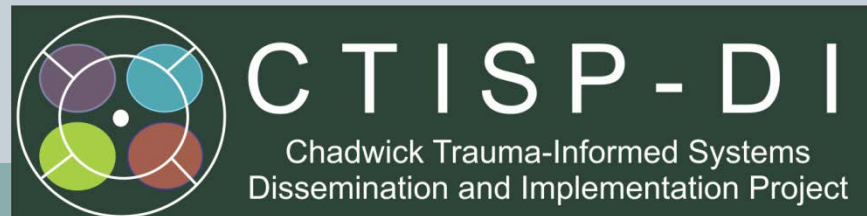


Creating a Trauma-Informed Child Welfare System: Transforming Policy and Practice



LISA CONRADI, PSY.D. AND
BRENT CRANDAL, PH.D.

CHADWICK CENTER FOR CHILDREN AND
FAMILIES
RADY CHILDREN'S HOSPITAL – SAN DIEGO



Presentation Objectives

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- Participants will be able to define and describe the essential components of a trauma-informed child welfare system
- Participants will identify resources available within the “Trauma-Informed Child Welfare Practice Toolkit”
- Participants will be able to identify strategies that California is currently putting into place in order to create a more trauma-informed system.

Child Welfare System



- **Public Child Welfare Agency**
- **Department of Social Services (Child and Family Services)**
- **Public and Private Mental Health Agencies**
- **Non-Profit Social Service Agencies**
- **Specialty Programs (i.e., Substance Abuse and Domestic Violence)**
- **Juvenile and Family Courts**
- **Juvenile Justice**
- **Law Enforcement**
- **Attorneys and Advocates**
- **Child Advocacy Centers**
- **Foster Care and Adoption Agencies and Associations**
- **Schools**
- **Public Health Department**
- **Tribal, Community, and Faith-Based Organizations**

Seeing Through a Trauma Lens



Definition of Trauma-Informed Child Welfare System



A trauma-informed child welfare system is one in which all parties involved recognize and respond to the varying impact of traumatic stress on children, caregivers, families, and those who have contact with the system. Programs and organizations within the system infuse this knowledge, awareness, and skills into their organizational cultures, policies, and practices. They act in collaboration, using the best available science, to facilitate and support resiliency and recovery.

Why is this Important?



The research is clear that the experience of abuse or neglect leaves a particular traumatic fingerprint on the development of children that cannot be ignored if the child welfare system is to meaningfully improve the life trajectories of maltreated children, not merely keep them safe from harm.

- Bryan Samuels, Commissioner for the Administration on Children, Youth and Families
Testimony to House Ways and Means Subcommittee on Human Resources, Congress on 6/16/2011

Essential Elements of a Trauma-Informed Child Welfare System



Essential Elements of a Trauma-Informed Child Welfare System

(continued)

1. Maximize physical and psychological safety for children and families.
2. Identify trauma-related needs of children and families.
3. Enhance child well-being and resilience.
4. Enhance family well-being and resilience.
5. Enhance the well-being and resilience of those working in the system.
6. Partner with youth and families.
7. Partner with agencies and systems that interact with children and families.

How Can we Create a More Trauma-Informed Child Welfare System?

- **Chadwick Trauma-Informed Systems Project**
 - Trauma-Informed Child Welfare Practice Toolkit
- **Materials and resources**
 - Child Welfare Trauma Training Toolkit – Revised Version
 - Caring for Children who have Experienced Trauma: A Resource Parent Curriculum

Chadwick Trauma-Informed Systems Project (CTISP)

**SAMHSA funded (2010-2013) as
Category II NCTSN Site**

Goals

- **Provide leadership in identifying effective treatments and developing specialized service delivery models to children in the public child welfare system who have been victims of abuse and/or domestic violence**
- **Support the evolution of public child welfare agencies into trauma-informed organizations and agents of change in their communities**
- **Transform the wider child welfare system into a multi-dimensional, trauma-informed, evidence-based system**

