

The Great Debate

What Makes Psychotherapy Work

Bruce E. Wampold, Ph.D., ABPP
Emeritus Professor of Counseling Psychology
University of Wisconsin-- Madison



Former Director
Research Institute
Modum Bad Psychiatric Center
Vikersund Norway

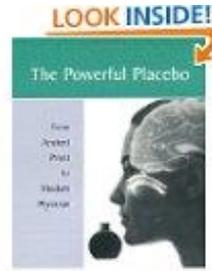
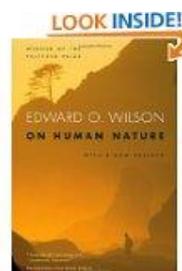
Co-founder
Chief Scientist



Psychotherapy: How can this possibly work?



Healing in a social context



- Ants do it! (and bees)
- Bats do(n't) do it (social quarantine)
- Facial Expression of Pain
- Human social healing practices

The Social Brain

Social Cognition

REVIEW

Evolution in the Social Brain

R. I. M. Dunbar* and Susanne Shultz

The evolution of unusually large brains in some groups of animals, notably primates, has long been a puzzle. Although early explanations tended to emphasize the brain's role in sensory or technical competence (foraging skills, innovations, and way-finding), the balance of evidence now clearly favors the suggestion that it was the computational demands of living in large, complex societies that selected for large brains. However, recent analyses suggest that it may have been the particular demands of the more intense forms of pairbonding that was the critical factor that triggered this evolutionary development. This may explain why primate sociality seems to be so different from that found in most other birds and mammals: Primate sociality is based on bonded relationships of a kind that are found only in pairbonds in other taxa.

brain evolution against the steep selection gradient created by the high costs of brain tissue. In this respect, most of the ecological hypotheses proposed to date also fail. None can explain why primates (which have especially large brains for body mass, even by mammal standards) need brains that are so much larger than, say, squirrels, to cope with what are essentially the same foraging decisions.

As an alternative, Byrne and Whiten proposed the Machiavellian Intelligence hypothesis (9) in the late 1980s: They argued that what differentiates primates from all other species (and, hence, what might account for their especially large brains) was the complexity of their social lives. Unfortunately, the term "Machiavellian" was widely interpreted as implying deceit, manipulation, and connivance—traits that most

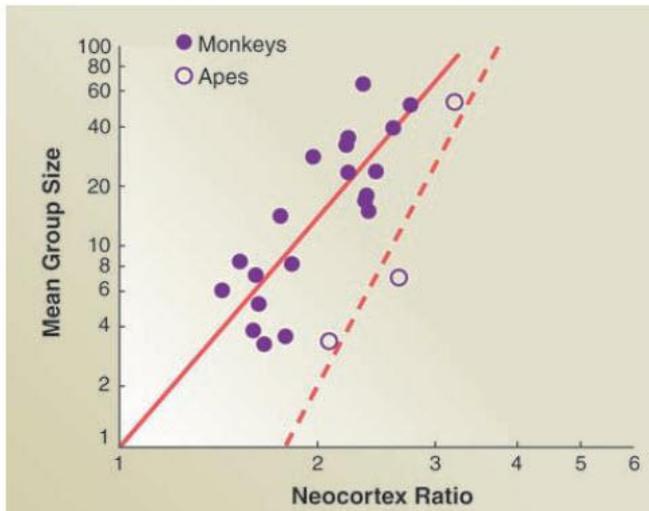
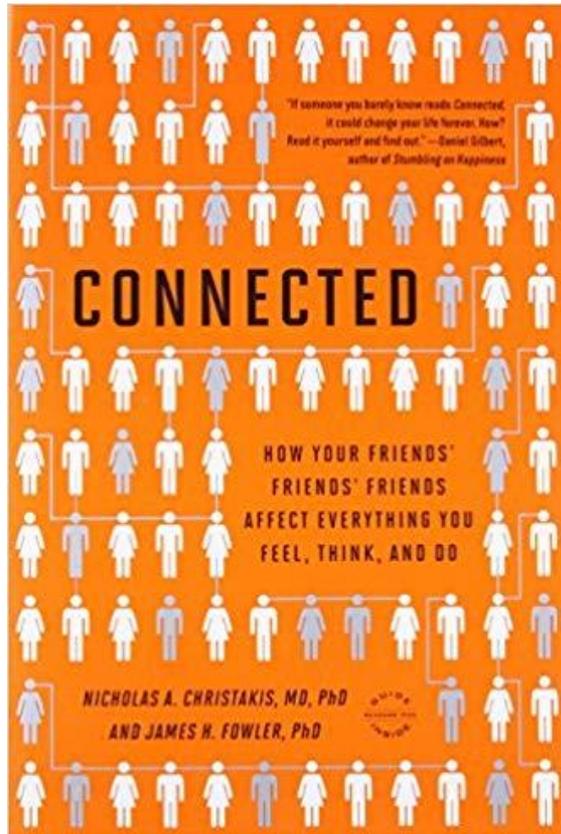


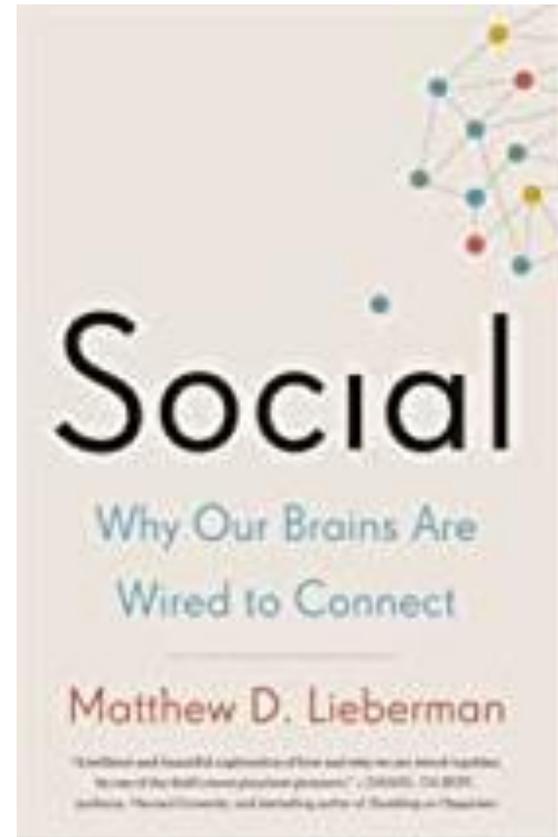
Fig. 1. Many primates, like these baboons in the Amboseli basin of Kenya, live in large and complex social groups. Baboons have been studied at multiple sites across Africa for decades.

Two books on social brains...

- Social contagion



- Neuroscience



What we know about psychotherapy

- Psychotherapy is effective
- Demonstrated in RCTs and in practice
- As effective as medications
- Longer lasting, fewer side effects, less resistant to additional courses
- NNT = 3 (compared to natural hx)
 - There is room for improvement!
 - Therapists are not aware of failures
- What makes psychotherapy work?



Overview

Understand the nature of the common factors and how they utilize human evolved social healing as a basis

Be knowledgeable of the research evidence for the common factors and specific ingredients

Understand how the common factors interact with specific ingredients to produce change

Three Pathways to Healing...

The CARE Pathway

Caring, Attentive, Real & Empathic

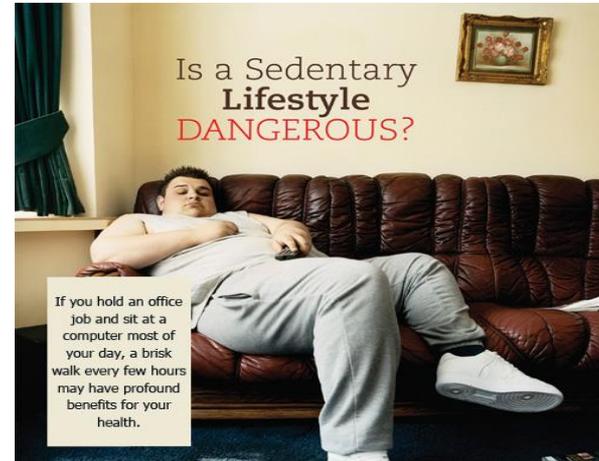
- Many constructs:
 - Support
 - Empathy
 - Caring
 - Understanding
 - Reassurance
 - Trust
 - Warmth
 - Genuineness
- How is CARE therapeutic?

Risks for mortality

Obesity



Lack of Exercise



Pollution



Smoking

Loneliness



Psychotherapy provides a human connection

- Reduces loneliness
- Uniquely enduring
- Emotional regulation



Emotional Coregulation in Close Relationships

Emily A. Butler

Ashley K. Randall

Department of Family Studies and Human Development, University of Arizona, USA

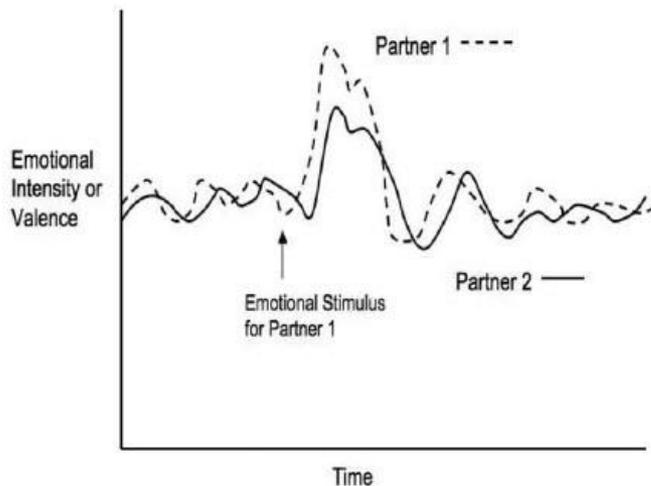
Bidirectional linkage of oscillating emotional channels (subjective experience, expressive behavior, and autonomic physiology) between partners, which contributes to emotional and physiological stability for both partners in a close relationship.

