CBT for Front-Line Medical Professionals: Using the Socratic Method

ALLEN R. MILLER, PH.D., M.B.A.

Director, CBT Programs
Beck Institute for Cognitive Behavior Therapy

May 16, 2020

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COGNITIVE BEHAVIOR THERAPY

About Beck Institute

on T. Beck developed CBT at the University of Pennsylvania in t
, Dr. Beck and his daughter, Dr. Judith Beck, established Beck I

itute is a leading international source for training, therapy, and
s in Cognitive Behavior Therapy (CBT).

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Summary of First Webinar

- First Aid: Physical needs, Safety, Family connections

- Values, Aspirations, Priorities, Goals, Problem solve

- Cognitive Model

- Coping Strategies

- Change Efforts

Issues with Application of CBT

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- One of the first things callers do is **apologize "for taking up your time"**.

    --there appears to be quite a bit of **"guilt and self-blaming"**

- Callers have a **fear of contracting illness** or passing it on to family members

- Callers have "pressuring" or "non-responding" **administrators.**

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Issues with Application of CBT

- Socratic questioning is used to probe irrational thoughts but, **volunteers** will sometimes identify with the caller and **think the thoughts are not "irrational".** Volunteers, then, find it difficult to proceed.

- Callers work in **"harsh environments"** and have a lack of options.

- Volunteers have **trouble finding alternative options or thought processes** to help the caller

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Agenda

- Identify **when and how to use** Socratic Questioning
- ---Caller's leading-off with an **apology**

  ---Caller's expresses **fear of infection**

  ---Caller's reaction to **pressuring administrators**

- Provide **conceptualizations** of callers' issues:
- Illustrate **different methods** of Socratic Questioning
- When Socratic Questions **are not used**

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Socratic Questions

The purpose of Socratic Questions in CBT is to explore problems or aspirations and help people draw their own conclusions.

Apology "for taking up your time".

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Response to "Apology"

- In response to an apology, we will not get the biggest return for our effort with a statement like:

- "No worries that is why I am here"

   ---This statement of reassurance keeps the **focus on the "situation"** and **misses the opportunity** to identify and reflect back to the caller the **emotion that is connected to their apology**.

Response to "Apology"

- To let them know that we can see the problem as they do, we say:

- Preferable:

  - **"Sounds like you are feeling guilty that you are calling here."**

- This statement:

  --Puts focus on the emotion (Guilt/Shame)

  --Demonstrates our understanding and acceptance.

