Adolescents in the juvenile justice system present with significant, often unmet, mental health needs including disruptive behavior problems, substance abuse, mood disorders, and sequelae of traumatic stress. Over 90% of youth in detention have experienced trauma (Rosenberg, 2013). Untreated trauma symptoms can interfere with normal developmental processes and lead to serious emotional and behavioral problems. These problems are associated with a wide range of negative outcomes relating to psychosocial functioning, placement stability and permanency, and subsequent criminal behavior. As a subset of youth in juvenile justice, adolescents with sexual behavior problems (ASBP) have very high rates of trauma exposure—particularly with respect to sexual abuse (Seto & Lalumière, 2010). Compared to other delinquent youth, ASBP experience additional negative outcomes due to the nature of their offenses. Certain negative outcomes indirectly result from societal stigma surrounding sexually based offenses (e.g., educational and occupational discrimination) while others are a direct result of draconian registration and notification requirements imposed by states who have adopted the Sex Offender Registration and Notification Act (SORNA). For ASBP youth with trauma symptoms, this presents a challenging context for treatment of either their trauma symptoms or their sexual behavior problems, yet it is even more critical that ASBP with trauma symptoms receive effective treatments.

Over the last decade, there has been tremendous interest in the field to increase the use of evidence-based treatments (EBTs) that target specific mental health problems and the needs of youth in juvenile justice including ASBP. Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) has the strongest evidence base of any treatment for trauma symptoms in children and adolescents—demonstrating efficacy in numerous randomized controlled trials and considered the “gold standard” for trauma treatment by Substance Abuse and Mental Health Services Administration (SAMHSA; CEBC, 2015). TF-CBT has been widely adopted by clinicians and organizations nationally and internationally for use with children and families impacted by childhood trauma. Despite its demonstrated efficacy with many community populations, very little research has examined TF-CBT delivery and implementation in residential settings or with ASBP samples (Annie Casey Foundation, 2014; Chaffin, 2008). While TF-CBT is a promising EBT, there are many additional complexities and challenges that must be considered with the delivery and implementation of EBTs and trauma-informed care programming in a residential setting.
This interactive workshop will provide a practical discussion of lessons learned in the ongoing implementation of trauma-informed care and EBT in a residential treatment program for adjudicated ASBP. We will focus on recent implementation efforts with TF-CBT and will review other components of trauma-informed care within the facility. We will review the TF-CBT model, implementation tips, and review preliminary results. We will discuss how we tackled core implementation objectives on the ground in an accelerated timeframe. Workshop participants will also be able to ask participating staff and administrators about their experiences with implementation.

Learning Goals and Objectives
Workshop participants will:

- Learn more about trauma-informed care and the use of Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and other evidence-based treatments (EBTs) in adolescents with sexual behavior problems (ASBP).
- Understand the core components of the TF-CBT model with a focus on areas of specific concern with this population along with helpful tips for implementation.
- Learn about implementation models in juvenile justice and the National Child Traumatic Stress Network (NCTSN) guidelines for TIC and TF-CBT implementation as well as the implementation objectives and challenges for the current project.
- Gain practical knowledge about TIC and EBT implementation by learning from the experiences of facility staff and administrators.
- Learn practical tips for learning and integrating EBTs in clinical practice.