

## Discovering Meaningful Aspirations and Taking Action with CT-R

Happy Wednesday, everyone. We're so glad that you could join us as we begin this second webinar in a series of four looking at CT-R. And you're going to know exactly what those initials stand for by the time we begin the session.

I want to start out just by orienting you to the webinar room, that is the screen that you're looking at if you are on a computer or tablet. There are different sections of the window that you will want to pay attention to. There is a pod just below the PowerPoint slide that's labeled Tech and Top Questions – Topic Questions. These are where you will put questions that you would like for us to answer or to assist you with. So if you are having difficulty with sound or image, you would put your questions there. If you have a question for the presenters, you would put your questions there. So it's an important pod and one where you want to add your questions for us to be able to respond to you.

I would note that questions for the presenters will be held until the end of the presentation. At that time, we will answer as many questions as possible given the time allotment that we have.

The Participant Chat pod is an interesting place to keep an eye on. You'll see that there are a bunch of notices scrolling through in the Participant Chat window. That's because you all are checking in, letting us know that you are here, where you're from, what you do. And we encourage you to use that pod for any kind of exchanges that you have that are topic related and help eliminate the – the content of the webinar.

A lot of you need Continuing Education hours or a Participation Certificate so that you can get credit for this time. At the end of the webinar there will be a link that you can click on that will take you to a very brief survey and allow you to either download the certificate or complete the quiz so that you can get your Continuing Education credits.

Real time captioning is available should you have a need for the support of written language or if you prefer to read what is being said. Click the link that is just below the pictures of our presenters, and that will open a new window where you will be able to see live captioning.

Finally, I want to remind everybody that this webinar is brought to you by SAMHSA and the support that they provide through the Recovery to Practice Initiative. The views, opinions, and content expressed in this presentation do not necessarily reflect the views and opinions and policies of the Center for Mental Health Services, The Substance Abuse and Mental Health Services Administration, or the U.S. Department of Health and Human Services.

So thank you for joining us and expect to be educated today. We have with us folks who are experts in recovery-oriented cognitive therapy. Dr. Paul Grant and Dr. Ellen Inverso are going to present to us information that they have gleaned through their research, through their implementation, and through the training that they do in the topic. They work with and for the Perelman School of Medicine and are truly the experts in this topic. So I would like to welcome them, and say thank you for coming back for this second in a series of four webinars on this topic. And Paul and Ellen, I will turn the webinar over to you.

Good afternoon.

Hello.

So we are really excited to be continuing in our Recovery-oriented Cognitive Therapy series. And I think one thing that might be helpful to get a rough sense for, I know there are so many folks who are joining us today, but if people wouldn't mind maybe indicating whether or not they had the opportunity to join our webinar earlier in the month, which was the first kind of introduction to CT-R, that might be helpful. So we know that we have a lot of folks who may not have been able to join last time who are joining us today. So – so we are going to be talking – oh, great, lots of good combinations here. Cool.

So for those who – who were with us last time, we're excited that you came back. And for those who are new, we are really happy to have you this time.

## Discovering Meaningful Aspirations and Taking Action with CT-R

We're going to be talking about really important steps in recovery-oriented cognitive therapy that's going to be focusing on how to really identify and elicit meaningful aspirations, and motivating aspirations, for the individuals that we all serve, but we are going to do a little bit of a summary of some of the key pieces for the first step of CT-R as well. So for those who are just joining us for the first time and didn't have an opportunity yet to see the first one, we think that it will still be a really valuable – a really valuable opportunity to figure out the different pieces. So we will go over it really briefly.

All right. So one of the things that we're really going to focus on today is when is a good time to try and identify the meaningful aspirations from the folks that we all are working with as well as how to really distinguish some of the more motivating and exciting aspirations from – from some of the – aspirations that might be more like steps toward a meaningful kind of recovery full life.

And we'll talk about some specific questions and plans that you can do to start putting the aspirations into action. And our hope is that we'll be able to give you guys examples that will be applicable to any of the settings that you may be in. How to start doing this.

So this slide is really just a review. So we're basically in the middle. So last time what we tried to do is to show the way in which evidence-based practice could be translated into a very concrete set of procedures that would allow you to be (inaudible) about recovery and resiliency. And this image here is just meant to really get a sense for that process. And so the adaptive mode is something that we discussed quite a bit last time with what people are like at their best. The kinds of things they are doing when they have lots of positive emotion and positive beliefs about themselves activated. Usually they are doing stuff with other people. And what we talked about is that the starting point for recovery-oriented cognitive therapy is really to find a way to access that. And we access that through connection that we have with a person through shared activities. It could be listening to music together, singing. It could be throwing a ball around. Whatever it is, just get it started.

And then for a lot of people that we work with, it's going to – you're going to need to energize this mode because it doesn't come up very often. And so doing more and more of this so that they have more access to more of their own energy. And this – this – this mode of their life is growing. And the point we're at now is to talk about well let's start thinking about the future. And that's what we mean by developing the adaptive mode. Because for a lot of people that we're going to be collaborating with, they really didn't start. As somebody said to me once, you know, you know, it was like the bell went off and everyone started living their life and I haven't really moved anywhere. And while that's not true of everyone and it's probably a bias saying it that way, it's still really trying to develop the life that they want to be having, sort of moving from languishing to flourishing. And we really need aspirations in order to develop the adaptive – the adaptive mode and really help the person link that up to action and then conclusions they can draw that slowly expand their life space.

