Optimal Treatment for Anxiety & Mental Health

Applying the Unified Protocol for the Treatment of Emotional Disorders in Children and Adults: An Overview for Practice

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OBJECTIVES

By the end of this workshop, participants will be able to...

- 1. **Describe** the key principles of the Unified Protocol for the Treatment of Emotional Disorders.
- 2. <u>Summarize</u> the key research findings supporting the use of the Unified Protocol in clinical practice.
- 3. <u>Use</u> exercises from the UP in their own clinical practice.



Overview

 The Unified Protocol and Transdiagnostic Approaches

Experiential Practice:

- Emotion Awareness and Mindfulness
- Opposite Action in Therapeutic Settings



The Unified Protocol for the Transdiagnostic Treatment of Emotional Disorders

- The Unified Protocol for the Transdiagnostic Treatment of Emotional Disorders (UP) is an evidenced-based Cognitive-Behavioral Intervention
- The UP has been widely studied, adapted, and implemented in a wide range of settings
- Full disclosure: I have been trained in the UP-C (Children and Adolescent), Group UP (group-based intervention in military settings) and am currently conducting a study on an adaptation of military families in pediatric primary care, but am not a certified UP trainer



Rationale

- Many other interventions are disorder specific
 - How many "clean" anxiety or depression cases do you work with?
- Transdiagnostic approaches focuses on underlying processes
 - Neuroticism, tripartite mode of anxiety and depression
- Rigorous evaluation, training, and dissemination
 - 2020 Systematic Review: 77 studies!



Eight Modules

- 1. Goal setting and motivation for treatment
- 2. Adaptive nature of emotions
- 3. Mindful emotion awareness
- 4. Cognitive flexibility
- 5. Action tendencies with strong emotions
- 6. Interceptive exposure
- 7. Emotion exposure
- 8. Relapse prevention



In Children & Adolescents: CLUES

Consider how I feel

Look at my thoughts

Use detective thinking

Experience my fears and feelings

Stay healthy and happy



Key Ingredients

- Emotion awareness and language
 - Role and function of emotion, three component model, avoidance
- Mindful emotion awareness
 - Focus on experiential
- Cognitive flexibility
 - Automatic thoughts, thinking traps, challenging negative thoughts
- Opposite action
 - Focus on experiential



Results

- Efficacious for
 - Anxiety, Depression, Mixed states, Bipolar, Substance Use, Eating Disorders, Borderline personality, Non-suicidal self-injury, sleep, subclinical symptoms, health and chronic pain, sexual minority stress...
- Strongest effects tend to be seen in anxiety-related symptoms even amongst comorbid conditions
- Inpatient response is more limited, but broad support for crosscultural adaptations



Relationship with other EBTs...

- Many overlapping similarities with other EBTs
- Focus on transdiagnostic as opposed to symptom/disorder specific
- Complementary with many new wave CBTs
- Heavy focus on <u>experiential</u> learning and <u>behavior</u> change



BREAK



Mood Induction



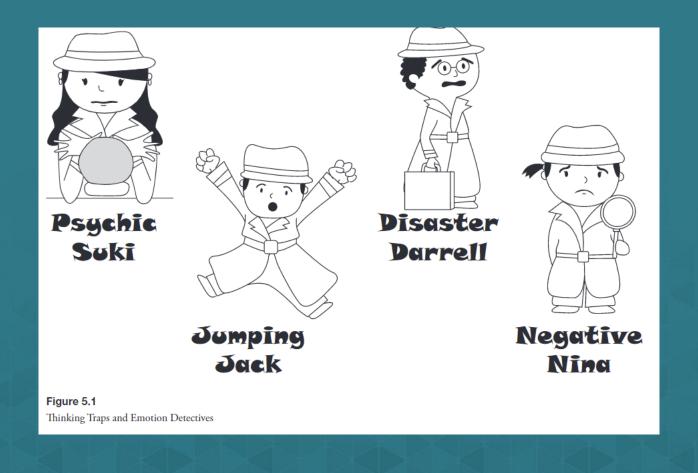


The Worry Line





Thinking Trap Characters





Open Case Discussion

 How would you use some of these exercises with your own patients?

