

Course Syllabus

Title: Cognitive Behavioral Psychotherapy – PSY 6340/7340: Section 001

Term: Spring 2013
Tuesdays and Thursdays: 9:30-10:45am

Location: University Hall – Room #1610

Credit Hours: 3

Instructor: Jon Elhai, Ph.D.
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Office Hours: Thursdays: 11am-12pm
University Hall (UH) – Room #1370

Required Texts: Beck, J. S. (2011). *Cognitive therapy: Basics and beyond* (2nd ed.). New York: Guilford Press. (ISBN #1609185048).

Barlow, D. H. (Ed.) (2007). (Fourth edition). *Clinical handbook of psychological disorders: A step-by-step treatment manual*. New York: Guilford. (ISBN: 978-1-59385-572-7).

Pryor, K. (1999). *Don't shoot the dog*. New York: Bantam. (ISBN # 978-0553380392).

Gula, R. (2007). *Nonsense: Red herrings, straw men, and sacred cows: How we abuse logic in our everyday language*. Mt. Jackson, Virginia: Axios Press. (ISBN# 9780975366264)

Numerous articles referenced below. These articles can be downloaded from the following webpage:
<http://goo.gl/K7rA>

NOTE: This webpage is a Google Docs webpage. If you have trouble accessing this page, you may need to log in (or, create, and then log in) to your Google or Gmail account. (If you do not have a Gmail account, you can sign up for one at no charge, at www.gmail.com)

Optional/ Recommended Text O'Donohue, W. & Fisher, J. E. (2009). *General Principles and Empirically Supported Techniques of Cognitive Behavior Therapy*. Hoboken, NJ: Wiley. ISBN: 978-0470227770.

Course 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.

This course combines lecture-based teaching, classroom discussion, audio- and video-taped presentations, role-plays demonstrations and exercises. Participation in discussion and exercises is expected. Interventions to be discussed include: behavioral conditioning, functional analysis, cognitive therapy, exposure therapy, behavioral activation treatment, mindfulness, acceptance and commitment therapy, and emotion regulation therapy.

Learning Objectives:

1. Students should specify the primary features of cognitive-behavior therapy (CBT), and the evidence to support them.
2. Students should describe the central tenants of several cognitive behavior theories.
3. Students should identify procedures used to assess, conceptualize and treat patients using CBT.

Course Policies and Procedures

1. Attendance: It is the responsibility of each student to attend all classes, take all exams, and turn in all assignments on time. **Please do not arrive late to class!**

Classroom Environment. It is expected that the classroom environment will be peaceful and respectful. Since it is distracting to have students use cell phones in class (for placing or receiving calls and/or text messages and email), **cell phone use in class is prohibited**.

2. Midterm Exam: There will be one take-home exam, with two weeks given to complete it. You will be given assessment and history data on a patient, and you will be instructed to develop a case formulation and treatment plan, based on cognitive behavior theory and therapy. Your report should include a short review of the empirical literature to support your theory and intervention, and a specific treatment plan tailored for the patient's needs (5-6 pages, in addition to a one-page bibliography). Submit via email to the Instructor by **Thursday March 14 (25% of grade)**.

3. Assignments.

a. *Behavioral Experiment*. I am assigning you to conduct a behavioral experiment on yourself, a consenting adult, or a pet. The consenting adult can be a current client if you obtain your supervisor's permission. Essentially, you will need to gather baseline data on a target behavior, thought, etc., and develop an experiment designed to change the frequency/intensity of that behavior. Write up your results in a 3-5 page paper. Grades will be assigned based on the thoughtfulness and thoroughness of the experiment and not on whether the intervention actually works. The paper will be due toward the end of the semester – **by Thursday April 18 (25% of grade)**. Submit via email.

b. *Hierarchy*. Generate a fear and avoidance hierarchy for an actual or hypothetical client (1-2 pages). Design some exposure exercises to elicit the fear response from your client, **due Tuesday March 26 (5% of grade)**.

