#### Egenterapi – aktuell forskning

Hur förvaltas kompetens –

internationellt perspektiv

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- Psychotherapy is a hyper-complex process.
- Competent and adequate application of a psychotherapeutic approach is based on profound education.
- Central pillar for psychodynamic psychotherapy education: personal therapy.
- Evidence-based psychotherapy
- Medical model vs. humanistic model.

- Economic pressure -> effective psychotherapies.
- Need for empirical research.
- Primary aim cannot be to cut as much money as possible.
- Primary aim must be to further develop competences in order to secure best treatment possible.

• The problem:

Value of personal psychotherapy for clinical practitioners is based on

- Practice wisdom
- Anecdotal evidence

but rarely on empirical research.

- How does self experience/personal therapy contribute to personal and professional development?
- How are the linkages between receiving and conducting psychotherapy?
- What emotional and technical challenges arise when treating a patient?

- Much knowledge is communicated narratively.
- Basic knowledge gained from treating individual patients.
- Freud's idea about personal therapy is still a cornerstone and precondition when performing psychotherapy.
- Truthfulness, authenticity, integrity for narrative accounts.
- Developing a clinical database and thus hypotheses about how therapy works (which can be tested empirically).

- What do we know about the role of personal therapy?
- About 75 % of all psychotherapists have had self experience/personal therapy.
- Psychotherapists are the largest consumers of psychotherapeutic services (compared to other professions).
- Many psychotherapists report that personal therapy has been the single or second most important influence on their professional development.

- Pope & Tabachnik (1994):
  94 % of PDT therapists undertook personal therapy
  71 % of CBT therapists undertook personal therapy
- Norcross et al. (2005):
  85 % of PDT therapists undertook personal therapy
  65 % of CBT therapists undertook personal therapy
- "Although approximately three quarters of therapists have themselves treated a fellow mental health professional, there is no organized body of knowledge that effectively guides their work".
   (Geller, 2011)

#### Purposes:

- Enhance professional development and relational capacities
- Increase personal development, capacities and well-being of the therapist
- More self-awareness, reflection upon the self
- Increase empathy, warmth, relational skills
- Better awareness of transference/countertransference, projections and other defensive processes
- Decrease unethical behaviour
- Decrease risk for burnout.

Mechanisms related to professional development (Orlinsky et al., 2011):

- Sensitivity to client's needs, enhancing empathy
- Observation, learning and mastery of psychotherapeutic skills
- Reducing stress and emotional burden
- Increasing understanding of own problems, conflicts, values
- Increasing conviction in efficacy of therapy
- Socialization process into the role of a psychotherapist

## Literature Review on knowledge development among psychotherapists – Some results

(Lindgren, Döllinger, Schuster, Hau, in press)

- There is a clear tendency toward relevant research on learning processes within the "CBT" approach.
- Mainly qualitative methodologies are applied (e.g., for reflections on own treatment activities, reflections on improvement as therapist).

#### Some results

 New models of learning processes are introduced; e.g., the "DPR"-model of learning:

D: declarative learning

P: procedural learning

R: reflective learning

#### Some results

Distinctions are made between a

- personal self and a professional self (and corresponding self-pictures) as well as between
- Professional learning and personal learning =>
   only when both happen "transformational
   learning" becomes possible.

#### Repeated topic:

One recurring topic and result is the necessity to create time and space for REFLECTION during the education process.

(Groups, supervision, writing, etc.)

#### Main topic

- Personal therapy
- The importance of personal therapy is acknowledged within all relevant psychotherapy approaches.
- Especially the capacity to handle emotions (e.g., emotional interventions) is learned in personal therapy.

- Strupp (1955, 1973): More concise interventions of therapists having had personal therapy. If no personal therapy: three times higher number of negative empathy ratings
- Garfield and Bergin (1971): Greatest decrease of symptoms, change in patients if clinician have had no personal therapy.

