



Psychotherapy and Related Theories Worksheet:

Theories	Answer	Matching Options
Psychoanalytic Theory		A. Emphasizing the individual's capacity for self-actualization and personal growth, this theory focuses on free will, self-efficacy, and the human tendency toward growth and fulfillment.
Behavioral Theory		B. It emphasizes the importance of early attachment relationships, typically between children and their caregivers, in shaping the individual's emotional and relational development.
Cognitive Theory		C. This approach centers on the understanding that thoughts influence emotions and behaviors. It explores how negative thought patterns can lead to psychological distress and how altering these thoughts can improve mental health.
Humanistic Theory		D. This theory examines psychological issues within the context of the larger systems, such as family or community, suggesting that individual problems are often expressions of dysfunctions within these systems.
Existential Theory		E. Highlighting the importance of the present moment and the individual's responsibility for their thoughts, feelings, and actions, this theory focuses on the holistic view of individuals and their experiences.
Gestalt Theory		F. This theory posits that people learn behaviors, values, and attitudes through observing others and the outcomes of those behaviors, underscoring the importance of modeling and observational learning.
Systemic Theory		G. Integrating cognitive and behavioral approaches, this theory suggests that changing maladaptive thought patterns can lead to changes in behavior and emotion, focusing on practical skills for modifying both.
Attachment Theory		H. According to this theory, people's identities and realities are shaped by the stories they tell about their lives. Therapy involves re-authoring these narratives in more empowering and positive ways.
Social Learning Theory		I. This theory focuses on concepts such as freedom, meaning, isolation, and mortality, emphasizing the individual's search for meaning and confronting existential anxieties.
Cognitive-Behavioral Theory		J. Centering on identifying and enhancing existing resources and strengths rather than focusing on past problems, this theory aims at constructing solutions rather than dissecting problems.
Dialectical Behavior Theory		K. This theory delves into the unconscious mind and explores how past experiences, particularly childhood experiences, shape behaviors and thoughts in adulthood. It emphasizes the role of unconscious conflicts and desires.
Narrative Theory		L. This approach combines acceptance and mindfulness strategies from Buddhist traditions with cognitive-behavioral techniques, aiming to help individuals manage emotional dysregulation and interpersonal difficulties.
Solution-Focused Brief Theory		M. These are approaches that combine elements from different theoretical frameworks to tailor therapy to the unique needs of the individual, allowing for flexibility and personalization in treatment.
Eclectic and Integrative Theories		N. According to this theory, behavior is learned from the environment through conditioning. It focuses on observable behaviors and the ways in which they are learned, including through reinforcement and punishment.

Therapies Part One	Answer	Matching Options
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Behavior Therapy		A. Revealing the unconscious content of a client's psyche to alleviate psychic tension. It emphasizes understanding the impact of the past on current behavior, using techniques such as free association and dream analysis.
Cognitive Behavioral Therapy (CBT)		B. Utilizes the therapeutic potential of group dynamics and peer interactions to facilitate emotional and psychological growth in individuals.
Dialectical Behavior Therapy (DBT)		C. Encourages clients to experience the present moment in a way that allows for self-discovery and emphasizes personal responsibility. This approach often utilizes creative and experiential techniques to enhance self-awareness and facilitate change. Used for borderline personalities.
Psychodynamic Psychotherapy		D. This approach focuses on directly observable behaviors, the conditions that maintain problematic behaviors, and the use of learning principles to bring about behavior change.
Gestalt therapy		E. A time-limited, focused, evidence-based approach to treat mood disorders. The primary goal is to improve interpersonal functioning and satisfaction with social relationships.
Freudian Psychotherapy		F. Based on the principle that everyone has the innate potential to live a fulfilling life, this approach supports self-actualization, self-exploration, and self-expression to enhance self-understanding and foster personal growth.
Humanistic Therapy		G. A process that involves the systematic confrontation with and desensitization to phobic stimuli, reducing the physiological and emotional response to the feared object or situation.
Interpersonal Psychotherapy (IPT)		H. An evidence-based psychotherapy that combines principles of behavioral psychology, cognitive therapy, and mindfulness practices. It is designed to help people increase their emotional and cognitive regulation by learning about the triggers that lead to reactive states and helping to assess which coping skills to apply in the sequence of events, thoughts, feelings, and behaviors.
Group Therapy		I. Merges cognitive therapy's focus on thought patterns with analytic therapy's attention to the therapeutic relationship, aiming to identify and change maladaptive behaviors and thoughts through a collaborative process.
Exposure Therapy		J. A structured program that combines mindfulness meditation practices and cognitive therapy techniques to prevent the recurrence of depression, particularly in individuals with a history of multiple episodes.
Cognitive Analytical Therapy (CAT)		K. A comprehensive treatment that emphasizes the interconnection between thoughts, feelings, and behaviors. It involves identifying and challenging distorted or negative thinking, altering unwanted behavior patterns.
Eye Movement Desensitization and Reprocessing (EMDR)		L. Sees individuals as separate from their problems and suggests that people construct the meanings about their lives through storytelling. Therapy sessions focus on identifying these narratives and re-authoring the story in a way that reflects the person's goals and values.
Mindfulness-Based Cognitive Therapy (MBCT)		M. An approach that emphasizes finding solutions in the present time and fostering a positive outlook on the future. Sessions focus on what the client wants to achieve rather than on the problem(s) that made them seek help.
Narrative Therapy		N. Employs eye movements or other forms of bilateral stimulation to process distressing memories and beliefs, aiming to reduce their lingering effects and facilitate emotional healing.
Solution-Focused Brief Therapy (SFBT)		O. Centers on Freud's theories of psychoanalysis, including the role of the id, ego, and superego, as well as the importance of childhood experiences in shaping the unconscious motivations that drive behavior.

