

## **COGNITIVE BEHAVIOURAL THERAPY FOR ANXIETY** PRESENTED BY TEEGAN M.S.W., R.S.W.



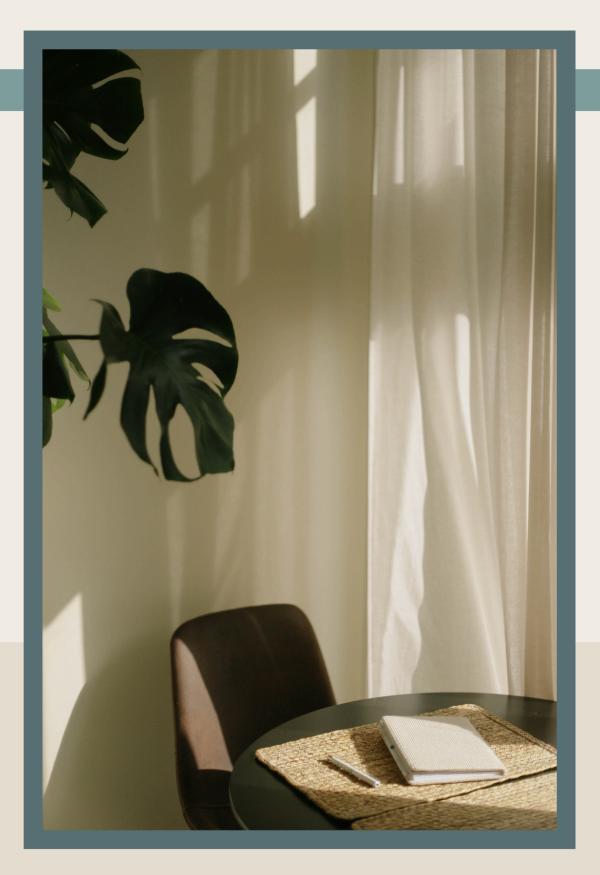
## WELCOME TO WEEK ONE! **HOUSEKEEPING RULES:**

- It is encouraged to have our camera's on
- "raise hand" option
- Please use "I" statements when sharing experiences
- comment on material
- the beginning of each session

• Interactive groups can feel supportive but there is no expectation to share • If you would like to comment on a topic or have a question, please use the

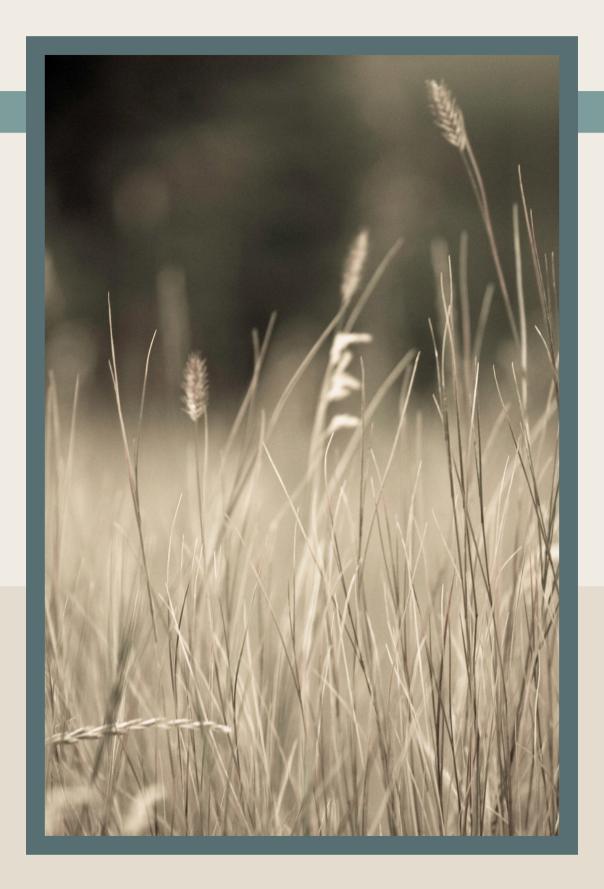
• There will be an opportunity at the end of each session to ask questions or

• There will be weekly homework and we will go over these activities that



# WHO AM I:

- Social Worker and Clinical Psychotherapist (started at EMC FHT in the fall of 2023)
- Areas of interest include:
- Trauma informed care with special interest around complex trauma, childhood trauma, systemic trauma
- Developmental Disabilities such as Attention Deficit Hyperactive Disorder and the Autism Spectrum
- Mood disorders that include Generalized Anxiety Disorder and Obsessive Compulsive Disorder
- Personality Disorders such as Borderline Personality Disorder, Narcissistic Personality Disorder, and Anti-Social Personality Disorder
- Harm Reduction with addictions that includes use of illicit substances, technology, excessive spending, binge eating, etc. (not exhaustive list)



## WELCOME TO WEEK ONE! **WHO ARE YOU?**

- What is your name?
- What you're hoping to get out of these sessions?
- pressure

• Have you done any therapy before? Any group therapy? • Is there anything specific you'd like to share with the group? No

