

behavioral vs cognitive therapy

behavioral vs cognitive therapy represents a fundamental comparison in the field of psychotherapy, highlighting two distinct yet often complementary approaches to mental health treatment. Both therapies aim to alleviate psychological distress but differ significantly in their focus, techniques, and theoretical underpinnings. Behavioral therapy primarily targets observable behaviors and seeks to modify maladaptive patterns through conditioning and reinforcement strategies. In contrast, cognitive therapy addresses dysfunctional thoughts and beliefs, aiming to restructure negative cognitive processes to improve emotional well-being. Understanding the nuances of behavioral vs cognitive therapy is essential for clinicians, patients, and mental health professionals to select the most appropriate intervention. This article explores the definitions, techniques, applications, and effectiveness of both therapies, providing a comprehensive overview of behavioral vs cognitive therapy. The following sections will guide readers through key aspects, including historical context, methodology, benefits, limitations, and practical considerations.

- Understanding Behavioral Therapy
- Exploring Cognitive Therapy
- Comparing Behavioral vs Cognitive Therapy
- Applications and Effectiveness
- Choosing the Right Therapy

Understanding Behavioral Therapy

Definition and Core Principles

Behavioral therapy is a form of psychotherapy that focuses on modifying observable behaviors through learning principles such as classical conditioning, operant conditioning, and social learning. It operates on the premise that maladaptive behaviors are learned and can therefore be unlearned or replaced with healthier responses. This therapy emphasizes measurable and concrete changes in behavior rather than internal thought processes.

Techniques Used in Behavioral Therapy

Behavioral therapy employs a variety of techniques to alter behavior patterns. These methods are evidence-based and aim to reinforce positive behaviors while reducing negative or harmful ones. Common techniques include:

- Systematic Desensitization – gradual exposure to feared stimuli to reduce anxiety responses
- Aversion Therapy – pairing undesirable behaviors with unpleasant stimuli to discourage them
- Token Economy – using tokens or rewards to reinforce positive behaviors
- Modeling – learning behaviors through observation and imitation
- Behavioral Activation – encouraging engagement in rewarding activities to combat depression

Historical Background

Behavioral therapy originated in the early 20th century, drawing from the work of psychologists such as John B. Watson and B.F. Skinner. It evolved as a reaction against psychoanalytic approaches, emphasizing scientific rigor and observable phenomena. Over decades, it has expanded into various behavioral modalities, integrating cognitive elements to form cognitive-behavioral therapy.

Exploring Cognitive Therapy

Definition and Core Principles

Cognitive therapy centers on the role of thoughts, beliefs, and attitudes in influencing emotions and behaviors. It posits that distorted or irrational thinking patterns contribute to psychological distress. The primary goal is to identify, challenge, and modify these cognitive distortions to promote healthier emotional responses and behavior. This therapy fosters self-awareness and cognitive restructuring.

Techniques Used in Cognitive Therapy

Cognitive therapy utilizes structured techniques designed to help patients recognize and alter dysfunctional thinking. These include:

- Cognitive Restructuring – identifying and challenging negative automatic thoughts
- Thought Records – documenting thoughts and evaluating their accuracy
- Socratic Questioning – guided questioning to examine beliefs critically
- Behavioral Experiments – testing the validity of beliefs through real-life experiments

- Mindfulness Integration – increasing awareness of present-moment thoughts without judgment

Historical Background

Developed in the 1960s by Aaron T. Beck, cognitive therapy emerged as a response to the limitations of psychoanalysis and behavioral therapy. Beck's research demonstrated that changing maladaptive thinking patterns could significantly improve mood and behavior. Since then, cognitive therapy has evolved and merged with behavioral techniques to form the highly effective cognitive-behavioral therapy (CBT).

Comparing Behavioral vs Cognitive Therapy

Focus and Approach

The primary distinction between behavioral vs cognitive therapy lies in their focal points. Behavioral therapy concentrates on changing external behaviors through reinforcement and conditioning without directly addressing thoughts. Conversely, cognitive therapy targets internal cognitive processes, aiming to reshape thought patterns to influence emotions and behavior indirectly.

Techniques and Methods

While both therapies may use overlapping strategies, their techniques differ in emphasis. Behavioral therapy relies heavily on conditioning techniques and behavior modification, whereas cognitive therapy uses cognitive restructuring and thought analysis. Despite these differences, many modern therapeutic approaches integrate both, recognizing the interdependence of cognition and behavior.

