Chapter Fifteen
TREATMENT OF PSYCHOLOGICAL DISORDERS

Review of Key Ideas

THE ELEMENTS OF THE TREATMENT PROCESS

1. **Identify the three major categories of therapy, and discuss patterns of treatment seeking.**

   1-1. Even though she already owns more than a thousand pairs of shoes, Imelba cannot resist the urge to buy more. She checks the Yellow Pages and calls three different psychotherapists regarding possible treatment for her compulsion.

   (a) One therapist tells her that treatment will require her to talk with the therapist so as to develop a better understanding of her inner feelings. This therapist probably belongs to the _____ school of psychotherapy.

   (b) Another therapist suggests that some form of medication may help alleviate her compulsion. This therapist probably pursues the _____ approach to psychotherapy.

   (c) The third therapist is of the opinion that her urge to buy shoes results from learning, and correcting it requires that she unlearn this compulsion. This therapist probably pursues the _____ approach to psychotherapy.

   1-2. Indicate whether the following statements about people who seek and choose not to seek psychotherapy are true or false.

   _____ Men are more likely than women to seek psychotherapy.

   _____ The two most common presenting symptoms are excessive anxiety and depression.

   _____ Persons seeking psychotherapy always have identifiable disorders.

   _____ Only a minority of persons needing psychotherapy actually receive treatment.

   _____ Many people feel that seeking psychotherapy is an admission of personal weakness.

2. **Distinguish the various types of mental health professionals involved in the provision therapy.**

   2-1.   Identify the following kinds of mental health professionals:

   (a) Medically-trained persons (physicians) who generally use biomedical and insight approaches to psychotherapy.

   (b) Persons with doctoral degrees who emphasize behavioral and insight approaches to psychotherapy in treating a full range of psychological problems (two types).

   (c) Nurses who usually work as part of the treatment team in a hospital setting.

   (d) These persons often work with both the patient and family to reintegrate the patient back into society.

   (e) Persons who usually specialize in particular types of problems, such as vocational, drug, or marital counseling.

INSIGHT THERAPIES

3. **Explain the logic of psychoanalysis, and describe the techniques by which analysts probe the unconscious.**

   3-1.   Freud believed that psychological disturbances originate from unresolved conflicts deep in the unconscious levels of the mind. His theory of personality, which he called _____, would be classified as an _____ approach to psychotherapy. The psychoanalyst plays the role of psychological detective, seeking out problems thought to originate from conflicts left over from early _____.

   3-2.   The psychoanalyst employs two techniques to probe the unconscious. One technique requires the patient to tell whatever comes to mind, no matter how trivial. This technique is called _____ _____. The other technique requires the patient to learn to remember his or her dreams, which are then probed for their hidden meaning by the psychoanalyst. This technique is called _____ _____.

4. **Clarify the nature of resistance and transference in psychoanalysis.**

    4-1.   Freud believed most people (<u>do/do not</u>) want to know the true nature of their inner conflicts and will employ various strategies so as to offer _____ to the progress of therapy. As therapy progresses, the patient often begins to relate to the therapist as though he or she was actually one of the significant persons (mother, father, spouse, etc.) in the patient's life. This phenomenon is called _____.

5. **Understand the role of therapeutic climate and therapeutic process in client-centered therapy.**

    5-1.   Client-centered therapy, as developed by Carl Rogers, holds that there are three important aspects necessary for a good therapeutic climate. These are genuineness, unconditional positive regard, and empathy. Match these terms with their correct definitions, as given below.

        (a) The ability to truly see the world from the client's point of view and communicate this understanding to the client.

        (b) The therapist's openness and honesty with the client.

        (c) The complete and nonjudgmental acceptance of the client as a person, without necessarily agreeing with what the client has to say.

    5-2.   The major emphasis for client-centered therapy is to provide feedback and _____ as the client expresses his or her thoughts and feelings. The idea here is that the client (<u>does/does not</u>) need direct advice. What is needed is help in sorting through personal confusion in order to gain greater _____ into true inner feelings.