## Today's Agenda

### **01** INTRODUCTION TO CBT

- Core Principles
- The Cognitive Triangle
- Treatment
- Model of Emotions

### **02** INTRODUCTION TO ANXIETY

- Core Principles
- The Cognitive Triangle
- Treatment
- Model of Emotions

### **O3** OPEN DISCUSSION **O4** HOMEWORK **O**

### **05** WHAT TO EXPECT NEXT WEEK

## Introduction to the CBT Model



- •Cognitive-Behavioural Therapy (CBT), is an evidence based approach that focuses on present issues and ends with a focus on the causes vs. the "why"
- •Effective for addressing a range of difficulties such as depression, anxiety, substance use, relational difficulties
- •It is time efficient, structured, educational, and collaborative (e.g., therapist, groups)
- •Effective or more effective than other forms of therapy and/or psychiatric medications
- •Research has shown that CBT can lead to significant improvements in our quality of life and overall functioning

## The Core Principles of CBT

### THOUGHTS, FEELINGS, AND BEHAVIOURS ARE INTERCONNECTED



Negative thought patterns that frame the way we interpret experiences and can generate negative feelings attached to these experiences.

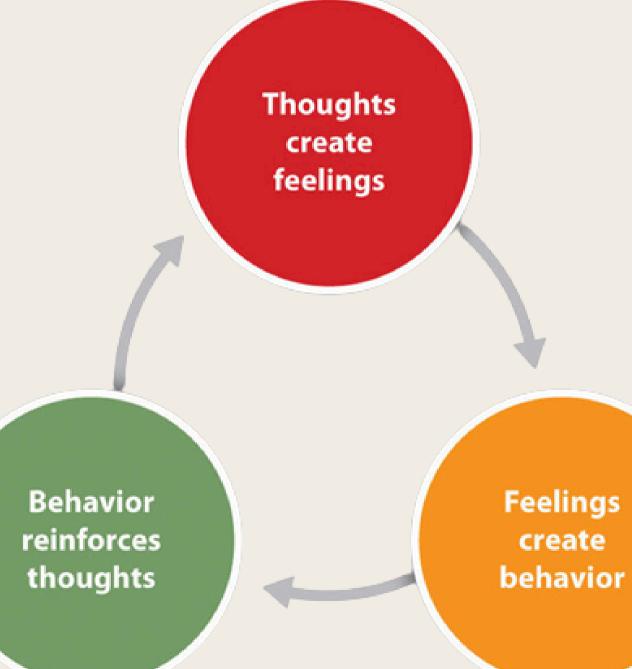


Our behavioral response to perceived experiences can be unhelpful due to the negative meaning we attach to the situation.



When we re-frame negative perceptions we can better manage negative emotions and therefore develop a more regulated response to cope with these experiences.

## The Cognitive Triangle





## **How does CBT work?**



- problems
- abilities
- rather than avoid
- grounding techniques when activated

•Helps people learn to become their own therapist through homework outside of sessions:

•Identify 'distortions' in thinking patterns that 'create'

•Reevaluate these 'distortions' in light of objectivity

•Use problem-solving skills to cope with difficult situations to generate a greater sense of confidence in

•Exposure exercises that encourage us to 'face' fears

•Learn to calm the mind and relax our body through

## **CBT Model of Emotions**

 Understanding how our thoughts contribute to our moods will allow us to be more skillful at controlling our emotions and behaviours

•It is important to learn the ability to distinguish between our thoughts, feelings, and behaviours in order to manage our mood

•This provides important insight into the ways that we maintain, worsen, or 'create' negative moods





## **CBT Model of Emotions Cont'd**

•Emotions can feel overwhelming but it is important to create the skill set to 'pause' to use introspection to explore the components of the emotion

•When we have insight and act as the 'observer' into our own emotions we can redirect the affiliate thoughts which will encourage more effective responses to these experiences





## Why Do We Have Emotions? THERE ARE TWO MAIN FUNCTIONS THAT EMOTIONS SERVE:

### **1. SIGNALS TO OURSELVES AND MOTIVATE US TO ACT**

•Let us know when something is 'wrong'

