

Current Treatments of Psychological Disorders

Spring 2023 Syllabus

Justin Dainer-Best

Course Number	Time	Location	Office Hours
PSY 319	W, 15:30-17:50	RKC 200	Th, 12-13:30

[Make an appointment to come to my office hours.](#)

Prerequisites: Moderated, ideally in psychology, and a course in the PSY 210s, or permission of instructor.

Wherever possible, I hope to work to make this course accessible and approachable for all students. For more information on accessibility for this course, please view [the section on that subject](#) below.

Overview

Psychotherapy is constantly evolving based on new research—and it has changed substantially since first coming into being in the end of the 19th century. We will focus this semester on understanding more modern treatment approaches. These approaches may focus on helping people to change their thinking and behaviors. Some place a greater emphasis on the social and interpersonal contexts in which behaviors occur. Some therapies, grounded in clinical psychological science, place a greater emphasis on the biopsychological bases of behavior, present functioning, and achieving change within shorter time periods.

We will continue to focus on therapies with demonstrated efficacy, beginning with a variety of cognitive-behavioral approaches—to which we will return throughout the semester—and moving to other techniques. Our readings will be based in treatment manuals, empirical research, and exhaustive reviews, with the aim of thinking critically about mental illness and our best ways of treating it.

This course will sometimes discuss topics that are sensitive or personal for many students. If something discussed in class leaves you feeling upset, please speak to a trusted person about

your experience. Further, if you find that you are struggling to cope with some of the topics discussed in class, you may contact [Bard Counseling Services](#), and [make an appointment](#); you may also email counselingservice@bard.edu or call 845-758-7433.

In the spirit of truth and equity, it is with gratitude and humility that we acknowledge that this class will take place on the sacred homelands of the Munsee and Muhheaconneok people, who are the original stewards of this land. Today, due to forced removal, the community resides in Northeast Wisconsin and is known as the [Stockbridge-Munsee Community](#). We honor and pay respect to their ancestors past and present, as well as to future generations and we recognize their continuing presence in their homelands. We understand that our acknowledgment requires those of us who are settlers to recognize our own place in and responsibilities towards addressing inequity, and that this ongoing and challenging work requires that we commit to real engagement with the Munsee and Mohican communities to build an inclusive and equitable space for all.

Objectives

By the end of the semester you should be able to . . .

- explain different theories of treatment
- understand communication of clinical psychological science
- analyze empirical articles and treatment manuals
- explain how treatment is planned for several major disorders

You are expected to come to each class prepared to discuss the assigned reading. Laptops are not generally expected during class discussions. Instead, you should plan to bring paper or a notebook. (Digital copies of readings are appropriate; you need not print readings if you do not choose to.)

Instructor

The instructor for this course is Assistant Professor of Psychology Justin Dainer-Best (he/him).

Materials

There is no individual textbook used in this course. Readings will be posted on Brightspace. All readings uploaded to Brightspace should work with a screen reader; if you find a reading that is not processed correctly, please let me know and I will convert it or work with you to find an alternative. You should complete each reading *in preparation for class*, as listed below on the [schedule](#).

Students may choose to purchase the following texts from which readings are drawn:

- Beck, J. (2020). *Cognitive behavior therapy: Basics and beyond* (3rd ed.).
- Hayes, S. C. & Hofmann, S. G. (Eds.) (2018). *Process-based CBT: The science and core clinical competencies of cognitive behavioral therapy*.
- Barlow, D. H. (Ed.). (2021). *Clinical handbook of psychological disorders: A step-by-step treatment manual*.

Class Policies

Attendance

We will move at a rapid pace; material that is missed due to absence will not be repeated in class or office hours. Our classes are designed around conversation, and your absence will impact both your own understanding and the class or your group. Because this class meets once a week, absences should be avoided wherever possible.

However, this is a college class and you are an adult; your attendance is your decision. Late arrivals can be disruptive to the class. Consistent patterns of lateness are unfair to other students. Please be on time.

If you are not feeling well, please do not come to class.

Masks

For the first week of class, I ask that we all come to class masked and remain masked throughout the class. We will discuss masking as a class and come to an agreement on whether we will continue masked as a class throughout the semester, with the understanding that the safety of the community requires all of to prioritize one another, and disabled individuals may need others to mask for their safety.

