

The contribution of Cognitive-Behavioral Therapy in the management of Anxiety Disorder Generalized in Adults

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Summary

This article aims to investigate the contribution of Cognitive Behavioral Therapy (CBT) in the management of Generalized Anxiety Disorder (GAD) in adults. The main characteristics of GAD are excessive anxiety and worry that generate clinically significant distress or impairment in social, occupational, and other important areas of an individual's life.

Currently, one of the most recommended approaches for managing GAD in adults is CBT. Given this context, this work aims to answer the following guiding question: How can CBT contribute to the management of adults with GAD? According to bibliographic research conducted with renowned authors in psychology and psychiatry, CBT can contribute to the management of GAD by modifying dysfunctional thoughts, feelings, and behaviors through evidence-based adaptive strategies. This approach contributes by using interventions and techniques adapted to the clinical context, such as psychoeducation, cognitive restructuring, behavioral activation, Socratic questioning, among others. Furthermore, acceptance-based behavioral therapy, associated with techniques such as self-reporting and *mindfulness*, contributes to the management of GAD. In short, through CBT interventions and techniques, with a strong therapeutic bond and collaborative empiricism, research has shown that clients with GAD significantly reduced symptoms of worry and anxiety, and improved social relationships and quality of life.

Keywords: Generalized Anxiety Disorder; Cognitive Behavioral Therapy; Management of GAD in Adults; CBT Interventions and Techniques.

Abstract

This article aims to investigate the contribution of Cognitive-Behavioral Therapy (CBT) in the management of Generalized Anxiety Disorder (GAD) in adults. The main characteristics of GAD are excessive anxiety and worry that causes clinically significant distress or impairment in social, professional, among other important areas of an individual's life. Currently, one of the most recommended approaches for managing GAD in adults is CBT. Given this context, this study aims to address the following guiding question: How can CBT contribute to the management of adults with GAD? According to the bibliographic research conducted with renowned authors in psychology and psychiatry, CBT can contribute to the management of GAD by modifying dysfunctional thoughts, feelings, and behaviors through evidence-based adaptive strategies. This approach is beneficial by using interventions and techniques adapted to the clinical context, such as psychoeducation, cognitive restructuring, behavioral activation, Socratic questioning, among others. Furthermore, acceptance-



based behavioral therapy, combined with techniques such as self-reporting and mindfulness, contributes to the management of GAD. In summary, through CBT interventions and techniques, with a strong therapeutic bond and collaborative empiricism, research has shown that clients with GAD significantly reduced symptoms of worry and anxiety. They also improved social relationships and quality of life.

Keywords: Generalized Anxiety Disorder; Cognitive-Behavioral Therapy; Management of GAD in Adults; CBT Interventions and Techniques.

1. Introduction

Anxiety disorders are one of the most common mental disorders, with estimates...

lifetime prevalence ranging from 2-12% across all diagnostic categories (BOGUCKI et al., 2021). Individuals with high levels of anxiety experience deficits in multiple domains, including short- or long-term impacts on quality of life (ALONSO et al., 2018). Data from

The Pan American Health Organization – PAHO (2018) indicated that the prevalence of disorders of Anxiety rates are around 3.6% globally. In the Americas, this number increases...

larger proportions, reaching 5.6% of the population, with Brazil being a notable example, a country where...

Anxiety disorder is present in 9.3% of the population, making this the country with the highest number of cases.

Cases of anxiety worldwide (PAHO, 2018; PEREIRA; BEZERRA, 2023).

Currently, about 3 to 6% of the world's population suffers from GAD, this chronic disorder. and serious. Faced with this glaring reality, this article aims to investigate the contribution of CBT in Management of generalized anxiety disorder (GAD) in adults.

According to Hofmann (2022), GAD is a type of anxiety disorder that includes a A combination of symptoms that constitute one of the most common forms of problematic anxiety. Although the diagnostic criteria are more detailed than that, there are two main characteristics. No TAG: excessive worry that seems uncontrollable and high physical tension.

Generalized Anxiety Disorder (GAD) is one of the most frequently found mental disorders in the adult population. In most cases, GAD begins in young adulthood and peaks in middle age. According to the *DSM-5-TR*, the prevalence of GAD is slightly higher in women than in men. Another aspect What is relevant is that GAD is associated with a higher incidence of other comorbid disorders. That being said, most adults with GAD experience significant and disabling suffering, with increased use of medical resources and risks of other physical and mental illnesses (APA, 2023).

In his work *Overcoming Anxiety and Phobia: A Practical Guide*, Edmund Bourne (2024) reaffirms that about 4% of adults experience GAD; a total of 9% experience this throughout their lives. their lives. People of European descent are more likely to develop GAD.

Currently, CBT is considered the "gold standard" of psychotherapy in the management of adults. with TAG. CBT was developed in the 1960s and 1970s by Aaron Beck and others.

Year V, v.2 2025 | Submission: October 27, 2025 | Accepted: October 29, 2025 | Publication: October 31, 2025 collaborators. Today it is expanding throughout the world as an evidence-based psychotherapy, with extensive publication and scientific evidence. According to Judith Beck (2022), CBT is based on The theory that people's thoughts influence their emotions and behaviors. Therefore, in In CBT management, the therapist will help the adult to evaluate, identify, and change their thoughts. dysfunctions that the client brings. With this, the intention is to provoke lasting changes in mood and in behavior.

Given this context, this work aims to answer the following question.

Guiding question: How can CBT contribute to the management of adults with GAD? We will see, in... to develop the work, which uses interventions and techniques from CBT such as psychoeducation, the cognitive restructuring, gradual exposure, Socratic questioning, behavioral activation,

Through relaxation techniques, among others, clients with GAD (Generalized Anxiety Disorder) experienced a significant reduction in symptoms. worries and anxiety decreased. Social relationships and quality of life also improved.

It is important to point out that this article uses a qualitative research method, with

The focus is on bibliographic research (LAKATOS; MARCONI, 2023). The purpose is to analyze what was

Published and seeking to improve knowledge of the contribution of CBT in the management of GAD in adults.

Initially, the documents were collected from works by renowned authors in the field of

psychology and psychiatry. The instruments used in this bibliographic research are: books, scientific articles,

Theses, journals, and other types of written sources published in print or electronic format.

on the pages of reliable and scientific websites (Scielo, Capes, Pepsic, Pubmed). After reading,

Classification and categorization, the content analysis process was carried out, the treatment of

Results and interpretation. Supported by the results, in the formulation of hypotheses, based on the

The evidence was used to prepare the formal material for this article.

Next, we will see that the present bibliographic research, of a qualitative nature, is...

Structured in three chapters, with the following content: in the first chapter we will address the topic of Generalized Anxiety Disorder (GAD); In the second chapter we will discuss the principles basics of Cognitive Behavioral Therapy (CBT); And in the third and final chapter, we will discuss the...

Interventions and Techniques of CBT in the Management of GAD in Adults.

2. Generalized Anxiety Disorder (GAD)

Anxiety is an intrinsic part of our psychological makeup. According to Hofmann (2022)

It is an emotion that alerts us to a possible danger or threat. It functions as an alarm system in our body and is essential for our survival. It is important to distinguish when the

Anxiety is both helpful and harmful. According to Clark and Beck (2025), when



Anxiety is bearable; it motivates human beings to deal with life's problems and prepares us for...

the future. However, the challenge arises when anxiety and worry cause discomfort in the individual.

