



Mapping the Research Landscape of Brief Cognitive Behavioral Therapy in High School Education: A VOSviewer-Assisted Literature Review

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Articles Information

Abstrak

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Kebutuhan kesehatan mental remaja di sekolah semakin meningkat, namun lanskap penelitian global tentang Terapi Perilaku Kognitif Singkat (Brief CBT) di pendidikan menengah masih kurang dieksplorasi. Analisis bibliometrik terhadap 52 publikasi yang terindeks di Scopus dilakukan menggunakan VOSviewer untuk memetakan tren, kluster tematik, dan kontributor utama. Jumlah publikasi meningkat secara stabil selama dekade terakhir, mencapai puncaknya setelah tahun 2020. Terjadi pergeseran dari terapi individu berbasis klinik ke pendekatan terintegrasi di sekolah, termasuk sesi di kelas, format kelompok, alat digital, strategi mindfulness, dan fasilitasi oleh teman sebaya. Empat kluster tematik muncul: kesehatan emosional remaja, strategi pencegahan, keterampilan koping, dan program yang disesuaikan secara budaya. Celah penelitian masih ada dalam keterlibatan keluarga, pengiriman oleh guru, dan model responsif budaya jangka panjang, terutama di Asia Tenggara dan Afrika Sub-Sahara. Studi ini menyediakan peta jalan untuk mengembangkan Brief CBT di sekolah, menempatkannya sebagai komponen yang dapat diskalakan, dapat diakses, dan berkelanjutan dalam sistem kesehatan mental berbasis sekolah global.

Abstact

Adolescent mental health needs in schools are rising, yet the global research landscape of Brief Cognitive Behavioural Therapy (Brief CBT) in secondary education is underexplored. A bibliometric analysis of 52 Scopus-indexed publications was conducted using VOSviewer to map trends, thematic clusters, and key contributors. Publications increased steadily over the past decade, peaking after 2020. A shift was observed from individual, clinic-based therapy to school-integrated approaches, including classroom sessions, group formats, digital tools, mindfulness strategies, and peer facilitation. Four thematic clusters emerged: adolescent emotional health, preventive strategies, coping skills, and culturally adapted programmes. Research gaps remain in family engagement, teacher-led delivery, and long-term culturally responsive models, especially in Southeast Asia and Sub-Saharan Africa. This study provides a roadmap for advancing Brief CBT in schools, positioning it as a scalable, accessible, and sustainable component of global school-based mental health systems.



INTRODUCTION

Adolescence, particularly during high school years, is a critical developmental stage marked by rapid psychological, emotional, social, and academic changes. During this period, adolescents experience significant shifts in self-concept, peer relationships, and identity formation. These changes often occur alongside high academic demands, increasing their vulnerability to mental health challenges. According to the World Health Organization (2024), approximately 16% of adolescents worldwide experience mental health conditions, many of which remain undetected or untreated in school environments. Multiple factors contribute to this vulnerability. Academic stress, peer pressure, family dynamics, and early-life trauma can all exacerbate emotional instability and increase the risk of anxiety or depression (DeMartini et al., 2024; García Del Castillo-López, 2025; Prieto-Ayuso et al., 2025; Sethi et al., 2025). Preventive approaches such as mindfulness, physical activity, and structured therapy programs have shown promise in fostering resilience and self-regulation (Axelrod et al., 2021; Kumar et al., 2024; Piepiora et al., 2025). However, despite a growing body of research on cognitive-behavioral interventions, studies focusing specifically on Brief Cognitive Behavioral Therapy (Brief CBT) in high school education remain scarce. Most reviews address CBT in general or target clinical populations, leaving a gap in understanding its adaptation, implementation, and outcomes in secondary education settings.

In the context of high school education, this gap becomes particularly critical because adolescence represents a window of opportunity for preventive and early intervention strategies. Schools offer a structured environment where mental health programs can be delivered systematically, reaching a wide population regardless of socioeconomic background. Brief CBT, with its concise format and evidence-based structure, is well-suited for integration into school schedules and curricula without significantly disrupting academic activities. Yet, without a clear understanding of how this approach has been studied and applied specifically in secondary education, practitioners and policymakers lack the necessary evidence to design effective, contextually relevant programs. This underlines the importance of mapping existing research to identify thematic priorities, methodological trends, and collaborative networks within this niche field.

