

SECOND EDITION



RESEARCH METHODS IN CLINICAL PSYCHOLOGY

An Introduction for Students and Practitioners

Second Edition

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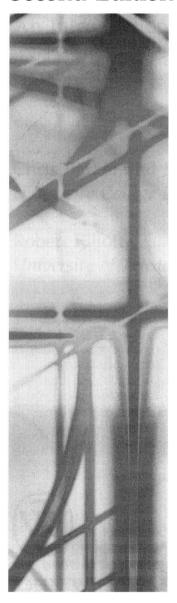
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RESEARCH METHODS
IN CLINICAL PSYCHOLOGY
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There is a dedicated website for this book on www.wileyeurope.com/go/barker containing supplementary material on clinical psychology research methods for instructors, students, and general readers.



PREFACE

The first edition of this text was written in the early 1990s. Since then, the field of clinical research methods has continued to develop rapidly, and this second edition has been extensively updated to reflect these developments. We have also tried to make the whole book more user friendly, both in layout and in content. All chapters now have summaries and boxes highlighting the key points, and we have provided many more illustrative examples.

The biggest area of change is in our treatment of qualitative methods. There have been massive changes in clinical psychologists' attitudes to qualitative research over the last decade. When we wrote the first edition, qualitative methods were seen as rather daring and controversial; now they have become much more part of the mainstream. The first edition tried to give a balanced account of both quantitative and qualitative methods within a unifying framework. We espoused a methodological pluralism: a philosophy of fitting the research method to the research question. We still adhere to this pluralist position. However, new approaches to qualitative research have been developed, and old ones have become more clearly articulated. On a personal level, all three of us have now got several more qualitative research projects under our belts, and also have read more broadly in the area, so we are much more aware of the theoretical and practical issues in this genre of research. The present edition, therefore, has a new chapter on the fundamentals of qualitative research (Chapter 5), and a revised discussion of qualitative interviewing (Chapter 6) and analysis (Chapter 12).

Other recent ideas that we have tried to reflect include the topics of evidence-based practice, empirically supported therapies, and the like. Writings on these topics raise the issue of the relative value of effectiveness versus efficacy studies, which we consider in Chapters 8 and 11. In line with the emphasis on evidence-based practice, we have also expanded the treatment of psychometric theory, in particular to give a clearer treatment of validity issues. However, we have not neglected the important philosophy of science issues raised by these approaches and their critics.

Preparing the first edition of the book, as a transatlantic cooperation, was made much simpler by the use of email. However, at that time, the world wide web was barely functioning: there is not a single website mentioned in the first edition of the book. The internet has changed how research is approached, and at the time of writing, new technologies are being announced weekly. So we have made this edition more internet friendly, by including useful websites where possible.

We have continued to focus exclusively on examples from English-language publications and clinical examples from the US and the UK, not out of choice but because these sources represent our primary knowledge base. We are aware that the first edition was used widely around the world, in many non-English speaking countries. We hope that international readers will continue to forgive our anglocentrism; we only wish that we had more international experience to draw upon.

Another aspect of the book's being a transatlantic enterprise is that we have had to struggle with terminology and forms of expression. As George Bernard Shaw was reported to have said, the US and the UK are divided by a common language. This is certainly true in psychology as well as in everyday speech. Where different US and UK terms exist for the same things (e.g., "mental retardation" in the US is equivalent to "intellectual disabilities" in the UK), we have tried to use them both. However, it is possible that in trying to satisfy readers from both sides of the Atlantic, we may have ended up by not satisfying anyone!

We have simplified the title of the book for this edition, having reluctantly dropped the word "counseling". We obviously still welcome counseling psychologist readers, as we do readers from other applied areas: e.g., community, health, or occupational psychologists. The first edition of the text also ended up being used by members of other professions, such as doctors and nurses, and by graduate students in other disciplines, such as anthropology or architecture. So it seemed simpler to focus it around clinical psychology, our primary professional allegiance, but to state clearly that we intend this second edition to be used by counseling psychologists, and by other types of applied psychologists, and by colleagues and students in related disciplines. We always welcome a dialogue with our readers; do email us with your comments, criticisms, and suggestions.

Many friends, colleagues, and students, too numerous to mention individually, gave us encouraging and constructive feedback on the first edition. Many thanks to the following colleagues who helped us with this second edition: Chris Brewin, John Cape, Kate Cheney, Pasco Fearon, Dick Hallam, David Shapiro, and Jonathan Smith. We are indebted to Anna Barker for saving us hours of work with the indexing. Thanks also to Vivien Ward, Lesley Valerio, and the rest of the team at John Wiley for all their encouragement and assistance in helping us to make the book as user friendly as possible. However, any errors or omissions still lurking in the text remain our responsibility alone. Emory Cowen, a prominent American psychologist, once said that he was well qualified to write about errors in research, since he had committed most of them himself (Cowen, 1978). It is a sentiment that we all echo.

