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About the Editor-in-Chief

Frederick T. L. Leong, PhD, is a professor of Applied Psychology at the Chinese University of Hong Kong, Shenzhen, China. Previously, he was a professor of psychology at Michigan State University (2006–2021), where he also served as the director of the Consortium for Multicultural Psychology Research. He has authored or coauthored over 300 journal articles and book chapters, and has also edited or coedited 24 books. He is editor-in-chief of the *Encyclopedia of Counseling* (SAGE Publications) and the *APA Handbook of Multicultural Psychology* (APA Books). He is the founding editor of the *Asian American Journal of Psychology* and served as the associate editor of the *American Psychologist* and the *Archives of Scientific Psychology*.

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He is the recipient of the APA Award for Distinguished Contributions to the International Advancement of Psychology, APA Award for Distinguished Service to Psychological Science, Stanley Sue Award for Distinguished Contributions to Diversity in Clinical Psychology from APA's Division 12, APA Division 45 Distinguished Contributions to Research Award, APA Minority Fellowship Program's Dalmas Taylor Distinguished Contributions Award, and Leona Tyler Lifetime Achievement Award from APA Division 17. According to Google Scholar, Dr. Leong's research has been cited 22,268 times with an h-index of 83. He was recently listed among the best psychology scientists (rank 770 out of 1,000) in the United States by Research.com.

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Psychological Association (APA). Dr. Zimmerman is also the editor of *Practice Innovations,* the journal of APA Division 42, Independent Practice. He received his doctorate in clinical psychology from the University of Mississippi (1980). He is a past president of the Connecticut Psychological Association (1993–1994). In 2004, he received the award for Distinguished Contribution to the Practice of Psychology from the Connecticut Psychological Association. In 2009, Dr. Zimmerman received the American Board of Professional Psychology specialty board certification in clinical psychology. In 2010, he was made a Fellow of Division 42 of the APA in recognition of outstanding contributions to the profession of psychology. In 2011, he was made a Fellow of Division 29 of the APA. In 2016, Dr. Zimmerman was awarded the Distinguished Fellowship in the National Academies of Practice and the Psychology Academy, as a Distinguished Practitioner and Fellow. In 2019, he received the Mentoring Award from Division 42 of the APA. Visit Dr. Zimmerman's website at https://JeffZimmermanphd.com/.

Michael J. Constantino, **PhD**, is a professor of psychological and brain sciences at the University of Massachusetts Amherst, where he directs the Psychotherapy Research Lab; teaches graduate and undergraduate courses on psychotherapy research, theory, and practice; and supervises clinicians-in-training. Dr. Constantino's primary scientific contributions include conducting naturalistic psychotherapy effectiveness research, especially related to therapist effectiveness differences; investigating patient, therapist, and dyadic characteristics and in-session processes as predictors, moderators, and/or mediators/mechanisms of psychosocial treatment outcomes; and developing and experimentally testing context-responsive therapeutic interventions. He has published over 190 journal articles and book chapters, and he has received ample extramural grant and contract support for his research. He is also coauthor of *Deliberate Practice in Cognitive Behavioral Therapy* and coeditor of *Principles of Change: How Psychotherapists Implement Research Findings in Practice*. Dr. Constantino has received several early- and midcareer research awards, including from the International Society for Psychotherapy Research, the American Psychological Association's (APA's) Division 29 (Society for the Advancement of Psychotherapy), and the Society for the Exploration of Psychotherapy Integration. He is also an APA Fellow. Among other professional positions, he is currently associate editor for *Psychotherapy* and the *Journal of Consulting and Clinical Psychology*, as well as past-president of both APA Division 29 and the North American Society for Psychotherapy Research. Visit Dr. Constantino's faculty page at https://www.pbs.umass.edu/people/michael-constantino and his lab website at https://sites.google.com/site/constantinotherapyresearchlab/home.

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A Critical Process for Change. Dr. Eubanks is a past president of the Society for the Exploration of Psychotherapy Integration, a Fellow of the Society for the Advancement of Psychotherapy/American Psychological Association (APA) Division 29, past executive officer of the North American chapter of the Society for Psychotherapy Research (SPR), and a previous recipient of early career awards from both APA Division 29 and SPR. She previously served as an associate editor of the *Journal of Clinical and Consulting Psychology* and currently serves as coeditor of the journal *Psychotherapy Research*.

