

Coordinated Specialty Care in Early Psychosis: Individual Therapy

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and

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April 7, 2022



Housekeeping Information



Participant microphones will be muted at entry



If you have questions during the event, please use the chat



This session is being recorded and it will be available by the next business day.



If you have questions after this session, please e-mail: newengland@mhttcnetwork.org.

Acknowledgment

Presented in 2022 by the Mental Health Technology Transfer Center (MHTTC) Network.

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At the time of this publication, Miriam E. Delphin-Rittmon, Ph.D, served as Assistant Secretary for Mental Health and Substance Use in the U.S. Department of Health and Human Services and the Administrator of the Substance Abuse and Mental Health Services Administration.

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Presented 2022

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS



CSC BASICS

Sponsored by:

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BASICS OF COORDINATED SPECIALTY CARE COURSE

- Designed to help orient new staff and providers
- Evidence-based care model for early psychosis care
- Each 45-min session includes
 - 1) Introduction to area by professional
 - 2) Co-presentation by individuals with lived experience
 - 3) Time for audience questions
- Sessions are recorded and will be included in an upcoming asynchronous course that is freely available via healthknowledge.org



Healthknowledge.org





CSC BASICS

SESSIONS

* Every
first
Thursday
at 2PM EST,

Date	Topic	Topic Overview Presenter	* Lived experience presenter
Feb 3	Peer specialist services	Patrick Kaufmann	Jacobi Nabors
Mar 3	Culturally responsive CSC for Early Psychosis	Iruma Bello	Drew Musa
April 7	Individual therapy	Raelyn Elliott-Remes	Jacob Halmich
May 5	What is early psychosis?	Chantel Garrett	Coming soon!
Jun 2	Family psychoeducation and support	Susan Gingerich	Kathy and Kurt
Jul 7	Medication management	Matcheri Keshavan	Nate Schwirian
Aug 11	Supported employment	Shirley Glynn	Coming soon!

CSC BASICS SESSION 3: INDIVIDUAL THERAPY

Raelyn Elliott-Remes and
Jacob Halmich



The Different Stages of Therapy

- Beginning
- Working
- Closing



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Beginning Phase

Therapist Experience

Build relationship
(befriending)

Identify and inspire
purposeful use of strengths

Develop meaningful goal

Participant Experience

Deciding whether therapist is
trustworthy

What's the point of writing
the list?

Do I have to have a goal?
What is good about goals?

Recovery and Wellness Themes

- Hope
- Empowerment
- Resilience
- Strengths
- Sense of purpose and meaning
- Connection with others
- Positive personal identity
- Strong role functioning
 - Work
 - School
 - Relationships



Developing a Meaningful Goal

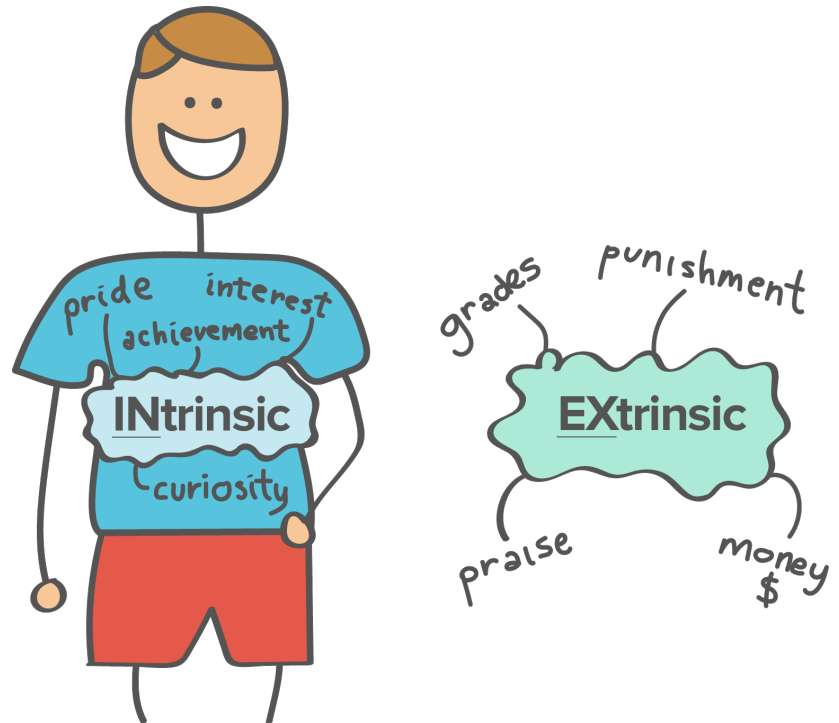
- Begin by eliciting levels of satisfaction in several different life domains
- Helps to identify natural resources and strengths
- Offers insight into areas of importance to client as well as stage of change or readiness

