

1

The role of case studies in the development of theory and practice in counselling and psychotherapy

Counselling and psychotherapy emerged as discrete areas of professional activity in the late 19th and early 20th centuries (Cushman 1995; McLeod 2009). At the time when counselling and psychotherapy were becoming established, research in psychology was almost entirely focused on the laboratory study of processes of memory, attention and learning, and had not reached the stage of examining real-world applied problems. There were few methods available for evaluating the effectiveness of therapy, or exploring the processes that were associated with good or poor outcome therapy. The only option available to Sigmund Freud and other pioneers of psychotherapy who sought to analyse their practice, was to follow the example of the medical profession, and write up their work in the form of detailed clinical case studies. Since that period, case studies have remained a central strand of the knowledge base for counselling and psychotherapy. Case reports have had a significant impact on the field of counselling and psychotherapy in a variety of ways, and an appreciation of the different styles and purposes of case study report is necessary in order to be able to make sense of current debates around this methodological approach. The chapter offers an overview of the various forms of case study knowledge in counselling and psychotherapy that have been developed over the past century.

The use of case study methods in developing a knowledge base for counselling and psychotherapy

Case study methods have been used in counselling and psychotherapy to generate many different kinds of knowledge. Case study reports have

contributed to research, theory-building, training, organizational and political change, marketing and public awareness. It is not possible to be a counsellor or psychotherapist, or to be a lay person who is interested in therapy, and not to have been influenced by case study evidence in some way.

Documenting, evaluating and disseminating new approaches to therapy

When an innovative approach to therapy is first developed, it is necessary to be able to provide evidence of how it operates, and how effective it is, in order to persuade colleagues of its potential. At this stage in the development of an approach, it is likely that there are few practitioners actually using the new methods. It is therefore hard to carry out an extensive study, involving many cases. In recent times, it would also be difficult to secure ethical approval to conduct a large-scale study of an unproven method. In these circumstances, the only way to generate convincing evidence of the possible value of a new approach is to publish case study reports. The history of counselling and psychotherapy encompasses many examples of case reports that were highly influential during the formative phase of new treatment approaches. The early development of psychoanalysis, by Sigmund Freud and his colleagues, depended on presentation and discussion of case studies at conferences and seminars, and their eventual publication (Freud 1901, 1909, 1910). The establishment of behaviour therapy as a credible approach was built on a series of case studies by Joseph Wolpe (1958). Likewise the sex therapy of Masters and Johnson (1970) and the use of eye movement desensitization and reprocessing (EMDR; McCann 1992; Shapiro 1989) also depended on the publication of plausible and persuasive case reports. Typically, the publication of case reports leads to further research, with larger samples, and to the provision of training programmes for practitioners who are convinced by the case evidence and want to learn how to use the new methods.

Contributing to public understanding of counselling and psychotherapy

Counselling and psychotherapy are forms of help that require active commitment on the part of users, who need to attend regular sessions, explore painful areas of personal experience, and put therapeutic

learning into practice in everyday life situations. They are also forms of help whose legitimacy cannot be taken for granted within society – there are many critics who deny the basic validity and worth of therapy (Furedi 2004). It has always been essential therefore, to find ways to let members of the general public know about how therapy works. There have been several memorable case studies that have had a significant impact on how the general public makes sense of therapy. In the 1960s, the spirit of client-centred therapy was captured effectively in the best-selling case study *Dibs*, written by Virginia Axline (1971), who had been a colleague and student of Carl Rogers. In the 1990s, many people became convinced about the value of therapy by reading the case studies in *Love's Executioner*, by Irvin Yalom (1989). More recently, the drama and impact of psychotherapy have been disseminated to a wider public through the series of case study books edited by Jeffrey Kottler and Jon Carlson (2002, 2003, 2006, 2008, 2009) and the TV series *In Treatment*.

