



Ways of using research which helps clinicians, patients and commissioners:

How clinicians engage with research – the case of child psychotherapy

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Savoy Conference, 27th November 2009

“Why do psychologists reject science?”

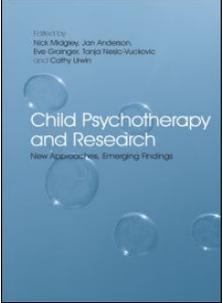
- ❖ Article by Sarah Bagley in **'Newsweek'**, October 12th 2009
 - Clinical psychologists are "deeply ambivalent about the role of science" and "lack solid science training"
 - Many clinicians fail to "use the interventions for which there is the strongest evidence of efficacy" and "give more weight to their personal experiences than to science."



Clinicians' attitudes towards research

- ❖ Survey of **4,000+ psychotherapists** (Orlinsky and Ronnestad, 2005)
- ❖ Why research **not seen as useful by clinicians** (Marrow-Bradley and Elliott, 1986):
 - Research questions not clinically relevant
 - Variables do not reflect actual practice
 - Overemphasis on group statistics and statistical significance
 - Results not 'translated' into clinically useful format
 - Lack of training to understand research

Child psychotherapy and research: State of play

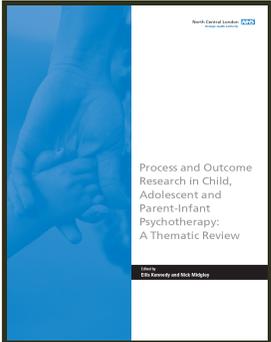


- ❖ **The traditional view:**
 - Ethos and institutional structures
- ❖ **The ACP today:**
 - a 'research active' profession
- ❖ **Michael Rustin:**
 - Case study methods: The consulting room as the primary laboratory
 - 'The method is in no way broken and does not need fixing' (2003)
- ❖ **Peter Fonagy:**
 - Psychoanalysis and scientific evidence
 - 'Child psychotherapy needs to change' (2003)
- ❖ Taking the **'both-and'** position

The need to investigate outcomes

- ❖ **Why we need outcome studies and RCTs:**
 - 'There is *insufficient evidence* to draw conclusions about the effectiveness of psychodynamic child psychotherapy' (*Drawing on the Evidence*, EBPU, 2006)
- ❖ **The example of child and adolescent depression:**
 - The **Trowell Depression Study** (Trowell et al., 2007)
 - The **IMPACT Study (2009-)**
 - Study of relapse prevention
 - 600 young people age 11-18 with moderate/severe depression
 - Short term psychoanalytic psychotherapy (STPP) vs Cognitive behavioural therapy (CBT) vs SCC

Beyond the RCT and outcome studies



- ❖ **Research pluralism:**
 - Importance of qualitative research
- ❖ **Process research:**
 - Explaining why and how treatment works
 - To *improve* clinical practice and patient care
- ❖ **Research into child development:**
 - To understand pathogenic mechanisms

Conclusion: do psychologists reject science?

- ❖ A three-fold response:
 - The need to *engage* with research
 - The need to *critique existing models* of EBP
 - The need to provide *alternative models* and alternative types of evidence
- ❖ Should we be aiming for an **evidence-based practice**?
 - Becoming **evidence-informed**
 - Promoting a **dialogue** between psychotherapy and academic research

Some words of wisdom

“For every complex problem, there is a solution that is simple, neat, and wrong”
(H.L. Mencken)

References

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