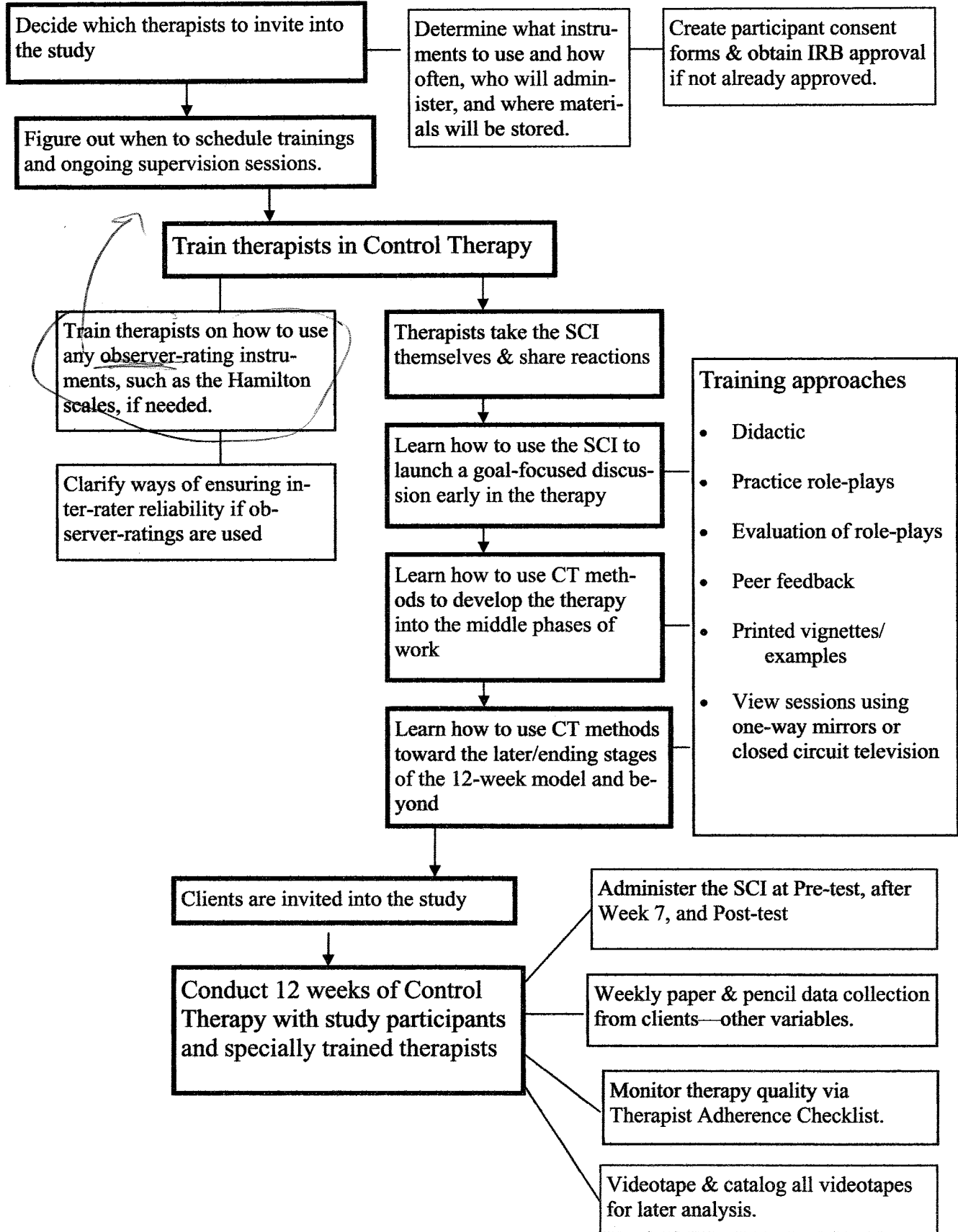


For Double Blind Study. A Basic Cycle

A CONTROL THERAPY RESEARCH PROJECT



Decide which therapists to invite into the study

Determine what instruments to use and how often, who will administer, and where materials will be stored.

