July Newsletter



From the Director's Chair

Joel L. Becker, Ph.D.



Boston University



Having just returned from the 6th World Congress of Behavioral and Cognitive Therapies in Boston I have once again been impressed and excited by the breadth and importance of the work we are doing in our field. This conference, which is held every three years, brings together the leading teachers and researchers from all over the world. There were over 2200 participants from 54 different countries.

Several colleagues asked me whether I had learned anything "new" and I certainly heard some presentations that did in fact, have me think about certain issues in different ways. An example was a symposium on "cognitive bias modification," which took a very experimental approach to changing the way people attend to and interpret ambiguous situations. As you might expect these researchers found that if you train people to interpret an ambiguous event positively it will have the same effect on other ambiguous situation that they may be facing.

I learned from a presentation by David Ba meta-analytic studies can be thought of as not that dissimilar from reading a Rorschach. One meta-analytic study proportioned 60-70% of outcome as from "common factors" while another attributed outcome 60-70% based on technique or type of therapy. His view was that the only way to actually compare therapies or techniques







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would be through the use of prospective studies using different methodologies.



Dr. Becker with Dr. Beck

On Saturday morning of WCBCT, I had the pleasure of attending a symposium on "CBT Training in Small Countries: Developing International Standards," organized by Henrik

Tingleff of the Copenhagen, Denmark Center for Cognitive Psychologists. Earlier this year I was one of the participants via Skype who did training with his group. It was a terrific experience at the time and at

this symposium we heard about other trainings being done using innovative technologies.

But, I think the most important function of these conferences is to have us join together to hear each others work and feel supported and reinforced. Patricia Resick presented our on-going success with treating PTSD, a disorder that has great treatment outcomes from a CBT approach and whose results are clearly maintained at a 5 year follow up. If we can disseminate these findings we will be able to help not only those in our military, but the 100,000's of people who are traumatized around the world in all kinds of ways. There were presentations about other evidence-based interventions, too numerous to mention here, that show CBT to be helpful in a variety of problems.

I walked away feeling very confidant that despite the differences among us as psychologists, we DO, help people who are suffering. I think as evidence-based practices continue to be developed the future seems brighter for all.

Recent News

CBTI 5-year approval

The Cognitive Behavior Therapy Institute (CBTI) was founded in 2007 by Dr. Joel Becker to provide Continuing Education credits to mental health professionals as well as to promulgate techniques and advancements in Cognitive Behavior Therapy (CBT). We are pleased to announce that **CBTI** was recently received certification by the American Psychological Association to provide Continuing Education courses for the next five years. We will begin to offer various courses and teleseminars in the following months. Please look to our website for future offerings.

<u>Dr. Becker giving presentation at LACPA</u>

Dr. Becker will be giving a presentation on Cognitive-Behavioral treatment for Insomnia at this year's annual LACPA convention. Hundreds of mental-health professionals from the Los Angeles area gather to learn about new research and innovative therapy techniques from various different perspectives of psychotherapy. This is always a great opportunity to learn about advancements in the field as well as disseminate information about what we do here at CBA. We will also have a booth at the convention where we will be distributing information. We look forward to attending the LACPA convention!

Medicine at UCLA

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Course Offerings

<u>CBT for Bipolar</u> <u>Disorder</u>



Dr. Joel L. Becker's presentation on current Cognitive Behavior Therapy treatments for Bipolar Disorder is now available for purchase on CD. This course is available for both general audiences as well as for 1.5 Continuing Education credits. Cognitive Behavior Therapy has been shown to be an effective adjunctive treatment for patients with Bipolar Disorder. Attendees will learn about research and strategies to help patients with medication adherence, mood regulation, the signs of a future episode, and how to reduce the intensity and duration of the episode. To order or for more information, please contact Rusty Wiggs at (310) 858-3831 ext. 7.

Research Corner: ACT for Obsessive-Compulsive Disorder

<u>Jayson L. Mystkowski, Ph.D.</u>

The treatment of choice for Obsessive-Compulsive Disorder (OCD) has been repeatedly shown to be Exposure and Response Prevention (ERP), a form of Cognitive Behavior Therapy. In this type of therapy, individuals are asked to confront anxiety-provoking situations (e.g., "contaminated" items or objects) and to not attempt to neutralize anxious thoughts, images, and feelings.



Over time, as individuals work within the ERP framework, they learn that their anxiety subsides or habituates, that catastrophic thinking begins to lessen, and that they can expose themselves to more fearful situations with success.

While researchers clearly champion this form of Cognitive Behavior Therapy as the standard of care when treating OCD, recent developments in another areas of CBT are proving useful as an add-on to OCD treatment. Acceptance and Commitment Therapy as was discussed in the latest International OCD Foundation's OCD Newsletter (Twohig) gives individuals a choice to ritualize their anxious obsessions or to engage in other behaviors that are more highly valued. Individuals are asked to find a place where they can openly accept their thoughts, feelings, and body sensations without evaluating or judging them rather than going down the path where every time an obsession occurs, a compulsion must follow. For example, ACT teaches individuals that they can work, play, eat, and interact with others when an obsession is present.

ACT is a promising advance in CBT for OCD, and integration of its various techniques has the potential to help those who are particularly stuck with trying to regulate or control their obsessive thinking. By maintaining a flexible mindset, individuals learn that they are capable of **letting go** of their obsessions and into experiencing ones life.

-- Twohig, M. (2010, Spring). What is Acceptance and Commitment Therapy, What is its Effectiveness, and Should I Look Into It? OCD Newsletter, 24, 19-21.

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