### Treatment Description

- **Acronym (abbreviation) for intervention:** CDCP
- **Average length/number of sessions:** 1-6
- **Aspects of culture or group experiences that are addressed** *(e.g., faith/spiritual component, or addresses transportation barriers):* race, language, poverty, access to treatment issues
- **Trauma type (primary):** community violence
- **Trauma type (secondary):** domestic violence
- **Additional descriptors** *(not included above):* CDCP is a collaborative model between law enforcement and child mental health professionals to respond to children and families in the aftermath of crime and violence. Two interventions included: 1) Domestic Violence Home Visit Initiative, in which outreach advocates and regular beat officers visit families after an incident of domestic violence, 2) Child and Family Traumatic Stress Initiative, a three-session postevent model to help parents support potentially traumatized children more effectively.

### Target Population

- **Age range:** *(lower limit)* 0 to *(upper limit)* 18+
- **Gender:** □ Males □ Females ☑ Both
- **Ethnic/Racial Group** *(include acculturation level/ immigration/refugee history-e.g., multinational sample of Latinos, recent immigrant Cambodians, multigeneration African Americans):* Primarily AA and latino, Latino range from new and/or illegal to multigeneration in continental U.S. Few new asians and african.
- **Other cultural characteristics** *(e.g., SES, religion):* improverished, multidemoninaional christian
- **Language(s):** english and spanish
- **Region** *(e.g., rural, urban):* urban
- **Other characteristics** *(not included above):*

### Essential Components

- **Theoretical basis:** CDCP is essentially a model of secondary prevention that provides crisis intervention and follow-up community- and clinic-based clinical and collaborative interventions for exposed children.
- **Key components:** 1) Training for Police Officers: all sergeants and above receive 24 hours in child development and trauma. All line officers receive in-services on the program. 2) Training for Clinicians: clinicians do a minimum of 50 hrs of "ride-alongs" with officers in police cars or on walking beats. 3) Program Conference: weekly meeting to review cases, and discuss collaborative follow-up or treatment. 4) Trauma Treatment Clinic: treatment for children who are symptomatic using multiple modalities. 5) Consultation Service: clinician availability to police 24/7. Clinicians

### Clinical & Anecdotal Evidence

- **Are you aware of any suggestion/evidence that this treatment may be harmful?** □ Yes ☑ No □ Uncertain
- **Extent to which cultural issues have been described in writings about this intervention** *(scale of 1-5 where 1=not at all to 5=all the time):* 2
This intervention is being used on the basis of anecdotes and personal communications only (no writings) that suggest its value with this group.  
☐ Yes ✗ No

Are there any anecdotes describing satisfaction with treatment, drop-out rates (e.g., quarterly/annual reports)?  ☒ Yes ☐ No

Has this intervention been presented at scientific meetings?  ☒ Yes ☐ No
If YES, please include citation: multiple,

Are there any general writings which describe the components of the intervention or how to administer it?  ☒ Yes ☐ No
If YES, please include citation:

Has the intervention been replicated anywhere?  ☒ Yes ☐ No
Other countries?  (please list)  Italy

Other clinical and/or anecdotal evidence (not included above): Multiple awards; including Presidential Acclamation (Clinton). Named the National Center for Children Exposed to Violence (1999) by Whitehouse and USDOJ.

<table>
<thead>
<tr>
<th>Research Evidence</th>
<th>Number of Participants</th>
<th>Sample Breakdown</th>
<th>Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pilot Trials/ Feasibility Trials (w/o control groups)</td>
<td>☒ Yes ☐ No N = x</td>
<td>By gender: By ethnicity: By other cultural factors:</td>
<td>replicated in multiple communities</td>
</tr>
<tr>
<td>Clinical Trials (w/ control groups)</td>
<td>☒ Yes ☐ No N = x</td>
<td>By gender: By ethnicity: By other cultural factors:</td>
<td>in progress for DVHVI and CDCP program</td>
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<tr>
<td>Randomized</td>
<td>☒ Yes N = x</td>
<td>By gender:</td>
<td>to begin for CFTSI</td>
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<tr>
<td>Control Trials</td>
<td>No</td>
<td>By ethnicity:</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>By other cultural factors:</td>
<td></td>
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<tr>
<td>Studies describing modifications</td>
<td>Yes</td>
<td>N =</td>
<td></td>
</tr>
<tr>
<td>Other research evidence</td>
<td>Yes</td>
<td>N =</td>
<td></td>
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### Outcomes
- What assessments or measures are used as part of the intervention or for research purposes, if any?
- If research studies have been conducted, what were the outcomes? CDCP evaluation in process. Study so far demonstrates that children exposed to violence in areas of the nation where a model exists receive more social, clinical, and police services than where model does not exist. Domestic violence initiative pilot demonstrated 50% decrease in recidivism compared to matched controls. A current evaluation will assess developmental outcomes.

### Training Materials & Requirements
- List citations for manuals or protocol descriptions and/or where manuals or protocol descriptions can be obtained.
- How/where is training obtained? Training is available at Yale child Study Center
- What is the cost of training?
- Are intervention materials (handouts) available in other languages?  Yes No
  - If YES, what languages?
- Other training materials &/or requirement (not included above): 15 community trained throughout the US. Four sites with strict adherence to model, others with modifications.

### Pros & Cons/Qualitative Impressions
- What are the pros of this intervention over others for this specific group (e.g., addresses stigma re. treatment, addresses transportation barriers)?
- What are the cons of this intervention over others for this specific group (e.g., length of treatment, difficult to get reimbursement)?: difficulty developing full partnerships
- Other qualitative impressions: Partnership and cross training are crucial

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