

Current Evidence-Based Practices (EBP) Reviewed by Title IV-E Clearinghouse

Title IV-E Clearinghouse Website: <https://preventionservices.abtsites.com/>

IV-E Category	IV-E Reviewed Practice	IV-E Rating	On Kentucky's Prevention Plan, Not Reviewed by IV-E:
Mental Health	Functional Family Therapy (FFT)	Well-Supported	X
	Multisystemic Therapy (MST)*	Well-Supported	X
	MST for Child Abuse/Neglect	Does not meet criteria	
	Parent-Child Interaction Therapy (PCIT)	Well-Supported	X
	Trauma-Focused Cognitive Behavioral Therapy (TFCBT)	Promising	X
Substance Abuse	Families Facing the Future	Supported	
	Methadone Maintenance Therapy	Promising	
	Motivational Interviewing (MI)	Well-Supported	X
	Multisystemic Therapy (MST)*	Well-Supported	X
In-Home Parenting Skills Based:	Healthy Families America	Well-Supported	
	Nurse-Family Partnership	Well-Supported	
	Parents as Teachers	Well-Supported	

Other Practices on KY's Prevention Plan but not reviewed by IV-E Clearinghouse as of January 2020:	
Mental Health:	Cognitive Behavioral Therapy (CBT)
Substance Abuse:	Sobriety Treatment and Recovery Teams (START)*
In-Home Parenting:	Homebuilders
	Sobriety Treatment and Recovery Teams (START)*

*denotes more than one Prevention Category

EBPs Available in Two Rivers Region

Two Rivers Service Region-Audubon (Daviess, Hancock, Henderson, McLean, Ohio, Union and Webster Counties)
Centerstone (Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, and Warren)

EBP Intervention	Brief Description & Target Pop.	Intended Outcomes	Providers
Mental Health: Cognitive Behavioral Therapy (CBT)	<ul style="list-style-type: none"> Adults (18 and over) diagnosed with a mood disorder, Depressive Disorder Not Otherwise Specified, and minor depression. Skills-based, present-focused, and goal-oriented treatment approach that targets the thinking styles and behavioral patterns that cause and maintain depression-like behavior and mood. Skills are used to identify the typical “thinking traps” (cognitive distortions) that clients commit and challenge them to consider the evidence more fairly. Behavioral interventions include problem solving, behavioral activation, and graded activation or exposure. Treatment is generally time-limited and can be conducted in individual or group formats. 	<ul style="list-style-type: none"> Distinguish between thoughts and feelings. Become aware of how thoughts influence feelings in ways that are not helpful. Evaluate critically the veracity of automatic thoughts and assumptions Develop the skills to notice, interrupt, and intervene at the level of automatic thoughts. Use behavioral techniques to identify situations that trigger distress and sadness Use behavioral activation to become more attuned with meaningful reinforcement in their lives. Develop active problem-solving skills. 	CMHCs: Cumberland River ADANTA
Substance Abuse: Motivational Interviewing (MI)	<ul style="list-style-type: none"> A client-centered, directive method designed to enhance client motivation for behavior change. Focuses on exploring and resolving ambivalence by increasing intrinsic motivation to change. Can be used by itself, as well as in combination with other treatments. It has been utilized in pretreatment work to engage and motivate clients for other treatment modalities. 	<ul style="list-style-type: none"> Enhance internal motivation to change Reinforce this motivation Develop a plan to achieve change 	FPP: Buckhorn CMHC: ADANTA, Cumberland River
Mental Health: Parent-Child Interaction Therapy (PCIT)	<ul style="list-style-type: none"> Children ages two to seven years of age and their caretakers. A dyadic behavioral intervention for children and their parents or caregivers that focuses on decreasing externalizing child behavior problems, increasing child social skills and cooperation, and improving the parent child attachment relationship. 	<u>Child-Directed Interaction component:</u> <ul style="list-style-type: none"> Help children feel safe and calm by fostering warmth and security between parents and their children Increase children’s organizational and play skills Decrease children’s frustration and anger Enhance children’s self-esteem <u>Parent-Directed Interaction component:</u> <ul style="list-style-type: none"> Teach parent specific discipline techniques that help children to listen to instructions and follow directions 	CMHC: ADANTA Cumberland River

		<ul style="list-style-type: none"> Help parents develop confidence in managing their children's behaviors at home and in public 	
Mental Health: Trauma Focused – Cognitive Behavioral Therapy (TF-CBT)	<ul style="list-style-type: none"> The target age is three to 18 years old. A conjoint child and parent psychotherapy model for children who are experiencing significant emotional and behavioral difficulties related to traumatic life events. It is a components-based hybrid treatment model that incorporates trauma-sensitive interventions with cognitive behavioral, family, and humanistic principles. 	<ul style="list-style-type: none"> Improving child PTSD, depressive and anxiety symptoms Improving child externalizing behavior problems (including sexual behavior problems if related to trauma) Improving parenting skills and parental support of the child, and reducing parental distress Enhancing parent-child communication, attachment, and ability to maintain safety Improving child's adaptive functioning Reducing shame and embarrassment related to the traumatic experiences 	CMHC: ADANTA Cumberland River

Other EPBs on KY's Plan:

In-Home Parenting: Homebuilders	<ul style="list-style-type: none"> A home- and community-based intensive family preservation services treatment program designed to avoid unnecessary placement of children and youth into foster care, group care, psychiatric hospitals, or juvenile justice facilities. Engages families by delivering services in their natural environment, at times when they are most receptive to learning, and by enlisting them as partners in assessment, goal setting, and treatment planning.
Mental Health Functional Family Therapy	<ul style="list-style-type: none"> The target population is 11-18 year olds with serious concerns such as conduct disorder, violent acting-out and substance abuse. A family intervention program for youth experiencing dysfunction with disruptive, externalizing problems.
Mental Health & Substance Abuse: Multisystemic Therapy	<ul style="list-style-type: none"> Intensive family and community-based treatment for serious juvenile offenders with possible substance abuse issues and their families. The target population is 12 to 17 year olds who are at risk of out-of-home placement due to delinquent behavior.
Substance Abuse & In-Home Parenting: START	<ul style="list-style-type: none"> Serves families with at least one child under six years of age who are in the child welfare system and have a parent whose substance use is determined to be a primary child safety risk factor. Pairs child protective services (CPS) workers trained in family engagement with family mentors (peer support employees in long-term recovery) using a system-of-care and team decision-making approach with families, treatment providers, and the courts. Essential elements of the model include quick entry into START services to safely maintain child placement in the home when possible and rapid access to intensive addiction/mental health assessment and treatment.