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978-0-521-57195-1 - Psychotherapy for Children and Adolescents: Evidence-Based Treatments  
and Case Examples

John R. Weisz

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By

JOHN R. WEISZ



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*For Dawn, Alli, Danny, and Tammy,  
family treasures*

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## Preface

The practice of treating children and adolescents for emotional and behavioral problems is at least a century old. In its early years, at the turn of the twentieth century, youth treatment was a rarity, but in recent decades the practice has surged in scope and cost to become a major component of care for young people. Now, early in the twenty-first century, millions of girls and boys receive psychotherapy every year in countries and cultures around the world, and significant portions of many national budgets are devoted to the mental health care these young people receive. Youth psychotherapy is remarkably diverse in its forms and methods. Hundreds of schools of therapy are brought to bear by professionals in their work with young people, and many of these professionals are highly eclectic, drawing goals and methods from a broad array of sources and using their best judgment to help the youngsters they see.

The practice of testing the effects of youth psychotherapies, using clinical trials, is naturally much younger than the treatment tradition. And at any point in time, many more professionals are providing youth psychotherapy than conducting research to test it. However, like youth treatment, youth treatment research has surged in recent decades. Well over 1,500 studies of youth psychotherapy effects have been completed to date, and hundreds of these meet standards for inclusion in scientific reviews, including quantitative syntheses called meta-analyses. Emerging from this body of treatment outcome research is a growing number of specific treatments that have significant evidence in their support, replicated across studies. These evidence-based treatments reflect the interplay of clinical care and scientific scrutiny. They are treatments that have been tested with young people who have emotional or behavioral problems or disorders, and that have been shown to work. This book is about such treatments.

In what might be seen as an ideal world, the dedicated practitioners who care for children and the dedicated researchers who test that care would be first cousins, or at least close personal friends. And the work of

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these two groups would be complementary, fostering crosspollination. The work of practitioners would inform research, keeping researchers alert to treatments that are widely used and in need of testing, and to the realities of youth clinical care that should be reflected in their study designs. And the work of treatment researchers would be used by practitioners in selecting the strongest interventions, those that hold up best in controlled trials.

In the real world though, things haven't worked out quite this way. Instead, as in many fields that encompass both science and practice, youth treatment research and youth clinical practice have operated in rather insular fashion, developing quite different cultures and perspectives, and even different lexicons over the years. Beyond these differences, the findings of treatment outcome research have not always been disseminated in ways that reach the practice community. And the tested treatments have not always been described in ways that convey their essence to potential users. A recurring issue is that conditions arranged for some of the research are different enough from the conditions of practice that clinicians wonder about the transportability of tested treatments to the everyday clinical care they provide. Researchers, for their part, are sometimes frustrated by the slow pace of uptake and deployment of treatments they perceive as tested and ready for use. It is this hiatus between research and practice that this book is intended to address.

In this book, I examine evidence-based treatments for children and adolescents from the two perspectives I know best: researcher and clinician. For each treatment, I describe the clinical condition it addresses, its theoretical and conceptual underpinnings, and its procedures in sufficient detail to convey the primary elements and methods used in intervening. I illustrate each treatment with a case study to elaborate how the procedures would look when actually employed with a specific youngster. I also discuss strengths and limitations of each treatment from a clinical practice perspective, noting issues likely to arise for practitioners who consider using the treatment. From a research perspective, I summarize the outcome studies, review and critique the evidence bearing on each treatment, and highlight issues and questions for further study. Overall, the goal is to describe each treatment and its applications, together with a balanced analysis of the treatment's scientific standing and its potential for everyday clinical use.

The book should be useful to several audiences and for several purposes. For practitioners, the descriptions and illustrations of treatment procedures, and the discussions of clinical practice issues and potential, can help inform decisions about whether the treatments warrant use in their own work as therapists. Those in clinical practice careers, including program directors and administrators, who want treatment choices to be informed by the scientific evidence will find the reviews of outcome studies and critiques of the evidence base of each treatment relevant to their

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decision making. Treatment researchers should find these features useful as well, and the analyses of strengths and gaps in the evidence and questions for future study can add to the scientific dialectic that provokes advances in research design and quality. For investigators in training or in early career, the chapters illustrate several excellent models for how clinical scientists develop treatments, select participants, train therapists, and progress from study to study to refine treatment and enrich what is known about the treatments and their effects. Training directors and teachers in such professional traditions as clinical psychology, child and adolescent psychiatry, social work, counseling, and pediatrics will find that the book conveys not only an overview of evidence-based youth practice, but also specific information needed to guide decisions about which evidence-based treatments warrant incorporation into training, practicum, supervision, and instructional programs. Finally, concerned family members can find information here on treatments relevant to special young people in their lives, youths who face difficulties and need help. Judgments about what kind of treatment to seek for a family member may be guided by a number of important considerations, but certainly the kinds of descriptions and evidence provided in this book should enter into decisions about what kind of help to seek.

A book of this type is not completed without help and support from many sources. I owe more than I can say to my wife Jenny. Her loving support means so much, and her experiences in advocating for children in court keeps me mindful of the risks that make good mental health care for youth important. Our four children, who span the range from elementary school through adolescence and into young adulthood, are sources of great joy and inspiration, not to mention fresh information about real life along the developmental trajectory.

On the professional front, I am very grateful to Julia Hough of Cambridge University Press for her interest in the project, her very thoughtful feedback on a number of chapter drafts, and her patient guidance through this lengthy process. I also extend sincere thanks to the many experts in the treatments, problems, and disorders described in the book for taking time to prepare excellent feedback, sometimes in multiple waves, on the chapters relevant to their expertise. The experts – a Who's Who of evidence-based treatment – include Russell Barkley, Paula Barrett, Caryn Carlson, Patti Chamberlain, Bruce Chorpita, Andrea Chronis, Greg Clarke, Vanessa Cobham, Phillippe Cunningham, Mark Dadds, Sheila Eyberg, Eva Feindler, Marion Forgatch, Scott Henggeler, Hyman Hops, Alan Kazdin, Philip Kendall, Pete Lewinsohn, John Lochman, Peter Loft, Bob McMahon, Tom Ollendick, Gerald Patterson, Sonja Schoenwald, Michael Southam-Gerow, Ron Rapee, Paul Rohde, Melisa Rowland, Kevin Stark, and Carolyn Webster-Stratton. In addition, Stephen Shirk provided very thoughtful comments on the book as a whole, and Bahr Weiss offered valuable

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insights on important issues in the field. The feedback from all these experts helped immeasurably, and the process left me touched by the generosity of these fine colleagues, so busy but so willing to share their time and ideas.

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J.R.W.  
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