PSYC 534 Principles of Cognitive Behavioral Therapy Spring 2014

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Assigned Texts:

- 1. Beck, J. (2011). Cognitive behavior therapy, second edition: Basics and beyond. New York: Guilford.
- 2. Persons, J. (2008). The case formulation approach to cognitive-behavioral therapy. New York: Guilford.
- 3. Readings posted on D2L.

Recommended Websites:

-Association for Behavioral and Cognitive Therapies <u>http://www.abct.org</u> -Evidence-based Behavioral Practice: <u>http://www.ebbp.org/index.html</u> -APA Society of Clinical Psychology <u>http://www.div12.org/</u>

Course Goals:

- To understand basic theoretical principles underlying cognitive and behavioral therapies
- To become familiar with the evidence base for CBT and empirically supported interventions
- To situate psychotherapy broadly and CBT specifically within the current context and climate in clinical psychology (i.e., in terms of RDoC, biopsychosocial models, increased leveraging of technology, etc.)
- To develop thoughtful case conceptualizations that translate into clear treatment plans
- To develop skills in delivering CBT interventions for mood and anxiety disorders
- To incorporate an empirical approach to clinical work (e.g. tracking progress, developing and testing hypotheses)

Format: The format of this course will include lecture, discussion, video, and role-play demonstrations and exercises. Class participation is expected. You will be asked to participate in role plays and in-class exercises and to share clinical experiences as you begin to test out new skills and refine others.

Assignments:

Weekly quizzes: Most weeks we will begin class with a short, 5 to 10-item, short answer quiz. Questions will focus on major points from the readings for that week.

Final: Your final will be a 20-item, comprehensive final exam covering material from the semester.

Homework: I will often ask you to complete weekly homework assignments. Many of these assignments will be the same assignments we ask our clients to complete between sessions. The homework is designed to provide you with an experiential appreciation for what you will be asking your clients to work through. I encourage you to complete them honestly. You will NOT present your homework in class or turn them in to me. I will ask you to write a short reaction paper (1/2 page) on your experience completing the homework (what was helpful, what was not helpful, what made it challenging, and how you can use what you learned to more effectively use the intervention with your clients) but will not ask you to share the content of your homework. These assignments will count toward your participation grade. You should bring these to class to guide our discussion and turn them in to me.

Discussion Questions: Each week you will be responsible for posting three discussion topics to the D2L discussion board relevant to that week's readings. The topics should raise issues or questions, link to your clinical work or material you've been exposed to in other courses, or suggest implications. Discussion questions shouldn't simply be requests for more time discussing the articles in class. These posts will count toward your participation grade.

Role plays: Throughout the course we will engage in role plays during our meetings. These role plays are designed to give you an experiential sense of what it is like to deliver and receive CBT interventions. They are not designed to be painful and I will not ask you to role play in front of the class but rather in small groups. Try to think of this as a chance to practice skills rather than as a performance.

Case Conceptualization (5 pages): You will develop a clinical case conceptualization for a client you are currently working with. You want this paper to address what you think is going on with this person and *why* (mechanism hypotheses). Why is this particular person experiencing these particular problems at this particular time? Your conceptualization should include detailed hypotheses about the etiology and maintenance of the problem(s) and include what you see as being the primary and secondary problems, the causes of these problems, maintaining variables, etc. If you have not seen any clients yet, you may see me for a sample case, or you may choose a sample case from fictional (e.g., TV show, movie, book) or nonfictional (e.g., news story) sources.

Your paper should start with (de-identified) (1) demographic information- age, gender, ethnicity, education, employment, living arrangements, marital status, etc., followed by (2) the presenting problem (what does the client say she/he is coming in for, why now?). Include (3) a brief history of relevant psychiatric, medical, social, development, and occupational data. Next review any (4) assessment data from the interview, testing, etc. and (5) DSM 5. Then present (6) the problem list/goals for treatment and (7) your conceptualization. The bulk of your paper should focus on elements 6 and 7. You may follow the outline Persons presents in Chapter 6 or use another outline. These are due to me via email before we meet for class.

