

Violence Prevention Focused on Children and Youth: Reducing Psychological Harm from Traumatic Events

Summary Evidence Table

Author & year	Design suitability	Quality of execution	Location	Study period	Population	Intervention		Sample selection	Effect measure calculated from study findings	Adjusted g	
						Frequency and duration	Personnel administering	Follow-up			Other components (study arms, if any) Comparison
Studies measuring effect of Group Cognitive Behavior Therapy in children/adolescents											
Goenjian (1997)	Greatest	Fair	Gumri, Armenia	Recruitment in 1990, 1.5 yrs after earthquake	All participants in selected schools were evaluated for PTSD; all had residual symptoms of distress after earthquake Mean age of adolescents: 13.2 yr; ethnicity: Armenian Type of trauma: natural disaster	6 sessions over 6 week time frame Four sessions were within a group and lasted 1/2 hour. Other two sessions were individual and lasted 1-hour each Mental health professionals from US	Pre-test assessments occurred 1.5 yrs after earthquake, post test assessment occurred immediately after intervention and follow up occurred 3 yrs after earthquake	Control group received no treatment	Convenience Comparison with 2 other schools not participating in intervention Ipre: n = 35 Cpre: n = 29 Ipost: n = 35 Cpost: n = 29	Child PTSD Reaction Index Ipre/post (boys): 41.6/30.4 Cpre/post (boys): 38.5/40.9 Ipre/post (girls): 47.1/33.1 Cpre/post (girls): 42.7/51.1 Depression Self-rating Scale Ipre/post (boys): 15.5/13.0 Cpre/post (boys): 12.7/17.7 Ipre/post (girls): 17.4/17.4 Cpre/post (girls): 16.4/21.3	-1.15 -0.86
Ronan (1999)	Greatest	Fair	New Zealand	Recruitment in mid-1990s, 1 month after Mount Ruapehu erupted	Our review focused only on the children who exhibited PTSD symptoms at pretest in this investigation For entire sample: Mean age of children: 10.50 yrs (SD: 1.54). Race/ethnicity: 70 White (European descent) (63%), 12 Maori (11%), 6 Asian (5%), 21 Maori/European (19%), 2 Asian/Maori/Pacific Islander (2%), 1 Asian/Pacific Islander (0.9%) Type of trauma: natural disaster	1 session lasting 1 hour Not specified who administered	Post-test occurred immediately after intervention, along with a 4 month follow up	Control group received an exposure and normalizing condition. (one 1-hr session)	Convenience. Random assignment at school level Ipre: n = 38 Cpre: n = 31 Ipost: n = 38 Cpost: n = 31	Reaction Index (measures PTSD symptoms) Ipre/post: 14.6/11.9 Cpre/post: 17.6/13.4 Coping Questionnaire (anxiety measure) Ipre/post: 18.7/19.5 Cpre/post: 16.9/17.5	0.10 0.12

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Pfeffer (2002)	New York City and Westchester County	Ten 1.5 hours group sessions weekly	Pre and post assessments occurred approximately 12 weeks apart	Control group received no treatment by study investigators, "could receive other interventions but participated in the research assessments"	Convenience Random assignment	Revised Children's Manifest Anxiety Scale (RCMAS) Ipre/post: 49.3/39.6 Cpre/post: 52.6/56.5	-1.25	
Greatest	1996–2000	Led by a trained master's level psychologist			Ipre: n = 39 Cpre: n = 36	Children's Depression Inventory (CDI) Ipre/post: 46.5/44.1 Cpre/post: 53.7/53.9	-0.38	
Fair	Children bereaved by suicide of relative. Families and children identified from medical examiners' lists of consecutive suicide victims from January 1996 to November 1999 Age range: 6–15 yrs. Race/ethnicity: 84% White, 12% African American, 8% Hispanic Type of trauma: suicide of family member				Ipost: n = 32 Cpost: n = 9	Childhood Posttraumatic Stress Reaction Index (CPTSRI) Ipre/post: 25.1/19.6 Cpre/post: 22.1/17.8	-0.10	
Berliner (1996)	Unspecified "major metropolitan area"	8 sessions over 10 week period	Follow up occurred 2 years after intervention	Control group received standard care	Convenience Random assignment	Revised Children's Manifest Anxiety Scale (RCMAS) inventory of anxiety symptoms Ipre/fu: 14.1/9.5 Cpre/ fu: 14.5/12.4	-0.33	
Greatest	Study dates not specified	Led by clinical social workers			n baseline = 154 Ipost: n = 29 Cpost: n = 23	Children's Depression Inventory (CDI) Ipre/ fu: 9.7/6.7 Cpre/ fu: 10.1/8.0	-0.14	
Good	Sexually abused children referred by parents, child protective services, justice system, health and mental health providers Age range: 4–13 yrs Race/ethnicity: Treatment: 73% White, 8% African-American, 8% Hispanic, 10% Other; Control: 75% White, 16% African-American, 3% Hispanic, 6% Other Type of trauma: sexual abuse					CBCL Externalizing Ipre/ fu: 18.2/13.5 Cpre/ fu: 15.0/11.6	-0.11	
Deblinger (2001)	New Jersey	11 weeks of therapy, 1.75 hrs each for parent's group and children's group sessions. Joint additional 15 minute session	Follow up occurred 3 months after group sessions ended	Control group received supportive therapy	Convenience Randomized at group level	Kiddie Schedule for Affective Disorders and Schizophrenia for School Age Children-Epidemiologic version (K-SADS-E) Ipre/ fu: 14.4/7.8 Cpre/ fu: 14.0/5.2	0.04	
Greatest	Study dates not specified	Therapists received training and supervision in both group formats; compliance with adhering to each treatment modality was monitored			n baseline = 54 Ipost: n = 21 Cpost: n = 23			
Good	Sexually abused children and their non-offending mothers who were referred to the Regional Child Abuse Diagnostic and Treatment Center Age range 2–8 years (mean: 5.45, SD: 1.5), race/ethnicity: 64% White, 21% African American, 2% Hispanic, 6% other ethnic origin Type of trauma: sexual abuse							

