



FACT SHEET

COGNITIVE BEHAVIORAL THERAPY FOR VETERANS EXPERIENCING CHRONIC HOMELESSNESS

The VA is committed to providing Veterans experiencing chronic homelessness with the evidence based mental health services that they deserve

Poor mental health is a major public health problem for Veterans who experience chronic homelessness. According to the Department of Veterans Affairs (VA) Homeless Registry, approximately 68% of homeless Veterans who presented for services in 2013 had a mental health disorder. Mental health problems not only contribute to a poor quality of life, but also profoundly impact chronic homelessness.

The VHA's National Center on Homelessness among Veterans has developed a national initiative to disseminate and implement an evidence-based psychotherapy for the treatment of depression and related problems specifically for Veterans who experience chronic homelessness.

In collaboration with the Aaron T. Beck Psychopathology Research Center of the University of Pennsylvania, a national staff training program in Cognitive Behavioral Therapy (CBT) has been initiated. The overall goal of the CBT Training Program is to provide competency-based training to VA social workers and other mental health professionals who work with Veterans experiencing chronic homelessness in medical center homeless programs. These programs work with Veterans to get them housing and to provide services to sustain their permanency in the community. The CBT Training Program includes an experientially based workshop training followed by ongoing, weekly consultation with an expert in CBT. The training focuses on both the theory and application of CBT for the treatment of depression and related problems. The primary aim of this initiative is to improve the quality of mental health care that is offered to Veterans experiencing chronic homelessness and, ultimately, to improve clinical symptoms and decrease homelessness.

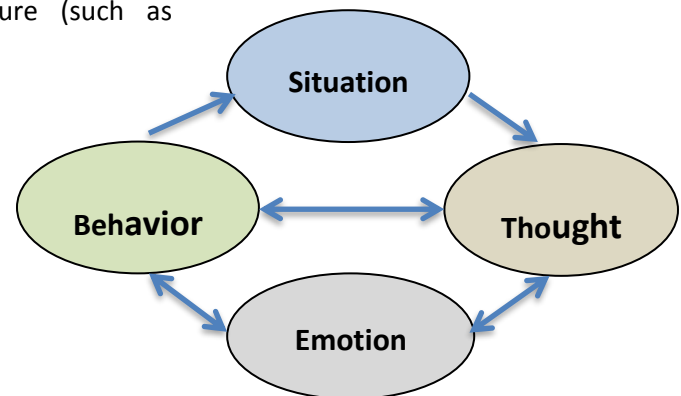
What is Cognitive Behavioral Therapy?

Cognitive Behavioral Therapy (CBT) is a structured, skill-based psychotherapy for depression and related problems. Specifically, CBT:

- Incorporates motivational enhancement strategies to promote engagement in therapy
- Emphasizes a collaborative relationship between therapist and Veteran
- Targets extreme or maladaptive thinking and behaviors by implementing specific cognitive and behavioral strategies in an integrated fashion, based on an individualized case conceptualization
- Focuses on reducing depressive symptoms, achieving mutually established treatment goals, and improving quality of life, including housing retention

What is the Cognitive Behavioral Model?

CBT is based on the cognitive behavioral model stating that negative mood (such as sadness, anxiety, and irritability) is a function of our thoughts and behaviors. For example, individuals with depression usually have three types of negative beliefs involving oneself (such as worthlessness), others (such as dangerousness), and/or the future (such as hopelessness). Understanding these components helps the therapist to develop and use an individualized case conceptualization approach to address the Veteran's unique problems using specific CBT skills. In essence, the therapist formulates a case conceptualization as a roadmap to be used to guide treatment. It determines how a Veteran's beliefs and assumptions impact his or her thoughts, feelings, and behaviors on a day-to-day basis, thus maintaining the clinical symptoms.



Why CBT for Veterans with Chronic Homelessness?

CBT is an ideal treatment option for Veterans experiencing chronic homelessness (Maguire, 2006). Given the short-term, goal-oriented focus of CBT, the treatment targets present day problems that Veterans experience and that can interfere with Veterans' ability to maintain housing.

Treatment typically consists of 12-16 weekly or bi-weekly, individual sessions but the length of treatment is flexible in order to meet the needs of newly housed Veterans. The individualized CBT case conceptualization of a Veteran's problems is developed during the initial phase of treatment and used to guide the selection of the specific cognitive and behavioral strategies that would be the most beneficial for the Veteran. Therapists regularly evaluate a Veteran's progress by reviewing patterns in his or her self-reported depressive symptoms and sharing this information with the Veteran.

