GROUP COGNITIVE BEHAVIOURAL THERAPY (CBT) FOR SUBSTANCE USE DISORDERS

**FACILITATOR TRAINING** 

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# Workshop Overview

- Group Therapy Overview Theory, Practice, Experience
- Theories of Addiction (The "Science")
- CBT Basics Theory, Practice, Experience
- Cognitive Conceptualization of Addiction
- Patient Assessments and Stages of Change
- Let's Get Started ... (Fundamentals, Structure, Format)
- Modules / CBT skills
- Challenges
- Further Reading (Reference List)
- Wrap-up

# Let's get started .... CBT Addictions Group Fundamentals

#### Overarching Tenants / Principles:

- Therapeutic relationship
- Collaboration
- Alliance / Trust
- Curiosity
- Motivational techniques
- Think about what you are thinking
- Teach patients to become their own therapists.

#### Skills / Tools / Techniques:

- Modules
- Focused in real time
- Shared experience

# Let's get started .... Structure of Group

- Active, directed, structured yet flexible
- Often 2 trained facilitators
- Compatible with other treatment
- Typically 90-120 mins
- Small (5) to large (12), brief
- Heterogonous makeup
- Collaborative, educational, supportive
- Combination of Socratic questioning and didactic teaching.
- Goals: harm reduction vs. abstinence
- Balance between skills development and group process
- Open versus closed

# Let's get started .... Introductions and Ground Rules. Risks



#### Introductions

Modelled by therapist
Who they are, why here,
addictions



#### **Ground Rules**

Come on time and every week (call)

Be supportive to each other

Be constructive

Equal time for all

Keep it practical

Do the homework

CONFIDENTIALITY

Tell us if you are unhappy

BE RESPECTFUL OF GROUP (intoxication)



#### Risks

Let's get started ....
Format of Sessions

- Check in (Daily Wellness Scale)
- Feedback from previous session, review of previous session's activities and agenda items.
- Review of homework
- Discussion of common themes from check-in
- Collaboratively agree on module or module(s) for agenda – based on check in themes
- Work through module using specific examples from members
- Elicit input from all group members.
- Summarize
- Assign homework



# Let's get started .... Format of Sessions (Daily wellness Scale)

Di	aily Well	11033	Scarc				
Week # ( )	M	Tu	We	Th	Fr	Sa	Su
Best	9	9	9	9	9	9	9
Very Good	8	8	8	8	8	8	8
Good	7	7	7	7	7	7	7
Better than Avg	6	6	6	6	6	6	6
Average	5	5	5	5	5	5	5
Worse than Avg	4	4	4	4	4	4	4
Low	3	3	3	3	3	3	3
Very Low	2	2	2	2	2	2	2
Worst	1	1	1	1	1	1	1
Positive Factors:							
Negative Factors:							

### Lets get started .... T/F Question

In Cognitive Behavioral Therapy for addictions you want a large group of people that all struggle with the same addiction.

• True or False?

**False** 

# Let's get started .... Modules



1) Stress Vulnerability and Harmful Effects of Substances



2) Cravings

Triggers, Cues & Urges
Coping with Craving



3) Refusal Skills and Assertiveness



4) Thought Records

Thoughts & Feelings
Biases / Cognitive Distortions



5) Behavioral Chain Analysis

# Let's get started .... Modules



6) Relationships

Healthy Dependency



7) Rebuilding Trust



8) Goal Setting



9) All Purpose Coping Plan

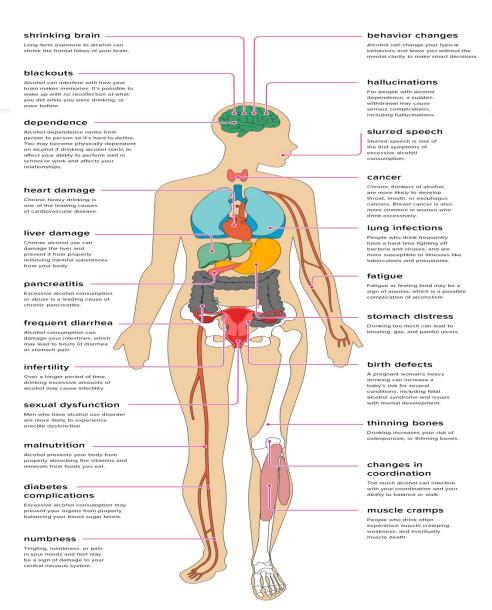
### **Module 1 – Effects of Substances**

- Stress Vulnerability Model and Harmful Effects of Substances.
  - Discuss the stress vulnerability model of psychiatric illness
  - Review examples of information available pertaining to various substances

"The Harmful Effects of ....."

