

Cognitive-Behavioral Psychotherapy

**The University of Toledo
College of Languages, Literature and Social Sciences
Department of Psychology**

**PSY 6/7340
Spring, 2016
University Hall 1610
11:00 am - 1:30 pm Monday**

Contact Information

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Outside of speaking with me face-to-face, email is the best way to reach me. Please allow up to 24 hours for a reply during business days.

Office location: University Hall, Room 1880A

Office hours: Monday: 10 am – 11 am and 1:30 pm – 2 pm; Thursday: 2 pm – 4:30 pm; Friday 9:30 am – 10:30 am. Also by appointment.

Course Catalog Description

Presentation and exploration of the theory and techniques of cognitive-behavioral assessment and therapy. Emphasis on understanding the theoretical and empirical base for cognitive-behavioral interventions and implications for application in clinical and clinical-research settings.

Course Overview

The purpose of this course is to provide a comprehensive overview of cognitive-behavioral theory and therapy in the context of various forms of psychopathology. Weekly readings will support our discussion and exploration of cognitive-behavioral concepts and techniques. Cognitive-behavioral therapy will not be characterized as a ‘school’ of therapy, but rather as an inclusive orientation to therapy that emphasizes psychological research as the litmus test for therapeutic actions. In addition, course time will be spent actively engaged with the material to deepen our understanding and to promote insightful learning. It is my hope that this course will generate an appreciation for the theoretical and practical value of cognitive-behavioral perspectives.

Prerequisite

None

Course Goals

By the end of the semester, you should be better able to:

- Appreciate cognitive-behavioral psychotherapy as a fundamentally science-based approach
- Observe the usefulness of a cognitive-behavioral perspective in conceptualizing and treating psychopathology
- Understand the importance of applied research practice, discussion, and experiential discovery in gaining expertise in cognitive-behavioral psychotherapy



Learning Outcomes

Based on these course goals, the desired learning outcomes include:

- Apply cognitive-behavioral theory and principles to the conceptualization of psychopathology and distress
- Demonstrate knowledge of the research literature pertaining to cognitive-behavioral interventions as applied to diverse types of psychopathology
- Analyze and synthesize the current research base of cognitive-behavioral interventions to identify gaps and potential future directions
- Engage in collegial and supportive discussion and experiential activities to achieve deeper understanding of course concepts



Grading

The grading of this course will be based on the extent to which the learning outcomes have been achieved. The modalities that will be used to achieve an estimate of the learning outcomes will include:

- (1) An analysis and application of cognitive-behavioral principles to the film *Ordinary People* (1980). Written document will be approximately 5 to 10 double-spaced pages. Worth 15% of final grade.
- (2) Ongoing class participation and substantive contribution to class discussion and experiential activities. Worth 10% of final grade.
- (3) Oral final exam, to be scheduled outside of class time, to assess comprehension and articulation of cognitive-behavioral theory and therapy and its research base. Worth 25% of final grade.
- (4) Group presentation based on a consultation exercise in which a gap in the literature is identified through a literature review, and a method to address that gap is outlined. Further elaboration will be provided in class. Worth 20% of final grade.

(5) Individual consultation paper based on the group presentation. Written document will be approximately 15 to 20 double-spaced pages. Further elaboration will be provided in class. Worth 30% of final grade.

Letter	Points
A	92-100%
A-	90-91%
B+	87-89%
B	82-86%
B-	80-81%
C+	77-79%
C	72-76%
C-	70-71%
D+	67-69%
D	62-66%
D-	60-61%
F	below 60%

Consistent with the degree of graduate training received to date, students enrolled in PSY 7340 will have a somewhat higher threshold for achievement than students enrolled in PSY 6340.

Policy Statement on Non-Discrimination on the basis of Disability (ADA)

The University is an equal opportunity educational institution. Please read The University's Policy Statement on Nondiscrimination on the Basis of Disability Americans with Disability Act Compliance.

Academic Accommodations

The University of Toledo is committed to providing equal access to education for all students. If you have a documented disability or you believe you have a disability and would like information regarding academic accommodations/adjustments in this course please contact the Student Disability Services Office.

