Psychosocial treatments

What are psychosocial treatments?
Psychosocial treatments—including certain forms of psychotherapy (often called talk therapy) and social and vocational training—are helpful in providing support, education, and guidance to people with mental illnesses and their families. Studies tell us that psychosocial treatments for mental illnesses can help consumers keep their moods more stable, stay out of the hospital, and generally function better. A licensed psychiatrist (a doctor, who can prescribe medications), psychologist, social worker, or counselor typically provides these psychosocial therapies. The therapist and a psychiatrist may work together as the psychiatrist prescribes medications and the therapist monitors the consumer's progress. The number, frequency, and type of psychotherapy sessions a consumer has should be based on his or her individual treatment needs. As with medication, it is important to follow the treatment plan for psychosocial treatments to gain the greatest benefit.

Individual Psychotherapy
Individual psychotherapy involves regularly scheduled sessions between the patient and a mental health professional such as a psychiatrist, psychologist, psychiatric social worker, or psychiatric nurse. The goal of this treatment is to help consumers understand why they are acting and thinking in ways that are troubling or dangerous to themselves or others so they have more control over their behaviors and can correct them.
Talk-therapy sessions may focus on a consumer's current or past problems, experiences, thoughts, feelings, or relationships. By sharing experiences with a trained, knowledgeable, and understanding person--by talking about the consumer's world with someone outside it--people with mental illnesses may gradually understand more about themselves and their problems.
Individual psychotherapy is used successfully to treat emotional, behavioral, and social problems in people with schizophrenia, bipolar disorder, attention-deficit/hyperactivity disorder, depression, eating disorders, and anxiety disorders.

Psychoeducation
Psychoeducation involves teaching people about their illness, how to treat it, and how to recognize signs of relapse so that they can get necessary treatment before their illness worsens or occurs again. Family
psychoeducation includes teaching coping strategies and problem-solving skills to families (and friends) of people with mental illnesses to help them deal more effectively with their ill relative. Family psychoeducation reduces distress, confusion, and anxieties within the family, which may help the consumer recover.

Pscyhoeducation in combination with medication has been used successfully to treat people with schizophrenia, bipolar disorder, attention-deficit/hyperactivity disorder (ADHD), and depression as well as to help their loved ones.

**Self-help and Support Groups**

Self-help and support groups for people and families dealing with mental illnesses are becoming increasingly common. Although not led by a professional therapist, these groups may be therapeutic because members give each other ongoing support. These groups also are comforting because ill people learn that others have problems similar to theirs.

Members of support groups share frustrations and successes, referrals to qualified specialists and community resources, and information about what works best when trying to recover. They also share friendship and hope for themselves, their loved ones, and others in the group.

Groups may also help families work together to advocate for needed research and treatments and for better hospital and community programs. And when consumers act as a group rather than individually, they are often more effective in the fight against stigma and more successful at drawing public attention to abuses such as discrimination.

**What are examples of specific psychotherapies?**

Therapists offer several different types of psychotherapy. In general no one type of therapy is necessarily "better" than another type. When deciding which therapy (or therapies) will likely be the most successful treatment option for an individual consumer, a psychotherapist considers the nature of the problem to be treated and the consumer's personality, cultural and family background, and personal experiences. Note that a psychiatrist or psychotherapist (or both) may offer each of the following therapies to an individual, family, couple, or group.
**Interpersonal Therapy**
Interpersonal therapy focuses on the relationships a consumer has with others. The goal of interpersonal therapy is, of course, to improve interpersonal skills. The therapist actively teaches consumers to evaluate their interactions with others and to become aware of self-isolation and difficulties getting along with, relating to, or understanding others. He or she also offers advice and helps consumers make decisions about the best way to deal with other people. Interpersonal therapy is a relatively new psychosocial treatment used most frequently to help people with bipolar disorder, attention-deficit/hyperactivity disorder (ADHD), depression, eating disorders, and generalized anxiety disorder.

**Cognitive Behavioral Therapy**
Cognitive behavioral therapy (CBT) helps people learn to change inappropriate or negative thought patterns and behaviors associated with their illness. The goal is to recognize negative thoughts or mind-sets (mental processes such as perceiving, remembering, reasoning, decision making, and problem solving) and replace them with positive thoughts, which will lead to more appropriate and beneficial behavior. For instance, cognitive behavioral therapy tries to replace thoughts that lead to low self-esteem ("I can't do anything right") with positive expectations ("I can do this correctly"). Combined with effective medication, CBT can successfully treat people with schizophrenia, bipolar disorder, ADHD, depression, eating disorders, generalized anxiety disorder, and panic disorder.

**Exposure Therapy**
A type of behavioral therapy known as exposure therapy or exposure and response prevention is very useful for treating obsessive compulsive disorder (OCD) and post-traumatic stress disorder (PTSD). During exposure therapy, a consumer is deliberately exposed to whatever triggers the obsessive thoughts or reaction to a previous traumatic experience under controlled conditions. The consumer is then taught techniques to avoid performing the compulsive rituals or to work through the trauma.

**Dialectical Behavior Therapy (DBT)**
Dialectical behavior therapy (DBT) was developed to treat chronically suicidal individuals, but it has evolved into a treatment for multi-disordered consumers with borderline personality disorder (BPD) as one of their diagnosis. DBT has
also been adapted for behavioral disorders involving emotion dysfunction (such as substance dependence in individuals with BPD and binge eating) and for treating people with severe depression and suicidal thoughts. DBT combines the basic strategies of behavior therapy with a philosophy that focuses on the idea that opposites may really not be opposite when looked at differently.

As a comprehensive treatment, DBT:

- improves destructive behaviors,
- improves motivation to change (by modifying inhibitions and providing positive reinforcement,
- ensures that new capabilities generalize to the natural environment
- provides a treatment environment that emphasizes what consumers and therapist are best at when working together
- enhances the therapist's motivation and ability to treat consumers effectively.

In standard DBT, different types of psychosocial therapy--including individual psychotherapy, group skills training, and even phone consultations--are used to help consumers.

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