Therapies Part Two	Answer	Matching Options
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Acceptance and Commitment Therapy (ACT)		A. Uses the power of storytelling within families to uncover and rewrite unhelpful narratives, fostering positive change and understanding among family members.
Logotherapy		B. Promotes embracing one's thoughts and feelings rather than fighting or feeling guilty for them, coupled with committing to action in line with personal values.
Family Systems Therapy		C. Applies cognitive and behavioral strategies within a family context to improve communication, solve problems, and modify dysfunctional patterns.
Structural Family Therapy		D. Emphasizes the human search for meaning as the central motivational force, assisting individuals in finding purposeful life directions, especially during challenging times.
Strategic Family Therapy		E. Analyzes generational transmission patterns to focus on increasing individual differentiation without losing family emotional connection.
Systemic Family Therapy		F. Seeks to reorganize the family structure to clarify roles and hierarchies, enhancing boundaries and improving the system's functionality.
Narrative Family Therapy		G. Concentrates on identifying the family's strengths and resources to solve problems, rather than dwelling on the problems themselves (i.e., miracle and exception-finding questions).
Bowenian Family Therapy		H. Targets multiple aspects of a young person's environment, including family, school, and community, to address serious antisocial behavior.
Solution-Focused Brief Therapy (SFBT) for Families		I. Investigates the complex interactions within family units, identifying patterns that contribute to dysfunction and promoting healthier ways of relating to each other to foster greater levels of self-differentiation.
Cognitive Behavioral Family Therapy		J. Focuses on repairing and strengthening the emotional bonds between parents and children, addressing attachment issues to improve relationships.
Multisystemic Therapy (MST)		K. Provides families with education and coping mechanisms regarding psychological disorders, aiming to improve understanding and management of the condition within the family unit.
Functional Family Therapy (FFT)		L. Applies specific, planned interventions to disrupt dysfunctional patterns within the family, aiming for rapid changes in relationships and communication (i.e., paradoxical/straightforward directives and reframing).
Attachment-Based Family Therapy (ABFT)		M. Views problems within the context of the larger relational network, addressing the interconnected dynamics and their impact on the individual and family as a whole.
Psychoeducational Family Therapy		N. Addresses specific behaviors within the family dynamic, aiming to improve understanding, communication, and support among family members.
Intergenerational Family Therapy		O. Uses creative or interactive activities to explore and process emotions and experiences. The goal is to help individuals gain insight into their emotions, improve self-awareness, and develop healthier ways of relating to others.
Experiential Therapy		P. Explores the influence of past generations on present behaviors and relationships, aiming to identify and change problematic relational patterns and beliefs handed down through families.
Existential Therapy		Q. Focuses on exploring the human condition and the individual's experience of meaning and purpose in life to understand subjective experiences. Focuses on the present with personal responsibility. Encourages life reflection.

Examples in Practice

Behavior Therapy

Scenario: Emily, a 30-year-old, struggles with severe social anxiety that prevents her from attending social gatherings or speaking in public. Her therapist uses **Behavior Therapy** to help. They start with systematic desensitization, where Emily is gradually exposed to her fear in a controlled and incremental way, starting with imagining being at a social event and eventually attending small, supportive gatherings. They also use reinforcement techniques, rewarding Emily for each step she takes towards her goal, such as initiating a conversation.

