

# Cognitive Behavioral Therapy



**A Brief Introduction**

# Cognition Re-enters

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- Behaviorism focused on observable behavior (J.B. Watson, B.F. Skinner)
- Albert Bandura re-opened the door to cognitions with modeling
- The Cognitive Revolution

# Albert Ellis

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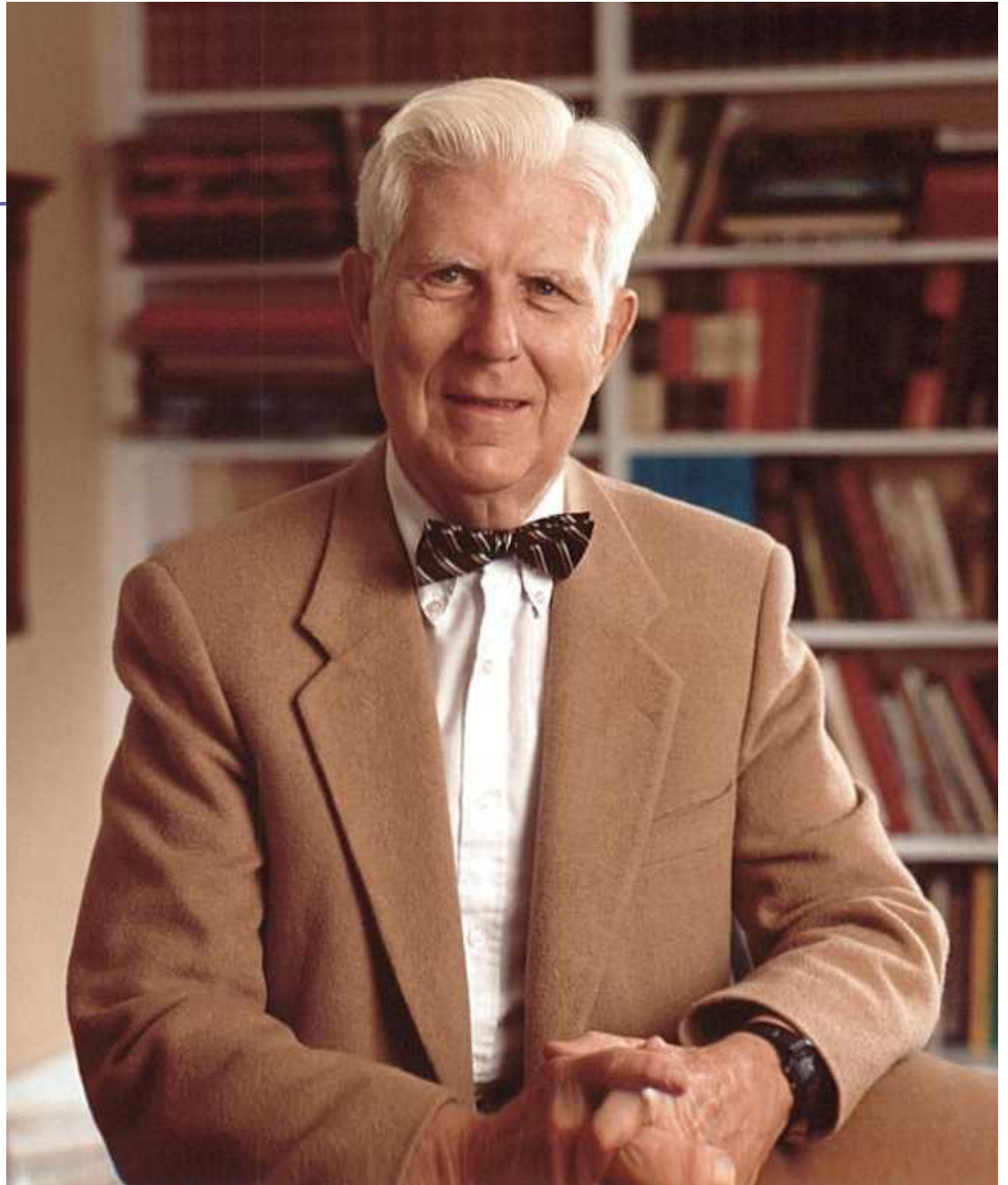
# Cognitive Therapy

