

# Cognitive Behavioral Therapy for Substance Use Disorders

Presented by

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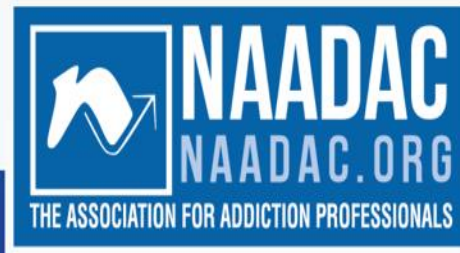
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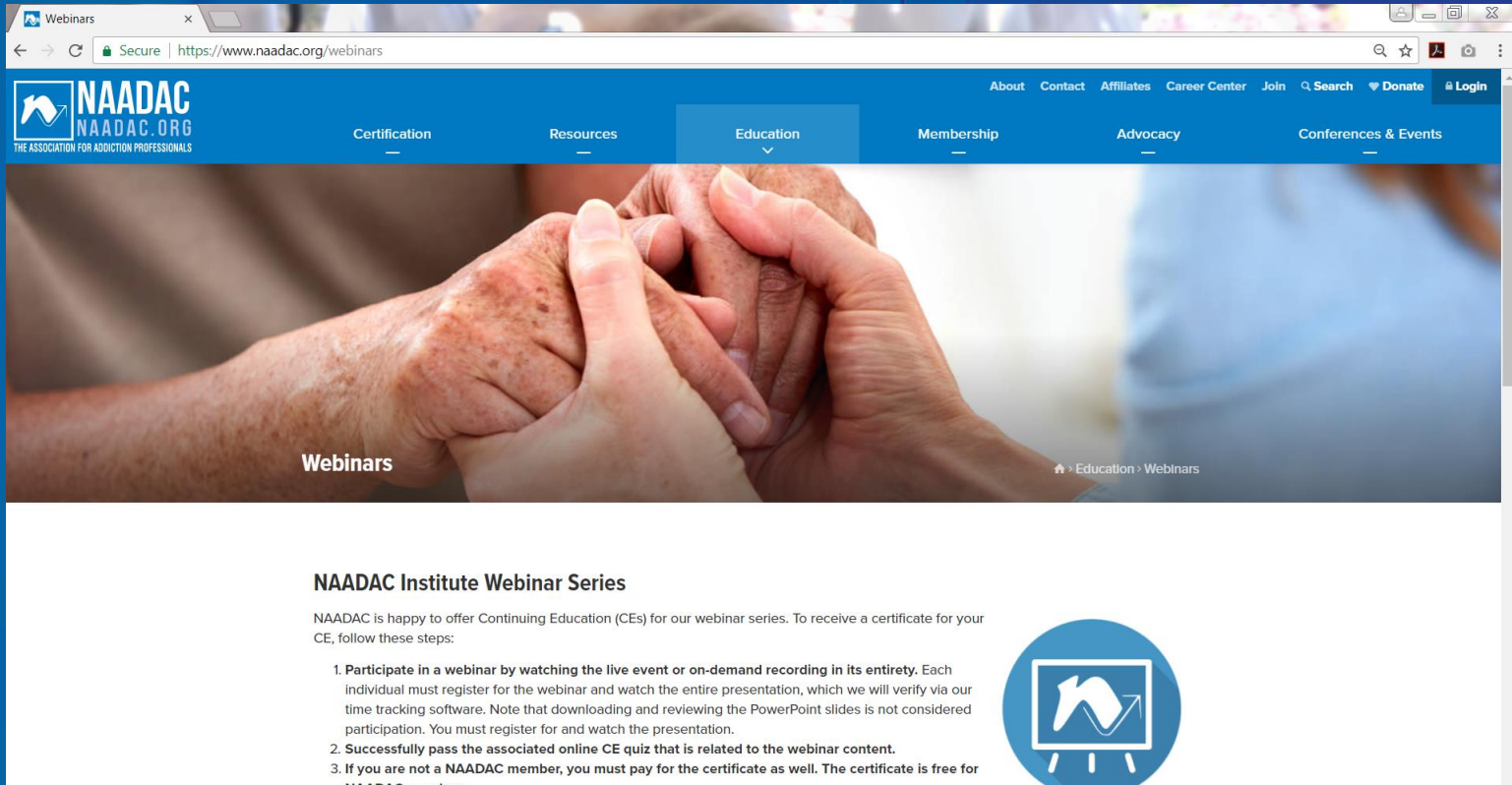
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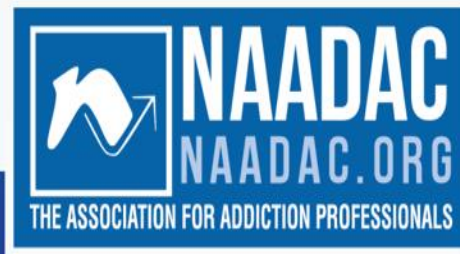
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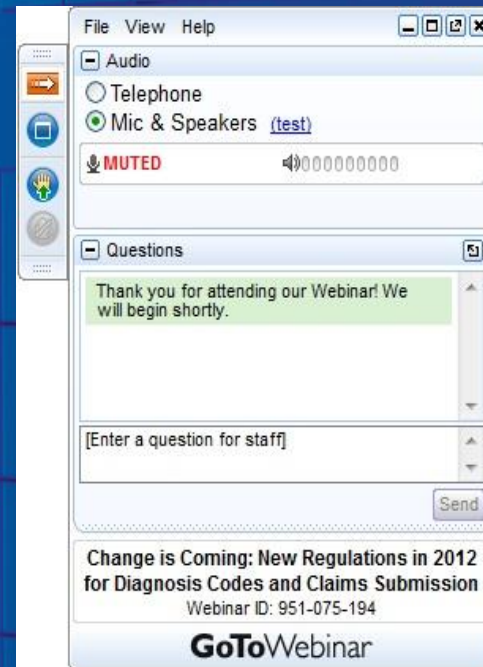
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# Webinar Presenter

