

Harvard Referencing – Practice Activity 1

This activity is designed to help you practice your referencing skills.

On the pages that follow there are 20 reputable sources from either books, journals, or websites.

You must first decide if the source you are looking at is a book, journal article, or a web site in order to look for the correct information.

Using your new knowledge of referencing, along with your 'Grab Sheet' and your 'Referencing Diagrams' (both available on the Harvard Referencing tile), please provide the 2 citation for each source, and the full correctly formatted reference for each source in the spaces provided.

The images of the webpages all contain hyperlinks – this means you can click on the link and look around the webpage to search for the information you need (You may need to right click and select 'open link' – also accept any blocked pop-ups).

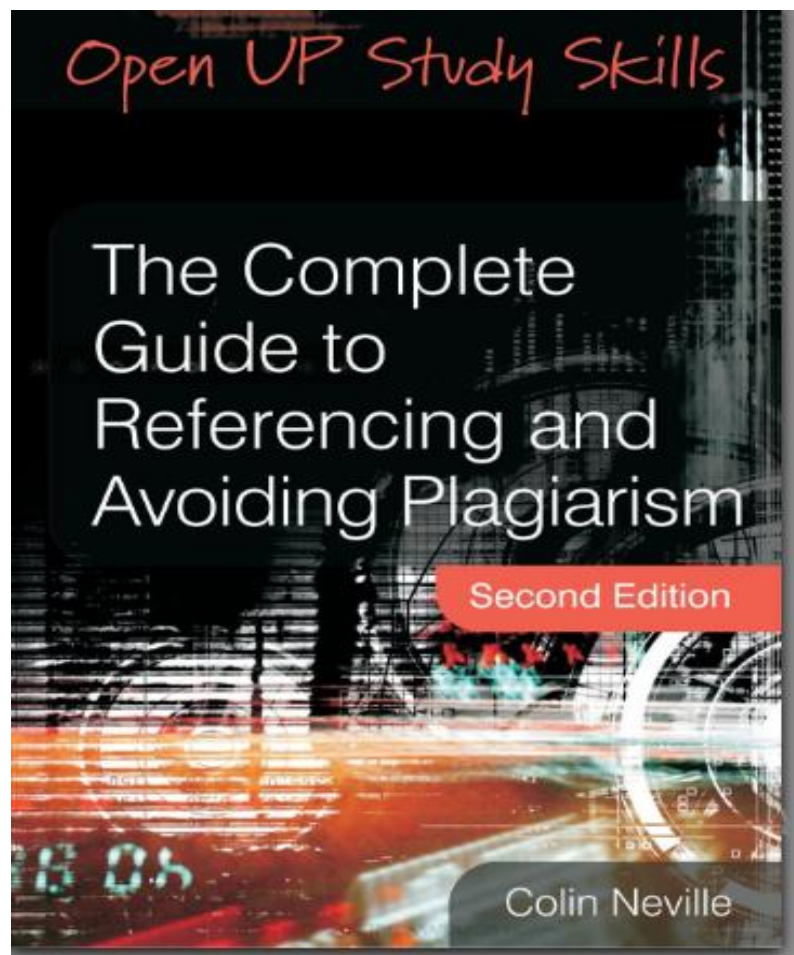
When referencing journal articles, keep in mind that they sometimes do not include a page number – or in some instances a volume – or in some cases an issue!

When referencing webpages – Keep in mind - your accessed on dates will not be the same as mine!

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The first question has been done for you as an example...

Good luck!



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The essential role of mental imagery in cognitive behaviour therapy: What is old is new again

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Abstract

Objective: The aim of this review is to highlight the important role of mental imagery in contemporary cognitive behaviour therapy (CBT).

Method: In this narrative review, we define mental imagery based on cognitive science research, present the rationale for the incorporation of mental imagery within CBT, and outline four key applications of mental imagery within CBT practice (i.e., imagery-enhanced thought records, imagery-enhanced behavioural experiments, imaginal facilitation of behaviour change, and imagery rescripting), including emerging research supporting these varied applications.

