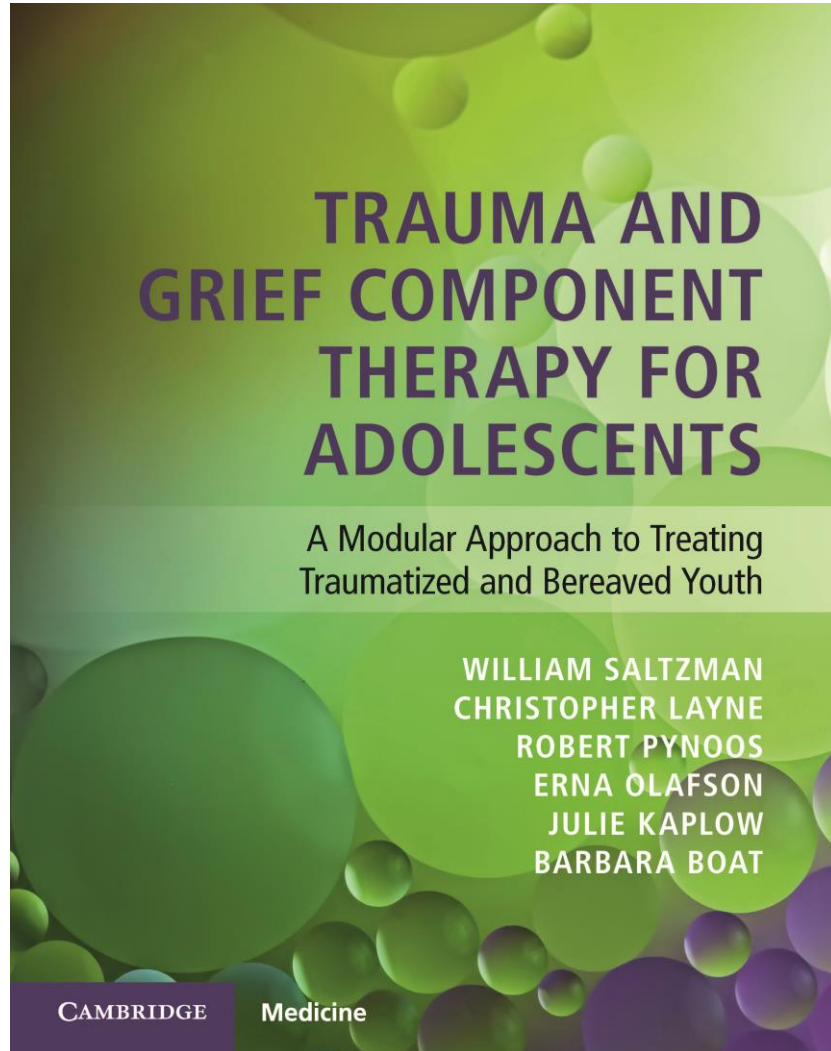


# Trauma and Grief Component Therapy for Adolescents (TGCTA): An Introduction and Overview of the Treatment and Training

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# Trauma and Grief Component Therapy for Adolescents (TGCTA)

(Saltzman, Layne, Pynoos, Olafson, Kaplow, & Boat, 2017)



## Major TGCTA Components

- Psychoeducation
  - Trauma & PTSD, bereavement & grief, depression
  - Trauma reminders, loss reminders, and how they can influence current mood and functioning
  - Developmental impacts of trauma and loss
- Coping skills training for:
  - emotional self-regulation
  - managing trauma reminders and loss reminders
  - social support (recruit social support, support others)
  - secondary adversities, other life adversities
- Trauma processing (for trauma, traumatic bereavement)
- Grief & loss processing (for bereavement, traumatic bereavement)
- Address functional impairment and risky behavior
- Focus on developmental disruptions & tasks, positive life aspirations
- The social contract, prosocial behavior, constructive civic engagement

# Trauma and Grief Component Therapy for Adolescents (TGCTA)

(Saltzman, Layne, Pynoos, Olafson, Kaplow, & Boat, 2017)

| Module 1   | Module 2          | Module 3                | Module 4                                     |
|--|-------------------|-------------------------|--|
| -Group Cohesion<br>-Psycho-Education<br>-Coping Skills | Trauma Processing | Grief & Loss Processing | Promoting Adaptive Developmental Progression |