c. *Concept Paper*. Write a 2-4 page (references can take additional space), single-spaced, research proposal/concept paper for testing a CBT intervention in an empirical study or research grant (worth 25% of your final course grade). The study can involve such a design as a controlled case study, randomized clinical trial, or some other design. As is common for a grant proposal, include the following sections: 1) Specific Aims (one paragraph or so), 2) Background and Significance (describing the problem to be researched, previous relevant literature, how your proposed project will fill a gap in the literature, and the clinical or societal significance on the project), 3) Preliminary studies (discussion of any work you have already done that is loosely relevant to this project, be it your master's thesis, current dissertation work, or other work, if applicable), 4) Research Design and Methods (describing the proposed participants, instruments, procedures, data analyses, how you arrived at your sample size, how you intend to deal with missing data and missed sessions, hypotheses, etc.), and 5) Ultimate Goals (one paragraph) (no budget paragraph is needed, although is typically included at the end of a proposal). References may come from mental health, psychology and psychiatry journals or books (start by searching PsycInfo). No more than 1-2 (non-PsycInfo) internet references may be used. **Topics must be approved by the instructor beforehand**. Papers must be typed with a 10-12 pt. font, single-spaced, with .5 to 1 inch margins, and are due via e-mail by **April 30**. Papers may be submitted early for corrective feedback. APA format is required for references (Please consult with the APA's Publication Manual-6th Edition, or with the instructor if you are not familiar with APA style. Also, see the instructor's website-Links tab for APA style tutorials). Students will present the projects in class at the end of the semester (**oral presentations are during the week of April 30; papers are due April 30**). **(25% of grade)**

d. *Homework*. In addition to readings, you will often have a few homework assignments to complete. You will be instructed to complete the same types of homework assignments associated with behavioral techniques that we assign to our patients. For example, I will ask you to self-monitor your behavior, thoughts, feelings, etc. These homework assignments will not be submitted for a grade, but instead will form the basis of discussion in

class. Please complete these tasks honestly with the knowledge that I will not see these private events or require you to self-disclose to the class. You will have control of what you choose to or not to self-disclose.

Guidelines: Here is a list of questions I would like you to keep in mind in advance of a discussion we may have about a particular assignment. Please be prepared to discuss your experience along the lines of these questions:

1. What you found helpful about the intervention, if anything;
2. What you did not like about the intervention, if anything;
3. What, if anything, you learned that will help you use this intervention successfully in a clinical situation;
4. How long (total over the course of the week) you spent completing the assignment.

e. *Discussion/Participation*. Extensive classroom discussion about readings and lectures, and about the homework assignments is expected. Participation in role plays and exercises is expected (**20% of grade**).

f. *Plagiarism Tutorial*. You **MUST** complete a web-based tutorial on plagiarism as part of your work in this course. The completed tutorial is due by **April 30**. Failure to complete the tutorial by that date will result in obtaining an “F” in the course. To complete the tutorial, visit the following website:

<http://www.jon-elhai.com/courses/plagiarism-tutorial>

4. Grading:

Grading scale

A	93-100	A-	90-92	B+	87-89
B	83-86	B-	80-82	C+	77-79
C	73-76	C-	70-72	D+	67-69
D	63-66	D-	60-62	F	< 60

No other grades will be given except as noted above. If the student is doing poorly in the course, it is the student’s responsibility to drop or withdraw from the course before the appropriate deadline. If it is too late to drop or withdraw from the course, a mark of “Incomplete” will not be assigned; rather the student will be assigned the actual grade earned.

Late assignments will be deducted 10% per business day late.

5. Academic Honesty: Department of Psychology Statement on Academic Honesty - Academic honesty is expected from students enrolled in courses and programs offered by the Department of Psychology; violations of this expectation will not be tolerated.