Results: Mental imagery is highly relevant to CBT practice because (a) it is a transdiagnostic cognitive maintaining factor of psychopathology; (b) it promotes cognitive specificity when working with clients; and (c) the emotional amplification properties of mental imagery, and its impacts on motivation and behaviour, make imagery a powerful facilitator of cognitive, affective, and behavioural change. Emerging research is promising regarding the potential for imagery to enhance treatment outcomes. However, further research is required to guide clinicians regarding how to best facilitate imagery interventions to maximise outcomes.

Conclusions: Imagery-focused interventions are an essential part of a CBT practitioner's therapeutic repertoire. Mental imagery has the capacity to bring CBT to life, facilitating conditions important for engaging and effective psychotherapy.

KEY WORDS

behaviour change, behavioural experiments, cognitive behaviour therapy, imagery rescripting, mental imagery, thought records

Citation :

Reference :

Journal of Applied Social Psychology

Journal of Applied Social Psychology 2017, 47, pp. 124–135

Productive procrastination: academic procrastination style predicts academic and alcohol outcomes

Erin C. Westgate¹, Stephanie V. Wormington², Kathryn C. Oleson³, Kristen P. Lindgren⁴

¹Department of Psychology, University of Virginia

²Department of Counseling, Educational Psychology, and Special-Education, Michigan State University

³Department of Psychology, Reed College

⁴Department of Psychiatry and Behavioral Sciences, University of Washington, Center for the Study of Health and Risk Behaviors

Citation :

Reference :

Coronavirus (COVID-19)

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Counselling

Counselling is a talking therapy that involves a trained therapist listening to you and helping you find ways to deal with emotional issues.

Sometimes the term "counselling" is used to refer to talking therapies in general, but counselling is also a type of therapy in its own right.

What can counselling help with?

Counselling can help you cope with:

Citation :

Reference :

Riding the waves: A functional-cognitive perspective on the relations among behaviour therapy, cognitive behaviour therapy and acceptance and commitment therapy

Jan De Houwer¹, Yvonne Barnes-Holmes², and Dermot Barnes-Holmes²

¹Department of Experimental Clinical and Health Psychology, Ghent University, Ghent, Belgium

²Department of Psychology, National University of Ireland at Maynooth, Maynooth, Ireland

*D*ifferent types of therapy explain psychopathology and the effects of psychotherapy differently. Different explanations are, however, not necessarily mutually exclusive. Based on the idea that functional and cognitive explanations are situated at different levels, we argue that functional therapies such as traditional Behaviour Therapy (BT) and Acceptance and Commitment Therapy (ACT) are not necessarily incompatible with Cognitive Behaviour Therapy (CBT). Whether a functional and a cognitive therapy actually align depends on whether they highlight the same type of environmental causes. This functional-cognitive perspective reveals various differences and communalities among BT, CBT and ACT.

Keywords: Psychotherapy; Behaviour therapy; Cognitive behaviour therapy; Acceptance and commitment therapy.

Citation :

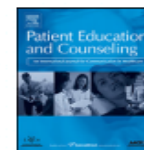
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How does communication heal? Pathways linking clinician–patient communication to health outcomes

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ABSTRACT

Objective: Although prior research indicates that features of clinician–patient communication can predict health outcomes weeks and months after the consultation, the mechanisms accounting for these findings are poorly understood. While talk itself can be therapeutic (e.g., lessening the patient's anxiety, providing comfort), more often clinician–patient communication influences health outcomes via a more indirect route. Proximal outcomes of the interaction include patient understanding, trust, and clinician–patient agreement. These affect intermediate outcomes (e.g., increased adherence, better self-care skills) which, in turn, affect health and well-being. Seven pathways through which communication can lead to better health include increased access to care, greater patient knowledge and shared understanding, higher quality medical decisions, enhanced therapeutic alliances, increased social support, patient agency and empowerment, and better management of emotions.

