NCERT Solutions Ch 5 Therapeutic Approaches Psychology

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Review Questions

1. Describe the nature and scope of psychotherapy. Highlight the importance of therapeutic relationship in psychotherapy.

Answer

Nature and scope of psychotherapy: Psychotherapy is a voluntary relationship between the one seeking treatment or the client and the one who treats or the therapist. The purpose of the relationship is to help the client to solve the psychological problems

being faced by her or him. The relationship is to help the client to solve the psychological problems being faced by her or him. The relationship is conducive for building the trust of the client so that problems may be freely discussed. Psychotherapies aim at changing the maladaptive behaviours, decreasing the sense of personal distress, and helping the client to adapt better to her/his environment. Inadequate marital, occupational and social adjustment also requires that major changes be made in an individual's personal environment.

All psychotherapies aim at a few or all of the following goals :

- (i) Reinforcing client's resolve for betterment.
- (ii) Lessening emotional pressure.
- (iii) Unfolding the potential for positive growth.
- (iv) Modifying habits.
- (v) Changing thinking patterns.
- (vi) Increasing self-awareness.
- (vii) Improving interpersonal relations and communication.
- (viii)Facilitating decision-making.
- (ix) Becoming aware of one's choices in life.
- (x) Relating to one's social environment in a more creative and self-aware manner.

The special relationship between the client and the therapist is known as the therapeutic relationship or alliance. There are two major components of a therapeutic alliance: The first component is the contractual nature of the relationship in which two willing individuals, the client and the therapist, enter into a partnership which aims at helping the client overcome her/his problems.

The second component of therapeutic alliance is the limited duration of the therapy. This alliance lasts until the client becomes able to deal with her/his problems and take control of her/his life.

This relationship has several unique properties. It is a trusting and confiding relationship. The high level of trust enables the client to unburden herself/himself to the therapist and confide her/his psychological and personal problems to the latter. The therapist encourages this by being accepting,

empathic, genuine and warm to the client. The therapist conveys by her/his words and

behaviours that s/he is not judging the client and will continue to show the same positive feelings towards the client even if the client is rude or confides all the wrong things that s/he may have done or thought about.

The therapeutic alliance also requires that the therapist must keep strict confidentiality of the experiences, events, feelings or thoughts disclosed by the client. The therapist must not exploit the trust and the confidence of the client in anyway.

2. What are the different types of psychotherapy? On what basis are they classified?

Answer

Different types of psychotherapy are:

(i) Psychodynamic therapy

(ii) Behaviour therapy

(iii) Humanistic-existential therapy

(iv) Biomedical therapy

Also, there are many alternative therapies such as yoga, meditation, acupuncture, herbal remedies etc.

Basis of classification of psychotherapy:

(i) On the cause which has led to the problem: Psychodynamic therapy is of the view that intrapsychic conflicts, i.e. the conflicts that are present within the psyche of the person, are the source of psychological problems.

(ii) On how did the cause come into existence: The psychodynamic therapy, unfulfilled desires of childhood and unresolved childhood fears lead to intrapsychic conflicts.
(iii) What is the chief method of treatment?: Psychodynamic therapy uses the methods of free association and reporting of dreams to elicit the thoughts and feelings of the client.
(iv) What is the nature of the therapeutic relationship between the client and the therapist?: Psychodynamic therapy assumes that the therapist understands the client's intrapsychic conflicts better than the client and hence it is the therapist who interprets the thoughts and feelings of the client to her/him so that s/he gains an understanding of the same.
(v) What is the chief benefit to the client?: Psychodynamic therapy values emotional insight as the important benefit that the client derives from the treatment. Emotional insight is present when the client understands her/his conflicts intellectually; is able to accept the same emotionally; and is able to change her/his emotions towards the conflicts.
(vi) On the duration of treatment: The duration of classical psycho- analysis may continue for several years. However, several recent versions of psychodynamic therapies are completed in 10–15 sessions.

3. A therapist asks the client to reveal all her/his thoughts including early childhood experiences. Describe the technique and type of therapy being used.

Answer

In this case psychodynamic therapy is used in the treatment of the client. Since the psychoanalytic approach views intrapsychic conflicts to be the cause of psychological

disorder. The first step in the treatment is to elicit this intrapsychic conflict. Psychoanalysis has invented free association and dream interpretation as two important methods for eliciting the intrapsychic conflicts. The free association method is the main method for understanding the client's problems. Once a therapeutic relationship is established, and the client feels comfortable, the therapist makes her/him lie down on the couch, close her/his eyes and asks her/him to speak whatever comes to mind without censoring it in anyway. The client is encouraged to freely associate one thought with another, and this method is called the method of free association. The censoring superego and the watchful ego are kept in abeyance as the client speaks whatever comes to mind in an atmosphere that is relaxed and trusting. As the therapist does not interrupt, the free flow of ideas, desires and conflicts of the unconscious, which had been suppressed by the ego, emerge into the conscious mind. This free uncensored verbal narrative of the client is a window into the client's unconscious to which the therapist gains access. Along with this technique, the client is asked to write down her/his dreams upon waking up. Psychoanalysts look upon dreams as symbols of the unfulfilled desires present in the unconscious. The images of the dreams are symbols which signify intrapsychic forces. Dreams use symbols because they are indirect expressions and hence would not

alert the ego. If the unfulfilled desires are expressed directly, the ever-vigilant egowould suppress them and that would lead to anxiety. These symbols are interpreted according to an accepted convention of translation as the indicators of unfulfilled desires and conflicts.

