The Journal Watch on Child & Youth Trauma is a group of researchers, practitioners, policy-makers, and students who gather monthly over Zoom to read and discuss a selection of new research publications on child and youth trauma (including complex, developmental, and intergenerational trauma) and trauma-informed care. Each month we search two databases (Scopus and Academic Search Complete) to develop a list of cutting-edge research on child & youth trauma and trauma-informed care.

A subcommittee reviews the long list of articles to select 3-4 that will be circulated to and read by all journal watch members, and discussed as a group at our monthly meeting.

Finally, one student is selected to transform information from this research into a brief Research to Practice & Policy Knowledge Bulletin for dissemination and use across diverse practice and policy settings.
The existing body of literature on childhood maltreatment has focused primarily on illuminating the harmful impacts of this widespread public health concern, rather than exploring or evaluating treatment and intervention. This study aimed to determine the size of the gap in the literature on treatment and interventions for childhood maltreatment by reviewing the objectives of the literature in the field that was published within a recent year.

It was hypothesized that the vast majority of the literature would focus on the negative consequences of childhood maltreatment.

A systematic review of all articles on childhood abuse or neglect published in 2016 was conducted. Subject Headings and keywords for childhood maltreatment were searched in PsycINFO and MEDLINE. Peer-reviewed empirical studies or literature reviews (English or French) on child abuse or neglect were included. Based on these inclusion criteria, 1,157 papers were included in this review.

Each study was re-viewed, coded, and placed in one of four mutually exclusive categories: Consequences, Mechanisms, Intervention, Prevention, and Others. Good inter-rater reliability was determined on the codification of the first 100 articles. Two researchers coded the remaining articles and discrepancies were discussed.

Furthermore, the first 100 studies published in 2020 on child abuse and neglect were coded using the same strategy.

Z-tests for two independent proportions were conducted to compare the number of articles in each category.

Findings revealed that 50% of 2016 articles on childhood maltreatment focused on the deleterious outcomes of childhood maltreatment. Furthermore, 19% of the studies determined mechanisms underlying the association between childhood maltreatment and outcome (e.g., cognitive and psychological factors and neurobiological/epigenetic factors), 6% of studies examined treatment, and 2% explored preventive interventions.

The remaining articles examined assessment, epidemiology, and legal or organizational issues related to childhood maltreatment.

The reviewed articles published in 2020 displayed similar trends to studies published in 2016, with the exception of fewer studies examining the mechanisms of childhood maltreatment and outcome in 2020.

It was hypothesized that the vast majority of the literature would focus on the negative consequences of childhood maltreatment.

If you are interested in the implications of the study, future research should aim to understand ways to mitigate the consequences of maltreatment to orient clinical practice.

Given the paucity of intervention and treatment studies, clinical-specific recommendations are difficult to specify.

The well-established literature on the negative outcomes of childhood abuse and neglect should alert decision-makers and funding agencies about the relevance of addressing this issue with public health measures and research investments.
Residential childcare workers (RCWs) in child welfare can experience psychological distress as a result of exposure to traumatic situations in their workplace.

This study aimed to identify the nature of the psychological distress specific to RCWs through an exploratory theoretical thematic analysis.

Ten interview transcripts were selected from a larger study, containing first-hand descriptive accounts of work as an RCW without direct questioning alluding to personal distress or trauma exposure. The ten participants interviewed were permanent RCW in institutional rehabilitation settings with varying levels of experience.

"MORAL DISTRESS WAS IDENTIFIED"

Findings revealed a novel source of psychological distress associated with the nature of residential childcare work that was thematically described as "barriers to care".

Moral distress was identified as a relevant concept towards explaining this theme. In each example of distress, participants felt complicit in work that could perpetuate the suffering of the youth in their care. For instance, working to maintain youth in environments without developmentally appropriate opportunities.

Organizational improvements are required to increase the well-being of the RCWs and the youth they are caring for.

COMMUNITY PERSPECTIVES OF COMPLEX TRAUMA ASSESSMENT FOR ABORIGINAL PARENTS:

"It’s Important, but How These Discussions Are Held Is Critical"

A dearth of literature exists on the perspectives of Aboriginal communities regarding perinatal assessment of complex trauma.

This paper described the perspectives of mostly Aboriginal stakeholders regarding complex trauma assessment with Aboriginal parents.

Aco-design workshop was held as part of an Aboriginal-led community-based participatory action research project. Participants included 57 workshop attendees who were majority Aboriginal stakeholders with expertise in community, clinical, policy, and academic settings. Participants rated the level of importance of the 12 domains of complex trauma that are typically used in assessment and were asked for alternative suggestions in assessing complex trauma using story-telling, Delphi-style methods, and strategies to create safety. All 12 domains of complex trauma were majority rated as ‘important’ or ‘very important’ with no additional domains to be added.

The majority of participants endorsed assessing complex trauma with Aboriginal parents, however, in doing so, the assessment must be emotionally and culturally safe.

Additionally, the assessors should have the capacity to respond appropriately and provide support, empower the parents, and show respect and compassion.

Ensuring assessments of complex trauma are done in this way can reduce the risk of re-traumatization and potential family disruption.
Indigenous youth have been found to develop effective public health interventions within their communities when supported by non-youth allies and mentors.

This article examined how Indigenous youth practice public health implementation research on mental health promotion for Two-Spirit, lesbian, gay, bisexual, transgender, queer, questioning, intersex, and allies (2SLGBTQQIA) and Gender Non-Conforming Indigenous youth through a qualitative case study.

The Native Youth Sexual Health Network Indigenous youth researchers and the Well Living House researchers conducted a focus group with seven Indigenous 2SLGBTQQIA youth that lasted 1 h and 20 min. A year later, an online survey was administered to five Native Youth Sexual Health Network team members to identify and reflect on barriers/facilitators to health and wellness.

RESULTS INDICATED THAT

- Colonialism and intergenerational trauma poorly affected the youth’s identity and the definition of health and wellness of Indigenous youth.
- Furthermore, Indigenous youth know when community members are unwell and ways to promote wellbeing.
- Therefore, strategies to assist youth must be youth determined and supported by allies.
- Overall, this study is a critical reminder of the need to centre Indigenous youth throughout public health interventions.

Too many Canadian children and youth are impacted by trauma

Our children, youth, and communities need resources and support that are trauma-informed, healing-centered, rights-respecting, and culturally-relevant.

If you are interested in participating in our Journal Watch, please contact us at INFO@TRAUMACONSORTIUM.COM