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An Introduction to *The Other Side of Psychotherapy*

Jairo N. Fuentres

A recent clinical practicum supervisee, while reviewing the progress one of her clients had made, told me, “I can’t believe how much my client has changed this semester. It’s so disproportionate to what I did!” This reaction from my supervisee captures a thought that I had experienced many times as a therapist but had never been able to express, especially so succinctly. My supervisee was reviewing her work at the end of a semester and uttered what I thought was the perfect quote for this book. Mona marveled at the magnitude and pace of change that her client had achieved in 15 sessions of psychotherapy. She was pleased, of course, but uttered in wonder what she had “done” to make the changes possible and how it could be that a depressed client with a history of family abuse and isolation could have initiated so many positive changes in such a short time. We had a fruitful supervision session in which we discussed the client’s courage and hard work, but we also discussed many of the therapeutic conditions and interventions that Mona had offered. It was evident to us that the client had made significant progress over the course of a semester and that it probably would not have happened without Mona being her therapist. Mona was clearly devoted and had done her job, but so had the client.

There are many books and chapters in the literature on what it takes to be a good therapist. This book focuses more on the client’s side of the equation.

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The Other Side of Psychotherapy: Understanding Clients’ Experiences and Contributions in Treatment, J. N. Fuentres (Editor)

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Without devaluing the important role of the therapist or therapy, the book presents ways that clients contribute to, experience, and work in psychotherapy. The authors describe, based on the available literature and their clinical experience, how clients help to make psychotherapy so effective and efficient.

A recent exchange with a colleague is also worth highlighting. He is now an accomplished therapist and psychotherapy researcher. He shared what he called one of the most surprising and memorable experiences that he had with a client when he was still in training years ago. He remarked that he remembered making a “mistake” in therapy when he was a graduate student. He disclosed his frustration with a client who had engaged over and over in self-defeating behavior. These behaviors were previously discussed and processed in earlier sessions. After sharing his frustration with the client, he pondered his reaction and disclosure, discussed it with his supervisor, and agreed that he would apologize to the client at their next session. He subsequently apologized to the client and elaborated why he had shared his feelings with her, but, surprisingly, the client found that disclosure to have been helpful and powerful.

You may have had similar experiences with clients, in which your perception of an event with a client was different from the client’s perception. The purpose of mentioning my colleague’s story is to highlight that clients and therapists can often agree on what has taken place in their sessions, but they can have different interpretations or associations of the same event. The literature has discussed how clients and their therapists differ in their perception of the same events in therapy (Bohart & Wade, 2013; Eugster & Wampold, 1996; Levitt & Rennie, 2004).

An extension of this phenomenon is that therapists tend to see and understand therapy primarily from their own perspective. Our profession has been, to a great extent, therapist-centric. While we readily acknowledge that psychotherapy is a collaborative process involving the client, in our hearts, we believe that our interventions are the force behind the change: the reason why the client got better. It is understandable why we do so. We care about our clients, we spend years training, and we are devoted to our work. And undoubtedly, we do help. However, we tend to view therapy from our side, from our point of view. In this volume, the authors take a more client-centric approach. I call it the “other side.” While our presence and interventions are crucial to the process and outcome of psychotherapy, it seems important to get a better understanding of how clients work in psychotherapy. What strengths, capacities, behaviors, and cognitions do clients experience or use in psychotherapy? How do clients experience the therapist, the therapy relationship, and therapists’ interventions? What influence do clients have on their therapists, and how do they experience outcome and termination? These are some of the questions that are discussed in this book. While I refer to the client as the “other side,” this is not a prevailing mindset that I bring into therapy. Like most therapists, I see myself on the same side as the client; I see us as a team, a collaboration. However, I chose the title to highlight the fact that clients have their own views and experiences in psychotherapy and that, in some ways, their perspective remains largely unknown to us.

