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The Integration of Research and Practice in Clinical Psychology

Timothy Razza, Psy.D.

One of the most significant debates in clinical psychology in the past decade has been focused on evidence-based practices (Berke, Rozell, Hogan, Norcross, & Karpiak, 2011). This debate occurs in clinic, research, academic, and administrative settings and currently represents a primary dimension of the training of future clinical psychologists. Melchert (2007) states that the intensity of this disagreement interferes with the recognition that scientific credibility has had on the overall success of professional psychology, as well as the recognition that the growth of psychology in general has been largely based on developments in professional psychology.

An evidence-based focus in psychology dates back to the early history of the discipline when pioneers such as Wilhelm Wundt advocated for the separation of psychology from philosophy based on adherence to the scientific method and the implementation of empirical research. The objective to be recognized as a true empirical science represented a major struggle in the early history of psychology. Extending this empirical focus to clinical psychology, Triewiler (2006) acknowledges the integration of research and practice as an original and defining goal of clinical psychology. This initial goal is supported by the fact that Lightner Witmer, who many consider to be the founder of clinical psychology (Routh, 1996) and a student of Wundt, utilized methods learned from experimental psychology in an attempt to assist school-age children brought to the first psychological clinic he established in 1896 at the University of Pennsylvania (Witmer, 1907). The American Psychological Association (APA) Presidential Task Force on Evidence-Based Practice states that the rationale for evidence-based practices “is to promote effective psychological practice and enhance public health by applying empirically

supported principles” (APA, 2006, p.273) through the integration of research, clinical experience, and relative client variables. Kazdin (2011) states that the most commonly used criteria for identifying an evidence-based treatment (EBT), sometimes referred to as Empirically Supported Treatment (EST), is that the treatment in question has demonstrated change as evident in randomized controlled trials (RCTs). The APA Presidential Task Force on Evidence-Based Practice (2006) adds that evidence-based practice includes recognition of the strengths and limitations of the evidence obtained from different types of research. It is important to note that a large number of treatments and interventions currently used in clinical practice have not been empirically studied utilizing RCTs. This does not mean that these treatments and interventions are ineffective, but that they have not been studied utilizing the methodology of RCTs.

Strupp and Howard (1992) propose that the “modern era” of psychotherapy research began in the 1950s with the work of Eysenck (1952), and Rogers and Dymond (1954). Although Eysenck initially concluded that psychotherapy was ineffective, later analysis of his data supported the improvement of 67% of those individuals receiving psychotherapy (Strupp & Howard, 1992). Rogers and Dymond (1954) considered their research on the outcomes and process of psychotherapy to be the first objective study of outcomes in psychotherapy in which sufficient controls were utilized. Although they indicated pride in their research, they stated “It isn’t a good research in psychotherapy, it’s just the best that there is” (Rogers & Dymond, 1954, p.5). Results of the first meta-analysis of the effectiveness of psychotherapy published in 1980 demonstrated an improvement in 80% of individuals who received psychotherapy compared to those who did not receive psychotherapy (Smith, Glass, & Miller, 1980). In the years since these pioneering studies, the depth and methodology of psychotherapy research has improved immensely, including the meta-analysis of thousands of studies utilizing randomized controlled

trials (Kazdin, 2008) that provide strong evidence for the efficacy and effectiveness of numerous therapeutic interventions (Teachman et al., 2012; Huppert, Fabbro, & Barlow, 2006). Sturme and Hersen (2012) recently edited a two volume series outlining evidence-based treatments for child and adolescent and adult disorders including depressive disorders, anxiety disorder, disruptive behavior disorder, autism spectrum disorders, schizophrenia, cognitive disorders, substance-related disorders, and personality disorders. Meta-analyses have also supported the consistent impact of the therapeutic relationship (also referred to as the therapeutic alliance) on positive outcomes in psychotherapy (Norcross & Wampold, 2011; Martin, Garske, & Davis, 2000).

