

Responses to your Questions - CT-R Webinar Purpose Daily

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Thank you all for your great questions and participation during the April 17th webinar — Purpose Daily! We have answered questions you posed that we did not get to address during our session together. In the answers below, we have grouped together questions that have a related theme. Feel free to write us! *Ellen Inverso & Paul Grant*

- 1. Three of the questions concern isolated people who may have medical or terminal conditions.
- a. How do you use this or related approaches to help clients who are socially isolated in general (even before this crisis), have medical issues that limit their ability to engage in activities they would like to, and are very discouraged and cannot see any possibility or hope for themselves while at home during the crisis?

We developed Recovery-Oriented Cognitive Therapy (CT-R) precisely for people who are socially isolated for all the reasons that this can happen. The discouragement we understand from the cognitive model. While there may be real reasons that their life space has been curtailed, things are not as impossible as their beliefs might be leading them to assume. There are so many ways to connect up with others, to realize purpose. As we focused upon in the webinar, what are the values that person has? What are their aspirations, even in such a limited state? What is their best self? If it seems very difficult for the person to consider a best self or hope they've recently experienced, ask them to reflect on a time before the challenges were so prominent. For example, what was a positive experience they've had and what was the best part about it? How did they see themselves? Similarly, you can ask: "If everything was how you wanted it to be, what would you be doing or getting? How would it feel? How would you see yourself and how would you hope others see you?" Taken together, these questions uncover important meanings and beliefs. Then we can move into practical and straightforward ways to realize those meanings. They can be very actionable: connecting to others, helping others — even done remotely or at six feet distance. Attached is a handout that links activities to specific beliefs of connection, capability, and control. These are just examples — be creative!

b. Can you talk about how to create purposeful activities with isolated seniors or others that lack internet access?

Similar to the answer above, get in touch with these isolated seniors' aspirations, and what gives them (now or in the past) the most meaning. We can then be creative about helping them experience that meaning now. Most of what we are talking about doesn't require the internet. We suppose that helping others and connecting will be part of each person's purpose. How can they do things that are safe but meet their meaning? Some ideas include: reading bedtime stories to grandchildren or other relatives over the phone, writing favorite recipes or "tried and true" life hacks to eventually share with others, creating a collection of favorite comic strips from the newspaper to send or share with others who could use a laugh, watching television programs such as concerts or spiritual services that they can talk about with others. The key is this: action is not just distraction. We draw their attention to how these activities connect with their values and positive beliefs and draw conclusions that they're worth doing because it provides purpose and connection. Constraints help make us more connected, and help make us experience our purpose, as we overcome whatever obstacles seem to impede our action.

c. Suggestions for clients with terminal prognoses who have had to cancel important items on their bucket list and are having to give up important wishes/plans?

When getting to terminal prognosis, we think that the successful formula is reduced to its essence. Given the time you have been told you have, and given what your current means are, what do you want to do? What would matter most to you? How do you want to see yourself, and how would you hope others will see you? With limited time and resources, we can do some of our most amazing work.

- 2. Two questions requested further elaboration for individuals who have motivation as a challenge.
- a. After working on aspirations and creating visuals, if there's lack of motivation to implement it how do you go about it?

If you run into a lack of motivation to implement the visuals, we advise to take a step back and work more on your relationship and finding the person's interests. Our experience is that when you get the right relationship, do things together that really excite the person, you have a better shot at talking about aspirations they really want to do. The other idea we would propose is to make sure you have the best future target. A lot of things that our individuals come up with might be what they expect we want to hear, what they think would work — but the real gold lies in their valued aspirations that come from them, realize their values, and their dreams. The more we can get these kinds of targets, and we can in a trusting way try it out, the more we actively bring about the life they are wishing for. You will also want to make sure you have created a vivid enough image that even just talking about it brings about positive affect. This means spending sufficient time elaborating, learning about best parts, using the senses to get good details, and so on – all before considering what steps a person would take to get there. You will want to draw attention to the positive emotion and help the person notice they can experience it just by talking about the vision. How might they feel if they tried a step? Any action step, no matter how small, can be linked up to the aspiration. For all of us, putting our feet on the floor in the morning is a first step that gets us closer to any aspiration. Maybe this first step is where your individual is at. You can link this action to the meaningful desire. Successfully putting feet on the floor counts as a success, a source to build up additional success experiences.

b. People find it hard to find their hobbies or things to do while these times. Lack of motivation leads to what's the point? "I just wanna lay down because there is uncertainty we don't know when to go out?" What should we do with patients with low motivation?

