Types of Therapies

In this section, you will find general information about:

- different types of therapies
- what types of challenges are best suited for each type of therapy
- how long each type of therapy usually takes

The list does not include all types of therapies for children and youth. You can visit this site for more information on which types of psychotherapy have evidence for specific mental health or substance use challenges. Some therapies do not yet have research evidence, but may be effective for your child and family. If you have questions about the type of therapy your child is receiving, please speak to your therapist.

Cognitive Behavioural Therapy - CBT

What is Cognitive Behavioural Therapy?

CBT is an evidence-based therapy for several disorders. It can help to reduce distress and improve your ability to function. CBT can be used with school-aged children and youth. If it is modified to have a stronger focus on behaviour, CBT can be used with children as young as 4.

CBT teaches you to examine and change the way you:

- think (cognitive) and
- act (behaviour),

in order to change how you feel (emotionally and physically)

The concept behind CBT is that our thoughts about a situation, how we feel, and how we behave are all inter-related. CBT helps children and youth become more aware of their thoughts, actions and feelings so they can view difficult situations more clearly and respond more effectively.

CBT also encourages a child or youth to practice more helpful behaviours in their day-to-day lives. They learn how to gradually face situations they fear rather than avoid them (in the case of anxiety) or to be more active (in the case of depression).

CBT is delivered in either individual or group format (see the section on group therapy for more information).

What types of challenges are best suited for CBT?

CBT is an effective treatment for a wide range of challenges, including:

- depression
- anxiety
- chronic pain
• eating disorders
• low self-esteem
• anger problems
• substance use problems
• obsessive compulsive disorder
• post-traumatic stress disorder and symptoms

CBT is especially effective in managing mild to moderate anxiety and depression. It is as effective (if not more) as treatment with medication alone. Children and youth experiencing anxiety and depression are less likely to relapse when treated with CBT.

How long will it take?
A child or youth usually attends between 8 and 20 treatment sessions with a therapist. They work together to understand and change patterns of thinking and behaving. The goal is to learn tools for managing situations and feelings that are challenging. Home practice between sessions is a key part of CBT. Once children learn new skills, have a chance to master them, and start to see some positive changes, they often stop therapy. Sometimes they need a few ‘booster sessions’ when new challenging situations arise.

Parents are involved in their child’s CBT either directly in the sessions or in learning about the child’s progress and therapy at the end of each session. They often coach their child at home to put new skills into practice. For children and youth with anxiety disorders and OCD, the therapist may also ask parents to practice allowing their child to face fears rather than avoid them. With youth, the amount of parental involvement depends on a number of factors.

Dialectical Behavioural Therapy - DBT

What is Dialectical Behavioural Therapy?
DBT is a type of cognitive-behavioural treatment. It usually involves an individual therapy session and a skills group session every week for at least 6 months.

The skills group focuses on how to:
• manage attention (mindfulness skills)
• manage and cope with emotions (emotional regulation skills)
• deal effectively with others (interpersonal skills)
• tolerate emotional distress (distress tolerance skills)

What types of challenges are best suited for DBT?
DBT has been adapted for the youth population and is an evidence-based treatment. It is usually recommended for those who have tried less intense therapies and are still having challenges.
DBT is especially effective for the following challenges and disorders:

- borderline personality disorder
- suicidal thinking or behaviour (suicide attempts)
- self-injury and other self-destructive behaviours
- anger and anger management
- problems with emotions (such as intense sadness or recurrent fear)
- impulsive behaviours that can be dangerous (such as reckless driving, recurrent unsafe sex, etc.)
- difficulty building and maintaining healthy relationships
- chronic feelings of emptiness
- problems with substance use
- eating disorders such as bingeing and purging

How long will it take?
This depends on the individual, but research shows that 6 months to a year of DBT treatment is most effective.

