Background:

There has been extensive research on psychotherapy outcome over the last several decades. Most of this research demonstrates the effectiveness of a broad range psychotherapies (Wampold, Mondlin, Moody, Stich, Benson & Ahn, 1997). The vast majority of research relies on quantitative methodologies. Many researchers have argued for more qualitative studies as they provide “phenomenological contextual insights” that cannot be derived from quantitative data (Midgley, Ansalado, & Target, 2013). An example of this approach applied to subjective experience of psychotropic medication was provided by Floersch and colleagues (2009), who identified personal, interpersonal, and sociocultural dimension of medication experience. In the current study researchers employed a modification of a methodology described by Attride-Stirling (2001). Researchers identified emergent themes within 23 transcripts of open-ended interviews. The confidential peer-interviews explored experiences of psychotherapy and medication, here we focus on psychotherapy alone.

Methods:

Confidential peer-interviews were conducted by undergraduate students trained in open-ended interviewing techniques. Participants were solicited through an online mental health survey. Three researchers independently read through transcripts of interviews addressing questions of experiences with therapy. The researchers independently extracted words and phrases relating to positive therapy experiences. Positive therapy experiences/outcomes were defined as the interviewee expressing satisfaction with the relationship and/or therapist, positive feelings toward therapist and/or the experience, perception of positive outcome, and desire to re-engage in process. Interrater-reliability was assessed for a subset of manuscripts on two occasions as the operational definition for positive statements was defined, resulting in a 92.11% agreement on identification of positive statements.

Three researchers surveyed the range of positive statements and independently developed categories. Categories were compared and through a consensus process nine categories of themes were identified. Statement fragments were then sorted into categories and sorters’ agreement was assessed.

Results

The nine categories of positive experience that emerged from interview transcripts were: (1) mutual liking/respect in relationship: statements that reflected positive feelings towards the therapist or feelings of being valued, (2) working to achieve/understanding/insight: statements that reflected coming to know oneself in new and adaptive ways of achieving a more accepting understanding of others, (3) comfort/supportive/safe-therapist/space: statements that reflected a sense of security and emotional support, (4) emotional release: statements that reflect the benefits derived from cathartic experience or the feeling of unburdening oneself, (5) outside relationship improvement: statements that reflect enhanced relationship with others achieved through acceptance, insight, and understanding, (6) non-judgmental perspective framing/normalizing: statements that reflected the experience of unconditional positive regard and also the feeling of relief from learning that others have had similar experience, (7) coping skill: statements that reflected the acquisition of specific techniques or interventions that helped alleviate distress,
manage negative emotion, or diminished specific symptoms, (8) general positive affect: non-specific statements that expressed happiness or satisfaction with therapy process or therapeutic outcome, (9) improved symptoms: statements that specifically reflected a reduction or disappearance of symptoms. While sorting statements, categories one and three were collapsed into a single category, as judges determined that many statements could be coded in either category making differentiation unreliable, resulting in eight category types of positive statements clients made regarding therapy and therapy outcome. The implication for maximizing positive therapeutic experiences are discussed.

References


