

S E C O N D E D I T I O N

COGNITIVE BEHAVIOR THERAPY

Basics and Beyond



Judith S. Beck

Foreword by Aaron T. Beck

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SECOND EDITION



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FOREWORD

I am delighted that the success of the first edition of *Cognitive Therapy: Basics and Beyond* has prompted this revision. It offers readers fresh insights into this approach to psychotherapy, and, I trust, will be welcomed by those who are versed in cognitive behavior therapy as well as students new to the field. Given the tremendous amount of new research and expansion of ideas that continue to move the field in exciting new directions, I applaud the efforts to expand this volume to incorporate some of the different ways of conceptualizing and treating our patients.

I would like to take the reader back to the early days of cognitive therapy and its development since then. When I first started treating patients with a set of therapeutic procedures that I subsequently labeled “cognitive therapy” (and now refer to as “cognitive behavior therapy”), I had no idea where this approach—which departed so strongly from my psychoanalytic training—would lead me. Based on my clinical observations and some systematic clinical studies and experiments, I theorized that there was a thinking disorder at the core of the psychiatric syndromes such as depression and anxiety. This disorder was reflected in a systematic bias in the way the patients interpreted particular experiences. By pointing out these biased interpretations and proposing alternatives—that is, more probable explanations—I found that I could produce an almost immediate lessening of the symptoms. Training the patients in these cognitive skills helped to sustain the improvement. This concentration on here-and-now problems appeared to produce almost total alleviation of symptoms in 10 to 14 weeks. Later clinical tri-

als by my own group and clinicians/investigators elsewhere supported the efficacy of this approach for anxiety disorders, depressive disorders, and panic disorder.

By the mid-1980s, I could claim that cognitive therapy had attained the status of a “system of psychotherapy.” It consisted of (1) a theory of personality and psychopathology with solid empirical findings to support its basic postulates; (2) a model of psychotherapy, with sets of principles and strategies that blended with the theory of psychopathology; and (3) solid empirical findings based on clinical outcome studies to support the efficacy of this approach.

Since my earlier work, a new generation of therapists/researchers/teachers has conducted basic investigations of the conceptual model of psychopathology and applied cognitive behavior therapy to a broad spectrum of psychiatric disorders. The systematic investigations explore the basic cognitive dimensions of personality and the psychiatric disorders, the idiosyncratic processing and recall of information in these disorders, and the relationship between vulnerability and stress.

The applications of cognitive behavior therapy to a host of psychological and medical disorders extend far beyond anything I could have imagined when I treated my first few cases of depression and anxiety with cognitive therapy. On the basis of outcome trials, investigators throughout the world, but particularly the United States, have established that cognitive behavior therapy is effective in conditions as diverse as posttraumatic stress disorder, obsessive–compulsive disorder, phobias of all kinds, and eating disorders. Often in combination with medication, it has been helpful in the treatment of bipolar disorder and schizophrenia. Cognitive therapy has also been found to be beneficial in a wide variety of chronic medical disorders such as low back pain, colitis, hypertension, and chronic fatigue syndrome.

With a smorgasbord of applications of cognitive behavior therapy, how can an aspiring therapist begin to learn the nuts and bolts of this therapy? Extracting from *Alice in Wonderland*, “Start at the beginning.” This now brings us back to the question at the beginning of this foreword. The purpose of this book by Dr. Judith Beck, one of the foremost second-generation cognitive behavior therapists (and who, as a teenager, was one of the first to listen to me expound on my new theory), is to provide a solid basic foundation for the practice of cognitive behavior therapy. Despite the formidable array of different applications of cognitive behavior therapy, they all are based on fundamental principles outlined in this volume. Even experienced cognitive behavior therapists should find this book quite helpful in sharpening their conceptualization skills, expanding their repertoire of therapeutic techniques, planning more effective treatment, and troubleshooting difficulties in therapy.

Of course, no book can substitute for supervision in cognitive behavior therapy. But this book is an important volume and can be supplemented by supervision, which is readily available from a network of trained cognitive therapists (see Appendix B).

Dr. Judith Beck is eminently qualified to offer this guide to cognitive behavior therapy. For the past 25 years, she has conducted numerous workshops and trainings in cognitive behavior therapy, supervised both beginners and experienced therapists, helped develop treatment protocols for various disorders, and participated actively in research on cognitive behavior therapy. With such a background to draw on, she has written a book with a rich lode of information to apply this therapy, the first edition of which has been the leading cognitive behavior therapy text in most graduate psychology, psychiatry, social work, and counseling programs.

