Trauma and Grief Component Therapy for Adolescents (TGCT-A)

TARGET AUDIENCE
This program is for individuals who are 12 to 20 years old and have experienced trauma or loss.

SUMMARY
Trauma and Grief Component Therapy for Adolescents (TGCT-A), a school- or community-based program, is designed to reduce symptoms of Post-Traumatic Stress Disorder (PTSD), depression, and maladaptive grief and improve behavior in school and academic performance and facilitate suitable developmental progression.

EVIDENCE
Results from a single group pretest / posttest study indicated significant reductions in post-traumatic stress, depression, and grief symptoms. Reductions in distress were associated with higher levels of psychosocial adaptations. A second study of the same design found improvements in post-traumatic stress, complicated grief symptoms, and academic performance, but no improvement was found for depressive symptoms. A third single group, pretest / posttest study found reductions in PTSD and maladaptive grief reactions. One study, published in 1997, included a no-treatment group and found 1 1/2 years after the program was delivered that the treatment group had a significant reduction in the severity of post-traumatic stress symptoms and no change in depressive symptoms. However, depressive symptoms in the untreated group worsened over time, so participation in the program appeared to mitigate this effect.

COMPONENTS
TGCT-A is designed to be sensitive and adaptable to cultural, developmental, or religious differences in responses to trauma and loss. The program may be implemented as a group or individual program and contains four modules:

- Psychoeducation and Skills Training: Complete assessments and receive treatment based on individual or group needs. Learn emotion regulation skills that promote positive coping mechanisms, such as confronting harmful beliefs about trauma and loss, acquiring social support, solving problems, and managing reminders of trauma and loss.
- Traumatic Stress: Consider ways in which traumatic experiences continue to impact one's life, choose one or more traumatic experiences to work on, and share personal experiences of trauma and loss.
- Grief and Loss: Understand different reactions to grief (i.e., separation distress, existential/identity distress, or circumstance-related distress). Receive a customized treatment approach to grief based on participant's grief profile that includes skills training and therapeutic experiences that are specific to various types of distress.
- Developmental Progression: Learn interpersonal skills, such as prosocial engagement and providing social support to others. Plan and prepare for future stressors, consider relapse prevention, and summarize gains made in treatment.

Optional family/parent sessions can be implemented at various points throughout treatment and are recommended when possible to promote positive parent/child communication. Program materials are available in English and Bosnian; however, authors are willing to adapt and translate the program for different cultures.

PREVIOUS USE
This program has been implemented in the United States and internationally and in a variety of settings with youth who have experienced a range of trauma (e.g., community violence, natural and man-made disasters, physical assault, gang violence, domestic violence, terrorist events). It is unclear when the program was first implemented; however, elements of the program were field-tested in 1988 after the Armenian earthquake. In addition, the program has been tailored to meet the needs of military families; particularly, military families who have experienced trauma and grief.

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# Trauma and Grief Component Therapy for Adolescents (TGCT-A)

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## TRAINING

Clinicians who have a master's or doctoral degree facilitate this program, and a 3-day training is required and provided on-site by the National Child Traumatic Stress Network (NCTSN). Weekly telephone supervision/consultation sessions are provided for 4 months following completion of training. In addition, the program manual includes support for program implementation. Cost of training varies depending on the number of trainees, NCTSN status, and other factors. Please contact Dr. William Saltzman using details in the Contact section for more information.

## CONSIDERATIONS

Considerations for implementing this program include acquiring participant buy-in and, in some cases, parental buy-in; recruiting facilitators who have a suitable educational background; locating space that can accommodate individual and/or group sessions; understanding this program will broach and discuss sensitive and disturbing topics; and finding time to implement sessions.

The Clearinghouse can help address these considerations. Please call 1-877-382-9185 or email Clearinghouse@psu.edu

## IMPLEMENTATION

If you are interested in implementing TGCT-A, the Clearinghouse is interested in helping you! Please call 1-877-382-9185 or email Clearinghouse@psu.edu

Number and duration of sessions can vary based on need; however, generally, 10 to 24 sessions are implemented for 50 to 90 minutes each.

Some materials are free. Some implementation materials are copyrighted and require an individual or site license, which depends on NCTSN status. Please contact the developer using details in the Contact section for more information.

## EVALUATION PLAN

To move TGCT-A to the Effective category on the Clearinghouse Continuum of Evidence at least one additional evaluation must be conducted that demonstrates sustained, positive outcomes.

The Clearinghouse can help you develop an evaluation plan to ensure the program components are meeting your goals. Please call 1-877-382-9185 or email Clearinghouse@psu.edu

## CONTACT

Contact the Clearinghouse with any questions regarding this program.

Phone: 1-877-382-9185 Email: Clearinghouse@psu.edu

You may also contact Dr. William Saltzman by mail 2179 Kinneloa Canyon Rd., Pasadena, CA 91107, phone 1-626-840-2900, email wsaltzman@sbcglobal.net, or visit www.nctsn.org/about-us/contact-us.

## SOURCE