I want to make a disclaimer at the outset because this is something that – one of the choices I made. We aren't using the word "goals" here, although certainly you could call this goals. But we only have done that because a lot of the individuals have described themselves as kind of been over goaled, or everything is goaled. And so we think that the term has lost a little bit of meaning. And, in fact, I had one guy say to me, he said, well do you want to know what my treatment team wants from me or do you want to know what I actually want. And so one of the ways maybe to get around that is to use words like "aspirations," or just think about stuff that's really – really motivating.

The last two boxes, which we will also cover today, once you have – once you have what somebody is interested in, you really need to help them do it. And so having success experiences and having the meaning of the aspiration are really key in terms of, again, like I say, really promoting the progress for the person and really helping them get the life they want.

And then the final box, Strengthening, is really about drawing their attention to helping them strengthen the positive beliefs and then deemphasize the negative beliefs. So it's to really create a kind of sustainability for themselves. And really, it's really about empowerment ultimately where they are empowered relative whatever challenges have tended to put them into care at a higher level and really trying to pull out of that potentially (inaudible) care entirely for many of them.

## Discovering Meaningful Aspirations and Taking Action with CT-R

So I want to draw your attention to – in the materials that you can download, we have a tool that we use to help organize these ideas. It's called the Recovery Map. And so quick refresher for those who have seen this and – and introduction for those who haven't, is that the Recovery Map is this kind of one-page organizational tool for how we understand both when people are at their best. How we understand what the – what it would mean for them to achieve their aspirations. And then also how do we understand when things are becoming a little bit more challenging, concluding with based on what we know about the person, what are our next steps so that we can put this into action.

And so the first two pieces are really what are the ways in which that adaptive mode is activated? What are the things that get somebody really energized and connected to other people? And when they are in that space, what are the things that they could potentially be identifying within themselves as far as their ability to connect or have efficacy, and so on and so forth.

And then the aspiration piece, that will be our first focus, is really about what does someone want? What are their really personal meaningful goals? And then most importantly, probably, in that part, what does it mean to that person if they were to achieve that? What would that say about them? What would it say about them in relation to other people? So that's like the really important beliefs and meanings that come from aspirations. And a lot – for a lot of folks, even if their aspirations are not exactly what we would think might be, you know, quote/unquote, kind of expected, or what you might put on a treatment plan, for example, that doesn't matter because whatever they say has meaning. And that's where a lot of the motivation is going to come from. So we'll emphasize that today.

And then I'm going to skip down to just (inaudible) to the positive action piece. It's going to be based on all this, what can we do together to bring that to action and help bring out those meanings in – in the day to day.

So that's the Recovery Map. And this is something that we do. Just my caveat is we often do this to organize as maybe therapists or peers or part of a treatment team, but it's not necessarily something that we – we sit and do with the individuals. It's more for our organization of how we're moving forward.

So where we ended up last time was thinking about this energizing of the adaptive mode, which is really connecting with people through pleasurable activities, through interests. We talked about connecting around skills that people have. And one of the ways that we talked about that was maybe asking individuals for advice. It's really advice two pieces. Connections between an individual and yourself. And also a source for generating energy and sustaining energy. Because I think that energy is one of those things that you can't – it's really hard to think about what else I might want in the future, maybe even later in the day or tomorrow, if I don't have a lot of energy. So this part is really about building that up in whatever way – in whatever way it works for the person.

And it really – when someone is activated and energized in that adaptive mode, and they're starting to do more of the things that they enjoy more often, it really opens up kind of the space for them to start thinking about what's possible for the future. But what we know is that just having kind of a routine and pursuing interests by itself is not generally enough to sustain the motivation in the long term, and that's where it's really important to start thinking about what is it that a person wants beyond that.

And that's where we go for aspirations. And a key thing here is that we – we really want to talk about how we're going to develop this. And so it's not the kind of thing where we find out, okay, the person wants to – to – say, be a nurse, or a doctor, or a psychologist, whatever, so okay, great, let's get started. We really want to spend some time sort of finding the one that's going to have the most meaning. And we'll talk about some questions that we ask to get at that. And we really want to develop it. And we're going to talk about using tools like imagery and things of that sort to really make the thing rich for the person. Because ultimately, what the aspirations are going to do for us is they are going to help the person sort of do stuff in life that brings them meaning and really connects them with their values. But also it will allow them to endure some of the difficult things that they run into every so often. They'll be able to deal with stress and things like that because – because it's getting in the way of the aspiration. And we'll also talk about the way in which some of the obstacles or challenges that people face can be addressed as a block to what they want and it's a little more motivation to be able to be a power relative to them.

## Discovering Meaningful Aspirations and Taking Action with CT-R

But, again, the key thing is to be able to get this into the person's life right now.

So one of the things that we want to find out from you is – and you can use the Chat box to let us know – is what are some of the aspirations that you have heard other people say that they want? What are the things that people – when you ask them what is it that they want in their future, what have they said? And there's really no wrong answer, so we'd just love to know because I think there's – what we want to do at this point is distinguish a little bit between some of the, maybe, steps or getting it to this point of an aspiration, and a really rich aspiration. So I've got a lot here about getting a job, driver's license, living independently, have my own business, be an artist. I'll read some of these. I'll get my GED. Ooh, be a good dad. That's awesome. Employment. Maintain sobriety. A romantic relationship. So important. Going to college. Family.

