

Introduction to Trauma-Focused Cognitive-Behavioral Therapy



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Acknowledgements

- ❖ Judy Cohen, MD & Tony Mannarino ,PhD
 - ❖ Allegheny General Hospital, Pittsburgh PA
- ❖ Esther Deblinger, PhD
 - ❖ NJ CARES Institute Stratford NJ
- ❖ Roy Van Tassell, MS, LPC
 - ❖ Family and Children's Services, Tulsa, OK
- ❖ And so many others...

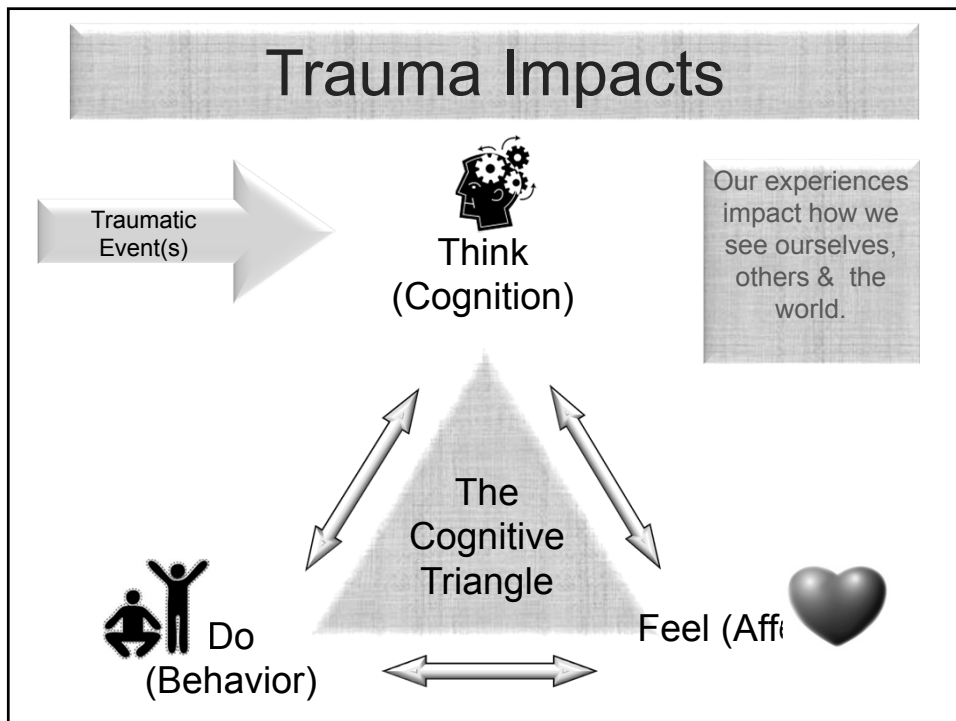


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Trauma and Children

- Trauma Exposure  PTSD
- Significant Factors Impacting Long-Term Response:
 - Exposure Frequency & Severity
 - Number of Direct Losses
 - Time Since Trauma
 - Parent Distress and Overall Functioning
 - Social Supports

Trauma Impacts



Behavioral Impacts

- Avoidance
- Hyperarousal
- Hypervigilance
- Sleep Difficulties
- Poor Coping

Emotional Impacts

- Fear
- Sadness
- Anger
- Anxiety
- Shame
- Emotional Dysregulation
- Numbing/Emotional Disconnect

Cognitive Impacts

- Inaccurate Beliefs
 - e.g., self-blame
- Distrust
- Distorted Self-Image
- Negative view of world and future
- Accurate, but unhelpful, beliefs

Relational Impacts

- Isolation
- Trouble developing/maintaining healthy interpersonal relationships
- Violence/Aggression
- Sexualized Behaviors

Spiritual Impacts

- Crisis of faith
- Loss of hope for future
- Inability to experience joy

Treating Child Trauma



MISSION: Building resilience and facilitating recovery.

