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Trauma-Informed Practice and Self-Efficacy of Early Interventionists in Tennessee

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Introduction

- There is a growing need to understand early interventionists' (EIs) knowledge and attitudes surrounding trauma-informed practices to enable them to deliver effective care for families of infants with early adversity.
- Early exposure to adversity or trauma is prevalent in rural areas (Yuan et al., 2022).
- Therefore, EIs in Tennessee are likely to be working with families experiencing adversity.
- Previous literature suggests adverse experiences may be mitigated through proper trauma-informed interventions (Champine et al., 2022).
- Therefore, it is essential to understand whether EIs are familiar with and feel comfortable applying trauma-informed practices.

Purpose

The purpose of the current study was to understand the knowledge and attitudes of EIs surrounding trauma-informed practices and examine whether it was related to EIs self-efficacy.

Methods

- An online survey was developed and distributed to the target population of all credentialed EIs (excluding SLPs, OTs and PTs) who deliver services across the state of Tennessee, United States.
- This abstract focuses on an 11-item survey on Trauma-Informed Practices and Self Reflections (TIPSR) and a 15-item survey of self-efficacy (Lamorey & Wilcox, 2005).
- 84 EIs completed the survey.
- Participants were mainly female (96.7%), on average, 41 years old, with 0-2 years of involvement with EI services. Most respondents worked in community-based EI programs for young children with disabilities (71.4%), were employed by a non-profit organization (58.2%). The highest degree for most respondents was a bachelor's degree (59.3%). On average, participants had 20 families on their caseload.

Results

Descriptive Statistics ▼

	TIPSR_sum	SE_general	SE_personal
Valid	82	84	84
Missing	10	8	8
Median	13.000	1.500	14.500
Mean	13.549	1.476	14.321
Std. Error of Mean	0.697	0.427	0.487
Std. Deviation	6.315	3.916	4.462
Minimum	-3.000	-7.000	5.000
Maximum	22.000	10.000	24.000

Table 1. Descriptive statistics for outcome variables, TIPSR and self-efficacy subscales.

Figure 1. Scatterplots with linear regression line (blue) and 95% confidence interval (gray).

