

Evidence-based, evidence-informed,  
evidence-supported:  
What's the difference & do we care?

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One misperception of evidence-based psychotherapy use is that in order to be useful, the evidence must be from a randomized controlled trial, which is typically challenging for many fields but particularly for psychotherapies. In fact, the evidence supporting the wide variety of psychotherapies available can include numerous methodologies as long as the evidence is assessed and applied appropriately in clinical decision-making [25]. Ideally, practitioners who actively employ EBPs save time, money, and resources by avoiding treatments with little or questionable effectiveness for their patients.

# Evidence-based practice (EBP)

- The evidence-based practice (EBP) model emphasizes the use of a hierarchy of evidence:
  1. “Gold standard” the randomized control trial (RCT)
  2. Quasi-experimental studies
  3. Correlational studies
  4. Qualitative studies
  5. Case studies

(Roberts & Yeager, 2004)

# EBP, Psychotherapy & the American Psychological Association

“Evidence-based practice in psychology (EBPP) is the integration of the best available research with clinical expertise in the context of patient characteristics, culture, and preferences. This definition of EBPP closely parallels the definition of evidence-based practice adopted by the Institute of Medicine (2001, p. 147) as adapted from Sackett and colleagues (2000): “Evidence-based practice is the integration of best research evidence with clinical expertise and patient values.”

APA (2005). Retrieved from: [www.apa.org/practice/guidelines/evidence-based-statement](http://www.apa.org/practice/guidelines/evidence-based-statement)

# Evidence Based Practice

Clinical Expertise

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graph TD; CE[Clinical Expertise] --> EBP[EBP]; BRE[Best Research Evidence] --> EBP; PVP[Patient Values Preferences] --> EBP;
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Best  
Research  
Evidence

