

**Trauma-Focused CBT for
Childhood Traumatic Grief**

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Tasks of Childhood Bereavement

- Experience the deep pain associated with death.
- Accept the permanence of death (varies according to developmental level).
- Reminisce about the deceased person—good and bad.
- Incorporate important aspects of the deceased into own identity
- Convert the relationship from one of interaction to one of memory
- Commit to new relationships
- Regain healthy developmental trajectory

Wolfelt (1996); Worden (1996)



“Typical” Childhood Grief

- Children are able to engage in these tasks
- Emptiness, sadness, longing for the deceased, but without guilt, ↓self-esteem, death preoccupation
- Intensity: intense “pangs” (sadness, longing) interspersed with ~normal functioning
- Duration: self-limited; diminishes over the course of several weeks-months



Childhood Traumatic Grief

- Similar terms: Maladaptive grief, complicated grief
- Child develops trauma symptoms and complicated grief symptoms after death of important attachment figure
- Trauma symptoms: PTSD intrusion, avoidance, maladaptive cognitions and emotions, hyperarousal
- Complicated grief symptoms: difficulty engaging in grief tasks: separation distress; social/identity disruption; ↑ anger, avoidance, and/or preoccupation with death
- Child is “stuck” on traumatic aspects of death and unable to reminisce without traumatic memories.



Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

- Evidence-based treatment for traumatized children, adolescents and their parents/caregivers
- Short-term (12-20 sessions)
- Provided in parallel to child and parent, with several conjoint sessions for child and parent/caregiver



Who is TF-CBT For?

- Children 3-18 years with known trauma history and non-offending parent or caregiver
- Any traumas—single, multiple, complex
- Prominent trauma symptoms (PTSD, depression, anxiety, with/without behavioral problems)
- Parental/caretaker involvement is optimal but not required
- Settings: clinic, school, residential, home, inpatient, refugee, other
- Format: individual or group



Evidence That TF-CBT Works

- 21 RCT comparing TF-CBT to other conditions
- TF-CBT → greater improvement in PTSD, depression, anxiety, behavior problems compared to comparison or control conditions
- Parents participating in TF-CBT also experienced greater improvement compared to parents participating in comparison conditions



TF-CBT for Childhood Traumatic Grief

- CTG: trauma symptoms interfere/impinge on child's ability to engage in typical grieving tasks
- Provide sequential trauma-focused and grief-focused interventions:
- Trauma-focused components to resolve trauma symptoms
- Grief-focused components to help child engage in typical tasks of grieving



TF-CBT Core Principles

- Components- and phase-based treatment
- Proportionality of phases
- Gradual exposure—not prolonged exposure—integrated into all TF-CBT components



Components-Based Treatment: PRACTICE Phase- Based Treatment

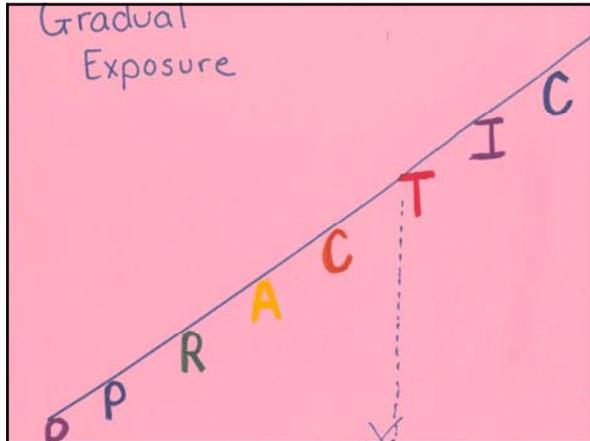
<ul style="list-style-type: none">• Psychoeducation• Parenting Component• Relaxation Skills• Affective regulation Skills• Cognitive processing Skills	STABILIZATION PHASE
<ul style="list-style-type: none">• Trauma narration and processing	TN PHASE
<ul style="list-style-type: none">• In vivo mastery of trauma reminders• Conjoint child-parent sessions• Enhancing safety	INTEGRATION PHASE



Proportionality of TF-CBT Phases

Stabilization	Trauma Narrative	Integration
1/3	1/3	1/3





Psychoeducation

- Educate about trauma reminders and common reactions to the death/other traumas
- Provide information re: trauma and grief symptoms
- Identify child's reminders/ connections to symptoms:
 - Trauma: reminders of the traumatic death
 - Loss: reminders of losing the person
 - Change: reminders of how life has changed
- Validate the child's and parent's reactions.
- Provide hope for recovery.