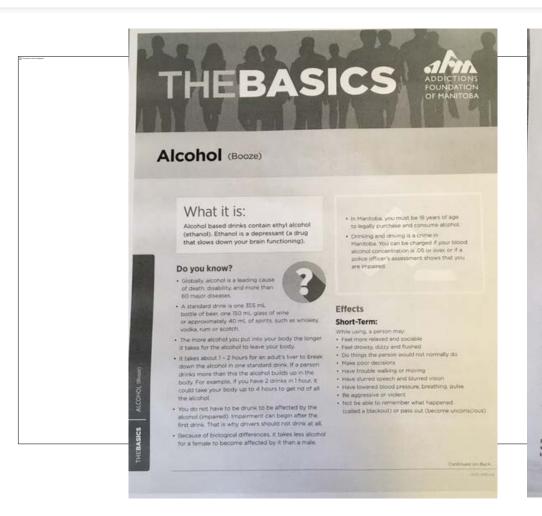
AFM resource brochures – "The Basics"

### **Harmful Effects of Alcohol**



# Harmful Effects of Substances: The Basics / Beyond the Basics

https://afm.mb.ca/resources/publications/



#### Long-Term: After repeated heavy use (5 or mondrinks per occasion for men and 4 REMEMBER A person's experience with any drug can vary or more drinks per occasion for women) over a long period of time. Some things that may affect the experience: the amount and strength of the drug, the setting. a person may experience: a person's mood and expectations before taking the Skin problems and stomach ulcers drug, gender, overall health, past experience with the Vitamin déficiencies drug, and whether more than one drug is being used . Sexual problems, such as decreased sperm production at the same time can be dangerous. infertility (the inability to have children) Mood changes and emotional changes · Brain damage and memory loss · Liver damage, heart and circulatory problems. Other Risks and many types of cancers . Mixing drugs (including medications) with alcohol can . Using alcohol during pregnancy can cause permanent (Drinking 5 or more standard drinks in a row for men damage to the baby's brain and other body systems. It and 4 or more for women) is best not to drink alcohol at all while pregnant. · A person may binge drink for a few hours or for several days, often or once in a while. . If a mother uses alcohol or other drugs while nursing . No matter how often it happens, binge drinking her baby, she can pass these substances to her baby through the breast milk. This can reduce the amount of Because alcohol is entering the body quickly, there are risks including alcohol poisoning secures, passing out, vomiting (which may lead to choking). Dreathing problems, blackouts (no memory of what was done milk the mother can produce, make it harder to release the milk, affect the baby's sleep, and have an effect on development and learning. People can put themselves and others in risky situations or said) and death. when drinking, including driving while impaired, having Immediate medical care is needed if a person shows unprotected sex, or taking other unsafe actions that signs of an alcohol overdose could harm themselves or others. . Never place someone who has passed out from alcohol . Alcohol use can also lead to bad decision-making and embarrassing actions that the person might regret. has passed out should never be left alone. . Substance use may increase the risk of mental health · Longer-term effects of binge drinking are similar to the long-term abuse of alcohol. higher risk of developing substance abuse problems Tolerance and Dependence · Alcohol use during one's youth (a time of important · People who use alcohol regularly can develop a brain development) may affect physical, mental, and tolerance, so more is needed to get the same effect. emotional development. · Tolerance (a need for more alcohol to get the desired effect) builds up the more a person drinks. This means a person may drink large amounts of alcohol, but does not show signs. We're Here For You of intoxication. This is a sign of problem drinking. · Users can become psychologically dependent If alcohol, drugs or gambling (feel they need alcohol) are causing problems for you · Physical dependence (the body needs alcohol) or someone you know, call us at does occur, especially with regular use. 1-866-638-2561 (toll free) Withdrawal Symptoms for information about our programs and services. . Less severe symptoms include hangovers (headaches. shakness, sensitivity to light and sound, nausea and vomiting). \* Contact us if you would like the sources for this info shee · More serious withdrawal symptoms can occur after or more information on the subject. long periods of regular, heavy drinking. They include aches, pains, increased blood pressure, rapid pulse. and breathing, vomiting, panic, seizures, hallucinations depression and death. withdrawal symptoms, contact a medical professional immediately or call 911.

