Chapter 4

Methods of Treatment

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Types of helping professionals

Clinical psychologists - Have earned a doctoral degree in psychology (either a Ph.D., or Doctor of Philosophy; a Psy.D., or Doctor of Psychology; or an Ed.D., or Doctor of Education) from an accredited college or university.

Counseling psychologists - Also hold doctoral degrees in psychology and have completed graduate training preparing them for careers in college counseling centers and mental health facilities.

Psychiatrists - Have earned a medical degree (M.D.) and completed a residency program in psychiatry.

Clinical or psychiatric social workers - Have earned a master's degree in social work (M.S.W.) and use their knowledge of community agencies and organizations to help people with severe mental disorders receive the services they need.

Psychoanalysts - Typically are either psychiatrists or psychologists who have completed extensive additional training in psychoanalysis.

Counselors - Have typically earned a master's degree by completing a graduate program in a counseling field. Counselors work in many settings, including public schools, college testing and counseling centers, and hospitals and health clinics.

Psychiatric nurses - Typically are R.N.s who have completed a master's program in psychiatric nursing.
Psychotherapy

Psychotherapy - A structured form of treatment derived from a psychological framework that consists of one or more verbal interactions or treatment sessions between a client and a therapist.

Features of psychotherapy:
1. Systematic interaction.
2. Psychological principles.
4. Abnormal behavior, problem solving, and personal growth.

Nonspecific treatment factors - Factors not specific to any one form of psychotherapy, such as therapist attention and support, and creating positive expectancies of change.

Psychodynamic Therapy

Psychoanalysis - The method of psychotherapy developed by Sigmund Freud.

Psychodynamic therapy - Therapy that helps individuals gain insight into, and resolve, unconscious conflicts.

Free association - The method of verbalizing thoughts as they occur without a conscious attempt to edit or censure them.

Dream Analysis

In psychoanalytic theory, dreams have two levels of content:
1. Manifest content: the material of the dream the dreamer experiences and reports
2. Latent content: the unconscious material the dream symbolizes or represents

Transference relationship - In psychoanalysis, the client’s transfer or generalization to the analyst of feelings and attitudes the client holds toward important figures in his or her life.

Countertransference - In psychoanalysis, the transfer of feelings or attitudes that the analyst holds toward other persons in her or his life onto the client.
Dream Analysis

Modern Psychodynamic Approaches

Like Freudian psychoanalysis, the newer psychodynamic approaches aim to uncover unconscious motives and break down resistances and psychological defenses.

They focus more on the client’s present relationships and encourage the client to make adaptive behavior changes.

Many contemporary psychodynamic therapists draw more heavily on the ideas of Erik Erikson, Karen Horney, and other theorists than on Freud’s ideas.

Behavior Therapy

Behavior therapy - The therapeutic application of learning-based techniques.

Systematic desensitization - A behavior therapy technique for overcoming phobias by means of exposure to progressively more fearful stimuli while one remains deeply relaxed.

Gradual exposure - A behavior therapy technique for overcoming fears through direct exposure to increasingly fearful stimuli.
Behavior Therapy

Modeling - Behavior therapy technique for helping an individual acquire new behavior by means of having a therapist or another individual demonstrate target behavior that is then imitated by the client.

Token economy - Behavioral treatment program in which a controlled environment is constructed such that people are reinforced for desired behaviors by receiving tokens that may be exchanged for desired rewards.

Humanistic Therapy

Humanistic therapists focus on clients' subjective, conscious experiences.

Like behavior therapists, humanistic therapists also focus more on what clients are experiencing in the present—the here and now—than on the past.

The major form of humanistic therapy is person-centered therapy (also called client-centered therapy), which was developed by the psychologist Carl Rogers.

Person-Centered Therapy

Person-centered therapy - The establishment of a warm, accepting therapeutic relationship that frees clients to engage in self-exploration and achieve self-acceptance.

Person-centered therapy is nondirective.

The therapist uses reflection—the restating or paraphrasing of the client’s expressed feelings without interpreting them or passing judgment on them.
Person-Centered Therapy

Unconditional positive regard - The expression of unconditional acceptance of another person's basic worth as a person.

Empathy - The ability to understand someone's experiences and feelings from that person's point of view.

Genuineness - The ability to recognize and express one's true feelings.

Congruence - The fit between one's thoughts, behaviors, and feelings.

Cognitive Therapy

Cognitive therapy – A form of therapy that helps clients identify and correct faulty cognitions (thoughts, beliefs, and attitudes) believed to underlie their emotional problems and maladaptive behavior.

Rational Emotive Behavior Therapy

Albert Ellis believed that negative emotions such as anxiety and depression are caused by the irrational ways in which we interpret or judge negative events, not by negative events themselves.

Rational emotive behavior therapy (REBT) - A therapeutic approach that focuses on helping clients replace irrational, maladaptive beliefs with alternative, more adaptive beliefs.