The development of theory

Theories of therapy necessarily involve complex sets of propositions that seek to reflect the way different factors interact and unfold over time. One of the most effective ways in which to develop and test theoretical ideas is through analysis of individual cases; it is at the level of the case that the operation of different factors can best be observed. By contrast, research that attempts to analyse what is happening at the level of a single session, or an event within a session, is in danger of either failing to take into account important contextual factors, or of not being able to access sufficient instances of the phenomenon being examined. There are many examples within the counselling and psychotherapy literature of the use of case studies as a means of advancing theoretical understanding. The historical development of psychoanalysis and psychodynamic psychotherapy has been built around discussion of the theoretical implications of detailed case presentations. Within the client-centred/person-centred tradition, Carl Rogers published transcripts of some of his cases, which have served as the basis for further investigation into the process of client-centred/person-centred therapy (Farber et al. 1996). One of the major areas of theoretical debate within the past 30 years has been around the relative contribution to therapy outcome of non-specific or 'common factors' (e.g., instillation of hope), as against specific

therapeutic techniques (e.g., the use of systematic desensitization). Hill (1989) carried out an analysis of eight cases of brief psychotherapy, focusing on this theoretical question. A recent trend within the use of case analysis as a means of developing theory, has been the practice of comparing good outcome and poor outcome cases, as a strategy for identifying theoretical factors that are associated with effective practice. This approach was used by Watson, Goldman and Greenberg (2007) in the development of a model of the effectiveness of emotion focused therapy (EFT). The work of Bill Stiles and his colleagues, into the assimilation model of therapeutic change, provides a further example of how a new theoretical perspective can be articulated through case analyses (Stiles 2002).

Drawing attention to critical issues and areas of practice

A notable area of application of case study methodology in counselling and psychotherapy has been its use in highlighting issues that have been previously neglected within the professional and research literature. When a practitioner becomes aware of a topic that he or she feels deserves to be taken more seriously by colleagues, one option is to write and publish a 'personal opinion' article. However, a more convincing alternative strategy is to write and publish a detailed case example. There are several areas within the therapy field where case studies have been used both to convince sceptical colleagues to give more serious consideration to a particular issue, and to function as a rallying point for like-minded colleagues. Sex in the Therapy Hour: A Case of Professional Incest is a detailed case study of an episode of sexual exploitation of a client (Bates and Brodsky 1989), which had a significant impact on changing the climate of opinion around the serious nature of client-therapist sexual contact. *Shouldn't I Be Feeling Better by Now? Client Views of Therapy*, edited by Yvonne Bates (2006), includes several compelling case descriptions of emotional and financial manipulation of clients by their therapists. There have also been collections of case studies by practitioners who wish to draw attention to, and foster debate around, practice issues such as the use of integrative approaches to therapy (Stricker and Gold 2006), the role of spirituality in therapy (Richards and Bergin 1997), counselling people with disabilities (Blotzer and Ruth 1995), combining psychotherapy with drug treatment (Beitman 1991) and therapy with older people (Knight 1992).

Exploring the counselling and psychotherapy case study evidence base: where to start?

Box 1.1

For counselling and psychotherapy practitioners and students who wish to become more research-informed, it is fairly easy to know where to start. Excellent general overviews of current research findings are available in Cooper (2008), Lambert (2004), Timulak (2008) and Tryon (2002), and in the series of research reviews published by the British Association for Counselling and Psychotherapy. More specific searches can be conducted through PsycInfo and other on-line bibliographic search tools. It is harder to access case-based knowledge about counselling and psychotherapy, which is often ignored in systematic reviews. One of the aims of the present book is to draw attention to high-quality 'exemplar' therapy case studies. Miller (2004) includes an appendix that lists a large number of therapy case studies. There are two journals that specialize in therapy case study reports: *Clinical Case Studies* and *Pragmatic Case Studies in Psychotherapy*. The latter is an on-line journal, and therefore readily accessible. In addition, the *Counselling and Psychotherapy Research* journal and *Psychotherapy Research* have published several case studies, and the American Psychological Association (APA) has published edited collections of therapy case studies on a range of topics.

