

Research Clinic

An Evaluation of Transactional Analysis, Integrative and Gestalt Psychotherapies and Person Centred Counselling

Introduction

For patients experiencing psychological distress, primary care is often the first point of contact within the NHS. GP intervention includes: usual GP care, medication, psychological intervention or a combination of approaches. In order to establish the effectiveness of these treatment choices a number of research studies compared:

- usual GP care with effects of medication (Bedi, et al., 2000; Rowland, Bower, Mellor-Clark, Heywood, & Hardy, 2000),
- effects of medication and psychological therapies (Bower, Rowland, & Hardy, 2003) and
- Different psychological therapies, primarily CBT, psychodynamic and interpersonal or person centred (Mellor-Clark, Connell, Barkham, & Cummins, 2001; Stiles, Barkham, Mellor-Clark, & Connell, 2008; Stiles, Barkham, Twigg, Mellor-Clark, & Cooper, 2006).

Other humanistic and integrative approaches have not been evaluated in primary care settings even though they are represented in the provision of psychological therapies in primary care, voluntary agencies and private practice. This lack of evidence is becoming particularly important in the context of national policies of clinical governance (Carter, 2005), statutory registration of psychotherapists and counsellors and the IAPT initiative (CSIP, 2008). Approaches more frequently represented in the NHS such as, cognitive behavioural, psychodynamic and person centred have had an opportunity to accumulate more evidence for their effectiveness in those settings. While this does not translate into evidence of being more effective, it challenges other humanistic and integrative approaches to develop their own evaluation and evidence base.

Primary care settings offer primarily brief therapy. Clients who require longer term work are often referred for medium or long term counselling and psychotherapy within the voluntary sector. Clients are usually required to self refer and pay a fee for the service. Most voluntary agencies offer a low cost service. Some of these organisations are in receipt of statutory sector grants, but this is not always the case.



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Voluntary agencies are often staffed by a mix of counselling/psychotherapy students and paid staff.

These services are an important part of the service provision in psychological therapies. However, this provision is mostly under-researched and historically underfunded. Their work with clients is often not recognised by the statutory agencies.

The wider professional climate calls for evaluation of individual therapeutic orientations, despite the outcomes of meta-analytic studies which show that there is no significant difference in the efficacy between different psychotherapeutic approaches (Lambert & Bergin, 1994; Wampold, 2001). The meta-analytic findings, although consistent, do not offer specific tools to assess effectiveness of individual approaches and develop policy decisions about them. Even though the national strategy of clinical governance drives the routine outcome evaluation and the development of evidence based practice, there is still a question about the optimal methodologies for this type of research (Hemmings, 2000; Nathan, Stuart, & Dolan, 2000).

Efficacy studies using randomised control trials, have high internal validity but limited clinical applicability. They use narrow diagnostic definitions (usually a single diagnostic category such as depression or anxiety) and foci of evaluation (measuring reduction in chosen symptoms), which improve internal validity and replication of the studies, but miss the realities of clinical contexts where patients present with multiple issues and overlapping diagnostic categories, with no opportunity for randomisation. On the other hand, naturalistic studies, while retaining external validity (or clinical applicability), have a number of methodological flaws such as: attrition of data, lack of definition in assessment for treatment and a lack of clarity about the adherence to the therapeutic approach (Clark, Fairburn, & Wessely, 2008; Nathan, et al., 2000).

In order to address some of the imbalance in the effectiveness data this project will develop multisite research clinics in non statutory clinical settings and develop an ongoing evaluation programme.

These research clinics will conduct ongoing, clinically relevant, naturalistic, evaluative research into the effectiveness of integrative, transactional analysis, gestalt and person centred orientations.

Research Aims

The aim of the research is to evaluate effectiveness of humanistic psychotherapies and counselling approaches in medium term (up to six months) settings within the existing non statutory clinical settings: Metanoia Counselling and Psychotherapy Service, at



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Metanoia Institute in London, the CEP Eric Berne Centre in Barcelona (Spain), The Bios Centre in Bilbao (Spain), the Aleces Institute in Lugo (Spain) and the Institute for Psychosocial Studies “Xoan Vicente Junqueira (University of Corunna, Spain). The research clinic will be an ongoing feature of the existing services and the data will be analysed annually.

The setting

- MCPS (Metanoia Counselling and Psychotherapy Service) is a low cost agency within a psychotherapy and counselling training institute. Metanoia Institute offers training leading to academic and professional qualifications, at both graduate and post graduate levels, in Transactional Analysis, Integrative Psychotherapy, Integrative Psychotherapy and Counselling Psychology, Gestalt psychotherapy and Person Centred counselling. All the courses are accredited by the relevant national and international professional bodies as well as the Middlesex University in London. During their clinical training students engage in clinical placements. MCPS is an internal placement service for students, as well as the low cost clinical provider to the general public. Practitioners provide a service for up to 3 clients per week. .
- The Spanish part of the research will be coordinated by Alecés and the Institute for Psychosocial Studies (Spain). As Spanish psychotherapy centres are smaller in size, the research will be conducted in several psychotherapy settings, following the same format and methodology. The following centres will be included in the research:
 - Alecés (Lugo, Spain) is a private institute offering both therapeutic services and training in psychotherapy, in Transactional Analysis, Integrative Psychotherapy, and Brainspotting. For this project, only Transactional Analysis and Integrative approaches will be evaluated.
 - CEP Eric Berne (Barcelona, Spain) is a private institute offering training and psychotherapy in Transactional Analysis.
 - BIOS (Bilbao, Spain) is a private institute also offering both training and psychotherapy in Transactional Analysis.

