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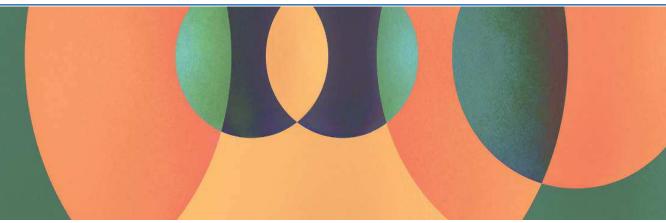
Douglas Bernstein is Professor Emeritus at the University of Illinois, and Courtesy Professor of Psychology at the University of South Florida. He founded both the Association for Psychological Science (APS) Preconference Institute on the Teaching of Psychology and the APS Preconference Institute on the Teaching of Psychological Science at the biennial APS International Convention of Psychological Science. He was the founding chairman of the APS Fund for the Teaching and Public Understanding of Psychological Science. He served for 30 years as chairman of the National Institute on the Teaching of Psychological Association (APA) Distinguished Teaching in Psychology Award.

Bethany Teachman is a professor and Director of Clinical Training at the University of Virginia in the Department of Psychology. Her lab investigates biased thinking that contributes to the development and maintenance of psychopathology, especially anxiety disorders. She is an author of over 175 publications, including books on treatment planning and eating disorders. She has been awarded an American Psychological Association Distinguished Scientific Early Career Award, and she is an Association for Psychological Science and American Association for the Advancement of Science Fellow. Currently, she is Chair of the Coalition for the Advancement and Application of Psychological Science, and received a 2019 Presidential Citation from the American Psychological Association.

> **Bunmi O. Olatunji** is Gertrude Conaway Vanderbilt Professor of Psychology, Associate Professor of Psychiatry, and Director of Clinical Training at Vanderbilt University. He has published more than 160 journal articles and book chapters. He has been the recipient of the American Psychological Association (APA) Division 12 David Shakow Early Career Award for Distinguished Scientific Contributions to Clinical Psychology, the Association for the Advancement of Behavioral and Cognitive Therapies New Researcher Award, and the APA Division 12 Theodore Blau Early Career Award for Distinguished Professional Contributions to Clinical Psychology. He is also a recent recipient of the APA Distinguished Scientific Award for an Early Career Contribution to Psychology. This award recognizes excellent psychologists who are at early stages of their research careers.

> **Scott O. Lilienfeld** is Samuel Candler Dobbs Professor of Psychology at Emory University in Atlanta, and Visiting Professor in the School of Psychological Sciences at the University of Melbourne (Australia). His primary areas of interest are personality and personality disorders, individual differences in cognitive bias propensity, evidence-based practice in clinical psychology, psychiatric classification, and applications of scientific thinking to psychology. He is (twice) past-president of the Society for a Science of Clinical Psychology and the recipient of several awards, including the James McKeen Cattell Award for Lifetime Contributions to Applied Psychological Science from the Association for Psychological Science and the Ernst R. Hilgard Award for Lifetime Career Contributions to General Psychology from Division 1 (General Psychology) of the American Psychological Association. He is the author or co-author of over a dozen books, including 50 Great Myths of Popular Psychology (Wiley) and Psychology: From Inquiry to Understanding (Pearson).

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Introduction to Clinical Psychology

Bridging Science and Practice

Ninth Edition

Douglas A. Bernstein University of South Florida

Bethany A. Teachman University of Virginia

Bunmi O. Olatunji Vanderbilt University, Tennessee

Scott O. Lilienfeld *Emory University, Atlanta*





University Printing House, Cambridge CB2 8BS, United Kingdom

One Liberty Plaza, 20th Floor, New York, NY 10006, U.S.A

477 Williamstown Road, Port Melbourne, VIC 3207, Australia

314-321, 3rd Floor, Plot 3, Splendor Forum, Jasola District Centre, New Delhi - 110025, India

79 Anson Road, #06-04/06, Singapore 079906

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> To our mentors, who encouraged us to take the path to clinical psychological science, and to our students, who will lead the way forward.

