

# Toward Trauma-Informed Home Visiting: Addressing Depression and Social Support

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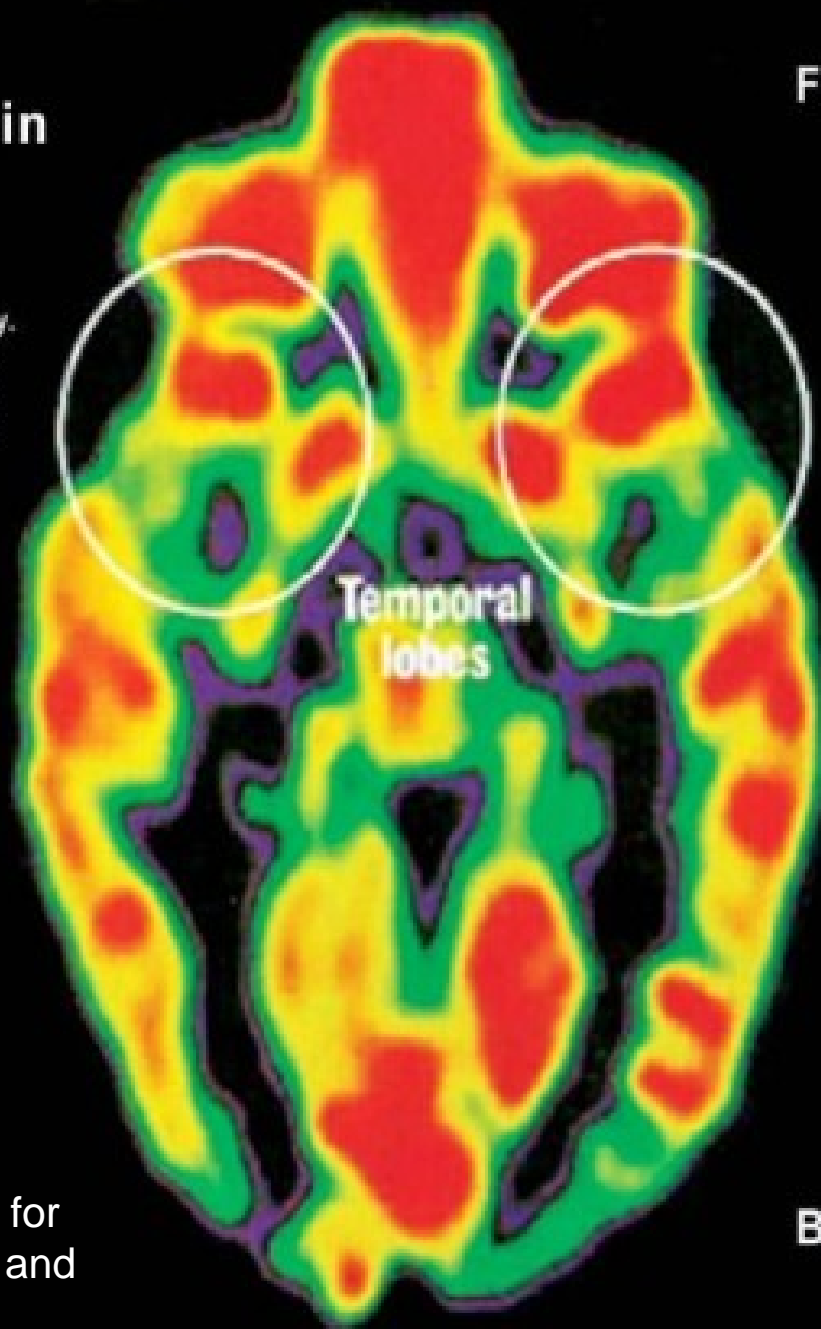
# Interpersonal Traumatic Experiences

- Physical Abuse
- Sexual Abuse
- Emotional Abuse
- Witnessing Violence
- Physical and Sexual Assault
- Intimate Partner Violence



## Healthy Brain

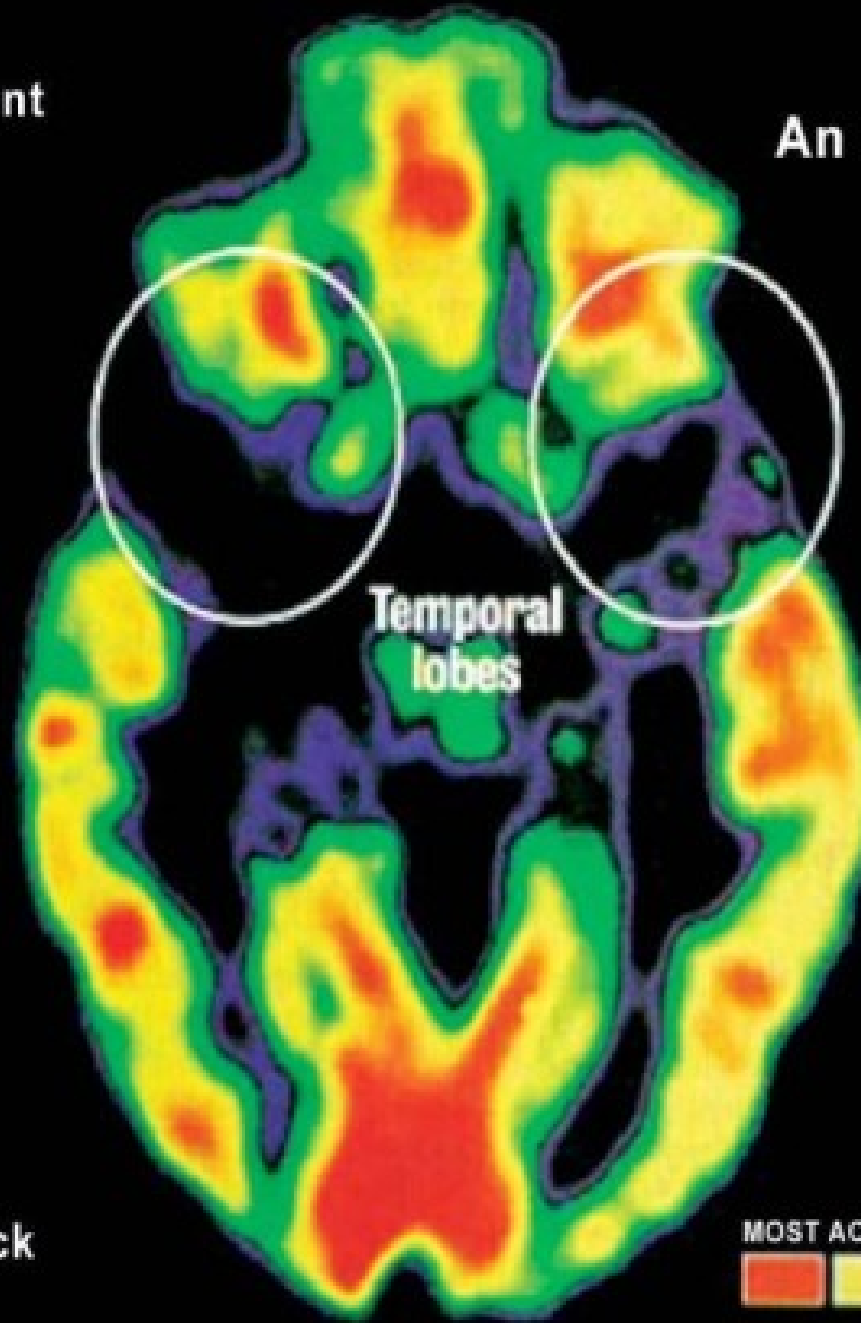
This PET scan of the brain of a normal child shows regions of high (red) and low (blue and black) activity. At birth, only primitive structures such as the brain stem (center) are fully functional; in regions like the temporal lobes (top), early childhood experiences wire the circuits.



Front

## An Abused Brain

This PET scan of the brain of a Romanian Orphan, who was institutionalized shortly after birth, shows the effect of extreme deprivation in infancy. The temporal lobes (top), which regulate emotions and receive input from the senses, are nearly quiescent. Such children suffer emotional and cognitive problems.



