

TRAINING GUIDELINES

Skills Training in Affective and Interpersonal Regulation for Adolescents /Narrative Therapy (STAIR-A/NT)

<p>Field</p>	<p><i>May include requirements, recommendations, minimum standards, variations, ratios & other considerations</i></p>
<p>Treatment/Product Description</p>	<p>Description: Skills Training in Affective and Interpersonal Regulation for Adolescents (STAIR-A) is a cognitive behavioral intervention for adolescents (age 11 and up) exposed to multiple traumas. An initial skills training module (STAIR-A; 8-12 sessions) targets the development of emotion regulation and interpersonal skills while the narrative therapy (NT; 4-8 sessions) module focuses on creating a narrative about the trauma(s) in the context of a developing life story. The intervention aims to support adolescents in developing the emotional and relational capacities that can support current functioning and enhance future resilience.</p> <p>STAIR-A/NT has been implemented in a range of settings and formats, including a school-based group format, individual and group formats in outpatient settings, and a brief group version (Brief STAIR-A) in psychiatric inpatient and juvenile justice settings. STAIR-A prioritizes flexible and personalized delivery and can be implemented alone or in combination with the narrative therapy component.</p> <p>NCTSN Fact Sheet Available: http://www.nctsn.org/sites/default/files/assets/pdfs/STAIRNST_2-11-05.pdf</p> <p>Culturally-Specific Information Available: STAIR-A/NT has been delivered to culturally diverse adolescents in research and in clinical practice settings. Details can be found in the resources listed below.</p> <p>Goals: STAIR-A/NT aims to improve adolescent functioning by strengthening emotion regulation and interpersonal skills; to reduce trauma-related symptoms, including symptoms of PTSD, anxiety, and depression; and to enhance resilience by promoting new behaviors that support social engagement, self-mastery, and a sense of agency.</p> <p>Target Population: STAIR-A has been delivered to adolescents (ages 11 and above) who have been exposed to multiple traumas and present with a wide range of trauma-related difficulties. The intervention has been delivered in inpatient, outpatient, school, and juvenile justice settings.</p> <p>Essential Components: The skills training module of STAIR-A can be delivered in a group or individual format. The narrative therapy module, which includes review of traumatic events and the development of a trauma narrative, is always delivered individually.</p> <p>Other considerations: Brief STAIR-A, a 3-module group version that has been used in inpatient and juvenile justice settings, is available as well.</p>
<p>Training</p>	<p style="text-align: center;"><u>MINIMALLY ACCEPTABLE TRAINING</u></p> <p>Mode of Training: Initial 2-day face-to-face training, review of treatment manual, and ongoing consultation on one case to completion.</p>

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<p>Training continued</p>	<p>Content: Training consists of didactics on the impact of trauma on children and adolescents; assessment of trauma and trauma-related difficulties; rationale and evidence-base for STAIR-A/NT; session-by-session review of intervention content, including role play and rehearsal of skills; implementation of STAIR-A/NT in specific setting.</p> <p>Number of Days/Hours Total/Minimum: 14 hours for the initial face-to-face training and 12 hours of consultation calls.</p> <p>Options for Make-up: None</p> <p>Training Cost: Training costs vary depending on number of clinicians being trained, location of training, and length of ongoing consultation. Costs of the initial training typically range from \$4,000-\$6,000 per agency. In addition, the cost for each 1-hour consultation call is typically \$150-\$225, depending on the consultant.</p> <p style="text-align: center;"><u>MOST COMPREHENSIVE/HIGHEST RECOMMENDED TRAINING</u></p> <p>Mode of Training: Initial 2-day face-to-face training, review of treatment manual, 1-day face-to-face booster training, ongoing consultation on minimum of two cases (individuals or groups) to completion.</p> <p>Content: Training consists of didactics on the impact of trauma on children and adolescents; assessment of trauma and trauma-related difficulties; rationale and evidence-base for STAIR-A/NT; session-by-session review of intervention content, including role play and rehearsal of skills; implementation of STAIR-A/NT in specific setting.</p> <p>Number of Days/Hours Total/Minimum: 14 hours for the initial face-to-face training; 24 hours of consultation calls; and 7 hours of booster training.</p> <p>Options for Make-up: None</p> <p>Training Cost: Training costs vary depending of number of clinicians being trained, location of training, and length of ongoing consultation. Costs of the initial training typically range from \$4,000-\$6,000 per agency. The cost for each 1-hour consultation call is typically \$150-\$225, depending on the consultant. Cost for booster training typically ranges from \$2,000-\$3,000 per agency.</p> <p>Training Contact Information: Omar Gudino, PhD, ABPP, Assistant Professor, Department of Psychology, University of Denver (Omar.Gudino@du.edu)</p>
<p>Selection</p>	<p>Minimum Education Level: Master’s degree in a mental health discipline and clinical training in child and adolescent mental health.</p> <p>Licensure/Certification: License to practice independently (or working under the supervision of a licensed professional for therapists in training or those working towards licensure).</p> <p>Experience: Background in cognitive behavioral therapy is recommended.</p>

