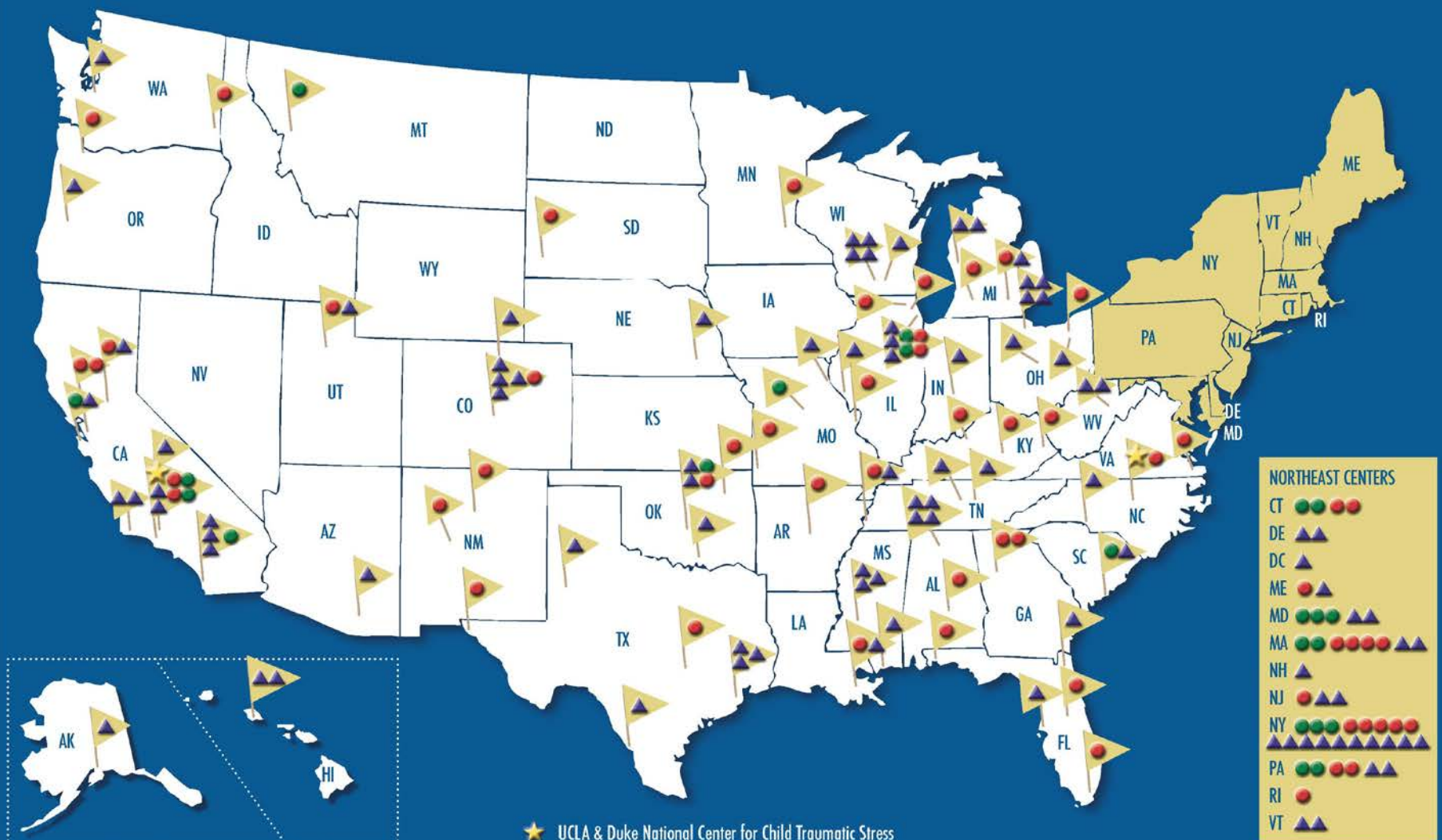


NCTSN: Our Mission

- To raise the standard of care and improve access to services for traumatized children, their families and communities throughout the United States.