Finally, thanks once again to our families for putting up with our authorship travails and especially for providing a welcome relief from the world of psychology.



PREFACE FROM THE FIRST EDITION

This book has grown out of our experience in teaching research methods, advising mental health professionals who were struggling to conduct research, and carrying out research projects ourselves. It aims to help readers become both better consumers and better producers of research in clinical and counseling psychology. We hope that, at a minimum, it will encourage and enable practitioners to read research reports critically and to evaluate a study's strengths and weaknesses. We further hope to inspire at least some of our readers to produce research themselves. In addition to teaching the tools of the trade, we will try to convince readers that doing research can be stimulating, challenging, and fun.

The book presents a practical description of the research process, using a chronological framework. It takes readers through the sequence of steps involved in executing a project: groundwork, measurement, design, analysis, and interpretation. In addition to these technical aspects of research, the book also addresses some essential background issues, such as the underlying philosophy of the various research methods. We also look at sociopolitical issues, since clinical and counseling research is often conducted in working service settings and it is potentially threatening as well as illuminating. For simplicity, the book has been written from the perspective of producers rather than consumers of research, but we intend it to be of equal use to both audiences.

We have tried to be comprehensive in terms of breadth, but not in terms of depth: there are entire books covering material which we encompass in a chapter. We cover the essential areas and guide the interested reader towards more specialized literature as appropriate. Most of the statistical aspects of research methods are omitted, since this is a separate field in itself. We have aimed the book at clinical and counseling psychology students and practitioners; others who might find it useful are students and practitioners in health and community psychology, counselling, psychiatry, psychiatric nursing, and social work.

The terms therapy, psychotherapy and counseling will mostly be used interchangeably to refer to face-to-face work with clients. Where a broader sense of the psychologist's role is intended, e.g., to encompass prevention or consultation, we will use the terms clinical work or psychological intervention. All three of us have worked in both clinical and counseling settings and we publish in both clinical and counseling journals. We regard the different labels as more indicative of differences in training and professional allegiance than

differences in the work done with clients. However, for even-handedness, we tend to use the phrase clinical and counseling psychologists, except where it is too cumbersome, in which case we say clinician, counsellor or therapist alone for convenience. Whatever, the language, we always have in mind anyone engaged in clinical, counseling or psychotherapeutic work.

The book addresses those issues faced by clinical and counseling psychologists who do research that are not covered in the more general social and behavioural science research texts. The advantage of having a clinical or counseling psychology training is that you are likely to conduct research with more practical relevance, to ask less superficial questions and to have a strong sense of the complexities of human experience and behaviour. The interviewing skills acquired in clinical and counseling training are also helpful in doing research, but research and therapeutic interviews have crucial differences; therefore researchers may need to unlearn certain interventions used in therapeutic settings. Being trained in clinical or counseling psychology also makes one aware of the tension between the scientific and the therapeutic stance: in the former case looking for generalities, in the latter uniqueness. Throughout the book, we have tried to place research methods in the clinical and counseling context.

Two central assumptions inform our work. The first is methodological pluralism: that different methods are appropriate to different problems and research questions. Until recently, research methods were largely segmented along the lines of academic disciplines. Sociologists and anthropologists tended to use qualitative methods, such as ethnography or participant observation, whereas psychologists stuck almost exclusively to quantitative methods. Now, however, a significant change is under way, in that psychologists are beginning to regard a variety of research methods, including qualitative ones, as part of their toolkit. For each topic area, such as interviewing or observation, we present the strengths and weaknesses of the various methodological options, quantitative and qualitative. We have tried to be even-handed, to present the arguments and let readers decide for themselves what is best for their particular application. As in our work with clients, we hope to be empowering, to give skills, present options, and let our readers make informed choices.

Our second assumption is the importance of the scientist-practitioner model: that clinical and counseling psychologists should be trained to be both competent clinicians and competent researchers (although we hold a broader view of what is scientific than was implicit in the original discussion of the scientist-practitioner model). This model encapsulates the unique contribution psychologists can make to service settings and to the academic development of the field. In practice, many applied psychologists feel that they do not have sufficient research skills, and good intentions to conduct research fail to come to fruition. This book aims to help such practitioners.

The three of us met in the mid-1970s as graduate students on the UCLA clinical psychology PhD program, where we worked together in the Interpersonal Process Research Group. The book bears the hallmark of the excellent eclectic scientist-practitioner training we received at UCLA, but also evidences our

struggles against some of the constraints of our professional socialisation. Our own research has continued to be broadly focused on interpersonal processes: such areas as client-therapist interaction, informal helping and couples' communication are what we get excited about. We have inevitably drawn heavily on these areas for our examples, but have tried to make the discussion of general relevance. Our approach to research is strongly influenced by humanistic values: we believe that it is possible to do rigorous psychological research without being reductionist or making a travesty of the phenomenon under study.