Back



Source: Centers for Disease Control and Prevention

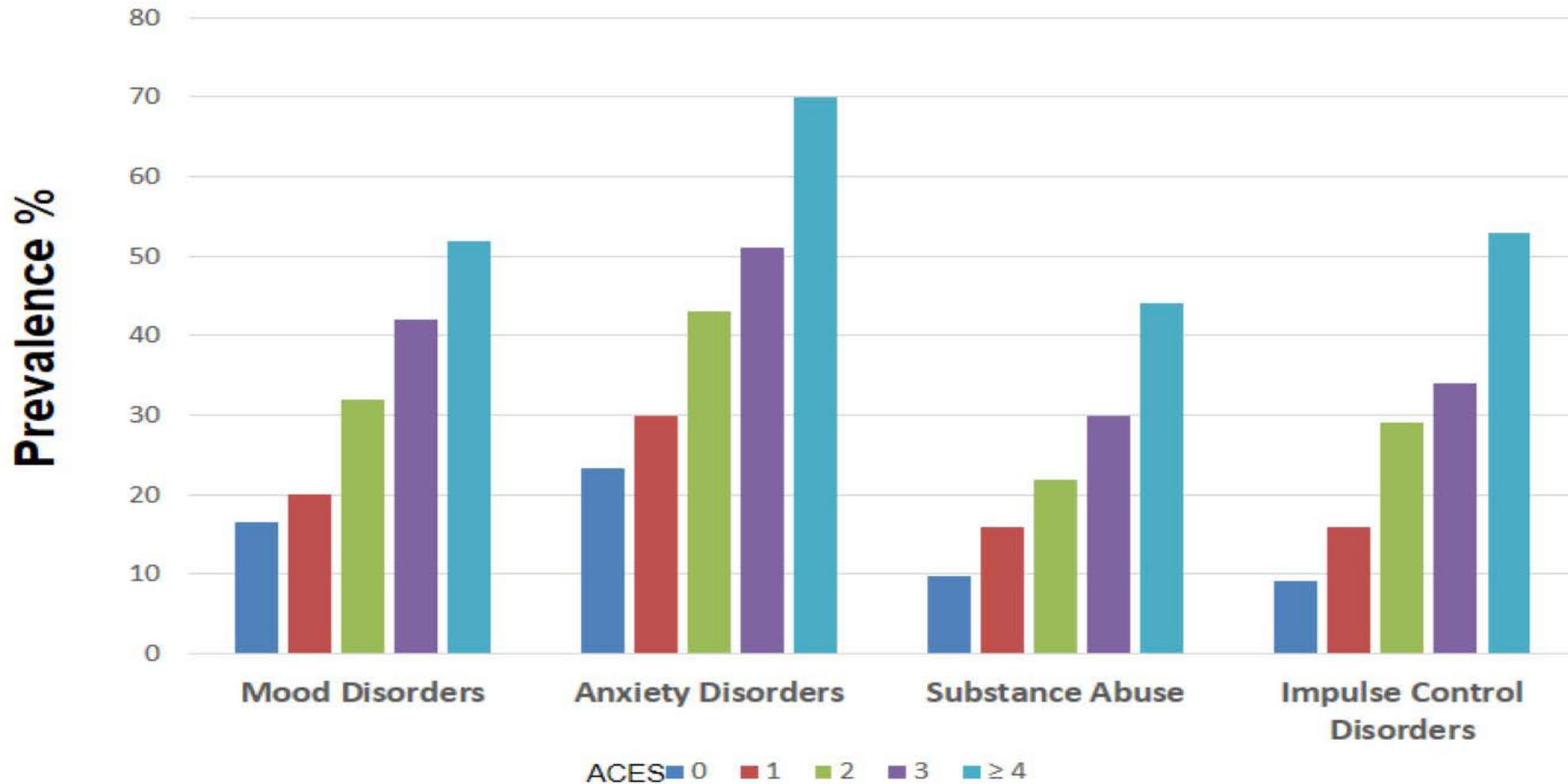
# Epidemiology of Childhood (0-18) Traumatic Experiences

- **Adverse Childhood Experiences (ACEs):** Abuse, Neglect and expanded to Household Dysfunction
- **Prevalence of ACEs:** 15.2% with 4 or more ACEs
- **High ACEs 0-5 years** → 2.7-3.5<sup>†</sup> fold higher risk for poor Kindergarten outcomes
- **High ACEs 0-18 years** → 4-12<sup>‡</sup> fold higher risk for alcoholism, drug abuse, depression, and suicide attempts

<sup>†</sup>Jimenez (2016), Fragile Families and Child Wellbeing Study, *MCHJ*

<sup>‡</sup>Felitti, (1998), ACEs Study, *Am J Prev Med*

# Cumulative ACEs and Mental Health

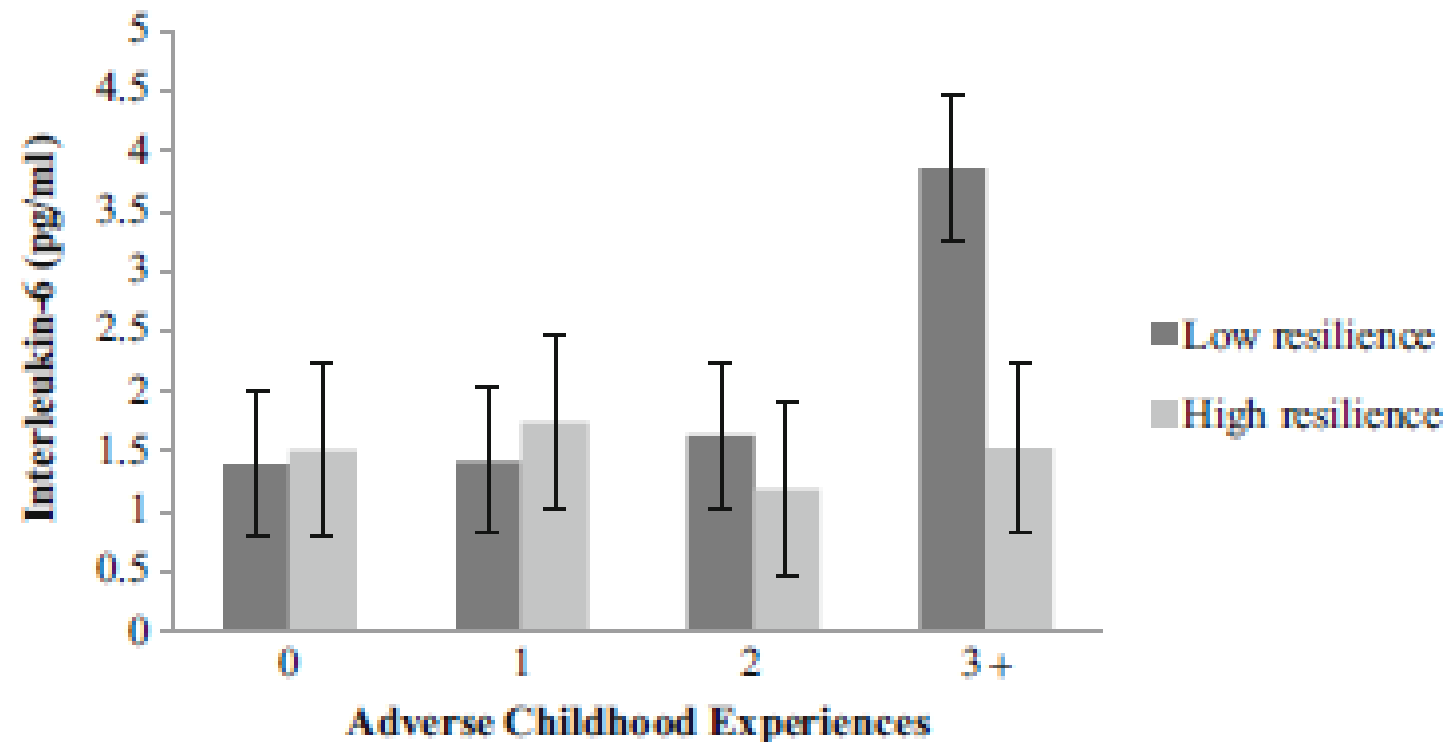


<sup>1</sup>Data from the National Comorbidity Survey-Replication Sample (NCS-R).

<sup>2</sup>Putnam, Harris, Putnam, J Traumatic Stress, 26:435-442, 2013.

