

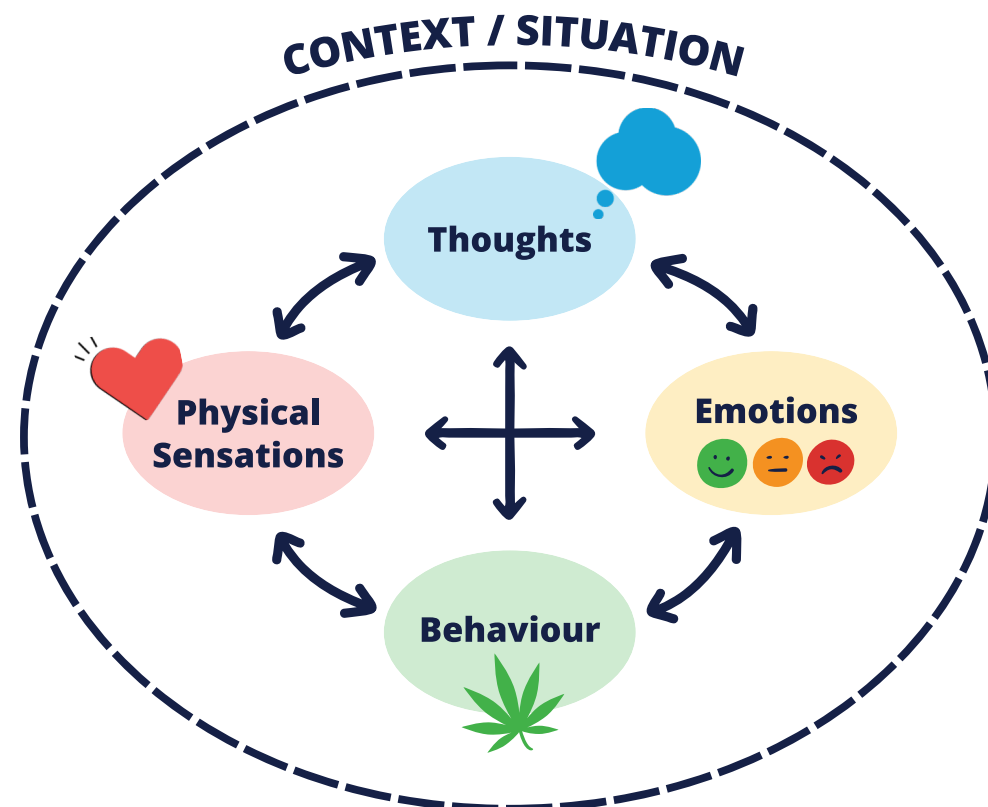
Substance Use & Cognitive Behavioural Therapy with Youth

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Cognitive behavioural therapy (CBT) is a psychological approach to treating various mental health concerns that focuses on the connection between **thoughts, feelings** (both emotional and physical responses), and **behaviours**.

In the case of substance use problems, the target behaviour is often substance use itself – understanding and targeting thoughts and feelings that contribute to youth using and experiencing problems from substances.

