

## Treating Psychological Disorders

### Therapy on Four Legs

Lucien Masson, a 60-year-old veteran, put it simply: “Sascha is the best medicine I’ve ever had.”

Lucien is speaking about his friend, companion, and perhaps even his therapist, a Russian wolfhound named Sascha. Lucien suffers from post-traumatic stress disorder (PTSD), a disorder that has had a profoundly negative impact on his life for many years. His symptoms include panic attacks, nightmares, and road rage. Lucien has tried many solutions, consulting with doctors, psychiatrists, and psychologists, and using a combination of drugs, group therapy, and anger-management classes.

But Sascha seems to be the best therapist of all. He helps out in many ways. If a stranger gets too close to Lucien in public, Sascha will block the stranger with his body. Sascha is trained to sense when Lucien is about to have a nightmare, waking him before it starts. Before road rage can set in, Sascha gently whimpers, reminding his owner that it doesn’t pay to get upset about nutty drivers.

In the same way, former military medic Jo Hanna Schaffer speaks of her chihuahua, Cody: “I never took a pill for PTSD that did as much for me as Cody has done.” Veteran Karen Alexander feels the same way about her Bernese mountain dog, Cindy: “She’ll come up and touch me, and that is enough of a stimulus to break the loop, bring me back to reality. Sometimes I’ll scratch my hand until it’s raw and won’t realize until she comes up to me and brings me out. She’s such a grounding influence for me.”

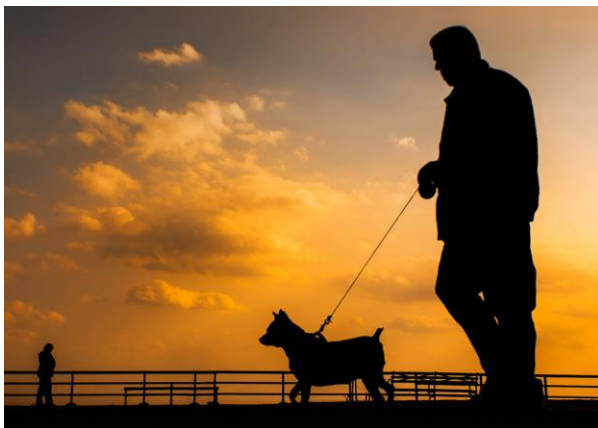


Figure 14.1 Psychiatric Therapy Dogs.

These dramatic stories of improvement from debilitating disorders can be attributed to an alternative psychological therapy, based on established behavioural principles, provided by **psychiatric service dogs**, as shown in Figure 14.1, “Psychiatric Therapy Dogs.” The *dogs are trained to help people with a variety of mental disorders, including panic attacks, anxiety disorder, obsessive-compulsive disorder, and bipolar disorder*. They help veterans of Iraq and Afghanistan cope with their traumatic brain injuries as well as with PTSD.

The dogs are trained to perform specific behaviours that are helpful to their owners. If the dog's owner is depressed, the dog will snuggle up and offer physical comfort; if the owner is having a panic attack, the owner can calm himself by massaging the dog's body. The serenity shown by the dogs in all situations seems to reassure the PTSD sufferer that all must be well. Service dogs are constant, loving companions who provide emotional support and companionship to their embattled, often isolated owners (Shim, 2008; Lorber, 2010; Alaimo, 2010; Schwartz, 2008).

Despite the reports of success from many users, it is important to keep in mind that the utility of psychiatric service dogs has not yet been tested, and thus would never be offered as a therapy by a trained clinician or paid for by an insurance company. Although interaction between humans and dogs can create positive physiological responses (Odendaal, 2000), whether the dogs actually help people recover from PTSD is not yet known.

Psychological disorders create a tremendous individual, social, and economic drain on society. Disorders make it difficult for people to engage in productive lives and effectively contribute to their family and to society. Disorders lead to disability and absenteeism in the workplace, as well as physical problems, premature death, and suicide. At a societal level the costs are staggering. As the fifth most common diagnosis for Canadians in 2008, anxiety has been experienced by 12% of Canadians in their lifetime and accounts for 6,292 visits to doctors' offices. Of those, 33% were men and 67% were women with 57% of these visits resulting in a prescription for medication (Mood Disorders Society of Canada, 2009).

The goal of this chapter is to review the techniques that are used to treat psychological disorder. Just as psychologists consider the causes of disorder in terms of the bio-psycho-social model of illness, treatment is also based on psychological, biological, and social approaches.

- The **psychological approach** to reducing disorder involves providing help to individuals or families through psychological therapy, including psychoanalysis, humanistic-oriented therapy, cognitive behavioural therapy (CBT), and other approaches.
- The **biomedical approach to reducing disorder** is based on the use of medications to treat mental disorders such as schizophrenia, depression, and anxiety, as well as the employment of brain intervention techniques, including *electroconvulsive therapy (ECT)*, *transcranial magnetic stimulation (TMS)*, and *psychosurgery*.
- The **social approach to reducing disorder** focuses on changing the social environment in which individuals live to reduce the underlying causes of disorder. These approaches include *group, couples, and family therapy*, as well as *community outreach programs*. The community approach is likely to be the most effective of the three approaches because it focuses not only on treatment, but also on prevention of disorders (World Health Organization, 2004).

A clinician may focus on any or all of the three approaches to treatment, but in making a decision about which to use, he or she will always rely on his or her knowledge about existing empirical tests of the effectiveness of different treatments. These tests, known as *outcome studies*, carefully compare people who receive a given treatment with people who do not receive

a treatment, or with people who receive a different type of treatment. Taken together, these studies have confirmed that many types of therapies are effective in treating disorder.

## References

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