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Contents

Observations regarding clients' expectations and the reality of psychotherapy

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ABSTRACT

Aim of the present study was to observe the gap between clients' expectations from psychological counseling and what it actually has to offer. Five of my psychotherapy clients' records, whose feedback interviews had been conducted during and after the termination of their sessions, were retrospectively analyzed with the aim serving as referral point. It was found that there are many misconceptions among lay people about the realm of psychology, and psychotherapy to be more precise. Also, those who are aware of the process and its different aspects seem to benefit better from it; however there can be many factors contributing to this variance in improvement among different people, which were beyond the scope of the present study. These factors have been mentioned sparingly. Suggestions for enhancing awareness about psychotherapy and for further research are included.

KEYWORDS

Misconceptions, psychotherapy, expectations

INTRODUCTION

Client expectations about counseling and psychotherapy are widely believed to influence the therapy process and outcome. Theorists from disparate theoretical persuasions have included expectations as a central construct in their theories. Research on the common factors that account for much of the success of psychotherapy confirms the influence of client expectations [1].

Psychotherapy, also known as talk therapy, refers to techniques that help people change behaviors, thoughts, and emotions that cause problems or distress. It is an umbrella term that describes treating psychological disorders and mental distress through verbal and psychological techniques. (Verywellmind.com). Clients seeking psychotherapy may not voice expectations or even be aware of them but nevertheless preconceived ideas impact the way they engage in treatment, interact with their provider and, ultimately, their success and satisfaction with treatment [2]. Hence, it is important to study the gap between the expectations of clients regarding psychological counseling and what such counselling actually offers. It is hoped that the present study will help dispel myths surrounding psychotherapy among general population and better prepare plus motivate those who require psychological counseling to seek the same, and, for the right reasons & with correct assumptions (for better results, ultimately).

The value of psychotherapy process research is rooted in the assumption that psychotherapy works. There are seemingly limited benefits to understanding the process of psychotherapy if

psychotherapy is not effective in general. Eysenck (1952) reviewed reports on the effectiveness of psychotherapy for the treatment of neurosis and concluded that therapy did not aid in symptom reduction above and beyond what was the estimated rate of improvement without treatment. However, subsequent to Eysenck's (1952) review, great changes were made in the development and evaluation of therapies. More recent evidence points to the conclusion that a broad range of therapies can produce substantial improvement in clients' symptoms for a variety of disorders (Nathan & Gorman, 1998). Given this conclusion about the general effectiveness of psychotherapy, psychotherapy process research seems to be a justified and valuable domain of exploration. One primary benefit of investigating the process of therapy is the potential for identifying the more salient components of therapy that can affect outcome. Expectations about therapy is one process variable that has a long history, and will be the focus of this study, too. (Shappell, 2004)

MATERIAL & METHODS

Feedback interviews conducted with five of my clients during the period 2010 to 2015 are analyzed for themes indicating their expectations before they started psychotherapy, during and after termination of the same. First client was a senior secondary school student, and the other four were at least graduates. Patients are denoted in the table by codes to ensure confidentiality; the chief psychological issues as mentioned by them in the beginning sessions and the % of improvement as quoted by themselves after therapy are mentioned for possibility of findings other than the main agenda of the study. To keep it gender neutral, every client is referred to as 'she/her'.

PATIENT / CLIENT CODE	CHIEF PSYCHOLOGICAL ISSUES AS MENTIONED BY CLIENT(S)	% OF IMOPROVEMENT
ABC	EXAM ANXIETY	60%
DEF	RELATIONSHIPS	50%
GHI	SADNESS	80%
JKL	LOSS OF BROTHER (GRIEF)	80%
MNO	STRESS	75%

RESULTS & OBSERVATIONS

ABC had come seeking cure for exam anxiety upon being pressurized by family members. The client had been unwilling to come because she thought that therapy involved regular lengthy hours which would revolve only around resolving early childhood issues. She just needed some practical tips on managing her anxiety and daily-schedule with the vast syllabi. However, the client shared in the interview (after 4 brief sessions) that with the correct(ed) attitude, a plan B for career in her basket, and well-paced revision of topics, she was feeling better and more confident. Later, she also confided that she had expected her therapist to be 'too neutral' and 'only professional' in approach, but had felt warmly supported and 'surprisingly benefitted' from the sessions.