The practice of cognitive behavior therapy is not simple. I have observed a number of participants in clinical trials, for example, who can go through the motions of working with “automatic thoughts,” without any real understanding of the patients’ perceptions of their personal world or any sense of the principle of “collaborative empiricism.” The purpose of Dr. Judith Beck’s book is to educate, to teach, and to train both the novice and the experienced therapist in cognitive behavior therapy, and she has succeeded admirably in this mission.

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PREFACE

The past two decades have been an exciting time in the field of cognitive therapy. With the explosion of new research, cognitive behavior therapy has become the treatment of choice for many disorders, not only because it reduces people's suffering quickly and moves them toward remission, but also because it helps them stay well. A central mission of our nonprofit organization, the Beck Institute for Cognitive Behavior Therapy, is to provide state-of-the-art training to health and mental health professionals in Philadelphia and throughout the world. But exposure to this type of psychotherapy through workshops and various training programs is not enough. Having trained many thousands of people in the past 25 years, I still find that people need a basic manual to read and to which they can repeatedly refer if they are to master the theory, principles, and practice of cognitive behavior therapy.

This book is designed for a broad audience of health and mental health professionals, from those who have never been exposed to cognitive behavior therapy before to those who are quite experienced but wish to improve their skills, including how to conceptualize patients cognitively, plan treatment, employ a variety of techniques, assess the effectiveness of their treatment, and specify problems that arise in a therapy session. To present the material as simply as possible, I have chosen one patient (whose name and identifying characteristics I have changed) to use as an example throughout the book. Sally is an ideal patient in many ways, and her treatment clearly exemplifies "standard" cognitive behavior therapy for uncomplicated, single-episode depression. Although the treatment described is for a straightforward case of

depression with anxious features, the techniques presented also apply to patients with a wide variety of problems. References for other disorders are provided so that the reader can learn to tailor treatment appropriately.

The first edition of this book was published in more than 20 languages, and I received feedback from all over the world, much of which I have incorporated into this new edition. I have included new material on evaluation and behavioral activation, the Cognitive Therapy Rating Scale (used in many research studies and training programs to measure therapist competency), and a Cognitive Case Write-Up (based on the template provided by the Academy of Cognitive Therapy as a prerequisite to receiving certification). I have also integrated a greater emphasis on the therapeutic relationship, guided discovery and Socratic questioning, eliciting and using patients' strengths and resources, and homework. I have been guided by my clinical practice, teaching, and supervision; by research and publications in the field; and by discussions with students and colleagues, from novice to expert, from many different countries, who specialize in various aspects of cognitive behavior therapy and in many different disorders.

This book could not have been written without the groundbreaking work of the father of cognitive therapy, Aaron T. Beck, who is also my father and an extraordinary scientist, theorist, practitioner, and person. I have also learned a great deal from every supervisor, supervisee, and patient with whom I have worked. I am grateful to them all.

JUDITH S. BECK, PhD

CONTENTS

Chapter 1.	Introduction to Cognitive Behavior Therapy	1
	What Is Cognitive Behavior Therapy? 2	
	What Is the Theory Underlying Cognitive Behavior Therapy? 3	
	What Does the Research Say? 4	
	How Was Beck’s Cognitive Behavior Therapy Developed? 5	
	What Are the Basic Principles of Treatment? 6	
	What Is a Therapy Session Like? 11	
	Developing as a Cognitive Behavior Therapist 12	
	How to Use This Book 14	
Chapter 2.	Overview of Treatment	17
	Developing the Therapeutic Relationship 17	
	Planning Treatment and Structuring Sessions 21	
	Identifying and Responding to Dysfunctional Cognitions 22	
	Emphasizing the Positive 26	
	Facilitating Cognitive and Behavioral Change between Sessions (Homework) 27	
Chapter 3.	Cognitive Conceptualization	29
	The Cognitive Model 30	
	Beliefs 32	
	Relationship of Behavior to Automatic Thoughts 36	