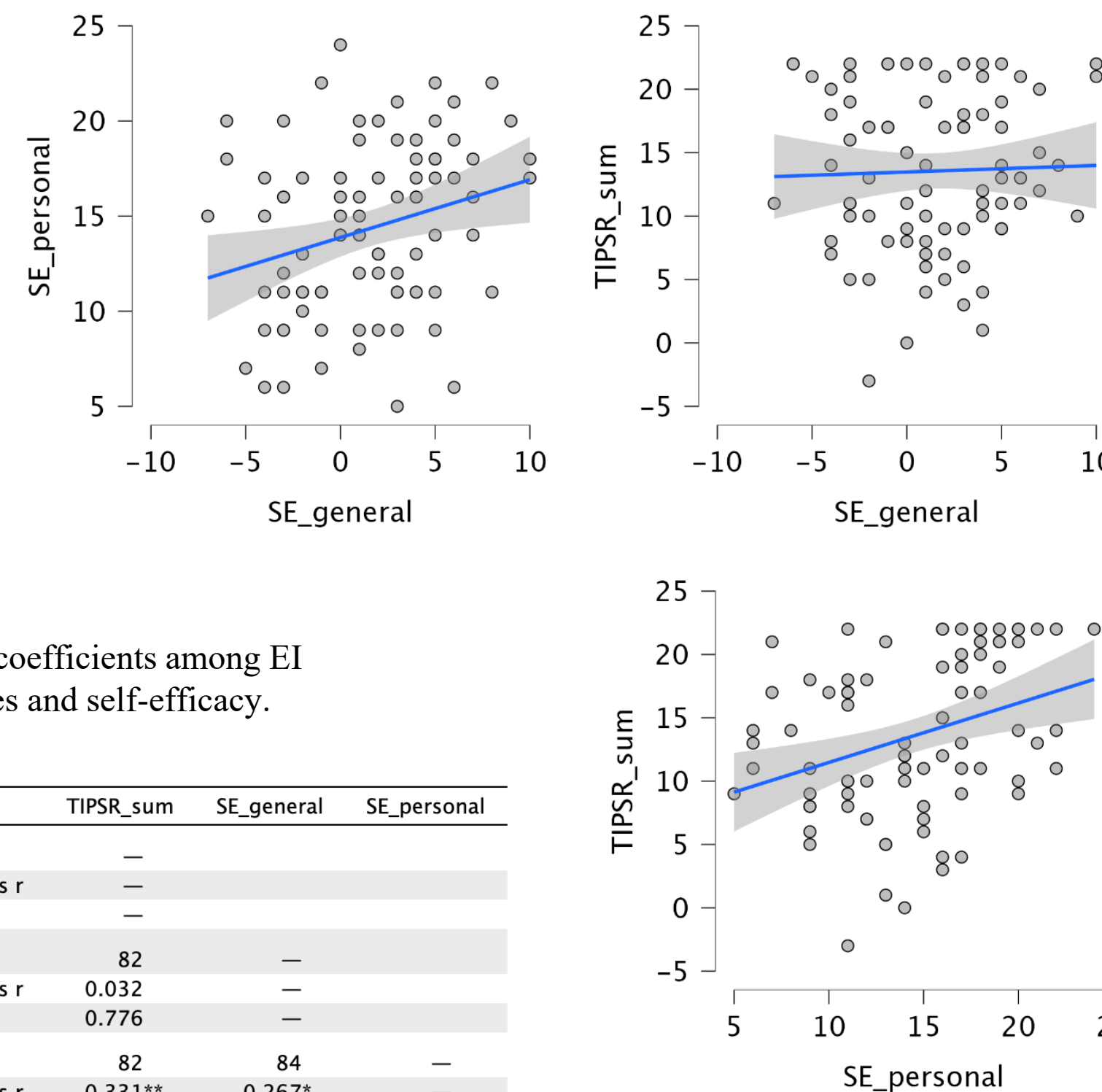


Table 2. Correlation coefficients among EI reported TIPSR scores and self-efficacy.

Pearson's Correlations ▼

Variable	TIPSR_sum	SE_general	SE_personal
1. TIPSR_sum	n	—	—
	Pearson's r	—	—
	p-value	—	—
2. SE_general	n	82	—
	Pearson's r	0.032	—
	p-value	0.776	—
3. SE_personal	n	82	84
	Pearson's r	0.331**	0.267*
	p-value	0.002	0.014

* p < .05, ** p < .01, *** p < .001

Results

- On average, EIs reported moderate knowledge of trauma-informed practices and self-reflection (M = 13.55, SD = 6.32).
- EIs' self-efficacy scores on the general subscale (M = 1.48, SD = 3.92) were lower than their self-efficacy scores on the personal subscale (M = 14.32, SD = 4.46).
- There was a statistically significant correlation between EIs reported knowledge of TIPSR and personal self-efficacy, $r = 0.33$, $p = .002$, but not EIs reported knowledge of TIPSR and general self-efficacy, $r = 0.03$, $p = .78$.

Discussion

- Given the high prevalence of early childhood adversity in the United States, and specifically in Appalachia, it will be important to develop trainings targeting trauma-informed practices and self-reflection for early interventionists across the State of Tennessee.
- Our data indicates that EIs are familiar with these terms and trauma-informed practices, but may not feel comfortable with implementation of such practices in early intervention or Individualized Family Service Plan.
- This additional education will further empower and increase the confidence of EIs when working with infants and children with early adversity and their families. While the current study is limited to developmental therapists within the state of Tennessee, it is our hope that future research will extend to other states and other professionals working within the EI setting.

References