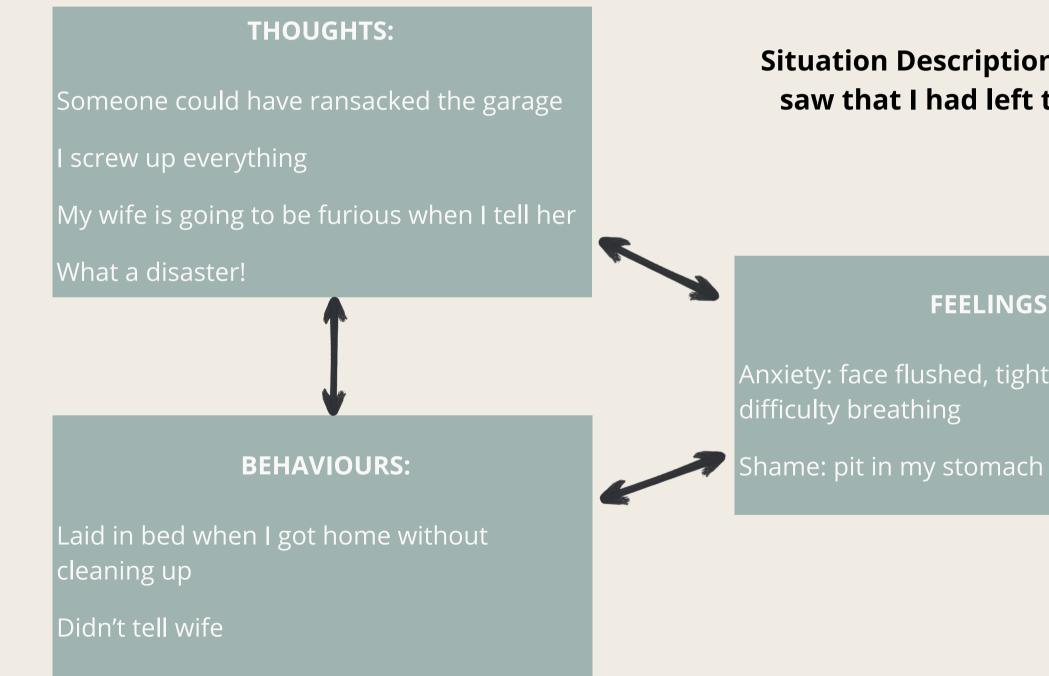
•For example, anger can signal injustice where as fear can signal danger

### 2. SIGNALS TO OTHERS AND MOTIVATE OTHERS TO ACT

•This can be both explicit (words) or implicit (body language)

## **Identifying Components of Emotion**

### **INSTRUCTIONS: CHOOSE A SITUATION THAT TRIGGERED DIFFICULT EMOTIONS AND IDENTIFY THE COMPONENTS OF THAT EMOTION**



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Situation Description: I come home from work and saw that I had left the garage door open all day.

#### **FEELINGS:**

Anxiety: face flushed, tightness in my chest,

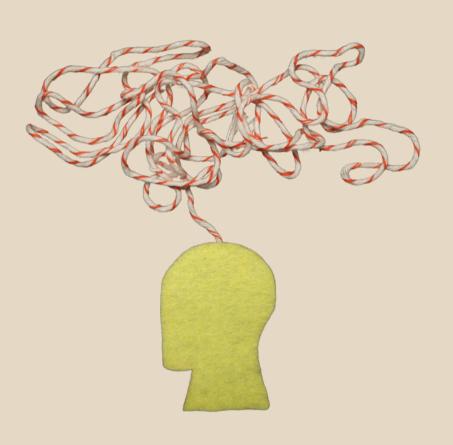
## What is Anxiety?

•Anxiety is a natural response in both a mental and physical state to facilitate response to real or perceived danger

•Anxiety is meant to capture and stimulate to make changes to protect us and/or what we care about

•Anxiety is natural and can even be productive and is meant to keep us alert and safe

• Anxiety becomes an issue when it is persistent, pervasive, and disrupts the quality of daily life



## Symptoms of Anxiety

### COGNITIVE

Hypervigilance, excessive worry, frightening thoughts, flashbacks, poor concentration, distractibility, narrowing of focus

### **BEHAVIOURAL**

Avoidance, reassurance, difficulty with communication, restlessness, agitation



### PHYSICAL

Increase in heart rate and blood pressure, sweating, trembling, nausea, chest pain, shortness of breath, feeling faint, tense muscles, hot flashes, dizziness

### PRESENTATION

Nervous, frightened, frustrated, tense, on 'edge, impatient

## **Types of Anxiety**



### **GENERALIZED ANXIETY**

Persistent and excessive worry about a wide range of everyday concerns and difficulty controlling anxieties

### SOCIAL ANXIETY

Fear of negative perception by others, extreme discomfort in social situations

### **PANIC ATTACKS**

-Intense and abrupt burst of acute anxiety (strong somatic sensations) that can feel like you are going to die, can occur at random or with trigger

### **OBSESSIVE COMPULSIVE**

Recurring, unwanted thoughts, ideas or sensations (obsessions). To get rid of the thoughts, they feel driven to do something repetitively (compulsions)

## **Treatment for Anxiety**



levels:

- Talk therapy
- Lifestyle changes
  - social emotional support

Treatment is geared to keeping anxiety at manageable

• Psychiatric medication (discuss with family doctor)

- Coping strategies, breath work, psycho-education

-Regular exercise, nutritional diet, sleep hygiene,

# DISCUSSION

- Questions or comments?
- Did this material relate to you?
- What is one take-away?

## ts? e to you? /?

# HOMEWORK

Practice identifying the components of our emotions and the associated components:

- Identify thoughts
- Explore attached feelings
- Associated behaviours

# WHAT TO EXPECT NEXT WEEK

- Bio-psycho-social Model
- Automatic stress responses
- Cycle of Anxiety
- Grounding Exercises

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# THANK YOU



