Cognitive-Behavioral Play Therapy
Presented by: Rachel Peloquin
Jessica Stewart
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References
Behavioral Therapy?

What is Cognitive-

An example you can try
Behavior Therapy
developed early twentieth century
based on the earlier works of Ivan Pavlov
John Watson
E.L. Thorndike

focus on: behavior
SURPRISE!

Beliefs:
- Human behavior is governed by basic learning principles
- Humans are neither good nor evil, they are simply stimuli and responses

Core Concepts:
- Classical Conditioning (Pavlov’s dogs) applied to therapy first by Joseph Wolpe and John Watson (Little Albert Experiment)
- Operant (Instrumental) Conditioning developed by B.F. Skinner
  - Positive and Negative Reinforcement
  - Punishment
  - Reinforcement Schedules (rate/ratio)
  - Extinction
  - Shaping
  - Token Economies
Beliefs:

- Human behavior is governed by basic learning principles
- Humans are neither good not evil, they react to their environment in order to survive and maximize their comfort and satisfaction
- All people are capable of modifying their behavior under the right circumstances

Core Concepts:

- Classical Conditioning
- Operant (Instrumental) Conditioning
- Positive and Negative Reinforcement
- Positive and Negative Punishment
- Extinction
- Shaping
- Token Economies
- Stimulus Control
- Albert Bandura’s Social Learning Theory
- People learn by observing the actions of others through observation, imitation, or punishment
  - Observational Learning
  - Role Play
  - Self-Efficacy
Core Concepts:

- Classical Conditioning (Pavlov's dogs) applied to therapy first by Joseph Wolpe and John Watson (Little Albert Experiment)
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  - Positive and Negative Reinforcement
  - Punishment
  - Reinforcement Schedules (rate/ratio)
  - Extinction
  - Shaping
  - Token Economies
  - Stimulus Control
- Albert Bandura's Social Learning
  - People learn different behaviors simply by watching others perform those behaviors rather than experiencing rewards or punishments
    - Observational Learning/Modeling
    - Role Playing
    - Self-Efficacy - confidence in performing the behavior
Counselor’s Role:

• to provide expertise in behavioral assessment and the application of learning theory
• as an educator and guide
Cognitive Therapy & Rational Emotive Behavior Therapy
Developed Primarily by Albert Ellis and Aaron Beck

1960s
dissatisfaction with Psychoanalysis

Core Concepts (REBT):
- A person’s current thoughts play a major role in determining how he feels and behaves and therefore play a major role in emotional and psychological disturbances
  - Therapeutic focus is on the current thoughts, not on how these thoughts developed in the past
- Therapy needs to be active
  - Therapist helps the client confront irrational and dysfunctional beliefs
- ABC Method
  - A - Activator or event (internal or external)
  - B - Beliefs: thoughts or cognitions
  - C - Consequences of the interaction of A and B

Common Irrational Beliefs (Ellis)
- I MUST do well or very well!
- I am a BAD or WORTHLESS person if I act weakly or stupidly.
- I MUST be approved or accepted by people I find important!
- I am a BAD, UNLOVABLE person if I get rejected.
- People MUST treat me fairly and give me what I NEED.
- People who act immorally are UNDESERVING, ROTTEN people!
- People MUST have a few major hassles or troubles.
- My life MUST live up to expectations or it is TERRIBLE!

Beliefs (REBT):
- Humans are born both rational and irrational
- Capable of growth and self-destruction
- Humans are worthwhile and worthy of self-respect
  - Unconditional Positive Regard for themselves (Rogers)
- 10 irrationalities
  - Virtually all humans, including bright and competent people, show evidence of major human irrationalities and self-defeatism
  - Humans often fall back into self-defeating habits and behavioral patterns even though they worked hard to overcome them
  - Psychotherapists, who presumably should be good role models of rationality often act irrationally in their personal and professional lives
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Beliefs (Cognitive):

...
behavioral patterns even though they worked hard to overcome them

- Psychotherapists, who presumably should be good role models of rationality often act irrationally in their personal and professional lives

Beliefs (Cognitive):

- Individuals actively construct their reality
- Cognition mediates affect and behavior
- Cognition is knowable and accessible
- Cognitive change is central to the human change process

Counselor's Role (REBT): not much emphasis on the therapeutic relationship. Therapist is an active teacher - recognizing and pointing out irrational thoughts
Core Concepts (REBT):

- A person's current thoughts play a major role in determining how he feels and behaves and therefore play a major role in emotional and psychological disturbances
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- My life MUST live up to expectations or it is TERRIBLE!
- I CAN'T STAND really bad things or very difficult people.
- It's AWFUL or HORRIBLE when major things don't go my way!
- I CAN'T STAND IT when life is really unfair!
- I NEED to be loved by someone who matters to me a lot!
- I NEED a good deal of immediate gratification and HAVE TO feel miserable when I don't get it.