**EBP**

Patient  
Values  
Preferences

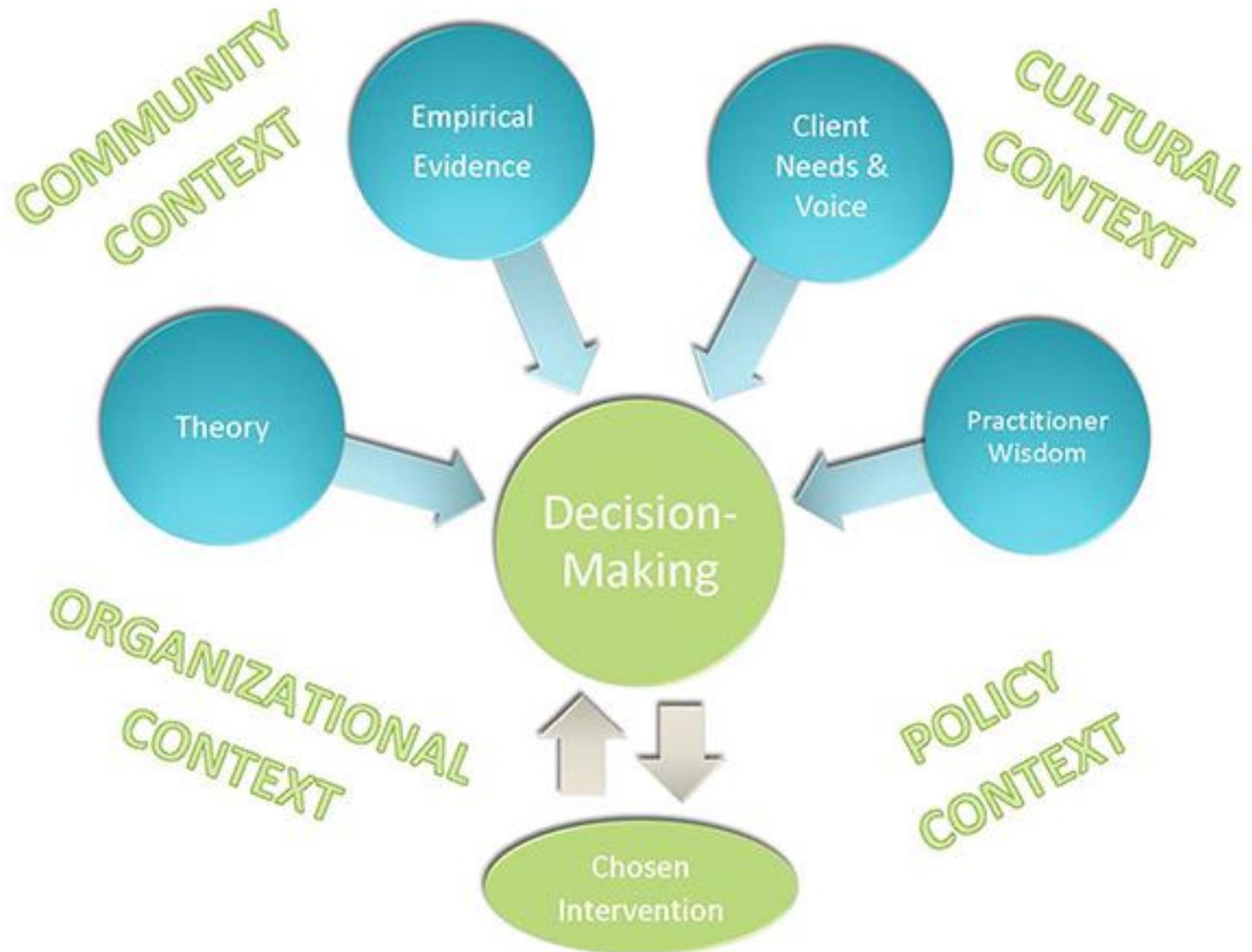


Figure 1. Evidence-informed practice, from Dodd & Savage (2014)

# Language has changed

- In the 1990s, EBP first became a “hot topic” in medicine; other helping professions soon followed such as education, nursing, public health (Cook, Schwartz, & Kaslow, 2017; Sackett, 1996)
- Evidence-based practice & evidence-informed practice were originally used as different terms for essentially the same concepts (e.g., Gambrill, 2008, 2010)
  - Later, EBP & EIP began to be defined very differently (e.g., Epstein, 2009; Haight, 2010; Shlonsky & Mildon, 2014)

# Evidence-informed practice

- Incorporates best available research evidence; client's needs, values, and preferences; practitioner wisdom; and theory into the clinical decision-making process, all filtered through the lens of client, agency, and community culture

(Dodd & Savage, 2016)

# The evidence-informed practice cycle

Determining the issue [i.e., the presenting problem]

Accessing & appraising evidence

Identifying practice implications

Implementing

Reviewing and formulating

(Petch, 2010, p. 33)

# Reality Therapy

## Strengths

- Expertise – has training program
- Client values and preferences
- European Association of Psychotherapy has endorsed & re-endorsed it
- Textbook endorsements, e.g.
  - “Psychotherapists are ultimately responsible for ensuring that an adequate body of empirical research exists documenting the validity of their theoretical approach and assuring their clients and others of that fact. Even if you are developing the skill and the knowledge needed to form that judgment, you should feel at ease moving forward with your study of the theoretical approaches covered in this book.”

(Tinsley, Lease, & Giffin Wiersma, 2016, p. 466)

## Challenges

- Need Randomized Controlled Trials & quasi-experimental research to support the body of current research
  - Although we do have much research, e.g., Rose Inza Kim; Leon Lojk; IJCTRT

# Therapeutic Alliance

“The therapeutic relationship accounts for why patients improve, or fail to improve, at least as much as the particular treatment method” (Cook et al., 2017, p. 540)

Pay attention to the therapeutic relationship. It is central to all effective counseling. (Forrest, 2021)

Relationship, goals, strategies, mutually agreed upon by client and counselor in EIP – and in EBP according to the APA

# How do we define & use terms now?

- Evidence-informed practice
  - intervention models that have been assessed using at least some systematic empirical inquiry and have shown positive results
- Evidence-based practice
  - has specifically designed criteria for evidence (e.g., at least 1 randomized clinical trial test yielding favorable results)
- Evidence supported interventions
  - have been demonstrated to be effective preferably via randomized clinical trials or systematic reviews

# Additional considerations: Quality Schools

Allow for flexibility –  
evidence-based *seems*  
to be a fluid concept

What are the  
implications for  
Education?

school building

classroom

relationships

individual class lessons

etc.

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