

# Cognitive Behavior Therapy with Mindfulness (CBTm) Classes

## Facilitator Training April 5, 2023

# Land Acknowledgement

- The University of Manitoba campuses are located on original lands of Anishinaabeg, Cree, Oji-Cree, Dakota, and Dene peoples, and on the homeland of the Métis Nation.
- We respect the Treaties that were made on these territories, we acknowledge the harms and mistakes of the past, and we dedicate ourselves to move forward in partnership with Indigenous communities in a spirit of reconciliation and collaboration.

# Objectives



Background: development of the CBTm classes



Science: research on CBTm



Implementations: examples of where and how CBTm has been used



## Acknowledgements

- A. Beck MD, J. Beck PhD
- CBTm clients and families
- CBTm Hub Team
- Funding Partners

# Funding Partners

- Manitoba Patient Access Network
- Canadian Institutes of Health Research
- Health Sciences Centre Foundation
- True Patriot Love Bell Let's Talk
- Workers Compensation Board of Manitoba
- Manitoba Medical Services Foundation
- Government of Manitoba
- Doctors Manitoba,
- Rady Faculty of Health Sciences
- Atlas Institute for Veterans and Families

# What is CBT?

- Cognitive behavioural therapy
- Evidence-based psychotherapy
- Involves efforts to change negative thinking patterns
  - Recognize unhelpful thoughts
  - Better understand how thoughts and behavior can impact your mood
  - Learn coping skills

\*Statistics Canada Report 2013; \*\* Delgadillo BJP 2017

# Why improve access to CBT?

\*Statistics Canada Report 2013; \*\* Delgadillo BJP 2017

# Why improve access to CBT?

Gold standard treatment for mood and anxiety

Shown to prevent/delay onset of mental health issues among vulnerable groups\*\*

Low intensity CBT interventions (bibliotherapy, online) with minimal therapist assistance is a cost-effective method to improve access\*\*

Unmet need for psychotherapy > unmet need for medications\*



# Why reduce waiting times for accessing therapy?

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- Delays in access reduce the likelihood of recovery!!!

# Improving Access to Psychological Therapies\* – United Kingdom

- 957,000 annually are assessed by IAPT\*
- 537,000 people annually receive 2 or more sessions of therapy
- Stepped care model
- Anxiety Disorders- CBT
- Depression – CBT, interpersonal, or couples

Longer delays in access to treatment and missed appointments are associated with lower likelihood of recovery