It is not always bearable and can disrupt important aspects of life.

In this sense, anxiety disorders share characteristics of fear and anxiety.

Excessive and related behavioral disturbances. *Fear* is the emotional response to threat.

Imminent threat is real or perceived, while anxiety is the anticipation of a future threat (APA, 2023).

Generalized anxiety disorder (GAD) is considered a serious anxiety disorder. An individual with GAD has...

Uncomfortable mood, negative apprehension about the future, unpleasant inner restlessness.

It also includes somatic and physiological manifestations such as tachycardia and muscle tension. And, therefore...

Finally, psychological manifestations such as unpleasant apprehension and negative expectations about the future.

(DALGALARRONDO, 2019; CLARK; BECK, 2012).

According to the American Psychiatric Association, in the Diagnostic and Statistical Manual of Mental Disorders (DSM)...

According to the Diagnostic and Statistical Manual of Mental Disorders, the DSM-5-TR, the main diagnostic criteria for GAD (Generalized Anxiety Disorder) are...

Excessive anxiety and worry (apprehensive expectation), occurring on most days for

at least six months, with various events or activities (such as school performance or $% \left\{ 1\right\} =\left\{ 1$

professional) (APA, 2023).

The first symptom of GAD (Generalized Anxiety Disorder) is worry. (From the book " Dealing with Anxiety")

CBT and Mindfulness Strategies to Overcome Fear and Worry, Stefan Hofmann (2022)

It describes worry as a dysfunctional thought response to a potential problem.

For individuals with GAD, worry is very difficult to control, so after the mind

She starts to worry, she doesn't stop (APA, 2023). In this sense, worry is seen as a

a chain that imprisons thoughts in a negative and threatening way, in an attempt to reduce a

heightened sense of uncertainty and concern about a possible threat (CLARK; BECK, 2025).

Another important criterion that the DSM-5-TR presents is that anxiety and worry are...

associated with three (or more) of the following symptoms (with at least some of them present in the

(most days in the last six months): restlessness or feeling on edge

Skin; fatigue, difficulty concentrating or a feeling of "blanking out" in the mind; irritability;

 $\hbox{Muscle tension and sleep disturbance (difficulty falling as leep or staying as leep, or sleep}$

unsatisfactory and restless (APA, 2023).

The second main symptom of GAD is high physical tension. It typically manifests itself...

Symptoms include muscle tension and intense headaches, but tension can also cause disorders.

Gastrointestinal symptoms, nausea, fatigue, muscle aches, or agitation. When the body becomes tense, also

It becomes difficult to sleep and concentrate. Many of these symptoms are the result of accumulated tension.

Chronic stress and worry (HOFMANN, 2022).



Another very important criterion of the APA (2023) is that anxiety, worry or physical symptoms cause clinically significant distress or impairment in functioning social, professional, or other important areas of an individual's life. In this sense, many people They stop working and participating in various social activities. It is also important to point out that the Generalized Anxiety Disorder (GAD) is associated with high levels of comorbidity with other psychological disorders. More than 90% of individuals who meet the criteria for GAD during their lives are at risk of developing other disorders. mental disorders, especially major depression (ROEMER; EUTIS; ORSILLO, 2023).

But what are the roots of GAD? The *DSM-5-TR* cites three risk factors associated with GAD: temperamental behavioral inhibition, negative affectivity (neuroticism), avoidance of Suffering, reward dependence, and attentional bias towards threats; *Environmental -* Adversities In childhood and in parenting practices (overprotection and excessive control); *Genetic and physiological* factors Genetic factors overlap in the risks of negative affectivity (neuroticism) and are shared. with other anxiety and mood disorders, particularly major depressive disorder (APA, 2023).

According to Hofmann (2022), the root of GAD is the sum of vulnerability plus stress. Vulnerability refers to the biological, developmental, and personality factors that make one vulnerable. someone more susceptible to developing high levels of anxiety. Stress, on the other hand, refers to any disruption to the *status quo*. In this sense, Clark and Beck (2012) emphasize that GAD is multifaceted, involving different elements in the physiological, cognitive, behavioral, and affective spheres of Human functioning.

To better illustrate GAD, in the work *Overcoming Anxiety and Worry*, Clark and Beck (2025) presents a case study of a young man named Jamal, a university student.

Jamal, a 24-year-old unemployed man who had been suffering from Generalized Anxiety Disorder, dreamed of...

He wanted to attend law school, but because he hadn't done well on the Law School Admissions Test.

(LSAT), the aptitude test. Jamal, who lived with his parents, was under immense pressure. Jamal

He felt tense, worried, nervous, exhausted, had insomnia, an upset stomach, and difficulty...

Concentration, restless and agitated while studying. His mind was filled with anxious thoughts and

Negative thoughts, such as "I'll never do well on the LSAT" or "I'll be a pathetic failure that people..."

They look down on it." The dysfunctional thinking of failure, anxiety, and worry took over.

all aspects of your daily life.

As we saw in Jamal's case, GAD leads to excessive worry or overthinking. repeatedly discussing worst-case scenarios involving possible future events. Therefore, all Cognitive-behavioral treatments for GAD emphasize interrupting this cycle of concern, although the methods for doing so vary (ROEMER; EUTIS; ORSILLO, 2023). Still

Year V, v.2 2025 | Submission: October 27, 2025 | Accepted: October 29, 2025 | Publication: October 31, 2025 Generalized anxiety disorder (GAD) can be compared to the stress of final exam week, but applied to all situations. of life. Therefore, the excessive and uncontrollable worry of GAD leads to symptoms such as difficulty difficulty concentrating and sleeping, muscle tension and restlessness (GILLIHAN, 2021).

In this brief case study, we can see that Jamal's concern involved several... distortions in thinking, such as jumping to conclusions, tunnel vision, catastrophizing and Emotional reasoning. Understanding cognitive distortions is an important component of CBT for... anxiety (CLARK; BECK, 2025).

It is important to point out, as in Jamal's case, that individuals with GAD report an increase in sensitivity to anxiety, negative reactivity to their emotional responses, and concern about their one's own concern. Thus, instead of considering anxiety as a response that is evoked in a In a given context, individuals may come to define themselves as anxious, merging their identity. with these experiences (ROEMER; EUTIS; ORSILLO, 2023).

In this chapter we saw a brief overview of TAG. Next, we will see a brief... Introduction to the basic principles of CBT.

3. The basic principles of Cognitive-Behavioral Therapy

In this second chapter, we will initially examine some historical aspects of CBT, which has as the "father," Dr. Aaron T. Beck (1921-2021). Next, the basic principles of CBT.

Originally, Dr. Beck was a psychoanalyst. In the early 1960s, Beck tested the psychoanalytic concept of depression. He eventually discovered that the dreams of depressed clients They contained fewer themes of hostility and many more themes related to failure. In this process Through his investigative approach, Dr. Beck began helping his clients identify and evaluate their thoughts. Dysfunctional systems, when restructured, improved rapidly. So, he began teaching his...

Psychiatry residents at the University of Pennsylvania began using this treatment. In 1977, Beck and Its residents published their clinical trial, proving that cognitive therapy was so effective.

as for imipramine, a common antidepressant in depressed patients (BECK, 2022).

Cognitive Behavioral Therapy (CBT) was developed by Aaron T. Beck at the University of Pennsylvania as a therapy. brief, structured, and present-oriented. In addition to modifying behaviors and thoughts.

dysfunctional, it is geared towards problem solving (KNAPP; BECK, 2008).