You may know by now that the evidence is in, from hundreds of carefully conducted studies: Psychotherapy is highly effective (American Psychological Association [APA], 2013; Cooper, 2008; Lambert, 2013). Psychotherapy is beneficial to clients who come into our offices with problems and concerns that range in severity from mild to moderate to severe (Wampold & Imel, 2015). While individuals are capable of adapting, growing, and transcending hurtful and traumatic experiences on their own, the evidence from the outcome literature shows that individuals who receive psychotherapy make greater gains, make them faster, and are able to maintain these gains longer than people who do not receive treatment (Wampold & Imel, 2015). Because research findings consistently show that client factors explain the largest proportion of outcome variance (Bohart & Wade, 2013; Cooper, 2008; Wampold & Imel, 2015), this book is dedicated to examining how clients contribute to such considerable outcomes.

The audiences that may benefit most from this book are psychologists and counselors. The book will also be of interest and benefit to faculty and graduate students in master's and doctoral programs in counseling and clinical psychology. It will also be relevant to professionals in related areas, such as social workers and counselor educators. My overall hope is that the book will be valuable in clinical practice and clinical training and may be a source of ideas for researchers interested in further advancing psychotherapy.

WHY DEVOTE AN ENTIRE BOOK TO THE CLIENT?

Despite a great deal of research that has examined client factors, there is a limit on what can be inferred about clients in psychotherapy. After reading the research about clients, it is difficult to understand what they experience in treatment or how they work and contribute to process and outcome. As Fuertes and Williams (2017) noted, studies on clients have generally isolated one or two client variables and correlated them with outcome, which is, of course, valuable, but when the literature on client factors is read in aggregate, the results are often mixed or inconclusive. Client factors are often presented as a single chapter in a book and are usually not discussed within the broader scope of psychotherapy. And yet, most clinicians and researchers would agree that the client is incredibly important to the process and outcome of psychotherapy. The client can be called the primary stakeholder in therapy—the person who holds the keys to the success of treatment—the client is a contributor, strategist, and decision maker in treatment. Clients are ultimately responsible for change and growth in treatment (Cooper, 2008); it is clients—not therapists—that make psychotherapy work (Duncan et al., 2004). In this book, we present a more complete and in-depth narrative about the client in psychotherapy. By focusing on their perspectives, we present a more complex and integrated set of story lines about their experiences and work in treatment. Moreover, we hope that by accounting for more of the work clients do, a more complete understanding can emerge of the collaboration between them and their therapists.

Fuertes and Williams (2017) noted that attending to the experiences of our clients matters because they tend to do a great deal of the work in treatment. Bohart and Tallman (2010) and Levitt et al. (2016) noted that clients contribute so much to the work in therapy that perhaps this may explain the “dodo bird hypothesis,” where therapies tend to generate about the same level of effectiveness vis-à-vis outcome (Luborsky et al., 1975; Wampold & Imel, 2015). While many have discussed the role of common factors in explaining outcomes in therapy, Bohart and Tallman (2010) noted that the client is the ultimate common factor in treatment. Fuertes and Williams (2017) discussed the client as the main protagonist in treatment because clients know their lives best and are the ultimate arbiters of what is helpful, useful, or useless in therapy. They are the only ones who experience the benefits and difficulties of therapy and can implement the changes and deal with the resulting consequences.

Bergin and Garfield (1994) noted that the question is not whether the therapy works but whether the client works. And clients do work and are remarkably effective in their labor. As the outcome literature has shown repeatedly, clients make substantial gains after only 8 to 14 weeks in treatment and make clinically significant differences in about 16 to 20 hourly sessions. How does this happen? What happens in that span of time that clients can make such rapid improvements in such a brief period? The short answer is that they have the capacity to change. Clients, as human beings, have tremendous capacities for adapting, resilience, and growth. Clients change because they can change. Clients are human beings who are wired to adapt, endure, and grow—they are members of a species that has tremendous capacities for withstanding and thriving under difficult circumstances, and they have been at it for thousands of years, long, long before psychotherapy was created.