National Child Traumatic Stress Network Centers



- ★ UCLA & Duke National Center for Child Traumatic Stress
- Treatment and Services Adaptation Centers
- Community Treatment and Services Centers
- ▲ Affiliate Member Organizations and Individuals

This project was funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (HHS)

Accessing NSTSN Resources

<http://www.nctsnet.org/>

A few hot spots:

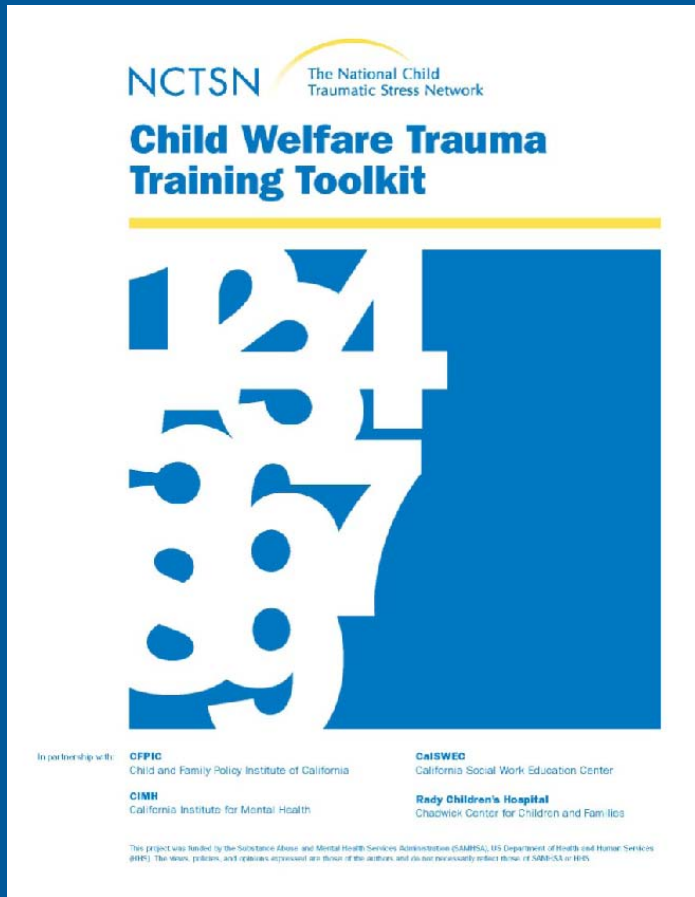
- Child Welfare Resource Page
- The Learning Center

NCTSN resources are:

- Free for everyone to download
- Print copies may be easily purchased at cost.

The screenshot displays the NCTSN website homepage. At the top, the NCTSN logo is followed by the text "The National Child Traumatic Stress Network". A navigation menu includes "Home", "Trauma Types", "Resources", "About Us", "Products", and "Login / Register". A search bar is located in the top right corner. The main content area features a large banner for "Sexual Abuse: Help Support Children Who are Survivors" with a sub-headline "Now Available in Spanish" and a small image of a child. Below the banner are several resource boxes: "Terrorism & Disasters" (Readiness, Response, Recovery), "Information Resource Tools" (Knowledge Bank, Measures Review Database, Military Families Knowledge Bank), "LEARNING CENTER" (FOR CHILD AND ADOLESCENT TRAUMA), and "Understanding Child Traumatic Stress" (What it is, Why it matters). A "What's New?" section lists recent updates like "Psychological First Aid for Schools" and "Resources in Response to the Recent Shooting". A "Looking for help?" button is also visible. At the bottom, there are icons for "For Parents & Caregivers", "For Professionals", "Military Children & Families", "For Educators", "For the Media", and "Información en Español". A footer section titled "For more information:" lists various topics under four columns: TRAUMA TOPICS, TREATMENT & SERVICES, SUSTAINABILITY & POLICY, and THE NETWORK.

Child Welfare Trauma Training Toolkit



Target Audience

- ✓ Child welfare professionals

Description

- ✓ Designed to teach basic knowledge, skills, and values about working with children who are in the child welfare system and who have experienced traumatic stress