Through therapy, DEF, a high school teacher, was looking for affirmation that nobody around her was actually concerned about her. There were enough 'proofs'. After six months of

psychotherapy combined with psycho-education, she had an improved self-understanding which led to a 'better compassion' for others, as reported by the client. Her relationships had started improving. She expressed that she had sought therapy willing only to hear that her predicament was beyond solution, and the fault lay entirely in those around her. Introspection had never even occurred to her up till starting counseling.

Troubled by persistent sadness, GHI, a post graduate who was on the look-out for a job was expecting the psychologist to give her a reality check regarding her emotional life, and to receive an understanding of her erroneous thought processes. This comes close to psychotherapy, so, this client had a speedy recovery and better maintenance of obtained results as noticed in some subsequent telephonic conversations. However, she didn't continue therapy once she landed a job to her liking.

JKL had recently lost her brother to suicide and needed a safe space to vent her feelings and share memories. However, as her sessions had progressed, she began to unpeel layer after layer of emotional traumas and erroneous ways of attachments. She was also averse to the suggestion of medication for the fear of dependence. It was slowly but steadily conveyed about benefits of medicines super-ceding disadvantages in certain situations. "Before every session, I'd feel plus hope that it would be the last one, but every time it took me on a journey of self-discovery thus making me come back". JKL wasn't aware initially that it would be continuous hard work, but with progression of sessions allowed herself to be vulnerable and curious, thus producing better results for herself.

MNO had stress concerns regarding her job. She was serving in an MNC. She had believed that therapy would be learning meditation, yoga and just progressive muscle relaxation (the last one, as her online search had presented to her). After around fifteen sessions, she reported being better equipped with skills like assertiveness, self-care, prioritization, time-management, and setting boundaries. Upon termination of the sessions, she had specifically indicated that she would keep the option to come back for counselling open for herself in future, as it had 'offerred more than she had expected from the process'.

DISCUSSION

In a study by Armstrong, Sarah & Wammes et al (2018), participants found psychiatric treatment more complex than they had anticipated, but ultimately experienced strengthening of agency and a change in perspective. Though this was study was about psychiatric care, it can easily be said that my study and observations highlight similar results for psychotherapy. In another study by Benbenishty R, Schul Y (1987) the main findings were that there were discrepancies in expectations between therapists and clients, especially with regard to therapists' behaviours.

There can be factors affecting clients' awareness regarding the process of psychotherapy like education, age, ethnicity, demographics, previous experience(s) with psychologists etc, that, in turn, also affect patient compliance, adherence to treatment and ultimately, impact recovery and results. While keeping these (and more) factors in consideration, further research can be undertaken.

Theorists also view expectations as central to the success of psychotherapy. Clients' expectations influence their decision to enter into and remain in therapy and they moderate the effectiveness of therapy. Clients approach therapy with expectancies regarding the nature of therapy and the roles they and their counselors will assume. Counselors' and clients' expectations are important determinants of their behavior in counseling [1].

While beginning psychotherapy clients also might not be cognizant of the fact that the process is going to be slow-paced, and hard work for both the client and the therapist. One might be expecting a quick fix, or simply a temporary catharsis. Psychological counseling is more beneficial when regular sessions are taken, and change aimed at deeper levels of sub-conscious instead of just superficial and symptomatic relief.

It also might not be an overstatement to say that the more the general population is aware of the realities of psychological counseling, the more are the chances of their seeking it, and also benefitting from it. Seminars, blogs, articles in newspapers and magazines, discussions, reducing the stigma around mental health support etc are some of the ways it can be, and should be achieved.

SUGESTIONS FOR FURTHER RESEARCH

- To what extent does the gap between expectations and realities of counseling affect results? Relations can be drawn between these.
- Is improvement ALWAYS better when patients are aware of the psychotherapeutic process? What are the other factors involved?

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