Informing my emphasis on the experiences and work of the client is the client-centered perspective of Carl Rogers. However, my perspective on the work of the client is also informed by many traditions in psychotherapy, from Freud to Klein to Rogers to Ellis. The authors of the chapters that follow also represent a diverse set of schools of thought that span the history of psychotherapy. While I believe that all of them would acknowledge the influence of Carl Rogers in their training, they would also add a list of many prominent thinkers and researchers who shaped their clinical and academic views of therapy. Thus, the emphasis in this volume on the client is informed by Rogers, but it also includes many diverse voices who came before him and since. And as mentioned earlier, the volume is also informed by the vast amount of empirical evidence pointing to the importance of the client in therapy.

Fuertes and Williams (2017) described therapy as a psychological gym and compared it to a physical gym. The therapist in this analogy is the personal trainer. While in the traditional gym, the person learns from the trainer and is encouraged to practice physical exercises to develop qualities such as physical strength, flexibility, and stamina, the client in therapy also learns and repeats exercises to develop psychological strength, flexibility, and greater tolerance and stamina in introspection. The exercises for the client in therapy are reflection, exploration of difficult experiences and emotions, and honest

communication. Fuertes and Williams noted that both gyms generate similar results in that in both situations, the client or person begins to feel better about themselves and others. In both gyms, the client does a great deal of the work, in the sessions and between them. Therapists and personal trainers are present, they model and teach many of the skills that their clients have to learn and practice, and they constantly encourage and push their clients to an optimal level. But the client is key; if the client does not get with the program, they will make an experienced therapist or personal trainer ineffective, or conversely, they can make a relatively new therapist look accomplished.

There is an interesting conundrum in trying to understand the client in psychotherapy. In this volume, we are interested in understanding clients, “the other side.” However, there is obviously no singular client perspective. Every client is different; every client–therapist dyad is unique; no one psychotherapy session is ever replicated. The developmental, social, and cultural influences that clients experience generate tremendous individual human diversity. However, there is also no singular therapist perspective either, and we have been fascinated with the therapist’s experience, work, and activities in psychotherapy for many decades. But having studied therapists has given us a good understanding of what makes them effective and how the range of interventions they employ allows them to help their clients. My hope is that with greater study and emphasis on the client, we will be able to also understand what makes them effective in therapy and also come to appreciate the type of interventions and strategies they employ to collaborate with their therapists, to overcome their difficulties, and help heal themselves. While this volume does not delve directly into the issue of human diversity, I encourage you to learn about it, particularly as it applies to therapy. The APA (2018) has published guidelines for professionals to study and use in working with human diversity.

THIS VOLUME

Each chapter in the book reviews the empirical base in its respective area, including quantitative and qualitative research and case studies. The authors present what we can infer about clients from the literature and discuss what we do not know or what seems to be missing in the knowledge base. They also discuss implications for practice, teaching, and training new professionals, and they identify areas for future research. Chapters also include case examples demonstrating key concepts.¹

The book is organized into three parts. Six chapters fall within Part I, Client Factors in Therapy Processes and Outcomes, and six chapters fall within Part II, Client–Therapist Interactions. The final part, Integration and Discussion, contains one chapter that looks back on the whole book.

¹The identities of the individuals in the case examples throughout this book have been properly disguised to protect client confidentiality.

