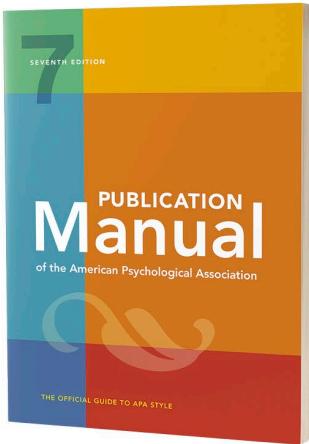




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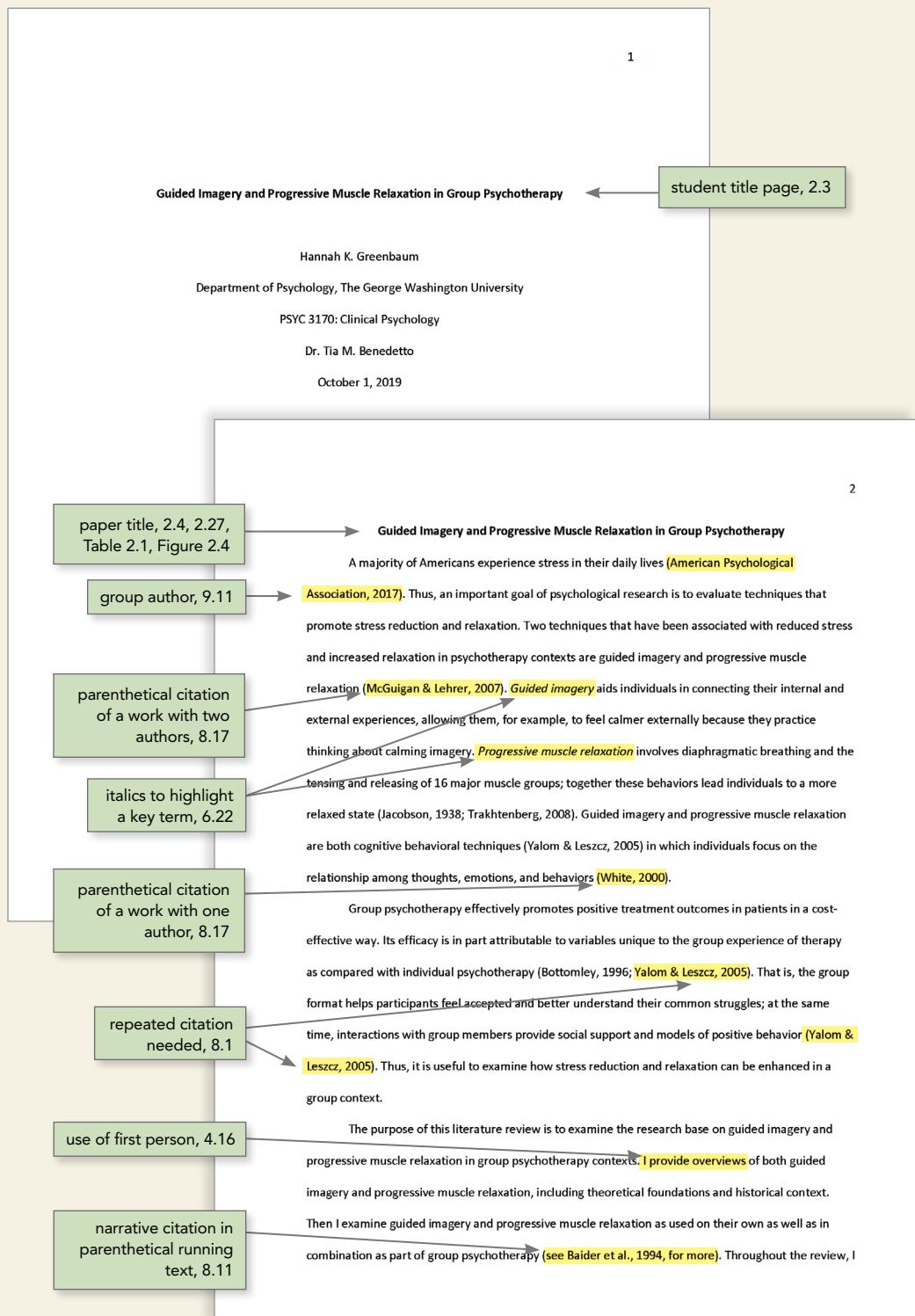
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## Sample Student Paper



**Sample Student Paper (continued)**

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**Level 1 heading, 2.27,  
Table 2.3, Figure 2.5**

highlight themes in the research. Finally, I end by pointing out limitations in the existing literature and exploring potential directions for future research.