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<p>Selection continued</p>	<p>Match/Fit: This intervention has been delivered in individual and group formats in school, outpatient mental health, adolescent psychiatric inpatient, and juvenile justice settings.</p>
<p>Preparation for Training and Implementation</p>	<p>Clinician Readiness Assessment Available? No</p> <p>Agency Readiness Assessment Available? No</p> <p>Typical Prerequisites for Training: None</p> <p>Pre-reading/Other: Gudiño, O.G., Leonard, S., Stiles, A., Havens, J.F., & Cloitre, M. (2017). <i>Skills Training in Affective and Interpersonal Regulation for Adolescents (STAIR-A)</i>. In M. Landolt, U. Schnyder, & M. Cloitre (Eds.), <i>Evidence-based Treatments for Trauma-Related Disorders in Children and Adolescents</i>. New York: Springer.</p> <p>Cloitre, M., Cohen, L. R., & Koenen, K. C. (2006). <i>Treating the trauma of childhood abuse: Psychotherapy for the interrupted life</i>. New York: Guilford.</p>
<p>Consultation</p>	<p>Type/Mode/Ratio: Individual or group telephone/video calls; maximum of 8 clinicians are recommended for each group call.</p> <p>Frequency: Twice per month for at least 6 months.</p> <p>Participation: Case presentation, rehearsal/role play, fidelity review/feedback.</p> <p>General/Expected Duration of Consultation: One-hour telephone or video call. Minimum of 6 months of consultation is recommended.</p> <p>Demonstrated Proficiency/Mastery/Competence: Completion of all training requirements.</p> <p>Other Parameters of Consultation: None</p>
<p>Case Completion Requirements</p>	<p>Case Selection Criteria: Adolescents age 11 or older who have been exposed to trauma.</p> <p>Case Completion: Minimum completion of one individual case (including narrative therapy component) or one group (including individual narrative therapy component). Completion of two cases (individual and/or group) is recommended.</p> <p>Fidelity: Fidelity is monitored using a fidelity checklist (self-assessment completed by the clinician). Trainers also assess fidelity during consultation calls and provide feedback to support implementation with fidelity.</p> <p>Mode of Review (e.g., Video/Audio/Test): Discussion during consultation calls. Audio/video review also possible, depending on setting.</p>

