

<u>Case Study Assignment</u> Turnitin Assignment	Oct 30, 2017 9:28 AM GRADED	33.00 /36
<u>Self-practice, Self-reflection, Self-Care Portfolio II</u> Turnitin Assignment	Nov 14, 2017 4:46 PM GRADED	7.00 /7
<u>PSYC3082 online quiz</u> Test	Oct 27, 2017 7:03 PM GRADED	17.00 /20
Mid-semester exam	Oct 25, 2017 12:31 PM GRADED	71.00 /80

Positive psychology

- Is an umbrella term for the study of **positive emotions, positive character traits** and **enabling institutions**.
- Stemmed from **Seligman's background in depression research (learned helplessness**, later reformulate to include **attributions**), he proposed depression can be effectively treated not only by reducing symptoms but also by building positive emotions and character strengths and meaning. Early research showed benefits of positive psychology interventions for **depressed person**
- The difference between positive psychology and ACT is that the former focuses on **pleasure** and ACT doesn't focus on one's feeling state but is on **values and committed actions**.
- It is based on **strength-based assessment** and there are validated self-report inventories for assessing strengths but they are not widely used with clinical populations.
- Jahoda, an early research in happiness, proposed studying **wellbeing** in its own right, not simple as the absence of distress.
- The goal of **psychotherapy** tends to be the assessment and treatment of **deficits**. But mental health is not just the absence of psychopathology nor is it just the presence of high levels of happiness. It is a complete state comprising both
- Positive and negative emotions are not always yoked. Positive and negative affect are **stable** and **independent** factors. They both involve **different psychological processes**, are mediated by **different neural substrates** and serve **different evolutionary functions**.

Two philosophical traditions reflects in positive psychology

1. **Hedonia** (feeling good)
- The pursuit of **pleasure**
2. **Eudomania** (functioning well)
- A way of life where individuals strive to be better by using **talent** and making **meaning**

Two important insights yielded from the happiness research

1. Striving to obtain **goods** and **goals** only brings **momentary happiness**
 2. After the influence of **genes** on a person's **average level of happiness**, environmental and demographic factors exert **little influence** on happiness
- Yet, we spend disproportionate large sums of time and money on pursuing these. Even after we got these, we adapt quickly to new circumstances, goods and goals and we never satisfy and always striving for more
 - Thus, having clients habitually engage in varied activities that fit their values, strengths and talents enhances happiness.

<i>Jahoda's 6 processes of mental health</i>	<i>Ryff's 6 dimensions of psychological wellbeing</i>
Self acceptance	Self-acceptance
Growth	Personal growth
Environmental mastery	Environmental mastery
Autonomy	Autonomy
Integration of personality	Purpose in life
Accurate perception of reality	Positive relations with others

	<i>Limitations</i>	<i>Contributions</i>
REBT	<ul style="list-style-type: none"> - A potential limitation of REBT is its negative view of dependency. Ex: Many cultures view interdependence as necessary to good mental health. Clients with long-cherished cultural values pertaining to interdependence may not respond favorably to forceful methods of persuasion toward independence. - The assumption that exploring the past ineffective in helping clients change faulty thinking and behaviour is questionable. Past childhood experiences can be valuable as sources of irrational beliefs still held by clients in the here and now. - Misuse of the therapist's power by imposing ideas of what constitutes 	<ul style="list-style-type: none"> - Teaching clients ways to carry on their own therapy without the direct intervention of a therapist

	<p>rational thinking</p> <ul style="list-style-type: none"> - Some clients may have trouble with a confrontational style of REBT, especially if a strong therapeutic alliance has not been established. 	
CBT	<ul style="list-style-type: none"> - The emphasis of CBT on assertiveness etc may limit its use in cultures that value subtle communication over these topics. - CBT is focused on the present, which can result in the therapist failing to recognize the role of the past in the client's development. If the therapist is unaware of a client's cultural beliefs, which are rooted in the past, the therapist may have difficulty interpreting the client's personal experiences accurately. - Therapist may overemphasize cognitive restructuring to the neglect of environmental interventions. - CBT has been criticized for focusing too much on the power of positive thinking (but cognitive therapists don't pursue positive thinking but rather thinking based on actual experience); being too superficial and simplistic and being too technique oriented (although cognitive therapist is straightforward and looks for simple rather than complex solutions, this doesn't imply that the practice of cognitive therapy is simple); denying the importance of the client's past (cognitive therapists also recognize that clients' current problems are often a product of earlier life experiences); failing to use the therapeutic relationship; working only on eliminating symptoms but failing to explore the underlying causes of difficulties; ignoring the role of unconscious 	<ul style="list-style-type: none"> - CBT share similarities with REBT but differ in being empirically rather than philosophically derived - Research demonstrates that the effects of CBT on depression and hopelessness are actually maintained for at least one year after treatment

	factors (cognitive therapists don't believe the unconscious is difficult to access); neglecting the role of feelings	
<i>SB-CBT</i>	<ul style="list-style-type: none"> - Evidence supporting the approach is still in its infancy. 	<ul style="list-style-type: none"> - In addition to incorporating strengths at each phase of treatment, SB-CBT has successfully incorporated a wide range of modalities including imagery into the broad repertoire of CBT interventions. - SB-CBT also provides models that extend CBT from evidence-based treatment of client problems to evidence-based models for developing positive qualities and client strengths.
<i>CBM</i>	<ul style="list-style-type: none"> - Practitioners without Meichebaum's therapeutic style may not get the same result even though they follow his treatment protocol 	<ul style="list-style-type: none"> - Understanding how stress is largely self-induced through inner dialogue.