Chapter 8

Programmed Writing

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“Today’s mental health professional faces an onslaught of couples and families that present with arduous challenges that require good skills, as well as evidenced-based tools for facilitating change. Hence, a clinician’s “tool box” has become more vital than ever, preparing for a broad range of clinical and non-clinical conditions that are likely to be encountered during the course of one’s practice.” (Dattilio, 2011, pp. 1–2)

The purpose of this chapter is to summarize research about written, interactive practice exercises (PEs), or workbooks (sometimes called protocols at the request of an editor) administered as homework assignments. The phenomenal growth of handouts, worksheets, programmed materials, take-home, between-sessions exercises by many American publishers tends to support the position that most mental health services in this century will be structured and programmed to match one particular condition with one specific symptom, syndrome, or reason for referral (L’Abate, 2011b, in press-b).

Recent advances in homework assignments (Katzantizis & L’Abate, 2007), low-cost approaches to promote physical and mental health (L’Abate, 2007), and self-help in mental health (Harwood & L’Abate, 2010) include also distance writing with single, married, and family participants (L’Abate, 2008a, 2008b). These advances should make it easier for mental health professionals to choose among many modalities of treatment in addition to or not requiring face-to-face talk-based psychotherapy.

One of the major advances in mental health has been the publication of interactive PEs, also called workbooks, derived from a variety of theoretical and practical sources (L’Abate & De Giacomo, 2003; L’Abate & Goldstein, 2007). These sources include symptoms and syndromes from the DSM-IV (American Psychiatric Association, 1994), factor analyses, and single-and multiple-score tests, such as,
respectively among others, the Beck Depression Inventory and the Minnesota Multiphasic Personality Inventory (L’Abate, 2011b).

There are interactive PEs for most psychiatric categories or dimensions for individuals (children, youth, and adults), conflictful couples, and families. There are also interactive PEs for lifelong learning for individuals, couples, and families without a diagnosed illness (L’Abate & Goldstein, 2007).

This advance, linking evaluation with distance writing treatment, is due to a simple procedure: asking participants to answer regularly to items or dimensions on a test. Once this task is completed, participants are asked to define the items, using even a dictionary if necessary (L’Abate, 2007a, 2011c). After defining the items, participants are ask to give two examples for each items. This nomothetic task is to make sure that participants know exactly and concretely the meaning and nature of each item or dimension. A second step is to ask participants to rank-order items according to how they apply to themselves in importance or concern, This is an idiographic task that determines the order of administration of the following homework assignments, as described below.

**Early Beginnings: Structured Enrichment Programs**

Interactive PEs found their early beginnings in structured enrichment programs for couples and families described and evaluated in several publications (L’Abate & Kern, 2002; L’Abate & Rupp, 1981; L’Abate & Weinstein, 1987; L’Abate & Young, 1987). Early studies about the long-term outcomes of workbooks measured with pre–post evaluation and follow-up were published by L’Abate, Boyce, Fraizer, and Russ (1992). The results of these studies demonstrated a sufficient reliability and validity to continue production and publication of workbooks.

Additionally, for interventions in the fields of self-help, promotion, prevention, and psychotherapy, quite a few structured enrichment programs with verbatim instructions to trainers for couples and families are entirely reproducible for computer administration (L’Abate & Weinstein, 1987; L’Abate & Young, 1987). Some of these programs follow the same sequence outlined above about evidence. Some are independent from any theory. Some are dependent on some theory. Some are related to some theory. Some are derived from theory.

**Research on Interactive Practice Exercises**

Results from those early studies were summarized and reanalyzed for their effect sizes and published in L’Abate (2004a, pp. 75–93). A meta-analysis of 18 mental health and 12 physical health workbooks (Smyth & L’Abate, 2001) produced effect sizes of $d = .44$ and .25, respectively. Unfortunately, these research studies were conducted by graduate students mentored by this author’s laboratory for their research and doctoral dissertations. We have yet to find external evidence from sources other than those generated by this author to support the validity and reliability as well as the clinical, preventive, and psychotherapeutic usefulness for workbooks.