma and the unique triggers and sensory issues of this population are understood (Fraser, MacKenzie, & Versnel, 2017). Across most of the studies, CBT was the most common intervention used and this may suggest occupational therapy practitioners should explore CBT as an area of specialized training. More clarity is needed on the knowledge and competencies required by health professionals who provide CBT and other approaches as part of trauma-informed care.

### **Summary and Implications for Practice**

Two key ideas served as a backdrop for our review of the evidence on trauma interventions. First, SAMHSA proposed six principles for trauma-informed care that are a foundation for trauma interventions: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment, voice, and choice; and cultural, historical, and gender issues (SAMHSA, 2014). Second, occupational therapy practitioners may contribute to trauma-informed care practices by “assist[ing] individuals in identifying areas of development and functional performance that may have been adversely affected by stressful and traumatic experiences and assist in determining ways to foster the developmental process to support safety, functional performance, and participation” (AOTA, 2018, p.1). It is evident that trauma-informed practices are important for all health professionals who work with individuals who have experienced trauma.

Our first theme noted that trauma-informed interventions have been applied to many trauma populations and implemented by different disciplines. Most studies targeted the trauma intervention to a population that had been exposed to a specific type of trauma, for examples natural disasters, mass shootings, terrorism, sexual and physical abuse, psychiatric conditions, human trafficking, war, and substance abuse. The interventions were delivered by both mental health and other professionals, indicating that trauma-informed care may be developed and implemented by different health professions.

The second theme identified the characteristics and effectiveness of interventions for trauma. Cognitive behavioral therapy (CBT) was a predominant intervention in the studies examined and had strong support in terms of effectiveness. Different types of CBT have been utilized depending upon the population and the traumatic event(s) experienced. For example,



*trauma-focused* CBT was used with children and adolescents. Other approaches to treat trauma included creative expression, sensory-based interventions, and narrative therapy. Although trauma-informed care is a relatively new area of practice for occupational therapy, research is beginning to examine occupational therapy based interventions based on the model of human occupation (MOHO), cognitive processing therapy, and sensory-based approaches.

The third theme documented the contributions of interventions to well-being and quality of life. Trauma-informed care interventions are effective in improving mental health in the areas of depression, PTSD, stress, and sensory responses to trauma. Trauma-informed care interventions also improved the ability to perform daily life skills such as social participation, prosocial behavior, coping skills, autonomy, behavioral functioning, and self-esteem. Finally, the studies reviewed showed trauma-informed care to be an effective intervention for improving sense of safety and reduction of maltreatment.

The fourth theme examined the gaps in the research. Currently, there is no universal understanding of what a trauma-informed care intervention should entail. Thus, most trauma-informed care approaches are pilot studies or in the conceptual stages. Major limitations of current research that limit generalizability include reliance on convenience sampling and inability to randomly assign participants to groups. A final limitation is it is difficult to achieve strong internal validity due to the ethical standards of not withholding treatment in control groups. Trauma-informed care is a relatively new area of practice for occupational therapy, and more education in trauma interventions and the unique needs of children and adolescents is required (Fraser, MacKenzie, & Versnel, 2017). Advanced training is required to ensure that the impact of trauma and the unique triggers and sensory issues of this population are understood (Fraser, MacKenzie, & Versnel, 2017). Across most of the studies, CBT was the most common

intervention used and this may suggest that more occupational therapy practitioners should explore CBT training as an area of advanced practice. Although trauma intervention research had inherent limitations, there were also strengths. Recent trauma intervention studies include extensive literature reviews. Having sufficient background knowledge was essential for developing an understanding and identifying research gaps. The studies also proposed operational definitions for the outcome variables of PTSD, depression, anxiety, and other metrics that are relevant to trauma-informed interventions. Use of reliable and valid assessments in practice would help to document the effectiveness of interventions in helping individuals improve in specific outcome areas.

Several recommendations are proposed for future practice and research in occupational therapy and interprofessional programs. The first recommendation involves training at the systems level. The principles of trauma-informed care provide a foundation for treating trauma and enable occupational therapy practitioners to contribute knowledge for desired occupation-based outcomes in the areas of performance, health and wellness, quality of life, participation, role competence, well-being, and occupational justice. Our second recommendation is that intervention studies should strive to have higher levels of evidence that include prospective studies and as representative samples as possible. Although convenience samples are common in trauma research, we should still attempt to have large, less-homogenous samples to more accurately represent the population. Our third recommendation relates to the growing evidence on cognitive behavioral therapy and a possible role for occupational therapy using this interdisciplinary approach with diverse populations. Perhaps advanced training in this approach may be appropriate for occupational therapy practitioners who work with trauma populations.

Our final recommendation emphasizes the importance of advocacy in occupational therapy to increase trauma awareness and trauma-informed care legislation.

A final consideration to note is that the outcomes of recent intervention research emphasize improvement in mental health and do not explicitly measure changes in occupational performance. Although the connections between mental health, well-being, participation, and performance can be inferred, future research should examine whether interventions in fact result in improved occupational outcomes. This direction for future research and practice provides an exciting opportunity for occupational therapy to make contributions to trauma informed care.

**Tables of EBP Resources**

Table 1.

*Governmental and Major Foundation Resources that Address Trauma Informed Care*

Title/Name	Brief Description	Source
The Trauma Survivors Foundation	Provides mental health services by trained trauma therapists, provides scholarships to first responders for attending trauma training classes, train emergency personnel to provide crisis intervention.	The Trauma Survivors Foundation <a href="https://www.thetraumasurvivorsfoundation.com">https://www.thetraumasurvivorsfoundation.com</a>
The Soldiers Project	Provides free, confidential psychological services for military service members and their family members and educates the general public on the psychological consequences of war for those affected.	The Soldiers Project <a href="https://thesoldiersproject.org/">https://thesoldiersproject.org/</a>
Trauma Intervention Programs (TIP)	TIP is a nonprofit organization that provides immediate emotional first aid to survivors of tragedy to ease immediate suffering and facilitate their healing and long-term recovery. TIP affiliates have been established across the United States.	Trauma Intervention Programs, Inc. National Site <a href="http://www.tipnational.org">http://www.tipnational.org</a>
American Trauma Society	Advocates for trauma care system to government officials, prevention programs, and create and maintain state legislation in terms of trauma systems.  Relies on a multidisciplinary approach to provide coordinated trauma care.	American Trauma Society <a href="https://www.amtrauma.org/">https://www.amtrauma.org/</a>
Centers for Disease Control and Prevention	Includes information about ACEs and ways to prevent ACEs in the community.	CDC: Adverse Childhood Experiences (ACEs) <a href="https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/index.html">https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/index.html</a> 1

Table 2.

*Occupational Therapy Resources that Address Trauma Informed Care*

Title/Name	Brief Description	Source
AOTA's Societal Statement on Combat- Related Posttraumatic Stress (2009)	Combat-Related Posttraumatic Stress: The Statement summarizes this critical issue and proposes roles for occupational therapy <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1297500/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1297500/</a>	American Occupational Therapy Association Practice Area: Mental Health <a href="http://www.aota.org">www.aota.org</a>
Occupational Therapy's Role in PTSD, AOTA	Summarizes how PTSD symptoms impact daily participation and in children versus adults. Provides a list of various OT interventions related to PTSD recovery. <a href="https://www.aota.org/~media/Corporate/Files/AboutOT/Professionals/WhatIsOT/MH/Facts/PTSD%20fact%20sheet.pdf">https://www.aota.org/~media/Corporate/Files/AboutOT/Professionals/WhatIsOT/MH/Facts/PTSD%20fact%20sheet.pdf</a>	American Occupational Therapy Association Fact Sheet <a href="http://www.aota.org">www.aota.org</a>
Understanding and Applying Trauma-Informed Approaches Across Occupational Therapy Settings, AOTA	Reviews the 6 core principles of trauma-informed care developed by SAMHSA. States how they may be applied to various OT settings. <a href="https://www.aota.org/~media/Corporate/Files/Publications/CE-Articles/CE-article-May-2019-Trauma.pdf">https://www.aota.org/~media/Corporate/Files/Publications/CE-Articles/CE-article-May-2019-Trauma.pdf</a>	American Occupational Therapy Association Practice Area: Continuing Education <a href="http://www.aota.org">www.aota.org</a>
Complex Trauma in Children and Youth: A Scoping Review of Sensory-Based Interventions	A study that investigated the links between the way trauma impacts the neurology of the brain. It takes this idea further by investigating how trauma influences the development of children's sensory systems in the brain.	Occupational Therapy in Mental Health <a href="http://www.tandfonline.com">www.tandfonline.com</a>
The Role of Occupational Therapy in Disaster Preparedness, Response, and Recovery	A concept paper that describes the affected populations and roles of OT within the five stages of disaster. Diverse interventions occur by planning at the systems-level and providing direct services. Offers links to materials prepared by other disaster-related resources. <a href="https://ajot.aota.org/article.aspx?articleid=1865193">https://ajot.aota.org/article.aspx?articleid=1865193</a>	American Journal of Occupational Therapy Research article <a href="http://www.aota.org">www.aota.org</a>

Table 3.

*Interdisciplinary Journals, Databases, Professional Associations that Address Trauma Informed Care*

Title/Name	Brief Description	Source
Oxford Medicine Online	A digital platform that brings together authoritative texts by world-renowned authors available online. Has peer-reviewed articles related to PTSD.	SCU Library <a href="https://oxfordmedicine.com/">https://oxfordmedicine.com/</a>
American Psychological Association	Publishes multiple peer-reviewed journals related to trauma. Sponsors PsycINFO, an index of psychology resources. Has resources for consumers and professionals for treatment options available for case-specific traumas.	SCU Library: has many APA journals <a href="http://www.apa.org/index.aspx">http://www.apa.org/index.aspx</a>
PTSDpubs	Database generated by the U.S. Department of Veterans Affairs National Center for PTSD. Contains citations and abstracts on PTSD and other psychological impacts of trauma.	SCU Library <a href="https://search.proquest.com/ptsdpubs/index">https://search.proquest.com/ptsdpubs/index</a>
Journal of Trauma and Treatment	Peer-reviewed scientific journal known for high-quality research. Includes research related to PTSD and other trauma.	SCU Library <a href="https://www.omicsonline.org/trauma-treatment.php">https://www.omicsonline.org/trauma-treatment.php</a>
The National Child Traumatic Stress Network (NCTSN)	Descriptive summaries provided for interventions when working with children with trauma. Provides culturally specific summaries. Includes training guidelines and recommendations and other considerations	NCTSN <a href="https://nctsn.org">https://nctsn.org</a>

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**Appendix A. Initial Appraisals**

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Specific Type: Survey research, qualitative research (Interviews)
APA Reference	Blitz, L. V., Anderson, E. M., & Saastamoinen, M. (2016). Assessing perceptions of culture and trauma in an elementary school: Informing a model for culturally responsive trauma-informed schools. <i>The Urban Review</i> , 48(4), 520-542. doi: <a href="http://dx.doi.org/10.1007/s11256-016-0366-9">http://dx.doi.org/10.1007/s11256-016-0366-9</a>
Abstract	“Negative outcomes for students of color and those who are economically disadvantaged are troubling patterns in schools nationwide. Systemic racial disparities, including disproportional poverty, are part of the problem. Regardless of their race, however, children who live with poverty often have heightened exposure to adverse experiences. Implementing a culturally responsive trauma-informed approach to understand and respond to students can address the impact of disparities, teach resiliency skills, and promote the wellbeing and achievement of all students. This study describes a school-university collaboration to develop such a model. Findings explore school personnel’s perceptions about race, trauma, and the stressors their students face in the context of the developing model.” (p. 520)
Author	Credentials: PHD, LCSW-R Position and Institution: Associate Professor at Binghamton University Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Scholarly peer-reviewed Publisher: The Urban Review Other: Found on ProQuest
Date and Citation History	Date of publication: 2016 Cited By: Google scholar Cited By: 30
Stated Purpose or Research Question	“The study investigated teachers’ and classroom aides’ (a) perceptions of student behaviors; (b) understanding of both TTS and race; and, (c) self-reported stress levels and teaching efficacy.” (p. 524)
Author’s Conclusion	“Achieving this vision may require a significant shift in school culture and a substantial investment in acquiring a new set of skills, but the potential exists that adapting the Sanctuary Model as a culturally responsive trauma informed whole-school approach can become a social justice approach to education.” (p. 540)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Quality Rationale: This study seems to be more about assessment of trauma rather than interventions. They assessed the students stress/trauma level through questionnaires and the teachers’ perception of cultural trauma was recorded. More about assessments than interventions.
Overall Quality of Article	Overall Quality of Article: Good Level Rationale: Established author Peer-reviewed articles. Published in the last 10 years.

