

Trauma-Informed Care: Tips for Teen Pregnancy Prevention Programs A Guide for Grantees of the Office of Adolescent Health and the Family and Youth Services Bureau

Part 1

Pregnancy prevention programs can be great allies for adolescents who have been exposed to violence and other traumatic events. By keeping in mind the principles of youth development, pregnancy prevention program staff members can play a pivotal role in preventing and reducing the negative impacts of that exposure. Part 1 of the series provides a rationale for addressing exposure to violence and Part 2 recommends seven strategies to make programs trauma informed.

What happens when youth are exposed to violence?

Youth are very resilient, but they are not unbreakable. No matter what their age, youth are deeply hurt when they are physically, sexually or emotionally abused or when they see or hear violence in their homes and communities. Each child is different, and each situation is different, but exposure to violence can overwhelm a child at any age and lead to problems such as hyperactivity, smoking and drug abuse.¹ We know now that exposure to violence—especially when it is ongoing and intense—can harm the natural and healthy development of youth, unless they receive support to help them cope and heal.

Not all youth who have experienced violence become teen parents or are involved in abusive relationships in adolescence. However, early exposure to violence is associated with an increased risk of being victimized or perpetrating violence as an adult. Youth who have been exposed to violence are more likely to be diagnosed with eating disorders, psychiatric problems and headaches and have psychosomatic complaints.² The emotional, behavioral and social impacts associated with this exposure to violence remain poorly understood and are often not recognized in most settings serving adolescents.³

¹ Cohen, E., McAlister Groves, B., and Kracke, K. (2009). *Understanding Children's Exposure to Violence*. Moving From Evidence to Action: The Safe Start Series on Children Exposed to Violence, Issue Brief #1. North Bethesda, MD: Safe Start Center

² Hillis S.D., Anda, R.F., Dube, S.R., Felitti, V.J., Marchbanks, P.A., Macaluso, M. & Marks, J.S. (2010) The protective effective of family strengths in childhood against adolescent pregnancy and its long-term psychosocial consequences. *Permanente Journal*, 14, 3: 18-27.

³ Cohen, E. & Davis, L. (2007) No wonder we are dizzy, we are running around in circles: The impact of exposure to violence on adolescents. *Protecting Children*, 22, 3 & 4: 54-65.

Why should pregnancy prevention programs build their capacity to address youth's exposure to violence and other traumatic events?

Direct and indirect exposure to child abuse and neglect, domestic violence and violence in schools and the community are part of a constellation of risk factors linked to poor outcomes in youth⁴. Youth exposed to violence are more likely to become teen parents. Also, youth who experience physical or sexual abuse are more likely to have a rapid repeat pregnancy⁵. It has been well documented that exposure to violence increases the likelihood of later victimization, mental health problems and delinquent behaviors⁶. Therefore, failure to address lifetime exposure to violence compromises the quality and effectiveness of pregnancy prevention programs and their outcomes. Addressing the consequences of exposure to violence can prevent the intergenerational transmission of family violence, decrease the risk of experiencing multiple forms of victimization and associated risk behaviors and ultimately improve outcomes.

What are some of the warning signs of exposure to violence among youth?

To prevent first or unintended pregnancies, programs must screen, recognize, and address a history of exposure to violence⁷. It is important to remember that teens *are* often rebellious or may be loud because they are finding their voices and determining their identities. They may react disrespectfully when they sense that adults do not value them as individuals who are capable of thinking for themselves. Warning signs of exposure to violence can be distinguished from “typical” behaviors partly by the associated functional impairments and partly by greater severity, persistence and pervasiveness of the behaviors. For example, the signs usually are not onetime occurrences; they persist over several weeks and affect a youth's functioning in school or at home. Obstacles to identifying problems in youth include staff concerns about labeling them inappropriately with a psychiatric diagnosis. For this reason, it becomes necessary to recognize when some behaviors are cause for concern and the program might need to consult with a specialized professional.

Depending on their circumstances, teenagers (ages 13 to 18) may indicate exposure to violence by⁸:

- Being hyper-vigilant (constantly tense and “on guard”)
- Exhibiting hopelessness

⁴ Finkelhor, D., Turner, H., Ormond, R., Hamby, S. & Kracke, K. (2009) *Children's Exposure to Violence: A Comprehensive National Survey*. Washington, DC: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice. Retrieved January 30, 2012, from <http://www.safestartcenter.org/about/publications.php>

⁵ Futures Without Violence. (2010, February). *The Facts on Adolescent Pregnancy, Reproductive Risk and Exposure to Dating and Family Violence*. Boston, MA: Author. Retrieved January 30, 2012, from <http://www.futureswithoutviolence.org/userfiles/file/HealthCare/Adolescent%20Pregnancy%20Reproductive%20Risk%20Final%202-10.pdf>

⁶ Finkelhor, D., Ormrod, R.K., and Turner, H.A. (2007) Polyvictimization: A neglected component in child victimization trauma. *Child Abuse & Neglect* 31: 7-26.

⁷ Miller E, Levenson R, Herrera L, Kurek L, Stofflet M, Marin L (2012) Exposure to partner, family, and community violence: gang-affiliated latina women and risk of unintended pregnancy. *Journal of Urban Health*. (1):74-86.

⁸ Safe Start Center (2011). *Trauma Informed Care for Children Exposed to Violence: Tip Sheet for Agencies and Staff Working with Youth*. Maryland: Author. Retrieved January 30, 2012 from <http://www.safestartcenter.org/pdf/Tip%20Sheet%20-%20For%20Working%20with%20Youth.pdf>

- Having frequent nightmares and/or sleeplessness
- Using drugs and alcohol
- Engaging in violent or other risk-taking behaviors—including getting in trouble with the law
- Feeling intense fear
- Expressing suicidal thoughts
- Constantly recounting a traumatic event or denying that it happened.

Reactions to a traumatic event or to a lifetime of exposure to violence can either be immediate or appear much later. They differ in severity and include a range of behaviors. People from different cultures may have their own ways of reacting. How a young person responds depends on risk factors (e.g., drug use, family conflict, poverty or child neglect) and on protective factors (e.g., stable family relationship, participation in prevention programs) in the child's life.

What can pregnancy prevention programs do?

Most youth who are exposed to violence and other traumatic events are not identified as such by the systems that serve them. The links between exposure to violence and behavior are often hidden or unclear. Therefore, few youth receive services for the violent event they may have witnessed or experienced.

If a professional has any concerns about a youth's exposure to violence, the first step is to **ask** the adolescent how she is doing and to **be compassionate** when listening and responding. After **discussing the experience** with the youth, and depending on confidentiality policies, information can be **shared or confirmed** with parents or guardians and other adults in the youth's life. It is advisable to **consult the mandated reporter regulations** in your jurisdiction to determine reporting requirements. To maximize the adolescent's chance of success in the program, the program can address the adolescent's concerns broadly, taking into account the possible relationship among traumatic stressors, behaviors and pregnancy. When **developing a treatment plan**, special attention should be given to the signs and symptoms of post-traumatic stress that might have been caused by the violence, pregnancy and the relationship between the two. In addition, the program might want to **refer** some youth and their families to local programs that work with those who have witnessed or experienced violence.

Part 2 of the Trauma-Informed Care Tip Sheet will provide seven strategies that a pregnancy prevention program can use to help prevent, reduce and address the impact of exposure to violence on teenagers.

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