

Bethanna is a nonprofit social services agency that supports children and families during difficult life transitions. Bethanna's programs and services preserve, strengthen and sustain birth, foster and adoptive families through a system of quality care. Our agency offers community-based programs and services that focus on these primary goals: the safety, permanency and well-being of those we serve.

OUR MISSION

Bethanna is a Christian agency that provides the highest quality system of care to children and families in order to ensure safety, restore emotional wellness and build family stability.

In accordance with applicable civil rights laws and regulatory requirements, consumers have the right to be provided services at Bethanna and to be referred to services at other facilities without regard to race, color, religious creed, disability, ancestry, national origin, limited English proficiency, primary language, inability to communicate verbally, age or sex.

OUR CLINIC SERVES CONSUMERS AT TWO LOCATIONS

**Bucks and Montgomery Counties
and Northeast Philadelphia**
1030 Second Street Pike
Southampton, PA 18966
215.355.6500 • 800.989.1926

Philadelphia County
1212 Wood Street
Philadelphia, PA 19107
215.568.2435 • 800.285.2435

Hours of Operation
Monday - Saturday
9:00 am-9:00 pm

For more information, contact:

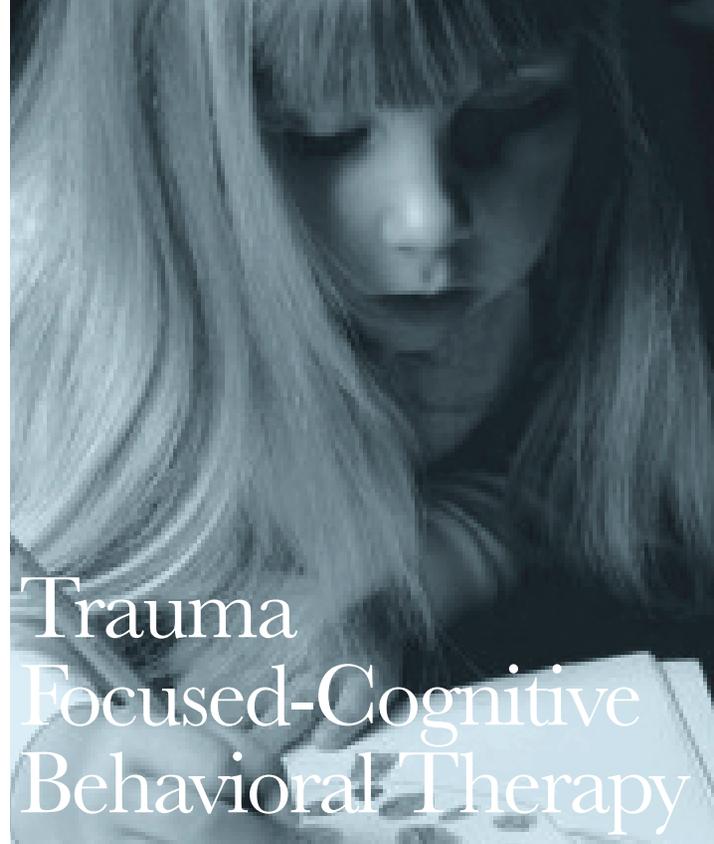
Community Treatment Services
215.355.6500, ext. 206
800.394.6500

A copy of the official registration and financial information of Bethanna may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 800.732.0999. Registration does not imply endorsement.



Bethanna

www.bethanna.org



Trauma
Focused-Cognitive
Behavioral Therapy

Bethanna

SERVING CHILDREN AND
FAMILIES SINCE 1934

WHAT IS TF-CBT?

Trauma Focused-Cognitive Behavioral Therapy (TF-CBT) is an evidence-based intervention designed to help children, youth, and their parents or caregivers overcome the negative effects of traumatic life events, such as domestic, school or community violence; unexpected death of a loved one; sexual violence or abuse; or exposure to disasters, terrorist attacks, or war trauma.

THE TF-CBT TREATMENT MODEL INTEGRATES:

- Trauma-sensitive interventions
- Cognitive-behavioral principles
- Attachment theory
- Developmental neurobiology theory
- Elements of family, humanistic, and empowerment therapies

THE FOCUS OF TREATMENT IS TO:

- Assist youth to develop coping strategies for traumatic stress reactions.
- Reduce symptoms of depression, anxiety, or acting out behavior which are common in children exposed to trauma.
- Increase parental knowledge and implementation of supportive behaviors related to the trauma event.
- Decrease youth's self-injurious and aggressive behaviors.
- Improve youth's problem-solving and safety skills.

SYMPTOMS OF TRAUMA

MAY INCLUDE:

- Inability or unwillingness to recall trauma details
- Difficulty stopping thoughts about the trauma
- Emotional and physical numbing
- Recalling physical sensations that occurred during the trauma
- Difficulty staying still or fidgeting
- Sleeping routine is disturbed (not wanting to sleep alone, nightmares, or waking in the middle of the night)
- Rapid changes in mood
- Difficulty concentrating
- Anxiety
- Low self-esteem
- Inability to trust others
- Drug use
- Desire to hurt oneself or others

TREATMENT APPROACH

- Children from ages 3-18 participate in a series of therapy sessions (approximately 12-16) to help them talk directly about their traumatic experiences in a supportive environment where they can become less fearful, less avoidant, and more able to tolerate trauma-related thoughts and feelings.
- This treatment model also teaches children how to examine their thoughts, feelings, and behaviors and how to change these in order to feel better.

- It also provides children with tools, such as relaxation and deep-breathing techniques, problem-solving, and safety education to help them manage situations in the future.
- A parent/caregiver treatment component is an integral part of this treatment model. Studies show that children whose parents participated in their treatment improve more rapidly. It parallels the interventions used with the child, so that the parents/caregivers are aware of the content covered with the child and are prepared to reinforce or discuss this material with the child between treatment sessions and after treatment has ended.

SESSIONS INCLUDE:

- Screening and assessment
- Individual sessions for the child or adolescent
- Individual sessions for parents
- Conjoint sessions between parent and child or adolescent

