



Parent-Child Agreement in Child PTSD Symptom Reporting: Factors Predicting Concordance

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BACKGROUND

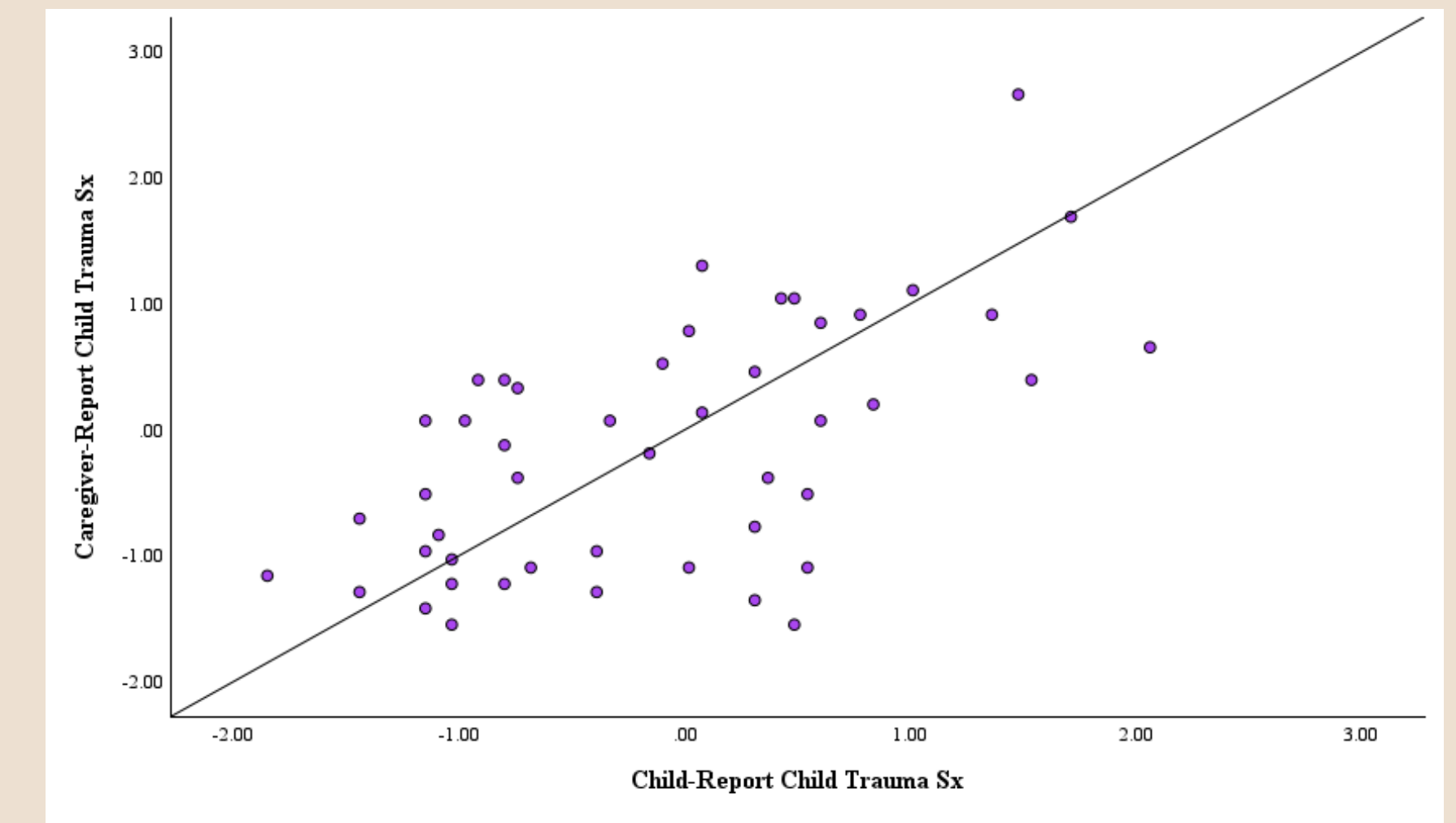
58% of children report an **adverse childhood experience** (Madigan et al., 2024) and up to **76% of children exposed to maltreatment** will develop at least **one post-traumatic stress symptom** (PTSS; Bartoli et al., 2024)

Caregiver-child concordance for child trauma symptoms is low and may be influenced by factors such as caregiver sensitivity and type of trauma (DiCarlo et al., 2024; Stover et al., 2010; Stover et al., 2024; Wamser, 2023).

The degree of **caregiver-child concordance** has important implications for **treatment outcomes and completion** (Wamser-Nanney, 2022; Bambrah et al., 2018).

Caregiver-child reports of child trauma symptoms were highly concordant

ICC = 5.85, $p < .001$



RESEARCH OBJECTIVES

- 1 Are parent and child reports of child trauma symptoms highly discordant in a sample of children who have experienced high levels of maltreatment?
- 2 Do protective factors influence levels of symptom concordance?

