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Effects of cognitive behaviour therapy for anxiety and depression in children's and adolescents' post-disaster: A systematic review

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Abstract

Background: Disasters are still one of the major phenomena that occur in Indonesia. In the period of February 2024, there were 173 disasters that hit the territory of Indonesia. Natural cause enormous physical and economic destruction, as well as many lives lost. Another impact of disasters is psychosocial problems, such as anxiety and depression. Anxiety and depression can be experienced by various populations. The most vulnerable population is adolescents.
Purpose: To analyse the effects of cognitive behaviour therapy for anxiety and depression in children's and adolescents' post-disaster
Method: A systematic review with article selection guided by the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. The systematic review process begins with the formulation of clinical questions relevant to the topic. Before this, the authors establish PICOS criteria, which stand for: P (problem, patient, or population), I (intervention, prognostic factor, or exposure), C (comparison or control), O (outcome), and S (study design). For this article, P: Children and adolescents post-disaster, I: Cognitive Behaviour Therapy (CBT), C: No therapy or standard care, O: Reduction in anxiety and depression, and S: Randomized controlled trial. The article search was conducted systematically using the keywords: “Cognitive Behaviour Therapy” OR “CBT” AND “Anxiety” AND “Depression” AND “Children” AND “Adolescent” AND “Disaster”.
Results: A review of eight articles showed that Cognitive Behaviour Therapy is effective in reducing anxiety and depression in children and adolescents post-disaster. Compared to other therapies, CBT demonstrates a higher level of effectiveness, including in its modified and developed forms. Its application, when conducted following general procedures while considering cultural aspects and individual characteristics, yields significant results in psychological recovery.
Conclusion: Cognitive Behavioral Therapy (CBT) has been shown to be effective in overcoming anxiety and depression in children and adolescents after disasters, with a better level of effectiveness than other therapies, including in modified forms. The application of CBT that considers cultural aspects and individual characteristics can significantly improve therapy outcomes.

Keywords: Adolescents; Anxiety; Cognitive Behaviour Therapy; Depression; Disaster.

INTRODUCTION

Disasters are still one of the major phenomena that occur in Indonesia. A disaster is a dangerous event that causes serious disruption to the functioning of a community or society related to exposure, vulnerability, and capacity that causes one or more impacts on humans, materials, the economy, and the environment. According to UU. No 24 concerning Disaster Management, a disaster is an event or series

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of events that threaten and disrupt natural, non-natural and human factors, resulting in loss of human life, environmental damage, property loss and psychological impact. Disasters are events that generally involve injury or loss of life and destruction of property, usually beyond the scope of normal human experience, occurring on both a small and large scale and impacting all populations (Crandon, Scott, Charlson, & Thomas, 2022).

Disasters not only cause physical destruction but also have profound psychological consequences for affected individuals, particularly children and adolescents. The emotional and psychological toll can manifest as anxiety, depression, Post-Traumatic Stress Disorder (PTSD), and other mental health issues. The disruption of daily life, loss of loved ones, displacement, and uncertainty about the future contribute significantly to the psychological distress experienced by survivors (Nelson, 2020). Children and adolescents are especially vulnerable to the mental health effects of disasters due to their developmental stage. Exposure to traumatic events at a young age can lead to long-term consequences, including difficulties in emotional regulation, cognitive development, and social functioning. If left unaddressed, these issues can persist into adulthood, affecting overall well-being and quality of life (Rubin, Washburn, & Schieszler, 2017).

In the period of February 2024, there were 173 recorded disasters that hit Indonesia. The natural disasters that occurred were 99.4% hydrometeorological disasters, both wet (91.8%) and dry (8.72%), including floods with 109 incidents, extreme weather with 35 incidents, forest and land fires with 15 incidents, landslides with 13 incidents, and earthquakes with only 1 incident. According to the National Disaster Management Agency, there were 1, 300 natural disasters occurred in Indonesia as of early September 2024, including 750 floods, 210 forest and land fires, 198 extreme weather events, 88 landslides, 32 droughts, 11 earthquakes, 8 tidal waves and abrasion, and 3 volcanic eruptions. This shows that Indonesia has various kinds of natural disasters with a high incidence rate that can have various impacts (Khairunnisa, Melati, Pramudilla, Putri, & Putri, 2024).

