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▶ Adapting psychotherapy to the individual patient: Coping style.

Beutler L.E., Harwood M.T., Kimpara S. et al. Request reprint Journal of Clinical Psychology: 2011, 67(2), p. 176–183.

Meta-analytic review commissioned by a US task force concludes that externalising patients are best matched to psychotherapies focused on skill-building and symptom change, while those characterised by self-criticism and emotional avoidance benefit most from interpersonally focused and insight-oriented approaches.

Original abstract The fit of the patient's coping style to the focus of psychotherapy has been suggested as a means of improving treatment outcome. This article reviews the definitions, measures, and previous research surrounding this hypothesis. An original meta-analysis of 12 carefully selected studies (including several concerned with drinking or drug problems) involving 1291 patients resulted in an adjusted weighted average effect size of 0.55 in favour of matching externalising patients to symptom-focused therapies which rely largely on enhancing skill development and encouraging direct symptom change or, alternatively, matching internalising patients to insight-focused treatments which seek to enhance the patient's insight or awareness. This medium-sized effect indicates that the average, well-matched treatment produced 8% better outcomes than a randomly matched treatment. In other words, the average patient engaged in a therapy well matched to their coping style was better off than 58% of those with a random match. The findings were consistent across all the relevant studies, all of which found interpersonal and insight-oriented therapies are more effective among internalising patients, whereas symptom-focused and skill-building therapies are more effective among externalising patients. Such findings indicate that non-diagnostic patient factors like coping style are important considerations in the selection of effective therapies.

Clinical examples and clinical recommendations are provided, including the recommendation that patients who manifest externalising tendencies can be provided with treatments that are focused on skill-building and symptom change, while those who manifest patterns of self-criticism and emotional avoidance are more likely to benefit

from interpersonally focused and insight-oriented treatment. However, even with internalising patients, research suggests there is value in beginning treatment with direct, symptom-focused methods. As the coping style of the patient becomes clear, it may be optimal to switch to a more indirect, insight-focused approach if that patient's style is weighted toward internalising.

FINDINGS This article was in a special issue of the *Journal of Clinical Psychology* devoted to adapting psychotherapy to the individual patient. For other Findings entries from this issue see:

- ▶ What works for whom: tailoring psychotherapy to the person
- ▶ Adapting psychotherapy to the individual patient: Stages of change
- ▶ Adapting psychotherapy to the individual patient: Preferences
- ▶ Adapting psychotherapy to the individual patient: Culture
- ▶ Adapting psychotherapy to the individual patient: Expectations
- ▶ Adapting psychotherapy to the individual patient: Attachment style
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