Exposure-based treatments (Pavlovian conditioning methods)

- Assumption: Abnormal behaviour is due to inappropriate classical conditioned emotions, specially fear and anxiety, motivating avoidance and rewarded by anxiety reduction.
- The client is exposed to feared object to increase sense of coping and mastery.
- Achieve mental and muscular relaxation

Most commonly used: progressive relaxation or muscle relaxation

SYSTEMATIC DESENSITIZATION:

- Originally called reciprocal inhibition.
- Developed by Joseph Wolpe
- “exposure therapy”
- Clients are required to expose themselves to anxiety arousing images to reduce anxiety gradually / systematically; they become desensitized or less sensitive to the anxiety arousing situation.

Exposure therapy - a form of behavioral therapy in which the survivor confronts feelings or phobias or anxieties about a traumatic event & relives it in the therapy session.

The steps involved:
- Relaxation training
- Development of an anxiety hierarchy
- Systematic desensitization proper

Exposure therapy for anxiety used in OCD, PTSD and phobia

- Exposure to anxiety in graded fashion
- Identify specific goals and break them into smaller, manageable steps
- Learn to master situations that cause mild, then gradually greater, anxiety. Teach & test a relaxation strategy before to reduce distress/panic during exposure
- Aim is to achieve relative relaxation before next step

Contd...

The Principle of Exposure Therapy

- Learn to master situations that cause mild, then gradually greater, anxiety. Teach & test a relaxation strategy before to reduce distress/panic during exposure
- Aim is to achieve relative relaxation before next step
**IN VIVO (Latin, in life) EXPOSURE and FLOODING:**

- **In Vivo Exposure** – actual exposure of the client to the anxiety-evoking event
- Also called graduated exposure.
- Example – Fear of flying
- **Flooding** – client is flooded with experiences of a particular kind until becoming either averse to them or numbed to them. (more on real life exposure)

**Flooding and Implosion**

They are anxiety-induction therapies for phobias that:

- expose the individual to the feared object without chance of escape
- designed to extinguish the response
- the therapist exposes the person to a highly feared situation and prevents escape or avoidance
- anxiety is encouraged
- relaxation training is not a part of the procedure

**Concerns About Flooding**

- phobias with a more focused CS may be extinguished in one training session
- phobias with more diffuse or multi-element CSs may require many sessions
- the fear-arousing situation can be introduced gradually when it produces an intolerable fear
- high anxiety may lead to avoidance of treatment
- the therapist may consider to accompany the client during the most feared encounters
- flooding appears to be relatively safe
- in vivo and imaginal flooding are equally effective
- in vivo procedures may be difficult to apply
- flooding is about as effective as desensitization

**Implosive therapy**

- It is an extension of desensitization work and application of research on extinction
- implosive therapy requires the person to imagine unrealistic, exaggerated, or unlikely harmful events that are associated with the fear.
- People forced to remain in frightening situation will have to stop feeling afraid a while (20-30 min.)

**Difference between Implosive Therapy and flooding**

- **Implosive therapy** - a form of behavior therapy involving intensive recollection and review of anxiety-producing situations or events in a patient's life in an attempt to develop more appropriate response (feeling relaxed) to similar situations in the future. (Imagined)
- **Flooding** – it is sometimes referred to as exposure therapy or prolonged exposure therapy. As a psychotherapeutic technique, it is used to treat phobia and anxiety disorders including post-traumatic stress disorder. (In vivo)

**Exposure and Response Prevention (ERP)**

- This is also an extinction procedure
- Used to treat OCD and Bulimia
- It involves exposing the client to the stimuli that elicit the compulsive behavior and then preventing from engaging in the response
- It is used only in certain cases.
Aversion Therapy (use of punishment)
- It involves the use of an unconditioned aversive stimulus to classically condition fear or aversion to a previously attractive stimulus in order to create an avoidance response or to suppress undesirable or unwanted operant behaviour.
- Electric shock or nausea inducing drugs are used as aversive stimulus.
- Therapy is used for the treatment of bad habits such as drinking, smoking, nail biting etc.

Covert Sensitization
- It is the use of an imagination of stimulus in place of an actual aversive stimulus or punishment to create new learning
- Opposite to desensitization.
- It may be used to create classically conditioned anxiety to teach an avoidance response.
- Example: Diet control by imagining a favourite food with worms all over it.