How effective is CBT?

CBT is recommended by the VA/DoD Clinical Practice Guideline for the Management of Major Depressive Disorder

- Decades of research, including a number of randomized controlled trials, have shown support for the short-term as well as the long-term efficacy of CBT for depression (DeRubeis et al., 1999; DeRubeis et al., 2005; DeRubeis et al., 2008; Elkin et al., 1989; Hollon et al., 2006).
- CBT has also been shown to be as effective as antidepressant medications for depression (DeRubeis et al., 2005).
- CBT is associated with significant engagement and reductions in symptoms of depression, as well as improved quality of life for Veterans (Karlin et al., 2012).
- CBT has been shown to be effective for alcohol and illicit drug use (Magill & Ray, 2009).

CBT Teaches Veterans Skills

The CBT therapist encourages increased involvement in goal setting and skills practice as treatment progresses so that the Veteran masters these skills and continues using them to address future difficulties that emerge once treatment has ended. CBT is consistent with the **Recovery Model** that emphasizes self-efficacy, collaboration and skill-building.

CBT is focused on helping Veterans to understand, identify, and respond to their thoughts, beliefs or behaviors. CBT sessions are also structured to ensure that:

- The most important issues are discussed during the session
- The therapist understands and empathizes with the Veteran's concerns
- Feedback is obtained regarding the helpfulness of the treatment
- Practice assignments are developed to integrate learned skills in the Veteran's life

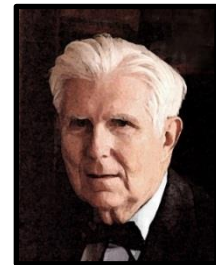
The types of skills selected for helping Veterans resolve their mental health problems may be cognitively or behaviorally focused depending on the Veteran's specific circumstances.

Cognitive strategies are used to help teach Veterans to identify negative automatic thoughts that are associated with negative mood states and develop alternative responses to such thoughts that are more accurate or helpful, with the goal of improving mood. In addition, these strategies address motivation to follow through on recovery and housing goals and obstacles that impede progress.

Behavioral strategies are used to help teach Veterans to identify and schedule specific activities that are aimed to increase pleasure and sense of accomplishment. Behavioral strategies are also employed to help Veterans manage urges and cravings to use substances.

The VA CBT Training Program Description and Effectiveness

The CBT Training Program is under the direction of senior faculty at the University of Pennsylvania including Dr. Gregory K. Brown and Dr. Aaron T. Beck, the founder of CBT. The program involves training social workers and other mental health therapists in 14 Housing First and HUD-VASH programs across the country. Mental health therapists are provided CBT training that targets depression and related problems for Veterans experiencing chronic homelessness.



Aaron T. Beck, MD

Features of the CBT Training Program include:

- A 6-hour web-based didactic course that involves didactic presentations and video demonstrations of CBT skills.
- An Experiential and Independent Study component that involves participatory role plays to practice CBT skills and homework assignments to become familiar with the manual.
- Follow-up training that includes weekly, small-group conference calls over a 4-month period with an expert in CBT who provides clinical case consultation on the implementation of CBT with those Veterans who are being served by each therapist.
- This intensive training ensures that each therapist feels confident and competent to deliver this evidence-based psychotherapy to Veterans who struggle with chronic homelessness
- Additional features of the program include a comprehensive program evaluation component to assess the effectiveness of the training on therapists' CBT skills as well as on patient outcomes

Since its inception in 2013, this initiative has trained 86 clinicians at medical center homeless programs across the country. So far, initial program evaluation data suggests that approximately 83% of trained clinicians have reached competency in CBT and successfully completed the training program. In addition, the depressive symptoms among Veterans who were seen by therapists during the CBT training program significantly improved over the course of treatment and housing stability was maintained.

More Information

For additional information about the VA CBT Training Program, contact Roger Casey, PhD, LCSW, Director of Education and Dissemination for the VA National Center on Homelessness among Veterans. Email Dr. Casey at roger.casey@va.gov.

The VA National Center on Homelessness among Veterans does not provide direct services to Veterans.

For emergency assistance, call the National Homeless Veteran Hotline 1-877-424-3838.

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