

## Examples of Evidence Based Clinical Treatment Models

Evidence Based Practice Model	Brief Description of Model
<i>Cognitive Therapy for Multiple Disorder Areas (CT)</i>	Cognitive Therapy is a theory-driven, short term structured treatment that aims to assist people in understanding and correcting their maladaptive thoughts and behaviors. Cognitive Therapy is a “present oriented” psychotherapy that focuses on the problems the clients are experiencing in their day-to-day life.
<i>Functional Family Therapy (FFT)</i>	Functional Family Therapy (FFT) is an empirically grounded program for dysfunctional youth. Target populations range from at-risk preadolescents to youth with very serious problems such as conduct disorder, violent acting-out, and substance abuse.
<i>Ecosystemic Structural Family Therapy (ESFT)</i>	ESFT is an evidence-based, developmental/systemic, trauma-informed model that examines biological influences, developmental influences and competencies of individual family members as well as influences and competencies found within families and within their environmental cultural contexts.
<i>Prolonged Exposure Therapy (PE)</i>	Prolonged Exposure (PE) Therapy for Posttraumatic Stress Disorders is a cognitive-behavioral treatment program for adult men and women who have experienced single or multiple/continuous traumas and have posttraumatic stress disorder (PTSD). The program consists of a course of individual therapy designed to help clients process traumatic events and reduce their PTSD symptoms as well as depression, anger, and general anxiety.
<i>Dialectical Behavioral Therapy (DBT)</i>	Dialectical Behavior Therapy (DBT) is a cognitive-behavioral treatment approach with two key characteristics: a behavioral, problem-solving focus blended with acceptance-based strategies, and an emphasis on dialectical processes. “Dialectical” refers to the issues involved in treating patients with multiple disorders and to the type of thought processes and behavioral styles used in the treatment strategies. DBT emphasizes balancing behavioral change, problem-solving, and emotional regulation with validation, mindfulness, and acceptance of patients.

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<p><i>Trauma Focused CBT (TF-CBT)</i></p>	<p>Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is a psychosocial treatment model designed to treat posttraumatic stress and related emotional and behavioral problems in children and adolescents. Initially developed to address the psychological trauma associated with child sexual abuse, the model has been adapted for use with children who have a wide array of traumatic experiences, including domestic violence, traumatic loss, and the often multiple psychological traumas experienced by children prior to foster care placement.</p>
<p><i>Motivational Interviewing (MI)</i></p>	<p>Motivational Interviewing (MI) is a goal-directed, client-centered counseling style for eliciting behavioral change by helping clients explore and resolve ambivalence. The operational assumption in MI is that ambivalent attitudes or lack of resolve is the primary obstacle to behavioral change, so that the examination and resolution of ambivalence becomes its key goal. MI has been applied to a wide range of problem behaviors related to alcohol and substance abuse as well as health promotion, medical treatment adherence, and mental health issues.</p>
<p><i>Cognitive Processing Therapy (CPT)</i></p>	<p>CPT involves a structured, sequenced approach to address the unique needs of each patient suffering from PTSD and/or depression. Specifically, CPT is a short-term treatment that may work in as few as 12 treatment sessions. Of course, treatment may be provided for longer periods depending on each individual's needs. Sessions focus on many areas including Remembering the traumatic event and experiencing the emotions associated with it and learning about connections between trauma-related thoughts, feelings, and behaviors.</p>
<p><i>Brief Strategic Family Therapy (BSFT)</i></p>	<p>Brief Strategic Family Therapy (BSFT) is designed to (1) prevent, reduce, and/or treat adolescent behavior problems such as drug use, conduct problems, delinquency, sexually risky behavior, aggressive/violent behavior, and association with antisocial peers; (2) improve prosocial behaviors such as school attendance and performance; and (3) improve family functioning, including effective parental leadership and management, positive parenting, and parental involvement with the child and his or her peers and school. BSFT considers adolescent symptomatology to be rooted in maladaptive family interactions, inappropriate family alliances, overly rigid or permeable family boundaries, and parents' tendency to believe that a single individual (usually the adolescent) is responsible for the family's troubles. BSFT operates according to the assumption that transforming how the family functions will help improve the teen's presenting problem.</p>

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<p style="text-align: center;"><i>Multi-dimensional Family Therapy (MDFT)</i></p>	<p>Multidimensional Family Therapy (MDFT) is a comprehensive and multisystemic family-based outpatient or partial hospitalization program for substance-abusing adolescents, adolescents with co-occurring substance use and mental disorders, and those at high risk for continued substance abuse and other problem behaviors such as conduct disorder and delinquency. Working with the individual youth and his or her family, MDFT helps the youth develop more effective coping and problem-solving skills for better decision making and helps the family improve interpersonal functioning as a protective factor against substance abuse and related problems.</p>
<p style="text-align: center;"><i>Trauma Recovery and Empowerment Model (TREM)</i></p>	<p>The Trauma Recovery and Empowerment Model (TREM) is a fully manualized group-based intervention designed to facilitate trauma recovery among women with histories of exposure to sexual and physical abuse. Drawing on cognitive restructuring, psychoeducational, and skills-training techniques, the gender-specific 24- to 29-session group emphasizes the development of coping skills and social support. It addresses both short-term and long-term consequences of violent victimization, including mental health symptoms, especially posttraumatic stress disorder (PTSD) and depression, and substance abuse. TREM has been successfully implemented in a wide range of service settings (mental health, substance abuse, criminal justice) and among diverse racial and ethnic populations.</p>
<p style="text-align: center;"><i>Multidimensional Treatment Foster Care (MTFC)</i></p>	<p>Multidimensional Treatment Foster Care (MTFC) is a community-based intervention for adolescents (12-17 years of age) with severe and chronic delinquency and their families. It was developed as an alternative to group home treatment or State training facilities for youths who have been removed from their home due to conduct and delinquency problems, substance use, and/or involvement with the juvenile justice system. Youths are typically referred to MTFC after previous family preservation efforts or other out-of-home placements have failed. Referrals primarily come from juvenile courts and probation, mental health, and child welfare agencies. MTFC aims to help youth live successfully in their communities while also preparing their biological parents (or adoptive parents or other aftercare family), relatives, and community-based agencies to provide effective parenting and support that will facilitate a positive reunification with the family.</p>