Coregulation

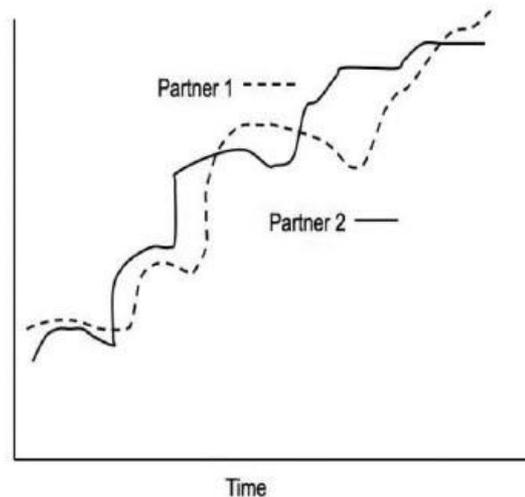
Negative reciprocity
Social contagion
Transmission

No correlation
May buffer

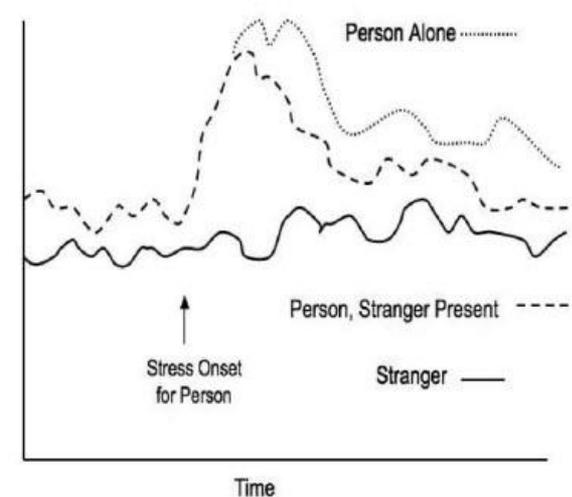
A. Coregulation



B. Morphogenic Process



C. Stress Buffering



Coregulation occurs when there is mutual trust

Emotional and physical well being:
Dynamic patterns of organized variability (allostasis)

Coregulation in psychotherapy

Psychotherapy Research, 2019
<https://doi.org/10.1080/10503307.2019.1661541>



EMPIRICAL PAPER

Coregulation of therapist and client emotion during psychotherapy

CHRISTINA S. SOMA¹, BRIAN R. W. BAUCOM², BO XIAO³, JONATHAN E. BUTNER²,
PETER HILPERT⁴, SHRIKANTH NARAYANAN³, DAVID C. ATKINS⁵, & ZAC E. IMEL¹

¹*Department of Educational Psychology, University of Utah, Salt Lake City, UT, USA;* ²*Department of Psychology, University of Utah, Salt Lake City, UT, USA;* ³*Viterbi School of Engineering, University of Southern California, Los Angeles, CA, USA;* ⁴*School of Psychology, University of Surrey, Guilford, UK* & ⁵*Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA, USA*

(Received 26 November 2018; revised 20 August 2019; accepted 20 August 2019)



© 2020 American Psychological Association
ISSN: 0022-0167

Journal of Counseling Psychology

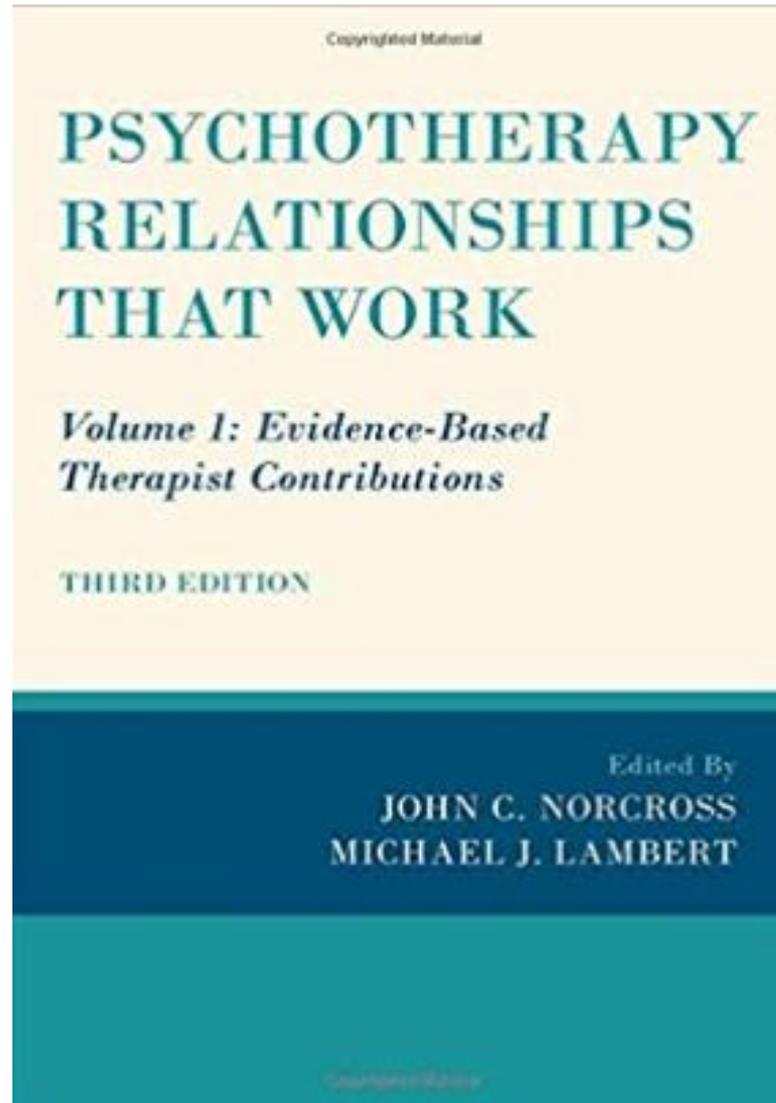
2020, Vol. 67, No. 3, 337–348
<http://dx.doi.org/10.1037/cou0000405>

Investigating Coregulation of Emotional Arousal During Exposure-Based CBT Using Vocal Encoding and Actor–Partner Interdependence Models

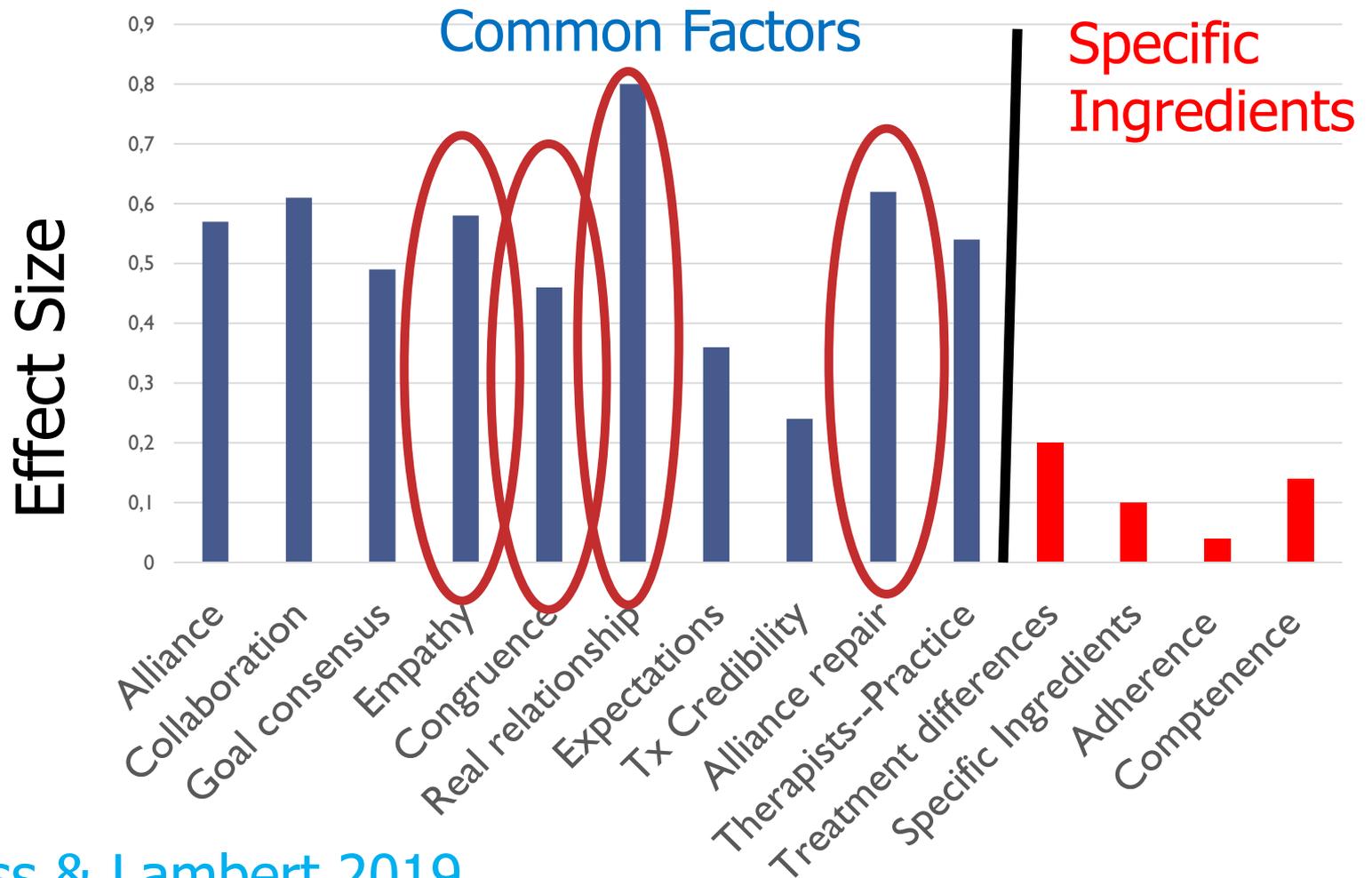
Gesine Wieder
Dresden University of Technology

Travis J. Wiltshire
University of Southern Denmark and Tilburg University

Evidence for Relationship



Science: Empathy, real relationship, congruence



EXPECTANCY Pathway

- We learned this was dangerous →



- Classical conditioning?
- Vicarious learning?
- Evolved to avoid electrical sockets?
- **Verbal persuasion with *trusted* others!**

Expectation

- Expectation influence on well being
- Created through verbal persuasion
- Placebo effects

Placebos—The amazing influence of the mind

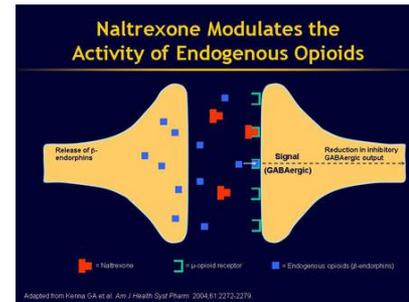


Nothing works better!