<http://www.samhsa.gov/>



<http://www.nrepp.samhsa.gov/>

NCTSN

The National Child Traumatic Stress Network

Mission:

To raise the standard of care and improve access to services for traumatized children, their families and communities throughout the United States.

www.nctsn.org



The California Evidence-Based Clearinghouse

for Child Welfare

<http://www.cebc4cw.org/>

13

Trauma-Focused Cognitive- Behavioral Therapy

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TF-CBT Resources

TF-CBT *Web*

A web-based learning course for
TRAUMA-FOCUSED
COGNITIVE-BEHAVIORAL THERAPY

www.musc.edu/tfcbt

CTG *Web*

A web-based learning course for
Using TF-CBT with Child Traumatic Grief

<http://ctg.musc.edu/>

TF-CBT *Consult*

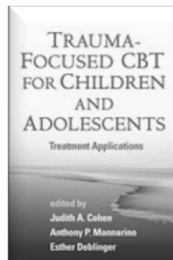
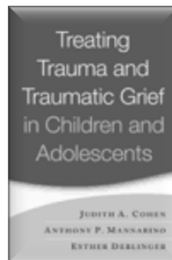
A consultation tool for
Trauma-Focused Cognitive-Behavioral Therapy

<http://etl2.library.musc.edu/tf-cbt-consult/index.php>

CPT *Web*

A web-based learning course for
Using Cognitive Processing Therapy

<https://cpt.musc.edu/index>



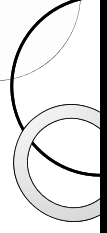
Trauma-Focused Cognitive Behavioral Therapy

TF-CBT Populations:

- ◆ Multiply traumatized children
- ◆ Diverse cultures
- ◆ Foster care
- ◆ Residential treatment
- ◆ Children in disasters
 - ◆ September 11 terrorist attacks
 - ◆ Hurricane Katrina

TF-CBT Adaptations:

- ◆ Diverse clinical settings
- ◆ Latino Families
- ◆ American Indian/Alaska Native families
- ◆ Worldwide
 - ◆ Australia, Cambodia, Canada, China, Denmark, Germany, Japan, the Netherlands, Norway, Pakistan, Sweden, Zambia



- **Target symptoms:**
 - PTSD, depression, anxiety, and behavioral symptoms secondary to trauma.
- **TF-CBT treats:**
 - Children ages 3-18
 - All types of traumas
 - With or without parental participation
 - In schools, group home, foster home and in-home settings.
- **Most commonly provided to child and parent in clinical settings.**

17

TF-CBT Treatment Elements

- ✓ Teaching children emotional expression, relaxation and stress management skills
- ✓ Creating a coherent narrative or story of what happened
- ✓ Correcting untrue or distorted ideas about what happened and why
- ✓ Changing unhealthy and wrong views that have resulted from the trauma
- ✓ Involving parents in creating optimal recovery environments

Over 80% of children in TF-CBT show significant PTSD symptom improvement within 12 to 16 weekly 60- to 90- minute sessions.

Significant TF-CBT Child Outcomes

Reductions in:

- 1: Child behavior problems
- 2: Child symptoms of PTSD
- 3: Child depression
- 4: Child feelings of shame

Randomized clinical trials compared TF-CBT to:

- Supportive therapy
- Non-directive play therapy
- Child-centered therapy

TF-CBT resulted in greater gains in fewer clinical sessions.

Follow-up studies (up to 2 years post therapy) have shown sustained treatment gains.

