

Nebraska Resource Project for Vulnerable Young Children UNL - Center on Children, Families and the Law





We provide **support, training, and resources** to improve the well-being of maltreated young children



Early Childhood Mental Health



Nebraska Center on Reflective Practice



Court Infusion



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Early Childhood Mental Health Program

Child Parent Psychotherapy (CPP) Training

Parent-Child Interaction Therapy (PCIT) Training

Community of Practice for ECMH Clinicians

Nebraska Young Child Institute

Nebraska Babies Classroom: classroom.nebraskababies.com

Understanding Early Childhood Attachment, Trauma, and Development

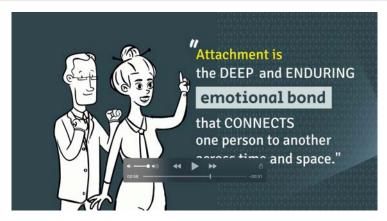




This course contains three short mini courses for anyone with – or working with – young children to understand the importance of caregiver relationships and how those relationships, and early childhood trauma, impacts development.



Trainer: Samantha Byrns, M.S.Ed., LIMHP, NCC Early Childhood Mental Health Project Manager Nebraska Resource Project for Vulnerable Young Children





What is Child-Parent Psychotherapy (CPP)?

- CPP integrates
 - psychodynamic, attachment, trauma, cognitive-behavioral, and social-learning theories into a dyadic treatment approach designed to restore both the child-parent relationship and the child's mental health and developmental progression that have been damaged by the experience of family violence.
- Originally designed for children exposed to family violence but has been adapted for other types of trauma and loss (child maltreatment, sudden or traumatic death of someone close, witnessing of domestic violence, disruption of attachment; or multiple changes of placement)
- ▶ Birth through age 5 and their caregivers
- Weekly sessions up to one year (average is 12-16)



Does CPP Work?

- California Evidence-Based Clearinghouse for Child Welfare gives ratings to programs/practices.
- CPP gets a rating of "2" (best rating is a 1) meaning it is "supported by research evidence."
- Its relevance to child welfare is a "1" or High
- FFPSA Clearinghouse rates CPP as Promising (https://preventionservices.abtsi tes.com/program)
- Osofsky, J., Kronenberg, M., Hayes Hammer, J., Lederman, C., Adams, S., Graham, M., and Hogan, A. (2007) The Development and Evaluation of the Intervention Model for the Florida Infant Mental Health Program. Infant Mental Health Journal, Vol. 28 (3), 259-280.

Outcome Measures

Children

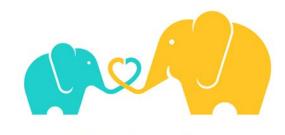
- Child Behavior Checklist (CBCL: Achenbach and Edelbrock, 1983, Achenbach, 1991)
- Structured Interview for Diagnostic Classification DC: 0-3 for Clinicians (DC: 0-3; Scheeringa et al.. 15; Mothers
- Symptoms Checklist-go Revised (SCL-go-R: Derogatis, 1994)
- Clinician Administered PTSD Scale (CAPS; Blake et al. 1990)

Outcomes:

- CPP children showed greater reductions in traumatic stress symptoms (d = ,63).
- At posttest, significantly fewer children who received CPP met criteria for PTSD (6%) compared to comparison group children (36%). Rates of PTSD at intake were 50% for the CPP group and 39% for comparison group.
- CPP children showed greater reductions in total behavior problems (d 24)