Eliciting Automatic Thoughts

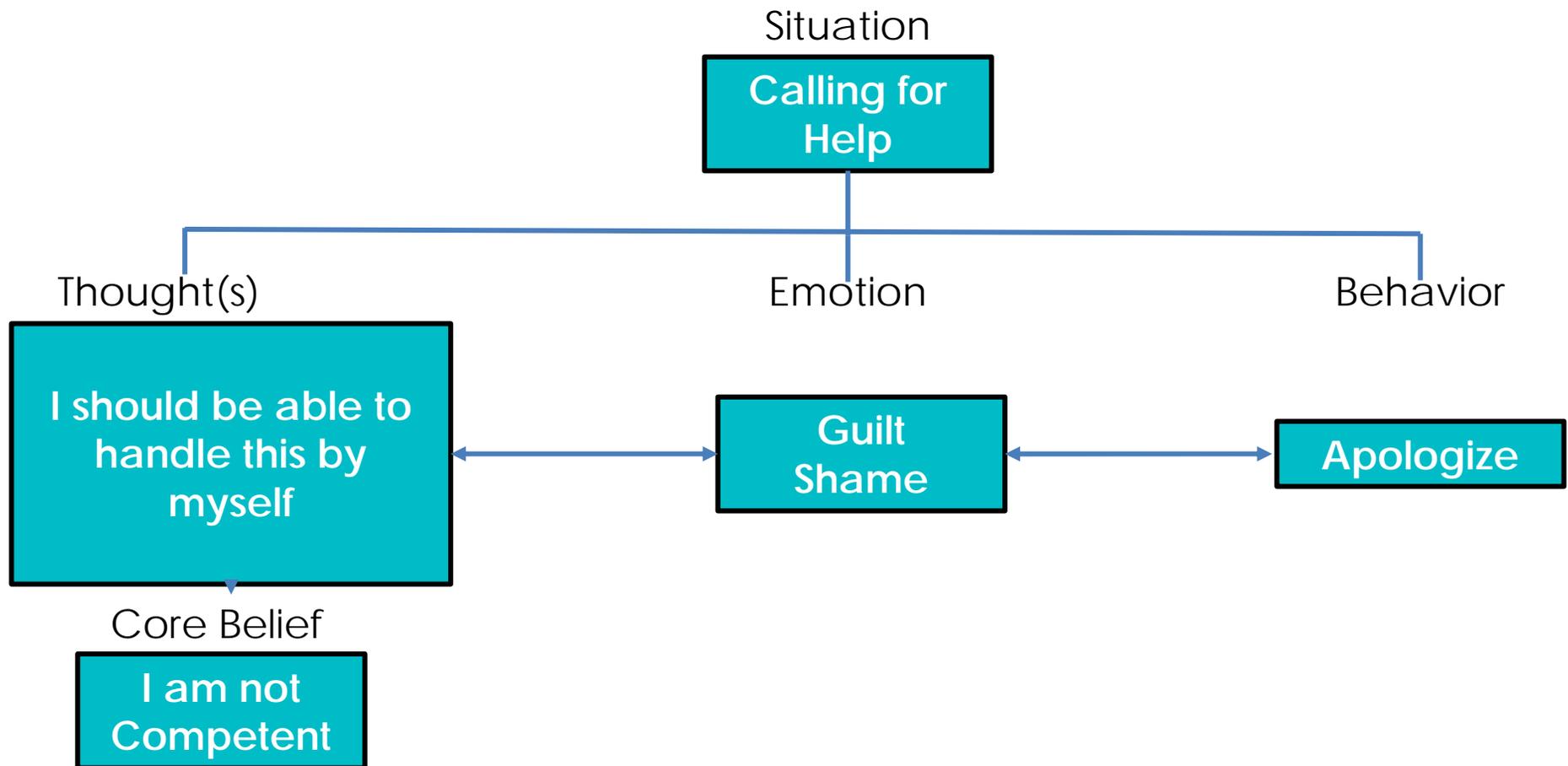--A reflective statement may elicit their automatic thought

  OR, we can ask:

"When you are feeling guilty for calling what is the thought that goes through your mind?"

--Callers response: (Automatic Thought)

  "I should be able to handle this on my own".

Conceptualization for "Apology"

Situation

Calling for Help

Thought(s)   Emotion   Behavior

I should be able to handle this by myself   **Guilt Shame**   **Apologize**

Core Belief

I am not Competent

Socratic Questions regarding Apology

- Ask questions about the automatic thought

- Ask permission: **"Is it ok if we spend a couple minutes evaluating that thought?"**

- Assuming the Caller's response is "yes" we ask:

- **"What evidence is there (from your own experience) that supports the idea that you should be able to handle this on your own?"**

- **"What evidence is there (from your own experience) that does not support the idea that you should be able to handle this on your own?"**

Evaluating the Automatic Thought

Automatic Thought:
"I should be able to handle this on my own"

Evidence that support automatic thought	Evidence that does not support automatic thought
I am smart I completed medical school I am Board Certified	• No prior training for a pandemic • Working without resources poses exceptional challenges • No one ever told us we would have to separate from our families to do our job

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Guided Discovery

"**If you were to consider all the evidence (i.e. evidence that supports the automatic thought and evidence that does not support the automatic thought) what would be an objective conclusion you could make?**"

Alternative Automatic Thought:

"**Although I am a smart, resourceful person, I was given no preparation for this and it only makes sense that I would reach out for assistance.**"

Consequent Emotion: Calm

Consequent Behavior: Call with comfort

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Alternative Automatic Thought

The Alternative Automatic Thought represents a shift in thinking

From:

"(I am) taking up your time"

To:

"Although I am a smart, resourceful person, I was given no preparation for this and it only makes sense that I would reach out for assistance."