Excellent. A lot of living independently and working and school. So that's fantastic.

Not come back to treatment. Yes. We get that a lot. Stop being homeless. Having an apartment. Cook for myself. Awesome.

I'm going let you guys keep having those go through. And what I will do as you are doing that is – get off meds. Make good choices. I need to work on making good choices sometimes, too. These are great.

So we're going to go through a little bit of some of the – oh, actually, you know, do you want to do this first of after? Okay.

So let's go through what – some of these distinctions that you see here. So things that are actually a step – go to a webinar. Congratulations! You got your aspiration. Michael, what's going to be good about going to the webinar? That's what we need to find out, right?

So that could be a step to something else. It's a perfect example. Going to a webinar is a perfect example of our first example there. Steps versus aspirations. So a step is something that once you've accomplished it, it doesn't necessarily lead to continued action. It's kind of a finite step by itself. So, for example, some of these great examples that you're giving like, maybe, getting a GED, getting a driver's license. If you have folks who are inpatient, getting discharged from the hospital. These are things that lead you to think – well, they lead you to when you have achieved them, you don't necessarily continue to do the steps that lead up to that. So the GED, for example. Once you have completed the exam and you have your GED, you don't necessarily continue to take – do the studying that occupies your day and kind of keeps you motivated to take that test and things like that. It doesn't necessarily lead to continued action. But there is something that's really important about it. And there is something that is really good about that for that person. And that's that next part that leads to the aspiration.

So anything that leads you to think, wow, what would be good about that if you wanted to do it, or, you know, what would be something that you could do next after that. That gives us a good clue that it's really a step. A step rather than an aspiration.

So for that work, we've got – we want to find out, really, what – when they have accomplished that, what is it that they will be then able to do or get as a result.

Yeah, the reason that we make this distinction is that if we just focus on the steps, sometimes we've found people stop doing all that stuff. They get discharged, well, I don't need to do any of the stuff I was doing to get discharged because now I'm discharged. And so that – that – so that's why something bigger that occupies a larger space for them, and really is deeper, is what we are going for. And the steps fit into that. Not that we don't do them, but they fit into that. Now that I have my driver's license, I can drive. Well what's going to be good about driving, and that kind of thing.

Yeah. A way to have people then be able to really elaborate that and say, well, if I have my license, I'll be able to go to that concert that I really want to, or maybe I'll be able to meet somebody. And then it connects to like a relationship-type aspiration. That there's things that it can lead to that are bigger than the initial step by itself.

## Discovering Meaningful Aspirations and Taking Action with CT-R

Some of the other things that you guys shared and that we often see is the obstacles as a goal and the removal of an obstacle. So that might be to say to stay away from substances. Maintain my sobriety or – or not – to stop using, for example. So that's when someone is focusing on something that they don't want rather than what it is that they do want. It could also involve symptoms, things like I want to not hear my voices anymore, or refrain from self-injury, things like that. And, again, those things are really important, and we want to validate that for the person. It sounds like that is something that is really important for a person, and what we want to find out then is if they were able to have those kind of obstacles out of the way, what is it that they would be able to do or get and move toward, because, again, that is what is sustaining – that's what's going to build that motivation, sustain the motivation. Because stopping is not – in and of itself – is not motivating. And it's something that, you know, we need a reason to make those kind of big changes, and so the leading to something better is where that's out.

Yeah. It's kind of – you think of it in terms of replacement. It's hard not to do things. But it's much easier to do certain things. And moving toward your ambition is great, and – and really something that is valuable to you. And then maybe – maybe you'll do something to refocus away from your voids. Or maybe then you'll do something to give yourself a little more energy so you can get up in the morning. That kind of thing.

Yep. And then there is kind of the unlikely or maybe more distant aspirations. And those are things that might be difficult to attain for anyone. Those could be seeing a famous rock star. It could be things like being a surgeon or – or getting my millions of dollars. There's a variety of things that it could be. Things that are either maybe traditionally seen as not necessarily realistic, though we don't like to really use that – that label for things. But things that are just more distant, would take a lot longer, and would be harder, maybe, for anyone.

And for those, that's where we really want to find out what's the meaning. What would be the meaning of achieving those aspirations? What would be good about it, and what would it say about them? So that gives us really important information about what it is that a person might feel like they don't have in their life, whether it's connection, or power, or respect, or, you know, any of those things. They can – we can still – those are things that we can achieve now. So while we might not be able to, let's say, in a short period of time work together to becoming a famous rock star, it sounds like, you know, giving back to other people and really being creative are things that important to you. And those are things that we can focus on in the here and now and it doesn't really dismiss the – the larger aspiration.

Then finally we have the things that are more of the dangerous aspirations, which are goals that could lead to kind of self-harm or harm of others. So, you know, if an aspiration is that I want to commit suicide or return to substance use, then what we want to do is figure out, similar to some of the others, what is it that would be good about that. And if we were able to work together to achieve that, whether it's experiencing less pain, not feeling so lonely, not being a burden, or feeling – a lot of times with substance use may be feeling more connected to other people, having friends, quieting voices, etc., that those would be things that we could work on together and give a person a sense of choice. But also, again, really validating their experience.

