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Are patient expectations still relevant for psychotherapy process and outcome?

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Abstract

Patient expectations have been regarded as a variable affecting the course of psychotherapy for more than 50 years. Yet, even though expectations are often considered a factor common to most psychotherapy systems, their importance may be undervalued. This paper places the expectancy issue in a historical context, discusses the varied definitions of expectancy, and reviews the extant expectancy research literature. Discussion of results affirms the continuing relevance of patient expectations, suggests that they may be even more vital to the psychotherapy process than is often acknowledged, highlights research strengths and weaknesses, and calls attention to areas on which clinicians and researchers might focus to improve treatment effectiveness.

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1. Introduction

Yogi Berra, the Hall of Fame baseball player, manager, and sometimes mangler of the English language is the subject of a memorable story. It seems that Yogi was managing a game 1 day when one

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of his players was called out in a close play at second base. Incensed, Yogi raced from the dugout screaming at the umpire that the player was safe. Taken aback, the umpire yelled at Yogi, "How can you possibly question the call. I witnessed the play from within two or three feet while you were in the dugout more than 120 feet away!"

Yogi shouted back, "I wouldn't have seen it if I didn't believe it".

Though Yogi garbled a familiar maxim, he had stumbled upon an observation that generations of psychologists have empirically verified. Namely, that expectations frequently shape our experiences and perceptions. This hypothesis has been supported by an array of classic studies appearing in the social psychology literature, where it was demonstrated that what a person perceives is often determined by what they feel they should see. That is, there is a tendency to distort objective interpersonal encounters to conform to prior expectations and theories (e.g., Asch, 1946; Farina & Ring, 1965; Kelley, 1950; Secord, 1958).

Of particular interest here, though, is the more focused question of do patient expectations affect the course and outcome of psychotherapy? Can social psychological findings concerning expectation, perception, and interpersonal influence be extrapolated to the clinical arena? Past research suggests that the answer to this question is "yes." For example, several years ago the first author of this paper and several colleagues published a series of studies examining whether pre-session information given to participants influenced how they later experienced and interpreted a variety of clinical situations (Greenberg, 1969; Greenberg, Goldstein, & Gable, 1971; Greenberg, Goldstein, & Perry, 1970; Greenberg & Land, 1971). These studies demonstrated that even small variations in how a clinician was described to participants (before they met or listened to him) had substantial effects on how he was later perceived and received. The effect was replicated in college students, psychotic patients, disturbed high school students in a residential treatment center, and people being hypnotized. In general, those led to believe that the clinician had the positive personality attribute "warmth" turned out to be more attracted to him, more receptive to his influence, more persuaded by his communications, and more willing to meet with him.

Interest in the issue of how expectations affect psychotherapy has been around for over 50 years, with a number of authors in the 1950s, 1960s, and early 1970s calling attention to the clinical importance of this variable (e.g., Frank, 1958, 1968, 1973; Goldstein, 1960a, 1960b, 1962a, 1962b; Goldstein & Shipman, 1961; Rosenthal & Frank, 1956). A basic question repeatedly posed in much of the writing has been: Do the expectations of patients about whether they are likely to benefit from psychotherapy influence how successful the treatment will be? The answer to the question, both theoretically and empirically, has been a qualified "yes," with studies focusing on both naturally occurring pre-therapy expectations and those induced in patients by giving them information designed to heighten positive expectations.

Frank's (1973) suggestion that mobilization of hope and positive expectation is a key factor in many forms of healing has had an enduring impact on psychotherapy thinking and research. In fact, his emphasis on the overriding importance of factors common to all therapies as being more important than the techniques specific to individual approaches for achieving positive outcomes has a history that can be traced from the 1930s (Rosenzweig, 1936) up to support in the more contemporary literature (Ahn & Wampold, 2001; Hubble, Duncan, & Miller, 1999; Wampold, 2001). Goldfried (1980), for example, identified expectation of improvement as one of five pantheoretical principles of change that have received empirical backing and should thus be emphasized across all forms of psychotherapy. In their review of the common factors literature, Grencavage and Norcross (1990) also identified patient positive

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