

## Treatments

### **CTRP offers several treatment models:**

#### **Child Parent Psychotherapy (CPP)**

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Child-Parent Psychotherapy (CPP) is an intervention model for children aged 0-5 who have experienced at least one traumatic event (e.g. maltreatment, the sudden or traumatic death of someone close, a serious accident, sexual abuse, exposure to domestic violence) and/or are experiencing mental health, attachment, and/or behavioral problems, including posttraumatic stress disorder (PTSD). The type of trauma experienced and the child's age or developmental stage determine the structure of CPP sessions. For example, with infants, the child is present but treatment focuses on helping the parent to understand how the child's and parent's experience may affect the child's functioning and development. Toddlers and preschoolers are more active participants in treatment, which usually includes play as a vehicle for facilitating communication between the child and parent.

Caregiver and child are guided over the course of treatment to create a joint narrative of the traumatic event and to identify and address traumatic triggers that generate dysregulated behaviors and affect.

Treatment is generally conducted by a master's or doctoral-level therapist or a supervised trainee with at least two years of clinical experience. Treatment involves weekly hour-long sessions.

To find a CPP provider in your community, please click here <sup>[1]</sup>.

#### **Perinatal Child-Parent Psychotherapy (P-CPP)**

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Perinatal Child-Parent Psychotherapy (P-CPP) is an application of the Child-Parent Psychotherapy to the perinatal period, for expecting mothers who have experienced trauma or significant stress. It is a relationship-based and trauma-informed treatment that begins during pregnancy and continues through postpartum period until the baby is 12 months old. P-CPP engages the mother-baby dyad, and mother-father-baby triad when possible, to repair trauma, promote attachment, and address the unique challenges and opportunities of pregnancy and the perinatal period.

P-CPP starts during pregnancy with the goal of guiding parents-to-be towards greater self-understanding and a more loving capacity to provide safe and nurturing care for their baby.

While pregnancy and the first months of the baby's life are normal developmental transitions, this time is also one of enormous physical and emotional vulnerability for parents and baby. P-CPP aims to provide mothers and fathers with the support they need when their adverse life circumstances and their emotional and interpersonal difficulties interfere with their ability to give their baby the love, care, and protection needed to promote healthy development.

## **Attachment Vitamins**

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Attachment Vitamins is a 10-week intervention designed to help parents and caregivers of children aged birth-5 years learn about child development and the impact of stress and trauma, reflect on the child's experiences and the possible meanings of the child's behaviors, and promote secure attachment and safe socialization practices. Attachment Vitamins is available as a home visiting intervention and a group intervention. Additionally, much of the psych-educational content within Attachment Vitamins has been distilled into an interactive online course [2] for caregivers and professionals working with young children and their families.

## **Building Bridges/Semillas De Apego**

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Building Bridges is a parent/caregiver group adaptation to Child Parent Psychotherapy. It is designed to strengthen the caregiver-child relationship by creating a supportive space for caregivers of children under 6 years old to 1) increase their reflective capacity, 2) integrate mindfulness in their life, 3) explore the impact of trauma and stress on their family 4) build a supportive community with other caregivers. The group sessions connect the past, present and future by inviting caregivers to reflect on ways their childhood experiences influence their parenting today, and by reminding them that they have the power to build and sustain an attuned caregiver-child relationship that will be the most powerful protective factor for their child in the future. The curriculum uses art and experiential activities and relies on the power of relationships, rather than specific skills or tools, to be the main mechanism of growth and healing. This group has been applied and studied in community-based settings, including family homeless shelters, and has been adapted to communities exposed to armed conflict in Colombia (named Semillas de Apego).

## **To obtain treatment services**

**Please contact our intake referral line at (628) 206-5311.**

UCSF-Zuckerberg San Francisco General Hospital and Trauma Center | 1001 Potrero Ave.,  
Building 20, Suite 2100 San Francisco, CA 94110 | 415.206.5979

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A PARTNER IN  
**NCTSN**

The National Child  
Traumatic Stress Network

Substance Abuse and Mental Health Services Administration  
**SAMHSA**



**ZERO TO THREE**  
Early childhood

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**Source URL:** <https://childtrauma.ucsf.edu/treatments>

**Links**

[1] <https://childtrauma.ucsf.edu/cpp-provider-roster>

[2] <https://learn.nctsn.org>