So these are some – the next several slides are going to be some questions that you can ask individuals to really elicit these meaningful aspirations and then start to elaborate on them.

So, for example, what are the kinds of – you, now, when you are out of the hospital, what are the kinds of things you would like to be doing or getting? And for some folks that's a really big, open question, an open-ended question. And we might get, I don't know. Or, you know, things that just – we might not get any response. And so I really encourage people to get as specific as you can. So, all right, you know, if you weren't here right now, what would you be doing? What would you be getting? One o'clock on a – 1:30 on a Wednesday afternoon, what would you be doing? Where would you be? And really getting people to elaborate, what would the day look like? Who would you be with? And a big one that a lot of people can respond to and pick up on if – if the initial question is too much is just, how would it feel to be doing some of those things that you enjoy?

## Discovering Meaningful Aspirations and Taking Action with CT-R

And to reiterate, this is why it is really important that we have people kind of activate in the adaptive mode and have a sense for some of those things that they like, because we can really use that to tap into what they might be doing and use that as, you know, if you were able to do that, play cards with your brother, or go to that – that pizza place in town, you know, what would it feel like? What would it be like? And tapping – because those things are just sometimes easier for people to imagine and pull up.

And so with this we're looking at – we want to – we can use a lot of – because it's sensory detailed, we can use a lot of imagery to create this. As Paul was saying, it's not enough to just kind of find out what it is that a person wants. But really taking the time to imagine a lot of rich detail about what that would be like. What they would be able to do and – and – and to paint a picture.

So I want to give a couple examples of a way that we are able to do this. Those folks who have been really, traditionally, maybe harder to engage around the future because they really didn't have a sense, initially, of hope for that.

So there's a woman that we had the good fortune of spending a lot of time with who had been really stuck for most of her adolescence and early adulthood in treatment facilities, community residences, state hospital, kind of through the course of different placements. And really did not see a future for herself. Very kind of consumed by trauma, self-injury, and so forth. And a lot of sessions previously had been focused on those challenges. And so to shift gears, what the therapist did was really ask her, you know, when – when all this is said and done, and treatment is all said and done, what would you be doing, what would you be getting, and what does that look like?

So we had two key things. One was to be a nurse, and one was to get married and have a husband. And I'm going to focus on the husband briefly. So they asked some questions about what would be good about these things, what would it feel like, and she really talked about how she would be connected to other people, and able to help other people. But the real key, and the reason that we didn't leave it at that and start moving to action planning is because that just is – it just wasn't rich enough. So we asked her to take us through what would a day be like. Let's say you – you get – you find someone, you get married, you have your husband. What would it look like? Paint me a picture, what would the day be like? And she painted this – she can describe this image of them walking along water, and holding hands, and getting ice cream, buying a cup of coffee, and sitting together. And how she would feel like happy, and that people would respect her and see her as being valuable and worthy, and all these things that she struggled to see in herself for so long.

And so creating a really rich image was something that throughout the course of treatment we were then able to refer back to when things got really tough. It was inspiring other ways to, you know, maybe make different types of decisions about what she would do in the course of the day, or was a really motivating reason to use all of these great skills and strengths that she did have but didn't see a purpose for before because everything that you do in the course of a day can get you closer to the thing that you really want in the future.

We want to move – yeah. So the imagery is really powerful. It also pulls up positive emotions. And these are all things that can help bring up the adaptive mode and help the person bring about some resiliency.

Yes. And so when you know something actually about the things that activate the adaptive mode, it can really stimulate a lot of ideas. So there is an individual – another individual – who spent a lot of his time, a couple decades, in facilities. And had actually described the future as being like a – like a blank screen, you can hear the sound, but there's nothing really happening. You can't see a future.

And so – but he – he was really kind of withdrawn, didn't talk to a lot of people. And one of the things that kind of initiated and sparked some interest was in a group of people, this is kind of stereotypical (inaudible) steak from Philly here, but they were talking about cheesesteaks. And they were talking about what they wanted, where they would want to go and get like who has the best cheesesteaks and all that kind of stuff. It really got people going. The next thing they were talking about where they would go to do fishing even though we're in the city, and all those kinds of things. And throughout the course of time,

## Discovering Meaningful Aspirations and Taking Action with CT-R

and kind of activating these sparks of interest, eventually this gentleman who had been really withdrawn and stuck for so long, said that he had always wanted to do a documentary about the best parts of being in the city. And that was something that was really new and really exciting, and something he hadn't thought about for a long time. And so when we asked him what would it mean for him to do something like that, he talked about being really creative, sharing things with other people, and bringing together, and he would feel really supported.

And so – and we'll come back to how that led to a connection. Or to action rather.

But having the ideas are really important. Because if we start moving forward with action on things that aren't really important to people, then there's no reason to keep pursuing those things that we want. And that's true – that's just true for anyone, right?

So the meaning behind all these aspirations is, like I said, is where it starts to lead into action. What would be good about that? What would be the best part of it? And what would it mean for you to accomplish it? How would other people see you?