## Key Design Features:

- **Modularized**
- **Assessment-driven** (UCLA PTSD Reaction Index for DSM-5; Prolonged Grief Disorder Checklist)
- **Theory-based** (developmental psychopathology, multidimensional grief theory)
- Can be flexibly **tailored** to clients' particular needs, strengths, life circumstances, informed wishes
- Can be **adapted** for different modalities and settings (school, clinic, private practice, juvenile justice)

# Why Implement TGCTA? 8 Primary Strengths

(Adapted from the Introduction of the TGCTA manual; Saltzman, Layne, et al., 2017)

- 1. Specialized focus on adolescence:** Given its focus on teenagers, TGCTA specifically addresses the developmental needs, strengths, risks, challenges, tasks, and life circumstances of adolescents. TGCTA components (e.g., sketches, discussion topics, planning for the future) are designed specifically for adolescents. TGCTA focuses not only on symptoms, functioning, and risky behavior. It also focuses on development by addressing developmental disruptions and promoting healthy developmental progression. Key intervention objectives include:
  - Learn about and acknowledge developmental impacts (e.g., reluctance to form close relationships)
  - Make progress on age-appropriate developmental tasks
  - Address functional impairment, risky behavior, and developmental disruption
  - Take advantage of enriching developmental opportunities
  - Strengthen the social contract (form healthy social bonds; recruit support; support others in need)
  - Facilitate healthy moral reasoning and conscience development (“What is the right thing to do?”)
  - Engage in constructive public advocacy and civic life (community service)

# Why Implement TGCTA? 8 Primary Strengths

2. **Interplay between trauma and bereavement:** TGCTA can be tailored to address trauma, bereavement, traumatic bereavement, and their aftermath. This includes an interplay that can arise after traumatic deaths between posttraumatic stress reactions (to the distressing circumstances of the death) on one hand, and grief reactions (to the ongoing loss) on the other. Examples of this interplay include:
- **posttraumatic stress reactions can interfere with helpful grieving** (e.g., unpleasant thoughts about how a loved one died interfere with efforts to reminisce about them)
  - **grief reactions can worsen posttraumatic stress reactions** (e.g., losing the will to live or feeling guilty over their death can undermine motivation to adjust and move forward)

TGCTA can be tailored to address both **overtly traumatic deaths** (e.g., accidents) as well as **tragic deaths** that contain traumatic or deeply distressing elements (e.g., slowly progressing wasting illnesses, preventable deaths).

# What Makes TGCTA Unique? 8 Primary Strengths

- 3. Modularized, assessment-driven format:** Practitioners can use TGCTA's modularized, assessment—driven design to tailor intervention according to the needs, strengths, and informed wishes of individual clients. When using compatible assessment tools, practitioners can use clients' assessment profiles to:
- a. Prescribe flexible combinations of TGCTA modules:**
    - **Module 1** (Psychoeducation and Skills Building)—for all clients, in either full or abbreviated form
    - **Module 2** (Trauma Processing)—for clients with significant trauma histories & PTSD symptom profiles
    - **Module 3** (Grief & Loss Processing)—for clients with significant loss histories & grief reaction profiles
    - **Module 4** (Developmental Progression)—use with all clients to promote adaptive developmental progression, support effective coping with current life challenges, and preparation for the future
  - b. Tailor treatment exercises within each module** (e.g., select the most relevant sketches, discussion topics, other therapeutic exercises given each client's assessment profile).

# What Makes TGCTA Unique? 8 Primary Strengths

4. **Flexible Modalities.** Originally designed for a group psychotherapy setting, TGCTA has over many years been successfully adapted—and effectively implemented in—multiple modalities. These modalities include:

- Group psychotherapy
- Individual psychotherapy
- Individual counseling and support (e.g., psychoeducation and coping skills training in a school counselor's office)
- Support groups (e.g., psychoeducation and coping skills training in a group home)
- Classrooms (psychoeducation and coping skills training by a school counselor)

Each modality can be paired with **optional caregiver sessions** (parent psychoeducation, social support training, parenting skills training) to complement youth TGCTA sessions.

