

Where's the Science? The Sorry State of Psychotherapy

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The prevalence of mental health disorders in this country has nearly doubled in the past 20 years. Who is treating all of these patients? Clinical psychologists and therapists are charged with the task, but many are falling short by using methods that are out of date and lack scientific rigor. This is in part because many of the training programs — especially some Doctorate of Psychology (PsyD) programs and for-profit training centers — are not grounded in science.

A new report in *Psychological Science in the Public Interest*, a journal of the Association for Psychological Science, by a panel of distinguished clinical scientists — Timothy Baker (University of Wisconsin-Madison), Richard McFall (Indiana University), and Varda Shoham (University of Arizona) — calls for the reform of clinical psychology training programs and appeals for a new accreditation system to ensure that mental health clinicians are trained to use the most effective and current research to treat their patients.

There are multiple practices in clinical psychology that are grounded in science and proven to work, but in the absence of standardized science-based training, those treatments go unused.

For example, cognitive-behavioral therapy (CBT) has been shown to be the most effective treatment for PTSD and has the fewest side-effects, yet many psychologists do not use this method. Baker and colleagues cite one study in which only 30 percent of psychologists were trained to perform CBT for PTSD and only half of those psychologists elected to use it. That means that six of every seven sufferers were not getting the best care available from their clinicians. Furthermore, CBT shows both long-term and immediate benefits as a treatment for PTSD; whereas medications such as Paxil have shown 25 to 50 percent relapse rates.

The report suggests that the escalating cost of mental health care treatment has reduced the use of psychological treatments and shifted care to general health care facilities. The authors also stress the importance of coupling psychosocial interventions with medicine because many behavioral therapies have been shown to reduce costs and provide longer term benefits for the client.

Baker and colleagues conclude that a new accreditation system is the key to reforming training in clinical psychology. This new system is already under development: the Psychological Clinical Science Accreditation System (PCSAS www.pcsas.org).