

# Current Treatments of Psychological Disorders

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Spring 2019

Course Number	Time	Location	Office Hours
PSY 319	T 16:40–19:00	RKC 200	T, 10:30–11:45 & W, 12:30–13:30

## 1 Overview

Psychotherapy is constantly evolving based on new research—and it has changed substantially since first coming into being in the end of the 19<sup>th</sup> century. We will focus this semester on understanding more modern treatment approaches. These approaches may focus on helping people to change their thinking and behaviors. Some place a greater emphasis on the social and interpersonal contexts in which behaviors occur. Some therapies, grounded in clinical psychological science, place a greater emphasis on the biopsychological bases of behavior, present functioning, and achieving change within shorter time periods.

We will continue to focus on therapies with demonstrated efficacy, beginning with a variety of cognitive-behavioral approaches—to which we will return throughout the semester—and moving to other techniques. Our readings will be based in treatment manuals, empirical research, and exhaustive reviews, with the aim of thinking critically about mental illness and our best ways of treating it.

Prerequisites: Moderated in psychology and a course in either Adult or Child Abnormal Psychology (PSY210 or PSY211), or permission of instructor.

You are expected to come to each class prepared to discuss the assigned reading. Laptops are not expected in class. Instead, you should plan to bring paper or a notebook. (Digital copies of readings may, at times, be appropriate.)

## 2 Readings

There is no textbook used in this course. Readings will be provided on Moodle. Your enrollment key is *efficacyS19* (which is case sensitive—note the capital S). Details of when each reading is assigned come below, and are also present on Moodle.

## 3 Grading

Your grades in this course will come from participation in class, leading discussions, and research and response papers.

You may earn a total of 500 points in this class, broken down as follows:

Points	Assignment
50	Class participation
100	Response papers (25 each)
20	Discussion questions
80	Leading discussion
50	In-class debate
200	Final paper

Final grades will be converted to percentages, and then to final letter grades. (e.g., 450 out of 500 points is a 90% and an A–.)

Writing assignments should be submitted on Moodle as PDFs. For any assignments sent via email, they must be named with your last name and the assignment name (e.g., “Dainer-Best response 1”). Except where otherwise noted, assignments are due by the beginning of class on the day indicated on the syllabus.

### 3.1 Assignments

#### 3.1.1 Class participation

This is a discussion-based seminar. You should expect to talk each class, and frequently. You will earn a significant portion of your grade from being an active class participant. In class discussions, you should learn to listen thoughtfully to your classmates and respond to them as well as adding your own viewpoints.

#### 3.1.2 Response papers and discussion questions

**Four** 1–2 page response papers are due during the semester. Each response paper will respond to one or more of that week’s readings. You get to choose what topics you should

like to respond to. However, two responses (at a minimum) are due before spring break. You are responsible for turning your response papers in without prompting.

Additionally, during **eight** of the semester's weeks, you should also publish **two** discussion questions on the Moodle discussion board. These questions will be used during class to lead discussion, as described below. Discussion questions count as a separate grade. You will receive full credit for your discussion questions if they are novel (i.e., not repeating someone else's previously-submitted questions) and add something beyond the questions raised by that week's readings.

Response papers and discussion questions are all **due by noon** on the day of class for which those readings are assigned.

### **3.1.3 Discussion leaders**

Each week, two students will compile any discussion questions written by others, and develop their own. You may *not* write a response paper when you lead discussion. You will be able to sign up for discussions in the second week of class. On weeks in which you lead discussion, you should plan to meet with your partner in advance to discuss the readings and identify major topics of discussion. In class, you will introduce your discussion by helping to lay out the major arguments of the readings, help guide the conversation, and ask relevant questions. You may also choose to bring in outside research as you see fit.

You will lead discussion twice over the course of the semester.

### **3.1.4 In-class debate**

On April 23rd, we will have an in-class debate pitting two treatments against one another. Students will choose a side (i.e., choose a treatment to argue for) beforehand, and be expected to prepare notes (and sources) defending their side. Sides will make opening statements as a group; after both sides make their statements, individual rebuttals will be permitted. Each student should also be prepared to ask and answer questions. You will be scored based on your participation and a brief summary of the debate, with an argument as to which side won and why.

### **3.1.5 Final essay**

Your final essay is a 10–12 page paper wherein you are expected to think critically about the topics of this course. The essay is formatted as a research proposal, written in APA style, which asks a question about the *mechanism* of one of the treatments we discuss in class (i.e., why does it work?). You should include an abstract, and the following sections: Introduction (literature review), Methods, Predicted Results, Discussion. (References should follow but are not included in the page count; a title page and outline are unnecessary.)

A topic and précis, including three references, are due via email by the end of spring break (i.e., March 26th) for my review. A rough draft of the essay is due in class (**printed**) on May 7th for peer review. The final paper, including a cover letter describing your response to peer review and summarizing your thesis, is due May 17th via Moodle.