- Humans are born
- Capable of growth
- Humans are works in progress
- Unconditional
- 10 irrationalities
- Virtually all human people, show some degree and self-defense
- Humans often have difficult behavioral patterns that can overcome their rationality
- Psychotherapy, cognitive models of rational and irrational personal and emotional

Beliefs (Cognitive):
- Individuals actively challenge
- Cognition mediates behavior
- Cognition is known
- Cognitive change

Counselor's Role (Rational-emotive therapeutic relationship)
- recognizing and providing
Counselor's Role (Cognitive)
- confrontational than
• A - Activator or event (internal or external)
• B - Beliefs: thoughts or cognitions
• C - Consequences of the interaction of A and B

Core Concepts (Cognitive):
• Automatic Thoughts and Schemas

Schemas → Automatic Thoughts → Negative Interpretations → Emotional/Behavioral Problems

• Thinking Distortions
  • Arbitrary Inference
  • Selective Abstraction
  • Overgeneralization
  • Magnification and Minimization
  • Personalization
  • Dichotomous Thinking
• Cognition is knowable and accessible
• Cognitive change is central to the human change process

Counselor's Role (REBT): not much emphasis on the therapeutic relationship. Therapist is an active teacher - recognizing and pointing out irrational thoughts
Counselor's Role (Cognitive): more leading and less confrontational than REBT
Counselor’s Role:
- to provide expertise in behavioral assessment and the application of learning theory
- as an educator and guide

Cognitive-Behavioral Therapy

The Integration of Cognitive Therapy and Behavioral Therapy: The premise of cognitive behavioral therapy is that changing maladaptive thinking leads to change in affect and in behavior.

Many Different Interventions:
- Identifying automatic thoughts
- Exposure therapy
- Systematic desensitization

Cognitive Therapy needs to be active:
- Therapist helps the client confront irrational and dysfunctional beliefs

ABC Method:
- A - Activator or event (internal or external)
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Core Concepts (Cognitive):
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- I NEED to be loved by someone who matters to me a lot!
- I NEED a good deal of immediate gratification and HAVE TO feel miserable when I don’t get it.

Counselor’s Role:
- Virtually all people, including therapists, have self-defeating, habitual patterns of behavior that can be overcome.
- Psychotherapy helps clients alter their models of life and self
- Promotes new models of personal and social behavior.

Beliefs (Cognitive)
- Individuals act as if their thoughts are true.
- Cognitive mechanisms act as if thoughts are facts.
- Clients focus on their inner thoughts.
- Cognitive change is a necessary condition for therapeutic change.

Counselor’s Role:
- Recognizing and challenging thought patterns through confrontational techniques.
Cognitive-Behavioral Therapy

The Integration of Cognitive Therapy and Behavioral Therapy

The premise of cognitive behavioral therapy is that changing maladaptive thinking leads to change in affect and in behavior.

Many Different Interventions:
- Identifying automatic thoughts
- Exposure therapy
- Systematic desensitization
- Relaxation training
- Biofeedback

CBT is effective for many conditions, including anxiety, depression, and post-traumatic stress disorder.
Therapy addresses dysfunctional emotions, behaviors, and cognitions through a goal-oriented, systematic process.
Focus: alleviating symptoms

CBT is effective for the treatment of a variety of conditions, including mood, anxiety, personality, eating, substance abuse, tic, and psychotic disorders.
Many Different Interventions

*identifying automatic thoughts
*exposure therapy
*systematic desensitization
*relaxation training
*biofeedback
*development of adaptive coping strategies
*changing maladaptive beliefs
Adding Play: CBT to CBPT

CBPT is:

- Brief
- Directive
- Problem Oriented

**Important**
• Identifying and Changing Irrational Beliefs through Play
• Shaping Behaviors through Modeling
• Using Positive Reinforcement through praise and rewards
• Teaching appropriate expression of feelings
• Problem Oriented

**Important**
Therapeutic Interventions MUST be appropriate for the developmental level of the child!
Special Considerations

“For CBPT to be effective, it should provide structured, goal-directed, activities while allowing the child to bring spontaneous material to the sessions” (O’Conner & Braverman, 2009, pp.233).

- Focused, balanced, & towards a goal

- Therapist needs to present developmentally appropriate interventions
to the sessions” (O’Conner & 33).

