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5-3-2021

Exposure Therapy/Systematic Desensitization

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EXPOSURE THERAPY/INTERVENTION

- Exposure Hierarchy Ladder as a measurement of success/alleviate symptoms/list of least to most feared situations.
- Gradual Exposure – Client is the creator of the steps on the fear ladder.
- Short-term treatment as client learns to self-manage anxiety symptoms.
- In-session practice of techniques where client can then monitor and scale levels of anxiety and worry when exposed to fear-causing situations.
- Goal is to reduce level of anxiety by half while building tolerance of distress level when maintaining within discomfort during exposure of fear.



RESEARCH

- Exposure Therapy – An appropriate treatment in the elimination of phobias and anxieties.
 - For a conditioned response to be susceptible to modification through systematic desensitization, it must be a response to a specific situation or stimulus, not due to irrational beliefs or overvalued ideas, that is an irrational fear and that there is an adequate response incompatible with anxiety (Mcleod, 2015)
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Presenting Problem

Client is a 25-year-old married cisgender female residing with partner. Client works for a corporation with high demands. Client shared the most difficult incident was losing mom.

Client does not have a current relationship with biological father, although bio father may call on occasions. Client stated has made attempts at regaining a positive relationship with dad, although client is aware that dad “comes and goes” from her life.

Client states having a positive relationship with paternal grandmother and other family members.

Chief Complaint: Client is experiencing both emotional and physical symptoms due to the amount of stress at work. Client describes herself as “wanting to be efficient and not one to complain.”

Client is non-assertive and felt that this is the cause of feeling overwhelmed with workload and the cause of not being able to discuss feelings of abandonment with bio father.



CONCEPTUALIZATION

Predisposing:

Experiences “nervousness” as a child

Client assumes no supports will come and has concerns with not being heard and with having coworkers perceive client as “inefficient.”

Precipitating:

High stress job, no parental guidance, loss of parents

Client experiences an increase in anxiety when not seeing an end to the amount of work allocated to her.

Client does not receive direct supports with accounts and finds that added responsibilities continue to create an increase in workload.

Perpetuating:

Unable to voice concerns of work overload/unable to share feelings of abandonment with dad.

Client is aware of the inability to ask for supports due to concerns with how others may perceive her when needing assistance. Client wants to be perceived as the person that can take on the work.

Protective: Partner and family supports, use of positive coping skills.

Client can identify maladaptive coping strategies as a temporary relief of difficult feelings.

Client can identify how the use of maladaptive coping strategies reinforces unhelpful thoughts.

Current significant relationship.

Experiencing symptoms of anxiety, guilt and l/o motivation to re-establish relationship with bio father.

Avoidance of social gatherings, unable to demonstrate assertiveness.

Significant fatigue, difficulty relaxing.

No previous psychiatric care/diagnosis/medication.



APPLICATION OF INTERVENTION

- Assessments are completed using DASS-21 during sessions 1, 3, 4.
 - Client practices use of positive coping skills in preparations to building a Fear Ladder.
 - Client organized types of situations, thoughts and feelings that sets off anxiety using a Fear Ladder Hierarchy.
 - Client rates level of anxiety during situations causing anxiety.
 - Client agrees to work toward reducing anxiety levels during a situation that will cause significant anxiety toward positive change.
 - Client works through reducing anxiety and stress levels by the 4th session.
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Evaluation/Outcome

DASS-21

	Session 1	Session 3	Session 4
Depression	(norm) 4	(norm) 6	(norm) 4
Anxiety	(mild) 8	(mild) 8	(norm) 6
Stress	(mild) 15	(mod) 19	(mild) 15



References



Lovibond, S.H. & Lovibond, P.F. (1995). *Manual for the Depression Anxiety & Stress Scales*. (2nd Ed.) Sydney: Psychology Foundation.

American Psychiatric Association. (2013). Anxiety disorders. In *Diagnostic and statistical manual of mental disorders* (5th ed.) Author

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