### **3.2 Late assignments**

Discussion questions will not be accepted late. Response papers turned in after the deadline but before class will lose 5 points. (They may not be turned in after class.) Final essays turned in after the deadline will lose 20 points for each day they are turned in late (i.e., 10% of the grade), but may not be turned in after the final day of the semester.

## **4 Class Policies**

### **4.1 Accommodations**

If you have already been approved to receive accommodations by the Disability Support Coordinator, please contact me and we can meet privately to discuss what you will need within the first two weeks of the semester. We will work together to make this course a supportive learning environment for all students.

### **4.2 Attendance**

I expect you to attend class and participate in discussions. If you must miss a class, please let me know by sending me an email explaining your absence. Your grade in this class depends in part on class participation—and, further, your participation is also a part of your classmates' learning. As such, I do expect you to be in class, prepared, and able to participate (i.e., attentive and having read the readings). I do not, however, want you to come to class if you are sick.

### **4.3 Plagiarism**

I expect you to be familiar with what plagiarism is and is not. You may not present someone else's work as your own without proper citation. You may not copy someone else's work. You may not simply reword text from another source without giving credit. Please cite others' work where relevant, and use your own writing. If you are not sure about the definition of plagiarism, or whether something constitutes plagiarism, please consult with me or with someone at Bard's Learning Commons. Students caught plagiarizing will be reported to the Academic Judiciary Board, will get no credit for the assignment, and may fail the course.

## 5 Schedule

The schedule may change over the course of the semester. Changes to assignment dates will be announced in class, and via email or Moodle. You are responsible for following the readings, showing up to class prepared for discussion, and turning in assignments on-time.

Date	Treatment	Disorder	Readings	Due
Jan 29	What are “treatments”?		Syllabus	
Feb 5	Exposure	Panic/Phobias	<ol style="list-style-type: none"> <li>1. An introduction to exposure therapy: Craske, Treanor, Conway, Zbozinek, and Vervliet (2014)</li> <li>2. Understanding what happens when we treat panic: Teachman, Marker, and Clerkin (2010)</li> <li>3. A patient handout about panic: Telch (n.d.)</li> </ol>	
Feb 12		(Class canceled due to snow)		
Feb 19	Exposure	OCD	<ol style="list-style-type: none"> <li>1. An introduction to ExRP: Huppert and Roth (2003)</li> <li>2. Selections from ExRP manual: Foa, Yadin, and Lichner (2012)</li> <li>3. RCT on ExRP: Foa et al. (2005)</li> </ol>	
Feb 26	Exposure; EMDR	PTSD	<ol style="list-style-type: none"> <li>1. Selections from PE manual: Foa, Hembree, and Rothbaum (2007)</li> <li>2. EMDR trial: Ahmad, Larsson, and Sundelin-Wahlsten (2007)</li> <li>3. Comparing PE and EMDR: van den Berg et al. (2015)</li> </ol>	

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Date	Treatment	Disorder	Readings	Due
Mar 5	NET; CPT	PTSD	<ol style="list-style-type: none"> <li>1. Comparing NET and PE: Mørkved et al. (2014)</li> <li>2. Selections from CPT Manual on choosing therapy: Resick, Monson, and Chard (2017)</li> <li>3. CPT Case Study: Monson, Resick, and Rizvi (2014)</li> </ol>	
Mar 12	Behavioral Activation; Cognitive Restructuring	Depression	<ol style="list-style-type: none"> <li>1. Comparing CBT for Depression to other treatments: Cuijpers et al. (2013)</li> <li>2. Defining behavioral activation: Lejuez, Hopko, Acierno, Daughters, and Pagoto (2011)</li> <li>3. A modern take on the cognitive theory of depression: Beck (2008)</li> </ol>	2 <sup>nd</sup> response paper
(Mar 19)	<i>No class / Spring Break</i>			
Mar 26	(Amelia Stanton lecture; response paper due <b>after</b> class)			Paper précis
Apr 2	ACT	Depression	<ol style="list-style-type: none"> <li>1. Introduction to ACT: Hayes and Smith (2005)</li> <li>2. Is CBT less effective than it once was? Johnsen and Friborg (2015)</li> </ol>	
Apr 9	ACT; Mindfulness-based CBT	Depression/Anxiety	<ol style="list-style-type: none"> <li>1. Comparing ACT and CBT: Arch et al. (2012)</li> <li>2. Comparing ACT and relaxation: Hayes-Skelton, Roemer, and Orsillo (2013)</li> <li>3. Similarities of mbCBT and ACT: Roemer, Williston, Eustis, and Orsillo (2013)</li> </ol>	

