

developed by Ivan Pavlov, a Russian chemist and physiologist. Pavlov discovered the conditioned reflex or response while doing experiments on the digestive process of dogs. The conditioned reflex is a learned reflex, in contrast to an innate reflex such as pulling one's hand away from a hot flame. Pavlov's finding later became a critical component of behavioral psychology.

John Watson, an American psychologist, was a critic of Freud's theories of human behavior and was fascinated by Pavlov's discovery of the conditioned response. He undertook a series of studies on the behaviors of children and developed a set of ideas that came to be known as behaviorism, a branch of psychology (Watson, 1914). During the 1950s, behaviorism was further developed by B. F. Skinner (1953). Behaviorism took the focus off Freud's unconscious motives and instinctual drives, and argued that maladaptive behaviors are learned and can therefore be unlearned (Barker, 2003). Although early life experiences are not ignored, behavior therapies are more present centered and forward looking than psychosocial therapies.

Although all of the theories we just discussed are still being used by many social workers, in the last two decades, **cognitive-behavioral theory** and **interventions** have increasingly become dominant. **Cognitive theory** is based on the belief that how and what a person thinks determines or contributes to how the person feels and behaves. Maladaptive behaviors can be explained by irrational or distorted thinking that results from misperceptions and misinterpretations of the environment (Payne, 2005).

Cognitive and behavior theories have been combined in several different types of cognitive-behavioral interventions. In these approaches, the behavioral aspects of treatment are designed to weaken the connections between habitual reactions (fear, depression, rage, or self-defeating behaviors) and troublesome situations, and also to calm the mind and body so the person can think more clearly and make better decisions. The cognitive aspects teach about thinking patterns and how to change patterns that are based on distorted or irrational beliefs. Cognitive-behavioral therapies (CBT) have been the most researched of any therapy model. Research over many years found cognitive-behavioral therapies to be effective in treating depression, anxiety, relationship challenges, social phobias, eating disorders, and post-traumatic stress disorder (PTSD). As a result, cognitive-behavioral therapies are one of the most frequently used clinical interventions in social work practice (Gonzalez-Prenedes & Brisebois, 2012). However, findings from recent research have raised the question as to whether the effectiveness of CBT has been overstated. An examination of research studies conducted over many years found that the effectiveness of CBT for depression has been decreasing over the years (Johnsen & Friberg, 2015). Findings such as these have encouraged researchers and practitioners to continue exploring other theories and interventions.

Crisis Theory and Crisis Intervention Generalist social workers are often required to provide crisis intervention services. A crisis is a situation in which a person's normal coping mechanisms are inadequate or are not working. The person becomes immobilized by feelings of helplessness, confusion, anxiety, depression, and anger. **Crisis Intervention**, which is based on crisis theory, is a

short-term model of social work practice that is designed to assist victims and survivors to return to their precrisis level of functioning. The number of practitioners specializing in crisis intervention has been growing over the past 25 years (Myer, Lewis, & James, 2013). Crisis intervention is a primary social work intervention and is provided in almost every social work setting.

According to Roberts (2005), a crisis is "an acute disruption of psychological homeostasis in which one's usual coping mechanisms fail and there exists evidence of distress and functional impairment" (p. 778). Overcoming the crisis is perceived as part of the maturation process and as necessary to developing healthy self-esteem. Crisis theorists focus on reactions to and consequences of such catastrophic or traumatic crises as war, rape, natural disaster, and workplace and school violence (Ell, 1996). Chapter 14 provides more detail on these areas of social work practice.

The critical components of effective crisis intervention include assistance that is provided as quickly as possible, brief treatment periods with a focus on practical information and tangible support, the goal of reducing symptoms, and efforts to mobilize the client's social support networks (Ell, 1996). In some cases, clients may have to be referred for longer-term psychosocial or clinical treatment. For example, a client diagnosed with PTSD as a result of the crisis may need both medication and long-term therapy.

Mindfulness-Based Theories and Therapies A growing development in theory and therapeutic approaches can be found in the practice of mindfulness. Mindfulness is the process of bringing one's attention to what is happening internally and externally in the current moment. Mindfulness can be developed through practicing meditation and other approaches that encourage people to be actively present and to observe their thoughts and feelings during daily activities. Mindfulness practice encourages noting thoughts and emotions without judging them as good or bad. The theory suggests that being fully aware in the present allows people to reduce regret and guilt about the past and decrease worry about the future. Mindfulness-based approaches have increasingly been employed to treat depression, anxiety, PTSD, social phobias, and addiction (Khouny et al., 2013).

Mindfulness-Based Cognitive Therapy Mindfulness-based cognitive therapy (MBCT) combines cognitive therapy, described above, with mindfulness practice, often through the use of meditation. People learn about the relationship between their thoughts and their feelings and actions, and also learn the skills to be more fully present so they can become aware of their thoughts as they occur. Participants learn to notice and accept their thoughts and feelings without having to judge or react to them. This process can help people become less reactive and less driven by destructive patterns and habits. MBCT is used to treat depression, anxiety, and addiction, as well as other mental and physical health concerns.

Mindfulness-Based Stress Reduction Mindfulness-based stress reduction (MBSR) was developed in the 1970s by Jon Kabat-Zinn to help people cope with pain and other issues that were not effectively treated by traditional Western