CTISP Products



- **Trauma-Informed Child Welfare Practice Toolkit**
 - *Trauma System Readiness Tool*
 - *Creating Trauma-Informed Child Welfare Systems: A Guide for Administrators*
 - *Guidelines for Applying a Trauma Lens to a Child Welfare Practice Model*
 - *Desk Guide on Trauma-Informed Mental Health for Child Welfare*
 - *Desk Guide on Trauma-Informed Child Welfare for Mental Health*
- Available online at www.ctisp.org

Trauma System Readiness Tool



- 150-item self-assessment instrument
- Completed by child welfare staff at multiple levels (line staff, supervisors, administrators)
- Domains incorporate the *Essential Elements of a Trauma-Informed Child Welfare System* and core principles of trauma-informed care
- For each item, participants respond on a six-point Likert scale (from *Strongly Disagree* to *Strongly Agree*)
- Converted into a computerized survey for ease of administration
- Can be modified/updated for other serving systems, such as mental health

Creating Trauma-Informed Child Welfare Systems: A Guide for Administrators



- Designed as a tool for the child welfare administrator who is interested in having their systems become more trauma-informed.
- Sections covered include:
 - Why is this important to child welfare?
 - Brief summary of the issue
 - Background of the Issue
 - Practice Implications for Administrators
 - Resources
 - References

Guidelines for Applying a Trauma Lens to a Child Welfare Practice Model



- Designed as a tool for the child welfare agency to use to assist them in making their child welfare casework practice model more trauma-informed.
- For each stage in casework practice, the following sections are included:
 - Overview of the particular stage
 - Importance of Addressing Trauma in this stage
 - Trauma-Informed Policies and Administrative Strategies
 - Trauma-Informed Supervisory Strategies
 - Trauma-Informed Practices
 - Community Examples

Desk Guide on Trauma-Informed Mental Health for Child Welfare

- Designed to assist child welfare workers and supervisors in understanding mental health services available for children in the child welfare system.
- Includes sections on:
 - Development
 - Screening
 - Assessment
 - Evidence-Based Mental Health Practices
 - Psychotropic Medication
 - Increasing Parental Protective Factors
 - Working with Substitute Care Providers
 - Working with Mental Health Professionals
 - Coordinating Services with Other Agencies
 - Glossary of Terms
 - TIP Sheet

Desk Guide on Trauma-Informed Child Welfare for Mental Health



- **Designed to assist mental health professionals in increasing their knowledge of the policies, practices, and culture of the child welfare system.**
- **Includes sections on:**
 - **Structure of the Child Welfare System**
 - **Understanding the Culture of the Child Welfare System**
 - **Child Welfare Practice**
 - **Screening and Referral**
 - **Investigation**
 - **Coordinating Services with Other Agencies**
 - **Psychotropic Medication**
 - **Working with Birth Parents**
 - **Working with Substitute Providers**
 - **Glossary of Terms**
 - **Frequently Asked Questions**



National Child Traumatic Stress Network Resources



Child Welfare Training Toolkit Overview



- **Developed by the Child Welfare Committee of the National Child Traumatic Stress Network, CALSWEC and CFPIC**
- **Goals of the Toolkit:**
 - To educate child welfare professionals about the impact of trauma on the development and behavior of children
 - To educate child welfare professionals about when and how to intervene directly in a trauma-sensitive manner and through strategic referrals
 - To assure that all children in the child welfare system will have access to timely, quality, and effective trauma-focused interventions and a case planning process that supports resilience in long-term healing and recovery

Child Welfare Trauma Training Toolkit

Overview

- Teaches child welfare workers how to use knowledge about child trauma to achieve the Child and Family Services Review (CFSR) goals:
 - Safety
 - Permanency
 - Well-Being
- Includes the following resources within the Toolkit:
 - Trainer's Guide
 - Participant Guide
 - Slide Kit
 - Comprehensive Guide
 - Resources and References
 - Companion CD-ROM

Child Welfare Trauma Training Toolkit

Modules



- **Module 1: Introduction – The Essential Elements of a Trauma-Informed Child Welfare System**
- **Module 2: What is Child Trauma and Child Traumatic Stress?**
- **Module 3: How Does Trauma Affect Children?**
- **Module 4: What is the Impact of Trauma on the Brain and Body?**
- **Module 5: What is the Influence of Developmental Stage?**
- **Module 6: What is the Influence of Culture?**
- **Module 7: Essential Element 1 – Maximize Physical and Psychological Safety for Children and Families**

