

PSYC 862: COGNITIVE BEHAVIORAL THERAPY WITH ADULTS II

<u>Day/Time:</u>	Friday 9:00 – 11:40	<u>Location:</u>	Remote
<u>Instructors:</u>	Keith Renshaw		Kevin Young
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<u>Office:</u>	Remote		Remote
<u>Office Hours:</u>	By appointment		By appointment

Course Description:

This course is designed to build on your initial instruction in cognitive-behavioral theory and therapy by furthering your understanding of and ability to apply this theory in therapy settings. The overall purpose is to develop your ability to integrate theory, principles, and applications of cognitive therapy and behavioral therapy for a variety of psychological problems. In addition, the literature regarding treatment of specific anxiety disorders and couples distress will be covered, and you will receive training in specific cognitive-behavioral techniques for these issues.

This course will utilize several modes of learning, including readings, lecture, discussion, example video/audiotapes, homework, role plays, and supervision of actual clinical cases. We will not use tests or other methods to grade you, and the grades will simply be “Satisfactory” or “No Credit.” This should not, however, give you the impression that you can “slide by” on readings or assignments. Each aspect of the coursework is **essential** to the development of your ability to apply cognitive-behavioral therapy. Class time will be split between didactic instruction and active group supervision of cases. Active participation in supervision of all cases (not just your own) is integral to the learning that will occur in this course.

As before, the course is not intended to convey that cognitive-behavioral therapy is the only acceptable therapy to practice. Rather, it is intended to further inform you of (a) the problems for which cognitive-behavioral therapy has been shown to be efficacious and/or effective, (b) the steps and techniques involved in conducting cognitive-behavioral therapy, particularly for anxiety disorders and couples’ distress, and (c) the flexibility of this therapy when it is based on a coherent case conceptualization.

Course Goals:

1. Further develop your professional identity as a therapist, an understanding of how your personal identity can impact your professional role, and an ability to behave in ways demonstrate integrity, accountability, and concern for the welfare of others
2. Further your understanding of the principles and tenets of cognitive and behavioral theories with regard to mental health and broader functioning in general, and in regard to anxiety in particular
3. Further your competence in:
 - a. developing a comprehensive and cohesive cognitive-behavioral case conceptualization based on assessment, diagnosis, issues of diversity and other individual differences, and contextual factors;
 - b. developing a treatment plan based on a cognitive-behavioral case conceptualization
 - c. applying behavioral and cognitive therapy techniques
 - d. carrying out a basic cognitive-behavioral treatment plan and understanding how the case conceptualization drives therapeutic activity
4. Further your understanding of how issues of diversity (e.g., age, race, ethnicity, culture, sexual orientation) can impact functioning and response to treatment, and how therapist and client identities can interact in ways that affect progress in therapy
5. Further your appreciation of the importance of the therapeutic relationship to cognitive-behavioral therapy, and obtain practice in and guidance on establishing and maintaining effective relationships with therapy recipients
6. Further your competence in effectively monitoring treatment response and adapting treatment as needed
7. Further your ability to seek and demonstrate openness and responsiveness to feedback and supervision
8. Further your engagement in self-reflection about your performance and your engagement in self-care that promotes your well-being (and, thus, your effectiveness as a therapist)

Evaluation of Performance

The grading scale in this course is “Satisfactory” or “No Credit.” Students are evaluated based on (a) engagement in class discussions and completion of assignments; (b) active participation in supervision; (c) skill acquisition, assessed via listening to and/or watching recordings of all therapy sessions conducted; (d) appropriate and ethical conduct in the delivery of therapy, including record-keeping and other associated clinic duties; and (e) responsiveness to feedback on progress notes and reports.

Classroom Climate

George Mason and the Psychology Department seek to create a learning environment that fosters respect for people across identities. We welcome and value individuals and their differences, including gender expression and identity, race, economic status, sex, sexuality, ethnicity, national origin, first language, religion, age and ability. We recognize that everyone comes from different backgrounds – those differences enhance our learning and understanding of the experiences of others. This class involves intensive, personal work. We expect all students and instructors to maintain respect for others and to contribute to a supportive environment.