Satisfaction with Areas of My Life

Area of my life	I am not satisfied	I am moderately satisfied	I am very satisfied	I would like to change
Friendships				
Meaningful work (paid or unpaid)				
Enjoyable activities				
Family relationships				
Living situation				
Spirituality				
Finances				
Belonging to a community				
Intimate relationships				
Expressing creativity				
Hobbies or activities for fun				
Education				
Health				
Other:				

Challenges to Goal Setting and Goal Tracking

- Finding the meaningful, intrinsically rewarding goal (not the socially conditioned goal).
 - “I have goals already in my heart. I don’t have to identify goals to please my therapist or others.”
- Perceived sense of failure
- Discouragement



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Values Clarification

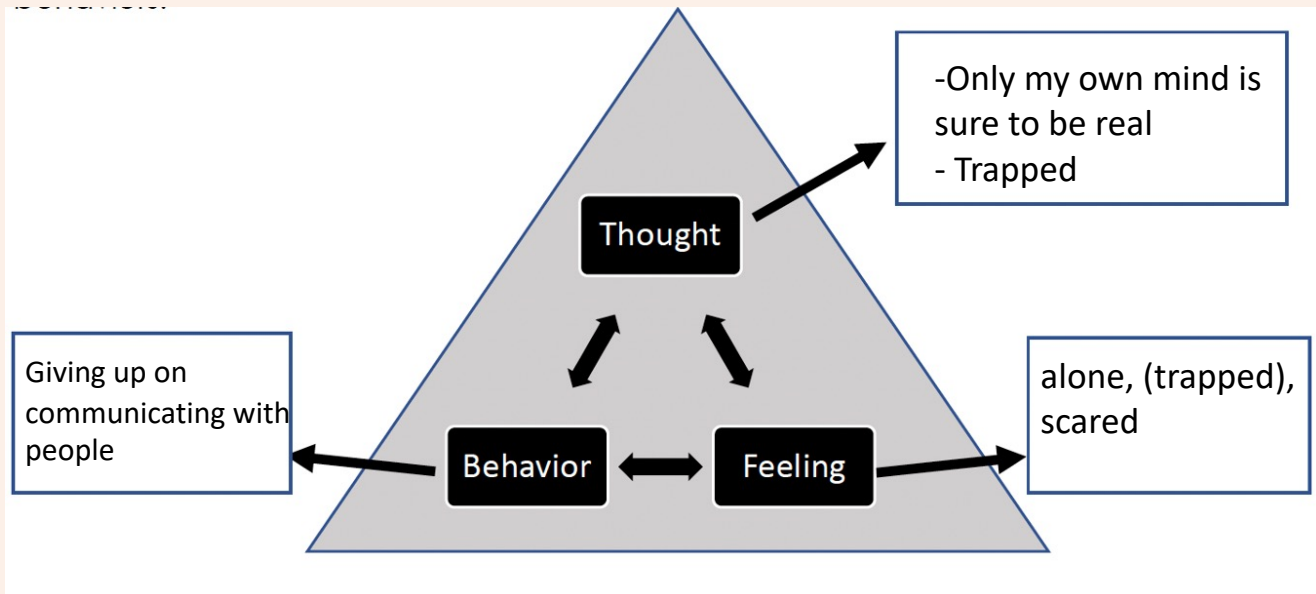
- Use of a real compass to illustrate rationale
- Use values clarification tools
 - Values Card Sort (Miller, Baca, Matthews, & Wilbourne, 2001)
 - Values clarification worksheet
- Identification of *strengths to support value-congruent living/valued action
 - * from Brief Strengths Test