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# Webinar Learning Objectives

1

LO #1 Identify the basic components of CBT

2

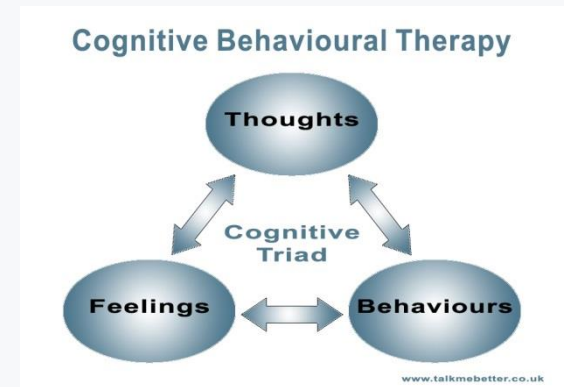
LO #2 Apply structure to substance use disorder treatment

3

LO #3 Navigate through the barriers to change behaviors

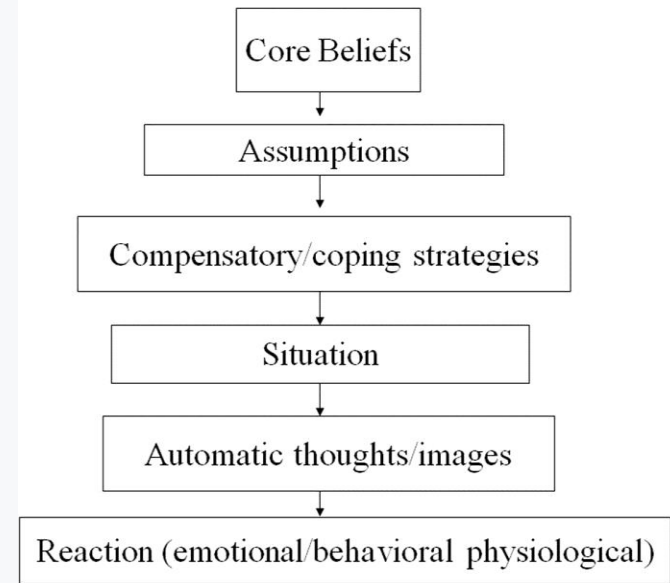
# Brief Intro to CBT

- We react without knowledge of internal processes.
- Core beliefs will generate automatic thoughts.
- Our initial reaction will be felt.
- Our feeling will then dictate our behavior.
- Ineffective behaviors strengthen distortions and core beliefs.



# Core Beliefs

- Combination of life interactions.
- The way we make sense of the world.
- Reinforced through experience.
- Different than spiritual beliefs.
- We may not explore our core beliefs.
- Be set during childhood and exist over lifetime.



