Several energetic people have combined forces to bring training in evidence-based trauma treatments for children to Virginia. INVEST for Children stands for INcreasing Virginia’s Evidence-Supported Treatments for Children. The INVEST for Children Project is headquartered at the Children’s Hospital of The King’s Daughters (CHKD). It is supported, in part, by a grant from the National Children’s Alliance, written and administered by Carole Campbell Swiecicki, Ph.D., a clinical psychologist.

Three Virginia Child Advocacy Centers and their affiliated professionals are currently participating in the first INVEST for Children community-based learning collaborative. Foothills Child Advocacy Center (in Charlottesville), Greater Richmond Stop Child Abuse Now (SCAN) and CHKD Child Abuse Program were selected to receive the training that is funded by the grant. Clinicians are learning Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and brokers of services are being trained in how to screen children and refer them.

Each participating site and their affiliated professionals formed a ‘Community Change Team’ (CCT) which was comprised of participants from three groups: clinicians; brokers; and administrators. Dr. Swiecicki notes that training is essential for all three components in order to arrive at a functional system of screening, referral, and intervention.

The first of two face-to-face learning sessions occurred in May, 2012. The first training covered the basics of TF-CBT. A certified trainer, Elissa Brown, Ph.D. conducted the session with clinicians. In an interview with VCPC staff, Dr. Brown said she was able to take the training to a more sophisticated level because the clinicians in the group arrived with a solid understanding of trauma-informed treatment. “They are a talented, dedicated group,” she remarked.

Dr. Brown is a clinical psychologist based in New York City. She operates the Child HELP Partnership, an organization that promotes Healing after trauma, Empowering multi-cultural communities, offering a Learning center to train professionals and dedicated to Preventing child abuse and injury. Her organization offers affordable trainings twice a year for independent practitioners (see web article on available training for professionals).

While the clinicians were being trained by Dr. Brown, the brokers of services were being trained by Libby Rakson, Ph.D., a founding director of the Dee Norton Lowcountry Children’s Center, a CAC in South Carolina, and a co-developer of the community-based learning collaborative model. The brokers of services included case managers, child protective services workers, CAC administrators, forensic interviewers, and family advocates. These individuals interact with the children early in the process. The brokers can implement screening practices, learned through the collaborative training, to determine whether or not the child is showing trauma symptoms and if so, refer the child for treatment. The brokers also work closely with investigators.

After the training, 12 consultation calls with clinicians offer supervision and reinforce the training. These one-hour calls occur every two weeks and allow clinicians to present cases and receive feedback. There have already been several consultation calls, and the clinicians are enthusiastic about the interaction. The calls deepen knowledge and enhance the clinician’s level of competence, says Dr. Swiecicki.

Lisa Wright is the Mental Health Program Coordinator for Greater Richmond SCAN. She comments, “The clinical consultation calls have been very helpful. The calls help clinicians understand how to implement TF-CBT protocols. For example, during a recent consultation call, we reviewed a case where there is a caregiver who dislikes her child. We first discussed how to engage the caregiver. Then we talked about how to use the TF-CBT skill of psycho-education to help her to better understand and respond to the child’s acting out behaviors.”

Jennifer Kline, Program Coordinator for Foothills Child Advocacy Center, agrees. She adds, “I obtained many ideas for the case manager position that we just hired. I’m using what I learned in the sessions to create her job descriptions and the protocols.”

Foothills brought some of their community partners into the Collaborative. Shannon Noe, LPC, CTS, a counselor at Child and Family Services is excited about applying the information. She is part of the Foothills multidisciplinary team. “Our team has benefitted from the training in many ways,” she comments. “We are a committed team with strong leadership.”

There will be one additional learning session in mid-November. Brokers also are scheduled for consultation calls, but theirs are monthly rather than every other week. The consultation calls will continue through the end of January, 2013. At that time, the grant that is funding the current learning collaborative will be completed.

