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Charmaine B. Lo
University of Massachusetts Medical School

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Implementing the Massachusetts Child Trauma Project (MCTP) to Improve Services for Children with Complex Trauma in Child Welfare: Phase I Needs and Readiness Assessment

Charmaine Lo, MPH1, Melodie Wenz-Gross, Ph.D.2, Jessica Griffin, Psy.D.2,3

1Clinical & Population Health Research Program, Graduate School of Biomedical Sciences; 2Department of Psychiatry; 3Department of Pediatrics

Purpose:
MCTP seeks to improve placement stability and outcomes for children with complex trauma in the care of the Massachusetts Department of Children and Families (DCF) by creating a sustainable capacity for providing evidence-based trauma interventions within provider agencies, and trauma-informed practices within DCF.

Specific Objectives:
1. Improving identification and assessment of children exposed to complex trauma
2. Fostering trauma-sensitive and trauma-informed practices among child-serving agencies
3. Increasing trauma training and sensitivity of caregivers (e.g., biological, kin, and foster)
4. Improving linkages and referral rates to evidence-based trauma treatments (EBTs)
5. Building service provider capacity for EBTs in Massachusetts

Conclusions from data so far:
- Children with complex trauma have experienced multiple traumas and exhibit problems related to attachment, externalizing behavior problems, as well as PTSD, depression, and traumatic grief.
- Be mindful to include cultural adaptations in certain regions (e.g., for the substantial Asian population in the North), and across the state to respond to the needs of Hispanic/Latino populations.
- Because these children also span the age range (0-18 yrs), our choice of interventions must be appropriate to meet the needs of very young children as well as older children and adolescents
- Need more clinicians trained in these EBTs to serve the needs of this group. 50% of mental health agencies surveyed have never adopted an EBT. Currently there are long waiting lists for trauma services and some who claim to be delivering EBTs, have not been formally trained and supported by certified trainers.
- Agencies who have formal training and support through efforts such as the NCTSN, have greater trauma informed policies and practices
- Child Welfare workers also expressed a need for greater service availability and access, knowledge of who is formally trained to provide trauma services, and need for culturally and linguistically competent services, as well as addressing transportation and insurance barriers.

Evidence-Based Trauma Treatments
- Attachment, Self-Regulation and Competency (ARC)
- Child-Parent Psychotherapy (CPP)
- Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

Future Work
- Data from this needs and readiness assessment provided valuable information not only about the needs of the target population, but the needs of both the child welfare and mental health systems that serve them.
- In particular, the data indicate several barriers to implementing practice changes and a clear need to build better collaborations between the two systems.
- This data will be used to guide MCTP’s Phase II implementation, beginning in October 2012.

More About Us
- Project Director: Jan Nisenbaum
- Project Manager: Ruth Bodian
- Project Coordinator: Beth Barto
- Evaluator: Melodie Wenz-Gross

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