

Lecture 32: Therapy and Treatment: Psychotherapy

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I. THERAPY AND TREATMENT

A. Introduction

- Two forms of therapy are administered by people with very different training
 - Biological Treatments:** Drugs or direct intervention in brain function.
 - Psychiatrists or other physicians (MDs) administer drugs or direct interventions to patients in hospital settings or as outpatients
 - Psychotherapy:** An array of psychological approaches including psychoanalytic, cognitive, behavioral, humanistic, and other approaches
 - Psychologists: Ph.D. Ed.D. Psy.D.
 - Social Workers: MSW
 - Marriage and Family Therapy: MFT

II. PSYCHOTHERAPY

A. Nature and Assumptions

- Psychotherapeutic techniques are based theoretically on assumptions about human nature
- Each psychotherapeutic approach has...
 - Image of the patient:** What is the status of the person presenting a problem?
 - Image of the therapist:** What role does the mental health professional adopt?
 - Process of Therapy:** What is the essential therapeutic process?
 - Techniques:** What strategies are used to promote change?

II. PSYCHOTHERAPY

B. Psychoanalytic

- Image of patient:** As a patient
- Image of therapist:** As an expert
- Process of Therapy:** Insight. Understand then rid patient of unconscious conflicts and defenses constructed to defend against conflict.
- Therapeutic Techniques:** Identify the unconscious conflict.
 - B1. Free associations:** A method of uncovering unconscious conflicts by saying freely whatever comes to mind. Augments Dream Analysis and Projective tests.
 - B. 2 Transference:** A critical step in which a patient transfers emotions and reactions (conflicts) onto the therapists.

II. PSYCHOTHERAPY

C. Behavioral Therapy

- **Image of patient:** As a patient
- **Image of therapist:** As an expert
- **Process of Therapy:** Learn new behaviors through mechanisms of learning like modeling reinforcement, punishment, extinction, etc.
- **Therapeutic Techniques:** Identifying and changing responses to stimuli.
 - **C1. Systematic Desensitization:** A step by step process of desensitizing a patient to a feared object or experience. Associate the stimulus to an incompatible response.

II. PSYCHOTHERAPY

C. Behavioral Therapy

- Test anxiety reduced by imagining taking a test while relaxed. The process is gradual.
 - Tests → fear
 - Tests → relaxation
- **C2. Aversive Conditioning:** Punishment is substituted for the reinforcement that supports a bad habit.
 - Nail Biting is behavior which escape anxiety.
 - Rubber band snapped to punish nail biting.
- **C3. Exposure Treatment (Flooding) :** Confront the patient with anxiety disorders (Panic attacks, phobias) with the source of their anxiety until the anxiety subsides (Extinction).

II. PSYCHOTHERAPY

C. Behavioral Therapy

- Phobias of Snakes can be treated by placing patients in room full of snakes.
- Panic Attacks results in agoraphobia which is treated by sending patients them out to confront their fears
- **C4. Behavioral Records:** Helps to identify the environmental contingencies which give rise and support abnormal behavior.
 - Behavioral records used in order to get a sense of the timing and conditions of the unwanted behavior.
- **C5. Skill Training:** Provides practice in behavior that are necessary for achieving a goal.
 - Provide social skills to a shy persons.

II. PSYCHOTHERAPY

D. Cognitive Therapy

- **Image of patient:** As a client
- **Image of therapist:** As a facilitator
- **Process of Therapy:** Rid clients of their irrational thoughts.
- **Therapeutic Techniques:** Strategies for challenging and changing non-adaptive and irrational thoughts, beliefs, and attitudes.
 - **D1. Rational-Emotive Therapy:** Rational arguments are used to directly challenge a clients unrealistic beliefs or expectations
 - Over-generalization: One bad outcome → person evaluates himself as incompetent

II. PSYCHOTHERAPY

D. Cognitive Therapy

- **D2. Beck's Cognitive Therapy:** Less direct challenges of irrational thoughts. Test beliefs to discover limits of truth.
 - **Treating Catastrophizing:** Limiting the tendency to make normal upsets and problems into catastrophes.
 - **Treating Depression:** Treatment aligned to behavior therapy. Direct the patient to have more rational thoughts about his or her self by pointing out contradictions

II. PSYCHOTHERAPY

E. Humanistic Therapy

- **Image of patient:** As a client
- **Image of therapist:** As a facilitator
- **Process of Therapy:** Provide the safe environment for a patient to help themselves and work out their own solutions to problems.
- **Therapeutic Techniques:** Processes to create safe environments:
 - **E1. Client-centered or non-directive therapy:** Rodgers: Listen to client needs in an accepting warm, and nonjudgmental way.
 - Build Self-esteem through the creation of an environment of genuineness, acceptance, and empathy.

II. PSYCHOTHERAPY

F. Other Therapies

- **Family Therapy:** Social context of the family may be an interesting perspective to examine abnormal behavior.
 - Most family members unaware of their influence.
 - **Genogram:** Examination of patterns of behavior across generations:
- **Family Systems theory:** People's behavior in a family is interconnected bees like a dance.
- **Group Therapy:** People with the same or different problems find solutions to their problems together.

II. PSYCHOTHERAPY

G. The Therapeutic Process

- 1. Characteristics of the patient
 - Want to change and has support from family
 - Patient/client is a "problem-solver" not avoider
- 2. Characteristics of the therapist
 - Empathy, acceptance, genuineness
 - Make clients feel respected accepted and understood
- 3. The Therapeutic Alliance
 - **Therapeutic Alliance:** The bond of confidence and mutual understanding established between therapist and client which allows them to work together to solve the client's problem.
 - Similar backgrounds may be important
 - Role of culture: Understand local significance of behavior.