PY 728 B/C - Empirically Validated (Supported) Therapies

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Course Goals and Description

This course provides a foundation in a way of thinking and an outline of major empirically validated intervention methods. Included are cognitive-behavior therapies, interpersonal therapy. The course has been defined as a lecture coverage and not an applied practicum, but the coverage of various intervention methods will give you some understanding of practice through assignments/exercises. One assignment will also introduce you to the literature on therapy for specific disorders. The major goal of the course is a basic familiarity with empirically validated approaches to assessment and treatment. Some of you may see benefits to the degree that you will wish further expertise; some of you may feel your commitment is to other approaches; some of you may decide on an eclectic adoption of various approaches individualized for different circumstances. This course will provide you with a familiarity with certain empirically validated interventions to permit you to decide for yourself. For those with strong undergraduate coursework in behavior therapy, content will provide you with a way of reviewing what you learned, plus assignments/exercises to strengthen what you know. Along with the focus on the treatment techniques will be exposure to those techniques appropriate for certain disorders, such as anxiety disorders, and depression (two of the most frequent disorders).

Philosophy of Class Experience

Because the class is content-oriented, I will be lecturing to assure certain content has been provided to all of you equally beyond the readings. Yet, I believe the most stimulating and exciting class is one where there is active thinking and discussion between you and me, <u>especially</u> as this reflects your considering the implications for work you are doing, <u>cases</u> you are seeing, your own professional/personal experiences, etc. Since I am old enough to personally know some of the major theorists (Wolpe, Bandura, Ellis, Beck, Levis, Linehan, etc.), I will try to say a little about them as real people to personalize the content.

Grading

As graduate level students, it is my expectation that you are all capable of at least a B but I am <u>expecting</u> you will reach an A by the end of the course. The tasks will give you the opportunity to accomplish the A (and I truly want you to) or to move downward (and I would be disappointed if you did). Remember that a B is an entirely adequate grade that says you 'done fine', while an A says you have shown mastery and competence at a high level and consistently across tasks.

There are basically four tasks in pursuit of our goal which will enter into grading:

Task 1: Class participation (15% of grade). One presumption is that being actively involved is an important part of the learning experience, which reflects your having prepared, level of thinking, etc.

Task 2: Review paper of behavior therapy for specific disorder (25% of grade). You should pick a specific disorder, such as Panic Disorder, which you have some interest in; go to journals within the last 5 years but you must include one reference from the most recent year of publication; read reports that meet criteria as reasonable research design (i.e., reasonable sample size, decent control group, etc.); cover at minimum ten articles; summarize these in a brief, evaluative review-type paper that leads to some conclusions about the efficacy or non-efficacy or ways of using empirically validated therapy(ies) for that disorder. Length limited to 8-10 double spaced typewritten pages.

Since the literature search should be of some benefit to you in your expanding your knowledge, I would like you to have some flexibility in choice of topic. The topics can be: studies on a single empirically supported therapy (EST) technique for a single disorder, or studies on different EST techniques for a single disorder showing the value of each, or more general studies on EST technique(s) for specific populations (e.g., women, elderly, ethnic minorities but excluding children, developmentally disabled) with a focus on how EST is advantageous for these groups or how EST can be revised to be particularly applicable to such populations, or studies on EST technique(s) for physical disorders (e.g., cancer), or studies comparing EST technique(s) for a single disorder against other treatments (other psychotherapies or chemotherapies).

The best strategy is to select 1-2 possible topics temporarily, scan the table of contents of journals, read a few articles to see whether your interest is captured, then finalize your topic. You can run your decision by me if you wish.

Task 3: Self-mod Proposal (20% of grade). As part of the assignment during our discussion of operant and contingency contracting, you will be assigned designing a self-modification proposal. This requires statement of/definition of target behavior, method for measuring baseline and change, defining

contingency, program of change, etc. The proposal must be serious and real since you will be asked not only to implement it but be ready to be interviewed regarding details during class as part of a demonstration exercise. You should also implement your program for first-hand experience on how well you are applying the principles, what you might have missed, etc. A final written report will be required.

Task 5: Exam (40% of grade). The exam will be essay and cover concepts, conceptual issues, assessment, intervention, theoretical foundation, etc. Sample questions: "You have the following case which failed in leading to positive behavioral change in acting-out behavior (case is described). From contingency contacting principles, what principles were not followed properly that might explain the failure"; "You have the following statement from a depressed patient: briefly design an approach based on interpersonal therapy and another based on cognitive therapy."

Text: Kanfer & Goldstein, Helping People Change.

Readings: A bibliography is attached from which readings will be assigned.

Class Topics

Date	Topic	Reading
Jan. 27	Intro to EST, Assessment	Chap. 1 and 2
Feb. 3	Anxiety, Fear Reduction	Chap. 5
Feb. 10	Anxiety Reduction (Cont.)	
Feb. 17	Cognitive Therapy (Depression)	Chap. 7 & 9
Feb. 24	Cognitive Therapy (Cont.)	
Mar. 3	Interpersonal Psychotherapy (Depression	on)
Mar. 10	Spring Break	
Mar. 17	Modeling	Chap. 3
	Operant/Contingency Contracting	Chap. 4 & 8
Mar. 24	Contingency Contracting (Cont.)	
Mar. 31	Aversive methods	Chap. 6
Apr. 7	Dialectical B.T. (Personality Disorder)	
Apr. 14	Dialectical B.T. (Cont.)	
Apr. 21	Behavioral Marital	
Apr. 28	Behavioral Marital (Cont.)	
May 5	Sport Psychology Applications	

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Kozak, M. J., & Foa, E. B. (1996). Obsessive-compulsive disorder. In V. Van Hasselt, & M. Hersen (Eds). <u>Sourcebook of psychological treatment manuals for adult disorders</u>. New York: Plenum Press.

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