# Protective Factors as ACE Buffers?

- Interpersonal Supports
- Emotional Health
- Meaningful Engagement  
(e.g. my life as meaning)
- Physical Health Behaviors



Source: Gouin, Caldwell, Woods, Malarkey (2017) *Ann. Behav. Med*

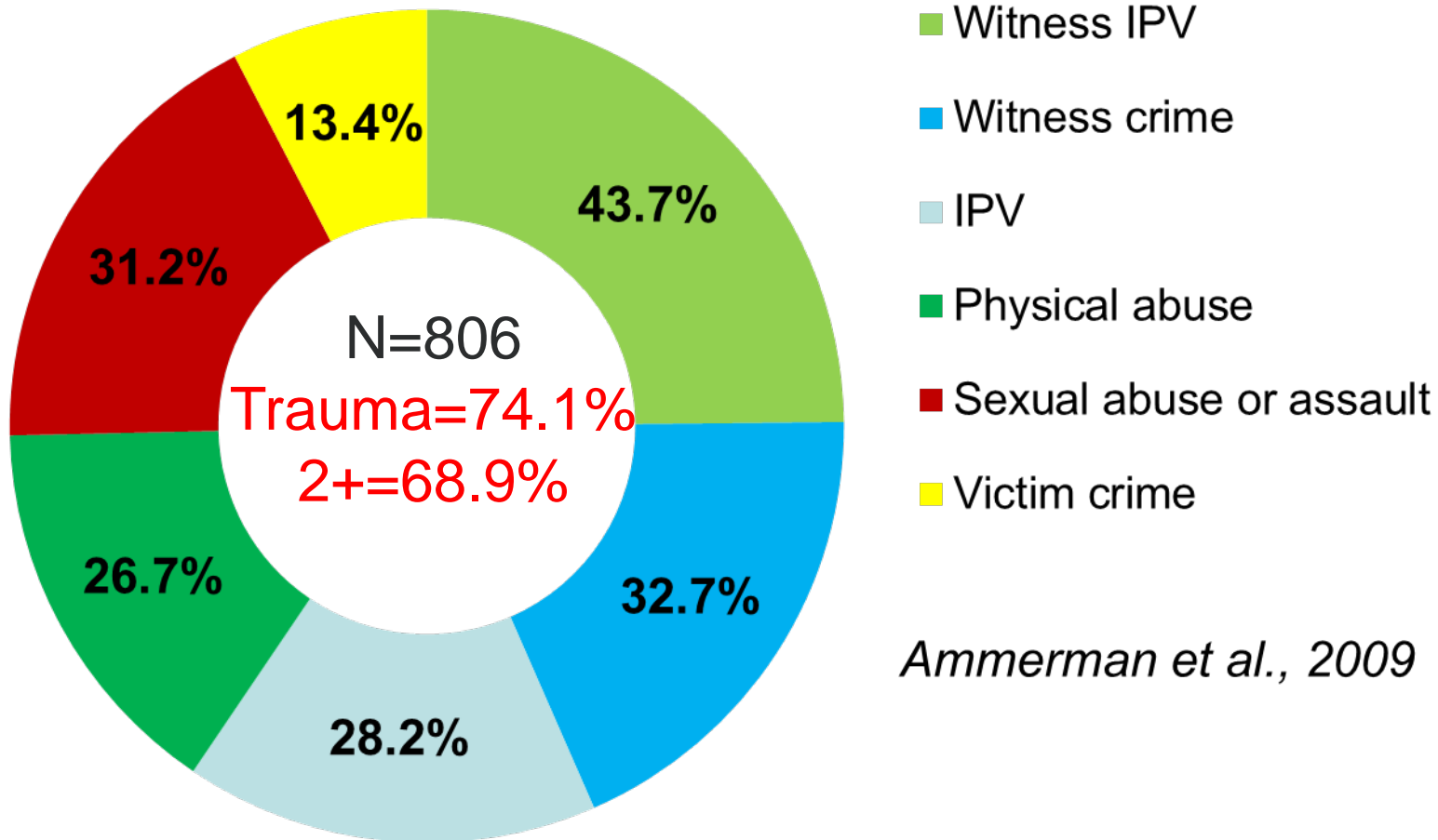
# Every Child Succeeds Home Visiting



- Regional home visiting program: Southwest Ohio & Northern Kentucky families
- Network of 9 community-based agencies that enroll 1,500 mothers annually
- **Eligibility Criteria:** first-time mothers who are <18 years, unmarried, living in poverty, and/or who have late entry into prenatal care
- **Goals:** positive parenting; healthy home environment; optimal development



