Course: Cognitive-Behavioral Therapy (CBT) With Children, Adolescents, & Families

Description: This year-long course is designed to provide participants with an understanding of how cognitive and behavioral models can be used in conceptualizing and treating behavioral and emotional disorders among youth. We will review vulnerability factors for child psychopathology, and will examine how cognitive-behavioral models can be used to guide both prevention and treatment programs. Our goal is practical - to provide clinicians with effective strategies for assessing and treating a wide range of difficulties experienced by children, adolescents, and families.

The course will use a seminar format, and will include formal presentations, discussion, and case presentations. The seminar has been designed to provide participants with the necessary didactic training to apply for board certification through the Academy of Cognitive Therapy if they wish. Each monthly course will focus on a different aspect or application of the CBT model.

Duration: 84 Hours Training and Supervision
One Saturday per month, September 2010 through August 2011
8 Hours classroom
Monthly Consultation Opportunities

Class Size: 20-25 participants

Faculty: Mark A. Reinecke, Ph.D., ABPP, ACT
Professor & Chief of the Division of Psychology, Northwestern University

Venue: Alexian Brothers Behavioral Health Hospital
Room 0411 (SW Concourse)

Program Cost:
$225 per session/$2700 year
→ 10% discount for all 12 sessions paid up front - $2430
→ 15% discount for ABBHH employees - $2295

Participant Benefits:
84 Total CEU’s Available
1 year training in Cognitive-Behavioral Therapy (CBT)
Case consultations available
Limited class size
Training Modules:

I. Introduction to CBT with Children and Families - September 25, 2010
   a. Evidence-based practices and why they are important for clinical work
   b. The theoretical assumptions of CBT
   c. Basic CBT treatment strategies
   d. CBT Case Formulation; Developing an individualized treatment plan
   e. Assessing therapeutic adherence (i.e., How can I know if I'm doing good CBT?)

II. Depression (Adolescence) – October 16, 2010
   a. Cognitive, social, and developmental risk factors for depression
   b. Diagnosis and assessment of major depression among adolescents
   c. Alternative cognitive models of depression
   d. Cognitive-behavioral case formulation and assessment
   e. “Modular” CBT techniques and strategies
   f. Findings from the Treatment of Adolescents with Depression Study (TADS) and their clinical implications

III. Depression (Child) - November 27, 2010
   a. Diagnosis and assessment of major depression among school-age children
   b. Cognitive-behavioral case formulation
   c. Diagnosis and assessment strategies
   d. Evidence-based treatment programs (PASCET and ACTION)

IV. Suicide – December 11, 2010
   a. Findings on the epidemiology and classification of suicidal behavior
   b. Risk factors for suicide among youth
   c. Assessment instruments and clinical interviewing strategies
   d. Effective strategies for engaging suicidal youth and reducing risk

V. Anxiety Disorders (OCD, GAD) – January 8, 2011
   a. Epidemiology and diagnosis of anxiety disorders among children and adolescents
   b. Assessment techniques
   c. Cognitive-behavioral models of anxiety
   d. Evidence-based CBT treatment strategies
   e. Results of controlled outcome studies and their clinical implications

VI. Trauma & PTSD – February 12, 2011
   a. The effects of abuse, neglect, and trauma on child development
   b. Cognitive-behavioral models of PTSD and trauma
   c. Trauma-Focused CBT (T-CBT) techniques and strategies
   d. Results of controlled outcome studies and their clinical implications
VII. Personality Disorders (Borderline Personality Disorder) – March 2011 (TBD)
   a. Criteria for the diagnosis of BPD
   b. Defining features of this condition
   c. The Cognitive-developmental model of BPD
   d. Assessment instruments and clinical interviewing strategies
   e. Effective treatment strategies, including the use of the therapeutic relationship and the developmental analysis of beliefs.

VIII. Eating Disorders – April 9, 2011
   a. Diagnostic criteria for eating disorders
   b. Defining features of these conditions
   c. Christopher Fairburn’s CBT model of Bulimia Nervosa
   d. Assessment instruments and clinical interviewing strategies
   e. Effective treatment strategies

IX. Externalizing Behavior Disorders (ODD, CD) – May 14, 2011
   a. Risk factors for children’s aggressive behavior
   b. A contextual “socio-cognitive” model of Oppositional-Defiant Disorder and Conduct Disorder
   c. Cognitive-behavioral treatment strategies
   d. Engaging parents in the treatment process
   e. Evidence for the efficacy and effectiveness of CBT treatment programs, including Coping Power

X. School Refusal – June 18, 2011
   a. Epidemiology and subtypes of school refusal
   b. Anne Marie Albano’s “prescriptive” CBT model of school refusal
   c. Assessment instruments
   d. Evidence-based treatment strategies
   e. Working with parents
   f. Potential pitfalls and how they can be avoided

XI. Becoming Exceptional – July 16, 2011
   a. Characteristics of exceptional therapists
   b. Factors associated with a positive response to treatment (i.e., predictors and moderators of change; mechanisms of change)
   c. Practical approaches to improving as a therapist and for "becoming exceptional"

XII. Summary & Synthesis – August 13, 2011
   a. Summarize and synthesize what we have learned over the course of the year
   b. Identify the essential components of effective treatments
   c. Discuss the characteristics of exceptional therapists and effective therapeutic relationships
Over the course of the year, participants will be asked to complete several tasks:

A. Read two books and prepare a brief (2-3 page) summary and critique of each of the following:


   and


   or


B. Review readings for each of the topics.

C. Prepare two case formulations and treatment plans (ACT format)

D. Complete a “final exam” (multiple choice + 1 short essay)