Format

- ✓ Trainer's manual
- ✓ Comprehensive guide
- ✓ Comprehensive PowerPoint slides

Updated Version to be Released in February

Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents

Target Audience

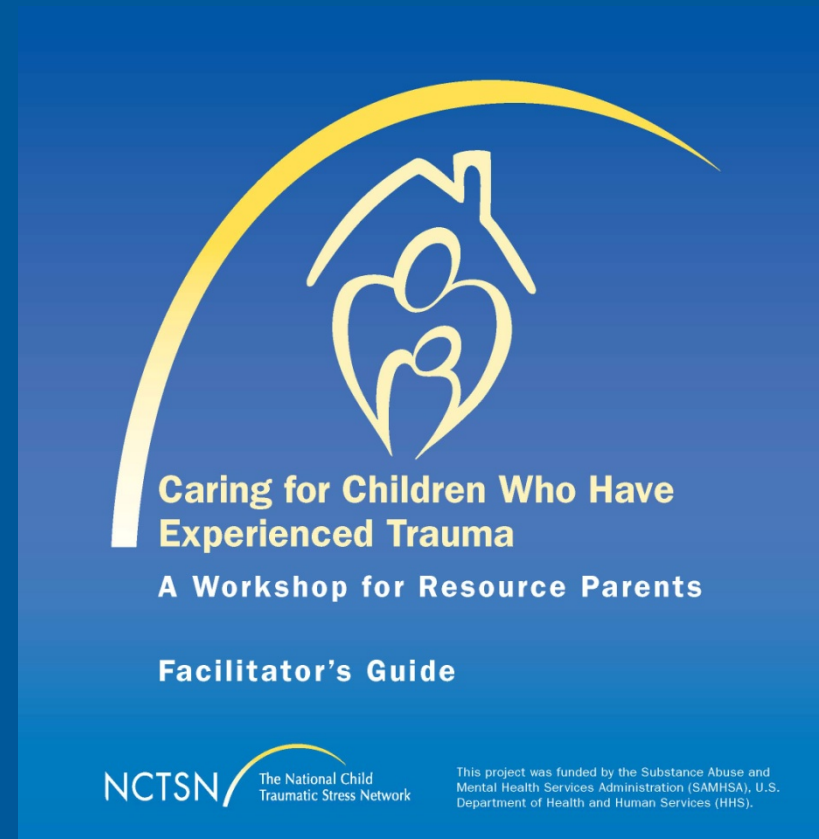
- ✓ Foster, adoptive, and kinship caregivers

Description

- ✓ Helps resource parents understand the link between trauma and their children's behavior, feelings, and attitudes.

Format


- ✓ Facilitator's Guide
- ✓ Participant Handbook
- ✓ Slide Kit



Birth Parents with Trauma Histories in the CW System Fact Sheet Series

Series of five fact sheets highlighting importance of understanding the serious consequences that trauma histories can have for birth parents, and the subsequent potential impact on their parenting, created for the following audiences:

- ✓ Resource Parents
- ✓ Parents
- ✓ Mental Health Professionals
- ✓ Judges and Attorneys
- ✓ Child Welfare Staff

NCTSN  The National Child Traumatic Stress Network

Birth Parents with Trauma Histories and the Child Welfare System

A Guide for Resource Parents

THE GARCIA'S STORY

Mr. and Mrs. Garcia, ages 65 and 64, decided to become resource parents¹ three years ago, after their children had grown up and left home. Crystal, age six, and Jonathan, age three, have been with them for six months. Although Crystal is very clingy, they are sweet children, but when they get upset they can be aggressive with each other and almost impossible to calm down. Mrs. Garcia, the primary caretaker, is concerned that there are gaps in the information the foster care agency has given her about their history, their mother Karen, and why the children came into foster care. Mrs. Garcia wonders why every time Karen visits her children she screams at them instead of being happy to see them, which makes them upset and out of control for days afterward.

The children have started to call Mrs. Garcia and her husband "Grandma" and "Grandpa," which she likes, but knows it bothers Karen. She has tried to talk with Karen about how the children are doing; when she drops them off for visits, however, Karen says things under her breath about how her kids didn't act like this when they lived with her. The children ask Mrs. Garcia why they're still in foster care and when they'll be going home; she isn't sure what to tell them. The last time the children hit each other and threatened to hit her, she called the caseworker, who didn't really have an answer for her. Since the last court date, Crystal and Jonathan have been seeing a therapist, but Mrs. Garcia is not sure what they do other than play games. Karen is supposed to join the sessions, but hasn't attended regularly. Mrs. Garcia chose to become a resource parent to help young mothers get their lives together, but from what she can see, she isn't sure that it's best for Crystal and Jonathan to live with Karen again.

Just as children in foster care have lived through trauma, many of their parents have histories of childhood or adult trauma: physical abuse, sexual abuse, domestic violence, serious accidents, and community violence—along with the experience of having their children placed in foster care. These experiences, if left unaddressed, can continue to impact individuals well into adulthood. Parents' past or present trauma can make it difficult for them to work effectively with case workers and resource parents toward reunification with their children. Even if you don't know a parent's personal history of trauma, your recognizing that trauma may have played a role in their lives will help you more effectively support and work with the entire family.

¹ For the purposes of this fact sheet, "resource parents" refers to foster, adoptive, and kinship parents.
This project was funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), US Department of Health and Human Services (HHS).

What is a Trauma-Informed Child- and Family-Service System?

