

# ***Self-Empowerment*** from a Cognitive Science Perspective

2024 SMART Recovery Convention

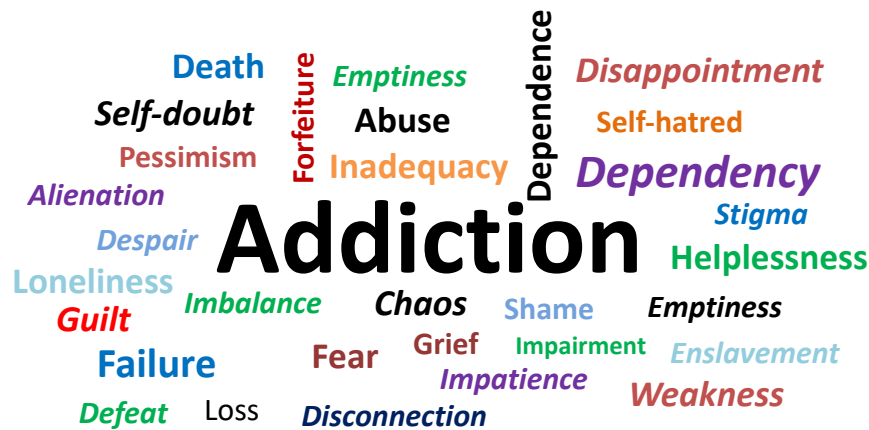
Salt Lake City, Utah

*Saturday, April 6*

Bruce S. Liese, PhD, ABPP  
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Clinical Director, Cofrin Logan Center for Addiction Research and Treatment  
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## Addictions in the early 90s...

- Cocaine epidemic (crack) “*Greatest threat to the United States*”
- Patients labeled “drug addicts” and “alcoholics” (stigmatized)
- Stereotypes were everywhere; addiction was attributed to or associated with race, religion, social class, appearance, etc.
- DSM-IV (published January 1, 1994) – diagnoses were *Substance* abuse and dependence (dichotomous, included legal problems)
- Each addiction (e.g., alcohol, nicotine, cocaine, heroin) was considered unique, different, and often stereotyped
- The aims of treatment were abstinence and relapse prevention...
- ...not ***self-empowerment***



## Addictions today: Good news, bad news

- **Bad news**: Opioid epidemic; alcohol and nicotine use continue to cause high morbidity and mortality rates; cannabis increasingly accessible
- **Good news**: Stereotypes fading; awareness of stigma (words & actions)
- DSM-5 – craving added, legal problems removed, behavioral addiction recognized, diagnoses on a continuous scale (mild, moderate, severe)
- People with addictions need to determine their own goals
- Recognition of common mechanisms (especially cognitive *processes*) and consequences of use, highlighting relevance of **Cognitive Science**
- We realize there's more than preventing relapse: there's potential in recovery for personal growth, balance, thriving; i.e., **Self-Empowerment**



**Discover the Power of Choice**



**SMART Recovery**

Welcome to SMART Recovery®, a science-based addiction support group where we learn self-empowering skills and support each other in our recovery.

No matter what your addiction, SMART Recovery can help you change.

**How does SMART Recovery work?**

SMART Recovery uses tools based on scientifically tested methods for addiction recovery, such as Cognitive Behavioral Therapy, Rational Emotive Behavior Therapy, and Motivational Interviewing.

**Join us online**

The core activity of SMART Recovery is the network of self-help / mutual-aid support meetings; we are also a 'community of recovery' which provides mutual support outside of the meetings themselves. This includes our free on-line community which you can access at [www.smartrecovery.org](http://www.smartrecovery.org).

**SMART meetings**

SMART Recovery conducts free (donations accepted) face-to-face meetings around the world, and also online. Click the 'Meetings' link at [www.smartrecovery.org](http://www.smartrecovery.org).

**What makes SMART Recovery different?**

SMART Recovery advocates choice, so that those seeking recovery can choose what works best for them from a 'tool-box' of methods and strategies.

The goal of SMART Recovery is for you to achieve a healthy, positive and balanced lifestyle and to 'move on' when you feel confident your addictive behavior is behind you, rather than remaining a permanent participant in the program. Graduates are invited to volunteer as meeting facilitators or to volunteer in other roles to help 'give back' to our recovery community.