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Ahrens (2002)	Topeka, KS	Eight 60-minute sessions over 8 week period.	Follow up occurred 4 weeks after treatment ended; 12 weeks after pre-test	Wait-list control group	Convenience	Beck Depression Inventory (BDI)		
Greatest	Study dates not specified				Randomly assigned at individual level	lpre/ fu: 15.3/6.9 Cpre/ fu: 18.5/18.0		
Good	Incarcerated youth who met criteria for PTSD. Many youth had some form of trauma history Age range 15–18 years (mean: 16.4 yrs), race/ethnicity: 61% White; 26% African American; 5% Hispanic; 5% Native American; 3% Other Type of trauma: community trauma/mixed trauma	Conducted by female doctoral candidate and female psychologist			lpre: n = 19 Cpre: n = 19 lpost: n = 19 Cpost: n = 19	PTSD Symptom Scale Self-Report (PSS-SR) lpre/ fu: 16.9/7.8 Cpre/ fu: 19.4/20.4	-1.14 -0.96	
Kataoka (2003)	Los Angeles Unified School District	Eight sessions over 8 week period. Each session lasted length of one school period.	Follow up occurred approximately 3 months after baseline	Wait-list control group	Convenience	Children's Depression Inventory (CDI)		
Greatest	January–June 2000				Randomized at individual level, however some individual assigned to intervention group non-randomly	lpre/ fu: 23/ 18 Cpre/ fu: 24/ 23	-0.33	
Fair	Our review focused only on the children who exhibited PTSD symptoms at pretest in this investigation. Latino immigrant children in grades 3–8 in participating schools, exhibiting PTSD and depression symptoms and had been exposed to community violence. Mean age: 11.4 years (SD: 1.7); race/ethnicity: 57% born in Mexico Type of trauma: community trauma/mixed trauma	Clinicians delivering intervention received 16 hrs of training, and 2 hrs/week ongoing supervision. Followed detailed treatment manual			lpre: n = 182 Cpre: n = 47 lpost: n = 152 Cpost: n = 46	Child PTSD Symptom Scale (CPSS) lpre/ fu: 20/ 13 Cpre/ fu: 19/ 16	-0.38	
Stein (2003)	East Los Angeles	10 sessions over 10 week period, sessions lasted one class period.	3 month follow-up obtained at completion of therapy	Wait-list control group	Convenience	Child PTSD Symptom Scale		
Greatest	Late 2001–early 2002				Randomized at individual level	lpre/ fu: 24.4/8.9 Cpre/ fu: 23.5/15.5	-1.0	
Fair	6 th graders who reported exposure to violence and clinical levels of PTSD symptoms Mean age: 11.0 years, (SD: 0.3); race/ethnicity: Primarily Latino. Type of trauma: community trauma/mixed trauma	Conducted by trained school mental health clinicians			lpre: n = 61 Cpre: n = 65 lpost: n = 54 Cpost: n = 63	Child Depression Inventory lpre/ fu: 17.6/9.4 Cpre/ fu: 16.7/12.7	-0.46	

