

Shaping Systems of Care: Interprofessional Insights into Trauma-Informed Practices for Justice-Involved Adolescents

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Background

The Adolescent Interest Group focused on exploring **trauma-informed care (TIC) methods** and their significance in supporting justice-involved youth. Our group of 14 interprofessional healthcare students explored concepts such as the core principles of trauma-informed care and how they can be applied across various healthcare practices.

- Involvement in the juvenile justice system has profound effects on adolescents' health and well-being. Justice-involved youth frequently encounter heightened mental health challenges, chronic physical conditions, and obstacles to accessing appropriate care. [1]
- A significant proportion of youth involved in the juvenile justice system have a history of trauma. Research indicates that 70-90% have encountered one or more traumatic events, including physical/ sexual abuse, and domestic/ community violence. [1]
- The implementation of trauma-informed care—a framework that recognizes and responds to the impact of trauma—is essential in supporting this population, promoting resilience, and enhancing overall health outcomes.

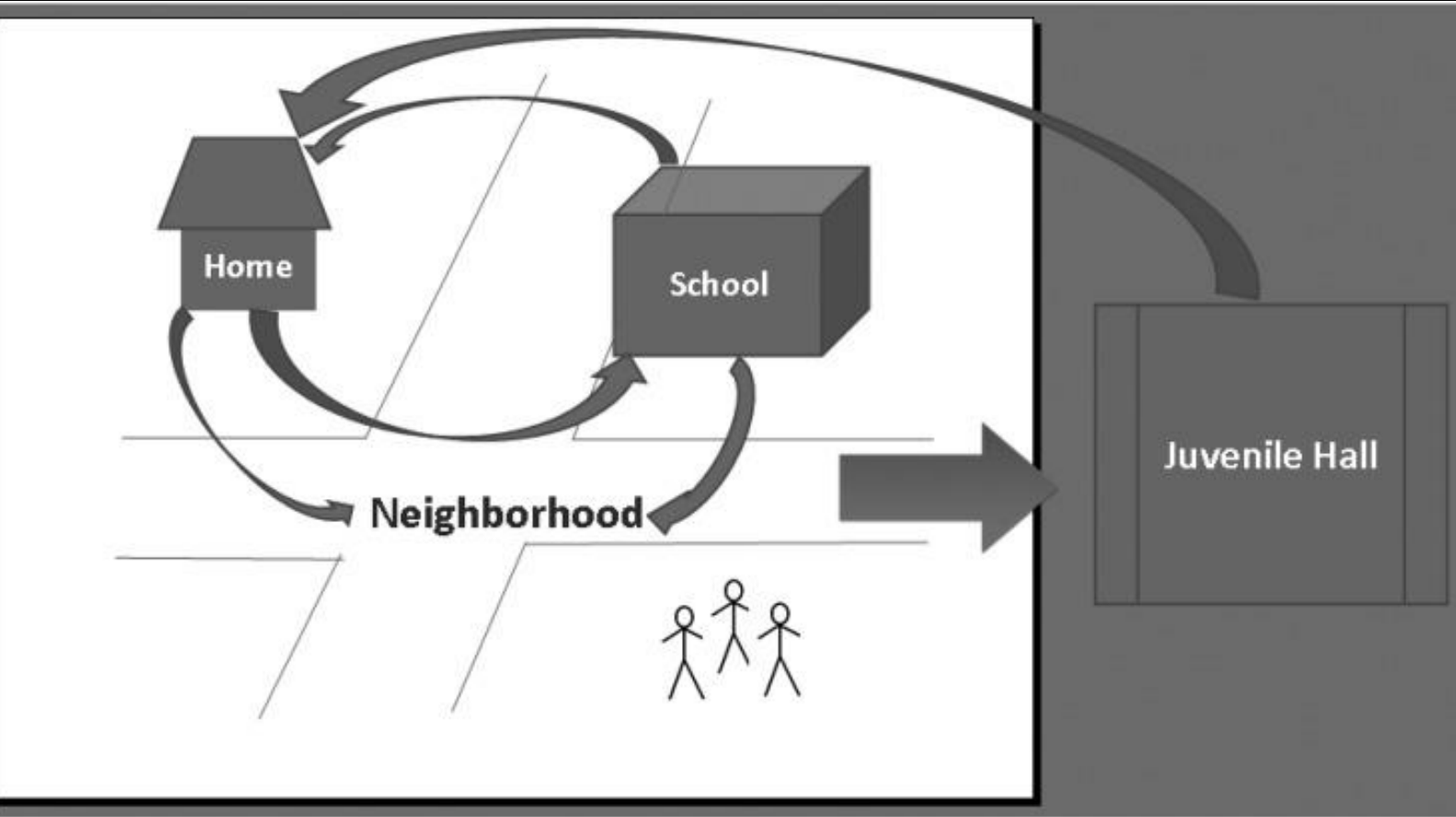


Figure 1. A Conceptual Map of Youths' Perceptions of Pathways to Incarceration—Los Angeles County, California, 2013 [2]

This figure illustrates how justice-involved adolescents describe their path to detention. Youth typically move between home and school (inner arrows), but when these environments become unstable, they spend more time in their neighborhoods (bottom arrows), where negative influences increase their risk of incarceration (large rightward arrow). After release, many return to the same home environment (upper arrow), often continuing the cycle.