NCTSN The National Child Traumatic Stress Network

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Trauma Types

- Trauma Types
- Physical Abuse and Neglect
- Sexual Abuse
- Traumatic Grief
- Domestic Violence
- Community / School Violence
- Complex Trauma
- Medical Trauma
- Refugee Trauma
- Natural Disasters
- Terrorism

Childhood Traumatic Grief

From the Childhood Traumatic Grief Task Force Educational Materials Subcommittee

In order to view and print some of the materials provided, you will need Acrobat Reader 5.0. If it is not loaded in your computer, you can download it for free by visiting www.adobe.com and clicking on Downloads.

Page Contents:

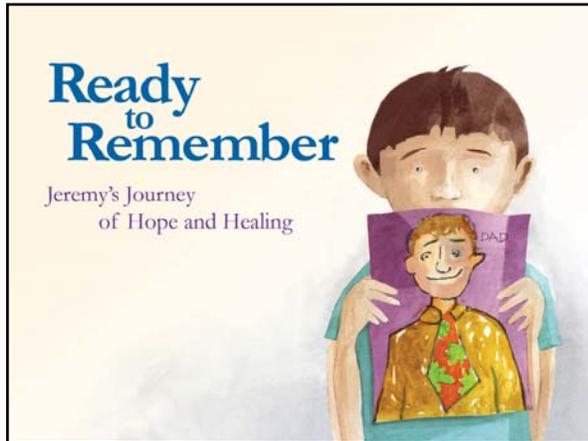
- Childhood Traumatic Grief Educational Materials
- The Courage to Remember: Videos and Curriculum Guide

Childhood Traumatic Grief Educational Materials

Entire Package

- In-Depth General Information Guide to Childhood Traumatic Grief
- Brief Information on Childhood Traumatic Grief
- Information for Pediatricians and Pediatric Nurses on Childhood Traumatic Grief
- Information for Parents on Childhood Traumatic Grief
- In-Depth Information on Childhood Traumatic Grief for School Personnel
- Brief Information on Childhood Traumatic Grief for School Personnel
- Information for the Media on Childhood Traumatic Grief
- Childhood Traumatic Grief Reference and Resource List

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Parenting Component

- Parents receive individual sessions for all PRACTICE components.
- Parenting skills to enhance child-parent interactions including:
 - Praise, effective attention, contingency reinforcement schedules
 - Help parent connect the child's behavioral problems to child's CTG symptoms

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Relaxation Skills

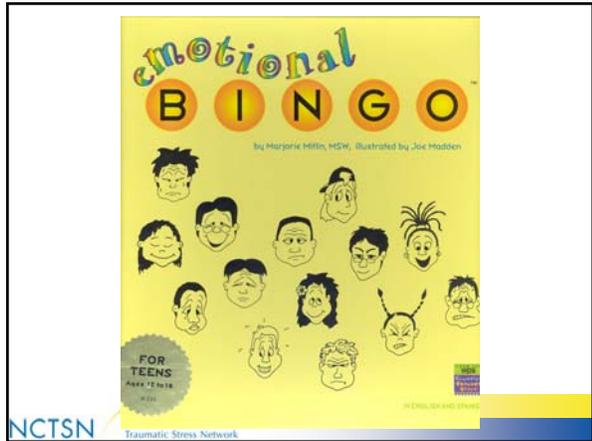
- Reverse physiological arousal CTG effects via:
 - Focused breathing, mindfulness
 - Progressive muscle relaxation
 - Exercise
 - Yoga
 - Songs, dance, blowing bubbles, reading, prayer, other relaxing activities
- Use relaxation strategies when reminders occur

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Affective Modulation Skills

- Identify and modulate upsetting affective states including:
- Problem solving
- Anger management
- Present focus
- Obtaining social support
- Positive distraction activities
- Use skills in relation to reminders



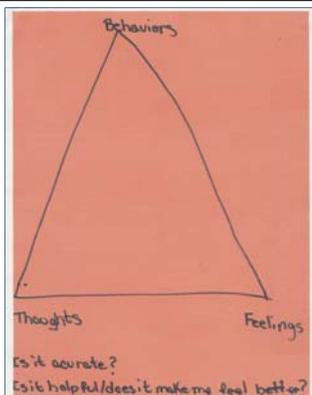




Cognitive Processing Skills

- Recognize connections among thoughts, feelings and behaviors
- Replace thoughts with more accurate/ more helpful ones
- Child's cognitive processing of personal trauma experiences typically occurs during trauma narration
- Free TF-CBT Triangle of Life app available at Google+ and Apple Store