**SMART Recovery 4-Point Program®**

1. Building and maintaining motivation
2. Coping with urges
3. Managing thoughts, feelings and behaviors
4. Living a balanced life

**Example of tools**

Here are a few of the many SMART Recovery tools that can help you in your recovery journey:

**Change Plan Worksheets:** This is a chart on which you list your goals, how you will attain them, ways in which you will overcome obstacles and challenges, etc.

**Cost/Benefit Analysis (CBA):** This tool is especially useful for increasing your motivation to abstain from your addictive behavior.

**The ABC's of REBT:** Unhelpful beliefs often lead to poor choices and negative consequences. This tool from Rational Emotive Behavior Therapy helps identify unhelpful beliefs and change them to support making healthier choices.

**DISARM (Destructive Imagery & Self-talk Awareness & Refusal Method):** This tool exposes the thoughts and images, which urge us to pursue our addiction, as inaccuracies, excuses and rationalizations.

**Brainstorming:** This technique is often used in face-to-face and online meetings. A participant introduces a question or problem, other participants then offer ideas and/or suggestions with no judgment involved.

**Role-Playing/Rehearsing:** This tool is used mostly in groups. An example would be rehearsing how to avoid addictive behavior at a high-risk upcoming event.

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**What is SMART Recovery?**

SMART Recovery is an evidence-based program that was formed nationally around 25 or 30 years ago, according to Liese, who is clinical director of the University of Kansas' Cofrin Logan Center for Addiction Research and Treatment. He helped start a SMART Recovery chapter in Douglas County in 2018 with funding from the Cofrin Logan Center.

Between October of 2018 and March of 2020, the Douglas County program served over 230 people and grew to include seven meetings a week, which were available for free for members of the community struggling with addictive behaviors.




photo by: Life Span Institute at the University of Kansas

An in-person SMART Recovery session occurs in 2019, led by Bruce Liese, at center. Liese is the clinical director of the University of Kansas' Cofrin Logan Center for Addiction Research and Treatment and professor of family medicine and psychiatry at the University of Kansas Medical Center.

SMART Recovery focuses on four things: developing and maintaining the motivation to change, coping with urges and cravings, managing thoughts, feelings and behaviors and living a balanced life.

# FREE

## addiction recovery sessions at your library

**Sensible tools for addiction recovery.**  
SMART Recovery Weekly Group Sessions  
(Self Management and Recovery Training)

**WEDNESDAYS | 5-6:30 PM | Meeting Room B**  
**Lawrence Public Library | 707 Vermont | Lawrence, KS**

*Offered in partnership with University of Kansas Cofrin  
Logan Center for Addiction Research and Treatment*


**LAWRENCE PUBLIC  
LIBRARY**  
707 Vermont | Lawrence, KS 66044 | 785-843-3833

**lplks.org**

**SMART Recovery®**  
Self-Management and Recovery Training  
**smartrecovery.org**


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**ELSEVIER**

## Journal of Substance Abuse Treatment

journal homepage: [www.elsevier.com/locate/jSAT](http://www.elsevier.com/locate/jSAT)



### Providing addiction services during a pandemic: Lessons learned from COVID-19

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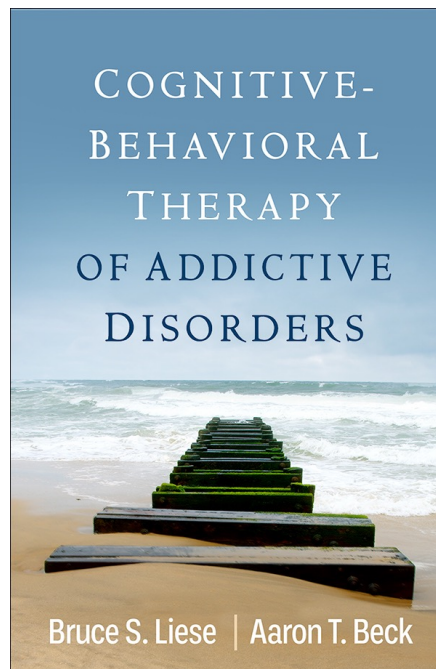
#### ARTICLE INFO

**Keywords:**  
COVID-19 pandemic  
Mutual help groups  
SMART recovery  
Telehealth  
Telephone hotline  
Safety-net program

