Cognitive therapy: a practical guide

This book by Dr Schuyler, a psychiatrist working in South Carolina, is a revised edition of his 1991 book, A practical guide to cognitive therapy. It seems to be designed as an introduction to cognitive therapy for clinicians in training and Dr Schuyler says in the Preface that he hopes the book will continue the tradition of the previous book that “enabled [readers] to not just learn about CT, but to do CT”. For this reviewer, the book only partially achieves that goal.

On the positive side it is written in an easy and accessible style, with numerous lively examples of patients based on Dr Schuyler’s long experience in CT. On the other hand, this approach also leads to one of the book’s weaknesses: its chatty and anecdotal approach sometimes seems better at conveying these stories than it is at providing systematic guidelines for clinicians in training, and it does not much recognise many of the developments in cognitive therapy over the last 15 years. This is not helped by the book’s balance of content, with over one third of its entire length taken up by the last section, ‘The model in practice’, in which a typical cognitive therapist’s week is described, with the problems and treatment of each of the patients seen during that week described in a page or so. Although this section is useful in giving the novice a flavour of cognitive therapy practice, the descriptions are too short to give trainees much detailed guidance and it does seem odd that is it almost twice as long as the section that actually describes the cognitive therapy model and therapeutic techniques. The latter section, which one would have expected to be at the centre of an introductory practical guide, is only 40 pages long, in comparison to the ‘Model in practice’ section’s 70 pages.

In addition to those mentioned, other sections of the book include one on ‘Preliminary issues’ (a look at factors affecting therapeutic outcome in general, and a chapter of ‘practical tips’); and a section on ‘Applying the model’. This last has chapters on what seem to a British reader a rather idiosyncratic selection of problems: falling out of love, dealing with separation after a relationship, and working with older people. Perhaps there is a cultural or contextual problem here. For a UK therapist working in the NHS, as this reviewer does, the first two of these are not the kind of problems referred very frequently, but perhaps they are more common in US private practice. Finally there is a section on ‘Extending the model’, which looks at long term ‘schema focused’ therapy, reparenting (as a strategy for helping young people with life problems, not Jeffrey Young’s concept in schema-focused therapy), couples therapy, and follow-up.

The book has a curiously old-fashioned air at times. For example, its presentation of the cognitive model, and of some of the therapy techniques, sticks very closely to the ‘classical’ Beckian model of depression as described in 1979, complete with thinking ‘errors’ – long after many cognitive therapists have started to feel that such a term conveys an unnecessarily negative tone about patients’ thinking styles. Even here there are odd omissions: there is no mention of activity scheduling in depression, nor of the kind of case conceptualisation that is at the heart of most modern cognitive therapy. There is also little mention of the specific models that have been developed to work with a wider range of anxiety and other disorders since Beck’s initial work on depression and anxiety. For example, although obsessive-compulsive disorder (OCD) is discussed briefly in the ‘Model in practice’ section, it contains no reference to the work of Salkvoskis, Rachman and others in building specific cognitive models for OCD. Indeed, there is

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almost no reference to any work done outside the USA, and not much to anything published recently – almost three quarters of the references are to texts published more than 15 years ago. It thus seems that it would be difficult for novices to use this as a source book from which they could follow leads to the current wider CBT literature.

In summary then, it is hard to see who this book is for. It is easy to read and does have some nice clinical examples, which might be helpful to give novice therapists some taste of cognitive therapy in practice. But as a detailed practical guide it lacks sufficient depth, detail and rigour to make one recommend it over the classic introductory CBT books such as Judith Beck’s Cognitive therapy: basics and beyond or Hawton et al’s Cognitive behaviour therapy for psychiatric problems.

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