Who We Are

CTTC is a program within the UMass Medical School, Department of Psychiatry. CTTC is funded by a 5-year Substance Abuse Mental Health Services Administration (SAMHSA), National Child Traumatic Stress Network (NCTSN) Category III grant, from 2016-2021 with additional funding by the Department of Mental Health and the Lookout Foundation.

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Child Trauma Training Center
Linking Families, Training Providers, Informing Communities
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LINK-KID
A Centralized Referral System

Linking families, training providers, informing communities.
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What is LINK-KID

LINK-KID (A Centralized Referral System) provides a single point of access to connect youth (ages 0-22) who may benefit from Evidence-Based Treatments (EBTs) for trauma with providers trained in these treatments. EBTs have research supporting their effectiveness in addressing trauma related symptoms and behaviors.

LINK-KID maintains an active database of providers across the state trained in trauma-focused EBTs, including information about waitlists, language capacity, and insurances accepted.

The primary goal of LINK-KID is to help youth who have experienced trauma to receive treatment in a timely, evidence-based, family focused manner. LINK-KID has been able to reduce wait times for connecting youth with effective treatments and provide support during wait times.

Treatments referred for:
- Child Parent Psychotherapy (CPP);
- Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT);
- Parent Child Interaction Therapy (PCIT);
- Attachment, Self-Regulation & Competency (ARC);
- Alternatives for Families: Cognitive-Behavioral Therapy (AF-CBT)

Key Features of LINK-KID

Parents, caregivers, and child-serving professionals (physicians, teachers, attorneys, etc.) are able to make just one referral to LINK-KID for treatment for their child, rather than make referrals to numerous local mental health agencies.

Calls are screened for trauma exposure and trauma-related symptoms. Appropriate treatment options are discussed with caregivers and/or referral sources.

LINK-KID coordinators update caregivers and referral sources on the status of the youth’s referral.

Parents/caregivers receive psychoeducational materials related to their child’s trauma exposure and symptoms; information on evidence based trauma treatments; and information on the healing process of trauma.

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