Violations of the expectation of academic honesty include, but are not limited to:

- * Obtaining or attempting to obtain a copy of an examination prior to its administration.
- * The unauthorized use of study material or textbooks during an examination.
- * Obtaining unauthorized assistance from and giving unauthorized assistance to another individual during an examination or completion of an assignment.
- * Plagiarism in written assignments. Plagiarism includes: (a) using, copying or paraphrasing another author’s materials without appropriate acknowledgment through quotation and citation; (b) unauthorized collaboration in the preparation of reports, term papers, or theses.

In accordance with the Policy Statement in the University Catalog, instructors have the responsibility and right to bring cases of alleged dishonesty to department, college, and university administrative units. Students involved in academic dishonesty may expect to receive a grade of F on specific assignments, as well as in the course where the assignment was made.

Student Behavior - Students are expected to follow University policy with regards to proper conduct in the classroom, as detailed in the University of Toledo Student Handbook (See <http://www.utoledo.edu/studentaffairs/dos/> for details.) Disciplinary action for violation of these policies will be decided on a case by case basis and will be in accord with University policy.

6. Class Communication: the Instructor will communicate to students by email about class announcements, changes to the course schedule (including class cancellations), and grades. **It is the student's responsibility to check their UT email account daily for such announcements.**

7. Additional Ground Rules: 1) Grade disputes must be submitted in writing in order to be considered. 2) Grievances about the course and/or instructor should be brought up with the instructor first in order to resolve the matter, prior to discussing the matter with the department/university's administration.

8. Office of Accessibility. Students registered with the Office of Accessibility for a disability must discuss possible accommodations with the Instructor during the first week of class in order to allow such accommodations to occur. All paperwork must be submitted to the Instructor during the second week of the course in order to allow accommodations.

Schedule of Classes and Readings (The assigned chapter should be read **before** each class)

Week	Required Reading	Class Topics	Assignment Due	Assignment
Jan 7	<p>-Weisz, J. R., Hawley, K. M., Pirkonis, P. A., Woody, S. R., & Follette, W. C. (2000). Stressing the (other) three Rs in the search for empirically supported treatments: Review procedures, research quality, relevance to practice and the public interest. <i>Clinical Psychology: Science and Practice</i>, 7, 243-258.</p> <p>-Addis, M. E. (2002). Methods for disseminating research products and increasing evidence-based practice: Promises, obstacles and future directions. <i>Clinical Psychology: Science and Practice</i>, 9, 367-378.</p> <p>-Barlow, D. H., Levitt, J. T., & Bufka, L. F. (1999). The dissemination of empirically supported treatments: A view to the future. <i>Behaviour Research and Therapy</i>, 37, S147-S162.</p> <p>-Chorpita, B. F., & Daleiden, E. L. (2004). Designs for instruction, designs for change: Distributing knowledge of evidence-based practice. <i>Clinical Psychology: Science and Practice</i>, 11, 332-335.</p>	<p>Introduction to the Course, Introduction to CBT, EBP, Dissemination</p>		
Jan 14	<p>-Pryor, K. (1999). <i>Don't shoot the dog</i>. New York: Bantam.</p> <p>-Segal, D. L., & Coolidge, F. L. (2003). Structured interviewing and DSM classification. In M. Hersen & S. M. Turner (Eds.), <i>Adult psychopathology and diagnosis</i> (4th ed., pp. 72-103). New York: John Wiley & Sons, Inc.</p> <p>-Schroeder, C. S. & Gordon, B. N. (1991). Chapter 3. Assessment. <i>Assessment and treatment of childhood problems</i> (pp. 40-70). New York: Guilford.</p>	<p>Conditioning, Behavioral Assessment, Structured Diagnostic Interviews</p>		

