



Improvements in personal resiliency among youth who have completed trauma-focused cognitive behavioral therapy: A preliminary examination

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ABSTRACT

This preliminary investigation assessed whether different aspects of personal resiliency improved for youth (7–17 years old) impacted by child sexual abuse (CSA) after completing trauma-focused cognitive behavioral therapy (TF-CBT). The Resiliency Scales for Children and Adolescents (RSCA; Prince-Embury, 2007) were administered to 157 youth before and after participating in TF-CBT with their nonoffending caregivers. Hierarchical regression analyses were performed to ascertain whether pretest RSCA resiliency scores moderated decreases in the posttraumatic stress and self-reported depressive symptoms at posttreatment. The RSCA scales did not moderate any of the improvements on the PTSD and depression outcome measures. Paired *t*-tests between the mean pre- and posttest RSCA Sense of Mastery (MAS), Sense of Relatedness (REL), and Emotional Reactivity (REA) scores demonstrated significant ($ps < 0.001$) improvements on these measures over time. Using residualized posttest scores for the three RSCA scales to assess improvement, significant correlations were found between changes in resiliency and various residualized outcome scores for posttraumatic stress disorder (PTSD) and depression measures. Decreases in the REA scores and increases in the MAS and REL scores were related to fewer symptoms of hypervigilance and less self-reported depression after completing TF-CBT. Only improvements in the REL scores were associated with fewer symptoms of re-experiencing after treatment. The results were discussed as indicating that significant improvements in personal resiliency had occurred over time with effect sizes less than those found for posttraumatic stress symptoms, but comparable to those found for self-reported depression reductions. Limitations and future research recommendations are discussed.

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Research has repeatedly documented the devastating impact of child sexual abuse (CSA) on psychosocial development and long-term functioning. In fact, a history of CSA has been associated with significantly increased risks of suicide attempts, substance abuse problems, posttraumatic stress disorder (PTSD), and depression as well as other psychiatric problems (Hoertel et al., 2015; Perez-Fuentes et al., 2013; Trickett, Noll, & Putnam, 2011). Early effective intervention in the aftermath of CSA may contribute to forestalling such negative life trajectories. Trauma-focused cognitive behavioral therapy (TF-CBT; Cohen, Mannarino, & Deblinger, 2017; Deblinger, Mannarino, Cohen, Runyon, & Heflin, 2015) is a well-established, evidence-

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