# Interpersonal trauma experiences of mothers in ECS home visiting



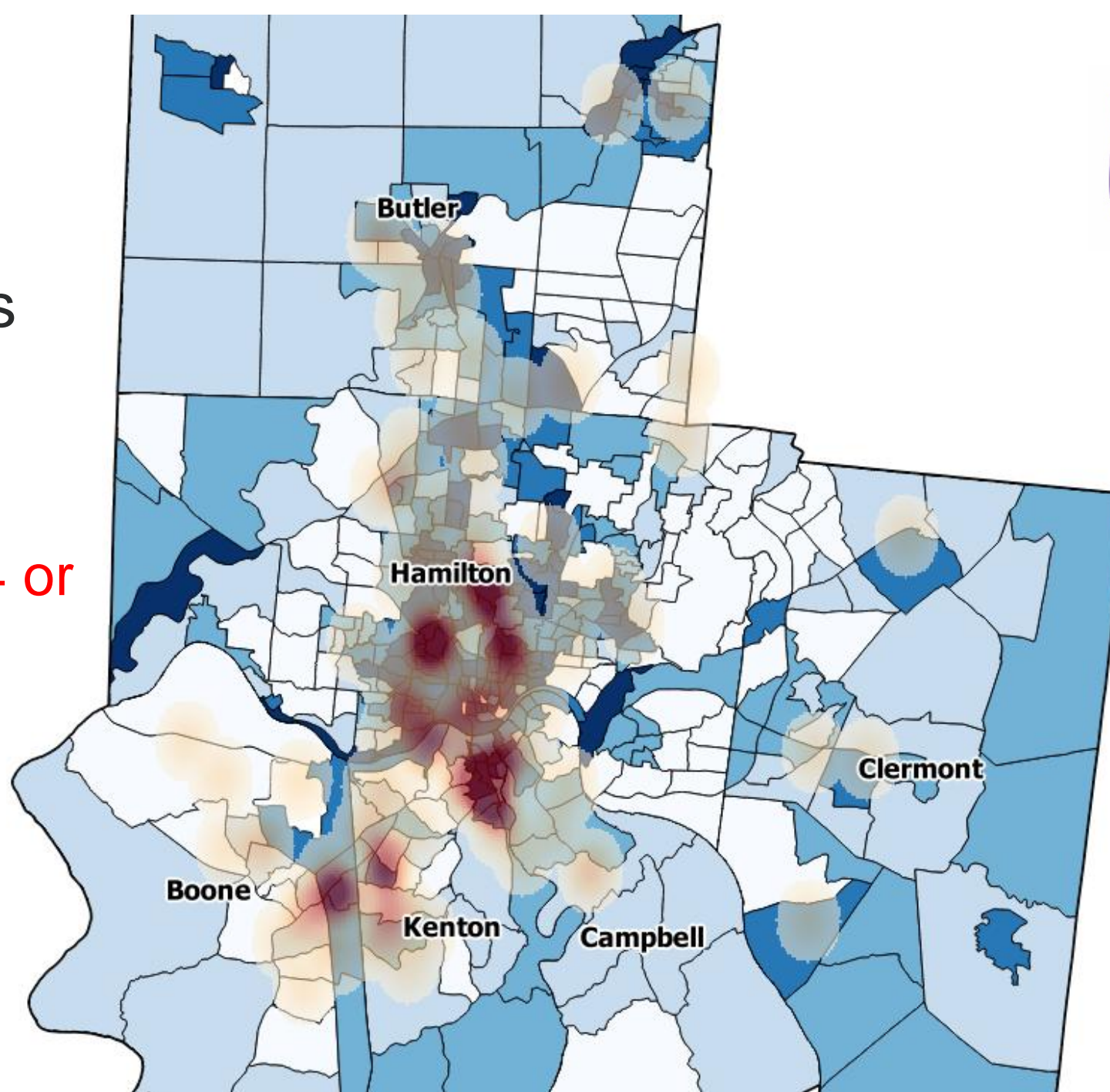
*Ammerman et al., 2009*



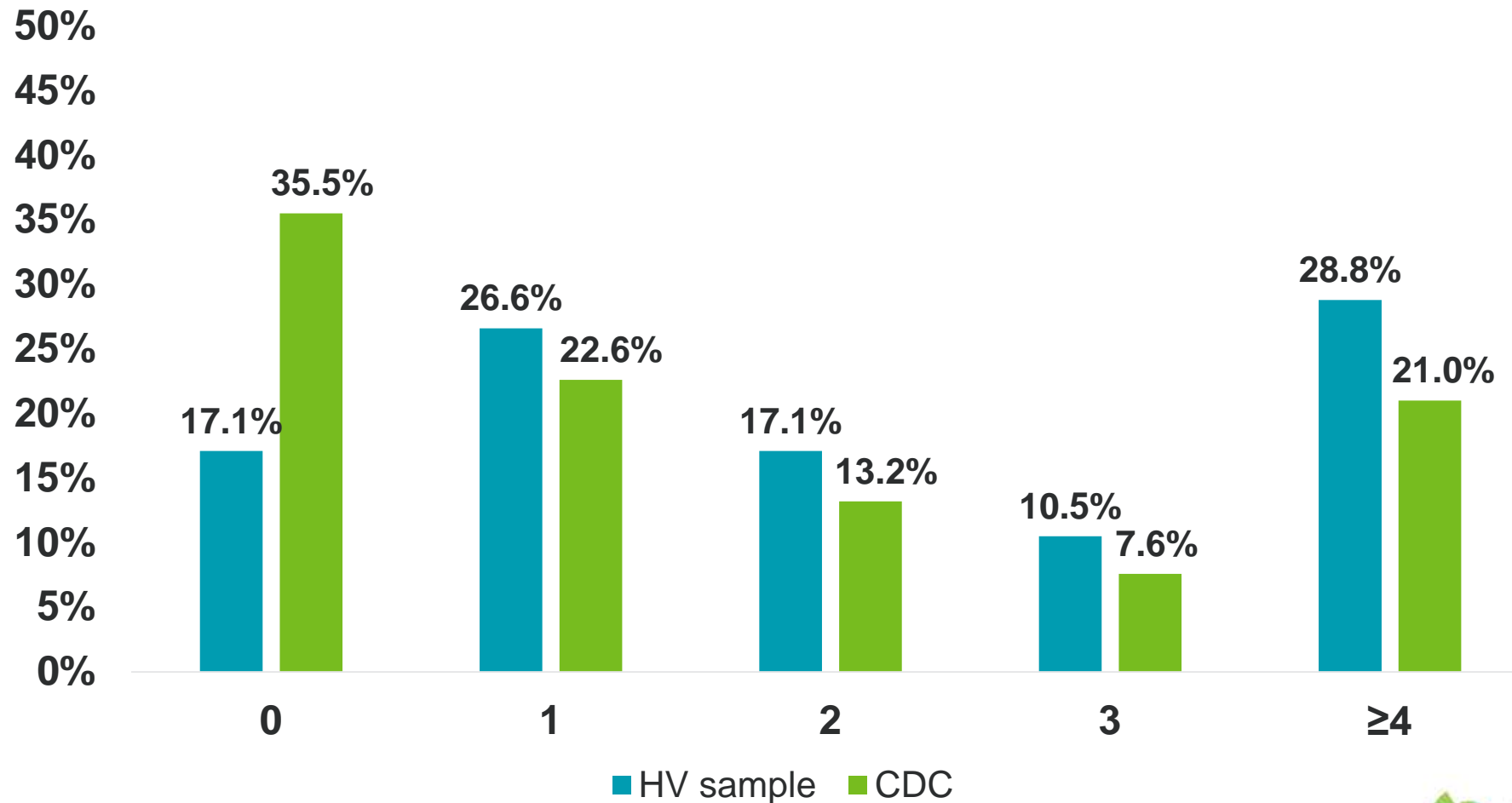


# Maternal Adverse Childhood Experiences (ACEs)

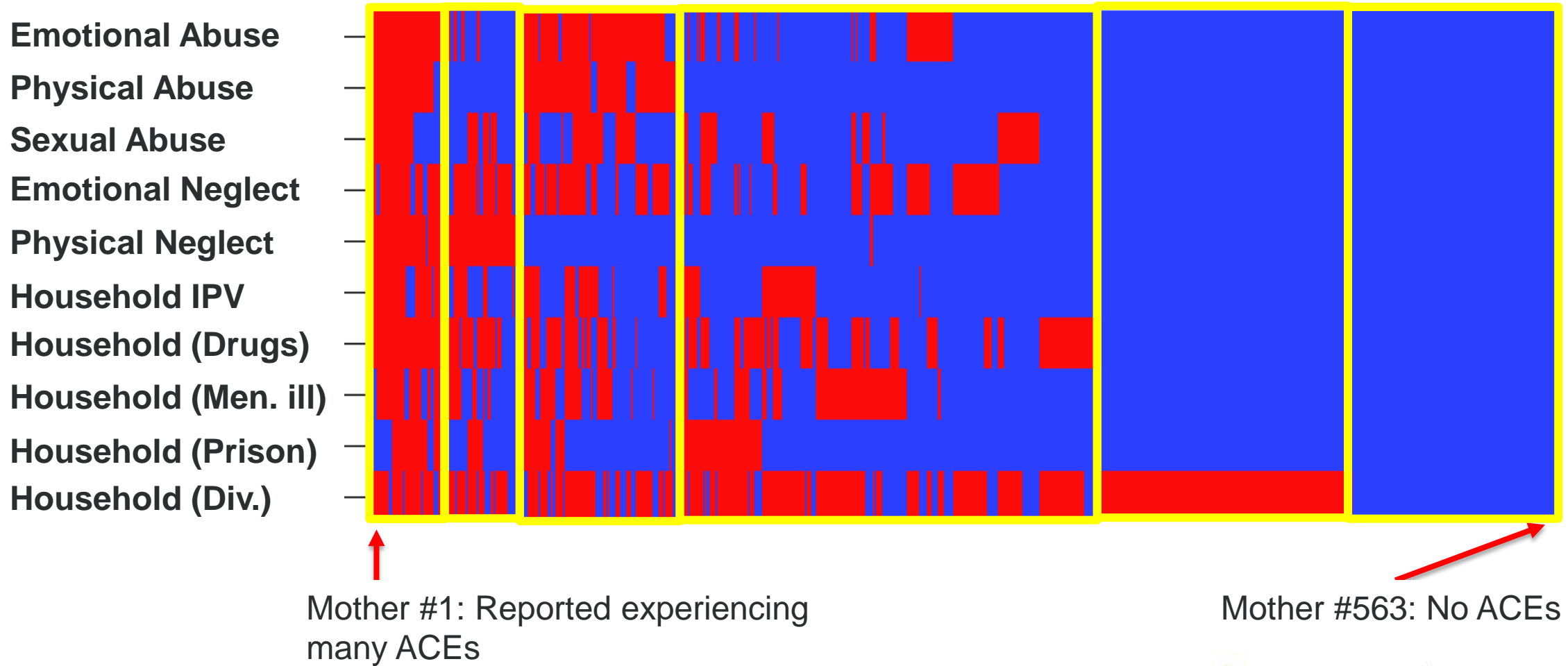
28.8% with 4 or  
more ACEs



# ACE Total Score in ECS Sample and CDC 2009 Five State Survey, Female Sample (18-24 years)



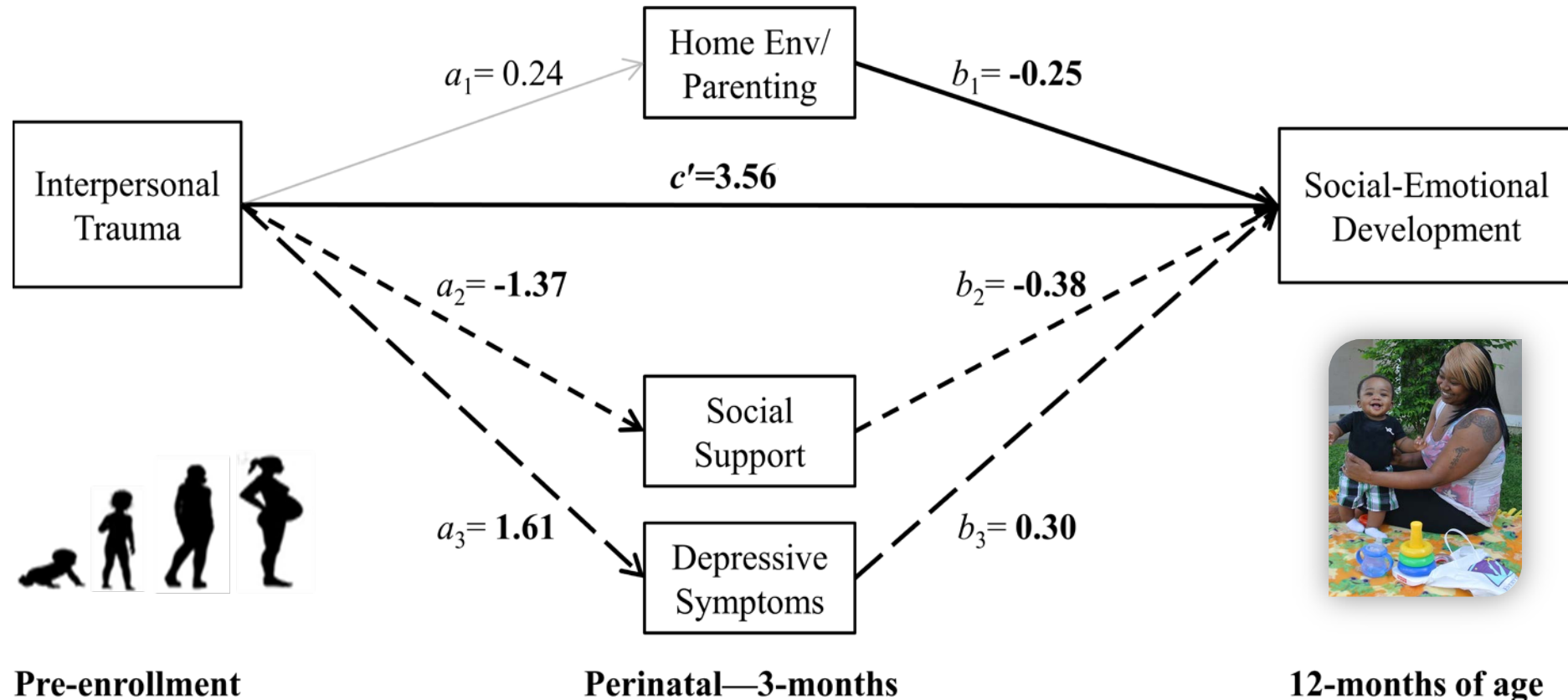
# Profiles of Maternal ACE Exposure (ECS)



