

Problem-specific competences describe the knowledge and skills needed when applying CBT principles to specific conditions.

They are not a 'stand-alone' description of competences, and should be read as part of the CBT competence framework.

Effective delivery of problem-specific competences depends on their integration with the knowledge and skills set out in the other domains of the CBT competence framework.

Specific Phobia

Sources:

Butler, G. (1989) Phobic disorders pp 97-128 in K. Hawton, P.M. Salkovskis, J. Kirk and D.M. Clark Cognitive Behaviour Therapy for psychiatric problems: A practical guide Oxford: OUP
Craske, M.G., Antony, M. and Barlow D.H. (1997) Mastery of your specific phobia: Therapist Guide New York: OUP

Assessment

An ability to determine the precise nature of the phobia (in terms of specific symptoms, severity and its impact on daily living)

An ability to help the client identify the specific thoughts, feelings and behaviours associated with the phobia (including an ability to help the client identify these by exposure to feared situations, either behaviourally or in imagination)

An ability to identify patterns of avoidance and/or safety behaviours associated with the phobia

An ability to identify both adaptive and maladaptive coping skills employed by the client to manage their phobia

An ability to work with the client to develop a list of phobic objects and situations and to develop a graded hierarchy which can be used to guide exposure

An ability to identify the presence of other anxiety disorders and to evaluate whether they or the specific phobia represent the primary problem for intervention

An ability to assess the significance of coexisting problems which may make treatment less easy or more protracted (such as severe depression, substance misuse or severe personality disorder)

Explaining the rationale for intervention

An ability to help the client understand the nature of their phobic reaction(s)

An ability to convey to the client the rationale for a cognitive behavioural intervention, with its focus on behavioural and cognitive factors which maintain the phobic reaction

An ability to help the client define realistic goals for treatment

An ability to help the client to complete relevant self-monitoring records for use throughout the intervention

Intervention

An ability to help the client use self-monitoring to foster the development of a more objective sense of their reactions to phobic situations, and hence foster a greater sense of mastery and control

Cognitive restructuring

An ability to help the client understand the role of cognitions in maintaining phobias (e.g. misperception of risk associated with phobic situations, or misinterpretation of interoceptive cues related to overbreathing)

An ability to help the client understanding how fear of their physical reactions to phobic situations may contribute to maintenance ('fear of fear')

An ability to help the client identify thoughts and assumptions which are associated with anxiety, and to use guided discovery to generate alternative cognitions

An ability to help the client generate behavioural experiments (usually as part of the exposure component) to test the validity of cognitions and assumptions

Exposure component

An ability to convey the rationale for exposure – both to explain the behavioural model of phobic anxiety (using examples to explain how avoidance can maintain symptoms), and to convey the sense that exposure is an opportunity to test the validity of relevant cognitions and assumptions

An ability to work with the client to draw up a graduated list (or lists) of practice and homework tasks

An ability to work with the client to ensure that exposure is graduated, repeated and prolonged, and to identify any problems in the application of exposure

An ability to implement imaginal exposure where practical problems make it hard to implement in-vivo exposure

An ability to implement interoceptive exposure for clients who are fearful of bodily sensations in the phobic situation

An ability to help the client identify and circumvent any covert avoidance or the use of safety behaviours

An ability to help clients with blood and injury phobia learn applied tension techniques

An ability to help the client identify pertinent homework tasks (usually in-vivo exposure), to review progress and to plan further homework

An ability to make use of role playing and rehearsal

An ability to model non-phobic behaviour (e.g. approaching the phobic object)

Maintenance of gains

An ability to discuss strategies for the maintenance of gains and for managing setbacks and relapse