



FIGURE 8.1 Timeline for Working with Distressing Thoughts/Delusions

Mark's timeline starts to demonstrate a vulnerability to possible abandonment in key relationships and also a compensatory striving for success in academics, sports, and work. With the help of the timeline, both Mark and the therapist now understand both the content and the function of the delusion better.

Distressing Thoughts or Delusions Timelines

The purpose of creating a timeline with clients with high-conviction delusions is to assist in developing the overall conceptualization and to identify core beliefs. (Recall that core beliefs or schemas are theorized to be formed between the ages of five and eleven.) This technique also allows for exploration of factors that may have influenced the development and maintenance of psychotic symptoms. Information gathered in the timeline may also be helpful in educating your clients about models of stress and coping and provides an excellent opportunity for normalizing. As with all aspects of CBT, this should be a collaborative exploration between the clinician and clients.

DIRECTIONS:

1. Explore with your clients what was going on in their lives approximately three months prior to the first psychotic experience. Identify emotions, automatic thoughts, stressors, and strengths.
2. Using inductive questioning, create age ranges for specific periods of your clients' lives. Again, collect further information about automatic thoughts, key emotions, stressors, protective factors, and achievements.
 - Creating time periods based on school-related years can anchor your clients' recollections. For example, this might include ages zero to four (prior to school), five to eleven (elementary school), twelve to thirteen (middle school), and fourteen to seventeen (high school).
 - For each age range, ask these questions: What was happening during that time of your life? What was it like at home? What were your key relationships? Note that it is important to access both positive and negative aspects of the client history.
 - Ask about your clients' transition into elementary school: What was your first school like for you? How did you get along with others? Who were your friends in elementary school? Note that this is a period of time where children frequently experience bullying, which has been tied to negative outcomes later.
 - Also keep in mind that middle school, developmentally, is a time when individuals may experience closer or romantic relationships. It's also a time when drug and/or alcohol use may start. Remember to continue to evaluate for both positive and negative experiences.
3. As you collect information for each time span and enter it on the timeline, write the positives (strengths) you and your clients identify on the top of the timeline in chronological order. Also

note the vulnerabilities for elementary school, middle school, and for high school under the line (using a different color for each time period). Finally, in the twelve months prior to the development of symptoms, record stressors identified. Do this in a third color, also under the line.

Compassion-Focused Approaches

Compassion-focused approaches are most effective when working with delusions associated with critical auditory hallucinations, which are in turn linked to shame and an underlying schema of self-blame. Such exercises are also pertinent in persecutory delusions where, in the face of constant perceived threat and hypervigilance, they promote self-soothing. They are viable in the face of the delusional system with a negative underlying core belief such as “I am a bad or unlovable person.” Compassionate self-statements can be reinforced by compassionate imagery, compassionate letter writing to the self, or a compassion box containing items that nurture the self, such as key photographs, poems, music, and so on. (See chapter 6 for more compassion-focused strategies, as well as form 6.5.)

Between-Session Practice

As noted above, sessions in the negative symptoms and getting active module (see chapter 7) are structured with the problem solving, processing, and planning of between-session practice as an explicit focus. Your between-session practice plan for the week will flow naturally from this discussion.

Feedback from Client on the Session

Ask your clients for constructive feedback on the session, including how it felt to talk about distressing thoughts or delusions. Address affect that may have been activated by discussion of these thoughts and beliefs, and honor the meaning and role these have played in your clients’ experience of self and others. Finish sessions with feedback to the client about the courage and strength it takes to share these thoughts and experiences. As always, reinforce your clients’ strengths, efforts in session, and movement toward their values and goals.

Summary of Session

Summarize the session for your clients and provide them with a written copy of this material (see form 5.1). Be sure to reinforce your clients’ openness to challenges, their efforts, strengths, and accomplishments in writing, both on the session summary form (5.1) and the strengths form (4.3).