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Preface

The eight previous editions of this book have all shared the same four goals. The first is to offer an introduction to clinical psychology that, while appropriate for graduate students, is written especially with intellectually curious undergraduates in mind. Many psychology majors have an interest in clinical psychology, but not a clear understanding of what the field involves and requires. Many nonmajors, too, want to know more about clinical psychology, and we believe that both groups can benefit from a thorough survey of the field that does not delve into all the details typically included in texts aimed only at graduate students. Readers whose backgrounds include coursework in introductory psychology and abnormal psychology will find the book especially valuable.

The second goal is to present the whole story of clinical psychology, its history, its present scope and functions, and a glimpse into its future. We do so in a way that includes the perspectives of many approaches to clinical psychology—the behavioral, interpersonal, cognitive behavioral, humanistic, psychodynamic, acceptance-based, social systems, etc.— and that highlights the strengths and weaknesses of the scientific evidence for each.

The third goal is to emphasize the value of scientific research in clinical psychology. We believe this is a necessary and useful perspective for all clinical psychologists, whether they are practitioners, researchers, educators, policy makers, or consultants. So you will see as a core theme throughout the book the idea that an evidence-based approach to clinical psychology offers the best hope for helping clients because it is the one most likely to identify the causes of, and effective treatments for, psychological disorders. The fourth goal is to offer a book that is interesting and enjoyable. As you might expect, we love the field of clinical psychology. We find it fascinating. We enjoy teaching about it and writing about it, and we hope that some of our excitement and enthusiasm will rub off on you.

These four goals have not changed, but many other aspects of the book are new. First and foremost, the ninth edition benefits from the knowledge, skills, and experience of three new members of the author team. Led by Doug Bernstein of the University of South Florida, who cowrote the first edition in 1980, the team now includes Bethany Teachman of the University of Virginia, Bunmi Olatunji of Vanderbilt University, and Scott Lilienfeld of Emory University. Here is what we have done for the ninth edition:

1. Content Updates. We have added more than 1000 new references that describe the latest scientific research and information about all aspects of contemporary clinical psychology. We cover the development of evidence-based clinical science, emerging models for clinical training and accreditation, new approaches to diagnosing and classifying the key features of mental illness, and the latest trends in formulating and evaluating interventions for the treatment of those disorders. We also summarize the latest changes in healthcare legislation and managed-care systems, and advances in the delivery of mental health-care services (imagine treatment through a smartphone app!) that will influence clinical psychology training, research, and practice.

The structure and sequence of some chapters have also changed. In particular, the Clinical Child Psychology chapter has been expanded to include a major section on Clinical Geropsychology, and renamed Clinical Psychology for Youth

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and Older Adults. In addition, the chapter on Research on Clinical Intervention now appears before, rather than after, the chapters on specific types of treatment. This change reflects our desire to emphasize that clinicians of all theoretical persuasions should use scientific methods to evaluate the effectiveness of clinical interventions.

2. More Integrated Case Examples. In this new edition, we wanted to provide more examples of the kinds of clients and client problems that clinical psychologists encounter in their research and practice. We also wanted to show you how the same clients and problems can be understood from many different theoretical perspectives. So, in Chapter 1 we introduce you to the members of the "Jackson" family (not their real name), who illustrate many of the fascinating problems and practice issues that clinical psychologists encounter every day. Our description of each family member will provide vivid and easily grasped examples of clinical assessment techniques, therapeutic methods, symptoms of psychological disorders, the importance of sociocultural factors in diagnosis and treatment, and the like. As you read the book, you will meet the same family members in varying combinations (e.g., in family therapy sessions) and in different contexts (e.g., diagnostic interviewing, neuropsychological assessment, individual therapy), rather than always being introduced to entirely new cases. By providing background information about a single family, its history, and its dynamics in Chapter 1, many of the case examples in later chapters will involve people with whom you will already be familiar.

3. Scientific Thinking about Current Controversies. Clinical psychology is an ever-changing field, and proposals for change often meet with varying reactions. As a result, there are a number of topics about which clinical psychologists and other mental health professionals disagree, such as how much weight should be given to various sources of evidence when making clinical decisions, how clinical psychologists should be trained, and whether they should be allowed to prescribe medication for psychological disorders. We describe these and many other current controversies throughout the book, and in special sections in every chapter we invite you to "Think Scientifically" about them by asking yourself five specific questions:

What am I being asked to believe?

