

Introduction

Psychotherapy and counselling research is one of the areas that contributes to the development of psychotherapy and counselling.¹ Psychotherapy and counselling research is interesting in that it is not in a laboratory that it is first conducted before it is brought to practice; instead it is practice itself that informs what should be studied (McLeod, 2003). Apart from direct research, psychotherapy and counselling, also benefit from basic research in psychology and related areas. Counselling and psychotherapy are also informed by related scientific disciplines, such as philosophy and other human and social sciences and medical, biological and interdisciplinary sciences such as neuroscience (Grawe, 2007). Counselling and psychotherapy are to a great extent also formed by practitioners' clinical experience of working with clients, as well as by practitioners' personal development experience and supervision.

Research in psychotherapy and counselling tries to come to an understanding, by the use of rigorous methods, of what is happening in therapy that leads to client changes in the direction of improved mental health. Like every research, psychotherapy and counselling research is extraordinarily complex. Rigorous investigations attempt to employ critical and reflective processes that will enhance our understanding of psychological therapy. However, critical thinking also reveals many limitations of studying psychotherapy. Awareness of the historical and social context that influences research activity is part of this critical process.

When talking about psychotherapy and counselling research, we must not forget that the investigation of human beings is always influenced by the worldview of the investigator. What is relevant to study is up to the investigator. Similarly, the investigator's view on what constitutes the core of human beings determines the nature of the investigation. The researcher asks only those questions that he or she needs to understand and considers

¹ I will use the terms counselling and psychotherapy interchangeably throughout the text. Similarly, the words client and patient. Generally, I use each of them in the context in which it is most often found (e.g. primary care counselling, psychoanalytic psychotherapy).

valuable. Researchers' own perspective on what constitutes people's well-being will inform their understanding of the tasks and goals of psychotherapy and counselling. In this the researchers' position is not so different from that of practising therapists, who often differ dramatically in their views on what the tasks and goals of therapy should be.

The worldview that shapes the delivery and goals of therapy does not preclude therapists from sharing their experiences of and reflections on therapy. The same applies to research. Researchers as well as therapists of different orientations and persuasions can learn from empirical findings that were gathered in the studies of 'other camps'. However, what they should bear in mind is that this therapy and investigation was conducted in a certain paradigm, which they need to translate to their own. The paradigmatic differences may sometimes preclude openness to the findings from some research studies or therapies. It is a reality that for years has been part of the field of psychotherapy and counselling.

Despite the differences, it is quite likely that therapists and researchers of different orientations ask similar questions and that their conceptualizations of psychotherapy and its goals do not differ dramatically. This is probably more visible in recent years, when integration in psychotherapy and counselling has been quite popular. Furthermore, the *empirical* nature of research in psychotherapy invites researchers and consumers of research findings alike to use the findings to enrich their understanding of therapy beyond the ideology they employ.

The positive side of psychotherapy research is that it can inform the understanding of therapy as well as therapeutic practice. The negative side is that it can be misused in ideological battles between different psychotherapy camps. This text hopes to encourage readers to be aware of psychotherapy research and critical of its limitations and potential misuse.

Theoretical Orientation of this Book

This book attempts to look at psychotherapy and counselling as *generic* curative activity, as proposed by some well-known psychotherapy researchers, such as Klaus Grawe (2004) or David Orlinsky and Kenneth Howard (1986). This conceptualization of psychotherapy cuts through different theoretical approaches, in the best tradition of psychotherapy research, as it attempts to discover universal mechanisms of psychotherapeutic endeavour and change. Understanding psychotherapy as a generic and relatively unified activity fits well with the empirical nature of research in psychotherapy and counselling, as well as with my own persuasion that there are universal principles that can be applied within different therapeutic contexts (which are often shaped by one's own personal history and professional training and experience).

Despite the fact that I have my own preferences in what I offer to my clients in my work and views on what constitutes human well-being, I have an interest in how, in general, psychotherapy is being researched, as well as its findings. This allows me to adapt and use in my practice findings gathered in contexts that are often different from my own way of conducting therapy. It also allows me to search within an enormous area of psychotherapy research

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studies for answers to questions that I encounter in my practice. I constantly experience excitement when I conduct research or read research studies that are creatively attempting to uncover pure psychological mechanisms and principles of therapeutic change.