**Guided Imagery****Level 2 heading, 2.27,  
Table 2.3, Figure 2.5**

**Features of Guided Imagery**

Guided imagery involves a person visualizing a mental image and engaging each sense (e.g., sight, smell, touch) in the process. Guided imagery was first examined in a psychological context in the 1960s, when the behavior theorist Joseph Wolpe helped pioneer the use of relaxation techniques such as aversive imagery, exposure, and imaginal flooding in behavior therapy (Achterberg, 1985; Utay & Miller, 2006). Patients learn to relax their bodies in the presence of stimuli that previously distressed them, to the point where further exposure to the stimuli no longer provokes a negative response (Achterberg, 1985).

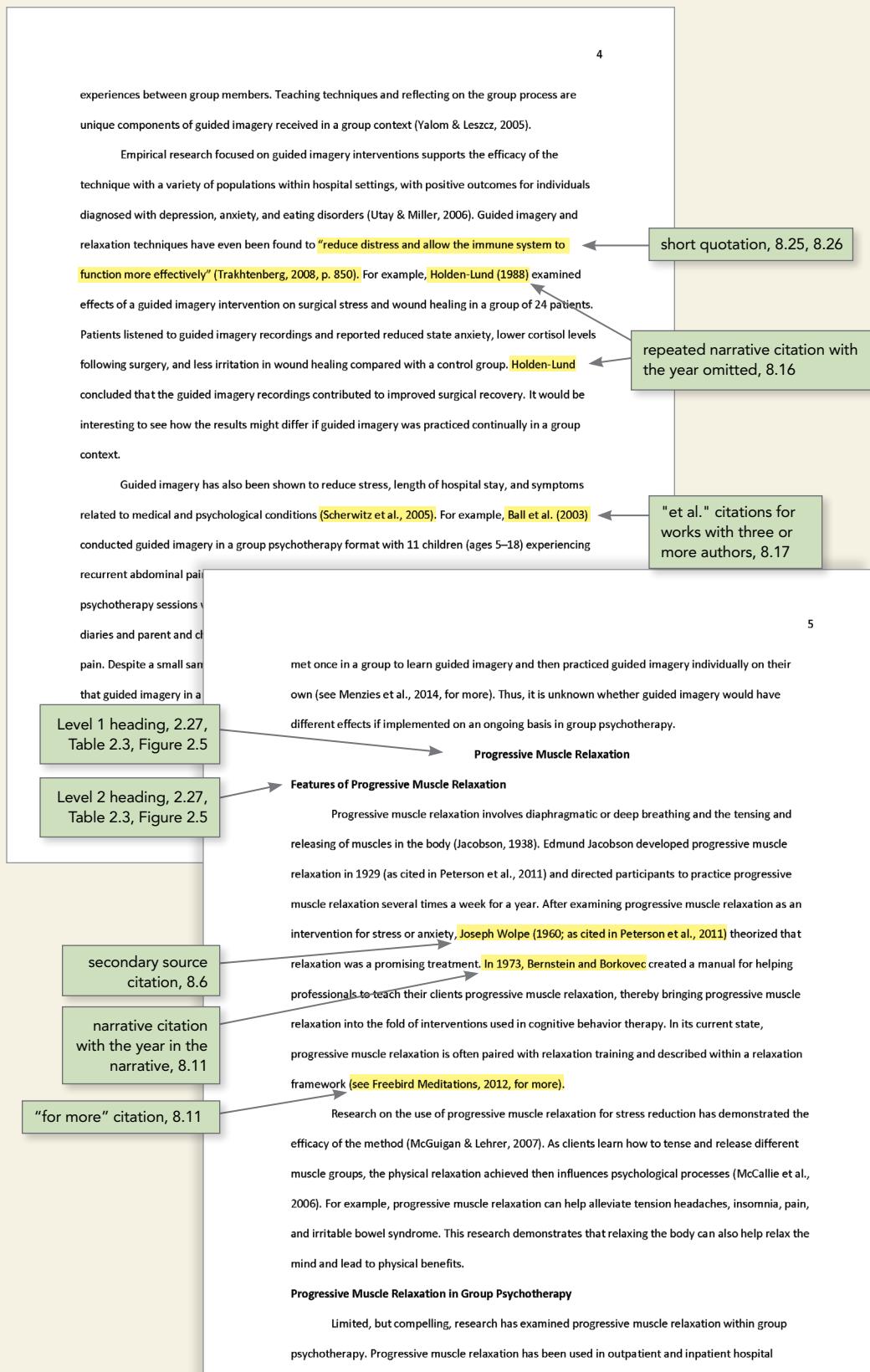
Contemporary research supports the efficacy of guided imagery interventions for treating medical, psychiatric, and psychological disorders (Utay & Miller, 2006). Guided imagery is typically used to pursue treatment goals such as improved relaxation, sports achievement, and pain reduction. Guided imagery techniques are often paired with breathing techniques and other forms of relaxation, such as mindfulness (see Freebird Meditations, 2012). The evidence is sufficient to call guided imagery an effective, evidence-based treatment for a variety of stress-related psychological concerns (Utay & Miller, 2006).

