Skills for Psychological Recovery: A Brief Intervention for Acute Reactions to Traumatic and Stressful Events

WA State Psychiatric Association, June 4, 2022
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Trauma Recovery Innovations
UW Dept of Psychiatry and Behavioral Sciences
Acknowledgments

Intervention Strategies Adapted from:
- SPR Field Operations Guide, National Center for PTSD
- National Child Traumatic Stress Network

Thanks to:
Department of Psychiatry and Behavioral Sciences
Drs. Kristen Lindgren, Emily Dworkin, Lori Zoellner (University of Washington)
Dr. Debra Kaysen (Stanford University)
Trauma
Exposure and
Reactions
Trauma exposure is common in the US.

In a national sample of U.S. adults (N = 2,953) 89.7% endorsed DSM-5 trauma exposure. Multiple event types was the norm.

Kilpatrick et al., 2013
Traumatic events and stressors are experienced on a continuum. Acute and chronic, destabilizing, distressing events commonly occur.
Examples of Stressors and Traumatic Events

- Loss of employment/housing
- Death or illness of a loved one
- Listening to stories of distress and destabilization from others
- Life threatening injury/illness
- Rape or sexual assault
- Suicide or other traumatic loss of a loved one
Distressing reactions following trauma and stressors is normal

- Unwanted memories
- Negative changes in thoughts & mood
- Increases in arousal & anxiety
- Avoidance
Exposure to traumatic events puts one at risk for negative outcomes.
Most people are resilient (Bonanno, 2004; Galatzer-Levy et al.; 2018)

Prospective and Longitudinal Studies ($k = 54$, $N = 76,435$)
- 65.7% resilient
- 20.8% recovery
- 10.6% chronic
- 8.9% delayed onset
Individual factors predict resilience after an event (Feder et al., 2019; Kalisch et al., 2019)

- COMT genotype
- 5-HTTLPR genotype
- Immune-related gene
- Cytokines
- Cortisol
- Glucocorticoid receptors
- Self-efficacy
- Male
- Perceived health
- Attend threat
- Reappraisal
Individual factors also predict vulnerability (e.g., PTSD) (Brewin et al., 2000; Ozer et al., 2003; Trickey et al., 2014)

- Prior Mental Health Concerns
- Past Trauma Exposure
- Severity of Trauma
- Higher Life Stress
- Lack of Social Support
Promoting Recovery
ACUTE INTERVENTION GOAL: Promote resilience and decrease vulnerability to long-term effects.

Remember that resilience is the most common outcome of traumas and stressors.
Common elements in treatments for trauma-related mental health symptoms.

- Time limited
- Present focused
- Structured and skills oriented
- Practice outside session
- Delivered by a trained person
Transdiagnostic principles promote recovery.

- Decreasing unhelpful avoidance
- Shifting negative beliefs and meaning
- Increasing positive rewards
- Regulating negative emotions
Different behavioral approaches are indicated depending on **timing & severity** of trauma or stressor exposure.
SPR can be useful in a variety of settings.

Can be useful for diverse patients:

- **Outpatients**: Medication management, existing patients who need extra structured support, former patients needing boosters
- **Consult patients**: non-specialty clinics, acute care settings
- **Inpatients**: Groups and or individual sessions
SPR is appropriate for many, but not all.

- People in **chronic phase** of crisis
- Not a **danger** to self/others
- Not acutely **psychotic** or severely **cognitively disabled**
SPR is seen as **useful and helpful by providers following disasters** (Forbes et al., 2010)

<table>
<thead>
<tr>
<th>Skill</th>
<th>Confidence</th>
<th>Usefulness</th>
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</thead>
<tbody>
<tr>
<td>Assessment</td>
<td>4.5</td>
<td>4.0</td>
</tr>
<tr>
<td>Building problem solving skills</td>
<td>4.5</td>
<td>4.0</td>
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<tr>
<td>Promoting positive activities</td>
<td>4.5</td>
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<tr>
<td>Managing reactions</td>
<td>4.5</td>
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<tr>
<td>Promoting helpful thinking</td>
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<tr>
<td>Building healthy social connections</td>
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SPR reduces distress in patients exposed to recent stressors (Sheerin et al., 2021)

- Small sample of adults during COVID-19 ($n = 26$)
  - $21/26$ completed intended # of sessions ($M = 4.15$)
  - Effect sizes for pre-post change were large ($d = 1.17$ PHQ-9; $d = 1.30$ GAD-7)
  - Less effective in youth; higher dropout and smaller effects

Note: Range for PHQ-9 is 0-27; Range for GAD-7 is 0-21
SPR: Components and Structure
SPR begins with assessment.

- Needs and concerns
- Top priorities
- Action plan
SPR includes 5 individually-tailored skill modules.

Skill 1: Building Problem-Solving Skills
Skill 2: Promoting Positive Activities
Skill 3: Managing Reactions
Skill 4: Promoting Helpful Thinking
Skill 5: Rebuilding Healthy Social Connections
The course of SPR is both flexible and structured.

