Implementing a Gender-Responsive, Trauma-Informed System of Care for Young Women with Trauma Histories and Their Families

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Abstract—Young women who have experienced significant trauma face significant challenges in accessing and navigating services in the Hawai‘i System of Care (SOC) to effectively address their educational, financial, legal, behavioral health, social and independence needs. As one of 29 sites participating from 2009 to 2015 in the federally funded Children’s Mental Health Initiative (CMHI), Project Kealahou (PK) promotes System of Care (SOC) principles: community-based, individualized, culturally and linguistically competent, family-driven, youth-guided and evidence-based services. Project Kealahou coordinates among the state’s mental health, juvenile justice, education and child welfare systems to promote system of care principles in Hawai‘i. Project Kealahou offers gender-responsive, trauma-informed services and supports to a target population of females ages 11-21 years who have experienced trauma and have been diagnosed with a mental health disorder that meets standardized diagnostic criteria. Results from the first two years of the implementation of Project Kealahou highlight the family, socioeconomic, functional, and interpersonal challenges faced by girls and their families who receive services in the Hawai‘i system of care. Results suggest that Project Kealahou may serve as a model for a cost-effective way to improve care and outcomes for at-risk youth and their families in Hawai‘i.

**Hawai‘i System of Care**

**S V E R I C E S**

- Education
- Children
- Youth Activities
- Parent Support
- Mental Health
- Personal Health
- Circles
- Peer Support
- Independent Outreach
- Trauma Focused CFT

**CHARACTERISTICS OF YOUTH AT INTAKE**

- **Primary Diagnoses***
  - Mood (44%)
  - Substance Abuse (35%)
  - Conduct Disorder (31%)
- **Youth History:**
  - Native Hawaiian (57%)
  - White (55%)
  - Chinese (37%)
  - Filipino (37%)
- **Most Reported Ethnicities***
  - Native Hawaiin
  - Suicide Attempt (33%)
  - DV Witness (67%)
  - Survivor of Assault: Physical (44%), Sexual (35%)

**Youth Competence**

Youth Competence may report more than one primary diagnosis and may indicate more than one ethnicity.

Youth Impairment

Youth Impairment measures the degree of impairment as measured by caregiver responses to the Child Behavior Checklist (CBCL). Youth demonstrated significant improvement in scores at 6-month follow-up in areas such as getting into trouble, getting along with others, treatment in activities, feeling sad, nervous, etc. (p = 0.027).

**Intake**

- **Impaired Competence (27%)**
- **Aggression (25%)**
- **Emotional Processing (44%)**
- **Natural Consequences** (53%)

**Treatment Engagement (25%)**

- **Better Grades** 13%
- **Treatment Targets** Decreased
- **Problem Solving** (55%)
- **+ Family Functioning** (20%)
- **Substance Use** (20%)

**Primary Diagnoses**

- **Mentoring** (44%)
- **Anger (25%)**
- **Activity Involvement** (17%)
- **Goal Setting*** (46%)
- **School Refusal/Truancy** (12%)

**Outcomes at 6 Month Follow-Up**

- **Improved Competence**
- **Improved Strengths**
- **Lower Arrest Rates**
- **Better Grades**
- **Improved School Attendance**
- **Increased Behavior/Emotion Problems**

**School Absences**

School absences are based on youth and caregiver responses to the Youth Services Survey (YSY/SYS-F) in regards to the previous 6 months of services received. Scores for each item range from 1 to 5. A score above 3.5 is regarded as positive.

- **Intake**
  - 6-month follow-up

**Caregiver Strain**

Caregiver strain measures the degree of strain as measured by caregiver responses to the Caregiver Strain Questionnaire (CSQ). Caregivers reported significantly less strain (e.g., worry, guilt, resentment) in regards to 6-month follow-up (p = 0.003).

- **Intake**
  - 6-month follow-up

**Youth/Caregiver Satisfaction Levels**

Saturation levels are based on youth and caregiver responses to the Youth Services Survey (YSY/SYS-F) in regards to the previous 6 months of services received. Scores for each item range from 1 to 5. A score above 3.5 is regarded as positive.

- **Intake**
  - 6-month follow-up

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*Evidence Based Practice (EBS)*

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**Youth/Caregiver Satisfaction Levels**

- **Acute**
  - 6-month follow-up

**Outcomes**

- **Decreased Impairment**
- **Decreased Depression**
- **Less Caregiver Strain**

**PK vs. Usual Care – Treatment Targets**

- **Top 10 UC Targets**
  - 1. Family Functioning (55%)
  - 2. Oppositional Behavior (47%)
  - 3. Academic Achievement (36%)
  - 4. Anger (31%)
  - 5. Aggression (27%)
  - 6. Treatment Engagement (25%)
  - 7. Substance Use (20%)
  - 8. Anxiety (19%)
  - 9. Social Skills (18%)
  - 10. Peer Interaction (13%)

- **Top 10 PK Targets**
  - 1. Traumatic Stress (42%)
  - 2. ACT (25%)
  - 3. Depressed Mood (23%)
  - 4. Anxiety (20%)
  - 5. + Family Functioning (20%)
  - 6. Treatment Engagement (18%)
  - 7. Activity Involvement (17%)
  - 8. Avoidance (13%)
  - 9. Substance Use (13%)
  - 10. School Refusal/Truancy (12%)

**PK vs. Usual Care – Intervention Strategies**

- **Top 10 PK Strategies**
  - 1. Supportive Listening (78%)
  - 2. Rapport Building* (62%)
  - 3. Mentoring (44%)
  - 4. Modeling* (40%)
  - 5. Communication Skills* (39%)
  - 6. Theorist Insight* (36%)
  - 7. Goal Setting* (46%)
  - 8. Relapse Prevention* (46%)
  - 9. Peer Pairing (28%)
  - 10. Cognitive* (27%)

**Principles of Systems of Care**

- **Family/Guided**
- **Value-Driven Systems Change**
- **Collaborative & Individual**
- **Culturally & Linguistically Competent**
- **Accessible & Affordable**
- **Responsive, Trauma-Informed**
- **Least Restrictive & Interagency, Collaborative & Coordinated Efforts**

**Youth Competence**

Youth Competence includes seven domains: social, educational, and other activities, feeling sad, nervous, etc. (p = 0.017).

**Data**

- **Ethnicities of Girls Served by PK**
  - **57%**
  - **37%**
  - **18%**
  - **15%**
  - **13%**
  - **7%**
  - **0%**
  - **10%**
  - **20%**
  - **30%**
  - **40%**
  - **50%**
  - **60%**
  - **70%**
  - **80%**
  - **90%**
  - **100%**

**Outcomes**

- **Intake**
  - **6-month follow-up**

**Youth Impairment**

Youth Impairment includes four domains: impaired competence, improved competence, decreased competency, and increased competency (p = 0.017).

**Intake**

- **Socioeconomic, functional, and interpersonal challenges faced by girls and their families who receive services in the Hawai‘i system of care.**

**Values**

- **System of Care (SOC) principles:**
  - Ensure services for youth and their families are family-driven, youth-guided, individualized, culturally and linguistically competent, accessible, community-based, least restrictive and provided through interagency, collaborative and coordinated efforts.