**Chapter 1. Defining and Comparing the Psychotherapies**

1. The text authors cite an estimate that there are how many brands of psychotherapy in marketplace?

A) 50 C) 320

B) 150 \* D) 500

2. Theoretical orientations generally provide a consistent perspective on all of the following EXCEPT:

A) human behavior. C) mechanisms of therapeutic change.

\* B) human development. D) psychopathology.

**W** 3. Prochaska and Norcross's definition of psychotherapy would include all of the following EXCEPT:

A) an informed and intentional application.

B) clinical methods and interpersonal stances.

C) a derivation of established psychological principles.

\* D) assisting people to change in the direction the therapist deems desirable.

4. According to the textbook's authors, which of the following is FALSE regarding expectations:

A) a positive expectation is a critical precondition for therapy to continue.

\* B) expectation is a central process of change.

C) expectation is an important variable for all systems of therapy.

D) it refers to a patient's expectation about procedures in therapy.

5. The text authors assert that psychotherapy theories help clinicians do all of the following EXCEPT:

A) describe the clinical phenomena.

\* B) understand how to adapt their therapeutic style to individual clients.

C) delimit the amount of relevant information.

D) prioritize their case conceptualization and guide their treatment.

6. Jean views the therapeutic relationship as a necessary but not sufficient precondition for therapy to

proceed. Jean is likely to practice:

\* A) behavior therapy.

B) existential therapy.

C) person-centered therapy.

D) psychoanalytic therapy.

7. When you asked a therapist to describe her approach, she responded that she is “eclectic.” What did she mean by this?

\* A) She tries to tailor her approach to the client’s specific style and problems.

B) She is very committed to one system of psychotherapy.

C) She relies on common factors to promote positive client outcomes.

D) She uses only those techniques that have clearly been shown by research to help people change.

**W** 8. Which therapy believes the therapeutic relationship is necessary and sufficient for constructive personality change?

A) Behavior therapy

B) Existential therapy

\* C) Person-centered therapy

D) Psychoanalytic therapy

9. According to Jerome Frank, therapeutic change is predominantly a function of which of the following?

A) Free association \* B) Rationale or conceptual scheme

C) Progressive relaxation

1. None of the above

10. Maria and Salvatore are having marital difficulties. Their therapist recognizes that for treating marital conflict, psychotherapy research has generally demonstrated the differential effectiveness of:

A) behavior therapy.

B) cognitive therapy.

C) Rogerian therapy.

\* D) systemic therapy.

**W** 11. The conceptual level of analysis of change processes is:

A) technical. C) relational.

B) theoretical. \* D) intermediate between technique and theory.

12. Common factors in psychotherapy refer to:

A) the unique change processes derived from each therapy system.

\* B) nonspecific factors that are common to even disparate forms of therapy.

C) the notion that all psychotherapies produce equivalent outcomes.

D) the concept that psychotherapy is not that different from other helping professions.

13. The text authors suggest that of the common factors that have been proposed, two appear to have the most consensual support. They are:

A) the Hawthorne effect and the therapeutic relationship.

B) improved self-esteem and mastery.

\* C) the therapeutic relationship and positive expectations.

D) the Hawthorne effect and exposure to previously avoided stimuli or situations.

14. The Hawthorne effect refers to:

A) the expectations for success that a client brings to any therapy relationship.

B) the added value of a good therapy relationship on therapy outcomes.

\* C) improvements in behavior as a result of increased attention from others.

D) research studies that show a significant difference between the treatment and placebo control group.

15. Specific factors refer to:

A) changes in client behavior that are related to the quality of therapy relationship.

B) the acquisition and practice of new behaviors.

C) those client behavioral changes related to emotional expression or interpretation.

\* D) specific procedures advanced by different therapies to promote change.

16. The information given a client in psychotherapy concerning environmental events is called:

A) consciousness raising.

\* B) education.

C) feedback.

D) reinforcement.

17. Carole was very worried about the C grade she was to receive in her Research Methodology course. After reviewing published material from the university, she was very relieved when she learned that such a grade was average for most students. This is an example of:

A) consciousness raising.

\* B) education.

C) feedback.

D) reinforcement.

18. Thomas, an exceptionally qualified student, interviewed at a number of competitive doctoral programs this year but was not accepted. He decided to never apply again because he believed he would continue to be rejected. After speaking with knowledgeable professors he realized that he did not know the rationale for being rejected by these programs (e.g., they could have been looking for someone with different research interests), and he decided to apply again next year. This is an example of:

A) contingency management.

B) education.

\* C) feedback.

D) reevaluation.

19. Which of the following theories talks primarily about the *content* of therapy?

A) Behavioral

B) Integrative

\* C) Existential

D) Systemic

20. Which of the following theories does NOT talk primarily about the *content* of therapy?

A) Psychoanalysis C) Existential

\* B) Behavioral D) Multicultural

21. The transtheoretical model is able to identify meaningful points of convergence and contention among psychotherapy systems by employing:

A) a method for contrasting global theories of therapy.

\* B) an intermediate level of analysis of change processes.

C) a low level analysis of specific clinical interventions or techniques.

D) a broad integration of both common and specific factors.

**W** 22. The text authors’ integrative model supports comparative analysis of systems of psychotherapy by:

1. minimizing the focus on levels of personal functioning.

\* B) assuming a limited number of change processes.

C) categorizing therapy systems by their stage of change.

D) linking systems of therapy to their implicit and explicit theory of psychopathology.

23. The processes of change are:

A) components of specific therapy systems.