If you have recently been ill, please do wear a mask when you attend; masks are effective at reducing spread of many respiratory illnesses. Each of us shares responsibility for the health and safety of all in the classroom.

Accommodations & Accessibility

Bard College is committed to providing equal access to all students. If you anticipate issues related to the format or requirements of this course, please contact me so that we can arrange to discuss. I would like us to discuss ways to ensure your full participation in the course. Together we can plan how best to support your learning and coordinate your accommodations. Students who have already been approved to receive academic accommodations through disability services

should share their accommodation letter with me and make arrangements to meet as soon as possible.

If you have a learning difference or disability that may relate to your ability to fully participate in this class, but have not yet met with the Disability Support Coordinator at Bard, you can contact their office through <https://www.bard.edu/accessibility/students/>; the Coordinator will confidentially discuss the process to establish reasonable accommodations. Please note that accommodations are not retroactive, and thus you should begin this process as soon as possible if you believe you will need them.

Additionally, as my office in Preston Hall may be physically difficult to access, you may always request to meet with me in another location. I am available for meetings online as well as those in person.

Diversity, Equity, & Inclusion

It is important to me that this course provides an open and supportive learning environment for all students. I invite you to speak with me if you have concerns or questions regarding issues of belonging, safety, or equity in the classroom. I want our discussions to be respectful of all students. If I am not helping the classroom to feel like an inclusive environment, I invite you to provide me with [anonymous] feedback. Different forms of knowledge can be valuable in a psychology classroom. In this class, we will engage with complex topics of mental health and illness and, as such, respect for experiential and other viewpoints is extremely important.

Plagiarism and Academic Integrity

I expect you to be familiar with what plagiarism is and is not. You may not present someone else's work as your own without proper citation. Using AI-generated text is not a replacement for your own writing. You may not copy someone else's work. You may not simply reword text from another source without giving credit. Please cite others' work where relevant, and use your own writing. If you are not sure about the definition of plagiarism, or whether something constitutes plagiarism, please consult with me or with someone at Bard's [Learning Commons](#). Students caught plagiarizing will be reported to the Academic Judiciary Board, will get no credit for the assignment, and may fail the course.

I operate from the standpoint that you are interested in learning this material, and are doing your best to operate with integrity.

Cell phones and laptops

Before class, you should silence your cell phone, and you should not be on your phone during class unless you are asked to be (e.g., to respond to a poll). I do not recommend taking notes on your phone as a rule. I recommend taking notes on paper wherever possible. If you text or access materials unrelated to class during our class time, you are mentally absent from class.

When using a laptop, I encourage you to turn off notifications / turn on Do Not Disturb whenever possible. Browsing unrelated materials is distracting to you and also to your classmates.

Late Assignments

Most assignments can be turned in **within two days** of their due dates without penalty. For example, if an assignment is due before class, it may be turned in by Friday at midnight without penalty. However, please note that some assignments are intended to develop into conversations; even if you have not turned in a final document to me, you should be prepared to discuss your work in class. [Discussion questions](#) will receive no credit if completed late.

Assignments including drafts may still be turned in after their late date. However, such assignments are considered “missing” (see section “[Grading](#)” below). If your work is consistently turned in late, this also may impact your grade unless you discuss this lateness with me. All assignments are due by the last day of the semester.

Assignments

Class participation

This is a discussion-based seminar. You should expect to talk each class, and frequently. You will earn a small but meaningful portion of your grade from being an active class participant. In class discussions, you should learn to listen thoughtfully to your classmates and respond to them as well as adding your own viewpoints. If you are someone who finds it difficult to speak in a small class discussion, you should speak with me early in the semester.

Response papers and discussion questions

These assignments are meant to help prepare you and your classmates for class. As you’ll note, they are not accepted late for that reason.

Four 1-page response papers are due during the semester. Each response paper will respond to one or more of that week’s readings. You get to choose what topics you should like to respond to. However, two responses (at a minimum) are due before spring break. You are responsible

for turning your response papers in without prompting. Response papers must be turned in *before* class—ideally a full day before, but certainly before class begins. Response papers turned in late do not count for credit. If yours would be late, please postpone to another paper.