	Overview of Article
Type of article	Overall Type: Primary research study Specific Type: Randomized clinical trial and 2 case studies
APA Reference	Cohen, J. A., Jaycox, L. H., Walker, D. W., Mannarino, A. P., Langley, A. K., & DuClos, J. L. (2009). Treating traumatized children after hurricane Katrina: Project Fleur de-Lis. <i>Clinical Child and Family Psychology Review, 12</i> , 55–64. <a href="https://doi.org/10.1007/s10567-009-0039-2">https://doi.org/10.1007/s10567-009-0039-2</a>
Abstract	“Project Fleur-de-lis™ (PFDL) was established to provide a tiered approach to triage and treat children experiencing trauma symptoms after Hurricane Katrina. PFDL provides school screening in schools in New Orleans and three tiers of evidence-based treatment (EBT) to disaster-exposed children. Utilizing a public health approach to meet the various needs of students referred to the program, some stemming from the disaster itself, some related to prior exposure to violence, and some relating to preexisting conditions and educational delays. The National Institute of Mental Health (NIMH) is funding a research project conducted in collaboration with PFDL, to examine two evidence-based practices for child PTSD in order to guide child treatment decisions after future disaster situations. The present paper describes the need for mental health services for children following disaster, the structure and purpose of PFDL, design of the NIMH project, two case descriptions of children treated within the project, and preliminary lessons learned.” (p. 55)
Author	Credentials: Judith A. Cohen, MD Position and Institution: Medical Director of the Center for Traumatic Stress in Children and Adolescents at Allegheny General Hospital, Professor of Psychiatry at Drexel University College of Medicine Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Clinical Child and Family Psychology Review Other: PubMed database, funded by NIMH and SAMHSA
Date and Citation History	Date of publication: 2009 Cited By: 89
Stated Purpose or Research Question	“In order to capitalize on the small funding and still be able to inform triage efforts, the project was designed to randomize students to either CBITs or TF-CBT, and examine which factors successfully predicted positive response to which treatment.” (p. 58)
Author’s Conclusion	“PFDL could be a prototype for providing stepped-care mental health screening and treatment for large numbers of significantly affected children after a community-wide disaster, although empirical data are still needed to back up its components.” (p. 62)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This article explained a “Stepped Trauma Pathway” and reviewed the process of assessing for trauma and implanting two types of evidence-based trauma interventions. There are several outcomes from this study that could relate to answering my EBP question regarding health and participation.
Overall Quality of Article	Overall Quality of Article: Good/Moderate Rationale: The quality appears to be in between moderate and good because the study’s authors are well-established, the journal is credible, and it is relatively recent. There is good information, but it is incomplete. After realizing this study was not fully completed, I did some digging and believe that the following article is an updated study of the original project and would be of better quality and considered “Good”. <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2860874/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2860874/</a>

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: non-randomized intervention study
APA Reference	Barto, B., Bartlett, J.D., Von Ende, A., Bodian, R., Noroña, C.R., Griffin, J., ... Montagna, C. (2018). The impact of a statewide trauma-informed child welfare initiative on children’s permanency and maltreatment outcomes. <i>Child Abuse &amp; Neglect</i> , 81, 149–160. doi: 10.1016/j.chiabu.2018.04.023
Abstract	“This article presents findings of a state-wide trauma informed child-welfare initiative with the goal of improving well-being, permanency and maltreatment outcomes for traumatized children. The Massachusetts Child Trauma Project (MCTP), funded by the Administration of Children and Families, Children's Bureau was a multi-year project implementing trauma-informed care into child welfare service delivery. The project's implementation design included training and consultation for mental health providers in three evidence-based treatments and training of the child-welfare workforce in trauma-informed case work practice. The learning was integrated between child-welfare and mental health with Trauma Informed Leadership Teams which included leaders from both systems and the greater community. These teams developed incremental steps toward trauma-informed system improvement. This study evaluated whether MCTP was associated with reductions in child abuse and neglect, improvements in placement stability, and higher rates of permanency during the first year of implementation. Children in the intervention group had fewer total substantiated reports of maltreatment, including less physical abuse and neglect than the comparison group by the end of the intervention year. However, children in the intervention group had more maltreatment reports (substantiated or not) and total out-of-home placements than did their counterparts in the comparison group. Assignment to MCTP, however, was not associated with an increase in kinship care or adoption. Overall, the results are promising in reinforcing the importance of mobilizing communities toward improvements in child-welfare service delivery.” (p. 149)
Author	Credentials: Beth Barto, MS, LMHC, CEO Position and Institution: CEO at LUK Crisis Center Inc. Publication History in Peer-Reviewed Journals: Moderate
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Child Abuse & Neglect Other: PubMed database, funded by Administration for Children and Families, Children’s Bureau
Date and Citation History	Date of publication: 2018 Cited By: 16
Stated Purpose or Research Question	“The current study examined whether the MCTP systemic intervention was associated with placement stability, permanency, and the prevention of child abuse and neglect recurrence once children enter the child welfare system” (p. 151)
Author’s Conclusion	“Specifically, our results revealed that, compared to children who were served by child welfare offices not participating in MCTP, children served by child welfare offices participating were: 12% less likely to experience physical abuse, 14% less likely to experience neglect, and 15% less likely to have a maltreatment report of any type. Children in the intervention group also were 16% less likely to be reported as maltreated when they had no prior reports of maltreatment and 4% more likely not to have been reported as maltreated when they had a prior report of maltreatment compared to comparison children in areas of the state that did not receive MCTP.” (p. 156)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: The article is relevant to the EBP question because it addresses a population, child welfare, and gathered evidence concerning the outcomes of the intervention (MCTP) on placement stability, permanency, child maltreatment.
Overall Quality of Article	Overall Quality of Article: Good Rationale: This recently published study is of good quality because it includes data gathered from a large sample size over time and has a comparison group. The article has also been cited in other peer-reviewed articles.

Type of article	Overall Type: Primary research study Specific Type: Mixed methods, randomized control trial
APA Reference	Deblinger E, Mannarino AP, Cohen JA, Runyon MK, Steer RA, Deblinger, E., ... Steer, R. A. (2011). Trauma-focused cognitive behavioral therapy for children: impact of the trauma narrative and treatment length. <i>Depression &amp; Anxiety (1091-4269)</i> , 28(1), 67–75. <a href="https://doi.org/10.1002/da.20744">https://doi.org/10.1002/da.20744</a>
Abstract	“Background: Child sexual abuse (CSA) is associated with the development of a variety of mental health disorders, and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is an established treatment for children who have experienced CSA. However, there are questions about how many TF-CBT sessions should be delivered to achieve clinical efficacy and whether a trauma narrative (TN) component is essential. This study examined the differential effects of TF-CBT with or without the TN component in 8 versus 16 sessions. Methods: Two hundred and ten children (aged 4-11 years) referred for CSA and posttraumatic stress disorder symptoms were randomly assigned to one of the four treatment conditions: 8 sessions with no TN, 8 sessions with TN, 16 sessions with no TN, and 16 sessions with TN. Results: Mixed-model ANCOVAs demonstrated that significant post treatment improvements had occurred with respect to 14 outcome measures across all conditions. Significant main and interactive effect differences were found across conditions with respect to specific outcomes. Conclusions: TF-CBT, regardless of the number of sessions or the inclusion of a TN component, was effective in improving participant symptomatology as well as parenting skills and the children’s personal safety skills. The eight session condition that included the TN component seemed to be the most effective and efficient means of ameliorating parents’ abuse-specific distress as well as children’s abuse-related fear and general anxiety. On the other hand, parents assigned to the 16 session, no narrative condition reported greater increases in effective parenting practices and fewer externalizing child behavioral problems at post treatment.” (p. 1)
Author	Credentials: PhD Position and Institution: CARES Institute Publication History in Peer-Reviewed Journals: Moderate
Publication	Type of publication: Scholarly peer reviewed Publisher: John Wiley & Sons, Inc.
Date and Citation History	2011 Google Scholar Cited By: 368
Stated Purpose or Research Question	“The purpose of this study was to examine the differential effects of TF-CBT with or without the TN component delivered in 8 versus 16 sessions to young CSA survivors (4–11 years of age) and their no offending parents. Specifically, the study was designed to ascertain whether the severity of the PTSD, internalizing, externalizing, depressive, and anxiety symptoms of the children along with their levels of sexualized behaviors, fear, shame, and body safety skills would be comparable across treatment conditions after completing treatment. In addition, the parents’ levels of depression, emotional distress about their children’s sexual abuse, and parenting practices were also compared.” (p. 68)
Author’s Conclusion	“The alternative TF-CBT formats examined in this investigation all produced positive outcomes, with some differential responses depending on the outcome of interest. The TN component seems to be particularly important in effectively and efficiently reducing a child’s abuse-related fear and general anxiety, as well as alleviating parental abuse-specific distress. On the other hand, 16 sessions of TF-CBT treatment without the TN component seems to lead to the most improvement with respect to parenting practices and fewer externalizing child behavior problems.” (p. 74)
Overall Relevance to EBP Question	Overall Relevance to EBP Question: Moderate to good relevance This study is directly related to the effectiveness of TF-CBT on children who experienced child sexual abuse. There were positive outcomes for different formats of TF-CBT.
Overall Quality of Article	Overall Quality of Article: Good Author has several publications. Peer-reviewed. Publication within the last 10 years.

	Overview of Article
Type of article	Overall Type: Primary Research Study Specific Type: Non-randomized controlled trial
APA Reference	Weissbecker, I., & Clark, C. (2007). The impact of violence and abuse on women’s physical health: Can trauma-informed treatment make a difference? <i>Journal of Community Psychology</i> , 35(7), 909–923.
Abstract	“A history of traumatic experiences has been associated with poor physical health. This study examined associations between trauma and physical health, as well as changes in physical health over time, in women with co-occurring disorders and histories of violence who received either integrated trauma-informed services or usual care. Results revealed that women who had experienced more severe trauma also suffered worse physical health and were more likely to engage in poor health behaviors. Receiving behavioral health care services was associated with improved physical health and health behaviors. Predictors of physical health improvements included reduced interpersonal abuse, reduced severity of posttraumatic symptoms, improved health behaviors, and adequate access to medical care. Implications for primary, secondary, and tertiary prevention are discussed.” (p. 999)
Author	Credentials: Ph.D., MPH Position and Institution: Global Mental Health and Psychosocial Advisor. Mindfulness and Biobehavioral Health Research Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: Peer Reviewed Publisher: Wiley InterScience Other: Journal of Community Psychology
Date and Citation History	Date of publication: 2007 Cited By: Google Scholar Cited By: 40
Stated Purpose or Research Question	There were three hypotheses in this study: Hypothesis A: More severe trauma and trauma symptoms will be associated with poorer physical health, poorer health behaviors as measured by smoking and more medical services utilization. (p. 119) Hypothesis B. Women who receive a behavioral health intervention, and women in the integrated intervention group in particular will show improvements in physical health over time. (p. 119) Hypothesis C. Changes in posttraumatic symptoms, health behaviors, alcohol and drug use, access to medical care and interpersonal abuse will predict changes in physical health. (p. 119)
Author’s Conclusion	“Our findings suggest that behavioral interventions not only reduce substance use and improve mental health (Cocozza et al., 2005; Morrissey et al., 2005) but may also improve health behaviors and physical health. The number of interrelationships between trauma and health make a case for a multifaceted approach that decreases the impact of trauma on physical health and reduces the associated social and economic costs to the individual and to society, as well as trauma’s personal costs to the survivor.” (p. 921)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: Since our EBP question is looking for trauma-informed interventions this study can partially answer our question with hypothesis. We can see if behavioral health intervention or integrated intervention group helps the women with their physical health.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: Peer reviewed. Study is over ten years.

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Quality improvement project
APA Reference	Aremu, B., Hill, P. D., McNeal, J. M., Petersen, M. A., Swanberg, D., & Delaney, K. R. (2018). Implementation of trauma-informed care and brief solution-focused therapy: A quality improvement project aimed at increasing engagement on an inpatient psychiatric unit. <i>Journal of Psychosocial Nursing and Mental Health Services</i> , 56(8), 16-22. <a href="https://doi.org/10.3928/02793695-20180305-02">https://doi.org/10.3928/02793695-20180305-02</a>
Abstract	“Addressing tense and escalating situations with noncoercive measures is an important element of inpatient psychiatric treatment. Although restraint rates are frequently monitored, the use of pro re nata (PRN) intramuscular (IM) injections to address agitation is also an important indicator. In 2015, at the current study site, a significant increase was noted in PRN IM medication use despite unit leadership’s efforts to build a culture of trauma-informed care (TIC). The purpose of the current quality improvement project was to educate staff on methods to incorporate TIC into daily practice and the use of brief solution-focused therapy techniques in escalating situations. Measurement of attitudes toward patient aggression and engagement with patients followed two waves of staff education. Upon completion of the project, a decrease in PRN IM medications, improvement in staff attitudes toward patient aggression, and improved sense of staff competency in handling tense situations were noted.” (p. 16)
Author	Credentials: BSN Position and Institution: Staff Nurse (graduate student), Rush University Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: Peer-reviewed Journal Publisher: Journal of Psychosocial Nursing and Mental Health Services
Date and Citation History	Date of publication: 3/6/2018 Cited By: 3
Stated Purpose or Research Question	“The purpose of the current quality improvement project was to train new nursing staff and reinforce with seasoned staff how to incorporate TIC engagement principles in their daily practice.” (p. 17)
Author’s Conclusion	“The study site is committed to TIC and patient engagement. The effort to increase staff competency in collaborative strategies and training to improve staff’s confidence in managing aggression will continue. Although there has been a great deal of conjecture by clinical researchers regarding the effectiveness of PRN IM medication use and safe methods for the management of aggression on adult behavioral health units, it is only in the past decade that there have been well-designed studies available to address this issue. Although some of the results of this initial effort are disappointing, the commitment to quality patient care persists.”(p. 21)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: This article loosely relates to our EBP question as it discusses treatment for individuals with trauma, but it is not necessarily about trauma-informed care specifically.
Overall Quality of Article	Overall Quality of Article: Good Rationale: This article is peer-reviewed and scholarly written in the format of a proper study article.



	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Mixed methods case study. Participatory action research
APA Reference	Baker, C. N., Brown, S. M., Wilcox, P., Verlenden, J. M., Black, C. L., & Grant, B. E. (2018). The implementation and effect of trauma-informed care within residential youth services in rural Canada: A mixed methods case study. <i>Psychological Trauma: Theory, Research, Practice, and Policy</i> , 10(6), 666-674. doi:10.1037/tra0000327
Abstract	“Objective: The prevalence and associated risks of trauma have led youth-serving institutions to adopt trauma-informed care (TIC). A limited research base has linked TIC with improved outcomes. Associations between TIC and vicarious traumatization (VT) are even less commonly studied. The purpose of this case study is to evaluate the implementation and effect of TIC within 1 residential youth services division in rural Canada using the curriculum-based Risking Connection (RC; Saakvitne et al., 2001) and Restorative Approach (RA; Wilcox, 2012) trauma training programs, with a focus on VT. Method: We used an explanatory sequential mixed methods design and a participatory action research approach to evaluate the implementation and effect of RC and RA. Study 1, the quantitative program evaluation, used a prepost design to evaluate the effect of RC and RA on staff. Study 2, the qualitative study, used participant observations and interviews to develop a deeper understanding the quantitative findings. Results: This study replicated previous findings that RC improves attitudes favorable to TIC but found that staff experience of VT increased after TIC training. Qualitative findings suggested that the division was successfully implementing TIC and that increased awareness and discussion of VT were potentially responsible for increases in VT scores. Conclusions: This case study documents improvements in staff attitudes favorable to TIC post-RC and RA and presents an in-depth analysis of TIC implementation. The study also highlights the complicated relationship between TIC implementation and staff experience of VT. Finally, this study provides a blueprint for conducting program evaluations of TIC.” (p. 666)
Author	Credentials: Ph.D. Position and Institution: Department of Psychology, Tulane University (New Orleans, US) Publication History in Peer-Reviewed Journals: Extensive history (20 publications)
Publication	Type of publication: Scholarly, peer-reviewed article Publisher: Educational Publishing Foundation (US)
Date and Citation History	Date of publication: November 2018 Cited By: 4
Stated Purpose or Research Question	“The purpose of this case study is to evaluate the implementation and effect of TIC within 1 residential youth services division in rural Canada using the curriculum-based Risking Connection (RC; Saakvitne et al., 2001) and Restorative Approach (RA; Wilcox, 2012) trauma training programs, with a focus on VT.” (p. 666)
Author’s Conclusion	“Conclusions: This case study documents improvements in staff attitudes favorable to TIC post-RC and RA and presents an in-depth analysis of TIC implementation. The study also highlights the complicated relationship between TIC implementation and staff experience of VT. Finally, this study provides a blueprint for conducting program evaluations of TIC.” (p. 666)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This study provides an in-depth analysis of TIC implementation to give us a better understanding of what trauma informed care looks like. It also provides evidence of improvements in staff attitudes favorable to TIC.
Overall Quality of Article	Overall Quality of Article: Good Rationale: This study was conducted by researchers who have extensive publication history of peer-reviewed articles. It was also published within the past year by a reliable, scholarly and peer reviewed journal.