B) concrete and specific interventions suggested by therapy systems.

\* C) generic change strategies that cut across many therapy systems.

D) alternative names for therapy systems.

24. When the information given clients is contained in the stimulation generated by the individual's own actions and experiences, we call that:

A) contingency management.

B) counterconditioning.

C) education.

\* D) feedback.

25. Cathartic reactions evoked by observing emotional scenes in the environment is called:

A) corrective emotional experiences.

\* B) dramatic relief.

C) environmental catharsis.

D) reactionary catharsis.

26. A conflict between a desire to be independent and fears about leaving home would be considered:

\* A) intrapersonal.

B) interpersonal.

C) individuo-social.

D) beyond growth to fulfillment.

27. A conflict between a woman who likes to save money and her husband who likes to spend money would be considered:

A) intrapersonal.

\* B) interpersonal.

C) individuo-social.

D) beyond growth to fulfillment.

28. A conflict for an individual who wants to live a homosexual life but is afraid of the ostracism that may occur because of society's lack of acceptance of homosexual individuals would be considered:

A) intrapersonal.

B) interpersonal.

\* C) individuo-social.

D) beyond growth to fulfillment.

29.  would be considered a good emotional bowel movement.

\* A) Catharsis

C) Consciousness raising

B) Self liberation

D) Social liberation

**W** 30. Changing responses to consequences without changing contingencies would be considered:

A) contingency management. \* C) reevaluation.

B) counterconditioning. D) stimulus control.

31. Changing our responses to stimuli is referred to as \_\_\_\_\_\_\_, whereas changing the environment involves \_\_\_\_\_\_\_\_\_.

A) contingency management; counterconditioning

\* B) counterconditioning; stimulus control

C) counterconditioning; contingency management

D) stimulus control; contingency management

32. In psychotherapy studies, an attention placebo control group is one in which comparable time or attention to the active treatment group is provided without:

A) a therapeutic relationship. \* C) specific interventions.

B) any of psychotherapy’s common factors. D) producing the Hawthorne effect.

**Chapter 1. Defining and Comparing the Psychotherapies**

1. The textbook authors choose an integrative model to evaluate each system of psychotherapy. Take a position for or against an integrative model. If you argue for an integrative model, be sure to present its advantages. If you argue against an integrative model, present your criticisms as well as an alternative.

2. What are the criteria for the definition of psychotherapy advanced by the authors? Apply and critique the authors’ definition of psychotherapy

3. Change mechanisms and the therapeutic relationship are placed on equal footing within the authors’ definition of psychotherapy. Develop a rationale with substantiation for either their position or the importance of one factor over the other.

4. Present the case for the value and importance of a theoretical framework for the effective practice of psychotherapy. Identify and discuss the key elements of a theory. Rebut the case against reliance on theory for psychotherapy conceptualization and treatment.

5. Positive expectation is an active ingredient in all systems of therapy. Discuss the findings of studies that investigate the role and effect of positive expectation in therapy. Further, discuss specific examples of expectancy and potential usefulness in orientation to therapy.

6. Describe the classic Hawthorne studies and identify specific implications of these studies for the process and outcome of psychotherapy.

7. Using Frank’s view on the common factors of all psychological healing, compare and contrast a contemporary psychotherapist with an shaman or a particularly helpful professor.

8. A young woman comes into your office and tells you she is considering entering psychotherapy but is somewhat skeptical at this point. She asks you to tell her the specific processes through which you will help her change. How would you respond?

9. When you explain to a client that you will be using techniques aimed at consciousness raising, he informs you that he uses prayer to maintain a clear conscience and needs no help in this matter. Explain to your client what you mean by consciousness raising.

10. Some common factors have been found to be so powerful that Garfield and others have suggested a “common factors” therapy. Identify the major common factors and make a case both for a common factors therapy and for the importance of a specific theoretical system inclusive of common factors.

11. You are working with a 24-year-old female whose ongoing concerns revolve around relationships and intimacy, conflicts with an authoritarian father, and symptoms of eating disorders. Describe and explain your initial choices of awareness to action change processes and use of experiential to environmental levels of change.

12. You are sitting in a room with a psychoanalytic therapist and a behavior therapist. The psychoanalyst insists that only those processes of change that increase awareness should be used therapeutically. The behaviorist argues that only action-oriented processes are worth considering. Join the argument as an integrationist and explain why both awareness and action processes of change should be used.

13. A young woman is preparing to leave home for the first time in order to attend an out-of-state college. Three months after arriving at school, she feels overwhelmed by a number of problems. She goes through bouts of home sickness, followed by weeks when she has no desire to speak with her parents. She has been arguing with her roommate almost non-stop. She also finds herself in an environment in which her conservative religious views often leave her open to criticism. Finally, she has recently devoted a lot of thought to what type of person she wants to become. Classify each of these problems in terms of Maddi’s conflict view of personality and psychopathology. In doing so, describe each of the conflict areas and indicate how each problem fits into the assigned area.

14. As a researcher, you are interested in testing a promising new therapeutic technique — common psychobabble therapy (CPT). Design a study to rigorously compare the outcome of CPT with systematic desensitization for the treatment of anxiety disorder. When designing your experiment be sure to keep the Hawthorne effect and other nonspecific (or common) variables in mind.

15. Pat has recently embraced a homosexual lifestyle. Although happy with his/her new life, he/she feels very anxious about the decision. You decide that Pat would benefit from changes aimed at both self-liberation and social-liberation. Give an example of each applied to Pat’s case.