Indications and Contraindications in therapy. Types of Psychotherapy

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The Therapeutic Relationship

- The therapeutic relationship is an important component of effective therapy or counselling

- The therapist as a person is a key part of the effectiveness of therapeutic treatments

- Research shows that both the therapy relationship and the therapy used contribute to treatment outcome

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The Effective Psychotherapist

- The most important instrument you have is YOU (therapist)

- Be authentic
  - The stereotyped, professional role can be shed
  - If you hide behind your role the client will also hide

- Be a therapeutic person and be clear about who you are
  - Be willing to grow, to risk, to care, and to be involved

Transparency

The Therapist's Values

- Be aware of *value imposition*
  - How <u>your</u> values influence your interventions
  - How <u>your</u> values may influence your client's experiences in therapy

- Recognize that you are not value-neutral

- Your job is to <u>assist</u> clients in finding answers that are most congruent with their own values

- Find ways to manage value conflicts between you and your clients

Begin therapy by exploring the <u>client's</u> goals

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Multicultural Counseling or Therapy

- Become aware of your biases and values

- Become aware of your own cultural norms and expectations

- Attempt to understand the world from your client's vantage point

- Gain a knowledge of the dynamics of oppression, racism, discrimination, and stereotyping

Transparency

Professional Ethics

- Ethics codes are a fundamental component of effective counseling:
  - Guidelines that outline professional standards of behavior and practice
  - Codes do not make decisions for counselors
  - Counselors must interpret and apply ethical codes to their decision-making

- Types of ethics to consider:
  - Mandatory Ethics: professional requirements that are put in place legally to keep professionals out of legal trouble.
  - Aspirational ethics: understanding of the purpose of the ethical statues and living by these ethical standards as a way of life
  - Positive Ethics

Informed Consent

- Clients need enough information about the counseling process to be able to make informed choices

- Educate clients about their rights and responsibilities

- Provide Informed Consent
  - Therapy Procedures
  - Risks/Benefits and Alternatives
  - Right to withdraw from treatment
  - Costs of treatment
  - Supervision
  - Privileged communication
  - Limits of Confidentiality

Limits of Confidentiality

- Confidentiality is essential but not absolute
  - Exceptions:
    - Duty to Warn (Tarasoff Case)
      - The client poses a danger to self or others
    - A client under the age of 16 is the victim of abuse
    - A dependant adult or older adult is the victim of abuse
    - The client needs to be hospitalized
    - The information is made an issue in a court action
    - The client requests a release of record

Transparency

Multicultural Issues

- *Biases* are reflected when we:
  - Neglect social and community factors to focus unduly on individualism
  - Assess clients with instruments that have not been normed on the population they represent
  - Judge as psychopathological – behaviors, beliefs, or experiences that are normal for the client's culture
  - Strictly adhere to Western counseling theories without considering its applicability to the client's diverse cultural background

Transparency

Assessment and Diagnosis

- <u>Assessment</u> is an ongoing process designed to help the counselor evaluate key elements of a client's psychological functioning
  - Assessment practices are influenced by the therapist's theoretical orientation
  - Requires cultural sensitivity
  - Can be helpful in treatment planning
- <u>Diagnosis</u> is the process of identifying pattern of symptoms which fit the criteria for a specific mental disorder defined in the DSM-IV-TR
  - Requires cultural sensitivity
  - Counselors debate its utility in understanding the client's subjective world
  - Can be helpful in treatment planning

Psychoanalytic or Psychodynamic Therapy

Transparency

The Structure of Personality

- THE ID—The Demanding Child
  - Ruled by the pleasure principle

- THE EGO—The Traffic Cop
  - Ruled by the reality principle

- THE SUPEREGO—The Judge
  - Ruled by the moral principle

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Conscious and Unconscious

Conscious:
What's on the surface
i.e. logic, reality

Unconscious:
*What lies deep,
below the surface*
i.e. drives, instincts

Transparency

Theory and Practice of Counseling and Psychotherapy - Chapter 4 (2)

The Unconscious

- Clinical evidence for postulating the unconscious:
  - Dreams
  - Slips of the tongue
  - Posthypnotic suggestions
  - Material derived from free-association
  - Material derived from projective techniques
  - Symbolic content of psychotic symptoms
    - NOTE: consciousness is only a thin slice of the total mind

Transparency

Anxiety

- Feeling of dread resulting from repressed feelings, memories and desires
  - Develops out of conflict among the id, ego and superego to control psychic energy

- Reality Anxiety

- Neurotic Anxiety

- Moral Anxiety

Transparency

Ego-Defense Mechanisms

- Ego-defense mechanisms:
  - Are normal behaviors which operate on an unconscious level and tend to deny or distort reality
  - Help the individual cope with anxiety and prevent the ego from being overwhelmed
  - Have adaptive value if they do not become a style of life to avoid facing reality

Transparency

The Development of Personality

- ORAL STAGE   First year
  - Related to later mistrust and rejection issues

- ANAL STAGE   Ages 1-3
  - Related to later personal power issues

- PHALLIC STAGE   Ages 3-6
  - Related to later sexual attitudes

- LATENCY STAGE   Ages 6-12
  - A time of socialization

- GENITAL STAGE   Ages 12-60
  - Sexual energies are invested in life

Transparency

Transference and Countertransference

- Transference
  - The client reacts to the therapist as he did to an earlier significant other
    - This allows the client to experience feelings that would otherwise be inaccessible
    - ANALYSIS OF TRANSFERENCE — allows the client to achieve insight into the influence of the past

- Countertransference
  - The reaction of the therapist toward the client that may interfere with objectivity
    - Not always detrimental to therapeutic goals; can provide important means of understanding your client's world
    - Countertransference reactions must be monitored so that they are used to promote understanding of the client and the therapeutic process.