Additionally, before **six** of the semester's classes, you should also publish **two** discussion questions on the Brightspace discussion board. These questions will be used during class to lead discussion, as described below. Discussion questions count as a separate **grade**. You will receive full credit for your discussion questions if they are novel (i.e., not repeating someone else's previously-submitted questions) and add something or extend beyond the questions raised by that week's readings. Questions are due by 10pm the night before class. Questions turned in after 10pm but before class will receive partial credit. Questions turned in after class begins will receive no credit.

Discussion leaders

Each week, two students will compile any discussion questions written by others, and develop their own. (You are permitted but not required to also write your **response papers** when you lead discussion.) You will be able to sign up for discussions in the first week of class. On weeks in which you lead discussion, you should plan to meet with your partner in advance to discuss the readings and identify major topics of discussion. You should also review your classmates' discussion questions. In class, after we discuss the primary arguments of the readings, I will ask you to help me to guide the conversation. I also recommend (but do not require) that you bring in some kind of exercise or case for us to discuss.

You will lead discussion twice over the course of the semester.

In-class debate

On April 26th, we will have two sets of in-class debates. Students will be provided with a side (i.e., choose a topic to argue for) beforehand, and be expected to prepare notes (and sources) defending their side. Sides will make opening statements; after both sides make their statements, individual questions and rebuttals will occur. Student should also be prepared to ask and answer questions. You will be scored based on your participation and a brief summary of the debate, with an argument as to which side "won" and why. This summary will be due by the class after the debate (i.e., May 3rd).

Topics include (1) are insight-oriented psychotherapies better/preferred to CBT? and (2) are empirically-supported treatments required to perform ethical psychotherapy?

Mid-semester essay

Your mid-semester essay is a 5-page single-spaced paper wherein you are expected to think critically about the topics of this course. The essay is formatted as a research proposal, written in APA style, which asks a question about the *mechanism* of one of the treatments we discuss in class (i.e., why does it work?). You should include an abstract, and the following sections: Introduction (literature review), Methods, Predicted Results, Discussion. (References should follow but are not included in the page count; a title page and outline are unnecessary.)

A topic and précis, including three references, are due via email by the first week of March for my review. A rough draft of the essay is due in class on March 8th for peer review. A draft with specific questions for me, including a cover letter describing your response to peer review and summarizing your thesis, is due by the Friday before spring break (i.e., March 17th). The final draft is due April 5th.

A short reflection on the essay, including how you would have changed it if you were writing it with all of the information you've gained since beginning it, is due during completion week.

Grades

Assignment	Points
Class participation	15
Response papers	12
Discussion questions	6
Leading discussion	10
Debate and summary	10
Paper topic	5
Paper for peer review	5
Paper draft and cover	10
Final draft of paper	20
Paper final reflection	7
Total	100

Grade	Range
A-range	90-100
B-range	80-89
C-range	70-79
D-range	60-69
F	below 60

Many assignments may be turned in **up to two days late *without penalty***. Assignments turned in later than that will not receive full points—at maximum a point off for each day late. “Missing” assignments are those which are not turned in by the late deadline, and which you have not contacted me about. If you miss assignments, you should always plan to be in touch with me as soon as possible to discuss when they will be turned in.

Schedule

The schedule may change over the course of the semester. Changes to assignment dates will be announced via email and also changed on the course website / Brightspace. You are responsible for keeping up with the readings, showing up to class prepared, and turning in assignments on-time.

Readings are listed by author last name; **PDFs can be found on Brightspace.**

(Continues on next page.)