- What kind of evidence is available to support the claim?
- Are there alternative ways of interpreting the evidence, including those that my biases and preconceptions might have kept me from seeing?
- What additional evidence would help to evaluate those alternatives?
- What conclusions are most reasonable given the kind of evidence available?

4. Additional Coverage of Clinical Technology. Updating the book gave us the opportunity to describe the changes taking place in clinical psychology that involve new digital technologies. You will see examples of these changes throughout the book that relate to everything from delivery of mental health services via the internet and social media, to the use of artificial intelligence in clinical assessment, and the application of virtual reality systems in various kinds of treatment.

5. Highlighting Individual Differences and Sociocultural Diversity. The sociocultural characteristics of clinical psychologists and their clients have become increasingly diverse over the years. As a result, you will find that our coverage of everything from clinical training and assessment techniques to treatment methods and health-care delivery systems takes into account the impact of factors such as age, gender, race and ethnicity, culture and nationality, sexual orientation, and disability status on clinical research and practice.

6. More Reader-Friendly Features. We have added a number of new elements to the ninth edition that are designed specifically to make the book easier and more enjoyable to read, more supportive of your learning, and more helpful when the time comes to study for quizzes and tests.

• First, we have used a larger font, which makes for less tiring reading, and we added more than 20 new photos, figures, and tables to illustrate the text and add variety to your reading experience.

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Here we are, from left to right: Bunmi Olatunji, Scott Lilienfeld, Bethany Teachman, and Doug Bernstein during our two-day planning session for the new edition in Atlanta in 2018.

- Second, all the most important key terms are now printed in **boldface** type and are reproduced, along with their definitions, in the margin after the first mention of each term.
- Third, we have retained the chapter and section previews that help you to anticipate what you are about to read, but we have also added "In Review" tables at the end of each major section of every chapter. These tables summarize the main points of the section and then pose three self-testing questions that give you a

chance to see if you have understood the material in the section or if you might want to go back and re-read some of it (the answers to the self-test questions are at the back of the book).

We hope you enjoy reading the ninth edition as much as we enjoyed creating it. We would love to hear your comments and suggestions for further improvement, so please feel free to contact the author team through Doug Bernstein at douglas.bernstein@comcast.net.

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Significant Dates and Events in the History of Clinical Psychology

- 1879 Wilhelm Wundt establishes first formal psychology laboratory at the University of Leipzig.
- 1885 Sir Francis Galton establishes first mental testing center at the South Kensington Museum, London.
- 1890 James McKeen Cattell coins the term *mental test.*
- 1892 American Psychological Association (APA) founded.
- 1895 Breuer and Freud publish *Studies in Hysteria*.
- 1896 Lightner Witmer founds first psychological clinic, University of Pennsylvania.
- 1905 Binet–Simon Intelligence Scale published in France.
- 1907 Witmer founds first clinical journal, *The Psychological Clinic*.
- 1908 First clinical internship offered at Vineland Training School.
- 1909 William Healy founds first child guidance center, the Juvenile Psychopathic Institute, Chicago.Freud lectures at Clark University.
- 1910 Goddard's English translation of the 1908 revision of the Binet–Simon Intelligence Scale published.
- 1912 J.B. Watson publishes *Psychology as a Behaviorist Views It.*
- 1916 Terman's Stanford–Binet Intelligence Test published.
- 1917 Clinicians break away from APA to form American Association of Clinical Psychology (AACP).
- 1919 AACP rejoins APA as its clinical section.
- 1920 Watson and Rayner demonstrate that a child's fear can be learned.

- 1921 James McKeen Cattell forms Psychological Corporation.
- 1924 Mary Cover Jones employs learning principles to remove children's fears.
- 1931 Clinical section of APA appoints committee on training standards.
- 1935 Thematic Apperception Test (TAT) published.
- 1937 Clinical section of APA breaks away to form American Association for Applied Psychology (AAAP).
- 1938 First Buros *Mental Measurement Yearbook* published.
- 1939 Wechsler–Bellevue Intelligence Test published.
- 1942 Carl Rogers publishes *Counseling and Psychotherapy*, outlining an alternative to psychodynamic therapy.
- 1943 Minnesota Multiphasic Personality Inventory (MMPI) published.
- 1945 AAAP rejoins APA.
 Journal of Clinical Psychology published.
 Connecticut State Board of Examiners in Psychology issues first certificate to practice psychology.
- 1947 American Board of Examiners in Professional Psychology organized. Shakow Report recommends clinical training standards to APA.
- 1949 Colorado conference on training in clinical psychology convenes, recommends "Boulder Model."
- 1950 APA publishes first standards for approved internships in clinical psychology.
- 1952 American Psychiatric Association's Diagnostic and Statistical Manual (DSM-I) published.