Aaron T. Beck, in the presentation of the work *Cognitive-Behavioral Therapy: theory and*Judith S. Beck's *practical work* provides a brief history of cognitive therapy. Aaron Beck mentions that
When he began developing cognitive therapy in the 1960s and 1970s, he focused on
conceptualization and treatment of individuals in their problems, negative cognitions, and strategies.

Year V, v.2 2025 | Submission: October 27, 2025 | Accepted: October 29, 2025 | Publication: October 31, 2025 dysfunctional coping mechanisms. Already in the 1980s, he sought to achieve a "system of psychotherapy". Now in the third millennium, the focus on conceptualization and treatment takes into account the Individuals' aspirations, values, goals, strengths, and resources (BECK, 2022).

In the introduction to the work *Techniques of Cognitive Therapy: A Therapist's Manual,* Robert L. Leahy (2019) states that although he acknowledges the significant contribution of the cognitive model of Beck, among other models, contributed to a wide range of formulations, strategies, and techniques. available to the CBT therapist. Among the interventions and techniques of CBT, it has been developing the Metacognitive model (Wells), Behavioral Activation (Martell, Dimidjian and Herman-Dunn), Acceptance and Commitment Therapy (Hayes, Strosahl, and Wilson), Behavioral Therapy Dialectics (Linehan), Compassion-Focused Therapy (Gilbert), *Mindfulness* (Teasdale *et al.*), Emotional Schemas (Leahy) and other approaches (LEAHY, 2019).

The article titled "Efficacy of Cognitive-Behavioral Therapy in Disorder of..."

Generalized Anxiety, Silva, et al. (2025) highlights a significant number of publications on

This article topic was reviewed in scientific journals. Eight studies were found in BVS and 187 in CINAHL.

and 185 in PubMed, totaling 380 articles retrieved from the consulted sources across the platforms. In this

In this regard, Judith Beck (2022) wrote that more than two thousand publications on CBT have been produced.

proving that CBT is an evidence-based and effective approach in managing various disorders.

CBT is recommended by many psychiatric and mental health organizations worldwide. The world. CBT teaches people to reduce their anxiety by changing their thoughts and emotions. and behaviors (CLARK; BECK, 2025).

We've seen a brief history of CBT. Next, we'll look at the principles of treatment with CBT.

CBT. Although CBT should be tailored to each individual, there are certain principles that...

These principles apply to most clients. Judith Beck (2022) summarizes them in 14 treatment principles.

The first principle of CBT is that treatment plans in CBT are based on a continuously developing *cognitive conceptualization*. Judith Beck bases the conceptualization of customers based on the data they provide in the evaluation, informed by the formulation cognitive (key cognitions, behavioral strategies, and maintenance factors that characterize the disorder). Also in the conceptualization it is important to recognize the skills, resources, Strengths of customers, therefore, can lead to better functioning in mood and in resilience (BECK, 2022).

The second principle of CBT is a strong *therapeutic alliance*. CBT emphasizes the relationship Therapeutic approaches should consider acceptance, empathy, and authenticity, along with basic trust and *rapport* (BECK, 2022). It is essential to balance cognitive therapy techniques with



Empathy, validation, and motivational interviewing—therapy management styles that help the patient. to view cognitive interventions as emotionally relevant (LEAHY, 2019).

The third principle is that CBT continuously *monitors* the client's progress.

Monitoring the client's routine improves results and helps achieve goals. With

Customer feedback evolves, generating a feeling of well-being. Monitoring of

Humor, and the degree to which they interact with family and friends, are important in the management process.

TCC (BECK, 2022).

The fourth principle of CBT is that it is culturally adapted and adapts treatment .

to the *individual*. The CBT therapist welcomes the client and seeks to understand their needs, suffering, culture, religion, gathers general information to make an accurate diagnosis and create a Initial cognitive conceptualization and a treatment plan. Initially, it's important to establish an alliance. therapeutic work with the client and establishing an easy and client-specific action plan within their reality (BECK, 2022).

The fifth principle of CBT consists of emphasizing the positive. Within this principle, the following stands out.

Recovery-Oriented Cognitive Therapy (RCT). This approach focuses on

strategies that help people take advantage of their interests, abilities, aspirations,

Problem-solving skills, effective communication, and resilience to stress (CLARK; BECK, 2025). Research demonstrates the importance of emphasizing the positive emotions and cognitions of GAD. It is It is important to inspire confidence (BECK, 2022).

The sixth principle of CBT emphasizes *collaboration* and *active participation*. Both therapists The more active the clients are, the more CBT seeks to view therapy as a team effort, which together... decides what to work on in each session, and how often to meet (BECK, 2022).

The cognitive-behavioral approach is action-oriented, focused on current problems, and involves self-help and engages the patient in a collaborative relationship with the patient (LEAHY, 2019).

The seventh principle of CBT is aspirational, value -based, and goal-oriented.

In the initial session with the client, you should ask about their values (what is really important to them).

for him), his aspirations (how he wants to be) and his specific goals for treatment (what

he wishes to obtain as a result of the therapy) (BECK, 2022). CT-R highlights the importance of

Thoughts, emotions, and actions work together to achieve goals, values, and aspirations.

from the client's perspective. Therefore, when the client manages their anxiety and eventually transforms it into a...

a sense of accomplishment, it is operating in adaptive mode (CLARK; BECK, 2025).

The eighth principle of CBT is that it initially emphasizes the present. Treating the majority

For clients, it involves a strong focus on the skills they need to improve their mood.

When customers approach distressing situations more realistically, focusing on the present,

of the process (LEAHY, 2019).

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It solves problems and works towards goals. In other words, the way people improve is... making small changes in your behavior and thinking every day (BECK, 2022).

The ninth principle is that CBT is *educational*. An important goal of treatment is to make

The therapy process is understandable. It is important in the first session to explain the nature and course of the treatment. its treatment, the CBT process, the structure of the sessions, the cognitive model (BECK, 2022).

According to Leahy, the therapist teaches the client that they will focus on what the patient is doing.

Thinking consciously and acting now, how can he approach things in that way?

Different behaviors and how household chores will allow for generalization of gains.

obtained during the session. In addition, the therapist recommends books to help guide the patient throughout.

The tenth principle is that CBT is mindful of the treatment *time*. CBT is Considered a short-term therapy. Many clients with depression and anxiety disorders.

They require between 6 and 16 sessions. But treatment for some conditions needs to be much longer. (BECK, 2022). It is important to emphasize that "CBT is a solution-focused form of psychotherapy, designed to reduce symptoms and improve well-being as quickly as possible" (GILLIHAN, 2021, p. 1).

The eleventh principle is that CBT sessions are structured.

The objectives in the first part of the session are to re-establish the therapeutic alliance, review the action plan, and... collect data so that the client can collaboratively define and prioritize the agenda. In the second part, Discuss the agenda's objectives and define action plans. In the final part, they jointly summarize the... session, ensure the action plan is in accordance with the client (BECK, 2022). The management of TAG It is related to its structure, which is based on the modification of thought patterns. dysfunctional and in reducing avoidance behaviors that contribute to maintaining the anxiety (SILVA et al, 2023).

