

BABCP Spring Conference and Workshops

Making CBT Work in Challenging Times

11 & 12 April 2019
King's College London (Waterloo Campus),
Stamford St, SE1 9NH

BABCP Spring Conference and Workshops

Making CBT Work in Challenging Times

This year's Spring Conference and Workshops looks at the important factors that can impact on the effectiveness of CBT and the therapeutic innovations that can help to address these. Increasingly therapists are beginning to include factors outside of the individual in their formulations and this programme brings together some of the leading researchers and therapists in mental health to look at the degree to which we can still provide high-quality and effective treatments.

11 April 2019

One Day Workshops

9.30am – 5.00pm

Our four workshops will look at challenges faced across the lifespan and provide therapists with practical tools and up-to-date knowledge about how to understand the impact of these factors on service users and how to work towards meaningful change.

Registration fees

	BABCP Members	Non-Members	Student Members
Workshop	£125	£160	£80
Conference	£90	£120	£70

For more information and to register please visit www.babcp.com

WORKSHOP ONE

Real World Trauma Therapy in a Changing Environment

Alastair Bailey, Clinical Lead, Consultant Clinical Psychologist and
Sarah Heke, Lead for Trauma, Consultant Clinical Psychologist Grenfell Health and Wellbeing Service

The Grenfell Health and Wellbeing Service (GHWS) was established in the immediate aftermath of the Grenfell Tower fire on 14 June 2017. The need for a unique response to this major incident affecting a whole community in North Kensington, London was readily identified. Shortly before, screen and treat programmes following the models from London bombings and other attacks were being implemented following the Manchester Arena and other terrorist attacks in London. The populations affected however were dispersed and spread across the UK and Europe. The GHWS now comprises the largest trauma and major disaster response psychological therapies service for adults and children. It is innovative in adapting flexible models of working and understanding different psychological responses to major trauma working collaboratively and responsively to the communities' needs. This has included a co-ordinated programme with the Metropolitan Police to escort survivors and bereaved family members through visits to Grenfell Tower and an evolving community engagement programme.

There is an extensive research literature base on Trauma-Focused CBT (TF-CBT) and PTSD, but there is considerably less evidence on the delivery of either TF-CBT, or other CBT, interventions post large-scale disasters and incidents. Most studies focus on the prevalence of PTSD post incidents, not on the resulting clinical presentations and how to provide trauma-focused therapy in the context of a community that is still responding to the political, social and economic impacts of a major incident.

The workshop will focus specifically on:

How we have approached the psychological needs of the local community and other professional groups following their exposure to the Grenfell fire. This includes how we moved from an IAPT-based service model into a specialist response team that is ever changing.

Cognitive interventions for working with trauma in response to a disaster affecting a whole community, including:

Prior beliefs – how has exposure to Grenfell altered beliefs about yourself, the world, others and symptoms – is this any different? How have we worked therapeutically with these beliefs?

Intrusive imagery and the formation of imagined experiences – how do these present and what are the implications of working in therapy with these images?

Emotional responses – including anger, guilt and shame, which are often complicated with grief – how do we conceptualise these and what are the implications for therapy?

Avoidance behaviours – how do these differ to behaviours typically observed following single incident traumatic events? For instance, avoidance of dealing with the emotional and psychological impact and trauma-related symptoms through strategies such as over-working or all-consuming political and social activism.

What have we done differently?

GHWS is a service that has been extremely responsive to Community requests, which have taken therapists out of the boundaries of the therapy room. A distinct example includes organising a collaborative programme with the police and ambulance services to facilitate visits to Grenfell Tower by bereaved family members. We will discuss how this was organised, the experiences and where this fits with cognitive therapy.

This is a unique service level response to a major incident, however we will consider how our learning has implications on the provision of CBT in other contexts.

Key learning objectives:

1. To understand what is different about psychological trauma responses to major incident
2. To learn how you can work flexibly with a traumatised community whilst staying within the realms of evidence-based therapy
3. To have an understanding of how psychologists and therapists might influence and respond to the planning and development of services in response to future major incidents

WORKSHOP TWO

Brief Behavioural Activation for Adolescent Depression (Brief BA)

Shirley Reynolds Charlie Waller Institute, University of Reading

Behavioural Activation (BA) appears to be a very effective treatment for depression in adults and may be a promising treatment for young people. Brief BA (BATD-R; Lejuez, et al, 2011) has been adapted for use with adolescents (Brief BA; Pass & Reynolds, 2014) and is designed to be delivered by a range of professionals who do not require specialist qualifications or extensive training. Brief BA has been piloted with promising outcomes in adolescent mental health services, and we are currently evaluating Brief BA delivered in secondary schools with positive findings to date.

