

Resources for the Prevention of Sexual Abuse



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“Exploring the Impact of Time and Experience on Client Outcomes”

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QUESTION: Do Psychotherapists Improve with Time and Experience?

RESEARCH:

This study explored whether increased therapist experience is linked to improve outcomes for the client. Simon B. Goldberg, Scott D. Miller, Stevan Lars Nielsen, Tony Rousmaniere, Jason Whipple, and William T. Hoyt studied 6,591 patients seen in individual psychotherapy by 170 therapists over nearly five years. Previous studies have found that more therapist experience is modestly linked with lower rates of dropout and better outcomes in psychotherapy. However, to date, no large-scale longitudinal study has assessed whether the professional experience of the therapist would improve outcomes over time.

The sample overall showed that the therapy used was effective with a significant drop in psychological systems over the course of treatment. The analyses also showed that therapists did not improve with more experience, as measured by either time or the number of people with whom they had worked. Surprisingly, the results suggest that therapists become slightly less effective over time (although the authors note that the magnitude of the decrease in effectiveness was extremely small). The authors also note that these results contrast with clinician self-reported experiences with clients. The majority of practitioners experience themselves as developing professionally over their careers and that those with 15 or more years in practice were significantly more likely to perceive that their work with patients was more effective.

While this is first study of this magnitude, there were also some limitations that were noted. For example, as time progressed therapists may have received less training, increased workload and more difficult patients resulting in poorer outcomes even as their skills were improving. No single standardized treatment intervention was provided to patients so there was no clear path to how therapist skills could be operationalized. They also noted that the quality of experience may be a better indicator than the quantity of experience since nearly 40% improved their outcomes over time.

BOTTOM LINE: Overall, therapists did not significantly improve with more experience, measured as either time or number of cases.

IMPLICATIONS FOR PROFESSIONALS:

Effective treatment of people who sexually abuse is a matter of public safety as well as a means to help individual clients manage their lives. These finding suggest that practitioners can easily be lulled into a sense of complacency about their effectiveness; confidence can improve across one's career, but effectiveness may not.

Fortunately, the authors provide many ideas for professional development. They include:

- Setting small process and outcome goals based on client-specific information
- Creating social experiments in naturalistic settings to test, recalibrate, and improve (for example, generating possible responses to client interactions, selecting one, testing it, and then exploring how well it worked)
- Enhance professional environments for targeted learning (e.g., set goals related to increasing effectiveness and not just preventing mistakes)
- Using case vignettes to improve interactions with clients (e.g., practicing responses to typical and/or specific client statements)

IMPLICATIONS FOR THE FIELD:

It is easy to talk about professional development in our field; accomplishing it is more difficult. These findings point to the importance of always maintaining a goal of being more effective tomorrow than we are today. While there are many resources outside of our field for becoming more effective at a given endeavor (e.g., Cal Newport's book *Deep Work*), this study shows that part of professional self-care can be to move beyond efforts aimed at professional longevity to an active focus on specific competencies.

Abstract:

Objective: Psychotherapy researchers have long questioned whether increased therapist experience is linked to improved outcomes. Despite numerous cross-sectional studies examining this question, no large-scale longitudinal study has assessed within-therapist changes in outcomes over time.

Method: The present study examined changes in psychotherapists' outcomes over time using a large, longitudinal, naturalistic psychotherapy data set. The sample included 6,591 patients seen in individual psychotherapy by 170 therapists who had on average 4.73 years of data in the data set (range _ 0.44 to 17.93 years). Patient-level outcomes were examined using the Outcome Questionnaire-45 and a standardized metric of change (prepost *d*). Two-level multilevel models (patients nested within therapist) were used to

examine the relationship between therapist experience and patient prepost d and early termination. Experience was examined both as chronological time and cumulative patients seen.

Results: Therapists achieved outcomes comparable with benchmarks from clinical trials. However, a very small but statistically significant change in outcome was detected indicating that on the whole, therapists' patient prepost d tended to diminish as experience (time or cases) increases. This small reduction remained when controlling for several patient-level, caseload-level, and therapist-level characteristics, as well as when excluding several types of outliers. Further, therapists were shown to vary significantly across time, with some therapists showing improvement despite the overall tendency for outcomes to decline. In contrast, therapists showed lower rates of early termination as experience increased.

Conclusions: Implications of these findings for the development of expertise in psychotherapy are explored.

Citation:

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