

PSYCHOLOGICAL THERAPIES: COGNITIVE BEHAVIOURAL THERAPY

Introduction

Cognitive therapists believe that distorted thinking is part of being a human being. Therefore, they see cognitive behavioural therapy (CBT) as a therapy for *everyone*, not just those who have been diagnosed with a mental disorder. There are a number of *cognitive therapies* in use today, and all try to change the way that people perceive and think about the world. These include **modelling, Rational Emotive Therapy, cognitive restructuring therapy, and attributional therapy.**

Cognitive restructuring as a form of CBT

To illustrate how this approach works, let's use the case of a person who has *obsessional thoughts* about contamination by germs. As a result, the person has developed a number of *compulsive behaviours* designed to reduce anxiety about being contaminated by germs. These include not touching foods with the hands before eating it.

The first stage in therapy is for the therapist to identify the person's **maladaptive and faulty belief systems** that are causing the abnormal behaviour:

Belief 1: All germs kill people

Belief 2: Dirty hands have germs on them

Belief 3: If I eat food with dirty hands, the germs will contaminate the food and kill me

Belief 4: My hands can never be completely clean, so I must avoid touching food I am going to eat if I want to stay alive

The second stage involves the therapist **challenging** these faulty beliefs. This can be done by **argument** or **example** or both. Thus, the therapist will point out the false beliefs and perform a behaviour which contradicts the person's belief system:

Therapist: Your belief that all germs kill people is not actually true. You'd have to be really unlucky to die from contamination by most germs

Person: You are wrong. All germs kill people

Therapist: So if I lick my fingers, which have germs on them, I will die?

Person: Yes

Therapist: Watch. I have just licked my fingers, and I'm still alive. Your belief must be wrong

Person: No. Because you have done this before with other people, you are immune to germs

Therapist: But I didn't die *the first time* I contaminated myself

Person: You were lucky

Therapist: Perhaps, but it is possible that your belief system is wrong

The third stage involves encouraging the person to behave in ways which challenge their faulty beliefs, though not in the sometimes extreme way demonstrated by the therapist. This is called **reality testing**, and in some forms of CBT (such as Rational Emotional therapy) may be extremely confrontational. The person might also be taught a **relaxation technique** to help reduce anxiety when reality testing is taking place. The aim is to change *for once and for all* the person's faulty beliefs, and the therapy is complete when this occurs. Behaviour change *without* cognitive change is unlikely to produce a 'cure'.

Evaluating the use of CBT

CBT usually takes place once a week or once a fortnight, and may last from 5 to 20 sessions. This is one of the strengths of CBT, since psychoanalysis and systematic desensitisation typically require more sessions than this. However, the main strength of CBT is that it has been shown to be **effective** in treating disorders like depression, anxiety, and OCD, and is far more effective than other treatment methods such as psychotherapeutic drugs.

The main weakness of CBT is that on its own it isn't effective with other disorders. For example, schizophrenics do not respond well to CBT on its own. Perhaps this is not surprising. If schizophrenia has a physical cause then no amount of CBT is going to be beneficial. However, drugs and CBT

in conjunction does seem to more effective than either on its own. This is because drugs reduce the psychotic features of schizophrenia and whilst the person is in this state CBT allows them to become aware of how irrational their thoughts are.

Critics of CBT also point to the *ethical issues* it can raise. For example, some people may find the approach threatening simply because it *does* challenge their way of thinking. A final point is that not all thought processes are irrational, and some people who perceive the world in, for example, a depressive way are actually perceiving it accurately ('**depressive realism**'). In other words, we might simply have to accept that, for example, we won't ever be a professional footballer. The aim of CBT here is to help us deal with these rational thoughts more positively.