CHAPTER OVERVIEW

Chapter 17 discusses the major psychotherapies and biomedical therapies for maladaptive behaviors. The various psychotherapies all derive from the personality theories discussed earlier, namely, the psychoanalytic, humanistic, behavioral, and cognitive theories. The chapter groups the therapies by perspective but also emphasizes the common threads that run through them. In evaluating the therapies, the chapter points out that, although people who are untreated often improve, those receiving psychotherapy tend to improve somewhat more, regardless of the type of therapy they receive. This section includes a discussion of several popular alternative therapies.

The biomedical therapies discussed are drug therapies, electroconvulsive therapy, and psychosurgery, which is seldom used. By far the most important of these, drug therapies are being used in the treatment of psychotic, anxiety, and mood disorders.

Because the origins of problems often lie beyond the individual, the chapter concludes with approaches that aim at preventing psychological disorders by focusing on the family or on the larger social environment as possible contributors to psychological disorders.

NOTE: Answer guidelines for all Chapter 17 questions begin on page 453.

CHAPTER REVIEW

First, skim each section, noting headings and boldface items. After you have read the section, review each objective by answering the fill-in and essay-type questions that follow it. As you proceed, evaluate your performance by consulting the answers beginning on page 453. Do not continue with the next section until you understand each answer. If you need to, review or reread the section in the textbook before continuing.

Introducing Therapy (pp. 685–686)

David Myers at times uses idioms that are unfamiliar to some readers. If you do not know the meaning of any of the following words or expressions in the context in which they appear in the introduction, refer to page 460 for an explanation: cracked the genetic code; gawk.

Objective 1: Discuss some ways that psychotherapy, biomedical therapy, and an eclectic approach to therapy differ.

1. Mental health therapies are classified as either ____________ therapies or ____________ therapies.

2. Psychological therapy is more commonly called ____________. This type of therapy is appropriate for disorders that are ____________.

3. Biomedical therapies include the use of ____________ and medical procedures that act directly on the patient's ____________.

4. Some therapists, particularly those who adopt a biopsychosocial view, blend several psychotherapy techniques and so are said to take an ____________ approach. Closely related to this approach is ____________, which attempts to combine methods into a single, coherent system.
The Psychological Therapies (pp. 686–699)

If you do not know the meaning of any of the following words, phrases, or expressions in the context in which they appear in this section, refer to pages 460–461 for an explanation: fueled... residue; aim to boost; knocks the props out from under you; lore; drinks laced with a drug; aggressive and self-abusive behaviors; colors our feelings; catastrophizing.

**Objective 2:** Define psychoanalysis, and discuss the aims of this form of therapy.

1. The goal of Freud’s psychoanalysis, which is based on his personality theory, is to help the patient gain ________________.
2. Freud assumed that many psychological problems originate in childhood impulses and conflicts that have been ________________.
3. Psychoanalysts attempt to bring ________________ feelings into ________________ awareness where they can be dealt with.

**Objective 3:** Describe some of the methods used in psychoanalysis, and list some criticisms of this form of therapy.

4. Freud’s technique in which a patient says whatever comes to mind is called ________________.
5. When, in the course of therapy, a person omits shameful or embarrassing material, ________________ is occurring. Insight is facilitated by the analyst’s ________________ of the meaning of such omissions, of dreams, and of other information revealed during therapy sessions.
6. Freud referred to the hidden meaning of a dream as its ________________.
7. When strong feelings, similar to those experienced in other important relationships, are developed toward the therapist, ________________ has occurred.
8. Critics point out that psychoanalysts’ interpretations are hard to ________________ and that therapy takes a long time and is very ________________.

**Objective 4:** Contrast psychodynamic therapy and interpersonal therapy with traditional psychoanalysis.

9. Therapists who are influenced by Freud’s psychoanalysis but who talk to the patient face to face are ________________ therapists. In addition, they work with patients only ________________ (how long?) and for only a few weeks or months.
10. A brief alternative to psychodynamic therapy that has proven effective with ________________ patients is ________________.
11. While this approach aims to help people gain ________________ into their difficulties, it focuses on ________________ rather than on past hurts.

**Objective 5:** Identify the basis characteristics of the humanistic therapies, and describe the specific goals and techniques of Carl Rogers’ client-centered therapy.

12. Humanistic therapies attempt to help people meet their potential for ________________.

List several ways that humanistic therapy differs from psychoanalysis.

13. The humanistic therapy based on Rogers’ theory is called ________________-

______________ therapy, which is described as ________________ therapy because the therapist ________________ (interprets/does not interpret) the person’s problems.
14. In order to promote growth in clients, Rogerian therapists exhibit ____________, ____________, and ____________. 

15. Rogers’ technique of restating and clarifying what a person is saying is called ____________. Given a nonjudgmental environment that provides ____________, patients are better able to accept themselves as they are and to feel valued and whole.

16. Three tips for listening more actively in your own relationships are to ____________, ____________, and ____________.

Objective 6: Explain how the basic assumption of behavior therapy differs from those of traditional psychoanalytic and humanistic therapies.

17. Behavior therapy applies principles of ____________ to eliminate troubling behaviors. Contrast the assumptions of the behavior therapies with those of psychoanalysis and humanistic therapy.

