

Testing delivery modes for brief self-help for negative thinking*

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Negative thoughts

- 80-99% of normal population (Clark & Rhyno, 2005)
- Suppression is not working (Wenzlaff & Wegner, 2000; Hooper, Saunders, & McHugh, 2010)
 - Ironic process (Wegner & Gold, 1995)
 - Derived generalization of thought suppression (Hooper et al., 2010)

- Clark, D. A. & Rhyno, S. (2005). Unwanted intrusive thoughts in nonclinical individuals. InClark, D. A. (Ed.). *Intrusive thoughts in clinical disorders: Theory, research, and treatment.* (pp. 1–29). Guilford Press New York.
- Hooper, N., Saunders, J., & McHugh, L. A. (2010). The derived generalization of thought suppression. *Learning & Behavior*, 38(2), 160–168. http://doi.org/10.3758/LB.38.2.160
- Wegner, D., & Gold, D. (1995). Fanning old flames: Emotional and cognitive effects of suppressing thoughts of a past relationship. Journal of Personality and Social Psychology, 68(5), 782.

Wenzlaff, R., & Wegner, D. (2000). Thought suppression. *Annual Review of Psychology*, 51(1), 59–91.



Negative thoughts

- Cognitive restructuring (e.g. Beck et al., 1979; Beck & Beck, 2011)
 - "The goal of cognitive restructuring is to modify or literally 'restructure' a persons [anxious] beliefs and appraisals..." (Clark & Beck, 2010)
- Cognitive defusion (e.g. Hayes, Strosahl, & Wilson, 1999; 2011)
 - "... being able to see all thoughts simply as thoughts, rather than seeing thoughts as having literal truth that can control one's behaviour." (Hooper & Larsson, 2015)

Hooper, N. & Larsson, A., (2015) The Research Journey of Acceptance and Commitment Therapy. Palgrave McMillan, London Clark, D. A. & Beck, A.,T., (2010). Cognitive therapy for anxiety disorders: Science and practice. (p. 200). Guilford Press New York.

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Aims

- compare different contemporary strategies (Defusion & Restructuring) of dealing with negative private content
- compare delivery methods as guided self-help or online

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Guided

- Pre and post measures:
 - → BDI-2, AAQ-2, STAI-s, PANAS
- Generate and rate a negative self-directed thought that your score as Highly on all scales
- Read instruction with a researcher
- Daily thought logs (freq/will)
- SMS reminders daily

Online

- Pre and post measures:
 - → BDI-2, AAQ-2, STAI-s, PANAS
- Generate and rate a negative self-directed thought that your score as Highly on all scales
- Read instruction online
- Daily thought logs (freq/will)
- Daily SMS reminders



Guided

- n=
 - 24 cognitive restructuring
 - 24 defusion
 - 23 no instruction control group.

Online

- n=
 - 10 cognitive restructuring
 - 16 defusion
 - 11 no instruction control group.



"The BeNDWill" Instruction

"Now pick a negative thought about yourself that you would rate as *at least* BELIEVABLE, NEGATIVE, UNCOMFORTABLE and that you are UNWILLING to be thinking about. Make sure that it does not relate to any physical properties about yourself and that it is something that has been showing up for you for a while - not just today."



Conditions

- Cognitive Restructuring
- Defusion
- Control



Cognitive restructuring

- Identify Thinking Error
- Examine thought
- Generate Alternative



Thinking Errors

Catastrophizing

Black or white thinking

Overgeneralization

Fortune-telling

Mind-reading

Mental filtering

Disqualifying the positive

Labeling

Emotional reasoning

Personalizing

Demanding

Low frustration tolerance



Examine the thought What evidence exists against this thought?

Restructuring

Generate Alternative What do I need to think in order to act and feel differently?



Cognitive restructuring reminder

Remember to overcome your negative thought by identifying the thinking error and generate an alternative! Don't forget the thought log!



Defusion

- Musical thoughts
- Funny voices
- "I'm having the thought that"



Musical thoughts

- This technique is a little different. Pick a negative thought again.
 Hold it firmly and try to believe it as much as possible.
- Now replay the thought again but this time do it to the tune of "happy birthday", sing it to yourself and notice what happens.



Funny voices in your head

- This is similar to musical thoughts. As the previous methods, you pick a negative thought and once again believe it as firmly as possible.
- And now let the thought be said by your favourite funny cartoon character, Donald Duck, Bugs Bunny or anyone else you can think of. Let this characters voice say your thought. Notice again what happens.



I'm having the thought that...

- This technique works like this. So now, pick a negative thought that usually upsets you. Perhaps the type that goes something like "I'm not good enough" or "I'm stupid" Now focus on that thought and really believe it.
- Now rewind the thought and this time put "I'm having the thought that..." in front of it. Notice what happens.



Defusion reminder

Remember your thought log. And remember that a thought is just a thought.