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Clinical Trial, Empirical Study, Quantitative Study
APA Reference	Jensen, T. K., Holt, T., Ormhaug, S. M., Egeland, K., Granly, L., Hoaas, L. C., ... Wentzel-Larsen, T. (2013). A randomized effectiveness study comparing trauma-focused cognitive behavioral therapy with therapy as usual for youth. <i>Journal of Clinical Child &amp; Adolescent Psychology</i> ,43(3), 356-369. doi:10.1080/15374416.2013.822307
Abstract	“The efficacy of trauma-focused cognitive behavioral therapy (TF-CBT) has been shown in several randomized controlled trials. However, few trials have been conducted in community clinics, few have used therapy as usual (TAU) as a comparison group, and none have been conducted outside of the United States. The objective of this study was to evaluate the effectiveness of TF-CBT in regular community settings compared with TAU. One hundred fifty-six traumatized youth ( <i>M</i> age = 15.1 years, range = 10-18; 79.5% girls) were randomly assigned to TF-CBT or TAU. Intent-to-treat analysis using mixed effects models showed that youth receiving TF-CBT reported significantly lower levels of posttraumatic stress symptoms (est. = 5.78, <i>d</i> = 0.51), 95% CI [2.32, 9.23]; depression (est. = 7.00, <i>d</i> = 0.54), 95% CI [2.04, 11.96]; and general mental health symptoms (est. = 2.54, <i>d</i> = 0.45), 95% CI [0.50, 4.58], compared with youth in the TAU group. Youth assigned to TF-CBT showed significantly greater improvements in functional impairment (est. = -1.05, <i>d</i> = -0.55), 95% CI [-1.67, -0.42]. Although the same trend was found for anxiety reduction, this difference was not statistically significant (est. = 4.34, <i>d</i> = 0.30), 95% CI [-1.50, 10.19]. Significantly fewer youths in the TF-CBT condition were diagnosed with posttraumatic stress disorder compared to youths in the TAU condition, $\chi^2(1, N = 116) = 4.61, p = .031, \text{Phi} = .20$ ). Findings indicate that TF-CBT is effective in treating traumatized youth in community mental health clinics and that the program may also be successfully implemented in countries outside the United States.” (p. 356)
Author	Credentials: Ph.D. Position and Institution: Department of Psychology, University of Oslo, Postboks, Norway Publication History in Peer-Reviewed Journals: Extensive (Over 20 publications)
Publication	Type of publication: Scholarly, peer-reviewed article Publisher: Taylor & Francis (United Kingdom)
Date and Citation History	Date of publication: May 2014 Cited By: 151
Stated Purpose or Research Question	“The objective of this study was to evaluate the effectiveness of TF-CBT in regular community settings compared with TAU.” (p. 356)
Author’s Conclusion	“Findings indicate that TF-CBT is effective in treating traumatized youth in community mental health clinics and that the program may also be successfully implemented in countries outside the United States.” (p. 356)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This article found trauma focused-cognitive behavioral therapy to be an effective treatment option for treating traumatized youth in community mental health clinics and even outside the United States. “Participants in the TF-CBT condition scored significantly lower than those in the therapy as usual condition on depressive and anxiety symptoms.” (p. 367)
Overall Quality of Article	Overall Quality of Article: Good Rationale: This article has been cited 151 times by other researchers according to Google Scholar. The authors have extensive publishing history in scholarly, peer-reviewed journals.

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Randomized controlled trial
APA Reference	Salloum, A., & Overstreet, S. (2012). Grief and trauma intervention for children after disaster: Exploring coping skills versus trauma narration. <i>Behaviour Research and Therapy</i> , 50(3), 169-179. doi:https://doi.org/10.1016/j.brat.2012.01.001
Abstract	“This study evaluated the differential effects of the Grief and Trauma Intervention (GTI) with coping skills and trauma narrative processing (CN) and coping skills only (C). Seventy African American children (6-12 years old) were randomly assigned to GTI-CN or GTI-C. Both treatments consisted of a manualized 11-session intervention and a parent meeting. Measures of trauma exposure, posttraumatic stress symptoms, depression, traumatic grief, global distress, social support, and parent reported behavioral problems were administered at pre, post, 3 and 12 months post intervention. In general, children in both treatment groups demonstrated significant improvements in distress related symptoms and social support, which, with the exception of externalizing symptoms for GTI-C, were maintained up to 12 months post intervention. Results suggest that building coping skills without the structured trauma narrative may be a viable intervention to achieve symptom relief in children experiencing trauma-related distress. However, it may be that highly distressed children experience more symptom relief with coping skills plus narrative processing than with coping skills alone. More research on the differential effects of coping skills and trauma narration on child distress and adaptive functioning outcomes is needed.” (p. 169)
Author	Credentials: PhD, LCSW Position and Institution: Professor, Department of Pediatrics, University of South Florida School of Social Work Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Elsevier Other: Elsevier is the largest database of peer-reviewed literature
Date and Citation History	Date of publication: 2012 Google Scholar Cited By: 90
Stated Purpose or Research Question	“The purpose of this study was to 1) examine the differential effects of GTI with coping skills plus trauma narrative processing to GTI with only coping skills on distress, behavior, social support, and treatment satisfaction over time, and 2) to determine if treatment gains in both conditions were maintained at 3 and 12 months post intervention.” (p. 170)
Author’s Conclusion	“The total percentage decrease for children within the clinical range from pre-intervention to 12 month follow-up was greater for children in the GTI-CN than GTI-C for posttraumatic stress (89% decrease versus 77%), depression (100% decrease versus 78%) and internalizing symptoms (75% decrease versus no change).” (p. 178)
Overall Relevance to your EBP Question	Overall Relevance to EBP Question: Moderate quality Rationale: This study evaluated the differential effects of the Grief and Trauma Intervention (GTI) with coping skills and trauma narrative processing (CN) and coping skills only (C), but targeted the specific population of Hurricane Katrina victims four years post-disaster which is a different population than the EBP question.
Overall Quality of Article	Overall Quality of Article: Moderate quality Rationale: Author is well-established, with her GTI intervention now listed as evidence-based practice by SAMHSA. Elsevier journal is a trustworthy publisher. Publication within the last 10 years.

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Quasi-experimental nonequivalent control group design using an intent-to-treat model
APA Reference	Gatz, M., Brown, V., Hennigan, K., Rechberger, E., O'Keefe, M., Rose, T., & Bjelajac, P. (2007). Effectiveness of an integrated, trauma-informed approach to treating women with co-occurring disorders and histories of trauma: The Los Angeles site experience. <i>Journal of Community Psychology, 35</i> (7), 863-878. doi:10.1002/jcop.20186
Abstract	“Effectiveness of an integrated trauma-informed approach to treating women with co-occurring disorders and histories of trauma was evaluated. Baseline and 12-month assessments were completed by 136 intervention- and 177 comparison-group women. The intervention group received Seeking Safety, a trauma-specific group treatment focusing on safety and coping skills, in the context of integrated substance abuse and mental health services. The comparison group received similar services but not trauma-specific group treatment. Intervention women showed significantly better treatment retention over three months and greater improvement on posttraumatic stress symptoms and coping skills. On most outcomes, those who completed treatment improved more than those who discontinued. Improvements on symptoms of distress and drug problem severity were partially mediated by gains in coping skills.” (p. 863-864)
Author	Credentials: PhD Position and Institution: Professor of Psychology, Gerontology and Preventive Medicine at the University of Southern California Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Wiley Periodicals, Inc. Other: n/a
Date and Citation History	Date of publication: 2007 Google Scholar Cited By: 115
Stated Purpose or Research Question	“We hypothesized that, compared with women in the comparison group, women in the intervention group would show better treatment retention and greater improvement on the key cross-site outcomes and on a sites specific index of coping skills. We further hypothesized that these differences would be more evident for women who completed treatment than for those who did not complete treatment. Finally, we hypothesized that changes in coping skills would mediate improvement on the key cross-site outcomes over time.” (p. 865)
Author’s Conclusion	“The findings of this study provide encouraging evidence that a trauma-informed integrated treatment program can be successful in meeting the needs of women with co-occurring disorders and histories of trauma by increasing their use of coping skills.” (p. 876)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: Trauma-informed interventions such as Seeking Safety are designed to focus on trauma survivors’ core issues. One aspect of this intervention is encouraging the women to find meaning in their lives, which aligns with the EBP question of increasing well-being and quality of life.
Overall Quality of Article	Overall Quality of Article: Good Rationale: Established author. Reputable journal and publisher. Publication within the last 15 years.

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Retrospective pretest/posttest design
APA Reference	Cerny, S., Maassen, A., & Crook, K. (2019). Occupational therapy intervention for survivors of human trafficking. <i>Occupational Therapy in Mental Health</i> , 1-13. doi: 10.1080/0164212X.2018.1557579
Abstract	“Successful life participation after leaving a sex trafficking situation is complex and challenging for a person who has been trafficked. The purpose of this report is to outline the occupational therapy process for survivors of human trafficking, including review of theoretical frameworks and evidence guiding intervention and a discussion of the outcomes of intervention. After 12 weeks of occupational therapy intervention, all clients in this study reported an overall improvement in performance and satisfaction in their prioritized areas of occupation. There was a significant difference in the evaluation and reevaluation scores of performance and satisfaction (p=04).” (p. 287)
Author	Credentials: OTD Position and Institution: Assistant professor of Occupational therapy at the University of South Dakota Publication History in Peer-Reviewed Journals: Moderate
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Taylor & Francis Group Other: this publisher is based in the UK
Date and Citation History	Date of publication: 2019 Google Scholar Cited By: 0
Stated Purpose or Research Question	“The purpose of this report is to outline the occupational therapy process for survivors of human trafficking, including review of theoretical frameworks and evidence guiding intervention and a discussion of the outcomes of intervention.” (p. 287)
Author’s Conclusion	“This report has highlighted the damaging effects of sex trafficking on survivors’ occupational performance and the possible effectiveness of occupational therapy intervention. In addition, this study supports the role of occupational therapy as a component of a multidisciplinary team supporting a survivor’s recovery. Knowledge is very limited in the area of recovery from the trauma of sex trafficking and the role of occupational therapy; however, it can be tentatively concluded that client-centered, occupation based therapy may be effective in supporting recovery.” (p. 296)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This article mentions specifically why a trauma-informed approach should be used by OTs who are working with victims of human trafficking. The ultimate goal of the intervention was successful life participation, which aligns with our EBP question.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: The author has contributed to 8 publications and has participated in 10 presentations. No citations on google scholar is concerning. Reputable journal. Publication of the current year.

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Randomized Controlled Trial with waitlist group
APA Reference	Harris, J. I., Erbes, C. R., Engdahl, B. E., Thuras, P., Murray-Swank, N., Grace, D., ... & Malec, C. (2011). The effectiveness of a trauma focused spiritually integrated intervention for veterans exposed to trauma. <i>Journal of Clinical Psychology, 67</i> (4), 425-438. doi: 10.1002/jclp.20777
Abstract	“Building Spiritual Strength (BSS) is an 8-session, spiritually integrated group intervention designed to address religious strain and enhance religious meaning making for military trauma survivors. It is based upon empirical research on the relationship between spirituality and adjustment to trauma. To assess the intervention’s effectiveness, veterans with histories of trauma who volunteered for the study were randomly assigned to a BSS group (n526) or a wait-list control group (n528). BSS participants showed statistically significant reductions in PTSD symptoms based on self-report measures as compared with those in a wait-list control condition. Further research on spiritually integrated interventions for trauma survivors is warranted.” (p. 425)
Author	Credentials: PhD Position and Institution: Licensed Counseling Psychologist at the VA Medical Center in Minneapolis. Received PhD from Texas Tech University Publication History in Peer-Reviewed Journals: Moderate
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Wiley Periodicals, Inc. Other: n/a
Date and Citation History	Date of publication: 2011 Google Scholar Cited By: 125
Stated Purpose or Research Question	“Hypothesis 1 was that Building Spiritual Strength, a spiritually integrated intervention for military veteran trauma survivors, would be effective in reducing symptoms of PTSD. Hypothesis 2 was that Building Spiritual Strength would be more effective for ethnic minority veterans than for those from the majority ethnic group.” (p. 426)
Author’s Conclusion	“Results indicated that participation in the BSS protocol results in a statistically significant reduction in PTSD symptoms.” (p. 435)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: Spiritually oriented intervention is a logical approach to increasing the health and participation of veterans living with effects from the war.
Overall Quality of Article	Overall Quality of Article: Good Rationale: Established author. Reputable journal and publisher. Publication within the past 10 years.

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Secondary analysis of data from a completed randomized controlled trial
APA Reference	Kane, J. C., Murray, L. K., Cohen, J., Dorsey, S., Skavenski van Wyk, S., Galloway Henderson, J.,... Bolton, P. (2016). Moderators of treatment response to trauma-focused cognitive behavioral therapy among youth in Zambia. <i>Journal of Child Psychology and Psychiatry, and Allied Disciplines</i> , 57(10), 1194-1202. doi: 10.1111/jcpp.12623
Abstract	“Background: The effectiveness of mental health interventions such as trauma-focused cognitive behavioral therapy (TF-CBT) may vary by client, caregiver, and intervention-level variables, but few randomized trials in low- and middle-income countries (LMIC) have conducted moderation analyses to investigate these characteristics. This study explores moderating factors to TF-CBT treatment response among a sample of orphans and vulnerable children (OVC) in Zambia. Methods: Data were obtained from a completed randomized trial of TF-CBT among 257 OVC in Zambia. Trauma symptoms and functioning were measured at baseline and following the end of treatment. Mixed effects regression models were estimated for each moderator of interest: gender, age, number of trauma types experienced, history of sexual abuse, orphan status, primary caretaker, school status, and parental involvement in treatment. Results: Treatment effectiveness was moderated by history of sexual abuse with greater reductions in both outcomes (trauma, $p < .05$ ; functioning, $p < .01$ ) for those that experienced sexual abuse. Primary caretaker was also a moderator with greater trauma reductions in those who identified their mother as the primary caretaker ( $p < .01$ ), and better functioning in those that identified their father as the primary caretaker ( $p < .05$ ). Nonorphans and single orphans (mother alive) showed greater reduction in functional impairment ( $p < .01$ ) compared with double orphans. There was no significant moderator effect found by gender, age, number of trauma types, school status, or caregiver participation in treatment. Conclusions: This study suggests that TF-CBT was effective in reducing trauma symptoms and functional impairment among trauma-affected youth overall and that it may be particularly effective for survivors of child sexual abuse and children whose primary caretaker is a biological parent. Scale-up of TF-CBT is warranted given the wide range of effectiveness and prevalence of child sexual abuse. Future randomized trials of interventions in LMIC should power for moderation analyses in the study design phase when feasible. Keywords: Posttraumatic stress disorder; orphans and vulnerable children; Zambia; trauma-focused cognitive behavioral therapy; moderation analysis.” (p. 1194)
Author	Credentials: MD Position and Institution: Department of Mental Health, Johns Hopkins Bloomberg School of Public Health Publication History in Peer-Reviewed Journals: moderate
Publication	Type of publication: scholarly peer-reviewed Publisher: The Association for Child and Adolescent Mental Health Other: Journal of The Association for Child and Adolescent Mental Health
Date and Citation History	Date of publication: 2016 Google Scholar Cited By: 11
Stated Purpose or Research Question	“Based on previous studies, we hypothesize that treatment effects will moderated by gender, sexual abuse history, number of traumas experienced, and school status with larger effects among: (a) females, (b) those who experienced sexual abuse, (c) those who experienced a greater number of trauma types, and (d) those currently in school.” (p. 1195)
Author’s Conclusion	“This study found that youth who reported having experienced sexual abuse (among other traumatic events) significantly benefitted from the intervention.” (p. 1200)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Relevance Rationale: This study is directly related to trauma-focused intervention on individuals who have suffered various trauma experiences and the implications of intervention on functional impairments.
Overall Quality of Article	Overall Quality of Article: Good quality Rationale: Publication within the last 5 years. Reputable journal and publisher.