19. The most widely used techniques of behavior therapy are the ____________. The technique of systematic desensitization has been most fully developed by the therapist ____________. The assumption behind this technique is that one cannot simultaneously be ____________ and relaxed.

20. The first step in systematic desensitization is the construction of a ____________ of anxiety-arousing stimuli. The second step involves training in ____________. In the final step, the person is trained to associate the ____________ state with the ____________-arousing stimuli.

21. For those who are unable to visually imagine an anxiety-arousing situation, or too afraid or embarrassed to do so, ____________ therapy offers a promising alternative.

22. In aversive conditioning, the therapist attempts to substitute a ____________ (positive/negative) response for one that is currently ____________ (positive/negative). In this technique, a person’s unwanted behaviors become associated with ____________ feelings.

Objective 7: Define counterconditioning, and describe the techniques used in exposure therapies and aversive conditioning.

18. One cluster of behavior therapies is based on the principles of ____________, ____________, as developed in Pavlov’s experiments. This technique, in which a new, incompatible response is substituted for a maladaptive one, is called ____________. Two examples of this technique are ____________. 

23. Reinforcing desired behaviors and withholding reinforcement for undesired behaviors are key aspects of ____________. 

24. Therapies that influence behavior by controlling its consequences are based on principles of ____________ conditioning. One application of this form of therapy to institutional
settings is the ____________________________, in which desired behaviors are rewarded.

State two criticisms of behavior modification.

State some responses of proponents of behavior modification.

**Objective 9:** Contrast cognitive therapy and cognitive-behavior therapy, and give some examples of cognitive therapy for depression.

**25.** Therapists who teach people new, more constructive ways of thinking are using ___________________________ therapy.

**26.** One variety of cognitive therapy attempts to reverse the ___________________________ beliefs often associated with ___________________________ by helping clients see their irrationalities. This therapy was developed by ___________________________

**27.** A form of cognitive therapy developed by Adele Rabin builds on the finding that depressed people ___________________________ (do/do not) exhibit the self-serving bias.

**28.** Training people to restructure their thinking in stressful situations is the goal of ___________________________ training. Students trained to ___________________________ their negative thoughts are less likely to experience future depression.

**29.** Treatment that combines an attack on negative thinking with efforts to modify behavior is known as ___________________________ therapy.

**Objective 10:** Discuss the rationale and benefits of group therapy, including family therapy.

List several advantages of group therapy.

**30.** The type of group interaction that focuses on the fact that we live and grow in relation to others is ___________________________.

**31.** In this type of group, therapists focus on improving ___________________________ within the family and helping family members to discover new ways of preventing or resolving ___________________________.

**32.** Two common types of group therapy are ___________________________ and ___________________________ groups for the addicted, the divorced, and those simply looking for fellowship and growth, for example. Most support groups focus on ___________________________ and ___________________________ illnesses.

**Evaluating Psychotherapies (pp. 700–710)**

If you do not know the meaning of any of the following words, phrases, or expressions in the context in which they appear in the text, refer to pages 461–462 for an explanation: *Hang in there; testimonials; ebb and flow of events; clear-cut; fertile soil for psychotherapies; harness; empathy are hallmarks.*

**1.** In contrast to earlier times, most therapy today ___________________________ (is/is not) provided by psychiatrists.
Objective 11: Explain why clients tend to overestimate the effectiveness of psychotherapy.

2. A majority of psychotherapy clients express satisfaction (satisfaction/dissatisfaction) with their therapy.

Give three reasons why client testimonials are not persuasive evidence for psychotherapy’s effectiveness.

3. A long-term study of 500 Massachusetts boys found that those who received intensive counseling (had/did not have) significantly fewer problems than a control group. Research has also shown that “Scared Straight” programs (are/are not) effective in reducing criminal offenses committed by delinquent boys.

Objective 12: Give some reasons why clinicians tend to overestimate the effectiveness of psychotherapy, and describe two phenomena that contribute to clients’ and clinicians’ misperceptions in this area.

4. Clinicians tend to overestimate (overestimate/underestimate) the effectiveness of psychotherapy.

5. One reason clinicians’ perceptions of the effectiveness of psychotherapy are inaccurate is that clients justify entering therapy by emphasizing their (clear/no clear) differences, that the type of therapy provider (matters greatly/does not matter), and that whether therapy is provided by an individual therapist or within a group (makes a difference/does not make a difference).

6. (Thinking Critically) Clients’ and therapists’ perceptions of therapy’s effectiveness may be inflated by their (clear/no clear) that a treatment works. This phenomenon is called the .

Another phenomenon that may inflate their perceptions of therapy’s effectiveness is the phenomenon called , which is the tendency for events or emotions to return to their state.

Objective 13: Discuss the importance of outcome studies in judging the effectiveness of psychotherapies, and describe some of these findings.

7. In hopes of better assessing psychotherapy’s effectiveness, psychologists have turned to research studies.

8. The debate over the effectiveness of psychotherapy began with a study by ; it showed that the rate of improvement for those who received therapy (was/was not) higher than the rate for those who did not.

9. A statistical technique that makes it possible to combine the results of many different psychotherapy outcome studies is called .

Overall, the results of such analyses indicate that psychotherapy is (somewhat effective/ineffective).