However, despite a growing body of research on cognitive-behavioral interventions, studies focusing specifically on Brief Cognitive Behavioral Therapy (Brief CBT) in high school education remain scarce. Most reviews address CBT in general or target clinical populations, leaving a gap in understanding its adaptation, implementation, and outcomes in secondary education settings. This gap is important for two reasons. First, high schools provide a unique environment for large-scale, preventive mental health interventions, offering direct access to adolescents in a familiar setting. Second, the brevity and structured nature of Brief CBT make it potentially more feasible within academic schedules, yet its research base in this context is limited. Mapping the existing scholarship can clarify thematic priorities, reveal collaborative networks, and highlight underexplored areas.

Bibliometric analysis offers a robust approach to achieving this. It quantitatively examines patterns in academic publications such as keyword trends, author influence, and research clusters allowing researchers to identify both established and emerging themes. In this study, VOSviewer is used for data visualization. The tool generates network maps of keywords, co-authorship, and citations, enabling a structured understanding of the research landscape. Given the lack of systematic mapping of Brief CBT research in high school contexts, this study aims to provide a comprehensive overview of global trends, thematic developments, and key contributors. By analyzing publications indexed in Scopus from 2010 to 2025, the findings are expected to guide educators, researchers, and policymakers in developing school-based mental health strategies that are evidence-based, contextually relevant, and sustainable. In doing so, this study not only addresses a significant gap in the literature but also contributes to the global discourse on adolescent mental health within educational settings.

METHOD

This research employed a bibliometric design to systematically analyze scientific publications related to Brief Cognitive Behavioral Therapy (Brief CBT) in the context of high school education. Bibliometric analysis is a quantitative method for exploring patterns in academic literature by examining metadata such as publication output, authorship, keywords, and citation networks (Aria & Cuccurullo, 2017; Donthu et al., 2021). This approach is particularly valuable for mapping scientific knowledge, identifying research trends, and informing evidence-based educational and psychological practices. Scopus was selected as the sole database for its broad international coverage and robust metadata indexing (Falagas et al., 2008). The search was conducted using Boolean keyword strings "brief cognitive behavioral therapy" AND "high school" in the Scopus advanced search, covering the period 2010–2025. Inclusion criteria were: (1) peer-reviewed journal articles in English; (2) complete bibliographic metadata (title, abstract, authors, keywords, and references); and (3) direct relevance to Brief CBT in secondary education. Exclusion criteria were conference abstracts without full papers, studies unrelated to school-based mental health interventions, and non-peer-reviewed materials.

Data preprocessing was carried out using Microsoft Excel through four main steps: (1) removal of duplicates based on DOI and title matching; (2) title and abstract screening to exclude irrelevant studies; (3) keyword filtering to confirm thematic relevance; and (4) verification of metadata completeness, excluding records with missing essential information. This process resulted in 52 eligible articles. VOSviewer Van Eck & Waltman (2010) was used to construct bibliometric maps that visualized: (a) keyword co-occurrence networks to reveal thematic clusters; (b) co-authorship networks to illustrate collaboration patterns; (c) citation networks to identify influential works; and (d) temporal overlay maps to track thematic evolution. Microsoft Excel was used for preliminary descriptive statistics, such as annual publication trends and country-level contributions. To ensure reliability and reproducibility, the search and screening process was repeated twice, and thematic relevance was independently verified by two reviewers.

This protocol aligns with established bibliometric research standards (Moral-Muñoz et al., 2020; Zupic & Čater, 2015)

RESULT AND DISCUSSION

An analysis of the Scopus dataset (n = 52) shows a steady increase in research on Brief Cognitive Behavioural Therapy (Brief CBT) interventions in educational settings. Growth has been most pronounced over the past five years, with 2022 marking the peak year at nine publications. This pattern reflects heightened academic attention to adolescent mental health recovery in the post-pandemic period. Unlike standard CBT, which often involves longer treatment cycles, Brief CBT is designed to be shorter, more targeted, and adaptable to school settings qualities that make it particularly relevant for adolescents in secondary education.