The main focus of the current evidence-based debate in clinical psychology has been in the area of the empirical support for clinical practice, generally referred to as the research-practice split (Kazdin, 2008). On the surface, this debate appears to be placing clinical researchers and clinical practitioners at direct odds with each other. This debate is not necessarily focused on the overall goals of evidence-based practices, but rather the specific factors and functions related to evidence based-practices (Berke et al, 2011). The main point on the research side of this debate is that empirical support for therapeutic interventions improves both the quality and cost effectiveness of treatment provided (Mudford, McNeill, Walton, & Phillips, 2012; Chambless & Ollendick, 2001). Clinical practitioners agree with the goal of improving the provision of services to their clients. The primary concern of the practice side of this debate is the generalizability of the results of empirical research to clinical populations where the uniqueness and complexities of the clients' presenting difficulties and life circumstances may not match the characteristics of the research participants (Hunsley, 2007; Kazdin 2008). It is difficult for practitioners to believe that the client and situational variables in a research setting match the

numerous, challenging, and often changing client and situational factors present in a clinic setting. Additional practice concerns include a lack of clarity regarding what types of evidence can be considered in evaluating the effectiveness of interventions and professional practices (Melchert, 2007); practicing psychologists' knowledge of research methodology and statistics to evaluate the relevance of research that can be integrated into current practice (Berke et al., 2011); the flaws in RCT methodology related to the complex variables that contribute to change in psychotherapy (Hollon & Wampold, 2009); and the impact that evidence-based practice will have on clinical services including psychotherapy becoming briefer and more standardized (Thomson, 2010). As psychotherapy is recognized as an intricate integration of art and science, Thomson (2010) summarizes a final concern of practitioners, stating that "in addition to science, psychotherapy will always have a large component of art. We are not yet, and may never be, at the point where a therapist can simply consult a cookbook of ESTs [Empirically Supported Treatments] and apply the recommended treatment with reliable results" (p.36).

Although numerous authors (Hershenberg, Drabick, & Vivian, 2012; Hunsley, 2007; Levant & Hasan, 2008) suggest that the first step in the process of bridging the gap between research and practice should occur at the graduate level, the appreciation and understanding of the science of psychology, and thus the science of clinical psychology, begins at the undergraduate level. This idea is supported by Hershenberg et al., (2012), who hypothesizes that "trainees whose early clinical and research experiences embody the integration of science and practice are likely to adopt and maintain this approach as they progress through subsequent stages of professional development" (p.123). The idea of teaching evidence-based concepts and principles is also supported by the success seen in undergraduate dental and nursing programs (Werb & Matear, 2004; Meeker et al., 2008; Heye & Stevens, 2009).

An initial recommendation for undergraduate psychology major learning objectives that will support future clinical psychologists in becoming both effective producers and consumers of clinical research includes developing skills and knowledge in locating and identifying, obtaining, critically evaluating, and integrating research evidence into their written work as well as their overall understanding of psychological concepts and theories (Hershenberg et al., 2012; Falzon, Davidson, & Bruns, 2010). This objective, in addition to involvement in psychological research, serves to develop the empirical foundation for those students with an interest in pursuing a career in clinical research. This objective also ensures that those students solely interested in becoming clinical practitioners will have the foundational skills that will later be used to effectively integrate empirical research into their clinical practice. Treiweiler (2012) encapsulates this suggestion in stating that all students of psychology should be taught a scientific attitude that includes openness and a skeptical, but respectful attitude toward empirical evidence, as well as expanded knowledge of research methodology and how this methodology contributes to an understanding of real-life situations.

Additional recommendations for students interested in pursuing a career in clinical psychology include developing a foundational understanding of theory, assessment, diagnoses, and the client and practitioner variables in therapy, including the therapeutic relationship (Norcross & Wampold, 2011), that have been empirically supported to contribute to positive psychotherapy outcomes. Another recommendation is developing an understanding and appreciation of the cultural and environmental factors that impact an individual's overall functioning and clinical presentation, as well as how these cultural and environmental factors may influence the results obtained from empirical research.

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