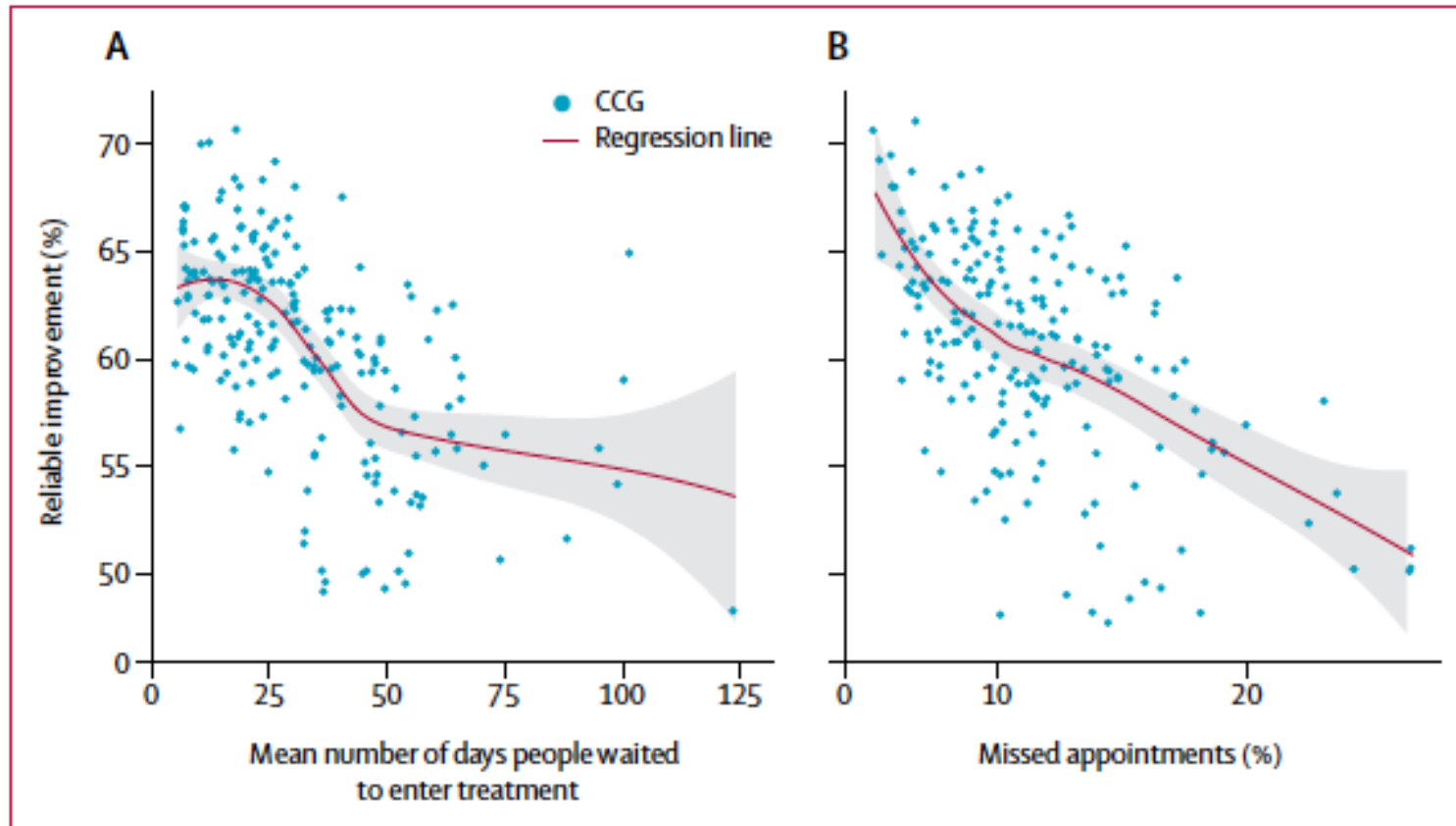
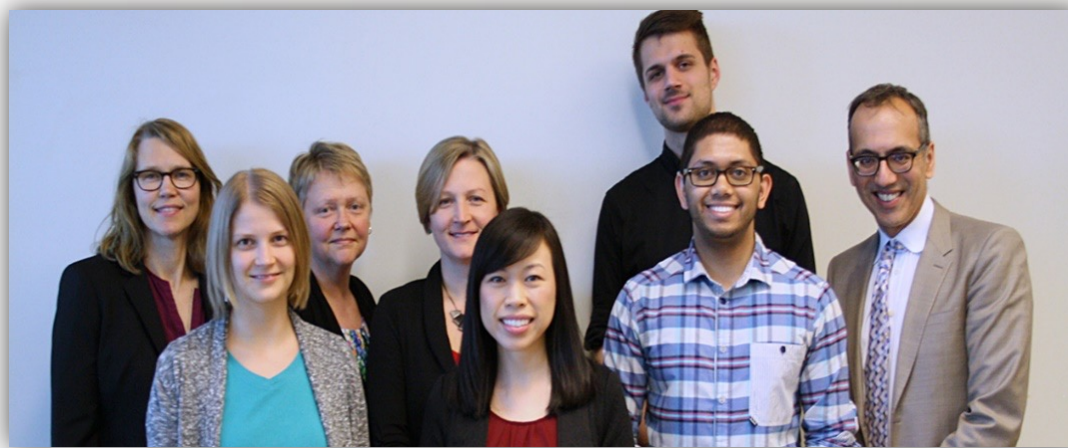


Figure: Reliable improvement of patients in relation to time waited to start treatment in a CCG (A) and missed appointments (B)

# Vision

Increase access to Cognitive Behavior Therapy (CBT) for prevention and treatment of mental health and substance use problems

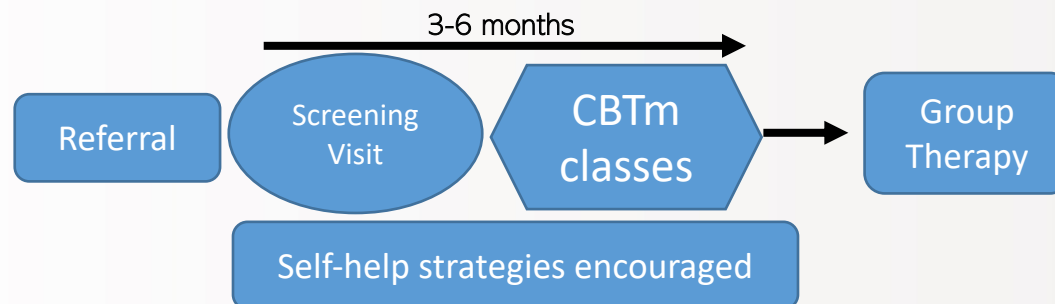


# CBT at MB Health Sciences Centre

## A. Old service delivery model – prior to 2013



## B. Revised service delivery model – stepped care began in 2014



\*\*Patients must attend education classes in order to be eligible for group therapy