Two Reasons for Researching Psychotherapy and Counselling

There exist two main reasons for empirical investigations of psychotherapy. The first is to *inform therapeutic practice*. Research tries to bring knowledge that either confirms how psychotherapy is practised or points to the need to alter existing therapeutic practice (when alterations become significant, new approaches to therapy can be born). Practitioners may use research as a resource that is quite similar to everyday practice, when one works in an exploratory and collaborative manner with the client, constantly checking whether the chosen strategy works. The main advantage of research, as opposed to everyday practice, is its rigor and the otherwise inaccessible outside perspective it gives. This advantage can be incorporated by the therapist in his or her own reflective process when conducting therapy with a particular client.

Apart from the fact that psychotherapy and counselling research informs everyday practice, research can also serve as a *justifier of the therapeutic endeavour*. Psychotherapy research rigorously assesses the benefits of psychotherapy for clients as well as broader society. Different stakeholders want to be assured that their resources are not wasted if they are invested in psychotherapy and counselling. From this perspective it is important that psychotherapy research is also conducted (or reviewed) by investigators who represent stakeholders who have a healthy scepticism towards the usefulness of psychotherapy and are open to see not only its usefulness but also its limitations and negative impacts.

Psychotherapy Research and Practice

The main ambition of most psychotherapy researchers is to have an impact on therapeutic practice. This ambition is, however, still not fully realized, though a positive trend of incorporating research studies into mainstream therapeutic practice has certainly been growing in recent years. Klaus Grawe (1997), a prominent psychotherapy researcher, predicted that *research-informed psychotherapy* will be the future of psychotherapy. Research-informed psychotherapy, according to him, should replace traditional therapeutic orientations: it should be based on the key mechanisms of psychological change regardless of the specific therapeutic approach (school) used in a work. Uncovering those 'basic therapeutic principles' should be one of the goals of psychotherapy research, and work based on these principles would be truly generic psychotherapy.

No matter how logical Grawe's (1997) proposition seems, the reality of the world of psychotherapy is that it exists quite independently from psychotherapy research. Training in psychotherapy and counselling still relies heavily on the accumulated clinical wisdom

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Table 0.1 Critiques of psychotherapy research (adapted with permission from Morrow-Bradley & Elliott, 1986)

Criticism	% agreeing
Research that treats all therapists or all responses by therapists as interchangeable obscures essential differences	75
Practical, relevant and scientifically sound measures of psychological change due to therapy are often unavailable	68
Studies designed to try to incorporate the complexities of psychotherapy are rarely done	67
In an effort to make studying psychotherapy more manageable, researchers often ignore important variables	66
Often researchers focus on specific therapeutic techniques while ignoring the importance of the relationship between therapist and client	66

and personal experience of trainers rather than on research findings. The roots of this detachment probably lie in how research has been taught on undergraduate programmes. I suspect that the search for objectivity sometimes led to minimal validity.

Twenty years ago, Morrow-Bradley and Elliott (1986) investigated the use of psychotherapy research among members of the Division of Psychotherapy of American Psychological Association. They approached 10% (384 members) of this APA division and received answers from 73% of their sample. The results of their study, for example, showed that the average therapist had published in his or her entire career to date one research study, and read five psychotherapy research articles each month. Ten per cent of the sample stated that psychotherapy research articles or presentations informed their practice. Thirty-seven per cent read articles and 57% attended research conferences that they found meaningful, while 24 per cent of the respondents stated that a research article had helped them in work with a difficult client.

Respondents in Morrow-Bradley and Elliott's (1986) research were also offered a list containing 17 criticisms of psychotherapy research. The five key items that received the highest rating are presented in Table 0.1. Respondents were also asked to rate the usefulness of seven different types of research: their order of usefulness is presented in Table 0.2. What can be seen from the tables is that practitioners see research as *reductionistic*, not capable of gauging meaningful characteristics or simplifying them. The research methods are seen as insufficiently *sophisticated*. In regard to the areas that are worth study, process research dominated outcome research.