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Ehnholt (2005)	South and North London	6 group sessions over 6 week period, sessions lasted 1-hour during class time	Pre and post assessments occurred. Post assessment occurred after post treatment for the intervention group and at the end of the intervention-free waiting period for the control group	Wait-list control group	Convenience	Revised Impact of Event Scale (R-IES)		
Greatest	Study dates not specified	Conducted by clinical psychology trainee			Group allocation was not random, based on students' availability.	I pre (SD)/post (SD): 39.80 (8.40)/33.80 (9.71) C pre (SD)/post (SD): 38.55 (8.37)/42.18 (9.38)	-1.02	
Fair	Teachers referred refugee or asylum-seeking students to the study. I mean age: 12.47 years, C mean age: 13.46 years, Range: 11–15 years old; nationality: Kosovo 42.30%, Sierra Leone 38.46%, Turkey 11.53%, Afghanistan 3.85%, Somalia 3.85%				Ipre: n = 15 Cpre: n = 11 Ipost: n = 15 Cpost: n = 11	Birleson Depression Self-Rating Scale (DSRS) Ipre (SD)/post (SD): 12.33 (4.70)/11.67 (3.62) Cpre (SD)/post (SD): 12.00 (5.37)/13.00 (6.57)	-0.33	
	Type of trauma: war					Children's Manifest Anxiety Scale (RCMAS) Ipre (SD)/post (SD): 16.87 (7.22)/14.67 (7.12) Cpre (SD)/post (SD): 16.18 (6.57)/18.91 (6.04)	-0.75	
Kazak (2004)	Children's Hospital of Philadelphia, PA	4 group sessions over 1-day	Pre and post assessments occurred. Post assessment completed 3 to 5 months after the intervention	Wait-list control group	Convenience	Post-Traumatic Stress Disorder Reaction Index		
Greatest	Study dates not specified	Conducted by psychologists, psychology postdoctoral fellows, psychology graduate students and interns, nurses, and social workers			Randomized clinical trial	Ipre (CI)/post: 13.07 (10.84–15.05)/8.84 Cpre (CI)/post: 13.74 (10.86–16.97)/10.72	Data imputed, numerical values not calculated.	
Good	Childhood cancer survivors age 11 through 19 years, who had completed treatment 1–10 years previously, who were on the oncology tumor registry Mean age: 14.32 years, Range: 10.8 to 19.28 years; race/ethnicity: White 85%, Black 9%, Hispanic 5%, Asian 1%				Ipre: n = 76 Cpre: n = 74 Ipost: n = 47 Cpost: n = 64			
	Type of trauma: childhood cancer							

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Studies measuring effect of Individual Cognitive Behavior Therapy in children/adolescents												
Barbe (2004)	Greatest	Fair	Pittsburgh, PA	Sessions occurred from 1991–1995	Adolescents were recruited from outpatient clinic or who answered an advertisement and met diagnostic criteria for major depression met inclusion criteria. Our review focused on the adolescents with a lifetime history of sexual abuse. Mean age: 15.7 (SD: 1.4); Race/ethnicity: 60% White / 40% not reported. Type of trauma: sexual abuse	12–16 sessions of treatment delivered over 12–16 weeks "Experienced therapists" with roughly an average of 9 years experience	Assessments taken at baseline, 6 weeks, post-treatment, 3, 6, 9, 12, and 24 months after treatment. (Our review used baseline and post-treatment assessments)	Nondirective Supportive Therapy	Convenience	Randomized control trial	Presence of DSM-III-R major depression (assessed using the Schedule for Affective Disorders and Schizophrenia for School-Age Children, Present Episode and Epidemiologic versions along with self-reported depression using Beck Depression Inventory (BDI)) I pre/post: 5 (100%)/ 2 (40%) C pre/post: 4 (100%)/ 2 (50%)	(Relative change) –0.2
Celano (1996)	Greatest	Good	Atlanta, GA	Study dates not specified	Participants were recruited from the pediatric emergency clinic of a large, public hospital (66%), the local statutory child protection agencies (28%) and victim's assistance programs of the court system (7%). The participants all had experienced contact sexual abuse within the past 3 year period. Age range: 8 – 13 years, mean age: 10.5 years. Race/Ethnicity: African-American 75%; Caucasian 22%, Hispanic 3%. Type of trauma: sexual abuse	Eight, 1 hour sessions over 8 week period Therapists were 5 professional clinicians and 10 trainees, all were provided with additional training and supervision in the area of child sexual abuse; 3 hour training, weekly supervision, treatment manual provided outlining theoretical rational and specific treatment activities	Assessments taken at baseline and post-treatment	Treatment as usual (supportive, unstructured psychotherapy)	Convenience	Randomized control trial	Child Behavior Checklist (PTSD) Ipre/post: 6.6/ 4.8 Cpre/post: 8.5/5.6 Child Behavior Checklist (Externalizing) Ipre/post: 55.1/51.2 Cpre/post: 66.2/58.6 Child Behavior Checklist (Internalizing) Ipre/post: 56.2/53.2 Cpre/post: 62.7/52.3	0.24 0.52 0.69

