

Psychotherapy Skills For the Busy Family Physician

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Overarching Objectives

- Appreciate that Mental health is the result of healthy relationships
- Dealing with conflict is a necessity of life.
- Not tolerating and working through negative feelings results in psychological distress and leaves individuals at risk for developing mental illness.

Specific Objectives

- Clarify the role of Psychotherapy in a busy GP's office
- Describe Common Goals of therapy
- Identify Crisis/Solution focused Therapy
- Demonstrate the BATHE Technique
- Describe Follow up Sessions
- List 4 Common Schools of Therapy

We Need Others to Grow

- ***Having our needs adequately met*** leads to *mental health and well being* :

Safety

Love

Respect

Validation

Honesty

Community

Shared reality

Sense of Security

Self Esteem

Self Worth

Emotional Control

Sense of Competence

Sense of Integrity

Sense of Connection

Common Understanding

Behavioural Analysis

Vulnerability (Genes, Family history)



Precipitant (Current Stressor)



Links – A&B (feelings and thoughts)



Problematic Behaviour (reactions, coping)



Consequences (interpersonal problems, Sx)

Therapeutic relationship

- Attuned
- Nonjudgmental
- Tolerant of anxiety/affect
- Focused
- Consistent
- Emotionally engaged
- Boundaries

Perfect match !

The family doc is: busy, on the front lines

Solution focused therapy is:

- Hopeful, optimistic
- Practical, Realistic
- Collaborative – shared responsibility
- Respectful - patient is expert, the main agent in their own life
- Strength based, Empowering

Basic Psychotherapeutics

Common Factors:

- Safe setting
- Positive Regard and Validation
- Empathy and Attunement
- Therapeutic Alliance and working relationship
- Modeling (mentalization and problem solving)

How to get a History in an organized fashion??

BATHE

B – Background

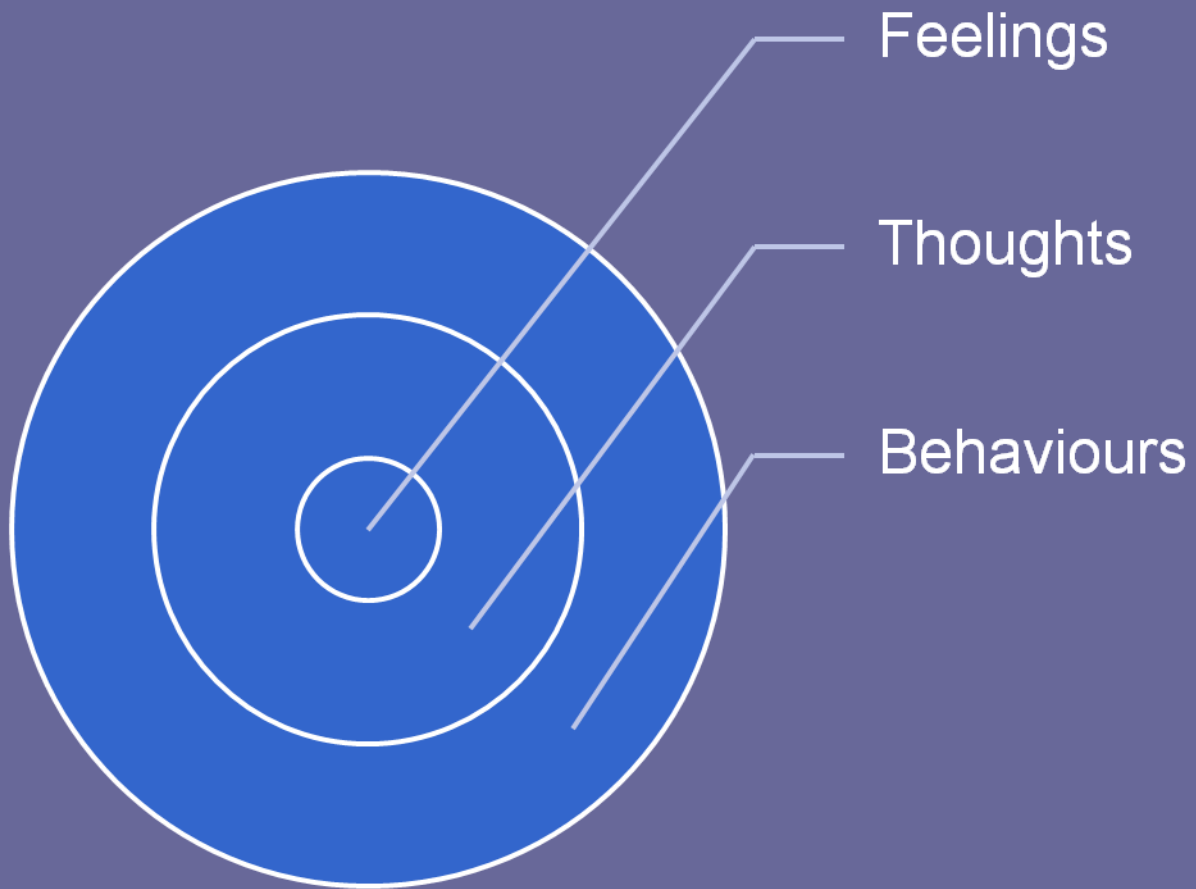
A – How did that affect you? Feelings

T – Why does that trouble you? Thoughts

H – How did you handle it? Behaviour

E – EMPATHIZE !!!