#### ABSTRACT

During the COVID-19 pandemic, social distancing measures have made in-person mutual help groups inaccessible to many individuals struggling with substance use disorders (SUDs). Prior to the pandemic, stakeholders in our community had sponsored a program to train volunteers to facilitate local Self-Management and Recovery Training (SMART Recovery) groups. As a result, the community established seven weekly SMART Recovery groups, which more than 200 community members attended. In March 2020, the community discontinued these groups due to the COVID-19 pandemic. To provide SMART Recovery during social distancing, we developed a one-on-one phone-in service for people with SUDs and addictions: the SMART Recovery Line (SMARTline). In this paper, we share our experience training volunteers to facilitate SMART Recovery groups and SMARTline. As a result of our experience, we have learned to: (1) establish plans in advance to migrate services from face-to-face settings to remote platforms; (2) consider remote platforms that are easily accessible to the greatest number of individuals; (3) include as many stakeholders in the planning process as possible; (4) consider recruiting volunteers to help in the provision of services, especially since many people want to help fellow community members during crises; and (5) anticipate and prepare for crises well before they occur.

2022



Liese & Beck (2022). *Cognitive-Behavioral Therapy for Addictive Disorders*. NY: Guilford Press.

## What is CBT?

*Or more accurately, what are the CBTs?*

CBT is not a single approach to therapy;

CBT is comprised of many brands with more similarities than differences

- Cognitive Therapy (CT)
- Rational Emotive Behavior Therapy (REBT)
- Acceptance and Commitment Therapy (ACT)
- Behavioral Activation (BA)
- Dialectical Behavior Therapy (DBT)
- Cognitive Processing Therapy (CPT)
- Contingency Management (CM)
- Mindfulness-Based Cognitive Therapy (MBCT)
- Exposure and Response Prevention (ERP)

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## SMART Meeting Content and Process

### Content

**What** is to be discussed for the purpose of **self-empowering** goal-directed personal change

### Process

**How** goal-directed personal change  
is facilitated in sessions  
(i.e., individual and group dynamics)

## SMART Meeting Content and Process

Content – ***What***'s discussed in SMART Recovery meetings  
(e.g., four points, ABC model, values, etc.):

- Building and maintaining motivation
- Coping with urges
- Managing thoughts, feelings, behaviors
- Living a balanced life

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## SMART Meeting Content and Process

Process: **How** SMART Recovery meetings are facilitated:

- Structure: How meetings are organized
- Collaboration/alliance: How cohesive the group is and how committed individuals are to the group
- Conceptualization: How individual, group dynamics are understood
- Psychoeducation: How learning is facilitated
- Standardized techniques: How tools are chosen and integrated

Adapted from: Liese & Beck (2022). *Cognitive-Behavioral Therapy for Addictive Disorders*. NY: Guilford Press.

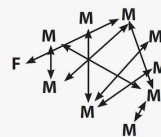
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**Cross-talk.** Diagram 1 illustrates the optimal pattern of successful cross-talk interaction.

All the participants are connected to each other, giving them many opportunities to develop relationships.

The job of the facilitator is to guide the discussion so it doesn't stray off topic. You can do this by reminding people of the topic they agreed to or by directing the conversation back to the participant who initially raised the issue.

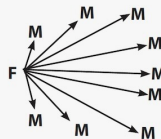
Diagram 1: Crosstalk



**Star pattern: Facilitator at the center.** This is a case of over-facilitating (Diagram 2). It happens when a facilitator is eager to help and is more focused on the topic substance than on managing the discussion.

In the star pattern, you are perceived as being the group leader because all communication passes through you. In this configuration, participants won't build relationships nor will they take initiative if you do all the talking. The meeting becomes, in effect, one-on-one therapy.

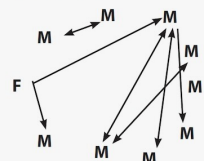
Diagram 2: Star Pattern



**Subgroup.** Diagram 3 shows how a subgroup can start an intense and exclusive discussion. Such exchanges can be valuable as they help with problem solving and can strengthen the bonds among participants; however, the other participants may feel excluded or that they have no right to speak up or change the subject.