One of the things that we found is that individuals oftentimes – there's a trap, and we all probably do this a little bit – is that it's so easy to focus on where things aren't going to go well, and how, you know, so if I got this job at the new restaurant that's opening up, what if they, I don't know, maybe they mostly pay in tips, and what if I don't get a lot of money from that. And it can get – that was just an example that came up for me yesterday with somebody. But kind of – it's really easy to go into the ways that it won't work, or if we go into steps too quickly to think about how it's going to be too stressful and overwhelming.

So actually one intervention we did yesterday was we had a group of people who – we depersonalized it a little bit. We had – in the group, other individual started to share with the person things that they thought might be good about working there. And then she started to think about what would be good about it. So it's flipping the script on, you know, how do we get there and what might be hard about it to what would be good about it and how can that – we take that motivation to keep us moving forward.

And they came up with really cool things like you would be able to interact with a lot of people. It would get you closer to making more money so that you can get your son that birthday present you wanted to get him. There's a lot of things that can grow from there. But it was a little bit of the power of just kind of shifting that way of thinking that got her to think that maybe – not only maybe it could be a good idea, but maybe I can actually do it. It would be worth finding out more about.

Yeah. There's a – there's a real emphasis about what's good about the activities that really can help the people tap into their motivation and really be able to sustain it, actually. Whereas if they start thinking about what – what might not work as much, then that might tap into something else and they might withdraw. It's not that we're not going to help them develop resiliency around the challenges, but we really need to get the good stuff.

And once we have something – so something good like so if somebody wants to – to volunteer, or they want to help animals, something like that, then really we want to try to expand the aspirations and help them expand their life to other things that they might want to do. Because all of us have various things that we're pursuing, and it's not just one thing. And so we do the same kind of thing here.

And here you can see some questions that we might ask. So if we know that helping others makes me happy, there will be other places to look for that. Teaching, for example. Teaching is one way. Are there other ways that they might want to teach? So just kind of expanding whatever the value of it is into other activities that really matter to the person, and ultimately that's just strengthening them in their march forward, in their march toward the recovery (inaudible).

And what we really think is kind of – very important about this is that this slide here shows you some steps towards an aspiration that you might have, someone might have. And at each level there might be – there might be some kind of obstacle. So this puts things that are traditional targets of psychiatric treatment in the line of what the person wants rather than focusing on them in sort of away from that. And

## Discovering Meaningful Aspirations and Taking Action with CT-R

it actually helps to sort of – so that we don't get into unnecessary conflicts with them and we're all on the same page of trying to help them.

And so this is why we think aspirations are so key because they can allow us to contextualize challenges, whatever they might be. And things we don't have here are things like sometimes forensic involvement might be a challenge. Or someone might be homeless. And they might physical problems, also, in terms of their health. All these things can be put in this context as something to do deal with because it is getting you closer to some of the stuff that you really want.

So the positive action step, this is – I've heard people call positive therapy a talk therapy. I call it an action therapy. It's an action therapy. You've got to be doing stuff. All the stuff we talked about, we – we're doing actively to get somewhere. And so it's very important that we help the people actually do stuff and really succeed in – in a way that is consistent with the values that they have. And as they succeed, they can start to strengthen their positive beliefs and weaken some of the negative ones they have that would lead them to hold back.

So pretty much any time you have an aspiration, there is something you can probably be doing today that has the same meaning that you're getting into your life. And that is recovery actualized right there in real life.

Yeah. One thing that I would add to that, too, and I can't help myself, I'm seeing some of the questions on the side, and you know, we can use – we don't have to – even to get these ideas of things people would want, we don't have to rely too much on talking to. We can also see – we can use a lot of different strategies for – for uncovering things that just make people feel more like themselves and seeing if they just might want to do it again. It could be planning activities into the future. And I love what someone just said about developing a pattern of successes. I love that, Michael, because it really is about being consistent and coming up with plans within – that you can do together so that a person, even if they have not been successful time and time again, are able to really experience success in the moment and see that maybe it's possible to continue to try things so that they can continue to be successful. And I think that's why positive action is so important.

So a couple of the ideas that we have included here for positive action, and this so not all inclusive, but these are really good ways to do it, are really involving folks in the community. So for folks who have aspirations about reconnecting with people, or for whom the meaning of their aspiration is that they are able to help other people, or have an important role in their family, or experience a sense of accomplishment, the community is just such a great way to start doing that.

Going to programs in the community with our – with individuals that we're working with, whether it's church, or a club, a walking club. We have people who have done like building-type clubs that anyone in the community can be a part of. And they can test those waters. And you can test those waters together. Those are things that can be particularly useful for like an ACT team, or family members who are – are just really trying to encourage a loved one to be involved in the community.

Things for residences and maybe inpatient settings would be finding opportunities for individuals to have like really meaningful roles as part of the community where they are working collaboratively with the maybe staff of the residence. And with each other. So that they are able to fulfill those (inaudible) of being helpful, useful, and so forth. Continue to have energy and so on.

And really finding ways to keep them connected to others and broadening their social network outside of treatment I think is another benefit to action.

One thing I'll say, so for folks who are working with people in an outpatient setting, sometimes it's a little bit of giving yourself some permission to do things that maybe don't always look like traditional talk therapy right there together. So we've had folks do – have done building projects together in session. Also done like cleanup projects, and so on and so forth, where people have really meaningful roles. They were achieving successful steps together with – with their, you know, therapist or peer specialist, and have been really able to take away a lot from that that propels to what they want for the future.

