Evidence for The Therapeutic Relationship as the Primary Agent of Change

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Factors that Account for Successful Outcomes

• Client/Extra Therapeutic- 40%
• Relationship-30%
• Placebo/Hope/Expectancy-15%
• Model/techniques-15%
• Handbook of Eclectic Psychotherapy-Lambert
Empathy, Genuineness and Positive Regard

• Rogers, C (1957) The Necessary and Sufficient Conditions for Change
• Lambert (2013)
• **Empathy**-meta-analysis (MA) of 57 studies found $r$ of .31
• **Positive regard**-MA of 18 studies found $r$ of .27
• **Genuineness**-MA of 16 studies found $r$ of .24
• Each is more powerful than any technique $r$ .2
Empathy and Compassion

• Being empathic and listening leads to conflict resolution and a bigger connection between individuals (Davis & Oathout 1987, Carter Nakamoto, & Kalso 1999)
• Empathy leads to broader awareness (Rogers 1982)
• Empathy reduces bullying, prejudice and racism and increases the will of others to help others in need
Empathy: Carl Rogers

• “An empathic way of being with another person... means entering the private perceptual world of the other and becoming truly at home in it. It involves being sensitive, moment by moment to the changing felt meaning which flows in this person, to the fear, tenderness, rage, or confusion or whatever the other person is experiencing. It means to temporarily live in the other’s perceptual world and move in it delicately
Empathy: Carl Rogers

• without making judgements. It means sensing meaning of which the other is scarcely aware...It includes communicating your sensing of the person’s world as you look with fresh and un-frightened eyes at elements of which he or she is fearful. It means frequently checking with the other person as to the accuracy of your sensing’s and being guided by the responses that you receive.
Empathy: Carl Rogers

- You are a confident companion to the person in his inner world. By pointing to the possible meanings in the flow of the other person’s experiencing, you can help him to focus on this useful type of referent. This way the other person can experience the personal meanings more fully and move forward in the experiencing” (pp142)
Unconditional Positive Regard

- Unconditional positive regard means to not judge others but accept them for who they are both positive and negative and acknowledge they are self determining individuals. It gives them the knowledge they are just as important as everyone else. They are more likely to show it toward themselves and start to empathize more with themselves.
Accurate Listening

- Accurate listening means listening sincerely interested in the speaker and being able to reflect feelings and thoughts of the speaker accurately. Listening accurately communicates your sensing of the other person’s world correctly, helping him to understand his own feelings, thoughts, and personal meanings thus becoming more congruent with himself. It creates deeper connections with them.
Perspective Taking

• Perspective taking means to enter the perceptual world of the other and experiencing the feelings, personal meanings, and thoughts of the other person. It increases the ability to really understand the other person.
How to Increase Empathy

• The ability to empathize with others can be increased by 1) learning how to be self empathic, observing without interpretations, and be acknowledging others as self determining individuals, 2) by practicing accurate listening and recognizing expressions, and 3) by learning the their own references are not universal
Client Outcomes

• On Average
• 40-61% of clients don’t change
• 3-14% deteriorate
• 20-30% improve
• 9-20% achieve recovery
• Dr. Michael Lambert-
youtube/watch?v=5alowDL-o
Therapeutic Alliance

• Whose view of the therapeutic alliance is more correlated with outcome, the client or ours?
• How can we improve Outcomes-Secure, monitor, and respond to formal client input, ensure that the client’s feedback is heard and remains central
Evidence-based Treatments: What is Missing?

The specific effect size for manual-guided EBT is typically small. Even small effects may be clinically meaningful. With large multisite samples, statistical significance can be found for small effects, but do clinicians care? Where are the bigger effects?
Therapist Belief

Therapist belief matters a lot

Psychologists tested patients in three different treatment programs. They identified patients with particularly high alcoholism recovery potential (HARP). HARP vs. non-HARP patients did not differ from each other on prior treatment history or severity of alcoholism.

Leake & King 1977
Counselors Ratings During Treatment
Showed HARPs to be:

• More motivated for counseling
• More punctual in meeting appointments
• Showed greater self-control
• Neater and more attractive in appearance
• More cooperative
• Tried harder to stay sober
• Showed better recovery
Throughout 12 Months of Follow up
HARP Clients showed:

• Higher rates of abstinence
• Longer spans of abstinence
• Fewer slips
• More employment
Treatment as Usual is Pretty Good

- Average 12 month drinking outcomes for 8,389 clients
  - Survival 98.5%
  - % days abstinent 81.4%
  - % continuous abstinent 24.1%
  - Average reduction in Consumption 87%
Treatment as Usual is Pretty Good

• Overall outcomes were fairly similar for TAU, pharmacotherapy trials, and controlled trials of psychosocial treatments (MATCH)

• Miller, W.R. et al How Effective is Alcoholism Treatment? Journal of Studies on Alcohol 62,211-220
All Therapists Are Not The Same

Differences in Client Drug use outcome by counselor-Two drug treatment counselors resigned, their 62 cases were assigned randomly to the four remaining counselors, There were dramatic differences in client Outcomes

McLellan et al., 1988 *Journal of Nervous and Mental Disease*, 176, 423-430
It Matters What You Do and How You Do It

- Much emphasis given to “common factors”, they may not be all that common in practice
- If they exert a large effect, they should not be that hard to observe
- “Nonspecific” means they have not yet been adequately specified and tested
- Why Not?
How You Do It Matters