•Stuart & Lieberman [The Fifteen Minute Hour](#)



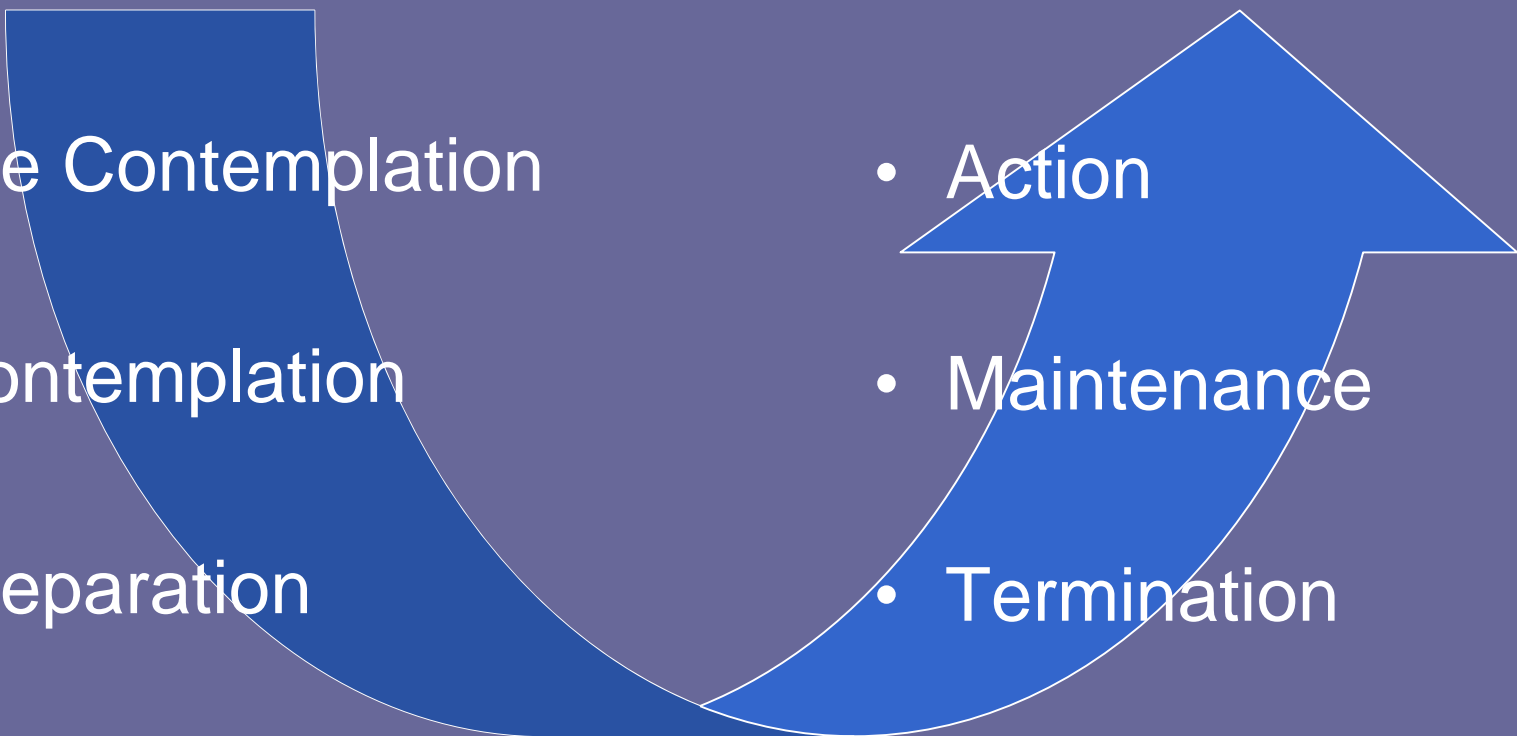
General Therapeutic Strategies

- Build collaboration / Support Self Efficacy
- Maintain Consistency / Boundaries
- Validate / Normalize
- Set Goals / Tasks / Expectations
- Assess and Build motivation

CONTRACTING
Treatment Goals
External agendas ?