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- Rational Emotive therapy (Albert Ellis)
- Cognitive therapy (Aaron Beck)

A. Beck

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# Rational Emotive Therapy

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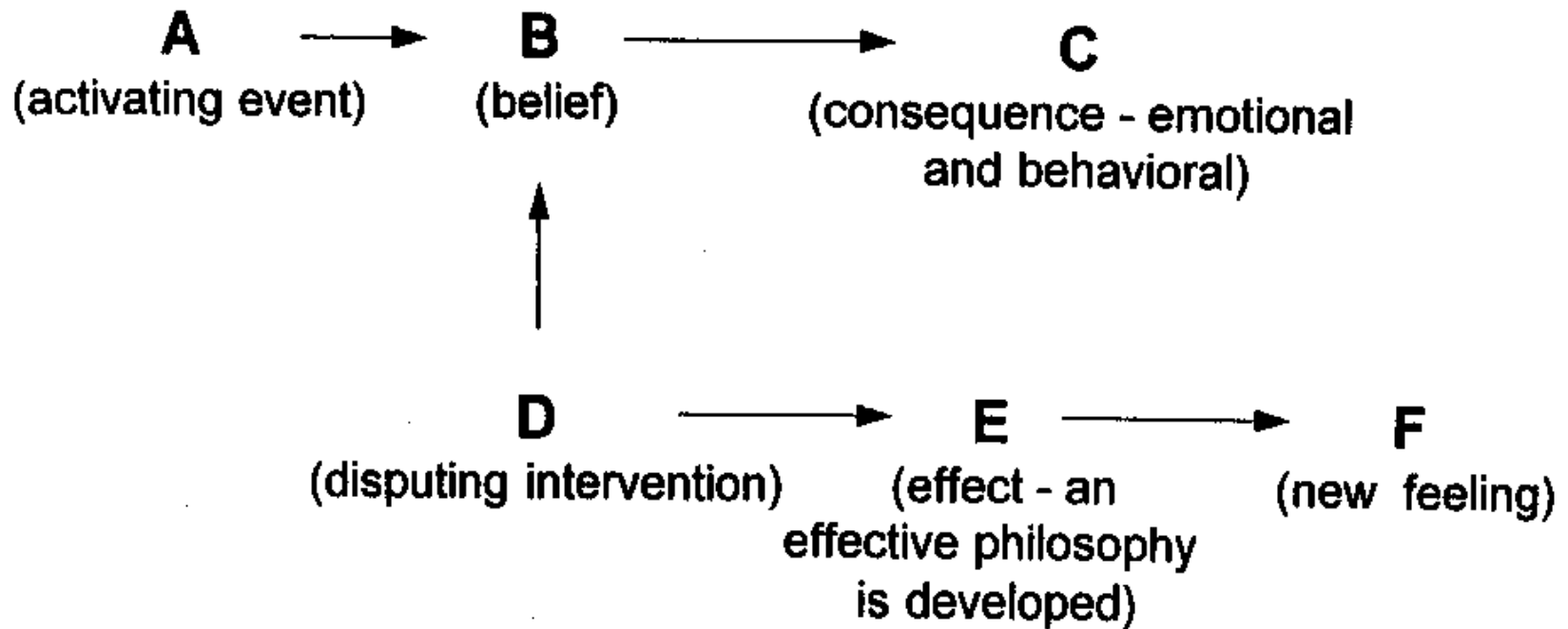