4. Discuss the various techniques used in behaviour therapy.

Answer

Various techniques used in behaviour therapy:

A range of techniques is available for changing behaviour. The principles of these techniques are to reduce the arousal level of the client, alter behaviour through classical conditioning or operant

conditioning with different contingencies of reinforcements, as well as to use vicarious learning procedures, if necessary.

Negative reinforcement and aversive conditioning are the two major techniques of behaviour modification.

(i) Negative reinforcement refers to following an undesired response with an outcome that painful or not liked. For example, one learns to put on woollen clothes, burn firewood or use electric heaters to avoid the unpleasant cold weather. One learns to move away from dangerous stimuli because they provide negative reinforcement.

(ii) Aversive conditioning refers to repeated association of undesired response with an aversive consequence. For example, an alcoholic is given a mild electric shock and asked to smell the alcohol. With repeated pairings the smell of alcohol is aversive as the pain of the shock is associated with it and the person will give up alcohol.

(iii) Positive reinforcement is given to increase the deficit if an adaptive behaviour occurs rarely. For example, if a child does not do homework regularly, positive reinforcement may be used by the child's mother by preparing the child's favourite dish whenever s/he does homework at the appointed time. The positive reinforcement of food will increase the

behaviour of doing homework at the appointed time.

(iv) Token economy in which persons with behavioural problems can be given a token as a reward every time a wanted behaviour occurs. The tokens are collected and exchanged for a reward such as an outing for the patient or a treat for the child.

(v) Unwanted behaviour can be reduced and wanted behaviour can be increased simultaneously through differential reinforcement. Positive reinforcement for the wanted behaviour and negative

reinforcement for the unwanted behaviour attempted together may be one such method. The other method is to positively reinforce the wanted behaviour and ignore the unwanted behaviour. The latter method is less painful and equally effective. For example, let us consider the case of a girl who sulks and cries when she is not taken to the cinema when she asks. The parent is instructed to take her to the cinema if she does not cry and sulk but not to take her if she does. Further, the parent is instructed to ignore the girl when she cries and sulks. The wanted behaviour of politely asking to be taken to the cinema increases and the unwanted behaviour of crying and sulking decreases.

5. Explain with the help of an example how cognitive distortions take place.

Answer

Cognitive distortions are ways of thinking which are general in nature but which distort the reality in a negative manner. These patterns of thought are called dysfunctional cognitive structures. They lead to errors of cognition about the social reality.

Aaron Beck's theory of psychological distress states that childhood experiences provided by the family and society develop core schemas or systems, which include beliefs and action patterns in the individual. Thus, a client, who was neglected by the parents as a child, develops the core schema of "I am not wanted". During the course of life, a critical incident occurs in her/his life. S/he is publicly ridiculed by the teacher in school. This critical incident triggers the core schema of "I am not wanted" leading to the development of negative automatic thoughts. Negative thoughts are persistent irrational thoughts such as "nobody loves me", "I am ugly", "I am stupid", "I will not succeed", etc. Such negative automatic thoughts are characterised by cognitive distortions. Repeated occurrence of these thoughts leads to the development of feelings of anxiety and depression. The therapist uses questioning, which is gentle, non-threatening disputation of the client's beliefs and thoughts. Examples of such question would be, "Why should everyone love you?", "What does it mean to you to succeed?" etc.

6. Which therapy encourages the client to seek personal growth and actualise their potential? Write about the therapies which are based on this principle.

Answer

Humanistic-existential therapy encourages the client to seek personal growth and actualise their potential. It states that psychological distress arises from feelings of loneliness, alienation, and an inability to find meaning and genuine fulfilment in life.

The therapies which are based on this principle are:

(i) Existential therapy: There is a spiritual unconscious, which is the storehouse of love, aesthetic awareness, and values of life. Neurotic anxieties arise when the problems of life are attached to the physical, psychological or spiritual aspects of one's existence. Frankl emphasised the role of spiritual anxieties in leading to meaninglessness and hence it may be called an existential anxiety, i.e. neurotic anxiety of spiritual origin.