Interpersonal Therapy - IPT

What is interpersonal therapy?
IPT is a short-term treatment for youth with depression and interpersonal problems. It focuses on relationships, life transitions and how to improve the way you communicate and relate to others. IPT helps youth learn to identify emotions and the links between events and feelings. It shows those who are dealing with a loss or major life change like starting high school or losing a good friend how to build new skills and supports. With IPT, youth begin to see how the way they communicate can cause problems. They learn how to think through issues and express themselves more effectively.

IPT is an evidence-based treatment. It can be delivered in either individual or group format (see section on group therapy for more information). IPT can be combined with family therapy for younger teens.

What types of challenges are best suited for IPT?
IPT is used mainly as a treatment for depression. It can also help youth deal with specific issues, including grief, conflict, and with major changes at home, school, work and in their social life.

IPT can be modified for the treatment of:
- problems with substance use
- eating disorders such as bulimia and anorexia nervosa
How long will it take?
IPT usually lasts for 8 to 20 sessions, but this depends on the individual. Older youth normally meet with the therapist alone and parents are included in sessions at the start, middle and end of therapy. Research shows that follow up sessions (once every 1-2 months) will decrease chances of relapse.

Mindfulness-Based Therapies

What are Mindfulness-based therapies?
Mindfulness is paying attention in a particular way: on purpose and in the present moment. The goal of mindfulness is to focus less on reacting to something or someone and more on observing and accepting without judgement. It teaches you to be aware of your thoughts and feelings and to accept them, but not attach or react to them. This practice helps you to notice your automatic reaction and to change it to be more of a reflection.

Research shows mindfulness helps to:

- change negative behaviours
- manage difficult emotions
- reduce suffering
- improve self-awareness
- increase empathy

Mindfulness practices can be used with different types of therapies. For example, Mindfulness-Based Cognitive Therapy (MBCT) combines the ideas of cognitive therapy with the practice of mindfulness.

What types of challenges are best suited for mindfulness-based therapies?
Mindfulness therapies are effective treatments for:

- stress
- pain
- anxiety
- personality disorders (combined with other treatments)
- depression (combined with other treatments)

Evidence suggests that children who used mindfulness practices reported higher wellbeing and lower stress scores more often. Mindfulness practices can be helpful for everyone – visit our mindfulness section for more information, and mindfulness audio and video resources.
How long will it take?
This depends on the individual and their specific challenges. Mindfulness programs are often offered in group format, and home practice is highly encouraged.

Psychodynamic Therapy

What is Psychodynamic therapy?
This type of therapy focuses on how early childhood and relations with others can affect our development. It is based on the idea that the unconscious holds onto painful feelings and memories that are too difficult for the conscious mind to process. Many children develop defences such as denial to hide these memories and experiences from themselves. The aim of psychodynamic therapy is to bring the unconscious mind into consciousness. It helps a child or youth to experience and begin to understand their true, deep-rooted feelings in order to deal with them.

Psychodynamic therapy focuses on:
- increasing self awareness
- examining thoughts and feelings
- becoming more resilient
- being adaptable

The goal of therapy is to lessen the most obvious symptoms and help children and youth lead healthier lives.

What types of challenges are best suited for Psychodynamic therapy?
This therapy is effective for a wide range of mental health symptoms, including:
- depression
- anxiety
- panic
- physical symptoms that are caused by stress

With therapy, children and parents begin to understand and become comfortable with underlying feelings that can be confusing. The therapist talks to both the parents and their child to gain more understanding about the issues, and then adapts the treatment to the individual. Play is often part of the therapy sessions for younger children. Sometimes the therapist will combine individual therapy with group or family therapy.

How long will it take?
This depends on the individual, but evidence shows that children and youth often benefit from a minimum of 12 sessions up to one year of psychodynamic therapy.
Group Therapy

What is group therapy?
In group therapy, a small group of patients or families meet regularly with the therapist. There are many types of group therapy. Some groups are mostly educational and some focus on practice and do little talking about individual problems. Other groups encourage members to discuss issues and offer helpful feedback to each other with guidance from the therapist. All personal information shared in groups is confidential.