6. **Discuss new approaches to insight therapy inspired by the positive psychology movement.**

    6-1.   Answer the following true-false questions with respect to how positive psychology has inspired new approaches to insight therapy.

        (a) Insight therapies influenced by positive psychology tend to focus on the adaptive, creative, and fulfilling aspects of life.

        (b) *Well-being* therapy has proven to be successful in the treatment of mood and anxiety disorders.

        (c) Positive psychology has proven to be successful in the treatment of schizophrenia.

7. **Articulate how group therapy is generally conducted and identify some advantages of this approach.**

7-1.   When conducting group therapy, the therapist generally plays a(n) (active/subtle) role, one that is primarily aimed at promoting _____ cohesiveness. Participants essentially function as _____ for each other, providing acceptance and emotional support.

7-2.   Besides being less expensive, group therapy also has three other advantages: (1) the realization by the participants that their problems (are/are not) unique, (2) the opportunity to work in a safe environment to build _____ skills, and (3) the fact that group therapy is particularly appropriate for (all/certain) kinds of problems.

8. **Assess the efficacy of insight therapies and the role of common factors in therapy.**

8-1.   Evaluating the effectiveness of insight therapies (is/is not) especially complicated. For example, many problems simply clear up on their own, a condition called _____ remission.

8-2.   Overall, research studies show that a clinically meaningful recovery within about 20 sessions occurs in about _____ percent of the patients. This number grows to about _____ percent after 45 sessions.

8-3.   The benefits of therapy appear to represent the specific procedures employed by a given therapist and also to _____ factors employed by all therapists.

BEHAVIOR THERAPIES

9. **Describe the goals and procedures of systematic desensitization and aversion therapy.**

9-1.   State whether the following situations would be most applicable to systematic desensitization or to aversion therapy.

(a) The treatment goal is to lessen the attractiveness of particular stimuli and behaviors that are personally or socially harmful.

(b) The treatment goal is to reduce irrational fears, such as found in phobias and other anxiety disorders.

(c) The three-step treatment involves pairing an imagined anxiety hierarchy with deep muscle relaxation.

(d) Treatment involves presenting an unpleasant stimulus, such as electric shock, while a person is engaged in performing a self-destructive, but personally appealing, act.

(e) This would be the treatment of choice for students who are unduly anxious about public speaking.

10. Outline the goals and techniques of social skills training.

10-1. As the name implies, social skills training is a behavior therapy designed to improve a clients social or _____ skills. Three different behavioral techniques are employed. First, one is required to watch closely the behavior of socially skilled persons, a technique called _____. Next, the client is expected to imitate and practice the behavior he or she has just witnessed, a technique called behavior _____. Finally, the client is expected to perform in social situations requiring increasingly more difficult social skills, a technique called _____.

11. Articulate the logic, goals, and techniques of cognitive therapy.

11-1. Answer the following questions regarding the logic, goals, and techniques of cognitive therapy.

(a) What is the basic logic behind cognitive therapy? Or, to put it another way, what is the origin of many psychological problems according to cognitive therapy?

(b) What is the primary goal of cognitive therapy?

(c) How do cognitive therapists go about changing a client's negative illogical thinking?

(d) Cognitive therapy emerged from two therapy traditions. What are they?

12. Articulate the efficacy of behavior therapies.

12-1. Behavior therapies have generally placed (less/more) emphasis on therapeutic outcomes than have insight therapists. It is important to remember, however, that behavior therapies are best suited for treating (specific/general) psychological disorders, and that all of the various behavioral techniques (are/are not) equally effective.

13. Summarize the therapeutic actions and side effects of antianxiety and antipsychotic drugs.

13-1.   Answer the following questions regarding the therapeutic actions and side effects of antianxiety drugs.

(a) Although antianxiety drugs are generally prescribed for people with anxiety, they are often prescribed for what other disorder?

(b) What is the most common side effect of both Valium and Xanax?