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Cohen (1996, 1997)	Pittsburgh, PA	Received 12, 1.5 hr treatment sessions; Duration 12–16 weeks	Assessments taken at pre, post, 6 mos and 12 mos	Non-directive supportive therapy	Convenience	Child Behavior Checklist (Externalizing)		
Greatest	Study dates not specified				Randomized control trial.	lpre/12 mos: 64.7/53.6 Cpre/12 mos: 62.6/59.8	–0.73	
Good	Participants were referred from regional rape crisis centers, Child Protective Services, pediatricians, psychologist, community mental health agencies, county and municipal police departments, and from the judicial system. Child had to have experienced some form of sexual abuse (anal, genital, oral, breast contact), with most recent episode occurring no more than 6 months before referral to the study Age: Mean age: 4.68 yrs; Range: 2–7 yrs; Race/Ethnicity: 54% Caucasian, 42% African-American, 4% other Type of trauma: sexual abuse	Treatment provided by master's level clinicians. Protocol manual-based. Therapists extensively trained, supervision provided			lpost: n = 28 Cpost: n = 15	Child Behavior Checklist (Internalizing) lpre/12 mos: 64.8/52.9 Cpre/12 mos: 62.7/57.5	–0.59	
Cohen (1998, 2005)	Pittsburgh, PA	12 sessions over a 12-week period, 18 total hours of therapeutic intervention	Assessments taken at pre, post, 6 mos and 12 mos	Non-directive supportive therapy	Convenience	Child Behavior Checklist (Externalizing)		
Greatest	Study dates not specified				Randomized control trial	lpre/12 mos: 57.6/55.9 Cpre/12 mos: 56.2/55.4	–0.06	
Fair	Participants were referred from a variety of sources, including victim advocacy programs, Child Protective Services, police, juvenile and family court, private practitioners, and other mental health providers. Trauma was contact sexual abuse Mean age: 11 yrs; age range 7–15 yrs; Race/Ethnicity: 59% Caucasian; 37% African American, 2% Hispanic, 2% biracial Type of trauma: sexual abuse	Master's level social workers with experience working with parents and child sexual abuse programs administered therapy			lpre: n = 30 Cpre: n = 23 lpost: n = 19 Cpost: n = 16	Child Behavior Checklist (Internalizing) lpre/12 mos: 56.2/52.5 Cpre/12 mos: 57/54.4	–0.09	
						Child Depression Inventory lpre/12 mos: 12.4/8.9 Cpre/12 mos: 11.7/10.2	–0.29	
						Trauma Symptom Checklist for Children (TSC-C) (PTSD) Pre/12 mos lpre/post: 10.6/7.2 Cpre/post: 10.8/9.6	–0.46	
						State-Trait Anxiety Inventory for Children for anxiety Pre/12 mos lpre/post: 35.3/30.7 Cpre/post: 34.5/32.4	–0.34	