The shift in thinking is accompanied by a more tolerable feeling:

From: "Guilt" to "Calm"

And more adaptable behavior: Make call with comfort

Fear of Infection

Threat of Infection

- Empathic statement:

  "You are afraid because you are in a very high risk setting"

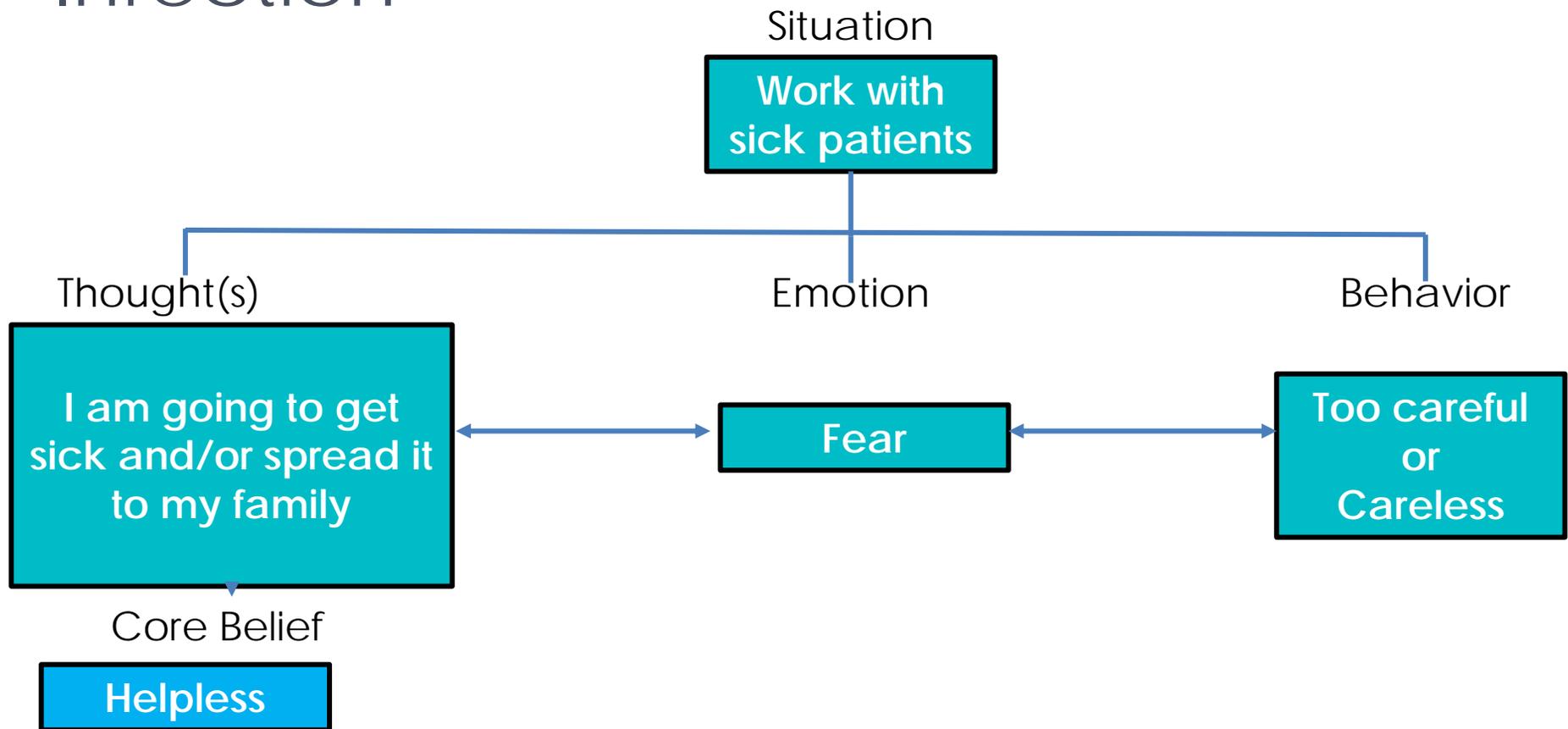 (This is not irrational. There is an actual threat)

- Ask for permission:

  "Is it ok with you if we talk about the threat?" (Likely response is "Yes")

- Double check the Caller's value:

  "Before we go any further, will you remind me again why it is that you wanted to be a physician?" (Possible response is "I want to help people.")

