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Nota di contenuto	Emotional Disorders and Metacognition: Innovative Cognitive Therapy; CONTENTS; List of Figures; List of Tables; About the Author; Preface; Acknowledgements; PART I THEORETICAL PERSPECTIVES; 1 SETTING THE STAGE: METACOGNITION AND COGNITIVE THERAPY; Metacognition; Varieties of metacognition; knowledge; experiences; metacognitive control strategies; Emotion, metacognitive monitoring and control; Conclusions; 2 THE SELF-REGULATORY EXECUTIVE FUNCTION (S-REF) MODEL; Cognitive-emotional regulation: the S-REF Model; outline of Self-referent knowledge (beliefs); plans and goals System operating characteristics Causes and effects of emotion; Internal events and feelings as metacognitive data; The maintenance of psychological disorder; Belief change: mental modes and coping; Functions of thought: a special role for imagery; Conclusions; 3 METACOGNITION AND EMOTIONAL DISORDER: EVIDENCE FOR THE S-REF MODEL; Prediction 1(a): Metacognitive beliefs and trait emotion; Prediction 1(b): Effects of metacognitive belief manipulation; Prediction 2 Metacognitions and maladaptive coping; Prediction 3: Metacognitive

thought control strategies

Prediction 4 Deleterious effects of worrying rumination
Prediction 5: Cognitive efficiency; Conclusions; 4 EMOTIONAL PROCESSING, THE S-REF AND TRAUMA THERAPY; Emotional processing; Bower's network model of mood and memory; Ingram's network model of depression; Summary of network limitations; The S-REF perspective on emotional processing; architecture; Level of representation; goals and coping; metacognitions and attention; Failure and success in emotional processing; coping strategies; metacognitions; situational factors; symptom appraisals; Low-level maladaptation

S-REF treatment guidelines for overcoming trauma

reactions
Conclusions; 5 S-REF, SCHEMA THEORY AND INTERACTIVE COGNITIVE SUBSYSTEMS (ICS); S-REF and schema theory; S-REF and interacting cognitive subsystems (ICS); architectural considerations; limitations of implicational codes; dynamics of cognitive control; simplistic view of self-awareness; modifying problematic processing modes; worry/rumination cycles; interruption of worry cycles; Comparative treatment implications of S-REF versus ICS; treatment goals; specific strategies: mindfulness training and attention training

Summary and conclusions
PART II CLINICAL APPLICATIONS; 6 METACOGNITIVE FOCUSED THERAPY: BASIC CONSTRUCTS; General treatment principles; Cognitive and behavioural responses change cognition; Stress management strategies; Developing metacognitive control; A dynamic view of cognitive-behavioural modification; Summary of general treatment implications; Conclusions; 7 CLINICAL ASSESSMENT OF METACOGNITIONS; Reformulated A-B-C analysis; Metacognitive profiling; meta-beliefs/ appraisals; coping strategies; attention; memory; judgements; mode; Three questionnaire measures of metacognition

metacognitions questionnaire (MCQ)

Sommario/riassunto

The clinical experience of cognitive therapies is adding to the understanding of emotional disorders. Based on clinical experience and evidence, this groundbreaking book represents a development of cognitive therapy through the concept of metacognition. It provides guidelines for innovative treatments of emotional disorders and goes on to offer conceptual arguments for the future development of cognitive therapy. Offers a new concept in cognitive therapy and guidelines for innovative treatment. Clinically grounded, based on a thorough understanding of cognitive therapies in practice. Written b