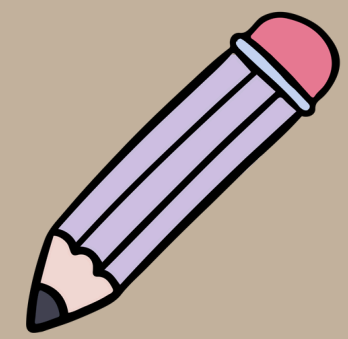
METHODS

Participants



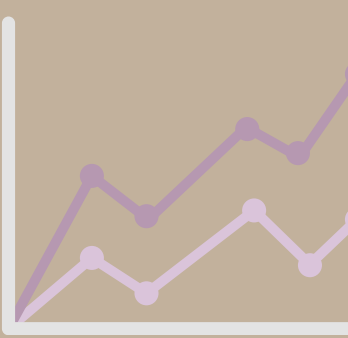
- 73 children aged 7-17 referred for services at the at Luna Child Advocacy Centre in Calgary
- Primary caregiver composition: biological (86.4%), foster (7.6%), grandparents (4.1%), stepparents (1.5%)

Measures & Procedures



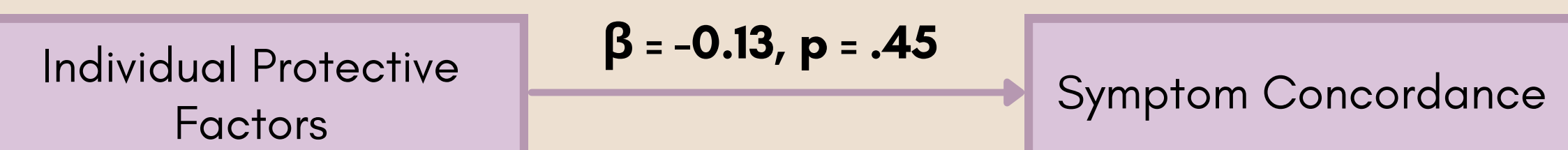
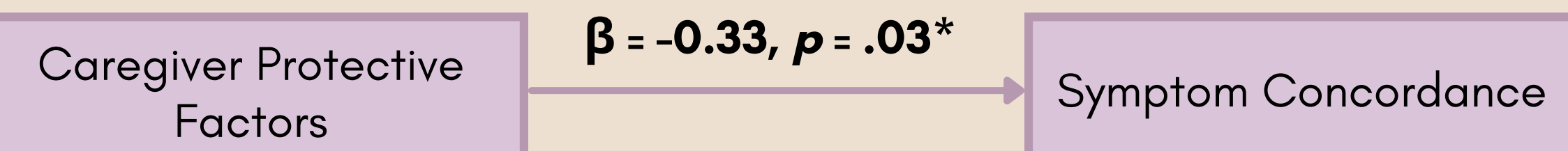
- Retrospective file review was conducted to extract demographic and trauma-related information.
- Child PTSD Symptom Scale was administered to collect caregiver-report and child report trauma symptoms (Foa et al., 2001)
- Child and Youth Resilience Measure was administered to collect child-report of caregiver and personal protective factors (Resilience Research Centre, 2018),

Analyses



- All statistical analyses were performed using SPSS statistics version 28 and Mplus version 8.8.
- Caregiver-child symptom concordance --> Intraclass Correlations & Standardized Difference Scores.
 - Protective factors on symptom concordance --> Linear Regression Analysis

Concordance of caregiver-child reports of child trauma symptoms were predicted by caregiver protective factors



DISCUSSION & FUTURE DIRECTION

Caregiver-child symptom concordance was higher than reported in previous studies involving children exposed to high levels of maltreatment (DiCarlo et al., 2024; Wamser, 2023).

Perceived caregiver support reported by the child predicted an increase of symptom concordance. This highlights the important role caregivers play in child outcomes, and supports the inclusion of caregivers in child treatment programs, such as is done in TF-CBT.

Future Studies

Given the novelty of this research question, further research investigating concordance in children exposed to maltreatment, as well as factors associated with concordance is critical.

Future studies should continue to assess changes to concordance throughout treatment and its impact on child outcomes.

RESULTS

Trauma symptoms: Most children and caregivers reported clinical levels of PTSD

- Child-reported trauma symptoms: Average = 31.69 (SD = 17.12), range 0 - 70.
- Caregiver-reported child trauma symptoms: Average 27.9 (SD = 15.43), range 4 - 69.

Child Resilience: Most children reported high levels of caregiver & personal protective factors

- Child-reported caregiver protective factors: Average 18.78 (SD = 2.47), range 10 - 21.
- Personal protective factors: Average 25.95 (SD = 4.98), range 15 - 30.

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