# Beliefs Translated to Thoughts

- Anxiety: “Something bad will happen to me.”
- Depression: “Life is pointless.”
- Paranoia: “People are out to get me.”
- BPD: “Everyone hurts me.”
- Substance use: “Life is too painful.”



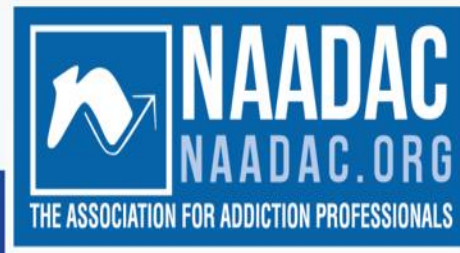
# Core Beliefs



Like a set of colored glasses, core beliefs will impact the view and interpretation of events.

# Core Beliefs and Behavior

1. Core beliefs molded through lifetime experience.
2. Trigger occurs and is interpreted through beliefs.
3. Internal feeling arises as a result of the trigger.
4. Behavioral response occurs based on thought/ feeling.
5. Behavior is viewed as purposeful even if unhelpful.
6. The response of behavior enforces core belief.
7. Cycle continues.





# Occurrences for Substance Users

Trigger: Fight or Argument



Negative World View



Automatic Thought:  
"Life isn't fair"  
"I deserve better"



Feelings: Angry, frustrated,  
sad, hopeless



Action: Cope by using  
alcohol or drugs-  
immediate change in  
feeling.



Drug wears off: self  
frustration, irritability,  
hopelessness





# Cognitive Processes of Substance Use

Self efficacy- ones faith in their ability to cope.

- “I can’t handle this problem.”
- “There’s no way I can do this.”

Outcome expectancies of substance.

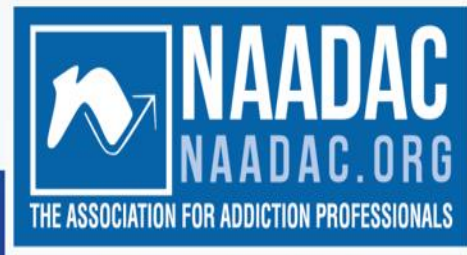
- “I don’t have to put up with my problems.”
- “I will feel better.”

Attributions of causality: internal or external.

- “Anyone would use if they lived where I live.”
- “I have anxiety and alcohol is the only thing that helps.”

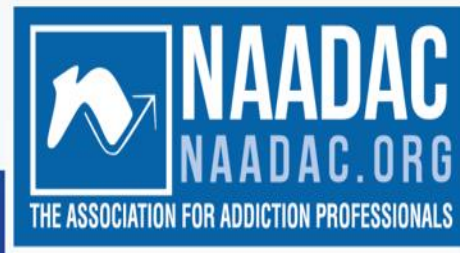
Decision making process: contributing factors of use.

- Being around triggers as opposed to sober supports.



# Inaccurate Beliefs About Using

- “Getting high makes life tolerable.”
- “I can be more social if I use.”
- “Nothing bothers me when I am high.”
- “I am more relaxed.”
- “I need to get high.”
- “There’s nothing to do.”



# Clarity, Cravings, and Urges

- Clarity: can see how drug use harms life.
- Craving: automatic thoughts, focus on benefits of use and ignore drawbacks of use.
- Urges: the cravings are turned into an action.



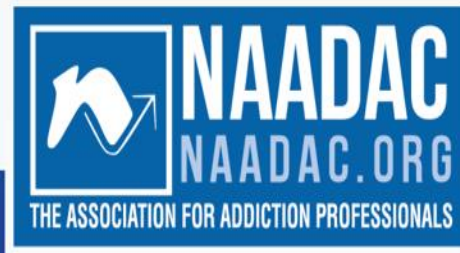
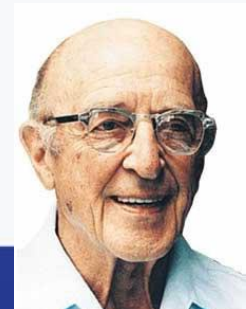
# Modifying core beliefs

- Help client become aware of their thoughts.
- Work to assess accuracy of thoughts.
- More accurate thoughts contribute to more manageable emotions.
- Manageable emotions allow for consideration of several behavioral responses.
- More effective response is chosen.
- Improved outcome challenges core belief.



# Therapeutic Relationship

- Built on collaboration and respect.
- The clinician is NOT the expert.
- Warm and empathic.
- Respectful when challenging.
- Built on modification and flexibility.
- Help the client feel better.