Albert Ellis

- Emotions stem from our interpretations of events, not from the events themselves
  - We create our problems
- Need to modify our interpretations
  - If we don't interpret things in a way that makes us feel bad, we won't feel bad

# A-B-C Theory of Personality

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# Evaluation

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## □ Strengths

- Brought cognition into the study of personality
  - How we think
  - How we perceive
- Emphasis on person's own interpretation

## □ Weaknesses

- Important aspects of personality denied or neglected
- Difficulty predicting behaviour
- Many unanswered questions



# Rational Emotive Therapy: Ellis

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- A-B-C theory of dysfunctional behavior

# Example Rationale Thinking

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- A= fail a midterm examination
- B=It's unfortunate that I failed-I did not study hard enough and I must make sure that I study harder for the final
- C=no consequences (emotional disturbance sequelae)

# Example Irrational Thinking: leads to Emotional Disturbance

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- A= Fail exam
- B= I'm stupid, I'll never be able to pass this course and I will fail this course
- C=depression

# Ellis' List of Common Irrational Ideas

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- ❑ I absolutely must have sincere love and approval almost all the time from all the significant people in my life
- ❑ I must be thoroughly competent, adequate and achieving in all respects, or I must at least have real competence or talent at something important; otherwise I am worthless.
- ❑ People who harm me or who do a bad thing are uniformly bad or wicked individuals, and I should severely blame, damn, and punish them for their sins and misdeeds

# Ellis' List of Common Irrational Ideas (continued)

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- ❑ When things do not go the way I would like them to go, life is awful, terrible, horrible, or catastrophic
- ❑ Unhappiness is caused by external events over which I have almost no control. I also have little ability to control my feelings or rid myself of feelings of depression and hostility.

# Rational Emotive Therapy

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- Identify patient's irrational beliefs
- Add "D" and "E" to A-B-C theory
- Teach the patient to dispute the beliefs and substitute logical and rational beliefs
- Evaluate the effects of disputing their irrational beliefs

# Beck's Cognitive Therapy

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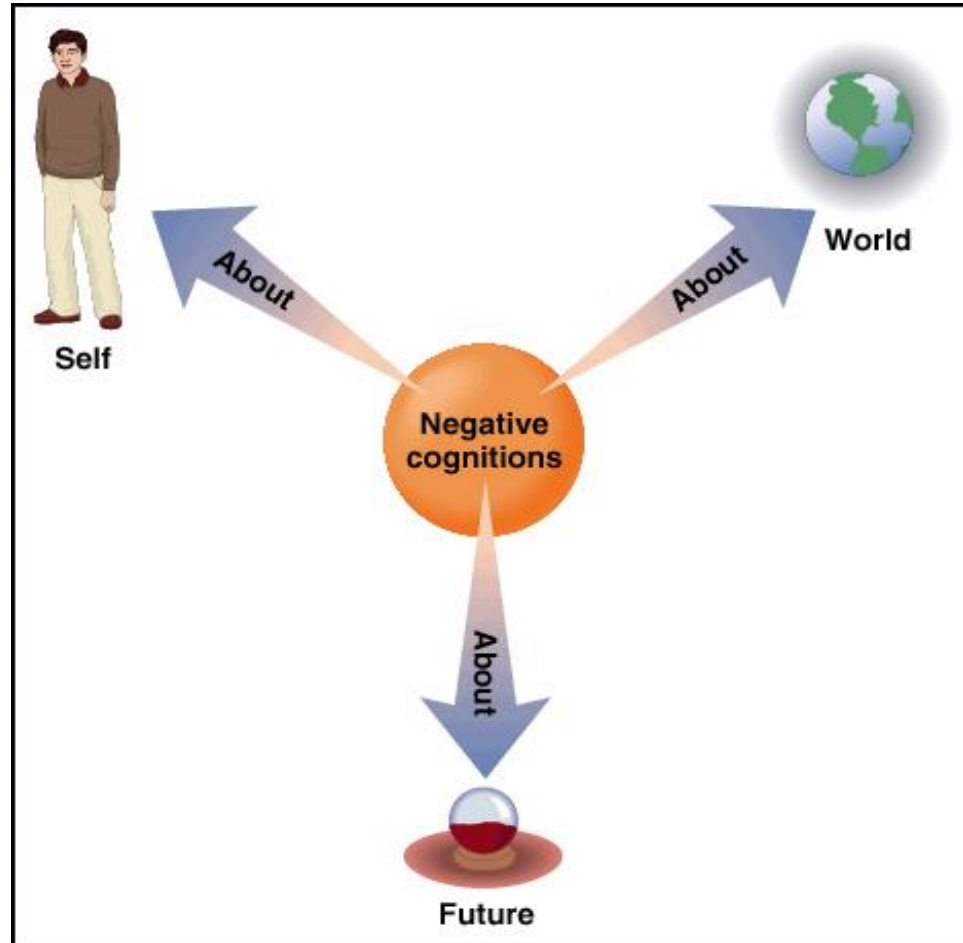
- Early observation of negative content of depressed people's dreams

