AP PSYCHOLOGY | UNIT 5

TOPIC 5.5

Treatment of

Psychological Disorders

Treatment works best when research evidence, client context, a strong working relationship, and ethical responsibility guide the plan.



THE CARE FRAMEWORK

1. CHOOSE

Match an evidence-based intervention to the client's needs and context.

2. COLLABORATE

Build therapeutic alliance through trust, goals, and cultural humility.

3. MONITOR

Track benefits, risks, side effects, and whether the plan should change.

TREATMENT CONTEXT

META-ANALYSES

Many studies together generally support psychotherapy's effectiveness.

DEINSTITUTIONALIZATION

Medication use helped shift care from large institutions toward decentralized community treatment, often combined with psychotherapy.

ETHICAL FLOOR

Nonmaleficence, fidelity, integrity, and respect for rights and dignity apply across every treatment approach.

1 Psychological therapies

The approach predicts the target and the technique. Match the therapist's action to the method, not just the disorder name.

APPROACH -> TARGET -> METHOD

PSYCHODYNAMIC

Target: unconscious conflict

Free association lets thoughts emerge freely; dream interpretation explores possible unconscious meaning.

COGNITIVE

Target: maladaptive thinking

Cognitive restructuring challenges thoughts. A fear hierarchy orders feared situations. The cognitive triad links negative beliefs about self, world, and future.

BEHAVIORAL / ABA

Target: learned behavior

Exposure, systematic desensitization, aversion therapy, token economies, and biofeedback apply conditioning principles.

COGNITIVE-BEHAVIORAL

Target: thoughts + actions

CBT combines cognitive and behavioral methods. Dialectical behavior therapy (DBT) and rational-emotive behavior therapy (REBT) are examples.

HUMANISTIC / PERSON-CENTERED

Target: growth and self-understanding. The therapist uses active listening and unconditional positive regard - acceptance without judgment.

BEHAVIORAL QUICK MATCH

EXPOSURE

face the feared cue

DESENSITIZATION

gradual exposure + relaxation

TOKEN ECONOMY

tokens reinforce behavior

BIOFEEDBACK

feedback helps regulate body responses

Scenario clue: identify what the therapist does, then connect that action to the treatment approach.

2 Formats, hypnosis, and biology

Treatment can change the setting, use psychological techniques, alter neurotransmitter activity, or directly stimulate or alter brain tissue.

THERAPY FORMAT

INDIVIDUAL THERAPY

One client works with a therapist.

GROUP THERAPY

Multiple clients may share support, feedback, and common experiences.

HYPNOSIS: FOLLOW THE EVIDENCE

SUPPORTED USES

Research supports hypnosis for some pain and anxiety applications.

NOT SUPPORTED

Hypnosis does not reliably produce accurate memory retrieval or age regression.

PSYCHOTROPIC MEDICATIONS

ANTIDEPRESSANTS	ANTI-ANXIETY	LITHIUM	ANTIPSYCHOTICS
depressive symptoms	anxiety symptoms	bipolar treatment	psychotic symptoms

These drugs affect neurotransmitter systems; benefits and side effects must be monitored.

BRAIN-BASED INTERVENTIONS

TMS

Transcranial magnetic stimulation uses magnetic fields.

ECT

Electroconvulsive therapy uses controlled electrical stimulation.

PSYCHOSURGERY

Lesioning alters brain tissue; lobotomy is historical and rarely, if ever, used today.

SIDE-EFFECT SIGNAL

Tardive dyskinesia is a movement-related side effect associated with dopamine regulation. Treatment choices require professional assessment and ethical monitoring.