



Treatment manuals for CBT for children and young people with psychosis or schizophrenia

Implementation support

Published: 23 January 2013

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Recommendation 1.3.29 of the [NICE guideline on psychosis and schizophrenia in children and young people: recognition and management](#) refers to treatment manuals for cognitive behavioural therapy (CBT). The manuals that support the guideline recommendations are listed. You can ask your information or library support service to help you to find them.

Systematic Treatment of Persistent Psychosis

Systematic Treatment of Persistent Psychosis (STOPP), targets enduring positive symptoms and related service user needs.

Studies that used the manual

Edwards 2012

Manual reference

Hermann-Doig T, Maude D, Edwards J (2003) Systematic Treatment of Persistent Psychosis (STOPP): a psychological approach to facilitating recovery in young people with first-episode psychosis. Martin Dunitz: London.

Case management manual for treatment as usual at the Early Psychosis Prevention and Intervention Centre (EPPIC)

Studies that used the manual

Gleeson 2009

Manual reference

Early Psychosis Prevention and Intervention Centre (2001) Case management in early psychosis: a handbook. EPPIC: Parkville, Australia.

Individual therapy intervention using a CBT framework informed by previous psychotherapy trials conducted at the EPPIC and by the collaborative therapy framework developed at the Mental Health Research Institute, Australia.

Individual therapy comprises 5 phases:

- engaging the service user and assessing their extent of recovery and individual risk for relapse
- agreement on formulation and agenda for therapy with the service user
- increasing awareness for the risk of setbacks and how to minimise them
- identifying potential early warning signs of relapse and developing a relapse plan
- optional modules based on collaborative formulation and the therapy agenda.

Study that used the approach in this manual

Gleeson 2009

Manual references

- Edwards J, Hinton M, Elkins K et al. (2003) Cannabis abuse and first-episode psychosis. In Graham HL, Copello A, Birchwood M et al. editors. Substance misuse in psychosis: approaches to treatment and service delivery. Chichester: Wiley. 283-304
- Jackson H, McGorry P, Henry L et al. (2001) Cognitively orientated psychotherapy for early psychosis (COPE): a 1-year follow-up. *British Journal of Clinical Psychology* 40: 57-70
- Gilbert M, Miller K, Berk L et al. (2003) Scope for psychosocial treatments in psychosis: an overview of collaborative therapy. *Australian Psychiatry* 11:220-4

Active cognitive therapy for early psychosis

Includes assessment of the presenting psychotic and non-psychotic complaints, formulation of the relationship between these complaints, the service user's history, prioritisation of problems, treatment from a broadly cognitive-behavioural perspective and on-going engagement with a flexible approach to timing, location and content of therapy.

Study that used the manual

Jackson 2008

Manual reference

- Bendall S, Killackey E, Marois MJ et al. (2005). ACE
- manual (active cognitive therapy for early psychosis).
- Melbourne: ORYGEN Research Centre and Department of Psychology, University of Melbourne.

Cognitive therapy approach

The intervention arose from an individual formulation, which was translated into an 'individual recovery plan'. The approach has 3 key components:

- engagement and formulation
- trauma processing
- appraisals of psychotic illness.

Study that used the manual

Jackson 2009

Manual reference

Jackson C, Iqbal Z (2000) Psychological adjustment to early psychosis. In: Birchwood M, Fowler D, Jackson C, editors. Early intervention in psychosis. London: Wiley. 64-100

Back in the saddle

Relapse prevention

Study that used the manual

Jackson 2009

Manual reference

Plaistow J, Birchwood M. (1996) Back in the saddle: a guide to relapse prevention. Unpublished Manual. Birmingham Early Intervention Service.

Psychosocial and behavioral family management approach

The service user is taught about their illness, makes an inventory of symptoms and signs of his/her own illness (aimed to prevent relapse), receives medication management training and lists external and internal stress sources (labelled 'risk factors for relapse'). Behavioural family management consisted of 3 main components:

- psychoeducation
- communication training
- the development of problem-solving skills.