Objectives

- The implementation of the interest group looked to accomplish three main objectives:
- Develop strategies to provide trauma-informed care for justice-involved adolescents through community engagement and educational activities.
 - Equip students with the knowledge, skills, and confidence to apply trauma-informed care principles in clinical settings, with an emphasis on community-based interventions.
 - Enhance understanding of how incarceration impacts a child's health and well-being, incorporating service-learning opportunities to deepen the practical impact of this knowledge.

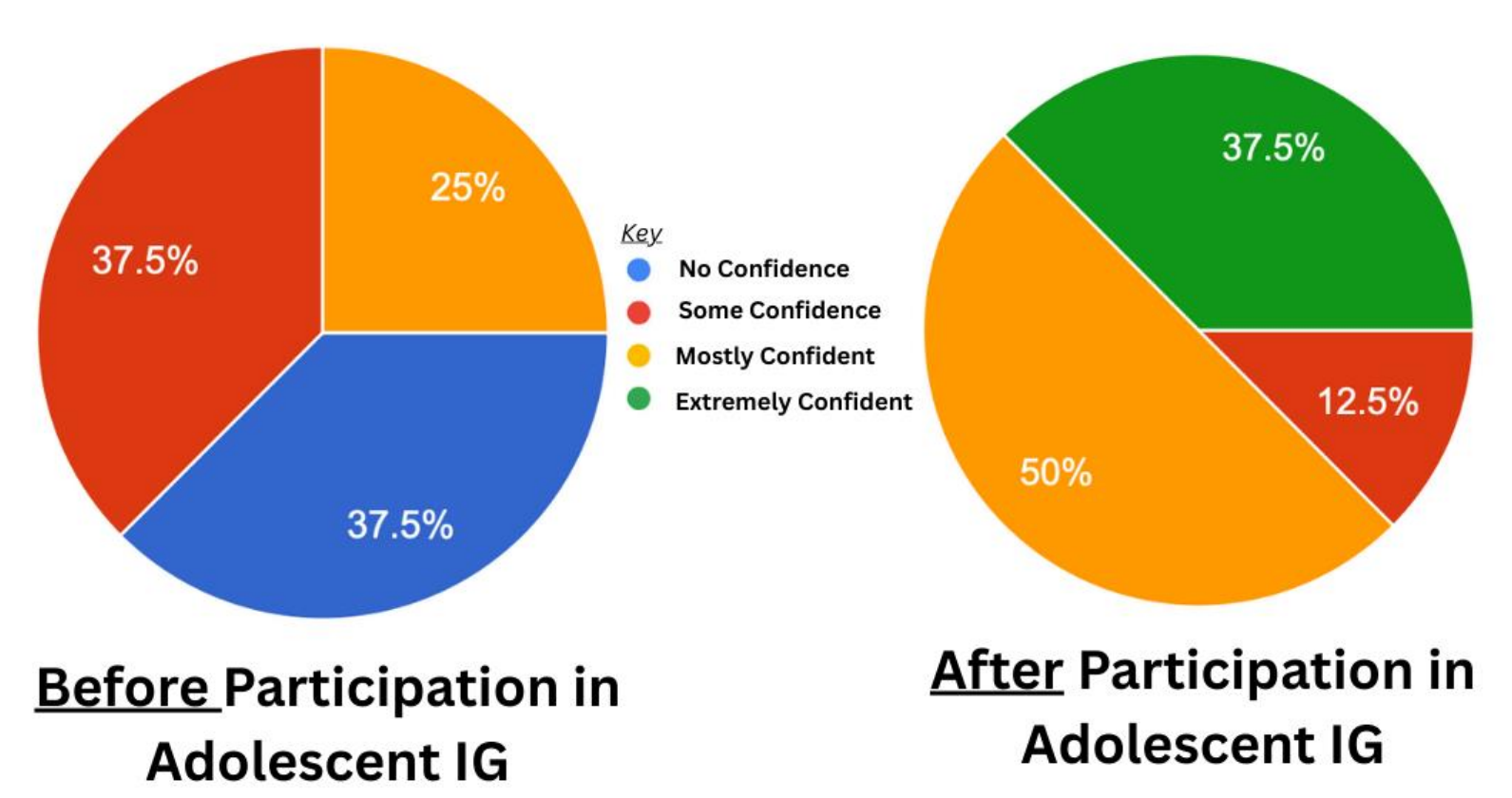
Methodology



Figure 2. Overview of the Adolescent Interest Group structure and activities. The six-step model includes monthly planning meetings, guest speaker presentations, research synthesis, a service-learning experience, group evaluation, and dissemination of findings to interprofessional health settings.

