

Ron Diamond's View of
Psychotherapy:
 What is it and How to
 Make it More Effective
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Psychotherapy

- Psychotherapy is often caricatured as a vague, poorly defined set of interventions packaged in 50 minute blocks in a closed office, often dealing with problems reminiscent of those faced by Woody Allen.
- In the public mental health system, virtually everyone who comes in for treatment presents with multiple major functional impairments, and many are at risk for ~~incarceration or hospitalization~~

Wikipedia

- Psychotherapy is a range of techniques based on dialogue, communication and behavior change and which are designed to improve the mental health of a client or patient, or to improve group relationships (such as in a family).

Mayo Clinic

- Psychotherapy is a general term for a way of treating mental and emotional disorders by talking about your condition and related issues with a mental health professional. It's also known as talk therapy, counseling, psychosocial therapy or, simply, therapy

Ron Diamond

The conscious use of a professional relationship to facilitate change and growth in someone who is feeling stuck, or having limits to their ability to function because of limits they place on themselves

Components of Psychotherapy

- The dance of the relationship
- The techniques of supporting change

Differences between “therapy” and “being therapeutic”

- Different kind of relationship
- Different contract for change
- Intentionality of the change facilitator
- Types of change strategies commonly employed

Psychotherapy: types of interventions

- Problem solving around specific, immediate issues that would otherwise lead to destabilization
- Skill training that is required to be minimally successful in basic life skills: this includes social skill training
- Relapse prevention training to decrease maladaptive and destabilizing patterns of behavior
- Focused skill training and reframing to help the client better cope with intrusive memories and flashbacks of past trauma, and to decrease the

Psychotherapy: types of interventions (cont)

- Cognitive behavior skill training that helps the person take more control over the automatic thoughts that otherwise control mood and behavior
- Practical problem solving to decrease the risk of child abuse and increase the likelihood that parents can support a child's appropriate behavior
- Crisis intervention around the vicissitudes in the life of clients with few outside resources or supports, who would otherwise require the services of either ESU or engage in other emergency response

Psychotherapy: types of interventions (cont)

- Case management: helping clients organize and accomplish concrete tasks required for community stability

The “pot-hole” model of therapy

- Therapy is never “finished”, but it may be enough for the moment
- No one can completely predict the road ahead, but one can take some reasonable guesses
- Both road and driver can improve, or get worse

Interpersonal model of change

- Change always comes out of a relationship that is real
- The critical skill in in being able to form a relationship with someone who is difficult to relate to
- The person learns new ways to be in a relationship by being in one
- One person in the relationship cannot change, if the other person does not change

Irv Yalom: therapeutic factors

- Instillation of Hope
- Universality
- Imparting of information
- Altruism
- Corrective recapitulation of the primary family group
- Learning how to be part of a social group
- Imitative behavior
- Catharsis
- Existential factors
- Social cohesiveness

Whatever we are doing (med check, grocery shopping, handing out medications), we should be engaged in the process of therapy (using the relationship to promote positive change in the client)

- Is what we are doing for our benefit, or for the client's benefit?
- Will this interaction help the client feel more hopeful, stronger, more competent, more skilled?
- Have we become so caught up in the content that we forget to be therapeutic?

Work in the "here and now"

- There is always history
- There is hopefully a future
- There is always a content task
- The "Dance" is always important

Relationships

- There is always the "here and now": what is happening at this moment between therapist and client
- There is always history: what experience has the client had with other parents, friends, authority figures, etc
- There is always "the outside": how does this moment parallel or reflect what is now going on in other parts of the client's life

Yalom: The Gift of Therapy

- Remove obstacles to growth
- Avoid diagnosis (except for insurance companies)
- Therapist and patients as "fellow travelers"
- Empathy: looking out the patient's window
- Teach empathy
- Let the patient matter to you
- Acknowledge your errors
- Create a new therapy for each patient
- The therapeutic act, not the therapeutic word

The "dance" of the med check

- Assessment depends on what the client is willing to share--trust
- Motivation depends on shared goals
- My job is NOT to make the right diagnosis and prescribe the right medication
- My job is to help the client to be in a better place a year from now that he or she is now, and if appropriate to use medication as an effective tool in that process

Stages in relationship

- Trust:
 - Takes time
 - Involves "tests"
 - Emotional support, not just cognitive correctness
- Goals:
 - What does "getting better" mean?
- Values:
 - What is the belief about the problem?