Extending and enhancing the interpretability of large-scale outcome studies

In relation to evaluating the effectiveness of different therapies, it is widely recognized that large-scale randomized controlled studies have a unique value, in being able to demonstrate clear links between specific causal factors (e.g., the type of therapy being provided) and outcomes. However, the meaning of the results obtained from large-scale studies may sometimes be difficult to interpret, because they consist of generalisations over a large number of cases. It can therefore be useful, when conducting a large-scale study, to build in the possibility of carrying out subsequent in-depth single case analyses in order to explore the meaning of any contradictory findings that may emerge. A good example of this use of case study methods has been within the Vanderbilt I study, carried out by Strupp and Hadley (1979), in which the effects of psychotherapy on socially isolated young men were evaluated. In a series of cases studies that were carried out following primary analyses of the outcome data, Strupp (1980 a, b, c, d) compared the process of therapy

that occurred in pairs of good outcome and poor outcome cases that were seen by the same therapists. A further example of this use of case study methods can be found within the Sheffield outcome study of the effectiveness of time-limited psychotherapy for people with work-related depression (Shapiro and Firth 1987; Shapiro and Firth-Cozens 1990). The publication of case studies from this project (Firth-Cozens 1992; Parry et al. 1986) made it possible to illustrate and explore in detail the way that therapy was helpful for this client group. An advantage of these 'research-based' case studies is that a great deal of information is available on the case. Also, it is possible to determine how typical the case is, in relation to other cases included in the main study. In contrast to the Vanderbilt and Sheffield research programmes, there are many large-scale studies that have yielded results that remain hard to interpret, in the absence of accompanying case analysis. One of the reasons for the enduring influence of these particular programmes of research is that they have provided a combination of group and case analysis which, taken together, offer an opportunity for readers to arrive at a comprehensive, critical understanding of the results that were obtained.

The use of case studies in training

Possibly the most widespread use of case studies has been as a method of illustrating and communicating knowledge and understanding of an approach to therapy to those who are interested in learning how to practise it (Kutash and Wolf 1986; Wedding and Corsini 1979). This use of case study evidence can vary a great deal in its level of complexity and detail; some authors make use of brief case vignettes, while others offer lengthy extracts of case material. A further way in which case studies are used in counselling and psychotherapy training is in the assessment of competence of trainees. In most training courses students are required to submit a case study of their work with a client, as a means of demonstrating their capacity to provide an effective therapeutic relationship, deal with professional and ethical issues arising in the course of the therapy, implement appropriate therapeutic interventions and engage in critical reflection on practice. Case studies are unique, as assessment tools, in enabling examination of the extent to which the student has been able to integrate component elements of competency into a coherent whole.

Developing competence in case formulation: the practical application of case study skills

Box 1.2

Within most approaches to counselling and psychotherapy, it is usual for the therapist to arrive at a *case formulation* following a period of assessment, or within the first few sessions of therapy (Eells 2007a; Johnstone and Dallos 2006). This formulation typically consists of an analysis of the nature and severity of the client's problems, the factors that have caused these problems and which currently maintain them, the strengths or limitations of the client and his/her life situation in relation to addressing the problems and the possible therapeutic interventions or strategies that might be of value in helping the client to overcome his or her life difficulties. The formulation may be arrived at through informal personal reflection on the part of the therapist, or may be produced in a more formal manner (e.g., following a standard protocol). The formulation may or may not be explored with the client, and may or may not form the basis for a therapy contract. Although there exist different styles of case formulation, associated with different therapy traditions, there is a growing consensus that accurate and valid formulation plays an important role in therapy. Tracey Eells and his colleagues have studied the skills used by therapists in arriving at formulations, and the ways in which practitioners can be trained to produce good quality formulations (Eells and Lombart 2003; Eells et al. 2005). Their findings suggest that many experienced practitioners have difficulty in generating plausible and practically useful conclusions on the basis of case information, but that brief exposure to basic principles of case analysis can enable them to become more competent in relation to these tasks. The growing literature on case formulation in counselling and psychotherapy provides a concrete example of how the inclusion of case study methodology and research within both basic training and continuing professional development can make a direct contribution to clinical effectiveness.

