

CONTENTS

Contributors	xi
Acknowledgments	xiii
1. Introduction to <i>Becoming Better Psychotherapists</i>	3
<i>Louis G. Castonguay and Clara E. Hill</i>	
I. CONCEPTUAL AND EMPIRICAL FOUNDATIONS	11
2. What Competencies Should Therapists Acquire and How Should They Acquire Them?	13
<i>Louis G. Castonguay, James F. Boswell, Franz Caspar, Myrna L. Friedlander, Beatriz Gómez, Adele M. Hayes, Martin grosse Holtforth, Stanley B. Messer, Michelle G. Newman, and Bernhard M. Strauss</i>	
3. Psychotherapy Training and Supervision With Undergraduate and Graduate Students	31
<i>Clara E. Hill and Sarah Knox</i>	
4. Professional Training and Supervision After Graduation: Is It Worthwhile?	55
<i>Katie Aaffjes-van Doorn and Jacques P. Barber</i>	
II. THERAPEUTIC SKILLS TRAINING	83
5. Training on Context-Responsive Psychotherapy Integration: An Evidence-Informed Framework	85
<i>Michael J. Constantino, Alice E. Coyne, James F. Boswell, Marvin R. Goldfried, and Louis G. Castonguay</i>	

6. Alliance-Focused Training: Teaching Therapists to Navigate Alliance Ruptures	107
<i>Catherine F. Eubanks, J. Christopher Muran, and Lisa Wallner Samstag</i>	
7. Training Therapists to Manage Countertransference via Reflective Practice	127
<i>Jeffrey A. Hayes, Claire C. Cartwright, and Fanghui Zhao</i>	
8. Building a Theory of Therapist Responsiveness Training	149
<i>William B. Stiles, Jordan Bate, and Timothy Anderson</i>	
9. Deliberate Practice for Immediacy: Skill Use and Client Outcome	171
<i>D. Martin Kivlighan III and Dennis M. Kivlighan Jr.</i>	
III. TECHNOLOGY AND PSYCHOTHERAPY TRAINING	189
10. Data-Informed Clinical Training and Practice	191
<i>Wolfgang Lutz, Anne-Katharina Deisenhofer, Birgit Weinmann-Lutz, and Michael Barkham</i>	
11. Technology and Psychotherapy Training	215
<i>Matteo Bugatti, Zac E. Imel, and Jesse Owen</i>	
IV. SUPERVISION AND CONSULTATION	237
12. Good Supervision, Better Therapy: Trainees' Accounts of How Supervisors Helped Them Manage Difficult Therapy Situations	239
<i>Myrna L. Friedlander, Laurie Heatherington, Clara E. Hill, Sarah Knox, Catherine F. Eubanks, Lynne Angus, and Mengfei Xu</i>	
13. Peer Consultation for Early Career Psychotherapists: A Preliminary Study	267
<i>J. Ryan Kilcullen, Louis G. Castonguay, Dever M. Carney, Katherine A. Davis, Natalie R. Pottschmidt, Samuel J. Knapp, Corrie L. Jackson, Neil A. Hemmelstein, and Ann Marie Frakes</i>	
14. Informal Supervision: A Significant and Overlooked Aspect of Therapists' Training	289
<i>Barry A. Farber and Daisy Ort</i>	
V. LOOKING FOR THE BEST, AVOIDING THE WORST, AND EXPLORING LIFELONG EXPERIENCES IN TRAINING	309
15. Selecting Future Psychotherapists for Training: A Nationwide Study of Ideal Characteristics and Current Practices	311
<i>Laurie Heatherington, Jacques P. Barber, J. Ryan Kilcullen, Louis G. Castonguay, Katherine A. Davis, Peter Barry, and Dennis M. Kivlighan Jr.</i>	
16. Nil Nocere: How to Avoid Harm in Psychotherapy Training	333
<i>Bernhard M. Strauss and Dominique Frenzl</i>	

