



CHILD DEVELOPMENT-COMMUNITY POLICING (CD-CP)

Since, 1991 the Child Development Community Policing Program has provided collaborative child mental health-law enforcement responses to children and families exposed to violence and other potentially traumatic events in an effort to prevent poor psychological outcome.

Three interrelated interventions have been developed to achieve these goals.

Collaborative Acute Response: Clinical consultation available to police 24/7

Goals:

- Provide relief of immediate distress following a child/family's exposure to violence Engage children and families for follow up contact to allow:
 - Monitoring
 - Peri-traumatic assessment and intervention
 - Longer term treatment where needed

How we achieve these goals:

- CD-CP clinicians work together with police officers on scene with children and families who have been exposed to a violent or potentially traumatic event to:
 - Initiate psychological stabilization by helping children regain a sense of control
 - Provide information/psycho-education about how trauma can impact children
- Increase physical and psychological safety

Following the incident, acute referral, follow-up plans may include:

- Police officer visit to the child's home, neighborhood or school
- Police engagement of child in police-mentoring activities
- Clinical treatment recommendations
- Outpatient clinical services including:
 - Brief Peri-traumatic Family Intervention
 - Trauma Focused CBT and therapy
- Parent and family therapy
- Psychological assessment
- Psychopharmacologic consultation
- Assistance with court orders of protection
 - advocacy with prosecutors for increased bond, specific conditions of release, addition of charges, etc.
 - coordination of information flow between police, prosecutor, probation, advocates and victims
 - supportive contact with victims to assist in developing a greater sense of security and autonomy
- advocacy with other institutions to secure social services

DOMESTIC VIOLENCE HOME VISIT INTERVENTION (DVHVI)

The DVHVI is a community based home visit follow up project currently implemented in New Haven. The DVHVI utilizes police officer-domestic violence advocate teams to conduct unannounced home-visits to families who recently reported a domestic violence incident to the police department.

The New Haven PD's domestic violence unit provides referral cases to the DVHVI team

- Cases are reviewed and assigned to advocate/police teams
- Home visits take place within 72 hours of the violent event
- Police officers participate in follow up visits in neighborhoods where they are regularly assigned
- Officers introduce visits as regular police activity

Home Visits are intended to:

- Monitor victim safety
- Improve victims understanding and enforcement of court orders
- Increase access to information and concrete services
- Provide psychological screening
- Provide acute psychological support
- Provide access to treatment for victims and their children

At each visit the police-advocate teams

- Conduct a safety assessment
- Offer coordination with court-based advocates
- Explain judicial protective orders
- Provide legal information
- Enhance Law Enforcement
- Psycho-education re: children's responses to violence
- Psycho-education and referral for treatment
- Psychiatric crisis intervention

CHILD AND FAMILY TRAUMATIC STRESS INTERVENTION (CFTSI)

A Brief Peri-traumatic Secondary Prevention Model

CFTSI is a 3-4 session secondary prevention intervention for children and families during the peri-traumatic period

The intervention is implemented soon after a potentially traumatic event (PTE) (1-2 week period)

The intervention can be provided in the family home or clinical office

Goals

- Prevent children from developing posttraumatic symptoms and disorders by increasing the family's ability to provide emotional support
- Increase the level of treatment acceptance and involvement among for those children who require ongoing treatment

How do we do this:

- Increase the child and parental understanding of the effects exposure to a PTE may have on symptomatology, behavioral changes and overall daily functioning
- Increase the child's ability to communicate feelings and symptoms to parents
- Increase the parent's ability to effectively attend and listen to children's communications
- Increase the parent's ability to appropriately respond and support their child
- Provide concrete and case management services in order to decrease external familial stress