The distinctive contribution of case-based knowledge

Within the field of counselling and psychotherapy the case study is a flexible method of inquiry that has been used for a multiplicity of purposes, encompassing evaluation, theory development and education. However, there are other research methods, such as randomized trials, surveys and qualitative interview studies, that also play an important role in the development of theory, practice and training in therapy. What is the distinctive contribution that is made by case study research,

in contrast to these other methodologies? There are four factors that help to explain why case studies have been, and remain, critically important in relation to the task of building a knowledge base for therapy. First, case studies offer a form of *narrative knowing*. Second, they provide an efficient way of representing and analysing *complexity*. Third, case studies generate knowledge-in-context. Finally, case studies are an essential tool for understanding *practical expertise in action*. These ideas are explored in the following sections.

The case study as a form of narrative knowing

Jerome Bruner, one of the most influential figures in contemporary psychology, was responsible for introducing the distinction between narrative and paradigmatic ways of knowing. Paradigmatic knowledge consists of abstract, general laws or general 'if-then' statements. There are many examples of paradigmatic knowledge in the field of psychotherapy, such as Sigmund Freud's theory that 'oral' traits in adult life are the result of patterns of feeding in infancy, Carl Rogers' formulation of the 'necessary and sufficient conditions' for positive personality change, or statements that cognitive-behavioural therapy (CBT) is the most effective approach to working with panic disorder. By contrast, narrative knowing consists of stories that are told about various aspects of everyday experience. A story, or narrative, consists of a sequence of events ('I did this then she said that ...') that allow the person to organize experience in a way that reflects human purpose and intentionality ('... and then I walked out *because* ...'), and also to evaluate it (the 'moral' of the story). Bruner (1986, 1990) pointed out that psychology had constructed a science that was based on paradigmatic knowledge, and had increasingly ignored the role of narrative knowledge. Just as people in their everyday lives draw on a mix of abstract rules and rich narrative accounts, a balanced approach to scientific and professional knowledge in the social sciences and psychology also requires a combination of both types of knowing (Polkinghorne 1995). One of the central arguments for an important role for case study research in counselling and psychotherapy, therefore, is that it provides a source of narrative knowing that is needed to complement the findings of studies that generate abstract or paradigmatic knowledge. It is not that one form of knowing is better than the other, but that human sense-making (in any field of endeavour) requires both of these modalities to exist in creative interplay.

The case study as a means of representing complexity

One of the key choice-points in designing a research study is to decide where to position the investigation on a dimension of *simplicity–complexity*. On the whole, *extensive* research studies, such as surveys or practice-based outcome studies, collect a small number of observations from a large number of subjects or participants. Although in principle it is possible in such research to collect many observations from each participant, very large sample sizes are required in such studies if multivariate analysis is to have any hope of yielding statistically significant results. In practice, therefore, extensive studies with large samples tend to focus on 20 or fewer observation or measurement points for each participant. In *intensive* research, such as case studies and many qualitative studies, there can be several hundred observations or measures collected for an individual participant. What this means is that case studies are well placed to capture, describe and analyse evidence of *complex* processes. This feature of case study research in counselling and psychotherapy is clearly attractive and valuable to many researchers, since many readers of large-sample extensive studies bemoan the fact that these studies usually over-simplify what happens in therapy. On the other hand, complexity also presents a challenge or danger for researchers and research audiences – too much complexity can become chaotic and meaningless.

Contextuality as an essential feature of case study research

A case study involves investigating an entity within its natural context. This approach can be compared with what happens in laboratory experiments or in analogue studies in counselling and psychotherapy, in which a controlled situation is created in order to make it possible to test hypotheses about cause–effect linkages. In surveys, large-scale naturalistic studies and randomized trials, the investigation may be based in a real-world context, but there is typically little information collected or reported about contextual factors. Yin (2009: 18) defines a case study as:

... an empirical inquiry that investigates a contemporary phenomenon in depth and within its real-life context, especially when the boundaries between phenomenon and context are not clearly evident.