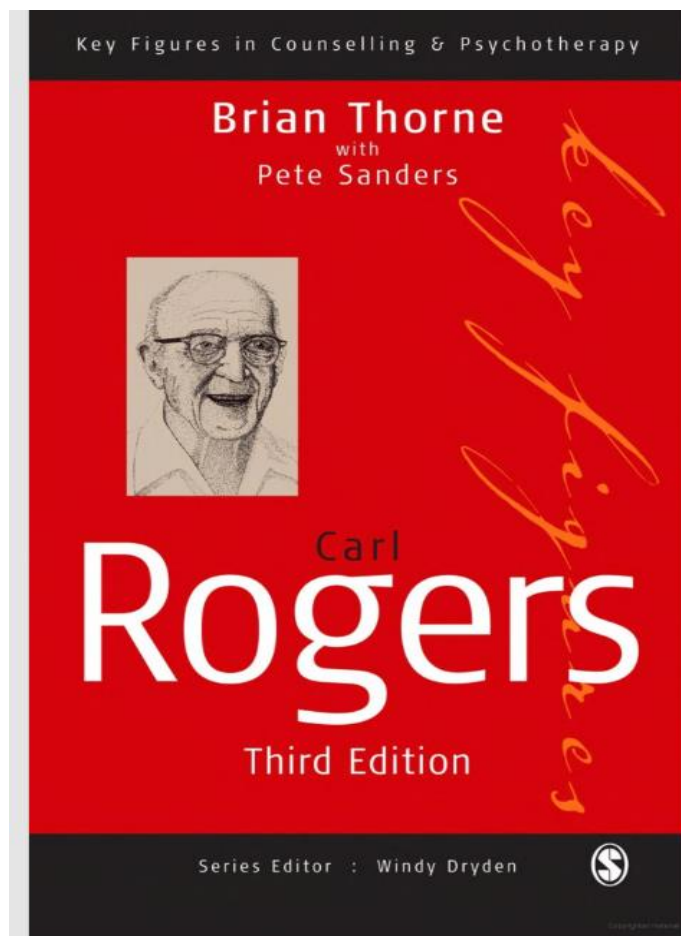
Conclusion: Future research should hypothesize pathways connecting communication to health outcomes and select measures specific to that pathway.

Practice implications: Clinicians and patients should maximize the therapeutic effects of communication by explicitly orienting communication to achieve intermediate outcomes (e.g., trust, mutual understanding, adherence, social support, self-efficacy) associated with improved health.

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Viewing the Disney Movie *Frozen* through a Psychodynamic Lens

Christopher Kowalski¹ · Ruchi Bhalla²

Published online: 14 October 2015
© Springer Science+Business Media New York 2015

Abstract The Disney movie *Frozen* is the fifth highest grossing movie of all time. In order to better understand this phenomenon and to hypothesize as to why the movie resonated so strongly with audiences, we have interpreted the movie using psychodynamic theory. We pay particular attention to the themes of puberty, adolescence and sibling relationships and discuss examples of ego defenses that are employed by the lead character in relation to these concepts.

Keywords Disney · psychodynamic theory · child development · adolescence

Citation :

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Guidance

Delivering better integrated care

A summary of what delivering better integrated care means and how Monitor is supporting the sector.

Published 27 May 2014

Last updated 11 March 2015 — [see all updates](#)

From: [Monitor](#)