The impact of a disaster can includes economic, human, and environmental impacts and can include death, injury, illness, and other negative impacts on the physical, mental and social well-being of human. Natural disasters cause enormous physical and economic devastation, as well as the loss of many lives. Various natural disasters such as forest fires, floods, cyclones, tsunamis and earthquakes have physical, psychological and social impacts. Another impact of natural disasters is psychosocial problems (Van Driel, Sturrsma, Schoevers, Mourits, & De Bock, 2019). These impacts can be experienced over different periods of time ranging from 3 months to 10 years after the disaster. The experience of direct exposure or witnessing trauma beforehand can increase resilience and the ability to cope with difficulties, but it can also cause an increase in a person's sensitivity to an event, leading to a poor response. The impacts of disasters can occur in various populations (Auchincloss, Ruggiero, Donnelly, Chernak, & Kephart, 2024).

The physical and economic devastation, disasters significantly impact the psychological and social well-being of affected individuals and communities. The emotional and psychological toll can manifest as anxiety, depression, Post-Traumatic Stress Disorder (PTSD), and other trauma-related mental health disorders. Survivors often experience fear, grief, helplessness, and uncertainty, which can persist long after the disaster has occurred. Children and adolescents are particularly vulnerable to these psychological effects due to their developmental stage (Dawson, Joscelyne, Meijer, Steel, Solive, & Bryant, 2018).

They may struggle with emotional regulation, exhibit behavioral changes, and face difficulties in academic and social interactions. Long-term exposure to traumatic stress without proper intervention may lead to chronic mental health disorders, which can affect their ability to function in daily life. Socially, disasters disrupt family structures, community networks, and access to essential services, further exacerbating psychological distress. The loss of a home, forced displacement, and separation from loved ones contribute to increased stress and emotional instability. Additionally, limited access to healthcare and mental health services in post-disaster settings creates barriers to recovery, leaving many individuals without adequate support (Jones, & Schmidt, 2013).

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One of the populations vulnerable to the impact of disasters is children and adolescents. Adolescence is the transitional age stage from childhood to adulthood. Children and adolescents are at risk of experiencing an identity crisis in which they can respond maladaptively to existing stressors. Children and adolescents are one of the populations vulnerable to psychosocial problems due to disasters. Past experiences of children and adolescents due to disasters cause more complicated behavior and more anxiety and unrealistic fears. Children and adolescents experience several psychosocial problems after experiencing the Parnitha earthquake, one of which is anxiety and depression. Signs and symptoms of depression in adolescents can be seen from psychosocial problems of situational low self-esteem, helplessness and despair experienced by children and adolescents after a disaster. Children and adolescents in the aftermath of a disaster are vulnerable to situational low self-esteem, powerlessness and despair (Madhavan, Armugham, Bhaumik, Gundluru, Thirunavukarasu, & Dioso, 2022).

Cognitive Behaviour Therapy (CBT) is a widely recognized psychological intervention that focuses on identifying and modifying negative thought patterns, emotional responses, and maladaptive behaviors. It is particularly effective in managing anxiety disorders, depression, and Post-Traumatic Stress Disorder (PTSD) in various populations, including children, adolescents, and adults. CBT operates on the principle that thoughts, feelings, and behaviors are interconnected, and by changing negative thought processes, individuals can improve their emotional and behavioral responses (Gautam, Tripathi, Deshmukh, & Gaur, 2020). One of the key advantages of CBT is its structured and goal-oriented approach. It involves psychoeducation, cognitive restructuring, behavioral activation, and relaxation techniques, all of which contribute to reducing anxiety and improving overall mental well-being. Individuals undergoing CBT learn coping strategies, stress management skills, and ways to challenge irrational fears, making it an effective treatment for anxiety-related conditions (Konanur, Muller, Cinamon, Thornback, & Zorzella, 2015).

RESEARCH METHOD

A systematic review with article selection guided by the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. The systematic review process begins with the formulation of clinical questions relevant to the topic. Before this, the authors establish PICOS criteria, which stand for: P (problem, patient, or population), I (intervention, prognostic factor, or exposure), C (comparison or control), O (outcome), and S (study design). For this article, P: Children and adolescents post-disaster, I: Cognitive Behaviour Therapy (CBT), C: No therapy or standard care, O: Reduction in anxiety and depression, and S: Randomized controlled trial.

