

HEALTHY MINDS
A WEEKLY COLUMN ALL ABOUT MENTAL WELLNESS
Elliott B. Sewell, MAE, LPCC, NCC

Cognitive Behavior Therapy

Cognitive Behavior Therapy is a big word but easy to understand. Please read on. There are many techniques used in psychotherapy; CBT encompasses several different approaches to helping a client solve problems and live their lives more effectively. Every clinician has his or her own approach following one or a combination of methods that work for them, and usually ones that are tried and true – and accepted by scientifically accepted research that prove to be as effective, or more effective than dosing clients with pharmaceutical products that often have harmful side-effects or are addictive.



One such method is called Cognitive-Behavioral Therapy in which the way we think about ourselves, those around us, and our life in general determines how we feel and how we act. Cognitive-Behavioral Therapy (CBT) is really an umbrella term for a certain type of therapies that are similar; they were developed somewhat independently of one another by different mental health professionals and include: Rational Behavior Therapy (RBT), Rational Emotive Behavior Therapy (REBT), Rational Living Therapy (RLT), Cognitive Therapy (CT), and Dialectic Behavior Therapy. They all share several common traits.

- Our **THOUGHTS**, rather than external factors (other people, outside events, or our living situation) are the cause of our behavior and the way we feel. Even if the external factors stay the same and do not change, we can change our thinking and behavior by changing the way we think about these factors.
- CBT is effective in the short term, and has results that endure. It is not a process that goes on indefinitely, like psychoanalysis; on the average it lasts about 16 sessions, ending by mutual agreement between client and therapist.
- While it is important to have a good and trusting relationship with your therapist, the main cause for positive change is the client learning how to think differently about his or situation, and then acting upon that new knowledge.
- Therapists learn what goals the client wants to achieve and then help the client reach those goals. It is a cooperative effort. The therapist listens to, encourages, and instructs the client (but does not give advice); the clients relate their concerns, learn about themselves through the therapist's active encouragement, and then put their new knowledge into practice.
- The basic ideas of most varieties of CBT date back nearly 2400 years ago amongst the Greek philosophers (stoics), who taught how beneficial it is to feel, at the worst, calm in the face of unwelcome situations. Individuals come to therapy to feel better about their life situations. They come with two problems: the first is the negative situation itself; the second is their negative feelings about the problem. Once we learn to remain cool, calm, and collected about our situation, we are already a step ahead and then in a much better state of mind to fix the problems.

- Because cognitive-behavior therapists want to understand the needs of their clients, they ask lots of questions. These in turn direct the client to come up with and ask him or herself those other vital questions they need to ask in order to find truthful responses. In other words, the therapist guides the client to the path, but the client finds the truth.
- Every session has a goal in mind; the therapist assists the client to formulate goals for him/herself, but does not set the goals. The client learns not WHAT to do, but HOW to do things in a new way.
- CBT is an educational process, where the client UNLEARNS old, dysfunctional emotional and behavioral reactions and LEARNS new ways. New ways become habitual, and clients learn to be in charge of a situation instead of the situation being in charge of them. They learn how and why their old behavior brought them down, and how and why their new behavior is working so well.
- CBT is a learning process, and is not just talk.
- The central theme of CBT is rational thinking based on what really exists and is true. Many of us get upset because our thinking about situations is based on incomplete information, speculation, hearsay, rumor, lies, or over-sensitive reaction. Once we see the situation more clearly we can respond more effectively. The therapist is the guide.
- Sometimes CBT therapists give brief homework assignments between sessions, such as reading a certain article, or jotting down notes about certain behaviors – when they occurred and what the details were, or writing a short paragraph or list of certain behaviors from the past, or a list of goals (and so on).
- Clients are encouraged to put their new ways of reacting into everyday use.

TIP OF THE WEEK: Prolonged grief disorder, which is not now officially recognized as a separate mental disorder can persist and lead to disability, suicidal thoughts and behavior, and physical symptoms, including high blood pressure, cancer, cardiac problems, and a lower quality of life, in general. The American Psychiatric Association, which establishes criteria, is looking into establishing this serious malady as an official diagnosable condition.

WEBSITE OF THE WEEK: Article on CBT from the Encyclopedia of Mental Disorders - <http://www.minddisorders.com/Br-Del/Cognitive-behavioral-therapy.html>