Study that used the manual

Linzen 1996

Manual reference

Falloon IRH, Boyd J & McGill C. (1984) Family care of schizophrenia. New York: Guildford Press

LifeSPAN therapy

Draws on the cognitive orientated therapy for early psychosis (COPE) and suicide prevention manuals such as 'Choosing to live' and 'Cognitive therapy of suicide behaviour: a manual for treatment'. LifeSPAN therapy has 4 phases:

- initial engagement
- suicide risk assessment/formulation
- cognitive modules
- final closure/handover.

Study that used the manuals

Power 2003

Manual references

- Jackson H, Edwards J, Hulbert C et al. (1998) Cognitively-oriented psychotherapy for early psychosis (COPE): preliminary results. *British Journal of Psychiatry* 172: 93–100.
- Ellis TE & Newman CF (1996) *Choosing to live*. Oakland: New Harbinger
- Freeman A, Reinecke MA (1993) *Cognitive therapy of suicide behaviour: a manual for treatment*. New York: Springer

Early detection and cognitive therapy for people at high risk of developing psychosis

Cognitive therapy follows the principles developed by Beck (1976). It is problem orientated, time limited and educational; encouraging collaborative empiricism, and using guided discovery and homework tasks. It is based on the cognitive model most appropriate to the disorder prioritised (for example, transient or attenuated psychotic symptoms, anxiety disorder, depression). A case series with high-risk patients is described in French et al. (2003).

Studies that used the manual

- Addington 2011
- Morrison 2004
- Morrison 2011
- Vandergaag 2012

Manual reference

- French P, Morrison AP (2004) *Early detection and cognitive therapy for people at high risk of developing psychosis*. London: Wiley
- French P, Morrison AP, Walford L et al. (2003) Cognitive therapy for preventing transition to psychosis in high risk individuals: a case series. *Behavioural and Cognitive Psychotherapy* 31:, 53–68

Integrated psychological therapy manual

The underlying strategies pertain to improving coping resources and stress management, based on a specific cognitive model of early initial prodromal states. Integrated psychological therapy includes:

- treatment components drawn from established strategies for first episode or recurrent schizophrenia, anxiety and depressive disorders
- individual cognitive-behavioural therapy following the basic principles developed by Beck (1976)
- skills training
- cognitive remediation
- psychoeducational multifamily groups.

Study that used the manual

Bechdolf 2011

Manual references

- Hefner HBA (2011) Early detection and intervention in psychosis. A practise handbook. Schattauer.
- Bechdolf A, Puetzfeld V, Gross S et al. (2010). Cognitive behavioural therapy in people at risk of psychosis. Huber.

Cognitive behaviour therapy manual developed by study authors (McGorry)

Aims to develop patient understanding of the symptoms they experience, to learn strategies to enhance control of these symptoms, and to reduce associated distress. The following modules are offered:

- stress management
- depression/negative symptoms
- positive symptoms
- other comorbidities.

Study that used the manual

McGorry 2002

Manual reference

Garety PA, Fowler D, Kuipers E (2000) Cognitive-behavioral therapy for medication-resistant symptoms. *Schizophrenia Bulletin* 26: 73–86

Personal assessment and crisis evaluation cognitive therapy

Personal assessment and crisis evaluation cognitive therapy (PACE CogThr) draws strongly from the vulnerability-stress model of psychosis and emphasises the development of strategies to cope with pre-psychotic symptomology and life stressors. The treatment targets unique concerns, experiences and skills of each individual and relates to a case formulation that is developed collaboratively, at the start of treatment, between the psychologist and the patient.

Study that used the manual

Phillips 2009

Manual reference

- Yung AR, Phillips LJ, McGorry PD (2004) *Treating schizophrenia in the prodromal phase*. London: Taylor and Francis
- Phillips LJ, Francey SM (2004) Changing PACE: psychological interventions in the pre-psychotic phase. In: McGorry P, Gleeson J, editors. *Psychological interventions in early psychosis: a practical treatment handbook*. Chichester: John Wiley and Sons: p23–40.

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