



COGNITIVE BEHAVIORAL THERAPY (CBT)

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Objectives

At the end of the lecture, students should be able to:

- a. Define CBT
- b. Describe the process of CBT.
- c. Outline the conditions appropriate for CBT

INTRODUCTION

- ▶ There are different types of psychotherapies that can be used to help an individual deal with psychological problems.
- ▶ They are based on the different types of psychological problems that people experience.
- ▶ Examples are the cognitive based therapies or behavior based therapies etc.
- ▶ Cognitive behavior therapies are part of these

Introduction- Cont

- Cognitive-behavioral therapy is a form of structured therapy that utilizes a set of cognitive strategies aimed to resolve psychological conflicts within a brief period of time (Borba, Range, & Elia, 2009).
- The goal of CBT is to identify irrational thinking and help the client challenge these cognitive distortions (Kendall, Braswell, 1993).

Defining CBT-Cont

- ▶ At their core therefore, CBTs share three fundamental propositions:
 1. Cognitive activity affects behavior.
 2. Cognitive activity may be monitored and altered.
 3. Desired behavior change may be effected through cognitive change.

1. Cognitive activity affects behavior.

- ▶ there is overwhelming evidence that cognitive appraisals of events can affect the response to those events.
- ▶ There is clinical value in modifying the content of these appraisals
- ▶ This is important incase the individual is having faulty cognitions

2. Cognitive activity may be monitored and altered.

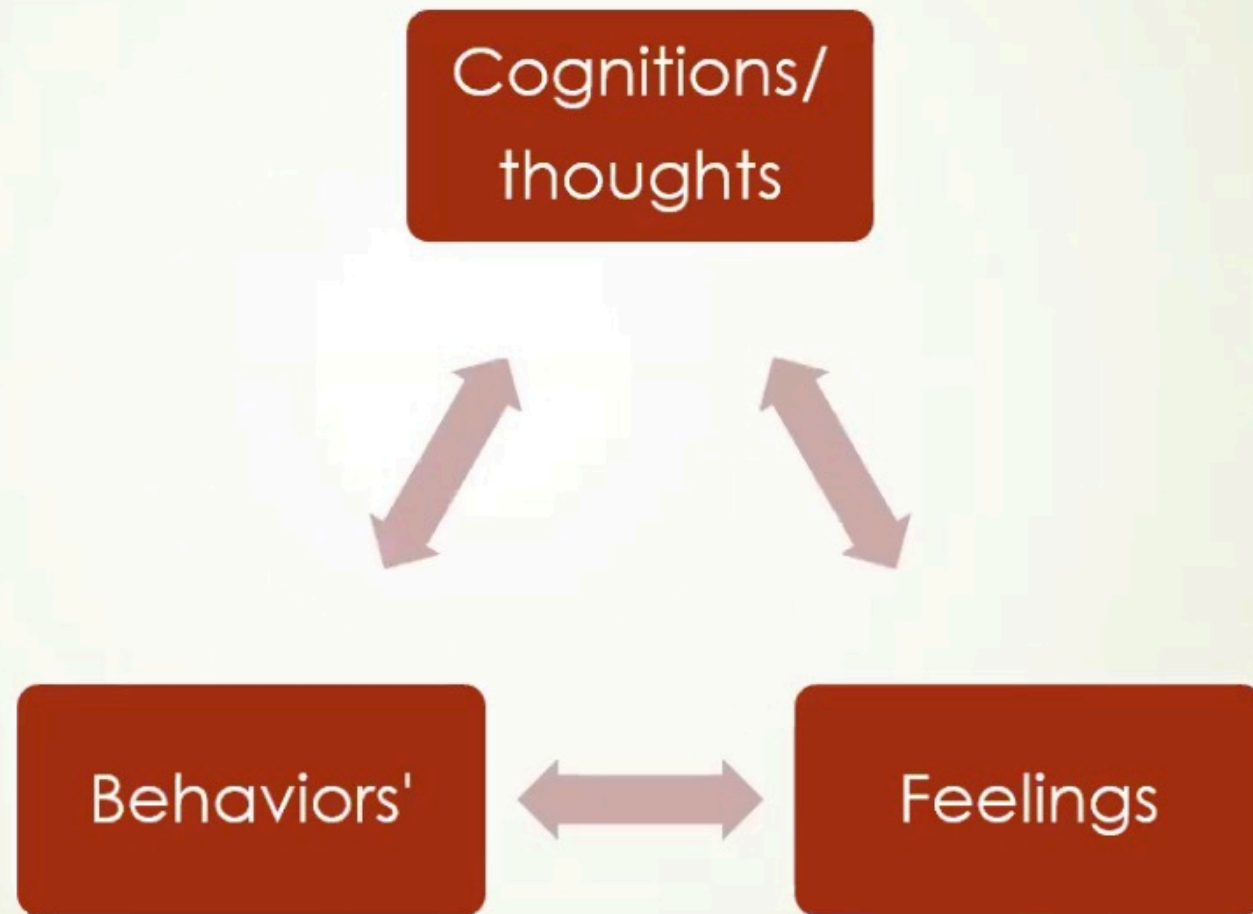
- ▶ The second CBT proposition states that cognitive activity may be monitored and altered.
- ▶ This statement implies that we may gain access to cognitive activity and that cognitions are recognizable and can be assessed.