Dr. Swiecicki notes that there are several evidence-based treatments and the model is an efficient and effective way to increase the availability of evidence-based treatments. Wright agrees. She commented, “We have been offering evidence-supported trauma treatment at our CAC for seven and a half years.”

Recently, Dr. Swiecicki received exciting news! She and her colleagues were awarded a SAMSHA grant that will fund the INVEST for Children project for 4 years. This funding will provide PCIT (Parent Child Interaction Therapy) and AF-CBT (Abuse-Focused Cognitive Behavioral Therapy) training to the staff at CHKD as well as training for CPS and Department of Human Services workers on screening and referral procedures, including how to identify the best type of treatment. She is thrilled with the new learning opportunities.

The need for training is great, according to the proponents of INVEST. “We have treatments available that have been shown to be effective. Even so, it is difficult to say to professionals, ‘You have skills but there is a better model than what you are offering.’ It can be expensive and time-consuming to learn new methods. If a practitioner is comfortable with their current offerings, that person may not feel the need to acquire new skills” notes Dr. Brown. Also, many graduate programs do not have faculty trained in evidence-based treatments, which means that current gradu-
WHAT IS A COMMUNITY BASED LEARNING COLLABORATIVE?

A Community Based Learning Collaborative (CBLC) uses methods designed to allow participants to make dramatic improvements in a focused area over a short time period. The CBLC is intended to close the gap between what science has identified as best practice and what is actually offered in the field. Sometimes agency policies endorse best practices but for various reasons evidence-based interventions are not being implemented in day-to-day practice. The CBLC tries to bridge the gap between what is known and what is practiced.

A CBLC offers:

- Multiple learning sessions
- Ongoing consultation
- Guidance to make and test the impact of small changes
- Sharing success
- Offering methods and support to overcome barriers
- Ways to sustain the practices

Sources: Saunders & Ralston, 2012; 2012 INVEST for Children Community Based Learning Collaborative on TF-CBT Orientation Guide

Training Resources

Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT) Web

Medical University of South Carolina
National Crime Victims Research & Treatment Center
MSC 861, Ste 207, 2nd floor Institute of Psychiatry
67 President Street
Charleston, SC 29425 (29403 for express mail)
Phone: (843) 792-8151
Website: http://tfcbt.musc.edu/
Email: tfcbt@musc.edu

TF-CBT Web is a web-based course for Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT). The free course is the first step in training for clinicians and those successfully completing the training can earn 10 CEUs (Continuing Education Credit). Credits are awarded on a module-by-module basis; however, all modules must be completed in order to receive credit.

Children’s Hospital of The King’s Daughters

Children’s Hospital of The King’s Daughters Child Abuse Program
601 Children’s Lane
Norfolk, VA 23507
Website: http://www.chkd.org/services/childabuse
Contact: Carole Campbell Swiecicki, Ph.D.
Phone: (757) 668-6100
Email: carole.swiecicki@chkd.org

The Child Abuse Program at Children’s Hospital of The King’s Daughters brings multidisciplinary professionals together to coordinate investigations and interventions for each child abuse case, with the goal of reducing trauma and time in the legal system. The program provides a supportive, child-friendly environment in order to minimize further stress for child victims. Their mission is to identify and provide services for child victims of abuse and neglect in a safe, supportive environment while reducing secondary trauma. All services are based on the highest professional standards and evidence-based practices shown to reduce the impact of trauma and generate positive outcomes. The CHKD’s program has also added a trained service dog who can accompany children during interviews, medical exams, and therapy appointments to lessen a child’s anxiety level. Dr. Swiecicki is a supervisor for TF-CBT and she is the coordinator for an initiative to improve access to evidence-based treatment for child victims of maltreatment in Virginia. She is available to discuss agency training needs.


This report recommends individual or group cognitive-behavioral therapy for children and adolescents exposed to trauma. According to the report, play therapy, art therapy, psychological debriefing, psychodynamic therapy, and pharmacologic therapy all have insufficient evidence to determine effectiveness.