



Introduction to Cognitive Behavioral Therapy

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What is Cognitive-Behavioral Therapy (CBT)?



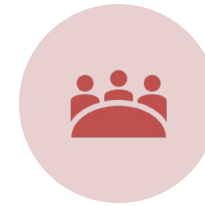
A PROBLEM-ORIENTED THERAPY



FOCUS ON PRESENT AND FUTURE



SHORT-TERM FORMAT



SESSIONS ARE STRUCTURED



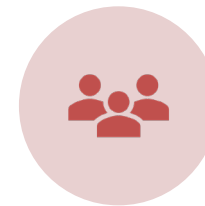
INVOLVES A STRONG WORKING ALLIANCE



HOMEWORK IS A CENTRAL FEATURE



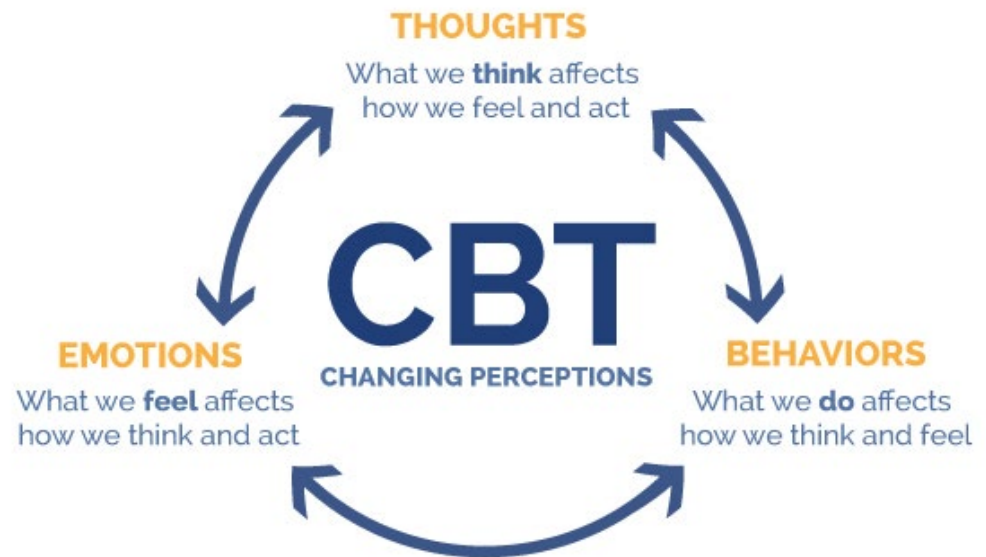
BASED ON COGNITIVE THEORY



REQUIRES COLLABORATIVE EMPIRICISM

What is CBT?

1. Utilizes a directive, action-oriented approach, that teaches a person to explore, identify, and analyze dysfunctional patterns of thinking and behaving.
2. Once these counterproductive patterns are identified, the therapist instructs the client how to challenge and restructure their thinking and behavior.





Cognition #1: “What a total @\$%!!”

Cognition #2: “He probably didn’t see me.
It’s a good thing I was paying attention.”

General premises of CBT

- **Based on** assumption that most emotional and behavioral reactions are learned. Therefore, the goal of therapy is to help clients *unlearn* their unwanted reactions and to learn a new way of reacting.
- **Teaches the benefit of remaining calm or at least neutral when faced with difficult situations** (i.e., If you are upset by your problems, you now have 2 problems: 1) the problem, and 2) your upset-ness).



What types of thoughts are modified?