The twelfth principle is that CBT uses *guided discovery* and teaches people to respond. to their dysfunctional cognitions. The therapist asks open-ended questions about a particular The patient's problem, thus helping to identify dysfunctional thoughts and evaluate them. and restructure them. One of the techniques that helps in this discovery is Socratic questioning. Through questioning, the client finds meaning and adaptive answers through dialogue. Socratic, but also with dramatizations, behavioral experiments (BECK, 2022). The Initial CBT treatment focuses on increasing the patient's awareness of their Automatic thoughts, and further work will focus on core and underlying beliefs. (KNAPP; BECK, 2008).



The thirteenth principle of CBT includes Action Plans . Action plans seek to...

Identify and evaluate automatic thoughts that will hinder clients' goals.

They also seek solutions to problems, practicing behavioral skills learned in session. The golden rule is: everything we want the customer to record is recorded (BECK, (2022). The suggestion is that action plans should be objective, concrete, and simple.

The fourteenth principle of CBT consists of a variety of *techniques* for changing the Thought, humor, and behavior. Depending on a client's conceptualization, they may use...

Acceptance and commitment techniques, behavioral therapy, compassion-focused psychotherapy, in CBT employs various techniques, including person-centered, psychodynamic, and schema theory (BECK, 2022). which are used to modify automatic thoughts: such as psychoeducation, restructuring

Cognitive techniques, Socratic questioning, exposure, relaxation, among others.

We've seen a basic introduction to what CBT is and its principles. Next, we will see...

Key interventions and techniques of CBT in the management of GAD.

4. CBT interventions and techniques in the management of GAD in adults

In the article titled *Contributions of Cognitive-Behavioral Therapy in Disorder of Generalized Anxiety in Adults: An Integrative Literature Review,* Freitas, Silva and Pucci (2024), They reveal that the analysis of the RCT results showed psychoeducation, cognitive restructuring, Exposure and relaxation as the most commonly used interventions in standard CBT treatment of TAG.

Robert Leahy (2019) mentions that some people respond well to restructuring. cognitive, others behavioral activation, others metacognitive techniques, and others acceptance.

Next, we will see the main interventions and management techniques of CBT in GAD: 4.1

Cognitive Conceptualization; 4.2 Therapeutic Relationship; 4.3 Initial Assessment; 4.4 Psychoeducation; 4.5.

Cognitive Restructuring; 4.6 Problem Solving; 4.7 Behavioral Activation; 4.8.

Socratic Questioning; 4.9 Acceptance-Based Behavioral Therapy; 4.10 Techniques of Relaxation: physical and mental; 4.11 Lifestyle Changes.

4.1 Cognitive Conceptualization

Cognitive conceptualization is the foundation of CBT in the management of GAD. Based on this... In the work *Cognitive-Behavioral Therapy: Theory and Practice*, by Judith Beck (2022), we can see that the therapist begins to construct the conceptualization during their first contact with the client and

Year V, v.2 2025 | Submission: October 27, 2025 | Accepted: October 29, 2025 | Publication: October 31, 2025 | It improves with each subsequent contact. It is important to understand the cognitive formulation for the(s) client diagnosis(es), typical cognitions, behavioral strategies, and factors of maintenance. The therapist continuously collects data, summarizes what they have heard, and checks their hypotheses with... The client is informed and their conceptualization is modified when necessary.

In the case of GAD, which is a chronic and multifaceted anxiety disorder, involving elements in the physiological, cognitive, behavioral, and affective spheres of human functioning (CLARK; BECK, 2012), requires a conceptualization that provides a treatment framework.

She helps him understand the clients, their strengths and weaknesses, their aspirations and challenges; to recognize how clients develop a psychological disorder with dysfunctional thinking and maladaptive behavior; strengthening the therapeutic relationship; planning treatment within and between the sessions; choosing appropriate interventions and adapting treatment when necessary; and overcoming blocking points (BECK, 2022).

It is important to point out that a successful attempt at cognitive therapy would transform the concern about a coping strategy for pathological avoidance in a constructive process.

Problem-oriented, more controlled, in which the anxious person tolerates and accepts more risk and uncertainty. (CLARK; BECK, 2012).

Following this line of reasoning, Judith Beck (2022) states that emotions, behaviors and People's physiology is influenced by their perception of events. In this process of In cognitive conceptualization, customers' automatic thoughts are evaluated and validated.

Some of the thought distortions include all-or-nothing thinking and catastrophizing.

Among other things, these are modified by the clients, and as a result, mood improves, anxiety decreases, and... concern and more functional behavior.

Following this line of reasoning, Leahy (2019) emphasizes that cognitive therapists frequently... will place greater emphasis on levels of cognition - automatic thoughts, underlying assumptions and schemas about the *self* and others - and the relationship of these schemas and coping strategies with childhood experiences, significant life events, and the outcome of these strategies.

In this sense, Judith Beck (2022) emphasizes that people develop from childhood. certain ideas about themselves, about people, and about the world. Their core beliefs or core (schemas) are enduring understandings, which individuals consider these ideas as absolute truths. Well-adjusted individuals possess positive beliefs (efficiency, kindness, (value) and individuals with maladaptive beliefs develop negative beliefs (helplessness, lovelessness) and devaluation). Therefore, in cognitive therapy for GAD, cognitive conceptualization and restructuring Cognitive tools are used to modify individuals' tendencies to interpret threats.

Year V, v.2 2025 | Submission: October 27, 2025 | Accepted: October 29, 2025 | Publication: October 31, 2025 automatic exaggerations of negative future events during their anxiety episodes and concern (CLARK; BECK, 2012).

Leahy (2019) says that the conceptualization of the case develops during the course of therapy, to As the therapist learns more about the problematic metacognitive strategies of patient (e.g., worry and rumination) and their behavioral avoidance tendencies, inertia, dysfunctional decision-making patterns. Therefore, the goal of therapy should not be It's not simply about feeling better, but about empowering the client to face the problems.

In the case of CBT's contribution to the management of GAD, cognitive conceptualization aims to... to understand the cognitive and behavioral patterns that underlie excessive worry and To develop an individualized intervention plan. In short, to conceptualize clients in terms of... Cognitive abilities are crucial in determining an effective and efficient course of treatment (BECK, 2022).

4.2 Therapeutic Relationship

In chapter 4, entitled "Therapeutic Relationship", Judith Beck (2022) emphasizes that during the

In a therapy session, it's essential to begin building trust and rapport with your clients from the very beginning.

first contact with them. Research shows that positive alliances are correlated with

Positive results in treatment. The therapeutic relationship aims to ensure that clients...

They feel safe, respected, understood, and cared for. A solid therapeutic alliance, through

A welcoming environment, characterized by empathy and trust, helps the client achieve their goal and alleviates their suffering.

It improves their functioning and mood. Furthermore, the therapeutic alliance is strengthened when clients

They notice an improvement from one session to the next.

The best source of a therapeutic relationship is listening to clients with attention, empathy, and... authenticity. According to Leahy, "therapy is not an abstract and theoretical endeavor. It is experienced." in real time, with real people, dealing with real problems" (LEAHY, 2019, p. 12).

In managing CBT in GAD, it is essential to demonstrate commitment and support to the client. Understanding through empathetic statements, word choice, tone of voice, facial expressions. and body language. Clients who are distressed may have strong negative core beliefs. about themselves, which they bring to the therapy session. If they have strong negative beliefs about Other people may assume that you will treat him badly in some way. Therefore, it is important to help. customers to feel safe (BECK, 2022).



