

Cognitive Behavioral Social Skills Training (CBSST)

Eric Granholm, Ph.D.
University of California, San Diego



CBSST.org

Evidence-Based Psychosocial Interventions for Schizophrenia

Recommended by PORT, APA & nationalized healthcare systems (e.g., UK, VA, CPA...):

- ❖ Supported Employment
- ❖ Assertive Community Treatment
- ❖ Psychoeducation
- ❖ Behavioral Family Therapy
- ❖ Social Skills Training (SST)
- ❖ Cognitive-Behavioral Therapy (CBT)

3 CBSST Modules: 6 Sessions Each

- **Cognitive Skills Module**
 - Cognitive Restructuring: 3C's; Behavioral Experiments targeting defeatist beliefs
 - Mistakes in Thinking (All-or-None, Jumping Conclusions)
- **Social Skills Module**
 - Basic Communication Skills
 - Making requests, conversations, negative feelings
- **Problem Solving Skills Module**
 - Problem Solving Training (SCALE)
 - Targeting recovery goals

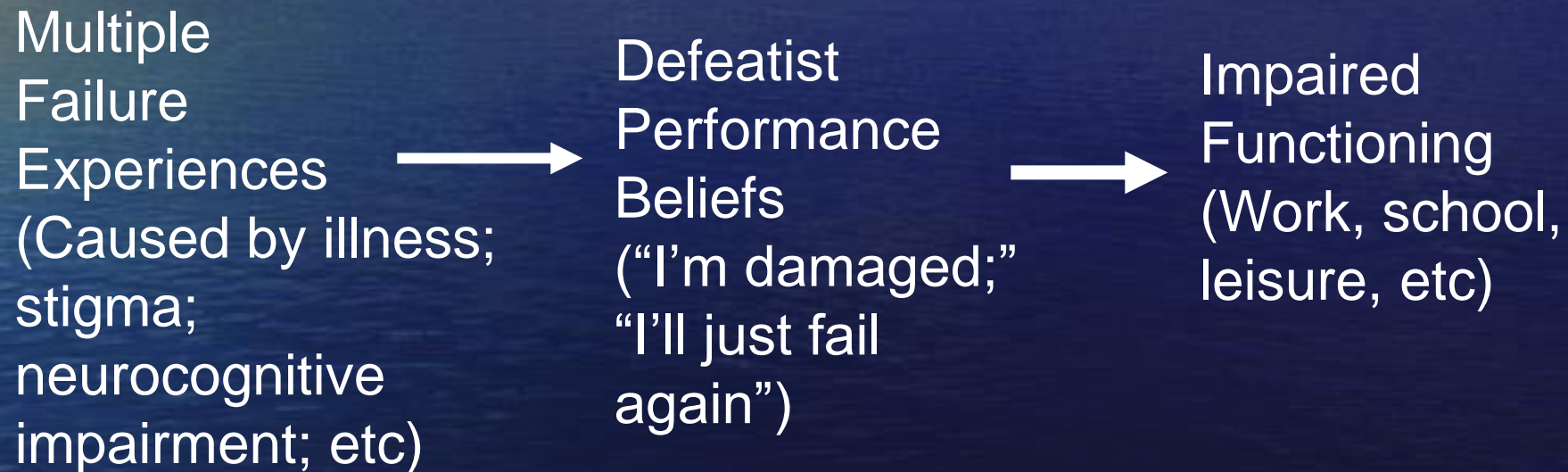
CBT+SST=CBSST

Why add CBT to SST?

Sometimes people have the skills but don't use them.

This is often because a thought is in the way.