What types of challenges are best suited for group therapy?
Group therapy is effective for a wide range of mental health concerns. Many people are reluctant to try group treatment, but most become comfortable with the group quite quickly. Some members do not speak often but learn skills by just being there and listening. Families often find group treatment gives them a lot of support. They appreciate the chance to discuss their concerns with others in similar situations.

How long will it take?
This depends on the group.

Emotion-Focused Therapy - EFT

What is Emotion-Focused Therapy?
EFT focuses on emotions and the way we deal with them. It also puts emphasis on the self and the importance of past relationships. EFT is based on the idea that many mental and physical health concerns are caused by avoiding emotions and pretending that everything is okay, or by not getting our emotional needs met. EFT helps individuals resolve unpleasant emotions by working with these emotions instead of suppressing them. It uses the unpleasant emotions as a source of information. EFT focuses on how you experience problems and what they trigger you to do as a way of coping with your emotions.

EFT is offered in individual, couples or family format. Emotion Focused Family Therapy (EFFT) was first developed for eating disorders. Recently the use of EFFT has expanded to involve other treatment areas.

In EFFT, parents learn how to be the emotion coach and recovery coach for their child. EFFT sees a child as a child, no matter the age. The bond between parent and child is a key part of the therapy. EFFT explores any fears or blocks that stop parents from supporting their child. It helps the whole family to believe they can reach their goal. It also works with miscues such as, “I don’t want my
parents involved in my treatment,” which can often mean “I want my parents involved in my treatment, but I’m afraid that it won’t go well for any of us.”

**What types of challenges are best suited for EFT?**

EFT is especially effective for the following types of challenges and disorders:

- moderate depression
- the effects of childhood deprivation or abuse
- interpersonal problems
- eating disorders
- couples and relationship difficulties

**How long will it take?**

This depends on the individual, but usually EFT lasts for 16 -20 weeks.

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**Family Therapy**

**What is family therapy?**

In family therapy, a therapist may work with the family as a group and sometimes with subgroups or individuals. Family therapists are very interested in the family’s goals and strengths. They see the family as key to a child’s recovery from mental health, substance use, and behavioural problems. Family therapy puts emphasis on the importance of communication and understanding. In therapy, families explore and identify positive patterns and behaviours, and those which may contribute to distress.

Family therapy often takes place alongside other therapy for an individual family member.

**What types of challenges are best suited for family therapy?**

Family therapy is especially effective for individuals with:

- eating disorders
- problems with substance use
- problems with anger or oppositional behaviours
- anxiety and OCD
- children and youth with medical illness

**How long will it take?**

This depends on the individual. Family therapy usually lasts for 8-20 sessions.
Play Therapy

What is play therapy?
Play therapy gives children a caring and confidential environment to play. It places as few limits as possible, but as many as needed for children to be safe, both physically and emotionally. Through play therapy, a child or youth may be able to express their experiences and feelings through play, deal with emotional problems, increase self-awareness, manage behaviour, develop social skills, cope with symptoms of stress and trauma, and restore a sense of well-being. Play therapists may work one on one with a child or with small groups.

Play therapy is also known as therapeutic play and can include:
- art therapy
- dance
- storytelling
- drama (role play)
- creative visualization,
- music

For each of these types of therapy, the focus is on personal expression so you don’t need to have previous experience to benefit.

What types of challenges are best suited for play therapy?
Play therapy is usually best for children aged 2-11. It can be especially helpful for younger children and for those who have a hard time talking about their thoughts and feelings.

How long will it take?
This depends on the individual. Sessions are every week or two and usually last for 30-45 minutes. Parents often meet with the play therapist at the start of a session to share information and at the end of a session (or group of sessions) to learn more about their child.

Psychotherapy for Parents and Young Children

What is Psychotherapy for Parents and Young Children?
There are many different types of psychotherapy for parents and young children. These therapies all focus on strengthening the bond between parent and child. Some begin as early as the first year of life and others are more suitable for preschool and early school-age children.