<p>Jan 21</p>	<p>-Bissett, R. T. & Hayes, S. C. (1999). The likely success of functional analysis tied to the DSM. <i>Behaviour Research and Therapy</i>, 37, 379-383.</p> <p>-Haynes, S. N., Leisen, M. B., & Blaine, D. D. (1997). Design of individualized behavioral treatment programs using functional analytic clinical case models. <i>Psychological Assessment</i>, 9, 334-348.</p> <p>-Nelson-Gray, R.O. & Farmer, R.F. (1999). Behavioral assessment of personality disorders. <i>Behaviour Research and Therapy</i>, 37, 347-368.</p> <p>-Lambert, M. J., Hansen, N. B., & Finch, A. E. (2001). Patient-focused research: Using patient outcome data to enhance treatment effects. <i>Journal of Consulting and Clinical Psychology</i>, 69, 159-172.</p>	<p>Functional Analysis, Ideographic Approaches, Monitoring Outcomes</p>		<p>Complete Activity Log charting activities throughout the day and week</p>
<p>Jan 28</p>	<p>-Persons, J. B. (1989). The Problem List. <i>Cognitive therapy in practice: A case formulation approach</i> (pp. 19-36). New York: Norton.</p> <p>-Persons, J. B. & Fresco, D. M. (2008). Adult depression. In J. Hunsley & E. J. Mash (Eds.) <i>A guide to assessments that work</i> (pp. 96-120). New York: Oxford University Press.</p> <p>-Kazdin, A. E. (1993). Evaluation in clinical practice: Clinically sensitive and systematic methods of treatment delivery. <i>Behavior Therapy</i>, 24, 11-45.</p>	<p>Discuss HW, Case Conceptualization, Treatment Planning</p>	<p>Activity Log (1/31)</p>	<p>Develop and execute a self-monitoring assessment for one week (A-B-C log)</p>
<p>Feb 4</p>	<p>-Beck, J. S. (1995). <i>Cognitive therapy: Basics and beyond</i>. New York: Guilford Press.</p>	<p>Discuss HW, The Thought Record, Cognitive Restructuring</p>	<p>A-B-C Log (2/7)</p>	<p>Complete your own Thought Record (with challenges to thoughts)</p>

Feb 11	<p>-Beck book (cont'd)</p> <p>-Gula, R. (2007). Nonsense: Red herrings, straw men, and sacred cows: How we abuse logic in our everyday language. Mt. Jackson, Virginia: Axios Press.</p> <p>-Persons, J. B. (2008). Cognitive theories and their clinical implications. <i>The case formulation approach to cognitive behavior therapy</i> (Chapter 2). New York: Guilford.</p> <p>-Barlow book – Chapter 6 (Depression)</p>	Discuss HW, Cognitive Restructuring, Cognitive Therapy for Depression, Roleplay Thought Records, Logical Fallacies	Thought record (2/12)	Discuss Logical Fallacies for Thursday's class this week
Feb 18	-Beck book (cont'd)	Beck's Cognitive Therapy Continued		Based on what you learned from your thought record, modify a behavior by modifying an antecedent, conseq, and/or behav.
Feb 25	<p>-Mennin, D. S. & Farach, F. (2007). Emotion and evolving treatments for adult psychopathology. <i>Clinical Psychology: Science and Practice</i>, 14, 329-352.</p> <p>-Greenberg, L. S. (2007). Emotion coming of age. <i>Clinical Psychology: Science and Practice</i>, 14,414-421.</p> <p>-Foa, E. B., & Kozak, M. J. (1986). Emotional processing of fear: Exposure to corrective information. <i>Psychological Bulletin</i>, 99, 20-35.</p>	Emotion; introduction to exposure theory	Behav. Modif. (2/28)	Midterm
Mar 4	-Trauma Focused7e CBT online course: http://goo.gl/gcr3C	SPRING BREAK	SPRING BREAK	SPRING BREAK