Rationale for CBT for Recovery in SMI

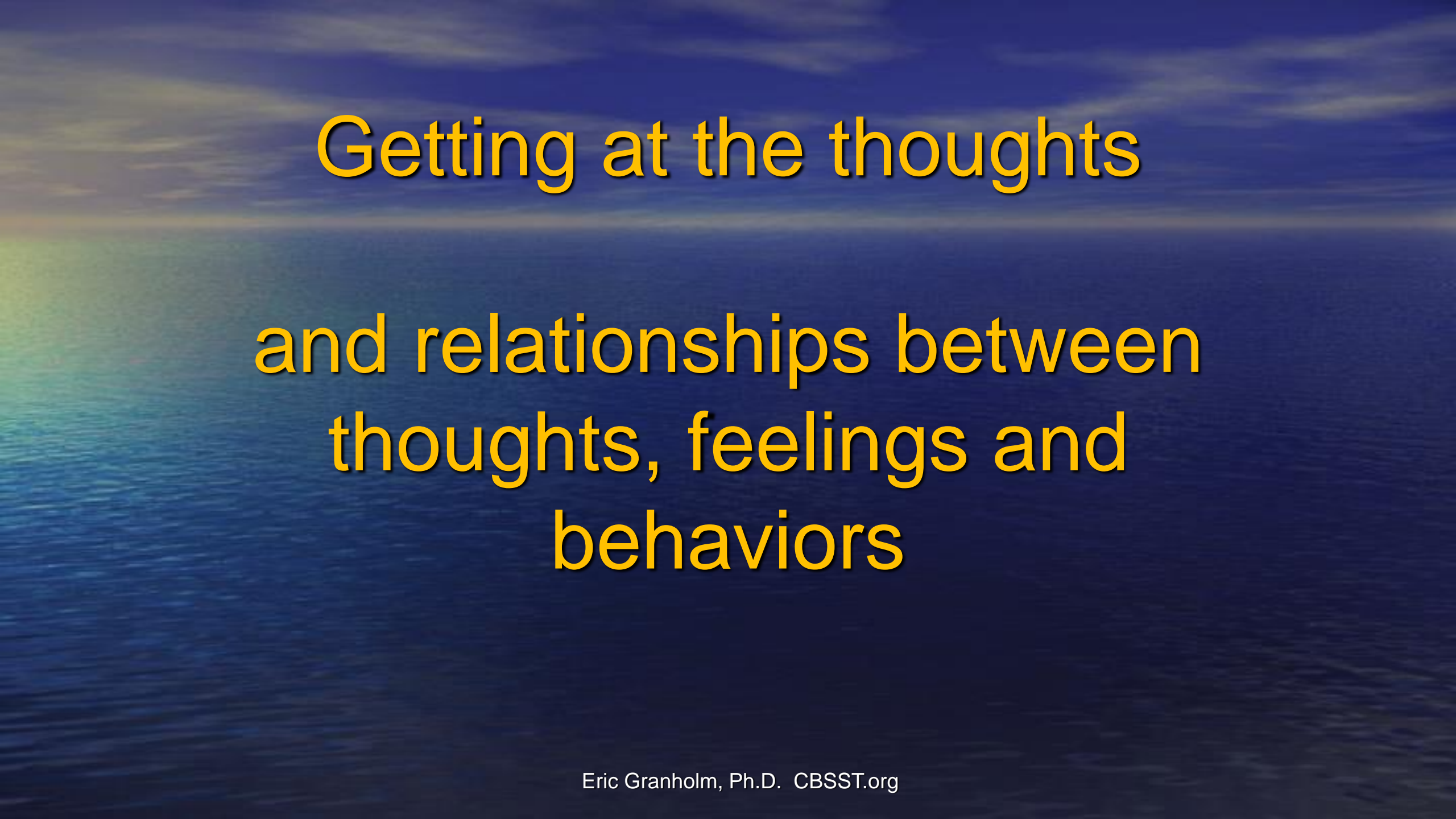


Challenge Defeatist Beliefs → Improve Functioning

5 CBSST Clinical Trials: Summary

- CBSST v. TAU; CBSST v. GFSC; N=76-149
- Functioning improved more in CBSST than in control conditions
- Negative symptoms (motivation) improved more in CBSST
- Effect sizes for CBSST ($d=.7-1.0$) were greater than for CBT or SST alone ($d=.4$)
- Reduction in defeatist beliefs mediated improvements