# What Makes TGCTA Unique? 8 Primary Strengths

5. **Multi-tiered intervention framework:** An additional strength of TGCTA derives from its modularized, assessment-driven design and flexible modality (individual vs. group vs. classroom). Practitioners can tailor TGCTA to create **multi-tiered interventions** that balance program *effectiveness* (prescribe what is needed) with *efficiency* (do not prescribe what is not needed). As examples, practitioners can implement:
- **general support interventions** (Modules 1 and 4) to moderately distressed/moderate risk youth in a support group or classroom setting. This strategy enhances **efficiency** (by including more youth) while providing a level of care (psychoeducation, skills training) that effectively matches clients' moderate level of need.
  - **specialized therapeutic interventions** (Modules 1, 2 and/or 3, 4) to highly distressed/high risk youth in a therapeutic setting (individual treatment or treatment group). This strategy matches specialized therapeutic services to a smaller group of youth with high levels of needs.



# What Makes TGCTA Unique? 8 Primary Strengths

**6. Group-based format.** Group therapy is generally as effective as—and more efficient than—individual therapy for many mental health challenges. TGCTA groups offer valuable therapeutic tools (e.g., group cohesion, member to member support) not found in individual therapy. TGCTA groups are designed to harness three key factors in synergistic ways (Layne, Pynoos, Cardenas, 2001; Saltzman, Layne, et al., 2017):

- **Adolescence:** A developmental period of maximum susceptibility to peer influences
- **Trauma and bereavement:** Two of the most common, and most powerful and life-altering, life experiences young people can undergo
- **Small group therapeutic processes:** Create a secure, accepting, cohesive group climate in which young people help one another work on their trauma- and bereavement-related experiences with mutual respect and empathic understanding.

TGCTA groups are intended to provide a safe and secure place in which members:

- reflect on, share, and work on powerful traumatic and bereavement-related life experiences
- share their current challenges, achievements, and life aspirations in a supportive setting
- take healthy risks (e.g., trusting, trying out new behaviors, undertaking developmental tasks)

# What Makes TGCTA Unique? 8 Primary Strengths

**7. Grounded in cutting-edge science.** TGCTA draws on recent clinical and scientific advances in child and adolescent traumatic stress and bereavement.

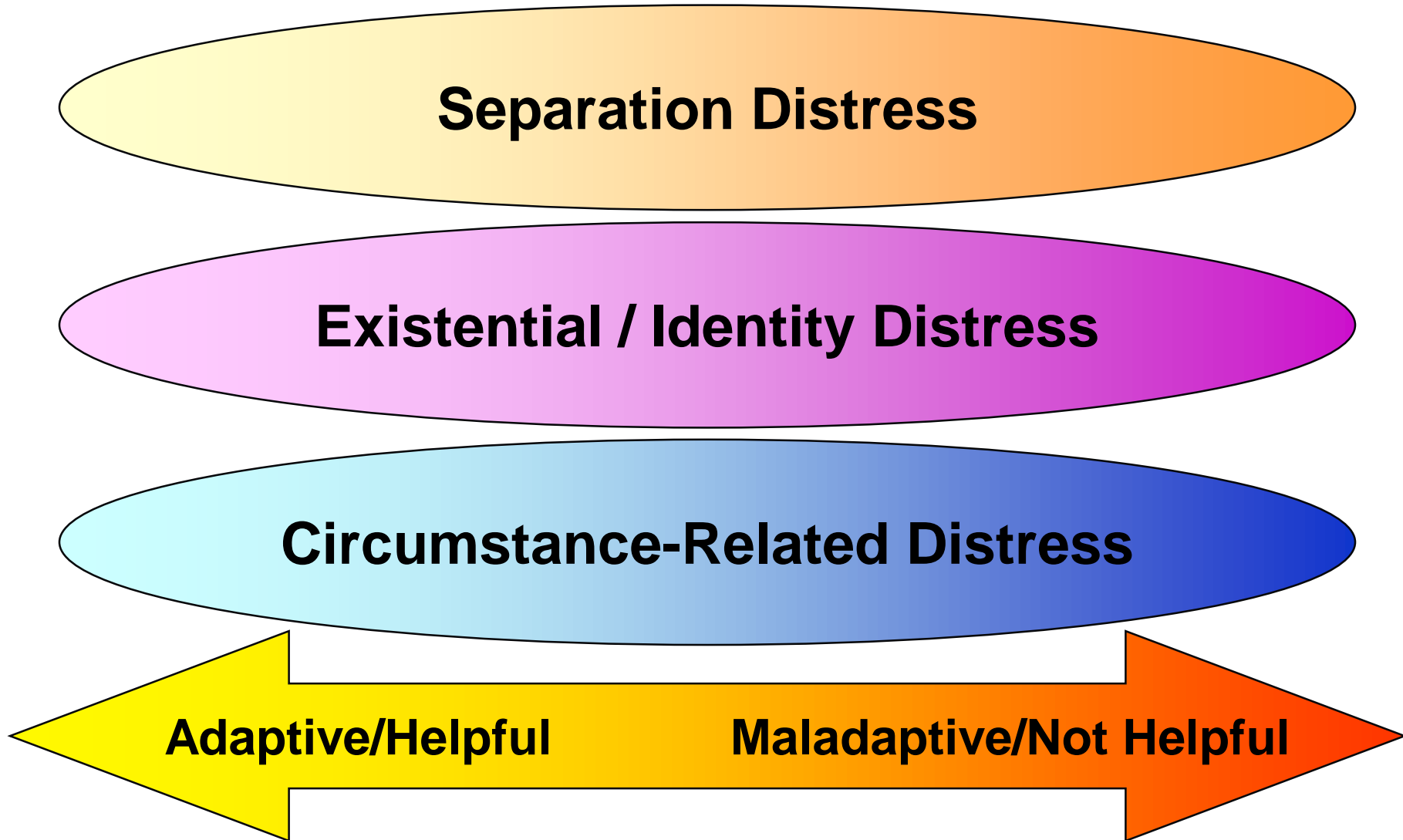
- TGCTA applies principles of **evidence-based assessment**, including risk screening, in-depth assessment, case conceptualization, intervention planning, monitoring, and assessing outcomes.
- TGCTA is optimally used with developmentally-appropriate and theoretically-compatible assessment tools. For example, the **PGD Checklist** (Layne, Kaplow, & Pynoos, 2022) can be scored both:
  - **diagnostically** (to predict PGD diagnosis). This allows practitioners to collect data regarding prevalence rates of bereavement/PGD diagnosis and clinically significant change over treatment.
  - **dimensionally** to create individual grief assessment profiles that align with the three primary conceptual domains of multidimensional grief theory: Separation Distress, Existential/Identity Distress, and Circumstance-Related Distress. Grief assessment profiles can be used to individually tailor TGCTA by focusing on elevated grief domain scores in psychoeducation and treatment.