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Introduction

It has been said that psychology has a short history and a long past (Ebbinghaus, 1908). This notion also applies to the psychological subfield of psychotherapy. The short history is represented by the attribution of the founding of psychotherapy to Sigmund Freud's development of psychoanalysis in the late 19th century (Norcross et al., 2011). The long past is represented by the recognition that people have been providing emotional and psychological support and healing to each other since the development of human language and communication. For this current edition of the *APA Handbook of Psychotherapy*, the relevant history is partially tethered to the work of Archie Cochrane (Cochrane, 1979), who developed evidence-based practice in medicine, which eventually inspired the American Psychological Association (APA) position paper on evidence-based practice in psychology (APA, Presidential Task Force on Evidence-Based Practice, 2006). At the same time, this handbook also integrates theories, disorder-specific information, and practice-based evidence into the overarching framework of contemporary research-informed practice.

In this vein, the goal of this handbook is to comprehensively represent the existing field based on the primary ways in which professionals practice psychotherapy and/or try to affect such practice through theory, research, and training. As such, we have organized the book into two volumes and six parts that largely parallel the natural history and development of psychotherapy. Volume 1, Part I focuses on theory-driven practice, whereas Part II covers disorder-driven practice. Volume 1, Part III concludes with transcendent chapters in Part III that focus on ethical considerations (Chapter 28) and future directions in practice (Chapter 29). For Volume 2, Part I covers evidence-based practice, whereas Part II focuses on both practice-based evidence and contextual participant-driven practice, concluding with a chapter (Chapter 19) focusing on implementation. In parallel with the structure of Volume 1, Volume 2, Part III concludes with chapters discussing ethics related to (Chapter 20) and future directions for (Chapter 21) evidence-based practice and practice-based evidence in psychotherapy.

Although these four major practice pathways do not necessarily represent an exhaustive list, they do capture the most representative ways in which psychotherapists would characterize the driving forces behind their foundational therapeutic approaches. To expand, psychotherapists may primarily (a) administer psychotherapy according to a specific theoretical orientation (e.g., person-centered, multicultural), applying this model across most patients and contexts; (b) use a specific, "named" therapy to primarily

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treat patients suffering from a particular mental illness (e.g., mood disorders, eating disorders); (c) draw on varied forms of research to administer psychotherapy in a way that can include, but also transcend, specific theoretical orientations and disorder-specific interventions (e.g., by attending to evidence-based theory-common factors, or by adapting treatment to salient patient identities); or (d) generate data and draw on varied forms of research to administer psychotherapy in a participant-driven and contextually responsive manner (e.g., by intentionally harnessing therapist effectiveness differences, or by meeting patient preferences).

Notably, we view theory, research, practice, and training as inescapably related, and the authors integrate these overarching topics in single chapters. This approach also serves to disrupt the long-standing divide between clinical research and application. More specifically, the chapters represent the most current thinking and evidence on the most relevant topics across the "big four" psychotherapy domains of theory, research, practice, and training—a type of "one-stop shopping" that is representative of any handbook. All four parts have been written for researchers, practitioners, scholars, and trainers, with the major difference among the parts being their emphasis on, and order of, discussing these big four elements.

More specifically, the section on theory-driven practice (Volume 1, Part I) consists of chapters providing a *critical* analysis of the approach that covers the big four domains for each major influential theory. The major theories were selected from existing survey-level texts in the field of psychotherapy. The chapters in this section were organized around the following questions: (a) What is the developmental arc of the theory from classical to contemporary theory (e.g., pioneers, history, challenges, accommodations, revisions, convergences/divergences, limitations)? (b) What is the developmental arc of clinical application of the theory from classical to contemporary practice (e.g., access, cost, populations, format, specialization, expansion, limitations)? (c) What aspects of the theory have been supported by basic and intervention research (e.g., tests of theoretical tenets, absolute efficacy and effectiveness, clinically significant change, dose, deterioration, attrition, process-outcome research, research-informed adaptations, limitations)? and (d) What is the developmental arc of training about the theory from classical to contemporary training (e.g., who trains, who is trained, how, when, evidence, limitations)? To address broader issues, there are two chapters in Part III that elucidate the different levels of Treatment X for Disorder Y analysis by addressing the ethical issues (chapter 28) and future directions (chapter 29). In addition to the disorder-driven treatments, the ethics chapter also addresses the theory-driven treatments.

