

WHAT WORKS FOR WHOM?

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Aim of Abstract: Some psychological interventions have a stronger evidence base than other therapies. Similarly, some interventions are deemed as more effective when matched to a particular disorder. However, identical treatment for all patients can be inappropriate and unethical. Creating an optimal therapy match is not a new concept and in 1906, the father of modern medicine, Sir William Osler, said “it is sometimes much more important to know what sort of a patient has a disease than what sort of disease a patient has.” As a therapist, we may have a sense that a client may be better suited to a certain mode of therapy, though how do we make this decision? This presentation will focus on transdiagnostic theory, focusing on patient factors beyond diagnostics or presenting problems. Methods of adapting treatment to a patient will be discussed. “What treatment, by whom, is most effective for this individual with that specific problem, and under which set of circumstances?” (Paul, 1967)

Conclusions or results that are significant: Matching psychotherapy to a disorder is not always effective (Wampold, 2001).

Audience for which this presentation is relevant: Psychologists, counsellors and social workers.

How the topic relates to the conference: Psychological intervention for clients in treatment for substance use concerns and comorbidities.

Statement of the purpose of the project: Improving clinical practice and client engagement.

Description of the issue/program, technique that will be presented: Selecting which therapy to use.

Summary of the major conclusion/s researched: Norcross and Wampold (2011) reported demonstrable effectiveness in matching therapies based on reactance/resistance, preferences, culture and religion. They also found that stage of change and coping style showed probable effectiveness and client expectations and attachment style proved promising.

Significance and implications for practice: Potential improvement in client engagement, retention in therapy and substance use outcomes.