Conceptualization for "Threat of Infection"

Situation

Work with sick patients

Thought(s)   **Emotion**   **Behavior**

I am going to get sick and/or spread it to my family   ←→   **Fear**   ←→   **Too careful or Careless**

Core Belief

Helpless

Socratic Questions about "Threat of Infection"

- **"What would be the worst thing about becoming infected?"**

- Possible answer: **"I would spread it to my family and then I die."**

- **"What would be the best thing that could happen if you become infected?"**

- Possible answer: **"It would be mild and I don't infect anyone else"**

- **"What is most likely to happen?"**

  (Likely answer: **Something in between the other two"**)

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Guided Discovery with "Worst Thing Happening"

- **If the worst thing were imminent what would you want to do?"**

     Possible answers: A range of possibilities many with the theme of

     "Get things in order" (i.e. Make sure my family knows I love them, resolve ᶜ conflicts, prepare will)

- **"If you did those things, would you be able to find some measure of peace with that?"**

     Typical response: **"I don't want that to happen but, yeah, I could come to terms with that."**

Alternative Automatic Thought

- The Alternative Automatic Thought represents a change in thinking

From:

"I am going to get sick and/or spread it to my family"

To:

"I don't want that to happen but, yeah, I could come to terms with that."

- The shift in thinking is accompanied by more adaptable attitude: Acceptance

And a more tolerable feeling: Peace

Pressuring Administrators

Describing "Disrespect" Situation

- Describe Situation:

"Administrators keep pressuring me to work harder, longer, and under unsafe conditions."
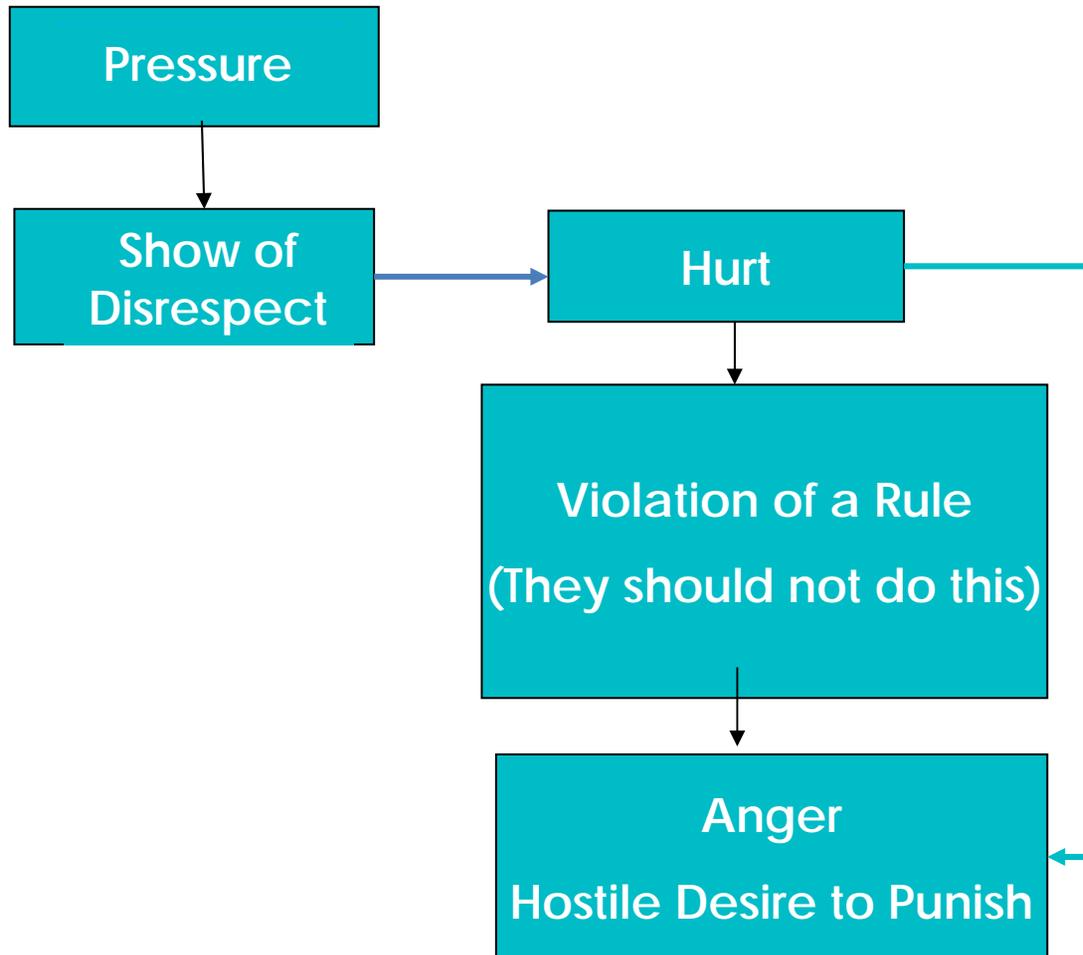
- Elicit Automatic Thought:

When your administrator was pushing you what was the first thought that came into your mind?"