We would like to thank the friends and colleagues who helped us by discussing ideas, supplying references and commenting on drafts: John Cape, Lorna Champion, Linda Clare, Neil Devlin, Jerry Goodman (for the slogan "research is fun"), Les Greenberg, Dick Hallam, Maria Koutantji, David Rennie, Laura Rice, Joe Schwartz, and Pam Smith. Mark Williams and Connie Hammen provided incisive and helpful reviews of the manuscript. The team at Wiley were consistently supportive: Michael Coombs helped us to get the project off the ground, and Wendy Hudlass, our publishing editor, was a constant source of encouragement and help as the project progressed. Thanks also to our students, who inspired us to develop and clarify our thinking about clinical research and whose encouraging comments on early drafts helped to sustain us. In addition we are grateful to the research participants with whom we have sought to understand the workings of psychological helping processes. Our interactions with them and the data that they have provided have stimulated and challenged us to broaden our scope as researchers. And finally, many thanks to our children, for constantly reminding us that play is at least as important as work.



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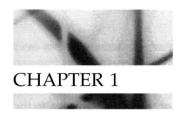
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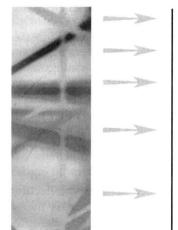
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INTRODUCTION: THE RESEARCH PROCESS

KEY POINTS IN THIS CHAPTER



Research tells a story.

Research raises questions as well as answering them.

There is a vigorous debate within psychology about what constitutes legitimate research.

This text takes a stance of methodological pluralism: of fitting the research method to the research question.

The research process can be divided into four main stages: groundwork, measurement, design, and analysis/interpretation.

Research tells a story. Ideally, it resembles a detective story, which begins with a mystery and ends with its resolution. Researchers have a problem that they want to investigate; the story will reach its happy ending if they find a solution to that problem.

In practice, however, things aren't quite that simple, and the actual picture is closer to an adventure story or traveler's tale (Kvale, 1996), with many unexpected twists and turns. Often, the resolution of a research project is uncertain: it doesn't answer your initial research question, rather it tells you that you were asking the wrong question in the first place, or that the way that you went about answering it was misconceived. You struggle with discouragement and frustration; perhaps you come out of it feeling lucky to have survived the thing with your health and relationships (mostly) intact. So, if you enjoy research and are determined to make a contribution, you organize a sequel, in which you try out a better question with a better designed study, and so it goes on. Another way of putting it is that there are stories within stories, or a continuing series of stories. Each individual research project tells one story, the series of projects conducted by a researcher or a research team forms a larger story, and the development of the whole research area a yet larger story. And

this progression continues up to the level of the history of science and ideas over the centuries.

How a research area develops over time is illustrated in an article by Hammen (1992), whose title, "Life events and depression: The plot thickens", alludes to the mystery-story aspect of research. Her article summarizes her 20-year-long research program into depression. She discusses how her original research drew on rather simplistic cognitive models of depression (e.g., that depression is caused by negative appraisals of events). The findings of early studies led her to modify these models (e.g., to take into account that people's appraisals of events may be negative because the events themselves are negative) and thus to ask more complex questions. Her team is currently working with more sophisticated models, which take into account that individuals may play a role in bringing about the life events that happen to them.

Another way that things are not so simple is that not all researchers agree on what constitutes a legitimate story. The situation in psychology is analogous to developments in literature. On the one hand is the traditional research story, rather like a Victorian novel, which has a clear beginning, middle, and end, and is expected to provide a more or less faithful reflection of reality. On the other hand, in this modern and postmodern age, we encounter narratives that do not follow an orderly chronological sequence or tie up neatly at the end. Furthermore, they may not claim to represent, or may even reject the idea of, reality.

These developments in literature and psychology reflect general intellectual developments during the last century, which have ramifications across many branches of European and English-speaking culture, both artistic and scientific. Our own field of interest, psychology in general and clinical psychology in particular, is currently going through a vigorous debate about the nature of research—that is, which of these narratives we can call research and which are something else. Scholars from various corners of the discipline of psychology (e.g., Carlson, 1972; Richardson, 1996; Rogers, 1985; Sarbin, 1986; Smith et al., 1995) have questioned the validity and usefulness of psychology's version of the traditional story, which has been called "received view" or "old paradigm" research: essentially a quantitative, hypothetico-deductive approach, which relies on linear causal models. These and other critics call for replacing, or at least supplementing, the traditional approach with a more qualitative, discovery-oriented, non-linear approach to research.

This debate, as Kimble (1984) points out, is a contemporary manifestation of William James's (1907) distinction between tough-minded and tender-minded ways of thinking, which is itself a translation into psychological terms of the old debate in philosophy over rationalism (Plato) versus empiricism (Aristotle). However, it is simplistic to view this debate as two-sided, with researchers being either in one camp or the other. It is better viewed as reflecting multiple underlying attitudes, for example, preferences for quantitative versus qualitative methods, attitudes towards exploratory versus confirmatory research questions, experimental control versus real-world relevance, and so on (Kimble, 1984).