Child Welfare Trauma Training Toolkit

Modules, Continued



- **Module 8: Essential Element 2 – Identify Trauma-Related Needs of Children and Families**
- **Module 9: Essential Element 3 – Enhance Child Well-Being and Resilience**
- **Module 10: Essential Element 4 – Enhance Family Well-Being and Resilience**
- **Module 11: Essential Element 5 – Enhance the Well-Being and Resilience of those Working in the System**
- **Module 12: Essential Element 6 – Partner with Youth and Families**
- **Module 13: Essential Element 7 – Partner with Agencies and Systems that Interact with Children and Families**
- **Module 14: Summary**



Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents

- NCTSN Training curriculum for foster, kinship, and adoptive parents
- Co-facilitated by a mental health professional and a foster parent
- Incorporates case studies and interactive learning exercises
- Goals:
 - To help resource parents understand link between trauma and child's behavior, feelings, and attitudes
 - To provide practical tools for resource parents to help children with coping skills and support their recovery from trauma
 - To help resource parents recognize and reduce impact of child's trauma on themselves and how to find support

Caring for Children Training Modules



1. Introductions

- Essential Elements of Trauma-Informed Parenting

2. Trauma 101

- Types of trauma, reactions to trauma

3. Understanding Trauma's Effects

4. Building a Safe Place

5. Dealing with Feelings and Behaviors

6. Connections and Healing

7. Becoming an Advocate

8. Taking Care of Yourself

Caring for Children Training Materials



- **Facilitator's Guide, Participant Handbook, slide kit, and handouts available:**
 - Free to download from NCTSN website:
www.nctsn.org/rpc
 - Bound copies of Participant Handbook can be purchased through FedEx Office DocStore



CTISP-DI

Chadwick Trauma-Informed Systems
Dissemination and Implementation Project



**CHADWICK TRAUMA-
INFORMED SYSTEMS
DISSEMINATION AND
IMPLEMENTATION PROJECT
(CTISP-DI)**

CTISP-DI: Goals and Objectives



- **SAMHSA-funded Category II Treatment and Services Adaptation Center within the NCTSN focused on:**
 - Disseminating tools and products developed during CTISP to six strategically located “Supercommunities” across the country
 - Providing support on implementation and creating true culture change
 - Expanding to 20 states

CTISP Dissemination and Implementation

Overarching Goal: To move trauma informed systems from a concept and set of resources and training and local test sites into day to day practice in real world settings across an entire jurisdictions that can then serve as exemplars for others.

Process:

- **Assessment**
- **Individual Planning-** using Implementation Science in support
- **Training and Technical Assistance**
 - Trauma-Informed systems
 - Screening and assessment
 - Trauma-informed evidence-based treatment
- **Change Management Support**
- **Participation in National Peer-to-Peer Support Network**



California Screening, Assessment, and Treatment



California Screening, Assessment, and Treatment (CASAT) Initiative



ACYF Background



ADMINISTRATION FOR
CHILDREN & FAMILIES

With the right tools and capacity, child welfare systems can identify the complex needs of children who have experienced maltreatment and deliver targeted, evidence-based services that help young people overcome the social and emotional impact of abuse and neglect....HHS is working to build the child welfare system's capacity to identify and treat the needs of maltreated children by expanding the evidence base around social-emotional well-being for children in foster care; improving oversight and monitoring of psychotropic medications among this group; and expanding the use of evidence-based screening, assessment, and treatment to promote healing, recovery, and well-being for these children.