Automatic Thought: "They don't care about me."
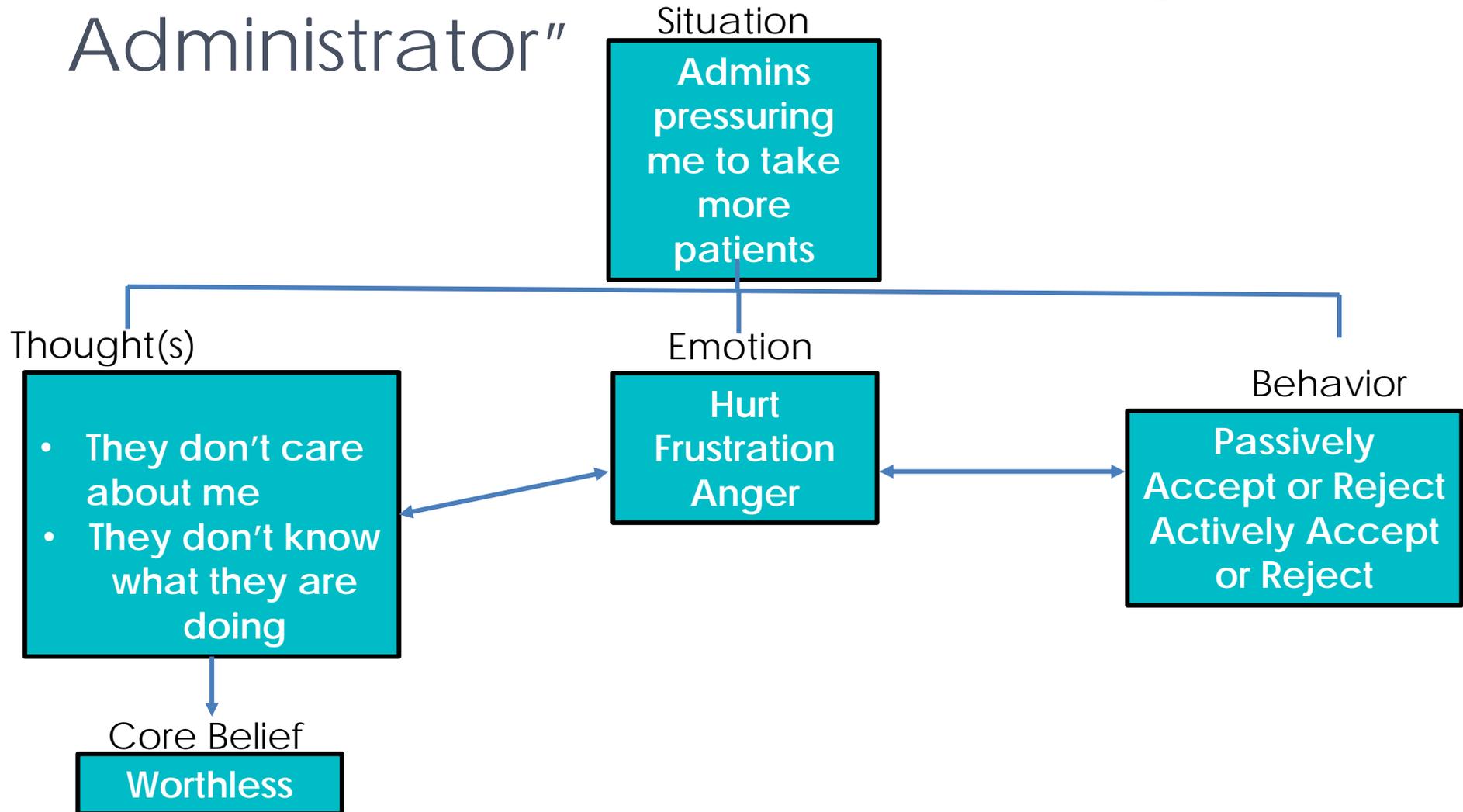
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Common Thoughts with Anger

- This **isn't fair**, I **don't deserve** this.