10. Psychotherapy is cost-effective when compared with the greater costs of care for psychological problems.

Objective 14: Summarize the findings on which psychotherapies are most effective for specific disorders.

11. Comparisons of the effectiveness of different forms of therapy reveal (clear/no clear) differences, that the type of therapy provider (matters greatly/does not matter), and that whether therapy is provided by an individual therapist or within a group (makes a difference/does not make a difference).

12. Controlled treatment studies have demonstrated that depression may be effectively treated with and therapies. In treating
anxiety, ____________ and ____________ therapies and training have proven effective. Cognitive-behavior therapy has proven effective in treating ____________, and behavior modification in treating ____________.

13. With phobias, compulsions, and other specific behavior problems, ____________ therapies have been the most effective.

14. As a rule, psychotherapy is most effective with problems that are ____________ (specific/nonspecific).

Objective 15: Evaluate the effectiveness of eye movement desensitization and reprocessing (EMDR) and light exposure therapies.

15. Today, many forms of ____________ are touted as effective treatments for a variety of complaints.

16. Aside from testimonials, there is very little evidence based on ____________ research for such therapies.

17. In one popular alternative therapy, a therapist triggers eye movements in patients while they imagine ____________. This therapy, called ____________, has proven (completely ineffective/somewhat effective) as a treatment for nonmilitary ____________. ____________. However, skeptics point to evidence that ____________ is just as effective as triggered eye movements in producing beneficial results. The key seems to be in the person’s ____________ traumatic memories and in a ____________ effect.

18. For people who suffer from the wintertime form of depression called ____________, timed ____________ therapy may be beneficial.

Objective 16: Describe the three benefits attributed to all psychotherapies.

19. All forms of psychotherapy offer three benefits: ____________ for demoralized people; a new ____________ on oneself; and a relationship that is ____________, ____________, and ____________.

20. Therapy outcomes vary with the ____________ of the person seeking help.

21. In one study of depression treatment, the most effective therapists were those who were perceived as most ____________ and ____________.

22. Several studies found that treatment for mild problems offered by paraprofessionals ____________ (is/is not) as effective as that offered by professional therapists.

Objective 17: Discuss the role of values and cultural differences in the therapeutic process.

23. Generally speaking, psychotherapists’ personal values ____________ (do/do not) influence their therapy. This is particularly significant when the therapist and client are from ____________ (the same/different) cultures.

24. In North America, Europe, and Australia, most therapists reflect their culture’s ____________.

25. Differences in values may help explain the reluctance of some ____________ populations to use mental health services.
The Biomedical Therapies (pp. 711–719)

Objective 18: Define psychopharmacology, and explain how double-blind studies help researchers evaluate a drug's effectiveness.

1. The most widely used biomedical treatments are the ____________ therapies. Thanks to these therapies, the number of residents in mental hospitals has ______________ (increased/decreased) sharply.

2. The field that studies the effects of drugs on the mind and behavior is ______________.

3. To guard against the ______________ effect and normal ______________, neither the patients nor the staff involved in a study may be aware of which condition a given individual is in; this is called a ______________ ______________ study.

Objective 19: Describe the characteristics of antipsychotic drugs, and discuss their use in treating schizophrenia.

4. One effect of ______________ drugs such as ______________ is to help those experiencing ______________ (positive/negative) symptoms of schizophrenia by decreasing their responsiveness to irrelevant stimuli; schizophrenia patients who are apathetic and withdrawn may be more effectively treated with the drug ______________.

5. These drugs work by blocking the receptor sites for the neurotransmitters ______________ and ______________.

6. Long-term use of first-generation antipsychotic drugs can produce ______________, which involves involuntary movements of the muscles of the ______________, ______________, and ______________.

Objective 20: Describe the characteristics of antianxiety drugs.

7. Xanax and Ativan are classified as ______________ drugs.

8. These drugs depress activity in the ______________

9. When used in combination with ______________, these drugs can help people cope with frightening situations.

10. Antianxiety drugs have been criticized for merely reducing ______________, rather than resolving underlying ______________. These drugs can also cause ______________.

Objective 21: Describe the characteristics of antidepressant drugs, and discuss their use in treating specific disorders.

11. Drugs that are prescribed to alleviate depression are called ______________ drugs. These drugs also work by increasing levels of the neurotransmitters ______________ or ______________.

12. One example of this type of drug is ______________, which works by blocking the reuptake of ______________ from synapses and is therefore called a ______________ ______________ drug.

13. Equally effective in calming anxious people and energizing depressed people is ______________, which has positive side effects. Even better is to use drugs, which work ______________ ______________ (bottom-up/top-down) in conjunction with ______________ ______________ therapy, which works ______________ (bottom-up/top-down).
14. Although people with depression often improve after one month on antidepressants, meta-analysis studies demonstrate that a large percentage of the effectiveness is due to

or a ________________________.

Objective 22: Describe the use and effects of mood-stabilizing medications.

15. In order to stabilize the mood swings of a bipolar disorder, the simple salt __________________ is often prescribed.

16. Another effective drug in the control of mania was originally used to treat epilepsy; it is __________________________.

Objective 23: Describe the use of electroconvulsive therapy in treating severe depression, and describe some possible alternatives to ECT.