Duration and Structure

Behavioral therapy often involves short-term, structured interventions focused on specific behavior changes. Cognitive therapy may require longer engagement to explore and modify entrenched thought patterns. Both therapies typically emphasize goal-oriented sessions with measurable outcomes.

Applications and Effectiveness

Disorders Treated by Behavioral Therapy

Behavioral therapy has proven effective in treating a range of psychological conditions, especially those characterized by maladaptive behaviors. Common applications include:

- Phobias and anxiety disorders
- Obsessive-compulsive disorder (OCD)
- Substance abuse and addiction
- Behavioral problems in children, such as ADHD
- Post-traumatic stress disorder (PTSD)

Disorders Treated by Cognitive Therapy

Cognitive therapy is widely used for mental health issues where distorted thinking patterns are prominent. These include:

- Depression
- Anxiety disorders
- Bipolar disorder
- Eating disorders
- Personality disorders

Effectiveness and Evidence

Extensive research supports the efficacy of both behavioral and cognitive therapies. Behavioral therapy excels in producing rapid behavior changes, particularly in phobia and addiction treatment. Cognitive therapy is highly effective for mood disorders and anxiety by addressing underlying thought processes. The integration of both approaches in cognitive-behavioral therapy (CBT) often yields enhanced outcomes across a broad spectrum of psychological conditions.

Choosing the Right Therapy

Factors to Consider

Deciding between behavioral vs cognitive therapy depends on various factors related to the individual's condition, therapy goals, and personal preferences. Important considerations include:

- Nature and severity of symptoms
- Patient's cognitive awareness and willingness to engage in introspection
- Specific behavioral challenges and maladaptive patterns
- Time commitment and therapy duration
- Therapist's expertise and therapeutic approach

Integration and Hybrid Approaches

In clinical practice, combining behavioral and cognitive techniques is common to leverage the strengths of both. Cognitive-behavioral therapy (CBT) represents this integration, offering a comprehensive framework that addresses both thought patterns and behaviors. This hybrid model often provides the most flexible and effective treatment for complex psychological issues.

Frequently Asked Questions

What is the main difference between behavioral therapy and cognitive therapy?

Behavioral therapy focuses on changing maladaptive behaviors through conditioning techniques, while cognitive therapy aims to modify dysfunctional thinking patterns that influence emotions and behaviors.

How do behavioral therapy and cognitive therapy approach treatment goals?

Behavioral therapy targets observable behavior changes, often using reinforcement and exposure techniques, whereas cognitive therapy targets changing negative thought patterns to improve emotional well-being.

Can behavioral therapy and cognitive therapy be

combined?

Yes, they are often combined in cognitive-behavioral therapy (CBT), which addresses both thoughts and behaviors for a comprehensive treatment approach.

Which mental health conditions are best treated with behavioral therapy versus cognitive therapy?

Behavioral therapy is effective for phobias, OCD, and habit disorders, while cognitive therapy is often used for depression, anxiety, and cognitive distortions.

How does cognitive therapy help in managing anxiety compared to behavioral therapy?

Cognitive therapy helps by changing anxious thought patterns and beliefs, while behavioral therapy uses exposure and relaxation techniques to reduce anxiety symptoms.

Is one therapy more effective than the other?

Effectiveness depends on the individual and condition; however, cognitive-behavioral therapy (CBT), which integrates both, is generally considered highly effective.

What techniques are commonly used in behavioral therapy?

Techniques include systematic desensitization, exposure therapy, operant conditioning, and reinforcement strategies.

What are common techniques used in cognitive therapy?

Common techniques include cognitive restructuring, identifying cognitive distortions, thought records, and Socratic questioning.

How long do behavioral and cognitive therapy treatments typically last?

Both therapies are often short-term, ranging from 6 to 20 sessions, but the duration can vary based on individual needs and the severity of the condition.

Additional Resources

1. *"Cognitive Therapy and the Emotional Disorders"* by Aaron T. Beck

This foundational book by Aaron Beck, the pioneer of cognitive therapy, explores the development and application of cognitive therapy techniques. It contrasts cognitive approaches with traditional behavioral methods and emphasizes the role of thought

patterns in emotional disorders. The book is essential for understanding the theoretical basis of cognitive therapy and its clinical implications.