Applies to: **England**

Contents

- What does delivering integrated care mean?
- How is Monitor supporting the sector to deliver better integrated care?
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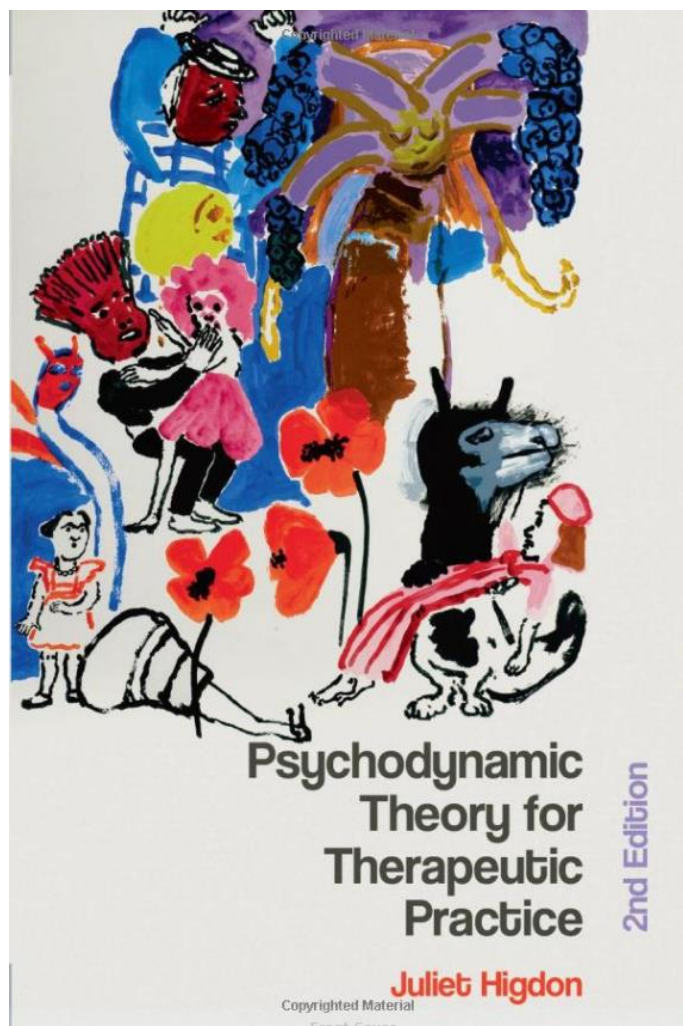
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The Future of Psychodynamic Psychotherapy

Mauricio Cortina

The article reviews the current state and future of psychodynamic psychotherapies. In the past few decades psychodynamic psychotherapies have fallen into disrepute due to the fractious and dogmatic nature of different psychodynamic schools of thought and the lack of interest in validating some of its major premises or its effectiveness in comparison with other psychotherapy modalities. Despite these self-inflicted wounds, psychodynamic theory and treatment is staging a comeback. Many of the major premises that comprise the complex, layered model of the mind that are the basis of psychodynamic treatments have again begun to be validated. A list of basic psychodynamic concepts is described. The evidence for each of these concepts varies, but as a whole the evidence is broad and deep for the model of the mind posited by psychoanalysis. This evidence is coming from many fields of knowledge that are not necessarily influenced by psychoanalysis. There have also been significant advances in developing methods and tools that can probe systematically into the complex nature of psychodynamic treatment processes. Finally, statistical tools--such as meta-analytic studies--that can aggregate and compare many different studies at once are beginning to show the effectiveness of dynamic psychotherapies in comparison with other modalities of treatment.

Citation :

Reference :

Cognitive behavioural therapy (CBT)

Explains what cognitive behavioural therapy (CBT) is, what it is for, what happens during therapy and how to find a therapist.

[View this information as a PDF](#) (new window)

About CBT

[What CBT can treat](#)

[CBT sessions](#)

[Is CBT for me?](#)

[Finding a therapist](#)

[Useful contacts](#)