17. The therapeutic technique in which the patient receives an electric shock to the brain is referred to as __________________ therapy, abbreviated as __________________________.

18. ECT is most often used with patients suffering from severe __________________. Research evidence __________________ Confirm/s/does not confirm) ECT’s effectiveness with such patients.

19. The mechanism by which ECT works is __________________________.

20. A gentler alternative is a chest ____________________ that intermittently stimulates the __________________ nerve.

21. Another gentler procedure called ________________________ aims to treat depression by presenting pulses through a magnetic coil held close to a person’s skull above the right eyebrow. Unlike ECT, this procedure produces no __________________________ loss, or other side effects. This procedure may work by energizing the brain’s left __________________________, which is relatively inactive in depressed patients.

Objective 24: Summarize the history of the psychosurgical procedure known as a lobotomy, and discuss the use of psychosurgery today.

22. The biomedical therapy in which a portion of brain tissue is removed or destroyed is called ________________________.

23. In the 1930s, Moniz developed an operation called the ______________________. In this procedure, the ____________________ lobe of the brain is disconnected from the rest of the brain.

24. Today, most psychosurgery has been replaced by the use of __________________ or some other form of treatment.

Preventing Psychological Disorders

If you do not know the meaning of the following expression in the context in which it appears in the text, refer to page 463 for an explanation: upstream work.

Objective 25: Explain the rationale of preventive mental health programs.

1. Psychotherapies and biomedical therapies locate the cause of psychological disorders within the __________________________.

2. An alternative viewpoint is that many psychological disorders are responses to __________________________.

3. According to this viewpoint, it is not just the __________________________ who needs treatment but also the person’s __________________________.

4. One advocate of __________________________ mental health, George Albee, believes that many social stresses undermine people’s sense of __________________________, and __________________________. These stresses include __________________________, work that is __________________________, constant __________________________, and __________________________.
5. Albee's views remind us that disorders are not just biological and not just environmental or psychological, because we are all an __________ system.

PROGRESS TEST 1

Multiple-Choice Questions

Circle your answers to the following questions and check them with the answers beginning on page 455. If your answer is incorrect, read the explanation for why it is incorrect and then consult the appropriate pages of the text (in parentheses following the correct answer).

1. Electroconvulsive therapy is most useful in the treatment of:
   a. schizophrenia.
   b. depression.
   c. personality disorders.
   d. anxiety disorders.

2. The technique in which a person is asked to report everything that comes to his or her mind is called ________; it is favored by_____ therapists.
   a. active listening; cognitive
   b. spontaneous remission; humanistic
   c. free association; psychoanalytic
   d. systematic desensitization; behavior

3. Of the following categories of psychotherapy, which is known for its nondirective nature?
   a. psychoanalysis   c. behavior therapy
   b. humanistic therapy   d. cognitive therapy

4. Which of the following is not a common criticism of psychoanalysis?
   a. It emphasizes the existence of repressed memories.
   b. It provides interpretations that are hard to disprove.
   c. It is generally a very expensive process.
   d. It gives therapists too much control over patients.

5. Which of the following types of therapy does not belong with the others?
   a. cognitive therapy
   b. family therapy
   c. self-help group
   d. support group

6. Which of the following is not necessarily an advantage of group therapies over individual therapies?
   a. They tend to take less time for the therapist.
   b. They tend to cost less money for the client.
   c. They are more effective.
   d. They allow the client to test new behaviors in a social context.

7. Which biomedical therapy is most likely to be practiced today?
   a. psychosurgery
   b. electroconvulsive therapy
   c. drug therapy
   d. counterconditioning

8. The effectiveness of psychotherapy has been assessed both through clients' perspectives and through controlled research studies. What have such assessments found?
   a. Clients' perceptions and controlled studies alike strongly affirm the effectiveness of psychotherapy.
   b. Whereas clients' perceptions strongly affirm the effectiveness of psychotherapy, studies point to more modest results.
   c. Whereas studies strongly affirm the effectiveness of psychotherapy, many clients feel dissatisfied with their progress.
   d. Clients' perceptions and controlled studies alike paint a very mixed picture of the effectiveness of psychotherapy.

9. Which of the following best describes the results of the 30-year follow-up study of 500 Massachusetts boys who had been considered preadolescents?
   a. Predelinquent boys who received counseling had fewer problems as adults than untreated predelinquent boys.
   b. Predelinquent boys who did not receive counseling had slightly fewer problems as adults than boys who received counseling.
   c. Predelinquent boys who underwent behavior therapy had fewer problems as adults than boys who underwent psychoanalysis.
   d. Predelinquent boys who underwent psychoanalysis had fewer problems as adults than boys who underwent behavior therapy.
10. The results of meta-analysis of the effectiveness of different psychotherapies reveals that:
   a. no single type of therapy is consistently superior.
   b. behavior therapies are most effective in treating specific problems, such as phobias.
   c. cognitive therapies are most effective in treating depressed emotions.
   d. all of the above are true.

11. The antipsychotic drugs appear to produce their effects by blocking the receptor sites for:
   a. dopamine.
   b. epinephrine.
   c. norepinephrine.
   d. serotonin.