2. *"Behavior Therapy: Techniques and Empirical Findings"* by Michel Hersen and Alan M. Gross

This comprehensive text provides an in-depth examination of behavioral therapy methods and their empirical support. It covers fundamental behavioral techniques such as conditioning, exposure, and reinforcement, highlighting how behavior can be modified without directly addressing cognition. The book is valuable for clinicians interested in the practical application of behavioral interventions.

3. *"Cognitive-Behavioral Therapy: Basics and Beyond"* by Judith S. Beck

Judith Beck offers a clear and practical guide to cognitive-behavioral therapy (CBT), integrating both cognitive and behavioral strategies. The book outlines the theoretical foundations of CBT, assessment, case conceptualization, and step-by-step therapeutic techniques. It is widely used by students and practitioners seeking to understand how cognitive and behavioral components work together in treatment.

4. *"Behavioral and Cognitive Psychotherapies: Theory, Research and Practice"* by Paul Salkovskis

This book provides an overview of the theoretical underpinnings and research backing both behavioral and cognitive psychotherapies. It discusses their similarities, differences, and how they complement each other in clinical practice. The text also reviews evidence-based applications for various psychological disorders.

5. *"The Oxford Handbook of Behavioral Therapy"* edited by Stefan G. Hofmann and Michael W. Otto

A comprehensive handbook that covers the spectrum of behavioral therapy approaches, including their integration with cognitive strategies. It features contributions from leading experts who discuss theoretical models, clinical methods, and empirical findings. This resource is ideal for advanced practitioners and researchers interested in the latest developments in behavioral therapy.

6. *"Mind Over Mood: Change How You Feel by Changing the Way You Think"* by Dennis Greenberger and Christine A. Padesky

This highly accessible workbook introduces cognitive therapy principles and techniques to help readers manage mood and anxiety disorders. It includes practical exercises that blend cognitive restructuring with behavioral activation strategies. The book is useful for both therapists and clients seeking a hands-on approach to CBT.

7. *"Learning Cognitive-Behavior Therapy: An Illustrated Guide"* by Jesse H. Wright, Monica Ramirez Basco, and Michael E. Thase

This illustrated guide offers a step-by-step approach to learning CBT techniques, emphasizing the balance between cognitive and behavioral interventions. It includes case examples, worksheets, and strategies to tailor therapy to individual clients. The visual format aids in understanding complex concepts and integrating them into practice.

8. *"Behavior Modification: Principles and Procedures"* by Raymond G. Miltenberger

Miltenberger's book focuses on behavior therapy principles, detailing procedures for assessing and changing behavior systematically. While primarily behavioral, it acknowledges the role of cognition and how cognitive strategies can complement

behavioral techniques. The text is widely used in both clinical and educational settings.

9. *"Cognitive Therapy vs. Behavior Therapy: A Comparative Analysis"* by John H. Harvey
This book provides a direct comparison between cognitive and behavioral therapy approaches, examining their historical development, theoretical bases, and clinical outcomes. Harvey discusses the strengths and limitations of each modality and explores how they can be integrated for more effective treatment. It is a valuable resource for students and clinicians seeking to understand the distinctions and synergies between these two therapeutic frameworks.

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behavioral vs cognitive therapy: *Behavior and Cognitive Therapy Today* European Association for Behavioral and Cognitive Therapies. Congress, 1998-10-18 This book carries the Proceedings of the European Association for Behavioural and Cognitive Therapy conference held in Venice in September 1997 and is dedicated to the memory of Hans Eysenck. The EACBT conference provides a rare opportunity for a wide range of clinicians and researchers from all over Europe and the USSR to come together, resulting in a highly topical and valuable range of scientific presentations. The Proceedings comprises over twenty papers addressing key subjects in terms of behavioural and cognitive therapy including panic, affective disorders, paraphilia, schizophrenia, PTSD, obsession and other psychological disorders. Of particular interest are chapters on the use of cognitive behaviour therapy versus supportive therapy in social phobia (Cottraux), the psychological treatment of paraphilias (De Silva), the theory and treatment of PTSD (Foa), the use of Diagnostic Profiling System in treatment planning (Freeman) and a cognitive theory of obsession (Rachman).