You may need to intervene if such a discussion goes too long or if there are signs of impatience among others. Rather than break up the subgroup, you may be able to involve the other participants, by asking a question of a silent member, such as:

Diagram 3: Subgroup



*Bob, I remember you had a similar experience once. Do you have anything to share with Mary?*



## Cognitive Science

*What is cognitive science? It's the study of mental processes. We focus on just a few here:*

- Attention
- Executive functions
- Cognitive effort (ease vs. strain)
- Dual processes (e.g., System 1 and System 2 thinking)

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## Attention: Types and Axes

- Intensity
  - Vigilance
  - Sustained attention
  - Alertness
- Selectivity
  - Focused attention
  - Divided attention

*Relevance: One's focus of attention is a strong predictor of their subsequent thoughts, feelings, and behaviors*

## Executive functions

- Mental processes necessary for planning, regulating, organizing, adapting, self-managing, and making changes
- Executive functions are effortful
- At least three core functions:
  - Working memory – not the same as short-term memory
  - Cognitive flexibility – mental flexibility; open-mindedness; related to imagination, creativity
  - Inhibitory control – cognitive/behavioral inhibition (self-control)

Diamond, A. (2012). Executive functions.  
*Annual Review of Psychology*, 64, 135-168.

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## Cognitive effort

- Executive functions require cognitive effort
- Cognitive effort varies, depending on the load placed on it
- Simple functions place little load on individuals – ease
- Complex functions place heavy loads on individuals – strain
- Cognitive strain is experienced as work, effort, fatigue

*People tend to make choices that minimize cognitive effort; we make snap judgments and rely on intuition (i.e., knowing without deliberation or careful consideration)*

Kahneman, D. (2011). *Thinking Fast and Slow*.  
New York: Farrar, Straus and Giroux.

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## Consider this question

- A bat and ball together cost \$1.10. The bat costs \$1.00 more than the ball. How much does the ball cost?
- The System 1 (intuitive) answer is \$.10
- The correct answer is \$.05.
- This problem illustrates System 1 thinking and the principle of least effort
- Most people are confident in their \$.10 answer
- Unfortunately, overconfidence is pervasive

Kahneman (2011).

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## System 1 thinking

- Automatic, fast, effortless, involuntary, reflexive, intuitive
- Generates impressions, feelings, judgments
- Biased to believe and confirm, suppress doubt
- Focuses on existing evidence and ignores absent evidence
- Responds more strongly to losses than gains
- Seeks simple answers to complex questions
- When System 1 thoughts are reinforced, they become core beliefs

Kahneman, D. (2011). *Thinking Fast and Slow*.  
New York: Farrar, Straus and Giroux.

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## System 2 thinking

- Effortful, deliberate, intentional, reflective, slow
- Activated when cognitive load too much for System 1
- Searches memory
- Associated with attention, concentration, agency, choice
- Works by asking and answering questions
- Not the same as intelligence; more related to rationality
- Many people assume that their System 2 is in charge
- Smart, rational, but lazy

Kahneman, D. (2011). *Thinking Fast and Slow*.  
New York: Farrar, Straus and Giroux.

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## SMART Recovery group facilitation

- SMART Recovery groups can be stunningly complex and challenging; facilitators face uncertainty in each group and with each member
- Facilitation requires attention and effort to continually assess what is and isn't important: *What should we be talking about? Why aren't some group members participating? Are some group members talking too much? Where's Charlie tonight? Is he okay? What tool should I use? Am I a bad facilitator? Do they like me?*
- Facilitators possess the same vulnerabilities and fallibilities as group members; we all operate under System 1 and System 2

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## Introducing cognitive science in SMART Recovery Groups

- Introduce Smart Recovery Group members to System 1 and System 2 thinking
- Help them understand that their problematic patterns are driven by System 1 thinking
- Explain that System 1 is essential to living safely and efficiently, but errors are inevitable
- Explain the centrality of System 2 thinking to change
- Emphasize that change is difficult, largely due to the effort required by System 2

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## System 2 might be particularly helpful when group members...

- Say they *want* to change, but believe they *can't*
- Repeatedly describe problematic behaviors and relapses
- Continually anticipate barriers to change
- Don't work towards goals they say they want to accomplish
- Say they can't think of anything to work on
- Self-stigmatize

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## Summary and conclusions

- Life is complex and often difficult
- Addictions make life even more complex and difficult
- Empowerment is an alternative
- But it requires great attention and effort
- We underestimate the impact of System 1 in our every day lives
- We exaggerate how much we use System 2
- By effectively switching between System 1 and System 2, we feel ***self-empowered***: "System 1 is great but now it's time for System 2."
- As facilitators, group members, and human beings, remember how much effort is necessary, in System 2, to be ***self-empowered***

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