Results

Figure 3. Pre- and post-survey results measuring student confidence in providing trauma-informed care. Following participation in the Adolescent Interest Group, all 14 students reported a marked increase in confidence levels.



Speaker	Learning Points
Jessica Weeks, MD	<ul style="list-style-type: none">• Intersection of trauma and psychiatric diagnoses in justice-involved adolescents:• Post Traumatic Stress Disorder, Major Depressive Disorder, and Oppositional Defiant Disorder.• Apply trauma-informed care principles into everyday interactions with patients.• Safety, empowerment, trust, collaboration, peer support and trauma competence, cultural, historical, linguistic, and gender responsiveness.
Stacy Lalor, LCSW-CT	<ul style="list-style-type: none">• Risk factors contributing to adolescent incarceration:• Adverse Childhood Experiences (ACEs), parental incarceration, systemic inequalities.• Access to services that incorporate a trauma-informed care approach, continuity of care post-release.
Rocio Chang, PsyD	<ul style="list-style-type: none">• Trauma-informed care helps reduce re-traumatization, fosters emotional healing, and enhances resilience in justice-involved youth.• Adverse Childhood Experiences (ACEs) manifest differently across cultures, including how trauma is processed and approached.
Student-led Research Article Reviews & TED Talk and Discussion	<ul style="list-style-type: none">• Deepened understanding of adolescent brain development and its influence on behavior and decision-making:• Challenges of incarcerating youth into adult prisons.• Mental health and school-to-prison programming gaps.• Increased need for safety reentry programs.

Discussion

It can be seen in Figure 3 that our interest group implementation was a success, as many members enhanced their confidence in providing trauma-informed care. Prior to participating in the Adolescent Interest Group, only 25% of respondents reported feeling mostly confident, and none reported feeling extremely confident. Additionally, 75% of participants had either no confidence or only some confidence. Following their involvement in the group, there was a notable shift: 87.5% of respondents reported feeling mostly or extremely confident, with 37.5% reaching the highest level of confidence. These results suggest that participation in the interest group effectively supported students in building both knowledge and self-assurance in trauma-informed practices, highlighting the value of peer-led, topic-focused programming.

These results suggest that participation in the interest group effectively supported students in building both knowledge and self-assurance in trauma-informed practices. This success can be attributed to the program's peer-led structure, diverse educational components including guest speakers, guided discussions, and interdisciplinary collaboration. Together, these elements highlight the value of focused, student-driven initiatives in preparing future providers to meet the needs of vulnerable populations.

Conclusions & Future Direction

Through the Adolescent Interest Group, students developed the skills and confidence to integrate trauma-informed care (TIC) into future practice by creating safe, empathetic environments, collaborating across disciplines, recognizing trauma-related factors, and advocating for equitable care.

Moving forward, the group aims to expand advocacy for TIC training across healthcare, recognizing that ongoing education and research are essential to addressing systemic gaps and supporting the complex needs of justice-involved youth. Integrating TIC into healthcare is critical for promoting lasting, equitable change.

The implementation of interprofessional interest groups should be considered more frequently for various topics in healthcare as they can greatly enhance collaboration and understanding of complexities across all healthcare disciplines.

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- Rocio Chang, PsyD – UConn Health guest speaker

References

1. Branson, C. E., Baetz, C. L., Horwitz, S. M., & Hoagwood, K. E. (2017). Trauma-informed juvenile justice systems: A systematic review of definitions and core components. *Psychological trauma: theory, research, practice and policy*, 9(6), 635–646. <https://doi.org/10.1037/tra0000255>
2. Barnett ES, Perry R, Azzi VF, et al. Incarcerated Youths' Perspectives on Protective Factors and Risk Factors for Juvenile Offending: A Qualitative Analysis. *Am J Public Health*. 2015;105(7):1365-1371. doi:10.2105/AJPH.2014.302228

Key Principles that make a trauma-informed care provider



Realize

The widespread impact of trauma and understand potential paths for recovery

Recognize

The signs and symptoms of trauma in clients, families, staff, and others involved with the system

Respond

By fully integrating knowledge about trauma into policies, procedures, and practices

Recovery

Seeks to actively resist re-traumatization in the recovery process