& towards a goal

- Therapist needs to present developmentally appropriate interventions
- Tailor therapy to child
- Increases likelihood of participation & benefits of therapy

Consideration

Western Philosophy
Multicultural Consideration

- Roots in Western Philosophy
  - Value autonomy & active interventions
- Adaptable to any culture
- Culturally specific elements/toys can be included
Research

most empirically supported theory

Wheeling in the Dark?: A Review of Play Therapy Research

Surprisingly little is known about play therapy from experimental work. (i.e. what are the key characteristics of a good therapist?)

... systematic review of research that evaluates the efficacy of play therapy... The studies were... effectiveness of therapy... (i.e. what are the key characteristics of a good therapist?)

CPTP in the answer

Balance between directive and spontaneous
Can be manipulated & measured
... (i.e. what are the key characteristics of a good therapist?)

Game-Based Cognitive-Behavioral Therapy (GB-CBT): An Innovative Group Treatment Program for Children Who Have Been Sexually Abused

- "Play therapy is among the most commonly used treatments for children who have been sexually abused" (Spilberg & Morselli, 2010, p.166).
- CBT has been empirically validated in children with ADHD, PTSD, specific phobias, & mood disorders.
- Research support using CBT, FT, & group therapy for CSA
- Proposed a Game based CBT mimics treatment for CSA

A Cognitive-Developmental Approach to Children's Expression of Conflicting Feelings and a Technique to Facilitate Such Expression in Play Therapy

Susan Harter
Whistling in the Dark?: A Review of Play Therapy Research

"Surprisingly little is known about play therapy from experimental work"

Empirical Obstacles:

- Lack of conceptual model of how children change as a result of PT.
- Majority of evidence is theoretical, not testable hypotheses.
- Seems logical but hard to test
- Clinicians that are implementing PT ultimately focus on child welfare, not collecting empirical data
- Credibility issue, which raises skepticism & PT not
Empirical Obstacles:

- Lack of conceptual model of how children change as a result of PT.
- Majority of evidence is theoretical, not testable hypotheses.
- Seems logical but hard to test
- Clinicians that are implementing PT ultimately focus on child welfare, not collecting empirical data
- Credibility issue, which raises skepticism & PT not being taken seriously in the academic realm
on child welfare, not collecting empirical data
- Credibility issue, which raises skepticism & PT not being taken seriously in the academic realm

“What play therapy needs is a systematic program of research that clearly sets out its hypotheses, designs well-controlled studies, carefully selects its subjects, measures meaningful outcomes, and uses appropriate and informative statistics”

- CBPT is the answer
- Balance between directive and spontaneous
- Can be manualized & measured
- Has specific technique, measures, & strategies
- CBT already held in high esteem in both academia and clinical setting
Game-Based Cognitive-Behavioral Therapy (GB-CBT): An Innovative Group Treatment Program for Children Who have Been Sexually Abused

- “Play therapy is among the most commonly used treatments for children who have been sexually abused” (Springer & Misurell, 2010, pp.166).
- CBT has been empirically validated in children with: ADHD, PTSD, specific phobias, & mood disorders
- Research support using CBT, PT, & group therapy for CSA
- Proposed a Game based CBPT manualized treatment for CSA for elementary school age

Developmentally Appropriate Games (DAGs):
- “(DAGs), a specific play therapeutic technique, has shown promise as a medium for delivering empirically supported interventions” (Springer & Misurell, 2012, pp. 167).
- DAGs empirically successful with:
  - ADHD, social skills deficits, pro-social behavior, self efficacy, internalizing symptoms, oppositionality, & aggression
been empirically validated in children with: ADHD, specific phobias, & mood disorders
in support using CBT, PT, & group therapy for CSA
and a Game based CBPT manualized treatment for CSA

Developmentally Appropriate Games (DAGs):
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  • DAGs empirically successful with:
    • ADHD, social skills deficits, pro-social behavior, self efficacy, internalizing symptoms, oppositionality, & aggression

Frieda (9 yrs. old):
  • High amount of internalizing issues:
    • Experiential avoidance, shame, self-blame, guilt, depressive symptoms, withdrawal
  • After GB-CBT
    • Behavioral improvements
    • Internalizing issues decreased
      • Pre: 61, Post: 52, 3 month: 48, 6 month: 50
Manualized Treatment
- Allows for empirical validation
- Allows for training & widespread use
- Increases likelihood of funding
- Ultimately reaches more children

Current Study
- 12 (90 min.) structured sessions
- Each surrounding a concrete topic
- 1-5 social skills training
- 6-12 CSA education/treatment
- Role-play skills
- Play the game
- Discuss/process the game
Appropriate Games (DAGs), a specific play therapeutic technique, has shown promise as a medium for delivering evidenced-based interventions” (Springer & Misurell, 2012, pp. 167).