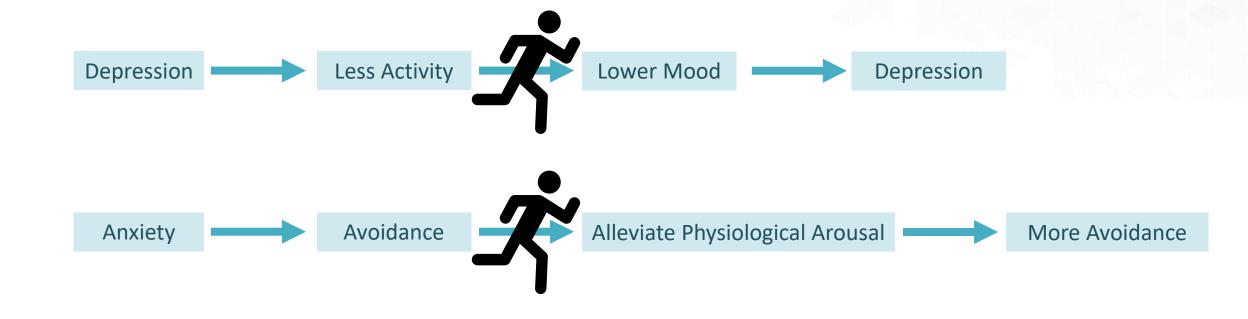
 How have you used similar approaches? What worked well? What were challenges?



BREAK

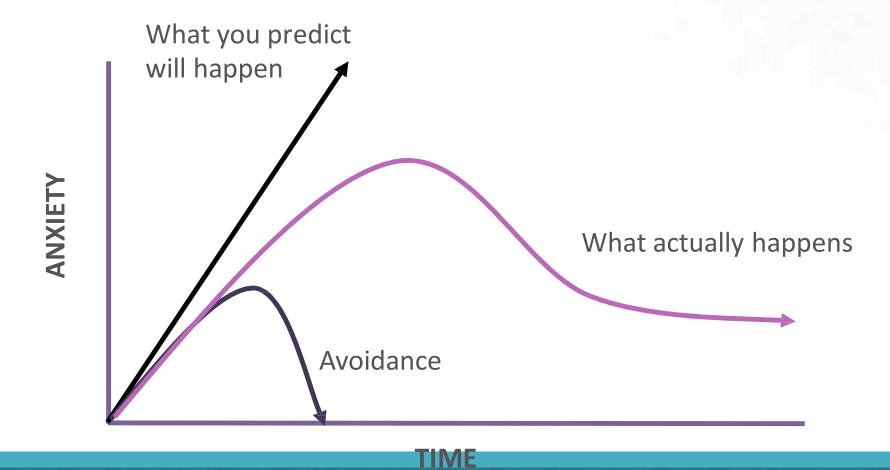


Opposite Action





Riding the wave...





Brainstorm

What interoceptive exposures have you used?

What experiential exposures have you used?



Examples

Box 4.1 Sensational Exposure Options

- Shake head from side to side (does not need to be done quickly) for 30 seconds
- Place head between knees for 30 seconds, then lift head (to an upright position) quickly
- Run in place for 1 minute
- Hold breath for 30 seconds
- Tense the muscles throughout the body for 1 minute or hold a pushup position for as long as possible
- Spin in a chair (relatively quickly) for 1 minute
- Hyperventilate for 45 seconds (see exercise described in the text)
- Breathe through a thin straw (e.g., a coffee stirrer or cocktail straw) for 1 to 2 minutes while holding nostrils closed
- Stare at a bright light for 1 minute and then read a short paragraph immediately after
- Stare at a single point on one's hand for 3 minutes

Ehrenreich-May, J., Kennedy, S. M., Sherman, J. A., Bilek, E. L., Buzzella, B. A., Bennett, S. M, & Barlow, D. H. (2018). *Unified Protocols for Transdiagnostic Treatment of Emotional Disorders in Children and Adolescents: Therapist Guide,* Oxford University Press.