For pain, Parkinson's disease, irritable bowel syndrome, depression, anxiety, fitness, taste, athletic performance....

Pain

- Subjective reports
- Endogenous opioids



- Awareness of delivery
- Inoculations, size, price, color....

Satiation (Crum et al. 2011)

- Presented as “indulgent” or “sensible”
- Actually 380 Calorie
- Indulgent more filling
- Greater decline in ghrelin (hunger hormone) in indulgent condition



versus



620 Calorie
“Indulgent”

140 Calorie
“Sensible”

Fitness (Crum et al. 2007)

- Randomly assigned
- Given information... or not
- No differences in activity in 4 weeks
- Informed group decreased
 - Weight
 - Blood pressure
 - Body mass index
 - Waist to hip ratio



Versus



Anxiety

Journal of Psychiatric Research 84 (2017) 90–97



ELSEVIER

Contents lists available at [ScienceDirect](#)

Journal of Psychiatric Research

journal homepage: www.elsevier.com/locate/psychires



Specific expectancies are associated with symptomatic outcomes and side effect burden in a trial of chamomile extract for generalized anxiety disorder

John R. Keefe ^a, Jay Amsterdam ^b, Qing S. Li ^b, Irene Soeller ^b, Robert DeRubeis ^a, Jun J. Mao ^{c,*}

^a Department of Psychology, School of Arts and Sciences at the University of Pennsylvania, PA, USA

^b Department of Psychiatry, Perelman School of Medicine at the University of Pennsylvania, PA, USA

^c Memorial Sloan-Kettering Cancer Center, NY, USA



Anxiety: Borkovec & Costello, 1993; Brown et al., 2014; Chambless et al., 1997; Kirsch et al., 1983; Newman & Fisher, 2010; Rutherford et al., 2015; Westra et al., 2007

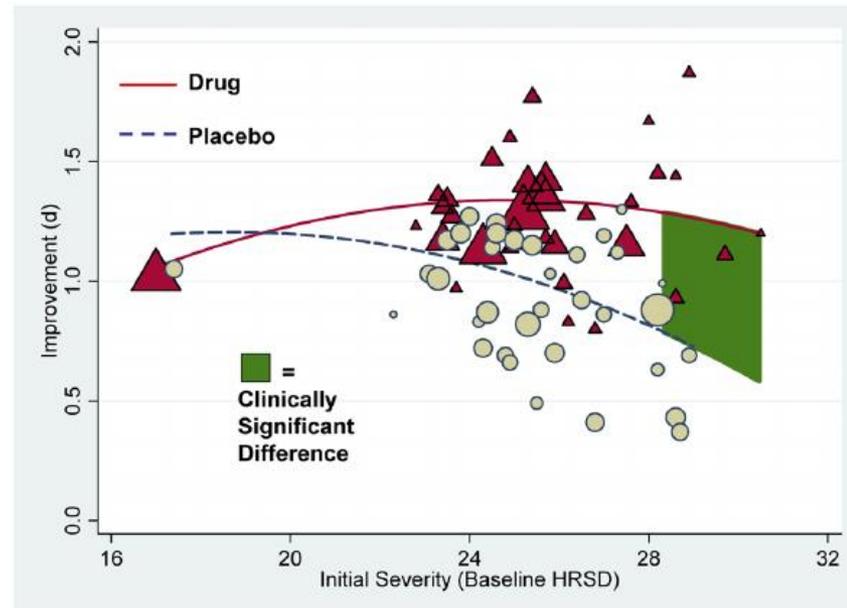
Depression

OPEN ACCESS Freely available online

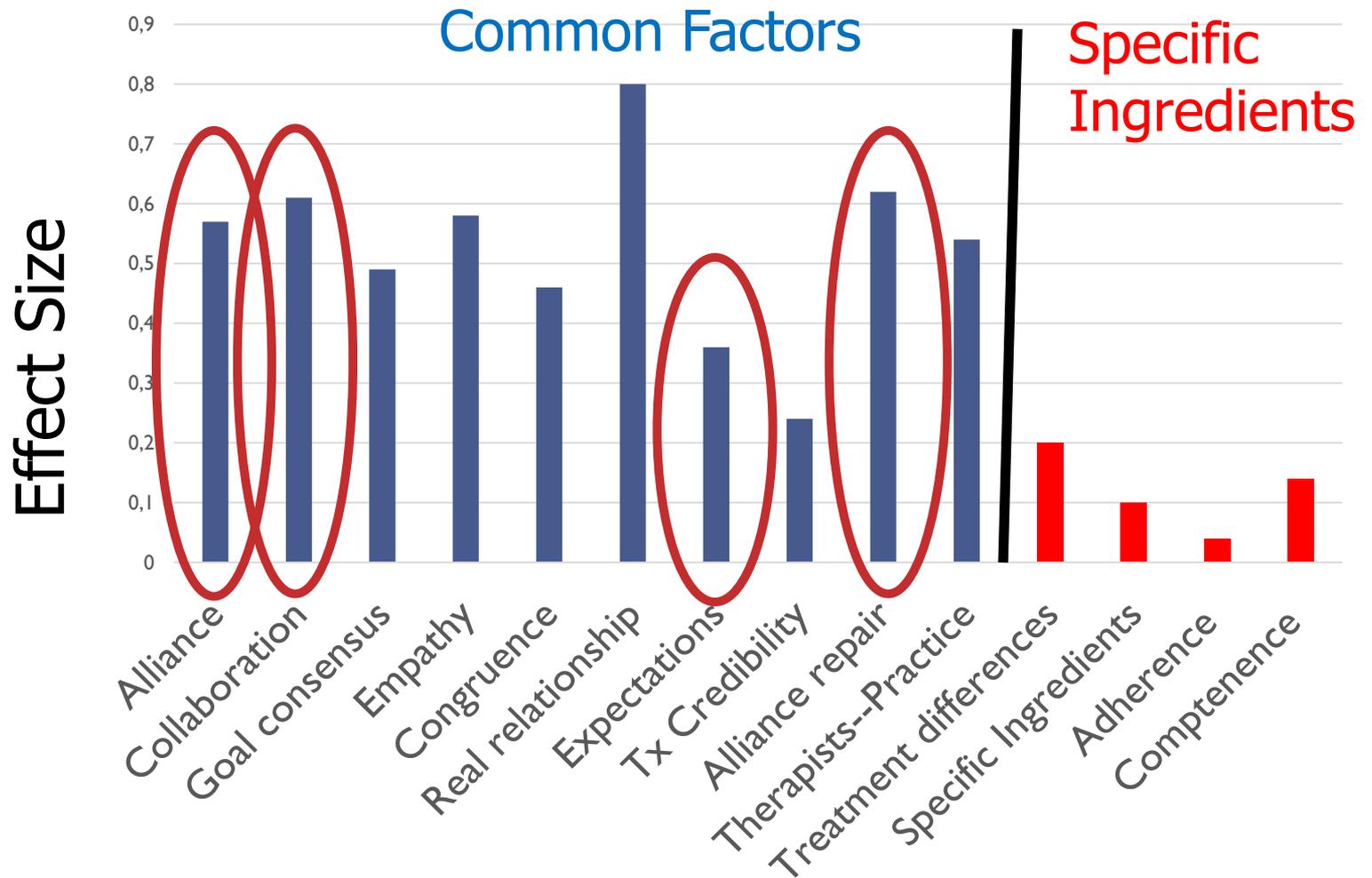
PLOS MEDICINE

Initial Severity and Antidepressant Benefits: A Meta-Analysis of Data Submitted to the Food and Drug Administration

Irving Kirsch^{1*}, Brett J. Deacon², Tania B. Huedo-Medina³, Alan Scoboria⁴, Thomas J. Moore⁵, Blair T. Johnson³



Science: Alliance, Collaboration, Expectations



Effects of relationship in placebo

CARE + EXPECTANCY (Kaptchuk et al., 2008)

- Irritable Bowel Syndrome
- Acupuncture Placebo
- Three conditions
 - Wait list (no placebo)
 - Limited interaction-- <5 minutes
 - Augmented interaction—warm, empathic, caring, but no intervention
- Results...