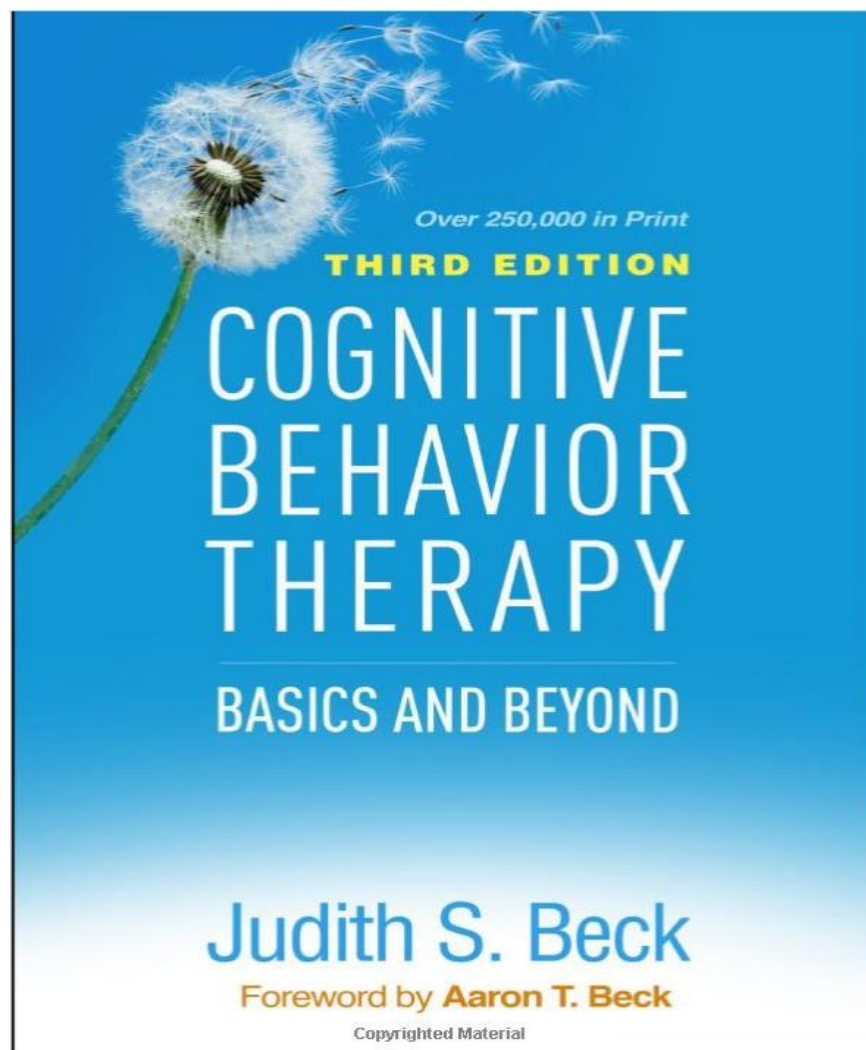
What is CBT?

Cognitive behavioural therapy (CBT) is a type of talking treatment which focuses on how your thoughts, beliefs and attitudes affect your feelings and behaviour, and teaches you coping skills for dealing with different problems.

It combines cognitive therapy (examining the things you think) and behaviour therapy (examining the things you do).

Citation :

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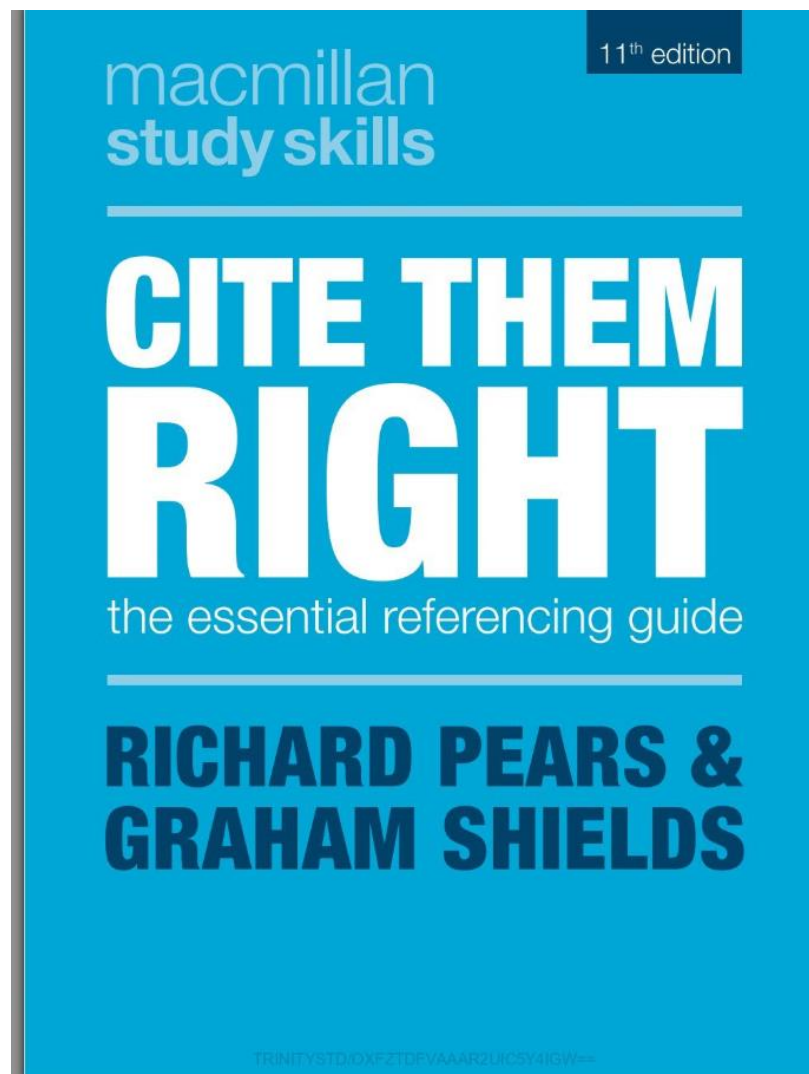
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Bringing Carl Rogers Back In: Exploring the Power of Positive Regard at Work

