

Different Kinds of Psychotherapy

Cognitive Behavioural Therapy (CBT)

CBT and Psychoanalytic Psychotherapy are quite different but are both offered as help for patients with similar psychological or emotional difficulties. One kind of therapy might be most helpful for one patient, another might be best for another patient.

Cognitive Behavioural Therapy has its roots in classical and social learning theories. Within this framework cognitions are seen as having been learned and then maintained through reinforcement. Rational thinking is viewed as based on fact but that thinking can also be based on assumptions which need to be challenged with a view to changing them. Changing thinking can make unwanted feelings more acceptable and bring about changes in behaviour.

Working within this framework the therapist challenges these assumptions directly rather than via the unconscious and hence is concerned with changing the difficult/troublesome behaviour rather than how they originally emerged. Their focus is on how these aspects have been maintained and work is concerned with definable behaviour which can be monitored. Since the aim is to change thinking and beliefs a wide range of techniques is used, clear goals set are and the person's motivation is strengthened by suggestion and support from the therapist. Interpretations may form part of the work but finding reasons for particular beliefs is not considered essential.

How CBT works:

- It is brief and time limited – it can last between 6 weeks and 6 months
- A trusting relationship with the patient is important but the therapist also believes that changes occur when the patient learns to think differently rather than via the relationship *per se*. The focus is therefore on teaching rational skills.
- Questions are used to help gain an understanding of the patient's concerns and the patient is also encouraged to question personal behaviour and assumptions.
- The therapist works in collaboration with the patient in treatment, finding out what their goals are and working towards these.
- The therapist has an agenda for each session, techniques are taught, and the focus is on helping the person achieve the goals they have set.
- The patient is encouraged to do homework using reading, thinking and putting techniques into practice.

To summarize: **the task of the cognitive behaviour therapist is to act as diagnostician, educator, and technical consultant who assesses maladaptive cognitive processes and works with the patient to design learning experiences that remediate these dysfunctional cognitions.**

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Psychoanalytic Psychotherapy

A.P.E.L receives a number of referrals from CB therapists and clinical psychologists who feel their patients need longer, in-depth, therapy. A.P.E.L. therapists also refer some patients to CBT when it is considered that would be more effective and helpful for that individual.

The framework within which **Psychoanalytical Psychotherapy** works is outlined simply and concisely by Ellen Noonan in "Counselling Young People" (Methuen New York 1983):

- *'Each individual is the product and author of his own particular history: how he is now is a direct consequence of his earlier experiences with others and his environment. Subsequent experience confirms and modifies that early experience, for better or worse. He is not, however passive in his history, but contributes to its shape*
- *He lives simultaneously in his external and internal worlds: the former he is mostly aware of, but the latter is primarily unconscious. The unconscious, internal world is energetic and substantially determines his feelings and actions in the external world.*
- *All, behaviour, no matter how apparently irrational and senseless, is logical and purposeful according to some personal system*
- *Chronological growth is inexorable, but emotional growth is beset by anxieties and detoured by defences and so does not always keep pace. Emotional disturbance is likely to be caused by some outdated and no longer appropriate motivation, decision (defence) or wish.'*

How it works

- Psychoanalytic psychotherapy is a process of growth and development.
- The therapist works via the unconscious which can be accessed through free association and dreams. Earlier patterns of relating begin to be repeated unconsciously in the relationship with the therapist, making them accessible to be thought about and then easier to manage.
- The therapist aims to provide an environment in which the patient feels safe and can risk allowing unwanted and difficult feelings into consciousness.
- The role of the therapist is to listen, follow the patient, explore and discover with him or her what is emotionally true for them.
- The therapist does not set goals, offer advice or provide answers and, is not at all interested in moulding the patient to some preconceived idea of 'normal'.
- The therapist is not primarily interested in changing specific behaviour as it will, in due course, make sense according to the patient's internal systems, hence the need to gain insight into these.
- **The relationship between therapist and patient is central to this task.** By exploring emotional and relational difficulties from the past and in the present, including feelings and difficulties arising during the session, increased understanding allows the patient to gain emotional insight and thus helps widen the choices available in life. In this way the patient finds new ways of perceiving his or herself and other people, thus enhancing work and relationships which then become more satisfying and creative.
- Therapy is long term and there can be between one to five sessions a week.