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Editorial: Applications of Cognitive and Behavioral Therapy in Response to COVID-19

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The corona virus (COVID-19) continues to have a devastating health, economic, and social impact on our local and international communities. Cognitive and Behavioral Therapies (CBTs), as a family of therapies that posit cognitive, behavioral, emotional, and interpersonal change processes in the understanding and successful treatment of mental health disorders, have risen to the challenge. This special issue represents contributions from CBT experts on the impact on psychopathology, new assessment methods, adaptations of integrated behavioral health, telehealth, psychology training, and discusses a public health framework. The issue includes a series of articles offering guidance for the clinician on interventions for those impacted by trauma, CBT for youth and families, and telehealth for psychotic spectrum disorders and group therapy for social anxiety.

he coronavirus (COVID-19) continues to have a devastating health, economic, and social impact on our local and international communities (Ceban et al., 2021; Poletti et al., 2021; Puntmann et al., 2020; Weinberger et al., 2020; Weiner et al., 2021). We do not yet have adequate data to fully appraise the short- and longer-term mental health repercussions of contracting the virus, managing various health conditions exacerbated when contracting the virus, or the impact of loss of life in the context of a pandemic (de Havenon et al., 2021; Kompaniyets et al., 2021). Evidence regarding impact is emerging (Sheinson et al., 2021) and projections are that it will be felt many years after the outbreak is controlled. The impact on healthcare providers has also been significant (Delaney et al., 2021).

Some members of our community, such as older adults, may be experiencing greater social isolation and have unique concerns including but not limited to a slower uptake of technology as compared to younger populations (Chen et al., 2021; Hollinghurst

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et al., 2021; Ouslander & Grabowski, 2020; Privor-Dumm et al., 2021). Communities required to live under curfew and heavy isolation requirements may have experienced additional strain. There are equally alarming disparities in impact among racially and culturally defined groups (Gorges & Konetzka, 2021; Gu et al., 2020; Knights et al., 2021; Morlock et al., 2021; Tan et al., 2021) and there exists a need to tailor public health messages accordingly (Torres et al., 2021).

Cognitive and Behavioral Therapies (CBTs), as a family of therapies that posit cognitive, behavioral, emotional, and interpersonal change processes in the understanding and successful treatment of mental health disorders, have risen to the challenge. Through the lens of a CBT practitioner, we recognize the various psychosocial stressors and potential for trauma experiences in this context. Those who have successfully identified and reappraised a threat schema and associated avoidance may be among the best prepared, whereas those with skill deficits in emotion identification and coping, and those who actively engage with negative automatic thoughts without reality testing, may be among the most vulnerable to psychological distress. The flexibility inherent among the CBTs promise that evidence-based approaches for the common presentations of psychopathology can be successfully treated. More than ever, we are aware of our obligation to eval456 Kazantzis et al.

uate the effectiveness of any new assessment and therapeutic intervention, particularly as the mode of delivery and the clinical populations we serve are experiencing such rapid changes.

As the incoming senior members of the Editorial Board for *Cognitive and Behavioral Practice*, and with the support of the Editor-in-Chief, Dr. Brian Chu, we secured approval for a special issue "*Applications of Cognitive and Behavioral Therapy in Response to COVID-19.*"

Special Issue Aim

Consistent with the overarching aim and scope for Cognitive and Behavioral Practice, our aim was to bring together guidance that would be practically useful for clinicians in supporting the community's response to COVID-19. We were interested in studies of innovative treatments and service delivery modes in response to the pandemic (i.e., development, feasibility, acceptability, and initial outcomes). Given that CEBP is a practitioner-oriented journal, we were interested in studies of treatment outcome and other data-based manuscripts if these were presented in the context of rich clinical descriptions (e.g., case vignettes, video demonstrations, and therapist guidelines). We sought studies of development, feasibility, acceptability, or initial outcomes of specific CBT interventions for COVID-19 impact. Considering the various changes to the mode of service delivery necessitated in many communities, we were also interested in papers on applications of CBT to videoconference or telephone delivered care, and innovative e-health platforms for CBT interventions.

Our intention was to feature work with disadvantaged communities, including recommendations for overcoming inequalities among community groups that may be defined by their gender, racial, cultural identification, or sexual orientation. Finally, we were hoping to include dissemination of CBTs to support community members across the lifespan (e.g., older adult populations) as well as specialty populations (e.g., emergency responders).

Issue Structure and Contents

The first section in the issue represents contributions from CBT experts on COVID-19 impact on psychopathology, new assessment methods, adaptations of integrated behavioral health, telehealth, psychology training, and a public health framework discussion. Second, the issue includes a series of articles offering guidance for the clinician on CBTs for those impacted by trauma. The third and final sections provide guidance for CBT for youth and families in the context of COVID-19, and guidance for use of telehealth for psychotic spectrum disorders and group therapy for social

anxiety. We are grateful that Dr. Jon Comer, the incoming Editor-in-Chief for our ABCT sister journal *Behavior Therapy*, agreed to contribute a concluding comment to expertly tie the contents of the issue together.

CBTs for those Impacted by Trauma

The second section focuses on delivering CBT to individuals impacted by trauma. Several of the articles outline critical adaptations to delivering treatments such as prolonged exposure (PE), cognitive processing therapy (CPT), and the unified protocol (UP) via telemental health or telephone in the context of the pandemic. This work includes suggestions for modifying in vivo exposure exercises during PE, delivering CPT via telephone, components of UP that may be more versus less translatable to telehealth, and speaks to the clinical utility of providing CPT within an intensive daily format via telehealth. Other articles focus on dialectical behavior therapy (DBT), providing guidance to clinicians on best practices for delivering DBT via telehealth in various populations, and on couples therapy, offering guidance on addressing the unique challenges that couples face in the context of the pandemic.

CBT for Youth and Families

The third section of the issue is focused on CBT for youth and families in the context of COVID-19. The section includes articles on diverse topics from implementing group and individual therapy using telehealth, treating COVID-19 related distress in youth, and addressing social anxiety in a time of social isolation. The section contains articles that address the needs of children, adolescents, and parents and concludes with an article that describes how clinicians can integrate advocacy for marginalized children and families during COVID-19.

Telehealth for Specific Clinical Groups

The final section of the issue is focused on CBTs delivered via telehealth in the context of COVID-19. This section includes one case series discussing a group-based CBT for psychotic spectrum disorders delivered via telehealth. Additionally, this section contains an article examining a group-based CBT for social anxiety disorder delivered via telehealth during COVID-19. Together, we hope these articles help readers think about adaptations they might be able to make in their own practices to continue to deliver CBTs remotely.

Conclusion

This special issue for $C\mathcal{CBP}$ provides a rich sample of work focused on advancing our understanding of the impact of COVID-19. With the range of innovative work on assessment and therapeutic intervention, we believe that CBTs have risen to the challenge and hope these publications provide useful practical guidance for the clinician at this challenging time.

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