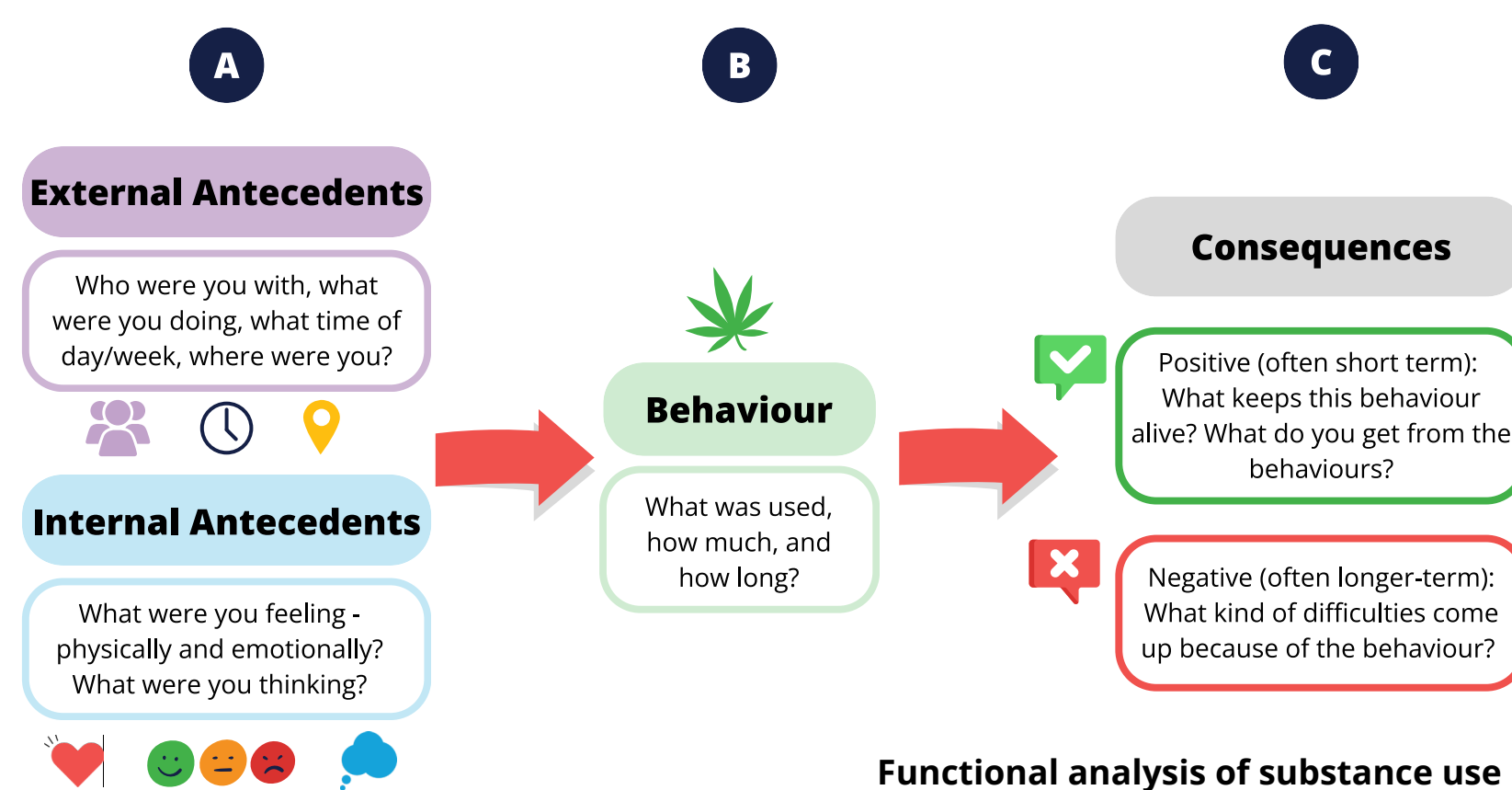


To learn more about Substance Use and CBT read the full [Substance Use Practice Brief on Cognitive Behavioural Therapy with Youth](#) through Youth Wellness Hubs Ontario.



Summary of Evidence

- CBT, combined with motivational interviewing or enhancement therapy, is the recommended first-line psychotherapeutic approach for treating most substance use problems in both adolescent and adults.¹⁻⁶
- CBT is the leading treatment for other mental health disorders, such as anxiety and depression, that commonly co-occur with substance use problems.⁷⁻⁹
- CBT is effective across a range of commonly co-occurring disorders, its strategies can be flexibly adapted and integrated to address multiple presenting concerns.



Functional analysis of substance use

Functional analysis can support youth in identifying and changing problematic thoughts, naming and coping with emotions, recognizing and managing physical sensations, and understanding how specific situations or contexts contribute to their substance use.

Practice-based CBT considerations when working with youth¹⁰⁻¹⁶

Learn about more practice-based considerations with examples by reading the full practice brief using the QR code

- Conduct a **functional analysis** during clinical assessment to explore antecedents, behaviours, and consequences of substance use
- Identify **external triggers** and **internal triggers** such as social settings, peer interactions, or thoughts and feelings
- Identify **cognitive distortions** or **“thinking traps”** that contribute to substance use such as Black-and-white or all-or-nothing thinking (Seeing things in extremes, with no middle ground), Overgeneralization (making broad conclusions based on limited experiences) or Catastrophizing (Expecting the worst possible outcomes)
- Teach **strategies to cope with craving** such as identifying and avoiding triggers, using distraction techniques, and reaching out for social support
- Teach **substance refusal skills** such as saying “no” explicitly without making excuses, suggesting a substance-free alternative, and changing the subject to redirect a conversation
- **Plan for difficult situations** by supporting youth to proactively learn strategies and develop a plan for high-risk triggers
- Consider other **targeted skills training** tailored to individual needs and treatment goals such as problem solving and decision-making skills, interpersonal and social functioning skills, and maximizing substance-free activities

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