	Overview of Article
Type of article	Overall Type: Primary Research Study Specific Type: Randomized Controlled Trial
APA Reference	O’Callaghan, P., McMullen, J., Shannon, C., Rafferty, H., & Black, A. (2013). A randomized controlled trial of trauma-focused cognitive behavioral therapy for sexually exploited, war-affected Congolese girls. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i> , 52(4), 359-369. doi: 10.1016/j.jaac.2013.01.013
Abstract	“Objective: To assess the efficacy of trauma-focused cognitive behavioral therapy (TF-CBT) delivered by nonclinical facilitators in reducing posttraumatic stress, depression, and anxiety and conduct problems and increasing prosocial behavior in a group of war-affected, sexually exploited girls in a single-blind, parallel-design, randomized,+ controlled trial. Method: Fifty- two 12- to 17-year-old, war-affected girls exposed to rape and inappropriate sexual touch in the Democratic Republic of Congo were screened for trauma, depression and anxiety, conduct problems, and prosocial behavior. They were then randomized to a 15 session, group-based, culturally modified TF-CBT (n = 24) group or a wait-list control group (n = 28). Primary analysis, by intention-to-treat, involving all randomly assigned participants occurred at pre- and postintervention and at 3-month follow-up (intervention group only). Results: Compared to the wait list control, the TF-CBT group experienced significantly greater reductions in trauma symptoms (F1,49 = 52.708, $p < 0 \cdot 001$ , $\chi^2p = 0.518$ ). In addition, the TF-CBT group showed a highly significant improvement in symptoms of depression and anxiety, conduct problems, and prosocial behavior. At 3-months follow-up the effect size (Cohen's d) for the TF-CBT group was 2.04 (trauma symptoms), 2.45 (depression and anxiety), 0.95 (conduct problems), and -1.57 (prosocial behavior). Conclusions: A group-based, culturally modified, TF-CBT intervention delivered by nonclinically trained Congolese facilitators resulted in a large, statistically significant reduction in posttraumatic stress symptoms and psychosocial difficulties among war-affected girls exposed to rape or sexual violence. Clinical trial registration information-An RCT of TF-CBT with sexually-exploited, war-affected girls in the DRC.” (p. 359)
Author	Credentials: Drs. Position and Institution: School of Psychology, Queen’s University Publication History in Peer-Reviewed Journals: extensive
Publication	Type of publication: scholarly peer-reviewed journal Publisher: Elsevier Other: NA
Date and Citation History	Date of publication: 2013 Google Scholar Cited By: 160
Stated Purpose or Research Question	“The primary research question is whether a culturally modified TF-CBT intervention delivered by nonclinical facilitators would lead to a reduction in posttraumatic stress symptoms among war-affected survivors of sexual violence and exploitation in the Democratic Republic of Congo.” “The secondary research questions examined the effects of the intervention on symptoms of depression and anxiety, conduct problems, and prosocial behavior.” (p. 360)
Author’s Conclusion	“Findings show that group-based, culturally modified, TF-CBT significantly reduced psychological distress and psychosocial difficulties among this population.” (p. 365)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good relevance Rationale: This study looked at one type of trauma-informed intervention on those who had been affected by trauma, so it is relevant. It also talked about in the results section a reduction in psychosocial difficulties which could apply to the part of our question about well-being.
Overall Quality of Article	Overall Quality of Article: Good Quality Rationale: Reputable journal and publisher. Published within the last 10 years.



	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Randomized Controlled Trial
APA Reference	Miner, A., Kuhn, E., Hoffman, J. E., Owen, J. E., Ruzek, J. I., & Taylor, C. B. (2016). Feasibility, acceptability, and potential efficacy of the PTSD Coach app: A pilot randomized controlled trial with community trauma survivors. <i>Psychological Trauma: Theory, Research, Practice, and Policy</i> , 8(3), 384. doi: 10.1037/tra0000092
Abstract	“Objective: Posttraumatic stress disorder (PTSD) is a major public health concern. Although effective treatments exist, affected individuals face many barriers to receiving traditional care. Smartphones are carried by nearly 2 thirds of the U.S. population, offering a promising new option to overcome many of these barriers by delivering self-help interventions through applications (apps). As there is limited research on apps for trauma survivors with PTSD symptoms, we conducted a pilot feasibility, acceptability, and potential efficacy trial of PTSD Coach, a self-management smartphone app for PTSD. Method: A community sample of trauma survivors with PTSD symptoms (N 49) were randomized to 1 month using PTSD Coach or a waitlist condition. Self-report assessments were completed at baseline, postcondition, and 1-month follow-up. Following the postcondition assessment, waitlist participants were crossed-over to receive PTSD Coach. Results: Participants reported using the app several times per week, throughout the day across multiple contexts, and endorsed few barriers to use. Participants also reported that PTSD Coach components were moderately helpful and that they had learned tools and skills from the app to manage their symptoms. Between conditions effect size estimates were modest (d 0.25 to 0.33) for PTSD symptom improvement, but not statistically significant. Conclusions: Findings suggest that PTSD Coach is a feasible and acceptable intervention. Findings regarding efficacy are less clear as the study suffered from low statistical power; however, effect size estimates, patterns of within group findings, and secondary analyses suggest that further development and research on PTSD Coach is warranted.” (p. 384)
Author	Credentials: Psy.D. Position and Institution: PGSP-Stanford Psy.D. Consortium, Palo Alto University and Sandford University School of Medicine Publication History in Peer-Reviewed Journals: limited
Publication	Type of publication: scholarly peer-reviewed journal Publisher: Educational Publishing Foundation (US) Other: NA
Date and Citation History	Date of publication: 2016 Google Scholar Cited By: 55
Stated Purpose or Research Question	“Therefore, the primary aims of the current study were to explore the feasibility, acceptability, and potential efficacy of PTSD Coach in reducing PTSD symptom severity in a small-scale, randomized pilot study.” “Lastly, we also explored whether baseline PTSD symptom severity related to how much the app was used and whether symptom improvement related to use.” (p. 385)
Author’s Conclusion	“Although the findings are promising, especially from a public health perspective, they suggest that PTSD Coach may only have a modest impact on PTSD symptoms.” (p. 390)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Relevance Rationale: The study is directly related to a trauma intervention but does not specifically state that it is a trauma-informed intervention.
Overall Quality of Article	Overall Quality of Article: Moderate Quality Rationale: Author has not published a large amount of research. Published within the last 10 years.

	Overview of Article
Type of article	Overall Type: Primary Research Study Specific Type: Controlled Trial
APA Reference	Dawson, K., Joscelyne, A., Meijer, C., Steel, Z., Silove, D., & Bryant, R. A. (2018). A controlled trial of trauma-focused therapy versus problem-solving in Islamic children affected by civil conflict and disaster in Aceh, Indonesia. <i>Australian and New Zealand Journal of Psychiatry</i> , 52(3), 253-361. doi: doi/10.1177/0004867417714333
Abstract	“Objective: To evaluate the relative efficacies of trauma-focused cognitive behavior therapy and problem-solving therapy in treating post-traumatic stress disorder in children affected by civil conflict in Aceh, Indonesia. Method: A controlled trial of children with post-traumatic stress disorder (N = 64) randomized children to either five individual weekly sessions of trauma-focused cognitive behavior therapy or problem-solving therapy provided by lay-counselors who were provided with brief training. Children were assessed by blind independent assessors at pretreatment, posttreatment and 3-month follow-up on post-traumatic stress disorder, depression and anger, as well as caregiver ratings of the child’s post-traumatic stress disorder levels. Results: Intent-to-treat analyses indicated no significant linear time × treatment condition interaction effects for post-traumatic stress disorder at follow-up ( $t(129.05) = -0.55, p = 0.58$ ), indicating the two conditions did not differ. Across both conditions, there were significant reductions in post-traumatic stress disorder on self-reported ( $t(131.26) = -9.26, p < 0.001$ ) and caregiver-reported ( $t(170.65) = 3.53, p = 0.001$ ) measures and anger ( $t(127.66) = -7.14, p < 0.001$ ). Across both conditions, there was a large effect size for self-reported post-traumatic stress disorder (cognitive behavior therapy: 3.73, 95% confidence interval = [2.75, 3.97]; problem-solving: 2.68, 95% confidence interval = [2.07, 3.29]). Conclusions: These findings suggest that trauma-focused cognitive behavior therapy and problem-solving approaches are comparably successful in reducing post-traumatic stress disorder and anger in treating mental health in children in a post-conflict setting. This pattern may reflect the benefits of non-specific therapy effects or gains associated with trauma-focused or problem-solving approaches.” (p. 253)
Author	Credentials: PhD Position and Institution: Post-Doctoral Fellow, School of Psychology, University of New South Wales Publication History in Peer-Reviewed Journals: moderate
Publication	Type of publication: scholarly peer-reviewed journal Publisher: The Royal Australian and New Zealand College of Psychiatrists Other: NA
Date and Citation History	Date of publication: 2018 Google Scholar Cited By: 2
Stated Purpose or Research Question	“This superiority trial hypothesized that trauma-focused CBT would result in greater reductions in PTSD, depression and anger than PS because of its proven efficacy in youth affected by mass violence in low- and middle-income settings.” (p. 254)
Author’s Conclusion	“The major finding of the study was that CBT and PS resulted in comparably large decreases in PTSD and anger.” (p. 258)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Relevance Rationale: This study reviewed literature on trauma-informed care but focused solely on anger and depression as it relates to PTSD, so not all functional aspects were taken into consideration.
Overall Quality of Article	Overall Quality of Article: Good Quality Rationale: Published less than 3 years ago. Author has published previous studies and has dedicated her work to trauma-informed care.

**Primary Research Study**

	<b>Overview of Article</b>
Type of article	Overall Type: Primary Research Study Specific Type: Semi-structured Focus Groups
APA Reference	Cox, J., Davies, D. R., Burlingame, G. M., Campbell, J. E., Layne, C. M., & Katzenbach, R. J. (2007). Effectiveness of a trauma/grief-focused group intervention: A qualitative study with war-exposed Bosnian adolescents. <i>International Journal of Group Psychotherapy</i> , 57(3), 319-345. doi: 10.1521/ijgp.2007.57.3.319
Abstract	“The effectiveness and impacts of a school-based, trauma/grief-focused group treatment program for war-exposed youth in Bosnia and Herzegovina were investigated using semistructured focus groups, conducted separately for students and their school counselor group leaders. Overall, students' and leaders' evaluations of the groups were generally positive. General themes of outcomes and impacts perceived by students and group leaders include: acquisition of coping skills and attitudes, willingness to advocate for peers, improved interpersonal relationships, negative impacts, general positive impacts, impacts in the schools, impacts on the group and logistics of the program, and broader impacts on the perception of mental health in the community. The broad positive impacts of this program suggest that trauma/grief-focused group treatment intervention programs targeting trauma-exposed youth may be effective on multiple levels with war-exposed youth and their communities.” (p. 319-320)
Author	Credentials: B.S. Position and Institution: Department of Psychology, Brigham Young University Publication History in Peer-Reviewed Journals: limited
Publication	Type of publication: scholarly peer-reviewed journal Publisher: International Journal of Group Psychotherapy Other: ResearchGate
Date and Citation History	Date of publication: 2007 Google Scholar Cited By: 55
Stated Purpose or Research Question	“We hypothesized that both counselors and students who participated in the intervention program would describe positive impacts not only for themselves, but also positive impacts for the program that reached beyond the scope of those who participated in the groups.” (p. 324)
Author’s Conclusion	“The results of this study indicate that both students and leaders involved in receiving or delivering a group-based intervention for psychosocial difficulties related to the Bosnian conflict identified the impacts of the program to be both broad in scope and primarily positive. Notably, most negative impacts identified in this evaluation related to either difficulties associated with changing negative stereotypes initially held by school personnel, students, and parents relating to providing or receiving mental health services in schools, or to the counselors’ inability to increase the number of direct beneficiaries.” (p. 335)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Relevance Rationale: This article looked at the effects of a group-based trauma-informed intervention and the impacts of it.
Overall Quality of Article	Overall Quality of Article: Moderate Quality Rationale: Author has published limited research. Published over 10 years ago.

	<b>Overview of Article</b>
Type of article	Overall Type: Review of Research Study Specific Type: Scoping Review
APA Reference	Fraser, K., MacKenzie, D., & Versnel, J. (2017). Complex trauma in children and youth: A scoping review of sensory-based interventions. <i>Occupational Therapy in Mental Health, 33</i> (3), 199-216. doi:10.1080/0164212X.2016.1265475
Abstract	“Emerging evidence in neuroscience indicates exposure to complex trauma in children and youth affects brain development— particularly with the ability to process sensory information. This sensory processing challenge has been shown to negatively impact emotional and self-regulation. A developing area of trauma treatment utilizes sensory-based interventions to target these concerns. A scoping review of the literature indicates there is limited, although promising, evidence for the use of these interventions when used as part of an integrated treatment approach. Occupational therapy is in a unique position to contribute to this area of practice due to a background in sensory-based approaches.” (p. 199)
Author	Credentials: MScOT Position and Institution: Professor, Program in Occupational Therapy, Dalhousie University Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: scholarly peer-reviewed journal Publisher: Taylor & Francis Group Other: this publisher is based in the UK
Date and Citation History	Date of publication: 2017 Google Scholar Cited by: 5
Stated Purpose or Research Question	“This article adds to this work by looking specifically at sensory-based interventions in complex trauma experienced by children and adolescents. It will also incorporate research from other disciplines, such as social work and psychology, utilizing sensory-based approaches.” (p. 202-203)
Author’s Conclusion	“The results of the scoping review show there is limited empirical evidence, but indicates sensory-based interventions are promising and potentially an important component for treatment with children and adolescents with complex trauma.” (p. 213)
Overall Relevance to your EBP Question	Overall Relevance to EBP Question: Moderate Relevance Rationale: Most of the interventions in this article are based on Ayres sensory integration theory, however the large variety of sensory-based interventions reviewed makes it difficult to determine overall effectiveness.
Overall Quality of Article	Overall Quality of Article: Moderate quality Rationale: Author is not very established, but the Taylor & Frances journals are reputable internationally. Publication within the last few years.