## Module 1 – Homework Exercise

Harmful effects of substances.

1) Review "The Harmful Effects of ....." as they pertain to you. List at least 2 harmful effects you did not know about.

2) Review "The Basics" handouts and complete the table below.

Substance	Effects	Withdrawal Symptoms

# Module 2 : Cravings

- Discuss Cravings
  - Physical Sensations, Cognitions, Emotions
  - Graphical depiction of cravings (minutes, hours, days, months)
- Triggers & Cues
- Coping with Cravings

# **Module 2: Cravings MCQ**

- Cravings are typically time limited and last for:
  - A) 10-20 min
  - B) 5 min
  - C) Until you satisfy the craving
  - D) 2 hours

A) 10-20 min

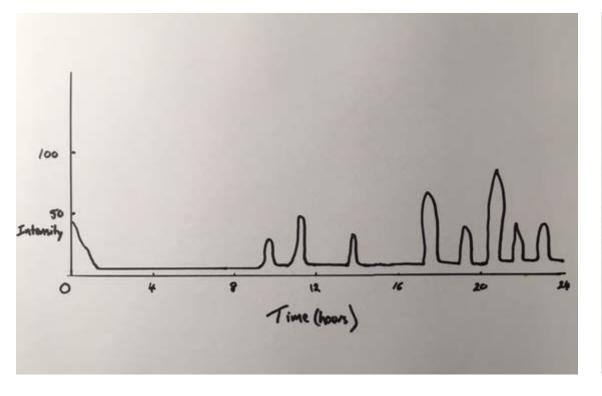
# **Cravings**

1

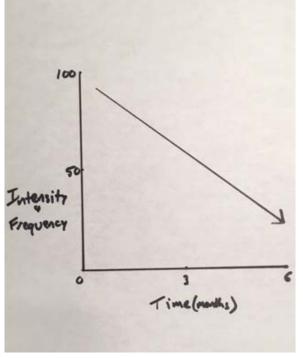
Intensity

Time (min)

2



3



# **Triggers and Cues**

- Distinguish Triggers and Cues for Cravings
  - Triggers typically interactions with others that generate strong emotional responses.
    - Disagreements with partners or family members
    - Interactions with supervisors or co-workers
    - Anxiety producing interactions or situations
  - Cues typically the inanimate forces in our environment (Classical Conditioning)
    - Day of the week, time of the day, physical environment
    - Smells, sights, sounds, settings (commercials/shows, MLLC, drug paraphernalia, odours)
    - Events paired with use beach, BBQ's, sports
    - Paycheques, cash

# **Coping with Cravings**

- Cravings come and go, 10-20 min blocks
  - Distraction (prepare a list of activities)
  - Recalling the negative consequences (index cards or wallet cards, phone notes) (pictures) ("rock bottom")
  - Talking through cravings with trusted individual
  - Utilizing self-talk
  - Guided imagery / mindfulness
  - Contingency management
  - Avoiding triggers / cues
  - Crave surfing
  - Substitution
  - Escape plan

## Module 2 – Homework Exercises

Description of Cravings
List of Triggers / Cues

#### **Description of Cravings**

Physical Sensations	Emotions	Cognitions

#### Listing of your Common Triggers / Cues

1	
2	
3	
4	
5	

#### **Module 2 – Homework Exercises**

**Daily Record of Craving** 

Date / Time	Situation, thoughts, feelings	Intensity of Craving (0- 10)	Length of Craving	Coping Skills Utilized
Example:				
Friday, 3 pm	Argument with boss, frustrated angry	7	20 min	Distraction (went for walk)