Cognitive Skills Module: The 3C's

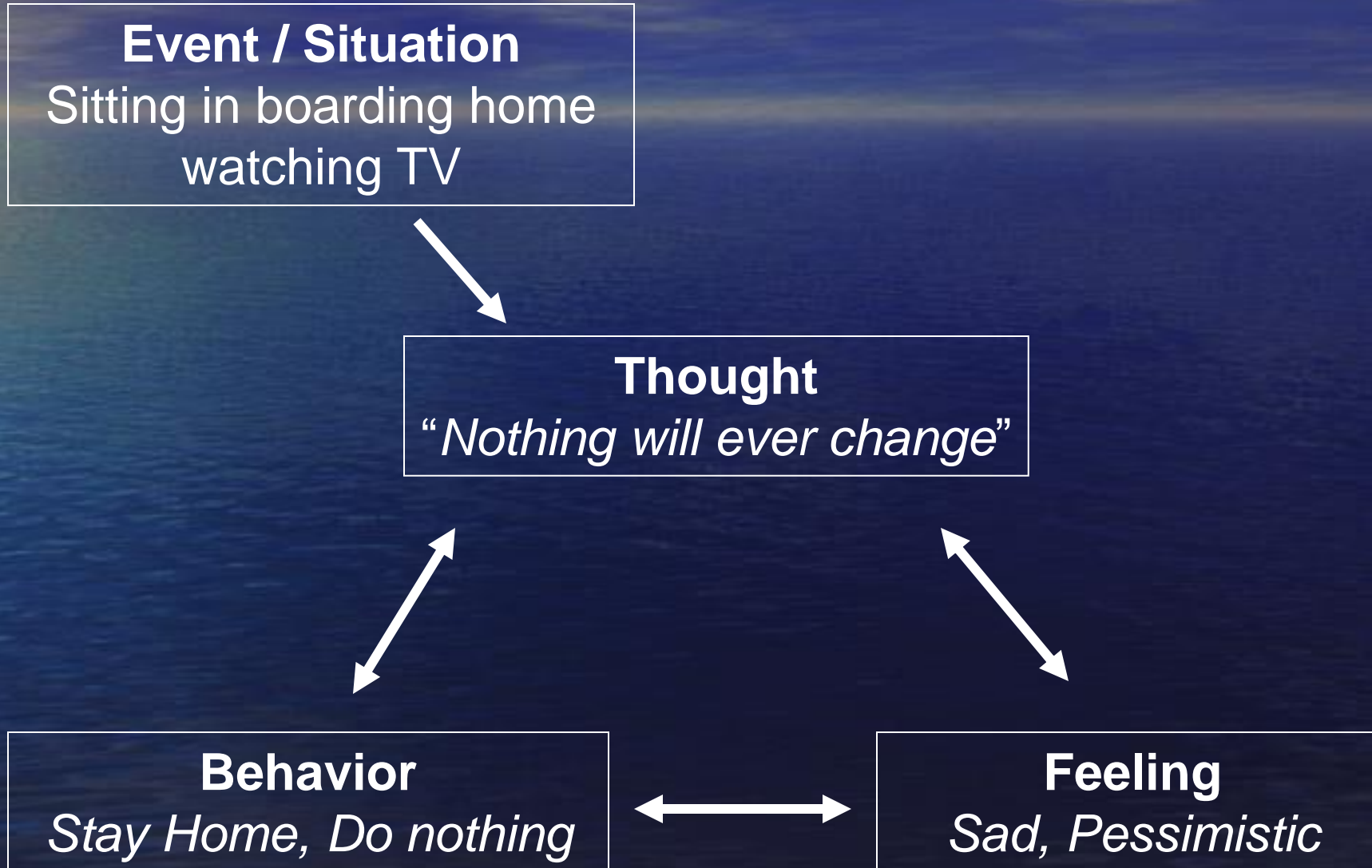


Getting at the thoughts
and relationships between
thoughts, feelings and
behaviors

The Cognitive Model: CBT Triangle



Cognitive Model: CBT Triangle



Thoughts influence feelings and behaviors

People who think they will succeed and think they will enjoy doing things are more motivated and willing to try harder to do things.