- Therapists
 - Patients
 - External pressures
-
- Question – Primary of Secondary Gain

6 Stages of Change Prochaska

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- Pre Contemplation
 - Contemplation
 - Preparation
 - Action
 - Maintenance
 - Termination

Follow up Sessions

- History – BATHE
- Solution Focused
 - Miracle question: “Suppose one night, while you are asleep, a miracle happened and fixed this problem. Only you are asleep, so you don't know it happened. What would be different? How would you know a miracle happened? “
 - Exceptions
 - Scaling
- Goals/HW

Ending the Session

The therapist offers feedback on the patient focusing on strengths and positive coping and makes a suggestion for an experiment or homework.

Three sayings guide this:

§ *if it ain't broke, don't fix it*

§ if you know it works, do it again

§ if it doesn't work, do something different

Choice of Therapy

Type of Therapy

BATHE

Brief Solution Focused

Interpersonal

Cognitive-Behavioural

Psychodynamic...

Invasiveness

- Supportive / Least

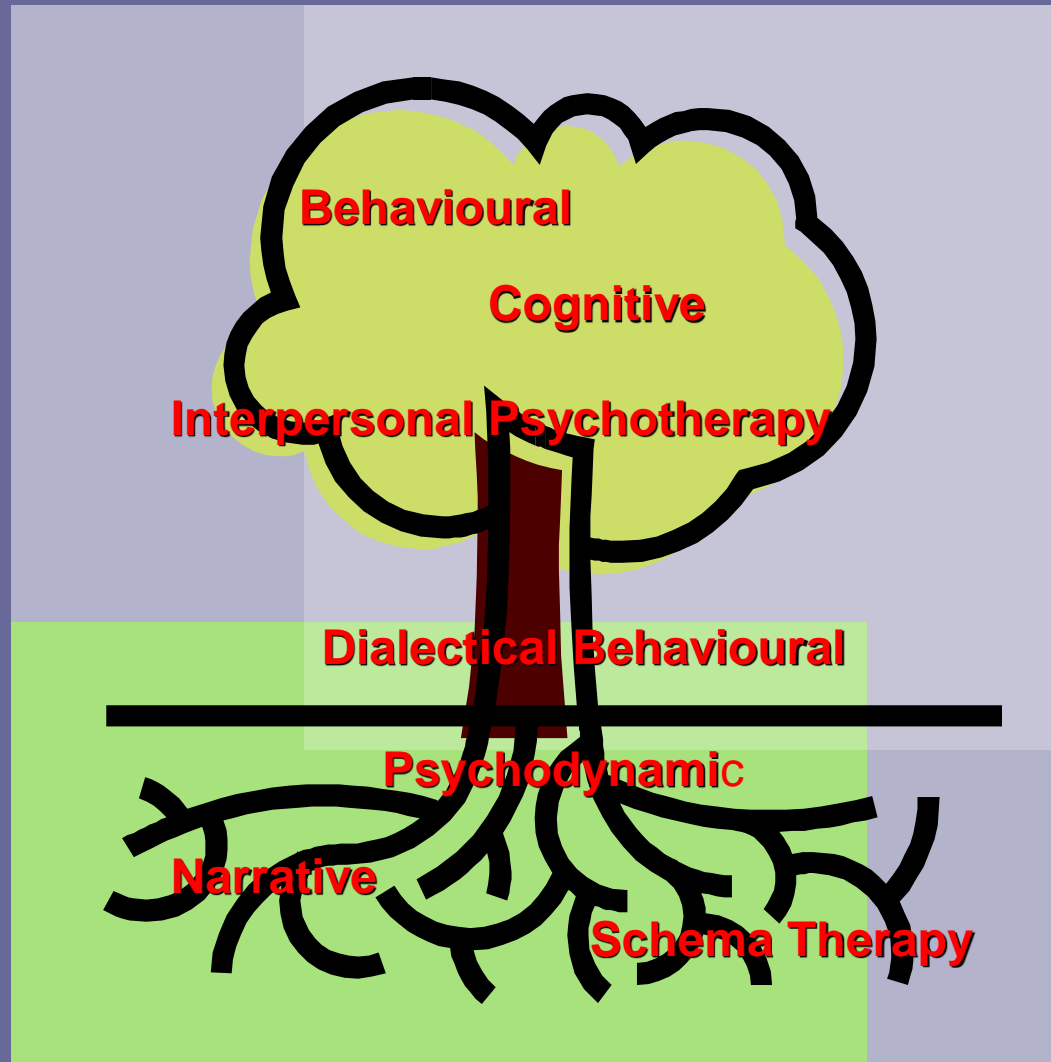


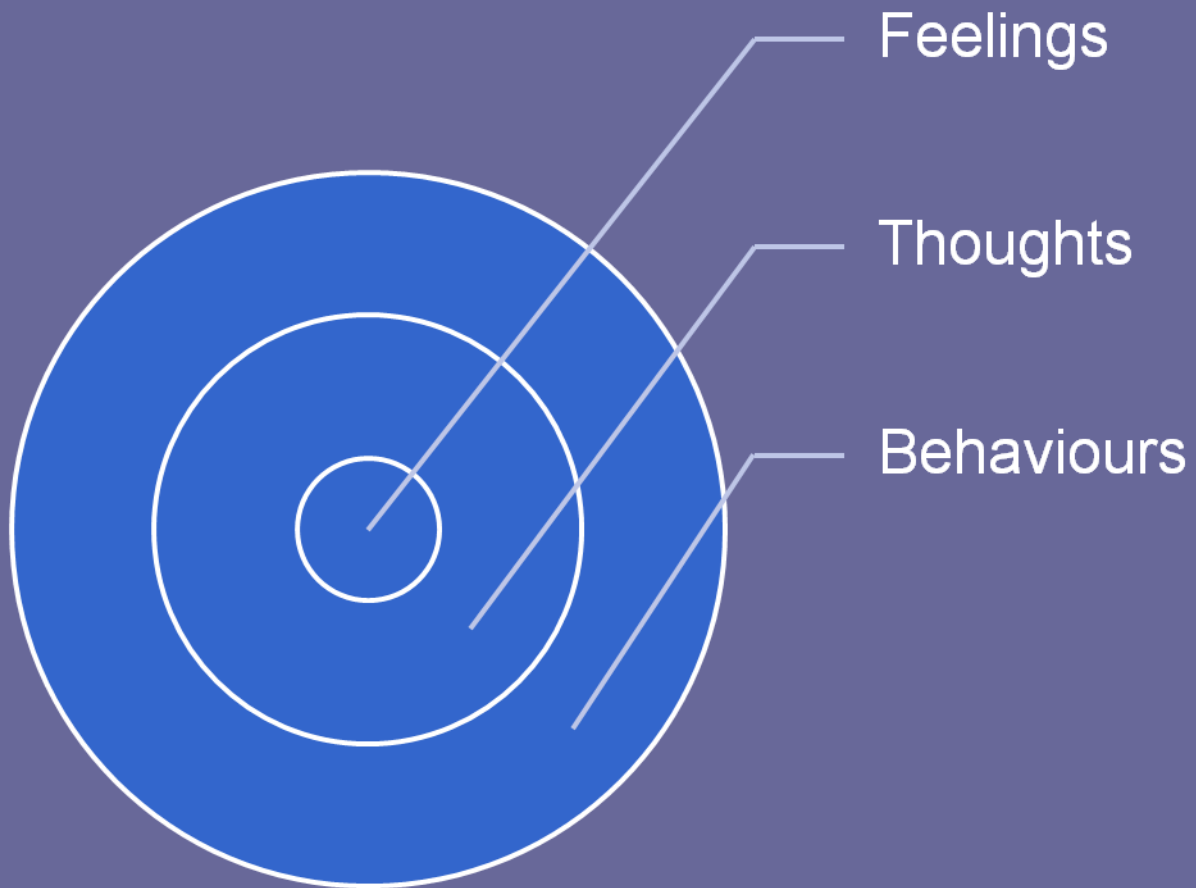
- Exploratory / Most

Common factors of all Psychotherapies

- Supportive component – based on the therapeutic relationship
- Technical component – based on new experiential learning

Eclectic Psychotherapy Integrated Psychotherapy





