Objectives

- Learn about different types of therapy and treatment

- Review 3 treatment modalities
  - Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)
  - Parent-Child Interaction Therapy (PCIT)
  - Eye Movement and Desensitization Reprocessing (EMDR)

- Explore how to identify the right licensed therapist to meet the needs of the children they serve
Who, What, When, Where, Why, How to approach therapy for children

Why?

Trauma profoundly affects the way children think, feel, and act

- Effects of trauma:
  - Relationships- attachment style
  - Cortisol levels
  - Behavior challenges
  - Sensory issues
  - Learning Difficulties
  - Digestive problems
  - Immune system
- Although, not all traumatic events lead to wellness disaster
Who?

* Licensed Professional Counselor (LPC)
* Licensed Clinical Social Workers (LCSW)
* Licensed Marriage and Family Associates (LMFT)
* Registered Play Therapist (RPT) [www.a4pt.org](http://www.a4pt.org)
  * Supervised Play Therapy Experience & Supervision - 500 direct client contact hours under supervision and 50 hours of simultaneous play therapy supervision
  * Play Therapy Training - 150 hours of play therapy specific instruction from institutions of higher education or APT Approved Providers

How?
Where?

Modalities

- Play Therapy
- Equine Therapy
- Therapeutic Yoga
- Art Therapy
- Sandtray
- Music Therapy
- Nature/Adventure Therapy
- Activity Therapy
- Medication Management

Adjunct Treatment

When?

Basic Theories

- Cognitive Freud's Psychosexual Developmental Theory Therapy
- Erikson's Psychosocial Developmental Theory
- Behavioral Child Development Theories (Skinner, Watson)
- Psychoanalytic
- Piaget's Cognitive Developmental Theory
- Bowlby's Attachment Theory
- Bandura's Social Learning Theory
- Vygotsky's Sociocultural Theory

https://www.verywellmind.com/child-development-theories-2795068
Common Models of Children’s Therapy

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Big Picture

MODALITIES
offer context that intervenes with developmental need from THEORIES administered through MODELS
Healing from Trauma

All approaches agree:
• Relationships are key
• We make meaning of our experiences and our behaviors reflect our processing
• Caregivers play a pivotal role

Program Efficacy
Therapeutic Approach Credentials

Clearing House Program Information

• California Evidence-Based Clearing House for Child Welfare
  • http://www.cebc4cw.org/search/by-program-name/

Scientific Rating Scale

1- Well-Supported by Research Evidence
2- Supported by Research Evidence
3- Promising Research Evidence
4- Evidence Fails to Demonstrate Effect
5- Concerning Practice
NR- Not able to be Rated on the CEBC Scientific Rating Scale
Comparison Charts

**Comparison Chart Categories**

**Program Information:**
- Topic Areas
- Child Welfare Outcomes
- Brief Description
- Program Goals
- Target Population
- Age Range

**Service Details:**
- Child/Adolescent Services
- Parent/Caregiver Services
- Intensity
- Duration
- Delivery Settings

**Training Details:**
- Resources Needed
- Minimum Provider Qualifications
- Training Available
Case Study

Rocky Rhodes, 10
- Witnessed domestic violence
- Possible sexual abuse
- In foster home
  - Separated from mother and sister
  - Dad incarcerated
- Reported sadness
- Holiday coming
- Visitation questions
- Cultural separation
What therapeutic intervention does Rocky need?

Children from hard places need trauma-informed care.
Exploring TF-CBT, EMDR, and PCIT

Trauma-Focused Cognitive Behavioral Therapy

TF-CBT
THERAPIST CERTIFICATION PROGRAM
Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

- TF-CBT is a conjoint child and parent psychotherapy model for children who are experiencing significant emotional and behavioral difficulties related to traumatic life events. It is a components-based hybrid treatment model that incorporates trauma-sensitive interventions with cognitive behavioral, family, and humanistic principles.
- For Ages 3-18

https://www.youtube.com/watch?v=JD1ub3xx9qw&list=PL-TzHiKZ7xRo3hmdquCUn5LN69_xHe8mB&index=43&t=0s
## TF-CBT Program Goals