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Date	Treatment	Disorder	Readings	Due
Apr 16	Psilocybin & MDMA	PTSD/end-of-life	<ol style="list-style-type: none"> <li>1. Magazine article on psilocybin's history: Pollan (2018)</li> <li>2. Call for new research on drug-assisted psychotherapy: Mithoefer, Grob, and Brewerton (2016)</li> <li>3. Using psychedelics to reduce anxiety near end of life: Ross et al. (2016)</li> </ol>	
Apr 23	Dialectical Behavioral Therapy	Borderline Personality Disorder	<ol style="list-style-type: none"> <li>1. Introduction to DBT: Linehan (1993)</li> <li>2. DBT Skills Training Introduction: Linehan (2015)</li> <li>3. Where DBT works: Prada, Perroud, Rüfenacht, and Nicastro (2018)</li> <li>4. Can we use DBT online? Schroeder et al. (2018)</li> </ol>	Debate
Apr 30	Psychodynamic Psychotherapy	Broadly	<ol style="list-style-type: none"> <li>1. Are all treatments effective? (news) Freeman and Freeman (2014)</li> <li>2. Comparing treatments (news): Burkeman (2016)</li> <li>3. When to use psychodynamic treatments: Kivlighan III et al. (2015)</li> </ol>	Post-debate summary
May 7	Psychodynamic Psychotherapy	Mood Disorders	<ol style="list-style-type: none"> <li>1. Which patients prefer psychodynamic treatment: Henkel et al. (2019)</li> <li>2. Current psychodynamic thought: Benjamin (2010)</li> <li>3. Psychodynamic treatments for depression: Fonagy et al. (2015)</li> </ol>	Peer review of paper

Date	Treatment	Disorder	Readings	Due
May 14	Motivational Interviewing; 12-Step programs	Alcohol Use	<ol style="list-style-type: none"> <li>1. Selections from a Motivational Interviewing manual: Rosengren (2018)</li> <li>2. Magazine article critiquing AA: Scoblic (2013)</li> <li>3. Systematic review of AA from 2006: Ferri, Amato, and Davoli (2006)</li> <li>4. Recent article asking if AA lessens alcohol consumption: Karriker-Jaffe, Klinger, Witbrodt, and Kaskutas (2018)</li> </ol>	
(May 17)				Final paper

Citations follow for the above-mentioned readings. PDFs are available on Moodle.

- Ahmad, A., Larsson, B., & Sundelin-Wahlsten, V. (2007). EMDR treatment for children with PTSD: Results of a randomized controlled trial. *Nordic Journal of Psychiatry*, *61*(5), 349–354. <https://doi.org/10.1080/08039480701643464>
- Arch, J. J., Eifert, G. H., Davies, C., Plumb Vilardaga, J. C., Rose, R. D., & Craske, M. G. (2012). Randomized clinical trial of cognitive behavioral therapy (CBT) versus acceptance and commitment therapy (ACT) for mixed anxiety disorders. *Journal of Consulting and Clinical Psychology*, *80*(5), 750–65. <https://doi.org/10.1037/a0028310>
- Barlow, D. H., Farchione, T. J., Bullis, J. R., Gallagher, M. W., Murray-Latin, H., Sauer-Zavala, S., ... others (2017). The unified protocol for transdiagnostic treatment of emotional disorders compared with diagnosis-specific protocols for anxiety disorders: A randomized clinical trial. *JAMA Psychiatry*, *74*(9), 875–884. <https://doi.org/10.1001/jamapsychiatry.2017.2164>
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- Beck, A. T. (2008). The evolution of the cognitive model of depression and its neurobiological correlates. *American Journal of Psychiatry*, *165*, 969–977.
- Benjamin, J. (2010). Where's the gap and what's the difference? *Contemporary Psychoanalysis*, *46*(1), 112–119. <https://doi.org/10.1080/00107530.2010.10746042>
- Burkeman, O. (2016, January). Therapy wars: the revenge of freud. *The Guardian*. Retrieved from <https://www.theguardian.com/news/audio/2016/jan/25/therapy-wars-the-revenge-of-freud>



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- Foa, E. B., Hembree, E. A., & Rothbaum, B. O. (2007). *Prolonged exposure therapy for PTSD: Emotional processing of traumatic experiences (therapist guide)*. New York, NY: Oxford University Press.
- Foa, E. B., Liebowitz, M. R., Kozak, M. J., Davies, S., Campeas, R., Franklin, M. E., . . . others (2005). Randomized, placebo-controlled trial of exposure and ritual prevention, clomipramine, and their combination in the treatment of obsessive-compulsive disorder. *American Journal of Psychiatry*, *162*(1), 151–161. <https://doi.org/doi.org/10.1176/appi.ajp.162.1.151>
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- Hayes, S. C., & Smith, S. (2005). *Get out of your mind and into your life: The new acceptance and commitment therapy*. Oakland, CA: New Harbinger Publications.
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- Karriker-Jaffe, K. J., Klinger, J. L., Witbrodt, J., & Kaskutas, L. A. (2018). Effects of treatment type on alcohol consumption partially mediated by Alcoholics Anonymous attendance. *Substance Use & Misuse*, *53*(4), 596–605. <https://doi.org/10.1080/10826084.2017.1349800>
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- Linehan, M. M. (2015). *DBT skills training manual*. New York, NY: The Guilford Press.
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