In the section on disorder-driven practice (Volume 1, Part II), for each major class of psychological disorder, a *critical* analysis of the disorder-specific therapy approach that covers the big four domains is provided. The psychological disorders were selected from an adaptation of the APA Society of Clinical Psychology's (Division 12) list of effective treatments by diagnosis (https://www.div12.org/diagnoses/). The chapters in this section were arranged around the following organizing questions: (a) What is the developmental theory arc of applying Treatment X for Disorder Y from classical to contemporary theory (e.g., pioneers, history, challenges, accommodations, revisions, convergences/divergences, limitations)? (b) What is the developmental practice arc of applying Treatment X for Disorder Y from classical to contemporary practice (e.g., access,

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cost, format, length, specialization, expansion, limitations)? (c) What aspects of Treatment X for Disorder Y have been supported by basic and intervention research (e.g., tests of theoretical tenets, absolute efficacy and effectiveness, clinically significant change, dose, deterioration, attrition, process-outcome research, research-informed adaptations, limitations)? and (d) What is the developmental arc of training on Treatment X for Disorder Y from classical to contemporary training (e.g., who trains, who is trained, how, when, evidence, limitations)? The authors of these chapters also elucidate different levels of Treatment X for Disorder Y analysis into the most *contemporary* practice and training implications and articulate future directions for the development of Treatment X for Disorder Y, as well as for testing with both basic and applied science. In other words, they try to answer the final question—What is the place of Treatment X for Disorder Y in our evolving taxonomy of psychosocial treatment?

In Volume 2, Part I, the section on evidence-based practice consists of chapters that cover different aspects of major developments in psychotherapy research that include, but also transcend, theories and disorder-specific interventions. The chapters in this section address the following questions and themes: (a) Do some theory-specific psychotherapies outperform others (relative efficacy)? (b) Are theory-specific treatment factors responsible for psychotherapeutic change? (c) Are theory-common factors responsible for therapeutic change? (d) Do certain patients respond better to specific forms of psychotherapy? (e) Can psychotherapies and psychotherapists adapt effectively to participant and clinical contexts? (f) Can psychotherapies be effectively adapted to cultural identity? (g) On what can we agree in psychotherapy? (h) How can we most effectively conceptualize and conduct psychotherapy according to evidence-based principles? and (i) What is the current configuration of evidence-based psychotherapy?

In Volume 2, Part II, the section on practice-based evidence and contextual participant-driven practice, the chapters cover different aspects of major developments in psychotherapy research that include, but also transcend, theories and disorder-specific interventions. The chapters in this section address the following questions and themes: (a) Does controlled research on psychotherapy translate to naturalistic practice settings? (b) Do practice-generated data improve psychotherapy effectiveness? (c) Do therapists differ in their general effectiveness? (d) Do clinicians differ in their specific effectiveness? (e) Can we harness therapist effects for therapeutic benefit? (f) Do therapists get better with experience? (g) What is a contemporary patient-centered perspective on psychotherapy processes and outcomes? (h) What are pathways and barriers to implementing evidence-based practice and practice-based evidence in psychotherapy?

In Part III, we have two chapters addressing broader issues: (a) What are the primary ethical considerations of evidence-based practice and practice-based evidence? and (b) What are some primary future directions for psychotherapy research, practice, and training?

With a focus on best practices related to psychotherapy theory, research, practice, and training, we have designed this handbook for a broad audience that includes but is not limited to students, faculty, and clinicians in psychology, clinical social work, marriage and family therapy, counseling, and psychiatry. Additionally, the chapters will be pertinent to professionals at all stages of their career who are looking for information

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about the current state of the art and science of psychotherapy. To our knowledge, this will be the first handbook to present an evidence-based (broadly defined), 360-degree corpus of comprehensive knowledge on the entire field of psychotherapy. We hope it proves to be a valuable resource for the field in terms of guiding, improving, and researching the evidence-based practice of psychotherapy.

—Frederick T. L. Leong
Editor-in-Chief

—Jennifer L. Callahan
Jeffrey Zimmerman
Michael J. Constantino
Catherine F. Eubanks
Associate Editors

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