Goal of the Book

The goal of this book is to present the field of psychotherapy and counselling research to practising therapists and trainees. Hopefully, the book will also be valuable to

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Table 0.2 Useful types of psychotherapy research (adapted with permission from Morrow-Bradley & Elliott, 1986)

Research topic	% rating it as extremely or very useful
Research that emphasizes the description of how the therapy was done	84
Research that focuses on therapists and/or client behaviours leading to important moments of change during psychotherapy	83
Process–outcome research that links the process of therapy to differential outcomes	83
Research that focuses on the development and impact of the therapeutic or helping alliance	78
Process research that compares a treatment with a control group and/or other treatment approaches	62
Outcome research that compares a treatment with a control group and/or other treatment approaches	59
Research that emphasizes how research findings fit into a specific theoretical orientation	47

educators in psychotherapy and counselling. My goal is to present psychotherapy and counselling research in a way that will show the value of this kind of research for therapeutic practice. The book is also of potential interest to consumers of therapy and counselling, whether clients or those who pay for therapy. It should be helpful to beginning psychotherapy and counselling researchers, and hopefully seasoned researchers will find something interesting in it too. I present what is being studied in therapy and how to give the reader a basic picture of the field, its achievements as well as problems. Throughout the book I use many examples of relevant studies so that the reader can gain an idea of what actual studies look like and what kind of results they can bring.

Organization of the Book

Psychotherapy and counselling research are traditionally divided into outcome research and process research. This division will be applied in this book as well. Outcome research usually attracts more interest because of its political influence, which stems from answering the question: what therapeutic approach works in which circumstances? Paradoxically, this kind of research does not contribute much to the development of new therapeutic approaches, but rather validates existing ones. Questions addressed by outcome research are numerous, including many on the assessment of

outcome (e.g. how many clients got better, to what extent, how long changes lasted). Although it would seem more logical to start the presentation of psychotherapy research with psychotherapy process research and to look at change processes before looking at how to validate them, the emphasis in the current 'evidence-based' climate is on outcome research, so I will focus on that in the first part of the book.

We will look at different ways of measuring outcome in psychotherapy and counselling and will consider different designs that are employed in addressing whether a specific form of therapy works; however, we will spend more time on randomized controlled trials, as politically they dominate the field. We will also have a look at how findings are accumulated across several studies (meta-analysis, systematic reviews).

In regard to psychotherapy process research, we will focus on the different tools that are used in this type of research. We will also consider different types of studies, such as process–outcome studies, descriptive studies, significant events studies, studies testing theories of change, etc. In addition, the book will look at the context of psychotherapy, for example the development of therapists, supervision, psychotherapy training, etc. Finally, the last chapter is devoted to links between psychotherapy and counselling research and therapeutic practice. There we will examine some therapeutic approaches that were either developed empirically or were tested extensively.

The Presentation and Social Organization of Psychotherapy and Counselling Research

Psychotherapy and counselling research is an ever-developing scientific area. There are around 50 English-language international journals that regularly publish empirical studies on psychotherapy and counselling (see McLeod, 2003). The most important of these are presented in Table 0.3. These journals vary in their impact and in the types of studies they publish. The former is measured by scientific indicators such as impact factor (the frequency of citations of articles in the journal). Among the journals with the highest impact is *Archives of General Psychiatry*, published by the American Medical Association. The journal is devoted to psychiatry and related disciplines and in regard to psychotherapy studies usually publishes outcome studies that are high on validity and have high relevance. The *Journal of Consulting and Clinical Psychology* is a journal of the American Psychological Association and is devoted to clinical psychology. It contains mainly outcome studies, but also process–outcome studies and sometimes high-quality process studies. Process studies and studies conducted by counselling psychologists can be found in the American Psychological Association's *Journal of Counseling Psychology*. A special place among journals publishing empirical studies on psychotherapy is occupied by the journal of the International Society for Psychotherapy Research, *Psychotherapy Research*. This journal is on the edge of developments in psychotherapy and counselling research. It is open to innovative methodologies, to a variety of therapeutic orientations, as well as to a various topics related to psychotherapy.

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Table 0.3 Examples of relevant professional journals publishing psychotherapy studies and type of psychotherapy and counselling research they publish

