Cognitive Therapy for chronic depression: Instilling hope and optimism in therapist and client

This one day workshop will describe the theoretical and clinical components of Beckian Cognitive Therapy for depression (Beck et al 1979) and the adaptations required to utilise the Beckian model when working with chronic and recurrent depression (Moore and Garland 2003). The workshop will combine didactic presentation of theory, (illustrated with clinical examples) with practical exercises aimed at skills development. There will also be a component of reflective practice aimed at enabling participants to build bridges between clinical practice and the learning environment. There will be a particular emphasis on the cognitive science of depressive thinking and memory with particular reference to depressive rumination and over-general memory and the clinical implications of these when working with chronic and recurrent depression. The workshop will also make reference to the place Mindfulness Based Cognitive Therapy (MBCT) and Compassion Focused Therapy (CFT) Gilbert (2010) in relation to standard Beckian cognitive therapy interventions. The workshop presenter will draw on her twenty years’ experience of working with depression to help participants problem-solve some of the difficulties they face when working with chronic and recurrent depression.

The day: will cover:

- Managing therapist hopelessness an helplessness when working with chronic and recurrent depression
- The Beckian formulation of chronic and recurrent depression (Moore and Garland 2003)
- Adaptations to the Beckian protocol when working with chronic and recurrent depression
- Engaging the hopeless and helpless client in cognitive therapy
- Grappling with the challenge of avoidance in chronic and recurrent depression
- Methods for tackling rumination in chronic and recurrent depression
- Tackling shame and self-criticism in chronic and recurrent depression
- To develop understanding of the role of rumination, over-genera memory and shame and self-criticism in chronic and recurrent depression and how MBCT and CFT suggest these may be addressed.

Note to participants:

Please attend the workshop with a client in mind with whom you are currently working where the primary diagnosis is chronic and recurrent depression (as opposed to chronic depression being a co-morbid or secondary feature of the presentation). Try and spend five minutes reflecting on your last session
together and recall what went well and also what if any, challenges are always present each session.

References