Results

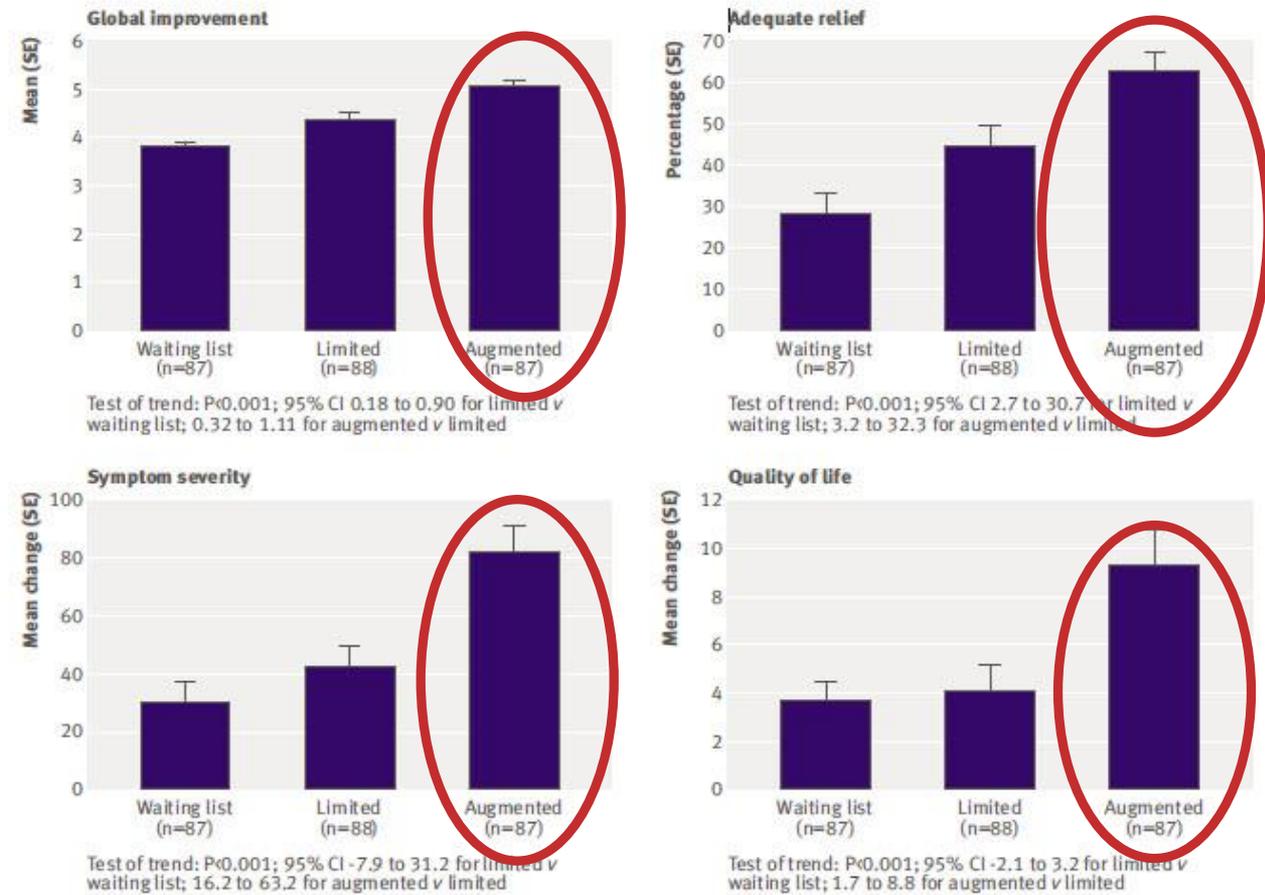
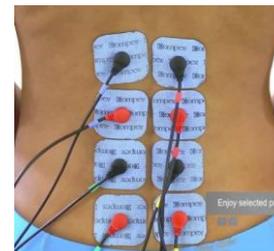
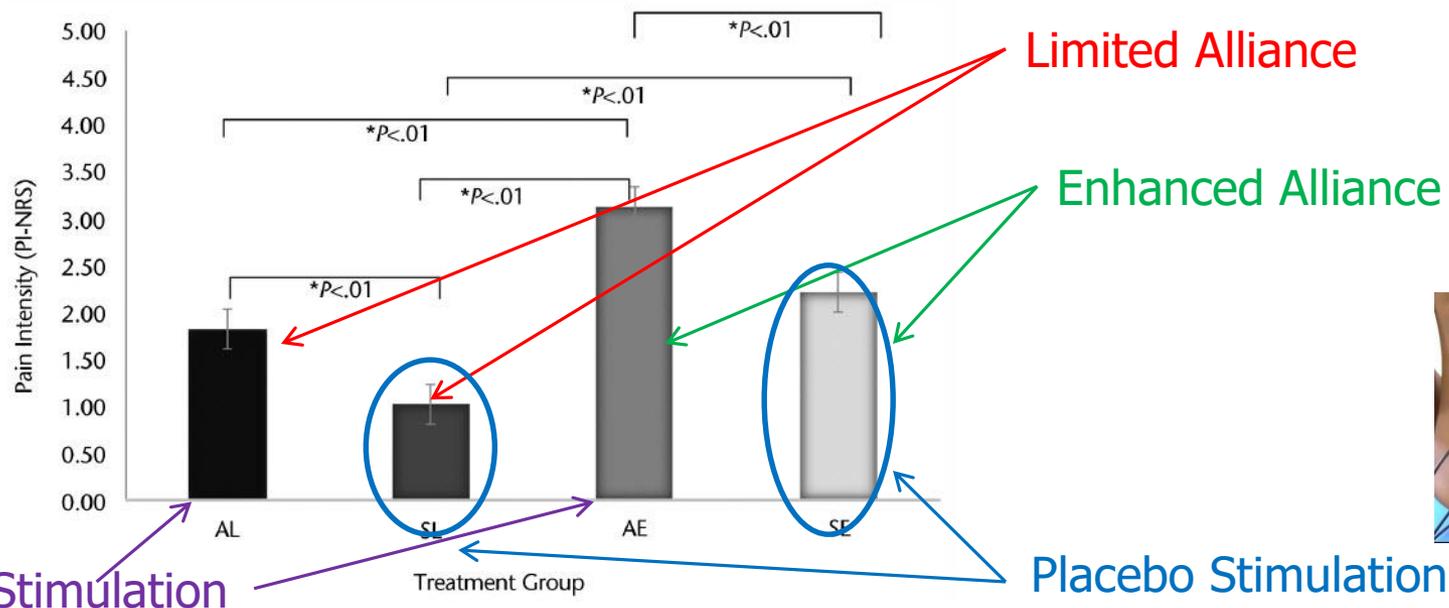


Fig 2 | Outcomes at three week end point

Enhanced Therapeutic Alliance Modulates Pain Intensity and Muscle Pain Sensitivity in Patients With Chronic Low Back Pain: An Experimental Controlled Study

Jorge Fuentes, Susan Armijo-Olivo, Martha Funabashi, Maxi Miciak, Bruce Dick, Sharon Warren, Saifee Rashid, David J. Magee, Douglas P. Gross

J. Fuentes, PT, MScRS, PhD, Department of Physical Therapy, Faculty of Rehabilitation Medicine, University of Alberta, 3-48 Corbett Hall, Edmonton, Alberta, Canada T6G 2G4, and Department of Physical Therapy, Catholic University of Maule, Talca, Chile. Address all correspondence to Mr Fuentes at: jorqef@ualberta.ca.





Harnessing the Placebo Effect: Exploring the Influence of Physician Characteristics on Placebo Response

Lauren C. Howe, J. Parker Goyer, and Alia J. Crum
Stanford University

Placebo administered under:

High or Low Competence

High or Low Warmth



Warmth & Competence



- **High Warmth**

- Ask patient's name
- Eye contact
- Smiling
- Sitting close
- Warm posters on wall

- **Low Warmth**

- Do not patient name
- Minimal eye contact
- Stern
- Distal position
- No poster

- **High Competence**

- Clear confident tone
- No mistake in procedures
- Room well organized

- **Low Competence**

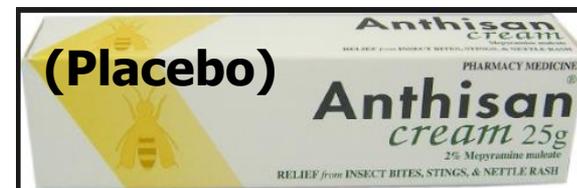
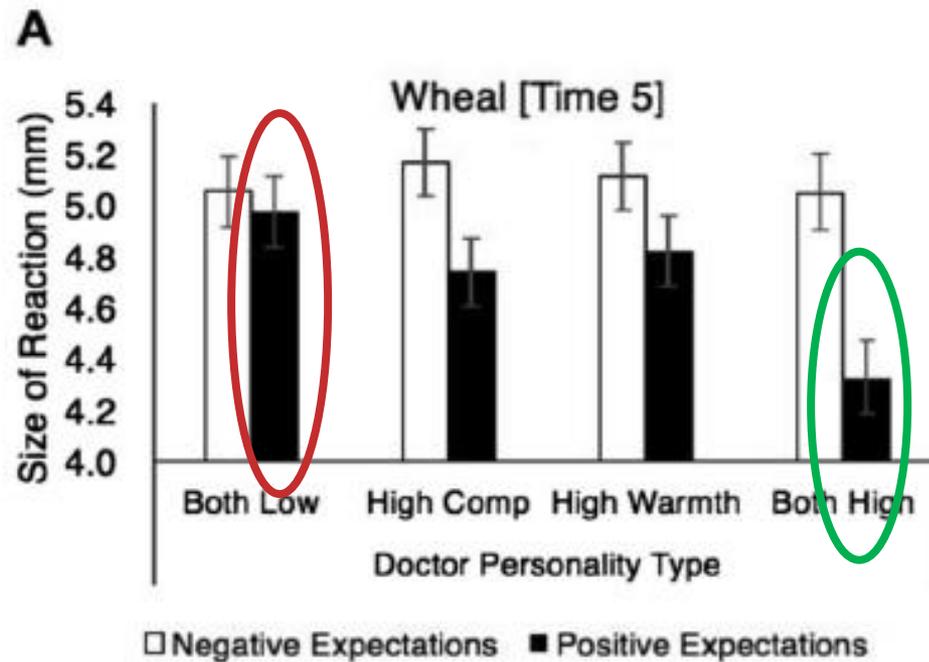
- Not verbally fluent
- Mistakes in procedures
- Messy desk, difficult to find equipment





Harnessing the Placebo Effect: Exploring the Influence of Physician Characteristics on Placebo Response

Lauren C. Howe, J. Parker Goyer, and Alia J. Crum
Stanford University



Warmth and Competence



When Your Doctor “Gets It” and “Gets You”: The Critical Role of Competence and Warmth in the Patient–Provider Interaction

Lauren C. Howe^{1}, Kari A. Leibowitz² and Alia J. Crum^{2*}*

¹ Department of Business Administration, University of Zurich, Zurich, Switzerland, ² Department of Psychology, Stanford University, Stanford, CA, United States



The Influence of the Patient-Clinician Relationship on Healthcare Outcomes: A Systematic Review and Meta-Analysis of Randomized Controlled Trials

John M. Kelley^{1,3*}, Gordon Kraft-Todd¹, Lidia Schapira^{1,4}, Joe Kossowsky^{2,5,6}, Helen Riess¹

¹ Empathy and Relational Science Program, Psychiatry Department, Massachusetts General Hospital/Harvard Medical School, Boston, Massachusetts, United States of America, ² Program in Placebo Studies and the Therapeutic Encounter, Beth Israel Deaconess Medical Center/Harvard Medical School, Boston, Massachusetts, United States of America, ³ Psychology Department, Endicott College, Beverly, Massachusetts, United States of America, ⁴ Department of Medicine, Massachusetts General Hospital, Boston, Massachusetts, United States of America, ⁵ Department of Anesthesiology, Perioperative and Pain Medicine, Boston Children's Hospital/Harvard Medical School, Boston, Massachusetts, United States of America, ⁶ Department of Clinical Psychology & Psychotherapy, University of Basel, Basel, Switzerland

