Different types of treatment may be used to help your child and family overcome trauma-related difficulties. Generally, treatment for trauma-related difficulties should:

- Directly address the traumatic experiences and your child’s reactions to them.
- Include you as parent in the treatment in some manner.
- Focus on helping your child cope better, as well as reducing symptoms.

Listed below are common trauma treatment programs for children and families that are considered evidence-based. Each has been reviewed by either the National Registry for Evidence-Based Programs and Practices (NREPP) or the National Child Traumatic Stress Network (NCTSN). In addition, each treatment has:

- Been tested in a randomized control trial with children or family members
- Been subject to careful scientific review by peers in the field of child trauma
- Shown positive outcomes for many of children and families who were treated.

Any treatment is only as good as the mental health professional providing it. So even though the treatment may be “evidence-based,” you should ask the therapist about his or her prior training in the treatment program and prior experience using it with other clients.

In addition, one of the most important factors in successful treatment is how much you and your child are able to trust your therapist and how comfortable you each feel in communicating with your therapist. Your trust and comfort should grow within the first few sessions. Be sure to ask check in with your child about his or her comfort with the therapist after the first few sessions.

Cognitive-Behavioral Therapies

- Trauma Focused Cognitive Behavioral Therapy (TF-CBT) helps children and teens who have emotional or behavioral difficulties related to trauma. In about 12-16 sessions, TF-CBT teaches children and parents new skills to deal with trauma-related thoughts, feelings and behaviors. Some of the treatment sessions involve the child alone; others involve both the child and the parent.

- Trauma Focused Cognitive Behavioral Therapy for Childhood Traumatic Grief (TG-CBT) helps children and teens who have experienced the traumatic death of a loved one, and are having difficulties as a result. In about 12-16 sessions, children and their parents learn to cope with the trauma of the death, sort through their feelings of grief, and re-negotiate relationships. Some of the treatment sessions involve the child alone; others involve both the child and the parent.

- Alternatives for Families: A Cognitive Behavioral Therapy (AF-CBT) helps children, their parents and family members adjust after a trauma. In 12-24 sessions, families learn about the effects of trauma on the family, and then build skills to improve communication, problem-solving, or reduce difficult behaviors related to the trauma.

Parent-Child Therapies

- Child-Parent Psychotherapy (CPP) treats young children (0–6 years) and their caregivers after trauma. Over the course of several months, CPP helps improve the child-caregiver relationship by creating safety, managing emotions, and helping the parent and child move past the trauma and return to a healthy course of development.

- Combined Parent Child Cognitive-Behavioral Therapy (CPC-CBT) helps to improve the overall parent-child relationship after trauma. In an average of 16 sessions, CPC-CBT teaches parents to use positive parenting practices and helps children (3–18 years) develop healthy coping skills to deal with trauma-related emotional distress.
• **Parent-Child Interaction Therapy (PCIT)** creates a more nurturing and secure parent-child (2–12 years) relationship after trauma. In about 12–20 sessions, PCIT teaches parents skills to increase their child’s positive behavior, reduce difficult or disruptive behavior, and improve their relationship with their child. In-session coaching helps parents improve their communication with their child as well as provide structure and limit-setting.

### Family-Based Therapies

- **Surviving Cancer Competently Intervention Program (SCCIP)** is a brief, multi-family intervention for teenage (11–18 years) survivors of cancer, their parents, and siblings. SCCIP helps families cope with traumatic stress symptoms related to the cancer experience and improve family communication and support after treatment is over.

- **Surviving Cancer Competently Intervention Program- Newly Diagnosed (SCCIP-ND)** is a three-session intervention for caregivers of children recently diagnosed with cancer. SCCIP-ND helps parents support their child’s and family’s coping with cancer and its treatment, as well as prevent posttraumatic stress symptoms in family members.

- **Strengthening Family’s Coping Resources (SFCR)** is a multi-family group program that helps families build skills and use their own resources to cope with family trauma. SFCR consists of 15 weekly sessions that help increase the family’s sense of safety and stability after trauma, cope with trauma-related feelings and behaviors, and improve family communication.

### Skill-Based Therapies

- **Cognitive Behavioral Intervention for Trauma in Schools (CBITS)** is a 10-session weekly group intervention that helps reduce posttraumatic stress, depression, and anxiety in school-aged children (10–15 years) who have experienced trauma at home or in the community. CBITS teaches coping skills like relaxation, problem-solving, and stress management to help children work through the trauma and reduce their traumatic stress symptoms. CBITS includes additional education sessions for parents and teachers.

- **Trauma Affect Regulation: Guide for Education and Therapy (TARGET)** is a 4–12 session treatment program for children and teens (10–18 years) experiencing posttraumatic stress. TARGET can involve the child alone, or can be provided as part of family or group sessions. TARGET helps children work through their thoughts, feelings, and behaviors related to the trauma, manage their stress, learn problem-solving skills, and cope with trauma memories.

- **Attachment, Self-Regulation and Competency (ARC)** is a treatment program for children and teens (5–17 years) who experience posttraumatic stress, grief, depression, anxiety, and other symptoms as a result of chronic or ongoing trauma. ARC teaches children and caregivers about the effects of trauma, helps them strengthen their relationships, and build social skills to reduce the impact of trauma on the child’s daily life. Sessions can involve the child alone, or can be provided in a group.

- **Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS)** is a 16-session group intervention for teens (12–19 years) with chronic trauma. SPARCS teaches skills to help teens deal with emotions, learn problem-solving skills, and build social support so they can cope better, despite ongoing trauma and/or stress.

- **Real Life Heroes (RLH)** helps children and teens reduce traumatic stress and build skills and resources to promote healing after trauma. Using a storybook and activities over several months of treatment, RLH focuses on helping children and teens feel safe, manage their emotions, build healthy relationships, and understand the trauma experience.