17. The Role of Faith and Doubt in the Development of Six Psychotherapy Scholars and Practitioners: Implications for Training and Supervision	357
<i>Clara E. Hill, Sarah Knox, Heidi A. Zetzer, Barry A. Farber, Catherine F. Eubanks, and Timothy Anderson</i>	
VI. CONCLUSION	379
18. Clinical, Research, and Policy Implications for Psychotherapy Training and Supervision in the 21st Century	381
<i>Clara E. Hill, Louis G. Castonguay, and Participants in the Penn State Conferences</i>	
Index	401
About the Editors	407

1

Introduction to *Becoming Better Psychotherapists*

Louis G. Castonguay and Clara E. Hill

To be licensed to practice psychotherapy, every mental health clinician has to receive extensive training and supervision as mandated by the board of their professional organization. But what do we know about what makes this specialized and socially sanctioned education good or bad? What are the components that should be included before (in terms of selection), during (in terms of training and supervision), and after (in terms of credentialing and ongoing education) such learning endeavors? And what are the training and supervision practices (structured or informal, new or long-standing, specific or general) that might be particularly beneficial for the growth of trainees and the improvement of their clients?

Unfortunately, the current state of research does not offer much direction to rely on in pursuing these questions (Knox & Hill, 2021). Indeed, the paucity of empirical data on training and supervision is shocking given that we aspire as a field to be guided by the scientist–practitioner model. In addition, most available treatment manuals and contemporary textbooks about training and supervision focus on specific orientations and/or disorders. Although valuable as part of a broad set of tools, such textbooks limit the scope of information about core inquiries about training in general. To better understand and improve training, we need new data as well as big ideas that are relevant to diverse learning and supervision experiences. The goal of this book is to offer such innovative knowledge by relying on the reflections, discoveries, and collaborative work of psychotherapy scholars who represent a diversity of theoretical orientations, methodological expertise, and levels of experience. Our hope is that the

<https://doi.org/10.1037/0000364-001>

Becoming Better Psychotherapists: Advancing Training and Supervision, L. G. Castonguay and C. E. Hill (Editors)

Copyright © 2023 by the American Psychological Association. All rights reserved.

conceptual, clinical, and empirical advances presented in the book's chapters will reach several stakeholders of mental health practice: those who are directly involved in acquiring and improving therapeutic skills (students, clinicians, instructors, supervisors), those who are influencing the implementation of training and practice (directors of clinical programs, policy makers), and/or those who are investigating such training and practice.

This book is the fourth one based on series of conferences at Penn State University, with the first having focused on insight (Castonguay & Hill, 2007), the second on corrective experiences, (Castonguay & Hill, 2012), and the third on therapist effects (Castonguay & Hill, 2017). In particular, the current focus on training and supervision is the logical step following the project on therapist effects where we established that some therapists are better than others. Hence, the next obvious question is how to help clinicians become more effective practitioners. To address this complex and broad question, we fostered in-depth discussions during three 2-day meetings (in March 2017, March 2020, and March 2022). We then invited our expert colleagues to work in small groups between the meetings on chapters examining or empirically investigating crucial issues related to the participants, goals, focus, components, competencies, methods, experience, and impact of training and supervision.

The opening section of the present book—Part I, Conceptual and Empirical Foundations—lays down some theoretical and empirical foundations for the subsequent contributions. Chapter 2 begins this process by offering a landscape of competencies and training methods based on the experience of 10 trainers and supervisors (Louis G. Castonguay, James F. Boswell, Franz Caspar, Myrna L. Friedlander, Beatriz Gómez, Adele M. Hayes, Martin grosse Holtforth, Stanley B. Messer, Michelle G. Newman, and Bernhard M. Strauss). Together, these authors represent the views and praxes associated with different approaches (behavioral change and insight-oriented), various parts of the world (Europe, Latin America, and North America), and a wide range of training experiences (with PhD and PsyD students as well as with experienced therapists in both private practice and clinical trials). Their goal was to describe the current state in terms of what competencies are required for practicing clinicians and what methods are used to train students.