Automatic thoughts/cognitive distortions



Negative Core beliefs

Automatic Thoughts/ cognitive distortions

	All-or-nothing thinking	Thinking in extremes. For example, something is either 100% good or 100% bad
	Catastrophizing	Jumping to the worst possible conclusion
	Over-generalizing	Seeing a pattern based upon a single event
	Mental filter	Only paying attention to certain types of evidence ("That doesn't count")
	Disqualifying the positive	Discounting positive information or twisting a positive into a negative
	Jumping to conclusions	Mind reading or predicting the future
	Low frustration tolerance	Saying things like "this is too difficult", "this is unbearable" or "I can't stand it"
	Minimization	Discounting the importance of something
	Emotional reasoning	Assuming that because we feel a certain way our hunch must be true
SHOULD MUST	Demands	Using words like 'should', 'must', and 'ought'
	Labelling	Assigning labels to ourselves or others ("I'm rubbish")
"This is my fault"	Personalization	Taking too much or too little responsibility



Negative Core Beliefs

Helpless core beliefs

"I am incompetent."

"I am ineffective."

"I can't do anything right."

"I am helpless."

"I am powerless."

"I am weak."

"I am vulnerable."

"I am a victim."

"I am needy."

"I am trapped."

"I am out of control."

"I am a failure."

"I am defective" [i.e., I do not measure up to others].

"I am not good enough" [in terms of achievement].

"I am a loser."

Unlovable core beliefs

"I am unlovable."

"I am unlikeable."

"I am undesirable."

"I am unattractive."

"I am unwanted."

"I am uncared for."

"I am different."

"I am bad [so others will not love me]."

"I am defective [so others will not love me]."

"I am not good enough [to be loved by others]."

"I am bound to be rejected."

"I am bound to be abandoned."

"I am bound to be alone."

Worthless core beliefs

"I am worthless."

"I am unacceptable."

"I am bad."

"I am a waste."

"I am immoral."

"I am dangerous."

"I am toxic."

"I am evil."

"I don't deserve to live."



Thought Record

Understanding the relationship between thoughts, feelings, and behavior

SITUATION Describe the upsetting situation (just the facts!)	THOUGHTS Describe 2-3 thoughts that popped into your mind (when we're feeling bad, these thoughts are often negative).	FEELINGS What emotions did you experience? (sad, anxious, angry, guilty, etc.?)	BEHAVIOR How did you react or behave? What did you do or not do?	OUTCOME Was the situation better, worse, or the same because of how you behaved?



Applying the CBT Model

Situation	Thoughts	Feelings	Behavior
You say, "Hi," to a friend in the hallway, but they don't say hello back to you.	"They're mad at me." "I've done something wrong." "I'm so stupid – everyone saw that."	Embarrassed Anxious Sad	Avoid your friend, not wave at others in the hall.
Situation	Thoughts	Feelings	Behavior
You get a test back and find out you failed it.	"I'm never going to get into college." "I'm the dumbest student in this class." "This is useless."	Worried Worthless	Give up in class, stop doing other assignments.

CORE BELIEF WORKSHEET (Example)

OLD CORE BELIEF: I'm a failure.

How much do you believe the old core belief right now? (0-100) 70%

*What's the most you've believed it this week? (0-100) 90%

*What's the least you believed it this week? (0-100) 50%

NEW BELIEF: I'm competent, though with both strengths and weaknesses.

How much do you believe the new belief right now? (0-100) 50%

EVIDENCE THAT CONTRADICTS OLD CORE BELIEF AND SUPPORTS NEW BELIEF

Worked out a new contract with Mr. R.

Got an extension from S.

*Daily am writing letters and phoning to try
to resolve problem with "A company."*