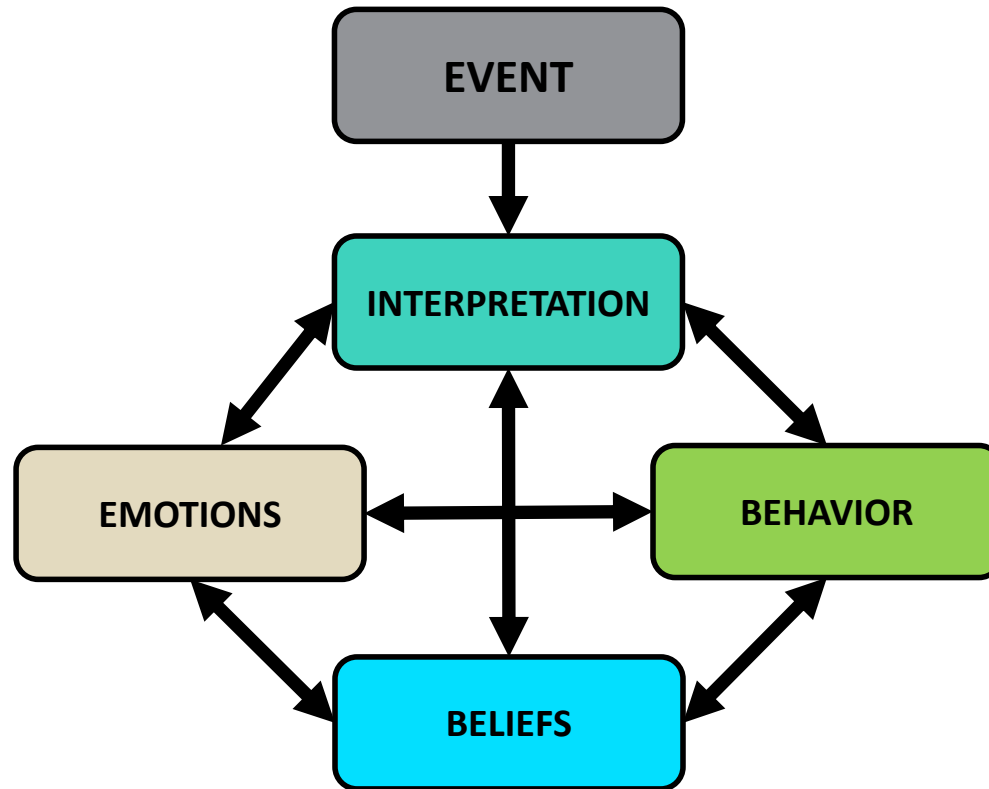


Working Phase

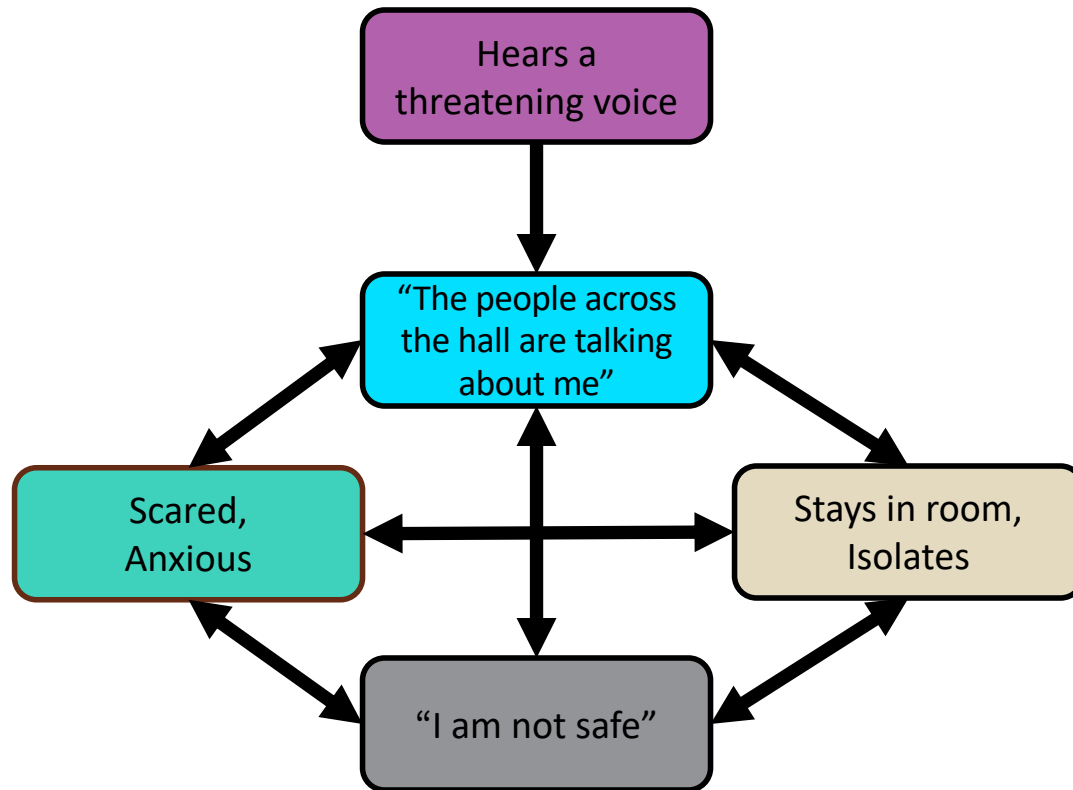
Therapist Experience	Participant Experience
Develop better understanding of participants' experiences <ul style="list-style-type: none">• Curious questioning• Dropping assumptions	
Formulation (CBTp, ACT, CFT)	My thinking is not good enough. I didn't come up with these (these are foreign tools), how can they help me?
Normalization	
Formulation-based intervention (CR, Behavioral Experiments, Compassionate letter writing, Developing compassionate self/other, Resiliency exercises)	I can create ownership over these techniques You'll figure out how to use them on your own. You can make them your own
Assessing stage of change around substance use to inform intervention (psychoeducation, pay-off matrix, risk reduction?, abstinence?, etc...)	I already know the best strategy to feel good is. (personal wisdom)