The article search was conducted systematically using the keywords: “Cognitive Behaviour Therapy” OR “CBT” AND “Anxiety” AND “Depression” AND “Children” AND “Adolescent” AND “Disaster”. The inclusion criteria required articles related to the use of Cognitive Behaviour Therapy in children and adolescents with anxiety and post-disaster depression, time span of article publication without time span, articles written in English and Bahasa, articles in the original form of research with randomized controlled trial and quasy experiment designs, full-text articles and accessible without payment. The exclusion criteria ruled children and adolescents with severe mental disorders that are not the result of a disaster, studies that use only therapies other than CBT (e.g., pharmacological therapy or art therapy without CBT in combination), studies that do not evaluate anxiety and depression as the primary outcome.

The initial search resulted in 43 articles from PubMed, 7 from Scopus, 121 from Science Direct, 97 from Wiley Online Library, 117 from Clinical Key For Nursing, 49 from Sage Journal and 106 from Taylor & Francis. After screening and filtering based on the predefined criteria, 8 articles met the inclusion criteria and were selected for further analysis.

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RESEARCH RESULTS

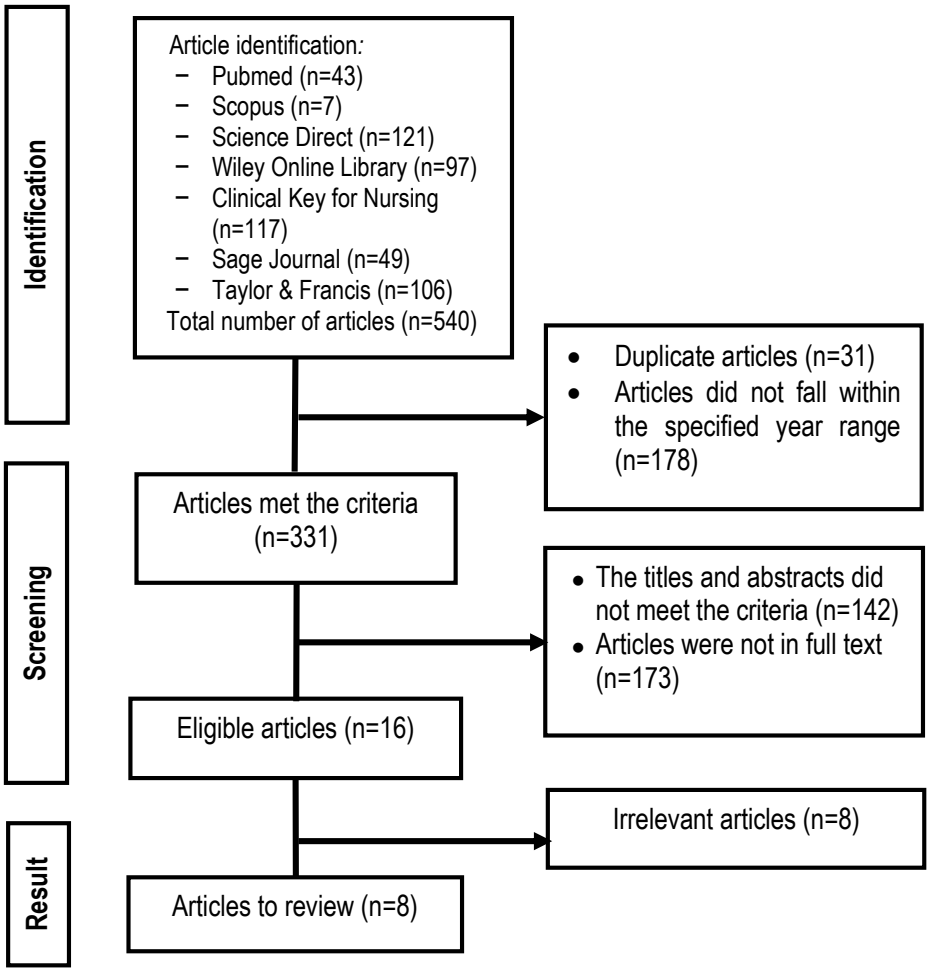


Figure PRISMA Flow Diagram

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Table The Main Characteristics of Included Studies