Both of us talked about the beliefs that underlie feeling that all action is futile, just lie down because nothing can succeed, there is just too much uncertainty. We think that your interactions can show something concrete and certain. What is it that is exciting to the person? Can you do something that will tap this part of them. We call this in CT-R the *adaptive mode*. We all have it. Are there things you can do together that bring out this part of the person? Everyone has the activity that activates this positive part of them. If you can find this — through music, sports, art, cooking — you start developing the person's access to their natural motivation. It is meeting them where they are at. Finding the hook, if you will, and building on it. Purpose can come later as you develop the relationship and discover interests and ultimately passions.

- 3. Relatedly, two questions asked to apply the ideas of the session to depression and loss.
- a. How can you apply this to someone who experiences MDD and has difficulty with having aspirations and bigger goals?

We would advise not starting with aspirations or goals. Rather, you want to access the person's adaptive mode — them at their best - through their interests. Do things together that bring the person out a bit. Whatever this may be. You connect with them and begin to establish trust. While many treatment plans require goals, a person with pretty severe MDD will not believe that they can have a future. You can get around this by having positive experiences that quietly are the opposite of what they are expecting. As you build up trust and energy through action together, then you can go for aspirations. The key is not to go for this too soon — when their demoralization is a dominant mode. Another possibility is to pose the question: "If we were able to find a way to work together to feel more energized and less depressed, what would you want to be doing or getting?" or "What does this keep you from doing? What would be the best parts of doing that?"

b. My first exposure to CT-R was at a Beck Institute workshop and at that time, the focus was mostly on Schizophrenia. It seems that since then the focus has broadened. I see a person who has a history of depression but more recently lost a spouse. I am interested in whether this has the potential to help people experiencing grief.

CT-R has broad applicability given the use of the cognitive model at its core, which has been applied to so many challenges. Grief and loss tell us about what we most care about. Losing someone who is so close is very hard. We propose trying to refocus the attention away from the hurt experience on to the value the person brought to you and the world. This gets at purpose. Losing a person is out of our control. But, given our values and aspirations, how can we do something beautiful and meaningful in this world that would really honor them and bring us value at the same time?

- 4. Two questions focused upon the application of vision boards for aspirations and purpose.
- a. I used a vision board with a client who is "on pause" to reunite with her father to introduce him to her son for the first time and go to Disneyland with him. She did a small vision board of what she imagines and hopes for the day. Is there anything else I can add to this activity to deepen the experience for her?

Our first thought here is to expand the image. Can we expand upon the focus of Disney to the broader things she might want during that event and larger things she is hoping for her father and her son. Disney seems like a specific event. But there might be a bigger aspiration here, a bigger purpose she is hoping for with her family. Something that might hit a bigger value for her. For example, it might be about having a strong family unit, to have positive relationships between family members, or that families should have fun together. Identifying what the best parts of this vision would be gets us closer to meanings and values. She can then consider if there are ways of meeting those each day now — and even after they do eventually get to Disneyland! For example, can they video chat and tell fun stories, or read Disney books. Can they look up the recipes Disney recently shared online, make them in their own homes, and then enjoy them together over video chat? This can build momentum and maintain motivation to keep working toward the powerful and highly valued aspiration.

b. How would you help a client bring forth a quality such as confidence, patience, wisdom in the form of a vision board? Could you give an example of what a vision board would look like based on a quality?

