An Evaluation of the Community Services Program (CSP) of the Trauma Center at Arbour Health

Systems

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Program Features

- Provides short-term interventions for those who have essentially normal responses to abnormal situations
 - People whose functioning has been disrupted but who can re-group with short-term support
- Responds to traumatic events 24 hours/day,
 7 days/week, 365 days a year
 - Small core staff
 - Network of 100 trained people

History

- Began almost 15 years ago funded by Massachusetts Department of Mental Health
- Reorganized in 1996 to build a training program and incident response infrastructure to meet needs of 90,000 school age children in Metro Boston

Program Philosophy

• The GOLDEN RULE of the program has been that "those most affected by the trauma or threat event must be afforded an ongoing opportunity to play a central role in the resolution of and recovery from the trauma and its aftermath."

Building a Community Network

- Developed an organized infrastructure at the neighborhood level for children and youth exposed to trauma by:
 - Building a trauma response network for neighborhoods and schools in Boston
 - Training about 250 new persons a year in introduction to trauma intervention
 - Advanced training for those who become part of the trauma response network followed by a minimum of four advanced 8-hour trainings per year

Three Major Types of Trauma Interventions

- Information and Education Sessions: "Orientations and Debriefings"
- Individual crises intervention, as needed as well as triage of those individuals likely to need more in-depth, long-term intervention
- Identifying individual and community resources for ongoing coping strategies and development of individual plans for how the person is going to cope with the trauma in the short term

Ongoing Support

- The core CSP staff is available by pager 24/7/365 to provide support to the network and community
- Respondents consistently emphasized that they felt they could call for guidance at any time
- Staff would help them determine if they could handle the situation themselves or needed their direct intervention

Basic Intervention Strategy

- In the 24-48 hours following an event, the purpose is to stabilize the situation by helping the individual or group feel safe
- The team engages in reconnaissance using identified neighborhood community leaders and local school/agency personnel
- The nature of the actual intervention(s) is determined by those affected by the trauma

Evaluation Design

- Stakeholder interviews
- Analysis of Case Records
- Interviews with licensed professionals, school personnel and community workers who had participated in the CSP trainings over the past four years
- Review of all training evaluations

Evaluation Design

- Structured interviews with 29 community leaders/stakeholders to gather their views of the program, its impact on individuals and the community, and its quality
- Respondents included a U.S. Congressman, a State Senator, the Mayor of Boston, State mental health leadership, leaders of several minority communities, religious leaders, public & parochial school personnel, community agencies, clinicians, trauma survivors, family members, & police

Evaluation Design

- A review of a 25% sample of randomly selected cases from the 250 case records of interventions with individuals and community groups experiencing traumatic events
- Analysis assessed the breadth of the interventions, the manpower and time required, and the effectiveness of the interventions

Evaluation Design

- In-depth structured interviews with 55 randomly selected trainees from each of the three groups (a 5% sample from each of the three categories)
- Provided information on the effectiveness of the training
 - Did they learn what was intended
 - Did they retain this knowledge
 - Was this information used to assist with traumatic events
 - Did they find the training useful

Stakeholder Interviews

- Respondents were extremely consistent in reflecting a high regard for the program
- The program was described as having a substantial impact on the community
- It was credited with:
 - Helping the community to heal itself
 - Assisting the community in coming together and handling the crises
 - "saving hundreds of lives" in a suicide cluster

Stakeholder Interviews

- Interventions described as "calming, supportive, always behind the scenes but thoroughly being there for us, not intruding but helping us to come to come together"
- Elected officials and their staff described the program, across the board as the best program for children in the city – "one we can always count on, 24 hours a day, seven days a week, to help with the worst situations"

Stakeholder Interviews

- CSP was important in helping teachers and other child caretakers view children differently and to gain an understanding of how a trauma might influence the children's behavior
- In other words, children who acted out previously would have been seen as "bad kids" but now are viewed as likely to be involved in some kind of trauma

Case Record Reviews

- The cases were randomly selected from the complete case records covering the program's four years of interventions
- For the 63 cases, CSP had provided a total of 163 interventions with up to a dozen interventions for a single incident

Case Record Reviews

- There were 11 different kinds of trauma incidents ranging from natural deaths and 9/11 to homicides and suicides
- Homicides and Suicides were the most frequent incidents
- The program served 19 different Boston neighborhoods with 5 of the poorest having over 5 incidents

Case Record Reviews

- Five types of interventions were used most often, frequently several being used for the same incident
- Consultations, debriefings and orientations were used in a quarter of the cases, supported services in about a third, and defusing in about 15% of the cases

- The CSP program served a wide variety of ethnic groups with the largest number of victims being African American, Latino and Caucasian
- Over the four years the interventions for all cases (approximately 250) directly involved over 5700 adolescents and 6400 adults or over 1200 individuals

- Interviews with 57 individuals who had participated in CSP training over the past four years
- Three subgroup classifications of participants:
 - School, Professional, Community

CSP Training

- Produced quantitative and qualitative data
- Main Research Questions
 - Did the CSP effectively teach the knowledge and skills it set out to teach?
 - What difference did these gained skills or increased knowledge have?
 - Did the trainees find the training beneficial and useful?

CSP Training

Did the CSP effectively teach the knowledge and skills it set out to teach?

Findings:

 90% reported that they had learned and retained information and skills for handling traumatic incidents

What difference did the gained skills and knowledge have?

Findings: Confidence

• 80% reported that they were confident about leading discussions in all 8 areas of trauma response with groups after a traumatic experience

- 90% reported they were somewhat to very confident about handling 8 of the 9 tasks essential to handling psychological trauma
- Being part of the trauma response team
- Identifying those who needed trauma support
- Being able to lead a trauma incident orientation
- Providing grief support Understanding their own self-care when helping those exposed to trauma

What difference did the gained skills and knowledge have?

Findings: Responding to Trauma

- 89% reported that, after being trained, they had responded to traumatic incidents (in any capacity)
 - 88% responded in their workplace

 - 39% responded in their community49% responded with friends and family

Did they find the training beneficial and useful?

Findings:

• 80% believed their community was better prepared for a traumatic incident as a result of their training

The training evaluations over a four period (n=1616) were extraordinarily high and averaged 4.7 on a 5 point scale

- All components of the evaluation showed consistent picture of a very well respected, highly utilized, effective program
- In a number of instances this training had a broader impact on communities and organizations
- Interviewees commented on how they had transferred the training to reform the operations of their organization

 Several community leaders commented that it had positively changed the way human service organizations interacted with each other in their communities

- They work effectively with all ethnic groups and communities
 - "They know every tragedy is not the same. They have different techniques in different communities. I like developing the local teams to help, to do what they're taught – but also to teach the program about the community. They make an immediate impact – you can see a difference at a wake or funeral when they're there." - Cape Verdean Community lead