Natalie Shefer, Abraham Carmeli ^{1,2} and Ravit Cohen-Meitar

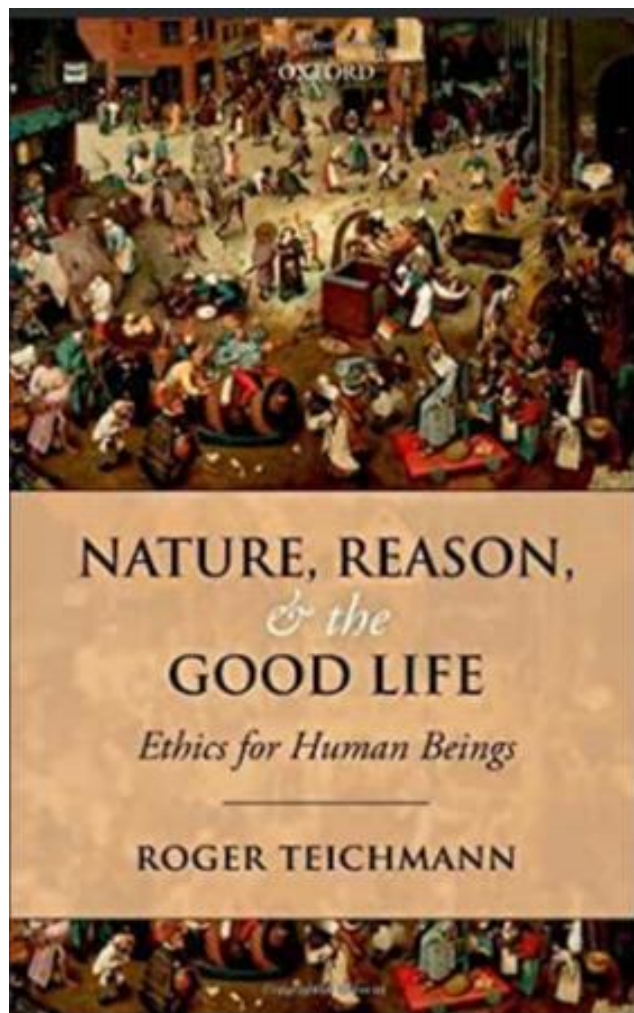
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Corresponding author email: avic@post.tau.ac.il

We draw on Carl Rogers' client-centred therapy theory and the theoretical lens of positive work relationships to explain why and how positive regard can be a powerful source for the development of employees' sense of vitality, job performance and organizational citizenship behaviours (OCBs). We theorize that when employees experience relationships characterized by a high level of regard with their co-workers they are likely to develop a sense of vitality, which in turn results in enhanced job performance and OCBs. These relationships are examined in both experimental and field studies. The results of these multiple studies provide general support for the power of positive regard in augmenting a sense of vitality and enhancing both job performance and citizenship behaviours.