Thought-Feeling Model to Support Formulation





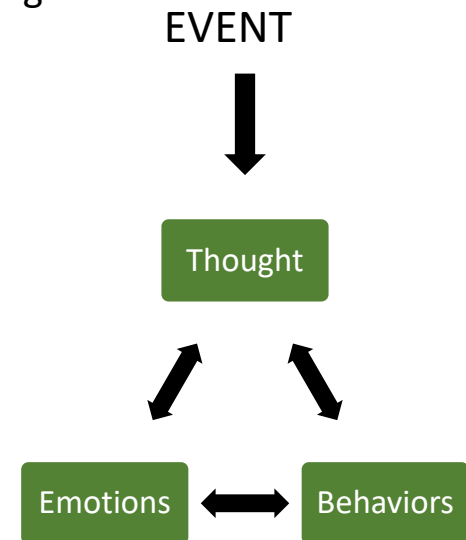
Maintenance Formulation



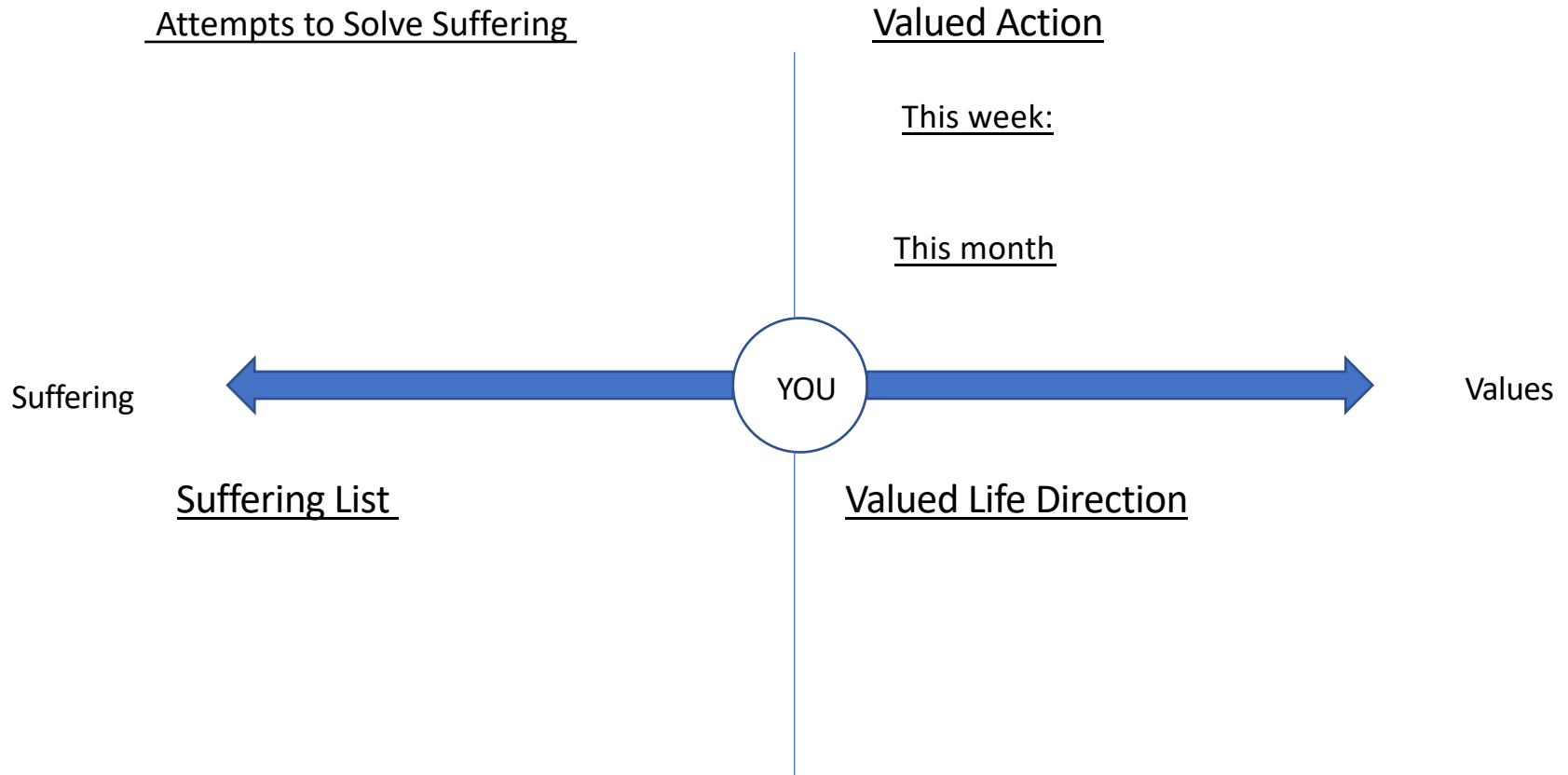
Maintenance Formulation Example

CBTp Formulation

- Collaboratively develop a **formulation** to facilitate understanding of:
 - the experience (longitudinal formulation)
 - what maintains the distress (maintenance formulation)
- Encourages **cognitive strategies** to:
 - Curious/Socratic Questioning
 - Cognitive Restructuring
 - Mindfulness practice
 - *Compassion Focused Approaches
- Encourages **behavioral strategies** to:
 - Behavioral Experiments
 - <https://www.youtube.com/watch?v=w8namZ5rt2k>
 - Behavioral Activation
 - Coping Cards

