

Cognitive Behavioural Therapy Formulation

Defining the problem and what is
Maintaining the problem

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Developed through the work of Aaron T Beck & others in the 1960's/70's

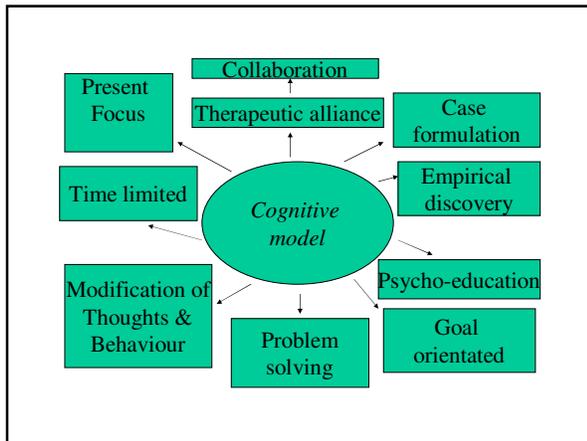
- short-term
- present-orientated
- treatment for psychological and emotional disorders.

Directed towards,

- Problem-solving skills
- Modifying unhelpful thinking
- And unhelpful behaviours.

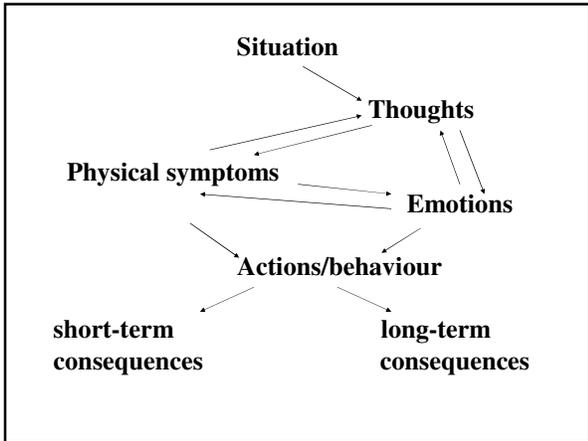
Since been adapted to work with a diverse set of mental health problems.

“In a nutshell, the cognitive model proposes that distorted or dysfunctional thinking (which influences the patient’s mood and behaviour) is common to all psychological disturbances. Realistic evaluation and modification of thinking produces an improvement in mood and behaviour. Enduring improvement results from modification of the patient’s underlying dysfunctional beliefs.” J Beck 1995.



- Principles of the model**
(taken from Beck, J, 1995)
- Therapeutic alliance.
 - Collaboration.
 - Goal orientated & measurable.
 - Focus on the present. Problem solving.
 - Time limited 18-16 sessions, or more for complex.
 - Psycho-education, becoming own therapist.
 - Model adheres to set structure of therapy with agenda & focus for each session.
 - Empirical discovery, case formulation.
 - Modification of cognitions and behaviours to more helpful.

- Maintenance Formulation**
- Provides the framework to understand what is maintaining the problem.
 - Is a continuing, developing process throughout therapy as & when necessary.
 - Offers an explanation to the client of the problem.
 - Provides a base for a treatment plan.
 - Begins with an example of a recent situation when distressed and identifies **thoughts, emotions, physical changes**, at the time.
 - Identifies **actions & behaviours** maintaining the problem.



Case formulation practice

1. Two people ask OPEN QUESTIONS to identify a recent situation when the client felt uncomfortable, the thoughts going through their mind at that time, how they felt emotionally & physically, and what actions they took to deal with how they felt.
2. In groups of three, one person read vignette and role play the client.
3. Feedback to the client what you see keeping the problem going.

References

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- Williams C, Garland A. (2002) A Cognitive Behavioural Therapy assessment model for use in everyday clinical practice. Advances in Psychiatric Treatment, vol. 8. pp 172 – 179
- Safran, J.D. & Segal Z.V. (1996). Interpersonal Process in Cognitive Therapy. Jason Aronson