Rational emotive behavior therapists help clients substitute more effective interpersonal behavior for self-defeating or maladaptive behavior.
Beck's Cognitive Therapy

Psychiatrist Aaron Beck and his colleagues developed cognitive therapy, which, like REBT, focuses on people's faulty thoughts and beliefs.

Cognitive therapists encourage clients to recognize and change errors in their thinking, called cognitive distortions, such as tendencies to magnify negative events and minimize personal accomplishments, that affect their moods and impair their behavior.

Cognitive therapists have clients record the thoughts that are prompted by upsetting events and note the connections between their thoughts and their emotional responses.

Cognitive-Behavioral Therapy

Cognitive-behavioral therapy (CBT) - A learning-based approach to therapy incorporating cognitive and behavioral techniques.

CBT attempts to integrate therapeutic techniques that help individuals make changes not only in their overt behavior but also in their underlying thoughts, beliefs, and attitudes.

CBT draws on the assumption that thinking patterns and beliefs affect behavior and that changes in these cognitions can produce desirable behavioral and emotional changes.

Eclectic Therapy

Eclectic therapy - An approach to psychotherapy that incorporates principles or techniques from various systems or theories.

An eclectic therapist might use behavior therapy techniques to help a client change specific maladaptive behaviors, for example, along with psychodynamic techniques to help the client gain insight into the childhood roots of the problem.

Some therapists are technical eclectics.

Other eclectic therapists are integrative eclectics.
Group, Family, and Couple Therapy

**Group therapy** - A form of therapy in which a group of clients meets together with a therapist.

**Family therapy** - A form of therapy in which the family, not the individual, is the unit of treatment.

**Couple therapy** - A form of therapy that focuses on resolving conflicts in distressed couples.

What are some of the advantages of group therapy over individual therapy? What are some of its disadvantages?
Family therapy.

Evaluating Methods of Psychotherapy

Reviews of scientific literature often utilize statistical technique called meta-analysis (averages results of large number of studies) to determine an overall level of effectiveness.

In most frequently cited meta-analysis of psychotherapy research, Smith and Glass (1977) analyzed results of some 375 controlled studies comparing various types of therapies (psychodynamic, behavioral, humanistic, etc.) against control groups.

Results of their analyses showed that average psychotherapy client in these studies was better off than 75% of the clients who remained untreated.
Evaluating Methods of Psychotherapy

Managed care systems - Health care delivery systems that impose limits on the number of treatment sessions they will approve for payment and the fees they will allow for reimbursement.

Multicultural Issues in Psychotherapy

Normal and abnormal behaviors occur in a context of culture and community.
Therapists need to be sensitive to cultural differences and how they affect the therapeutic process.

We must also recognize that just because a given therapy works with one population does not mean that it will necessarily work with another population.

African Americans

Cultural history of African Americans must be understood in the context of extreme racial discrimination.

To be culturally competent, therapists not only must understand the cultural traditions and languages of the groups with which they work, but also must recognize their own racial and ethnic attitudes and how these underlying attitudes affect their clinical practice.

Therapists are exposed to the same negative stereotypes about African Americans as other people in society and must recognize how these stereotypes, if left unexamined, can become destructive to the therapeutic relationships they form with African American clients.
Asian Americans

Culturally sensitive therapists not only understand the beliefs and values of other cultures but also integrate this knowledge within the therapy process.

Generally speaking, Asian cultures, including Japanese culture, value restraint in talking about oneself and one’s feelings.

Public expression of emotions is also discouraged in Asian cultures, which may inhibit Asian clients from revealing their feelings in therapy.

Hispanic Americans

Although Hispanic American subcultures differ in various respects, many share certain cultural values & beliefs, e.g., adherence to strong patriarchal (male-dominated) family structure & strong kinship ties.

Therapists need to recognize that traditional Hispanic American value of interdependency within family may conflict with values of independence & self reliance that are stressed in mainstream U.S. culture.

Therapists should also be trained to reach beyond confines of their offices to work within Hispanic American community itself, in settings that have impact on daily lives of Hispanic Americans, such as social clubs, bodegas (neighborhood groceries), and neighborhood beauty and barber shops.

Native Americans

Traditionally underserved groups, including people of color, have the greatest unmet needs for mental health treatment services.

A case in point are Native Americans, who are underserved by mental health professionals partly as the result of the cultural gap between providers and recipients.

Commenting upon this gap, Kahn (1982) suggests that if mental health professionals are to be successful in helping Native Americans, they must do so within a context that is relevant and sensitive to Native Americans’ customs, culture, and values.
Biomedical Therapies

There is a growing emphasis in American psychiatry on biomedical therapies, especially the use of psychotropic drugs (also called psychiatric drugs).

**Psychopharmacology** - The field of study that examines the effects of therapeutic or psychiatric drugs.

Psychosurgery has been all but eliminated as a form of treatment because of serious harmful effects of earlier procedures.

Drug Therapy

Different classes of psychotropic drugs are used in treating many types of psychological disorders.