<p>Mar 11</p>	<p>-Moher, D., Schultz, K. F., Altman, D. G., & the CONSORT Group. (2001). The CONSORT statement: Revised recommendations for improving the quality of reports of parallel group randomized trials. <i>JAMA</i>, 285, 1987-1991.</p> <p>-Muthén, B. O., & Curran, P. J. (1997). General longitudinal modeling of individual differences in experimental designs: A latent variable framework for analysis and power estimation. <i>Psychological Methods</i>, 2, 371-402.</p>	<p>Testing CBTs, Randomized Controlled Trials</p>	<p>Midterm (3/14)</p>	
<p>Mar 18</p>	<p>-Bouton, M. E., Mineka, S., & Barlow, D. H. (2001). A modern learning theory perspective on the etiology of panic disorder. <i>Psychological Review</i>, 108, 4-32.</p> <p>-Hofmann, S. G. (2007). Cognitive factors that maintain social anxiety disorder: A comprehensive model and its treatment implications. <i>Cognitive Behaviour Therapy</i>, 36, 193-209.</p> <p>-Barlow book – Chapters 1 (Panic), 2 (PTSD), and 4 (OCD)</p>	<p>Discuss HW, Exposure theory and methods</p>		<p>Fear hierarchy</p>

<p>Mar 25</p>	<p>-Salkovskis, P. M., Clark, D. M., Hackmann, A., Wells, A., & Gelder, M. G. (1999). An experimental investigation of the role of safety-seeking behaviours in the maintenance of panic disorder with agoraphobia. <i>Behaviour Research and Therapy</i> 37, 559-574.</p> <p>- Alden, L. E. & Bieling, P. (1998). Interpersonal consequences of the pursuit of safety. <i>Behaviour Research and Therapy</i>, 36, 53-64.</p> <p>-Powers, M. B., Smits, J. A. J., & Telch, M. J. (2004). Disentangling the effects of safety-behavior utilization and safety-behavior availability during exposure-based treatment: A Placebo-Controlled Trial. <i>Journal of Consulting and Clinical Psychology</i>, 72, 448-454.</p> <p>-Weathers, F. W., & Keane, T. M. (1994). Posttraumatic stress disorder. In C. G. Last & M. Hersen (Eds.), <i>Adult behavior therapy casebook</i> (pp. 185-202). New York: Plenum Press.</p> <p>-Hofmann, S. G., Bufka, L. F., & Barlow, D. H. (1999). Panic provocation procedures in the treatment of panic disorder: Early perspectives and case studies. <i>Behavior Therapy</i>, 30, 305-317.</p>	<p>Discuss HW, Exposure therapy, Exposure Practice</p>	<p>Fear Hierarchy (3/26)</p>	
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Apr 8	<p>-Ferster, C.B. (1973). A functional analysis of depression. <i>American Psychologist</i>, 28, 857-870.</p> <p>-Jacobson, N. S., Martell, C. R., & Dimidjian, S. (2001). Behavioral activation treatment for depression: Returning to contextual roots. <i>Clinical Psychology: Science and Practice</i>, 8, 255-270.</p> <p>-Lejuez, C.W., Hopko, D. R., & Hopko, S. D. (2001). A brief behavioral activation treatment for depression: Treatment manual. <i>Behavior Modification</i>, 25, 255-286.</p> <p>-Barlow book – Chapter 8 (Behavioral Activation for Depression)</p> <p>-Muscle Relaxation: http://goo.gl/oQqe</p>	<p>Discuss HW, Behavioral Activation Treatment for Depression</p>		<p>Practice progressive muscle relaxation daily; track SUDS ratings before and after the exercise</p> <p>Behavioral experiment due next week</p>