Belief Modification

- Identify thoughts and relationship with feelings and behaviors (thought records)
- Catch mistakes in thinking and examine evidence for & against them (3C's)
- Conduct behavioral experiments to test accuracy of thoughts

The 3C's: Correcting Unhelpful Thoughts

CATCH IT:

- ★ What is the unhelpful thought?
- ★ What was going through your mind?
- ★ **Is this thought helping me reach my goal?**

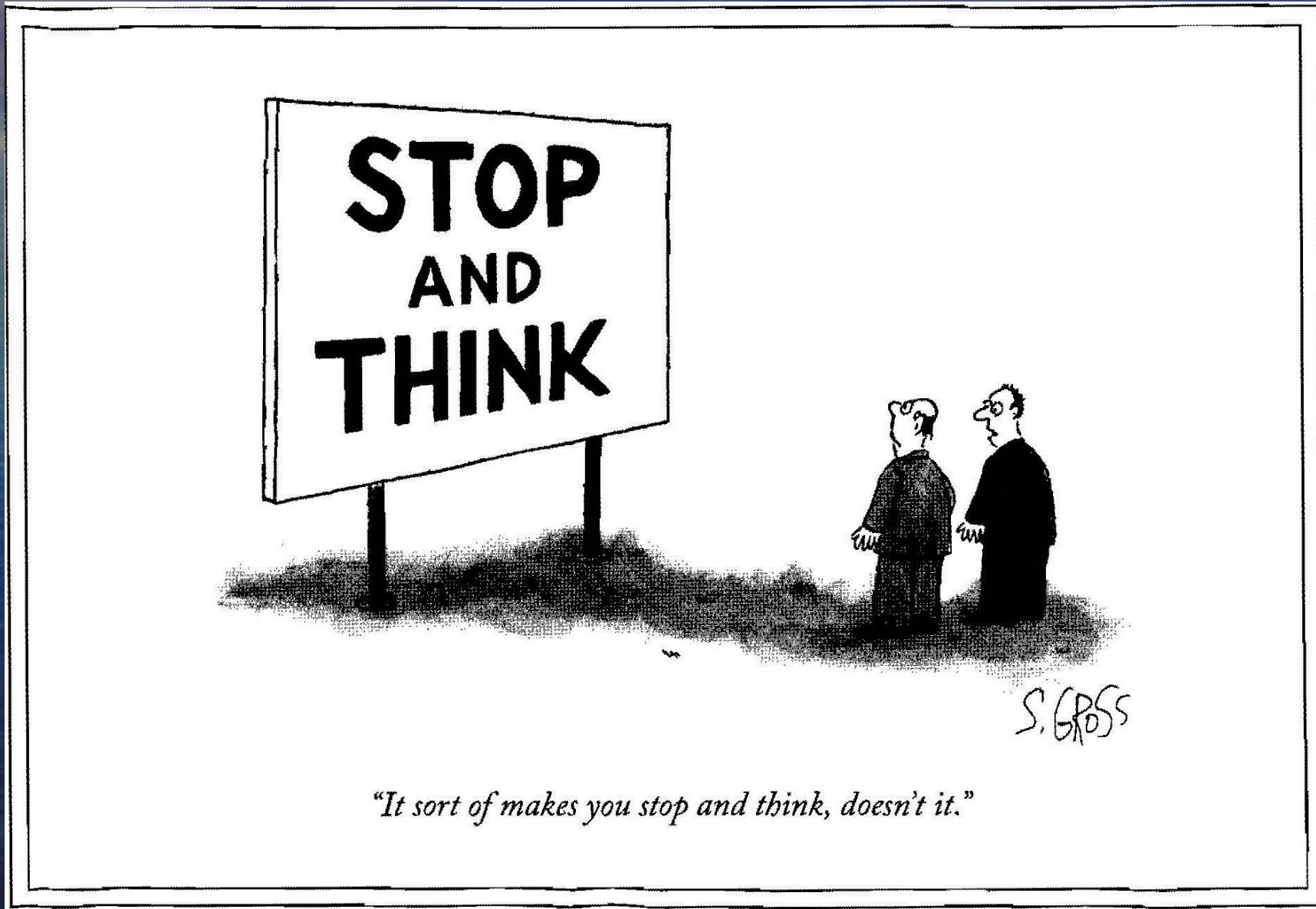
CCHECK IT:

- ★ What is the evidence for/against it?
- ★ What would you say to a friend with that thought?
- ★ Is this a mistake in thinking (e.g., “jumping to conclusions”; “all or none”)?