# What is CBTm?

- ✿ Selected key CBT skills
- ✿ 'm' for mindfulness
  - ✿ Reduce stress, increase resiliency, improve emotion regulation, etc.
- ✿ Class-based model
  - ✿ Large vs. small group or individual format
- ✿ Fewer (5 vs 6-8) sessions, less intensive

# Timeline

Waiting time for CBT >1 year  
Developed the Class-based Model

4-session CBT classes for  
Mood and Anxiety  
Disorders

Jan. 2014

2016–2017

2013

Jan. 2015

2-session CBT classes for  
Anxiety disorders

Manitoba Patient Access  
Network Grant



# Classes are innovative in delivering therapy

Everyone has been in a class, not everyone has been/wants to be in therapy

Psychoeducation format provides a less intensive environment

After attending the classes people are more socialized to the expectations for therapy

Self-selection into more intensive therapy

Diagnosis not required (e.g., below threshold symptoms, does not impact health insurance, prevention, etc)

## During the CBTm classes, individuals learn:

- The principles of CBT for depression and anxiety
- The structure and process of CBT
- Basic mindfulness skills
- Good quality, free, self-help CBT and mindfulness resources

# Overview of topics

- CBT Model
- Relaxation strategies
- Cognitive restructuring
- Behavior therapy
- Healthy living
  - Sleep, nutrition, substance use, exercise
- Problem solving and anger management
- Responding to stress and wellness plan

# Structure and Process

90 minutes, once  
per week for 5  
weeks

Classes can vary in  
size (10-50+)

One family  
member or  
support person  
invited

Exclusion criteria  
minimal

# Key Goals of Manitoba Patient Access Network (2016-2017)

- Improve quality of class content using a quality improvement framework
- Develop a client binder
- Develop a facilitator manual
- Hold facilitator training workshops
- Develop an online website



# www.cbtm.ca

- Established June 2017
- Free online content and resources for clients
- CBTm class offerings and program access points
- Access to all materials for trained facilitators (with registration)
- Over 25,000 people have accessed the site

# A multi-service practice research network study of large group psychoeducational cognitive behavioural therapy (Improving Access to Psychotherapy).

Delgadillo et al. Behavior Research  
Therapy 2016

- 4451 participants
- “Stress Control” 6 workshops- didactic (up to 100 people)
- Increasing effect size with higher number of classes completed
- Pre-post effect size  $d = 0.70$  (GAD-7)
- Large group psychoeducational CBT is clinically effective, organizationally efficient, and consistent with a stepped care approach to service design
- <https://stresscontrol.org>

# CBTm Hub Collaborative Team – est.2020

A partnership between Shared Health Manitoba, Mental Health & Addictions, Psychiatry, Psychology, Clinical Health Psychology, and partners

- Jitender Sareen
- Shay-Lee Bolton
- Tanya Sala
- Natalie Mota
- Debbie Whitney
- Cheryl Maxsom
- Jacquelyne Wong
- Lori Ulrich
- Jolene Kinley
- Pam Holens
- Kristin Reynolds
- Corey Mackenzie
- Jane Moody
- Rick Hawe
- Navjot Brainch
- Antonio Paletta
- Ken Mackenzie
- Essence Perera
- Meredith Seager
- Megan Arpin
- Kelsey Papineau
- Oai Truong
- Allan Dubyts
- Ji Hyun Ko
- Danielle Schwartz
- Jill Hodgson-McConnell
- Brent Anderson
- Dean Smallwood
- Joanne Warkentin
- Ben Fry
- Chikura Shukla
- Erin Knight



# CBTm Hub - Vision



Enhance access



Reduce jurisdictional barriers



Increase coordination



Training/capacity building – facilitator training



Increase opportunities for evaluation and quality improvement

# Offerings in Manitoba



**Option 1:**  
**Zoom videoconference**

Resembles in-person classes, led by a facilitator, group-based



**Option 2:**  
**Web-based online course**

Self-directed, no facilitator, progress monitored by research staff and clinicians