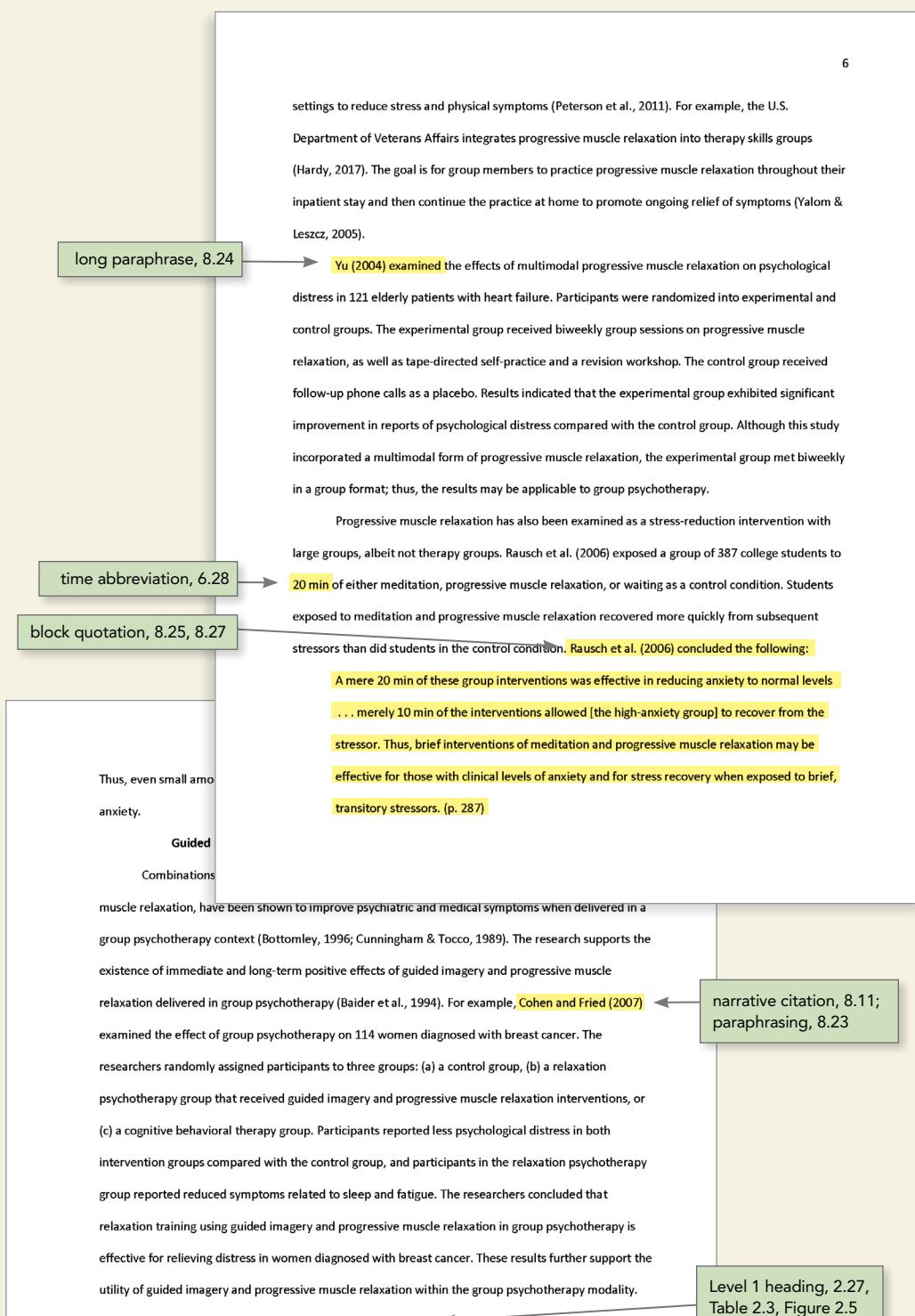
**Level 2 heading, 2.27,  
Table 2.3, Figure 2.5****Guided Imagery in Group Psychotherapy**