*Continuing in the ABC project
[charitable volunteer activity]*

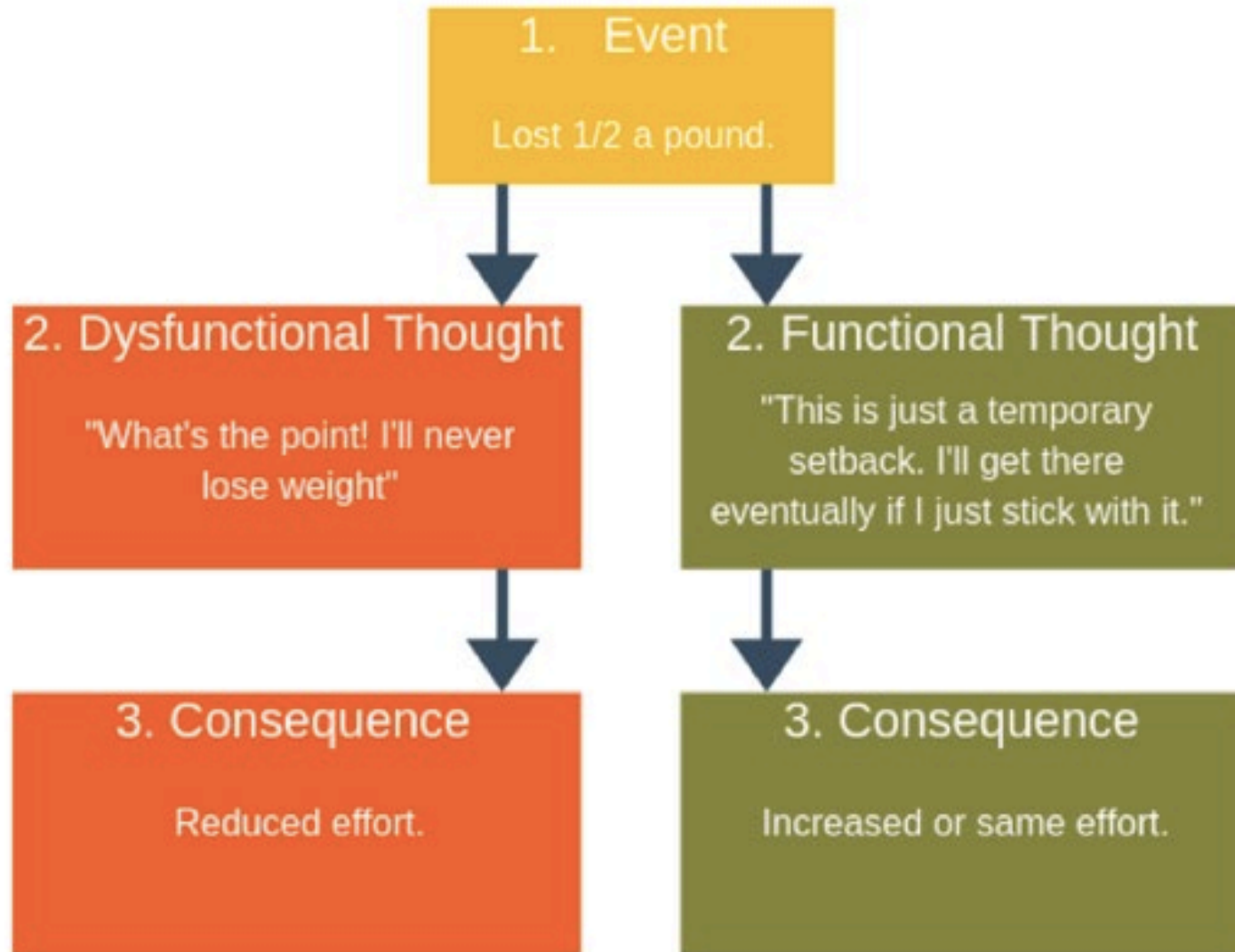
EVIDENCE THAT SEEMS TO SUPPORT OLD CORE BELIEF WITH REFRAME

*Business still has significant problems BUT I'm doing
all I can to solve problems now.*

*I can't get my mother to take her medication BUT this
isn't really under my control.*

*Dad blames me for potential bankruptcy BUT (1) the
business had problems when I took over (2) I share the
responsibility for continued problems with several
other people and (3) even if this business fails, it
doesn't mean I'm a failure as a person.*