One possibility is to have the person image a time when they felt confident. What was the feeling like? Where did they feel it in their body? Are there other times they can identify that they felt it. From these experiences, can we develop together images that might help them remember, but also prompt action to achieve these meanings. Similarly, they could find or create images that make them think of the desired quality. A mountain for strength, a shooting star for striving toward the future or accomplishment, books for wisdom, a person meditating for patience

- these are just some examples. What will be most important is that the images are generated collaboratively with the individual, as that will make it more likely that we can effectively use the image or board to inspire action.

5. How does this work with adult with mental health and addiction?

We have seen great success focusing on aspirations and purpose with individuals who can be described has having a dual diagnosis — in hospital, on community teams, in private practice, amongst veterans, those who live on the street. A key part of the approach is to locate the meaning of alcohol or substance use: what is the best part about it? Is it for connection? Is it the only time the person feels themselves? Is it to deal with stress? Does it feel good? Aspirations give us context to meet these meanings. As Paul said in the webinar, it is hard not to do something. Replacement — in this case of using — is more promising strategy. But the replacement needs to have power for the person, because cravings of addiction are very strong, and having lapses is part of the recovery process. Aspirations and their meaning provide us just this source of motivation. Let's say, I want to be a good parent, and this makes me feel like I am good person, making the world a better place. And, when I use, I feel connected. I can do activities daily to connect with others, maybe ones that help others in ways I could help my child.

6. A client asked me: "Why is so important to have a purpose?" I answered that it is something that moves you to do more things and to feel motivated, but he asked me: "Is it necessary to have a purpose?" I know that is necessary for have hope and motivation, but I don't know if there is another more powerful reason.

For some we work with, the sense of purposelessness and futility is quite strong. Going directly at purpose by asking what it might look like can tend to activate all of these beliefs and negative life lessons. This deep negativity sees nothing as worthwhile. We advocate trying a more indirect approach. Are there activities that you can do together that show a spark in the person. Playing music? Talking sports? Can the person help you with something or teach you about an area of knowledge? Do they like the outdoors or traveling? The spark you are looking for we call the *adaptive mode*. It is a break in set from the extreme purposelessness. If you can access this part of the person, you can build up energy and trust that will open up the possibility of identifying bigger targets that increase access to hope, motivation, and reason to do the hard things in life. When you have a sense of interests and aspirations, the greatest power comes from what they mean for and about a person. For instance, when you have a purpose, you are able to very authentically contribute, belong, and demonstrate value and worth. This can be very powerful and important to people. Similarly, others may see you as accomplished, important, and capable. These are just some examples of meanings and beliefs that might be especially valuable for people to have. Without purpose or these more positive beliefs, taking action or having hope can be difficult for some.

7. Would the miracle question work to apply?

By the "miracle question" we are guessing you mean something like, "If I waved a magic wand and could make all of this go away, what would you want your life to be like?" We have seen this question work to get at aspirations. However, you might get answers that will require refinement. The person could say, "I wouldn't hurt so much." You can reply, "If you were feeling less stressed, then what would you be able to do?" Aspirations are big targets that can generate a lot of meaningful activity that gives the person a sense of purpose. They may not know for sure what it is, but you can help them find it. The key will be elaborating on the response to the initial question to identify meanings and desired positive beliefs.

8. I have someone who was doing regular 5ks as part of aspirations of independence and perseverance. He felt down that 5ks are cancelled but we were able to focus on all of his walks even now are persevering and working towards goal and also focused on what color/design we think the next Turkey Trot shirt will be next year.

This sounds like a good way to help the person refocus their disappointment from the races being cancelled onto some preparing (the walks) and planning (t-shirts) for future 5k events. You might be able to open up even more possibilities if you probe a little more in terms of what is the best part about the 5k? It sounds like you have the personal benefits so far in terms of being capable (independence and perseverance). However, the color of the shirt and the missing of the races suggests that there is a social piece here. What is the best part of doing the race with others? Are there meanings there that this person can get into their life in other ways, especially as the races are on hold?

9. How do you align aspirations for purpose with the Cognitive Model, namely: Situation -> Beliefs -> Reactions?

The cognitive model is at the core of CT-R and aspiration-based work. You can think of meaning of aspirations as positive core beliefs: I am a good person; Other people appreciate me; I can make a difference in the future. Situation: I join the neighborhood clapping out my window to honor first responders. Beliefs: I am good person; It is better to do with others; I'm a member of my community (I belong). Reaction: I feel good, part of something, I want to do more of this, it feels better.