(c) What is often a problem when people stop taking antianxiety drugs after they have been taking them for a while?

13-2.   Answer the following questions regarding the therapeutic action and side effects of antipsychotic drugs.

(a) Approximately what percentage of patients is helped by antipsychotic drugs?

(b) What severe and long-lasting problem is seen in about 20% of the patients who receive long-term treatment with traditional antipsychotic drugs?

(c) What did researchers conclude about the side effects of the newer atypical antipsychotic drugs compared to the older drugs?

14. Summarize the therapeutic actions and side effects of antidepressant and mood stabilizing drugs.

14-1.   Three classes of drugs – tricyclics, MAO inhibitors, and selective serotonin reuptake inhibitors – have been found to be useful in alleviating depression. These drugs are collectively called _____ drugs.

14-2.   Data from some studies suggest that suicide rates among adolescents have (increased/decreased) slightly because of the widespread prescription of SSRIs; however, other studies found no association here.

14-3.   The newest class of antidepressant medications inhibits the reuptake of both serotonin and norepinephrine. These drugs appear to produce slightly (weaker/stronger) side effects than the SSRIs. They also lead to a (broader/narrower) range of side effects.

14-4. A new class of drugs is replacing lithium for treating mood disorders. Valproic acid is the most popular of these new drugs, which are collectively known as _____ *stabilizers*.

15. Evaluate the overall efficacy of drug treatments and controversies surrounding pharmaceutical research.

15-1. Drug therapies have proven useful in the treatment of many psychological disorders. However, they remain controversial for at least three reasons. Use the hints below to describe these three reasons.

(a) resolve problems

(b) two areas having to do with excess

(c) cure is worse than the disease

15-2. What problem exists between drug companies and researchers that may influence results regarding the effectiveness and side effects of drugs?

16. Describe electroconvulsive therapy and assess its therapeutic effects and its risks.

16-1. Answer the following questions about the nature, therapeutic effects, and risks of ECT.

(a) What is the physical effect of the electric shock on the patient?

(b) What general class of disorders warrants conservative use of ECT as a treatment technique?

(c) Why does ECT work?

(d) What are some short-term side effects of ECT?

17. **Describe the therapeutic use of transcranial magnetic stimulation and deep brain stimulation.**

    17-1. Answer the following questions regarding transcranial magnetic stimulation and deep brain stimulation.

      (a) Which technique involves a surgically implanted electrode in the brain connected to an implanted pulse generator that delivers electric currents to the brain?

      (b) Which technique permits temporarily enhancing or depressing activity in a specific area of the brain?

      (c) Which technique shows promise in reducing depressive symptoms?

      (d) Which technique shows promise in the treatment of motor disturbances with Parkinson's disease, tardive dyskinesia, and some seizure disorders?

18. **Articulate the concerns that have been expressed about the impact of managed care on the treatment of psychological disorders.**

    18-1. Why might the impact on mental health care be more negative with managed health care than for other treatment specialties in carrying out medically necessary treatment programs?

    18-2. What cost-cutting strategies, in addition to denial of treatment and prescribing older rather than newer drugs, are often employed by HMOs?

CURRENT TRENDS AND ISSUES IN TREATMENT

19. Discuss the merits of blending approaches to therapy, including the Featured Study on combining insight therapy and medication.

19-1. A significant trend in modern psychotherapy is to blend or combine many different treatment approaches. Psychologists who advocate and use this approach are said to be _____.

19-2. The Featured Study suggests there may be some merit to this approach. In this study, elderly patients who had been treated recently for episodes of depression were randomly assigned to one of four groups: Medication alone, placebo alone, interpersonal therapy and placebo, or interpersonal therapy and medication.

(a) Which group showed the lowest rate of relapse?

(b) Which group showed the highest rate of relapse?

20. Analyze the barriers that lead to underutilization of mental health services by ethnic minorities and possible solutions to the problem.

20-1. What three barriers prevent the full utilization of mental health services by minority groups?

