Looking at Prevention Through an Evidence Based Practice Lens

May 6, 2014

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www.cebc4cw.org
Challenges to Prevention

- How to prevent something with no single cause or common ethology?
- How to overcome individual and collective denial?
  - Not me, not my family, not my community, not in my culture
- Prevention vs. Risk Reduction
- At what stage to target prevention?
  - Primary vs. Targeted Early Intervention vs. Intervention as prevention
- Targeting Co-Morbid Conditions
Framework for Prevention

• Environmental Frame
  – Target Underlying Causes such as Poverty

• Public Education frame

• Protective Factor Frame
Child Protective Factors

- Relational skills
- Self-regulation skills
- Problem-solving skills
- Involvement in positive activities
- Parenting competencies
- Positive peers
- Caring adult(s)
- Positive community environment:
- Positive school environment:
- Economic opportunities:
Protective Factors Against Child Abuse

• Nurturing and Development-Knowledge of Child Development
• Parental Resilience
• Social Consecutiveness
• Concrete Supports
• Social and Emotional Competence of Children
Family Protective Factors

- Nurturing parenting skills
- Stable family relationships
- Household rules and child monitoring
- Parental employment
- Adequate housing
- Access to health care and social services
- Caring adults outside the family who can serve as role models or mentors
Framework for Prevention

- Environmental Frame
- Protective Factor Frame
- Evidence Based/Evidence Informed Frame – Specific Models
CEBC’s Definition of EBP for Child Welfare

Best Research Evidence

Best Clinical Experience

Consistent with Family & Client Values

[Institute of Medicine (IOM), 2001]
Welcome to the CEBC:
California Evidence-Based Clearinghouse for Child Welfare

Information and Resources for Child Welfare Professionals

The California Evidence-Based Clearinghouse for Child Welfare (CEBC) provides child welfare professionals with easy access to vital information about selected child welfare related programs. The primary task of the CEBC is to inform the child welfare community about the research evidence for programs being used or marketed in California.* The CEBC also lists programs that may be less well-known in California, but were recommended by the Topic Expert for that Topic Area.

How do You Use the CEBC?

What’s New on the CEBC?

What is Evidence-Based Practice?

How are Programs on the CEBC Reviewed?

How is Culture Related to Evidence-Based Practice?

Sign-up to get Email Alerts!

* Please note that the CEBC was created for informational and educational purposes and as such does not endorse any of the programs listed on the website.

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Parent-Child Interaction Therapy (PCIT) - Summary

Scientific Rating: 1
Well-Supported by Research Evidence
See scale of 1-5.

Relevance to Child Welfare Rating: 2
Medium
See scale of 1-3.


Type of Maltreatment: Emotional abuse, Physical abuse, and Physical neglect

Target Population: Children ages 3-6 with behavior and parent-child relationship problems. May be conducted with parents, foster parents, or other caretakers. Adaptation available for physically abusive parents with children ages 4-12.

Brief Description:

Parent-Child Interaction Therapy (PCIT) has been rated by the CEBC in the area of Parent Training. PCIT was developed for families with young children experiencing behavioral and emotional problems. Therapists coach parents during interactions with their child to teach new parenting skills. These skills are designed to strengthen the parent-child bond; decrease harsh and ineffective discipline control tactics; improve child social skills and cooperation; and reduce child negative or maladaptive behaviors. PCIT is an empirically supported treatment for child disruptive behavior and is a recommended treatment for physically abusive parents.

Contact Information

Show Contact Information

Detailed Report

Click here for a detailed report, which includes Essential Components, Relevant Published, Peer-Reviewed Research, Education and Training Resources, etc.
Scientific Rating Scale
[**Based on a Continuum**]

Not Able to Be Rated
Framework for Prevention

- Environmental Frame
- Protective Factor Frame
- Evidence Based/Evidence Informed Frame
- Trauma Informed Frame
Definition of Trauma-Informed 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 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.

- CTISP National Advisory Committee
SAMHSA’s Six Principles

Trauma-Informed Approach

- **Safety:** Throughout the organization, the staff and the people they serve feel physically and psychologically safe; the physical setting is safe and interpersonal interactions promote a sense of safety.

- **Trustworthiness and transparency:** Organizational operations and decisions are conducted with transparency and with the goal of building and maintaining trust among clients, family members, staff, and others involved with the organization.

- **Collaboration and mutuality:** There is true partnering and leveling of power differences between staff and clients and among organizational staff, from direct care staff to administrators; they recognize that healing happens in relationships and in the meaningful sharing of power and decision making.

- **Empowerment:** Throughout the organization and among the clients served, individuals’ strengths are recognized, built on, and validated and new skills are developed as needed.

- **Voice and choice:** The organization aims to strengthen the experience of choice for clients, family members, and staff and recognizes that every person’s experience is unique and requires an individualized approach.

- **Culture, historical and gender issues:** The organization incorporates policies, protocols, and processes that are responsive to the racial, ethnic and cultural needs of individuals served; are gender-responsive; and incorporate a focus on historical trauma.

  - SAMHSA (2014). SAMHSA’s Concept of Trauma
Framework for Prevention

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- Preconditions Model - David Finkelhor
Dynamics of Sexual Victimization

David Finkelhor, Ph.D.

Finkelhor 4 Preconditions Model
Dynamics of Sexual Victimization

4 Preconditions Model

- Motivation
- Internal Inhibitors
- External Inhibitors
- Victim Resistance

Abuse
System Change
How do we get there from here?
Levels of Implementation

• Paper

• Process

• Performance

  • Real organic organizational change at the cultural level

Stages of Change-Prevention

• Precontemplation Stage
• Contemplation Stage
• Preparation Stage
• Action and Sustainment
EPIS: Stages of Implementation

EXPLORATION → ADOPTION DECISION / PREPARATION → ACTIVE IMPLEMENTATION → SUSTAINMENT

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Exploration Phase

• Ask the right questions and ask again.

• What do you wish to prevent or reduce the risk of? Why does that problem exist in the first place? What factors drive the problem you wish to address?

• Ask Why 5 times.
EPIS: Stages of Implementation

- Exploration
- Adoption Decision / Preparation
- Active Implementation
- Sustainment

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The Future Directions:

- Spread what we know-
  - Build Capacity to spread
  - Fidelity
  - Take to scale

- Environmental approach

- Build new models
  - Conduct More Research
  - Manualize and Test More

- Take advantages of the new neurosciences and epigenetics

- Target Enhancing Resilience
The Future of Child Abuse Prevention

- There are more things in heaven and earth, Horatio, than are dreamt of in your philosophy.
  - *Hamlet* (1.5.167-8), Hamlet to Horatio