Eye Movement Desensitization & Reprocessing (EMDR):
- Developed by: Francine Shapiro (2001)
- A form of exposure therapy that involves:
  - Imaginal flooding
  - Cognitive restructuring
  - The use of rapid rhythmic eye movements
- For clients with traumatic stress

Eight Phases of Treatment:
- First Phase - history-taking session where therapists assesses client’s readiness for EMDR & develops a treatment plan.
- Second Phase - therapist ensures that the client has adequate methods of handling emotional distress and coping skills.
- Third to sixth phase - a target is identified and processed using EMDR.

Seventh Phase - closure. Client is asked to keep a journal during the week
- Eighth Phase - re-evaluation of the previous work and of progress since the previous session

EMDR treatment ensures processing of all related historical events, current incidents that elicit distress, and future scenarios that will require different responses.

Skills Training (Operant Conditioning)
- Assumption: Abnormal behaviour (e.g. shyness, schizophrenia) are due to lack of skills or poor environment or both. Needed skills can be taught.
- For individuals with psychosocial problems
- Anger management training
- Assertion training - teaching people to be assertive in a variety of social situations
Social skills such as conversation, asking for dates, saying no, dealing with bosses, negotiation are rewarded by praise by the therapists. Social skills vary according to the needs of clients.

Techniques: modeling, psycho education, shaping or successive approximation, behavioral rehearsal, role playing, feedback

Attributes of therapist.

Most social skills therapy includes practicing the skills in the real world.

Patterson’s Program of Parent Training

Parents are taught to reward behaviour they want in their children.

There are cultural differences in the use of reward and punishment.

Several reasons to avoid punishment:
- Parents are paired with pain
- Children learn to imitate their parents
- Need for constant policing function
- A vicious cycle of aversive control is developed.

Time Out

Time out is used to eliminate unwanted behaviour by removing the rewarding situation.

It can be viewed as an extinction procedure or negative punishment.

Place for time out may be uninteresting but safe and non-threatening.

Duration may vary with age and behaviour of child during time out.

It should be used consistently for better results.

Contingency Management (Behavioural modification)

These methods involve the planned use of rewards to increase wanted behaviour and of extinction to decrease unwanted behaviour.

Used in different settings like families, business, schools, institutions of mentally retarded and prisons etc.

Steps

Worked with school children with behavioural problems (i.e. aggressiveness, temper tantrums, stealing, fighting, lying etc.)

Both parent and child negotiate the goals of program and its mode of implementation.

Time out is used to eliminate unwanted behaviour.

Time out is used in non threatening and frightening ways but must be consistently used.

Evaluation

Parents feel happier and more competent after treatment.

They may use for other behaviours as well.

Teachers may collaborate with parents to improve school behaviours.

Siblings also improve.

Well conducted behaviour management program at schools are effective for students better conduct and achievements.
### Token Economies
- Tokens are given in place of actual rewards which are later exchanged for desired rewards.
- Ted Ayllon (1968), one of the pioneers, used for disturbed schizophrenics.
- Can be used in classrooms, psychiatric wards and mentally retarded persons.
- Food, deserts, cigarettes, nicotine can be used as tokens but it seems manipulative.
- Defenders argue that token economies mimic the real world.

### Contingency Contracting
- Individual behavior modification program developed by the client and therapist.
- A contract is developed about consequences of certain acts by the client, e.g. fee reduction, buying a new cycle, new dress etc.
- Positive reinforcers (tokens, points or privileges) are withdrawn to suppress unwanted behaviors.

### Self Management
- Client uses techniques to modify ones own behavior.
- Self-monitoring, self-reward, problem solving and contingency contracting are used.
- Self awareness is created by keeping track of the targeted behavior (smoking reduction, study for long hrs.).
- Steps of problem solving techniques are followed: Define the problem, recognize the reaction, generate the solutions, evaluate the solutions and act, Assess the effect of attempts.

### Conting...
- Coping imagery exercise can be used.
- Therapist and client review possible coping strategies for the client’s problem.
- The client imagines using them in various situations.
- Therapist may teach coping skills the client lacks.
- Self management is now being used in business and education to improve company functioning and student learning.

### Punishment
- Punishment for operant behaviour is rarely used for ethical concerns
- It is used when other methods fail, like quickly suppress self injury in psychiatric or autistic children.
- Imagining the consequences of a punishment in place of actual, e.g. kleptomania. Therapist may help in imagination.
- Self punishment may be used to overcome bad habits- smoking (use of rubber band to snap).