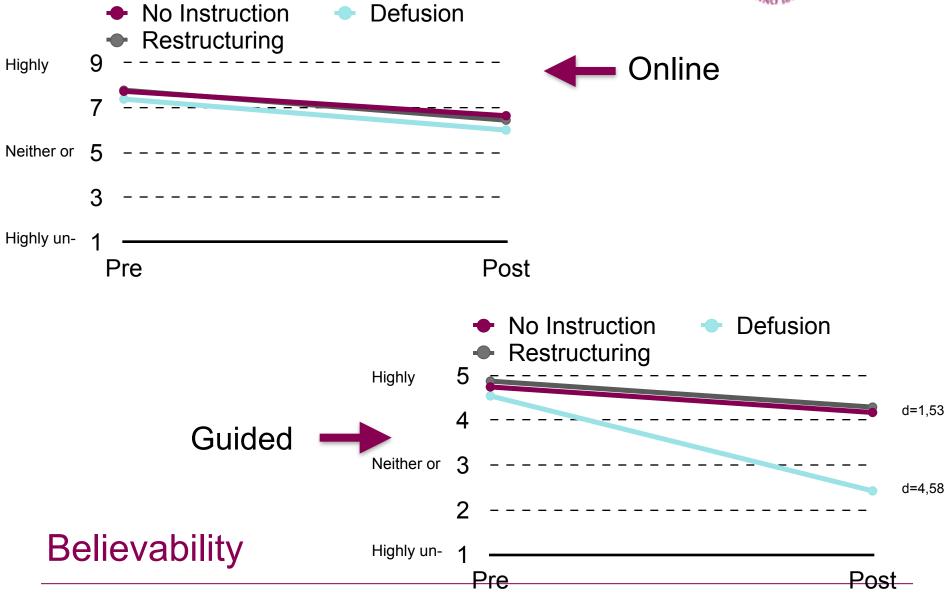
Text reminder (control group)

Remember your thought log.

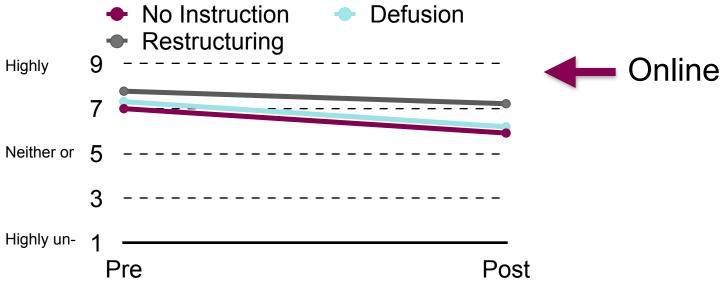


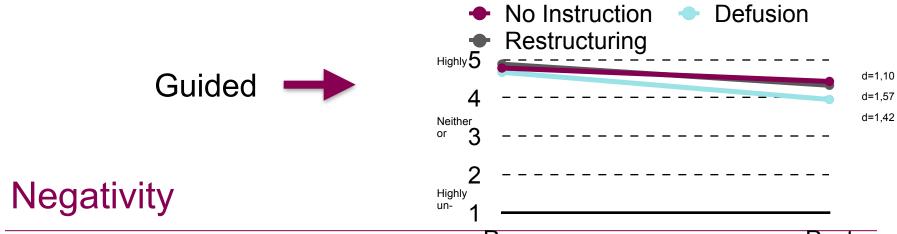
Results!