# Models of Depression

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Aaron Beck





# Irrational Beliefs

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- ❑ Everyone I meet should like me
- ❑ I should be perfect at everything I do
- ❑ Because something once affected my life, it will always affect it
- ❑ It is unbearable and horrible when things are not the way I want them to be
- ❑ I must perform important tasks competently and perfectly
- ❑ If I don't get what I want, it's terrible
- ❑ I must have love or approval from all the significant people in my life

# Distorted Thinking

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- All or Nothing Thinking
- Overgeneralization
- Mental Filter
- Disqualifying the Positive
- Jumping to Conclusions
- Emotional Reasoning
- Personalization

# Beck's Theory

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Depressed people have a negative view of:

- Themselves
- The world
- The future

Depressed people have negative schemas or frames of reference through which they interpret all events and experiences

# Depression and Negative Schemas

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Negative schemas:

- Always present
- Unconscious
- Become activated with stressful events

# Beck's Cognitive Therapy: First Sessions

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- Identify and changing maladaptive thoughts
- First sessions: therapist explains cognitive theory of emotional disorders (negative cognitions contribute to distress)
- Middle Sessions: Client is taught to identify, evaluate and replace negative automatic thoughts with more positive cognitions
- Therapist is a collaborator (fellow scientists in therapy)
- Final Sessions: solidify gains, focus on prevention of recurrence

# Example

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- Person with negative schema involving rejection will become depressed when a partner leaves him or her

# Therapist as Collaborator

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- Therapist and client work together to test the logic and consistency of each negative thought.

# Behavioral Component

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- Behavioral coping strategies (problem solving skills and assertiveness training)



# Solidifying Gains and Prevention

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- Solidify gains: broaden range of identified negative thoughts and strengthen more positive cognitions
- Anticipate future stressful life events that might trigger a future depression and role play more adaptive responses

# Cognitive Behavioral Therapy:

## Efficacy/Effectiveness (old question)

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- ❑ Identified as a well established treatment for the treatment of unipolar depression
- ❑ As effective (and sometimes more effective than) alternate forms of treatment for depression including antidepressant medication
- ❑ However (despite focus on prevention of relapse) 2/3 of patients who receive cognitive therapy have another episode of depression within two years

# CBT Effective for which type of patients (new question)

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- ❑ Outcome not predicted by level of intelligence
- ❑ Patient with lower levels of dysfunctional thinking benefit the most (paradoxically)
- ❑ Interpersonally avoidant patients do better in CBT (rather than interpersonal psychotherapy)
- ❑ Patients with more obsessional styles do better in Interpersonal Psychotherapy

# CBT: Effective for Which Disorders?

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Empirically supported treatment for

- Depression
- Generalized anxiety disorder
- Obsessive compulsive disorder
- Panic disorder