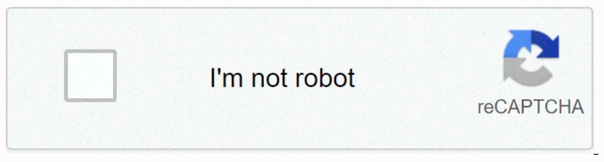

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Cbt downward arrow technique worksheet

The downward arrow technique is used in cognitive behavioral therapy to access key beliefs. How is it used? Purpose Core beliefs are a critical part of the formulation of many cases in cognitive behavioral therapy (CBT). As a therapist, if you understand what the core beliefs are, you can better understand the symptoms that require intervention. This in turn allows you to more effectively manage these symptoms. Knowledge is power, and knowing a patient's core beliefs gives you the power, ideally, to choose appropriate treatment components. Knowing core beliefs also allows you to better understand which CBT skills will be most useful. The problem is that core beliefs are often difficult to discern. More experienced therapists will sometimes be able to assume core beliefs early in treatment, but certainly not always. Regardless of your level of experience, it's helpful to speed up the process of learning a patient's core overreports whenever possible. The downward arrow technique can do that. When to use the downward arrow technique to speed up patient protitation The downward arrow technique is used to facilitate symptom improvement through cognitive restructuring. Sometimes a patient will become quite adept at restructuring various negative automatic thoughts and intermediate beliefs. But this usually doesn't translate into an ability to spot core beliefs. To understand how we can use automated thoughts and intermediate beliefs as a springboard to access core beliefs, let's look at an example. The list below is from a patient with depression: Verna doesn't like me. Women always think I'm stupid. I can't stand being in large groups. I will never have close friends - really close, I mean. If a core belief, e.g. being untruffled, lies behind these intermediate beliefs and automatic thoughts, patient progress can plateau until and unless the unserious beliefs are directed. To help the therapist improve the case or symptom formulation Sometimes even after several weeks or months of CBT therapy, areas of the therapist's formulation of the patient's problems will be incomplete. This confuses the image and hinders efforts to distinguish which problem or symptom to solve in what order. Using the downward arrow technique, if successful, can reveal that the therapist's core beliefs that were not visible before. In these cases, the therapist does not spend time discussing the importance of a core belief revealed with the downward arrow technique. The therapist can continue to focus with the patient on the symptoms and problems that deserve attention at the time. However, the next objective may be amended on the basis of the revised wording. Such The Downward Arrow Technique Step One: Teach your patient maybe this would be a matter of course, but the downward arrow technique works most effectively after one you have arrived in preliminary Formulation. This will take a few sessions, whether you consider them to be assessment, pretreatment or treatment sessions. Step two: Be prepared - Choose the right Starter Thought As you prepare for the session, have in mind the kind of thoughts and intermediate beliefs you want to listen to. These will be thoughts and beliefs that seem strong, rigidly held or effective in ways that surprise you. If you have prepared this way prior to the session, you will be ready when the thoughts come up. Step three: Inquire with Purpose Question to ask to come to believe a level deeper: And what does it mean? What does that say about you? And then what if it were true? What are you afraid that might mean? And why does it bother you? What does that suggest? Below is an example of how this part of the session might sound. The example illustrated here is by a music teacher with depression. His students will give a recital next Friday. Automatic thought (AT): The recital becomes a disaster. Query: Is it? Ok. And what does it mean if it is? Faith: That means I've failed. Query: And so what? If you've failed, what does that mean? Faith: That means I'm a bad teacher. Query: And what does that mean? Core belief: It means I'm just... Out. Warnings Do not use try to access core beliefs with this technique too early in treatment. You want the patient to have a good skill base to solve whatever belief you find. Don't rely on the downward arrow technique as a therapeutic eureka moment. Insight is not the goal; information is the target. Use the information you get to better inform your future work with the patient. Don't put words in patients' mouths. It can be tempting to say something like and do you think it means that you are incompetent, generally? below the downward arrow technique. However, the technique is optimally effective when the formulation comes from the patient. Additionally, you don't want patients to feel pressured to agree with your hypothesis belief if it doesn't exactly fit their understanding. Skip to the main psychology content Psychology Tools Vertical Arrow / Down Arrow / Vertical Descent is a form of Socratic interrogation, where the therapist asks a number of questions to uncover intermediate level and core beliefs. This information handout and spreadsheet introduces the concept and encourages customers to reflect on the importance of underlying surface cognitions. Select language English (GB) English (US) Spanish (International) Select language English (US) Spanish (International) English (GB) Select language English (GB) English (US) Select language English (GB) English (US) Vertical Arrow / Downward Arrow / Vertical descent is a form of socratic questioning, where the therapist asks a number of questions to uncover intermediate level and Beliefs. Automatic Automatic often reflects moment-by-moment concerns, concerns, or fears (I will be hurt, I will not be able to manage), and many individuals benefit from addressing any cognitive biases inherent in these concerns (i.e. working at this level of concern). However, the CBT model also conceptualises underlying intermediate and core beliefs, leading to the generation of (feed) the moment-by-moment concerns. The vertical arrow/downward arrow/vertical descent technique gives the therapist access to the beliefs underlying current thoughts or concerns. The veracity and helpfulness of these underlying or core beliefs can then be explored and addressed. Therapists often use this technique as a series of questions within the flow of therapy. But it can also be used openly/explicitly with a client by writing the current concern at the top, and then descending with the client through intermediate beliefs by asking questions like if it were true, it would bother me because it would mean.... When beliefs do not seem to change further core beliefs have often been reached. Clients may be instructed to use the technique as a homework exercise to explore beliefs underlying concerns that appear during their week. One should be aware of using this technique compassionate as clients often access basic beliefs quickly, which some may find disruptive. Beck, A. T. (1979). Cognitive therapy and the emotional disorders. New York: Meridian. Burns, D.D. (1980). Feeling good: the new mood therapy. New York: Signet. Leahy, R.L. (2003). Cognitive therapy techniques: a practicing guide. New York: Guilford Press. Merrell, K. W. (2001). Help students overcome depression and anxiety: A practical guide. New York: Guilford Press. Downward/Upward Arrow in Common Language For Psychotherapy The downward arrow technique is used in cognitive behavioral therapy to access key beliefs. How is it used? 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