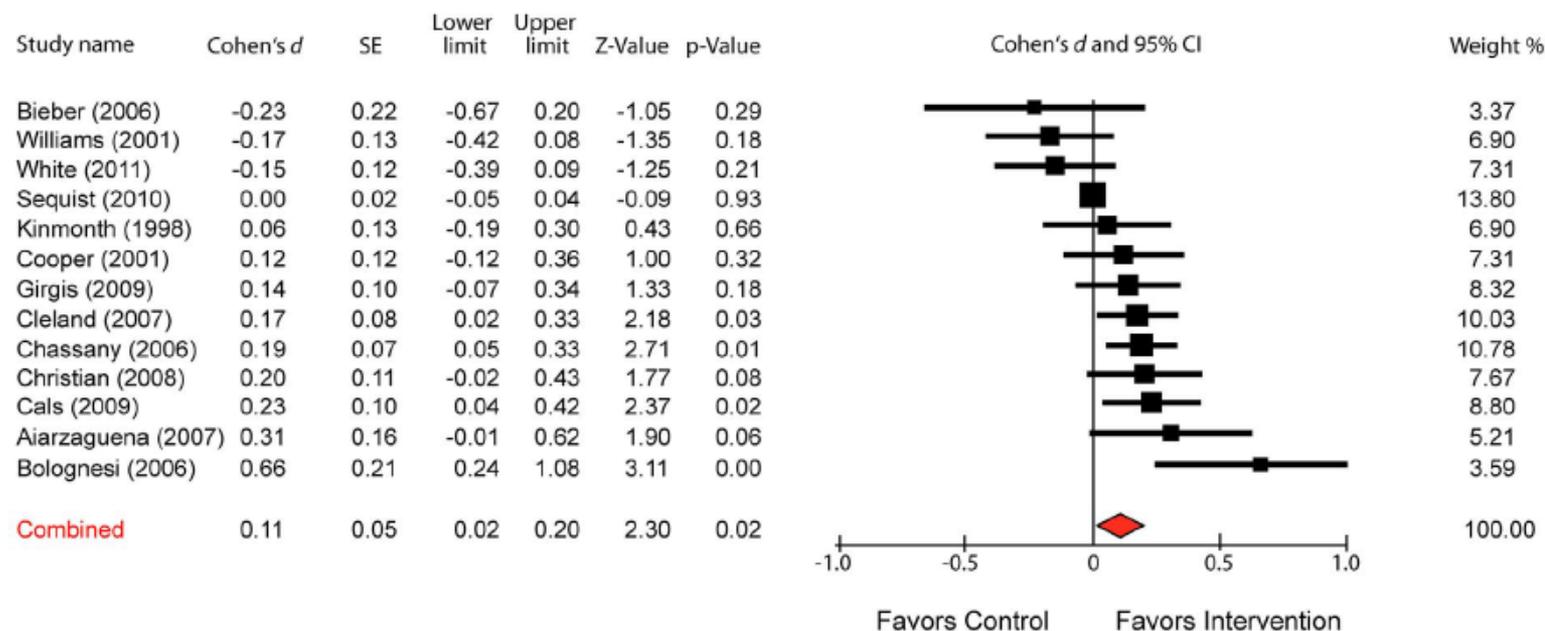


Figure 2. Forest Plot of Cohen's *d* for the Effect of the Patient-Clinician Relationship on Healthcare Outcomes.

Warmth and Competence



Review

TRENDS in Cognitive Sciences Vol.11 No.2

Full text provided by www.sciencedirect.com



Universal dimensions of social cognition: warmth and competence

Susan T. Fiske¹, Amy J.C. Cuddy² and Peter Glick³

¹Department of Psychology, Green Hall, Princeton University, Princeton, NJ 08540, USA

²Management and Organizations Department, Kellogg School of Management, Northwestern University, 2001 Sheridan Road, Evanston, IL 60208, USA

³Psychology Department, Lawrence University, PO Box 599, Appleton, WI 54912, USA

Warmth

Competence

Psychotherapy Research, 2022

Vol. 32, No. 2, 139–150, <https://doi.org/10.1080/10503307.2021.1916640>

 **Routledge**
Taylor & Francis Group

 Check for updates

EMPIRICAL PAPER

It's the therapist and the treatment: The structure of common therapeutic relationship factors

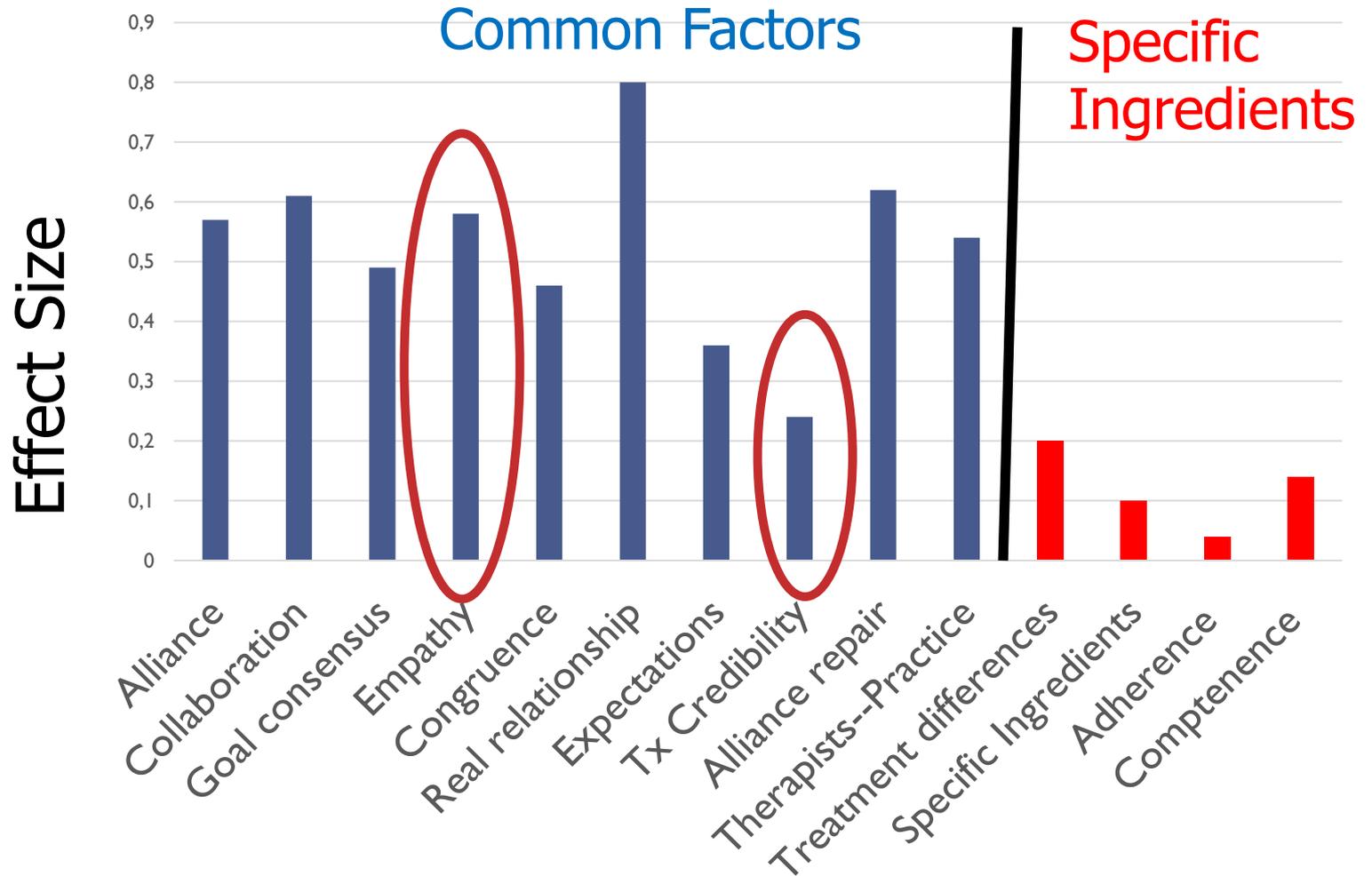
INGVILD FINSRUD ^{1,2}, HELENE A. NISSEN-LIE ², KARIANNE VRABEL ^{1,2},
ANDREAS HØSTMÆLINGEN ², BRUCE E. WAMPOLD ^{1,3}, & PÅL G. ULVENES ^{1,2}

¹*Modum Bad Research Institute, Vikersund, Norway;* ²*Department of Psychology, University of Oslo, Oslo, Norway* &

³*University of Wisconsin-Madison, USA*

(Received 26 November 2020; revised 30 March 2021; accepted 31 March 2021)

Science: Empathy, tx credibility



SPECIFIC Pathway

- In medicine:
 - Antibiotics/Proton pump inhibitor for gastric ulcer
 - Appendectomy for appendicitis
 - mRNA vaccines as prophylaxis for COVID
- In Psychotherapy:
 - Exposure for anxiety
 - Cognitive restructuring for depression
 - Empty chair
- But no differences