- **They knew** it was coming

- We **don't have enough** PPE

- There are **no ventilators**

- We are **running out** of meds

- **They lie** to us

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Cognitive Model of Anger

Pressure

Show of Disrespect

Hurt

Violation of a Rule
(They should not do this)

Anger
Hostile Desire to Punish

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Conceptualization for "Pressing Administrator"

Situation

Admins pressuring me to take more patients

Thought(s)

- They don't care about me
- They don't know what they are doing

Emotion

Hurt Frustration Anger

Behavior

Passively Accept or Reject Actively Accept or Reject

Core Belief

Worthless

Explore Thought "They Don't Care"

- "How much do you believe that "They don't care?" (0-100)—85%

- How angry do you feel at this moment (0-100)—90%

- "I am not defending the actions of the administrator but I am wondering if there is any other possible explanation for why they behave as they do other than 'They don't care about me'."

Exploring Administrators Reasons

Possible explanations:

- "Administrators are being pressured by their bosses or government officials to do more with less"

- "Administrators are afraid of becoming infected and spreading it too."

- "Administrators didn't have any training or preparation for this either."

- "Concern for public health"

- "Concern that the hospital will be overrun with sick patients"

Guided Discovery for "They Don't Care"

- Are those explanations plausible?

- "If you consider all the possible explanations for the administrators' behavior, how much do you now believe that their actions are explained solely by the belief "They don't care about me?" (0-100)

- "If you consider all the possible explanations for the administrators' behavior, how angry do you feel right now?" (0-100)

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Alternative Automatic Thought

- A change in the 0-100 rating represents a change in belief

  From:

  85%

  To:

  35%

- A change in the belief is accompanied with a change in the level of anger

  From:

  90%

  To:

  40%

Core Beliefs

Core Beliefs

- Identified during conceptualizations:

  --**Not Competent**

  --**Helpless**

  --**Worthless**

- Generally, we will **not explore Core Beliefs** in a one-session model

- If we hear a Core Belief and recognize that **it is interfering with the caller's ability to participate in the activities**, and we may consider that a **reason to recommend therapy**

Guided Discovery for Incompetence

- Incompetence Definition:

"...lacking the qualities needed for effective action."   Merriam-Webster

- "Do you personally lack the qualities needed or is the situation and lack of resources unprecedented and overwhelming for you and others?"

- "If you are uncertain about what to do in this extreme situation in which you have had no training or experience, does that mean you are incompetent?"

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Harsh Environment

Rational Thoughts about a Harsh Environment

- **Not a Cognitive Distortion**

- Re-establish Caller's reason for being in the profession (Values & Aspirations). **Want to stay?**

- How to **Accept Environment** (Coping strategies)

- How to **Change Self** (Skill building)

How to Accept Harsh Environment

Coping Strategies:

- Relaxation
- Mindfulness
- Meditations
- Emotion regulation (Eating, sleep, exercise)
- Distress tolerance
- Radical acceptance

How to Change Harsh Environment

- Cost-Benefit analysis

- Problem solving

- Activity schedule

- Interpersonal effectiveness

  -Standing up for rights

  -Respecting other peoples' rights

  -Appropriate use of tone of voice, gestures, posture, eye contact

Cognitive Shifts

In regards to any of the strategies mentioned:

- Set up **Behavioral Experiments to test** whether or not coping strategies and skills development are helpful.

- **Behavioral Experiments provide corrective information for cognitive distortions.**

"What does it mean about you that you are able to make these changes?"

The answer to this question represents a change in a person's **beliefs about themselves, their self-efficacy and their ability to manage life.**

Summary

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- Identify **when and how to use** Socratic Questioning

- ---Callers leading-off with an **apology**

    ---Callers have **fear of infection**

    ---Callers react to **pressuring administrators**

- Provide **conceptualizations** of callers' issues:

- Illustrate **different methods** of Socratic Questioning

- Situations for which Socratic Questions **are not used**

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Resources

https://beckinstitute.org/using-cbt-to-respond-to-covid-19/

https://www.inquirer.com/health/coronavirus/coronavirus-covid19-mental-health-doctors-20200327.html

THE ETHICIST:

https://www.nytimes.com/2020/03/30/magazine/coronavirus-medical-ethics.html?campaign_id=52&emc=edit_ma_20200403&instance_id=17294&nl=the-new-york-times-magazine&regi_id=71289774&segment_id=23739&te=1&user_id=2049670c30aa042ad5a6b2ff8a46379d