# What Makes TGCTA Unique? 8 Primary Strengths

- 8. Based in Multidimensional Grief Theory.** TGCTA draws on multidimensional grief theory to guide in-depth assessment, case conceptualization, treatment planning/tailoring, and assessing treatment outcomes. The theory proposes that:
- Grief reactions are largely encompassed by three primary conceptual domains:
    - **Separation Distress** (missing the loved one, pining, yearning for their return)
    - **Existential/Identity Distress** (finding reasons to go on living; challenges to personal identity)
    - **Circumstance-Related Distress** (distress over how the person died—more likely to be elevated following traumatic, tragic, or other deeply disturbing deaths).
  - Both helpful (adaptive) and unhelpful (maladaptive) grief reactions can co-occur in each domain.
  - Each conceptual domain has a **central coping task**. How bereaved people cope with the coping task in each domain can powerfully influence their adjustment.

# Multidimensional Grief Model

(Layne, Kaplow, & Pynoos, 2011; Layne, Kaplow, & Pynoos, 2012; Layne et al., 2017)



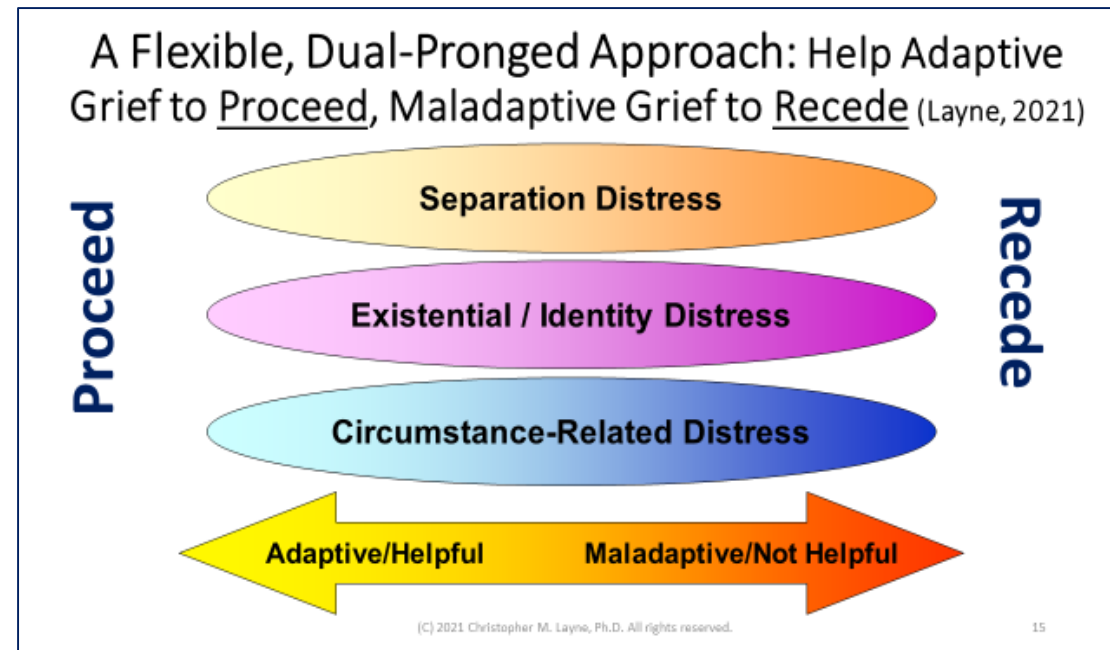
# Advantages of Multidimensional Grief Theory