	<b>Overview of Article</b>
Type of article	Overall Type: Review of research Specific Type: Systematic review and meta-analysis
APA Reference	Grech, P., Grech, R. (2019). A comparison of narrative exposure therapy and non-trauma focused treatment in post-traumatic stress disorder: A systematic review and meta-analysis. <i>Issues in Mental Health Nursing</i> , 40, 1-11. doi: 10.1080/01612840.2019.1650853
Abstract	<p><b>“Background:</b> Narrative Exposure Therapy (NET) is a relatively new treatment that may be beneficial as a standalone approach or as an adjunct for use in individuals who suffer from simple or complex Posttraumatic Stress Disorder (PTSD).<b>Aims:</b> The main objective of this review was to explore the effectiveness of NET in remediating PTSD symptoms as compared to Non Trauma-Focused-Therapy (NTFT).<b>Methods:</b> A systematic search in Medline, PsycINFO, EMBASE and The Cochrane Central Register of Controlled Trials (CENTRAL) was carried out. Reference lists of papers and grey literature were hand searched. Experimental studies that compare NET to NTFT with no preference to age, gender or nationality of participants that include a baseline and 3-6 month measurement of PTSD outcomes using tools with good psychometric properties were included. The search resulted in 10 randomised controlled trials. Data extraction, collection and analysis was then carried out by the authors. <b>Results:</b> In all of the studies, the difference in the PTSD symptoms’ mean score after 3-6 months between the NET group and the NTFT group was in favour of NET. However, the level of significance was attained in six of the studies only. The overall effect size (standardised mean difference) of the trials is 0.684 in favour of NET (<math>p &lt; .001</math>).<b>Conclusions:</b> NET was shown to be superior to NTFT in post-traumatic stress disorder. The most important recommendations are in relation to research and target the methodological limitations of existing studies in particular the small sample sizes, lack of blindness and inadequate rigour during the trials. More research is needed to further explore the benefits of NET for different populations and trauma-types.” (p. 1)</p>
Author	Credentials: Paulann Grech, BSN, MSc Psychiatry, MSc Health Science, PhD Position and Institution: Lecturer in Department of Mental Health at University of Malta Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Issues in Mental Health Nursing Other: Taylor & Francis journal library
Date and Citation History	Date of publication: Oct 29, 2019 Cited By: 0
Stated Purpose or Research Question	“The main objective of this review was to explore the effectiveness of NET in remediating PTSD symptoms as compared to Non Trauma-Focused-Therapy (NTFT)” (p. 1)
Author’s Conclusion	“NET was shown to be superior to NTFT in post-traumatic stress disorder.” (p. 1)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: The study relates to my EBP question as it determines the effectiveness of a TIC approach called narrative exposure therapy and analyzes evidence from 10 RCT. The outcome of using NET was shown to reduce PTSD symptoms.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: This study is peer-reviewed, relevant, recent, and supports the EBP question; however, I do not have full-text access to this article. The author does not seem well established.

	Overview of Article
Type of article	Overall Type: Review of Research Study Specific Type: Systematic Review
APA Reference	Sullivan, A. L., & Simonson, G. R. (2016). A systematic review of school-based social-emotional interventions for refugee and war-traumatized youth. <i>Review of Educational Research, 86</i> (2), 503-530. doi:10.3102/0034654315609419
Abstract	“Refugees often experience significant psychological distress, but many do not receive necessary services. Among children and youth, most mental health services are provided by schools, so schools are an important service provider for young refugees. We conducted a systemic literature review to synthesize and evaluate the existing research on school-based interventions to improve mental health or social-emotional functioning of students who are refugees, asylum seekers, or immigrants with war trauma. Three types of school-based interventions were identified: cognitive behavioral therapy, creative expression, and multitiered or multimodal models. The review identified several interventions with positive effects, as well as multiple interventions that had null or negative effects. We address the implications of this body of intervention research for practice and research.” (p. 503)
Author	Credentials: PHD, M.A Position and Institution: Professor and Coordinator in School Psychology Program at the University of Minnesota Department of Educational Psychology. Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Peer Reviewed Publisher: SAGE journals Other: Review of Education Research
Date and Citation History	Date of publication: 2106 Cited By: Google Scholar Cited By: 59
Stated Purpose or Research Question	“We systematically reviewed the literature on school-based interventions to improve mental health or social-emotional functioning of refugee, asylum-seeking, and war-traumatized immigrant youth, describing methodological and practical limitations, as well as recommendations for educators.” (p. 509)
Author’s Conclusion	“We uncovered a variety of interventions, most previously established with other populations who have experienced trauma or psychopathology. Effects varied, but in general, the findings suggest that school-based interventions may be effective in reducing students’ trauma-related symptoms and impairment.” (p. 522)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This systematic review covers current school-based interventions for refugee students. They look at the three interventions: cognitive behavioral therapy, creative expression, and multitiered or multimodal models which relates to our EBP question on trauma interventions.
Overall Quality of Article	Overall Quality of Article: Good Quality Rationale: Peer-reviewed. Published in the last ten years. A systematic review.

	Overview of Article
Type of article	Overall Type: Review of Research Study Specific Type: Systematic review
APA Reference	Regehr, C., Alaggia, R., Dennis, J., Pitts, A., & Saini, M. (2013). Interventions to reduce distress in adult victims of rape and sexual violence: A systematic review. <i>Research on Social Work Practice, 23</i> (3), 257-265. doi:10.1177/1049731512474103
Abstract	“Objectives: This article presents a systematic evaluation of the effectiveness of interventions aimed at reducing distress in adult victims of rape and sexual violence. Method: Studies were eligible for the review if the assignment of study participants to experimental or control groups was by random allocation or parallel cohort design. Results: Six studies including 405 participants met eligibility criteria. Meta-analyses revealed that specific cognitive and behavioral interventions (cognitive-processing therapy, prolonged exposure therapy, and eye movement desensitization reprocessing) had a statistically significant effect on posttraumatic stress disorder and depression symptoms in comparison to the control groups. Other outcomes that had demonstrated improvement included anxiety, guilt, and dissociation. Conclusion: Many studies assessing the effectiveness of interventions for decreasing trauma symptoms combine victims of sexual violence in adulthood with other trauma-based samples despite the profound differences in these experiences. This review again points to the need for increased research that focuses specifically on the effectiveness of treatment models for adult victims of sexual violence.” (p. 257)
Author	Credentials: Cheryl Regehr, MSW, PhD Position and Institution: Vice President and Provost for University of Toronto, Professor in the Faculty of Social Work Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Research on Social Work Practice Other: SAGE Publications, funded by the Social Sciences and Humanities Research Council of Canada
Date and Citation History	Date of publication: 2013 Cited By: 31
Stated Purpose or Research Question	“This systematic review examines the effectiveness of interventions to reduce distress that specifically target adult victims of rape and sexual violence.” (p. 258)
Author’s Conclusion	“In an analysis pooling the results of the various treatments (both for RCTs and for quasi randomized trials), all six studies demonstrated improvements in PTSD and depression; three studies demonstrated improvements in anxiety; one in guilt and two in dissociation when compared with waitlist controls. Pooled analysis of RCTs for PE demonstrated improvements in PTSD, depression, anxiety, guilt, and dissociation; EMDR demonstrated improvements in PTSD, depression, anxiety, and dissociation; CPT demonstrated improvements in PTSD, depression, and guilt.” (p. 262)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: The article is related to the EBP question as it discusses the effectiveness of TIC treatments in a targeted population, adult victims of rape and sexual violence. The health outcomes that were measured related to PTSD, depression, anxiety, guilt, and dissociation.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: This article is relevant to the EBP question and was written by an established author. The publication has been peer-reviewed and the analyzed studies went through a rigorous screening to be selected. The authors also adjusted for the small sample sizes. A limitation to this article is that the studies involved mostly white, U.S. women.

	<b>Overview of Article</b>
Type of article	Overall Type: Review of Research Study Specific Type: Interdisciplinary review
APA Reference	Thomas, M. S., Crosby, S., & Vanderhaar, J. (2019). Trauma-informed practices in schools across two decades: An interdisciplinary review of research. <i>Review of Research in Education</i> , 43(1), 422-452. doi:10.3102/0091732X18821123
Abstract	“Attention to childhood trauma and the need for trauma-informed care has contributed to the emerging discourse in schools related to teaching practices, school climate, and the delivery of trauma-related in-service and preservice teacher education. However, though trauma-informed systems of care include schools, empirical work informing trauma-informed teaching and teacher education that is reflected back to those audiences is less established. This interdisciplinary overview and synthesis of literature examined interventions used in schools to determine the dominant framework used for promoting and practicing trauma-informed care in schools and the effectiveness of school-based support for trauma-affected youth to identify implications for changing teaching practice. While multiple disciplines conduct research using different methodologies examining trauma-informed practices in schools, educators are under examined in this work. Additionally, education researchers began engaging in research on trauma-informed practices in schools more recently, and as such, research emanating from education researchers comprises a small portion of this review. Drawing across the work, we offer recommendations for a more robust, interdisciplinary research agenda with the intentional purpose to change teacher practice.” (p. 422)
Author	Credentials: Mary Shelley Thomas, BA, MAT, Ed. D Position and Institution: Assistant Department Chair and Associate Professor of Social Studies Education at the University of Louisville Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: Review of Research in Education Other: SAGE Publications, ERIC database
Date and Citation History	Date of publication: 2019 Cited By: 3
Stated Purpose or Research Question	“The twofold purpose of this review is to examine: (a) lines and overarching methodologies of inquiry and related to trauma-informed school practice and (b) primary findings of the research.” (p. 423)
Author’s Conclusion	“Given the findings that, at this point, there is no dominant or formally agreed upon framework for trauma-informed practices, as well as no consistent determination of effectiveness, it is important to examine what is informing understandings and implementation of trauma-informed practices occurring in states, districts, and schools.” (p. 443)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: This review is relevant to my EBP question because it was examining the effectiveness of TIC approaches within school settings. However, the takeaway is complicated because there is inconsistency across disciplines as to what to practice and what is deemed effective.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: The quality appears to be moderate because the study thoroughly examined 30 different interventions from 33 studies. This study was recently published and has been peer-reviewed. This article could be beneficial in explaining the difficulty of determining effective TIC approaches with the current research available.



Type of article	Overall Type: Review of research study Specific Type: Narrative review, combining conclusions from 3 previous systematic reviews.
APA Reference	Brown, J. D., King, M. A., & Wissow, L. S. (2017). The central role of relationships with trauma-informed integrated care for children and youth. <i>Academic Pediatrics, 17</i> , S94–S101. <a href="https://doi.org/10.1016/j.acap.2017.01.013">https://doi.org/10.1016/j.acap.2017.01.013</a>
Abstract	“Primary care plays an essential role in the primary and secondary prevention of children's mental health problems. A growing series of trials have shown the capacity of primary care providers to deliver care that specifically addresses risks to healthy social and emotional development by incorporating mental health services into their routines and integrating their work with the mental health care system. In this article elements common to various integration schemes that seem essential to their success are described.” (p. 1)
Author	Credentials: PhD, MHS Position and Institution: Mathematica Policy Research, Inc. in Washington, DC Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Scholarly peer reviewed Publisher: Science Direct
Date and Citation History	2019 Google Scholar Cited By: 19
Stated Purpose or Research Question	“We focus on 3 levels: 1) therapeutic relationships between patients and health care providers, 2) relationships among providers at a given health care site that determine its work culture and climate, and 3) relationships among providers across sites, specialties, and organizations that need to work together to help families experiencing trauma.” (p. 2)
Author's Conclusion	“A variety of interventions at the patient-provider, clinical site, system, and policy levels can foster relationships and provide the foundation for care capable of addressing promotion of social and emotional well-being in general and trauma prevention and treatment in particular.” (p. 5)
Overall Relevance to EBP Question	Overall Relevance to EBP Question: Limited relevance The study is related to the effectiveness of building therapeutic relationships to populations affected by trauma, however this may be more relevant towards answering a question regarding the provider rather than interventions.
Overall Quality of Article	Overall Quality of Article: Poor to moderate quality Author has several publications. Reputable journal and publisher. Publication within the last 2 years.

Type of article	Overall Type: Review of research study Specific Type: Evidence review
APA Reference	de Arellano, M. A., Lyman, D. R., Jobe-Shields, L., George, P., Dougherty, R. H., Daniels, A. S., ... Delphin-Rittmon, M. E. (2014). Trauma-focused cognitive-behavioral therapy for children and adolescents: assessing the evidence. <i>Psychiatric services (Washington, D.C.)</i> , 65(5), 591–602. doi:10.1176/appi.ps.201300255
Abstract	“Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT) is a conjoint parent-child treatment developed by Cohen, Mannarino, and Deblinger that uses cognitive-behavioral principles and exposure techniques to prevent and treat posttraumatic stress, depression, and behavioral problems. This review defined TF-CBT, differentiated it from other models, and assessed the evidence base.” (para. 1)
Author	Credentials: PhD Position and Institution: The Mental Health Disparities and Diversity Program, National Crime Victims Research and Treatment Center, Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston. Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: Scholarly peer reviewed Publisher: Psychiatry Online
Date and Citation History	2014 Google Scholar Cited By: 133
Stated Purpose or Research Question	“The objectives were to describe the components of TF-CBT, assess the level of evidence (that is, methodological quality) of existing studies, and provide a concise summary of its overall effectiveness.” (para. 8)
Author’s Conclusion	“TF-CBT is a viable treatment for reducing trauma-related symptoms among some children who have experienced trauma and their no offending caregivers. Based on this evidence, TF-CBT should be available as a covered service in health plans. Ongoing research is needed to further identify best practices for TF-CBT in various settings and with individuals from various racial and ethnic backgrounds and with varied trauma histories, symptoms, and stages of intellectual, social, and emotional development.” (para. 4)
Overall Relevance to EBP Question	Overall Relevance to EBP Question: Moderate to good relevance This review evaluates the effectiveness of reducing trauma-related symptoms for those who have experienced trauma and their nonoffending caregivers. It provides different resources to support this claim.
Overall Quality of Article	Overall Quality of Article: Good. Author has a single publication, however, there are multiple authors that contributed to this article. Reputable journal and publisher. Publication within the last 5 years.