20-2. Which of the following solutions has/have been offered to increase the utilization of mental health services by minority groups?
(a) Train more minority therapists.
(b) Increase efforts to build strong therapeutic alliances.
(c) Investigate how traditional therapies can be tailored to be more compatible with the cultural heritage of specific ethnic groups.

INSTITUTIONAL TREATMENT IN TRANSITION

21. Explain why people grew disenchanted with mental hospitals.

21-1. After more than a century of reliance on state mental hospitals, the evidence began to grow that these institutions were not helping the patients; rather, in many instances, they were worsening their condition. What condition, unrelated to funding, was said to be responsible for this state of affairs?

22. **Assess the effects of the deinstitutionalization movement.**

22-1. Transferring mental health care from large state institutions to community-based facilities is what is meant by the term _____. As a result of deinstitutionalization, the number of mental patients in large institutional hospitals has _____ remarkably. The length of stay by patients in mental hospitals has also _____.

22-2. Although deinstitutionalization has resulted in a decrease in the number of patients, as well as their length of stay, the number of admissions to psychiatric hospitals has actually _____. This is because of a large number of readmissions for short-term care, which the text calls "the _____ _____ problem." Another problem brought about by deinstitutionalization is that a large number of discharged patients who have meager job skills and no close support groups make up a substantial portion of the nation's _____ persons.

REFLECTING ON THE CHAPTER'S THEMES

23. **Identify the two unifying themes highlighted in this chapter.**

23-1. What point does the text make about how theoretical diversity influenced the treatment techniques employed by psychotherapy?

23-2. The approaches to psychotherapy discussed in this chapter are not universally accepted or used, and some are actually counterproductive in many cultures. Why is this?

APPLICATION: LOOKING FOR A THERAPIST

24. **Discuss where to seek therapy and the potential importance of a therapist's sex and professional background.**

24-1. Most therapists (are/are not) in private practice. In addition to talking to friends and acquaintances, the text lists many places (Table 15.2) where one might seek psychotherapy. The general idea here is to _____ around when looking for a therapist.

24-2. The text concludes that the kind of degree held by the psychotherapist (is/is not) crucial, although a verifiable degree indicating some kind of professional training is important. The sex of the therapist should be chosen according to the feelings of the _____; it is unwise to engage a therapist whose sex makes the client feel uncomfortable.

25. **Evaluate the importance of a therapist's theoretical approach.**

    25-1.   Studies of the effectiveness of various theoretical approaches to therapy show they are (<u>unequal/equal</u>) in overall success. This equality of results among all theoretical approaches (<u>does/does not</u>) apply to all types of problems. The theoretical approach may make a difference for specific types of problems.

26. **Summarize what one should look for in a prospective therapist and what one should expect out of therapy.**

    26-1.   The text lists three areas to evaluate when looking for a therapist. Complete the following statements describing these areas.

        (a) Can you talk to the therapist _____?

        (b) Does the therapist appear to have empathy and _____?

        (c) Does the therapist appear to be self-assured and _____?

    26-2.   What should one consider before terminating therapy because of lack of progress?

    26-3.   What did the Ehrenbergs say about what to expect from psychotherapy?

CRITICAL THINKING APPLICATION

27. **Understand how placebo effects and regression toward the mean can complicate the evaluation of therapy.**

    27-1.   In addition to therapy itself, what other two factors can influence the outcome of a treatment program?

    27-2.   Which of these two factors is least affected by having only a small sample?

    27-3.   Which of these factors leads us to predict that persons who score the healthiest on a mental health questionnaire will actually score lower on this questionnaire following a brief therapy intervention?