Testimony of Bryan Samuels, Commissioner
Administration on Children, Youth and Families
Administration for Children and Families
U.S. Department of Health and Human Services
Before the Subcommittee on Federal Financial Management, Government Information, Federal Services,
and International Security Senate Committee on Homeland Security and Governmental Affairs
United States Senate, December 1, 2011

Partnerships



- CA Department of Social Services
 - Katie A Settlement
 - Core Practice Model
- CA Social Work Education Center
 - ✦ Katie A Learning Collaborative
- Tulare County
- Mariposa County





California Screening, Assessment, and Treatment



Overview: Screening, Assessment & Treatment

Screening for Mental Health Needs

- **Conceptual Framework**
- **Key Implementation Considerations for Screening Tools**
- **Current Thinking**

Common Examples of Screening

- TB Test



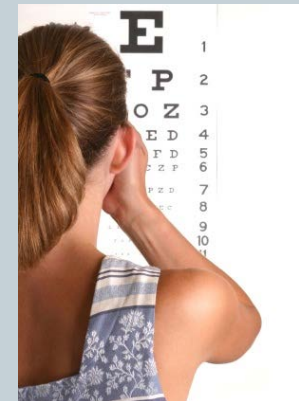
- Blood Pressure



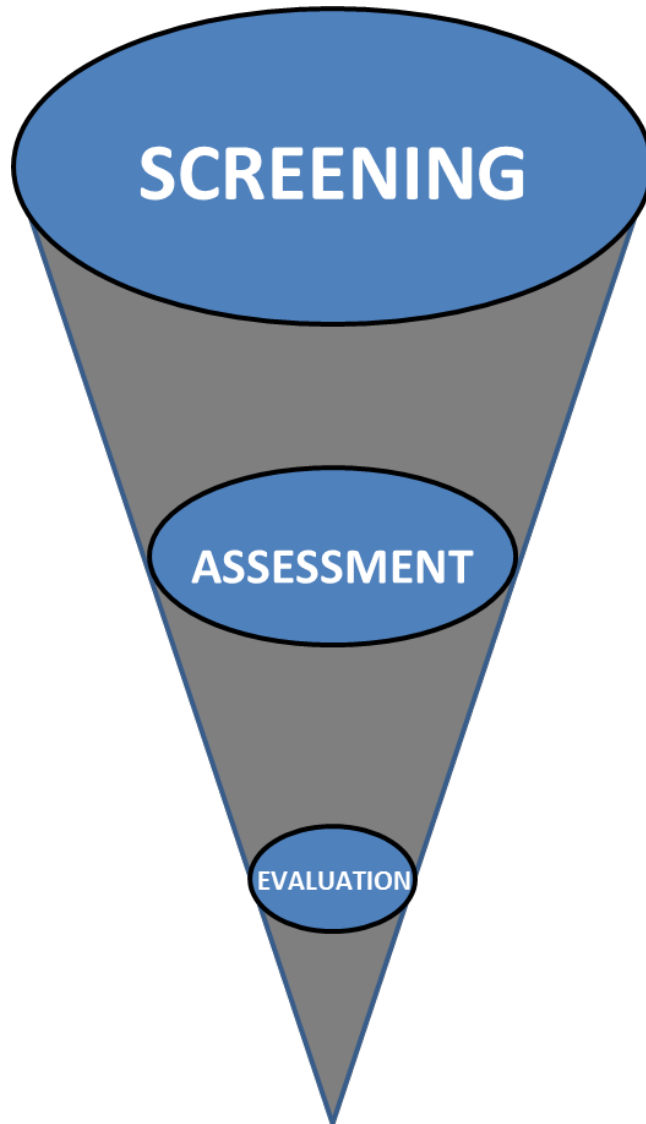
- Ultrasound



- Hearing and Vision



Screening in CW and MH Systems



Screening

- Administered to Everyone in Group
- Brief
- Easy to Complete
- Gives 'Yes' or 'No' Information
- Focused on a Specific Topic

Assessment

- In-Depth
- Requires Training
- Administered to Targeted People
- Gives Unique Client Picture
- Informs Treatment
- Completed Over 1-3 Visits

Psychological Evaluation

- Even More In-Depth
- Completed by Psychologists (typically)
- Gives Very Specific Information



Screening Among CW Youth

- Mental health symptoms vs. trauma symptoms
 - Same thing or 2 different things?
 - ✦ Limited research on the topic
 - ✦ Expert Panel in July 2013