• Same Counselors, Same EBT but different styles (Confrontive vs. Motivational Interviewing)

• Change talk- Confrontive-21.3, MI 43.6

• Resistance- Confrontive 21.6, MI 12.7

• Miller, Benefield & Tonigan (1993) JCCP 61: 455-461
Variance in Client Drinking Accounted for by Therapist Empathy

Miller, Benefield & Tonigan (1993) *JCCP 61*: 455-461

Therapist Empathy-Accurate empathy is a well-specified, learnable, reliably measurable therapist skill – the ability to understand and reflect clients’ meaning
Therapist Empathy

• Nine Counselors delivering the same manual-guided behavior therapy (self-control training), were trained both in behavior therapy and accurate empathy, and rank-ordered (1-9) for empathic skill while delivering behavior therapy
Therapist Empathy

• 6 Month outcomes for the 9 therapists in client drinking behaviors ranged from 100%(2), 75%(3), 60%(2), 40%, 33% and 25% respectively- Miller, Taylor & West (1980) JCCP 48:590-601

• Variance in client drinking outcomes was accounted for by therapist empathy at 6,12,and 24 months Miller and Baca 1983 Behavior Therapy 14,441-448
Rogerian (Empathy) Skill and Client Relapse Rates

- Counselors Interpersonal Skill and Drinking Relapse Rates - Patients in treatment for alcoholism were randomly assigned to counselors with:
  - LOW levels of empathy and related skills
  - MEDIUM levels of empathy and related skills
  - or HIGH levels of empathy and related skills
- What % of clients relapsed?
Therapist Empathy

High Empathy therapists had consistently lower relapse rates at 6, 12, 18 and 24 months (5%, 11%, 15%, 18%)

Medium Empathy therapists relapse rates at 6, 12, 18 and 24 months (13%, 19%, 23%, 24%)

Low Empathy therapists relapse rates at 6, 12, 18 and 24 months (20%, 29%, 35%, 38%)

Therapist Compassion

• After a 20 minute contact in the emergency room results of follow up to outpatient appointment either initially or after a missed appointment was significant if therapists sent one handwritten letter, one phone call, and greatest for systematic encouragement compared to no letter or phone call
Empathic Listening

Listening for

- Feelings
- Issues
- Expectations
- Needs

...behind the words
Blocks to Empathic Listening

• Over-involvement
• Facts only
• Thought
• Distractions
• Inflammatory words
• Assumptions and prejudices
• Disinterest
Empathic Listener Characteristics

- Desire to be other directed, rather than project one’s own feelings and ideas onto another
- Desire to be non-defensive, rather than to protect the self. When the self is protected it is difficult to focus on another person
- Desire to imagine the roles, perspectives and experiences of the other, rather than assuming they are the same as one’s own
Empathic Listener Characteristics

• Desire to listen as a receiver, not as a critic, and desire to understand the other person rather than to achieve either agreement from or change in that person
Empathic Therapists

- It is an evidence-based practice to hire staff based on and to train staff in empathic skill.
- 12-month drinking outcome determined by therapist factors (random assignment designs).
- Empathy resulted in greater success.
Summary

• There are some specific treatment effects generally supported by clinical research.
• They are often relatively small compared to Therapist effects, client effects and social context, and overall impact of treatment.
• And perhaps for these reasons they vary across sites.
• These larger “nonspecifics” (e.g., empathy) need to be specified, tested, and trained as EBTs.
Summary

• TAU is a hard standard to beat
• Re-training staff in EBT is challenging and expensive
• Specific treatment effect size often shrinks with dissemination into clinical practice
• Therapist belief/enthusiasm/style matters
PCOMS

• The Partners for Change Outcome Management System (PCOMS) is a client feedback program for improving the treatment outcomes of adults and children.
• It improves the retention of clients in Rx.
• It is integrated into each treatment session.
PCOMS

• The Outcome Rating Scale (ORS) assesses the client's therapeutic progress (through ratings of psychological functioning and distress) and the client's perceived benefit of treatment is given at the beginning of each session.

• The Session Rating Scale (SRS) assesses the client's perception of the client-therapist alliance (i.e., the relational bond and whether the therapist shares his or her therapeutic objective is given toward the end of each session.)
PCOMS

- Client ratings for both measures are discussed on a session-by-session basis to maintain the client's engagement in treatment, optimize the client-therapist alliance, and provide a means for transitioning into the treatment session by focusing on client-identified concerns. If client ratings are very low, the therapist may choose to modify the type and amount of treatment.
Outcome Rating Scale ORS Scores

- The ORS is a 4-item self report scale that measures a participant's psychological functioning and distress by asking how the client is doing individually (personal well-being), interpersonally (family, close relationships), socially (work, school, friendships), and overall (general sense of well-being)
Research PCOMS: Therapeutic Progress

• Couples in the intervention group had higher ORS scores than those in the comparison group at post treatment (p < .001) and 6-month follow-up (p < .01), even after adjusting for pretreatment ORS score and therapist

• Individual therapy with or w/o PCOMS-those in the intervention group had a greater increase in ORS scores than those in the comparison group
Research PCOMS: Therapeutic Progress

• The mean increase in clients' ORS scores was larger for the subsequent 6-month period ($p < .001$) and 12-month period ($p < .001$) than it was for the baseline period.

• In a fourth study, from pre- to posttest, couples in the intervention group had a greater increase in ORS scores than those in the comparison group ($p < .05$).
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Questions/Discussion

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