Psychoanalytic Techniques

- Free Association
  - Client reports immediately without censoring any feelings or thoughts

- Interpretation
  - Therapist points out, explains, and teaches the meanings of whatever is revealed

- Dream Analysis
  - Therapist uses the "royal road to the unconscious" to bring unconscious material to light
  - Latent content
  - Manifest content

Transparency

Resistance

- ## Resistance
  - Anything that works against the progress of therapy and prevents the production of unconscious material

- ## Analysis of Resistance
  - Helps the client to see that canceling appointments, fleeing from therapy prematurely, etc., are ways of defending against anxiety
    - These acts interfere with the ability to accept changes which could lead to a more satisfying life

Transparency

Limitations of Classical Analysis

- This approach may not be appropriate for all cultures or socioeconomic groups

- Deterministic focus does not emphasize current maladaptive behaviors

- Minimizes role of the environment

- Requires subjective interpretation

- Relies heavily on client fantasy

- Lengthy treatment may not be practical or affordable for many clients

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Client-Centred Psychotherapy

Person-Centered View of Human Nature

- At their core, humans are trustworthy and positive

- Humans are capable of making changes and living productive, effective lives

- Humans innately gravitate toward self-actualization
  - Actualizing tendency

- Given the right growth-fostering conditions, individuals strive to move forward and fulfill their creative nature

Person-Centered Therapy
(A reaction against the directive and psychoanalytic approaches)

- Challenges:
  - The assumption that "the counselor knows best"
  - The validity of advice, suggestion, persuasion, teaching, diagnosis, and interpretation
  - The belief that clients cannot understand and resolve their own problems <u>without</u> direct help
  - The focus on problems over persons

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Person-Centered Therapy

- Emphasizes:
  - Therapy as a journey shared by two fallible people
  - The person's innate striving for self-actualization
  - The personal characteristics of the therapist and the quality of the therapeutic relationship
  - The counselor's creation of a permissive, "growth-promoting" climate
  - People are capable of self-directed growth if involved in a therapeutic relationship

Transparency

Therapy is a Growth-Promoting Climate

- Congruence
  - Genuineness or realness in the therapy session
  - Therapist's behaviors match his or her words

- Unconditional positive regard
  - Acceptance and genuine caring about the client as a valuable person
  - Accepting clients as they presently are
  - Therapist need not approve of all client behavior

- Accurate empathic understanding
  - The ability to deeply grasp the client's subjective world
  - Helper attitudes are more important than knowledge
    - The therapist need not experience the situation to develop an understanding of it from the client's perspective

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Six Conditions
(necessary and sufficient for personality changes to occur)

- 1. Two persons are in psychological contact
- 2. The first, the client, is experiencing incongruence
- 3. The second person, the therapist, is congruent or integrated in the relationship
- 4. The therapist experiences unconditional positive regard or real caring for the client
- 5. The therapist experiences empathy for the client's internal frame of reference and endeavors to communicate this to the client
- 6. The communication to the client is, to a minimal degree, achieved

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The Therapist

- Focuses on the <u>quality</u> of the therapeutic relationship

- Provides a supportive therapeutic environment in which the <u>client</u> is the agent of change and healing

- Serves as a <u>model</u> of a human being struggling toward greater realness

- Is <u>genuine</u>, integrated, and authentic, without a false front

- Can <u>openly express</u> feelings and attitudes that are present in the relationship with the client

- Is invested in developing his or her own life experiences to deepen self- knowledge and move toward self-actualization

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Limitations of the Person-Centered Approach

- <u>Cultural considerations</u>
  - Some clients may prefer a more directive, structured treatment
  - Individuals accustomed to indirect communication may not be comfortable with direct expression of empathy or creativity
  - Individuals from collectivistic cultures may disagree with the emphasis on internal locus of control

- Does not focus on the use of specific techniques, making this treatment difficult to standardize

- Beginning therapists may find it difficult to provide both support and challenges to clients

- Limits of the therapist as a person may interfere with developing a genuine therapeutic relationship

Transparency

Behavior Therapy

Transparency

Behavior Therapy

- A set of *clinical procedures* relying on experimental findings of psychological research
  - Based on principles of learning that are systematically applied
    - Treatment goals are specific and measurable
  - Focusing on the client's current problems
    - To help people change maladaptive to adaptive behaviors
  - The therapy is largely educational - teaching clients skills of self-management