Moreover, George Mason and the Psychology Department are committed to providing a learning, living and working environment that is free from discrimination and other acts of interpersonal violence. We encourage students who believe that they have been sexually harassed, assaulted or subjected to sexual misconduct to seek assistance and support through Mason’s [Title IX Office](#), the [Student Support and Advocacy Center](#) (703-380-1434) or [Counseling and Psychological Services](#) (703-993-2380). *Students who believe they have been subject to other forms of discrimination are encouraged to report this incident to Mason’s [Compliance, Diversity, and Ethics Office](#). Of note, the instructors are designated as “Responsible Employees” and required to report all disclosures of sexual assault, interpersonal violence, and stalking to Mason’s Title IX Office. That office will then follow up with students to provide resources and assistance.*

Communications and Technology

We will meet remotely this semester, due to the pandemic. Zoom links have been distributed. Please use those links for our virtual classes. Please plan to login fully, rather than use the dial-in number, unless dial-in is needed. If you are comfortable, please use your video – however, if you prefer not to, that is fine.

All course materials posted to Blackboard or other course site are private to this class; by federal law, any materials that identify specific students (via their name, voice, or image) must not be shared with anyone not enrolled in this class. Similarly, any videorecordings of class meetings that include audio, visual, or textual information from other students are private and must not be shared outside the class. Live video conference meetings (e.g. Collaborate or Zoom) that include audio, textual, or visual information from other students must be viewed privately to the extent possible, and should not be shared with others in your household or recorded and shared outside the class. When discussing case material, please ensure you have a way to listen to the class discussion privately, either with headsets or by using a phone for audio.

We understand that many students use electronic devices to take notes, and this semester, electronic devices are necessary to login to class. Because of the potential for distraction, we request that **you disable all forms of communication, specifically including email and social media, during class**. If you anticipate needing access to such communication during class, please inform the instructors ahead of time.

Mason uses electronic mail to provide official information to students. Examples include communications from course instructors, notices from the library, notices about academic standing, financial aid information, class materials, assignments, questions, and instructor feedback. Students are responsible for the content of university communication sent to their Mason e-mail account and are required to activate that account and check it regularly. Readings from instructors will be provided by email or through Blackboard.

The instructor will notify the class of any cancellations or changes to the schedule by email.

Disabilities:

Disability Services at George Mason University is committed to providing equitable access to learning opportunities for all students by upholding the laws that ensure equal treatment of people with disabilities. If you are seeking accommodations for this class, please first visit <http://ds.gmu.edu/> for detailed information about the Disability Services registration process. Then please discuss your approved accommodations with me. Disability Services is located in Student Union Building I (SUB I), Suite 2500. Email: ods@gmu.edu | Phone: 703-993-2474.

Gender Identity and Pronoun Use

If you wish, please share your name and gender pronouns with me and how best to address you in class and via email. Keith and Kevin both use he/him/his, and you may address us as Keith and Kevin, in email and verbally.

Academic Integrity:

The integrity of the University community is affected by the individual choices made by each of us. Mason has an Honor Code (<https://oai.gmu.edu/mason-honor-code/full-honor-code-document/>) with clear guidelines regarding academic integrity. Three fundamental and rather simple principles to follow at all times are that: (1) all work submitted be your own; (2) when using the work or ideas of others, including fellow students, give full credit through accurate citations; and (3) if you are uncertain about the ground rules on a particular assignment, ask for clarification. No grade is important enough to justify academic misconduct. Plagiarism means using the exact words, opinions, or factual information from another person without giving the person credit. Writers give credit through accepted documentation styles, such as parenthetical citation, footnotes, or endnotes. Paraphrased material must also be cited, using the appropriate format for this class. A simple listing of books or articles is not sufficient. Plagiarism is the equivalent of intellectual robbery and cannot be tolerated in the academic setting. If you have any doubts about what constitutes plagiarism, please see me.