# Maternal interpersonal trauma and negative offspring social-emotional development



# Maternal Trauma History to Offspring Development



Paediatric and  
Perinatal Epidemiology

Adapted from Folger *et al* (2017)



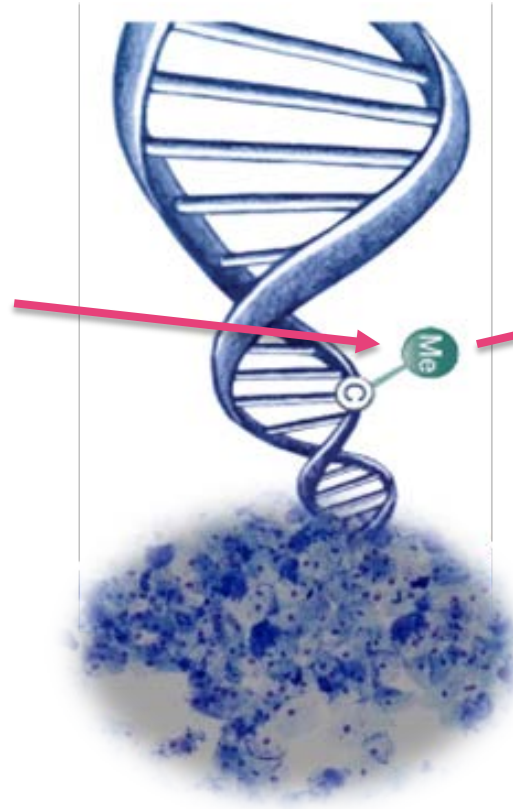


# Maternal Trauma Linked to Infant Epigenome and Increased Vulnerability?

Early exposure to maternal distress



**PRIDE Study**  
Pregnancy &  
Infant Development



Infant social-emotional function



# Trauma, Depression, and Social Support

Relationships in Home Visiting

# Impact in Home Visiting

N=220 first time mothers

Eligible and enrolled in either:

- Nurse-Family Partnership
- Healthy Families America

Provided data throughout the first 18 months of home visiting



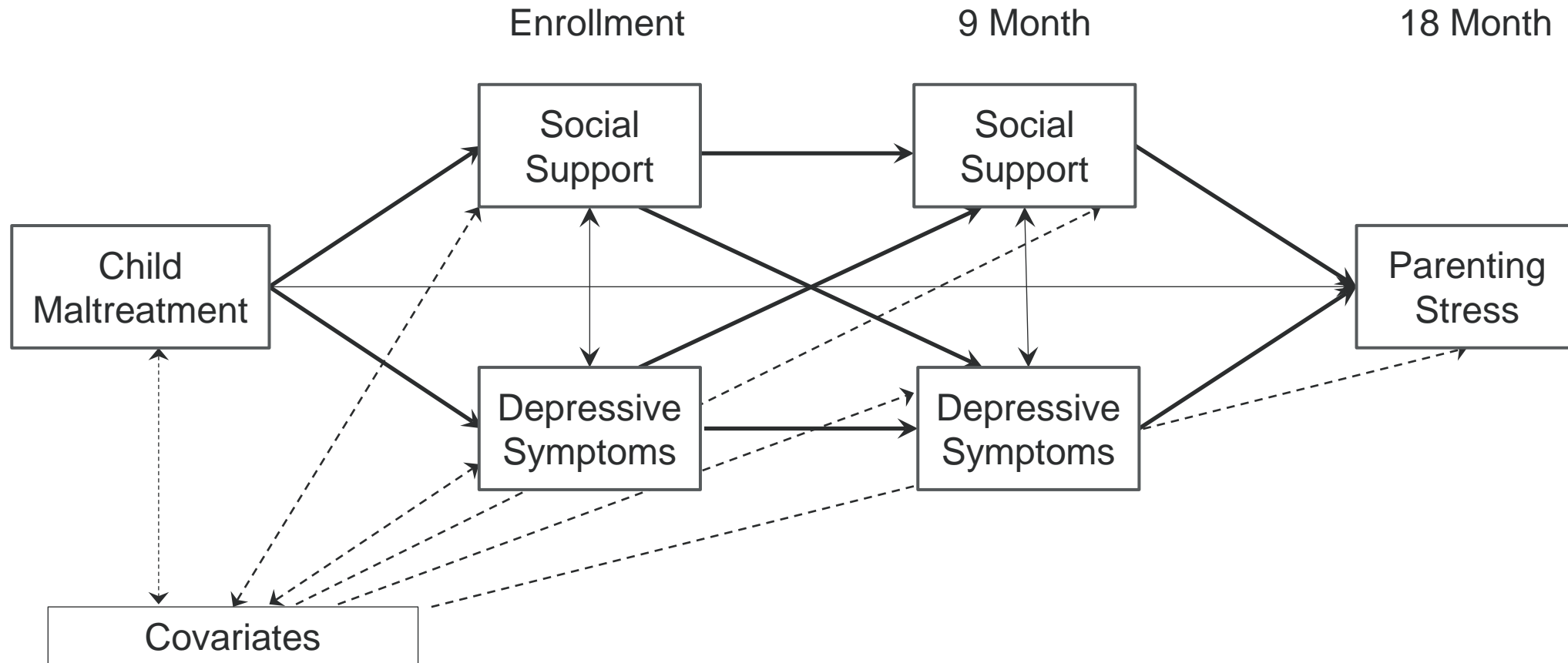
## Dimensions assessed:

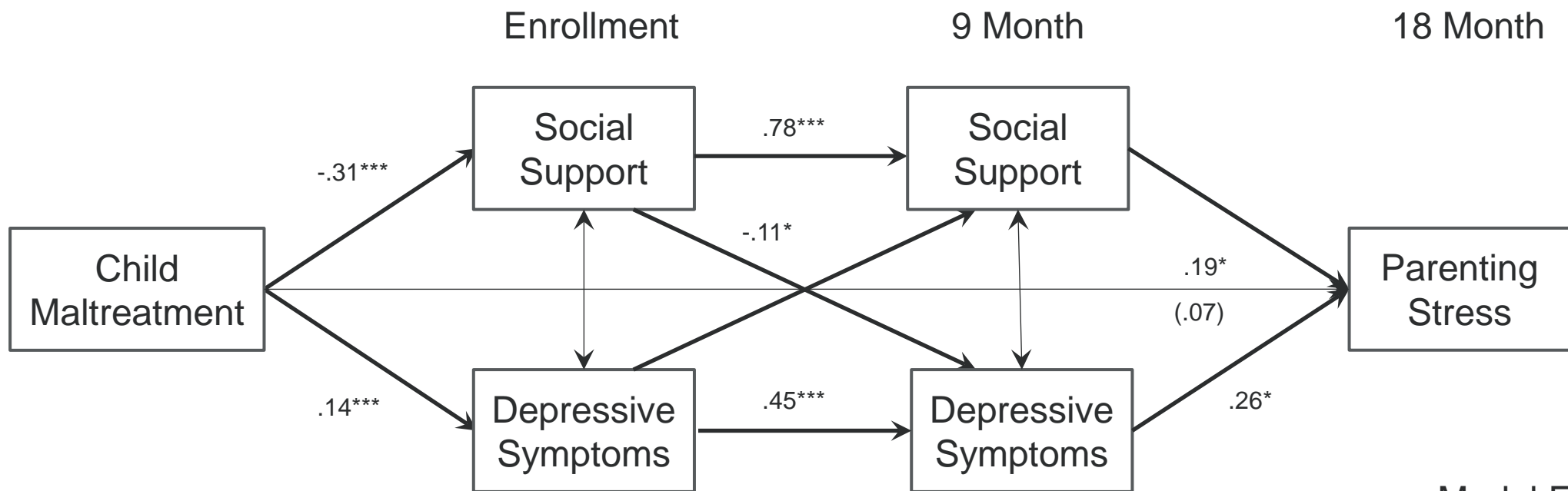
- Demographic factors
- Childhood Trauma Questionnaire (CTQ)
- Beck Depression Inventory-II (BDI-II)
- Interpersonal Support Evaluation List (ISEL)
- Parenting Stress Inventory-Short Form (PSI)