Day	Date	Topic	Reading	Due
Wed	Feb 1	What are treatments?	Syllabus	
Wed	Feb 8	Empirically-supported treatments	Readings introducing CBT (Hofmann & Hayes, 2018) and explaining how it works (Beck, 2020b, 2020c) (in the same book)	
Wed	Feb 15	Exposure and Panic Disorder	An introduction to exposure therapy (Craske et al., 2014; Jacquart et al., 2022), what happens when we treat panic (Teachman et al., 2010), and a patient handout about panic (Telch, n.d.)	
Wed	Feb 22	Exposure and OCD	Learning about ExRP (Huppert & Roth, 2003), with some selections from an ExRP manual (Foa et al., 2012) and an RCT on ExRP (Foa et al., 2005)	
Wed	Mar 1	PE, EMDR, and PTSD	Selections from PE manual (Foa et al., 2007), an EMDR trial (Ahmad et al., 2007), and a study comparing PE and EMDR (van den Berg et al., 2015)	Topic and sources
Wed	Mar 8	Peer Review		Peer review draft
Wed	Mar 15	NET, CPT, and PTSD	Comparing NET and PE (Mørkved et al., 2014), selections from CPT Manual (Resick et al., 2017), and a CPT case study (Monson et al., 2014)	
Fri	Mar 17			Rough draft
Wed	Mar 22	No class / spring break		2 response papers
Wed	Mar 29	Diversity and inclusion in therapy	Cultural adaptations of CBT (Naeem et al., 2019); working with disability (Artman & Daniels, 2010); thinking about inclusion in psychiatry (Moreno & Chhatwal, 2020) and solutions (Connolly et al., 2021)	
Wed	Apr 5	Behavioral Activation and Depression	Comparing CBT for depression to other treatments (Cuijpers et al., 2013), defining behavioral activation (Dimidjian et al., 2021) and thinking about this in the context of risk factors (Dozois & Dobson, 2023)	Final draft
Wed	Apr 12	ACT and depression	Introduction to ACT (Hayes & Smith, 2005); cognitive restructuring (Beck, 2020a); and values (Lundgren & Larsson, 2018)	

Day	Date	Topic	Reading	Due
Wed	Apr 19	Mindfulness-based CBT, Depression, and Anxiety	Comparing ACT and CBT (Arch et al., 2012), comparing ACT and relaxation (Hayes-Skelton et al., 2013), and similarities of mbCBT and ACT (Roemer et al., 2013)	
Wed	Apr 26	Psilocybin, MDMA, PTSD, and end-of-life treatment	Call for new research on drug-assisted psychotherapy (Mithoefer et al., 2016), using psychedelics to reduce fear of death (Ross et al., 2016), psilocybin RCT for depression (Carhart-Harris et al., 2021), and you may skim a combination review (Bird et al., 2021)	
Wed	May 3	Debate		Debate
Wed	May 10	Board week: Psychodynamic psychotherapy	When to use psychodynamic treatments (Kivlighan III et al., 2015), which patients prefer psychodynamic treatment (Henkel et al., 2019), and for depression (Fonagy et al., 2015)	Debate summary
Wed	May 17	Completion week		Reflection

Remember: any PDFs can be found on Brightspace.

References

- Ahmad, A., Larsson, B., & Sundelin-Wahlsten, V. (2007). EMDR treatment for children with PTSD: Results of a randomized controlled trial. *Nordic Journal of Psychiatry, 61*(5), 349–354. <https://doi.org/10.1080/08039480701643464>
- Arch, J. J., Eifert, G. H., Davies, C., Plumb Vilaradaga, J. C., Rose, R. D., & Craske, M. G. (2012). Randomized clinical trial of cognitive behavioral therapy (CBT) versus acceptance and commitment therapy (ACT) for mixed anxiety disorders. *Journal of Consulting and Clinical Psychology, 80*(5), 750–65. <https://doi.org/10.1037/a0028310>
- Artman, L. K., & Daniels, J. A. (2010). Disability and psychotherapy practice: Cultural competence and practical tips. *Professional Psychology: Research and Practice, 41*(5), 442–448. <https://doi.org/10.1037/a0020864>
- Beck, J. S. (2020a). Identifying automatic thoughts. In *Cognitive behavior therapy: Basics and beyond* (3rd ed., pp. 210–226). Guilford Press.
- Beck, J. S. (2020b). Introduction to cognitive behavior therapy. In *Cognitive behavior therapy: Basics and beyond* (3rd ed., pp. 1–15). Guilford Press.
- Beck, J. S. (2020c). Overview of treatment. In *Cognitive behavior therapy: Basics and beyond* (3rd ed., pp. 16–25). Guilford Press.

