

Brain Development, Trauma, and Resilience Training

March 1, 2022

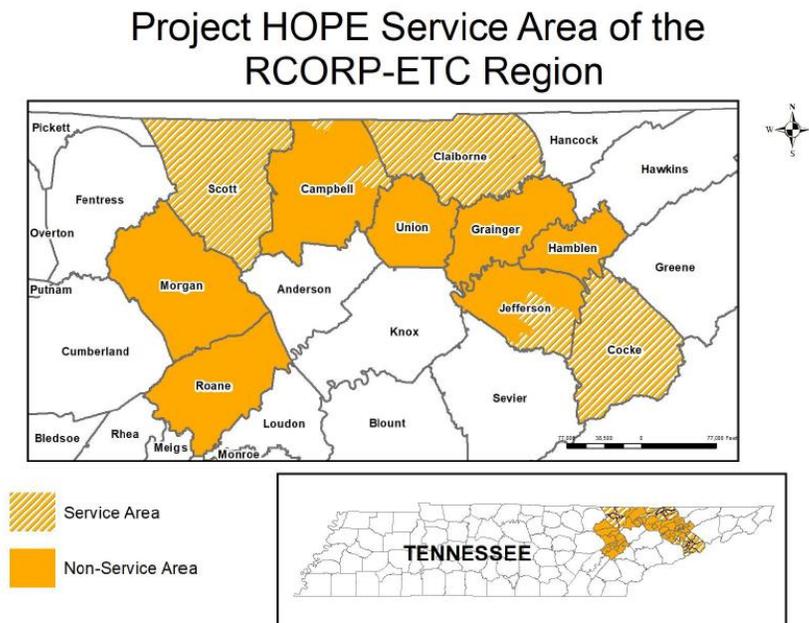
Youth Development Collaborative Training

On March 1, 2022, Project HOPE (Healing Opioid Use Disorder Through Prevention and Expertise) Youth Development Collaborative provided an online event for anti-drug coalition members who work with youth including those in the Project HOPE area. The 1-hour event included a training session on brain development, trauma, and resilience presented by Kyler Groner and Ahdyia Attea.

Attendees

The Project HOPE service area includes 5 counties in East Tennessee: Scott, Claiborne, Cocke, Jefferson, and Campbell (see Figure 1). The consortium is co-led by the University of Tennessee, Knoxville and has more than 150 members. The training was disseminated through an anti-drug coalition to all their members. A total of 20 professionals attended.

Figure1. Project HOPE region and service area



Evaluation

Of the 20 attendees, 16 completed the evaluation survey (80%). Community professionals who attended the training included social workers, non-profit professionals, prevention specialists, and volunteers. The attendees work in or serve one or more of 11 counties: Anderson, Blount, Claiborne, Campbell, Davidson, Knoxville, Roane, Scott, Morgan, Monroe, and Union.

Evaluation of Training

The overall experience of the training was well regarded among attendees, as 94% of participants would recommend the training session to a colleague.

Attendees indicated how satisfied they were with the training, possible answers ranged from *very dissatisfied* (1) to *very satisfied* (5). On average, participants' answers ranged between *satisfied* (4) and *very satisfied* (5) on every question. Attendees were very satisfied with the relevance of the training to their needs (4.50), training content (4.47), engagement of the training (4.44), knowledge of the facilitators (4.38), and mix of presentation and activities (4.19).

Attendees shared how much they knew before and after the training session, retrospectively for a series of learning objectives. Possible answers ranged from *nothing at all* (1) to *a whole lot* (4). On average, attendees reported knowing between *a little bit* to *a whole lot* before the training (grand mean= 3.13) and between *a lot* to *a whole lot* after the training (grand mean=3.58, $p<.01$). There were significant increases in knowledge reported in most learning objectives within the training session (Table 1). The largest increase was in clarifying trauma-informed resilience-building strategies for working with youth ($p<.001$) and describing critical periods of brain development ($p<.01$), followed by understanding how adverse childhood experiences (ACEs) impact behavior and brain development ($p<.05$), identifying basic processes of brain development ($p<.05$), and defining resilience ($p<.05$).

Table 1.

Learning Objectives	Pre-Score	Post-Score	Mean Difference	p-value
Basic processes of brain development	3.31	3.63	0.31	0.020
Critical periods of brain development	3.13	3.50	0.37	0.009
How adverse childhood experiences impact behavior and brain development	3.19	3.63	0.44	0.014
Define resilience	3.19	3.56	0.37	0.029
Trauma-informed resilience-building strategies for working with youth	2.81	3.56	0.75	<0.001

When asked if attendees learned anything new, most attendees (69%) indicated yes, they had learned new information. Examples included learning how to open communication lines with youth, the comprehensive approach to youth resilience, common occurrence of ACEs in the population, stages of brain development, as well as ACEs and the effects on the brain development.

Suggestions from Attendees

Attendees were asked to provide insight on how future training may be improved. Most attendees had no recommendations, saying the training was excellent. Two recommendations were having a longer meeting so the material can be broken down and having a discussion on brain development, and providing more opportunities for participation to increase engagement.