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Evidence Based Programming: A Case Study, 2007 – 2010, Phnom Penh Cambodia

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Evidence Based Programming: A Case Study, 2007 – 2010, Phnom Penh Cambodia

The Learning to Impact the Forgotten and Excluded (LIFE) Initiative was undertaken by World Vision US between 2007 and 2010 in Albania, Georgia, Cambodia, India, Myanmar and Mexico. The project aimed to develop a basket of evidence based practices within the field of child protection. The project in Cambodia described herein was undertaken in partnership with the Johns Hopkins University (JHU), Applied Mental Health Research Group.

In August 2007, in collaboration with students of the Sociology Department at the Royal University of Phnom Penh, a qualitative study was undertaken with survivors of trafficking, sexual abuse and commercial sexual exploitation (CSE). Undertaken in 5 residential facilities, the study aimed to identify from the perspective of the girls what problems most significantly affect them, and what behaviours, attributes or activities provide an indication that such children are now doing well. The qualitative methodologies of Free-Listing and Key Informant Interviewing were employed. The most prominent problems described by the children were in regard to their experience of symptoms of mental distress, psychosocial problems, and, as articulated by a number of young women, the problem of being 'hated by society'.

In order to be able to identify the individual needs of children and to evaluate intervention effectiveness, several standard mental health assessment tools used with traumatised child populations were identified¹. These were adapted using the data gained from the qualitative study, piloted and validated for use with the aforementioned population (Bass et al; 2010). The validated versions of these measures were incorporated into the standard operating procedures of the residential facilities. Thereafter a pilot was conducted seeking to adapt the clinical intervention known as Trauma Focussed Cognitive Behavioural Therapy² (TF-CBT).

The presentation plans to describe the project and the strengths of the sequential applied research approach including the preliminary qualitative data collection, instrument development and validation phases, and adaptation and implementation of an appropriate intervention. Participants at the workshop will learn about the pilot and may register to receive: the pilot & validation study; the assessment tool; a summary of the TF-CBT feasibility study; and, receive a link to access to the JHU document outlining the Free-list methodology and sequential approach.

¹ Center for Epidemiological Studies Depression Scale for Children (CES-D), the Posttraumatic Stress Disorder – Reaction Index (PTSD-RI), and a scale about shame entitled My Feelings About the Abuse. In addition, we selected the Children's Hope Scale to represent the resiliency factor of hope.

² Deblinger, E., Cohen, J., and Mannarino, A. (2003). *Child and parent trauma-focused cognitive behavioral therapy treatment manual*. Pittsburgh, PA: Allegheny General Hospital Center for Traumatic Stress in Children and Adolescents.