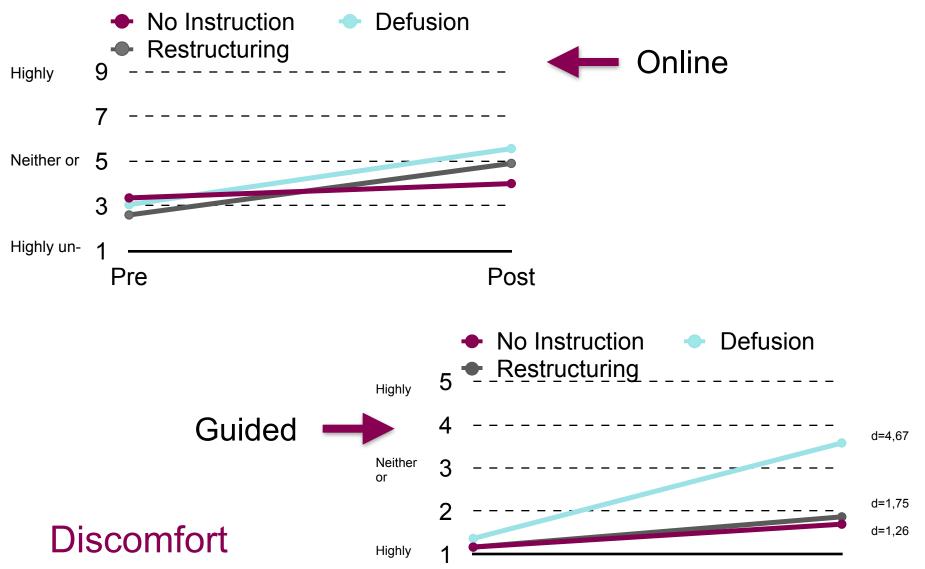




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July 13, 2015 Post





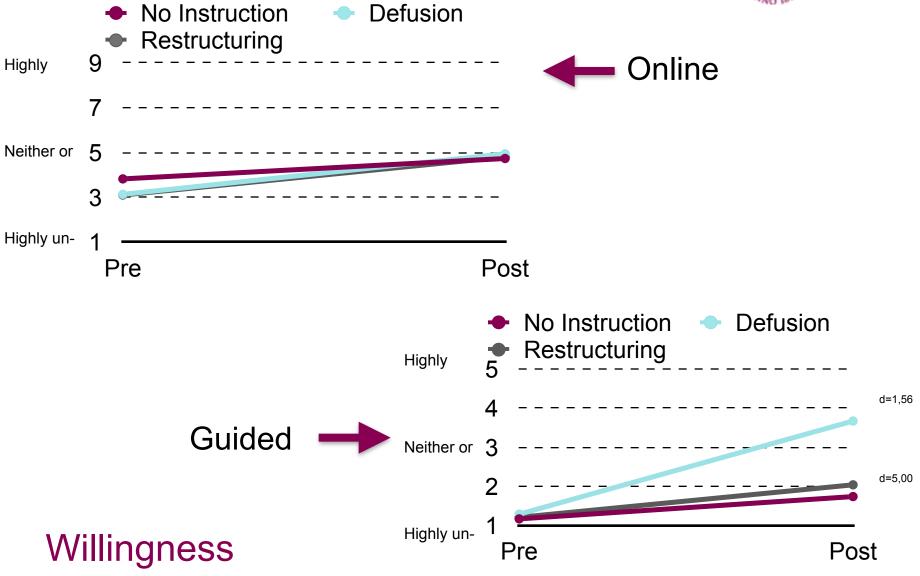
Pre

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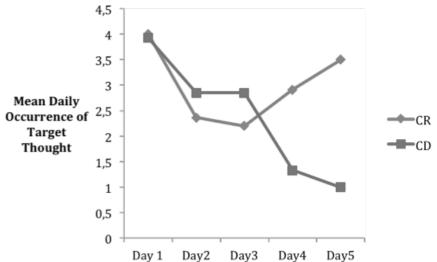
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Post



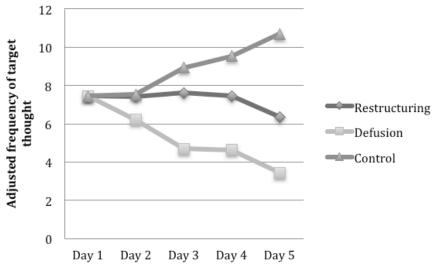




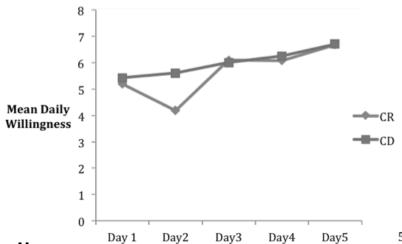




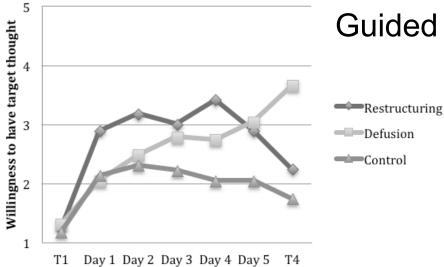








Online



Daily Willingness



MOOD MEASURES

	AAQ-II*	BDI-II*	PANAS (PA)*
Control			
Restructuring			
Defusion	d=0,584 (vs C)	d=1,61	d=1,32
Note: Cohen's d effect size rule of thumb <.3 small, $3 < x < .7$ moderate, and >. 8 large			

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Discussion

- Defusion interventions are associated with greater improvements than control or restructuring.
 - ➡ Even with brief intervention (~15 mins in guided)
- Guided > Online NB: larger ns in guided.
- In line with previous reviews finding that personal contact with a service deliverer, such as in person or telephone support, lead to higher effect sizes (i.e. Spek et al., 2007; Palmqvist et al., 2007)

Palmqvist, B., Carlbring, P., & Andersson, G. (2007). Internet-delivered treatments with or without therapist input: does the therapist factor have implications for efficacy and cost? Expert Review of Pharmacoeconomics & Outcomes Research, 7(3), 291–297. doi:10.1586/14737167.7.3.291

Spek, V., Cuijpers, P., Nyklícek, I., Riper, H., Keyzer, J., & Pop, V. (2007). Internet-based cognitive behaviour therapy for symptoms of depression and anxiety: a meta-analysis. Psychological Medicine, 37(3), 319–328. doi:10.1017/S0033291706008944



Future directions

- General
 - → Follow-up
 - ➡ Behavioral measures of flexibility or valued action
 - Calculate treatment costs
 - Primary care
- Online troubles
 - Much larger sample for online (almost 60% loss from recruitment)
 - → MI/Values for retainment?
 - → More personal or sense of personal connection



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Thanks for listening!

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