**Option 3:**  
**In-person**

Offered at some sites, most often in groups, some providers use material one-on-one

# Online Course

- Recorded audio from facilitators
- Regular mini-quiz
- Printable and fillable worksheets with examples
- Learning journal for note taking
- Links for mindfulness exercises and mental health resources

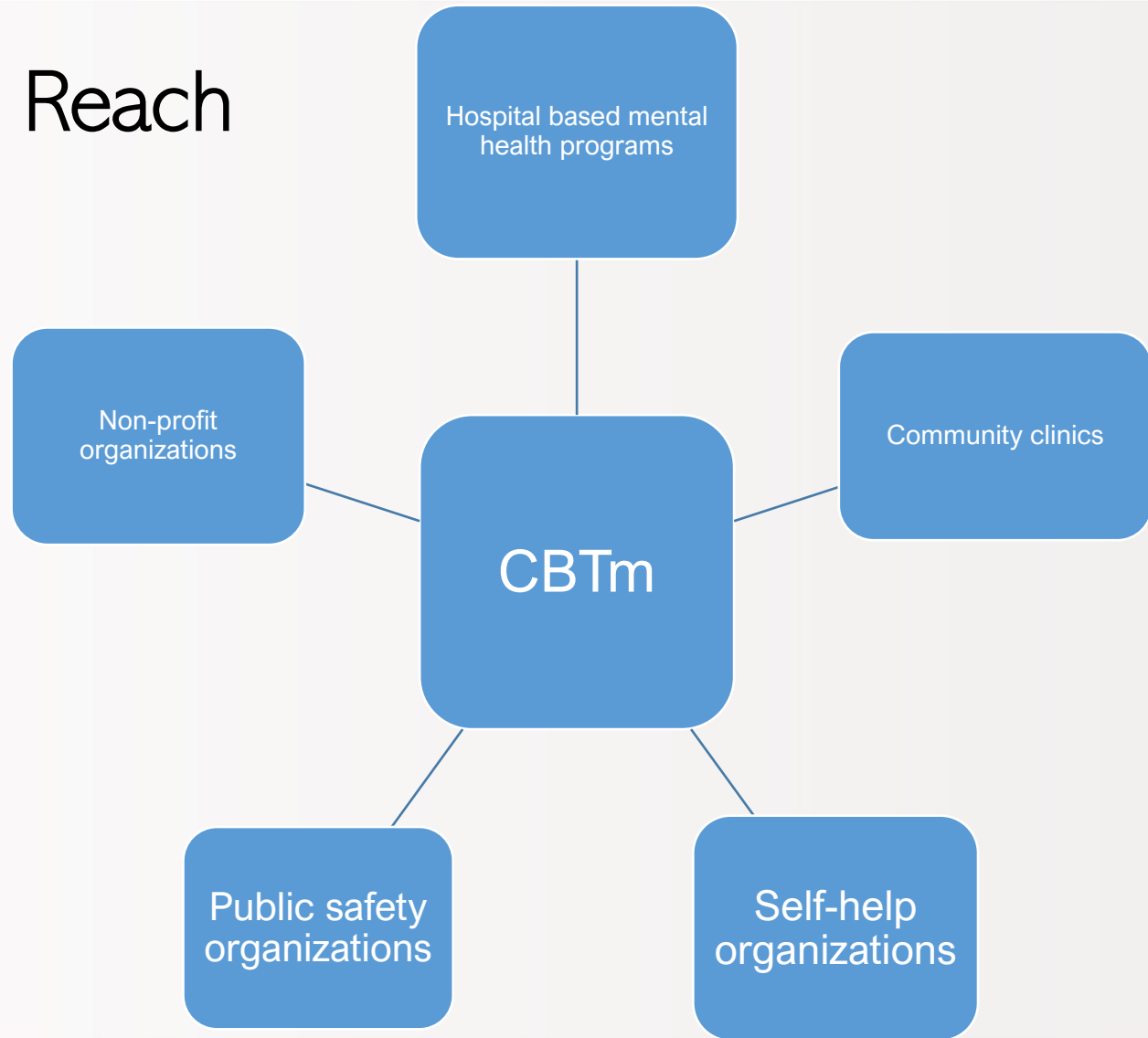
The screenshot displays the CBTm online course interface. At the top, there are links for 'SUPPORT' and 'LOGOUT'. The main title is 'CBTm COGNITIVE BEHAVIOUR THERAPY WITH MINDFULNESS'. Below this, the course overview is shown, including a 'Course Overview' section with a 'Return' button and a 'Cognitive Behaviour Therapy (CBT) is a short-term goal focused treatment that is effective for many mental health conditions...' description. A list of classes (Class 1, Class 2, Class 3) is visible, each with a 'VIEW' button. The bottom part of the screenshot shows a 'Class 1: Skills Practice' session with a 'PRACTICE' section containing two bullet points: 'If you are anxious, sad, or angry now, do a thought record on the current thoughts' and 'If not anxious, sad or angry, do a thought record on a recent situation when you felt that way'. Navigation buttons for 'PREV' and 'NEXT' are present throughout the interface.