Treatment Plan (5 pages): Your case conceptualization will naturally lead to your treatment plan. You may revise or update your conceptualization as you like for the treatment plan (i.e., you don't have to use the exact conceptualization you turned in earlier in the semester). Base your treatment plan on an EST by providing a short review of the empirical literature (nomothetic) but make the treatment plan idiographic. Include within this treatment plan which interventions you would select, why, and how they relate to the case conceptualization. Selected interventions should be based on a combination of what the literature suggests is useful for the client's particular problems and what is suggested by your specific conceptualization. Provide a rough session-by-session outline. Also include the methods you would use to evaluate whether treatment is working. These are due to me via email before class.

Presentations: You will deliver a case presentation on a client of your choosing. You will present background information and a brief conceptualization. You will then present your treatment plan and briefly review the theory behind the interventions, and how the interventions map onto the theory. Be sure to link your interventions with the problems list. In addition, you will present a brief outline the basic treatment protocol, summarizing the content from the sessions. Presentations should last approximately 45 minutes to cover all relevant material. More details will be provided later in the semester.

Final Grade:

Weekly quizzes + final: 10% Homework/discussion questions/participation: 10% Conceptualization: 30% Treatment Plan: 30% Class Presentation: 20%

Jan 15:	Course Overview and Introduction to CBT
Jan 22:	Empirically Supported Treatments and Current Issues in CBT
Readings:	Deacon, B. (2013). The biomedical model of mental disorder: A critical analysis of its validity, utility, and effects on psychotherapy research. <i>Clinical Psychology Review</i> , 33, 846-861.
	Levenson, R. W. (2014) The future of clinical science training: New challenges and opportunities. <i>Clinical Psychological Science</i> , 2, 35-45.
	APA Presidential Task Force on Evidence-Based Practice. (2006) Evidence-based practice in psychology. <i>American Psychologist, 61</i> , 271-285
Homework:	Complete A-B-C Log (for next time)
Jan 29:	Learning Theories; Assessment and Functional Analysis
Discussion:	A-B-C homework
Readings:	Persons Ch 2 and Ch 3
	Nelson-Gray, R. O., & Farmer, R.F. (1999). Behavioral assessment of personality disorders. <i>Behavior Research and Therapy, 37</i> , 347-368.
Homework:	Fill out a behavioral schedule and rate your adherence (for next time)