Author (Year) (Country)	Purpose	Method	Results
(de Roos et al., 2011) (Netherlands)	The primary aim was to compare the effectiveness and efficiency of Cognitive Behavioural Therapy (CBT) and Eye Movement Desensitisation and Reprocessing (EMDR).	Random Control Trial, pre-post examined Children (n=52, aged 418) were randomly allocated to either CBT (n=26) or EMDR (n26) in a disaster mental health after-care setting after an explosion of a fireworks factory. All children received up to four individual treatment sessions over a 48 week period along with up to four sessions of parent guidance. Blind assessment took place pre- and post-treatment and at 3 months follow-up on a variety of parent-rated and self-report measures of post-traumatic stress disorder symptomatology, depression, anxiety, and behaviour problems. Analyses of variance (general linear model repeated measures) were conducted on the intention-to-treat sample and the completers	The present results provide support for the effectiveness of both EMDR and CBT among a heterogeneous, multicultural sample of children and adolescents with disaster-related symptoms indicating the feasibility of implementing these treatments for children. A difference is found between EMDR and CBT for efficiency. More research is needed to confirm EMDR's efficiency advantage and to address the issue of comparative efficacy between these treatments for psychological trauma.
(Bianchini et al., 2013) (Italy)	The purpose of this study is to evaluate the effect of Cognitive Behavioral Therapy (CBT) on young people affected by the L'Aquila earthquake in 2009.	A quasi-experimental study One year after the disaster, 39 young subjects as a case group (CBT treated) and 24 as a comparison group (no CBT treated) were evaluated with the Impact of Event Scale Revised (IES-R), the General Health Questionnaire-12 items (GHQ-12) and the Brief Cope. CBT was conducted in 12 sessions (once per week for 3 months). After CBT intervention, both groups were evaluated again with the same psychometric instruments.	Our findings show the efficacy of CBT and the influence of individual coping strategies in the improvement of posttraumatic stress symptoms and psychological distress among young people seeking help from an outpatients service for young people with psychiatric problems after the catastrophic disaster in L'Aquila.

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Author (Year) (Country)	Purpose	Method	Results
(Shooshtary et al., 2007) (Iran)	This study aims to evaluate the effectiveness of CBT among adolescents exposed to the 2004 Earthquake in Bam, Iran.	A quasi-experimental study, pre-post with control group Four months after the earthquake, 135 adolescents as a case group and 33 adolescents as a comparison group were evaluated with the Impact of Event Scale Revised (IES-R). Two therapists were trained in CBT in 3-day classes according to a manual provided by mental health services. After conducting CBT in the case group, both groups were evaluated again with IES-R.	The severity of post-traumatic stress symptoms decreased significantly in subjects given CBT in the case group. The improvement in post-traumatic stress symptoms was due to improvements in each of the three symptom categories (intrusions, avoidance, and arousal) and the total post-traumatic stress disorder score ($p<0.05$).
(Taylor et al., 2011) (America)	The current study provides an examination of the efficacy of an intervention manual designed specifically for hurricane-exposed youth (i.e., the StArT manual) using a partially nonconcurrent multiple baseline design.	A quasi-experimental study, pre-post without control group	Results provide initial evidence for the efficacy of the StArT manual and suggest the feasibility of conducting the StArT manual in a school setting. The importance of large-scale tests of effectiveness and implementation of cognitive behavioral treatments in the wake of disaster among youth are discussed. The StArT manual shows the effectiveness of the application of CBT to children affected by Hurricane Katrina. Therefore, it is recommended to test its effectiveness on a large scale and apply CBT to children in the aftermath of a disaster.
(Sugiyama et al., 2020) (Japan)	This study aims to examine the impact of group cognitive behavior intervention on high	A quasi-experimental study, with a pre-post design without a control group	The results showed that the high-depression group's depression score was reduced by the intervention. Resilience score was increased both in the high- and