Table 1. Annual Distribution of Publications

Year	Number of Publications
2025	1
2024	6
2023	4
2022	9
2021	5
2020	2
2019	3
2018	5
2017	3
2016	3
2015	2
2014	3
2013	4
2012	0
2011	1
2010	1

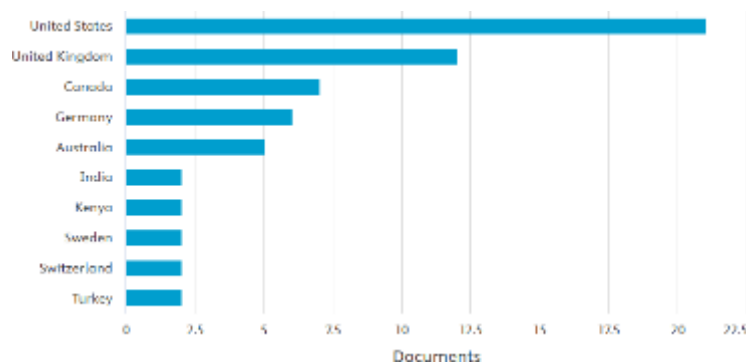


Figure 1. Document by Country and territory

The United States emerges as the largest contributor, with more than 20 publications, followed by the United Kingdom (approximately 12) and Canada. European countries such as Germany, Sweden, and Switzerland, as well as Commonwealth nations like Australia and India, also demonstrate notable

engagement. Although Kenya and Turkey have fewer contributions, their presence indicates emerging global participation. This pattern underscores the dominance of literature from developed countries while highlighting opportunities for broader contributions from developing regions in advancing culturally relevant, school-based CBT models.

In addition to geographical patterns, an analysis of author keywords reveals the thematic focus of current research. Preliminary findings indicate that the most frequently occurring terms are “Cognitive Behavioral Therapy” (CBT), “adolescents,” “mental health,” “intervention,” “anxiety,” and “school-based therapy.” The prominence of these terms signals the central role of adolescent populations and educational contexts in shaping Brief CBT research priorities. These recurring keywords also serve as the foundation for the thematic clusters discussed in the following section.

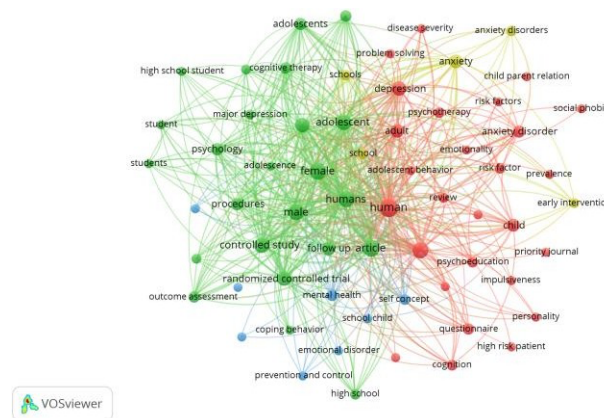


Figure 2. Keyword Co-occurrence Network Visualization

Figure 2 presents the keyword co-occurrence network, generated through bibliometric analysis, which identifies four primary thematic clusters, each represented by a distinct color. These clusters capture how research topics in Brief Cognitive Behavioural Therapy (Brief CBT) are interconnected within the context of secondary education. Unlike standard CBT, Brief CBT is designed to be shorter, more targeted, and adaptable to school settings, features that make it particularly suited for adolescent populations. The keyword co-occurrence analysis identified four main thematic clusters that collectively map the landscape of Brief CBT research in secondary education. The Population and Educational Context Cluster comprises keywords such as adolescents, school, female, male, and controlled study, reflecting a focus on the target population, secondary school students, and the institutional settings in which interventions occur. Studies in this area often examine demographic characteristics, school-level procedures, and how Brief CBT can be adapted to fit classroom or group-based environments.

