

Bridging Science With Clinical Practice Around the World

April 30, 2019

PCSAS Joins French Society to Promote Clinical Science Model

Creating stronger connections than ever before between science and practice is becoming an overarching theme in international psychology discussions. For decades, many clinical psychologists have argued that mixing science with clinical judgment and intuition makes for a poor recipe in mental health care. But with the pressing need to address staggering rates of mental illness worldwide, the call for a strong clinical-science model is spreading across graduate training programs in many parts of the globe.

Researchers from China, Israel, the European Union, North America, and other parts of the globe shared their successes and hurdles in promoting a science-focused clinical training model as they gathered at the International Convention of Psychological Science in Paris.

“A great number of clinical psychologists do advocate that the practice of psychology be based on scientific principles,” said Raphaël Trouillet, an assistant professor at the University of Montpellier in France and immediate Past President of Société Française de Psychologie (SFP). “What is the future of the practice of psychology, and what is the future of the training in the practice of psychology?”

SFP and the North America-based Psychological Clinical Science Accreditation System (PCSAS) hosted a symposium and roundtable discussion at ICPS to discuss these questions.

PCSAS, in particular, was founded with a primary commitment to scientific perspectives in all aspects of clinical psychology. “Science is paramount at PCSAS and we believe that training for clinical practice and for conducting clinical research should be fully science based and reciprocal. Research should inform all aspects of clinical practice and clinical practice should continuously inform research,” said PCSAS Executive Director Alan G. Kraut, who also is APS Executive Director Emeritus.

“It’s one thing to say we’re going to connect these things,” said APS Past President Robert W. Levenson, who serves as PCSAS Board president and is a professor at the University of California, Berkeley. “But to make that bridge is not always easy. How do we build that bridge?”

During the symposium, APS Fellow Eva Gilboa-Schechtman of Bar Ilan University in Israel discussed how technology can help give trainees real-time feedback on their therapeutic results. She discussed an ongoing study in which the researchers are collecting data from both the patient and therapist-in-training, tracking vocal outputs, facial expressions, and other nonverbal cues, in addition to patient self-reports and the therapist’s clinical judgment. Supervisors use these data in combination to provide trainees with specific, immediate feedback about each session. The trainees can see session-by-session progress for each patient, compare that with expected outcomes, and make treatment corrections along the way, Gilboa-Schechtman explained. Data collected from this kind of research can make use of artificial intelligence for automatic coding, diagnostics, and data analysis in clinical-training settings.

Pennsylvania State University's doctoral training program embraces the philosophy that clinical science should inform clinical practices — and vice versa, said Aaron Pincus, a professor in the university's psychology department. The top training goal of the program is to achieve a seamless integration of clinical science and practice.

Penn State has a Practice Research Network (PRN), where practitioners, faculty members, and graduate students collaborate in selecting clinically significant topics to investigate, designing and implementing studies, and disseminating findings. The PRN includes a large community mental health center with about 200 active adult clinical cases each year. The PRN tracks diagnoses, treatment utilization, and demographic data. A committee made up of faculty, a community clinician, and a graduate student representative reviews clinical study proposals for approval, making sure research projects have a strong balance between clinical and training relevance.

“What we are trying to do was model our PRN processes after teaching and research hospitals in the United States, pretty much in terms of how they obtain patient consent, to provide things like deidentified data, and also managing data practices within the training plan,” Pincus said.

In other nations, the clinical-science model has been stymied by legal and demographic issues, ICPS attendees said. China has only 10 PhD clinical psychologists across the entire country (two of whom were present at the roundtable). Norway, meanwhile, is in the midst of a regulatory controversy over professional designation for clinicians, explained Inger-Lise Bråthen, a Norwegian Society of Psychological Science board member.

Regardless of these differences, the discussion participants agreed that the time has come to promote international cooperation to intensify the integration of clinical science and clinical practice worldwide. The discussions revealed that although efforts to promote clinical science are under way around the world, these efforts have not increased communication and collaboration across countries. The symposium and roundtable marked an important step in fostering this international integration.