# Process of Therapy

## Initial Sessions:

### Educating Clients on CBT:

<http://www.specialtybehavioralhealth.com/wp-content/Cognitive%20Therapy%20Overview1.pdf>

- a) build rapport
- b) focus on problem definition
- c) goal setting
- d) symptom relief
- e) psychoeducation
- f) behavior interventions

## **DISCUSS TERMINATION IN INITIAL SESSION- TIME LIMITED TREATMENT**

Middle Sessions: Helping patients use CBT outside of session.

Termination: Time limited therapy with relapse prevention.





# Session Structure

1. Mood check
2. Setting the agenda
3. Bridging from last session
4. Today's agenda items
5. Homework assignment
6. Summarizing throughout and at the end
7. Feedback from patient





# Metacognition

- Help clients become aware of internal processes when triggers occur.
- Give words to the thoughts and images.
- Help client become aware of how often these occur.
- Build connection between triggers, thoughts, feelings, and actions.



# Thought Record

**Daily Mood and Thought Record** Day: \_\_\_\_\_ Date: \_\_\_\_\_

	Mood	Intensity (1-10)	Events	Thoughts
example	Depressed Happy Anxious	4 3 6	Criticized by friend Joe Went to see a movie at theatre Got bank statement	"I just can't do anything right recently." Image/memory of positive time in my life. "If I can't get out of debt, I'll lose my family."

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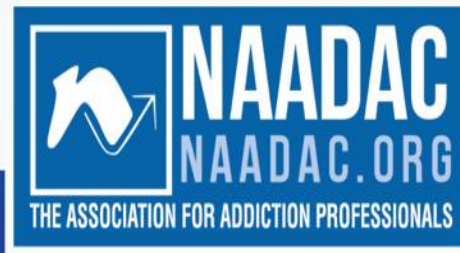
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# Cognitive Distortions

- Inaccurate assumptions of situation.
- Can be driven by feelings.
- May leave out important aspects.
- Limited response to a trigger.
- Exacerbates negative moods.
- Source of conflict with others.

# Cognitive Distortions

- **Perfectionism:** all or nothing thinking.
- **Should statements:** arbitrarily setting standards.
- **Overpersonalization:** taking too much responsibility.
- **Selective attention:** focusing only on one aspect.
- **Denial:** Failing to see your own role in a problem.
- **False-permanence:** thinking things are more permanent than they really are.
- **Overgeneralizing:** a single event becomes applied to future events.
- **Catastrophizing:** making things out to be worse than they are.
- **Magical thinking:** everything would be better if...
- **Emotional Reasoning:** acting as if emotions are reality.
- **Mind reading:** assuming what others are thinking.
- **Double standard:** being more harsh on yourself than you are to others.
- **Self Centeredness:** only seeing your own perspective.
- **Fallacy of fairness:** believing life must be fair.



<http://www.specialtybehavioralhealth.com/wp-content/Common%20Unhealthy%20Thought%20Patterns.pdf>

# Ways to Challenge Thoughts

What's the evidence for and against this thought?

What would I tell a friend with this same situation (rather than what I tell myself)?

What's the worst that could realistically happen? How bad would that be?

Is it really true that I must, should, or have to...?

Am I over-generalizing from a past occurrence?

Are there other explanations besides blaming myself?

Is there any conceivable way to look at this positively?

Is this situation really in my control?

What difference will this make next week, month, or year?

Is thinking this way helping the situation or making it worse?

How have I tolerated these situations in the past?

How can my religious or spiritual beliefs help me with this?

What advice would a therapist or mentor give me regarding this situation?

What can I accept about the situation?

# Making New Responses

## New Responses Worksheet

Event or Situation:

Feelings:

Behaviors Not Supporting Goals or Values:

Automatic Thoughts

More Realistic or Healthier Beliefs

Acceptance of Feelings:

New Behaviors that Support Goals and Values:

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## New Responses Worksheet

Event or Situation: I got into an argument with my family

Feelings: Frustrated, angry, sad, hopeless

Behaviors Not Supporting Goals or Values: I contacted my dealer and I got high

Automatic Thoughts

More Realistic or Healthier Beliefs

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## New Responses Worksheet

Event or Situation: I got into an argument with my family

Feelings: Frustrated, angry, sad, hopeless

Behaviors Not Supporting Goals or Values: I contacted my dealer and I got high

### Automatic Thoughts

I am worthless

I will never beat this addiction

Life isn't fair

My family makes it worse

Things were better when I was using

What is the point in trying?