Chapter 4. The Evaluation Session	46
Goals of the Assessment Session	47
Structure of the Assessment Session	48
Starting the Evaluation Session	48
The Assessment Phase	49
Final Part of the Assessment	53
Involving a Family Member	53
Relating Your Impressions	53
Setting Initial Goals for Treatment and Relating Your Treatment Plan	54
Expectations for Treatment	56
Devising an Initial Cognitive Conceptualization and Treatment Plan	57
Chapter 5. Structure of the First Therapy Session	59
Goals and Structure of the Initial Session	59
Setting the Agenda	60
Doing a Mood Check	62
Obtaining an Update	63
Discussing the Diagnosis	65
Problem Identification and Goal Setting	68
Educating the Patient about the Cognitive Model	70
Discussion of Problem or Behavioral Activation	74
End-of-Session Summary and Setting of Homework	74
Feedback	76
Chapter 6. Behavioral Activation	80
Conceptualization of Inactivity	80
Conceptualization of Lack of Mastery or Pleasure	81
Using the Activity Chart to Assess the Accuracy of Predictions	97
Chapter 7. Session 2 and Beyond: Structure and Format	100
The First Part of the Session	101
The Middle Part of the Session	112
Final Summary and Feedback	118
Session 3 and Beyond	120
Chapter 8. Problems with Structuring the Therapy Session	123
Therapist Cognitions	123
Interrupting the Patient	124
Socializing the Patient	125
Engaging the Patient	125
Strengthening the Therapeutic Alliance	126
Mood Check	127
Brief Update	129

Bridge between Sessions	130
Review of Homework	133
Discussion of Agenda Items	133
Setting New Homework	134
Final Summary	135
Feedback	135
Chapter 9. Identifying Automatic Thoughts	137
Characteristics of Automatic Thoughts	137
Explaining Automatic Thoughts to Patients	140
Eliciting Automatic Thoughts	142
Teaching Patients to Identify Automatic Thoughts	155
Chapter 10. Identifying Emotions	158
Distinguishing Automatic Thoughts from Emotions	159
Difficulty in Labeling Emotions	162
Rating Degrees of Emotion	164
Using Emotional Intensity to Guide Therapy	165
Chapter 11. Evaluating Automatic Thoughts	167
Selecting Key Automatic Thoughts	167
Questioning to Evaluate an Automatic Thought	170
Assessing the Outcome of the Evaluation Process	176
Conceptualizing Why the Evaluation of an Automatic Thought Was Ineffective	176
Using Alternate Methods to Help Patients Examine Their Thinking	178
When Automatic Thoughts Are True	182
Teaching Patients to Evaluate Their Thinking	184
Taking a Shortcut: Not Using the Questions at All	185
Chapter 12. Responding to Automatic Thoughts	187
Reviewing Therapy Notes	188
Evaluating and Responding to Novel Automatic Thoughts between Sessions	192
Responding to Automatic Thoughts in Other Ways	197
Chapter 13. Identifying and Modifying Intermediate Beliefs	198
Cognitive Conceptualization	199
Modifying Beliefs	214
Chapter 14. Identifying and Modifying Core Beliefs	228
Categorizing Core Beliefs	231
Identifying Core Beliefs	233
Presenting Core Beliefs	235

Educating Patients about Core Beliefs and Monitoring Their Operation	235
Developing a New Core Belief	239
Strengthening New Core Beliefs	240
Modifying Negative Core Beliefs	241
The Core Belief Worksheet	242
Chapter 15. Additional Cognitive and Behavioral Techniques	256
Problem Solving and Skills Training	256
Making Decisions	258
Refocusing	260
Measuring Moods and Behavior Using the Activity Chart	263
Relaxation and Mindfulness	263
Graded Task Assignments	264
Exposure	265
Role-Playing	267
Using the “Pie” Technique	268
Self-Comparisons and Credit Lists	272
Chapter 16. Imagery	277
Identifying Images	277
Educating Patients about Imagery	279
Responding to Spontaneous Images	280
Inducing Imagery as a Therapeutic Tool	289
Chapter 17. Homework	294
Setting Homework Assignments	295
Increasing Homework Adherence	299
Conceptualizing Difficulties	308
Reviewing Homework	315
Chapter 18. Termination and Relapse Prevention	316
Early Activities	316
Activities Throughout Therapy	318
Near Termination Activities	322
Booster Sessions	327
Chapter 19. Treatment Planning	332
Accomplishing Broad Therapeutic Goals	333
Planning Treatment across Sessions	333
Creating a Treatment Plan	334
Planning Individual Sessions	336
Deciding Whether to Focus on a Problem	340
Modifying Standard Treatment for Specific Disorders	344