

Elements and Examples of Trauma Focused CBT

TRAUMA FOCUSED CBT

Trauma is a distressful experience that can cause physical and psychological symptoms. Opinions about trauma change over time as medical practitioners develop new approaches to deal with it.

The field of psychoanalysis has also created an opportunity for modern techniques like Cognitive Behavioral Therapy (CBT) to help trauma patients deal with their psychological wounds. Trauma-focused Cognitive Behavioral Therapy (TF-CBT) is an especially popular CBT technique that helps most young people cope with trauma nowadays.

COVERED IN THIS PAPER:

What is TF-CBT?

The Three Phases of TF-CBT



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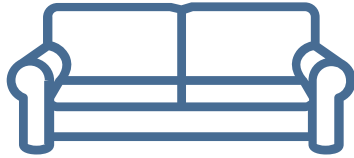
WHAT IS TF-CBT?

TF-CBT is a treatment program that helps patients deal with the effects of their traumatic experiences. CBT primarily targets disorders related to a traumatic incident, encouraging healing. TF-CBT, on the other hand, consists of different techniques that complement each other to help patients deal with traumatic incidents. The treatment is usually short-term. During a session, the care provider in charge will create a comfortable and relaxing environment for the patient. The mood will encourage openness for the patient to share thoughts and feelings without holding back. Therapy may include extra activities for multiple parties, thus enabling support.



WHAT ARE THE COMPONENTS OF TF-CBT?

TF-CBT consists of eight components and three phases. For children in therapy, their parents or guardians will have to undergo an extra feature. Specific techniques target child-parent interactions to enhance parenting skills. The first step towards dealing with trauma in children is to find ways of strengthening the child-parent connection. Assessing behavioral patterns is only possible when the parent and child have trust.



THE THREE PHASES OF TF-CBT

Phase 1: Stabilization

This phase involves educating a patient about what to expect during and after the treatment. A care provider needs to elaborate on the relationship between trauma and healing. Specific elements in this phase include:

Psychoeducation

Here, a patient gets to understand what trauma is and appreciate its effect on mental and physical health. Therapists need to remind their patients that having feelings is normal and reacting to them is human. Eventually, the patient should have hope of recovery as psychoeducation ends.

Relaxation Skills

These techniques help reverse the hormonal arousal impacts of trauma. Relaxation skills help the patient focus and release negative energy. Parents will learn the methods in a parenting session to help support the recovery of their children. Some of the most common relaxation techniques include meditation, reading, exercise, prayer, or music. A therapist will recommend implementing a specific relaxation technique whenever a trigger pops up to remind you of your trauma.



THE THREE PHASES OF TF-CBT

Phase 1: Stabilization (cont.)

Affective Regulation Skills

These techniques offer the same solution as relaxation skills. A patient can quickly identify and manage any emotions due to a memory of the traumatic experience. Some of the skills that can help include distraction, social support, or anger management

Cognitive Processing Skills

This step helps patients learn how to cope with their trauma. Acceptance is the first step towards healing. Specific techniques will enable patients to recognize behavioral patterns to adjust adverse reactions caused by triggers.

Therapists recommend that patients thoroughly analyze the situation revising the accuracy of thoughts identifying what makes them feel better.



THE THREE PHASES OF TF-CBT

Phase 2: Trauma Narrative

This phase analyzes the success of skills learned from the first phase.

Trauma Narration and Processing

A child narrates the traumatic experience to a therapist. At first, the patient will have trouble describing the experience without getting emotional. However, it gets easier as the process progresses.

This step is more accessible when the child starts by stating the facts and then adding arising thoughts later. After narrating the facts and opinions, the next step is to discuss the disturbing parts of the narrative intensely. Next, the patient will tell the whole experience with the facts, thoughts, and emotions. The therapist may allow additional words for the patient to share their current feelings or what wisdom they might have gained from the experience or the narration. Children have individual narration stories. However, the therapist should update the parents on their progress. Eventually, the child should narrate the story in a session where the parents are present.



THE THREE PHASES OF TF-CBT

Phase 3: Integration / Consolidation

This step focuses on the continuation of relaxation and coping skills. It also encourages parent-child connection.

In Vivo Mastery of Trauma Reminder

Children may choose to repress memories as a way of dealing with trauma. However, this solution still causes triggers that may lead to severe psychological arousal like hyperventilation. This technique helps the child accept the experience and deal with the fear that arises.

Conjoint Child-Parent Sessions

This technique helps families reconnect and thus provides a patient with the necessary support to encourage healing. Sessions may include trauma narration and communication skills that will ensure a thorough dissection of the situation.

Enhancing Safety

This final step encourages a family to move past the trauma by discussing positive skills that will help patients deal with the psychological effects of the experience.



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CONCLUSION

Overall, Trauma-Focused Cognitive Behavioral therapy is one of the in-depth ways of handling various kinds of trauma. It involves a series of steps that should be conducted with proper guidance or with the help of a parent when the traumatized individual is a child.

For more resources on CBT techniques and worksheets, visit KASA's Cognitive Behavioral Therapy Resource Library.

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