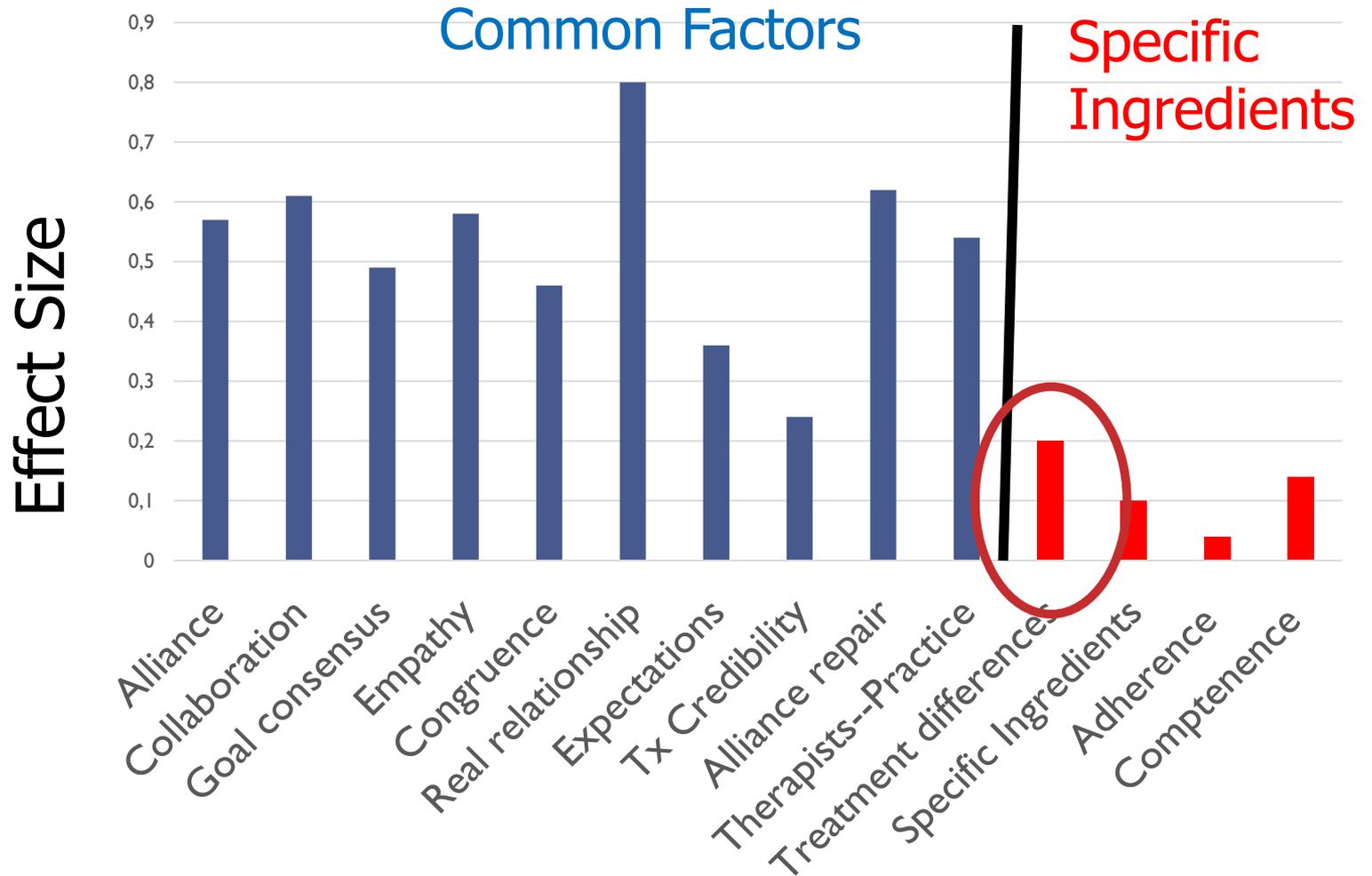
NO DIFFERENCES!

- Depression
- PTSD
- Anxiety (panic, SAD, GAD)
 - Simple phobias (stay tuned)
- Childhood disorders (incl. externalizing Dx)
- Eating disorders
- Alcohol/substance use disorders
- OCD?

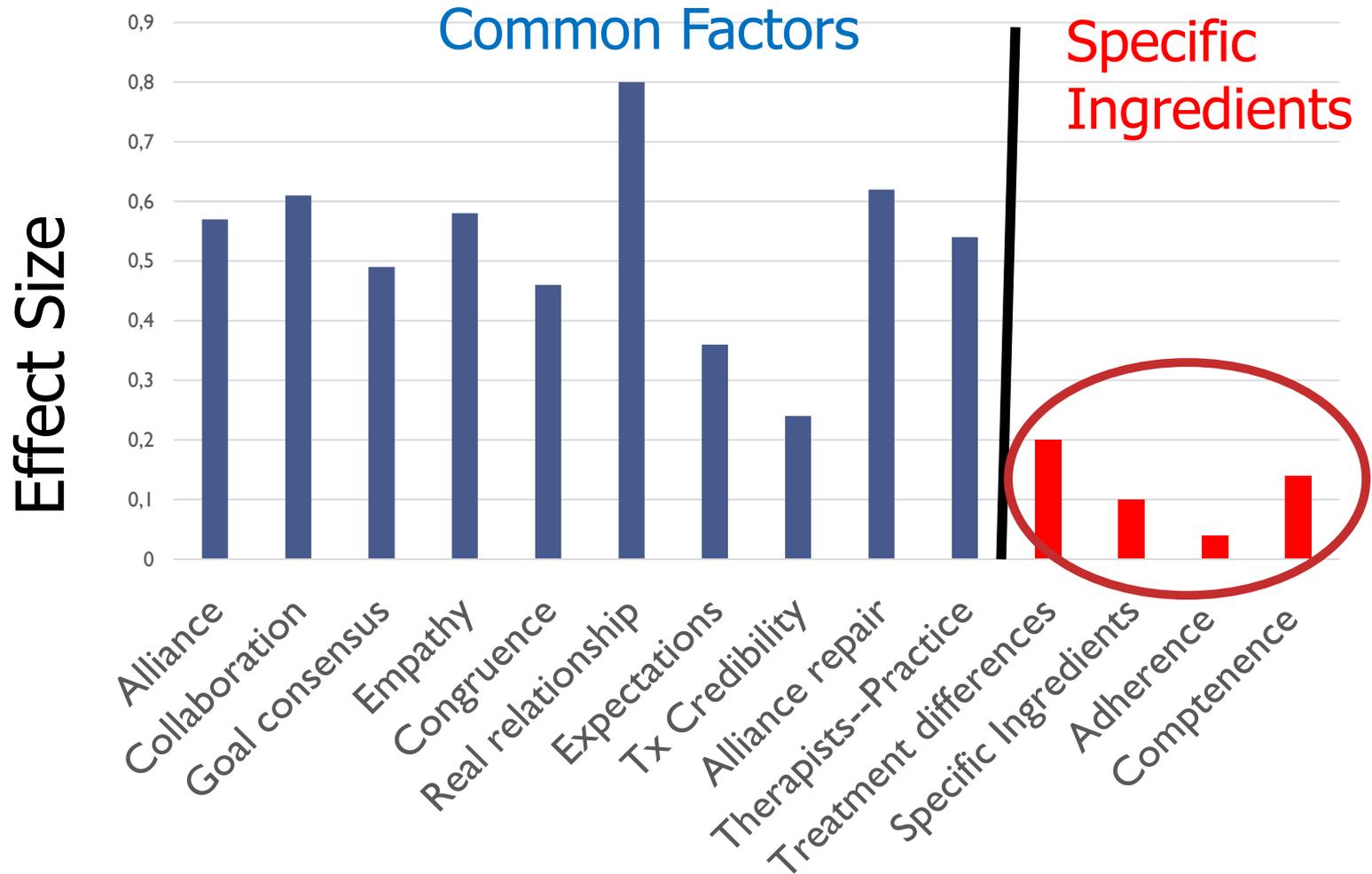
Naturalistic Settings

- Data from NHS in Great Britain
- CBT = PD = Person Centered (stiles et al., 2017)
- Depression: CBT = Generic Counseling (Pybis et al., 2017)
 - But in fewer sessions!
- And many others....

Science: Specific Ingredients



Science: Specific Ingredients



Therapists— the forgotten factor

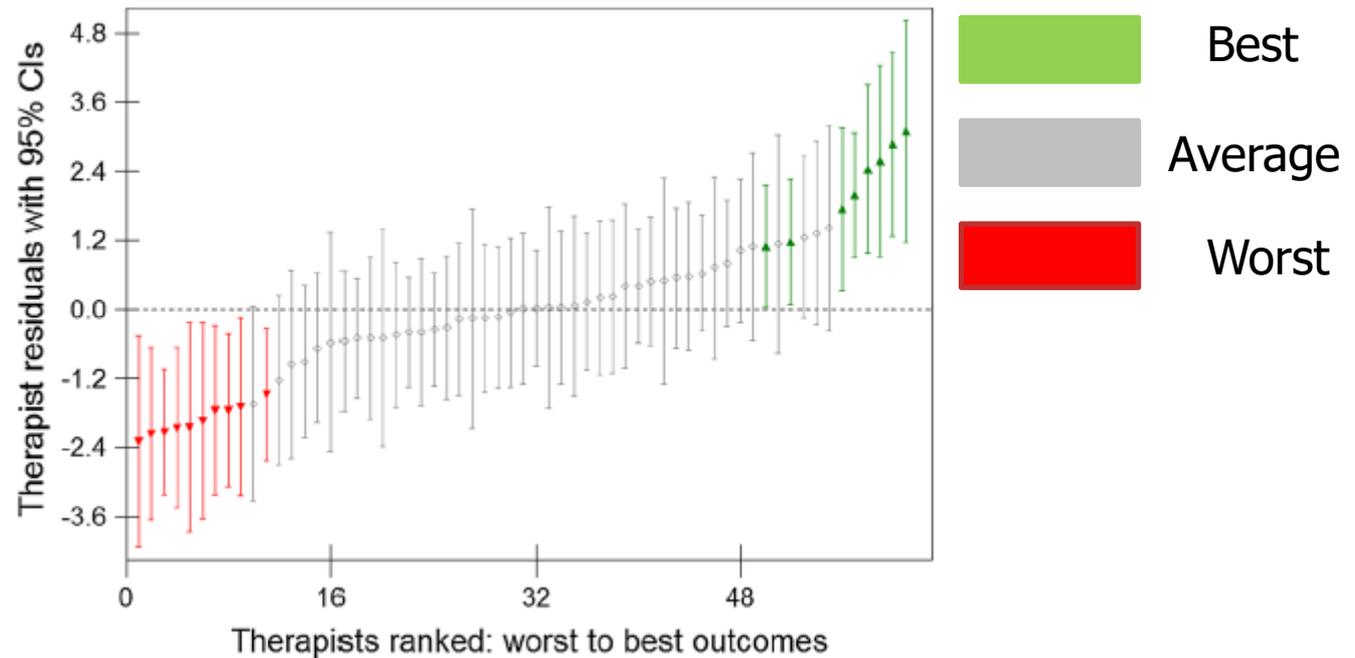
- Definition: Some therapists consistently attain better outcomes than other therapists
- Not due to contribution of patients
- Not due to chance (i.e., **luck!**)
- Compare to effects for other factors (e.g., treatment differences)
- Definition: **OUTCOMES**