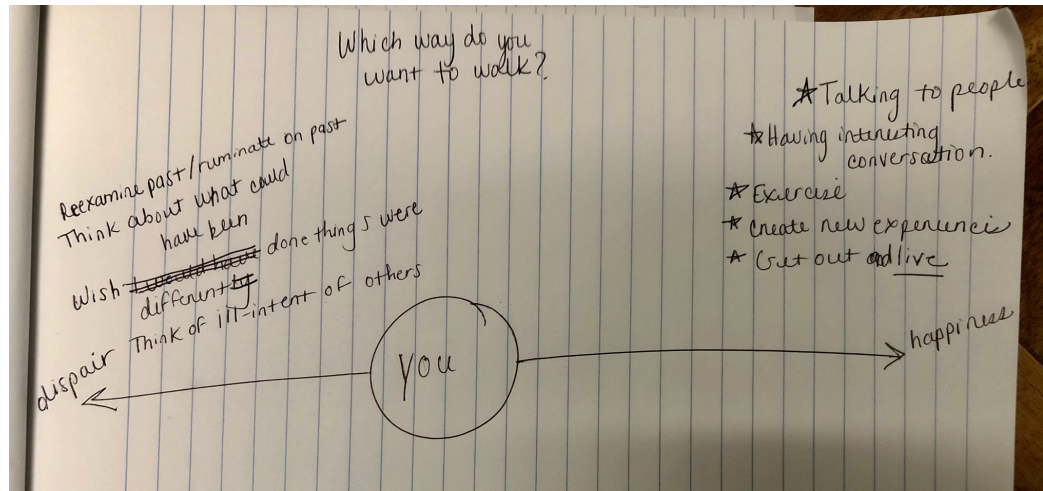


Values-Based Formulation



Values-Based Formulation Made Simple

- Create list of distressing thoughts, behaviors
- Decide where it should be placed on the visual spectrum
- Brainstorm thoughts, behaviors that would get participant closer to their value. Place where appropriate

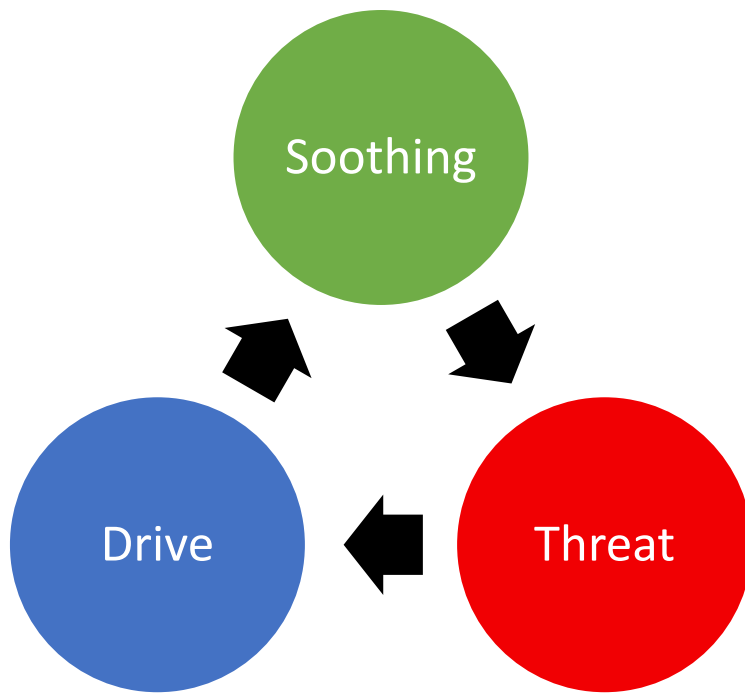


Incorporating “Happiness Strategies”

- Finding the good things in each day
 - “Good Things” Card
- Gratitude letter
- Gratitude visit
- Mindfulness
 - Savoring
- Acts of Kindness