# Training for facilitators

- ✦ Focus on training and capacity building across Canada
- ✦ First facilitator training in 2016
- ✦ First virtual training workshop held in May 2021
- ✦ Facilitator training 2x/year



# Program Reach



# Program Adaptations

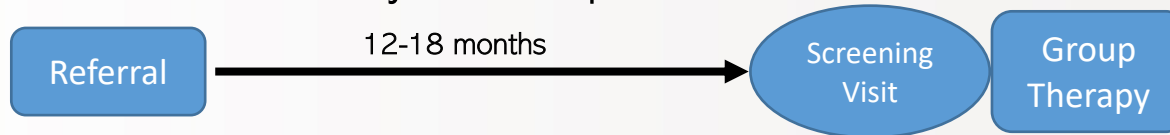
- Turning Pages (elderly)
- First Nations communities (Quest Health)
- Public safety, military and veterans
- Physicians and Medical Learners
- Cancer populations
- Perinatal women
- Adolescents

# Evaluations of CBTm

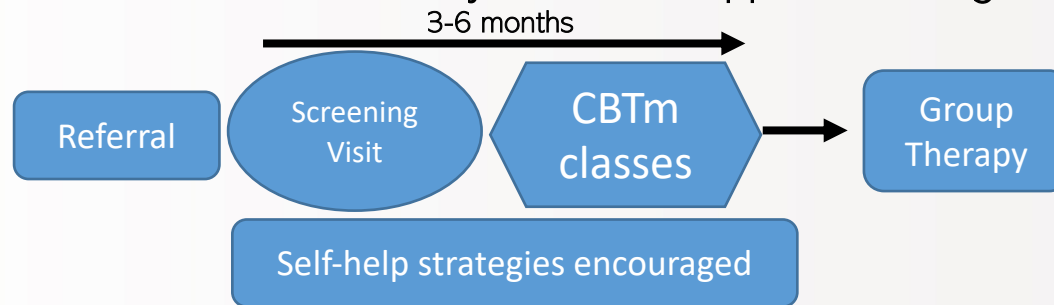
- HSC 2- Session Anxiety classes – Palay et al., 2018 (n=131)
  - Reduced waiting times 1yr → 3 mo
- HSC 4 - Session Classes – Thakur BMC Psychiatry et al., 2019 (n=523)
  - Anxiety and depressive symptoms reduced by 20% during the classes
- Veterans Affairs Operational Stress Injury Clinic - Whitney, Maxsom, Mota et al.
  - Attendance in CBTm Classes increased likelihood of completing follow-up groups
- Interlake Eastern Regional Health Authority – Davidson, Kinley et al. 2021
  - CBTm linked with lower anxiety, depression, and other psychiatric symptoms on chart review, no difference between in-person or telehealth

# CBT at MB Health Sciences Centre

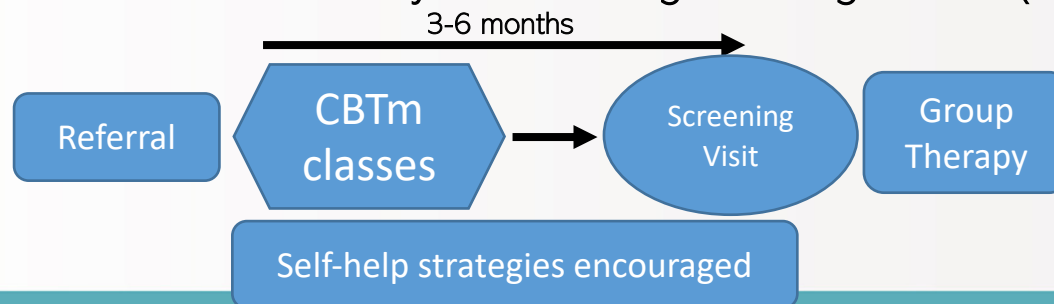
## A. Old service delivery model – prior to 2013