The Emotional and Psychological Health Cluster contains terms including depression, anxiety, emotion, self-concept, psychopathology, and personality, centering on the psychological outcomes of Brief CBT. Research within this cluster explores the intervention’s effectiveness in alleviating affective disorders and enhancing emotional regulation, highlighting its role in addressing common internalizing problems during adolescence. The Prevention and Relational Factors Cluster is characterized by terms such as early

of Brief CBT. Finally, the Population and Application Contexts cluster contains terms such as adolescents, high school, and remote therapy, emphasizing the demographic focus and varied settings in which Brief CBT interventions are applied.

The color shift in the nodes, from purple to yellow, represents a temporal progression. Topics such as early intervention, emotion, and self-concept have emerged more prominently after 2019, reflecting new research directions. While mindfulness does not appear as a dominant node, related terms implying self-regulation and emotional awareness suggest that Brief CBT is increasingly integrated with contemplative practices. This highlights a shift from purely clinical therapy models toward hybrid approaches that combine cognitive-behavioural strategies, digital delivery methods, and social-emotional learning components. Overall, the overlay visualization shows that Brief CBT is evolving from an individual-level intervention into an essential part of adaptive, sustainable, and holistic school mental health systems.

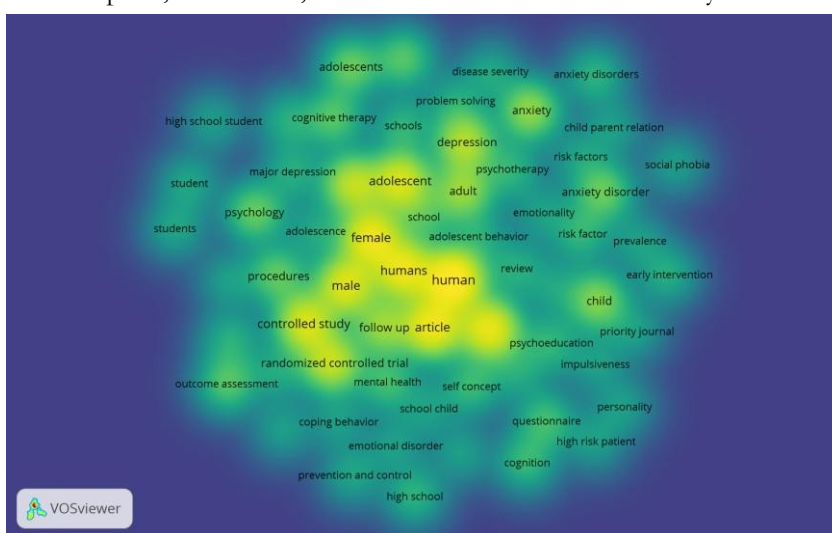


Figure 4. Keyword Co-occurrence Density Visualization

Figure 4 presents the keyword density map for publications on Brief CBT in secondary education. Lighter yellow to orange areas indicate higher keyword frequency, while green to blue areas show lower density. High-intensity terms such as human, adolescent, female, male, and controlled study form the thematic core of existing literature, emphasizing the focus on adolescent populations and controlled trial methodologies in evaluating CBT effectiveness in schools. By contrast, keywords like self-concept, early intervention, coping behaviour, and emotion appear in medium-to low-density areas. These represent emerging topics that are gaining attention in recent studies. Although mindfulness does not appear directly, related terms such as emotion, self-concept, and coping behaviour indicate an ongoing interest in self-regulation techniques commonly linked to contemplative approaches.

This visualization supports earlier findings from the network maps, confirming that current Brief CBT research focuses on population characteristics, intervention design, and outcome evaluation, with an expansion into social-emotional dimensions, personalized therapy, and technology-enhanced school-based interventions (Rohde et al., 2014; Spowart et al., 2023). Empirical evidence underscores these patterns: Rohde et al. (2018) demonstrated the effectiveness of group CBT in reducing depressive symptoms among adolescents in school contexts; Szász-Janocha et al. (2021) highlighted the role of

digital therapeutic models in reaching students in suburban areas through personalized internet interventions; and (Spowart et al., 2023) emphasized the contribution of CBT to improving executive function and emotional control in public school students. In line with broader developments, previous research Beck (2021); (Guzick et al.) 2022; (Haugland et al.) 2020; (Kato et al.) 2022; (Peter et al.) 2022; (Pile et al.) 2018) has also pointed to the growing importance of integrating preventive, social-emotional, and technology-based strategies into school mental health programs. These findings highlight both the established core and the emerging frontiers of Brief CBT research, providing a roadmap for expanding its application in diverse secondary education settings.