Transparency

Exposure Therapies

- *In Vivo* Desensitization
  - Brief and graduated exposure to an actual fear situation or event

- Flooding
  - Prolonged & intensive *in vivo* or imaginal exposure to stimuli that evoke high levels of anxiety, without the opportunity to avoid them

- Eye Movement Desensitization and Reprocessing (EMDR)
  - An exposure-based therapy that involves imaginal flooding, cognitive restructuring, and the use of rhythmic eye movements and other bilateral stimulation to treat traumatic stress disorders and fearful memories of clients

**Transparency**

Four Aspects of Behavior Therapy

- 1. Classical Conditioning
  - In classical conditioning certain respondent behaviors, such as knee jerks and salivation, are elicited from a passive organism

- 2. Operant Conditioning
  - Focuses on actions that operate on the environment to produce consequences
    - If the environmental change brought about by the behavior is reinforcing, the chances are strengthened that the behavior will occur again. If the environmental changes produce no reinforcement, the chances are lessened that the behavior will recur

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Four Aspects of Behavior Therapy

- 3. Social-Learning Approach
  - Gives prominence to the reciprocal interactions between an individual's behavior and the environment

- 4. Cognitive Behavior Therapy
  - Emphasizes cognitive processes and private events (such as a client's self-talk) as mediators of behavior change

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Functional Assessment of Behavior

- A-B-C model
  - Antecedent(s)
  - Behavior(s)
  - Consequence(s)

Antecedent → Behavior → Consequence

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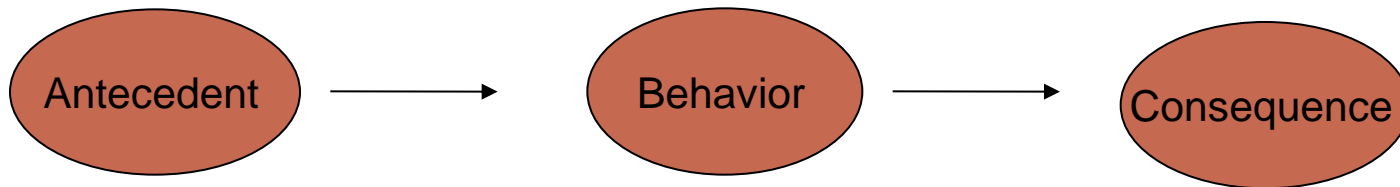
Therapeutic Techniques

- Relaxation Training – to cope with stress

- Systematic Desensitization – for anxiety and avoidance reactions

- Modeling – observational learning

- Assertion Training– learning to express one's self

- Social Skills Training– learning to correct deficits in interpersonal skills

- Self-Management Programs – "giving psychology away"

Therapeutic Techniques

- **Multimodal Therapy –** a technical eclecticism

- **Applied Behavior Analysis—** training new behaviors
  - Particularly effective in working with developmentally delayed individuals

- **Dialectical Behavior Therapy--** learning emotional regulation and mindfulness
  - Designed for the treatment of Borderline Personality Disorder

- **Mindfulness-Based Stress Reduction Therapy –** meditation and yoga

- **Acceptance and Commitment Therapy -** learning acceptance and non-judgment of thoughts and feelings as they occur

Limitations of Behavior Therapy

- Heavy focus on behavioral change may detract from client's experience of emotions

- Some counselors believe the therapist's role as a teacher deemphasizes the important relational factors in the client-therapist relationship

- Behavior therapy does not place emphasis on insight

- Behavior therapy tends to focus on symptoms rather than underlying causes of maladaptive behaviors

- There is potential for the therapist to manipulate the client using this approach

- Some clients may find the directive approach imposing or too mechanistic

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Family/Systemic Therapy

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The Family Systems Perspective

- Individuals– are best understood through assessing the interactions within an entire family

- Symptoms– are viewed as an expression of a dysfunction within a family

- Problematic behaviors–
  - Serve a purpose for the family
  - Are a function of the family's inability to operate productively
  - Are symptomatic patterns handed down across generations

- A family– is an interactional unit and a change in one member effects all members

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Transparency

Structural Family Therapy Treatment Goals

- Reduce symptoms of dysfunction

- Bring about structural change by:
  - Modifying the family's transactional rules
  - Developing more appropriate boundaries
  - Creation of an effective hierarchical structure
    - It is assumed that faulty family structures have:
      - Boundaries that are rigid or diffuse
      - Subsystems that have inappropriate tasks and functions

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Strategic Family Therapy Treatment Goals

- Resolve presenting problems by focusing on behavioral sequences

- Get people to behave differently

- Shift the family organization so that the presenting problem is no longer functional

- Move the family toward the appropriate stage of family development
  - Problems often arise during the transition from one developmental stage to the next

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Limitations of the Family Systems Approach

- An overemphasis on the system may result in the unique characteristics of the individual family members being overlooked

- Concern with the well-being and function of the system may overshadow the therapist's view of the needs and functioning of the individuals in the system

- Practitioners are cautioned not to assume that Western models of family are universal and must be culturally competent

- Therapists with a Westernized view of the family may inadvertently overlook the importance of extended family when working with families from other cultures

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