Type of article	Overall Type: Review of research study Specific Type: Realist systematic review of peer-reviewed TIC literature
APA Reference	Bryson, S. A., Gauvin, E., Jamieson, A., Rathgeber, M., Faulkner-Gibson, L., Bell, S., ... Burke, S. (2017). What are effective strategies for implementing trauma-informed care in youth inpatient psychiatric and residential treatment settings? A realist systematic review. <i>International Journal of Mental Health Systems, 11</i> , 36. doi:10.1186/s13033-017-0137-3
Abstract	“Many young people who receive psychiatric care in inpatient or residential settings in North America have experienced various forms of emotional trauma. Moreover, these settings can exacerbate trauma sequelae. Common practices, such as seclusion and restraint, put young people at risk of retraumatization, development of comorbid psychopathology, injury, and even death. In response, psychiatric and residential facilities have embraced trauma-informed care (TIC), an organizational change strategy which aligns service delivery with treatment principles and discrete interventions designed to reduce rates of retraumatization through responsive and non-coercive staff-client interactions. After more than two decades, a number of TIC frameworks and approaches have shown favorable results. Largely unexamined, however, are the features that lead to successful implementation of TIC, especially in child and adolescent inpatient psychiatric and residential settings?” (para. 1)
Author	Credentials: PhD Position and Institution: Portland State University, School of Social Work Publication History in Peer-Reviewed Journals: Moderate
Publication	Type of publication: Scholarly peer reviewed Publisher: BioMed Central
Date and Citation History	2017 Google Scholar Cited By: 31
Stated Purpose or Research Question	“Given the discrepancy between high rates of traumatic stress among children and adolescents in psychiatric and residential facilities, along with a dearth of experimental research demonstrating how to reduce violent and coercive practices in such settings, we elected to conduct a systematic review of literature. The overarching aim of this project was to examine, systematically, the available scholarly literature on trauma-informed care in psychiatric inpatient and residential programs for youth.” (para. 18)  “Within this implementation context, we posed the following realist review question of trauma-informed care: What is it about trauma-informed care that works, for whom, in what circumstances, in what respects, and why?” (para. 19)
Author’s Conclusion	“Reduction or elimination of coercive measures may be achieved by explicitly targeting specific coercive measures or by implementing broader therapeutic models. Additional research is needed to evaluate the efficacy of both approaches.” (para. 4)  “Taken together, data from this review suggest that trauma informed care initiatives which are comprehensive, theoretically grounded, and developmentally-informed and which seek to align all facets of treatment with the principles of safety, choice, and collaboration may reduce seclusion, restraint, and staff and patient injury rates. They may also add value by improving clinical outcomes. Similarly, quality assurance efforts to reduce costly, poorly evidenced, and potentially injurious and coercive physical interventions may result in significant positive changes in youth serving environments.  Given the broad array of age, developmental needs, and clinical presentations in child and youth inpatient and residential settings, as well as the investment required to effect overall systems change, trauma informed care may best be implemented on a unit-by-unit or agency-by-agency basis. That is, some units or agencies may opt to target coercive events while others may choose to implement theoretically based models whose primary benefits include change in symptom expression and severity and whose secondary benefits include reductions in injuries and traumatic stress. Both approaches show promise. However, the state of science regarding trauma informed care is quite underdeveloped. To advance the field, additional research should seek to demonstrate, longitudinally, the efficacy of both types of efforts in improving patient safety and long-term treatment outcomes.” (para. 32)
Overall Relevance to EBP Question	Overall Relevance to EBP Question: Good relevance This review is directly related to the effectiveness of trauma-informed care for treating inpatient and residential youths. It addresses the need for providing TIC and its impact on symptom expression and reducing injuries and traumatic stress.
Overall Quality of Article	Overall Quality of Article: Good Author has several publications. Scholarly peer reviewed. Publication within the last 2 years.

	<b>Overview of Article</b>
Type of article	Overall Type: Review of Research Study Specific Type: Systematic Review of Intervention Research
APA Reference	Yohannan, J., & Carlson, J. S. (2018). A systematic review of school-based interventions and their outcomes for youth exposed to traumatic events. <i>Psychology in the Schools</i> , 56(3), 447–464. doi: 10.1002/pits.22202
Abstract	“Youth exposed to traumatic events are at higher risk for negative developmental outcomes, including low academic performance, poor social skills, and mental health concerns. To best address these risks, school-based intervention services, and trauma-informed practices can be provided. The goal of this study was to systematically review the intervention research conducted on school-based trauma interventions, with specific attention to examine intervention effectiveness, feasibility, and acceptability across studies. It was found that feasibility and acceptability are not frequently examined, though the data available showed that Enhancing Resiliency Amongst Students Experiencing-Stress (ERASE-Stress) and school-based cognitive behavioral therapy (CBT) had high rates of fidelity; and school-based CBT had high levels of acceptability. The review also examined demographic variables and found that U. S.-based research reported racially/ethnically diverse samples, and most samples were from low-income populations. Most studies examined youth exposed to war- and terror-related traumas or natural disaster-related traumas. Additionally, this review provides future directions for research and reveals the need for further research on intervention feasibility and acceptability. A brief description of practice recommendations based on prior research has also been included. It also exposes the need for studies that examine various student demographic variables that are currently not examined and consistency in rating scale use in school-based trauma intervention research.” (p. 448)
Author	Credentials: Fourth Year Doctoral Student Position and Institution: Department of Counseling, Educational Psychology and Special Education Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: Peer-reviewed Publisher: Wiley Online Library Other: Psychology in Schools
Date and Citation History	Date of publication: 2018 Cited By: Google Scholar Cited By: 0
Stated Purpose or Research Question	“The purpose of this systematic literature review was to address the following questions: (1) For whom are these school-based trauma interventions effective and what further research is needed to increase generalizability of intervention effectiveness? (2) How feasible are these school-based trauma interventions based on fidelity ratings? (3) How acceptable are these school-based trauma interventions based on acceptability ratings from stakeholders?” (p. 449)
Author’s Conclusion	“Overall, schools are able to access youth exposed to traumatic events, and with the relatively positive impact of school-based trauma interventions on youth functioning, school personnel should consider implementing school-based trauma interventions in their schools.” (p. 461)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This systematic review article looks at the intervention research based on school-based trauma interventions and informed care. It also states that they are looking the effectiveness of these interventions which is important to our EBP question on trauma informed care.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: Well written article and published in the last two years. The author does not have many published works and the author is a doctoral student.

	<b>Overview of Article</b>
Type of article	Overall Type: Systematic Reviews and Meta-Analyses Specific Type: "This review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses and narrative synthesis guidelines"
APA Reference	Bailey, K., Trevillion, K., & Gilchrist, G. (2019). What works for whom and why: A narrative systematic review of interventions for reducing post-traumatic stress disorder and problematic substance use among women with experiences of interpersonal violence. <i>Journal of Substance Abuse Treatment</i> , 99, 88–103. <a href="https://doi.org/10.1016/j.jsat.2018.12.007">https://doi.org/10.1016/j.jsat.2018.12.007</a>
Abstract	"Background and aims: Women with histories of interpersonal violence (IPV) experience high levels of post-traumatic stress disorder(PTSD), problematic substance use, and repeat victimization. Previous systematic reviews considering the effectiveness of integrated trauma-specific treatments to address PTSD and substance use have lacked sub-group analysis by gender or trauma type. Furthermore, mindfulness-based interventions for treating both issues together are under-researched. It is unclear what treatment components and contextual factors impacting implementation work best for women with IPV experiences. This narrative review examines a range of quantitative and qualitative data to explore: for which groups of women do integrated interventions work (subgroups)? How (mechanisms of action), and/or under what contexts (factors external to the intervention)? Methodology: A two-staged search strategy identified eligible studies. This process identified 20 controlled trials reporting on the effectiveness of psychological or mindfulness-based interventions for PTSD and substance use and 39 relevant supplementary information related to the trials. Narrative synthesis using thematic analysis was conducted on manuscripts identified in both stages. Findings: Safe social support and ongoing risks of violence were identified as contextual factors which may affect treatment outcomes, requiring attention by researchers and treatment providers. Whilst there was some evidence that reduced PTSD correlates with substance use decrease, there may be more than one pathway to substance use reduction among women with PTSD, requiring a focus on emotional regulation. Other 'active mechanisms' included different modalities of coping skills and support to rebuild connection with self and others. Lack of supplementary studies for trials involving past-focused treatment precluded detailed discussion of these models. Conclusions: Integrated PTSD and substance use treatment which teaches extensive coping skills to promote external safety, symptom stabilisation, and emotional regulation, combined with access to safe social support and external advocacy, may be particularly useful for women with more severe PTSD, or for those experiencing ongoing victimization for whom past-focused treatments are contraindicated. Long-term support and organisational trauma-informed practice in substance use treatment services should also be promoted." (p. 88)
Author	Credentials: PhD studentship Position and Institution: Baily's work was funded as part of KB's PhD studentship by the UK, Economic and Social Research Council Publication History in Peer-Reviewed Journals: Cited in 2 other articles
Publication	Type of publication: Scholarly peer-reviewed Publisher: Elsevier Other: Elsevier is an open access article under the Creative Commons license
Date and Citation History	Date of publication: December 24th, 2018 Cited By: (2 results) K Bailey, and JA Francisco
Stated Purpose or Research Question	"this review explores which integrated trauma-specific interventions (hereafter "integrated interventions") work for which groups of women with co-occurring IPV and varying ranges of substance use and PTSD severity (subgroups), how (mechanisms of action within the interventions), and/or under what contexts (factors external to the intervention)?" (p. 89).
Author's Conclusion	"Supplementary data analyses illustrate how an exclusive focus on average treatment effect risks overlooking the utility of present-focused interventions for certain subgroups, especially their role in targeting emotional dysregulation. A focus on teaching extensive coping skills to promote external safety and symptom stabilisation may be particularly useful for women with more severe PTSD and experiencing on-going victimization, for whom exposure based treatments are contraindicated." (p. 100)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This article understands the complexity of trauma based interventions while providing supplementary data that shows the need of different types of trauma based interventions for different types of clients.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: This article was written by a student receiving their PhD. It has been referenced in 2 other articles, one of which being Bailey's. The conclusion however aligns with the reason for study, therefore putting the article moderately good.

	<b>Overview of Article</b>
Type of article	Overall Type: Evidence review Specific Type: Systematic Review
APA Reference	North, C., & Pfefferbaum, B. (n.d.). Mental health response to community disasters: A systematic review. <i>JAMA : The Journal of the American Medical Association</i> , 310(5), 507-518.
Abstract	<p><b>Importance</b> Exposure to a disaster is common, and one-third or more of individuals severely exposed may develop posttraumatic stress disorder or other disorders. A systematic approach to the delivery of timely and appropriate disaster mental health services may facilitate their integration into the emergency medical response.</p> <p><b>Objective</b> To review and summarize the evidence for how best to identify individuals in need of disaster mental health services and triage them to appropriate care.</p> <p><b>Evidence Review</b> Search of the peer-reviewed English-language literature on disaster mental health response in PsycINFO, PubMed, Cochrane Database of Systematic Reviews, Academic Search Complete, and Google Scholar (inception to September 2012) and PILOTS (inception to February 2013), using a combination of subject headings and text words (Disasters, Natural Disasters, Mental Health, Mental Health Programs, Public Health Services, Mental Disorders, Mental Health Services, Community Mental Health Services, Emergency Services Psychiatric, Emotional Trauma, Triage, and Response).</p> <p><b>Findings</b> Unlike physical injuries, adverse mental health outcomes of disasters may not be apparent, and therefore a systematic approach to case identification and triage to appropriate interventions is required. Symptomatic individuals in postdisaster settings may experience new-onset disaster-related psychiatric disorders, exacerbations of preexisting psychopathology, and/or psychological distress. Descriptive disaster mental health studies have found that many (11%-38%) distressed individuals presenting for evaluation at shelters and family assistance centers have stress-related and adjustment disorders; bereavement, major depression, and substance use disorders were also observed, and up to 40% of distressed individuals had preexisting disorders. Individuals with more intense reactions to disaster stress were more likely to accept referral to mental health services than those with less intense reactions. Evidence-based treatments are available for patients with active psychiatric disorders, but psychosocial interventions such as psychological first aid, psychological debriefing, crisis counseling, and psychoeducation for individuals with distress have not been sufficiently evaluated to establish their benefit or harm in disaster settings.</p> <p><b>Conclusion and Relevance</b> In postdisaster settings, a systematic framework of case identification, triage, and mental health interventions should be integrated into emergency medicine and trauma care responses." (p.508)</p>
Author	<p><b>Credentials:</b> Carol S. North, MD, MPE</p> <p><b>Position and Institution:</b> Department of Psychiatry, University of Texas Southwestern Medical Center</p> <p><b>Publication History in Peer-Reviewed Journals:</b> 7 other research articles</p>
Publication	<p><b>Type of publication:</b> peer-reviewed journal</p> <p><b>Publisher:</b></p> <p><b>Other:</b> Received research support from the National Institute on Alcohol Abuse and Alcoholism, the National Institute of Diabetes and Digestive and Kidney Diseases, the Department of Veterans Affairs, the American Psychiatric Association, and the Orthopaedic Trauma Association;</p>
Date and Citation History	<p><b>Date of publication:</b> Aug. 7th, 2013</p> <p><b>Cited By:</b> (242)</p>
Stated Purpose or Research Question	"To review and summarize the evidence for how best to identify individuals in need of disaster mental health services and triage them to appropriate care." (p.507)
Author's Conclusion	"In post disaster settings, a systematic framework of case identification, triage, and mental health interventions should be integrated into emergency medicine and trauma care responses." (p.507)
Overall Relevance to your EBP Question	<p><b>Overall Relevance of Article:</b> Good</p> <p><b>Rationale:</b> This is a good article that looks at a wide variety of peer-reviewed literature on disaster and mental health response. Because of the sudden trauma during a disaster this article provides many interventions that are well-researched and show to improve outcomes for victims of disaster.</p>
Overall Quality of Article	<p><b>Overall Quality of Article:</b> Good</p> <p><b>Rationale:</b> This paper has been referenced in many other articles, and it is a systematic review of different populations of disaster and interventions received and deemed successful.</p>

	<b>Overview of Article</b>
Type of article	Overall Type: Conceptual article
APA Reference	Ko, S. J., Ford, J. D., Kassam-Adams, N., Berkowitz, S. J., Wilson, C., Wong, M., ...Layne, C. M. (2008). Creating trauma-informed systems: Child welfare, education, first responders, health care, juvenile justice. <i>Professional Psychology: Research and Practice</i> , 39(4), 396-404. doi:10.1037/0735-7028.39.4.396
Abstract	“Children and adolescents who are exposed to traumatic events are helped by numerous child-serving agencies, including health, mental health, education, child welfare, first responder, and criminal justice systems to assist them in their recovery. Service providers need to incorporate a trauma-informed perspective in their practices to enhance the quality of care for these children. This includes making sure that children and adolescents are screened for trauma exposure; that service providers use evidence-informed practices; that resources on trauma are available to providers, survivors, and their families; and that there is a continuity of care across service systems. This article reviews how traumatic stress impacts children and adolescents' daily functioning and how various service systems approach trauma services differently. It also provides recommendations for how to make each of these service systems more trauma informed and an appendix detailing resources in the National Child Traumatic Stress Network that have been produced to meet this objective” (p. 396).
Author	Credentials: Ph.D Position and Institution: Clinical Psychologist at YSC Consulting; Ph.D. clinical psychology from the University of Massachusetts Boston, US Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Scholarly peer-reviewed journal Publisher: American Psychological Association
Date and Citation History	Date of publication: Aug 2008 Cited By: 542
Stated Purpose or Research Question	“This article reviews how traumatic stress impacts children and adolescents' daily functioning and how various service systems approach trauma services differently. It also provides recommendations for how to make each of these service systems more trauma informed and an appendix detailing resources in the National Child Traumatic Stress.” (p. 396)
Author’s Conclusion	“Service providers need to incorporate a trauma-informed perspective in their practices to enhance the quality of care for these children. This includes making sure that children and adolescents are screened for trauma exposure; that service providers use evidence informed practices; that resources on trauma are available to providers, survivors, and their families; and that there is a continuity of care across service systems.” (p. 396)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: This article provides informative background information about how trauma impacts an individual and the beneficial aspects of trauma informed care. However, this article is not a research study testing a hypothesis and may not be as relevant for our research question.
Overall Quality of Article	Overall Quality of Article: Good Rationale: This article has been cited by other researchers over 500 times according to Google Scholar. This article was published in a scholarly, peer-reviewed journal by researchers with high credentials.

