

Course: introduction to cognitive behavioural therapy for psychosis

Address: https://asadis.net/en/course/introduction-cognitive-behavioural-therapy-psychosis/

Duration: 3h

Type of course: continuing education

Location: online course

Individual price: \$120.00

Overview:

Symptoms associated with psychosis are often intrusive and resistant, complicating the path to relief and recovery. To address this, Cognitive Behavioural Therapy has been specifically adapted for individuals experiencing distress from psychotic symptoms, giving rise to Cognitive Behavioural Therapy for Psychosis (CBTp). This method has shown strong results in managing persistent symptoms, demonstrating effectiveness comparable to the treatment of bodily sensations in panic disorders.

To help incorporate this new approach into your clinical toolkit, Dr. Best, a clinical psychologist specializing in psychosis and an assistant professor at the University of Toronto, has prepared a detailed workshop describing both the theory and essential techniques. In this training, Dr. Best will present why CBTp is particularly well-suited to tackle the most resistant symptoms of psychosis and facilitate recovery.

Through a clear conceptualization of CBTp, he will outline a detailed treatment plan, accompanied by multiple protocols to aid in its implementation with your clients. He will also introduce various cognitive and behavioral change strategies that will enable you to guide your clients in reinterpreting hallucinations and delusions.

The workshop will provide:

- A clear path for clinical, personal, and functional recovery- Evidence for CBTp in treating distressing psychosis, resistant and persistent negative symptoms, both with and without medication- Clarity into the structure and conceptualization of CBTp- Intervention protocols and the five treatment phases-Conceptualization of hallucinations and delusions in CBTp- A case formulation video

Additionally, Dr. Best will offer tips for maximizing action plans and delve into topics such as booster sessions, maintenance formulations, and much more!

Learning objectives:

- 1. Define the symptoms of psychosis
- 2. Articulate the structure of CBT for psychosis
- 3. Conceptualize hallucinations and 'delusions' using the cognitive model of psychosis
- 4. Identify appropriate cognitive and behavioural change strategies for psychosis

Learning material:

A theoretical course illustrated with clinical examples. This course is composed of videos of 5 to 15 minutes each. The PowerPoint of the course to download.

Audience: This training is intended for mental health professionals.

The expert, Dr. Michael Best

Dr. Michael Best, clinical psychologist, is Assistant Professor in the Graduate Department of Psychological Clinical Science at the University of Toronto, Affiliate Scientist at Ontario Shores Center for Mental Health Sciences, and Collaborator Scientist at the Centre for Addiction and Mental Health. Dr. Best's research focuses on cognitive mechanisms underlying experiences of psychosis and innovating cognitive behavioral therapies for psychosis. He has co-developed a novel cognitive treatment for internalized stigma, called BOOST, that focuses on helping people with a first episode of psychosis overcome internalized stigma. He has also conducted clinical trials of remotely delivered CBT for psychosis, and examined mechanisms of change during CBTp. Dr. Best is a member of the steering committee for the North American CBTp Network and an executive officer for the Canadian Association for Cognitive and Behavioral Therapies.

Syllabus

PowerPoint

Symptoms of psychosis

Presentation

Basics of hallucinations

Basics of delusions

Psychotic disorders

Recovery

Evidence for CBT for Psychosis

The psychosis continuum and cultural context

Evidence based studies about CBT and psychosis

Conceptualization-Driven CBTp

CBT protocol

CBTp Values

Tips for Ethical - Competent CBTp

Phases of treatment

Session structure

Cognitive conceptualization of Psychosis

Cognitive change strategies

Behavioral change strategies

Cognitive model of hallucinations

Coping strategies for voices

The example of Sally- voices hallucinations

Analysis of delusions

Case formulation video

Conclusion

Bibliography