

Comprehensive Clinical Written Exam

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GCN 799

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4/15/2023

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Theory/Modality for Treatment

Psychodynamic theory focuses on the psychological drives that explain human behavior (Cohen & Kaplan, 2020). Humans have three levels of consciousness including id, ego, and superego. The id is an accumulation of unconscious and subconscious desires that cannot be acted out. The ego is part of human consciousness that understands the rules of society such as order, and appropriate behavior among other societal norms. The ego provides a balance between the id and the superego. It is a balance between the two extremes of life: the part that seeks to balance between control by emotion and control by rules and laws. If an individual is controlled by the id, they are entirely controlled by their emotions or actions. They are more likely to be on the wrong side of the law and get and get arrested so often. Those who are controlled by the ego are more likely to be more obedient to rules and laws. They can often be cited as people incapable of having fun in life. The superego, therefore, helps find a balance between the two extremes by helping an individual become societally compliant while not severely suppressing their emotions. Patients can gain insight through introspection if they deal with repressed desires (Cohen & Kaplan, 2020).

Joe suffers from episodes of intense fear or discomfort which start suddenly, peak, and end after some minutes (Otte, 2022). Joe is suffering from panic attacks mostly associated with losing confidence in key social places like supermarkets, highways shopping centers, elevators, and movie theaters. Joe is worried that over time he has been avoiding even more things and his situation is starting to dent his relationship with his family. He is not becoming a better father or husband when he is unable to participate in social places or basic activities such as shopping.

From a psychodynamic theory standpoint, panic attacks indicate specific unconscious conflicts that serve an essential psychological purpose. Panic symptoms arise from mental life aspects that are partly unconscious. Joe's panic attacks are arising from partly conscious and partly unconscious feelings about his life. He is not aware of the origin of his panic attacks yet he only associates his unease with certain stimuli. Unconscious fantasy forms part of the reasons that can produce mental life incidents. Dreams, life choices, and personalities are unconscious fantasies that shape an individual's mental life. The psychodynamic theory will assist in finding out Joe's unconscious fantasies that could be building up panic attacks in his conscious mind. The use of the id will assist the therapist in establishing the unconscious and subconscious that Joe cannot act out. This will assist in establishing the suppressed emotions that could be elevating Joe's panic attacks. With the ego component, the therapy will evaluate Joe's understanding of human social order and his level of compliance with it. The superego model will enable Joe to establish the right balance between his emotions and his willingness to adhere to societal rules. Joe's condition can be categorized in the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV) with the code 300.21. Code 300.21 represents panic disorder with agoraphobia. Joe qualifies for this categorization because he suffers from panic attacks that predominantly express themselves in public spaces.

The Treatment Plan That Addresses 3 Three Treatment Goals

Joe will be treated using a plan that addresses three treatment goals including reducing the frequency and intensity of panic attacks, reducing the fear of reoccurrence of panic symptoms, and reducing the fear of triggering panic, and reducing the avoidance of activities and surroundings that trigger panic.

Reduce the frequency and intensity of panic attacks

The first treatment goal will aim to reduce the frequency and intensity of panic attacks on Joe. Joe's panic symptoms would be evaluated and investigated to establish how frequently he experiences them; how intense they get and how long each episode lasts. This evaluation is important because it helps establish the id and ego components of the psychodynamic theory that might be informing Joe's panic attacks (Robinaugh et al., 2020).

Reduce the fear of reoccurrence of panic symptoms

Joe is feeling helpless in the face of panic attacks. Therefore, he has avoided many social activities that could expose him to familiar stimuli that he relates to his panics. For instance, avoiding shopping in supermarkets after one panic episode has greatly inhibited Joe's ability to live a normal life. The second treatment goal will aim to reduce the fear that Joe would experience further panic symptoms without having the ability to manage them (Caputo & Tomai, 2020). This treatment plan must convince Joe that he can overcome his panic symptoms if he carefully considers his unconscious and subconscious mind activities that could be triggering his condition. Joe will be guided into understanding his unconscious fantasies and conflicts that might be taking advantage of his mind and suppressing his panic.