But all the drugs in these classes act on neurotransmitter systems in the brain, affecting the delicate balance of chemicals that ferry nerve impulses from neuron to neuron.

The major classes of psychiatric drugs are antianxiety drugs, antipsychotic drugs, and antidepressants, as well as lithium, which is used to treat mood swings in people with bipolar disorder.

Antianxiety Drugs

**Antianxiety drugs** - Drugs that combat anxiety and reduce states of muscle tension.

**Tolerance** - Physical habituation to use of a drug.

**Rebound anxiety** - The experiencing of strong anxiety following withdrawal from a tranquilizer.
Antipsychotic Drugs

Antipsychotic drugs - Drugs used to treat schizophrenia or other psychotic disorders.

The use of neuroleptics has greatly reduced the need for more restrictive forms of treatment for severely disturbed patients, such as physical restraints and confinement in padded cells, and has lessened the need for long-term hospitalization.

Neuroleptics are not without their problems, including potential side effects such as muscular rigidity and tremors.

Antidepressants

Antidepressants - Drugs used to treat depression that affect the availability of neurotransmitters in the brain.

The third class of antidepressants, selective serotonin-reuptake inhibitors, or SSRIs, have more specific effects on serotonin function in the brain.

Drugs in this class include fluoxetine (Prozac) and sertraline (Zoloft).

Electroconvulsive Therapy

Electroconvulsive therapy (ECT) - A method of treating severe depression by administering electrical shock to the head.

After the introduction of the phenothiazines in the 1950s, the use of ECT became generally limited to the treatment of severe depression.

Although controversies concerning the use of ECT persist, increasing evidence supports its effectiveness in helping people with severe depression, including cases in which depressed people fail to respond to psychotherapy or antidepressant medication.
Electroconvulsive Therapy

Psychosurgery

Psychosurgery is yet more controversial than ECT and is rarely practiced today.

Although no longer performed today, the most common form of psychosurgery was the prefrontal lobotomy.

This procedure involved surgical severing of nerve pathways linking the thalamus to the prefrontal lobes of the brain.

Evaluation of Biological Approaches

There is little doubt that biological treatments have helped many people with severe psychological problems.

On the other hand, some forms of psychotherapy may be as effective as drug therapy in treating anxiety disorders and depression.

Although we continue to learn more about the biological foundations of abnormal behavior patterns, the interface between biology and behavior can be construed as a two-way street.
Roles for Hospitalization

**Deinstitutionalization** - The policy of shifting care for patients with severe or chronic mental health problems from inpatient facilities to community-based facilities.

**State mental hospitals** provide care to people with severe psychological problems.

**Municipal and community-based hospitals** tend to focus on short-term care for people with serious psychological problems who need a structured hospital environment to help them through a crisis.

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The Community Mental Health Center

**Community mental health centers (CMHCs)** perform many functions in the effort to reduce the need for hospitalization of new patients and rehospitalization of formerly hospitalized patients.

A primary function of the CMHC is to help discharged mental patients adjust to the community by providing continuing care and closely monitoring their progress.

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The mental health intervention spectrum for mental disorders

![The mental health intervention spectrum for mental disorders](image.png)

FIGURE 6.2 The mental health intervention spectrum for mental disorders.
The Spectrum of Prevention

**Primary prevention** - Efforts designed to prevent problems from arising.

**Secondary prevention** - Efforts to ameliorate existing problems at an early stage.

Evidence supports the benefits of prevention interventions in the following:

- Reducing depression in at-risk teens.
- Preventing problems in children of divorce.
- Reducing risks of eating disorder in college-age women.
- Reducing risk of HIV transmission in at-risk population groups.

Ethnic Group Differences in Use of Mental Health Services

A report by the U.S. Surgeon General concluded that members of racial and ethnic minority groups typically have less access to mental health care and receive lower quality care than do other Americans.

A major reason for this disparity is that a disproportionate number of minority group members remain uninsured or underinsured, leaving them unable to afford mental health care.

Barriers that exist for ethnic minorities include the following:

1. Cultural mistrust.
2. Institutional barriers.
3. Cultural barriers.
4. Language barriers.
5. Economic and accessibility barriers.
**Racial Stereotyping and the Mental Health System**

If you are African American, you are more likely to be admitted to a mental hospital and more likely to be involuntarily committed than if you are White.

You are also more likely to be diagnosed with schizophrenia.

Ethnic stereotyping by mental health professionals may also contribute to an overdiagnosis of severe psychological problems requiring hospitalization.

**Evaluation of Deinstitutionalization**

Though the community mental health movement has had some successes, a great many patients with severe and persistent mental health problems fail to receive the range of mental health and social services they need to adjust to life in the community.

One of the major challenges facing the community mental system is the problem of psychiatric homelessness.

Another difficulty in meeting the challenge of psychiatric homelessness is that homeless people with severe psychological problems typically do not seek out mental health services.

**QUESTIONS?**