## Measurement occasions:

- Enrollment, 9-months post enrollment, 18-months post enrollment

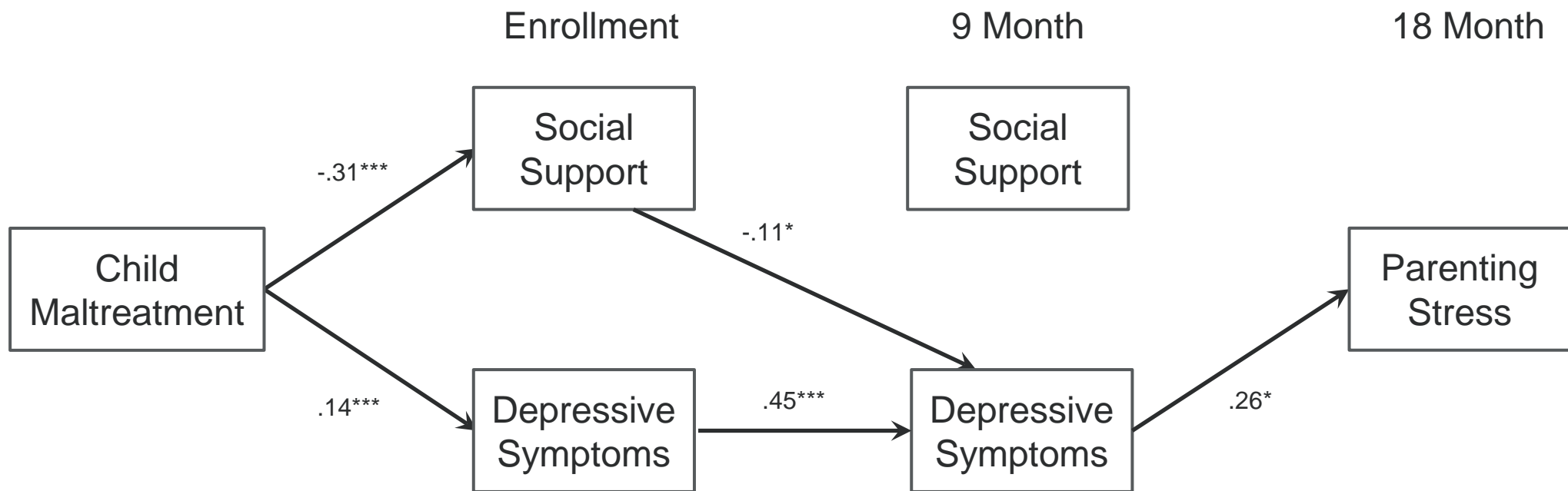
# Model to be tested





After controlling demographics and  
PSI severity at 9 months

Shenk, Ammerman, et al., (2017), *Prevention Science*

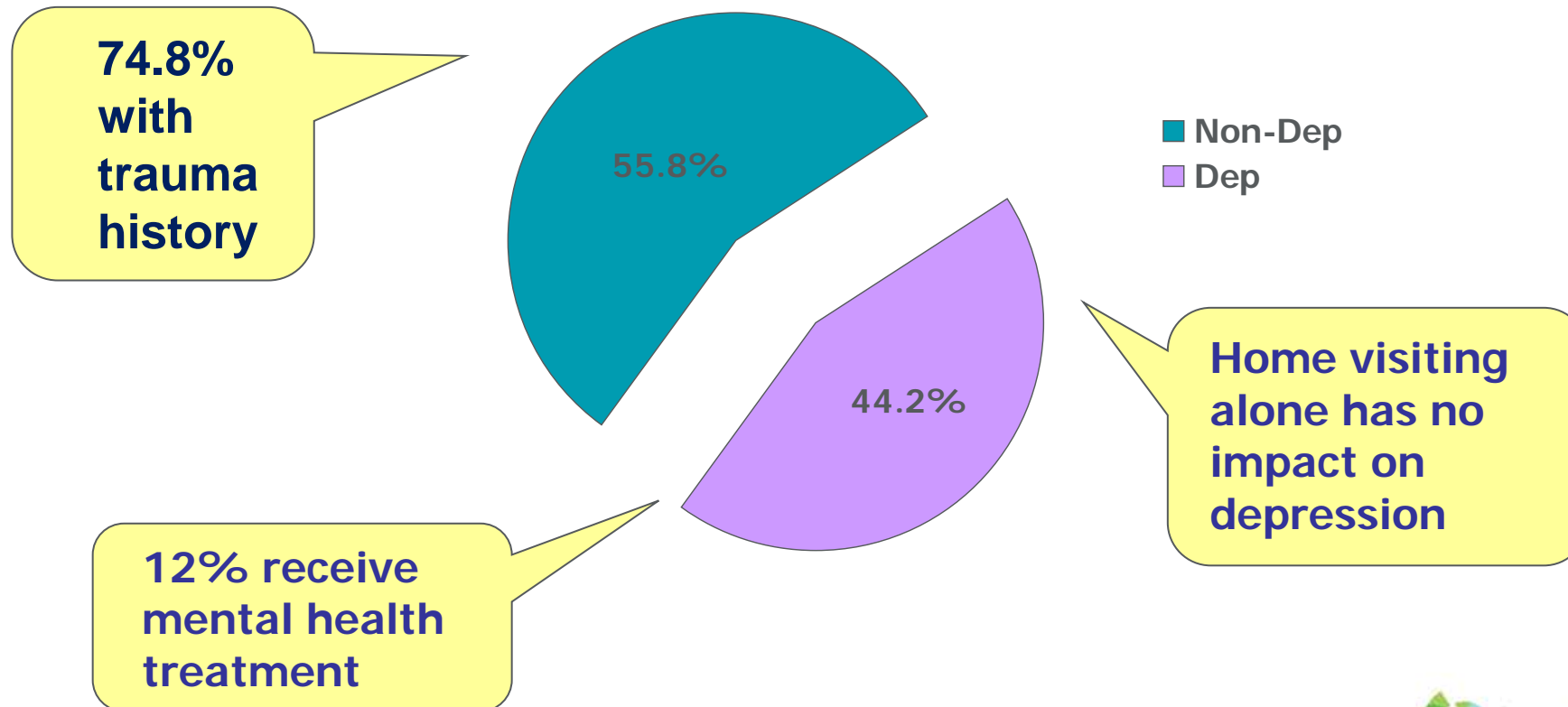


Shenk, Ammerman, et al., (2017), *Prevention Science*

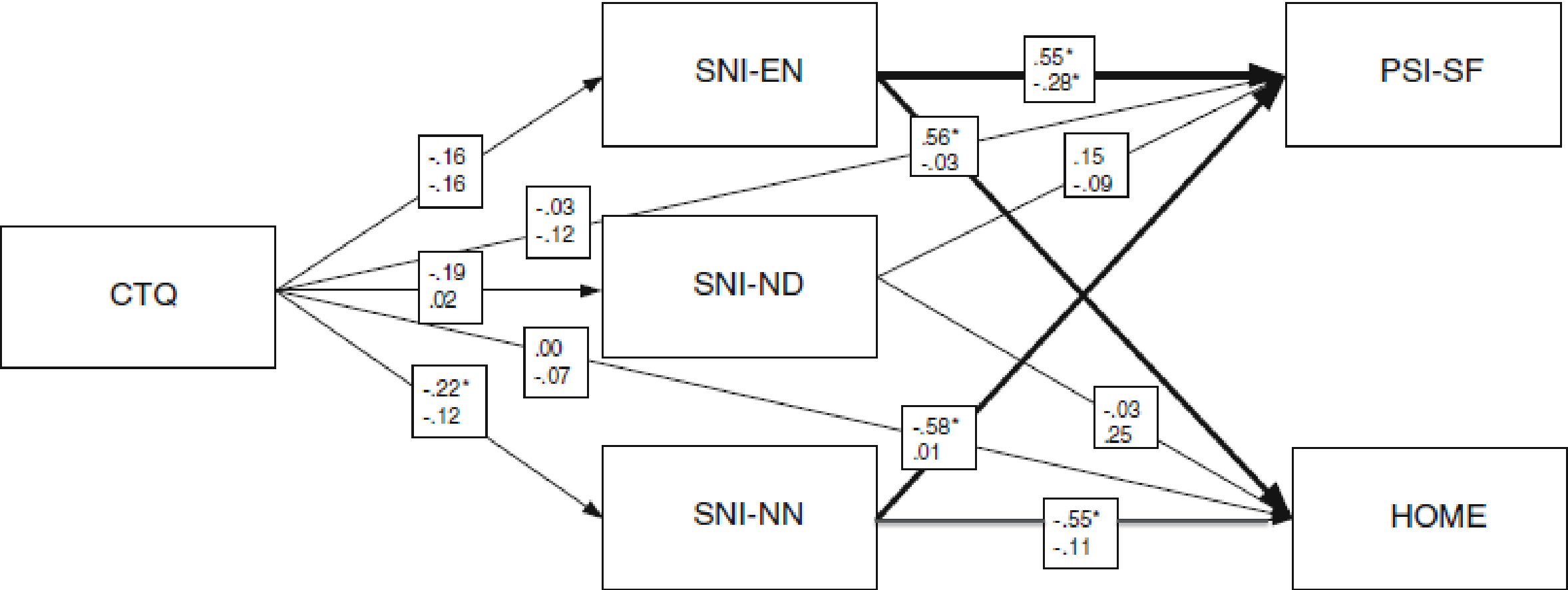
# Conclusions

- Trauma predicts increased parenting stress at 18 months of home visiting
- Both social support and depression are the ways in which trauma predicts parenting stress
- Timing is important
- Home visiting may not be as effective for mothers with a history of maltreatment in childhood
- More efficient targeting may improve home visiting effects