Year V, v.2 2025 | Submission: October 27, 2025 | Accepted: October 29, 2025 | Publication: October 31, 2025 4.3 Initial Assessment

TCC assesses clients in depth so that it can formulate the case in a way that...

accurate and plan the management. The initial assessment "takes into account customer demand, their
current functioning, symptoms, life history, values, which contribute to developing a
initial conceptualization and formulating a general plan for therapy" (BECK, 2022, p. 71).

Initial assessment is essential for a good psychodiagnosis. Jurema Alcides Cunha (2007)

It mentions that psychodiagnosis is a psychological assessment, carried out for clinical purposes.

Therefore, it is something scientific. It is a process that aims to identify strengths and weaknesses in the functioning. psychological. Judith states that in psychodiagnosis, "effective treatment planning requires a A robust diagnosis, a solid case formulation, and consideration of the client's characteristics and their aspirations, values, sense of purpose and goals" (BECK, 2022, p. 157).

The initial assessment is the first structured contact between the patient and the therapist. In management

In the TAG (Technical Advisory Group), the initial assessment consists of understanding the client in multiple aspects. The first

The next step is to collect the medical history, assess mental state and mood, and consider certain situations.

current circumstances, interpersonal relationships, sociocultural context, personal strengths, life history, genetics

and biomedical factors. Therefore, the psychopathological diagnosis rests on the totality of the data.

Momentary clinical findings (mental state examination) and evolutionary findings (anamnesis, history of symptoms, and

evolution of the disorder). It is this clinical totality that, when detected, evaluated, and interpreted with

Knowledge (theoretical and scientific) and skill (clinical and intuitive) lead to diagnosis.

more accurate and useful psychopathological assessment (DALGALARRONDO, 2019).

In this initial assessment, certain aspects of the structure of the first session are essential. First,

To establish *rapport*, that is, to create an environment of trust, and to reinforce that CBT in the management of

Generalized anxiety disorder (GAD) can improve the anxiety profile. The second aspect involves exploring the complaints and the...

Client expectations regarding therapy. The third aspect includes psychoeducation. The fourth

One aspect is to record and monitor dysfunctional thoughts. The fifth aspect involves the therapist and the client.

They define goals by prioritizing the main complaint and assigning tasks, such as thought journaling.

dysfunctional. The sixth aspect is the application of tests and inventories related to GAD, such as the

humor, anxiety, and worry.

In this sense, continuous self-monitoring of daily anxiety symptoms, as well as

Image-guided recall can provide an assessment of symptoms and aid in the process of
cognitive restructuring (ROEMER; EUTIS; ORSILLO, 2023). They can also be used by

Cognitive Behavioral Therapy (CBT) in diagnostic and symptom reduction assessments uses various instruments: Scales of
Depression, Anxiety and Stress (Lovidond; Lovibind, 1995); Daily Record of Emotions (Leahy,

Year V, v.2 2025 | Submission: October 27, 2025 | Accepted: October 29, 2025 | Publication: October 31, 2025 2021), the Beck Anxiety Inventory (Beck, 1990), the Emotional Schema Scale (Leahy, 2021), Hamilton Anxiety Scale, the Structured Clinical Interview for DSM, the Questionnaire

Penn State Worry-Worrying Questionnaire (PSWQ), the 7-item Anxiety Disorder Scale

Generalized (GAD-7) (FREITAS; SILVA; PUCCI, 2024).

In the initial session with a client, the detailed assessment aims to collect data so that it can...

To accurately conceptualize and diagnose your client and the treatment plan. At each session,

The therapist seeks to evaluate the session to ensure the diagnosis is correct. Furthermore, they aim to refine the...

Conceptualization with the client and monitoring progress (BECK, 2022).

4.4 Psychoeducation

According to Clark and Beck (2012), psychoeducation is the first step in management. It It includes the presentation of the cognitive model of GAD, the rationale for treatment, and teaching. Regarding the recognition of symptoms and the application of techniques for reducing chronic worry.

In this sense, the therapist educates the client to understand what GAD (Generalized Anxiety Disorder) consists of and Its main characteristics. You could mention that GAD is characterized by the presence of symptoms.

Excessive anxiety, most days, for several months. The person lives in a state of distress and tension.

worried, nervous, and irritated. In this sense, the therapist teaches that what the person feels,

Think and act, it's part of the TAG (Generalized Anxiety Disorder). It also teaches the principles of CBT (Cognitive Behavioral Therapy) such as restructuring. cognitive, the therapeutic relationship, the action plans established in each session to reduce the symptoms.

It is important to emphasize in psychoeducation that CBT therapy begins with the patients. Monitoring situations that raise concerns. This monitoring of internal experiences. and behaviors, help the client to understand thoughts, emotions and behaviors. separately. Just like other CBTs, psychoeducation is an important component of Acceptance-Based Behavior Therapy (ACT) in the treatment of GAD. Psychoeducation. It begins with a discussion about the nature of fear, anxiety, and worry, then... exploring the function of emotions more broadly, emphasizing the habitual nature of our emotional response and how repetition reinforces these habits, whereas interruption can

In psychoeducation, the client is taught about the therapeutic process of CBT for GAD in structured, collaborative approach, emphasizing cognitive restructuring and current techniques of Relaxation and acceptance.

weaken it (ROEMER; EUSTIS; ORSILLO, 2023; CLARK; BECK, 2012).



4.5 Cognitive Restructuring

Robert Leahy (2021) emphasizes that cognitive restructuring is a set of skills. that patients learn to recognize cognitive errors and generate alternative explanations and not catastrophic sensations that are feared. In this sense, cognitive therapy begins with a Argumentation regarding treatment and a discussion of the role of thoughts in generating emotions. Next, the thoughts are recognized as hypotheses and opened to questioning. Through From monitoring emotions and cognitions, categories of thought are identified. distorted.

In the case of GAD (Generalized Anxiety Disorder), some categories of distorted thinking are frequent, such as... Catastrophizing; predicting the future; overgeneralization; and so on; and disqualifying the positive. To address These cognitive distortions, these thinking errors, are addressed by therapists using Socratic questioning. to help patients make guided discoveries and question their thoughts.

dysfunctions mentioned (CRASKE; TAYLOR; BARLOW, 2023; CLARK; BECK, 2012).

Cognitive restructuring in the management of GAD includes the identification of schemas. maladaptive traits associated with hunches, personal vulnerability, intolerance, uncertainty, and excessive worry (PEREIRA; BEZERRA, 2023).

According to Edmund Bourne, in the book *Overcoming Anxiety and Phobia: A Practical Guide* (2024), Cognitive therapy is currently used in the treatment of GAD (Generalized Anxiety Disorder). *Cognitive therapy* helps with internal dialogue. The underlying fear related to specific areas of concern is identified, challenged, and replaced by a more realistic way of thinking.

In the cognitive restructuring process in GAD, self-monitoring can classify the intensity of anxiety using the Subjective Units of Discomfort scale (SUDS).

The SUDS is classified on a scale of 0 to 100 to monitor the ...

anxiety. For example, in the self-monitoring form, the date and time (August 24, 11 pm); Worrying thoughts (If I don't get an A on this assignment, I'll never graduate); time spent with concern (1 hour); SUDS (70). Completing the self-monitoring form will help in managing anxiety reduction (Hofmann, 2022).

In the restructuring process, there are levels of cognitive evaluation. The most immediate level...

These are automatic/dysfunctional thoughts. At an intermediate level are beliefs.

Conditionals or underlying rules. And at a deeper level are schemas or core beliefs.