- Three of TGCTA's co-authors (Robert Pynoos, Christopher Layne, Julie Kaplow) worked with the American Psychiatric Association to create developmentally-informed criteria for **Prolonged Grief Disorder (PGD)** in DSM-5-TR, released in 2022.
- Multidimensional grief theory can encompass—and TGCTA can therapeutically address—**Prolonged Grief Disorder**—a new grief diagnosis introduced in both DSM-5-TR and ICD-11 in 2022.
  - This includes clinical features of PGD (e.g., existential crises) that do not overlap with PTSD and do not constitute “traumatic grief.”

# Advantages of Multidimensional Grief Theory

Multidimensional grief theory adopts a **strength-based approach** to helping grieving youth and families. It strikes a balance between:

- Supporting adaptive grief (help adaptive grief to proceed)
- Therapeutically addressing maladaptive grief (help unhelpful grief to recede).



# Advantages of Multidimensional Grief Theory

Multidimensional grief theory creates rich opportunities to tailor treatment based on the strengths and needs of each client. The theory can integrate:

- (for moderately distressed youth): General grief support focused on helping adaptive grieving to proceed. (Focus on the left hand-side of the model.)
- (for severely distressed and at-risk youth): Therapeutic treatment focused on both helping adaptive grief reactions to proceed, and maladaptive grief reactions to recede. (Focus on both sides of the model.)



# Advantages of Multidimensional Grief Theory

- Because multidimensional grief theory focuses on both promoting helpful grieving and reducing unhelpful grieving, it can be used as a “common denominator” to integrate:
  - Grief support interventions for moderately distressed youth
  - Therapeutic treatments for severely distressed youth
- This integrative support/treatment framework promotes **continuity of bereavement-informed care**. For example, general grief support facilities can join risk screening and referral networks:
  - use a **bereavement and grief risk screening tool** in their intake procedure.
  - refer youth who screen positive to a specialized grief treatment facility for in-depth assessment and potential treatment.



# Continuity of Bereavement-Informed Care

## Grief Support Facilities

### Services:

- Risk screening
- Referrals of youth who test positive to grief treatment facilities
- **Grief support services** (aim: facilitate adaptive grief reactions & positive adjustment, peer support)
- **Outcome evaluation** (individual cases)
- **Program evaluation** (pooled outcomes)
- **Public advocacy and outreach**

Referrals

## Grief Treatment Facilities

### Services:

- Risk screening
- Referrals of youth who test negative to grief support services/facilities
- **Grief support services** (aim: facilitate adaptive grief reactions & positive adjustment, peer support in group settings)
- **In-depth clinical assessment**, diagnosis
- **Therapeutic services** (aims: reduce clinical distress, impairment, risky/destructive behavior, developmental disruption)
- **Outcome evaluation** (individual cases)
- **Program evaluation** (pooled outcomes)
- **Public advocacy and outreach**

(Purple font):  
Unique aspects  
of treatment/  
clinical services

# Evidence of TGCT's Effectiveness

**Effectiveness Study Outcomes** (Hoagwood, Layne, et al., 2010; Grasseti et al., 2015; Layne et al., 2001, 2008; Saltzman et al., 2001):