*Compassion-Focused (CFT) Formulation



- Not not only useful to support self-awareness (to understand role of emotion and its influence), but also to support self-compassion and motivation.
- Brings attention to our physiological experience (to listen to our body for cues)
- Informs intervention
 - i.e. Compassionate letter writing, Developing compassionate self/other, mindfulness
 - Examine role of multiple selves
 - <https://www.youtube.com/watch?v=VRqI4lxuXAw>

Wellness Planning

- Things I value and need in my life are:
- Some things I can do daily to support my wellness/well-being include:
- Some events or situations that have been triggers for me in the past include:
- Early warning signs that I experienced in the past include:
- Some unhelpful thoughts or beliefs that I have had in the past include:
 - If I notice myself having these thoughts, here are some new, more helpful, thoughts to remind myself of:
- Some people that can help me recognize and respond to triggers and early warnings signs are:
 - Name, how to reach out to them, what they can do to help

Incorporating culture



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- Use of the Cultural Formulation Interview (APA, 2013)
- Recognition of cultural trauma
 - Requires practitioner awareness
 - (i.e. psychoeducation on how present-day experiences intersect with racial/ethnic power dynamics throughout America history to present)
- Awareness of racial/ethnic identity development (its spectrum and variation)
- Reevaluating role of EE
- **Client as expert of their own experience**
 - Allows for autobiographical repair and may mitigate social defeat

Closing/Transition Phase

Therapist Experience	Participant Experience
Review and update working wellness plan	
Link to appropriate community supports as needed	Where can I turn to for help in the future?
Acknowledge work done, client strengths, and take-aways.	

Positive Practices for Working with Psychosis

- Forming a relationship
 - Develop shared goals
- Inquire Curiously
 - Normalize experiences
 - Asking questions and dropping assumptions
- Review the information and put it together
 - Making sense of experiences through shared understanding
- Skill development
 - Developing skills and tools to support goal attainment
- Try out the skill and elicit feedback
 - Encourage the participant to practice the skill independently and provide feedback on how it worked

References

- Brabban A., Byrne, B., Longden, E. & Morrison, A.P (2017) The importance of human relationships, ethics and recovery-orientated values in the delivery of CBT for people with psychosis, *Psychosis*, 9(2), 157-166, DOI: [10.1080/17522439.2016.1259648](https://doi.org/10.1080/17522439.2016.1259648)
- DeVylder, J. E., DeVylder, J. E., Oh, H. Y., Yang, L. H., & Cabassa, L. J. (2013). *Acculturative stress and psychotic-like experiences among asian and latino immigrants to the united states* Elsevier. doi:10.1016/j.schres.2013.07.040
- Eack, S.M., Bahorick, A.L., Newhill, C.E., Neighbors, H.W., Davis, L.E. (2012). Interview-perceived honesty as mediator of racial disparities in the diagnosis of schizophrenia. *Psychiatric Services*, 63(9), 875-880. <https://doi-org.proxy1.cl.msu.edu/10.1176/appi.ps.201100388>
- Hardy, K. V. (2017). *Cognitive behavioral therapy for psychosis: A factsheet, developed for the National Association of State Mental Health Program Directors (NASMPHD). Technical assistance material developed for SAMHSA/CMHS under contract reference HHSS2832012000021/task order no. HHSS28342002T. Retrieved from https://www.nasmhpd.org/sites/default/files/DHCBTp_Fact_Sheet.pdf*
- Hardy, K., Meyer-Kalos, P., Adams, C., Elliott-Remes, R., & Gingerich, S. (2021). Brief report describing the integration of two psychotherapy evidence-based practices within coordinated specialty care services for early psychosis. *Psychological services*, 18(2), 164–169. <https://doi.org/10.1037/ser0000443>
- Heriot-Maitland, C., McCarthy-Jones, S., Longden, E., & Gilbert, P. (2019). *Compassion focused approaches to working with distressing voices. Frontiers in Psychology*, 10, 152. <http://dx.doi.org/10.3389/fpsyg.2019.00152>
- Hays, P. A. (2009). Integrating evidence-based practice, cognitive-behavior therapy, and multicultural therapy: Ten steps for culturally competent practice. *Professional Psychology: Research and Practice*, 40(4), 354-360. doi:<http://dx.doi.org.proxy1.cl.msu.edu/10.1037/a0016250>
- Max, B., Shiers, D., & Smith, J. (2014). CBT for psychosis: Not a 'quasi-neuroleptic'. *The British Journal of Psychiatry*, 204(6), 488-489. doi:<http://dx.doi.org.proxy1.cl.msu.edu/10.1192/bjp.204.6.488a>
- Meyer, P. S., Gottlieb, J. D., Penn, D., Mueser, K., Gingerich, S., & Kim Mueser, C. (2015). *Individual resiliency training: an early intervention approach to enhance well-being in people with first-episode psychosis*.
- Morris, E.M.J., Johns, L. C., & Oliver, J. E. (2013). *Acceptance and commitment therapy and mindfulness for psychosis*. John Wiley & Sons, Inc.