These schemas are identified as a cognitive triad, which the individual has a vision of.

Distorted view of oneself (lack of love, worthlessness, helplessness), of others (critics), and of the future (catastrophic). According to Leahy (2019), individuals who have a core schema/belief that they are incompetent,



They will generally predict their own failure (fortune telling), as well as conclude that failing in Something is terrible (catastrophizing) and indicates your general incompetence (scheme).

In this sense, individuals with a sensitivity to rejection, abandonment, or frustration.

One can develop intense fears and beliefs about the catastrophic significance of such events.

A client with a natural predisposition to overreact to even the most common types of rejection.

In childhood, a negative self-image can develop ("I am not worthy of love"). This image

It can be reinforced if the rejection is particularly strong, occurring at a particularly...

vulnerable or repetitive. With repetition, the belief becomes structured (Beck; Davis; Freeman, 2017).

In cognitive restructuring, therapists can use the ABC technique, in which clients...

They have the opportunity to recognize the same triggering event (A - I hear the window shaking). (activating) can lead to differences in beliefs (B- Someone is trying to enter the house) (beliefs) (thoughts) and consequences (C-feelings/anxious; behaviors/I lock the door. I call the (police) (consequences) (feelings and behaviors). In the ABC technique, we have to check the thought and compare it with the facts (Leahy, 2019).

Cognitive restructuring for clients with GAD also involves taking action. Explore what is most important to the client, through a series of written tasks describing how the Anxiety has hindered their lives in various areas, and they wonder how they would like to be in these areas if they didn't have it. Any anxiety is paramount (ROEMER; EUTIS; ORSILLO, 2023).

Finally, the cognitive restructuring of the client with GAD also occurs through exposure.

This aims to refute erroneous assessments and extinguish conditioned emotional responses.

to external situations and contexts, through exposure. *In vivo* exposure consists of a

Repeated and systematic exposure in real life. It is carried out gradually, progressing from

Situations that cause the least anxiety, followed by those that cause the most, in a hierarchy of avoidance.

(CRASKE; TAYLOR; BARLOW, 2023).

4.6. Problem Solving

According to Bourne (2024), *problem-solving* means taking systematic measures to

To solve the problem you are concerned about. In short, focus on solutions to the problem.

that worries him, rather than focusing on the worry itself. If there is no practical solution, he works towards it.

To change one's attitude towards the situation, that is, to learn to accept what cannot be changed.

Chronic worry is like always being in a "ready state," *even when you're not.*It's game day. While this might help you feel prepared for any catastrophe, it comes at a cost.

"of being tense and anxious all the time" (HOFMANN, 2022, p. 41).



The emphasis is on identifying dysfunctional thoughts and coping strategies.

Problem-solving is part of CBT in managing GAD. The first change, solution,

It starts with what the customer can change. Therefore, "engaging the customer in the search for alternatives" is the the main antidote to helplessness and hopelessness (LEAHY, 2019, p. 9).

Two aspects are essential for dealing with anxiety: setting goals and...

Motivation. Motivation portrays a reason for change. To motivate change, it is necessary to define... objectives. Studies show that the most effective objectives are: 1) specific and concrete; and 2) challenging, but realistic (HOFMANN, 2022). Therefore, problem-solving is one of the CBT tools aimed at managing GAD focus on concrete problems and practical solutions. of catastrophic thoughts, typical of adults with GAD. Problem-solving helps to To modify dysfunctional thoughts, avoidance behaviors, and negative emotional responses. With practice, the client improves their quality of life.

4.7. Behavioral activation

Behavioral Activation (BA) is a CBT technique focused on modifying behaviors.

Generalized Anxiety Disorder (GAD) is characterized by: behaviors and increased engagement in meaningful activities. excessive anxiety and worry, difficulty controlling thoughts, anxiety generalized, physical symptoms such as muscle tension. The behavioral activation technique aims to Breaking avoidance cycles and increasing contact with positive reinforcement. In the case of GAD (Generalized Anxiety Disorder), encouraging... Approach behaviors in situations that the client avoids due to anxiety or demotivation. reducing pleasurable experiences.

The first behavioral trigger in GAD is *exposure to worry*. Edmund Bourne (2024) reports that in exposure to worry, the client undergoes repeated and prolonged exposure to frightening images (his worst-case scenarios) of what worries him. These images include... strategies I would use to reduce anxiety and cope with the situation.

Behavioral activation aims to reshape some common behaviors associated with Anxiety: procrastinating; seeking reassurance; venting; worrying; escaping the situation, among others. (HOFMANN, 2022).

One way to help with behavioral activation is to schedule activities with the Customers with GAD. In particular, customers who have difficulties with social interactions. They live tense, worried, and anxious lives. Many need a justification, a reminder of their... aspirations, guidance in selecting and scheduling activities, instruction on how to focus your full attention on experience (BECK, 2022).



Finally, disruptive activities, such as talking to a friend, writing in a diary, Gardening, exercising, solving a puzzle, doing crafts, or cooking are all practices. with a proactive attitude and concern (BOURNE, 2024).

4.8 Socratic Questioning

Socratic questioning is a CBT technique that helps clients with GAD.

Identify and restructure dysfunctional thoughts through open-ended questions, which promote

Reflection and self-discovery. Socratic questioning evaluates the validity of beliefs. In the case of

In cases of GAD (Generalized Anxiety Disorder), clients present dysfunctional and exaggerated interpretations of events, such as...

Excessive anxiety and worry (apprehension). In Socratic questioning, the client identifies the

Thoughts of anxiety and worry. Then, the therapist asks questions to explore...

Evidence for and against anxious and worried thoughts, seeking clarity and realism.

After evaluating the consequences and alternatives, the client constructs new adaptive beliefs and functional, reducing excessive worries, and self-managing your thoughts and emotions.

The cognitive model proposes that a primary vulnerability of depression, anger, and Anxiety is the set of core beliefs that an individual holds about themselves and about others.

Others. Young and colleagues identified 18 personal schemas, including abandonment, distrust, emotional deprivation, among others. According to Leahy (2019), the schema can be compared to a lens through which a person sees themselves, others, and the world in a different way. biased.

One of the interventions in CBT is *Socratic questioning*. To address these distortions In cognitive studies (schemas), therapists use Socratic questioning to help patients to... to make guided discoveries and to question their aforementioned dysfunctional thoughts (BARLOW, 2023; CLARK; BECK, 2012).

It is important to remember that in CBT, negative core beliefs about oneself fall into...

Three categories: helplessness (being inefficient - "I am incompetent"); lack of love (having personal qualities). which result in an inability to receive and maintain love and intimacy from others - "I will be "rejected" and worthlessness (being an immoral sinner - "I am immoral") (BECK, 2022).

CBT seeks to uncover, through questioning and behavioral experiments, what the patient believes to be true and the underlying habitual thought patterns of their problems. CBT is an empirical approach to reality: "What are the consequences?"



"What would be the consequence of an alternative view?", "What would be the consequence of an alternative view?" or "Let's test your..." thought in comparison to reality" (LEAHY, 2019, p. 4)

Through Socratic questioning, the client changes their way of thinking about...

Anxiety and worry. One of the most powerful anxiety-reducing interventions in CBT.

It is the search for evidence (CLARK; BECK, 2025). Through Socratic questioning, the therapist

The goal is to restructure dysfunctional beliefs into new, functional, and adaptive ones.

4.9 Acceptance-Based Behavior Therapy (ACT)

Lizabeth Roemer and Susan Orsillo developed Behavioral Therapy based on...

