

Behavioral therapy

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Behavioral therapy is also known as behavioral modification. It is a psychological method based on the principle that one can change the badly adjusted, maladaptive, observable, specific and self destructive behavior, through learning new and more suitable behaviors (Skinner, p 194). The origin of this theory can be traced back to the school of behaviorism which indicates that one can scientifically study psychological matters through observation of overt behavior without necessarily involving interior psychological states.

Skinner's theory of behaviorism accepted and supported that internal state could be part of a certain kind of behavior without necessarily being the main cause; however, he declared that through environmental manipulation, one could improve on them. The behavioral theorists include Hans Eysenck, Joseph Wolpe, Harry Solomon, Ogden Lindsley and B. F Skinner and they all had different ways of looking at behavioral problems. Eysenck's perspective saw behavioral problem as connection between one's behavior, the environment and personality characteristics. For the sake of this study, I will focus on B.

B. F Skinner's behavioral theory (Skinner, p 198). Origin of behavioral therapy Edward Thorndike did experiments to discover the ability of dogs and cats to solve problems. He constructed wooden crates and he would cage the animals each in their own crate. The animals would escape from the crates. Though initially he just wanted to show that dogs and cats' achievement could be controlled, he realized that he could measure the intelligence of these animals using his tools (Lindsley, p 34). He would set the animals for

the same kind of task and observe how long it took to complete the given task.

He learnt that there was no difference in performance between the animals that started an assignment and the ones that first observed the others performing (Skinner, p 89). He also learnt that when an animal did something that made it to successfully get out of the box; the animal was likely to repeat that action when faced by the same kind of problem. He concluded that reward reinforces the relationship between stimulus and action. He later formalized it to be called the law of effect (Skinner, p 199). Classical conditioning theory then came to explain that there is an association between reflex and the neutral stimulus.

Watson used rats in his experiments to improve on the law of effect and apply it in behaviorism. He made a maze which the rats were supposed to follow. Once they had mastered the routes, he started putting blocks at different points of the maze (Skinner, p 94). If a route was blocked, the rats would then follow another route indicating that they had memory. Once the second route was blocked they would follow the other available route. He observed that when the reward for an action done was less, then the rats performed the task more slowly (Lindsley, p76). B.

F Skinner came to improve on Thorndike and Watson's work by studying objectively behavior sequences over a prolonged period of time. He came up with the concept of operant conditioning which related the operant response and the reinforcement. This theory is based on the proposal that learning could help in change of overt behavior. People change their behavior as a result response to the occurrences in their surroundings. A given response

leads to a certain outcome. When one reinforces a certain pattern of Stimulus-Response, a person's response becomes conditioned (Skinner, p 97).

The key element in this theory is reinforcement; this is anything that supports the response that is desired. Reinforcement could be positive or negative. Positive reinforcement makes one be encouraged to do more of the action that led to positive results. It includes attaining satisfaction after doing something, being recognized, being praised for work well done among others. Negative reinforcement on the other hand involves the actions that make one increase the frequency of responses once a certain stimulus is withdrawn. Aversive stimulus results to the reduction of responses (Skinner, p 200).

When considering this theory, schedules of reinforcement are considered to be very important. Principles under this theory are that positively reinforced behavior is very likely to reoccur. Shaping is also a principle that states that in order to reinforce behavior, information should be provided in small amounts. Stimulus generalization principles talks of reinforcement being generalized across stimuli that are similar to the original one (Lindsley, p 56). Behavior modification using B. F Skinner's theory Behavior modification refers to a straight forward therapy technique that bases its arguments on skinner's theory.

It indicates that one can extinguish the unwanted behavior through the removal of the reiforcer and at the same time, behavior that is desired can be obtained and maintained via reinforcement. This argument has been used in solving many psychological problems. It is the preferred method when

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dealing with children. Other disorders which can be corrected using this therapy are anxiety disorders, phobias, eating disorders, anger management, aggressive behavior and substance use. All these are eliminated through changing the activities and behavior that may have contributed to such disorders (Skinner, p 96).

Token economy is a derivative of behavior modification and it is used in institutions like prisons, juveniles, and psychiatric hospitals. This involves giving tokens to these people whenever they behave in a certain required way. When they revert to poor habits, the tokens are withdrawn. This is one way of behavior modifications that these institutions have used in order to keep order within the institutions. At times, Behavioral therapy methods are brought together with additional psychological involvements like medication (Skinner, p 197).

This technique uses the following approaches when using behavioral therapy to change a negative behavior to a positive one; systematic desensitization, flooding, behavior modification, prevention of exposure and response, operant conditioning, observational learning, contingency management, matching law, habit reversal training and covert conditioning (Lindsley, p72). Best fit patients for behavior therapy Behavioral therapy can be used as a tool to treat various problems like mental illnesses and their symptoms especially those that have maladaptive behavior.

These conditions include phobias, eating disorders, anger management, aggressive behavior and substance use. Organic disorders like insomnia and incontinence could also be handled using the behavioral techniques (Skinner, p 205). This technique works very well in the treatment process of obesity.

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This process starts with the analysis of the activity and eating patterns in addition to other habits like dieting methods. After all this information is collected, the therapist uses it to come up with positive methods that can be used to promote weight loss, a positive self image and get healthier eating practices.

The therapist does an analysis to the behavioral cause of stress in a patient. An appropriate method of treatment is then established. Cognitive therapy This therapy focuses in altering the bad behavior through changing the patterns of thinking behind them. It involves the emotions and the thoughts of the individual and the way they can be changed so that this person starts behaving more appropriately. This therapy can be used to correct many disorders like schizophrenia, autism, shyness, neurosis, stress disorders, attention deficit disorders, social phobias, mental disorders and addictions (McCullough, Para 24).