Cognitive Behavioral Therapy (CBT)

Scenario: John, a 42-year-old, is dealing with depression linked to negative self-perception and a stressful job. His therapist employs **CBT** to identify and challenge John's negative thoughts and beliefs. Through sessions, John learns to recognize his automatic negative thoughts about being inadequate at his job and replaces them with more realistic and positive ones. His therapist assigns him homework, like journaling his thoughts and feelings and practicing relaxation techniques to manage stress.

Dialectical Behavior Therapy (DBT)

Scenario: Sarah, a 25-year-old, has been diagnosed with Borderline Personality Disorder (BPD). Her therapist decides **DBT** is the best approach because it emphasizes emotional regulation and interpersonal effectiveness. Sarah attends both one-on-one therapy sessions and group skills training, where she learns mindfulness to be present in the moment, distress tolerance to better cope with emotional pain, emotional regulation to manage and change intense emotions, and interpersonal effectiveness to communicate and assert her needs effectively.

Psychodynamic Psychotherapy

Scenario: Alex, a 38-year-old, experiences unexplained bouts of anger and relationship issues. In **Psychodynamic Psychotherapy**, his therapist explores Alex's early life and unconscious processes to uncover unresolved conflicts and feelings from his past that influence his current behavior. Through the therapeutic relationship, Alex gains insight into how his anger is a defense mechanism against feelings of abandonment he experienced in childhood, helping him to work through these feelings constructively.

Gestalt Therapy

Scenario: Mia, a 29-year-old, feels stuck in her career and personal life, unsure of what she wants. Her therapist uses **Gestalt Therapy** to focus on her present experience and self-awareness. In sessions, Mia is encouraged to enact scenarios from her life and explore her immediate thoughts, feelings, and behaviors. This experiential approach helps Mia become more aware of how she blocks herself from fully experiencing the present and starts to understand her needs and desires more clearly.

Freudian Psychotherapy

Scenario: Elliot, a 34-year-old, struggles with low self-esteem and a pervasive sense of guilt. Using **Freudian Psychotherapy**, his therapist explores Elliot's early childhood experiences, dreams, and the unconscious mind. Through techniques like free association, where Elliot talks freely about whatever thoughts come to mind, and dream analysis, they uncover repressed memories and unresolved conflicts from his childhood that contribute to his current issues. This insight allows Elliot to begin resolving these conflicts and improving his self-esteem.

Humanistic Therapy

Scenario: Leah, a 27-year-old, feels lost in life, struggling with a sense of purpose and direction. Her therapist adopts a **Humanistic Therapy** approach, emphasizing personal growth and self-actualization. The therapy is client-centered, providing Leah with a non-judgmental, empathetic environment where she can explore her feelings and thoughts openly. Through this supportive dialogue, Leah starts to understand her values and desires, empowering her to make choices that align with her true self and foster a sense of purpose and direction.

Interpersonal Psychotherapy (IPT)

Scenario: Naomi, a 45-year-old recently divorced woman, is experiencing major depressive episodes linked to significant life changes. In **Interpersonal Psychotherapy (IPT)**, her therapist focuses on improving Naomi's interpersonal relationships and communication patterns to help alleviate her depressive symptoms. They identify and work on problematic areas in her relationships, such as role transitions (adjusting to life after divorce) and interpersonal disputes (navigating conflicts with her ex-partner), aiming to improve Naomi's social support network and decrease her feelings of isolation.

Group Therapy

Scenario: Carlos, a 50-year-old recovering from addiction, joins a **Group Therapy** session facilitated by a therapist. The group consists of individuals facing similar challenges. Through shared experiences and feedback, Carlos learns coping strategies from peers and gains insights into his own behavior. The therapist guides discussions, ensuring a safe and supportive environment where members can express themselves openly, learn from each other, and develop social skills.

Exposure Therapy

Scenario: Aisha, a 28-year-old with a severe phobia of dogs, undergoes **Exposure Therapy**. Her therapist gradually and systematically exposes her to dogs in a controlled manner, starting with pictures, then videos, and eventually, in-person encounters with a calm dog. This process aims to desensitize Aisha to her fear, reducing her anxiety responses over time and helping her manage her phobia in everyday situations.

