Principles of Cognitive Functioning

- Cognitive therapy: based on making cognitive changes, which alter feelings
- Principles of cognitive functioning:
  - What people think affects how they feel.
  - What people think is often based on thinking habits.
  - If we change our thinking, we can affect a change in our feelings.

Principles of Behavior

People do things:
- When they are rewarded in a way that is meaningful for them
- When something they don’t like is removed

People don’t do things:
- When they get punished
- When something they like is taken away
Basic Concepts

Basic concepts for understanding cognitive therapy:

- **Attributions:** labeling or assigning meaning to events or circumstances
- **Modeling:** imitating others in the expectation of receiving rewards such as those others seem to be receiving
- **Self-efficacy:** feeling effective through one’s own actions

Cognitive Therapy Techniques

- **Positive imagery:** thinking in a positive way about how an event/experience will unfold
- **Mastery imagery:** imagining being in control or having mastery over a given situation
- **Negative imagery:** envisioning negative events and outcomes for maladaptive behavior
- **Attribution restructuring:** abandoning intuitive strategies in order to change the meanings associated with people, places, and things

Behavior Therapy

- **Classical conditioning:** decreases or eliminates associations of a particular circumstance with a particular feeling
- **Operant conditioning:** increases positive reinforcement through more adaptive and effective behavior
- **Rational emotive behavioral therapy (REBT):** replaces irrational thought structures with rational philosophies and attitudes based on accurately perceived realities
Behavior Therapy - continued

- Behavior modification: identifies a specific behavior that requires change and involves client in a plan of action, such as response prevention and systematic desensitization, to modify it

Cognitive Behavioral Therapy

- Treatment: identifying and reframing maladaptive thinking styles and acquiring new skills for managing stressors
- Thought stopping: learning to stop negative or maladaptive thinking by visualizing a specific image, sensation, or circumstance
- Dialectical behavioral therapy: developed to help chronically suicidal clients with BPD learn problem-solving techniques

Cognitive Expression

- We ascribe meaning to the events in our lives (attributions), imitate others with the expectation we will receive the same rewards (modeling), and learn by feeling effective through our own actions (self-efficacy).
- We develop patterns of thinking over time, often automatically, without active or conscious effort.
Behavioral Expression

- Behavior has an impact on feelings and thoughts.
- The association of a particular feeling with a particular circumstance becomes a conditioned stimulus for the feeling; over time, the association is strengthened through repetition and rehearsal.
- We are positively reinforced for certain behaviors and seek further positive reinforcement for increasing those behaviors.

Association and Conditioning

- Association: People learn to associate a particular feeling with a particular circumstance.
- Conditioning: The association is strengthened over time through repetition and rehearsal. Positive reinforcement results from getting something desirable or avoiding something unpleasant.

Behavior Modification

- Response prevention: client is guided through imagining a situation at the lowest level of distress initially, then developing and rehearsing adaptive responses
- Desensitization: client imagines being in certain situations at various levels of distress and learns to cope before moving on to the next level
Nursing Plan: Assessment

An assessment is the first step in developing a contract for behavioral change. The problem behavior is divided into four components:

1. Behavioral: What is the client doing?
2. Cognitive: What is the client thinking?
3. Affective: What is the client feeling?
4. Physiologic: What are the physical realities of the situation?

Nursing Plan: Diagnosis

The diagnosis is based on the assessment data. Example diagnoses are:

- Deficient Knowledge
- Dysfunctional Family Processes
- Interrupted Family Processes
- Impaired Social Interaction
- Hopelessness
- Ineffective Coping
- Ineffective Health Maintenance

Nursing Plan: Planning and Implementation

- Planning: based on interactions observed during the assessment interview
- Implementation:
  - Forming practical and measurable objectives and goals
  - Negotiating the contract
  - Providing appropriate medications
Nursing Plan: Evaluation

- Evaluating abilities and strengths helps design the behavior contract.
- For a successful outcome, frame the components in terms of success rather than failure.

Behavioral Contract

- Behavioral modification plan designed as a specific agreement between an individual and a team of caregivers who have identified the behavior that needs modifying and designed a plan.

Behavioral Contract: Goals

Behavioral goals should:
- Contribute directly to the desired result
- Be objectively monitored
- Be easily understood by the client and significant others
- Be achievable in the available time
Negotiating a Contract

- Engage the client as a colleague.
- Avoid complex terminology or coercive formats.
- Make sure the client completely understands, agrees to, and feels as comfortable with the contract as possible.

Case Management

After a plan of care has been established, it is important to maintain the routines of cognitive behavioral interventions with a variety of interventions supported through case management:
- Group/individual therapy
- Behavior modification
- Self-study

Community-Based and Home Care

- Cognitive behavioral interventions are more likely to be successful when maintained in the client’s natural setting.
- The plan of care is more likely to be implemented—with fewer frustrations and misunderstandings—if significant others are involved and psychoeducation is provided.
Major Cultural Characteristics

- Religion
- Spirituality
- Gender
- Ability/disability
- Social status
- Sexual orientation and expression
- Age
- Race
- Ethnicity

Personal Behavioral Contract

- If you can develop a plan to change your behavior, you may well be successful in helping others to change theirs.

Resources

- [http://www.albertellisinstitute.org/aei/index.html](http://www.albertellisinstitute.org/aei/index.html)

AEI’s therapeutic approach is based on rational emotive behavior therapy (REBT), an action-oriented psychotherapy that teaches individuals to examine their thoughts, beliefs, and actions and replace those that are self-defeating with more life-enhancing alternatives.
Resources - continued

- http://www.beckinstitute.org
  The Beck Institute provides state-of-the-art psychotherapy and research opportunities and provides international training for cognitive and cognitive-behavioral therapists.

- http://www.nacbt.org
  The NACBT is dedicated exclusively to supporting, promoting, teaching, and developing cognitive behavioral therapy and those who practice it.