Frieda (9 yrs. old):
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  - Experiential avoidance, shame, self-blame, guilt, depressive symptoms, & social withdrawal
- After GB-CBT
  - Behavioral improvements
  - Internalizing issues decreased
    - Pre: 61, Post: 52, 3 month: 48, 6 month: 50
  - Post measures indicate increased knowledge of SA & protective skills
  - 3 & 6 month interviews: more outgoing, expressive, confident, socially engaged, & assertive
A Cognitive-Developmental Approach to Children's Expression of Conflicting Feelings and a Technique to Facilitate Such Expression in Play Therapy

Susan Harter
The Feelings Game

Supplies:

- Mr. Pieces of...
- Supply...
Bibliotherapy

- Good, psychoeducational, preparatory tool
- Can use early in therapy to help child understand:
  - Why they are there
  - What therapy is
  - Expectations and guidelines of therapy
- Specific books about different age levels, psychological needs, issues

A Child's First Book About Play Therapy

Marc A. Nemiroff, PhD
Jane Annuario, PsyD
A Child's First Book About Play Therapy
Marc A. Nemiroff, PhD
Jane Annunziata, PsyD
The Feeling Words Game

Supplies:
- Pieces of paper
- Marker

1. Therapist has child brainstorm feelings that are then written on sheets of paper
Supplies:

- Pieces of paper
- Marker
- Poker Chips
1. Therapist has child brainstorm feelings that are then written on sheets of paper
2. Therapist tells a story about self and marks feelings with chips
3. Therapist then tells a non-threatening story about the child and has them mark what feelings they may be feeling in that situation
Techniques

Time

- Help children to identify thoughts and emotions.
- Show the child that it is possible to have multiple contradictory or conflicting feelings at one time.
- If they may label them and mark them about the non-threat feelings with something they can hold.

Goals:

1. Therapist will try to contact the child and establish a rapport.
2. The child might talk about non-threatening and identifiable thoughts and feelings and the therapist will notice and restate them. They will then ask the child to label them about the non-threat feelings with something they can hold.
3. Therapist will try to contact the child and establish a rapport.
4. The child might talk about non-threatening and identifiable feelings and the therapist will notice and restate them about the non-threat feelings with something they can hold.
The Spy and the Sneak

Supplies:
- None

Steps:
1. Therapist first meets with child and discusses sneaky positive behaviors that the child can do to surprise their parent(s)
2. The child and therapist brainstorm 3-5 good behaviors to accomplish
3. Therapist then meets with parent(s) and tells them their child's plan
1. Therapist first meets with child and discusses sneaky positive behaviors that the child can do to surprise their parent(s).

2. The child and therapist brainstorm 3-5 good behaviors to accomplish.

3. Therapist then meets with the parent(s) and tells them their job is to be the spy and discover the good behaviors and write them down.

4. The parent and child are instructed not to discuss this at home.

5. In the following weeks session, the parent presents the list of good behaviors and the child is the spy.

6. The game should last for several sessions and roles can be switched so the parent is the sneak and the child is the spy.
Goals:
1. Help transform negative family interactions into positive ones
2. Increase the self-esteem of family members
3. Therapist to accomplish
4. The parent(s) and instructed not to be the spy
5. In the follow up home instructed
6. The game
7. The parent(s) and instructed not to be the spy
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- Show that actions affect the whole family unit
- Make parents start noticing and rewarding positive child behaviors
- Help children to realize they get more attention from positive behaviors
- Increase the self-esteem of family members
- Help transform negative family interactions into positive ones
- The parent(s) and instructed not to be the spy

6. The game
Weights and Balloons

Supplies:
- A dozen helium balloons
- Paper and pen
- Weights (rocks, blocks, etc)

1. Therapist and child list positive and negative thoughts - the lists are kept separate
2. Therapist explains how negative thoughts fuel our
Weights and Supplies:

- A dozen helium balloons
- Paper and pen
- Weights (rocks, blocks, etc.)

Goals:
1. Therapist and child list positive and negative thoughts - the lists are kept separate
2. Therapist explains how negative thoughts fuel our feelings which weigh us down and positive thoughts lift our spirits
3. Therapist assigns each thought a weight or balloon.
4. Child walks around the room holding weights
5. Child puts down the weights to see how it feels to be relieved of the negative feelings
6. Next the therapist repeats with positive thoughts, feelings and balloons
Goals:
• Helps make the complex idea of depression into a concrete and understandable construct
• Help the child see the connection between the thoughts we have and the feelings that follow...
Other Techniques

Blowing Bubbles - relaxation/breathing

Color Your Life - understanding emotions

Pick-Up-Sticks - expressing emotions

Beat the Clock - improve impulse control

Garbage Bag Technique - identify and discuss worries
References