A bibliometric analysis of 52 articles shows that the literature on Brief Cognitive Behavioral Therapy (Brief CBT) in secondary education is shaped by the contributions of several leading authors and institutions.

Table 3. Top Contributing Authors and Institutions

Author	Document	Citation
rohde, paul	3	108
stice, eric	3	108
creswell, cathy	3	62
stallard,paul	3	24
conroad, patricia	4	66

The five most productive and influential authors are Paul Rohde, Eric Stice, Cathy Creswell, Paul Stallard, and Patricia Conrod. Rohde and Stice rank highest in both publications and citations, with three publications and 108 citations each. Their work has been pivotal in developing group-based Brief CBT models for adolescents, particularly in school-based depression prevention. Both are well known for their involvement in high-impact randomised controlled trials (RCTs) and large-scale intervention programmes in educational settings. Patricia Conrod, with four publications and 66 citations, stands out as the most prolific author by volume. Her research consistently focuses on implementing and evaluating CBT-based interventions for high-risk adolescent populations. Cathy Creswell has contributed three publications with 62 citations, reflecting her expertise in CBT for childhood anxiety disorders and family-based therapeutic approaches. Paul Stallard, with three publications and 24 citations, is widely recognised for applying CBT in school settings and for developing practical guidelines for children and adolescents. Collectively, these authors demonstrate the diversity of approaches in Brief CBT research from prevention of depression and anxiety to personalised, school-based strategies and underscore the value of empirical validation, innovation in intervention design, and cross-institutional collaboration. Beyond identifying leading contributors, the thematic analysis using VOSviewer reveals a marked shift in research focus and methodology over the past decade. Unlike standard CBT, which often follows longer, clinically focused protocols, Brief CBT has evolved toward approaches that are shorter, contextually adaptable, and feasible

within school environments. Heatmap visualisation highlights terms such as human, adolescent, anxiety, depression, and school at the thematic core, showing that adolescents with internalising issues remain the primary target group.

Between 2014 and 2018, research primarily examined individual, clinic-based CBT with a strong focus on symptom reduction for anxiety and depression (keywords: adolescents, major depression, emotional disorder). The prominence of terms such as controlled study, outcome assessment, and psychotherapy reflects the dominance of clinically controlled trials during this period, with limited school involvement. From 2019 to 2022, the focus shifted toward more collaborative, group-based approaches, as seen in the rise of keywords like school, school child, group therapy, and coping behaviour. This transition indicates stronger integration of CBT into formal education systems, including the use of classroom-based group CBT. Hybrid models combining face-to-face sessions and online modules also began to emerge, particularly in response to post-pandemic constraints on in-person psychological services. New themes, such as self-concept and emotionality, signalled broader interest in social-emotional dimensions. The period 2023–2025 shows even greater methodological diversification, with emerging keywords such as questionnaire, AI, child–parent relation, cognition, and digital therapy. These reflect the growing role of digital technology and family engagement in CBT delivery. Mobile app–based interventions and technology-supported RCTs have expanded, aligning with the current emphasis on personalised, data-driven mental health solutions. For example, a 2023 study in *Frontiers in Pediatrics* examined the link between executive function and emotional control in CBT for at-risk adolescents, while Brown et al. (2024) reported results from a national RCT on the cost-effectiveness of a school-based CBT model. In this context, keywords like mental health, priority journal, and public school system point to increased attention to accessibility and evidence-based policy.

Overall, these findings indicate an evolution of Brief CBT from traditional, clinic-centred models toward flexible, technology-enabled, and collaborative school-based strategies. Thematic mapping suggests that Brief CBT is becoming an integral component of educational practice and adolescent psychosocial development, serving not only as a therapeutic tool but also as a proactive framework for mental health promotion and long-term prevention.

The bibliometric analysis supports a major paradigm shift in psychological interventions from conventional, clinic-based, and individual approaches toward a more comprehensive and integrative educational framework.