References Cont.

- Myers, N.A.L. and Ziv, T. (2016), "No one ever even asked me that before": Autobiographical power, social defeat, and recovery among African Americans with lived experiences of psychosis. *Medical Anthropology Quarterly*, 30, 395-413. doi:[10.1111/maq.12288](https://doi.org/10.1111/maq.12288)
- Morrison A. K. (2009). Cognitive behavior therapy for people with schizophrenia. *Psychiatry (Edgmont (Pa. : Township))*, 6(12), 32–39.
- O'Driscoll, C., Sener, S. B., Angmark, A., & Shaikh, M. (2019). Caregiving processes and expressed emotion in psychosis, a cross-cultural, meta-analytic review. *Schizophrenia Research*, 208, 8-15. doi:10.1016/j.schres.2019.03.020
- Phipps, R., & Thorne, S. (2019). Utilizing Trauma-Focused Cognitive Behavioral Therapy as a Framework for Addressing Cultural Trauma in African American Children and Adolescents: A Proposal. *The Professional Counselor*, 9(1), 35+. Retrieved from https://linkgalecom.proxy2.cl.msu.edu/apps/doc/A585355070/AONE?u=msu_man&sid=AONE&xid=4c1da658
- Schwartz, R. C., & Blankenship, D. M. (2014). Racial disparities in psychotic disorder diagnosis: A review of empirical literature. *World journal of psychiatry*, 4(4), 133–140. <https://doi.org/10.5498/wjp.v4.i4.133>
- Sarin, Freddy & Wallin, Lennart & Widerlöv, Birgitta. (2011). Cognitive behavior therapy for schizophrenia: A meta-analytical review of randomized controlled trials. *Nordic journal of psychiatry*. 65. 162-74. 10.3109/08039488.2011.577188.
- Schwartz, R. C., & Blankenship, D. M. (2014). Racial disparities in psychotic disorder diagnosis: A review of empirical literature. *World journal of psychiatry*, 4(4), 133–140. <https://doi.org/10.5498/wjp.v4.i4.133>
- Turner, D. T., van der Gaag, M., Karyotaki, E., & Cuijpers, P. (2014). Psychological Interventions for psychosis: A meta-analysis of comparative outcome studies. *American Journal of Psychiatry*, 171(5), 523-538. doi:10.1176/appi.ajp.2013.13081159



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<https://www.dropbox.com/s/3lubhvq415wdci1/Overview%20of%20EP%20CSC%20Webinar%20Series%20for%20HEK%20mfy%201.20.22.docx?dl=0>



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MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

The purpose of the MHTTC Network is technology transfer - disseminating and implementing evidence-based practices for mental disorders into the field.

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the MHTTC Network includes 10 Regional Centers, a National American Indian and Alaska Native Center, a National Hispanic and Latino Center, and a Network Coordinating Office.

Our collaborative network supports resource development and dissemination, training and technical assistance, and workforce development for the mental health field. We work with systems, organizations, and treatment practitioners involved in the delivery of mental health services to strengthen their capacity to deliver effective evidence-based practices to individuals. Our services cover the full continuum spanning mental illness prevention, treatment, and recovery support.

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