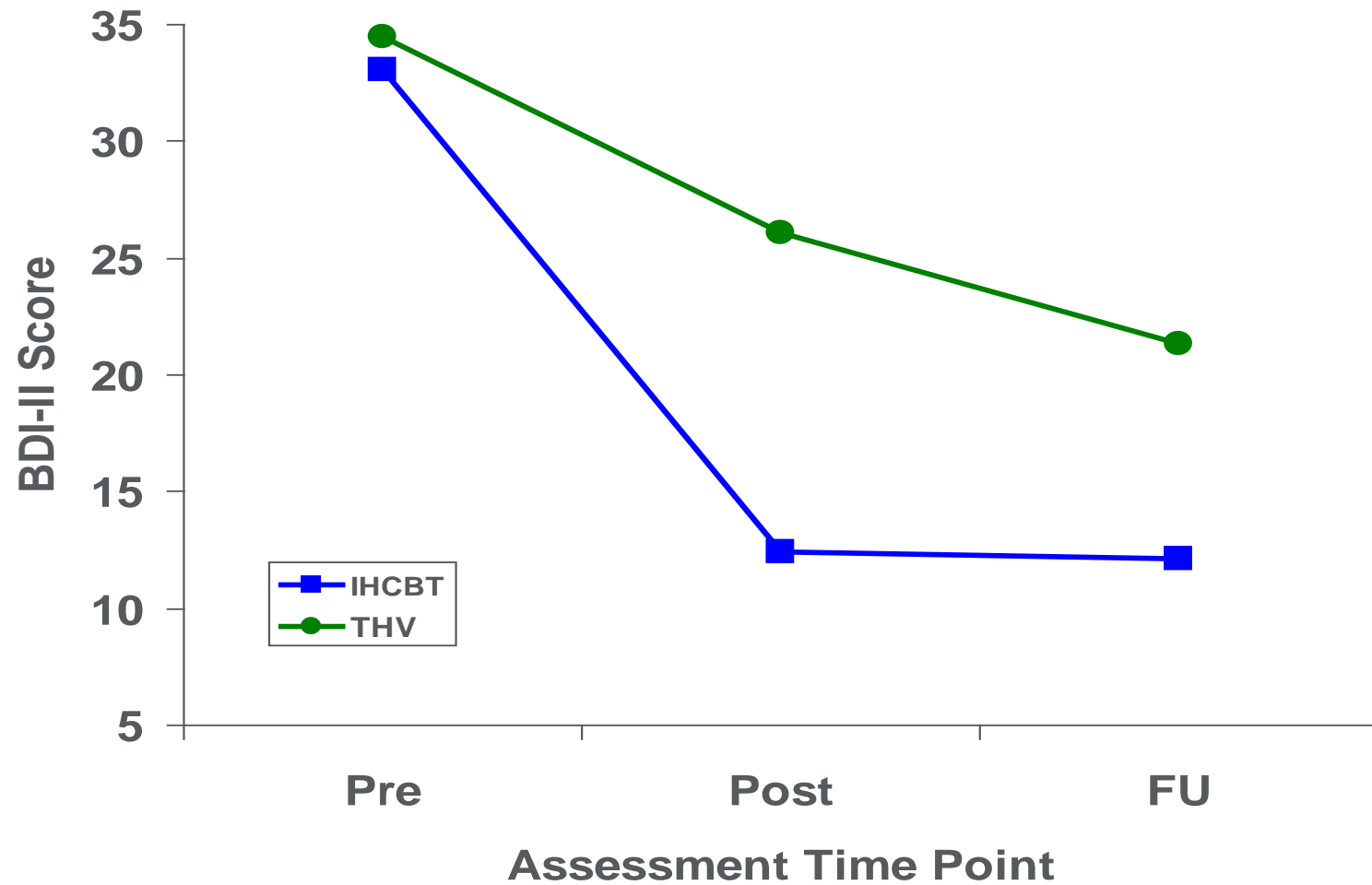
**Course of Depression (BDI > 13 @ enrollment and/or 9 months) in home visitation (N = 806)**