Create participant consent forms & obtain IRB approval if not already approved.

Figure out when to schedule trainings and ongoing supervision sessions.

Train therapists in Control Therapy

Train therapists on how to use any observer-rating instruments, such as the Hamilton scales, if needed.

Therapists take the SCI themselves & share reactions

Clarify ways of ensuring inter-rater reliability if observer-ratings are used

Learn how to use the SCI to launch a goal-focused discussion early in the therapy

Learn how to use CT methods to develop the therapy into the middle phases of work

Learn how to use CT methods toward the later/ending stages of the 12-week model and beyond

- Training approaches**
- Didactic
 - Practice role-plays
 - Evaluation of role-plays
 - Peer feedback
 - Printed vignettes/ examples
 - View sessions using one-way mirrors or closed circuit television

Clients are invited into the study

Administer the SCI at Pre-test, after Week 7, and Post-test

Conduct 12 weeks of Control Therapy with study participants and specially trained therapists

Weekly paper & pencil data collection from clients—other variables.

Monitor therapy quality via Therapist Adherence Checklist.

Videotape & catalog all videotapes for later analysis.

Data Analysis

The methods for analysis in the present investigation are explained in detail at the opening to Chapter 4. They will be explained here briefly: I employed a repeated measures quasi-experimental design, using a small sample. Due to the small number of participants, I employed a series of methods of statistical analysis for hypotheses 1, 2, and 3, starting with parametric statistics and then moving to nonparametric statistics, for each hypothesis. Then, for hypotheses 4 and 5, a series of parametric analyses are used to compare the treatment group with the control group. For hypotheses 6 and 7, which address differences between the treatment group and the normative group in the SCI manual, the one-sample z test was used. I used SPSS 12.0 for Windows (2003) to run the parametric analyses and one of the nonparametric analyses (Friedman Test). The other analyses were conducted by hand using the appropriate formulas. The research questions and hypotheses are reviewed below:

Research Question 1

Is Control Therapy an effective treatment for alleviating the symptoms of African American outpatients living in an urban environment and presenting with symptoms of depression, anxiety, or mixed depression-anxiety?

Hypothesis 1

After a 12-week course of treatment with Control Therapy, average depression score will be significantly lower than average depression score at pre-test for a

small group of African American outpatient clients in treatment for depression and/or anxiety.

Hypothesis II

After a 12-week course of treatment with Control Therapy, average anxiety score will be significantly lower than average anxiety score at pre-test for a small group of African American outpatient clients in treatment for depression and/or anxiety.

Research Question 2

Does Control Therapy contribute to increases in Overall Sense of Control in African American clients presenting with depression, anxiety, or mixed depression-anxiety?

Hypothesis III

After a 12-week course of treatment with Control Therapy, average Overall Sense of Control score will be significantly higher than average Overall Sense of Control score at pre-test for a small group of African American outpatient clients in treatment for depression and/or anxiety.

Research Question 3

Are there differences in mean pretest and posttest scores for African Americans in treatment and those in a mixed-race control group and a same-race control group?

Hypothesis IV

From pre-treatment to post-treatment, a sample of African American clients receiving Control Therapy will show significant change on anxiety, depression, and Overall Sense of Control, while means on those variables will remain

unchanged over the same period of time for a sample of racially-mixed
unscreened “healthy” persons receiving no treatment.

Hypothesis V

From pre-treatment to post-treatment, a sample of African American clients receiving Control Therapy will show significant change on anxiety, depression, and Overall Sense of Control, while means on those variables will remain unchanged over the same period of time for a sample of African American unscreened “healthy” persons receiving no treatment.

Research Question 4

Do African Americans presenting with depression and/or anxiety prefer different strategies for gaining a sense of control in their lives, when compared to their White counterparts?

Hypothesis VI

At baseline, the average Negative Assertiveness score for a group of African American outpatients presenting with depression and/or anxiety will be higher than that of a group of Caucasian outpatients presenting with depression and/or anxiety.

Hypothesis VII

At baseline, the average Negative Yielding score for a group of African American outpatients presenting with depression and/or anxiety will be higher than that of a group of Caucasians presenting with depression and/or anxiety.