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Coronavirus: grieving and isolation

Share this:   

Being bereaved can be one of the most lonely experiences you or someone you love may go through. During the coronavirus pandemic many people have had to spend time apart from friends and family and this can make grieving more difficult.

Talking, and being with friends and family, can be one of the most helpful ways to cope after someone close to us dies. Our advice to bereaved people is usually to avoid isolating yourself, but we are in a situation where remaining physically isolated from others has been sadly necessary. Even in areas where restrictions are easing, many people are still cut off from their usual support. It can seem lonelier than ever if people around you are enjoying a return to some normal activities.

Feelings in isolation

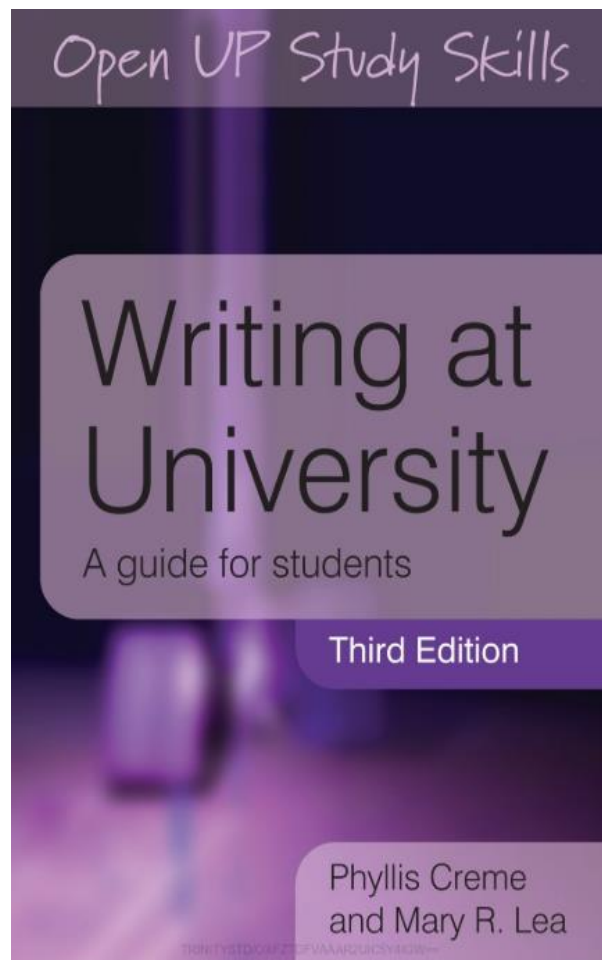
This isolation can make feelings of loneliness and grief much more intense. It could mean having to stay by yourself in the same house you shared with the person who has died, bringing up painful reminders at every turn. You might have been isolated together with your family, and although this at times may be a support, at other times tensions and resentments can be magnified making it difficult to help each other. If your children and teenagers are still off school it can be difficult to keep them occupied and deal with your own emotions and fears at the same time.

Get help

[About grief](#)**[Coronavirus help](#)**[Local Services](#)[Helpline](#)[Traumatic bereavement](#)[For parents](#)[CruseChat](#)[For young people](#)[Free booklets](#)[Practicalities](#)[Useful links](#)

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Arranging care before you leave hospital

If you or someone you know goes into hospital, help and support should be arranged before you go home (are discharged).

This means:

- any extra help is arranged, such as visits from a district nurse or paid home help
- any equipment is fitted, such as a raised toilet seat
- any home adaptations are made, like grab rails in the bathroom

Care after a hospital stay

[Care after illness or hospital discharge \(reablement\)](#)

[Mental health aftercare](#)

Citation :

Reference :

Reflection as part of continuous professional development for public health professionals: a literature review FREE

Nishamali Jayatilleke , Anne Mackie

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Abstract

Background

For many years, reflection has been considered good practice in medical education. In public health (PH), while no formal training or teaching of reflection takes place, it is expected as part of continuous professional

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