# Depression and parenting and parenting stress

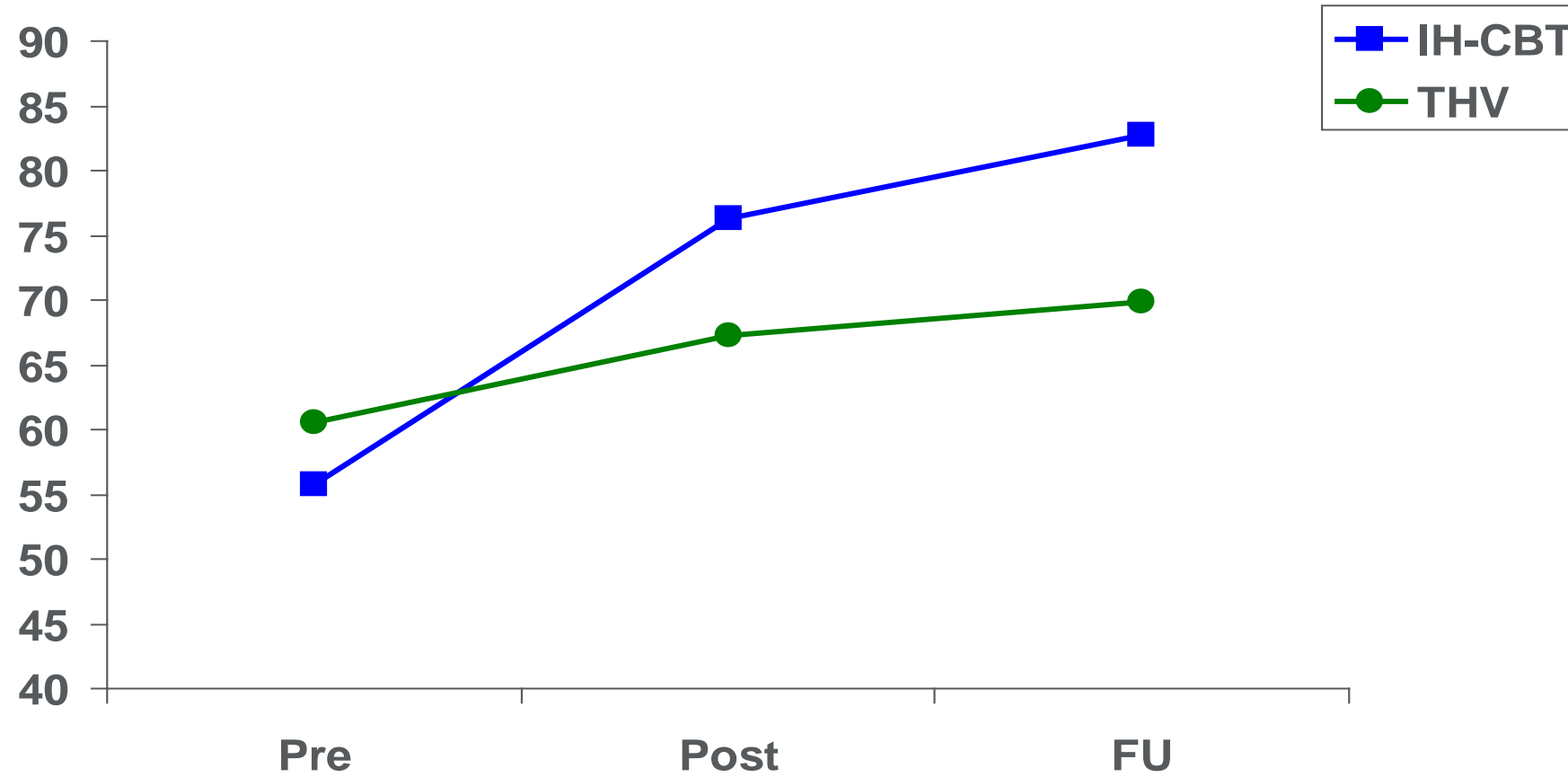


## BDI-II Scores at Pre-Treatment, Post-Treatment, & Follow-Up

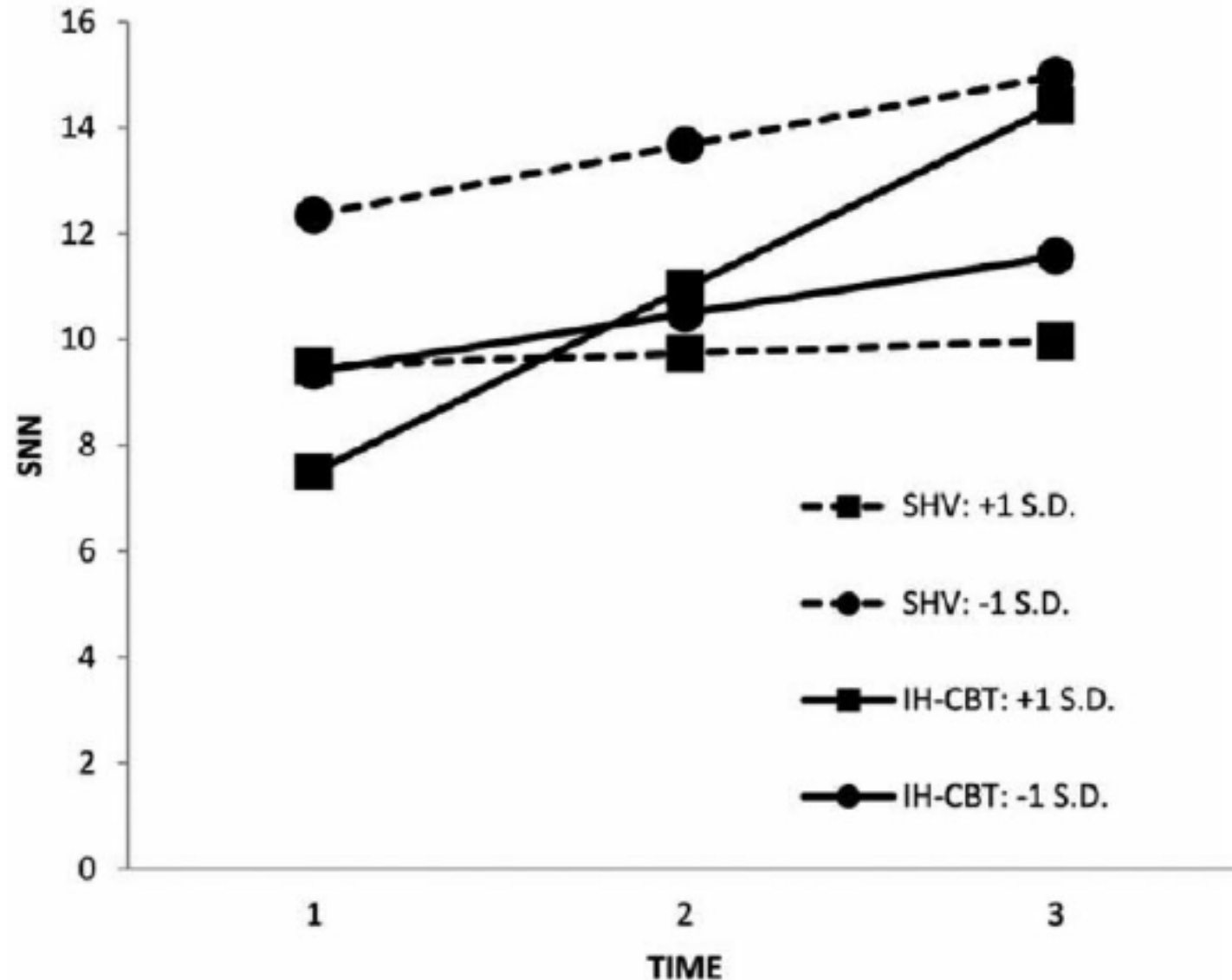




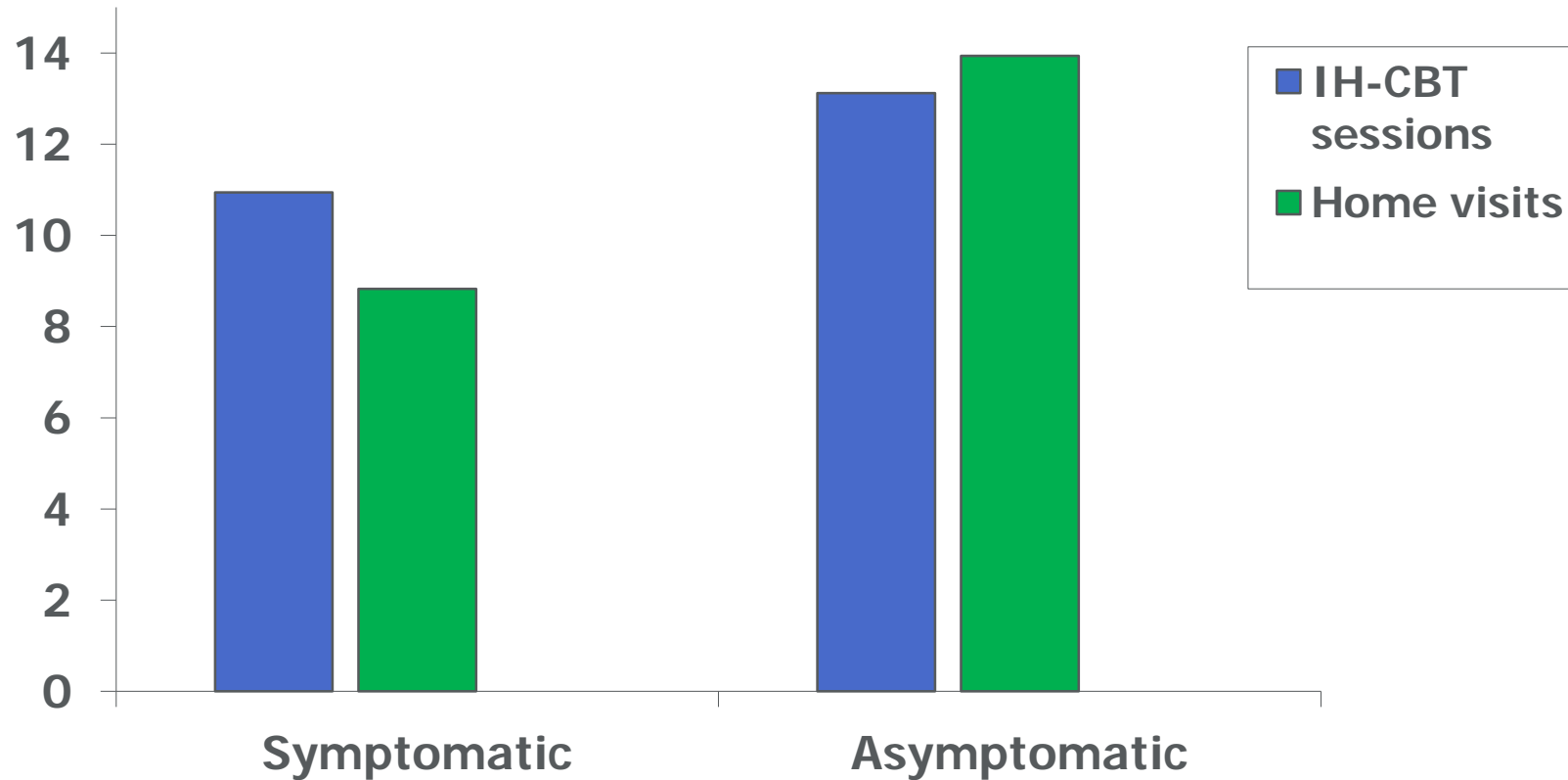
# Social Support Using ISEL Scale (Total)



# Treatment of depression & past history of sexual abuse



# Predictors of symptom status at post-treatment



*Ammerman, R.T., Peugh, J.L., Putnam, F.W., & Van Ginkel, J.B. (2012). Predictors of treatment response in depressed mothers receiving In-Home Cognitive Behavioral Therapy and concurrent home visiting. Behavior Modification, 36, 462-481.*

# What is trauma-informed home visiting?

## Current conceptualization:

- Understanding of trauma and its effects
- Increased awareness and recognition
- ALSO:
  - Identification of depression
  - Prevention and treatment of depression
  - Increasing natural social supports
  - Building positive social networks
  - Timing of interventions

# What can we do in home visiting to make it more trauma informed?

- Mood management
  - Pleasant events
  - Cognitive reframing
  - Overcoming avoidance
- Social network and support
  - Social network analysis
  - Reconnecting with lost social resources
  - Accessing underutilized resources
  - Social skills
  - Reducing social anxiety and building confidence

# Depression-prevention

## **Depression in Mothers: More Than the Blues**

*A Toolkit for Family Service Providers*



*Information about depression  
Screening  
Supporting mothers  
Making referrals  
Examples: Pleasant activities  
Resources*

**Available for free download  
at the SAMHSA store:  
<http://store.samhsa.gov/>**



# Next steps

- Developing new interventions for use in home visiting
- Greater emphasis on depression and social support
- Greater appreciation for timing of strategies
- Incorporating intervention into home visiting
- Modifying curriculum and training

# Questions and Comments?