CHANGE IT:

- ★ What is an alternative? Another possibility?
- ★ Does the new thought help you reach your goal?

Catch It



"It sort of makes you stop and think, doesn't it."

Catch it:

Identifying Automatic Thoughts

- “Red Flag” technique
 - Unwanted feelings & behaviors are a signal
 - Emotion is the royal road to cognition (Beck)
 - Catch-It feeling ball toss game
 - Catch-It during role plays
- Guided Discovery/ Imagery
 - Imagine you are back on the bus...
 - “What’s going through your mind right now?”
- Checklists

Check it: Examine the Evidence

- List evidence for and against the thought
- Mistakes in thinking
- If someone else had this thought, what would I tell them?
- Pretend you are an attorney or detective; what evidence would you present in court?
- Is this thought helping me reach my goals?
 - If cannot agree “inaccurate” agree “unhelpful”

Check-It:

Identify Mistakes in Thinking

- All or Nothing
 - Seeing things as all *good* or all *bad* (*black or white*).
- Mind Reading
 - Believing that you know what people are thinking.
- Fortune Telling
 - Predicting the future like that things will turn out badly.
- Jumping to Conclusions
 - Not gathering enough evidence before making a decision.
 - **Catastrophizing**-When jumping to conclusions or fortune telling, thinking the worst possible situation did or will occur.
- Emotional Reasoning
 - Making decisions that are based entirely on *feelings* rather than objective evidence (I feel scared, so there must be danger).

Do an Experiment to Check-It

- ❖ Specify the defeatist thought being tested
(Nobody likes me or wants to talk to me)
- ❖ Devise experiment to test the thought
(Go to clubhouse and say “hi” to someone)
- ❖ Get agreement on conclusion, *a priori*
(If they say “hi” back, they want to talk)
- ❖ Record results of experiment
(They said “hi” and talked to me)
- ❖ Work with implications for accuracy
(More people may like you than you think)

Do an Experiment to Check-It

- ❖ Specify the belief being tested
(Someone is taking my mail)
- ❖ Devise experiment to test the belief
(Send myself a letter)
- ❖ Get agreement on conclusion, *a priori*
(If the letter comes, nobody taking mail)
- ❖ Record results of experiment
(Letter arrived)
- ❖ Work with implications for belief validity
(Mail was not stolen, so inaccurate)

Change it

- Develop a more accurate / helpful alternative thought
- Or adaptive coping response for accurate thoughts (4th C is Cope)
- Write down your strengths to Change It

Thought Record with the 3C's

Situation / Goal	Feelings / Behaviors	<u>C</u> atch It	<u>C</u> heck It	<u>C</u> hange It
<p>Sitting at home and thinking about money</p> <p>Goal: Employment</p>	<p>Frustrated; Depressed; Pessimistic</p> <p>Did nothing; Did not fill out application</p>	<p>“They will never hire me” “I’m not good enough” “Its too hard”</p>	<p>All or nothing; Fortune Telling; How do I know they wont hire me?; I used to do that job; I can work hard</p>	<p>“Maybe I can get an interview if I hand in this application” “I can ask a friend to help me with application”</p>
<p>See a pretty girl and want to talk to her</p> <p>Goal: To have a relationship; Increase social interaction</p>	<p>Scared; Nervous; Anxious</p> <p>Stayed quiet; Did nothing</p>	<p>“She will reject me because I have a mental illness”; “I’m flawed” “I will have nothing to say”</p>	<p>Jumping to Conclusions; Fortune Telling How do I know she will reject me? She doesn’t know I have a mental illness. I’ve had girlfriends before</p>	<p>“I can just introduce myself and say hi” “We can talk about something I know”</p>