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Author (Year) (Country)	Purpose	Method	Results
	school students affected by heavy rain disasters in Hiroshima and determine whether the intervention can reduce depression and increase resilience.	A total of 229 second-grade senior school students affected by the Hiroshima heavy rain disaster participated in the study. The intervention was performed in the following order: psychological education on daily stress, problem-solving training for daily stress, psychological education on traumatic reactions derived from traumatic experiences, and instruction on the merits of utilizing information acquired from the intervention in daily life.	low-depression groups as a result of the intervention. Therefore, the intervention program used in this study was proven effective in reducing depression and improving resilience. Prospectively, strategies for psychological support during and after large-scale disasters should be established by applying the findings obtained in this research.
(Orengo et al., 2022) (America)	The objective of this project was twofold: 1) to train mental health providers in Puerto Rico in TF-CBT as part of a clinical implementation project within the largest managed behavioral health organization (MBHO) on the island, and 2) to conduct a program evaluation to determine the feasibility of implementation and the effectiveness of the treatment.	A quasi-experimental study, pre-post design without a control group Fifteen psychologists were trained in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). These psychologists then provided TF-CBT to 56 children and adolescents, ages 5–18, in community-based mental health clinics and one primary care clinic with a co-located psychologist in Puerto Rico. The mean number of traumatic events reported by youth referred for TF-CBT was 4.11.	These results suggest that it was feasible to train providers in TF-CBT, that providers were able to deliver TF-CBT in community-based settings both in person and via telehealth (due to the COVID-19 pandemic), and that TF-CBT was an effective treatment option to address trauma-related concerns for youth in Puerto Rico in a post-disaster context. This project is an important first step in the dissemination and implementation of evidence-based trauma-focused treatment for Hispanic youth and disaster-affected youth in the Caribbean.

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Author (Year) (Country)	Purpose	Method	Results
(Child and Adolescent Trauma Treatments and Services Consortium., 2010) (America)	To assess the effectiveness of Trauma Specific-CBT and Brief-CBT on anxiety in children and adolescents with post-disaster (PTSD) at the World Trade Center (WTC)	A quasi experimental study, pre-post design without a control group Conducted 6 month	Comparison of the results after the administration of TF-CBT and Short CBT showed a decrease in anxiety symptoms in children and adolescents.
(Pityaratstia et al., 2015) (Thailand)	This randomized controlled trial aimed to test for the efficacy of the modified version of CBT for children and adolescents with PSTD.	Randomized Controlled Trial Thirty-six children (aged 10–15 years) who had been diagnosed with PSTD 4 years after the tsunami were randomly allocated to either CBT or wait list. CBT was delivered in 3-day, 2-hour-daily, group format followed by 1-month posttreatment self-monitoring and daily homework.	Compared to the wait list, participants who received CBT demonstrated significantly greater improvement in symptoms of PTSD at 1-month follow-up, although no significant improvement was observed when the measures were done immediately posttreatment. Brief, group CBT is an effective treatment for PTSD in children and adolescents when delivered in conjunction with posttreatment self-monitoring and daily homework.

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DISCUSSION

Cognitive Behavioral Therapy (CBT) is a therapy that has been proven effective against anxiety and depression, including in children and adolescents who have been affected by disasters. CBT is effective even when given to heterogeneous and multicultural populations of children and adolescents who show symptoms of anxiety and depression due to disasters. CBT, when compared to Eye Movement Desensitization and Reprocessing (EDMR) therapy, shows that CBT provides more effective results and requires a lot of other research related to the efficiency of EDMR. This shows that the effectiveness of CBT is still better when compared to other therapies for reducing anxiety and depression (Carliner, Keyes, McLaughlin, Meyers, Dunn, & Martins, 2016).

CBT has been shown to be an effective, flexible and evidence-based therapy in treating anxiety and depression in children and adolescents traumatized by disasters. Compared to other therapies such as EMDR, CBT offers a more systematic and structured approach, making it a top choice in post-disaster psychosocial interventions. To ensure the successful application of CBT in disaster recovery, it requires support from mental health professionals, communities, and government policies that prioritize psychosocial interventions in disaster management. With the right steps, CBT can contribute to building the psychological resilience of disaster-affected individuals and communities (Dorsey, Lucid, Martin, King, O'Donnell, Murray, & Whetten, 2020).