- Sandell et al. (2006): Patients with therapists who had long psychoanalyses (13 years or more) showed least improvement.
  - Graduate trainees satisfaction has moderating effect on changes (e.g., in self-efficacy), not length of personal therapy.
- Schauenburg et al. (2010): Working with severely disturbed patients: higher attachment security of therapists was associated with both better alliance and outcome.

- Rizq & Target (2008, 2010): Mixed method study investigating relation between attachment status and level of reflective functioning with how therapeutic relation was experienced in personal therapy.
- Insecurely attached participants were more troubled by perceived disparity of institutional and personal power within the psychotherapeutic relationship

• Gold & Hilsenroth (2009): Treatments of patients with therapists who have had personal therapy are twice as long compared with therapists who have had no personal therapy.

- Gold et al. (2015): Personal therapy was not significantly related to patient's ratings of alliance but to patient's ratings of outcome.
- Not the amount of sessions of personal therapy seem to be relevant but the trainee satisfaction.
- Inconsistent findings when comparing retrospective surveys with empirical studies
- Role of therapist's level of adaptive functioning for outcome needs to be investigated

- Cuoto et al. (unpublished): Pilot-study with 34 trained psychotherapists (20 CBT, 14 PDT)
- NO personal therapy:
  - years of practise was negatively correlated with Insight as a therapeutic tool ( $r_s$  =-48; p <.05) and also negatively correlated, but marginally significant, with Kindness as a therapeutic tool ( $r_s$  =-.46, p=.058) and Neutrality ( $r_s$ =-.46; p=.057).

# Research expertise on psychotherapy education of licensed psychotherapists in Germany

Strauss et al., 2009

The following 28 slides are based on material cited from the Research expertise by Strauss et al., 2009

#### Research expertise

#### Questions on

- Theoretical part
- Supervision
- Practical part
- Pratical experience
- Personal Psychotherapy

#### Research expertise

#### Interviews with

- Psychotherapists
- Supervisors
- Teachers
- Students
- Directors of education programs
- Alumni

## Research expertise

Evaluations of CBT and PDT education programs and of licensed psychotherapists in 24 countries:

 Belgium, Bulgaria, Danmark, Germany, Finland, France, Greece, Italy, Latvia, Luxemburg, Netherlands, Austria, Poland, Portugal, Rumania, Sweden, Slowakia, Slowenia, Spain, Czech Republic, U.K., Norway, Switzerland

- Is a major part in all education programs
- 99 % of the therapists performing personal therapy conduct also psychotherapies with patients.
- They are trained as:
- 73,4% psychodynamic psychotherapy
- 65,1% Psychoanalysis
- 31,9% Behavioural therapies
- 11,1% Rogerian psychotherapy
- 23,3% Others.

- Are there enough psychotherapists for personal therapy?
- 48,7% adequate resources,
- 20,3% higher number is needed
- 2,3% in favour for decreasing number

- When does personal therapy start?
- 67 % of the institutes: directly with the beginning of the education program
- 76 % individual setting (57 % of all institutes compulsory)
- Average amount of hours: 197

#### Large variation in amount of sessions that are compulsory

- 25,8% of the institutes require at least 100 sessions
- 13,5% of the institutes require at least 200 sessions
- 17% of the institutes require at least 350 sessions
- 8% of the institutes require up till 500 sessions
- Some require 600, 800 or 900 sessions individual personal therapy

Education programmes in which individual personal therapy is included:

- Psychodynamic psychotherapy: 100 %
- Psychodynamic child psychotherapy: 95 %
- CBT: 61 %
- Child CBT: 67 %

- As group therapy:
- Psychodynamic psychotherapy: 7 %
- Psychodynamic child psychotherapy: 17 %
- CBT: 61 %
- Child CBT: 65 %

- Frequency (sessions per week):
- Psychodynamic psychotherapy: 2,6
- CBT: 0,8

- Summary 1
- Personal Therapy starts immediately after the beginning of the education program.
- 75 % of all institutes offer individual personal therapy (in 50 % of the education compulsory).