Open Case Discussion

 How would you use some of these exercises with your own patients?

 How have you used similar approaches? What worked well? What were challenges?



Summary

- The Unified Protocols are well-study, flexible, and adaptive approaches to a wide range of emotional disorders
- Key ingredients focus on increasing emotional awareness and knowledge, and increasing emotional experiences by decreasing avoidance
- Additional training can be found at: http://www.unifiedprotocol.com/
 - One and three day workshops
 - Consultation and supervision
 - Online training
 - Clinician guides and workbooks (Treatments that Work series)



Questions?



References



- Allen, L. B., & Choate, M. L. (2004). Toward a unified treatment for emotional disorder. *Behavior Therapy*, 35(2), 205-230.
- Allen, L. B., McHugh, R. K., & Barlow, D. H. (2008). Emotional disorders: a unified protocol.
- Barlow, D. H., Farchione, T. J., Bullis, J. R., Gallagher, M. W., Murray-Latin, H., Sauer-Zavala, S., ... & Cassiello-Robbins, C. (2017). The unified protocol for transdiagnostic treatment of emotional disorders compared with diagnosis-specific protocols for anxiety disorders: A randomized clinical trial. *JAMA psychiatry*, 74(9), 875-884.
- Bentley, K. H., Boettcher, H., Bullis, J. R., Carl, J. R., Conklin, L. R., Sauer-Zavala, S., ... & Barlow, D. H. (2018). Development of a single-session, transdiagnostic preventive intervention for young adults at risk for emotional disorders. *Behavior modification*, 42(5), 781-805.
- Bullis, J. R., Boettcher, H., Sauer-Zavala, S., Farchione, T. J., & Barlow, D. H. (2019). What is an emotional disorder? A transdiagnostic mechanistic definition with implications for assessment, treatment, and prevention. *Clinical Psychology: Science and Practice*, 26(2), e12278.
- Cassiello-Robbins, C., Southward, M. W., Tirpak, J. W., & Sauer-Zavala, S. (2020). A systematic review of Unified Protocol applications with adult populations: Facilitating widespread dissemination via adaptability. *Clinical Psychology Review*, 78, 101852.
- De Paul, N. F., & Caver, K. A. (2021). A pilot study of a brief group adaptation of the Unified Protocol in integrated primary care. *Psychological Services*, *18*(3), 416.
- Hood, C. O., Southward, M. W., Bugher, C., & Sauer-Zavala, S. (2021). A preliminary evaluation of the unified protocol among trauma-exposed adults with and without PTSD. *International journal of environmental research and public health*, 18(21), 11729.
- Sauer-Zavala, S., Cassiello-Robbins, C., Ametaj, A. A., Wilner, J. G., & Pagan, D. (2019). Transdiagnostic treatment personalization: The feasibility of ordering unified protocol modules according to patient strengths and weaknesses. *Behavior modification*, 43(4), 518-543.
- Sauer-Zavala, S., Tirpak, J. W., Eustis, E. H., Woods, B. K., & Russell, K. (2021). Unified protocol for the transdiagnostic prevention of emotional disorders: Evaluation of a brief, online course for college freshmen. *Behavior Therapy*, *52*(1), 64-76.
- Sharifi, M., Mami, S., Mohammadzadeh, J., Ahmadi, V., & Kakabaraei, K. (2020). Evaluation of the effectiveness of unified protocol for the transdiagnostic treatment and emotion regulation intervention in patients with generalized anxiety disorder in a military hospital. *EBNESINA*, 22(3), 73-77.
- Varkovitzky, R. L., Sherrill, A. M., & Reger, G. M. (2018). Effectiveness of the unified protocol for transdiagnostic treatment of emotional disorders among veterans with posttraumatic stress disorder: A pilot study. *Behavior Modification*, 42(2), 210-230.