Cognitive Analytical Therapy (CAT)

Scenario: Tom, a 32-year-old dealing with patterns of self-sabotage in relationships and work, engages in **Cognitive Analytical Therapy (CAT)**. His therapist helps him recognize these patterns and understand their origins in his past relationships and experiences. Together, they work on identifying and changing maladaptive behaviors and thoughts through the development of a personal reformulation letter, outlining his patterns, and proposing alternative strategies for dealing with difficult situations.

Eye Movement Desensitization and Reprocessing (EMDR)

Scenario: Lily, a 36-year-old veteran with PTSD, participates in **EMDR** therapy. Her therapist guides her to recall traumatic memories while simultaneously focusing on external stimuli, such as bilateral eye movements. This process is designed to help Lily process and integrate traumatic memories, reducing their emotional impact and helping her to move forward with a healthier psychological state.

Mindfulness-Based Cognitive Therapy (MBCT)

Scenario: Sam, a 40-year-old experiencing recurrent depression, enrolls in an **MBCT** program. This therapy combines cognitive therapy techniques with mindfulness practices, such as meditation and body awareness exercises. Sam learns to become more aware of his thoughts and feelings without judgment, recognizing early signs of depression and employing mindfulness techniques to manage his mood more effectively.

Narrative Therapy

Scenario: Jenna, a 29-year-old struggling with low self-esteem, engages in **Narrative Therapy**. Her therapist encourages her to narrate her life stories, helping Jenna to externalize her problems rather than seeing them as inherent flaws within herself. Together, they explore new interpretations of her story, empowering Jenna to rewrite her narrative to highlight her strengths and resilience.

Solution-Focused Brief Therapy (SFBT)

Scenario: Marcus, a 22-year-old college student facing academic and personal stress, seeks **Solution-Focused Brief Therapy (SFBT)**. His therapist focuses on identifying Marcus's goals and the resources he already possesses to solve his problems. By emphasizing positive future outcomes and past successes, Marcus is encouraged to develop concrete steps toward achieving his goals, fostering a sense of competence and optimism.

Acceptance and Commitment Therapy (ACT)

Scenario: Denise, a 47-year-old diagnosed with chronic pain, participates in **ACT** to improve her quality of life. Her therapist helps her to practice acceptance of her condition and commit to actions aligned with her values despite the pain. Through mindfulness and value clarification

exercises, Denise learns to coexist with her pain without letting it dominate her life, focusing instead on engaging in meaningful activities that bring her joy and fulfillment.

Logotherapy

Scenario: Peter, a 60-year-old widower, feels a deep sense of emptiness and lack of purpose after losing his spouse. Engaging in **Logotherapy**, his therapist guides him to discover meaning in life despite his suffering. They explore Peter's values, beliefs, and interests to identify purposes worth living for, such as volunteering, reconnecting with old hobbies, or mentoring. This process helps Peter find reasons to embrace life with renewed purpose and fulfillment.

Family Systems Therapy

Scenario: The Smith family participates in Family Systems Therapy, facing tension and frequent arguments among the parents and two teenage children. The therapist views the family as a single emotional unit and identifies patterns that disrupt family harmony. They work on understanding each member's role within these patterns, promoting awareness and change towards healthier interactions, aiming to improve communication and reduce conflicts within the family system.

Structural Family Therapy

Scenario: The Chen family, including divorced parents co-parenting their 10-year-old son, seeks help to improve their family dynamics. Through **Structural Family Therapy**, the therapist observes and actively engages in family interactions to diagnose and reorganize the family structure. They focus on establishing clear hierarchies and boundaries, helping the parents to assert their leadership and the family to interact in more supportive and constructive ways.

Strategic Family Therapy

Scenario: The Garcia family, dealing with the eldest daughter's rebellious behavior, engages in **Strategic Family Therapy**. The therapist uses tactical interventions and assigns homework to disrupt dysfunctional patterns. For example, they might instruct the parents to change their usual responses to their daughter's behavior. This approach aims to solve problems through direct, sometimes paradoxical interventions, encouraging the family to adopt new strategies for dealing with their issues.

Systemic Family Therapy

Scenario: The Patel family, navigating intergenerational conflicts and cultural adjustment issues, works with a **Systemic Family Therapy** practitioner. The therapy explores the family's belief systems, communication patterns, and the influences of broader social and cultural contexts. The therapist helps the family understand how each member's behavior affects others, facilitating insights and changes that honor individual and collective family needs.

Narrative Family Therapy

Scenario: The Wilson family, struggling after the loss of a family member, participates in **Narrative Family Therapy**. This approach helps them externalize their problem, viewing it as separate from themselves. They are encouraged to tell their stories, highlighting strengths and resilience. The therapist helps them to re-author their narrative, focusing on unity and support, allowing them to process their grief and envision a path forward together.