Key elements of the Brief BA for adolescents include:

- A focus on engaging young people in BA
- Scaffolding therapy based on developmental/cognitive constraints
- The involvement of parents/carers
- A focus on identifying young people's values
- Including problem solving and contracting, with parental involvement
- Session by session workbooks for young people and their parents

Brief BA involves six to eight weekly sessions of up to one hour, and a 30-minute review session one month later. Brief BA is simple to explain, easy to understand and reasonably straightforward to incorporate into an adolescent's life. Pilot data shows that engagement in treatment has been very good, that Brief BA is acceptable to young people, parents and school staff, and leads to reductions in depression symptoms and improved functioning in most young people

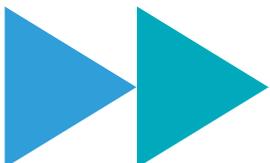
This workshop would be suitable for clinicians who have experience of working with depressed young people in mental health settings. It would also be suitable for clinical staff with experience of Behavioural Activation who would like to adapt it for use with young people.

This workshop will demonstrate the use of Brief BA with adolescents who are experiencing clinically significant depressive symptoms. It will focus particularly on how to engage young people in treatment, how to identify their values and link values to activities, and how to work with parents and young people as well as relevant others including school staff. Case examples will be used to highlight specific challenges and techniques.

Professor Shirley Reynolds is a clinical psychologist and Director of the Charlie Waller Institute and Co-director of the Anxiety and Depression in Young people (AnDY) research unit at the University of Reading, UK. Her current clinical research is focused on adapting and improving psychological treatment for depression in young people.

References:

- Lejuez, C. W., Hopko, D. R., Acierno, R., Daughters, S. B., & Pagoto, S. L. (2011). Ten Year Revision of the Brief Behavioral Activation Treatment for Depression (BATD): Revised Treatment Manual (BATD-R). *Behavior Modification*, 35, 111-161. doi: 10.1177/0145445510390929.
- Pass, L., Lejuez, C. W., & Reynolds, S. (2018). Brief behavioural activation (Brief BA) for adolescent depression: A pilot study. *Behavioural and Cognitive Psychotherapy*, 46(2), 182-194.
- Pass, L., Sancho, M., Brett, S., Jones, M., & Reynolds, S. (2018). Brief Behavioural Activation (Brief BA) in secondary schools: a feasibility study examining acceptability and practical considerations. *Educational and Child Psychology*, 35(2).



WORKSHOP THREE

The Role of Language and Culture in Treating Distress / symptoms in People with Long Term Conditions

Trudie Chalder, King's College London, South London and Maudsley NHS Trust

Around 15 million people in the UK have a LTC for which there is no cure ie. diabetes, COPD, arthritis and hypertension. Impairment (degree of pathology) is not correlated with disability and multi-morbidity is common especially among deprived populations and those with a mental health problem. Anxiety and depression are common and can be associated with difficulties adjusting to a LTC and/or may be linked to pre-existing difficulties. Unhelpful cognitive, emotional and behavioural responses which are to some extent culturally determined may be perpetuating distress. Culturally adapted psychotherapies are favoured by patients and carers.

This workshop focuses on how illness, behaviour and language, which defines us, can be targeted in therapy to enable people to lead more fulfilled lives. The workshop will potentially help people to think about how their own language will facilitate therapeutic change in people from a variety of cultures as well as a range of illnesses.

Key learning objectives:

1. To heighten awareness of the role culture plays in the experience of illness
2. To explore the extent to which we can control disability, pain, illness, disfigurement
3. To explore ways of developing acceptance of what cannot be changed whilst focusing on what can

Trudie Chalder is Professor of Cognitive Behavioural Psychotherapy at King's College London. She has worked as a clinician and a researcher in the area of long-term conditions and medically unexplained symptoms for about 30 years. She develops specific cognitive behavioural models for understanding and treating symptoms and distress in these conditions and evaluates the approaches within the context of randomised controlled trials in primary and secondary care. The primary focus is always on improving people's quality of life. Her research involves investigating not only whether treatment works in the context of gold standard randomised controlled trials but how and for whom it works. Her work spans adolescents and adults. Trudie has published over 250 articles. She was BABCP President from 2012 to 2014 and is a member of the IAPT advisory group for LTC and MUS.

References:

- Bhui, K. S. et al (2015). Interventions to improve therapeutic communications between black and minority ethnic patients and professionals in psychiatric services: systematic review. *The British Journal of Psychiatry*. 207, 95-103. Doi: 10.1192/bjp.bp.114.158899.
- Ingman, T., Ali, S., Bhui, K., Chalder, T. (2016). Chronic fatigue syndrome: comparing outcomes in White British and Black and Minority Ethnic patients after cognitive-behavioural therapy. *The British Journal of Psychiatry*. 209(3):251-6. doi.org/10.1192/bjp.bp.115.169300
- Matcham, F.A.E., Ali, S., Irving, K., Hotopf, M. H., Chalder, T. (2016). Are depression and anxiety associated with disease activity in rheumatoid arthritis? A prospective study. *BMC Musculoskeletal Disorders*. 2016;17(1):155. doi.org/10.1186/s12891-016-1011-1.
- Armes, J., Chalder, T., Addington-Hall, J., Richardson, A., Hotopf, M. (2007). A randomized controlled trial to evaluate the effectiveness of a brief, behaviorally oriented intervention for cancer-related fatigue. *Cancer*. 110(6):1385-95. doi.org/10.1002/cncr.22923



