RESIDENTIAL CHILD CARE PROJECT, CORNELL UNIVERSITY



### The CARE Model

The **Children And Residential Experiences** (CARE) program model helps agencies create trauma-sensitive environments that provide better relational and developmental experiences for children in care. Staff and leadership learn to apply a set of research-based principles so that the whole organization consistently operates in the best interests of children. These six CARE principles support practices that are:

(1) **Relationship-based**: builds healthy adult-child relationships, developing this skill in the children

(2) **Trauma-informed**: are sensitive to the child's trauma history

(3) **Developmentally-focused:** gives children opportunities for normal growth experiences and adjusts expectations to each child's unique needs

(4) **Family-involved:** adapts to families' cultural norms and promotes active family involvement

(5) **Competence-centered:** gives children opportunities to build self-confidence and competence

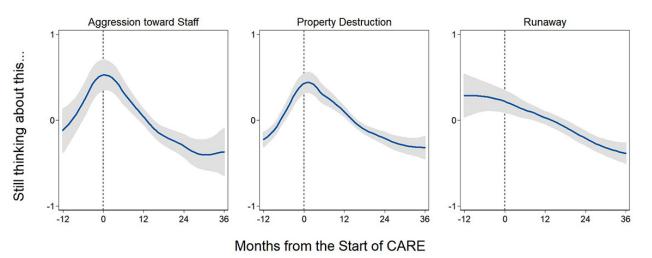
(6) Ecologically-oriented: enriches physical and social environments to create a more therapeutic setting

QuickTRIP (Translating Research Into Practice) August 2022

## **Reducing Behavioral Incidents Through Implementation of CARE**

A study by the RCCP provides scientific evidence that implementing the CARE model leads to significant reductions in dangerous behavioral incidents. This provides a more therapeutic, trauma-sensitive living environment for residents.

## **Evaluating CARE Impact\***



Serious behavioral incidents may occur when children become overwhelmed with distress and adults' responses fail to calm them or lead to power struggles and alienation. RCCP researchers expected that using CARE principles would lower incidents by enabling staff to respond in a more sensitive, flexible, and caring manner.

In an evaluation funded by the Duke Endowment, six agencies started CARE in 2010 (Cohort 1) and five started CARE in 2011 (Cohort 2). Agencies provided monthly counts of behavioral incidents for 12 months before and 36 months after starting CARE.

**RESULTS**: Incidents started dropping *only after CARE began*. Three types of incidents decreased significantly in both Cohorts: Aggression towards staff, Property destruction, and Runaways. Two types of incidents decreased only in Cohort 1: Self-harm and Peer aggression.

\*Izzo, C.V., Smith, E. G., Holden, M. J., Norton, C. I., Nunno, M.A., & Sellers, D. E. (2016). Intervening at the setting level to prevent behavioral incidents in residential child care: Efficacy of the CARE program model. *Prevention Science*, 17(5), 554–564.

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**Practice Implications:** Staff will be better able to prevent crises and navigate difficult situations when their whole organization is working toward a common goal and operating from the same principles.

# How does CARE reduce behavioral incidents?

This graphic shows how CARE uses an ecological approach to prevent incidents.

- CARE implementation helps agencies make targeted changes across the entire agency (outer layer-green).
- These changes create positive conditions "upstream" that enable staff to respond adaptively when challenging situations arise (inner layer—yellow).

#### Why does reducing behavioral incidents matter for staff?

With fewer incidents in the program, staff will experience...

- Fewer injuries and traumatic experiences
- Less fearful climate (What is going to happen to me today? Will I get hurt? Will I get in trouble?)
- Greater feeling of confidence and competence in their role
- More opportunity for constructive teamwork when not in continuous crisis
- More enjoyment of job; more connection to purpose; less likely to leave job

**QuickTRIPs** are translations of RCCP research for practitioners.

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#### Child is upset ...exhibits challenging behavior

#### Staff responds adaptively

...recognizes the child's pain, responds with active listening ...stays calm, manages own feelings and behaviors

- ...adopts a non-threatening posture and tone of voice
- ...uses opportunity to help the child verbalize feelings and practice self-calming ...co-regulates with the child

...manages the environment (e.g., moves to quiet area with fewer triggers) ...adjusts expectations to reduce the child's stress

### Agency creates conditions that help staff respond adaptively

- Prioritizes healing relationships and growth over compliance
- Expects staff to address the child's underlying needs, not to control "bad behavior"
- Adjusts routines to free up time for staff to be with children
- Discourages rigid rules and encourage adjusting expectations
- Provides reflective supervision to practice listening and co-regulation skills
- Ensures that staff:
  - can recognize pain-based behavior
  - learn about children's trauma history and stress triggers
  - learn to see challenging behaviors as "normal"

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