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Cohen 2004 Greatest Good	Location not specified Study dates not specified Sexually abused children were recruited from two sites. Both sites are academically affiliated outpatient clinical treatment programs for abused/traumatized children. Referral sources included CPS, police, victim advocacy centers and child advocacy centers, pediatric care providers, mental health care providers, and self-referrals Age: Range 8–14 yr; Mean: 10.76 yr; Race/Ethnicity: White 60%; African American 28%; Hispanic American 4%; Biracial 7%; Other 1% Type of trauma: sexual abuse	12 weekly individual sessions lasting 90 minutes Therapists with professional training (i.e., psychologists, social workers) administered	Assessments taken pre and post treatment	Child-centered therapy	Convenience Randomized control trial Ipre: n = 114 Cpre: n = 115 Ipost: n = 89 Cpost: n = 91	Child Behavior Checklist (Externalizing) Ipre/post: 15.6/11.1 Cpre/post: 17.2/13.8 Child Depression Inventory Ipre/post: 9.9/5.7 Cpre/post: 12.1/8.8 State-Trait Anxiety Inventory for Children for anxiety Ipre/post: 30.5/26.2 Cpre/post: 31.5/27.8	–0.13 –0.13 –0.09
Deblinger (1996, 1999) Greatest Good	Location not specified Study dates not specified Participating families recruited following a forensic medical examination conducted at the Center for Children's Support. Representatives from the Division of Youth and Family Services and the prosecutor's office were also encouraged to refer non-offending parents and sexually abused children Our review focused on the child-only treatment Age: Mean: 9.84 years (SE: 2.01); Range 7– 13 yrs; Race/Ethnicity: 72% Caucasian, 20% African American, 6% Hispanic, 2% other ethnic origin Type of trauma: sexual abuse	12 weekly 45-minute treatment sessions Mental health therapists trained in experimental cognitive behavioral interventions administered	Assessments taken at pre, post, 3 mos, 6 mos, 12 mos, and 24 mos	Comparison received Standard Community Care	Convenience Randomized control trial Ipre: n = 25 Cpre: n = 25 Ipost: n = 24 Cpost: n = 22	Child Behavior Checklist (Externalizing) Ipre/24 mos: 18.8/12.3 Cpre/24 mos: 14.9/19.2 Child Depression Inventory Ipre/24 mos: 9.8/5.3 Cpre/24 mos: 11.9/8.1 State-Trait Anxiety Inventory for Children for anxiety Ipre/24 mos: 28.4/26.2 Cpre/24 mos: 31.1/29.5 Schedule for Affective Disorders and Schizophrenia for School-Age Children (S-SADS-E) (PTSD) Pre/24 mos Ipre/24 mos: 8.9/3.0 Cpre/24 mos: 9.8/4.4	–1.03 –0.18 –0.27 –0.16

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King (2000)	Australia	20 weekly 50 minute sessions in child only CBT	Assessments at pre, post, and 12 weeks	Wait-list control	Convenience	PTSD section of ADIS Ipre/12 weeks : 13.3/8.7 Cpre/12 weeks: 12.8/10.9	-0.86	
Greatest	Study dates not specified				Randomized control trial			
Good	Sexually abused children were referred from sexual assault centers, the Department of Health and Community Services, mental health professionals, medical practitioners and school authorities Our review focused on the child only treatment Age: Mean 11.5 years; range: 5–17 years; Race/Ethnicity: Not discussed Type of trauma: sexual abuse	Registered psychologists administered			Ipre: n = 24 Cpre: n = 12 Ipost: n = 9 Cpost: n = 10	Revised Children's Manifest Anxiety Scale (RCMAS) Ipre/12 weeks: 55.9/46.0 Cpre/12 weeks: 156.7/55.1	-0.56	
						Child Depression Inventory Ipre/12 weeks: 16.8/11.2 Cpre/12 weeks: 17.3/13.8	-0.22	
						Child Behavior Checklist (Internalizing) Ipre/12 weeks: 72.3/63.4 Cpre/12 weeks: 68.9/66.2	-0.58	
						Child Behavior Checklist (Externalizing) Ipre/12 weeks : 67.2/60.6 Cpre/12 weeks: 64.6/65.4	-0.61	
Kolko (1996)	Pittsburgh, PA	At least 12 1-hour weekly clinic sessions within a 16 week period	Assessments at pre, post, 3 mos, and 12 mos	Comparison group: Routine Community Services	Convenience	Child Behavior Checklist (Externalizing) Ipre/12 mos: 65.3/60.7 Cpre/12 mos: 63.2/62.7	-0.27	
Greatest	Study dates not specified				Randomization of part of sample			
Good	Physically abused children referred from child protective services, agency referral, or parental self-referral Mean age: 8.6 years (SD: 2.2); Race/Ethnicity: African-American 47%, Caucasian 47%, Biracial 6% Type of trauma: physical abuse	Administered by 6 female clinicians, all had prior specialty training and experience			Ipre: n = 25 Cpre: n = 12 Ipost: n = 20 Cpost: n = 10	Child Depression Inventory Ipre/12 mos: 8.8/5.8 Cpre/12 mos: 13.4/9.1	0.13	