## B. Revised service delivery model – stepped care began in 2014



## C. New service delivery model – began during COVID (2020)







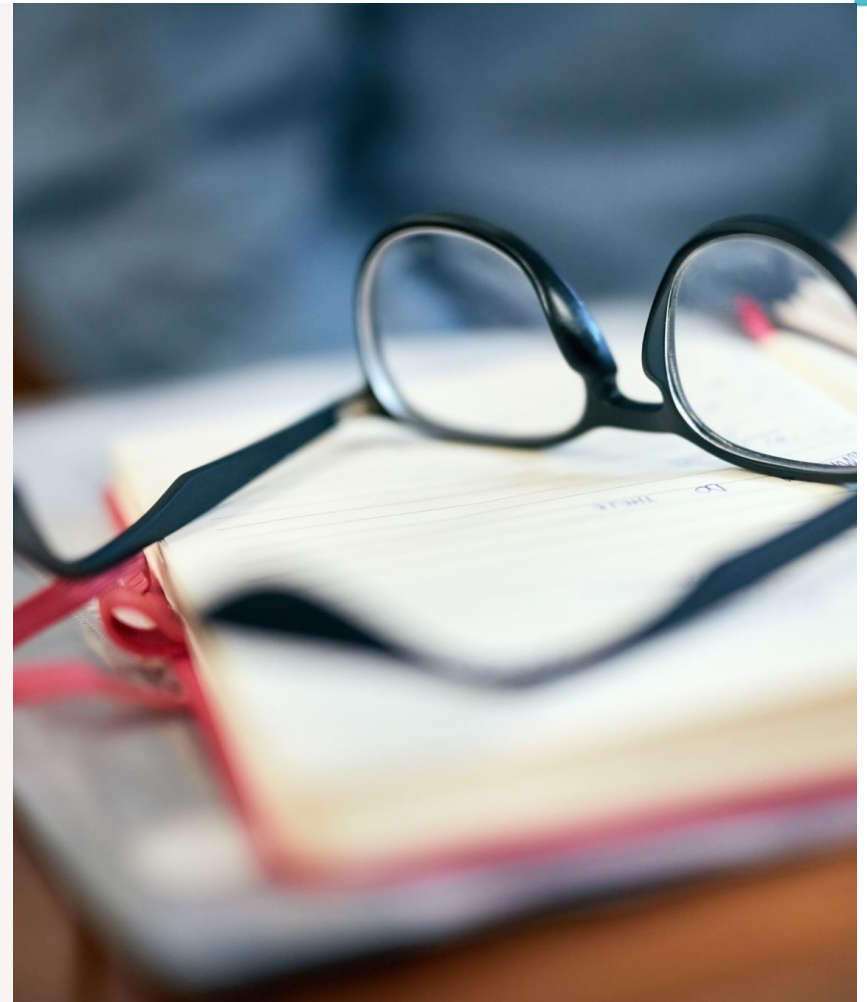
# Creating Resilient Workplaces (CReW) Study

# Creating Resilient Workplaces (CReW) Study

- Participant Advisory Committee:
  - WPS: Naomi Berger, Jodi St Amant, Brent Tully
  - WFPS: Scott Wilkinson, Russ Drohomereski, Corinne Pierce, Lisa Glowasky
  - MB Corrections: Greg Skelly, Garvin Pinette
  - SAFE Work MB: Jennifer Dyck
- Funding:
  - Canadian Institutes of Health Research Foundation grant (2015-2022)
  - Workers Compensation Board Research Workplace Innovation Fund (2017-2021)