Guided imagery exercises improve treatment outcomes and prognosis in group psychotherapy contexts (Skovholt & Thoen, 1987). Lange (1982) underscored two such benefits by showing (a) the role of the group psychotherapy leader in facilitating reflection on the guided imagery experience, including difficulties and stuck points, and (b) the benefits achieved by social comparison of guided imagery

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## Sample Student Paper (continued)



**Sample Student Paper (continued)**

**Sample Student Paper (continued)**

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usually expected to practice the techniques by themselves (see Menzies et al., 2014). Future research should address how these relaxation techniques can assist people in diverse groups and how the impact of relaxation techniques may be amplified if treatments are delivered in the group setting over time.

Future research should also examine differences in inpatient versus outpatient psychotherapy groups as well as structured versus unstructured groups. The majority of research on the use of guided imagery and progressive muscle relaxation with psychotherapy groups has used unstructured inpatient groups (e.g., groups in a hospital setting). However, inpatient and outpatient groups are distinct, as are structured versus unstructured groups, and each format offers potential advantages and limitations (Yalom & Leszcz, 2005). For example, an advantage of an unstructured group is that the group leader can reflect the group process and focus on the “here and now,” which may improve the efficacy of the relaxation techniques (Yalom & Leszcz, 2005). However, research also has supported the efficacy of structured psychotherapy groups for patients with a variety of medical, psychiatric, and psychological disorders (Hashim & Zainol, 2015; see also Baider et al., 1994; Cohen & Fried, 2007). Empirical research assessing these interventions is limited, and further research is recommended.

**Directions for Future Research**

There are additional considerations when interpreting the results of previous studies and planning for future studies of these techniques. For example, a lack of control groups and small sample sizes have contributed to low statistical power and limited the generalizability of findings. Although the current data support the efficacy of psychotherapy groups that integrate guided imagery and progressive muscle relaxation, further research with control groups and larger samples would bolster confidence in the efficacy of these interventions. Attrition is another consideration. Attrition rates and changes in me-

