



**Therapies that stick:
therapies that work for you, not your insurance company's bottom line**

In most industries, marketing and advertising work – especially when backed by lots of spending – and psychotherapy is no exception. In the world of psychotherapy, insurance companies and pharmaceutical companies spend heavily, both in terms of marketing and lobbying, and they are spending so you cost them less. The less you use your insurance benefits, the more money they make. So it's no surprise to see industry support for short-term treatments (like time-limited, structured psychotherapy or medication). And for them, the shorter, the better. For you? It's not much of a surprise that complex emotional or psychological problems take some time to sort out and improve. It also isn't much of a surprise that the marketing messages of these big industries don't tell the full story.

They see therapies of depth, insight and relationship, and they see costs eating into their profits.

We see therapies of depth, insight and relationships, and we see a path to richer, freer life.

Research consistently shows that therapies of depth, insight and relationship are evidence-based treatments that are highly effective in the short- and long-term, and also offer special additional benefits. They are individualized to each patient, and view the therapeutic relationship as central to healing -- which is what the research consistently tells us is most important. Their definition of success is aligned with what most people are looking for out of therapy, and life – better self-esteem, more resilience, improved relationships, more satisfaction in love and work. Also, they are more effective than other treatments when it comes to personality and relationship issues, and they are the only ones shown to offer enduring results.

If we review the whole body of research on psychotherapy outcomes, several clear trends emerge. The evidence underlying short-term, structured treatments (such as CBT and its family of therapies) has significant flaws in many areas, such as research design, researcher bias, publication bias, and assumptions that psychotherapy can be studied with the same tools (RCT) in the same time frame and with the same variables as pharmaceutical testing. These flaws in the evidence base contribute to current estimates that CBT is 50-75% less effective than initially thought – far from “gold-standard” status.

Decades of research also clearly show that effective therapy takes time. Meaningful change starts to occur around the six-month mark, and only increases from there. With a

year of therapy, many individuals show significant improvement, and with two years of therapy, they benefit even more. These results have been found in many studies across large numbers of people – from an early study by Consumer Reports, to a comprehensive study of 10,000 people. This is not to say that all people or all problems require this much time; some may require less, some more. But, it does clearly show all the more reason that research studies of 8-10 weeks in duration are misleading and non-representative of the experiences of real-world people. And if people do not have full information that many complex problems take time to resolve, then they will quickly feel like personal failures if they are still suffering after those 8-10 weeks of treatment.

So, let's stop listening to those ads and big corporations, and let's stick to what really works. What we want people to know is that there are multiple types of treatments that work, that many problems are complex – often generations in the making – and that treatment that is useful in the long term can take time. People should expect more from therapy than symptom relief; if they invest the time and work together with their therapist, they should be able to achieve meaningful improvements not only in their symptoms, but in vital aspects of their life – their sense of self, their personal and professional relationships, their capacity to cope with adversity. And they should expect and deserve these benefits to endure and stick with them, well after they leave their last therapy session.

-- Linda Michaels, PsyD MBA
Chicago, IL