Journal	Brief characteristic
American Journal of Psychiatry	Journal of the American Psychiatric Association; publishes mostly outcome studies.
American Journal of Psychotherapy	Journal of the Association for Development of Psychotherapy; publishes mostly process–outcome studies.
Archives of General Psychiatry	Journal of the American Medical Association; publishes mostly outcome studies.
Behavior Therapy	Journal of the Association for the Advancement of Behaviour Therapy; publishes mostly experimental investigations of behaviour therapy outcome (mostly smaller studies and experimental case studies).
British Journal of Clinical Psychology	Journal of the British Psychological Society; publishes different types of psychotherapy research.
British Journal of Guidance and Counselling	Journal published by Careers Research and Advisory Centre; mostly qualitative studies.
British Journal of Psychiatry	Journal of the Royal College of Psychiatrists; publishes mostly outcome studies with psychiatric patients.
Clinical Psychology: Science and Practice	Journal of the Division of Clinical Psychology of the American Psychological Association; publishes mostly overview studies and political issues of psychotherapy research.
Counselling and Psychotherapy Research	Journal of the British Association for Counselling and Psychotherapy; devoted solely to research in counselling and psychotherapy; publishes mostly qualitative process research.
International Journal of Group Psychotherapy	Journal of the American Association of Group Therapy; publishes different types of group therapy research.
Journal of Clinical Psychology	Journal of the International Society of Clinical Psychology; publishes different issues involved in psychotherapy research, and outcome studies that are not typically published.
Journal of Consulting and Clinical Psychology	Journal of the American Psychological Association; publishes mostly outcome studies and to lesser extent process–outcome studies.
Journal of Counseling Psychology	Journal of the American Psychological Association; publishes mostly process studies and qualitative studies.

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Table 0.3 (Continued)

Journal	Brief characteristic
Journal of Counseling and Development	Journal of the American Counseling Association; publishes mostly process studies.
Journal of Marital and Family Therapy	Journal of the American Association for Marriage and Family Therapy; publishes research on couple and family therapy.
Psychology and Psychotherapy	Journal of the British Psychological Society that replaced the British Journal of the Medical Psychology; publishes different types of research, including qualitative studies.
Psychotherapy	Journal of the Division of Psychotherapy of the American Psychological Association; publishes theoretical, practical and research articles, mostly process studies and overview studies.
Psychotherapy Research	Journal of the Society for Psychotherapy Research; entirely dedicated to psychotherapy research; publishes all types of research, often original and atypical methodology.

There are also many monographs as well as edited books dedicated to psychotherapy research. Some from the 1990s and the beginning of the twenty-first century are presented in Table 0.4. The leading role among the edited books is played by the *Handbook of Psychotherapy and Behavior Change*, published for the first time in 1971. The editors of this book, Allen Bergin and Sol Garfield, are respected authorities in the area of psychotherapy research. Now in its fifth edition (Lambert, 2004), this book is published approximately every eight years and presents all psychotherapy research, with an emphasis on accumulated findings.

An important cornerstone in the development of psychotherapy research was the establishment of the International Society for Psychotherapy Research (SPR; see www.psychotherapyresearch.org). Every year this society organizes an annual conference which usually showcases the cutting edge of developments in psychotherapy research. The society also has regional chapters (e.g. in the UK Europe, North America) that organize regional conferences. Past presidents of the Society for Psychotherapy Research include distinguished researchers such as Ken Howard, David Orlinsky, Allen Bergin, Sol Garfield, Hans Strupp (a writer on time-limited psychodynamic therapy), Lester Luborsky (who writes on supportive-expressive psychoanalytic therapy), Aaron Beck (a founder of cognitive therapy), Irene Elkin (the first author of the first large randomized controlled trial of psychotherapy and pharmacotherapy for depression that will be mentioned several times in this book), Ed Bordin (originator of the best-known concept of therapeutic alliance), A. (John) Rush (co-founder of cognitive psychotherapy), Alan Gurman (a well-known representative of couples and family therapy), Larry Beutler (a founder of systematic eclectic therapeutic model), Les Greenberg (a founder of emotion-focused therapy), Horst Kächele (one of the most renowned German

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Table 0.4 Some edited books on psychotherapy research from the 1990s and the beginning of the twenty-first century, with brief descriptions

