

Robert Elliott

Politics & Evidence:
Some Directions
Forward



Moving Goal Posts

- Over the past 25 years, meta-analytic methods and standards have developed significantly:
 - PRISMA standards, including tracking sources
 - New statistical methods: weighting methods, Cochrane's Q, random effects models, funnel plots, I^2 , fail safe numbers, network analysis



“We already have enough good studies.” –Steve Pilling, dismissing pre-post open clinical trial studies for the NICE Social Anxiety guideline, 2011

Moving Goal Posts

- These methods have made meta-analyses increasingly technical and less transparent, i.e., harder for nonexperts to follow
- At the same time, the requirements set by reviewing bodies have become ever more arbitrarily stringent
 - Requiring multiple meta-analyses
 - “Bias ratings” for excluding unwanted studies
 - Intent-to-treat designs
- Consistently favour the approaches with more funding for research and therefore more studies and meta-analyses, i.e., CBT

➤ Critique of Current Evidence Review Process for Clinical Practice Guidelines

- 1. Mono-method bias: Only one kind of evidence is used: Comparative Randomized Clinical Trials (RCTs)
 - But this design is highly vulnerable to researcher allegiance effects
 - Typically only compares post-test scores, ignoring pre-treatment differences (randomization failure, differential attrition)
 - Analyse only a single “primary outcome measure” per study

➤ Critique of Current Evidence Review Process for Clinical Practice Guidelines

- 2. Latest development: Network Meta-analysis
 - Basis of current disputed draft NICE depression guideline
 - Highly opaque method for generating simulations of nonexistent comparative outcome trials
 - Based on the ridiculous assumption that all versions of a treatment and all client samples in a given set of studies are equivalent

➤ Critique of Current Evidence Review Process for Clinical Practice Guidelines

- 3. The NICE Guideline development process is corrupt and unscientific
 - Controlled by a small number of powerful people
 - Enabling legislation forbids legal challenges
 - “Power tends to corrupt; absolute power corrupts absolutely.”
–Lord Acton



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Directions Forward



Direction 1: Developing an Evidence Base for Marginalised or Emerging Psychotherapies

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HONORARY PAPER

Looking both ways

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Abstract

On the occasion of the 25th anniversary of the journal, *Psychotherapy Research*, three former editors first look back at: (i) the controversial persistence of the Dodo verdict (i.e., the observation that all bona fide therapies seem equally effective); (ii) the connection between process and outcome; (iii) the move toward methodological pluralism; and (iv) the politicization of the field around evidence-based practice and treatment guidelines. We then look forward to the next 25 years, suggesting that it would be promising to focus on three areas: (i) systematic theory-building research; (ii) renewed attention to fine-grained study of therapist techniques; and (iii) politically expedient research on the outcomes of marginalized or emerging therapies.

Direction 1: Developing an Evidence Base for Marginalised or Emerging Psychotherapies

- Step 1: Pick an interesting therapeutic approach and/or client population
- Step 2: Conduct a series of mixed methods systematic single case studies (e.g., Hermeneutic Single Case Efficacy Design) => develop theory-practice formulation
- Step 3: Form a Practitioner Research Network (PRN) to create a larger real-world practice-based study => generate population parameter estimates of client pre-post change

Direction 1: Developing an Evidence Base for Marginalised or Emerging Psychotherapies

- Step 4: Conduct a small- to medium-sized randomized feasibility study => provide initial evidence of causality
- Step 5: Form alliances with proponents of more established approaches and get funding for a large randomized trial
- Step 6: Do political networking; get on guideline development groups in sufficient numbers to make an impact

