

## SPU Internal Grant Interim Report

**Date:** July 28, 2015

**Faculty Research Grant (FRG):** 2014-2015 year, with extension granted for 2015-2016

**Principal Investigator:** Thane Erickson, Ph.D., Associate Professor of Clinical Psychology

**Original Title of Proposal:** Transdiagnostic Cognitive Behavioral Group Therapy With and Without Explicit Focus on Positive Emotions and Character Strengths: A Randomized Trial

### **Project Goals and Activities:**

The purpose of this project is to test the efficacy of the Unified Protocol for treatment of emotional disorders (Allen, McHugh, & Barlow, 2008; Barlow, Allen, & Choate, 2004), an individual cognitive behavioral therapy for anxiety and depression, in a group therapy format. Additionally, given that the treatment has primarily targeted reduction of negative emotions and it remains unclear whether it also increases positive emotions and strengths related to well-being (Ellard et al., 2010), our goal is to test this treatment against a modified version that explicitly targets these positive outcomes, examining changes in symptoms and strengths in both versions of the treatment. In the past year, we have formed relationships with multiple clinics and referral sources in order to recruit potential participants into the study. As a result of advertisement, networking, and other recruitment efforts, a total of 31 individuals participated in phone-screen assessments to determine eligibility for more thorough baseline assessments. Of those 31, 15 eligible individuals completed in-depth baseline assessments involving a battery of self-report measures, daily experience-sampling, a full clinical diagnostic structured interview, and computer tasks to assess cognitive processes related to anxiety. In the past year, we started two treatment groups for individuals meeting diagnostic and eligibility criteria ( $N = 6$  and  $N = 7$ ). The first group mutually agreed to terminate prematurely due to low attendance by several lower-functioning group members. The second group completed the full 12-week program successfully and completed post-test assessments similar to baseline assessments.

### **Major Findings:**

Participants in both treatment groups provided qualitative information suggesting that they found the treatment feasible, accessible, and helpful in terms of providing strategies for reducing negative emotions. The results of the structured diagnostic interviews suggest substantial decreases in number of diagnoses and clinician-rated severity in the treatment completers. However, we have not yet analyzed the data quantitatively (to be completed once we have a larger sample size).

### **Plans for Dissemination & Future Scholarly Works:**

Once an adequate number of participants have completed the program to permit data analysis (e.g.,  $N = 30$ ), I plan to disseminate the results in papers and/or poster presentations at national conferences in the guild of clinical psychology (e.g., Association for Behavioral and Cognitive Therapies) and/or psychiatry (Anxiety and Depression Association of America). The ultimate goal is to produce a minimum of two manuscripts for publication in top-tier clinical psychology journals. One paper will report on baseline moral emotions and virtues and their contribution to baseline distress and the mixed anxious-depressed sample. A second paper will report the effects of the group therapy trial in terms of changes on standard symptom measures, novel positive psychological constructs and implicit measures. Students will conduct secondary analyses for student-led manuscripts as well.

**Problems Related to Research Process:** Ongoing recruitment efforts attest to the challenges of identifying eligible individuals who are able to participate appropriately (e.g., with severe enough diagnoses to warrant

treatment but functional enough to participate in a regular group). Although we were able to attract and screen a total number of individuals commensurate with our target goal, our progress in converting screens into eligible group participants has been notably lower than expected. We have learned from these challenges and are adjusting recruitment methods and expectations accordingly. We hope to recruit 15 more participants in the coming year, which will provide a large enough sample to analyze baseline data, and enough data for pilot analyses of treatment efficacy. We plan to continue the study on an ongoing basis to increase sample size, provide a free treatment resource to the community, and provide clinical training to students.

**Student Participation:** Six clinical psychology graduate students (Gina Scarsella, Adam McGuire, Tara McNeil, Jamie Lewis, Oxana Kramarevsky, and Jamie Tingey) have participated in the study thus far, taking on key roles in networking with clinic/referral sources, conducting phone screens, conducting diagnostic interviews, managing data, and co-facilitating the therapy group. Student assessment and co-facilitation of treatment groups has provided rich clinical training experiences for students; for some of the students, this was their first “real” clinical experience (several reported that the experience equipped them for their first off-site practicum placement). Three undergraduate psychology students (Melissa Aust, Derek Vajda, and Rachael Welch) participated in recruitment efforts, discussion of diagnostic/treatment issues, and managing participant compliance. Each student reported that the experience opened their eyes to the complexity and meaningfulness of serving hurting individuals via assessment and evidence-based treatment; one undergraduate student reported changing career goals to become a clinical psychologist on the basis of the research experience.