Title and editors	Brief description
Aveline, M. (ed.) (1995). <i>Research Foundations for Psychotherapy</i> . Chichester, England: Wiley.	Chapters from different researchers on methodological issues in psychotherapy research.
Bergin, A. & Garfield, S. (eds) (1994). <i>Handbook of Psychotherapy and Behavior Change</i> (4th edn). New York: John Wiley.	Fourth edition of the book summarizing research findings of psychotherapy research.
Beutler, L. E. & Crago, M. (eds) (1991). <i>Psychotherapy Research: An International Review of Programmatic Research</i> . Washington, DC: American Psychological Association.	Presents international programmatic research projects from different research teams.
Cain, D. & Seeman, J. (eds) (2002). <i>Humanistic Psychotherapies: Handbook of Research and Practice</i> . Washington, DC: American Psychological Association.	Research-informed view of humanistic psychotherapies.
Castonguay, L. G. & Beutler, L. E. (eds) (2006). <i>Principles of Therapeutic Change</i> . New York: Oxford University Press.	Invited authors summarize evidence of client and therapist variables, therapeutic relationship variables, and treatment variables impacting the outcome of psychotherapy for 4 groups of disorders (mood disorders, anxiety disorders, substance abuse disorders, and personality disorders).
Fisher, J. E. & O'Donohue, W. T. (2006). <i>Practitioner's Guide to Evidence-based Psychotherapy</i> . New York: Springer.	An overview of empirically supported treatments and other research evidence for a broad range of psychological and psychiatric disorders.
Freeman, C. & Power, M. (2007). <i>Handbook of Evidence-based Psychotherapies: A Guide for Research and Practice</i> . Chichester: John Wiley.	Provides an overview of empirical findings on psychotherapy outcome across different theoretical orientations and client groups.
Fuhrman, A. & Burlingame, G. M. (eds) (1994). <i>Handbook of Group Psychotherapy: An Empirical and Clinical Synthesis</i> . New York: John Wiley.	An overview of research on group therapy.
Goodhart, C. D., Kazdin, A. E. & Sternberg, R. J. (eds) (2006). <i>Evidence-based Psychotherapy: Where Practice and Research Meet</i> . Washington, DC: American Psychological Association.	Offers perspectives of practitioners as well as researchers on different positive and negative aspects of the evidence-based movement.
Gurman, A. S. & Jacobson, N. S. (2003). <i>Clinical Handbook of Couples Therapy</i> (3rd edn). New York: Guilford Press.	Research-informed view of couple therapies.

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Table 0.4 (Continued)

Title and editors	Brief description
Horvath, A. O. & Greenberg, L. S. (eds) (1994). <i>The Working Alliance: Theory, Research, and Practice</i> . New York: John Wiley.	Theoretical formulations and research findings concerning the therapeutic relationship.
Miller, N. E., Luborsky, L., Barber, J. P. & Docherty, J. P. (eds) (1993) <i>Psychodynamic Treatment Research</i> . New York: Basic Books.	Overview of empirical research into psychodynamic therapies.
Nathan, P.E. & Gorman, J. M. (eds) (2007). <i>A Guide to Treatments that Work</i> . (3rd edn). New York: Oxford University Press.	An overview of empirically supported psychotherapeutic and psychopharmacological approaches to treatment of psychiatric disorders.
Norcross, J. (ed.) (2002). <i>Psychotherapy Relationships that Work: Therapist Contributions and Responsiveness to Patients</i> . New York: Oxford University Press.	An overview of findings regarding relational variables influencing the outcome of psychotherapy.
Norcross, J., Beutler, L. E. & Levant, R. F. (eds) (2006). <i>Evidence-based Practices in Mental Health</i> . Washington, DC: American Psychological Association.	Presents heated debates of researchers involved in psychotherapy research on what constitutes 'evidence' for evidence-based practice. Proponents of sometimes dramatically different views on what constitutes evidence and how to interpret existing evidence are matched and invited to comment on each other's contribution.
Russell, R. L. (ed.) (1994). <i>Reassessing Psychotherapy Research</i> . New York: Guilford Press.	An overview of methodological issues in psychotherapy research.
Sexton, T. L., Weeks, G. R. & Robbins, M. S. (eds) (2003). <i>Handbook of Family Therapy: The Science and Practice of Working with Families and Couples</i> . New York: Routledge.	Research-informed view of family therapies.
Sprenkle, D. & Piercy, F. (eds) (2005). <i>Research Methods in Family Therapy</i> . New York: Guilford Press.	An overview of methods and methodological issues in family therapy research.
Talley, P. F., Strupp, H. H. & Butler, S. F. (eds) (1994). <i>Psychotherapy Research and Practice: Bridging the Gap</i> . New York: Basic Books.	Psychotherapy researchers' views on using research for informing therapeutic practice.
Toukmanian, S. G. & Rennie, D. (eds) (1992). <i>Psychotherapy Process Research: Paradigmatic and Narrative Approaches</i> . Newbury Park, CA: Sage.	Prototypical quantitative and qualitative investigations of psychotherapeutic process.
Tryon, S. G. (ed.) (2002). <i>Counseling Based on Process Research: Applying What We Know</i> . Boston: Allyn and Bacon.	Chapters from prominent North American process researchers written from the perspective of the applicability of research findings to therapeutic practice.