## Discovering Meaningful Aspirations and Taking Action with CT-R

Yeah, and I would say as you start to do this kind of thing, you really see, again, the person start to develop momentum. But all of this positive action produces wonderful evidence to support the positive beliefs and wonderful evidence that you can be successful. And that's really the next step that we talk about.

Because one of the things that we know about a lot of the people that we work with is that they don't always naturally learn from positive social experience. And there is research to support this. And so – so this is where we can come in as collaborators to really help them notice that – that they are being successful and that we can help them strengthen certain kinds of beliefs about how they can connect with people, that they have control, and that they have capability. These are going opposite now of some of the beliefs we talked about last time that could really get in the people's way.

But similarly, when they do stuff, they actually have more energy rather than less.

And then developing concepts of resiliency. That they actually can endure stress, and they can actually be empowered with their own ability to overcome it, and then really succeed in what they want to do. And this is the way in which the adaptive mode becomes the dominant mode. But really just making sure that they – they see – collaborate with us and see just how well they are doing and how much they can do.

And then at the end of the day, I think being able to realize that when things do not go the way that you want them to, that's all right. You can still – you can work with that. And that's what we all do. And it's the biggest gift that we can develop with somebody.

So the next few slides are going to provide some examples of ways to kind of draw people's attention to what it is that they are getting out of that positive experience so that it becomes more than just a positive experience and instead is really an opportunity to either reactivate some of those beliefs that they held about themselves previously or to maybe learn something new about themselves.

So the first set here are some ideas with regard to the connection. If you're – if one of your targets in work with an individual is that they don't feel that they can be connected to other people, or they don't feel that others maybe really like them, or they don't do well socially. When you have a successful connection experience, whether it's through games, or helping others, whatever it might be, you can draw their attention to the more kind of accurate statement about their ability to connect. So if you are able to connect with – with Joe like you just did now, is it possible to make friends, you know, if that is one of their aspirations. And link also this to what they want in the future longer term. That was fun. It seemed like you and Emma were pretty connected, huh? And, you know, it's good to have a friend, don't you think? Just kind of getting people to – it's not just saying, wow, that was good, and leaving it there. Its' posing it as a question to help individuals really draw the conclusion themselves.

Here are some examples with regard to capability. So let's say you've been working on a project together and really doing the action-based approach. So you were able to do that, do you think that you could do it again? What about something similar? It's really about taking it and – and drawing their attention to the fact that this wasn't a fluke. It's something that we can do again in the future. And it's not just something that you do because maybe you are a member of this treatment community, whatever that might look like.

These are some examples of questions about energy. One of the tips that I use when people really don't always feel like they are going to have the energy to do things and that that's not a challenge of them, is I use my own experience of when I'm with them. So, for example, if we have done a workout club to start our day. And I notice that I really have a lot of energy, I might say, wow, I've got so much more energy now than when we started this. How about you guys? And then drawing some connection to the fact that – that they were able to really create their own energy in a way that maybe they didn't expect. Did it go better than you expected is a really good question for that as well.

And then lastly control. So these are all kind of the main categories of areas where people are trying to draw people's attention to these more positive beliefs. And so, you know, it's where someone is able to engage in activity and they're not bothered so much by stress. Drawing their attention to, wow, when you're doing this, it seems like you're not so stressed. Should we do it more? Really taking – any time

## Discovering Meaningful Aspirations and Taking Action with CT-R

you want to say something or draw – make a statement about something positive that you have experienced with someone, putting a question mark at the end of it and seeing where they go.

Yeah, and I would say ultimately the reason that we're doing this is that telling people stuff is not nearly as meaningful as them discovering it with you. This is some – that we were productive back (inaudible) is basic idea for many, many years, and we find it to be so. So that's why we really want to think about it's more about guiding and it's about discovering together.

So ultimately the way we see this working is that when we start with the people, they are much more in a patient-kind of mode, as we're calling it in quotes, and over the course of this really sort of getting the adaptive mode going, really starting to figure out what the aspirations are and achieving them in everyday life, we then get much more in terms of positive beliefs being strengthened. I'm a good person. I'm a helping person, not a hurting person. The negative beliefs are also weakened or less accessible is what we think there.

And then this is the context in which you bring in the resiliency. This is where it is that you might – you might bring the skills you've learned various places. Or develop some new ones if you don't have them. But it's really about empowerment. Resiliency is really about being empowered in your life to do – to see what you want to do, get what you want to get.

And so this next slide really shows sort of – this is the way that we see the thing progressing as. And we've seen many people do this in all these different settings. It's really sort of getting in touch with the – with the adaptive mode. And then really starting to have the empowering experiences away from things that have been getting in your way and focusing on the stuff that you really want to be doing. And it's going to – and it's going to involve really participation with others. And really starting to grow away – and towards what you've always wanted, but you really haven't been able to get up to this point, or not as much as you wanted.

And so, so this is – this is really the way we see the thing working. And just as a hint, next time what we'll be talking about is really how to – how to develop the empowerment with respect to whatever the challenges might be, whether it be disorganization, whether it be certain beliefs, whether it be hallucinations and that kind of thing.