- reductions in PTSD, depression, and maladaptive grief reactions
- improved school behavior including...
  - enhanced classroom rule compliance
  - enhanced positive peer relationships
  - enhanced school performance
  - increased school interest
  - decreased school anxiety/withdrawal

# Evidence of TGCT's Effectiveness (cont.)

## **Post-War Field Study Outcomes (Cox et al., 2007):**

- Administered questionnaires and focus groups with students and group leaders at 10 secondary schools in post-war Bosnia.
- **Broad positive impacts and program benefits on multiple levels:**
  - Learning new coping skills (e.g., social support)
  - Positive changes in attitudes (more optimistic)
  - Willingness to advocate for peers
  - Improved interpersonal relationships
  - Positive impacts in school and community (more favorable views of mental health)
  - Widespread dissemination, including sharing of information and skills by participants (student group members, adult group leaders/school counselors) with hundreds of fellow students and family members.

# Evidence of TGCT's Effectiveness (cont.)

## **Juvenile Justice Effectiveness Study Outcomes** (Olafson et al., 2016):

- 69 youth participated in group-based TGCTA paired with Think Trauma, a trauma-informed staff training, in four residential juvenile justice facilities.
- **Program outcomes:**
  - Significant reductions in symptoms of posttraumatic stress, depression, anger.
  - Dose-response effect: Youth who completed TGCTA had greater reductions in posttraumatic stress symptoms than youth who partially completed TGCTA.
  - Marked reductions in incident (e.g., physical restraint) reports
    - Lowest rates of incident reports occurred when youth received full course of TGCTA paired with Think Trauma training for juvenile justice facility staff.

# For Further Information about TGCTA

- **The NCTSN website** <https://www.nctsn.org/interventions/trauma-and-grief-component-therapy-adolescents> contains both a:
  - **Fact Sheet** on TGCTA
  - **Culture-Specific Fact Sheet** on TGCTA describing different groups with which it has been used and evaluated
- **TGCTA Resources Website (TGCTA.com)** contains:
  - Links to purchase the manual
  - An annotated bibliography of TGCTA effectiveness outcome studies
  - Postings re: ongoing work in developing TGCTA and compatible assessment tools
  - Contact information to explore potential collaboration with agencies interested in large-scale trainings, program evaluation, or adaptations of TGCTA or assessment tools
  - Information about, sign up sheet, wait list for, upcoming TGCTA trainings

# TGCTA Training Slides and Trainings

- The full set of training slides for TGCTA are distributed during TGCTA trainings, where they are combined with training and follow up support by authorized TGCTA trainers (see **TGCTA.com**).
- TGCTA trainings can be augmented with training in compatible assessment tools to strengthen skills in:
  - Risk screening and referral/triage
  - In-depth assessment and clinical diagnosis
  - Case conceptualization
  - Treatment planning
  - Individualized treatment tailoring
  - Creating multi-tiered interventions (basic support for moderately distressed youth, specialized therapeutic support for severely distressed youth)

# TGCTA-Compatible Assessment Tools

Available at [WWW.ReactionIndex.com](http://WWW.ReactionIndex.com):

## 1. **UCLA Brief Screen for Child/Adolescent PTSD**

- a. Contains trauma exposure screen, plus the brief screening form of the PTSD Reaction Index for DSM-5 (11 items, well validated with good test accuracy/sensitivity and specificity).

## 2. **Prolonged Grief Disorder Checklist for Bereaved Children and Adolescents.** Use its Supplemental Scoring and Interpretation Guide to score the measure both:

- a. Diagnostically according to DSM-5-TR criteria for bereaved children and adolescents
- b. Dimensionally in ways that align with the three primary conceptual domains of multidimensional grief theory (Separation Distress, Existential/Identity Distress, Circumstance Related Distress)

## 3. **Prolonged Grief Disorder Checklist for Bereaved Adults.** The Adult version parallels the Child and Adolescent version in order to facilitate comparison/contrast analyses with the Child version. Use its Supplemental Scoring and Interpretation Guide to score the measure both:

- a. Diagnostically according to DSM-5-TR criteria for bereaved adults
- b. Dimensionally in ways that align with the three primary conceptual domains of multidimensional grief theory (Separation Distress, Existential/Identity Distress, Circumstance Related Distress)

# Contact Information for the host of TGCTA.com

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ResearchGate: [https://www.researchgate.net/profile/Christopher\\_Layne](https://www.researchgate.net/profile/Christopher_Layne)



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