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1953	APA's Ethical Standards for Psychologists
	published.
1955	Wechsler Adult Intelligence Test
	published.
1956	Stanford Training Conference.
1958	Miami Training Conference.
	Clinical Division of APA holds National
	Institute of Mental Health sponsored
	conference about research on
	psychotherapy.
1959	The first psychotherapy benefit in a
1707	prepaid insurance plan appears.
1965	Chicago Training Conference held.
1965	Psy.D. training program begins at the
1900	University of Illinois, Urbana-Champaign.
	Second edition of <i>Diagnostic and</i>
	Statistical Manual (DSM-II)
	published.
	Committee on Health Insurance begins
	campaign to allow payment of clinical
	psychologists' services by health insurance
	plans without requiring medical
	supervision.
1969	California School of Professional
	Psychology founded.
	APA begins publication of the journal,
	Professional Psychology.
1970	Department of Defense health insurance
	program authorizes payment of clinical
	psychologists' services without medical
	referral.
1971	Council for the Advancement of
	Psychological Professions and Sciences, a
	political advocacy group for clinical
	psychology, is organized.
	Journal of Clinical Child Psychology
	published.
1972	Menninger Conference on Postdoctoral
	Education in Clinical Psychology.
1973	Vail, Colorado, Training Conference.
1974	National Register of Health Service
	Providers in Psychology established.
	Federal government allows payment for
	clinical psychologists' services to its
	employees without medical supervision or
	referral.
	APA establishes <i>Standards for Providers of</i>
	Psychological Services.

First Inter-American Congress of Clinical Psychology held in Porto Alegre, Brazil.

- 1977 All 50 U.S. states have certification or licensing laws for clinical psychologists.
- 1980 Third edition of DSM (DSM-III) published.
 Smith, Glass, and Miller publish The Benefits of Psychotherapy.
 Blue Shield health insurance companies in Virginia successfully sued for refusing to pay for clinical psychologists' services to people covered by their plans.
- 1981 APA publishes its revised *Ethical Principles of Psychologists*.
- 1983 Joint Commission for the Accreditation of Hospitals allows clinical psychologists to become members of hospital medical staff. Conference on graduate education in psychology, Salt Lake City, Utah.
- 1988 American Psychological Society formed.
- 1990 California Supreme Court affirms right of clinical psychologists to independently admit, diagnose, treat, and release mental patients without medical supervision. Dick McFall publishes "Manifesto for a Science of Clinical Psychology."
- 1993 Commander John L. Sexton and Lt. Commander Morgan T. Sammons complete psychopharmacology program at Walter Reed Army Medical Center, becoming first psychologists legally permitted to prescribe psychoactive drugs.

1994 DSM-IV published. Amendment to Social Security Act guarantees psychologists the right to independent practice and payment for hospital services under Medicare. Academy of Psychological Clinical Science established.

1995 APA task force of clinical psychologists publishes list of empirically validated psychological therapies and calls for students to be trained to use them.

1996 Dorothy W. Cantor becomes first president of APA to hold a Psy.D. rather than a Ph.D..

2002 New Mexico grants prescription privileges to specially trained clinical psychologists.

Significant Dates and Events | xxiii

- 2005 APA sponsors a Presidential Task Force on evidence-based practice.
- 2006 Psychologists win a second settlement in
 2 years in federal court alleging that
 managed-care companies conspired to
 reduce and delay provider payments in
 violation of federal law.
 American Psychological Society becomes
 The Association for Psychological Science.
- 2008 The U.S. House of Representatives passes legislation requiring mental health parity: The Paul Wellstone Mental Health and Addiction Equity Act of 2007.
- 2009 University of Illinois at Urbana-Champaign becomes the first Psychological Clinical Science Accreditation System-accredited program.