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psychoanalysts), Lorna Benjamin (an originator of interpersonal reconstructive therapy of personality disorders), Klaus Grawe (inventor of a generic psychological model of psychotherapy), David Shapiro (who set up one of the most sophisticated RCTs conducted in Britain), Len Horowitz (an author of the Inventory of Interpersonal Problems, an instrument widely used for measuring psychotherapy outcomes), Clara Hill (whose cognitive-experiential model is used for working with dreams in psychotherapy), Michael Lambert (most recent editor of the above-mentioned *Handbook of Psychotherapy and Behavior Change*), Robert Elliott (a co-founder of emotion-focused therapy), William Stiles (whose assimilation theory will be mentioned later in the book) and many other well-known researchers.

The Historical Context of Psychotherapy and Counselling Research

Psychotherapy and counselling research has a long and rich history, which helps us to understand some of the current political issues in the field. The history of this research is a history not only of methodological approaches and significant findings, but also of a striving for the recognition of counselling and psychotherapy as interventions for the treatment of psychological and psychiatric problems and disorders.

Brief Historical Overview of Outcome Researching in Psychotherapy and Counselling

The first outcome studies of psychotherapy date back to the 1920s (Huddleson & Fenichel, cited in Bergin, 1971). The standards of the early psychoanalytic studies, however, cannot be compared by any means to the current experimental or even non-experimental studies. However, as early as the 1950s (see Bergin, 1971) experimental designs started to be used in psychotherapy research. At that time, however, little was known about what symptoms or other characteristics of clients could be influenced by psychotherapy. Nor was much known about how the perspective adopted when evaluating change (e.g. client, therapist, external observer, significant other) influences the outcome. Few significant instruments had been developed to capture therapeutic change. Despite these problems, the level of methodological sophistication – for example the use of several measures to capture change or several perspectives when looking at the outcome – must be commended.

The 1950s saw several bigger projects at different American universities and the 1960s also brought the first comparative studies, where different psychotherapies were compared (cf. Strupp & Howard, 1992). An excellent example of the comparative studies of the time was a project carried out at Temple University, comparing brief behaviour therapy, brief dynamic therapy, and waiting list control (Sloane et al., 1975). From the

perspective of current standards, the cornerstone for studying psychotherapy outcome was the Treatment of Depression Collaborative Research Program (TDCPR) project funded by the US National Institute of Mental Health (Elkin, 1994). This project was the first of its kind, an example of the randomized controlled trials that now dominate outcome research in counselling and psychotherapy. This study – which will be mentioned many times in this book – compared several interventions, psychotherapeutic as well as pharmacotherapeutic and a placebo. It used manualized therapies that were checked for adherence and quality of delivery, and also used well trained and supervised therapists. It had sufficient statistical power, a well-defined client group, and used multiple sensitive instruments to capture therapeutic change. It also assessed outcome in longer-term follow-up.

Psychotherapy outcome research also had some other cornerstones. One example was the researching of the dose-effect of psychotherapy, i.e. investigation of the relationship between length of therapy and therapeutic outcome (Howard, Kopta et al., 1986). The introduction of the use of therapeutic manuals (Beck, Shaw et al., 1979) can also be considered an important step in psychotherapy research.

Psychotherapy outcome research is connected with many controversies. These often had to do with evaluation of the body of research on the effectiveness of psychotherapy. The first controversy was started by Eysenck's (1952) overview of the effectiveness of psychotherapy, in which he reached the conclusion that psychotherapy other than behaviour therapy is no better than spontaneous recovery. He himself was a representative of behaviour therapy, which certainly led to a heated debate. Later overviews were more positive towards psychotherapy and certainly justified it as a valuable venture (Bergin, 1971; Luborsky, Singer & Luborsky, 1975).

One extremely important event in the history of psychotherapy research was a work by Smith, Glass and Miller (1980; see also Smith & Glass, 1977) who for the first time used the method of meta-analysis. These authors looked at the overall outcome of psychotherapy as well as at the many factors that influence the outcome. The overall conclusion was that psychotherapy as a whole works and that the average effect size (to be discussed in Chapter 2) in comparison to control group across different measures and client groups is 0.85. This means that an average patient who was in 50th percentile of the experimental group before treatment, reached the 80th percentile after treatment, i.e. the average patient was better off than 80% of patients in the control group. Smith, Glass and Miller did not compare different therapies directly; however, they stated effect sizes separately for therapies from different theoretical orientations.