Feb 5:	Case Conceptualization and Identifying Targets for Treatment
Readings:	Beck Chapters 1 and 3
	Persons Chapters 1 and 6
Homework:	Case Conceptualization assignment due next time
Feb 12:	Behavioral Activation
Discuss:	Review activity log
Readings:	Beck Ch. 6
	Lejuez, C. W. Hopko, D. R., Acierno, R., Daughters, S. B. & Pagoto, S. L. (2011).
	Ten year revision of the Brief Behavioral Activation treatment for
	Depression: Revised Treatment Manual. <i>Behavior Modification</i> , 35(2),
	111-161.
Homework:	Complete a thought record for next time-identify thoughts only
Feb 19:	Identifying and Challenging Negative Automatic Thoughts
Discuss:	Review thought record homework
Readings:	Beck Ch 9 and 11
Homework:	Complete a thought record for next time-challenge your negative thoughts
Feb 26:	Identifying and Challenging Core Beliefs
Discuss:	Review thought record homework
Readings:	Beck Ch 12 and 14
	Hassiga, C. M., & Gray, M. J. (2010). Are cognitive techniques and interventions
	necessary? A case for the utility of cognitive approaches in the treatment
	of PTSD. <i>Clinical Psychology: Science and Practice</i> , 17, 112-127.
	Longmore, R. J., & Worrell, M. (2007). Do we need to challenge thoughts in
Homework:	cognitive behavior therapy? <i>Clinical Psychology Review</i> , 173-187. TBA
March 5:	Introduction to Exposure and Traditional Models
Discuss:	Review fear hierarchy
Readings:	Abramowitz, J. S. (2013). The practice of exposure therapy: Relevance of
neddings.	cognitive-behavioral theory and extinction. <i>Behavior Therapy</i> , 44, 548-
	Foa, E.B. & Kozac, M.J. (1986). Emotional processing of fear: Exposure to
	corrective information. <i>Psychological Bulletin, 99</i> (1), 20-35.
	Hoffman S.G. (2008). Cognitive processes during fear acquisition and extinction
	in animals and humans: Implications for exposure therapy of anxiety
	disorders. Clinical Psychology Review 28, 199-210.
Homework:	Construct a fear/avoidance hierarchy for next time
March 19:	More Exposure and Inhibitory Learning
Discuss:	Review your exposure hierarchy
Readings:	Craske et al. (2008). Optimizing inhibitory learning during exposure therapy.
_	Behavior Research and Therapy, 46, 5-27.
	Culver et al. (2012). Emotional variability and sustained arousal during exposure.
	Journal of Behavior Therapy and Experimental Psychiatry, 43, 787-793.
	ABCT discussion. (2013). How should newer data influence how we conduct
	exposure?

Homework:	Complete a diary card for next time
March 26:	Emotion Regulation Therapy and DBT
Discuss:	Diary Card homework
Readings:	Ch 2 DBT Synthesizing Radical Acceptance with Skillful Means from Hayes, S.C.,
	Follette, V. M., and Linehan, M. M. (Eds.) (2004). New York, NY: Guilford
	Press.
	Fresco, D. & Mennin, D. (2013). Emotion regulation therapy for generalized
	anxiety disorder. Cognitive and Behavioral Practice, 20(3), 282-300.
<u>Homework:</u>	ТВА
April 5:	Multicultural Considerations
Readings:	Hays, P. (2009). Evidence based practice, cognitive-behavioral therapy, and
	multicultural therapy: Ten steps for culturally competent practice.
	Professional Psychology: Research and Practice, 40(4), 354-360.
	Iwamasa, G. Y. (1997). Behavior therapy and a culturally diverse society: Forging
	an alliance. Behavior Therapy, 28, 347-358
	Tanaka-Matsumi, J., Seiden, D. Y., & Lam, K. N. (1996). The culturally informed
	functional assessment (CIFA) interview: a strategy for cross-cultural
	behavioral practice. <i>Cognitive and Behavioral Practice</i> , <i>3</i> , 215-233.
April 12:	Treatment Planning, homework, and monitoring progress
Readings:	Persons Ch 6, 7, and 9
	Beck: Ch 17 and 19
	Lambert, M.J., Hansen, N.B., & Finch, A.E. (2001). Patient-focused research:
	Using patient outcome data to enhance treatment effects. <i>Journal of</i>
	Consulting and Clinical Psychology, 69(2), 159-172.
Homework:	Treatment Plan due next time
April 19: Readings:	CBT , Technology, and Neurobehavioral Therapies Eells et al. (2013). Computer-Assisted Cognitive-Behavior Therapy for
Reduings.	Depression. <i>Psychotherapy</i> , advanced online publication.
	Hallion et al. (2011). A meta-analysis of the effect of cognitive bias modification
	on anxiety and depression. <i>Psychological Bulletin</i> , 137, 6, 940-958.
	Siegle et al. (2007). Neurobehavioral therapies in the 21st century: Summary of
	an emerging field and an extended example of cognitive control training
	for depression. <i>Cognitive Therapy and Research</i> , 31, 235-262.
	for depression. cognitive merupy and rescuren, 51, 255 262.
April 26:	Class Presentations
May 2:	Class Presentations
TBA:	Final