### More Realistic or Healthier Beliefs

Acceptance of Feelings:

New Behaviors that Support Goals and Values:

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### More Realistic or Healthier Beliefs

Thinking this way doesn't help

There have been times my family was helpful

I have been able to have some clean time in the past

If I work at it, I can improve my relationships

My family may be mad but they get over it

There are people that love me

I would tell someone else to not give up

Acceptance of Feelings:

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My family may be mad but they get over it

There are people that love me

I would tell someone else to not give up

**Acceptance of Feelings:** Less frustrated, less angry, more hopeful, more at peace

**New Behaviors that Support Goals and Values:** Contact my sponsor, look for jobs, do some volunteer work

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# Homework

- Necessary for CBT and helps reduce relapse.
- Become aware of/ challenge thought process.
- Can list effective and ineffective coping.
- Helps to build self efficacy.
- Connect to sober and social supports.



# Benefits of Sober Support Groups

- Provides living evidence against assumptions.
- Support group info challenges core beliefs.
- Learning occurs through repetition.
- Gives a list of alternative coping strategies.
- Provides a list of social supports.
- Increases sobriety.



# The 12 Promises of AA

- If we are painstaking about this phase of our development, we will be amazed before we are halfway through.
- We are going to know a new freedom and a new happiness.
- We will not regret the past nor wish to shut the door on it.
- We will comprehend the word serenity, and we will know peace.
- No matter how far down the scale we have gone, we will see how our experience can benefit others.
- That feeling of uselessness and self-pity will disappear.
- We will lose interest in selfish things and gain interest in our fellows.
- Self-seeking will slip away.
- Our whole attitude and outlook upon life will change.
- Fear of people and of economic insecurity will leave us.
- We will intuitively know how to handle situations which used to baffle us.
- We will suddenly realize that God is doing for us what we could not do for ourselves.

# Integration with other techniques

- Person centered helps to build rapport.
- Motivational interviewing helps to challenge negative assumptions.
- Gestalt therapy helps to become aligned with feelings.
- Reality therapy helps to explore other options as opposed to using.





# CBT and Substance Use

- Substance use is a coping strategy.
- Core beliefs generate automatic responses to triggers.
- When we are unaware of or don't challenge our thoughts, we maintain distortions.
- Distortions will exacerbate feelings causing us to cope with substances.
- Challenging thoughts improves behaviors which improves mood and modifies beliefs.

# Questions?

## References:

Beck, J. (2011). *Cognitive therapy: Basics and beyond* (2<sup>nd</sup> ed.). New York, NY: Guilford Press.

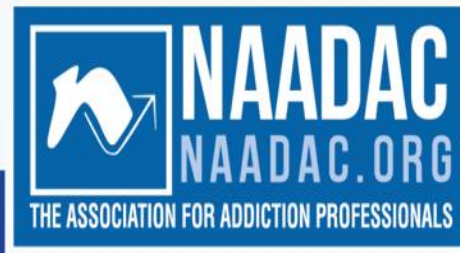
Beck, A., Wright, F., Newman, C., & Liese, B. (1993). *Cognitive therapy of substance abuse*. New York, NY: Guilford Press.

Berman, A., Forsberg, L., Durbeej, N., Kallmen, H., Hermansson, U. (2010). Single-session motivational interviewing for drug detoxification inpatients: Effects of self-efficacy, stages of change and substance abuse. *Substance Use & Misuse*, 45(3), 384-402.

Doweiko, H. (2009). *Concepts of Chemical Dependency* (7<sup>th</sup> Ed.) Belmont, CA: Brooks Cole Publishing.

Friedberg, R., Gorman, A., Beidel, D. (2009). Training psychologists for cognitive-behavioral therapy in the raw world: A rubric for supervisors. *Behavior Modification*, 33(1), 104-123.

Hofman, S., (2007). Cognitive factors that maintain social anxiety disorder: A comprehensive model and its treatment implications. *Cognitive Behaviour Therapy*, 36 (4), 193-209.