Course Schedule and Required Readings

Date	Topic
Jan. 11	Introduction and syllabus
Jan. 25	View the film Ordinary People (1980)
Feb. 1	Cognitive Behavioral Therapy: history, premises, and interrelationships Baardseth, T.P., et al., (2013). Cognitive-behavioral therapy versus other therapies: Redux. <i>Clinical Psychology Review</i> , 33, 395-405. Butler, A.C., Chapman, J.E. Forman, E.M., & Beck, A.T. (2006). The empirical status of cognitive-behavioral therapy: A review of meta-analyses. <i>Clinical Psychology Review</i> , 26, 17-31. Garb, H.N. (2005). Clinical judgment and decision making. <i>Annual Review of Clinical Psychology</i> , 1, 67-89 Siev, J., Huppert, J. D., & Chambless, D. L. (2009). The dodo bird, treatment technique, and disseminating empirically supported treatments. <i>The Behavior Therapist</i> , 32, 69-76.
Feb. 8	Anxiety disorders: Fear Amir, N., & Taylor, C.T. (2012). Interpretation training in individuals with generalized social anxiety disorder: A randomized controlled trial. <i>Journal of Consulting and Clinical Psychology</i> , 80, 497-511 Landon, T.M., & Barlow, D.H. (2004). Cognitive-behavioral treatment for panic disorder: Current status. <i>Journal of Psychiatric Practice</i> , 10, 211-226. McMillan, D., & Lee, R. (2010). A systematic review of behavioral experiments vs. exposure alone in the treatment of anxiety disorders: A case of exposure while wearing the emperor's new clothes? <i>Clinical Psychology Review</i> , 30, 467-478. Choy, Y., Fyer, A. J., & Lipsitz, J. D. (2007). Treatment of specific phobia in adults. <i>Clinical Psychology Review</i> , 27, 266-286.
Feb. 15	Anxiety disorders: Worry and trauma Arch, J.J., & Ayers, C.R. (2013). Which treatment worked better for whom? Moderators of group cognitive behavioral therapy versus adapted

mindfulness based stress reduction for anxiety disorders. *Behaviour Research and Therapy*, 51, 434-442

Resick, P. A., Nishith, P., Weaver, T. L., Astin, M. C., & Feuer, C. A. (2002). A comparison of cognitive-processing therapy with prolonged exposure and a waiting condition for the treatment of chronic posttraumatic stress disorder in female rape victims. *Journal of Consulting and Clinical Psychology*, 70, 867-879.

Borkovec, T. D., & Costello, E. (1993). Efficacy of applied relaxation and cognitive-behavioral therapy in the treatment of generalized anxiety disorder. *Journal of Consulting and Clinical Psychology*, 61, 611-619.

Siev, J., & Chambless, D.L. (2007). Specificity of treatment effects: Cognitive therapy and relaxation for generalized anxiety and panic disorders. *Journal of Consulting and Clinical Psychology*, 75, 513-522.

Feb. 22 Obsessive-Compulsive and Impulse disorders

Abramowitz, J.S., Taylor, S., & McKay, D. (2005). Potentials and limitations of cognitive treatments for obsessive-compulsive disorder. *Cognitive Behaviour Therapy*, 34, 140-147.

Foa, E.B., Liebowitz, M.R., Kozak, M.J., Davies, S., Campeas, R., Franklin, M.E., et al. (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, 151-161

Franklin, M.E., Abramowitz, J.S., Kozak, M.J., Levitt, J.T., & Foa, E.B. (2000). Effectiveness of exposure and ritual prevention for obsessive-compulsive disorder: Randomized compared with nonrandomized samples. *Journal of Consulting and Clinical Psychology*, 68, 594-602.

Rothbaum – Manual for treatment of trichotillomania (to be provided by instructor)

Assignment due: Analysis of Ordinary People (1980)

Feb. 29 Depressive disorders

Jacobson, N. S., Martell, C. R. & Dimidjian, S. (2001) Behavioral Activation Treatment for Depression: Returning to contextual roots. *Clinical Psychology: Science & Practice*, 8, 225-270.

Kanter, J.W., Manos, R.C., Bowe, W.M., Baruch, D.E., Busch, A.M., & Rusch, L.C. (2010). What is behavioral activation? A review of the empirical literature. *Clinical Psychology Review*, 30, 608-620.

Riso, L.P., & Newman, C.F. (2003). Cognitive therapy for chronic depression. *Journal of Clinical Psychology*, 59, 817-831

Mar. 14 Substance use disorders

Apodaca, T. R., & Longabaugh, R. (2009). Mechanisms of change in motivational interviewing: A review and preliminary evaluation of the evidence. *Addiction*, 104, 705-715.

Logan, D., E. & Marlatt, G.A. (2010). Harm reduction therapy: a practice-friendly review of research. *Journal of Clinical Psychology*, 66, 201-214.

Moyers, T.B., Martin, T., Houck, J.M., Christopher, P.J., & Tonigan, J.S. (2009). From in-session behaviors to drinking outcomes: A causal chain for motivational interviewing. *Journal of Consulting and Clinical Psychology*, 77, 1113-1124.