Common Parent Symptom Improvements

- Reduced depression
- Reduced emotional distress
- Reduced PTSD symptoms
- Enhanced ability to support their children

TF-CBT = *Hybrid Model*

TF-CBT integrates:

- Trauma sensitive interventions
- Cognitive-behavioral principles
- Attachment theory
- Developmental neurobiology
- Family therapy
- Empowerment therapy
- Humanistic therapy

TF-CBT Treatment Structure

- Average 18 – 24 sessions
- 1 to 1 ½ hour weekly sessions
- Each session is divided into individual child and parent sessions
 - The length of the child and parent portions may vary by topic
- Similar topics in most parent and child sessions.
 - Ideally, parent topics are slightly ahead of child topics.
- Same therapist for both child and parent(s)
- Combined parent-child time in some to many sessions

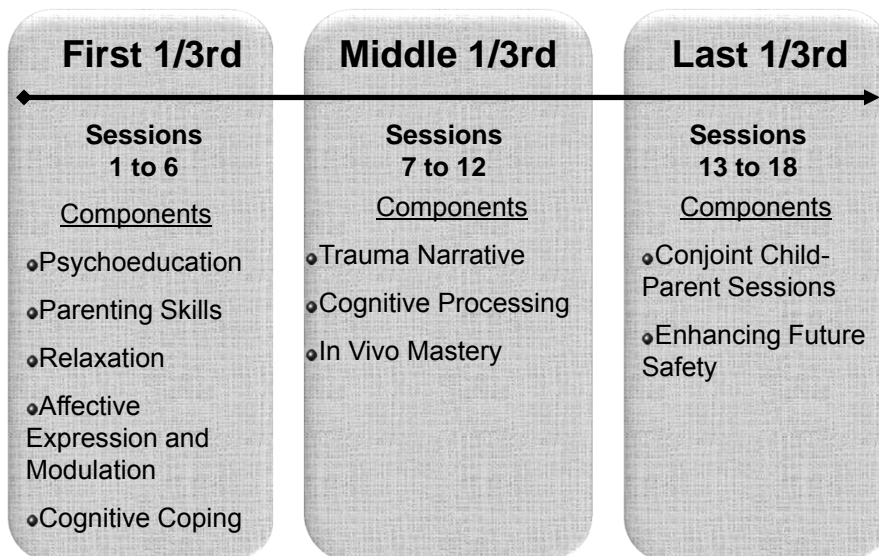


Why include parents?

- Treating parents reduces child behavioral and depressive symptoms Deblinger et al. (1996)
- Parents' emotional reaction to trauma is strongest predictor of treatment outcome (other than treatment type) Cohen and Mannarino (1996)
- Parental support is significantly related to decreased child symptoms Cohen and Mannarino (1997)

23

TF-CBT Model Structure



Simple, yet Complex

- Components are like tools in a toolbox.
- They build as the model progresses.
- Understand why you're using each component.
- Time spent on each is flexible.
- Techniques and activities may vary, but the model framework stays the same.
- The strength (and fidelity) of the model rests in the PRACTICE framework.

TF-CBT MYTHS

- Cookbook approach to treatment
- Underemphasizes relationships:
 - Therapist – Client
 - Parent - Child
- Can't be used with:
 - Young children
 - Developmentally delayed youth
 - Multiply traumatized youth
 - Youth in out-of-home care
 - Children still facing unsafe environments.
 - “The families we see at our agency...”
- Too likely to re-traumatize children
- Others?

When to Begin Trauma Treatment?

- Safety first.
- Know what your setting can provide.
- Triage for priority focus:
 - ❖ Basic needs (e.g., place to live)
 - ❖ Response to system activities (e.g., placement, legal processes)
 - ❖ *Sexual behavior problems*
 - ❖ *Psychiatric emergencies/active substance abuse*
- ❖ *For youth in crisis, determine if PRAC skills can support stabilization.*

PRACTICE

Psychoeducation and Parenting Skills

Relaxation

Affective Modulation

Cognitive Coping

Trauma Narrative/Cognitive Processing

In Vivo Desensitization

Conjoint Parent-Child Sessions

Enhancing Future Safety and Development

28

Psychoeducation - Goals

1. Provide information about the child's symptoms and diagnosis
2. Provide information about common emotional and behavioral responses to trauma
3. Emphasize benefits of early, effective treatment
4. Educate about TF-CBT model and structure
5. Provide information about specific trauma type
6. Provide hope for recovery