	<b>Overview of Article</b>
Type of article	Overall Type: Review of Research Study Specific Type: Meta-analysis
APA Reference	Van Emmerik, A., Reijntjes, A., & Kamphuis, J. (2013). Writing therapy for posttraumatic stress: A meta-analysis. <i>Psychotherapy and Psychosomatics</i> , 82(2), 82-88.
Abstract	<p>“BACKGROUND: Face-to-face psychological treatments have difficulty meeting today's growing mental health needs. For the highly prevalent posttraumatic stress (PTS) conditions, accumulating evidence suggests that writing therapy may constitute an efficient treatment modality, especially when administered through the Internet. We therefore conducted a meta-analysis to investigate the efficacy of writing therapies for PTS and comorbid depressive symptoms.</p> <p>METHODS: The literature was searched using several structured and unstructured strategies, including key word searches of the PubMed, Web of Science, PsycINFO, and PILOTS databases. Six studies met eligibility criteria and were included in the analyses. These studies included a total of 633 participants, of which 304 were assigned to writing therapy.</p> <p>RESULTS: Across 5 direct comparisons of writing therapy to waiting-list control, writing therapy resulted in significant and substantial short-term reductions in PTS and comorbid depressive symptoms. There was no difference in efficacy between writing therapy and trauma-focused cognitive behavioral therapy, but we caution that this finding was based on only 2 direct comparisons.</p> <p>CONCLUSIONS: Writing therapy is an evidence-based treatment for PTS, and constitutes a useful treatment alternative for patients who do not respond to other evidence-based treatments. Internet adaptations of writing therapy for PTS may be especially useful for reaching trauma survivors in need of evidence-based mental health care who live in remote areas or who prefer to retain their anonymity.” (p. 82)</p>
Author	<p>Credentials: Position and Institution: Department of Clinical Psychology, University of Amsterdam Publication History in Peer-Reviewed Journals: 25 documents by van Emmerick</p>
Publication	<p>Type of publication: Peer- reviewed Publisher: Karger Other:</p>
Date and Citation History	<p>Date of publication: December 22, 2012 Cited By: (61)</p>
Stated Purpose or Research Question	<p>“Based on this study, we hypothesized that writing therapy would yield significant reductions of PTS compared to no-treatment control conditions, and that no differences in efficacy would be observed between writing therapy and TF-CBT or other PTS treatments” (p. 83)</p>
Author’s Conclusion	<p>“A need remains for direct comparisons of both Internet and face-to-face writing therapy to other evidence- based PTS treatments (including cost-effectiveness studies and formal evaluations of PTSD diagnostic status), direct comparisons of Internet writing therapy to face-to- face writing therapy, and studies evaluating writing therapy in at-risk populations such as military veterans and other uniformed personnel.” (p. 87)</p>
Overall Relevance to your EBP Question	<p>Overall Relevance of Article: Good Rationale: This article focused on the difficulties of trauma treatment and explored different treatments that have proved to be effective. Writing therapy has been shown to have significant short-term reductions in PTSD</p>
Overall Quality of Article	<p>Overall Quality of Article: Moderate Rationale: Although it was a meta-analysis, only 6 studies met the eligibility criteria. They were unable to compare the long-term efficacy.</p> <p>Note: free access available on Google Scholar</p>



	<b>Overview of Article</b>
Type of article	Overall Type: Review of Research Study Specific Type: Literature review
APA Reference	Muskett, C. (2014). Trauma-informed care in inpatient mental health settings: A review of the literature. <i>International Journal of Mental Health Nursing</i> , 23(1), 51-59. <a href="https://doi-org.pearl.stkate.edu/10.1111/inm.12012">https://doi-org.pearl.stkate.edu/10.1111/inm.12012</a>
Abstract	“Trauma-informed care is an emerging value that is seen as fundamental to effective and contemporary mental health nursing practice. Trauma-informed care, like recovery, leaves mental health nurses struggling to translate these values into day-to-day nursing practice. Many are confused about what individual actions they can take to support these values. To date, the most clearly articulated policy to emerge from the trauma-informed care movement in Australia has been the agreement to reduce, and wherever possible, eliminate the use of seclusion and restraint. Confronted with the constant churn of admissions and readmissions of clients with challenging behaviours, and seemingly intractable mental illness, the elimination of seclusion and restraint is seen to be utopian by many mental health nurses in inpatient settings. Is trauma-informed care solely about eliminating seclusion and restraint, or are there other tangible practices nurses could utilize to effect better health outcomes for mental health clients, especially those with significant abuse histories? This article summarizes the findings from the literature from 2000-2011 in identifying those practices and clinical activities that have been implemented to effect trauma-informed care in inpatient mental health settings.” (p. 51)
Author	Credentials: N/A Position and Institution: N/A, Department of Health and Human Services Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: Peer-Reviewed Journal Publisher: International Journal of Mental Health Nursing
Date and Citation History	Date of publication: 1/30/2013 Cited By: 117
Stated Purpose or Research Question	“This article summarizes the findings from the literature from 2000-2011 in identifying those practices and clinical activities that have been implemented to effect trauma-informed care in inpatient mental health settings.” (p. 51)
Author’s Conclusion	“There are other tangible practices nurses could utilize to effect better health outcomes for mental health clients.” (p. 51)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This article relates directly to our EBP question about trauma-informed intervention.
Overall Quality of Article	Overall Quality of Article: Good Rationale: The article is peer-reviewed, well-written, and informative.

	Overview of Article
Type of article	Overall Type: Review of Research Specific Type: Scoping review
APA Reference	Edgelow, M. M., MacPherson, M. M., Arnaly, F., Tam-Seto, L., & Cramm, H. A. (2019). Occupational therapy and posttraumatic stress disorder: A scoping review. <i>Canadian Journal of Occupational Therapy, 86</i> (2), 148-157. <a href="https://doi-org.pearl.stkate.edu/10.1177/0008417419831438">https://doi-org.pearl.stkate.edu/10.1177/0008417419831438</a>
Abstract	<p>“Background. People who are diagnosed with posttraumatic stress disorder (PTSD) can experience disruptions in their daily occupations. Occupational therapists may assist clients with PTSD to reengage in meaningful occupations. Purpose. This scoping review aims to identify and describe the ways occupational therapy addresses PTSD in clinical practice. Method. Scholarly databases were searched for documents relating to occupational therapy and PTSD. Two reviewers independently applied selection criteria and systematically extracted information. Data were extracted and synthesized in a narrative format. Findings. Fifty sources met inclusion criteria and three major themes were identified: recognizing trauma within specific populations, PTSD’s impact on a range of occupations, and occupational therapy’s response to PTSD. Implications. Occupational therapists are working in multidisciplinary teams to reduce the impact of PTSD on the daily occupations of their clients. More effectiveness studies are required to understand the outcomes of occupational therapy interventions for clients with PTSD.” (p. 148)</p>
Author	<p>Credentials: MSc(RHBS) Position and Institution: Lecturer, Queen’s University Publication History in Peer-Reviewed Journals: Limited</p>
Publication	<p>Type of publication: Peer-Reviewed Journal Publisher: Canadian Journal of Occupational Therapy</p>
Date and Citation History	<p>Date of publication: 4/23/2019 Cited By: 1</p>
Stated Purpose or Research Question	<p>“This scoping review aims to identify and describe the ways occupational therapy addresses PTSD in clinical practice.” (p. 148)</p>
Author’s Conclusion	<p>“Occupational therapists are working in multidisciplinary teams to reduce the impact of PTSD on the daily occupations of their clients. More effectiveness studies are required to understand the outcomes of occupational therapy interventions for clients with PTSD.” (p. 148)</p>
Overall Relevance to your EBP Question	<p>Overall Relevance of Article: Limited Rationale: This article talks mainly about post-traumatic stress disorder as a concept and does not tie it back into intervention or populations specifically.</p>
Overall Quality of Article	<p>Overall Quality of Article: Good Rationale: Despite the poor relevance, the article is peer-reviewed, well-written, and informative. It is good for background information.</p>

	<b>Overview of Article</b>
Type of article	Overall Type: Conceptual review
APA Reference	Oral, R., Ramirez, M., Coohy, C., Nakada, S., Walz, A., Kuntz, A., ... Peek-Asa, C. (2015). Adverse childhood experiences and trauma informed care: the future of healthcare. <i>Pediatric Research</i> , 79(1-2), 227-233. doi:10.1038/pr.2015.197
Abstract	“Adverse childhood experiences (ACEs) are related to short- and long-term negative physical and mental health consequences among children and adults. Studies of the last three decades on ACEs and traumatic stress have emphasized their impact and the importance of preventing and addressing trauma across all service systems utilizing universal systemic approaches. Current developments on the implementation of trauma informed care (TIC) in a variety of service systems call for the surveillance of trauma, resiliency, functional capacity, and health impact of ACEs. Despite such efforts in adult medical care, early identification of childhood trauma in children still remains a significant public health need. This article reviews childhood adversity and traumatic toxic stress, presents epidemiologic data on the prevalence of ACEs and their physical and mental health impacts, and discusses intervention modalities for prevention.” (p. 227)
Author	Credentials: Ph.D. Position and Institution: Department of Pediatrics, University of Iowa, Iowa City, Iowa Publication History in Peer-Reviewed Journals: Extensive, 30 published articles
Publication	Type of publication: Scholarly, peer-reviewed Publisher: Springer Nature
Date and Citation History	Date of publication: October 2015 Cited By: 101
Stated Purpose or Research Question	“This article reviews childhood adversity and traumatic toxic stress, presents epidemiologic data on the prevalence of ACEs and their physical and mental health impacts, and discusses intervention modalities for prevention.” (p. 227).
Author’s Conclusion	“Current developments on the implementation of trauma informed care (TIC) in a variety of service systems call for the surveillance of trauma, resiliency, functional capacity, and health impact of ACEs. Despite such efforts in adult medical care, early identification of childhood trauma in children still remains a significant public health need.” (p. 232)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: This article provides excellent background knowledge of trauma-informed care and its importance. It also provides information about gaps in the research. However, this article is not a primary research study and may not be as relevant for our research question.
Overall Quality of Article	Overall Quality of Article: Good Rationale: This article has been cited over 100 times by other researchers. It was published in a scholarly, peer-reviewed journal. The authors have appropriate credentials.

	<b>Overview of Article</b>
Type of article	Overall Type: Conceptual review
APA Reference	Marsac, M. L., Kassam-Adams, N., Hildenbrand, A. K., Nicholls, E., Winston, F. K. Leff, S. S., & Fein, J. (2016). Implementing a trauma-informed approach in pediatric health care networks. <i>JAMA Pediatrics</i> , 170(1), 70.doi:10.1001/jamapediatrics.2015.2206
Abstract	“Pediatric health care networks serve millions of children each year. Pediatric illness and injury are among the most common potentially emotionally traumatic experiences for children and their families. In addition, millions of children who present for medical care (including well visits) have been exposed to prior traumatic events, such as violence or natural disasters. Given the daily challenges of working in pediatric health care networks, medical professionals and support staff can experience trauma symptoms related to their work. The application of a trauma-informed approach to medical care has the potential to mitigate these negative consequences. Trauma-informed care minimizes the potential for medical care to become traumatic or trigger trauma reactions, addresses distress, provides emotional support for the entire family, encourages positive coping, and provides anticipatory guidance regarding the recovery process. When used in conjunction with family-centered practices, trauma-informed approaches enhance the quality of care for patients and their families and the well-being of medical professionals and support staff. Barriers to routine integration of trauma-informed approaches into pediatric medicine include a lack of available training and unclear best-practice guidelines. This article highlights the importance of implementing a trauma-informed approach and offers a framework for training pediatric health care networks in trauma-informed care practices.” (p. 71)
Author	Credentials: Ph.D. Position and Institution: Children’s Hospital of Philadelphia Research Institute Publication History in Peer-Reviewed Journals: Extensive, has published 20 other articles/studies
Publication	Type of publication: Scholarly, peer-reviewed journals Publisher: American Medical Association
Date and Citation History	Date of publication: November 2016 Cited By: 67
Stated Purpose or Research Question	“This article highlights the importance of implementing a trauma-informed approach and offers a framework for training pediatric health care networks in trauma-informed care practices.” (p. 71)
Author’s Conclusion	“When used in conjunction with family-centered practices, trauma-informed approaches enhance the quality of care for patients and their families and the well-being of medical professionals and support staff. Barriers to routine integration of trauma-informed approaches into pediatric medicine include a lack of available training and unclear best-practice guidelines.” (p. 71)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: This article provides different definitions and types of trauma-informed care according to other researchers. This could be helpful for our presentation. However, this article is not a primary research study and therefore may not be as relevant to our research question.
Overall Quality of Article	Overall Quality of Article: Good Rationale: The authors of this article have appropriate credentials. They also have extensive publication history in scholarly, peer-reviewed journals.