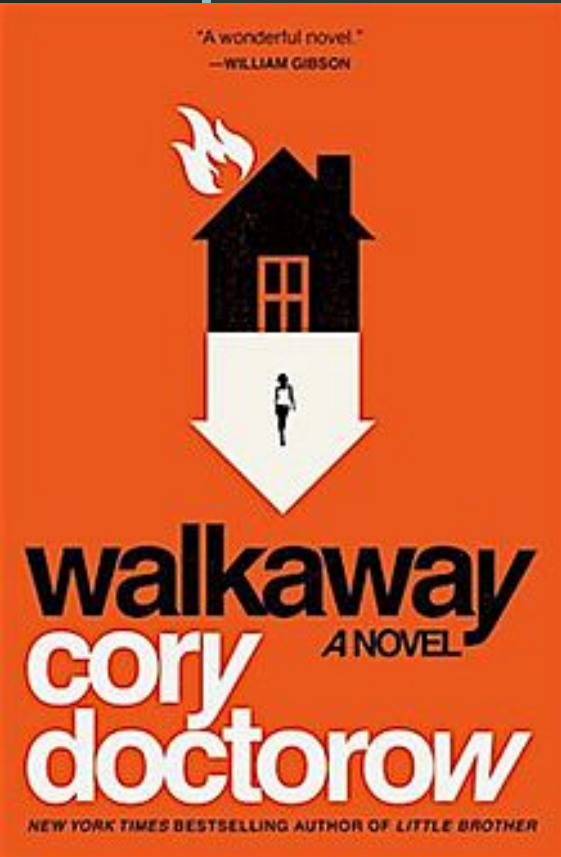
"A wonderful novel."
—WILLIAM GIBSON



walkaway
A NOVEL
cory
doctorow

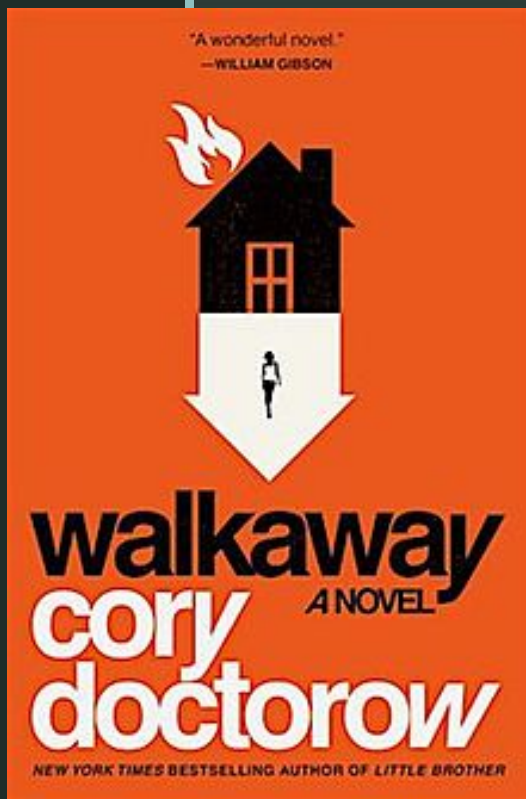
NEW YORK TIMES BESTSELLING AUTHOR OF LITTLE BROTHER

Direction 2: The Walkaway Strategy



Direction 2: The Walkaway Strategy

- Cory Doctorow's *Walkaway* (2017): an “optimistic sci-fi disaster epic full of big ideas” (Sean Gallager, *Ars Technica* website)
- In a world of non-work, ruined by human-created climate change and pollution, and where people are under surveillance and ruled over by a mega-rich elite, Hubert, Etc, his friend Seth, and Natalie, decide that they have nothing to lose by turning their backs and walking away from the everyday world or "default reality".



Direction 2: The Walkaway Strategy

- If mental health guideline development processes have been corrupted and misused in most countries
- Then maybe we need to walk away from them and create better, less corrupt institutions for integrating research evidence to develop guidelines for psychotherapy practice.



Developing Our Own Mental Health Guidelines Development Process: Principles

- 1. Require multiple lines of evidence
 - Practice-based and RCTs
 - Quantitative and qualitative
 - Develop standards to using systematic case study evidence of efficacy
- 2. Take researcher allegiance seriously
 - Allegiance-balanced review panels

Developing Our Own Mental Health Guidelines Development Process: Principles

- 3. Look at change across a range of measures/ procedures
 - Not just single “primary” outcome measures
 - Qualitative change assessment
- 4. Specify the client population
 - Presenting issues
 - Recognise presence of multiple presentations



Developing Our Own Mental Health Guidelines Development Process: Principles

5. Go beyond "brand names": Require change process research evidence to back up key theoretical change processes, e.g.,

- Empathy in PCT
- Acceptance procedures in ACT
- Emotion work in EFT
- Cognitive restructuring work or behavioural tasks in CBT