Spiritual Self Schema Therapy

for the treatment of addiction and HIV risk behavior

at Yale University School of Medicine
A NIDA-funded Behavioral Therapies Development Project to develop and pilot test therapy

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Spirituality as Asset

- 2000 twins studied.
- Traditional religious beliefs prevented initial substance abuse.
- Recovery from substance abuse facilitated by personal devotion *(importance of religious & spiritual beliefs, spirituality as a source of comfort, private prayer).*

--(Kendler, Gardner & Prescott, 1997)
Spirituality as Asset (con’t)

• HIV negative IDUs reported that “prayer” or “God’s help,” helped them avoid HIV risk behaviors (DesJarlais, et al., 1997).

• Among 237 drug users in recovery, strength of religious faith and spirituality was found to be associated with adaptive coping, optimistic life orientation and reduced levels of anxiety (Avants, Warburton, & Margolin, 2001).
Spirituality/religiousness increases after HIV diagnosis and this increase predicts slowed disease progression (Ironson, et al., 2006)

The relationship between adaptive coping and spirituality is particularly strong among African-Americans and women with HIV disease (Biggar et al., 1999; Demi et al., 1997; Kaplan et al., 1997).
Cognitive self-schemas facilitate rapid processing of incoming information in accordance with beliefs and preferences, allowing us to go on ‘auto pilot’ during much of daily life.
Schema activation in high risk situations

High Risk Situation

Self-Schema Activation

- Addict Self-Schema
- Spiritual Self-Schema

High Risk Behavior

VS

HIV Preventive Behavior
3-S Treatment Goals

- decrease activation of the habitual self-schema
- and
- increase activation of a spiritual self schema
A brief history of Buddhist Psychology and Western Psychotherapy

- 1910--William James, “This [Buddhist psychology] is the psychology everybody will be studying 25 years from now.”

- 1939--Jung writes a commentary on the *Tibetan Book of the Dead*

- 1960--Erich Fromm explores psychoanalysis with DT Suzuki

- 1975--Herbert Benson reports on meditation to treat heart disease

- 1977--the APA calls for a scientific examination of the clinical effectiveness of meditation

- Jon Kabat-Zinn establishes Center for Mindfulness at UMass Medical Center
A brief history of Buddhist Psychology and Western Psychotherapy (cont.,)

- 1993 Marsha Linehan publishes Zen-inspired CBT for suicidal patients with BPD, Dialectical Behavioral Therapy.

- 1995 Mark Epstein publishes *Thoughts without a Thinker* linking psychodynamic therapy to Buddhist ideas.

- 2000 John Teasdale, Zindel Segal et al publish research on mindfulness-based therapy for chronically depressed patients.

- 2003 Ruth Baer reviews literature, mindfulness based therapies are “probably efficacious” and are becoming “well-established.”

- 2005 HH the Dalai Lama gives keynote address at APA conference in Washington DC.
Buddhism and CBT

- CBT - thoughts lead to behavior, not external circumstances
- Stoicism is implied in most therapies (calm during crisis amplifies the ability to respond well)
- Unlearn unwanted reactions and learn new ways of acting
- Inductive method - respond to what is happening, thoughts are guesses or hypotheses to be tested, not trusted
- Homework
Contact

Forms → Eye → Consciousness seeing
Sounds → Ear → Consciousness hearing
Tastes → Tongue → Consciousness tasting
Smells → Nose → Consciousness smelling
Touches → Body → Consciousness touching
Thoughts → Mind → Consciousness thinking
A “stream of consciousness…”
Suffering

Hatred
Greed
Delusion

birth/death

selfing

grasping
clinging

FEELING
pleasure/
neutral/pain

craving
aversion

DISPOSITION
Will
Action
Fruition of Act
An Unskillful Mind Moment
satipatthana sutta and Abhidhamma

- Foundations of mindfulness
  - Body
  - Feeling
  - Mind
  - Mind Objects

- Proximate Cause
  - Attention to the object
  - A previous moment of mindfulness
## The Noble Eightfold Path

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<th>• <strong>Mastery of the Mind</strong> --</th>
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<td>Right effort, mindfulness,</td>
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• 12-session version specifically for people in treatment for addiction who are living with HIV/AIDS

• 8-session version for people in treatment for addiction whose HIV-serostatus is negative or unknown
Format of 3-S therapy sessions