29

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30

Parenting Goals

- Empower parents in their role as child's strongest source of healing
 - Person the child turns to for help in times of trouble
- Enhance caregiver commitment to the family's participation in treatment
 - Parent is expert on child, "we will work as a team"
- Enhance parenting skills to stabilize family while during trauma treatment
- Help the parent re-establish sense of control

31

Parent Component

- Parents receive parallel interventions for all of the PRACTICE components
- Parenting skills to enhance child-parent interactions including:
 - Optimal use of praise
 - Selective attention/redirection
 - Time-out procedure
 - Contingency reinforcement schedules

Several sites are implementing TF-CBT with children in foster and residential care or in other situations without consistent caregiver involvement.

Parenting in TF-CBT

Parent Training Programs: Insight for Practitioners. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention: http://www.cdc.gov/violenceprevention/pdf/Parent_Training_Brief-a.pdf

The CDC conducted a meta-analysis of 77 research studies on training programs for parents with children ages 0 to 7.

Parenting skills that lead to better parent outcomes:

- ◆ Teaching parents emotional communication skills
- ◆ Teaching parents positive parent-child interaction skills
- ◆ Requiring parents to practice with their child during sessions

Parenting skills that lead to fewer child externalizing behaviors:

- ◆ Teaching parents the correct use of time out
- ◆ Teaching parents to respond consistently to their child
- ◆ Teaching parents to interact positively with their child
- ◆ Requiring parents to practice with their child during sessions

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34

Goals for Relaxation

- ✓ Teach about the body's responses to stress
- ✓ Teach skills to reduce physiological arousal and alarms for danger

Common Relaxation Techniques

- Diaphragmatic Breathing
- Progressive Muscle Relaxation
- Visualization
- Grounding
- Naturally Relaxing Activities

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37

Why Affect Modulation?

- Children often lack:
 - Skills to identify feelings
 - A comprehensive feelings vocabulary
- Children may rely heavily on avoidance to cope.
- Affect regulation skills ↓ need to avoid and paves the way for healthy coping.
- A *familiar* way for therapists to join with children in treatment and set the stage for gradual exposure process

Affect Regulation Skills Training

- Accepting feelings
- Labeling and scaling feelings
- Identifying feelings in self and others
- Expressing feelings
- Coping with challenging feelings associated with trauma