Examples of psychotherapy for parents and young children include Parent-Child Interaction Therapy (PCIT), Circle of Security Parenting, Parent-Child Psychotherapy, Modified Interaction Guidance (MIG), and Child-Parent Relationship Therapy.
What types of challenges are best suited for Psychotherapy for Parents and Young Children?
These types of therapies can be helpful in preventing and treating behaviour problems in young children and can also help young children deal with anxiety, trauma and other challenges.

How long will it take?
This depends on the individual, and the type of therapy.
Types of Therapies: Frequently Asked Questions

Here are some general FAQs with answers. If you have specific questions about the therapy prescribed to you or your child, ask the therapist you are seeing.

1.) What is psychotherapy (si ko ther’ uh pee)?

It is the name for a group of therapies that help you make changes. This is most commonly “talk therapy”, which is based on verbal communication. Some examples are CBT, DBT, IPT and family therapy. It can also include non-verbal means of expression including art, play, mindfulness, and movement. Psychotherapy can be effective if you are having difficulties with your feelings, thoughts, or behaviour. In therapy, children and youth may be encouraged to talk, play, draw, build and pretend, as ways to share feelings and work out problems. Psychotherapy can be used with individuals, families, or groups.

2.) How effective is psychotherapy?

The number of evidence-based psychotherapies that are available is increasing. This website explains which types have evidence for specific problems: [http://effectivechildtherapy.org/content/ebp-options-specific-disorders](http://effectivechildtherapy.org/content/ebp-options-specific-disorders).

There is evidence that CBT, DBT, IPT and family therapy are effective for a wide range of mental health challenges and disorders in children, youth, and adults. Other types of therapy have less research behind them but may still be helpful. For example, art therapy can be effective for children who have great difficulty talking about their problems. It is also possible to adapt an evidence-based therapy for a particular child.

3.) What is the difference between Psychologists, Psychiatrists and Counsellors?

**Psychologists** (si col’ uh gists) have advanced training at the doctoral level. They study how we think, feel and behave, and use this knowledge to help people understand and change their thoughts, feelings, or behaviour. They can assess, diagnose and treat mental health conditions in children and youth. They may have training in the uses of medication to treat mental illness, but they do not prescribe medication.

**Psychiatrists** (si ki’ uh trists) are medical doctors who have specialized in mental health. They can prescribe medication to help people manage their mental disorders. Many psychiatrists also do psychotherapy. There are a limited number of child and youth psychiatrists in BC, and so other mental health providers deliver most of psychotherapy. The Medical Services Plan pays for visits to a psychiatrist and so there is no charge to patients.

**Counsellors** have a range of backgrounds. They may have a bachelor’s, master’s or doctoral level degree. People can say they are "counsellors" or "therapists," but they may or may not have training...
in the assessment or treatment of mental health challenges. Counsellors may be very knowledgeable, but law doesn’t allow them to diagnose mental health conditions.

4.) Our doctor/psychologist suggested group therapy for my child, but my child doesn't like groups. Should we still go?

Group therapy is effective for many types of mental health challenges. Often children and youth are hesitant about meeting in a group setting. Try to encourage your child to go to the first session and just listen. Explain that they don’t have to share and be an active member of the group until they feel comfortable and safe there. Children and youth often end up really enjoying the process of connecting with peers and meeting others with similar struggles.

5.) Will I (parent/caregiver) be involved in the therapy?

That depends on the type of therapy. Parents can be involved in many ways. It is always important for them to listen and be supportive. If you have concerns about not being involved enough or being too involved, bring this up with the therapist.

6.) How often and how long should I expect therapy to last? How soon can we expect to see some changes?

We would all like to have an answer for these questions but everybody is unique. Each therapy is different and is adapted to help the individual and their family. If you have tried one type of therapy and have not seen any progress after 3 or 4 months, you might want to see if another type of therapy helps. Always talk with the therapist about your concerns, and include your child’s opinion on whether therapy is helpful. Sometimes changes within your child are not obvious to others, even to parents.

7.) What if my child doesn't connect with their therapist?