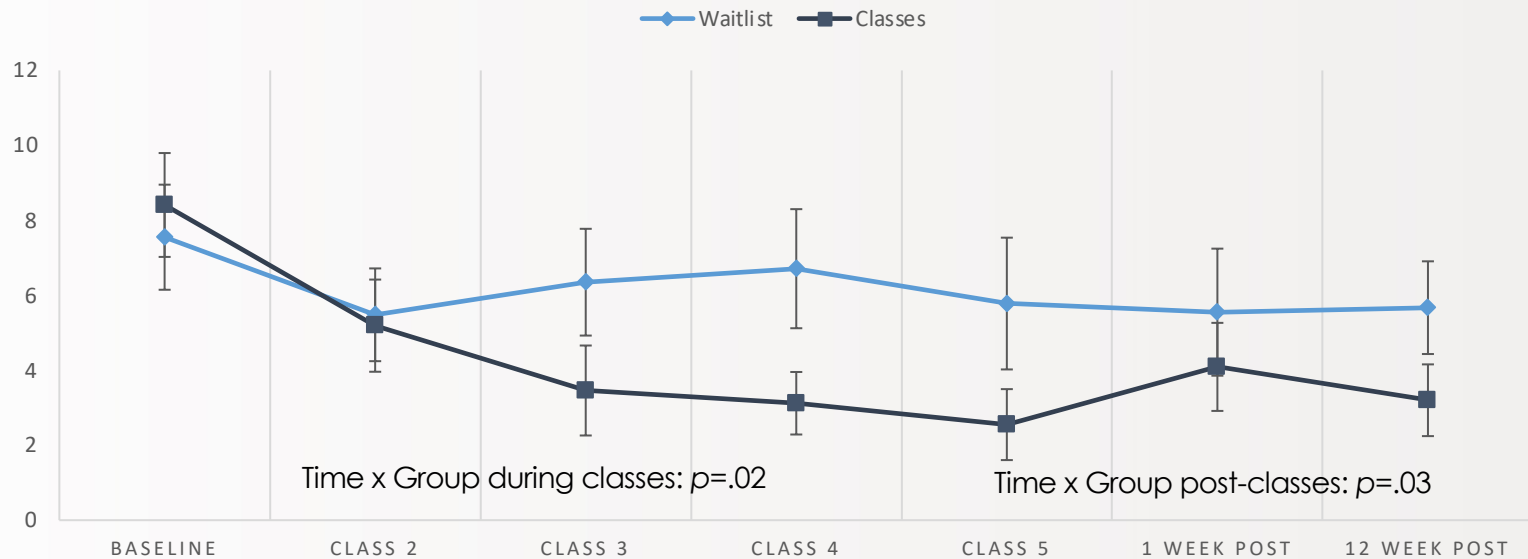
# CRew Study

- Randomized controlled prevention trial
- Public safety personnel
  - Police officer, firefighter, paramedic, emergency dispatcher, or corrections officer
- “Healthy” cohort
  - Mental health symptoms below clinical cutoffs
  - No recent history of treatment
- 60 participants:
  - 28 received CBTm classes
  - 32 were placed on waitlist
- Start date: August 10, 2019
- Questionnaires completed at baseline, prior to each class (x5), 1 week and 3 months post-classes