CLASS SCHEDULE AND IMPORTANT DATES

2/1 Final Add Date

2/12 Final Drop Date with 100% refund

2/16 Final Drop Date with 50% refund

2/17-3/1 Unrestricted withdrawal period

Week	Topic	Readings
1	Exposure Therapy Theory Techniques	Abramowitz (2013) Abramowitz et al. (2019): Ch. 3 Stewart & Craske (2020) Craske et al. (2014) – optional
2	Exposure Therapy Practice Panic Disorder CB Conceptualization	Goldstein & Chambless (1980): pp. 401-406 Abramowitz et al. (2019) Ch. 4-6 Barlow (2014): Ch 1
3	Panic Disorder CB Treatment Interoceptive Exposure	Craske & Barlow (2007)
4	Generalized Anxiety Disorder CB Conceptualization CB Treatment	Newman et al. (2013) McCabe-Bennett et al. (2018) <i>OPTIONAL: Newman et al. (2017)</i>
5	Generalized Anxiety Disorder (cont)	Barlow (2014): Ch. 5 Zinbarg et al. (2006)
6	Social Anxiety Disorder CB Conceptualization CB Treatment	Barlow (2014): Ch. 3 Golden (2011)

7	Obsessive Compulsive Disorder Behavioral Conceptualization Exposure/Response Prevention Imaginal Exposure	Barlow (2014): Ch. 4 Steketee (1993): Ch. 9 Williams et al. (2020)
8	Obsessive Compulsive Disorder (cont)	Yule & Whittal (2017) Ludvik et al. (2015) Grayson (2010)
9	Posttraumatic Stress Disorder CB Conceptualizations Empirical Status of Treatments	Gillihan et al. (2014) Watkins et al. (2018)
10	Posttraumatic Stress Disorder Prolonged Exposure Therapy Written Exposure Therapy	Foa et al. (2019) Sloan & Marx (2019)
11	Posttraumatic Stress Disorder Cognitive Processing Therapy Minority Populations	Barlow (2014): Ch. 2 Ennis et al. (2020) Hinton et al. (2012)
12	Couples Distress CB Conceptualization Basic CBT Approaches	Gurman et al. (2015): Ch.1-2
13	Couples Distress Integrative Beh Coup Ther Other Approaches	Gurman et al. (2015): Ch. 3-5 Christensen et al. (2010)
14	Wrap-Up	

Reading List

Required Texts

Abramowitz, J. S., Deacon, B. J., & Whiteside, S. P. H. (2019). *Exposure therapy for anxiety: Principles and practice (2nd ed.)*. New York, NY: Guilford.

Barlow, D. H. (2014). *Clinical handbook of psychological disorders: A step-by-step treatment manual (5th ed.)*. New York: Guilford.

Optional Text

Gurman, A. S., Lebow, J. L., & Snyder, D. K. (2015). *Clinical handbook of couple therapy (5th ed.)*. New York: Guilford.

Articles/Chapters/Workbooks

Abramowitz, J. S. (2013). The practice of exposure therapy: Relevance of cognitive-behavioral theory and extinction theory. *Behavior Therapy, 44*, 548-558.

Christensen, A., Atkins, D. C., Baucom, B., & Yi, J. (2010). Marital status and satisfaction five years following a randomized clinical trial comparing traditional versus integrative behavioral couple therapy. *Journal of Consulting and Clinical Psychology, 78*, 225-235.

Craske, M. G., & Barlow, D. H. (2007). *Mastery of your anxiety and panic: Therapist guide (4th ed.)*. New York: Oxford University Press.

Craske, M. G., Treanor, M., Conway, C. C., Zbozinek, T., & Vervliet, B. (2014). Maximizing exposure therapy: An inhibitory learning approach. *Behaviour Research and Therapy, 58*, 10-23.

