

Basic Strategies of Cognitive Behavioral Therapy

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KEYWORDS

- Strategy • Cognitive restructuring • Behavioral activation • Exposure
- Inhibitory learning • Problem solving

KEY POINTS

- Cognitive behavioral therapy is an active, strategic, and time-sensitive psychotherapeutic intervention.
- Cognitive restructuring helps patients to identify, evaluate, and modify maladaptive thoughts and beliefs associated with emotional distress.
- Behavioral activation helps patients to increase engagement in activities that provide a sense of accomplishment and pleasure.
- Exposure allows anxious patients to have systematic contact with feared stimuli and situations, overcoming avoidance and reliance on ritualistic behavior to neutralize anxiety.
- Problem solving teaches patients systematic skills for addressing life problems and overcoming unhelpful attitudes about problems.

BASIC STRATEGIES OF COGNITIVE BEHAVIORAL THERAPY

Cognitive behavioral therapy (CBT) is an active, problem-focused, and time-sensitive approach to treatment that aims to reduce emotional distress and increase adaptive behavior in patients with a host of mental health and adjustment problems. Cognitive behavioral therapists deliver interventions in a strategic manner, such that interventions (1) emerge from the customized case formulation of the patient's clinical presentation, (2) are delivered in a collaborative manner with the patient, (3) are designed to move patients forward and directly toward meeting their treatment goals, and (4) are seen through in their entirety so that their efficacy can be evaluated with "data" collected by the patient.¹ Thus, the basic strategies of CBT are efficient, focused, and targeted.

Disclosures: None.

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Psychiatr Clin N Am ■ (2017) ■-■
<http://dx.doi.org/10.1016/j.psc.2017.07.001>

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Historically, the focus of CBT has been on two psychological domains: cognition and behavior. According to the theory that underlies CBT, maladaptive or unhelpful cognition lies at the heart of understanding psychopathology.² Patients with depression, for example, are often characterized by a “negative cognitive triad,” such that they have negative beliefs about themselves, the world, and the future that reinforce and perpetuate their mood disturbance.³ It follows then, that a basic cognitive strategy in CBT would be to help patients modify such negative thinking as a vehicle to improve their mood. Today, this strategy, called *cognitive restructuring*, is a central one in the delivery of CBT, although it should be noted that contemporary off-shoots of CBT promote alternative cognitive approaches, such as distancing from thoughts rather than changing them.⁴ Behavioral strategies in CBT are focused on overcoming avoidance, engaging in prosocial behavior, and achieving self-care. For example, *behavioral activation* for depression helps patients to become more actively engaged in their lives, whereas *exposure* for anxiety, obsessive-compulsive and related, and trauma- and stressor-related disorders helps patients to extinguish fear responses by having systematic contact with feared stimuli and situations. Moreover, most patients who present for treatment are dealing with an array of life problems, so a *problem-solving* strategy can be adopted using cognitive techniques to help patients view problems in an adaptive manner and behavioral techniques to allow them to implement solutions to their problems. Although there are many additional strategies used by cognitive behavioral therapists, these four, cognitive restructuring, behavioral activation, exposure, and problem solving, are among the strategies that are most fundamental to this work and are those that are discussed in this article.

COGNITIVE RESTRUCTURING

Cognitive restructuring is the process by which clinicians help patients to recognize, evaluate, and if necessary, modify maladaptive or otherwise unhelpful thinking. Cognitive behavioral therapists apply cognitive restructuring to situation-specific thoughts that arise in times of stress or adversity (called *automatic thoughts*) as well as to negative underlying beliefs. Consider a patient who describes an upsetting incident in which her son was not invited to another child’s birthday party. She reports the automatic thoughts, “This is my fault. The child’s mother does not like me.” Not surprisingly, she experiences a host of negative emotions, including guilt, shame, and sadness. A cognitive behavioral therapist would use cognitive restructuring to help her understand the role that her thinking plays in her negative affect, consider other reasons why her son might not have been invited to the party, recognize that her son is invited to many other birthday parties, and evaluate how catastrophic this situation truly is. The cognitive behavioral therapist would also be alert to themes in the automatic thoughts that would signify a negative underlying belief, such as “I’m undesirable” or “I’m unlikable.” The therapist would then work, over time, to shift that negative belief to one that is more reasonable and balanced (eg, “I’m just as likable as everyone else.”). This section describes three steps for implementing cognitive restructuring, as well as several specific techniques and tools to achieve cognitive restructuring’s aim of modifying maladaptive or otherwise unhelpful thinking.

Identifying Maladaptive Thinking

Most cognitive behavioral therapists begin by focusing cognitive restructuring of automatic thoughts, and over time, they use this work to develop hypotheses about the nature of underlying beliefs that would benefit from cognitive restructuring later in the course of treatment. To identify automatic thoughts, cognitive behavioral therapists

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