Since their meta-analysis, meta-analyses literally flooded professional literature and we will devote sufficient space to them in this book. Meta-analytic investigations added to discussions on the effectiveness of psychotherapy and counselling. This method, though having its own methodological problems, also allowed for the assessment of outcomes of studies whose authors were of different theoretical orientations.

Psychotherapy and counselling outcome research is currently immensely rich. In it there are still traces of the influences mentioned in this short description of its history. We will note them in Chapter 2, where I will try to capture the diversity of methodological approaches to studying the effect of psychotherapy and counselling.

The History of Psychotherapy Process Research

A cornerstone of psychotherapy process research was the use of tape recordings of therapeutic sessions by Carl Rogers (1942) in the 1940s. Recording allowed scientific scrutiny of what is happening inside the therapeutic session. The 1950s and 1960s also brought the first instruments allowing the assessment the therapeutic process. Most of them (see overview in Greenberg & Pinsof, 1986) were expert-rated scales, but some were participative methods using the perspectives of both participants in therapy (examples are Barrett-Lennard's Relationship Inventory or the Therapy Session Reports of Orlinsky and Howard; I present these and other methods in Chapter 8).

Most process research conducted from the 1940s to the 1960s came from the client-centred theoretical orientation. Most often, Rogers' facilitative conditions were studied, as well as the client's experiencing process. Psychoanalytic developments were represented by the Menninger Foundation's project, which started in the 1950s (Wallerstein, 1992). This focused on the process and outcome of psychoanalytic therapy. One of the researchers involved in the project, Lester Luborsky, continued in Penn State University from the 1960s. He studied the effect of therapeutic alliance on therapy outcome as well as empirically studying transference and developing a method to measure it (see Luborsky & Crits-Christoph, 1990, 1998; Luborsky & Luborsky, 2006).

The 1980s brought new types of study. For example, therapeutic events studies were developed by Laura Rice and Les Greenberg (1984). These studies looked at stages of the therapeutic process and processes leading to successful progress in those events. The 1980s also witnessed sophisticated studies by the Mount Zion Psychotherapeutic Group (Weiss & Sampson, 1986), which predicted therapeutic process in long-term psychoanalytic therapy. Technological development in video also allowed clients and therapists to comment in 'Interpersonal Process Recall' immediately after therapeutic sessions (Elliott, 1986).

The 1980s also saw a huge growth in process-outcome studies (we will talk about them in Chapter 10). Though the first process-outcome studies could be dated to the 1950s, the real growth in the 1980s is documented by Orlinsky, Grawe and Parks (1994), who identified 192 studies between 1985 and 1992 that looked at the relationship of process variables and outcome. Altogether, those studies brought 1,200 independent findings on the relationship of some aspect of therapeutic process to therapy outcome.

A contribution of the 1990s was the development of qualitative methodologies allowing a more flexible approach to the complexity of psychotherapeutic process. Clients and therapists were invited to comment on sessions in which they participated (e.g. Rennie, 1990). Studies focusing on the process of successful or unsuccessful cases also flourished in this decade (e.g. Honos-Webb, Stiles et al., 1998).

Institutional Cornerstones of Psychotherapy Research

Hans Strupp and Kenneth Howard (1992), in reflecting on the history of psychotherapy research until 1992, saw three main institutional cornerstones for psychotherapy

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research in the United States and internationally. The first was a series of conferences organized by the American Psychological Association in 1958, 1961 and 1966 dedicated to psychotherapy research. At these, leading researchers discussed developments of psychotherapy research of the time. The second cornerstone, according to Strupp and Howard, was a research conference in 1970, at which the International Society for Psychotherapy Research was established. Ken Howard and David Orlinsky were elected as president and president-elect respectively. The third important cornerstone was the support of the National Institute of Mental Health in the United States, which facilitated collaborative research projects in different research centres. Another cornerstone that I would add to their list was the foundation of the scientific journal of the Society for Psychotherapy Research, *Psychotherapy Research*, which is entirely devoted to psychotherapy research. Because of its transtheoretical and pluralistic scope, it is a good platform for communication between researchers studying psychotherapy.

History and Presence

The history of psychotherapy research is implicitly present in current research. Many of the methodological approaches that shaped the history of psychotherapy research are now truly history; however, some are still well and alive. This is one reason why I will refer to some historical precedents of the current methodological approaches in the following chapters.