Trauma Narration & Processing

- Gradually develop a detailed narrative of child's personal traumatic grief experiences.
- Process using cognitive strategies learned earlier (changing inaccurate/unhelpful thoughts about the traumatic death).
- Share with parent during individual parent sessions as child is developing TN



In Vivo Mastery of Trauma Reminders

- Only for ongoing avoidance of generalized reminders (e.g., if child refuses to ride in cars after witnessing parent's death in car accident)
- Develop fear hierarchy, gradually master increasingly feared stimuli
- May start during stabilization phase—takes several weeks



Conjoint Parent-Child Sessions

- Child shares trauma narrative and processing directly with parent during conjoint session
- Share their new cognitions about CTG
- May also develop a family safety plan (e.g., who will take care of me if you die, etc.); improve general communication; or build other skills



Enhancing Safety and Future Development

- Safety plans continued for individual situations
- Social skills, problem solving, drug refusal, etc.
- Additional skills as individual child/family need



TF-CBT Grief-Focused Components

- Grief psychoeducation
- What I miss and don't miss
- Preserving positive memories
- Redefining the relationship and Committing to present relationships
- Treatment closure



Grief Psychoeducation

- Assist the child in talking about death (start bereavement tasks after resolution of trauma reminders)
- Correct misconceptions about death, particularly disaster-related deaths, which may pose special issues (e.g., bodies not recovered, mutilation, etc.)
- Cultural issues critical with CTG, must include these considerations



Grieving the Loss ("What I Miss")

- Naming what has been lost with the death
- May accomplish this in many ways
- One way is through the use of a name anagram:
Made cakes with me
Always in my heart
Ran cross country races
Yellow was her favorite color



Resolving Ambivalent Feelings ("What I Don't Miss")

- May be because of conflict in the relationship (e.g., abuse, normal parent-child conflict, unresolved anger)
- May be due to stigma or shame over the way the person died (e.g., drug OD, drunk driving, suicide, AIDS)
- May be because of anger at "unnecessary death" (e.g., didn't get medical care, "was a hero for others, didn't think of me")
- Write an imagined letter to/from deceased



Preserving Positive Memories

- Once child has resolved trauma issues and ambivalence, can tolerate memories and start to reminisce more fully.
- Use family, siblings, friends of deceased.
- Make something enduring to preserve positive memories (collage, video, etc.).
- After disasters mementos may be lost: computer technology, narratives and/or friends can help fill in these gaps.
- Child may want to have another memorial service.



Converting the Relationship From Interaction to Memory

- Helping the child convert the relationship from one of interaction to one of memory
- Use the past tense when referring to the deceased; encourage the parent to do so and help the child to do so.
- Balloon exercise
- Identify what the child still has and what the child must let go of.



Committing to Present Relationships

- Challenges for the child in committing to present relationships
- Challenges for the parent in committing to present relationships
- How to assist the child and parent in moving forward towards present and future relationships



Treatment Closure Issues

- Preparing for future trauma and loss reminders: perpetual calendar
- Making meaning of traumatic grief: What would you tell other children; how do you think you have changed; what have you learned from this person's death?
- Death is different from other endings: treatment closure issues for CTG.



Special CTG Issues for Community Disasters

- Post-disaster: at what point does it become clear that missing people are dead?
- Therapists who are also traumatized—how can they provide optimal care to children and families and also care for themselves?
- Making a future family disaster preparedness plan becomes more complicated if your family member died.
- Educating teachers/classmates how to optimally interact with children with CTG



TF-CBT Research for Traumatic Grief

Effectiveness studies

Cohen, Mannarino & Krudsen (2004)

Cohen, Mannarino & Staron (2006)

O'Donnell et al (2015)

All showed positive outcomes for PTSD and CTG

Randomized Controlled Trials

Whetten et al (in development)

Brown, Goodman, Cohen & Mannarino
(unpublished manuscript)



Summary

- CTG is a condition in which children are “stuck” on the traumatic aspects of a person’s death and cannot progress through the typical bereavement tasks.
- Trauma-focused PRACTICE components (8 sessions)
Grief focused components (4 sessions)
- Sequential treatment using trauma- and grief-focused interventions shows preliminary promise.



TF-CBT Web

www.musc.edu/tfcbt2

TF-CBT Web is a web-based, distance education training course for learning Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT).



Maya Angelou:

“The world is changed one child at a time”.

Thank you for all you do to help children and families!