Bowenian Family Therapy

Scenario: The Robinson family, dealing with long-standing issues of emotional detachment and independence, engages in **Bowenian Family Therapy**. The focus is on differentiating the self from the family while maintaining emotional connections. The therapist guides family members in understanding their roles in family dynamics and the importance of emotional regulation, aiming to balance individuality with a sense of belonging.

Solution-Focused Brief Therapy (SFBT) for Families

Scenario: The Martinez family, facing stress due to financial difficulties, seeks **Solution-Focused Brief Therapy (SFBT) for Families**. The therapist identifies and leverages the family's strengths and past successes to address current challenges. By setting specific, achievable goals, the family learns to apply practical solutions to improve their situation, fostering a sense of hope and capability.

Cognitive Behavioral Family Therapy

Scenario: The Nguyen family, where a child has been diagnosed with ADHD, utilizes **Cognitive Behavioral Family Therapy**. This approach addresses the child's behavior and the family's reaction to it, identifying and changing negative thought patterns and behaviors. The therapy provides strategies for managing the child's symptoms and improving family interactions, including setting clear rules, using positive reinforcement, and enhancing communication skills.

Multisystemic Therapy (MST)

Scenario: Jamal, a 16-year-old, has been involved in several incidents of truancy and minor delinquency. **Multisystemic Therapy (MST)** is initiated to address the complex social, familial, and personal factors contributing to his behavior. The MST therapist works intensively with Jamal, his family, and his school and community to change his behavior in all these contexts. Strategies include improving parental discipline practices, enhancing Jamal's school performance, and building positive connections within the community. This approach aims to create a supportive network around Jamal, promoting positive behavior changes across all areas of his life.

Functional Family Therapy (FFT)

Scenario: The Rivera family seeks help for their 14-year-old daughter, Sofia, who has been displaying aggressive behavior and substance use. **Functional Family Therapy (FFT)** is employed, focusing on improving family communication and supportiveness while decreasing negativity and dysfunctional behaviors. The therapist works to identify the functions that Sofia's behavior serves within the family dynamic, then guides the family through phases of engagement, motivation, behavioral change, and generalization, teaching them skills to solve their own problems and support each other effectively.

Attachment-Based Family Therapy (ABFT)

Scenario: Leo, a 17-year-old, is experiencing severe depression and detachment from his parents. **Attachment-Based Family Therapy (ABFT)** is chosen to repair the trust and improve the attachment bonds between Leo and his parents. The therapy sessions are structured to create a safe space for Leo to express his feelings of insecurity and for his parents to respond with empathy and understanding. The goal is to rebuild a secure attachment, enhancing Leo's confidence and emotional well-being.

Psychoeducational Family Therapy

Scenario: The Kim family is struggling to understand and cope with the recent diagnosis of schizophrenia in their eldest son, Min-jun. **Psychoeducational Family Therapy** is provided to educate them about the disorder, its treatment, and coping strategies. The therapist conducts sessions that include information sharing, skills training, and support to reduce the family's distress and improve their ability to support Min-jun effectively, emphasizing the importance of medication adherence, recognizing early signs of relapse, and developing stress-reduction techniques for both Min-jun and his family.

Intergenerational Family Therapy

Scenario: The Johnson family's history of conflict spans several generations. **Intergenerational Family Therapy** is applied to explore and understand the patterns, traumas, and unresolved issues that have been passed down. The therapist helps the family map out their generational family tree, identifying and discussing these patterns and their impact on current family relationships. This process aims to heal past wounds and foster a healthier family dynamic for future generations.

Experiential Therapy

Scenario: Mia and her parents are experiencing a disconnect in their relationship, leading to frequent misunderstandings and emotional distance. They engage in **Experiential Therapy**, where the therapist uses active, engaging tasks (like role-playing, arts and crafts, or guided imagery) to help them express and explore their emotions in a supportive environment. These activities aim to break through the surface-level communication, fostering deeper understanding and emotional connection among family members.

Existential Therapy

Scenario: After the loss of a family member, the Davies family is struggling with questions about life's meaning, death, and isolation. **Existential Therapy** is initiated to help them confront these existential concerns. The therapist encourages open discussions about these deep issues, helping each family member express their fears, thoughts, and feelings. This approach supports the family in finding their own unique meanings and values in the face of tragedy, aiding in their emotional healing and personal growth.

Answers

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Therapies Part One
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Therapies Part Two
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