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<p>Maintenance</p>	<p>Booster: Ongoing training and consultation can be provided to support implementation efforts. Refer to description of comprehensive training above for details.</p> <p>Advanced: Not yet determined.</p> <p>Maintenance Plan/Continuing Education: Not yet determined.</p>
<p>To Supervise Providers of the Treatment/Product</p>	<p>Prerequisites needed to supervise use of the Treatment/Product: Individuals that have completed the training and consultation sequence outlined above may be approved to serve as onsite supervisors. Onsite supervisors may provide ongoing supervision of clinicians within their agency only, to support sustainability of the practice.</p>
<p>To Train Providers in the Treatment/Product</p>	<p>Prerequisites needed to train providers in the Treatment/Product: A formal train-the-trainer option is not yet available. Options for developing capacity for in-house trainers to support sustainability can be discussed with trainer/consultant.</p>
<p>Endorsement or Certification Options</p>	<p>For Clinician: Not yet available.</p> <p>For Supervisor: Not yet available.</p> <p>For Trainer: Not yet available.</p> <p>Decision-making process/body: Not yet available.</p> <p>Roster of Trainers: Marylene Cloitre, PhD; Omar Gudino, PhD, ABPP; Christie Jackson, PhD; Susan Trachtenberg Paula, PhD; Tamar Gordon, PhD</p>
<p>Additional Resources</p>	<ol style="list-style-type: none"> 1. Cloitre, M., Cohen, L. R., & Koenen, K. C. (2006). <i>Treating the trauma of childhood abuse: Psychotherapy for the interrupted life</i>. New York: Guilford. 2. Gudiño, O.G., Leonard, S., Stiles, A., Havens, J.F., & Cloitre, M. (2017). <i>Skills Training in Affective and Interpersonal Regulation for Adolescents (STAIR-A)</i>. In M. Landolt, U. Schnyder, & M. Cloitre (Eds.), <i>Evidence-based Treatments for Trauma-Related Disorders in Children and Adolescents</i>. New York: Springer. 3. Gudiño, O.G., Leonard, S., & Cloitre, M. (2016). STAIR for Girls: A Pilot Study of a Skills-Based Group for Traumatized Youth in an Urban School Setting. <i>Journal of Child & Adolescent Trauma</i>, 9(1), 67-79. doi: 10.1007/s40653-015-0061-0 4. Gudiño, O.G., Weis, J.R., Havens, J.F., Biggs, E.A., Diamond, U.N., Marr, M., Jackson, C.L., & Cloitre, M. (2014). Group Trauma-Informed Treatment for Adolescent Psychiatric Inpatients: A Preliminary, Uncontrolled Trial. <i>Journal of Traumatic Stress</i>, 27(4),496–500. doi: 10.1002/jts.21928 5. www.stairnt.com

**Additional
Resources
continued**

Ford, J. & Blaustein, M. (2013). Systemic self-regulation: A framework for trauma-informed services in residential juvenile justice programs. *Journal of Family Violence*, 28.

Hodgdon, H., Kinniburgh, K., Gabowitz, D., Blaustein, M. & Spinazzola, J. (2013). Development and implementation of trauma-informed programming in residential schools using the ARC framework. *Journal of Family Violence*, 28, 679-692.

Arvidson, J., Kinniburgh, K., Howard, K., Spinazzola, J., Strothers, H., Evans, M., Andres, B., Cohen, C. & Blaustein, M. (2011). Treatment of complex trauma in young children: Developmental and cultural considerations in applications of the ARC intervention model. *Journal of Child and Adolescent Trauma*, 4, 34-51.

Book Chapters:

Blaustein, M. & Kinniburgh, K. (2017, in press). *The Attachment, Regulation, and Competency (ARC) treatment model*. In M. Landolt, U. Schnyder, and M. Cloitre (Eds.). Evidence-based Treatments for Trauma-Related Disorders in Children and Adolescents, Springer International Publishing.

Blaustein, M. & Habib, M. (2016). *Group treatment with trauma impacted youth*. In C. Haen and S. Aronson (Eds.), The Handbook of Child and Adolescent Group Therapy, Routledge Press.

Ford, J., Blaustein, M., Habib, M., and Kagan, R. (2013). *Developmental Trauma Disorder-Focused Interventions for Traumatized Children and Adolescents*. In J. D. Ford & C. A. Courtois (Ed.). Treating complex traumatic stress disorders in children: An evidence-based guide. New York: Guilford Press.

Blaustein, M. (2012). *Introduction to childhood trauma and a framework for intervention*. In E. Rossen & R. Hull (Eds.), Supporting and Educating Traumatized Children: A Guide for Educators and Professionals. Oxford University Press.