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Lange (2001)	The Netherlands	10 writing sessions, two times per week over 5 weeks, 45 minutes each	Assessments at pre/post only	Wait-list control	Convenience	Symptom Checklist (SCL)-90 depression subscale	-1.42	
Greatest	Study dates not specified	6 female graduate students and 1 male student in clinical psychology conducted the treatment, under supervision			Randomized control trial	Ipre/post: 29.9/21.1		
Fair	Participants had experienced a traumatic event at least 3 months prior to intervention. They were recruited from a pool of 500 students in return for course credit points Mean age: 22 years (SD: 4.9); range: 18–37 years; Race/Ethnicity: Not discussed Type of trauma: mixed trauma/trauma symptoms				Ipre: n = 15 Cpre: n = 15 Ipost: n = 13 Cpost: n = 12	Cpre/post: 27.2/26.8		
Lytle (2002)*	Location not specified	Three sessions 1 week apart	Pre and post assessment only	Comparison received non-directive therapy	Convenience	Beck Depression Inventory (BDI)	0.29	
Greatest	Spring of 1990	Administered by clinical psychology doctoral students experienced as therapists	Post one week after treatment		Randomized Control Trial	I pre/post: 10.0/6.5 C pre/post: 11.3/5.9		
Good	Undergraduate students with total Impact of Events Scale score greater than 0 were contacted; potential participants also completed self-report diagnostic measures of PTSD and generalized anxiety disorder Mean age: 18.9 years (SD: 1.64); Race/Ethnicity: 93% Caucasian; 4% African-American; 2% Indian (SE Asian) Type of trauma: mixed trauma/trauma symptoms				Ipre: n = 16 Cpre: n = 16 Ipost: n = 15 Cpost: n = 15	State-Trait Anxiety Inventory Ipre/post: 21.9/18.7 Cpre/post: 23.6/20.9	-0.05	

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Scheck (1998) ^a Greatest Fair	Colorado Springs, CO Study dates not specified Participants recruited by information and fliers advertising the study to several municipal agencies in Colorado Springs, including the El Paso Co. Dept of Health and Environment, Municipal Court Diversion Program, El Paso County Legal Assistance, and District 2 Alternative School. Also recruited by referrals from helping agencies or when young adults came for an appointment at the STD clinic Mean age: 20.93 yrs Age range: 16–25 yrs Race/Ethnicity: Caucasian:62% African American: 15% Hispanic: 15% Native American: 8% Type of trauma: mixed trauma/trauma symptoms	Participants attended two 90-min therapy sessions approximately 1 week apart Therapy conducted by 24 licensed or supervised volunteer therapists recruited from the community	Pre, post, and 3 month follow up	Control received active listening therapy	Convenience Randomized Control Trial Ipre: n = 30 Cpre: n = 30 Ipost: n = 20 Cpost: n = 12	Beck Depression Inventory Ipre/3 mo: 21.5/5.3 Cpre/3 mo: 26.4/14.3 Impact of Event Scale Ipre/3 mo: 48.4/15.8 Cpre/3 mo: 48.7/26.2 State-Trait Anxiety Inventory (STATE): Ipre/3 mo: 52.4/35.2 Cpre/3 mo: 53.1/44.5	-0.36 -0.75 -0.58