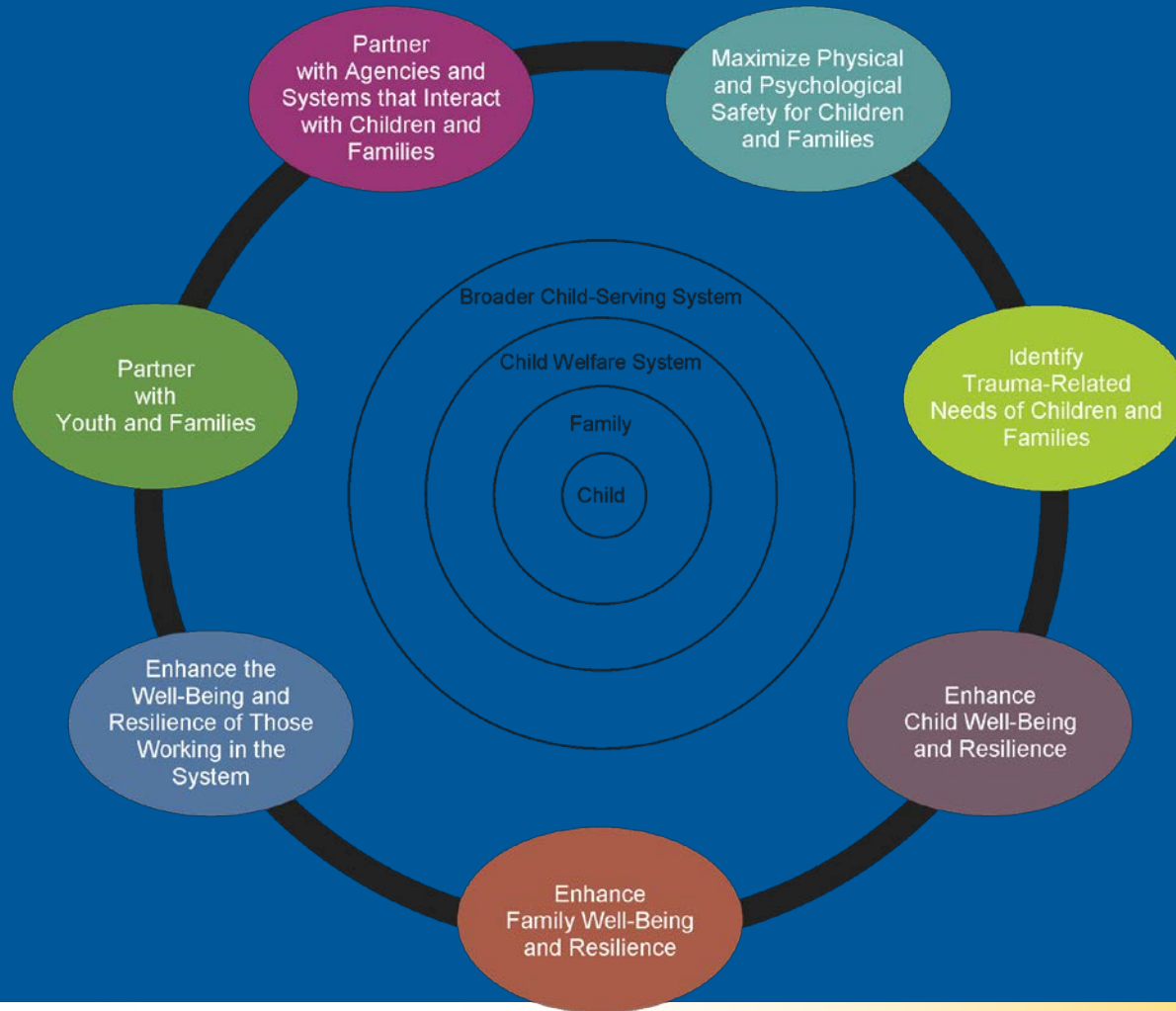


- A trauma-informed child and family-service system is one in which all parties involved recognize and respond to the impact of traumatic stress on those who have contact with the system, including children, caregivers, and service providers.
- Programs and agencies within such a system infuse and sustain this trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies. They act in collaboration with all those who are involved with the child, using the best available science, to facilitate and support the recovery and resiliency of the child and family.

A service system with a trauma-informed perspective is one in which programs, agencies and service providers would:

- Routinely screen for trauma exposure and related symptoms;
- Use culturally appropriate evidence-based assessment and treatment for traumatic stress and associated mental health symptoms;
- Make resources available to children, families, and providers on trauma exposure, its impact, and treatment;
- Engage in efforts to strengthen the resilience and protective factors of children and families impacted by and vulnerable to trauma;
- Address parent and caregiver trauma and its impact on the family system;
- Emphasize continuity of care and collaboration across child-service systems;
- Maintain an environment of care for staff that addresses, minimizes and treats secondary traumatic stress and increases staff resilience.

Essential Elements of a Trauma-Informed Child Welfare System





Lessons Learned in Creating Trauma-Informed Systems

- Screening and assessment for trauma are key
- Work must be done at all levels (trauma-treatment together with system-level work)
- Cross-system collaboration supports, spreads and sustains trauma-informed work
- Assess effectiveness by looking at outcomes important to child welfare population (ex. placement stability, foster parent competence and willingness to foster children with severe trauma) as well as mental health outcomes