Part I begins with Chapter 1, "Client Expertise: The Active Client in Psychotherapy," in which Arthur C. Bohart and Karen Tallman discuss the strengths and qualities of the client that make them an expert and authority in their life and therefore another expert in the room. The authors also discuss how the expertise of the client manifests itself in therapy, how therapists can work with clients' self-expertise, and how the client's expertise can contribute to the process and outcome of treatment work. In Chapter 2, "Understanding and Enhancing Client Motivation," João Tiago Oliveira and his colleagues review the literature on what motivates clients in therapy and how therapists can promote client involvement and engagement in treatment. Chapter 3 is entitled "Patient Readiness to Change: What We Know About Their Stages and Processes of Change." John C. Norcross, Danielle M. Cook, and I discuss how clients experience, negotiate, and engage in the process of change and growth in psychotherapy and the importance of therapists assessing client stage of change so that interventions can be matched and tailored to facilitate progress and outcome. In Chapter 4, "Therapist and Client Facilitative Interpersonal Skills in Psychotherapy," Timothy Anderson and Matthew R. Perlman discuss how clients experience therapists' facilitative skills and how they use these skills and their therapists' facilitative interpersonal skills to advance their progress in therapy. Chapter 5 is titled "Clients' Experiences of Attachment in the Psychotherapy Relationship," and in it, Brent Mallinckrodt discusses client attachment and its role in psychotherapy, including how clients experience attachment and achieve "earned attachment" in psychotherapy. The last chapter in Part I is titled "Clients' Agentic and Self-Healing Activities in Psychotherapy." Amy Greaves provides an innovative perspective on how clients progress through self-healing with the help of their therapist; her model is based on her research and is informed by the broader literature.

Part II begins with Chapter 7, "The Client's Function in the Psychotherapy Relationship: What Clients Experience and Contribute," in which Charles J. Gelso and Kathryn V. Kline discuss how clients experience the relationship and how they contribute to its formation and to sustaining it, including the real relationship, the working alliance, and the transference and countertransference configuration. In Chapter 8, "Client-Focused Assessment and Intervention: Tailoring the Work to the Client," James F. Boswell and Adela Scharff discuss ways of incorporating client feedback in assessment and intervention through routine outcome monitoring to better tailor and personalize therapy to the needs and perspective of the client. In Chapter 9, "Rethinking Therapists' Responsiveness to Center Clients' Experiences of Psychotherapy," Heidi M. Levitt and colleagues discuss clients' experiences of therapists' helping skills and the implications of their accounts in how therapists are prepared to maximally respond to the unique circumstances of each client. Chapter 10 is entitled "Clients' Influence on Psychotherapists and the Treatment They Provide." Rodney K. Goodyear and Hideko Sera discuss the process of mutual influence in the clinical dyad and present how clients influence therapists' experiences, their ratings of therapy, and their behavior in session. The chapter also discusses how therapists and supervisors can intervene to

identify and work with clients' contributions and influence. In Chapter 11, "Clients' Own Perspectives on Psychotherapy Outcomes and Their Mechanisms," Michael J. Constantino and his colleagues review the empirical literature and identify factors in treatment most closely associated with clients' perceptions of progress and outcome. In the final chapter of Part II, "Clients' Experiences of Therapy Ending," Cheri Marmarosh discusses how clients experience the end of therapy, including when a transfer to a new therapist is involved.

In the last chapter, I provide an integration and discussion based on my reading of the chapters and outline three broad themes that I identified from them about what clients experience and contribute to psychotherapy. They are (a) the role of client agency in therapy, (b) client collaboration in adapting and tailoring therapy, and (c) the role that clients play in nurturing a collaborative and therapeutic relationship. I also present ideas for future research on clients' experiences and contributions in therapy.

In closing, I want to reiterate that this book does not intend to undermine the valuable work of psychotherapists in helping their clients. Clients do a great deal of the work in therapy, but they do it with our help; before entering therapy, clients realized that they would not be able to change and grow on their own, which is why they enlisted the help of therapists. And we do help them. The psychotherapy we provide is highly effective and essential in tapping and galvanizing the client's resources and energies needed to overcome their problems. Thus, while we play an important role in psychotherapy, ours is not the only important role in the process. After having many exchanges with all the authors included in this volume, it is clear that while we acknowledge our hard work and expertise as professionals, we also acknowledge the amazing, resilient, creative, and hardworking psychotherapy client. And for our clients' courage, work, and important role in treatment, we are in awe, proud, and grateful.

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