39

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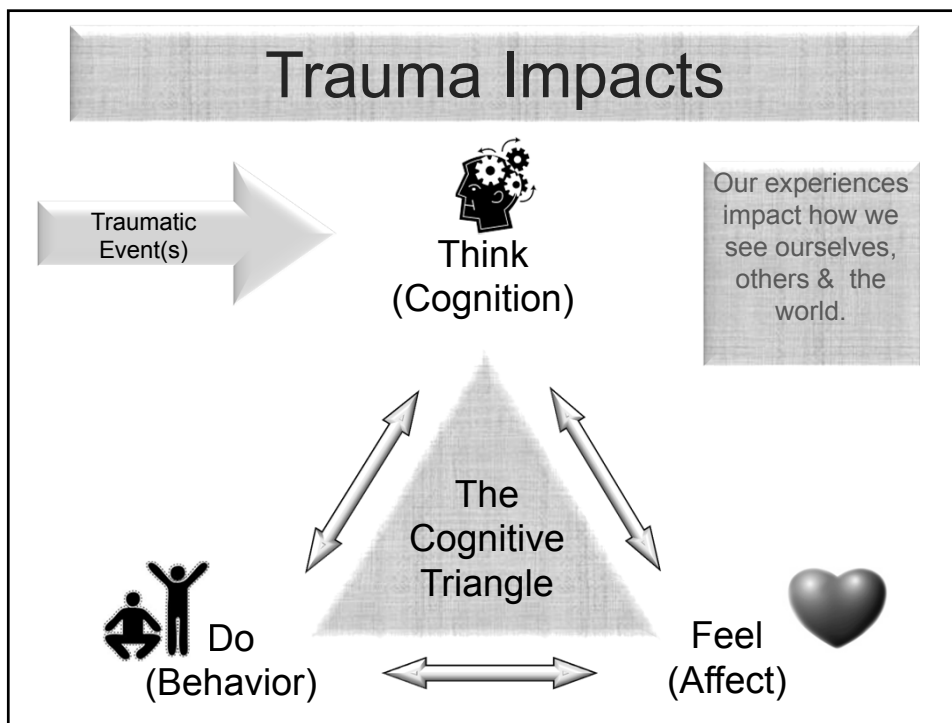
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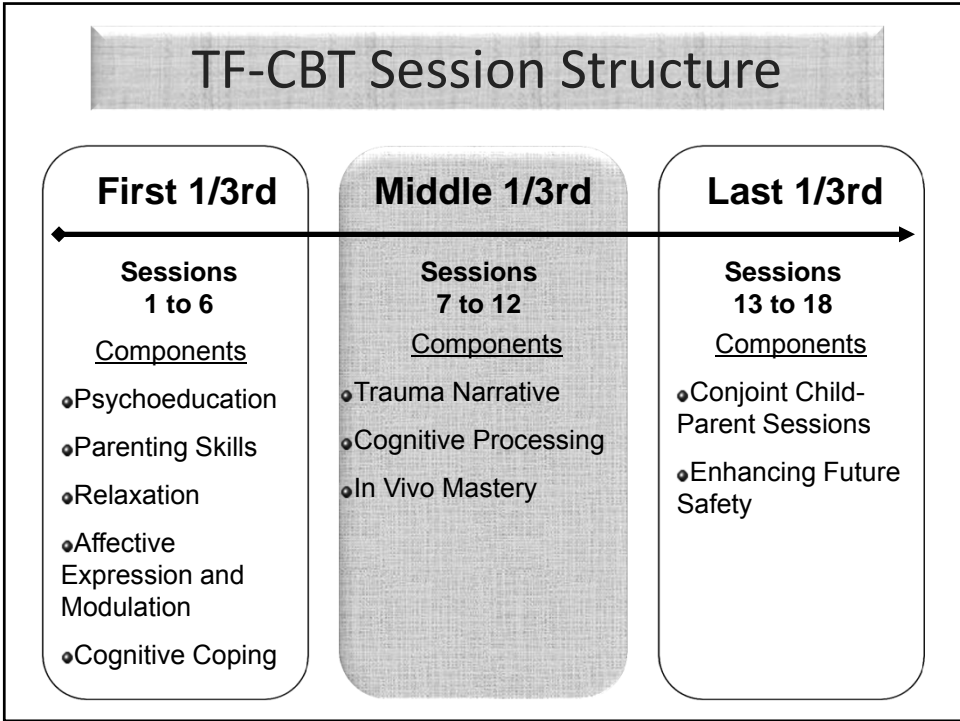
40

Cognitive Restructuring Skills

- Help children *distinguish between* thoughts, feelings, and behaviors.
- Help children and parents understand the cognitive triad: *connections between* thoughts, feelings and behaviors.
- Help children and parents develop the cognitive flexibility to view events in more **accurate** and **helpful** ways.
- Encourage use of cognitive coping skills in their daily lives for affective modulation.