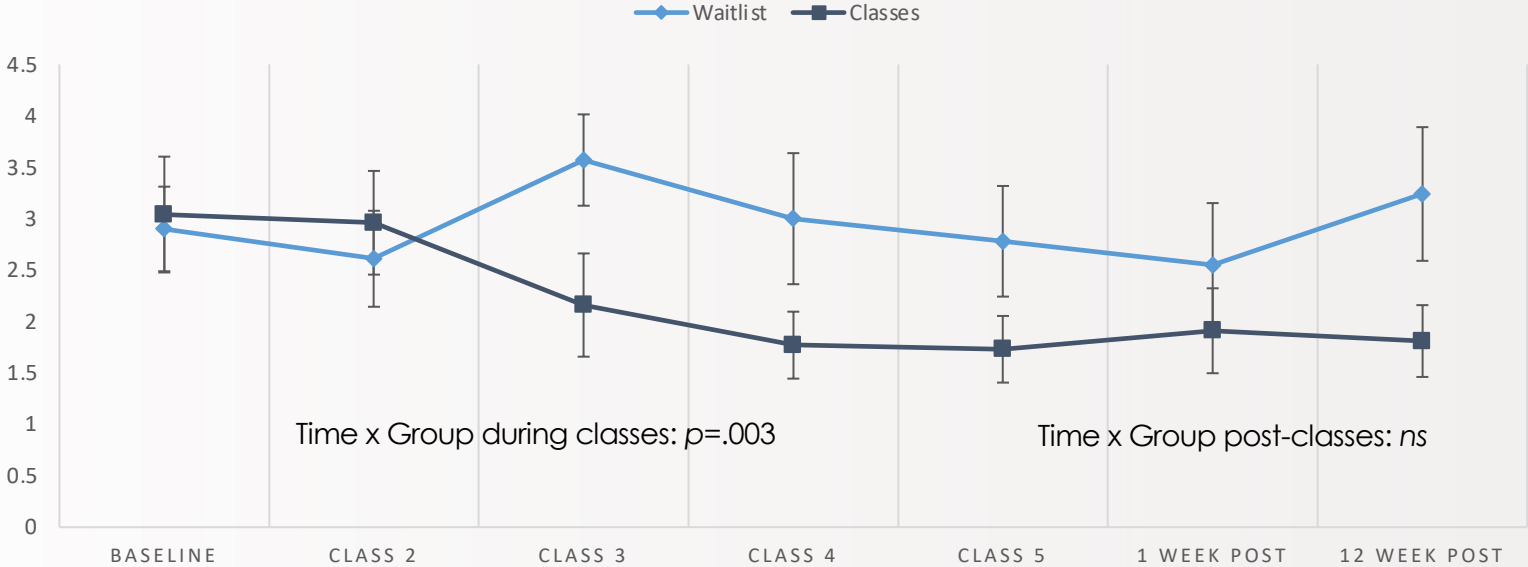




## POST-TRAUMATIC STRESS DISORDER CHECKLIST (PCL-5) MEAN SCORE



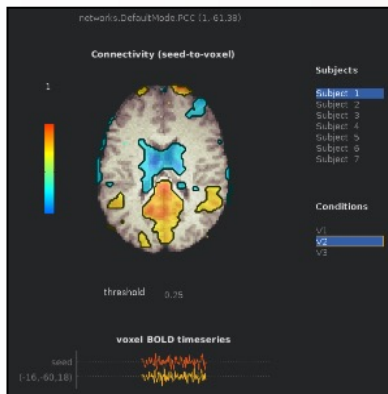
### DEPRESSIVE SYMPTOMS PATIENT HEALTH QUESTIONNAIRE-9 MEAN SCORE



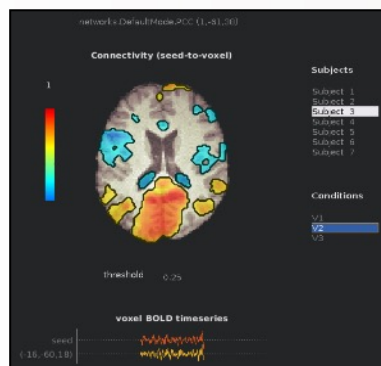
## Do cognitive behavioral therapy skills classes increase a resiliency-related brain connectivity pattern to posttraumatic stress disorder?

Ji Hyun Ko, PhD  
Natalie Mota, PhD, C.Psych

5-week waitlist (n=14)



5-week CBTm (n=11)



- fMRI study – building on what we know:
  - CBTm seemed beneficial for reducing PTSD symptoms in PSPs.
  - The VLPFC (Ventrolateral Prefrontal Cortex) is associated with cognitive control of memory (Badre & Wagner, 2007).
  - PCC (posterior cingulate cortex) has been associated with the recollection of prior experiences (Raichle, 2015).
  - CBTm increased connectivity btw VLPFC and PCC.
- Potential Interpretation
  - CBTm strengthened the cognitive control (VLPFC) over self-referential memory (PCC) and thus reducing/preventing PTSD symptoms.

# Program Implementation Example



# CBTm in Rural Manitoba

Interlake-Eastern RHA, Southern RHA, Prairie Mountain RHA

- Began as in-person service, now fully virtual
- Within Community Mental Health Programs
  - Service option at intake before/instead of a Community Mental Health Worker (CMHW) / other program
  - As a part of treatment with CMHW (e.g., as exposure, behavioural activation, more frequent service)
  - As a solidification of skills learned at the end of treatment
- Make service delivery more efficient
  - Some people decide not to go on to more intensive / individual treatment



# Tour of the CBTm Hub website

## [www.cbtm.ca](http://www.cbtm.ca)

- Manitobans can access a variety of programs
- Adult
- Aging
- Public safety, military, veterans
- Physicians and medical learners
- Ongoing research and evaluation

# Questions?



# Overview of the Day

1:15 – 1:30 Break

1:30 – 2:30 Class 1 CBT Model, cognitive therapy

Facilitated by: Cheryl Maxsom MSW, RSW

2:30 – 2:45 Break

2:45 – 3:45 Class 2 Behaviour therapy, goal setting

Facilitated by: Natalie Mota PhD

3:45 – 4:00 Break

4:00 – 5:00 Class 3 Healthy living, sleep

Facilitated by: Heather Finnegan PhD