The key idea here is that, in any intensive study of a specific case, the closer the 'case' is examined, the less certainty there is about the boundaries of the case, in terms of information that may be relevant to an understanding of the case. For example, in counselling and psychotherapy case study research, there often arise questions concerning the therapeutic impact of events and experiences that were not part of the actual therapy approach that was delivered. There are also many theoretically and practically interesting questions about when the case begins and ends (At the final therapy session? Six months following the final therapy session?). In analysing the factors that influenced outcome in a specific therapy case, it may become apparent that improvements in the client's condition may have been due to getting a new job, or to conversations with the assistant who carried out research interviews. Because the aim is to arrive at a comprehensive understanding of a single case, by creating a rich data set, many of these 'fuzzy boundary' factors are observed and recorded, and become relevant in the analysis. By contrast, in studies with large numbers of participants, there is no scope for such factors to become part of the data set, or to play a role in analysis. In some therapy case studies, the researcher or author makes a specific effort to collect information about the context in which the therapy takes place. However, even when the researcher or author does not prioritise contextuality, the fact that there is more space in a case study to describe the client, the therapist, and therapy, means that readers are provided with a more in-depth understanding of the context of the case.

Describing and analysing practical expertise in action

A further distinctive aspect of case study research arises from reflection on the question: 'What is a case?' (Ragin and Becker 1992). The word 'case' has a wide range of applications within the English language. For example, in sociology, a single factory or neighborhood community may be treated as a 'case' for research purposes. In counselling and psychotherapy, the concept of a 'case' has a different meaning – it refers to some kind of treatment episode in which a person (or family group) receives help from a therapist. Therapy cases are therefore concerned not only with what happens in the life of the client or patient, but also with the application of professional knowledge on the part of the practitioner. If there was no practitioner involvement, we would not describe what went on as a *therapy* case, although it might be classifiable as, for instance, a case of depression or a case of post-traumatic stress disorder. The American psychologist Dan Fishman has argued that the systematic study of therapy cases can be used to build a *pragmatic* evidence base,

consisting of information on the assumptions, strategies and interventions that practitioners use when working with different types of clients. In an important book, *The Case for a Pragmatic Psychology*, Fishman (1999) argues that psychology (and by implication counselling and psychotherapy) have attempted to create a body of knowledge around positivist, experimental studies that are detached from everyday practice. His proposal for a pragmatic alternative makes use of research techniques from traditional psychological research, such as measurement tools, but integrates them into a postmodern, pluralistic approach to inquiry, that seeks to generate critical, reflective knowledge about what works in practice. Fishman (1999) points out that, in therapy as in other occupations, expert practitioners follow a cycle of assessing a situation or problem in terms of their conceptual framework, devising a plan of action, monitoring the effectiveness of their intervention and modifying their actions in the light of feedback. Having completed a case, the practitioner takes the practical knowledge of what worked (and didn't work) that he or she has gleaned from that case, and applies it to subsequent cases. Within the career of any individual practitioner, however, he or she will work with a limited number of cases. For Fishman (1999), good quality pragmatic case studies play a crucial role in the development of effective practice by allowing practitioners to gain access to a wider set of exemplar cases.

Narrative knowing, complexity, contextuality and the generation of pragmatic knowledge can be seen as representing distinctive features of case study research in counselling and psychotherapy. It is not inevitable that these characteristics are found in all therapy case studies. It is possible to conduct counselling and psychotherapy case studies that lack narrative impact, eschew complexity, neglect to address contextual factors, and make little contribution to pragmatic professional knowledge. The point is that, unlike other methodological approaches, case studies at least have the potential to yield knowledge and understanding that is imbued with these values.

The case study tradition in other occupations and disciplines

For anyone interested in carrying out case research, or using case studies in teaching, it can be helpful to be aware that there exists a substantial literature on the methods and applications around case-based knowledge in other disciplines. Sources of information about these alternative traditions of case study research can be found in Bromley (1986), Byrne and Ragin (2009), Gerring

(Continued)

Box 13

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(2006) and Yin (2009). There are many aspects of case study inquiry that have been developed much more fully within these other professional and academic communities, than within psychology, counselling and psychotherapy. Within law, for example, an understanding of how complex case data can be analysed, and what counts as evidence within a case analysis, are routine accomplishments for practising lawyers and judges. Educational researchers have been interested in how case-based evidence can influence policy-making. Medicine and management studies have devised creative applications of case study analysis to help students to develop problem-solving skills. For the most part, counselling and psychotherapy case study researchers have made only tentative connections between their own work, and these wider domains.