# Module 2: Triggers & Cues MCQ

- Which of the following would typically be considered a "trigger"?
  - A) Five o'clock in the afternoon
  - B) Pay cheque in pocket
  - C) Seeing your friend
  - D) Having and argument with your friend

D) Having an argument with my friend

# Modules 1 & 2....

- 1) Harmful effects of substances
- 2) Cravings, triggers, cues

Q&A

# Module 3 – Refusal Skills & Assertiveness

- Keys to success in managing addictions involve a number of significant changes to the ways in which individuals mange their lives
  - Assessing / Reducing Availability
  - Managing Cues
  - Assertiveness & Refusal Skills
  - Seemingly Irrelevant Decisions
  - Planning for high-risk situations



#### **Assertiveness and Refusal Skills**

• Example – Role Play

### Module 3 -Homework

Reducing availability

Refusal skills

#### 1) Reducing Availability of Substances

Ways to Reduce Access	Advantages	Disadvantages

2) Describe a recent situation in which you used assertiveness or refusal skills

### Module 3: Refusal & Assertiveness MCQ

- Planning to be a designated driver for your friends' party on the weekend is an example of?
  - A) A seemingly irrelevant decision
  - B) Planning for a high-risk situation
  - C) Reducing availability
  - D) Managing cues

B) Planning for a high-risk situation.

# **Module 4 – Thought Records**

- Core technique common to all CBT therapies
- Strategy for evaluating and responding to Automatic Thoughts
- Slows down our thinking
- Situationally based
- Dispute of Automatic Thoughts
- Identification of Cognitive Distortions
- Identification of Core Beliefs.



# **Module 4 – Cognitive Distortions**

All or nothing thinking

Catastrophizing

Discounting the positive

**Emotional reasoning** 

Labeling

Magnification / minimization

Mental filter

Mind reading

Overgeneralization

Personalization

Imperative statements "Should" "Must"



# **ABCD Thought Records**

A. Activating Event = **Situation** 

C. Consequences of thoughts = **Feelings** 

B. Beliefs about event = **Thoughts** 

D. **Disputes** 

# **Thought Records**

- Techniques to uncover **Automatic Thoughts** 
  - What are you thinking or imagining about this situation?
  - What is the worst thing that could happen?
  - What does this "say" about you?
  - What does this "mean" about you?
  - What does this mean for your future?
  - What are you afraid might happen?
  - What does this mean about how other people feel about you?



# **Thought Records**

- Techniques to uncover Core Beliefs
  - Where do you think these negative thoughts come from ?
  - Does this remind you of anything from your past?
  - When did you first become aware of such thoughts?
  - What about this situation is so upsetting to you?
  - What past experiences contributed to shaping these thoughts?
  - Did anyone in your family have similar beliefs?
  - What memories or images do I have of this situation?



# **Thought Records**

- The power is in the "Disputes"
  - More rational / realistic thinking
  - Broadening the lens looking at other aspects of life
  - Challenging assumptions
  - Finding evidence to the contrary
  - What would you tell a friend?
  - What is another way to look at this?
  - Are you blaming yourself for something out of your control?
  - Are there any strengths or positives in the situation you are ignoring?



# **Thought Record**

• Example – Role Play

# Module 4 - Homework

Thought Records (ABCD)

- 1) Complete one ABCD thought record for an emotionally charged situation you encountered over the past week.
- 2) See if you can identify the associated cognitive distortions or biases in your thinking.

### Modules 3 & 4....

- 1) Refusal skills & Assertiveness
- 2) Thought Records

Q & A

# **Module 5 – Behavioral Chain Analysis**

- Typically used for assessing using situations / slip-ups, close calls.
- Can be helpful in analyzing:
  - Triggers / cues
  - Decision points
  - Patterns of use
- Can help identify situations for Thought Records
- Can help identify alternative decisions

# Behavioral Chain – using situation