Studies measuring effect of Play Therapy in children/adolescents

Kot (1998) ^b Moderate Fair	Location not specified Study dates not specified Volunteer participants (mothers and children) were recruited from battered women's shelters. Children had witnessed domestic violence Mean age: 6.9 years, range: 4–10 years; Race/ethnicity: 46% Caucasian, 27% Hispanic, 27% African-American Type of trauma: witness domestic violence	Participants received 12, 45-minute sessions of intervention over a period of 12 days to 3 weeks Delivered by 2 counselors completing their master's and 1 counselor who was completing a doctoral degree	Pre and post measurements only	Wait-listed control, but also received 3–4 educational and recreational group sessions per week provided by shelter staff	Convenience Not randomized Ipre: n = 20 Cpre: n = 20 Ipost: n = 11 Cpost: n = 11	CBCL Total Behavior Problems Ipre/post:28.6/21.2 Cpre/post: 42.9/45.6	-0.69
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Smith (2003) ^b Moderate Fair	Location not specified Study dates not specified Participants recruited from 2 shelters (a domestic violence shelter and a homeless shelter); must be a victim of domestic violence and their children must have been a witness of domestic violence Experimental group: children age: mean: 6.1, range: 4–10; Experimental group race/ethnicity: Caucasian 36.4% Arabic 9.1% Hispanic 9.1% African American 45.4% Type of trauma: witness domestic violence	12, 1.5 hr sessions over 2–3 weeks. Intervention group also received what control group received Doctoral candidate with play training administered	Pre and post measurements only	Control received 3–4 educational and recreational group sessions per week provided by shelter staff	Convenience Not randomized, not concurrent Ipre: n = 14 Cpre: n = 11 Ipost: n = 11 Cpost: n = 11	Child Behavior Checklist (CBCL) Scales: Externalizing Ipre/post: 14.5/9.4 Cpre/post: 18.7/20.1 Aggressive Ipre/post: 11.9/7.8 Cpre/post: 16.2/17.7 Anxious/Depressed Ipre/post: 9.3/4.4 Cpre/post: 6.7/6.9	-1.24 -1.10 -0.84
Tyndall-Lind (2001) ^b Moderate Fair	Location not specified Study dates not specified Volunteer participants (mothers and children) were recruited from battered women's shelters in a large metroplex area. Children had witnessed domestic Mean age: 6.2 years, range: 4–9 years; Race/ethnicity: 60% Caucasian, 20% Hispanic, and 20% African-American Type of trauma: witness domestic violence	Received 12 sessions of Intensive sibling group play therapy, 2 siblings in each group. Sessions were 45 minutes in length conducted daily over 12 days. Intervention group also received what control group received Administered by 2 masters level and 3 doctoral counselors, all trained in play therapy	Pre and post measurements only	Wait-listed control, but also received 3–4 educational and recreational group sessions per week provided by shelter staff	Convenience Not randomized Ipre: n = 20 Cpre: n = 20 Ipost: n = 10 Cpost: n = 11	Child Behavior Checklist (CBCL) Scales: Aggressive Ipre/post: 14.7/11.3 Cpre/post: 16.2/17.7 Anxious/Depressed Ipre/post: 9.5/6.3 Cpre/post: 6.7/6.9	-0.72 -0.61

Author & year Design suitability Quality of execution	Location Study period Population	Intervention			Sample selection	Effect measure calculated from study findings	Adjusted g
		Frequency and duration Personnel administering	Follow-up	Other components (study arms, if any) Comparison	Assignment to treatment conditions Sample size (at pre/post assessments)		
Shen (2002) Greatest Fair	Midwestern Taiwan Study dates not specified Children exposed to the 9/21/1999 earthquake and its aftershocks and who were identified as high risk for maladjustment Age range: 8–12 years Race/ethnicity: Chinese Type of trauma: natural disaster	Ten 40-minute group play therapy sessions over a 4-week span. Each group met 2–3 times per week Sessions conducted by a school counselor with child-centered play therapy training	Pre and posttests measurements approximately 1 month apart	Controls did not receive any treatment	Randomized Ipre: n = 15 Cpre: n = 15 Ipost: n = 15 Cpost: n = 15	Revised Children's Manifest Anxiety Scale (RCMAS) Ipre/1 mo.: 18.0/13.4 Cpre/1 mo.: 17.1 /17.0 Multiscore Depression Inventory for Children (MDI-C) Ipre/1 mo.: 35.0/29.7 Cpre/1 mo.: 41.1 /36.5 Suicide Risk Scale Ipre/1 mo.: 0.40/0.01 Cpre/1 mo.: 0.53/0.46	(Relative change) –0.25 –0.04 –0.97