3. Desired behavior change may be effected through cognitive change.

- ▶ The assumption is that desired behavior change may be effected through cognitive change.

- ▶ According to CBT, mental health problems arise when people exhibit maladaptive and extreme patterns of thinking and behavior, and these often interact with each other to escalate patients' symptoms and problems.

CBT triad



Examples of an imaginary situation of wife who is always beaten by the husband

- What are her likely cognitive Distortions, feelings and behaviours?

- ▶ I am not a good wife
- ▶ I call for the beatings
- ▶ I don't perform my duties well

Likely Feelings

- ▶ Hopelessness
- ▶ Unloved/unappreciated
- ▶ Uselessness

Likely behavior

- ▶ crying
- ▶ Self neglect
- ▶ Run away etc

- ▶ Therefore in using CBT, you are helping your patient/client build a set of skills that enables an him/her to be aware of thoughts and emotions; identify how situations, thoughts, and behaviors influence emotions; and improve feelings by changing dysfunctional thoughts and behaviors.

Treatment

- ▶ Treatment is based on a collaborative, psychoeducational approach that involves designing specific learning experiences to teach clients to:
 - (1) monitor automatic thoughts;
 - (2) recognize the relations among cognition, affect and behavior;
 - (3) test the validity of automatic thoughts;

(4) substitute more realistic cognitions for distorted thoughts;

(5) identify and alter underlying beliefs, assumptions, or schemas that predispose individuals to engage in faulty thinking patterns

- “Schemas” are defined as cognitive structures that organize and process incoming information.
- They are proposed to represent the organized thought patterns that are acquired early in an individual’s development and develop over the lifespan with accumulated experiences.
- Whereas the schemas of well-adjusted individuals allow for the realistic appraisal of life events, those of maladjusted individuals result in distorted perceptions, faulty problem-solving and psychological disorders

Conditions that can be treated by CBT

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- Depression
- Anxiety
- obsessive compulsive disorder (OCD)
- panic disorder.
- post-traumatic stress disorder (PTSD)
- phobias.
- eating disorders – such as anorexia and bulimia.
- sleep problems – such as insomnia.
- problems related to alcohol misuse.
- etc

- Remember to always assess the patient so as to find out whether CBT is the ideal treatment
- The treatment modules can be as many as 20, 16 or up to 8.
- Included sessions are:

Sessions 1–2

- Establish rapport; provide validation and reassurance.
- Review problem list; identify areas of most distress.
- Provide psychoeducation about anxiety disorders and treatment.
- Provide general outline for therapy process.
- Emphasize importance of self-monitoring and at-home practice.
- Invite family member to one session if possible.
- Elicit reactions to sessions.

Sessions 3–5

- ▶ Provide relaxation training.
- ▶ Address issues related to not completing home assignments.
- ▶ Elicit reactions to sessions.

Sessions 6–8

- ▶ Review homework (i.e., relaxation techniques, thought–mood tracking).
- ▶ Teach strategies for problem solving.
- ▶ Elicit reactions to sessions.

Session 9

- ▶ Review homework (i.e., relaxation techniques, problem solving).
- ▶ Address issues related to not practicing new skills at home.
- ▶ Teach patient sleep hygiene strategies.
- ▶ Elicit reaction to session.

Session 10

- ▶ Review homework (i.e., relaxation techniques, problem solving, sleep guidelines).
- ▶ Address issues related to not completing home assignments.
- ▶ Instruct patient on methods for thought stopping and stimulus control.
- ▶ Help patient schedule “worry” time.
- ▶ Elicit reaction to session.

Sessions 11–12

- ▶ Review homework (i.e., relaxation techniques, worry time, problem solving).
- ▶ Address issues related to not completing home assignments.
- ▶ Teach assertiveness and communication skills.
- ▶ Role play with patient and assign homework to practice in real life.
- ▶ Elicit reactions to sessions.

Sessions 13–14

- ▶ Review homework (i.e., relaxation techniques, worry time, problem solving, assertiveness skills).
- ▶ Address issues related to not completing home assignments.
- ▶ Discuss how to increase pleasant activity scheduling.
- ▶ Elicit reactions to sessions.

Sessions 15–16

- ▶ Review homework (i.e., relaxation techniques, thought–mood tracking,
- ▶ worry time, problem solving, assertiveness skills, pleasant activities).
- ▶ Address issues related to not completing home assignments.
- ▶ Discuss mindfulness and acceptance of uncontrollable events.
- ▶ Elicit reactions to sessions.

Session 17

- ▶ Discuss importance of using all skills learned thus far to manage time.
- ▶ Move toward termination.
- ▶ Elicit reaction to session.

Sessions 18–20

- ▶ Review all skills–techniques–strategies learned to date.
- ▶ Discuss progress made in therapy, areas of continued effort, ongoing
- ▶ challenges.
- ▶ Elicit reaction to therapy process.
- ▶ Final session—termination.