

Homework in Cognitive Behavioral Therapy



A Systematic Review of Adherence Assessment in Anxiety and Depression (2011–2016)

Nikolaos Kazantzis, BA(Hons), MA, PGDipClinPsych, PhD^{*},
Nicole R. Brownfield, BSc (Hons), Livia Mosely, BEng, BA, PDM,
Alexandra S. Usatoff, BSc, GDipPsych, GDipProfPsych,
Andrew J. Flighty, BPsychSc

KEYWORDS

- Cognitive behavior therapy • Homework • Adherence • Anxiety • Depression
- Review

KEY POINTS

- Significant attention has been directed toward adherence with CBT homework for anxiety and depressive disorders, and adherence assessment methods have diversified.
- There remains a large component of the adherence process not assessed, with patient effort, engagement, and the known role for treatment appraisals and beliefs necessitating the pursuit of improved adherence assessment methods.
- In CBT, the homework intervention varies across sessions and patients, and tailored assessments that consider both the in-session procedures in discussing the homework, and the patient feedback on its benefits are important for understanding adherence.

Although cognitive behavioral therapy (CBT) has demonstrated efficacy as a therapy for acute phase depression and anxiety disorders,^{1–4} as with any psychological intervention, it only works when a patient actually adheres to the treatment recommendations and completes treatment.^{5,6} In research studies of CBT, there is increasing concern that adherence with psychological therapies are misunderstood and inaccurately measured.^{7–11}

CBT requires significant behavior, cognitive, and lifestyle changes that are often difficult for patients to implement. For example, the behavioral activation component of CBT for depression typically requires patients to keep a diary of their emotions and

Disclosures: See last page of the article.

Cognitive Behavior Therapy Research Unit, Level 4, 18 Innovation Walk, School of Psychological Sciences and Monash Institute of Cognitive and Clinical Neurosciences, Monash University, Melbourne 3800, Australia

* Corresponding author.

E-mail address: Nikolaos.Kazantzis@monash.edu

Psychiatr Clin N Am 40 (2017) 625–639
<http://dx.doi.org/10.1016/j.psc.2017.08.001>

0193-953X/17/© 2017 Elsevier Inc. All rights reserved.

psych.theclinics.com

rate the impact of scheduling more activities than typical. Keeping a diary builds emotional awareness, because it requires increased attention to undesirable mood states, making adherence increasingly difficult over the first few weeks (ie, with a focus on sadness, guilt, annoyance, it is harder to stay motivated and engage in activities designed to lift mood). Cognitive restructuring requires a patient to keep a written log of distressing thoughts when low mood occurs, something many loathe doing shortly after a distressing event.

Although these difficulties are typically overcome in tightly controlled trials, because of added support provided by the study and the typically homogeneous sample, they pose a challenge for the practicing clinician without those added resources and restrictions on patient load.¹²

The related issue of treatment attrition also dilutes the benefits of CBT, especially in clinical settings, where dropout rates are as high as 26%.⁶ A recent study on nationwide dissemination of CBT in England reported that 48% of patients dropped out during therapy.¹³ Taken together, these studies suggest a substantial portion of patients are not receiving the full benefit of CBT, and there is a need for further research on treatment adherence in this context.

HOMEWORK ADHERENCE EFFECTS

The necessity and potential for negative impact of asking patients to complete therapeutic strategies in order to receive the full treatment effect of CBT have been noted.¹⁴ This view is, in part, due to the terminology used to refer to this practice: “homework” clearly stems from the educational model and to refer to “homework assignments” in therapy does not immediately convey the necessarily collaborative nature of this therapeutic process. Furthermore, although various terminologies have been used in treatment studies, the term “homework” is most consistently used and may be defined as “planned activities the patient carries out between sessions, selected together with the therapist, in order to progress toward therapy goals.”¹⁵

It is not surprising that even modest improvements in homework adherence can enhance CBT outcomes. Findings from 2 independent meta-analyses spanning 1980 to 1998¹⁶ and 2000 to 2008¹⁷ of 1702 and 2183 patients, respectively, found that those with anxiety and depression who completed treatment with higher levels of adherence improved significantly more than completers with low adherence (effect size $r = .22$ for depression, and $r = .24$ for anxiety¹⁶; and overall $r = .26$ ¹⁷). In addition, adherence with treatment strategies is a strong predictor of long-term (ie, 1 year) outcomes.¹⁶ A later meta-analysis of studies spanning 1980 to 2007 of 1072 patients in CBT conditions with and without homework reported that effect sizes for CBT with homework were significantly greater than CBT comprising entirely of in-session work for anxiety and depression ($d = 0.48$).¹⁸

Conversely, a study by Burns and Spangler¹⁹ observed that there was evidence of a bidirectional relationship between homework adherence and symptom change in CBT for depression.²⁰ Because the observation of sudden gains has recently been replicated in CBT for depression, the importance of understanding the trajectories of symptom change in CBT cannot be understated.²¹ It is possible that homework adherence has a central role in determining sudden symptomatic changes, and therefore, future hypothesis testing to explore the homework adherence-outcome relationship is indicated. The consistent finding that greater homework compliance is associated with positive therapeutic outcomes in interventions for anxiety and depression is itself evidence that homework compliance assessment is important for CBT.

Download English Version:

<https://daneshyari.com/en/article/8816199>

Download Persian Version:

<https://daneshyari.com/article/8816199>

[Daneshyari.com](https://daneshyari.com)