- Ennis, N., Shorer, S., Shoval-Zuckerman, Y., Freedman, S., Monson, C. M., & Dekel, R. (2020). Treating posttraumatic stress disorder across cultures: A systematic review of cultural adaptations of trauma-focused cognitive behavioral therapies. *Journal of Clinical Psychology, 76*, 587-611.
- Foa, E. B., Hembree, E. A., Rothbaum, B. O., & Rauch, S. A. M. (2019). *Prolonged exposure therapy for PTSD: Emotional processing of traumatic experiences – Therapist guide (2nd ed.)*. New York: Oxford University Press.
- Gillihan, S. J., Cahill, S. P., & Foa, E. B. (2014). Psychological theories of PTSD. In M. J. Friedman, T. M. Keane, & P. A. Resick (Eds.), *Handbook of PTSD: Science and practice* (pp. 166-184). New York: Guilford.
- Golden, A. (2011). Wrestling with the beaver: Embracing absurd exposure in the treatment of social anxiety disorder. *the Behavior Therapist, 34*, 87-90.
- Goldstein, A. J., & Chambless, D. L. (1980). Comprehensive treatment of agoraphobia. In A. J. Goldstein & E. B. Foa (Eds.), *Handbook of behavioural interventions: A clinical guide*. New York: Wiley.
- Grayson, J. B. (2010). OCD and intolerance of uncertainty: Treatment issues. *Journal of Cognitive Psychotherapy: An International Quarterly, 24*, 3-15.
- Hinton, D. E., Rivera, E. I., Hofman, S. G., Barlow, D. H., & Otto, M. W. (2012). Adapting CBT for traumatized refugees and ethnic minority patients: Examples from culturally adapted CBT (CA-CBT). *Transcultural Psychiatry, 49*, 340-365.
- Ludvik, D., Boschen, M. J., & Neumann, D. L. (2015). Effective behavioural strategies for reducing disgust in contamination-related OCD: A review. *Clinical Psychology Review, 42*, 116-129.
- McCabe-Bennett, H., Fracalanza, K., & Antony, M. M. (2018). The psychological treatment of generalized anxiety disorder. In D. David, S. J. Lynn, & G. H. Montgomery (Eds.), *Evidence-based psychotherapy: The state of the science and practice (1st ed.)* (pp. 95-122). New York, NY: Wiley & Sons.
- Newman, M. G., Llera, S. J., Erickson, T. M., Przeworski, A., & Castonguay, L. G. (2013). Worry and generalized anxiety disorder: A review and theoretical synthesis on nature, etiology, mechanisms, and treatment. *Annual Review of Clinical Psychology, 9*, 275-297.
- Newman, M. G., Shin, K. E., & LaFreniere, L. S. (2017). Mechanisms and treatment of generalized anxiety disorder. In D. McKay, J. S. Abramowitz, & E. A. Storch (Eds.), *Treatments for psychological problems and syndromes (1st ed.)* (pp. 100-114). New York, NY: Wiley & Sons.
- Sloan, D. M., & Marx, B. P. (2019). *Written exposure therapy for PTSD: A brief treatment approach for mental health professionals*. Washington, DC: American Psychological Association.
- Steketee, G. S. (1993). *Treatment of obsessive-compulsive disorder*. New York: Guilford.
- Stewart, A. R., & Craske, M. G. (2020). Inhibitory learning. In J. S. Abramowitz, & S. M. Blakey (Eds.), *Clinical handbook of fear and anxiety: Maintenance processes and treatment mechanisms* (pp. 265-285). Washington, DC: American Psychological Association.
- Watkins, L. E., Sprang, K. R., & Rothbaum, B. O. (2018). Treating PTSD: A review of evidence-based psychotherapy interventions. *Frontiers in Behavioral Neuroscience, 12*, 258.
- Williams, M. T., Rouleau, T. M., La Torre, J. T., & Sharif, N. (2020). Cultural competency in the treatment of obsessive-compulsive disorder: Practitioner guidelines. *The Cognitive Behaviour Therapist, 13*, e48.
- Yule, M., & Whittal, M L. (2017). Cognitive therapy for obsessive-compulsive disorder. In J. S. Abramowitz, D. McKay, & E. A. Storch (Eds.), *The Wiley handbook of obsessive-compulsive disorders, Volume 1 (1st ed.)* (pp. 581-595).
- Zinbarg, R. E., Craske, M. G., & Barlow, D. H. (2006). *Master of your anxiety and worry: Therapist guide (2nd ed.)* New York: Oxford University Press.