12. Psychologists who advocate a ______ approach to mental health contend that many psychological disorders could be prevented by changing the disturbed individual's ______.
   a. biomedical; diet
   b. family; behavior
   c. humanistic; feelings
   d. preventive; environment

13. An eclectic psychotherapist is one who:
   a. takes a nondirective approach in helping clients solve their problems.
   b. views psychological disorders as usually stemming from one cause, such as a biological abnormality.
   c. uses one particular technique, such as psychoanalysis or counterconditioning, in treating disorders.
   d. uses a variety of techniques, depending on the client and the problem.

14. The technique in which a therapist echoes and restates what a person says in a nondirective manner is called:
   a. active listening.
   b. free association.
   c. systematic desensitization.
   d. meta-analysis.

15. Unlike traditional psychoanalytic therapy, interpersonal psychotherapy:
   a. helps people gain insight into the roots of their problems.
   b. offers interpretations of patients' feelings.
   c. focuses on current relationships.
   d. does all of the above.

16. The technique of systematic desensitization is based on the premise that maladaptive symptoms are:
   a. a reflection of irrational thinking.
   b. conditioned responses.
   c. expressions of unfulfilled wishes.
   d. all of the above.

17. The operant conditioning technique in which desired behaviors are rewarded with points or poker chips that can later be exchanged for various rewards is called:
   a. counterconditioning.
   b. systematic desensitization.
   c. a token economy.
   d. exposure therapy.

18. One variety of ______ therapy is based on the finding that depressed people often attribute their failures to ______.
   a. humanistic; themselves
   b. behavior; external circumstances
   c. cognitive; external circumstances
   d. cognitive; themselves

19. (Thinking Critically and text) A person can derive benefits from psychotherapy simply by believing in it. This illustrates the importance of:
   a. spontaneous recovery.
   b. the placebo effect.
   c. the transference effect.
   d. interpretation.

20. Before 1950, the main mental health providers were:
   a. psychologists.
   b. paraprofessionals.
   c. psychiatrists.
   d. the clergy.
Matching Items

Match each term with the appropriate definition or description.

Terms

1. cognitive therapy
2. behavior therapy
3. systematic desensitization
4. cognitive-behavior therapy
5. client-centered therapy
6. regression toward the mean
7. aversive conditioning
8. psychoanalysis
9. preventive mental health
10. biomedical therapy
11. counterconditioning

Definitions or Descriptions

a. associates unwanted behavior with unpleasant experiences
b. associates a relaxed state with anxiety-arousing stimuli
c. emphasizes the social context of psychological disorders
d. integrated therapy that focuses on changing self-defeating thinking and unwanted behavior
e. category of therapies that teach people more adaptive ways of thinking and acting
f. the tendency for unusual events to return to their average state
g. therapy developed by Carl Rogers
h. therapy based on Freud’s theory of personality
i. treatment with psychosurgery, electroconvulsive therapy, or drugs
j. classical conditioning procedure in which new responses are conditioned to stimuli that trigger unwanted behaviors
k. category of therapies based on learning principles derived from classical and operant conditioning

PROGRESS TEST 2

Progress Test 2 should be completed during a final chapter review. Answer the following questions after you thoroughly understand the correct answers for the section reviews and Progress Test 1.

Multiple-Choice Questions

1. Carl Rogers was a ______ therapist who was the creator of ______.
   a. behavior; systematic desensitization
   b. psychoanalytic; insight therapy
   c. humanistic; client-centered therapy
   d. cognitive; cognitive therapy for depression

2. Using techniques of classical conditioning to develop an association between unwanted behavior and an unpleasant experience is known as:
   a. aversive conditioning.
   b. systematic desensitization.
   c. transference.
   d. electroconvulsive therapy.

3. Which type of psychotherapy emphasizes the individual's inherent potential for self-fulfillment?
   a. behavior therapy
   c. humanistic therapy
   b. psychoanalysis
   d. biomedical therapy

4. Light-exposure therapy has proven useful as a form of treatment for people suffering from:
   a. bulimia.
   b. seasonal affective disorder.
   c. schizophrenia.
   d. dissociative identity disorder.

5. Which type of psychotherapy focuses on changing unwanted behaviors rather than on discovering their underlying causes?
   a. behavior therapy
   b. cognitive therapy
   c. humanistic therapy
   d. psychoanalysis
6. The techniques of counterconditioning are based on principles of:
   a. observational learning.
   b. classical conditioning.
   c. operant conditioning.
   d. behavior modification.

7. In which of the following does the client learn to associate a relaxed state with a hierarchy of anxiety-arousing situations?
   a. cognitive therapy
   b. aversive conditioning
   c. counterconditioning
   d. systematic desensitization

8. Principles of operant conditioning underlie which of the following techniques?
   a. counterconditioning
   b. systematic desensitization
   c. stress inoculation training
   d. the token economy

9. Which of the following is not a common criticism of behavior therapy?
   a. Clients may rely too much on extrinsic motivation for their new behaviors.
   b. Behavior control is unethical.
   c. Outside the therapeutic setting, the new behavior may disappear.
   d. All of the above are criticisms of behavior therapy.

10. Which type of therapy focuses on eliminating irrational thinking?
    a. EMDR
    b. client-centered therapy
    c. cognitive therapy
    d. behavior therapy

11. Antidepressant drugs are believed to work by affecting serotonin or:
    a. dopamine.
    b. lithium.
    c. norepinephrine.
    d. acetylcholine.