The next two chapters describe what we know empirically about training and supervising, first regarding novice therapists (undergraduate and graduate students) and then experienced (postgraduate) clinicians. The authors of Chapter 3, Clara E. Hill and Sarah Knox, summarize the evidence supporting training programs for a number of transtheoretical competencies (helping skills, relational skills, self-awareness), as well as for particular theoretical approaches (psychodynamic/interpersonal, experiential, behavioral). They also provide an overview of the current state of research regarding the effects of individual supervision and the variables that have been linked to supervision outcome. In Chapter 4, Katie Aafjes-van Doorn and Jacques P. Barber first describe some of the potential benefits that clinicians may gain from postgraduate educational

experiences, such as an “antidote” to the loss of professional knowledge during one’s career, gain of expertise, acquisition of knowledge and skills related to ethical, professional, and evidence-based practices, provision of support and feedback, and mitigation of burnout. They then review the empirical evidence for a variety of such experiences, including conferences and workshops (in person and online), supervision, peer supervision, online supervision, and personal therapy.

Part II, Therapeutic Skills Training, highlights transtheoretical models and approaches designed to teach skills to facilitate therapeutic gains and reduce toxic reactions in therapy. In Chapter 5, Michael J. Constantino, Alice E. Coyne, James F. Boswell, Marvin R. Goldfried, and Louis G. Castonguay describe how therapists can be trained to identify a range of markers of interventions and to respond to them in ways that are likely to be clinically successful. Specifically, the authors provide empirical evidence of five markers/responses (if/then) scenarios that are at the core of their context-responsive model. They propose that trainees should learn several empirically supported treatments in order to increase the likelihood of being able to address the needs and preferences of various clients. In addition, trainees should be taught to work flexibly and responsively by temporarily shifting (or maintaining) what they are doing in treatment with a particular client based on their monitoring of empirically established predictors of outcome (e.g., client ambivalence/resistance, decreased outcome expectations, risk for deterioration, therapist cultural misattunement and alliance ruptures). Furthermore, when shifting, they should learn to implement specific principle-based interventions that have been shown to be effective in addressing these outcome predictors.

One of these if/then scenarios is examined in detail in Chapter 6. Catherine F. Eubanks, J. Christopher Muran, and Lisa Wallner Samstag describe a training program specifically aimed at teaching and supervising trainees in identifying various markers of alliance ruptures (clustered within withdrawal and confrontation subtypes) and in using different types of interventions to resolve such ruptures. Chief among these interventions is metacommunication, whereby therapists learn to engage in the process of communicating about what is transpiring in the therapeutic interaction, including the recognition of their contributions to the alliance ruptures. The primary goal of the training program is defined as the development of trainees’ emotional regulation to help them navigate disrupting events that can result from clashes between their clients’ and their own needs for agency and communion. The skills required by the trainees to develop such emotional regulation (e.g., self-exploration) and by the supervisor to foster them (e.g., facilitate practice under pressure, responsiveness) are highlighted. Also presented are the tasks involved in the training program (e.g., mindfulness exercises, analyses of videotaped sessions, deliberate practice) and the type of bond (characterized by both anxiety and security) that typically develops between trainees and supervisor during training. After reviewing quantitative and qualitative studies that have been conducted on the process and impact of their training program,

the authors present both data and a transcribed session illustrating meaningful events during group supervision.

Emotional regulation and self-reflection skills are also at the core of the management of countertransference (CT), which is the topic of Chapter 7. After tracing the current attention given to CT back to Freud's foundational (and falsifiable) observations, Jeffrey A. Hayes, Claire C. Cartwright, and Fanghui Zhao review the empirical literature, albeit small, on trainees' experiences of CT. They then present a model for the management of CT and propose a method of reflective practice to train therapists in raising their awareness to and adequately dealing with each of the five components of this model: origins, triggers, manifestations, effects, and management of CT. Also presented is a study assessing the impact of reflective practice on trainees' management of their CT reactions. Specifically, graduate students were invited to reflect weekly on all of the five components of CT during the course of a therapy with one of their clients and to received feedback aimed at supporting the understanding of their reactions toward their client. Two case studies taken from this study provide an in-depth illustration of CT reactions as well as how the combination of reflective practice and nonevaluative feedback can be beneficial for the professional development of trainees.

