



**Chinese Association of Cognitive Behaviour Therapy
Annual General Meeting 2016**

Report from the Chairman

Preamble

I take pleasure in compiling this Chairman's Report covering the period between 1 August 2015 and 31 July 2016.

Local Workshops

2015-2016 was a year of reflection and relative quiescence by way of local workshops. On the one hand, we appreciate the gradual profusion of therapeutic modalities that purports to go beyond the traditional realms of CBT. On the other hand, as practitioners abiding to an evidence-based philosophy, we also see the importance of teasing out proven and effective therapeutic ingredients from some of these approaches. The next step would be to formulate, in practical terms, how traditional CBT can and should be further buttressed by these ingredients. Working along the trans-diagnostic framework and being driven by Barlow's unified protocol suggestions; we have attempted to distill eight effectiveness-proven therapeutic procedures in CBT that can be applied trans-diagnostically in a flexible and culturally sensitive manner.

Honorary Advisors

David H Barlow, PhD
Aaron T Beck, MD
Dinesh Bhugra, FRCPSych (UK)
Helen FK Chiu, FHKAM (Psychiatry)
Frank M Dattilio, PhD
Keith S Dobson, PhD
Elizabeth Kuipers, PhD
Li Lingjiang, MD
Cory F Newman, PhD
Christine A Padesky, PhD
Stanley Rachman, PhD
Ron Rapee, PhD
Paul M Salkovskis, PhD

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黃熾榮博士

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Honorary Legal Advisor

Raymond ML Chak
翟文禮先生

In its initial form, these core procedures include:

1. Therapeutic Alliance,
2. Systematic Evaluation,
3. Psycho-education,
4. Cognitive Restructuring,
5. Mindfulness and Relaxation
6. Behavioural Strategies,
7. Self-efficacy, and,
8. Relapse Prevention.

Between 2015 and 2016, we have promulgated this therapeutic algorithm in various conferences across China. We also introduced this approach in our 2015 Basic CBT Training Course in Guangzhou; and then went on field-testing its applicability in our 2016 Intermediate CBT Training Course with the same group. In our live treatment of real psychiatric patients across a span of several sessions, we solicited discussion and feedback from the audience with regard to perceived technical snags as well as procedural inadequacies.

It is our plan that once this treatment approach is ready, we shall package and disseminate it in Hong Kong to our clinicians.

International Conferences

- (1) Dr. CW Wong was invited in his capacity as Chairman of CACBT to be a keynote speaker in the *8th International Congress and 13th National Congress of Clinical Psychology* held in Granada, Spain, between 19-22 November 2015. On 19 November 2015, Dr. CW Wong gave a Plenary Lecture entitled, *"The Commonalities between Anxiety and Depression*

from a Structural Perspective”.

- (2) Dr. CW Wong attended the 8th *World Congress of Behavioural and Cognitive Therapies (WCBCT)* held at the Melbourne Convention and Exhibition Centre between 22-25 June 2016. He was the invited discussant in a symposium entitled, *“Should Self-Practice of CBT and Self-Reflection (SP/SR) Be Part of the Training of CBT Therapists?”*

Promulgation of CBT in Mainland China

- (1) A 12-day *Basic CBT Training Course*, conducted by Dr. CW Wong and Dr. Calais Chan, commenced in July 2015 at the Institute of Mental Health in Guangzhou, Guangdong Province. The course took place on six 2-day training modules during weekends, and was completed in December 2015.
- (2) On 30 September 2015, Dr. CW Wong was invited to give a keynote speech in the *2015 National Conference of Anxiety Disorders (2015 全國焦慮障礙學術會議)* at Ningpo, Jiejiang Province. Dr. CW Wong’s speech was entitled: *“Transdiagnostic CBT for Anxiety Disorders” (焦慮障礙的「跨診斷」認知行為治療).*
- (3) On 28 November 2015, Dr. Calais Chan was invited to give a keynote address on *“ACT on the Road to Rehabilitation” (康復之路：接受與承擔)* in the *2015 Annual Rehabilitation Conference of Hunan (2015 湖南省康復學術年會)* held in Changsha, Hunan Province.
- (4) On 29 November 2015, Dr. Calais Chan was invited to give a keynote address on *“Mindfulness, Acceptance and Commitment Therapies” (正念、接受與承擔治療)* in the *2015 Annual Conference of the Hunan Mental Health Association (湖南省心理衛生協會學術年會)* held in Changsha, Hunan Province.

- (5) Dr. Calais Chan was invited to deliver a monthly series of “*Baiyun Master Lectures*” (白雲大師論壇) for medical practitioners, psychotherapists and counsellors on CBT for substance use and related problems at the Guangzhou Baiyun Mental Hospital (廣州白雲心理醫院), Guangdong Province, from January to December 2016.
- (6) On 14 May 2016, Dr. Calais Chan was invited to give a talk to the Fifth People’s Hospital in Jiujiang, Jiangxi Province as part of its *National Continuous Medical Education Programme* (江西省九江市第五人民醫院國家級繼續醫學教育項目). The title of his talk was “*Advances in psychological treatment for depression*” (抑鬱症的心理治療進展).
- (7) On 7 May 2016, Dr. Calais Chan was invited to give a keynote speech “*Treating Anxiety Disorder: From CBT to ACT*” (治療焦慮症：從CBT到ACT) in the *2016 National Conference of Anxiety Disorders* (2016 全國焦慮障礙學術會議) at Wuhan, Hubei Province.
- (8) A 12-day *Intermediate CBT Training Course*, conducted by Dr. CW Wong and Dr. Calais Chan, commenced in July 2016 at the Institute of Mental Health in Guangzhou, Guangdong Province. The course will take place on six 2-day training modules during weekends, and will be completed in December 2016.

Epilogue

After half a century of unrelenting development, practice and research, CBT has firmly established itself as the most efficacious, effective and cost-efficient psychological treatment across a wide span of psychiatric and psychological disorders. Its overwhelming research evidence has prompted major clinical guidelines such as NIHM and NICE to hail it as the first-line treatment.

As good scientist-practitioners, we are charged with the duty and mission to re-examine all treatment modalities in light of recent postulations and findings. At this point in time, we still hold

the position that while there are definite venues where CBT could be strengthened and refined; we need to be cautious in delineating the proven therapeutic processes that instigate change in an effective manner, rather than throwing the baby out with the water by insinuation new “substitutes” for CBT.

In this light, we continue to strive for a better, perhaps “gentler” modality of CBT as suggested by Adam Radomsky in his keynote speech during ICCP 2014 held in Hong Kong. It is a process of refinement, upgrading and continuous improvement in CBT, not one wave that supersedes the previous.

With this note, I wish you Peace, Health and Happiness.



Wing WONG, PsychD

Chairman

CACBT

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