Trauma-Related Needs Screening



- **The 3 E's**

- **Event**

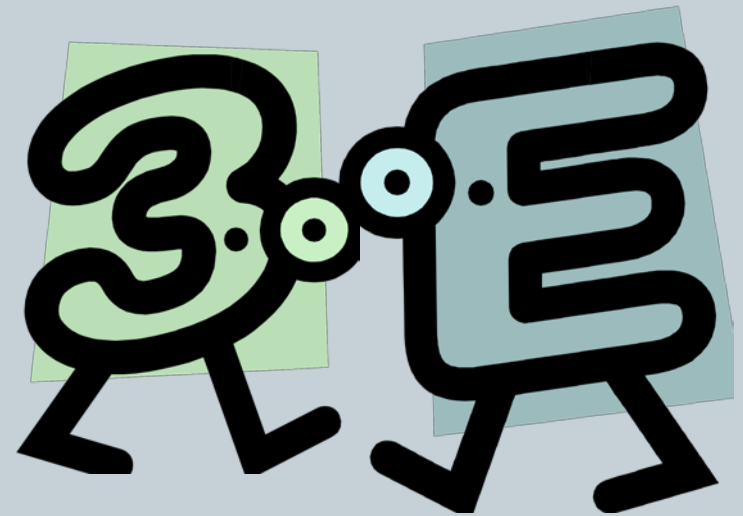
- ✦ Domestic Violence
- ✦ Neglect
- ✦ Physical Abuse
- ✦ Sexual Abuse
- ✦ Community and School Violence
- ✦ Traumatic Grief

- **Experience**

- ✦ Reactions that are specific responses to trauma
 - Avoidance of triggers
 - Intrusive thoughts
 - Nightmares about the event

- **Effect**

- ✦ Symptoms that may be strongly related to trauma (but not necessarily) and may develop over time
 - Generalized Anxiety
 - Behavior Problems
 - Depression





Key Considerations for Implementation of Screening Approach

- **Appropriateness of Tools**
 - Evidence
 - ✦ Reliability and Validity
 - ✦ Sensitivity and Specificity
- **Acceptability and Feasibility**
 - Fits in Overarching Organizational Framework
 - Useful for Staff
 - Practical
 - ✦ brief, easy to interpret, minimal training required
- **Implementation Costs**
- **Sustainability**



Current CASAT Screening Approach

- Working with developers of SDM
 - 56 Counties in CA
 - 39 States
- MH Symptoms:
 - Strengths and Difficulties Questionnaire (SDQ)
 - ✦ 25 Items
 - ✦ Goodman (1997)
- Trauma-Related Symptoms:
 - Screen for Child Anxiety Related Disorder (SCARED) Brief Assessment of Post-Traumatic Stress Symptoms
 - ✦ 4 Items
 - ✦ Muris, Merchelbach, Korver, & Meesters (2000)
- Tools to Bolster Accurate CW Worker Decision-Making





Assessment and Treatment of Mental Health Needs

- **Clinical Pathways**
 - Inform assessment, triage, and clinical decisions
 - Common in medical field.
 - UCLA's Asthma Pathway
 - Rady Children's Hospital developed 40+ pathways
 - (i.e., Asthma in 1994, Domestic Violence in 2001)
 - Evidence for improved outcomes at reduced or equal costs

Bailey, R., Weingarten, S., Lewis, M., & Mohsenifar, Z. (1998). Impact of clinical pathways and practice guidelines on the management of acute exacerbations of bronchial asthma. *CHEST Journal*, 113(1), 28-33.

Rotter, T., Kinsman, L., James, E., Machotta, A., Gothe, H., Willis, J., ... & Kugler, J. (2010). Clinical pathways: effects on professional practice, patient outcomes, length of stay and hospital costs. *Cochrane Database Syst Rev*, 3(3).



Assessment and Treatment of Mental Health Needs

- Treatment Assessment Pathway (TAP) Model
 - Chadwick Center (manual developed by 2004)
 - Directs assessment, triage, and treatment
 - Revised for CASAT
 - Trauma-Informed Mental Health Assessment Protocol (TI-MHAP)

Trauma-Informed Mental Health Assessment Protocol (TI-MHAP)



ASSESSMENT

- Clinical Interview
- Standardized Measures
- Behavioral Observations
- Multisystemic (Child, Caregiver, Psychiatrist, Teacher, etc.)