12. The following are some of the conclusions drawn in the text regarding the effectiveness of psychotherapy. For which of these conclusions did the Massachusetts study of delinquent boys provide evidence?
    a. Clients’ perceptions of the effectiveness of therapy usually are very accurate.
    b. Clients’ perceptions of the effectiveness of therapy differ somewhat from the objective findings.
    c. Individuals who receive treatment do somewhat better than individuals who do not.
    d. Overall, no one type of therapy is a “winner,” but certain therapies are more suited to certain problems.

13. Which of the following is the mood-stabilizing drug most commonly used to treat bipolar disorder?
    a. Ativan
    b. chlorpromazine
    c. Xanax
    d. lithium

14. The type of drugs criticized for reducing symptoms without resolving underlying problems are the:
    a. antianxiety drugs.
    b. antipsychotic drugs.
    c. antidepressant drugs.
    d. amphetamines.

15. Which form of therapy is most likely to be successful in treating depression?
    a. behavior modification
    b. psychoanalysis
    c. cognitive therapy
    d. humanistic therapy

16. Although Moniz won the Nobel prize for developing the lobotomy procedure, the technique is not widely used today because:
    a. it produces a lethargic, immature personality.
    b. it is irreversible.
    c. calming drugs became available in the 1950s.
    d. of all of the above reasons.

17. A meta-analysis of research studies comparing the effectiveness of professional therapists with paraprofessionals found that:
    a. the professionals were much more effective than the paraprofessionals.
    b. the paraprofessionals were much more effective than the professionals.
    c. except in treating depression, the paraprofessionals were about as effective as the professionals.
    d. the paraprofessionals were about as effective as the professionals.

18. Among the common ingredients of the psychotherapies is:
    a. the offer of a therapeutic relationship.
    b. the expectation among clients that the therapy will prove helpful.
    c. the chance to develop a fresh perspective on oneself and the world.
    d. all of the above.
19. Family therapy differs from other forms of psychotherapy because it focuses on:
   a. using a variety of treatment techniques.
   b. conscious rather than unconscious processes.
   c. the present instead of the past.
   d. how family tensions may cause individual problems.

20. One reason that aversive conditioning may only be temporarily effective is that:
   a. for ethical reasons, therapists cannot use sufficiently intense unconditioned stimuli to sustain classical conditioning.
   b. patients are often unable to become sufficiently relaxed for conditioning to take place.

21. Cognitive-behavior therapy aims to:
   a. alter the way people act.
   b. Make people more aware of their irrational negative thinking.
   c. Alter the way people think and act.
   d. Countercondition anxiety-provoking stimuli.

Matching Items

Match each term with the appropriate definition or description.

Terms

1. active listening
2. token economy
3. placebo effect
4. lobotomy
5. lithium
6. meta-analysis
7. psychopharmacology
8. double-blind technique
9. Xanax
10. free association
11. stress inoculation training

Definitions or Descriptions

a. type of psychosurgery
b. procedure for statistically combining the results of many experiments
c. mood-stabilizing drug
d. empathic technique used in person-centered therapy
e. the beneficial effect of a person's expecting that treatment will be effective
f. antianxiety drug
g. technique of psychoanalytic therapy
h. an operant conditioning procedure
i. the study of the effects of drugs on the mind and behavior
j. experimental procedure in which both the patient and staff are unaware of a patient's treatment condition
k. cognitive-behavior therapy in which people are trained to restructure their thinking in stressful situations
PSYCHOLOGY APPLIED

Answer these questions the day before an exam as a final check on your understanding of the chapter's terms and concepts.

Multiple-Choice Questions

1. During a session with his psychoanalyst, Jamal hesitates while describing a highly embarrassing thought. In the psychoanalytic framework, this is an example of:
   a. transference.  
   b. insight.  
   c. mental repression.  
   d. resistance.

2. During psychoanalysis, Jane has developed strong feelings of hatred for her therapist. The analyst interprets Jane’s behavior in terms of a ______ of her feelings toward her father.
   a. projection  
   b. resistance  
   c. regression  
   d. transference

3. Given that Jim’s therapist attempts to help him by offering genuineness, acceptance, and empathy, she is probably practicing:
   a. psychoanalysis.  
   b. behavior therapy.  
   c. cognitive therapy.  
   d. client-centered therapy.

4. To help Sam quit smoking, his therapist blew a blast of smoke into Sam’s face each time Sam inhaled. Which technique is the therapist using?
   a. exposure therapy  
   b. behavior modification  
   c. systematic desensitization  
   d. aversive conditioning

5. After Darnel dropped a pass in an important football game, he became depressed and vowed to quit the team because of his athletic incompetence. The campus psychologist challenged his illogical reasoning and pointed out that Darnel’s “incompetence” had earned him an athletic scholarship. The psychologist’s response was most typical of a ______ therapist.
   a. behavior  
   b. psychoanalytic  
   c. client-centered  
   d. cognitive

6. Seth enters therapy to talk about some issues that have been upsetting him. The therapist prescribes some medication to help him. The therapist is most likely a:
   a. clinical psychologist.  
   b. psychiatrist.