Yep. So, with all that we want to encourage you guys to – we hope that this has been practical and that there are things that you can take away from this to try. And we'd love to know, in the Chat box as we move into the question period, what are some of the things that you might want to take back and try based on what we talked about today.

Thanks for that so much.

Thank you, everybody.

Thank you – thank you Paul and Ellen. You know, I'm always amazed when presented with information that rings true, my first thought is, oh, I know that. And then it's like, oh, I know that, how do I put that into action. And so the distinction that you made, Paul, in terms of referencing this as an action-based intervention or a therapy rather than talk therapy, was really illuminating and I appreciate that.

We have some great questions from the audience, and I know we are not going to have enough time to get to all of them. I want to let our participants know that I will let you all know what all the questions were so that you can consider those as we prepare for the third webinar, which will be in the first week of February. The Wednesday – the first Wednesday of February.

But, for today, let's look at a couple of the questions that were asked by people. So a couple of folks asked, could you, briefly, tell us the difference between cognitive therapy and CD-T?

## Discovering Meaningful Aspirations and Taking Action with CT-R

Okay. The – the answer that – that Dr. Beck gives is that it's a historical distinction that might not really have a lot – a lot to go to it. Basically there were people who were doing more behavioral therapy at some point who brought the cognitive part onto it. So focusing on beliefs.

And so – and that's really where CR-T comes from. And, of course, CT itself is a little older than that. Dr. Beck developed it in '63, '64.

So there could be more emphasis on – on – on cognition, but I would say in our hands you really need all of it. And you can see it's an active thing. But we need the conclusion drawing. It's not enough just to do the action. That doesn't do the trick for you. You really need to draw the conclusions and really sort of develop a different – these different views of yourself.

But we think it really fits together, and you can't really do anything without the possibility of really changing sort of the way that you see yourself, the future, or others. I think it's –

Um hmm.

That's a short and dirty answer to it.

Right, right. But just thinking about it in a historical context seems to add some clarity.

Now, there were a few questions that were grappling with the idea of how to approach the use of visualization techniques with people who had significant trauma histories. And I don't know if you all can hear me because there is some background noise, but really, you now, the question of for people who have complex PTSD, or people with severe and persistent trauma experiences, how would you approach the visualization technique in those instances?

So I think that – I think we've had a lot of success in actually using that with folks who have had some pretty significant and complex traumas. And really in helping them not focus so much on imagining – we don't do like imagery with regard to the – the trauma itself, or maybe have people close their eyes and do kind of that type of more mindful style of visualization, things along those lines. We've really had a lot of success with focusing on like action, what would they be doing, using their golden interests, and getting them to kind of identify a really specific thing they want – for example, one woman, very significant trauma, but the holding hands and having a cup of coffee and ice cream at the water, like that's a quick image that she was able to pull up that actually in many cases would help to kind of wash out some of those doubts and negative feelings that would come up and helped her ride some of that out as those things come and go. And we've had others who thought about a really specific way they wanted to design an apartment, or things along those lines that were really motivating (inaudible).

Yeah, I would say – I would say that what we've seen is that they can often use these positive images as a way to remind themselves of what they care about and focus away from some of the distressing stuff that they – that they would otherwise experience. And so when there is some sense of rejection, or a loss or something like that is coming up, they can use the image to focus on what they really care about and what they want to be doing.

Yeah.

And that sometimes really helps them very strongly not hurt themselves or not do some of the sort of interpersonal stuff in reaction to those – to those impulses.

Yeah.

Um hmm. And so let me just see if I am hearing you right. The imagery is less either past or future oriented and much more here and now. But also really concrete. So, Ellen, for instance, your reference of, you now, holding a cup of coffee, you know, that's really present, and so that's the – the kind of the piece that (inaudible) us.

Yeah, I think – I think you've pretty much got the idea. It should be really rich for the person.

## Discovering Meaningful Aspirations and Taking Action with CT-R

Um hmm.

And usually bringing up some (inaudible) that will compete with some of those other sort of negative –

Um hmm.

Going the right direction.

Yeah. Because even if it's future oriented, thinking about some of those experiences in rich detail in the moment can actually kind of bring about some of that experience. So, for example, when the woman was talking about walking along the water and having ice cream and so forth, she actually – her whole – her whole body relaxed. Her (inaudible) brightened. She felt happy in that moment just imagining what it could be like. And so being able to have that experience even in the moment to diffuse and reflect – and refocus can be really helpful.

Um hmm. Yeah. Thank you. Thank you.

So, again, a question that a couple of people presented, has to do with, you know, so much of that you were speaking about was needing strength, and which aspirations are, you know, tied to. It's logical. But how do you address the issue when people say that they are afraid to have aspirations, or to go after their aspirations, because they have had so many failures.

That is such a (inaudible) question.

Or at least what they call failures.

Yes.

Yeah.

We love that question.

Yeah. And I think that's where doing action together to really provide evidence that there are things that you can do that are possible is so important. Because we've had people who have said, you know, yeah, I want those things, but what's the point of talking about it, I'm not going to get it anyway. Or what if I don't get it. And it really opens up a lot of – you can find out what it would mean for them and really achieve some of those things in the moment together. Because it can be a step-by-step kind of small build up.