Thought Record with the 3C's

Situation	Feelings/ Behaviors	<u>C</u> atch it	<u>C</u> heck it	<u>C</u> hange it
Walked in a room and people stopped talking	Afraid; Angry Left; Isolated	“They were talking about me.”	Mind reading; Jumping to conclusions; Just looking at me doesn't mean talking about me; Last time not true.	“They're probably talking about something else.” “Even if they are, who cares.”
While home alone, abusive and critical voices: “You're ugly” “Kill yourself”	Afraid; Helpless Shouted to be left alone	“This is Satan's voice.” “If I don't do it, terrible things will happen and I'm going to Hell.”	Jumping to conclusions; Predicting Future; Didn't obey, & no bad things happened & Satan is powerful, so not Satan (thought chaining)	“Voices can't hurt me.” “Voices are from my illness not Satan.”

3Cs Feedback from Patients

Catch It (Check It, Change It)
-to the tune of "Whip It" by Devo



When you stop working on your goals
You must Catch It
When you're feeling really bad
You must Catch It
When your thought could be all wrong
You must Catch It

Now Check It

Is it true?

Look for facts

Check for clues

If you're mistaken

Try again

Think something new

That helps you through

So Change It

Change It good

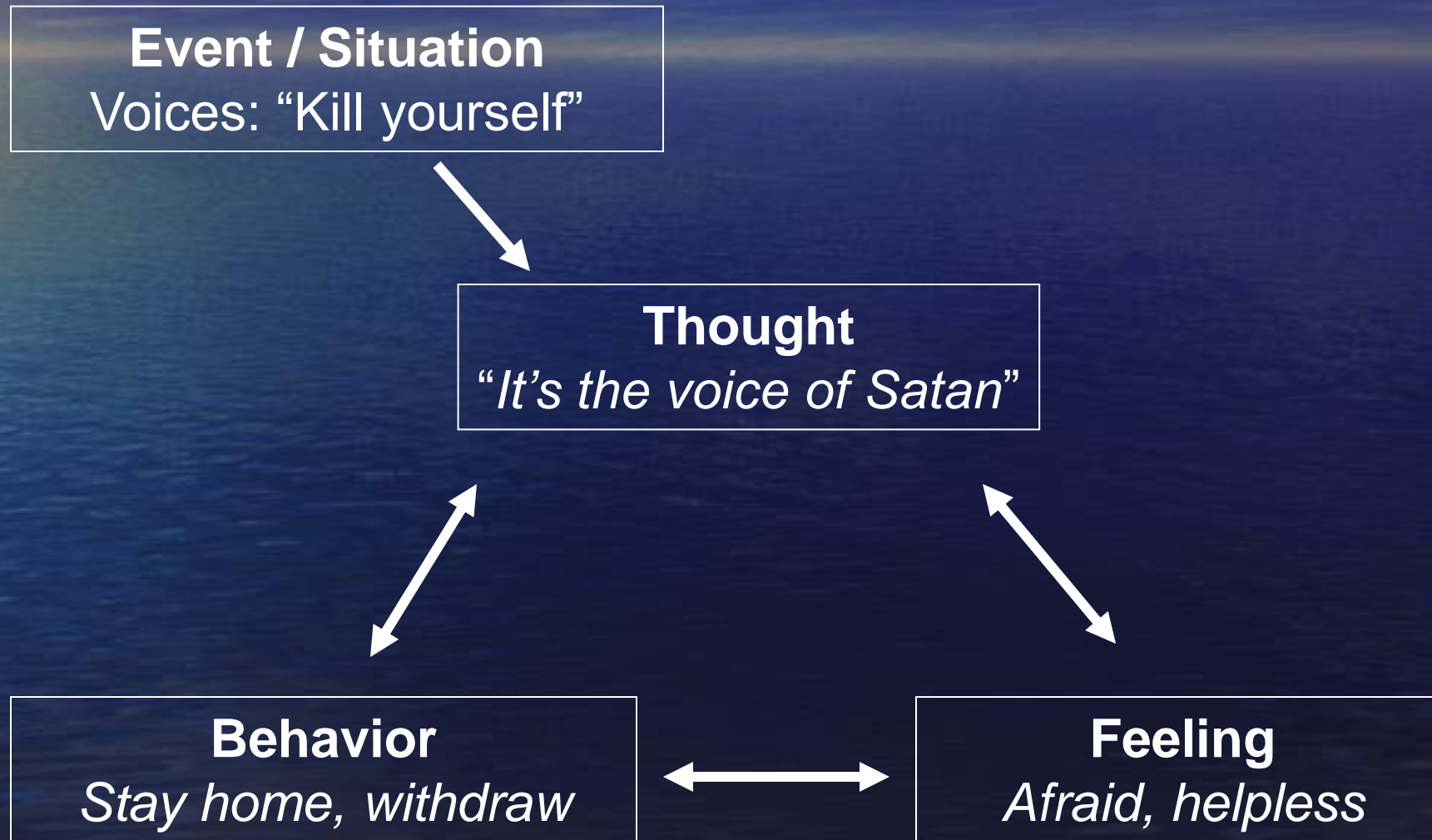


Just start to think of this song

You can Catch It

Catch It good

Cognitive Model: CBT Triangle



Cognitive Therapy for Hallucinations

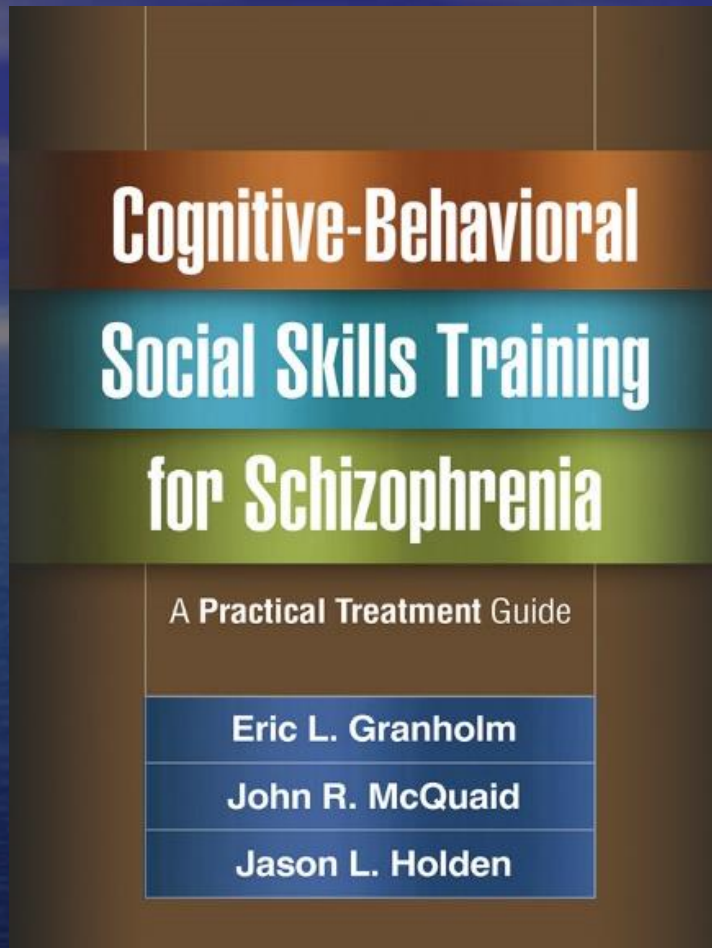
Focus on Beliefs About:

- ⇒ Voice's identity (**external agent**)
- ⇒ Perceived **power**/omnipotence
- ⇒ Purpose of voices
- ⇒ Perceived consequences of obedience/disobedience

Cognitive Therapy for Hallucinations: Testing Beliefs About Control

GOAL: To make the hallucinations less threatening by altering *beliefs* about control of voices

- Identify cues that increase/decrease voices
- Client may initiate or stop hallucinations in session (behavioral experiment)
- Consider evidence for beliefs about the voice's control and power



Granholm, E., McQuaid, J., & Holden, J. (2016). *Cognitive Behavioral Social Skills Training for Schizophrenia: A Practical Treatment Guide*. New York: Guilford Press.

www.guilford.com

Thank You!



cbsst.org
VAFellowship@ucsd.edu

mhtech.ucsd.edu
psychiatry.ucsd.edu