Acceptance (TCBA) explicitly focused on reactivity (discomfort) in relation to experiences.

internal manipulation and avoidance of experiences and behaviors, in an effort to better treat GAD and comorbid disorders. The term *Acceptance-Based Behavior Therapy* encompasses the broad range of comorbid disorders. A class of therapies based on cognitive-behavioral theory, but which explicitly incorporate... methods for promoting acceptance of internal experiences (e.g., Acceptance Therapy and Commitment [ACT; SC Hayes, Strosahl, and Wilson, 2012]; Dialectical Behavior Therapy (DBT; Lihehan, 1993); *Mindfulness-* Based Cognitive Therapy (BMTC; Segal, Willian, and Teasdale, 2002) (ROEMER; EUTIS; ORSILLO, 2003; GILLIHAN, 2021).

This TCBA for TAG revealed significant contributions in the evaluation of patients, in Quality of life, combining self-reported experiences and *mindfulness*. Of the patients treated, 77% They met the criteria for high end-stage post-treatment functioning. There is still...

Evidence that the TCBA works through its proposed mechanisms. Changes implemented. session by session in accepting internal experiences and engaging in meaningful activities.

They predicted outcomes beyond the change in concern. Furthermore, participants reported Significant reductions in interpersonal problems were observed during mindfulness treatment. Therefore, These results suggest that treatments for GAD are effective with TBAC (ROEMER; EUTIS; ORSILLO, 2023).

In this sense, Judith speaks of acceptance using the AWARE technique: 1. Accept Anxiety (or another emotion); 2. Observe it (Watch); 3. Act constructively with it; 4. Repeat (Repeat) the steps; 5. Expect (Expert) the best (BECK, 2022).

The goals of an acceptance-based behavioral therapy (ACT) for GAD are: cultivate an expanded, compassionate, and decentered perspective toward internal experiences; to increase acceptance/willingness to have internal experiences; and to have personally adopted certain behaviors. consciously significant (ROEMER; EUTIS; ORSILLO, 2023).



Next, we will look at the technique of physical and mental relaxation. Mindfulness is... one of the techniques associated with TCBA, whose main objective is to achieve awareness of present moment, non-judgment and non-reactivity, acceptance (HOFMANN, 2002).

4.10 Physical and Mental Relaxation Techniques

People who suffer from anxiety and worry often exhibit tension and rigidity.

muscular pains that can spread throughout the body. One of the relaxation techniques that focuses on these...

Physical sensations associated with anxiety, such as muscle tension, are related to *Muscle Relaxation*.

Progressive (RMP). RMP is a deep relaxation technique that teaches how to achieve the

Physical relaxation through a two-step process. First, you apply tension to your muscles.

for a brief period, and then you relax that muscle for a longer period.

In this technique, it's important to use a word as a mantra, such as "relax." For the exercise It's important to choose a quiet place with a comfortable chair or bed. Sit down in a Maintain an upright posture and ensure there is enough space in front of you to move your arms and legs. The exercise lasts about 20 to 30 minutes. The RMP is used on muscles (arms, legs, abdomen, chest, shoulders, neck, eyes, forehead, among others), tensing for about 10 seconds and relaxing. About 50 seconds. Breathe deeply and think of the word "relax" with each breath.

It is important to point out that, for many people, it is not just physical relaxation that they feel after the RMP, but also mental relaxation (HOFMANN, 2022).

It is important to emphasize that "abdominal breathing techniques and deep relaxation" Regular exercise directly reduces anxiety. A physical exercise program also can be included in the treatment" (BOURNE, 2024).

The first relaxation technique we saw was about Muscle Relaxation.

Progressive (RMP). Now we will move from physical relaxation to mental relaxation, with the The practice of *mindfulness*. *Mindfulness* is an attitude that simply involves witnessing the flow. A continuous flow of thoughts and feelings in the present moment without judgment. It originated from It's a Buddhist practice, but now it's being used as a common treatment for stress and depression. and generalized anxiety (BOURNE, 2024).

One of the most common *mindfulness* exercises is called conscious breathing.

The idea behind mindful breathing is to pay attention to your breath in a non-judgmental way.

and not reactive, this will help build a less critical and more tranquil mind. The object of attention

Breathing is all about being mindful. The goal is simply to focus on your breath and stay in the present moment.

This conscious breathing exercise lasts about 5 minutes. Once seated, the client...

Year V, v.2 2025 | Submission: October 27, 2025 | Accepted: October 29, 2025 | Publication: October 31, 2025 Close your eyes and relax. Inhale through your mouth for 5 seconds, then hold your breath for 3 seconds. seconds. Then, exhale gently through your nostrils for 5 seconds, releasing your breath. Continue Doing this, until the 5 minutes are up (HOFMANN, 2002).

The most common formal *mindfulness* technique is seated meditation. Other common types include...

Meditation techniques can include a focus on bodily sensations, ambient sounds, or wishes for health and well-being.

Contentment with ourselves and with others. As one of the dysfunctional factors of Generalized Anxiety Disorder (GAD) is...

Excessive worry can be overcome through relaxation and meditation techniques like *Mindfulness*.

mindfulness, being fully aware in daily routines such as: showering; getting ready; being at

Free; eat; read a book; listen to someone; go to bed. Be present in each moment, because...

The tendency is to have negative thoughts about the future (GILLIHAN, 2021).

4.11 Lifestyle changes

Lifestyle changes are basically about stress management and increasing free time. inactivity, regular exercise, eliminating stimulants and sweets from the diet, resolution of interpersonal conflicts and a change in attitude towards perfectionism and excessive needs to please others or to an excessive need to control (BOURNE, 2024).

Therapy is a valuable tool for helping clients change their lifestyles.

with GAD. All the CBT techniques mentioned for managing GAD can be incorporated into the change.

of lifestyle, from cognitive restructuring, Socratic questioning, problem-solving

problems, behavioral activation, *mindfulness*, and others mentioned above. Also, in cases

For moderate to severe cases of GAD, medication may be used. However, whether with therapy or with...

Medication and lifestyle changes are essential to reducing anxiety.

Final Considerations

This article investigated the contribution of Cognitive-Behavioral Therapy in Management of Generalized Anxiety Disorder in adults. We have seen that GAD is a disorder of severe anxiety, characterized by excessive anxiety and worry, and high levels of anxiety. Physical tension. The prevalence of GAD is slightly higher in adults and women. Another aspect What is relevant is that most adults with GAD experience significant and disabling suffering, with Increased use of medical resources and risks of other physical and mental illnesses.

We have shown that currently, CBT is considered the "gold standard" of psychotherapy in...

Management in adults with GAD. CBT is based on the theory that people's thinking...



influences their emotions and behaviors. We have seen throughout the course of this work the basic principles of

Cognitive Behavioral Therapy (CBT) and the most commonly used interventions and techniques for managing Generalized Anxiety Disorder (GAD).

In this sense, the present work sought to answer the following guiding question: Of what

How does CBT contribute to the management of adults with GAD? In the development of this research

A bibliographic review with renowned authors in the field of psychology and psychiatry showed that using

CBT interventions and techniques in the management of GAD, such as psychoeducation, cognitive restructuring,

Behavioral activation, Socratic questioning, relaxation techniques, and others, the clients

Symptoms of worry and anxiety were significantly reduced. They also improved...

social relationships and quality of life.