CBT given to children affected by the L'Aquila earthquake showed a significant reduction in symptoms of anxiety and depression. The effectiveness of CBT on anxiety and depression in adolescents due to the earthquake in Iran also showed that subjects who received CBT therapy showed a decrease in symptoms of anxiety and depression. Based on these studies, it can be concluded that CBT given without comparison still shows significant results in reducing anxiety and depression (Woods, Kava, Akiba, Lucid, & Dorsey, 2017).

Cognitive Behaviour Therapy (CBT) has been shown to be effective in reducing anxiety and depression in adolescent victims of disasters, including the earthquake in Iran. It helps individuals by teaching cognitive restructuring techniques, stress management, and social skills to adaptively cope with trauma. CBT works through mechanisms such as psychoeducation, relaxation techniques, gradual exposure to trauma, and strengthening social support, allowing disaster victims to develop a more positive mindset and improve their psychological resilience (Meltzer, Zacher, Merdjanoff, Do, Pham, & Abramson, 2021).

The main advantage of CBT is its flexibility in being applied across different cultural backgrounds and emergency conditions. It can be tailored to the needs of the community through individual approaches, group therapy, or digital-based programs. Research in various countries, such as Indonesia, Japan, and Haiti, shows that CBT not only helps reduce symptoms of anxiety and PTSD, but also improves the psychological well-being of disaster victims in the long run. To ensure the success of CBT in treating disaster victims, support from the government, mental health professionals, and communities is needed to provide wide access to this therapy. With an evidence-based approach and multimodal strategies, CBT can be an integral part of psychosocial recovery programs, helping disaster victims to recover and rebuild their lives better (Augustinavicus, Lowe, Massazza, Hayes, Denckla, White, & Berry, 2021).

The administration of CBT developed with contemporary methods such as the StART manual, which was carried out on children affected by Hurricane Katrina, showed very significant effectiveness, so it was recommended that it be tested on a large scale and applied to children in the post-disaster periode. Likewise, with School-based CBT, where students who fell into the category of depression due to the heavy rain disaster in Hiroshima showed a decrease in depression from high to moderate and increased resilience in the moderate depression category (Widnall, Price, Trompetter, & Dunn, 2020). In addition, online TF-CBT for children and adolescents experiencing anxiety and depression in the United States who have experienced various disasters shows a reduction in the anxiety and depression experienced and is becoming the therapy of choice considered effective for children and adolescents with anxiety and depression. It can be concluded that the CBT that has

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been developed is highly recommended in its development because of its effectiveness (Lai, Lewis, Livings, La Greca, & Esnard, 2017).

The Advancement of Online TF-CBT in Treating Anxiety and Depression The development of Trauma-Focused Cognitive Behaviour Therapy (TF-CBT) in an online format has expanded access to effective mental health interventions for children and adolescents experiencing anxiety and depression due to disasters. Online TF-CBT offers structured therapy sessions through digital platforms, allowing individuals to receive psychological support remotely. This approach has proven beneficial, especially in post-disaster scenarios where access to in-person therapy may be limited due to infrastructure damage, displacement, or lack of mental health professionals. Studies in the United States and other disaster-affected regions indicate that online TF-CBT significantly reduces symptoms of anxiety and depression among children and adolescents (Young, Ramachandran, Stewart, Orengo, & Chorpita, 2021). The effectiveness of online TF-CBT lies in its ability to provide psychoeducation, cognitive restructuring, and coping strategies in an interactive and engaging format, making it accessible to a broader population. Additionally, online therapy minimizes stigma and logistical barriers, encouraging more individuals to seek mental health support. Given its proven effectiveness, the continuous development and implementation of online TF-CBT are highly recommended. Integrating teletherapy into disaster response programs can enhance mental health services for affected children and adolescents globally (Orengo, Stewart, Villalobos, Hernandez, Dueweke, De Arellano, & Young, 2020).

CONCLUSION

Cognitive Behavioral Therapy (CBT) has been shown to be effective in overcoming anxiety and depression in children and adolescents after disasters, with a better level of effectiveness than other therapies, including in modified forms. The application of CBT that considers cultural aspects and individual characteristics can significantly improve therapy outcomes.

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