The case study tradition in medicine

Case studies are widely accepted within medicine as having scientific as well as educational value. The *British Medical Journal* operates a special *Case Reports* section, to promote the publication of this type of article. An important part of the rationale for this initiative is an appreciation that large-scale randomised trials are capable of missing vital evidence – for example, decisions to withdraw drugs from the market because of harm are usually made on scientific evidence coming from spontaneous case reports (or case series) rather than randomised controlled trials. The author guidelines for *BMJ Case Reports* invites contributions under the following headings:

- reminder of important clinical lesson
- novel treatment (new drug/intervention; established drug/procedure in new situation)
- findings that shed new light on the possible pathogenesis of a disease or an adverse effect
- learning from errors
- unusual presentation of more common disease/injury
- myth exploded
- rare disease
- new disease
- novel diagnostic procedure
- unusual association of diseases/symptoms
- unexpected outcome (positive or negative) including adverse drug reactions.

Although these are medical model categories, it is not difficult to see how they are translatable into issues and topics that make sense within the field of counselling and psychotherapy (and which are rarely captured in the current literature).

Box 1.4

Conclusions

Case-based evidence represents a form of practice-based evidence that has been central to the development of knowledge in counselling and psychotherapy. The fact that a wide range of applications of case study methodology can be found within the counselling and psychotherapy literature, shows that this is a methodology that plays a crucial role within the field. This chapter has considered the question: Are case studies necessary? The evidence suggests that case studies are indeed a necessary part of the overall literature: case studies fulfil a number of important functions, and they generate a unique type of knowledge. But, this answer leads in turn to further questions: How is it possible to do case studies well? What is best practice in case study research and inquiry? How is it possible to assess whether a case study is plausible and credible, or biased and worthless? The following chapter begins to address these issues, by reviewing the movement away from clinical case studies based solely on therapist notes, toward a more systematic and rigorous approach to generating and analysing case-based data.

Topics for reflection and discussion

- 1 In what ways have case studies influenced your own practice as a therapist? Take a few minutes to reflect, and write brief notes, around the following tasks. Identify three cases that have influenced the way that you think about therapy, and work with clients. Try to identify cases based on different types of evidence: e.g., personal cases from your own practice, clinical case studies, research-based cases. For each case, note down *what you have learned from the case in terms of principles for practice*.
- 2 Identify an area of practice in which you are familiar with current research evidence. This could be an issue around the effectiveness of counselling or psychotherapy for a particular client group, or a therapy process issue such as the role of empathy or the working alliance. Look at one or two sources that review the evidence in relation to the area that you have selected. Alternatively, choose an area of research that is reviewed in Lambert (2004) or Cooper (2008). To what extent, and in what ways, do the texts you have looked at incorporate case study evidence into their reviews? What are the implications, for therapy theory and practice, of the ways that these reviewers have dealt with case-based knowledge?

Recommended further reading

The two books that most clearly explain why case study knowledge is an essential part of the evidence base for counselling and psychotherapy theory, practice and training are:

Fishman, D.B. (1999) *The Case for a Pragmatic Psychology*. New York: New York University Press.

Miller, R.B. (2004) *Facing Human Suffering: Psychology and Psychotherapy as Moral Engagement*. Washington, DC: American Psychological Association (particularly ch. 6).

Issues around the significance of the simplicity–complexity dimension, and the role of context in counselling and psychotherapy research, are explored in:

Russell, R.L. (ed.) (1994) *Reassessing Psychotherapy Research*. New York: Guilford Press.

Seikkula, J. and Arnkil, T.E. (2006) *Dialogical Meetings in Social Networks*. London: Karnac.