



Book Reviews— Cognitive Behavioral Therapy Made Simple

Laurie Fox, EdD, ET/P

Cognitive Behavioural Therapy for Dummies

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Seth J. Gillihan

**Cognitive Behavioral Therapy Made Simple:
10 Strategies for Managing Anxiety, Depression,
Anger, Panic, and Worry**

Althea Press (2018)

219 pages, \$9.79 (paperback)

Rhena Branch & Rob Willson

Cognitive Behavioural Therapy for Dummies (2nd ed.)

Wiley & Sons (2010)

390 pages, \$16.61 (paperback)

Much of Cognitive Behavioral Therapy (CBT) is beyond our professional scope as educational therapists. This is important to acknowledge. Still, these books provide a valuable introduction to its principles and practices for ameliorating deleterious effects of negative thoughts, feelings, and behaviors. It is worth knowing about overlaps with educational therapy. Someday the separate silo walls may become more porous as research suggests ever-increasing comorbidity, commonality, and interchange of helpful strategies.

BOOK REVIEW

It is well-known that emotional issues, such as anxiety or a sense of hopelessness, for example, are commonly comorbid with learning struggles. We glean an introduction to the cyclically interacting triad of cognitions, emotions, and behaviors that can inhibit success in psychologist Seth Gillihan's *Cognitive Behavioral Therapy Made Simple* (2018) and in therapists Rhena Branch and Bob Willson's *Cognitive Behavioural Therapy for Dummies* (2010). While CBT requires specialized training and a highly structured delivery program separate

from educational therapy, there is interesting overlap worth knowing about, such as: specific and collaboratively-determined goals, breaking tasks into manageable pieces, habit-shifting, time/procrastination/executive functioning issues, confidence-building, individualized work, a positive learning relationship, focus on challenges in the moment, and homework practice for internalizing. "You'll get to grips with what CBT stands for and why it's such a hot topic" (Branch and Wilson, 2010, p. 8).

A crucial feature of CBT is that it is based on scientific evidence. This means that the techniques "...are based on a scientific understanding of how human thoughts, emotions, and behavior interact with one another and the environment to produce clinical problems (e.g., basic principles of operant conditioning; effects of emotion on attention and memory)" (Knouse, 2015, p. 758). Familiar foundations of CBT include metacognition, reflection, mindfulness, and Albert Ellis' *Rational Emotive Therapy* (Selva, 2018). ADHD spans mutual terra firma since emotional dysregulation is considered a core component (Barkley, 2015).

We all likely notice when students' emotional regulation is influenced by words that inhibit positive thinking or actions or that inflame negativity. One keystone strategy from both books is to help them notice language they use. Applicable to educational therapy, and perhaps familiar as *cognitive appraisal/reappraisal or constructive rephrasing*, we can notice how thoughts about learning are expressed. Therein lies fertile ground for assumption-checking which, in turn, can impact emotions and behaviors. We may know these as *cognitive distortions*; CBT calls them *thinking errors*. Some appear in the box on the next page (Figure 1).

Thinking Errors	
Black and white thinking	Emotional reasoning
Shoulding	Fortune telling
Overgeneralization	Mind reading
Catastrophizing	Entitlement
Discounting the positive	False sense of helplessness

(Gillihan, 2018, pp. 56-57)

Figure 1

Cognitive Behavior Therapy Made Simple is a concise, reader-friendly overview of CBT principles and practices. Gillihan welcomes readers to learn more about it, claiming that it is written for those who have no knowledge of CBT as well as for those who do. A set of three tools is demonstrated for key issues: Think (Cognition), Act (Behaviors), and Be (Mindfulness). This reader imagines some of the mindfulness strategies being challenging to remember, especially under stress, and wishes that emotions (feelings) were standard components of the strategy model as my general understanding led me to expect. Disorders align more with previous editions than the current DSM-5 (American, 2013). Helpful resources are provided for further investigation. Short, made-simple books like this can satisfy preliminary curiosities.

Don't be put off by the title *Cognitive Behavioural Therapy for Dummies*. Nearly double in length, it is superior for providing broader applications, for more specifics and examples, and for attention to the role of emotions that's underplayed in Gillihan. Its 10-page table of contents is a helpful schema for CBT's scope.

It is important to acknowledge that much of CBT is beyond our professional scope as educational therapists. It is not our role to provide therapy for underlying core beliefs nor for major disorders that influence learning nor to conduct a structured therapeutic CBT program. Still, this reading provides a valuable introduction to what CBT therapists do. Someday the separate silo walls may become more porous as research suggests ever-increasing comorbidity, commonality, and interchange of helpful strategies. For now, we can tap a basic CBT tenet by following Gillihan's suggestion: "... really listening to what you're telling yourself" (p. 53).

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