



An Effective Way to Operate Cognitive Behaviour Therapy (CBT) Groups in the CAF

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Agenda

- Structure;
- Psychometrics;
- Clinical Notes;
- Clinical Tools Applied;
- CBT Group, Session by Session;
- How to Build the Social Dynamic of Group;
- Effectiveness of CBT Group;
- Successes and Challenges;
- Conclusion.



CBT Group Structure

- 2 Co-facilitators
- 6-9 group members, diagnosed with depression and/or anxiety.
- 14 sessions, held twice a week for 90 minutes each session.
- Group rules: Participation, Respect and Feedback.
- The Mind over Mood book (Padesky & Greenberger) is the group workbook.
- Every session begins with a Check In (how have you been doing?) and ends with a Check Out (how did you find this session?).
- Dress: casual civilian attire



Psychometrics

- Anxiety Measure: PROMIS Emotional Distress – Anxiety – Short form
- Depression Measure: Severity Measure for Depression – Adult, adapted from the Patient Health Questionnaire – 9 (PHQ-9)
- Both measures are administered before the start of each session.
- Both measures are available for free download:
- <http://www.psychiatry.org/practice/dsm/dsm5/online-assessment-measures>



Clinical Notes

- A clinical note is written for every client attending group every session; a note is also prepared for absences from group.
- The clinical note is prepared generic to the subjects reviewed and presented at the group session, with any individual notations added as deemed necessary.
- The notes are prepared and then scanned into every mbr's CFHIS file.
- Screening notes are written before group and discharge notes are written at group conclusion; in both cases the needs of the client are noted at that time.



Clinical Tools Applied

- CBT Resources: Activity Diaries, ABC Worksheets, Thought Records, Responsibility Pies, Experiments, Actions Plans, Core Beliefs & Exposure work.
- The STAIR (Skills Training in Affect and Interpersonal Regulation) Program from the US VA; principally how to determine present problematic interpersonal schemas and develop alternative interpersonal schemas. Further, role plays are conducted practicing 'I' statements with the format behaviour → feeling → consequence.
- Psycho-education regarding CBT, including automatic negative thoughts & how to challenge such. Instruction is given in how to engage emotional regulation using your body, behaviour & thoughts



CBT Group, Session by Session

- **Screening:** The mbr is screened and determination is made if CBT Group is appropriate for them (can they attend all sessions, are they ok with sharing in group, do they have the concerns targeted by the group (anxiety and depression)). If accepted into group, the mbr is issued with their first homework assignment: Chapters 1 (Understanding your Problems), 2 (It's the Thought That Counts), 10 (Understanding Depression) and 11 (Understanding Anxiety) of Mind over Mood and a review of relaxation techniques, healthy living, sleep hygiene, mindfulness and the CBT-I Coach and Mindshift apps.
- **Session 1:** *Education about Anxiety, Depression and the CBT dynamic:* Every group mbr completes worksheet 1.1 (Understanding My Problems) and shares this work the group



Sessions 2 & 3

- **Session 2:** *What You Think and What You Do Is Important:* Review of Chapter 3 (Identifying and Rating Moods) and Chapter 4 (Situations, Moods and Thoughts) of the Mind over Mood book. Introduction of Automatic Negative Thoughts (ANTs) and how to manage such. Introduction and completion of ABC Worksheet. Introduction of Emotional Regulation Strategies. Introduce ANT theme log (listing common ANTs problematic to each mbr)
- **Session 3:** *Working with Manufactured Emotions:* Review of Chapter 5 (Automatic Thoughts) and Chapter 12 (Understanding Anger, Guilt and Shame). Review of homework completed on ABC worksheets and completion and review of Responsibility Pies.



Sessions 4, 5 & 6

- **Session 4:** *Practiced Employment of Challenging Negative Thinking.* Review of Chapter 6 (Where's the Evidence) of Mind over Mood. Continued work and presentation of Responsibility Pies. Review of work completed on ABC Worksheets and ANTs.
- **Session 5:** *Thought Record Themes.* Review of Chapter 7 (Alternative or Balanced Thinking) and completion of full Thought Record as a group. Using challenging situations driving as a common experience is helpful. Review ANT theme logs.
- **Session 6:** *Working with Exposure.* Work on Thought Records. Introduction of how to use exposure in treating anxiety (using the resources Facing Your Fears: Exposure from AnxietyBC.com)



Sessions 7, 8 & 9

- **Session 7:** *Work on Goals & Experiments.* Review of Chapter 8 (Experiments & Action Plans). Experiments are reviewed that would help mbrs believe more strongly balanced thoughts they have developed and the goals of group mbrs are reviewed focussing on problems in the way of such goals and strategies to deal with such problems.
- **Session 8:** *Introduction of Core Belief Work:* Review of Chapter 9 (Assumptions & Core Beliefs). Determination of problematic core beliefs using thought record themes or the 'downward arrow technique.' Work is conducted refuting negative core beliefs and supporting positive core beliefs.
- **Session 9:** *Continued Core Belief Work,* focused on Self, Others and the World.