Yeah. And we've seen – and really – and really that's the beliefs we talked about the first time. The belief that they can't succeed, which is a defeatist belief, and they are afraid to fail, all that kind of stuff. And so that's why you can – you can go after small successes – someone wrote that – and as those small successes, you can build them up. And then the person feels more comfortable, well maybe if I keep at it, I'm going to be able to do what I want. That kind of thing. So actually I think it works out really well. And you're really going after what's – what's been holding the person back when you go after that exact thing. To help them with that.

Yeah. That – that's great. What about the importance of the individual being able to acknowledge their need for support or to change in some way? And this is basically how to – confronting people who – who are saying, you know, I'm not ill. You're – you're, you know, diagnosis doesn't apply to me. You – you know, I reject that. Are you able to – how do you frame this approach for individuals who are kind of putting up that initial barrier?

I think that this is one of the actually best ways to connect with people in that way because regardless of whether you identify as having a mental illness or not, any of us have things that we want and things that are really important to us. And one of the best ways, I think, to connect with individuals is to really put that – that ball in their court to say, hey, you know, well, you know, we're here, we're together, what are some of the things that you want to be doing and getting? And not focusing so much on that – what they

## Discovering Meaningful Aspirations and Taking Action with CT-R

are bringing up of how this doesn't fit and instead focusing on well how can we use our time together well, then? What can we work on together that's really important to you and still focusing on the collaborative approach that's really rooted in what the person wants. Because it doesn't matter whether a diagnosis is or isn't, and whether they – they talk about it or not. If we can work together to move toward something that is really important to you, then we're good partners. And that's – and that's leading toward recovery regardless.

So obstacles that are challenges that they may experience that could be diagnostically-based or not are going to come up, potentially, as we move towards this thing. But we can address it in the context of the aspiration rather than the diagnosis.

Yeah, I might say historically, one of the reasons we developed a lot of this, and why you notice we talk about an adaptive mode, accessing, energizing it, is because working with a lot of people who didn't want help, who didn't want treatment, who didn't identify with the treatment, that kind of thing. And so it is precondition of treatment that you have to want it, or you think that you have this, that, or the other thing, then we weren't going to be able to a significant number of the people that we really wanted to be able to collaborate with and work with. And so – and really, sort of help enable and empower. And so what we have found is that this approach is really helpful there. That a lot of younger people, for example, just want to get back to their life. But we can talk about getting back to their life, too. And we can – we can talk about dealing with stress because everyone deals with stress. There is nothing stigmatizing about stress. And that is something that they can want to talk with about with us.

So actually you have kind of put your finger on a key aspect of really this approach, which is that you don't need some of that at the beginning because somebody who wouldn't engage in something that's – you've got to name your medications and that kind of stuff, will engage in something if it is going to get them closer to a girlfriend, or closer to being able to help other people. Whatever it is, it (inaudible) their value.

Yeah, so their true aspirations. That's fantastic.

I am so sorry that we're out of time for today. But I really want to thank you both for the preparation and for sharing your expertise, for introducing us, even at this kind of introductory level, sorry for the redundancy there, but, you know, where we are – it's – it really is striking a chord with so many people in the – in the field, and I'm appreciative of your time and talent.

I want to remind folks that in CT-R, recovery is the key, and that's what we're shooting for. And that's what brings all of this. And SAMHSA's ten principles and four dimensions of recovery stay focused on aspects of life that are aspirational. And so (inaudible) and health community purpose are what drives all of us. And this is not based on our HINs drawing a diagnosis, but a consensatory position in communities.

Recovery to Practice is an outstanding initiative that seeks to bring to the field and to various disciplines information that can improve our approaches in our engagement with individuals that we serve. Some of the Chat talked about the differentiation between prospective discipline, or practice, and we believe that all these disciplines have a role to play in a recovery-oriented system.

We want you to now that what is shared in a one-hour, or over four one-hour webinars, cannot begin to provide all of the information that's relevant, so we encourage you to continue your learning. We have provided some additional resources for you to cross (inaudible) with the information that presenters provide and resources that they provide. Also the Recovery to Practice (inaudible) newsletter on recovery-oriented cognitive therapy is available now. And if you visit the RTP website at SAMHSA.gov you will be able to download that webinar. It will be sent to people on our mailing list, hopefully this week. If not, next week. And check it out because there is more information in there to glean insights from.

Our next webinar, as I mentioned earlier, will be the first Wednesday of February, which happens to be February 7<sup>th</sup>. We will be meeting at 1:00 Eastern Time. So please be sure to put this on your calendar

## **Discovering Meaningful Aspirations and Taking Action with CT-R**

based on the time zone in which you reside or will be calling from. We will then have our fourth webinar on February 21<sup>st</sup>.

Register now! We want you to be able to get in. There's a lot of interest in this series. If you hear from people that they were not able to access the webinar, please share with them a copy of the recording link that you will be getting in the mail because you are registered. And it's okay to share that with people.

And later on in the year, the whole series will be available through YouTube videos that will be uploaded. So people will have access to this information in a number of formats, even if they don't make the live webinar.

So remember to check out our quiz if you need Continuing Education credit. Also, if you need a Certificate of Attendance you can download that. There are other downloadable materials. All you have to do is click on the item that you want, and then click download file or files, and follow the steps. We want to help enrich your knowledge base because continuous learning professionals provide the best services. And we're glad that you are with us.

Thank you for joining us. That concludes our webinar today.