Complete 1-5 sessions as needed.

Sessions last 45-50 minutes.

Practice is assigned and reviewed at each session.
STEP 1: Identify needs and concerns.

*Rationale*: After a crisis there are numerous demands and concerns. Gathering information is needed to target support.

Does the person need a referral to a higher level or different type of care?

What are the person’s main needs, concerns, and priorities?
STEP 2: Prioritize concerns.

Which one of these areas is most bothersome?

Is there one that needs to be dealt with sooner?

Is there one problem that seems to be getting worse?

Which problem would have most impact if it was solved?
STEP 3: Collaboratively make an action plan.

- **Choose** the most appropriate SPR skill(s)
- **Agree on a tentative number of meetings**
- **Make referrals** if needed
<table>
<thead>
<tr>
<th>Presenting Concern</th>
<th>Primary Skill</th>
<th>Secondary Skill</th>
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</thead>
<tbody>
<tr>
<td>A difficult but solvable problem</td>
<td>Problem Solving</td>
<td>Social Connections, Helpful Thinking</td>
</tr>
<tr>
<td>Intense or repeatedly upsetting reactions</td>
<td>Managing Reactions</td>
<td>Social Connections, Helpful Thinking</td>
</tr>
<tr>
<td>Not knowing how to connect with friends or family</td>
<td>Social Connections</td>
<td>Healthy Activities, Helpful Thinking</td>
</tr>
<tr>
<td>Not having enough people that care about them</td>
<td>Social Connections</td>
<td>Healthy Activities, Helpful Thinking</td>
</tr>
<tr>
<td>Feeling depressed, sad, or withdrawn</td>
<td>Healthy Activities</td>
<td>Problem Solving, Social Connections</td>
</tr>
<tr>
<td>Upsetting thoughts that make them feel bad or stop them from having more positive thoughts</td>
<td>Helpful Thinking</td>
<td>Managing Reactions, Healthy Activities</td>
</tr>
<tr>
<td>A serious physical, mental health, or substance abuse problem</td>
<td>Problem Solving (with referral)</td>
<td>Social Connections, Helpful Thinking</td>
</tr>
<tr>
<td>Significant current hardships or adversities</td>
<td>Problem Solving (with referral)</td>
<td>Social Connections, Helpful Thinking</td>
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CORE SKILL 1:
Building Problem-Solving Skills
Rationale: Structured problem-solving helps when overwhelmed

Reduce negative impacts of environment
![](https://via.placeholder.com/50)

Teach patients to be more self-sufficient

Builds mastery, sense of control, and competence
STEP 1: Define the problem & decide ownership.

Describe the problem **concretely** and **in detail**.

**Break it down** into manageable chunks and pick one.
STEP 1: Define the problem & decide ownership.

Is this...

A problem that the person is having?

A problem that someone else is having?

Person can work to solve it

Someone else needs to work to solve it
STEP 2: Set the goal.

Clarify needs and concerns

“I want __________________________”

“I need __________________________”

“I feel concerned that __________________________”

“I am afraid that __________________________”
STEP 3 and 4: Brainstorm & evaluate options.

Write down all possible options
Do not restrict to just good or feasible options

Evaluate pros and cons of each option

Choose the best solution and try it out
CORE SKILL 2: Promoting Positive Activities
Rationale: Positive activities improve mood & sense of control

Building positives is as important as decreasing negatives

Challenges negative beliefs

Increases rewards and positive mood
STEP 1: Identify and plan one or more activities.

Review a list of activities.

Create
- Draw a picture
- Paint a portrait
- Take a photograph
- Doodle / sketch
- Organise photographs
- Make a photograph album
- Start a scrapbook
- Finish a project
- Do some sewing / knitting

Kindness
- Help a friend / neighbor / stranger
- Make a gift for someone
- Try a random act of kindness
- Do something nice for someone
- Plan a surprise for someone
- Make a list of your good points
- Make a list of things or people you are grateful for

Plan
- Set a goal
- Create a budget
- Make a 5 year plan
- Make a ‘to do’ list
- Make a ‘bucket list’
- Make a shopping list

Write
- Write a letter with compliments
- Write a letter to your politician
- Write an angry letter
- Write a grateful letter
- Write a ‘thank you’ card
- Write a journal / diary
- Write your CV
- Start writing a book

Self care
- Take a bath
- Take a shower
- Wash your hair
- Give yourself a facial
- Trim your nails
- Sunbathe (wear sunscreen!)
- Take a nap

STEP 2: Schedule activities in a calendar.

<table>
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<tr>
<th>Sun</th>
<th>Mon</th>
<th>Tues</th>
<th>Weds</th>
<th>Thurs</th>
<th>Fri</th>
<th>Sat</th>
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</table>

Help the person consider things that increase the likelihood that they will do each activity.
STEP 3: Observe outcomes of each activity

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<th>Sun</th>
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How did it affect their mood and their beliefs?

