Psychosocial Empowerment Interventions for Children, Families and Parents Exposed to Violence

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Violence = Dis-Empowerment

Traumatic Violence leads to an automatic (although neither inevitable nor irreversible) biological shift from:

- a brain/body that is fully able to experience what is important in life
- to being in survival mode
Psychosocial Empowerment

Regaining the sense of **personal control**
that enables the brain/body to **shift back**
from **survival mode** . . .

To **experiencing life fully**
(exploring, learning, growing, feeling, caring)
Evidence-informed Traumatic Stress Psychotherapies

Traumatized Pre-Schoolers
Lieberman’s *Child-Parent Psychotherapy*
Eyeberg and Urquiza’s *Parent-Child Interaction Therapy* (PCIT)

Victimized Children and Adolescents
Cohen, Deblinger & Mannarino’s *Trauma-Focused Cognitive Behavior Therapy* (TF-CBT) for sexual abuse and loss
Stein & Jaycox’s *Cognitive Behavioral Intervention for Trauma in the Schools* (CBITS)
Resick’s *Cognitive Processing Therapy* (CPT)
Shapiro’s *Eye Movement Desensitization/Reprocessing* (EMDR)
Foa’s *Prolonged Exposure Therapy* (PE)
Psychosocial Empowerment Models

Blaustein & Kinniburgh’s *Attachment, Regulation, Competence* (ARC)

Cloitre’s *Life Skills, Life Story*

Ford’s *Trauma Affect Regulation: Guide for Education /Therapy* (TARGET)

Harris & Fallot’s *Trauma Recovery Empowerment Model* (TREM)

Pelcovitz & DeRosa’s *Structured Psychotherapy for Adolescents Responding to Chronic Stress* (SPARCS)

Kagan’s *Real Life Heroes* (RLH)

Najavits’s *Seeking Safety*

Saxe’s *Trauma Systems Therapy* (TST)
Key Features of TARGET as a Psychosocial Empowerment Model

1. User-Friendly, Culturally and Gender Sensitive, Strengths-Based, Trauma-Focused – for Providers & Recipients:
   a. Psychoeducation
   b. Self-regulation skills
   c. Milieu (family/school/facility) program

2. Empirical Evidence Base
Evidence Base for TARGET

Randomized Clinical Trial Effectiveness Studies

1. Adults in Substance Abuse Treatment (SAMHSA funded)
2. Low-Income Mothers with PTSD (DoJ funded)
3. Girls with PTSD involved in Delinquency (DoJ funded)
4. Incarcerated Women (just completed) (DoJ funded)
5. Men with Iraq/Afghanistan Deployment-Related PTSD (in progress) (DoJ funded)

Field Trial Effectiveness Studies

1. Youths in Juvenile Detention (OJJDP funded)
2. Youths in Juvenile Justice Mental Health Facilities (State of Ohio Department of Youth Services Funded)
Co-Occuring Trauma Disorders Study

Randomized clinical trial with 213 adults in substance abuse tx (61% female; 45% minority; 85% unemployed)

TARGET was superior to Trauma Sensitive Usual Tx (TSU) sustaining sobriety self-efficacy. Both reduced ($p < .001$) anxiety, depression, PTSD cognitions.

However, White TARGET participants reported more improvement than persons of color on PTSD cognitions, and fewer men of color in TSU reported relapses than men of color in TARGET. Adaptations were developed to enhance culturally sensitive materials and delivery.

Mothers Overcoming and Managing Stress (MOMS) Study

Randomized clinical trial of one-to-one TARGET with 146 mothers with victimization-related PTSD (\(M \text{ age} = 30; 59\% \text{ minority; } 94\% \text{ low income; } 1+ \text{ child } < 5 \text{ yo}\))

Results: TARGET > problem solving therapy (\(p < .05\)): reduced PTSD sx/dx + increased affect regulation, adaptive coping, interpersonal involvement. Gains sustained at 3-/6-month follow-ups. 25% drop-out in both therapies due to childcare, transportation, work.

