



WHAT IS PROJECT BEST?

Bringing Evidence-Supported Treatments
to South Carolina Children and Families

Overview of Project BEST

Project BEST is a 10-year state-wide collaborative effort to use innovative community-based dissemination, training, and implementation methods to dramatically increase the capacity of every community in South Carolina to deliver **evidence-supported mental health treatments (ESTs)** to every abused and traumatized child who needs them. We currently are in a 3-year Phase 1 of the project.

What is the Goal of Project BEST?

The long-term goal of **Project BEST** is to ensure that all South Carolina children and their families, who are identified as having experienced abuse and resulting trauma, receive appropriate, evidence supported mental health assessment and psychosocial treatment services.

Objectives of Project BEST

Project BEST will work for:

- Widespread, self-sustaining implementation of evidence-supported assessment and treatment models by mental health providers and service delivery systems throughout the state of South Carolina who work with abused children and their families.
- Use of evidence-based treatment planning and monitoring by professionals and agencies that identify and refer abused children and their families to mental health services.

Current Situation in South Carolina

- Research has demonstrated that child abuse is associated with the development of a variety of serious mental health problems including PTSD, depression, substance use, and delinquent behavior.
- Effective treatments (ESTs) for many of these problems have been developed, repeatedly tested, and are now ready for widespread dissemination.
- Unfortunately, very few abused children and families in SC receive these proven treatments.
- Few mental health professionals in SC are trained, knowledgeable, and skilled in the use of ESTs.

- Few professionals who identify and refer abused children and their families for treatment are knowledgeable about ESTs or how to do evidence-based treatment planning and monitoring.
- There is wide variation across the state in the treatment received by abused children and their families.

Activities of Phase 1 of Project BEST

Phase 1 is a 3-year pilot test period that includes several activities:

- Test the use of a **Community-Based Learning Collaborative (CBLC)** approach to dissemination, training, implementation, and sustained use of **Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT)** in four areas of South Carolina.
- Test **Children's Advocacy Centers (CACs)** as effective agents for building community capacity to deliver ESTs to abused children and their families.
- Identify individual, agency, local and state system barriers and solutions to implementing ESTs for abused and traumatized children across our state.
- Engage relevant state officials in the process of making ESTs available to abused children and their families in every community in South Carolina.

What is TF-CBT?

Trauma-Focused Cognitive-Behavioral Therapy is the most well-supported and effective treatment for children who have been abused and traumatized. Multiple clinical research studies consistently have found it to help children with PTSD and other trauma-related problems, and has been rated a **Model Program** and **Best Practice** for use with abused and traumatized children. TF-CBT currently is being used successfully in community service agencies across the country.

What is a Community-Based Learning Collaborative (CBLC)?

- A CBLC is a 12-18 month intensive training, skill building, and structured community implementation process for ESTs. In a CBLC, professionals from

several communities work together over time to build their competency and capacity to provide an EST.

- A CBLC includes mental health treatment **providers**, “**brokers**” of mental health services (i.e., those who identify and refer abused children to treatment providers), and other community stakeholders, including consumers. Providers learn to deliver the EST, while brokers learn evidence-based treatment planning and case management skills related to the EST.

- Each community forms a **Community Change Team** comprised of professionals committed to learning, building skill and competence, and delivering the EST to every child that needs it in their community. Agency senior leaders, supervisors, front-line therapists and caseworkers are involved in all aspects of the CBLC to promote thorough adoption, implementation, and sustained use of the EST.

- The CBLC approach includes multiple intensive and advanced training events, action period tasks, ongoing case consultation, consultation about implementation barriers, and other types of technical assistance.

- The faculty is composed of nationally known experts in the EST and community implementation challenges. Participants in the CBLC work together collaboratively and “share relentlessly” to maximize the impact of the training experiences, solve barriers to implementation, and share materials, ideas, and experiences.

- Progress is measured using relevant individual, agency, and community metrics.

Approximate Timeline of a CBLC

- Months 1-2: Community application and selection
- Months 3-5: Pre-Work Phase
- Month 6: Learning Session 1
- Months 6-8: Action Period 1
- Month 9: Learning Session 2
- Months 9-11: Action Period 2
- Month 12: Learning Session 3
- Months 12-14: Action Period 3
- Month 15: Learning Session 4
- Months 15-18: Action Period 4

Role of Children’s Advocacy Centers

CACs have strong, working relationships with all the important community stakeholders involved in child abuse cases, including mental health providers and brokers of services. Accreditation standards for CACs

mandate that they coordinate services through a Multidisciplinary Team (MDT) of these stakeholders, and that they provide or have the ability to refer abused children and their families to mental health services. Because of their central place in the service community, CACs are well-equipped to coordinate community participation in a CBLC, development of the Community Change Team, and sustained community implementation of the EST.

CACs participating in Project BEST

Hope Haven of the Lowcountry
Beaufort, SC

The Family Resource Center
Camden, SC

The Child’s Place
Greenwood, SC

**Children’s Advocacy Center
Of Spartanburg**
Spartanburg, SC

Coordinating Centers



Collaborators

- Office of the Governor of South Carolina
- South Carolina Department of Social Services
- South Carolina Department of Mental Health
- South Carolina State Office of Victim Assistance
- National Center on Child Traumatic Stress

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