7. In an experiment testing the effects of a new antipsychotic drug, neither Dr. Cunningham nor her patients know whether the patients are in the experimental or the control group. This is an example of the ______ technique.
   a. meta-analysis  
   b. within-subjects  
   c. double-blind  
   d. single-blind

8. A close friend who for years has suffered from wintertime depression is seeking your advice regarding the effectiveness of light-exposure therapy. What should you tell your friend?
   a. “Don’t waste your time and money. It doesn’t work.”
   b. “A more effective treatment for seasonal affective disorder is eye movement desensitization and reprocessing.”
   c. “You’d be better off with a prescription for lithium.”
   d. “It might be worth a try. There is some evidence that morning light exposure produces relief.”

9. A relative wants to know which type of therapy works best. You should tell your relative that:
   a. psychotherapy does not work.  
   b. behavior therapy is the most effective.  
   c. cognitive therapy is the most effective.  
   d. no one type of therapy is consistently the most successful.

10. Leota is startled when her therapist says that she needs to focus on eliminating her problem behavior rather than gaining insight into its underlying cause. Most likely, Leota has consulted a ______ therapist.
    a. behavior  
    b. humanistic  
    c. cognitive  
    d. psychoanalytic

11. In order to help him overcome his fear of flying, Duane’s therapist has him construct a hierarchy of anxiety-triggering stimuli and then learn to associate each with a state of deep relaxation. Duane’s therapist is using the technique called:
    a. systematic desensitization.  
    b. aversive conditioning.  
    c. shaping.  
    d. free association.
12. A patient in a hospital receives poker chips for making her bed, being punctual at meal times, and maintaining her physical appearance. The poker chips can be exchanged for privileges, such as television viewing, snacks, and magazines. This is an example of the:
   a. psychodynamic therapy technique called systematic desensitization.
   b. behavior therapy technique called token economy.
   c. cognitive therapy technique called token economy.
   d. humanistic therapy technique called systematic desensitization.

13. Ben is a cognitive-behavior therapist. Compared to Rachel, who is a behavior therapist, Ben is more likely to:
   a. base his therapy on principles of operant conditioning.
   b. base his therapy on principles of classical conditioning.
   c. address clients' attitudes as well as behaviors.
   d. focus on clients' unconscious urges.

14. A psychotherapist who believes that the best way to treat psychological disorders is to prevent them from developing would be most likely to view disordered behavior as:
   a. maladaptive thoughts and actions.
   b. expressions of unconscious conflicts.
   c. conditioned responses.
   d. an understandable response to stressful social conditions.

15. Linda's doctor prescribes medication that blocks the activity of dopamine in her nervous system. Evidently, Linda is being treated with an ______ drug.
   a. antipsychotic  c. antidepressant
   b. antianxiety  d. anticonvulsive

16. Abraham's doctor prescribes medication that increases the availability of norepinephrine or serotonin in his nervous system. Evidently, Abraham is being treated with an ______ drug.
   a. antipsychotic  c. antidepressant
   b. antianxiety  d. anticonvulsive

17. In concluding her talk entitled "Psychosurgery Today," Ashley states that:
   a. "Psychosurgery is still widely used throughout the world."
   b. "Electroconvulsive therapy is the only remaining psychosurgical technique that is widely practiced."
   c. "With advances in psychopharmacology, psychosurgery has largely been abandoned."
   d. "Although lobotomies remain popular, other psychosurgical techniques have been abandoned."

18. A psychiatrist has diagnosed a patient as having bipolar disorder. It is likely that she will prescribe:
   a. an antipsychotic drug.
   b. lithium.
   c. an antianxiety drug.
   d. a drug that blocks receptor sites for serotonin.

19. Which type(s) of psychotherapy would be most likely to use the interpretation of dreams as a technique for bringing unconscious feelings into awareness?
   a. psychoanalysis
   b. psychodynamic therapy
   c. cognitive therapy
   d. both a. and b.

20. Of the following therapists, who would be most likely to interpret a person's psychological problems in terms of repressed impulses?
   a. a behavior therapist
   b. a cognitive therapist
   c. a humanistic therapist
   d. a psychoanalyst

21. Nick survived a car accident in which another passenger died. Feeling anxious and guilty, he sought treatment from an alternative therapist, who used eye movement desensitization and reprocessing to help Nick return to his normally upbeat, optimistic frame of mind. After several months of treatment Nick began feeling better. Although Nick is convinced that the alternative therapy was responsible for his improvement, it is also possible that it was the result of:
   a. regression toward the mean.
   b. a placebo effect.
   c. merely seeking treatment from any practitioner who provided an empathic, trusting environment.
   d. all of the above.
Essay Question

Willie has been diagnosed as suffering from major depressive disorder. Describe the treatment he might receive from a psychoanalyst, a cognitive therapist, and a biomedical therapist. (Use the space below to list points you want to make, and organize them. Then write the essay on a separate sheet of paper.)

KEY TERMS

Writing Definitions

Using your own words, on a separate piece of paper write a brief definition or explanation of each of the following terms.

