

# Index

- Assessment, 82–85, 216, 217, 239–245, 287–291, 313–317  
and behavioral family therapy, 216, 217  
and case management, 82–85  
and problem solving, 287–291  
and social skill training, 239–245  
and the young chronic patient, 313–317  
*See also* Diagnosis
- Behavioral family therapy, 207–233  
assessment, 216, 217  
case examples, 227–232  
communication skills training, 219–225  
evaluation, 232–233  
expressed emotion, 209–211  
family burden, 211, 212  
family education, 217–219  
need for comprehensive treatment, 233  
overview of procedure, 213–216  
problem solving training, 225–227  
theoretical rationale, 212, 213
- Camberwell Family Interview, 210
- Case management, 77–98  
advocacy, 92–96  
assessment, 82–85  
linkage, 87–90  
model of schizophrenia, 79–82  
monitoring, 90–92  
planning, 85–87  
recommendations, 96–98
- Chronic illness model, 5, 6, 102, 103
- Clozapine, 56, 57
- Community mental health, 1–6  
deinstitutionalization, 2, 3
- Community residential treatment, 135–159  
clinical models, 141–151  
Crossing Place, 144–151  
defining social environments, 137–139  
implementation issues, 139–141  
program staff, 151–159  
Soteria, 143–151  
surrogate parent model, 141–143  
surrogate peer model, 143–151
- Community Support Program, 3
- Comprehensive care, 1–18, 80, 81, 233  
continuity of care, 16, 17  
crisis intervention, 11, 101  
family therapy, 9  
medical care, 11, 12  
medication, 4, 8, 9  
rehabilitation, 12, 13  
social service, 13  
social skills training, 10, 11  
social support, 15
- Continuity of care, 16, 17
- Crisis intervention, 11, 101–133  
chronic illness model, 102, 103  
continuum of services, 129–131  
crisis model, 103–105  
evolution of crisis intervention for schizophrenia, 107–111  
families, 123, 124  
foster homes, 124–126  
La Posada, 120–123  
partial hospitalization, 128, 129  
programs for acute schizophrenia, 120–131  
techniques, 111–120
- Crossing Place, 144–151

- Deinstitutionalization, 2, 3, 13, 14, 308–310  
and the young chronic patient, 308–310
- Diagnosis, 25, 26, 79, 80. *See also*  
Assessment
- Dopamine, 27–29, 31
- Etiology, 6, 7, 27–29, 79–82, 194, 208, 209,  
265, 266
- Expressed emotion, 9, 176, 190, 209–211
- Families, 9, 10, 79, 84, 87, 91, 94, 124–126,  
141–143, 176, 190, 191, 195  
foster homes, 124–126, 141–143  
*See also* Behavioral family therapy; Family  
education; Family therapy
- Family education, 187–204, 217–219  
assumptions, 191  
in behavioral family therapy, 217–219  
clinical guidelines, 201–204  
content, 191–195  
format, 195–198  
future research, 198–200  
indications, 200, 201  
rationale, 189–191
- Family therapy, 9, 10, 84, 123, 124, 187–  
204, 207–233  
behavioral family therapy, 207–233  
family education, 187–204
- Housing, 13, 14. *See also* Young chronic  
patient
- La Posada, 120–123
- Medical care, 11, 12. *See also* Case  
management
- Neuroleptics. *See* Pharmacotherapy
- Partial hospitalization, 128, 129, 163–182  
and crisis management, 128, 129  
current environmental pressures, 165–167  
day hospital versus inpatient hospitaliza-  
tion, 168–170  
history, 164, 165  
innovations and future directions, 180–  
182  
matching patients and treatments, 179–  
180
- Partial hospitalization (*Cont.*)  
partial hospitalization versus outpatient  
care, 170–172  
predictors of outcome, 173–175  
treatment components, 175–178
- Pharmacotherapy, 4, 8, 9, 23–40, 43–70,  
89, 90, 112, 113, 194  
acute treatment, 8, 31–34, 44, 112, 113  
classification of antipsychotic agents, 29,  
30  
clozapine, 56, 57  
compliance, 59–65, 89, 90  
diagnosis, 25, 26  
dopamine, 27–29, 31  
dosage, 29–35, 47, 48, 65–70  
effects of neuroleptics, 30, 31  
history, 23, 24  
innovations, 43  
maintenance strategies, 8, 9, 34–36, 57–  
59, 65–70  
nonresponsive patients, 53–57  
plasma levels, 48–53  
predicting response, 24–27, 53–57  
side effects, 4, 27, 36–40, 66
- Problem solving, 176, 225, 283–300  
and adjustment, 284–287  
assessment, 287–291  
in behavioral family therapy, 225–227  
component skill interventions, 292–294  
definition, 284  
intervention strategies, 291–296  
self-instructional interventions, 296  
social learning interventions, 294–296  
social validation, 296, 297
- Psychotherapy, 263–280  
administration and triage, 270, 271  
elements of psychotherapy, 268–274  
establishing the relationship, 268–270  
investigative techniques, 275–277  
nature of the disease, 265, 266  
nature of the patient, 266–268  
rationale, 263–264  
special situations, 277, 278  
supportive techniques, 274, 275  
the therapist, 278, 279
- Rehabilitation, 12, 13, 81
- Side effects (of neuroleptics), 4, 27, 36–40,  
66

- Social problem solving. *See* Problem solving
- Social service, 13, 81
- Social skills training, 10, 11, 175–177, 212–213, 237–258
- assessment, 239–245
  - attentional impairment, 253–255
  - communication skills training, 219–225
  - definition of social skill, 238, 239
  - empirical evaluation, 248–253
  - negative syndrome, 255–257
  - training procedures, 245–248
- See also* Problem solving
- Social support, 15, 84, 311, 316, 317. *See also* Families
- Soteria, 143–151
- Stress, 7, 80, 81, 212, 265, 266, 311
- Substance abuse, 83, 312
- Tardive dyskinesia, 38, 66
- Training in Community Living program (TCL), 94–96
- Young chronic patients, 305–323
- assessment, 313–317
  - culture of the 1980s, 311–313
  - and deinstitutionalization, 308–310
  - the patients, 306, 307
  - pressures of community living, 310, 311
  - principles of treatment, 318–323
  - young adult development, 307, 308