Study measuring effect of Art Therapy in children/adolescents

Schreier (2005) Greatest Fair	Oakland, CA 1998–2002 Potential participants were identified using the hospital's trauma registry. Children were hospitalized for a minimum of 24 hours after (non-abusive) physical trauma Mean age 10.6 years, SD 2.6 years, range 7 to 17 years; Race/Ethnicity: White 47%, African-American 31%, Hispanic 13%, Asian Pacific Islander 6%, Native American 1%, Other 1% Type of trauma: non-abusive physical trauma	One 1-hour session Deliverer not described	Pre, 1 month, 6 months, and 18 months assessments occurred	Control group received standard hospital services	Convenience Randomized Ipre: n = 27 Cpre: n = 30 Ipost + Cpost: n = 34	UCLA PTSD-RI: Child PTSD Reaction Index Ipre/1 mo.: 28.0 /19.7 Cpre/1 mo.: 24.6 /21.9	(Relative change) –0.21
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Author & year Design suitability Quality of execution	Location Study period Population	Intervention			Sample selection	Effect measure calculated from study findings	Adjusted g
		Frequency and duration Personnel administering	Follow-up	Other components (study arms, if any) Comparison	Assignment to treatment conditions Sample size (at pre/post assessments)		
Study measuring effect of Psychodynamic Therapy in children/adolescents							
Lieberman (2005/2006) Greatest Fair	Location not specified Study dates not specified Mother-child dyads were referred to study from family court, domestic violence service providers, medical providers, preschools, other agencies, child protective services, former clients, and self-referrals. Referred due to clinical concerns about the child's behavior or mother's parenting after the child witnessed or overhead marital violence Age: Mean: 4.06 (SD 0.82), Range: 3–5 yrs; Race/Ethnicity: 38.7% mixed ethnicity (predominantly Latino/white); 28% Latino, 14.7% African American, 9.3% white, 6.7% Asian, 2.6% other Type of trauma: witness domestic violence	Weekly CPP child-mother sessions lasting approximately 60 minutes were conducted over the course of 50 weeks Administered by PhD clinician	Pre and post measurements only	Control received case management plus individual psychotherapy	Convenience Randomized control trial Ipre: n = 36 Cpre: n = 29 Ipost: n = 30 Cpost: n = 25	DC 0-3 TSD (Semistructured Interview for Diagnostic Classification DC: 0-3) Ipre/post: 8.0/4.4 Cpre/post: 7.1/6.7	(Relative change) –0.42
Study measuring effect of Pharmacological Therapy in children/adolescents							
Famularo (1988) Moderate Good	Location not specified Study dates not specified Children presented to an outpatient psychiatry clinic in a general pediatric hospital, an inpatient residential facility or a juvenile court clinic for child evaluation in which severe child abuse is alleged Age: Mean age 8.5 years Race/Ethnicity: Not discussed Type of trauma: child abuse	Propranolol hydrochloride administered three times per day, starting dosage 0.8 mg/kg/d, gradually increased over two week period until top dosage of 2.5 mg/kg/d achieved. Children continued to receive individual therapy Physician researcher	B-A-B (off-on-off) medication design	No control group	Convenience All subjects first received no treatment, then treatment, then no treatment. Ipre: n = 11 Ipost: n = 11	Childhood PTSD Inventory Scores P1/P2/P3 I mean: 39/26/36	(Relative change) –0.31

Author & year Design suitability Quality of execution	Location Study period Population	Intervention			Sample selection Assignment to treatment conditions Sample size (at pre/post assessments)	Effect measure calculated from study findings	Adjusted g
		Frequency and duration Personnel administering	Follow-up	Other components (study arms, if any) Comparison			
Studies measuring effect of Psychological Debriefing in children/adolescents							
Deahl (2000) Greatest Fair	Bosnia, United Kingdom "At the height of the Bosnian War" (dates not specified) Male British regular soldiers preparing for/returning from a 6-month tour of duty in Bosnia as part of UN peacekeeping duties Age: median age 24 years, range 18–38; Race/Ethnicity: Not described Type of trauma: war	Received "a formal PD according to the Mitchell and Dyregrov method" "PD was conducted following a manualized protocol by experienced debriefers with groups of 8–10 participants, each session lasting approximately 2 hours"	Pre, 3 month, 6 month, and 1 year assessments occurred	Controls received <i>Operational Stress Training Package</i> provided routinely by the British Army	Convenience Randomized Ipre: n = 54 Cpre: n = 52 Ipost: n = 54 Cpost: n = 52	Hospital Anxiety and Depression Scale (HADS) Ipre/1yr: 4/3.5 Cpre/1 yr: 6/7 Impact of Events Scale (IES) Ipre/1yr: 0/0 Cpre/1 yr: 7/3	(Relative change) –0.25 1.33
Stallard (2006) Greatest Good	Bath, England 22 months from August 2000–May 2002 Children admitted to the emergency department following a road traffic accident Age range: 7–18 years, mean: ~15 yrs Race/ethnicity: not described Type of trauma: motor vehicle crash	Received one session of clinician-administered, manual-based psychological debriefing approximately 4 weeks after accident	Baseline assessment approximately 1 month after accident and follow up assessment approximately 8.5 months after accident	Controls received non-accident focused discussion Not specified who administered	Convenience Randomized Ipre: n = 82 Cpre: n = 76 Ipost: n = 70 Cpost: n = 52	Impact of Events Scale Pre/post I 22.6/16.3 C 26.2/17.0 Revised Children's Manifest Anxiety Scale Pre/post I 10.0/7.9 C 11.5/8.5 Birleson Depression Inventory Pre/post I 8.5/7.3 C 9.9/8.2	(Relative change) 0.11 0.07 0.04

C comparison group; CI 95% confidence interval; fu follow up; I intervention group; mo month; n sample size; pre pre-intervention; post post-intervention; SD standard deviation; SE standard error; yr year

^a Eye movement desensitization

^b Studies not independent; same control group used from Kot (1998)