Therapist Effects—The Evidence

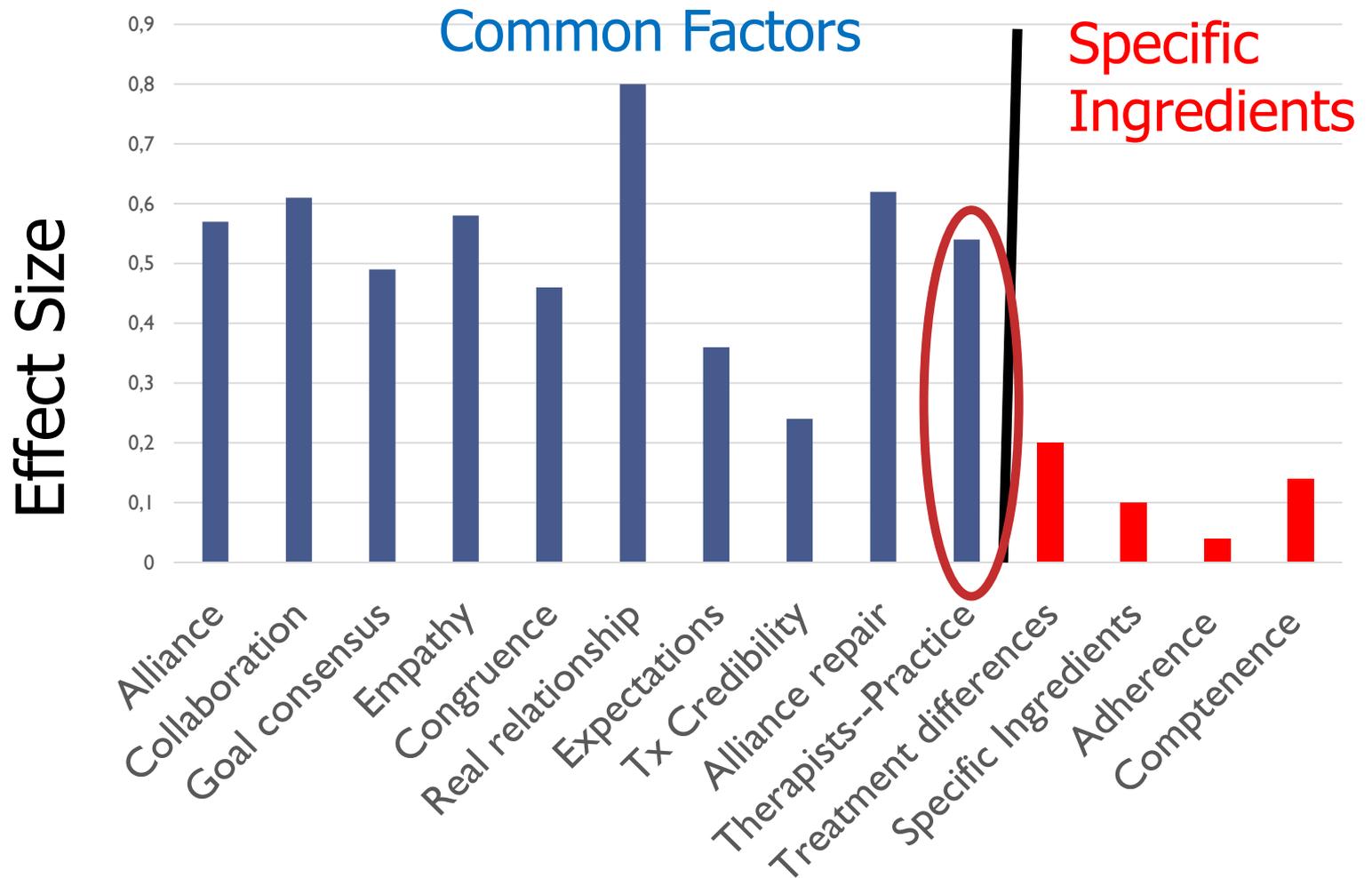
- Naturalistic settings
 - 7% due to therapists (Baldwin & Imel, 2013; Wampold & Owen, 2021)
- Clinical Trials
 - Selected, trained, supervised and monitored
 - 3% of variability due to therapists (Baldwin & Imel, 2013; Wampold & Owen, 2021))

Illustration: therapist effects

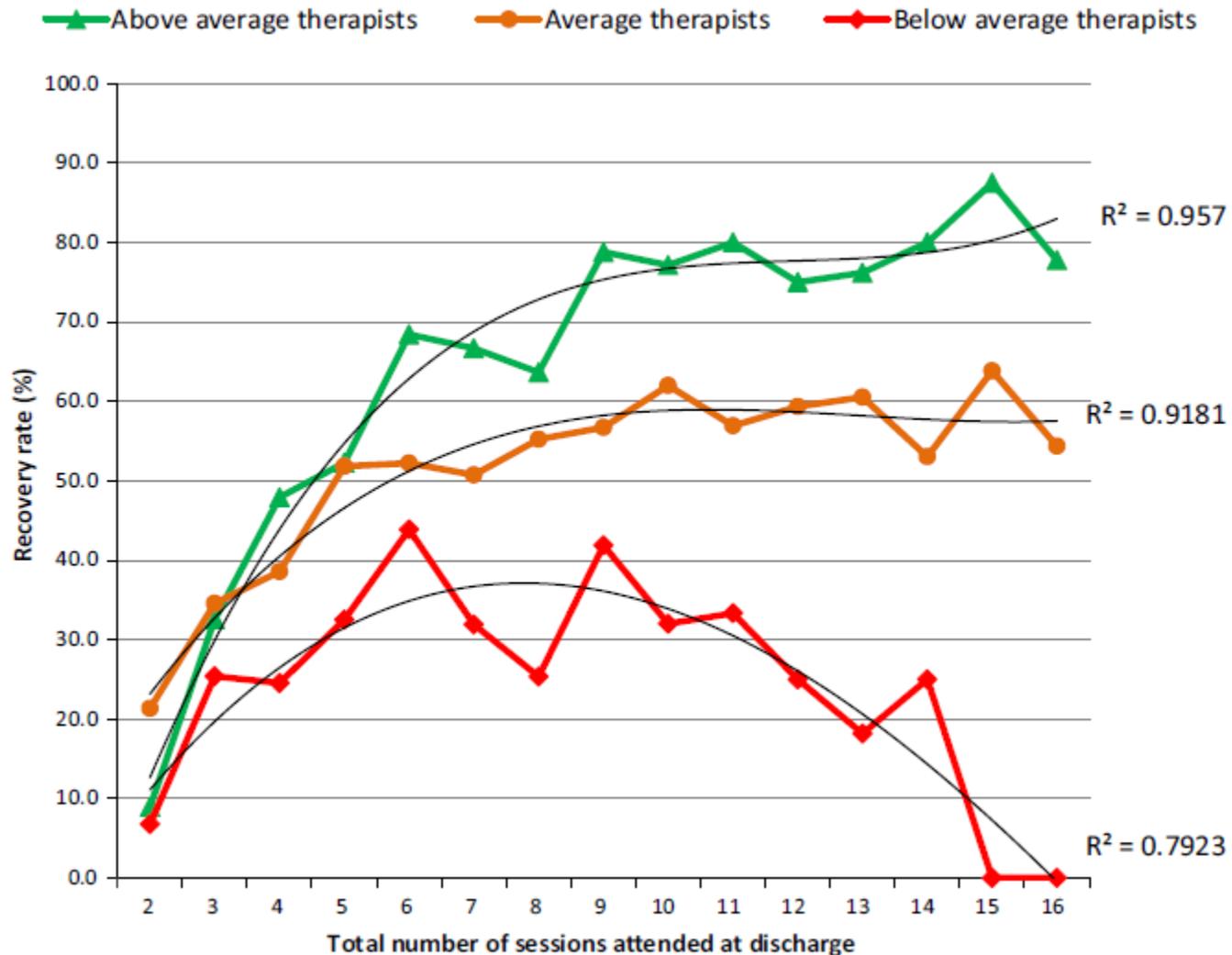
(Saxon, Firth, & Barkham, 2017)



Science: Therapists



Recovery Rates for Best and Worst therapists



Characteristics and Actions of Effective Therapists?

- Consult Buetler (*Handbook of Psychotherapy and Behavior Change*) 2004
- We don't know
- And we don't care



50TH ANNIVERSARY EDITION

BERGIN AND GARFIELD'S
HANDBOOK *of*
PSYCHOTHERAPY *and*
BEHAVIOR CHANGE



EDITED BY

MICHAEL BARKHAM • WOLFGANG LUTZ • LOUIS G. CASTONGUAY

WILEY Blackwell

CHAPTER **9**

THERAPIST EFFECTS: HISTORY, METHODS, MAGNITUDE,
AND CHARACTERISTICS OF EFFECTIVE THERAPISTS

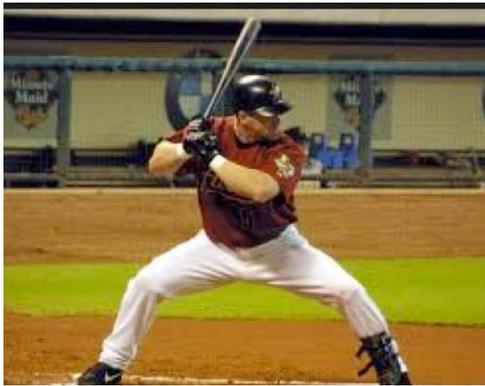
BRUCE E. WAMPOLD AND JESSE OWEN

Abstract

This chapter reviews the historical and current trends in the study of therapist effects. We discuss statistical methods for investigating therapist effects, with a primary focus and suggestion to utilize multilevel modeling to properly account for and understand therapist effects. Next, we review studies of therapist effects in randomized clinical trials and naturalistic treatment settings. The overall magnitude of therapist effects tends to be slightly greater in naturalistic settings than in randomized clinical trials, but it is sizable in comparison to other effects in psychotherapy. Then, we review the characteristics and actions that typify more effective therapists. It appears that more effective therapists have a sophisticated set of interpersonal skills that is displayed in interpersonally challenging situations. Finally, we provide some conclusions for research, practice, and training.