- Bird, C. I. V., Modlin, N. L., & Rucker, J. J. H. (2021). Psilocybin and MDMA for the treatment of trauma-related psychopathology. *International Review of Psychiatry, 33*(3), 229–249. <https://doi.org/10.1080/09540261.2021.1919062>
- Carhart-Harris, R., Giribaldi, B., Watts, R., Baker-Jones, M., Murphy-Beiner, A., Murphy, R., Martell, J., Blemings, A., Erritzoe, D., & Nutt, D. J. (2021). Trial of psilocybin versus escitalopram for depression. *New England Journal of Medicine, 384*(15), 1402–1411. <https://doi.org/10.1056/nejmoa2032994>
- Connolly, S., Vanchu-Orosco, M., Warner, J., Seidi, P., Edwards, J., Boath, E., & Irgens, A. (2021). Mental health interventions by lay counsellors: A systematic review and meta-analysis. *Bulletin of the World Health Organization, 99*(08), 572–582. <https://doi.org/10.2471/blt.20.269050>
- Craske, M. G., Treanor, M., Conway, C. C., Zbozinek, T., & Vervliet, B. (2014). Maximizing exposure therapy: An inhibitory learning approach. *Behaviour Research and Therapy, 58*, 10–23. <https://doi.org/10.1016/j.brat.2014.04.006>
- Cuijpers, P., Berking, M., Andersson, G., Quigley, L., Kleiboer, A., & Dobson, K. S. (2013). A meta-analysis of cognitive-behavioural therapy for adult depression, alone and in comparison with other treatments. *The Canadian Journal of Psychiatry, 58*(7), 376–385. <https://doi.org/10.1177/070674371305800702>
- Dimidjian, S., Martell, C. R., Herman-Dunn, R., & Hubley, S. (2021). Behavioral activation for depression. In D. H. Barlow (Ed.), *Clinical handbook of psychological disorders: A step-by-step treatment manual* (6th ed., pp. 339–380). Guilford Press.
- Dozois, D. J., & Dobson, K. S. (2023). Investigating and treating psychosocial risk factors in depression: An integrative summary.
- Foa, E. B., Hembree, E. A., & Rothbaum, B. O. (2007). *Prolonged exposure therapy for PTSD: Emotional processing of traumatic experiences (therapist guide)*. Oxford University Press.
- Foa, E. B., Liebowitz, M. R., Kozak, M. J., Davies, S., Campeas, R., Franklin, M. E., Huppert, J. D., Kjernisted, K., Rowan, V., Schmidt, A. B., et al. (2005). Randomized, placebo-controlled trial of exposure and ritual prevention, clomipramine, and their combination in the treatment of obsessive-compulsive disorder. *American Journal of Psychiatry, 162*(1), 151–161. <https://doi.org/doi.org/10.1176/appi.ajp.162.1.151>
- Foa, E. B., Yadin, E., & Lichner, T. K. (2012). *Exposure and response (ritual) prevention for obsessive compulsive disorder: Therapist guide* (2nd). Oxford University Press.
- Fonagy, P., Rost, F., Carlyle, J.-a., McPherson, S., Thomas, R., Pasco Fearon, R., Goldberg, D., & Taylor, D. (2015). Pragmatic randomized controlled trial of long-term psychoanalytic psychotherapy for treatment-resistant depression: The Tavistock adult depression study (TADS). *World Psychiatry, 14*(3), 312–321. <https://doi.org/10.1002/wps.20267>
- Hayes, S. C., & Smith, S. (2005). Selections. In *Get out of your mind and into your life: The new acceptance and commitment therapy* (pp. 1–42). New Harbinger Publications.
- Hayes-Skelton, S. A., Roemer, L., & Orsillo, S. M. (2013). A randomized clinical trial comparing an acceptance-based behavior therapy to applied relaxation for generalized anxiety disorder. *Journal of Consulting and Clinical Psychology, 81*(5), 761–773. <https://doi.org/10.1037/a0032871>

