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Summary of SAMHSA grant:

**National Child Traumatic Stress Network Category III Center**

\$400,000 for 3 years (2009-2012) to create the [Vermont Child Trauma Collaborative](#)

National Child Traumatic Stress Network (NCTSN) mission is to raise the standard of care and improve access to services for traumatized children, their families and communities throughout the United States.

The NCTSN works to accomplish its mission of serving the nation's traumatized children and their families by:

- Raising public awareness of the scope and serious impact of child traumatic stress on the safety and healthy development of America's children and youth.
- Advancing a broad range of effective services and interventions by creating trauma-informed developmentally and culturally appropriate programs that improve the standard of care.
- Working with established systems of care including the health, mental health, education, law enforcement, child welfare, juvenile justice, and military family service systems to ensure that there is a comprehensive trauma-informed continuum of accessible care.
- Fostering a community dedicated to collaboration within and beyond the NCTSN to ensure that widely shared knowledge and skills become a sustainable national resource.

Vermont Child Trauma Collaborative (VCTC)

Vermont has taken significant steps over the last several years to improve trauma-informed services within the community mental health system. The Vermont Child Trauma Collaborative VCTC is a project constructed to support these efforts as well as to improve trauma-informed care in the larger system of care. With the SAMHSA-funded award, the Vermont Department of Mental Health has collaborated with key stakeholders in the children's mental health system of care, including public and private community mental health providers, to establish the **Vermont Child Trauma Collaborative** to implement a best practice called the Attachment, Self-Regulation and Competencies (ARC) Framework in Vermont's community mental health system.

Outcomes:

1. Statewide implementation of evidence-based practices for treatment of trauma in children:
  - a. Attachment, Self-Regulation & Competency (ARC) Framework
    - Recognized by the NCTSN as a promising practice, ARC is a comprehensive framework for intervention with children exposed to complex trauma and their caregivers. Intervention is tailored to each client's needs and may include individual and group therapy for children, education for caregivers, parent-child sessions, and parent workshops.
    - 348 clients served and enrolled in evaluation. Many more children & families received ARC trauma treatment, yet did not enroll in formal evaluation
    - 60 clinicians were trained intensively in ARC Framework. Many more received informal ARC training and supervision through agency staff

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- 24 supervisors trained in providing supervision to clinicians in ARC framework
  - Over 650 professionals received ARC 2-day training
  - 30 VCTC members trained as trainers to provide full ARC 2-day trainings
  - Evaluation Results: across the different assessment tools and measurement periods of the longitudinal study, there are several indications of child/caregiver dyads appearing to make improvements while engaged in treatment with the ARC model. Data showed positive trends, suggesting that on the aggregate clients' lives were improving over time.
  - ARC is an evidence-based framework for treatment children with complex trauma and their families. It is a longer-term treatment framework that allows for integration of other short-term treatment models as clinically appropriate.
  - Preliminary data from national pilot studies indicate that ARC leads to reduction in child posttraumatic stress symptoms, anxiety, and depression, as well as increased adaptive and social skills. Caregivers report reduced distress and view their children's behaviors as less dysfunctional.
  - ARC principles have successfully been applied in a range of settings, including outpatient clinics, residential treatment centers, schools, and day programs.
- b. Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)
- TF-CBT is a conjoint child and parent psychotherapy approach for children and adolescents who are experiencing significant emotional and behavioral difficulties related to traumatic life events. Manualized 12 to 16 sessions.
  - 36 clients served and enrolled
  - 12 clinicians trained in TF-CBT
- c. Child & Family Traumatic Stress Intervention (CFTSI) Yale
- An evidence-based early intervention, CFTSI fills the gap between standardized acute interventions and evidence-based, longer-term treatments required to deal with enduring post-traumatic reactions. Brief (4-6 sessions) manualized treatment. Implemented immediately following a potentially traumatic event or after disclosure of physical or sexual abuse. Decreases post-traumatic stress reactions and onset of PTSD by strengthening communication and family support
  - 36 clinicians in 4 regions trained in CFTSI
2. Utilization of standardized trauma assessments:
- a. Implemented statewide use of Trauma Symptom Checklist for Children; Parenting Stress Index; Achenbach System of Empirically Based Assessments (ASEBA)
  - b. Workshop for agency staff: Assessment and Clinical Case Formulation: Pulling the Assessment out of the Drawer and into Practice
    - 90 clinicians trained at 11 sites.
3. Trauma-informed System of Care:
- a. Trauma-Informed Care (Trauma 101) train-the-trainer series
    - Trauma-informed services don't address the symptoms of trauma. Trauma informed systems deliver services in a manner that acknowledges the role that violence & victimization play in the lives of most consumers of services. It includes understanding trauma, its impacts on an individual & system, how to screen and refer for appropriate supports, environmental safety, choice & empowerment for consumers.
    - 60 community mental health providers and local child-serving providers trained as trainers
    - Nearly 900 community members received Trauma 101 training