Modular cognitive-behavioral therapy for childhood anxiety disorders pdf



SAMSUDIN N. ABDULLAH, PhD, MOHAMAD T. SIMPAL, MAST & ARJEY B. MANGAKOY, 2020Read Full PDF PackageRead Full PDF Pac prevalence of mental disorders in U.S. adolescents: results from the National Comorbidity Survey Replication-Adolescent Supplement (NCS-A). J Am Acad Child Adolesc Psychiatry. 2010;49(10):980-9. I Am Acad Child Adolescent Supplement (NCS-A). J Am Acad Child Adolescents: results from the National Comorbidity Survey Replication-Adolescent Supplement (NCS-A). Association of School Psychologists, 2012. [Online]. Available: Available: Accessed 16 July 2021. Greenberg PE, et al. The economic burden of depression in the United States: how did it change between 1990 and 2000? J Clin Psychiatry. 2003;64(12):1465–75. PubMed Google Scholar Smyth JM, Arigo D. Recent evidence supports emotion-regulation interventions for improving health in at-risk and clinical populations. Curr Opin Psychiatry. 2009;22(2):205-10. PubMed Google Scholar Weisz JR, et al. 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The Facilitator contacts SPs to give background on CBT research and evidence; discusses common barriers to using CBT (e.g., administrator support, protected time), and works with SPs to begin setting measurable goals for CBT uptake. (2) Mentoring SPs through regularly scheduled calls designed to rally motivation and encourage strategic thinking. The SPs and the Facilitator hold regular calls (suggested weekly) to help develop rapport; discuss and prioritize anticipated and experienced barriers and facilitators to CBT delivery; the Facilitator provides SPs with guidance for overcoming specific barriers to CBT uptake (e.g., facilitating communication with school administrator, parents, or other stakeholder groups). As necessary, the Facilitator connects SPs with REP TA or (if appropriate) their assigned Coach. (3) Developing an action plan to mitigate or overcome barriers, including establishing and tracking key metrics for success (e.g., CBT delivery). (4) Leveraging influence by assisting SPs in discerning school, community, and administrative priorities, and encouraging SPs to communicate to stakeholders how CBT aligns with broader priorities. The Facilitator continues to work with SPs and also reaches out to administrators or other leaders to help identify school/community priorities, and help SPs align CBT use and goals with these existing values and priorities. The Facilitator also works with SPs to describe how CBT aligns with leadership priorities and adds value for students, administrators, and other school employees (e.g., instructional staff). (5) Ongoing marketing, wherein the Facilitator summarizes progress and develops plans for sustaining program delivery. The Facilitator helps SPs summarize achievements, progress, continued barriers, and alignment with other school priorities or initiatives, and also helps to develop sustainability plans (e.g., by showcasing CBT's added value).

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