The first three chapters of Part II rely, explicitly or implicitly, on the competency of responsiveness, which is the therapist's ability to respond appropriately to client needs and/or dyadic processes emerging during treatment. The fourth chapter (Chapter 8) describes new developments of the most influential model of responsiveness in psychotherapy (Stiles et al., 1998). Specifically, William B. Stiles, Jordan Bate, and Timothy Anderson present the building block of a responsiveness theory of training. Central to their theory are the assumptions that during therapy therapists respond (metaphorically) to and with different internalized voices, such as a supervisor or teacher, and that responsiveness involves both slow (e.g., deliberate, explicit) and fast (e.g., automatic, implicit) processing—with the former being more prominent early in training and the latter being facilitated and gaining prevalence as training and experience progress. The authors then provide support for and further elaborate their theory based on qualitative analysis of the experience of three therapists (with various levels of training) who participated in a training workshop. Particularly noteworthy, the training focused on competencies (facilitative interpersonal skills) that have been found to characterize effective therapists (Anderson et al., 2009) and used a learning method that has received considerable attention over the last several years: deliberative practice.

Deliberate practice, which is based on expertise science, is the focus of Chapter 9, the final chapter of Part II. D. Martin Kivlighan III and Dennis M. Kivlighan Jr. provide a description of this training approach along with an overview of the research on its implementation in psychotherapy. The central part of their chapter, however, is the presentation of additional data from an experimental study on the use of deliberate practice for training graduate students in using immediacy. Reflecting the complexity of psychotherapy

training, the findings show that the effects of deliberate practice differ across trainees. Specifically, the results suggest that this intense method of learning, at least with respect to skills that can also be challenging to develop, may be particularly beneficial when implemented after trainees have acquired some level of clinical experience and/or have worked with a supervisor for some time.

Part III, Technology and Psychotherapy Training, can be viewed as a window to psychotherapy training in the 21st century. Exploring new horizons of the scientist–practitioner model, Chapter 10, by Wolfgang Lutz and his colleagues (Anne-Katharina Deisenhofer, Birgit Weinmann-Lutz, and Michael Barkham), describes a training clinic that integrates (and contributes to) advances in empirical knowledge, computer technology, and statistical analyses. The authors begin with an overview of psychotherapy research (outcome, therapist effects, process, moderators, patient-focused) that provides the building blocks of a framework guiding the theoretical and clinical dimensions of their training program. At the core of this training program is a computerized feedback system that uses methods linked to precision medicine (e.g., machine learning) to help trainees personalize treatment for their clients, in terms of both evidence-based strategies that are most likely to be beneficial as a starting point of therapy and the adjustments of interventions that may be indicated during treatment based on session-by-session monitoring of process and outcome data. Following the illustration of the implementation of this feedback system with a hypothetical training case, the authors offer recommendations for building data-informed training clinics.

Chapter 11, by Matteo Bugatti, Zac E. Imel, and Jesse Owen, also demonstrates how the frontiers of training and supervision have been pushed into advanced technological territories. They first identify several limitations of traditional training and supervision, including the time, resources, and costs they involve, let alone their lack of broad and robust evidence of effectiveness with regard to client outcome. They then argue that such traditional practices can be enhanced by a variety of technologies that can serve as tools to complement instructors' and supervisors' support, guidance, and feedback. They briefly describe measurement-based care technologies (i.e., routine outcome monitoring and clinical feedback systems)—a recognized evidence-based practice that has yet to be extensively integrated in graduate training. The authors more fully present cutting edge technological systems that are based on artificial intelligence and machine learning and that are aimed at fostering various skills (e.g., open-ended questions) and interventions (e.g., motivational interviewing). Also based on the principles of deliberative practice, these systems allow trainees to receive immediate feedback on single responses to clinical vignettes, unscripted dialogues between a client and therapist, and their own recorded and transcribed sessions with one or across all of their clients. They also describe technology aimed at assisting trainers in their teaching (including videos on various issues and clinical populations) and technological platforms that have been developed to disseminate mental health interventions—some of which feature educational and training services for practicing clinicians.