(ii) Client-centred therapy: Client-centred therapy was given by Carl Rogers. He combined scientific rigour with the individualised practice of client-centred psychotherapy. Rogers brought into psychotherapy the concept of self, with freedom and choice as the core of one's being. The therapy provides a warm relationship in which the client can reconnect with her/his disintegrated feelings. The therapist shows empathy, i.e. understanding the client's experience as if it were her/his own, is warm and has unconditional positive regard, i.e. total acceptance of the client as s/he is. Empathy sets up an emotional resonance between the therapist and the client.

(iii) Gestalt therapy: The German word gestalt means 'whole'. This therapy was given by Freiderick (Fritz) Perls together with his wife Laura Perls. The goal of gestalt therapy is to increase an individual's self-awareness and self- acceptance. The client is taught to recognise the bodily processes and the emotions that are being blocked out from awareness. The therapist does this by encouraging the client to act out fantasies about feelings and conflicts. This therapy can also be used in group settings.

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7. What are the factors that contribute to healing in psychotherapy? Enumerate some of the alternative therapies.

Answer

Factors Contributing to Healing in Psychotherapy are:

(i) A major factor in the healing is the techniques adopted by the therapist and the implementation of the same with the patient/client. If the behavioural system and the CBT school are adopted to heal an anxious client, the relaxation procedures and the cognitive restructuring largely contribute to the healing.

(ii) The therapeutic alliance, which is formed between the therapist and the patient/client, has healing properties, because of the regular availability of the therapist, and the warmth and empathy provided by the therapist.

(iii) At the outset of therapy while the patient/client is being interviewed in the initial sessions to understand the nature of the problem, s/he unburdens the emotional problems being faced. This process of emotional unburdening is known as catharsis, and it has healing properties.

(iv) There are several non-specific factors associated with psychotherapy. Some of these factors are attributed to the patient/client and some to the therapist. These factors are called non-specific because they occur across different systems of psychotherapy and across different clients/patients and different therapists. Non-specific factors attributable to the client/patient are motivation for change, expectation of improvement due to the treatment,

etc. These are called patient variables. Non-specific factors attributable to the therapist are positive nature, absence of unresolved emotional conflicts, presence of good mental health, etc. These are called therapist variables.

Some of the alternative therapies are Yoga, meditations, acupuncture, herbal remedies etc.

8. What are the techniques used in the rehabilitation of the mentally ill?

Answer

The treatment of psychological disorders has two components, i.e. reduction of symptoms, and improving the level of functioning or quality of life. In the case of milder disorders such as generalised anxiety, reactive depression or phobia, reduction of symptoms is associated with an improvement in the quality of life. However, in the case of severe mental disorders such as schizophrenia, reduction of symptoms may not be associated with an improvement in the quality suffer from negative symptoms such as disinterest and lack of motivation to do work or to interact with people.

The aim of rehabilitation is to empower the patient to become a productive member of society to the extent possible. In rehabilitation, the patients are given occupational therapy, social skills training, and vocational therapy. In occupational therapy, the patients are taught skills such as candle making, paper bag making and weaving to help them to form a work discipline. Social skills training helps the patients to develop interpersonal skills through role play, imitation and instruction. The objective is to teach the patient to function in a social group. Cognitive retraining is given to improve the basic cognitive functions of attention, memory and executive functions. After the patient improves sufficiently, vocational training is given wherein the patient is helped to gain skills necessary to undertake productive employment.

9. How would a social learning theorist account for a phobic fear of lizards/cockroaches? How would a psychoanalyst account for the same phobia?

Answer

Systematic desensitisation is a technique introduced by Wolpe for treating phobias or irrational fears. The client is interviewed to elicit fear-provoking situations and together with the client, the therapist prepares a hierarchy of anxiety-provoking stimuli with the least anxiety-provoking stimuli at the bottom of the hierarchy. The therapist relaxes the client and asks the client to think about the least anxiety-provoking situation. The client is asked to stop thinking of the fearful situation if the

slightest tension is felt. Over sessions, the client is able to imagine more severe fearprovoking situations while maintaining the relaxation. The client gets systematically desensitised to the fear.

10. Should Electro-convulsive Therapy (ECT) be used in the treatment of mental disorders?

Answer

Yes, Electro-convulsive Therapy (ECT) can be used in the treatment of mental disorders. Electro-convulsive Therapy (ECT) is another form of biomedical therapy. Mild electric shock is given via electrodes to the brain of the patient to induce convulsions. The shock is given by the psychiatrist only when it is necessary for the improvement of the patient. ECT is not a routine treatment and is given only when drugs are not effective in controlling the symptoms of the patient.

11. What kind of problems is cognitive behaviour therapy best suited for?

Answer

Cognitive behaviour treatment best suited for a wide range of psychological disorders such as anxiety, depression, panic attacks, and borderline personality, etc. adopts a bio-

CBT psychosocial approach to the delineation of psychopathology. It combines cognitive therapy with behavioural techniques.