

## WHAT ELSE CAN FBR OFFER TO MY FAMILY?

We take pride in our communities and meet the individual needs of each community we serve through outreach efforts. In addition to Outpatient Mental Health Services, we offer:

- BHRS (“Wraparound”)
- Specialized Autism Services
- Medication Management
- Family Based Services
- Child Abuse Prevention Committee
- Summer Therapeutic Activities Programs
- Family Support Groups
- Sibling Support Groups
- Social Skill / Play Groups
- H.O.P.E. for Tomorrow Focus Groups
- Consultants / Trainings for School Districts
- Parent-Professional Workshops
- Resource Packages for Families

Our Family Support Coordinator, Catherine Hughes, is a parent to a child with special needs. She is available for identifying community resources, information, as well as provides caring support for families.

All services at FBR are under the oversight of our **Chief Operating Officer**, Rick J. Murray. Mr. Murray is a Licensed Social Worker with a specialization in Mental Health, and is a Board Certified Behavior Analyst. He has worked and supervised staff within BHRS, outpatient, and partial hospitalization settings for over 13 years.

Come learn more  
about us on the web:

[www.familybehavioralresources.com](http://www.familybehavioralresources.com)



## WHERE CAN I RECEIVE TRAUMA SERVICES FOR MY FAMILY?

Family Behavioral Resources provides services to multiple counties across Pennsylvania, including Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Crawford, Fayette, Greene, Indiana, Lancaster, Mercer, Somerset, Venango, Washington, and Westmoreland. Trauma Services is based out of Westmoreland County, and will expand to other counties as the program develops.

Questions and referrals regarding Trauma Services at FBR can be directed to:

Jennifer H. Austad, LCSW  
Director of Trauma Services  
131 Mathews Street, Suite 2000  
(Send Mail To: P.O. Box 879)  
Greensburg, PA 15601  
724-850-7300 (Office)

1-800-838-4907 (Toll-Free)  
724-850-7778 (Fax)

[traumaservices@familybehavioralresources.com](mailto:traumaservices@familybehavioralresources.com)

*At FBR, it is our policy that services are provided and admissions and referrals are made without regard to race, sex, color, national origin, ancestry, religion, creed, disability or age.*



A CARF Three-Year Accreditation has been awarded to Family Behavioral Resources for its *Intensive Family-Based Services - Mental Health* (Children and Adolescents), *Outpatient Treatment - Mental Health* (Adults), and *Outpatient Treatment - Mental Health* (Children and Adolescents). \*BHRS program is accredited under Outpatient Treatment. Ask us about CARF today!



**Family Behavioral Resources**

*Here, caring is everything*

## TRAUMA SERVICES



Family Focused Therapy

**“It shouldn’t hurt  
to be a child.”**

In the United States alone, approximately **five million children** experience some form of traumatic event each year. More than two million of these children are victims of physical and/or sexual abuse. Millions more live in the terrorizing atmosphere of domestic violence.

*If we do not take the time to understand the ‘language’ of the child’s behavior, we risk perpetuating the abuse.*

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## MISSION STATEMENT

It is the mission of Family Behavioral Resources to be a leader in delivering the highest quality of recovery-oriented mental health services. Services are designed in accordance with FBR's philosophy of care, and delivered through a variety of theoretical approaches and interventions based on evidence-based practice. We are committed to supporting children, families and their surrounding community with quality care which upholds the utmost integrity. *Here, caring is everything.*

## OUR PHILOSOPHY

FBR does not embrace one specific method or theory to treat our consumers. We respect children's unique perspectives, culture, learning styles and behavioral needs as well as the family's identification and prioritization of current need areas.

## PROGRAM LOCATION

Our Trauma Services initiative will initially focus on the development of specialized programming within Westmoreland County. The Trauma Services Team will be developed out of Greensburg Clinic with plans for expansion.



## WHAT IS TRAUMA?

An experience is traumatic when a particular event, or series of events, comes to define the way people organize their subsequent perceptions. Traumatic events are accompanied by feelings of helplessness, hopelessness, intense fear, and loss of control. Trauma affects people of all ages, races, cultures and income.

## IMPACT OF TRAUMA

The impact of trauma may be gauged by observing the reactions of those involved. The impact varies from person to person and is based on a variety of variables including personal impact of the trauma, magnitude of the event, individual experiences, natural support system and nature of the exposure to the trauma. The impact may be emotional, cognitive, physical, spiritual and/or behavioral

and may be experiences as fear, irritability, difficulty solving problems, headaches, nausea, hyperarousal, memory problems, and many other psychological or physiological symptoms.

Trauma experienced in childhood can have a long-lasting effect on children and may even affect their lives and relationships as adults. Trauma may lead to difficulty forming attachments, depression or "emotional numbness," hyper-vigilance and substance abuse.

## WHAT IS ATTACHMENT?

Attachment is the deep connection between two people, initially established between a child and caregiver during the first several years of life. Attachment to a protective and loving caregiver who provides guidance and support is a basic human need, rooted in millions of years of evolution. It influences every component of the human condition - mind, body, emotions, relationships and values. Attachment is not something that parents do to their children; rather, it is something that children and parents create together. Attachment is the base upon which emotional health, social relationships, and one's world views are built.

## RISK FACTORS FOR ATTACHMENT DIFFICULTIES

Early deprivation, neglect, abuse, violence within the home, chronically high levels of stress, significant early health problems and hospitalization, repeated moves, or living in an orphanage can create attachment difficulties. Children with Attachment Disorder are unable to make use of traditional therapy methods because:

- They do not trust
- They are not emotionally honest, and in fact are frequently not able to identify their feelings or what is behind those feelings
- They do not respect anyone, including themselves
- They are not capable of reciprocal give and take relationships
- Their backgrounds of abuse, neglect, unresolved trauma or pain, loss and abandonment frequently occurred during the first year or two of life prior to conscious memory of events
- They do not know why they feel and act as they do
- *They are operating in the only way they know how to survive*

## TRAUMA SERVICES AT FBR

FBR acknowledges that it is essential to incorporate an understanding of the enormous impact of trauma on individuals, families and communities. Our commitment to innovative, quality clinical care is evidenced by the trauma-informed services and relationship based treatment FBR offers. Our clinical staff utilize an integrative approach to treatment which may include: Trauma-Focused Cognitive Behavioral Therapy, Dialectal Behavioral Therapy (DBT), Dyadic Developmental Psychotherapy, Corrective Attachment Therapy, Expressive Art-Therapy, Play Therapy, Eye Movement Desensitization and Reprocessing (EMDR) and other trauma and attachment related models. Treatment approaches are informed by principles of human development and neurodevelopment; respecting current research in the field.

FBR's clinical team is also proud to participate with *Give an Hour*, a nonprofit organization providing free mental health services to U.S. Military personnel and families affected by the current conflicts in Iraq and Afghanistan. Services offered by this program have also been extended to individuals impacted by the tragic events in Haiti.

Trauma program development will be led by Director of Trauma Services, Jennifer H. Austad, LCSW, with oversight by Chief Operating Officer, Rick J. Murray, LSW, BCBA. Jennifer received her Bachelor of Science in Social Work from Slippery Rock University and a Master of Social Work from the University of Pittsburgh. In addition to her undergraduate and graduate degrees, she is dedicated to continuing education and has obtained over 600 hours of training with a primary focus on trauma and attachment issues.

## RESILIENCE

We believe in the capacity to recover from adversity.



Family Behavioral Resources.  
*Here, caring is everything.*