TRIAGE

- Based on Unique Client Picture
- Identify Appropriate Interventions



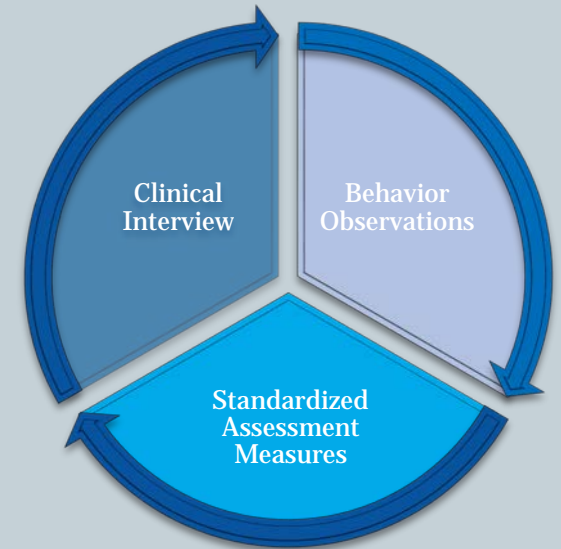
TREATMENT

- Interventions Identified within Service Array
- Emphasis on Evidence-Based and Trauma-Informed Services when Appropriate

TI-MHAP Assessment Domains



- Symptom Presentation
- Medical and Developmental History
- Family History
- Child and Family Strengths
- Trauma History
- Contextual/Environment History



- ▶ **Administration**
- ▶ **Client feedback**
- ▶ **Interpretation**
- ▶ **Treatment planning**

How Client/Family Engagement in Assessment Process is of Benefit



Validate need for initiating/ongoing treatment

Identify goals/ collaborative treatment planning process

Pinpoint most helpful interventions based on needs

Help to understand symptoms realistically

Recognize effects of symptoms on different settings (cross-informant data)

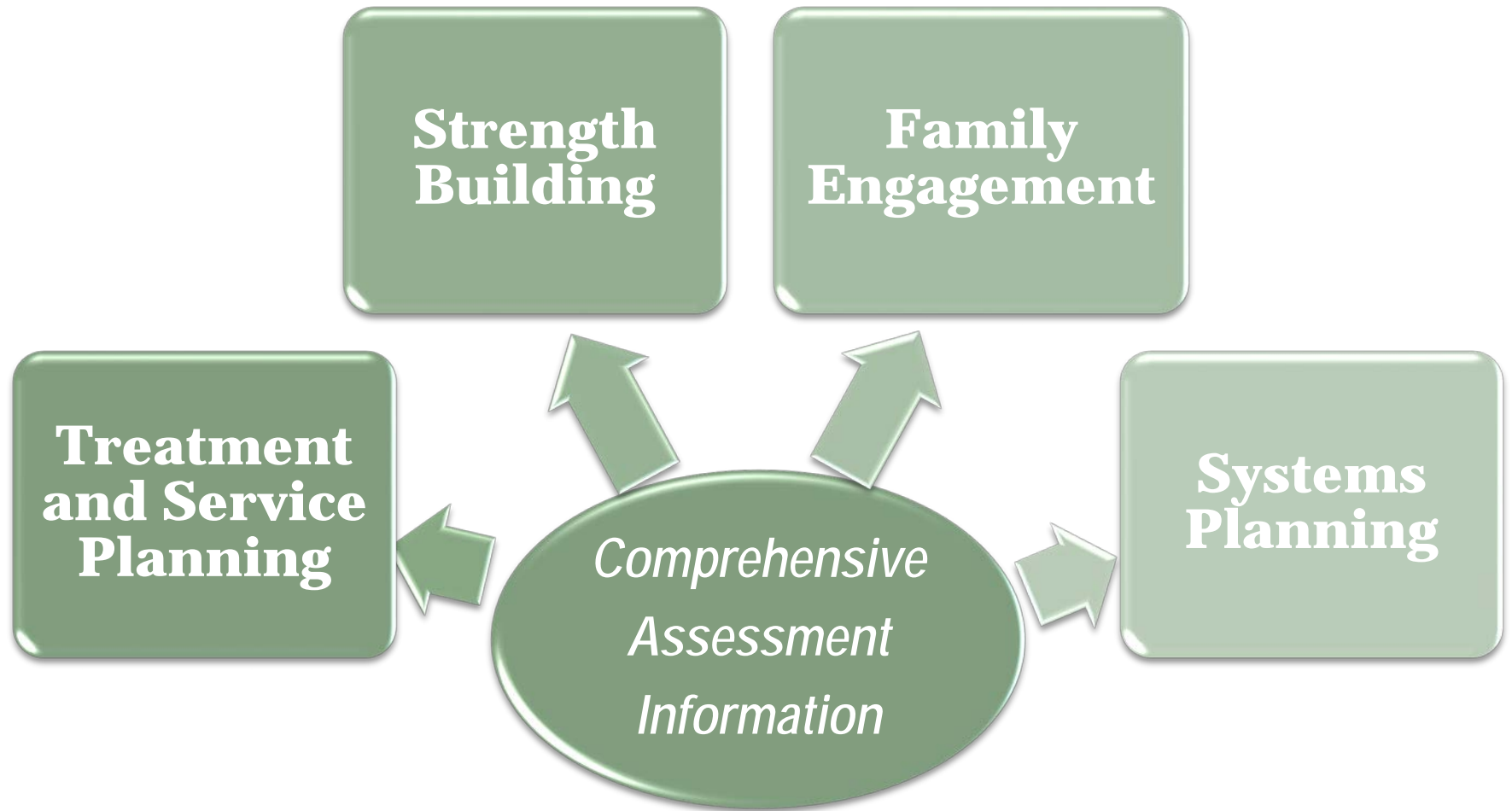
Help clients identify strengths and resources



