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# Research to Practice

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## Overview of the Evidence-Based Intervention

Cognitive processing therapy (CPT) is one of three evidence-based treatments for posttraumatic stress disorder (PTSD). CPT is a 12-session, manualized psychotherapy treatment based on the premise that thoughts related to a specific trauma become generalized to the person, others, and the world at large. As a result, people who have experienced trauma develop maladaptive beliefs, or "stuck points," that make them unable to move on from the traumatic experience. They repeat thoughts, feelings, and behaviors. Through CPT, trauma survivors learn to question the validity of their thoughts and beliefs, helping them to choose more realistic thoughts. As a result, their feelings and behaviors change.

## Treatment Population

CPT was originally developed to treat survivors of rape (Resick & Schnicke, 1993). Since then, research has shown CPT to be effective with survivors of child abuse, domestic violence, combat trauma, and refugee trauma, among others.

## Drug Court–Specific Research

While CPT has not been specifically tested on a drug court population, many of the people in drug courts have histories of trauma in childhood, adulthood, or both.

## Proficiency

Professionals who provide CPT typically have a master's or doctoral degree in psychology, social work, or counseling. There are many ways to be trained in CPT: attending conference or specialized trainings, online trainings (some of which are free), or being self-taught through reading manuals.

## Case Study

Veterans treatment courts, which include staff associated with Veterans Administration medical centers, often require substance-abusing and traumatized veterans to attend CPT.

## Dos and Don'ts for Effective Implementation

Drug Courts need to require that the psychotherapists with whom they work use one of the three evidence-based treatments for trauma; CPT is one of them. Don't just take the therapist's word that they use CPT in treatment. Therapists should be able to demonstrate that they have been trained in CPT, can display their knowledge of its theory and practice, and can show that they possess the tools (e.g., worksheets) used in CPT.

## Take-Away Skills

Psychotherapists and counselors should be able to recognize stuck points and use the challenging questions provided in the presentation or manual to help clients address their maladaptive thoughts and beliefs resulting from traumatic experiences.

**Reference**

Resick, P., & Schnicke, M. (1993). *Cognitive processing therapy for rape victims: A treatment manual*. Newbury Park, CA: Sage Publications.

**Resources**

International Society for Traumatic Stress Studies
http://www.istss.org/treating-trauma/treatment-materials/cognitive-processing-therapy-(cpt).aspx

National Center for PTSD, U.S. Department of Veterans Affairs
http://www.ptsd.va.gov/public/treatment/therapy-med/cognitive_processing_therapy.asp

**Training Courses**

MUSC's CPT Web — https://cpt.musc.edu

Center for Deployment Psychology's Online Course in Cognitive Processing Therapy (CPT) for PTSD in Veterans and Military Personnel http://www.deploymentpsych.org/online-courses/cpt

**Treatment Aid**

National Center for PTSD, U.S. Department of Veterans Affairs' Mobile App—CPT Coach is a treatment companion that helps the therapist and participant work through the CPT treatment manual.
http://www.ptsd.va.gov/public/materials/apps/cpt_mobileapp_public.asp