Part IV, Supervision and Consultation, is devoted to different types of supervision and consultation. Myrna L. Friedlander and her colleagues (Laurie Heatherington, Clara E. Hill, Sarah Knox, Catherine F. Eubanks, Lynne Angus, and Mengfei Xu) investigate in Chapter 12 the direct and indirect effects of formal supervision during graduate training. Trainees participated in a semi-structured interview aimed at understanding how their supervisor helped them, directly, to deal with an obstacle they faced during treatment and also how such supervision indirectly led to positive changes for their client. Qualitative analyses of the responses provided in the interviews reveal a variety of obstacles (e.g., clients being angry, resistant, withdrawn), strategies suggested and implemented to handle them (e.g., becoming more active, challenging, directive), and benefits for both trainees (e.g., less anxious, frustrated) and clients (e.g., more productive and less obstructive). Similar to the if/then scenarios highlighted in Constantino et al.'s contextual model, the current chapter identifies markers of interventions and responses to such markers that are consistent with a critical events stage model of supervision (Ladany et al., 2016). Furthermore, the results suggest that a key ingredient for successful supervision is the supervisor's responsiveness to the supervisees' needs and their task of helping clients.

In Chapter 13, J. Ryan Kilcullen and his colleagues (Louis G. Castonguay, Dever M. Carney, Katherine A. Davis, Natalie R. Pottschmidt, Samuel J. Knapp, Corrie L. Jackson, Neil A. Hemmelstein, and Ann Marie Frakes) present a mixed-methods (qualitative and quantitative) study on the feasibility and helpfulness of peer consultation for early career psychologists. Divided in two small groups, participants recruited across the state of Pennsylvania met via Zoom on a regular basis for 7 months. To reflect real-world clinical practice, each group of participants decided when and for how long they met, and what they talked about during each of these meetings. Factors that can hinder peer consultation were identified, such as lack of structure, time constraints, and unhelpful interpersonal dynamics (e.g., feeling uncomfortable in sharing clinical cases). However, the study suggests that this postgraduate method of training can have multiple benefits for early career therapists, including clinical development (e.g., improvement of case formulation and intervention skills), professional development (e.g., expanding connections and resources), and emotional support (e.g., opportunities to express and process emotions, to reduce one's sense of isolation, as well as to experience feelings of empowerment and validation).

In Chapter 14, Barry A. Farber and Daisy Ort examine a prevalent but rarely recognized and investigated reality of psychotherapy training: informal supervision, which refers to guidance and support about clinical work that therapists receive by someone other than formal or peer supervisors. Based on quantitative and qualitative data collected from a large sample of trainees in different types of graduate programs (PhD, PsyD, and license-eligible MA), the authors provide much needed information about who graduate students approach to get informal supervision (e.g., peers in their program, their own therapists, significant others); the perceived effects of informal supervision on various domains of training (i.e., clinical competence, multicultural competence, professional identity, emotional

well-being, clinical vulnerability, self-awareness, and receptivity to feedback) compared with formal supervision; and the positive, negative, and distinctive aspects of informal supervision. As was presented about formal supervision in other chapters, informal supervision can address clinical challenges and can have both direct (on the therapist) and indirect (on the client) effects. Similar to peer supervision, one of the major benefits of informal supervision is the provision of emotional support.

The chapters in Part V, *Looking for the Best, Avoiding the Worst*, and *Exploring Lifelong Experiences in Training*, examine other aspects of training and supervision that are often neglected: the selection of students aspiring to be therapists, reducing harm in training, and what practicing psychologists have learned about training and supervision from their own experiences. Chapter 15, by Laurie Heatherington and her colleagues (Jacques P. Barber, J. Ryan Kilcullen, Louis G. Castonguay, Katherine A. Davis, Peter Barry, and Dennis M. Kivlighan Jr.), presents the results of a national survey conducted with directors of clinical training from a diversity of training programs about the positive (“green flag”) and hindering (“red flag”) personal qualities for potential psychotherapy trainees to possess. Whereas some of the identified green flags point to competencies highlighted in previous chapters (e.g., relational skills), particular red flags (e.g., arrogance, narcissism) may well be linked to detrimental processes in training and supervision, let alone in practice. Also surveyed are the methods that are used to evaluate candidates in their respective training program, as well as the participants’ satisfaction with these methods.