Mothers Overcoming and Managing Stress (MOMS) Study

Daily monitoring using standard phone script at baseline (Mdn N days = 18) and post-therapy (Mdn N days = 21)

TARGET > Problem Solving Therapy = Wait-List:

• Reduced PTSD Criterion B, C, D symptom frequency (p < .005)
• Improved affect regulation & solution-focused coping (p < .005)
• Reduced intimacy problems, helplessness, shame (p < .05)
• Improved positive self-attributions (p < .05)

Girls in Recovery from Life Stress (GIRLS) Study

Randomized clinical trial of one-to-one TARGET with 59 delinquent adolescent girls (75% ethnoracial minority; 49% CD/ODD dx; 45% in jj residential tx)

Results: Significantly reduced PTSD B & C & anxiety symptoms/cognitions vs. relationally enhanced supportive therapy; 3% dropout

**TARGET Juvenile Detention Study**

*Quasi-experimental study* 394 JJ detention consecutive admissions (75% ethnoracial minority; 91% male; 21% full/partial PTSD), 50% receive TARGET or Usual Care

Linear multiple regression w/covariates (e.g., site, age, gender, crime severity, mental health needs, trauma). Each group TARGET session received in the first week:

- > 54% fewer *dangerous incidents in 2-week stay* \( (p < .001) \)
- > 72 minutes less *seclusion in 2-week stay* \( (p < .001) \)

Recidivism decreased \( (p < .001) \) in TARGET v. Usual Care

Ford, J. D., & Hawke, J., (in review). Trauma affect regulation psycho-education group attendance is associated with reduced disciplinary incidents and sanctions in juvenile detention facilities.
Ohio DYS TARGET JJ/MH Study

Quasi-experimental study 74 JJ youth inpatient mental health secure facility consecutive admits (25% minority; 89% male). 5 units randomized: TARGET v. Usual Care

TARGET (implemented January 2008) -> 50% fewer dangerous incidents, 50% less use of seclusion, no change in use of physical disciplinary responses

Versus: Usual Care -> 300-400% increase dangerous incidents, seclusion, physical disciplinary responses

TARGET > UC (p<.01-.05) reduced depression, higher hope/self-efficacy and satisfaction with services.

Use of Seclusion

Mean Use of Seclusion

Time Period

TARGET
CONTROL

Mean Use of Seclusion

0

5/07-8/07 9/07-12/07 1/08-4/08 5/08-8/08 9/08-12/08
Use of Physical Response

Mean Frequency

Dates

TARGET
CONTROL

Dates

5/07-8/07
9/07-12/07
1/08-4/08
5/08-8/08
9/08-12/08
Threats by Youth
(TARGET vs. Control)

Total Frequency

Time Period (In Quarters)

TARGET
CONTROL
<table>
<thead>
<tr>
<th>Table 1</th>
<th>Pre-Test</th>
<th>Post-Test</th>
<th>Group x Time Interaction</th>
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<tbody>
<tr>
<td><strong>OHIO SCALES-HOPE</strong></td>
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<tr>
<td>TARGET</td>
<td>13.33 (4.80)</td>
<td>17.26 (4.96)</td>
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</tr>
<tr>
<td>TAU</td>
<td>16.00 (4.00)</td>
<td>14.70 (4.47)</td>
<td>F = 8.78**</td>
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<tr>
<td><strong>OHIO SCALES-SERVICE SATISFACTION</strong></td>
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<tr>
<td>TARGET</td>
<td>15.47 (6.82)</td>
<td>19.80 (3.87)</td>
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<tr>
<td>TAU</td>
<td>16.59 (5.04)</td>
<td>16.37 (5.84)</td>
<td>F = 3.81*</td>
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<td><strong>DEPRESSION</strong></td>
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<tr>
<td>TARGET</td>
<td>9.81 (6.37)</td>
<td>7.25 (3.90)</td>
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<tr>
<td>TAU</td>
<td>8.62 (5.35)</td>
<td>10.35 (7.59)</td>
<td>F = 3.57*</td>
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Source: Knudsen (2009)
“You cannot teach a man anything; you can only help him find it within himself.”

- Galileo (1564–1642, Italian astronomer and mathematician)