Most effective therapists

- Observe therapy
- What would be observed?
- What about outcomes?
- Can you identify the most effective therapist?
- Ready?



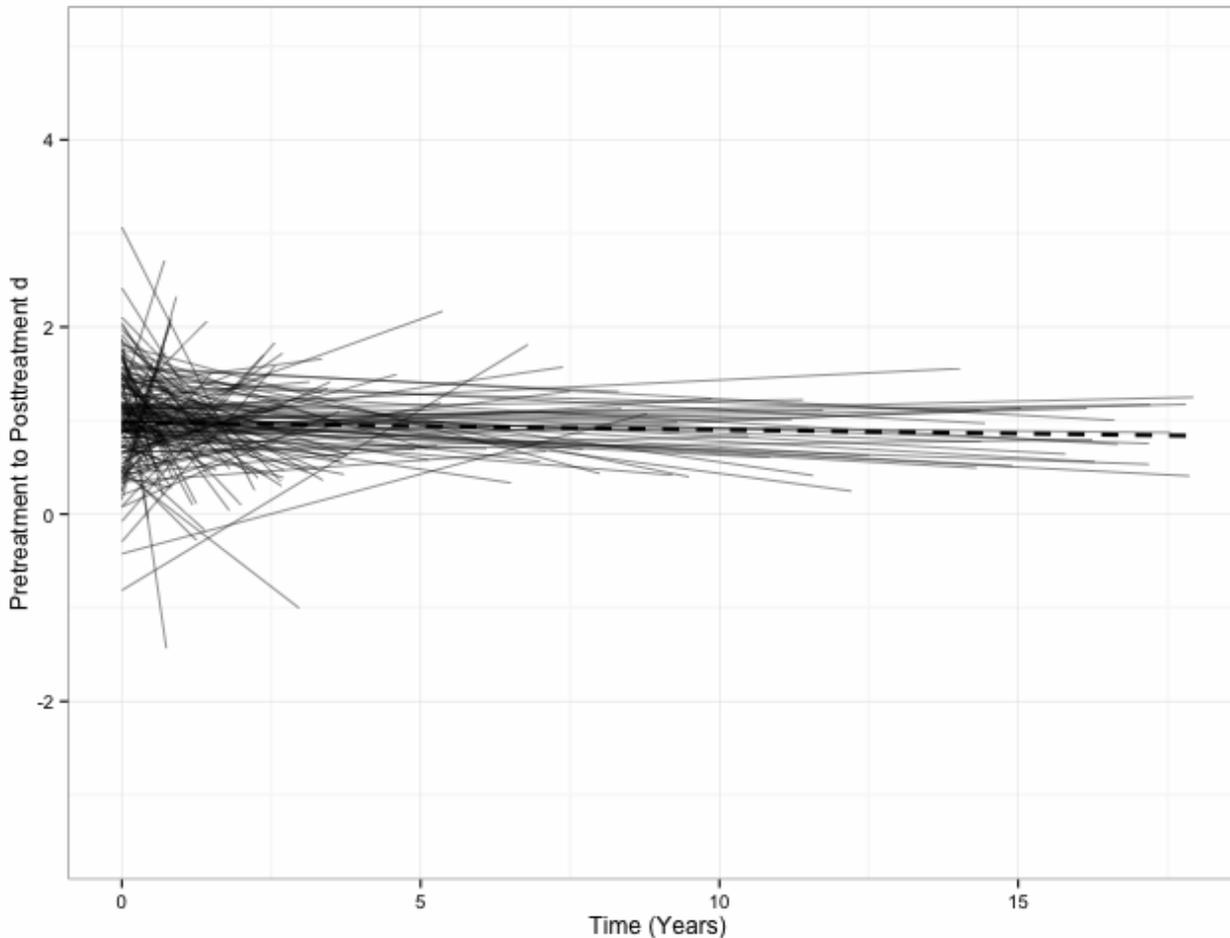
What does **NOT** make a difference in therapist outcomes

- **Theoretical approach used in treatment**
- Age
- Personality
- Self-reported social skills
- Professional degree (e.g., psychology, psychiatry, counseling, social work)
- Interviews of therapists by experts
- Experience?

Do therapists improve over time?

170 therapists, 6500 patients, up to 18 years of experience
(Goldberg et al., 2016)

Therapists used ROM feedback



Who are the best therapists?

- Ask therapists: “compare your clinical skills and performance to others”
- 25% said “In the top 10%”
- None said below average!
- None identified failing cases
- Dunning-Kruger effect
 - Math skills, wine tasting, medical knowledge, firearm safety among hunters, etc.
- Consequences: de-motivating
- **Measure outcomes**

Therapist Skills

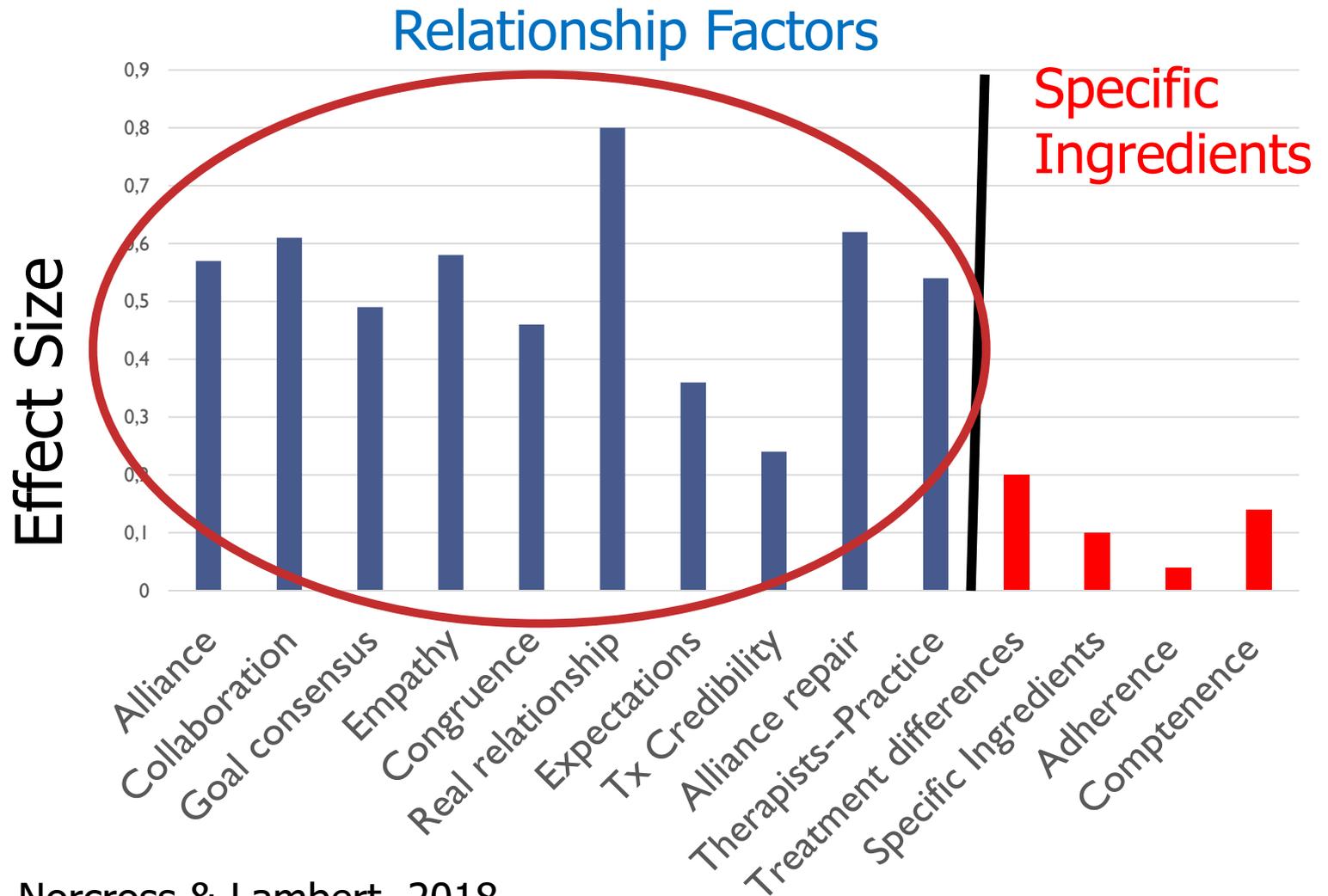
- **Clever Experiment: Test therapists outside of therapy!** (Anderson, 2009)



Effective Therapists display Facilitative Interpersonal Skills (FIS)

- **Verbal fluency**
 - **Persuasiveness**
 - Emotional perception
 - Affective modulation and expressiveness
 - Warmth and acceptance
 - Focus on other, understanding
 - **Interpersonally challenging situations**
 - Replicated by Schöttke et al. 2017
- Competence
- Warmth

Science: Therapists



Norcross & Lambert, 2018

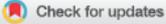
Warmth

Competence

Psychotherapy Research, 2022

Vol. 32, No. 2, 139–150, <https://doi.org/10.1080/10503307.2021.1916640>

 Routledge
Taylor & Francis Group

 Check for updates

EMPIRICAL PAPER

It's the therapist and the treatment: The structure of common therapeutic relationship factors

INGVILD FINSRUD ^{1,2}, HELENE A. NISSEN-LIE ², KARIANNE VRABEL ^{1,2},
ANDREAS HØSTMÆLINGEN ², BRUCE E. WAMPOLD ^{1,3}, & PÅL G. ULVENES ^{1,2}

¹*Modum Bad Research Institute, Vikersund, Norway;* ²*Department of Psychology, University of Oslo, Oslo, Norway* &

³*University of Wisconsin-Madison, USA*

(Received 26 November 2020; revised 30 March 2021; accepted 31 March 2021)

Conclusions

- Psychotherapy works (whew)
- ... in multiple ways
 - CARE
 - EXPECTANCY
 - SPECIFIC
- Therapists, **therapists**, **therapists**
- Effective therapist have sophisticated set of interpersonal used in challenging affective situations
- Note: Evolved to respond to psychotherapy