Trauma Symptom Severity and Subjective Well-being in Caregivers of Children



with Medically Complex Needs



Ayomide Popoola¹, BSc, Courtney Holmes¹, Ph.D., Tiffany Kimbrough², MD, Kanako Iwanaga¹, Ph.D., Marcia A. Winter¹, Ph.D., Simran Singh¹, MS, Jenny Heymann¹,BS & Heather A. Jones¹, Ph.D.

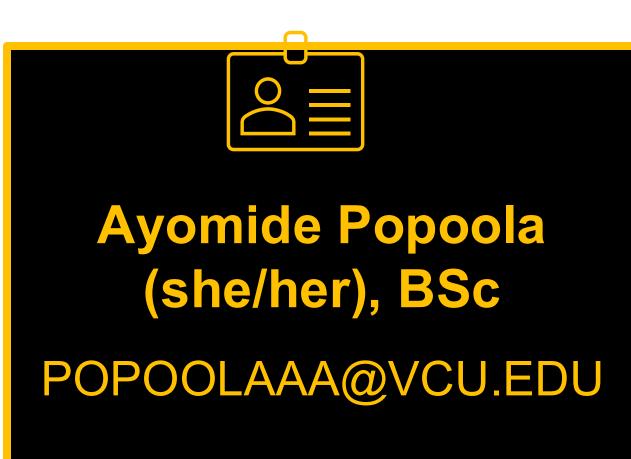
¹ Virginia Commonwealth University, ² Children's Hospital of Richmond

INTRODUCTION

- ☐ Children with medically complex needs most medically fragile among all children with specialized needs
- ☐ Often require intensive specialized care, which
 - ☐ Places additional demands on their caregivers (Teicher et al., 2023).
- ☐ Parent caregivers report elevated symptoms of trauma (Carmassi et al., 2020).

STUDY AIMS

- To describe the relationship between trauma symptom severity and subjective well-being in this population
- To investigate potential mediators (i.e., resilience, emotional support, informational support, adaptive coping) of this relationship





METHOD Participant Characteristics (N = 121): Indian/Alaska Native 1% ☐ Gender Identity: Woman 91%, Man 7%, Non-binary <1% ☐ **HH Income:** 45% <\$50k, 23% \$50k – 99k, 32% \$100k+ ☐ **NICU Stay:** 75% Yes, 25% No ☐ Insurance: Medicaid/CHIP 50%, Private 38%, Other 12% Structured Trauma-Satisfaction with Life Related Experiences and Symptoms (Diener et al., 1985) Screener (Grasso et al., 2018) PROMIS Social Support Measure (Hahn et al., 2014) Brief Resilience Scale (Smith et al., 2008)

- ☐ Race: White 53%, Black 38%, Multiracial 5%, Asian 2%, American

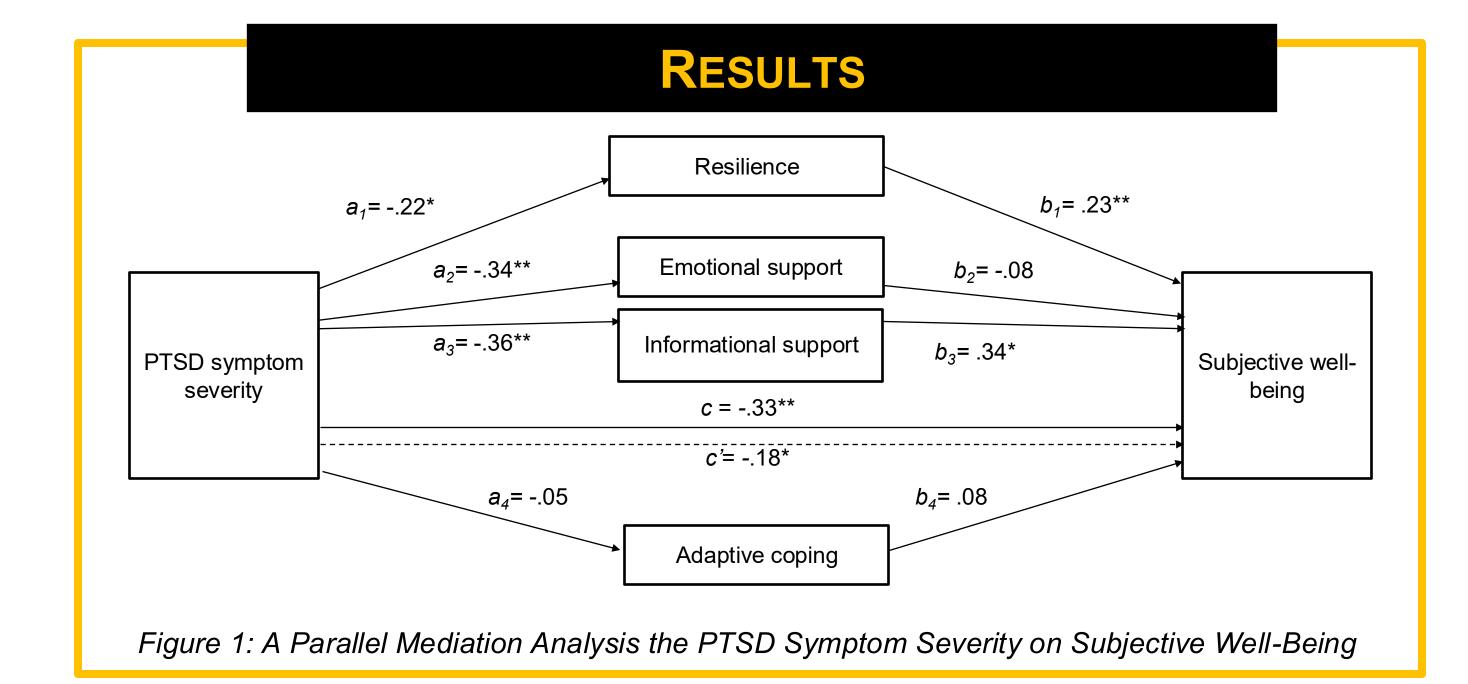
- ☐ Marital Status: Married/Partnered 54%, Single 34%, Other 12%

Measures:

Coping Flexibility Scale (Kato, 2012)

Procedure:

- ☐ Recruitment: during both in-person and telehealth routine appointments in an integrated care clinic in the Southeastern United States
- ☐ Completed a battery of questionnaires through the REDCap online survey platform
- ☐ Inclusion criteria at lease 18 years old, had a child enrolled in the complex care clinic, English speaking



DISCUSSION

- ☐ Informational support significantly mediated the relationship between PTSD symptoms and well-being.
 - ☐ May play unique and practical role in helping caregivers manage the demands of complex care settings (Hirt, 2023; Edelstein, 2017).
- ☐ Resilience also emerged as a significant mediator
 - ☐ Ability to adapt and recover from adversity may protect caregiver well-being despite trauma symptoms (Southwick et al., 2012).
- ☐ Persistence of a **direct effect** between PTSD symptoms and well-being
 - ☐ Additional factors, such as caregiver burden, financial stress, and sleep difficulties, may contribute to outcomes.
- ☐ Limitations: cross-sectional design, single-informant data collection