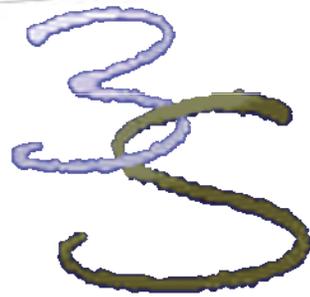


# Spiritual Self Schema Therapy



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

Principal Investigators:  
S. Kelly Avants, Ph.D.  
and Arthur Margolin, Ph.D.

# 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 as Asset (con't)

- **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).**

# The Self-Schema

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

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graph TD; A[High Risk Situation] --> B[Self-Schema Activation]; B --> C[Addict Self-Schema]; B --> D[Spiritual Self-Schema]; C --> E[High Risk Behavior]; D --> F[HIV Preventive Behavior];
```

Self-Schema Activation

*Addict Self-Schema*

VS

*Spiritual Self-Schema*

High Risk Behavior

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

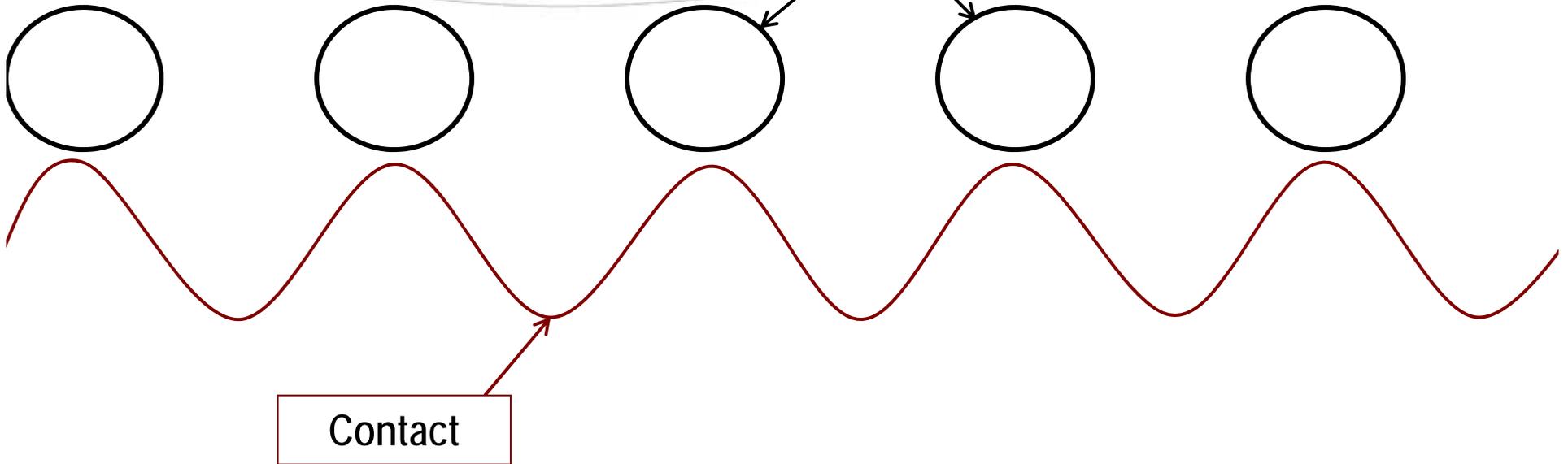
Smells → Nose → Consciousness smelling

Touches → Body → Consciousness touching

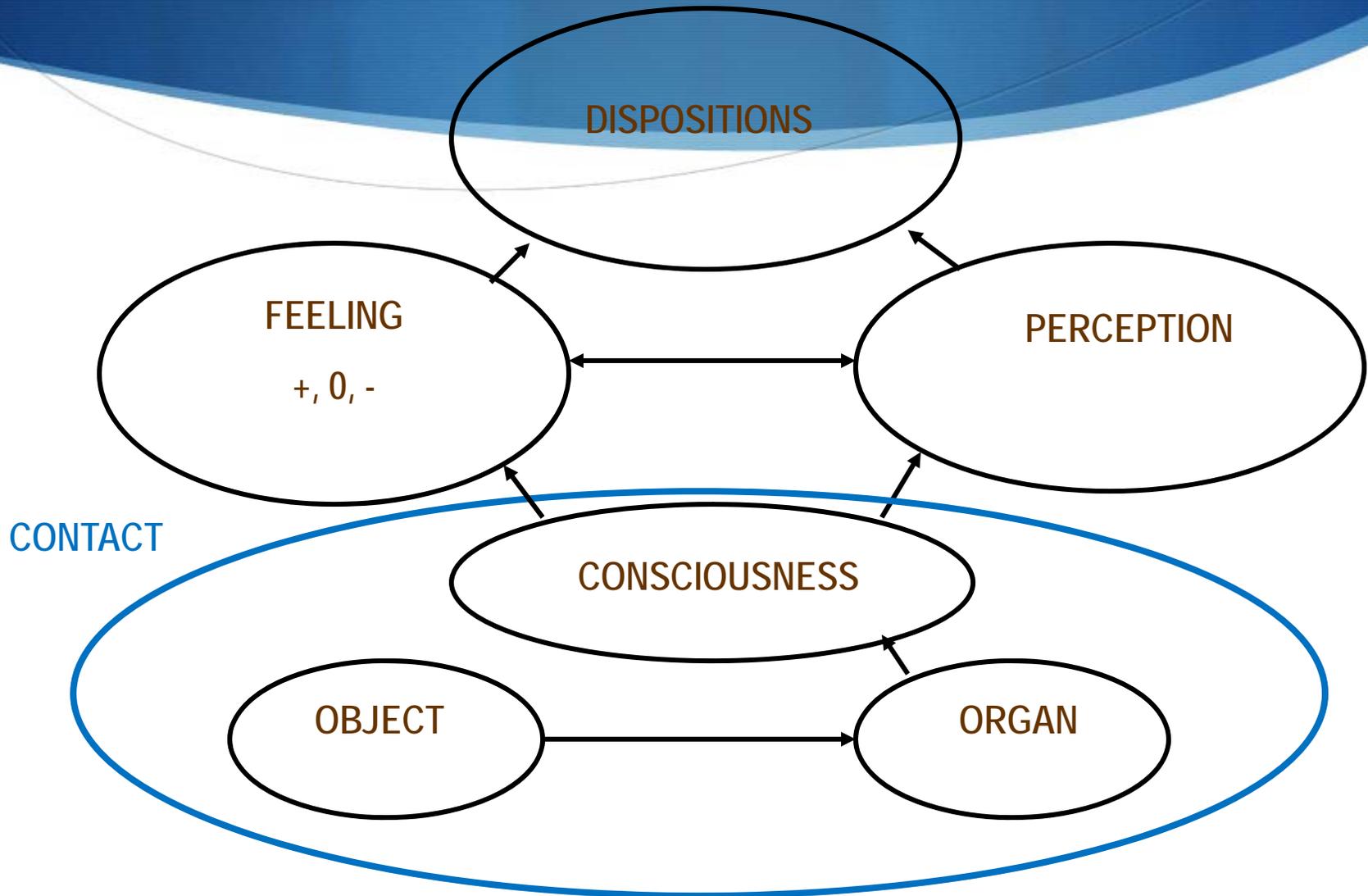
Thoughts → Mind → Consciousness thinking

# A “stream of consciousness...”

Mind Moments



# Mind

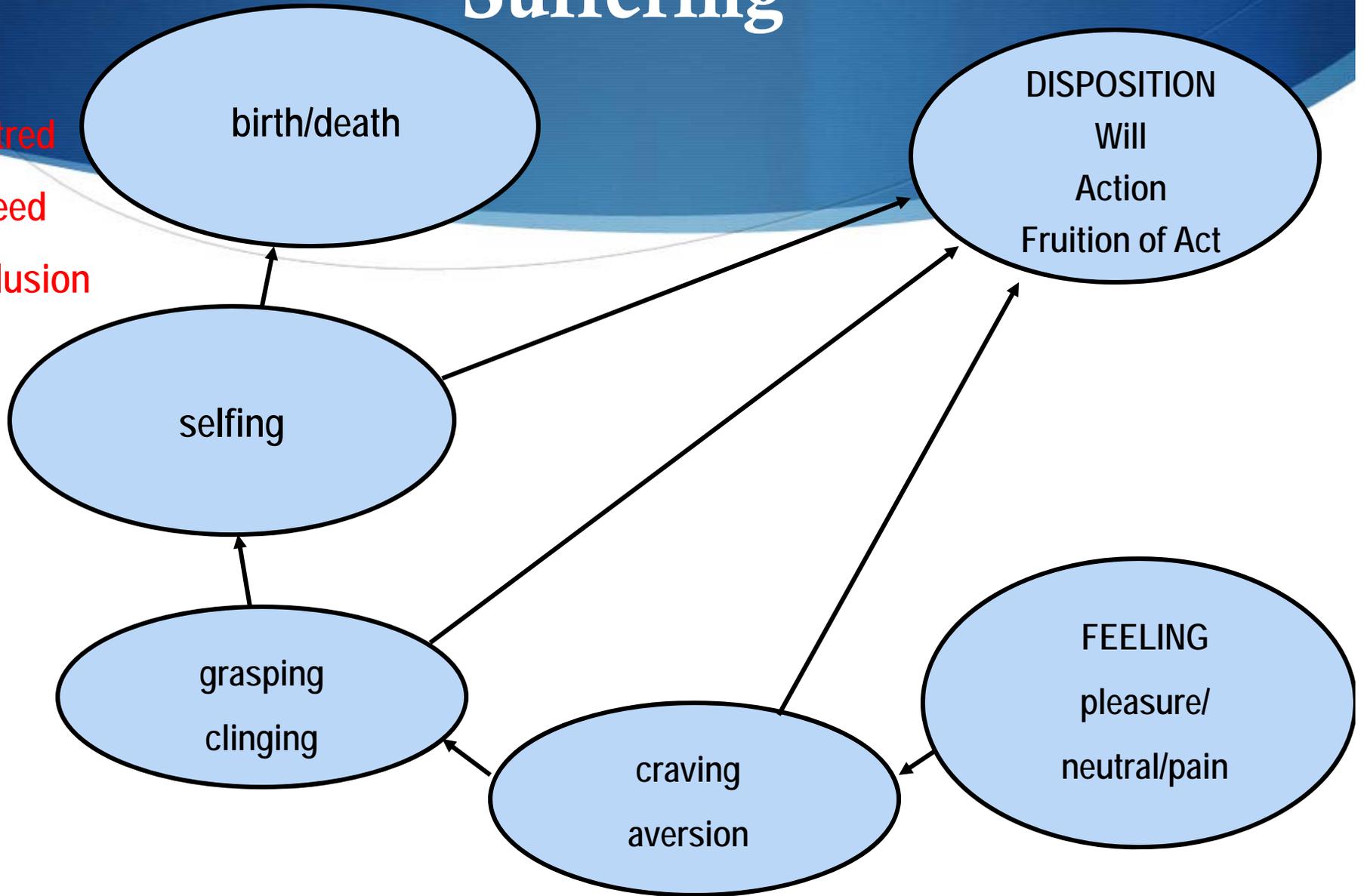


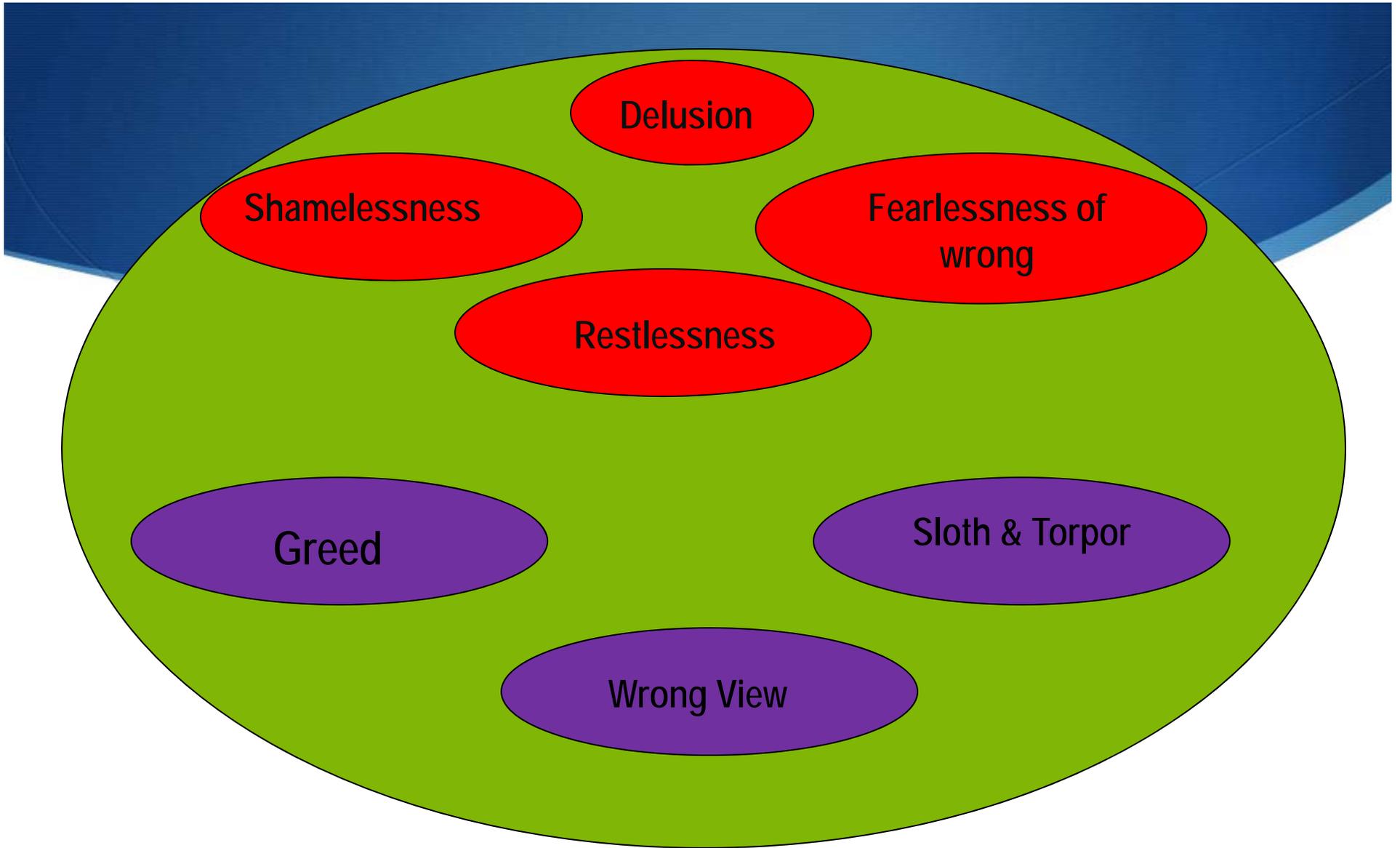
# Suffering

Hatred

Greed

Delusion





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

- **Mastery of the Mind** --

Right effort, mindfulness,  
and concentration

- **Morality** --

Right speech, action, and livelihood

- **Wisdom** --

Right view and right thinking



[www.3-S.us](http://www.3-S.us)

- 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

# Session 2 --Training in Mastery of the Mind #1 'Becoming Aware'

Clients develop ...

- Right Effort - necessary to train the wandering 'monkey' mind
- Right Mindfulness – awareness of addict self-schema activation
- Right Concentration -- meditation

# Demonstration

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  
and livelihood associated with  
the addict self
- protect themselves and others from  
drug-related harms (e.g., HIV)

## IV: Segment 3 – Experiential Component “Spiritual Work-Out”

**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

# Session 7 --Training in Morality #3 'Stopping the Spread of HIV'

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.

## Session 8--Training in Wisdom #1 'Filling the Mind with the Spiritual Self'

**Clients strengthen the spiritual self ...**

- Create a blueprint for their spiritual path.
- Create a daily plan for activating their Spiritual self throughout the day.

# Session 9--Training in Wisdom #2 'Coping with Stigma'

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.

# Session 10 --Training in Wisdom #3 'Renouncing the Addict Self'

**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 11 --Training in Wisdom #4 'Serenity and Insight'

## 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

# Session 12: Transition to Community Resources

Maintaining the Spiritual Self-Schema by...

Taking refuge in

- a teacher
- the teachings
- the community