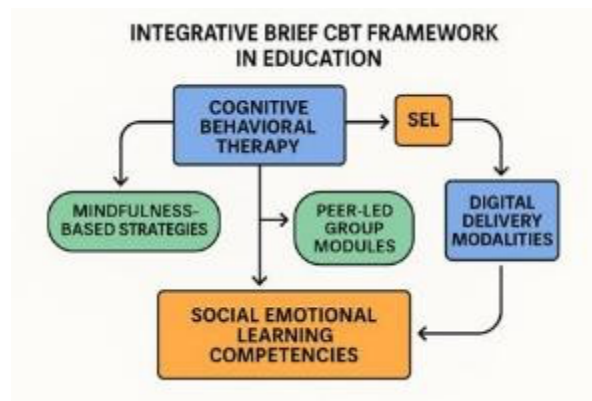


Figure 4 Concept Map of Brief CBT Paradigm Development

Figure 4 illustrates the conceptual evolution of Brief Cognitive Behavioral Therapy (Brief CBT) in this context. Unlike standard CBT, which often requires extended, clinic-focused sessions, Brief CBT has adapted to include digital delivery systems, mindfulness-based coping skills, and peer-led group modules. These components indicate that Brief CBT is no longer limited to clinical settings but is now positioned as a systemic and sustainable school mental health strategy. This integration is consistent with cognitive theory, which emphasises the role of automatic thoughts and core beliefs in shaping emotional and behavioural responses (Beck, 2021; Beck & Fleming, 2021). Empirical studies reinforce this connection. Research by Rohde et al. (2014, 2015, 2018) shows that implementing group CBT in school settings can significantly reduce depressive symptoms in adolescents. These studies validate Beck's theoretical framework in educational contexts, particularly when combined with social-emotional learning approaches and community-based interventions. Rohde and colleagues also made important contributions to developing group-based Brief CBT interventions aimed at preventing depression among adolescents. Through randomised controlled trials and school-based delivery, they demonstrated the effectiveness of these interventions in real-world settings. Their findings argue that short, structured interventions can be feasibly integrated into secondary school curricula, especially for high-risk students.

Other researchers have extended Brief CBT applications to anxiety disorders. Avci & Kelleci, (2016); Eppelmann et al. (2018); Guzick et al. (2022); Mansour et al. (2022); Peter et al. (2022) have adapted CBT approaches to emphasise family involvement and contextual support as key factors in school-based intervention success, particularly for primary and early secondary school students. This opens opportunities for developing age- and socio-emotionally sensitive CBT models. Further contributions come from Brown et al. (2024); Nethan et al. (2018); Taylor et al. (2022) who have implemented school-based CBT models in the United Kingdom. Their interventions combine psychoeducation, coping training, and relaxation techniques in classroom groups. Designed as low-cost, accessible, universal programmes, these approaches are particularly relevant for schools with limited resources. In addition, data-driven approaches have been used to identify students with impulsivity and substance abuse risk profiles. Through a series of RCTs, these studies show that school-based interventions with CBT elements can significantly reduce risky behaviours. Taken together, these findings

have strong theoretical implications: Brief CBT is emerging as an integrative, transdisciplinary, and technology-enhanced intervention model. It is not only aimed at reducing clinical symptoms but also at supporting character development and emotional well-being in students. The model blends cognitive psychology, contemporary pedagogy, and educational technology into an adaptive and sustainable school mental health support system.

Although this study highlights substantial progress in Brief CBT research within secondary education, the bibliometric analysis also reveals several research gaps. Addressing these gaps will require clear strategic directions for future studies, focusing on the development and implementation of Brief CBT in ways that respond to both empirical findings and practical needs in adolescent school populations. The proposed roadmap in the next section builds on these insights, combining topic gap analysis with field-based priorities to guide the next phase of research.