- The overall goal of TF-CBT is to address symptoms resulting from a specific traumatic experience or experiences.
- Improving child PTSD, depressive and anxiety symptoms
- Improving child externalizing behavior problems (including sexual behavior problems if related to trauma)
- Improving parenting skills and parental support of the child, and reducing parental distress
- Enhancing parent-child communication, attachment, and ability to maintain safety
- Improving child's adaptive functioning
- Reducing shame and embarrassment related to the traumatic experiences

## TF-CBT Treatment Components

**Time:** 16-25 sessions

1. **Stabilization Phase**
   - Enhancing Safety
   - Psychoeducation
   - Relaxation
   - Affect Modulation
   - Cognitive Coping
   - 1/2

2. **Trauma Narrative Phase**
   - Trauma Narrative and Processing
   - In vivo Conjoint Sessions
   - Enhancing Safety
   - 1/4

3. **Integration/Consolidation Phase**
   - 1/4
TF-CBT Session Example

https://www.youtube.com/watch?v=VNHPxkT0wIg&list=WL&t=122s&index=108

TF-CBT Best Practice

CONFIRM THE THERAPIST IS A TRAINED PRACTITIONER (CERTIFICATION PREFERRED)

INCORPORATES CAREGIVER ENGAGEMENT

GRADUAL EXPOSURE
Eye Movement Desensitization Reprocessing (EMDR)

- EMDR therapy is an 8-phase psychotherapy treatment that was originally designed to alleviate the symptoms of trauma. During the EMDR trauma processing, the client attends to emotionally disturbing material in brief sequential doses that include the client’s beliefs, emotions, and body sensations associated with the traumatic event while simultaneously focusing on an external bilateral stimulus. Therapist directed external stimuli includes eye movements, hand-tapping and audio input.
  
- For Ages 2+
EMDR with Children

Need Specialized Training
Typically from these well-regarded sources:

- Ana Gomez
- Attachment & Trauma Center of Nebraska
  - Debra Wesselmann, Cathy Schweitzer, Stefanie Armstrong
- Robbie Adler-Tapia
- Joan Lovett

EMDR Program Goals

- Target the past events that trigger disturbance
- Target the current situations that trigger disturbance
- Determine the skills and education needed for future functioning
- Reduce subjective distress
- Strengthen positive beliefs
- Eliminate negative physical responses
- Promote learning and integration so that the trauma memory is changed to a source of resilience
8 Phases of EMDR
Phase 1: History and Treatment Planning
Phase 2: Preparation/Resourcing
Phase 3: Assessment
Phase 4: Desensitization
Phase 5: Installation
Phase 6: Body scan
Phase 7: Closure
Phase 8: Reevaluation

Dual attention
Integration
Adaptive Information Processing
Past, present, and future work

EMDR Process

Struggles:

NC: Past

Time/Age

Present/Recent

Future
EMDR Session Example

https://www.youtube.com/watch?v=VsXWBDr5RCA&list=WL&t=22s&index=106

EMDR Best Practice

1. Confirm the therapist is a trained practitioner (certification preferred) with specific training for child intervention
2. Incorporates caregiver engagement (when appropriate)
3. Child-paced with bilateral options
PCIT

WHAT IS PCIT?

https://www.youtube.com/watch?v=1X2b-mmj2tk&t=20s&list=PL-TzHiKZ7xRo3hmdquCUn5L69_xHe8mB&index=44

Parent Child Interaction Therapy (PCIT)

- Parent-Child Interaction Therapy (PCIT) is a dyadic behavioral intervention for children and their parents or caregivers that focuses on decreasing externalizing child behavior problems (e.g., defiance, aggression), increasing child social skills and cooperation, and improving the parent-child attachment relationship. It teaches parents traditional play-therapy skills to use as social reinforcers of positive child behavior and traditional behavior management skills to decrease negative child behavior. Parents are taught and practice these skills with their child in a playroom while coached by a therapist. The coaching provides parents with immediate feedback on their use of the new parenting skills, which enables them to apply the skills correctly and master them rapidly.

- PCIT is time-unlimited; families remain in treatment until parents have demonstrated mastery of the treatment skills and rate their child’s behavior as within normal limits on a standardized measure of child behavior. Therefore treatment length varies but averages about 14 weeks, with hour-long weekly sessions.