Sessions 10, 11 & 12

- **Session 10:** *Introduction of Interpersonal Schemas & Role Play.* Session is begun with review of a Thought Record, then interpersonal schemas are described. The process of determining problematic interpersonal schemas is reviewed as are 'I' statements. Alternative interpersonal schemas are developed and shared. The process of interpersonal role plays is introduced (mbr is themselves in a challenging circumstance with another, then takes the other's role with the other person using 'I' statements and then takes their role again and uses 'I' statements themselves).
- **Session 11 & 12:** *Continued work on Interpersonal Schemas, Interpersonal Role Plays, Thought Records, Action Plans & Core Beliefs.*



Sessions 13 & 14

- **Session 13:** *Skill Review & Relapse Prevention.* Review of the “How to Prevent a Relapse” resource of AnxietyBC.com. Each group member is asked to describe the most helpful tools from CBT Group and the learning they have gained from the other members of the group.
- **Session 14:** *Group Wrap Up.* The group meets for a few minutes to say goodbyes and thanks to all members of the group, then each mbr is consulted individually by the facilitators and determination is made of the changes they have accomplished and any future needs they may have. After this session a discharge note is written for each group members and any referrals required to services requested into the future are completed.



How to Build the CBT Group Team

- The group should start with the knowledge that the work of the group is a team effort and that participation, respect and feedback are expected from everyone throughout the group process.
- Completion & presentation of Worksheet 1.1 Understanding my Problems of the Mind over Mood book is crucial during session 1 to engage all group members and begin the process of social sharing.
- During session 2, it is crucial to introduce the ABC Worksheet, have every mbr complete it and present it to the group.
- During session 3, it is crucial to introduce the Responsibility Pie and have every group mbr present their work to the group.
- For the sessions 4-14, it is crucial to request the participation of every group mbr during every session.



CBT Group Results

Group 3 Nov 14 – 29 Jan 15 (8 mbrs). Measure: Mind over Mood Anxiety and Depression Inventories.

- Average Anxiety Score at Start of Group: 36.4
- Average Anxiety Score at End of Group: 20 (45% decrease)
- Average Depression Score at Start of Group: 34.14
- Average Depression Score at End of Group: 15.6 (54% decrease)



CBT Group Results

Group 9 Feb 15 – 26 Mar 15 (7 mbrs). Measure: Mind over Mood Anxiety and Depression Inventories.

- Average Anxiety Score at Start of Group: 37.4
- Average Anxiety Score at End of Group: 26.20 (30% decrease)
- Average Depression Score at Start of Group: 31.9
- Average Depression Score at End of Group: 16 (49% decrease)



CBT Group Results

Group 19 June 15 – 14 Aug 15 (4 mbrs). Measure: PROMIS Anxiety Measure and PHQ-9 Depression Measure.

- Average Anxiety Score at Start of Group: 58.85
- Average Anxiety Score at End of Group: 47.975 (18% decrease)
- Average Depression Score at Start of Group: 10.5
- Average Depression Score at End of Group: 5.75 (45% decrease)



Successes & Challenges

- Group members report enjoying the group process as described and finding the process helpful to them in attenuating anxiety and depression. The majority of group members do not require any services after completion of CBT Group.
- Overall, the dosing of CBT Group is important, in that those who attend and complete the required work gain the most from group. Lack of attendance and lack of work completion during group leads to poorer outcomes.
- The involvement of the social dynamic within group is critical to the success of group. Participation is the most critical factor in group and those who adamantly do not believe in group or persevere in not being involved in the group process must be invited to engage individual counseling so they do not impair the group process for others.



Conclusion

- Employment of CBT Group as described demonstrates positive effect in attenuating anxiety and depression at CBT Gagetown and is thus recommended for engagement at different CAF clinical settings as well.



Questions?