*For that day? The next day?
CORE SKILL 3: Managing Reactions
Rationale: Feeling your feelings helps with reminders

Normalizes distressing reactions

Promotes adaptive processing and corrective learning

Builds distress tolerance and emotion regulation skills
STEP 1: Identify distressing reactions and their triggers.

Pick the **most distressing** reaction.

Discuss **triggers** for that reaction.

Explore **consequences** of that reaction.
STEP 2: Teach skills to address distressing reactions.

**Skill 1: Breathing**

- Get **comfortable**
- **Breathe in** through your nose for 5, expanding your belly
- **Hold** for 5
- **Exhale** slowly for 7 while you say a soothing word
STEP 2: Teach skills to address distressing reactions.

Skill 2: Writing Exercise

Set aside 30 minutes
Write about whatever is distressing you
Give yourself space to feel your emotions
Consider the things you did to help yourself or others
Repeat, building in new helpful thoughts
STEP 3: Create a plan to manage a distressing reaction.

Brainstorm **good, culturally-aware self-care** to reduce your reactivity to triggers.

- Meet basic needs (eating, sleeping, health)
- Regularly do positive activities
- Talk to social supporters about feelings
STEP 3: Create a plan to manage a distressing reaction.

Create a **plan** to deal with triggers as they come up.

- Differentiate between the current trigger & the past event
- Can also use **helpful thinking** core skill
- Write about how you feel
STEP 3: Create a plan to manage a distressing reaction.

- Emphasize the need for **time to recover** after the trigger.
- Use the breathing skill or practice relaxation.
- Do a positive activity.
- Talk to social supporters about how you feel.
NOTE: For most, both approaches are needed to manage reactions

Consider:
- Short term vs long term benefit
- Situation and context in which reaction is occurring
- Intensity and consequences of reaction
CORE SKILL 4:
Promoting Helpful Thinking
Rationale: Changing thoughts changes mood and reactions

- Increases adaptive meaning around stressors
- Decrease negative emotions (e.g., guilt, shame, fear)
- Promote positive behaviors
STEP 1: Identify unhelpful thoughts.

Ask:
What thought goes along with the situation & emotions?
STEP 2: Explore more helpful thoughts.

*Ask yourself:* What would be more helpful thoughts? What would I say to a friend in this situation? What do I have control over?

Watch out for *Pollyanna thoughts*!

- I’ll be fine!
- Cheer up, you tried.
STEPS 3 & 4: Rehearse helpful thoughts and assign this as practice.

**Imagine** the trigger situation and say the helpful thought **out loud**.

Next time you’re in a trigger situation, **practice** the thought.
CORE SKILL 5:
Rebuilding Healthy Social Connections
Rationale: Improving social support is protective

- Decrease social isolation/avoidance
- Meets *practical* and *emotional* needs
- Decrease *maladaptive* coping
STEPS 1 & 2: Make & review a social connections map.

Who are your most important connections?
With whom can you share your feelings?
With whom do you want to be in touch?
Who might need your help or support?

Consider who and what is missing or needs to be changed.
STEP 3: Make a social support plan.

For different people on the map, think of what connection might look like.

Who?  What?  When?

Where?  Why?  How?
Putting It All Together
The course of SPR is both flexible and structured.

**First session:** Introductions, assessment & planning, teach & practice a skill

**Follow-up sessions:** Review homework, re-assess, teach & practice a skill

Complete *1-5 sessions* as needed, incorporating *some or all of the skills*. 
SPR uses transdiagnostic principles to promote early recovery.

- Decreasing unhelpful avoidance
- Shifting negative beliefs and meaning
- Increasing positive rewards
- Regulating negative emotions
LAST THOUGHTS & RESOURCES
Therapy for mental health disorders following trauma is effective at reducing symptoms.

- Cognitive Processing Therapy
- Prolonged Exposure Therapy
- Written Exposure Therapy
- Eye Movement Desensitization and Reprocessing
- Trauma-Focused Cognitive Behavioral Therapy

Visit https://www.apa.org/ptsd-guideline for more information!
Mental health is sustained by ongoing, intentional efforts to cope adaptively despite setbacks and challenges.

“Mental health… is not a destination but a process. It’s about how you drive, not where you’re going.”

— Noam Shpancer, Ph.D., Professor of Psychology, Otterbein University
RESOURCES

Skills for Psychological Recovery Field Guide:
https://www.nctsn.org/resources/skills-for-psychological-recovery

Skills for Psychological Recovery Free Online Training:
https://www.nctsn.org/resources/skills-psychological-recovery-spr-online

UW Department of Psychiatry COVID Resources:
https://psychiatry.uw.edu/clinical-care-consultation/covid-19-resources-for-mental-well-being/

Trauma Recovery App:
https://apps.apple.com/us/app/trauma-recovery/id1292950621
Thank you and questions

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https://psychiatry.uw.edu/research/trauma-recovery-resilience-innovations/