Reduce the fear of triggering panic and reduce the avoidance of activities and surroundings that trigger panic

The third treatment goal will incorporate strategies that could help Joe reduce his fear of triggering panic and reduce the avoidance of activities and environments that may trigger panic. Joe needs to get used to the environments that trigger panic because they form a large part of his life and avoiding them eternally would greatly hinder his life. The therapist will use the superego

components of the psychodynamics theory to implement strategies for calming and coping so that Joe reduces overall anxiety and manages panic symptoms (Caputo & Tomai, 2020).

Implementation of the Treatment Plan

The treatment plan will be implemented by organizing therapy sessions with Joe and organizing modalities of operations and codes of conduct (Lundin, 2020). A clear history of the panic attacks will be taken with deep dive into their initial occurrence and progression up to the latest stage. The stimuli that trigger Joe's panic attacks will be evaluated to establish what thoughts or situations trigger the reactions. An understanding of the frequency and intensity of panic attacks will help the therapist to establish a plan that will assist in reducing the stimuli that could aggravate Joe's situation. Analyzing the frequency of panic attacks forms part of understanding the accumulation of unconscious and subconscious desires that cannot be acted out. The patient will explain what triggers his fears and with the revelations, the therapist would guide the patient into establishing the unconscious and subconscious desires that are triggering his situation (Lundin, 2020). The therapist will administer psychological tests meant to assess the depth of the agoraphobia and sensitivity to anxiety.

After understanding the history and gravity of Joe's condition, the therapist will carefully explain to Joe what panic attacks are and how the therapy sessions can help in reducing their frequency or even eliminate them. The therapy session should stress that panic attacks are not medically dangerous and that they are mere false alarms of danger. Joe should understand that panic disorders are not a sign of weakness or craziness. This will enable Joe to reduce the fear he has that panic symptoms will recur. The therapist will coordinate with physicians to administer the most appropriate psychotropic medication for Joe after discussing it with him. The

medication must be relevant to reducing Joe's symptoms. The therapist must monitor for adherence to the medication schedule to ensure high effectiveness.

After getting explanations of his condition and how it can be addressed, Joe will be taught behavioral controls like muscle relaxation, controlled breathing, and positive talk as means of managing anxiety symptoms. The client will be taught to keep track of external stimuli and behavioral responsibilities away from internal psychological changes. The implementation of the positive talk will be vital in reforming Joe's mindset and reducing the fear of triggering panic. Joe will have to undergo gradual exposure to feared sensations such as shopping in supermarkets until he develops confidence in those areas. These processes will be carefully monitored and implemented gradually to prevent extreme reactions.

The counselor will finally come up with relapse prevention strategies for managing future anxiety problems. The counselor will discuss with Joe the difference between lapse and relapse and how best he can handle the situations. This will include an opportunity for reentry into the therapy program should the situations get out of hand for Joe in the future (Caputo & Tomai, 2020).

Termination Plan Implementation

Include termination plans in the initial therapy plan

The initial treatment plan should have a termination plan to make the client ready for termination from the start of the therapy. A clear outline of the contents of the therapy would assist the client to realize that at some point they would have to complete the therapy. This will incorporate setting the goals of the therapy and setting an endpoint. The end of the therapy will be pegged on meeting the goals set at the beginning of the process (Caldirola & Perna, 2019).

Evaluate termination readiness

Before doing the actual termination, the therapist will evaluate whether Joe is ready to be terminated. This will be achieved by conversing with Joe to ensure that he understands the need for termination and that he is ready to undergo it at that point.

Review treatment gains

If Joe is ready for termination, the therapist will evaluate together with the client, the treatment gains made. The therapist will check for positive body language, decreased symptom severity, improved relationships, positivity on prospects, and improved functioning in activities that Joe had avoided before. The therapist will ask Joe to review the changes they have noticed through the therapy (Robinaugh et al., 2020).

Setting a maintenance plan

The therapist and Joe will then create a maintenance plan and terminate the therapy upon fulfilling all the goals. Issues like relapses may occur hence requiring a concrete maintenance therapy that can lead Joe to self-help or ask for help where necessary. The therapist will explain to Joe how to use coping strategies to make his situation better and when to return to therapy.

References

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