- Henkel, M., Zimmermann, J., Huber, D., Staats, H., Wiegand-Grefe, S., Taubner, S., Frommer, J., & Benecke, C. (2019). Patient characteristics in psychodynamic psychotherapies. *Psychoanalytic Psychology, 36*, 1–8. <https://doi.org/10.1037/pap0000165>
- Hofmann, S. G., & Hayes, S. C. (2018). The history and current status of CBT as an evidence-based therapy. In S. C. Hayes & S. G. Hofmann (Eds.), *Process-based CBT: The science and core clinical competencies of cognitive behavioral therapy* (pp. 7–21, Vol. 1). Context Press.
- Huppert, J. D., & Roth, D. A. (2003). Treating obsessive-compulsive disorder with exposure and response prevention. *The Behavior Analyst Today, 4*(1), 66–70. <https://doi.org/10.1037/h0100012>
- Jacquart, J., Abramowitz, J., Arch, J., Margraf, J., & Smits, J. A. J. (2022). The basics of exposure therapy. In J. A. J. Smits, J. Jacquart, J. Abramowitz, & J. Arch Joanna and Margraf (Eds.), *Clinical guide to exposure therapy: Beyond phobias* (pp. 1–31). Springer Nature.
- Kivlighan III, D. M., Goldberg, S. B., Abbas, M., Pace, B. T., Yulish, N. E., Thomas, J. G., Cullen, M. M., Flückiger, C., & Wampold, B. E. (2015). The enduring effects of psychodynamic treatments vis-à-vis alternative treatments: A multilevel longitudinal meta-analysis. *Clinical Psychology Review, 40*, 1–14. <https://doi.org/10.1016/j.cpr.2015.05.003>
- Lundgren, T., & Larsson, A. (2018). Values choice and clarification. In S. C. Hayes & S. G. Hofmann (Eds.), *Process-based CBT: The science and core clinical competencies of cognitive behavioral therapy* (pp. 375–387). Context Press.
- Mithoefer, M. C., Grob, C. S., & Brewerton, T. D. (2016). Novel psychopharmacological therapies for psychiatric disorders: Psilocybin and MDMA. *The Lancet Psychiatry, 3*(5), 481–488. [https://doi.org/10.1016/S2215-0366\(15\)00576-3](https://doi.org/10.1016/S2215-0366(15)00576-3)
- Monson, C. M., Resick, P. A., & Rizvi, S. L. (2014). Posttraumatic stress disorder: Case study. In D. H. Barlow (Ed.), *Clinical handbook of psychological disorders: A step-by-step treatment manual* (5th). The Guilford Press.
- Moreno, F. A., & Chhatwal, J. (2020). Diversity and inclusion in psychiatry: The pursuit of health equity. *FOCUS, 18*(1), 2–7. <https://doi.org/10.1176/appi.focus.20190029>
- Mørkved, N., Hartmann, K., Aarsheim, L., Holen, D., Milde, A., Bomyea, J., & Thorp, S. (2014). A comparison of narrative exposure therapy and prolonged exposure therapy for PTSD. *Clinical Psychology Review, 34*(6), 453–467. <https://doi.org/10.1016/j.cpr.2014.06.005>
- Naeem, F., Phiri, P., Rathod, S., & Ayub, M. (2019). Cultural adaptation of cognitive-behavioural therapy. *BJPsych Advances, 25*(6), 387–395. <https://doi.org/10.1192/bja.2019.15>
- Resick, P. A., Monson, C. M., & Chard, K. M. (2017). *Cognitive Processing Therapy for PTSD: A comprehensive manual*. The Guilford Press.
- Roemer, L., Williston, S. K., Eustis, E. H., & Orsillo, S. M. (2013). Mindfulness and acceptance-based behavioral therapies for anxiety disorders. *Current Psychiatry Reports, 15*(11), 410. <https://doi.org/10.1007/s11920-013-0410-3>
- Ross, S., Bossis, A., Guss, J., Agin-Liebes, G., Malone, T., Cohen, B., Mennenga, S. E., Belser, A., Kalliontzi, K., Babb, J., et al. (2016). Rapid and sustained symptom

- reduction following psilocybin treatment for anxiety and depression in patients with life-threatening cancer: A randomized controlled trial. *Journal of Psychopharmacology*, *30*(12), 1165–1180. <https://doi.org/10.1177/0269881116675512>
- Teachman, B. A., Marker, C. D., & Clerkin, E. M. (2010). Catastrophic misinterpretations as a predictor of symptom change during treatment for panic disorder. *Journal of Consulting and Clinical Psychology*, *78*(6), 964–973. <https://doi.org/10.1037/a0021067>
- Telch, M. J. (n.d.). *Understanding anxiety and panic* [Patient handout].
- van den Berg, D. P., de Bont, P. A., van der Vleugel, B. M., de Roos, C., de Jongh, A., Van Minnen, A., & van der Gaag, M. (2015). Prolonged exposure vs eye movement desensitization and reprocessing vs waiting list for posttraumatic stress disorder in patients with a psychotic disorder: A randomized clinical trial. *JAMA Psychiatry*, *72*(3), 259–267. <https://doi.org/10.1001/jamapsychiatry.2014.2637>