

## **Cognitive Therapy for Challenging Problems: What to Do When the Basics Don't Work**

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## **Considering the Extent of a Problem**

- Is this a problem that arises briefly within one session?
- Is it a problem that persists within a session (or between sessions)?
- Or does the problem arise in many sessions?

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## **Diagnosing Therapeutic Problems**

- Is there a practical problem?
- Does the patient have interfering assumptions?
- Both?

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## **Practical Problems**

### Factors External to Therapy

- Amount of treatment
- Format of treatment
- Organic problem
- Medication
- Adjunctive treatment

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Is the patient receiving an appropriate dose of therapy?

- Should the patient be seen more often? Less often?
- Should the patient be at a higher or lower level of care (outpatient versus partial hospitalization versus hospitalization)?

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Is the format of therapy appropriate?

- Should the patient be in individual therapy?
- Group therapy?
- Couples therapy?
- Family therapy?

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Could there be an undiagnosed organic problem?

- Should the patient have a physical check-up with a primary care physician or specialist?

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Is the patient's medication appropriate?

- If the patient is not taking medication, should he/she be?
- If the patient is taking medication, is he/she fully compliant?
- Is the patient having significant side effects?

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Does the patient need adjunctive treatment?

- Should the patient be referred to a psychopharmacologist?
- Pastoral counselor?
- Nutritionist?
- Vocational counselor?

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## Practical Problems

Therapist Error

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## Diagnosing Therapist Error

1. Do I have a strong therapeutic alliance with the patient?
2. Did we set concrete, achievable behavioral goals that are under the patient's control and that he/she really wants to achieve?
3. Does the patient really agree with all parts of the cognitive model?

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4. Have I varied treatment according to the cognitive formulation of the patient's disorder?

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### Treatment-Interfering Assumptions

- About engaging in treatment
- About experiencing negative emotion
- About solving problems
- About getting better

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5. Do I have a valid conceptualization of the patient and do I base treatment on this conceptualization?

6. Did I structure the session adequately?

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7. Did I socialize patient to therapy adequately?

8. Have I identified and modified *key* cognitions and behaviors?

9. Am I implementing techniques effectively?

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### Complex cognitive model scenario

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#### **Situation**

*Husband comes home and yells at patient, calling her degrading names, because the children are fussy, whiny, demanding*



#### **Automatic thoughts**

*He's right. I'm bad. It's my fault they're cranky. I should have been able to handle this better.*



#### **Reaction**

Emotion: *Overwhelming sadness and shame*  
Physiological: *Face becomes very hot*



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#### **Additional automatic thoughts**

*I can't stand it when he's angry at me!  
Doesn't he know I tried to keep things calm!  
He expects too much from me. I hate this!*

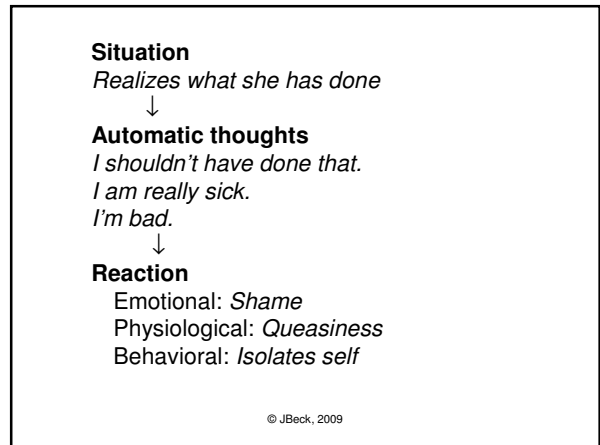
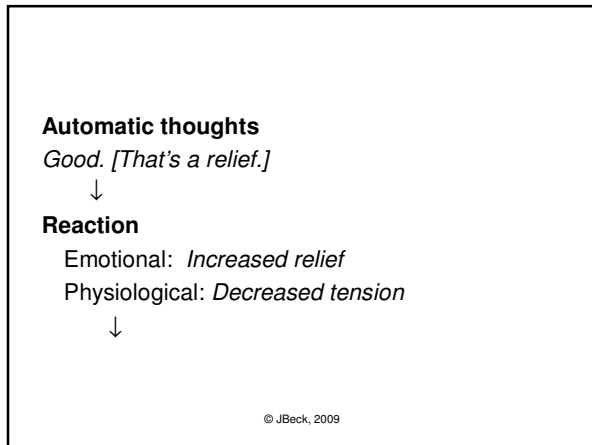
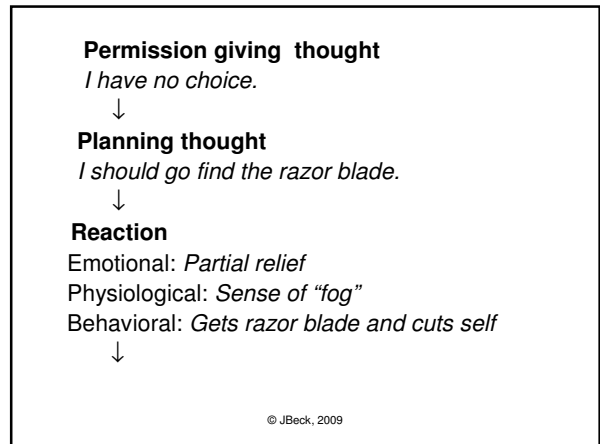
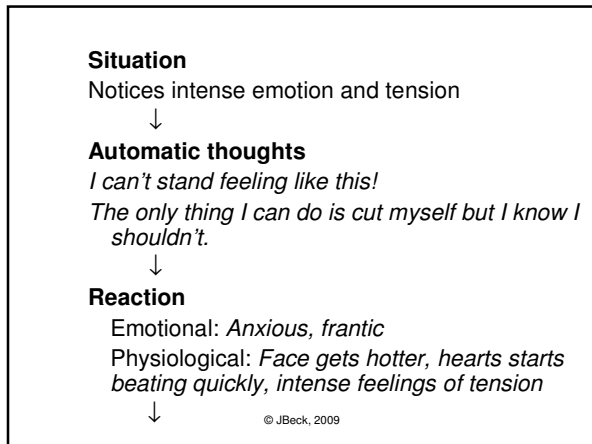


#### **Reaction**

Emotion: Anger  
Physiological: Muscle tension in face, arms, chest



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**Identifying Assumptions**

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- Identifying Assumptions**
- **Provide sentence stems, "If. . ., then . . ."**  
"If I confront others, I'll get hurt."
  - **Change form of a rule**  
"I should never confront others."
  - **Change form of an attitude**  
"It's terrible to confront others."
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## Broad Conditional Assumptions

- **Link coping behavior with core belief**

“If I engage in this behavior, I’ll be okay. But if I don’t engage in this behavior, my core belief will come true.”

“If I avoid confrontation, I’ll be okay. But if I go ahead and confront others, I’ll get hurt.”

(core belief of vulnerability)

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## Narrow versus Broad Assumptions

### **Broad assumption**

“If I experience negative emotion, I’ll fall apart.”

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### **Narrow subsets of** *“If I experience negative emotion, I’ll fall apart.”*

“If I focus on what my therapist is saying, I’ll feel terrible and I won’t be able to stand it.”

“If I do my therapy homework, I’ll have to think about my problems and I won’t be able to tolerate the bad feelings that I’ll have.”

“If I think about (even gently) confronting my mother, I’ll get so anxious, I might go crazy.”

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