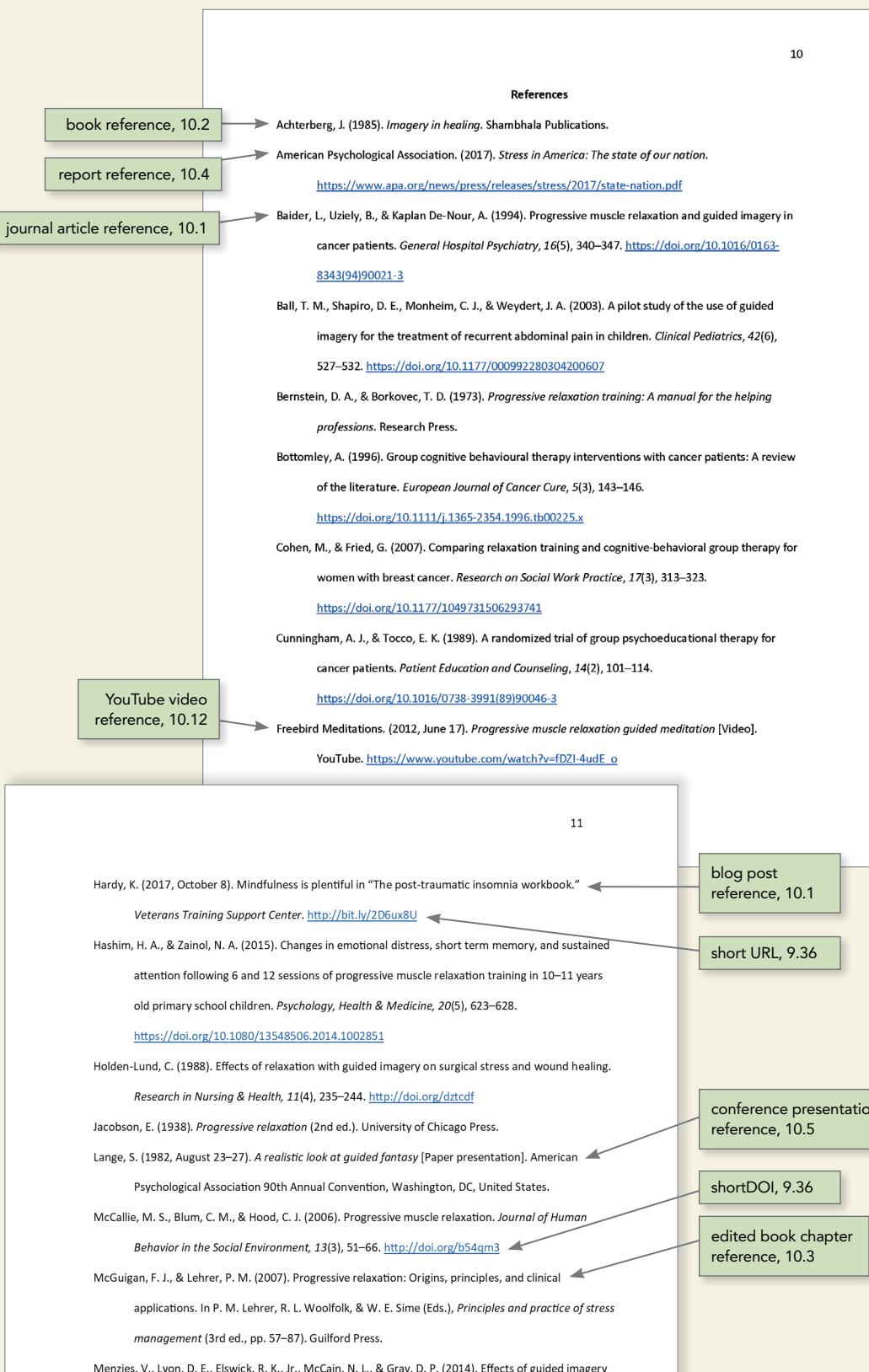
“see also” citation, 8.12

Level 2 heading, 2.27,  
Table 2.3, Figure 2.5

personal communication, 8.9

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participation (L. Plum, personal communication, March 17, 2019). Despite these challenges, continued research examining guided imagery and progressive muscle relaxation interventions within group psychotherapy is warranted (Scherwitz et al., 2005). The results thus far are promising, and further investigation has the potential to make relaxation techniques that can improve people’s lives more effective and widely available.

**Sample Student Paper** (continued)

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