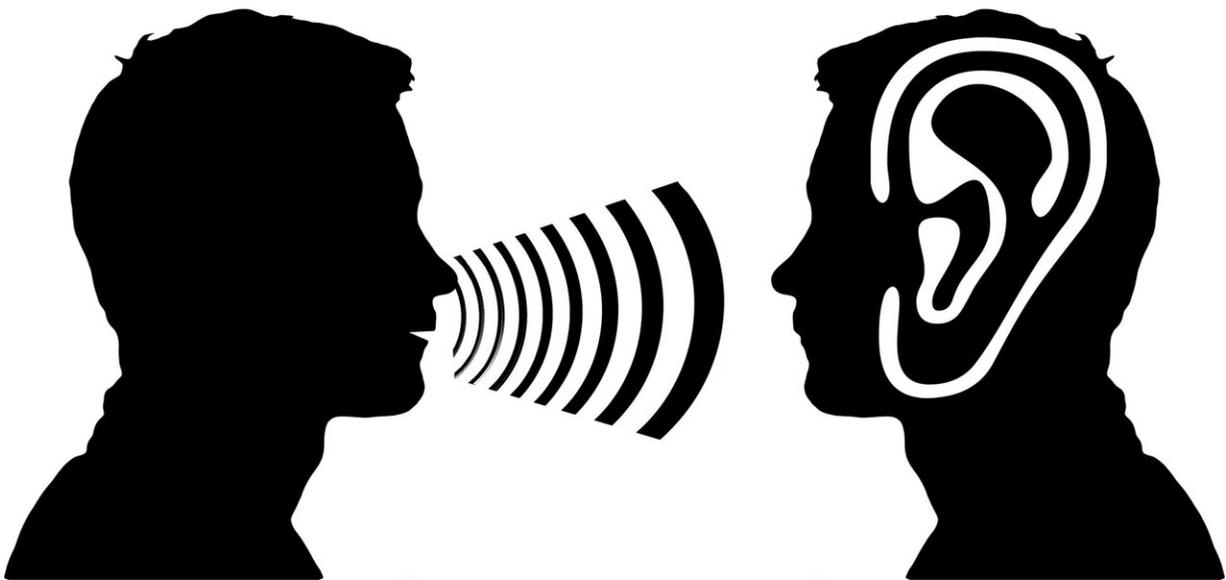


Research examines the role of psychotherapists in treatment effectiveness

November 18 2021



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New research at the University of Massachusetts Amherst shows that different psychotherapists use common treatment processes to varying benefits for patients.

The findings, published in the *Journal of Consulting and Clinical Psychology*, ultimately may lead to more personalized clinical practices and trainings for [therapists](#) to help maximize their therapeutic impact and improve patient [outcomes](#).

"Research has tended to focus on the contributions of the patient or [treatment type](#) to [therapy](#) outcomes, which makes sense in a lot of ways, but unfortunately the therapist contribution has been somewhat neglected," says lead author Alice Coyne, now a post-doctoral researcher at Case Western Reserve University and a Ph.D. graduate of UMass Amherst. "Our current trainings, which are often standardized across therapists, tend not to promote consistent improvements in patient outcomes. Instead, we believe that personalizing training to therapists' unique [strengths](#) and [weaknesses](#) could enhance training outcomes down the line."

Working with co-author Michael Constantino, professor of clinical psychology and director of the Psychotherapy Research Lab at UMass Amherst, Coyne initially conducted the research as part of her Ph.D. dissertation, which received the 2020 dissertation award from the Society for the Exploration of Psychotherapy Integration.

"Her work is the first of its kind, and it will blaze a trail in our field," Constantino predicts.

As her dissertation's first aim, Coyne was interested in testing the prediction that patients experience more symptomatic and functional improvement in psychotherapy when a higher-quality patient-therapist alliance exists, as well as when the patient has a more positive expectation for change.

For the second aim, Coyne was interested in seeing if these associations differed based on who the therapist is. "A given technique in the hands

of one therapist may look very different than that same technique in the hands of another therapist," Coyne says. "To put it simply, one therapist may use their relationship with their patients as a key means to facilitate improvement; whereas for another therapist, their relationships with patients may be less important for patient improvement than their use of other strategies, such as cultivating positive expectations for change."

Finally, for the third aim, Coyne looked at whether certain therapist characteristics predict which therapists tend to use relationship and belief processes to more therapeutic benefit across their caseloads.

To test these questions, the researchers analyzed data from 212 adults who were treated by 42 psychotherapists as part of a randomized trial that compared case-assignment methods in community-based mental health care. Throughout treatment, which varied in length and type, [patients](#) repeatedly completed surveys that measured their alliance quality with the therapist and their expectations for improvement.

Coyne and Constantino correctly hypothesized that in general, better alliance quality and more positive outcome expectation associated with better treatment outcomes. Also, as predicted, therapists exhibited different strengths and weaknesses in their use of relationship and belief processes.

Finally, there was preliminary support that the therapists who used the alliance most effectively to promote patient improvement are the ones "... who are humbler in assessing their own alliance-fostering abilities," the paper states.

"Humbly know thyself" may be one helpful takeaway from the research. "If you learn the things that you do particularly well as a therapist, then you can tailor your practice and play to your strengths," Coyne says.

More information: Alice E. Coyne et al, Therapist-level moderation of within- and between-therapist process–outcome associations. *Journal of Consulting and Clinical Psychology* (2021). [DOI: 10.1037/ccp0000676](https://doi.org/10.1037/ccp0000676)

Provided by University of Massachusetts Amherst

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