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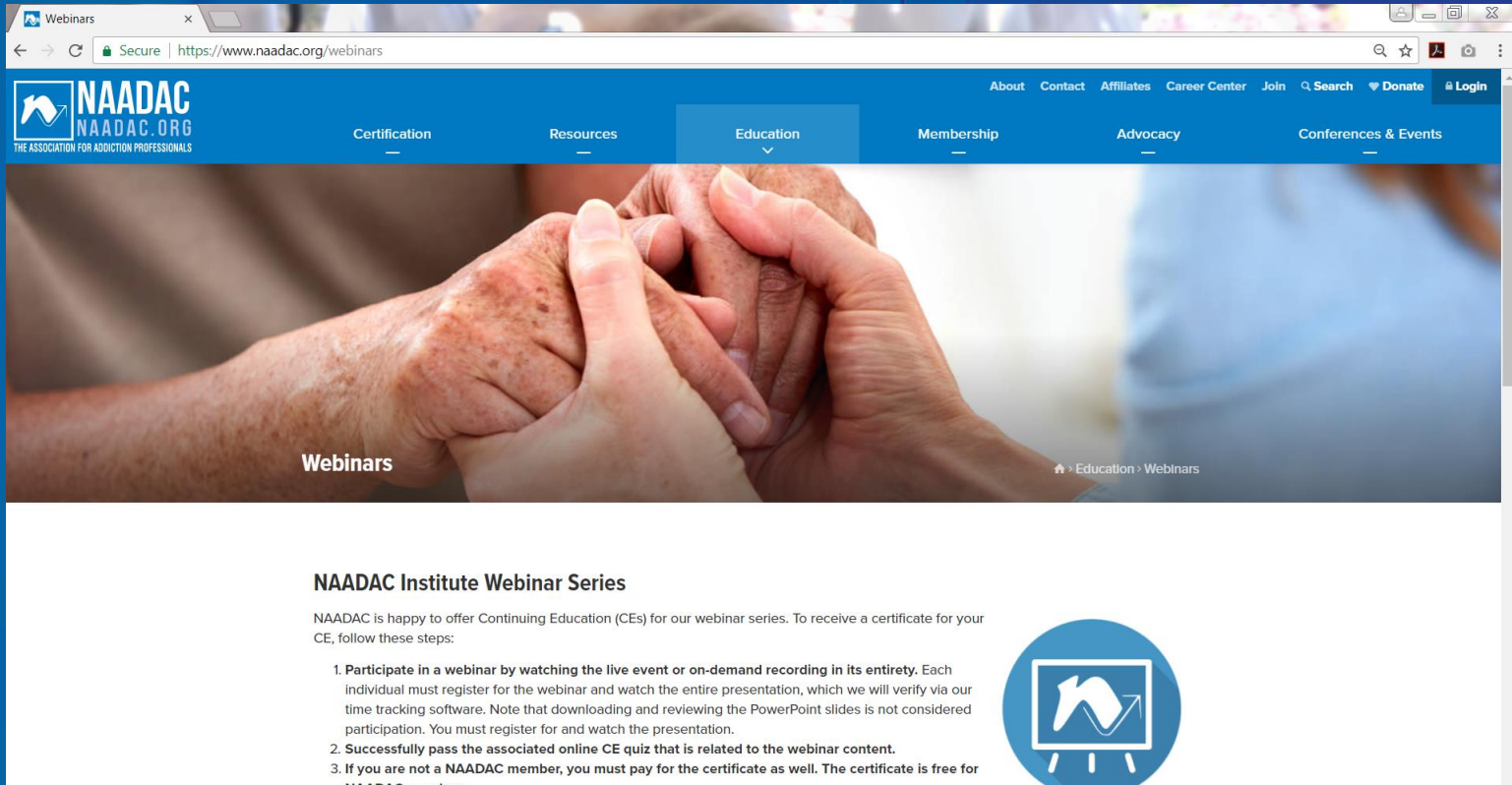
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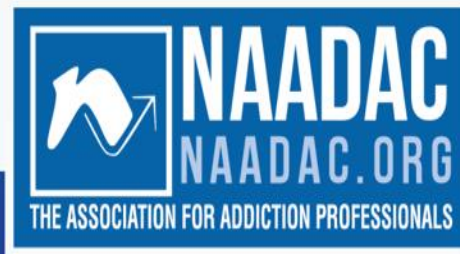
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**By Cynthia Moreno Tuohy, BSW, NCAC II,  
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November 14, 2018

**Recognizing Eating Disorder Behavior in the  
Substance Use Disorder Population**

**By Robin Cruze, MA and Linda Lewaniak, LCSW, CAADC**



November 28, 2018

**Using Harm Reduction Strategies to Move Clients  
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**By Arcintina Clark, LMSW**



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**By Libby Stuyt, MD**

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