All the participating centres offer training accredited by the relevant national and international professional bodies, and are private providers of psychotherapy. The research will be coordinated and supervised by the University of Corunna, thus ensuring adequate methodological support. About 200 clients will be a part of this research, corresponding to 17 therapists. The Spanish network will include a combination of experienced practitioners and students in psychotherapy training.

Research Design

The research design aims to integrate features of efficacy and effectiveness studies (Nathan, et al., 2000) in order to achieve optimal methodology for the project. The study will replicate features and some of the evaluative methods used by the IAPT initiative (CSIP, 2008), widening their aims in order to include gestalt, transactional analysis and integrative approaches.

Patients- All patients will be assessed prior to being accepted into the service. The assessor will use the CORE System and in depth clinical interview to decide whether clients can be seen within the service. The assessment format has previously been developed for the service by the Head of Clinical Services at Metanoia Institute, and uses the structure of DSM IV to highlight the presenting issues (such as current symptoms and functioning), developmental history and risk. The assessor will offer clients an opportunity to take part in research and refer them to an individual practitioner. The assessment will not separate the clients into single diagnostic categories, as this is not the usual practice in clinical settings. Each patient then will be assessed further at the first session using a battery of standard assessment measures. The exclusion criteria to the service will be based on the:

- severity or risk;
- complexity of the presenting problems (clients with severe personality disorders and psychotic symptoms will be referred to statutory mental health services, where they will receive more appropriate care)
- motivation for treatment and ability for insight

Written information about the research will be given to patients prior to the intake. At the assessment session, practitioners will answer any further questions about the research, and seek consent. It is envisaged that a percentage of clients will drop out of the service. To ensure that the data is as complete as possible each session will be monitored using the battery of measures.

Clients who decide not to take part in research, or withdraw from it during treatment will continue to receive the service.

Practitioners

- MCPS. Practitioners will be students in gestalt, transactional analysis; person centred counselling and counselling psychology/integrative psychotherapy at Metanoia Institute. All students will have clinical supervision with approved

specialist supervisors for that theoretical approach, in a ratio of 1 hour of clinical supervision to 4 hours of clinical work.

- BIOS. Practitioners will be psychotherapists with at least 3 years of experience in integrative psychotherapy.
- Alecés. Practitioners will include one experienced psychotherapist and 2 student psychotherapists in integrative and transactional analysis psychotherapy.
- CEP Eric Berne. Practitioners will be both experienced psychotherapists and students in transactional analysis psychotherapy. Student psychotherapists will receive clinical supervision.

Adherence to the theoretical approaches

Each theoretical approach will be applied using the core skills, theoretical knowledge and attitudes defined in the Handbooks for each course. The courses at Metanoia Institute have been validated by Middlesex University and accredited by the national umbrella bodies – UKCP, BACP and BPS.

All therapists on the Spanish side have been trained in accredited programs throughout Spain.

All sessions will be audio-recorded. Clinical supervisors will listen to these recordings and assess after every four sessions whether the approach used matched the theoretical approach, as defined by the course Handbooks.

Clinical Evaluation Measures

Beck's Depression Inventory – at the beginning, half way through and the end of therapy.

CORE 34 - at the beginning and at the end of therapy

Patient Health Questionnaire (PHQ-9) - post each session

General Anxiety Measure (GAD -7) - post each session

CORE 10 – post each session

Working Alliance Inventory – post each session

Research Analysis

Research Analysis will be undertaken at each site by an independent researcher. Data from different sites will be compared in the final analysis.

Statistical Analysis:

- Evaluation of effectiveness. All quantitative outcome data will be entered into the SPSS database and analysed in relation to change indicators. Measures will be correlated.
- Effectiveness of theoretical approaches. Outcomes for each orientation will be evaluated separately and correlated.

Adherence to the model:

- Supervisor's assessment based on the audio recordings of the sessions and clinical notes kept by the practitioners will be used to arrive at the overall rating of the adequacy of the treatment and adherence to the model. Adherence to the model will be analysed in relation to the effectiveness.

In addition, other post hoc analysis may be conducted on the basis of the questions arising from the primary analysis.

Ethics

The project will be subject to ethical approval of Metanoia Institute Research Committee and the Ethics Committee of the University of Corunna and comply with the professional research ethical codes by the BACP and BPS and the Spanish College of Psychologists.

Research Outcomes

It is envisaged that this study will offer a template for developing research clinics within the non statutory sector with the aim of developing evidence base for the effectiveness and use of these theoretical approaches in clinical settings.

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Project Leaders
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