

# Cognitive Behavioral Therapy: an overview

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# Learning objectives

- Understand the basic concepts of cognitive behavioral therapy (CBT)
- Identify the symptoms/disorders that CBT is used to treat
- Understand evidence-based treatment
- Discuss the strengths and limitations of CBT as a treatment model

# What is cognitive behavioral therapy?

- Cognitive behavioral therapy (CBT) combines principals of both cognitive and behavioral therapies.
- **Cognitive therapy** emphasizes the role of thinking in “how we feel and act.”
- Therapy focuses on:
  - Identifying negative patterns of thinking
  - How to change these unhealthy thoughts to healthier beliefs

Healthy thoughts will then lead to more desirable reactions and outcomes.

# What is cognitive behavioral therapy? (cont.)

- **Behavioral therapy** focuses on replacing damaging habits with pro-social behaviors through skill building. This is done by:
  - Focusing on decreasing the connections between stimuli (people, situations or events) and negative reactions to them.
  - Learning and applying new skills to improve reactions.

## Additional approaches to CBT

Rational Emotive Behavior Therapy (REBT)

Rational Living Therapy (RLT)

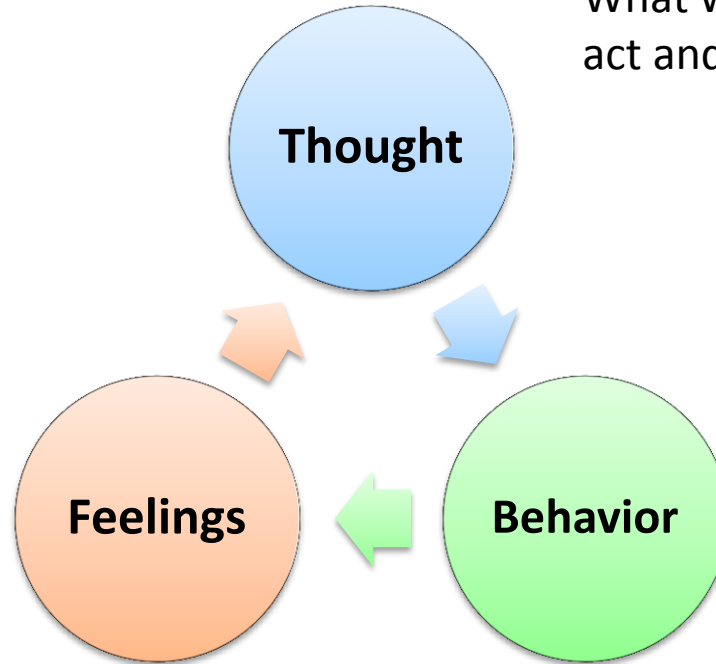
Trauma Focused Cognitive Behavioral Therapy (TF-CBT)

Dialectic Behavior Therapy (DBT)

# Basic principles of CBT

CBT focuses on exploring the relationship between thoughts, feelings and behaviors.

What we *feel* affects what we think and do.



What we *think* affects how we act and feel.

What we *do* affects how we think and feel.

# CBT terminology

- CBT views behavior as either "adaptive" or "maladaptive", "learned" vs "unlearned", and "rational" vs "irrational."
- Behavior that is rational meets these three criteria:
  - It is based on fact
  - It helps us achieve our goals
  - It helps us feel how we want to feel
- Behavior that does not meet these criteria is not rational.

# CBT fundamentals

- CBT believes that maladaptive thought patterns are created from faulty perceptions about others, the world and themselves.
- Individuals interact with the world through their personal view. If the individual's view is incorrect or their reasoning is lacking, then emotions and behavior may become disordered.
- CBT emphasizes the importance of individuals learning how to identify and change irrational thought patterns that have influenced their behavior.

# CBT fundamentals (cont.)

- This healthier thinking can lead to feeling better and reacting better even if people, situations or events do not change.
- CBT is generally a short-term treatment option that has been shown to effectively help individuals overcome a wide variety of maladaptive behaviors/ disorders.
- While other forms of therapy can take months or years to resolve issues, CBT can achieve results in a shorter periods of time (a few weeks to a few months).



# CBT fundamentals (cont.)

- Changes with CBT tend to occur faster due to direct teaching by the therapist and routine homework for the individual to complete outside of the therapy setting.
- The purpose of homework is to practice healthy ways of thinking and reacting to people, situations or events.
- Homework assignments may make use of charting thoughts/feelings/behavior to reinforce healthy ways of thinking or practicing calming techniques such as relaxation, visual imagery and affirmations.

# CBT fundamentals (cont.)

It is important to understand that there are factors that affect the length of CBT. These include:

- The condition of the individual at the start of treatment
- The number of symptoms and their severity
- The individual's motivation to succeed
- The individual's expectations



# Assessment

- In order to overcome maladaptive and irrational thoughts and behaviors, a therapist begins helping the individual identify the problematic beliefs and behaviors. This is known as a functional assessment.
- A **functional assessment** is the process of uncovering unhealthy patterns of thought and how they impact self-destructive behaviors and beliefs.