It is very important to find the right therapist. The relationship between the therapist and client is one of the most important predictors of success. You can encourage your child to try a few sessions before deciding if the fit is right or not. Youth and/or parents should discuss concerns about the therapy with the therapist as a first step. If it really doesn’t seem like it will work out, then look for another option, but don’t give up on therapy.

8.) How do we access psychotherapy? How much does therapy cost?

There are many ways to access psychotherapy in BC – some charge a fee, and others are free of charge.
Private psychologists or counsellors charge a fee for their services. Your extended health plan or employee assistance program may pay the fees. Some therapists offer lower or subsidized rates. To find a private psychologist or counsellor, visit http://www.psychologists.bc.ca/ or http://www.bc-counsellors.org.

Free mental health treatment is available through Child and Youth Mental Health. They use a team approach and offer a variety of services. The team includes social workers, psychologists, nurses, clinicians and outreach workers. It is a part of the Ministry of Children and Family Development in BC.

BC Children’s Hospital also provides mental health services* to children and youth from across BC. These services include:
- psychiatric treatment
- short-term individual, family, and group treatment
- medication review.

*By referral only (except for the Child and Adolescent Psychiatry Emergency Unit). For more information visit: http://www.bcchildrens.ca/our-services/mental-health-services.

Many community-based organizations also offer free or low-cost counselling, peer support, or support groups.

Contact us at the Kelty Mental Health Resource Centre for more information about any of the above services. We also have information about other options or supports that may be available to you and your family.

9.) My child doesn't want to miss school. Can we still do therapy?

Some therapists can work around your child’s schedule and offer therapy after school, evenings and weekends. If the problem is severe, your family may decide to put therapy first for a time. Discuss these concerns with the therapist and school if needed. Remember that learning and progress at school depend on good mental health.

10.) My child is the one struggling, why has our health care professional suggested family therapy or going to a parent group?

Family therapy means that other family members besides your child will be involved in the therapy process. The family’s strengths can be used to help your child handle problems. Family therapy is a very active type of therapy. Members of the family are often asked to be involved both inside and
outside of sessions. In some cases, parents can make changes that have a positive effect on a child’s struggle even when a child is unwilling to attend therapy.

Parent groups can help parents cope with the challenges they are experiencing. It can be very helpful to hear other stories, ask questions and be part of a group that has open and honest communication.

11.) How do I make sure my child's therapist gets the full story of what's going on?

Therapists are skilled, highly educated and experienced. They usually specialize in specific areas of mental health and in working with parents, children and youth. If you aren’t sure the therapist is getting the full story, don’t hesitate to ask. The therapist should be available to talk to you and to answer your questions.

It is very important to youth that their relationship with the therapist is confidential. That is also the law, except for emergencies. The therapist should answer any questions the youth or family have about information sharing. Except in rare cases, youth should be told if parents or others share any information about them with the therapist.

12.) Can I learn some of the skills learned in therapy to support my child?

Yes! Absolutely! Family members often learn skills to support their loved ones when they attend therapy together. These skills can be used at home, and long after therapy has ended. In most cases, it is extremely helpful for parents to learn what their child is learning. This is why many types of therapy include parents in individual sessions or parent groups.

13.) My child is already seeing their school counsellor. Do they really need another therapist?

It is common for children to see their school counsellor before referral to a mental health service. In some cases, another therapy will replace the therapy with the school counsellor. In other cases, the school counsellor will provide support at school while the child participates in other therapy. Sometimes, the school counsellor is the best person to continue to be the child’s primary therapist.
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Ashley Miller, MDCM, FRCPC
Child and Adolescent Psychiatrist, Teaching and Consultation Clinic Director, BCCH
Psychotherapy Program Clinical Assistant Professor, University of British Columbia

Kristen Catton, MSW, RSW, RCC
Professional Practice Leader, Social Work Department,
BC Children’s Hospital, BC Women’s Hospital & Health Centre
Clinical Instructor, Department of Psychiatry, University of British Columbia