Antianxiety drugs
Antidepressant drugs
Antipsychotic drugs
Aversion therapy
Behavior therapies
Biomedical therapies
Client-centered therapy
Clinical psychologists
Cognitive-behavioral treatments
Cognitive therapy
Counseling psychologists
Deep brain stimulation

Deinstitutionalization
Dream analysis
Eclecticism
Electroconvulsive therapy (ECT)
Free association
Group therapy
Insight therapies
Interpretation
Mental hospitals
Mood stabilizers
Placebo effects
Positive psychology

Psychiatrists
Psychoanalysis
Psychopharmacotherapy
Regression toward the mean
Resistance
Social skills training
Spontaneous remission
Systematic desensitization
Tardive dyskinesia
Transcranial magnetic stimulation
Transference

1. Psychologists who specialize in the treatment of full-fledged disorders.

2. Physicians who specialize in the treatment of psychological disorders.

3. Therapies that involve verbal interactions intended to enhance a client's self-knowledge and thus produce healthful changes in personality and behavior.

4. An insight therapy that emphasizes the recovery of unconscious conflicts, motives, and defenses through techniques such as free association and transference.

5. A technique in which clients are urged to spontaneously express their thoughts and feelings with as little personal censorship as possible.

6. A technique for interpreting the symbolic meaning of dreams.

7. A therapist's attempts to explain the inner significance of a client's thoughts, feelings, memories, and behavior.

8. A client's largely unconscious defensive maneuvers intended to hinder the progress of therapy.

9. A process that occurs when clients start relating to their therapist in ways that mimic critical relationships in their lives.

10. An insight therapy that emphasizes providing a supportive emotional climate for clients who play a major role in determining the pace and direction of their therapy.

11. An insight therapy that emphasizes recognizing and changing negative thoughts and maladaptive beliefs.

12. The simultaneous treatment of several clients.

13. Therapies that involve the application of learning principles to change a client's maladaptive behaviors.

14. A behavior therapy used to reduce anxiety responses through counterconditioning.

15. A behavior therapy in which an aversive stimulus is paired with a stimulus that elicits an undesirable response.

16. Recovery from a disorder that occurs without formal treatment.

17. A behavior therapy designed to improve interpersonal skills and which emphasizes shaping, modeling, and behavioral rehearsal.

18. Therapies that use physiological interventions intended to reduce symptoms associated with psychological disorders.

_____ 19. The treatment of mental disorders with drug therapy.

_____ 20. Drugs that relieve tension, apprehension, and nervousness.

_____ 21. Drugs that gradually reduce psychotic symptoms.

_____ 22. A neurological disorder marked by chronic tremors and involuntary spastic movements.

_____ 23. Drugs that gradually elevate mood and help bring people out of a depression.

_____ 24. Drugs used to control mood swings in patients with bipolar mood disorder.

_____ 25. A treatment in which electric shock is used to produce cortical seizure accompanied by convulsions.

_____ 26. A medical institution specializing in the provision of inpatient care for psychological disorders.

_____ 27. Involves drawing ideas from two or more systems of therapy, instead of just committing to one system.

_____ 28. Transferring the treatment of mental illness from inpatient institutions to community-based facilities that emphasize outpatient care.

_____ 29. Occur when people's expectations lead them to experience some change, even though they receive a fake treatment.

_____ 30. Occurs when people who score extremely high or low on some trait are measured a second time, and their new scores fall closer to the mean.

_____ 31. Psychologists who specialize in the treatment of everyday adjustment problems.

_____ 32. Employs varied combinations of verbal interventions and behavior modification techniques to help clients change maladaptive patterns of thinking.

_____ 33. A technique whereby a surgical implant in the brain is connected to a pulse generator that delivers electric currents to the brain.

_____ 34. A technique that permits temporarily enhancing or depressing activity in a specific area of the brain.

_____ 35. Insight therapies that tend to focus on the adaptive, creative, and fulfilling aspects of life.

sts 3. insight therapies 4. psychoanalysi

analysis 7. interpretatic
apies 14 systematic desensitization 15 aversion therap
training 18. biome
dy
27. eclecticisn

Review of Key People

Aaron Beck
Dorthea Dix

Sigmund Freud
Carl Rogers

Joseph Wolpe

_____ 1. Developed a systematic treatment procedure, which he called psychoanalysis.

_____ 2. The developer of client-centered therapy.

_____ 3. Noted for his work the development of cognitive therapy.