1. psychotherapy
2. biomedical therapy
3. eclectic approach
4. psychoanalysis
5. resistance
6. interpretation
7. transference
8. client-centered therapy
9. active listening
10. behavior therapy
11. counterconditioning
12. exposure therapies
13. systematic desensitization
14. virtual reality exposure therapy
15. aversive conditioning
16. token economy
17. cognitive therapy
18. cognitive-behavior therapy
19. family therapy
20. regression toward the mean
21. meta-analysis
22. psychopharmacology
23. tardive dyskinesia
24. electroconvulsive therapy (ECT)
25. repetitive transcranial magnetic stimulation (rTMS)
26. psychosurgery
27. lobotomy
Cross-Check

As you learned in the Prologue, reviewing and overlearning of material are important to the learning process. After you have written the definitions of the key terms in this chapter, you should complete the crossword puzzle to ensure that you can reverse the process—recognize the term, given the definition.

ACROSS
1. Therapy that teaches people new and more adaptive ways of thinking.
6. Approach that draws on a variety of forms of therapy to best suit clients’ needs.
14. Therapy that attempts to change behavior by removing or destroying brain tissue.
15. Therapy that uses prescribed medications or medical procedures to treat psychological disorders.
16. Conditioning in which an unpleasant state is associated with an unwanted behavior.

DOWN
2. Nondirective technique in which the listener echoes and restates, but does not interpret, clients’ remarks.
3. Integrated therapy that focuses on changing self-defeating thinking and unwanted behaviors.
4. Humanistic therapy developed by Carl Rogers.
5. Statistical procedure for combining the results of many different research studies.
7. Behavior therapy in which new responses are classically conditioned to stimuli that trigger unwanted behaviors.
8. Psychoanalytic term for the analyst’s helping a client to gain deeper insights into unwanted thoughts and behaviors.
9. Therapy that views problem behaviors as partially engendered by the client’s environment.
11. Biomedical therapy often used to treat severe depression.
12. Therapy developed by Sigmund Freud.

13. Therapy that applies principles of operant or classical conditioning to eliminate problem behaviors.

ANSWERS

Chapter Review

Introducing Therapy
1. psychological; biomedical
2. psychotherapy; learned
3. prescribed medications; nervous system
4. eclectic; psychotherapy integration

The Psychological Therapies
1. self-insight
2. repressed
3. repressed; conscious
4. free association
5. resistance; interpretation
6. latent content
7. transference  
8. disprove; expensive  
9. psychodynamic; once a week  
10. depressed; interpersonal psychotherapy  
11. insight; current relationships  
12. self-fulfillment  

Unlike psychoanalysis, humanistic therapy is focused on the present instead of the past, on awareness of feelings as they occur rather than on achieving insights into the childhood origins of the feelings, on conscious rather than unconscious processes, on promoting growth and fulfillment instead of curing illness, and on helping clients take immediate responsibility for their feelings and actions rather than on uncovering the obstacles to doing so.  
13. client-centered; nondirective; does not interpret  
14. genuineness; acceptance; empathy  
15. active listening; unconditional positive regard  
16. paraphrase; invite clarification; reflect feelings  
17. learning  

Whereas psychoanalysis and humanistic therapies assume that problems diminish as self-awareness grows, behavior therapists doubt that self-awareness is the key. Instead of looking for the inner cause of unwanted behavior, behavior therapy applies learning principles to directly attack the unwanted behavior itself.  
18. classical conditioning; counterconditioning; systematic desensitization; aversive conditioning  
19. exposure therapies; Wolpe; anxious  
20. hierarchy; progressive relaxation; relaxed; anxiety  
21. virtual reality exposure  
22. negative; positive; unpleasant  
23. behavior modification  
24. operant; token economy  

Behavior modification is criticized because the desired behavior may stop when the rewards are stopped. Also, critics contend that one person should not be allowed to control another.  

Proponents of behavior modification contend that some clients request this therapy. Also, control already exists.  
25. cognitive  
26. catastrophizing; depression; Beck  
27. do not  
28. stress inoculation; dispute  
29. cognitive-behavior  

Group therapy saves therapists time and clients money. The social context of group therapy allows people to discover that others have similar problems and to try out new ways of behaving.  
30. family therapy  
31. communication; conflict  
32. self-help; support; stigmatized, hard-to-discuss  

Evaluating Psychotherapies  

1. is not  
2. satisfaction  

People often enter therapy in crisis. When the crisis passes, they may attribute their improvement to the therapy. Clients, who may need to believe the therapy was worth the effort, may overestimate its effectiveness. Clients generally find positive things to say about their therapists, even if their problems remain.  
3. did not have; are not  
4. overestimate  
5. unhappiness; well-being  
6. belief; placebo effect; regression toward the mean; unusual; average  
7. controlled  
8. Eysenck; was not  
9. meta-analysis; somewhat effective  
10. medical  
11. no clear; does not matter; does not make a difference  
12. cognitive; interpersonal; behavior; cognitive; exposure; stress inoculation; bulimia; bed wetting  
13. behavioral conditioning  
14. specific  
15. alternative therapy  
16. controlled  
17. traumatic events; eye movement desensitization and reprocessing (EMDR); somewhat effective; post-traumatic stress disorder; finger tapping; reliving; placebo  
18. seasonal affective disorder; light-exposure  
19. hope; perspective; caring; trusting; empathic  
20. attitude  
21. empathic; caring  
22. is  
23. do; different  
24. individualism  
25. minority  

The Biomedical Therapies  

1. drug; decreased  
2. psychopharmacology