Type of article	Overall Type: Conceptual review
APA Reference	Dinnen, S., Kane, V., & Cook, J. M. (2014). Trauma-informed care: A paradigm shift needed for services with homeless veterans. <i>Professional case management, 19</i> (4), 161-170.
Abstract	<p>“PURPOSE OF STUDY: Exposure to traumatic events is a highly prevalent, although often overlooked, aspect in the lives of homeless veterans. In this study, the prevalence and correlates of potentially traumatic events, including posttraumatic stress disorder, in the homeless veteran population are presented.</p> <p>FINDINGS/CONCLUSIONS: Presently, there exists a lack of trauma-informed case management services for homeless veterans. Failing to recognize the association between trauma and homelessness may lead to further victimization, exacerbate mental health symptomology, and hinder a provider's ability to effectively intervene on behalf of homeless veterans.</p> <p>IMPLICATIONS FOR CASE MANAGEMENT: Subgroups of homeless veterans such as those who served in the Vietnam and post-Vietnam era, more recent returnees from Iraq and Afghanistan, women, rural-residing veterans, and those who are justice involved, are discussed for unique trauma histories and service needs. Barriers to receiving trauma-informed care among homeless veterans are reviewed. Information to assist providers in assessing trauma histories and current best practices in the treatment of posttraumatic stress disorder are noted. Suggestions for how this document can be used in varied organizational settings are made.” (p. 161)</p>
Author	<p>Credentials: MS</p> <p>Position and Institution: Research Coordinator for the Department of Psychiatry, Yale School of Medicine</p> <p>Publication History in Peer-Reviewed Journals: Limited</p>
Publication	<p>Type of publication: Tertiary Source</p> <p>Publisher: Professional Care Management</p>
Date and Citation History	<p>2014</p> <p>Google Scholar Cited By: 19</p>
Stated Purpose or Research Question	<p>“The purpose of this article was to help case management providers understand how trauma impacts the lives of the homeless veterans. As such, information is presented on the prevalence and correlates of potentially traumatic events, including posttraumatic stress disorder (PTSD), in this population. In addition, the unique trauma histories and service needs of multiple subgroups of homeless veterans are reviewed. Barriers and facilitators to TIC among traumatized homeless veterans are noted. Information to assist in assessing trauma histories is discussed. Basic theory and treatment rationale for evidence-based treatments for PTSD are presented.” (para. 4)</p>
Author’s Conclusion	<p>“Presently, there exists a lack of trauma-informed case management services for homeless veterans. Failing to recognize the association between trauma and homelessness may lead to further victimization, exacerbate mental health symptomology, and hinder a provider's ability to effectively intervene on behalf of homeless veterans.” (para. 2)</p>
Overall Relevance to EBP Question	<p>Overall Relevance to EBP Question: Moderate</p> <p>This study is directly related to why the need for trauma-informed staff are needed for working with homeless veterans. They provide information on the effects of failing to recognize trauma in homelessness.</p>
Overall Quality of Article	<p>Overall Quality of Article: Moderate</p> <p>Conceptual study that provides an overview of ideas. Published within the last 5 years.</p>

	<b>Overview of Article</b>
Type of article	Overall Type: Conceptual Review
APA Reference	Whiting, C., (2019) Trauma and the role of school-based occupational therapist. <i>Journal of Occupational Therapy, Schools, &amp; Early Intervention</i> 0:0, pages 1-10. <a href="https://doi.org/10.1080/19411243.2018.1438327">https://doi.org/10.1080/19411243.2018.1438327</a>
Abstract	“Recent research has shown that experiencing trauma in childhood may have a significant effect on school performance, particularly in the occupational performance areas of education, social participation, and play. This article highlights how occupational therapists working in the public schools can play a unique supportive role for these children through individualized programming that includes: consulting and collaborating with a multidisciplinary school team; analyzing environments, tasks, and routines with a trauma-informed sensory-based approach; and providing direct occupational therapy. Designed with the input of the student, this multifaceted plan helps facilitate regulation and participation in school for the child who has experienced trauma.” (p. 291)
Author	Credentials: OTR/L Position and Institution: Works at The SPARK Sensory Clinic. Publication History in Peer-Reviewed Journals: Limited
Publication	Type of publication: Peer Reviewed Publisher: Journal of Occupational Therapy, Schools, & Early Intervention Other: N/A
Date and Citation History	Date of publication: 2019 Cited By: Google Scholar Cited By: 1
Stated Purpose or Research Question	“By designing a trauma-informed school team that is knowledgeable in the use of sensory supports, providing a learning environment that facilitates participation and regulation, and direct occupational therapy, the school-based occupational therapist is able to contribute positive, predictable support to the child who has experienced trauma.”(p. 294)
Author’s Conclusion	There is no conclusion section in this article, but it does state that OT direct intervention in public schools can support children with trauma. (p. 298).
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: In one part of the article under Direct intervention, it mentions trauma-informed for OT focuses on the just-right challenge to promote mastery skills, this does tie in with our EPB question about interventions.
Overall Quality of Article	Overall Quality of Article: Poor Rationale: Does not have a method, results, discussion or conclusion section. Overview of information.

	<b>Overview of Article</b>
Type of article	Overall Type: Conceptual Article
APA Reference	Mersky, J. P., Topitzes, J., & Britz, L. (2019). Promoting evidence-based, trauma-informed social work practice. <i>Journal of Social Work Education, 55</i> (4), 645-657.
Abstract	“Given the human costs of psychological trauma, social workers should be well versed in trauma-informed care (TIC). This framework helps guide the efforts of systems, organizations, and practitioners toward reducing trauma or mitigating its effects. The field has created TIC principles, although they have yet to be fully realized as practical applications. This article makes the case that theoretically and empirically grounded content on trauma should be foundational to social work education. We also argue that social work practice will be advanced by clearly defining trauma and by distinguishing TIC from trauma-focused and trauma-sensitive approaches. Finally, a TIC certificate program illustrates how graduate student training and social work practice are enhanced by integrating trauma content into classroom and field settings.” (p. 645)
Author	Credentials: PhD Position and Institution: Associate Professor, University of Wisconsin - Milwaukee Publication History in Peer-Reviewed Journals: Extensive
Publication	Type of publication: Trade Literature Publisher: Journal of Social Work Education
Date and Citation History	Date of publication: 8/1/2019 Cited By: 1
Stated Purpose or Research Question	“This article makes the case that theoretically and empirically grounded content on trauma should be foundational to social work education. ... We also argue that social work practice will be advanced by clearly defining trauma and by distinguishing TIC from trauma-focused and trauma-sensitive approaches.” (p. 656)
Author’s Conclusion	“In sum, we maintain that all students will be better prepared for their social work careers if they are aware of trauma and its consequences, which is the foundation of a trauma-sensitive approach. In addition, most social work students will take career paths where they will implement TIC practices, and many students who aim to be clinical social workers will become better practitioners if they receive specialized training in an evidence-based, trauma-focused treatment. Students who develop these competencies will be well positioned to meet the demands of the profession and to promote better and more just outcomes for individuals, groups, and communities.” (p. 657)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: The topic of the paper and concepts are relevant to our EBP question and outlines trauma-informed approaches on a theoretical level.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: This article is not written with the same academic quality as some other articles and is more of a narrative than scientific article.

	<b>Overview of Article</b>
Type of article	Overall Type: Conceptual Article, Opinion
APA Reference	Carra, K., Hyett, N., Kenny, A., & Curtin, M. (2019). Strengthening occupational therapy practice with communities after traumatic events. <i>British Journal of Occupational Therapy</i> , 82(5), 316–319. doi: 10.1177/0308022618795594
Abstract	“Occupational therapists have immense potential to strengthen their role in supporting communities to recover from collective trauma. After traumatic events, a community-centred practice approach can be used by occupational therapists to improve health, safety, security and wellbeing at a population level. Three strategies to strengthen the role of occupational therapy in this critical area of practice are proposed: (a) work collaboratively with communities to design programmes centred on community strengths and needs; (b) select and use therapeutic occupations to support community recovery; and (c) develop strong networks to enhance community partnerships and sustainability of services.” (p. 316)
Author	Credentials: OT and professor Position and Institution: Occupational Therapy, La Trobe Rural Health School, La Trobe University, Bendigo, Australia La Trobe Rural Health School, La Trobe University, Bendigo, Australia Publication History in Peer-Reviewed Journals:8 articles cited in peer-reviewed journals
Publication	Type of publication: Peer reviewed Publisher: British Journal of Occupational Therapy Other: Kylie Carra is supported by an Australian postgraduate award scholarship
Date and Citation History	Date of publication: Aug. 27th, 2018 Cited By: (1)
Stated Purpose or Research Question	“Three strategies to build the capacity of occupational therapists when working with communities affected by collective trauma are proposed: (a) work collaboratively with communities to design programmes centred on community strengths and needs; (b) select and use therapeutic occupations to support community recovery; and (c) develop strong networks to enhance community partnerships and sustainability of services.” (p. 317)
Author’s Conclusion	“By using an occupation-based, community-centred practice approach with communities affected by collective trauma, occupational therapists have the potential to enable trauma recovery at a community level.” (p. 318)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: This is a conceptual study written by an OT/ professor regarding the importance of OT. It doesn’t provide any evidence, but it does relate to the OT framework and provides strategies for future implementations or interventions.
Overall Quality of Article	Overall Quality of Article: Moderate Rationale: Very little was discovered about the author. She is a professor and has practiced OT for 10 years. She has written other articles that have been cited numerous times. This concept piece has only been cited by one other article.



	Overview of Article
Type of article	Overall Type: Conceptual or Theoretical Article
APA Reference	Cook, J. M., McCarthy, E., & Thorp, S. R. (2017). Older Adults with PTSD: Brief state of research and evidence-based psychotherapy case illustration. <i>The American Journal of Geriatric Psychiatry : Official Journal of the American Association for Geriatric Psychiatry</i> , 25(5), 522–530. <a href="https://doi.org/10.1016/j.jagp.2016.12.016">https://doi.org/10.1016/j.jagp.2016.12.016</a>
Abstract	“Although lifetime exposure to potentially traumatic events among older adults is fairly high, rates of full-blown post-traumatic stress disorder(PTSD) are estimated at about 4.5%, a rate lower than that for middle-aged and young adults. Nevertheless, PTSD seems to be an under-recognized and under-treated condition in older adults. Assessment and treatment can be challenging in this population for various reasons, including potential cognitive or sensory decline and comorbid mental and physical disorders. This article provides highlights of the empirical research on PTSD in late life, including information on its effects on cognition and physical health. The bulk of this piece is spent on reviewing the theory, description of, and efficacy for an evidence-based psychotherapy, Prolonged Exposure (PE),for PTSD. A detailed successful application of PE with an older veteran with severe, chronic PTSD in the Department of Veterans Affairs Health Care System is presented. Evidence-based psychotherapy for PTSD can be safely and effectively used with older individuals.” (p. 522)
Author	Credentials: Joan M. Cook Ph. D Position and Institution: Yale School of Medicine, New Haven, CT Publication History in Peer-Reviewed Journals: Google scholar lists hundreds that Cook has contributed to.
Publication	Type of publication: Peer reviewed Publisher: The American Journal of Geriatric Psychiatry Other:
Date and Citation History	Date of publication: January 4th, 2017 Cited By: 11 articles
Stated Purpose or Research Question	“It was hypothesized that for older adults with minimal cognitive impairment, the psychotherapies used may be similar to those used in the general adult population: psychoeducation about PTSD, trauma processing, and help with more effective coping with symptoms. Nevertheless, the use of self-management strategies that require retention of new information and implementation of may not be as effective for older adults with PTSD who have moderate to severe declining cognitive abilities.” (p. 529)
Author’s Conclusion	“In conclusion, although relatively small, the literature on EBPs for PTSD indicates that PE is safe, acceptable, and efficacious with cognitively intact older adults. Given the aging population growth and its potential impact on mental health practices, it is important to provide older adults access to EBPs for the treatment of PTSD. Healthcare providers are encouraged to add PE as an effective approach to improve clinical care with of their older adult patients with PTSD.” (p. 529)
Overall Relevance to your EBP Question	Overall Relevance of Article: Good Rationale: This theoretical article backs up psychotherapy for PTSD with sources of systematic studies. Our EBP topic deals with interventions, so the effectiveness that is described in this article is relevant to the question.
Overall Quality of Article	Overall Quality of Article: Good Rationale: This article was written by a really reputable author. It lays a good foundation for interventions of evidence-based psychotherapy. In addition, the other articles written by this author could provide further evidence based articles.

	<b>Overview of Article</b>
Type of article	Overall Type: Conceptual article
APA Reference	Holland, J., Begin, D., Orris, D., Meyer, A. (2017). A descriptive analysis of the theory and processes of an innovative day program for young women with trauma-related symptoms. <i>Occupational Therapy in Mental Health, 34</i> (3), 228-241. doi: <a href="https://doi.org/10.1080/0164212X.2017.1393369">https://doi.org/10.1080/0164212X.2017.1393369</a>
Abstract	“This article describes the theoretical foundation and processes of a trauma treatment and skills training program for young adult women. The goal of the program is to decrease length of hospital stay and increase community stability. Experiences of trauma in childhood may lead to struggles in young adulthood. Hypervigilance, hyperarousal, and poor responses to sensory stimuli are often evident, as is self-injurious behavior and episodic behavioral dysregulation. Grace House is operationalized around three components implemented by occupational therapists and other professional staff: Attachment, self-regulation, and competency; sensory-based strategies, and a strength-based approach that builds upon internal and external resources.”(p. 228)
Author	Credentials: Behavioral health clinical manager Position and Institution: Behavioral health clinical manager, State of Connecticut Department of Mental Health & Addiction Services Publication History in Peer-Reviewed Journals: Moderate
Publication	Type of publication: Peer-Reviewed Journal Publisher: Occupational Therapy in Mental Health
Date and Citation History	Date of publication: 11/10/2017 Cited By: 0
Stated Purpose or Research Question	“The purpose of this article is to describe the processes of the Grace House, exploring in detail three primary interventions.” (p. 235)
Author’s Conclusion	“This article suggests a hypothesis that comprehensive, developmentally targeted treatment in a trauma sensitive setting is effective in reducing symptoms and increasing functioning for young adult women survivors of severe trauma.” (p. 241)
Overall Relevance to your EBP Question	Overall Relevance of Article: Moderate Rationale: This article is useful for background information on trauma and it outlines a specific intervention, but it most likely would not make a huge impact on our research.
Overall Quality of Article	Overall Quality of Article: Good Rationale: For the kind of paper it is, it is well-written and informative in describing the concept.