- For Ages 2-7
PCIT Program Goals

The goals of the Child-Directed Interaction part of Parent-Child Interaction Therapy (PCIT) are:

- Help children feel safe and calm by fostering warmth and security between parents and their children
- Increase children’s organizational and play skills
- Decrease children’s frustration and anger
- Educate parent about ways to teach child without frustration for parent and child
- Enhance children’s self-esteem
- Improve children’s social skills such as sharing and cooperation
- Teach parents how to communicate with young children who have limited attention spans

The goals of Parent-Directed Interaction part of Parent-Child Interaction Therapy (PCIT) are:

- Teach parent specific discipline techniques that help children to listen to instructions and follow directions
- Decrease problematic child behaviors by teaching parents to be consistent and predictable
- Help parents develop confidence in managing their children’s behaviors at home and in public

PRIDE

Praise appropriate behavior
Reflect appropriate talk
Imitate appropriate play
Describe appropriate behavior
Enthusiasm

- “Active” Ignore inappropriate behavior
- Avoid giving commands
- Avoid asking questions
- Avoid criticizing
- Avoid NO, DON’T STOP, QUIT, & NOT
- Praise positive opposite behaviors for challenges
- Use Selective Attention
- Practice 5 min daily

Child-Directed Interaction (CDI)

- 10 Behavior Descriptions
- 10 Reflections
- 10 Labeled Praises
- Fewer than 3: Questions, Commands, Negative Talk

Parent-Directed Interaction (PDI)

- 4 Commands
- 75% Commands- child to comply in 5 sec
- 75% Correct follow through
  - Labeled Praise after comply or warning after non-comply
- If Time Out, correct follow-through
PCIT Example

https://www.youtube.com/watch?v=UqBSPPA0o4&t=0s&list=PL-TzHikZ7xRo3hmdquCUn5LN69_xHe8mB&index=45

PCIT Best Practice

- CONFIRM THE THERAPIST IS A TRAINED PRACTITIONER (CERTIFICATION PREFERRED)
- RESPECTS CAREGIVER ENGAGEMENT
- HAS APPROPRIATE EXPECTATIONS FOR CHILDREN FROM HARD PLACES
PCIT Practice

- Praise appropriate behavior
- Reflect appropriate talk
- Imitate appropriate play
- Describe appropriate behavior
- Enthusiasm

- “Active” Ignore inappropriate behavior
- Avoid giving commands
- Avoid asking questions
- Avoid criticizing
- Avoid NO, DON’T, STOP, QUIT, & NOT

What to look for in a therapist

Questions to ask:

- What’s your background and training working with children?
- What therapy models do you use? What is your training/certification?
- How often do you meet with caregivers?
- Will you be in contact with the child’s teacher or guidance counselor?
- How long do children usually stay in therapy with you?
- What are your thoughts about medication?
- Can I speak with a parent whose child has worked with you?

Listen for:

- Extent of family involvement
- Ethical responsibility (consents, disclosure, confidentiality)
- Slow to label
- “Team Player”
- Views behavior as a symptom and works on the underlying problem as well as giving ways of coping with the behavior
- Appropriate/flexible space
- Research their digital footprint
- How they make you feel
Once you find a good fit...

- Persistence - encourage trusting the process
- Ask questions while respecting the therapists need to provide confidentiality
- Advocate ending sessions in a healthy way - final session(s)
- Be prepared for signs it’s time to go back as children’s developmental understanding of their situation shifts

What therapeutic intervention does Rocky need?

To feel:
- Seen
- Heard
- Understood
- Cared for
- Loved
References

• California Evidence-Based Clearing House for Child Welfare http://www.cebc4cw.org/search/by-program-name/

• The National Child Traumatic Stress Network https://www.nctsn.org

• Registered Play Therapy Association (RPT) www.a4pt.org

• TF-CBT https://tfcbt.org/

• EMDRIA (EMDR information) www.emdria.org

• Parent Child Interaction Therapy International PCIT http://www.pcit.org/


Thank you!

Please feel free to contact me with follow-up needs...

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