Help client see they are making progress and areas of continued need



Trauma-Informed “Data Driven” Planning and Engagement



Ongoing Assessment

- **Inform Treatment**

- Changes in Targeted Behaviors
- New Areas of Focus?
- Adjust Treatment Plan or Treatment Approach

- **Progress Monitoring**

- Track Changes Over Time
- Cross-System Collaboration
- Improved Communication
 - ✦ Implications for Psychotropic Meds
- Aggregate Patterns
- Data-Informed Services





TI-MHAP Treatment Considerations

- **Treatment Interventions Identified**
 - Unique Client Picture
 - Trauma-informed, Evidence-Based Practices Available Within the Service Array
 - ✦ Community Services/Agencies
 - i.e., YMCA, Sports programs, Faith-based programs
 - ✦ Case Management
 - ✦ Medical/Developmental
 - ✦ Crisis Intervention
 - ✦ Behavioral Health Treatment
 - Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT)
 - Parent-Child Interaction Therapy (PCIT)
 - Incredible Years (IY)
 - Multidimensional Treatment Foster Care (MTFC)
 - Families OverComing Under Stress (FOCUS; military families)

From Innovation to Intervention



- What really matters:
 - Relationships
 - Leadership and “Champions”
 - Clarity of Roles and Purpose
 - Shared Outcomes Measured through Shared Data
 - Mutual Accountability
- Where do you fit in this process?
- What are our shared goals for the families in your county?

Adapted from:
Sexton, N. (2013). Decades of Reform in Public
Child-Serving Systems: Where are we Now?
Casey Family Programs.

Contact Information

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- **Lisa Conradi, Psy.D.**
Co-Director, ACYF and SAMHSA Projects
E-mail: lconradi@rchsd.org

- **Brent Crandal, Ph.D.**
ACYF Project Psychologist
E-mail: bcrandal@rchsd.org

Resources



- Chadwick Trauma-Informed Systems Project - www.ctisp.org
- California Evidence-Based Clearinghouse for Child Welfare - www.cebc4cw.org
- National Child Traumatic Stress Network - www.nctsn.org and <http://learn.nctsn.org>
- Chadwick Center for Children and Families - www.ChadwickCenter.org
- Child Welfare Trauma Training Toolkit - <http://www.nctsnet.org/products/child-welfare-trauma-training-toolkit-2008>
- Caring for Children who Have Experienced Trauma: A Guide for Resource Parents - www.nctsn.org/rpc