CPP Clinician Directory for Referrals

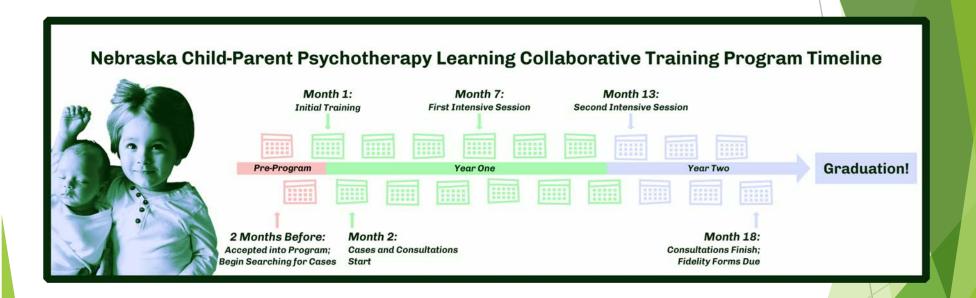


Nebraska Child Parent Psychotherapy Learning Collaborative

https://www.nebraskababies.com/cpp-provider-contact-list

Child Parent Psychotherapy Initial Assessment Report

- Parent Child Assessment and Therapy -Initial Parent Interview/Adult Attachment Interview
- ► Trauma Assessment of each caregiver -Make recommendations for parent needs so that they can participate in CPP
- Ghost and Angels in the nursery
- Trauma Assessment of the child
- Developmental Assessment Make referrals for OT, PT, ST, etc
- Sensory Screening Make referrals for outpatient OT for Sensory Integration
- Crowell Assessment Observational Assessment of the dyad

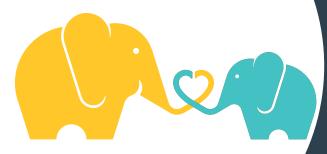


CPP Training

- Initial 3 day Training
- ► 6-month 2 day Intensive Training
- ▶ 12-month 2 day Intensive Training
- ▶ 18 months of twice monthly clinical supervision/reflective practice calls
- ▶ 2 case presentations
- ► Fidelity of practice



2021 Child-Parent Psychotherapy
Training Program



Apr. 26-28 Oct. 28-29 Apr. 7-8
2021 2021 2022
Learning Learning Learning
Session I Session II Session III

Applications open Jan. 2021

Learn more and register at nebraskababies.com/cpp







For more information

- Visit our website: nebraskababies.com
 - ► More information on becoming a CPP Provider
 - ► CPP training requirements and process
 - ► Nebraska's CPP Provider List
 - ▶ Register to start training April 26 & 27 2021

CPP Training Information Webinar

If you have questions about the training program, we are offering a free webinar next month with more information about the process. This webinar will provide details about the Child-Parent Psychotherapy training process and will give you more information on how you will provide this evidence-based practice in your work. There will be an open discussion time for questions.

This webinar will take place on **February** 3rd from 12 to 1 PM CT.



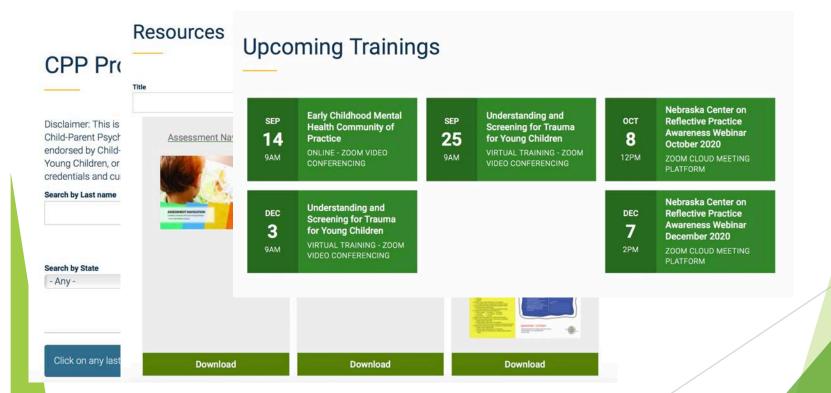
Register at www.nebraskababies.com/events

Websites and References

- www.childtrauma.org (Bruce Perry)
- www.developingchild.harvard.edu
- www.nctsn.org
- www.samhsa.gov
- www.zerotothree.org
- ▶ How Brains are Built: The Core Story of Brain Development, Video, Alberta Family Wellness
- ▶ Institute for Learning and Brain Science, Video
- Lieberman, Alicia and Van Horn, Patricia (2005). <u>Don't Hit My Mommy</u>. Washington D.C., Zero to Three Press.
- Lieberman, Alicia, Silverman, Robin, & Pawl, Jeree (2005). <u>Infant-Parent Psychotherapy:</u> Core Concepts and Current Approaches. Handbook of Infant Mental Health, Second Ed.
- Osofsky, Joy and Lieberman, Alicia, (2011). A Call for Integrating a Mental Health Perspective Into Systems of Care for Abuse and Neglected Infants and Young Children. American Psychological Association, Vol 6, Number 2.
- Powell, B, Cooper, G, Hoffman, K and Marvin B (2014). The Circle of Security Intervention. New York, NY, Guilford Press.

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