

Cognitive and behavioral therapy for physically abused kids in low income areas

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**ASSIGN
BUSTER**

Cognitive and Behavioral Therapy for Physically Abused Kids in Low-Income Areas
Affiliation Source/Year Purpose Sample Design

Variables/ Instruments

Results

Implications for this Proposal

Trauma focused CBT for children with co-occurring trauma and behavior problems(2010)

Illustrates convenient strategies for managing behavioral problems in the context of trauma focused EBT

Traumatized children and Families in trauma- and behavioral-focused treatment

The empirical literature is reviewed and practical strategies are described for

conducting trauma- and behavioral-focused assessments

Treatment-planning that includes a balance of both trauma and behavioral foci as well as managing ongoing behavioral problems in the context of providing

trauma-focused treatment

Trauma-focused EBT that integrate behavioral management strategies can effectively

manage the behavioral regulation problems that commonly occur in traumatized

children

The strategies illustrated in this study will be used in my proposal to illustrate their efficiency in low-income areas.

Trauma-focused CBT for youth who experience ongoing traumas(2011)

Illustrates convenient

strategies for applying one EBT, Trauma-Focused Cognitive

Behavioral Therapy (TF-CBT) for youth with enduring traumas

Youth that experience ongoing trauma and parents who experience personal ongoing trauma

Alliance with local

therapists and families partaking in TF-CBT society and global programs was used to explicate

efficient strategies

Case examples are used to illustrate how strategies employed in this study are used.

TF-CBT is a feasible realistic alternative for working with multifaceted cases where hostility menace is speedily purged.

My proposal will not only focus on past experienced trauma but also ongoing trauma and as such will use the results of this study as well as the case studies featured.

The data behind the dissemination: A systematic review of trauma-focused cognitive

behavioral therapy for use with children and youth(2012)

Analytically assess the verification

of TF-CBTs capability to lessen symptoms of post-traumatic stress, depression and behavior difficulties in youths that have survived trauma.

Children and youth who have survived trauma and experienced PTSD

Ten studies (twelve articles) were chosen for inclusion

in 3 sets of meta-analyses. Results were then compared.

A search was conducted and produced ten studies that evaluated TF-CBT or interventions highly similar to TF-CBT

The collective

estimates sturdily imply that TF-CBT is inherently more efficient than attention

management, standard community care and waitlist management settings.

The results acquired by these ten studies would be used as evidence in proving the efficiency of CBT in this proposal.

Identification, modification, and implementation of an evidence-based psychotherapy for children in a low-income country: the use of TF-CBT in Zambia(2013)

Illustrates the course of choosing an intervention to meet the requirements of a populace and

the procedure of cross-cultural adjustment

local stakeholders

Community-based participatory examination ideologies were applied for intervention selection, with the inclusion of combined meetings with stakeholders, evaluation of qualitative research, as well as evaluation of the literature

TF-CBT was chosen as the evidence-based practice for modification and feasibility testing

Selecting an intervention can work as a collaborative procedure with society participation.

Zambia is a low income area and as such it is an ideal case study for my proposal. This study in Zambia will eliminate the efficiency of intervention in low income areas.

Utilization and Implementation of
Trauma-Focused Cognitive–Behavioral
Therapy for the Treatment of Maltreated
Children(2012)

Establish the fraction of clinicians that are skilled in and make use of TFCBT and the rate at which TF-CBT mechanism are put into operation

Health clinicians in children’s advocacy
centers

Illustrates the results of a study of 132 mental health clinicians in children’s
advocacy
centers (CACs) across the United States.

Web-based survey protocol that included numerous questionnaires
conducted by the clinicians.

A total of 103 (78%) of the clinicians reported
being skilled in and making use of TF-CBT on a regular basis; however, only
66% of these clinicians reported being likely to use each component.

This proposal would use the results of this study to determine the
effectiveness of TF-CBT mechanisms in relation to individual clinicians. In
effect how often trained clinicians in low income areas would use TF-CBT
mechanisms.

Question 1: How would you rank the quality of evidence for each of your five
articles? Where do you see potential for bias?

The quality of evidence in the 5 articles is satisfactory although in the 2012 article *The data behind the dissemination: A systematic review of trauma-focused cognitive behavioral therapy for use with children and youth* by Colleen E. Cary and J. Curtis McMillen, there should have been an inclusion of a higher number of test studies to increase the authenticity of the results.

Question 2: Did you find any outcomes that opposed your expectations or the expectations of the researchers? How might this information change your thinking about your proposed intervention? If not, what did you find that was surprising and or challenged your assumptions?

No outcomes opposed my expectations or the expectations of researchers although it was surprising to find that although there is a relatively high number of clinicians skilled in the use of TF-CBT in the United States, a comparatively low number is putting the components into play despite previous studies showing that TF-CBT components were evidently productive. The level of success in Community-based participatory examination ideologies applied in Zambia was also unexpected but positively welcomed.

Question 3: Did you include qualitative research in your review? If so, was there a clear statement of the aims of the research and did it seek to illuminate subjective experiences/actions of participants? Was the research design appropriate to address those aims (Questions adapted from Canadian National Collaborating Centre for Methods and Tools NCCMT 2010)?

I also included a qualitative review, an incidence I found particularly sufficient in addressing the aims of the research. Drawing on the findings, it is clear that the research seeks to shed a light on the subjective experiences

the participants incurred. More so, this research design would suffice in addressing the aims of the overall research.

References

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