In conclusion, the topic of CBT's contribution to the management of GAD in adults is an open field for further exploration. It is a provocative, current, and complex subject. Thousands of

People are suffering from this disorder and experiencing negative consequences in their personal, social, and professional lives.

Recent research has indicated that approximately 65% of patients with GAD were discharged with the

Traditional CBT treatment. With Acceptance-Based Behavior Therapy, using techniques

In conjunction with integrative techniques such as self-reporting and mindfulness, approximately 77% of clients were discharged.

In summary, this study demonstrated that CBT is effective in most cases of GAD, using

Interventions and techniques, combined with medication and integrative practices when necessary.

Finally, I would like to paraphrase Robert L. Leahy (2019, p. 12) when he wrote to

When using the book Cognitive Therapy Techniques: Therapist's Manual, please take into consideration

Some aspects, worth noting to conclude this article: "when using this book [article], keep in mind

that, behind every technique, there must be a genuine person who cares, who has compassion for

"Those who are suffering. Perhaps this is the best technique. We can call it compassion."

References

ALONSO, **J.** *et al.* Treatment gap for anxiety disorders is global: results of the World Mental Health Surveys in 21 countries. *Depression and Anxiety*, vol. 35, no. 3, p. 195-208, 2018. Available at: https://pubmed.ncbi.nlm.nih.gov/29356216/. Accessed on: September 27, 2025.

ARAUJO, AT et al. Treatment of GAD in third-generation cognitive therapies. Brazilian Journal of Psychotherapy, v. 22, n. 2, p. 39–54, 2020. Available at: https://pesquisa.bvsalud.org/portal/resource/pt/biblio-1224603. Accessed on: September 27, 2025.

APA (American Psychiatric Association). Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR). 5th ed., text revised. Porto Alegre: Artmed, 2023.

BECK, Aaron. Introduction to the work *Cognitive-Behavioral Therapy: Theory and Practice*. In: **BECK, Judit S.** *Cognitive-Behavioral Therapy: Theory and Practice*. 3rd ed. Porto Alegre: Artmed, 2022.

BECK, Aaron; CLARK, David A. Cognitive therapy for anxiety disorders. Porto Alegre: Artmed, 2012.

BECK, Aaron T.; DAVIS, Denise D.; FREEMAN, Arthur. Cognitive therapy of personality disorders. Translation: Daniel Bueno; Technical review: Cristiano Nabuco de Abreu. 3rd ed. Porto Alegre: Artmed, 2017.

BECK, Judit S. Cognitive-behavioral therapy: theory and practice. 3rd ed. Porto Alegre: Artmed, 2022.

BOURNE, **Edmund J.** *Overcoming Anxiety and Phobia: A Practical Guide*. Translated by Marcos Vinícius Martim da Silva; Technical review by André Luiz Moreno. 7th ed. Porto Alegre: Artmed, 2024.

BOGUCKI, OE *et al.* Cognitive behavioral therapy for anxiety disorders: outcomes from a multi-state, multi-site primary care practice. *Journal of Anxiety Disorders*, vol. 78, no. 1, p. 1-10, 2021.

Available at: https://pubmed.ncbi.nlm.nih.gov/33395601/. Accessed on: September 27, 2025.

CLARK, David A.; BECK, Aaron T. Overcoming anxiety and worry: with cognitive-behavioral therapy. Translation: Daniel Bueno; Technical review: Elisabeth Meyer. 2nd ed. Porto Alegre: Artmed, 2025.

CRASKE, Michelle G.; TAYLOR, Kate Wolitzky; BARLOW, David H. Panic disorder and agoraphobia. In: BARLOW, David H. (Ed.) Clinical manual of psychological disorders: step-by-step treatment. 6th ed. Porto Alegre: Artmed, 2023. Chapter 1, pp. 1-57.

CUNHA, Jurema Alcides (ed.). Psychodiagnosis-V. 5th ed. rev. and enlarged. Electronic data.

Porto Alegre: Artmed, 2007. Available at: https://www.pdfdrive.to/dl/psicodiagnostico-v. Accessed on: September 27, 2025.

DALGALARRONDO, Paulo. Psychology and semiology of mental disorders. 3rd ed. Porto Alegre: Artmed, 2019.

FREITAS, CN; SILVA, PO; PUCCI, SHM. Contributions of cognitive-behavioral therapy in generalized anxiety disorder in adults: an integrative literature review.

Ibero-American Journal of Humanities, Sciences and Education (REASE), v. 10, n. 10, p. 1027-

1050, 2024. Available at: https://periodicorease.pro.br/rease/article/view/15953/. Accessed on: September 27, 2025.

GILLIHAN, Seth J. Cognitive-behavioral therapy: strategies for coping with anxiety, depression, anger, panic, and worry. 1st ed. Barueri, SP: Manole, 2021.

HOFMANN, Stefan G. Dealing with anxiety: CBT and mindfulness strategies to overcome fear and worry. Translation: Sandra Maria Mallmann da Rosa; Technical review: André Luiz Moreno. Porto Alegre: Artmed, 2022.

KNAPP, P.; BECK, AT. Fundamentals, conceptual models, applications and research in cognitive therapy. *Brazilian Journal of Psychiatry*, v. 30, n. 2, p. 54-64, 2008. Available at: https://www.researchgate.net/publication/ 247852812 Fundamentos modelos conceituais aplicaco

es e pesquisa da terapia cognitiva. Accessed on: September 27, 2025.

LAKATOS, EM; MARCONI, MA. Fundamentals of scientific methodology. São Paulo: Atlas, 2003.

LEAHY, Robert L. Don't believe everything you feel: identify your emotional patterns and free yourself from anxiety and depression. Porto Alegre: Artmed/FBTC, 2021.

LEAHY, Robert L. Cognitive therapy techniques: a therapist's manual. Translated by Sandra Maria Mallmann da Rosa; Technical review by Irismar Reis de Oliveira. 2nd ed. Porto Alegre: Artmed, 2019.

PAN AMERICAN HEALTH ORGANIZATION (PAHO). The burden of mental disorders in the region of the Americas.

Washington, DC: PAHO, 2018. Available at: https://www.paho.org/en/documents/burden-mental-disorders-region-americas-2018. Accessed on: September 27, 2025.

PEREIRA, Mara Dantas; BEZERRA, Cláudia Mara Oliveira. Cognitive-behavioral therapy interventions for generalized anxiety disorder: a case study. *Revista Eixo*, Instituto Federal de Educação, Ciência e Tecnologia de Brasília (IFB), Brasília, DF, v. 12, n. 1, p. 108-117, jan./abr. 2023. Available at: https://arquivorevistaeixo.ifb.edu.br/index.php/RevistaEixo/article/view/1010. Accessed on: September 27, 2025.

ROEMER, Lizabeth; EUSTIS, Elisabeth; ORSILLO, Susan. Generalized anxiety disorder: an acceptance-based behavioral therapy. In: BARLOW, David H. (Ed.)

Clinical manual of psychological disorders: step-by-step treatment. 6th ed. Porto Alegre: Artmed, 2023. Chapter 5, pp. 169-200.

SILVA, VS et al. Efficacy of cognitive-behavioral therapy in generalized anxiety disorder. Cuadernos de Educación y Desarrollo, Portugal, v. 17, n. 2, p. 1-23, 2025. Available at: https://ojs.cuadernoseducacion.com/ojs/index.php/ced/article/view/7599/5307. Accessed on: September 27, 2025.