In CT-R, we use a tool called a Recovery Map to try to link activities to possible beliefs that people will experience when doing the activities. Because much of CT-R is about bringing your best self about, the work is more about anticipating the meaning, trying the activities, and strengthening the positive beliefs, which makes the best self real.

10. How can we best utilize our time working in one-on-one CBT individual therapy when there is not so much happening in our week?

We would propose using the sessions to have positive experiences together. Do things that are fun or meaningful together, even over the phone. For example, listen to music or create a poem or learn a new language together. Notice how you feel during the activity and what it means about you. This helps kick off a session with connection and energy. Then can you find ways to both have action plans of activities to do between sessions. We think active sessions are good generally, and have the benefit of helping you get around some of the limitations of having to do remote sessions. Your one-on-one can be an action generator for connection and purpose. For more ideas, reference our CT-R Guide to Teletherapy.

- 11. Three questions were requests for resources.
- a. I regularly use CBT and am new to CT-R. I really like these concepts, as they are similar to DBT Emotion Regulation Skills. Does CT-R have worksheets around these concepts that can be used with individuals or groups? Any resources you can share or direct me to would be appreciated.

In CT-R we strategize working with challenges, such as emotion regulation, around the impact they are having on achieving aspirations. This will be discussed more in the May 1st webinar on turning stress into valued action. We have attached to this email several resources that are currently available publicly and are part of Beck Institute's COVID-19 resource page, including activities sheets and a propressive muscle relaxation script. Additional resources and handouts are available to registrants for our 3-day workshops (April 22-24, and October 19-21, details and registration here). We also have a number of worksheets and resources included in our forthcoming book, *Recovery-Oriented Cognitive Therapy for Serious Mental Health Conditions*, expected to be out this fall from Guilford Press.

b. Do you have handouts on activities promoting Purpose Everyday amidst COVID 19 pandemic?

Yes! We have attached two suggested activities lists that link up to specific targets. Other examples of possible activities are described in the answers above, as well. Remember – activities should be personalized around *interests, skills, areas of knowledge,* and *desired meanings*.

c. Can you send your outline of applying this? This is terrific!!

Thank you! Here is the overall approach to purpose:

- 1. *Identify aspirations* long term desires for the future that can be tangible or oriented around meanings and values (e.g. being a great uncle, being a helpful person in my community, becoming a nurse so I can give hope to others).
- 2. **Enrich** and **uncover meanings** use all 5 senses to create vivid images of aspirations and ask for lots of details about meanings and related beliefs. Do not proceed to transforming desired into action until the image is one that by itself is energizing, exciting, and inspiring, producing positive emotion at just the thought of it.
- 3. Break aspirations and/or meanings into practical steps so that it can be brought into every day it can be a step that gets closer to a tangible target (e.g. reading to prepare for going back to school), or a step that meets the meaning or positive belief (e.g. an act of service to experience the value of giving back to others one day finding items to donate and one day sharing a favorite recipe, as some examples).
- 4. **Notice how action aligns with aspirations and meanings** draw conclusions about how these action steps get us close to our aspirations, what it says about us that we took those steps, and how we imagine others see us for doing those things. Also draw conclusions about how worthwhile an action was and if it would be worth doing it (or something similar) again.

12. is there a way to reach out to Ellen Inverso directly?

Yes! Send an email to einverso@beckinstitute.org.

13. Do you all have a hotline for clients to call?

While neither Beck Institute nor its Center for Recovery-Oriented Cognitive Therapy run a hotline, there are many COVID related call-in numbers nationally and internationally. Three examples: New York State Office of Mental Health COVID Hotline, 1-844-863-9314; National Alliance of Mental Health Helpline, 1-800-950-6264; National Suicide Prevention Lifeline, 1-800-273-8255. If you would like to inquire about CBT therapy services through Beck Institute's Clinic, you can call (610) 664-3020.