Behavioural Therapy

- Based on work of Skinner
- Classical and Operant Conditioning
- Classical - stimulus-response. Change stimulus meaning to effect behaviour
- Operant - Manipulate consequence to change behaviour (positive/negative reinforcement and punishment)

Cognitive Therapy

- Based on work of Aaron Beck/Burns
- Focus on Cognitions as primary
- Cognitive distortions based on Automatic thoughts, core beliefs
- ABC Homework
- Automatic Thought Record
Situation – feeling - thought - distortion -
evidence - rational response

Interpersonal Psychotherapy

IPT

- Frames symptoms in as interpersonal context
- Based on emotional needs / LOSSES
- *Lack of...* which results in symptoms
- Manual based treatments
- Focus areas: grief, role transition, dispute
- Distinct methods: Interpersonal Inventory, communication analysis
- Adjust behaviour to ensure needs are met

Psychodynamic Psychotherapy

- Arisen from the work of Freud
- Works with Unconscious feelings(affects) and relational templates
- Explores deep roots of pathology
- Usually weekly
- May be short (1sessions – 3m) or long term

*vs. Psychoanalysis is daily and not
face-to-face*

All therapies

Educational pieces

- OK to express thoughts and feelings
- Self reflection
- Can face reality
- Mastery possible
- Choices
- Identify defences
- Develop new coping