behavioral vs cognitive therapy: *Encyclopedia of Behavior Modification and Cognitive Behavior Therapy* Michel Hersen, 2005-01-25 The three-volume Encyclopedia of Behavior Modification and Cognitive Behavior Therapy provides a thorough examination of the components of behavior modification, behavior therapy, cognitive behavior therapy, and applied behavior analysis for both child and adult populations in a variety of settings. Although the focus is on technical applications, entries also provide the historical context in which behavior therapists have worked, including research issues and strategies. Entries on assessment, ethical concerns, theoretical differences, and the unique contributions of key figures in the movement (including B. F. Skinner, Joseph Wolpe, Aaron T. Beck, and many others) are also included. No other reference source provides such comprehensive treatment of behavior modification—history, biography, theory, and application. Thematic Coverage The first of the thematic volumes covers Adult Clinical Applications. Adults are the most common population encountered by researchers, clinicians, and students, and therefore more than 150 entries were needed to cover all necessary methods. The second volume covers Child Clinical Applications in 140 entries. One especially useful aspect of this volume will be the complications sections, addressing what can go wrong in working with children. This is an area often overlooked in journal articles on the subject. Volume III, Educational Applications, addresses a range of strategies and principles of applied behavior analysis, positive behavior support, and behavior modification and therapy. These entries focus on classroom and school contexts in which

the instructional and behavioral interactions between teachers and their learners are emphasized. Unique, Easy-to-Follow Format Each of the volumes' entries address a full range of mental health conditions and their respective treatments, with the aim of providing systematic and scientific evaluation of clinical interventions in a fashion which will lend itself to the particular style of treatment common to behavior modification. Major entries for specific strategies follow a similar format: 1. Description of the Strategy 2. Research Basis 3. Relevant Target Populations and Exceptions 4. Complications 5. Case Illustration 6. Suggested Readings 7. Key Words Biographical sketches include the following: 1. Birthplace and Date 2. Early Influences 3. Education History 4. Professional Models 5. Major Contributions to the Field 6. Current Work and Views 7. Future Plans Readership This encyclopedia was designed to enhance the resources available to students, scholars, practitioners, and other interested social science readers. The use of in-text citations, jargon, and descriptions of research designs and statistics has been minimized, making this an accessible, comprehensive resource for students and scholars alike. Academic and research librarians in the social sciences, health, and medicine will all find this an invaluable addition to their collections. Key Features Three thematic volumes and over 430 total entries Five anchor articles in each volume provide context on major issues within the field Key words and lists of suggested readings follow each entry Contributions by internationally renowned authors from England, Germany, Canada, Australia, New Zealand, and the United States Volume Editors Volume I: Adult Clinical Applications Michel Hersen & Johan Rosqvist Pacific University Volume II: Child Clinical Applications Alan M. Gross & Ronald S. Drabman University of Mississippi Volume III: Educational Applications George Sugai & Robert Horner University of Oregon Advisory Board Thomas M. Achenbach, Ph.D. Department of Psychiatry, University of Vermont Stewart W. Agras, M.D. Department of Psychiatry & Behavioral Science, Stanford University School of Medicine David H. Barlow, Ph.D., ABPP Center of Anxiety and Related Disorders, Boston University Alan S. Bellack, Ph.D., ABPP Department of Psychiatry, University of Maryland School of Medicine Edward B. Blanchard, Ph.D. Department of Psychology, University of Albany, SUNY James E. Carr, Ph.D. Department of Psychology, Western Michigan University Anthony J. Cuvo, Ph.D. Rehabilitation Institute, Southern Illinois University Gerald C. Davison, Ph.D. Department of Psychology, University of Southern California Eric F. Dubow, Ph.D. Psychology Department, Bowling Green State University Rex L. Forehand, Ph.D. Psychology Department, University of Vermont Arnold A. Lazarus, Ph.D., ABPP Center for Multimodal Psychological Services Robert P. Liberman, M.D. Department of Psychiatry, West Louisiana VA Medical Center Scott O. Lilienfeld, Ph.D. Department of Psychology, Emory University Marsha M. Linehan, Ph.D., ABPP Department of Psychology, University of Washington Nathaniel McConaghy, DSc, M.D. School of Psychiatry, University of N.S.W, Australia Rosemary O. Nelson-Gray, Ph.D. Department of Psychology, University of North Carolina, Greensboro Lars-Göran Öst, Ph.D. Department of Psychology, Stockholms Universitet, Sweden Alan D. Poling, Ph.D. Department of Psychology, Western Michigan University Wendy K. Silverman, Ph.D. Department of Psychology, Florida International University Gail Steketee, Ph.D. School of Social Work, Boston University Douglas W. Woods, Ph.D. Department of Psychology, University of Wisconsin, Milwaukee