Whereas the previous chapter focuses on the identification and evaluation of crucial “input” variables contributing to successful training, Bernhard M. Strauss and Dominique Frenzl argue in Chapter 16 that not enough attention has been given to a critical “output” of training, which is how to prevent harmful or negative effects in therapy. The authors offer both a definition and a conceptual model to help the field better understand and investigate such hindering events. Following a description of assessment measures that can be used (including during training), they review the prevalence of various adverse effects (e.g., worsening of symptoms, emergence of new problems, experience of unpleasant memories, stigmatization, dependency on therapist) and the occurrence of malpractice and boundary violations (e.g., sexual contact with current or former clients, conflict of interest). Also reviewed are negative experiences during training and supervision that have been reported by trainees. After documenting current therapists’ lack of awareness of (and ability to predict) such effects, they propose a number of guidelines to adopt in training in order for future therapists to learn how to competently assess, prevent, and repair harms that do result from therapy.

Becoming a good therapist is, of course, more than having the right stuff and not doing the wrong things. Learning and developing therapeutic skills, during and after graduate school, continually involves meaningful improvements and growing pains. The final chapter in Part V illustrates a particular combination, or dialectic, of such positive and difficult moments. Specifically, in Chapter 17, six

trainers and scholars (Clara E. Hill, Sarah Knox, Heidi A. Zetzer, Barry A. Farber, Catherine F. Eubanks, and Timothy Anderson) disclose key experiences of faith and doubt throughout their childhood and adulthood—experiences that have shaped them and their work, including as trainers and supervisors. As part of a qualitative method (i.e., collaborative autoethnography), the authors recollected and reflected on how their faith and doubt have been marked by their relationship with religion, significant others, and the mentoring they received (or did not receive) during their graduate training. Reflecting on their current experience of faith and doubt, the authors emphasize their growing tolerance to ambiguity and uncertainty, as well as their value of collaboration with others. From these shared experiences they offer recommendations for trainees to actualize their potential as therapists (and as people) and for training programs to facilitate such actualization.

The book ends with a conclusion by Clara E. Hill and Louis G. Castonguay that is derived from the previous chapters and discussions at the Penn State Conference. Chapter 18 provides a brief summary of what we have learned and offers clinical, research, and policy implications. We hope to inspire others to continue this important work so that we can become and teach others to become better practitioners.

REFERENCES

- Anderson, T., Ogles, B. M., Patterson, C. L., Lambert, M. J., & Vermeersch, D. A. (2009). Therapist effects: Facilitative interpersonal skills as a predictor of therapist success. *Journal of Clinical Psychology, 65*(7), 755–768. <https://doi.org/10.1002/jclp.20583>
- Castonguay, L. G., & Hill, C. E. (Eds.). (2007). *Insight in psychotherapy*. American Psychological Association.
- Castonguay, L. G., & Hill, C. E. (Eds.). (2012). *Transformation in psychotherapy: Corrective experiences across cognitive behavioral, humanistic, and psychodynamic approaches*. American Psychological Association. <https://doi.org/10.1037/13747-000>
- Castonguay, L. G., & Hill, C. E. (Eds.). (2017). *How and why are some therapists better than others? Understanding therapist effects*. American Psychological Association. <https://doi.org/10.1037/0000034-000>
- Knox, S., & Hill, C. E. (2021). Training and supervision in psychotherapy: What we know and where we need to go. In M. Barkham, W. Lutz, & L. G. Castonguay (Eds.), *Handbook of psychotherapy and behavior change* (7th ed., pp. 327–349). Wiley.
- Ladany, N., Friedlander, M. L., & Nelson, M. L. (2016). *Supervision essentials for the critical events in psychotherapy supervision model*. American Psychological Association. <https://doi.org/10.1037/14916-000>
- Stiles, W. B., Honos-Webb, L., & Surko, M. (1998). Responsiveness in psychotherapy. *Clinical Psychology: Science and Practice, 5*(4), 439–458. <https://doi.org/10.1111/j.1468-2850.1998.tb00166.x>