## Example of a functional assessment

Antecedents (What happened before?)	Behaviors (What did you do)	Short-Term Consequences (What was the result 1 second and 1 hour following the behavior?)	Long-Term Consequences (What were the lasting results?)
<p>I told my foster mom that I didn't have any homework. I didn't do my homework and she found out and yelled at me.</p> <p>I felt bad for yelling at my foster mom and telling a lie</p>	<p>I yelled back at her</p> <p>I cut my arm with a pair of scissors</p>	<p>I felt better for standing up for myself and then I started to feel bad about yelling at her telling her a lie.</p> <p>I felt at peace because felt a release of frustration.</p>	<p>My foster mom won't trust me when I tell her something.</p> <p>I now have more scars on my arm. I have to hide my arm from my foster mom so I won't get into trouble.</p>

# Assessment (cont.)

During the assessment phase, the therapist may use other assessment methods, such as:

- Self-report symptom inventories: Beck Depression Inventory, Beck Anxiety Inventory, State-Trait Anxiety Inventory
- Problem lists: The therapist will ask the individual to identify 5 to 10 difficulties from the patient.

# Assessment (cont.)

Example of a problem list

Problem	Frequency	Severity	Impact
Feelings of worthlessness	Occurs 4 out of 7 days	Very intense when present. Sometimes involves self-harming and suicidal thoughts	Highly distressing; influences school work and social/ relationships
Socially Isolated	Stay at home 6 out of 7 days	Severe isolation Limited social contacts; stopped cheerleading	Highly distressing; socially debilitating, estranged from peers/ friends
Fatigue	Occurs daily	Moderate to severe Impacts ability to focus at school and while completing homework	Decreased activity level, falls asleep in class, inability to stay on task and complete assignments.

# Treatment strategies

- Following the assessment phase, the therapist will teach the individual how to identify distorted cognitions, how to discriminate between their own thoughts and reality, learn about how thinking influences their feelings and how to monitor their own thoughts.
- The therapist will work with the individual by challenging maladaptive thoughts and beliefs, teaching, modeling/roleplaying positive coping skills (i.e., problem solving, communication skills, relaxation skills, identifying alternative activities).

# Evolution of CBT

- Due to the increased focus on trauma and the use of trauma sensitive treatment, a new form of CBT was developed.
- The goal of TF-CBT is to help address the biopsychosocial needs of individuals who have suffered trauma.
- TF-CBT combines trauma-sensitive interventions with cognitive behavioral therapy.
- ❖ Additional information on TF-CBT will be presented in a separate training.

# What is an evidence-based treatment?

- Evidence based interventions (EBIs) are treatments that have been proven effective through outcome evaluations.
- EBIs are treatments that are likely to be effective in altering target behavior if executed in the manner in which it was designed/researched.
- EBIs are only useful for a specified range of problems, which means that the treatment provider must pair the correct treatment to the right situation.



# CBT as evidence-based intervention

CBT is effective for a variety of conditions:

- Mood Disorders
- Anxiety
- Addictions/dependence (substance abuse, gambling)
- Attention Deficient Hyperactivity Disorder
- Conduct disorders/oppositional defiant disorder
- Low self-esteem
- Grief and loss

# Examples of CBT use

- A 14 year-old male who has been struggling with cannabis abuse has frequent anger outbursts and is noncompliant with simple requests.
- A 17 year-old female who is suffering from depression and low self-esteem participates in self-harm activities (cutting). She had a two prior suicide attempts.

# Examples where CBT would not be appropriate

- A 4-year old male who has been diagnosed with an expressive language disorder and has frequent anger outbursts and difficulty self soothing
- A 12-year old female who has a below average IQ and struggles with processing information becomes frustrated and bangs her head against the wall and scratches herself

# Strengths of CBT



- CBT is instructive and structured (teaches/skills building)
- CBT is a short-term treatment option
- CBT emphasize getting better rather than feeling better (correcting the underlying behavior creates long-term results)
- CBT is cross-cultural (based on universal laws of human behavior) and uses client focused goals
- CBT can be researched (techniques are clearly defined)

# Limitations of CBT

- CBT may not be effective for individuals with more complex mental health issues or those with learning difficulties because the client needs to have the capacity to bring change to themselves.
- CBT can be used with children, adolescents and adults, but tends to work best with older children and teens.
- CBT has a narrow focus and ignores important issues like family, personal history and wider emotional problems.
- Attending regular CBT sessions and carrying out extra work between sessions can be time consuming.
- CBT focuses on the “here and now” so it may not address the possible underlying causes of mental health conditions.

# Resources

- **National Alliance on Mental Illness:**  
[www.nami.org/Learn-More/Treatment/Psychotherapy](http://www.nami.org/Learn-More/Treatment/Psychotherapy)
- **The Anxiety Network:**  
<http://anxietynetwork.com/content/cognitive-behavioral-therapy>
- **Mayo Clinic:**  
[www.mayoclinic.org/tests-procedures/cognitive-behavioral-therapy/basics/definition/prc-20013594](http://www.mayoclinic.org/tests-procedures/cognitive-behavioral-therapy/basics/definition/prc-20013594)
- **The American Institute for Cognitive Therapy:**  
[www.cognitivetherapynyc.com/helpful-links.aspx](http://www.cognitivetherapynyc.com/helpful-links.aspx)

# Questions

