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Metacognitive Therapy (MCT): History, Applications and Benefits

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Abstract
Depression is a mental illness that affect person's behavior , emotions and thinking. It causes a feeling of sadness. Metacognitive Therapy MCT is a new therapy in psychology which specified for mental issues such as depression and anxiety. Wells and Matthews 1994 developed "The Self-Regulatory Executive Function Model" - SREF to explain the impact of metacognition factors like emotions, thinking, and behaviors on causing psychological disorders. MCT is used for treating depression, anxiety disorder, post - traumatic stress disorder, obsessive - compulsive disorder and psychosis and the time for intervention range between 8-12 weeks. Behavioral Experiments; Attentional Training Technique & Detached Mindfulness are the main techniques in MCT. The application of this therapy is still limited at the present time and needs more practical applications to prove its potential in treatment.

Keywords: Cognition therapy, MCT, Depression, Anxiety, CBT.

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Introduction

Depression is a mental illness that affect person's behavior , feeling and thinking. It causes a feeling of sadness, helplessness and helplessness and loss of enjoy feelings (A.P.A., 2020). It is a second reason for disability across the world and reduce quality of life (Callesen et.al., 2020).

It's important for psychotherapy to renew the techniques and raising the outcomes levels in depression therapy (Callesen et.al., 2020)

Metacognitive Therapy MCT is a new therapy in psychology which specified for mental issues such as depression and anxiety (Oslen, 2022). It is a cognitive behavioral psychotherapy with a realistic view about mental disorders and explain how they happen (Batmaz, 2014). MCT assumes that activating information processing forms like worry and rumination can lead to distress, and the beliefs about these forms affect, benefits, and their abilities to control on anger or other negative feelings are the main factors to develop signs of mental illness and issues (Hutton et.al., 2014).

Metacognitive process is thinking about thinking (Hjemdal, et.al., 2013, p.301). The cause of pathological behaviors - according to Wells and Mathews - are coming from negative automatic thoughts and the way that people respond to them (Hjemdal, et.al.,2013) Wells and Mathews distinguish between metacognition process and metacognition regulation which we explain it in metacognition theory.

MCT Theory

Wells and Matthews 1994 developed "The Self-Regulatory Executive Function Model"-S-REF to explain the impact of metacognition factors like emotions, thinking, and behaviors on causing psychological disorders (Moss, 2016).

The S-REF system contents three levels which connect with each other:

- Low level of information process (automatic style)
- Upper level of information process (conscious style)
- High level of information process (meta style) (Batmaz, 2014).

Wells and Mathews indicated that there are factors that can help in metacognition process; attention and inflexibility in cognition. The metacognition components can be as three dimensions : shifting , updating , and inhibition .

Shifting is a changing component between mental tasks. Updating is a component that monitor memory tasks , while Inhibition is a component of reduce unnecessary responses. The ruminative thinking (as a core feature in depressed people) can affect by reduce in shifting and inhibition.

To help people who are suffering from depression and anxiety, we need to weakening the cognition processes and strengthen the factors like attention to reduce ruminative thinking style by increase the ability to shifting so we can help to focus away from depression symptoms and also switching from

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mental task to another that may be more flexible. Shifting can be more affective by intentional training (Kraft et.al., 2017).

According to Wells; MCT strategies are the types of responses to control thinking by reducing negative thoughts in different ways, many people may reduce worry by turning their attention, others may suppress their feelings etc.

People who suppress their feelings may suffer from many disorders such as anxiety, others who suffer from depression may use a repetitive strategy (rumination). The metacognition strategies depend on metacognition knowledge which means the beliefs and views which people have on their thoughts. Wells mentioned that there is two types of this knowledge : explicit, that contents verbal expressions , while implicit contents the styles that guide thinking (Wells, 2009).

Overall , the individual who has negative beliefs, rumination, self focus of attention and monitoring of threatening situation will be prone to have anxiety and long emotional suffering (Sica et.al., 2007).

Techniques

There are two basic techniques for MCT therapy:

__ Attention Training Technique ATT: is a technique for MCT therapy developed by Wells. This technique depends on deactivate or disrupt the cognitive attention syndrome CAS which means " the style of thinking that responds to negative thoughts and emotions and seems to be inflexible thinking style" as Wells describe it (Fergus et.al., 2013).

The technique consists to listen actively and have attention to different sounds in loud and spatial locations. This would be in three stages and at least 12 minutes. The first stage called selective attention which content the focus on individual sounds and spatial locations and trying to minimize the distraction. The second stage contents fast switching in different sounds. The last stage trying to divide the attention and cope with different sounds and spatial locations.