Resistance:

- Issues of power in relationship
 - How do “one up” and “one down” people exert power
 - What happens if you and client disagree? Who gets to “label” the nature of the disagreement?

Matching Treatment and Readiness

Precontemplation:	→	Increase awareness and raise doubt
Contemplation:	→	Tip the balance
Preparation:	→	Negotiate a plan
Action:	→	Assist behavior change through small steps
Maintenance:	→	Prevent relapse and help lifestyle change

Todd C. Campbell 2003

Contrasting Communication Styles

Standard Approach	Motivational Approach
Focused on fixing the problem	Focused on patient's concerns and perspectives
Paternalistic relationship	Egalitarian partnership
Assumes patient is motivated	Match intervention to patient level
Advise, warn, persuade	Emphasizes personal choice
Ambivalence means that the patient is in denial	Ambivalence: normal part of the change process
Goals are prescribed	Goals are collaboratively set
Resistance is met with argumentation and correction.....	Resistance: interpersonal pattern influenced by provider behavior

Enhancing Motivation to Change

- Express empathy:
 - LISTEN
 - Ambivalence is normal and expected
- Encourage the consumer to talk about what her or she wants to be different
 - Encourage the consumer to explore what can make things different
- What role can medication play in this
Consumer's belief in the possibility of change is an important motivator

Psychotherapy in the grocery store

- Place does not define the relationship, but it does influence
- Intention of purpose does matter: what are you trying to accomplish
- Being a “good person” is important, but skills can help, a lot

Skills: relationship

- Developing empathy
- Pacing
- Working with the client's current motivation
- Rolling with resistance

Skills/ techniques

- Cognitive behavioral therapy CBT
- Dialectical behavior therapy (DBT)
- Interpersonal psychotherapy (IPT)
- Behavior therapy
- Skill training: teaching and training, not just doing
- Interpersonal skill training and feedback
- Problem solving (with, not for)

Interpersonal Therapy (IPT)

- Assumes that attachments and relationships are critical
- Goal is to promote effective relationships
- Relationship problems occur in 4 areas
 - Grief
 - Role Transitions
 - Disputes
 - Sensitivities/Disappointments

Cognitive Behavior Therapy (CBT)

- You cannot change how you feel, but you can change what you think and focus on
- What you think about influences how you feel
- Many of the negative thoughts are “automatic”, running as a tape in the background
 - Identify automatic thoughts
 - Change the “tape”
 - Decide what you want to focus on

Dialectical Behavior Therapy (DBT)

- Similar to CBT, initially developed for people with borderline disorder
- Focus on automatic assumptions that control behavior
- Skill based: assumes person can learn new skills
- Dialectical refers to tension of opposing ideas:
 - Patients may not have caused all of their own problems but they have to solve them anyway
 - Patients are doing the best they can, AND patients need to do better, try harder and be more motivated to change

Behavior Therapy

- Focus on one or two behaviors
- Record the occurrence of those behaviors
- Develop reinforcers
 - Rewards work better than punishments
 - Rewards that are very immediate work much better than those that are more distant
 - Size of reward may matter less than contingency

Insight

- Insight is an over-rated commodity
- It can help provide a cognitive structure to a person’s experience, but it is neither necessary nor sufficient for behavioral change

Goal for Psychotherapy

- Behavioral change
- Decreased distress
- Increased joy, aspiration and hope
- Improved resilience