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| UNIT 13: TREATMENT OF PSYCHOLOGICAL DISORDERS |

***WHAT IS THERAPY***  p.606

Core Concept: Therapy for psychological disorders takes a variety if forms, but all involve some relationship focused on improving a person’s mental, behavioral, or social functioning.

**Therapy:**

**Biomedical Therapies :**

**Psychological Therapies:**

***Most treatments…***

1. ***Identify the problem***
2. ***Identify the cause of the problem***
3. ***Make a prognosis (prediction)***
4. ***Decide upon treatment***

***How do psychologists treat psychological disorders?***

Core Concept: Psychologists employ two main forms of treatment

 1. Insight therapies: focused on developing understanding of the problem

 2. Behavior Therapies: focused on changing behavior through conditioning

**INSIGHT THERAPIES**

Help clients gain an ‘insight’ into their problems AKA: talk therapies

--Clients communicate and verbalize their emotions and motives to help **understand their problems**

**Freudian Psychoanalysis**: form of psychodynamic therapy …

goal is to **release conflicts and memories form the unconscious**

 Accomplished through analysis of transference

 **Analysis of transference:**

Based on the assumption that this relationship mirrors the unresolved conflicts in the client’s past

***Traditional Approach…the Old Method***

*Free Association*

*Hypnosis*

*Interpretation of revealed ideas that reflect deep seated feelings and conflicts*

*Dream Analysis*

***Modern Approach:***

*Briefer…less intense*

*Focus on revealing unconscious material*

*Client/therapist sit face to face…no client on the couch*

*Usually more focus on ego…less on id*

*Therapist is directive*

**NEO-FREUDIAN PSYCHODYNAMIC THERAPIES**: Emphasize the client’s conscious motivation and the influence of past childhood

--Relationships are more important that in traditional psychoanalysis

**HUMANISTIC THERAPIES**

**HUMANISTIC THEORIES:** Treatments based on the assumption that people have the tendency for positive

 growth and self-actualization, ……..

 ….which may have been blocked by an unhealthy environment that can include negative self-evaluation

 and criticism from others

**Client Centered Therapy**:

 Humanistic approach developed by Carl Rogers

 Focuses on an individual’s tendency for **healthy psychological growth through self-actualization**

 Main techniques is *reflection of feeling*, as are empathy, genuineness, unconditional positive regard

**Reflection of Feeling:**

 **Group Therapy**:

 *Advantages: economical, support of group, non-threatening atmosphere, provides more information and*

 *life experiences for clients to draw upon.*

 **Self-Help Support Groups:** type of group therapy Example: Alcoholics Anonymous

*Gestalt Therapy*

 *Originated by Fritz Peris*

 *Approach assumes people disown parts of themselves and wear ‘social masks’*

 *Goal is to integrate conflicting parts of their personality*

 *Highly directive*

 *Found not to be very effective*

**BEHAVIOR THERAPIES**

**Behavior Therapy/Modification:**  Any therapy based upon behavioral learning (especially Classical and Operant)

 --Including….

 **Classical Conditioning Therapies**

Systemic Desensitization:

Exposure Therapy:

Aversion Therapy:

**Operant Conditioning Therapies**

Contingency Management:

Token Economy:

Participant Modeling*:*

**Cognitive-Behavioral Therapy:**

**Cognitive Therapy:** Emphasizes rational thinking as the key to treating mental disorder

The client is capable of becoming aware of his or her own thoughts and of changing them

Cognitive therapy for depression involves

Evaluating evidence

Situational factors

Alternative solutions

Rational-Emotive Behavior Therapy: (REBT) Albert Ellis’s brand of therapy

 --Based on idea that irrational thoughts and behaviors are the cause of mental disorders

 --Focuses on beliefs about the event as well as the event…many people have irrational beliefs

 Ex: the irrational belief that we must be highly competent, achieving, successful, etc…

**DIFFERENT THERAPEUTIC TECHNIQUES ARE EFFECTIVE FOR DIFFERENT DISORDERS**

**Behavior Therapies:** specific phobias, bedwetting, autism, alcoholism

**Cognitive –Behavioral Therapies**: chronic pain, anorexia, bulimia, agoraphobia

**Insight Therapies:** relationship/marriage problems

Depression is best treated with a variety of therapies

**Active Listener:**

**How Effective Is Therapy?**

--No clear answer

--Eysenck claims two-thirds of clients would improve without therapy, though studies show he overestimated the

 improvement rate in his no-therapy control group.

--According to studies, some therapy is better than none

--Problems is which therapy is best for each disorder

**How is the Biomedical Approach used to treat psychological disorders?**

Core Concept: Biomedical therapies seek to treat psychological disorders by ..

 1. changing the brain’s chemistry with **drugs**

 2. changing the brain’s circuitry with **surgery**

 3. changing the brain’s patterns of activity with **pulses of electricity** or **powerful magnetic fields**

**PSYCHOPHARMACOLOGY**

**Psychopharmacology:**

 --Ensures that clients are more receptive to talk therapy

 --Emerged from the medical model of treatment

**1. Antipsychotic Drugs:** Medicines that diminish psychotic symptoms…agitation, delusions, hallucinations

 -- Diminish psychotic symptoms usually by their effect on dopamine pathways in the brain

 --Example: Clozril

 DOWNSIDE: *Tardive Dyskinesia*

 **Tardive Dyskinesia:**

**2. Antidepressant Drugs:** Medicines usually used to treat depression,,,

 Also those with eating disorders, panic attacks, obsessive-compulsive disorders, social phobias

 --Effect the serotonin and/or norepinepherine pathways in the brain

 --Examples: Prozac.

 --May take weeks to get to therapeutic levels

**Drugs used to treat depression usually fall in TWO types: MAO’s and SSRIs**

1. MAOs: monoamine oxidase inhibitors

 Monoamine oxidase…inhibitors that block the activity of an enzyme that breaks down serotonin

2. SSRIs: selective serotonin reuptake initiators

 Lithium Carbonate: mood stabilizer --Effective for bipolar disorder

**3. Anti-Anxiety Drugs:** Drugs used to diminish feelings of anxiety

 --Include barbiturates and benzodiazepines

 Stimulants:

 **--But are found to suppress activity levels in clients with ADHD**

**MEDICAL THERAPIES**

**Psychosurgery:**

***Prefrontal Lobotomy:*** *largely discontinued in U.S….firs brought to U.S. in 1930’s*

 *Pick like instrument severs the nerve pathways that link the prefrontal lobes to the thalamus*

**Electroconvulsion Therapy: (**ECT) Application of electric current to the head, producing a generalized seizure

 --Primarily used to treat depression

 --Sometimes called ‘shock treatment’

 --Side Effects: memory problems

**Transcranial Magnetic Stimulation:** (TMS) Involves magnetic stimulation of specific regions of the brain

 --Newer type of treatment

 --Does not produce a seizure

**Therapeutic Community:** Maxwell Jones’s term for a program of treating mental disorders by

 making the institutional environment *supportive* and *humane* for clients

**Community Mental Health Movement:** movement to deinstitutionalize clients

**Deinstitutionalize:**