The aim from this technique is to focusing on the attention process and dealing with other inner thoughts and feelings as a noise that can distract attention. The focusing on attention is a priority here and other events will not be so important to stimulate a response. The ATT therapy will help the patients to have attention control and reduce spending time on analyzing negative thoughts and emotions (MCT Institute, 2018).

__ Detached Mindfulness DM : One of the MCT techniques , contents rumination and worry control. Wells described it " as a state of awareness of internal events, without responding to them with sustained evaluation, attempt to control or suppress them, or respond to them behaviorally by allowing the thought to occupy its own mental space without further action or interpretation" (Oslen, 2022 , p.1). Detached mindfulness means that Detached is disengagement with negative thoughts and beliefs , Mindfulness

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is awareness to all there negative thoughts. The patient who applies Mindfulness will do nothing to his/ her thoughts , and just allow them to pass away without any excessive information processing (Oslen, 2022).

Applications and Benefits

MCT therapy is applying to treat depression, anxiety disorder, post - traumatic stress disorder, obsessive - compulsive disorder and psychosis (Oslen, 2022).

Many studies have shown the benefits of MCT treatment on psychological disorders; a study on adult participant (N= 22) suffered from prolonged grief disorder; MCT helped to reduce prolonged grief symptoms after 3-6 months treatment sessions and increased in quality of life (Wenn et.al., 2019).

Callesen et.al. 2020 assessed the efficacy the MCT therapy on 174 depressed adults at age18, divided into two groups ; 85 allocated to MCT and 89 to CBT. The courses for therapy continued for six months. The results showed that 74% who allocate to MCT therapy met the criteria for recovery while 52% for CBT (Callesen et.al., 2020).

MCT also can be helpful to reduce mind wandering. Tavighi et.al. 2020 applied the mind-wandering scale on female adolescents in secondary schools in Karaj / Iran. Seventy students were suffer from mind-wandering according to their scores on the scale. they had been divided into four experimental groups. They got many techniques of MCT therapy to decrease wandering. The MCT therapy was the most effective way to decrease wandering and its impact was sustained three months later.

Body Dysmorphic Disorder BDD is a mental illness with focusing on the body appearance and worry about any flow or defect in appearance (BDDF, n.d.). A group of ten participants suffered from BDD received sessions of MCT treatment in an experimental group , while the control did not receive any sessions. Results of the study showed significant change and recovery on the experimental group (70%) compared to control group and that change continued after six months from sessions ends (Rabiei et.al., 2012).

Sharma et.al.(2022) reviewed the studies that content MCT treatment applications on adult participants. They reached the conclusion that the MCT treatment was beneficial and had an effect on the PTSD, managing obsessive - compulsive disorder symptoms, a rapid recovery from alcohol use disorder. For sexual disorder; Ramezani et.al.2017 studied the affect of MCT on participants with hypoactive sexual desire disorder but unfortunately, the study did not reached to remarkable results. Many investigations required to examine the affect of MCT treatment on sexual disorders, eating disorders and Bipolar disorder.

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Differences between MCT and CBT

MCT therapy is a modern way to treat. It is characterized by a short treatment period with an intensive procedure and strong results (Winter, et al., 2019).

According to Wells and colleagues; CBT works with " Object level "; while MCT works on " Meta level". Object level is a reality state for the person and works on consciousness level. Meta level is a thinking repeatedly about the reality state (Moritz et.al., 2018).

According to CBT and MCT, thinking types can help to determine the psychological disorders nature. Thinking about something " dangerous " will happen led to have anxiety disorder; while thinking about self evaluation and loss led to depression disorder. MCT focuses on the type of repeat - persistent thinking that trapped the person in a state of tension and distress. MCT is trying to discover the factors that lead to this type of thinking. Another difference between CBT and MCT is about how they look to the beliefs' role in disorders. MCT assists on the importance to change and modify the beliefs to change thinking; while CBT assists that beliefs are results of thinking process (Wells, 2009).

On other hand; there are many similarities between both of them. In a study to treat anxiety disorder, post traumatic stress disorder, social phobia, panic disorder for ninety norwegian participants at age 18 and older; the researchers divided the participants randomly by two groups, one will undergoing MCT and the other for CBT for one year. The results revealed an improvement in the level of anxiety, and the differences supported the MCT treatment; MCT also provided significant changes in personality problems. There were no differences between MCT and CBT in treat other disorders (Johnson et.al., 2017).

Conclusion

More studies are required to determine the affect of MCT on other mental disorders.

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