



DePelchin Children's Center Supporting Young Trauma Survivors

Use of evidence-based, culturally competent intervention yields positive results

In August 2009, the Hogg Foundation selected the DePelchin Children's Center in Houston, Texas to receive grant funding through the foundation's Ima Hogg Children's Mental Health Initiative. DePelchin used this grant to implement the Lazos Program, its culturally adapted Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) model, in a community setting for youth in the Spring Branch area of Houston. The Lazos Program built upon the existing strengths of this community by bringing together Communities in Schools' school-based case management services, Spring Branch Family Development Center's Latino-focused services and resources, and DePelchin's expertise in mental health care for youth. Through this collaboration, the Lazos Program provided counseling, education, recreation, and health and social services to 309 children in eight Spring Branch Independent School District schools between October 2009 and January 2012.

A primary objective of the Lazos Program is to support children who are survivors of trauma using TF-CBT, an evidence-based intervention that was culturally modified for the Latino population. The types of trauma most often experienced by the children served by DePelchin include domestic violence, sexual abuse and traumatic loss. This intervention helps children learn how to process and manage the thoughts and feelings associated with the traumatic experience, which in turn reduces symptoms of depression and anxiety and associated behaviors. Treatment typically consists of 12 to 16 sessions with a trained therapist. In separate reports from the National Crime Victims Research and Treatment Center (2004) and The California Evidence-Based Clearinghouse for Child Welfare (2011), TF-CBT is listed as an effective treatment, well-supported by research evidence, for children who are trauma survivors. The Lazos Program sought to validate the use of the culturally modified version of TF-CBT.

To measure changes in symptoms associated with the traumatic experience, 98 children, ages 7-17, were assessed between October 2009 and January 2012. The children completed the Post-Traumatic Stress Disorder Reaction Index (PTSD-RI) at baseline and every 90 days while in services and at exit from services. In order to understand the improvement experienced by the children, it is first important to have a sense of their baseline functioning. Because the PTSD diagnosis and its components were created from adult symptoms and experience, most of the children's symptoms were initially assessed as being in the subclinical range and therefore did not meet the criteria for a PTSD diagnosis. The children were, however, experiencing a significant level of impairment in their functioning. The findings show that the children experienced a 23% reduction in overall severity index scores from baseline to exit, a statistically significant improvement. There were observed improvements in symptoms of anxiety and depression as well as improved functioning in school and with peers and family.

Feedback from Children in the Lazos Program

From a 12-year-old girl: I like everything we do. [It] is important and I feel safe.

From an 11-year-old boy: [Counseling] helps us overcome the nightmares.

Additional assessment was conducted using the Traumatic Symptom Checklist for Children-Alternate version (TSCC-A), a self-report measure with seven subscales that assess symptoms of anxiety, depression, anger, PTSD, dissociation, overt dissociation and fantasy. Of the 100 children assessed from October 2009 to January 2012, 61 were included in the analysis. Some were excluded because they over- or under-reported symptoms. Children who

received the TF-CBT intervention showed statistically significant improvement in symptoms of anxiety, depression and PTSD, with no meaningful changes on other scores.

As the Lazos Program enters its fourth year of grant funding, it is taking the lessons learned from the first three years and continuing to modify mental health screening and treatment services to be culturally responsive. DePelchin is planning to expand the identified age group and population for the Lazos Program in order to meet the needs of more children in the community, regardless of cultural or ethnic background. It plans to continue its partnerships with Communities in Schools and the Spring Branch Family Development Center. The Lazos team will also continue to evaluate the efficacy of its programs by utilizing validated instruments to assess the mental health and functioning of children participating in its programs.

DePelchin Children's Center is committed to meeting the needs of children as one of the largest providers of mental health, foster care and adoption services in Texas. Through its clinical expertise and special brand of caring, DePelchin turns lives around, providing a full continuum of care including psychiatric services, counseling, residential treatment, programs for at-risk youth, parent education, foster care and adoption. Through the department of Program Development, Evaluation, and Quality Improvement (PDEQI), DePelchin participates in research activities at the local, state and national level aimed at improving the lives of children and their families. DePelchin is a not-for-profit organization and receives support from individuals, foundations and corporations, government grants and fees, and United Way agencies.



Program Services

Judy Gentry, LCSW, LMFT
Program Manager – Counseling Services
Phone: 713-802-6209
Email: jgentry@depelchin.org

Research and Evaluation

Luis Vélez, MD, PhD, MPH
Director – Program Development, Evaluation, and
Quality Improvement
Phone: 713-802-6203
Email: lvelez@depelchin.org

Saunders, B.E., Berliner, L., & Hanson, R.F. (Eds.). (2004). Child Physical and Sexual Abuse: Guidelines for Treatment (Revised Report: April 26, 2004). Charleston, SC: National Crime Victims Research and Treatment Center.

The California Evidence-Based Clearinghouse for Child Welfare. (2011). Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT). Retrieved from: <http://www.cebc4cw.org/program/trauma-focused-cognitive-behavioral-therapy/detailed>.