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Nikolaos Kazantzis, Mark A. Reinecke, Arthur Freeman, 2009-10-16 Demonstrating the importance of theory for effective clinical practice, this thought-provoking volume brings together leading experts on a range of contemporary cognitive and behavioral approaches. The contributors probe the philosophical and theoretical underpinnings of each model—its assumptions about normal psychological processes, the development and maintenance of psychopathology, and the mechanisms by which therapeutic changes take place. The historical antecedents of the theories are examined and studies that have tested them are reviewed. Vivid case studies show practitioners how theory informs clinical decision making and technique in each of the respective approaches.

behavioral vs cognitive therapy: The Oxford Handbook of Cognitive and Behavioral Therapies

Christine M. Nezu, Arthur M. Nezu, 2016 The Oxford Handbook of Cognitive and Behavioral Therapies provides a contemporary and comprehensive illustration of the wide range of

evidence-based psychotherapy tools available to both clinicians and researchers. Chapters are written by the most prominent names in cognitive and behavioral theory, assessment, and treatment, and they provide valuable insights concerning the theory, development, and future directions of cognitive and behavioral interventions. Unlike other handbooks that provide a collection of intervention chapters but do not successfully tie these interventions together, the editors have designed a volume that not only takes the reader through underlying theory and philosophies inherent to a cognitive and behavioral approach, but also includes chapters regarding case formulation, requisite professional cognitive and behavioral competencies, and integration of multiculturalism into clinical practice. The Oxford Handbook of Cognitive and Behavioral Therapies clarifies terms present in the literature regarding cognitive and behavioral interventions and reveals the rich variety, similarities, and differences among the large number of cognitive and behavioral interventions that can be applied individually or combined to improve the lives of patients.

behavioral vs cognitive therapy: *Comprehensive Handbook of Cognitive Therapy* Hal Arkowitz, L.E. Beutler, Karen M. Simon, 2013-06-29 In reviewing the Contents of this Handbook edited by Freeman, Simon, Beutler, and Arkowitz, I am both impressed and gratified with the enormous strides made by cognitive behavior therapy since the late 1960s. A perusal of the Contents reveals that it is used with adults, children, couples, and families; it is clinically appropriate for such problems as anxiety, depression, sexual dysfunctions, and addictions; and it is employed in conjunction with psychopharmacological and other psychotherapeutic interventions. It was in the mid-1960s when Breger and McGaugh published an article in the Psychological Bulletin, taking behavior therapists to task for using only classical and operant principles in devising their therapeutic interventions. Breger and McGaugh argued that the field of learning was undergoing a major revolution, paying considerably more attention to cognitive processes than had previously been the case. In short, they criticized the growing behavioral orientation for being limited in its exclusively peripheralistic orientation. At the time, behavior therapists were initially somewhat resistant to any allusion to cognitive metaphors. Indeed, my own initial reactions to the Breger and McGaugh article was quite negative. Yet, in rereading their critique, many of their suggestions now seem most appealing. No doubt, I and my behavior colleagues lacked the appropriate cognitive set for incorporating such contradictory information. Nonetheless, the clinical evidence for the relevance of cognitive factors in the behavior change process was simply too compelling to ignore.

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behavioral vs cognitive therapy: *Bergin and Garfield's Handbook of Psychotherapy and*