Stasiewicz, P., & Maisto, S. (1993). Two-factor avoidance theory: The role of negative affect in the maintenance of substance use and substance use disorder. *Behavior Therapy*, 24, 337-356.

Mar. 21 Mania, schizophrenia, and other psychotic presentations

Gaudiano, B. (2005) Cognitive behavior therapies for psychotic disorders: Current empirical status and future direction. *Clinical Psychology, Science and practice* 12, Spring, 33-50.

Kopelowicz, A., Liberman, R.P., Zarate, R. (2006) Recent advances in social skills training for schizophrenia. *Schizophrenia Bulletin*, 32, pS12-S23.

Miklowitz, D.J., Otto, M.W., Frank, E., Reilly-Harrington, N.A., Kogan, J.N., Sachs, G.S., et al. (2007). Intensive psychosocial intervention enhances functioning in patients with Bipolar Depression: Results from a 9-month randomized controlled trial. *American Journal of Psychiatry*, 164, 1340-1347.

Mar. 28 Eating disorders

Cooper, M., Wells, A., & Todd, G. (2004). A cognitive model of bulimia

nervosa. *British Journal of Clinical Psychology*, 43 (1), 1-16.

Fairburn, C., Zafra, C., & Roz, S. (2003). Cognitive behaviour therapy for eating disorders: A transdiagnostic theory and treatment. *Behaviour Research and Therapy*, 41, (5), 509-528.

Lock, J., Le Grange, D., Agras, S., Moye, A., Bryson, S.W., & Jo, B. (2010). Randomized clinical trial comparing family-based treatment with adolescent-focused individual therapy for adolescents with Anorexia Nervosa. *Archives of General Psychiatry*, 67, 1025-1032.

Wisniewski, L., & Kelly, E. (2003). The application of dialectical behavior therapy to the treatment of eating disorders. *Cognitive and Behavioral Practice*, 10, (2) 131-138.

Sexual and sleep pathology

Heiman, J. R. (2002). Psychologic treatments for female sexual dysfunction: Are they effective and do we need them? *Archives of Sexual Behavior*, 31, 445-450.

Marques, J.K., Wiederanders, M., Day, D.M., Nelson, C., & van Ommeren, A. (2005). Effects of a relapse prevention program on sexual recidivism: Final results from California's sex offender treatment and evaluation project (SOTEP). *Sexual Abuse: A Journal of Research and Treatment*, 17, 79-107.

Taylor D. J., & Roane, B. M. (2010). Treatment of insomnia in adults and children: A practice-friendly review of research. *Journal of Clinical Psychology*, 66, 1137-1147.

Apr. 4

Personality disorders: Clusters A and C

Matusiewicz, A. K., Hopwood, C. J., Banducci, A. N., & Lejuez, C. W. (2010). The effectiveness of cognitive behavioral therapy for personality disorders. *Psychiatric Clinics of North America*, 33, 657-685.

Beck - Cognitive Therapy of Personality Disorders (to be provided by instructor)

Apr. 11

Personality disorders: Cluster B

Bedics, J.D., Atkins, D.C., Comtois, K.A., & Linehan, M.M. (2012). Treatment differences in the therapeutic relationship and introject during a 2-year randomized controlled trial of dialectical behavior therapy versus

nonbehavioral psychotherapy experts for borderline personality disorder. *Journal of Consulting and Clinical Psychology*, 80, 66-77.

Lee, M., & Overholser, J.C. (2004). Cognitive-behavioral treatment of depression with comorbid borderline personality features. *Journal of Contemporary Psychotherapy*, 34, (3), 231-245.

Apr. 18 Behavioral Medicine

Chou, R., Huffman, L.H. (2007). Nonpharmacological Therapies for Acute and Chronic Low Back Pain: A Review of the Evidence for an American Pain Society/American college of Physicians Clinical Practice Guideline. *Annals of Internal Medicine*, 147, 492-504.

Montgomery, G. (2004). Cognitive factors in health psychology and behavioral medicine. *Journal of Clinical Psychology*, 60 (4), 405-413

Novy, D. (2004). Psychological approaches for managing chronic pain. *Journal of Psychopathology & Behavioral Assessment*, 26 (4), 279-288.

Williams, D. A. (2003). Psychological and behavioral therapies in fibromyalgia and related syndromes. *Bailliere's Best Practice and Research. Clinical Rheumatology*, 17, 649-665.

Apr. 25 Summary and future directions
Group consultation presentations

May 9 **Assignment due: Consultation paper**