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<p>Apr 15</p>	<p>-Bishop, S. R., Lau, M., et al. (2004). Mindfulness: A proposed operational definition. <i>Clinical Psychology: Science and Practice</i>, 11, 230-242.</p> <p>-Hayes, A. M., & Feldman, G. (2004). Clarifying the construct of mindfulness in the context of emotion regulation and the process of change in therapy. <i>Clinical Psychology: Science and Practice</i>, 11, 255-262.</p> <p>-Teasdale, J. D., Segal, Z. V., Williams, J. M. G., Ridgeway, V. A., Soulsby, J. M., Lau, M. A. (2000). Prevention of relapse/recurrence in major depression by mindfulness-based cognitive therapy. <i>Journal of Consulting & Clinical Psychology</i>, 68, 615-623.</p> <p>-Baer, R. A (2003). Mindfulness training as a clinical intervention: A conceptual and empirical review. <i>Clinical Psychology: Science and Practice</i>, 10, 125-143.</p> <p>-Dimidjian, S. & Linehan, M. M. (2003). Defining an agenda for future research on the clinical application of mindfulness practice. <i>Clinical Psychology: Science and Practice</i>, 10, 166-171.</p> <p>-Kabat-Zinn, J. (2003). Mindfulness-based interventions in context: Past, present, and future. <i>Clinical Psychology: Science and Practice</i>, 10, 144-156.</p> <p>-Roemer, R. & Orsillo, S. M. (2003). Mindfulness: A promising intervention strategy in need of further study. <i>Clinical Psychology: Science and Practice</i>, 10, 172-178.</p> <p>-Teasdale, J. D., Segal, Z. V., & Williams, J. M. G. (2003). Mindfulness training and problem formulation. <i>Clinical Psychology: Science and Practice</i>, 10, 157-60.</p> <p>-Blackledge, J. T. & Hayes, S. C. (2001). Emotion</p>	<p>Discuss HW, Mindfulness-based CBT</p> <p>Acceptance and Commitment Therapy</p>	<p>Relaxation record (4/16)</p> <p>Behavioral Experiment (4/18)</p>	
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	<p>regulation in acceptance and commitment therapy. <i>Journal of Clinical Psychology</i>, 57, 243-255.</p> <p>-Hayes, S. C. (1994). Content, context, and the types of psychological acceptance. In S. C. Hayes, N. S. Jacobsen, V. M. Follette, & M. J. Dougher. <i>Acceptance and change: Content and context in psychotherapy</i> (pp. 13-32). Reno: Context Press.</p> <p>-Blackledge, J. T. (2003). An introduction to relational frame theory: Basics and applications. <i>The Behavior Analyst Today</i>, 3, 421-433.</p>			
<p>Apr 22</p>	<p>-Mennin, D. S. & Fresco, D. M. (2009). Emotion regulation as an integrative framework for understanding and treating psychopathology. In A.M. Kring & D.S. Sloan (Editors). <i>Emotion Regulation and Psychopathology</i> (pp. 356-379), New York: Guilford Press.</p> <p>-Borkovec, T. D. & Sharpless. (2004). Generalized anxiety disorder: Bringing cognitive behavioral therapy into the valued present. In S. C. Hayes, V. M. Follette, & M. M. Linehan (Eds). <i>Mindfulness and Acceptance: Expanding the cognitive-behavioral tradition</i> (pp. 209-242). New York: Guilford.</p> <p>-Mennin, D. S., Heimberg, R. G., Turk, C. L., & Fresco, D. M. (2002). Applying an emotion regulation framework to integrative approaches to Generalized Anxiety Disorder. <i>Clinical Psychology: Science & Practice</i>, 9, 85-90.</p> <p>-Mennin, D. S., Heimberg, R. G., Turk, C. L., & Fresco, D. M. (2005). Emotion regulation deficits as a key feature of generalized anxiety disorder: Testing a theoretical model. <i>Behaviour Research and Therapy</i>, 43, 1281-1310</p>	<p>Emotion Regulation for GAD</p>		

Apr 29		Concept Paper presentations	Concept Paper (4/30)	
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Note: This syllabus may be appended by the instructor if necessary. Students are responsible for any changes made. This course's structure and content was adapted from David Fresco's CBT course at Kent State University.