Trauma Impacts





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44

Trauma Narrative Goals

- Gain mastery over trauma reminders
- Resolve avoidance symptoms
- Correction of distorted cognitions
- Model adaptive coping
- Identify and prepare for trauma/loss reminders
- Contextualize traumatic experiences into life

45

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46

Cognitive Processing Goals

- Develop understanding of the trauma within the context of the child's life
- Explore inaccurate and/or unhelpful cognitions about the trauma and the feelings that accompany them

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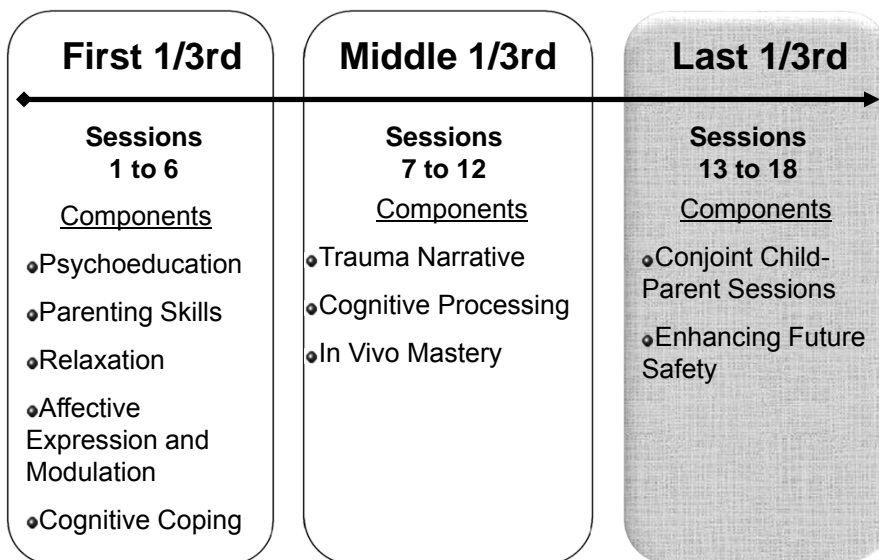
48

In Vivo Mastery of Trauma Reminders

- Gradual exposure to innocuous reminders which have been paired with the traumatic experience.
- To be used only if the feared reminder is innocuous.

49

TF-CBT Session Structure



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51

Conjoint Parent-Child Sessions

- Joint sessions with the child and parent/caregiver
- Activities may include:
 - Coping skills development and practice
 - Sharing the child's trauma narrative
 - Safety skills development
 - Developing child & family safety plans
 - Discussing healthy sexuality (for children impacted by sexual abuse)
- Enhancing child/caregiver communication

52

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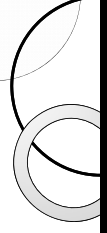
**Enhancing Future Safety and
Development**

53

Enhancing Safety and Future Development

- Individualize additional components as needed for each child
- Safety plans continued for individual situations
- Social skills, problem solving, drug refusal, sexual safety, relationships, etc.

54



Additional Grief-Focused Components for Childhood Traumatic Grief (CTG)

- Grief psychoeducation
- Grieving the loss (“What I miss”) and resolving ambivalent feelings about the deceased (“What I don’t miss”)
- Preserving positive memories of the deceased
- Redefining the relationship with the deceased and committing to present relationships
- Treatment closure issues

55



TF-CBT Training & Certification

56

Voluntary National TF-CBT Therapist Certification Program

Anticipated requirements for the upcoming National TF-CBT Certification Program

- Completion of TF-CBT Web
- Participation in a 2-day Introductory TF-CBT training with a national TF-CBT trainer
- Completion of ongoing clinical consultation on 1 or more TF-CBT cases with a national TF-CBT trainer. This includes a minimum of 12 consultation sessions over the course of 6 – 12 months.
- Incorporation of standardized trauma measures into TF-CBT cases
- Completion of 3 or more TF-CBT cases. Only one case needs to be completed under consultation.
- Passing an on-line TF-CBT test
- Certification fee
- Professional licensure status (e.g., LPC, LCSW, Licensed Psychologist, etc.)

57

University of Oklahoma Health Sciences Center Center on Child Abuse and Neglect Child Trauma Services Program





Contact Information

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Training information and registration can be found on our website:



www.oklahomatfcbt.org

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