Tabel 4 Future Research Roadmap

Fokus Riset	Deskripsi Tujuan	Metodologi yang	Fokus Riset
<i>Cultural Adaptation Studies</i>	Developing a culturally adapted model of Brief CBT tailored to the values and local contexts of Southeast Asia and Africa.	Qualitative studies, participatory design, action research	Culturally relevant local CBT module prototypes
<i>Longitudinal Effectiveness Trials</i>	Assessing the long-term impact of CBT on students' emotional well-being, academic performance, and self-regulation.	Long-term RCT (>6 months), mixed-method longitudinal	Evidence of long-term effectiveness for data-informed policy
<i>Teacher-Led CBT Facilitation</i>	Engaging teachers as primary facilitators of low-intensity CBT in classroom or extracurricular settings.	School-based intervention training studies	Teacher training modules; improvement of students' emotional skills
<i>Family Integration in CBT Delivery</i>	Exploring parental involvement in CBT to strengthen therapeutic outcomes at home.	Experimental studies + household ethnography	Recommendations for family-based CBT programmes
<i>Tech-Enabled CBT Platforms</i>	Designing and testing AI-driven or gamified interactive CBT applications for adolescents.	User-centred design, trials	Low-cost, adaptable and accessible CBT applications
<i>School System Readiness</i>	Measuring institutional readiness to integrate CBT into the curriculum and school counseling services.	Surveys, school policy audits, FGDs with school principals	Guidelines for the integration of school-based mental health policies

This framework outlines six priority research areas with their objectives, methodological recommendations, and expected outputs. Its goal is not only to expand the scientific scope of CBT but also to create contextual, sustainable, and culturally relevant intervention models particularly in developing

countries where mental health resources are limited. The bibliometric review reveals three major research gaps. First, geographic gaps remain substantial: out of 52 publications analysed, only two originated from Southeast Asia and Sub-Saharan Africa. These regions face high prevalence of adolescent mental health disorders, restricted access to psychological services, and complex educational conditions (World Health Organization, 2024). The lack of research from these areas underscores the urgent need for culturally adapted, regionally specific CBT interventions.

Second, design gaps reflect a shortage of robust, long-term methodologies. Most studies still rely on quasi-experimental designs or short-term randomised controlled trials (RCTs), with few using longitudinal methods to assess sustained outcomes or ethnographic approaches to capture the socio-cultural context of school-based CBT (Peter et al., 2022). This is especially important in educational settings, where the benefits of interventions may take time to manifest and are influenced by complex environmental factors. Third, topic gaps show limited attention to family involvement and teacher facilitation in Brief CBT delivery. Yet these micro-systems are critical to intervention success. (Green et al. (2023) found that teacher participation in delivering CBT modules significantly improved participant retention and intervention effectiveness. Similarly, involving parents can extend therapeutic impact beyond school and foster supportive environments that enhance students' cognitive–emotional skills.

Addressing these gaps will require culturally grounded, scalable, and community-based Brief CBT models that reflect local socio-cultural dynamics. Longitudinal and participatory research involving key stakeholders, teachers, counsellors, and parents should be prioritised to ensure sustained effectiveness. Developing targeted training modules for teachers as Brief CBT facilitators offers a strategic opportunity to integrate mental health support into 21st-century school curricula

CONCLUSION

This study mapped the scientific landscape of Brief Cognitive Behavioural Therapy (Brief CBT) in secondary education using a bibliometric analysis of Scopus data. The results show a marked increase in publications over the past decade, with a notable peak after 2020. This trend reflects both the urgency of adolescent mental health issues and a shift from conventional, clinic-based therapy toward flexible, adaptive, and education-oriented interventions. Key findings reveal that school-based Brief CBT increasingly incorporates digital technology, mindfulness-informed coping strategies, and peer-facilitated group approaches. Theoretically, this aligns with Beck's cognitive–behavioural framework and extends its relevance by integrating social–emotional learning models. International collaborations have also played a vital role in innovation, effectiveness evaluation, and contextual adaptation of evidence-based interventions. Despite these advances, gaps remain in areas such as family involvement, teacher facilitation, and culturally adapted, long-term approaches. Future studies should prioritise longitudinal designs, community-based delivery, and locally relevant models, particularly in under-researched regions like Southeast Asia and Sub-Saharan Africa. The findings of this study provide actionable insights for educators, counsellors, and policymakers to design inclusive, integrated, and sustainable Brief CBT programmes that can be embedded

into school systems worldwide transforming them from isolated interventions into essential components of student well-being.

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