- Commitment
- Meditation Practice
- Review of Prior Session
- Presentation of New Material
  - Didactic
  - Experiential
- At-home Assignments
- Summary and 3-S Stretch
Session 1 -- Orientation

- Commitment to a spiritual path
- Description of the addict ‘auto pilot’
- Introduction to the Noble Eightfold Path
- Therapy Goal —
  to replace the addict self auto pilot
  with the spiritual self in daily life
3-S Training in Mastery of the Mind
Right Effort, Mindfulness, Concentration

- Session 2: Becoming aware of self-schemas
- Session 3: Handling addict self intrusions
- Session 4: Medication mindfulness
3 Times a Day Self Check-In

- Identify cues
- 3 times a day
- Become aware
Clients develop …

• **Right Effort** - necessary to train the wandering ‘monkey’ mind

• **Right Mindfulness** – awareness of of addict self-schema activation

• **Right Concentration** – meditation
Mindfulness: Bodily sensations
Concentration: Anapanasati
Session 3 -- Training in Mastery of the Mind

#2

Handling Addict Self Intrusions

- **Identify**
  - addict self thoughts, feelings, behaviors

- **Interrupt**
  - the addict self auto pilot

- **Refocus**
  - on one’s spiritual path
Step 1 - Identify

- Increase awareness of when habitual self is activated (gone on ‘auto pilot’)

- Observe how the habitual thoughts, feelings, and behaviors that compose the addict self inevitably lead to suffering
Step 2 - Interrupt

Disrupt the automaticity of the addict self-schema before it causes harm
Step 3 - Refocus

Activate the spiritual self -- redirect thoughts, feelings, and behaviors onto one's spiritual path
Mindfulness Rationale

What does this have to do with recovery?
Without ongoing awareness --
there is no mindfulness.

Without mindfulness --
the mind wanders.

When the mind wanders --
it gets trapped in the addict self.
Mindfulness Exercise

- Awareness of sensations while seated
Session 4 -- Training in Mastery of the Mind #3  
Medication Mindfulness

- Activating the spiritual self to get optimal benefit from HIV-related health care.
- Developing and using medication mindfulness rituals.
Training in Morality
Right speech, action, livelihood
‘doing no harm to self or others’

- Session 5: Preventing harm to self/others
- Session 6: Everyday Ethics
- Session 7: Stopping the spread of HIV
Session 5 -- Training in Morality #1
‘Preventing harm to self/others’

Clients learn to...

• abandon speech, action, and livelihood associated with the addict self

• protect themselves and others from drug-related harms (e.g., HIV)
Clients learn to systematically observe the impermanent nature of the sensations associated with craving.
Session 6 -- Training in Morality #2
‘Everyday Ethics’

Clients learn to...

• develop speech, action, and
  and livelihood associated with
  the spiritual self

• develop loving kindness towards
  all beings through the practice
  of metta meditation
Demonstration

metta meditation
HIV-positive clients focus on...

- social responsibility
- finding meaning in having HIV disease
- becoming an advocate for change
3-S Training in Wisdom
Right View and Right Thinking

- Session 8: Filling the mind
- Session 9: Coping with Stigma
- Session 10: Renouncing the addict self
- Session 11: Serenity and Insight
3-S Training in Wisdom

Clients come to understand that...

• the addict self is a habit pattern of the mind that causes harm to self and others, and is not their true nature;

• they can change this habit pattern, and can experience their true nature.
Clients strengthen the spiritual self . . .

• Create a blueprint for their spiritual path.
• Create a daily plan for activating their Spiritual self throughout the day.
HIV-positive clients learn about …

• Internalized stigma
• Self-fulfilling prophecy
• ‘This is not me; this is not mine’

• The importance of stopping the cycle of ill-will through forgiveness.
Clients make the commitment to …

• Renounce the addict self identity
  and their 5 enemies (“hindrances”)

• Assume a spiritual self-identity
  with the help of 5 friends (“masteries”)

Session 10 -- Training in Wisdom #3
‘Renouncing the Addict Self’
HIV-positive clients …

- Stages of grief in the context of HIV/AIDS
- Addict self activation in response to loss
- Serenity and acceptance
- Insight into impermanence
Maintaining the Spiritual Self-Schema by...

Taking refuge in

- a teacher
- the teachings
- the community