Cognitive Restructuring



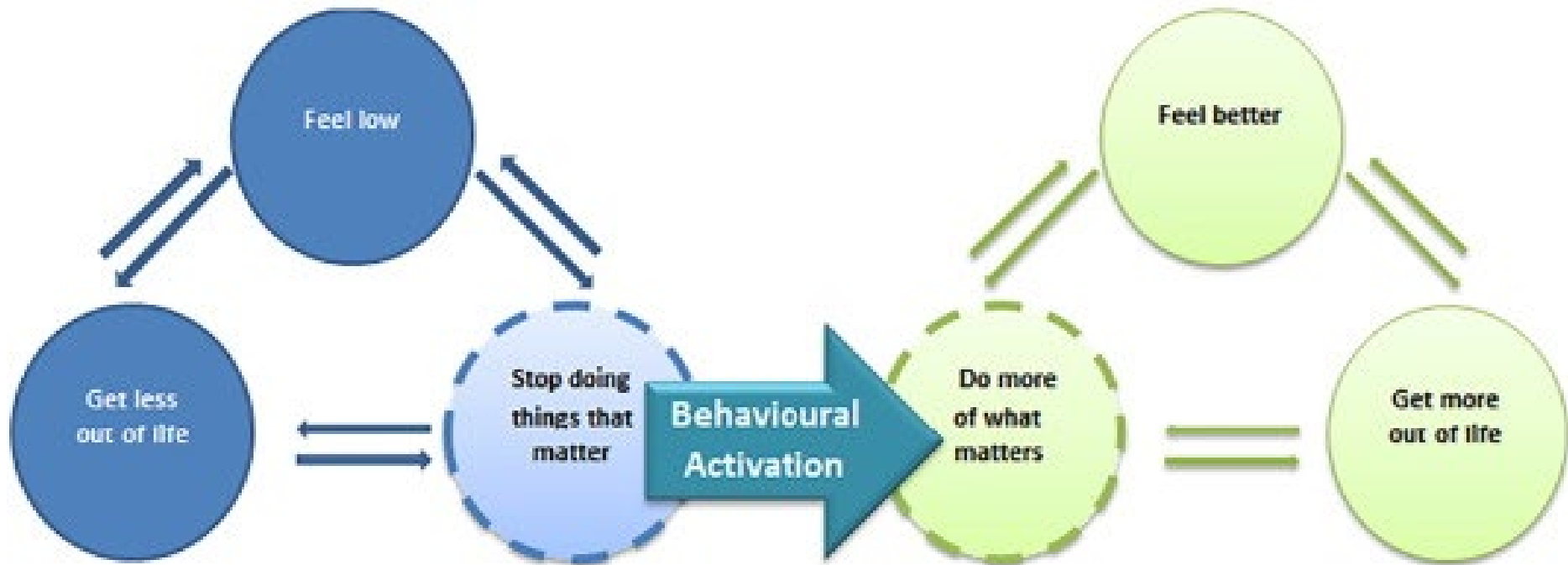
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Can also intervene on behaviors

Vicious cycle of depression

Positive cycle of activity



Evidence-Based Therapy



CBT is one of the most extensively researched of the psychotherapies.



CBT has been successfully applied to the treatment of a wide range of psychiatric disorders such as depression, anxiety disorders, substance abuse, and eating disorders.



It has also been shown that CBT tends to yield more durable effects than medications once they are discontinued (e.g., Butler et al., 2006; Marks et al., 1993; Barlow & Lehman, 1996; Barlow et al., 2000; Nadiga et al., 2003).



- EXPOSURE
- DIALECTICAL BEHAVIOR THERAPY
- INTEGRATIVE BEHAVIORAL COUPLES THERAPY
- ACCEPTANCE AND COMMITMENT THERAPY
- COGNITIVE THERAPY
- SCHEMA THERAPY
- BEHAVIORAL ACTIVATION
- COGNITIVE PROCESSING THERAPY (CPT)
- MINDFULNESS BASED COGNITIVE THERAPY
- MINDFULNESS-INTEGRATED COGNITIVE BEHAVIORAL THERAPY
- FUNCTIONAL ANALYTIC PSYCHOTHERAPY
- AND OTHER EVIDENCE-BASED TREATMENTS