Is the amount of sessions of personal therapy sufficient?

Individual setting	Group setting

•	Too much	4,1 %	9,3 %
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 51 % of the experts vote for no change and 48 % vote for expanding the amount of self experience.

Is the amount of sessions of personal therapy sufficient? –
 Behavioural therapy education

		Individual setting	Group setting
•	Too much	3,7 %	10 %
•	Adequate	34,4 %	59,6 %
•	Insufficient	44,2 %	23,1 %

Is the amount of sessions of personal therapy sufficient? –
 Psychodynamic psychotherapy education

		Individual setting	Group setting
•	Too much	8,9 %	11,1 %
•	Adequate	65,6 %	47,8 %
•	Insufficient	18,9 %	22,2 %

- Teachers in favour of a mixed model (individual and group setting)
- Psychoanalytic psychotherapy: 70,8 %
- Psychodynamic psychotherapy: 45,7 %
- Behavioural therapiy: 28,9 %
- Rogerian psychotherapy: 15,7 %

 Wished number of sessions of personal therapy (mean):

		Individual	group	mixed
•	PA:	400	40	98+300
•	PDT:	235	37	86+179
•	BT:	77	65	88+72
•	RP:	83	22	68+88

- Summary 2
- Amount of self experience in group setting is seen as sufficient.
- Individual self experience is often seen as too short
- In most cases a combination of group- and individual self experience is favoured.

# Personal therapy (Problems)

- Problems with self experience in the education programs
- Most frequent answers of 600 therapists conduction self experience in psychotherapy education programs:

# Personal therapy (problems)

- No self experience,
- Not enough sessions,
- Financial burden,
- Not enough relevance in the overall context of the education,
- Anxieties of the students,

# Personal therapy (problems)

- Underqualified therapists,
- Dependencies within the institute (several different roles),
- Lack of neutrality and confidentiality in small training institutes,
- Overlap of different tasks for individual teachers,
- Lack of distribution over the entire education,

# Personal therapy (problems)

- Lack of motivation of students,
- Groups are too large,
- Lack of qualified training therapists,
- Unclear rules for how to deal with ineligible students
- Lack of life- and professional experiences due to young age of students.

#### Effects (due to directors of education programs):

- Very effective: 71,2 %
- Effective: 9,6 %
- Reasonably effective: 9,6 %
- Sufficiently effective: 9,6 %

Integration into education program (teachers): (Likert scale 1-5):

- Mean: 3,9 = good
- SD: 1,0

How helpful is individual personal therapy according to the students:

- Not at all helpful: 1,8 %
- A bit helpful: 4,4 %
- Helpful to some extent: 7,4 %
- Quite helpful: 16,8 %
- Very helpful: 70 %

How satisfied are students with their self experience:

- Not at all satisfied: 8 %
- A bit to some extent satisfied: 9 %
- Quite satisfied:20,1 %
- Very much satisfied: 60 %

How useful experience students their personal therapy? (5 point Likert-scale)

- Individual therapy (mean): 3,5
- Group therapy (mean): 3,3
- 37,1 % of the students think that their personal therapy is insufficient (BT: 44,2%, PDT: 18,9%).

#### Possibilities for improvement:

- Increase of number of sessions
- Compulsory individual setting
- Syllabuses for self experience
- Better payment
- Separation of self experience and supervision

#### Possibilities for improvement:

- Individualized amount of self experience
- External self experience
- No role confusion
- Smaller groups
- During the entire education

#### Summary 4:

- There is no evidence that speaks against personal therapy.
- 2. On the contrary: all clinical and educational expertise as well as the judgements of experts, teachers, and students point out the necessity of personal psychotherapy as an essential part of all psychotherapy education.
- 3. However, there is a significant lack of empirical research.

# SLUT!