Behavior Change Michael Barkham, Wolfgang Lutz, Louis G. Castonguay, 2021-10-11 Celebrating the 50th anniversary of a best-selling and renowned reference in psychotherapy research and practice. Now celebrating its 50th anniversary and in its seventh edition, Bergin and Garfield's *Handbook of Psychotherapy and Behavior Change*, maintains its position as the essential reference volume for psychotherapy research. This bestselling reference remains the most important overview of research findings in psychotherapy. It is a rigorous and evidence-based text for academics, researchers, practitioners, and students. In recognition of the 50th anniversary, this edition contains a Foreword by Allen Bergin while the Handbook covers the following main themes: historical and methodological issues, measuring and evidencing change in efficacy and practice-based research, therapeutic ingredients, therapeutic approaches and formats, increasing precision and scale of delivery, and future directions in the field of psychotherapy research. Chapters have either been completely rewritten and updated or comprise new topics by contributors including: Characteristics of effective therapists Mindfulness and acceptance-based therapies Personalized treatment approaches The internet as a medium for treatment delivery Models of therapy and how to scale up treatment delivery to address unmet needs The newest edition of this renowned Handbook offers state-of-the-art updates to the key areas in psychotherapy research and practice today. Over 60 authors, experts in their fields, from over 10 countries have contributed to this anniversary edition, providing in-depth, measured and insightful summaries of the current field.

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behavioral vs cognitive therapy: Behavior Therapy William O'Donohue, Akihiko Masuda, 2022-10-17 This book provides a comprehensive overview of first, second, and third wave behavior therapies, comparing and contrasting their relative strengths and weaknesses. Recent discussion and research has focused intently on third wave behavior therapies, in particular Dialectical Behavior Therapy and Acceptance and Commitment Therapy (ACT). This is in contrast with first wave behavior therapies (what today might be called applied behavior analysis or clinical behavior

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psychologists and psychiatrists, nurse practitioners, family law experts, social workers and relationship coaches. In addition, it can serve as a textbook for students in marriage and family therapy.

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behavioral vs cognitive therapy: The Oxford Handbook of Hoarding and Acquiring Randy O. Frost, Gail Steketee, 2014 Hoarding involves the acquisition of and inability to discard large numbers of possessions that clutter the living area of the person collecting them. It becomes a disorder when the behavior causes significant distress or interferes with functioning. Hoarding can interfere with activities of daily living (such as being able to sit in chairs or sleep in a bed), work efficiency, family relationships, as well as health and safety. Hoarding behavior can range from mild to life-threatening. Epidemiological findings suggest that hoarding occurs in 2-6% of the adult population, making it two to three times more common than obsessive-compulsive disorder. The fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) now includes Hoarding Disorder as a distinct disorder within the OCD and Related Anxiety Disorders section, creating a demand for information about it. The Oxford Handbook of Hoarding and Acquiring is the first volume to detail the empirical research on hoarding. Including contributions from all of the leading researchers in the field, this comprehensive volume is divided into four sections in addition to introductory and concluding chapters by the editors: Phenomenology, Epidemiology, and Diagnosis; Etiology; Assessment and Intervention; and Hoarding in Special Populations. The summaries of research and clinical interventions contained here clarify the emotional and behavioral features, diagnostic challenges, and nature of the treatment interventions for this new disorder. This handbook will be a critical resource for both practitioners and researchers, including psychiatrists, psychologists, neurologists, epidemiologists, social workers, occupational therapists, and other health and mental health professionals who encounter clients with hoarding problems in their practice and research.

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behavioral vs cognitive therapy: International Handbook of Behavior Modification and Therapy Alan S. Bellack, Michel Hersen, Alan E. Kazdin, 2012-12-06 The rapid growth of behavior therapy over the past 20 years has been well documented. Yet the geometric expansion of the field has been so great that it deserves to be recounted. We all received our graduate training in the mid to late 1960s. Courses in behavior therapy were then a rarity. Behavioral training was based more on informal tutorials than on systematic programs of study. The behavioral literature was so circumscribed that it could be easily mastered in a few months of study. A mere half-dozen books (by Wolpe, Lazarus, Eysenck, Ullmann, and Krasner) more-or-less comprised the behavioral library in the mid- 1960s. Seminal works by Ayllon and Azrin, Bandura, Franks, and Kanfer in 1968 and 1969 made it only slightly more difficult to survey the field. Keeping abreast of new developments was not very difficult, as Behaviour Research and Therapy and the Journal of Applied Behavior Analysis were the only regular outlets for behavioral articles until the end of the decade, when Behavior Therapy and Behavior Therapy and Experimental Psychiatry first appeared. We are too young to be maudlin, but Oh for the good old days! One of us did a quick survey of his bookshelves and stopped counting books with behavior or behavioral in the titles when he reached 100. There were at least half again as many behavioral books without those words in the title.

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