WORKSHOP FOUR

Treating Multiply Traumatized Populations. An Introduction to Narrative Exposure Therapy (NET) and Recently Developed Variations (KIDNET, FORNET and NETfacts)

Katy Robjant, Freedom from Torture, University of Konstanz, Germany

Individuals who experience multiple trauma are more likely to develop PTSD as a result of the 'building block effect' whereby PTSD risk increases cumulatively with trauma load. Narrative Exposure Therapy (NET) is an evidence based short term treatment for PTSD in multiply traumatized populations, that can be delivered in unstable settings, and which also acknowledges the context in which the Human Rights abuses occurred. Among perpetrators of violence, aggression and trauma are linked, and therefore should be treated together. Communities are also fragmented by trauma, and traumatized individuals returning to rejecting communities face further distress and mental health impairment.

This workshop will look at the theory that underpins Narrative Exposure Therapy, provide an overview to the therapy process and practice key skills, outline and practice the techniques which counter dissociation during exposure in NET, and describe and share data on the recently developed variations including those in KIDNET (for children) FORNET (for perpetrators of violence) and NETfacts (community intervention).

Individuals who have experienced multiple trauma within the context of human rights abuses require an approach that not only reduces PTSD symptoms but also bears witness to the social and political context. NET and the newly developed variations are short term treatments which can address trauma, aggression and perpetration of violence, social stigma and rejection in children, adults and communities.

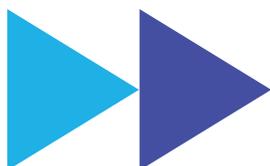
Key learning objectives:

1. To get an overview of the underlying theory behind Narrative Exposure Therapy
2. To understand the process of therapy delivery of NET
3. To get an overview of the newly developed variations in NET.
4. To understand the importance of treatment of aggression and trauma in parallel in post conflict communities.

Dr Katy Robjant is a consultant clinical psychologist specialising in the treatment of PTSD and other trauma related disorders in asylum seekers, refugees and victims of modern slavery including trafficking. She is the newly appointed Director of National Clinical Services at Freedom from Torture. Previously, she directed the implementation of a regional trauma service in Eastern DRC for the treatment of PTSD in victims of Sexual and Gender Based Violence and former combatants including former child soldiers. Prior to this she has worked within specialist PTSD services in the UK National Health Service, the charity sector, and also in conflict and post conflict settings in DRC, Sri Lanka, Uganda, Ukraine and Rwanda. She is Vice President on the board of Vivo International, through which she conducts international trainings in Narrative Exposure Therapy.

References:

- Elbert, T., Schauer, M., & Moran, J. K. (2018). Two pedals drive the bi-cycle of violence: reactive and appetitive aggression. *Current Opinion in Psychology*, 19, 135-138.
- Schauer, M., & Elbert, T. (2015). Dissociation following traumatic stress. *Journal of Psychology*, 218, 109-127.
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12 April 2019

One Day Conference

9.30am – 4.30pm

These four workshops will look at challenges faced across the lifespan and provide therapists with practical tools and up to date knowledge about how to understand the impact of these factors on service users and how to work towards meaningful change.

- 9.30 Introduction to the day
Andrew Beck, University of Manchester and BABCP Scientific Committee
- 9.35 Keynote 1: Loneliness and mental health - is there a missed opportunity to intervene?
Sonia Johnson, University College London
- 10.35 Presentation: Treating symptoms and distress in people with long term conditions
Trudie Chalder, King's College London
- 11.05 **Break**
- 11.30 Keynote 2: Does CBT work for expectant and new parents?
An overview of perinatal mental health policy, research and practice
Camilla Rosan, Programme Lead for Perinatal Mental Health, NHS England
- 12.30 **Lunch**
- 1.30 Keynote 3: After Grenfell: working with trauma when justice has yet to be done
Sarah Heke, Central and North West London Foundation Trust
- 2.30 Presentation: A Silent Killer: The link between financial difficulty and suicide
**Merlyn Holkar and Nicola Bond,
The Money and Mental Health Policy Institute, London**
- 3.00 **Break**
- 3.30 Keynote 4: Mental health, discrimination and marginalisation
Richard Bentall, University of Sheffield
- 4.30 Closing remarks
Andrew Beck, University of Manchester and BABCP Scientific Committee



For more information and to register
please visit www.babcp.com

The Lead Organisation for CBT in the UK and Ireland

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