It involves helping patients to triumph over difficult situations and modifying dysfunctional emotional, behavior and thinking responses. Treatment is all about bringing together the beliefs of the client and those of the therapist and testing them. It may also include testing the kind of assumptions an individual makes in life and also identifying the extent of distortion of thoughts that renders them unhelpful and unrealistic (Kohlenberg, p 234). Once the therapist challenges the way an individual thinks about something, that person is likely to change the way of thinking.

Initially, this therapy was used to treat people suffering from depression. Beck came up with a list which contained ' errors' in thinking. He suggested that the errors maintained depression. They included selective abstraction,
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minimizing positives and magnifying negatives, over generalization and arbitrary inference (Kohlenberg, p 234). Historical development of cognitive therapy The theory of cognitive therapy came to be more than 50 years ago and it suggested that thoughts act as a go-between to stimuli like emotions and external events.

A stimulus brings out a thought which can be a weighed up judgement of a kind and this further leads to a certain emotion. People's evaluation of thought about a certain stimulus is what results to an emotional response and not necessarily the stimulus itself. Beck also came up with the etiological theory of depression under cognitive therapy. The theory indicated that people think negatively because their thinking is inclined to negative interpretations. People suffering from depression acquire negative schemas which are important ways through which information about the future; the world and the self are processed.

These schemas are adopted early in life maybe during childhood or puberty as a result of going through stressful events in life. When such people come across situations that are similar to the ones in which the negative schemata was established, it becomes activated in the current situation (Kohlenberg, p 235). Beck also explained about the negative cognitive triad which constitutes negative biases and negative schemata. He proposed that people who are depressed are very likely to make unconstructive evaluations of their future, world and selves.

Depressed people are impossibility thinkers according to Beck. The cognitive triad indicates that a negative schema results to cognitive bias which fuels negative schema (Kohlenberg, p 237). Researchers suggested that <https://assignbuster.com/behavioral-therapy/>

depression could occur as a result of responding to perceived or imaginary loss. It could also be caused by self critical characteristics of the ego. Many psychologists wrote about cognitive features of depression trying to identify the cognitive components that caused depression. They also tried to develop many cognitive intercessions that could be used to treat depression.

Since then, there have been many successful cases of patients suffering from depression getting well through cognitive therapy. His theory was opposed by behaviorists who claimed that mental causes of problem was unmeaningful and non scientific. With time, it was merged with the behavioral therapy so as to deal with the problems that it could not have dealt with on its own (Kohlenberg, p 240). Strategies under cognitive therapy
Cognitive therapy uses two strategies i. e. emotional focused and problem focused strategies.

The problem focused strategy aim at directing the client in the process of identifying the problem. The therapist then helps the client to identify the responses that are utilized in the process of reducing distress in a situation. They are also evaluated to check how effective they are. The therapist and the client then develop and examine alternative responses to see how beneficial they can be to a client. When faced with a stressful situation, the client feels empowered to make mindful alternatives and chose among them the best way in which to respond.

This gives the patient a kind of control over situations as they try different methods of getting out of distressful situations (McCullough, Para 32). Emotional focused strategies also aim to get the same outcomes as the other strategy. This perspective aims to alter the perception of the client on
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the distressing event. It therefore helps in changing the level of perceived suffering. The client is helped to redefine the problem which aids in the transformation of a disaster into a challenge or even an opportunity.

The process of restructuring the event can be achieved through various ways like selective attention, distancing, minimization, and looking for constructive value from any given bad situation. When all these happen, the patients get the feeling that he is in control of the situation and this contributes to reduce the levels of stress (Kohlenberg, p 245). Best fit patients for cognitive therapy Since this technique was discovered, the most common condition that it has treated is depression.

Patients who have depression are allowed to undergo self evaluation to check whether they act, say and do things the way they are supposed to do and how the patient views all these. Skills deficits are also established so that the therapist can know the source of the problem. Life experiences in terms of how satisfied the patient has been by the kind of life that he has lived (McCullough, p 24). The expectations of the patient are also evaluated in order to know how realistic they are. The therapist checks on the kind of self talk that the patient usually has.

If it is negative, then it could be a source of depression since the patient seems not to believe in his capabilities and this could lead to negative repercussions like being fired (Kohlenberg, p 254). The process goes on to evaluate the kind of automatic thought that the patient has. In most cases, there is consistency in that a person who usually has positive automatic thought is likely to have them, in most situations and the same case applies

to negative automatic thoughts. Irrationality or rationality of ideas is evaluated because irrational ideas could cause depression.

Depressed patients tend to generalize in most cases. The therapist works to find out the extent of generalization in his depressed patients. Cognitive distortion is also checked so that the therapist can be in a position to tell the extent of depression. Optimism versus pessimism is evaluated given different situations. All these are ways through which therapists can know the causes of depression and get ways of tackling it (McCullough, p 25).

Comparison and contrast between behavioral and cognitive therapy

Behavioral therapy focuses on how one can change from bad behavior through strategies like reinforcement. On the other hand, cognitive therapy focuses on how there can be a change of behavior due to a change in how a person thinks about a certain situation. While cognitive therapies deal with emotions and thoughts that direct a person towards behaving in a particular way, behavioral therapy on the other hand focuses on how to change and eliminate the bad behavior (Kohlenberg, p 263). While behavioral therapy deals with observation of behavior, cognitive therapy deals with the cognitive elements.